



2024 Access 3-Tier Prescription Drug List

This Prescription Drug List (PDL) outlines the most commonly prescribed medications for certain conditions and organizes them into cost levels, also known as tiers. This PDL is accurate as of Sept. 1, 2024, and is subject to change after this date. The next anticipated update will be in January 2025. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan¹ you choose and the effective date of the plan.

For more information:



Visit the member website listed on your member ID card for information to help you better understand and manage your medications.

- View your current benefits
- Search for drug prices and lower-cost alternatives
- You could save time and money using home delivery through Optum



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

**United
Healthcare®**
Oxford

Effective Sept. 1, 2024

¹ Optum Rx is the administrator of your Oxford pharmacy benefit plan.

Note: Specialized non-standard infant formulas and nutritional supplements may be subject to prior authorization. Please see your Summary of Benefits and Coverage (SBC) for specifics.

In certain documents, the Prescription Drug List (PDL) was referred to as the "Preferred Drug List (PDL)." This change in terms does not affect your benefit coverage.

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Your Prescription Drug List

This PDL outlines covered medications and organizes them into cost levels, also known as tiers. An important part of the PDL is giving you choices so you and your doctor can choose the best course of treatment for you.

Go to your member website for drug information.

Since the PDL may change, we encourage you to visit the member website listed on your member ID card. It's the best source for accessing up-to-date information about the medications your pharmacy benefit covers, possible lower-cost options and cost comparisons.

We want to help 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 below.

What is a PDL?

This document is a list of covered medications. They are placed into cost levels known as tiers. The PDL includes both brand-name and generic prescription medications approved by the Food and Drug Administration (FDA).

Please note: Where differences are noted between this PDL and your health plan documents, the health plan documents will rule. Please look at your health plan documents to see which medications are covered under your health plan. You may also log in to the member website listed on your member ID card or call us at the toll-free phone number on your member ID card for more information.

How do I use my PDL?

Bring your PDL with you when you see your doctor. When choosing a medication, you and your doctor should consult this guide. It will help you and your doctor choose the most cost-effective prescription drugs. This guide will also help you know if a medication has special programs that apply to it.

When a prescription drug product is not included in the PDL, you or your representative may request an exception to gain access to the prescription drug product. To make a request, contact us in writing or call the toll-free phone number on your member ID card. We will notify you of our determination within 72 hours.

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 health plan. This is how much you will pay when you fill a prescription. 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. You should discuss these options with your doctor.

Check your health plan documents to find your specific pharmacy plan costs.

| \$ | Drug tier | Includes | Helpful tips |
|------|--------------------------------------|---------------------------|---|
| \$ | Tier 1 Your lowest cost | Some brands and generics. | Use Tier 1 drugs for the lowest out-of-pocket costs. |
| \$\$ | Tier 2 Your mid-range cost | Preferred brands. | Use Tier 2 drugs instead of Tier 3 to help reduce your out-of-pocket costs. |

| \$ | Drug tier | Includes | Helpful tips |
|--------|------------------------------------|----------------------------------|--|
| \$\$\$ | Tier 3 Your highest cost | Higher cost brands and generics. | Many Tier 3 drugs have lower-cost options in Tiers 1 or 2. Ask your doctor if they could work for you. |

Please note: Some plans may have 2 or 4 tiers, while others may not have any. If you have a high-deductible health plan, the tier cost levels may apply once you hit your deductible. Refer to your enrollment and plan materials on the member website listed on your member ID card, or call us at the toll-free phone number on your member ID card for more information about your health plan.

Diabetic supplies and prescription medications to treat diabetes may be subject to different cost-share arrangements. Please see your Summary of Benefits and Coverage (SBC) for specifics.

When does the PDL change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when a generic becomes available and is placed in a lower tier than the brand.
- Medications may move to a higher tier or be removed from the PDL most often upon your group's renewal.
- When a medication changes tiers, you may have to pay a different amount for that medication.

For the most up-to-date list, call the toll-free phone number on your ID card.

Programs and limits

Some medications are in 1 or more of our pharmacy benefit programs. Your health plan determines how these medications are covered and may differ from what is noted in the PDL.

Prior authorization (sometimes referred to as notification or precertification) required² – Your doctor is required to provide additional information to us to determine coverage.

Health care reform Prev – This medication is part of a health care reform Prev benefit and may be available at no cost to you.

Supply limit – Amount of medication covered per copayment or in a specific time period.

Step therapy – Trial of a different medication is required before another medication may be covered.

Specialty medication – Specialty medications treat complex or rare conditions and may require special storage and handling.

To learn more about a pharmacy program or to find out if it applies to you, please visit the member website listed on your member ID card or call us at the toll-free phone number on your member ID card. TTY users can dial **711**.

Should I talk to my doctor about over-the-counter (OTC) medications?

An OTC medication may be the right treatment for some conditions. Talk to your doctor about available options.

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

Generic medications contain the same active ingredients (what makes the medication work) as brand-

² Depending on your benefit, you may have notification or precertification requirements for select medications.

³ This is not applicable for Connecticut Public Sector plans. For Connecticut commercial business, a prescription drug product that is therapeutically equivalent to an over-the-counter drug may be covered if it is determined to be medically necessary.

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.

What if my doctor writes a prescription for a brand-name medication?

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. For some health plans, if a brand-name medication is prescribed and a generic equivalent is available, your share of the cost may be the copayment PLUS the cost difference between the brand-name medication and its generic equivalent. Visit the member website listed on your member ID card to make sure.

Are you taking a specialty medication?

Take advantage of personalized support designed to help you get the most out of your benefit plan. Visit the member website listed on your member ID card or call the toll-free phone number on your member ID card to learn more. If you're taking a specialty medication that is on Tier 3, call us at the toll-free phone number on your member ID card to talk with a pharmacist about finding lower-cost options or a financial assistance program.

How do I get updated information about my pharmacy benefit?

Since the PDL may change during your plan year, we encourage you to visit the member website listed on your member ID card or call us at the toll-free phone number on your member ID card for more current information.

Prescription delivery options

You have choices on where to fill prescriptions you take regularly. You have the option to fill at a retail pharmacy or have them mailed to your home. It's up to you. Optum® Home Delivery is one of your network options. There may be other options in your network. Sign in at myuhc.com > *Pharmacies & Prescriptions* > *Find a pharmacy*.

How do I locate and fill a prescription through the mail order pharmacy?

UnitedHealthcare offers a Mail Order Pharmacy Program through Optum Rx. Here's how to fill prescriptions through Optum Home Delivery.

E-prescribe

Ask your prescribing provider to electronically send new prescriptions to Optum Home Delivery for up to a 90-day supply. Or we can call your doctor for you.

Ordering prescriptions for home delivery

- **Online:** Visit myuhc.com > *Pharmacies Prescriptions* > *Rx profile* to set up an account. You will need to provide your payment method (credit card, debit card or bank account). Next go to *My prescriptions* tab and select the medication you want ordered through Optum Home Delivery.
- **Phone:** Call Optum Home Delivery at the number on the back of your member ID card, any day, time.
- **Mail:** Download an order form at optumrx.com > *Information center*. Mail the completed form along with your prescription and applicable mail order pharmacy copayment. Make check or money order to Optum. No cash please.

New and refill prescription orders should typically arrive within 5 days from the date Optum Home Delivery receives the completed order.

Important Tip: If you are starting a new Prescription Drug Product, please request 2 prescriptions from your physician. Have 1 filled immediately at a network pharmacy while mailing the second prescription to Optum Home Delivery. Once you receive your medication through the mail order pharmacy program, you should stop filling the prescription at the network pharmacy.

Learn more

Call the toll-free member phone number listed on your member ID card, or visit your member website for more information.

Nondiscrimination notice and access to communication services

Oxford Health Plans (CT), Inc. and Oxford Health Insurance, Inc. do not treat members differently because of sex, age, race, color, disability or national origin.

If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator.

Online: UHC_Civil_Rights@uhc.com

Mail: Civil Rights Coordinator
Oxford Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 84130

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days.

If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free phone number listed on your member ID card, TTY **711**, Monday through Friday, 8 a.m. to 6 p.m.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

Online: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

Phone: Toll free **1-800-368-1019, 1-800-537-7697** (TDD)

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

We provide free services to help you communicate with us, such as letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your member ID card, TTY **711**, Monday through Friday, 8 a.m. to 6 p.m.

Multi-language interpreter services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說**中文 (Chinese)**，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어(**Korean**)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

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.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является русским (**Russian**). Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

فتاھلما مقرر ىل ع لاصتالاء اجرلا. لفل ؤحاتم ؤين اجملا ؤيوغللا ؤدع اسملء تامدخ ناف، (**Arabic**) ؤي برعلا ؤدحتت تنك اذا: ؤي بونت ؤي ووضعلا فرعم ىل ع دوجوملا ىن اجملا

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia l'**italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

注意事項：日本語(**Japanese**)を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

نفلت مرامش اب افطل. دش اب ىم امش راى تخا رد ناگىار روط هب ىن ابز دادما تامدخ، تسا (**Farsi**) ى سراف امش نابز رگا: هجوت دىري گب سامت مدش دىق امش ىي اسانش تراک ىور هک ىن اگىار

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

CEEBOOM: 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: ប្រសិនបើអ្នកនិយាយ**ភាសាខ្មែរ (Khmer)**សំរាប់ជំនួយភាសាជាយកតិកតិកថ្ងៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខតិកតិកថ្ងៃ ដើម្បីមាននូវលក្ខណៈសញ្ញាណប័ណ្ណរបស់អ្នក។

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'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yáníiti'go, saad bee áka>anída>awo>ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shqódi ninaaltsoos nít'i'izí bee nééhozinígíí bine'déę> t'áá 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.

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics | ACTIQ LOZ 1200MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 1200 MCG | Tier 3 | X | X | X | |
| Analgesics | ACTIQ LOZ 1600MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 1600 MCG | Tier 3 | X | X | X | |
| Analgesics | ACTIQ LOZ 200MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 200 MCG | Tier 3 | X | X | X | |
| Analgesics | ACTIQ LOZ 400MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 400 MCG | Tier 3 | X | X | X | |
| Analgesics | ACTIQ LOZ 600MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 600 MCG | Tier 3 | X | X | X | |
| Analgesics | ACTIQ LOZ 800MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 800 MCG | Tier 3 | X | X | X | |
| Analgesics | ALLZITAL TAB 25-325MG | BUTALBITAL-ACETAMINOPHEN TAB 25-325 MG | Tier 3 | | X | | |
| Analgesics | ANAPROX DS TAB 550MG | NAPROXEN SODIUM TAB 550 MG | Tier 3 | | | X | |
| Analgesics | APADAZ TAB 4.08-325 | BENZHYDROCODONE HCL-ACETAMINOPHEN TAB 4.08-325 MG | Tier 3 | | X | | |
| Analgesics | APADAZ TAB 6.12-325 | BENZHYDROCODONE HCL-ACETAMINOPHEN TAB 6.12-325 MG | Tier 3 | | X | | |
| Analgesics | APADAZ TAB 8.16-325 | BENZHYDROCODONE HCL-ACETAMINOPHEN TAB 8.16-325 MG | Tier 3 | | X | | |
| Analgesics | APAP/CAFFEIN TAB DIHYDROC | ACETAMINOPHEN-CAFFEINE-DIHYDROCODEINE TAB 325-30-16 MG | Tier 1 | | X | | |
| Analgesics | APAP/CODEINE SOL 120-12/5 | ACETAMINOPHEN W/ CODEINE SOLN 120-12 MG/5ML | Tier 1 | | X | | |
| Analgesics | APAP/CODEINE TAB 300-15MG | ACETAMINOPHEN W/ CODEINE TAB 300-15 MG | Tier 1 | | X | | |
| Analgesics | APAP/CODEINE TAB 300-30MG | ACETAMINOPHEN W/ CODEINE TAB 300-30 MG | Tier 1 | | X | | |
| Analgesics | APAP/CODEINE TAB 300-60MG | ACETAMINOPHEN W/ CODEINE TAB 300-60 MG | Tier 1 | | X | | |
| Analgesics | APAP-CAFFEIN CAP DIHYDROC | ACETAMINOPHEN-CAFFEINE-DIHYDROCODEINE CAP 320.5-30-16 MG | Tier 1 | | X | | |
| Analgesics | ARTHROTEC 50 TAB | DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 50-0.2 MG | Tier 3 | | | X | |
| Analgesics | ARTHROTEC 75 TAB | DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 75-0.2 MG | Tier 3 | | | X | |
| Analgesics | ASCOMP/COD CAP 30MG | BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG | Tier 1 | | X | | |
| Analgesics | BAC TAB | BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG | Tier 1 | | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | BELBUCA MIS 150MCG | BUPRENORPHINE HCL BUCCAL FILM 150 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Analgesics | BELBUCA MIS 300MCG | BUPRENORPHINE HCL BUCCAL FILM 300 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Analgesics | BELBUCA MIS 450MCG | BUPRENORPHINE HCL BUCCAL FILM 450 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Analgesics | BELBUCA MIS 600MCG | BUPRENORPHINE HCL BUCCAL FILM 600 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Analgesics | BELBUCA MIS 750MCG | BUPRENORPHINE HCL BUCCAL FILM 750 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Analgesics | BELBUCA MIS 75MCG | BUPRENORPHINE HCL BUCCAL FILM 75 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Analgesics | BELBUCA MIS 900MCG | BUPRENORPHINE HCL BUCCAL FILM 900 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Analgesics | BENZHY/ACETA TAB 4.08-325 | BENZHYDROCODONE HCL-ACETAMINOPHEN TAB 4.08-325 MG | Tier 3 | | X | | |
| Analgesics | BENZHY/ACETA TAB 6.12-325 | BENZHYDROCODONE HCL-ACETAMINOPHEN TAB 6.12-325 MG | Tier 3 | | X | | |
| Analgesics | BENZHY/ACETA TAB 8.16-325 | BENZHYDROCODONE HCL-ACETAMINOPHEN TAB 8.16-325 MG | Tier 3 | | X | | |
| Analgesics | BUPAP TAB 50-300MG | BUTALBITAL-ACETAMINOPHEN TAB 50-300 MG | Tier 3 | | X | X | |
| Analgesics | BUPRENORPHIN DIS 10MCG/HR | BUPRENORPHINE TD PATCH WEEKLY 10 MCG/HR | Tier 1 | X | X | | |
| Analgesics | BUPRENORPHIN DIS 15MCG/HR | BUPRENORPHINE TD PATCH WEEKLY 15 MCG/HR | Tier 1 | X | X | | |
| Analgesics | BUPRENORPHIN DIS 20MCG/HR | BUPRENORPHINE TD PATCH WEEKLY 20 MCG/HR | Tier 1 | X | X | | |
| Analgesics | BUPRENORPHIN DIS 5MCG/HR | BUPRENORPHINE TD PATCH WEEKLY 5 MCG/HR | Tier 1 | X | X | | |
| Analgesics | BUPRENORPHIN DIS 7.5/HR | BUPRENORPHINE TD PATCH WEEKLY 7.5 MCG/HR | Tier 1 | X | X | | |
| Analgesics | BUPRENORPHIN SUB 2MG | BUPRENORPHINE HCL SL TAB 2 MG (BASE EQUIV) | Tier 1 | | X | | |
| Analgesics | BUPRENORPHIN SUB 8MG | BUPRENORPHINE HCL SL TAB 8 MG (BASE EQUIV) | Tier 1 | | X | | |
| Analgesics | BUT/APAP/CAF CAP | BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-325-40 MG | Tier 1 | | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics | BUT/APAP/CAF CAP | BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-300-40 MG | Tier 1 | | X | | |
| Analgesics | BUT/APAP/CAF CAP CODEINE | BUTALBITAL-ACETAMINOPHEN-CAFF W/ COD CAP 50-300-40-30 MG | Tier 1 | | X | | |
| Analgesics | BUT/APAP/CAF CAP CODEINE | BUTALBITAL-ACETAMINOPHEN-CAFF W/ COD CAP 50-325-40-30 MG | Tier 1 | | X | | |
| Analgesics | BUT/APAP/CAF TAB | BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG | Tier 1 | | X | | |
| Analgesics | BUT/ASA/CAF/ CAP COD 30MG | BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG | Tier 1 | | X | | |
| Analgesics | BUT/ASA/CAF/ CAP CODEINE | BUTALBITAL-ASPIRIN-CAFF W/ CODEINE CAP 50-325-40-30 MG | Tier 1 | | X | | |
| Analgesics | BUT/ASA/CAFF CAP | BUTALBITAL-ASPIRIN-CAFFEINE CAP 50-325-40 MG | Tier 1 | | X | | |
| Analgesics | BUTAL/APAP CAP 50-300MG | BUTALBITAL-ACETAMINOPHEN CAP 50-300 MG | Tier 3 | | X | X | |
| Analgesics | BUTAL/APAP CAP 50-300MG | BUTALBITAL-ACETAMINOPHEN CAP 50-300 MG | Tier 1 | | X | X | |
| Analgesics | BUTAL/APAP TAB 50-325MG | BUTALBITAL-ACETAMINOPHEN TAB 50-325 MG | Tier 1 | | X | | |
| Analgesics | BUTALB/ACETA TAB 50-300MG | BUTALBITAL-ACETAMINOPHEN TAB 50-300 MG | Tier 1 | | X | X | |
| Analgesics | BUTORPHANOL SOL 10MG/ML | BUTORPHANOL TARTRATE NASAL SOLN 10 MG/ML | Tier 1 | | X | | |
| Analgesics | BUTRANS DIS 10MCG/HR | BUPRENORPHINE TD PATCH WEEKLY 10 MCG/HR | Tier 3 | X | X | X | |
| Analgesics | BUTRANS DIS 15MCG/HR | BUPRENORPHINE TD PATCH WEEKLY 15 MCG/HR | Tier 3 | X | X | X | |
| Analgesics | BUTRANS DIS 20MCG/HR | BUPRENORPHINE TD PATCH WEEKLY 20 MCG/HR | Tier 3 | X | X | X | |
| Analgesics | BUTRANS DIS 5MCG/HR | BUPRENORPHINE TD PATCH WEEKLY 5 MCG/HR | Tier 3 | X | X | X | |
| Analgesics | BUTRANS DIS 7.5/HR | BUPRENORPHINE TD PATCH WEEKLY 7.5 MCG/HR | Tier 3 | X | X | X | |
| Analgesics | CAMBIA POW 50MG | DICLOFENAC POTASSIUM (MIGRAINE) PACKET 50 MG | Tier 3 | | | | |
| Analgesics | CATAFLAM TAB 50MG | DICLOFENAC POTASSIUM TAB 50 MG | Tier 3 | | | X | |
| Analgesics | CELEBREX CAP 100MG | CELECOXIB CAP 100 MG | Tier 3 | | X | X | |
| Analgesics | CELEBREX CAP 200MG | CELECOXIB CAP 200 MG | Tier 3 | | X | X | |
| Analgesics | CELEBREX CAP 400MG | CELECOXIB CAP 400 MG | Tier 3 | | X | X | |
| Analgesics | CELEBREX CAP 50MG | CELECOXIB CAP 50 MG | Tier 3 | | X | X | |
| Analgesics | CELECOXIB CAP 100MG | CELECOXIB CAP 100 MG | Tier 1 | | X | | |
| Analgesics | CELECOXIB CAP 200MG | CELECOXIB CAP 200 MG | Tier 1 | | X | | |
| Analgesics | CELECOXIB CAP 400MG | CELECOXIB CAP 400 MG | Tier 1 | | X | | |
| Analgesics | CELECOXIB CAP 50MG | CELECOXIB CAP 50 MG | Tier 1 | | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | CODEINE SULF TAB 30MG | CODEINE SULFATE TAB 30 MG | Tier 1 | | X | | |
| Analgesics | CODEINE SULF TAB 60MG | CODEINE SULFATE TAB 60 MG | Tier 1 | | X | | |
| Analgesics | CONZIP CAP 100MG | TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 100 MG | Tier 3 | | X | | |
| Analgesics | CONZIP CAP 200MG | TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 200 MG | Tier 3 | | X | | |
| Analgesics | CONZIP CAP 300MG | TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 300 MG | Tier 3 | | X | | |
| Analgesics | COXANTO CAP 300MG | OXAPROZIN CAP 300 MG | Tier 3 | | | X | |
| Analgesics | DAYPRO TAB 600MG | OXAPROZIN TAB 600 MG | Tier 3 | | | | |
| Analgesics | DICLO/MISOPR TAB 50-0.2MG | DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 50-0.2 MG | Tier 1 | | | | |
| Analgesics | DICLO/MISOPR TAB 75-0.2MG | DICLOFENAC W/ MISOPROSTOL TAB DELAYED RELEASE 75-0.2 MG | Tier 1 | | | | |
| Analgesics | DICLOFEN POT TAB 50MG | DICLOFENAC POTASSIUM TAB 50 MG | Tier 1 | | | | |
| Analgesics | DICLOFENAC CAP 25MG | DICLOFENAC POTASSIUM CAP 25 MG | Tier 1 | | X | | |
| Analgesics | DICLOFENAC CAP 35MG | DICLOFENAC CAP 35 MG | Tier 3 | | | | |
| Analgesics | DICLOFENAC POW 50MG | DICLOFENAC POTASSIUM (MIGRAINE) PACKET 50 MG | Tier 1 | | | | |
| Analgesics | DICLOFENAC TAB 100MG ER | DICLOFENAC SODIUM TAB ER 24HR 100 MG | Tier 1 | | | | |
| Analgesics | DICLOFENAC TAB 25MG | DICLOFENAC POTASSIUM TAB 25 MG | Tier 1 | | X | X | |
| Analgesics | DICLOFENAC TAB 25MG DR | DICLOFENAC SODIUM TAB DELAYED RELEASE 25 MG | Tier 1 | | | | |
| Analgesics | DICLOFENAC TAB 50MG DR | DICLOFENAC SODIUM TAB DELAYED RELEASE 50 MG | Tier 1 | | | | |
| Analgesics | DICLOFENAC TAB 75MG DR | DICLOFENAC SODIUM TAB DELAYED RELEASE 75 MG | Tier 1 | | | | |
| Analgesics | DIFLUNISAL TAB 500MG | DIFLUNISAL TAB 500 MG | Tier 1 | | | | |
| Analgesics | DILAUDID LIQ 1MG/ML | HYDROMORPHONE HCL LIQD 1 MG/ML | Tier 3 | | X | X | |
| Analgesics | DILAUDID TAB 2MG | HYDROMORPHONE HCL TAB 2 MG | Tier 3 | | X | X | |
| Analgesics | DILAUDID TAB 4MG | HYDROMORPHONE HCL TAB 4 MG | Tier 3 | | X | X | |
| Analgesics | DILAUDID TAB 8MG | HYDROMORPHONE HCL TAB 8 MG | Tier 3 | | X | X | |
| Analgesics | EC-NAPROSYN TAB 375MG | NAPROXEN TAB EC 375 MG | Tier 3 | | | | |
| Analgesics | EC-NAPROSYN TAB 500MG | NAPROXEN TAB EC 500 MG | Tier 3 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-----------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics | EC-NAPROXEN TAB 375MG | NAPROXEN TAB EC 375 MG | Tier 1 | | | | |
| Analgesics | EC-NAPROXEN TAB 500MG | NAPROXEN TAB EC 500 MG | Tier 1 | | | | |
| Analgesics | ELYXYB SOL 120/4.8 | CELECOXIB ORAL SOLN 120 MG/4.8ML (25 MG/ML) | Tier 3 | | | X | |
| Analgesics | ENDOCET TAB 10-325MG | OXYCODONE W/ ACETAMINOPHEN TAB 10-325 MG | Tier 1 | | X | | |
| Analgesics | ENDOCET TAB 2.5-325 | OXYCODONE W/ ACETAMINOPHEN TAB 2.5-325 MG | Tier 1 | | X | | |
| Analgesics | ENDOCET TAB 5-325MG | OXYCODONE W/ ACETAMINOPHEN TAB 5-325 MG | Tier 1 | | X | | |
| Analgesics | ENDOCET TAB 7.5-325 | OXYCODONE W/ ACETAMINOPHEN TAB 7.5-325 MG | Tier 1 | | X | | |
| Analgesics | ENOVARX CRE 2.5% | *DICLOFENAC SODIUM CREAM 2.5% (COMPOUNDING KIT)** | Tier 3 | X | | X | |
| Analgesics | ESGIC CAP | BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-325-40 MG | Tier 3 | | X | | |
| Analgesics | ESGIC TAB | BUTALBITAL-ACETAMINOPHEN-CAFFEINE TAB 50-325-40 MG | Tier 3 | | X | | |
| Analgesics | ETODOLAC CAP 200MG | ETODOLAC CAP 200 MG | Tier 1 | | | | |
| Analgesics | ETODOLAC CAP 300MG | ETODOLAC CAP 300 MG | Tier 1 | | | | |
| Analgesics | ETODOLAC TAB 400MG | ETODOLAC TAB 400 MG | Tier 1 | | | | |
| Analgesics | ETODOLAC TAB 500MG | ETODOLAC TAB 500 MG | Tier 1 | | | | |
| Analgesics | ETODOLAC ER TAB 400MG | ETODOLAC TAB ER 24HR 400 MG | Tier 1 | | | | |
| Analgesics | ETODOLAC ER TAB 500MG | ETODOLAC TAB ER 24HR 500 MG | Tier 1 | | | | |
| Analgesics | ETODOLAC ER TAB 600MG | ETODOLAC TAB ER 24HR 600 MG | Tier 1 | | | | |
| Analgesics | FELDENE CAP 10MG | PIROXICAM CAP 10 MG | Tier 3 | | | | |
| Analgesics | FELDENE CAP 20MG | PIROXICAM CAP 20 MG | Tier 3 | | | | |
| Analgesics | FENTANYL DIS 100MCG/H | FENTANYL TD PATCH 72HR 100 MCG/HR | Tier 1 | X | X | | |
| Analgesics | FENTANYL DIS 12MCG/HR | FENTANYL TD PATCH 72HR 12 MCG/HR | Tier 1 | X | X | | |
| Analgesics | FENTANYL DIS 25MCG/HR | FENTANYL TD PATCH 72HR 25 MCG/HR | Tier 1 | X | X | | |
| Analgesics | FENTANYL DIS 37.5MCG | FENTANYL TD PATCH 72HR 37.5 MCG/HR | Tier 1 | X | X | | |
| Analgesics | FENTANYL DIS 50MCG/HR | FENTANYL TD PATCH 72HR 50 MCG/HR | Tier 1 | X | X | | |
| Analgesics | FENTANYL DIS 62.5MCG | FENTANYL TD PATCH 72HR 62.5 MCG/HR | Tier 1 | X | X | | |
| Analgesics | FENTANYL DIS 75MCG/HR | FENTANYL TD PATCH 72HR 75 MCG/HR | Tier 1 | X | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics | FENTANYL DIS 87.5MCG | FENTANYL TD PATCH 72HR 87.5 MCG/HR | Tier 1 | X | X | | |
| Analgesics | FENTANYL POW CITRATE | FENTANYL CITRATE POWDER | Tier 3 | X | X | | |
| Analgesics | FENTANYL CIT TAB 100MCG | FENTANYL CITRATE BUCCAL TAB 100 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTANYL CIT TAB 200MCG | FENTANYL CITRATE BUCCAL TAB 200 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTANYL CIT TAB 400MCG | FENTANYL CITRATE BUCCAL TAB 400 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTANYL CIT TAB 600MCG | FENTANYL CITRATE BUCCAL TAB 600 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTANYL CIT TAB 800MCG | FENTANYL CITRATE BUCCAL TAB 800 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTANYL OT LOZ 1200MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 1200 MCG | Tier 1 | X | X | | |
| Analgesics | FENTANYL OT LOZ 1600MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 1600 MCG | Tier 1 | X | X | | |
| Analgesics | FENTANYL OT LOZ 200MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 200 MCG | Tier 1 | X | X | | |
| Analgesics | FENTANYL OT LOZ 400MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 400 MCG | Tier 1 | X | X | | |
| Analgesics | FENTANYL OT LOZ 600MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 600 MCG | Tier 1 | X | X | | |
| Analgesics | FENTANYL OT LOZ 800MCG | FENTANYL CITRATE LOZENGE ON A HANDLE 800 MCG | Tier 1 | X | X | | |
| Analgesics | FENTORA TAB 100MCG | FENTANYL CITRATE BUCCAL TAB 100 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTORA TAB 200MCG | FENTANYL CITRATE BUCCAL TAB 200 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTORA TAB 400MCG | FENTANYL CITRATE BUCCAL TAB 400 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTORA TAB 600MCG | FENTANYL CITRATE BUCCAL TAB 600 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FENTORA TAB 800MCG | FENTANYL CITRATE BUCCAL TAB 800 MCG (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | FIORICET CAP | BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-300-40 MG | Tier 3 | | X | | |
| Analgesics | FIORICET CAP CODEINE | BUTALBITAL-ACETAMINOPHEN-CAFF W/ COD CAP 50-300-40-30 MG | Tier 3 | | X | X | |
| Analgesics | FLURBIPROFEN POW | FLURBIPROFEN POWDER | Tier 3 | X | | | |
| Analgesics | FLURBIPROFEN TAB 100MG | FLURBIPROFEN TAB 100 MG | Tier 1 | | | | |
| Analgesics | FLURBIPROFEN TAB 50MG | FLURBIPROFEN TAB 50 MG | Tier 1 | | | | |
| Analgesics | HYDROCO/APAP SOL 75-325 | HYDROCODONE-ACETAMINOPHEN SOLN 7.5-325 MG/15ML | Tier 1 | | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | HYDROCO/APAP TAB 10-300MG | HYDROCODONE-ACETAMINOPHEN TAB 10-300 MG | Tier 1 | | X | | |
| Analgesics | HYDROCO/APAP TAB 10-325MG | HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG | Tier 1 | | X | | |
| Analgesics | HYDROCO/APAP TAB 5-300MG | HYDROCODONE-ACETAMINOPHEN TAB 5-300 MG | Tier 1 | | X | | |
| Analgesics | HYDROCO/APAP TAB 5-325MG | HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG | Tier 1 | | X | | |
| Analgesics | HYDROCO/APAP TAB 75-300 | HYDROCODONE-ACETAMINOPHEN TAB 75-300 MG | Tier 1 | | X | | |
| Analgesics | HYDROCO/APAP TAB 75-325 | HYDROCODONE-ACETAMINOPHEN TAB 75-325 MG | Tier 1 | | X | | |
| Analgesics | HYDROCOD/IBU TAB 10-200MG | HYDROCODONE-IBUPROFEN TAB 10-200 MG | Tier 1 | | X | | |
| Analgesics | HYDROCOD/IBU TAB 5-200MG | HYDROCODONE-IBUPROFEN TAB 5-200 MG | Tier 1 | | X | | |
| Analgesics | HYDROCOD/IBU TAB 75-200 | HYDROCODONE-IBUPROFEN TAB 75-200 MG | Tier 1 | | X | | |
| Analgesics | HYDROCODONE CAP 10MG ER | HYDROCODONE BITARTRATE CAP ER 12HR 10 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE CAP 15MG ER | HYDROCODONE BITARTRATE CAP ER 12HR 15 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE CAP 20MG ER | HYDROCODONE BITARTRATE CAP ER 12HR 20 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE CAP 30MG ER | HYDROCODONE BITARTRATE CAP ER 12HR 30 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE CAP 40MG ER | HYDROCODONE BITARTRATE CAP ER 12HR 40 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE CAP 50MG ER | HYDROCODONE BITARTRATE CAP ER 12HR 50 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE TAB 100MG ER | HYDROCODONE BITARTRATE TAB ER 24HR DETER 100 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE TAB 120MG ER | HYDROCODONE BITARTRATE TAB ER 24HR DETER 120 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE TAB 20MG ER | HYDROCODONE BITARTRATE TAB ER 24HR DETER 20 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE TAB 30MG ER | HYDROCODONE BITARTRATE TAB ER 24HR DETER 30 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE TAB 40MG ER | HYDROCODONE BITARTRATE TAB ER 24HR DETER 40 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE TAB 60MG ER | HYDROCODONE BITARTRATE TAB ER 24HR DETER 60 MG | Tier 1 | X | X | | |
| Analgesics | HYDROCODONE TAB 80MG ER | HYDROCODONE BITARTRATE TAB ER 24HR DETER 80 MG | Tier 1 | X | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | HYDROMORPHON LIQ 1MG/ML | HYDROMORPHONE HCL LIQD 1 MG/ML | Tier 1 | | X | | |
| Analgesics | HYDROMORPHON POW HCL | HYDROMORPHONE HCL POWDER | Tier 3 | X | X | | |
| Analgesics | HYDROMORPHON SUP 3MG | HYDROMORPHONE HCL SUPPOS 3 MG | Tier 1 | | X | | |
| Analgesics | HYDROMORPHON TAB 12MG ER | HYDROMORPHONE HCL TAB ER 24HR 12 MG | Tier 1 | X | X | | |
| Analgesics | HYDROMORPHON TAB 16MG ER | HYDROMORPHONE HCL TAB ER 24HR 16 MG | Tier 1 | X | X | | |
| Analgesics | HYDROMORPHON TAB 2MG | HYDROMORPHONE HCL TAB 2 MG | Tier 1 | | X | | |
| Analgesics | HYDROMORPHON TAB 32MG ER | HYDROMORPHONE HCL TAB ER 24HR 32 MG | Tier 1 | X | X | | |
| Analgesics | HYDROMORPHON TAB 4MG | HYDROMORPHONE HCL TAB 4 MG | Tier 1 | | X | | |
| Analgesics | HYDROMORPHON TAB 8MG | HYDROMORPHONE HCL TAB 8 MG | Tier 1 | | X | | |
| Analgesics | HYDROMORPHON TAB 8MG ER | HYDROMORPHONE HCL TAB ER 24HR 8 MG | Tier 1 | X | X | | |
| Analgesics | HYSINGLA ER TAB 100 MG | HYDROCODONE BITARTRATE TAB ER 24HR DETER 100 MG | Tier 3 | X | X | | |
| Analgesics | HYSINGLA ER TAB 120 MG | HYDROCODONE BITARTRATE TAB ER 24HR DETER 120 MG | Tier 3 | X | X | | |
| Analgesics | HYSINGLA ER TAB 20 MG | HYDROCODONE BITARTRATE TAB ER 24HR DETER 20 MG | Tier 3 | X | X | | |
| Analgesics | HYSINGLA ER TAB 30 MG | HYDROCODONE BITARTRATE TAB ER 24HR DETER 30 MG | Tier 3 | X | X | | |
| Analgesics | HYSINGLA ER TAB 40 MG | HYDROCODONE BITARTRATE TAB ER 24HR DETER 40 MG | Tier 3 | X | X | | |
| Analgesics | HYSINGLA ER TAB 60 MG | HYDROCODONE BITARTRATE TAB ER 24HR DETER 60 MG | Tier 3 | X | X | | |
| Analgesics | HYSINGLA ER TAB 80 MG | HYDROCODONE BITARTRATE TAB ER 24HR DETER 80 MG | Tier 3 | X | X | | |
| Analgesics | IBU TAB 400MG | IBUPROFEN TAB 400 MG | Tier 1 | | | | |
| Analgesics | IBU TAB 600MG | IBUPROFEN TAB 600 MG | Tier 1 | | | | |
| Analgesics | IBU TAB 800MG | IBUPROFEN TAB 800 MG | Tier 1 | | | | |
| Analgesics | IBUPROFEN POW | IBUPROFEN POWDER | Tier 3 | X | | | |
| Analgesics | IBUPROFEN TAB 400MG | IBUPROFEN TAB 400 MG | Tier 1 | | | | |
| Analgesics | IBUPROFEN TAB 600MG | IBUPROFEN TAB 600 MG | Tier 1 | | | | |
| Analgesics | IBUPROFEN TAB 800MG | IBUPROFEN TAB 800 MG | Tier 1 | | | | |
| Analgesics | INDOCIN SUP 50MG | INDOMETHACIN SUPPOS 50 MG | Tier 3 | | | | |
| Analgesics | INDOCIN SUS 25MG/5ML | INDOMETHACIN SUSP 25 MG/5ML | Tier 1 | | | | |
| Analgesics | INDOMETHACIN CAP 20MG | INDOMETHACIN CAP 20 MG | Tier 3 | | | | |
| Analgesics | INDOMETHACIN CAP 25MG | INDOMETHACIN CAP 25 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | INDOMETHACIN CAP 50MG | INDOMETHACIN CAP 50 MG | Tier 1 | | | | |
| Analgesics | INDOMETHACIN CAP 75MG ER | INDOMETHACIN CAP ER 75 MG | Tier 1 | | | | |
| Analgesics | INDOMETHACIN SUP 50MG | INDOMETHACIN SUPPOS 50 MG | Tier 1 | | | | |
| Analgesics | INDOMETHACIN SUS 25MG/5ML | INDOMETHACIN SUSP 25 MG/5ML | Tier 1 | | | | |
| Analgesics | KETOR TROMET SPR 15.75MG | KETOROLAC TROMETHAMINE NASAL SPRAY 15.75 MG/SPRAY | Tier 3 | | | X | |
| Analgesics | KETOROLAC TAB 10MG | KETOROLAC TROMETHAMINE TAB 10 MG | Tier 1 | | | | |
| Analgesics | KIPROFEN CAP 25MG | KETOPROFEN CAP 25 MG | Tier 3 | | X | X | |
| Analgesics | LAZANDA SPR 100MCG | FENTANYL CITRATE NASAL SPRAY 100 MCG/ACT (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | LAZANDA SPR 400MCG | FENTANYL CITRATE NASAL SPRAY 400 MCG/ACT (BASE EQUIV) | Tier 3 | X | X | | |
| Analgesics | LEVORPHANOL TAB 2MG | LEVORPHANOL TARTRATE TAB 2 MG | Tier 1 | | X | X | |
| Analgesics | LEVORPHANOL TAB 3MG | LEVORPHANOL TARTRATE TAB 3 MG | Tier 1 | | X | X | |
| Analgesics | LODINE TAB 400MG | ETODOLAC TAB 400 MG | Tier 3 | | | X | |
| Analgesics | LOFENA TAB 25MG | DICLOFENAC POTASSIUM TAB 25 MG | Tier 3 | | X | X | |
| Analgesics | LORTAB ELX 10-300MG | HYDROCODONE-ACETAMINOPHEN SOLN 10-300 MG/15ML | Tier 3 | | X | | |
| Analgesics | MECLOFEN SOD CAP 100MG | MECLOFENAMATE SODIUM CAP 100 MG | Tier 1 | | | | |
| Analgesics | MECLOFEN SOD CAP 50MG | MECLOFENAMATE SODIUM CAP 50 MG | Tier 1 | | | | |
| Analgesics | MEFENAM ACID CAP 250MG | MEFENAMIC ACID CAP 250 MG | Tier 1 | | | | |
| Analgesics | MEFENAMIC POW ACID | MEFENAMIC ACID POWDER | Tier 3 | X | | | |
| Analgesics | MELOXICAM CAP 10MG | MELOXICAM CAP 10 MG | Tier 1 | | X | X | |
| Analgesics | MELOXICAM CAP 5MG | MELOXICAM CAP 5 MG | Tier 1 | | X | X | |
| Analgesics | MELOXICAM SUS 7.5/5ML | MELOXICAM SUSP 7.5 MG/5ML | Tier 3 | | | | |
| Analgesics | MELOXICAM TAB 15MG | MELOXICAM TAB 15 MG | Tier 1 | | | | |
| Analgesics | MELOXICAM TAB 7.5MG | MELOXICAM TAB 7.5 MG | Tier 1 | | | | |
| Analgesics | MEPERIDINE SOL 50MG/5ML | MEPERIDINE HCL ORAL SOLN 50 MG/5ML | Tier 1 | | X | | |
| Analgesics | MEPERIDINE TAB 50MG | MEPERIDINE HCL TAB 50 MG | Tier 1 | | X | | |
| Analgesics | METHADONE CON 10MG/ML | METHADONE HCL CONC 10 MG/ML | Tier 1 | | X | | |
| Analgesics | METHADONE POW | METHADONE HCL POWDER | Tier 3 | X | X | | |
| Analgesics | METHADONE SOL 10MG/5ML | METHADONE HCL SOLN 10 MG/5ML | Tier 1 | X | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics | METHADONE SOL 5MG/5ML | METHADONE HCL SOLN 5 MG/5ML | Tier 1 | X | X | | |
| Analgesics | METHADONE TAB 10MG | METHADONE HCL TAB 10 MG | Tier 1 | X | X | | |
| Analgesics | METHADONE TAB 40MG | METHADONE HCL TAB FOR ORAL SUSP 40 MG | Tier 1 | | X | | |
| Analgesics | METHADONE TAB 5MG | METHADONE HCL TAB 5 MG | Tier 1 | X | X | | |
| Analgesics | METHADOSE CON 10MG/ML | METHADONE HCL CONC 10 MG/ML | Tier 3 | | X | | |
| Analgesics | METHADOSE TAB 40MG | METHADONE HCL TAB FOR ORAL SUSP 40 MG | Tier 1 | | X | | |
| Analgesics | METHADOSE SF CON 10MG/ML | METHADONE HCL CONC 10 MG/ML | Tier 3 | | X | | |
| Analgesics | MORPHINE POW SULFATE | MORPHINE SULFATE POWDER | Tier 3 | X | X | | |
| Analgesics | MORPHINE SUL CAP 100MG ER | MORPHINE SULFATE CAP ER 24HR 100 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 10MG ER | MORPHINE SULFATE CAP ER 24HR 10 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 120MG ER | MORPHINE SULFATE BEADS CAP ER 24HR 120 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 20MG ER | MORPHINE SULFATE CAP ER 24HR 20 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 30MG ER | MORPHINE SULFATE BEADS CAP ER 24HR 30 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 30MG ER | MORPHINE SULFATE CAP ER 24HR 30 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 45MG ER | MORPHINE SULFATE BEADS CAP ER 24HR 45 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 50MG ER | MORPHINE SULFATE CAP ER 24HR 50 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 60MG ER | MORPHINE SULFATE BEADS CAP ER 24HR 60 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 60MG ER | MORPHINE SULFATE CAP ER 24HR 60 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 75MG ER | MORPHINE SULFATE BEADS CAP ER 24HR 75 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 80MG ER | MORPHINE SULFATE CAP ER 24HR 80 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL CAP 90MG ER | MORPHINE SULFATE BEADS CAP ER 24HR 90 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL SOL 10/0.5ML | MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML) | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL SOL 100/5ML | MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML) | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL SOL 10MG/5ML | MORPHINE SULFATE ORAL SOLN 10 MG/5ML | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL SOL 20MG/5ML | MORPHINE SULFATE ORAL SOLN 20 MG/5ML | Tier 1 | | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics | MORPHINE SUL SOL 20MG/ML | MORPHINE SULFATE ORAL SOLN 100 MG/5ML (20 MG/ML) | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL SUP 10MG | MORPHINE SULFATE SUPPOS 10 MG | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL SUP 20MG | MORPHINE SULFATE SUPPOS 20 MG | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL SUP 30MG | MORPHINE SULFATE SUPPOS 30 MG | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL SUP 5MG | MORPHINE SULFATE SUPPOS 5 MG | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL TAB 100MG ER | MORPHINE SULFATE TAB ER 100 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL TAB 15MG | MORPHINE SULFATE TAB 15 MG | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL TAB 15MG ER | MORPHINE SULFATE TAB ER 15 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL TAB 200MG ER | MORPHINE SULFATE TAB ER 200 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL TAB 30MG | MORPHINE SULFATE TAB 30 MG | Tier 1 | | X | | |
| Analgesics | MORPHINE SUL TAB 30MG ER | MORPHINE SULFATE TAB ER 30 MG | Tier 1 | X | X | | |
| Analgesics | MORPHINE SUL TAB 60MG ER | MORPHINE SULFATE TAB ER 60 MG | Tier 1 | X | X | | |
| Analgesics | MS CONTIN TAB 100MG ER | MORPHINE SULFATE TAB ER 100 MG | Tier 3 | X | X | X | |
| Analgesics | MS CONTIN TAB 15MG ER | MORPHINE SULFATE TAB ER 15 MG | Tier 3 | X | X | X | |
| Analgesics | MS CONTIN TAB 200MG ER | MORPHINE SULFATE TAB ER 200 MG | Tier 3 | X | X | X | |
| Analgesics | MS CONTIN TAB 30MG ER | MORPHINE SULFATE TAB ER 30 MG | Tier 3 | X | X | X | |
| Analgesics | MS CONTIN TAB 60MG ER | MORPHINE SULFATE TAB ER 60 MG | Tier 3 | X | X | X | |
| Analgesics | NABUMETONE TAB 500MG | NABUMETONE TAB 500 MG | Tier 1 | | | | |
| Analgesics | NABUMETONE TAB 750MG | NABUMETONE TAB 750 MG | Tier 1 | | | | |
| Analgesics | NALOCET TAB 2.5-300 | OXYCODONE W/ ACETAMINOPHEN TAB 2.5-300 MG | Tier 3 | | X | X | |
| Analgesics | NAPRELAN TAB 375MG CR | NAPROXEN SODIUM TAB ER 24HR 375 MG (BASE EQUIV) | Tier 3 | | | X | |
| Analgesics | NAPRELAN TAB 500MG CR | NAPROXEN SODIUM TAB ER 24HR 500 MG (BASE EQUIV) | Tier 3 | | | X | |
| Analgesics | NAPRELAN TAB 750MG CR | NAPROXEN SODIUM TAB ER 24HR 750 MG (BASE EQUIV) | Tier 3 | | | X | |
| Analgesics | NAPROSYN SUS 125/5ML | NAPROXEN SUSP 125 MG/5ML | Tier 3 | | | X | |
| Analgesics | NAPROSYN TAB 500MG | NAPROXEN TAB 500 MG | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | NAPROXEN TAB 250MG | NAPROXEN TAB 250 MG | Tier 1 | | | | |
| Analgesics | NAPROXEN TAB 375MG | NAPROXEN TAB 375 MG | Tier 1 | | | | |
| Analgesics | NAPROXEN TAB 500MG | NAPROXEN TAB 500 MG | Tier 1 | | | | |
| Analgesics | NAPROXEN DR TAB 375MG | NAPROXEN TAB EC 375 MG | Tier 1 | | | | |
| Analgesics | NAPROXEN DR TAB 500MG | NAPROXEN TAB EC 500 MG | Tier 1 | | | | |
| Analgesics | NAPROXEN SOD TAB 275MG | NAPROXEN SODIUM TAB 275 MG | Tier 1 | | | | |
| Analgesics | NAPROXEN SOD TAB 375MG | NAPROXEN SODIUM TAB ER 24HR 375 MG (BASE EQUIV) | Tier 1 | | | | |
| Analgesics | NAPROXEN SOD TAB 375MG CR | NAPROXEN SODIUM TAB ER 24HR 375 MG (BASE EQUIV) | Tier 1 | | | | |
| Analgesics | NAPROXEN SOD TAB 375MG ER | NAPROXEN SODIUM TAB ER 24HR 375 MG (BASE EQUIV) | Tier 1 | | | | |
| Analgesics | NAPROXEN SOD TAB 500MG CR | NAPROXEN SODIUM TAB ER 24HR 500 MG (BASE EQUIV) | Tier 1 | | | | |
| Analgesics | NAPROXEN SOD TAB 500MG ER | NAPROXEN SODIUM TAB ER 24HR 500 MG (BASE EQUIV) | Tier 1 | | | | |
| Analgesics | NAPROXEN SOD TAB 550MG | NAPROXEN SODIUM TAB 550 MG | Tier 1 | | | | |
| Analgesics | NAPROXEN SOD TAB 750MG ER | NAPROXEN SODIUM TAB ER 24HR 750 MG (BASE EQUIV) | Tier 1 | | | | |
| Analgesics | NUCYNTA TAB 100MG | TAPENTADOL HCL TAB 100 MG | Tier 2 | | X | | |
| Analgesics | NUCYNTA TAB 50MG | TAPENTADOL HCL TAB 50 MG | Tier 2 | | X | | |
| Analgesics | NUCYNTA TAB 75MG | TAPENTADOL HCL TAB 75 MG | Tier 2 | | X | | |
| Analgesics | NUCYNTA ER TAB 100MG | TAPENTADOL HCL TAB ER 12HR 100 MG | Tier 3 | X | X | | |
| Analgesics | NUCYNTA ER TAB 150MG | TAPENTADOL HCL TAB ER 12HR 150 MG | Tier 3 | X | X | | |
| Analgesics | NUCYNTA ER TAB 200MG | TAPENTADOL HCL TAB ER 12HR 200 MG | Tier 3 | X | X | | |
| Analgesics | NUCYNTA ER TAB 250MG | TAPENTADOL HCL TAB ER 12HR 250 MG | Tier 3 | X | X | | |
| Analgesics | NUCYNTA ER TAB 50MG | TAPENTADOL HCL TAB ER 12HR 50 MG | Tier 3 | X | X | | |
| Analgesics | OXAPROZIN CAP 300MG | OXAPROZIN CAP 300 MG | Tier 3 | | | X | |
| Analgesics | OXAPROZIN TAB 600MG | OXAPROZIN TAB 600 MG | Tier 1 | | | | |
| Analgesics | OXY-ACETAMIN TAB 7.5-300 | OXYCODONE W/ ACETAMINOPHEN TAB 7.5-300 MG | Tier 3 | | X | | |
| Analgesics | OXYCOD/ACETA SOL 10/300MG | OXYCODONE W/ ACETAMINOPHEN SOLN 10-300 MG/5ML | Tier 3 | | X | X | |
| Analgesics | OXYCOD/ACETA SOL 5/325MG | OXYCODONE W/ ACETAMINOPHEN SOLN 5-325 MG/5ML | Tier 3 | | X | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | OXYCOD/APAP TAB 10-300MG | OXYCODONE W/ ACETAMINOPHEN TAB 10-300 MG | Tier 3 | | X | X | |
| Analgesics | OXYCOD/APAP TAB 10-325MG | OXYCODONE W/ ACETAMINOPHEN TAB 10-325 MG | Tier 1 | | X | | |
| Analgesics | OXYCOD/APAP TAB 2.5-325 | OXYCODONE W/ ACETAMINOPHEN TAB 2.5-325 MG | Tier 1 | | X | | |
| Analgesics | OXYCOD/APAP TAB 5-300MG | OXYCODONE W/ ACETAMINOPHEN TAB 5-300 MG | Tier 3 | | X | | |
| Analgesics | OXYCOD/APAP TAB 5-325MG | OXYCODONE W/ ACETAMINOPHEN TAB 5-325 MG | Tier 1 | | X | | |
| Analgesics | OXYCOD/APAP TAB 7.5-325 | OXYCODONE W/ ACETAMINOPHEN TAB 7.5-325 MG | Tier 1 | | X | | |
| Analgesics | OXYCOD-APAP TAB 2.5-300 | OXYCODONE W/ ACETAMINOPHEN TAB 2.5-300 MG | Tier 3 | | X | X | |
| Analgesics | OXYCODONE CAP 5MG | OXYCODONE HCL CAP 5 MG | Tier 1 | | X | | |
| Analgesics | OXYCODONE CAP HCL 5MG | OXYCODONE HCL CAP 5 MG | Tier 1 | | X | | |
| Analgesics | OXYCODONE CON 10/0.5ML | OXYCODONE HCL CONC 100 MG/5ML (20 MG/ML) | Tier 1 | | X | | |
| Analgesics | OXYCODONE CON 100/5ML | OXYCODONE HCL CONC 100 MG/5ML (20 MG/ML) | Tier 1 | | X | | |
| Analgesics | OXYCODONE POW HCL | OXYCODONE HCL POWDER | Tier 3 | X | X | | |
| Analgesics | OXYCODONE SOL 5MG/5ML | OXYCODONE HCL SOLN 5 MG/5ML | Tier 1 | | X | | |
| Analgesics | OXYCODONE TAB 10MG ER | OXYCODONE HCL TAB ER 12HR DETER 10 MG | Tier 3 | X | X | | |
| Analgesics | OXYCODONE TAB 20MG ER | OXYCODONE HCL TAB ER 12HR DETER 20 MG | Tier 3 | X | X | | |
| Analgesics | OXYCODONE TAB 40MG ER | OXYCODONE HCL TAB ER 12HR DETER 40 MG | Tier 3 | X | X | | |
| Analgesics | OXYCODONE TAB 80MG ER | OXYCODONE HCL TAB ER 12HR DETER 80 MG | Tier 3 | X | X | | |
| Analgesics | OXYCONTIN TAB 10MG ER | OXYCODONE HCL TAB ER 12HR DETER 10 MG | Tier 3 | X | X | | |
| Analgesics | OXYCONTIN TAB 15MG ER | OXYCODONE HCL TAB ER 12HR DETER 15 MG | Tier 3 | X | X | | |
| Analgesics | OXYCONTIN TAB 20MG ER | OXYCODONE HCL TAB ER 12HR DETER 20 MG | Tier 3 | X | X | | |
| Analgesics | OXYCONTIN TAB 30MG ER | OXYCODONE HCL TAB ER 12HR DETER 30 MG | Tier 3 | X | X | | |
| Analgesics | OXYCONTIN TAB 40MG ER | OXYCODONE HCL TAB ER 12HR DETER 40 MG | Tier 3 | X | X | | |
| Analgesics | OXYCONTIN TAB 60MG ER | OXYCODONE HCL TAB ER 12HR DETER 60 MG | Tier 3 | X | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | OXYCONTIN TAB 80MG ER | OXYCODONE HCL TAB ER 12HR DETER 80 MG | Tier 3 | X | X | | |
| Analgesics | OXYMORPHONE TAB 10MG ER | OXYMORPHONE HCL TAB ER 12HR 10 MG | Tier 1 | X | X | | |
| Analgesics | OXYMORPHONE TAB 15MG ER | OXYMORPHONE HCL TAB ER 12HR 15 MG | Tier 1 | X | X | | |
| Analgesics | OXYMORPHONE TAB 20MG ER | OXYMORPHONE HCL TAB ER 12HR 20 MG | Tier 1 | X | X | | |
| Analgesics | OXYMORPHONE TAB 30MG ER | OXYMORPHONE HCL TAB ER 12HR 30 MG | Tier 1 | X | X | | |
| Analgesics | OXYMORPHONE TAB 40MG ER | OXYMORPHONE HCL TAB ER 12HR 40 MG | Tier 1 | X | X | | |
| Analgesics | OXYMORPHONE TAB 5MG ER | OXYMORPHONE HCL TAB ER 12HR 5 MG | Tier 1 | X | X | | |
| Analgesics | OXYMORPHONE TAB 7.5MG ER | OXYMORPHONE HCL TAB ER 12HR 7.5 MG | Tier 1 | X | X | | |
| Analgesics | OXYMORPHONE TAB HCL 10MG | OXYMORPHONE HCL TAB 10 MG | Tier 1 | | X | | |
| Analgesics | OXYMORPHONE TAB HCL 5MG | OXYMORPHONE HCL TAB 5 MG | Tier 1 | | X | | |
| Analgesics | PENTAZ/NALOX TAB 50-0.5MG | PENTAZOCINE W/ NALOXONE HCL TAB 50-0.5 MG | Tier 1 | | X | | |
| Analgesics | PERCOCET TAB 10-325MG | OXYCODONE W/ ACETAMINOPHEN TAB 10-325 MG | Tier 3 | | X | X | |
| Analgesics | PERCOCET TAB 2.5-325 | OXYCODONE W/ ACETAMINOPHEN TAB 2.5-325 MG | Tier 3 | | X | X | |
| Analgesics | PERCOCET TAB 5-325MG | OXYCODONE W/ ACETAMINOPHEN TAB 5-325 MG | Tier 3 | | X | X | |
| Analgesics | PERCOCET TAB 7.5-325 | OXYCODONE W/ ACETAMINOPHEN TAB 7.5-325 MG | Tier 3 | | X | X | |
| Analgesics | PIROXICAM CAP 10MG | PIROXICAM CAP 10 MG | Tier 1 | | | | |
| Analgesics | PIROXICAM CAP 20MG | PIROXICAM CAP 20 MG | Tier 1 | | | | |
| Analgesics | PIROXICAM POW | PIROXICAM POWDER | Tier 3 | X | | | |
| Analgesics | PROLATE SOL 10/300MG | OXYCODONE W/ ACETAMINOPHEN SOLN 10-300 MG/5ML | Tier 3 | | X | X | |
| Analgesics | PROLATE TAB 10-300MG | OXYCODONE W/ ACETAMINOPHEN TAB 10-300 MG | Tier 3 | | X | X | |
| Analgesics | PROLATE TAB 5-300MG | OXYCODONE W/ ACETAMINOPHEN TAB 5-300 MG | Tier 3 | | X | | |
| Analgesics | PROLATE TAB 7.5-300 | OXYCODONE W/ ACETAMINOPHEN TAB 7.5-300 MG | Tier 3 | | X | | |
| Analgesics | QDOLO SOL 5MG/ML | TRAMADOL HCL ORAL SOLN 5 MG/ML | Tier 3 | | X | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Analgesics | RELAFEN TAB 500MG | NABUMETONE TAB 500 MG | Tier 3 | | | X | |
| Analgesics | RELAFEN TAB 750MG | NABUMETONE TAB 750 MG | Tier 3 | | | X | |
| Analgesics | RELAFEN DS TAB 1000MG | NABUMETONE TAB 1000 MG | Tier 3 | | | X | |
| Analgesics | ROXYBOND TAB 15MG | OXYCODONE HCL TAB ABUSE DETER 15 MG | Tier 3 | | X | X | |
| Analgesics | ROXYBOND TAB 30MG | OXYCODONE HCL TAB ABUSE DETER 30 MG | Tier 3 | | X | X | |
| Analgesics | ROXYBOND TAB 5MG | OXYCODONE HCL TAB ABUSE DETER 5 MG | Tier 3 | | X | X | |
| Analgesics | SEGLENTIS TAB 56-44MG | CELECOXIB-TRAMADOL HCL TAB 56-44 MG | Tier 3 | | X | X | |
| Analgesics | SPRIX SPR 15.75MG | KETOROLAC TROMETHAMINE NASAL SPRAY 15.75 MG/SPRAY | Tier 3 | | | X | |
| Analgesics | SUBSYS SPR 100MCG | FENTANYL SUBLINGUAL SPRAY 100 MCG | Tier 3 | X | X | X | |
| Analgesics | SUBSYS SPR 1200MCG | FENTANYL SUBLINGUAL SPRAY 1200 MCG (600 MCG X 2) | Tier 3 | X | X | X | |
| Analgesics | SUBSYS SPR 1600MCG | FENTANYL SUBLINGUAL SPRAY 1600 MCG (800 MCG X 2) | Tier 3 | X | X | X | |
| Analgesics | SUBSYS SPR 200MCG | FENTANYL SUBLINGUAL SPRAY 200 MCG | Tier 3 | X | X | X | |
| Analgesics | SUBSYS SPR 400MCG | FENTANYL SUBLINGUAL SPRAY 400 MCG | Tier 3 | X | X | X | |
| Analgesics | SUBSYS SPR 600MCG | FENTANYL SUBLINGUAL SPRAY 600 MCG | Tier 3 | X | X | X | |
| Analgesics | SUBSYS SPR 800MCG | FENTANYL SUBLINGUAL SPRAY 800 MCG | Tier 3 | X | X | X | |
| Analgesics | SULINDAC TAB 150MG | SULINDAC TAB 150 MG | Tier 1 | | | | |
| Analgesics | SULINDAC TAB 200MG | SULINDAC TAB 200 MG | Tier 1 | | | | |
| Analgesics | SYNAPRYN SUS 10MG/ML | *TRAMADOL HCL FOR ORAL SUSP 10 MG/ML (COMPOUND KIT)** | Tier 3 | X | X | | |
| Analgesics | TENCON TAB 50-325MG | BUTALBITAL-ACETAMINOPHEN TAB 50-325 MG | Tier 3 | | X | | |
| Analgesics | TIVORBEX CAP 20MG | INDOMETHACIN CAP 20 MG | Tier 3 | | | | |
| Analgesics | TOLMETIN SOD CAP 400MG | TOLMETIN SODIUM CAP 400 MG | Tier 1 | | | | |
| Analgesics | TOLMETIN SOD TAB 600MG | TOLMETIN SODIUM TAB 600 MG | Tier 1 | | | | |
| Analgesics | TRAMADL/APAP TAB 37.5-325 | TRAMADOL-ACETAMINOPHEN TAB 37.5-325 MG | Tier 1 | | X | | |
| Analgesics | TRAMADOL SOL 5MG/ML | TRAMADOL HCL ORAL SOLN 5 MG/ML | Tier 3 | | X | X | |
| Analgesics | TRAMADOL HCL CAP ER 100MG | TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 100 MG | Tier 3 | | X | | |
| Analgesics | TRAMADOL HCL CAP ER 200MG | TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 200 MG | Tier 3 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics | TRAMADOL HCL CAP ER 300MG | TRAMADOL HCL CAP ER 24HR BIPHASIC RELEASE 300 MG | Tier 3 | | X | | |
| Analgesics | TRAMADOL HCL TAB 100MG | TRAMADOL HCL TAB 100 MG | Tier 1 | | X | | |
| Analgesics | TRAMADOL HCL TAB 100MG ER | TRAMADOL HCL TAB ER 24HR 100 MG | Tier 1 | | X | | |
| Analgesics | TRAMADOL HCL TAB 100MG ER | TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 100 MG | Tier 1 | | X | | |
| Analgesics | TRAMADOL HCL TAB 200MG ER | TRAMADOL HCL TAB ER 24HR 200 MG | Tier 1 | | X | | |
| Analgesics | TRAMADOL HCL TAB 200MG ER | TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 200 MG | Tier 1 | | X | | |
| Analgesics | TRAMADOL HCL TAB 25MG | TRAMADOL HCL TAB 25 MG | Tier 1 | | X | X | |
| Analgesics | TRAMADOL HCL TAB 300MG ER | TRAMADOL HCL TAB ER 24HR 300 MG | Tier 1 | | X | | |
| Analgesics | TRAMADOL HCL TAB 300MG ER | TRAMADOL HCL TAB ER 24HR BIPHASIC RELEASE 300 MG | Tier 1 | | X | | |
| Analgesics | TRAMADOL HCL TAB 50MG | TRAMADOL HCL TAB 50 MG | Tier 1 | | X | | |
| Analgesics | TREZIX CAP | ACETAMINOPHEN-CAFFEINE-DIHYDROCODEINE CAP 320.5-30-16 MG | Tier 1 | | X | | |
| Analgesics | ULTRACET TAB 37.5-325 | TRAMADOL-ACETAMINOPHEN TAB 37.5-325 MG | Tier 3 | | X | | |
| Analgesics | ULTRAM TAB 50MG | TRAMADOL HCL TAB 50 MG | Tier 3 | | X | X | |
| Analgesics | VTOL LQ SOL | BUTALBITAL-ACETAMINOPHEN-CAFFEINE SOLN 50-325-40 MG/15ML | Tier 2 | | X | | |
| Analgesics | XTAMPZA ER CAP 13.5MG | OXYCODONE CAP ER 12HR ABUSE-DETERRENT 13.5 MG | Tier 2 | X | X | | |
| Analgesics | XTAMPZA ER CAP 18MG | OXYCODONE CAP ER 12HR ABUSE-DETERRENT 18 MG | Tier 2 | X | X | | |
| Analgesics | XTAMPZA ER CAP 27MG | OXYCODONE CAP ER 12HR ABUSE-DETERRENT 27 MG | Tier 2 | X | X | | |
| Analgesics | XTAMPZA ER CAP 36MG | OXYCODONE CAP ER 12HR ABUSE-DETERRENT 36 MG | Tier 2 | X | X | | |
| Analgesics | XTAMPZA ER CAP 9MG | OXYCODONE CAP ER 12HR ABUSE-DETERRENT 9 MG | Tier 2 | X | X | | |
| Analgesics | ZEBUTAL CAP | BUTALBITAL-ACETAMINOPHEN-CAFFEINE CAP 50-325-40 MG | Tier 3 | | X | | |
| Analgesics | ZIPSOR CAP 25MG | DICLOFENAC POTASSIUM CAP 25 MG | Tier 3 | | X | | |
| Analgesics | ZORVOLEX CAP 18MG | DICLOFENAC CAP 18 MG | Tier 3 | | | | |
| Analgesics | ZORVOLEX CAP 35MG | DICLOFENAC CAP 35 MG | Tier 3 | | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | A.A.G.C KIT CRE TERODERM | *AMANTAD-AMITRIPT-GABA-CYCLOBEN CREAM 8-4-10-4% (CMPD KIT)** | Tier 3 | X | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-------------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | DICLOVIX KIT | *DICLOFENAC EX SOLN 1.5% & CAMP-LIDO-METHYL SAL PATCH KIT*** | Tier 3 | | | X | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | DUAL COMPLEX CRE 1 KIT | *FLURBIPROFEN-CYCLOBENZAPRINE CREAM (CMPD KIT)*** | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | FBL KIT CRE 15-4-5% | *FLURBIPROFEN-BACLOFEN-LIDOCAINE CREAM 15-4-5% (CMPD KIT)** | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | FROTEK CRE 10% | KETOPROFEN CREAM 10% | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | IBUPROFEN CRE 10% | *IBUPROFEN CREAM 10% (COMPOUNDING KIT)** | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | K.B.G.L IN CRE TERODERM | *KETOPROFEN-BACLOFEN-GABAPENT-LIDO CRM 15-4-10-2% (CMP KIT)* | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | KETOPHENE CRE RAPIDPAQ | *KETOPROFEN CREAM 20% (COMPOUND KIT)** | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | NAPROXEN CRE 10% | *NAPROXEN CREAM 10% (COMPOUND KIT)** | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | NEURAPTINE CRE 10% | GABAPENTIN CREAM 10% | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | OXAYDO TAB 5MG | OXYCODONE HCL TAB 5 MG | Tier 3 | | X | X | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | OXAYDO TAB 75MG | OXYCODONE HCL TAB 75 MG | Tier 3 | | X | X | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | OXYCODONE TAB 10MG | OXYCODONE HCL TAB 10 MG | Tier 1 | | X | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | OXYCODONE TAB 15MG | OXYCODONE HCL TAB 15 MG | Tier 1 | | X | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | OXYCODONE TAB 20MG | OXYCODONE HCL TAB 20 MG | Tier 1 | | X | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | OXYCODONE TAB 30MG | OXYCODONE HCL TAB 30 MG | Tier 1 | | X | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | OXYCODONE TAB 5MG | OXYCODONE HCL TAB 5 MG | Tier 1 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | ROXICODONE TAB 15MG | OXYCODONE HCL TAB 15 MG | Tier 3 | | X | X | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | ROXICODONE TAB 30MG | OXYCODONE HCL TAB 30 MG | Tier 3 | | X | X | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | ROXICODONE TAB 5MG | OXYCODONE HCL TAB 5 MG | Tier 3 | | X | X | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | SALSALATE TAB 500MG | SALSALATE TAB 500 MG | Tier 1 | | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | SALSALATE TAB 750MG | SALSALATE TAB 750 MG | Tier 1 | | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | TRAMADOL CRE 5% | *TRAMADOL HCL CREAM 5% (COMPOUND KIT)** | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | TRIPLE COMPL CRE 3 KIT | *KETOPROFEN-LIDOCAINE-GABAPENTIN CREAM 20-2-10% (CMPD KIT)** | Tier 3 | | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | TURPENTINE SOL SPIRITS | TURPENTINE SPIRIT | Tier 1 | | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | VP FC CRE KIT | *FLURBIPROFEN-CYCLOBENZAPRINE CREAM (CMPD KIT)*** | Tier 3 | X | | | |
| Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions | VP GKL CRE KIT | *KETOPROFEN-LIDOCAINE HCL-GABAPENT CRM 20-2-10% (CMPD KIT)** | Tier 3 | X | | | |
| Anesthetics | BUPIVACAINE POW HCL | BUPIVACAINE HCL POWDER | Tier 3 | | | | |
| Anesthetics | GLYDO GEL 2% | LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2% | Tier 1 | | | | |
| Anesthetics | LIDO/PRILOCN CRE 2.5-2.5% | LIDOCAINE-PRILOCAINE CREAM 2.5-2.5% | Tier 1 | | | | |
| Anesthetics | LIDOCAINE CRE 10% | *LIDOCAINE HCL CREAM 10% (COMPOUND KIT)** | Tier 3 | X | | | |
| Anesthetics | LIDOCAINE CRE 5% | *LIDOCAINE HCL CREAM 5% (COMPOUND KIT)** | Tier 3 | X | | | |
| Anesthetics | LIDOCAINE GEL 2% | LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2% | Tier 1 | | | | |
| Anesthetics | LIDOCAINE GEL 2% JELLY | LIDOCAINE HCL URETHRAL/MUCOSAL GEL 2% | Tier 1 | | | | |
| Anesthetics | LIDOCAINE GEL 2% JELLY | LIDOCAINE HCL URETHRAL/MUCOSAL GEL PREFILLED SYRINGE 2% | Tier 1 | | | | |
| Anesthetics | LIDOCAINE OIN 5% | LIDOCAINE OINT 5% | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Anesthetics | LIDOCAINE PAD 5% | LIDOCAINE PATCH 5% | Tier 1 | X | X | | |
| Anesthetics | LIDOCAINE SOL 2% ORAL | LIDOCAINE HCL VISCOUS SOLN 2% | Tier 1 | | | | |
| Anesthetics | LIDOCAINE SOL 2% VISC | LIDOCAINE HCL VISCOUS SOLN 2% | Tier 1 | | | | |
| Anesthetics | LIDOCAINE SOL 4% | LIDOCAINE HCL SOLN 4% | Tier 1 | | | | |
| Anesthetics | LIDOCAINE SOL 4% | LIDOCAINE HCL LARYNGOTRACHEAL SOLN 4% | Tier 1 | | | | |
| Anesthetics | LIDOCAN PAD 5% | LIDOCAINE PATCH 5% | Tier 3 | X | X | X | |
| Anesthetics | LIDODERM DIS 5% | LIDOCAINE PATCH 5% | Tier 3 | X | X | X | |
| Anesthetics | LIDTOPIC MAX CRE 10% | LIDOCAINE HCL CREAM 10% | Tier 3 | X | | | |
| Anesthetics | TRIDACAINE PAD 5% | LIDOCAINE PATCH 5% | Tier 3 | X | X | X | |
| Anesthetics | ZTLIDO PAD 1.8% | LIDOCAINE PATCH 1.8% (36 MG) | Tier 3 | X | X | | |
| Anesthetics - Drugs for Numbing | ELEMAR PATCH KIT 5%-6% | LIDOCAINE PATCH 5% & MENTHOL GEL 6% KIT | Tier 3 | | | X | |
| Anesthetics - Drugs for Numbing | LETS KIT | *LIDOCAINE & TETRACAINE W/ EPINEPH KIT (COMPOUNDING KIT)*** | Tier 3 | X | | | |
| Anesthetics - Drugs for Numbing | PROCAINE HCL POW | PROCAINE HCL POWDER | Tier 3 | X | | | |
| Anesthetics - Drugs for Numbing | TOPICAL GEL L.E.T | LIDOCAINE HCL-EPINEPHRINE BIT-TETRACAINE HCL GEL 4-0.09-0.5% | Tier 3 | | | X | |
| Anti-Addiction/Substance Abuse Treatment Agents | ACAMPRO CAL TAB 333MG | ACAMPROSATE CALCIUM TAB DELAYED RELEASE 333 MG | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | BUPREN/NALOX MIS 12-3MG | BUPRENORPHINE HCL-NALOXONE HCL SL FILM 12-3 MG (BASE EQUIV) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | BUPREN/NALOX MIS 2-0.5MG | BUPRENORPHINE HCL-NALOXONE HCL SL FILM 2-0.5 MG (BASE EQUIV) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | BUPREN/NALOX MIS 4-1MG | BUPRENORPHINE HCL-NALOXONE HCL SL FILM 4-1 MG (BASE EQUIV) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | BUPREN/NALOX MIS 8-2MG | BUPRENORPHINE HCL-NALOXONE HCL SL FILM 8-2 MG (BASE EQUIV) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | BUPREN/NALOX SUB 2-0.5MG | BUPRENORPHINE HCL-NALOXONE HCL SL TAB 2-0.5 MG (BASE EQUIV) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | BUPREN/NALOX SUB 8-2MG | BUPRENORPHINE HCL-NALOXONE HCL SL TAB 8-2 MG (BASE EQUIV) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | BUPROPION TAB 150MG SR | BUPROPION HCL (SMOKING DETERRENT) TAB ER 12HR 150 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | CVS NICOTINE DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents | CVS NICOTINE DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | CVS NICOTINE DIS 7MG/24HR | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | DISULFIRAM TAB 250MG | DISULFIRAM TAB 250 MG | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | DISULFIRAM TAB 500MG | DISULFIRAM TAB 500 MG | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | EQ NICOTINE DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | EQ NICOTINE DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | EQ NICOTINE DIS 7MG/24HR | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | GNP NICOTINE DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | GNP NICOTINE DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | GNP NICOTINE DIS 7MG/24HR | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | HABITROL DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | HM NICOTINE DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | HM NICOTINE DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | HM NICOTINE DIS 7MG/24HR | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | KLOXXADO SPR 8MG | NALOXONE HCL NASAL SPRAY 8 MG/0.1ML | Tier 2 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | LUCEMYRA TAB 0.18MG | LOFEXIDINE HCL TAB 0.18 MG (BASE EQUIVALENT) | Tier 3 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NALOXONE INJ 0.4MG/ML | NALOXONE HCL INJ 0.4 MG/ML | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NALOXONE INJ 0.4MG/ML | NALOXONE HCL INJ 4 MG/10ML | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NALOXONE INJ 0.4MG/ML | NALOXONE HCL SOLN CARTRIDGE 0.4 MG/ML | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NALOXONE INJ 1MG/ML | NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NALOXONE INJ 2MG/2ML | NALOXONE HCL SOLN PREFILLED SYRINGE 2 MG/2ML | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NALOXONE INJ 4MG/10ML | NALOXONE HCL INJ 4 MG/10ML | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NALOXONE SPR 4MG | NALOXONE HCL NASAL SPRAY 4 MG/0.1ML | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NALOXONE HCL SPR 4MG | NALOXONE HCL NASAL SPRAY 4 MG/0.1ML | Tier 1 | | | | |

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|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents | NALTREXONE TAB 50MG | NALTREXONE HCL TAB 50 MG | Tier 1 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NARCAN SPR 4MG | NALOXONE HCL NASAL SPRAY 4 MG/0.1ML | Tier 2 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICODERM CQ DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICODERM CQ DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICODERM CQ DIS 7MG/24HR | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE DIS 7MG/24HR | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE SYS KIT TRANSDER | NICOTINE TD PATCH 24 HR KIT 21-14-7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE TD DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE TD DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE TD DIS 7MG/24HR | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE TD DIS STEP 1 | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTINE TD DIS STEP 3 | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTROL INH | NICOTINE INHALER SYSTEM 10 MG (4 MG DELIVERED) | HCR | X | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | NICOTROL NS SPR 10MG/ML | NICOTINE NASAL SPRAY 10 MG/ML (0.5 MG/SPRAY) | HCR | X | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | QC NICOTINE DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | QC NICOTINE DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | RA NICOTINE DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | RIVIVE SPR 3/0.1ML | NALOXONE HCL NASAL SPRAY 3 MG/0.1ML | Tier 2 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | SM NICOTINE DIS 14MG/24H | NICOTINE TD PATCH 24HR 14 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | SM NICOTINE DIS 21MG/24H | NICOTINE TD PATCH 24HR 21 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | SM NICOTINE DIS 7MG/24HR | NICOTINE TD PATCH 24HR 7 MG/24HR | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | SUBOXONE MIS 12-3MG | BUPRENORPHINE HCL- NALOXONE HCL SL FILM 12-3 MG (BASE EQUIV) | Tier 3 | X | X | X | |

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|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents | SUBOXONE MIS 2-0.5MG | BUPRENORPHINE HCL- NALOXONE HCL SL FILM 2-0.5 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Anti-Addiction/Substance Abuse Treatment Agents | SUBOXONE MIS 4-1MG | BUPRENORPHINE HCL- NALOXONE HCL SL FILM 4-1 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Anti-Addiction/Substance Abuse Treatment Agents | SUBOXONE MIS 8-2MG | BUPRENORPHINE HCL- NALOXONE HCL SL FILM 8-2 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Anti-Addiction/Substance Abuse Treatment Agents | VARENICLINE TAB 0.5& 1MG | VARENICLINE TARTRATE TAB 11 X 0.5 MG & 42 X 1 MG START PACK | HCR | X | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | VARENICLINE TAB 0.5MG | VARENICLINE TARTRATE TAB 0.5 MG (BASE EQUIV) | HCR | X | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | VARENICLINE TAB 1MG | VARENICLINE TARTRATE TAB 1 MG (BASE EQUIV) | HCR | X | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | ZIMHI SOL | NALOXONE HCL SOLN PREFILLED SYRINGE 5 MG/0.5ML | Tier 2 | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents | ZUBSOLV SUB 0.7-0.18 | BUPRENORPHINE HCL- NALOXONE HCL SL TAB 0.7-0.18 MG (BASE EQ) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | ZUBSOLV SUB 1.4-0.36 | BUPRENORPHINE HCL- NALOXONE HCL SL TAB 1.4-0.36 MG (BASE EQ) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | ZUBSOLV SUB 11.4-2.9 | BUPRENORPHINE HCL- NALOXONE HCL SL TAB 11.4-2.9 MG (BASE EQ) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | ZUBSOLV SUB 2.9-0.71 | BUPRENORPHINE HCL- NALOXONE HCL SL TAB 2.9-0.71 MG (BASE EQ) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | ZUBSOLV SUB 5.7-1.4 | BUPRENORPHINE HCL- NALOXONE HCL SL TAB 5.7-1.4 MG (BASE EQ) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents | ZUBSOLV SUB 8.6-2.1 | BUPRENORPHINE HCL- NALOXONE HCL SL TAB 8.6-2.1 MG (BASE EQ) | Tier 1 | | X | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 2MG CINN | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 2MG ORIG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 2MGFRUIT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 4MG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 4MG CINN | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 4MG MINT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 4MG ORIG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE GUM 4MGFRUIT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE LOZ 2MG | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE LOZ 4MG CINN | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | CVS NICOTINE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE GUM 2MG CINN | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |

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|--|---------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE GUM 2MGFRUIT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE GUM 4MG CINN | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE GUM 4MG MINT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE GUM 4MG ORIG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE GUM 4MGFRUIT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE LOZ 2MG CINN | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE LOZ 4MG CINN | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQ NICOTINE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQL NICOTINE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | EQL NICOTINE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | FT NICOTINE LOZ 2MG | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |

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|---|---------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | FT NICOTINE LOZ 4MG | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE GUM 2MG FRT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE GUM 2MG ORIG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE GUM 4MG FRT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE GUM 4MG MINT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE GUM 4MG ORIG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE LOZ 4MG CHER | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | GNP NICOTINE LOZ MINI 2MG | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE GUM 2MG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |

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|---|--------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE GUM 4MG FRT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE GUM 4MG MINT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE LOZ 2MG | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE LOZ 2MG CINN | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE LOZ 4MG CINN | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | HM NICOTINE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | KLS QUIT2 GUM 2MG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | KLS QUIT2 LOZ 2MG | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | KLS QUIT4 GUM 4MG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | KLS QUIT4 LOZ 4MG | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 2MG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 2MG CINN | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 2MG ORIG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 2MGFRUIT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 4MG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 4MG CINN | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 4MG MINT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 4MG ORIG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE GUM 4MGFRUIT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE LOZ 4MG | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE ST GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE ST GUM 2MG ORIG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICORETTE ST GUM 4MG ORIG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE GUM 2MG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE GUM 2MGFRUIT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE GUM 4MG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE LOZ 4MG CINN | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE LOZ MINI 2MG | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 2MG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 2MG CINN | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 2MG ORIG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 2MG REF | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 2MG STRT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 2MGFRUIT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 4MG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 4MG CINN | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 4MG MINT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 4MG ORIG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 4MG REF | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 4MG STRT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL GUM 4MGFRUIT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL LOZ 2MG CHRY | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL LOZ 2MG CINN | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL LOZ 2MG MINI | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL LOZ 4MG CHRY | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL LOZ 4MG CINN | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | NICOTINE POL LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | RA NICOTINE GUM 4MG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | RA NICOTINE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | RA NICOTINE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE GUM 2MG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE GUM 4MG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE GUM 4MG MINT | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE LOZ 2MG CHRY | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE LOZ 2MG CINN | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE LOZ 4MG | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE LOZ 4MG CINN | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | SM NICOTINE LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | STOP SMOKING GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | STOP SMOKING GUM 2MG ORIG | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | STOP SMOKING GUM 4MG | NICOTINE POLACRILEX GUM 4 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | STOP SMOKING LOZ 2MG MINT | NICOTINE POLACRILEX LOZENGE 2 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | STOP SMOKING LOZ 4MG MINT | NICOTINE POLACRILEX LOZENGE 4 MG | HCR | | | | |
| Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence | THRIVE GUM 2MG MINT | NICOTINE POLACRILEX GUM 2 MG | HCR | | | | |
| Antiandrogens - Hormone Suppressants | ORGOVYX TAB 120MG | RELUGOLIX TAB 120 MG | Tier 3 | X | X | | X |
| Antibacterials | ACTICLATE TAB 150MG | DOXYCYCLINE HYCLATE TAB 150 MG | Tier 3 | | | X | |
| Antibacterials | ACTICLATE TAB 75MG | DOXYCYCLINE HYCLATE TAB 75 MG | Tier 3 | | | X | |
| Antibacterials | AEMCOLO TAB 194MG | RIFAMYCIN SODIUM TAB DELAYED RELEASE 194 MG (BASE EQUIV) | Tier 3 | | | | |
| Antibacterials | AMOX/K CLAV CHW 200MG | AMOXICILLIN & K CLAVULANATE CHEW TAB 200-28.5 MG | Tier 1 | | | | |
| Antibacterials | AMOX/K CLAV CHW 400MG | AMOXICILLIN & K CLAVULANATE CHEW TAB 400-57 MG | Tier 1 | | | | |
| Antibacterials | AMOX/K CLAV SUS 200/5ML | AMOXICILLIN & K CLAVULANATE FOR SUSP 200-28.5 MG/5ML | Tier 1 | | | | |
| Antibacterials | AMOX/K CLAV SUS 250/5ML | AMOXICILLIN & K CLAVULANATE FOR SUSP 250-62.5 MG/5ML | Tier 1 | | | | |
| Antibacterials | AMOX/K CLAV SUS 400/5ML | AMOXICILLIN & K CLAVULANATE FOR SUSP 400-57 MG/5ML | Tier 1 | | | | |
| Antibacterials | AMOX/K CLAV SUS 600/5ML | AMOXICILLIN & K CLAVULANATE FOR SUSP 600-42.9 MG/5ML | Tier 1 | | | | |
| Antibacterials | AMOX/K CLAV TAB 250-125 | AMOXICILLIN & K CLAVULANATE TAB 250-125 MG | Tier 1 | | | | |
| Antibacterials | AMOX/K CLAV TAB 500-125 | AMOXICILLIN & K CLAVULANATE TAB 500-125 MG | Tier 1 | | | | |
| Antibacterials | AMOX/K CLAV TAB 875-125 | AMOXICILLIN & K CLAVULANATE TAB 875-125 MG | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN CAP 250MG | AMOXICILLIN (TRIHYDRATE) CAP 250 MG | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN CAP 500MG | AMOXICILLIN (TRIHYDRATE) CAP 500 MG | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN CHW 125MG | AMOXICILLIN (TRIHYDRATE) CHEW TAB 125 MG | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN CHW 250MG | AMOXICILLIN (TRIHYDRATE) CHEW TAB 250 MG | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN SUS 125/5ML | AMOXICILLIN (TRIHYDRATE) FOR SUSP 125 MG/5ML | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Antibacterials | AMOXICILLIN SUS 200/5ML | AMOXICILLIN (TRIHYDRATE) FOR SUSP 200 MG/5ML | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN SUS 250/5ML | AMOXICILLIN (TRIHYDRATE) FOR SUSP 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN SUS 250MG/5M | AMOXICILLIN (TRIHYDRATE) FOR SUSP 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN SUS 400/5ML | AMOXICILLIN (TRIHYDRATE) FOR SUSP 400 MG/5ML | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN TAB 500MG | AMOXICILLIN (TRIHYDRATE) TAB 500 MG | Tier 1 | | | | |
| Antibacterials | AMOXICILLIN TAB 875MG | AMOXICILLIN (TRIHYDRATE) TAB 875 MG | Tier 1 | | | | |
| Antibacterials | AMOX-POT CLA TAB ER | AMOXICILLIN & K CLAVULANATE TAB ER 12HR 1000-62.5 MG | Tier 1 | | | | |
| Antibacterials | AMPICILLIN CAP 500MG | AMPICILLIN CAP 500 MG | Tier 1 | | | | |
| Antibacterials | ARIKAYCE SUS | AMIKACIN SULFATE LIPOSOME INHAL SUSP 590 MG/8.4ML (BASE EQ) | Tier 3 | X | X | | X |
| Antibacterials | AUGMENTIN SUS 125/5ML | AMOXICILLIN & K CLAVULANATE FOR SUSP 125-31.25 MG/5ML | Tier 3 | | | | |
| Antibacterials | AUGMENTIN SUS ES-600 | AMOXICILLIN & K CLAVULANATE FOR SUSP 600-42.9 MG/5ML | Tier 3 | | | X | |
| Antibacterials | AUGMENTIN TAB 500MG | AMOXICILLIN & K CLAVULANATE TAB 500-125 MG | Tier 3 | | | X | |
| Antibacterials | AVIDOXY TAB 100MG | DOXYCYCLINE MONOHYDRATE TAB 100 MG | Tier 1 | | | | |
| Antibacterials | AZITHROMYCIN POW 1GM PAK | AZITHROMYCIN POWD PACK FOR SUSP 1 GM | Tier 1 | | | | |
| Antibacterials | AZITHROMYCIN SUS 100/5ML | AZITHROMYCIN FOR SUSP 100 MG/5ML | Tier 1 | | | | |
| Antibacterials | AZITHROMYCIN SUS 200/5ML | AZITHROMYCIN FOR SUSP 200 MG/5ML | Tier 1 | | | | |
| Antibacterials | AZITHROMYCIN TAB 250MG | AZITHROMYCIN TAB 250 MG | Tier 1 | | | | |
| Antibacterials | AZITHROMYCIN TAB 500MG | AZITHROMYCIN TAB 500 MG | Tier 1 | | | | |
| Antibacterials | AZITHROMYCIN TAB 600MG | AZITHROMYCIN TAB 600 MG | Tier 1 | | | | |
| Antibacterials | BACTRIM TAB 400-80MG | SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG | Tier 3 | | | | |
| Antibacterials | BACTRIM DS TAB 800-160 | SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG | Tier 3 | | | | |
| Antibacterials | BAXDELA TAB 450MG | DELAFLOXACIN MEGLUMINE TAB 450 MG (BASE EQUIV) | Tier 3 | | | | |
| Antibacterials | CEFACLOR CAP 250MG | CEFACLOR CAP 250 MG | Tier 1 | | | | |
| Antibacterials | CEFACLOR CAP 500MG | CEFACLOR CAP 500 MG | Tier 1 | | | | |
| Antibacterials | CEFACLOR SUS 125/5ML | CEFACLOR FOR SUSP 125 MG/5ML | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antibacterials | CEFACLOR SUS 250/5ML | CEFACLOR FOR SUSP 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFACLOR SUS 375/5ML | CEFACLOR FOR SUSP 375 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFACLOR ER TAB 500MG | CEFACLOR MONOHYDRATE TAB ER 12HR 500 MG | Tier 1 | | | | |
| Antibacterials | CEFADROXIL CAP 500MG | CEFADROXIL CAP 500 MG | Tier 1 | | | | |
| Antibacterials | CEFADROXIL SUS 250/5ML | CEFADROXIL FOR SUSP 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFADROXIL SUS 500/5ML | CEFADROXIL FOR SUSP 500 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFADROXIL TAB 1GM | CEFADROXIL TAB 1 GM | Tier 1 | | | | |
| Antibacterials | CEFDINIR CAP 300MG | CEFDINIR CAP 300 MG | Tier 1 | | | | |
| Antibacterials | CEFDINIR SUS 125/5ML | CEFDINIR FOR SUSP 125 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFDINIR SUS 250/5ML | CEFDINIR FOR SUSP 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFIXIME CAP 400MG | CEFIXIME CAP 400 MG | Tier 1 | | | | |
| Antibacterials | CEFIXIME SUS 100/5ML | CEFIXIME FOR SUSP 100 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFIXIME SUS 200/5ML | CEFIXIME FOR SUSP 200 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFPODO PROX SUS 100/5ML | CEFPODOXIME PROXETIL FOR SUSP 100 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFPODO PROX SUS 50MG/5ML | CEFPODOXIME PROXETIL FOR SUSP 50 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFPODOXIME TAB 100MG | CEFPODOXIME PROXETIL TAB 100 MG | Tier 1 | | | | |
| Antibacterials | CEFPODOXIME TAB 200MG | CEFPODOXIME PROXETIL TAB 200 MG | Tier 1 | | | | |
| Antibacterials | CEFPROZIL SUS 125/5ML | CEFPROZIL FOR SUSP 125 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFPROZIL SUS 250/5ML | CEFPROZIL FOR SUSP 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEFPROZIL TAB 250MG | CEFPROZIL TAB 250 MG | Tier 1 | | | | |
| Antibacterials | CEFPROZIL TAB 500MG | CEFPROZIL TAB 500 MG | Tier 1 | | | | |
| Antibacterials | CEFUROXIME TAB 250MG | CEFUROXIME AXETIL TAB 250 MG | Tier 1 | | | | |
| Antibacterials | CEFUROXIME TAB 500MG | CEFUROXIME AXETIL TAB 500 MG | Tier 1 | | | | |
| Antibacterials | CEPHALEXIN CAP 250MG | CEPHALEXIN CAP 250 MG | Tier 1 | | | | |
| Antibacterials | CEPHALEXIN CAP 500MG | CEPHALEXIN CAP 500 MG | Tier 1 | | | | |
| Antibacterials | CEPHALEXIN CAP 750MG | CEPHALEXIN CAP 750 MG | Tier 1 | | | | |
| Antibacterials | CEPHALEXIN SUS 125/5ML | CEPHALEXIN FOR SUSP 125 MG/5ML | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antibacterials | CEPHALEXIN SUS 250/5ML | CEPHALEXIN FOR SUSP 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | CEPHALEXIN TAB 250MG | CEPHALEXIN TAB 250 MG | Tier 1 | | | | |
| Antibacterials | CEPHALEXIN TAB 500MG | CEPHALEXIN TAB 500 MG | Tier 1 | | | | |
| Antibacterials | CIPRO TAB 250MG | CIPROFLOXACIN HCL TAB 250 MG (BASE EQUIV) | Tier 3 | | | | |
| Antibacterials | CIPRO TAB 500MG | CIPROFLOXACIN HCL TAB 500 MG (BASE EQUIV) | Tier 3 | | | | |
| Antibacterials | CIPRO (10%) SUS 500MG/5 | CIPROFLOXACIN FOR ORAL SUSP 500 MG/5ML (10%) (10 GM/100ML) | Tier 3 | | | | |
| Antibacterials | CIPRO (5%) SUS 250MG/5 | CIPROFLOXACIN FOR ORAL SUSP 250 MG/5ML (5%) (5 GM/100ML) | Tier 3 | | | | |
| Antibacterials | CIPROFLOXACN SUS 250/5ML | CIPROFLOXACIN FOR ORAL SUSP 250 MG/5ML (5%) (5 GM/100ML) | Tier 1 | | | | |
| Antibacterials | CIPROFLOXACN SUS 500MG/5 | CIPROFLOXACIN FOR ORAL SUSP 500 MG/5ML (10%) (10 GM/100ML) | Tier 1 | | | | |
| Antibacterials | CIPROFLOXACN TAB 100MG | CIPROFLOXACIN HCL TAB 100 MG (BASE EQUIV) | Tier 1 | | | | |
| Antibacterials | CIPROFLOXACN TAB 250MG | CIPROFLOXACIN HCL TAB 250 MG (BASE EQUIV) | Tier 1 | | | | |
| Antibacterials | CIPROFLOXACN TAB 500MG | CIPROFLOXACIN HCL TAB 500 MG (BASE EQUIV) | Tier 1 | | | | |
| Antibacterials | CIPROFLOXACN TAB 750MG | CIPROFLOXACIN HCL TAB 750 MG (BASE EQUIV) | Tier 1 | | | | |
| Antibacterials | CLARITHROMYC SUS 125/5ML | CLARITHROMYCIN FOR SUSP 125 MG/5ML | Tier 1 | | | | |
| Antibacterials | CLARITHROMYC SUS 250/5ML | CLARITHROMYCIN FOR SUSP 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | CLARITHROMYC TAB 250MG | CLARITHROMYCIN TAB 250 MG | Tier 1 | | | | |
| Antibacterials | CLARITHROMYC TAB 500MG | CLARITHROMYCIN TAB 500 MG | Tier 1 | | | | |
| Antibacterials | CLARITHROMYC TAB 500MG ER | CLARITHROMYCIN TAB ER 24HR 500 MG | Tier 1 | | | | |
| Antibacterials | CLEOCIN CAP 150MG | CLINDAMYCIN HCL CAP 150 MG | Tier 3 | | | | |
| Antibacterials | CLEOCIN CAP 300MG | CLINDAMYCIN HCL CAP 300 MG | Tier 3 | | | | |
| Antibacterials | CLEOCIN CAP 75MG | CLINDAMYCIN HCL CAP 75 MG | Tier 2 | | | | |
| Antibacterials | CLEOCIN CRE 2% VAG | CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2% | Tier 3 | | | | |
| Antibacterials | CLEOCIN SUP 100MG | CLINDAMYCIN PHOSPHATE VAGINAL SUPPOS 100 MG | Tier 2 | | | | |
| Antibacterials | CLEOCIN PED SOL 75MG/5ML | CLINDAMYCIN PALMITATE HCL FOR SOLN 75 MG/5ML (BASE EQUIV) | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antibacterials | CLINDAMYCIN CAP 150MG | CLINDAMYCIN HCL CAP 150 MG | Tier 1 | | | | |
| Antibacterials | CLINDAMYCIN CAP 300MG | CLINDAMYCIN HCL CAP 300 MG | Tier 1 | | | | |
| Antibacterials | CLINDAMYCIN CAP 75MG | CLINDAMYCIN HCL CAP 75 MG | Tier 1 | | | | |
| Antibacterials | CLINDAMYCIN CRE 2% VAG | CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2% | Tier 1 | | | | |
| Antibacterials | CLINDAMYCIN SOL 75MG/5ML | CLINDAMYCIN PALMITATE HCL FOR SOLN 75 MG/5ML (BASE EQUIV) | Tier 1 | | | | |
| Antibacterials | CLINDESSE CRE 2% | CLINDAMYCIN PHOSPHATE (ONE DOSE) VAGINAL CREAM 2% | Tier 2 | | | | |
| Antibacterials | COLISTIMETH INJ 150MG | COLISTIMETHATE SOD FOR INJ 150 MG (COLISTIN BASE ACTIVITY) | Tier 1 | | | | |
| Antibacterials | COLY-MYCIN M INJ 150MG | COLISTIMETHATE SOD FOR INJ 150 MG (COLISTIN BASE ACTIVITY) | Tier 3 | | | | |
| Antibacterials | COREMINO TAB 135MG | MINOCYCLINE HCL TAB ER 24HR 135 MG | Tier 1 | | | | |
| Antibacterials | COREMINO TAB 45MG | MINOCYCLINE HCL TAB ER 24HR 45 MG | Tier 1 | | | | |
| Antibacterials | COREMINO TAB 90MG | MINOCYCLINE HCL TAB ER 24HR 90 MG | Tier 1 | | | | |
| Antibacterials | DEMECLOCYCL TAB 150MG | DEMECLOCYCLINE HCL TAB 150 MG | Tier 1 | | | | |
| Antibacterials | DEMECLOCYCL TAB 300MG | DEMECLOCYCLINE HCL TAB 300 MG | Tier 1 | | | | |
| Antibacterials | DICLOXACILL CAP 250MG | DICLOXACILLIN SODIUM CAP 250 MG | Tier 1 | | | | |
| Antibacterials | DICLOXACILL CAP 500MG | DICLOXACILLIN SODIUM CAP 500 MG | Tier 1 | | | | |
| Antibacterials | DIFICID SUS | FIDAXOMICIN FOR SUSP 40 MG/ML | Tier 3 | | X | | |
| Antibacterials | DIFICID TAB 200MG | FIDAXOMICIN TAB 200 MG | Tier 3 | | X | | |
| Antibacterials | DORYX TAB 200MG | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 200 MG | Tier 3 | | | X | |
| Antibacterials | DORYX TAB 50MG | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 50 MG | Tier 3 | | | X | |
| Antibacterials | DORYX TAB 80MG | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 80 MG | Tier 3 | | | | |
| Antibacterials | DORYX MPC TAB 120MG | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 120 MG | Tier 3 | | | | |
| Antibacterials | DORYX MPC TAB 60MG | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 60 MG | Tier 3 | | | | |
| Antibacterials | DOXYCYC MONO CAP 100MG | DOXYCYCLINE MONOHYDRATE CAP 100 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antibacterials | DOXYCYC MONO CAP 150MG | DOXYCYCLINE MONOHYDRATE CAP 150 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYC MONO CAP 50MG | DOXYCYCLINE MONOHYDRATE CAP 50 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYC MONO CAP 75MG | DOXYCYCLINE MONOHYDRATE CAP 75 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYC MONO TAB 100MG | DOXYCYCLINE MONOHYDRATE TAB 100 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYC MONO TAB 150MG | DOXYCYCLINE MONOHYDRATE TAB 150 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYC MONO TAB 50MG | DOXYCYCLINE MONOHYDRATE TAB 50 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYC MONO TAB 75MG | DOXYCYCLINE MONOHYDRATE TAB 75 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC CAP 100MG | DOXYCYCLINE HYCLATE CAP 100 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC CAP 50MG | DOXYCYCLINE HYCLATE CAP 50 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC TAB 100MG | DOXYCYCLINE HYCLATE TAB 100 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC TAB 100MG DR | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 100 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC TAB 150MG DR | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 150 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC TAB 200MG DR | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 200 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC TAB 50MG | DOXYCYCLINE HYCLATE TAB 50 MG | Tier 1 | | | X | |
| Antibacterials | DOXYCYCL HYC TAB 50MG DR | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 50 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC TAB 75MG DR | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 75 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCL HYC TAB 80MG DR | DOXYCYCLINE HYCLATE TAB DELAYED RELEASE 80 MG | Tier 3 | | | | |
| Antibacterials | DOXYCYCLINE CAP 40MG | DOXYCYCLINE (ROSACEA) CAP DELAYED RELEASE 40 MG | Tier 3 | | | X | |
| Antibacterials | DOXYCYCLINE CAP 40MG | DOXYCYCLINE (ROSACEA) CAP DELAYED RELEASE 40 MG | Tier 1 | | | X | |
| Antibacterials | DOXYCYCLINE POW HYCLATE | DOXYCYCLINE HYCLATE POWDER | Tier 3 | | | | |
| Antibacterials | DOXYCYCLINE SUS 25MG/5ML | DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML | Tier 1 | | | | |
| Antibacterials | DOXYCYCLINE TAB 150MG | DOXYCYCLINE HYCLATE TAB 150 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCLINE TAB 20MG | DOXYCYCLINE HYCLATE TAB 20 MG | Tier 1 | | | | |
| Antibacterials | DOXYCYCLINE TAB 75MG | DOXYCYCLINE HYCLATE TAB 75 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antibacterials | E.E.S. 400 TAB 400MG | ERYTHROMYCIN ETHYLSUCCINATE TAB 400 MG | Tier 3 | | | X | |
| Antibacterials | E.E.S. GRAN SUS 200/5ML | ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML | Tier 3 | | | | |
| Antibacterials | ERYPED SUS 200/5ML | ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML | Tier 3 | | | | |
| Antibacterials | ERYPED SUS 400/5ML | ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML | Tier 3 | | | | |
| Antibacterials | ERY-TAB TAB 250MG EC | ERYTHROMYCIN TAB DELAYED RELEASE 250 MG | Tier 3 | | | | |
| Antibacterials | ERY-TAB TAB 333MG EC | ERYTHROMYCIN TAB DELAYED RELEASE 333 MG | Tier 3 | | | | |
| Antibacterials | ERY-TAB TAB 500MG EC | ERYTHROMYCIN TAB DELAYED RELEASE 500 MG | Tier 3 | | | | |
| Antibacterials | ERYTHROCIN TAB 250MG | ERYTHROMYCIN STEARATE TAB 250 MG | Tier 2 | | | | |
| Antibacterials | ERYTHROM ETH SUS 200/5ML | ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 200 MG/5ML | Tier 1 | | | | |
| Antibacterials | ERYTHROM ETH SUS 400/5ML | ERYTHROMYCIN ETHYLSUCCINATE FOR SUSP 400 MG/5ML | Tier 1 | | | | |
| Antibacterials | ERYTHROM ETH TAB 400MG | ERYTHROMYCIN ETHYLSUCCINATE TAB 400 MG | Tier 1 | | | | |
| Antibacterials | ERYTHROMYCIN CAP 250MG EC | ERYTHROMYCIN W/ DELAYED RELEASE PARTICLES CAP 250 MG | Tier 1 | | | | |
| Antibacterials | ERYTHROMYCIN TAB 250MG | ERYTHROMYCIN TAB 250 MG | Tier 1 | | | | |
| Antibacterials | ERYTHROMYCIN TAB 250MG BS | ERYTHROMYCIN TAB 250 MG | Tier 1 | | | | |
| Antibacterials | ERYTHROMYCIN TAB 250MG EC | ERYTHROMYCIN TAB DELAYED RELEASE 250 MG | Tier 1 | | | | |
| Antibacterials | ERYTHROMYCIN TAB 333MG EC | ERYTHROMYCIN TAB DELAYED RELEASE 333 MG | Tier 1 | | | | |
| Antibacterials | ERYTHROMYCIN TAB 500MG | ERYTHROMYCIN TAB 500 MG | Tier 1 | | | | |
| Antibacterials | ERYTHROMYCIN TAB 500MG BS | ERYTHROMYCIN TAB 500 MG | Tier 1 | | | | |
| Antibacterials | ERYTHROMYCIN TAB 500MG EC | ERYTHROMYCIN TAB DELAYED RELEASE 500 MG | Tier 1 | | | | |
| Antibacterials | FIRVANQ SOL 25MG/ML | VANCOMYCIN HCL FOR ORAL SOLN 25 MG/ML (BASE EQUIVALENT) | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antibacterials | FIRVANQ SOL 50MG/ML | VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | FLAGYL CAP 375MG | METRONIDAZOLE CAP 375 MG | Tier 3 | | | | |
| Antibacterials | FOSFOMYCIN POW 3GM | FOSFOMYCIN TROMETHAMINE POWD PACK 3 GM (BASE EQUIVALENT) | Tier 1 | | | | |
| Antibacterials | HIPREX TAB 1GM | METHENAMINE HIPPURATE TAB 1 GM | Tier 3 | | | | |
| Antibacterials | HUMATIN CAP 250MG | PAROMOMYCIN SULFATE CAP 250 MG | Tier 2 | | | | |
| Antibacterials | LEVOFLOXACIN SOL 25MG/ML | LEVOFLOXACIN ORAL SOLN 25 MG/ML | Tier 1 | | | | |
| Antibacterials | LEVOFLOXACIN TAB 250MG | LEVOFLOXACIN TAB 250 MG | Tier 1 | | | | |
| Antibacterials | LEVOFLOXACIN TAB 500MG | LEVOFLOXACIN TAB 500 MG | Tier 1 | | | | |
| Antibacterials | LEVOFLOXACIN TAB 750MG | LEVOFLOXACIN TAB 750 MG | Tier 1 | | | | |
| Antibacterials | LIKMEZ SUS 500/5ML | METRONIDAZOLE SUSP 500 MG/5ML | Tier 3 | | | | |
| Antibacterials | LINEZOLID SUS 100/5ML | LINEZOLID FOR SUSP 100 MG/5ML | Tier 1 | | | | |
| Antibacterials | LINEZOLID TAB 600MG | LINEZOLID TAB 600 MG | Tier 1 | | | | |
| Antibacterials | LYMEPAK TAB 100MG | DOXYCYCLINE HYCLATE TAB 100 MG | Tier 3 | | | X | |
| Antibacterials | MACROBID CAP 100MG | NITROFURANTOIN MONOHYDRATE MACROCRYSTALLINE CAP 100 MG | Tier 3 | | | | |
| Antibacterials | MACRODANTIN CAP 100MG | NITROFURANTOIN MACROCRYSTALLINE CAP 100 MG | Tier 3 | | | | |
| Antibacterials | MACRODANTIN CAP 25MG | NITROFURANTOIN MACROCRYSTALLINE CAP 25 MG | Tier 3 | | | | |
| Antibacterials | MACRODANTIN CAP 50MG | NITROFURANTOIN MACROCRYSTALLINE CAP 50 MG | Tier 3 | | | | |
| Antibacterials | METHENAM HIP TAB 1GM | METHENAMINE HIPPURATE TAB 1 GM | Tier 1 | | | | |
| Antibacterials | METROCREAM CRE 0.75% | METRONIDAZOLE CREAM 0.75% | Tier 3 | | | | |
| Antibacterials | METROGEL GEL 1% | METRONIDAZOLE GEL 1% | Tier 3 | | | X | |
| Antibacterials | METROLOTION LOT 0.75% | METRONIDAZOLE LOTION 0.75% | Tier 3 | | | | |
| Antibacterials | METRONIDAZOL CAP 375MG | METRONIDAZOLE CAP 375 MG | Tier 1 | | | | |
| Antibacterials | METRONIDAZOL CRE 0.75% | METRONIDAZOLE CREAM 0.75% | Tier 1 | | | | |
| Antibacterials | METRONIDAZOL GEL 0.75% | METRONIDAZOLE GEL 0.75% | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antibacterials | METRONIDAZOL GEL 0.75%VAG | METRONIDAZOLE VAGINAL GEL 0.75% | Tier 1 | | | | |
| Antibacterials | METRONIDAZOL GEL 1% | METRONIDAZOLE GEL 1% | Tier 1 | | | | |
| Antibacterials | METRONIDAZOL LOT 0.75% | METRONIDAZOLE LOTION 0.75% | Tier 1 | | | | |
| Antibacterials | METRONIDAZOL TAB 250MG | METRONIDAZOLE TAB 250 MG | Tier 1 | | | | |
| Antibacterials | METRONIDAZOL TAB 500MG | METRONIDAZOLE TAB 500 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE CAP 100MG | MINOCYCLINE HCL CAP 100 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE CAP 135MG ER | MINOCYCLINE HCL CAP ER 24HR 135 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | MINOCYCLINE CAP 45MG ER | MINOCYCLINE HCL CAP ER 24HR 45 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | MINOCYCLINE CAP 50MG | MINOCYCLINE HCL CAP 50 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE CAP 75MG | MINOCYCLINE HCL CAP 75 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE CAP 90MG ER | MINOCYCLINE HCL CAP ER 24HR 90 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | MINOCYCLINE TAB 100MG | MINOCYCLINE HCL TAB 100 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 105MG ER | MINOCYCLINE HCL TAB ER 24HR 105 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 115MG ER | MINOCYCLINE HCL TAB ER 24HR 115 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 135MG ER | MINOCYCLINE HCL TAB ER 24HR 135 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 45MG ER | MINOCYCLINE HCL TAB ER 24HR 45 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 50MG | MINOCYCLINE HCL TAB 50 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 55MG ER | MINOCYCLINE HCL TAB ER 24HR 55 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 65MG ER | MINOCYCLINE HCL TAB ER 24HR 65 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 75MG | MINOCYCLINE HCL TAB 75 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 80MG ER | MINOCYCLINE HCL TAB ER 24HR 80 MG | Tier 1 | | | | |
| Antibacterials | MINOCYCLINE TAB 90MG ER | MINOCYCLINE HCL TAB ER 24HR 90 MG | Tier 1 | | | | |
| Antibacterials | MINOLIRA TAB 105MG | MINOCYCLINE HCL TAB ER 24HR BIPHASIC RELEASE 105 MG | Tier 3 | | | X | |
| Antibacterials | MINOLIRA TAB 135MG | MINOCYCLINE HCL TAB ER 24HR BIPHASIC RELEASE 135 MG | Tier 3 | | | X | |
| Antibacterials | MONDOXYNE NL CAP 100MG | DOXYCYCLINE MONOHYDRATE CAP 100 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antibacterials | MONUROL PAK GRANULES | FOSFOMYCIN TROMETHAMINE POWD PACK 3 GM (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | MOXIFLOXACIN TAB 400MG | MOXIFLOXACIN HCL TAB 400 MG (BASE EQUIV) | Tier 1 | | | | |
| Antibacterials | NEOMYCIN TAB 500MG | NEOMYCIN SULFATE TAB 500 MG | Tier 1 | | | | |
| Antibacterials | NITROFUR MAC CAP 100MG | NITROFURANTOIN MACROCRYSTALLINE CAP 100 MG | Tier 1 | | | | |
| Antibacterials | NITROFUR MAC CAP 25MG | NITROFURANTOIN MACROCRYSTALLINE CAP 25 MG | Tier 1 | | | | |
| Antibacterials | NITROFUR MAC CAP 50MG | NITROFURANTOIN MACROCRYSTALLINE CAP 50 MG | Tier 1 | | | | |
| Antibacterials | NITROFURANTN CAP 100MG | NITROFURANTOIN MONOHYDRATE MACROCRYSTALLINE CAP 100 MG | Tier 1 | | | | |
| Antibacterials | NITROFURANTN SUS 25MG/5ML | NITROFURANTOIN SUSP 25 MG/5ML | Tier 1 | | | | |
| Antibacterials | NITROFURANTO SUS 50MG/5ML | NITROFURANTOIN SUSP 50 MG/5ML | Tier 3 | | | X | |
| Antibacterials | NORITATE CRE 1% | METRONIDAZOLE CREAM 1% | Tier 3 | | | X | |
| Antibacterials | NUVESSA GEL 1.3% | METRONIDAZOLE VAGINAL GEL 1.3% | Tier 3 | | | | |
| Antibacterials | NUZYRA TAB 150MG | OMADACYCLINE TOSYLATE TAB 150 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | OFLOXACIN TAB 300MG | OFLOXACIN TAB 300 MG | Tier 1 | | | | |
| Antibacterials | OFLOXACIN TAB 400MG | OFLOXACIN TAB 400 MG | Tier 1 | | | | |
| Antibacterials | ORACEA CAP 40MG | DOXYCYCLINE (ROSACEA) CAP DELAYED RELEASE 40 MG | Tier 3 | | | X | |
| Antibacterials | PENICILLN VK SOL 125/5ML | PENICILLIN V POTASSIUM FOR SOLN 125 MG/5ML | Tier 1 | | | | |
| Antibacterials | PENICILLN VK SOL 250/5ML | PENICILLIN V POTASSIUM FOR SOLN 250 MG/5ML | Tier 1 | | | | |
| Antibacterials | PENICILLN VK TAB 250MG | PENICILLIN V POTASSIUM TAB 250 MG | Tier 1 | | | | |
| Antibacterials | PENICILLN VK TAB 500MG | PENICILLIN V POTASSIUM TAB 500 MG | Tier 1 | | | | |
| Antibacterials | ROSDAN CRE 0.75% | METRONIDAZOLE CREAM 0.75% | Tier 1 | | | | |
| Antibacterials | ROSDAN GEL 0.75% | METRONIDAZOLE GEL 0.75% | Tier 1 | | | | |
| Antibacterials | SEYSARA TAB 100MG | SARECYCLINE HCL TAB 100 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antibacterials | SEYSARA TAB 150MG | SARECYCLINE HCL TAB 150 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antibacterials | SEYSARA TAB 60MG | SARECYCLINE HCL TAB 60 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antibacterials | SIVEXTRO TAB 200MG | TEDIZOLID PHOSPHATE TAB 200 MG | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antibacterials | SMZ/TMP DS TAB 800-160 | SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG | Tier 1 | | | | |
| Antibacterials | SMZ-TMP SUS 200-40/5 | SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML | Tier 1 | | | | |
| Antibacterials | SMZ-TMP TAB 400-80MG | SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 400-80 MG | Tier 1 | | | | |
| Antibacterials | SMZ-TMP DS TAB 800-160 | SULFAMETHOXAZOLE-TRIMETHOPRIM TAB 800-160 MG | Tier 1 | | | | |
| Antibacterials | SOLODYN TAB 105MG | MINOCYCLINE HCL TAB ER 24HR 105 MG | Tier 3 | | | | |
| Antibacterials | SOLODYN TAB 115MG | MINOCYCLINE HCL TAB ER 24HR 115 MG | Tier 3 | | | | |
| Antibacterials | SOLODYN TAB 55MG | MINOCYCLINE HCL TAB ER 24HR 55 MG | Tier 3 | | | | |
| Antibacterials | SOLODYN TAB 65MG | MINOCYCLINE HCL TAB ER 24HR 65 MG | Tier 3 | | | | |
| Antibacterials | SOLODYN TAB 80MG | MINOCYCLINE HCL TAB ER 24HR 80 MG | Tier 3 | | | | |
| Antibacterials | SOLOSEC GRA 2GM | SECNIDAZOLE GRANULES PACKET 2 GM | Tier 3 | | X | | |
| Antibacterials | SULFADIAZINE TAB 500MG | SULFADIAZINE TAB 500 MG | Tier 1 | | | | |
| Antibacterials | SULFATRIM PD SUS 200-40/5 | SULFAMETHOXAZOLE-TRIMETHOPRIM SUSP 200-40 MG/5ML | Tier 1 | | | | |
| Antibacterials | SUPRAX CAP 400MG | CEFIXIME CAP 400 MG | Tier 3 | | | | |
| Antibacterials | SUPRAX SUS 100/5ML | CEFIXIME FOR SUSP 100 MG/5ML | Tier 3 | | | | |
| Antibacterials | TARGADOX TAB 50MG | DOXYCYCLINE HYCLATE TAB 50 MG | Tier 3 | | | X | |
| Antibacterials | TETRACYCLINE CAP 250MG | TETRACYCLINE HCL CAP 250 MG | Tier 1 | | | | |
| Antibacterials | TETRACYCLINE CAP 500MG | TETRACYCLINE HCL CAP 500 MG | Tier 1 | | | | |
| Antibacterials | TETRACYCLINE TAB 250MG | TETRACYCLINE HCL TAB 250 MG | Tier 3 | | | X | |
| Antibacterials | TETRACYCLINE TAB 500MG | TETRACYCLINE HCL TAB 500 MG | Tier 3 | | | X | |
| Antibacterials | TINIDAZOLE TAB 250MG | TINIDAZOLE TAB 250 MG | Tier 1 | | | | |
| Antibacterials | TINIDAZOLE TAB 500MG | TINIDAZOLE TAB 500 MG | Tier 1 | | | | |
| Antibacterials | TRIMETHOPRIM TAB 100MG | TRIMETHOPRIM TAB 100 MG | Tier 1 | | | | |
| Antibacterials | VANCOGIN CAP 250MG | VANCOMYCIN HCL CAP 250 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | VANCOMYCIN CAP 125MG | VANCOMYCIN HCL CAP 125 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antibacterials | VANCOMYCIN CAP 250MG | VANCOMYCIN HCL CAP 250 MG (BASE EQUIVALENT) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antibacterials | VANCOMYCIN SOL 250/5ML | VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT) | Tier 1 | | | | |
| Antibacterials | VANCOMYCIN SOL 25MG/ML | VANCOMYCIN HCL FOR ORAL SOLN 25 MG/ML (BASE EQUIVALENT) | Tier 1 | | | | |
| Antibacterials | VANCOMYCIN SOL 50MG/ML | VANCOMYCIN HCL FOR ORAL SOLN 50 MG/ML (BASE EQUIVALENT) | Tier 1 | | | | |
| Antibacterials | VANCOMYCIN SUS +SYRSPEN | *VANCOMYCIN HCL ORAL SUSP 50 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Antibacterials | VANDAZOLE GEL 0.75% | METRONIDAZOLE VAGINAL GEL 0.75% | Tier 3 | | | | |
| Antibacterials | VIBRAMYCIN CAP 100MG | DOXYCYCLINE HYCLATE CAP 100 MG | Tier 3 | | | | |
| Antibacterials | VIBRAMYCIN SUS 25MG/5ML | DOXYCYCLINE MONOHYDRATE FOR SUSP 25 MG/5ML | Tier 3 | | | | |
| Antibacterials | XACIATO GEL 2% | CLINDAMYCIN PHOSPHATE VAGINAL GEL 2% | Tier 2 | | | | |
| Antibacterials | XENLETA TAB 600MG | LEFAMULIN ACETATE TAB 600 MG | Tier 3 | | | | |
| Antibacterials | XIFAXAN TAB 200MG | RIFAXIMIN TAB 200 MG | Tier 3 | | | | |
| Antibacterials | XIFAXAN TAB 550MG | RIFAXIMIN TAB 550 MG | Tier 3 | | X | | |
| Antibacterials | XIMINO CAP 135MG ER | MINOCYCLINE HCL CAP ER 24HR 135 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | XIMINO CAP 45MG ER | MINOCYCLINE HCL CAP ER 24HR 45 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | XIMINO CAP 90MG ER | MINOCYCLINE HCL CAP ER 24HR 90 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antibacterials | ZITHROMAX POW 1GM PAK | AZITHROMYCIN POWD PACK FOR SUSP 1 GM | Tier 3 | | | | |
| Antibacterials | ZITHROMAX SUS 100/5ML | AZITHROMYCIN FOR SUSP 100 MG/5ML | Tier 3 | | | | |
| Antibacterials | ZITHROMAX SUS 200/5ML | AZITHROMYCIN FOR SUSP 200 MG/5ML | Tier 3 | | | | |
| Antibacterials | ZITHROMAX TAB 250MG | AZITHROMYCIN TAB 250 MG | Tier 3 | | | | |
| Antibacterials | ZITHROMAX TAB 500MG | AZITHROMYCIN TAB 500 MG | Tier 3 | | | | |
| Antibacterials | ZITHROMAX TAB TRI-PAK | AZITHROMYCIN TAB 500 MG | Tier 3 | | | | |
| Antibacterials | ZITHROMAX TAB Z-PAK | AZITHROMYCIN TAB 250 MG | Tier 3 | | | | |
| Antibacterials | ZYVOX SUS 100MG/5M | LINEZOLID FOR SUSP 100 MG/5ML | Tier 3 | | | | |
| Antibacterials | ZYVOX TAB 600MG | LINEZOLID TAB 600 MG | Tier 3 | | | X | |
| Antibacterials - Drugs to Treat Bacterial Infections | ARZOL SILVER MIS NITR APP | SILVER NITRATE-POTASSIUM NITRATE APPLICATOR 75-25% | Tier 3 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | AVIDOXY DK KIT | *DOXYCYCLINE TAB 100 MG & SUNCREEN & SAL ACID WASH 2% KIT** | Tier 3 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | BENZALKONIUM SOL 50% | BENZALKONIUM CHLORIDE SOLN 50% | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antibacterials - Drugs to Treat Bacterial Infections | BENZALKONIUM SOL NF | BENZALKONIUM CHLORIDE SOLN | Tier 2 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | FEM PH GEL | ACETIC ACID-OXYQUINOLINE VAGINAL GEL 0.9-0.025% | Tier 3 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | FIRST-METRON SUS 50MG/ML | *METRONIDAZOLE BENZOATE FOR SUSP 50 MG/ML (CMPD KIT)* | Tier 3 | X | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | GRAFCO SILVR MIS NIT APPL | SILVER NITRATE-POTASSIUM NITRATE APPLICATOR 75-25% | Tier 3 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | IODINE TIN 2% | *IODINE TINCTURE** | Tier 1 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | LUGOLS SOL IODINE | *IODINE SOLUTION** | Tier 3 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | METHENAM MAN TAB 1000MG | METHENAMINE MANDELATE TAB 1 GM | Tier 1 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | METHENAM MAN TAB 1GM | METHENAMINE MANDELATE TAB 1 GM | Tier 1 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | METHENAM MAN TAB 500MG | METHENAMINE MANDELATE TAB 0.5 GM | Tier 1 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | METRONIDAZOL SUS 50MG/ML | *METRONIDAZOLE BENZOATE FOR SUSP 50 MG/ML (CMPD KIT)* | Tier 3 | X | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | NEO-SYNALAR KIT | *NEOMYCIN-FLUOCINOLONE CREAM 0.5-0.025% & EMOLLIENT CR KIT* | Tier 3 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | PHENOL LIQ | PHENOL LIQUID (BULK) | Tier 3 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | PHENOL LIQ 89% | PHENOL LIQUID (BULK) | Tier 3 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | PHENOL LIQ 89% | PHENOL LIQUID (BULK) | Tier 2 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | SILVER NITRA SOL 0.5% | SILVER NITRATE SOLN 0.5% | Tier 1 | | | | |
| Antibacterials - Drugs to Treat Bacterial Infections | SUTAB TAB | SOD SULFATE-MG SULFATE-POT CHLORIDE TAB 1479-225-188 MG | Tier 2 | | | | |
| Anticonvulsants | APTIOM TAB 200MG | ESLICARBAZEPINE ACETATE TAB 200 MG | Tier 3 | X | | | |
| Anticonvulsants | APTIOM TAB 400MG | ESLICARBAZEPINE ACETATE TAB 400 MG | Tier 3 | X | | | |
| Anticonvulsants | APTIOM TAB 600MG | ESLICARBAZEPINE ACETATE TAB 600 MG | Tier 3 | X | | | |
| Anticonvulsants | APTIOM TAB 800MG | ESLICARBAZEPINE ACETATE TAB 800 MG | Tier 3 | X | | | |
| Anticonvulsants | BANZEL SUS 40MG/ML | RUFINAMIDE SUSP 40 MG/ML | Tier 3 | | | | |
| Anticonvulsants | BANZEL TAB 200MG | RUFINAMIDE TAB 200 MG | Tier 3 | X | | | |
| Anticonvulsants | BANZEL TAB 400MG | RUFINAMIDE TAB 400 MG | Tier 3 | X | | | |
| Anticonvulsants | BRIVIACT SOL 10MG/ML | BRIVARACETAM ORAL SOLN 10 MG/ML | Tier 3 | X | | | |
| Anticonvulsants | BRIVIACT TAB 100MG | BRIVARACETAM TAB 100 MG | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | BRIVIACT TAB 10MG | BRIVARACETAM TAB 10 MG | Tier 3 | X | | | |
| Anticonvulsants | BRIVIACT TAB 25MG | BRIVARACETAM TAB 25 MG | Tier 3 | X | | | |
| Anticonvulsants | BRIVIACT TAB 50MG | BRIVARACETAM TAB 50 MG | Tier 3 | X | | | |
| Anticonvulsants | BRIVIACT TAB 75MG | BRIVARACETAM TAB 75 MG | Tier 3 | X | | | |
| Anticonvulsants | CARBAMAZEPIN CAP 100MG ER | CARBAMAZEPINE CAP ER 12HR 100 MG | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN CAP 200MG ER | CARBAMAZEPINE CAP ER 12HR 200 MG | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN CAP 300MG ER | CARBAMAZEPINE CAP ER 12HR 300 MG | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN CHW 100MG | CARBAMAZEPINE CHEW TAB 100 MG | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN POW | CARBAMAZEPINE POWDER | Tier 3 | X | | | |
| Anticonvulsants | CARBAMAZEPIN SUS 100/5ML | CARBAMAZEPINE SUSP 100 MG/5ML | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN TAB 100MG ER | CARBAMAZEPINE TAB ER 12HR 100 MG | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN TAB 100MGER | CARBAMAZEPINE TAB ER 12HR 100 MG | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN TAB 200MG | CARBAMAZEPINE TAB 200 MG | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN TAB 200MG ER | CARBAMAZEPINE TAB ER 12HR 200 MG | Tier 1 | | | | |
| Anticonvulsants | CARBAMAZEPIN TAB 400MG ER | CARBAMAZEPINE TAB ER 12HR 400 MG | Tier 1 | | | | |
| Anticonvulsants | CARBATROL CAP 100MG | CARBAMAZEPINE CAP ER 12HR 100 MG | Tier 3 | | | | |
| Anticonvulsants | CARBATROL CAP 200MG | CARBAMAZEPINE CAP ER 12HR 200 MG | Tier 3 | | | | |
| Anticonvulsants | CARBATROL CAP 300MG | CARBAMAZEPINE CAP ER 12HR 300 MG | Tier 3 | | | | |
| Anticonvulsants | CELONTIN CAP 300MG | METHSUXIMIDE CAP 300 MG | Tier 3 | | | | |
| Anticonvulsants | CLOBAZAM SUS 2.5MG/ML | CLOBAZAM SUSPENSION 2.5 MG/ML | Tier 1 | X | | | |
| Anticonvulsants | CLOBAZAM TAB 10MG | CLOBAZAM TAB 10 MG | Tier 1 | X | | | |
| Anticonvulsants | CLOBAZAM TAB 20MG | CLOBAZAM TAB 20 MG | Tier 1 | X | | | |
| Anticonvulsants | DIASTAT ACDL GEL 12.5-20 | DIAZEPAM RECTAL GEL DELIVERY SYSTEM 20 MG | Tier 3 | | | | |
| Anticonvulsants | DIASTAT ACDL GEL 5-10MG | DIAZEPAM RECTAL GEL DELIVERY SYSTEM 10 MG | Tier 3 | | | | |
| Anticonvulsants | DIASTAT PED GEL 2.5M GEL | DIAZEPAM RECTAL GEL DELIVERY SYSTEM 2.5 MG | Tier 2 | | | | |
| Anticonvulsants | DIAZEPAM GEL 10MG | DIAZEPAM RECTAL GEL DELIVERY SYSTEM 10 MG | Tier 1 | | | | |
| Anticonvulsants | DIAZEPAM GEL 2.5MG | DIAZEPAM RECTAL GEL DELIVERY SYSTEM 2.5 MG | Tier 1 | | | | |
| Anticonvulsants | DIAZEPAM GEL 20MG | DIAZEPAM RECTAL GEL DELIVERY SYSTEM 20 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Anticonvulsants | DILANTIN CAP 100MG | PHENYTOIN SODIUM EXTENDED CAP 100 MG | Tier 3 | | | | |
| Anticonvulsants | DILANTIN CAP 30MG | PHENYTOIN SODIUM EXTENDED CAP 30 MG | Tier 3 | | | | |
| Anticonvulsants | DILANTIN CHW 50MG | PHENYTOIN CHEW TAB 50 MG | Tier 3 | | | | |
| Anticonvulsants | DILANTIN-125 SUS 125/5ML | PHENYTOIN SUSP 125 MG/5ML | Tier 3 | | | | |
| Anticonvulsants | ELEPSIA XR TAB 1000MG | LEVETIRACETAM TAB ER 24HR 1000 MG | Tier 3 | X | | X | |
| Anticonvulsants | ELEPSIA XR TAB 1500MG | LEVETIRACETAM TAB ER 24HR 1500 MG | Tier 3 | X | | X | |
| Anticonvulsants | EPIDIOLEX SOL 100MG/ML | CANNABIDIOL SOLN 100 MG/ML | Tier 3 | X | | | X |
| Anticonvulsants | EPITOL TAB 200MG | CARBAMAZEPINE TAB 200 MG | Tier 1 | | | | |
| Anticonvulsants | EPRONTIA SOL 25MG/ML | TOPIRAMATE ORAL SOLN 25 MG/ML | Tier 3 | | | X | |
| Anticonvulsants | ETHOSUXIMIDE CAP 250MG | ETHOSUXIMIDE CAP 250 MG | Tier 1 | | | | |
| Anticonvulsants | ETHOSUXIMIDE SOL 250/5ML | ETHOSUXIMIDE SOLN 250 MG/5ML | Tier 1 | | | | |
| Anticonvulsants | FANATREX SUS 25MG/ML | *GABAPENTIN ORAL SUSP 25 MG/ML (CMPD KIT)** | Tier 3 | X | | | |
| Anticonvulsants | FELBAMATE SUS 600/5ML | FELBAMATE SUSP 600 MG/5ML | Tier 1 | | | | |
| Anticonvulsants | FELBAMATE TAB 400MG | FELBAMATE TAB 400 MG | Tier 1 | | | | |
| Anticonvulsants | FELBAMATE TAB 600MG | FELBAMATE TAB 600 MG | Tier 1 | | | | |
| Anticonvulsants | FELBATOL SUS 600/5ML | FELBAMATE SUSP 600 MG/5ML | Tier 3 | | | | |
| Anticonvulsants | FELBATOL TAB 400MG | FELBAMATE TAB 400 MG | Tier 3 | | | | |
| Anticonvulsants | FELBATOL TAB 600MG | FELBAMATE TAB 600 MG | Tier 3 | | | | |
| Anticonvulsants | FINTEPLA SOL 2.2MG/ML | FENFLURAMINE HCL ORAL SOLN 2.2 MG/ML | Tier 3 | X | | | X |
| Anticonvulsants | FYCOMPA SUS 0.5MG/ML | PERAMPANEL SUSP 0.5 MG/ML | Tier 3 | X | | | |
| Anticonvulsants | FYCOMPA TAB 10MG | PERAMPANEL TAB 10 MG | Tier 3 | X | | | |
| Anticonvulsants | FYCOMPA TAB 12MG | PERAMPANEL TAB 12 MG | Tier 3 | X | | | |
| Anticonvulsants | FYCOMPA TAB 2MG | PERAMPANEL TAB 2 MG | Tier 3 | X | | | |
| Anticonvulsants | FYCOMPA TAB 4MG | PERAMPANEL TAB 4 MG | Tier 3 | X | | | |
| Anticonvulsants | FYCOMPA TAB 6MG | PERAMPANEL TAB 6 MG | Tier 3 | X | | | |
| Anticonvulsants | FYCOMPA TAB 8MG | PERAMPANEL TAB 8 MG | Tier 3 | X | | | |
| Anticonvulsants | GABAPENTIN CAP 100MG | GABAPENTIN CAP 100 MG | Tier 1 | | | | |
| Anticonvulsants | GABAPENTIN CAP 300MG | GABAPENTIN CAP 300 MG | Tier 1 | | | | |
| Anticonvulsants | GABAPENTIN CAP 400MG | GABAPENTIN CAP 400 MG | Tier 1 | | | | |
| Anticonvulsants | GABAPENTIN SOL 250/5ML | GABAPENTIN ORAL SOLN 250 MG/5ML | Tier 1 | | | | |
| Anticonvulsants | GABAPENTIN TAB 600MG | GABAPENTIN TAB 600 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | GABAPENTIN TAB 800MG | GABAPENTIN TAB 800 MG | Tier 1 | | | | |
| Anticonvulsants | GABITRIL TAB 12MG | TIAGABINE HCL TAB 12 MG | Tier 3 | | | | |
| Anticonvulsants | GABITRIL TAB 16MG | TIAGABINE HCL TAB 16 MG | Tier 3 | | | | |
| Anticonvulsants | GABITRIL TAB 2MG | TIAGABINE HCL TAB 2 MG | Tier 3 | | | | |
| Anticonvulsants | GABITRIL TAB 4MG | TIAGABINE HCL TAB 4 MG | Tier 3 | | | | |
| Anticonvulsants | KEPPRA SOL 100MG/ML | LEVETIRACETAM ORAL SOLN 100 MG/ML | Tier 3 | | | | |
| Anticonvulsants | KEPPRA TAB 1000MG | LEVETIRACETAM TAB 1000 MG | Tier 3 | | | | |
| Anticonvulsants | KEPPRA TAB 250MG | LEVETIRACETAM TAB 250 MG | Tier 3 | | | | |
| Anticonvulsants | KEPPRA TAB 500MG | LEVETIRACETAM TAB 500 MG | Tier 3 | | | | |
| Anticonvulsants | KEPPRA TAB 750MG | LEVETIRACETAM TAB 750 MG | Tier 3 | | | | |
| Anticonvulsants | KEPPRA XR TAB 500MG | LEVETIRACETAM TAB ER 24HR 500 MG | Tier 3 | | | | |
| Anticonvulsants | KEPPRA XR TAB 750MG | LEVETIRACETAM TAB ER 24HR 750 MG | Tier 3 | | | | |
| Anticonvulsants | LACOSAMIDE SOL 100/10ML | LACOSAMIDE ORAL SOLUTION 10 MG/ML | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE SOL 10MG/ML | LACOSAMIDE ORAL SOLUTION 10 MG/ML | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE SOL 150/15ML | LACOSAMIDE ORAL SOLUTION 10 MG/ML | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE SOL 200/20ML | LACOSAMIDE ORAL SOLUTION 10 MG/ML | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE SOL 50/5ML | LACOSAMIDE ORAL SOLUTION 10 MG/ML | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE SOL 50MG/5ML | LACOSAMIDE ORAL SOLUTION 10 MG/ML | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE TAB 100MG | LACOSAMIDE TAB 100 MG | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE TAB 150MG | LACOSAMIDE TAB 150 MG | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE TAB 200MG | LACOSAMIDE TAB 200 MG | Tier 1 | X | | | |
| Anticonvulsants | LACOSAMIDE TAB 50MG | LACOSAMIDE TAB 50 MG | Tier 1 | X | | | |
| Anticonvulsants | LAMICTAL CHW 25MG | LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 25 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL CHW 5MG | LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 5 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL KIT START 35 | LAMOTRIGINE TAB 35 X 25 MG STARTER KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL KIT START 49 | LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL KIT START 98 | LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL TAB 100MG | LAMOTRIGINE TAB 100 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL TAB 150MG | LAMOTRIGINE TAB 150 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL TAB 200MG | LAMOTRIGINE TAB 200 MG | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | LAMICTAL TAB 25MG | LAMOTRIGINE TAB 25 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL ODT KIT | LAMOTRIGINE TAB DISINT 25 (14) & 50 MG (14) & 100 MG (7) KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL ODT KIT | LAMOTRIGINE TAB DISINT 21 X 25 MG & 7 X 50 MG TITRATION KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL ODT KIT | LAMOTRIGINE TAB DISINT 42 X 50MG & 14 X 100MG TITRATION KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL ODT TAB 100MG | LAMOTRIGINE ORALLY DISINTEGRATING TAB 100 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL ODT TAB 200MG | LAMOTRIGINE ORALLY DISINTEGRATING TAB 200 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL ODT TAB 25MG | LAMOTRIGINE ORALLY DISINTEGRATING TAB 25 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL ODT TAB 50MG | LAMOTRIGINE ORALLY DISINTEGRATING TAB 50 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR KIT | LAMOTRIGINE TAB ER 24HR 21 X 25 MG & 7 X 50 MG TITRATION KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR KIT | LAMOTRIGINE TAB ER 24HR 50 (14) & 100 MG(14) & 200 MG(7) KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR KIT | LAMOTRIGINE TAB ER 24HR 25 (14) & 50 MG (14) & 100 MG(7) KIT | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR TAB 100MG | LAMOTRIGINE TAB ER 24HR 100 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR TAB 200MG | LAMOTRIGINE TAB ER 24HR 200 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR TAB 250MG | LAMOTRIGINE TAB ER 24HR 250 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR TAB 25MG | LAMOTRIGINE TAB ER 24HR 25 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR TAB 300MG | LAMOTRIGINE TAB ER 24HR 300 MG | Tier 3 | | | | |
| Anticonvulsants | LAMICTAL XR TAB 50MG | LAMOTRIGINE TAB ER 24HR 50 MG | Tier 3 | | | | |
| Anticonvulsants | LAMOTRIG ODT KIT 25/50MG | LAMOTRIGINE TAB DISINT 21 X 25 MG & 7 X 50 MG TITRATION KIT | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIG ODT KIT 50/100MG | LAMOTRIGINE TAB DISINT 42 X 50MG & 14 X 100MG TITRATION KIT | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIG ODT TAB 100MG | LAMOTRIGINE ORALLY DISINTEGRATING TAB 100 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE CHW 25MG | LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 25 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | LAMOTRIGINE CHW 5MG | LAMOTRIGINE TAB CHEWABLE DISPERSIBLE 5 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE KIT ODT | LAMOTRIGINE TAB DISINT 25 (14) & 50 MG (14) & 100 MG (7) KIT | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE KIT START 35 | LAMOTRIGINE TAB 35 X 25 MG STARTER KIT | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE KIT START 49 | LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE KIT START 98 | LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 100MG | LAMOTRIGINE TAB 100 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 100MG ER | LAMOTRIGINE TAB ER 24HR 100 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 150MG | LAMOTRIGINE TAB 150 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 200MG | LAMOTRIGINE TAB 200 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 200MG | LAMOTRIGINE ORALLY DISINTEGRATING TAB 200 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 200MG ER | LAMOTRIGINE TAB ER 24HR 200 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 250MG ER | LAMOTRIGINE TAB ER 24HR 250 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 25MG | LAMOTRIGINE TAB 25 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 25MG ER | LAMOTRIGINE TAB ER 24HR 25 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 25MG ODT | LAMOTRIGINE ORALLY DISINTEGRATING TAB 25 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 300MG ER | LAMOTRIGINE TAB ER 24HR 300 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 50MG ER | LAMOTRIGINE TAB ER 24HR 50 MG | Tier 1 | | | | |
| Anticonvulsants | LAMOTRIGINE TAB 50MG ODT | LAMOTRIGINE ORALLY DISINTEGRATING TAB 50 MG | Tier 1 | | | | |
| Anticonvulsants | LEVETIRACETA SOL 100MG/ML | LEVETIRACETAM ORAL SOLN 100 MG/ML | Tier 1 | | | | |
| Anticonvulsants | LEVETIRACETA SOL 500/5ML | LEVETIRACETAM ORAL SOLN 100 MG/ML | Tier 1 | | | | |
| Anticonvulsants | LEVETIRACETA TAB 1000MG | LEVETIRACETAM TAB 1000 MG | Tier 1 | | | | |
| Anticonvulsants | LEVETIRACETA TAB 250MG | LEVETIRACETAM TAB 250 MG | Tier 1 | | | | |
| Anticonvulsants | LEVETIRACETA TAB 500MG | LEVETIRACETAM TAB 500 MG | Tier 1 | | | | |
| Anticonvulsants | LEVETIRACETA TAB 500MG ER | LEVETIRACETAM TAB ER 24HR 500 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | LEVETIRACETA TAB 750MG | LEVETIRACETAM TAB 750 MG | Tier 1 | | | | |
| Anticonvulsants | LEVETIRACETA TAB 750MG ER | LEVETIRACETAM TAB ER 24HR 750 MG | Tier 1 | | | | |
| Anticonvulsants | METHSUXIMIDE CAP 300MG | METHSUXIMIDE CAP 300 MG | Tier 1 | | | | |
| Anticonvulsants | MOTPOLY XR CAP 100MG | LACOSAMIDE CAP ER 24HR 100 MG | Tier 3 | X | | | |
| Anticonvulsants | MOTPOLY XR CAP 150MG | LACOSAMIDE CAP ER 24HR 150 MG | Tier 3 | X | | | |
| Anticonvulsants | MOTPOLY XR CAP 200MG | LACOSAMIDE CAP ER 24HR 200 MG | Tier 3 | X | | | |
| Anticonvulsants | MYSOLINE TAB 250MG | PRIMIDONE TAB 250 MG | Tier 2 | | | | |
| Anticonvulsants | MYSOLINE TAB 50MG | PRIMIDONE TAB 50 MG | Tier 2 | | | | |
| Anticonvulsants | NAYZILAM SPR 5MG | MIDAZOLAM NASAL SPRAY SOLN 5 MG/0.1 ML | Tier 3 | X | | | |
| Anticonvulsants | NEURONTIN CAP 100MG | GABAPENTIN CAP 100 MG | Tier 3 | | | | |
| Anticonvulsants | NEURONTIN CAP 300MG | GABAPENTIN CAP 300 MG | Tier 3 | | | | |
| Anticonvulsants | NEURONTIN CAP 400MG | GABAPENTIN CAP 400 MG | Tier 3 | | | | |
| Anticonvulsants | NEURONTIN SOL 250/5ML | GABAPENTIN ORAL SOLN 250 MG/5ML | Tier 3 | | | | |
| Anticonvulsants | NEURONTIN TAB 600MG | GABAPENTIN TAB 600 MG | Tier 3 | | | | |
| Anticonvulsants | NEURONTIN TAB 800MG | GABAPENTIN TAB 800 MG | Tier 3 | | | | |
| Anticonvulsants | ONFI SUS 2.5MG/ML | CLOBAZAM SUSPENSION 2.5 MG/ML | Tier 3 | X | | | |
| Anticonvulsants | ONFI TAB 10MG | CLOBAZAM TAB 10 MG | Tier 3 | X | | | |
| Anticonvulsants | ONFI TAB 20MG | CLOBAZAM TAB 20 MG | Tier 3 | X | | | |
| Anticonvulsants | OXCARBAZEPIN SUS 300MG/5M | OXCARBAZEPINE SUSP 300 MG/5ML (60 MG/ML) | Tier 1 | | | | |
| Anticonvulsants | OXCARBAZEPIN TAB 150MG | OXCARBAZEPINE TAB 150 MG | Tier 1 | | | | |
| Anticonvulsants | OXCARBAZEPIN TAB 300MG | OXCARBAZEPINE TAB 300 MG | Tier 1 | | | | |
| Anticonvulsants | OXCARBAZEPIN TAB 600MG | OXCARBAZEPINE TAB 600 MG | Tier 1 | | | | |
| Anticonvulsants | OXTELLAR XR TAB 150MG | OXCARBAZEPINE TAB ER 24HR 150 MG | Tier 3 | | | X | |
| Anticonvulsants | OXTELLAR XR TAB 300MG | OXCARBAZEPINE TAB ER 24HR 300 MG | Tier 3 | | | X | |
| Anticonvulsants | OXTELLAR XR TAB 600MG | OXCARBAZEPINE TAB ER 24HR 600 MG | Tier 3 | | | X | |
| Anticonvulsants | PHENOBARB ELX 20MG/5ML | PHENOBARBITAL ELIXIR 20 MG/5ML | Tier 1 | | | | |
| Anticonvulsants | PHENOBARB SOL 20MG/5ML | PHENOBARBITAL ELIXIR 20 MG/5ML | Tier 1 | | | | |
| Anticonvulsants | PHENOBARB TAB 100MG | PHENOBARBITAL TAB 100 MG | Tier 1 | | | | |
| Anticonvulsants | PHENOBARB TAB 15MG | PHENOBARBITAL TAB 15 MG | Tier 1 | | | | |
| Anticonvulsants | PHENOBARB TAB 16.2MG | PHENOBARBITAL TAB 16.2 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | PHENOBARB TAB 30MG | PHENOBARBITAL TAB 30 MG | Tier 1 | | | | |
| Anticonvulsants | PHENOBARB TAB 32.4MG | PHENOBARBITAL TAB 32.4 MG | Tier 1 | | | | |
| Anticonvulsants | PHENOBARB TAB 60MG | PHENOBARBITAL TAB 60 MG | Tier 1 | | | | |
| Anticonvulsants | PHENOBARB TAB 64.8MG | PHENOBARBITAL TAB 64.8 MG | Tier 1 | | | | |
| Anticonvulsants | PHENOBARB TAB 97.2MG | PHENOBARBITAL TAB 97.2 MG | Tier 1 | | | | |
| Anticonvulsants | PHENYTEK CAP 200MG | PHENYTOIN SODIUM EXTENDED CAP 200 MG | Tier 1 | | | | |
| Anticonvulsants | PHENYTEK CAP 300MG | PHENYTOIN SODIUM EXTENDED CAP 300 MG | Tier 1 | | | | |
| Anticonvulsants | PHENYTOIN CHW 50MG | PHENYTOIN CHEW TAB 50 MG | Tier 1 | | | | |
| Anticonvulsants | PHENYTOIN SUS 125/5ML | PHENYTOIN SUSP 125 MG/5ML | Tier 1 | | | | |
| Anticonvulsants | PHENYTOIN EX CAP 100MG | PHENYTOIN SODIUM EXTENDED CAP 100 MG | Tier 1 | | | | |
| Anticonvulsants | PHENYTOIN EX CAP 200MG | PHENYTOIN SODIUM EXTENDED CAP 200 MG | Tier 1 | | | | |
| Anticonvulsants | PHENYTOIN EX CAP 300MG | PHENYTOIN SODIUM EXTENDED CAP 300 MG | Tier 1 | | | | |
| Anticonvulsants | PRIMIDONE TAB 125MG | PRIMIDONE TAB 125 MG | Tier 1 | X | | | |
| Anticonvulsants | PRIMIDONE TAB 250MG | PRIMIDONE TAB 250 MG | Tier 1 | | | | |
| Anticonvulsants | PRIMIDONE TAB 50MG | PRIMIDONE TAB 50 MG | Tier 1 | | | | |
| Anticonvulsants | QUDEXY XR CAP 100/24HR | TOPIRAMATE CAP ER 24HR SPRINKLE 100 MG | Tier 3 | | | X | |
| Anticonvulsants | QUDEXY XR CAP 150/24HR | TOPIRAMATE CAP ER 24HR SPRINKLE 150 MG | Tier 3 | | | X | |
| Anticonvulsants | QUDEXY XR CAP 200/24HR | TOPIRAMATE CAP ER 24HR SPRINKLE 200 MG | Tier 3 | | | X | |
| Anticonvulsants | QUDEXY XR CAP 25/24HR | TOPIRAMATE CAP ER 24HR SPRINKLE 25 MG | Tier 3 | | | X | |
| Anticonvulsants | QUDEXY XR CAP 50/24HR | TOPIRAMATE CAP ER 24HR SPRINKLE 50 MG | Tier 3 | | | X | |
| Anticonvulsants | ROWEEPRA TAB 500MG | LEVETIRACETAM TAB 500 MG | Tier 1 | | | | |
| Anticonvulsants | RUFINAMIDE SUS 40MG/ML | RUFINAMIDE SUSP 40 MG/ML | Tier 1 | | | | |
| Anticonvulsants | RUFINAMIDE TAB 200MG | RUFINAMIDE TAB 200 MG | Tier 1 | X | | | |
| Anticonvulsants | RUFINAMIDE TAB 400MG | RUFINAMIDE TAB 400 MG | Tier 1 | X | | | |
| Anticonvulsants | SABRIL POW 500MG | VIGABATRIN POWD PACK 500 MG | Tier 3 | X | | X | X |
| Anticonvulsants | SABRIL TAB 500MG | VIGABATRIN TAB 500 MG | Tier 3 | X | | | X |
| Anticonvulsants | SPRITAM TAB 1000MG | LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 1000 MG | Tier 3 | | | | |
| Anticonvulsants | SPRITAM TAB 250MG | LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 250 MG | Tier 3 | | | | |
| Anticonvulsants | SPRITAM TAB 500MG | LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 500 MG | Tier 3 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | SPRITAM TAB 750MG | LEVETIRACETAM TAB DISINTEGRATING SOLUBLE 750 MG | Tier 3 | | | | |
| Anticonvulsants | SUBVENITE KIT START 35 | LAMOTRIGINE TAB 35 X 25 MG STARTER KIT | Tier 1 | | | | |
| Anticonvulsants | SUBVENITE KIT START 49 | LAMOTRIGINE TAB 25 MG (42) & 100 MG (7) STARTER KIT | Tier 1 | | | | |
| Anticonvulsants | SUBVENITE KIT START 98 | LAMOTRIGINE TAB 84 X 25 MG & 14 X 100 MG STARTER KIT | Tier 1 | | | | |
| Anticonvulsants | SUBVENITE TAB 100MG | LAMOTRIGINE TAB 100 MG | Tier 1 | | | | |
| Anticonvulsants | SUBVENITE TAB 150MG | LAMOTRIGINE TAB 150 MG | Tier 1 | | | | |
| Anticonvulsants | SUBVENITE TAB 200MG | LAMOTRIGINE TAB 200 MG | Tier 1 | | | | |
| Anticonvulsants | SUBVENITE TAB 25MG | LAMOTRIGINE TAB 25 MG | Tier 1 | | | | |
| Anticonvulsants | SYMPAZAN MIS 10MG | CLOBAZAM ORAL FILM 10 MG | Tier 3 | X | | | |
| Anticonvulsants | SYMPAZAN MIS 20MG | CLOBAZAM ORAL FILM 20 MG | Tier 3 | X | | | |
| Anticonvulsants | SYMPAZAN MIS 5MG | CLOBAZAM ORAL FILM 5 MG | Tier 3 | X | | | |
| Anticonvulsants | TEGRETOL SUS 100/5ML | CARBAMAZEPINE SUSP 100 MG/5ML | Tier 3 | | | | |
| Anticonvulsants | TEGRETOL TAB 200MG | CARBAMAZEPINE TAB 200 MG | Tier 3 | | | | |
| Anticonvulsants | TEGRETOL-XR TAB 100MG | CARBAMAZEPINE TAB ER 12HR 100 MG | Tier 3 | | | | |
| Anticonvulsants | TEGRETOL-XR TAB 200MG | CARBAMAZEPINE TAB ER 12HR 200 MG | Tier 3 | | | | |
| Anticonvulsants | TEGRETOL-XR TAB 400MG | CARBAMAZEPINE TAB ER 12HR 400 MG | Tier 3 | | | | |
| Anticonvulsants | TIAGABINE TAB 12MG | TIAGABINE HCL TAB 12 MG | Tier 1 | | | | |
| Anticonvulsants | TIAGABINE TAB 16MG | TIAGABINE HCL TAB 16 MG | Tier 1 | | | | |
| Anticonvulsants | TIAGABINE TAB 2MG | TIAGABINE HCL TAB 2 MG | Tier 1 | | | | |
| Anticonvulsants | TIAGABINE TAB 4MG | TIAGABINE HCL TAB 4 MG | Tier 1 | | | | |
| Anticonvulsants | TOPAMAX TAB 100MG | TOPIRAMATE TAB 100 MG | Tier 3 | | | | |
| Anticonvulsants | TOPAMAX TAB 200MG | TOPIRAMATE TAB 200 MG | Tier 3 | | | | |
| Anticonvulsants | TOPAMAX TAB 25MG | TOPIRAMATE TAB 25 MG | Tier 3 | | | | |
| Anticonvulsants | TOPAMAX TAB 50MG | TOPIRAMATE TAB 50 MG | Tier 3 | | | | |
| Anticonvulsants | TOPAMAX SPR CAP 15MG | TOPIRAMATE SPRINKLE CAP 15 MG | Tier 3 | | | | |
| Anticonvulsants | TOPAMAX SPR CAP 25MG | TOPIRAMATE SPRINKLE CAP 25 MG | Tier 3 | | | | |
| Anticonvulsants | TOPIRAMATE CAP 15MG | TOPIRAMATE SPRINKLE CAP 15 MG | Tier 1 | | | | |
| Anticonvulsants | TOPIRAMATE CAP 200MG | TOPIRAMATE CAP ER 24HR SPRINKLE 200 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE CAP 200MG ER | TOPIRAMATE CAP ER 24HR 200 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE CAP 25MG | TOPIRAMATE SPRINKLE CAP 25 MG | Tier 1 | | | | |
| Anticonvulsants | TOPIRAMATE CAP ER 100MG | TOPIRAMATE CAP ER 24HR 100 MG | Tier 1 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | TOPIRAMATE CAP ER 100MG | TOPIRAMATE CAP ER 24HR SPRINKLE 100 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE CAP ER 150MG | TOPIRAMATE CAP ER 24HR SPRINKLE 150 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE CAP ER 200MG | TOPIRAMATE CAP ER 24HR SPRINKLE 200 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE CAP ER 25MG | TOPIRAMATE CAP ER 24HR 25 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE CAP ER 25MG | TOPIRAMATE CAP ER 24HR SPRINKLE 25 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE CAP ER 50MG | TOPIRAMATE CAP ER 24HR 50 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE CAP ER 50MG | TOPIRAMATE CAP ER 24HR SPRINKLE 50 MG | Tier 1 | | | X | |
| Anticonvulsants | TOPIRAMATE TAB 100MG | TOPIRAMATE TAB 100 MG | Tier 1 | | | | |
| Anticonvulsants | TOPIRAMATE TAB 200MG | TOPIRAMATE TAB 200 MG | Tier 1 | | | | |
| Anticonvulsants | TOPIRAMATE TAB 25MG | TOPIRAMATE TAB 25 MG | Tier 1 | | | | |
| Anticonvulsants | TOPIRAMATE TAB 50MG | TOPIRAMATE TAB 50 MG | Tier 1 | | | | |
| Anticonvulsants | TRILEPTAL SUS 300MG/5M | OXCARBAZEPINE SUSP 300 MG/5ML (60 MG/ML) | Tier 3 | | | | |
| Anticonvulsants | TRILEPTAL TAB 150MG | OXCARBAZEPINE TAB 150 MG | Tier 3 | | | | |
| Anticonvulsants | TRILEPTAL TAB 300MG | OXCARBAZEPINE TAB 300 MG | Tier 3 | | | | |
| Anticonvulsants | TRILEPTAL TAB 600MG | OXCARBAZEPINE TAB 600 MG | Tier 3 | | | | |
| Anticonvulsants | TROKENDI XR CAP 100MG | TOPIRAMATE CAP ER 24HR 100 MG | Tier 3 | | | X | |
| Anticonvulsants | TROKENDI XR CAP 200MG | TOPIRAMATE CAP ER 24HR 200 MG | Tier 3 | | | X | |
| Anticonvulsants | TROKENDI XR CAP 25MG | TOPIRAMATE CAP ER 24HR 25 MG | Tier 3 | | | X | |
| Anticonvulsants | TROKENDI XR CAP 50MG | TOPIRAMATE CAP ER 24HR 50 MG | Tier 3 | | | X | |
| Anticonvulsants | VALPROIC ACD CAP 250MG | VALPROIC ACID CAP 250 MG | Tier 1 | | | | |
| Anticonvulsants | VALPROIC ACD SOL 250/5ML | VALPROATE SODIUM ORAL SOLN 250 MG/5ML (BASE EQUIV) | Tier 1 | | | | |
| Anticonvulsants | VALTOCO SPR 10MG | DIAZEPAM NASAL SPRAY 10 MG/0.1 ML | Tier 3 | X | | | |
| Anticonvulsants | VALTOCO SPR 15MG | DIAZEPAM NASAL SPRAY THER PACK 2 X 7.5 MG/0.1ML (15 MG DOSE) | Tier 3 | X | | | |
| Anticonvulsants | VALTOCO SPR 20MG | DIAZEPAM NASAL SPRAY THER PACK 2 X 10 MG/0.1ML (20 MG DOSE) | Tier 3 | X | | | |
| Anticonvulsants | VALTOCO SPR 5MG | DIAZEPAM NASAL SPRAY 5 MG/0.1 ML | Tier 3 | X | | | |
| Anticonvulsants | VIGABATRIN PAK 500MG | VIGABATRIN POWD PACK 500 MG | Tier 1 | X | | | X |
| Anticonvulsants | VIGABATRIN TAB 500MG | VIGABATRIN TAB 500 MG | Tier 1 | X | | | X |
| Anticonvulsants | VIGADRONE POW 500MG | VIGABATRIN POWD PACK 500 MG | Tier 1 | X | | | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-----------------------|--|------------|------|--------------|--------------|-----------|
| Anticonvulsants | VIGADRONE TAB 500MG | VIGABATRIN TAB 500 MG | Tier 1 | X | | | X |
| Anticonvulsants | VIGPODER POW 500MG | VIGABATRIN POWD PACK 500 MG | Tier 1 | X | | | X |
| Anticonvulsants | VIMPAT SOL 10MG/ML | LACOSAMIDE ORAL SOLUTION 10 MG/ML | Tier 3 | X | | | |
| Anticonvulsants | VIMPAT TAB 100MG | LACOSAMIDE TAB 100 MG | Tier 3 | X | | | |
| Anticonvulsants | VIMPAT TAB 150MG | LACOSAMIDE TAB 150 MG | Tier 3 | X | | | |
| Anticonvulsants | VIMPAT TAB 200MG | LACOSAMIDE TAB 200 MG | Tier 3 | X | | | |
| Anticonvulsants | VIMPAT TAB 50MG | LACOSAMIDE TAB 50 MG | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI PAK 100-150 | CENOBAMATE TAB PACK 100 MG & 150 MG TABS (250 MG DAILY DOSE) | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI PAK 12.5-25 | CENOBAMATE TAB TITRATION PACK 14 X 12.5 MG & 14 X 25 MG | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI PAK 150-200 | CENOBAMATE TAB PACK 150 MG & 200 MG TABS (350 MG DAILY DOSE) | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI PAK 150-200 | CENOBAMATE TAB TITRATION PACK 14 X 150 MG & 14 X 200 MG | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI PAK 50-100MG | CENOBAMATE TAB TITRATION PACK 14 X 50 MG & 14 X 100 MG | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI TAB 100MG | CENOBAMATE TAB 100 MG | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI TAB 150MG | CENOBAMATE TAB 150 MG | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI TAB 200MG | CENOBAMATE TAB 200 MG | Tier 3 | X | | | |
| Anticonvulsants | XCOPRI TAB 50MG | CENOBAMATE TAB 50 MG | Tier 3 | X | | | |
| Anticonvulsants | ZARONTIN CAP 250MG | ETHOSUXIMIDE CAP 250 MG | Tier 3 | | | | |
| Anticonvulsants | ZARONTIN SOL 250/5ML | ETHOSUXIMIDE SOLN 250 MG/5ML | Tier 3 | | | | |
| Anticonvulsants | ZONEGRAN CAP 100MG | ZONISAMIDE CAP 100 MG | Tier 3 | | | | |
| Anticonvulsants | ZONEGRAN CAP 25MG | ZONISAMIDE CAP 25 MG | Tier 3 | | | | |
| Anticonvulsants | ZONISADE SUS 100MG/5 | ZONISAMIDE ORAL SUSP 100 MG/5ML (20 MG/ML) | Tier 3 | | | | |
| Anticonvulsants | ZONISAMIDE CAP 100MG | ZONISAMIDE CAP 100 MG | Tier 1 | | | | |
| Anticonvulsants | ZONISAMIDE CAP 25MG | ZONISAMIDE CAP 25 MG | Tier 1 | | | | |
| Anticonvulsants | ZONISAMIDE CAP 50MG | ZONISAMIDE CAP 50 MG | Tier 1 | | | | |
| Anticonvulsants - Drugs to Treat Seizures | DIACOMIT CAP 250MG | STIRIPENTOL CAP 250 MG | Tier 3 | X | | | X |
| Anticonvulsants - Drugs to Treat Seizures | DIACOMIT CAP 500MG | STIRIPENTOL CAP 500 MG | Tier 3 | X | | | X |
| Anticonvulsants - Drugs to Treat Seizures | DIACOMIT PAK 250MG | STIRIPENTOL PACKET 250 MG | Tier 3 | X | | | X |
| Anticonvulsants - Drugs to Treat Seizures | DIACOMIT PAK 500MG | STIRIPENTOL PACKET 500 MG | Tier 3 | X | | | X |
| Antidementia Agents | ADLARITY DIS 10MG/DAY | DONEPEZIL HYDROCHLORIDE TD PATCH WEEKLY 10 MG/DAY | Tier 3 | | | | |
| Antidementia Agents | ADLARITY DIS 5MG/DAY | DONEPEZIL HYDROCHLORIDE TD PATCH WEEKLY 5 MG/DAY | Tier 3 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antidementia Agents | ARICEPT TAB 10MG | DONEPEZIL HYDROCHLORIDE TAB 10 MG | Tier 3 | | | X | |
| Antidementia Agents | ARICEPT TAB 23MG | DONEPEZIL HYDROCHLORIDE TAB 23 MG | Tier 3 | | | X | |
| Antidementia Agents | ARICEPT TAB 5MG | DONEPEZIL HYDROCHLORIDE TAB 5 MG | Tier 3 | | | X | |
| Antidementia Agents | DONEPEZIL TAB 10MG | DONEPEZIL HYDROCHLORIDE TAB 10 MG | Tier 1 | | | | |
| Antidementia Agents | DONEPEZIL TAB 10MG ODT | DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG | Tier 1 | | | | |
| Antidementia Agents | DONEPEZIL TAB 23MG | DONEPEZIL HYDROCHLORIDE TAB 23 MG | Tier 1 | | | | |
| Antidementia Agents | DONEPEZIL TAB 5MG | DONEPEZIL HYDROCHLORIDE TAB 5 MG | Tier 1 | | | | |
| Antidementia Agents | DONEPEZIL TAB 5MG ODT | DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG | Tier 1 | | | | |
| Antidementia Agents | DONEPEZIL TAB ODT 10MG | DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 10 MG | Tier 1 | | | | |
| Antidementia Agents | DONEPEZIL TAB ODT 5MG | DONEPEZIL HYDROCHLORIDE ORALLY DISINTEGRATING TAB 5 MG | Tier 1 | | | | |
| Antidementia Agents | ERGOLOID MES TAB 1MG ORAL | ERGOLOID MESYLATES TAB 1 MG | Tier 1 | | | | |
| Antidementia Agents | EXELON DIS 13.3/24 | RIVASTIGMINE TD PATCH 24HR 13.3 MG/24HR | Tier 3 | | | X | |
| Antidementia Agents | EXELON DIS 4.6MG/24 | RIVASTIGMINE TD PATCH 24HR 4.6 MG/24HR | Tier 3 | | | X | |
| Antidementia Agents | EXELON DIS 9.5MG/24 | RIVASTIGMINE TD PATCH 24HR 9.5 MG/24HR | Tier 3 | | | X | |
| Antidementia Agents | GALANTAMINE CAP 16MG ER | GALANTAMINE HYDROBROMIDE CAP ER 24HR 16 MG | Tier 1 | | | | |
| Antidementia Agents | GALANTAMINE CAP 24MG ER | GALANTAMINE HYDROBROMIDE CAP ER 24HR 24 MG | Tier 1 | | | | |
| Antidementia Agents | GALANTAMINE CAP 8MG ER | GALANTAMINE HYDROBROMIDE CAP ER 24HR 8 MG | Tier 1 | | | | |
| Antidementia Agents | GALANTAMINE SOL 4MG/ML | GALANTAMINE HYDROBROMIDE ORAL SOLN 4 MG/ML | Tier 1 | | | | |
| Antidementia Agents | GALANTAMINE TAB 12MG | GALANTAMINE HYDROBROMIDE TAB 12 MG | Tier 1 | | | | |
| Antidementia Agents | GALANTAMINE TAB 4MG | GALANTAMINE HYDROBROMIDE TAB 4 MG | Tier 1 | | | | |
| Antidementia Agents | GALANTAMINE TAB 8MG | GALANTAMINE HYDROBROMIDE TAB 8 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANT TITRA PAK 5-10MG | MEMANTINE HCL TAB 28 X 5 MG & 21 X 10 MG TITRATION PACK | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Antidementia Agents | MEMANTINE SOL 2MG/ML | MEMANTINE HCL ORAL SOLUTION 2 MG/ML | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE TAB 10MG | MEMANTINE HCL TAB 10 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE TAB 5MG | MEMANTINE HCL TAB 5 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE TAB HCL 10MG | MEMANTINE HCL TAB 10 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE TAB HCL 5MG | MEMANTINE HCL TAB 5 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE HC CAP 14MG ER | MEMANTINE HCL CAP ER 24HR 14 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE HC CAP 21MG ER | MEMANTINE HCL CAP ER 24HR 21 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE HC CAP 28MG ER | MEMANTINE HCL CAP ER 24HR 28 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE HC CAP 7MG ER | MEMANTINE HCL CAP ER 24HR 7 MG | Tier 1 | | | | |
| Antidementia Agents | MEMANTINE HC SOL 2MG/ML | MEMANTINE HCL ORAL SOLUTION 2 MG/ML | Tier 1 | | | | |
| Antidementia Agents | NAMENDA TAB 10MG | MEMANTINE HCL TAB 10 MG | Tier 3 | | | X | |
| Antidementia Agents | NAMENDA TAB 5-10MG | MEMANTINE HCL TAB 28 X 5 MG & 21 X 10 MG TITRATION PACK | Tier 3 | | | X | |
| Antidementia Agents | NAMENDA TAB 5MG | MEMANTINE HCL TAB 5 MG | Tier 3 | | | X | |
| Antidementia Agents | NAMENDA XR CAP 14MG | MEMANTINE HCL CAP ER 24HR 14 MG | Tier 3 | | | X | |
| Antidementia Agents | NAMENDA XR CAP 21MG | MEMANTINE HCL CAP ER 24HR 21 MG | Tier 3 | | | X | |
| Antidementia Agents | NAMENDA XR CAP 28MG | MEMANTINE HCL CAP ER 24HR 28 MG | Tier 3 | | | X | |
| Antidementia Agents | NAMENDA XR CAP 7MG | MEMANTINE HCL CAP ER 24HR 7 MG | Tier 3 | | | X | |
| Antidementia Agents | NAMZARIC CAP | MEMANTINE-DONEPEZIL CAP ER 24HR 7 & 14 & 21 & 28-10 MG PACK | Tier 3 | | | | |
| Antidementia Agents | NAMZARIC CAP 14-10MG | MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 14-10 MG | Tier 3 | | | | |
| Antidementia Agents | NAMZARIC CAP 21-10MG | MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 21-10 MG | Tier 3 | | | | |
| Antidementia Agents | NAMZARIC CAP 28-10MG | MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 28-10 MG | Tier 3 | | | | |
| Antidementia Agents | NAMZARIC CAP 7-10MG | MEMANTINE HCL-DONEPEZIL HCL CAP ER 24HR 7-10 MG | Tier 3 | | | | |
| Antidementia Agents | RAZADYNE ER CAP 16MG | GALANTAMINE HYDROBROMIDE CAP ER 24HR 16 MG | Tier 3 | | | | |
| Antidementia Agents | RAZADYNE ER CAP 24MG | GALANTAMINE HYDROBROMIDE CAP ER 24HR 24 MG | Tier 3 | | | | |
| Antidementia Agents | RAZADYNE ER CAP 8MG | GALANTAMINE HYDROBROMIDE CAP ER 24HR 8 MG | Tier 3 | | | | |
| Antidementia Agents | RIVASTIGMINE CAP 1.5MG | RIVASTIGMINE TARTRATE CAP 1.5 MG (BASE EQUIVALENT) | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antidementia Agents | RIVASTIGMINE CAP 3MG | RIVASTIGMINE TARTRATE CAP 3 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidementia Agents | RIVASTIGMINE CAP 4.5MG | RIVASTIGMINE TARTRATE CAP 4.5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidementia Agents | RIVASTIGMINE CAP 6MG | RIVASTIGMINE TARTRATE CAP 6 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidementia Agents | RIVASTIGMINE DIS 13.3/24 | RIVASTIGMINE TD PATCH 24HR 13.3 MG/24HR | Tier 1 | | | | |
| Antidementia Agents | RIVASTIGMINE DIS 4.6MG/24 | RIVASTIGMINE TD PATCH 24HR 4.6 MG/24HR | Tier 1 | | | | |
| Antidementia Agents | RIVASTIGMINE DIS 9.5MG/24 | RIVASTIGMINE TD PATCH 24HR 9.5 MG/24HR | Tier 1 | | | | |
| Antidepressants | AMITRIPTYLIN TAB 100MG | AMITRIPTYLINE HCL TAB 100 MG | Tier 1 | | | | |
| Antidepressants | AMITRIPTYLIN TAB 10MG | AMITRIPTYLINE HCL TAB 10 MG | Tier 1 | | | | |
| Antidepressants | AMITRIPTYLIN TAB 150MG | AMITRIPTYLINE HCL TAB 150 MG | Tier 1 | | | | |
| Antidepressants | AMITRIPTYLIN TAB 25MG | AMITRIPTYLINE HCL TAB 25 MG | Tier 1 | | | | |
| Antidepressants | AMITRIPTYLIN TAB 50MG | AMITRIPTYLINE HCL TAB 50 MG | Tier 1 | | | | |
| Antidepressants | AMITRIPTYLIN TAB 75MG | AMITRIPTYLINE HCL TAB 75 MG | Tier 1 | | | | |
| Antidepressants | AMOXAPINE TAB 100MG | AMOXAPINE TAB 100 MG | Tier 1 | | | | |
| Antidepressants | AMOXAPINE TAB 150MG | AMOXAPINE TAB 150 MG | Tier 1 | | | | |
| Antidepressants | AMOXAPINE TAB 25MG | AMOXAPINE TAB 25 MG | Tier 1 | | | | |
| Antidepressants | AMOXAPINE TAB 50MG | AMOXAPINE TAB 50 MG | Tier 1 | | | | |
| Antidepressants | ANAFRANIL CAP 25MG | CLOMIPRAMINE HCL CAP 25 MG | Tier 3 | | | X | |
| Antidepressants | ANAFRANIL CAP 50MG | CLOMIPRAMINE HCL CAP 50 MG | Tier 3 | | | X | |
| Antidepressants | ANAFRANIL CAP 75MG | CLOMIPRAMINE HCL CAP 75 MG | Tier 3 | | | X | |
| Antidepressants | APLENZIN TAB 174MG | BUPROPION HBR TAB ER 24HR 174 MG | Tier 3 | | X | X | |
| Antidepressants | APLENZIN TAB 348MG | BUPROPION HBR TAB ER 24HR 348 MG | Tier 3 | | X | X | |
| Antidepressants | APLENZIN TAB 522MG | BUPROPION HBR TAB ER 24HR 522 MG | Tier 3 | | X | X | |
| Antidepressants | BRISDELLE CAP 75MG | PAROXETINE MESYLATE CAP 7.5 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | BUPROPION TAB 100MG | BUPROPION HCL TAB 100 MG | Tier 1 | | | | |
| Antidepressants | BUPROPION TAB 100MG SR | BUPROPION HCL TAB ER 12HR 100 MG | Tier 1 | | | | |
| Antidepressants | BUPROPION TAB 150MG SR | BUPROPION HCL TAB ER 12HR 150 MG | Tier 1 | | | | |
| Antidepressants | BUPROPION TAB 200MG SR | BUPROPION HCL TAB ER 12HR 200 MG | Tier 1 | | | | |
| Antidepressants | BUPROPION TAB 75MG | BUPROPION HCL TAB 75 MG | Tier 1 | | | | |
| Antidepressants | BUPROPN HCL TAB 150MG XL | BUPROPION HCL TAB ER 24HR 150 MG | Tier 1 | | | | |
| Antidepressants | BUPROPN HCL TAB 300MG XL | BUPROPION HCL TAB ER 24HR 300 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antidepressants | BUPROPN HCL TAB 450MG XL | BUPROPION HCL TAB ER 24HR 450 MG | Tier 3 | | X | | |
| Antidepressants | CDP/AMITRIP TAB 10-25MG | CHLORDIAZEPOXIDE-AMITRIPTYLINE TAB 10-25 MG | Tier 1 | | | | |
| Antidepressants | CDP/AMITRIP TAB 5-12.5MG | CHLORDIAZEPOXIDE-AMITRIPTYLINE TAB 5-12.5 MG | Tier 1 | | | | |
| Antidepressants | CELEXA TAB 10MG | CITALOPRAM HYDROBROMIDE TAB 10 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antidepressants | CELEXA TAB 20MG | CITALOPRAM HYDROBROMIDE TAB 20 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antidepressants | CELEXA TAB 40MG | CITALOPRAM HYDROBROMIDE TAB 40 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antidepressants | CITALOPRAM CAP 30MG | CITALOPRAM HYDROBROMIDE CAP 30 MG | Tier 3 | | | | |
| Antidepressants | CITALOPRAM SOL 10MG/5ML | CITALOPRAM HYDROBROMIDE ORAL SOLN 10 MG/5ML | Tier 1 | | | | |
| Antidepressants | CITALOPRAM TAB 10MG | CITALOPRAM HYDROBROMIDE TAB 10 MG (BASE EQUIV) | Tier 1 | | | | |
| Antidepressants | CITALOPRAM TAB 20MG | CITALOPRAM HYDROBROMIDE TAB 20 MG (BASE EQUIV) | Tier 1 | | | | |
| Antidepressants | CITALOPRAM TAB 40MG | CITALOPRAM HYDROBROMIDE TAB 40 MG (BASE EQUIV) | Tier 1 | | | | |
| Antidepressants | CLOMIPRAMINE CAP 25MG | CLOMIPRAMINE HCL CAP 25 MG | Tier 1 | | | | |
| Antidepressants | CLOMIPRAMINE CAP 50MG | CLOMIPRAMINE HCL CAP 50 MG | Tier 1 | | | | |
| Antidepressants | CLOMIPRAMINE CAP 75MG | CLOMIPRAMINE HCL CAP 75 MG | Tier 1 | | | | |
| Antidepressants | DESIPRAMINE TAB 100MG | DESIPRAMINE HCL TAB 100 MG | Tier 1 | | | | |
| Antidepressants | DESIPRAMINE TAB 10MG | DESIPRAMINE HCL TAB 10 MG | Tier 1 | | | | |
| Antidepressants | DESIPRAMINE TAB 150MG | DESIPRAMINE HCL TAB 150 MG | Tier 1 | | | | |
| Antidepressants | DESIPRAMINE TAB 25MG | DESIPRAMINE HCL TAB 25 MG | Tier 1 | | | | |
| Antidepressants | DESIPRAMINE TAB 50MG | DESIPRAMINE HCL TAB 50 MG | Tier 1 | | | | |
| Antidepressants | DESIPRAMINE TAB 75MG | DESIPRAMINE HCL TAB 75 MG | Tier 1 | | | | |
| Antidepressants | DESVENLAFAX TAB 100MG ER | DESVENLAFAXINE SUCCINATE TAB ER 24HR 100 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antidepressants | DESVENLAFAX TAB 100MG ER | DESVENLAFAXINE TAB ER 24HR 100 MG | Tier 3 | | | | |
| Antidepressants | DESVENLAFAX TAB 25MG ER | DESVENLAFAXINE SUCCINATE TAB ER 24HR 25 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antidepressants | DESVENLAFAX TAB 50MG ER | DESVENLAFAXINE SUCCINATE TAB ER 24HR 50 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antidepressants | DESVENLAFAX TAB 50MG ER | DESVENLAFAXINE TAB ER 24HR 50 MG | Tier 3 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antidepressants | DOXEPIN HCL CAP 100MG | DOXEPIN HCL CAP 100 MG | Tier 1 | | | | |
| Antidepressants | DOXEPIN HCL CAP 10MG | DOXEPIN HCL CAP 10 MG | Tier 1 | | | | |
| Antidepressants | DOXEPIN HCL CAP 150MG | DOXEPIN HCL CAP 150 MG | Tier 1 | | | | |
| Antidepressants | DOXEPIN HCL CAP 25MG | DOXEPIN HCL CAP 25 MG | Tier 1 | | | | |
| Antidepressants | DOXEPIN HCL CAP 50MG | DOXEPIN HCL CAP 50 MG | Tier 1 | | | | |
| Antidepressants | DOXEPIN HCL CAP 75MG | DOXEPIN HCL CAP 75 MG | Tier 1 | | | | |
| Antidepressants | DOXEPIN HCL CON 10MG/ML | DOXEPIN HCL CONC 10 MG/ML | Tier 1 | | | | |
| Antidepressants | EFFEXOR XR CAP 150MG | VENLAFAXINE HCL CAP ER 24HR 150 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antidepressants | EFFEXOR XR CAP 37.5MG | VENLAFAXINE HCL CAP ER 24HR 37.5 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antidepressants | EFFEXOR XR CAP 75MG | VENLAFAXINE HCL CAP ER 24HR 75 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antidepressants | EMSAM DIS 12MG/24H | SELEGILINE TD PATCH 24HR 12 MG/24HR | Tier 3 | | | | |
| Antidepressants | EMSAM DIS 6MG/24HR | SELEGILINE TD PATCH 24HR 6 MG/24HR | Tier 3 | | | | |
| Antidepressants | EMSAM DIS 9MG/24HR | SELEGILINE TD PATCH 24HR 9 MG/24HR | Tier 3 | | | | |
| Antidepressants | ESCITALOPRAM SOL 5MG/5ML | ESCITALOPRAM OXALATE SOLN 5 MG/5ML (BASE EQUIV) | Tier 1 | | | | |
| Antidepressants | ESCITALOPRAM TAB 10MG | ESCITALOPRAM OXALATE TAB 10 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antidepressants | ESCITALOPRAM TAB 20MG | ESCITALOPRAM OXALATE TAB 20 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antidepressants | ESCITALOPRAM TAB 5MG | ESCITALOPRAM OXALATE TAB 5 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antidepressants | FETZIMA CAP 120MG | LEVOMILNACIPRAN HCL CAP ER 24HR 120 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antidepressants | FETZIMA CAP 20MG | LEVOMILNACIPRAN HCL CAP ER 24HR 20 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antidepressants | FETZIMA CAP 40MG | LEVOMILNACIPRAN HCL CAP ER 24HR 40 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antidepressants | FETZIMA CAP 80MG | LEVOMILNACIPRAN HCL CAP ER 24HR 80 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antidepressants | FETZIMA CAP TITRATIO | LEVOMILNACIPRAN HCL CAP ER 24HR 20 & 40 MG THERAPY PACK | Tier 3 | | X | X | |
| Antidepressants | FLUOXETINE CAP 10MG | FLUOXETINE HCL CAP 10 MG | Tier 1 | | | | |
| Antidepressants | FLUOXETINE CAP 20MG | FLUOXETINE HCL CAP 20 MG | Tier 1 | | | | |
| Antidepressants | FLUOXETINE CAP 40MG | FLUOXETINE HCL CAP 40 MG | Tier 1 | | | | |
| Antidepressants | FLUOXETINE CAP 90MG DR | FLUOXETINE HCL CAP DELAYED RELEASE 90 MG | Tier 1 | | X | | |
| Antidepressants | FLUOXETINE SOL 20MG/5ML | FLUOXETINE HCL SOLUTION 20 MG/5ML | Tier 1 | | | | |
| Antidepressants | FLUOXETINE TAB 10MG | FLUOXETINE HCL TAB 10 MG | Tier 1 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Antidepressants | FLUOXETINE TAB 10MG | FLUOXETINE HCL (PMDD) TAB 10 MG | Tier 1 | | | | |
| Antidepressants | FLUOXETINE TAB 20MG | FLUOXETINE HCL TAB 20 MG | Tier 1 | | | | |
| Antidepressants | FLUOXETINE TAB 20MG | FLUOXETINE HCL (PMDD) TAB 20 MG | Tier 1 | | | | |
| Antidepressants | FLUOXETINE TAB 60MG | FLUOXETINE HCL TAB 60 MG | Tier 1 | | | | |
| Antidepressants | FLUVOXAMINE CAP 100MG ER | FLUVOXAMINE MALEATE CAP ER 24HR 100 MG | Tier 1 | | X | | |
| Antidepressants | FLUVOXAMINE CAP 150MG ER | FLUVOXAMINE MALEATE CAP ER 24HR 150 MG | Tier 1 | | X | | |
| Antidepressants | FLUVOXAMINE TAB 100MG | FLUVOXAMINE MALEATE TAB 100 MG | Tier 1 | | | | |
| Antidepressants | FLUVOXAMINE TAB 25MG | FLUVOXAMINE MALEATE TAB 25 MG | Tier 1 | | | | |
| Antidepressants | FLUVOXAMINE TAB 50MG | FLUVOXAMINE MALEATE TAB 50 MG | Tier 1 | | | | |
| Antidepressants | FORFIVO XL TAB 450MG | BUPROPION HCL TAB ER 24HR 450 MG | Tier 3 | | X | | |
| Antidepressants | IMIPRAM HCL TAB 10MG | IMIPRAMINE HCL TAB 10 MG | Tier 1 | | | | |
| Antidepressants | IMIPRAM HCL TAB 25MG | IMIPRAMINE HCL TAB 25 MG | Tier 1 | | | | |
| Antidepressants | IMIPRAM HCL TAB 50MG | IMIPRAMINE HCL TAB 50 MG | Tier 1 | | | | |
| Antidepressants | IMIPRAM PAM CAP 100MG | IMIPRAMINE PAMOATE CAP 100 MG | Tier 1 | | | | |
| Antidepressants | IMIPRAM PAM CAP 125MG | IMIPRAMINE PAMOATE CAP 125 MG | Tier 1 | | | | |
| Antidepressants | IMIPRAM PAM CAP 150MG | IMIPRAMINE PAMOATE CAP 150 MG | Tier 1 | | | | |
| Antidepressants | IMIPRAM PAM CAP 75MG | IMIPRAMINE PAMOATE CAP 75 MG | Tier 1 | | | | |
| Antidepressants | IMIPRAMINE POW HCL | IMIPRAMINE HCL POWDER | Tier 3 | X | | | |
| Antidepressants | LEXAPRO TAB 10MG | ESCITALOPRAM OXALATE TAB 10 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | LEXAPRO TAB 20MG | ESCITALOPRAM OXALATE TAB 20 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | LEXAPRO TAB 5MG | ESCITALOPRAM OXALATE TAB 5 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | MARPLAN TAB 10MG | ISOCARBOXAZID TAB 10 MG | Tier 3 | | | | |
| Antidepressants | MIRTAZAPINE TAB 15MG | MIRTAZAPINE TAB 15 MG | Tier 1 | | | | |
| Antidepressants | MIRTAZAPINE TAB 15MG ODT | MIRTAZAPINE ORALLY DISINTEGRATING TAB 15 MG | Tier 1 | | | | |
| Antidepressants | MIRTAZAPINE TAB 30MG | MIRTAZAPINE TAB 30 MG | Tier 1 | | | | |
| Antidepressants | MIRTAZAPINE TAB 30MG ODT | MIRTAZAPINE ORALLY DISINTEGRATING TAB 30 MG | Tier 1 | | | | |
| Antidepressants | MIRTAZAPINE TAB 45MG | MIRTAZAPINE TAB 45 MG | Tier 1 | | | | |
| Antidepressants | MIRTAZAPINE TAB 45MG ODT | MIRTAZAPINE ORALLY DISINTEGRATING TAB 45 MG | Tier 1 | | | | |
| Antidepressants | MIRTAZAPINE TAB 7.5MG | MIRTAZAPINE TAB 7.5 MG | Tier 1 | | | | |
| Antidepressants | NARDIL TAB 15MG | PHENELZINE SULFATE TAB 15 MG | Tier 3 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antidepressants | NEFAZODONE TAB 100MG | NEFAZODONE HCL TAB 100 MG | Tier 1 | | | | |
| Antidepressants | NEFAZODONE TAB 150MG | NEFAZODONE HCL TAB 150 MG | Tier 1 | | | | |
| Antidepressants | NEFAZODONE TAB 200MG | NEFAZODONE HCL TAB 200 MG | Tier 1 | | | | |
| Antidepressants | NEFAZODONE TAB 250MG | NEFAZODONE HCL TAB 250 MG | Tier 1 | | | | |
| Antidepressants | NEFAZODONE TAB 50MG | NEFAZODONE HCL TAB 50 MG | Tier 1 | | | | |
| Antidepressants | NORPRAMIN TAB 10MG | DESIPRAMINE HCL TAB 10 MG | Tier 3 | | | | |
| Antidepressants | NORPRAMIN TAB 25MG | DESIPRAMINE HCL TAB 25 MG | Tier 3 | | | | |
| Antidepressants | NORTRIPTYLIN CAP 10MG | NORTRIPTYLINE HCL CAP 10 MG | Tier 1 | | | | |
| Antidepressants | NORTRIPTYLIN CAP 25MG | NORTRIPTYLINE HCL CAP 25 MG | Tier 1 | | | | |
| Antidepressants | NORTRIPTYLIN CAP 50MG | NORTRIPTYLINE HCL CAP 50 MG | Tier 1 | | | | |
| Antidepressants | NORTRIPTYLIN CAP 75MG | NORTRIPTYLINE HCL CAP 75 MG | Tier 1 | | | | |
| Antidepressants | NORTRIPTYLIN SOL 10MG/5ML | NORTRIPTYLINE HCL SOLN 10 MG/5ML | Tier 1 | | | | |
| Antidepressants | OLANZA/FLUOX CAP 12-25MG | OLANZAPINE-FLUOXETINE HCL CAP 12-25 MG | Tier 1 | | X | | |
| Antidepressants | OLANZA/FLUOX CAP 12-50MG | OLANZAPINE-FLUOXETINE HCL CAP 12-50 MG | Tier 1 | | X | | |
| Antidepressants | OLANZA/FLUOX CAP 3-25MG | OLANZAPINE-FLUOXETINE HCL CAP 3-25 MG | Tier 1 | | X | | |
| Antidepressants | OLANZA/FLUOX CAP 6-25MG | OLANZAPINE-FLUOXETINE HCL CAP 6-25 MG | Tier 1 | | X | | |
| Antidepressants | OLANZA/FLUOX CAP 6-50MG | OLANZAPINE-FLUOXETINE HCL CAP 6-50 MG | Tier 1 | | X | | |
| Antidepressants | PAMELOR CAP 10MG | NORTRIPTYLINE HCL CAP 10 MG | Tier 3 | | | X | |
| Antidepressants | PAMELOR CAP 25MG | NORTRIPTYLINE HCL CAP 25 MG | Tier 3 | | | X | |
| Antidepressants | PAMELOR CAP 50MG | NORTRIPTYLINE HCL CAP 50 MG | Tier 3 | | | X | |
| Antidepressants | PAMELOR CAP 75MG | NORTRIPTYLINE HCL CAP 75 MG | Tier 3 | | | X | |
| Antidepressants | PARNATE TAB 10MG | TRANLYCYPROMINE SULFATE TAB 10 MG | Tier 3 | | | | |
| Antidepressants | PAROXETIN ER TAB 12.5MG | PAROXETINE HCL TAB ER 24HR 12.5 MG | Tier 1 | | X | | |
| Antidepressants | PAROXETIN ER TAB 37.5MG | PAROXETINE HCL TAB ER 24HR 37.5 MG | Tier 1 | | X | | |
| Antidepressants | PAROXETINE CAP 75MG | PAROXETINE MESYLATE CAP 75 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antidepressants | PAROXETINE SUS 10MG/5ML | PAROXETINE HCL ORAL SUSP 10 MG/5ML (BASE EQUIV) | Tier 1 | | | | |
| Antidepressants | PAROXETINE TAB 10MG | PAROXETINE HCL TAB 10 MG | Tier 1 | | | | |
| Antidepressants | PAROXETINE TAB 20MG | PAROXETINE HCL TAB 20 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Antidepressants | PAROXETINE TAB 25MG ER | PAROXETINE HCL TAB ER 24HR 25 MG | Tier 1 | | X | | |
| Antidepressants | PAROXETINE TAB 30MG | PAROXETINE HCL TAB 30 MG | Tier 1 | | | | |
| Antidepressants | PAROXETINE TAB 40MG | PAROXETINE HCL TAB 40 MG | Tier 1 | | | | |
| Antidepressants | PAXIL SUS 10MG/5ML | PAROXETINE HCL ORAL SUSP 10 MG/5ML (BASE EQUIV) | Tier 3 | | | | |
| Antidepressants | PAXIL TAB 10MG | PAROXETINE HCL TAB 10 MG | Tier 3 | | | X | |
| Antidepressants | PAXIL TAB 20MG | PAROXETINE HCL TAB 20 MG | Tier 3 | | | X | |
| Antidepressants | PAXIL TAB 30MG | PAROXETINE HCL TAB 30 MG | Tier 3 | | | X | |
| Antidepressants | PAXIL TAB 40MG | PAROXETINE HCL TAB 40 MG | Tier 3 | | | X | |
| Antidepressants | PAXIL CR TAB 12.5MG | PAROXETINE HCL TAB ER 24HR 12.5 MG | Tier 3 | | X | X | |
| Antidepressants | PAXIL CR TAB 25MG | PAROXETINE HCL TAB ER 24HR 25 MG | Tier 3 | | X | X | |
| Antidepressants | PAXIL CR TAB 37.5MG | PAROXETINE HCL TAB ER 24HR 37.5 MG | Tier 3 | | X | X | |
| Antidepressants | PERPHEN/AMIT TAB 2-10MG | PERPHENAZINE-AMITRIPTYLINE TAB 2-10 MG | Tier 1 | | | | |
| Antidepressants | PERPHEN/AMIT TAB 2-25MG | PERPHENAZINE-AMITRIPTYLINE TAB 2-25 MG | Tier 1 | | | | |
| Antidepressants | PERPHEN/AMIT TAB 4-10MG | PERPHENAZINE-AMITRIPTYLINE TAB 4-10 MG | Tier 1 | | | | |
| Antidepressants | PERPHEN/AMIT TAB 4-25MG | PERPHENAZINE-AMITRIPTYLINE TAB 4-25 MG | Tier 1 | | | | |
| Antidepressants | PERPHEN/AMIT TAB 4-50MG | PERPHENAZINE-AMITRIPTYLINE TAB 4-50 MG | Tier 1 | | | | |
| Antidepressants | PEXEVA TAB 10MG | PAROXETINE MESYLATE TAB 10 MG (BASE EQUIV) | Tier 3 | | X | | |
| Antidepressants | PEXEVA TAB 20MG | PAROXETINE MESYLATE TAB 20 MG (BASE EQUIV) | Tier 3 | | X | | |
| Antidepressants | PEXEVA TAB 30MG | PAROXETINE MESYLATE TAB 30 MG (BASE EQUIV) | Tier 3 | | X | | |
| Antidepressants | PEXEVA TAB 40MG | PAROXETINE MESYLATE TAB 40 MG (BASE EQUIV) | Tier 3 | | X | | |
| Antidepressants | PHENELZINE TAB 15MG | PHENELZINE SULFATE TAB 15 MG | Tier 1 | | | | |
| Antidepressants | PRISTIQ TAB 100MG | DESVENLAFAXINE SUCCINATE TAB ER 24HR 100 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | PRISTIQ TAB 25MG | DESVENLAFAXINE SUCCINATE TAB ER 24HR 25 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | PRISTIQ TAB 50MG | DESVENLAFAXINE SUCCINATE TAB ER 24HR 50 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | PROTRIPTYLIN TAB 10MG | PROTRIPTYLINE HCL TAB 10 MG | Tier 1 | | | | |
| Antidepressants | PROTRIPTYLIN TAB 5MG | PROTRIPTYLINE HCL TAB 5 MG | Tier 1 | | | | |
| Antidepressants | PROZAC CAP 10MG | FLUOXETINE HCL CAP 10 MG | Tier 3 | | | X | |
| Antidepressants | PROZAC CAP 20MG | FLUOXETINE HCL CAP 20 MG | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antidepressants | PROZAC CAP 40MG | FLUOXETINE HCL CAP 40 MG | Tier 3 | | | X | |
| Antidepressants | REMERON TAB 15MG | MIRTAZAPINE TAB 15 MG | Tier 3 | | | X | |
| Antidepressants | REMERON TAB 30MG | MIRTAZAPINE TAB 30 MG | Tier 3 | | | X | |
| Antidepressants | REMERON SLTB TAB 15MG | MIRTAZAPINE ORALLY DISINTEGRATING TAB 15 MG | Tier 3 | | | X | |
| Antidepressants | REMERON SLTB TAB 30MG | MIRTAZAPINE ORALLY DISINTEGRATING TAB 30 MG | Tier 3 | | | X | |
| Antidepressants | SERTRALINE CAP 150MG | SERTRALINE HCL CAP 150 MG | Tier 3 | | X | | |
| Antidepressants | SERTRALINE CAP 200MG | SERTRALINE HCL CAP 200 MG | Tier 3 | | X | | |
| Antidepressants | SERTRALINE CON 20MG/ML | SERTRALINE HCL ORAL CONCENTRATE FOR SOLUTION 20 MG/ML | Tier 1 | | | | |
| Antidepressants | SERTRALINE TAB 100MG | SERTRALINE HCL TAB 100 MG | Tier 1 | | | | |
| Antidepressants | SERTRALINE TAB 25MG | SERTRALINE HCL TAB 25 MG | Tier 1 | | | | |
| Antidepressants | SERTRALINE TAB 50MG | SERTRALINE HCL TAB 50 MG | Tier 1 | | | | |
| Antidepressants | SPRAVATO SOL 56MG DOS | ESKETAMINE HCL NASAL SOLN 28 MG/DEVICE X 2 (56 MG DOSE PACK) | Tier 3 | X | X | | X |
| Antidepressants | SPRAVATO SOL 84MG DOS | ESKETAMINE HCL NASAL SOLN 28 MG/DEVICE X 3 (84 MG DOSE PACK) | Tier 3 | X | X | | X |
| Antidepressants | SYMBYAX CAP 3-25MG | OLANZAPINE-FLUOXETINE HCL CAP 3-25 MG | Tier 3 | | X | | |
| Antidepressants | SYMBYAX CAP 6-25MG | OLANZAPINE-FLUOXETINE HCL CAP 6-25 MG | Tier 3 | | X | | |
| Antidepressants | TRANLYCYPROM TAB 10MG | TRANLYCYPROMINE SULFATE TAB 10 MG | Tier 1 | | | | |
| Antidepressants | TRAZODONE TAB 100MG | TRAZODONE HCL TAB 100 MG | Tier 1 | | | | |
| Antidepressants | TRAZODONE TAB 150MG | TRAZODONE HCL TAB 150 MG | Tier 1 | | | | |
| Antidepressants | TRAZODONE TAB 300MG | TRAZODONE HCL TAB 300 MG | Tier 1 | | | | |
| Antidepressants | TRAZODONE TAB 50MG | TRAZODONE HCL TAB 50 MG | Tier 1 | | | | |
| Antidepressants | TRIMIPRAMINE CAP 100MG | TRIMIPRAMINE MALEATE CAP 100 MG | Tier 1 | | | | |
| Antidepressants | TRIMIPRAMINE CAP 25MG | TRIMIPRAMINE MALEATE CAP 25 MG | Tier 1 | | | | |
| Antidepressants | TRIMIPRAMINE CAP 50MG | TRIMIPRAMINE MALEATE CAP 50 MG | Tier 1 | | | | |
| Antidepressants | TRINTELLIX TAB 10MG | VORTIOXETINE HBR TAB 10 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | TRINTELLIX TAB 20MG | VORTIOXETINE HBR TAB 20 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | TRINTELLIX TAB 5MG | VORTIOXETINE HBR TAB 5 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antidepressants | VENLAFAXINE CAP 150MG ER | VENLAFAXINE HCL CAP ER 24HR 150 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidepressants | VENLAFAXINE CAP 37.5 ER | VENLAFAXINE HCL CAP ER 24HR 37.5 MG (BASE EQUIVALENT) | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Antidepressants | VENLAFAXINE CAP 75MG ER | VENLAFAXINE HCL CAP ER 24HR 75 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidepressants | VENLAFAXINE TAB 100MG | VENLAFAXINE HCL TAB 100 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidepressants | VENLAFAXINE TAB 150MG ER | VENLAFAXINE HCL TAB ER 24HR 150 MG (BASE EQUIVALENT) | Tier 1 | | X | | |
| Antidepressants | VENLAFAXINE TAB 225MG ER | VENLAFAXINE HCL TAB ER 24HR 225 MG (BASE EQUIVALENT) | Tier 1 | | X | | |
| Antidepressants | VENLAFAXINE TAB 25MG | VENLAFAXINE HCL TAB 25 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidepressants | VENLAFAXINE TAB 37.5 ER | VENLAFAXINE HCL TAB ER 24HR 37.5 MG (BASE EQUIVALENT) | Tier 1 | | X | | |
| Antidepressants | VENLAFAXINE TAB 37.5MG | VENLAFAXINE HCL TAB 37.5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidepressants | VENLAFAXINE TAB 50MG | VENLAFAXINE HCL TAB 50 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidepressants | VENLAFAXINE TAB 75MG | VENLAFAXINE HCL TAB 75 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antidepressants | VENLAFAXINE TAB 75MG ER | VENLAFAXINE HCL TAB ER 24HR 75 MG (BASE EQUIVALENT) | Tier 1 | | X | | |
| Antidepressants | VIIBRYD KIT STARTER | VILAZODONE HCL TAB STARTER KIT 10 (7) & 20 (23) MG | Tier 2 | | | | |
| Antidepressants | VIIBRYD TAB 10MG | VILAZODONE HCL TAB 10 MG | Tier 3 | | X | X | |
| Antidepressants | VIIBRYD TAB 20MG | VILAZODONE HCL TAB 20 MG | Tier 3 | | X | X | |
| Antidepressants | VIIBRYD TAB 40MG | VILAZODONE HCL TAB 40 MG | Tier 3 | | X | X | |
| Antidepressants | VILAZODONE TAB 10MG | VILAZODONE HCL TAB 10 MG | Tier 1 | | X | | |
| Antidepressants | VILAZODONE TAB 20MG | VILAZODONE HCL TAB 20 MG | Tier 1 | | X | | |
| Antidepressants | VILAZODONE TAB 40MG | VILAZODONE HCL TAB 40 MG | Tier 1 | | X | | |
| Antidepressants | WELLBUTRIN TAB 100MG SR | BUPROPION HCL TAB ER 12HR 100 MG | Tier 3 | | | X | |
| Antidepressants | WELLBUTRIN TAB 150MG SR | BUPROPION HCL TAB ER 12HR 150 MG | Tier 3 | | | X | |
| Antidepressants | WELLBUTRIN TAB 200MG SR | BUPROPION HCL TAB ER 12HR 200 MG | Tier 3 | | | X | |
| Antidepressants | WELLBUTRIN TAB XL 150MG | BUPROPION HCL TAB ER 24HR 150 MG | Tier 3 | | | X | |
| Antidepressants | WELLBUTRIN TAB XL 300MG | BUPROPION HCL TAB ER 24HR 300 MG | Tier 3 | | | X | |
| Antidepressants | ZOLOFT CON 20MG/ML | SERTRALINE HCL ORAL CONCENTRATE FOR SOLUTION 20 MG/ML | Tier 3 | | | X | |
| Antidepressants | ZOLOFT TAB 100MG | SERTRALINE HCL TAB 100 MG | Tier 3 | | | X | |
| Antidepressants | ZOLOFT TAB 25MG | SERTRALINE HCL TAB 25 MG | Tier 3 | | | X | |
| Antidepressants | ZOLOFT TAB 50MG | SERTRALINE HCL TAB 50 MG | Tier 3 | | | X | |
| Antiemetics | AKYNZEO CAP 300-0.5 | NETUPITANT-PALONOSETRON CAP 300-0.5 MG | Tier 3 | | | | |
| Antiemetics | ANZEMET TAB 50MG | DOLASETRON MESYLATE TAB 50 MG | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antiemetics | APREPITANT CAP 125MG | APREPITANT CAPSULE 125 MG | Tier 1 | | | | |
| Antiemetics | APREPITANT CAP 40MG | APREPITANT CAPSULE 40 MG | Tier 1 | | | | |
| Antiemetics | APREPITANT CAP 80MG | APREPITANT CAPSULE 80 MG | Tier 1 | | | | |
| Antiemetics | APREPITANT PAK 80 & 125 | APREPITANT CAPSULE THERAPY PACK 80 & 125 MG | Tier 1 | | | | |
| Antiemetics | BONJESTA TAB 20-20MG | DOXYLAMINE-PYRIDOXINE TAB ER 20-20 MG | Tier 2 | | | | |
| Antiemetics | COMPRO SUP 25MG | PROCHLORPERAZINE SUPPOS 25 MG | Tier 1 | | | | |
| Antiemetics | DICLEGIS TAB 10-10MG | DOXYLAMINE-PYRIDOXINE TAB DELAYED RELEASE 10-10 MG | Tier 3 | | | X | |
| Antiemetics | DOXYL/PYRID TAB 10-10MG | DOXYLAMINE-PYRIDOXINE TAB DELAYED RELEASE 10-10 MG | Tier 1 | | | | |
| Antiemetics | DRONABINOL CAP 10MG | DRONABINOL CAP 10 MG | Tier 1 | | | | |
| Antiemetics | DRONABINOL CAP 2.5MG | DRONABINOL CAP 2.5 MG | Tier 1 | | | | |
| Antiemetics | DRONABINOL CAP 5MG | DRONABINOL CAP 5 MG | Tier 1 | | | | |
| Antiemetics | EMEND CAP 80MG | APREPITANT CAPSULE 80 MG | Tier 3 | | | X | |
| Antiemetics | EMEND SUS 125MG | APREPITANT FOR ORAL SUSP 125 MG (125 MG/5ML) | Tier 2 | | | | |
| Antiemetics | EMEND TRIPAC PAK 80 & 125 | APREPITANT CAPSULE THERAPY PACK 80 & 125 MG | Tier 3 | | | X | |
| Antiemetics | GIMOTI SPR 15MG | METOCLOPRAMIDE HCL NASAL SPRAY 15 MG/ACT | Tier 3 | | X | X | |
| Antiemetics | GRANISETRON TAB 1MG | GRANISETRON HCL TAB 1 MG | Tier 1 | | | | |
| Antiemetics | MARINOL CAP 2.5MG | DRONABINOL CAP 2.5 MG | Tier 3 | | | | |
| Antiemetics | METOCLOPRAM SOL 10/10ML | METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV) | Tier 1 | | | | |
| Antiemetics | METOCLOPRAM SOL 5MG/5ML | METOCLOPRAMIDE HCL SOLN 5 MG/5ML (10 MG/10ML) (BASE EQUIV) | Tier 1 | | | | |
| Antiemetics | METOCLOPRAM TAB 10MG | METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiemetics | METOCLOPRAM TAB 5MG | METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiemetics | METOCLOPRAM TAB 5MG ODT | METOCLOPRAMIDE HCL ORALLY DISINTEGRATING TAB 5 MG (BASE EQ) | Tier 1 | | | | |
| Antiemetics | ONDANSETRON SOL 4MG/5ML | ONDANSETRON HCL ORAL SOLN 4 MG/5ML | Tier 1 | | | | |
| Antiemetics | ONDANSETRON TAB 24MG | ONDANSETRON HCL TAB 24 MG | Tier 1 | | | | |
| Antiemetics | ONDANSETRON TAB 4MG | ONDANSETRON HCL TAB 4 MG | Tier 1 | | | | |
| Antiemetics | ONDANSETRON TAB 4MG ODT | ONDANSETRON ORALLY DISINTEGRATING TAB 4 MG | Tier 1 | | | | |
| Antiemetics | ONDANSETRON TAB 8MG | ONDANSETRON HCL TAB 8 MG | Tier 1 | | | | |
| Antiemetics | ONDANSETRON TAB 8MG ODT | ONDANSETRON ORALLY DISINTEGRATING TAB 8 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antiemetics | PERPHENAZINE TAB 16MG | PERPHENAZINE TAB 16 MG | Tier 1 | | | | |
| Antiemetics | PERPHENAZINE TAB 2MG | PERPHENAZINE TAB 2 MG | Tier 1 | | | | |
| Antiemetics | PERPHENAZINE TAB 4MG | PERPHENAZINE TAB 4 MG | Tier 1 | | | | |
| Antiemetics | PERPHENAZINE TAB 8MG | PERPHENAZINE TAB 8 MG | Tier 1 | | | | |
| Antiemetics | PROCHLORPER SUP 25MG | PROCHLORPERAZINE SUPPOS 25 MG | Tier 1 | | | | |
| Antiemetics | PROCHLORPER TAB 10MG | PROCHLORPERAZINE MALEATE TAB 10 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiemetics | PROCHLORPER TAB 5MG | PROCHLORPERAZINE MALEATE TAB 5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiemetics | PROMETHAZINE SOL 6.25/5ML | PROMETHAZINE HCL ORAL SOLN 6.25 MG/5ML | Tier 1 | | | | |
| Antiemetics | PROMETHAZINE SUP 12.5MG | PROMETHAZINE HCL SUPPOS 12.5 MG | Tier 1 | | | | |
| Antiemetics | PROMETHAZINE SUP 25MG | PROMETHAZINE HCL SUPPOS 25 MG | Tier 1 | | | | |
| Antiemetics | PROMETHAZINE TAB 12.5MG | PROMETHAZINE HCL TAB 12.5 MG | Tier 1 | | | | |
| Antiemetics | PROMETHAZINE TAB 25MG | PROMETHAZINE HCL TAB 25 MG | Tier 1 | | | | |
| Antiemetics | PROMETHAZINE TAB 50MG | PROMETHAZINE HCL TAB 50 MG | Tier 1 | | | | |
| Antiemetics | PROMETHEGAN SUP 12.5MG | PROMETHAZINE HCL SUPPOS 12.5 MG | Tier 1 | | | | |
| Antiemetics | PROMETHEGAN SUP 25MG | PROMETHAZINE HCL SUPPOS 25 MG | Tier 1 | | | | |
| Antiemetics | PROMETHEGAN SUP 50MG | PROMETHAZINE HCL SUPPOS 50 MG | Tier 1 | | | | |
| Antiemetics | REGLAN TAB 10MG | METOCLOPRAMIDE HCL TAB 10 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antiemetics | REGLAN TAB 5MG | METOCLOPRAMIDE HCL TAB 5 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antiemetics | SANCUSO DIS 3.1MG | GRANISETRON TD PATCH 3.1 MG/24HR (CONTAINS 34.3 MG) | Tier 3 | | | X | |
| Antiemetics | SCOPOLAMINE DIS 1MG/3DAY | SCOPOLAMINE TD PATCH 72HR 1 MG/3DAYS | Tier 1 | | | | |
| Antiemetics | SYNDROS SOL 5MG/ML | DRONABINOL SOLN 5 MG/ML | Tier 3 | | X | | |
| Antiemetics | TRANSDERM-SC DIS 1MG/3DAY | SCOPOLAMINE TD PATCH 72HR 1 MG/3DAYS | Tier 3 | | | X | |
| Antiemetics | TRIMETHOBENZ CAP 300MG | TRIMETHOBENZAMIDE HCL CAP 300 MG | Tier 1 | | | | |
| Antiemetics | VARUBI TAB 90MG | ROLAPITANT HCL TAB THERAPY PACK 2 X 90 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antiemetics | ZUPLENZ MIS 4MG | ONDANSETRON ORAL SOLUBLE FILM 4 MG | Tier 3 | | | | |
| Antifungals | ANCOBON CAP 250MG | FLUCYTOSINE CAP 250 MG | Tier 3 | | | | |
| Antifungals | ANCOBON CAP 500MG | FLUCYTOSINE CAP 500 MG | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antifungals | CLOTRIMAZOLE TRO 10MG | CLOTRIMAZOLE TROCHE 10 MG | Tier 1 | | | | |
| Antifungals | CRESEMBA CAP 186 MG | ISAVUCONAZONIUM SULFATE CAP 186 MG (ISAVUCONAZOLE 100 MG) | Tier 3 | | | | |
| Antifungals | DIFLUCAN SUS 10MG/ML | FLUCONAZOLE FOR SUSP 10 MG/ML | Tier 3 | | | X | |
| Antifungals | DIFLUCAN SUS 40MG/ML | FLUCONAZOLE FOR SUSP 40 MG/ML | Tier 3 | | | X | |
| Antifungals | DIFLUCAN TAB 100MG | FLUCONAZOLE TAB 100 MG | Tier 3 | | | X | |
| Antifungals | DIFLUCAN TAB 150MG | FLUCONAZOLE TAB 150 MG | Tier 3 | | | X | |
| Antifungals | DIFLUCAN TAB 200MG | FLUCONAZOLE TAB 200 MG | Tier 3 | | | X | |
| Antifungals | DIFLUCAN TAB 50MG | FLUCONAZOLE TAB 50 MG | Tier 3 | | | X | |
| Antifungals | FLUCONAZOLE SUS 10MG/ML | FLUCONAZOLE FOR SUSP 10 MG/ML | Tier 1 | | | | |
| Antifungals | FLUCONAZOLE SUS 40MG/ML | FLUCONAZOLE FOR SUSP 40 MG/ML | Tier 1 | | | | |
| Antifungals | FLUCONAZOLE TAB 100MG | FLUCONAZOLE TAB 100 MG | Tier 1 | | | | |
| Antifungals | FLUCONAZOLE TAB 150MG | FLUCONAZOLE TAB 150 MG | Tier 1 | | | | |
| Antifungals | FLUCONAZOLE TAB 200MG | FLUCONAZOLE TAB 200 MG | Tier 1 | | | | |
| Antifungals | FLUCONAZOLE TAB 50MG | FLUCONAZOLE TAB 50 MG | Tier 1 | | | | |
| Antifungals | FLUCYDOSINE CAP 250MG | FLUCYDOSINE CAP 250 MG | Tier 1 | | | | |
| Antifungals | FLUCYDOSINE CAP 500MG | FLUCYDOSINE CAP 500 MG | Tier 1 | | | | |
| Antifungals | GRISEOFULVIN SUS 125/5ML | GRISEOFULVIN MICROSIZED SUSP 125 MG/5ML | Tier 1 | | | | |
| Antifungals | GRISEOFULVIN TAB MICR 500 | GRISEOFULVIN MICROSIZED TAB 500 MG | Tier 1 | | | | |
| Antifungals | GRISEOFULVIN TAB ULTR 125 | GRISEOFULVIN ULTRAMICROSIZED TAB 125 MG | Tier 1 | | | | |
| Antifungals | GRISEOFULVIN TAB ULTR 250 | GRISEOFULVIN ULTRAMICROSIZED TAB 250 MG | Tier 1 | | | | |
| Antifungals | GYNAZOLE-1 CRE 2% | BUTOCONAZOLE NITRATE (ONE DOSE) VAGINAL CREAM 2% | Tier 3 | | | | |
| Antifungals | ITRACONAZOLE CAP 100MG | ITRACONAZOLE CAP 100 MG | Tier 1 | | X | | |
| Antifungals | ITRACONAZOLE SOL 10MG/ML | ITRACONAZOLE ORAL SOLN 10 MG/ML | Tier 1 | | X | | |
| Antifungals | KETOCONAZOLE TAB 200MG | KETOCONAZOLE TAB 200 MG | Tier 1 | | | | |
| Antifungals | MICONAZOLE 3 SUP 200MG | MICONAZOLE NITRATE VAGINAL SUPPOS 200 MG | Tier 1 | | | | |
| Antifungals | NOXAFIL PAK 300MG | POSACONAZOLE FOR DELAYED RELEASE SUSP PACKET 300 MG | Tier 2 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antifungals | NOXAFIL SUS 40MG/ML | POSACONAZOLE SUSP 40 MG/ML | Tier 3 | | X | | |
| Antifungals | NOXAFIL TAB 100MG | POSACONAZOLE TAB DELAYED RELEASE 100 MG | Tier 3 | | | X | |
| Antifungals | NYSTATIN SUS 100000 | NYSTATIN SUSP 100000 UNIT/ML | Tier 1 | | | | |
| Antifungals | NYSTATIN TAB 500000 | NYSTATIN TAB 500000 UNIT | Tier 1 | | | | |
| Antifungals | ORAVIG TAB 50MG | MICONAZOLE BUCCAL TAB 50 MG (MOUTH-THROAT) | Tier 3 | | | | |
| Antifungals | POSACONAZOLE SUS 200/5ML | POSACONAZOLE SUSP 40 MG/ML | Tier 1 | | X | | |
| Antifungals | POSACONAZOLE SUS 40MG/ML | POSACONAZOLE SUSP 40 MG/ML | Tier 1 | | X | | |
| Antifungals | POSACONAZOLE TAB 100MG DR | POSACONAZOLE TAB DELAYED RELEASE 100 MG | Tier 1 | | | | |
| Antifungals | SPORANOX CAP 100MG | ITRACONAZOLE CAP 100 MG | Tier 3 | | X | | |
| Antifungals | SPORANOX CAP PULSEPAK | ITRACONAZOLE CAP 100 MG | Tier 3 | | X | | |
| Antifungals | SPORANOX SOL 10MG/ML | ITRACONAZOLE ORAL SOLN 10 MG/ML | Tier 3 | | X | | |
| Antifungals | TERBINAFINE TAB 250MG | TERBINAFINE HCL TAB 250 MG | Tier 1 | | | | |
| Antifungals | TERCONAZOLE CRE 0.4% | TERCONAZOLE VAGINAL CREAM 0.4% | Tier 1 | | | | |
| Antifungals | TERCONAZOLE CRE 0.8% | TERCONAZOLE VAGINAL CREAM 0.8% | Tier 1 | | | | |
| Antifungals | TERCONAZOLE SUP 80MG | TERCONAZOLE VAGINAL SUPPOS 80 MG | Tier 1 | | | | |
| Antifungals | TOLSURA CAP 65MG | ITRACONAZOLE CAP 65 MG | Tier 3 | | | X | |
| Antifungals | VFEND SUS 40MG/ML | VORICONAZOLE FOR SUSP 40 MG/ML | Tier 3 | | | | |
| Antifungals | VFEND TAB 200MG | VORICONAZOLE TAB 200 MG | Tier 3 | | | | |
| Antifungals | VFEND TAB 50MG | VORICONAZOLE TAB 50 MG | Tier 3 | | | | |
| Antifungals | VORICONAZOLE SUS 40MG/ML | VORICONAZOLE FOR SUSP 40 MG/ML | Tier 1 | | | | |
| Antifungals | VORICONAZOLE TAB 200MG | VORICONAZOLE TAB 200 MG | Tier 1 | | | | |
| Antifungals | VORICONAZOLE TAB 50MG | VORICONAZOLE TAB 50 MG | Tier 1 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | EXELDERM CRE 1% | SULCONAZOLE NITRATE CREAM 1% | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | EXELDERM SOL 1% | SULCONAZOLE NITRATE SOLUTION 1% | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | EXODERM LOT 25-1% | SODIUM THIOSULFATE-SALICYLIC ACID LOTION 25-1% | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | HYDROC IODO CRE 1% | IODOQUINOL-HC CREAM 1-1% | Tier 1 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | HYDROC IODO CRE 1-1% | IODOQUINOL-HC CREAM 1-1% | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antifungals - Drugs to Treat Fungal Infections | HYDROCORT/ CRE IODOQUIN | IODOQUINOL-HC CREAM 1-1% | Tier 1 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | LOPROX KIT 0.77% | *CICLOPIROX OLAMINE CREAM 0.77% (BASE EQUIV) & CLEANSER KIT* | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | MICONAZOLE POW NITRATE | MICONAZOLE NITRATE POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW 100MU | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW 10BU | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW 150MU | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW 1BU | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW 2BU | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW 500MU | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW 50MU | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | NYSTATIN POW 5BU | NYSTATIN (BULK) POWDER | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | PEDIZOLPAK PAK 2%-2% | KETOCONAZOLE 2% CR & MICONAZOLE 2% TINC THERAPY PACK | Tier 3 | | | X | |
| Antifungals - Drugs to Treat Fungal Infections | SULCONAZOLE CRE 1% | SULCONAZOLE NITRATE CREAM 1% | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | SULCONAZOLE SOL 1% | SULCONAZOLE NITRATE SOLUTION 1% | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | XOLEGEL KIT COREPAK | KETOCONAZOLE GEL 2% & HYDROCORTISONE GEL 1% KIT | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | XOLEGEL DUO/ KIT HEAD&SHD | KETOCONAZOLE GEL 2% & PYRITHIONE ZINC SHAMPOO 1% KIT | Tier 3 | | | | |
| Antifungals - Drugs to Treat Fungal Infections | XOLEGEL DUO/ KIT XOLEX | KETOCONAZOLE GEL 2% & PYRITHIONE ZINC SHAMPOO 1% KIT | Tier 3 | | | | |
| Antigout Agents | ALLOPURINOL TAB 100MG | ALLOPURINOL TAB 100 MG | Tier 1 | | | | |
| Antigout Agents | ALLOPURINOL TAB 200MG | ALLOPURINOL TAB 200 MG | Tier 3 | | | | |
| Antigout Agents | ALLOPURINOL TAB 300MG | ALLOPURINOL TAB 300 MG | Tier 1 | | | | |
| Antigout Agents | COLCHICINE CAP 0.6MG | COLCHICINE CAP 0.6 MG | Tier 1 | | | | |
| Antigout Agents | COLCHICINE TAB 0.6MG | COLCHICINE TAB 0.6 MG | Tier 1 | | | | |
| Antigout Agents | COLCRYS TAB 0.6MG | COLCHICINE TAB 0.6 MG | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antigout Agents | FEBUXOSTAT TAB 40MG | FEBUXOSTAT TAB 40 MG | Tier 1 | | | | |
| Antigout Agents | FEBUXOSTAT TAB 80MG | FEBUXOSTAT TAB 80 MG | Tier 1 | | | | |
| Antigout Agents | GLOPERBA SOL 0.6/5ML | COLCHICINE ORAL SOLN 0.6 MG/5ML | Tier 3 | | | | |
| Antigout Agents | MITIGARE CAP 0.6MG | COLCHICINE CAP 0.6 MG | Tier 2 | | | | |
| Antigout Agents | PROBEN/COLCH TAB 500-0.5 | COLCHICINE W/ PROBENECID TAB 0.5-500 MG | Tier 1 | | | | |
| Antigout Agents | PROBENECID TAB 500MG | PROBENECID TAB 500 MG | Tier 1 | | | | |
| Antigout Agents | ULORIC TAB 40MG | FEBUXOSTAT TAB 40 MG | Tier 3 | | | X | |
| Antigout Agents | ULORIC TAB 80MG | FEBUXOSTAT TAB 80 MG | Tier 3 | | | X | |
| Antigout Agents | ZYLOPRIM TAB 100MG | ALLOPURINOL TAB 100 MG | Tier 3 | | | | |
| Antigout Agents | ZYLOPRIM TAB 300MG | ALLOPURINOL TAB 300 MG | Tier 3 | | | | |
| Anti-HIV Agents, Other - HIV Drugs | VOCABRIA TAB 30MG | CABOTEGRAVIR SODIUM TAB 30 MG | Tier 3 | | | | |
| Anti-inflammatory Agents - Drugs to Treat Inflammation | ANUCORT-HC SUP 25MG | HYDROCORTISONE ACETATE SUPPOS 25 MG | Tier 1 | | | | |
| Anti-inflammatory Agents - Drugs to Treat Inflammation | ANUSOL-HC SUP 25MG | HYDROCORTISONE ACETATE SUPPOS 25 MG | Tier 3 | | | | |
| Anti-inflammatory Agents - Drugs to Treat Inflammation | HEMMOREX-HC SUP 25MG | HYDROCORTISONE ACETATE SUPPOS 25 MG | Tier 3 | | | | |
| Anti-inflammatory Agents - Drugs to Treat Inflammation | HEMMOREX-HC SUP 30MG | HYDROCORTISONE ACETATE SUPPOS 30 MG | Tier 3 | | | | |
| Anti-inflammatory Agents - Drugs to Treat Inflammation | HYDROCORT AC SUP 25MG | HYDROCORTISONE ACETATE SUPPOS 25 MG | Tier 1 | | | | |
| Anti-inflammatory Agents - Drugs to Treat Inflammation | HYDROCORT AC SUP 30MG | HYDROCORTISONE ACETATE SUPPOS 30 MG | Tier 1 | | | | |
| Anti-inflammatory Agents - Drugs to Treat Inflammation | PROCTOCORT SUP 30MG | HYDROCORTISONE ACETATE SUPPOS 30 MG | Tier 3 | | | | |
| Antimigraine Agents | AIMOVIG INJ 140MG/ML | ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML | Tier 2 | X | X | | |
| Antimigraine Agents | AIMOVIG INJ 70MG/ML | ERENUMAB-AOOE SUBCUTANEOUS SOLN AUTO-INJECTOR 70 MG/ML | Tier 2 | X | | | |
| Antimigraine Agents | AJOVY INJ 225/1.5 | FREMANEZUMAB-VFRM SUBCUTANEOUS SOLN AUTO-INJ 225 MG/1.5ML | Tier 3 | X | X | X | |
| Antimigraine Agents | AJOVY INJ 225/1.5 | FREMANEZUMAB-VFRM SUBCUTANEOUS SOLN PREF SYR 225 MG/1.5ML | Tier 3 | X | X | X | |
| Antimigraine Agents | CAFERGOT TAB 1-100MG | ERGOTAMINE W/ CAFFEINE TAB 1-100 MG | Tier 3 | | | | |
| Antimigraine Agents | D.H.E. 45 INJ 1MG/ML | DIHYDROERGOTAMINE MESYLATE INJ 1 MG/ML | Tier 3 | | | X | |
| Antimigraine Agents | DIHYDROERGOT CRY MESYLATE | DIHYDROERGOTAMINE MESYLATE CRYSTALS | Tier 3 | | | | |
| Antimigraine Agents | DIHYDROERGOT INJ 1MG/ML | DIHYDROERGOTAMINE MESYLATE INJ 1 MG/ML | Tier 1 | | | | |

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|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antimigraine Agents | DIHYDROERGOT POW MESYLATE | DIHYDROERGOTAMINE MESYLATE POWDER | Tier 3 | | | | |
| Antimigraine Agents | DIHYDROERGOT SPR 4MG/ML | DIHYDROERGOTAMINE MESYLATE NASAL SPRAY 4 MG/ML | Tier 1 | | | | |
| Antimigraine Agents | EMGALITY INJ 100MG/ML | GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN PREFILLED SYR 100 MG/ML | Tier 2 | X | X | | |
| Antimigraine Agents | EMGALITY INJ 120MG/ML | GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN AUTO-INJECTOR 120 MG/ML | Tier 2 | X | X | | |
| Antimigraine Agents | EMGALITY INJ 120MG/ML | GALCANEZUMAB-GNLM SUBCUTANEOUS SOLN PREFILLED SYR 120 MG/ML | Tier 2 | X | X | | |
| Antimigraine Agents | ERGOMAR SUB 2MG | ERGOTAMINE TARTRATE SL TAB 2 MG | Tier 3 | | | | |
| Antimigraine Agents | ERGOT/CAFFEN TAB 1-100MG | ERGOTAMINE W/ CAFFEINE TAB 1-100 MG | Tier 1 | | | | |
| Antimigraine Agents | MIGERGOT SUP 2/100 | ERGOTAMINE W/ CAFFEINE SUPPOS 2-100 MG | Tier 3 | | | | |
| Antimigraine Agents | MIGRANAL SPR 4MG/ML | DIHYDROERGOTAMINE MESYLATE NASAL SPRAY 4 MG/ML | Tier 3 | | | X | |
| Antimigraine Agents | QULIPTA TAB 10MG | ATOGEPAANT TAB 10 MG | Tier 3 | X | X | X | |
| Antimigraine Agents | QULIPTA TAB 30MG | ATOGEPAANT TAB 30 MG | Tier 3 | X | X | X | |
| Antimigraine Agents | QULIPTA TAB 60MG | ATOGEPAANT TAB 60 MG | Tier 3 | X | X | X | |
| Antimigraine Agents | TIMOLOL MAL TAB 10MG | TIMOLOL MALEATE TAB 10 MG | Tier 1 | | | | |
| Antimigraine Agents | TIMOLOL MAL TAB 20MG | TIMOLOL MALEATE TAB 20 MG | Tier 1 | | | | |
| Antimigraine Agents | TIMOLOL MAL TAB 5MG | TIMOLOL MALEATE TAB 5 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ALMOTRIP MAL TAB 12.5MG | ALMOTRIPTAN MALATE TAB 12.5 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ALMOTRIP MAL TAB 6.25MG | ALMOTRIPTAN MALATE TAB 6.25 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ALMOTRIPTAN TAB 12.5MG | ALMOTRIPTAN MALATE TAB 12.5 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ALMOTRIPTAN TAB 6.25MG | ALMOTRIPTAN MALATE TAB 6.25 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | AMERGE TAB 1MG | NARATRIPTAN HCL TAB 1 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | AMERGE TAB 2.5MG | NARATRIPTAN HCL TAB 2.5 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | ELETRIPTAN TAB 20MG | ELETRIPTAN HYDROBROMIDE TAB 20 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ELETRIPTAN TAB 40MG | ELETRIPTAN HYDROBROMIDE TAB 40 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | FROVA TAB 2.5MG | FROVATRIPTAN SUCCINATE TAB 2.5 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | FROVATRIPTAN TAB 2.5MG | FROVATRIPTAN SUCCINATE TAB 2.5 MG (BASE EQUIVALENT) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX INJ 4MG/0.5 | SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 4 MG/0.5ML | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX INJ 4MG/0.5 | SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 4 MG/0.5ML | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX INJ 6MG/0.5 | SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 6 MG/0.5ML | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX INJ 6MG/0.5 | SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX SPR 20MG/ACT | SUMATRIPTAN NASAL SPRAY 20 MG/ACT | Tier 3 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX SPR 5MG/ACT | SUMATRIPTAN NASAL SPRAY 5 MG/ACT | Tier 3 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX TAB 100MG | SUMATRIPTAN SUCCINATE TAB 100 MG | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX TAB 25MG | SUMATRIPTAN SUCCINATE TAB 25 MG | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | IMITREX TAB 50MG | SUMATRIPTAN SUCCINATE TAB 50 MG | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | MAXALT TAB 10MG | RIZATRIPTAN BENZOATE TAB 10 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | NARATRIPTAN TAB 1MG | NARATRIPTAN HCL TAB 1 MG (BASE EQUIV) | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | NARATRIPTAN TAB 2.5MG | NARATRIPTAN HCL TAB 2.5 MG (BASE EQUIV) | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | NURTEC TAB 75MG ODT | RIMEGEPANT SULFATE TAB DISINT 75 MG | Tier 2 | X | X | X | |
| Antimigraine Agents - Drugs to Treat Migraines | ONZETRA XSAI MIS 11MG | SUMATRIPTAN SUCCINATE EXHALER POWDER 11 MG/ NOSEPIECE | Tier 3 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | RELPAX TAB 20MG | ELETRIPTAN HYDROBROMIDE TAB 20 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | RELPAX TAB 40MG | ELETRIPTAN HYDROBROMIDE TAB 40 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | REYVOW TAB 100MG | LASMIDITAN SUCCINATE TAB 100 MG | Tier 3 | X | X | X | |
| Antimigraine Agents - Drugs to Treat Migraines | REYVOW TAB 50MG | LASMIDITAN SUCCINATE TAB 50 MG | Tier 3 | X | X | X | |
| Antimigraine Agents - Drugs to Treat Migraines | RIZATRIPTAN TAB 10MG | RIZATRIPTAN BENZOATE TAB 10 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | RIZATRIPTAN TAB 10MG ODT | RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 10 MG (BASE EQ) | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | RIZATRIPTAN TAB 5MG | RIZATRIPTAN BENZOATE TAB 5 MG (BASE EQUIVALENT) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antimigraine Agents - Drugs to Treat Migraines | RIZATRIPTAN TAB 5MG ODT | RIZATRIPTAN BENZOATE ORAL DISINTEGRATING TAB 5 MG (BASE EQ) | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMAT-NAPROX TAB 85-500MG | SUMATRIPTAN-NAPROXEN SODIUM TAB 85-500 MG | Tier 1 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN INJ 4MG/0.5 | SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 4 MG/0.5ML | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN INJ 4MG/0.5 | SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 4 MG/0.5ML | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN INJ 6/0.5ML | SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN INJ 6MG/.5ML | SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN INJ 6MG/.5ML | SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN INJ 6MG/0.5 | SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN INJ 6MG/0.5 | SUMATRIPTAN SUCCINATE INJ 6 MG/0.5ML | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN INJ 6MG/0.5 | SUMATRIPTAN SUCCINATE SOLUTION CARTRIDGE 6 MG/0.5ML | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN SPR 20MG/ACT | SUMATRIPTAN NASAL SPRAY 20 MG/ACT | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN SPR 5MG/ACT | SUMATRIPTAN NASAL SPRAY 5 MG/ACT | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN TAB 100MG | SUMATRIPTAN SUCCINATE TAB 100 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN TAB 25MG | SUMATRIPTAN SUCCINATE TAB 25 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | SUMATRIPTAN TAB 50MG | SUMATRIPTAN SUCCINATE TAB 50 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | TOSYMRA SOL 10MG | SUMATRIPTAN NASAL SPRAY 10 MG/ACT | Tier 3 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | TREXIMET TAB 85-500MG | SUMATRIPTAN-NAPROXEN SODIUM TAB 85-500 MG | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | TRUDHESA AER 0.725MG | DIHYDROERGOTAMINE MESYLATE HFA NASAL AEROSOL 0.725 MG/ACT | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | UBRELVY TAB 100MG | UBROGEPANT TAB 100 MG | Tier 2 | X | X | X | |
| Antimigraine Agents - Drugs to Treat Migraines | UBRELVY TAB 50MG | UBROGEPANT TAB 50 MG | Tier 2 | X | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antimigraine Agents - Drugs to Treat Migraines | ZEMBRACE SYM INJ 3/0.5ML | SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 3 MG/0.5ML | Tier 3 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOLMITRIPTAN SPR 2.5MG | ZOLMITRIPTAN NASAL SPRAY 2.5 MG/SPRAY UNIT | Tier 2 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOLMITRIPTAN SPR 5MG | ZOLMITRIPTAN NASAL SPRAY 5 MG/SPRAY UNIT | Tier 1 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOLMITRIPTAN TAB 2.5 MG | ZOLMITRIPTAN ORALLY DISINTEGRATING TAB 2.5 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOLMITRIPTAN TAB 2.5MG | ZOLMITRIPTAN TAB 2.5 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOLMITRIPTAN TAB 5MG | ZOLMITRIPTAN TAB 5 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOLMITRIPTAN TAB 5MG ODT | ZOLMITRIPTAN ORALLY DISINTEGRATING TAB 5 MG | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOMIG SPR 2.5MG | ZOLMITRIPTAN NASAL SPRAY 2.5 MG/SPRAY UNIT | Tier 2 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOMIG SPR 5MG | ZOLMITRIPTAN NASAL SPRAY 5 MG/SPRAY UNIT | Tier 1 | | | | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOMIG TAB 2.5MG | ZOLMITRIPTAN TAB 2.5 MG | Tier 3 | | | X | |
| Antimigraine Agents - Drugs to Treat Migraines | ZOMIG TAB 5MG | ZOLMITRIPTAN TAB 5 MG | Tier 3 | | | X | |
| Antimyasthenic Agents | MESTINON SOL 60MG/5ML | PYRIDOSTIGMINE BROMIDE ORAL SOLN 60 MG/5ML | Tier 3 | | | | |
| Antimyasthenic Agents | MESTINON TAB 60MG | PYRIDOSTIGMINE BROMIDE TAB 60 MG | Tier 3 | | | X | |
| Antimyasthenic Agents | MESTINON TAB TIMESPAN | PYRIDOSTIGMINE BROMIDE TAB ER 180 MG | Tier 3 | | | X | |
| Antimyasthenic Agents | PYRIDOSTIGM TAB 60MG | PYRIDOSTIGMINE BROMIDE TAB 60 MG | Tier 1 | | | | |
| Antimyasthenic Agents | PYRIDOSTIGMI SOL 60MG/5ML | PYRIDOSTIGMINE BROMIDE ORAL SOLN 60 MG/5ML | Tier 1 | | | | |
| Antimyasthenic Agents | PYRIDOSTIGMI TAB 30MG | PYRIDOSTIGMINE BROMIDE TAB 30 MG | Tier 1 | | | X | |
| Antimyasthenic Agents | PYRIDOSTIGMI TAB ER 180MG | PYRIDOSTIGMINE BROMIDE TAB ER 180 MG | Tier 1 | | | | |
| Antimycobacterials | CYCLOSERINE CAP 250MG | CYCLOSERINE CAP 250 MG | Tier 1 | | | | |
| Antimycobacterials | DAPSONE TAB 100MG | DAPSONE TAB 100 MG | Tier 1 | | | | |
| Antimycobacterials | DAPSONE TAB 25MG | DAPSONE TAB 25 MG | Tier 1 | | | | |
| Antimycobacterials | ETHAMBUTOL TAB 100MG | ETHAMBUTOL HCL TAB 100 MG | Tier 1 | | | | |
| Antimycobacterials | ETHAMBUTOL TAB 400MG | ETHAMBUTOL HCL TAB 400 MG | Tier 1 | | | | |
| Antimycobacterials | ISONIAZID SYP 50MG/5ML | ISONIAZID SYRUP 50 MG/5ML | Tier 1 | | | | |
| Antimycobacterials | ISONIAZID TAB 100MG | ISONIAZID TAB 100 MG | Tier 1 | | | | |
| Antimycobacterials | ISONIAZID TAB 300MG | ISONIAZID TAB 300 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Antimycobacterials | MYAMBUTOL TAB 400MG | ETHAMBUTOL HCL TAB 400 MG | Tier 3 | | | | |
| Antimycobacterials | MYCOBUTIN CAP 150MG | RIFABUTIN CAP 150 MG | Tier 3 | | | | |
| Antimycobacterials | PRETOMANID TAB 200MG | PRETOMANID TAB 200 MG | Tier 3 | | | | |
| Antimycobacterials | PRIFTIN TAB 150MG | RIFAPENTINE TAB 150 MG | Tier 2 | | | | |
| Antimycobacterials | PYRAZINAMIDE TAB 500MG | PYRAZINAMIDE TAB 500 MG | Tier 1 | | | | |
| Antimycobacterials | RIFABUTIN CAP 150MG | RIFABUTIN CAP 150 MG | Tier 1 | | | | |
| Antimycobacterials | RIFAMPIN CAP 150MG | RIFAMPIN CAP 150 MG | Tier 1 | | | | |
| Antimycobacterials | RIFAMPIN CAP 300MG | RIFAMPIN CAP 300 MG | Tier 1 | | | | |
| Antimycobacterials | RIFAMPIN SUS 25MG/ML | *RIFAMPIN SUSP 25 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Antimycobacterials | SIRTURO TAB 100MG | BEDAQUILINE FUMARATE TAB 100 MG (BASE EQUIV) | Tier 2 | | | | |
| Antimycobacterials | SIRTURO TAB 20MG | BEDAQUILINE FUMARATE TAB 20 MG (BASE EQUIV) | Tier 2 | | | | |
| Antimycobacterials | TRECTOR TAB 250MG | ETHIONAMIDE TAB 250 MG | Tier 2 | | | | |
| Antineoplastics | ABIRATERONE TAB 250MG | ABIRATERONE ACETATE TAB 250 MG | Tier 1 | X | X | | X |
| Antineoplastics | ABIRATERONE TAB 500MG | ABIRATERONE ACETATE TAB 500 MG | Tier 1 | X | X | X | X |
| Antineoplastics | AFINITOR TAB 10MG | EVEROLIMUS TAB 10 MG | Tier 3 | X | X | X | X |
| Antineoplastics | AFINITOR TAB 2.5MG | EVEROLIMUS TAB 2.5 MG | Tier 3 | X | X | X | X |
| Antineoplastics | AFINITOR TAB 5MG | EVEROLIMUS TAB 5 MG | Tier 3 | X | X | X | X |
| Antineoplastics | AFINITOR TAB 7.5MG | EVEROLIMUS TAB 7.5 MG | Tier 3 | X | X | X | X |
| Antineoplastics | AFINITOR DIS TAB 2MG | EVEROLIMUS TAB FOR ORAL SUSP 2 MG | Tier 3 | X | X | X | X |
| Antineoplastics | AFINITOR DIS TAB 3MG | EVEROLIMUS TAB FOR ORAL SUSP 3 MG | Tier 3 | X | X | X | X |
| Antineoplastics | AFINITOR DIS TAB 5MG | EVEROLIMUS TAB FOR ORAL SUSP 5 MG | Tier 3 | X | X | X | X |
| Antineoplastics | ANASTROZOLE TAB 1MG | ANASTROZOLE TAB 1 MG | HCR | | | | |
| Antineoplastics | ARIMIDEX TAB 1MG | ANASTROZOLE TAB 1 MG | Tier 3 | | | X | |
| Antineoplastics | AROMASIN TAB 25MG | EXEMESTANE TAB 25 MG | Tier 3 | | | X | |
| Antineoplastics | BALVERSA TAB 3MG | ERDAFITINIB TAB 3 MG | Tier 3 | X | X | | X |
| Antineoplastics | BALVERSA TAB 4MG | ERDAFITINIB TAB 4 MG | Tier 3 | X | X | | X |
| Antineoplastics | BALVERSA TAB 5MG | ERDAFITINIB TAB 5 MG | Tier 3 | X | X | | X |
| Antineoplastics | BEXAROTENE CAP 75MG | BEXAROTENE CAP 75 MG | Tier 1 | | | | X |
| Antineoplastics | BEXAROTENE GEL 1% | BEXAROTENE GEL 1% | Tier 1 | | | | X |
| Antineoplastics | BICALUTAMIDE TAB 50MG | BICALUTAMIDE TAB 50 MG | Tier 1 | | | | |
| Antineoplastics | BRAFTOVI CAP 75MG | ENCORAFENIB CAP 75 MG | Tier 3 | X | X | X | X |
| Antineoplastics | CASODEX TAB 50MG | BICALUTAMIDE TAB 50 MG | Tier 3 | | | | |
| Antineoplastics | COPIKTRA CAP 15MG | DUVELISIB CAP 15 MG | Tier 3 | X | X | | X |
| Antineoplastics | COPIKTRA CAP 25MG | DUVELISIB CAP 25 MG | Tier 3 | X | X | | X |
| Antineoplastics | COTELLIC TAB 20MG | COBIMETINIB FUMARATE TAB 20 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|----------------------|--|------------|------|--------------|--------------|-----------|
| Antineoplastics | CYCLOPHOSPH CAP 25MG | CYCLOPHOSPHAMIDE CAP 25 MG | Tier 1 | | | | |
| Antineoplastics | CYCLOPHOSPH CAP 50MG | CYCLOPHOSPHAMIDE CAP 50 MG | Tier 1 | | | | |
| Antineoplastics | CYCLOPHOSPH TAB 25MG | CYCLOPHOSPHAMIDE TAB 25 MG | Tier 2 | | | | X |
| Antineoplastics | CYCLOPHOSPH TAB 50MG | CYCLOPHOSPHAMIDE TAB 50 MG | Tier 2 | | | | X |
| Antineoplastics | DAURISMO TAB 100MG | GLASDEGIB MALEATE TAB 100 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | DAURISMO TAB 25MG | GLASDEGIB MALEATE TAB 25 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | EMCYT CAP 140MG | ESTRAMUSTINE PHOSPHATE SODIUM CAP 140 MG | Tier 2 | | | | |
| Antineoplastics | ERIVEDGE CAP 150MG | VISMODEGIB CAP 150 MG | Tier 2 | X | X | | X |
| Antineoplastics | ERLEADA TAB 240MG | APALUTAMIDE TAB 240 MG | Tier 2 | X | X | | X |
| Antineoplastics | ERLEADA TAB 60MG | APALUTAMIDE TAB 60 MG | Tier 2 | X | X | | X |
| Antineoplastics | ETOPOSIDE CAP 50MG | ETOPOSIDE CAP 50 MG | Tier 1 | | | | X |
| Antineoplastics | EULEXIN CAP 125MG | FLUTAMIDE CAP 125 MG | Tier 3 | | | X | |
| Antineoplastics | EVEROLIMUS TAB 10MG | EVEROLIMUS TAB 10 MG | Tier 1 | X | X | | X |
| Antineoplastics | EVEROLIMUS TAB 2.5MG | EVEROLIMUS TAB 2.5 MG | Tier 1 | X | X | | X |
| Antineoplastics | EVEROLIMUS TAB 2MG | EVEROLIMUS TAB FOR ORAL SUSP 2 MG | Tier 1 | X | X | | X |
| Antineoplastics | EVEROLIMUS TAB 3MG | EVEROLIMUS TAB FOR ORAL SUSP 3 MG | Tier 1 | X | X | | X |
| Antineoplastics | EVEROLIMUS TAB 5MG | EVEROLIMUS TAB 5 MG | Tier 1 | X | X | | X |
| Antineoplastics | EVEROLIMUS TAB 5MG | EVEROLIMUS TAB FOR ORAL SUSP 5 MG | Tier 1 | X | X | | X |
| Antineoplastics | EVEROLIMUS TAB 7.5MG | EVEROLIMUS TAB 7.5 MG | Tier 1 | X | X | | X |
| Antineoplastics | EXEMESTANE TAB 25MG | EXEMESTANE TAB 25 MG | HCR | | | | |
| Antineoplastics | EXKIVITY CAP 40MG | MOBOCERTINIB SUCCINATE CAP 40 MG | Tier 3 | X | X | | X |
| Antineoplastics | FARESTON TAB 60MG | TOREMIFENE CITRATE TAB 60 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antineoplastics | FARYDAK CAP 10MG | PANOBINOSTAT LACTATE CAP 10 MG (BASE EQUIVALENT) | Tier 2 | | | | X |
| Antineoplastics | FARYDAK CAP 15MG | PANOBINOSTAT LACTATE CAP 15 MG (BASE EQUIVALENT) | Tier 2 | | | | X |
| Antineoplastics | FARYDAK CAP 20MG | PANOBINOSTAT LACTATE CAP 20 MG (BASE EQUIVALENT) | Tier 2 | | | | X |
| Antineoplastics | FEMARA TAB 2.5MG | LETROZOLE TAB 2.5 MG | Tier 3 | | | X | |
| Antineoplastics | FLUTAMIDE CAP 125MG | FLUTAMIDE CAP 125 MG | Tier 1 | | | | |
| Antineoplastics | GLEOSTINE CAP 100MG | LOMUSTINE CAP 100 MG | Tier 2 | | | | X |
| Antineoplastics | GLEOSTINE CAP 10MG | LOMUSTINE CAP 10 MG | Tier 2 | | | | X |
| Antineoplastics | GLEOSTINE CAP 40MG | LOMUSTINE CAP 40 MG | Tier 2 | | | | X |
| Antineoplastics | HYCAMTIN CAP 0.25MG | TOPOTECAN HCL CAP 0.25 MG (BASE EQUIV) | Tier 2 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Antineoplastics | HYCAMTIN CAP 1MG | TOPOTECAN HCL CAP 1 MG (BASE EQUIV) | Tier 2 | X | X | | X |
| Antineoplastics | HYDREA CAP 500MG | HYDROXYUREA CAP 500 MG | Tier 3 | | | | |
| Antineoplastics | HYDROXYUREA CAP 500MG | HYDROXYUREA CAP 500 MG | Tier 1 | | | | |
| Antineoplastics | IBRANCE CAP 100MG | PALBOCICLIB CAP 100 MG | Tier 2 | X | | | X |
| Antineoplastics | IBRANCE CAP 125MG | PALBOCICLIB CAP 125 MG | Tier 2 | X | | | X |
| Antineoplastics | IBRANCE CAP 75MG | PALBOCICLIB CAP 75 MG | Tier 2 | X | | | X |
| Antineoplastics | IBRANCE TAB 100MG | PALBOCICLIB TAB 100 MG | Tier 2 | X | X | | X |
| Antineoplastics | IBRANCE TAB 125MG | PALBOCICLIB TAB 125 MG | Tier 2 | X | X | | X |
| Antineoplastics | IBRANCE TAB 75MG | PALBOCICLIB TAB 75 MG | Tier 2 | X | X | | X |
| Antineoplastics | IDHIFA TAB 100MG | ENASIDENIB MESYLATE TAB 100 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | IDHIFA TAB 50MG | ENASIDENIB MESYLATE TAB 50 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | INQOVI TAB 35-100MG | DECITABINE-CEDAZURIDINE TAB 35-100 MG | Tier 3 | X | X | | X |
| Antineoplastics | INREBIC CAP 100MG | FEDRATINIB HCL CAP 100 MG | Tier 3 | X | X | X | X |
| Antineoplastics | JAKAFI TAB 10MG | RUXOLITINIB PHOSPHATE TAB 10 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | JAKAFI TAB 15MG | RUXOLITINIB PHOSPHATE TAB 15 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | JAKAFI TAB 20MG | RUXOLITINIB PHOSPHATE TAB 20 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | JAKAFI TAB 25MG | RUXOLITINIB PHOSPHATE TAB 25 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | JAKAFI TAB 5MG | RUXOLITINIB PHOSPHATE TAB 5 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | KISQALI TAB 200DOSE | RIBOCICLIB SUCCINATE TAB PACK 200 MG DAILY DOSE | Tier 3 | X | X | X | X |
| Antineoplastics | KISQALI TAB 400DOSE | RIBOCICLIB SUCCINATE TAB PACK 400 MG DAILY DOSE (200 MG TAB) | Tier 3 | X | X | X | X |
| Antineoplastics | KISQALI TAB 600DOSE | RIBOCICLIB SUCCINATE TAB PACK 600 MG DAILY DOSE (200 MG TAB) | Tier 3 | X | X | X | X |
| Antineoplastics | KISQALI 200 PAK FEMARA | RIBOCICLIB 200 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPK | Tier 3 | X | X | X | X |
| Antineoplastics | KISQALI 400 PAK FEMARA | RIBOCICLIB 400 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPK | Tier 3 | X | X | X | X |
| Antineoplastics | KISQALI 600 PAK FEMARA | RIBOCICLIB 600 MG DOSE (200 MG TAB) & LETROZOLE 2.5 MG TBPK | Tier 3 | X | X | X | X |
| Antineoplastics | KOSELUGO CAP 10MG | SELUMETINIB SULFATE CAP 10 MG | Tier 3 | X | X | | X |
| Antineoplastics | KOSELUGO CAP 25MG | SELUMETINIB SULFATE CAP 25 MG | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Antineoplastics | LENALIDOMIDE CAP 10MG | LENALIDOMIDE CAP 10 MG | Tier 1 | X | X | | X |
| Antineoplastics | LENALIDOMIDE CAP 15MG | LENALIDOMIDE CAP 15 MG | Tier 1 | X | X | | X |
| Antineoplastics | LENALIDOMIDE CAP 2.5MG | LENALIDOMIDE CAPS 2.5 MG | Tier 1 | X | X | | X |
| Antineoplastics | LENALIDOMIDE CAP 20MG | LENALIDOMIDE CAP 20 MG | Tier 1 | X | X | | X |
| Antineoplastics | LENALIDOMIDE CAP 25MG | LENALIDOMIDE CAP 25 MG | Tier 1 | X | X | | X |
| Antineoplastics | LENALIDOMIDE CAP 5MG | LENALIDOMIDE CAP 5 MG | Tier 1 | X | X | | X |
| Antineoplastics | LETROZOLE TAB 2.5MG | LETROZOLE TAB 2.5 MG | HCR | | | | |
| Antineoplastics | LEUCOVOR CA TAB 10MG | LEUCOVORIN CALCIUM TAB 10 MG | Tier 1 | | | | |
| Antineoplastics | LEUCOVOR CA TAB 15MG | LEUCOVORIN CALCIUM TAB 15 MG | Tier 1 | | | | |
| Antineoplastics | LEUCOVOR CA TAB 25MG | LEUCOVORIN CALCIUM TAB 25 MG | Tier 1 | | | | |
| Antineoplastics | LEUCOVOR CA TAB 5MG | LEUCOVORIN CALCIUM TAB 5 MG | Tier 1 | | | | |
| Antineoplastics | LEUKERAN TAB 2MG | CHLORAMBUCIL TAB 2 MG | Tier 2 | | | | |
| Antineoplastics | LONSURF TAB 15-6.14 | TRIFLURIDINE-TIPIRACIL TAB 15-6.14 MG | Tier 3 | X | X | | X |
| Antineoplastics | LONSURF TAB 20-8.19 | TRIFLURIDINE-TIPIRACIL TAB 20-8.19 MG | Tier 3 | X | X | | X |
| Antineoplastics | LYNPARZA TAB 100MG | OLAPARIB TAB 100 MG | Tier 2 | X | X | | X |
| Antineoplastics | LYNPARZA TAB 150MG | OLAPARIB TAB 150 MG | Tier 2 | X | X | | X |
| Antineoplastics | MATULANE CAP 50MG | PROCARBAZINE HCL CAP 50 MG | Tier 2 | | | | X |
| Antineoplastics | MEKINIST SOL 0.05/ML | TRAMETINIB DIMETHYL SULFOXIDE FOR SOLN 0.05 MG/ML (BASE EQ) | Tier 3 | | X | X | X |
| Antineoplastics | MEKINIST TAB 0.5MG | TRAMETINIB DIMETHYL SULFOXIDE TAB 0.5 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | MEKINIST TAB 2MG | TRAMETINIB DIMETHYL SULFOXIDE TAB 2 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | MEKTOVI TAB 15MG | BINIMETINIB TAB 15 MG | Tier 3 | X | X | X | X |
| Antineoplastics | MERCAPTOPUR TAB 50MG | MERCAPTOPURINE TAB 50 MG | Tier 1 | | | | |
| Antineoplastics | MESNEX TAB 400MG | MESNA TAB 400 MG | Tier 3 | | | | X |
| Antineoplastics | MYLERAN TAB 2MG | BUSULFAN TAB 2 MG | Tier 2 | | | | |
| Antineoplastics | NEXAVAR TAB 200MG | SORAFENIB TOSYLATE TAB 200 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | NILANDRON TAB 150MG | NILUTAMIDE TAB 150 MG | Tier 3 | | | X | X |
| Antineoplastics | NILUTAMIDE TAB 150MG | NILUTAMIDE TAB 150 MG | Tier 1 | | | X | X |
| Antineoplastics | NINLARO CAP 2.3MG | IXAZOMIB CITRATE CAP 2.3 MG (BASE EQUIVALENT) | Tier 2 | X | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-----------------------|--|------------|------|--------------|--------------|-----------|
| Antineoplastics | NINLARO CAP 3MG | IXAZOMIB CITRATE CAP 3 MG (BASE EQUIVALENT) | Tier 2 | X | | | X |
| Antineoplastics | NINLARO CAP 4MG | IXAZOMIB CITRATE CAP 4 MG (BASE EQUIVALENT) | Tier 2 | X | | | X |
| Antineoplastics | NUBEQA TAB 300MG | DAROLUTAMIDE TAB 300 MG | Tier 2 | X | X | | X |
| Antineoplastics | ODOMZO CAP 200MG | SONIDEGIB PHOSPHATE CAP 200 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | ONUREG TAB 200MG | AZACITIDINE TAB 200 MG | Tier 2 | X | X | | X |
| Antineoplastics | ONUREG TAB 300MG | AZACITIDINE TAB 300 MG | Tier 2 | X | X | | X |
| Antineoplastics | PANRETIN GEL 0.1% | ALITRETINOIN GEL 0.1% | Tier 3 | | | | |
| Antineoplastics | PEMAZYRE TAB 13.5MG | PEMIGATINIB TAB 13.5 MG | Tier 3 | X | X | | X |
| Antineoplastics | PEMAZYRE TAB 4.5MG | PEMIGATINIB TAB 4.5 MG | Tier 3 | X | X | | X |
| Antineoplastics | PEMAZYRE TAB 9MG | PEMIGATINIB TAB 9 MG | Tier 3 | X | X | | X |
| Antineoplastics | PIQRAY 200MG TAB DOSE | ALPELISIB TAB THERAPY PACK 200 MG DAILY DOSE | Tier 2 | X | X | | X |
| Antineoplastics | PIQRAY 250MG TAB DOSE | ALPELISIB TAB PACK 250 MG DAILY DOSE (200 MG & 50 MG TABS) | Tier 2 | X | X | | X |
| Antineoplastics | PIQRAY 300MG TAB DOSE | ALPELISIB TAB PACK 300 MG DAILY DOSE (2X150 MG TAB) | Tier 2 | X | X | | X |
| Antineoplastics | POMALYST CAP 1MG | POMALIDOMIDE CAP 1 MG | Tier 3 | X | | | X |
| Antineoplastics | POMALYST CAP 2MG | POMALIDOMIDE CAP 2 MG | Tier 3 | X | | | X |
| Antineoplastics | POMALYST CAP 3MG | POMALIDOMIDE CAP 3 MG | Tier 3 | X | | | X |
| Antineoplastics | POMALYST CAP 4MG | POMALIDOMIDE CAP 4 MG | Tier 3 | X | | | X |
| Antineoplastics | PURIXAN SUS 20MG/ML | MERCAPTOPYRINE SUSP 2000 MG/100ML (20 MG/ML) | Tier 3 | | | | X |
| Antineoplastics | REVLIMID CAP 10MG | LENALIDOMIDE CAP 10 MG | Tier 2 | X | X | | X |
| Antineoplastics | REVLIMID CAP 15MG | LENALIDOMIDE CAP 15 MG | Tier 2 | X | X | | X |
| Antineoplastics | REVLIMID CAP 2.5MG | LENALIDOMIDE CAPS 2.5 MG | Tier 2 | X | X | | X |
| Antineoplastics | REVLIMID CAP 20MG | LENALIDOMIDE CAP 20 MG | Tier 2 | X | X | | X |
| Antineoplastics | REVLIMID CAP 25MG | LENALIDOMIDE CAP 25 MG | Tier 2 | X | X | | X |
| Antineoplastics | REVLIMID CAP 5MG | LENALIDOMIDE CAP 5 MG | Tier 2 | X | X | | X |
| Antineoplastics | ROZLYTREK CAP 100MG | ENTRECTINIB CAP 100 MG | Tier 2 | X | X | | X |
| Antineoplastics | ROZLYTREK CAP 200MG | ENTRECTINIB CAP 200 MG | Tier 2 | X | X | | X |
| Antineoplastics | ROZLYTREK PAK 50MG | ENTRECTINIB PELLETT PACK 50 MG | Tier 2 | | X | | X |
| Antineoplastics | RUBRACA TAB 200MG | RUCAPARIB CAMSYLATE TAB 200 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | RUBRACA TAB 250MG | RUCAPARIB CAMSYLATE TAB 250 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | RUBRACA TAB 300MG | RUCAPARIB CAMSYLATE TAB 300 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | RYDAPT CAP 25MG | MIDOSTAURIN CAP 25 MG | Tier 2 | X | X | | X |
| Antineoplastics | SOLTAMOX SOL 10MG/5ML | TAMOXIFEN CITRATE ORAL SOLN 10 MG/5ML (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antineoplastics | SORAFENIB TAB 200MG | SORAFENIB TOSYLATE TAB 200 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|----------------------|--|------------|------|--------------|--------------|-----------|
| Antineoplastics | STIVARGA TAB 40MG | REGORAFENIB TAB 40 MG | Tier 2 | X | X | | X |
| Antineoplastics | SUNITINIB CAP 12.5MG | SUNITINIB MALATE CAP 12.5 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Antineoplastics | SUNITINIB CAP 25MG | SUNITINIB MALATE CAP 25 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Antineoplastics | SUNITINIB CAP 37.5MG | SUNITINIB MALATE CAP 37.5 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Antineoplastics | SUNITINIB CAP 50MG | SUNITINIB MALATE CAP 50 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Antineoplastics | SUTENT CAP 12.5MG | SUNITINIB MALATE CAP 12.5 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | SUTENT CAP 25MG | SUNITINIB MALATE CAP 25 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | SUTENT CAP 37.5MG | SUNITINIB MALATE CAP 37.5 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | SUTENT CAP 50MG | SUNITINIB MALATE CAP 50 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | SYNRIBO INJ 3.5MG | OMACETAXINE MEPESUCCINATE FOR INJ 3.5 MG | Tier 2 | X | X | | X |
| Antineoplastics | TABLOID TAB 40MG | THIOGUANINE TAB 40 MG | Tier 2 | | | | X |
| Antineoplastics | TAFINLAR CAP 50MG | DABRAFENIB MESYLATE CAP 50 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | TAFINLAR CAP 75MG | DABRAFENIB MESYLATE CAP 75 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | TAFINLAR TAB 10MG | DABRAFENIB MESYLATE TAB FOR ORAL SUSP 10 MG (BASE EQUIV) | Tier 3 | | X | X | X |
| Antineoplastics | TALZENNA CAP 0.1MG | TALAZOPARIB TOSYLATE CAP 0.1 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | TALZENNA CAP 0.25MG | TALAZOPARIB TOSYLATE CAP 0.25 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | TALZENNA CAP 0.35MG | TALAZOPARIB TOSYLATE CAP 0.35 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | TALZENNA CAP 0.5MG | TALAZOPARIB TOSYLATE CAP 0.5 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | TALZENNA CAP 0.75MG | TALAZOPARIB TOSYLATE CAP 0.75 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | TALZENNA CAP 1MG | TALAZOPARIB TOSYLATE CAP 1 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Antineoplastics | TAMOXIFEN TAB 10MG | TAMOXIFEN CITRATE TAB 10 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antineoplastics | TAMOXIFEN TAB 20MG | TAMOXIFEN CITRATE TAB 20 MG (BASE EQUIVALENT) | HCR | | | | |
| Antineoplastics | TARGRETIN CAP 75MG | BEXAROTENE CAP 75 MG | Tier 3 | | | X | X |
| Antineoplastics | TARGRETIN GEL 1% | BEXAROTENE GEL 1% | Tier 3 | | | X | X |
| Antineoplastics | TAZVERIK TAB 200MG | TAZEMETOSTAT HBR TAB 200 MG | Tier 3 | X | X | | X |
| Antineoplastics | TEMODAR CAP 100MG | TEMOZOLOMIDE CAP 100 MG | Tier 3 | X | | X | X |
| Antineoplastics | TEMODAR CAP 140MG | TEMOZOLOMIDE CAP 140 MG | Tier 3 | X | | X | X |
| Antineoplastics | TEMODAR CAP 180MG | TEMOZOLOMIDE CAP 180 MG | Tier 3 | X | | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Antineoplastics | TEMODAR CAP 250MG | TEMOZOLOMIDE CAP 250 MG | Tier 3 | X | | X | X |
| Antineoplastics | TEMOZOLOMIDE CAP 100MG | TEMOZOLOMIDE CAP 100 MG | Tier 1 | X | | | X |
| Antineoplastics | TEMOZOLOMIDE CAP 140MG | TEMOZOLOMIDE CAP 140 MG | Tier 1 | X | | | X |
| Antineoplastics | TEMOZOLOMIDE CAP 180MG | TEMOZOLOMIDE CAP 180 MG | Tier 1 | X | | | X |
| Antineoplastics | TEMOZOLOMIDE CAP 20MG | TEMOZOLOMIDE CAP 20 MG | Tier 1 | X | | | X |
| Antineoplastics | TEMOZOLOMIDE CAP 250MG | TEMOZOLOMIDE CAP 250 MG | Tier 1 | X | | | X |
| Antineoplastics | TEMOZOLOMIDE CAP 5MG | TEMOZOLOMIDE CAP 5 MG | Tier 1 | X | | | X |
| Antineoplastics | TEPMETKO TAB 225MG | TEPOTINIB HCL TAB 225 MG | Tier 3 | X | X | | X |
| Antineoplastics | THALOMID CAP 100MG | THALIDOMIDE CAP 100 MG | Tier 2 | X | | | X |
| Antineoplastics | THALOMID CAP 150MG | THALIDOMIDE CAP 150 MG | Tier 2 | X | | | X |
| Antineoplastics | THALOMID CAP 200MG | THALIDOMIDE CAP 200 MG | Tier 2 | X | | | X |
| Antineoplastics | THALOMID CAP 50MG | THALIDOMIDE CAP 50 MG | Tier 2 | X | | | X |
| Antineoplastics | TIBSOVO TAB 250MG | IVOSIDENIB TAB 250 MG | Tier 2 | X | X | | X |
| Antineoplastics | TOREMIFENE TAB 60MG | TOREMIFENE CITRATE TAB 60 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antineoplastics | TRETINOIN CAP 10MG | TRETINOIN CAP 10 MG | Tier 1 | | | | X |
| Antineoplastics | VALCHLOR GEL 0.016% | MECHLORETHAMINE HCL GEL 0.016% (BASE EQUIVALENT) | Tier 2 | X | | | X |
| Antineoplastics | VANFLYTA TAB 17.7MG | QUIZARTINIB DIHYDROCHLORIDE TAB 17.7 MG | Tier 3 | X | X | | X |
| Antineoplastics | VANFLYTA TAB 26.5MG | QUIZARTINIB DIHYDROCHLORIDE TAB 26.5 MG | Tier 3 | X | X | | X |
| Antineoplastics | VENCLEXTA TAB 100MG | VENETOCLAX TAB 100 MG | Tier 2 | X | X | | X |
| Antineoplastics | VENCLEXTA TAB 10MG | VENETOCLAX TAB 10 MG | Tier 2 | X | X | | X |
| Antineoplastics | VENCLEXTA TAB 50MG | VENETOCLAX TAB 50 MG | Tier 2 | X | X | | X |
| Antineoplastics | VENCLEXTA TAB START PK | VENETOCLAX TAB THERAPY STARTER PACK 10 & 50 & 100 MG | Tier 2 | X | X | | X |
| Antineoplastics | VERZENIO TAB 100MG | ABEMACICLIB TAB 100 MG | Tier 2 | X | X | | X |
| Antineoplastics | VERZENIO TAB 150MG | ABEMACICLIB TAB 150 MG | Tier 2 | X | X | | X |
| Antineoplastics | VERZENIO TAB 200MG | ABEMACICLIB TAB 200 MG | Tier 2 | X | X | | X |
| Antineoplastics | VERZENIO TAB 50MG | ABEMACICLIB TAB 50 MG | Tier 2 | X | X | | X |
| Antineoplastics | VISTOGARD PAK 10GM | URIDINE TRIACETATE ORAL GRANULES PACKET 10 GM | Tier 2 | X | | | |
| Antineoplastics | VITRAKVI CAP 100MG | LAROTRECTINIB SULFATE CAP 100 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | VITRAKVI CAP 25MG | LAROTRECTINIB SULFATE CAP 25 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | VITRAKVI SOL 20MG/ML | LAROTRECTINIB SULFATE ORAL SOLN 20 MG/ML (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | VONJO CAP 100MG | PACRITINIB CITRATE CAP 100 MG | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Antineoplastics | XPOVIO PAK 40MG | SELINEXOR TAB THERAPY PACK 40 MG (80 MG ONCE WEEKLY) | Tier 3 | X | X | | X |
| Antineoplastics | XPOVIO PAK 40MG | SELINEXOR TAB THERAPY PACK 40 MG (40 MG TWICE WEEKLY) | Tier 3 | X | X | | X |
| Antineoplastics | XPOVIO PAK 40MG | SELINEXOR TAB THERAPY PACK 40 MG (40 MG ONCE WEEKLY) | Tier 3 | X | X | | X |
| Antineoplastics | XPOVIO PAK 50MG | SELINEXOR TAB THERAPY PACK 50 MG (100 MG ONCE WEEKLY) | Tier 3 | X | X | | X |
| Antineoplastics | XPOVIO PAK 60MG | SELINEXOR TAB THERAPY PACK 20 MG (60 MG TWICE WEEKLY) | Tier 3 | X | X | | X |
| Antineoplastics | XPOVIO PAK 60MG | SELINEXOR TAB THERAPY PACK 60 MG (60 MG ONCE WEEKLY) | Tier 3 | X | X | | X |
| Antineoplastics | XPOVIO PAK 80MG | SELINEXOR TAB THERAPY PACK 20 MG (80 MG TWICE WEEKLY) | Tier 3 | X | X | | X |
| Antineoplastics | XTANDI CAP 40MG | ENZALUTAMIDE CAP 40 MG | Tier 2 | X | X | | X |
| Antineoplastics | XTANDI TAB 40MG | ENZALUTAMIDE TAB 40 MG | Tier 2 | X | X | | X |
| Antineoplastics | XTANDI TAB 80MG | ENZALUTAMIDE TAB 80 MG | Tier 2 | X | X | | X |
| Antineoplastics | ZEJULA CAP 100MG | NIRAPARIB TOSYLATE CAP 100 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | ZEJULA TAB 100MG | NIRAPARIB TOSYLATE TAB 100 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | ZEJULA TAB 200MG | NIRAPARIB TOSYLATE TAB 200 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | ZEJULA TAB 300MG | NIRAPARIB TOSYLATE TAB 300 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Antineoplastics | ZELBORAF TAB 240MG | VEMURAFENIB TAB 240 MG | Tier 2 | X | X | | X |
| Antineoplastics | ZOLINZA CAP 100MG | VORINOSTAT CAP 100 MG | Tier 2 | X | X | | X |
| Antineoplastics | ZYDELIG TAB 100MG | IDELALISIB TAB 100 MG | Tier 3 | X | X | | X |
| Antineoplastics | ZYDELIG TAB 150MG | IDELALISIB TAB 150 MG | Tier 3 | X | X | | X |
| Antineoplastics | ZYTIGA TAB 250MG | ABIRATERONE ACETATE TAB 250 MG | Tier 3 | X | X | X | X |
| Antineoplastics | ZYTIGA TAB 500MG | ABIRATERONE ACETATE TAB 500 MG | Tier 3 | X | X | X | X |
| Antineoplastics - Drugs to Treat Cancer | ALKERAN TAB 2MG | MELPHALAN TAB 2 MG | Tier 3 | | | | X |
| Antineoplastics - Drugs to Treat Cancer | BESREMI SOL 500MCG | ROPEGINTERFERON ALFA-2B-NJFT SOLN PREFILLED SYR 500 MCG/ML | Tier 3 | X | X | X | X |
| Antineoplastics - Drugs to Treat Cancer | CAPECITABINE TAB 150MG | CAPECITABINE TAB 150 MG | Tier 1 | | | | X |
| Antineoplastics - Drugs to Treat Cancer | CAPECITABINE TAB 500MG | CAPECITABINE TAB 500 MG | Tier 1 | | | | X |
| Antineoplastics - Drugs to Treat Cancer | CISPLATIN POW | CISPLATIN (BULK) POWDER | Tier 3 | | | | X |
| Antineoplastics - Drugs to Treat Cancer | MELPHALAN TAB 2MG | MELPHALAN TAB 2 MG | Tier 1 | | | | X |
| Antineoplastics - Drugs to Treat Cancer | SCEMBLIX TAB 20MG | ASCIMINIB HCL TAB 20 MG | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antineoplastics - Drugs to Treat Cancer | SCSEMBLIX TAB 40MG | ASCIMINIB HCL TAB 40 MG | Tier 3 | X | X | | X |
| Antineoplastics - Drugs to Treat Cancer | WELIREG TAB 40MG | BELZUTIFAN TAB 40 MG | Tier 3 | X | X | | X |
| Antineoplastics - Drugs to Treat Cancer | XELODA TAB 150MG | CAPECITABINE TAB 150 MG | Tier 3 | | | X | X |
| Antineoplastics - Drugs to Treat Cancer | XELODA TAB 500MG | CAPECITABINE TAB 500 MG | Tier 3 | | | X | X |
| Antineoplastics, Other - Chemotherapy Agents | LUMAKRAS TAB 120MG | SOTORASIB TAB 120 MG | Tier 3 | X | X | | X |
| Antineoplastics, Other - Chemotherapy Agents | LUMAKRAS TAB 320MG | SOTORASIB TAB 320 MG | Tier 3 | X | X | | X |
| Antineoplastics, Other - Chemotherapy Agents | ZYKADIA TAB 150MG | CERITINIB TAB 150 MG | Tier 3 | X | X | X | X |
| Antiparasitics | ALBENDAZOLE TAB 200MG | ALBENDAZOLE TAB 200 MG | Tier 1 | | X | | |
| Antiparasitics | ALBENZA TAB 200MG | ALBENDAZOLE TAB 200 MG | Tier 3 | | X | | |
| Antiparasitics | ALINIA SUS 100/5ML | NITAZOXANIDE FOR SUSP 100 MG/5ML | Tier 2 | | | | |
| Antiparasitics | ALINIA TAB 500MG | NITAZOXANIDE TAB 500 MG | Tier 3 | | | X | |
| Antiparasitics | ARAKODA TAB 100MG | TAFENOQUINE SUCCINATE TAB 100 MG (BASE EQUIVALENT) | Tier 3 | | X | | |
| Antiparasitics | ATOVAQ/PROGU TAB 250-100 | ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG | Tier 1 | | | | |
| Antiparasitics | ATOVAQ/PROGU TAB 62.5-25 | ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG | Tier 1 | | | | |
| Antiparasitics | ATOVAQUONE SUS 750/5ML | ATOVAQUONE SUSP 750 MG/5ML | Tier 1 | | | | |
| Antiparasitics | BENZNIDAZOLE TAB 100MG | BENZNIDAZOLE TAB 100 MG | Tier 2 | X | X | | |
| Antiparasitics | BENZNIDAZOLE TAB 12.5MG | BENZNIDAZOLE TAB 12.5 MG | Tier 2 | X | X | | |
| Antiparasitics | BILTRICIDE TAB 600MG | PRAZIQUANTEL TAB 600 MG | Tier 3 | | | | |
| Antiparasitics | CHLOROQUINE TAB 250MG | CHLOROQUINE PHOSPHATE TAB 250 MG | Tier 1 | | | | |
| Antiparasitics | CHLOROQUINE TAB 500MG | CHLOROQUINE PHOSPHATE TAB 500 MG | Tier 1 | | | | |
| Antiparasitics | COARTEM TAB 20-120MG | ARTEMETHER-LUMEFANTRINE TAB 20-120 MG | Tier 2 | | | | |
| Antiparasitics | DARAPRIM TAB 25MG | PYRIMETHAMINE TAB 25 MG | Tier 3 | X | | | X |
| Antiparasitics | EMVERM CHW 100MG | MEBENDAZOLE CHEW TAB 100 MG | Tier 3 | | | | |
| Antiparasitics | HYDROXYCHLOR TAB 100MG | HYDROXYCHLOROQUINE SULFATE TAB 100 MG | Tier 1 | | | | |
| Antiparasitics | HYDROXYCHLOR TAB 200MG | HYDROXYCHLOROQUINE SULFATE TAB 200 MG | Tier 1 | | | | |
| Antiparasitics | HYDROXYCHLOR TAB 300MG | HYDROXYCHLOROQUINE SULFATE TAB 300 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-------------------------|--|------------|------|--------------|--------------|-----------|
| Antiparasitics | HYDROXYCHLOR TAB 400MG | HYDROXYCHLOROQUINE SULFATE TAB 400 MG | Tier 1 | | | | |
| Antiparasitics | IMPAVIDO CAP 50MG | MILTEFOSINE CAP 50 MG | Tier 2 | X | X | | |
| Antiparasitics | IVERMECTIN TAB 3MG | IVERMECTIN TAB 3 MG | Tier 1 | X | X | | |
| Antiparasitics | KRINTAFEL TAB 150MG | TAFENOQUINE SUCCINATE TAB 150 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiparasitics | MALARONE TAB 250-100 | ATOVAQUONE-PROGUANIL HCL TAB 250-100 MG | Tier 3 | | | | |
| Antiparasitics | MALARONE TAB 62.5-25 | ATOVAQUONE-PROGUANIL HCL TAB 62.5-25 MG | Tier 3 | | | | |
| Antiparasitics | MEFLOQUINE TAB 250MG | MEFLOQUINE HCL TAB 250 MG | Tier 1 | | | | |
| Antiparasitics | MEPRON SUS | ATOVAQUONE SUSP 750 MG/5ML | Tier 3 | | | X | |
| Antiparasitics | NEBUPENT INH 300MG | PENTAMIDINE ISETHIONATE FOR NEBULIZATION SOLN 300 MG | Tier 3 | | | | |
| Antiparasitics | NITAZOXANIDE TAB 500MG | NITAZOXANIDE TAB 500 MG | Tier 1 | | | | |
| Antiparasitics | PENTAMIDINE INH 300MG | PENTAMIDINE ISETHIONATE FOR NEBULIZATION SOLN 300 MG | Tier 1 | | | | |
| Antiparasitics | PLAQUENIL TAB 200MG | HYDROXYCHLOROQUINE SULFATE TAB 200 MG | Tier 3 | | | X | |
| Antiparasitics | PRAZIQUANTEL TAB 600MG | PRAZIQUANTEL TAB 600 MG | Tier 1 | | | | |
| Antiparasitics | PRIMAQUINE TAB 26.3MG | PRIMAQUINE PHOSPHATE TAB 26.3 MG (15 MG BASE) | Tier 1 | | | | |
| Antiparasitics | PYRIMETHAMIN TAB 25MG | PYRIMETHAMINE TAB 25 MG | Tier 1 | X | | | X |
| Antiparasitics | QUALAQUIN CAP 324MG | QUININE SULFATE CAP 324 MG | Tier 3 | | | | |
| Antiparasitics | QUININE SULF CAP 324MG | QUININE SULFATE CAP 324 MG | Tier 1 | | | | |
| Antiparasitics | SOVUNA TAB 200MG | HYDROXYCHLOROQUINE SULFATE TAB 200 MG | Tier 3 | | | | |
| Antiparasitics | SOVUNA TAB 300MG | HYDROXYCHLOROQUINE SULFATE TAB 300 MG | Tier 3 | | | | |
| Antiparasitics | STROMEKTOL TAB 3MG | IVERMECTIN TAB 3 MG | Tier 3 | X | X | | |
| Antiparasitics - Drugs to Treat Parasitic Infections | EGATEN TAB 250MG | TRICLABENDAZOLE TAB 250 MG | Tier 3 | | | | |
| Antiparasitics - Drugs to Treat Parasitic Infections | LAMPIT TAB 120MG | NIFURTIMOX TAB 120 MG | Tier 3 | X | X | | |
| Antiparasitics - Drugs to Treat Parasitic Infections | LAMPIT TAB 30MG | NIFURTIMOX TAB 30 MG | Tier 3 | X | X | | |
| Antiparasitics - Drugs to Treat Parasitic Infections | SULF LIME SOL | SULFURATED LIME SOLUTION | Tier 1 | | | | |
| Antiparkinson Agents | AMANTADINE CAP 100MG | AMANTADINE HCL CAP 100 MG | Tier 1 | | | | |
| Antiparkinson Agents | AMANTADINE SOL 100/10ML | AMANTADINE HCL SOLN 50 MG/5ML | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|----------------------------|--|------------|------|--------------|--------------|-----------|
| Antiparkinson Agents | AMANTADINE SOL 50MG/5ML | AMANTADINE HCL SOLN 50 MG/5ML | Tier 1 | | | | |
| Antiparkinson Agents | AMANTADINE TAB 100MG | AMANTADINE HCL TAB 100 MG | Tier 1 | | | | |
| Antiparkinson Agents | APOKYN INJ 10MG/ML | APOMORPHINE HCL SOLN CARTRIDGE 30 MG/3ML | Tier 3 | X | | | X |
| Antiparkinson Agents | APOMORPHINE INJ 30MG/3ML | APOMORPHINE HCL SOLN CARTRIDGE 30 MG/3ML | Tier 1 | X | | | X |
| Antiparkinson Agents | AZILECT TAB 0.5MG | RASAGILINE MESYLATE TAB 0.5 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antiparkinson Agents | AZILECT TAB 1MG | RASAGILINE MESYLATE TAB 1 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antiparkinson Agents | BENZTROPINE TAB 0.5MG | BENZTROPINE MESYLATE TAB 0.5 MG | Tier 1 | | | | |
| Antiparkinson Agents | BENZTROPINE TAB 1MG | BENZTROPINE MESYLATE TAB 1 MG | Tier 1 | | | | |
| Antiparkinson Agents | BENZTROPINE TAB 2MG | BENZTROPINE MESYLATE TAB 2 MG | Tier 1 | | | | |
| Antiparkinson Agents | BROMOCRIPTIN CAP 5MG | BROMOCRIPTINE MESYLATE CAP 5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiparkinson Agents | BROMOCRIPTIN TAB 2.5MG | BROMOCRIPTINE MESYLATE TAB 2.5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO TAB 10-100MG | CARBIDOPA & LEVODOPA TAB 10-100 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO TAB 10-100MG | CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 10-100 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO TAB 25-100MG | CARBIDOPA & LEVODOPA TAB 25-100 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO TAB 25-100MG | CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 25-100 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO TAB 25-250MG | CARBIDOPA & LEVODOPA TAB 25-250 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO TAB 25-250MG | CARBIDOPA & LEVODOPA ORALLY DISINTEGRATING TAB 25-250 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO 50 TAB / ENTACAP | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 12.5-50-200 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO 75 TAB / ENTACAP | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 18.75-75-200 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO ER TAB 25-100MG | CARBIDOPA & LEVODOPA TAB ER 25-100 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO ER TAB 50-200MG | CARBIDOPA & LEVODOPA TAB ER 50-200 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|----------------------------|---|------------|------|--------------|--------------|-----------|
| Antiparkinson Agents | CARB/LEVO100 TAB / ENTACAP | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 25-100-200 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO125 TAB / ENTACAP | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 31.25-125-200 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO150 TAB / ENTACAP | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 37.5-150-200 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARB/LEVO200 TAB / ENTACAP | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 50-200-200 MG | Tier 1 | | | | |
| Antiparkinson Agents | CARBIDOPA TAB 25MG | CARBIDOPA TAB 25 MG | Tier 1 | | | | |
| Antiparkinson Agents | COMTAN TAB 200MG | ENTACAPONE TAB 200 MG | Tier 3 | | | | |
| Antiparkinson Agents | DHIVY TAB 25-100MG | CARBIDOPA & LEVODOPA TAB 25-100 MG | Tier 3 | | | X | |
| Antiparkinson Agents | DUOPA SUS 4.63-20 | CARBIDOPA-LEVODOPA ENTERAL SUSP 4.63-20 MG/ML | Tier 3 | | | | |
| Antiparkinson Agents | ENTACAPONE TAB 200MG | ENTACAPONE TAB 200 MG | Tier 1 | | | | |
| Antiparkinson Agents | GOCOVRI CAP 137MG | AMANTADINE HCL CAP ER 24HR 137 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antiparkinson Agents | GOCOVRI CAP 68.5MG | AMANTADINE HCL CAP ER 24HR 68.5 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Antiparkinson Agents | INBRIJA CAP 42MG | LEVODOPA INHAL POWDER CAP 42 MG | Tier 3 | X | X | | X |
| Antiparkinson Agents | KYNMOBI KIT TITRATIO | APO MORPHINE HCL FILM 10/15/20/25/30 MG TITRATION KIT | Tier 3 | | | | X |
| Antiparkinson Agents | KYNMOBI MIS 10MG | APO MORPHINE HYDROCHLORIDE FILM 10 MG | Tier 3 | | | | X |
| Antiparkinson Agents | KYNMOBI MIS 15MG | APO MORPHINE HYDROCHLORIDE FILM 15 MG | Tier 3 | | | | X |
| Antiparkinson Agents | KYNMOBI MIS 20MG | APO MORPHINE HYDROCHLORIDE FILM 20 MG | Tier 3 | | | | X |
| Antiparkinson Agents | KYNMOBI MIS 25MG | APO MORPHINE HYDROCHLORIDE FILM 25 MG | Tier 3 | | | | X |
| Antiparkinson Agents | KYNMOBI MIS 30MG | APO MORPHINE HYDROCHLORIDE FILM 30 MG | Tier 3 | | | | X |
| Antiparkinson Agents | LODOSYN TAB 25MG | CARBIDOPA TAB 25 MG | Tier 3 | | | X | |
| Antiparkinson Agents | MIRAPEX ER TAB 0.375MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 0.375 MG | Tier 3 | | | X | |
| Antiparkinson Agents | MIRAPEX ER TAB 0.75MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 0.75 MG | Tier 3 | | | X | |
| Antiparkinson Agents | MIRAPEX ER TAB 1.5MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 1.5 MG | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antiparkinson Agents | MIRAPEX ER TAB 2.25MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 2.25 MG | Tier 3 | | | X | |
| Antiparkinson Agents | MIRAPEX ER TAB 3.75MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 3.75 MG | Tier 3 | | | X | |
| Antiparkinson Agents | MIRAPEX ER TAB 3MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 3 MG | Tier 3 | | | X | |
| Antiparkinson Agents | MIRAPEX ER TAB 4.5MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 4.5 MG | Tier 3 | | | X | |
| Antiparkinson Agents | NEUPRO DIS 1MG/24HR | ROTIGOTINE TD PATCH 24HR 1 MG/24HR | Tier 3 | | | | |
| Antiparkinson Agents | NEUPRO DIS 2MG/24HR | ROTIGOTINE TD PATCH 24HR 2 MG/24HR | Tier 3 | | | | |
| Antiparkinson Agents | NEUPRO DIS 3MG/24HR | ROTIGOTINE TD PATCH 24HR 3 MG/24HR | Tier 3 | | | | |
| Antiparkinson Agents | NEUPRO DIS 4MG/24HR | ROTIGOTINE TD PATCH 24HR 4 MG/24HR | Tier 3 | | | | |
| Antiparkinson Agents | NEUPRO DIS 6MG/24HR | ROTIGOTINE TD PATCH 24HR 6 MG/24HR | Tier 3 | | | | |
| Antiparkinson Agents | NEUPRO DIS 8MG/24HR | ROTIGOTINE TD PATCH 24HR 8 MG/24HR | Tier 3 | | | | |
| Antiparkinson Agents | NOURIANZ TAB 20MG | ISTRADEFYLLINE TAB 20 MG | Tier 3 | | X | | |
| Antiparkinson Agents | NOURIANZ TAB 40MG | ISTRADEFYLLINE TAB 40 MG | Tier 3 | | X | | |
| Antiparkinson Agents | ONGENTYS CAP 25MG | OPICAPONE CAP 25 MG | Tier 3 | | X | | |
| Antiparkinson Agents | ONGENTYS CAP 50MG | OPICAPONE CAP 50 MG | Tier 3 | | X | | |
| Antiparkinson Agents | OSMOLEX ER TAB | AMANTADINE HCL TAB ER 24HR PAK 129 MG & 193 MG (322 MG DOSE) | Tier 3 | | | X | |
| Antiparkinson Agents | OSMOLEX ER TAB 129MG | AMANTADINE HCL TAB ER 24HR 129 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antiparkinson Agents | OSMOLEX ER TAB 193MG | AMANTADINE HCL TAB ER 24HR 193 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antiparkinson Agents | PARLODEL CAP 5MG | BROMOCRIPTINE MESYLATE CAP 5 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antiparkinson Agents | PARLODEL TAB 2.5MG | BROMOCRIPTINE MESYLATE TAB 2.5 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 0.125MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.125 MG | Tier 1 | | | | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 0.25MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.25 MG | Tier 1 | | | | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 0.375 ER | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 0.375 MG | Tier 1 | | | X | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 0.5MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.5 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antiparkinson Agents | PRAMIPEXOLE TAB 0.75 ER | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 0.75 MG | Tier 1 | | | X | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 0.75MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB 0.75 MG | Tier 1 | | | | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 1.5MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB 1.5 MG | Tier 1 | | | | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 1.5MG ER | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 1.5 MG | Tier 1 | | | X | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 1MG | PRAMIPEXOLE DIHYDROCHLORIDE TAB 1 MG | Tier 1 | | | | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 2.25 ER | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 2.25 MG | Tier 1 | | | X | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 3.75 ER | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 3.75 MG | Tier 1 | | | X | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 3MG ER | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 3 MG | Tier 1 | | | X | |
| Antiparkinson Agents | PRAMIPEXOLE TAB 4.5MG ER | PRAMIPEXOLE DIHYDROCHLORIDE TAB ER 24HR 4.5 MG | Tier 1 | | | X | |
| Antiparkinson Agents | RASAGILINE TAB 0.5MG | RASAGILINE MESYLATE TAB 0.5 MG (BASE EQUIV) | Tier 1 | | | | |
| Antiparkinson Agents | RASAGILINE TAB 1MG | RASAGILINE MESYLATE TAB 1 MG (BASE EQUIV) | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 0.25MG | ROPINIROLE HYDROCHLORIDE TAB 0.25 MG | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 0.5MG | ROPINIROLE HYDROCHLORIDE TAB 0.5 MG | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 12MG ER | ROPINIROLE HYDROCHLORIDE TAB ER 24HR 12 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 1MG | ROPINIROLE HYDROCHLORIDE TAB 1 MG | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 2MG | ROPINIROLE HYDROCHLORIDE TAB 2 MG | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 2MG ER | ROPINIROLE HYDROCHLORIDE TAB ER 24HR 2 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 3MG | ROPINIROLE HYDROCHLORIDE TAB 3 MG | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 4MG | ROPINIROLE HYDROCHLORIDE TAB 4 MG | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 4MG ER | ROPINIROLE HYDROCHLORIDE TAB ER 24HR 4 MG (BASE EQUIVALENT) | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Antiparkinson Agents | ROPINIROLE TAB 5MG | ROPINIROLE HYDROCHLORIDE TAB 5 MG | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 6MG ER | ROPINIROLE HYDROCHLORIDE TAB ER 24HR 6 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiparkinson Agents | ROPINIROLE TAB 8MG ER | ROPINIROLE HYDROCHLORIDE TAB ER 24HR 8 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antiparkinson Agents | RYTARY CAP 145MG | CARBIDOPA & LEVODOPA CAP ER 36.25-145 MG | Tier 3 | | | X | |
| Antiparkinson Agents | RYTARY CAP 195MG | CARBIDOPA & LEVODOPA CAP ER 48.75-195 MG | Tier 3 | | | X | |
| Antiparkinson Agents | RYTARY CAP 245MG | CARBIDOPA & LEVODOPA CAP ER 61.25-245 MG | Tier 3 | | | X | |
| Antiparkinson Agents | RYTARY CAP 95MG | CARBIDOPA & LEVODOPA CAP ER 23.75-95 MG | Tier 3 | | | X | |
| Antiparkinson Agents | SELEGILINE CAP 5MG | SELEGILINE HCL CAP 5 MG | Tier 1 | | | | |
| Antiparkinson Agents | SELEGILINE TAB 5MG | SELEGILINE HCL TAB 5 MG | Tier 1 | | | | |
| Antiparkinson Agents | SINEMET TAB 10-100MG | CARBIDOPA & LEVODOPA TAB 10-100 MG | Tier 3 | | | | |
| Antiparkinson Agents | SINEMET TAB 25-100MG | CARBIDOPA & LEVODOPA TAB 25-100 MG | Tier 3 | | | | |
| Antiparkinson Agents | STALEVO 100 TAB | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 25-100-200 MG | Tier 3 | | | | |
| Antiparkinson Agents | STALEVO 125 TAB | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 31.25-125-200 MG | Tier 3 | | | | |
| Antiparkinson Agents | STALEVO 150 TAB | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 37.5-150-200 MG | Tier 3 | | | | |
| Antiparkinson Agents | STALEVO 200 TAB | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 50-200-200 MG | Tier 3 | | | | |
| Antiparkinson Agents | STALEVO 50 TAB | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 12.5-50-200 MG | Tier 3 | | | | |
| Antiparkinson Agents | STALEVO 75 TAB | CARBIDOPA-LEVODOPA-ENTACAPONE TABS 18.75-75-200 MG | Tier 3 | | | | |
| Antiparkinson Agents | TASMAR TAB 100MG | TOLCAPONE TAB 100 MG | Tier 3 | | | X | |
| Antiparkinson Agents | TOLCAPONE TAB 100MG | TOLCAPONE TAB 100 MG | Tier 1 | | | | |
| Antiparkinson Agents | TRIHXYPHEN SOL 0.4MG/ML | TRIHXYPHENIDYL HCL ORAL SOLN 0.4 MG/ML | Tier 1 | | | | |
| Antiparkinson Agents | TRIHXYPHEN TAB 2MG | TRIHXYPHENIDYL HCL TAB 2 MG | Tier 1 | | | | |
| Antiparkinson Agents | TRIHXYPHEN TAB 5MG | TRIHXYPHENIDYL HCL TAB 5 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antiparkinson Agents | XADAGO TAB 100MG | SAFINAMIDE MESYLATE TAB 100 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antiparkinson Agents | XADAGO TAB 50MG | SAFINAMIDE MESYLATE TAB 50 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antiparkinson Agents | ZELAPAR TAB 1.25MG | SELEGILINE HCL ORALLY DISINTEGRATING TAB 1.25 MG | Tier 3 | | | | |
| Antipsychotics | ABILIFY TAB 10MG | ARIPIPRAZOLE TAB 10 MG | Tier 3 | | | X | |
| Antipsychotics | ABILIFY TAB 15MG | ARIPIPRAZOLE TAB 15 MG | Tier 3 | | | X | |
| Antipsychotics | ABILIFY TAB 20MG | ARIPIPRAZOLE TAB 20 MG | Tier 3 | | | X | |
| Antipsychotics | ABILIFY TAB 2MG | ARIPIPRAZOLE TAB 2 MG | Tier 3 | | | X | |
| Antipsychotics | ABILIFY TAB 30MG | ARIPIPRAZOLE TAB 30 MG | Tier 3 | | | X | |
| Antipsychotics | ABILIFY TAB 5MG | ARIPIPRAZOLE TAB 5 MG | Tier 3 | | | X | |
| Antipsychotics | ADASUVE INH 10MG | LOXAPINE AEROSOL POWDER BREATH ACTIVATED 10 MG | Tier 3 | | | | |
| Antipsychotics | ARIPIPRAZOLE SOL 1MG/ML | ARIPIPRAZOLE ORAL SOLUTION 1 MG/ML | Tier 1 | | | | |
| Antipsychotics | ARIPIPRAZOLE TAB 10MG | ARIPIPRAZOLE TAB 10 MG | Tier 1 | | | | |
| Antipsychotics | ARIPIPRAZOLE TAB 10MG ODT | ARIPIPRAZOLE ORALLY DISINTEGRATING TAB 10 MG | Tier 1 | | X | | |
| Antipsychotics | ARIPIPRAZOLE TAB 15MG | ARIPIPRAZOLE TAB 15 MG | Tier 1 | | | | |
| Antipsychotics | ARIPIPRAZOLE TAB 15MG ODT | ARIPIPRAZOLE ORALLY DISINTEGRATING TAB 15 MG | Tier 1 | | X | | |
| Antipsychotics | ARIPIPRAZOLE TAB 20MG | ARIPIPRAZOLE TAB 20 MG | Tier 1 | | | | |
| Antipsychotics | ARIPIPRAZOLE TAB 2MG | ARIPIPRAZOLE TAB 2 MG | Tier 1 | | | | |
| Antipsychotics | ARIPIPRAZOLE TAB 30MG | ARIPIPRAZOLE TAB 30 MG | Tier 1 | | | | |
| Antipsychotics | ARIPIPRAZOLE TAB 5MG | ARIPIPRAZOLE TAB 5 MG | Tier 1 | | | | |
| Antipsychotics | ASENAPINE SUB 10MG | ASENAPINE MALEATE SL TAB 10 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antipsychotics | ASENAPINE SUB 2.5MG | ASENAPINE MALEATE SL TAB 2.5 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antipsychotics | ASENAPINE SUB 5MG | ASENAPINE MALEATE SL TAB 5 MG (BASE EQUIV) | Tier 1 | | X | | |
| Antipsychotics | CAPLYTA CAP 10.5MG | LUMATEPERONE TOSYLATE CAP 10.5 MG | Tier 3 | X | X | | |
| Antipsychotics | CAPLYTA CAP 21MG | LUMATEPERONE TOSYLATE CAP 21 MG | Tier 3 | X | X | | |
| Antipsychotics | CAPLYTA CAP 42MG | LUMATEPERONE TOSYLATE CAP 42 MG | Tier 3 | X | X | | |
| Antipsychotics | CHLORPROMAZ TAB 100MG | CHLORPROMAZINE HCL TAB 100 MG | Tier 1 | | X | | |
| Antipsychotics | CHLORPROMAZ TAB 10MG | CHLORPROMAZINE HCL TAB 10 MG | Tier 1 | | X | | |
| Antipsychotics | CHLORPROMAZ TAB 200MG | CHLORPROMAZINE HCL TAB 200 MG | Tier 1 | | X | | |
| Antipsychotics | CHLORPROMAZ TAB 25MG | CHLORPROMAZINE HCL TAB 25 MG | Tier 1 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antipsychotics | CHLORPROMAZ TAB 50MG | CHLORPROMAZINE HCL TAB 50 MG | Tier 1 | | X | | |
| Antipsychotics | CHLORPROMAZI CON 100MG/ML | CHLORPROMAZINE HCL CONC 100 MG/ML | Tier 1 | | | | |
| Antipsychotics | CHLORPROMAZI CON 30MG/ML | CHLORPROMAZINE HCL CONC 30 MG/ML | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 100/ODT | CLOZAPINE ORALLY DISINTEGRATING TAB 100 MG | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 100MG | CLOZAPINE TAB 100 MG | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 12.5/ODT | CLOZAPINE ORALLY DISINTEGRATING TAB 12.5 MG | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 150/ODT | CLOZAPINE ORALLY DISINTEGRATING TAB 150 MG | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 200/ODT | CLOZAPINE ORALLY DISINTEGRATING TAB 200 MG | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 200MG | CLOZAPINE TAB 200 MG | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 25MG | CLOZAPINE TAB 25 MG | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 25MG ODT | CLOZAPINE ORALLY DISINTEGRATING TAB 25 MG | Tier 1 | | | | |
| Antipsychotics | CLOZAPINE TAB 50MG | CLOZAPINE TAB 50 MG | Tier 1 | | | | |
| Antipsychotics | CLOZARIL TAB 100MG | CLOZAPINE TAB 100 MG | Tier 3 | | | | |
| Antipsychotics | CLOZARIL TAB 200MG | CLOZAPINE TAB 200 MG | Tier 3 | | | | |
| Antipsychotics | CLOZARIL TAB 25MG | CLOZAPINE TAB 25 MG | Tier 3 | | | | |
| Antipsychotics | CLOZARIL TAB 50MG | CLOZAPINE TAB 50 MG | Tier 3 | | | | |
| Antipsychotics | FANAPT PAK | ILOPERIDONE TAB 1 MG & 2 MG & 4 MG & 6 MG TITRATION PAK | Tier 3 | | X | | |
| Antipsychotics | FANAPT TAB 10MG | ILOPERIDONE TAB 10 MG | Tier 3 | | X | | |
| Antipsychotics | FANAPT TAB 12MG | ILOPERIDONE TAB 12 MG | Tier 3 | | X | | |
| Antipsychotics | FANAPT TAB 1MG | ILOPERIDONE TAB 1 MG | Tier 3 | | X | | |
| Antipsychotics | FANAPT TAB 2MG | ILOPERIDONE TAB 2 MG | Tier 3 | | X | | |
| Antipsychotics | FANAPT TAB 4MG | ILOPERIDONE TAB 4 MG | Tier 3 | | X | | |
| Antipsychotics | FANAPT TAB 6MG | ILOPERIDONE TAB 6 MG | Tier 3 | | X | | |
| Antipsychotics | FANAPT TAB 8MG | ILOPERIDONE TAB 8 MG | Tier 3 | | X | | |
| Antipsychotics | FLUPHENAZINE CON 5MG/ML | FLUPHENAZINE HCL ORAL CONC 5 MG/ML | Tier 1 | | | | |
| Antipsychotics | FLUPHENAZINE ELX 2.5/5ML | FLUPHENAZINE HCL ELIXIR 2.5 MG/5ML | Tier 1 | | | | |
| Antipsychotics | FLUPHENAZINE TAB 10MG | FLUPHENAZINE HCL TAB 10 MG | Tier 1 | | | | |
| Antipsychotics | FLUPHENAZINE TAB 1MG | FLUPHENAZINE HCL TAB 1 MG | Tier 1 | | | | |
| Antipsychotics | FLUPHENAZINE TAB 2.5MG | FLUPHENAZINE HCL TAB 2.5 MG | Tier 1 | | | | |
| Antipsychotics | FLUPHENAZINE TAB 5MG | FLUPHENAZINE HCL TAB 5 MG | Tier 1 | | | | |
| Antipsychotics | GEODON CAP 20MG | ZIPRASIDONE HCL CAP 20 MG | Tier 3 | | | X | |
| Antipsychotics | GEODON CAP 40MG | ZIPRASIDONE HCL CAP 40 MG | Tier 3 | | | X | |
| Antipsychotics | GEODON CAP 60MG | ZIPRASIDONE HCL CAP 60 MG | Tier 3 | | | X | |
| Antipsychotics | GEODON CAP 80MG | ZIPRASIDONE HCL CAP 80 MG | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Antipsychotics | HALOPERIDOL CON 2MG/ML | HALOPERIDOL LACTATE ORAL CONC 2 MG/ML | Tier 1 | | | | |
| Antipsychotics | HALOPERIDOL TAB 0.5MG | HALOPERIDOL TAB 0.5 MG | Tier 1 | | | | |
| Antipsychotics | HALOPERIDOL TAB 10MG | HALOPERIDOL TAB 10 MG | Tier 1 | | | | |
| Antipsychotics | HALOPERIDOL TAB 1MG | HALOPERIDOL TAB 1 MG | Tier 1 | | | | |
| Antipsychotics | HALOPERIDOL TAB 20MG | HALOPERIDOL TAB 20 MG | Tier 1 | | | | |
| Antipsychotics | HALOPERIDOL TAB 2MG | HALOPERIDOL TAB 2 MG | Tier 1 | | | | |
| Antipsychotics | HALOPERIDOL TAB 5MG | HALOPERIDOL TAB 5 MG | Tier 1 | | | | |
| Antipsychotics | INVEGA TAB 1.5MG | PALIPERIDONE TAB ER 24HR 1.5 MG | Tier 3 | | X | X | |
| Antipsychotics | INVEGA TAB 3MG | PALIPERIDONE TAB ER 24HR 3 MG | Tier 3 | | X | X | |
| Antipsychotics | INVEGA TAB 6MG | PALIPERIDONE TAB ER 24HR 6 MG | Tier 3 | | X | X | |
| Antipsychotics | INVEGA TAB 9MG | PALIPERIDONE TAB ER 24HR 9 MG | Tier 3 | | X | X | |
| Antipsychotics | LATUDA TAB 120MG | LURASIDONE HCL TAB 120 MG | Tier 3 | | X | X | |
| Antipsychotics | LATUDA TAB 20MG | LURASIDONE HCL TAB 20 MG | Tier 3 | | X | X | |
| Antipsychotics | LATUDA TAB 40MG | LURASIDONE HCL TAB 40 MG | Tier 3 | | X | X | |
| Antipsychotics | LATUDA TAB 60MG | LURASIDONE HCL TAB 60 MG | Tier 3 | | X | X | |
| Antipsychotics | LATUDA TAB 80MG | LURASIDONE HCL TAB 80 MG | Tier 3 | | X | X | |
| Antipsychotics | LOXAPINE CAP 10MG | LOXAPINE SUCCINATE CAP 10 MG | Tier 1 | | | | |
| Antipsychotics | LOXAPINE CAP 25MG | LOXAPINE SUCCINATE CAP 25 MG | Tier 1 | | | | |
| Antipsychotics | LOXAPINE CAP 50MG | LOXAPINE SUCCINATE CAP 50 MG | Tier 1 | | | | |
| Antipsychotics | LOXAPINE CAP 5MG | LOXAPINE SUCCINATE CAP 5 MG | Tier 1 | | | | |
| Antipsychotics | LURASIDONE TAB 120MG | LURASIDONE HCL TAB 120 MG | Tier 1 | | X | | |
| Antipsychotics | LURASIDONE TAB 20MG | LURASIDONE HCL TAB 20 MG | Tier 1 | | X | | |
| Antipsychotics | LURASIDONE TAB 40MG | LURASIDONE HCL TAB 40 MG | Tier 1 | | X | | |
| Antipsychotics | LURASIDONE TAB 60MG | LURASIDONE HCL TAB 60 MG | Tier 1 | | X | | |
| Antipsychotics | LURASIDONE TAB 80MG | LURASIDONE HCL TAB 80 MG | Tier 1 | | X | | |
| Antipsychotics | LYBALVI TAB 10-10MG | OLANZAPINE-SAMIDORPHAN L-MALATE TAB 10-10 MG | Tier 3 | | X | X | |
| Antipsychotics | LYBALVI TAB 15-10MG | OLANZAPINE-SAMIDORPHAN L-MALATE TAB 15-10 MG | Tier 3 | | X | X | |
| Antipsychotics | LYBALVI TAB 20-10MG | OLANZAPINE-SAMIDORPHAN L-MALATE TAB 20-10 MG | Tier 3 | | X | X | |
| Antipsychotics | LYBALVI TAB 5-10MG | OLANZAPINE-SAMIDORPHAN L-MALATE TAB 5-10 MG | Tier 3 | | X | X | |
| Antipsychotics | MOLINDONE TAB HCL 10MG | MOLINDONE HCL TAB 10 MG | Tier 1 | | | | |
| Antipsychotics | MOLINDONE TAB HCL 25MG | MOLINDONE HCL TAB 25 MG | Tier 1 | | | | |
| Antipsychotics | MOLINDONE TAB HCL 5MG | MOLINDONE HCL TAB 5 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antipsychotics | NUPLAZID CAP 34MG | PIMAVANSERIN TARTRATE CAP 34 MG (BASE EQUIVALENT) | Tier 3 | X | | | |
| Antipsychotics | NUPLAZID TAB 10MG | PIMAVANSERIN TARTRATE TAB 10 MG (BASE EQUIVALENT) | Tier 3 | X | | | |
| Antipsychotics | OLANZAPINE TAB 10MG | OLANZAPINE TAB 10 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 10MG ODT | OLANZAPINE ORALLY DISINTEGRATING TAB 10 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 15MG | OLANZAPINE TAB 15 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 15MG ODT | OLANZAPINE ORALLY DISINTEGRATING TAB 15 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 2.5MG | OLANZAPINE TAB 2.5 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 20MG | OLANZAPINE TAB 20 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 20MG ODT | OLANZAPINE ORALLY DISINTEGRATING TAB 20 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 5MG | OLANZAPINE TAB 5 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 5MG ODT | OLANZAPINE ORALLY DISINTEGRATING TAB 5 MG | Tier 1 | | | | |
| Antipsychotics | OLANZAPINE TAB 7.5MG | OLANZAPINE TAB 7.5 MG | Tier 1 | | | | |
| Antipsychotics | PALIPERIDONE TAB ER 1.5MG | PALIPERIDONE TAB ER 24HR 1.5 MG | Tier 1 | | X | | |
| Antipsychotics | PALIPERIDONE TAB ER 3MG | PALIPERIDONE TAB ER 24HR 3 MG | Tier 1 | | X | | |
| Antipsychotics | PALIPERIDONE TAB ER 6MG | PALIPERIDONE TAB ER 24HR 6 MG | Tier 1 | | X | | |
| Antipsychotics | PALIPERIDONE TAB ER 9MG | PALIPERIDONE TAB ER 24HR 9 MG | Tier 1 | | X | | |
| Antipsychotics | PIMOZIDE TAB 1MG | PIMOZIDE TAB 1 MG | Tier 1 | | | | |
| Antipsychotics | PIMOZIDE TAB 2MG | PIMOZIDE TAB 2 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 100MG | QUETIAPINE FUMARATE TAB 100 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 150MG | QUETIAPINE FUMARATE TAB 150 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 150MG ER | QUETIAPINE FUMARATE TAB ER 24HR 150 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 200MG | QUETIAPINE FUMARATE TAB 200 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 200MG ER | QUETIAPINE FUMARATE TAB ER 24HR 200 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 25MG | QUETIAPINE FUMARATE TAB 25 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 300MG | QUETIAPINE FUMARATE TAB 300 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 300MG ER | QUETIAPINE FUMARATE TAB ER 24HR 300 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 400MG | QUETIAPINE FUMARATE TAB 400 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 400MG ER | QUETIAPINE FUMARATE TAB ER 24HR 400 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Antipsychotics | QUETIAPINE TAB 50MG | QUETIAPINE FUMARATE TAB 50 MG | Tier 1 | | | | |
| Antipsychotics | QUETIAPINE TAB 50MG ER | QUETIAPINE FUMARATE TAB ER 24HR 50 MG | Tier 1 | | | | |
| Antipsychotics | REXULTI TAB 0.25MG | BREXPIPIRAZOLE TAB 0.25 MG | Tier 3 | | X | X | |
| Antipsychotics | REXULTI TAB 0.5MG | BREXPIPIRAZOLE TAB 0.5 MG | Tier 3 | | X | X | |
| Antipsychotics | REXULTI TAB 1MG | BREXPIPIRAZOLE TAB 1 MG | Tier 3 | | X | X | |
| Antipsychotics | REXULTI TAB 2MG | BREXPIPIRAZOLE TAB 2 MG | Tier 3 | | X | X | |
| Antipsychotics | REXULTI TAB 3MG | BREXPIPIRAZOLE TAB 3 MG | Tier 3 | | X | X | |
| Antipsychotics | REXULTI TAB 4MG | BREXPIPIRAZOLE TAB 4 MG | Tier 3 | | X | X | |
| Antipsychotics | RISPERDAL SOL 1MG/ML | RISPERIDONE SOLN 1 MG/ML | Tier 3 | | | X | |
| Antipsychotics | RISPERDAL TAB 0.5MG | RISPERIDONE TAB 0.5 MG | Tier 3 | | | X | |
| Antipsychotics | RISPERDAL TAB 1MG | RISPERIDONE TAB 1 MG | Tier 3 | | | X | |
| Antipsychotics | RISPERDAL TAB 2MG | RISPERIDONE TAB 2 MG | Tier 3 | | | X | |
| Antipsychotics | RISPERDAL TAB 3MG | RISPERIDONE TAB 3 MG | Tier 3 | | | X | |
| Antipsychotics | RISPERDAL TAB 4MG | RISPERIDONE TAB 4 MG | Tier 3 | | | X | |
| Antipsychotics | RISPERIDONE SOL 1MG/ML | RISPERIDONE SOLN 1 MG/ML | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 0.25 ODT | RISPERIDONE ORALLY DISINTEGRATING TAB 0.25 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 0.25MG | RISPERIDONE TAB 0.25 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 0.5MG | RISPERIDONE TAB 0.5 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 0.5MG OD | RISPERIDONE ORALLY DISINTEGRATING TAB 0.5 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 1MG | RISPERIDONE TAB 1 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 1MG ODT | RISPERIDONE ORALLY DISINTEGRATING TAB 1 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 2MG | RISPERIDONE TAB 2 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 2MG ODT | RISPERIDONE ORALLY DISINTEGRATING TAB 2 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 3MG | RISPERIDONE TAB 3 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 3MG ODT | RISPERIDONE ORALLY DISINTEGRATING TAB 3 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 4MG | RISPERIDONE TAB 4 MG | Tier 1 | | | | |
| Antipsychotics | RISPERIDONE TAB 4MG ODT | RISPERIDONE ORALLY DISINTEGRATING TAB 4 MG | Tier 1 | | | | |
| Antipsychotics | SAPHRIS SUB 10MG | ASENAPINE MALEATE SL TAB 10 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antipsychotics | SAPHRIS SUB 2.5MG | ASENAPINE MALEATE SL TAB 2.5 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antipsychotics | SAPHRIS SUB 5MG | ASENAPINE MALEATE SL TAB 5 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Antipsychotics | SECUADO DIS 3.8MG | ASENAPINE TD PATCH 24 HR 3.8 MG/24HR | Tier 3 | | X | X | |
| Antipsychotics | SECUADO DIS 5.7MG | ASENAPINE TD PATCH 24 HR 5.7 MG/24HR | Tier 3 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Antipsychotics | SECUADO DIS 7.6MG | ASENAPINE TD PATCH 24 HR 7.6 MG/24HR | Tier 3 | | X | X | |
| Antipsychotics | SEROQUEL TAB 100MG | QUETIAPINE FUMARATE TAB 100 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL TAB 200MG | QUETIAPINE FUMARATE TAB 200 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL TAB 25MG | QUETIAPINE FUMARATE TAB 25 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL TAB 300MG | QUETIAPINE FUMARATE TAB 300 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL TAB 400MG | QUETIAPINE FUMARATE TAB 400 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL TAB 50MG | QUETIAPINE FUMARATE TAB 50 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL XR TAB 150MG | QUETIAPINE FUMARATE TAB ER 24HR 150 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL XR TAB 200MG | QUETIAPINE FUMARATE TAB ER 24HR 200 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL XR TAB 300MG | QUETIAPINE FUMARATE TAB ER 24HR 300 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL XR TAB 400MG | QUETIAPINE FUMARATE TAB ER 24HR 400 MG | Tier 3 | | | X | |
| Antipsychotics | SEROQUEL XR TAB 50MG | QUETIAPINE FUMARATE TAB ER 24HR 50 MG | Tier 3 | | | X | |
| Antipsychotics | THIORIDAZINE TAB 100MG | THIORIDAZINE HCL TAB 100 MG | Tier 1 | | | | |
| Antipsychotics | THIORIDAZINE TAB 10MG | THIORIDAZINE HCL TAB 10 MG | Tier 1 | | | | |
| Antipsychotics | THIORIDAZINE TAB 25MG | THIORIDAZINE HCL TAB 25 MG | Tier 1 | | | | |
| Antipsychotics | THIORIDAZINE TAB 50MG | THIORIDAZINE HCL TAB 50 MG | Tier 1 | | | | |
| Antipsychotics | THIOTHIXENE CAP 10MG | THIOTHIXENE CAP 10 MG | Tier 1 | | | | |
| Antipsychotics | THIOTHIXENE CAP 1MG | THIOTHIXENE CAP 1 MG | Tier 1 | | | | |
| Antipsychotics | THIOTHIXENE CAP 2MG | THIOTHIXENE CAP 2 MG | Tier 1 | | | | |
| Antipsychotics | THIOTHIXENE CAP 5MG | THIOTHIXENE CAP 5 MG | Tier 1 | | | | |
| Antipsychotics | TRIFLUOPERAZ TAB 10MG | TRIFLUOPERAZINE HCL TAB 10 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antipsychotics | TRIFLUOPERAZ TAB 1MG | TRIFLUOPERAZINE HCL TAB 1 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antipsychotics | TRIFLUOPERAZ TAB 2MG | TRIFLUOPERAZINE HCL TAB 2 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antipsychotics | TRIFLUOPERAZ TAB 5MG | TRIFLUOPERAZINE HCL TAB 5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antipsychotics | VERSACLOZ SUS 50MG/ML | CLOZAPINE SUSP 50 MG/ML | Tier 3 | | | | |
| Antipsychotics | VRAYLAR CAP 1.5-3MG | CARIPRAZINE HCL CAP THERAPY PACK 1.5 MG (1) & 3 MG (6) | Tier 3 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-----------------------|--|------------|------|--------------|--------------|-----------|
| Antipsychotics | VRAYLAR CAP 1.5MG | CARIPRAZINE HCL CAP 1.5 MG (BASE EQUIVALENT) | Tier 3 | | X | | |
| Antipsychotics | VRAYLAR CAP 3MG | CARIPRAZINE HCL CAP 3 MG (BASE EQUIVALENT) | Tier 3 | | X | | |
| Antipsychotics | VRAYLAR CAP 4.5MG | CARIPRAZINE HCL CAP 4.5 MG (BASE EQUIVALENT) | Tier 3 | | X | | |
| Antipsychotics | VRAYLAR CAP 6MG | CARIPRAZINE HCL CAP 6 MG (BASE EQUIVALENT) | Tier 3 | | X | | |
| Antipsychotics | ZIPRASIDONE CAP 20MG | ZIPRASIDONE HCL CAP 20 MG | Tier 1 | | | | |
| Antipsychotics | ZIPRASIDONE CAP 40MG | ZIPRASIDONE HCL CAP 40 MG | Tier 1 | | | | |
| Antipsychotics | ZIPRASIDONE CAP 60MG | ZIPRASIDONE HCL CAP 60 MG | Tier 1 | | | | |
| Antipsychotics | ZIPRASIDONE CAP 80MG | ZIPRASIDONE HCL CAP 80 MG | Tier 1 | | | | |
| Antipsychotics | ZYPREXA TAB 10MG | OLANZAPINE TAB 10 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA TAB 15MG | OLANZAPINE TAB 15 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA TAB 2.5MG | OLANZAPINE TAB 2.5 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA TAB 20MG | OLANZAPINE TAB 20 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA TAB 5MG | OLANZAPINE TAB 5 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA TAB 7.5MG | OLANZAPINE TAB 7.5 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA ZYDI TAB 10MG | OLANZAPINE ORALLY DISINTEGRATING TAB 10 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA ZYDI TAB 15MG | OLANZAPINE ORALLY DISINTEGRATING TAB 15 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA ZYDI TAB 20MG | OLANZAPINE ORALLY DISINTEGRATING TAB 20 MG | Tier 3 | | | X | |
| Antipsychotics | ZYPREXA ZYDI TAB 5MG | OLANZAPINE ORALLY DISINTEGRATING TAB 5 MG | Tier 3 | | | X | |
| Antipsychotics - Drugs to Treat Mood Disorders | CHLORPROMAZ POW HCL | CHLORPROMAZINE HCL (BULK) POWDER | Tier 3 | | | | |
| Antispasmodics, Urinary - Bladder Control Drugs | GEMTESA TAB 75MG | VIBEGRON TAB 75 MG | Tier 3 | | | | |
| Antispasticity Agents | BACLOFEN POW | BACLOFEN POWDER | Tier 3 | X | | | |
| Antispasticity Agents | BACLOFEN SOL 10MG/5ML | BACLOFEN ORAL SOLN 10 MG/5ML | Tier 3 | | | | |
| Antispasticity Agents | BACLOFEN SOL 5MG/5ML | BACLOFEN ORAL SOLN 5 MG/5ML | Tier 3 | | | | |
| Antispasticity Agents | BACLOFEN SUS 25MG/5ML | BACLOFEN SUSP 25 MG/5ML | Tier 1 | | | | |
| Antispasticity Agents | BACLOFEN TAB 10MG | BACLOFEN TAB 10 MG | Tier 1 | | | | |
| Antispasticity Agents | BACLOFEN TAB 15MG | BACLOFEN TAB 15 MG | Tier 1 | | | X | |
| Antispasticity Agents | BACLOFEN TAB 20MG | BACLOFEN TAB 20 MG | Tier 1 | | | | |
| Antispasticity Agents | BACLOFEN TAB 5MG | BACLOFEN TAB 5 MG | Tier 1 | | | | |
| Antispasticity Agents | DANTRIUM CAP 25MG | DANTROLENE SODIUM CAP 25 MG | Tier 3 | | | | |
| Antispasticity Agents | DANTROLENE CAP 100MG | DANTROLENE SODIUM CAP 100 MG | Tier 1 | | | | |
| Antispasticity Agents | DANTROLENE CAP 25MG | DANTROLENE SODIUM CAP 25 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Antispasticity Agents | DANTROLENE CAP 50MG | DANTROLENE SODIUM CAP 50 MG | Tier 1 | | | | |
| Antispasticity Agents | FLEQSUVY SUS 25MG/5ML | BACLOFEN SUSP 25 MG/5ML | Tier 3 | | | | |
| Antispasticity Agents | LYVISPAH GRA 10MG | BACLOFEN GRANULES PACKET 10 MG | Tier 3 | | | X | |
| Antispasticity Agents | LYVISPAH GRA 20MG | BACLOFEN GRANULES PACKET 20 MG | Tier 3 | | | X | |
| Antispasticity Agents | LYVISPAH GRA 5MG | BACLOFEN GRANULES PACKET 5 MG | Tier 3 | | | X | |
| Antispasticity Agents | OZOBAX SOL 5MG/5ML | BACLOFEN ORAL SOLN 5 MG/5ML | Tier 3 | | | | |
| Antispasticity Agents | OZOBAX DS SOL 10MG/5ML | BACLOFEN ORAL SOLN 10 MG/5ML | Tier 3 | | | | |
| Antispasticity Agents | TIZANIDINE CAP 2MG | TIZANIDINE HCL CAP 2 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antispasticity Agents | TIZANIDINE CAP 4MG | TIZANIDINE HCL CAP 4 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antispasticity Agents | TIZANIDINE CAP 6MG | TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antispasticity Agents | TIZANIDINE TAB 2MG | TIZANIDINE HCL TAB 2 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antispasticity Agents | TIZANIDINE TAB 4MG | TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antispasticity Agents | ZANAFLEX CAP 2MG | TIZANIDINE HCL CAP 2 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antispasticity Agents | ZANAFLEX CAP 4MG | TIZANIDINE HCL CAP 4 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antispasticity Agents | ZANAFLEX CAP 6MG | TIZANIDINE HCL CAP 6 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antispasticity Agents | ZANAFLEX TAB 4MG | TIZANIDINE HCL TAB 4 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Antivirals | ABACA/LAMIVU TAB 600-300 | ABACAVIR SULFATE-LAMIVUDINE TAB 600-300 MG | Tier 1 | | X | | |
| Antivirals | ABACA/LAMIVU TAB 600-300M | ABACAVIR SULFATE-LAMIVUDINE TAB 600-300 MG | Tier 1 | | X | | |
| Antivirals | ABACAVIR SOL 20MG/ML | ABACAVIR SULFATE SOLN 20 MG/ML (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | ABACAVIR TAB 300MG | ABACAVIR SULFATE TAB 300 MG (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | ACYCLOVIR CAP 200MG | ACYCLOVIR CAP 200 MG | Tier 1 | | | | |
| Antivirals | ACYCLOVIR OIN 5% | ACYCLOVIR OINT 5% | Tier 1 | | | | |
| Antivirals | ACYCLOVIR SUS 200/5ML | ACYCLOVIR SUSP 200 MG/5ML | Tier 1 | | | | |
| Antivirals | ACYCLOVIR TAB 400MG | ACYCLOVIR TAB 400 MG | Tier 1 | | | | |
| Antivirals | ACYCLOVIR TAB 800MG | ACYCLOVIR TAB 800 MG | Tier 1 | | | | |
| Antivirals | ADEFOV DIPIV TAB 10MG | ADEFOVIR DIPIVOXIL TAB 10 MG | Tier 1 | | | | |
| Antivirals | APTIVUS CAP 250MG | TIPRANAIR CAP 250 MG | Tier 2 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antivirals | ATAZANAVIR CAP 150MG | ATAZANAVIR SULFATE CAP 150 MG (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | ATAZANAVIR CAP 200MG | ATAZANAVIR SULFATE CAP 200 MG (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | ATAZANAVIR CAP 300MG | ATAZANAVIR SULFATE CAP 300 MG (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | BARACLUDE SOL | ENTECAVIR ORAL SOLN 0.05 MG/ML | Tier 2 | | | | |
| Antivirals | BARACLUDE TAB 0.5MG | ENTECAVIR TAB 0.5 MG | Tier 3 | | | X | |
| Antivirals | BARACLUDE TAB 1MG | ENTECAVIR TAB 1 MG | Tier 3 | | | X | |
| Antivirals | BIKTARVY TAB | BICTEGRAVIR-EMTRICITABINE-TENOFOVIR AF TAB 50-200-25 MG | Tier 3 | | X | | |
| Antivirals | BIKTARVY TAB | BICTEGRAVIR-EMTRICITABINE-TENOFOVIR AF TAB 30-120-15 MG | Tier 3 | | X | | |
| Antivirals | CIMDUO TAB 300-300 | LAMIVUDINE-TENOFOVIR DISOPROXIL FUMARATE TAB 300-300 MG | Tier 2 | | X | | |
| Antivirals | COMBIVIR TAB 150-300 | LAMIVUDINE-ZIDOVUDINE TAB 150-300 MG | Tier 3 | | | | |
| Antivirals | COMPLERA TAB | EMTRICITABINE-RILPIVIRINE-TENOFOVIR DF TAB 200-25-300 MG | Tier 3 | | X | | |
| Antivirals | DELSTRIGO TAB | DORAVIRINE-LAMIVUDINE-TENOFOVIR DF TAB 100-300-300 MG | Tier 2 | | X | | |
| Antivirals | DESCOVY TAB 120-15MG | EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE TAB 120-15 MG | Tier 3 | | X | X | |
| Antivirals | DESCOVY TAB 200/25MG | EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE TAB 200-25 MG | Tier 3 | | X | X | |
| Antivirals | DOVATO TAB 50-300MG | DOLUTEGRAVIR SODIUM-LAMIVUDINE TAB 50-300 MG (BASE EQ) | Tier 2 | | X | | |
| Antivirals | EDURANT TAB 25MG | RILPIVIRINE HCL TAB 25 MG (BASE EQUIVALENT) | Tier 2 | | | | |
| Antivirals | EFAVIR/EMTRI TAB TENOFOVI | EFAVIRENZ-EMTRICITABINE-TENOFOVIR DF TAB 600-200-300 MG | Tier 1 | | X | | |
| Antivirals | EFAVIR/LAMIV TAB TENOFOVI | EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 600-300-300 MG | Tier 1 | | X | | |
| Antivirals | EFAVIR/LAMIV TAB TENOFOVI | EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 400-300-300 MG | Tier 1 | | X | | |
| Antivirals | EFAVIRENZ CAP 200MG | EFAVIRENZ CAP 200 MG | Tier 1 | | | | |
| Antivirals | EFAVIRENZ CAP 50MG | EFAVIRENZ CAP 50 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antivirals | EFAVIRENZ TAB 600MG | EFAVIRENZ TAB 600 MG | Tier 1 | | | | |
| Antivirals | EMTR/TEN DF TAB 100-150 | EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 100-150 MG | Tier 1 | | X | | |
| Antivirals | EMTR/TEN DF TAB 133-200 | EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 133-200 MG | Tier 1 | | X | | |
| Antivirals | EMTR/TEN DF TAB 167-250 | EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 167-250 MG | Tier 1 | | X | | |
| Antivirals | EMTR/TENOFOV TAB 200-300 | EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 200-300 MG | HCR | | X | | |
| Antivirals | EMTRICITABIN CAP 200MG | EMTRICITABINE CAPS 200 MG | Tier 1 | | | | |
| Antivirals | EMTRIVA CAP 200MG | EMTRICITABINE CAPS 200 MG | Tier 3 | | | | |
| Antivirals | EMTRIVA SOL 10MG/ML | EMTRICITABINE SOLN 10 MG/ML | Tier 2 | | | | |
| Antivirals | ENTECAVIR TAB 0.5MG | ENTECAVIR TAB 0.5 MG | Tier 1 | | | | |
| Antivirals | ENTECAVIR TAB 1MG | ENTECAVIR TAB 1 MG | Tier 1 | | | | |
| Antivirals | EPCLUSA PAK 150-375 | SOFOSBUVIR-VELPATASVIR PELLETT PACK 150-375 MG | Tier 2 | X | X | | X |
| Antivirals | EPCLUSA PAK 200-50MG | SOFOSBUVIR-VELPATASVIR PELLETT PACK 200-50 MG | Tier 2 | X | X | | X |
| Antivirals | EPCLUSA TAB 200-50MG | SOFOSBUVIR-VELPATASVIR TAB 200-50 MG | Tier 2 | X | X | | X |
| Antivirals | EPCLUSA TAB 400-100 | SOFOSBUVIR-VELPATASVIR TAB 400-100 MG | Tier 2 | X | X | | X |
| Antivirals | EPIVIR SOL 10MG/ML | LAMIVUDINE ORAL SOLN 10 MG/ML | Tier 3 | | | | |
| Antivirals | EPIVIR TAB 150MG | LAMIVUDINE TAB 150 MG | Tier 3 | | | | |
| Antivirals | EPIVIR TAB 300MG | LAMIVUDINE TAB 300 MG | Tier 3 | | | | |
| Antivirals | EPIVIR HBV SOL 5MG/ML | LAMIVUDINE ORAL SOLN 5 MG/ML (HBV) | Tier 2 | | | | |
| Antivirals | EPIVIR HBV TAB 100MG | LAMIVUDINE TAB 100 MG (HBV) | Tier 3 | | | | |
| Antivirals | EPZICOM TAB 600-300 | ABACAVIR SULFATE-LAMIVUDINE TAB 600-300 MG | Tier 3 | | X | X | |
| Antivirals | ETRAVIRINE TAB 100MG | ETRAVIRINE TAB 100 MG | Tier 1 | | | | |
| Antivirals | ETRAVIRINE TAB 200MG | ETRAVIRINE TAB 200 MG | Tier 1 | | | | |
| Antivirals | EVOTAZ TAB 300-150 | ATAZANAVIR SULFATE-COBICISTAT TAB 300-150 MG (BASE EQUIV) | Tier 2 | | | | |
| Antivirals | FAMCICLOVIR TAB 125MG | FAMCICLOVIR TAB 125 MG | Tier 1 | | | | |
| Antivirals | FAMCICLOVIR TAB 250MG | FAMCICLOVIR TAB 250 MG | Tier 1 | | | | |
| Antivirals | FAMCICLOVIR TAB 500MG | FAMCICLOVIR TAB 500 MG | Tier 1 | | | | |
| Antivirals | FOSAMPRENAVI TAB 700MG | FOSAMPRENAVIR CALCIUM TAB 700 MG (BASE EQUIV) | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Antivirals | FUZEON INJ 90MG | ENFUVIRTIDE FOR INJ 90 MG | Tier 3 | | | | |
| Antivirals | GENVOYA TAB | ELVITEGRAV-COBIC-EMTRICITAB-TENOFOV AF TAB 150-150-200-10 MG | Tier 3 | | X | | |
| Antivirals | HARVONI PAK | LEDIPASVIR-SOFOSBUVIR PELLETT PACK 33.75-150 MG | Tier 2 | X | X | X | X |
| Antivirals | HARVONI PAK 45-200MG | LEDIPASVIR-SOFOSBUVIR PELLETT PACK 45-200 MG | Tier 2 | X | X | X | X |
| Antivirals | HARVONI TAB 45-200MG | LEDIPASVIR-SOFOSBUVIR TAB 45-200 MG | Tier 2 | X | X | X | X |
| Antivirals | HARVONI TAB 90-400MG | LEDIPASVIR-SOFOSBUVIR TAB 90-400 MG | Tier 2 | X | X | X | X |
| Antivirals | HEPSERA TAB 10MG | ADEFOVIR DIPIVOXIL TAB 10 MG | Tier 3 | | | X | |
| Antivirals | INTELENCE TAB 100MG | ETRAVIRINE TAB 100 MG | Tier 3 | | | | |
| Antivirals | INTELENCE TAB 200MG | ETRAVIRINE TAB 200 MG | Tier 3 | | | | |
| Antivirals | INTELENCE TAB 25MG | ETRAVIRINE TAB 25 MG | Tier 2 | | | | |
| Antivirals | ISENTRESS CHW 100MG | RALTEGRAVIR POTASSIUM CHEW TAB 100 MG (BASE EQUIV) | Tier 2 | | | | |
| Antivirals | ISENTRESS CHW 25MG | RALTEGRAVIR POTASSIUM CHEW TAB 25 MG (BASE EQUIV) | Tier 2 | | | | |
| Antivirals | ISENTRESS POW 100MG | RALTEGRAVIR POTASSIUM PACKET FOR SUSP 100 MG (BASE EQUIV) | Tier 2 | | | | |
| Antivirals | ISENTRESS TAB 400MG | RALTEGRAVIR POTASSIUM TAB 400 MG (BASE EQUIV) | Tier 2 | | | | |
| Antivirals | ISENTRESS HD TAB 600MG | RALTEGRAVIR POTASSIUM TAB 600 MG (BASE EQUIV) | Tier 2 | | | | |
| Antivirals | JULUCA TAB 50-25MG | DOLUTEGRAVIR SODIUM-RILPIVIRINE HCL TAB 50-25 MG (BASE EQ) | Tier 2 | | X | | |
| Antivirals | KALETRA SOL | LOPINAVIR-RITONAVIR SOLN 400-100 MG/5ML (80-20 MG/ML) | Tier 3 | | | | |
| Antivirals | KALETRA TAB 100-25MG | LOPINAVIR-RITONAVIR TAB 100-25 MG | Tier 3 | | | | |
| Antivirals | KALETRA TAB 200-50MG | LOPINAVIR-RITONAVIR TAB 200-50 MG | Tier 3 | | | | |
| Antivirals | LAMIVUD/ZIDO TAB 150-300 | LAMIVUDINE-ZIDOVUDINE TAB 150-300 MG | Tier 1 | | | | |
| Antivirals | LAMIVUDINE SOL 10MG/ML | LAMIVUDINE ORAL SOLN 10 MG/ML | Tier 1 | | | | |
| Antivirals | LAMIVUDINE TAB 100MG | LAMIVUDINE TAB 100 MG (HBV) | Tier 1 | | | | |
| Antivirals | LAMIVUDINE TAB 150MG | LAMIVUDINE TAB 150 MG | Tier 1 | | | | |
| Antivirals | LAMIVUDINE TAB 300MG | LAMIVUDINE TAB 300 MG | Tier 1 | | | | |
| Antivirals | LEDIP-SOFOSB TAB 90-400MG | LEDIPASVIR-SOFOSBUVIR TAB 90-400 MG | Tier 2 | X | X | X | X |
| Antivirals | LEXIVA SUS 50MG/ML | FOSAMPRENAVIR CALCIUM SUSP 50 MG/ML (BASE EQUIV) | Tier 2 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Antivirals | LEXIVA TAB 700MG | FOSAMPRENAVIR CALCIUM TAB 700 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antivirals | LOPIN/RITON SOL 80-20/ML | LOPINAVIR-RITONAVIR SOLN 400-100 MG/5ML (80-20 MG/ML) | Tier 1 | | | | |
| Antivirals | LOPIN/RITON TAB 100-25MG | LOPINAVIR-RITONAVIR TAB 100-25 MG | Tier 1 | | | | |
| Antivirals | LOPIN/RITON TAB 200-50MG | LOPINAVIR-RITONAVIR TAB 200-50 MG | Tier 1 | | | | |
| Antivirals | MARAVIROC TAB 150MG | MARAVIROC TAB 150 MG | Tier 1 | X | | | |
| Antivirals | MARAVIROC TAB 300MG | MARAVIROC TAB 300 MG | Tier 1 | X | | | |
| Antivirals | MAVYRET PAK 50-20MG | GLECAPREVIR-PIBRENTASVIR PELLETT PACK 50-20 MG | Tier 2 | X | X | | X |
| Antivirals | MAVYRET TAB 100-40MG | GLECAPREVIR-PIBRENTASVIR TAB 100-40 MG | Tier 2 | X | X | | X |
| Antivirals | NEVIRAPINE SUS 50MG/5ML | NEVIRAPINE SUSP 50 MG/5ML | Tier 1 | | | | |
| Antivirals | NEVIRAPINE TAB 100MG | NEVIRAPINE TAB ER 24HR 100 MG | Tier 1 | | | | |
| Antivirals | NEVIRAPINE TAB 200MG | NEVIRAPINE TAB 200 MG | Tier 1 | | | | |
| Antivirals | NEVIRAPINE TAB 400MG ER | NEVIRAPINE TAB ER 24HR 400 MG | Tier 1 | | | | |
| Antivirals | NORVIR POW 100MG | RITONAVIR POWDER PACKET 100 MG | Tier 2 | | | | |
| Antivirals | NORVIR SOL 80MG/ML | RITONAVIR ORAL SOLN 80 MG/ML | Tier 2 | | | | |
| Antivirals | NORVIR TAB 100MG | RITONAVIR TAB 100 MG | Tier 3 | | | X | |
| Antivirals | ODEFSEY TAB | EMTRICITABINE-RILPIVIRINE-TENOFOVIR AF TAB 200-25-25 MG | Tier 3 | | X | | |
| Antivirals | OSELTAMIVIR CAP 30MG | OSELTAMIVIR PHOSPHATE CAP 30 MG (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | OSELTAMIVIR CAP 45MG | OSELTAMIVIR PHOSPHATE CAP 45 MG (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | OSELTAMIVIR CAP 75MG | OSELTAMIVIR PHOSPHATE CAP 75 MG (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | OSELTAMIVIR SUS 6MG/ML | OSELTAMIVIR PHOSPHATE FOR SUSP 6 MG/ML (BASE EQUIV) | Tier 1 | | X | | |
| Antivirals | PIFELTRO TAB 100MG | DORAVIRINE TAB 100 MG | Tier 3 | | | | |
| Antivirals | PREVYMIS TAB 240MG | LETERMOVIR TAB 240 MG | Tier 2 | X | | | |
| Antivirals | PREVYMIS TAB 480MG | LETERMOVIR TAB 480 MG | Tier 2 | X | | | |
| Antivirals | PREZCOBIX TAB 800-150 | DARUNAVIR-COBICISTAT TAB 800-150 MG | Tier 2 | | | | |
| Antivirals | RELENZA MIS DISKHALE | ZANAMIVIR AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT | Tier 3 | | | | |
| Antivirals | RETROVIR CAP 100MG | ZIDOVUDINE CAP 100 MG | Tier 3 | | | | |
| Antivirals | RETROVIR SYP 50MG/5ML | ZIDOVUDINE SYRUP 10 MG/ML | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Antivirals | REYATAZ CAP 200MG | ATAZANAVIR SULFATE CAP 200 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antivirals | REYATAZ CAP 300MG | ATAZANAVIR SULFATE CAP 300 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antivirals | REYATAZ POW 50MG | ATAZANAVIR SULFATE ORAL POWDER PACKET 50 MG (BASE EQUIV) | Tier 2 | | | | |
| Antivirals | RIBAVIRIN CAP 200MG | RIBAVIRIN CAP 200 MG | Tier 1 | | | | |
| Antivirals | RIBAVIRIN TAB 200MG | RIBAVIRIN TAB 200 MG | Tier 1 | | | | |
| Antivirals | RIMANTADINE TAB 100MG | RIMANTADINE HYDROCHLORIDE TAB 100 MG | Tier 1 | | | | |
| Antivirals | RITONAVIR TAB 100MG | RITONAVIR TAB 100 MG | Tier 1 | | | | |
| Antivirals | RUKOBIA TAB 600MG ER | FOSTEMSAVIR TROMETHAMINE TAB ER 12HR 600 MG | Tier 3 | X | | | |
| Antivirals | SELZENTRY SOL 20MG/ML | MARAVIROC ORAL SOLN 20 MG/ML | Tier 2 | X | | | |
| Antivirals | SELZENTRY TAB 150MG | MARAVIROC TAB 150 MG | Tier 3 | X | | | |
| Antivirals | SELZENTRY TAB 25MG | MARAVIROC TAB 25 MG | Tier 2 | X | | | |
| Antivirals | SELZENTRY TAB 300MG | MARAVIROC TAB 300 MG | Tier 3 | X | | | |
| Antivirals | SELZENTRY TAB 75MG | MARAVIROC TAB 75 MG | Tier 2 | X | | | |
| Antivirals | SITAVIG TAB 50MG | ACYCLOVIR BUCCAL TAB 50 MG | Tier 3 | | | X | |
| Antivirals | SOFOS/VELPAT TAB 400-100 | SOFOSBUVIR-VELPATASVIR TAB 400-100 MG | Tier 2 | X | X | | X |
| Antivirals | SOVALDI PAK 150MG | SOFOSBUVIR PELLETT PACK 150 MG | Tier 3 | X | X | X | X |
| Antivirals | SOVALDI PAK 200MG | SOFOSBUVIR PELLETT PACK 200 MG | Tier 3 | X | X | X | X |
| Antivirals | SOVALDI TAB 200MG | SOFOSBUVIR TAB 200 MG | Tier 3 | X | X | X | X |
| Antivirals | SOVALDI TAB 400MG | SOFOSBUVIR TAB 400 MG | Tier 3 | X | X | X | X |
| Antivirals | STAVUDINE CAP 15MG | STAVUDINE CAP 15 MG | Tier 1 | | | | |
| Antivirals | STAVUDINE CAP 20MG | STAVUDINE CAP 20 MG | Tier 1 | | | | |
| Antivirals | STAVUDINE CAP 30MG | STAVUDINE CAP 30 MG | Tier 1 | | | | |
| Antivirals | STAVUDINE CAP 40MG | STAVUDINE CAP 40 MG | Tier 1 | | | | |
| Antivirals | STRIBILD TAB | ELVITEGRAV-COBIC-EMTRICITAB-TENOFOVDF TAB 150-150-200-300 MG | Tier 3 | | X | | |
| Antivirals | SUSTIVA CAP 200MG | EFAVIRENZ CAP 200 MG | Tier 3 | | | X | |
| Antivirals | SUSTIVA CAP 50MG | EFAVIRENZ CAP 50 MG | Tier 3 | | | X | |
| Antivirals | SUSTIVA TAB 600MG | EFAVIRENZ TAB 600 MG | Tier 3 | | | | |
| Antivirals | SYMFI TAB | EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 600-300-300 MG | Tier 2 | | X | | |
| Antivirals | SYMFI LO TAB | EFAVIRENZ-LAMIVUDINE-TENOFOVIR DF TAB 400-300-300 MG | Tier 2 | | X | | |
| Antivirals | SYM TUZA TAB | DARUNAVIR-COBIC-EMTRICITAB-TENOFOV AF TAB 800-150-200-10 MG | Tier 3 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Antivirals | TAMIFLU CAP 30MG | OSELTAMIVIR PHOSPHATE CAP 30 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antivirals | TAMIFLU CAP 45MG | OSELTAMIVIR PHOSPHATE CAP 45 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antivirals | TAMIFLU CAP 75MG | OSELTAMIVIR PHOSPHATE CAP 75 MG (BASE EQUIV) | Tier 3 | | | X | |
| Antivirals | TAMIFLU SUS 6MG/ML | OSELTAMIVIR PHOSPHATE FOR SUSP 6 MG/ML (BASE EQUIV) | Tier 3 | | X | X | |
| Antivirals | TENOFOVIR TAB 300MG | TENOFOVIR DISOPROXIL FUMARATE TAB 300 MG | HCR | | | | |
| Antivirals | TIVICAY TAB 10MG | DOLUTEGRAVIR SODIUM TAB 10 MG (BASE EQUIV) | Tier 3 | | | | |
| Antivirals | TIVICAY TAB 25MG | DOLUTEGRAVIR SODIUM TAB 25 MG (BASE EQUIV) | Tier 3 | | | | |
| Antivirals | TIVICAY TAB 50MG | DOLUTEGRAVIR SODIUM TAB 50 MG (BASE EQUIV) | Tier 3 | | | | |
| Antivirals | TIVICAY PD TAB 5MG | DOLUTEGRAVIR SODIUM TAB FOR ORAL SUSP 5 MG (BASE EQUIV) | Tier 3 | | | | |
| Antivirals | TRIUMEQ TAB | ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE TAB 600-50-300 MG | Tier 2 | | X | | |
| Antivirals | TRIUMEQ PD TAB | ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE TAB FOR ORAL SUS 60-5-30 MG | Tier 2 | | X | | |
| Antivirals | TRIZIVIR TAB | ABACAVIR SULFATE-LAMIVUDINE-ZIDOVUDINE TAB 300-150-300 MG | Tier 3 | | | | |
| Antivirals | TRUVADA TAB 100-150 | EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 100-150 MG | Tier 3 | | X | | |
| Antivirals | TRUVADA TAB 133-200 | EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 133-200 MG | Tier 3 | | X | | |
| Antivirals | TRUVADA TAB 167-250 | EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 167-250 MG | Tier 3 | | X | | |
| Antivirals | TRUVADA TAB 200-300 | EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE TAB 200-300 MG | Tier 3 | | X | X | |
| Antivirals | TYBOST TAB 150MG | COBICISTAT TAB 150 MG | Tier 2 | | | | |
| Antivirals | VALACYCLOVIR TAB 1GM | VALACYCLOVIR HCL TAB 1 GM | Tier 1 | | | | |
| Antivirals | VALACYCLOVIR TAB 500MG | VALACYCLOVIR HCL TAB 500 MG | Tier 1 | | | | |
| Antivirals | VALCYTE SOL 50MG/ML | VALGANCICLOVIR HCL FOR SOLN 50 MG/ML (BASE EQUIV) | Tier 3 | | | X | |
| Antivirals | VALCYTE TAB 450MG | VALGANCICLOVIR HCL TAB 450 MG (BASE EQUIVALENT) | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Antivirals | VALGANCICLOV SOL 50MG/ML | VALGANCICLOVIR HCL FOR SOLN 50 MG/ML (BASE EQUIV) | Tier 1 | | | | |
| Antivirals | VALGANCICLOV TAB 450MG | VALGANCICLOVIR HCL TAB 450 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Antivirals | VALTREX TAB 1GM | VALACYCLOVIR HCL TAB 1 GM | Tier 3 | | | X | |
| Antivirals | VALTREX TAB 500MG | VALACYCLOVIR HCL TAB 500 MG | Tier 3 | | | X | |
| Antivirals | VEMLIDY TAB 25MG | TENOFOVIR ALAFENAMIDE FUMARATE TAB 25 MG | Tier 3 | X | | X | |
| Antivirals | VIEKIRA PAK TAB | OMBITAS-PARITAPRE-RITON & DASAB TAB PAK 12.5-75-50 & 250 MG | Tier 3 | X | | X | X |
| Antivirals | VIRACEPT TAB 250MG | NELFINAVIR MESYLATE TAB 250 MG | Tier 2 | | | | |
| Antivirals | VIRACEPT TAB 625MG | NELFINAVIR MESYLATE TAB 625 MG | Tier 2 | | | | |
| Antivirals | VIREAD POW 40MG/GM | TENOFOVIR DISOPROXIL FUMARATE ORAL POWDER 40 MG/GM | Tier 3 | | | | |
| Antivirals | VIREAD TAB 150MG | TENOFOVIR DISOPROXIL FUMARATE TAB 150 MG | Tier 2 | | | | |
| Antivirals | VIREAD TAB 200MG | TENOFOVIR DISOPROXIL FUMARATE TAB 200 MG | Tier 2 | | | | |
| Antivirals | VIREAD TAB 250MG | TENOFOVIR DISOPROXIL FUMARATE TAB 250 MG | Tier 2 | | | | |
| Antivirals | VIREAD TAB 300MG | TENOFOVIR DISOPROXIL FUMARATE TAB 300 MG | Tier 3 | | | X | |
| Antivirals | VOSEVI TAB | SOFOSBUVIR-VELPATASVIR-VOXILAPREVIR TAB 400-100-100 MG | Tier 2 | X | X | | X |
| Antivirals | XOFLUZA TAB 20MG | BALOXAVIR MARBOXIL TAB THERAPY PACK 2 X 20 MG (40 MG DOSE) | Tier 3 | | X | | |
| Antivirals | XOFLUZA TAB 40MG | BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 40 MG (40 MG DOSE) | Tier 3 | | X | | |
| Antivirals | XOFLUZA TAB 40MG | BALOXAVIR MARBOXIL TAB THERAPY PACK 2 X 40 MG (80 MG DOSE) | Tier 3 | | X | | |
| Antivirals | XOFLUZA TAB 80MG | BALOXAVIR MARBOXIL TAB THERAPY PACK 1 X 80 MG (80 MG DOSE) | Tier 3 | | X | | |
| Antivirals | ZEPATIER TAB 50-100MG | ELBASVIR-GRAZOPREVIR TAB 50-100 MG | Tier 2 | X | X | | X |
| Antivirals | ZIAGEN SOL 20MG/ML | ABACAVIR SULFATE SOLN 20 MG/ML (BASE EQUIV) | Tier 3 | | | | |
| Antivirals | ZIAGEN TAB 300MG | ABACAVIR SULFATE TAB 300 MG (BASE EQUIV) | Tier 3 | | | | |
| Antivirals | ZIDOVUDINE CAP 100MG | ZIDOVUDINE CAP 100 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-------------------------|--|------------|------|--------------|--------------|-----------|
| Antivirals | ZIDOVUDINE SYP 50MG/5ML | ZIDOVUDINE SYRUP 10 MG/ML | Tier 1 | | | | |
| Antivirals | ZIDOVUDINE TAB 300MG | ZIDOVUDINE TAB 300 MG | Tier 1 | | | | |
| Antivirals | ZIRGAN GEL 0.15% | GANCICLOVIR OPHTH GEL 0.15% | Tier 3 | | | | |
| Antivirals | ZOVIRAX OIN 5% | ACYCLOVIR OINT 5% | Tier 3 | | | X | |
| Antivirals | ZOVIRAX SUS 200/5ML | ACYCLOVIR SUSP 200 MG/5ML | Tier 3 | | | | |
| Antivirals - Drugs to Treat Viral Infections | FAVPIRAVIR TAB 200MG | FAVPIRAVIR TAB 200 MG | Tier 3 | | | | |
| Antivirals - Drugs to Treat Viral Infections | LAGEVRIO CAP 200MG | MOLNUPIRAVIR CAP 200 MG | Tier 2 | | X | | |
| Antivirals - Drugs to Treat Viral Infections | LIVTENCITY TAB 200MG | MARIBAVIR TAB 200 MG | Tier 3 | X | X | | X |
| Antivirals - Drugs to Treat Viral Infections | PAXLOVID TAB 150-100 | NIRMATRELVIR TAB 10 X 150 MG & RITONAVIR TAB 10 X 100 MG PAK | Tier 2 | | X | | |
| Antivirals - Drugs to Treat Viral Infections | PAXLOVID TAB 300-100 | NIRMATRELVIR TAB 20 X 150 MG & RITONAVIR TAB 10 X 100 MG PAK | Tier 2 | | X | | |
| Anxiolytics | ALPRAZOLAM CON 1 MG/ML | ALPRAZOLAM CONC 1 MG/ML | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 0.25 ODT | ALPRAZOLAM ORALLY DISINTEGRATING TAB 0.25 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 0.25MG | ALPRAZOLAM TAB 0.25 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 0.5MG | ALPRAZOLAM TAB 0.5 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 0.5MG ER | ALPRAZOLAM TAB ER 24HR 0.5 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 0.5MG OD | ALPRAZOLAM ORALLY DISINTEGRATING TAB 0.5 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 0.5MG XR | ALPRAZOLAM TAB ER 24HR 0.5 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 1MG | ALPRAZOLAM TAB 1 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 1MG ER | ALPRAZOLAM TAB ER 24HR 1 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 1MG ODT | ALPRAZOLAM ORALLY DISINTEGRATING TAB 1 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 1MG XR | ALPRAZOLAM TAB ER 24HR 1 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 2MG | ALPRAZOLAM TAB 2 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 2MG ER | ALPRAZOLAM TAB ER 24HR 2 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 2MG ODT | ALPRAZOLAM ORALLY DISINTEGRATING TAB 2 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 2MG XR | ALPRAZOLAM TAB ER 24HR 2 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 3MG ER | ALPRAZOLAM TAB ER 24HR 3 MG | Tier 1 | | | | |
| Anxiolytics | ALPRAZOLAM TAB 3MG XR | ALPRAZOLAM TAB ER 24HR 3 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Anxiolytics | ATIVAN TAB 0.5MG | LORAZEPAM TAB 0.5 MG | Tier 3 | | | X | |
| Anxiolytics | ATIVAN TAB 1MG | LORAZEPAM TAB 1 MG | Tier 3 | | | X | |
| Anxiolytics | ATIVAN TAB 2MG | LORAZEPAM TAB 2 MG | Tier 3 | | | X | |
| Anxiolytics | BUSPIRONE TAB 10MG | BUSPIRONE HCL TAB 10 MG | Tier 1 | | | | |
| Anxiolytics | BUSPIRONE TAB 15MG | BUSPIRONE HCL TAB 15 MG | Tier 1 | | | | |
| Anxiolytics | BUSPIRONE TAB 30MG | BUSPIRONE HCL TAB 30 MG | Tier 1 | | | | |
| Anxiolytics | BUSPIRONE TAB 5MG | BUSPIRONE HCL TAB 5 MG | Tier 1 | | | | |
| Anxiolytics | BUSPIRONE TAB 7.5MG | BUSPIRONE HCL TAB 7.5 MG | Tier 1 | | | | |
| Anxiolytics | CHLORDIAZEP CAP 10MG | CHLORDIAZEPOXIDE HCL CAP 10 MG | Tier 1 | | | | |
| Anxiolytics | CHLORDIAZEP CAP 25MG | CHLORDIAZEPOXIDE HCL CAP 25 MG | Tier 1 | | | | |
| Anxiolytics | CHLORDIAZEP CAP 5MG | CHLORDIAZEPOXIDE HCL CAP 5 MG | Tier 1 | | | | |
| Anxiolytics | CLONAZEP ODT TAB 0.125MG | CLONAZEPAM ORALLY DISINTEGRATING TAB 0.125 MG | Tier 1 | | | | |
| Anxiolytics | CLONAZEP ODT TAB 0.25MG | CLONAZEPAM ORALLY DISINTEGRATING TAB 0.25 MG | Tier 1 | | | | |
| Anxiolytics | CLONAZEP ODT TAB 0.5MG | CLONAZEPAM ORALLY DISINTEGRATING TAB 0.5 MG | Tier 1 | | | | |
| Anxiolytics | CLONAZEP ODT TAB 1MG | CLONAZEPAM ORALLY DISINTEGRATING TAB 1 MG | Tier 1 | | | | |
| Anxiolytics | CLONAZEP ODT TAB 2MG | CLONAZEPAM ORALLY DISINTEGRATING TAB 2 MG | Tier 1 | | | | |
| Anxiolytics | CLONAZEPAM TAB 0.5MG | CLONAZEPAM TAB 0.5 MG | Tier 1 | | | | |
| Anxiolytics | CLONAZEPAM TAB 1MG | CLONAZEPAM TAB 1 MG | Tier 1 | | | | |
| Anxiolytics | CLONAZEPAM TAB 2MG | CLONAZEPAM TAB 2 MG | Tier 1 | | | | |
| Anxiolytics | CLORAZ DIPOT TAB 15MG | CLORAZEPATE DIPOTASSIUM TAB 15 MG | Tier 1 | | | | |
| Anxiolytics | CLORAZ DIPOT TAB 3.75MG | CLORAZEPATE DIPOTASSIUM TAB 3.75 MG | Tier 1 | | | | |
| Anxiolytics | CLORAZ DIPOT TAB 7.5MG | CLORAZEPATE DIPOTASSIUM TAB 7.5 MG | Tier 1 | | | | |
| Anxiolytics | DIAZEPAM CON 25MG/5ML | DIAZEPAM CONC 5 MG/ML | Tier 1 | | | | |
| Anxiolytics | DIAZEPAM CON 5MG/ML | DIAZEPAM CONC 5 MG/ML | Tier 1 | | | | |
| Anxiolytics | DIAZEPAM SOL 5MG/5ML | DIAZEPAM ORAL SOLN 1 MG/ML | Tier 1 | | | | |
| Anxiolytics | DIAZEPAM TAB 10MG | DIAZEPAM TAB 10 MG | Tier 1 | | | | |
| Anxiolytics | DIAZEPAM TAB 2MG | DIAZEPAM TAB 2 MG | Tier 1 | | | | |
| Anxiolytics | DIAZEPAM TAB 5MG | DIAZEPAM TAB 5 MG | Tier 1 | | | | |
| Anxiolytics | HYDROXYZ HCL SYP 10MG/5ML | HYDROXYZINE HCL SYRUP 10 MG/5ML | Tier 1 | | | | |
| Anxiolytics | HYDROXYZ HCL TAB 10MG | HYDROXYZINE HCL TAB 10 MG | Tier 1 | | | | |
| Anxiolytics | HYDROXYZ HCL TAB 25MG | HYDROXYZINE HCL TAB 25 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Anxiolytics | HYDROXYZ HCL TAB 50MG | HYDROXYZINE HCL TAB 50 MG | Tier 1 | | | | |
| Anxiolytics | HYDROXYZ PAM CAP 100MG | HYDROXYZINE PAMOATE CAP 100 MG | Tier 1 | | | | |
| Anxiolytics | HYDROXYZ PAM CAP 25MG | HYDROXYZINE PAMOATE CAP 25 MG | Tier 1 | | | | |
| Anxiolytics | HYDROXYZ PAM CAP 50MG | HYDROXYZINE PAMOATE CAP 50 MG | Tier 1 | | | | |
| Anxiolytics | KLONOPIN TAB 0.5MG | CLONAZEPAM TAB 0.5 MG | Tier 3 | | | X | |
| Anxiolytics | KLONOPIN TAB 1MG | CLONAZEPAM TAB 1 MG | Tier 3 | | | X | |
| Anxiolytics | KLONOPIN TAB 2MG | CLONAZEPAM TAB 2 MG | Tier 3 | | | X | |
| Anxiolytics | LORAZEPAM CON 2MG/ML | LORAZEPAM CONC 2 MG/ML | Tier 1 | | | | |
| Anxiolytics | LORAZEPAM TAB 0.5MG | LORAZEPAM TAB 0.5 MG | Tier 1 | | | | |
| Anxiolytics | LORAZEPAM TAB 1MG | LORAZEPAM TAB 1 MG | Tier 1 | | | | |
| Anxiolytics | LORAZEPAM TAB 2MG | LORAZEPAM TAB 2 MG | Tier 1 | | | | |
| Anxiolytics | LOREEV XR CAP 1.5MG | LORAZEPAM CAP ER 24HR SPRINKLE 1.5 MG | Tier 3 | | | | |
| Anxiolytics | LOREEV XR CAP 1MG | LORAZEPAM CAP ER 24HR SPRINKLE 1 MG | Tier 3 | | | | |
| Anxiolytics | LOREEV XR CAP 2MG | LORAZEPAM CAP ER 24HR SPRINKLE 2 MG | Tier 3 | | | | |
| Anxiolytics | LOREEV XR CAP 3MG | LORAZEPAM CAP ER 24HR SPRINKLE 3 MG | Tier 3 | | | | |
| Anxiolytics | MEPROBAMATE TAB 200MG | MEPROBAMATE TAB 200 MG | Tier 1 | | | | |
| Anxiolytics | MEPROBAMATE TAB 400MG | MEPROBAMATE TAB 400 MG | Tier 1 | | | | |
| Anxiolytics | MIDAZOLAM SYP 2MG/ML | MIDAZOLAM HCL SYRUP 2 MG/ML (BASE EQUIVALENT) | Tier 1 | | | | |
| Anxiolytics | OXAZEPAM CAP 10MG | OXAZEPAM CAP 10 MG | Tier 1 | | | | |
| Anxiolytics | OXAZEPAM CAP 15MG | OXAZEPAM CAP 15 MG | Tier 1 | | | | |
| Anxiolytics | OXAZEPAM CAP 30MG | OXAZEPAM CAP 30 MG | Tier 1 | | | | |
| Anxiolytics | TRANXENE T TAB 7.5MG | CLORAZEPATE DIPOTASSIUM TAB 7.5 MG | Tier 3 | | | | |
| Anxiolytics | VALIUM TAB 10MG | DIAZEPAM TAB 10 MG | Tier 3 | | | X | |
| Anxiolytics | VALIUM TAB 2MG | DIAZEPAM TAB 2 MG | Tier 3 | | | X | |
| Anxiolytics | VALIUM TAB 5MG | DIAZEPAM TAB 5 MG | Tier 3 | | | X | |
| Anxiolytics | VISTARIL CAP 25MG | HYDROXYZINE PAMOATE CAP 25 MG | Tier 3 | | | | |
| Anxiolytics | VISTARIL CAP 50MG | HYDROXYZINE PAMOATE CAP 50 MG | Tier 3 | | | | |
| Anxiolytics | XANAX TAB 0.25MG | ALPRAZOLAM TAB 0.25 MG | Tier 3 | | | X | |
| Anxiolytics | XANAX TAB 0.5MG | ALPRAZOLAM TAB 0.5 MG | Tier 3 | | | X | |
| Anxiolytics | XANAX TAB 1MG | ALPRAZOLAM TAB 1 MG | Tier 3 | | | X | |
| Anxiolytics | XANAX TAB 2MG | ALPRAZOLAM TAB 2 MG | Tier 3 | | | X | |
| Anxiolytics | XANAX XR TAB 0.5MG | ALPRAZOLAM TAB ER 24HR 0.5 MG | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-------------------------|---|------------|------|--------------|--------------|-----------|
| Anxiolytics | XANAX XR TAB 1MG | ALPRAZOLAM TAB ER 24HR 1 MG | Tier 3 | | | X | |
| Anxiolytics | XANAX XR TAB 2MG | ALPRAZOLAM TAB ER 24HR 2 MG | Tier 3 | | | X | |
| Anxiolytics | XANAX XR TAB 3MG | ALPRAZOLAM TAB ER 24HR 3 MG | Tier 3 | | | X | |
| Anxiolytics - Drugs to Treat Anxiety | DORAL TAB 15MG | QUAZEPAM TAB 15 MG | Tier 3 | | | X | |
| Anxiolytics - Drugs to Treat Anxiety | MIDAZOLAM SUS 1MG/ML | *MIDAZOLAM SUSP 1 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Anxiolytics - Drugs to Treat Anxiety | QUAZEPAM TAB 15MG | QUAZEPAM TAB 15 MG | Tier 1 | | | X | |
| Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines - ADHD Drugs | QELBREE CAP 100MG ER | VILOXAZINE HCL CAP ER 24HR 100 MG | Tier 3 | | X | X | |
| Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines - ADHD Drugs | QELBREE CAP 150MG ER | VILOXAZINE HCL CAP ER 24HR 150 MG | Tier 3 | | X | X | |
| Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines - ADHD Drugs | QELBREE CAP 200MG ER | VILOXAZINE HCL CAP ER 24HR 200 MG | Tier 3 | | X | X | |
| Bipolar Agents | DEPAKOTE TAB 125MG DR | DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG | Tier 3 | | | | |
| Bipolar Agents | DEPAKOTE TAB 250MG DR | DIVALPROEX SODIUM TAB DELAYED RELEASE 250 MG | Tier 3 | | | | |
| Bipolar Agents | DEPAKOTE TAB 500MG DR | DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG | Tier 3 | | | | |
| Bipolar Agents | DEPAKOTE ER TAB 250MG | DIVALPROEX SODIUM TAB ER 24 HR 250 MG | Tier 3 | | | | |
| Bipolar Agents | DEPAKOTE ER TAB 500MG | DIVALPROEX SODIUM TAB ER 24 HR 500 MG | Tier 3 | | | | |
| Bipolar Agents | DEPAKOTE SPR CAP 125MG | DIVALPROEX SODIUM CAP DELAYED RELEASE SPRINKLE 125 MG | Tier 3 | | | | |
| Bipolar Agents | DIVALPROEX CAP 125MG | DIVALPROEX SODIUM CAP DELAYED RELEASE SPRINKLE 125 MG | Tier 1 | | | | |
| Bipolar Agents | DIVALPROEX TAB 125MG DR | DIVALPROEX SODIUM TAB DELAYED RELEASE 125 MG | Tier 1 | | | | |
| Bipolar Agents | DIVALPROEX TAB 250MG DR | DIVALPROEX SODIUM TAB DELAYED RELEASE 250 MG | Tier 1 | | | | |
| Bipolar Agents | DIVALPROEX TAB 250MG ER | DIVALPROEX SODIUM TAB ER 24 HR 250 MG | Tier 1 | | | | |
| Bipolar Agents | DIVALPROEX TAB 500MG DR | DIVALPROEX SODIUM TAB DELAYED RELEASE 500 MG | Tier 1 | | | | |
| Bipolar Agents | DIVALPROEX TAB 500MG ER | DIVALPROEX SODIUM TAB ER 24 HR 500 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Bipolar Agents | EQUETRO CAP 100MG | CARBAMAZEPINE (ANTIPSYCHOTIC) CAP ER 12HR 100 MG | Tier 3 | | | | |
| Bipolar Agents | EQUETRO CAP 200MG | CARBAMAZEPINE (ANTIPSYCHOTIC) CAP ER 12HR 200 MG | Tier 3 | | | | |
| Bipolar Agents | EQUETRO CAP 300MG | CARBAMAZEPINE (ANTIPSYCHOTIC) CAP ER 12HR 300 MG | Tier 3 | | | | |
| Bipolar Agents | LITHIUM SOL 8MEQ/5ML | LITHIUM ORAL SOLUTION 8 MEQ/5ML | Tier 1 | | | | |
| Bipolar Agents | LITHIUM CARB CAP 150MG | LITHIUM CARBONATE CAP 150 MG | Tier 1 | | | | |
| Bipolar Agents | LITHIUM CARB CAP 300MG | LITHIUM CARBONATE CAP 300 MG | Tier 1 | | | | |
| Bipolar Agents | LITHIUM CARB CAP 600MG | LITHIUM CARBONATE CAP 600 MG | Tier 1 | | | | |
| Bipolar Agents | LITHIUM CARB TAB 300MG | LITHIUM CARBONATE TAB 300 MG | Tier 1 | | | | |
| Bipolar Agents | LITHIUM CARB TAB 300MG ER | LITHIUM CARBONATE TAB ER 300 MG | Tier 1 | | | | |
| Bipolar Agents | LITHIUM CARB TAB 450MG ER | LITHIUM CARBONATE TAB ER 450 MG | Tier 1 | | | | |
| Bipolar Agents | LITHOBID TAB 300MG CR | LITHIUM CARBONATE TAB ER 300 MG | Tier 3 | | | | |
| Blood Glucose Regulators | ACARBOSE TAB 100MG | ACARBOSE TAB 100 MG | Tier 1 | | | | |
| Blood Glucose Regulators | ACARBOSE TAB 25MG | ACARBOSE TAB 25 MG | Tier 1 | | | | |
| Blood Glucose Regulators | ACARBOSE TAB 50MG | ACARBOSE TAB 50 MG | Tier 1 | | | | |
| Blood Glucose Regulators | ACTOPLUS MET TAB 15-850MG | PIOGLITAZONE HCL-METFORMIN HCL TAB 15-850 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | ACTOS TAB 15MG | PIOGLITAZONE HCL TAB 15 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Blood Glucose Regulators | ACTOS TAB 30MG | PIOGLITAZONE HCL TAB 30 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Blood Glucose Regulators | ACTOS TAB 45MG | PIOGLITAZONE HCL TAB 45 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Blood Glucose Regulators | ADLYXIN INJ 10/20MCG | LIXISENATIDE PEN-INJ STARTER KIT 10 MCG/0.2ML & 20 MCG/0.2ML | Tier 3 | | | | |
| Blood Glucose Regulators | ADLYXIN INJ 20MCG | LIXISENATIDE SOLN PEN-INJECTOR 20 MCG/0.2ML (100 MCG/ML) | Tier 3 | | | | |
| Blood Glucose Regulators | ADMELOG INJ 100U/ML | INSULIN LISPRO INJ SOLN 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | ADMELOG SOLO INJ 100U/ML | INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (1 UNIT DIAL) | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | AFREZZA POW 12 UNIT | INSULIN REGULAR (HUMAN) INHALATION POWDER 12 UNIT/ CARTRIDGE | Tier 3 | | | | |
| Blood Glucose Regulators | AFREZZA POW 4-8 UNIT | INSULIN REGULAR (HUMAN) INHAL POWD 90 X 4 UNIT & 90 X 8 UNIT | Tier 3 | | | | |
| Blood Glucose Regulators | AFREZZA POW 4-8-12 | INSULIN REGULAR (HUMAN) INH POWD 60X4 & 60X8 & 60X12 UT/ CART | Tier 3 | | | | |
| Blood Glucose Regulators | AFREZZA POW 4UNIT | INSULIN REGULAR (HUMAN) INHALATION POWDER 4 UNIT/ CARTRIDGE | Tier 3 | | | | |
| Blood Glucose Regulators | AFREZZA POW 8 UNIT | INSULIN REGULAR (HUMAN) INHALATION POWDER 8 UNIT/ CARTRIDGE | Tier 3 | | | | |
| Blood Glucose Regulators | AFREZZA POW 8-12UNIT | INSULIN REGULAR (HUMAN) INH POWD 90 X 8 UNIT & 90 X 12 UNIT | Tier 3 | | | | |
| Blood Glucose Regulators | ALOG/PIOGLIT TAB 12.5-15 | ALOGLIPTIN-PIOGLITAZONE TAB 12.5-15 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOG/PIOGLIT TAB 12.5-30 | ALOGLIPTIN-PIOGLITAZONE TAB 12.5-30 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOG/PIOGLIT TAB 12.5-45 | ALOGLIPTIN-PIOGLITAZONE TAB 12.5-45 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOG/PIOGLIT TAB 25-15MG | ALOGLIPTIN-PIOGLITAZONE TAB 25-15 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOG/PIOGLIT TAB 25-30MG | ALOGLIPTIN-PIOGLITAZONE TAB 25-30 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOG/PIOGLIT TAB 25-45MG | ALOGLIPTIN-PIOGLITAZONE TAB 25-45 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOGLIPTIN TAB 12.5MG | ALOGLIPTIN BENZOATE TAB 12.5 MG (BASE EQUIV) | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOGLIPTIN TAB 25MG | ALOGLIPTIN BENZOATE TAB 25 MG (BASE EQUIV) | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOGLIPTIN TAB 6.25MG | ALOGLIPTIN BENZOATE TAB 6.25 MG (BASE EQUIV) | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOGLIPTIN/ TAB METFORM | ALOGLIPTIN-METFORMIN HCL TAB 12.5-500 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | ALOGLIPTIN/ TAB METFORM | ALOGLIPTIN-METFORMIN HCL TAB 12.5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | AMARYL TAB 1MG | GLIMEPIRIDE TAB 1 MG | Tier 3 | | | X | |
| Blood Glucose Regulators | AMARYL TAB 2MG | GLIMEPIRIDE TAB 2 MG | Tier 3 | | | X | |
| Blood Glucose Regulators | AMARYL TAB 4MG | GLIMEPIRIDE TAB 4 MG | Tier 3 | | | X | |
| Blood Glucose Regulators | APIDRA INJ SOLOSTAR | INSULIN GLULISINE SOLN PEN-INJECTOR INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | APIDRA INJ U-100 | INSULIN GLULISINE INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | BAQSIMI ONE POW 3MG/ DOSE | GLUCAGON NASAL POWDER 3 MG/DOSE | Tier 2 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | BAQSIMI TWO POW 3MG/DOSE | GLUCAGON NASAL POWDER 3 MG/DOSE | Tier 2 | | | | |
| Blood Glucose Regulators | BASAGLAR INJ 100UNIT | INSULIN GLARGINE SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | BASAGLAR INJ TEMPO PN | INSULIN GLARGINE PEN-INJ WITH TRANSMITTER PORT 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | BYDUREON BC INJ 2/0.85ML | EXENATIDE EXTENDED RELEASE SUSP AUTO-INJECTOR 2 MG/0.85ML | Tier 2 | X | X | | |
| Blood Glucose Regulators | BYETTA INJ 10MCG | EXENATIDE SOLN PEN-INJECTOR 10 MCG/0.04ML | Tier 2 | X | X | | |
| Blood Glucose Regulators | BYETTA INJ 5MCG | EXENATIDE SOLN PEN-INJECTOR 5 MCG/0.02ML | Tier 2 | X | X | | |
| Blood Glucose Regulators | CYCLOSET TAB 0.8MG | BROMOCRIPTINE MESYLATE TAB 0.8 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Blood Glucose Regulators | DAPAGLIFLOZI TAB 10MG | DAPAGLIFLOZIN PROPANEDIOL TAB 10 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Blood Glucose Regulators | DAPAGLIFLOZI TAB 5MG | DAPAGLIFLOZIN PROPANEDIOL TAB 5 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Blood Glucose Regulators | DAPAGLIF-MET TAB 10-1000 | DAPAGLIFLOZIN PROP-METFORMIN HCL TAB ER 24HR 10-1000 MG | Tier 3 | | X | X | |
| Blood Glucose Regulators | DAPAGLIF-MET TAB 5-1000MG | DAPAGLIFLOZIN PROP-METFORMIN HCL TAB ER 24HR 5-1000 MG | Tier 3 | | X | X | |
| Blood Glucose Regulators | DIAZOXIDE SUS 50MG/ML | DIAZOXIDE SUSP 50 MG/ML | Tier 1 | | | | |
| Blood Glucose Regulators | DUETACT TAB 30-2MG | PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | DUETACT TAB 30-4MG | PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-4 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | FARXIGA TAB 10MG | DAPAGLIFLOZIN PROPANEDIOL TAB 10 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | |
| Blood Glucose Regulators | FARXIGA TAB 5MG | DAPAGLIFLOZIN PROPANEDIOL TAB 5 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | |
| Blood Glucose Regulators | FIASP INJ 100/ML | INSULIN ASPART (WITH NIACINAMIDE) INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | FIASP FLEX INJ TOUCH | INSULIN ASPART (WITH NIACINAMIDE) SOL PEN-INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | FIASP PENFIL INJ U-100 | INSULIN ASPART (WITH NIACINAMIDE) SOLN CARTRIDGE 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | FIASP PMPCRT INJ U-100 | INSULIN ASPART (WITH NIACINAMIDE) SOLN CARTRIDGE 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | GLARGIN YFGN INJ 100U/ML | INSULIN GLARGINE-YFGN SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | GLARGIN YFGN SOL 100U/ML | INSULIN GLARGINE-YFGN INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | GLIMEPIRIDE TAB 1MG | GLIMEPIRIDE TAB 1 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIMEPIRIDE TAB 2MG | GLIMEPIRIDE TAB 2 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIMEPIRIDE TAB 4MG | GLIMEPIRIDE TAB 4 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIP/METFORM TAB 2.5-250 | GLIPIZIDE-METFORMIN HCL TAB 2.5-250 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIP/METFORM TAB 2.5-250M | GLIPIZIDE-METFORMIN HCL TAB 2.5-250 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIP/METFORM TAB 2.5-500 | GLIPIZIDE-METFORMIN HCL TAB 2.5-500 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIP/METFORM TAB 2.5-500M | GLIPIZIDE-METFORMIN HCL TAB 2.5-500 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIP/METFORM TAB 5-500MG | GLIPIZIDE-METFORMIN HCL TAB 5-500 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE POW | GLIPIZIDE POWDER | Tier 3 | | | | |
| Blood Glucose Regulators | GLIPIZIDE TAB 10MG | GLIPIZIDE TAB 10 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE TAB 2.5MG | GLIPIZIDE TAB 2.5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE TAB 5MG | GLIPIZIDE TAB 5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE ER TAB 10MG | GLIPIZIDE TAB ER 24HR 10 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE ER TAB 2.5MG | GLIPIZIDE TAB ER 24HR 2.5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE ER TAB 5MG | GLIPIZIDE TAB ER 24HR 5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE XL TAB 10MG | GLIPIZIDE TAB ER 24HR 10 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE XL TAB 2.5MG | GLIPIZIDE TAB ER 24HR 2.5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLIPIZIDE XL TAB 5MG | GLIPIZIDE TAB ER 24HR 5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLUCAGEN INJ HYPOKIT | GLUCAGON HCL (RDNA) FOR INJ 1 MG (BASE EQUIV) | Tier 3 | | | | |
| Blood Glucose Regulators | GLUCAGON KIT 1MG | GLUCAGON (RDNA) FOR INJ KIT 1 MG | Tier 3 | | | | |
| Blood Glucose Regulators | GLUCAGON KIT 1MG | GLUCAGON (RDNA) FOR INJ KIT 1 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLUCAGON EMR SOL 1MG | GLUCAGON HCL FOR INJ 1 MG | Tier 2 | | | | |
| Blood Glucose Regulators | GLUCOTROL XL TAB 10MG | GLIPIZIDE TAB ER 24HR 10 MG | Tier 3 | | | | |
| Blood Glucose Regulators | GLUCOTROL XL TAB 2.5MG | GLIPIZIDE TAB ER 24HR 2.5 MG | Tier 3 | | | | |
| Blood Glucose Regulators | GLUCOTROL XL TAB 5MG | GLIPIZIDE TAB ER 24HR 5 MG | Tier 3 | | | | |
| Blood Glucose Regulators | GLUMETZA TAB 1000MG | METFORMIN HCL TAB ER 24HR MODIFIED RELEASE 1000 MG | Tier 3 | | | X | |
| Blood Glucose Regulators | GLUMETZA TAB 500MG | METFORMIN HCL TAB ER 24HR MODIFIED RELEASE 500 MG | Tier 3 | | | X | |
| Blood Glucose Regulators | GLYB/METFORM TAB 1.25-250 | GLYBURIDE-METFORMIN TAB 1.25-250 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLYB/METFORM TAB 2.5-500 | GLYBURIDE-METFORMIN TAB 2.5-500 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLYB/METFORM TAB 5-500MG | GLYBURIDE-METFORMIN TAB 5-500 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | GLYBURID MCR TAB 1.5MG | GLYBURIDE MICRONIZED TAB 1.5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLYBURID MCR TAB 3MG | GLYBURIDE MICRONIZED TAB 3 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLYBURID MCR TAB 6MG | GLYBURIDE MICRONIZED TAB 6 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLYBURIDE POW | GLYBURIDE POWDER | Tier 3 | | | | |
| Blood Glucose Regulators | GLYBURIDE TAB 1.25MG | GLYBURIDE TAB 1.25 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLYBURIDE TAB 2.5MG | GLYBURIDE TAB 2.5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLYBURIDE TAB 5MG | GLYBURIDE TAB 5 MG | Tier 1 | | | | |
| Blood Glucose Regulators | GLYNASE TAB 1.5MG | GLYBURIDE MICRONIZED TAB 1.5 MG | Tier 3 | | | | |
| Blood Glucose Regulators | GLYNASE TAB 3MG | GLYBURIDE MICRONIZED TAB 3 MG | Tier 3 | | | | |
| Blood Glucose Regulators | GLYNASE TAB 6MG | GLYBURIDE MICRONIZED TAB 6 MG | Tier 3 | | | | |
| Blood Glucose Regulators | GLYXAMBI TAB 10-5 MG | EMPAGLIFLOZIN-LINAGLIPTIN TAB 10-5 MG | Tier 2 | X | X | | |
| Blood Glucose Regulators | GLYXAMBI TAB 25-5 MG | EMPAGLIFLOZIN-LINAGLIPTIN TAB 25-5 MG | Tier 2 | X | X | | |
| Blood Glucose Regulators | GVOKE HYPO 1 INJ .5/.1ML | GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML | Tier 2 | | | | |
| Blood Glucose Regulators | GVOKE HYPO 1 INJ 1MG/.2ML | GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML | Tier 2 | | | | |
| Blood Glucose Regulators | GVOKE HYPO 2 INJ .5/.1ML | GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML | Tier 2 | | | | |
| Blood Glucose Regulators | GVOKE HYPO 2 INJ 1MG/.2ML | GLUCAGON SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML | Tier 2 | | | | |
| Blood Glucose Regulators | GVOKE KIT SOL 1MG/0.2M | GLUCAGON SUBCUTANEOUS SOLN 1 MG/0.2ML | Tier 2 | | | | |
| Blood Glucose Regulators | GVOKE PFS INJ | GLUCAGON SUBCUTANEOUS SOLN PREF SYRINGE 0.5 MG/0.1ML | Tier 2 | | | | |
| Blood Glucose Regulators | GVOKE PFS INJ | GLUCAGON SUBCUTANEOUS SOLN PREF SYRINGE 1 MG/0.2ML | Tier 2 | | | | |
| Blood Glucose Regulators | HUMALOG INJ 100/ML | INSULIN LISPRO INJ SOLN 100 UNIT/ML | Tier 3 | | | | |
| Blood Glucose Regulators | HUMALOG INJ 100/ML | INSULIN LISPRO SOLN CARTRIDGE 100 UNIT/ML | Tier 2 | | | | |
| Blood Glucose Regulators | HUMALOG JR INJ 100/ML | INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (0.5 UNIT DIAL) | Tier 2 | | | | |
| Blood Glucose Regulators | HUMALOG KWIK INJ 100/ML | INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (1 UNIT DIAL) | Tier 2 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | HUMALOG KWIK INJ 200/ML | INSULIN LISPRO SOLN PEN-INJECTOR 200 UNIT/ML | Tier 2 | | | | |
| Blood Glucose Regulators | HUMALOG MIX INJ 50/50 | INSULIN LISPRO PROTAMINE & LISPRO INJ 100 UNIT/ML (50-50) | Tier 1 | | | | |
| Blood Glucose Regulators | HUMALOG MIX INJ 50/50KWP | INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (50-50) | Tier 2 | | | | |
| Blood Glucose Regulators | HUMALOG MIX INJ 75/25KWP | INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (75-25) | Tier 2 | | | | |
| Blood Glucose Regulators | HUMALOG MIX SUS 75/25 | INSULIN LISPRO PROT & LISPRO INJ 100 UNIT/ML (75-25) | Tier 1 | | | | |
| Blood Glucose Regulators | HUMALOG TMPO INJ 100/ML | INSULIN LISPRO SOLN PEN-INJ W/TRANSMITTER PORT 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | HUMULIN INJ 70/30 | INSULIN NPH ISOPHANE & REGULAR HUMAN INJ 100 UNIT/ML (70-30) | Tier 1 | | | | |
| Blood Glucose Regulators | HUMULIN INJ 70/30KWP | INSULIN NPH & REGULAR SUSP PEN-INJ 100 UNIT/ML (70-30) | Tier 2 | | | | |
| Blood Glucose Regulators | HUMULIN N INJ U-100 | INSULIN NPH (HUMAN) (ISOPHANE) INJ 100 UNIT/ML | Tier 1 | | | | |
| Blood Glucose Regulators | HUMULIN N INJ U-100KWP | INSULIN NPH (HUMAN) (ISOPHANE) SUSP PEN-INJECTOR 100 UNIT/ML | Tier 2 | | | | |
| Blood Glucose Regulators | HUMULIN R INJ U-100 | INSULIN REGULAR (HUMAN) INJ 100 UNIT/ML | Tier 1 | | | | |
| Blood Glucose Regulators | HUMULIN R INJ U-500 | INSULIN REGULAR (HUMAN) INJ 500 UNIT/ML | Tier 1 | | | | |
| Blood Glucose Regulators | HUMULIN R INJ U-500 | INSULIN REGULAR (HUMAN) SOLN PEN-INJECTOR 500 UNIT/ML | Tier 2 | | | | |
| Blood Glucose Regulators | INS ASP PROT INJ FLEXPEN | INSULIN ASPART PROT & ASPART SUS PEN-INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | INS DEGL FLX INJ 100UNIT | INSULIN DEGLUDEC SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | INS DEGL FLX INJ 200UNIT | INSULIN DEGLUDEC SOLN PEN-INJECTOR 200 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | INSULIN ASPA INJ 100/ML | INSULIN ASPART INJ SOLN 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | INSULIN ASPA INJ 70/30 | INSULIN ASPART PROT & ASPART (HUMAN) INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | INSULIN ASPA INJ FLEXPEN | INSULIN ASPART SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | INSULIN ASPA INJ PENFILL | INSULIN ASPART SOLN CARTRIDGE 100 UNIT/ML | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | INSULIN DEGL INJ 100UNIT | INSULIN DEGLUDEC INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | INSULIN GLAR INJ 100U/ML | INSULIN GLARGINE SOLN PEN-INJECTOR 100 UNIT/ML | Tier 1 | | | X | |
| Blood Glucose Regulators | INSULIN GLAR INJ 300/ML | INSULIN GLARGINE SOLN PEN-INJECTOR 300 UNIT/ML (2 UNIT DIAL) | Tier 2 | | | X | |
| Blood Glucose Regulators | INSULIN GLAR INJ 300/ML | INSULIN GLARGINE SOLN PEN-INJECTOR 300 UNIT/ML (1 UNIT DIAL) | Tier 2 | | | X | |
| Blood Glucose Regulators | INSULIN GLAR SOL 100U/ML | INSULIN GLARGINE INJ 100 UNIT/ML | Tier 1 | | | X | |
| Blood Glucose Regulators | INSULIN LISP INJ 100/ML | INSULIN LISPRO INJ SOLN 100 UNIT/ML | Tier 1 | | | | |
| Blood Glucose Regulators | INSULIN LISP INJ 100/ML | INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (1 UNIT DIAL) | Tier 2 | | | | |
| Blood Glucose Regulators | INSULIN LISP INJ JUNIOR | INSULIN LISPRO SOLN PEN-INJECTOR 100 UNIT/ML (0.5 UNIT DIAL) | Tier 2 | | | | |
| Blood Glucose Regulators | INSULIN LISP INJ PROTAMIN | INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (75-25) | Tier 2 | | | | |
| Blood Glucose Regulators | INVOKAMET TAB 150-1000 | CANAGLIFLOZIN-METFORMIN HCL TAB 150-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKAMET TAB 150-500 | CANAGLIFLOZIN-METFORMIN HCL TAB 150-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKAMET TAB 50-1000 | CANAGLIFLOZIN-METFORMIN HCL TAB 50-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKAMET TAB 50-500MG | CANAGLIFLOZIN-METFORMIN HCL TAB 50-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKAMET XR TAB 150-1000 | CANAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 150-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKAMET XR TAB 150-500 | CANAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 150-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKAMET XR TAB 50-1000 | CANAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 50-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKAMET XR TAB 50-500MG | CANAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 50-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKANA TAB 100MG | CANAGLIFLOZIN TAB 100 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | INVOKANA TAB 300MG | CANAGLIFLOZIN TAB 300 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | JANUMET TAB 50-1000 | SITAGLIPTIN-METFORMIN HCL TAB 50-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | JANUMET TAB 50-500MG | SITAGLIPTIN-METFORMIN HCL TAB 50-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | JANUMET XR TAB 100-1000 | SITAGLIPTIN-METFORMIN HCL TAB ER 24HR 100-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | JANUMET XR TAB 50-1000 | SITAGLIPTIN-METFORMIN HCL TAB ER 24HR 50-1000 MG | Tier 3 | X | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | JANUMET XR TAB 50-500MG | SITAGLIPTIN-METFORMIN HCL TAB ER 24HR 50-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | JANUVIA TAB 100MG | SITAGLIPTIN PHOSPHATE TAB 100 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Blood Glucose Regulators | JANUVIA TAB 25MG | SITAGLIPTIN PHOSPHATE TAB 25 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Blood Glucose Regulators | JANUVIA TAB 50MG | SITAGLIPTIN PHOSPHATE TAB 50 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Blood Glucose Regulators | JARDIANCE TAB 10MG | EMPAGLIFLOZIN TAB 10 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | JARDIANCE TAB 25MG | EMPAGLIFLOZIN TAB 25 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | JENTADUETO TAB 2.5-1000 | LINAGLIPTIN-METFORMIN HCL TAB 2.5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | JENTADUETO TAB 2.5-500 | LINAGLIPTIN-METFORMIN HCL TAB 2.5-500 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | JENTADUETO TAB 2.5-850 | LINAGLIPTIN-METFORMIN HCL TAB 2.5-850 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | JENTADUETO TAB XR | LINAGLIPTIN-METFORMIN HCL TAB ER 24HR 2.5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | JENTADUETO TAB XR | LINAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | KAZANO 12.5- TAB 1000MG | ALOGLIPTIN-METFORMIN HCL TAB 12.5-1000 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | KAZANO 12.5- TAB 500MG | ALOGLIPTIN-METFORMIN HCL TAB 12.5-500 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | KOMBIGLYZ XR TAB 2.5-1000 | SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 2.5-1000 MG | Tier 3 | | X | X | |
| Blood Glucose Regulators | KOMBIGLYZ XR TAB 5-1000MG | SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-1000 MG | Tier 3 | | X | X | |
| Blood Glucose Regulators | KOMBIGLYZ XR TAB 5-500MG | SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-500 MG | Tier 3 | | X | X | |
| Blood Glucose Regulators | LANTUS INJ 100/ML | INSULIN GLARGINE INJ 100 UNIT/ML | Tier 1 | | | | |
| Blood Glucose Regulators | LANTUS SOLOS INJ 100/ML | INSULIN GLARGINE SOLN PEN-INJECTOR 100 UNIT/ML | Tier 1 | | | | |
| Blood Glucose Regulators | LEVEMIR INJ | INSULIN DETEMIR INJ 100 UNIT/ML | Tier 3 | X | | X | |
| Blood Glucose Regulators | LEVEMIR INJ FLEXPEN | INSULIN DETEMIR SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | X | | X | |
| Blood Glucose Regulators | LEVEMIR INJ FLEXTOUC | INSULIN DETEMIR SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | X | | X | |
| Blood Glucose Regulators | LYUMJEV INJ 100UT/ML | INSULIN LISPRO-AABC INJ 100 UNIT/ML | Tier 1 | | | | |
| Blood Glucose Regulators | LYUMJEV KWPN INJ 100UT/ML | INSULIN LISPRO-AABC SOLN PEN-INJ 100 UNIT/ML (1 UNIT DIAL) | Tier 2 | | | | |
| Blood Glucose Regulators | LYUMJEV KWPN INJ 200UT/ML | INSULIN LISPRO-AABC SOLN PEN-INJECTOR 200 UNIT/ML | Tier 2 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | LYUMJEV TMPO INJ 100UT/ML | INSULIN LISPRO-AABC SOLN PEN-INJ W/TRANSMIT PORT 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | METFORMIN SOL 500/5ML | METFORMIN HCL ORAL SOLN 500 MG/5ML | Tier 1 | | | | |
| Blood Glucose Regulators | METFORMIN TAB 1000 ER | METFORMIN HCL TAB ER 24HR MODIFIED RELEASE 1000 MG | Tier 1 | | | X | |
| Blood Glucose Regulators | METFORMIN TAB 1000MG | METFORMIN HCL TAB 1000 MG | Tier 1 | | | | |
| Blood Glucose Regulators | METFORMIN TAB 500MG | METFORMIN HCL TAB 500 MG | Tier 1 | | | | |
| Blood Glucose Regulators | METFORMIN TAB 500MG ER | METFORMIN HCL TAB ER 24HR OSMOTIC 500 MG | Tier 1 | | | X | |
| Blood Glucose Regulators | METFORMIN TAB 500MG ER | METFORMIN HCL TAB ER 24HR MODIFIED RELEASE 500 MG | Tier 1 | | | X | |
| Blood Glucose Regulators | METFORMIN TAB 500MG ER | METFORMIN HCL TAB ER 24HR 500 MG | Tier 1 | | | | |
| Blood Glucose Regulators | METFORMIN TAB 625MG | METFORMIN HCL TAB 625 MG | Tier 1 | | | X | |
| Blood Glucose Regulators | METFORMIN TAB 750MG ER | METFORMIN HCL TAB ER 24HR 750 MG | Tier 1 | | | | |
| Blood Glucose Regulators | METFORMIN TAB 850MG | METFORMIN HCL TAB 850 MG | Tier 1 | | | | |
| Blood Glucose Regulators | METFORMIN ER TAB 1000MG | METFORMIN HCL TAB ER 24HR OSMOTIC 1000 MG | Tier 1 | | | X | |
| Blood Glucose Regulators | METFORMIN ER TAB 1000MG | METFORMIN HCL TAB ER 24HR MODIFIED RELEASE 1000 MG | Tier 1 | | | X | |
| Blood Glucose Regulators | MIGLITOL TAB 100MG | MIGLITOL TAB 100 MG | Tier 1 | | | | |
| Blood Glucose Regulators | MIGLITOL TAB 25MG | MIGLITOL TAB 25 MG | Tier 1 | | | | |
| Blood Glucose Regulators | MIGLITOL TAB 50MG | MIGLITOL TAB 50 MG | Tier 1 | | | | |
| Blood Glucose Regulators | MYXREDLIN SOL 1UNIT/ML | INSULIN REGULAR (HUMAN) IN NAACL 0.9% IV SOLN 100 UNIT/100ML | Tier 3 | | | | |
| Blood Glucose Regulators | NATEGLINIDE TAB 120MG | NATEGLINIDE TAB 120 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | NATEGLINIDE TAB 60MG | NATEGLINIDE TAB 60 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | NESINA TAB 12.5MG | ALOGLIPTIN BENZOATE TAB 12.5 MG (BASE EQUIV) | Tier 3 | | X | | |
| Blood Glucose Regulators | NESINA TAB 25MG | ALOGLIPTIN BENZOATE TAB 25 MG (BASE EQUIV) | Tier 3 | | X | | |
| Blood Glucose Regulators | NESINA TAB 6.25MG | ALOGLIPTIN BENZOATE TAB 6.25 MG (BASE EQUIV) | Tier 3 | | X | | |
| Blood Glucose Regulators | NOVOLIN INJ 70/30 | INSULIN NPH ISOPHANE & REGULAR HUMAN INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLIN INJ 70/30 FP | INSULIN NPH & REGULAR SUSP PEN-INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLIN N INJ 100 UNIT | INSULIN NPH (HUMAN) (ISOPHANE) SUSP PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLIN N INJ RELION | INSULIN NPH (HUMAN) (ISOPHANE) INJ 100 UNIT/ML | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | NOVOLIN N INJ U-100 | INSULIN NPH (HUMAN) (ISOPHANE) INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLIN R INJ 100 UNIT | INSULIN REGULAR (HUMAN) SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLIN R INJ RELION | INSULIN REGULAR (HUMAN) INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLIN R INJ U-100 | INSULIN REGULAR (HUMAN) INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLIN70/30 INJ RELION | INSULIN NPH ISOPHANE & REGULAR HUMAN INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG INJ 100/ML | INSULIN ASPART INJ SOLN 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG INJ FLEX REL | INSULIN ASPART SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG INJ FLEXPEN | INSULIN ASPART SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG INJ PENFILL | INSULIN ASPART SOLN CARTRIDGE 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG INJ RELION | INSULIN ASPART INJ SOLN 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG MIX INJ 70/30 | INSULIN ASPART PROT & ASPART (HUMAN) INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG MIX INJ FLEX REL | INSULIN ASPART PROT & ASPART SUS PEN-INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG MIX INJ FLEXPEN | INSULIN ASPART PROT & ASPART SUS PEN-INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | NOVOLOG RELI INJ 70/30 | INSULIN ASPART PROT & ASPART (HUMAN) INJ 100 UNIT/ML (70-30) | Tier 3 | | | X | |
| Blood Glucose Regulators | ONGLYZA TAB 2.5MG | SAXAGLIPTIN HCL TAB 2.5 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Blood Glucose Regulators | ONGLYZA TAB 5MG | SAXAGLIPTIN HCL TAB 5 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Blood Glucose Regulators | OSENI TAB 12.5-15 | ALOGLIPTIN-PIOGLITAZONE TAB 12.5-15 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | OSENI TAB 12.5-30 | ALOGLIPTIN-PIOGLITAZONE TAB 12.5-30 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | OSENI TAB 12.5-45 | ALOGLIPTIN-PIOGLITAZONE TAB 12.5-45 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | OSENI TAB 25-15MG | ALOGLIPTIN-PIOGLITAZONE TAB 25-15 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | OSENI TAB 25-30MG | ALOGLIPTIN-PIOGLITAZONE TAB 25-30 MG | Tier 3 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | OSENI TAB 25-45MG | ALOGLIPTIN-PIOGLITAZONE TAB 25-45 MG | Tier 3 | | X | | |
| Blood Glucose Regulators | OZEMPIC INJ 2/1.5ML | SEMAGLUTIDE SOLN PEN-INJ 0.25 OR 0.5 MG/DOSE (2 MG/1.5ML) | Tier 2 | X | X | | |
| Blood Glucose Regulators | OZEMPIC INJ 2MG/3ML | SEMAGLUTIDE SOLN PEN-INJ 0.25 OR 0.5 MG/DOSE (2 MG/3ML) | Tier 2 | X | X | | |
| Blood Glucose Regulators | OZEMPIC INJ 4MG/3ML | SEMAGLUTIDE SOLN PEN-INJ 1 MG/DOSE (4 MG/3ML) | Tier 2 | X | X | | |
| Blood Glucose Regulators | OZEMPIC INJ 8MG/3ML | SEMAGLUTIDE SOLN PEN-INJ 2 MG/DOSE (8 MG/3ML) | Tier 2 | X | X | | |
| Blood Glucose Regulators | PIOGLIT/GLIM TAB 30-2MG | PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-2 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | PIOGLIT/GLIM TAB 30-4MG | PIOGLITAZONE HCL-GLIMEPIRIDE TAB 30-4 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | PIOGLITA/MET TAB 15-500MG | PIOGLITAZONE HCL-METFORMIN HCL TAB 15-500 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | PIOGLITA/MET TAB 15-850MG | PIOGLITAZONE HCL-METFORMIN HCL TAB 15-850 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | PIOGLITAZONE TAB 15MG | PIOGLITAZONE HCL TAB 15 MG (BASE EQUIV) | Tier 1 | | X | | |
| Blood Glucose Regulators | PIOGLITAZONE TAB 30MG | PIOGLITAZONE HCL TAB 30 MG (BASE EQUIV) | Tier 1 | | X | | |
| Blood Glucose Regulators | PIOGLITAZONE TAB 45MG | PIOGLITAZONE HCL TAB 45 MG (BASE EQUIV) | Tier 1 | | X | | |
| Blood Glucose Regulators | PRECOSE TAB 100MG | ACARBOSE TAB 100 MG | Tier 3 | | | | |
| Blood Glucose Regulators | PRECOSE TAB 25MG | ACARBOSE TAB 25 MG | Tier 3 | | | | |
| Blood Glucose Regulators | PRECOSE TAB 50MG | ACARBOSE TAB 50 MG | Tier 3 | | | | |
| Blood Glucose Regulators | PROGLYCEM SUS 50MG/ML | DIAZOXIDE SUSP 50 MG/ML | Tier 3 | | | | |
| Blood Glucose Regulators | QTERN TAB 10-5MG | DAPAGLIFLOZIN-SAXAGLIPTIN TAB 10-5 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | QTERN TAB 5-5MG | DAPAGLIFLOZIN-SAXAGLIPTIN TAB 5-5 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | REPAGLINIDE TAB 0.5MG | REPAGLINIDE TAB 0.5 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | REPAGLINIDE TAB 1MG | REPAGLINIDE TAB 1 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | REPAGLINIDE TAB 2MG | REPAGLINIDE TAB 2 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | RIOMET SOL 500/5ML | METFORMIN HCL ORAL SOLN 500 MG/5ML | Tier 3 | | | X | |
| Blood Glucose Regulators | RYBELSUS TAB 14MG | SEMAGLUTIDE TAB 14 MG | Tier 2 | X | X | | |
| Blood Glucose Regulators | RYBELSUS TAB 3MG | SEMAGLUTIDE TAB 3 MG | Tier 2 | X | X | | |
| Blood Glucose Regulators | RYBELSUS TAB 7MG | SEMAGLUTIDE TAB 7 MG | Tier 2 | X | X | | |
| Blood Glucose Regulators | SAXA/METFOR TAB 2.5-1000 | SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 2.5-1000 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | SAXA/METFOR TAB 5-1000MG | SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-1000 MG | Tier 1 | | X | | |
| Blood Glucose Regulators | SAXA/METFOR TAB 5-500MG | SAXAGLIPTIN-METFORMIN HCL TAB ER 24HR 5-500 MG | Tier 1 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | SAXAGLIPTIN TAB 2.5MG | SAXAGLIPTIN HCL TAB 2.5 MG (BASE EQUIV) | Tier 1 | | X | | |
| Blood Glucose Regulators | SAXAGLIPTIN TAB 5MG | SAXAGLIPTIN HCL TAB 5 MG (BASE EQUIV) | Tier 1 | | X | | |
| Blood Glucose Regulators | SEGLUROMET TAB 2.5-1000 | ERTUGLIFLOZIN-METFORMIN HCL TAB 2.5-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | SEGLUROMET TAB 2.5-500 | ERTUGLIFLOZIN-METFORMIN HCL TAB 2.5-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | SEGLUROMET TAB 75-1000 | ERTUGLIFLOZIN-METFORMIN HCL TAB 75-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | SEGLUROMET TAB 75-500 | ERTUGLIFLOZIN-METFORMIN HCL TAB 75-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | SEMGLEE INJ 100U/ML | INSULIN GLARGINE SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | SEMGLEE INJ 100U/ML | INSULIN GLARGINE-YFGN SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | SEMGLEE INJ 100U/ML | INSULIN GLARGINE-YFGN INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | SEMGLEE SOL 100U/ML | INSULIN GLARGINE INJ 100 UNIT/ML | Tier 1 | | | X | |
| Blood Glucose Regulators | SEMGLEE SOL 100U/ML | INSULIN GLARGINE-YFGN INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | SOLIQUA INJ 100/33 | INSULIN GLARGINE-LIXISENATIDE SOL PEN-INJ 100-33 UNIT-MCG/ML | Tier 2 | | X | | |
| Blood Glucose Regulators | STEGLATRO TAB 15MG | ERTUGLIFLOZIN L-PYROGLUTAMIC ACID TAB 15 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Blood Glucose Regulators | STEGLATRO TAB 5MG | ERTUGLIFLOZIN L-PYROGLUTAMIC ACID TAB 5 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Blood Glucose Regulators | STEGLUJAN TAB 15-100MG | ERTUGLIFLOZIN-SITAGLIPTIN TAB 15-100 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | STEGLUJAN TAB 5-100MG | ERTUGLIFLOZIN-SITAGLIPTIN TAB 5-100 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | SYMLINPEN 60 INJ 1000MCG | PRAMLINTIDE ACETATE PEN-INJ 1500 MCG/1.5ML (1000 MCG/ML) | Tier 3 | | X | | |
| Blood Glucose Regulators | SYMLINPEN 120 INJ 1000MCG | PRAMLINTIDE ACETATE PEN-INJ 2700 MCG/2.7ML (1000 MCG/ML) | Tier 3 | | X | | |
| Blood Glucose Regulators | SYNJARDY TAB | EMPAGLIFLOZIN-METFORMIN HCL TAB 12.5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | SYNJARDY TAB 12.5-500 | EMPAGLIFLOZIN-METFORMIN HCL TAB 12.5-500 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | SYNJARDY TAB 5-1000MG | EMPAGLIFLOZIN-METFORMIN HCL TAB 5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | SYNJARDY TAB 5-500MG | EMPAGLIFLOZIN-METFORMIN HCL TAB 5-500 MG | Tier 2 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | SYNJARDY XR TAB | EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 12.5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | SYNJARDY XR TAB 10-1000 | EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 10-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | SYNJARDY XR TAB 25-1000 | EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 25-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | SYNJARDY XR TAB 5-1000MG | EMPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | TOUJEO MAX INJ 300/ML | INSULIN GLARGINE SOLN PEN-INJECTOR 300 UNIT/ML (2 UNIT DIAL) | Tier 2 | | | | |
| Blood Glucose Regulators | TOUJEO SOLO INJ 300/ML | INSULIN GLARGINE SOLN PEN-INJECTOR 300 UNIT/ML (1 UNIT DIAL) | Tier 2 | | | | |
| Blood Glucose Regulators | TRADJENTA TAB 5MG | LINAGLIPTIN TAB 5 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | TRESIBA INJ 100UNIT | INSULIN DEGLUDEC INJ 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | TRESIBA FLEX INJ 100UNIT | INSULIN DEGLUDEC SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | TRESIBA FLEX INJ 200UNIT | INSULIN DEGLUDEC SOLN PEN-INJECTOR 200 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators | TRIJARDY XR TAB | EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 10-5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | TRIJARDY XR TAB | EMPAGLIFLOZIN-LINAGLIP-METFORMIN TAB ER 24HR 12.5-2.5-1000MG | Tier 2 | | X | | |
| Blood Glucose Regulators | TRIJARDY XR TAB | EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 25-5-1000 MG | Tier 2 | | X | | |
| Blood Glucose Regulators | TRIJARDY XR TAB | EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN TAB ER 24HR 5-2.5-1000MG | Tier 2 | | X | | |
| Blood Glucose Regulators | TRULICITY INJ 0.75/0.5 | DULAGLUTIDE SOLN PEN-INJECTOR 0.75 MG/0.5ML | Tier 2 | X | X | | |
| Blood Glucose Regulators | TRULICITY INJ 1.5/0.5 | DULAGLUTIDE SOLN PEN-INJECTOR 1.5 MG/0.5ML | Tier 2 | X | X | | |
| Blood Glucose Regulators | TRULICITY INJ 3/0.5 | DULAGLUTIDE SOLN PEN-INJECTOR 3 MG/0.5ML | Tier 2 | X | X | | |
| Blood Glucose Regulators | TRULICITY INJ 4.5/0.5 | DULAGLUTIDE SOLN PEN-INJECTOR 4.5 MG/0.5ML | Tier 2 | X | X | | |
| Blood Glucose Regulators | VICTOZA INJ 18MG/3ML | LIRAGLUTIDE SOLN PEN-INJECTOR 18 MG/3ML (6 MG/ML) | Tier 2 | X | X | | |
| Blood Glucose Regulators | VICTOZA INJ 18MG/3ML | LIRAGLUTIDE SOLN PEN-INJECTOR 18 MG/3ML (6 MG/ML) | Tier 3 | X | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Glucose Regulators | XIGDUO XR TAB 10-1000 | DAPAGLIFLOZIN PROP-METFORMIN HCL TAB ER 24HR 10-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | XIGDUO XR TAB 10-500MG | DAPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 10-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | XIGDUO XR TAB 2.5-1000 | DAPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 2.5-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | XIGDUO XR TAB 5-1000MG | DAPAGLIFLOZIN PROP-METFORMIN HCL TAB ER 24HR 5-1000 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | XIGDUO XR TAB 5-500MG | DAPAGLIFLOZIN-METFORMIN HCL TAB ER 24HR 5-500 MG | Tier 3 | X | X | X | |
| Blood Glucose Regulators | XULTOPHY INJ 100/3.6 | INSULIN DEGLUDEC-LIRAGLUTIDE SOL PEN-INJ 100-3.6 UNIT-MG/ML | Tier 3 | | X | X | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | ADMIX NEEDLE MIS 18GX1.5" | NEEDLE (DISP) 18 X 1-1/2" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | BD ECLIPSE MIS 18GX1.5" | NEEDLE (DISP) 18 X 1-1/2" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | FILTER NEEDL MIS 18GX1.5 | NEEDLE (DISP) 18 X 1-1/2" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | HYPO NEEDLE MIS 18GX1" | NEEDLE (DISP) 18 X 1" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | HYPO NEEDLE MIS 18GX1.5" | NEEDLE (DISP) 18 X 1-1/2" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | POLY HUB MIS 18GX1" | NEEDLE (DISP) 18 X 1" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | POLY HUB MIS 18GX1.5" | NEEDLE (DISP) 18 X 1-1/2" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | REZVOGLAR INJ 100OUT/ML | INSULIN GLARGINE-AGLR SOLN PEN-INJECTOR 100 UNIT/ML | Tier 3 | | | X | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | SAFTY NEEDLE MIS 18GX1" | NEEDLE (DISP) 18 X 1" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | SAFTY NEEDLE MIS 18GX1.5" | NEEDLE (DISP) 18 X 1-1/2" | Tier 2 | | | | |
| Blood Glucose Regulators - Drugs to Regulate Blood Sugar | VENT NEEDLE MIS 18GX1" | NEEDLE (DISP) 18 X 1" | Tier 2 | | | | |
| Blood Products and Modifiers | AGRYLIN CAP 0.5MG | ANAGRELIDE HCL CAP 0.5 MG | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | AMICAR SOL 0.25/ML | AMINOCAPROIC ACID ORAL SOLN 0.25 GM/ML | Tier 3 | | | X | |
| Blood Products and Modifiers | AMICAR TAB 1000MG | AMINOCAPROIC ACID TAB 1000 MG | Tier 3 | | | X | |
| Blood Products and Modifiers | AMICAR TAB 500MG | AMINOCAPROIC ACID TAB 500 MG | Tier 3 | | | X | |
| Blood Products and Modifiers | AMINOCAPR AC TAB 1000MG | AMINOCAPROIC ACID TAB 1000 MG | Tier 1 | | | | |
| Blood Products and Modifiers | AMINOCAPR AC TAB 500MG | AMINOCAPROIC ACID TAB 500 MG | Tier 1 | | | | |
| Blood Products and Modifiers | AMINOCAPROIC SOL 0.25/ML | AMINOCAPROIC ACID ORAL SOLN 0.25 GM/ML | Tier 1 | | | | |
| Blood Products and Modifiers | ANAGRELIDE CAP 0.5MG | ANAGRELIDE HCL CAP 0.5 MG | Tier 1 | | | | |
| Blood Products and Modifiers | ANAGRELIDE CAP 1MG | ANAGRELIDE HCL CAP 1 MG | Tier 1 | | | | |
| Blood Products and Modifiers | ARANESP INJ 100MCG | DARBEPOETIN ALFA SOLN INJ 100 MCG/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 100MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 100 MCG/0.5ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 10MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 10 MCG/0.4ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 150MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 150 MCG/0.3ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 200MCG | DARBEPOETIN ALFA SOLN INJ 200 MCG/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 200MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 200 MCG/0.4ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 25MCG | DARBEPOETIN ALFA SOLN INJ 25 MCG/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 25MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 25 MCG/0.42ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 300MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 300 MCG/0.6ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 40MCG | DARBEPOETIN ALFA SOLN INJ 40 MCG/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 40MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 40 MCG/0.4ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 500MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 500 MCG/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARANESP INJ 60MCG | DARBEPOETIN ALFA SOLN INJ 60 MCG/ML | Tier 2 | | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | ARANESP INJ 60MCG | DARBEPOETIN ALFA SOLN PREFILLED SYRINGE 60 MCG/0.3ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | ARIXTRA INJ 10/0.8ML | FONDAPARINUX SODIUM SUBCUTANEOUS INJ 10 MG/0.8ML | Tier 3 | | | X | |
| Blood Products and Modifiers | ARIXTRA INJ 2.5/0.5 | FONDAPARINUX SODIUM SUBCUTANEOUS INJ 2.5 MG/0.5ML | Tier 3 | | | X | |
| Blood Products and Modifiers | ARIXTRA INJ 5/0.4ML | FONDAPARINUX SODIUM SUBCUTANEOUS INJ 5 MG/0.4ML | Tier 3 | | | X | |
| Blood Products and Modifiers | ARIXTRA INJ 7.5/0.6 | FONDAPARINUX SODIUM SUBCUTANEOUS INJ 7.5 MG/0.6ML | Tier 3 | | | X | |
| Blood Products and Modifiers | ASA/DIPYRIDA CAP 25-200MG | ASPIRIN-DIPYRIDAMOLE CAP ER 12HR 25-200 MG | Tier 1 | | | | |
| Blood Products and Modifiers | BRILINTA TAB 60MG | TICAGRELOR TAB 60 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | BRILINTA TAB 90MG | TICAGRELOR TAB 90 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | CABLIVI KIT 11MG | CAPLACIZUMAB-YHDP FOR INJ KIT 11 MG | Tier 2 | X | X | | X |
| Blood Products and Modifiers | CILOSTAZOL TAB 100MG | CILOSTAZOL TAB 100 MG | Tier 1 | | | | |
| Blood Products and Modifiers | CILOSTAZOL TAB 50MG | CILOSTAZOL TAB 50 MG | Tier 1 | | | | |
| Blood Products and Modifiers | CLOPIDOGREL TAB 300MG | CLOPIDOGREL BISULFATE TAB 300 MG (BASE EQUIV) | Tier 1 | | | | |
| Blood Products and Modifiers | CLOPIDOGREL TAB 75MG | CLOPIDOGREL BISULFATE TAB 75 MG (BASE EQUIV) | Tier 1 | | | | |
| Blood Products and Modifiers | DABIGATRAN CAP 110MG | DABIGATRAN ETEXILATE MESYLATE CAP 110 MG (ETEXILATE BASE EQ) | Tier 1 | | X | | |
| Blood Products and Modifiers | DABIGATRAN CAP 150MG | DABIGATRAN ETEXILATE MESYLATE CAP 150 MG (ETEXILATE BASE EQ) | Tier 1 | | X | | |
| Blood Products and Modifiers | DABIGATRAN CAP 75MG | DABIGATRAN ETEXILATE MESYLATE CAP 75 MG (ETEXILATE BASE EQ) | Tier 1 | | X | | |
| Blood Products and Modifiers | DIPYRIDAMOLE TAB 25MG | DIPYRIDAMOLE TAB 25 MG | Tier 1 | | | | |
| Blood Products and Modifiers | DIPYRIDAMOLE TAB 50MG | DIPYRIDAMOLE TAB 50 MG | Tier 1 | | | | |
| Blood Products and Modifiers | DIPYRIDAMOLE TAB 75MG | DIPYRIDAMOLE TAB 75 MG | Tier 1 | | | | |
| Blood Products and Modifiers | DOPTELET TAB 20MG | AVATROMBOPAG MALEATE TAB 20 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Blood Products and Modifiers | DROXIA CAP 200MG | HYDROXYUREA CAP 200 MG | Tier 2 | | | | |
| Blood Products and Modifiers | DROXIA CAP 300MG | HYDROXYUREA CAP 300 MG | Tier 2 | | | | |
| Blood Products and Modifiers | DROXIA CAP 400MG | HYDROXYUREA CAP 400 MG | Tier 2 | | | | |
| Blood Products and Modifiers | EFFIENT TAB 10MG | PRASUGREL HCL TAB 10 MG (BASE EQUIV) | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | EFFIENT TAB 5MG | PRASUGREL HCL TAB 5 MG (BASE EQUIV) | Tier 3 | | | X | |
| Blood Products and Modifiers | ELIQUIS TAB 2.5MG | APIXABAN TAB 2.5 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | ELIQUIS TAB 5MG | APIXABAN TAB 5 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | ELIQUIS ST P TAB 5MG | APIXABAN TAB STARTER PACK 5 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 100MG/ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 100 MG/ML | Tier 1 | | | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 120/0.8 | ENOXAPARIN SODIUM INJ SOLN PREF SYR 120 MG/0.8ML | Tier 1 | | | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 150MG/ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 150 MG/ML | Tier 1 | | | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 30/0.3ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 30 MG/0.3ML | Tier 1 | | | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 300/3ML | ENOXAPARIN SODIUM INJ 300 MG/3ML | Tier 1 | | | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 40/0.4ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 40 MG/0.4ML | Tier 1 | | | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 60/0.6ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 60 MG/0.6ML | Tier 1 | | | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 80/0.8ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML | Tier 1 | | | | |
| Blood Products and Modifiers | ENOXAPARIN INJ 80MG/0.8 | ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML | Tier 1 | | | | |
| Blood Products and Modifiers | EPOGEN INJ 10000/ML | EPOETIN ALFA INJ 10000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | EPOGEN INJ 2000/ML | EPOETIN ALFA INJ 2000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | EPOGEN INJ 20000/ML | EPOETIN ALFA INJ 20000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | EPOGEN INJ 3000/ML | EPOETIN ALFA INJ 3000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | EPOGEN INJ 4000/ML | EPOETIN ALFA INJ 4000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | FONDAPARINUX INJ 10/0.8ML | FONDAPARINUX SODIUM SUBCUTANEOUS INJ 10 MG/0.8ML | Tier 1 | | | | |
| Blood Products and Modifiers | FONDAPARINUX INJ 2.5/0.5 | FONDAPARINUX SODIUM SUBCUTANEOUS INJ 2.5 MG/0.5ML | Tier 1 | | | | |
| Blood Products and Modifiers | FONDAPARINUX INJ 5/0.4ML | FONDAPARINUX SODIUM SUBCUTANEOUS INJ 5 MG/0.4ML | Tier 1 | | | | |
| Blood Products and Modifiers | FONDAPARINUX INJ 7.5/0.6 | FONDAPARINUX SODIUM SUBCUTANEOUS INJ 7.5 MG/0.6ML | Tier 1 | | | | |
| Blood Products and Modifiers | FRAGMIN INJ 10000/ML | DALTEPARIN SODIUM SOLN PREFILLED SYR 10000 UNIT/ML | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | FRAGMIN INJ 12500UNT | DALTEPARIN SODIUM SOLN PREFILLED SYR 12500 UNIT/0.5ML | Tier 3 | | | | |
| Blood Products and Modifiers | FRAGMIN INJ 15000UNT | DALTEPARIN SODIUM SOLN PREFILLED SYR 15000 UNIT/0.6ML | Tier 3 | | | | |
| Blood Products and Modifiers | FRAGMIN INJ 18000UNT | DALTEPARIN SODIUM SOLN PREFILLED SYR 18000 UNIT/0.72ML | Tier 3 | | | | |
| Blood Products and Modifiers | FRAGMIN INJ 2500/0.2 | DALTEPARIN SODIUM SOLN PREFILLED SYR 2500 UNIT/0.2ML | Tier 3 | | | | |
| Blood Products and Modifiers | FRAGMIN INJ 2500/ML | DALTEPARIN SODIUM SUBCUTANEOUS SOLN 10000 UNIT/4ML | Tier 3 | | | | |
| Blood Products and Modifiers | FRAGMIN INJ 5000/0.2 | DALTEPARIN SODIUM SOLN PREFILLED SYR 5000 UNIT/0.2ML | Tier 3 | | | | |
| Blood Products and Modifiers | FRAGMIN INJ 7500/0.3 | DALTEPARIN SODIUM SOLN PREFILLED SYR 7500 UNIT/0.3ML | Tier 3 | | | | |
| Blood Products and Modifiers | FRAGMIN INJ 95000UNT | DALTEPARIN SODIUM INJ 95000 UNIT/3.8ML | Tier 3 | | | | |
| Blood Products and Modifiers | FULPHILA INJ 6/0.6ML | PEGFILGRASTIM-JMDB SOLN PREFILLED SYRINGE 6 MG/0.6ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | GRANIX INJ 300/0.5 | TBO-FILGRASTIM SOLN PREFILLED SYRINGE 300 MCG/0.5ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | GRANIX INJ 300/1ML | TBO-FILGRASTIM SUBCUTANEOUS INJ 300 MCG/ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | GRANIX INJ 480/0.8 | TBO-FILGRASTIM SOLN PREFILLED SYRINGE 480 MCG/0.8ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | GRANIX INJ 480/1.6 | TBO-FILGRASTIM SUBCUTANEOUS INJ 480 MCG/1.6ML (300 MCG/ML) | Tier 3 | | | X | X |
| Blood Products and Modifiers | HEPARIN SOD INJ 1000/ML | HEPARIN SODIUM (PORCINE) PF INJ 1000 UNIT/ML | Tier 1 | | | | |
| Blood Products and Modifiers | HEPARIN SOD INJ 1000/ML | HEPARIN SODIUM (PORCINE) INJ 1000 UNIT/ML | Tier 1 | | | | |
| Blood Products and Modifiers | HEPARIN SOD INJ 10000/ML | HEPARIN SODIUM (PORCINE) INJ 10000 UNIT/ML | Tier 1 | | | | |
| Blood Products and Modifiers | HEPARIN SOD INJ 20000/ML | HEPARIN SODIUM (PORCINE) INJ 20000 UNIT/ML | Tier 1 | | | | |
| Blood Products and Modifiers | HEPARIN SOD INJ 5000/0.5 | HEPARIN SODIUM (PORCINE) PF INJ 5000 UNIT/0.5ML | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | HEPARIN SOD INJ 5000/0.5 | HEPARIN SODIUM (PORCINE) INJ SOLN PREF SYR 5000 UNIT/0.5ML | Tier 1 | | | | |
| Blood Products and Modifiers | HEPARIN SOD INJ 5000/ML | HEPARIN SODIUM (PORCINE) INJ 5000 UNIT/ML | Tier 1 | | | | |
| Blood Products and Modifiers | HEPARIN SOD INJ 5000/ML | HEPARIN SODIUM (PORCINE) PF INJ 5000 UNIT/ML | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 10MG | WARFARIN SODIUM TAB 10 MG | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 1MG | WARFARIN SODIUM TAB 1 MG | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 2.5MG | WARFARIN SODIUM TAB 2.5 MG | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 2MG | WARFARIN SODIUM TAB 2 MG | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 3MG | WARFARIN SODIUM TAB 3 MG | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 4MG | WARFARIN SODIUM TAB 4 MG | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 5MG | WARFARIN SODIUM TAB 5 MG | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 6MG | WARFARIN SODIUM TAB 6 MG | Tier 1 | | | | |
| Blood Products and Modifiers | JANTOVEN TAB 7.5MG | WARFARIN SODIUM TAB 7.5 MG | Tier 1 | | | | |
| Blood Products and Modifiers | LEUKINE INJ 250MCG | SARGRAMOSTIM LYOPHILIZED FOR INJ 250 MCG | Tier 2 | | | | X |
| Blood Products and Modifiers | LOVENOX INJ 100MG/ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 100 MG/ML | Tier 3 | | | X | |
| Blood Products and Modifiers | LOVENOX INJ 120/0.8 | ENOXAPARIN SODIUM INJ SOLN PREF SYR 120 MG/0.8ML | Tier 3 | | | X | |
| Blood Products and Modifiers | LOVENOX INJ 150MG/ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 150 MG/ML | Tier 3 | | | X | |
| Blood Products and Modifiers | LOVENOX INJ 30/0.3ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 30 MG/0.3ML | Tier 3 | | | X | |
| Blood Products and Modifiers | LOVENOX INJ 300/3ML | ENOXAPARIN SODIUM INJ 300 MG/3ML | Tier 3 | | | X | |
| Blood Products and Modifiers | LOVENOX INJ 40/0.4ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 40 MG/0.4ML | Tier 3 | | | X | |
| Blood Products and Modifiers | LOVENOX INJ 60/0.6ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 60 MG/0.6ML | Tier 3 | | | X | |
| Blood Products and Modifiers | LOVENOX INJ 80/0.8ML | ENOXAPARIN SODIUM INJ SOLN PREF SYR 80 MG/0.8ML | Tier 3 | | | X | |
| Blood Products and Modifiers | LYSTEDA TAB 650MG | TRANEXAMIC ACID TAB 650 MG | Tier 3 | | X | | |
| Blood Products and Modifiers | MOZOBIL INJ | PLERIXAFOR SUBCUTANEOUS INJ 24 MG/1.2ML (20 MG/ML) | Tier 3 | | | | X |
| Blood Products and Modifiers | MULPLETA TAB 3MG | LUSUTROMBOPAG TAB 3 MG | Tier 2 | X | | | X |
| Blood Products and Modifiers | NEULASTA INJ 6MG/0.6M | PEGFILGRASTIM SOLN PREFILLED SYRINGE 6 MG/0.6ML | Tier 2 | | | | X |
| Blood Products and Modifiers | NEUPOGEN INJ 300/0.5 | FILGRASTIM SOLN PREFILLED SYRINGE 300 MCG/0.5ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | NEUPOGEN INJ 300MCG | FILGRASTIM INJ 300 MCG/ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | NEUPOGEN INJ 480/0.8 | FILGRASTIM SOLN PREFILLED SYRINGE 480 MCG/0.8ML (600 MCG/ML) | Tier 3 | | | X | X |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | NEUPOGEN INJ 480MCG | FILGRASTIM INJ 480 MCG/1.6ML (300 MCG/ML) | Tier 3 | | | X | X |
| Blood Products and Modifiers | NIVESTYM INJ 300/0.5 | FILGRASTIM-AAFI SOLN PREFILLED SYRINGE 300 MCG/0.5ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | NIVESTYM INJ 300MCG | FILGRASTIM-AAFI INJ 300 MCG/ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | NIVESTYM INJ 480/0.8 | FILGRASTIM-AAFI SOLN PREFILLED SYRINGE 480 MCG/0.8ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | NIVESTYM INJ 480MCG | FILGRASTIM-AAFI INJ 480 MCG/1.6ML (300 MCG/ML) | Tier 3 | | | X | X |
| Blood Products and Modifiers | NYVEPRIA INJ 6/0.6ML | PEGFILGRASTIM-APGF SOLN PREFILLED SYRINGE 6 MG/0.6ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | OXBRYTA TAB 300MG | VOXELOTOR TAB 300 MG | Tier 3 | X | X | | |
| Blood Products and Modifiers | OXBRYTA TAB 300MG | VOXELOTOR TAB FOR ORAL SUSP 300 MG | Tier 3 | X | X | | X |
| Blood Products and Modifiers | OXBRYTA TAB 500MG | VOXELOTOR TAB 500 MG | Tier 3 | X | X | | X |
| Blood Products and Modifiers | PLAVIX TAB 75MG | CLOPIDOGREL BISULFATE TAB 75 MG (BASE EQUIV) | Tier 3 | | | X | |
| Blood Products and Modifiers | PLERIXAFOR INJ 24/1.2ML | PLERIXAFOR SUBCUTANEOUS INJ 24 MG/1.2ML (20 MG/ML) | Tier 1 | | | | X |
| Blood Products and Modifiers | PRADAXA CAP 110MG | DABIGATRAN ETEXILATE MESYLATE CAP 110 MG (ETEXILATE BASE EQ) | Tier 2 | | X | | |
| Blood Products and Modifiers | PRADAXA CAP 150MG | DABIGATRAN ETEXILATE MESYLATE CAP 150 MG (ETEXILATE BASE EQ) | Tier 2 | | X | | |
| Blood Products and Modifiers | PRADAXA CAP 75MG | DABIGATRAN ETEXILATE MESYLATE CAP 75 MG (ETEXILATE BASE EQ) | Tier 2 | | X | | |
| Blood Products and Modifiers | PRADAXA PAK 110MG | DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 110 MG | Tier 3 | | X | | |
| Blood Products and Modifiers | PRADAXA PAK 150MG | DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 150 MG | Tier 3 | | X | | |
| Blood Products and Modifiers | PRADAXA PAK 20MG | DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 20 MG | Tier 3 | | X | | |
| Blood Products and Modifiers | PRADAXA PAK 30MG | DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 30 MG | Tier 3 | | X | | |
| Blood Products and Modifiers | PRADAXA PAK 40MG | DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 40 MG | Tier 3 | | X | | |
| Blood Products and Modifiers | PRADAXA PAK 50MG | DABIGATRAN ETEXILATE MESYLATE PELLETT PACK 50 MG | Tier 3 | | X | | |
| Blood Products and Modifiers | PRASUGREL TAB 10MG | PRASUGREL HCL TAB 10 MG (BASE EQUIV) | Tier 1 | | | | |
| Blood Products and Modifiers | PRASUGREL TAB 5MG | PRASUGREL HCL TAB 5 MG (BASE EQUIV) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------|-----------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | PROCRIT INJ 10000/ML | EPOETIN ALFA INJ 10000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | PROCRIT INJ 2000/ML | EPOETIN ALFA INJ 2000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | PROCRIT INJ 20000/ML | EPOETIN ALFA INJ 20000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | PROCRIT INJ 3000/ML | EPOETIN ALFA INJ 3000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | PROCRIT INJ 4000/ML | EPOETIN ALFA INJ 4000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | PROCRIT INJ 40000/ML | EPOETIN ALFA INJ 40000 UNIT/ML | Tier 3 | | X | X | X |
| Blood Products and Modifiers | PROMACTA PAK 25MG | ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 25 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Blood Products and Modifiers | PROMACTA POW 12.5MG | ELTROMBOPAG OLAMINE POWDER PACK FOR SUSP 12.5 MG (BASE EQ) | Tier 3 | X | X | | X |
| Blood Products and Modifiers | PROMACTA TAB 12.5MG | ELTROMBOPAG OLAMINE TAB 12.5 MG (BASE EQUIV) | Tier 3 | X | | | X |
| Blood Products and Modifiers | PROMACTA TAB 25MG | ELTROMBOPAG OLAMINE TAB 25 MG (BASE EQUIV) | Tier 3 | X | | | X |
| Blood Products and Modifiers | PROMACTA TAB 50MG | ELTROMBOPAG OLAMINE TAB 50 MG (BASE EQUIV) | Tier 3 | X | | | X |
| Blood Products and Modifiers | PROMACTA TAB 75MG | ELTROMBOPAG OLAMINE TAB 75 MG (BASE EQUIV) | Tier 3 | X | | | X |
| Blood Products and Modifiers | PYRUKYND TAB 20MG | MITAPIVAT SULFATE TAB 20 MG | Tier 3 | X | X | | X |
| Blood Products and Modifiers | PYRUKYND TAB 20MGX5MG | MITAPIVAT SULFATE TAB THERAPY PACK 7 X 20 MG & 7 X 5 MG | Tier 3 | X | X | | X |
| Blood Products and Modifiers | PYRUKYND TAB 50MG | MITAPIVAT SULFATE TAB 50 MG | Tier 3 | X | X | | X |
| Blood Products and Modifiers | PYRUKYND TAB 50MGX20M | MITAPIVAT SULFATE TAB THERAPY PACK 7 X 50 MG & 7 X 20 MG | Tier 3 | X | X | | X |
| Blood Products and Modifiers | PYRUKYND TAB 5MG | MITAPIVAT SULFATE TAB 5 MG | Tier 3 | X | X | | X |
| Blood Products and Modifiers | PYRUKYND TAB 5MG TP | MITAPIVAT SULFATE TAB THERAPY PACK 5 MG | Tier 3 | X | X | | X |
| Blood Products and Modifiers | RELEUKO INJ 300MCG | FILGRASTIM-AYOW SOLN PREFILLED SYRINGE 300 MCG/0.5ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | RELEUKO INJ 300MCG | FILGRASTIM-AYOW INJ SOLN 300 MCG/ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | RELEUKO INJ 480MCG | FILGRASTIM-AYOW SOLN PREFILLED SYRINGE 480 MCG/0.8ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | RELEUKO INJ 480MCG | FILGRASTIM-AYOW INJ SOLN 480 MCG/1.6ML (300 MCG/ML) | Tier 3 | | | X | X |
| Blood Products and Modifiers | RETACRIT INJ 10000UNT | EPOETIN ALFA-EPBX INJ 10000 UNIT/ML | Tier 2 | | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | RETACRIT INJ 20000UNI | EPOETIN ALFA-EPBX INJ 20000 UNIT/ML | Tier 2 | | | | |
| Blood Products and Modifiers | RETACRIT INJ 2000UNIT | EPOETIN ALFA-EPBX INJ 2000 UNIT/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | RETACRIT INJ 3000UNIT | EPOETIN ALFA-EPBX INJ 3000 UNIT/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | RETACRIT INJ 40000UNT | EPOETIN ALFA-EPBX INJ 40000 UNIT/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | RETACRIT INJ 4000UNIT | EPOETIN ALFA-EPBX INJ 4000 UNIT/ML | Tier 2 | | X | | X |
| Blood Products and Modifiers | SAVAYSA TAB 15MG | EDOXABAN TOSYLATE TAB 15 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Blood Products and Modifiers | SAVAYSA TAB 30MG | EDOXABAN TOSYLATE TAB 30 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Blood Products and Modifiers | SAVAYSA TAB 60MG | EDOXABAN TOSYLATE TAB 60 MG (BASE EQUIVALENT) | Tier 3 | | X | X | |
| Blood Products and Modifiers | SIKLOS TAB 1000MG | HYDROXYUREA TAB 1000 MG | Tier 3 | | | X | |
| Blood Products and Modifiers | SIKLOS TAB 100MG | HYDROXYUREA TAB 100 MG | Tier 3 | | | X | |
| Blood Products and Modifiers | TAVALISSE TAB 100MG | FOSTAMATINIB DISODIUM TAB 100 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Blood Products and Modifiers | TAVALISSE TAB 150MG | FOSTAMATINIB DISODIUM TAB 150 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Blood Products and Modifiers | TRANEX ACID TAB 650MG | TRANEXAMIC ACID TAB 650 MG | Tier 1 | | X | | |
| Blood Products and Modifiers | UDENYCA INJ 6MG/.6ML | PEGFILGRASTIM-CBQV SOLN PREFILLED SYRINGE 6 MG/0.6ML | Tier 2 | | | | X |
| Blood Products and Modifiers | UDENYCA INJ 6MG/0.6 | PEGFILGRASTIM-CBQV SOLN AUTO-INJECTOR 6 MG/0.6ML | Tier 2 | | | | X |
| Blood Products and Modifiers | WARFARIN TAB 10MG | WARFARIN SODIUM TAB 10 MG | Tier 1 | | | | |
| Blood Products and Modifiers | WARFARIN TAB 1MG | WARFARIN SODIUM TAB 1 MG | Tier 1 | | | | |
| Blood Products and Modifiers | WARFARIN TAB 2.5MG | WARFARIN SODIUM TAB 2.5 MG | Tier 1 | | | | |
| Blood Products and Modifiers | WARFARIN TAB 2MG | WARFARIN SODIUM TAB 2 MG | Tier 1 | | | | |
| Blood Products and Modifiers | WARFARIN TAB 3MG | WARFARIN SODIUM TAB 3 MG | Tier 1 | | | | |
| Blood Products and Modifiers | WARFARIN TAB 4MG | WARFARIN SODIUM TAB 4 MG | Tier 1 | | | | |
| Blood Products and Modifiers | WARFARIN TAB 5MG | WARFARIN SODIUM TAB 5 MG | Tier 1 | | | | |
| Blood Products and Modifiers | WARFARIN TAB 6MG | WARFARIN SODIUM TAB 6 MG | Tier 1 | | | | |
| Blood Products and Modifiers | WARFARIN TAB 7.5MG | WARFARIN SODIUM TAB 7.5 MG | Tier 1 | | | | |
| Blood Products and Modifiers | XARELTO SUS 1MG/ML | RIVAROXABAN FOR SUSP 1 MG/ML | Tier 2 | | X | | |
| Blood Products and Modifiers | XARELTO TAB 10MG | RIVAROXABAN TAB 10 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | XARELTO TAB 15MG | RIVAROXABAN TAB 15 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | XARELTO TAB 2.5MG | RIVAROXABAN TAB 2.5 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | XARELTO TAB 20MG | RIVAROXABAN TAB 20 MG | Tier 2 | | X | | |
| Blood Products and Modifiers | XARELTO STAR TAB 15/20MG | RIVAROXABAN TAB STARTER THERAPY PACK 15 MG & 20 MG | Tier 2 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-----------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers | ZARXIO INJ 300/0.5 | FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 300 MCG/0.5ML | Tier 2 | | | | X |
| Blood Products and Modifiers | ZARXIO INJ 480/0.8 | FILGRASTIM-SNDZ SOLN PREFILLED SYRINGE 480 MCG/0.8ML | Tier 2 | | | | X |
| Blood Products and Modifiers | ZIEXTENZO INJ 6/0.6ML | PEGFILGRASTIM-BMEZ SOLN PREFILLED SYRINGE 6 MG/0.6ML | Tier 3 | | | X | X |
| Blood Products and Modifiers | ZONTIVITY TAB 2.08MG | VORAPAXAR SULFATE TAB 2.08 MG (BASE EQUIVALENT) | Tier 3 | | X | | |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | ADVATE INJ 1000UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | ADVATE INJ 1500UNIT | ANTIHEMOPHILIC FACTOR RAHF-PFM FOR INJ 1500 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | ADVATE INJ 2000UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | ADVATE INJ 250UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 250 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | ADVATE INJ 3000UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | ADVATE INJ 4000UNIT | ANTIHEMOPHILIC FACTOR RAHF-PFM FOR INJ 4000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | ADVATE INJ 500UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | KOVALTRY INJ 1000UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | KOVALTRY INJ 2000UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 2000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | KOVALTRY INJ 250UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 250 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | KOVALTRY INJ 3000UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 3000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | KOVALTRY INJ 500UNIT | ANTIHEMOPHILIC FACTOR RECOMB (RAHF-PFM) FOR INJ 500 UNIT | Tier 2 | | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NOVOEIGHT INJ 1000UNIT | ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NOVOEIGHT INJ 1500UNIT | ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 1500 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NOVOEIGHT INJ 2000UNIT | ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 2000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NOVOEIGHT INJ 250UNIT | ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 250 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NOVOEIGHT INJ 3000UNIT | ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 3000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NOVOEIGHT INJ 500UNIT | ANTIHEMOPHILIC FACT RCMB (BD TRUNC-RFVIII) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ INJ 1000UNIT | ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ INJ 1500UNIT | ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 1500 UNIT | Tier 2 | | | | |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ INJ 2000UNIT | ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 2000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ INJ 2500UNIT | ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 2500 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ INJ 250UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIII,SIM) FOR INJ 250 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ INJ 3000UNIT | ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 3000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ INJ 4000UNIT | ANTIHEMOPHILIC FACT RCMB (BDD-RFVIII,SIM) FOR INJ 4000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ INJ 500UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIII,SIM) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ KIT 1000UNIT | ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 1000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ KIT 1500UNIT | ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 1500 UNIT | Tier 2 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ KIT 2000UNIT | ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 2000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ KIT 2500UNIT | ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 2500 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ KIT 250UNIT | ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,SIM) FOR INJ KIT 250 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ KIT 3000UNIT | ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 3000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ KIT 4000UNIT | ANTIHEMOPHIL FACT RCMB(BDD-RFVIII,SIM) FOR INJ KIT 4000 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | NUWIQ KIT 500UNIT | ANTIHEMOPHIL FACT RCMB (BDD-RFVIII,SIM) FOR INJ KIT 500 UNIT | Tier 2 | | | | X |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | THROMBIN KIT 5000UNIT | THROMBIN FOR SOLN KIT 5000 UNIT | Tier 3 | | | | |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | THROMBIN-JMI KIT 20000UNT | THROMBIN FOR SOLN KIT 20000 UNIT | Tier 3 | | | | |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | THROMBIN-JMI KIT 5000UNIT | THROMBIN FOR SOLN KIT 5000 UNIT | Tier 3 | | | | |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | THROMBOGEN KIT 10000UNT | THROMBIN FOR SOLN KIT 10000 UNIT | Tier 3 | | | | |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | THROMBOGEN SOL 10000UNT | THROMBIN FOR SOLN 10000 UNIT | Tier 3 | | | | |
| Blood Products and Modifiers - Drugs to Treat Blood Disorders | THROMBOGEN SOL 1000UNIT | THROMBIN FOR SOLN 1000 UNIT | Tier 3 | | | | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ADYNOVATE INJ 1000UNIT | ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 1000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ADYNOVATE INJ 1500UNIT | ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 1500 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ADYNOVATE INJ 2000UNIT | ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 2000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ADYNOVATE INJ 250UNIT | ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 250 UNIT | Tier 3 | X | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ADYNOVATE INJ 3000UNIT | ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 3000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ADYNOVATE INJ 500UNIT | ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 500 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ADYNOVATE INJ 750UNIT | ANTIHEMOPHILIC FACTOR RECOMB PEGYLATED FOR INJ 750 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | AFSTYLA KIT 1000UNIT | ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | AFSTYLA KIT 1500UNIT | ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 1500 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | AFSTYLA KIT 2000UNIT | ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | AFSTYLA KIT 2500UNIT | ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 2500 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | AFSTYLA KIT 250UNIT | ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 250 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | AFSTYLA KIT 3000UNIT | ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 3000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | AFSTYLA KIT 500UNIT | ANTIHEMOPHILIC FACT RCMB SINGLE CHAIN FOR INJ KIT 500 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPHANATE INJ 1000UNIT | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPHANATE INJ 1500UNIT | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPHANATE INJ 2000UNIT | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 2000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPHANATE INJ 250 UNIT | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPHANATE INJ 500 UNIT | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPHANINE SD INJ 1000UNIT | COAGULATION FACTOR IX FOR INJ 1000 UNIT | Tier 2 | | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPHANINE SD INJ 1500UNIT | COAGULATION FACTOR IX FOR INJ 1500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPHANINE SD INJ 500UNIT | COAGULATION FACTOR IX FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPROLIX INJ 1000UNIT | COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 1000 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPROLIX INJ 2000UNIT | COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 2000 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPROLIX INJ 250UNIT | COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 250 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPROLIX INJ 3000UNIT | COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 3000 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPROLIX INJ 4000UNIT | COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 4000 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ALPROLIX INJ 500UNIT | COAGULATION FACTOR IX (RECOMB) (RFIXFC) FOR INJ 500 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ANTICOAGULNT SOL SOD CITR | ANTICOAGULANT SODIUM CITRATE SOLN 4% | Tier 3 | | | | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ASTRINGYN SOL 259MG/ GM | FERRIC SUBSULFATE SOLN 259 MG/GM | Tier 3 | | | | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | BENEFIX INJ 1000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 1000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | BENEFIX INJ 2000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 2000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | BENEFIX INJ 250UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 250 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | BENEFIX INJ 3000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 3000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | BENEFIX INJ 500UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ KIT 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | COAGADEX INJ 250UNIT | COAGULATION FACTOR X (HUMAN) FOR INJ 250 UNIT | Tier 2 | | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | COAGADEX INJ 500UNIT | COAGULATION FACTOR X (HUMAN) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | CORIFACT KIT | FACTOR XIII CONCENTRATE (HUMAN) FOR INJ KIT 1000-1600 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 1000UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 1000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 1500UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 1500 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 2000UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 2000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 250UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 250 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 3000UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 3000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 4000UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 4000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 5000UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 5000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 500UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 500 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 6000UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 6000 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ELOCTATE INJ 750UNIT | ANTIHEMOPHILIC FACTOR RCMB (BDD-RFVIIIIFC) FOR INJ 750 UNIT | Tier 3 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ESPEROCT INJ 1000UNIT | ANTIHEMOPHILIC FACTOR RECOMB GLYCOPEG-EXEI FOR INJ 1000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ESPEROCT INJ 1500UNIT | ANTIHEMOPHILIC FACTOR RECOMB GLYCOPEG-EXEI FOR INJ 1500 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ESPEROCT INJ 2000UNIT | ANTIHEMOPHILIC FACTOR RECOMB GLYCOPEG-EXEI FOR INJ 2000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ESPEROCT INJ 3000UNIT | ANTIHEMOPHILIC FACTOR RECOMB GLYCOPEG-EXEI FOR INJ 3000 UNIT | Tier 3 | X | | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | ESPEROCT INJ 500UNIT | ANTIHEMOPHILIC FACTOR RECOMB GLYCOPEG-EXEI FOR INJ 500 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | FEIBA INJ | ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 1000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | FEIBA INJ | ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 2500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | FEIBA INJ | ANTIINHIBITOR COAGULANT COMPLEX FOR IV SOLN 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMLIBRA INJ 105/0.7 | EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 105 MG/0.7ML (150 MG/ML) | Tier 2 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMLIBRA INJ 150/ML | EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 150 MG/ ML | Tier 2 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMLIBRA INJ 300/2ML | EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 300 MG/2ML (150 MG/ML) | Tier 2 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMLIBRA INJ 30MG/ML | EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 30 MG/ ML | Tier 2 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMLIBRA INJ 60/0.4 | EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 60 MG/0.4ML (150 MG/ML) | Tier 2 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMLIBRA SOL 12/0.04 | EMICIZUMAB-KXWH SUBCUTANEOUS SOLN 12 MG/0.4ML (30 MG/ML) | Tier 2 | X | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMOFIL M INJ 1000UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMOFIL M INJ 1700UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1700 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMOFIL M INJ 250UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 250 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HEMOFIL M INJ 500UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HUMATE-P SOL 2400UNIT | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-2400 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HUMATE-P SOL 250-600 | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 250-600 UNIT | Tier 2 | | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-----------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | HUMATE-P SOL 500-1200 | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-1200 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IDELVION SOL 1000UNIT | COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 1000 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IDELVION SOL 2000UNIT | COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 2000 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IDELVION SOL 250UNIT | COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 250 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IDELVION SOL 3500UNIT | COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 3500 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IDELVION SOL 500UNIT | COAGULATION FACTOR IX (RECOMB) (RIX-FP) FOR INJ 500 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 1000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 1000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 1000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 1000 UNIT | Tier 2 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 1500UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 1500 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 2000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 2000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 2000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 2000 UNIT | Tier 2 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 250UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 250 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 250UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 250 UNIT | Tier 2 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 3000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 3000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 3000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 3000 UNIT | Tier 2 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 500UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 500 UNIT | Tier 3 | X | | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-----------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | IXINITY INJ 500UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 500 UNIT | Tier 2 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOATE INJ 1000UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOATE INJ 250UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 250 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOATE INJ 500 UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOATE-DVI INJ 1000UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOATE-DVI INJ 500UNIT | ANTIHEMOPHILIC FACTOR (HUMAN) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOGENATE FS INJ 1000UNIT | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ KIT 1000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOGENATE FS INJ 2000UNIT | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ KIT 2000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOGENATE FS INJ 250UNIT | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ KIT 250 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOGENATE FS INJ 3000UNIT | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ KIT 3000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | KOGENATE FS INJ 500UNIT | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ KIT 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | MONSELS FERR SOL SUBSULF | *FERRIC SUBSULFATE SOLN** | Tier 3 | | | | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | NOCLOT-50 SOL ACD-A | *ANTICOAGULANT CITRATE DEXTROSE SOLUTION A** | Tier 3 | | | | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | NOVOSEVEN RT INJ 1MG | COAGULATION FACTOR VIIA (RECOMB) FOR INJ 1 MG (1000 MCG) | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | NOVOSEVEN RT INJ 2MG | COAGULATION FACTOR VIIA (RECOMB) FOR INJ 2 MG (2000 MCG) | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | NOVOSEVEN RT INJ 5MG | COAGULATION FACTOR VIIA (RECOMB) FOR INJ 5 MG (5000 MCG) | Tier 2 | | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | NOVOSEVEN RT INJ 8MG | COAGULATION FACTOR VIIA (RECOMB) FOR INJ 8 MG (8000 MCG) | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | PROFILNINE INJ 1000UNIT | FACTOR IX COMPLEX FOR INJ 1000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | PROFILNINE INJ 1500UNIT | FACTOR IX COMPLEX FOR INJ 1500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | PROFILNINE INJ 500UNIT | FACTOR IX COMPLEX FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | REBINYN INJ 3000UNIT | COAGULATION FACTOR IX RECOMB GLYCOPEGYLATED FOR INJ 3000 UNT | Tier 3 | X | | X | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | REBINYN SOL 1000UNIT | COAGULATION FACTOR IX RECOMB GLYCOPEGYLATED FOR INJ 1000 UNT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | REBINYN SOL 2000UNIT | COAGULATION FACTOR IX RECOMB GLYCOPEGYLATED FOR INJ 2000 UNT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | REBINYN SOL 500UNIT | COAGULATION FACTOR IX RECOMB GLYCOPEGYLATED FOR INJ 500 UNT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RECOMBINATE INJ | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ 1241- 1800 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RECOMBINATE INJ | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ 1801- 2400 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RECOMBINATE INJ 220- 400 | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ 220- 400 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RECOMBINATE INJ 401- 800 | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ 401- 800 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RECOMBINATE INJ 801- 1240 | ANTIHEMOPHILIC FACTOR (RECOMBINANT) FOR INJ 801- 1240 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RECOTHROM SOL 20000UNT | THROMBIN (RECOMBINANT) FOR SOLN 20000 UNIT | Tier 3 | | | | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RECOTHROM SOL 5000UNIT | THROMBIN (RECOMBINANT) FOR SOLN 5000 UNIT | Tier 3 | | | | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RIXUBIS INJ 1000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 1000 UNIT | Tier 2 | | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------------|--|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RIXUBIS INJ 2000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 2000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RIXUBIS INJ 250 UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 250 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RIXUBIS INJ 3000UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 3000 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | RIXUBIS INJ 500UNIT | COAGULATION FACTOR IX (RECOMBINANT) FOR INJ 500 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | TRETEN INJ | COAGULATION FACTOR XIII A-SUBUNIT FOR INJ 2500 UNIT | Tier 3 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | TRICITRASOL CON | ANTICOAGULANT SODIUM CITRATE CONCENTRATE 46.7% | Tier 3 | | | | |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | VONVENDI INJ 1300UNIT | VON WILLEBRAND FACTOR (RECOMBINANT) FOR INJ 1300 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | VONVENDI INJ 650UNIT | VON WILLEBRAND FACTOR (RECOMBINANT) FOR INJ 650 UNIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | WILATE INJ | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 500-500 UNIT KIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | WILATE INJ | ANTIHEMOPHILIC FACTOR/VWF (HUMAN) FOR INJ 1000-1000 UNIT KIT | Tier 2 | | | | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA INJ 1000UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 1000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA INJ 2000UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 2000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA INJ 250UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 250 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA INJ 500UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 500 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA SOLOF INJ 1000UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 1000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA SOLOF INJ 2000UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 2000 UNIT | Tier 3 | X | | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------------|---|------------|------|--------------|--------------|-----------|
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA SOLOF INJ 3000UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 3000 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA SOLOF INJ 500UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 500 UNIT | Tier 3 | X | | X | X |
| Blood Products/Modifiers/ Volume Expanders - Drugs to Treat Blood Disorders | XYNTHA SOLOF KIT 250UNIT | ANTIHEMOPHILIC FACTOR RECOMBINANT PAF FOR INJ KIT 250 UNIT | Tier 3 | X | | X | X |
| Cardiovascular Agents | ACCUPRIL TAB 10MG | QUINAPRIL HCL TAB 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ACCUPRIL TAB 20MG | QUINAPRIL HCL TAB 20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ACCUPRIL TAB 40MG | QUINAPRIL HCL TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ACCUPRIL TAB 5MG | QUINAPRIL HCL TAB 5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ACCURETIC TAB 10-12.5 | QUINAPRIL- HYDROCHLOROTHIAZIDE TAB 10-12.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | ACCURETIC TAB 20-12.5 | QUINAPRIL- HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | ACCURETIC TAB 20- 25MG | QUINAPRIL- HYDROCHLOROTHIAZIDE TAB 20-25 MG | Tier 3 | | | | |
| Cardiovascular Agents | ACEBUTOLOL CAP 200MG | ACEBUTOLOL HCL CAP 200 MG | Tier 1 | | | | |
| Cardiovascular Agents | ACEBUTOLOL CAP 400MG | ACEBUTOLOL HCL CAP 400 MG | Tier 1 | | | | |
| Cardiovascular Agents | ACETAZOLAMID CAP 500MG ER | ACETAZOLAMIDE CAP ER 12HR 500 MG | Tier 1 | | | | |
| Cardiovascular Agents | ACETAZOLAMID TAB 125MG | ACETAZOLAMIDE TAB 125 MG | Tier 1 | | | | |
| Cardiovascular Agents | ACETAZOLAMID TAB 250MG | ACETAZOLAMIDE TAB 250 MG | Tier 1 | | | | |
| Cardiovascular Agents | ALDACTAZIDE TAB 25/25 | SPIRONOLACTONE & HYDROCHLOROTHIAZIDE TAB 25-25 MG | Tier 3 | | | | |
| Cardiovascular Agents | ALDACTAZIDE TAB 50/50 | SPIRONOLACTONE & HYDROCHLOROTHIAZIDE TAB 50-50 MG | Tier 2 | | | | |
| Cardiovascular Agents | ALDACTONE TAB 100MG | SPIRONOLACTONE TAB 100 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ALDACTONE TAB 25MG | SPIRONOLACTONE TAB 25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ALDACTONE TAB 50MG | SPIRONOLACTONE TAB 50 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ALISKIREN TAB 150MG | ALISKIREN FUMARATE TAB 150 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | ALISKIREN TAB 300MG | ALISKIREN FUMARATE TAB 300 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | ALTACE CAP 1.25MG | RAMIPRIL CAP 1.25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ALTACE CAP 10MG | RAMIPRIL CAP 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ALTACE CAP 2.5MG | RAMIPRIL CAP 2.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ALTACE CAP 5MG | RAMIPRIL CAP 5 MG | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | ALTOPREV TAB 20MG ER | LOVASTATIN TAB ER 24HR 20 MG | Tier 3 | | | | |
| Cardiovascular Agents | ALTOPREV TAB 40MG ER | LOVASTATIN TAB ER 24HR 40 MG | Tier 3 | | | | |
| Cardiovascular Agents | ALTOPREV TAB 60MG ER | LOVASTATIN TAB ER 24HR 60 MG | Tier 3 | | | | |
| Cardiovascular Agents | AMILOR/HCTZ TAB 5-50 | AMILORIDE & HYDROCHLOROTHIAZIDE TAB 5-50 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMILORIDE TAB 5MG | AMILORIDE HCL TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMIODARONE TAB 100MG | AMIODARONE HCL TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMIODARONE TAB 200MG | AMIODARONE HCL TAB 200 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMIODARONE TAB 400MG | AMIODARONE HCL TAB 400 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 10-10MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-10 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 10-20MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-20 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 10-40MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-40 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 10-80MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-80 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 2.5-10MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 2.5-10 MG | Tier 1 | | X | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 2.5-20MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 2.5-20 MG | Tier 1 | | X | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 2.5-40MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 2.5-40 MG | Tier 1 | | X | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 5-10MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 5-10 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 5-20MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 5-20 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 5-40MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 5-40 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/ATORVA TAB 5-80MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 5-80 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/BENZAEP CAP 10-20MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-20 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | AMLOD/BENAZP CAP 10-40MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-40 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/BENAZP CAP 2.5-10MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 2.5-10 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/BENAZP CAP 5-10MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-10 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/BENAZP CAP 5-20MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-20 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/BENAZP CAP 5-40MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-40 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/OLMESA TAB 10-20MG | AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 10-20 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/OLMESA TAB 10-40MG | AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 10-40 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/OLMESA TAB 5-20MG | AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 5-20 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/OLMESA TAB 5-40MG | AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 5-40 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB / HCTZ | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 5-160-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB / HCTZ | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 5-160-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB / HCTZ | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-160-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB / HCTZ | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-160-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB / HCTZ | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-320-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB 10-160MG | AMLODIPINE BESYLATE-VALSARTAN TAB 10-160 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB 10-320MG | AMLODIPINE BESYLATE-VALSARTAN TAB 10-320 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB 5-160MG | AMLODIPINE BESYLATE-VALSARTAN TAB 5-160 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLOD/VALSAR TAB 5-320MG | AMLODIPINE BESYLATE-VALSARTAN TAB 5-320 MG | Tier 1 | | | | |
| Cardiovascular Agents | AMLODIPINE SUS 1MG/ML | *AMLODIPINE BESYLATE ORAL SUSP 1 MG/ML (CMPD KIT) (BASE EQ)* | Tier 3 | X | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | AMLODIPINE TAB 10MG | AMLODIPINE BESYLATE TAB 10 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | AMLODIPINE TAB 2.5MG | AMLODIPINE BESYLATE TAB 2.5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | AMLODIPINE TAB 5MG | AMLODIPINE BESYLATE TAB 5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | ANTARA CAP 30MG | FENOFIBRATE MICRONIZED CAP 30 MG | Tier 3 | | | | |
| Cardiovascular Agents | ASPRUZYO SPR GRA 1000MG | RANOLAZINE ER GRANULES PACKET 1000 MG | Tier 3 | | | | |
| Cardiovascular Agents | ASPRUZYO SPR GRA 500MG | RANOLAZINE ER GRANULES PACKET 500 MG | Tier 3 | | | | |
| Cardiovascular Agents | ATACAND TAB 16MG | CANDESARTAN CILEXETIL TAB 16 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ATACAND TAB 32MG | CANDESARTAN CILEXETIL TAB 32 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ATACAND TAB 4MG | CANDESARTAN CILEXETIL TAB 4 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ATACAND TAB 8MG | CANDESARTAN CILEXETIL TAB 8 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ATACAND HCT TAB 16-12.5 | CANDESARTAN CILEXETIL-HYDROCHLOROTHIAZIDE TAB 16-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ATACAND HCT TAB 32-12.5 | CANDESARTAN CILEXETIL-HYDROCHLOROTHIAZIDE TAB 32-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ATACAND HCT TAB 32-25MG | CANDESARTAN CILEXETIL-HYDROCHLOROTHIAZIDE TAB 32-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ATENOL/CHLOR TAB 100-25MG | ATENOLOL & CHLORTHALIDONE TAB 100-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | ATENOL/CHLOR TAB 50-25MG | ATENOLOL & CHLORTHALIDONE TAB 50-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | ATENOLOL SUS 1MG/ML | *ATENOLOL ORAL SUSPENSION 1 MG/ML (CMPD KIT)** | Tier 3 | X | | | |
| Cardiovascular Agents | ATENOLOL TAB 100MG | ATENOLOL TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | ATENOLOL TAB 25MG | ATENOLOL TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | ATENOLOL TAB 50MG | ATENOLOL TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | ATORVALIQ SUS 20MG/5ML | ATORVASTATIN CALCIUM SUSP 20 MG/5ML (4MG/ML) (BASE EQUIV) | Tier 3 | | | | |
| Cardiovascular Agents | ATORVASTATIN TAB 10MG | ATORVASTATIN CALCIUM TAB 10 MG (BASE EQUIVALENT) | HCR | | | | |
| Cardiovascular Agents | ATORVASTATIN TAB 20MG | ATORVASTATIN CALCIUM TAB 20 MG (BASE EQUIVALENT) | HCR | | | | |
| Cardiovascular Agents | ATORVASTATIN TAB 40MG | ATORVASTATIN CALCIUM TAB 40 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | ATORVASTATIN TAB 80MG | ATORVASTATIN CALCIUM TAB 80 MG (BASE EQUIVALENT) | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|------------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | ATROPINE POW SULFATE | ATROPINE SULFATE POWDER | Tier 3 | | | | |
| Cardiovascular Agents | AVALIDE TAB 150-12.5 | IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 150-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | AVALIDE TAB 300-12.5 | IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 300-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | AVAPRO TAB 150MG | IRBESARTAN TAB 150 MG | Tier 3 | | | X | |
| Cardiovascular Agents | AVAPRO TAB 300MG | IRBESARTAN TAB 300 MG | Tier 3 | | | X | |
| Cardiovascular Agents | AVAPRO TAB 75MG | IRBESARTAN TAB 75 MG | Tier 3 | | | X | |
| Cardiovascular Agents | AZOR TAB 10-20MG | AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 10-20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | AZOR TAB 10-40MG | AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 10-40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | AZOR TAB 5-20MG | AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 5-20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | AZOR TAB 5-40MG | AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL TAB 5-40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BENAZEPRIL/HCTZ TAB 10-12.5 | BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | BENAZEPRIL/HCTZ TAB 20-12.5 | BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | BENAZEPRIL/HCTZ TAB 20-25MG | BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | BENAZEPRIL/HCTZ TAB 5-6.25MG | BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG | Tier 1 | | | | |
| Cardiovascular Agents | BENAZEPRIL TAB 10MG | BENAZEPRIL HCL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | BENAZEPRIL TAB 20MG | BENAZEPRIL HCL TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | BENAZEPRIL TAB 40MG | BENAZEPRIL HCL TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | BENAZEPRIL TAB 5MG | BENAZEPRIL HCL TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | BENICAR TAB 20MG | OLMESARTAN MEDOXOMIL TAB 20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BENICAR TAB 40MG | OLMESARTAN MEDOXOMIL TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BENICAR TAB 5MG | OLMESARTAN MEDOXOMIL TAB 5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BENICAR HCT TAB 20-12.5 | OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | BENICAR HCT TAB 40-12.5 | OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BENICAR HCT TAB 40-25MG | OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 40-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BETAPACE TAB 120MG | SOTALOL HCL TAB 120 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BETAPACE TAB 160MG | SOTALOL HCL TAB 160 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BETAPACE TAB 80MG | SOTALOL HCL TAB 80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BETAPACE AF TAB 120MG | SOTALOL HCL (AFIB/AFL) TAB 120 MG | Tier 3 | | | | |
| Cardiovascular Agents | BETAPACE AF TAB 160MG | SOTALOL HCL (AFIB/AFL) TAB 160 MG | Tier 3 | | | | |
| Cardiovascular Agents | BETAPACE AF TAB 80MG | SOTALOL HCL (AFIB/AFL) TAB 80 MG | Tier 3 | | | | |
| Cardiovascular Agents | BETAXOLOL TAB 10MG | BETAXOLOL HCL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | BETAXOLOL TAB 20MG | BETAXOLOL HCL TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | BIDIL TAB | ISOSORBIDE DINITRATE-HYDRALAZINE HCL TAB 20-37.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | BISOPRL/HCTZ TAB 10/6.25 | BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 10-6.25 MG | Tier 1 | | | | |
| Cardiovascular Agents | BISOPRL/HCTZ TAB 2.5/6.25 | BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 2.5-6.25 MG | Tier 1 | | | | |
| Cardiovascular Agents | BISOPRL/HCTZ TAB 5-6.25MG | BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG | Tier 1 | | | | |
| Cardiovascular Agents | BISOPROL FUM TAB 10MG | BISOPROLOL FUMARATE TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | BISOPROL FUM TAB 5MG | BISOPROLOL FUMARATE TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | BUMETANIDE TAB 0.5MG | BUMETANIDE TAB 0.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | BUMETANIDE TAB 1MG | BUMETANIDE TAB 1 MG | Tier 1 | | | | |
| Cardiovascular Agents | BUMETANIDE TAB 2MG | BUMETANIDE TAB 2 MG | Tier 1 | | | | |
| Cardiovascular Agents | BUMEX TAB 0.5MG | BUMETANIDE TAB 0.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | BYSTOLIC TAB 10MG | NEBIVOLOL HCL TAB 10 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | BYSTOLIC TAB 2.5MG | NEBIVOLOL HCL TAB 2.5 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | BYSTOLIC TAB 20MG | NEBIVOLOL HCL TAB 20 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | BYSTOLIC TAB 5MG | NEBIVOLOL HCL TAB 5 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | CADUET TAB 10-10MG | AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM TAB 10-10 MG | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|-----------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | CADUET TAB 10-20MG | AMLODIPINE BESYLATE- ATORVASTATIN CALCIUM TAB 10-20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CADUET TAB 10-40MG | AMLODIPINE BESYLATE- ATORVASTATIN CALCIUM TAB 10-40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CADUET TAB 10-80MG | AMLODIPINE BESYLATE- ATORVASTATIN CALCIUM TAB 10-80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CADUET TAB 5-10MG | AMLODIPINE BESYLATE- ATORVASTATIN CALCIUM TAB 5-10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CADUET TAB 5-20MG | AMLODIPINE BESYLATE- ATORVASTATIN CALCIUM TAB 5-20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CADUET TAB 5-40MG | AMLODIPINE BESYLATE- ATORVASTATIN CALCIUM TAB 5-40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CADUET TAB 5-80MG | AMLODIPINE BESYLATE- ATORVASTATIN CALCIUM TAB 5-80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CALAN SR TAB 120MG | VERAPAMIL HCL TAB ER 120 MG | Tier 3 | | | | |
| Cardiovascular Agents | CALAN SR TAB 180MG | VERAPAMIL HCL TAB ER 180 MG | Tier 3 | | | | |
| Cardiovascular Agents | CALAN SR TAB 240MG | VERAPAMIL HCL TAB ER 240 MG | Tier 3 | | | | |
| Cardiovascular Agents | CANDESA/HCTZ TAB 16-12.5 | CANDESARTAN CILEXETIL- HYDROCHLOROTHIAZIDE TAB 16-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | CANDESA/HCTZ TAB 32-12.5 | CANDESARTAN CILEXETIL- HYDROCHLOROTHIAZIDE TAB 32-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | CANDESA/HCTZ TAB 32-25MG | CANDESARTAN CILEXETIL- HYDROCHLOROTHIAZIDE TAB 32-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | CANDESARTAN TAB 16MG | CANDESARTAN CILEXETIL TAB 16 MG | Tier 1 | | | | |
| Cardiovascular Agents | CANDESARTAN TAB 32MG | CANDESARTAN CILEXETIL TAB 32 MG | Tier 1 | | | | |
| Cardiovascular Agents | CANDESARTAN TAB 4MG | CANDESARTAN CILEXETIL TAB 4 MG | Tier 1 | | | | |
| Cardiovascular Agents | CANDESARTAN TAB 8MG | CANDESARTAN CILEXETIL TAB 8 MG | Tier 1 | | | | |
| Cardiovascular Agents | CAPTOPR/HCTZ TAB 25-15MG | CAPTOPRIL & HYDROCHLOROTHIAZIDE TAB 25-15 MG | Tier 1 | | | | |
| Cardiovascular Agents | CAPTOPR/HCTZ TAB 25-25MG | CAPTOPRIL & HYDROCHLOROTHIAZIDE TAB 25-25 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | CAPTOPR/HCTZ TAB 50-15MG | CAPTOPRIL & HYDROCHLOROTHIAZIDE TAB 50-15 MG | Tier 1 | | | | |
| Cardiovascular Agents | CAPTOPR/HCTZ TAB 50-25MG | CAPTOPRIL & HYDROCHLOROTHIAZIDE TAB 50-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | CAPTOPRIL TAB 100MG | CAPTOPRIL TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | CAPTOPRIL TAB 12.5MG | CAPTOPRIL TAB 12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | CAPTOPRIL TAB 25MG | CAPTOPRIL TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | CAPTOPRIL TAB 50MG | CAPTOPRIL TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARDIZEM TAB 120MG | DILTIAZEM HCL TAB 120 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM TAB 30MG | DILTIAZEM HCL TAB 30 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM TAB 60MG | DILTIAZEM HCL TAB 60 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM CD CAP 120MG/24 | DILTIAZEM HCL COATED BEADS CAP ER 24HR 120 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM CD CAP 180MG/24 | DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM CD CAP 240MG/24 | DILTIAZEM HCL COATED BEADS CAP ER 24HR 240 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM CD CAP 300MG/24 | DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM CD CAP 360MG/24 | DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM LA TAB 120MG | DILTIAZEM HCL TAB ER 24HR 120 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM LA TAB 180MG | DILTIAZEM HCL TAB ER 24HR 180 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM LA TAB 240MG | DILTIAZEM HCL TAB ER 24HR 240 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM LA TAB 300MG/24 | DILTIAZEM HCL TAB ER 24HR 300 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM LA TAB 360MG | DILTIAZEM HCL TAB ER 24HR 360 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDIZEM LA TAB 420MG/24 | DILTIAZEM HCL TAB ER 24HR 420 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CARDURA TAB 1MG | DOXAZOSIN MESYLATE TAB 1 MG | Tier 3 | | | | |
| Cardiovascular Agents | CARDURA TAB 2MG | DOXAZOSIN MESYLATE TAB 2 MG | Tier 3 | | | | |
| Cardiovascular Agents | CARDURA TAB 4MG | DOXAZOSIN MESYLATE TAB 4 MG | Tier 3 | | | | |
| Cardiovascular Agents | CARDURA TAB 8MG | DOXAZOSIN MESYLATE TAB 8 MG | Tier 3 | | | | |
| Cardiovascular Agents | CAROSPIR SUS 25MG/5ML | SPIRONOLACTONE SUSP 25 MG/5ML | Tier 3 | | | | |
| Cardiovascular Agents | CARTIA XT CAP 120/24HR | DILTIAZEM HCL COATED BEADS CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARTIA XT CAP 180/24HR | DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARTIA XT CAP 240/24HR | DILTIAZEM HCL COATED BEADS CAP ER 24HR 240 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | CARTIA XT CAP 300/24HR | DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARVEDILOL CAP 10MG ER | CARVEDILOL PHOSPHATE CAP ER 24HR 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARVEDILOL CAP 20MG ER | CARVEDILOL PHOSPHATE CAP ER 24HR 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARVEDILOL CAP 40MG ER | CARVEDILOL PHOSPHATE CAP ER 24HR 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARVEDILOL CAP 80MG ER | CARVEDILOL PHOSPHATE CAP ER 24HR 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARVEDILOL TAB 12.5MG | CARVEDILOL TAB 12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARVEDILOL TAB 25MG | CARVEDILOL TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARVEDILOL TAB 3.125MG | CARVEDILOL TAB 3.125 MG | Tier 1 | | | | |
| Cardiovascular Agents | CARVEDILOL TAB 6.25MG | CARVEDILOL TAB 6.25 MG | Tier 1 | | | | |
| Cardiovascular Agents | CATAPRES-TTS DIS 0.1/24HR | CLONIDINE TD PATCH WEEKLY 0.1 MG/24HR | Tier 3 | | | X | |
| Cardiovascular Agents | CATAPRES-TTS DIS 0.2/24HR | CLONIDINE TD PATCH WEEKLY 0.2 MG/24HR | Tier 3 | | | X | |
| Cardiovascular Agents | CATAPRES-TTS DIS 0.3/24HR | CLONIDINE TD PATCH WEEKLY 0.3 MG/24HR | Tier 3 | | | X | |
| Cardiovascular Agents | CHLORTHALID TAB 25MG | CHLORTHALIDONE TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | CHLORTHALID TAB 50MG | CHLORTHALIDONE TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | CHOLESTYRAM POW 4GM | CHOLESTYRAMINE POWDER PACKETS 4 GM | Tier 1 | | | | |
| Cardiovascular Agents | CHOLESTYRAM POW 4GM | CHOLESTYRAMINE POWDER 4 GM/DOSE | Tier 1 | | | | |
| Cardiovascular Agents | CHOLESTYRAM POW 4GM LITE | CHOLESTYRAMINE LIGHT POWDER PACKETS 4 GM | Tier 1 | | | | |
| Cardiovascular Agents | CHOLESTYRAM POW 4GM LITE | CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE | Tier 1 | | | | |
| Cardiovascular Agents | CLONIDINE DIS 0.1/24HR | CLONIDINE TD PATCH WEEKLY 0.1 MG/24HR | Tier 1 | | | | |
| Cardiovascular Agents | CLONIDINE DIS 0.2/24HR | CLONIDINE TD PATCH WEEKLY 0.2 MG/24HR | Tier 1 | | | | |
| Cardiovascular Agents | CLONIDINE DIS 0.3/24HR | CLONIDINE TD PATCH WEEKLY 0.3 MG/24HR | Tier 1 | | | | |
| Cardiovascular Agents | CLONIDINE TAB 0.1MG | CLONIDINE HCL TAB 0.1 MG | Tier 1 | | | | |
| Cardiovascular Agents | CLONIDINE TAB 0.2MG | CLONIDINE HCL TAB 0.2 MG | Tier 1 | | | | |
| Cardiovascular Agents | CLONIDINE TAB 0.3MG | CLONIDINE HCL TAB 0.3 MG | Tier 1 | | | | |
| Cardiovascular Agents | CLONIDINE ER TAB 0.17MG | CLONIDINE HCL TAB ER 24HR 0.17 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | COLESEVELAM PAK 3.75GM | COLESEVELAM HCL PACKET FOR SUSP 3.75 GM | Tier 1 | | | | |
| Cardiovascular Agents | COLESEVELAM TAB 625MG | COLESEVELAM HCL TAB 625 MG | Tier 1 | | | | |
| Cardiovascular Agents | COLESTID GRA 5GM | COLESTIPOL HCL GRANULES 5 GM | Tier 3 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | COLESTID POW 5GM | COLESTIPOL HCL GRANULE PACKETS 5 GM | Tier 3 | | | | |
| Cardiovascular Agents | COLESTID TAB 1GM | COLESTIPOL HCL TAB 1 GM | Tier 3 | | | | |
| Cardiovascular Agents | COLESTID FLA GRA 5/7.5GM | COLESTIPOL HCL GRANULE PACKETS 5 GM | Tier 3 | | | | |
| Cardiovascular Agents | COLESTID FLA GRA 5GM | COLESTIPOL HCL GRANULES 5 GM | Tier 3 | | | | |
| Cardiovascular Agents | COLESTIPOL GRA 5GM | COLESTIPOL HCL GRANULE PACKETS 5 GM | Tier 1 | | | | |
| Cardiovascular Agents | COLESTIPOL GRA 5GM | COLESTIPOL HCL GRANULES 5 GM | Tier 1 | | | | |
| Cardiovascular Agents | COLESTIPOL TAB 1GM | COLESTIPOL HCL TAB 1 GM | Tier 1 | | | | |
| Cardiovascular Agents | COREG TAB 12.5MG | CARVEDILOL TAB 12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COREG TAB 25MG | CARVEDILOL TAB 25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COREG TAB 3.125MG | CARVEDILOL TAB 3.125 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COREG TAB 6.25MG | CARVEDILOL TAB 6.25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COREG CR CAP 10MG | CARVEDILOL PHOSPHATE CAP ER 24HR 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COREG CR CAP 20MG | CARVEDILOL PHOSPHATE CAP ER 24HR 20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COREG CR CAP 40MG | CARVEDILOL PHOSPHATE CAP ER 24HR 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COREG CR CAP 80MG | CARVEDILOL PHOSPHATE CAP ER 24HR 80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CORGARD TAB 20MG | NADOLOL TAB 20 MG | Tier 3 | | | | |
| Cardiovascular Agents | CORGARD TAB 40MG | NADOLOL TAB 40 MG | Tier 3 | | | | |
| Cardiovascular Agents | CORGARD TAB 80MG | NADOLOL TAB 80 MG | Tier 3 | | | | |
| Cardiovascular Agents | CORLANOR SOL 5MG/5ML | IVABRADINE HCL ORAL SOLN 5 MG/5ML (BASE EQUIV) | Tier 3 | X | X | | |
| Cardiovascular Agents | CORLANOR TAB 5MG | IVABRADINE HCL TAB 5 MG (BASE EQUIV) | Tier 3 | X | X | | |
| Cardiovascular Agents | CORLANOR TAB 7.5MG | IVABRADINE HCL TAB 7.5 MG (BASE EQUIV) | Tier 3 | X | X | | |
| Cardiovascular Agents | COZAAR TAB 100MG | LOSARTAN POTASSIUM TAB 100 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COZAAR TAB 25MG | LOSARTAN POTASSIUM TAB 25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | COZAAR TAB 50MG | LOSARTAN POTASSIUM TAB 50 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CRESTOR TAB 10MG | ROSUVASTATIN CALCIUM TAB 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CRESTOR TAB 20MG | ROSUVASTATIN CALCIUM TAB 20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CRESTOR TAB 40MG | ROSUVASTATIN CALCIUM TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | CRESTOR TAB 5MG | ROSUVASTATIN CALCIUM TAB 5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DEMSER CAP 250MG | METYROSINE CAP 250 MG | Tier 3 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | DIBENZYLINE CAP 10MG | PHENOXYBENZAMINE HCL CAP 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIGITEK TAB 0.125MG | DIGOXIN TAB 125 MCG (0.125 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DIGITEK TAB 0.25MG | DIGOXIN TAB 250 MCG (0.25 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DIGOX TAB 0.125MG | DIGOXIN TAB 125 MCG (0.125 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DIGOX TAB 0.25MG | DIGOXIN TAB 250 MCG (0.25 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DIGOXIN SOL 50MCG/ML | DIGOXIN ORAL SOLN 0.05 MG/ML | Tier 1 | | | | |
| Cardiovascular Agents | DIGOXIN TAB 0.0625MG | DIGOXIN TAB 62.5 MCG (0.0625 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DIGOXIN TAB 0.125MG | DIGOXIN TAB 125 MCG (0.125 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DIGOXIN TAB 0.25MG | DIGOXIN TAB 250 MCG (0.25 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 120MG ER | DILTIAZEM HCL CAP ER 12HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 120MG ER | DILTIAZEM HCL COATED BEADS CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 120MG ER | DILTIAZEM HCL CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 120MG ER | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 120MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 180MG ER | DILTIAZEM HCL COATED BEADS CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 180MG ER | DILTIAZEM HCL CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 180MG ER | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 180MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 240MG ER | DILTIAZEM HCL COATED BEADS CAP ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 240MG ER | DILTIAZEM HCL CAP ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 240MG ER | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | DILTIAZEM CAP 240MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 300MG ER | DILTIAZEM HCL COATED BEADS CAP ER 24HR 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 300MG ER | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 360MG CD | DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 360MG ER | DILTIAZEM HCL COATED BEADS CAP ER 24HR 360 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 360MG ER | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 420MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 60MG ER | DILTIAZEM HCL CAP ER 12HR 60 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM CAP 90MG ER | DILTIAZEM HCL CAP ER 12HR 90 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM TAB 120MG | DILTIAZEM HCL TAB 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM TAB 120MG ER | DILTIAZEM HCL TAB ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM TAB 240MG ER | DILTIAZEM HCL TAB ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM TAB 300MG ER | DILTIAZEM HCL TAB ER 24HR 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM TAB 30MG | DILTIAZEM HCL TAB 30 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM TAB 360MG ER | DILTIAZEM HCL TAB ER 24HR 360 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM TAB 60MG | DILTIAZEM HCL TAB 60 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM TAB 90MG | DILTIAZEM HCL TAB 90 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM ER TAB 180MG | DILTIAZEM HCL TAB ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM ER TAB 240MG | DILTIAZEM HCL TAB ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM ER TAB 300MG | DILTIAZEM HCL TAB ER 24HR 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM ER TAB 360MG | DILTIAZEM HCL TAB ER 24HR 360 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILTIAZEM ER TAB 420MG | DILTIAZEM HCL TAB ER 24HR 420 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILT-XR CAP 120MG | DILTIAZEM HCL CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | DILT-XR CAP 180MG | DILTIAZEM HCL CAP ER 24HR 180 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | DILT-XR CAP 240MG | DILTIAZEM HCL CAP ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | DIOVAN TAB 160MG | VALSARTAN TAB 160 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIOVAN TAB 320MG | VALSARTAN TAB 320 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIOVAN TAB 40MG | VALSARTAN TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIOVAN TAB 80MG | VALSARTAN TAB 80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIOVAN HCT TAB 160-12.5 | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 160-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIOVAN HCT TAB 160-25MG | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 160-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIOVAN HCT TAB 320-12.5 | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 320-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIOVAN HCT TAB 320-25MG | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 320-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DIOVAN HCT TAB 80/12.5 | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DISOPYRAMIDE CAP 100MG | DISOPYRAMIDE PHOSPHATE CAP 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | DISOPYRAMIDE CAP 150MG | DISOPYRAMIDE PHOSPHATE CAP 150 MG | Tier 1 | | | | |
| Cardiovascular Agents | DIURIL SUS 250/5ML | CHLOROTHIAZIDE SUSP 250 MG/5ML | Tier 2 | | | | |
| Cardiovascular Agents | DOFETILIDE CAP 125MCG | DOFETILIDE CAP 125 MCG (0.125 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DOFETILIDE CAP 250MCG | DOFETILIDE CAP 250 MCG (0.25 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DOFETILIDE CAP 500MCG | DOFETILIDE CAP 500 MCG (0.5 MG) | Tier 1 | | | | |
| Cardiovascular Agents | DOXAZOSIN TAB 1MG | DOXAZOSIN MESYLATE TAB 1 MG | Tier 1 | | | | |
| Cardiovascular Agents | DOXAZOSIN TAB 2MG | DOXAZOSIN MESYLATE TAB 2 MG | Tier 1 | | | | |
| Cardiovascular Agents | DOXAZOSIN TAB 4MG | DOXAZOSIN MESYLATE TAB 4 MG | Tier 1 | | | | |
| Cardiovascular Agents | DOXAZOSIN TAB 8MG | DOXAZOSIN MESYLATE TAB 8 MG | Tier 1 | | | | |
| Cardiovascular Agents | DROXIDOPA CAP 100MG | DROXIDOPA CAP 100 MG | Tier 1 | X | X | | X |
| Cardiovascular Agents | DROXIDOPA CAP 200MG | DROXIDOPA CAP 200 MG | Tier 1 | X | X | | X |
| Cardiovascular Agents | DROXIDOPA CAP 300MG | DROXIDOPA CAP 300 MG | Tier 1 | X | X | | X |
| Cardiovascular Agents | DUTOPROL TAB 100-12.5 | METOPROLOL & HYDROCHLOROTHIAZIDE TAB ER 24HR 100-12.5 MG | Tier 3 | | X | X | |
| Cardiovascular Agents | DUTOPROL TAB 50-12.5 | METOPROLOL & HYDROCHLOROTHIAZIDE TAB ER 24HR 50-12.5 MG | Tier 3 | | X | X | |
| Cardiovascular Agents | DYRENIUM CAP 100MG | TRIAMTERENE CAP 100 MG | Tier 3 | | | X | |
| Cardiovascular Agents | DYRENIUM CAP 50MG | TRIAMTERENE CAP 50 MG | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | EDARBI TAB 40MG | AZILSARTAN MEDOXOMIL TAB 40 MG | Tier 3 | | | | |
| Cardiovascular Agents | EDARBI TAB 80MG | AZILSARTAN MEDOXOMIL TAB 80 MG | Tier 3 | | | | |
| Cardiovascular Agents | EDARBYCLOR TAB 40-12.5 | AZILSARTAN MEDOXOMIL-CHLORTHALIDONE TAB 40-12.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | EDARBYCLOR TAB 40-25MG | AZILSARTAN MEDOXOMIL-CHLORTHALIDONE TAB 40-25 MG | Tier 3 | | | | |
| Cardiovascular Agents | EDECIN TAB 25MG | ETHACRYNIC ACID TAB 25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ENALAPR/HCTZ TAB 10-25MG | ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 10-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | ENALAPR/HCTZ TAB 5-12.5MG | ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 5-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | ENALAPRIL SOL 1MG/ML | ENALAPRIL MALEATE ORAL SOLN 1 MG/ML | Tier 1 | | | | |
| Cardiovascular Agents | ENALAPRIL TAB 10MG | ENALAPRIL MALEATE TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | ENALAPRIL TAB 2.5MG | ENALAPRIL MALEATE TAB 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | ENALAPRIL TAB 20MG | ENALAPRIL MALEATE TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | ENALAPRIL TAB 5MG | ENALAPRIL MALEATE TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | ENTRESTO TAB 24-26MG | SACUBITRIL-VALSARTAN TAB 24-26 MG | Tier 3 | X | X | | |
| Cardiovascular Agents | ENTRESTO TAB 49-51MG | SACUBITRIL-VALSARTAN TAB 49-51 MG | Tier 3 | X | X | | |
| Cardiovascular Agents | ENTRESTO TAB 97-103MG | SACUBITRIL-VALSARTAN TAB 97-103 MG | Tier 3 | X | X | | |
| Cardiovascular Agents | EPANED SOL 1MG/ML | ENALAPRIL MALEATE ORAL SOLN 1 MG/ML | Tier 3 | | | | |
| Cardiovascular Agents | EPLERENONE TAB 25MG | EPLERENONE TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | EPLERENONE TAB 50MG | EPLERENONE TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | ETHACRYNIC TAB ACD 25MG | ETHACRYNIC ACID TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | EXFORGE TAB 10-160MG | AMLODIPINE BESYLATE-VALSARTAN TAB 10-160 MG | Tier 3 | | | X | |
| Cardiovascular Agents | EXFORGE TAB 10-320MG | AMLODIPINE BESYLATE-VALSARTAN TAB 10-320 MG | Tier 3 | | | X | |
| Cardiovascular Agents | EXFORGE TAB 5-160MG | AMLODIPINE BESYLATE-VALSARTAN TAB 5-160 MG | Tier 3 | | | X | |
| Cardiovascular Agents | EXFORGE TAB 5-320MG | AMLODIPINE BESYLATE-VALSARTAN TAB 5-320 MG | Tier 3 | | | X | |
| Cardiovascular Agents | EXFORGEH/10- TAB 160-12.5 | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-160-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | EXFORGEH/10- TAB 160-25 | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-160-25 MG | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | EXFORGEH/10- TAB 320-25 | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 10-320-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | EXFORGEH/5- TAB 160-12.5 | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 5-160-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | EXFORGEH/5- TAB 160-25 | AMLODIPINE-VALSARTAN-HYDROCHLOROTHIAZIDE TAB 5-160-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | EZALLOR SPR CAP 10MG | ROSUVASTATIN CALCIUM SPRINKLE CAP 10 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Cardiovascular Agents | EZALLOR SPR CAP 20MG | ROSUVASTATIN CALCIUM SPRINKLE CAP 20 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Cardiovascular Agents | EZALLOR SPR CAP 40MG | ROSUVASTATIN CALCIUM SPRINKLE CAP 40 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Cardiovascular Agents | EZALLOR SPR CAP 5MG | ROSUVASTATIN CALCIUM SPRINKLE CAP 5 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Cardiovascular Agents | EZETIM/SIMVA TAB 10-10MG | EZETIMIBE-SIMVASTATIN TAB 10-10 MG | Tier 1 | | | | |
| Cardiovascular Agents | EZETIM/SIMVA TAB 10-20MG | EZETIMIBE-SIMVASTATIN TAB 10-20 MG | Tier 1 | | | | |
| Cardiovascular Agents | EZETIM/SIMVA TAB 10-40MG | EZETIMIBE-SIMVASTATIN TAB 10-40 MG | Tier 1 | | | | |
| Cardiovascular Agents | EZETIM/SIMVA TAB 10-80MG | EZETIMIBE-SIMVASTATIN TAB 10-80 MG | Tier 1 | | | | |
| Cardiovascular Agents | EZETIMIBE TAB 10MG | EZETIMIBE TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | FELODIPINE TAB 10MG ER | FELODIPINE TAB ER 24HR 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | FELODIPINE TAB 2.5MG ER | FELODIPINE TAB ER 24HR 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | FELODIPINE TAB 5MG ER | FELODIPINE TAB ER 24HR 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIB MICR CAP 30MG | FENOFIBRATE MICRONIZED CAP 30 MG | Tier 3 | | | | |
| Cardiovascular Agents | FENOFIB MICR CAP 90MG | FENOFIBRATE MICRONIZED CAP 90 MG | Tier 3 | | | | |
| Cardiovascular Agents | FENOFIBRATE CAP 130MG | FENOFIBRATE MICRONIZED CAP 130 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE CAP 134MG | FENOFIBRATE MICRONIZED CAP 134 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE CAP 150MG | FENOFIBRATE CAP 150 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE CAP 200MG | FENOFIBRATE MICRONIZED CAP 200 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE CAP 43MG | FENOFIBRATE MICRONIZED CAP 43 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | FENOFIBRATE CAP 50MG | FENOFIBRATE CAP 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE CAP 67MG | FENOFIBRATE MICRONIZED CAP 67 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE TAB 120MG | FENOFIBRATE TAB 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE TAB 145MG | FENOFIBRATE TAB 145 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE TAB 160MG | FENOFIBRATE TAB 160 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE TAB 40MG | FENOFIBRATE TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE TAB 48MG | FENOFIBRATE TAB 48 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRATE TAB 54MG | FENOFIBRATE TAB 54 MG | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRIC CAP 135MG DR | CHOLINE FENOFIBRATE CAP DR 135 MG (FENOFIBRIC ACID EQUIV) | Tier 1 | | | | |
| Cardiovascular Agents | FENOFIBRIC CAP 45MG DR | CHOLINE FENOFIBRATE CAP DR 45 MG (FENOFIBRIC ACID EQUIV) | Tier 1 | | | | |
| Cardiovascular Agents | FENOGLIDE TAB 120MG | FENOFIBRATE TAB 120 MG | Tier 3 | | | X | |
| Cardiovascular Agents | FENOGLIDE TAB 40MG | FENOFIBRATE TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | FLECAINIDE TAB 100MG | FLECAINIDE ACETATE TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | FLECAINIDE TAB 150MG | FLECAINIDE ACETATE TAB 150 MG | Tier 1 | | | | |
| Cardiovascular Agents | FLECAINIDE TAB 50MG | FLECAINIDE ACETATE TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | FLOLIPID SUS 20MG/5ML | SIMVASTATIN SUSP 20 MG/5ML (4 MG/ML) | Tier 3 | | | | |
| Cardiovascular Agents | FLOLIPID SUS 40MG/5ML | SIMVASTATIN SUSP 40 MG/5ML (8 MG/ML) | Tier 3 | | | | |
| Cardiovascular Agents | FLUVASTATIN CAP 20MG | FLUVASTATIN SODIUM CAP 20 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | FLUVASTATIN CAP 40MG | FLUVASTATIN SODIUM CAP 40 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | FLUVASTATIN TAB 80MG ER | FLUVASTATIN SODIUM TAB ER 24 HR 80 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | FOSINOP/HCTZ TAB 10/12.5 | FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | FOSINOP/HCTZ TAB 20/12.5 | FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | FOSINOPRIL TAB 10MG | FOSINOPRIL SODIUM TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | FOSINOPRIL TAB 20MG | FOSINOPRIL SODIUM TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | FOSINOPRIL TAB 40MG | FOSINOPRIL SODIUM TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | FUROSCIX KIT 80/10ML | FUROSEMIDE SUBCUTANEOUS CARTRIDGE KIT 80 MG/10ML | Tier 3 | X | | | |
| Cardiovascular Agents | FUROSEMIDE SOL 10MG/ML | FUROSEMIDE ORAL SOLN 10 MG/ML | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | FUROSEMIDE SOL 40MG/5ML | FUROSEMIDE ORAL SOLN 8 MG/ML | Tier 1 | | | | |
| Cardiovascular Agents | FUROSEMIDE TAB 20MG | FUROSEMIDE TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | FUROSEMIDE TAB 40MG | FUROSEMIDE TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | FUROSEMIDE TAB 80MG | FUROSEMIDE TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | GEMFIBROZIL TAB 600MG | GEMFIBROZIL TAB 600 MG | Tier 1 | | | | |
| Cardiovascular Agents | GONITRO POW 400MCG | NITROGLYCERIN SUBLINGUAL POWDER PACKET 400 MCG | Tier 3 | | | | |
| Cardiovascular Agents | GUANFACINE TAB 1MG | GUANFACINE HCL TAB 1 MG | Tier 1 | | | | |
| Cardiovascular Agents | GUANFACINE TAB 2MG | GUANFACINE HCL TAB 2 MG | Tier 1 | | | | |
| Cardiovascular Agents | HEMANGEOL SOL 4.28/ML | PROPRANOLOL HCL ORAL SOLN 4.28 MG/ML (3.75 MG/ML BASE EQUIV) | Tier 3 | | | | |
| Cardiovascular Agents | HYDRALAZINE TAB 100MG | HYDRALAZINE HCL TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | HYDRALAZINE TAB 10MG | HYDRALAZINE HCL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | HYDRALAZINE TAB 25MG | HYDRALAZINE HCL TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | HYDRALAZINE TAB 50MG | HYDRALAZINE HCL TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | HYDROCHLOROT CAP 12.5MG | HYDROCHLOROTHIAZIDE CAP 12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | HYDROCHLOROT TAB 12.5MG | HYDROCHLOROTHIAZIDE TAB 12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | HYDROCHLOROT TAB 25MG | HYDROCHLOROTHIAZIDE TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | HYDROCHLOROT TAB 50MG | HYDROCHLOROTHIAZIDE TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | HYZAAR TAB 100-12.5 | LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 100-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | HYZAAR TAB 100-25 | LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 100-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | HYZAAR TAB 50-12.5 | LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 50-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ICOSAPENT CAP 0.5GM | ICOSAPENT ETHYL CAP 0.5 GM | Tier 3 | X | | X | |
| Cardiovascular Agents | ICOSAPENT CAP 1GM | ICOSAPENT ETHYL CAP 1 GM | Tier 1 | X | | X | |
| Cardiovascular Agents | INDAPAMIDE TAB 1.25MG | INDAPAMIDE TAB 1.25 MG | Tier 1 | | | | |
| Cardiovascular Agents | INDAPAMIDE TAB 2.5MG | INDAPAMIDE TAB 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | INDERAL LA CAP 120MG | PROPRANOLOL HCL CAP ER 24HR 120 MG | Tier 3 | | | X | |
| Cardiovascular Agents | INDERAL LA CAP 160MG | PROPRANOLOL HCL CAP ER 24HR 160 MG | Tier 3 | | | X | |
| Cardiovascular Agents | INDERAL LA CAP 60MG | PROPRANOLOL HCL CAP ER 24HR 60 MG | Tier 3 | | | X | |
| Cardiovascular Agents | INDERAL LA CAP 80MG | PROPRANOLOL HCL CAP ER 24HR 80 MG | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | INDERAL XL CAP 120MG | PROPRANOLOL HCL SUSTAINED-RELEASE BEADS CAP ER 24HR 120 MG | Tier 3 | | | X | |
| Cardiovascular Agents | INDERAL XL CAP 80MG | PROPRANOLOL HCL SUSTAINED-RELEASE BEADS CAP ER 24HR 80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | INNOPRAN XL CAP 120MG | PROPRANOLOL HCL SUSTAINED-RELEASE BEADS CAP ER 24HR 120 MG | Tier 3 | | | X | |
| Cardiovascular Agents | INNOPRAN XL CAP 80MG | PROPRANOLOL HCL SUSTAINED-RELEASE BEADS CAP ER 24HR 80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | INSPIRA TAB 25MG | EPLERENONE TAB 25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | INSPIRA TAB 50MG | EPLERENONE TAB 50 MG | Tier 3 | | | X | |
| Cardiovascular Agents | IRBESAR/HCTZ TAB 150-12.5 | IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 150-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | IRBESAR/HCTZ TAB 300-12.5 | IRBESARTAN-HYDROCHLOROTHIAZIDE TAB 300-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | IRBESARTAN TAB 150MG | IRBESARTAN TAB 150 MG | Tier 1 | | | | |
| Cardiovascular Agents | IRBESARTAN TAB 300MG | IRBESARTAN TAB 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | IRBESARTAN TAB 75MG | IRBESARTAN TAB 75 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISORDIL TAB 40MG | ISOSORBIDE DINITRATE TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ISORDIL TAB 5MG | ISOSORBIDE DINITRATE TAB 5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ISOSO/HYDRAL TAB 20-37.5 | ISOSORBIDE DINITRATE-HYDRALAZINE HCL TAB 20-37.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISOSORB DIN TAB 10MG | ISOSORBIDE DINITRATE TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISOSORB DIN TAB 20MG | ISOSORBIDE DINITRATE TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISOSORB DIN TAB 30MG | ISOSORBIDE DINITRATE TAB 30 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISOSORB DIN TAB 40MG | ISOSORBIDE DINITRATE TAB 40 MG | Tier 1 | | | X | |
| Cardiovascular Agents | ISOSORB DIN TAB 5MG | ISOSORBIDE DINITRATE TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISOSORB MONO TAB 10MG | ISOSORBIDE MONONITRATE TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISOSORB MONO TAB 120MG ER | ISOSORBIDE MONONITRATE TAB ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISOSORB MONO TAB 20MG | ISOSORBIDE MONONITRATE TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISOSORB MONO TAB 30MG ER | ISOSORBIDE MONONITRATE TAB ER 24HR 30 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | ISOSORB MONO TAB 60MG ER | ISOSORBIDE MONONITRATE TAB ER 24HR 60 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISRADIPINE CAP 2.5MG | ISRADIPINE CAP 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | ISRADIPINE CAP 5MG | ISRADIPINE CAP 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | JUXTAPID CAP 10MG | LOMITAPIDE MESYLATE CAP 10 MG (BASE EQUIV) | Tier 3 | X | X | X | X |
| Cardiovascular Agents | JUXTAPID CAP 20MG | LOMITAPIDE MESYLATE CAP 20 MG (BASE EQUIV) | Tier 3 | X | X | X | X |
| Cardiovascular Agents | JUXTAPID CAP 30MG | LOMITAPIDE MESYLATE CAP 30 MG (BASE EQUIV) | Tier 3 | X | X | X | X |
| Cardiovascular Agents | JUXTAPID CAP 5MG | LOMITAPIDE MESYLATE CAP 5 MG (BASE EQUIV) | Tier 3 | X | X | X | X |
| Cardiovascular Agents | KAPSPARGO CAP 100MG | METOPROLOL SUCC CAP ER 24HR SPRINKLE 100 MG (TARTRATE EQUIV) | Tier 3 | | | | |
| Cardiovascular Agents | KAPSPARGO CAP 200MG | METOPROLOL SUCC CAP ER 24HR SPRINKLE 200 MG (TARTRATE EQUIV) | Tier 3 | | | | |
| Cardiovascular Agents | KAPSPARGO CAP 25MG | METOPROLOL SUCC CAP ER 24HR SPRINKLE 25 MG (TARTRATE EQUIV) | Tier 3 | | | | |
| Cardiovascular Agents | KAPSPARGO CAP 50MG | METOPROLOL SUCC CAP ER 24HR SPRINKLE 50 MG (TARTRATE EQUIV) | Tier 3 | | | | |
| Cardiovascular Agents | KATERZIA SUS 1MG/ML | AMLODIPINE BENZOATE ORAL SUSP 1 MG/ML (BASE EQUIVALENT) | Tier 3 | X | | | |
| Cardiovascular Agents | KERENDIA TAB 10MG | FINERENONE TAB 10 MG | Tier 3 | X | X | | |
| Cardiovascular Agents | KERENDIA TAB 20MG | FINERENONE TAB 20 MG | Tier 3 | X | X | | |
| Cardiovascular Agents | LABETALOL TAB 100MG | LABETALOL HCL TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | LABETALOL TAB 200MG | LABETALOL HCL TAB 200 MG | Tier 1 | | | | |
| Cardiovascular Agents | LABETALOL TAB 300MG | LABETALOL HCL TAB 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | LANOXIN TAB 0.0625MG | DIGOXIN TAB 62.5 MCG (0.0625 MG) | Tier 3 | | | | |
| Cardiovascular Agents | LANOXIN TAB 0.125MG | DIGOXIN TAB 125 MCG (0.125 MG) | Tier 3 | | | | |
| Cardiovascular Agents | LANOXIN TAB 0.25MG | DIGOXIN TAB 250 MCG (0.25 MG) | Tier 3 | | | | |
| Cardiovascular Agents | LASIX TAB 20MG | FUROSEMIDE TAB 20 MG | Tier 3 | | | | |
| Cardiovascular Agents | LASIX TAB 40MG | FUROSEMIDE TAB 40 MG | Tier 3 | | | | |
| Cardiovascular Agents | LASIX TAB 80MG | FUROSEMIDE TAB 80 MG | Tier 3 | | | | |
| Cardiovascular Agents | LESCOL XL TAB 80MG | FLUVASTATIN SODIUM TAB ER 24 HR 80 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | LIPITOR TAB 10MG | ATORVASTATIN CALCIUM TAB 10 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | LIPITOR TAB 20MG | ATORVASTATIN CALCIUM TAB 20 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | LIPITOR TAB 40MG | ATORVASTATIN CALCIUM TAB 40 MG (BASE EQUIVALENT) | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | LIPITOR TAB 80MG | ATORVASTATIN CALCIUM TAB 80 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | LIPOFEN CAP 150MG | FENOFIBRATE CAP 150 MG | Tier 3 | | | | |
| Cardiovascular Agents | LIPOFEN CAP 50MG | FENOFIBRATE CAP 50 MG | Tier 3 | | | | |
| Cardiovascular Agents | LISINOP/HCTZ TAB 10-12.5 | LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | LISINOP/HCTZ TAB 20-12.5 | LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | LISINOP/HCTZ TAB 20-25MG | LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | LISINOPRIL TAB 10MG | LISINOPRIL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | LISINOPRIL TAB 2.5MG | LISINOPRIL TAB 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | LISINOPRIL TAB 20MG | LISINOPRIL TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | LISINOPRIL TAB 30MG | LISINOPRIL TAB 30 MG | Tier 1 | | | | |
| Cardiovascular Agents | LISINOPRIL TAB 40MG | LISINOPRIL TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | LISINOPRIL TAB 5MG | LISINOPRIL TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | LIVALO TAB 1MG | PITAVASTATIN CALCIUM TAB 1 MG | Tier 3 | X | | | |
| Cardiovascular Agents | LIVALO TAB 2MG | PITAVASTATIN CALCIUM TAB 2 MG | Tier 3 | X | | | |
| Cardiovascular Agents | LIVALO TAB 4MG | PITAVASTATIN CALCIUM TAB 4 MG | Tier 3 | X | | | |
| Cardiovascular Agents | LOPID TAB 600MG | GEMFIBROZIL TAB 600 MG | Tier 3 | | | | |
| Cardiovascular Agents | LOPRESSOR TAB 100MG | METOPROLOL TARTRATE TAB 100 MG | Tier 3 | | | | |
| Cardiovascular Agents | LOPRESSOR TAB 50MG | METOPROLOL TARTRATE TAB 50 MG | Tier 3 | | | | |
| Cardiovascular Agents | LOSARTAN POT TAB 100MG | LOSARTAN POTASSIUM TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | LOSARTAN POT TAB 25MG | LOSARTAN POTASSIUM TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | LOSARTAN POT TAB 50MG | LOSARTAN POTASSIUM TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | LOSARTAN/HCT TAB 100-12.5 | LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 100-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | LOSARTAN/HCT TAB 100-25 | LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 100-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | LOSARTAN/HCT TAB 50-12.5 | LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE TAB 50-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | LOTENSIN TAB 10MG | BENAZEPRIL HCL TAB 10 MG | Tier 3 | | | | |
| Cardiovascular Agents | LOTENSIN TAB 20MG | BENAZEPRIL HCL TAB 20 MG | Tier 3 | | | | |
| Cardiovascular Agents | LOTENSIN TAB 40MG | BENAZEPRIL HCL TAB 40 MG | Tier 3 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | LOTENSIN HCT TAB 10-12.5 | BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | LOTENSIN HCT TAB 20-12.5 | BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | LOTENSIN HCT TAB 20-25MG | BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG | Tier 3 | | | | |
| Cardiovascular Agents | LOTREL CAP 10-20MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | LOTREL CAP 10-40MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 10-40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | LOTREL CAP 5-10MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | LOTREL CAP 5-20MG | AMLODIPINE BESYLATE-BENAZEPRIL HCL CAP 5-20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | LOVASTATIN TAB 10MG | LOVASTATIN TAB 10 MG | HCR | | | | |
| Cardiovascular Agents | LOVASTATIN TAB 20MG | LOVASTATIN TAB 20 MG | HCR | | | | |
| Cardiovascular Agents | LOVASTATIN TAB 40MG | LOVASTATIN TAB 40 MG | HCR | | | | |
| Cardiovascular Agents | LOVAZA CAP 1GM | OMEGA-3-ACID ETHYL ESTERS CAP 1 GM | Tier 3 | | | X | |
| Cardiovascular Agents | MATZIM LA TAB 180MG/24 | DILTIAZEM HCL TAB ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | MATZIM LA TAB 240MG/24 | DILTIAZEM HCL TAB ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | MATZIM LA TAB 300MG/24 | DILTIAZEM HCL TAB ER 24HR 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | MATZIM LA TAB 360MG/24 | DILTIAZEM HCL TAB ER 24HR 360 MG | Tier 1 | | | | |
| Cardiovascular Agents | MATZIM LA TAB 420MG/24 | DILTIAZEM HCL TAB ER 24HR 420 MG | Tier 1 | | | | |
| Cardiovascular Agents | MAXZIDE TAB 75-50 | TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 75-50 MG | Tier 3 | | | | |
| Cardiovascular Agents | MAXZIDE-25 TAB | TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 37.5-25 MG | Tier 3 | | | | |
| Cardiovascular Agents | METHYLDOPA TAB 250MG | METHYLDOPA TAB 250 MG | Tier 1 | X | | | |
| Cardiovascular Agents | METHYLDOPA TAB 250MG | METHYLDOPA TAB 250 MG | Tier 3 | X | | | |
| Cardiovascular Agents | METHYLDOPA TAB 500MG | METHYLDOPA TAB 500 MG | Tier 1 | X | | | |
| Cardiovascular Agents | METHYLDOPA TAB 500MG | METHYLDOPA TAB 500 MG | Tier 3 | X | | | |
| Cardiovascular Agents | METOLAZONE TAB 10MG | METOLAZONE TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOLAZONE TAB 2.5MG | METOLAZONE TAB 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOLAZONE TAB 5MG | METOLAZONE TAB 5 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | METOPRL/HCTZ TAB 100-25MG | METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOPRL/HCTZ TAB 100-50MG | METOPROLOL & HYDROCHLOROTHIAZIDE TAB 100-50 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOPRL/HCTZ TAB 50-25MG | METOPROLOL & HYDROCHLOROTHIAZIDE TAB 50-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL SUC TAB 100MG ER | METOPROLOL SUCCINATE TAB ER 24HR 100 MG (TARTRATE EQUIV) | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL SUC TAB 200MG ER | METOPROLOL SUCCINATE TAB ER 24HR 200 MG (TARTRATE EQUIV) | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL SUC TAB 25MG ER | METOPROLOL SUCCINATE TAB ER 24HR 25 MG (TARTRATE EQUIV) | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL SUC TAB 50MG ER | METOPROLOL SUCCINATE TAB ER 24HR 50 MG (TARTRATE EQUIV) | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL TAR TAB 100MG | METOPROLOL TARTRATE TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL TAR TAB 25MG | METOPROLOL TARTRATE TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL TAR TAB 37.5MG | METOPROLOL TARTRATE TAB 37.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL TAR TAB 50MG | METOPROLOL TARTRATE TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | METOPROL TAR TAB 75MG | METOPROLOL TARTRATE TAB 75 MG | Tier 1 | | | | |
| Cardiovascular Agents | METYROSINE CAP 250MG | METYROSINE CAP 250 MG | Tier 1 | | | | |
| Cardiovascular Agents | MEXILETINE CAP 150MG | MEXILETINE HCL CAP 150 MG | Tier 1 | | | | |
| Cardiovascular Agents | MEXILETINE CAP 200MG | MEXILETINE HCL CAP 200 MG | Tier 1 | | | | |
| Cardiovascular Agents | MEXILETINE CAP 250MG | MEXILETINE HCL CAP 250 MG | Tier 1 | | | | |
| Cardiovascular Agents | MICARDIS TAB 20MG | TELMISARTAN TAB 20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | MICARDIS TAB 40MG | TELMISARTAN TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | MICARDIS TAB 80MG | TELMISARTAN TAB 80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | MICARDIS HCT TAB 40/12.5 | TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | MICARDIS HCT TAB 80/12.5 | TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | MICARDIS HCT TAB 80-25MG | TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | MIDODRINE TAB 10MG | MIDODRINE HCL TAB 10 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | MIDODRINE TAB 2.5MG | MIDODRINE HCL TAB 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | MIDODRINE TAB 5MG | MIDODRINE HCL TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | MINIPRESS CAP 1MG | PRAZOSIN HCL CAP 1 MG | Tier 3 | | | | |
| Cardiovascular Agents | MINIPRESS CAP 2MG | PRAZOSIN HCL CAP 2 MG | Tier 3 | | | | |
| Cardiovascular Agents | MINIPRESS CAP 5MG | PRAZOSIN HCL CAP 5 MG | Tier 3 | | | | |
| Cardiovascular Agents | MINOXIDIL TAB 10MG | MINOXIDIL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | MINOXIDIL TAB 2.5MG | MINOXIDIL TAB 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | MOEXIPRIL TAB 15MG | MOEXIPRIL HCL TAB 15 MG | Tier 1 | | | | |
| Cardiovascular Agents | MOEXIPRIL TAB 75MG | MOEXIPRIL HCL TAB 75 MG | Tier 1 | | | | |
| Cardiovascular Agents | MULTAQ TAB 400MG | DRONEDARONE HCL TAB 400 MG (BASE EQUIVALENT) | Tier 3 | X | | | |
| Cardiovascular Agents | NADOLOL TAB 20MG | NADOLOL TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | NADOLOL TAB 40MG | NADOLOL TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | NADOLOL TAB 80MG | NADOLOL TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | NEBIVOLOL TAB 10MG | NEBIVOLOL HCL TAB 10 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | NEBIVOLOL TAB 2.5MG | NEBIVOLOL HCL TAB 2.5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | NEBIVOLOL TAB 20MG | NEBIVOLOL HCL TAB 20 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | NEBIVOLOL TAB 5MG | NEBIVOLOL HCL TAB 5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Cardiovascular Agents | NEXICLON XR TAB 0.17MG | CLONIDINE HCL TAB ER 24HR 0.17 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | NEXLETOL TAB 180MG | BEMPEDOIC ACID TAB 180 MG | Tier 2 | | X | | |
| Cardiovascular Agents | NEXLIZET TAB 180/10MG | BEMPEDOIC ACID-EZETIMIBE TAB 180-10 MG | Tier 2 | X | X | | |
| Cardiovascular Agents | NIACIN TAB 500MG | NIACIN (ANTHYPERLIPIDEMIC) TAB 500 MG | Tier 1 | | | X | |
| Cardiovascular Agents | NIACIN TAB 500MG ER | NIACIN TAB ER 500 MG (ANTHYPERLIPIDEMIC) | Tier 1 | | | | |
| Cardiovascular Agents | NIACIN ER TAB 1000MG | NIACIN TAB ER 1000 MG (ANTHYPERLIPIDEMIC) | Tier 1 | | | | |
| Cardiovascular Agents | NIACIN ER TAB 500MG | NIACIN TAB ER 500 MG (ANTHYPERLIPIDEMIC) | Tier 1 | | | | |
| Cardiovascular Agents | NIACIN ER TAB 500MG ER | NIACIN TAB ER 500 MG (ANTHYPERLIPIDEMIC) | Tier 1 | | | | |
| Cardiovascular Agents | NIACIN ER TAB 750MG | NIACIN TAB ER 750 MG (ANTHYPERLIPIDEMIC) | Tier 1 | | | | |
| Cardiovascular Agents | NIACOR TAB 500MG | NIACIN (ANTHYPERLIPIDEMIC) TAB 500 MG | Tier 1 | | | X | |
| Cardiovascular Agents | NIASPAN TAB 1000 ER | NIACIN TAB ER 1000 MG (ANTHYPERLIPIDEMIC) | Tier 3 | | | X | |
| Cardiovascular Agents | NIASPAN TAB 500MG ER | NIACIN TAB ER 500 MG (ANTHYPERLIPIDEMIC) | Tier 3 | | | X | |
| Cardiovascular Agents | NIASPAN TAB 750MG ER | NIACIN TAB ER 750 MG (ANTHYPERLIPIDEMIC) | Tier 3 | | | X | |
| Cardiovascular Agents | NICARDIPINE CAP 20MG | NICARDIPINE HCL CAP 20 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | NICARDIPINE CAP 30MG | NICARDIPINE HCL CAP 30 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIFEDIPINE CAP 10MG | NIFEDIPINE CAP 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIFEDIPINE CAP 20MG | NIFEDIPINE CAP 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIFEDIPINE TAB 30MG ER | NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 30 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIFEDIPINE TAB 30MG ER | NIFEDIPINE TAB ER 24HR 30 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIFEDIPINE TAB 60MG ER | NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 60 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIFEDIPINE TAB 60MG ER | NIFEDIPINE TAB ER 24HR 60 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIFEDIPINE TAB 90MG ER | NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 90 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIFEDIPINE TAB 90MG ER | NIFEDIPINE TAB ER 24HR 90 MG | Tier 1 | | | | |
| Cardiovascular Agents | NIMODIPINE CAP 30MG | NIMODIPINE CAP 30 MG | Tier 1 | | | | |
| Cardiovascular Agents | NISOLDIPINE TAB 17MG ER | NISOLDIPINE TAB ER 24HR 17 MG | Tier 1 | | | | |
| Cardiovascular Agents | NISOLDIPINE TAB 20MG ER | NISOLDIPINE TAB ER 24HR 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | NISOLDIPINE TAB 25.5MG | NISOLDIPINE TAB ER 24HR 25.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | NISOLDIPINE TAB 30MG ER | NISOLDIPINE TAB ER 24HR 30 MG | Tier 1 | | | | |
| Cardiovascular Agents | NISOLDIPINE TAB 34MG ER | NISOLDIPINE TAB ER 24HR 34 MG | Tier 1 | | | | |
| Cardiovascular Agents | NISOLDIPINE TAB 40MG ER | NISOLDIPINE TAB ER 24HR 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | NISOLDIPINE TAB 8.5MG ER | NISOLDIPINE TAB ER 24HR 8.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | NITRO-BID OIN 2% | NITROGLYCERIN OINT 2% | Tier 2 | | | | |
| Cardiovascular Agents | NITRO-DUR DIS 0.1MG/HR | NITROGLYCERIN TD PATCH 24HR 0.1 MG/HR | Tier 3 | | | | |
| Cardiovascular Agents | NITRO-DUR DIS 0.2MG/HR | NITROGLYCERIN TD PATCH 24HR 0.2 MG/HR | Tier 3 | | | | |
| Cardiovascular Agents | NITRO-DUR DIS 0.3MG/HR | NITROGLYCERIN TD PATCH 24HR 0.3 MG/HR | Tier 3 | | | | |
| Cardiovascular Agents | NITRO-DUR DIS 0.4MG/HR | NITROGLYCERIN TD PATCH 24HR 0.4 MG/HR | Tier 3 | | | | |
| Cardiovascular Agents | NITRO-DUR DIS 0.6MG/HR | NITROGLYCERIN TD PATCH 24HR 0.6 MG/HR | Tier 3 | | | | |
| Cardiovascular Agents | NITRO-DUR DIS 0.8MG/HR | NITROGLYCERIN TD PATCH 24HR 0.8 MG/HR | Tier 3 | | | | |
| Cardiovascular Agents | NITROGLYCER DIS 0.1MG/HR | NITROGLYCERIN TD PATCH 24HR 0.1 MG/HR | Tier 1 | | | | |
| Cardiovascular Agents | NITROGLYCER DIS 0.2MG/HR | NITROGLYCERIN TD PATCH 24HR 0.2 MG/HR | Tier 1 | | | | |
| Cardiovascular Agents | NITROGLYCER DIS 0.4MG/HR | NITROGLYCERIN TD PATCH 24HR 0.4 MG/HR | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | NITROGLYCER DIS 0.6MG/HR | NITROGLYCERIN TD PATCH 24HR 0.6 MG/HR | Tier 1 | | | | |
| Cardiovascular Agents | NITROGLYCERI OIN 0.4% | NITROGLYCERIN OINT 0.4% | Tier 1 | | X | | |
| Cardiovascular Agents | NITROGLYCERI SUB 0.6MG | NITROGLYCERIN SL TAB 0.6 MG | Tier 1 | | | | |
| Cardiovascular Agents | NITROGLYCERN SUB 0.3MG | NITROGLYCERIN SL TAB 0.3 MG | Tier 1 | | | | |
| Cardiovascular Agents | NITROGLYCERN SUB 0.4MG | NITROGLYCERIN SL TAB 0.4 MG | Tier 1 | | | | |
| Cardiovascular Agents | NITROGLYCRN SPR 400MCG | NITROGLYCERIN TL SOLN 0.4 MG/SPRAY (400 MCG/SPRAY) | Tier 1 | | | | |
| Cardiovascular Agents | NITROLINGUAL SPR 400MCG | NITROGLYCERIN TL SOLN 0.4 MG/SPRAY (400 MCG/SPRAY) | Tier 3 | | | X | |
| Cardiovascular Agents | NITROMIST AER 400MCG | NITROGLYCERIN LINGUAL AEROSOL 400 MCG/SPRAY | Tier 3 | | | | |
| Cardiovascular Agents | NITROSTAT SUB 0.3MG | NITROGLYCERIN SL TAB 0.3 MG | Tier 3 | | | | |
| Cardiovascular Agents | NITROSTAT SUB 0.4MG | NITROGLYCERIN SL TAB 0.4 MG | Tier 3 | | | | |
| Cardiovascular Agents | NITROSTAT SUB 0.6MG | NITROGLYCERIN SL TAB 0.6 MG | Tier 3 | | | | |
| Cardiovascular Agents | NITRO-TIME CAP 2.5MG CR | NITROGLYCERIN CAP ER 2.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | NITRO-TIME CAP 6.5MG CR | NITROGLYCERIN CAP ER 6.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | NITRO-TIME CAP 9MG CR | NITROGLYCERIN CAP ER 9 MG | Tier 3 | | | | |
| Cardiovascular Agents | NORLIQVA SOL 1MG/ML | AMLODIPINE BESYLATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT) | Tier 3 | | | | |
| Cardiovascular Agents | NORPACE CAP 100MG | DISOPYRAMIDE PHOSPHATE CAP 100 MG | Tier 3 | | | | |
| Cardiovascular Agents | NORPACE CAP 100MG CR | DISOPYRAMIDE PHOSPHATE CAP ER 12HR 100 MG | Tier 2 | | | | |
| Cardiovascular Agents | NORPACE CAP 150MG | DISOPYRAMIDE PHOSPHATE CAP 150 MG | Tier 3 | | | | |
| Cardiovascular Agents | NORPACE CAP 150MG CR | DISOPYRAMIDE PHOSPHATE CAP ER 12HR 150 MG | Tier 2 | | | | |
| Cardiovascular Agents | NORTHERA CAP 100MG | DROXIDOPA CAP 100 MG | Tier 3 | X | X | X | X |
| Cardiovascular Agents | NORTHERA CAP 200MG | DROXIDOPA CAP 200 MG | Tier 3 | X | X | X | X |
| Cardiovascular Agents | NORTHERA CAP 300MG | DROXIDOPA CAP 300 MG | Tier 3 | X | X | X | X |
| Cardiovascular Agents | NORVASC TAB 10MG | AMLODIPINE BESYLATE TAB 10 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | NORVASC TAB 2.5MG | AMLODIPINE BESYLATE TAB 2.5 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | NORVASC TAB 5MG | AMLODIPINE BESYLATE TAB 5 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Cardiovascular Agents | NYMALIZE SOL | NIMODIPINE ORAL SOLN 6 MG/ML | Tier 2 | | | | |
| Cardiovascular Agents | OLM MED/AMLO TAB / HCTZ | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-10-25 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | OLM MED/AMLO TAB / HCTZ | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-10-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | OLM MED/AMLO TAB / HCTZ | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-5-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | OLM MED/AMLO TAB / HCTZ | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 20-5-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | OLM MED/AMLO TAB / HCTZ | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-5-12.5 MG | Tier 1 | | X | | |
| Cardiovascular Agents | OLM MED/HCTZ TAB 20-12.5 | OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | OLM MED/HCTZ TAB 40-12.5 | OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | OLM MED/HCTZ TAB 40-25MG | OLMESARTAN MEDOXOMIL-HYDROCHLOROTHIAZIDE TAB 40-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | OLMESA MEDOX TAB 20MG | OLMESARTAN MEDOXOMIL TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | OLMESA MEDOX TAB 40MG | OLMESARTAN MEDOXOMIL TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | OLMESA MEDOX TAB 5MG | OLMESARTAN MEDOXOMIL TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | OMEGA-3-ACID CAP 1GM | OMEGA-3-ACID ETHYL ESTERS CAP 1 GM | Tier 1 | | | | |
| Cardiovascular Agents | PACERONE TAB 100MG | AMIODARONE HCL TAB 100 MG | Tier 3 | | | | |
| Cardiovascular Agents | PACERONE TAB 200MG | AMIODARONE HCL TAB 200 MG | Tier 3 | | | | |
| Cardiovascular Agents | PACERONE TAB 400MG | AMIODARONE HCL TAB 400 MG | Tier 3 | | | | |
| Cardiovascular Agents | PENTOXIFYLLI TAB 400MG ER | PENTOXIFYLLINE TAB ER 400 MG | Tier 1 | | | | |
| Cardiovascular Agents | PERINDOPRIL TAB 2MG | PERINDOPRIL ERBUMINE TAB 2 MG | Tier 1 | | | | |
| Cardiovascular Agents | PERINDOPRIL TAB 4MG | PERINDOPRIL ERBUMINE TAB 4 MG | Tier 1 | | | | |
| Cardiovascular Agents | PERINDOPRIL TAB 8MG | PERINDOPRIL ERBUMINE TAB 8 MG | Tier 1 | | | | |
| Cardiovascular Agents | PHENOXYBENZA CAP 10MG | PHENOXYBENZAMINE HCL CAP 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | PINDOLOL TAB 10MG | PINDOLOL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | PINDOLOL TAB 5MG | PINDOLOL TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | PITAVASTATIN TAB 1MG | PITAVASTATIN CALCIUM TAB 1 MG | Tier 1 | | | | |
| Cardiovascular Agents | PITAVASTATIN TAB 2MG | PITAVASTATIN CALCIUM TAB 2 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | PITAVASTATIN TAB 4MG | PITAVASTATIN CALCIUM TAB 4 MG | Tier 1 | | | | |
| Cardiovascular Agents | PRALUENT INJ 150MG/ML | ALIROCUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML | Tier 3 | X | X | X | |
| Cardiovascular Agents | PRALUENT INJ 75MG/ML | ALIROCUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 75 MG/ML | Tier 3 | X | X | X | |
| Cardiovascular Agents | PRAVASTATIN TAB 10MG | PRAVASTATIN SODIUM TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | PRAVASTATIN TAB 20MG | PRAVASTATIN SODIUM TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | PRAVASTATIN TAB 40MG | PRAVASTATIN SODIUM TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | PRAVASTATIN TAB 80MG | PRAVASTATIN SODIUM TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | PRAZOSIN HCL CAP 1MG | PRAZOSIN HCL CAP 1 MG | Tier 1 | | | | |
| Cardiovascular Agents | PRAZOSIN HCL CAP 2MG | PRAZOSIN HCL CAP 2 MG | Tier 1 | | | | |
| Cardiovascular Agents | PRAZOSIN HCL CAP 5MG | PRAZOSIN HCL CAP 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | PREVALITE POW 4GM | CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE | Tier 1 | | | | |
| Cardiovascular Agents | PREVALITE POW 4GM PK | CHOLESTYRAMINE LIGHT POWDER PACKETS 4 GM | Tier 1 | | | | |
| Cardiovascular Agents | PROCARDIA XL TAB 30MG CR | NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 30 MG | Tier 3 | | | X | |
| Cardiovascular Agents | PROCARDIA XL TAB 60MG CR | NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 60 MG | Tier 3 | | | X | |
| Cardiovascular Agents | PROCARDIA XL TAB 90MG CR | NIFEDIPINE TAB ER 24HR OSMOTIC RELEASE 90 MG | Tier 3 | | | X | |
| Cardiovascular Agents | PROPAFENONE CAP 225MG ER | PROPAFENONE HCL CAP ER 12HR 225 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPAFENONE CAP 325MG ER | PROPAFENONE HCL CAP ER 12HR 325 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPAFENONE CAP 425MG ER | PROPAFENONE HCL CAP ER 12HR 425 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPAFENONE TAB 150MG | PROPAFENONE HCL TAB 150 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPAFENONE TAB 225MG | PROPAFENONE HCL TAB 225 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPAFENONE TAB 300MG | PROPAFENONE HCL TAB 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL CAP 120MG ER | PROPRANOLOL HCL CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL CAP 160MG ER | PROPRANOLOL HCL CAP ER 24HR 160 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL CAP 60MG ER | PROPRANOLOL HCL CAP ER 24HR 60 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL CAP 80MG ER | PROPRANOLOL HCL CAP ER 24HR 80 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | PROPRANOLOL SOL 20MG/5ML | PROPRANOLOL HCL ORAL SOLN 20 MG/5ML | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL SOL 40MG/5ML | PROPRANOLOL HCL ORAL SOLN 40 MG/5ML | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL TAB 10MG | PROPRANOLOL HCL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL TAB 20MG | PROPRANOLOL HCL TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL TAB 40MG | PROPRANOLOL HCL TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL TAB 60MG | PROPRANOLOL HCL TAB 60 MG | Tier 1 | | | | |
| Cardiovascular Agents | PROPRANOLOL TAB 80MG | PROPRANOLOL HCL TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | QBRELIS SOL 1MG/ML | LISINOPRIL ORAL SOLN 1 MG/ML | Tier 3 | | | | |
| Cardiovascular Agents | QNAPRIL/HCTZ TAB 10-12.5 | QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 10-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | QNAPRIL/HCTZ TAB 20-12.5 | QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | QNAPRIL/HCTZ TAB 20-25MG | QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 20-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | QUESTRAN POW 4GM | CHOLESTYRAMINE POWDER PACKETS 4 GM | Tier 3 | | | | |
| Cardiovascular Agents | QUESTRAN POW 4GM | CHOLESTYRAMINE POWDER 4 GM/DOSE | Tier 3 | | | | |
| Cardiovascular Agents | QUESTRAN POW 4GM LITE | CHOLESTYRAMINE LIGHT POWDER 4 GM/DOSE | Tier 3 | | | | |
| Cardiovascular Agents | QUINAPRIL TAB 10MG | QUINAPRIL HCL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | QUINAPRIL TAB 20MG | QUINAPRIL HCL TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | QUINAPRIL TAB 40MG | QUINAPRIL HCL TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | QUINAPRIL TAB 5MG | QUINAPRIL HCL TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | QUINIDINE GL TAB 324MG CR | QUINIDINE GLUCONATE TAB ER 324 MG | Tier 1 | | | | |
| Cardiovascular Agents | QUINIDINE GL TAB 324MG ER | QUINIDINE GLUCONATE TAB ER 324 MG | Tier 1 | | | | |
| Cardiovascular Agents | QUINIDINE SU TAB 200MG | QUINIDINE SULFATE TAB 200 MG | Tier 1 | | | | |
| Cardiovascular Agents | QUINIDINE SU TAB 300MG | QUINIDINE SULFATE TAB 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | RAMIPRIL CAP 1.25MG | RAMIPRIL CAP 1.25 MG | Tier 1 | | | | |
| Cardiovascular Agents | RAMIPRIL CAP 10MG | RAMIPRIL CAP 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | RAMIPRIL CAP 2.5MG | RAMIPRIL CAP 2.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | RAMIPRIL CAP 5MG | RAMIPRIL CAP 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | RANEXA TAB 1000MG | RANOLAZINE TAB ER 12HR 1000 MG | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | RANEXA TAB 500MG | RANOLAZINE TAB ER 12HR 500 MG | Tier 3 | | | X | |
| Cardiovascular Agents | RANOLAZINE TAB 1000MG | RANOLAZINE TAB ER 12HR 1000 MG | Tier 1 | | | | |
| Cardiovascular Agents | RANOLAZINE TAB 500MG ER | RANOLAZINE TAB ER 12HR 500 MG | Tier 1 | | | | |
| Cardiovascular Agents | RECTIV OIN 0.4% | NITROGLYCERIN OINT 0.4% | Tier 3 | | X | | |
| Cardiovascular Agents | REPATHA INJ 140MG/ML | EVOLOCUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 140 MG/ML | Tier 2 | X | X | X | |
| Cardiovascular Agents | REPATHA PUSH INJ 420/3.5 | EVOLOCUMAB SUBCUTANEOUS SOLN CARTRIDGE/INFUSOR 420 MG/3.5ML | Tier 2 | X | X | X | |
| Cardiovascular Agents | REPATHA SURE INJ 140MG/ML | EVOLOCUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 140 MG/ML | Tier 2 | X | X | X | |
| Cardiovascular Agents | ROSUVASTATIN TAB 10MG | ROSUVASTATIN CALCIUM TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | ROSUVASTATIN TAB 20MG | ROSUVASTATIN CALCIUM TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | ROSUVASTATIN TAB 40MG | ROSUVASTATIN CALCIUM TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | ROSUVASTATIN TAB 5MG | ROSUVASTATIN CALCIUM TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | RYTHMOL SR CAP 225MG | PROPAFENONE HCL CAP ER 12HR 225 MG | Tier 3 | | | X | |
| Cardiovascular Agents | RYTHMOL SR CAP 325MG | PROPAFENONE HCL CAP ER 12HR 325 MG | Tier 3 | | | X | |
| Cardiovascular Agents | RYTHMOL SR CAP 425MG | PROPAFENONE HCL CAP ER 12HR 425 MG | Tier 3 | | | X | |
| Cardiovascular Agents | SIMVASTATIN TAB 10MG | SIMVASTATIN TAB 10 MG | HCR | | | | |
| Cardiovascular Agents | SIMVASTATIN TAB 20MG | SIMVASTATIN TAB 20 MG | HCR | | | | |
| Cardiovascular Agents | SIMVASTATIN TAB 40MG | SIMVASTATIN TAB 40 MG | HCR | | | | |
| Cardiovascular Agents | SIMVASTATIN TAB 5MG | SIMVASTATIN TAB 5 MG | HCR | | | | |
| Cardiovascular Agents | SIMVASTATIN TAB 80MG | SIMVASTATIN TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOANZ TAB 20MG | TORSEMIDE TAB 20 MG | Tier 3 | | X | | |
| Cardiovascular Agents | SOANZ TAB 40MG | TORSEMIDE TAB 40 MG | Tier 3 | | X | | |
| Cardiovascular Agents | SOANZ TAB 60MG | TORSEMIDE TAB 60 MG | Tier 3 | | X | | |
| Cardiovascular Agents | SOTALOL TAB 120MG | SOTALOL HCL TAB 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTALOL TAB 160MG | SOTALOL HCL TAB 160 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTALOL TAB 80MG | SOTALOL HCL TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTALOL AF TAB 120MG | SOTALOL HCL (AFIB/AFL) TAB 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTALOL AF TAB 160MG | SOTALOL HCL (AFIB/AFL) TAB 160 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTALOL AF TAB 80MG | SOTALOL HCL (AFIB/AFL) TAB 80 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | SOTALOL HCL TAB 120MG | SOTALOL HCL TAB 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTALOL HCL TAB 160MG | SOTALOL HCL TAB 160 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTALOL HCL TAB 240MG | SOTALOL HCL TAB 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTALOL HCL TAB 80MG | SOTALOL HCL TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | SOTYLIZE SOL 5MG/ML | SOTALOL HCL ORAL SOLUTION 5 MG/ML | Tier 3 | | | | |
| Cardiovascular Agents | SPIRONO/HCTZ TAB 25/25 | SPIRONOLACTONE & HYDROCHLOROTHIAZIDE TAB 25-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | SPIRONOLACT POW | SPIRONOLACTONE POWDER | Tier 3 | X | | | |
| Cardiovascular Agents | SPIRONOLACT TAB 100MG | SPIRONOLACTONE TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | SPIRONOLACT TAB 25MG | SPIRONOLACTONE TAB 25 MG | Tier 1 | | | | |
| Cardiovascular Agents | SPIRONOLACT TAB 50MG | SPIRONOLACTONE TAB 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | SPIRONOLACTO SUS 25MG/5ML | SPIRONOLACTONE SUSP 25 MG/5ML | Tier 1 | | | | |
| Cardiovascular Agents | SULAR TAB 17MG ER | NISOLDIPINE TAB ER 24HR 17 MG | Tier 3 | | | | |
| Cardiovascular Agents | SULAR TAB 34MG ER | NISOLDIPINE TAB ER 24HR 34 MG | Tier 3 | | | | |
| Cardiovascular Agents | SULAR TAB 8.5MG ER | NISOLDIPINE TAB ER 24HR 8.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | TAZTIA XT CAP 120MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | TAZTIA XT CAP 180MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | TAZTIA XT CAP 240MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | TAZTIA XT CAP 300MG ER | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | TAZTIA XT CAP 360MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG | Tier 1 | | | | |
| Cardiovascular Agents | TEKTURNA TAB 150MG | ALISKIREN FUMARATE TAB 150 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Cardiovascular Agents | TEKTURNA TAB 300MG | ALISKIREN FUMARATE TAB 300 MG (BASE EQUIVALENT) | Tier 3 | | | | |
| Cardiovascular Agents | TEKTURNA HCT TAB 150-12.5 | ALISKIREN-HYDROCHLOROTHIAZIDE TAB 150-12.5 MG | Tier 3 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | TEKTRNA HCT TAB 150-25MG | ALISKIREN-HYDROCHLOROTHIAZIDE TAB 150-25 MG | Tier 3 | | | | |
| Cardiovascular Agents | TEKTRNA HCT TAB 300-12.5 | ALISKIREN-HYDROCHLOROTHIAZIDE TAB 300-12.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | TEKTRNA HCT TAB 300-25MG | ALISKIREN-HYDROCHLOROTHIAZIDE TAB 300-25 MG | Tier 3 | | | | |
| Cardiovascular Agents | TELMIS/AMLOD TAB 40-10MG | TELMISARTAN-AMLODIPINE TAB 40-10 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMIS/AMLOD TAB 40-5MG | TELMISARTAN-AMLODIPINE TAB 40-5 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMIS/AMLOD TAB 80-10MG | TELMISARTAN-AMLODIPINE TAB 80-10 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMIS/AMLOD TAB 80-5MG | TELMISARTAN-AMLODIPINE TAB 80-5 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMISA/HCTZ TAB 40-12.5 | TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 40-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMISA/HCTZ TAB 80-12.5 | TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMISA/HCTZ TAB 80-25MG | TELMISARTAN-HYDROCHLOROTHIAZIDE TAB 80-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMISARTAN TAB 20MG | TELMISARTAN TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMISARTAN TAB 40MG | TELMISARTAN TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | TELMISARTAN TAB 80MG | TELMISARTAN TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | TENORETIC TAB 100 | ATENOLOL & CHLORTHALIDONE TAB 100-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TENORETIC TAB 50 | ATENOLOL & CHLORTHALIDONE TAB 50-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TENORMIN TAB 100MG | ATENOLOL TAB 100 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TENORMIN TAB 25MG | ATENOLOL TAB 25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TENORMIN TAB 50MG | ATENOLOL TAB 50 MG | Tier 3 | | | X | |
| Cardiovascular Agents | THALITONE TAB 15MG | CHLORTHALIDONE TAB 15 MG | Tier 3 | | | | |
| Cardiovascular Agents | TIADYLT CAP 120MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | TIADYLT CAP 180MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | TIADYLT CAP 240MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | TIADYLT CAP 300MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | TIADYLT CAP 360MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG | Tier 1 | | | | |
| Cardiovascular Agents | TIADYLT CAP 420MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG | Tier 1 | | | | |
| Cardiovascular Agents | TIAZAC CAP 120MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 120 MG | Tier 3 | | | | |
| Cardiovascular Agents | TIAZAC CAP 180MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 180 MG | Tier 3 | | | | |
| Cardiovascular Agents | TIAZAC CAP 240MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 240 MG | Tier 3 | | | | |
| Cardiovascular Agents | TIAZAC CAP 300MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 300 MG | Tier 3 | | | | |
| Cardiovascular Agents | TIAZAC CAP 360MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 360 MG | Tier 3 | | | | |
| Cardiovascular Agents | TIAZAC CAP 420MG/24 | DILTIAZEM HCL EXTENDED RELEASE BEADS CAP ER 24HR 420 MG | Tier 3 | | | | |
| Cardiovascular Agents | TIKOSYN CAP 125MCG | DOFETILIDE CAP 125 MCG (0.125 MG) | Tier 3 | | | | |
| Cardiovascular Agents | TIKOSYN CAP 250MCG | DOFETILIDE CAP 250 MCG (0.25 MG) | Tier 3 | | | | |
| Cardiovascular Agents | TIKOSYN CAP 500MCG | DOFETILIDE CAP 500 MCG (0.5 MG) | Tier 3 | | | | |
| Cardiovascular Agents | TOPROL XL TAB 100MG | METOPROLOL SUCCINATE TAB ER 24HR 100 MG (TARTRATE EQUIV) | Tier 3 | | | X | |
| Cardiovascular Agents | TOPROL XL TAB 200MG | METOPROLOL SUCCINATE TAB ER 24HR 200 MG (TARTRATE EQUIV) | Tier 3 | | | X | |
| Cardiovascular Agents | TOPROL XL TAB 25MG | METOPROLOL SUCCINATE TAB ER 24HR 25 MG (TARTRATE EQUIV) | Tier 3 | | | X | |
| Cardiovascular Agents | TOPROL XL TAB 50MG | METOPROLOL SUCCINATE TAB ER 24HR 50 MG (TARTRATE EQUIV) | Tier 3 | | | X | |
| Cardiovascular Agents | TORSEMIDE TAB 100MG | TORSEMIDE TAB 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | TORSEMIDE TAB 10MG | TORSEMIDE TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents | TORSEMIDE TAB 20MG | TORSEMIDE TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents | TORSEMIDE TAB 5MG | TORSEMIDE TAB 5 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRANDO/VERAP TAB 1-240 ER | TRANDOLAPRIL-VERAPAMIL HCL TAB ER 1-240 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | TRANDO/VERAP TAB 2-180 ER | TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-180 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRANDO/VERAP TAB 2-240 ER | TRANDOLAPRIL-VERAPAMIL HCL TAB ER 2-240 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRANDO/VERAP TAB 4-240 ER | TRANDOLAPRIL-VERAPAMIL HCL TAB ER 4-240 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRANDOLAPRIL TAB 1MG | TRANDOLAPRIL TAB 1 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRANDOLAPRIL TAB 2MG | TRANDOLAPRIL TAB 2 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRANDOLAPRIL TAB 4MG | TRANDOLAPRIL TAB 4 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRIAMT/HCTZ CAP 37.5-25 | TRIAMTERENE & HYDROCHLOROTHIAZIDE CAP 37.5-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRIAMT/HCTZ TAB 37.5-25 | TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 37.5-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRIAMT/HCTZ TAB 75-50MG | TRIAMTERENE & HYDROCHLOROTHIAZIDE TAB 75-50 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRIAMTERENE CAP 100MG | TRIAMTERENE CAP 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRIAMTERENE CAP 50MG | TRIAMTERENE CAP 50 MG | Tier 1 | | | | |
| Cardiovascular Agents | TRIBENZOR20- TAB 5-12.5MG | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 20-5-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TRIBENZOR40- TAB 10-12.5 | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-10-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TRIBENZOR40- TAB 10-25MG | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-10-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TRIBENZOR40- TAB 5-12.5MG | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-5-12.5 MG | Tier 3 | | X | X | |
| Cardiovascular Agents | TRIBENZOR40- TAB 5-25MG | OLMESARTAN-AMLODIPINE-HYDROCHLOROTHIAZIDE TAB 40-5-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TRICOR TAB 145MG | FENOFIBRATE TAB 145 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TRICOR TAB 48MG | FENOFIBRATE TAB 48 MG | Tier 3 | | | X | |
| Cardiovascular Agents | TRILIPIX CAP 135MG | CHOLINE FENOFIBRATE CAP DR 135 MG (FENOFIBRIC ACID EQUIV) | Tier 3 | | | X | |
| Cardiovascular Agents | TRILIPIX CAP 45MG | CHOLINE FENOFIBRATE CAP DR 45 MG (FENOFIBRIC ACID EQUIV) | Tier 3 | | | X | |
| Cardiovascular Agents | VALSART/HCTZ TAB 160-12.5 | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 160-12.5 MG | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | VALSART/HCTZ TAB 160-25MG | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 160-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | VALSART/HCTZ TAB 320-12.5 | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 320-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | VALSART/HCTZ TAB 320-25MG | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 320-25 MG | Tier 1 | | | | |
| Cardiovascular Agents | VALSART/HCTZ TAB 80-12.5 | VALSARTAN-HYDROCHLOROTHIAZIDE TAB 80-12.5 MG | Tier 1 | | | | |
| Cardiovascular Agents | VALSARTAN SOL 20MG/5ML | VALSARTAN ORAL SOLN 4 MG/ML | Tier 3 | | | | |
| Cardiovascular Agents | VALSARTAN TAB 160MG | VALSARTAN TAB 160 MG | Tier 1 | | | | |
| Cardiovascular Agents | VALSARTAN TAB 320MG | VALSARTAN TAB 320 MG | Tier 1 | | | | |
| Cardiovascular Agents | VALSARTAN TAB 40MG | VALSARTAN TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | VALSARTAN TAB 80MG | VALSARTAN TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | VASCEPA CAP 0.5GM | ICOSAPENT ETHYL CAP 0.5 GM | Tier 3 | X | | X | |
| Cardiovascular Agents | VASCEPA CAP 1GM | ICOSAPENT ETHYL CAP 1 GM | Tier 3 | X | | X | |
| Cardiovascular Agents | VASERETIC TAB 10-25MG | ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE TAB 10-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | VASOTEC TAB 10MG | ENALAPRIL MALEATE TAB 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | VASOTEC TAB 2.5MG | ENALAPRIL MALEATE TAB 2.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | VASOTEC TAB 20MG | ENALAPRIL MALEATE TAB 20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | VASOTEC TAB 5MG | ENALAPRIL MALEATE TAB 5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | VECAMYL TAB 2.5MG | MECAMYLAMINE HCL TAB 2.5 MG | Tier 3 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 100MG ER | VERAPAMIL HCL CAP ER 24HR 100 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 120MG ER | VERAPAMIL HCL CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 120MG SR | VERAPAMIL HCL CAP ER 24HR 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 180MG ER | VERAPAMIL HCL CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 180MG SR | VERAPAMIL HCL CAP ER 24HR 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 200MG ER | VERAPAMIL HCL CAP ER 24HR 200 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 240MG ER | VERAPAMIL HCL CAP ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 240MG SR | VERAPAMIL HCL CAP ER 24HR 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 300MG ER | VERAPAMIL HCL CAP ER 24HR 300 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL CAP 360MG SR | VERAPAMIL HCL CAP ER 24HR 360 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | VERAPAMIL TAB 120MG | VERAPAMIL HCL TAB 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL TAB 120MG ER | VERAPAMIL HCL TAB ER 120 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL TAB 180MG ER | VERAPAMIL HCL TAB ER 180 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL TAB 240MG ER | VERAPAMIL HCL TAB ER 240 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL TAB 40MG | VERAPAMIL HCL TAB 40 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERAPAMIL TAB 80MG | VERAPAMIL HCL TAB 80 MG | Tier 1 | | | | |
| Cardiovascular Agents | VERELAN CAP 120MG SR | VERAPAMIL HCL CAP ER 24HR 120 MG | Tier 3 | | | | |
| Cardiovascular Agents | VERELAN CAP 180MG SR | VERAPAMIL HCL CAP ER 24HR 180 MG | Tier 3 | | | | |
| Cardiovascular Agents | VERELAN CAP 240MG SR | VERAPAMIL HCL CAP ER 24HR 240 MG | Tier 3 | | | | |
| Cardiovascular Agents | VERELAN CAP 360MG SR | VERAPAMIL HCL CAP ER 24HR 360 MG | Tier 3 | | | | |
| Cardiovascular Agents | VERELAN PM CAP 100MG ER | VERAPAMIL HCL CAP ER 24HR 100 MG | Tier 3 | | | | |
| Cardiovascular Agents | VERELAN PM CAP 200MG ER | VERAPAMIL HCL CAP ER 24HR 200 MG | Tier 3 | | | | |
| Cardiovascular Agents | VERELAN PM CAP 300MG ER | VERAPAMIL HCL CAP ER 24HR 300 MG | Tier 3 | | | | |
| Cardiovascular Agents | VYTORIN TAB 10-10MG | EZETIMIBE-SIMVASTATIN TAB 10-10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | VYTORIN TAB 10-20MG | EZETIMIBE-SIMVASTATIN TAB 10-20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | VYTORIN TAB 10-40MG | EZETIMIBE-SIMVASTATIN TAB 10-40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | VYTORIN TAB 10-80MG | EZETIMIBE-SIMVASTATIN TAB 10-80 MG | Tier 3 | | | X | |
| Cardiovascular Agents | WELCHOL PAK 3.75GM | COLESEVELAM HCL PACKET FOR SUSP 3.75 GM | Tier 3 | | | X | |
| Cardiovascular Agents | WELCHOL TAB 625MG | COLESEVELAM HCL TAB 625 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTORETIC TAB 10-12.5 | LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 10-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTORETIC TAB 20-12.5 | LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 20-12.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTORETIC TAB 20-25MG | LISINOPRIL & HYDROCHLOROTHIAZIDE TAB 20-25 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTRIL TAB 10MG | LISINOPRIL TAB 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTRIL TAB 2.5MG | LISINOPRIL TAB 2.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTRIL TAB 20MG | LISINOPRIL TAB 20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTRIL TAB 30MG | LISINOPRIL TAB 30 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTRIL TAB 40MG | LISINOPRIL TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZESTRIL TAB 5MG | LISINOPRIL TAB 5 MG | Tier 3 | | | X | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-----------------------|--|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents | ZETIA TAB 10MG | EZETIMIBE TAB 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZIAC TAB 10/6.25 | BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 10-6.25 MG | Tier 3 | | | | |
| Cardiovascular Agents | ZIAC TAB 2.5/6.25 | BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 2.5-6.25 MG | Tier 3 | | | | |
| Cardiovascular Agents | ZIAC TAB 5-6.25MG | BISOPROLOL & HYDROCHLOROTHIAZIDE TAB 5-6.25 MG | Tier 3 | | | | |
| Cardiovascular Agents | ZOCOR TAB 10MG | SIMVASTATIN TAB 10 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZOCOR TAB 20MG | SIMVASTATIN TAB 20 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZOCOR TAB 40MG | SIMVASTATIN TAB 40 MG | Tier 3 | | | X | |
| Cardiovascular Agents | ZYPITAMAG TAB 2MG | PITAVASTATIN MAGNESIUM TAB 2 MG (BASE EQUIV) | Tier 3 | | | | |
| Cardiovascular Agents | ZYPITAMAG TAB 4MG | PITAVASTATIN MAGNESIUM TAB 4 MG (BASE EQUIV) | Tier 3 | | | | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | CHLOROTHIAZI POW | CHLOROTHIAZIDE (BULK) POWDER | Tier 3 | | | | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | CONJUPRI TAB 2.5MG | LEVAMLODIPINE MALEATE TAB 2.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | CONJUPRI TAB 5MG | LEVAMLODIPINE MALEATE TAB 5 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | CONSENSI TAB 10-200MG | AMLODIPINE BESYLATE-CELECOXIB TAB 10-200 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | CONSENSI TAB 2.5-200 | AMLODIPINE BESYLATE-CELECOXIB TAB 2.5-200 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | CONSENSI TAB 5-200MG | AMLODIPINE BESYLATE-CELECOXIB TAB 5-200 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | FENOFIBRIC TAB 105MG | FENOFIBRIC ACID TAB 105 MG | Tier 1 | | | | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | FENOFIBRIC TAB 35MG | FENOFIBRIC ACID TAB 35 MG | Tier 1 | | | | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | FIBRICOR TAB 105MG | FENOFIBRIC ACID TAB 105 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | FIBRICOR TAB 35MG | FENOFIBRIC ACID TAB 35 MG | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|---|------------|------|--------------|--------------|-----------|
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | ISOXSUPRINE TAB 10MG | ISOXSUPRINE HCL TAB 10 MG | Tier 1 | | | | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | ISOXSUPRINE TAB HCL 20MG | ISOXSUPRINE HCL TAB 20 MG | Tier 1 | | | | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | LEVAMLODIPIN TAB 2.5MG | LEVAMLODIPINE MALEATE TAB 2.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | LEVAMLODIPIN TAB 5MG | LEVAMLODIPINE MALEATE TAB 5 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | PAPAVERINE POW HCL | PAPAVERINE HCL POWDER | Tier 3 | X | | | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | PRESTALIA TAB 14-10MG | PERINDOPRIL ARGININE-AMLODIPINE BESYLATE TAB 14-10 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | PRESTALIA TAB 3.5-2.5 | PERINDOPRIL ARGININE-AMLODIPINE BESYLATE TAB 3.5-2.5 MG | Tier 3 | | | X | |
| Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions | PRESTALIA TAB 7-5MG | PERINDOPRIL ARGININE-AMLODIPINE BESYLATE TAB 7-5 MG | Tier 3 | | | X | |
| Cardiovascular Agents, Other - Miscellaneous Cardiac Drugs | VERQUVO TAB 10MG | VERICIGUAT TAB 10 MG | Tier 3 | X | X | | |
| Cardiovascular Agents, Other - Miscellaneous Cardiac Drugs | VERQUVO TAB 2.5MG | VERICIGUAT TAB 2.5 MG | Tier 3 | X | X | | |
| Cardiovascular Agents, Other - Miscellaneous Cardiac Drugs | VERQUVO TAB 5MG | VERICIGUAT TAB 5 MG | Tier 3 | X | X | | |
| Central Nervous System Agents | ADDERALL TAB 10MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 10 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ADDERALL TAB 12.5MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 12.5 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ADDERALL TAB 15MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 15 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ADDERALL TAB 20MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 20 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ADDERALL TAB 30MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 30 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ADDERALL TAB 5MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 5 MG | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | ADDERALL TAB 7.5MG | AMPHETAMINE- DEXTROAMPHETAMINE TAB 7.5 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ADDERALL XR CAP 10MG | AMPHETAMINE- DEXTROAMPHETAMINE CAP ER 24HR 10 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | ADDERALL XR CAP 15MG | AMPHETAMINE- DEXTROAMPHETAMINE CAP ER 24HR 15 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | ADDERALL XR CAP 20MG | AMPHETAMINE- DEXTROAMPHETAMINE CAP ER 24HR 20 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | ADDERALL XR CAP 25MG | AMPHETAMINE- DEXTROAMPHETAMINE CAP ER 24HR 25 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | ADDERALL XR CAP 30MG | AMPHETAMINE- DEXTROAMPHETAMINE CAP ER 24HR 30 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | ADDERALL XR CAP 5MG | AMPHETAMINE- DEXTROAMPHETAMINE CAP ER 24HR 5 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | ADHANSIA XR CAP 25MG | METHYLPHENIDATE HCL CAP ER 24HR 25 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADHANSIA XR CAP 35MG | METHYLPHENIDATE HCL CAP ER 24HR 35 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADHANSIA XR CAP 45MG | METHYLPHENIDATE HCL CAP ER 24HR 45 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADHANSIA XR CAP 55MG | METHYLPHENIDATE HCL CAP ER 24HR 55 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADHANSIA XR CAP 70MG | METHYLPHENIDATE HCL CAP ER 24HR 70 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADHANSIA XR CAP 85MG | METHYLPHENIDATE HCL CAP ER 24HR 85 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADZENYS XR TAB 12.5MG | AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 12.5 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADZENYS XR TAB 15.7 MG | AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 15.7 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADZENYS XR TAB 18.8MG | AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 18.8 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADZENYS XR TAB 3.1MG | AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 3.1 MG | Tier 3 | | X | | |
| Central Nervous System Agents | ADZENYS XR TAB 6.3MG | AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 6.3 MG | Tier 3 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | ADZENYS XR TAB 9.4MG | AMPHETAMINE TAB EXTENDED RELEASE DISINTEGRATING 9.4 MG | Tier 3 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 10MG ER | AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 10 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 12.5 ER | AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 12.5 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 15MG ER | AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 15 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 20MG ER | AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 20 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 25MG ER | AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 25 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 25MG ER | AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 25 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 30MG ER | AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 30 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 37.5 ER | AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 37.5 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 50MG ER | AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 50 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR CAP 5MG ER | AMPHETAMINE-DEXTROAMPHETAMINE CAP ER 24HR 5 MG | Tier 1 | | X | | |
| Central Nervous System Agents | AMPHET/DEXTR TAB 10MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 10 MG | Tier 1 | | | | |
| Central Nervous System Agents | AMPHET/DEXTR TAB 12.5MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 12.5 MG | Tier 1 | | | | |
| Central Nervous System Agents | AMPHET/DEXTR TAB 15MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 15 MG | Tier 1 | | | | |
| Central Nervous System Agents | AMPHET/DEXTR TAB 20MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 20 MG | Tier 1 | | | | |
| Central Nervous System Agents | AMPHET/DEXTR TAB 30MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 30 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | AMPHET/DEXTR TAB 5MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 5 MG | Tier 1 | | | | |
| Central Nervous System Agents | AMPHET/DEXTR TAB 7.5MG | AMPHETAMINE-DEXTROAMPHETAMINE TAB 7.5 MG | Tier 1 | | | | |
| Central Nervous System Agents | AMPHETAMINE TAB 10MG | AMPHETAMINE SULFATE TAB 10 MG | Tier 1 | | | | |
| Central Nervous System Agents | AMPHETAMINE TAB 5MG | AMPHETAMINE SULFATE TAB 5 MG | Tier 1 | | | | |
| Central Nervous System Agents | AMPYRA TAB 10MG | DALFAMPRIDINE TAB ER 12HR 10 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | APTENSIO XR CAP 10MG | METHYLPHENIDATE HCL CAP ER 24HR 10 MG (XR) | Tier 3 | | X | | |
| Central Nervous System Agents | APTENSIO XR CAP 15MG | METHYLPHENIDATE HCL CAP ER 24HR 15 MG (XR) | Tier 3 | | X | | |
| Central Nervous System Agents | APTENSIO XR CAP 20MG | METHYLPHENIDATE HCL CAP ER 24HR 20 MG (XR) | Tier 3 | | X | | |
| Central Nervous System Agents | APTENSIO XR CAP 30MG | METHYLPHENIDATE HCL CAP ER 24HR 30 MG (XR) | Tier 3 | | X | | |
| Central Nervous System Agents | APTENSIO XR CAP 40MG | METHYLPHENIDATE HCL CAP ER 24HR 40 MG (XR) | Tier 3 | | X | | |
| Central Nervous System Agents | APTENSIO XR CAP 50MG | METHYLPHENIDATE HCL CAP ER 24HR 50 MG (XR) | Tier 3 | | X | | |
| Central Nervous System Agents | APTENSIO XR CAP 60MG | METHYLPHENIDATE HCL CAP ER 24HR 60 MG (XR) | Tier 3 | | X | | |
| Central Nervous System Agents | ATOMOXETINE CAP 100MG | ATOMOXETINE HCL CAP 100 MG (BASE EQUIV) | Tier 1 | | X | | |
| Central Nervous System Agents | ATOMOXETINE CAP 10MG | ATOMOXETINE HCL CAP 10 MG (BASE EQUIV) | Tier 1 | | X | | |
| Central Nervous System Agents | ATOMOXETINE CAP 18MG | ATOMOXETINE HCL CAP 18 MG (BASE EQUIV) | Tier 1 | | X | | |
| Central Nervous System Agents | ATOMOXETINE CAP 25MG | ATOMOXETINE HCL CAP 25 MG (BASE EQUIV) | Tier 1 | | X | | |
| Central Nervous System Agents | ATOMOXETINE CAP 40MG | ATOMOXETINE HCL CAP 40 MG (BASE EQUIV) | Tier 1 | | X | | |
| Central Nervous System Agents | ATOMOXETINE CAP 60MG | ATOMOXETINE HCL CAP 60 MG (BASE EQUIV) | Tier 1 | | X | | |
| Central Nervous System Agents | ATOMOXETINE CAP 80MG | ATOMOXETINE HCL CAP 80 MG (BASE EQUIV) | Tier 1 | | X | | |
| Central Nervous System Agents | AUBAGIO TAB 14MG | TERIFLUNOMIDE TAB 14 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | AUBAGIO TAB 7MG | TERIFLUNOMIDE TAB 7 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | AUSTEDO TAB 12MG | DEUTETRABENAZINE TAB 12 MG | Tier 2 | X | X | | X |
| Central Nervous System Agents | AUSTEDO TAB 6MG | DEUTETRABENAZINE TAB 6 MG | Tier 2 | X | X | | X |
| Central Nervous System Agents | AUSTEDO TAB 9MG | DEUTETRABENAZINE TAB 9 MG | Tier 2 | X | X | | X |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | AUSTEDO XR TAB 12MG | DEUTETRABENAZINE TAB ER 24HR 12 MG | Tier 2 | | X | | X |
| Central Nervous System Agents | AUSTEDO XR TAB 24MG | DEUTETRABENAZINE TAB ER 24HR 24 MG | Tier 2 | | X | | X |
| Central Nervous System Agents | AUSTEDO XR TAB 6MG | DEUTETRABENAZINE TAB ER 24HR 6 MG | Tier 2 | | X | | X |
| Central Nervous System Agents | AUSTEDO XR TAB TITR KIT | DEUTETRABENAZINE TAB ER TITRATION PACK 6 MG & 12 MG & 24 MG | Tier 2 | | X | | X |
| Central Nervous System Agents | AVONEX PEN KIT 30MCG | INTERFERON BETA-1A IM AUTO-INJECTOR KIT 30 MCG/0.5ML | Tier 2 | X | X | | X |
| Central Nervous System Agents | AVONEX PREFL KIT 30MCG | INTERFERON BETA-1A IM PREFILLED SYRINGE KIT 30 MCG/0.5ML | Tier 2 | X | X | | X |
| Central Nervous System Agents | AZSTARYS CAP 26.1-5.2 | SERDEXMETHYLPHENIDATE-DEXMETHYLPHENIDATE CAP 26.1-5.2 MG | Tier 2 | | X | | |
| Central Nervous System Agents | AZSTARYS CAP 39.2-7.8 | SERDEXMETHYLPHENIDATE-DEXMETHYLPHENIDATE CAP 39.2-7.8 MG | Tier 2 | | X | | |
| Central Nervous System Agents | AZSTARYS CAP 52.3-10.4 | SERDEXMETHYLPHENIDATE-DEXMETHYLPHENIDATE CAP 52.3-10.4 MG | Tier 2 | | X | | |
| Central Nervous System Agents | BAFIERTAM CAP 95MG | MONOMETHYL FUMARATE CAPSULE DELAYED RELEASE 95 MG | Tier 2 | X | X | | X |
| Central Nervous System Agents | BETASERON INJ 0.3MG | INTERFERON BETA-1B FOR INJ KIT 0.3 MG | Tier 2 | X | X | | X |
| Central Nervous System Agents | CAFFEINE CIT SOL 20MG/ML | CAFFEINE CITRATE ORAL SOLN 60 MG/3ML (10 MG/ML BASE EQUIV) | Tier 1 | | | | |
| Central Nervous System Agents | CAFFEINE CIT SOL 60MG/3ML | CAFFEINE CITRATE ORAL SOLN 60 MG/3ML (10 MG/ML BASE EQUIV) | Tier 1 | | | | |
| Central Nervous System Agents | CLONIDINE TAB 0.1MG ER | CLONIDINE HCL TAB ER 12HR 0.1 MG | Tier 1 | | | | |
| Central Nervous System Agents | CONCERTA TAB 18MG | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 18 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | CONCERTA TAB 27MG | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 27 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | CONCERTA TAB 36MG | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 36 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | CONCERTA TAB 54MG | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 54 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | COPAXONE INJ 20MG/ML | GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML | Tier 3 | X | X | X | X |
| Central Nervous System Agents | COPAXONE INJ 40MG/ML | GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML | Tier 3 | X | X | X | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | COTEMPLA XR TAB 17.3MG | METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 17.3 MG | Tier 3 | | X | | |
| Central Nervous System Agents | COTEMPLA XR TAB 25.9MG | METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 25.9 MG | Tier 3 | | X | | |
| Central Nervous System Agents | COTEMPLA XR TAB 8.6MG | METHYLPHENIDATE TAB EXTENDED RELEASE DISINTEGRATING 8.6 MG | Tier 3 | | X | | |
| Central Nervous System Agents | CYMBALTA CAP 20MG | DULOXETINE HCL ENTERIC COATED PELLETS CAP 20 MG (BASE EQ) | Tier 3 | | | X | |
| Central Nervous System Agents | CYMBALTA CAP 30MG | DULOXETINE HCL ENTERIC COATED PELLETS CAP 30 MG (BASE EQ) | Tier 3 | | | X | |
| Central Nervous System Agents | CYMBALTA CAP 60MG | DULOXETINE HCL ENTERIC COATED PELLETS CAP 60 MG (BASE EQ) | Tier 3 | | | X | |
| Central Nervous System Agents | DALFAMPRIDIN TAB 10MG ER | DALFAMPRIDINE TAB ER 12HR 10 MG | Tier 1 | X | X | | X |
| Central Nervous System Agents | DAYTRANA DIS 10MG/9HR | METHYLPHENIDATE TD PATCH 10 MG/9HR | Tier 3 | | X | X | |
| Central Nervous System Agents | DAYTRANA DIS 15MG/9HR | METHYLPHENIDATE TD PATCH 15 MG/9HR | Tier 3 | | X | X | |
| Central Nervous System Agents | DAYTRANA DIS 20MG/9HR | METHYLPHENIDATE TD PATCH 20 MG/9HR | Tier 3 | | X | X | |
| Central Nervous System Agents | DAYTRANA DIS 30MG/9HR | METHYLPHENIDATE TD PATCH 30 MG/9HR | Tier 3 | | X | X | |
| Central Nervous System Agents | DESOXYN TAB 5MG | METHAMPHETAMINE HCL TAB 5 MG | Tier 3 | | | X | |
| Central Nervous System Agents | DEXEDRINE CAP 10MG CR | DEXTROAMPHETAMINE SULFATE CAP ER 24HR 10 MG | Tier 3 | | | X | |
| Central Nervous System Agents | DEXEDRINE CAP 15MG CR | DEXTROAMPHETAMINE SULFATE CAP ER 24HR 15 MG | Tier 3 | | | X | |
| Central Nervous System Agents | DEXEDRINE CAP 5MG CR | DEXTROAMPHETAMINE SULFATE CAP ER 24HR 5 MG | Tier 3 | | | X | |
| Central Nervous System Agents | DEXMETHYLPH CAP 15MG ER | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 15 MG | Tier 1 | | X | | |
| Central Nervous System Agents | DEXMETHYLPH CAP 30MG ER | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 30 MG | Tier 1 | | X | | |
| Central Nervous System Agents | DEXMETHYLPH CAP 40MG ER | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 40 MG | Tier 1 | | X | | |
| Central Nervous System Agents | DEXMETHYLPH TAB 10MG | DEXMETHYLPHENIDATE HCL TAB 10 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXMETHYLPH TAB 2.5MG | DEXMETHYLPHENIDATE HCL TAB 2.5 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXMETHYLPH TAB 5MG | DEXMETHYLPHENIDATE HCL TAB 5 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | DEXMETHYLPHE CAP 10MG ER | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 10 MG | Tier 1 | | X | | |
| Central Nervous System Agents | DEXMETHYLPHE CAP 20MG ER | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 20 MG | Tier 1 | | X | | |
| Central Nervous System Agents | DEXMETHYLPHE CAP 5MG ER | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 5 MG | Tier 1 | | X | | |
| Central Nervous System Agents | DEXMETHYLPHE CAP ER 25MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 25 MG | Tier 1 | | X | | |
| Central Nervous System Agents | DEXMETHYLPHE CAP ER 35MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 35 MG | Tier 1 | | X | | |
| Central Nervous System Agents | DEXTROAMPHET CAP 10MG ER | DEXTROAMPHETAMINE SULFATE CAP ER 24HR 10 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET CAP 15MG ER | DEXTROAMPHETAMINE SULFATE CAP ER 24HR 15 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET CAP 5MG ER | DEXTROAMPHETAMINE SULFATE CAP ER 24HR 5 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET SOL 5MG/5ML | DEXTROAMPHETAMINE SULFATE ORAL SOLUTION 5 MG/5ML | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET TAB 10MG | DEXTROAMPHETAMINE SULFATE TAB 10 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET TAB 15MG | DEXTROAMPHETAMINE SULFATE TAB 15 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET TAB 2.5MG | DEXTROAMPHETAMINE SULFATE TAB 2.5 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET TAB 20MG | DEXTROAMPHETAMINE SULFATE TAB 20 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET TAB 30MG | DEXTROAMPHETAMINE SULFATE TAB 30 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET TAB 5MG | DEXTROAMPHETAMINE SULFATE TAB 5 MG | Tier 1 | | | | |
| Central Nervous System Agents | DEXTROAMPHET TAB 7.5MG | DEXTROAMPHETAMINE SULFATE TAB 7.5 MG | Tier 1 | | | | |
| Central Nervous System Agents | DIMETHYL FUM CAP 120MG DR | DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 120 MG | Tier 1 | X | X | | X |
| Central Nervous System Agents | DIMETHYL FUM CAP 240MG DR | DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 240 MG | Tier 1 | X | X | | X |
| Central Nervous System Agents | DIMETHYL FUM CAP STARTER | DIMETHYL FUMARATE CAPSULE DR STARTER PACK 120 MG & 240 MG | Tier 1 | X | X | | X |
| Central Nervous System Agents | DULOXETINE CAP 20MG | DULOXETINE HCL ENTERIC COATED PELLETS CAP 20 MG (BASE EQ) | Tier 1 | | | | |
| Central Nervous System Agents | DULOXETINE CAP 30MG | DULOXETINE HCL ENTERIC COATED PELLETS CAP 30 MG (BASE EQ) | Tier 1 | | | | |
| Central Nervous System Agents | DULOXETINE CAP 40MG | DULOXETINE HCL ENTERIC COATED PELLETS CAP 40 MG (BASE EQ) | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | DULOXETINE CAP 60MG | DULOXETINE HCL ENTERIC COATED PELLETS CAP 60 MG (BASE EQ) | Tier 1 | | | | |
| Central Nervous System Agents | DYANAVEL XR CHW 10MG | AMPHETAMINE CHEW TAB EXTENDED RELEASE 10 MG | Tier 3 | | X | | |
| Central Nervous System Agents | DYANAVEL XR CHW 15MG | AMPHETAMINE CHEW TAB EXTENDED RELEASE 15 MG | Tier 3 | | X | | |
| Central Nervous System Agents | DYANAVEL XR CHW 20MG | AMPHETAMINE CHEW TAB EXTENDED RELEASE 20 MG | Tier 3 | | X | | |
| Central Nervous System Agents | DYANAVEL XR CHW 5MG | AMPHETAMINE CHEW TAB EXTENDED RELEASE 5 MG | Tier 3 | | X | | |
| Central Nervous System Agents | DYANAVEL XR SUS 2.5MG/ML | AMPHETAMINE EXTENDED RELEASE SUSP 2.5 MG/ML | Tier 3 | | X | | |
| Central Nervous System Agents | EVEKEO TAB 10MG | AMPHETAMINE SULFATE TAB 10 MG | Tier 3 | | | | |
| Central Nervous System Agents | EVEKEO TAB 5MG | AMPHETAMINE SULFATE TAB 5 MG | Tier 3 | | | | |
| Central Nervous System Agents | EVEKEO ODT TAB 10MG | AMPHETAMINE SULFATE ORALLY DISINTEGRATING TAB 10 MG | Tier 3 | | | | |
| Central Nervous System Agents | EVEKEO ODT TAB 15MG | AMPHETAMINE SULFATE ORALLY DISINTEGRATING TAB 15 MG | Tier 3 | | | | |
| Central Nervous System Agents | EVEKEO ODT TAB 20MG | AMPHETAMINE SULFATE ORALLY DISINTEGRATING TAB 20 MG | Tier 3 | | | | |
| Central Nervous System Agents | EVEKEO ODT TAB 5MG | AMPHETAMINE SULFATE ORALLY DISINTEGRATING TAB 5 MG | Tier 3 | | | | |
| Central Nervous System Agents | EXSERVAN MIS 50MG | RILUZOLE ORAL FILM 50 MG | Tier 3 | X | | X | X |
| Central Nervous System Agents | EXTAVIA INJ 0.3MG | INTERFERON BETA-1B FOR INJ KIT 0.3 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | FINGOLIMOD CAP 0.5MG | FINGOLIMOD HCL CAP 0.5 MG (BASE EQUIV) | Tier 1 | X | X | | X |
| Central Nervous System Agents | FIRDAPSE TAB 10MG | AMIFAMPRIDINE PHOSPHATE TAB 10 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Central Nervous System Agents | FOCALIN TAB 10MG | DEXMETHYLPHENIDATE HCL TAB 10 MG | Tier 3 | | | | |
| Central Nervous System Agents | FOCALIN TAB 2.5MG | DEXMETHYLPHENIDATE HCL TAB 2.5 MG | Tier 3 | | | | |
| Central Nervous System Agents | FOCALIN TAB 5MG | DEXMETHYLPHENIDATE HCL TAB 5 MG | Tier 3 | | | | |
| Central Nervous System Agents | FOCALIN XR CAP 10MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 10 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | FOCALIN XR CAP 15MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 15 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | FOCALIN XR CAP 20MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 20 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | FOCALIN XR CAP 25MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 25 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | FOCALIN XR CAP 30MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 30 MG | Tier 3 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | FOCALIN XR CAP 35MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 35 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | FOCALIN XR CAP 40MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 40 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | FOCALIN XR CAP 5MG | DEXMETHYLPHENIDATE HCL CAP ER 24 HR 5 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | GABAPENT DLY TAB 300MG | GABAPENTIN (ONCE-DAILY) TAB 300 MG | Tier 1 | | X | X | |
| Central Nervous System Agents | GABAPENT DLY TAB 600MG | GABAPENTIN (ONCE-DAILY) TAB 600 MG | Tier 1 | | X | X | |
| Central Nervous System Agents | GILENYA CAP 0.25MG | FINGOLIMOD HCL CAP 0.25 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Central Nervous System Agents | GILENYA CAP 0.5MG | FINGOLIMOD HCL CAP 0.5 MG (BASE EQUIV) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | GLATIRAMER INJ 20MG/ML | GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML | Tier 1 | X | X | | X |
| Central Nervous System Agents | GLATIRAMER INJ 40MG/ML | GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML | Tier 1 | X | X | | X |
| Central Nervous System Agents | GLATOPA INJ 20MG/ML | GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 20 MG/ML | Tier 1 | X | X | | X |
| Central Nervous System Agents | GLATOPA INJ 40MG/ML | GLATIRAMER ACETATE SOLN PREFILLED SYRINGE 40 MG/ML | Tier 1 | X | X | | X |
| Central Nervous System Agents | GRALISE MIS 300/600 | GABAPENTIN (ONCE-DAILY) TAB PACK 300 MG (9) & 600 MG (24) | Tier 3 | | | X | |
| Central Nervous System Agents | GRALISE TAB 300MG | GABAPENTIN (ONCE-DAILY) TAB 300 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | GRALISE TAB 450MG | GABAPENTIN (ONCE-DAILY) TAB 450 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | GRALISE TAB 600MG | GABAPENTIN (ONCE-DAILY) TAB 600 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | GRALISE TAB 750MG | GABAPENTIN (ONCE-DAILY) TAB 750 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | GRALISE TAB 900MG | GABAPENTIN (ONCE-DAILY) TAB 900 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | GUANFACINE TAB 1MG ER | GUANFACINE HCL TAB ER 24HR 1 MG (BASE EQUIV) | Tier 1 | | | | |
| Central Nervous System Agents | GUANFACINE TAB 2MG ER | GUANFACINE HCL TAB ER 24HR 2 MG (BASE EQUIV) | Tier 1 | | | | |
| Central Nervous System Agents | GUANFACINE TAB 3MG ER | GUANFACINE HCL TAB ER 24HR 3 MG (BASE EQUIV) | Tier 1 | | | | |
| Central Nervous System Agents | GUANFACINE TAB 4MG ER | GUANFACINE HCL TAB ER 24HR 4 MG (BASE EQUIV) | Tier 1 | | | | |
| Central Nervous System Agents | HORIZANT TAB 300MG ER | GABAPENTIN ENACARBIL TAB ER 300 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | HORIZANT TAB 600MG ER | GABAPENTIN ENACARBIL TAB ER 600 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | INGREZZA CAP 40-80MG | VALBENZAZINE TOSYLATE CAP THERAPY PACK 40 MG (7) & 80 MG (21) | Tier 3 | X | X | | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | INGREZZA CAP 40MG | VALBENZAZINE TOSYLATE CAP 40 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Central Nervous System Agents | INGREZZA CAP 60MG | VALBENZAZINE TOSYLATE CAP 60 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Central Nervous System Agents | INGREZZA CAP 80MG | VALBENZAZINE TOSYLATE CAP 80 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Central Nervous System Agents | INTUNIV TAB 1MG | GUANFACINE HCL TAB ER 24HR 1 MG (BASE EQUIV) | Tier 3 | | | X | |
| Central Nervous System Agents | INTUNIV TAB 2MG | GUANFACINE HCL TAB ER 24HR 2 MG (BASE EQUIV) | Tier 3 | | | X | |
| Central Nervous System Agents | INTUNIV TAB 3MG | GUANFACINE HCL TAB ER 24HR 3 MG (BASE EQUIV) | Tier 3 | | | X | |
| Central Nervous System Agents | INTUNIV TAB 4MG | GUANFACINE HCL TAB ER 24HR 4 MG (BASE EQUIV) | Tier 3 | | | X | |
| Central Nervous System Agents | JORNAY PM CAP 100MG ER | METHYLPHENIDATE HCL CAP DELAYED ER 24HR 100 MG (PM) | Tier 2 | | X | | |
| Central Nervous System Agents | JORNAY PM CAP 20MG ER | METHYLPHENIDATE HCL CAP DELAYED ER 24HR 20 MG (PM) | Tier 2 | | X | | |
| Central Nervous System Agents | JORNAY PM CAP 40MG ER | METHYLPHENIDATE HCL CAP DELAYED ER 24HR 40 MG (PM) | Tier 2 | | X | | |
| Central Nervous System Agents | JORNAY PM CAP 60MG ER | METHYLPHENIDATE HCL CAP DELAYED ER 24HR 60 MG (PM) | Tier 2 | | X | | |
| Central Nervous System Agents | JORNAY PM CAP 80MG ER | METHYLPHENIDATE HCL CAP DELAYED ER 24HR 80 MG (PM) | Tier 2 | | X | | |
| Central Nervous System Agents | KAPVAY TAB 0.1 MG | CLONIDINE HCL TAB ER 12HR 0.1 MG | Tier 3 | | | X | |
| Central Nervous System Agents | KESIMPTA INJ 20/.4ML | OFATUMUMAB SOLN AUTO-INJECTOR 20 MG/0.4ML | Tier 2 | X | X | | X |
| Central Nervous System Agents | LISDEXAMFETA CAP 10MG | LISDEXAMFETAMINE DIMESYLATE CAP 10 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CAP 20MG | LISDEXAMFETAMINE DIMESYLATE CAP 20 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CAP 30MG | LISDEXAMFETAMINE DIMESYLATE CAP 30 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CAP 40MG | LISDEXAMFETAMINE DIMESYLATE CAP 40 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CAP 50MG | LISDEXAMFETAMINE DIMESYLATE CAP 50 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CAP 60MG | LISDEXAMFETAMINE DIMESYLATE CAP 60 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CAP 70MG | LISDEXAMFETAMINE DIMESYLATE CAP 70 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CHW 10MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 10 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CHW 20MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 20 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CHW 30MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 30 MG | Tier 1 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | LISDEXAMFETA CHW 40MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 40 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CHW 50MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 50 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LISDEXAMFETA CHW 60MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 60 MG | Tier 1 | | X | | |
| Central Nervous System Agents | LYRICA CAP 100MG | PREGABALIN CAP 100 MG | Tier 3 | X | | | |
| Central Nervous System Agents | LYRICA CAP 150MG | PREGABALIN CAP 150 MG | Tier 3 | X | | | |
| Central Nervous System Agents | LYRICA CAP 200MG | PREGABALIN CAP 200 MG | Tier 3 | X | | | |
| Central Nervous System Agents | LYRICA CAP 225MG | PREGABALIN CAP 225 MG | Tier 3 | X | | | |
| Central Nervous System Agents | LYRICA CAP 25MG | PREGABALIN CAP 25 MG | Tier 3 | X | | | |
| Central Nervous System Agents | LYRICA CAP 300MG | PREGABALIN CAP 300 MG | Tier 3 | X | | | |
| Central Nervous System Agents | LYRICA CAP 50MG | PREGABALIN CAP 50 MG | Tier 3 | X | | | |
| Central Nervous System Agents | LYRICA CAP 75MG | PREGABALIN CAP 75 MG | Tier 3 | X | | | |
| Central Nervous System Agents | LYRICA SOL 20MG/ML | PREGABALIN SOLN 20 MG/ML | Tier 3 | | | | |
| Central Nervous System Agents | LYRICA CR TAB 165MG | PREGABALIN TAB ER 24HR 165 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | LYRICA CR TAB 330MG | PREGABALIN TAB ER 24HR 330 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | LYRICA CR TAB 82.5MG | PREGABALIN TAB ER 24HR 82.5 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | MAVENCLAD PAK 10MG(10) | CLADRIBINE TAB THERAPY PACK 10 MG (10 TABS) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | MAVENCLAD PAK 10MG(4) | CLADRIBINE TAB THERAPY PACK 10 MG (4 TABS) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | MAVENCLAD PAK 10MG(5) | CLADRIBINE TAB THERAPY PACK 10 MG (5 TABS) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | MAVENCLAD PAK 10MG(6) | CLADRIBINE TAB THERAPY PACK 10 MG (6 TABS) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | MAVENCLAD PAK 10MG(7) | CLADRIBINE TAB THERAPY PACK 10 MG (7 TABS) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | MAVENCLAD PAK 10MG(8) | CLADRIBINE TAB THERAPY PACK 10 MG (8 TABS) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | MAVENCLAD PAK 10MG(9) | CLADRIBINE TAB THERAPY PACK 10 MG (9 TABS) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | MAYZENT PAK STARTER | SIPONIMOD FUMARATE TAB 0.25 MG (12) STARTER PACK | Tier 3 | X | X | | X |
| Central Nervous System Agents | MAYZENT PAK STARTER | SIPONIMOD FUMARATE TAB 0.25 MG (7) STARTER PACK | Tier 3 | X | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | MAYZENT TAB 0.25MG | SIPONIMOD FUMARATE TAB 0.25 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Central Nervous System Agents | MAYZENT TAB 1MG | SIPONIMOD FUMARATE TAB 1 MG (BASE EQUIV) | Tier 3 | X | X | | |
| Central Nervous System Agents | MAYZENT TAB 2MG | SIPONIMOD FUMARATE TAB 2 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Central Nervous System Agents | METADATE CD CAP 10MG | METHYLPHENIDATE HCL CAP ER 10 MG (CD) | Tier 3 | | X | X | |
| Central Nervous System Agents | METADATE CD CAP 20MG | METHYLPHENIDATE HCL CAP ER 20 MG (CD) | Tier 3 | | X | X | |
| Central Nervous System Agents | METADATE CD CAP 30MG | METHYLPHENIDATE HCL CAP ER 30 MG (CD) | Tier 3 | | X | X | |
| Central Nervous System Agents | METADATE CD CAP 40MG | METHYLPHENIDATE HCL CAP ER 40 MG (CD) | Tier 3 | | X | X | |
| Central Nervous System Agents | METADATE CD CAP 50MG | METHYLPHENIDATE HCL CAP ER 50 MG (CD) | Tier 3 | | X | X | |
| Central Nervous System Agents | METADATE CD CAP 60MG | METHYLPHENIDATE HCL CAP ER 60 MG (CD) | Tier 3 | | X | X | |
| Central Nervous System Agents | METHAMPHETAM TAB 5MG | METHAMPHETAMINE HCL TAB 5 MG | Tier 1 | | | | |
| Central Nervous System Agents | METHYLIN SOL 10MG/5ML | METHYLPHENIDATE HCL SOLN 10 MG/5ML | Tier 3 | | | | |
| Central Nervous System Agents | METHYLIN SOL 5MG/5ML | METHYLPHENIDATE HCL SOLN 5 MG/5ML | Tier 3 | | | | |
| Central Nervous System Agents | METHYLPHENID CAP 10MG | METHYLPHENIDATE HCL CAP ER 10 MG (CD) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 10MG ER | METHYLPHENIDATE HCL CAP ER 24HR 10 MG (XR) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 10MG ER | METHYLPHENIDATE HCL CAP ER 24HR 10 MG (LA) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 15MG ER | METHYLPHENIDATE HCL CAP ER 24HR 15 MG (XR) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 20MG | METHYLPHENIDATE HCL CAP ER 20 MG (CD) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 20MG ER | METHYLPHENIDATE HCL CAP ER 24HR 20 MG (XR) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 20MG ER | METHYLPHENIDATE HCL CAP ER 24HR 20 MG (LA) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 30MG | METHYLPHENIDATE HCL CAP ER 30 MG (CD) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 30MG ER | METHYLPHENIDATE HCL CAP ER 24HR 30 MG (XR) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 30MG ER | METHYLPHENIDATE HCL CAP ER 24HR 30 MG (LA) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 40MG ER | METHYLPHENIDATE HCL CAP ER 40 MG (CD) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 40MG ER | METHYLPHENIDATE HCL CAP ER 24HR 40 MG (XR) | Tier 1 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | METHYLPHENID CAP 40MG ER | METHYLPHENIDATE HCL CAP ER 24HR 40 MG (LA) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 50MG | METHYLPHENIDATE HCL CAP ER 50 MG (CD) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 50MG ER | METHYLPHENIDATE HCL CAP ER 24HR 50 MG (XR) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 60MG | METHYLPHENIDATE HCL CAP ER 60 MG (CD) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 60MG ER | METHYLPHENIDATE HCL CAP ER 24HR 60 MG (XR) | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID CAP 60MG LA | METHYLPHENIDATE HCL CAP ER 24HR 60 MG (LA) | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID CHW 10MG | METHYLPHENIDATE HCL CHEW TAB 10 MG | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID CHW 2.5MG | METHYLPHENIDATE HCL CHEW TAB 2.5 MG | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID CHW 5MG | METHYLPHENIDATE HCL CHEW TAB 5 MG | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID PAD 10MG/9HR | METHYLPHENIDATE TD PATCH 10 MG/9HR | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID PAD 15MG/9HR | METHYLPHENIDATE TD PATCH 15 MG/9HR | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID PAD 20MG/9HR | METHYLPHENIDATE TD PATCH 20 MG/9HR | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID PAD 30MG/9HR | METHYLPHENIDATE TD PATCH 30 MG/9HR | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID SOL 10MG/5ML | METHYLPHENIDATE HCL SOLN 10 MG/5ML | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID SOL 5MG/5ML | METHYLPHENIDATE HCL SOLN 5 MG/5ML | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID TAB 10MG | METHYLPHENIDATE HCL TAB 10 MG | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID TAB 10MG ER | METHYLPHENIDATE HCL TAB ER 10 MG | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID TAB 18MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 18 MG | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID TAB 18MG ER | METHYLPHENIDATE HCL TAB ER 24HR 18 MG | Tier 1 | | X | X | |
| Central Nervous System Agents | METHYLPHENID TAB 20MG | METHYLPHENIDATE HCL TAB 20 MG | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID TAB 20MG ER | METHYLPHENIDATE HCL TAB ER 20 MG | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID TAB 27MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 27 MG | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID TAB 27MG ER | METHYLPHENIDATE HCL TAB ER 24HR 27 MG | Tier 1 | | X | X | |
| Central Nervous System Agents | METHYLPHENID TAB 36MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 36 MG | Tier 1 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | METHYLPHENID TAB 36MG ER | METHYLPHENIDATE HCL TAB ER 24HR 36 MG | Tier 1 | | X | X | |
| Central Nervous System Agents | METHYLPHENID TAB 45MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 45 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | METHYLPHENID TAB 54MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 54 MG | Tier 1 | | X | | |
| Central Nervous System Agents | METHYLPHENID TAB 54MG ER | METHYLPHENIDATE HCL TAB ER 24HR 54 MG | Tier 1 | | X | X | |
| Central Nervous System Agents | METHYLPHENID TAB 5MG | METHYLPHENIDATE HCL TAB 5 MG | Tier 1 | | | | |
| Central Nervous System Agents | METHYLPHENID TAB 63MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 63 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | METHYLPHENID TAB 72MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 72 MG | Tier 1 | | X | X | |
| Central Nervous System Agents | MYDAYIS CAP 12.5MG | AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 12.5 MG | Tier 3 | | X | | |
| Central Nervous System Agents | MYDAYIS CAP 25MG | AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 25 MG | Tier 3 | | X | | |
| Central Nervous System Agents | MYDAYIS CAP 37.5MG | AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 37.5 MG | Tier 3 | | X | | |
| Central Nervous System Agents | MYDAYIS CAP 50MG | AMPHETAMINE-DEXTROAMPHETAMINE 3-BEAD CAP ER 24HR 50 MG | Tier 3 | | X | | |
| Central Nervous System Agents | NUDEXTA CAP 20-10MG | DEXTROMETHORPHAN HBR-QUINIDINE SULFATE CAP 20-10 MG | Tier 2 | X | X | | |
| Central Nervous System Agents | PLEGRIDY INJ | PEGINTERFERON BETA-1A SOLN PREFILLED SYRINGE 125 MCG/0.5ML | Tier 3 | X | X | | X |
| Central Nervous System Agents | PLEGRIDY INJ | PEGINTERFERON BETA-1A IM SOLN PREFILLED SYR 125 MCG/0.5ML | Tier 3 | X | X | | |
| Central Nervous System Agents | PLEGRIDY INJ PEN | PEGINTERFERON BETA-1A SOLN PEN-INJECTOR 125 MCG/0.5ML | Tier 3 | X | X | | X |
| Central Nervous System Agents | PLEGRIDY INJ STARTER | PEGINTERFERON BETA-1A SOLN PREF SYR 63 & 94 MCG/0.5ML PACK | Tier 3 | X | X | | X |
| Central Nervous System Agents | PLEGRIDY PEN INJ STARTER | PEGINTERFERON BETA-1A SOLN PEN-INJ 63 & 94 MCG/0.5ML PACK | Tier 3 | X | X | | X |
| Central Nervous System Agents | PREGABALIN CAP 100MG | PREGABALIN CAP 100 MG | Tier 1 | | | | |
| Central Nervous System Agents | PREGABALIN CAP 150MG | PREGABALIN CAP 150 MG | Tier 1 | | | | |
| Central Nervous System Agents | PREGABALIN CAP 200MG | PREGABALIN CAP 200 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | PREGABALIN CAP 225MG | PREGABALIN CAP 225 MG | Tier 1 | | | | |
| Central Nervous System Agents | PREGABALIN CAP 25MG | PREGABALIN CAP 25 MG | Tier 1 | | | | |
| Central Nervous System Agents | PREGABALIN CAP 300MG | PREGABALIN CAP 300 MG | Tier 1 | | | | |
| Central Nervous System Agents | PREGABALIN CAP 50MG | PREGABALIN CAP 50 MG | Tier 1 | | | | |
| Central Nervous System Agents | PREGABALIN CAP 75MG | PREGABALIN CAP 75 MG | Tier 1 | | | | |
| Central Nervous System Agents | PREGABALIN SOL 20MG/ML | PREGABALIN SOLN 20 MG/ML | Tier 1 | | | | |
| Central Nervous System Agents | PREGABALN ER TAB 165MG | PREGABALIN TAB ER 24HR 165 MG | Tier 1 | | X | | |
| Central Nervous System Agents | PREGABALN ER TAB 330MG | PREGABALIN TAB ER 24HR 330 MG | Tier 1 | | X | | |
| Central Nervous System Agents | PREGABALN ER TAB 82.5MG | PREGABALIN TAB ER 24HR 82.5 MG | Tier 1 | | X | | |
| Central Nervous System Agents | PROCENTRA SOL 5MG/5ML | DEXTROAMPHETAMINE SULFATE ORAL SOLUTION 5 MG/5ML | Tier 3 | | | | |
| Central Nervous System Agents | QUILLICHEW CHW 20MG ER | METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 20 MG | Tier 3 | | X | | |
| Central Nervous System Agents | QUILLICHEW CHW 30MG ER | METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 30 MG | Tier 3 | | X | | |
| Central Nervous System Agents | QUILLICHEW CHW 40MG ER | METHYLPHENIDATE HCL CHEW TAB EXTENDED RELEASE 40 MG | Tier 3 | | X | | |
| Central Nervous System Agents | QUILLIVANT SUS 25MG/5ML | METHYLPHENIDATE HCL FOR ER SUSP 25 MG/5ML (5 MG/ML) | Tier 3 | | X | | |
| Central Nervous System Agents | RADICAVA ORS SUS 105/5ML | EDARAVONE ORAL SUSP 105 MG/5ML | Tier 3 | X | X | | |
| Central Nervous System Agents | RADICAVA ORS SUS STARTER | EDARAVONE ORAL SUSP 105 MG/5ML | Tier 3 | X | X | | |
| Central Nervous System Agents | REBIF INJ 22/0.5 | INTERFERON BETA-1A SOLN PREF SYR 22 MCG/0.5ML (12MU/ML) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | REBIF INJ 44/0.5 | INTERFERON BETA-1A SOLN PREF SYR 44 MCG/0.5ML | Tier 3 | X | X | X | X |
| Central Nervous System Agents | REBIF REBIDO INJ 22/0.5 | INTERFERON BETA-1A SOLN AUTO-INJ 22 MCG/0.5ML (12MU/ML) | Tier 3 | X | X | X | X |
| Central Nervous System Agents | REBIF REBIDO INJ 44/0.5 | INTERFERON BETA-1A SOLN AUTO-INJ 44 MCG/0.5ML | Tier 3 | X | X | X | X |
| Central Nervous System Agents | REBIF REBIDO INJ TITRATN | INTERFERON BETA-1A AUTO-INJ 6X8.8 MCG/0.2ML & 6X22 MCG/0.5ML | Tier 3 | X | X | X | X |
| Central Nervous System Agents | REBIF TITRTN INJ PACK | INTERFERON BETA-1A PREF SYR 6X8.8 MCG/0.2ML & 6X22 MCG/0.5ML | Tier 3 | X | X | X | X |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|----------------------|--|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | RELEXXII TAB 18MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 18 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | RELEXXII TAB 27MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 27 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | RELEXXII TAB 36MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 36 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | RELEXXII TAB 45MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 45 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | RELEXXII TAB 54MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 54 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | RELEXXII TAB 63MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 63 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | RELEXXII TAB 72MG ER | METHYLPHENIDATE HCL TAB ER OSMOTIC RELEASE (OSM) 72 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | RILUTEK TAB 50MG | RILUZOLE TAB 50 MG | Tier 3 | | | X | X |
| Central Nervous System Agents | RILUZOLE TAB 50MG | RILUZOLE TAB 50 MG | Tier 1 | | | | X |
| Central Nervous System Agents | RITALIN TAB 10MG | METHYLPHENIDATE HCL TAB 10 MG | Tier 3 | | | X | |
| Central Nervous System Agents | RITALIN TAB 20MG | METHYLPHENIDATE HCL TAB 20 MG | Tier 3 | | | X | |
| Central Nervous System Agents | RITALIN TAB 5MG | METHYLPHENIDATE HCL TAB 5 MG | Tier 3 | | | X | |
| Central Nervous System Agents | RITALIN LA CAP 10MG | METHYLPHENIDATE HCL CAP ER 24HR 10 MG (LA) | Tier 3 | | X | X | |
| Central Nervous System Agents | RITALIN LA CAP 20MG | METHYLPHENIDATE HCL CAP ER 24HR 20 MG (LA) | Tier 3 | | X | X | |
| Central Nervous System Agents | RITALIN LA CAP 30MG | METHYLPHENIDATE HCL CAP ER 24HR 30 MG (LA) | Tier 3 | | X | X | |
| Central Nervous System Agents | RITALIN LA CAP 40MG | METHYLPHENIDATE HCL CAP ER 24HR 40 MG (LA) | Tier 3 | | X | X | |
| Central Nervous System Agents | SAVELLA MIS TITR PAK | MILNACIPRAN HCL TAB 12.5 MG (5) & 25 MG (8) & 50 MG (42) PAK | Tier 3 | | X | | |
| Central Nervous System Agents | SAVELLA TAB 100MG | MILNACIPRAN HCL TAB 100 MG | Tier 3 | | X | | |
| Central Nervous System Agents | SAVELLA TAB 12.5MG | MILNACIPRAN HCL TAB 12.5 MG | Tier 3 | | X | | |
| Central Nervous System Agents | SAVELLA TAB 25MG | MILNACIPRAN HCL TAB 25 MG | Tier 3 | | X | | |
| Central Nervous System Agents | SAVELLA TAB 50MG | MILNACIPRAN HCL TAB 50 MG | Tier 3 | | X | | |
| Central Nervous System Agents | STRATTERA CAP 100MG | ATOMOXETINE HCL CAP 100 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Central Nervous System Agents | STRATTERA CAP 10MG | ATOMOXETINE HCL CAP 10 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Central Nervous System Agents | STRATTERA CAP 18MG | ATOMOXETINE HCL CAP 18 MG (BASE EQUIV) | Tier 3 | | X | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | STRATTERA CAP 25MG | ATOMOXETINE HCL CAP 25 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Central Nervous System Agents | STRATTERA CAP 40MG | ATOMOXETINE HCL CAP 40 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Central Nervous System Agents | STRATTERA CAP 60MG | ATOMOXETINE HCL CAP 60 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Central Nervous System Agents | STRATTERA CAP 80MG | ATOMOXETINE HCL CAP 80 MG (BASE EQUIV) | Tier 3 | | X | X | |
| Central Nervous System Agents | TECFIDERA CAP 120MG | DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 120 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | TECFIDERA CAP 240MG | DIMETHYL FUMARATE CAPSULE DELAYED RELEASE 240 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | TECFIDERA CAP STARTER | DIMETHYL FUMARATE CAPSULE DR STARTER PACK 120 MG & 240 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | TEGLUTIK SUS 50/10ML | RILUZOLE SUSP 50 MG/10ML | Tier 3 | X | | | X |
| Central Nervous System Agents | TERIFLUNOMID TAB 14MG | TERIFLUNOMIDE TAB 14 MG | Tier 1 | X | X | | X |
| Central Nervous System Agents | TERIFLUNOMID TAB 7MG | TERIFLUNOMIDE TAB 7 MG | Tier 1 | X | X | | X |
| Central Nervous System Agents | TETRABENAZIN TAB 12.5MG | TETRABENAZINE TAB 12.5 MG | Tier 1 | X | | | X |
| Central Nervous System Agents | TETRABENAZIN TAB 25MG | TETRABENAZINE TAB 25 MG | Tier 1 | X | | | X |
| Central Nervous System Agents | TIGLUTIK SUS 50/10ML | RILUZOLE SUSP 50 MG/10ML | Tier 3 | X | | | X |
| Central Nervous System Agents | VUMERITY CAP 231MG | DIROXIMEL FUMARATE CAPSULE DELAYED RELEASE 231 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | VYVANSE CAP 10MG | LISDEXAMFETAMINE DIMESYLATE CAP 10 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CAP 20MG | LISDEXAMFETAMINE DIMESYLATE CAP 20 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CAP 30MG | LISDEXAMFETAMINE DIMESYLATE CAP 30 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CAP 40MG | LISDEXAMFETAMINE DIMESYLATE CAP 40 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CAP 50MG | LISDEXAMFETAMINE DIMESYLATE CAP 50 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CAP 60MG | LISDEXAMFETAMINE DIMESYLATE CAP 60 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CAP 70MG | LISDEXAMFETAMINE DIMESYLATE CAP 70 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CHW 10MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 10 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CHW 20MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 20 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CHW 30MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 30 MG | Tier 3 | | X | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Central Nervous System Agents | VYVANSE CHW 40MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 40 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CHW 50MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 50 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | VYVANSE CHW 60MG | LISDEXAMFETAMINE DIMESYLATE CHEW TAB 60 MG | Tier 3 | | X | X | |
| Central Nervous System Agents | XENAZINE TAB 12.5MG | TETRABENAZINE TAB 12.5 MG | Tier 3 | X | | X | X |
| Central Nervous System Agents | XENAZINE TAB 25MG | TETRABENAZINE TAB 25 MG | Tier 3 | X | | X | X |
| Central Nervous System Agents | ZENZEDI TAB 10MG | DEXTROAMPHETAMINE SULFATE TAB 10 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ZENZEDI TAB 15MG | DEXTROAMPHETAMINE SULFATE TAB 15 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ZENZEDI TAB 2.5MG | DEXTROAMPHETAMINE SULFATE TAB 2.5 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ZENZEDI TAB 20MG | DEXTROAMPHETAMINE SULFATE TAB 20 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ZENZEDI TAB 30MG | DEXTROAMPHETAMINE SULFATE TAB 30 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ZENZEDI TAB 5MG | DEXTROAMPHETAMINE SULFATE TAB 5 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ZENZEDI TAB 7.5MG | DEXTROAMPHETAMINE SULFATE TAB 7.5 MG | Tier 3 | | | X | |
| Central Nervous System Agents | ZEPOSIA CAP .92MG | OZANIMOD HCL CAP 0.92 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | ZEPOSIA CAP STR KIT | OZANIMOD CAP PACK 4 X 0.23 MG & 3 X 0.46 MG & 21 X 0.92 MG | Tier 3 | X | | X | X |
| Central Nervous System Agents | ZEPOSIA CAP STR KIT | OZANIMOD CAP PACK 4 X 0.23 MG & 3 X 0.46 MG & 30 X 0.92 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents | ZEPOSIA 7DAY CAP STR PACK | OZANIMOD CAP PACK 4 X 0.23 MG & 3 X 0.46 MG | Tier 3 | X | X | X | X |
| Central Nervous System Agents - Drugs to Treat Nerve Conditions | ADDYI TAB 100MG | FLIBANSERIN TAB 100 MG | Tier 3 | | | | |
| Central Nervous System Agents - Drugs to Treat Nerve Conditions | VYLEESI INJ 1.75/0.3 | BREMELANOTIDE ACET SUBCUTANEOUS SOLN AUTO-INJ 1.75 MG/0.3ML | Tier 3 | | X | | |
| Cystic Fibrosis Agents - Drugs to treat Cystic Fibrosis | BRONCHITOL CAP 40MG | MANNITOL INHAL CAP 40 MG | Tier 3 | X | X | X | X |
| Cystic Fibrosis Agents - Drugs to treat Cystic Fibrosis | BRONCHITOL CAP TOL TEST | MANNITOL INHAL CAP 40 MG | Tier 3 | X | X | X | X |
| Dental and Oral Agents | CEVIMELINE CAP 30MG | CEVIMELINE HCL CAP 30 MG | Tier 1 | | | | |
| Dental and Oral Agents | CHLORHEX GLU SOL 0.12% | CHLORHEXIDINE GLUCONATE SOLN 0.12% | Tier 1 | | | | |
| Dental and Oral Agents | EVOXAC CAP 30MG | CEVIMELINE HCL CAP 30 MG | Tier 3 | | | X | |
| Dental and Oral Agents | KOURZEQ PST 0.1% | TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1% | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Dental and Oral Agents | ORALONE DENT PST 0.1% | TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1% | Tier 1 | | | | |
| Dental and Oral Agents | PERIDEX SOL 0.12% | CHLORHEXIDINE GLUCONATE SOLN 0.12% | Tier 3 | | | | |
| Dental and Oral Agents | PERIOGARD SOL 0.12% | CHLORHEXIDINE GLUCONATE SOLN 0.12% | Tier 1 | | | | |
| Dental and Oral Agents | PILOCARPINE TAB 5MG | PILOCARPINE HCL TAB 5 MG | Tier 1 | | | | |
| Dental and Oral Agents | PILOCARPINE TAB 7.5MG | PILOCARPINE HCL TAB 7.5 MG | Tier 1 | | | | |
| Dental and Oral Agents | SALAGEN TAB 5MG | PILOCARPINE HCL TAB 5 MG | Tier 3 | | | | |
| Dental and Oral Agents | SALAGEN TAB 7.5MG | PILOCARPINE HCL TAB 7.5 MG | Tier 3 | | | | |
| Dental and Oral Agents | TRIAMCINOLON PST 0.1% | TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1% | Tier 1 | | | | |
| Dental and Oral Agents | TRIAMCINOLON PST DEN 0.1% | TRIAMCINOLONE ACETONIDE DENTAL PASTE 0.1% | Tier 1 | | | | |
| Dental and Oral Agents - Drugs to Treat Mouth and Throat Conditions | AQUORAL SPR | *ARTIFICIAL SALIVA - SOLUTION*** | Tier 3 | | | | |
| Dental and Oral Agents - Drugs to Treat Mouth and Throat Conditions | DEBACTEROL SOL 30-50% | SULFURIC ACID-SULFONATED PHENOLICS SOLN 30-50% | Tier 2 | | | | |
| Dental and Oral Agents - Drugs to Treat Mouth and Throat Conditions | FIRST-MOUTHW SUS BLM | *DIPHENHYD-LIDO-AL HYDROX-MG HYDROX-SIMETH SUSP (CMPD KIT)** | Tier 3 | X | | | |
| Dental and Oral Agents - Drugs to Treat Mouth and Throat Conditions | MUCOSITISRX POW | *ARTIFICIAL SALIVA - PACKET*** | Tier 3 | | | | |
| Dermatological Agents | ABSORICA CAP 10MG | ISOTRETINOIN CAP 10 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA CAP 20MG | ISOTRETINOIN CAP 20 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA CAP 25MG | ISOTRETINOIN CAP 25 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA CAP 30MG | ISOTRETINOIN CAP 30 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA CAP 35MG | ISOTRETINOIN CAP 35 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA CAP 40MG | ISOTRETINOIN CAP 40 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA LD CAP 16MG | ISOTRETINOIN MICRONIZED CAP 16 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA LD CAP 24MG | ISOTRETINOIN MICRONIZED CAP 24 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA LD CAP 32MG | ISOTRETINOIN MICRONIZED CAP 32 MG | Tier 3 | | | X | |
| Dermatological Agents | ABSORICA LD CAP 8MG | ISOTRETINOIN MICRONIZED CAP 8 MG | Tier 3 | | | X | |
| Dermatological Agents | ACANYA GEL 1.2-2.5% | CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1.2-2.5% | Tier 3 | | | | |
| Dermatological Agents | ACUTANE CAP 10MG | ISOTRETINOIN CAP 10 MG | Tier 1 | | | | |
| Dermatological Agents | ACUTANE CAP 20MG | ISOTRETINOIN CAP 20 MG | Tier 1 | | | | |
| Dermatological Agents | ACUTANE CAP 30MG | ISOTRETINOIN CAP 30 MG | Tier 1 | | | | |
| Dermatological Agents | ACUTANE CAP 40MG | ISOTRETINOIN CAP 40 MG | Tier 1 | | | | |
| Dermatological Agents | ACITRETIN CAP 10MG | ACITRETIN CAP 10 MG | Tier 1 | | | | |
| Dermatological Agents | ACITRETIN CAP 17.5MG | ACITRETIN CAP 17.5 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Dermatological Agents | ACITRETIN CAP 25MG | ACITRETIN CAP 25 MG | Tier 1 | | | | |
| Dermatological Agents | ACZONE GEL 5% | DAPSONE GEL 5% | Tier 3 | | | X | |
| Dermatological Agents | ACZONE GEL 7.5% | DAPSONE GEL 7.5% | Tier 3 | | | X | |
| Dermatological Agents | ADAPAL/BEN P GEL 0.1-2.5% | ADAPALENE-BENZOYL PEROXIDE GEL 0.1-2.5% | Tier 1 | | | | |
| Dermatological Agents | AKLIEF CRE 0.005% | TRIFAROTENE CREAM 0.005% | Tier 3 | X | | | |
| Dermatological Agents | ALA-SCALP LOT 2% | HYDROCORTISONE LOTION 2% | Tier 3 | | | | |
| Dermatological Agents | ALCLOMETASON CRE 0.05% | ALCLOMETASONE DIPROPIONATE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | ALCLOMETASON OIN 0.05% | ALCLOMETASONE DIPROPIONATE OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | ALTABAX OIN 1% | RETAPAMULIN OINT 1% | Tier 3 | | | | |
| Dermatological Agents | AMCINONIDE CRE 0.1% | AMCINONIDE CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | AMCINONIDE LOT 0.1% | AMCINONIDE LOTION 0.1% | Tier 1 | | | | |
| Dermatological Agents | AMCINONIDE OIN 0.1% | AMCINONIDE OINT 0.1% | Tier 1 | | | | |
| Dermatological Agents | AMELUZ GEL 10% | AMINOLEVULINIC ACID HCL GEL 10% | Tier 3 | | | | |
| Dermatological Agents | AMNESTEEM CAP 10MG | ISOTRETINOIN CAP 10 MG | Tier 1 | | | | |
| Dermatological Agents | AMNESTEEM CAP 20MG | ISOTRETINOIN CAP 20 MG | Tier 1 | | | | |
| Dermatological Agents | AMNESTEEM CAP 40MG | ISOTRETINOIN CAP 40 MG | Tier 1 | | | | |
| Dermatological Agents | AMZEEQ AER 4% | MINOCYCLINE HCL MICRONIZED FOAM 4% | Tier 3 | | | | |
| Dermatological Agents | ANALPRAM HC CRE 2.5-1% | HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1% | Tier 3 | | | | |
| Dermatological Agents | ANALPRAM-HC CRE 1-1% | HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 1-1% | Tier 3 | | | | |
| Dermatological Agents | ANALPRAM-HC LOT 2.5% | HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL LOTN 2.5-1% | Tier 3 | | | | |
| Dermatological Agents | ANALPRM SNGL CRE HC 2.5-1 | HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1% | Tier 3 | | | | |
| Dermatological Agents | APEXICON E CRE 0.05% | DIFLORASONE DIACETATE EMOLLIENT BASE CREAM 0.05% | Tier 2 | | | | |
| Dermatological Agents | ARTISS KIT 10ML | *FIBRIN SEALANT COMPONENT KIT 10 ML*** | Tier 3 | | | | |
| Dermatological Agents | ARTISS KIT 2ML | *FIBRIN SEALANT COMPONENT KIT 2 ML*** | Tier 3 | | | | |
| Dermatological Agents | ARTISS KIT 4ML | *FIBRIN SEALANT COMPONENT KIT 4 ML*** | Tier 3 | | | | |
| Dermatological Agents | ARTISS SOL 10ML | *FIBRIN SEALANT COMPONENT SOLUTION*** | Tier 3 | | | | |
| Dermatological Agents | ARTISS SOL 2ML | *FIBRIN SEALANT COMPONENT SOLUTION*** | Tier 3 | | | | |
| Dermatological Agents | ARTISS SOL 4ML | *FIBRIN SEALANT COMPONENT SOLUTION*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | ATRALIN GEL 0.05% | TRETINOIN GEL 0.05% | Tier 3 | X | | X | |
| Dermatological Agents | AZELAIC ACID GEL 15% | AZELAIC ACID GEL 15% | Tier 1 | | | | |
| Dermatological Agents | AZELEX CRE 20% | AZELAIC ACID CREAM 20% | Tier 3 | | | | |
| Dermatological Agents | BENZAMYCIN GEL 5-3% | BENZOYL PEROXIDE-ERYTHROMYCIN GEL 5-3% | Tier 2 | | | | |
| Dermatological Agents | BETA DIPROP CRE 0.05% | BETAMETHASONE DIPROPIONATE AUGMENTED CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | BETA DIPROP GEL 0.05% | BETAMETHASONE DIPROPIONATE AUGMENTED GEL 0.05% | Tier 1 | | | | |
| Dermatological Agents | BETA DIPROP LOT 0.05% | BETAMETHASONE DIPROPIONATE AUGMENTED LOTION 0.05% | Tier 1 | | | | |
| Dermatological Agents | BETA DIPROP OIN 0.05% | BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | BETAMETH DIP CRE 0.05% | BETAMETHASONE DIPROPIONATE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | BETAMETH DIP LOT 0.05% | BETAMETHASONE DIPROPIONATE LOTION 0.05% | Tier 1 | | | | |
| Dermatological Agents | BETAMETH DIP OIN 0.05% | BETAMETHASONE DIPROPIONATE OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | BETAMETH DIP POW | BETAMETHASONE DIPROPIONATE POWDER | Tier 3 | X | | | |
| Dermatological Agents | BETAMETH DIP POW MICRONIZ | BETAMETHASONE DIPROPIONATE POWDER | Tier 3 | X | | | |
| Dermatological Agents | BETAMETH DIP POW USP NF | BETAMETHASONE DIPROPIONATE POWDER | Tier 3 | X | | | |
| Dermatological Agents | BETAMETH VAL AER 0.12% | BETAMETHASONE VALERATE AEROSOL FOAM 0.12% | Tier 1 | | | | |
| Dermatological Agents | BETAMETH VAL CRE 0.1% | BETAMETHASONE VALERATE CREAM 0.1% (BASE EQUIVALENT) | Tier 1 | | | | |
| Dermatological Agents | BETAMETH VAL LOT 0.1% | BETAMETHASONE VALERATE LOTION 0.1% (BASE EQUIVALENT) | Tier 1 | | | | |
| Dermatological Agents | BETAMETH VAL OIN 0.1% | BETAMETHASONE VALERATE OINT 0.1% (BASE EQUIVALENT) | Tier 1 | | | | |
| Dermatological Agents | BETAMETHASON POW VALERATE | BETAMETHASONE VALERATE POWDER | Tier 3 | X | | | |
| Dermatological Agents | BRIMONIDINE GEL 0.33% | BRIMONIDINE TARTRATE GEL 0.33% (BASE EQUIVALENT) | Tier 1 | X | | | |
| Dermatological Agents | BRYHALI LOT 0.01% | HALOBETASOL PROPIONATE LOTION 0.01% | Tier 3 | | | X | |
| Dermatological Agents | CALCIP/BETAM SUS | CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE SUSP 0.005-0.064% | Tier 1 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | CALCIPOTRIEN AER 0.005% | CALCIPOTRIENE FOAM 0.005% | Tier 3 | | | X | |
| Dermatological Agents | CALCIPOTRIEN CRE 0.005% | CALCIPOTRIENE CREAM 0.005% | Tier 1 | | | | |
| Dermatological Agents | CALCIPOTRIEN OIN 0.005% | CALCIPOTRIENE OINT 0.005% | Tier 1 | | | | |
| Dermatological Agents | CALCIPOTRIEN OIN BETAMETH | CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE OINT 0.005-0.064% | Tier 1 | | | | |
| Dermatological Agents | CALCIPOTRIEN SOL 0.005% | CALCIPOTRIENE SOLN 0.005% (50 MCG/ML) | Tier 1 | | | | |
| Dermatological Agents | CALCITRENE OIN 0.005% | CALCIPOTRIENE OINT 0.005% | Tier 3 | | | | |
| Dermatological Agents | CALCITRIOL OIN 3MCG/GM | CALCITRIOL OINT 3 MCG/GM | Tier 1 | | | | |
| Dermatological Agents | CAPEX SHA 0.01% | FLUOCINOLONE ACETONIDE SHAMPOO 0.01% | Tier 2 | | | | |
| Dermatological Agents | CARAC CRE 0.5% | FLUOROURACIL CREAM 0.5% | Tier 3 | | | X | |
| Dermatological Agents | CENTANY OIN 2% | MUPIROCIN OINT 2% | Tier 3 | | | | |
| Dermatological Agents | CENTANY AT KIT 2% | MUPIROCIN OINT KIT 2% | Tier 3 | | | | |
| Dermatological Agents | CICLODAN SOL 8% | CICLOPIROX SOLUTION 8% | Tier 1 | | | | |
| Dermatological Agents | CICLOPIROX CRE 0.77% | CICLOPIROX OLAMINE CREAM 0.77% (BASE EQUIV) | Tier 1 | | | | |
| Dermatological Agents | CICLOPIROX GEL 0.77% | CICLOPIROX GEL 0.77% | Tier 1 | | | | |
| Dermatological Agents | CICLOPIROX KIT 8% | CICLOPIROX SOLUTION KIT 8% | Tier 1 | | | | |
| Dermatological Agents | CICLOPIROX SHA 1% | CICLOPIROX SHAMPOO 1% | Tier 1 | | | | |
| Dermatological Agents | CICLOPIROX SOL 8% | CICLOPIROX SOLUTION 8% | Tier 1 | | | | |
| Dermatological Agents | CICLOPIROX SUS 0.77% | CICLOPIROX OLAMINE SUSP 0.77% (BASE EQUIV) | Tier 1 | | | | |
| Dermatological Agents | CLARAVIS CAP 10MG | ISOTRETINOIN CAP 10 MG | Tier 1 | | | | |
| Dermatological Agents | CLARAVIS CAP 20MG | ISOTRETINOIN CAP 20 MG | Tier 1 | | | | |
| Dermatological Agents | CLARAVIS CAP 30MG | ISOTRETINOIN CAP 30 MG | Tier 1 | | | | |
| Dermatological Agents | CLARAVIS CAP 40MG | ISOTRETINOIN CAP 40 MG | Tier 1 | | | | |
| Dermatological Agents | CLEOCIN-T LOT 1% | CLINDAMYCIN PHOSPHATE LOTION 1% | Tier 3 | | | | |
| Dermatological Agents | CLIND/BENZ GEL 1.2-3.75 | CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1.2-3.75% | Tier 1 | | | | |
| Dermatological Agents | CLINDACIN AER 1% | CLINDAMYCIN PHOSPHATE FOAM 1% | Tier 1 | | | | |
| Dermatological Agents | CLINDACIN MIS ETZ 1% | CLINDAMYCIN PHOSPHATE SWAB 1% | Tier 1 | | | | |
| Dermatological Agents | CLINDACIN-P PAD 1% | CLINDAMYCIN PHOSPHATE SWAB 1% | Tier 1 | | | | |
| Dermatological Agents | CLINDAGEL GEL 1% | CLINDAMYCIN PHOSPHATE GEL 1% | Tier 3 | | | | |
| Dermatological Agents | CLINDAM/BENZ GEL 1.2-2.5% | CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1.2-2.5% | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Dermatological Agents | CLINDAMY/BEN GEL 1.2-5% | CLINDAMYCIN PHOSPH-BENZOYL PEROXIDE (REFRIG) GEL 1.2 (1)-5% | Tier 1 | | | | |
| Dermatological Agents | CLINDAMY/BEN GEL 1-5% | CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1-5% | Tier 1 | | | | |
| Dermatological Agents | CLINDAMYCIN AER 1% | CLINDAMYCIN PHOSPHATE FOAM 1% | Tier 1 | | | | |
| Dermatological Agents | CLINDAMYCIN GEL 1% | CLINDAMYCIN PHOSPHATE GEL 1% | Tier 1 | | | | |
| Dermatological Agents | CLINDAMYCIN GEL TRETINOI | CLINDAMYCIN PHOSPHATE-TRETINOIN GEL 1.2-0.025% | Tier 1 | | | | |
| Dermatological Agents | CLINDAMYCIN LOT 1% | CLINDAMYCIN PHOSPHATE LOTION 1% | Tier 1 | | | | |
| Dermatological Agents | CLINDAMYCIN LOT 10MG/ML | CLINDAMYCIN PHOSPHATE LOTION 1% | Tier 1 | | | | |
| Dermatological Agents | CLINDAMYCIN MIS 1% | CLINDAMYCIN PHOSPHATE SWAB 1% | Tier 1 | | | | |
| Dermatological Agents | CLINDAMYCIN SOL 1% | CLINDAMYCIN PHOSPHATE SOLN 1% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL AER 0.05% | CLOBETASOL PROPIONATE EMULSION FOAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL AER 0.05% | CLOBETASOL PROPIONATE FOAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL CRE 0.05% | CLOBETASOL PROPIONATE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL GEL 0.05% | CLOBETASOL PROPIONATE GEL 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL LOT 0.05% | CLOBETASOL PROPIONATE LOTION 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL OIN 0.05% | CLOBETASOL PROPIONATE OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL POW PROPIONA | CLOBETASOL PROPIONATE POWDER | Tier 3 | X | | | |
| Dermatological Agents | CLOBETASOL SHA 0.05% | CLOBETASOL PROPIONATE SHAMPOO 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL SOL 0.05% | CLOBETASOL PROPIONATE SOLN 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL SPR 0.05% | CLOBETASOL PROPIONATE SPRAY 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBETASOL E CRE 0.05% | CLOBETASOL PROPIONATE EMOLLIENT BASE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOBEX LOT 0.05% | CLOBETASOL PROPIONATE LOTION 0.05% | Tier 3 | | | X | |
| Dermatological Agents | CLOBEX SHA 0.05% | CLOBETASOL PROPIONATE SHAMPOO 0.05% | Tier 3 | | | X | |
| Dermatological Agents | CLOBEX SPR 0.05% | CLOBETASOL PROPIONATE SPRAY 0.05% | Tier 3 | | | X | |
| Dermatological Agents | CLOCORTOLONE CRE 0.1% | CLOCORTOLONE PIVALATE CREAM 0.1% | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|----------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | CLODAN SHA 0.05% | CLOBETASOL PROPIONATE SHAMPOO 0.05% | Tier 1 | | | | |
| Dermatological Agents | CLODERM CRE 0.1% | CLOCORTOLONE PIVALATE CREAM 0.1% | Tier 3 | | | X | |
| Dermatological Agents | CLOTRIM/BETA CRE 1-0.05% | CLOTRIMAZOLE W/ BETAMETHASONE CREAM 1-0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOTRIM/BETA CRE DIPROP | CLOTRIMAZOLE W/ BETAMETHASONE CREAM 1-0.05% | Tier 1 | | | | |
| Dermatological Agents | CLOTRIM/BETA LOT DIPROP | CLOTRIMAZOLE W/ BETAMETHASONE LOTION 1-0.05% | Tier 1 | | | | |
| Dermatological Agents | COLLAGENASE POW | COLLAGENASE POWDER | Tier 3 | X | | | |
| Dermatological Agents | CONDYLOX GEL 0.5% | PODOFILOX GEL 0.5% | Tier 3 | | | | |
| Dermatological Agents | CORDRAN CRE 0.025% | FLURANDRENOLIDE CREAM 0.025% | Tier 3 | | | | |
| Dermatological Agents | CORDRAN CRE 0.05% | FLURANDRENOLIDE CREAM 0.05% | Tier 3 | | | | |
| Dermatological Agents | CORDRAN LOT 0.05% | FLURANDRENOLIDE LOTION 0.05% | Tier 3 | | | X | |
| Dermatological Agents | CORDRAN OIN 0.05% | FLURANDRENOLIDE OINT 0.05% | Tier 3 | | | | |
| Dermatological Agents | CORDRAN 80X3 TAP 4MCG/CM | FLURANDRENOLIDE TAPE 4 MCG/SQCM | Tier 3 | | | | |
| Dermatological Agents | CROTAN LOT 10% | CROTAMITON LOTION 10% | Tier 3 | | | | |
| Dermatological Agents | CUTIVATE LOT 0.05% | FLUTICASONE PROPIONATE LOTION 0.05% | Tier 3 | | | | |
| Dermatological Agents | DAPSONE GEL 5% | DAPSONE GEL 5% | Tier 1 | | | | |
| Dermatological Agents | DAPSONE GEL 7.5% | DAPSONE GEL 7.5% | Tier 1 | | | | |
| Dermatological Agents | DERMA-SMOOTH OIL / FS BODY | FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL) | Tier 3 | | | | |
| Dermatological Agents | DERMA-SMOOTH OIL / FS SCLP | FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL) | Tier 3 | | | | |
| Dermatological Agents | DESONIDE CRE 0.05% | DESONIDE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | DESONIDE GEL 0.05% | DESONIDE GEL 0.05% | Tier 1 | | | | |
| Dermatological Agents | DESONIDE LOT 0.05% | DESONIDE LOTION 0.05% | Tier 1 | | | | |
| Dermatological Agents | DESONIDE OIN 0.05% | DESONIDE OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | DESOWEN CRE 0.05% | DESONIDE CREAM 0.05% | Tier 3 | | | | |
| Dermatological Agents | DESOXIMETAS CRE 0.05% | DESOXIMETASONE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | DESOXIMETAS CRE 0.25% | DESOXIMETASONE CREAM 0.25% | Tier 1 | | | | |
| Dermatological Agents | DESOXIMETAS GEL 0.05% | DESOXIMETASONE GEL 0.05% | Tier 1 | | | | |
| Dermatological Agents | DESOXIMETAS OIN 0.05% | DESOXIMETASONE OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | DESOXIMETAS OIN 0.25% | DESOXIMETASONE OINT 0.25% | Tier 1 | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | DESOXIMETASO SPR 0.25% | DESOXIMETASONE SPRAY 0.25% | Tier 1 | | | | |
| Dermatological Agents | DESRX GEL 0.05% | DESONIDE GEL 0.05% | Tier 1 | | | | |
| Dermatological Agents | DICLOFENAC GEL 3% | DICLOFENAC SODIUM (ACTINIC KERATOSES) GEL 3% | Tier 1 | X | | | |
| Dermatological Agents | DIFLORASONE CRE 0.05% | DIFLORASONE DIACETATE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | DIFLORASONE OIN 0.05% | DIFLORASONE DIACETATE OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | DIPROLENE OIN 0.05% | BETAMETHASONE DIPROPIONATE AUGMENTED OINT 0.05% | Tier 3 | | | | |
| Dermatological Agents | DOVONEX CRE 0.005% | CALCIPOTRIENE CREAM 0.005% | Tier 3 | | | X | |
| Dermatological Agents | DOXEPIN HCL CRE 5% | DOXEPIN HCL CREAM 5% | Tier 1 | X | | | |
| Dermatological Agents | DUOBRII LOT | HALOBETASOL PROPIONATE-TAZAROTENE LOTION 0.01-0.045% | Tier 3 | | | X | |
| Dermatological Agents | ECONAZOLE CRE 1% | ECONAZOLE NITRATE CREAM 1% | Tier 1 | | | | |
| Dermatological Agents | ECOZA AER 1% | ECONAZOLE NITRATE FOAM 1% | Tier 3 | | | | |
| Dermatological Agents | EFUDEX CRE 5% | FLUOROURACIL CREAM 5% | Tier 3 | | | | |
| Dermatological Agents | ELIDEL CRE 1% | PIMECROLIMUS CREAM 1% | Tier 3 | | | X | |
| Dermatological Agents | ENSTILAR AER | CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE FOAM 0.005-0.064% | Tier 3 | | | | |
| Dermatological Agents | EPIFOAM AER 1% | PRAMOXINE-HC AEROSOL FOAM 1-1% | Tier 2 | | | | |
| Dermatological Agents | ERY PAD 2% | ERYTHROMYCIN PADS 2% | Tier 1 | | | | |
| Dermatological Agents | ERY/BENZOYL GEL 3-5% | BENZOYL PEROXIDE-ERYTHROMYCIN GEL 5-3% | Tier 1 | | | | |
| Dermatological Agents | ERYGEL GEL 2% | ERYTHROMYCIN GEL 2% | Tier 3 | | | | |
| Dermatological Agents | ERYTHROMYCIN GEL 2% | ERYTHROMYCIN GEL 2% | Tier 1 | | | | |
| Dermatological Agents | ERYTHROMYCIN SOL 2% | ERYTHROMYCIN SOLN 2% | Tier 1 | | | | |
| Dermatological Agents | EUCRISA OIN 2% | CRISABOROLE OINT 2% | Tier 3 | | | X | |
| Dermatological Agents | EVOCLIN AER 1% | CLINDAMYCIN PHOSPHATE FOAM 1% | Tier 3 | | | | |
| Dermatological Agents | EXTINA AER 2% | KETOCONAZOLE FOAM 2% | Tier 3 | | | | |
| Dermatological Agents | FABIOR AER 0.1% | TAZAROTENE (ACNE) FOAM 0.1% | Tier 3 | X | X | | |
| Dermatological Agents | FINACEA AER 15% | AZELAIC ACID FOAM 15% | Tier 2 | | | | |
| Dermatological Agents | FINACEA GEL 15% | AZELAIC ACID GEL 15% | Tier 3 | | | X | |
| Dermatological Agents | FLUOCIN ACET CRE 0.01% | FLUOCINOLONE ACETONIDE CREAM 0.01% | Tier 1 | | | | |
| Dermatological Agents | FLUOCIN ACET CRE 0.025% | FLUOCINOLONE ACETONIDE CREAM 0.025% | Tier 1 | | | | |
| Dermatological Agents | FLUOCIN ACET OIL 0.01% | FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL) | Tier 1 | | | | |
| Dermatological Agents | FLUOCIN ACET OIL 0.01% SC | FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL) | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | FLUOCIN ACET OIL 0.01%BDY | FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL) | Tier 1 | | | | |
| Dermatological Agents | FLUOCIN ACET OIL BODY | FLUOCINOLONE ACETONIDE OIL 0.01% (BODY OIL) | Tier 1 | | | | |
| Dermatological Agents | FLUOCIN ACET OIL SCALP | FLUOCINOLONE ACETONIDE OIL 0.01% (SCALP OIL) | Tier 1 | | | | |
| Dermatological Agents | FLUOCIN ACET OIN 0.025% | FLUOCINOLONE ACETONIDE OINT 0.025% | Tier 1 | | | | |
| Dermatological Agents | FLUOCIN ACET SOL 0.01% | FLUOCINOLONE ACETONIDE SOLN 0.01% | Tier 1 | | | | |
| Dermatological Agents | FLUOCINONIDE CRE 0.05% | FLUOCINONIDE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLUOCINONIDE CRE 0.1% | FLUOCINONIDE CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | FLUOCINONIDE CRE E 0.05% | FLUOCINONIDE EMULSIFIED BASE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLUOCINONIDE GEL 0.05% | FLUOCINONIDE GEL 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLUOCINONIDE OIN 0.05% | FLUOCINONIDE OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLUOCINONIDE SOL 0.05% | FLUOCINONIDE SOLN 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLUOROURACIL CRE 0.5% | FLUOROURACIL CREAM 0.5% | Tier 3 | | | X | |
| Dermatological Agents | FLUOROURACIL CRE 5% | FLUOROURACIL CREAM 5% | Tier 1 | | | | |
| Dermatological Agents | FLUOROURACIL SOL 2% | FLUOROURACIL SOLN 2% | Tier 1 | | | | |
| Dermatological Agents | FLUOROURACIL SOL 5% | FLUOROURACIL SOLN 5% | Tier 1 | | | | |
| Dermatological Agents | FLURANDRENOL CRE 0.05% | FLURANDRENOLIDE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLURANDRENOL LOT 0.05% | FLURANDRENOLIDE LOTION 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLUTICASONE CRE 0.05% | FLUTICASONE PROPIONATE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLUTICASONE LOT 0.05% | FLUTICASONE PROPIONATE LOTION 0.05% | Tier 1 | | | | |
| Dermatological Agents | FLUTICASONE OIN 0.005% | FLUTICASONE PROPIONATE OINT 0.005% | Tier 1 | | | | |
| Dermatological Agents | GENTAMICIN CRE 0.1% | GENTAMICIN SULFATE CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | GENTAMICIN OIN 0.1% | GENTAMICIN SULFATE OINT 0.1% | Tier 1 | | | | |
| Dermatological Agents | HALCINONIDE CRE 0.1% | HALCINONIDE CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | HALOBETASOL AER 0.05% | HALOBETASOL PROPIONATE FOAM 0.05% | Tier 1 | | | X | |
| Dermatological Agents | HALOBETASOL CRE 0.05% | HALOBETASOL PROPIONATE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | HALOBETASOL OIN 0.05% | HALOBETASOL PROPIONATE OINT 0.05% | Tier 1 | | | | |
| Dermatological Agents | HALOG CRE 0.1% | HALCINONIDE CREAM 0.1% | Tier 3 | | | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Dermatological Agents | HALOG OIN 0.1% | HALCINONIDE OINT 0.1% | Tier 3 | | | | |
| Dermatological Agents | HALOG SOL 0.1% | HALCINONIDE SOLN 0.1% | Tier 3 | | | X | |
| Dermatological Agents | HC BUTYRATE CRE 0.1% | HYDROCORTISONE BUTYRATE CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | HC BUTYRATE CRE 0.1% | HYDROCORTISONE BUTYRATE HYDROPHILIC LIPO BASE CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | HC BUTYRATE OIN 0.1% | HYDROCORTISONE BUTYRATE OINT 0.1% | Tier 1 | | | | |
| Dermatological Agents | HC BUTYRATE SOL 0.1% | HYDROCORTISONE BUTYRATE SOLN 0.1% | Tier 1 | | | | |
| Dermatological Agents | HC PRAMOXINE CRE 1-1% | HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 1-1% | Tier 1 | | | | |
| Dermatological Agents | HC PRAMOXINE CRE 2.5-1% | PRAMOXINE-HC CREAM 1-2.5% | Tier 1 | | | | |
| Dermatological Agents | HC PRAMOXINE CRE 2.5-1% | HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL CREAM 2.5-1% | Tier 1 | | | | |
| Dermatological Agents | HC VALERATE CRE 0.2% | HYDROCORTISONE VALERATE CREAM 0.2% | Tier 1 | | | | |
| Dermatological Agents | HC VALERATE OIN 0.2% | HYDROCORTISONE VALERATE OINT 0.2% | Tier 1 | | | | |
| Dermatological Agents | HYDROCORT CRE 2.5% | HYDROCORTISONE CREAM 2.5% | Tier 1 | | | | |
| Dermatological Agents | HYDROCORT LOT 2.5% | HYDROCORTISONE LOTION 2.5% | Tier 1 | | | | |
| Dermatological Agents | HYDROCORT OIN 1% | HYDROCORTISONE OINT 1% | Tier 1 | | | | |
| Dermatological Agents | HYDROCORT OIN 2.5% | HYDROCORTISONE OINT 2.5% | Tier 1 | | | | |
| Dermatological Agents | HYDROCORTISO LOT 0.1% | HYDROCORTISONE BUTYRATE LOTION 0.1% | Tier 1 | | | X | |
| Dermatological Agents | IMIQUIMOD CRE 3.75% | IMIQUIMOD CREAM 3.75% | Tier 1 | | | X | |
| Dermatological Agents | IMIQUIMOD CRE 3.75%PMP | IMIQUIMOD CREAM 3.75% | Tier 1 | | | X | |
| Dermatological Agents | IMIQUIMOD CRE 5% | IMIQUIMOD CREAM 5% | Tier 1 | | | | |
| Dermatological Agents | IMPEKLO LOT 0.05% | CLOBETASOL PROPIONATE LOTION 0.15 MG/ACT (0.05%) | Tier 3 | | | X | |
| Dermatological Agents | IMPOYZ CRE 0.025% | CLOBETASOL PROPIONATE CREAM 0.025% | Tier 3 | | | | |
| Dermatological Agents | ISOTRETINOIN CAP 10MG | ISOTRETINOIN CAP 10 MG | Tier 1 | | | | |
| Dermatological Agents | ISOTRETINOIN CAP 10MG | ISOTRETINOIN CAP 10 MG | Tier 1 | | | X | |
| Dermatological Agents | ISOTRETINOIN CAP 20MG | ISOTRETINOIN CAP 20 MG | Tier 1 | | | | |
| Dermatological Agents | ISOTRETINOIN CAP 20MG | ISOTRETINOIN CAP 20 MG | Tier 1 | | | X | |
| Dermatological Agents | ISOTRETINOIN CAP 25MG | ISOTRETINOIN CAP 25 MG | Tier 1 | | | X | |
| Dermatological Agents | ISOTRETINOIN CAP 30MG | ISOTRETINOIN CAP 30 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|-----------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | ISOTRETINOIN CAP 30MG | ISOTRETINOIN CAP 30 MG | Tier 1 | | | X | |
| Dermatological Agents | ISOTRETINOIN CAP 35MG | ISOTRETINOIN CAP 35 MG | Tier 1 | | | X | |
| Dermatological Agents | ISOTRETINOIN CAP 40MG | ISOTRETINOIN CAP 40 MG | Tier 1 | | | | |
| Dermatological Agents | ISOTRETINOIN CAP 40MG | ISOTRETINOIN CAP 40 MG | Tier 1 | | | X | |
| Dermatological Agents | IVERMECTIN CRE 1% | IVERMECTIN CREAM 1% | Tier 1 | | | X | |
| Dermatological Agents | IVERMECTIN LOT 0.5% | IVERMECTIN LOTION 0.5% | Tier 1 | | | | |
| Dermatological Agents | JUBLIA SOL 10% | EFINACONAZOLE SOLN 10% | Tier 3 | | X | | |
| Dermatological Agents | KENALOG AER SPRAY | TRIAMCINOLONE ACETONIDE AEROSOL SOLN 0.147 MG/GM | Tier 3 | | | X | |
| Dermatological Agents | KERYDIN SOL 5% | TAVABOROLE SOLN 5% | Tier 3 | | X | X | |
| Dermatological Agents | KETOCONAZOLE AER 2% | KETOCONAZOLE FOAM 2% | Tier 1 | | | | |
| Dermatological Agents | KETOCONAZOLE CRE 2% | KETOCONAZOLE CREAM 2% | Tier 1 | | | | |
| Dermatological Agents | KETOCONAZOLE SHA 2% | KETOCONAZOLE SHAMPOO 2% | Tier 1 | | | | |
| Dermatological Agents | KETODAN AER 2% | KETOCONAZOLE FOAM 2% | Tier 1 | | | | |
| Dermatological Agents | KLARON LOT 10% | SULFACETAMIDE SODIUM LOTION 10% (ACNE) | Tier 3 | | | | |
| Dermatological Agents | KLAYESTA POW 100000 | NYSTATIN TOPICAL POWDER 100000 UNIT/GM | Tier 1 | | | | |
| Dermatological Agents | LEVULAN KERA SOL 20% | AMINOLEVULINIC ACID HCL FOR SOLN 20% (STICK APPLICATOR) | Tier 3 | | | | |
| Dermatological Agents | LEXETTE AER 0.05% | HALOBETASOL PROPIONATE FOAM 0.05% | Tier 3 | | | X | |
| Dermatological Agents | LOCOID LOT 0.1% | HYDROCORTISONE BUTYRATE LOTION 0.1% | Tier 3 | | | X | |
| Dermatological Agents | LOCOID LIPO CRE 0.1% | HYDROCORTISONE BUTYRATE HYDROPHILIC LIPO BASE CREAM 0.1% | Tier 3 | | | | |
| Dermatological Agents | LOPROX CRE 0.77% | CICLOPIROX OLAMINE CREAM 0.77% (BASE EQUIV) | Tier 3 | | | X | |
| Dermatological Agents | LOPROX SHA 1% | CICLOPIROX SHAMPOO 1% | Tier 3 | | | X | |
| Dermatological Agents | LOPROX SUS 0.77% | CICLOPIROX OLAMINE SUSP 0.77% (BASE EQUIV) | Tier 3 | | | X | |
| Dermatological Agents | LUXIQ AER 0.12% | BETAMETHASONE VALERATE AEROSOL FOAM 0.12% | Tier 3 | | | X | |
| Dermatological Agents | MAFENIDE ACE PAK 5% | MAFENIDE ACETATE PACKET FOR TOPICAL SOLN 5% (50 GM) | Tier 1 | | | | |
| Dermatological Agents | MALATHION LOT 0.5% | MALATHION LOTION 0.5% | Tier 1 | | | | |
| Dermatological Agents | MENTAX CRE 1% | BUTENAFINE HCL CREAM 1% | Tier 3 | | | | |
| Dermatological Agents | METHOXSALEN CAP 10MG | METHOXSALEN RAPID CAP 10 MG | Tier 1 | | | | |
| Dermatological Agents | MIRVASO GEL 0.33% | BRIMONIDINE TARTRATE GEL 0.33% (BASE EQUIVALENT) | Tier 2 | X | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Dermatological Agents | MOMETASONE CRE 0.1% | MOMETASONE FUROATE CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | MOMETASONE OIN 0.1% | MOMETASONE FUROATE OINT 0.1% | Tier 1 | | | | |
| Dermatological Agents | MOMETASONE SOL 0.1% | MOMETASONE FUROATE SOLUTION 0.1% (LOTION) | Tier 1 | | | | |
| Dermatological Agents | MUPIROCIN CRE 2% | MUPIROCIN CALCIUM CREAM 2% | Tier 1 | | | | |
| Dermatological Agents | MUPIROCIN OIN 2% | MUPIROCIN OINT 2% | Tier 1 | | | | |
| Dermatological Agents | MYORISAN CAP 10MG | ISOTRETINOIN CAP 10 MG | Tier 1 | | | | |
| Dermatological Agents | MYORISAN CAP 20MG | ISOTRETINOIN CAP 20 MG | Tier 1 | | | | |
| Dermatological Agents | MYORISAN CAP 30MG | ISOTRETINOIN CAP 30 MG | Tier 1 | | | | |
| Dermatological Agents | MYORISAN CAP 40MG | ISOTRETINOIN CAP 40 MG | Tier 1 | | | | |
| Dermatological Agents | NATROBA SUS 0.9% | SPINOSAD SUSP 0.9% | Tier 3 | | | X | |
| Dermatological Agents | NEO-SYNALAR CRE | NEOMYCIN SULFATE-FLUOCINOLONE ACETONIDE CREAM 0.5-0.025% | Tier 3 | | | | |
| Dermatological Agents | NEUAC GEL 1.2-5% | CLINDAMYCIN PHOSPH-BENZOYL PEROXIDE (REFRIG) GEL 1.2 (1)-5% | Tier 1 | | | | |
| Dermatological Agents | NOLIX LOT 0.05% | FLURANDRENOLIDE LOTION 0.05% | Tier 1 | | | | |
| Dermatological Agents | NUJO SOL 0.1% | TACROLIMUS (TOPICAL) SOLN 0.1% | Tier 3 | | | | |
| Dermatological Agents | NYAMYC POW 100000 | NYSTATIN TOPICAL POWDER 100000 UNIT/GM | Tier 1 | | | | |
| Dermatological Agents | NYSTAT/TRIAM CRE | NYSTATIN-TRIAMCINOLONE CREAM 100000-0.1 UNIT/GM-% | Tier 1 | | | | |
| Dermatological Agents | NYSTAT/TRIAM OIN | NYSTATIN-TRIAMCINOLONE OINT 100000-0.1 UNIT/GM-% | Tier 1 | | | | |
| Dermatological Agents | NYSTATIN CRE 100000 | NYSTATIN CREAM 100000 UNIT/GM | Tier 1 | | | | |
| Dermatological Agents | NYSTATIN OIN 100000 | NYSTATIN OINT 100000 UNIT/GM | Tier 1 | | | | |
| Dermatological Agents | NYSTATIN OIN 100000U | NYSTATIN OINT 100000 UNIT/GM | Tier 1 | | | | |
| Dermatological Agents | NYSTATIN POW 100000 | NYSTATIN TOPICAL POWDER 100000 UNIT/GM | Tier 1 | | | | |
| Dermatological Agents | NYSTOP POW 100000 | NYSTATIN TOPICAL POWDER 100000 UNIT/GM | Tier 1 | | | | |
| Dermatological Agents | OLUX AER 0.05% | CLOBETASOL PROPIONATE FOAM 0.05% | Tier 3 | | | X | |
| Dermatological Agents | OLUX-E AER 0.05% | CLOBETASOL PROPIONATE EMULSION FOAM 0.05% | Tier 3 | | | X | |
| Dermatological Agents | ONEXTON GEL 1.2-3.75 | CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE GEL 1.2-3.75% | Tier 3 | | | | |
| Dermatological Agents | OVIDE LOT 0.5% | MALATHION LOTION 0.5% | Tier 3 | | | | |
| Dermatological Agents | OXICONAZOLE CRE NITRATE | OXICONAZOLE NITRATE CREAM 1% | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|------------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | OXISTAT CRE 1% | OXICONAZOLE NITRATE CREAM 1% | Tier 3 | | | | |
| Dermatological Agents | PANDEL CRE 0.1% | HYDROCORTISONE PROBUTATE CREAM 0.1% | Tier 3 | | | | |
| Dermatological Agents | PERMETHRIN CRE 5% | PERMETHRIN CREAM 5% | Tier 1 | | | | |
| Dermatological Agents | PIMECROLIMUS CRE 1% | PIMECROLIMUS CREAM 1% | Tier 1 | | | | |
| Dermatological Agents | PODOFILOX GEL 0.5% | PODOFILOX GEL 0.5% | Tier 1 | | | | |
| Dermatological Agents | PODOFILOX SOL 0.5% | PODOFILOX SOLN 0.5% | Tier 1 | | | | |
| Dermatological Agents | PRAMOSONE CRE 1-1% | PRAMOXINE-HC CREAM 1-1% | Tier 2 | | | | |
| Dermatological Agents | PRAMOSONE CRE 1-2.5% | PRAMOXINE-HC CREAM 1-2.5% | Tier 3 | | | | |
| Dermatological Agents | PRAMOSONE LOT 1% | PRAMOXINE-HC LOTION 1-1% | Tier 2 | | | | |
| Dermatological Agents | PRAMOSONE LOT 2.5% | PRAMOXINE-HC LOTION 1-2.5% | Tier 2 | | | | |
| Dermatological Agents | PRAMOSONE OIN 1% | PRAMOXINE-HC OINT 1-1% | Tier 2 | | | | |
| Dermatological Agents | PRAMOSONE OIN 2.5% | PRAMOXINE-HC OINT 1-2.5% | Tier 3 | | | | |
| Dermatological Agents | PREDNICARBAT OIN 0.1% | PREDNICARBATE OINT 0.1% | Tier 1 | | | | |
| Dermatological Agents | PROCORT CRE | HYDROCORTISONE ACET W/ PRAMOXINE PERIANAL CREAM 1.85-1.15% | Tier 3 | | | | |
| Dermatological Agents | PROCTOFOAM AER HC 1% | HYDROCORTISONE ACETATE W/ PRAMOXINE PERIANAL FOAM 1-1% | Tier 2 | | | | |
| Dermatological Agents | PRUDOXIN CRE 5% | DOXEPIN HCL CREAM 5% | Tier 3 | X | | X | |
| Dermatological Agents | REGANEX GEL 0.01% | BECAPLERMIN GEL 0.01% | Tier 2 | X | | | |
| Dermatological Agents | RETIN-A MICR GEL 0.04% | TRETINOIN MICROSPHERE GEL 0.04% | Tier 3 | X | | X | |
| Dermatological Agents | RETIN-A MICR GEL 0.04%PMP | TRETINOIN MICROSPHERE GEL 0.04% | Tier 3 | X | | X | |
| Dermatological Agents | RETIN-A MICR GEL 0.06% | TRETINOIN MICROSPHERE GEL 0.06% | Tier 3 | X | | | |
| Dermatological Agents | RETIN-A MICR GEL 0.08% | TRETINOIN MICROSPHERE GEL 0.08% | Tier 3 | X | | | |
| Dermatological Agents | RETIN-A MICR GEL 0.1% | TRETINOIN MICROSPHERE GEL 0.1% | Tier 3 | X | | X | |
| Dermatological Agents | RETIN-A MICR GEL 0.1%PUMP | TRETINOIN MICROSPHERE GEL 0.1% | Tier 3 | X | | X | |
| Dermatological Agents | RETINOIC ACD POW | TRETINOIN POWDER | Tier 3 | X | | | |
| Dermatological Agents | RETINOIC ACD POW ALL TRAN | TRETINOIN POWDER | Tier 3 | X | | | |
| Dermatological Agents | RHOFADE CRE 1% | OXYMETAZOLINE HCL CREAM 1% | Tier 3 | X | | | |
| Dermatological Agents | SANTYL OIN 250/GM | COLLAGENASE OINT 250 UNIT/ GM | Tier 3 | | | | |
| Dermatological Agents | SELENIUM SUL LOT 2.5% | SELENIUM SULFIDE LOTION 2.5% | Tier 1 | | | | |
| Dermatological Agents | SERNIVO SPR | BETAMETHASONE DIPROPIONATE SPRAY EMULSION 0.05% (BASE EQUIV) | Tier 3 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | SERNIVO SPR 0.05% | BETAMETHASONE DIPROPIONATE SPRAY EMULSION 0.05% (BASE EQUIV) | Tier 3 | | | | |
| Dermatological Agents | SILVADENE CRE 1% | SILVER SULFADIAZINE CREAM 1% | Tier 3 | | | | |
| Dermatological Agents | SILVER SULFA CRE 1% | SILVER SULFADIAZINE CREAM 1% | Tier 1 | | | | |
| Dermatological Agents | SOOLANTRA CRE 1% | IVERMECTIN CREAM 1% | Tier 1 | | | | |
| Dermatological Agents | SORILUX AER 0.005% | CALCIPOTRIENE FOAM 0.005% | Tier 3 | | | X | |
| Dermatological Agents | SPINOSAD SUS 0.9% | SPINOSAD SUSP 0.9% | Tier 1 | | | | |
| Dermatological Agents | SSD CRE 1% | SILVER SULFADIAZINE CREAM 1% | Tier 1 | | | | |
| Dermatological Agents | SULFACETAMID LOT 10% | SULFACETAMIDE SODIUM LOTION 10% (ACNE) | Tier 1 | | | | |
| Dermatological Agents | SULFAMYLON CRE 85MG/GM | MAFENIDE ACETATE CREAM 85 MG/GM | Tier 3 | | | | |
| Dermatological Agents | SULFAMYLON PAK 5% | MAFENIDE ACETATE PACKET FOR TOPICAL SOLN 5% (50 GM) | Tier 3 | | | | |
| Dermatological Agents | SYNALAR CRE 0.025% | FLUOCINOLONE ACETONIDE CREAM 0.025% | Tier 3 | | | | |
| Dermatological Agents | SYNALAR OIN 0.025% | FLUOCINOLONE ACETONIDE OINT 0.025% | Tier 3 | | | | |
| Dermatological Agents | SYNALAR SOL 0.01% | FLUOCINOLONE ACETONIDE SOLN 0.01% | Tier 3 | | | | |
| Dermatological Agents | TACLONEX OIN | CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE OINT 0.005-0.064% | Tier 3 | | | X | |
| Dermatological Agents | TACLONEX SUS | CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE SUSP 0.005-0.064% | Tier 1 | | | | |
| Dermatological Agents | TACROLIMUS OIN 0.03% | TACROLIMUS OINT 0.03% | Tier 1 | | | | |
| Dermatological Agents | TACROLIMUS OIN 0.1% | TACROLIMUS OINT 0.1% | Tier 1 | | | | |
| Dermatological Agents | TAVABOROLE SOL 5% | TAVABOROLE SOLN 5% | Tier 1 | | X | | |
| Dermatological Agents | TAZAROTENE AER 0.1% | TAZAROTENE (ACNE) FOAM 0.1% | Tier 3 | X | X | | |
| Dermatological Agents | TAZAROTENE CRE 0.1% | TAZAROTENE CREAM 0.1% | Tier 1 | X | | | |
| Dermatological Agents | TAZAROTENE GEL 0.05% | TAZAROTENE GEL 0.05% | Tier 1 | X | | | |
| Dermatological Agents | TAZAROTENE GEL 0.1% | TAZAROTENE GEL 0.1% | Tier 1 | X | | | |
| Dermatological Agents | TAZORAC CRE 0.05% | TAZAROTENE CREAM 0.05% | Tier 3 | X | | | |
| Dermatological Agents | TAZORAC CRE 0.1% | TAZAROTENE CREAM 0.1% | Tier 3 | X | | | |
| Dermatological Agents | TAZORAC GEL 0.05% | TAZAROTENE GEL 0.05% | Tier 3 | X | | | |
| Dermatological Agents | TAZORAC GEL 0.1% | TAZAROTENE GEL 0.1% | Tier 3 | X | | | |
| Dermatological Agents | TEMOVATE CRE 0.05% | CLOBETASOL PROPIONATE CREAM 0.05% | Tier 3 | | | | |
| Dermatological Agents | TEMOVATE OIN 0.05% | CLOBETASOL PROPIONATE OINT 0.05% | Tier 3 | | | | |
| Dermatological Agents | TEXACORT SOL 2.5% | HYDROCORTISONE SOLN 2.5% | Tier 2 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents | TISSEEL KIT 10ML | *FIBRIN SEALANT COMPONENT KIT 10 ML*** | Tier 3 | | | | |
| Dermatological Agents | TISSEEL KIT 2ML | *FIBRIN SEALANT COMPONENT KIT 2 ML*** | Tier 3 | | | | |
| Dermatological Agents | TISSEEL KIT 4ML | *FIBRIN SEALANT COMPONENT KIT 4 ML*** | Tier 3 | | | | |
| Dermatological Agents | TOLAK CRE 4% | FLUOROURACIL CREAM 4% | Tier 3 | | | | |
| Dermatological Agents | TOPICORT CRE 0.05% | DESOXIMETASONE CREAM 0.05% | Tier 3 | | | | |
| Dermatological Agents | TOPICORT CRE 0.25% | DESOXIMETASONE CREAM 0.25% | Tier 3 | | | | |
| Dermatological Agents | TOPICORT GEL 0.05% | DESOXIMETASONE GEL 0.05% | Tier 3 | | | | |
| Dermatological Agents | TOPICORT OIN 0.05% | DESOXIMETASONE OINT 0.05% | Tier 3 | | | | |
| Dermatological Agents | TOPICORT OIN 0.25% | DESOXIMETASONE OINT 0.25% | Tier 3 | | | | |
| Dermatological Agents | TOPICORT SPR 0.25% | DESOXIMETASONE SPRAY 0.25% | Tier 3 | | | X | |
| Dermatological Agents | TOVET AER 0.05% | CLOBETASOL PROPIONATE EMULSION FOAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | TRETINOIN CRE 0.025% | TRETINOIN CREAM 0.025% | Tier 1 | | | | |
| Dermatological Agents | TRETINOIN CRE 0.05% | TRETINOIN CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | TRETINOIN CRE 0.1% | TRETINOIN CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | TRETINOIN GEL 0.04% | TRETINOIN MICROSPHERE GEL 0.04% | Tier 1 | X | | | |
| Dermatological Agents | TRETINOIN GEL 0.04%PMP | TRETINOIN MICROSPHERE GEL 0.04% | Tier 1 | X | | | |
| Dermatological Agents | TRETINOIN GEL 0.05% | TRETINOIN GEL 0.05% | Tier 1 | X | | | |
| Dermatological Agents | TRETINOIN GEL 0.08% | TRETINOIN MICROSPHERE GEL 0.08% | Tier 1 | X | | | |
| Dermatological Agents | TRETINOIN GEL 0.1% | TRETINOIN MICROSPHERE GEL 0.1% | Tier 1 | X | | | |
| Dermatological Agents | TRETINOIN GEL 0.1%PUMP | TRETINOIN MICROSPHERE GEL 0.1% | Tier 1 | X | | | |
| Dermatological Agents | TRETINOIN POW | TRETINOIN POWDER | Tier 3 | X | | | |
| Dermatological Agents | TRIAMCINOLON AER SPRAY | TRIAMCINOLONE ACETONIDE AEROSOL SOLN 0.147 MG/GM | Tier 1 | | | | |
| Dermatological Agents | TRIAMCINOLON CRE 0.025% | TRIAMCINOLONE ACETONIDE CREAM 0.025% | Tier 1 | | | | |
| Dermatological Agents | TRIAMCINOLON CRE 0.1% | TRIAMCINOLONE ACETONIDE CREAM 0.1% | Tier 1 | | | | |
| Dermatological Agents | TRIAMCINOLON CRE 0.5% | TRIAMCINOLONE ACETONIDE CREAM 0.5% | Tier 1 | | | | |
| Dermatological Agents | TRIAMCINOLON LOT 0.025% | TRIAMCINOLONE ACETONIDE LOTION 0.025% | Tier 1 | | | | |
| Dermatological Agents | TRIAMCINOLON LOT 0.1% | TRIAMCINOLONE ACETONIDE LOTION 0.1% | Tier 1 | | | | |
| Dermatological Agents | TRIAMCINOLON OIN 0.025% | TRIAMCINOLONE ACETONIDE OINT 0.025% | Tier 1 | | | | |
| Dermatological Agents | TRIAMCINOLON OIN 0.05% | TRIAMCINOLONE ACETONIDE OINT 0.05% | Tier 1 | | | X | |
| Dermatological Agents | TRIAMCINOLON OIN 0.1% | TRIAMCINOLONE ACETONIDE OINT 0.1% | Tier 1 | | | | |

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|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Dermatological Agents | TRIAMCINOLON OIN 0.5% | TRIAMCINOLONE ACETONIDE OINT 0.5% | Tier 1 | | | | |
| Dermatological Agents | TRIAMCINOLON POW ACETONID | TRIAMCINOLONE ACETONIDE POWDER | Tier 3 | X | | | |
| Dermatological Agents | TRIANEX OIN 0.05% | TRIAMCINOLONE ACETONIDE OINT 0.05% | Tier 3 | | | X | |
| Dermatological Agents | TRIDERM CRE 0.5% | TRIAMCINOLONE ACETONIDE CREAM 0.5% | Tier 1 | | | | |
| Dermatological Agents | TRIDESILON CRE 0.05% | DESONIDE CREAM 0.05% | Tier 1 | | | | |
| Dermatological Agents | TRITOCIN OIN 0.05% | TRIAMCINOLONE ACETONIDE OINT 0.05% | Tier 1 | | | X | |
| Dermatological Agents | TWYNEO CRE 0.1-3% | TRETINOIN-BENZOYL PEROXIDE CREAM 0.1-3% | Tier 3 | | | | |
| Dermatological Agents | ULTRAVATE LOT 0.05% | HALOBETASOL PROPIONATE LOTION 0.05% | Tier 3 | | | X | |
| Dermatological Agents | VANOS CRE 0.1% | FLUOCINONIDE CREAM 0.1% | Tier 3 | | | X | |
| Dermatological Agents | VECTICAL OIN 3MCG/GM | CALCITRIOL OINT 3 MCG/GM | Tier 3 | | | X | |
| Dermatological Agents | VELTIN GEL | CLINDAMYCIN PHOSPHATE-TRETINOIN GEL 1.2-0.025% | Tier 3 | | | | |
| Dermatological Agents | VERDESO AER 0.05% | DESONIDE FOAM 0.05% | Tier 3 | | | | |
| Dermatological Agents | VEREGEN OIN 15% | SINECATECHINS OINT 15% | Tier 3 | | | X | |
| Dermatological Agents | WYNZORA CRE | CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE CREAM 0.005-0.064% | Tier 3 | | | X | |
| Dermatological Agents | XEPI CRE 1% | OZENOXACIN CREAM 1% | Tier 3 | | | | |
| Dermatological Agents | XERESE CRE 5-1% | ACYCLOVIR-HYDROCORTISONE CREAM 5-1% | Tier 3 | | | X | |
| Dermatological Agents | XOLEGEL GEL 2% | KETOCONAZOLE GEL 2% | Tier 3 | | | | |
| Dermatological Agents | ZENATANE CAP 10MG | ISOTRETINOIN CAP 10 MG | Tier 1 | | | | |
| Dermatological Agents | ZENATANE CAP 20MG | ISOTRETINOIN CAP 20 MG | Tier 1 | | | | |
| Dermatological Agents | ZENATANE CAP 30MG | ISOTRETINOIN CAP 30 MG | Tier 1 | | | | |
| Dermatological Agents | ZENATANE CAP 40MG | ISOTRETINOIN CAP 40 MG | Tier 1 | | | | |
| Dermatological Agents | ZIANA GEL | CLINDAMYCIN PHOSPHATE-TRETINOIN GEL 1.2-0.025% | Tier 3 | | | X | |
| Dermatological Agents | ZONALON CRE 5% | DOXEPIN HCL CREAM 5% | Tier 3 | X | | X | |
| Dermatological Agents | ZYCLARA CRE 3.75% | IMIQUIMOD CREAM 3.75% | Tier 3 | | | X | |
| Dermatological Agents | ZYCLARA PUMP CRE 2.5% | IMIQUIMOD CREAM 2.5% | Tier 3 | | | X | |
| Dermatological Agents | ZYCLARA PUMP CRE 3.75% | IMIQUIMOD CREAM 3.75% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | AVAR CLEANSE LIQ 10-5% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | AVAR LS LIQ 10-2% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-2% | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents - Drugs to Treat Skin Conditions | AVAR-E EMOLL CRE 10-5% | SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | AVAR-E GREEN CRE 10-5% | SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | AVAR-E LS CRE 10-2% | SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-2% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | B & C OIN | *BALSAM PERU-CASTOR OIL OINT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | BALSAM PERU OIN CASTOR | *BALSAM PERU-CASTOR OIL OINT*** | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | BENZOIN TIN NF | BENZOIN TINCTURE | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | BENZOIN CMPD TIN | BENZOIN COMPOUND TINCTURE | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | BORIC ACID GRA | BORIC ACID GRANULES | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | BP 10-1 EMU | SULFACETAMIDE SODIUM W/ SULFUR EMULSION 10-1% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | BP CLEANSING EMU 10-4% | SULFACETAMIDE SODIUM-SULFUR IN UREA EMULSION 10-4% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | CABTREO GEL | ADAPALENE-BENZOYL PEROXIDE-CLINDAMYCIN GEL 0.15-3.1-1.2% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | CEROVEL LOT 40% | UREA LOTION 40% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | CIBINQO TAB 100MG | ABROCITINIB TAB 100 MG | Tier 2 | X | X | | X |
| Dermatological Agents - Drugs to Treat Skin Conditions | CIBINQO TAB 200MG | ABROCITINIB TAB 200 MG | Tier 2 | X | X | | X |
| Dermatological Agents - Drugs to Treat Skin Conditions | CIBINQO TAB 50MG | ABROCITINIB TAB 50 MG | Tier 2 | X | X | | X |
| Dermatological Agents - Drugs to Treat Skin Conditions | CLINDACIN KIT ETZ 1% | *CLINDAMYCIN PHOSPHATE SWAB 1% & CLEANSER KIT*** | Tier 3 | | | | |

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|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents - Drugs to Treat Skin Conditions | CLINDACIN KIT PAC 1% | *CLINDAMYCIN PHOSPHATE SWAB 1% & CLEANSER KIT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | CLINOIN CRE | *CLINDAMYCIN-TRETINOIN-CHOLESTY CRM 1.25-0.025-1% (CMP KIT)* | Tier 3 | X | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | CLOBETAVIX KIT 0.05% | *CLOBETASOL PROPIONATE OINT 0.05%-DRESSING KIT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | CLODAN KIT 0.05% | *CLOBETASOL PROPIONATE SHAMPOO 0.05% & CLEANSER KIT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | COAL TAR SOL 20% | COAL TAR SOLN 20% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | CORTANE-B LOT | HYDROCORTISONE-PRAMOXINE-CHLOROXYLENOL LOT 10-10-1MG/ML | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | CVS GLYCERIN LIQ PURE | GLYCERIN TOPICAL LIQUID | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | ESKATA SOL 40% | HYDROGEN PEROXIDE SOLN 40% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | FORMALDEHYDE SOL 10% | FORMALDEHYDE SOLUTION 10% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | FORMALDEHYDE SOL 37% | FORMALDEHYDE SOLUTION 37% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | GORDOFILM SOL | SALICYLIC & LACTIC ACIDS SOLN 16.7-16.7% | Tier 2 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | HC-LIDOCAINE CRE 1-1% | LIDOCAINE-HYDROCORTISONE ACETATE CREAM 1-1% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | HYDRO 40 AER FOAM | UREA FOAM 40% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | INOVA KIT 4% | *BENZOYL PEROXIDE PAD 4% & VITAMIN E TOPICAL 5% KIT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | INOVA KIT 8% | *BENZOYL PEROXIDE PAD 8% & VITAMIN E TOPICAL 5% KIT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | INOVA 4/1 KIT ACNE CON | *BENZOYL PEROX PAD 4% & SALICYLIC AC PAD 1% & VIT E 5% KIT* | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Dermatological Agents - Drugs to Treat Skin Conditions | INOVA 8/2 KIT ACNE CON | *BENZOYL PEROX PAD 8% & SALICYLIC AC PAD 2% & VIT E 5% KIT* | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | KATARVIA EMU 4-0.025% | HYDROQUINONE-TRETINOIN EMULSION 4-0.025% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | KEVARTIA EMU 6-0.05% | HYDROQUINONE-TRETINOIN EMULSION 6-0.05% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | KUTAR EMU 8-0.025% | HYDROQUINONE-TRETINOIN EMULSION 8-0.025% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | KUTARVIA EMU 8-0.025% | HYDROQUINONE-TRETINOIN EMULSION 8-0.025% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | LUXAMEND CRE | *WOUND DRESSINGS - CREAM*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | METHYL SALIC LIQ | *METHYL SALICYLATE LIQUID** | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | NEUAC KIT 1.2-5% | *CLINDAMYCIN-BENZOYL PEROX GEL 1.2-5% & MOISTURIZER CR KIT** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | NUCARARXPAK KIT | *CLINDAMYCIN 1% GEL- BENZOYL PEROX 2.5% GEL- MOISTURIZER KIT* | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | NUCORT LOT 2% | HYDROCORTISONE ACETATE LOTION 2% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | OPZELURA CRE 1.5% | RUXOLITINIB PHOSPHATE CREAM 1.5% | Tier 3 | X | X | | X |
| Dermatological Agents - Drugs to Treat Skin Conditions | PLEXION CRE 9.8-4.8% | SULFACETAMIDE SODIUM W/ SULFUR CREAM 9.8-4.8% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | PLEXION LIQ 9.8-4.8% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9.8-4.8% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | PLEXION LOT 9.8-4.8% | SULFACETAMIDE SODIUM W/ SULFUR LOTION 9.8-4.8% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | PLEXION CLTH PAD 9.8-4.8% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSING CLOTH 9.8-4.8% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | PROMISEB CRE | *ANTISEBORRHEIC PRODUCTS MISC - CREAM*** | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents - Drugs to Treat Skin Conditions | PRONAL GEL 40-10% | UREA-LACTIC ACID GEL 40-10% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | PYROGALL ACD OIN | PYROGALLOL-CHLOROBUTANOL OINT 25-2% | Tier 2 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | ROSDAN KIT 0.75% | METRONIDAZOLE CREAM 0.75% W/ CLEANSER KIT | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | ROSDAN KIT 0.75% | METRONIDAZOLE GEL 0.75% W/ CLEANSER KIT | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SALVAX DUO KIT PLUS | SALICYLIC ACID FOAM 6% & UREA IN LACTIC ACID FOAM 35% KIT | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SCALACORT DK KIT | *HC LOT 2% & SAL ACID-SULFUR SHAMPOO 2-2% & SHAMPOO KIT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF CRE 10-2% | SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-2% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF CRE 10-5% | SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF CRE 9.8-4.8% | SULFACETAMIDE SODIUM W/ SULFUR CREAM 9.8-4.8% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF EMU 10-5% | SULFACETAMIDE SODIUM-SULFUR IN UREA EMULSION 10-5% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF LIQ 10-2% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-2% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF LIQ 10-5% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF LIQ 9.8-4.8% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9.8-4.8% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF LIQ 9-4% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF LIQ 9-4.5% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4.5% | Tier 1 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF LIQ WASH | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4% | Tier 1 | | | | |

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|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF LOT 10-5% | SULFACETAMIDE SODIUM W/ SULFUR LOTION 10-5% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF LOT 9.8-4.8% | SULFACETAMIDE SODIUM W/ SULFUR LOTION 9.8-4.8% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF PAD 10-4% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSING PAD 10-4% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF SUS 10-5% | SULFACETAMIDE SODIUM W/ SULFUR SUSP 10-5% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SUL/SULF SUS 8-4% | SULFACETAMIDE SODIUM W/ SULFUR SUSP 8-4% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SOD SULF/SUL LIQ 10-5% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 10-5% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SODIUM SULFA LIQ 10% WASH | SULFACETAMIDE SODIUM IN BAKUCHIOL VEHICLE WASH 10% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SSS CRE 10%-5% | SULFACETAMIDE SODIUM W/ SULFUR CREAM 10-5% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SSS 10-5 AER 10-5% | SULFACETAMIDE SODIUM W/ SULFUR FOAM 10-5% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SULFAC SULFR PAD 9.8-4.8% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSING CLOTH 9.8-4.8% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SULFACLEANSE SUS 8-4% | SULFACETAMIDE SODIUM W/ SULFUR SUSP 8-4% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SULFAMEZ EMU 10-1% | SULFACETAMIDE SODIUM W/ SULFUR EMULSION 10-1% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SUMADAN KIT | *SULFACETAMIDE SOD-SULFUR WASH 9-4.5% & SKIN CLEANSER KIT*** | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SUMADAN WASH LIQ 9-4.5% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSER 9-4.5% | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SUMADAN XLT KIT 9-4.5% | *SULFACETAMIDE SOD-SULFUR WASH 9-4.5% & SUNSCREEN KIT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SUMAXIN PAD 10-4% | SULFACETAMIDE SODIUM W/ SULFUR CLEANSING PAD 10-4% | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|----------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents - Drugs to Treat Skin Conditions | SUMAXIN CP KIT | *SULFACETAMIDE SOD-SULFUR PAD 10-4% & SKIN CLEANSER KIT*** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SYNALAR KIT 0.025% | *FLUOCINOLONE CREAM 0.025%-EMOLLIENT CREAM KIT*** | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SYNALAR KIT 0.025% | *FLUOCINOLONE OINT 0.025%-EMOLLIENT CREAM KIT*** | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | SYNALAR TS KIT 0.01% | *FLUOCINOLONE ACETONIDE SOLN 0.01% & CLEANSER KIT*** | Tier 3 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UMECTA MOUSS AER 40% | UREA FOAM 40% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | URAMAXIN GEL 45% | UREA GEL 45% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREA CRE 20% | UREA CREAM 20% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREA CRE 40% | UREA CREAM 40% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREA CRE 41% | UREA CREAM 41% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREA CRE 41% | UREA CREAM 41% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREA CRE 45% | UREA CREAM 45% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREA CRE 47% | UREA CREAM 47% | Tier 1 | | | X | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREA LOT 40% | UREA LOTION 40% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREA NAIL GEL 45% | UREA GEL 45% | Tier 1 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | UREMEZ-40 CRE 40% | UREA CREAM 40% | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | VENELEX OIN | *BALSAM PERU-CASTOR OIL OINT*** | Tier 3 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Dermatological Agents - Drugs to Treat Skin Conditions | VIT C BRIGHT DRO 10% | *EMOLLIENT - LIQUID** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | VIT C BRIGHT DRO 15% | *EMOLLIENT - LIQUID** | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | ZACARE KIT KIT 4% | BENZOYL PEROXIDE LOTION 4% & HYALURONATE SODIUM GEL 0.2% KIT | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | ZACARE KIT KIT 8% | BENZOYL PEROXIDE LOTION 8% & HYALURONATE SODIUM GEL 0.2% KIT | Tier 3 | | | | |
| Dermatological Agents - Drugs to Treat Skin Conditions | ZILXI AER 1.5% | MINOCYCLINE HCL MICRONIZED FOAM 1.5% | Tier 3 | X | | | |
| Dermatological Agents - Skin Agents | KLISYRI OIN 1% | TIRBANIBULIN OINTMENT 1% | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | ACCU-CHEK KIT FASTCLIX | *LANCETS KIT*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ACCU-CHEK KIT SOFTCLIX | *LANCETS KIT*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ACCU-CHEK LIQ GUIDE | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | ACCU-CHEK LIQ SMART | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ACCU-CHEK SOL | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ACCU-CHEK TES GUIDE | GLUCOSE BLOOD TEST STRIP | Tier 3 | | X | | |
| Diabetes - Glucose Monitoring | ACCUTREND SOL GLUCOSE | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | AIMSCO TWIST MIS 32G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | AIMSCO TWIST MIS 33G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | AQINJECT PEN MIS 32GX5/32 | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | AQUALANCE MIS 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | ASSURE CMFRT MIS 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | AUM MINI PEN MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | AUM MINI PEN MIS 32GX5MM | INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | AUM MINI PEN MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | AUM READYGRD MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Diabetes - Glucose Monitoring | BD PEN NEEDL MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | BD PEN NEEDL MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | CAREFINE MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | CAREFINE MIS 32GX5MM | INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | CAREFINE MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | CARESENS SOL CONTROL | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | CARESENS 30G MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CARETOUCH MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | CARETOUCH MIS 32GX5MM | INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | CARETOUCH MIS LANC 26G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CARETOUCH MIS LANC 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CARETOUCH MIS LANC 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CARETOUCH MIS TWIST 28 | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CARETOUCH MIS TWIST 30 | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CARETOUCH MIS TWIST 33 | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CHEMSTRIP TES UGK | *URINE GLUCOSE-KETONES TEST STRIPS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CHEMSTRIP K TES | ACETONE (URINE) TEST STRIP | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | COAGUCHEK MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | COMFORT EZ MIS 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | COMFORT EZ MIS 30GX8MM | INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | COMFORT TCH MIS LANC 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | COMFORT TCH MIS LANC 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | COMFORT TCH MIS LANC 31G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | COMFORT TOUC MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Diabetes - Glucose Monitoring | COMFORT TOUC MIS 32GX5MM | INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | COMFORT TOUC MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | CONTOUR KIT NEXT | *BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | CONTOUR KIT NEXT LNK | *BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CONTOUR TES NEXT | GLUCOSE BLOOD TEST STRIP | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | CONTOUR NEXT KIT ONE | *BLOOD GLUCOSE MONITORING KIT*** | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | CONTROL SOL LIQ HI/ MID/L | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CONTROL SOL LIQ LEVEL 2 | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CVS KETONE TES CARE | *URINE GLUCOSE-KETONES TEST STRIPS*** | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | CVS LANCETS MIS ORIGINAL | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CVS LANCETS MIS THIN 26G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | CVS LANCETS MIS THIN 33G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | DEXCOM G6 MIS RECEIVER | *CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | DEXCOM G6 MIS SENSOR | *CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | DEXCOM G7 MIS RECEIVER | *CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | DEXCOM G7 MIS SENSOR | *CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | DIASTIX TES REAGENT | GLUCOSE URINE TEST-(GLUCOSE OXIDASE) STRIP | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | DIASTIX TES STRIPS | GLUCOSE URINE TEST-(GLUCOSE OXIDASE) STRIP | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | EASY COMFORT MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | EASYMAX LIQ NORM/ HIG | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | EASYMAX 15 LIQ LEVEL2-3 | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | EASYMAX 15 SOL LEVEL 2 | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | ENLITE GLUCO MIS SENSOR | *CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | FASTCLIX MIS LANCETS | *LANCETS*** | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Diabetes - Glucose Monitoring | FINGERSTIX MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | FORA TEST GO TES ADV VOIC | KETONE BLOOD TEST STRIP | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | FREESTY LIBR KIT 2 SENSOR | *CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | FREESTY LIBR KIT 3 SENSOR | *CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | FREESTY LIBR MIS 2 READER | *CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | FREESTY LIBR MIS 3 READER | *CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER*** | Tier 3 | X | | | |
| Diabetes - Glucose Monitoring | FREESTYLE KIT SENSOR | *CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | FREESTYLE MIS READER | *CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER*** | Tier 3 | X | | | |
| Diabetes - Glucose Monitoring | FREESTYLE MIS READER | *CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | GENTLE-LET MIS 26G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | GENTLE-LET MIS 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | GENTLE-LET MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | GUARDIAN MIS SENSOR 3 | *CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | GUARDIAN 4 MIS SENSOR | *CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR*** | Tier 3 | X | | | |
| Diabetes - Glucose Monitoring | GUARDIAN RT MIS REPL PED | *CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER*** | Tier 3 | X | X | | |
| Diabetes - Glucose Monitoring | INSUPEN MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | KETO-DIASTIX TES | *URINE GLUCOSE-KETONES TEST STRIPS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | KETONE TES | ACETONE (URINE) TEST STRIP | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | KETOSTIX TES STRIP | ACETONE (URINE) TEST STRIP | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | LANCET ULTRA MIS THIN 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | LANCETS MIS 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | LANCETS MICR MIS THIN 33G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | LANCETS SUPR MIS THIN 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | MEDISENSE LIQ GLUC-KET | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Diabetes - Glucose Monitoring | MICROLET MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | MM TWIST MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | MOBILE LANCE MIS 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | NEUTEK 2TEK SOL CONTROL | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | NOVOFINE MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | NOVOFINE AUT MIS 30GX8MM | INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | NOVOFINE PLS MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | NOVOTWIST MIS 32GX5MM | INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | ONETOUCH KIT ULTRA 2 | *BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH KIT VERIO | *BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH KIT VERIO FL | *BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH KIT VERIO IQ | *BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH KIT VERIO RE | *BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH LIQ ULT CONT | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH LIQ ULTRA | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH LIQ VERIO | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH MIS 30G | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH MIS LANCETS | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH TES ULTRA | GLUCOSE BLOOD TEST STRIP | Tier 1 | | X | | |
| Diabetes - Glucose Monitoring | ONETOUCH TES VERIO | GLUCOSE BLOOD TEST STRIP | Tier 1 | | X | | |
| Diabetes - Glucose Monitoring | ONETOUCH DEL MIS LANC DEV | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH DEL MIS PLUS 30G | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH DEL MIS PLUS 33G | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | ONETOUCH US MIS 2 30G | *LANCETS*** | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Diabetes - Glucose Monitoring | ONETOUCH US MIS LANCETS | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | PEN NEEDLE MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PEN NEEDLE MIS 32GX5MM | INSULIN PEN NEEDLE 32 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PEN NEEDLE MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PEN NEEDLES MIS 30GX5/16 | INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PEN NEEDLES MIS 30GX8MM | INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PEN NEEDLES MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PEN NEEDLES MIS 32GX5/32 | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PEN NEEDLES MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PENTIPS MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PENTIPS MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | PIP CONTROL LIQ | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | PRECISION LIQ GLUC/KET | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | PRECISN XTRA TES KETONE | KETONE BLOOD TEST STRIP | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | PRO COMFORT MIS LANC 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | PSS SAFE LAN MIS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | PSS SEL LANC MIS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | PURE COMFORT MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | QUINTET CONT SOL HGH/NORM | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | RELION ULTRA MIS THIN 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SAFE-T-LANCE MIS 21G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SAFE-T-LANCE MIS 25G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SAFE-T-LANCE MIS HI FLOW | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SAFE-T-LANCE MIS LOW FLOW | *LANCETS*** | Tier 3 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Diabetes - Glucose Monitoring | SAFE-T-LANCE MIS NOR FLOW | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SAFE-T-PRO MIS LANCETS | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | SAFE-T-PRO MIS PLUS | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | SAFETY 21G MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SAFETY 23G MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SAFETY 28G MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SINGLE-LET MIS 23G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | SOFTCLIX MIS LANCETS | *LANCETS*** | Tier 1 | | | | |
| Diabetes - Glucose Monitoring | SURE COMFORT MIS 32GX5/32 | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | TECHLITE MIS LANC 26G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | THINLETS GP MIS 26G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | TRUE COMFORT MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | TRUECONTROL LIQ LEVEL 0 | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | TRUECONTROL LIQ LEVEL 1 | *BLOOD GLUCOSE CALIBRATION - LIQUID*** | Tier 2 | | | | |
| Diabetes - Glucose Monitoring | TRUPLUS LANC MIS 26G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | TRUPLUS LANC MIS 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | TRUPLUS LANC MIS 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | TRUPLUS LANC MIS 33G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | TWIST LANCET MIS 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | TWIST LANCET MIS 30G MULT | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | ULTRA THIN MIS LANC 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | ULTRA THIN MIS LANC 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | ULTRA THIN MIS LANCETS | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | UNFINE PNTP MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Diabetes - Glucose Monitoring | UNIFINE PROT MIS 30GX8MM | INSULIN PEN NEEDLE 30 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | UNIFINE PROT MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | UNILET LANCT MIS 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | UNILET LANCT MIS 33G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | VERIFINE MIS UNIV 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | VERIFINE MIS UNIV 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | VERIFINE MIS UNIV 33G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | VERIFINE LAN MIS MINI 21G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | VERIFINE LAN MIS MINI 23G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | VERIFINE LAN MIS MINI 28G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | VERIFINE LAN MIS MINI 30G | *LANCETS*** | Tier 3 | | | | |
| Diabetes - Glucose Monitoring | VERIFINE PEN MIS 32GX4MM | INSULIN PEN NEEDLE 32 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | VERIFINE PEN MIS 32GX6MM | INSULIN PEN NEEDLE 32 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Diabetes - Glucose Monitoring | VERIO FLEX KIT ONETOUCH | *BLOOD GLUCOSE MONITORING KIT W/ DEVICE*** | Tier 1 | | | | |
| Diabetic/Endocrine Blood: Glucose Monitoring | GENTLE-LET MIS PLATFORM | *LANCETS MISC.*** | Tier 3 | | | | |
| Diabetic/Endocrine Blood: Glucose Monitoring | LANCET CARRY MIS CASE | *LANCETS MISC.*** | Tier 3 | | | | |
| Diabetic/Endocrine Blood: Glucose Monitoring | ONETOUCH MIS LANC DEV | *LANCETS MISC.*** | Tier 1 | | | | |
| Diabetic/Endocrine Blood: Glucose Monitoring | PSS SEL PLAT MIS | *LANCETS MISC.*** | Tier 3 | | | | |
| Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs | ROSUV/EZETIM TAB 10-10MG | EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-10 MG | Tier 3 | | X | | |
| Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs | ROSUV/EZETIM TAB 20-10MG | EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-20 MG | Tier 3 | | X | | |
| Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs | ROSUV/EZETIM TAB 40-10MG | EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-40 MG | Tier 3 | | X | | |
| Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs | ROSUV/EZETIM TAB 5-10MG | EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-5 MG | Tier 3 | | X | | |

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|--|--------------------------|---|------------|------|--------------|--------------|-----------|
| Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs | ROSZET TAB 10-10MG | EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-10 MG | Tier 3 | | X | | |
| Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs | ROSZET TAB 20-10MG | EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-20 MG | Tier 3 | | X | | |
| Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs | ROSZET TAB 40-10MG | EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-40 MG | Tier 3 | | X | | |
| Dyslipidemics, Other - Miscellaneous Cholesterol Control Drugs | ROSZET TAB 5-10MG | EZETIMIBE-ROSUVASTATIN CALCIUM TAB 10-5 MG | Tier 3 | | X | | |
| Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs | ACCRUFER CAP 30MG | FERRIC MALTOL CAP 30 MG (FE EQUIV) | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | ASCORBIC ACD GRA | ASCORBIC ACID (BULK) GRANULES | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ASCORBIC ACD POW | ASCORBIC ACID (BULK) POWDER | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ASCORBIC ACD POW CASSAVE | ASCORBIC ACID (BULK) POWDER | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ATABEX OB TAB 29-1MG | *PRENATAL VIT W/ FE BISGLYCINATE CHELATE-FA TAB 29-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | AURYXIA TAB 210MG | FERRIC CITRATE TAB 1 GM (210 MG FERRIC IRON) | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | AZESCO TAB 13-1MG | *PRENATAL VIT W/ FE GLUCONATE-FA TAB 13-1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | CALC ACETATE CAP 667MG | CALCIUM ACETATE (PHOSPHATE BINDER) CAP 667 MG (169 MG CA) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | CALC ACETATE TAB 667MG | CALCIUM ACETATE (PHOSPHATE BINDER) TAB 667 MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | CALCIFOL WAF | CA CARB-FOLIC ACID-VIT D-B6-B12-BORON-MAG WAFER 1342-1.6 MG | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | CALCIUM-FA WAF PLUS D | CA CARB-FOLIC ACID-VIT D-B6-B12-BORON-MAG WAFER 1342-1 MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | CARBAGLU TAB 200MG | CARGLUMIC ACID SOLUBLE TAB 200 MG | Tier 3 | X | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | CARGLUMIC TAB 200MG | CARGLUMIC ACID SOLUBLE TAB 200 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | CHEMET CAP 100MG | SUCCIMER CAP 100 MG | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | CITRANATAL CAP HARMONY | *PRENAT W/O A W/FE FUM-FE CBN-DSS-FA-DHA CAP 27-1-260 MG*** | Tier 3 | | | | |

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| Electrolytes/Minerals/Metals/ Vitamins | CITRANATAL CAP MEDLEY | *PRENAT W/O A W/FE FUM-FE CBN-FA-DHA CAP 27-1-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CITRANATAL MIS | *PRENAT W/O A W/FECBN- FEG-L-DSS-FA TAB 90 & DHA CAP 300MG PAK* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CITRANATAL MIS 90 DHA | *PRENAT W/O A W/FECBN- FEG-L-DSS-FA TAB 90 & DHA CAP 300MG PAK* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CITRANATAL MIS B-CALM | *PRENAT W/O A W/FECBN- FEG-LU-FA TAB 20-1 MG & VIT B6 TAB PAK* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CITRANATAL PAK ASSURE | *PRENAT W/O A W/FECBN-FEGL- DSS-FA TAB & DHA CAP 300 MG PACK* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CITRANATAL PAK DHA | *PRENAT W/O A W/FECBN-FEGL- DSS-FA TAB & DHA CAP 250 MG PACK* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CITRANATAL TAB BLOOM | *PRENATAL VIT W/ DSS-FE CBN- FE GLUC-FA TAB 90-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CLINPRO 5000 PST 1.1% | SODIUM FLUORIDE PASTE 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | C-NATE DHA CAP 28-1- 200 | *PRENATAL VIT W/ FE FUM-FA- OMEGA 3 CAP 28-1-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | COMPLETE NAT PAK DHA | *PRENAT-FE BIS-FE PROT SUCC- FA-CA TAB & OMEGA 3 CAP 200 PK** | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | COMPLETENATE CHW | *PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CO-NATAL FA TAB 29- 1MG | *PRENATAL VIT W/ FE FUMARATE-FA TAB 29-1 MG*** | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CONCEPT DHA CAP | *PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CONCEPT OB CAP | *PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 130-92.4-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CVS ADVANTAG POW / IRON | *INFANT FOODS POWDER** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CVS SENSITIV POW / IRON | *INFANT FOODS POWDER** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CVS TENDER POW /IRON | *INFANT FOODS POWDER** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CVS TODDLER POW INFANT | *INFANT FOODS POWDER** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | CYTRA K GRA CRYSTALS | POTASSIUM CITRATE & CITRIC ACID POWDER PACK 3300-1002 MG | Tier 1 | | | | |

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| Electrolytes/Minerals/Metals/Vitamins | DAVIMET/FLUO CHW 0.75MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.75 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX GRA 180MG | DEFERASIROX GRANULES PACKET 180 MG | Tier 1 | | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX GRA 360MG | DEFERASIROX GRANULES PACKET 360 MG | Tier 1 | | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX GRA 90MG | DEFERASIROX GRANULES PACKET 90 MG | Tier 1 | | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX TAB 125MG | DEFERASIROX TAB FOR ORAL SUSP 125 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX TAB 180MG | DEFERASIROX TAB 180 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX TAB 250MG | DEFERASIROX TAB FOR ORAL SUSP 250 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX TAB 360MG | DEFERASIROX TAB 360 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX TAB 500MG | DEFERASIROX TAB FOR ORAL SUSP 500 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERASIROX TAB 90MG | DEFERASIROX TAB 90 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERIPRONE TAB 1000MG | DEFERIPRONE TAB 1000 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DEFERIPRONE TAB 500MG | DEFERIPRONE TAB 500 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | DENTA 5000 CRE PLUS | SODIUM FLUORIDE CREAM 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | DENTA 5000 CRE PLUS 2PK | SODIUM FLUORIDE CREAM 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | DENTA 5000 PST PLUS SEN | SODIUM FLUORIDE-POTASSIUM NITRATE PASTE 1.1-5% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | DENTAGEL GEL 1.1% | SODIUM FLUORIDE GEL 1.1% (0.5% F) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | DERMACINRX TAB PRETRATE | *PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | DUET DHA MIS BALANCED | *PRENAT W/FE POLY-NA FERED-FA TAB 25-1 & OMEGA CAP 267 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | DUET DHA 400 MIS 25-1-400 | *PRENAT W/FE POLY-NA FERED-FA TAB 25-1 & OMEGA CAP 400 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | EASYGEL GEL 0.4% | STANNOUS FLUORIDE GEL 0.4% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | EASYGEL GEL 0.4%CHRY | STANNOUS FLUORIDE GEL 0.4% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | EASYGEL GEL 0.4%CITR | STANNOUS FLUORIDE GEL 0.4% | Tier 1 | | | | |

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| Electrolytes/Minerals/Metals/Vitamins | EASYGEL GEL 0.4%MINT | STANNOUS FLUORIDE GEL 0.4% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | EFFER-K TAB 10MEQ | POTASSIUM BICARBONATE-CITRIC ACID EFFER TAB 10 MEQ | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | EFFER-K TAB 20MEQ | POTASSIUM BICARBONATE-CITRIC ACID EFFER TAB 20 MEQ | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ELITE-OB TAB | *PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | EN GENTLEASE POW FUSS/GAS | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENBRACE HR CAP | *PRENATAL VIT W/ FE GLY CYS-FA-OMEGA 3 FATTY ACIDS CAP*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENDARI POW 5GM | GLUTAMINE (SICKLE CELL) POWD PACK 5 GM | Tier 3 | | X | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA NUTRAMI CON LIPIIL | *INFANT FOODS CONC** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA NUTRAMI LIQ DHA/ARA | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA NUTRAMI LIQ LIPIIL | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA NUTRAMI POW PROB/LGG | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA NUTRAMI POW TOD/ENFL | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA PREGEST LIQ LIPIIL | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA PROSOBE CON LIPIIL | *INFANT FOODS CONC** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA PROSOBE LIQ LIPIIL | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFA PROSOBE LIQ SENSITIV | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAGROW POW PREMIUM | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAGROW PRM POW TODDLER | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL LIQ GENTLEAS | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL LIQ INFANT | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL LIQ PREMATUR | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL POW ENSPIRE | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL POW REGULINE | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL 24 LIQ | *INFANT FOODS LIQUID** | Tier 3 | X | | | |

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|---------------------------------------|---------------------------|--------------------------------------|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL AR LIQ LIPIIL | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL AR POW SPIT-UP | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL ENFA POW LIPIIL | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL HUMA LIQ FORTIFIE | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL HUMA POW FORTIFIE | *INFANT FOODS PACKET** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL LIPI LIQ ENFACARE | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL LIPI LIQ GENTLEAS | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL NEUR LIQ ENFACARE | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL NEUR LIQ INFANT | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL NEUR POW ENFACARE | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL NEUR POW GENTLEAS | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL NEUR POW SENSITIV | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL PREM CON INFANT | *INFANT FOODS CONC** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL PREM CON LIPIIL | *INFANT FOODS CONC** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL PREM LIQ INFANT | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL PREM LIQ LIPIIL | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL PREM LIQ NEWBORN | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL PREM POW INFANT | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL PREM POW NEWBORN | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAMIL SOY POW PROSOBEE | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAROW LIQ NEUROPRO | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | ENFAROW NEXT LIQ VANILLA | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | EXJADE TAB 125MG | DEFERASIROX TAB FOR ORAL SUSP 125 MG | Tier 3 | X | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | EXJADE TAB 250MG | DEFERASIROX TAB FOR ORAL SUSP 250 MG | Tier 3 | X | | X | X |

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| Electrolytes/Minerals/Metals/Vitamins | EXJADE TAB 500MG | DEFERASIROX TAB FOR ORAL SUSP 500 MG | Tier 3 | X | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | FERPRX 2-DAY TAB 1000MG | DEFERIPRONE (TWICE DAILY) TAB 1000 MG | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | FERRIPROX SOL 100MG/ML | DEFERIPRONE ORAL SOLN 100 MG/ML | Tier 2 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | FERRIPROX TAB 1000MG | DEFERIPRONE TAB 1000 MG | Tier 3 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | FERRIPROX TAB 500MG | DEFERIPRONE TAB 500 MG | Tier 3 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | FERRO-PLEX TAB | *FE FUM-FA-VIT C-VIT E-VIT B12-INTRINS FACT TAB 115-1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | FLORIVA DRO 0.25MG | SODIUM FLUORIDE-VITAMIN D LIQD DROPS 0.25 MG/ML-400 UNIT/ML | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLORIVA DRO PLUS | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORID SENS PST 1.1-5% | SODIUM FLUORIDE-POTASSIUM NITRATE PASTE 1.1-5% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORIDE CHW 0.25MG F | SODIUM FLUORIDE CHEW TAB 0.25 MG F (FROM 0.55 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORIDE CHW 0.5MG F | SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORIDE CHW 1MG F | SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORIDEX CON DLY REN | STANNOUS FLUORIDE CONC 0.63% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORIDEX PST 1.1% | SODIUM FLUORIDE PASTE 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORIMAX PST 5000 | SODIUM FLUORIDE PASTE 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORITAB DRO 0.125MG | SODIUM FLUORIDE SOLN 0.125 MG/DROP F (0.275 MG/DROP NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FLUORMX 5000 PST SENSITIV | SODIUM FLUORIDE-POTASSIUM NITRATE PASTE 1.1-5% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FOLIVANE-OB CAP | *PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 85-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | FOSRENOL CHW 1000MG | LANTHANUM CARBONATE CHEW TAB 1000 MG (ELEMENTAL) | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | FOSRENOL CHW 500MG | LANTHANUM CARBONATE CHEW TAB 500 MG (ELEMENTAL) | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | FOSRENOL CHW 750MG | LANTHANUM CARBONATE CHEW TAB 750 MG (ELEMENTAL) | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | FOSRENOL POW 1000MG | LANTHANUM CARBONATE ORAL POWDER PACK 1000 MG (ELEMENTAL) | Tier 3 | | | | |

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|---|-------------------------------|---|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/ Vitamins | FOSRENOL POW 750MG | LANTHANUM CARBONATE ORAL POWDER PACK 750 MG (ELEMENTAL) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | FRAICHE 5000 GEL SENSITIV | SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-4.5% | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/ Vitamins | GALZIN CAP 25MG | ZINC ACETATE CAP 25 MG (ELEMENTAL ZINC) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GALZIN CAP 50MG | ZINC ACETATE CAP 50 MG (ELEMENTAL ZINC) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GERBER GOOD CON SOY/IRON | *INFANT FOODS CONC** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GERBER GOOD CON W/ IRON | *INFANT FOODS CONC** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GERBER GOOD LIQ SOY/ IRON | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GERBER GOOD LIQ W/ IRON | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GERBER GOOD POW SOY/IRON | *INFANT FOODS POWDER** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GERBER GOOD POW W/ IRON | *INFANT FOODS POWDER** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START CON SOY/ IRON | *INFANT FOODS CONC** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START CON W/ IRON | *INFANT FOODS CONC** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START LIQ SOY/ IRON | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START LIQ W/ IRON | *INFANT FOODS LIQUID** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START POW NATURAL | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START POW SOY PLS2 | *INFANT FOODS POWDER** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START POW SOY/ IRON | *INFANT FOODS POWDER** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START POW W/ IRON | *INFANT FOODS POWDER** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START 2 CON W/ IRON | *INFANT FOODS CONC** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START 2 LIQ W/ IRON | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | GOOD START 2 POW SOY/ IRON | *INFANT FOODS POWDER** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/ Vitamins | HEMATINIC/FA TAB | FERROUS FUMARATE-FOLIC ACID TAB 324-1 MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | HEMOCYTE-F TAB | FERROUS FUMARATE-FOLIC ACID TAB 324-1 MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | INFANT FORM POW / IRON | *INFANT FOODS POWDER** | Tier 1 | | | | |

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|---------------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/Vitamins | JADENU TAB 180MG | DEFERASIROX TAB 180 MG | Tier 3 | X | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | JADENU TAB 360MG | DEFERASIROX TAB 360 MG | Tier 3 | X | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | JADENU TAB 90MG | DEFERASIROX TAB 90 MG | Tier 3 | X | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | JADENU SPRKL GRA 180MG | DEFERASIROX GRANULES PACKET 180 MG | Tier 3 | | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | JADENU SPRKL GRA 360MG | DEFERASIROX GRANULES PACKET 360 MG | Tier 3 | | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | JADENU SPRKL GRA 90MG | DEFERASIROX GRANULES PACKET 90 MG | Tier 3 | | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | JENLIVA CAP | *PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA CAP 1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | JUST RIGHT GEL 5000 | SODIUM FLUORIDE GEL 1.1% (0.5% F) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | JUST RIGHT PST 5000 | SODIUM FLUORIDE PASTE 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | JYNARQUE PAK 15MG | TOLVAPTAN TAB THERAPY PACK 15 MG | Tier 2 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | JYNARQUE PAK 30-15MG | TOLVAPTAN TAB THERAPY PACK 30 & 15 MG | Tier 2 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | JYNARQUE PAK 45-15MG | TOLVAPTAN TAB THERAPY PACK 45 & 15 MG | Tier 2 | X | X | | X |
| Electrolytes/Minerals/Metals/Vitamins | JYNARQUE PAK 60-30MG | TOLVAPTAN TAB THERAPY PACK 60 & 30 MG | Tier 2 | X | X | | X |
| Electrolytes/Minerals/Metals/Vitamins | JYNARQUE PAK 90-30MG | TOLVAPTAN TAB THERAPY PACK 90 & 30 MG | Tier 2 | X | X | | X |
| Electrolytes/Minerals/Metals/Vitamins | JYNARQUE TAB 15MG | TOLVAPTAN TAB 15 MG | Tier 2 | X | X | | X |
| Electrolytes/Minerals/Metals/Vitamins | JYNARQUE TAB 30MG | TOLVAPTAN TAB 30 MG | Tier 2 | X | X | | X |
| Electrolytes/Minerals/Metals/Vitamins | K CITRATE SOL CITR ACD | POTASSIUM CITRATE & CITRIC ACID SOLN 1100-334 MG/5ML | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | KLOR-CON PAK 20MEQ | POTASSIUM CHLORIDE POWDER PACKET 20 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | KLOR-CON 10 TAB 10MEQ ER | POTASSIUM CHLORIDE TAB ER 10 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | KLOR-CON 8 TAB 8MEQ ER | POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | KLOR-CON M10 TAB 10MEQ ER | POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 10 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | KLOR-CON M15 TAB 15MEQ ER | POTASSIUM CHLORIDE MICROENCAPSULATED CRYST ER TAB 15 MEQ | Tier 1 | | | | |

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| Electrolytes/Minerals/Metals/Vitamins | KLOR-CON M20 TAB 20MEQ ER | POTASSIUM CHLORIDE MICROENCAPSULATED CRYSTALS ER TAB 20 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | KOSHR PRENAT TAB 30-1MG | *PRENATAL VIT W/ IRON CARBONYL-FA TAB 30-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | K-PHOS TAB | POTASSIUM PHOSPHATE MONOBASIC TAB 500 MG | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | K-PHOS TAB NEUTRAL | POTASSIUM PHOSPHATE MONOBASIC W/SODIUM PHOSPHATE DI & MONOBASIC TAB 155-852-130MG | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | K-PHOS TAB NO 2 | POTASSIUM & SODIUM ACID PHOSPHATES TAB 305-700 MG | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | K-TAB TAB 10MEQ CR | POTASSIUM CHLORIDE TAB ER 10 MEQ | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | K-TAB TAB 20MEQ | POTASSIUM CHLORIDE TAB ER 20 MEQ (1500 MG) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | K-TAB TAB 8MEQ CR | POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | LANTHANUM CHW 1000MG | LANTHANUM CARBONATE CHEW TAB 1000 MG (ELEMENTAL) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | LANTHANUM CHW 500MG | LANTHANUM CARBONATE CHEW TAB 500 MG (ELEMENTAL) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | LANTHANUM CHW 750MG | LANTHANUM CARBONATE CHEW TAB 750 MG (ELEMENTAL) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | LIQ PROTEIN LIQ FORTIFIE | *INFANT FOODS LIQUID** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | LOKELMA PAK 10GM | SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 10 GM | Tier 3 | | X | | |
| Electrolytes/Minerals/Metals/Vitamins | LOKELMA PAK 5GM | SODIUM ZIRCONIUM CYCLOSILICATE FOR SUSP PACKET 5 GM | Tier 3 | | X | | |
| Electrolytes/Minerals/Metals/Vitamins | MEPHYTON TAB 5MG | PHYTONADIONE TAB 5 MG | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | M-NATAL PLUS TAB | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTI VIT/FL CHW 0.25MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTI-MAC TAB | *PRENATAL VIT W/ FE FUM-METHYLFOLATE-FA TAB 15-0.75-1 MG*** | Tier 2 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | MULTIVIT/FL CHW 0.25MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTIVIT/FL CHW 0.25MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG*** | Tier 1 | | | | |

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| Electrolytes/Minerals/Metals/Vitamins | MULTIVIT/FL CHW 0.5MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTIVIT/FL CHW 0.5MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTIVIT/FL CHW 1MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTIVIT/FL CHW 1MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTIVIT/FL DRO 0.25MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ ML*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTI-VIT/FL DRO /FE 0.25 | *PEDIATRIC MULTIPLE VITAMINS W/ FL-FE DROPS 0.25-10 MG/ ML** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTI-VIT/FL DRO 0.5MG/ML | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ ML*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTI-VIT-FL CHW 0.25MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTI-VIT-FL CHW 0.5MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | MULTI-VIT-FL CHW 1MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NAFRINSE CHW 1MG F | SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NAFRINSE DRO 0.125MG | SODIUM FLUORIDE SOLN 0.125 MG/DROP F (0.275 MG/DROP NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NAFRINSE SOL DAILY | SODIUM FLUORIDE-PHOSPHORIC ACID FOR SOLN 1 MG/5ML (F EQUIV) | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NAFRINSE DLY SOL / NEUTRAL | SODIUM FLUORIDE FOR SOLN RINSE 0.05% | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NAFRINSE WK SOL 0.2% | SODIUM FLUORIDE FOR SOLN RINSE 0.2% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NATACHEW CHW | *PRENATAL VIT W/ FE FUM-FE BISGLYCIN-FA CHEW TAB 28-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NATAL PNV TAB | *PRENATAL VIT W/ FE GLUCONATE-FA TAB 6-0.5 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NATALVIT TAB 75-1MG | *PRENATAL VIT W/ FE FUMARATE-FA TAB 75-1 MG*** | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NEEVO DHA CAP 27-1.13 | *PRENAT W/O A W/FEFUM-METHYLFOL-OMEGAS CAP 27-1.13 MG*** | Tier 3 | | | | |

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| Electrolytes/Minerals/Metals/Vitamins | NEONATAL TAB COMPLETE | *PRENATAL VIT W/ FE FUMARATE-FA TAB 29-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NEONATAL TAB COMPLTE | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NEONATAL TAB PLUS | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NEONATAL 19 TAB | *PRENATAL VITAMIN-FOLIC ACID TAB 1 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NEONATAL FE TAB | *PRENATAL VITAMIN W/ IRON-FOLIC ACID TAB 90-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NEONATAL PLS TAB 27-1MG | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NEONATAL/DHA MIS | *PRENATAL MV W/FE FUM-FA TAB 29-1 MG & DHA CAP 200 MG PACK * | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NESTABS TAB | *PRENATAL VIT W/O VIT A W/ FE BISGLYCINATE-FA TAB 32-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NESTABS DHA PAK | *PRENAT W/O A W/ FE BISGLYC-FA TAB 32-1 MG & OMEGA CAP PACK* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NESTABS ONE CAP | *PRENAT W/O A W/FECBN-BISG-METHYLF-DHA CAP 38-1-225 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | NIACINAMIDE POW | NIACINAMIDE POWDER | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | NICOTINAMIDE POW | NIACINAMIDE POWDER | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | NIVA-PLUS TAB | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | OB COMPLETE CAP ONE | *PRENATAL W/O A W/FECBN-FE ASP GLYC-FA-FISH CAP 50-1-476 MG* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | OB COMPLETE CAP PETITE | *PRENAT W/O A W/FECBN-FE ASPGLYC-FA-OMEGA CAP 35-5-1-200 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | OB COMPLETE TAB | *PRENATAL VIT W/ IRON CARBONYL-FA TAB 50-1.25 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | OB COMPLETE TAB PREMIER | *PRENATAL VIT W/ FE CBN-FE ASP GLYC-FA TAB 30-20-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | OB COMPLETE/ CAP DHA | *PRENAT W/ IRON CBN-FE ASP GLYC-FA-OMEGA CAP 30-10-1-200 MG* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | OBSTETRX ONE CAP 38-1-225 | *PRENAT W/O A W/FECBN-BISG-METHYLF-DSS-DHA CAP 38-1-225 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ONE VITE TAB 1MG PLUS | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | | |

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| Electrolytes/Minerals/Metals/Vitamins | ORACIT SOL | SODIUM CITRATE & CITRIC ACID SOLN 490-640 MG/5ML | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ORAL CITRATE SOL | SODIUM CITRATE & CITRIC ACID SOLN 490-640 MG/5ML | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PHENYL-FREE POW 1 | *INFANT FOODS POWDER** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | PHOSLYRA SOL | CALCIUM ACETATE (PHOSPHATE BINDER) ORAL SOLN 667 MG/5ML | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PHOSPHA 250 TAB NEUTRAL | POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PHOSPHOROUS TAB | POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PHOSPHO-TRIN TAB 250 NEUT | POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PHOXILLUM SOL B22K/40 | *BICARB-K 22-4 MEQ/L WITH PHOS 1 MMOL/L SOLN (CRRT)*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PHOXILLUM SOL BK4/2.5 | *BICARB-K-CA 32-4-2.5 MEQ/L WITH PHOS 1 MMOL/L SOLN (CRRT)* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PHYTONADIONE TAB 5MG | PHYTONADIONE TAB 5 MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PNV TAB 20-1 TAB | *PRENAT VIT W/FE BISGLYC CHELATE-FA TAB 20-1MG (1.7MG DFE)** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | PNV-DHA CAP | *PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PNV-DHA CAP DOCUSATE | *PRENATAL W/O VIT A W/ FE FUM-DSS-FA-DHA CAP 27-1.25-300 MG* | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PNV-OMEGA CAP | *PRENAT W/O A W/ FE FUMARATE-METHYLFOLATE-FA-OMEGA 3 CAP*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PNV-SELECT TAB | *PRENATAL VIT W/ FE FUM-METHYLFOLATE-FA TAB 27-0.6-0.4 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POKONZA POW 10MEQ | POTASSIUM CHLORIDE POWDER PACKET 10 MEQ | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | POLY-VI-FLOR CHW 0.25MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POLY-VI-FLOR CHW 0.5MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG*** | Tier 3 | | | | |

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| Electrolytes/Minerals/Metals/Vitamins | POLY-VI-FLOR CHW 1MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POLY-VI-FLOR CHW W/ IRON | *PEDIATRIC MULTIPLE VITAMINS W/ FL-FE CHEW TAB 0.5-10 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POLY-VI-FLOR SUS /IRON | *PEDIATRIC MULTIPLE VITAMIN W/ FL-FE SUSP 0.25-7 MG/ML** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POLY-VI-FLOR SUS 0.25/ ML | *PEDIATRIC MULTIPLE VITAMIN W/ FLUORIDE SUSP 0.25 MG/ ML*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE CAP 10MEQ ER | POTASSIUM CHLORIDE CAP ER 10 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE CAP 8MEQ ER | POTASSIUM CHLORIDE CAP ER 8 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE POW 20MEQ | POTASSIUM CHLORIDE POWDER PACKET 20 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE SOL 10% | POTASSIUM CHLORIDE ORAL SOLN 10% (20 MEQ/15ML) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE SOL 20% | POTASSIUM CHLORIDE ORAL SOLN 20% (40 MEQ/15ML) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE TAB 10MEQ ER | POTASSIUM CHLORIDE TAB ER 10 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE TAB 10MEQ ER | POTASSIUM CHLORIDE MICROENCAPSULATED CRY ER TAB 10 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE TAB 20MEQ ER | POTASSIUM CHLORIDE TAB ER 20 MEQ (1500 MG) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE TAB 20MEQ ER | POTASSIUM CHLORIDE MICROENCAPSULATED CRY ER TAB 20 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CHLORIDE TAB 8MEQ ER | POTASSIUM CHLORIDE TAB ER 8 MEQ (600 MG) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CITRA ER TAB 1080MG | POTASSIUM CITRATE TAB ER 10 MEQ (1080 MG) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CITRA ER TAB 1620MG | POTASSIUM CITRATE TAB ER 15 MEQ (1620 MG) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CITRA ER TAB 540MG | POTASSIUM CITRATE TAB ER 5 MEQ (540 MG) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CL MICRO TAB 10MEQ CR | POTASSIUM CHLORIDE MICROENCAPSULATED CRY ER TAB 10 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CL MICRO TAB 10MEQ ER | POTASSIUM CHLORIDE MICROENCAPSULATED CRY ER TAB 10 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CL MICRO TAB 15MEQ ER | POTASSIUM CHLORIDE MICROENCAPSULATED CRY ER TAB 15 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POT CL MICRO TAB 20MEQ ER | POTASSIUM CHLORIDE MICROENCAPSULATED CRY ER TAB 20 MEQ | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---------------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/Vitamins | POTABA CAP 500MG | POTASSIUM AMINO BENZOATE CAP 500 MG | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | POTASSIUM CH TAB 15MEQ | POTASSIUM CHLORIDE MICROENCAPSULATED CRYSTALS ER TAB 15 MEQ | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREGEN DHA CAP | *PRENATAL MV & MIN W/FE CARBONYL-FA-DHA CAP 28-1-35 MG** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | PREGENNA TAB | *PRENAT VIT W/FE BISGLYC CHELATE-FA TAB 20-1MG (1.7MG DFE)** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | PREGESTIMIL POW | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREMESISRX TAB | *PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENA1 CHW | *PRENAT W/ B2-B6-B12-D3-FOLIC ACID CHEW TAB 1.4 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENA1 PEARL CAP | *PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENAISSANCE CAP | *PRENATAL W/O VIT A W/ FE FUM-DSS-FA-DHA CAP 29-1.25-325 MG* | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENAISSANCE CAP PLUS | *PRENATAL W/O A W/FE CBN-DSS-FA-DHA CAP 28-1-250 MG*** | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENARA CAP PRENATAL | *PRENATAL VIT W/ FE FUMARATE-FA CAP 15-1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATAL TAB 27-1MG | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATAL TAB PLUS | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATAL 19 CHW 29-1MG | *PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATAL 19 CHW TAB | *PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATAL 19 TAB 29-1MG | *PRENATAL VIT W/ DSS-FE FUMARATE-FA TAB 29-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATAL PLS MIS MV + DHA | *PRENAT W/ FE FUM-FA TAB 27-1 MG & OMEGA 3 CAP 312 MG PAK* | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATAL VIT TAB LOW IRON | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATAL-U CAP 106.5-1 | *PRENATAL W/O A VIT W/ FE FUMARATE-FA CAP 106.5-1 MG*** | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATE CAP ENHANCE | *PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 28-0.6-0.4-400 MG** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---------------------------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/Vitamins | PRENATE CAP ESSENT | *PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 18-0.6-0.4-300 MG* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATE CAP PIXIE | *PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 10-0.6-0.4-200 MG* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATE CAP RESTORE | *PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-400 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATE CHW 0.6-0.4 | *PRENAT MV & MIN W/ L-METHYLFOLATE-FA CHEW TAB 0.6-0.4 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATE TAB ELITE | *PRENATAL W/ FE ASP GLY-L METHYLFOL-FA TAB 20-0.6-0.4 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATE AM TAB 1MG | *PRENATAL W/ CALCIUM-VIT B6-VIT B12-FA-GINGER TAB 1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATE DHA CAP | *PRENAT W/O A W/FEASPG-METHFOL-FA-DHA CAP 18-0.6-0.4-300 MG* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATE MINI CAP | *PRENAT W/OA W/FECB-FEASP-METH-FA-DHA CAP 18-0.6-0.4-350 MG* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATRIX TAB | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATRYL TAB | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATVITE TAB COMPLETE | *PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATVITE TAB PLUS | *PRENATAL MULTIVITAMINS & MINERALS W/ IRON & FA TAB 1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRENATVITE TAB RX | *PRENATAL MULTIVITAMINS & MINERALS W/IRON & FA TAB 0.8 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREPLUS TAB 27-1MG | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREVDNT 5000 GEL 1.1-5% | SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREVDNT 5000 PST 1.1% | SODIUM FLUORIDE PASTE 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREVIDENT CRE 5000 PLS | SODIUM FLUORIDE CREAM 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREVIDENT GEL 1.1% | SODIUM FLUORIDE GEL 1.1% (0.5% F) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREVIDENT GEL 1.1% BER | SODIUM FLUORIDE GEL 1.1% (0.5% F) | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---------------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/Vitamins | PREVIDENT GEL 1.1% MIN | SODIUM FLUORIDE GEL 1.1% (0.5% F) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREVIDENT PST 1.1% | SODIUM FLUORIDE PASTE 1.1% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PREVIDENT SOL 0.2% | SODIUM FLUORIDE RINSE 0.2% | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PRIMACARE CAP | *PRENAT W/O A W/FEASP-METHLF-FA-OMEG CAP 30-0.75-0.25-470MG* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PROVIDA OB CAP | *PRENATAL W/O A W/FE FUM-FE POLY-FA CAP 20-20-1.25 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PURAMINO POW DHA/ARA | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | PURAMINO POW TODDLER | *INFANT FOODS POWDER** | Tier 3 | X | | | |
| Electrolytes/Minerals/Metals/Vitamins | QUFLORA PED CHW 0.25MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.25 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | QUFLORA PED CHW 0.5MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 0.5 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | QUFLORA PED CHW 1MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE CHEW TAB 1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | QUFLORA PED DRO 0.25MG | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.25 MG/ML*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | QUFLORA PED DRO 0.5MG/ML | *PEDIATRIC MULTIPLE VITAMINS W/ FLUORIDE SOLN 0.5 MG/ML*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | REDICHEW RX CHW | *PRENAT W/ B2-B6-B12-D3-FOLIC ACID CHEW TAB 1.4 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | RELNATE DHA CAP | *PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | RENAGEL TAB 800MG | SEVELAMER HCL TAB 800 MG | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | RENVELA POW 0.8GM | SEVELAMER CARBONATE PACKET 0.8 GM | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | RENVELA POW 2.4GM | SEVELAMER CARBONATE PACKET 2.4 GM | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | RENVELA TAB 800MG | SEVELAMER CARBONATE TAB 800 MG | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | SAMSCA TAB 15MG | TOLVAPTAN TAB 15 MG | Tier 3 | X | X | | X |
| Electrolytes/Minerals/Metals/Vitamins | SAMSCA TAB 30MG | TOLVAPTAN TAB 30 MG | Tier 3 | X | X | | X |
| Electrolytes/Minerals/Metals/Vitamins | SELECT-OB CHW | *PRENATAL VIT W/ FE POLYSAC CMLPX-FA CHEW TAB 29-1 MG*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---------------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/Vitamins | SELECT-OB CHW | *PRENAT W/ FEPOLYCMPLX-METHYLFOL-FA CHEW TAB 29-0.6-0.4 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SELECT-OB+ PAK DHA | *PRENATAL MV W/FE POLY-FA CHW 29-1 MG & DHA CAP 250 MG PAK * | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SE-NATAL 19 CHW | *PRENATAL VIT W/ FE FUMARATE-FA CHEW TAB 29-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SE-NATAL 19 TAB | *PRENATAL VIT W/ DSS-FE FUMARATE-FA TAB 29-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SEVELAMER POW 0.8GM | SEVELAMER CARBONATE PACKET 0.8 GM | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SEVELAMER POW 2.4GM | SEVELAMER CARBONATE PACKET 2.4 GM | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SEVELAMER TAB 400MG | SEVELAMER HCL TAB 400 MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SEVELAMER TAB 800MG | SEVELAMER HCL TAB 800 MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SEVELAMER TAB 800MG | SEVELAMER CARBONATE TAB 800 MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SF GEL 1.1% | SODIUM FLUORIDE GEL 1.1% (0.5% F) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SF 5000 PLUS CRE 1.1% | SODIUM FLUORIDE CREAM 1.1% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SIMILAC LIQ NEOSURE | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SIMILAC 360 POW SENSITIV | *INFANT FOODS POWDER** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SIMILAC ALIM LIQ IMMUNE | *INFANT FOODS LIQUID** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD CHLORIDE GRA | SODIUM CHLORIDE GRANULES | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD CITRATE SOL CITR ACD | SODIUM CITRATE & CITRIC ACID SOLN 500-334 MG/5ML | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE CHW 0.25MG F | SODIUM FLUORIDE CHEW TAB 0.25 MG F (FROM 0.55 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE CHW 0.5MG F | SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE CHW 1.1MG | SODIUM FLUORIDE CHEW TAB 0.5 MG F (FROM 1.1 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE CHW 1MG F | SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE CHW 2.2MG | SODIUM FLUORIDE CHEW TAB 1 MG F (FROM 2.2 MG NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE DRO 0.5MG/ML | SODIUM FLUORIDE SOLN 0.5 MG/ML F (FROM 1.1 MG/ML NAF) | HCR | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE GEL 1.1% | SODIUM FLUORIDE GEL 1.1% (0.5% F) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---------------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE GEL 1.1-5% | SODIUM FLUORIDE-POTASSIUM NITRATE GEL 1.1-5% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE PST 1.1% | SODIUM FLUORIDE PASTE 1.1% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE SOL 0.2%MINT | SODIUM FLUORIDE RINSE 0.2% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE TAB 0.5MG F | SODIUM FLUORIDE TAB 0.5 MG F (FROM 1.1 MG NAF) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD FLUORIDE TAB 1MG F | SODIUM FLUORIDE TAB 1 MG F (FROM 2.2 MG NAF) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SOD POLY SUL POW | *SODIUM POLYSTYRENE SULFONATE POWDER** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SODIUM POW CHLORIDE | SODIUM CHLORIDE POWDER | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SODIUM FLUOR CRE 1.1 | SODIUM FLUORIDE CREAM 1.1% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SODIUM FLUOR CRE 5000 PLS | SODIUM FLUORIDE CREAM 1.1% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SODIUM FLUOR CRE 5000 PPM | SODIUM FLUORIDE CREAM 1.1% | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SODIUM FLUOR GEL 1.1% | SODIUM FLUORIDE GEL 1.1% (0.5% F) | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SPS SUS 15GM/60 | SODIUM POLYSTYRENE SULFONATE ORAL SUSP 15 GM/60ML | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | SYPRINE CAP 250MG | TRIENTINE HCL CAP 250 MG | Tier 3 | X | | X | X |
| Electrolytes/Minerals/Metals/Vitamins | TARON-C DHA CAP | *PRENATAL W/FE FUM-FE POLY-FA-OMEGA 3 CAP 35-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | THRIVITE RX TAB 29-1MG | *PRENATAL VIT W/ IRON CARBONYL-FA TAB 29-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | TOLVAPTAN TAB 15MG | TOLVAPTAN TAB 15 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | TOLVAPTAN TAB 30MG | TOLVAPTAN TAB 30 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | TRICARE TAB PRENATAL | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | TRIENTINE CAP 250MG | TRIENTINE HCL CAP 250 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | TRIENTINE CAP 500MG | TRIENTINE HCL CAP 500 MG | Tier 1 | X | | | X |
| Electrolytes/Minerals/Metals/Vitamins | TRINATAL RX TAB 1 | *PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | TRINATE TAB | *PRENATAL VIT W/ FE FUMARATE-FA TAB 28-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | TRISTART CAP FREE | *PRENAT W/O A W/DHA & FECBN-METHYLF-FA CAP 33-1 MG*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-------------------------------|--|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/ Vitamins | TRISTART DHA CAP | *PRENAT W/O A W/FECBN- METHYLF-FA-DHA CAP 31-0.6- 0.4-200 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | TRISTART ONE CAP 35- 1-215 | *PRENAT W/O A W/FECBN- METHYLF-FA-DHA CAP 35-1-215 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | TRI-VI-FLOR SUS 0.25/ ML | *PED VIT ACD & L-METHYLFOL W/ FL BIPHASIC SUSP 0.25 MG/ ML*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | TRI-VI-FLOR SUS 0.5MG/ ML | *PED VIT ACD & L-METHYLFOLATE W/ FLUORIDE SUSP 0.5 MG/ML*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | TRI-VI-FLORO SUS 0.25/ ML | *PED VIT ACD & L-METHYLFOL W/ FL BIPHASIC SUSP 0.25 MG/ ML*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | TRI-VI-FLORO SUS 0.5MG/ML | *PED VIT ACD & L-METHYLFOL W/ FL BIPHASIC SUSP 0.5 MG/ ML*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | UROCIT-K 10 TAB | POTASSIUM CITRATE TAB ER 10 MEQ (1080 MG) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | UROCIT-K 15 TAB | POTASSIUM CITRATE TAB ER 15 MEQ (1620 MG) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | UROCIT-K 5 TAB | POTASSIUM CITRATE TAB ER 5 MEQ (540 MG) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VELPHORO CHW 500MG | SUCROFERRIC OXYHYDROXIDE CHEW TAB 500 MG | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VELTASSA POW 16.8GM | PATIROMER SORBITE X CALCIUM FOR SUSP PACKET 16.8 GM (BASE EQ) | Tier 3 | | X | | |
| Electrolytes/Minerals/Metals/ Vitamins | VELTASSA POW 25.2GM | PATIROMER SORBITE X CALCIUM FOR SUSP PACKET 25.2 GM (BASE EQ) | Tier 3 | | X | | |
| Electrolytes/Minerals/Metals/ Vitamins | VELTASSA POW 8.4GM | PATIROMER SORBITE X CALCIUM FOR SUSP PACKET 8.4 GM (BASE EQ) | Tier 3 | | X | | |
| Electrolytes/Minerals/Metals/ Vitamins | VINATE DHA CAP 27-1.13 | *PRENAT W/O A W/FEFUM- METHYLFOL-OMEGAS CAP 27-1.13 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VINATE II TAB | *PRENATAL VIT W/ FE BISGLYCINATE CHELATE-FA TAB 29-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VINATE ONE TAB | *PRENATAL VIT W/ FE FUMARATE-FA TAB 60-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VIRT-C DHA CAP | *PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VIRT-NATE CAP DHA | *PRENATAL VIT W/ FE FUM-FA- OMEGA 3 CAP 28-1-200 MG*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/ Vitamins | VIRT-PHOS TAB 250 NEUT | POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155- 852-130MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VIRT-PN DHA CAP | *PRENAT W/O A W/FEFUM- METHFOL-FA-DHA CAP 27-0.6- 0.4-300 MG** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAFOL CAP ULTRA | *PRENAT W/FE POLY- METHYLFOL-FA-DHA CAP 29-0.6- 0.4-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAFOL CHW GUMMIES | *PRENAT VIT W/ FE PHOS-FA- OMEGA CHEW TAB 3.33-0.333- 34.8 MG* | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAFOL FE+ CAP | *PRENAT W/FE POLY- METHYLFOL-FA-DHA CAP 90- 0.6-0.4-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAFOL STRP MIS 1MG | *PRENATAL W/ B6-B12- CHOLECALCIFEROL-FOLIC ACID FILM 1 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAFOL-NANO TAB | *PRENATAL W/O A W/ FEFUM-L METHYLFOL-FA TAB 18-0.6-0.4 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAFOL-OB PAK +DHA | *PRENATAL MV W/FE FUM-FA TAB 65-1 MG & DHA CAP 250 MG PACK * | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAFOL-OB TAB 65-1MG | *PRENATAL VIT W/ FE FUMARATE-FA TAB 65-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAFOL-ONE CAP | *PRENATAL MV W/ FE POLYSAC CMLPX-FA-DHA CAP 29-1-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAMED MD CAP ONE RX | *PRENAT W/O A W/FEFUM- METHFOL-FA-DHA CAP 30-0.6- 0.4-200 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAMEDMD CAP ONE RX | *PRENAT W/O A W/FEFUM- METHFOL-FA-DHA CAP 30-0.6- 0.4-200 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITAPEARL CAP | *PRENAT W/OA W/FEFUM-NA FERED-FA-DHA CAP ER 30-1.4- 200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VITATHELY TAB | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VIVA DHA CAP | *PRENATAL VIT W/ FE FUM-FA- OMEGA 3 CAP 28-1-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | VP-PNV-DHA CAP | *PRENATAL VIT W/ FE FUM-FA- OMEGA 3 CAP 28-1-215.8 MG*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/ Vitamins | WESCAP-C DHA CAP | *PRENATAL W/FE FUM-FE POLY -FA-OMEGA 3 CAP 53.5-38-1 MG*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Electrolytes/Minerals/Metals/Vitamins | WESCAP-PN CAP DHA | *PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | WESNATAL DHA PAK COMPLETE | *PRENAT-FE BIS-FE PROT SUCC-FA-CA TAB & OMEGA 3 CAP 200 PK** | Tier 2 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | WESNATE DHA CAP | *PRENATAL VIT W/ FE FUM-FA-OMEGA 3 CAP 28-1-200 MG*** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | WES-PHOS 250 TAB NEUTRAL | POT PHOS MONOBASIC W/SOD PHOS DI & MONOBAS TAB 155-852-130MG | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | WESTAB PLUS TAB 27-1MG | *PRENATAL VIT W/ FE FUMARATE-FA TAB 27-1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | WESTGEL DHA CAP | *PRENAT W/O A W/FECBN-METHYLF-FA-DHA CAP 31-0.6-0.4-200 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | WHEAT GERM OIL | *WHEAT GERM - OIL*** | Tier 1 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | WILZIN CAP 25MG | ZINC ACETATE CAP 25 MG (ELEMENTAL ZINC) | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ZALVIT TAB 13-1MG | *PRENATAL VIT W/ FE GLUCONATE-FA TAB 13-1 MG*** | Tier 3 | | | X | |
| Electrolytes/Minerals/Metals/Vitamins | ZATEAN-PN CAP DHA | *PRENAT W/O A W/FEFUM-METHFOL-FA-DHA CAP 27-0.6-0.4-300 MG** | Tier 3 | | | | |
| Electrolytes/Minerals/Metals/Vitamins | ZIPHEX TAB 13-1MG | *PRENATAL VIT W/ FE GLUCONATE-FA TAB 13-1 MG*** | Tier 3 | | | X | |
| Enzyme Inhibitors - Chemotherapy Agents | TRUSELTIQ CAP 100MG | INFIGRATINIB PHOS CAP THER PACK 100 MG (100 MG DAILY DOSE) | Tier 3 | | X | | X |
| Enzyme Inhibitors - Chemotherapy Agents | TRUSELTIQ CAP 125MG | INFIGRATINIB PHOS CAP PACK 100 & 25 MG (125 MG DAILY DOSE) | Tier 3 | | X | | X |
| Enzyme Inhibitors - Chemotherapy Agents | TRUSELTIQ CAP 50MG | INFIGRATINIB PHOS CAP THER PACK 2 X 25 MG (50 MG DAILY DOSE) | Tier 3 | | X | | X |
| Enzyme Inhibitors - Chemotherapy Agents | TRUSELTIQ CAP 75MG | INFIGRATINIB PHOS CAP THER PACK 3 X 25 MG (75 MG DAILY DOSE) | Tier 3 | | X | | X |
| Enzyme Replacements/Modifiers - Enzyme Replacements/Modifying Drugs | CITRULLINE TAB EASY 1GM | CITRULLINE TAB ER 1 GM | Tier 3 | | | X | |
| Estrogens - Hormone Replacement/Modifying Drugs | MYFEMBREE TAB | RELUGOLIX-ESTRADIOL-NORETHINDRONE ACETATE TAB 40-1-0.5 MG | Tier 2 | X | X | | |
| Estrogens - Hormone Replacement/Modifying Drugs | NEXTSTELLIS TAB 3-14.2MG | DROSPIRENONE-ESTETROL TAB 3-14.2 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents | ALOSETRON TAB 0.5MG | ALOSETRON HCL TAB 0.5 MG (BASE EQUIV) | Tier 1 | X | X | | |
| Gastrointestinal Agents | ALOSETRON TAB 1MG | ALOSETRON HCL TAB 1 MG (BASE EQUIV) | Tier 1 | X | X | | |
| Gastrointestinal Agents | AMITIZA CAP 24MCG | LUBIPROSTONE CAP 24 MCG | Tier 3 | X | X | | |
| Gastrointestinal Agents | AMITIZA CAP 8MCG | LUBIPROSTONE CAP 8 MCG | Tier 3 | X | X | | |
| Gastrointestinal Agents | BISMTH/METR/ CAP TETRACY | BISMUTH SUBCIT-METRONIDAZOLE-TETRACYCLINE CAP 140-125-125 MG | Tier 1 | | X | | |
| Gastrointestinal Agents | BYLVAY CAP 1200MCG | ODEVIXIBAT CAP 1200 MCG | Tier 3 | X | X | | X |
| Gastrointestinal Agents | BYLVAY CAP 200MCG | ODEVIXIBAT PELLETS CAP SPRINKLE 200 MCG | Tier 3 | X | X | | X |
| Gastrointestinal Agents | BYLVAY CAP 400MCG | ODEVIXIBAT CAP 400 MCG | Tier 3 | X | X | | X |
| Gastrointestinal Agents | BYLVAY CAP 600MCG | ODEVIXIBAT PELLETS CAP SPRINKLE 600 MCG | Tier 3 | X | X | | X |
| Gastrointestinal Agents | CARAFATE SUS 1GM/10ML | SUCRALFATE SUSP 1 GM/10ML | Tier 3 | | | X | |
| Gastrointestinal Agents | CARAFATE TAB 1GM | SUCRALFATE TAB 1 GM | Tier 3 | | | X | |
| Gastrointestinal Agents | CHENODAL TAB 250MG | CHENODIOL TAB 250 MG | Tier 3 | | | X | X |
| Gastrointestinal Agents | CHLORD/CLIDI CAP 5-2.5MG | CHLORDIAZEPOXIDE HCL-CLIDINIUM BROMIDE CAP 5-2.5 MG | Tier 1 | | | | |
| Gastrointestinal Agents | CIMETIDINE SOL 300/5ML | CIMETIDINE HCL SOLN 300 MG/5ML | Tier 1 | | | | |
| Gastrointestinal Agents | CIMETIDINE SOL 400MG | CIMETIDINE HCL SOLN 300 MG/5ML | Tier 1 | | | | |
| Gastrointestinal Agents | CIMETIDINE TAB 200MG | CIMETIDINE TAB 200 MG | Tier 1 | | | | |
| Gastrointestinal Agents | CIMETIDINE TAB 300MG | CIMETIDINE TAB 300 MG | Tier 1 | | | | |
| Gastrointestinal Agents | CIMETIDINE TAB 400MG | CIMETIDINE TAB 400 MG | Tier 1 | | | | |
| Gastrointestinal Agents | CIMETIDINE TAB 800MG | CIMETIDINE TAB 800 MG | Tier 1 | | | | |
| Gastrointestinal Agents | CLENPIQ SOL | SOD PICOSULFATE-MG OX-CITRIC AC SOL 10 MG-3.5 GM-12 GM/160ML | Tier 2 | | | | |
| Gastrointestinal Agents | CLENPIQ SOL | SOD PICOSULFATE-MG OX-CITRIC AC SOL 10 MG-3.5 GM-12 GM/175ML | Tier 2 | | | | |
| Gastrointestinal Agents | CONSTULOSE SOL 10GM/15 | LACTULOSE SOLUTION 10 GM/15ML | Tier 1 | | | | |
| Gastrointestinal Agents | CUVPOSA SOL 1MG/5ML | GLYCOPYRROLATE ORAL SOLN 1 MG/5ML | Tier 3 | | | | |
| Gastrointestinal Agents | CYTOTEC TAB 100MCG | MISOPROSTOL TAB 100 MCG | Tier 3 | | | | |
| Gastrointestinal Agents | CYTOTEC TAB 200MCG | MISOPROSTOL TAB 200 MCG | Tier 3 | | | | |
| Gastrointestinal Agents | DARTISLA ODT TAB 1.7MG | GLYCOPYRROLATE TAB DISINTEGRATING 1.7 MG | Tier 3 | | X | X | |
| Gastrointestinal Agents | DEXILANT CAP 30MG DR | DEXLANSOPRAZOLE CAP DELAYED RELEASE 30 MG | Tier 3 | | X | X | |
| Gastrointestinal Agents | DEXILANT CAP 60MG DR | DEXLANSOPRAZOLE CAP DELAYED RELEASE 60 MG | Tier 3 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents | DEXLANSOPRAZ CAP 30MG | DEXLANSOPRAZOLE CAP DELAYED RELEASE 30 MG | Tier 1 | | X | X | |
| Gastrointestinal Agents | DEXLANSOPRAZ CAP 30MG DR | DEXLANSOPRAZOLE CAP DELAYED RELEASE 30 MG | Tier 1 | | X | X | |
| Gastrointestinal Agents | DEXLANSOPRAZ CAP 60MG DR | DEXLANSOPRAZOLE CAP DELAYED RELEASE 60 MG | Tier 1 | | X | X | |
| Gastrointestinal Agents | DICYCLOMINE CAP 10MG | DICYCLOMINE HCL CAP 10 MG | Tier 1 | | | | |
| Gastrointestinal Agents | DICYCLOMINE SOL 10MG/5ML | DICYCLOMINE HCL ORAL SOLN 10 MG/5ML | Tier 1 | | | | |
| Gastrointestinal Agents | DICYCLOMINE TAB 20MG | DICYCLOMINE HCL TAB 20 MG | Tier 1 | | | | |
| Gastrointestinal Agents | DIPHEN/ATROP LIQ 2.5/5 | DIPHENOXYLATE W/ ATROPINE LIQ 2.5-0.025 MG/5ML | Tier 1 | | | | |
| Gastrointestinal Agents | DIPHEN/ATROP TAB 2.5MG | DIPHENOXYLATE W/ ATROPINE TAB 2.5-0.025 MG | Tier 1 | | | | |
| Gastrointestinal Agents | ENULOSE SOL 10GM/15 | LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML | Tier 1 | | | | |
| Gastrointestinal Agents | ESOMEPRAZOLE GRA 10MG DR | ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 10 MG | Tier 1 | | X | | |
| Gastrointestinal Agents | ESOMEPRAZOLE GRA 20MG DR | ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 20 MG | Tier 1 | | X | | |
| Gastrointestinal Agents | ESOMEPRAZOLE GRA 40MG DR | ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 40 MG | Tier 1 | | X | | |
| Gastrointestinal Agents | FAMOTIDINE SUS 40MG/5ML | FAMOTIDINE FOR SUSP 40 MG/5ML | Tier 1 | | | | |
| Gastrointestinal Agents | FIRST PANTPR SUS 4MG/ML | *PANTOPRAZOLE SODIUM SUSP 4 MG/ML (COMPOUND KIT)** | Tier 3 | | | | |
| Gastrointestinal Agents | FIRST-OMEPRASUS 2MG/ML | *OMEPRAZOLE SUSP 2 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Gastrointestinal Agents | GATTEX KIT 5MG | TEDUGLUTIDE (RDNA) FOR INJ KIT 5 MG | Tier 2 | X | X | | X |
| Gastrointestinal Agents | GAVILYTE-C SOL | PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 240 GM | HCR | | | | |
| Gastrointestinal Agents | GAVILYTE-G SOL | PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM | HCR | | | | |
| Gastrointestinal Agents | GENERLAC SOL 10GM/15 | LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML | Tier 1 | | | | |
| Gastrointestinal Agents | GLYCATATE TAB 1.5MG | GLYCOPYRROLATE TAB 1.5 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | GLYCOPYRROL TAB 1MG | GLYCOPYRROLATE TAB 1 MG | Tier 1 | | | | |
| Gastrointestinal Agents | GLYCOPYRROL TAB 2MG | GLYCOPYRROLATE TAB 2 MG | Tier 1 | | | | |
| Gastrointestinal Agents | GLYCOPYRROLA SOL 1MG/5ML | GLYCOPYRROLATE ORAL SOLN 1 MG/5ML | Tier 1 | | | | |
| Gastrointestinal Agents | GLYCOPYRROLA TAB 1.5MG | GLYCOPYRROLATE TAB 1.5 MG | Tier 3 | | | X | |

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|-------------------------|----------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents | GOLYTELY SOL | PEG 3350-KCL-NA BICARB-NA CL-NA SULFATE FOR SOLN 236 GM | Tier 3 | | | | |
| Gastrointestinal Agents | HELIDAC MIS THERAPY | METRONIDAZ TAB-TETRACYC CAP-BIS SUBSAL CHEW TAB THERAPY PACK | Tier 3 | | | X | |
| Gastrointestinal Agents | IBSRELA TAB 50MG | TENAPANOR HCL TAB 50 MG | Tier 3 | | X | X | |
| Gastrointestinal Agents | KONVOMEK SUS 2-84/ML | OMEPRazole-SODIUM BICARBONATE FOR ORAL SUSP 2-84 MG/ML | Tier 3 | | | X | |
| Gastrointestinal Agents | KRISTALOSE PAK 10GM | LACTULOSE ORAL CRYSTAL PACKET 10 GM | Tier 3 | | | | |
| Gastrointestinal Agents | KRISTALOSE PAK 20GM | LACTULOSE ORAL CRYSTAL PACKET 20 GM | Tier 3 | | | | |
| Gastrointestinal Agents | LACTULOSE PAK 10GM | LACTULOSE ORAL CRYSTAL PACKET 10 GM | Tier 1 | | | X | |
| Gastrointestinal Agents | LACTULOSE SOL 10GM/15 | LACTULOSE SOLUTION 10 GM/15ML | Tier 1 | | | | |
| Gastrointestinal Agents | LACTULOSE SOL 10GM/15 | LACTULOSE (ENCEPHALOPATHY) SOLUTION 10 GM/15ML | Tier 1 | | | | |
| Gastrointestinal Agents | LACTULOSE SOL 20/30ML | LACTULOSE SOLUTION 10 GM/15ML | Tier 1 | | | | |
| Gastrointestinal Agents | LACTULOSE SOL 20GM/30 | LACTULOSE SOLUTION 10 GM/15ML | Tier 1 | | | | |
| Gastrointestinal Agents | LANSOPR/AMOX PAK / CLARITH | AMOXICIL CAP & CLARITHRO TAB & LANSOPRAZ CAP DR 500 & 500 & 30MG | Tier 1 | | | | |
| Gastrointestinal Agents | LANSOPRAZOLE SUS 3MG/ML | *LANSOPRAZOLE SUSP 3 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Gastrointestinal Agents | LANSOPRAZOLE TAB 15MG ODT | LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 15 MG | Tier 1 | | X | | |
| Gastrointestinal Agents | LANSOPRAZOLE TAB 30MG | LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 30 MG | Tier 1 | | X | | |
| Gastrointestinal Agents | LANSOPRAZOLE TAB 30MG ODT | LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 30 MG | Tier 1 | | X | | |
| Gastrointestinal Agents | LIBRAX CAP 5-2.5MG | CHLORDIAZEPOXIDE HCL-CLIDINIUM BROMIDE CAP 5-2.5 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | LINZESS CAP 145MCG | LINACLOTIDE CAP 145 MCG | Tier 2 | X | X | | |
| Gastrointestinal Agents | LINZESS CAP 290MCG | LINACLOTIDE CAP 290 MCG | Tier 2 | X | X | | |
| Gastrointestinal Agents | LINZESS CAP 72MCG | LINACLOTIDE CAP 72 MCG | Tier 2 | X | X | | |
| Gastrointestinal Agents | LOMOTIL TAB 2.5MG | DIPHENOXYLATE W/ ATROPINE TAB 2.5-0.025 MG | Tier 3 | | | | |
| Gastrointestinal Agents | LOTRONEX TAB 0.5MG | ALOSETRON HCL TAB 0.5 MG (BASE EQUIV) | Tier 3 | X | X | X | |

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|-------------------------|------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents | LOTROXON TAB 1MG | ALOSETRON HCL TAB 1 MG (BASE EQUIV) | Tier 3 | X | X | X | |
| Gastrointestinal Agents | LUBIPROSTONE CAP 24MCG | LUBIPROSTONE CAP 24 MCG | Tier 1 | X | X | | |
| Gastrointestinal Agents | LUBIPROSTONE CAP 8MCG | LUBIPROSTONE CAP 8 MCG | Tier 1 | X | X | | |
| Gastrointestinal Agents | METHSCOPOLAM TAB 2.5MG | METHSCOPOLAMINE BROMIDE TAB 2.5 MG | Tier 1 | | | | |
| Gastrointestinal Agents | METHSCOPOLAM TAB 5MG | METHSCOPOLAMINE BROMIDE TAB 5 MG | Tier 1 | | | | |
| Gastrointestinal Agents | MISOPROSTOL TAB 100MCG | MISOPROSTOL TAB 100 MCG | Tier 1 | | | | |
| Gastrointestinal Agents | MISOPROSTOL TAB 200MCG | MISOPROSTOL TAB 200 MCG | Tier 1 | | | | |
| Gastrointestinal Agents | MOTTEGRITY TAB 1MG | PRUCALOPRIDE SUCCINATE TAB 1 MG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Gastrointestinal Agents | MOTTEGRITY TAB 2MG | PRUCALOPRIDE SUCCINATE TAB 2 MG (BASE EQUIVALENT) | Tier 3 | X | X | | |
| Gastrointestinal Agents | MOTOFEN TAB 1-0.025 | DIFENOXIN W/ ATROPINE TAB 1-0.025 MG | Tier 3 | | | | |
| Gastrointestinal Agents | MOVANTIK TAB 12.5MG | NALOXEGOL OXALATE TAB 12.5 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | |
| Gastrointestinal Agents | MOVANTIK TAB 25MG | NALOXEGOL OXALATE TAB 25 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | |
| Gastrointestinal Agents | MOVIPREP SOL | PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM | Tier 2 | | | | |
| Gastrointestinal Agents | MYALEPT INJ 11.3MG | METRELEPTIN FOR SUBCUTANEOUS INJ 11.3 MG | Tier 3 | X | X | | X |
| Gastrointestinal Agents | MYTESI TAB 125MG | CROFELEMER TAB DELAYED RELEASE 125 MG | Tier 3 | X | X | | |
| Gastrointestinal Agents | NEXIUM GRA 10MG DR | ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 10 MG | Tier 3 | | X | | |
| Gastrointestinal Agents | NEXIUM GRA 2.5MG DR | ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACK 2.5 MG | Tier 3 | | X | | |
| Gastrointestinal Agents | NEXIUM GRA 20MG DR | ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 20 MG | Tier 3 | | X | | |
| Gastrointestinal Agents | NEXIUM GRA 40MG DR | ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 40 MG | Tier 3 | | X | | |
| Gastrointestinal Agents | NEXIUM GRA 5MG DR | ESOMEPRAZOLE MAGNESIUM FOR DELAYED RELEASE SUSP PACKET 5 MG | Tier 3 | | X | | |
| Gastrointestinal Agents | NIZATIDINE SOL 15MG/ML | NIZATIDINE ORAL SOLN 15 MG/ML | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents | NULYTELY SOL LMN/LIME | PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM | Tier 3 | | | | |
| Gastrointestinal Agents | OCALIVA TAB 10MG | OBETICHOLIC ACID TAB 10 MG | Tier 3 | X | X | X | X |
| Gastrointestinal Agents | OCALIVA TAB 5MG | OBETICHOLIC ACID TAB 5 MG | Tier 3 | X | X | X | X |
| Gastrointestinal Agents | OMECLAMOX- MIS PAK | AMOXICILLIN CAP-CLARITHRO TAB W/ OMEPRAZ CAP DR THERAPY PACK | Tier 3 | | X | | |
| Gastrointestinal Agents | OMEPRA/BICAR POW 20-1680 | OMEPRAZOLE-SODIUM BICARBONATE POWD PACK FOR SUSP 20-1680 MG | Tier 1 | | X | X | |
| Gastrointestinal Agents | OMEPRA/BICAR POW 40-1680 | OMEPRAZOLE-SODIUM BICARBONATE POWD PACK FOR SUSP 40-1680 MG | Tier 1 | | X | X | |
| Gastrointestinal Agents | OMEPRAZOLE CAP 10MG | OMEPRAZOLE CAP DELAYED RELEASE 10 MG | Tier 1 | | | | |
| Gastrointestinal Agents | OMEPRAZOLE CAP 20MG | OMEPRAZOLE CAP DELAYED RELEASE 20 MG | Tier 1 | | | | |
| Gastrointestinal Agents | OMEPRAZOLE CAP 40MG | OMEPRAZOLE CAP DELAYED RELEASE 40 MG | Tier 1 | | | | |
| Gastrointestinal Agents | OMEPRAZOLE + SUS SYRSPEND | *OMEPRAZOLE SUSP 2 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Gastrointestinal Agents | OPIUM TIN 10MG/ML | OPIUM TINCTURE 1% (10 MG/ML) (MORPHINE EQUIV) | Tier 1 | | | | |
| Gastrointestinal Agents | OSMOPREP TAB 1.5GM | SOD PHOS MONO-SOD PHOS DI TABS 1.102-0.398 GM(1.5GM NA PHOS) | Tier 3 | | | | |
| Gastrointestinal Agents | PANTOPRAZOLE TAB 20MG | PANTOPRAZOLE SODIUM EC TAB 20 MG (BASE EQUIV) | Tier 1 | | | | |
| Gastrointestinal Agents | PANTOPRAZOLE TAB 40MG | PANTOPRAZOLE SODIUM EC TAB 40 MG (BASE EQUIV) | Tier 1 | | | | |
| Gastrointestinal Agents | PEG/NASUL/C/ SOL NACL/POT | PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 100 GM | Tier 1 | | | | |
| Gastrointestinal Agents | PEG-3350 SOL ELECTROL | PEG 3350-KCL-NA BICARB-NACL-NA SULFATE FOR SOLN 236 GM | HCR | | | | |
| Gastrointestinal Agents | PEG-3350/KCL SOL / SODIUM | PEG 3350-KCL-SOD BICARB-NACL FOR SOLN 420 GM | HCR | | | | |
| Gastrointestinal Agents | PEG-PREP KIT | BISACODYL TAB & PEG 3350-KCL-SOD BICARB-NACL FOR SOLN KIT | Tier 3 | | | | |
| Gastrointestinal Agents | PLENVU SOL | PEG 3350-KCL-NACL-NA SULFATE-NA ASCORBATE-C FOR SOLN 140 GM | Tier 2 | | | | |
| Gastrointestinal Agents | PREVACID TAB 15MG STB | LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 15 MG | Tier 3 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents | PREVACID TAB 30MG STB | LANSOPRAZOLE TAB DELAYED RELEASE ORALLY DISINTEGRATING 30 MG | Tier 3 | | X | X | |
| Gastrointestinal Agents | PROTONIX TAB 20MG | PANTOPRAZOLE SODIUM EC TAB 20 MG (BASE EQUIV) | Tier 3 | | | X | |
| Gastrointestinal Agents | PROTONIX TAB 40MG | PANTOPRAZOLE SODIUM EC TAB 40 MG (BASE EQUIV) | Tier 3 | | | X | |
| Gastrointestinal Agents | PYLERA CAP | BISMUTH SUBCIT-METRONIDAZOLE-TETRACYCLINE CAP 140-125-125 MG | Tier 3 | | X | | |
| Gastrointestinal Agents | RABEPRAZOLE TAB 20MG | RABEPRAZOLE SODIUM EC TAB 20 MG | Tier 1 | | X | | |
| Gastrointestinal Agents | RELISTOR INJ 12/0.6ML | METHYLNALTREXONE BROMIDE INJ 12 MG/0.6ML (20 MG/ML) | Tier 3 | | X | | |
| Gastrointestinal Agents | RELISTOR INJ 8/0.4ML | METHYLNALTREXONE BROMIDE INJ 8 MG/0.4ML (20 MG/ML) | Tier 3 | | X | | |
| Gastrointestinal Agents | RELISTOR TAB 150MG | METHYLNALTREXONE BROMIDE TAB 150 MG | Tier 3 | | X | X | |
| Gastrointestinal Agents | RELTONE CAP 200MG | URSODIOL CAP 200 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | RELTONE CAP 400MG | URSODIOL CAP 400 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | ROBINUL TAB 1MG | GLYCOPYRROLATE TAB 1 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | ROBINUL FORT TAB 2MG | GLYCOPYRROLATE TAB 2 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | SODIUM/POTAS SOL MAGNESIU | SOD SULFATE-POT SULF-MG SULF ORAL SOL 17.5-3.13-1.6 GM/177ML | Tier 1 | | | | |
| Gastrointestinal Agents | SUCRALFATE SUS 1GM/10ML | SUCRALFATE SUSP 1 GM/10ML | Tier 1 | | | | |
| Gastrointestinal Agents | SUCRALFATE TAB 1GM | SUCRALFATE TAB 1 GM | Tier 1 | | | | |
| Gastrointestinal Agents | SUPREP BOWEL SOL PREP KIT | SOD SULFATE-POT SULF-MG SULF ORAL SOL 17.5-3.13-1.6 GM/177ML | Tier 3 | | | | |
| Gastrointestinal Agents | SYMPROIC TAB 0.2MG | NALDEMEDINE TOSYLATE TAB 0.2 MG (BASE EQUIVALENT) | Tier 2 | X | X | | |
| Gastrointestinal Agents | TALICIA CAP | AMOXICILLIN-RIFABUTIN-OMEPRAZOLE CAP DR 250-12.5-10 MG | Tier 3 | | X | X | |
| Gastrointestinal Agents | TRULANCE TAB 3MG | PLECANATIDE TAB 3 MG | Tier 3 | X | X | X | |
| Gastrointestinal Agents | URSO 250 TAB 250MG | URSODIOL TAB 250 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | URSO FORTE TAB 500MG | URSODIOL TAB 500 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | URSODIOL CAP 200MG | URSODIOL CAP 200 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | URSODIOL CAP 300MG | URSODIOL CAP 300 MG | Tier 1 | | | | |
| Gastrointestinal Agents | URSODIOL CAP 400MG | URSODIOL CAP 400 MG | Tier 3 | | | X | |
| Gastrointestinal Agents | URSODIOL SUS 30MG/ML | *URSODIOL SUSP 30 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Gastrointestinal Agents | URSODIOL TAB 250MG | URSODIOL TAB 250 MG | Tier 1 | | | | |
| Gastrointestinal Agents | URSODIOL TAB 500MG | URSODIOL TAB 500 MG | Tier 1 | | | | |
| Gastrointestinal Agents | VIBERZI TAB 100MG | ELUXADOLINE TAB 100 MG | Tier 3 | | X | | |

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|--|-------------------------|---|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents | VIBERZI TAB 75MG | ELUXADOLINE TAB 75 MG | Tier 3 | | X | | |
| Gastrointestinal Agents | VOQUEZNA PAK TRIP PK | AMOXICILLIN CAP & CLARITHROMYCIN TAB & VONOPRAZAN TAB PACK | Tier 3 | X | X | | |
| Gastrointestinal Agents | XERMELO TAB 250MG | TELOTTRISTAT ETHYL TAB 250 MG (AS TELOTTRISTAT ETIPRATE) | Tier 3 | X | X | | X |
| Gastrointestinal Agents | ZEGERID POW 20-1680 | OMEPRazole-SODIUM BICARBONATE POWD PACK FOR SUSP 20-1680 MG | Tier 3 | | X | X | |
| Gastrointestinal Agents | ZEGERID POW 40-1680 | OMEPRazole-SODIUM BICARBONATE POWD PACK FOR SUSP 40-1680 MG | Tier 3 | | X | X | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | ALVIMOPAN CAP 12MG | ALVIMOPAN CAP 12 MG | Tier 1 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | BASE A PEG POW 1450 | POLYETHYLENE GLYCOL 1450 POWDER | Tier 3 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | BELLA/OPIUM SUP 16.2-30 | BELLADONNA ALKALOIDS & OPIUM SUPPOS 16.2-30 MG | Tier 1 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | BELLA/OPIUM SUP 16.2-60 | BELLADONNA ALKALOIDS & OPIUM SUPPOS 16.2-60 MG | Tier 1 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | CITROMA SOL LEMONY | MAGNESIUM CITRATE SOLN | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | CLEARLAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | CVS PURELAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | DAILY FIBER POW 43% | PSYLLIUM POWDER 43% | Tier 1 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | ENTEREG CAP 12MG | ALVIMOPAN CAP 12 MG | Tier 3 | | | | |

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|---|-------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | EQ CLEARLAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | EQL CLEARLAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | FT CLEARLAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | FT MAG CITRA SOL CHERRY | MAGNESIUM CITRATE SOLN | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | FT MAG CITRA SOL LEMON | MAGNESIUM CITRATE SOLN | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | GAVILAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | GENTLELAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | GLYCOLAX POW 3350 NF | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | GNP CLEARLAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | GNP MAG CITR SOL CHERRY | MAGNESIUM CITRATE SOLN | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | HM CLEARLAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | HM FIBER POW 43% | PSYLLIUM POWDER 43% | Tier 1 | | | | |

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|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | LAXACLEAR POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | MAG CITRATE SOL CHERRY | MAGNESIUM CITRATE SOLN | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | MAG CITRATE SOL GRAPE | MAGNESIUM CITRATE SOLN | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | MAG CITRATE SOL LEMON | MAGNESIUM CITRATE SOLN | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | MINERAL OIL HEAVY | MINERAL OIL | Tier 1 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | MM CLEARLAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | NATURA-LAX POW 3350 NF | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | PEG 3350 POW | POLYETHYLENE GLYCOL 3350 POWDER | Tier 1 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | PEG 3350 POW | POLYETHYLENE GLYCOL 3350 POWDER | Tier 3 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | PEG3350 POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | POLY GLYCOL LIQ 1450 | POLYETHYLENE GLYCOL 1450 LIQUID | Tier 3 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | POLYETH GLYC POW 1450 | POLYETHYLENE GLYCOL 1450 POWDER | Tier 3 | | | | |

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|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | POLYETH GLYC POW 3350 | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | POLYETH GLYC POW 3350 NF | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | RA LAXATIVE POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | SM CLEARLAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | SM MAGNESIUM SOL CHERRY | MAGNESIUM CITRATE SOLN | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | SMOOTH LAX POW | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | SMOOTH LAX POW 3350 | POLYETHYLENE GLYCOL 3350 ORAL POWDER 17 GM/SCOOP | HCR | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | SODIUM POW BICARBON | *SODIUM BICARBONATE POWDER** | Tier 1 | | | | |
| Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions | WAL-MUCIL POW 43% | PSYLLIUM POWDER 43% | Tier 1 | | | | |
| Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment | VOXZOGO INJ 0.4MG | VOSORITIDE FOR SUBCUTANEOUS INJ 0.4 MG | Tier 3 | X | X | | X |
| Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment | VOXZOGO INJ 0.56MG | VOSORITIDE FOR SUBCUTANEOUS INJ 0.56 MG | Tier 3 | X | X | | X |
| Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment | VOXZOGO INJ 1.2MG | VOSORITIDE FOR SUBCUTANEOUS INJ 1.2 MG | Tier 3 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | BETAINE ANHY POW | *BETAINE POWDER FOR ORAL SOLUTION*** | Tier 1 | | | | X |

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|--|--------------------------|--|------------|------|--------------|--------------|-----------|
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | BUPHENYL POW | SODIUM PHENYLBUTYRATE ORAL POWDER 3 GM/ TEASPOONFUL | Tier 3 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | BUPHENYL TAB 500MG | SODIUM PHENYLBUTYRATE TAB 500 MG | Tier 3 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CARNITOR SOL 1GM/10ML | LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%) | Tier 3 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CARNITOR TAB 330MG | LEVOCARNITINE TAB 330 MG | Tier 3 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CARNITOR SF SOL 1GM/10ML | LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%) | Tier 3 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CERDELGA CAP 84MG | ELIGLUSTAT TARTRATE CAP 84 MG (BASE EQUIVALENT) | Tier 2 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CHOLBAM CAP 250MG | CHOLIC ACID CAP 250 MG | Tier 2 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CHOLBAM CAP 50MG | CHOLIC ACID CAP 50 MG | Tier 2 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CREON CAP 12000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 12000-38000-60000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CREON CAP 24000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 24000-76000-120000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CREON CAP 3000UNIT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 3000-9500-15000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CREON CAP 36000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 36000-114000-180000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CREON CAP 6000UNIT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 6000-19000-30000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CROMOLYN SOD CON 100/5ML | CROMOLYN SODIUM ORAL CONC 100 MG/5ML | Tier 1 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CYSTADANE POW | *BETAINE POWDER FOR ORAL SOLUTION*** | Tier 3 | | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CYSTAGON CAP 150MG | CYSTEAMINE BITARTRATE CAP 150 MG | Tier 2 | | | | X |

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|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | CYSTAGON CAP 50MG | CYSTEAMINE BITARTRATE CAP 50 MG | Tier 2 | | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | DICHLORPHENA TAB 50MG | DICHLORPHENAMIDE TAB 50 MG | Tier 1 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | EVRYSDI SOL | RISDIPLAM FOR SOLN 0.75 MG/ML | Tier 2 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | GALAFOLD CAP 123MG | MIGALASTAT HCL CAP 123 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | GASTROCROM CON 100/5ML | CROMOLYN SODIUM ORAL CONC 100 MG/5ML | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | JAVYGTOR PAK 100MG | SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG | Tier 3 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | JAVYGTOR POW 500MG | SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG | Tier 3 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | JAVYGTOR TAB 100MG | SAPROPTERIN DIHYDROCHLORIDE TAB 100 MG | Tier 3 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | KEVEYIS TAB 50MG | DICHLORPHENAMIDE TAB 50 MG | Tier 3 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | KUVAN POW 100MG | SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | KUVAN POW 500MG | SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | KUVAN TAB 100MG | SAPROPTERIN DIHYDROCHLORIDE TAB 100 MG | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | LEVOCARNITIN SOL 1GM/10ML | LEVOCARNITINE ORAL SOLN 1 GM/10ML (10%) | Tier 1 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | LEVOCARNITIN TAB 330MG | LEVOCARNITINE TAB 330 MG | Tier 1 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | MIGLUSTAT CAP 100MG | MIGLUSTAT CAP 100 MG | Tier 1 | | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | NITISINONE CAP 10MG | NITISINONE CAP 10 MG | Tier 1 | X | | X | X |

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|--|---------------------|--|------------|------|--------------|--------------|-----------|
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | NITISINONE CAP 20MG | NITISINONE CAP 20 MG | Tier 1 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | NITISINONE CAP 2MG | NITISINONE CAP 2 MG | Tier 1 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | NITISINONE CAP 5MG | NITISINONE CAP 5 MG | Tier 1 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | NITYR TAB 10MG | NITISINONE TAB 10 MG | Tier 3 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | NITYR TAB 2MG | NITISINONE TAB 2 MG | Tier 3 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | NITYR TAB 5MG | NITISINONE TAB 5 MG | Tier 3 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | OLPRUVA PAK 2GM | SODIUM PHENYLBUTYRATE PACKET FOR SUSP 2 GM THERAPY PACK | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | OLPRUVA PAK 3GM | SODIUM PHENYLBUTYRATE PACKET FOR SUSP 3 GM THERAPY PACK | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | OLPRUVA PAK 4 GM | SODIUM PHENYLBUTYRATE PACKET FOR SUSP 4 GM THERAPY PACK | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | OLPRUVA PAK 5GM | SODIUM PHENYLBUTYRATE PACKET FOR SUSP 5 GM THERAPY PACK | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | OLPRUVA PAK 6.67GM | SODIUM PHENYLBUTYRATE PACKET FOR SUSP 6.67 GM THERAPY PACK | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | OLPRUVA PAK 6GM | SODIUM PHENYLBUTYRATE PACKET FOR SUSP 6 GM THERAPY PACK | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ORFADIN CAP 10MG | NITISINONE CAP 10 MG | Tier 1 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ORFADIN CAP 20MG | NITISINONE CAP 20 MG | Tier 1 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ORFADIN CAP 2MG | NITISINONE CAP 2 MG | Tier 1 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ORFADIN CAP 5MG | NITISINONE CAP 5 MG | Tier 1 | X | | | X |

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|--|------------------------|---|------------|------|--------------|--------------|-----------|
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ORFADIN SUS 4MG/ML | NITISINONE SUSP 4 MG/ML | Tier 2 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ORMALVI TAB 50MG | DICHLORPHENAMIDE TAB 50 MG | Tier 3 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PALYNZIQ INJ 10/0.5ML | PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 10 MG/0.5ML | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PALYNZIQ INJ 2.5/0.5 | PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 2.5 MG/0.5ML | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PALYNZIQ INJ 20MG/ML | PEGVALIASE-PQPZ SUBCUTANEOUS SOLN PREF SYRINGE 20 MG/ML | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PANCREAZE CAP 10500UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 10500-35500-61500 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PANCREAZE CAP 16800UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 16800-56800-98400 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PANCREAZE CAP 21000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 21000-54700-83900 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PANCREAZE CAP 2600UNIT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 2600-8800-15200 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PANCREAZE CAP 37000 | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 37000-97300-149900 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PANCREAZE CAP 4200UNIT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 4200-14200-24600 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PERTZYE CAP 16000U | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 16000-57500-60500 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PERTZYE CAP 24000U | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 24000-86250-90750 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PERTZYE CAP 4000UNIT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 4000-14375-15125 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PERTZYE CAP 8000UNIT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 8000-28750-30250 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PHEBURANE MIS 483/GM | SODIUM PHENYLBUTYRATE ORAL PELLETS 483 MG/GM | Tier 3 | X | X | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|--------------------------|--|------------|------|--------------|--------------|-----------|
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PHENYL BUTYRA POW SODIUM | SODIUM PHENYL BUTYRATE ORAL POWDER 3 GM/ TEASPOONFUL | Tier 1 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PROCYSBI CAP 25MG | CYSTEAMINE BITARTRATE CAP DELAYED RELEASE 25 MG (BASE EQUIV) | Tier 3 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PROCYSBI CAP 75MG | CYSTEAMINE BITARTRATE CAP DELAYED RELEASE 75 MG (BASE EQUIV) | Tier 3 | X | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PROCYSBI GRA 300MG | CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 300 MG | Tier 3 | | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | PROCYSBI GRA 75MG | CYSTEAMINE BITARTRATE DELAYED RELEASE GRANULES PACKET 75 MG | Tier 3 | | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | RAVICTI LIQ 1.1GM/ML | GLYCEROL PHENYL BUTYRATE LIQUID 1.1 GM/ML | Tier 3 | X | X | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | SAPROPTERIN POW 100MG | SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 100 MG | Tier 1 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | SAPROPTERIN POW 500MG | SAPROPTERIN DIHYDROCHLORIDE POWDER PACKET 500 MG | Tier 1 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | SAPROPTERIN TAB 100MG | SAPROPTERIN DIHYDROCHLORIDE TAB 100 MG | Tier 1 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | SODIUM PHENY TAB 500MG | SODIUM PHENYL BUTYRATE TAB 500 MG | Tier 1 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | STRENSIQ INJ 18/0.45 | ASFOTASE ALFA SUBCUTANEOUS INJ 18 MG/0.45ML | Tier 2 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | STRENSIQ INJ 28/0.7ML | ASFOTASE ALFA SUBCUTANEOUS INJ 28 MG/0.7ML | Tier 2 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | STRENSIQ INJ 40MG/ML | ASFOTASE ALFA SUBCUTANEOUS INJ 40 MG/ML | Tier 2 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | STRENSIQ INJ 80/0.8ML | ASFOTASE ALFA SUBCUTANEOUS INJ 80 MG/0.8ML | Tier 2 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | SUCRAID SOL 8500/ML | SACROSIDASE SOLN 8500 UNIT/ ML | Tier 2 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | TEGSEDI INJ 284/1.5 | INOTERSEN SOD SUBCUTANEOUS PREF SYR 284 MG/1.5ML (BASE EQ) | Tier 2 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-----------------------|--|------------|------|--------------|--------------|-----------|
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | VIOKACE TAB 10440 | PANCRELIPASE (LIP-PROT-AMYL) TAB 10440-39150-39150 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | VIOKACE TAB 20880 | PANCRELIPASE (LIP-PROT-AMYL) TAB 20880-78300-78300 UNIT | Tier 3 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | VYNDAMAX CAP 61MG | TAFAMIDIS CAP 61 MG | Tier 2 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | VYNDAQEL CAP 20MG | TAFAMIDIS MEGLUMINE (CARDIAC) CAP 20 MG | Tier 2 | X | X | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | XURIDEN POW 2GM | URIDINE TRIACETATE ORAL GRANULES PACKET 2 GM | Tier 2 | X | | | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZAVESCA CAP 100MG | MIGLUSTAT CAP 100 MG | Tier 3 | | | X | X |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZENPEP CAP 10000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 10000-32000-42000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZENPEP CAP 15000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 15000-47000-63000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZENPEP CAP 20000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 20000-63000-84000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZENPEP CAP 25000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 25000-79000-105000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZENPEP CAP 3000UNIT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 3000-10000-14000 UNIT | Tier 2 | | | X | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZENPEP CAP 40000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 40000-126000-168000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZENPEP CAP 5000UNIT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 5000-17000-24000 UNIT | Tier 2 | | | | |
| Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment | ZENPEP CAP 60000UNT | PANCRELIPASE (LIP-PROT-AMYL) DR CAP 60000-189600-252600 UNIT | Tier 2 | | | X | |
| Genitourinary Agents | ALFUZOSIN TAB 10MG ER | ALFUZOSIN HCL TAB ER 24HR 10 MG | Tier 1 | | | | |
| Genitourinary Agents | AVODART CAP 0.5MG | DUTASTERIDE CAP 0.5 MG | Tier 3 | | | X | |
| Genitourinary Agents | BETHANECHOL TAB 10MG | BETHANECHOL CHLORIDE TAB 10 MG | Tier 1 | | | | |
| Genitourinary Agents | BETHANECHOL TAB 25MG | BETHANECHOL CHLORIDE TAB 25 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Genitourinary Agents | BETHANECHOL TAB 50MG | BETHANECHOL CHLORIDE TAB 50 MG | Tier 1 | | | | |
| Genitourinary Agents | BETHANECHOL TAB 5MG | BETHANECHOL CHLORIDE TAB 5 MG | Tier 1 | | | | |
| Genitourinary Agents | CARDURA XL TAB 4MG | DOXAZOSIN MESYLATE TAB ER 24 HR 4 MG (BASE EQUIV) | Tier 3 | | | | |
| Genitourinary Agents | CARDURA XL TAB 8MG | DOXAZOSIN MESYLATE TAB ER 24 HR 8 MG (BASE EQUIV) | Tier 3 | | | | |
| Genitourinary Agents | CIALIS TAB 10MG | TADALAFIL TAB 10 MG | Tier 3 | | X | X | |
| Genitourinary Agents | CIALIS TAB 2.5MG | TADALAFIL TAB 2.5 MG | Tier 3 | | X | X | |
| Genitourinary Agents | CIALIS TAB 20MG | TADALAFIL TAB 20 MG | Tier 3 | | X | X | |
| Genitourinary Agents | CIALIS TAB 5MG | TADALAFIL TAB 5 MG | Tier 3 | | X | X | |
| Genitourinary Agents | CUPRIMINE CAP 250MG | PENICILLAMINE CAP 250 MG | Tier 3 | | | X | X |
| Genitourinary Agents | DEPEN TITRA TAB 250MG | PENICILLAMINE TAB 250 MG | Tier 2 | | | | X |
| Genitourinary Agents | DETROL LA CAP 2MG | TOLTERODINE TARTRATE CAP ER 24HR 2 MG | Tier 3 | | | X | |
| Genitourinary Agents | DETROL LA CAP 4MG | TOLTERODINE TARTRATE CAP ER 24HR 4 MG | Tier 3 | | | X | |
| Genitourinary Agents | DITROPAN XL TAB 10MG | OXYBUTYNIN CHLORIDE TAB ER 24HR 10 MG | Tier 3 | | | X | |
| Genitourinary Agents | DITROPAN XL TAB 5MG | OXYBUTYNIN CHLORIDE TAB ER 24HR 5 MG | Tier 3 | | | X | |
| Genitourinary Agents | DUTAST/TAMSU CAP 0.5-0.4 | DUTASTERIDE-TAMSULOSIN HCL CAP 0.5-0.4 MG | Tier 1 | | | | |
| Genitourinary Agents | DUTASTERIDE CAP 0.5MG | DUTASTERIDE CAP 0.5 MG | Tier 1 | | | | |
| Genitourinary Agents | ELMIRON CAP 100MG | PENTOSAN POLYSULFATE SODIUM CAPS 100 MG | Tier 3 | | | | |
| Genitourinary Agents | FESOTERODINE TAB 4MG ER | FESOTERODINE FUMARATE TAB ER 24HR 4 MG | Tier 1 | | | X | |
| Genitourinary Agents | FESOTERODINE TAB 8MG ER | FESOTERODINE FUMARATE TAB ER 24HR 8 MG | Tier 1 | | | X | |
| Genitourinary Agents | FINASTERIDE TAB 5MG | FINASTERIDE TAB 5 MG | Tier 1 | | | | |
| Genitourinary Agents | FLAVOXATE TAB 100MG | FLAVOXATE HCL TAB 100 MG | Tier 1 | | | | |
| Genitourinary Agents | FLOMAX CAP 0.4MG | TAMSULOSIN HCL CAP 0.4 MG | Tier 3 | | | X | |
| Genitourinary Agents | JALYN CAP | DUTASTERIDE-TAMSULOSIN HCL CAP 0.5-0.4 MG | Tier 3 | | | X | |
| Genitourinary Agents | LITHOSTAT TAB 250MG | ACETOHYDROXAMIC ACID TAB 250 MG | Tier 3 | | | | |
| Genitourinary Agents | MYRBETRIQ SUS 8MG/ML | MIRABEGRON GRANULES FOR ORAL EXTENDED RELEASE SUSP 8 MG/ML | Tier 3 | | | X | |
| Genitourinary Agents | OXYBUTYNIN SOL 5MG/5ML | OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML | Tier 1 | | | | |
| Genitourinary Agents | OXYBUTYNIN TAB 10MG ER | OXYBUTYNIN CHLORIDE TAB ER 24HR 10 MG | Tier 1 | | | | |
| Genitourinary Agents | OXYBUTYNIN TAB 15MG ER | OXYBUTYNIN CHLORIDE TAB ER 24HR 15 MG | Tier 1 | | | | |

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|----------------------|------------------------|---|------------|------|--------------|--------------|-----------|
| Genitourinary Agents | OXYBUTYNIN TAB 2.5MG | OXYBUTYNIN CHLORIDE TAB 2.5 MG | Tier 1 | | | | |
| Genitourinary Agents | OXYBUTYNIN TAB 5MG | OXYBUTYNIN CHLORIDE TAB 5 MG | Tier 1 | | | | |
| Genitourinary Agents | OXYBUTYNIN TAB 5MG ER | OXYBUTYNIN CHLORIDE TAB ER 24HR 5 MG | Tier 1 | | | | |
| Genitourinary Agents | PENICILLAMIN CAP 250MG | PENICILLAMINE CAP 250 MG | Tier 1 | | | X | X |
| Genitourinary Agents | PENICILLAMIN TAB 250MG | PENICILLAMINE TAB 250 MG | Tier 1 | | | | X |
| Genitourinary Agents | PROSCAR TAB 5MG | FINASTERIDE TAB 5 MG | Tier 3 | | | X | |
| Genitourinary Agents | RAPAFLO CAP 4MG | SILODOSIN CAP 4 MG | Tier 3 | | | X | |
| Genitourinary Agents | RAPAFLO CAP 8MG | SILODOSIN CAP 8 MG | Tier 3 | | | X | |
| Genitourinary Agents | SILODOSIN CAP 4MG | SILODOSIN CAP 4 MG | Tier 1 | | | | |
| Genitourinary Agents | SILODOSIN CAP 8MG | SILODOSIN CAP 8 MG | Tier 1 | | | | |
| Genitourinary Agents | SOLIFENACIN TAB 10MG | SOLIFENACIN SUCCINATE TAB 10 MG | Tier 1 | | | | |
| Genitourinary Agents | SOLIFENACIN TAB 5MG | SOLIFENACIN SUCCINATE TAB 5 MG | Tier 1 | | | | |
| Genitourinary Agents | TADALAFIL TAB 10MG | TADALAFIL TAB 10 MG | Tier 1 | | X | | |
| Genitourinary Agents | TADALAFIL TAB 2.5MG | TADALAFIL TAB 2.5 MG | Tier 1 | | X | | |
| Genitourinary Agents | TADALAFIL TAB 20MG | TADALAFIL TAB 20 MG | Tier 1 | | X | | |
| Genitourinary Agents | TADALAFIL TAB 5MG | TADALAFIL TAB 5 MG | Tier 1 | | X | | |
| Genitourinary Agents | TAMSULOSIN CAP 0.4MG | TAMSULOSIN HCL CAP 0.4 MG | Tier 1 | | | | |
| Genitourinary Agents | TERAZOSIN CAP 10MG | TERAZOSIN HCL CAP 10 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Genitourinary Agents | TERAZOSIN CAP 1MG | TERAZOSIN HCL CAP 1 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Genitourinary Agents | TERAZOSIN CAP 2MG | TERAZOSIN HCL CAP 2 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Genitourinary Agents | TERAZOSIN CAP 5MG | TERAZOSIN HCL CAP 5 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Genitourinary Agents | THIOLA TAB 100MG | TIOPRONIN TAB 100 MG | Tier 3 | | | | X |
| Genitourinary Agents | THIOLA EC TAB 100MG | TIOPRONIN TAB DELAYED RELEASE 100 MG | Tier 3 | | | | X |
| Genitourinary Agents | THIOLA EC TAB 300MG | TIOPRONIN TAB DELAYED RELEASE 300 MG | Tier 3 | | | | X |
| Genitourinary Agents | TIOPRONIN TAB 100MG | TIOPRONIN TAB 100 MG | Tier 1 | | | | X |
| Genitourinary Agents | TIOPRONIN TAB 100MG DR | TIOPRONIN TAB DELAYED RELEASE 100 MG | Tier 1 | | | | X |
| Genitourinary Agents | TIOPRONIN TAB 300MG DR | TIOPRONIN TAB DELAYED RELEASE 300 MG | Tier 1 | | | | X |
| Genitourinary Agents | TOLTERODINE CAP 2MG ER | TOLTERODINE TARTRATE CAP ER 24HR 2 MG | Tier 1 | | | | |
| Genitourinary Agents | TOLTERODINE CAP 4MG ER | TOLTERODINE TARTRATE CAP ER 24HR 4 MG | Tier 1 | | | | |
| Genitourinary Agents | TOLTERODINE TAB 1MG | TOLTERODINE TARTRATE TAB 1 MG | Tier 1 | | | | |

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|--|-------------------------|---|------------|------|--------------|--------------|-----------|
| Genitourinary Agents | TOLTERODINE TAB 2MG | TOLTERODINE TARTRATE TAB 2 MG | Tier 1 | | | | |
| Genitourinary Agents | TOVIAZ TAB 4MG | FESOTERODINE FUMARATE TAB ER 24HR 4 MG | Tier 2 | | | X | |
| Genitourinary Agents | TOVIAZ TAB 8MG | FESOTERODINE FUMARATE TAB ER 24HR 8 MG | Tier 2 | | | X | |
| Genitourinary Agents | TROSPIUM CL TAB 20MG | TROSPIUM CHLORIDE TAB 20 MG | Tier 1 | | | | |
| Genitourinary Agents | UROXATRAL TAB 10MG | ALFUZOSIN HCL TAB ER 24HR 10 MG | Tier 3 | | | X | |
| Genitourinary Agents | VESICARE LS SUS 5MG/5ML | SOLIFENACIN SUCCINATE SUSP 5 MG/5ML (1 MG/ML) | Tier 3 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | CAVERJECT INJ 20MCG | ALPROSTADIL FOR INJ 20 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | CAVERJECT INJ 40MCG | ALPROSTADIL FOR INJ 40 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | CAVERJECT KIT 20MCG | ALPROSTADIL FOR INJ KIT 20 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | CAVERJECT IM KIT 10MCG | ALPROSTADIL FOR INJ KIT 10 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | EDEX KIT 10MCG | ALPROSTADIL FOR INJ KIT 10 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | EDEX KIT 20MCG | ALPROSTADIL FOR INJ KIT 20 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | EDEX KIT 40MCG | ALPROSTADIL FOR INJ KIT 40 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | GYNOL II GEL 3% | NONOXYNOL-9 GEL 3% | HCR | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | HYOPHEN TAB | METHENAMINE-HYOSC-METH BLUE-BENZ ACID-PHENYL SAL TAB 81.6MG | Tier 3 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | ME/NAPHOS/MB TAB HYO 1 | *METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG*** | Tier 1 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | MUSE SUP 1000MCG | ALPROSTADIL URETHRAL PELLETT 1000 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | MUSE SUP 250MCG | ALPROSTADIL URETHRAL PELLETT 250 MCG | Tier 3 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|------------------------|--|------------|------|--------------|--------------|-----------|
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | MUSE SUP 500MCG | ALPROSTADIL URETHRAL PELLETT 500 MCG | Tier 3 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | PHENAZO TAB 200MG | PHENAZOPYRIDINE HCL TAB 200 MG | Tier 1 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | PHENAZOPYRID TAB 100MG | PHENAZOPYRIDINE HCL TAB 100 MG | Tier 1 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | PHENAZOPYRID TAB 200MG | PHENAZOPYRIDINE HCL TAB 200 MG | Tier 1 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | PHEXXI GEL | LACTIC ACID-CITRIC ACID-POTASSIUM BITARTRATE GEL 1.8-1-0.4% | HCR | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | PHOSPHASAL TAB | *METHENAMINE-HYOS-METH BLUE-SOD PHOS-PHEN SAL TAB 81.6 MG*** | Tier 2 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | PYRIDIUM TAB 100MG | PHENAZOPYRIDINE HCL TAB 100 MG | Tier 3 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | PYRIDIUM TAB 200MG | PHENAZOPYRIDINE HCL TAB 200 MG | Tier 3 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | SILDENAFIL TAB 100MG | SILDENAFIL CITRATE TAB 100 MG | Tier 1 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | SILDENAFIL TAB 25MG | SILDENAFIL CITRATE TAB 25 MG | Tier 1 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | SILDENAFIL TAB 50MG | SILDENAFIL CITRATE TAB 50 MG | Tier 1 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | STENDRA TAB 100MG | AVANAFIL TAB 100 MG | Tier 2 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | STENDRA TAB 200MG | AVANAFIL TAB 200 MG | Tier 2 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | STENDRA TAB 50MG | AVANAFIL TAB 50 MG | Tier 2 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | TODAY SPONGE MIS | NONOXYNOL-9 VAGINAL SPONGE 1000 MG | HCR | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | URELLE TAB | *METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG*** | Tier 3 | | | | |

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|--|--------------------------|--|------------|------|--------------|--------------|-----------|
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | URETRON D/S TAB | *METHENAMINE-HYOS-METH BLUE-SOD PHOS-PHEN SAL TAB 81.6 MG*** | Tier 1 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | URIMAR-T CAP | *METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL CAP 120 MG*** | Tier 3 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | URIMAR-T TAB | *METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 120 MG*** | Tier 2 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | URIN D/S TAB | *METHENAMINE-HYOS-METH BLUE-SOD PHOS-PHEN SAL TAB 81.6 MG*** | Tier 1 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | URO-458 TAB | *METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG*** | Tier 3 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | UROGESIC- TAB BLUE | *METHENAMINE-HYOSCAMINE-METH BLUE-SOD PHOS TAB 81.6 MG*** | Tier 2 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | USTELL CAP | *METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL CAP 120 MG*** | Tier 3 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | UTIRA-C TAB | *METHENAMINE-HYOS-METH BLUE-SOD PHOS-PHEN SAL TAB 81.6 MG*** | Tier 2 | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VARDENAFIL TAB 10MG | VARDENAFIL HCL TAB 10 MG | Tier 1 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VARDENAFIL TAB 10MG ODT | VARDENAFIL HCL ORALLY DISINTEGRATING TAB 10 MG | Tier 1 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VARDENAFIL TAB 2.5MG | VARDENAFIL HCL TAB 2.5 MG | Tier 1 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VARDENAFIL TAB 20MG | VARDENAFIL HCL TAB 20 MG | Tier 1 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VARDENAFIL TAB 5MG | VARDENAFIL HCL TAB 5 MG | Tier 1 | | X | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VCF VAGINAL GEL CONTRACE | NONOXYNOL-9 GEL 4% | HCR | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VCF VAGINAL MIS CONTRACP | NONOXYNOL-9 FILM 28% | HCR | | | | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VIAGRA TAB 100MG | SILDENAFIL CITRATE TAB 100 MG | Tier 3 | | X | X | |

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|--|------------------------|--|------------|------|--------------|--------------|-----------|
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VIAGRA TAB 25MG | SILDENAFIL CITRATE TAB 25 MG | Tier 3 | | X | X | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VIAGRA TAB 50MG | SILDENAFIL CITRATE TAB 50 MG | Tier 3 | | X | X | |
| Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions | VILEVEV MB TAB 81MG | *METHENAMINE-HYOSC-METH BLUE-SOD PHOS-PHEN SAL TAB 81 MG*** | Tier 3 | | | | |
| Glycemic Agents - Diabetic Drugs | ZEGALOGUE INJ 0.6/0.6 | DASIGLUCAGON HCL SUBCUTANEOUS SOLN AUTO-INJ 0.6 MG/0.6ML | Tier 2 | | | | |
| Glycemic Agents - Diabetic Drugs | ZEGALOGUE INJ 0.6/0.6 | DASIGLUCAGON HCL SUBCUTANEOUS SOLN PREF SYRINGE 0.6 MG/0.6ML | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ACTHAR INJ 80UNIT | CORTICOTROPIN INJ GEL 80 UNIT/ML | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ALKINDI SPRI CAP 0.5MG | HYDROCORTISONE CAP SPRINKLE 0.5 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ALKINDI SPRI CAP 1MG | HYDROCORTISONE CAP SPRINKLE 1 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ALKINDI SPRI CAP 2MG | HYDROCORTISONE CAP SPRINKLE 2 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ALKINDI SPRI CAP 5MG | HYDROCORTISONE CAP SPRINKLE 5 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | CORTEF TAB 10MG | HYDROCORTISONE TAB 10 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | CORTEF TAB 20MG | HYDROCORTISONE TAB 20 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | CORTEF TAB 5MG | HYDROCORTISONE TAB 5 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | CORTISONE TAB 25MG | CORTISONE ACETATE TAB 25 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | CORTROPHIN GEL 80UNIT | CORTICOTROPIN INJ GEL 80 UNIT/ML | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEFLAZACORT TAB 18MG | DEFLAZACORT TAB 18 MG | Tier 1 | X | | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|--------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEFLAZACORT TAB 30MG | DEFLAZACORT TAB 30 MG | Tier 1 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEFLAZACORT TAB 36MG | DEFLAZACORT TAB 36 MG | Tier 1 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEFLAZACORT TAB 6MG | DEFLAZACORT TAB 6 MG | Tier 1 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXABLISS TAB 1.5MG | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (39) | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON CON 1MG/ML | DEXAMETHASONE CONC 1 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON ELX 0.5/5ML | DEXAMETHASONE ELIXIR 0.5 MG/5ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON SOL 0.5/5ML | DEXAMETHASONE SOLN 0.5 MG/5ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 0.5MG | DEXAMETHASONE TAB 0.5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 0.75MG | DEXAMETHASONE TAB 0.75 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 1.5MG | DEXAMETHASONE TAB 1.5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 10-DAY | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (35) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 13-DAY | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (51) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 1MG | DEXAMETHASONE TAB 1 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 2MG | DEXAMETHASONE TAB 2 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 4MG | DEXAMETHASONE TAB 4 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 6-DAY | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DEXAMETHASON TAB 6MG | DEXAMETHASONE TAB 6 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | DXEVO 11-DAY PAK 1.5MG | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (39) | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | EMFLAZA SUS 22.75/ML | DEFLAZACORT SUSP 22.75 MG/ML | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | EMFLAZA TAB 18MG | DEFLAZACORT TAB 18 MG | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | EMFLAZA TAB 30MG | DEFLAZACORT TAB 30 MG | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | EMFLAZA TAB 36MG | DEFLAZACORT TAB 36 MG | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | EMFLAZA TAB 6MG | DEFLAZACORT TAB 6 MG | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | FLUDROCORT TAB 0.1MG | FLUDROCORTISONE ACETATE TAB 0.1 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | HEMADY TAB 20MG | DEXAMETHASONE TAB 20 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | HIDEX 6-DAY PAK 1.5MG | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21) | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | HYDROCORT TAB 10MG | HYDROCORTISONE TAB 10 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | HYDROCORT TAB 20MG | HYDROCORTISONE TAB 20 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | HYDROCORT TAB 5MG | HYDROCORTISONE TAB 5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | MEDROL TAB 16MG | METHYLPREDNISOLONE TAB 16 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | MEDROL TAB 2MG | METHYLPREDNISOLONE TAB 2 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | MEDROL TAB 4MG | METHYLPREDNISOLONE TAB 4 MG | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | MEDROL TAB 4MG | METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | MEDROL TAB 8MG | METHYLPREDNISOLONE TAB 8 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | METHYLPRED POW ACETATE | METHYLPREDNISOLONE ACETATE POWDER | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | METHYLPRED TAB 16MG | METHYLPREDNISOLONE TAB 16 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | METHYLPRED TAB 32MG | METHYLPREDNISOLONE TAB 32 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | METHYLPRED TAB 4MG | METHYLPREDNISOLONE TAB THERAPY PACK 4 MG (21) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | METHYLPRED TAB 4MG | METHYLPREDNISOLONE TAB 4 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | METHYLPRED TAB 8MG | METHYLPREDNISOLONE TAB 8 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | MILLIPRED TAB 5MG | PREDNISOLONE TAB 5 MG | Tier 2 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ORAPRED ODT TAB 10MG | PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 10 MG (BASE EQ) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ORAPRED ODT TAB 15MG | PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 15 MG (BASE EQ) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ORAPRED ODT TAB 30MG | PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 30 MG (BASE EQ) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PEDIAPRED SOL 5MG/5ML | PREDNISOLONE SOD PHOSPH ORAL SOLN 6.7 MG/5ML (5 MG/5ML BASE) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PRED SOD PHO SOL 5MG/5ML | PREDNISOLONE SOD PHOSPH ORAL SOLN 6.7 MG/5ML (5 MG/5ML BASE) | Tier 1 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE SOL 10MG/5ML | PREDNISOLONE SOD PHOSPHATE ORAL SOLN 10 MG/5ML (BASE EQUIV) | Tier 1 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE SOL 15MG/5ML | PREDNISOLONE SOD PHOSPHATE ORAL SOLN 15 MG/5ML (BASE EQUIV) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE SOL 15MG/5ML | PREDNISOLONE SOLN 15 MG/5ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE SOL 20MG/5ML | PREDNISOLONE SOD PHOSPHATE ORAL SOLN 20 MG/5ML (BASE EQUIV) | Tier 1 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE SOL 25MG/5ML | PREDNISOLONE SODIUM PHOSPHATE ORAL SOLN 25 MG/5ML (BASE EQ) | Tier 1 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE TAB 10MG ODT | PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 10 MG (BASE EQ) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE TAB 15MG ODT | PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 15 MG (BASE EQ) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE TAB 30MG ODT | PREDNISOLONE SOD PHOS ORALLY DISINTEGR TAB 30 MG (BASE EQ) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISOLONE TAB 5MG | PREDNISOLONE TAB 5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE CON 5MG/ML | PREDNISONE CONC 5 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE PAK 10MG | PREDNISONE TAB THERAPY PACK 10 MG (21) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE PAK 10MG | PREDNISONE TAB THERAPY PACK 10 MG (48) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE PAK 5MG | PREDNISONE TAB THERAPY PACK 5 MG (21) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE PAK 5MG | PREDNISONE TAB THERAPY PACK 5 MG (48) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE SOL 5MG/5ML | PREDNISONE ORAL SOLN 5 MG/5ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE TAB 10MG | PREDNISONE TAB 10 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE TAB 1MG | PREDNISONE TAB 1 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISONE TAB 2.5MG | PREDNISONE TAB 2.5 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISON TAB 20MG | PREDNISON TAB 20 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISON TAB 50MG | PREDNISON TAB 50 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | PREDNISON TAB 5MG | PREDNISON TAB 5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | RAYOS TAB 1MG | PREDNISON TAB DELAYED RELEASE 1 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | RAYOS TAB 2MG | PREDNISON TAB DELAYED RELEASE 2 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | RAYOS TAB 5MG | PREDNISON TAB DELAYED RELEASE 5 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | TAPERDEX PAK 12-DAY | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (49) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | TAPERDEX PAK 6 DAY | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (21) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | TAPERDEX PAK 7-DAY | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (27) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) | ZCORT 7-DAY TAB 1.5MG | DEXAMETHASONE TAB THERAPY PACK 1.5 MG (25) | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) - Drugs to Regulate Hormones | DEXAMETHASON POW | DEXAMETHASONE (BULK) POWDER | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) - Drugs to Regulate Hormones | DEXAMETHASON POW ACETATE | DEXAMETHASONE ACETATE (BULK) POWDER | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal) - Drugs to Regulate Hormones | DEXAMETHASON POW MICRONIZ | DEXAMETHASONE (BULK) POWDER | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | CHOR GONADOT INJ 10000UNT | CHORIONIC GONADOTROPIN FOR IM INJ 10000 UNIT | Tier 1 | | | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DDAVP INJ 4MCG/ML | DESMOPRESSIN ACETATE PRESERVATIVE FREE (PF) INJ 4 MCG/ML | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DDAVP INJ 4MCG/ML | DESMOPRESSIN ACETATE INJ 4 MCG/ML | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DDAVP TAB 0.1MG | DESMOPRESSIN ACETATE TAB 0.1 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DDAVP TAB 0.2MG | DESMOPRESSIN ACETATE TAB 0.2 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DESMOPRESSIN INJ 40/10ML | DESMOPRESSIN ACETATE INJ 4 MCG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DESMOPRESSIN INJ 4MCG/ML | DESMOPRESSIN ACETATE INJ 4 MCG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DESMOPRESSIN INJ 4MCG/ML | DESMOPRESSIN ACETATE PRESERVATIVE FREE (PF) INJ 4 MCG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DESMOPRESSIN SOL 1.5MG/ML | DESMOPRESSIN ACETATE NASAL SOLN 1.5 MG/ML | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DESMOPRESSIN SPR 0.01% | DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% (REFRIGERATED) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DESMOPRESSIN SPR 0.01% | DESMOPRESSIN ACETATE NASAL SPRAY SOLN 0.01% | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DESMOPRESSIN TAB 0.1MG | DESMOPRESSIN ACETATE TAB 0.1 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | DESMOPRESSIN TAB 0.2MG | DESMOPRESSIN ACETATE TAB 0.2 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | EGRIFTA SV INJ 2MG | TESAMORELIN ACETATE FOR INJ 2 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 0.2MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 0.2 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 0.4MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 0.4 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 0.6MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 0.6 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 0.8MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 0.8 MG | Tier 3 | X | X | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|--------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 1.2MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 1.2 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 1.4MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 1.4 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 1.6MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 1.6 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 1.8MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 1.8 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 12MG | SOMATROPIN FOR SUBCUTANEOUS INJ CARTRIDGE 12 MG (36 UNIT) | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 1MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 1 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 2MG | SOMATROPIN FOR SUBCUTANEOUS INJ PREFILLED SYR 2 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | GENOTROPIN INJ 5MG | SOMATROPIN FOR SUBCUTANEOUS INJ CARTRIDGE 5 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | HUMATROPE INJ 12MG | SOMATROPIN FOR INJ CARTRIDGE 12 MG (36 UNIT) | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | HUMATROPE INJ 24MG | SOMATROPIN FOR INJ CARTRIDGE 24 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | HUMATROPE INJ 6MG | SOMATROPIN FOR INJ CARTRIDGE 6 MG (18 UNIT) | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | INCRELEX INJ 40MG/4ML | MECASERMIN INJ 40 MG/4ML (10 MG/ML) | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NOCDURNA SUB 27.7MCG | DESMOPRESSIN ACETATE SUBLINGUAL TAB 27.7 MCG | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NOCDURNA SUB 55.3MCG | DESMOPRESSIN ACETATE SUBLINGUAL TAB 55.3 MCG | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NORDITROPIN INJ 10/1.5ML | SOMATROPIN SOLUTION PEN-INJECTOR 10 MG/1.5ML | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NORDITROPIN INJ 15/1.5ML | SOMATROPIN SOLUTION PEN-INJECTOR 15 MG/1.5ML | Tier 2 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|--------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NORDITROPIN INJ 30/3ML | SOMATROPIN SOLUTION PEN-INJECTOR 30 MG/3ML | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NORDITROPIN INJ 5/1.5ML | SOMATROPIN SOLUTION PEN-INJECTOR 5 MG/1.5ML | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NOVAREL INJ 5000UNIT | CHORIONIC GONADOTROPIN FOR IM INJ 5000 UNIT | Tier 3 | | | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NUTROPIN AQ INJ 10MG/2ML | SOMATROPIN SOLUTION PEN-INJECTOR 10 MG/2ML | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NUTROPIN AQ INJ 20MG/2ML | SOMATROPIN SOLUTION PEN-INJECTOR 20 MG/2ML | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | NUTROPIN AQ INJ NUSPIN 5 | SOMATROPIN SOLUTION PEN-INJECTOR 5 MG/2ML | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | OMNITROPE INJ 10/1.5ML | SOMATROPIN SOLUTION CARTRIDGE 10 MG/1.5ML | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | OMNITROPE INJ 5.8MG | SOMATROPIN FOR INJ 5.8 MG | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | OMNITROPE INJ 5/1.5ML | SOMATROPIN SOLUTION CARTRIDGE 5 MG/1.5ML | Tier 2 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | PREGNYL INJ 10000UNT | CHORIONIC GONADOTROPIN FOR IM INJ 10000 UNIT | Tier 3 | | | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | SAIZEN INJ 5MG | SOMATROPIN (NON-REFRIGERATED) FOR INJ 5 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | SAIZEN INJ 8.8MG | SOMATROPIN (NON-REFRIGERATED) FOR INJ 8.8 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | SAIZENPREP INJ 8.8MG | SOMATROPIN (NON-REFRIGERATED) FOR INJ 8.8 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | SEROSTIM INJ 4MG | SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 4 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | SEROSTIM INJ 5MG | SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 5 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | SEROSTIM INJ 6MG | SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 6 MG | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | STIMATE SOL 1.5MG/ML | DESMOPRESSIN ACETATE NASAL SOLN 1.5 MG/ML | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | ZOMACTON INJ 10MG | SOMATROPIN FOR INJ 10 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | ZOMACTON INJ 5MG | SOMATROPIN FOR SUBCUTANEOUS INJ 5 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) | ZORBTIVE INJ 8.8MG | SOMATROPIN (NON-REFRIGERATED) FOR SUBCUTANEOUS INJ 8.8 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | FOLLISTIM AQ INJ 300UNIT | FOLLITROPIN BETA INJ 300 UNIT/0.36ML | Tier 2 | X | | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | FOLLISTIM AQ INJ 600UNIT | FOLLITROPIN BETA INJ 600 UNIT/0.72ML | Tier 2 | X | | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | FOLLISTIM AQ INJ 900UNIT | FOLLITROPIN BETA INJ 900 UNIT/1.08ML | Tier 2 | X | | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | GONAL-F INJ 1050UNIT | FOLLITROPIN ALFA FOR INJ 1050 UNIT | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | GONAL-F INJ 450UNIT | FOLLITROPIN ALFA FOR INJ 450 UNIT | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | GONAL-F RFF INJ 300/0.5 | FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 300 UNIT/0.5ML | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | GONAL-F RFF INJ 450/0.75 | FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 450 UNIT/0.75ML | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | GONAL-F RFF INJ 75UNIT | FOLLITROPIN ALFA FOR SUBCUTANEOUS INJ 75 UNIT | Tier 3 | X | | X | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | GONAL-F RFF INJ 900/1.5 | FOLLITROPIN ALFA SUBCUTANEOUS SOLN PEN-INJ 900 UNIT/1.5ML | Tier 3 | X | | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | OVIDREL INJ | CHORIOGONADOTROPIN ALFA INJ 250 MCG/0.5ML | Tier 3 | | | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 11MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 11 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 13.3MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CART 13.3 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 3.6MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 3.6 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 3MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 3 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 4.3MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 4.3 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 5.2MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 5.2 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 6.3MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 6.3 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 7.6MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 7.6 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones | SKYTROFA INJ 9.1MG | LONAPEGOMATROPIN-TCGD FOR SUBCUTANEOUS INJ CARTRIDGE 9.1 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) | CERVIDIL VAG MIS 10MG INS | DINOPROSTONE VAGINAL INSERTS 10 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) | KORLYM TAB 300MG | MIFEPRISTONE TAB 300 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) | METHERGINE TAB 0.2MG | METHYLERGONOVINE MALEATE TAB 0.2 MG | Tier 1 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) | METHYLERGON TAB 0.2MG | METHYLERGONOVINE MALEATE TAB 0.2 MG | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) | MIFEPRISTONE TAB 300MG | MIFEPRISTONE TAB 300 MG | Tier 1 | X | X | | X |
| Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) | PREPIDIL GEL 0.5MG/3G | DINOPROSTONE CERVICAL GEL 0.5 MG/3GM | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) - Drugs to Regulate Hormones | MIFEPREX TAB 200MG | MIFEPRISTONE TAB 200 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) - Drugs to Regulate Hormones | MIFEPRISTONE TAB 200MG | MIFEPRISTONE TAB 200 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ACTIVELLA TAB 1-0.5MG | ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AFIRMELLE TAB 0.1-0.02 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ALORA DIS 0.025MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ALORA DIS 0.05MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ALORA DIS 0.075MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ALORA DIS 0.1MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ALTAVERA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ALYACEN TAB 1/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ALYACEN TAB 7/7/7 | NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AMABELZ TAB 0.5-0.1 | ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AMABELZ TAB 1-0.5MG | ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AMETHIA TAB | LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AMETHYST TAB 90-20MCG | LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANDRODERM DIS 2MG/24HR | TESTOSTERONE TD PATCH 24HR 2 MG/24HR | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANDRODERM DIS 4MG/24HR | TESTOSTERONE TD PATCH 24HR 4 MG/24HR | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANDROGEL GEL 1%(25MG) | TESTOSTERONE TD GEL 25 MG/2.5GM (1%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANDROGEL GEL 1%(50MG) | TESTOSTERONE TD GEL 50 MG/5GM (1%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANDROGEL GEL 1.62% | TESTOSTERONE TD GEL 40.5 MG/2.5GM (1.62%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANDROGEL GEL 1.62% | TESTOSTERONE TD GEL 20.25 MG/1.25GM (1.62%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANDROGEL GEL 1.62% | TESTOSTERONE TD GEL 20.25 MG/ACT (1.62%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANGELIQ TAB 0.25-0.5 | DROSPIRENONE-ESTRADIOL TAB 0.25-0.5 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANGELIQ TAB 0.5-1MG | DROSPIRENONE-ESTRADIOL TAB 0.5-1 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ANNOVERA MIS | SEGESTERONE ACE-ETHINYL ESTRADIOL VA RING 0.15-0.013 MG/24HR | HCR | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | APRI TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ARANELLE TAB | NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/1-35/0.5-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ASHLYNA TAB | LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AUBRA TAB 0.1-0.02 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AUBRA EQ TAB 0.1-0.02 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AUROVELA TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AUROVELA TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AUROVELA 24 TAB FE 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AUROVELA FE TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AUROVELA FE TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AVIANE TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AYGESTIN TAB 5MG | NORETHINDRONE ACETATE TAB 5 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AYUNA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | AZURETTE TAB | DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BALCOLTRA TAB 0.1-20 | LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BALZIVA TAB | NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BEYAZ TAB | DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.02-0.451 MG | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BIJUVA CAP 0.5-100 | ESTRADIOL-PROGESTERONE CAP 0.5-100 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BIJUVA CAP 1-100MG | ESTRADIOL-PROGESTERONE CAP 1-100 MG | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BLISOVI 24 TAB FE 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BLISOVI FE TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BLISOVI FE TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | BRIELLYN TAB | NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CAMILA TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CAMRESE TAB | LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CAMRESE LO TAB | LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CAZIANP PAK | DESOGEST-ETHIN EST TAB 0.1-0.025 / 0.125-0.025 / 0.15-0.025MG-MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CHARLOTTE 24 CHW FE 1/20 | NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CHATEAL TAB 0.15/30 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CHATEAL EQ TAB 0.15/30 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CLIMARA DIS 0.025MG | ESTRADIOL TD PATCH WEEKLY 0.025 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CLIMARA DIS 0.0375MG | ESTRADIOL TD PATCH WEEKLY 0.0375 MG/24HR (37.5 MCG/24HR) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CLIMARA DIS 0.05MG | ESTRADIOL TD PATCH WEEKLY 0.05 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CLIMARA DIS 0.06MG | ESTRADIOL TD PATCH WEEKLY 0.06 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CLIMARA DIS 0.075MG | ESTRADIOL TD PATCH WEEKLY 0.075 MG/24HR | Tier 3 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CLIMARA DIS 0.1MG | ESTRADIOL TD PATCH WEEKLY 0.1 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CLIMARA PRO DIS WEEKLY | ESTRADIOL-LEVONORGESTREL TD PATCH WEEKLY 0.045-0.015 MG/DAY | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | COMBIPATCH DIS | ESTRADIOL-NORETHINDRONE ACE TD PTTW 0.05-0.14 MG/DAY | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | COMBIPATCH DIS | ESTRADIOL-NORETHINDRONE ACE TD PTTW 0.05-0.25 MG/DAY | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CRINONE GEL 4% VAG | PROGESTERONE VAGINAL GEL 4% | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CRINONE GEL 8% VAG | PROGESTERONE VAGINAL GEL 8% | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CRYSSELLE-28 TAB 28 TABS | NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CYCLAFEM TAB 1/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CYCLAFEM TAB 7/7/7 | NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CYRED TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | CYRED EQ TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DANAZOL CAP 100MG | DANAZOL CAP 100 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DANAZOL CAP 200MG | DANAZOL CAP 200 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DANAZOL CAP 50MG | DANAZOL CAP 50 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DASETTA TAB 1/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DASETTA TAB 7/7/7 | NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG | HCR | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DAYSEE TAB | LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DEBLITANE TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DELESTROGEN INJ 10MG/ML | ESTRADIOL VALERATE IM IN OIL 10 MG/ML | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DELESTROGEN INJ 20MG/ML | ESTRADIOL VALERATE IM IN OIL 20 MG/ML | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DELESTROGEN INJ 40MG/ML | ESTRADIOL VALERATE IM IN OIL 40 MG/ML | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DELYLA TAB 0.1-0.02 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DEPO-ESTRADI INJ 5MG/ML | ESTRADIOL CYPIONATE IM IN OIL 5 MG/ML | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DEPO-PROVERA INJ 150MG/ML | MEDROXYPROGESTERONE ACETATE IM SUSP 150 MG/ML | HCR | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DEPO-PROVERA INJ 150MG/ML | MEDROXYPROGESTERONE ACETATE IM SUSP PREFILLED SYR 150 MG/ML | HCR | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DEPO-SQ PROV INJ 104 | MEDROXYPROGESTERONE ACETATE SUSP PREF SYR 104 MG/0.65ML | HCR | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DEPO-TESTOST INJ 100MG/ML | TESTOSTERONE CYPIONATE IM INJ IN OIL 100 MG/ML | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DEPO-TESTOST INJ 200MG/ML | TESTOSTERONE CYPIONATE IM INJ IN OIL 200 MG/ML | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DESO/ETHINYL TAB ESTRADIO | DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DESO/ETHINYL TAB ESTRADIO | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DIVIGEL GEL 0.25MG | ESTRADIOL TD GEL 0.25 MG/0.25GM (0.1%) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DIVIGEL GEL 0.5MG | ESTRADIOL TD GEL 0.5 MG/0.5GM (0.1%) | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DIVIGEL GEL 0.75MG | ESTRADIOL TD GEL 0.75 MG/0.75GM (0.1%) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DIVIGEL GEL 1.25MG | ESTRADIOL TD GEL 1.25 MG/1.25GM (0.1%) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DIVIGEL GEL 1MG/GM | ESTRADIOL TD GEL 1 MG/GM (0.1%) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DOLISHALE TAB 90-20MCG | LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DOTTI DIS 0.025MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DOTTI DIS 0.0375MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DOTTI DIS 0.05MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DOTTI DIS 0.075MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DOTTI DIS 0.1MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DROS/ETH EST TAB LEVOMEFO | DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.03-0.451 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DROSPIR/ETHI TAB 3-0.02MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DROSPIR/ETHI TAB 3-0.03MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DROSPIRE/ETH TAB ESTR/LEV | DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.02-0.451 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DROSPIRENONE TAB ETHY EST | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | DUAVEE TAB 0.45-20 | CONJUGATED ESTROGENS-BAZEDOXIFENE TAB 0.45-20 MG | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EC-RX PROGES CRE 10% | *PROGESTERONE MICRONIZED TD CREAM 10% (CMPD KIT)* | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-----------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EC-RX PROGES CRE 20% | *PROGESTERONE MICRONIZED TD CREAM 20% (CMPD KIT)* | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EC-RX TESTOS CRE 0.2% | *TESTOSTERONE CREAM 0.2% (COMPOUNDING KIT)** | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EC-RX TESTOS CRE 0.4% | *TESTOSTERONE CREAM 0.4% (COMPOUNDING KIT)** | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EC-RX TESTOS CRE 10% | *TESTOSTERONE CREAM 10% (COMPOUNDING KIT)** | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EC-RX TESTOS CRE 20% | *TESTOSTERONE CREAM 20% (COMPOUNDING KIT)** | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ELESTRIN GEL 0.06% | ESTRADIOL GEL 0.06% (0.52 MG/0.87 GM METERED-DOSE PUMP) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ELINEST TAB | NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ELLA TAB 30MG | ULIPRISTAL ACETATE TAB 30 MG | HCR | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ELURYNG MIS | ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EMOQUETTE TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EMZAHH TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ENDOMETRIN SUP 100MG | PROGESTERONE VAGINAL INSERT 100 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ENILLORING MIS | ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ENPRESSE-28 TAB | LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ENSKYCE TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ERRIN TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTARYLLA TAB 0.25-35 | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRA/NORETH TAB 0.5-0.1 | ESTRADIOL & NORETHINDRONE ACETATE TAB 0.5-0.1 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRA/NORETH TAB 1-0.5MG | ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRACE TAB 0.5MG | ESTRADIOL TAB 0.5 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRACE TAB 1MG | ESTRADIOL TAB 1 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRACE TAB 2MG | ESTRADIOL TAB 2 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRACE VAG CRE 0.01% | ESTRADIOL VAGINAL CREAM 0.1 MG/GM | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRAD VAL INJ 10MG/ML | ESTRADIOL VALERATE IM IN OIL 10 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRAD VAL INJ 20MG/ML | ESTRADIOL VALERATE IM IN OIL 20 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRAD VAL INJ 40MG/ML | ESTRADIOL VALERATE IM IN OIL 40 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL CRE 0.01% | ESTRADIOL VAGINAL CREAM 0.1 MG/GM | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.025MG | ESTRADIOL TD PATCH WEEKLY 0.025 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.025MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.025MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.0375MG | ESTRADIOL TD PATCH WEEKLY 0.0375 MG/24HR (37.5 MCG/24HR) | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.0375MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR | Tier 1 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.0375MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.05MG | ESTRADIOL TD PATCH WEEKLY 0.05 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.05MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.05MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.06MG | ESTRADIOL TD PATCH WEEKLY 0.06 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.075MG | ESTRADIOL TD PATCH WEEKLY 0.075 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.075MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.075MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.1MG | ESTRADIOL TD PATCH WEEKLY 0.1 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.1MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL DIS 0.1MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL GEL 0.25MG | ESTRADIOL TD GEL 0.25 MG/0.25GM (0.1%) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL GEL 0.5MG | ESTRADIOL TD GEL 0.5 MG/0.5GM (0.1%) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL GEL 0.75MG | ESTRADIOL TD GEL 0.75 MG/0.75GM (0.1%) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL GEL 1.25MG | ESTRADIOL TD GEL 1.25 MG/1.25GM (0.1%) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL GEL 1MG/GM | ESTRADIOL TD GEL 1 MG/GM (0.1%) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL TAB 0.5MG | ESTRADIOL TAB 0.5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL TAB 10MCG | ESTRADIOL VAGINAL TAB 10 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL TAB 1MG | ESTRADIOL TAB 1 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRADIOL TAB 2MG | ESTRADIOL TAB 2 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRING MIS 2MG | ESTRADIOL VAGINAL RING 2 MG (7.5 MCG/24HRS) | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTRING MIS 7.5/24HR | ESTRADIOL VAGINAL RING 2 MG (7.5 MCG/24HRS) | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ESTROGEL GEL | ESTRADIOL GEL 0.06% (0.75 MG/1.25 GM METERED-DOSE PUMP) | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ETHY ETH EST TAB 1-35 | ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ETHYNODIOL TAB 1-50 | ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ETONOGESTREL MIS ETHY EST | ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EVAMIST SPR 1.53MG | ESTRADIOL TRANSDERMAL SPRAY 1.53 MG/SPRAY | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | EVISTA TAB 60MG | RALOXIFENE HCL TAB 60 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FALMINA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FAYOSIM TAB | LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FEMHRT TAB 0.5-2.5 | NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FEMRING MIS 0.05/24H | ESTRADIOL ACETATE VAGINAL RING 0.05 MG/24HR | Tier 3 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FEMRING MIS 0.1MG/24 | ESTRADIOL ACETATE VAGINAL RING 0.1 MG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FEMYNOR TAB 0.25-35 | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FINZALA CHW FE 1/20 | NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FORTESTA GEL 10MG/ACT | TESTOSTERONE TD GEL 10MG/ACT (2%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FYAVOLV TAB 0.5-2.5 | NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | FYAVOLV TAB 1-5 | NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | GEMMILY CAP 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | GENERESS FE CHW | NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | HAILEY TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | HAILEY 24 TAB FE | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | HAILEY FE TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | HAILEY FE TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | HALOETTE MIS | ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.12-0.015 MG/24HR | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | HEATHER TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ICLEVIA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | IMVEXXY MAIN SUP 10MCG | ESTRADIOL VAGINAL INSERT 10 MCG | Tier 2 | | X | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | IMVEXXY MAIN SUP 4MCG | ESTRADIOL VAGINAL INSERT 4 MCG | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | IMVEXXY STRT SUP 10MCG | ESTRADIOL VAGINAL INSERT STARTER PACK 10 MCG | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | IMVEXXY STRT SUP 4MCG | ESTRADIOL VAGINAL INSERT STARTER PACK 4 MCG | Tier 2 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | INCASSIA TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | INTRAROSA SUP 6.5MG | PRASTERONE VAGINAL INSERT 6.5 MG | Tier 3 | X | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | INTROVALE TAB | LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ISIBLOOM TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JAIMIESS TAB | LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JASMIEL TAB 3-0.02MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JATENZO CAP 158MG | TESTOSTERONE UNDECANOATE CAP 158 MG | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JATENZO CAP 198MG | TESTOSTERONE UNDECANOATE CAP 198 MG | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JATENZO CAP 237MG | TESTOSTERONE UNDECANOATE CAP 237 MG | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JENCYCLA TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JINTELI TAB 1MG-5MCG | NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JOLESSA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JOYEAUX TAB 0.1-20 | LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21) | HCR | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|----------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JULEBER TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JUNEL 1.5/30 TAB | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JUNEL 1/20 TAB | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JUNEL FE TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JUNEL FE TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | JUNEL FE 24 TAB 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KAITLIB FE CHW | NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KALLIGA TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KARIVA TAB 28 DAY | DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KELNOR TAB 1/35 | ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KELNOR 1/50 TAB | ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-50 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KURVELO TAB 0.15/30 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KYZATREX CAP 100MG | TESTOSTERONE UNDECANOATE CAP 100 MG | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KYZATREX CAP 150MG | TESTOSTERONE UNDECANOATE CAP 150 MG | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | KYZATREX CAP 200MG | TESTOSTERONE UNDECANOATE CAP 200 MG | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LARIN TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG | HCR | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LARIN TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LARIN 24 TAB FE 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LARIN FE TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LARIN FE TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LARISSIA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LAYOLIS FE CHW | NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEENA TAB | NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/1-35/0.5-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LESSINA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVO-ETH EST TAB 90-20MCG | LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS) TAB 90-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONEST TAB | LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONOR/ETHI TAB | LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONOR/ETHI TAB 0.1-0.02 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONOR/ETHI TAB 0.1-20 | LEVONORGESTREL-ETHINYL ESTRADIOL-FE TAB 0.1 MG-20 MCG (21) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONOR/ETHI TAB ESTRADIO | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONOR/ETHI TAB ESTRADIO | LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG | HCR | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONOR/ETHI TAB ESTRADIO | LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONOR/ETHI TAB ESTRADIO | LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVONOR/ETHI TAB ESTRADIO | LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LEVORA-28 TAB 0.15/30 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LILLOW TAB 0.15/30 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LO LOESTRIN TAB 1-10-10 | NORETHIN-ETH ESTRADIOL-FE TAB 1 MG-10 MCG (24)/10 MCG (2) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LOESTRIN TAB 1/20-21 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LOESTRIN 21 TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LOESTRIN FE TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LOESTRIN FE TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LOJAIMIESS TAB | LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LORYNA TAB 3-0.02MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LOSEASONIQUE TAB | LEVONORG-ETH EST TAB 0.1-0.02MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LOW-OGESTREL TAB | NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LO-ZUMANDIMI TAB 3-0.02MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LUTERA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LYLEQ TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LYLLANA DIS 0.025MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LYLLANA DIS 0.0375MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LYLLANA DIS 0.05MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LYLLANA DIS 0.075MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LYLLANA DIS 0.1MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | LYZA TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MARLISSA TAB 0.15/30 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEDROXYPR AC INJ 150MG/ML | MEDROXYPROGESTERONE ACETATE IM SUSP 150 MG/ML | HCR | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEDROXYPR AC INJ 150MG/ML | MEDROXYPROGESTERONE ACETATE IM SUSP PREFILLED SYR 150 MG/ML | HCR | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEDROXYPR AC TAB 10MG | MEDROXYPROGESTERONE ACETATE TAB 10 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEDROXYPR AC TAB 2.5MG | MEDROXYPROGESTERONE ACETATE TAB 2.5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEDROXYPR AC TAB 5MG | MEDROXYPROGESTERONE ACETATE TAB 5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEGESTROL SUS 625MG/5M | MEGESTROL ACETATE SUSP 625 MG/5ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEGESTROL AC SUS 40MG/ML | MEGESTROL ACETATE SUSP 40 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEGESTROL AC TAB 20MG | MEGESTROL ACETATE TAB 20 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MEGESTROL AC TAB 40MG | MEGESTROL ACETATE TAB 40 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MENEST TAB 0.3MG | ESTERIFIED ESTROGENS TAB 0.3 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MENEST TAB 0.625MG | ESTERIFIED ESTROGENS TAB 0.625 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MENEST TAB 1.25MG | ESTERIFIED ESTROGENS TAB 1.25 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MENEST TAB 2.5MG | ESTERIFIED ESTROGENS TAB 2.5 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MENOSTAR DIS 14MCG | ESTRADIOL TD PATCH WEEKLY 14 MCG/24HR | Tier 3 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MERZEE CAP 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | METHITEST TAB 10MG | METHYLTESTOSTERONE ORAL TAB 10 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | METHYLTESTOS CAP 10MG | METHYLTESTOSTERONE CAP 10 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MIBELAS 24 CHW FE | NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MICRGSTIN 24 TAB FE 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MICROGESTIN TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MICROGESTIN TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MICROGESTIN TAB FE 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MICROGESTIN TAB FE1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MILI TAB 0.25/35 | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|-------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MIMVEY TAB 1-0.5MG | ESTRADIOL & NORETHINDRONE ACETATE TAB 1-0.5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MINASTRIN 24 CHW FE | NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24) | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MINIVELLE DIS 0.025MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MINIVELLE DIS 0.0375MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MINIVELLE DIS 0.05MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MINIVELLE DIS 0.075MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MINIVELLE DIS 0.1MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MIRCETTE TAB 28 DAY | DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5) | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | MONO-LINYAH TAB 0.25-35 | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NATAZIA TAB | ESTRADIOL VALERATE-DIENOGEST TAB 3 MG /2-2 MG/2-3 MG/1 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NATESTO GEL 5.5MG | TESTOSTERONE NASAL GEL 5.5 MG/ACT | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NECON TAB 0.5/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NIKKI TAB 3-0.02MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NOR/EST/FF TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORA-BE TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORE/ETH/FER CAP 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24) | HCR | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORE/ETH/FER CHW 0.4MG-35 | NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORELGE/ETHI DIS 150/35 | NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETH/ETHIN CHW FE | NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.8 MG-25 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETH/ETHIN CHW FE 1/20 | NORETHINDRONE ACE-ETH ESTRADIOL-FE CHEW TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETH/ETHIN TAB 0.5-2.5 | NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 0.5 MG-2.5 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETH/ETHIN TAB 1.5/30 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1.5 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETH/ETHIN TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETH/ETHIN TAB 1MG-5MCG | NORETHINDRONE ACETATE-ETHINYL ESTRADIOL TAB 1 MG-5 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETH/ETHIN TAB FE | NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETH/ETHIN TAB FE 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETHIN ACE TAB 5MG | NORETHINDRONE ACETATE TAB 5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORETHINDRON TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORGEST/ETHI TAB 0.25/35 | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORGEST/ETHI TAB ESTRADIO | NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORGEST/ETHI TAB ESTRADIO | NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORLYDA TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORLYROC TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORTREL TAB 0.5/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORTREL TAB 1/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NORTREL TAB 7/7/7 | NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NUVARING MIS | ETONOGESTREL-ETHINYL ESTRADIOL VA RING 0.120-0.015 MG/24HR | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NYLIA TAB 1/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NYLIA TAB 7/7/7 | NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | NYMYO TAB 0.25-35 | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | OCELLA TAB 3-0.03MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ORSYTHIA TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | OSPHENA TAB 60MG | OSPEMIFENE TAB 60 MG | Tier 2 | X | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PHILITH TAB 0.4-35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PIMTREA TAB | DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PIRMELLA TAB 1/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PIRMELLA TAB 7/7/7 | NORETHINDRONE-ETH ESTRADIOL TAB 0.5-35/0.75-35/1-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PORTIA-28 TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREFEST TAB | ESTRADIOL TAB 1 MG(15)/ESTRAD-NORGESTIMATE TAB 1-0.09MG(15) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMARIN TAB 0.3MG | ESTROGENS, CONJUGATED TAB 0.3 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMARIN TAB 0.45MG | ESTROGENS, CONJUGATED TAB 0.45 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMARIN TAB 0.625MG | ESTROGENS, CONJUGATED TAB 0.625 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMARIN TAB 0.9MG | ESTROGENS, CONJUGATED TAB 0.9 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMARIN TAB 1.25MG | ESTROGENS, CONJUGATED TAB 1.25 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMARIN VAG CRE 0.625MG | ESTROGENS, CONJUGATED VAGINAL CREAM 0.625 MG/GM | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMPHASE TAB | CONJ EST 0.625(14)/CONJ EST-MEDROXYPRO AC TAB 0.625-5MG(14) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMPRO TAB | CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.625-2.5 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMPRO TAB 0.3-1.5 | CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.3-1.5 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMPRO TAB 0.45-1.5 | CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.45-1.5 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREMPRO TAB 0.625-5 | CONJUGATED ESTROGEN-MEDROXYPROGEST ACETATE TAB 0.625-5 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PREVIFEM TAB | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROGESTERONE CAP 100MG | PROGESTERONE CAP 100 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROGESTERONE CAP 200MG | PROGESTERONE CAP 200 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROGESTERONE CRE 10% KIT | *PROGESTERONE MICRONIZED TD CREAM 10% (CMPD KIT)* | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROGESTERONE INJ 50MG/ML | PROGESTERONE IM IN OIL 50 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROGESTERONE SUP VGS 100 | PROGESTERONE VAGINAL SUPPOSITORY 100 MG | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROGESTERONE SUP VGS 200 | PROGESTERONE VAGINAL SUPPOSITORY 200 MG | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROMETRIUM CAP 100MG | PROGESTERONE CAP 100 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROMETRIUM CAP 200MG | PROGESTERONE CAP 200 MG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROVERA TAB 10MG | MEDROXYPROGESTERONE ACETATE TAB 10 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROVERA TAB 2.5MG | MEDROXYPROGESTERONE ACETATE TAB 2.5 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | PROVERA TAB 5MG | MEDROXYPROGESTERONE ACETATE TAB 5 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | QUARTETTE TAB | LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | RALOXIFENE TAB 60MG | RALOXIFENE HCL TAB 60 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | RECLIPSEN TAB | DESOGESTREL & ETHINYL ESTRADIOL TAB 0.15 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | RIVELSA TAB | LEVONOR-ETH EST TAB 0.15-0.02/0.025/0.03 MG & ETH EST 0.01 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SAFYRAL TAB | DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.03-0.451 MG | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SEASONIQUE TAB | LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SETLAKIN TAB | LEVONORGESTREL & ETHINYL ESTRADIOL (91-DAY) TAB 0.15-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SHAROBEL TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SIMLIYA TAB 28 DAY | DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SIMPESSE TAB | LEVONORG-ETH EST TAB 0.15-0.03MG(84) & ETH EST TAB 0.01MG(7) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SLYND TAB 4MG | DROSPIRENONE TAB 4 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SPRINTEC 28 TAB 28 DAY | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SRONYX TAB | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | SYEDA TAB 3-0.03MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TARINA 24 FE TAB | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TARINA FE TAB 1/20 | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TARINA FE TAB 1/20 EQ | NORETHINDRONE ACE & ETHINYL ESTRADIOL-FE TAB 1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TAYSOFY CAP 1/20 | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TAYTULLA CAP 1MG/20MC | NORETHINDRONE ACE-ETHINYL ESTRADIOL-FE CAP 1 MG-20 MCG (24) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTIM GEL 1%(50MG) | TESTOSTERONE TD GEL 50 MG/5GM (1%) | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOST CYP INJ 100MG/ML | TESTOSTERONE CYPIONATE IM INJ IN OIL 100 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOST CYP INJ 200MG/ML | TESTOSTERONE CYPIONATE IM INJ IN OIL 200 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOST ENAN INJ 200MG/ML | TESTOSTERONE ENANTHATE IM INJ IN OIL 200 MG/ML | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL 1%(25MG) | TESTOSTERONE TD GEL 25 MG/2.5GM (1%) | Tier 1 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL 1%(50MG) | TESTOSTERONE TD GEL 50 MG/5GM (1%) | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL 1%(50MG) | TESTOSTERONE TD GEL 50 MG/5GM (1%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL 1.62% | TESTOSTERONE TD GEL 20.25 MG/ACT (1.62%) | Tier 1 | | X | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL 1.62% | TESTOSTERONE TD GEL 20.25 MG/1.25GM (1.62%) | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL 1.62% | TESTOSTERONE TD GEL 40.5 MG/2.5GM (1.62%) | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL 10MG/ACT | TESTOSTERONE TD GEL 10MG/ACT (2%) | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL PUMP 1% | TESTOSTERONE TD GEL 12.5 MG/ACT (1%) | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE GEL PUMP 1% | TESTOSTERONE TD GEL 12.5 MG/ACT (1%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TESTOSTERONE SOL 30MG/ACT | TESTOSTERONE TD SOLN 30 MG/ACT | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TILIA FE TAB | NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TLANDO CAP 112.5 MG | TESTOSTERONE UNDECANOATE CAP 112.5 MG | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI FEMYNOR TAB | NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-ESTARYLL TAB | NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-LEGEST TAB FE | NORETHINDRONE AC-ETHINYL ESTRAD-FE TAB 1-20/1-30/1-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-LINYAH TAB | NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-LO TAB ESTARYLL | NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|----------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-LO- TAB MARZIA | NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-LO- TAB SPRINTEC | NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-LO-MILI TAB | NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-MILI TAB | NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-NYMYO TAB | NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-SPRINTEC TAB | NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRIVORA-28 TAB | LEVONORGESTREL-ETH ESTRA TAB 0.05-30/0.075-40/0.125-30MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-VYLIBRA TAB | NORGESTIMATE-ETH ESTRAD TAB 0.18-35/0.215-35/0.25-35 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TRI-VYLIBRA TAB LO | NORGESTIMATE-ETH ESTRAD TAB 0.18-25/0.215-25/0.25-25 MG-MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TULANA TAB 0.35MG | NORETHINDRONE TAB 0.35 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TURQOZ TAB | NORGESTREL & ETHINYL ESTRADIOL TAB 0.3 MG-30 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TYBLUME CHW 0.1-0.02 | LEVONORGESTREL & ETHINYL ESTRADIOL CHEW TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | TYDEMY TAB | DROSPIRENONE-ETHINYL ESTRAD-LEVOMEFOLATE TAB 3-0.03-0.451 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VAGIFEM TAB 10MCG | ESTRADIOL VAGINAL TAB 10 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VELIVET PAK | DESOGEST-ETHIN EST TAB 0.1-0.025 / 0.125-0.025 / 0.15-0.025MG-MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VESTURA TAB 3-0.02MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VIENVA TAB 0.1-20 | LEVONORGESTREL & ETHINYL ESTRADIOL TAB 0.1 MG-20 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VIORELE TAB | DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VIVELLE-DOT DIS 0.025MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.025 MG/24HR | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VIVELLE-DOT DIS 0.0375MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.0375 MG/24HR | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VIVELLE-DOT DIS 0.05MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.05 MG/24HR | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VIVELLE-DOT DIS 0.075MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.075 MG/24HR | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VIVELLE-DOT DIS 0.1MG | ESTRADIOL TD PATCH TWICE WEEKLY 0.1 MG/24HR | Tier 1 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VOGELXO GEL 1%(50MG) | TESTOSTERONE TD GEL 50 MG/5GM (1%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VOGELXO GEL PUMP 1% | TESTOSTERONE TD GEL 12.5 MG/ACT (1%) | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VOLNEA TAB | DESOGEST-ETH ESTRAD & ETH ESTRAD TAB 0.15-0.02/0.01 MG(21/5) | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VYFEMLA TAB 0.4-35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.4 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | VYLIBRA TAB 0.25-35 | NORGESTIMATE & ETHINYL ESTRADIOL TAB 0.25 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | WERA TAB 0.5/35 | NORETHINDRONE & ETHINYL ESTRADIOL TAB 0.5 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | WYMZYA FE CHW 0.4MG-35 | NORETHINDRONE & ETHINYL ESTRADIOL-FE CHEW TAB 0.4 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | XULANE DIS 150-35 | NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | XYOSTED INJ 100/0.5 | TESTOSTERONE ENANTHATE SOLUTION AUTO-INJECTOR 100 MG/0.5ML | Tier 3 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|--------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | XYOSTED INJ 50/0.5 | TESTOSTERONE ENANTHATE SOLUTION AUTO-INJECTOR 50 MG/0.5ML | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | XYOSTED INJ 75/0.5 | TESTOSTERONE ENANTHATE SOLUTION AUTO-INJECTOR 75 MG/0.5ML | Tier 3 | | X | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | YASMIN 28 TAB 3-0.03MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | YAZ TAB 3-0.02MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.02 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | YUVAFEM TAB 10MCG | ESTRADIOL VAGINAL TAB 10 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ZAFEMY DIS 150/35 | NORELGESTROMIN-ETHINYL ESTRADIOL TD PTWK 150-35 MCG/24HR | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ZOVIA 1/35 TAB | ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL TAB 1 MG-35 MCG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) | ZUMANDIMINE TAB 3-0.03MG | DROSPIRENONE-ETHINYL ESTRADIOL TAB 3-0.03 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | AFTERA TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | CLOMID TAB 50MG | CLOMIPHENE CITRATE TAB 50 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | CLOMIPHENE TAB 50MG | CLOMIPHENE CITRATE TAB 50 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | COVARYX TAB 1.25-2.5 | ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | COVARYX HS TAB | ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | CURAE TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | ECONTRA EZ TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | ECONTRA OS TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | EC-RX ESTRAD CRE 0.4% | *ESTRADIOL MICRONIZED CREAM 0.4% (COMPOUNDING KIT)* | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | EC-RX ESTRAD CRE 0.6% | *ESTRADIOL MICRONIZED CREAM 0.6% (COMPOUNDING KIT)* | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | EEMT TAB 1.25-2.5 | ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | EEMT HS TAB | ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | EST ESTROGEN TAB MTEST HS | ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 0.625-1.25 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | ESTROG/MTEST TAB 1.25-2.5 | ESTERIFIED ESTROGENS & METHYLTESTOSTERONE TAB 1.25-2.5 MG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | HER STYLE TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | LEVONORGESTR TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | MY CHOICE TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | MY WAY TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-----------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | NEW DAY TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | OPCICON TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | OPTION 2 TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | PLAN B TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | REACT TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | TAKE ACTION TAB 1.5MG | LEVONORGESTREL TAB 1.5 MG | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones | TWIRLA DIS 120-30 | LEVONORGESTREL-ETHINYL ESTRADIOL TD PTWK 120-30 MCG/24HR | HCR | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | CYTOMEL TAB 25MCG | LIOTHYRONINE SODIUM TAB 25 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | CYTOMEL TAB 50MCG | LIOTHYRONINE SODIUM TAB 50 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | CYTOMEL TAB 5MCG | LIOTHYRONINE SODIUM TAB 5 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | ERMEZA SOL 150/5ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 150 MCG/5ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 100MCG | LEVOTHYROXINE SODIUM TAB 100 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 112MCG | LEVOTHYROXINE SODIUM TAB 112 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 125MCG | LEVOTHYROXINE SODIUM TAB 125 MCG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 137MCG | LEVOTHYROXINE SODIUM TAB 137 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 150MCG | LEVOTHYROXINE SODIUM TAB 150 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 175MCG | LEVOTHYROXINE SODIUM TAB 175 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 200MCG | LEVOTHYROXINE SODIUM TAB 200 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 25MCG | LEVOTHYROXINE SODIUM TAB 25 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 50MCG | LEVOTHYROXINE SODIUM TAB 50 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 75MCG | LEVOTHYROXINE SODIUM TAB 75 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | EUTHYROX TAB 88MCG | LEVOTHYROXINE SODIUM TAB 88 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 100MCG | LEVOTHYROXINE SODIUM TAB 100 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 112MCG | LEVOTHYROXINE SODIUM TAB 112 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 125MCG | LEVOTHYROXINE SODIUM TAB 125 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 137MCG | LEVOTHYROXINE SODIUM TAB 137 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 150MCG | LEVOTHYROXINE SODIUM TAB 150 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 175MCG | LEVOTHYROXINE SODIUM TAB 175 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 200MCG | LEVOTHYROXINE SODIUM TAB 200 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 25MCG | LEVOTHYROXINE SODIUM TAB 25 MCG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 300 MCG | LEVOTHYROXINE SODIUM TAB 300 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 50MCG | LEVOTHYROXINE SODIUM TAB 50 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 75MCG | LEVOTHYROXINE SODIUM TAB 75 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVO-T TAB 88MCG | LEVOTHYROXINE SODIUM TAB 88 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 100MCG | LEVOTHYROXINE SODIUM CAP 100 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 112MCG | LEVOTHYROXINE SODIUM CAP 112 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 125MCG | LEVOTHYROXINE SODIUM CAP 125 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 137MCG | LEVOTHYROXINE SODIUM CAP 137 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 13MCG | LEVOTHYROXINE SODIUM CAP 13 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 150MCG | LEVOTHYROXINE SODIUM CAP 150 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 175MCG | LEVOTHYROXINE SODIUM CAP 175 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 200MCG | LEVOTHYROXINE SODIUM CAP 200 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 25MCG | LEVOTHYROXINE SODIUM CAP 25 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 50MCG | LEVOTHYROXINE SODIUM CAP 50 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 75MCG | LEVOTHYROXINE SODIUM CAP 75 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN CAP 88MCG | LEVOTHYROXINE SODIUM CAP 88 MCG | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 100MCG | LEVOTHYROXINE SODIUM TAB 100 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 112MCG | LEVOTHYROXINE SODIUM TAB 112 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 125MCG | LEVOTHYROXINE SODIUM TAB 125 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 137MCG | LEVOTHYROXINE SODIUM TAB 137 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 150MCG | LEVOTHYROXINE SODIUM TAB 150 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 175MCG | LEVOTHYROXINE SODIUM TAB 175 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 200MCG | LEVOTHYROXINE SODIUM TAB 200 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 25MCG | LEVOTHYROXINE SODIUM TAB 25 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 300MCG | LEVOTHYROXINE SODIUM TAB 300 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 50MCG | LEVOTHYROXINE SODIUM TAB 50 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 75MCG | LEVOTHYROXINE SODIUM TAB 75 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOTHYROXIN TAB 88MCG | LEVOTHYROXINE SODIUM TAB 88 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 100MCG | LEVOTHYROXINE SODIUM TAB 100 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 112MCG | LEVOTHYROXINE SODIUM TAB 112 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 125MCG | LEVOTHYROXINE SODIUM TAB 125 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 137MCG | LEVOTHYROXINE SODIUM TAB 137 MCG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|------------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 150MCG | LEVOTHYROXINE SODIUM TAB 150 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 175MCG | LEVOTHYROXINE SODIUM TAB 175 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 200MCG | LEVOTHYROXINE SODIUM TAB 200 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 25MCG | LEVOTHYROXINE SODIUM TAB 25 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 50MCG | LEVOTHYROXINE SODIUM TAB 50 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 75MCG | LEVOTHYROXINE SODIUM TAB 75 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LEVOXYL TAB 88MCG | LEVOTHYROXINE SODIUM TAB 88 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LIOTHYRONINE TAB 25MCG | LIOTHYRONINE SODIUM TAB 25 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LIOTHYRONINE TAB 50MCG | LIOTHYRONINE SODIUM TAB 50 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | LIOTHYRONINE TAB 5MCG | LIOTHYRONINE SODIUM TAB 5 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 100MCG | LEVOTHYROXINE SODIUM TAB 100 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 112MCG | LEVOTHYROXINE SODIUM TAB 112 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 125MCG | LEVOTHYROXINE SODIUM TAB 125 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 137MCG | LEVOTHYROXINE SODIUM TAB 137 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 150MCG | LEVOTHYROXINE SODIUM TAB 150 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 175MCG | LEVOTHYROXINE SODIUM TAB 175 MCG | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-----------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 200MCG | LEVOTHYROXINE SODIUM TAB 200 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 25MCG | LEVOTHYROXINE SODIUM TAB 25 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 300MCG | LEVOTHYROXINE SODIUM TAB 300 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 50MCG | LEVOTHYROXINE SODIUM TAB 50 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 75MCG | LEVOTHYROXINE SODIUM TAB 75 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | SYNTHROID TAB 88MCG | LEVOTHYROXINE SODIUM TAB 88 MCG | Tier 3 | | | X | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | THYQUIDITY SOL 100MCG | LEVOTHYROXINE SODIUM ORAL SOLUTION 100 MCG/5ML | Tier 3 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 100MCG | LEVOTHYROXINE SODIUM CAP 100 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 112MCG | LEVOTHYROXINE SODIUM CAP 112 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 125MCG | LEVOTHYROXINE SODIUM CAP 125 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 137MCG | LEVOTHYROXINE SODIUM CAP 137 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 13MCG | LEVOTHYROXINE SODIUM CAP 13 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 150MCG | LEVOTHYROXINE SODIUM CAP 150 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 175MCG | LEVOTHYROXINE SODIUM CAP 175 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 200 | LEVOTHYROXINE SODIUM CAP 200 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 25MCG | LEVOTHYROXINE SODIUM CAP 25 MCG | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 37.5MCG | LEVOTHYROXINE SODIUM CAP 37.5 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 44MCG | LEVOTHYROXINE SODIUM CAP 44 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 50MCG | LEVOTHYROXINE SODIUM CAP 50 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 62.5MCG | LEVOTHYROXINE SODIUM CAP 62.5 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 75MCG | LEVOTHYROXINE SODIUM CAP 75 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT CAP 88MCG | LEVOTHYROXINE SODIUM CAP 88 MCG | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 100MCG | LEVOTHYROXINE SODIUM ORAL SOLUTION 100 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 112MCG | LEVOTHYROXINE SODIUM ORAL SOLUTION 112 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 125MCG | LEVOTHYROXINE SODIUM ORAL SOLUTION 125 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 137MCG | LEVOTHYROXINE SODIUM ORAL SOLUTION 137 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 13MCG/ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 13 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 150MCG | LEVOTHYROXINE SODIUM ORAL SOLUTION 150 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 175MCG | LEVOTHYROXINE SODIUM ORAL SOLUTION 175 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 200MCG | LEVOTHYROXINE SODIUM ORAL SOLUTION 200 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 25MCG/ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 25 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 37.5/ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 37.5 MCG/ML | Tier 2 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 44MCG/ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 44 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 50MCG/ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 50 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 62.5/ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 62.5 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 75MCG/ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 75 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | TIROSINT-SOL SOL 88MCG/ML | LEVOTHYROXINE SODIUM ORAL SOLUTION 88 MCG/ML | Tier 2 | X | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 100MCG | LEVOTHYROXINE SODIUM TAB 100 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 112MCG | LEVOTHYROXINE SODIUM TAB 112 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 125MCG | LEVOTHYROXINE SODIUM TAB 125 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 137MCG | LEVOTHYROXINE SODIUM TAB 137 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 150MCG | LEVOTHYROXINE SODIUM TAB 150 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 175MCG | LEVOTHYROXINE SODIUM TAB 175 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 200MCG | LEVOTHYROXINE SODIUM TAB 200 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 25MCG | LEVOTHYROXINE SODIUM TAB 25 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 300MCG | LEVOTHYROXINE SODIUM TAB 300 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 50MCG | LEVOTHYROXINE SODIUM TAB 50 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 75MCG | LEVOTHYROXINE SODIUM TAB 75 MCG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|------------------------|---------------------------------|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) | UNITHROID TAB 88MCG | LEVOTHYROXINE SODIUM TAB 88 MCG | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | ARMOUR THYRO TAB 120MG | THYROID TAB 120 MG (2 GRAIN) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | ARMOUR THYRO TAB 15MG | THYROID TAB 15 MG (1/4 GRAIN) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | ARMOUR THYRO TAB 180MG | THYROID TAB 180 MG (3 GRAIN) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | ARMOUR THYRO TAB 240MG | THYROID TAB 240 MG (4 GRAIN) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | ARMOUR THYRO TAB 300MG | THYROID TAB 300 MG (5 GRAIN) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | ARMOUR THYRO TAB 30MG | THYROID TAB 30 MG (1/2 GRAIN) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | ARMOUR THYRO TAB 60MG | THYROID TAB 60 MG (1 GRAIN) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | ARMOUR THYRO TAB 90MG | THYROID TAB 90 MG (1 1/2 GRAIN) | Tier 2 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NIVA THYROID TAB 120MG | THYROID TAB 120 MG (2 GRAIN) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NIVA THYROID TAB 15MG | THYROID TAB 15 MG (1/4 GRAIN) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NIVA THYROID TAB 30MG | THYROID TAB 30 MG (1/2 GRAIN) | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-----------------------|----------------------------------|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NIVA THYROID TAB 60MG | THYROID TAB 60 MG (1 GRAIN) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NIVA THYROID TAB 90MG | THYROID TAB 90 MG (1 1/2 GRAIN) | Tier 3 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NP THYROID TAB 120MG | THYROID TAB 120 MG (2 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NP THYROID TAB 15MG | THYROID TAB 15 MG (1/4 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NP THYROID TAB 30MG | THYROID TAB 30 MG (1/2 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NP THYROID TAB 60MG | THYROID TAB 60 MG (1 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | NP THYROID TAB 90MG | THYROID TAB 90 MG (1 1/2 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | THYROID TAB 120MG | THYROID TAB 120 MG (2 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | THYROID TAB 15MG | THYROID TAB 15 MG (1/4 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | THYROID TAB 30MG | THYROID TAB 30 MG (1/2 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | THYROID TAB 60MG | THYROID TAB 60 MG (1 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones | THYROID TAB 90MG | THYROID TAB 90 MG (1 1/2 GRAIN) | Tier 1 | | | | |
| Hormonal Agents, Suppressant (Adrenal) | ISTURISA TAB 10MG | OSILODROSTAT PHOSPHATE TAB 10 MG | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|-------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Suppressant (Adrenal) | ISTURISA TAB 1MG | OSILODROSTAT PHOSPHATE TAB 1 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Adrenal) | ISTURISA TAB 5MG | OSILODROSTAT PHOSPHATE TAB 5 MG | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Adrenal) | LYSODREN TAB 500MG | MITOTANE TAB 500 MG | Tier 2 | | | | |
| Hormonal Agents, Suppressant (Adrenal) | RECORLEV TAB 150MG | LEVOKETOCONAZOLE TAB 150 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Suppressant (Pituitary) | CABERGOLINE TAB 0.5MG | CABERGOLINE TAB 0.5 MG | Tier 1 | | | | |
| Hormonal Agents, Suppressant (Pituitary) | FIRMAGON INJ 120MG | DEGARELIX ACETATE FOR INJ 120 MG/VIAL (240 MG DOSE) | Tier 3 | | | | X |
| Hormonal Agents, Suppressant (Pituitary) | FIRMAGON INJ 80MG | DEGARELIX ACETATE FOR INJ 80 MG (BASE EQUIV) | Tier 3 | | | | X |
| Hormonal Agents, Suppressant (Pituitary) | LANREOTIDE INJ 120/.5ML | LANREOTIDE ACETATE EXTENDED RELEASE INJ 120 MG/0.5ML | Tier 3 | | | X | X |
| Hormonal Agents, Suppressant (Pituitary) | LEUPROLIDE INJ 14 DAY | LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | LEUPROLIDE INJ 1MG/0.2 | LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | LEUPROLIDE KIT 14 DAY | LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | LEUPROLIDE KIT 1MG/0.2 | LEUPROLIDE ACETATE INJ KIT 1 MG/0.2ML (5 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | MYCAPSSA CAP 20MG | OCTREOTIDE ACETATE CAP DELAYED RELEASE 20 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 1000/5ML | OCTREOTIDE ACETATE INJ 200 MCG/ML (0.2 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 1000MCG | OCTREOTIDE ACETATE INJ 1000 MCG/ML (1 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 100MCG | OCTREOTIDE ACETATE INJ 100 MCG/ML (0.1 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 100MCG | OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 100 MCG/ML | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 200MCG | OCTREOTIDE ACETATE INJ 200 MCG/ML (0.2 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 5000/5ML | OCTREOTIDE ACETATE INJ 1000 MCG/ML (1 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 500MCG | OCTREOTIDE ACETATE INJ 500 MCG/ML (0.5 MG/ML) | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 500MCG | OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 500 MCG/ML | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 50MCG/ML | OCTREOTIDE ACETATE INJ 50 MCG/ML (0.05 MG/ML) | Tier 1 | X | | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Suppressant (Pituitary) | OCTREOTIDE INJ 50MCG/ML | OCTREOTIDE ACETATE SUBCUTANEOUS SOLN PREF SYR 50 MCG/ML | Tier 1 | X | | | X |
| Hormonal Agents, Suppressant (Pituitary) | ORIAHNN CAP | ELAGOLIX-ESTRAD-NORETH 300-1-0.5MG & ELAGOLIX 300MG CAP PACK | Tier 2 | X | X | | |
| Hormonal Agents, Suppressant (Pituitary) | ORLISSA TAB 150MG | ELAGOLIX SODIUM TAB 150 MG (BASE EQUIV) | Tier 2 | X | X | | |
| Hormonal Agents, Suppressant (Pituitary) | ORLISSA TAB 200MG | ELAGOLIX SODIUM TAB 200 MG (BASE EQUIV) | Tier 2 | X | X | | |
| Hormonal Agents, Suppressant (Pituitary) | SANDOSTATIN INJ 100MCG | OCTREOTIDE ACETATE INJ 100 MCG/ML (0.1 MG/ML) | Tier 3 | X | | X | X |
| Hormonal Agents, Suppressant (Pituitary) | SANDOSTATIN INJ 500MCG | OCTREOTIDE ACETATE INJ 500 MCG/ML (0.5 MG/ML) | Tier 3 | X | | X | X |
| Hormonal Agents, Suppressant (Pituitary) | SANDOSTATIN INJ 50MCG/ML | OCTREOTIDE ACETATE INJ 50 MCG/ML (0.05 MG/ML) | Tier 3 | X | | X | X |
| Hormonal Agents, Suppressant (Pituitary) | SIGNIFOR INJ 0.3MG/ML | PASIREOTIDE DIASPARTATE INJ 0.3 MG/ML (BASE EQUIV) | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Pituitary) | SIGNIFOR INJ 0.6MG/ML | PASIREOTIDE DIASPARTATE INJ 0.6 MG/ML (BASE EQUIV) | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Pituitary) | SIGNIFOR INJ 0.9MG/ML | PASIREOTIDE DIASPARTATE INJ 0.9 MG/ML (BASE EQUIV) | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Pituitary) | SOMATULINE INJ 120/.5ML | LANREOTIDE ACETATE EXTENDED RELEASE INJ 120 MG/0.5ML | Tier 3 | | | | X |
| Hormonal Agents, Suppressant (Pituitary) | SOMATULINE INJ 60/0.2ML | LANREOTIDE ACETATE EXTENDED RELEASE INJ 60 MG/0.2ML | Tier 3 | | | | X |
| Hormonal Agents, Suppressant (Pituitary) | SOMATULINE INJ 90/0.3ML | LANREOTIDE ACETATE EXTENDED RELEASE INJ 90 MG/0.3ML | Tier 3 | | | | X |
| Hormonal Agents, Suppressant (Pituitary) | SOMAVERT INJ 10MG | PEGVISOMANT FOR INJ 10 MG (AS PROTEIN) | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Pituitary) | SOMAVERT INJ 15MG | PEGVISOMANT FOR INJ 15 MG (AS PROTEIN) | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Pituitary) | SOMAVERT INJ 20MG | PEGVISOMANT FOR INJ 20 MG (AS PROTEIN) | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Pituitary) | SOMAVERT INJ 25MG | PEGVISOMANT FOR INJ 25 MG (AS PROTEIN) | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Pituitary) | SOMAVERT INJ 30MG | PEGVISOMANT FOR INJ 30 MG (AS PROTEIN) | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Pituitary) | SYNAREL SOL 2MG/ML | NAFARELIN ACETATE NASAL SOLN 2 MG/ML (200 MCG/ACT) (BASE EQ) | Tier 2 | | | | |
| Hormonal Agents, Suppressant (Pituitary) - Drugs to Regulate Hormones | CETRORELIX INJ 0.25MG | CETRORELIX ACETATE FOR INJ KIT 0.25 MG | Tier 1 | X | X | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Hormonal Agents, Suppressant (Pituitary) - Drugs to Regulate Hormones | CETROTIDE KIT 0.25MG | CETRORELIX ACETATE FOR INJ KIT 0.25 MG | Tier 3 | X | X | X | X |
| Hormonal Agents, Suppressant (Pituitary) - Drugs to Regulate Hormones | FYREMADEL SOL 250/0.5 | GANIRELIX ACETATE SOLN PREFILLED SYRINGE 250 MCG/0.5ML | Tier 1 | | X | | X |
| Hormonal Agents, Suppressant (Pituitary) - Drugs to Regulate Hormones | GANIRELIX AC INJ 250/0.5 | GANIRELIX ACETATE SOLN PREFILLED SYRINGE 250 MCG/0.5ML | Tier 1 | | X | | X |
| Hormonal Agents, Suppressant (Pituitary) - Drugs to Regulate Hormones | MENOPUR INJ 75UNIT | MENOTROPINS FOR SUBCUTANEOUS INJ 75 UNIT | Tier 3 | X | X | | X |
| Hormonal Agents, Suppressant (Thyroid) | METHIMAZOLE TAB 10MG | METHIMAZOLE TAB 10 MG | Tier 1 | | | | |
| Hormonal Agents, Suppressant (Thyroid) | METHIMAZOLE TAB 5MG | METHIMAZOLE TAB 5 MG | Tier 1 | | | | |
| Hormonal Agents, Suppressant (Thyroid) | PROPYLTHIOUR TAB 50MG | PROPYLTHIOURACIL TAB 50 MG | Tier 1 | | | | |
| Immune Suppressants - Immune System Drugs | LUPKYNIS CAP 7.9MG | VOCLOSPORIN CAP 7.9 MG | Tier 3 | X | X | | X |
| Immunological Agents | ACTEMRA INJ 162/0.9 | TOCILIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 162 MG/0.9ML | Tier 3 | X | X | X | X |
| Immunological Agents | ACTEMRA INJ ACTPEN | TOCILIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 162 MG/0.9ML | Tier 3 | X | X | X | X |
| Immunological Agents | ACTHIB INJ | HAEMOPHILUS B POLYSACCHARIDE CONJUGATE VACCINE FOR INJ | HCR | | | | |
| Immunological Agents | ACTIMMUNE INJ 2MU/0.5 | INTERFERON GAMMA-1B INJ 100 MCG/0.5ML (2000000 UNIT/0.5ML) | Tier 2 | X | X | | X |
| Immunological Agents | ADACEL INJ | TET TOX-DIPH-ACELL PERTUSS AD INJ 5-2-15.5 LF-LF-MCG/0.5ML | HCR | | | | |
| Immunological Agents | ADBRY INJ 150MG/ML | TRALOKINUMAB-LDRM SUBCUTANEOUS SOLN PREFILLED SYR 150 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | ARAVAL TAB 10MG | LEFLUNOMIDE TAB 10 MG | Tier 3 | | | X | |
| Immunological Agents | ARAVAL TAB 20MG | LEFLUNOMIDE TAB 20 MG | Tier 3 | | | X | |
| Immunological Agents | ARCALYST INJ 220MG | RILONACEPT FOR INJ 220 MG | Tier 2 | X | | | X |
| Immunological Agents | ASTAGRAF XL CAP 0.5MG | TACROLIMUS CAP ER 24HR 0.5 MG | Tier 3 | | | X | |
| Immunological Agents | ASTAGRAF XL CAP 1MG | TACROLIMUS CAP ER 24HR 1 MG | Tier 3 | | | X | |
| Immunological Agents | ASTAGRAF XL CAP 5MG | TACROLIMUS CAP ER 24HR 5 MG | Tier 3 | | | X | |
| Immunological Agents | AZASAN TAB 100MG | AZATHIOPRINE TAB 100 MG | Tier 3 | | | | |
| Immunological Agents | AZASAN TAB 75 MG | AZATHIOPRINE TAB 75 MG | Tier 3 | | | | |
| Immunological Agents | AZATHIOPRINE TAB 100MG | AZATHIOPRINE TAB 100 MG | Tier 1 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | AZATHIOPRINE TAB 50MG | AZATHIOPRINE TAB 50 MG | Tier 1 | | | | |
| Immunological Agents | AZATHIOPRINE TAB 75MG | AZATHIOPRINE TAB 75 MG | Tier 1 | | | | |
| Immunological Agents | BENLYSTA INJ 200MG/ML | BELIMUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | BENLYSTA INJ 200MG/ML | BELIMUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | BERINERT INJ 500UNIT | C1 ESTERASE INHIBITOR (HUMAN) FOR IV INJ KIT 500 UNIT | Tier 3 | X | X | X | X |
| Immunological Agents | BEXSERO INJ | MENINGOCOCCAL VAC B (RECOMB OMV ADJUV) INJ PREFILLED SYRINGE | HCR | | | | |
| Immunological Agents | BOOSTRIX INJ | TET TOX-DIPH-ACELL PERTUSS AD INJ 5-2.5-18.5 LF-LF-MCG/0.5ML | HCR | | | | |
| Immunological Agents | BOOSTRIX INJ | TET-DIPH-ACELL PERTUSS AD PREF SYR 5-2.5-18.5 LF-MCG/0.5ML | HCR | | | | |
| Immunological Agents | CELLCEPT CAP 250MG | MYCOPHENOLATE MOFETIL CAP 250 MG | Tier 3 | | | X | |
| Immunological Agents | CELLCEPT SUS 200MG/ML | MYCOPHENOLATE MOFETIL FOR ORAL SUSP 200 MG/ML | Tier 3 | | | X | |
| Immunological Agents | CELLCEPT TAB 500MG | MYCOPHENOLATE MOFETIL TAB 500 MG | Tier 3 | | | X | |
| Immunological Agents | CIMZIA PREFL KIT 200MG/ML | CERTOLIZUMAB PEGOL PREFILLED SYRINGE KIT 200 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | CIMZIA START KIT 200MG/ML | CERTOLIZUMAB PEGOL PREFILLED SYRINGE KIT 6 X 200 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | CINRYZE SOL 500 UNIT | C1 ESTERASE INHIBITOR (HUMAN) FOR IV INJ 500 UNIT | Tier 3 | X | X | X | X |
| Immunological Agents | COSENTYX INJ 150MG/ML | SECUKINUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/ML | Tier 3 | X | X | X | X |
| Immunological Agents | COSENTYX INJ 300DOSE | SECUKINUMAB SUBCUTANEOUS PREF SYR 150 MG/ML (300 MG DOSE) | Tier 3 | X | X | X | X |
| Immunological Agents | COSENTYX INJ 75MG/0.5 | SECUKINUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 75 MG/0.5ML | Tier 3 | X | X | X | |
| Immunological Agents | COSENTYX PEN INJ 150MG/ML | SECUKINUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 150 MG/ML | Tier 3 | X | X | X | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Immunological Agents | COSENTYX PEN INJ 300DOSE | SECUKINUMAB SUBCUTANEOUS AUTO-INJ 150 MG/ML (300 MG DOSE) | Tier 3 | X | X | X | X |
| Immunological Agents | COSENTYX UNO INJ 300/2ML | SECUKINUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML | Tier 3 | X | X | X | X |
| Immunological Agents | CYCLOSPORINE CAP 100MG | CYCLOSPORINE CAP 100 MG | Tier 1 | | | | |
| Immunological Agents | CYCLOSPORINE CAP 100MG MD | CYCLOSPORINE MODIFIED CAP 100 MG | Tier 1 | | | | |
| Immunological Agents | CYCLOSPORINE CAP 25MG | CYCLOSPORINE CAP 25 MG | Tier 1 | | | | |
| Immunological Agents | CYCLOSPORINE CAP 25MG MOD | CYCLOSPORINE MODIFIED CAP 25 MG | Tier 1 | | | | |
| Immunological Agents | CYCLOSPORINE CAP 50MG MOD | CYCLOSPORINE MODIFIED CAP 50 MG | Tier 1 | | | | |
| Immunological Agents | CYCLOSPORINE SOL MODIFIED | CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML | Tier 1 | | | | |
| Immunological Agents | DAPTACEL INJ | DIPH, ACELLULAR PERT & TET TOX INJ 15 LF-23 MCG-5 LF/0.5ML | HCR | | | | |
| Immunological Agents | DUPIXENT INJ 100/0.67 | DUPILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/0.67ML | Tier 2 | X | X | | X |
| Immunological Agents | DUPIXENT INJ 200/1.14 | DUPILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 200 MG/1.14ML | Tier 2 | X | X | | X |
| Immunological Agents | DUPIXENT INJ 200MG | DUPILUMAB SUBCUTANEOUS SOLN PEN-INJECTOR 200 MG/1.14ML | Tier 2 | X | X | | X |
| Immunological Agents | DUPIXENT INJ 300/2ML | DUPILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 300 MG/2ML | Tier 2 | X | X | | X |
| Immunological Agents | DUPIXENT INJ 300/2ML | DUPILUMAB SUBCUTANEOUS SOLN PEN-INJECTOR 300 MG/2ML | Tier 2 | X | X | | X |
| Immunological Agents | ENBREL INJ 25/0.5ML | ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 25 MG/0.5ML | Tier 2 | X | X | | X |
| Immunological Agents | ENBREL INJ 25MG | ETANERCEPT SUBCUTANEOUS INJ 25 MG/0.5ML | Tier 2 | X | X | | X |
| Immunological Agents | ENBREL INJ 25MG | ETANERCEPT FOR SUBCUTANEOUS INJ 25 MG | Tier 2 | X | X | | X |
| Immunological Agents | ENBREL INJ 50MG/ML | ETANERCEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | ENBREL MINI INJ 50MG/ML | ETANERCEPT SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML | Tier 2 | X | X | | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | ENBREL SRCLK INJ 50MG/ML | ETANERCEPT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | ENGERIX-B INJ 10/0.5ML | HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/0.5ML | HCR | | | | |
| Immunological Agents | ENGERIX-B INJ 20MCG/ML | HEPATITIS B VACCINE (RECOMBINANT) SUSP 20 MCG/ML | HCR | | | | |
| Immunological Agents | ENGERIX-B INJ 20MCG/ML | HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 20 MCG/ML | HCR | | | | |
| Immunological Agents | ENSPRYNG INJ | SATRALIZUMAB-MWGE SUBCUTANEOUS SOLN PREF SYRINGE 120 MG/ML | Tier 3 | X | X | | X |
| Immunological Agents | ENTYVIO INJ 108/0.68 | VEDOLIZUMAB SOLN PEN-INJECTOR 108 MG/0.68ML | Tier 3 | X | X | | X |
| Immunological Agents | ENVARBUS XR TAB 0.75MG | TACROLIMUS TAB ER 24HR 0.75 MG | Tier 3 | | | X | |
| Immunological Agents | ENVARBUS XR TAB 1MG | TACROLIMUS TAB ER 24HR 1 MG | Tier 3 | | | X | |
| Immunological Agents | ENVARBUS XR TAB 4MG | TACROLIMUS TAB ER 24HR 4 MG | Tier 3 | | | X | |
| Immunological Agents | EVEROLIMUS TAB 0.25MG | EVEROLIMUS TAB 0.25 MG | Tier 1 | | | | |
| Immunological Agents | EVEROLIMUS TAB 0.5 MG | EVEROLIMUS TAB 0.5 MG | Tier 1 | | | | |
| Immunological Agents | EVEROLIMUS TAB 0.75MG | EVEROLIMUS TAB 0.75 MG | Tier 1 | | | | |
| Immunological Agents | EVEROLIMUS TAB 1MG | EVEROLIMUS TAB 1 MG | Tier 1 | | | | |
| Immunological Agents | FIRAZYR INJ 30MG/3ML | ICATIBANT ACETATE SUBCUTANEOUS SOLN PREF SYR 30 MG/3ML | Tier 3 | X | X | X | X |
| Immunological Agents | GARDASIL 9 INJ | HUMAN PAPILLOMAVIRUS (HPV) 9-VALENT RECOMB VAC IM SUSP | HCR | | | | |
| Immunological Agents | GARDASIL 9 INJ | HUMAN PAPILLOMAVIRUS (HPV) 9-VALENT RECOMB VAC SUSP PREF SYR | HCR | | | | |
| Immunological Agents | GENGRAF CAP 100MG | CYCLOSPORINE MODIFIED CAP 100 MG | Tier 1 | | | | |
| Immunological Agents | GENGRAF CAP 25MG | CYCLOSPORINE MODIFIED CAP 25 MG | Tier 1 | | | | |
| Immunological Agents | GENGRAF SOL 100MG/ML | CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML | Tier 1 | | | | |
| Immunological Agents | GRASTEK SUB 2800BAU | TIMOTHY GRASS POLLEN ALLERGEN EXT SL TAB 2800 BAU | Tier 3 | X | X | | |
| Immunological Agents | HAEGARDA INJ 2000UNIT | C1 ESTERASE INHIBITOR (HUMAN) FOR SUBCUTANEOUS INJ 2000 UNIT | Tier 2 | X | X | | X |
| Immunological Agents | HAEGARDA INJ 3000UNIT | C1 ESTERASE INHIBITOR (HUMAN) FOR SUBCUTANEOUS INJ 3000 UNIT | Tier 2 | X | X | | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | HAVRIX INJ 1440UNIT | HEPATITIS A VACCINE INJ SUSP 1440 EL UNIT/ML | HCR | | | | |
| Immunological Agents | HAVRIX INJ 720UNIT | HEPATITIS A VACCINE INJ SUSP 720 EL UNIT/0.5ML | HCR | | | | |
| Immunological Agents | HIBERIX SOL 10MCG | HAEMOPHILUS B POLYSACCHARIDE CONJUGATE VAC FOR INJ 10 MCG | HCR | | | | |
| Immunological Agents | HUMIRA INJ 10/0.1ML | ADALIMUMAB PREFILLED SYRINGE KIT 10 MG/0.1ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA INJ 10/0.1ML | ADALIMUMAB PREFILLED SYRINGE KIT 10 MG/0.1ML | Tier 3 | X | X | X | X |
| Immunological Agents | HUMIRA INJ 20/0.2ML | ADALIMUMAB PREFILLED SYRINGE KIT 20 MG/0.2ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA INJ 20/0.2ML | ADALIMUMAB PREFILLED SYRINGE KIT 20 MG/0.2ML | Tier 3 | X | X | X | X |
| Immunological Agents | HUMIRA INJ 40/0.4ML | ADALIMUMAB PREFILLED SYRINGE KIT 40 MG/0.4ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA INJ 40/0.4ML | ADALIMUMAB PREFILLED SYRINGE KIT 40 MG/0.4ML | Tier 3 | X | X | X | X |
| Immunological Agents | HUMIRA KIT 40MG/0.8 | ADALIMUMAB PREFILLED SYRINGE KIT 40 MG/0.8ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEDIA INJ CROHNS | ADALIMUMAB PREFILLED SYRINGE KIT 80 MG/0.8ML & 40 MG/0.4ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEDIA INJ CROHNS | ADALIMUMAB PREFILLED SYRINGE KIT 80 MG/0.8ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEN INJ 40/0.4ML | ADALIMUMAB PEN-INJECTOR KIT 40 MG/0.4ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEN INJ 40/0.4ML | ADALIMUMAB PEN-INJECTOR KIT 40 MG/0.4ML | Tier 3 | X | X | X | X |
| Immunological Agents | HUMIRA PEN INJ 40MG/0.8 | ADALIMUMAB PEN-INJECTOR KIT 40 MG/0.8ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEN INJ 80/0.8ML | ADALIMUMAB PEN-INJECTOR KIT 80 MG/0.8ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEN INJ CD/UC/HS | ADALIMUMAB PEN-INJECTOR KIT 40 MG/0.8ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEN INJ PS/UV | ADALIMUMAB PEN-INJECTOR KIT 40 MG/0.8ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEN KIT 80/0.8ML | ADALIMUMAB PEN-INJECTOR KIT 80 MG/0.8ML | Tier 3 | X | X | X | X |
| Immunological Agents | HUMIRA PEN KIT CD/UC/HS | ADALIMUMAB PEN-INJECTOR KIT 80 MG/0.8ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEN KIT PED UC | ADALIMUMAB PEN-INJECTOR KIT 80 MG/0.8ML | Tier 2 | X | X | | X |
| Immunological Agents | HUMIRA PEN KIT PS/UV | ADALIMUMAB PEN-INJECTOR KIT 80 MG/0.8ML & 40 MG/0.4ML | Tier 2 | X | X | | X |
| Immunological Agents | ICATIBANT INJ 30MG/3ML | ICATIBANT ACETATE SUBCUTANEOUS SOLN PREF SYR 30 MG/3ML | Tier 1 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | ILUMYA SOL 100MG/ML | TILDRAKIZUMAB-ASMN SUBCUTANEOUS SOLN PREF SYRINGE 100 MG/ML | Tier 3 | X | X | X | X |
| Immunological Agents | IMURAN TAB 50MG | AZATHIOPRINE TAB 50 MG | Tier 3 | | | X | |
| Immunological Agents | INFANRIX INJ | DIPH, ACELLULAR PERT & TET TOX INJ 25 LF-58 MCG-10 LF/0.5ML | HCR | | | | |
| Immunological Agents | INTRON A INJ 10MU | INTERFERON ALFA-2B FOR INJ 10000000 UNIT | Tier 3 | | | | X |
| Immunological Agents | INTRON A INJ 18MU | INTERFERON ALFA-2B FOR INJ 18000000 UNIT | Tier 3 | | | | X |
| Immunological Agents | INTRON A INJ 50MU | INTERFERON ALFA-2B FOR INJ 50000000 UNIT | Tier 3 | | | | X |
| Immunological Agents | IPOL INJ INACTIVE | POLIOVIRUS VACCINE, IPV INJECTION | HCR | | | | |
| Immunological Agents | JYLAMVO SOL 2MG/ML | METHOTREXATE ORAL SOLN 2 MG/ML | Tier 3 | X | | | |
| Immunological Agents | KEVZARA INJ 150/1.14 | SARILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/1.14ML | Tier 3 | X | X | X | X |
| Immunological Agents | KEVZARA INJ 150/1.14 | SARILUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML | Tier 3 | X | X | X | X |
| Immunological Agents | KEVZARA INJ 200/1.14 | SARILUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 200 MG/1.14ML | Tier 3 | X | X | X | X |
| Immunological Agents | KEVZARA INJ 200/1.14 | SARILUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML | Tier 3 | X | X | X | X |
| Immunological Agents | KINERET INJ | ANAKINRA SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/0.67ML | Tier 3 | X | X | X | X |
| Immunological Agents | LEFLUNOMIDE TAB 10MG | LEFLUNOMIDE TAB 10 MG | Tier 1 | | | | |
| Immunological Agents | LEFLUNOMIDE TAB 20MG | LEFLUNOMIDE TAB 20 MG | Tier 1 | | | | |
| Immunological Agents | MENQUADFI INJ | MENINGOCOCCAL (A, C, Y, AND W-135) TETANUS CONJUGATE VACCINE | HCR | | | | |
| Immunological Agents | MENVEO INJ | MENINGOCOCCAL (A, C, Y, AND W-135) OLIGO CONJ VAC FOR INJ | HCR | | | | |
| Immunological Agents | MENVEO SOL | MENINGOCOCCAL (A, C, Y, AND W-135) OLIGO CONJ VAC IM SOLN | HCR | | | X | |
| Immunological Agents | METHOTREXATE INJ 1GM | METHOTREXATE SODIUM FOR INJ 1 GM | Tier 1 | | | | |
| Immunological Agents | METHOTREXATE INJ 1GM/40ML | METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML) | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | METHOTREXATE INJ 250/10ML | METHOTREXATE SODIUM INJ PF 250 MG/10ML (25 MG/ML) | Tier 1 | | | | |
| Immunological Agents | METHOTREXATE INJ 25MG/ML | METHOTREXATE SODIUM INJ 50 MG/2ML (25 MG/ML) | Tier 1 | | | | |
| Immunological Agents | METHOTREXATE INJ 25MG/ML | METHOTREXATE SODIUM INJ PF 1000 MG/40ML (25 MG/ML) | Tier 1 | | | | |
| Immunological Agents | METHOTREXATE INJ 25MG/ML | METHOTREXATE SODIUM INJ 250 MG/10ML (25 MG/ML) | Tier 1 | | | | |
| Immunological Agents | METHOTREXATE INJ 50MG/2ML | METHOTREXATE SODIUM INJ PF 50 MG/2ML (25 MG/ML) | Tier 1 | | | | |
| Immunological Agents | METHOTREXATE POW | METHOTREXATE POWDER | Tier 3 | | | | |
| Immunological Agents | METHOTREXATE TAB 2.5MG | METHOTREXATE SODIUM TAB 2.5 MG (BASE EQUIV) | Tier 1 | | | | |
| Immunological Agents | M-M-R II INJ | MEASLES-MUMPS-RUBELLA VIRUS VACCINES FOR INJ SOLN | HCR | | | | |
| Immunological Agents | MYCOPHENOLAT CAP 250MG | MYCOPHENOLATE MOFETIL CAP 250 MG | Tier 1 | | | | |
| Immunological Agents | MYCOPHENOLAT SUS 200MG/ML | MYCOPHENOLATE MOFETIL FOR ORAL SUSP 200 MG/ML | Tier 1 | | | | |
| Immunological Agents | MYCOPHENOLAT TAB 500MG | MYCOPHENOLATE MOFETIL TAB 500 MG | Tier 1 | | | | |
| Immunological Agents | MYCOPHENOLIC TAB 180MG DR | MYCOPHENOLATE SODIUM TAB DR 180 MG (MYCOPHENOLIC ACID EQUIV) | Tier 1 | | | | |
| Immunological Agents | MYCOPHENOLIC TAB 360MG DR | MYCOPHENOLATE SODIUM TAB DR 360 MG (MYCOPHENOLIC ACID EQUIV) | Tier 1 | | | | |
| Immunological Agents | MYFORTIC TAB 180MG | MYCOPHENOLATE SODIUM TAB DR 180 MG (MYCOPHENOLIC ACID EQUIV) | Tier 3 | | | X | |
| Immunological Agents | MYFORTIC TAB 360MG | MYCOPHENOLATE SODIUM TAB DR 360 MG (MYCOPHENOLIC ACID EQUIV) | Tier 3 | | | X | |
| Immunological Agents | NEORAL CAP 100MG | CYCLOSPORINE MODIFIED CAP 100 MG | Tier 3 | | | X | |
| Immunological Agents | NEORAL CAP 25MG | CYCLOSPORINE MODIFIED CAP 25 MG | Tier 3 | | | X | |
| Immunological Agents | NEORAL SOL 100MG/ML | CYCLOSPORINE MODIFIED ORAL SOLN 100 MG/ML | Tier 3 | | | X | |
| Immunological Agents | ODACTRA SUB | *DUST MITE MIXED EXT SL TAB 12 SQ-HDM*** | Tier 3 | X | X | | |
| Immunological Agents | OLUMIANT TAB 1MG | BARICITINIB TAB 1 MG | Tier 3 | X | X | X | X |
| Immunological Agents | OLUMIANT TAB 2MG | BARICITINIB TAB 2 MG | Tier 3 | X | X | X | X |
| Immunological Agents | OLUMIANT TAB 4MG | BARICITINIB TAB 4 MG | Tier 3 | X | X | X | X |
| Immunological Agents | ORALAIR SUB 300 IR | *GRASS MIXED POLLEN EXT SL TAB 300 IR (INDEX OF REACTIVITY)* | Tier 3 | X | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | ORALAIR ADLT SUB 300 IR | *GRASS MIXED POLLEN EXT SL TAB 300 IR (INDEX OF REACTIVITY)* | Tier 3 | X | X | | |
| Immunological Agents | ORALAIR CHLD SUB 100 IR | *GRASS MIXED POLLEN EXT SL TAB 100 IR (INDEX OF REACTIVITY)* | Tier 3 | X | X | | |
| Immunological Agents | ORENCIA INJ 125MG/ML | ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 125 MG/ML | Tier 3 | X | X | X | X |
| Immunological Agents | ORENCIA INJ 50/0.4ML | ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/0.4ML | Tier 3 | X | | | X |
| Immunological Agents | ORENCIA INJ 87.5/0.7 | ABATACEPT SUBCUTANEOUS SOLN PREFILLED SYRINGE 87.5 MG/0.7ML | Tier 3 | X | | | X |
| Immunological Agents | ORENCIA CLCK INJ 125MG/ML | ABATACEPT SUBCUTANEOUS SOLN AUTO-INJECTOR 125 MG/ML | Tier 3 | X | X | X | X |
| Immunological Agents | OTEZLA TAB 10/20/30 | APREMILAST TAB STARTER THERAPY PACK 10 MG & 20 MG & 30 MG | Tier 2 | X | X | | X |
| Immunological Agents | OTEZLA TAB 30MG | APREMILAST TAB 30 MG | Tier 2 | X | X | | X |
| Immunological Agents | OTREXUP INJ 10MG | METHOTREXATE SOLN PF AUTO-INJECTOR 10 MG/0.4ML | Tier 3 | | X | X | |
| Immunological Agents | OTREXUP INJ 12.5/0.4 | METHOTREXATE SOLN PF AUTO-INJECTOR 12.5 MG/0.4ML | Tier 3 | | X | X | |
| Immunological Agents | OTREXUP INJ 15MG | METHOTREXATE SOLN PF AUTO-INJECTOR 15 MG/0.4ML | Tier 3 | | X | X | |
| Immunological Agents | OTREXUP INJ 17.5/0.4 | METHOTREXATE SOLN PF AUTO-INJECTOR 17.5 MG/0.4ML | Tier 3 | | X | X | |
| Immunological Agents | OTREXUP INJ 20MG | METHOTREXATE SOLN PF AUTO-INJECTOR 20 MG/0.4ML | Tier 3 | | X | | |
| Immunological Agents | OTREXUP INJ 22.5/0.4 | METHOTREXATE SOLN PF AUTO-INJECTOR 22.5 MG/0.4ML | Tier 3 | | X | X | |
| Immunological Agents | OTREXUP INJ 25MG | METHOTREXATE SOLN PF AUTO-INJECTOR 25 MG/0.4ML | Tier 3 | | X | X | |
| Immunological Agents | PEDIARIX INJ 0.5ML | DIPH-TET TOX-ACELL PERT-HEP B-POLIO IPV VAC SUSP PREF SYR | HCR | | | | |
| Immunological Agents | PEDVAX HIB INJ | HAEMOPHILUS B POLYSACCHARIDE CONJ VAC IM SUSP 7.5 MCG/0.5 ML | HCR | | | | |
| Immunological Agents | PEGASYS INJ | PEGINTERFERON ALFA-2A SOLN PREFILLED SYR 180 MCG/0.5ML | Tier 2 | | | | X |
| Immunological Agents | PEGASYS INJ 180MCG/M | PEGINTERFERON ALFA-2A INJ 180 MCG/ML | Tier 2 | | | | X |
| Immunological Agents | PENTACEL INJ | DIPH-AC PER-TET TOX AD-POLIOV-HAEMOPH B POLY VAC FOR IM SUSP | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | PREHEVBRIO SUS 10MCG/ML | HEPATITIS B VACCINE 3-ANTIGEN (RECOMBINANT) SUSP 10 MCG/ML | HCR | | | | |
| Immunological Agents | PRIORIX INJ | MEASLES-MUMPS-RUBELLA VIRUS VACCINES FOR SUBCUTANEOUS SUSP | HCR | | | | |
| Immunological Agents | PROGRAF CAP 0.5MG | TACROLIMUS CAP 0.5 MG | Tier 3 | | | | |
| Immunological Agents | PROGRAF CAP 1MG | TACROLIMUS CAP 1 MG | Tier 3 | | | | |
| Immunological Agents | PROGRAF CAP 5MG | TACROLIMUS CAP 5 MG | Tier 3 | | | | |
| Immunological Agents | PROGRAF GRA 0.2MG | TACROLIMUS PACKET FOR SUSP 0.2 MG | Tier 3 | | | | |
| Immunological Agents | PROGRAF GRA 1MG | TACROLIMUS PACKET FOR SUSP 1 MG | Tier 3 | | | | |
| Immunological Agents | PROQUAD INJ | MEASLES-MUMPS-RUBELLA-VARICELLA VIRUS VACCINES FOR SUSP | HCR | | | | |
| Immunological Agents | QUADRACEL INJ | DIPH-TETANUS TOX AD-ACELL PERT & POLIO VIRUS, IPV VAC INJ | HCR | | | | |
| Immunological Agents | QUADRACEL INJ 0.5ML | DIPH-TETANUS TOX AD-ACELL PERT & POLIO VIRUS, IPV VAC INJ | HCR | | | | |
| Immunological Agents | RAGWITEK SUB | SHORT RAGWEED POLLEN ALLERGEN EXTRACT SL TAB 12 AMB A 1-U | Tier 3 | X | X | | |
| Immunological Agents | RAPAMUNE SOL 1MG/ML | SIROLIMUS ORAL SOLN 1 MG/ML | Tier 3 | | | | |
| Immunological Agents | RAPAMUNE TAB 0.5MG | SIROLIMUS TAB 0.5 MG | Tier 3 | | | X | |
| Immunological Agents | RAPAMUNE TAB 1MG | SIROLIMUS TAB 1 MG | Tier 3 | | | X | |
| Immunological Agents | RAPAMUNE TAB 2MG | SIROLIMUS TAB 2 MG | Tier 3 | | | X | |
| Immunological Agents | RASUVO INJ 10MG | METHOTREXATE SOLN PF AUTO-INJECTOR 10 MG/0.2ML | Tier 2 | | X | | |
| Immunological Agents | RASUVO INJ 12.5MG | METHOTREXATE SOLN PF AUTO-INJECTOR 12.5 MG/0.25ML | Tier 2 | | X | | |
| Immunological Agents | RASUVO INJ 15MG | METHOTREXATE SOLN PF AUTO-INJECTOR 15 MG/0.3ML | Tier 2 | | X | | |
| Immunological Agents | RASUVO INJ 17.5MG | METHOTREXATE SOLN PF AUTO-INJECTOR 17.5 MG/0.35ML | Tier 2 | | X | | |
| Immunological Agents | RASUVO INJ 20MG | METHOTREXATE SOLN PF AUTO-INJECTOR 20 MG/0.4ML | Tier 2 | | | | |
| Immunological Agents | RASUVO INJ 20MG | METHOTREXATE SOLN PF AUTO-INJECTOR 20 MG/0.4ML | Tier 2 | | X | | |
| Immunological Agents | RASUVO INJ 22.5MG | METHOTREXATE SOLN PF AUTO-INJECTOR 22.5 MG/0.45ML | Tier 2 | | X | | |
| Immunological Agents | RASUVO INJ 25MG | METHOTREXATE SOLN PF AUTO-INJECTOR 25 MG/0.5ML | Tier 2 | | X | | |
| Immunological Agents | RASUVO INJ 30MG | METHOTREXATE SOLN PF AUTO-INJECTOR 30 MG/0.6ML | Tier 2 | | X | | |
| Immunological Agents | RASUVO INJ 7.5MG | METHOTREXATE SOLN PF AUTO-INJECTOR 7.5 MG/0.15ML | Tier 2 | | X | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Immunological Agents | RECOMBIVA HB INJ 10MCG/ML | HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 10 MCG/ML | HCR | | | | |
| Immunological Agents | RECOMBIVA HB INJ 10MCG/ML | HEPATITIS B VACCINE (RECOMBINANT) SUSP 10 MCG/ML | HCR | | | | |
| Immunological Agents | RECOMBIVA HB INJ 5MCG/0.5 | HEPATITIS B VACCINE (RECOMBINANT) SUSP PREF SYR 5 MCG/0.5ML | HCR | | | | |
| Immunological Agents | RECOMBIVA HB INJ 5MCG/0.5 | HEPATITIS B VACCINE (RECOMBINANT) SUSP 5 MCG/0.5ML | HCR | | | | |
| Immunological Agents | RECOMBIVA-HB INJ 40MCG/ML | HEPATITIS B VACCINE (RECOMBINANT) SUSP 40 MCG/ML | HCR | | | | |
| Immunological Agents | REDITREX INJ 10/.4ML | METHOTREXATE SOLN PREFILLED SYRINGE 10 MG/0.4ML | Tier 3 | | | X | |
| Immunological Agents | REDITREX INJ 12.5/0.5 | METHOTREXATE SOLN PREFILLED SYRINGE 12.5 MG/0.5ML | Tier 3 | | | X | |
| Immunological Agents | REDITREX INJ 15/.6ML | METHOTREXATE SOLN PREFILLED SYRINGE 15 MG/0.6ML | Tier 3 | | | X | |
| Immunological Agents | REDITREX INJ 17.5/0.7 | METHOTREXATE SOLN PREFILLED SYRINGE 17.5 MG/0.7ML | Tier 3 | | | X | |
| Immunological Agents | REDITREX INJ 20/.8ML | METHOTREXATE SOLN PREFILLED SYRINGE 20 MG/0.8ML | Tier 3 | | | X | |
| Immunological Agents | REDITREX INJ 22.5/0.9 | METHOTREXATE SOLN PREFILLED SYRINGE 22.5 MG/0.9ML | Tier 3 | | | X | |
| Immunological Agents | REDITREX INJ 25MG/ML | METHOTREXATE SOLN PREFILLED SYRINGE 25 MG/ML | Tier 3 | | | X | |
| Immunological Agents | REDITREX INJ 7.5/.3ML | METHOTREXATE SOLN PREFILLED SYRINGE 7.5 MG/0.3ML | Tier 3 | | | X | |
| Immunological Agents | RIDAURA CAP 3MG | AURANOFIN CAP 3 MG | Tier 3 | | | | X |
| Immunological Agents | RINVOQ TAB 15MG ER | UPADACITINIB TAB ER 24HR 15 MG | Tier 2 | X | X | | X |
| Immunological Agents | RINVOQ TAB 30MG ER | UPADACITINIB TAB ER 24HR 30 MG | Tier 2 | X | X | | X |
| Immunological Agents | RINVOQ TAB 45MG ER | UPADACITINIB TAB ER 24HR 45 MG | Tier 2 | X | X | | X |
| Immunological Agents | ROTARIX SUS | ROTAVIRUS VACCINE, LIVE ORAL SUSP | HCR | | | | |
| Immunological Agents | ROTARIX SUS | ROTAVIRUS VACCINE, LIVE FOR ORAL SUSP | HCR | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | ROTATEQ SOL | ROTAVIRUS VACCINE, LIVE ORAL PENTAVALENT SOLN | HCR | | | | |
| Immunological Agents | RUCONEST INJ 2100UNIT | C1 ESTERASE INHIBITOR (RECOMBINANT) FOR IV INJ 2100 UNIT | Tier 3 | X | X | | X |
| Immunological Agents | SAJAZIR INJ 30MG/3ML | ICATIBANT ACETATE SUBCUTANEOUS SOLN PREF SYR 30 MG/3ML | Tier 1 | X | X | X | X |
| Immunological Agents | SANDIMMUNE CAP 100MG | CYCLOSPORINE CAP 100 MG | Tier 3 | | | X | |
| Immunological Agents | SANDIMMUNE CAP 25MG | CYCLOSPORINE CAP 25 MG | Tier 3 | | | X | |
| Immunological Agents | SANDIMMUNE SOL 100MG/ML | CYCLOSPORINE ORAL SOLN 100 MG/ML | Tier 3 | | | | |
| Immunological Agents | SHINGRIX INJ 50/0.5ML | ZOSTER VAC RECOMBINANT ADJUVANTED FOR IM INJ 50 MCG/0.5ML | HCR | | | | |
| Immunological Agents | SILIQ INJ 210/1.5 | BRODALUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 210 MG/1.5ML | Tier 3 | X | X | X | X |
| Immunological Agents | SIMPONI INJ 100MG/ML | GOLIMUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 100 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | SIMPONI INJ 100MG/ML | GOLIMUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 100 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | SIMPONI INJ 50/0.5ML | GOLIMUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 50 MG/0.5ML | Tier 2 | X | X | | X |
| Immunological Agents | SIMPONI INJ 50/0.5ML | GOLIMUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 50 MG/0.5ML | Tier 2 | X | X | | X |
| Immunological Agents | SIROLIMUS SOL 1MG/ML | SIROLIMUS ORAL SOLN 1 MG/ML | Tier 1 | | | | |
| Immunological Agents | SIROLIMUS TAB 0.5MG | SIROLIMUS TAB 0.5 MG | Tier 1 | | | | |
| Immunological Agents | SIROLIMUS TAB 1MG | SIROLIMUS TAB 1 MG | Tier 1 | | | | |
| Immunological Agents | SIROLIMUS TAB 2MG | SIROLIMUS TAB 2 MG | Tier 1 | | | | |
| Immunological Agents | SKYRIZI INJ 150DOSE | RISANKIZUMAB-RZAA SOL PREFILLED SYRINGE 2 X 75 MG/0.83ML KIT | Tier 2 | X | X | | X |
| Immunological Agents | SKYRIZI INJ 150MG/ML | RISANKIZUMAB-RZAA SOLN PREFILLED SYRINGE 150 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | SKYRIZI PEN INJ 150MG/ML | RISANKIZUMAB-RZAA SOLN AUTO-INJECTOR 150 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | STELARA INJ 45MG/0.5 | USTEKINUMAB INJ 45 MG/0.5ML | Tier 2 | X | X | | X |
| Immunological Agents | STELARA INJ 45MG/0.5 | USTEKINUMAB SOLN PREFILLED SYRINGE 45 MG/0.5ML | Tier 2 | X | X | | X |
| Immunological Agents | STELARA INJ 90MG/ML | USTEKINUMAB SOLN PREFILLED SYRINGE 90 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | TACROLIMUS CAP 0.5MG | TACROLIMUS CAP 0.5 MG | Tier 1 | | | | |
| Immunological Agents | TACROLIMUS CAP 1MG | TACROLIMUS CAP 1 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------|-----------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | TACROLIMUS CAP 5MG | TACROLIMUS CAP 5 MG | Tier 1 | | | | |
| Immunological Agents | TAKHZYRO INJ 150MG/ML | LANADELUMAB-FLYO SOLN PREF SYRINGE 150 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | TAKHZYRO INJ 300/2ML | LANADELUMAB-FLYO INJ 300 MG/2ML (150 MG/ML) | Tier 2 | X | X | | X |
| Immunological Agents | TAKHZYRO INJ 300/2ML | LANADELUMAB-FLYO SOLN PREF SYRINGE 300 MG/2ML (150 MG/ML) | Tier 2 | X | X | | X |
| Immunological Agents | TALTZ INJ 80MG/ML | IXEKIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 80 MG/ML | Tier 3 | X | X | X | X |
| Immunological Agents | TALTZ INJ 80MG/ML | IXEKIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 80 MG/ML | Tier 3 | X | X | X | X |
| Immunological Agents | TDVAX INJ 2-2 LF | TETANUS-DIPHTHERIA TOXOIDS (TD) INJ 2-2 LF/0.5ML | HCR | | | | |
| Immunological Agents | TENIVAC INJ 5-2LF | TETANUS-DIPHTHERIA TOXOIDS (TD) INJ 5-2 LFU | HCR | | | | |
| Immunological Agents | TREMFYA INJ 100MG/ML | GUSELKUMAB SOLN PREFILLED SYRINGE 100 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | TREMFYA INJ 100MG/ML | GUSELKUMAB SOLN PEN-INJECTOR 100 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | TREXALL TAB 10MG | METHOTREXATE SODIUM TAB 10 MG (BASE EQUIV) | Tier 2 | | | | |
| Immunological Agents | TREXALL TAB 15MG | METHOTREXATE SODIUM TAB 15 MG (BASE EQUIV) | Tier 2 | | | | |
| Immunological Agents | TREXALL TAB 5MG | METHOTREXATE SODIUM TAB 5 MG (BASE EQUIV) | Tier 2 | | | | |
| Immunological Agents | TREXALL TAB 7.5MG | METHOTREXATE SODIUM TAB 7.5 MG (BASE EQUIV) | Tier 2 | | | | |
| Immunological Agents | TRUMENBA INJ | MENINGOCOCCAL GROUP B VAC (RECOMB) IM SUSP PREFILLED SYR | HCR | | | | |
| Immunological Agents | TWINRIX INJ | HEP A-HEP B VACCINE SUSP PREF SYR 720-20 ELU-MCG/ML | HCR | | | | |
| Immunological Agents | VAQTA INJ 25/0.5ML | HEPATITIS A VACCINE INJ SUSP 25 UNIT/0.5ML | HCR | | | | |
| Immunological Agents | VAQTA INJ 50UNT/ML | HEPATITIS A VACCINE INJ SUSP 50 UNIT/ML | HCR | | | | |
| Immunological Agents | VARIVAX INJ | VARICELLA VIRUS VAC LIVE FOR SUBCUTANEOUS INJ 1350 PFU/0.5ML | HCR | | | | |
| Immunological Agents | VAXNEUVANCE INJ | PNEUMOCOCCAL 15-VALENT CONJUGATE VACCINE SUS PREF SYR 0.5 ML | HCR | | | | |
| Immunological Agents | XATMEP SOL 2.5MG/ML | METHOTREXATE ORAL SOLN 2.5 MG/ML | Tier 3 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents | XELJANZ SOL 1MG/ML | TOFACITINIB CITRATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Immunological Agents | XELJANZ TAB 10MG | TOFACITINIB CITRATE TAB 10 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Immunological Agents | XELJANZ TAB 5MG | TOFACITINIB CITRATE TAB 5 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Immunological Agents | XELJANZ XR TAB 11MG | TOFACITINIB CITRATE TAB ER 24HR 11 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Immunological Agents | XELJANZ XR TAB 22MG | TOFACITINIB CITRATE TAB ER 24HR 22 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Immunological Agents | XOLAIR INJ 150MG/ML | OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 150 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | XOLAIR INJ 150MG/ML | OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 150 MG/ML | Tier 2 | X | X | | X |
| Immunological Agents | XOLAIR INJ 300/2ML | OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 300 MG/2ML | Tier 2 | X | X | | X |
| Immunological Agents | XOLAIR INJ 300/2ML | OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 300 MG/2ML | Tier 2 | X | X | | X |
| Immunological Agents | XOLAIR INJ 75/0.5 | OMALIZUMAB SUBCUTANEOUS SOLN PREFILLED SYRINGE 75 MG/0.5ML | Tier 2 | X | X | | X |
| Immunological Agents | XOLAIR INJ 75/0.5 | OMALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 75 MG/0.5ML | Tier 2 | X | X | | X |
| Immunological Agents | ZORTRESS TAB 0.25MG | EVEROLIMUS TAB 0.25 MG | Tier 3 | | | X | |
| Immunological Agents | ZORTRESS TAB 0.5MG | EVEROLIMUS TAB 0.5 MG | Tier 3 | | | X | |
| Immunological Agents | ZORTRESS TAB 0.75MG | EVEROLIMUS TAB 0.75 MG | Tier 3 | | | X | |
| Immunological Agents | ZORTRESS TAB 1MG | EVEROLIMUS TAB 1 MG | Tier 3 | | | X | |
| Immunological Agents | ZYMFENTRA INJ 120MG/ML | INFLIXIMAB-DYYB SOLN AUTO-INJECTOR KIT 120 MG/ML | Tier 3 | X | | X | X |
| Immunological Agents | ZYMFENTRA INJ 120MG/ML | INFLIXIMAB-DYYB SOLN PREFILLED SYRINGE KIT 120 MG/ML | Tier 3 | X | | X | X |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | AFLURIA QUAD INJ 2023-24 | INFLUENZA VIRUS VAC SPLIT QUADRIVALENT SUSP PREF SYR 0.5ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | AFLURIA QUAD INJ 2023-24 | INFLUENZA VIRUS VACCINE SPLIT QUADRIVALENT IM INJ | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | ALFERON N INJ 5MU/ML | INTERFERON ALFA-N3 INJ 5000000 UNIT/ML | Tier 2 | | | | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | DENGVAXIA SUS | DENGUE VIRUS VACCINE LIVE TETRAVALENT FOR SUBCUTANEOUS SUSP | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUAD QUADRI INJ 2023-24 | INFLUENZA VAC TYPE A&B SURFACE ANT ADJ QUAD PREF SYR 0.5 ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUARIX QUAD INJ 2023-24 | INFLUENZA VIRUS VAC SPLIT QUADRIVALENT SUSP PREF SYR 0.5ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUBLOK QUAD INJ 2023-24 | INFLUENZA VAC RECOMB HA QUAD PF SOLN PREF SYR 0.5 ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUCLVX QUAD INJ 2023-24 | INFLUENZA VAC TISS-CULT SUBUNT QUAD SUSP PREF SYR 0.5 ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUCLVX QUAD INJ 2023-24 | INFLUENZA VAC TISSUE-CULTURED SUBUNIT QUADRIVALENT IM SUSP | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLULAVAL QUA INJ 2023-24 | INFLUENZA VIRUS VAC SPLIT QUADRIVALENT SUSP PREF SYR 0.5ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUMIST QUAD SUS 2023-24 | INFLUENZA VIRUS VACCINE LIVE QUADRIVALENT INTRANASAL SUSP | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUZONE HD INJ 2023-24 | INFLUENZA VAC SPLIT HIGH-DOSE QUAD PF SUSP PREF SYR 0.7 ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUZONE QUAD INJ 2023-24 | INFLUENZA VIRUS VAC SPLIT QUADRIVALENT SUSP PREF SYR 0.5ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | FLUZONE QUAD INJ 2023-24 | INFLUENZA VIRUS VACCINE SPLIT QUADRIVALENT IM INJ | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | HEPLISAV-B INJ 20/0.5ML | HEPATITIS B VACCINE RECOMB ADJUVANTED PREF SYR 20 MCG/0.5ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | NOVAVAX INJ 2023-24 | COVID-19 SUBUNIT PROT RECOM ADJUV VAC-NOVAVAX IM 5 MCG/0.5ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | PNEUMOVAX 23 INJ 25/0.5 | PNEUMOCOCCAL VACCINE POLYVALENT INJ 25 MCG/0.5ML | HCR | | | | |
| Immunological Agents - Drugs that Stimulate or Suppress the Immune System | PREVNAR 20 INJ | PNEUMOCOCCAL 20-VALENT CONJUGATE VACCINE SUS PREF SYR 0.5 ML | HCR | | | | |
| Inflammatory Bowel Disease Agents | ANUSOL-HC CRE 2.5% | HYDROCORTISONE PERIANAL CREAM 2.5% | Tier 3 | | | | |
| Inflammatory Bowel Disease Agents | APRISO CAP 0.375GM | MESALAMINE CAP ER 24HR 0.375 GM | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Inflammatory Bowel Disease Agents | ASACOL HD TAB 800MG | MESALAMINE TAB DELAYED RELEASE 800 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | AZULFIDINE TAB 500MG | SULFASALAZINE TAB 500 MG | Tier 3 | | | | |
| Inflammatory Bowel Disease Agents | AZULFIDINE TAB 500MG EN | SULFASALAZINE TAB DELAYED RELEASE 500 MG | Tier 3 | | | | |
| Inflammatory Bowel Disease Agents | BALSALAZIDE CAP 750MG | BALSALAZIDE DISODIUM CAP 750 MG | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | BUDESONIDE AER 2MG/ACT | BUDESONIDE RECTAL FOAM 2 MG/ACT | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | BUDESONIDE CAP 3MG DR | BUDESONIDE DELAYED RELEASE PARTICLES CAP 3 MG | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | BUDESONIDE TAB ER 9MG | BUDESONIDE TAB ER 24HR 9 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | CANASA SUP 1000MG | MESALAMINE SUPPOS 1000 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | COLAZAL CAP 750MG | BALSALAZIDE DISODIUM CAP 750 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | CORTENEMA ENE 100MG | HYDROCORTISONE ENEMA 100 MG/60ML | Tier 3 | | | | |
| Inflammatory Bowel Disease Agents | CORTIFOAM AER 90MG | HYDROCORTISONE ACETATE PERIANAL FOAM 10% (90 MG/DOSE) | Tier 2 | | | | |
| Inflammatory Bowel Disease Agents | DELZICOL CAP 400MG | MESALAMINE CAP DR 400 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | DIPENTUM CAP 250MG | OLSALAZINE SODIUM CAP 250 MG | Tier 3 | | | | |
| Inflammatory Bowel Disease Agents | EOHILIA SUS 2MG/10ML | BUDESONIDE ORAL SUSPENSION 2 MG/10ML | Tier 3 | X | X | X | |
| Inflammatory Bowel Disease Agents | HYDROCORT ENE 100MG | HYDROCORTISONE ENEMA 100 MG/60ML | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | HYDROCORTISO CRE 2.5% | HYDROCORTISONE PERIANAL CREAM 2.5% | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | LIALDA TAB 1.2GM | MESALAMINE TAB DELAYED RELEASE 1.2 GM | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | MESALAMINE CAP 0.375GM | MESALAMINE CAP ER 24HR 0.375 GM | Tier 1 | | | X | |
| Inflammatory Bowel Disease Agents | MESALAMINE CAP 400MG DR | MESALAMINE CAP DR 400 MG | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | MESALAMINE CAP 500MG ER | MESALAMINE CAP ER 500 MG | Tier 1 | | | X | |
| Inflammatory Bowel Disease Agents | MESALAMINE ENE 4GM | MESALAMINE ENEMA 4 GM | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | MESALAMINE KIT 4GM | *MESALAMINE RECTAL ENEMA 4 GM & CLEANSER WIPE KIT** | Tier 1 | | X | | |
| Inflammatory Bowel Disease Agents | MESALAMINE SUP 1000MG | MESALAMINE SUPPOS 1000 MG | Tier 1 | | X | | |
| Inflammatory Bowel Disease Agents | MESALAMINE TAB 1.2GM | MESALAMINE TAB DELAYED RELEASE 1.2 GM | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Inflammatory Bowel Disease Agents | MESALAMINE TAB 800MG DR | MESALAMINE TAB DELAYED RELEASE 800 MG | Tier 1 | | | X | |
| Inflammatory Bowel Disease Agents | ORTIKOS CAP 6MG ER | BUDESONIDE CAP ER 24HR 6 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | ORTIKOS CAP 9MG ER | BUDESONIDE CAP ER 24HR 9 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | PENTASA CAP 250MG CR | MESALAMINE CAP ER 250 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | PENTASA CAP 500MG CR | MESALAMINE CAP ER 500 MG | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | PREP H CRE 1% | HYDROCORTISONE PERIANAL CREAM 1% | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | PROCTOCORT CRE 1% | HYDROCORTISONE PERIANAL CREAM 1% | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | PROCTO-MED CRE HC 2.5% | HYDROCORTISONE PERIANAL CREAM 2.5% | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | PROCTOSOL HC CRE 2.5% | HYDROCORTISONE PERIANAL CREAM 2.5% | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | PROCTOZONE CRE -HC 2.5% | HYDROCORTISONE PERIANAL CREAM 2.5% | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | ROWASA KIT 4GM | *MESALAMINE RECTAL ENEMA 4 GM & CLEANSER WIPE KIT** | Tier 3 | | X | | |
| Inflammatory Bowel Disease Agents | SFROWASA ENE 4GM | MESALAMINE SULFITE-FREE (SF) ENEMA 4 GM/60ML | Tier 3 | | | | |
| Inflammatory Bowel Disease Agents | SULFASALAZIN TAB 500MG | SULFASALAZINE TAB 500 MG | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | SULFASALAZIN TAB 500MG DR | SULFASALAZINE TAB DELAYED RELEASE 500 MG | Tier 1 | | | | |
| Inflammatory Bowel Disease Agents | TARPEYO CAP 4MG | BUDESONIDE DELAYED RELEASE CAP 4 MG | Tier 3 | X | X | | X |
| Inflammatory Bowel Disease Agents | UCERIS AER 2MG/ACT | BUDESONIDE RECTAL FOAM 2 MG/ACT | Tier 3 | | | X | |
| Inflammatory Bowel Disease Agents | UCERIS TAB 9MG | BUDESONIDE TAB ER 24HR 9 MG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | ACTONEL TAB 150MG | RISEDRONATE SODIUM TAB 150 MG | Tier 3 | | X | X | |
| Metabolic Bone Disease Agents | ACTONEL TAB 35MG | RISEDRONATE SODIUM TAB 35 MG | Tier 3 | | X | X | |
| Metabolic Bone Disease Agents | ALENDRONATE SOL 70/75ML | ALENDRONATE SODIUM ORAL SOLN 70 MG/75ML | Tier 1 | | | | |
| Metabolic Bone Disease Agents | ALENDRONATE TAB 10MG | ALENDRONATE SODIUM TAB 10 MG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | ALENDRONATE TAB 35MG | ALENDRONATE SODIUM TAB 35 MG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | ALENDRONATE TAB 5MG | ALENDRONATE SODIUM TAB 5 MG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | ALENDRONATE TAB 70MG | ALENDRONATE SODIUM TAB 70 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Metabolic Bone Disease Agents | ATELVIA TAB | RISEDRONATE SODIUM TAB DELAYED RELEASE 35 MG | Tier 3 | | X | X | |
| Metabolic Bone Disease Agents | BINOSTO TAB 70MG | ALENDRONATE SODIUM EFFERVESCENT TAB 70 MG | Tier 3 | | X | | |
| Metabolic Bone Disease Agents | BONIVA TAB 150MG | IBANDRONATE SODIUM TAB 150 MG (BASE EQUIVALENT) | Tier 3 | | | X | |
| Metabolic Bone Disease Agents | CALCITONIN INJ 200/ML | CALCITONIN (SALMON) INJ 200 UNIT/ML | Tier 1 | | | | |
| Metabolic Bone Disease Agents | CALCITONIN SPR 200/ACT | CALCITONIN (SALMON) NASAL SOLN 200 UNIT/ACT | Tier 1 | | | | |
| Metabolic Bone Disease Agents | CALCITRIOL CAP 0.25MCG | CALCITRIOL CAP 0.25 MCG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | CALCITRIOL CAP 0.5MCG | CALCITRIOL CAP 0.5 MCG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | CALCITRIOL SOL 1MCG/ML | CALCITRIOL ORAL SOLN 1 MCG/ML | Tier 1 | | | | |
| Metabolic Bone Disease Agents | CINACALCET TAB 30MG | CINACALCET HCL TAB 30 MG (BASE EQUIV) | Tier 1 | X | | | |
| Metabolic Bone Disease Agents | CINACALCET TAB 60MG | CINACALCET HCL TAB 60 MG (BASE EQUIV) | Tier 1 | X | | | |
| Metabolic Bone Disease Agents | CINACALCET TAB 90MG | CINACALCET HCL TAB 90 MG (BASE EQUIV) | Tier 1 | X | | | |
| Metabolic Bone Disease Agents | DOXERCALCIF CAP 0.5MCG | DOXERCALCIFEROL CAP 0.5 MCG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | DOXERCALCIF CAP 1MCG | DOXERCALCIFEROL CAP 1 MCG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | DOXERCALCIF CAP 2.5MCG | DOXERCALCIFEROL CAP 2.5 MCG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | FORTEO INJ 600/2.4 | TERIPARATIDE (RECOMBINANT) SOLN PEN-INJ 600 MCG/2.4ML | Tier 3 | X | | X | X |
| Metabolic Bone Disease Agents | FOSAMAX TAB 70MG | ALENDRONATE SODIUM TAB 70 MG | Tier 3 | | | | |
| Metabolic Bone Disease Agents | FOSAMAX + D TAB 70-2800 | ALENDRONATE SODIUM-CHOLECALCIFEROL TAB 70-2800 MG-UNIT | Tier 3 | | | | |
| Metabolic Bone Disease Agents | FOSAMAX + D TAB 70-5600 | ALENDRONATE SODIUM-CHOLECALCIFEROL TAB 70-5600 MG-UNIT | Tier 3 | | | | |
| Metabolic Bone Disease Agents | IBANDRONATE TAB 150MG | IBANDRONATE SODIUM TAB 150 MG (BASE EQUIVALENT) | Tier 1 | | | | |
| Metabolic Bone Disease Agents | MIACALCIN INJ 200/ML | CALCITONIN (SALMON) INJ 200 UNIT/ML | Tier 3 | | | | |
| Metabolic Bone Disease Agents | MIACALCIN INJ 400/2ML | CALCITONIN (SALMON) INJ 200 UNIT/ML | Tier 3 | | | | |
| Metabolic Bone Disease Agents | NATPARA INJ 100MCG | PARATHYROID HORMONE (RECOMBINANT) FOR INJ CARTRIDGE 100 MCG | Tier 3 | X | X | | X |

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|-------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Metabolic Bone Disease Agents | NATPARA INJ 25MCG | PARATHYROID HORMONE (RECOMBINANT) FOR INJ CARTRIDGE 25 MCG | Tier 3 | X | X | | X |
| Metabolic Bone Disease Agents | NATPARA INJ 50MCG | PARATHYROID HORMONE (RECOMBINANT) FOR INJ CARTRIDGE 50 MCG | Tier 3 | X | X | | X |
| Metabolic Bone Disease Agents | NATPARA INJ 75MCG | PARATHYROID HORMONE (RECOMBINANT) FOR INJ CARTRIDGE 75 MCG | Tier 3 | X | X | | X |
| Metabolic Bone Disease Agents | PARICALCITOL CAP 1 MCG | PARICALCITOL CAP 1 MCG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | PARICALCITOL CAP 2 MCG | PARICALCITOL CAP 2 MCG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | PARICALCITOL CAP 4 MCG | PARICALCITOL CAP 4 MCG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | RAYALDEE CAP 30MCG | CALCIFEDIOL CAP ER 30 MCG | Tier 3 | | | X | |
| Metabolic Bone Disease Agents | RISEDRON SOD TAB 35MG DR | RISEDRONATE SODIUM TAB DELAYED RELEASE 35 MG | Tier 1 | | X | | |
| Metabolic Bone Disease Agents | RISEDRONATE TAB 150MG | RISEDRONATE SODIUM TAB 150 MG | Tier 1 | | X | | |
| Metabolic Bone Disease Agents | RISEDRONATE TAB 30MG | RISEDRONATE SODIUM TAB 30 MG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | RISEDRONATE TAB 35MG | RISEDRONATE SODIUM TAB 35 MG | Tier 1 | | X | | |
| Metabolic Bone Disease Agents | RISEDRONATE TAB 5MG | RISEDRONATE SODIUM TAB 5 MG | Tier 1 | | | | |
| Metabolic Bone Disease Agents | ROCALTROL CAP 0.25MCG | CALCITRIOL CAP 0.25 MCG | Tier 3 | | | | |
| Metabolic Bone Disease Agents | ROCALTROL CAP 0.5MCG | CALCITRIOL CAP 0.5 MCG | Tier 3 | | | | |
| Metabolic Bone Disease Agents | ROCALTROL SOL 1MCG/ ML | CALCITRIOL ORAL SOLN 1 MCG/ ML | Tier 3 | | | | |
| Metabolic Bone Disease Agents | SENSIPAR TAB 30MG | CINACALCET HCL TAB 30 MG (BASE EQUIV) | Tier 3 | X | | X | |
| Metabolic Bone Disease Agents | SENSIPAR TAB 60MG | CINACALCET HCL TAB 60 MG (BASE EQUIV) | Tier 3 | X | | X | |
| Metabolic Bone Disease Agents | SENSIPAR TAB 90MG | CINACALCET HCL TAB 90 MG (BASE EQUIV) | Tier 3 | X | | X | |
| Metabolic Bone Disease Agents | TERIPARATIDE INJ 600/2.4 | TERIPARATIDE (RECOMBINANT) SOLN PEN-INJ 600 MCG/2.4ML | Tier 1 | X | | X | X |
| Metabolic Bone Disease Agents | TERIPARATIDE INJ 620/2.48 | TERIPARATIDE (RECOMBINANT) SOLN PEN-INJ 620 MCG/2.48ML | Tier 3 | X | | | X |
| Metabolic Bone Disease Agents | TYMLOS INJ | ABALOPARATIDE SUBCUTANEOUS SOLN PEN-INJECTOR 3120 MCG/1.56ML | Tier 3 | X | | | X |
| Metabolic Bone Disease Agents | ZEMPLAR CAP 1MCG | PARICALCITOL CAP 1 MCG | Tier 3 | | | | |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Metabolic Bone Disease Agents | ZEMPLAR CAP 2MCG | PARICALCITOL CAP 2 MCG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | 1ST BASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | 2-DEOXY-D POW -GLUCOSE | 2-DEOXY-D-GLUCOSE POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | 3232A INFANT POW FORMULA | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | 3232A INFANT POW FORMULA | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | 5-METHYLTETR POW | 5-METHYLTETRAHYDROFOLATE CALCIUM POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | 5-METHYLTETR POW CALCIUM | 5-METHYLTETRAHYDROFOLATE CALCIUM POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ACIDO LACTOB POW 10BU/GM | LACTOBACILLUS ACIDOPHILUS POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ACIDO LACTOB POW 1BU/GM | LACTOBACILLUS ACIDOPHILUS POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ACIDOPHILUS POW LACTOBAC | LACTOBACILLUS ACIDOPHILUS POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ACST KIT KIT COVID-19 | COVID-19 ANTIBODY TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ADA SHA | *EXTERNAL VEHICLES - SHAMPOO*** | Tier 3 | X | | X | |
| Miscellaneous Therapeutic Agents | ADAPTADERM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ADAPTADERM GEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ADDITIONS FO POW ENHANCER | *PROTEIN ORAL POWDER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ADEMETIONINE POW DISULFAT | ADEMETIONINE DISULFATE TOSYLATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ADENOSINE POW | ADENOSINE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ADENOSINE-5 POW MONOPHOS | ADENOSINE PHOSPHATE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ADENOSINE-5 POW TRIPHOSP | ADENOSINE PHOSPHATE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ADVERA LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ADVERA LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | AERCHMBR PLS MIS FLOW-VU | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | AERCHMBR PLS MIS INTERMED | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | AERCHMBR PLS MIS LRG MASK | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | AERCHMBR PLS MIS MED MASK | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | AERCHMBR PLS MIS SM MASK | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | AEROCHAMBER MIS PLUS | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | AEROCHAMBER MIS HOLDING | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | AEROCHAMBER MIS MTHPIECE | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | ALASKAN RED POW ALGAE | ALASKAN RED ALGAE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ALCOH-GLOVE PAD CONTOURE | *ALCOHOL SWABS*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ALCOH-WIPE MIS 12"X12" | *ALCOHOL SHEETS*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ALEVAMAX CRE | *DERMATOLOGICAL PRODUCTS MISC - CREAM** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | A-LIPOIC POW ACID | ALPHA-LIPOIC ACID (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ALOE VERA OIL | ALOE VERA OIL | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ALOE VERA POW | ALOE VERA POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ALOE VERA POW FRZE DRD | ALOE VERA POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ALOE VERA POW LEAF | ALOE VERA POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ALPAWASH OIN | POLYETHYLENE GLYCOL OINTMENT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ALPHA LIPOIC POW ACID | ALPHA-LIPOIC ACID (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ALPROSTADIL POW | ALPROSTADIL POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ALTADERM CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | AMINO ACTION TAB | *AMINO ACIDS TAB*** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | AMITRIPTYLIN KIT 2% | *AMITRIPTYLINE HCL CREAM 2% KIT (COMPOUNDING KIT)*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | AMITRIPTYLIN POW HCL | AMITRIPTYLINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ANASPAZ TAB 0.125MG | HYOSCYAMINE SULFATE TAB DISINT 0.125 MG | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | ANASTROZOLE POW | ANASTROZOLE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ANHYDROUS GEL BASE | *GEL BASE - GEL** | Tier 3 | | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | ANTIGEN TEST KIT 2-PACK | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ANTIGEN TEST KIT 8-PACK | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ANTISEPTIC SOL 4% | CHLORHEXIDINE GLUCONATE SOLN 4% | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | A POMORPHINE POW HCL | A POMORPHINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | AQINJECT PEN MIS 31GX3/16 | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | ARBUTIN POW ALPHA | ARBUTIN ALPHA (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ARGINAID PAK CHERRY | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ARGINAID PAK ORANGE | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ARGININE PAK 500MG | ARGININE POWDER PACKET 500 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | ARGININE TAB 500MG | ARGININE TAB 500 MG | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN TAB 325MG | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN 81 TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN ADLT TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN CHLD CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN LOW CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN LOW TAB 81MG | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN LOW TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN REGI TAB 81MG | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASPIRIN-81 CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ASSURE ID MIS 30GX5MM | INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | ASSURE ID MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | ATREVIS CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | AUM MINI PEN MIS 32GX8MM | INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | AUM MINI PEN MIS 33GX4MM | INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | AUM MINI PEN MIS 33GX5MM | INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | AUM MINI PEN MIS 33GX6MM | INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | AUM SAFETY MIS 31GX4MM | INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | AUM SAFETY MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | AUTOLET LANC MIS DEVICE | *LANCET DEVICES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | AUTOSHIELD MIS 30GX5MM | INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | AUXIPRO CRE VANISHIN | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | AVIPTADIL POW ACETATE | AVIPTADIL ACETATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | AXONA POW | *DIETARY MANAGEMENT PRODUCT - PACKET*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | AZ CREAM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BACOCALMINE LIQ | *PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BASE CRE LIPOSOME | *CREAM BASE LIPOSOMIC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BASE W301 CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BAYER ASA TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | BAYER ASA TAB 325MG | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | BAYER ASPIRI TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | BAYER LOW CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | BCAD 1 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BCAD 2 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BD ECLIPSE MIS 23GX1" | NEEDLE (DISP) 23 X 1" | Tier 2 | | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | BD ECLIPSE MIS 25GX5/8" | NEEDLE (DISP) 25 X 5/8" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | BD PEN NEEDL MIS 29GX12.7 | INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | BD PEN NEEDL MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | BD PEN NEEDL MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | BD SHARPS MIS 1.4QT | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BD SHARPS MIS 3.3QT | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BD SHARPS MIS 5.1L | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BD VERITOR KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BENEPROTEIN POW UNFLAVOR | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BETA GLUCAN POW | BETA GLUCAN (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BETAMETH ACE POW | BETAMETHASONE ACETATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BETAMETHASON POW | BETAMETHASONE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BETAMETHASON POW SOD PHOS | BETAMETHASONE SODIUM PHOSPHATE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BINAXNOW COV KIT HOME TES | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BIOPEPTIDE CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BIOTIN POW | BIOTIN (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BIOTIN-D POW | BIOTIN (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BISACODYL TAB 5MG DR | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | BISACODYL TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | BISMUTH SUBC POW | BISMUTH SUBCARBONATE POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BISOPROL FUM POW | BISOPROLOL FUMARATE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BLENDED MEAL MIS PEDIATRI | *NUTRITIONAL SUPPLEMENT MISC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST LIQ BUT PECN | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST LIQ CHOC/MLT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | BOOST LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST LIQ MOCHA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST LIQ STRWBRRY | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST HIGH LIQ PROTEIN | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST KIDS LIQ STRWBRRY | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST PLUS LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST PLUS LIQ STRAWBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST PLUS LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST PUDDIN MIS BUTTSCTH | *NUTRITIONAL SUPPLEMENT PUDDING** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST PUDDIN MIS CHOCOLAT | *NUTRITIONAL SUPPLEMENT PUDDING** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST PUDDIN MIS VANILLA | *NUTRITIONAL SUPPLEMENT PUDDING** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST SOOTHE LIQ PCH/MINT | *PROTEIN ORAL LIQUID*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BOOST SOOTHE LIQ STR/KIWI | *PROTEIN ORAL LIQUID*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BRAINSUSTAIN PAK | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | BREXAFEMME TAB 150MG | IBREXAFUNGERP CITRATE TAB 150 MG | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BROMFENAC MIS SODIUM | BROMFENAC SODIUM (BULK) SOLID | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BROMFENAC POW SODIUM | BROMFENAC SODIUM (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | BUPRENORPHIN POW HCL | BUPRENORPHINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CALCIUM POW FOLINATE | LEUCOVORIN CALCIUM POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CALCIUM POW FRUCTOBO | CALCIUM FRUCTOBORATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CALCIUM AA GRA CHELATE | CALCIUM AMINO ACID CHELATE (BULK) GRANULES 30% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CAM PRO COMP BAR GLYTACTI | *NUTRITIONAL SUPPLEMENT BAR** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CAPSAICIN POW PALMITAT | CAPSAICIN PALMITATE (BULK) POWDER | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | CARBOGEL GEL 940 | *CARBOMER GEL BASE** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CARBOHOL GEL 940 | *CARBOMER GEL BASE** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CARBOMER GEL AQUEOUS | *CARBOMER GEL BASE** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CARBOMER GEL HYDROALC | *CARBOMER GEL BASE** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CARDIOWHEY POW CHOCOLAT | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CARDIOWHEY POW VANILLA | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CAREFINE MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | CAREPOINT SA MIS 23GX1" | NEEDLE (DISP) 23 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CAREPOINT SA MIS 23GX11/2 | NEEDLE (DISP) 23 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CAREPOINT SA MIS 25GX1" | NEEDLE (DISP) 25 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CAREPOINT SA MIS 25GX11/2 | NEEDLE (DISP) 25 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CAREPOINT SA MIS 25GX5/8" | NEEDLE (DISP) 25 X 5/8" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CARESTART KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CARETOUCH MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | CARETOUCH MIS 31GX6MM | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | CARETOUCH MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | CARETOUCH MIS EJECTOR | *LANCET DEVICES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CARNOSINE L POW | CARNOSINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CAYA DPR | *DIAPHRAGM ARC-SPRING*** | HCR | | | | |
| Miscellaneous Therapeutic Agents | CEQUR SIMPL KIT PATCH 2U | INJECTION DEVICE FOR INSULIN | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | CETYL MYRIST MIS OLEATE | CETYL MYRISTOLEATE (BULK) WAX 40% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CETYL MYRIST OIL OLEATE | CETYL MYRISTOLEATE (BULK) OIL 40% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CETYL MYRIST POW 20% | CETYL MYRISTOLEATE (BULK) POWDER 20% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CETYL MYRIST POW OLEATE | CETYL MYRISTOLEATE (BULK) POWDER | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|--------------------------|--------------------------------------|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | CHEMSIL K-51 GEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CHEMSTRIP BG MIS LOG | *BLOOD GLUCOSE MONITORING MISC.*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | CHERRY SYP | CHERRY SYRUP | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CHLOROFORM SOL | CHLOROFORM SOLN | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CHOICE DM LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CHOICE DM TF LIQ UNSWEET | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CHOLECALCIF POW | CHOLECALCIFEROL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CHOLECALCIFE CRY USP/NF | CHOLECALCIFEROL CRYSTALS | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CHOLESTYRAMI POW | CHOLESTYRAMINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CHOLESTYRAMI POW RESIN | CHOLESTYRAMINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CHORIONIC POW GONADOTR | CHORIONIC GONADOTROPIN (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CHRYSADERM CRE DAY | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CHRYSADERM CRE NIGHT | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CHRYSIN POW | CHRYSIN POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CITRULLINE POW (L) | CITRULLINE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CITRULLINE POW 1000 | CITRULLINE ORAL PACKET 1 GM | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CLEARDETECT KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CLEODERM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CLINITEST KIT SELF-TST | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CLOMIPRAMINE POW HCL | CLOMIPRAMINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CLOPIDOGREL POW BISULFAT | CLOPIDOGREL BISULFATE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CLOVAGEL GEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CO Q 10 CAP 100MG | COENZYME Q10 CAP 100 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | CO Q-10 CAP 50MG | COENZYME Q10 CAP 50 MG | Tier 1 | X | | | |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | COENZYME Q10 CAP 100MG | COENZYME Q10 CAP 100 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | COENZYME Q10 CAP 100MG | COENZYME Q10 CAP 100 MG | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | COENZYME Q10 CAP 200MG | COENZYME Q10 CAP 200 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | COENZYME Q10 CAP 30MG | COENZYME Q10 CAP 30 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | COENZYME Q10 CAP 50MG | COENZYME Q10 CAP 50 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | COENZYME Q10 CAP 50MG | COENZYME Q10 CAP 50 MG | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | COENZYME Q10 POW | COENZYME Q10 POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | COENZYME Q10 TAB 200MG | COENZYME Q10 TAB 200 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | COLLODION LIQ FLEXIBLE | COLLODION FLEXIBLE | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | COMFORT EZ MIS 31GX4MM | INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT EZ MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT TOUC MIS 31GX4MM | INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT TOUC MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT TOUC MIS 31GX6MM | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT TOUC MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT TOUC MIS 32GX8MM | INSULIN PEN NEEDLE 32 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT TOUC MIS 33GX1/4" | INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT TOUC MIS 33GX3/16 | INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMFORT TOUC MIS 33GX5/32 | INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | COMIRNATY INJ 30/0.3ML | COVID-19 MRNA VAC TRIS-SUCROSE-PFIZER IM SUSP 30 MCG/0.3ML | HCR | | | | |
| Miscellaneous Therapeutic Agents | COMIRNATY INJ 30/0.3ML | COVID-19 MRNA VAC TRIS-PFIZER IM SUSP PREF SYR 30 MCG/0.3ML | HCR | | | | |
| Miscellaneous Therapeutic Agents | COMPLEAT LIQ CLS SYS | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CONCENTRATE CRE | *CREAM BASE** | Tier 3 | X | | | |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | CONDOMS MIS | *CONDOMS - MALE*** | HCR | | X | | |
| Miscellaneous Therapeutic Agents | CONDOMS MIS LUBRICAT | CONDOMS LATEX LUBRICATED | HCR | | X | | |
| Miscellaneous Therapeutic Agents | CONTOUR HIGH LIQ CONTROL | *BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CONTOUR LOW LIQ CONTROL | *BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CONTOUR NEXT SOL LEVEL 1 | *BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CONTOUR NEXT SOL LEVEL 2 | *BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CONTOUR NORM LIQ CONTROL | *BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | CONTROL HIGH SOL UNISTRIP | *BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CONTROL LOW SOL UNISTRIP | *BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | COPASIL GEL | *SCAR TREATMENT PRODUCTS - GEL** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | COPASIL GEL | *SILICONE (BULK) GEL*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | COQ10 CAP 200MG | COENZYME Q10 CAP 200 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | CORN OIL | CORN OIL (BULK) | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CORN SYP | CORN SYRUP | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CORTROSYN INJ 0.25MG | COSYNTROPIN FOR INJ 0.25 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | COSYNTROPIN INJ 0.25MG | COSYNTROPIN FOR INJ 0.25 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | COVID-19 AT- KIT 1-PACK | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | COVID-19 AT- KIT 2-PACK | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | COVID-19 AT- KIT 4-PACK | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | COVID-19 RAP KIT 1-PACK | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | COVID-19 TES KIT SPECIMEN | *COVID-19 TEST SPECIMEN COLLECTION KIT*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CREAM BASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CREAM BASE CRE NIOSOMES | *CREAM BASE NIOSOMES** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CREAM-HEAVY CRE BASE | *CREAM BASE NIOSOMES** | Tier 3 | | | | |

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|----------------------------------|---------------------------|------------------------------------|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | CRITICARE HN LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CRUCIAL LIQ ULTRAPAK | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CRUCIAL LIQ UNFLAVOR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CRYOSERV SOL | *DIMETHYL SULFOXIDE - SOLUTION*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CUTIS PLUS CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CVS ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | CVS ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | CVS ASPIRIN TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | CVS C-LAX TAB 5MG | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | CVS COQ-10 CAP 100MG | COENZYME Q10 CAP 100 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | CVS COQ-10 CAP 200MG | COENZYME Q10 CAP 200 MG | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | CVS COQ-10 CAP 50MG | COENZYME Q10 CAP 50 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | CVS COVID-19 KIT HOME 2PK | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CVS LANCING MIS DEVICE | *LANCET DEVICES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CVS NUTRITIO LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | CVS NUTRITIO LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | CVS NUTRITIO LIQ STRABERY | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | CVS NUTRITIO LIQ STRABERY | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | CVS NUTRITIO LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | CVS NUTRITIO LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | CYCLOBENZAPR POW HCL | CYCLOBENZAPRINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CYCLOPHOSPHA POW | CYCLOPHOSPHAMIDE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CYCLOSERINE POW | CYCLOSERINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | CYCLOSPORINE POW | CYCLOSPORINE (BULK) POWDER | Tier 3 | | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | CYCLOSPORINE POW A | CYCLOSPORINE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | CYSTINE PAK 500MG | CYSTINE PACKET 500 MG | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | DEHYDROEPIAN POW MICRO | PRASTERONE MICRONIZED POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DERMA SERUM CRE FREEDOM | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DERMABASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DERMASHIELD GEL HYDROGEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | DERMASO PLUS CRE | *DERMATOLOGICAL PRODUCTS MISC - CREAM** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | DEXAMETH SOD POW PHOSPHAT | DEXAMETHASONE SODIUM PHOSPHATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DEXCOM G6 MIS TRANSMIT | *CONTINUOUS BLOOD GLUCOSE SYSTEM TRANSMITTER*** | Tier 3 | X | X | | |
| Miscellaneous Therapeutic Agents | DEXTROMETH POW | DEXTROMETHORPHAN POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DHEA POW | PRASTERONE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DHEA POW MICRO | PRASTERONE MICRONIZED POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DIABETIC TF LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DIABETISOURC LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | DIABETISOURC LIQ AC | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | DIATRUST KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | DIMERCAPT-1- POW SULF NA | DIMERCAPTOPROPANE-SULFONATE (2,3) SODIUM (DMPS) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DIMERCAPTOSU CRY ACID | SUCCIMER (BULK) CRYSTALS | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DIMERCAPTOSU POW ACID | SUCCIMER (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DIMETHYL SOL SULFOXID | *DIMETHYL SULFOXIDE - SOLUTION*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | DL-3-HYDROXY POW ACID NA | SODIUM 3-HYDROXYBUTYRATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DMPS POW | DIMERCAPTOPROPANE-SULFONATE (2,3) SODIUM (DMPS) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DOJOLVI LIQ 100% | TRIHEPTANOIN ORAL LIQUID 100% | Tier 3 | X | | | X |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | DROPSAFE MIS SICURA | NEEDLE (DISP) 25 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | DRYSOL SOL 20% | ALUMINUM CHLORIDE SOLN 20% | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | DULOXETINE POW | DULOXETINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DULOXETINE POW HCL | DULOXETINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DURABASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DURABASE CRE ADVANCED | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | DUREX EXTRA MIS SENSITIV | CONDOMS LATEX LUBRICATED | HCR | | X | | |
| Miscellaneous Therapeutic Agents | D-VITAMIN E POW SUCCINAT | VITAMIN E SUCCINATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | EAA SUPPLEME POW | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | EAA SUPPLEME POW TROPICAL | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | EASIVENT MIS | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | EASIVENT MIS MASK LG | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | EASIVENT MIS MASK SM | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | EASIVENT MIS MASK MED | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | EASY COMFORT MIS 0.3/31G | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | EASY COMFORT MIS 0.3/31G | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | EASY COMFORT MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | EASY COMFORT MIS 31GX6MM | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | EASY COMFORT MIS SHARPS | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | EASYMAX SOL NORMAL | *BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ECLIPSE NDL MIS 21GX1" | NEEDLE (DISP) 21 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | ECLIPSE NDLE MIS 21GX1.5" | NEEDLE (DISP) 21 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | ECLIPSE NDLE MIS 25GX1.5" | NEEDLE (DISP) 25 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | EC-RX DHEA CRE 10% | *PRASTERONE (DHEA) CREAM 10% (COMPOUND KIT)*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | EC-RX DHEA CRE 4% | *PRASTERONE (DHEA) CREAM 4% (COMPOUND KIT)*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ED-SPAZ TAB 0.125MG | HYOSCYAMINE SULFATE TAB DISINT 0.125 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ELLUME COV19 KIT HOME TES | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | EMBRACE SOL LOW | *BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | EMOLIVAN CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | EMOLLIENT CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | EMOLLIENT CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ENSURE LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENSURE ENLIV LIQ STRAWBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENSURE ENLIV LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENSURE ORIGI LIQ FIBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENSURE PLUS LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENSURE PLUS LIQ STRWBRY | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENSURE PLUS LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENSURE SURGE LIQ IMMUNO | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENTERAGAM POW 5GM | SERUM-DERIVED BOVINE IMMUNOGLOB/PROTEIN ISOLATE 5 GM PACKET | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ENTERIC ASA TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ENU PRO3 POW PLUS | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | EPSOLAY CRE 5% | BENZOYL PEROXIDE CREAM 5% | Tier 3 | X | | X | |
| Miscellaneous Therapeutic Agents | EQ ASPIRIN CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | EQ ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | EQL ASPIRIN CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | EQL GENTLE TAB LAXATIVE | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | EQUACARE JR POW CHOCOLA | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|--------------------------|-----------------------------------|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | EQUACARE JR POW UNFLAVO | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | EQUACARE JR POW VANILLA | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ESSENTIAL POW CARE JR | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ESSENTRA MIS 9X9" | *ALCOHOL SHEETS*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ETHOSUXIMIDE POW | ETHOSUXIMIDE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ETHYLPARABEN POW | *BULK CHEMICALS - POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ETOPOSIDE POW | ETOPOSIDE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | F.A.A. LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FA-8 CAP 800MCG | FOLIC ACID CAP 0.8 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | FAGRON LS CRE PLUS | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FASTEP 1-PK KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FASTEP 2-PK KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FASTEP 4-PK KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FASTEP 5-PK KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FE PYROPHOSP POW | *BULK CHEMICALS - POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FEMCAP MIS 22MM | CERVICAL CAP 22 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | FEMCAP MIS 26MM | CERVICAL CAP 26 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | FEMCAP MIS 30MM | CERVICAL CAP 30 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | FIBERSOUR HN LIQ CLS SYS | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FIBERSOURCE LIQ CLS SYS | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FITALITE CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FLAVOR BLEND SUS | *ORAL VEHICLES - SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FLAVOR PLUS LIQ | *ORAL VEHICLES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FLAVOR SWEET SYP | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | FLEX BASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FLEXICHAMBER MIS | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | FLEXICHAMBER MIS MASK LRG | *SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | FLEXICHAMBER MIS MASK SM | *SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | FLOW-EZE MIS VENTED | HYPODERMIC NEEDLES (DISPOSABLE) | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FLOWFLEX KIT TEST | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FLUOROURACIL POW | FLUOROURACIL (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FLUOXETINE POW HCL | FLUOXETINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FLUTICASONE POW PROPIONA | FLUTICASONE PROPIONATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FOAMIL LIQ | *EXTERNAL VEHICLES - LIQUID*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FOLIC ACID POW | FOLIC ACID POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FOLIC ACID TAB 1000MCG | FOLIC ACID TAB 1 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | FOLIC ACID TAB 1MG | FOLIC ACID TAB 1 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | FOLIC ACID TAB 400MCG | FOLIC ACID TAB 400 MCG | HCR | | | | |
| Miscellaneous Therapeutic Agents | FOLIC ACID TAB 800MCG | FOLIC ACID TAB 800 MCG | HCR | | | | |
| Miscellaneous Therapeutic Agents | FOOD COLOR LIQ BLUE | DYE FDC BLUE 1 (BRILLIANT BLUE FCF) - LIQUID | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FORANE SOL | ISOFLURANE INHAL SOLN | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | FORTISCARE SOL CNTL HI | *BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | FORTISCARE SOL CNTL LOW | *BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | FORTISCARE SOL CNTL NML | *BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | FREEDOM CRE DERMA-D | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FREEDOM CRE DERMA-N | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FREEDOM GEL CEPAPRO | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | FREEDOM GEL SILOMAC | *GEL BASE - GEL** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | FRUITIVITS POW | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | FT ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | FT ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | FT ASPIRIN TAB 81MG | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | FT LAXATIVE TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GA POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GA GEL PAK | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GABAPENTIN POW | GABAPENTIN POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GENADUR LIQ | *DERMATOLOGICAL PRODUCTS MISC - LIQUID** | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | GENTLE LAXAT TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GENUINE ASPR TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GINSENG POW AMERICAN | AMERICAN GINSENG (PANAX QUINQUEFOLIUM) (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GINSENG ROOT POW | GINSENG ROOT (PANAX GINSENG) (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLUTARALDEHY SOL 25% | GLUTARAL SOLN 25% | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | GLUTATHIONE POW | GLUTATHIONE BULK POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLUTATHIONE POW REDUCED | GLUTATHIONE BULK POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLYCERIN LIQ | GLYCERIN LIQUID | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | GLYCERIN LIQ | GLYCERIN LIQUID | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYCERINE LIQ | GLYCERIN LIQUID | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYCEROL LIQ FORMAL | GLYCERIN LIQUID | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYCOSADE PAK | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLYTAC COMPL BAR 10PE | *NUTRITIONAL SUPPLEMENT BAR** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN LIQ RES/LITE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN LIQ RESTOR10 | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | GLYTACTIN LIQ RTD 10 | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN LIQ RTD 15 | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN PAK BTMK/ DLT | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN PAK SWIRL 15 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW APPLE | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW BD 20/20 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW BETMLK15 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW BETMLK15 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW BETRMLK | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW BLD 10PE | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW BLD PKU | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW PUNCH | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW RESTOR 5 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW RST LT10 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN POW TROPICAL | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTACTIN 15 LIQ RTD LITE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GLYTROL LIQ ULTRAPAK | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GNP ASPIRIN CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GNP ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GNP ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GNP ASPIRIN TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GNP GNTL LAX TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GNP LAXATIVE TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | GNP ULTICARE MIS 31GX5/16 | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | GOODSENSE TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | G-PREPROTEIN LIQ | *AMINO ACIDS ORAL LIQUID*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GUARDIAN MIS LINK 3 | *CONTINUOUS BLOOD GLUCOSE SYSTEM TRANSMITTER*** | Tier 3 | X | X | | |
| Miscellaneous Therapeutic Agents | GUARDIAN 4 MIS TRANSMIT | *CONTINUOUS BLOOD GLUCOSE SYSTEM TRANSMITTER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | GUARDIAN CON MIS TRANSMIT | *CONTINUOUS BLOOD GLUCOSE SYSTEM TRANSMITTER*** | Tier 3 | X | X | | |
| Miscellaneous Therapeutic Agents | GUARDIAN RT MIS CHARGER | *CONTINUOUS BLOOD GLUCOSE MONITOR SUPPLIES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | GUARDIAN RT MIS TST PLUG | *CONTINUOUS BLOOD GLUCOSE MONITOR SUPPLIES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HALUCORT GEL | *DERMATOLOGICAL PRODUCTS MISC - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HCU COOLER LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HCU EASY TAB | *NUTRITIONAL SUPPLEMENT TABS** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HCU GEL PAK | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HCY 1 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HCY 2 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HEPARIN LOCK INJ 100/ML | HEPARIN SODIUM (PORCINE) LOCK FLUSH IV SOLN 100 UNIT/ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HEPARIN LOCK INJ 100/ML | HEPARIN SODIUM (PORCINE) LOCK FLUSH PF IV SOLN 100 UNIT/ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HEPARIN LOCK INJ 10UNT/ML | HEPARIN SODIUM (PORCINE) LOCK FLUSH IV SOLN 10 UNIT/ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HEPARIN LOCK INJ 10UNT/ML | HEPARIN SODIUM (PORCINE) LOCK FLUSH PF IV SOLN 10 UNIT/ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HEXAPEPTIDE POW ACETYL | ACETYL HEXAPEPTIDE-8 (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HEXAPEPTIDE SOL ACETYL | ACETYL HEXAPEPTIDE-8 (BULK) SOLUTION | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HM ASPIRIN CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | HM ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | HM ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | HM LAXATIVE TAB 5MG | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | HOLDING CHAM MIS ADULT | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | HOLDING CHAM MIS CHILD | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | HOME PAP KIT | *PAP TEST COLLECTION KIT** | Tier 3 | X | | X | |
| Miscellaneous Therapeutic Agents | HORMONE BASE CRE NIOSOMES | *HORMONE CREAM BASE NIOSOMES** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HORMONE HEAV CRE NIOSOMES | *HORMONE CREAM BASE NIOSOMES** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HUMAN CHORIO POW GONADOTR | CHORIONIC GONADOTROPIN (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HUMATROPEN MIS FOR 12MG | *INJECTION DEVICE - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HUMATROPEN MIS FOR 24MG | *INJECTION DEVICE - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HUMATROPEN MIS FOR 6MG | *INJECTION DEVICE - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HYALURONATE POW SODIUM | HYALURONATE SODIUM (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HYALURONIC POW SODIUM | HYALURONATE SODIUM (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HYDRABASE SB CRE CUST BSE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HYDROCODONE CRY BITARTRA | HYDROCODONE BITARTRATE (BULK) CRYSTALS | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HYDROCODONE POW BITARTRA | HYDROCODONE BITARTRATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HYDROGEL GEL | *CARBOMER GEL BASE** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HYDROPHILIC OIN | HYDROPHILIC OINTMENT | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HYDROQUINONE POW | HYDROQUINONE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HYDROUS CRE EMULSIFI | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | HYDROXYUREA POW | HYDROXYUREA (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | HYOSCYAMINE DRO 0.125/ML | HYOSCYAMINE SULFATE SOLN 0.125 MG/ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HYOSCYAMINE ELX 0.125/5 | HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HYOSCYAMINE SUB 0.125MG | HYOSCYAMINE SULFATE SL TAB 0.125 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HYOSCYAMINE TAB 0.125MG | HYOSCYAMINE SULFATE TAB DISINT 0.125 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | HYOSCYAMINE TAB 0.125MG | HYOSCYAMINE SULFATE TAB 0.125 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HYOSCYAMINE TAB 0.375 ER | HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HYOSCYAMINE TAB 0.375 SR | HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HYOSYNE DRO 0.125/ML | HYOSCYAMINE SULFATE SOLN 0.125 MG/ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HYOSYNE ELX 0.125/5 | HYOSCYAMINE SULFATE ELIXIR 0.125 MG/5ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | HYPO NEEDLE MIS 20GX1" | NEEDLE (DISP) 20 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | HYPO NEEDLE MIS 22GX1" | NEEDLE (DISP) 22 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | HYPO NEEDLE MIS 23GX1" | NEEDLE (DISP) 23 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | HYPO NEEDLE MIS 23GX1.5" | NEEDLE (DISP) 23 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | HYPO NEEDLE MIS 25GX1" | NEEDLE (DISP) 25 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | HYPO NEEDLE MIS 25GX1.5" | NEEDLE (DISP) 25 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | HYPO NEEDLE MIS 25GX5/8" | NEEDLE (DISP) 25 X 5/8" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | IGG 2000 CWP CAP | *PROTEIN CAP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | IGG 2000 CWP POW | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | IGG PURE POW | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | IHEALTH 2-PK KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | IHEALTH 5-PK KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | IMPACT LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | IMPACT LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | IMPACT 1.5 LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | IMPACT GLUTA LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | IMPACT/FIBER LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | INDICAID KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | INPEN 100EL MIS BLUE-HUM | INJECTION DEVICE FOR INSULIN | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | INPEN 100EL MIS GREY-HUM | INJECTION DEVICE FOR INSULIN | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | INPEN 100EL MIS PINK HUM | INJECTION DEVICE FOR INSULIN | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | INPEN 100NN MIS BLUE NOV | INJECTION DEVICE FOR INSULIN | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | INPEN 100NN MIS GREY NOV | INJECTION DEVICE FOR INSULIN | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | INPEN 100NN MIS PINK NOV | INJECTION DEVICE FOR INSULIN | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | INSPIREASE MIS DD SYST | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | INSPIREASE MIS RES BAG | *SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - BAGS*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | INST BRKFAST LIQ BERRY | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | INST BRKFAST LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | INST BRKFAST LIQ ORANGE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | INST BRKFAST LIQ PLUS | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | INST BRKFAST LIQ STRAWBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | INST BRKFAST LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.3/29G | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.3/30G | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.3/30G | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.3/31G | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 15/64" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.3/31G | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.3ML/30 | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 30 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.3ML/31 | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.5/28G | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.5/29G | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.5/30G | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.5/30G | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16" | Tier 2 | | X | | |

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| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.5/31G | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 15/64" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 0.5/31G | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1/2ML/30 | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1/2ML/31 | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/28G | INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/28G | INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/29G | INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/29G | INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/30G | INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/30G | INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/31G | INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 15/64" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/31G | INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 1ML/32G | INSULIN SYRINGE/NEEDLE U-100 1 ML 32 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 27GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 27GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 28GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1 ML 28 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 28GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 28 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 29GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 29GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 29GX12MM | INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 29GX12MM | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 30GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 30GX5/16 | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 30 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 30GX5/16 | INSULIN SYRINGE/NEEDLE U-100 1 ML 30 X 5/16" | Tier 2 | | X | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 31GX5/16 | INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 31GX5/16 | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 31GX5/16 | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 31GX8MM | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 31GX8MM | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSULIN SYRG MIS 31GX8MM | INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSUPEN MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INSUPEN MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | INTELISWAB KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | IODINE SOL STRONG | IODINE SOLUTION STRONG 5% (LUGOL'S) | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | IODINE SOL STRONG | IODINE SOLUTION STRONG (LUGOL'S) (BULK) | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ISOCAL LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ISOCAL HN LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ISOCAL HN LIQ PLUS | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ISOFLURANE SOL | ISOFLURANE INHAL SOLN | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | ISOSOURCE LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ISOSOURCE LIQ CLS SYS | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | ISOSOURCE LIQ VHN VANL | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ISOSOURCE HN LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | JIVI INJ 1000UNIT | ANTIHEMOPHILIC FACTOR RECOM PEGYLATED-AUCL FOR INJ 1000 UNIT | Tier 3 | X | | | X |
| Miscellaneous Therapeutic Agents | JIVI INJ 2000UNIT | ANTIHEMOPHILIC FACTOR RECOM PEGYLATED-AUCL FOR INJ 2000 UNIT | Tier 3 | X | | | X |
| Miscellaneous Therapeutic Agents | JIVI INJ 3000UNIT | ANTIHEMOPHILIC FACTOR RECOM PEGYLATED-AUCL FOR INJ 3000 UNIT | Tier 3 | X | | | X |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | JIVI INJ 500 UNIT | ANTIHEMOPHILIC FACTOR RECOM PEGYLATED-AUCL FOR INJ 500 UNIT | Tier 3 | X | | | X |
| Miscellaneous Therapeutic Agents | KATE FARMS LIQ 1.0 | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | KATE FARMS LIQ 1.4 | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | KATE FARMS LIQ 1.5 | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | KERALYT KIT SCALP 6% | SALICYLIC ACID SHAMPOO 6% & SALICYLIC ACID GEL 6% KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | KETAMINE HCL POW | KETAMINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | KETOPROFEN POW | KETOPROFEN (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | KETOPROFEN POW MICRONIZ | KETOPROFEN (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | KETOPROFEN POW ULT MICR | KETOPROFEN (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | KETOROLAC POW TROMETHA | KETOROLAC TROMETHAMINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | KETOVIE LIQ PEPTIDE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | KETOVIE LIQ UNFLAVOR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | KETOVIE 4:1 LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | KLS ASPIRIN TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | KP ASPIRIN TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | KP BISACODYL TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | KRISGEL 100 GEL | KRISGEL 100 GEL | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | KUDZU ROOT POW | *KUDZU (BULK) POWDER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LANOLIN ANHY OIN | LANOLIN ANHYDROUS OINTMENT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | L-ARGININE CAP 500MG | ARGININE CAP 500 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | L-ASPARAGINE POW MONOHYDR | *BULK CHEMICALS - POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LAXATIVE TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | L-CARNOSINE POW | CARNOSINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | L-CITRULLINE CAP 600MG | CITRULLINE CAP 600 MG | Tier 1 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | L-CITRULLINE POW | CITRULLINE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LECITHIN GEL | PREMIUM LECITHIN ORGANOGEL BASE GEL | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LECITHIN GRA | LECITHIN GRANULES | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | LEUCINE PAK 100MG | LEUCINE ORAL POWDER PACKET 100 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | LEUCOVORIN POW CALCIUM | LEUCOVORIN CALCIUM POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LEUPROLIDE POW ACETATE | LEUPROLIDE ACETATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LEVBIID TAB 0.375 ER | HYOSCYAMINE SULFATE TAB ER 12HR 0.375 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LEVOMEFOLATE POW GLUCOSAM | LEVOMEFOLATE GLUCOSAMINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LEVSIN TAB 0.125MG | HYOSCYAMINE SULFATE TAB 0.125 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LEVSIN/SL SUB 0.125MG | HYOSCYAMINE SULFATE SL TAB 0.125 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | L-GLUTATHION CRY | GLUTATHIONE CRYSTALS | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIMBREL CAP 250MG | FLAVOCOXID CAP 250 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIMBREL CAP 500MG | FLAVOCOXID CAP 500 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIMBREL250 CAP 250-50MG | FLAVOCOXID-CITRATED ZINC BISGLYCINATE CAP 250-50 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIMBREL500 CAP 500-50MG | FLAVOCOXID-CITRATED ZINC BISGLYCINATE CAP 500-50 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIPISTART POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIPO CREAM CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIPOCREAM CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIPODERM HMW GEL PCCA | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIPOIC ACID POW | ALPHA-LIPOIC ACID (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIPOIC ACID POW DL | ALPHA-LIPOIC ACID (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIPOLAYER CRE | *CREAM BASE LIPOSOMIC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIPOPEN CRE ARBEM | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIPOPEN ABSO CRE ENHANCNG | *CREAM BASE** | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | LIOPEN ULTR CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIPOSOMAL CRE HEAVY | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIPOSOMAL CRE REGULAR | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LIPOZYME CRE | *CREAM BASE LIPOSOMIC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIQ HOPE PEP LIQ BERRY | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIQUACEL LIQ | *AMINO ACIDS ORAL LIQUID*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LIVMARLI SOL 9.5MG/ML | MARALIXIBAT CHLORIDE ORAL SOLN 9.5 MG/ML | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | L-LYSINE HCL TAB 500MG | LYSINE HCL TAB 500 MG | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | LMD POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | LOVASTATIN POW | LOVASTATIN (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LOVO-ODF LIQ CUSTOM | *PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LOW DOSE ASA TAB 81MG | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | LUBRAJEL NP GEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | LUGOLS SOL | IODINE SOLUTION STRONG (LUGOL'S) (BULK) | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | LYSINE TAB 1000MG | LYSINE HCL TAB 1000 MG | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | MAGNESIUM POW BISGLYCI | MAGNESIUM GLYCINATE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MAGNESIUM POW GLYCINAT | MAGNESIUM GLYCINATE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MAGNESIUM AA POW CHELATE | MAGNESIUM AMINO ACID CHELATE (BULK) POWDER 20% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MASK VORTEX/ MIS FROG | *SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | MASK VORTEX/ MIS LADY BUG | *SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | MAXICOMFORT MIS 27GX1/2 | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 27 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | MAXICOMFORT MIS 27GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1 ML 27 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | MAXICOMFORT MIS 31GX1/4" | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | MCT PRO-CAL PAK | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | MEDERMA CRE SPF 30 | *SCAR TREATMENT PRODUCTS - CREAM** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MEDIDERM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MEDI-FIRST TAB 325 ASP | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | MEDIQUE ASPI TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | MELATONIN POW | MELATONIN POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MELOXICAM POW | MELOXICAM (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MERCAPTOPURI POW | MERCAPTOPURINE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MERCAPTOPURI POW | MERCAPTOPURINE MONOHYDRATE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MERCAPTOPURI POW MONOHYDR | MERCAPTOPURINE MONOHYDRATE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MERITENE POW CHOCOLAT | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MERITENE POW VANILLA | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | METHACHOLINE KIT CHLORIDE | *METHACHOLINE CHLORIDE INHALATION SOLN KIT*** | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | METHIONINE CAP 200MG | *NUTRITIONAL SUPPLEMENT CAPS** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | METHIONINE POW | METHIONINE ORAL PACKET 100 MG | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | METHYLCOBALA POW | METHYLCOBALAMIN POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | METHYLTETRAH POW CALCIUM | 5-METHYLTETRAHYDROFOLATE CALCIUM POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MICROCHAMBER MIS | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | MICRODERM CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MICROLET MIS NEXT | *LANCET DEVICES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MIDAZOLAM POW | MIDAZOLAM (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MINI LANCING MIS DEVICE | *LANCET DEVICES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MINILINK RT MIS TRANSMIT | *CONTINUOUS BLOOD GLUCOSE SYSTEM TRANSMITTER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MINIMED 630G MIS TRANSMIT | *CONTINUOUS BLOOD GLUCOSE SYSTEM TRANSMITTER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MINOXIDIL POW | MINOXIDIL POWDER | Tier 3 | X | | | |

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|----------------------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | MITOMYCIN POW | MITOMYCIN (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MM ASPIRIN TAB LOW DOSE | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | MM LANCING MIS DEVICE | *LANCET DEVICES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MMA/PA GEL PAK | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MMA/PA GEL POW | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MODERNA INJ 6MO-11Y | COVID-19 MRNA VACCINE 6MO-11YR-MODERNA IM SUSP 25 MCG/0.25ML | HCR | | | | |
| Miscellaneous Therapeutic Agents | MODULEN IBD POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MOMETASONE POW | MOMETASONE FUROATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MONOBENZONE POW | MONOBENZONE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MSUD COOLER LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MSUD COOLER LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MSUD EASY TAB | *NUTRITIONAL SUPPLEMENT TABS** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MSUD GEL PAK UNFLAVOR | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MUCOLOX LIQ | *PHARMACEUTICAL EXCIPIENTS (BULK) LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | MULTIBASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MULTI-PHASIC CRE CMPD | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | MYCOZYL AL SOL 1% | TOLNAFTATE SOLN 1% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NABUMETONE POW | NABUMETONE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | N-ACETYL-L POW CARNOSIN | N-ACETYL-L-CARNOSINE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NALTREXONE POW HCL | NALTREXONE HCL (BULK) POWDER | Tier 2 | X | | | |
| Miscellaneous Therapeutic Agents | NALTREXONE POW HCL | NALTREXONE HCL DIHYDRATE (BULK) POWDER | Tier 2 | X | | | |
| Miscellaneous Therapeutic Agents | NALTREXONE POW HCL DIHY | NALTREXONE HCL DIHYDRATE (BULK) POWDER | Tier 2 | X | | | |
| Miscellaneous Therapeutic Agents | NATACREAM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NATURAL CRE | *CREAM BASE** | Tier 3 | X | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | NEEDL COLLEC MIS DISPOSAL | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NEEDLE COLLE MIS DISPOSAL | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NEOSALUS CRE | *DERMATOLOGICAL PRODUCTS MISC - CREAM** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NEPRO/CARB LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NESTLE FLAVO PAK EX-STR | *NUTRITIONAL SUPPLEMENT FLAVOR PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NICOTINAMIDE POW ADENINE | NADIDE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NICOTINAMIDE POW RIBOSIDE | NICOTINAMIDE RIBOSIDE CHLORIDE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NITRIC ACID LIQ | NITRIC ACID LIQUID | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NORDIPEN 5 MIS DEVICE | *INJECTION DEVICE - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NORDIPEN DEL MIS SYSTEM | *INJECTION DEVICE - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NOURILITE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NOURISIL GEL | *SILICONE (BULK) GEL*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NOURIVAN CRE ANTIOX | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NOVAFILM GEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NOVASOURCE LIQ PULMONAR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NOVOPEN ECHO MIS | INJECTION DEVICE FOR INSULIN | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NULEV TAB 0.125MG | HYOSCYAMINE SULFATE TAB DISINT 0.125 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTREN LIQ JR/FIBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTREN LIQ JUNIOR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTREN LIQ PULMONAR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTREN 1.0 LIQ /FIB UNF | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUTREN 1.0 LIQ /FIBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUTREN 1.0 LIQ ULTRAPAK | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUTREN 1.0 LIQ UNFLAVOR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |

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|----------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | NUTREN 1.5 LIQ FIBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTREN 1.5 LIQ ULTRAPAK | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUTREN 1.5 LIQ UNFLAV | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTREN 2.0 LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTREN RENAL LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUTREN RENAL LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTRI-DRINK LIQ + CHOCOL | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTRI-DRINK LIQ + VANILA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTRI-DRINK LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTRI-DRINK LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | NUTRIHEAL LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUTRIRENAL LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUTRIVENT LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUTRIVENT LIQ 1.5 VAN | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | NUVAIL SOL 16% | *DERMATOLOGICAL PRODUCTS MISC - SOLUTION** | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | NZ WHEY PROT POW ISOLATE | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OA 1 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | OA 2 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OCCLUSADERM GEL PCCA | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OCCLUVAN OIN | HYDROPHILIC OINTMENT | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | OMNIBASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | OMNIFLEX DPR | *DIAPHRAGMS*** | HCR | | | | |
| Miscellaneous Therapeutic Agents | OMNIPOD 5 G6 KIT INTRO | *INSULIN INFUSION DISPOSABLE PUMP KIT*** | Tier 2 | X | X | | |
| Miscellaneous Therapeutic Agents | OMNIPOD 5 G6 MIS PODS | *INSULIN INFUSION DISPOSABLE PUMP RESERVOIR*** | Tier 2 | X | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | ON/GO COVID KIT ANTIGEN | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ON/GO ONE KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ONETOUCH LIQ VERIO 4 | *BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | ONETOUCH MIS LANC DEV | *LANCET DEVICES*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | ONETOUCH DEL MIS LANC DEV | *LANCET DEVICES*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | ONETOUCH SOL KIT STARTER | *BLOOD GLUCOSE MONITOR KIT W/ WELLNESS DEVICE & DIGITAL APP* | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | ORA-BLEND SUS | *ORAL VEHICLES - SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ORA-BLEND SF SUS | *ORAL VEHICLES - SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ORAPENN SD LIQ SWEET | *ORAL VEHICLES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ORA-PLUS LIQ | *ORAL VEHICLES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ORA-SWEET SYP | *ORAL VEHICLES - SYRUP*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | ORA-SWEET SF SYP | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ORLADEYO CAP 110MG | BEROTRALSTAT HCL CAP 110 MG | Tier 3 | X | X | X | X |
| Miscellaneous Therapeutic Agents | ORLADEYO CAP 150MG | BEROTRALSTAT HCL CAP 150 MG | Tier 3 | X | X | X | X |
| Miscellaneous Therapeutic Agents | OSCIMIN SUB 0.125MG | HYOSCYAMINE SULFATE SL TAB 0.125 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OSCIMIN TAB 0.125MG | HYOSCYAMINE SULFATE TAB 0.125 MG | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OSELTAMIVIR POW | OSELTAMIVIR PHOSPHATE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OVACE PLUS CRE 10% | SULFACETAMIDE SODIUM CREAM 10% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OVACE PLUS GEL 10% WASH | SULFACETAMIDE SODIUM CLEANSING GEL 10% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OVACE PLUS LIQ 10% WASH | SULFACETAMIDE SODIUM LIQUID 10% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OVACE PLUS LOT 9.8% | SULFACETAMIDE SODIUM LOTION 9.8% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OVACE PLUS SHA 10% | SULFACETAMIDE SODIUM SHAMPOO 10% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | OVACE WASH LIQ 10% | SULFACETAMIDE SODIUM LIQUID 10% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP ESCALAT | PEANUT POWDER-DNFP STARTER PACK 0.5 & 1 & 1.5 & 3 & 6 MG | Tier 3 | X | X | | X |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 1 | PEANUT POWDER-DNFP CAP SPRINKLE PACK 3 X 1 MG (3 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 10 | PEANUT POWDER-DNFP PACK 2 X 20 MG & 2 X 100 MG (240 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 2 | PEANUT POWDER-DNFP CAP SPRINKLE PACK 6 X 1 MG (6 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 3 | PEANUT POWDER-DNFP PACK 2 X 1 MG & 10 MG (12 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 4 | PEANUT POWDER-DNFP CAP SPRINKLE PACK 20 MG (20 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 5 | PEANUT POWDER-DNFP CAP SPRINKLE PACK 2 X 20 MG (40 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 6 | PEANUT POWDER-DNFP CAP SPRINKLE PACK 4 X 20 MG (80 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 7 | PEANUT POWDER-DNFP PACK 20 MG & 100 MG (120 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 8 | PEANUT POWDER-DNFP PACK 3 X 20 MG & 100 MG (160 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA CAP LEVEL 9 | PEANUT POWDER-DNFP PACK 2 X 100 MG (200 MG DOSE) | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA POW LEVEL 11 | PEANUT ALLERGEN POWDER-DNFP TITRATION PACKET 300 MG | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PALFORZIA POW LEVEL 11 | PEANUT ALLERGEN POWDER-DNFP MAINTENANCE PACKET 300 MG | Tier 3 | X | X | | X |
| Miscellaneous Therapeutic Agents | PARADIGM REA MIS TRANSMIT | *CONTINUOUS BLOOD GLUCOSE SYSTEM TRANSMITTER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PARI VORTEX MIS ADL MASK | *SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES - MASKS*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | PCCA ACACIA SYP BASE | ACACIA SYRUP | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PCCA ALADERM CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA BASE CRE 7542 | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA CANNIDX CRE 2.0 CUST | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA CANNIDX CRE CUST BSE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA COBASE OIN #1 | COBASE #1 OINTMENT BASE | Tier 3 | | | | |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | PCCA COSMETI CRE HRT BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA CUSTOM CRE LIPO-MAX | *CREAM BASE LIPOSOMIC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PCCA EMOLLIE CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA LIPODER CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA LIPOSOM CRE DRY | *CREAM BASE LIPOSOMIC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PCCA LIPOSOM CRE NORMAL | *CREAM BASE LIPOSOMIC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PCCA LIPOSOM CRE OILY | *CREAM BASE LIPOSOMIC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PCCA LIPOSOM CRE SENSITIV | *CREAM BASE LIPOSOMIC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PCCA MVC CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA SWEET SYP -SF | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PCCA SYRUP SYP VEHICLE | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PCCA VANISH CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA VANISHI CRE LIGHT | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA VANPEN CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PCCA-PLUS SUS | *ORAL VEHICLES - SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEG BASE OIN | POLYETHYLENE GLYCOL OINTMENT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 29GX1/2" | INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 29GX3/16 | INSULIN PEN NEEDLE 29 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 29GX5/16 | INSULIN PEN NEEDLE 29 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 31GX4MM | INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 31GX6MM | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 33GX4MM | INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 33GX5/32 | INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |

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|----------------------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 33GX5MM | INSULIN PEN NEEDLE 33 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLE MIS 33GX6MM | INSULIN PEN NEEDLE 33 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 29GX1/2" | INSULIN PEN NEEDLE 29 G X 12 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 29GX12.7 | INSULIN PEN NEEDLE 29 G X 12.7 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 29GX12MM | INSULIN PEN NEEDLE 29 G X 12 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 30GX3/16 | INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 30GX5MM | INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 31GX1/4" | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 31GX3/16 | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 31GX5/16 | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 31GX6MM | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PEN NEEDLES MIS 33GX5/32 | INSULIN PEN NEEDLE 33 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PENCREAM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PENDERM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PENSOMAL CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PENTIPS MIS 29GX12MM | INSULIN PEN NEEDLE 29 G X 12 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PENTIPS MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PENTIPS MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PENTOXIFYL POW | PENTOXIFYLLINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN LIQ PREBIO1 | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN LIQ UNFLAVOR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN 1.5 LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | PEPTAMEN AF LIQ UNFLAVOR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN JR LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN JR LIQ UNFLAVRD | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN JUN POW VANILLA | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN VHP LIQ ULTRAPAK | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN VHP LIQ UNFLAVOR | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEPTAMEN VHP LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEPTINEX 1.5 LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PEPTINEX DT LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PEPTINEX DT LIQ /FIBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PEPTINEX DT LIQ PREBIOTC | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PEPTINEX DT LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PERGOLIDE POW MESYLATE | PERGOLIDE MESYLATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PETROLATUM GEL WHITE | WHITE PETROLATUM TOPICAL GEL | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | PETROLATUM OIN WHITE | WHITE PETROLATUM OINTMENT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PETROLATUM OIN YELLOW | PETROLATUM OINTMENT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PFCB CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PFD 2 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PFD TODDLER POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PFD TODDLER POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PFIZER 5-11Y INJ 2023-24 | COVID-19 MRNA VAC TRIS-S 5-11Y-PFIZER IM SUSP 10 MCG/0.3ML | HCR | | | | |
| Miscellaneous Therapeutic Agents | PFIZER 6M-4Y INJ 2023-24 | COVID-19 MRNA VAC TRIS-S 6MO-4Y-PFIZER IM SUSP 3 MCG/0.3ML | HCR | | | | |
| Miscellaneous Therapeutic Agents | PHARMABASE CRE ANTIOXID | *CREAM BASE** | Tier 3 | X | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|--------------------------|-------------------------------------|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | PHARMABASE CRE COSMETIC | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PHARMABASE CRE HEAVY | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PHARMABASE CRE LIGHT | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PHARMABASE CRE VAGINAL | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PHENYL-FREE POW 2 | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PHENYL-FREE POW 2HP | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PHENYLPROPAN POW HCL | PHENYLPROPANOLAMINE HCL POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PHOSPHATIDYL POW 20% | PHOSPHATIDYLSERINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PHYTOBASE CRE | *CREAM BASE** | Tier 2 | X | | | |
| Miscellaneous Therapeutic Agents | PHYTOBASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PILOT COVID KIT HOME TES | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PINE BARK EX POW 95% | PINE BARK EXTRACT (BULK) POWDER 95% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU AIR20 LIQ GOLD | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU AIR20 LIQ GREEN | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU AIR20 LIQ YELLOW | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU COOLER LIQ 15 ORNGE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU COOLER LIQ 15 PRPLE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 10 LIQ ORANGE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 10 LIQ PURPLE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 10 LIQ RED | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 10 LIQ WHITE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 15 LIQ RED | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 15 LIQ WHITE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 20 LIQ ORANGE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | PKU COOLR 20 LIQ PURPLE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 20 LIQ RED | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU COOLR 20 LIQ WHITE | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU EASY POW SHAKE&GO | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU EASY TAB | *NUTRITIONAL SUPPLEMENT TABS** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU EASY TAB MICROTAB | *NUTRITIONAL SUPPLEMENT TABS DELAYED RELEASE** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU GEL PAK | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PKU GO POW | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU SPHERE POW 15 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU SPHERE POW 20 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PKU TRIO POW UNFLAVOR | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | PKU TRIO POW VANILLA | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | PLO GEL MEDIFLO | PREMIUM LECITHIN ORGANOGEL BASE GEL | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PLO MEDIFLO GEL 30 | PREMIUM LECITHIN ORGANOGEL BASE GEL | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PLO MEDIFLO KIT 30 KIT | PREMIUM LECITHIN ORGANOGEL BASE KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PLO MEDIFLO KIT KIT | PREMIUM LECITHIN ORGANOGEL BASE KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PLO TRANSDER CRE | *TRANSDERMAL BASE CREAM** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PLO20 GEL FLOWABLE | PREMIUM LECITHIN ORGANOGEL BASE GEL | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PLO20 GEL NON-FLOW | PREMIUM LECITHIN ORGANOGEL BASE GEL | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PODOCON-25 SOL | PODOPHYLLUM RESIN SOLN 25% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 20GX1" | NEEDLE (DISP) 20 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 21GX1" | NEEDLE (DISP) 21 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 21GX1.5" | NEEDLE (DISP) 21 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 22GX1" | NEEDLE (DISP) 22 X 1" | Tier 2 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|--------------------------------------|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | POLY HUB MIS 22GX1.5" | NEEDLE (DISP) 22 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 23GX1" | NEEDLE (DISP) 23 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 23GX1.5" | NEEDLE (DISP) 23 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 25GX1" | NEEDLE (DISP) 25 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 25GX1.5" | NEEDLE (DISP) 25 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLY HUB MIS 25GX5/8" | NEEDLE (DISP) 25 X 5/8" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | POLYETH GLYC OIN 8000 | POLYETHYLENE GLYCOL 8000 OINT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | POLYMAC GEL PROGEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | POLYOX POW WSR-301 | *BULK CHEMICALS - POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | POLYOX WSR POW -301 | *BULK CHEMICALS - POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | POLYPEG OIN BASE | POLYETHYLENE GLYCOL OINTMENT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | POLYSORBATE LIQ 80 | POLYSORBATE 80 LIQ | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | POLYSORBATE LIQ 80 | POLYSORBATE 80 LIQ | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | PORTAGEN POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | POT IODIDE SOL 1GM/ML | POTASSIUM IODIDE ORAL SOLN 1 GM/ML | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | POT PHOSPHAT GRA DIBASIC | POTASSIUM PHOSPHATE DIBASIC GRANULES | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PPA/MMA POW EXPRESS | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PRACASIL TM- CRE PLUS | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PRAMOX GEL 1% | PRAMOXINE HCL GEL 1% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PRE PROTEIN POW | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PRE PROTEIN TAB | *AMINO ACIDS TAB*** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | PREGNENOLONE POW | PREGNENOLONE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PREGNENOLONE POW MICRONIZ | PREGNENOLONE (MICRONIZED) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PREKUNIL TAB | *NUTRITIONAL SUPPLEMENT TABS** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | PREPROTEIN LIQ | *AMINO ACIDS ORAL LIQUID*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PREPROTEIN LIQ 20 | *AMINO ACIDS ORAL LIQUID*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PREVENT DROP MIS 31GX1/4" | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PREVENT DROP MIS 31GX5/16 | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PREVENT SAFE MIS 31GX1/4" | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PREVENT SAFE MIS 31GX5/16 | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PROBALANCE LIQ ULTRAPAK | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PROBALANCE LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PROCEL POW | *PROTEIN ORAL POWDER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PROCEL POW CHOCOLAT | *PROTEIN ORAL POWDER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PROCEL 100 POW | *PROTEIN ORAL POWDER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PROCHAMBER MIS VHC | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | PROGESTERONE POW MICRONIZ | PROGESTERONE MICRONIZED (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PROMETHAZINE POW HCL | PROMETHAZINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PROSOURCE LIQ NO CARB | *PROTEIN ORAL LIQUID*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PROSOURCE LIQ PLUS | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PROSOURCE LIQ TF20 | *PROTEIN LIQUID (ENTERAL)*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PROSTAGLAND POW E1 | ALPROSTADIL POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PROSYNMINIC POW | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PROT COOKIE MIS OATRAISN | *NUTRITIONAL SUPPLEMENT MISC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PROTEIN CHW 500MG | PROTEIN CHEW TAB 500 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | PROTEIN POW 80% | PROTEIN POWDER 80% | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | PROTEIN POW 80% | PROTEIN POWDER 80% | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | PROTEIN POW 90% | *PROTEIN ORAL POWDER*** | Tier 1 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | PROTEINEX TAB | *AMINO ACIDS TAB*** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | PROVOCHOLINE KIT | *METHACHOLINE CHLORIDE INHALATION SOLN KIT*** | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | P-SILOXAN DS CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | PURE COMFORT MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PURE COMFORT MIS 31GX6MM | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | PURIFIED LIQ WATER | *DISTILLED WATER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | PX ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | PX ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | QC ASPIRIN CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | QC ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | QC ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | QC CHILD ASA CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | QC LAXATIVE TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | QUICKVUE HOM KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | RA ASPIRIN CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | RA ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | RA ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | RA ASPIRIN TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | RA LAXATIVE TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | RA L-LYSINE TAB 1000MG | LYSINE HCL TAB 1000 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | RA L-LYSINE TAB 500MG | LYSINE HCL TAB 500 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | RA PEN NEEDL MIS 31GX3/16 | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | RADIOGARDASE CAP 0.5GM | PRUSSIAN BLUE INSOLUBLE CAP 0.5 GM | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | RASPBERRY SYP | RASPBERRY SYRUP | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | RAYA SURE MIS 29GX12MM | INSULIN PEN NEEDLE 29 G X 12 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | RAYA SURE MIS 31GX4MM | INSULIN PEN NEEDLE 31 G X 4 MM (1/6" OR 5/32") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | RAYA SURE MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | RAYA SURE MIS 31GX6MM | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | RAYA SURE MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | RAYASAL CRE 5.9% | SALICYLIC ACID CREAM 5.9% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | REMIGEN CREA CRE | *DERMATOLOGICAL PRODUCTS MISC - CREAM** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | RENASTART POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | REPLETE LIQ /FIBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | REPLETE LIQ ULTRAPAK | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RESOURCE ARG PAK LEMON | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RESOURCE KID LIQ CR STRAW | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RESOURCE KID LIQ FR VAN | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RESOURCE KID LIQ SW CHOC | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RESOURCE KID LIQ W/ FIBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RESOURCE SUP LIQ CHOCOLAT | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | RESOURCE SUP LIQ STRAWBER | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | RESOURCE SUP LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | RESPALOR LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | RESVERATROL POW | RESVERATROL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RESVERATROL POW +98% | RESVERATROL (BULK) POWDER 98% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RESVERATROL POW 98% | RESVERATROL (BULK) POWDER 98% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RETINALDEHYD POW | RETINAL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | RHEOSPRAY LIQ | *EXTERNAL VEHICLES - LIQUID*** | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | RIBAVIRIN POW | RIBAVIRIN (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | S.O.S. 20 POW | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | S.O.S. 25 POW | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SA3 DERM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | S-ADENOSYL-L POW METHIONI | ADEMATIONINE DISULFATE TOSYLATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SAFETYGLIDE MIS 21GX1" | NEEDLE (DISP) 21 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFETYGLIDE MIS 21GX1.5" | NEEDLE (DISP) 21 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 19GX1" | NEEDLE (DISP) 19 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 19GX1.5" | NEEDLE (DISP) 19 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 20GX1" | NEEDLE (DISP) 20 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 20GX1.5" | NEEDLE (DISP) 20 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 21GX1" | NEEDLE (DISP) 21 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 21GX1.5" | NEEDLE (DISP) 21 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 22GX1" | NEEDLE (DISP) 22 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 22GX1.5" | NEEDLE (DISP) 22 X 1-1/2" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 23GX1" | NEEDLE (DISP) 23 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 25GX1" | NEEDLE (DISP) 25 X 1" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SAFTY NEEDLE MIS 25GX5/8" | NEEDLE (DISP) 25 X 5/8" | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | SALICATE LIQ 10% | SALICYLIC ACID LIQUID 10% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SALICYLIC AC SOL 26% | SALICYLIC ACID SOLN 26% | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | SALICYLIC AC SOL 50% | SALICYLIC ACID (BULK) SOLUTION 50% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SALIMEZ CRE 6% | SALICYLIC ACID CREAM 6% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SALT DURABLE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SALT STABLE CRE LS ADV | *CREAM BASE** | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | SALTSTABLE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SALY CIM CRE 6% | SALICYLIC ACID CREAM 6% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SANARE CRE ADVANCED | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SANARE SCAR CRE THERAPY | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SCANDICAL POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SCANDISHAKE MIS CARAMEL | *NUTRITIONAL SUPPLEMENT MISC** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SCANDISHAKE POW STRAWBRY | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SCANDISHAKE POW VANILLA | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SCANDISHAKE POW VANILLA | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SCAR CARE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SCARCIN CRE | *SCAR TREATMENT PRODUCTS - CREAM** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SECURESAFE MIS 29GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SECURESAFE MIS 29GX1/2" | INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SERAQUA LIQ | *SERUM BASE - LIQUID*** | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | SERMORELIN POW ACETATE | SERMORELIN ACETATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SEROTONIN POW HCL | SEROTONIN HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SEVENFACT INJ 1MG | COAGULATION FACTOR VIIA (RECOM)-JNCW FOR INJ 1 MG (1000 MCG) | Tier 3 | | | | X |
| Miscellaneous Therapeutic Agents | SEVENFACT INJ 5MG | COAGULATION FACTOR VIIA (RECOM)-JNCW FOR INJ 5 MG (5000 MCG) | Tier 3 | | | | X |
| Miscellaneous Therapeutic Agents | SEVOFLURANE SOL | SEVOFLURANE INHAL SOLN | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | SHARP CONTAI MIS | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SHARPS COLL MIS 0.05GAL | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SHARPS COLL MIS 5.4QT | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SHARPS COLL MIS 6.9QT | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | SHARPS COLL MIS 8.2QT | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SHARPS CONTA MIS 0.05L | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SHARPS UNIV MIS CONTAIN | *SHARPS CONTAINER - MISC*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SILPROTEX CRE PLUS | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SIMPLE SYP | SIMPLE - SYRUP | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SIMPLGEL 30 GEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SIROLIMUS POW | SIROLIMUS (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SKYY DERM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SM ASPIRIN CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SM ASPIRIN TAB 325MG | ASPIRIN TAB 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SM ASPIRIN TAB 325MG EC | ASPIRIN TAB DELAYED RELEASE 325 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SM ASPIRIN TAB 81MG EC | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SM CHILD ASA CHW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SM FOLIC ACD TAB 400MCG | FOLIC ACID TAB 400 MCG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SM GENTLE TAB LAXATIVE | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SM LAXATIVE TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SOD PYROPHOS POW ANHYDROU | *BULK CHEMICALS - POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SOD SULFACET GEL 10% | SULFACETAMIDE SODIUM CLEANSING GEL 10% | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | SOD SULFACET SHA 10% | SULFACETAMIDE SODIUM SHAMPOO 10% | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | SODIUM POW HYALURON | HYALURONATE SODIUM (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SODIUM BUTYR POW | SODIUM BUTYRATE POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SODIUM SULFA LIQ 10% WASH | SULFACETAMIDE SODIUM LIQUID 10% | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | SOLYDRA LIQ | *OIL BASE - LIQUID*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SPEEDY SWAB KIT COVID-19 | COVID-19 AT HOME ANTIGEN TEST KIT | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | SPIKEVAX INJ 50/0.5ML | COVID-19 MRNA VACCINE-MODERNA IM SUSP PREF SYR 50 MCG/0.5ML | HCR | | | | |
| Miscellaneous Therapeutic Agents | SPIKEVAX INJ 50/0.5ML | COVID-19 (SARS-COV-2)MRNA VACC-MODERNA IM SUSP 50 MCG/0.5ML | HCR | | | | |
| Miscellaneous Therapeutic Agents | SPIRA-WASH GEL BASE | *GEL BASE - GEL** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SSKI SOL 1GM/ML | POTASSIUM IODIDE ORAL SOLN 1 GM/ML | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ST JOSEPH CHW LOW 81MG | ASPIRIN CHEW TAB 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | ST JOSEPH TAB LOW 81MG | ASPIRIN TAB DELAYED RELEASE 81 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | SUBDUE LIQ CHOC/ALM | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SUBDUE LIQ ORNG/VAN | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SUBDUE LIQ REDI-FED | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SUBDUE LIQ UNFLAVRD | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SUBDUE PLUS LIQ UNFLAVRD | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SUCCIMER DMS POW | SUCCIMER (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SULFADIMETHO POW | SULFADIMETHOXINE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SUPREME CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | SURE COMFORT MIS 31GX1/4 | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SURE COMFORT MIS 31GX3/16 | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SURE COMFORT MIS 31GX5/16 | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SUSPENDRX SUS SWEET | *ORAL VEHICLES - SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SUSPENDRX SUS UNSWEET | *ORAL VEHICLES - SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SUSPENSION SUS VEHICLE | *ORAL VEHICLES - SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SYRG/NEEDLE MIS 29GX12.5 | INSULIN SYRINGE/NEEDLE U-100 1 ML 29 X 1/2" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SYRG/NEEDLE MIS 31GX6MM | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 15/64" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SYRG/NEEDLE MIS 31GX6MM | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 15/64" | Tier 2 | | X | | |

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|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | SYRG/NEEDLE MIS 31GX6MM | INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 15/64" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SYRG/NEEDLE MIS 31GX8MM | INSULIN SYRINGE/NEEDLE U-100 0.3 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SYRG/NEEDLE MIS 31GX8MM | INSULIN SYRINGE/NEEDLE U-100 1/2 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SYRG/NEEDLE MIS 31GX8MM | INSULIN SYRINGE/NEEDLE U-100 1 ML 31 X 5/16" | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | SYRPALTA SYP | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SYRPALTA SYP | SIMPLE - SYRUP | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SYRSPEND SF LIQ | *ORAL VEHICLES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SYRSPEND SF SUS PH4 | *ORAL VEHICLES FOR SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SYRUP SYP VEHICLE | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | SYRUP SF SYP VEHICLE | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TACROLIMUS POW | TACROLIMUS (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TACROLIMUS POW MONOHD | TACROLIMUS (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TADALAFIL POW | TADALAFIL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TAMOXIFEN POW CITRATE | TAMOXIFEN CITRATE (BULK) POWDER | Tier 2 | X | | | |
| Miscellaneous Therapeutic Agents | TDC MAX CRE | *TRANSDERMAL BASE CREAM** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TECHNELITE KIT HEU | TECHNETIUM TC 99M NA PERTECHNETATE FOR SOLN KIT | Tier 3 | X | | X | |
| Miscellaneous Therapeutic Agents | TECHNELITE KIT LEU | TECHNETIUM TC 99M NA PERTECHNETATE FOR SOLN KIT | Tier 3 | X | | X | |
| Miscellaneous Therapeutic Agents | TEMPO SMART MIS BUTTON | *BLOOD GLUCOSE MONITORING MISC.*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TERODERM CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TERODERM CRE PLUS | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TERRELL SOL | ISOFLURANE INHAL SOLN | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | TESTOSTERONE CRY YAM | TESTOSTERONE MICRONIZED (BULK) CRYSTALS | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TESTOSTERONE POW | TESTOSTERONE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TESTOSTERONE POW CYPIONAT | TESTOSTERONE CYPIONATE (BULK) POWDER | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | TESTOSTERONE POW ENANTHAT | TESTOSTERONE ENANTHATE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TESTOSTERONE POW SOY | TESTOSTERONE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | THIOGUANINE POW | THIOGUANINE (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | THIOTEPA POW | THIOTEPA (BULK) POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TIZANIDINE POW HCL | TIZANIDINE HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TOCOPHEROL LIQ ALPHA | VITAMIN E (BULK) LIQUID | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TOCOPHEROLS POW 30% | TOCOPHEROLS (BULK) POWDER 30% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TOCOPHERYL POW SUCCINAT | VITAMIN E SUCCINATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TOMMY GEL GEL | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TRAMADOL HCL POW | TRAMADOL HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TRANSDERMAL CRE PAIN BAS | *TRANSDERMAL BASE CREAM** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TRIAMCINOLON POW | TRIAMCINOLONE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TRIAMCINOLON POW DIACETAT | TRIAMCINOLONE DIACETATE MICRONIZED POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TRIAMCINOLON POW HEXACETO | TRIAMCINOLONE HEXACETONIDE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TRICHLOROACE CRY ACID | TRICHLOROACETIC ACID (BULK) CRYSTALS | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TRICHOSOL SOL | *EXTERNAL VEHICLES - SOLUTION*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TRUE METRIX SOL LEVEL 1 | *BLOOD GLUCOSE CALIBRATION - LIQUID - LOW*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | TRUE METRIX SOL LEVEL 2 | *BLOOD GLUCOSE CALIBRATION - LIQUID - NORMAL*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | TRUE METRIX SOL LEVEL 3 | *BLOOD GLUCOSE CALIBRATION - LIQUID - HIGH*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | TRUEDRAW MIS LANC DEV | *LANCET DEVICES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TYLACTIN POW RESTOR5 | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TYLACTIN RTD LIQ 15 CHOC | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TYR COOLER LIQ RED | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | TYR EASY TAB | *NUTRITIONAL SUPPLEMENT TABS** | Tier 3 | X | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|----------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | TYR GEL PAK UNFLAVOR | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TYROS 1 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | TYROS 2 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | U-BASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | UBIDECARENON POW | COENZYME Q10 POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | UBIQUINOL POW | UBIQUINOL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | UBIQUINOL POW 30% | UBIQUINOL (BULK) POWDER 30% | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | UCD TRIO POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | ULTANE SOL | SEVOFLURANE INHAL SOLN | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ULTRACAL LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ULTRACAL HN LIQ PLUS | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | U-MILD SHA | *EXTERNAL VEHICLES - SHAMPOO*** | Tier 3 | X | | X | |
| Miscellaneous Therapeutic Agents | UNIFINE PNTM MIS 29GX12MM | INSULIN PEN NEEDLE 29 G X 12 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | UNIFINE PNTM MIS 31GX3/16 | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | UNIFINE PNTM MIS 31GX5/16 | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | UNIFINE PNTM MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | UNIFINE PNTM MIS 31GX6MM | INSULIN PEN NEEDLE 31 G X 6 MM (1/4" OR 15/64") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | UNIFINE PNTM MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | UNIFINE PROT MIS 30GX5MM | INSULIN PEN NEEDLE 30 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | UNISPEND ANH SUS SWEETENE | *ORAL VEHICLES - SUSP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | UNJURY POW CHICKEN | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | UNJURY POW CHOCOLAT | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | UNJURY POW STRAWBRY | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | UNJURY POW UNFLAVOR | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | UNJURY POW VANILLA | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | UREA POW | UREA POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | UREA PRILLED BEA | UREA BEADS | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | UREAPRO POW | UREA POWDER | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VALINE PAK 50MG | VALINE ORAL POWDER PACKET 50 MG | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | VALINE 1000 POW | VALINE ORAL POWDER PACKET 1 GM | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VANIBASE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VANISHING CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VANISHING CRE BOTANCAL | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VANISH-PEN CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VARDENAFIL POW HCL | VARDENAFIL HCL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VEGAPRO POW | *PROTEIN ORAL POWDER*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VERIFINE PEN MIS 29GX12MM | INSULIN PEN NEEDLE 29 G X 12 MM (1/2") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | VERIFINE PEN MIS 31GX5MM | INSULIN PEN NEEDLE 31 G X 5 MM (1/5" OR 3/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | VERIFINE PEN MIS 31GX8MM | INSULIN PEN NEEDLE 31 G X 8 MM (1/3" OR 5/16") | Tier 2 | | X | | |
| Miscellaneous Therapeutic Agents | VERSABASE GEL | VERSABASE GEL | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VERSAFREE SYP | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VERSAPENN AL GEL ANHYDROU | *TRANSDERMAL BASE GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VERSAPLUS SYP | *ORAL VEHICLES - SYRUP*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VERSAPRO CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VERSAPRO GEL | *GEL BASE - GEL** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VERSAPRO GEL ANHYDROU | *GEL BASE - GEL** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VERSAPRO SHA | *EXTERNAL VEHICLES - SHAMPOO*** | Tier 3 | X | | X | |
| Miscellaneous Therapeutic Agents | VERSATILE CRE BASE | *CREAM BASE** | Tier 3 | X | | | |

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|----------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | VERSATILE CRE RICH BSE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VERSIGEL CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VHC 2.25 LIQ VANILLA | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VITAMIN D3 LIQ | CHOLECALCIFEROL LIQUID | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VITAMIN D3 POW | CHOLECALCIFEROL (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VITAMIN D3 POW | CHOLECALCIFEROL POWDER 100000 UNIT/GM | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VITAMIN E LIQ | VITAMIN E (BULK) LIQUID | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VITAMIN E LIQ ACETATE | VITAMIN E ACETATE (BULK) LIQUID | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VITAMIN E POW SUCCINAT | VITAMIN E SUCCINATE (BULK) POWDER | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VITAMIN K2 POW 0.2% | *MENAQUINONE-7 (BULK) POWDER*** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | VITATROCHE GRA BASE SF | *TROCHE BASE GRANULES*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VIVONEX POW PEDIATRI | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VIVONEX PLUS POW | *NUTRITIONAL SUPPLEMENT PACK** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VIVONEX RTF LIQ | *NUTRITIONAL SUPPLEMENT LIQUID** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | VORTEX VALVE MIS CHAMBER | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | VORTEX/MASK MIS CHILDS | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | VORTEX/MASK MIS TODDLER | *SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE*** | Tier 2 | | | | |
| Miscellaneous Therapeutic Agents | WA-001 EXPER OIL SOIL SUR | ETHOXYLATED MACADAMIA NUT OIL | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | WAV CUSTOM CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | WHEY PROTEIN POW | *PROTEIN ORAL POWDER*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | WHEY PROTEIN POW CHOCOLAT | *PROTEIN ORAL POWDER*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | WHEY PROTEIN POW CON | *PROTEIN ORAL POWDER*** | Tier 1 | X | | | |
| Miscellaneous Therapeutic Agents | WHEY PROTEIN POW CON | *PROTEIN ORAL POWDER*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | WHEY PROTEIN POW COOKIES | *PROTEIN ORAL PACK*** | Tier 1 | X | | | |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Miscellaneous Therapeutic Agents | WHEY PROTEIN POW STRAWBER | *PROTEIN ORAL POWDER*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | WHEY PROTEIN POW VANILLA | *PROTEIN ORAL POWDER*** | Tier 1 | | | | |
| Miscellaneous Therapeutic Agents | WIDE-SEAL DPR KIT 60 | DIAPHRAGM WIDE SEAL 60 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | WIDE-SEAL DPR KIT 65 | DIAPHRAGM WIDE SEAL 65 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | WIDE-SEAL DPR KIT 70 | DIAPHRAGM WIDE SEAL 70 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | WIDE-SEAL DPR KIT 75 | DIAPHRAGM WIDE SEAL 75 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | WIDE-SEAL DPR KIT 80 | DIAPHRAGM WIDE SEAL 80 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | WIDE-SEAL DPR KIT 85 | DIAPHRAGM WIDE SEAL 85 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | WIDE-SEAL DPR KIT 90 | DIAPHRAGM WIDE SEAL 90 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | WIDE-SEAL DPR KIT 95 | DIAPHRAGM WIDE SEAL 95 MM | HCR | | | | |
| Miscellaneous Therapeutic Agents | WINLEVI CRE 1% | CLASCOTERONE CREAM 1% | Tier 3 | | | X | |
| Miscellaneous Therapeutic Agents | WND 1 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | WND 2 POW | *NUTRITIONAL SUPPLEMENT POWDER** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | WOMANS LAXAT TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | WOMENS LAXAT TAB 5MG EC | BISACODYL TAB DELAYED RELEASE 5 MG | HCR | | | | |
| Miscellaneous Therapeutic Agents | WOUND CARE CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | XCEL 100 CRE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | XEMATOP CRE BASE | *CREAM BASE** | Tier 3 | X | | | |
| Miscellaneous Therapeutic Agents | XPHE MAXAMUM PAK ORANGE | *AMINO ACIDS PACK*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | XPHE MAXAMUM PAK UNFLAVOR | *AMINO ACIDS PACK*** | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ZACLIR LOT 8% | BENZOYL PEROXIDE LOTION 8% | Tier 3 | | | | |
| Miscellaneous Therapeutic Agents | ZOKINVY CAP 50MG | LONAFARNIB CAP 50 MG | Tier 2 | X | X | | X |
| Miscellaneous Therapeutic Agents | ZOKINVY CAP 75MG | LONAFARNIB CAP 75 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ALECENSA CAP 150MG | ALECTINIB HCL CAP 150 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |

*HCR = HCR Preventive Care

**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------|---|------------|------|--------------|--------------|-----------|
| Molecular Target Inhibitors - Chemotherapy Agents | ALUNBRIG PAK | BRIGATINIB TAB INITIATION THERAPY PACK 90 MG & 180 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ALUNBRIG TAB 180MG | BRIGATINIB TAB 180 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ALUNBRIG TAB 30MG | BRIGATINIB TAB 30 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ALUNBRIG TAB 90MG | BRIGATINIB TAB 90 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | AYVAKIT TAB 100MG | AVAPRITINIB TAB 100 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | AYVAKIT TAB 200MG | AVAPRITINIB TAB 200 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | AYVAKIT TAB 25MG | AVAPRITINIB TAB 25 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | AYVAKIT TAB 300MG | AVAPRITINIB TAB 300 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | AYVAKIT TAB 50MG | AVAPRITINIB TAB 50 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | BOSULIF CAP 100MG | BOSUTINIB CAP 100 MG | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | BOSULIF CAP 50MG | BOSUTINIB CAP 50 MG | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | BOSULIF TAB 100MG | BOSUTINIB TAB 100 MG | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | BOSULIF TAB 400MG | BOSUTINIB TAB 400 MG | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | BOSULIF TAB 500MG | BOSUTINIB TAB 500 MG | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | BRUKINSA CAP 80MG | ZANUBRUTINIB CAP 80 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | CABOMETYX TAB 20MG | CABOZANTINIB S-MALATE TAB 20 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | CABOMETYX TAB 40MG | CABOZANTINIB S-MALATE TAB 40 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | CABOMETYX TAB 60MG | CABOZANTINIB S-MALATE TAB 60 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | CALQUENCE CAP 100MG | ACALABRUTINIB CAP 100 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | CAPRELSA TAB 100MG | VANDETANIB TAB 100 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | CAPRELSA TAB 300MG | VANDETANIB TAB 300 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | COMETRIQ KIT 100MG | CABOZANTINIB S-MAL CAP 1 X 80 MG & 1 X 20 MG (100 DOSE) KIT | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | COMETRIQ KIT 140MG | CABOZANTINIB S-MAL CAP 1 X 80 MG & 3 X 20 MG (140 DOSE) KIT | Tier 2 | X | X | | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|------------------------|--|------------|------|--------------|--------------|-----------|
| Molecular Target Inhibitors - Chemotherapy Agents | COMETRIQ KIT 60MG | CABOZANTINIB S-MALATE CAP 3 X 20 MG (60 MG DOSE) KIT | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ERLOTINIB TAB 100MG | ERLOTINIB HCL TAB 100 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ERLOTINIB TAB 150MG | ERLOTINIB HCL TAB 150 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ERLOTINIB TAB 25MG | ERLOTINIB HCL TAB 25 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | FOTIVDA CAP 0.89MG | TIVOZANIB HCL CAP 890 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | FOTIVDA CAP 1.34MG | TIVOZANIB HCL CAP 1340 MCG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | GAVRETO CAP 100MG | PRALSETINIB CAP 100 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | GEFITINIB TAB 250MG | GEFITINIB TAB 250 MG | Tier 1 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | GILOTRIF TAB 20MG | AFATINIB DIMALEATE TAB 20 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | GILOTRIF TAB 30MG | AFATINIB DIMALEATE TAB 30 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | GILOTRIF TAB 40MG | AFATINIB DIMALEATE TAB 40 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | GLEEVEC TAB 100MG | IMATINIB MESYLATE TAB 100 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | GLEEVEC TAB 400MG | IMATINIB MESYLATE TAB 400 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ICLUSIG TAB 10MG | PONATINIB HCL TAB 10 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ICLUSIG TAB 15MG | PONATINIB HCL TAB 15 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ICLUSIG TAB 30MG | PONATINIB HCL TAB 30 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | ICLUSIG TAB 45MG | PONATINIB HCL TAB 45 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IMATINIB MES TAB 100MG | IMATINIB MESYLATE TAB 100 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IMATINIB MES TAB 400MG | IMATINIB MESYLATE TAB 400 MG (BASE EQUIVALENT) | Tier 1 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IMBRUVICA CAP 140MG | IBRUTINIB CAP 140 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IMBRUVICA CAP 70MG | IBRUTINIB CAP 70 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IMBRUVICA SUS 70MG/ML | IBRUTINIB ORAL SUSP 70 MG/ML | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IMBRUVICA TAB 140MG | IBRUTINIB TAB 140 MG | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IMBRUVICA TAB 280MG | IBRUTINIB TAB 280 MG | Tier 2 | X | X | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------|--|------------|------|--------------|--------------|-----------|
| Molecular Target Inhibitors - Chemotherapy Agents | IMBRUVICA TAB 420MG | IBRUTINIB TAB 420 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IMBRUVICA TAB 560MG | IBRUTINIB TAB 560 MG | Tier 2 | X | | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | INLYTA TAB 1MG | AXITINIB TAB 1 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | INLYTA TAB 5MG | AXITINIB TAB 5 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | IRESSA TAB 250MG | GEFITINIB TAB 250 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LAPATINIB TAB 250MG | LAPATINIB DITOSYLATE TAB 250 MG (BASE EQUIV) | Tier 1 | X | | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LENVIMA CAP 10 MG | LENVATINIB CAP THERAPY PACK 10 MG (10 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LENVIMA CAP 12MG | LENVATINIB CAP THERAPY PACK 3 X 4 MG (12 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LENVIMA CAP 14 MG | LENVATINIB CAP THERAPY PACK 10 & 4 MG (14 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LENVIMA CAP 18 MG | LENVATINIB CAP THER PACK 10 MG & 2 X 4 MG (18 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LENVIMA CAP 20 MG | LENVATINIB CAP THERAPY PACK 2 X 10 MG (20 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LENVIMA CAP 24 MG | LENVATINIB CAP THER PACK 2 X 10 MG & 4 MG (24 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LENVIMA CAP 4MG | LENVATINIB CAP THERAPY PACK 4 MG (4 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LENVIMA CAP 8 MG | LENVATINIB CAP THERAPY PACK 2 X 4 MG (8 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LORBRENA TAB 100MG | LORLATINIB TAB 100 MG | Tier 3 | X | | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | LORBRENA TAB 25MG | LORLATINIB TAB 25 MG | Tier 3 | X | | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | NERLYNX TAB 40MG | NERATINIB MALEATE TAB 40 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | PAZOPANIB TAB 200MG | PAZOPANIB HCL TAB 200 MG (BASE EQUIV) | Tier 1 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | QINLOCK TAB 50MG | RIPRETINIB TAB 50 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | RETEVMO CAP 40MG | SELPERCATINIB CAP 40 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | RETEVMO CAP 80MG | SELPERCATINIB CAP 80 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | SPRYCEL TAB 100MG | DASATINIB TAB 100 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | SPRYCEL TAB 140MG | DASATINIB TAB 140 MG | Tier 3 | X | X | X | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|--------------------|--|------------|------|--------------|--------------|-----------|
| Molecular Target Inhibitors - Chemotherapy Agents | SPRYCEL TAB 20MG | DASATINIB TAB 20 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | SPRYCEL TAB 50MG | DASATINIB TAB 50 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | SPRYCEL TAB 70MG | DASATINIB TAB 70 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | SPRYCEL TAB 80MG | DASATINIB TAB 80 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TABRECTA TAB 150MG | CAPMATINIB HCL TAB 150 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TABRECTA TAB 200MG | CAPMATINIB HCL TAB 200 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TAGRISSO TAB 40MG | OSIMERTINIB MESYLATE TAB 40 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TAGRISSO TAB 80MG | OSIMERTINIB MESYLATE TAB 80 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TARCEVA TAB 100MG | ERLOTINIB HCL TAB 100 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TARCEVA TAB 150MG | ERLOTINIB HCL TAB 150 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TARCEVA TAB 25MG | ERLOTINIB HCL TAB 25 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TASIGNA CAP 150MG | NILOTINIB HCL CAP 150 MG (BASE EQUIVALENT) | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TASIGNA CAP 200MG | NILOTINIB HCL CAP 200 MG (BASE EQUIVALENT) | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TASIGNA CAP 50MG | NILOTINIB HCL CAP 50 MG (BASE EQUIVALENT) | Tier 2 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TUKYSA TAB 150MG | TUCATINIB TAB 150 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TUKYSA TAB 50MG | TUCATINIB TAB 50 MG | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TURALIO CAP 125MG | PEXIDARTINIB HCL CAP 125 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TURALIO CAP 200MG | PEXIDARTINIB HCL CAP 200 MG (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | TYKERB TAB 250MG | LAPATINIB DITOSYLATE TAB 250 MG (BASE EQUIV) | Tier 3 | X | | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | VIZIMPRO TAB 15MG | DACOMITINIB TAB 15 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | VIZIMPRO TAB 30MG | DACOMITINIB TAB 30 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | VIZIMPRO TAB 45MG | DACOMITINIB TAB 45 MG | Tier 3 | X | X | | X |
| Molecular Target Inhibitors - Chemotherapy Agents | VOTRIENT TAB 200MG | PAZOPANIB HCL TAB 200 MG (BASE EQUIV) | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | XALKORI CAP 150MG | CRIZOTINIB CAP SPRINKLE 150 MG | Tier 3 | X | X | X | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Molecular Target Inhibitors - Chemotherapy Agents | XALKORI CAP 200MG | CRIZOTINIB CAP 200 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | XALKORI CAP 20MG | CRIZOTINIB CAP SPRINKLE 20 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | XALKORI CAP 250MG | CRIZOTINIB CAP 250 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | XALKORI CAP 50MG | CRIZOTINIB CAP SPRINKLE 50 MG | Tier 3 | X | X | X | X |
| Molecular Target Inhibitors - Chemotherapy Agents | XOSPATA TAB 40MG | GILTERITINIB FUMARATE TABLET 40 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Multiple Sclerosis Agents - Multiple Sclerosis Drugs | PONVORY TAB 20MG | PONESIMOD TAB 20 MG | Tier 3 | X | X | X | X |
| Multiple Sclerosis Agents - Multiple Sclerosis Drugs | PONVORY TAB STARTER | PONESIMOD TAB STARTER PACK 2,3,4,5,6,7,8,9 &10 MG | Tier 3 | X | X | X | X |
| Not Specified | ABILIFY MYCI TAB 10MG | ARIPIPRAZOLE TAB 10 MG WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | ABILIFY MYCI TAB 15MG | ARIPIPRAZOLE TAB 15 MG WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | ABILIFY MYCI TAB 20MG | ARIPIPRAZOLE TAB 20 MG WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | ABILIFY MYCI TAB 2MG | ARIPIPRAZOLE TAB 2 MG WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | ABILIFY MYCI TAB 30MG | ARIPIPRAZOLE TAB 30 MG WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | ABILIFY MYCI TAB 5MG | ARIPIPRAZOLE TAB 5 MG WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | ABRILADA INJ 20/0.4ML | ADALIMUMAB-AFZB PREFILLED SYRINGE KIT 20 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | ABRILADA INJ 40/0.8ML | ADALIMUMAB-AFZB PREFILLED SYRINGE KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | ABRILADA 1PN INJ 40/0.8ML | ADALIMUMAB-AFZB AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | | X | X |
| Not Specified | ABRILADA 1PN INJ 40/0.8ML | ADALIMUMAB-AFZB AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | ABRILADA 2PN INJ 40/0.8ML | ADALIMUMAB-AFZB AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | | X | X |
| Not Specified | ABRILADA 2PN INJ 40/0.8ML | ADALIMUMAB-AFZB AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | ABRYSVO INJ | RSV PRE-FUSION F A&B VAC RECOMB FOR IM SOLN 120 MCG/0.5ML | HCR | | | | |
| Not Specified | ACIOXIA GEL 0.1-0.5% | TRIAMCINOLONE ACETONIDE-PENTOXIFYLLINE GEL 0.1-0.5% | Tier 3 | | | X | |
| Not Specified | ACYCLONINE AER MUM | ACYCLOVIR-TRIAMCINOLONE-DYCLONINE AERO POWD 36.7-16.7-3.33% | Tier 3 | | | X | |
| Not Specified | ADALIMU-AACF INJ 40/0.8ML | ADALIMUMAB-AACF AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | | X | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Not Specified | ADALIMU-AATY KIT 20/0.2ML | ADALIMUMAB-AATY PREFILLED SYRINGE KIT 20 MG/0.2ML | Tier 3 | X | | X | X |
| Not Specified | ADALIMU-AATY KIT 40/0.4ML | ADALIMUMAB-AATY PREFILLED SYRINGE KIT 40 MG/0.4ML | Tier 2 | X | X | X | X |
| Not Specified | ADALIMU-AATY KIT 40/0.4ML | ADALIMUMAB-AATY AUTO-INJECTOR KIT 40 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | ADALIMU-AATY KIT 80/0.8ML | ADALIMUMAB-AATY AUTO-INJECTOR KIT 80 MG/0.8ML | Tier 3 | X | | X | X |
| Not Specified | ADALIMU-ADAZ INJ 40/0.4ML | ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 40 MG/0.4ML | Tier 2 | X | X | | X |
| Not Specified | ADALIMU-ADAZ INJ 40/0.4ML | ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 40 MG/0.4ML | Tier 2 | X | X | | X |
| Not Specified | ADALIMU-ADBM KIT 10/0.2ML | ADALIMUMAB-ADBM PREFILLED SYRINGE KIT 10 MG/0.2ML | Tier 2 | X | X | | X |
| Not Specified | ADALIMU-ADBM KIT 20/0.4ML | ADALIMUMAB-ADBM PREFILLED SYRINGE KIT 20 MG/0.4ML | Tier 2 | X | X | | X |
| Not Specified | ADALIMU-ADBM KIT 40/0.8ML | ADALIMUMAB-ADBM AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 2 | X | | | X |
| Not Specified | ADALIMU-ADBM KIT 40/0.8ML | ADALIMUMAB-ADBM PREFILLED SYRINGE KIT 40 MG/0.8ML | Tier 2 | X | X | | X |
| Not Specified | ADALIMU-FKJP KIT 20/0.4ML | ADALIMUMAB-FKJP PREFILLED SYRINGE KIT 20 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | ADALIMU-FKJP KIT 40/0.8ML | ADALIMUMAB-FKJP AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | ADALIMU-FKJP KIT 40/0.8ML | ADALIMUMAB-FKJP PREFILLED SYRINGE KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | AGAMREE SUS 40MG/ML | VAMOROLONE ORAL SUSP 40 MG/ML | Tier 3 | X | | X | X |
| Not Specified | AIRDUO DGHLR INH 113-14 | FLUTICASONE-SALMETEROL AER POWDER BA 113-14 MCG/ACT W/SENSOR | Tier 2 | | X | X | |
| Not Specified | AIRDUO DGHLR INH 232-14 | FLUTICASONE-SALMETEROL AER POWDER BA 232-14 MCG/ACT W/SENSOR | Tier 2 | | X | X | |
| Not Specified | AIRDUO DGHLR INH 55-14 | FLUTICASONE-SALMETEROL AER POWDER BA 55-14 MCG/ACT W/SENSOR | Tier 2 | | X | X | |
| Not Specified | AIRSUPRA AER 90-80MCG | ALBUTEROL-BUDESONIDE INHALATION AEROSOL 90-80 MCG/ACT | Tier 3 | | | | |
| Not Specified | AKEEGA TAB 100/500 | NIRAPARIB TOSYLATE-ABIRATERONE ACETATE TAB 100-500 MG | Tier 3 | X | X | X | X |
| Not Specified | AKEEGA TAB 50/500MG | NIRAPARIB TOSYLATE-ABIRATERONE ACETATE TAB 50-500 MG | Tier 3 | X | X | X | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Not Specified | ALTUVIIIIO INJ 1000UNIT | ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 1000 UNIT | Tier 3 | X | | | X |
| Not Specified | ALTUVIIIIO INJ 2000UNIT | ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 2000 UNIT | Tier 3 | X | | | X |
| Not Specified | ALTUVIIIIO INJ 250 UNIT | ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 250 UNIT | Tier 3 | X | | | X |
| Not Specified | ALTUVIIIIO INJ 250UNIT | ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 250 UNIT | Tier 3 | X | | | X |
| Not Specified | ALTUVIIIIO INJ 3000UNIT | ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 3000 UNIT | Tier 3 | X | | | X |
| Not Specified | ALTUVIIIIO INJ 4000UNIT | ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 4000 UNIT | Tier 3 | X | | | X |
| Not Specified | ALTUVIIIIO INJ 500UNIT | ANTIHEMOPHILIC FACT RCMB FC-VWF-XTEN-EHTL FOR INJ 500 UNIT | Tier 3 | X | | | X |
| Not Specified | ALVAIZ TAB 18MG | ELTROMBOPAG CHOLINE TAB 18 MG (BASE EQUIV) | Tier 3 | X | | X | X |
| Not Specified | ALVAIZ TAB 36MG | ELTROMBOPAG CHOLINE TAB 36 MG (BASE EQUIV) | Tier 3 | X | | X | X |
| Not Specified | ALVAIZ TAB 54MG | ELTROMBOPAG CHOLINE TAB 54 MG (BASE EQUIV) | Tier 3 | X | | X | X |
| Not Specified | ALVAIZ TAB 9MG | ELTROMBOPAG CHOLINE TAB 9 MG (BASE EQUIV) | Tier 3 | X | | X | X |
| Not Specified | AMJEVITA INJ 10/0.2ML | ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 10 MG/0.2ML | Tier 3 | X | X | X | X |
| Not Specified | AMJEVITA INJ 20/0.2ML | ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 20 MG/0.2ML | Tier 2 | X | | | X |
| Not Specified | AMJEVITA INJ 20/0.4ML | ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 20 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | AMJEVITA INJ 40/0.4ML | ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 40 MG/0.4ML | Tier 2 | X | | | X |
| Not Specified | AMJEVITA INJ 40/0.4ML | ADALIMUMAB-ATTO SOLN AUTO-INJECTOR 40 MG/0.4ML | Tier 2 | X | | | X |
| Not Specified | AMJEVITA INJ 40/0.8ML | ADALIMUMAB-ATTO SOLN AUTO-INJECTOR 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | AMJEVITA INJ 40/0.8ML | ADALIMUMAB-ATTO SOLN PREFILLED SYRINGE 40 MG/0.8ML | Tier 3 | X | X | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Not Specified | AMJEVITA INJ 80/0.8ML | ADALIMUMAB-ATTO SOLN AUTO-INJECTOR 80 MG/0.8ML | Tier 2 | X | | | X |
| Not Specified | AREXVY INJ 120MCG | RSVPREF3 VACCINE RECOMB ADJUVANTED FOR IM SUSP 120 MCG/0.5ML | HCR | | | | |
| Not Specified | ARMONAIR DIG AER 113MCG | FLUTICASONE PROPIONATE AER POW BA 113 MCG/ACT WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | ARMONAIR DIG AER 232MCG | FLUTICASONE PROPIONATE AER POW BA 232 MCG/ACT WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | ARMONAIR DIG AER 55MCG | FLUTICASONE PROPIONATE AER POW BA 55 MCG/ACT WITH SENSOR | Tier 3 | | X | X | |
| Not Specified | AUGTYRO CAP 40MG | REPOTRECTINIB CAP 40 MG | Tier 2 | X | X | | X |
| Not Specified | AUVELITY TAB 45-105MG | DEXTROMETHORPHAN HBR-BUPROPION HCL TAB ER 45-105 MG | Tier 3 | | X | | |
| Not Specified | AVEIDA GEL 1-1% | IVERMECTIN-METRONIDAZOLE GEL 1-1% | Tier 3 | | | | |
| Not Specified | BD NEEDLE MIS 30G X 1" | NEEDLE (DISP) 30 X 1" | Tier 3 | | | | |
| Not Specified | BD NEEDLE MIS 30GX1/2" | NEEDLE (DISP) 30 X 1/2" | Tier 2 | | | | |
| Not Specified | BD NEEDLES MIS 27GX1/2" | NEEDLE (DISP) 27 X 1/2" | Tier 2 | | | | |
| Not Specified | BD U-500 MIS 31GX6MM | INSULIN SYRINGE/NEEDLE U-500 0.5 ML 31G X 6MM (15/64") | Tier 2 | | X | | |
| Not Specified | BEXAGLIFLOZN TAB 20MG | BEXAGLIFLOZIN TAB 20 MG | Tier 3 | | X | X | |
| Not Specified | BEYFORTUS INJ 100MG/ML | NIRSEVIMAB-ALIP IM SOLN PREFILLED SYRINGE 100 MG/ML | HCR | | | | |
| Not Specified | BEYFORTUS INJ 50/0.5ML | NIRSEVIMAB-ALIP IM SOLN PREFILLED SYRINGE 50 MG/0.5ML | HCR | | | | |
| Not Specified | BIMZELX INJ 160MG/ML | BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN PREFILLED SYR 160 MG/ML | Tier 3 | X | X | X | X |
| Not Specified | BIMZELX INJ 160MG/ML | BIMEKIZUMAB-BKZX SUBCUTANEOUS SOLN AUTO-INJECTOR 160 MG/ML | Tier 3 | X | X | X | X |
| Not Specified | BRENZAVVY TAB 20MG | BEXAGLIFLOZIN TAB 20 MG | Tier 3 | X | X | | |
| Not Specified | CALQUENCE TAB 100MG | ACALABRUTINIB MALEATE TAB 100 MG | Tier 2 | X | X | | X |
| Not Specified | CALSODORE KIT 0.005% | CALCIPOTRIENE CREAM 0.005% & DRESSING KIT | Tier 3 | | | X | |
| Not Specified | CAMZYOS CAP 10MG | MAVACAMTEN CAP 10 MG | Tier 3 | X | X | | X |
| Not Specified | CAMZYOS CAP 15MG | MAVACAMTEN CAP 15 MG | Tier 3 | X | X | | X |
| Not Specified | CAMZYOS CAP 2.5MG | MAVACAMTEN CAP 2.5 MG | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Not Specified | CAMZYOS CAP 5MG | MAVACAMTEN CAP 5 MG | Tier 3 | X | X | | X |
| Not Specified | CARETOUCH MIS 27GX1.5" | NEEDLE (DISP) 27 X 1-1/2" | Tier 2 | | | | |
| Not Specified | CUVRIOR TAB 300MG | TRIENTINE TETRAHYDROCHLORIDE TAB 300 MG | Tier 3 | X | X | X | X |
| Not Specified | CYLTEZO INJ 10/0.2ML | ADALIMUMAB-ADBIM PREFILLED SYRINGE KIT 10 MG/0.2ML | Tier 3 | X | X | X | X |
| Not Specified | CYLTEZO INJ 20/0.4ML | ADALIMUMAB-ADBIM PREFILLED SYRINGE KIT 20 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | CYLTEZO INJ 40/0.8ML | ADALIMUMAB-ADBIM PREFILLED SYRINGE KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | CYLTEZO INJ 40/0.8ML | ADALIMUMAB-ADBIM AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | CYLTEZO INJ CROHNS | ADALIMUMAB-ADBIM AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | CYLTEZO INJ PSORIASI | ADALIMUMAB-ADBIM AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | DARUNAVIR TAB 600MG | DARUNAVIR TAB 600 MG | Tier 1 | | | | |
| Not Specified | DARUNAVIR TAB 800MG | DARUNAVIR TAB 800 MG | Tier 1 | | | | |
| Not Specified | DAYBUE SOL 200MG/ML | TROFINETIDE ORAL SOLN 200 MG/ML | Tier 2 | X | X | X | X |
| Not Specified | DAZAVEIDAOXI GEL | BRIMONIDINE TART-IVERMECTIN-METRONID-NIACIN GEL 0.25-1-1-4% | Tier 3 | | | X | |
| Not Specified | DERMETAZOLE PAK 2-20% | KETOCONAZOLE 2% CREAM & UREA 20% CREAM THERAPY PACK | Tier 3 | | | X | |
| Not Specified | DIASAXIATAR CRE | DAPSONE-NIACINAMIDE-TRETINOIN CREAM 8.5-2-0.025% | Tier 3 | | | X | |
| Not Specified | DIOOXIA CRE 0.005-4% | CALCIPOTRIENE-NIACINAMIDE CREAM 0.005-4% | Tier 3 | | | X | |
| Not Specified | DULOXICAINE PAK 30MG-4% | DULOXETINE CAP 30 MG & LIDOCAINE HCL CREAM 4% KIT | Tier 3 | | | X | |
| Not Specified | DYCLOPRO SOL 0.5% | DYCLONINE HCL SOLN 0.5% | Tier 3 | | | | |
| Not Specified | EMPAVELI INJ 1080MG | PEGCETACOPLAN SUBCUTANEOUS SOLN 1080 MG/20ML (54 MG/ML) | Tier 2 | X | X | | X |
| Not Specified | ENTADFI CAP 5-5MG | FINASTERIDE-TADALAFIL CAP 5-5 MG | Tier 3 | | X | | |
| Not Specified | FABHALTA CAP 200MG | IPTACOPAN HCL CAP 200 MG | Tier 2 | X | X | | X |
| Not Specified | FC2 FEMALE MIS CONDOM | *CONDOMS - FEMALE*** | HCR | | | | |
| Not Specified | FILSPARI TAB 200MG | SPARSENTAN TAB 200 MG | Tier 3 | X | X | | X |
| Not Specified | FILSPARI TAB 400MG | SPARSENTAN TAB 400 MG | Tier 3 | X | X | | X |
| Not Specified | FILSUVEZ GEL 10% | BIRCH TRITERPENES GEL 10% | Tier 3 | X | X | X | X |
| Not Specified | FLUOXIA CRE 0.05-4% | DESOXIMETASONE-NIACINAMIDE CREAM 0.05-4% | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Not Specified | FORA TEST GO MIS ADV MOBL | *BLOOD GLUCOSE/KETONE MONITORING DEVICES*** | Tier 3 | | | | |
| Not Specified | FRAICHE 5000 GEL PREVI | SODIUM FLUORIDE-TRIBASIC CALCIUM PHOSPHATE GEL 1.1-3% | Tier 3 | | | X | |
| Not Specified | FRUZAQLA CAP 1MG | FRUQUINTINIB CAP 1 MG | Tier 3 | X | X | | X |
| Not Specified | FRUZAQLA CAP 5MG | FRUQUINTINIB CAP 5 MG | Tier 3 | X | X | | X |
| Not Specified | FYLNTRA INJ 6MG/0.6 | PEGFILGRASTIM-PBBK SOLN PREFILLED SYRINGE 6 MG/0.6ML | Tier 3 | | | X | X |
| Not Specified | HADLIMA INJ 40/0.4ML | ADALIMUMAB-BWWD SOLN PREFILLED SYRINGE 40 MG/0.4ML | Tier 2 | X | X | | X |
| Not Specified | HADLIMA INJ 40/0.8ML | ADALIMUMAB-BWWD SOLN PREFILLED SYRINGE 40 MG/0.8ML | Tier 2 | X | X | | X |
| Not Specified | HADLIMA PUSH INJ 40/0.4ML | ADALIMUMAB-BWWD SOLN AUTO-INJECTOR 40 MG/0.4ML | Tier 2 | X | X | | X |
| Not Specified | HADLIMA PUSH INJ 40/0.8ML | ADALIMUMAB-BWWD SOLN AUTO-INJECTOR 40 MG/0.8ML | Tier 2 | X | X | | X |
| Not Specified | HEXIOUNYL LOT 3-5-20% | CICLOPIROX-ITRACONAZOLE-UREA LOTION 3-5-20% | Tier 3 | | | | |
| Not Specified | HULIO INJ 40/0.8ML | ADALIMUMAB-FKJP AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | HULIO INJ 40/0.8ML | ADALIMUMAB-FKJP PREFILLED SYRINGE KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | HULIO KIT 20/0.4ML | ADALIMUMAB-FKJP PREFILLED SYRINGE KIT 20 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | HYCODAN SYP 5-1.5/5 | HYDROCODONE BITART-HOMATROPINE METHYLBROM SOLN 5-1.5 MG/5ML | Tier 3 | X | | X | |
| Not Specified | HYCODAN TAB 5-1.5MG | HYDROCODONE BITART-HOMATROPINE METHYLBROMIDE TAB 5-1.5 MG | Tier 3 | X | | X | |
| Not Specified | HYDROC/HOMAT TAB 5-1.5MG | HYDROCODONE BITART-HOMATROPINE METHYLBROMIDE TAB 5-1.5 MG | Tier 1 | X | | | |
| Not Specified | HYDROCOD/HOM SYP 5-1.5/5 | HYDROCODONE BITART-HOMATROPINE METHYLBROM SOLN 5-1.5 MG/5ML | Tier 1 | X | | | |
| Not Specified | HYDROMET SYP 5-1.5/5 | HYDROCODONE BITART-HOMATROPINE METHYLBROM SOLN 5-1.5 MG/5ML | Tier 1 | X | | | |
| Not Specified | HYFTOR GEL 0.2% | SIROLIMUS GEL 0.2% | Tier 3 | X | X | | |
| Not Specified | HYRIMOZ INJ 10/0.1ML | ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 10 MG/0.1ML | Tier 3 | X | X | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Not Specified | HYRIMOZ INJ 20/0.2ML | ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 20 MG/0.2ML | Tier 3 | X | X | X | X |
| Not Specified | HYRIMOZ INJ 40/0.4ML | ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 40 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | HYRIMOZ INJ 40/0.4ML | ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 40 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | HYRIMOZ INJ 40/0.8ML | ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 40 MG/0.8ML | Tier 3 | X | | X | X |
| Not Specified | HYRIMOZ INJ 40/0.8ML | ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 40 MG/0.8ML | Tier 3 | X | | X | X |
| Not Specified | HYRIMOZ INJ 80/0.8ML | ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 80 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | HYRIMOZ SENS INJ 80/0.8ML | ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 80 MG/0.8ML | Tier 3 | X | | X | X |
| Not Specified | HYRIMOZ-CROH INJ UC SP | ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 80 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | HYRIMOZ-PED INJ CROHNS | ADALIMUMAB-ADAZ SOLN PREFILLED SYRINGE 80 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | HYRIMOZ-PED INJ CROHNS | ADALIMUMAB-ADAZ SOLN PREFILLED SYR 80 MG/0.8ML & 40 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | HYRIMOZ-PLAQ INJ PSORIASI | ADALIMUMAB-ADAZ SOLN AUTO-INJECTOR 80 MG/0.8ML & 40 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | IDACIO 2-PEN INJ 40/0.8ML | ADALIMUMAB-AACF AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | IDACIO 2-SYR INJ 40/0.8ML | ADALIMUMAB-AACF PREFILLED SYRINGE KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | IDACIO CROHN INJ DISEASE | ADALIMUMAB-AACF AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | IDACIO PLAQU INJ PSORIASI | ADALIMUMAB-AACF AUTO-INJECTOR KIT 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | IDAOXIA GEL 1-4% | METRONIDAZOLE-NIACINAMIDE GEL 1-4% | Tier 3 | | | X | |
| Not Specified | IDARAN OIN 1-2% | METRONIDAZOLE-MUPIROCIN OINTMENT 1-2% | Tier 3 | | | | |
| Not Specified | INPEFA TAB 200MG | SOTAGLIFLOZIN TAB 200 MG | Tier 3 | | X | X | |
| Not Specified | INPEFA TAB 400MG | SOTAGLIFLOZIN TAB 400 MG | Tier 3 | | X | X | |
| Not Specified | IWILFIN TAB 192MG | EFLORNITHINE HCL TAB 192 MG | Tier 2 | X | X | | X |
| Not Specified | JAYPIRCA TAB 100MG | PIRTOBRUTINIB TAB 100 MG | Tier 3 | X | X | | X |
| Not Specified | JAYPIRCA TAB 50MG | PIRTOBRUTINIB TAB 50 MG | Tier 3 | X | X | | X |
| Not Specified | JESDUVROQ TAB 1MG | DAPRODUSTAT TAB 1 MG | Tier 3 | X | X | | X |
| Not Specified | JESDUVROQ TAB 2MG | DAPRODUSTAT TAB 2 MG | Tier 3 | X | X | | X |
| Not Specified | JESDUVROQ TAB 4MG | DAPRODUSTAT TAB 4 MG | Tier 3 | X | X | | X |
| Not Specified | JESDUVROQ TAB 6MG | DAPRODUSTAT TAB 6 MG | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Not Specified | JESDUVROQ TAB 8MG | DAPRODUSTAT TAB 8 MG | Tier 3 | X | X | | X |
| Not Specified | JOENJA TAB 70MG | LENIOLISIB PHOSPHATE TAB 70 MG | Tier 2 | X | X | | X |
| Not Specified | KRAZATI TAB 200MG | ADAGRASIB TAB 200 MG | Tier 3 | X | X | | X |
| Not Specified | LATANOPROST OIL | LATANOPROST (BULK) OIL | Tier 3 | X | | | |
| Not Specified | LITFULO CAP 50MG | RITLECITINIB TOSYLATE CAP 50 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Not Specified | LODOCO TAB 0.5MG | COLCHICINE (CARDIOVASCULAR) TAB 0.5 MG | Tier 3 | | X | | |
| Not Specified | LUCIRA COVID KIT FLU TEST | INFLUENZA-SARS MOLECULAR TEST KIT | Tier 3 | | | | |
| Not Specified | LYTGOBI TAB 4MG | FUTIBATINIB TAB THERAPY PACK 4 MG (12 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Not Specified | LYTGOBI TAB 4MG | FUTIBATINIB TAB THERAPY PACK 4 MG (16 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Not Specified | LYTGOBI TAB 4MG | FUTIBATINIB TAB THERAPY PACK 4 MG (20 MG DAILY DOSE) | Tier 3 | X | X | | X |
| Not Specified | MATRIX WOUND MIS BILAYER | COLLAGEN MATRIX (BOVINE) SHEET 5 X 5 CM (2" X 2") | Tier 3 | | | X | |
| Not Specified | MIEBO DRO 1.3GM/ML | PERFLUOROHEXYLOCTANE OPHTH SOLN 1.338 GM/ML | Tier 3 | X | X | X | |
| Not Specified | MIRO3D WOUND PAD 10X5X2CM | COLLAGEN MATRIX (PORCINE) DRESSING 10 X 5 X 2 CM | Tier 3 | | | X | |
| Not Specified | MIRO3D WOUND PAD 2X2X2CM | COLLAGEN MATRIX (PORCINE) DRESSING 2 X 2 X 2 CM | Tier 3 | | | X | |
| Not Specified | MIRO3D WOUND PAD 3X3X2CM | COLLAGEN MATRIX (PORCINE) DRESSING 3 X 3 X 2 CM | Tier 3 | | | X | |
| Not Specified | MIRO3D WOUND PAD 5X5X2CM | COLLAGEN MATRIX (PORCINE) DRESSING 5 X 5 X 2 CM | Tier 3 | | | X | |
| Not Specified | MOUNJARO INJ 10MG/0.5 | TIRZEPATIDE SOLN PEN-INJECTOR 10 MG/0.5ML | Tier 2 | X | X | | |
| Not Specified | MOUNJARO INJ 12.5/0.5 | TIRZEPATIDE SOLN PEN-INJECTOR 12.5 MG/0.5ML | Tier 2 | X | X | | |
| Not Specified | MOUNJARO INJ 15MG/0.5 | TIRZEPATIDE SOLN PEN-INJECTOR 15 MG/0.5ML | Tier 2 | X | X | | |
| Not Specified | MOUNJARO INJ 2.5/0.5 | TIRZEPATIDE SOLN PEN-INJECTOR 2.5 MG/0.5ML | Tier 2 | X | X | | |
| Not Specified | MOUNJARO INJ 5MG/0.5 | TIRZEPATIDE SOLN PEN-INJECTOR 5 MG/0.5ML | Tier 2 | X | X | | |
| Not Specified | MOUNJARO INJ 7.5/0.5 | TIRZEPATIDE SOLN PEN-INJECTOR 7.5 MG/0.5ML | Tier 2 | X | X | | |
| Not Specified | MPM PAK MIS | MIFEPRIST & MISOPROST & ONDAN & IBUP 200-0.2-8-800 MG PACK | Tier 3 | | | X | |
| Not Specified | NANRAN OIN 2-2% | MUPIROCIN-LIDOCAINE OINTMENT 2-2% | Tier 3 | | | | |
| Not Specified | NGENLA INJ 24/1.2ML | SOMATROGON-GHLA SOLUTION PEN-INJECTOR 24 MG/1.2ML (20 MG/ML) | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-----------------------|--|------------|------|--------------|--------------|-----------|
| Not Specified | NGENLA INJ 60/1.2ML | SOMATROGON-GHLA SOLUTION PEN-INJECTOR 60 MG/1.2ML (50 MG/ML) | Tier 3 | X | X | | X |
| Not Specified | OGSIVEO TAB 100MG | NIROGACESTAT HYDROBROMIDE TAB 100 MG | Tier 3 | X | | X | X |
| Not Specified | OGSIVEO TAB 150MG | NIROGACESTAT HYDROBROMIDE TAB 150 MG | Tier 2 | X | | | X |
| Not Specified | OGSIVEO TAB 50MG | NIROGACESTAT HYDROBROMIDE TAB 50 MG | Tier 2 | X | X | | X |
| Not Specified | OJJAARA TAB 100MG | MOMELOTINIB DIHYDROCHLORIDE TAB 100 MG | Tier 3 | X | X | | X |
| Not Specified | OJJAARA TAB 150MG | MOMELOTINIB DIHYDROCHLORIDE TAB 150 MG | Tier 3 | X | X | | X |
| Not Specified | OJJAARA TAB 200MG | MOMELOTINIB DIHYDROCHLORIDE TAB 200 MG | Tier 3 | X | X | | X |
| Not Specified | OMVOH INJ 100MG/ML | MIRIKIZUMAB-MRKZ SUBCUTANEOUS SOLN AUTO-INJECTOR 100 MG/ML | Tier 3 | X | X | | X |
| Not Specified | OPFOLDA CAP 65MG | MIGLUSTAT (GAA DEFICIENCY) CAP 65 MG | Tier 2 | X | X | | X |
| Not Specified | OPILL TAB 0.075MG | NORGESTREL TAB 0.075 MG | HCR | | | | |
| Not Specified | OPSYNVI TAB 10-20MG | MACITENTAN-TADALAFIL TAB 10-20 MG | Tier 3 | | | X | X |
| Not Specified | OPSYNVI TAB 10-40MG | MACITENTAN-TADALAFIL TAB 10-40 MG | Tier 3 | | | X | X |
| Not Specified | OPVEE SPR 2.7/0.1 | NALMEFENE HCL NASAL SPRAY 2.7 MG/0.1ML (BASE EQUIV) | Tier 2 | | | | |
| Not Specified | ORSERDU TAB 345MG | ELACESTRANT HYDROCHLORIDE TAB 345 MG | Tier 2 | X | X | | X |
| Not Specified | ORSERDU TAB 86MG | ELACESTRANT HYDROCHLORIDE TAB 86 MG | Tier 2 | X | X | | X |
| Not Specified | PENBRAYA INJ | MENINGOCOCCAL ACYW (TET CONJ)-MENING B (RCMB) VACC FOR INJ | HCR | | | | |
| Not Specified | PHEDRAX SHA 2-2% | KETOCONAZOLE-SALICYLIC ACID SHAMPOO 2-2% | Tier 3 | | | | |
| Not Specified | PHEOXIA CRE 2-4% | KETOCONAZOLE-NIACINAMIDE CREAM 2-4% | Tier 3 | | | | |
| Not Specified | PODIATROLE PAK 2-20% | KETOCONAZOLE 2% CREAM & UREA 20% CREAM THERAPY PACK | Tier 3 | | | X | |
| Not Specified | POLY HUB MIS 27GX1/2" | NEEDLE (DISP) 27 X 1/2" | Tier 2 | | | | |
| Not Specified | POLY HUB MIS 30GX1/2" | NEEDLE (DISP) 30 X 1/2" | Tier 2 | | | | |
| Not Specified | PREZISTA SUS 100MG/ML | DARUNAVIR ORAL SUSP 100 MG/ML | Tier 2 | | | | |
| Not Specified | PREZISTA TAB 150MG | DARUNAVIR TAB 150 MG | Tier 2 | | | | |
| Not Specified | PREZISTA TAB 600MG | DARUNAVIR TAB 600 MG | Tier 3 | | | X | |
| Not Specified | PREZISTA TAB 75MG | DARUNAVIR TAB 75 MG | Tier 2 | | | | |
| Not Specified | PREZISTA TAB 800MG | DARUNAVIR TAB 800 MG | Tier 3 | | | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Not Specified | PROAIR DIGIH AER | ALBUTEROL SULFATE AER POW BA 108 MCG/ACT WITH SENSOR | Tier 3 | | | X | |
| Not Specified | QUVIVIQ TAB 25MG | DARIDOREXANT HCL TAB 25 MG | Tier 3 | | X | X | |
| Not Specified | QUVIVIQ TAB 50MG | DARIDOREXANT HCL TAB 50 MG | Tier 3 | | X | X | |
| Not Specified | RELYVRIO PAK 3-1GM | SODIUM PHENYL BUTYRATE-TAURURSODIOL POWD PACK 3-1 GM | Tier 3 | X | X | | X |
| Not Specified | REZDIFFRA TAB 100MG | RESMETIROM 100 MG TAB | Tier 3 | X | X | | X |
| Not Specified | REZDIFFRA TAB 60MG | RESMETIROM 60 MG TAB | Tier 3 | X | X | | X |
| Not Specified | REZDIFFRA TAB 80MG | RESMETIROM 80 MG TAB | Tier 3 | X | X | | X |
| Not Specified | REZLIDHIA CAP 150MG | OLUTASIDENIB CAP 150 MG | Tier 2 | X | X | | X |
| Not Specified | REZUROCK TAB 200MG | BELUMOSUDIL MESYLATE TAB 200 MG | Tier 3 | X | X | | X |
| Not Specified | RIVFLOZA INJ 128/0.8 | NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 128 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | RIVFLOZA INJ 160MG/ML | NEDOSIRAN SODIUM SUBCUTANEOUS SOLN PREF SYR 160 MG/ML | Tier 3 | X | X | X | X |
| Not Specified | RIVFLOZA INJ 80/0.5ML | NEDOSIRAN SODIUM SUBCUTANEOUS SOLN 80 MG/0.5ML | Tier 3 | X | X | X | X |
| Not Specified | RYALTRIS SPR 665-25 | OLOPATADINE HCL-MOMETASONE FUROATE NASAL SUSP 665-25 MCG/ACT | Tier 3 | | | | |
| Not Specified | SIMLANDI 1PN KIT 40/0.4ML | ADALIMUMAB-RYVK AUTO-INJECTOR KIT 40 MG/0.4ML | Tier 3 | X | | X | X |
| Not Specified | SIMLANDI 2PN INJ 40/0.4ML | ADALIMUMAB-RYVK AUTO-INJECTOR KIT 40 MG/0.4ML | Tier 3 | X | | X | X |
| Not Specified | SITAGLIPTIN TAB 100MG | SITAGLIPTIN TAB 100 MG | Tier 3 | | X | X | |
| Not Specified | SITAGLIPTIN TAB 25MG | SITAGLIPTIN TAB 25 MG | Tier 3 | | X | X | |
| Not Specified | SITAGLIPTIN TAB 50MG | SITAGLIPTIN TAB 50 MG | Tier 3 | | X | X | |
| Not Specified | SKYCLARYS CAP 50MG | OMAVELOXOLONE CAP 50 MG | Tier 2 | X | X | | X |
| Not Specified | SKYRIZI INJ 180/1.2 | RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 180 MG/1.2ML | Tier 2 | X | X | | X |
| Not Specified | SKYRIZI INJ 360/2.4 | RISANKIZUMAB-RZAA SUBCUTANEOUS SOLN CARTRIDGE 360 MG/2.4ML | Tier 2 | X | X | | X |
| Not Specified | SOGROYA INJ 10MG/1.5 | SOMAPACITAN-BECO SOLUTION PEN-INJECTOR 10 MG/1.5ML | Tier 3 | X | X | X | X |
| Not Specified | SOGROYA INJ 15MG/1.5 | SOMAPACITAN-BECO SOLUTION PEN-INJECTOR 15 MG/1.5ML | Tier 3 | X | X | X | X |
| Not Specified | SOGROYA INJ 5MG/1.5 | SOMAPACITAN-BECO SOLUTION PEN-INJECTOR 5 MG/1.5ML | Tier 3 | X | X | X | X |
| Not Specified | SOHONOS CAP 1.5MG | PALOVAROTENE CAP 1.5 MG | Tier 3 | X | X | | X |
| Not Specified | SOHONOS CAP 10MG | PALOVAROTENE CAP 10 MG | Tier 3 | X | X | | X |
| Not Specified | SOHONOS CAP 1MG | PALOVAROTENE CAP 1 MG | Tier 3 | X | X | | X |
| Not Specified | SOHONOS CAP 2.5MG | PALOVAROTENE CAP 2.5 MG | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|----------------------------|---|------------|------|--------------|--------------|-----------|
| Not Specified | SOHONOS CAP 5MG | PALOVAROTENE CAP 5 MG | Tier 3 | X | X | | X |
| Not Specified | SOTYKTU TAB 6MG | DEUCRAVACITINIB TAB 6 MG | Tier 3 | X | | X | X |
| Not Specified | SPEVIGO INJ 150/1ML | SPELIMAB-SBZO SUBCUTANEOUS SOLN PREF SYR 150 MG/ML | Tier 3 | X | | | X |
| Not Specified | STIMUFEND INJ 6/0.6ML | PEGFILGRASTIM-FPGK SOLN PREFILLED SYRINGE 6 MG/0.6ML | Tier 3 | | | X | X |
| Not Specified | SUFLAVE SOL | PEG 3350-KCL-NACL-NA SULFATE-MAG SULFATE FOR SOLN 178.7 GM | Tier 3 | | | | |
| Not Specified | SUNLENCA TAB 300MG | LENACAPAVIR SODIUM TAB THERAPY PACK 4 X 300 MG | Tier 3 | X | X | X | |
| Not Specified | SUNLENCA TAB 300MG | LENACAPAVIR SODIUM TAB THERAPY PACK 5 X 300 MG | Tier 3 | X | X | X | |
| Not Specified | TASCENSO ODT TAB 0.25MG | FINGOLIMOD LAURYL SULFATE TABLET DISINTEGRATING 0.25 MG | Tier 3 | X | | X | |
| Not Specified | TASCENSO ODT TAB 0.5MG | FINGOLIMOD LAURYL SULFATE TABLET DISINTEGRATING 0.5 MG | Tier 3 | X | X | X | |
| Not Specified | TAVNEOS CAP 10MG | AVACOPAN CAP 10 MG | Tier 3 | X | X | | X |
| Not Specified | TEMBEXA SUS 10MG/ML | BRINCIDOFIVIR ORAL SUSP 10 MG/ML | Tier 3 | | | | |
| Not Specified | TEMBEXA TAB 100MG | BRINCIDOFIVIR TAB 100 MG | Tier 3 | | | | |
| Not Specified | TPOXX CAP 200MG | TECOVIRIMAT CAP 200 MG | Tier 3 | | | | |
| Not Specified | TRIONEX PAK | CALCIPOTRIENE CREAM 0.005% & DRESSING KIT | Tier 3 | | | X | |
| Not Specified | TRUQAP TAB 160MG | CAPIVASERTIB TAB 160 MG | Tier 2 | X | X | | X |
| Not Specified | TRUQAP TAB 200MG | CAPIVASERTIB TAB 200 MG | Tier 2 | X | X | | X |
| Not Specified | VAXELIS INJ | DIPH-TET TOX-AC PERT AD- POLIO IPV-HIB-HEPATITIS B RECMB SUSP | HCR | | | | |
| Not Specified | VAXELIS INJ | DIPH-TET TOX-AC PERT AD- POLIO IPV-HIB-HEP B REC SUSP PRE SYR | HCR | | | | |
| Not Specified | VELSIPITY TAB 2MG | ETRASIMOD ARGININE TAB 2 MG | Tier 3 | X | X | X | X |
| Not Specified | VENLAFAXINE TAB 112.5MG | VENLAFAXINE BESYLATE TAB ER 24HR 112.5 MG | Tier 3 | | | | |
| Not Specified | VEOZAH TAB 45MG | FEZOLINETANT TAB 45 MG | Tier 3 | | X | | |
| Not Specified | VIJOICE TAB 125MG | ALPELISIB (PROS) TAB THERAPY PACK 125 MG DAILY DOSE | Tier 3 | X | X | | X |
| Not Specified | VIJOICE TAB 250MG | ALPELISIB (PROS) PAK 250 MG DAILY DOSE (200 MG & 50 MG TABS) | Tier 3 | X | X | | X |
| Not Specified | VIJOICE TAB 50MG | ALPELISIB (PROS) TAB THERAPY PACK 50 MG DAILY DOSE | Tier 3 | X | X | | X |
| Not Specified | VIVJOA CAP 150MG | OTESECONAZOLE CAP THERAPY PACK 150 MG (12 WEEKS) | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Not Specified | VOQUEZNA PAK DUAL PAK | AMOXICILLIN CAP 500 MG & VONOPRAZAN TAB 20 MG THERAPY PACK | Tier 3 | X | X | | |
| Not Specified | VOQUEZNA TAB 10MG | VONOPRAZAN FUMARATE TAB 10 MG | Tier 3 | X | X | | |
| Not Specified | VOQUEZNA TAB 20MG | VONOPRAZAN FUMARATE TAB 20 MG | Tier 3 | X | X | | |
| Not Specified | VOWST CAP | FECAL MICROBIOTA SPORES, LIVE-BRPK CAPS | Tier 3 | X | X | | X |
| Not Specified | VOYDEYA TAB 100MG | DANICOPAN TAB 100 MG | Tier 3 | | | X | X |
| Not Specified | VOYDEYA TAB 50-100MG | DANICOPAN TAB THERAPY PACK 50 MG & 100 MG | Tier 3 | | | X | X |
| Not Specified | VTAMA CRE 1% | TAPINAROF CREAM 1% | Tier 3 | X | | | |
| Not Specified | WAINUA INJ 45/0.8ML | EPLONTERSEN SODIUM SUBCUTANEOUS SOLN AUTO-INJ 45 MG/0.8ML | Tier 2 | X | X | | X |
| Not Specified | WINREVAIR INJ 45MG | SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 2 X 45 MG | Tier 3 | X | | | X |
| Not Specified | WINREVAIR INJ 45MG | SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 45 MG | Tier 3 | X | | | X |
| Not Specified | WINREVAIR INJ 60MG | SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 2 X 60 MG | Tier 3 | X | | | X |
| Not Specified | WINREVAIR INJ 60MG | SOTATERCEPT-CSRK FOR SUBCUTANEOUS SOLN KIT 60 MG | Tier 3 | X | | | X |
| Not Specified | XDEMVY DRO 0.25% | LOTILANER OPHTH SOLN 0.25% | Tier 3 | X | X | | |
| Not Specified | XELSTRYM PAD 13.5/9HR | DEXTROAMPHETAMINE TD PATCH 13.5 MG/9HR | Tier 3 | | X | | |
| Not Specified | XELSTRYM PAD 18MG/9HR | DEXTROAMPHETAMINE TD PATCH 18 MG/9HR | Tier 3 | | X | | |
| Not Specified | XELSTRYM PAD 4.5MG/9H | DEXTROAMPHETAMINE TD PATCH 4.5 MG/9HR | Tier 3 | | X | | |
| Not Specified | XELSTRYM PAD 9MG/9HR | DEXTROAMPHETAMINE TD PATCH 9 MG/9HR | Tier 3 | | X | | |
| Not Specified | XPHOZAH TAB 20MG | TENAPANOR HCL TAB 20 MG | Tier 3 | X | X | | X |
| Not Specified | XPHOZAH TAB 30MG | TENAPANOR HCL TAB 30 MG | Tier 3 | X | X | | X |
| Not Specified | YONSA TAB 125MG | ABIRATERONE ACETATE MICRONIZED TAB 125 MG | Tier 3 | X | X | X | X |
| Not Specified | YUFLYMA KIT 80/0.8ML | ADALIMUMAB-AATY AUTO-INJECTOR KIT 80 MG/0.8ML | Tier 3 | X | | X | X |
| Not Specified | YUFLYMA 1PEN KIT 40/0.4ML | ADALIMUMAB-AATY AUTO-INJECTOR KIT 40 MG/0.4ML | Tier 3 | X | X | X | X |
| Not Specified | YUFLYMA 1PEN KIT 80/0.8ML | ADALIMUMAB-AATY AUTO-INJECTOR KIT 80 MG/0.8ML | Tier 3 | X | | X | X |
| Not Specified | YUFLYMA 2PEN KIT 40/0.4ML | ADALIMUMAB-AATY AUTO-INJECTOR KIT 40 MG/0.4ML | Tier 3 | X | X | X | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Not Specified | YUFLYMA 2SYR KIT 20/0.2ML | ADALIMUMAB-AATY PREFILLED SYRINGE KIT 20 MG/0.2ML | Tier 3 | X | X | X | X |
| Not Specified | YUFLYMA 2SYR KIT 40/0.4ML | ADALIMUMAB-AATY PREFILLED SYRINGE KIT 40 MG/0.4ML | Tier 2 | X | X | X | X |
| Not Specified | YUSIMRY INJ 40/0.8ML | ADALIMUMAB-AQVH SOLN PEN-INJECTOR 40 MG/0.8ML | Tier 3 | X | X | X | X |
| Not Specified | ZAVZPRET SPR 10MG | ZAVEGEPANT HCL NASAL SPRAY 10 MG/ACT | Tier 3 | X | | X | |
| Not Specified | ZILBRYSQ INJ 16.6MG | ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 16.6 MG/0.416ML | Tier 3 | X | X | X | X |
| Not Specified | ZILBRYSQ INJ 23MG | ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 23 MG/0.574ML | Tier 3 | X | X | X | X |
| Not Specified | ZILBRYSQ INJ 32.4MG | ZILUCOPLAN SODIUM SUBCUTANEOUS SOLN PREF SYR 32.4 MG/0.81ML | Tier 3 | X | X | X | X |
| Not Specified | ZITUVIO TAB 100MG | SITAGLIPTIN TAB 100 MG | Tier 3 | | X | X | |
| Not Specified | ZITUVIO TAB 25MG | SITAGLIPTIN TAB 25 MG | Tier 3 | | X | X | |
| Not Specified | ZITUVIO TAB 50MG | SITAGLIPTIN TAB 50 MG | Tier 3 | | X | X | |
| Not Specified | ZORYVE CRE 0.3% | ROFLUMILAST CREAM 0.3% | Tier 3 | X | X | | |
| Not Specified | ZORYVE MIS 0.3% | ROFLUMILAST FOAM 0.3% | Tier 3 | X | X | | |
| Not Specified | ZTALMY SUS 50MG/ML | GANAXOLONE SUSP 50 MG/ML | Tier 3 | | | | X |
| Not Specified | ZURZUVAE CAP 20MG | ZURANOLONE CAP 20 MG | Tier 2 | X | X | | X |
| Not Specified | ZURZUVAE CAP 25MG | ZURANOLONE CAP 25 MG | Tier 2 | X | X | | X |
| Not Specified | ZURZUVAE CAP 30MG | ZURANOLONE CAP 30 MG | Tier 2 | X | X | | X |
| Ophthalmic Agents | ACULAR SOL 0.5% OP | KETOROLAC TROMETHAMINE OPHTH SOLN 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | ACULAR LS SOL 0.4% | KETOROLAC TROMETHAMINE OPHTH SOLN 0.4% | Tier 3 | | | | |
| Ophthalmic Agents | ACUVAIL SOL 0.45% | KETOROLAC TROMETHAMINE (PF) OPHTH SOLN 0.45% | Tier 3 | | | | |
| Ophthalmic Agents | AK-POLY-BAC OIN OP | BACITRACIN-POLYMYXIN B OPHTH OINT | Tier 1 | | | | |
| Ophthalmic Agents | AKTEN GEL 3.5% | LIDOCAINE HCL OPHTH GEL 3.5% | Tier 3 | | | | |
| Ophthalmic Agents | ALCAINE SOL 0.5% OP | PROPARACAINE HCL OPHTH SOLN 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | ALOCRIOL SOL 2% | NEDOCROMIL SODIUM OPHTH SOLN 2% | Tier 3 | | | | |
| Ophthalmic Agents | ALOMIDE SOL 0.1% OP | LODOXAMIDE TROMETHAMINE OPHTH SOLN 0.1% | Tier 3 | | | | |
| Ophthalmic Agents | ALPHAGAN P SOL 0.1% | BRIMONIDINE TARTRATE OPHTH SOLN 0.1% | Tier 1 | | | | |
| Ophthalmic Agents | ALPHAGAN P SOL 0.15% | BRIMONIDINE TARTRATE OPHTH SOLN 0.15% | Tier 3 | | | | |
| Ophthalmic Agents | ALREX SUS 0.2% | LOTEPREDNOL ETABONATE OPHTH SUSP 0.2% | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents | ALTACAIN SOL 0.5% OP | TETRACAINE HCL OPHTH SOLN 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | ALTAFRIN SOL 10% OP | PHENYLEPHRINE HCL OPHTH SOLN 10% | Tier 1 | | | | |
| Ophthalmic Agents | ALTAFRIN SOL 2.5% OP | PHENYLEPHRINE HCL OPHTH SOLN 2.5% | Tier 1 | | | | |
| Ophthalmic Agents | APRACLONIDIN SOL 0.5% OP | APRACLONIDINE HCL OPHTH SOLN 0.5% (BASE EQUIVALENT) | Tier 1 | | | | |
| Ophthalmic Agents | ATROPINE SUL OIN 1% OP | ATROPINE SULFATE OPHTH OINT 1% | Tier 1 | | | | |
| Ophthalmic Agents | ATROPINE SUL SOL 1% | ATROPINE SULFATE OPHTH SOLN 1% | Tier 1 | | | | |
| Ophthalmic Agents | ATROPINE SUL SOL 1% OP | ATROPINE SULFATE OPHTH SOLN 1% | Tier 1 | | | | |
| Ophthalmic Agents | AZASITE SOL 1% | AZITHROMYCIN OPHTH SOLN 1% | Tier 3 | | | | |
| Ophthalmic Agents | AZELASTINE DRO 0.05% | AZELASTINE HCL OPHTH SOLN 0.05% | Tier 1 | | | | |
| Ophthalmic Agents | AZOPT SUS 1% OP | BRINZOLAMIDE OPHTH SUSP 1% | Tier 3 | | | X | |
| Ophthalmic Agents | BACIT/POLYMY OIN OP | BACITRACIN-POLYMYXIN B OPHTH OINT | Tier 1 | | | | |
| Ophthalmic Agents | BACITRACIN OIN OP | BACITRACIN OPHTH OINT 500 UNIT/GM | Tier 1 | | | | |
| Ophthalmic Agents | BESIVANCE SUS 0.6% | BESIFLOXACIN HCL OPHTH SUSP 0.6% (BASE EQUIV) | Tier 3 | | | | |
| Ophthalmic Agents | BETAXOLOL SOL 0.5% OP | BETAXOLOL HCL OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | BETIMOL SOL 0.25% | TIMOLOL OPHTH SOLN 0.25% | Tier 2 | | | | |
| Ophthalmic Agents | BETIMOL SOL 0.5% | TIMOLOL OPHTH SOLN 0.5% | Tier 2 | | | | |
| Ophthalmic Agents | BETOPTIC-S SUS 0.25% OP | BETAXOLOL HCL OPHTH SUSP 0.25% | Tier 3 | | | | |
| Ophthalmic Agents | BIMATOPROST SOL 0.03% | BIMATOPROST OPHTH SOLN 0.03% | Tier 1 | | | | |
| Ophthalmic Agents | BLEPH-10 SOL 10% OP | SULFACETAMIDE SODIUM OPHTH SOLN 10% | Tier 3 | | | | |
| Ophthalmic Agents | BLEPHAMIDE OIN S.O.P. | SULFACETAMIDE SODIUM-PREDNISOLONE OPHTH OINT 10-0.2% | Tier 2 | | | | |
| Ophthalmic Agents | BLEPHAMIDE SUS OP | SULFACETAMIDE SODIUM-PREDNISOLONE OPHTH SUSP 10-0.2% | Tier 3 | | | | |
| Ophthalmic Agents | BRIMO/TIMOLO SOL 0.2/0.5% | BRIMONIDINE TARTRATE-TIMOLOL MALEATE OPHTH SOLN 0.2-0.5% | Tier 1 | | | X | |
| Ophthalmic Agents | BRIMONIDINE SOL 0.1% | BRIMONIDINE TARTRATE OPHTH SOLN 0.1% | Tier 1 | | | X | |
| Ophthalmic Agents | BRIMONIDINE SOL 0.1% OP | BRIMONIDINE TARTRATE OPHTH SOLN 0.1% | Tier 1 | | | X | |
| Ophthalmic Agents | BRIMONIDINE SOL 0.15% | BRIMONIDINE TARTRATE OPHTH SOLN 0.15% | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents | BRIMONIDINE SOL 0.2% OP | BRIMONIDINE TARTRATE OPHTH SOLN 0.2% | Tier 1 | | | | |
| Ophthalmic Agents | BRINZOLAMIDE SUS 1% | BRINZOLAMIDE OPHTH SUSP 1% | Tier 1 | | | | |
| Ophthalmic Agents | BRINZOLAMIDE SUS 1% OP | BRINZOLAMIDE OPHTH SUSP 1% | Tier 1 | | | | |
| Ophthalmic Agents | BROMFENAC DRO 0.07% OP | BROMFENAC SODIUM OPHTH SOLN 0.07% (BASE EQUIVALENT) | Tier 1 | | | | |
| Ophthalmic Agents | BROMFENAC DRO 0.075% | BROMFENAC SODIUM OPHTH SOLN 0.075% (BASE EQUIVALENT) | Tier 1 | | | | |
| Ophthalmic Agents | BROMFENAC DRO 0.09% OP | BROMFENAC SODIUM OPHTH SOLN 0.09% (BASE EQUIV) (ONCE-DAILY) | Tier 1 | | | | |
| Ophthalmic Agents | BROMFENAC SOL 0.09% OP | BROMFENAC SODIUM OPHTH SOLN 0.09% (BASE EQUIV) (ONCE-DAILY) | Tier 1 | | | | |
| Ophthalmic Agents | BROMSITE DRO 0.075% | BROMFENAC SODIUM OPHTH SOLN 0.075% (BASE EQUIVALENT) | Tier 3 | | | | |
| Ophthalmic Agents | CARTEOLOL SOL 1% OP | CARTEOLOL HCL OPHTH SOLN 1% | Tier 1 | | | | |
| Ophthalmic Agents | CEQUA SOL 0.09% | CYCLOSPORINE (OPHTH) SOLN 0.09% (PF) | Tier 3 | X | | X | |
| Ophthalmic Agents | CILOXAN OIN 0.3% OP | CIPROFLOXACIN HCL OPHTH OINT 0.3% | Tier 3 | | | | |
| Ophthalmic Agents | CIPROFLOXACN SOL 0.3% OP | CIPROFLOXACIN HCL OPHTH SOLN 0.3% (BASE EQUIVALENT) | Tier 1 | | | | |
| Ophthalmic Agents | COMBIGAN SOL 0.2/0.5% | BRIMONIDINE TARTRATE-TIMOLOL MALEATE OPHTH SOLN 0.2-0.5% | Tier 1 | | | | |
| Ophthalmic Agents | COSOPT SOL 2-0.5%OP | DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5% | Tier 3 | | | | |
| Ophthalmic Agents | COSOPT PF SOL 2%-0.5% | DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOL 22.3-6.8 MG/ML PF | Tier 3 | | | X | |
| Ophthalmic Agents | CROMOLYN SOD SOL 4% OP | CROMOLYN SODIUM OPHTH SOLN 4% | Tier 1 | | | | |
| Ophthalmic Agents | CYCLOGYL SOL 0.5% OP | CYCLOPENTOLATE HCL OPHTH SOLN 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | CYCLOGYL SOL 1% OP | CYCLOPENTOLATE HCL OPHTH SOLN 1% | Tier 3 | | | | |
| Ophthalmic Agents | CYCLOGYL SOL 2% OP | CYCLOPENTOLATE HCL OPHTH SOLN 2% | Tier 3 | | | | |
| Ophthalmic Agents | CYCLOPENTOL SOL 1% OP | CYCLOPENTOLATE HCL OPHTH SOLN 1% | Tier 1 | | | | |
| Ophthalmic Agents | CYCLOPENTOL SOL 2% OP | CYCLOPENTOLATE HCL OPHTH SOLN 2% | Tier 1 | | | | |
| Ophthalmic Agents | CYCLOPENTOLA SOL 0.5% | CYCLOPENTOLATE HCL OPHTH SOLN 0.5% | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents | CYCLOSPORINE EMU 0.05% OP | CYCLOSPORINE (OPHTH) EMULSION 0.05% | Tier 1 | X | | X | |
| Ophthalmic Agents | CYSTADROPS SOL 0.37% | CYSTEAMINE HCL OPHTH SOLN 0.37% (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Ophthalmic Agents | CYSTARAN SOL 0.44% | CYSTEAMINE HCL OPHTH SOLN 0.44% (BASE EQUIVALENT) | Tier 2 | X | X | | X |
| Ophthalmic Agents | DEXAMETH PHO SOL 0.1% OP | DEXAMETHASONE SODIUM PHOSPHATE OPHTH SOLN 0.1% | Tier 1 | | | | |
| Ophthalmic Agents | DICLOFENAC SOL 0.1% OP | DICLOFENAC SODIUM OPHTH SOLN 0.1% | Tier 1 | | | | |
| Ophthalmic Agents | DIFLUPREDNAT EMU 0.05% | DIFLUPREDNATE OPHTH EMULSION 0.05% | Tier 1 | | | | |
| Ophthalmic Agents | DORZOL/TIMOL SOL 2%-0.5% | DORZOLAMIDE HCL-TIMOLOL MALEATE PF OPHTH SOLN 2-0.5% | Tier 1 | | | | |
| Ophthalmic Agents | DORZOL/TIMOL SOL 2-0.5%OP | DORZOLAMIDE HCL-TIMOLOL MALEATE OPHTH SOLN 2-0.5% | Tier 1 | | | | |
| Ophthalmic Agents | DORZOLAMIDE SOL 2% | DORZOLAMIDE HCL OPHTH SOLN 2% | Tier 3 | | | | |
| Ophthalmic Agents | DORZOLAMIDE SOL 2% OP | DORZOLAMIDE HCL OPHTH SOLN 2% | Tier 1 | | | | |
| Ophthalmic Agents | DUREZOL EMU 0.05% | DIFLUPREDNATE OPHTH EMULSION 0.05% | Tier 3 | | | | |
| Ophthalmic Agents | EPINASTINE DRO 0.05% | EPINASTINE HCL OPHTH SOLN 0.05% | Tier 1 | | | | |
| Ophthalmic Agents | ERYTHROMYCIN OIN 5MG/GM | ERYTHROMYCIN OPHTH OINT 5 MG/GM | HCR | | | | |
| Ophthalmic Agents | EYSUVIS DRO 0.25% | LOTEPREDNOL ETABONATE OPHTH SUSP 0.25% | Tier 2 | | | | |
| Ophthalmic Agents | FLAREX SUS 0.1% OP | FLUOROMETHOLONE ACETATE OPHTH SUSP 0.1% | Tier 2 | | | | |
| Ophthalmic Agents | FLUOROMETHOL SUS 0.1% OP | FLUOROMETHOLONE OPHTH SUSP 0.1% | Tier 1 | | | | |
| Ophthalmic Agents | FLURBIPROFEN SOL 0.03% OP | FLURBIPROFEN SODIUM OPHTH SOLN 0.03% | Tier 1 | | | | |
| Ophthalmic Agents | FML OIN 0.1% OP | FLUOROMETHOLONE OPHTH OINT 0.1% | Tier 3 | | | | |
| Ophthalmic Agents | FML FORTE SUS 0.25% OP | FLUOROMETHOLONE OPHTH SUSP 0.25% | Tier 3 | | | | |
| Ophthalmic Agents | FML LIQUIFLM SUS 0.1% OP | FLUOROMETHOLONE OPHTH SUSP 0.1% | Tier 3 | | | | |
| Ophthalmic Agents | GATIFLOXACIN SOL 0.5% | GATIFLOXACIN OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | GENTAK OIN 0.3% OP | GENTAMICIN SULFATE OPHTH OINT 0.3% | Tier 3 | | | | |
| Ophthalmic Agents | GENTAMICIN SOL 0.3% OP | GENTAMICIN SULFATE OPHTH SOLN 0.3% | Tier 1 | | | | |
| Ophthalmic Agents | ILEVRO DRO 0.3% OP | NEPAFENAC OPHTH SUSP 0.3% | Tier 3 | | | | |
| Ophthalmic Agents | INVELTYS SUS 1% | LOTEPREDNOL ETABONATE OPHTH SUSP 1% | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|-------------------------|---|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents | IOPIDINE SOL 1% OP | APRACLONIDINE HCL OPHTH SOLN 1% (BASE EQUIVALENT) | Tier 3 | | | | |
| Ophthalmic Agents | ISOPTO ATROP SOL 1% OP | ATROPINE SULFATE OPHTH SOLN 1% | Tier 3 | | | | |
| Ophthalmic Agents | ISOPTO CARP SOL 1% OP | PILOCARPINE HCL OPHTH SOLN 1% | Tier 3 | | | | |
| Ophthalmic Agents | ISTALOL SOL 0.5% OP | TIMOLOL MALEATE OPHTH SOLN 0.5% (ONCE-DAILY) | Tier 3 | | | | |
| Ophthalmic Agents | IYUZEH DRO 0.005% | LATANOPROST (PF) OPHTH SOLN 0.005% | Tier 3 | | | | |
| Ophthalmic Agents | KETOROLAC SOL 0.4% | KETOROLAC TROMETHAMINE OPHTH SOLN 0.4% | Tier 1 | | | | |
| Ophthalmic Agents | KETOROLAC SOL 0.5% | KETOROLAC TROMETHAMINE OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | LACRISERT MIS 5MG OP | *ARTIFICIAL TEAR OPHTH INSERT*** | Tier 2 | | | | |
| Ophthalmic Agents | LATANOPROST SOL 0.005% | LATANOPROST OPHTH SOLN 0.005% | Tier 1 | | | | |
| Ophthalmic Agents | LATANOPROST SOL 0.005% | LATANOPROST OPHTH SOLN 0.005% | Tier 3 | | | X | |
| Ophthalmic Agents | LEVOBUNOLOL SOL 0.5% OP | LEVOBUNOLOL HCL OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | LEVOFLOXACIN SOL 0.5% | LEVOFLOXACIN OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | LEVOFLOXACIN SOL 1.5% | LEVOFLOXACIN OPHTH SOLN 1.5% | Tier 1 | | | | |
| Ophthalmic Agents | LOTEMAX GEL 0.5% | LOTEPREDNOL ETABONATE OPHTH GEL 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | LOTEMAX OIN 0.5% | LOTEPREDNOL ETABONATE OPHTH OINT 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | LOTEMAX SUS 0.5% | LOTEPREDNOL ETABONATE OPHTH SUSP 0.5% | Tier 3 | | | X | |
| Ophthalmic Agents | LOTEMAX SM GEL 0.38% | LOTEPREDNOL ETABONATE OPHTH GEL 0.38% | Tier 3 | | | | |
| Ophthalmic Agents | LOTEPREDNOL GEL 0.5% | LOTEPREDNOL ETABONATE OPHTH GEL 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | LOTEPREDNOL GEL 0.5% OP | LOTEPREDNOL ETABONATE OPHTH GEL 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | LOTEPREDNOL SUS 0.2% | LOTEPREDNOL ETABONATE OPHTH SUSP 0.2% | Tier 1 | | | | |
| Ophthalmic Agents | LOTEPREDNOL SUS 0.5% | LOTEPREDNOL ETABONATE OPHTH SUSP 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | LUMIGAN SOL 0.01% | BIMATOPROST OPHTH SOLN 0.01% | Tier 2 | | | | |
| Ophthalmic Agents | MAXIDEX SUS 0.1% OP | DEXAMETHASONE OPHTH SUSP 0.1% | Tier 2 | | | | |
| Ophthalmic Agents | MAXITROL OIN 0.1% OP | NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH OINT 0.1% | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents | MAXITROL SUS 0.1% OP | NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH SUSP 0.1% | Tier 3 | | | | |
| Ophthalmic Agents | METHAZOLAMID TAB 25MG | METHAZOLAMIDE TAB 25 MG | Tier 1 | | | | |
| Ophthalmic Agents | METHAZOLAMID TAB 50MG | METHAZOLAMIDE TAB 50 MG | Tier 1 | | | | |
| Ophthalmic Agents | MOXIFLOXACIN SOL 0.5% | MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQ) (2 TIMES DAILY) | Tier 1 | | | | |
| Ophthalmic Agents | MOXIFLOXACIN SOL 0.5% | MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQUIV) | Tier 1 | | | | |
| Ophthalmic Agents | MOXIFLOXACIN SOL HCL 0.5% | MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQUIV) | Tier 1 | | | | |
| Ophthalmic Agents | NATACYN SUS 5% OP | NATAMYCIN OPHTH SUSP 5% | Tier 3 | | | | |
| Ophthalmic Agents | NEO/BAC/POLY OIN OP | NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5)MG-400UNT-10000UNT OP OIN | Tier 1 | | | | |
| Ophthalmic Agents | NEO/POLY/BAC OIN /HC 1%OP | BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPHTH OINT 1% | Tier 1 | | | | |
| Ophthalmic Agents | NEO/POLY/BAC OIN OP | NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5)MG-400UNT-10000UNT OP OIN | Tier 1 | | | | |
| Ophthalmic Agents | NEO/POLY/DEX OIN 0.1% OP | NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH OINT 0.1% | Tier 1 | | | | |
| Ophthalmic Agents | NEO/POLY/DEX SUS 0.1% OP | NEOMYCIN-POLYMYXIN-DEXAMETHASONE OPHTH SUSP 0.1% | Tier 1 | | | | |
| Ophthalmic Agents | NEO/POLY/GRA SOL OP | NEOMYCIN-POLYMY-GRAMICID OP SOL 1.75-10000-0.025MG-UNT-MG/ML | Tier 1 | | | | |
| Ophthalmic Agents | NEO/POLY/HC SUS OP | NEOMYCIN-POLYMYXIN-HC OPHTH SUSP | Tier 1 | | | | |
| Ophthalmic Agents | NEO-POLYCIN OIN HC 1%OP | BACITRACIN-POLYMYXIN-NEOMYCIN-HC OPHTH OINT 1% | Tier 1 | | | | |
| Ophthalmic Agents | NEO-POLYCIN OIN OP | NEOMYCIN-BACITRAC ZN-POLYMYX 5(3.5)MG-400UNT-10000UNT OP OIN | Tier 1 | | | | |
| Ophthalmic Agents | NEVANAC SUS 0.1% | NEPAFENAC OPHTH SUSP 0.1% | Tier 3 | | | | |
| Ophthalmic Agents | NEVANAC SUS 0.1% OP | NEPAFENAC OPHTH SUSP 0.1% | Tier 3 | | | | |
| Ophthalmic Agents | OCUFLOX DRO 0.3% OP | OFLOXACIN OPHTH SOLN 0.3% | Tier 3 | | | | |
| Ophthalmic Agents | OFLOXACIN DRO 0.3% OP | OFLOXACIN OPHTH SOLN 0.3% | Tier 1 | | | | |
| Ophthalmic Agents | OLOPATADINE DRO 0.1% | OLOPATADINE HCL OPHTH SOLN 0.1% (BASE EQUIVALENT) | Tier 1 | | | | |
| Ophthalmic Agents | OXERVATE SOL 20MCG/ML | CENEGERMIN-BKBJ OPHTH SOLN 0.002% (20 MCG/ML) | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents | PHENYLEPHRIN SOL 10% OP | PHENYLEPHRINE HCL OPHTH SOLN 10% | Tier 1 | | | | |
| Ophthalmic Agents | PHENYLEPHRIN SOL 2.5% OP | PHENYLEPHRINE HCL OPHTH SOLN 2.5% | Tier 1 | | | | |
| Ophthalmic Agents | PHOSPHOLINE SOL 0.125%OP | ECHOTHIOPHATE IODIDE OPHTH FOR SOLN 0.125% | Tier 2 | | | | |
| Ophthalmic Agents | PILOCARPINE SOL 1% OP | PILOCARPINE HCL OPHTH SOLN 1% | Tier 1 | | | | |
| Ophthalmic Agents | PILOCARPINE SOL 2% OP | PILOCARPINE HCL OPHTH SOLN 2% | Tier 1 | | | | |
| Ophthalmic Agents | PILOCARPINE SOL 4% OP | PILOCARPINE HCL OPHTH SOLN 4% | Tier 1 | | | | |
| Ophthalmic Agents | POLYCIN OIN OP | BACITRACIN-POLYMYXIN B OPHTH OINT | Tier 1 | | | | |
| Ophthalmic Agents | POLYMYXIN B/ SOL TRIMETHP | POLYMYXIN B-TRIMETHOPRIM OPHTH SOLN 10000 UNIT/ML-0.1% | Tier 1 | | | | |
| Ophthalmic Agents | POLYTRIM SOL OP | POLYMYXIN B-TRIMETHOPRIM OPHTH SOLN 10000 UNIT/ML-0.1% | Tier 3 | | | | |
| Ophthalmic Agents | PRED FORTE SUS 1% OP | PREDNISOLONE ACETATE OPHTH SUSP 1% | Tier 3 | | | X | |
| Ophthalmic Agents | PRED MILD SUS 0.12% OP | PREDNISOLONE ACETATE OPHTH SUSP 0.12% | Tier 3 | | | | |
| Ophthalmic Agents | PRED SOD PHO SOL 1% OP | PREDNISOLONE SODIUM PHOSPHATE OPHTH SOLN 1% | Tier 1 | | | | |
| Ophthalmic Agents | PRED-G SUS OP | GENTAMICIN-PREDNISOLONE ACE OPHTH SUSP 0.3-1% | Tier 3 | | | | |
| Ophthalmic Agents | PRED-G S.O.P OIN OP | GENTAMICIN-PREDNISOLONE ACE OPHTH OINT 0.3-0.6% | Tier 3 | | | | |
| Ophthalmic Agents | PREDNISOLONE SUS 1% | PREDNISOLONE ACETATE OPHTH SUSP 1% | Tier 3 | | | X | |
| Ophthalmic Agents | PREDNISOLONE SUS 1% OP | PREDNISOLONE ACETATE OPHTH SUSP 1% | Tier 1 | | | | |
| Ophthalmic Agents | PROLENSA SOL 0.07% | BROMFENAC SODIUM OPHTH SOLN 0.07% (BASE EQUIVALENT) | Tier 3 | | | | |
| Ophthalmic Agents | PROPARACAINE SOL 0.5% OP | PROPARACAINE HCL OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | RESTASIS EMU 0.05% OP | CYCLOSPORINE (OPHTH) EMULSION 0.05% | Tier 1 | X | | | |
| Ophthalmic Agents | RESTASIS MUL EMU 0.05% OP | CYCLOSPORINE (OPHTH) EMULSION 0.05% | Tier 1 | X | X | | |
| Ophthalmic Agents | RHOPRESSA SOL 0.02% | NETARSUDIL DIMESYLATE OPHTH SOLN 0.02% | Tier 3 | | | | |
| Ophthalmic Agents | ROCKLATAN DRO | NETARSUDIL DIMESYLATE-LATANOPROST OPHTH SOLN 0.02-0.005% | Tier 3 | | | | |
| Ophthalmic Agents | SIMBRINZA SUS 1-0.2% | BRINZOLAMIDE-BRIMONIDINE TARTRATE OPHTH SUSP 1-0.2% | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|-------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents | SULF/PRED NA SOL OP | SULFACETAMIDE SODIUM-PREDNISOLONE OPHTH SOLN 10-0.23(0.25)% | Tier 1 | | | | |
| Ophthalmic Agents | SULFACET SOD OIN 10% OP | SULFACETAMIDE SODIUM OPHTH OINT 10% | Tier 1 | | | | |
| Ophthalmic Agents | SULFACET SOD SOL 10% OP | SULFACETAMIDE SODIUM OPHTH SOLN 10% | Tier 1 | | | | |
| Ophthalmic Agents | TAFLUPROST SOL 0.0015% | TAFLUPROST PRESERVATIVE FREE (PF) OPHTH SOLN 0.0015% | Tier 1 | | | X | |
| Ophthalmic Agents | TETRACAINE SOL 0.5% OP | TETRACAINE HCL OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | TIMOLOL GEL SOL 0.25% OP | TIMOLOL MALEATE OPHTH GEL FORMING SOLN 0.25% | Tier 1 | | | | |
| Ophthalmic Agents | TIMOLOL GEL SOL 0.5% OP | TIMOLOL MALEATE OPHTH GEL FORMING SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | TIMOLOL MAL SOL 0.25% OP | TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.25% | Tier 1 | | | | |
| Ophthalmic Agents | TIMOLOL MAL SOL 0.25% OP | TIMOLOL MALEATE OPHTH SOLN 0.25% | Tier 1 | | | | |
| Ophthalmic Agents | TIMOLOL MAL SOL 0.5% OP | TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | TIMOLOL MAL SOL 0.5% OP | TIMOLOL MALEATE OPHTH SOLN 0.5% | Tier 1 | | | | |
| Ophthalmic Agents | TIMOLOL MALE SOL 0.5% | TIMOLOL MALEATE OPHTH SOLN 0.5% (ONCE-DAILY) | Tier 1 | | | | |
| Ophthalmic Agents | TIMOPTIC SOL 0.25% OP | TIMOLOL MALEATE OPHTH SOLN 0.25% | Tier 3 | | | | |
| Ophthalmic Agents | TIMOPTIC SOL 0.5% OP | TIMOLOL MALEATE OPHTH SOLN 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | TIMOPTIC OCU SOL 0.25% OP | TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.25% | Tier 3 | | | | |
| Ophthalmic Agents | TIMOPTIC OCU SOL 0.5% OP | TIMOLOL MALEATE PRESERVATIVE FREE OPHTH SOLN 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | TIMOPTIC-XE SOL 0.25% OP | TIMOLOL MALEATE OPHTH GEL FORMING SOLN 0.25% | Tier 3 | | | | |
| Ophthalmic Agents | TIMOPTIC-XE SOL 0.5% OP | TIMOLOL MALEATE OPHTH GEL FORMING SOLN 0.5% | Tier 3 | | | | |
| Ophthalmic Agents | TOBRA/DEXAME SUS 0.3-0.1% | TOBRAMYCIN-DEXAMETHASONE OPHTH SUSP 0.3-0.1% | Tier 1 | | | | |
| Ophthalmic Agents | TOBRADEX OIN 0.3-0.1% | TOBRAMYCIN-DEXAMETHASONE OPHTH OINT 0.3-0.1% | Tier 3 | | | | |
| Ophthalmic Agents | TOBRADEX SUS 0.3-0.1% | TOBRAMYCIN-DEXAMETHASONE OPHTH SUSP 0.3-0.1% | Tier 3 | | | | |
| Ophthalmic Agents | TOBRADEX ST SUS 0.3-0.05 | TOBRAMYCIN-DEXAMETHASONE OPHTH SUSP 0.3-0.05% | Tier 3 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents | TOBRAMYCIN SOL 0.3% OP | TOBRAMYCIN OPHTH SOLN 0.3% | Tier 1 | | | | |
| Ophthalmic Agents | TOBEX OIN 0.3% OP | TOBRAMYCIN OPHTH OINT 0.3% | Tier 3 | | | | |
| Ophthalmic Agents | TRAVATAN Z DRO 0.004% | TRAVOPROST OPHTH SOLN 0.004% (BENZALKONIUM FREE) (BAK FREE) | Tier 3 | | | X | |
| Ophthalmic Agents | TRAVOPROST DRO 0.004% | TRAVOPROST OPHTH SOLN 0.004% (BENZALKONIUM FREE) (BAK FREE) | Tier 1 | | | | |
| Ophthalmic Agents | TRIFLURIDINE SOL 1% OP | TRIFLURIDINE OPHTH SOLN 1% | Tier 1 | | | | |
| Ophthalmic Agents | TRIMETHOPRIM SOL POLYMYXN | POLYMYXIN B-TRIMETHOPRIM OPHTH SOLN 10000 UNIT/ML-0.1% | Tier 1 | | | | |
| Ophthalmic Agents | TRUSOPT SOL 2% OP | DORZOLAMIDE HCL OPHTH SOLN 2% | Tier 3 | | | | |
| Ophthalmic Agents | TYRVAYA SOL 0.03MG | VARENICLINE TARTRATE NASAL SOLN 0.03 MG/ACT | Tier 3 | X | X | | |
| Ophthalmic Agents | VERKAZIA EMU 0.1% OP | CYCLOSPORINE (OPHTH) EMULSION 0.1% | Tier 3 | | | | |
| Ophthalmic Agents | VEVYE DRO 0.1% | CYCLOSPORINE (OPHTH) SOLN 0.1% | Tier 3 | X | X | X | |
| Ophthalmic Agents | VIGAMOX DRO 0.5% | MOXIFLOXACIN HCL OPHTH SOLN 0.5% (BASE EQUIV) | Tier 3 | | | X | |
| Ophthalmic Agents | VYZULTA SOL 0.024% | LATANOPROSTENE BUNOD OPHTH SOLN 0.024% | Tier 3 | | | X | |
| Ophthalmic Agents | XALATAN SOL 0.005% | LATANOPROST OPHTH SOLN 0.005% | Tier 3 | | | X | |
| Ophthalmic Agents | XELPROS EMU 0.005% | LATANOPROST OPHTH EMULSION 0.005% | Tier 3 | | | | |
| Ophthalmic Agents | XIIDRA DRO 5% | LIFITEGRAST OPHTH SOLN 5% | Tier 2 | X | | | |
| Ophthalmic Agents | ZERVIATE DRO 0.24% | CETIRIZINE HCL OPHTH SOLN 0.24% (BASE EQUIV) | Tier 3 | | | | |
| Ophthalmic Agents | ZIOPTAN DRO 0.0015% | TAFLUPROST PRESERVATIVE FREE (PF) OPHTH SOLN 0.0015% | Tier 3 | | | X | |
| Ophthalmic Agents | ZYLET SUS 0.5-0.3% | LOTEPREDNOL ETABONATE-TOBRAMYCIN OPHTH SUSP 0.5-0.3% | Tier 3 | | | | |
| Ophthalmic Agents | ZYMAXID SOL 0.5% | GATIFLOXACIN OPHTH SOLN 0.5% | Tier 3 | | | | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | BETADINE SOL 5% OP | POVIDONE-IODINE OPHTH SOLN 5% | Tier 3 | | | | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | CHONDROITIN SOL | CHONDROITIN SULFATE OPHTH SOLN 0.25% | Tier 3 | | | X | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | CYCLOMYDRIL SOL OP | CYCLOPENTOLATE W/ PHENYLEPHRINE OPHTH SOLN 0.2-1% | Tier 3 | | | | |

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|---|---------------------------|--|------------|------|--------------|--------------|-----------|
| Ophthalmic Agents - Drugs to Treat Eye Conditions | DOUBLE PM SOL | *PREDNISOLONE-MOXIFLOXACIN OPTH FOR SOLN 1-0.5% (CMPD KIT)* | Tier 3 | X | | | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | GELFILM MIS OP | GELATIN ADSORBABLE OPHTH FILM | Tier 2 | | | | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | HYPOCYN SPR | *EYELID CLEANSERS - SOLUTION*** | Tier 3 | | | | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | MITOSOL KIT 0.2MG | MITOMYCIN FOR OPHTH SOLN KIT 0.2 MG | Tier 3 | | | | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | PREDNIS/BROM SUS 1-0.075% | PREDNISOLONE-BROMFENAC OPHTH SUSP 1-0.075% | Tier 3 | | | X | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | PRENIS-BROMF SOL 1-0.075% | PREDNISOLONE-BROMFENAC OPHTH SOLN 1-0.075% | Tier 3 | | | X | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | TRIPLE PMB SOL | *PREDNISOL-MOXIFLOX-BROMFEN FOR SOL 1-0.5-0.09% (CMPD KIT)* | Tier 3 | X | | | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | TRIPLE PMK SOL | *PREDNISOL-MOXIFLOX-KETOROLAC FOR SOL 1-0.5-0.5% (CMPD KIT)* | Tier 3 | X | | | |
| Ophthalmic Agents - Drugs to Treat Eye Conditions | UPNEEQ SOL 0.1% | OXYMETAZOLINE HCL OPHTH SOLN 0.1% | Tier 3 | X | | | |
| Otic Agents | ACETIC ACID SOL 2% OTIC | ACETIC ACID OTIC SOLN 2% | Tier 1 | | | | |
| Otic Agents | CETRAXAL SOL 0.2% | CIPROFLOXACIN HCL OTIC SOLN 0.2% (BASE EQUIVALENT) | Tier 3 | | | | |
| Otic Agents | CIPRO HC SUS OTIC | CIPROFLOXACIN-HYDROCORTISONE OTIC SUSP 0.2-1% | Tier 3 | | | | |
| Otic Agents | CIPRO/DEXA SUS 0.3-0.1% | CIPROFLOXACIN-DEXAMETHASONE OTIC SUSP 0.3-0.1% | Tier 1 | | | | |
| Otic Agents | CIPRO/FLUOC DRO PF | CIPROFLOXACIN-FLUOCINOLONE ACETON (PF) OTIC SOLN 0.3-0.025% | Tier 3 | | | X | |
| Otic Agents | CIPRODEX SUS 0.3-0.1% | CIPROFLOXACIN-DEXAMETHASONE OTIC SUSP 0.3-0.1% | Tier 3 | | | X | |
| Otic Agents | CIPROFLOXACN SOL 0.2% | CIPROFLOXACIN HCL OTIC SOLN 0.2% (BASE EQUIVALENT) | Tier 1 | | | | |
| Otic Agents | CORTISPORIN SUS -TC OTIC | NEOMYCIN-COLISTIN-HC-THONZONIUM OTIC SUSP 3.3-3-10-0.5 MG/ML | Tier 3 | | | | |
| Otic Agents | DERMOTIC OIL 0.01% | FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01% | Tier 3 | | | | |
| Otic Agents | FLAC OIL 0.01% | FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01% | Tier 1 | | | | |
| Otic Agents | FLUOCIN ACET OIL 0.01% | FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01% | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|---|---------------------------|---|------------|------|--------------|--------------|-----------|
| Otic Agents | FLUOCIN ACET OIL EAR0.01% | FLUOCINOLONE ACETONIDE (OTIC) OIL 0.01% | Tier 1 | | | | |
| Otic Agents | HC/ACET ACID SOL OTIC | HYDROCORTISONE W/ ACETIC ACID OTIC SOLN 1-2% | Tier 1 | | | | |
| Otic Agents | NEO/POLY/HC SOL 1% OTIC | NEOMYCIN-POLYMYXIN-HC OTIC SOLN 1% | Tier 1 | | | | |
| Otic Agents | NEO/POLY/HC SUS 1% OTIC | NEOMYCIN-POLYMYXIN-HC OTIC SUSP 3.5 MG/ML-10000 UNIT/ML-1% | Tier 1 | | | | |
| Otic Agents | OFLOXACIN DRO 0.3%OTIC | OFLOXACIN OTIC SOLN 0.3% | Tier 1 | | | | |
| Otic Agents | OTOVEL DRO | CIPROFLOXACIN-FLUOCINOLONE ACETON (PF) OTIC SOLN 0.3-0.025% | Tier 3 | | | X | |
| Otic Agents - Drugs to Treat Ear Conditions | PRAMOTIC DRO 1-0.1% | PRAMOXINE-CHLOROXYLENOL OTIC LIQUID 1-0.1% | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | ACCOLATE TAB 10MG | ZAFIRLUKAST TAB 10 MG | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | ACCOLATE TAB 20MG | ZAFIRLUKAST TAB 20 MG | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | ACETYLCYST SOL 10% | ACETYLCYSTEINE INHAL SOLN 10% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ACETYLCYST SOL 20% | ACETYLCYSTEINE INHAL SOLN 20% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ADCIRCA TAB 20MG | TADALAFIL TAB 20 MG (PAH) | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | ADEMPAS TAB 0.5MG | RIOCIGUAT TAB 0.5 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ADEMPAS TAB 1.5MG | RIOCIGUAT TAB 1.5 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ADEMPAS TAB 1MG | RIOCIGUAT TAB 1 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ADEMPAS TAB 2.5MG | RIOCIGUAT TAB 2.5 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ADEMPAS TAB 2MG | RIOCIGUAT TAB 2 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL AER HFA | ALBUTEROL SULFATE INHAL AERO 108 MCG/ACT (90MCG BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL AER HFA | ALBUTEROL SULFATE INHAL AERO 108 MCG/ACT (90MCG BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL NEB 0.083% | ALBUTEROL SULFATE SOLN NEBU 0.083% (2.5 MG/3ML) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL NEB 0.5% | ALBUTEROL SULFATE SOLN NEBU 0.5% (5 MG/ML) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL NEB 0.5% | ALBUTEROL SULFATE SOLN NEBU 0.5% (5 MG/ML) | Tier 3 | | | | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | ALBUTEROL NEB 0.63MG/3 | ALBUTEROL SULFATE SOLN NEBU 0.63 MG/3ML (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL NEB 1.25MG/3 | ALBUTEROL SULFATE SOLN NEBU 1.25 MG/3ML (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL SYP 2MG/5ML | ALBUTEROL SULFATE SYRUP 2 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL TAB 2MG | ALBUTEROL SULFATE TAB 2 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALBUTEROL TAB 4MG | ALBUTEROL SULFATE TAB 4 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALLERGY RELF TAB 25MG | DIPHENHYDRAMINE HCL TAB 25 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ALVESCO AER 160MCG | CICLESONIDE INHAL AEROSOL 160 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ALVESCO AER 80MCG | CICLESONIDE INHAL AEROSOL 80 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ALYQ TAB 20MG | TADALAFIL TAB 20 MG (PAH) | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | AMBRISANTAN TAB 10MG | AMBRISANTAN TAB 10 MG | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | AMBRISANTAN TAB 5MG | AMBRISANTAN TAB 5 MG | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ARFORMOTEROL NEB 15/2ML | ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV) | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | ARNUITY ELPT INH 100MCG | FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 100 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | ARNUITY ELPT INH 200MCG | FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 200 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | ARNUITY ELPT INH 50MCG | FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 50 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | ASMANEX 120 AER 220MCG | MOMETASONE FUROATE INHAL POWD 220 MCG/ACT (BREATH ACTIVATED) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ASMANEX 14 AER 220MCG | MOMETASONE FUROATE INHAL POWD 220 MCG/ACT (BREATH ACTIVATED) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ASMANEX 30 AER 110MCG | MOMETASONE FUROATE INHAL POWD 110 MCG/ACT (BREATH ACTIVATED) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ASMANEX 30 AER 220MCG | MOMETASONE FUROATE INHAL POWD 220 MCG/ACT (BREATH ACTIVATED) | Tier 3 | | X | X | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------------|--------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | ASMANEX 60 AER 220MCG | MOMETASONE FUROATE INHAL POWD 220 MCG/ACT (BREATH ACTIVATED) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ASMANEX HFA AER 100 MCG | MOMETASONE FUROATE INHAL AEROSOL SUSPENSION 100 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ASMANEX HFA AER 200 MCG | MOMETASONE FUROATE INHAL AEROSOL SUSPENSION 200 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ASMANEX HFA AER 50MCG | MOMETASONE FUROATE INHAL AEROSOL SUSPENSION 50 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ATROVENT HFA AER 17MCG | IPRATROPIUM BROMIDE HFA INHAL AEROSOL 17 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents | AUVI-Q INJ 0.15MG | EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML (1:1000) | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents | AUVI-Q INJ 0.1MG | EPINEPHRINE SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML | Tier 2 | | | | |
| Respiratory Tract/Pulmonary Agents | AUVI-Q INJ 0.3MG | EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (1:1000) | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents | AZELASTINE SPR 0.1% | AZELASTINE HCL NASAL SPRAY 0.1% (137 MCG/SPRAY) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | BETHKIS NEB 300/4ML | TOBRAMYCIN NEBU SOLN 300 MG/4ML | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | BOSENTAN TAB 125MG | BOSENTAN TAB 125 MG | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | BOSENTAN TAB 62.5MG | BOSENTAN TAB 62.5 MG | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | BROVANA NEB 15MCG | ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV) | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | BUDESONIDE SUS 0.25MG/2 | BUDESONIDE INHALATION SUSP 0.25 MG/2ML | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | BUDESONIDE SUS 0.5MG/2 | BUDESONIDE INHALATION SUSP 0.5 MG/2ML | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | BUDESONIDE SUS 1MG/2ML | BUDESONIDE INHALATION SUSP 1 MG/2ML | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | CARBINOXAMIN SOL 4MG/5ML | CARBINOXAMINE MALEATE SOLN 4 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | CARBINOXAMIN TAB 4MG | CARBINOXAMINE MALEATE TAB 4 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | CARBINOXAMIN TAB 6MG | CARBINOXAMINE MALEATE TAB 6 MG | Tier 1 | | | X | |
| Respiratory Tract/Pulmonary Agents | CAYSTON INH 75MG | AZTREONAM LYSINE FOR INHAL SOLN 75 MG (BASE EQUIVALENT) | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | CLEMASTINE TAB 2.68MG | CLEMASTINE FUMARATE TAB 2.68 MG | Tier 1 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | CROMOLYN SOD NEB 20MG/2ML | CROMOLYN SODIUM SOLN NEBU 20 MG/2ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | CYPROHEPTAD SYP 2MG/5ML | CYPROHEPTADINE HCL SYRUP 2 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | CYPROHEPTAD TAB 4MG | CYPROHEPTADINE HCL TAB 4 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | DALIRESP TAB 250MCG | ROFLUMILAST TAB 250 MCG | Tier 3 | X | | | |
| Respiratory Tract/Pulmonary Agents | DALIRESP TAB 500MCG | ROFLUMILAST TAB 500 MCG | Tier 3 | X | X | | |
| Respiratory Tract/Pulmonary Agents | DICOPANOL SUS 5MG/ML | *DIPHENHYDRAMINE HCL FOR ORAL SUSP 5 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Respiratory Tract/Pulmonary Agents | DICOPANOL SUS RAPIDPAQ | *DIPHENHYDRAMINE HCL FOR ORAL SUSP 5 MG/ML (COMPOUND KIT)** | Tier 3 | X | | | |
| Respiratory Tract/Pulmonary Agents | DIPHENHYDRAM ELX 12.5/5ML | DIPHENHYDRAMINE HCL ELIXIR 12.5 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ELIXOPHYLLIN ELX 80/15ML | THEOPHYLLINE ELIXIR 80 MG/15ML | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | EPINEPHRINE INJ 0.15MG | EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML (1:2000) | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | EPINEPHRINE INJ 0.15MG | EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML (1:1000) | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | EPINEPHRINE INJ 0.3MG | EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (1:1000) | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | EPIPEN 2-PAK INJ 0.3MG | EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (1:1000) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | EPIPEN-JR INJ 0.15MG | EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML (1:2000) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | ESBRIET CAP 267MG | PIRFENIDONE CAP 267 MG | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | ESBRIET TAB 267MG | PIRFENIDONE TAB 267 MG | Tier 3 | X | | X | X |
| Respiratory Tract/Pulmonary Agents | ESBRIET TAB 801MG | PIRFENIDONE TAB 801 MG | Tier 3 | X | | X | X |
| Respiratory Tract/Pulmonary Agents | FASENRA PEN INJ 30MG/ML | BENRALIZUMAB SUBCUTANEOUS SOLN AUTO-INJECTOR 30 MG/ML | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | FLOVENT DISK AER 100MCG | FLUTICASONE PROPIONATE AER POW BA 100 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | FLOVENT DISK AER 250MCG | FLUTICASONE PROPIONATE AER POW BA 250 MCG/ACT | Tier 3 | | X | X | |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------------|--------------------------|---|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | FLOVENT DISK AER 50MCG | FLUTICASONE PROPIONATE AER POW BA 50 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | FLOVENT HFA AER 110MCG | FLUTICASONE PROPIONATE HFA INHAL AER 110 MCG/ACT (125/ VALVE) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | FLOVENT HFA AER 220MCG | FLUTICASONE PROPIONATE HFA INHAL AER 220 MCG/ACT (250/ VALVE) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | FLOVENT HFA AER 44MCG | FLUTICASONE PROPIONATE HFA INHAL AERO 44 MCG/ACT (50/ VALVE) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | FLUNISOLIDE SPR 0.025% | FLUNISOLIDE NASAL SOLN 25 MCG/ACT (0.025%) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | FLUTICAS HFA AER 110MCG | FLUTICASONE PROPIONATE HFA INHAL AER 110 MCG/ACT (125/ VALVE) | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | FLUTICAS HFA AER 220MCG | FLUTICASONE PROPIONATE HFA INHAL AER 220 MCG/ACT (250/ VALVE) | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | FLUTICAS HFA AER 44MCG | FLUTICASONE PROPIONATE HFA INHAL AERO 44 MCG/ACT (50/ VALVE) | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | FLUTICASONE AER 100MCG | FLUTICASONE PROPIONATE AER POW BA 100 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | FLUTICASONE AER 250MCG | FLUTICASONE PROPIONATE AER POW BA 250 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | FLUTICASONE AER 50MCG | FLUTICASONE PROPIONATE AER POW BA 50 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | FLUTICASONE SPR 50MCG | FLUTICASONE PROPIONATE NASAL SUSP 50 MCG/ACT | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | FORMOTEROL NEB 20/2ML | FORMOTEROL FUMARATE SOLN NEBU 20 MCG/2ML | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | INCRUSE ELPT INH 62.5MCG | UMECLIDINIUM BR AERO POWD BREATH ACT 62.5 MCG/ACT (BASE EQ) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | IPRATROPIUM SOL 0.02%INH | IPRATROPIUM BROMIDE INHAL SOLN 0.02% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | IPRATROPIUM SPR 0.03% | IPRATROPIUM BROMIDE NASAL SOLN 0.03% (21 MCG/SPRAY) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | IPRATROPIUM SPR 0.06% | IPRATROPIUM BROMIDE NASAL SOLN 0.06% (42 MCG/SPRAY) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | KALYDECO GRA 13.4MG | IVACAFTOR PACKET 13.4 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | KALYDECO GRA 5.8MG | IVACAFTOR PACKET 5.8 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | KALYDECO PAK 25MG | IVACAFTOR PACKET 25 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | KALYDECO PAK 50MG | IVACAFTOR PACKET 50 MG | Tier 2 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | KALYDECO PAK 75MG | IVACAFTOR PACKET 75 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | KALYDECO TAB 150MG | IVACAFTOR TAB 150 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | KARBINAL ER SUS 4MG/5ML | CARBINOXAMINE MALEATE EXTENDED RELEASE SUSP 4 MG/5ML | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | KITABIS PAK NEB 300/5ML | TOBRAMYCIN NEBU SOLN 300 MG/5ML | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | LETAIRIS TAB 10MG | AMBRISENTAN TAB 10 MG | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | LETAIRIS TAB 5MG | AMBRISENTAN TAB 5 MG | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | LEVALBUTEROL AER 45/ACT | LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV) | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | LEVALBUTEROL NEB 0.31MG | LEVALBUTEROL HCL SOLN NEBU 0.31 MG/3ML (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | LEVALBUTEROL NEB 0.63MG | LEVALBUTEROL HCL SOLN NEBU 0.63 MG/3ML (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | LEVALBUTEROL NEB 1.25/0.5 | LEVALBUTEROL HCL SOLN NEBU CONC 1.25 MG/0.5ML (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | LEVALBUTEROL NEB 1.25MG | LEVALBUTEROL HCL SOLN NEBU 1.25 MG/3ML (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | LEVOCETIRIZI SOL 2.5/5ML | LEVOCETIRIZINE DIHYDROCHLORIDE SOLN 2.5 MG/5ML (0.5 MG/ML) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | LEVOCETIRIZI TAB 5MG | LEVOCETIRIZINE DIHYDROCHLORIDE TAB 5 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | LIQREV SUS 10MG/ML | SILDENAFIL CITRATE ORAL SUSP 10 MG/ML | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | LONHALA MAGN SOL 25MCG | GLYCOPYRROLATE INHAL SOLUTION 25 MCG/ML | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | MONTELUKAST CHW 4MG | MONTELUKAST SODIUM CHEW TAB 4 MG (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | MONTELUKAST CHW 5MG | MONTELUKAST SODIUM CHEW TAB 5 MG (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | MONTELUKAST GRA 4MG | MONTELUKAST SODIUM ORAL GRANULES PACKET 4 MG (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | MONTELUKAST TAB 10MG | MONTELUKAST SODIUM TAB 10 MG (BASE EQUIV) | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | NUCALA INJ 100MG/ML | MEPOLIZUMAB SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | NUCALA INJ 100MG/ML | MEPOLIZUMAB SUBCUTANEOUS SOLUTION PREF SYRINGE 100 MG/ML | Tier 3 | X | X | | X |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------------|-----------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | NUCALA INJ 40MG/0.4 | MEPOLIZUMAB SUBCUTANEOUS SOLUTION PREF SYRINGE 40 MG/0.4ML | Tier 3 | X | X | | |
| Respiratory Tract/Pulmonary Agents | OFEV CAP 100MG | NINTEDANIB ESYLATE CAP 100 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | OFEV CAP 150MG | NINTEDANIB ESYLATE CAP 150 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | OLOPATADINE SPR 0.6% | OLOPATADINE HCL NASAL SOLN 0.6% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | OPSUMIT TAB 10MG | MACITENTAN TAB 10 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORENITRAM TAB 0.125MG | TREPROSTINIL DIOLAMINE TAB ER 0.125 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORENITRAM TAB 0.25MG | TREPROSTINIL DIOLAMINE TAB ER 0.25 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORENITRAM TAB 1MG | TREPROSTINIL DIOLAMINE TAB ER 1 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORENITRAM TAB 2.5MG | TREPROSTINIL DIOLAMINE TAB ER 2.5 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORENITRAM TAB 5MG | TREPROSTINIL DIOLAMINE TAB ER 5 MG (BASE EQUIV) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORENITRAM TAB MONTH 1 | TREPROSTINIL TAB ER TITR PK (MO1) 126 X0.125MG & 42 X0.25MG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORENITRAM TAB MONTH 2 | TREPROSTINIL TAB ER TITR PK (MO2) 126 X0.125MG & 210 X0.25MG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORENITRAM TAB MONTH 3 | TREPROSTINIL TAB ER TITR PK(MO3)126X0.125MG & 42X0.25MG & 84X1MG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORKAMBI GRA 100-125 | LUMACAFOR-IVACAFOR GRANULES PACKET 100-125 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORKAMBI GRA 150-188 | LUMACAFOR-IVACAFOR GRANULES PACKET 150-188 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORKAMBI GRA 75-94MG | LUMACAFOR-IVACAFOR GRANULES PACKET 75-94 MG | Tier 2 | X | X | | |
| Respiratory Tract/Pulmonary Agents | ORKAMBI TAB 100-125 | LUMACAFOR-IVACAFOR TAB 100-125 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | ORKAMBI TAB 200-125 | LUMACAFOR-IVACAFOR TAB 200-125 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | PATANASE SPR 0.6% | OLOPATADINE HCL NASAL SOLN 0.6% | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | PERFOROMIST NEB 20MCG | FORMOTEROL FUMARATE SOLN NEBU 20 MCG/2ML | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | PIRFENIDONE CAP 267MG | PIRFENIDONE CAP 267 MG | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | PIRFENIDONE TAB 267MG | PIRFENIDONE TAB 267 MG | Tier 1 | X | | | X |

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**PA = Prior Authorization

| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | PIRFENIDONE TAB 534MG | PIRFENIDONE TAB 534 MG | Tier 1 | X | X | | |
| Respiratory Tract/Pulmonary Agents | PIRFENIDONE TAB 801MG | PIRFENIDONE TAB 801 MG | Tier 1 | X | | | X |
| Respiratory Tract/Pulmonary Agents | PROAIR HFA AER | ALBUTEROL SULFATE INHAL AERO 108 MCG/ACT (90MCG BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | PROAIR RESPI AER | ALBUTEROL SULFATE AER POW BA 108 MCG/ACT (90 MCG BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | PROMETH VC SYP 6.25-5/5 | PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | PROMETH/PE SYP 6.25-5/5 | PROMETHAZINE & PHENYLEPHRINE SYRUP 6.25-5 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | PROVENTIL AER HFA | ALBUTEROL SULFATE INHAL AERO 108 MCG/ACT (90MCG BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | PULMICORT INH 180MCG | BUDESONIDE INHAL AERO POWD 180 MCG/ACT (BREATH ACTIVATED) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | PULMICORT INH 90MCG | BUDESONIDE INHAL AERO POWD 90 MCG/ACT (BREATH ACTIVATED) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | PULMICORT SUS 0.25MG/2 | BUDESONIDE INHALATION SUSP 0.25 MG/2ML | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | PULMICORT SUS 0.5MG/2 | BUDESONIDE INHALATION SUSP 0.5 MG/2ML | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | PULMICORT SUS 1MG/2ML | BUDESONIDE INHALATION SUSP 1 MG/2ML | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | PULMOZYME SOL 1MG/ML | DORNASE ALFA INHAL SOLN 2.5 MG/2.5ML | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | QVAR REDIIHA AER 80MCG | BECLOMETHASONE DIPROP HFA BREATH ACT INH AER 80 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | QVAR REDIIHAL AER 40MCG | BECLOMETHASONE DIPROP HFA BREATH ACT INH AER 40 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | REVATIO SUS 10MG/ML | SILDENAFIL CITRATE FOR SUSPENSION 10 MG/ML | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | REVATIO TAB 20MG | SILDENAFIL CITRATE TAB 20 MG | Tier 3 | | X | X | X |
| Respiratory Tract/Pulmonary Agents | RIBAVIRIN INH 6GM | RIBAVIRIN FOR INHAL SOLN 6 GM | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ROFLUMILAST TAB 250MCG | ROFLUMILAST TAB 250 MCG | Tier 1 | X | | | |
| Respiratory Tract/Pulmonary Agents | ROFLUMILAST TAB 500MCG | ROFLUMILAST TAB 500 MCG | Tier 1 | X | X | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|------------------------------------|-------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | RYVENT TAB 6MG | CARBINOXAMINE MALEATE TAB 6 MG | Tier 1 | | | X | |
| Respiratory Tract/Pulmonary Agents | SEREVENT DIS AER 50MCG | SALMETEROL XINAFOATE AER POW BA 50 MCG/ACT (BASE EQUIV) | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents | SILDENAFIL SUS 10MG/ML | SILDENAFIL CITRATE FOR SUSPENSION 10 MG/ML | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | SILDENAFIL TAB 20MG | SILDENAFIL CITRATE TAB 20 MG | Tier 1 | | X | | X |
| Respiratory Tract/Pulmonary Agents | SINGULAIR CHW 4MG | MONTELUKAST SODIUM CHEW TAB 4 MG (BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | SINGULAIR CHW 5MG | MONTELUKAST SODIUM CHEW TAB 5 MG (BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | SINGULAIR GRA 4MG | MONTELUKAST SODIUM ORAL GRANULES PACKET 4 MG (BASE EQUIV) | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | SINGULAIR TAB 10MG | MONTELUKAST SODIUM TAB 10 MG (BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | SPIRIVA AER 1.25MCG | TIOTROPIUM BROMIDE MONOHYDRATE INHAL AEROSOL 1.25 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents | SPIRIVA CAP HANDIHLR | TIOTROPIUM BROMIDE MONOHYDRATE INHAL CAP 18 MCG (BASE EQUIV) | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents | SPIRIVA SPR 2.5MCG | TIOTROPIUM BROMIDE MONOHYDRATE INHAL AEROSOL 2.5 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents | STRIVERDI AER 2.5MCG | OLODATEROL HCL INHAL AEROSOL SOLN 2.5 MCG/ACT (BASE EQUIV) | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents | SYMDEKO TAB 100-150 | TEZACAFTOR-IVACAFTOR 100-150 MG & IVACAFTOR 150 MG TAB TBPK | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | SYMDEKO TAB 50-75MG | TEZACAFTOR-IVACAFTOR 50-75 MG & IVACAFTOR 75 MG TAB TBPK | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | SYMJEPI INJ 0.15MG | EPINEPHRINE SOLN PREFILLED SYRINGE 0.15 MG/0.3ML (1:2000) | Tier 2 | | | | |
| Respiratory Tract/Pulmonary Agents | SYMJEPI INJ 0.3MG | EPINEPHRINE SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML (1:1000) | Tier 2 | | | | |
| Respiratory Tract/Pulmonary Agents | TADALAFIL TAB 20MG | TADALAFIL TAB 20 MG (PAH) | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TADLIQ SUS 20MG/5ML | TADALAFIL ORAL SUSP 20 MG/5ML (PAH) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TERBUTALINE POW SULFATE | TERBUTALINE SULFATE POWDER | Tier 3 | | | | |

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|------------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | TERBUTALINE TAB 2.5MG | TERBUTALINE SULFATE TAB 2.5 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | TERBUTALINE TAB 5MG | TERBUTALINE SULFATE TAB 5 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | TEZSPIRE INJ 210MG | TEZEPELUMAB-EKKO SUBCUTANEOUS SOLN AUTO-INJ 210 MG/1.91ML | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | THEO-24 CAP 100MG CR | THEOPHYLLINE CAP ER 24HR 100 MG | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | THEO-24 CAP 200MG CR | THEOPHYLLINE CAP ER 24HR 200 MG | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | THEO-24 CAP 300MG CR | THEOPHYLLINE CAP ER 24HR 300 MG | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | THEO-24 CAP 400MG ER | THEOPHYLLINE CAP ER 24HR 400 MG | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | THEOPHYLLINE ELX 80/15ML | THEOPHYLLINE ELIXIR 80 MG/15ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | THEOPHYLLINE SOL 80/15ML | THEOPHYLLINE SOLN 80 MG/15ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | THEOPHYLLINE TAB 100MG ER | THEOPHYLLINE TAB ER 12HR 100 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | THEOPHYLLINE TAB 200MG ER | THEOPHYLLINE TAB ER 12HR 200 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | THEOPHYLLINE TAB 300MG ER | THEOPHYLLINE TAB ER 12HR 300 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | THEOPHYLLINE TAB 400MG ER | THEOPHYLLINE TAB ER 24HR 400 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | THEOPHYLLINE TAB 450MG ER | THEOPHYLLINE TAB ER 12HR 450 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | THEOPHYLLINE TAB 600MG ER | THEOPHYLLINE TAB ER 24HR 600 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | TIOTROP BROM CAP 18MCG | TIOTROPIUM BROMIDE MONOHYDRATE INHAL CAP 18 MCG (BASE EQUIV) | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | TOBI NEB 300/5ML | TOBRAMYCIN NEBU SOLN 300 MG/5ML | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | TOBI PODHALR CAP 28MG | TOBRAMYCIN INHAL CAP 28 MG | Tier 3 | X | | | X |
| Respiratory Tract/Pulmonary Agents | TOBRAMYCIN NEB 300/4ML | TOBRAMYCIN NEBU SOLN 300 MG/4ML | Tier 1 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TOBRAMYCIN NEB 300/5ML | TOBRAMYCIN NEBU SOLN 300 MG/5ML | Tier 1 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | TOBRAMYCIN NEB 300/5ML | TOBRAMYCIN NEBU SOLN 300 MG/5ML | Tier 3 | X | X | X | X |
| Respiratory Tract/Pulmonary Agents | TRACLEER TAB 125MG | BOSENTAN TAB 125 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TRACLEER TAB 32MG | BOSENTAN TAB FOR ORAL SUSP 32 MG | Tier 2 | X | X | | X |

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|------------------------------------|---------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | TRACLEER TAB 62.5MG | BOSENTAN TAB 62.5 MG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TRIKAFTA PAK 59.5MG | ELEXACAF-TEZACAF-IVACAF 80-40-60 MG& IVACAF 59.5MG THPK GRAN | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TRIKAFTA PAK 75MG | ELEXACAF-TEZACAF-IVACAF 100-50-75 MG& IVACAF 75MG THPK GRAN | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TRIKAFTA TAB | ELEXACAF-TEZACAF-IVACAF 50-25-37.5 MG & IVACAFTOR 75 MG TBPk | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TRIKAFTA TAB | ELEXACAF-TEZACAF-IVACAF 100-50-75 MG & IVACAFTOR 150 MG TBPk | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TUDORZA PRES AER 400/ACT | ACLIDINIUM BROMIDE AEROSOL POWD BREATH ACTIVATED 400 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents | TYVASO SOL 0.6MG/ML | TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML | Tier 2 | X | | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO DPI POW 16-32-48 | TREPROSTINIL INH POWD 112 X 16MCG & 112 X 32MCG & 28 X 48MCG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO DPI POW 16-32MCG | TREPROSTINIL INH POWDER 112 X 16MCG & 84 X 32MCG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO DPI POW 16MCG | TREPROSTINIL INH POWDER 16 MCG/CARTRIDGE | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO DPI POW 32-48MCG | TREPROSTINIL INH POWDER 112 X 32MCG & 112 X 48MCG | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO DPI POW 32MCG | TREPROSTINIL INH POWDER 32 MCG/CARTRIDGE | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO DPI POW 48MCG | TREPROSTINIL INH POWDER 48 MCG/CARTRIDGE | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO DPI POW 64MCG | TREPROSTINIL INH POWDER 64 MCG/CARTRIDGE | Tier 2 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO REFIL SOL 0.6MG/ML | TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML | Tier 2 | X | | | X |
| Respiratory Tract/Pulmonary Agents | TYVASO START SOL 0.6MG/ML | TREPROSTINIL INHALATION SOLUTION 0.6 MG/ML | Tier 2 | X | | | X |
| Respiratory Tract/Pulmonary Agents | UPTRAVI TAB 1000MCG | SELEXIPAG TAB 1000 MCG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | UPTRAVI TAB 1200MCG | SELEXIPAG TAB 1200 MCG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | UPTRAVI TAB 1400MCG | SELEXIPAG TAB 1400 MCG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | UPTRAVI TAB 1600MCG | SELEXIPAG TAB 1600 MCG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | UPTRAVI TAB 200MCG | SELEXIPAG TAB 200 MCG | Tier 3 | X | X | | X |

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|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents | UPTRAVI TAB 400MCG | SELEXIPAG TAB 400 MCG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | UPTRAVI TAB 600MCG | SELEXIPAG TAB 600 MCG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | UPTRAVI TAB 800MCG | SELEXIPAG TAB 800 MCG | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | UPTRAVI PACK TAB 200/800 | SELEXIPAG TAB THERAPY PACK 200 MCG (140) & 800 MCG (60) | Tier 3 | X | X | | X |
| Respiratory Tract/Pulmonary Agents | VENTAVIS SOL 10MCG/ML | ILOPROST INHALATION SOLUTION 10 MCG/ML | Tier 2 | X | | | X |
| Respiratory Tract/Pulmonary Agents | VENTAVIS SOL 20MCG/ML | ILOPROST INHALATION SOLUTION 20 MCG/ML | Tier 2 | X | | | X |
| Respiratory Tract/Pulmonary Agents | VENTOLIN HFA AER | ALBUTEROL SULFATE INHAL AERO 108 MCG/ACT (90MCG BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | VIRAZOLE INH 6GM | RIBAVIRIN FOR INHAL SOLN 6 GM | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | XOPENEX NEB 0.31MG | LEVALBUTEROL HCL SOLN NEBU 0.31 MG/3ML (BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | XOPENEX NEB 0.63MG | LEVALBUTEROL HCL SOLN NEBU 0.63 MG/3ML (BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | XOPENEX NEB 1.25/3ML | LEVALBUTEROL HCL SOLN NEBU 1.25 MG/3ML (BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | XOPENEX CONC NEB 1.25/0.5 | LEVALBUTEROL HCL SOLN NEBU CONC 1.25 MG/0.5ML (BASE EQUIV) | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents | XOPENEX HFA AER | LEVALBUTEROL TARTRATE INHAL AEROSOL 45 MCG/ACT (BASE EQUIV) | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | YUPELRI SOL | REVEFENACIN INHALATION SOLUTION 175 MCG/3ML | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents | ZAFIRLUKAST TAB 10MG | ZAFIRLUKAST TAB 10 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ZAFIRLUKAST TAB 20MG | ZAFIRLUKAST TAB 20 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents | ZETONNA AER 37MCG | CICLESONIDE NASAL AEROSOL SOLN 37 MCG/ACT (50 MCG/ VALVE) | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents | ZILEUTON ER TAB 600MG | ZILEUTON TAB ER 12HR 600 MG | Tier 1 | | | X | |
| Respiratory Tract/Pulmonary Agents | ZYFLO TAB 600MG | ZILEUTON TAB 600 MG | Tier 3 | | | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | ADRENALIN SOL 1:1000 | EPINEPHRINE HCL NASAL SOLN 0.1% | Tier 2 | | | | |

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| Therapeutic class | Medication name | Generic medication name | Drug tier* | PA** | Supply limit | Step therapy | Specialty |
|--|--------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | ADVAIR DISKU AER 100/50 | FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | ADVAIR DISKU AER 250/50 | FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | ADVAIR DISKU AER 500/50 | FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | ADVAIR HFA AER 115/21 | FLUTICASONE-SALMETEROL INHAL AEROSOL 115-21 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | ADVAIR HFA AER 230/21 | FLUTICASONE-SALMETEROL INHAL AEROSOL 230-21 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | ADVAIR HFA AER 45/21 | FLUTICASONE-SALMETEROL INHAL AEROSOL 45-21 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | AIRDUO RESPI INH 113-14 | FLUTICASONE-SALMETEROL AER POWDER BA 113-14 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | AIRDUO RESPI INH 232-14 | FLUTICASONE-SALMETEROL AER POWDER BA 232-14 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | AIRDUO RESPI INH 55-14 | FLUTICASONE-SALMETEROL AER POWDER BA 55-14 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | ANORO ELLIPT AER 62.5-25 | UMECLIDINIUM-VILANTEROL AERO POWD BA 62.5-25 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BENZONATATE CAP 100MG | BENZONATATE CAP 100 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BENZONATATE CAP 150MG | BENZONATATE CAP 150 MG | Tier 1 | | | | |

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|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BENZONATATE CAP 200MG | BENZONATATE CAP 200 MG | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BEVESPI AER 9-4.8MCG | GLYCOPYRROLATE-FORMOTEROL FUMARATE AEROSOL 9-4.8 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BPM-PSE-DM SYP 2-30-10 | PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BREO ELLIPTA INH 100-25 | FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 100-25 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BREO ELLIPTA INH 200-25 | FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 200-25 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BREO ELLIPTA INH 50-25MCG | FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 50-25 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BREYNA AER 160/4.5 | BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 160-4.5 MCG/ACT | Tier 1 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BREYNA AER 80/4.5 | BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 80-4.5 MCG/ACT | Tier 1 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BREZTRI AERO AER SPHERE | BUDESONIDE-GLYCOPYRROLATE-FORMOTEROL AERS 160-9-4.8 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BROM/PSE/DM SYP | PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BROM/PSE/DM SYP 2/30/10 | PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BROM/PSE/DM SYP 2-30-10 | PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML | Tier 1 | | | | |

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|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BROMFED DM SOL 2-30-10 | PSEUDOEPHED-BROMPHEN-DM SYRUP 30-2-10 MG/5ML | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BUDES/FORMOT AER 160-4.5 | BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 160-4.5 MCG/ACT | Tier 1 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | BUDES/FORMOT AER 80-4.5 | BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 80-4.5 MCG/ACT | Tier 1 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | CODEINE/GG SOL 10-100/5 | GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | COMBIVENT AER 20-100 | IPRATROPIUM-ALBUTEROL INHAL AEROSOL SOLN 20-100 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | DEXTROMETHOR CRY MONOHYDR | DEXTROMETHORPHAN HBR CRYSTALS | Tier 3 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | DEXTROMETHOR POW HBR | DEXTROMETHORPHAN HBR POWDER | Tier 3 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | DEXTROMETHOR POW HBR MONO | DEXTROMETHORPHAN HBR POWDER | Tier 3 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | DUAKLIR AER 400/12 | ACLIDINIUM BR-FORMOTEROL FUM AERO POW BR ACT 400-12 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | DULERA AER 100-5MCG | MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 100-5 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | DULERA AER 200-5MCG | MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 200-5 MCG/ACT | Tier 3 | | X | X | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | DULERA AER 50-5MCG | MOMETASONE FUROATE-FORMOTEROL FUMARATE AEROSOL 50-5 MCG/ACT | Tier 3 | | X | X | |

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|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | EPINEPHRINE SOL 30/30ML | EPINEPHRINE HCL NASAL SOLN 0.1% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME AER 100/50 | FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME AER 115-21 | FLUTICASONE-SALMETEROL INHAL AEROSOL 115-21 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME AER 230-21 | FLUTICASONE-SALMETEROL INHAL AEROSOL 230-21 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME AER 250/50 | FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME AER 45-21MCG | FLUTICASONE-SALMETEROL INHAL AEROSOL 45-21 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME AER 500/50 | FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME INH 113/14 | FLUTICASONE-SALMETEROL AER POWDER BA 113-14 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME INH 232/14 | FLUTICASONE-SALMETEROL AER POWDER BA 232-14 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/SALME INH 55/14 | FLUTICASONE-SALMETEROL AER POWDER BA 55-14 MCG/ACT | Tier 2 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/VILAN INH 100-25 | FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 100-25 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | FLUTIC/VILAN INH 200-25 | FLUTICASONE FUROATE-VILANTEROL AERO POWD BA 200-25 MCG/ACT | Tier 3 | | X | | |

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|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | G TUSSIN AC LIQ 100-10/5 | GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | GG/CODEINE SOL 100-10/5 | GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | GG/CODEINE SOL 200-20MG | GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | GUAIATUSS AC SYP 100-10/5 | GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | GUAIFENESIN SYP 100-10/5 | GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | HYD POL/CPM SUS 10-8/5ML | HYDROCOD POLST-CHLORPHEN POLST ER SUSP 10-8 MG/5ML | Tier 1 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | HYPERSAL NEB 3.5% | SODIUM CHLORIDE SOLN NEBU 3.5% | Tier 2 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | HYPERSAL NEB 7% | SODIUM CHLORIDE SOLN NEBU 7% | Tier 2 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | IPRATROPIUM/ SOL ALBUTER | IPRATROPIUM-ALBUTEROL NEBU SOLN 0.5-2.5(3) MG/3ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | MAXI-TUSS AC SOL | GUAIFENESIN-CODEINE SOLN 100-10 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | NEBUSAL NEB 3% | SODIUM CHLORIDE SOLN NEBU 3% | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | PROMETH VC/ SYP CODEINE | PROMETHAZINE-PHENYLEPHRINE-CODEINE SYRUP 6.25-5-10 MG/5ML | Tier 1 | X | | | |

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|--|-------------------------|---|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | PROMETH/COD SOL 6.25-10 | PROMETHAZINE W/ CODEINE SYRUP 6.25-10 MG/5ML | Tier 1 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | PROMETH/COD SYP 6.25-10 | PROMETHAZINE W/ CODEINE SYRUP 6.25-10 MG/5ML | Tier 1 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | PROMETH/PE/ SYP CODEINE | PROMETHAZINE-PHENYLEPHRINE-CODEINE SYRUP 6.25-5-10 MG/5ML | Tier 1 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | PROMETHAZINE SOL DM | PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | PROMETHAZINE SYP DM | PROMETHAZINE-DM SYRUP 6.25-15 MG/5ML | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | PSEUDOEPHEDR CRY HCL | PSEUDOEPHEDRINE HCL CRYSTALS | Tier 3 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | PULMOSAL NEB 7% | SODIUM CHLORIDE SOLN NEBU 7% | Tier 2 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | SOD CHLORIDE NEB 0.9% | SODIUM CHLORIDE SOLN NEBU 0.9% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | SODIUM CHLOR NEB 10% | SODIUM CHLORIDE SOLN NEBU 10% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | SODIUM CHLOR NEB 3% | SODIUM CHLORIDE SOLN NEBU 3% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | SODIUM CHLOR NEB 7% | SODIUM CHLORIDE SOLN NEBU 7% | Tier 1 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | STIOLTO AER 2.5-2.5 | TIOTROPIUM BR-OLODATEROL INHAL AERO SOLN 2.5-2.5 MCG/ACT | Tier 2 | | X | | |

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|--|--------------------------|--|------------|------|--------------|--------------|-----------|
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | SYMBICORT AER 160-4.5 | BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 160-4.5 MCG/ACT | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | SYMBICORT AER 80-4.5 | BUDESONIDE-FORMOTEROL FUMARATE DIHYD AEROSOL 80-4.5 MCG/ACT | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | TRELEGY AER 100MCG | FLUTICASONE-UMECLIDINIUM-VILANTEROL AEPB 100-62.5-25 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | TRELEGY AER 200MCG | FLUTICASONE-UMECLIDINIUM-VILANTEROL AEPB 200-62.5-25 MCG/ACT | Tier 3 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | TUXARIN ER TAB 54.3-8MG | CODEINE PHOS-CHLORPHENIRAMINE MALEATE TAB ER 12HR 54.3-8 MG | Tier 3 | X | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | TUZISTRA XR SUS | CODEINE POLIST-CHLORPHEN POLIST ER SUSP 14.7-2.8 MG/5ML | Tier 3 | | | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | WIXELA INHUB AER 100/50 | FLUTICASONE-SALMETEROL AER POWDER BA 100-50 MCG/ACT | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | WIXELA INHUB AER 250/50 | FLUTICASONE-SALMETEROL AER POWDER BA 250-50 MCG/ACT | Tier 1 | | X | | |
| Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions | WIXELA INHUB AER 500/50 | FLUTICASONE-SALMETEROL AER POWDER BA 500-50 MCG/ACT | Tier 1 | | X | | |
| Sedatives/Hypnotics - Drugs for Sedation and Sleep | XYWAV SOL 0.5GM/ML | CALCIUM, MAG, POTASSIUM, & SOD OXYBATES ORAL SOLN 500 MG/ML | Tier 3 | X | X | | X |
| Skeletal Muscle Relaxants | AMRIX CAP 15MG | CYCLOBENZAPRINE HCL CAP ER 24HR 15 MG | Tier 3 | | | X | |
| Skeletal Muscle Relaxants | AMRIX CAP 30MG | CYCLOBENZAPRINE HCL CAP ER 24HR 30 MG | Tier 3 | | | X | |
| Skeletal Muscle Relaxants | CARISOPRODOL TAB 250MG | CARISOPRODOL TAB 250 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | CARISOPRODOL TAB 350MG | CARISOPRODOL TAB 350 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | CARISOPRODOL TAB ASA/COD | CARISOPRODOL W/ ASPIRIN & CODEINE TAB 200-325-16 MG | Tier 1 | | | | |

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|---------------------------|---------------------------|---|------------|------|--------------|--------------|-----------|
| Skeletal Muscle Relaxants | CHLORZOXAZON TAB 250MG | CHLORZOXAZONE TAB 250 MG | Tier 1 | | | X | |
| Skeletal Muscle Relaxants | CHLORZOXAZON TAB 375MG | CHLORZOXAZONE TAB 375 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | CHLORZOXAZON TAB 500MG | CHLORZOXAZONE TAB 500 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | CHLORZOXAZON TAB 750MG | CHLORZOXAZONE TAB 750 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | CYCLOBENZAPR CAP 15MG ER | CYCLOBENZAPRINE HCL CAP ER 24HR 15 MG | Tier 1 | | | X | |
| Skeletal Muscle Relaxants | CYCLOBENZAPR CAP 30MG ER | CYCLOBENZAPRINE HCL CAP ER 24HR 30 MG | Tier 1 | | | X | |
| Skeletal Muscle Relaxants | CYCLOBENZAPR CRE 20MG/GM | *CYCLOBENZAPRINE HCL TD CREAM 20 MG/GM (COMPOUND KIT)** | Tier 3 | X | | | |
| Skeletal Muscle Relaxants | CYCLOBENZAPR TAB 10MG | CYCLOBENZAPRINE HCL TAB 10 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | CYCLOBENZAPR TAB 5MG | CYCLOBENZAPRINE HCL TAB 5 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | CYCLOBENZAPR TAB 7.5MG | CYCLOBENZAPRINE HCL TAB 7.5 MG | Tier 1 | | | X | |
| Skeletal Muscle Relaxants | CYCLOPHENE CRE RAPIDPAQ | *CYCLOBENZAPRINE HCL TD CREAM 5% (COMPOUND KIT)** | Tier 3 | X | | | |
| Skeletal Muscle Relaxants | FEXMID TAB 7.5MG | CYCLOBENZAPRINE HCL TAB 7.5 MG | Tier 3 | | | X | |
| Skeletal Muscle Relaxants | LORZONE TAB 375MG | CHLORZOXAZONE TAB 375 MG | Tier 3 | | | | |
| Skeletal Muscle Relaxants | LORZONE TAB 750MG | CHLORZOXAZONE TAB 750 MG | Tier 3 | | | | |
| Skeletal Muscle Relaxants | METAXALONE TAB 400MG | METAXALONE TAB 400 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | METAXALONE TAB 800MG | METAXALONE TAB 800 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | METHOCARBAM TAB 500MG | METHOCARBAMOL TAB 500 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | METHOCARBAM TAB 750MG | METHOCARBAMOL TAB 750 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | METHOCARBAMO TAB 1000MG | METHOCARBAMOL TAB 1000 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | NORGESIC TAB | ORPHENADRINE W/ ASPIRIN & CAFFEINE TAB 25-385-30 MG | Tier 3 | | | X | |
| Skeletal Muscle Relaxants | NORGESIC TAB FORTE | ORPHENADRINE W/ ASPIRIN & CAFFEINE TAB 50-770-60 MG | Tier 3 | | | X | |
| Skeletal Muscle Relaxants | ORPH/ASA/CAF TAB | ORPHENADRINE W/ ASPIRIN & CAFFEINE TAB 25-385-30 MG | Tier 1 | | | X | |
| Skeletal Muscle Relaxants | ORPHENADRINE POW CITRATE | ORPHENADRINE CITRATE POWDER | Tier 3 | X | | | |
| Skeletal Muscle Relaxants | ORPHENADRINE TAB 100MG ER | ORPHENADRINE CITRATE TAB ER 12HR 100 MG | Tier 1 | | | | |
| Skeletal Muscle Relaxants | ORPHENGESIC TAB FORTE | ORPHENADRINE W/ ASPIRIN & CAFFEINE TAB 50-770-60 MG | Tier 3 | | | X | |

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|---|--------------------------|--|------------|------|--------------|--------------|-----------|
| Skeletal Muscle Relaxants | SOMA TAB 250MG | CARISOPRODOL TAB 250 MG | Tier 3 | | | X | |
| Skeletal Muscle Relaxants | SOMA TAB 350MG | CARISOPRODOL TAB 350 MG | Tier 3 | | | X | |
| Skeletal Muscle Relaxants | VANADOM TAB 350MG | CARISOPRODOL TAB 350 MG | Tier 3 | | | X | |
| Skeletal Muscle Relaxants - Drugs to Treat Muscle Tension and Spasm | BACLOFEN CRE 1% | *BACLOFEN CREAM 1% (COMPOUND KIT)** | Tier 3 | X | | | |
| Skeletal Muscle Relaxants - Drugs to Treat Muscle Tension and Spasm | TABRADOL SUS 1MG/ML | *CYCLOBENZAPRINE HCL W/ MSM ORAL SUSP 1 MG/ML (CMPD KIT)** | Tier 3 | X | | | |
| Skeletal Muscle Relaxants - Drugs to Treat Muscle Tension and Spasm | TABRADOL SUS RAPIDPAQ | *CYCLOBENZAPRINE HCL W/ MSM ORAL SUSP 1 MG/ML (CMPD KIT)** | Tier 3 | X | | | |
| Sleep Disorder Agents | AMBIEN TAB 10MG | ZOLPIDEM TARTRATE TAB 10 MG | Tier 3 | | | X | |
| Sleep Disorder Agents | AMBIEN TAB 5MG | ZOLPIDEM TARTRATE TAB 5 MG | Tier 3 | | | X | |
| Sleep Disorder Agents | AMBIEN CR TAB 12.5MG | ZOLPIDEM TARTRATE TAB ER 12.5 MG | Tier 3 | | | X | |
| Sleep Disorder Agents | AMBIEN CR TAB 6.25MG | ZOLPIDEM TARTRATE TAB ER 6.25 MG | Tier 3 | | | X | |
| Sleep Disorder Agents | ARMODAFINIL TAB 150MG | ARMODAFINIL TAB 150 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | ARMODAFINIL TAB 200MG | ARMODAFINIL TAB 200 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | ARMODAFINIL TAB 250MG | ARMODAFINIL TAB 250 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | ARMODAFINIL TAB 50MG | ARMODAFINIL TAB 50 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | BELSOMRA TAB 10MG | SUVOREXANT TAB 10 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | BELSOMRA TAB 15MG | SUVOREXANT TAB 15 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | BELSOMRA TAB 20MG | SUVOREXANT TAB 20 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | BELSOMRA TAB 5MG | SUVOREXANT TAB 5 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | DAYVIGO TAB 10MG | LEMBorexant TAB 10 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | DAYVIGO TAB 5MG | LEMBorexant TAB 5 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | DOXEPIN TAB 3MG | DOXEPIN HCL (SLEEP) TAB 3 MG (BASE EQUIV) | Tier 1 | | X | | |
| Sleep Disorder Agents | DOXEPIN TAB 6MG | DOXEPIN HCL (SLEEP) TAB 6 MG (BASE EQUIV) | Tier 1 | | X | | |
| Sleep Disorder Agents | EDLUAR SUB 10MG | ZOLPIDEM TARTRATE SL TAB 10 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | EDLUAR SUB 5MG | ZOLPIDEM TARTRATE SL TAB 5 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | ESTAZOLAM TAB 1MG | ESTAZOLAM TAB 1 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ESTAZOLAM TAB 2MG | ESTAZOLAM TAB 2 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ESZOPICLONE TAB 1MG | ESZOPICLONE TAB 1 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ESZOPICLONE TAB 2MG | ESZOPICLONE TAB 2 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ESZOPICLONE TAB 3MG | ESZOPICLONE TAB 3 MG | Tier 1 | | | | |
| Sleep Disorder Agents | FLURAZEPAM CAP 15MG | FLURAZEPAM HCL CAP 15 MG | Tier 1 | | | | |
| Sleep Disorder Agents | FLURAZEPAM CAP 30MG | FLURAZEPAM HCL CAP 30 MG | Tier 1 | | | | |
| Sleep Disorder Agents | HALCION TAB 0.25MG | TRIAZOLAM TAB 0.25 MG | Tier 3 | | | | |
| Sleep Disorder Agents | HETLIOZ CAP 20MG | TASIMELTEON CAPSULE 20 MG | Tier 3 | X | X | | X |

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|-----------------------|-----------------------------------|--|------------|------|--------------|--------------|-----------|
| Sleep Disorder Agents | HETLIOZ LQ SUS 4MG/ML | TASIMELTEON ORAL SUSP 4 MG/ML | Tier 3 | X | X | | X |
| Sleep Disorder Agents | LUMRYZ PAK 6GM | SODIUM OXYBATE PACK FOR ORAL ER SUSP 6 GM | Tier 3 | X | X | | X |
| Sleep Disorder Agents | LUMRYZ PAK 7.5GM | SODIUM OXYBATE PACK FOR ORAL ER SUSP 7.5 GM | Tier 3 | X | X | | X |
| Sleep Disorder Agents | LUMRYZ PAK 9GM | SODIUM OXYBATE PACK FOR ORAL ER SUSP 9 GM | Tier 3 | X | X | | X |
| Sleep Disorder Agents | LUMRYZ PKG 4.5GM | SODIUM OXYBATE PACK FOR ORAL ER SUSP 4.5 GM | Tier 3 | X | X | | X |
| Sleep Disorder Agents | LUNESTA TAB 1MG | ESZOPICLONE TAB 1 MG | Tier 3 | | | X | |
| Sleep Disorder Agents | LUNESTA TAB 2MG | ESZOPICLONE TAB 2 MG | Tier 3 | | | X | |
| Sleep Disorder Agents | LUNESTA TAB 3MG | ESZOPICLONE TAB 3 MG | Tier 3 | | | X | |
| Sleep Disorder Agents | MODAFINIL TAB 100MG | MODAFINIL TAB 100 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | MODAFINIL TAB 200MG | MODAFINIL TAB 200 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | NUVIGIL TAB 150MG | ARMODAFINIL TAB 150 MG | Tier 3 | | X | X | |
| Sleep Disorder Agents | NUVIGIL TAB 200MG | ARMODAFINIL TAB 200 MG | Tier 3 | | X | X | |
| Sleep Disorder Agents | NUVIGIL TAB 250MG | ARMODAFINIL TAB 250 MG | Tier 3 | | X | X | |
| Sleep Disorder Agents | NUVIGIL TAB 50MG | ARMODAFINIL TAB 50 MG | Tier 3 | | X | X | |
| Sleep Disorder Agents | PROVIGIL TAB 100MG | MODAFINIL TAB 100 MG | Tier 3 | | X | X | |
| Sleep Disorder Agents | PROVIGIL TAB 200MG | MODAFINIL TAB 200 MG | Tier 3 | | X | X | |
| Sleep Disorder Agents | RAMELTEON TAB 8MG | RAMELTEON TAB 8 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | RESTORIL CAP 15MG | TEMAZEPAM CAP 15 MG | Tier 3 | | | | |
| Sleep Disorder Agents | RESTORIL CAP 22.5MG | TEMAZEPAM CAP 22.5 MG | Tier 3 | | | | |
| Sleep Disorder Agents | RESTORIL CAP 30MG | TEMAZEPAM CAP 30 MG | Tier 3 | | | | |
| Sleep Disorder Agents | RESTORIL CAP 7.5MG | TEMAZEPAM CAP 7.5 MG | Tier 3 | | | | |
| Sleep Disorder Agents | ROZEREM TAB 8MG | RAMELTEON TAB 8 MG | Tier 3 | | X | X | |
| Sleep Disorder Agents | SILENOR TAB 3MG | DOXEPIN HCL (SLEEP) TAB 3 MG (BASE EQUIV) | Tier 3 | | X | | |
| Sleep Disorder Agents | SILENOR TAB 6MG | DOXEPIN HCL (SLEEP) TAB 6 MG (BASE EQUIV) | Tier 3 | | X | | |
| Sleep Disorder Agents | SOD OXYBATE SOL 500MG/ML | SODIUM OXYBATE ORAL SOLUTION 500 MG/ML | Tier 3 | X | X | | X |
| Sleep Disorder Agents | SOD OXYBATE SOL 500MG/ML (Amneal) | SODIUM OXYBATE ORAL SOLUTION 500 MG/ML | Tier 3 | X | X | X | X |
| Sleep Disorder Agents | SUNOSI TAB 150MG | SOLRIAMFETOL HCL TAB 150 MG (BASE EQUIV) | Tier 2 | X | X | | |
| Sleep Disorder Agents | SUNOSI TAB 75MG | SOLRIAMFETOL HCL TAB 75 MG (BASE EQUIV) | Tier 2 | X | X | | |
| Sleep Disorder Agents | TASIMELTEON CAP 20MG | TASIMELTEON CAPSULE 20 MG | Tier 1 | X | X | | X |
| Sleep Disorder Agents | TEMAZEPAM CAP 15MG | TEMAZEPAM CAP 15 MG | Tier 1 | | | | |
| Sleep Disorder Agents | TEMAZEPAM CAP 22.5MG | TEMAZEPAM CAP 22.5 MG | Tier 1 | | | | |
| Sleep Disorder Agents | TEMAZEPAM CAP 30MG | TEMAZEPAM CAP 30 MG | Tier 1 | | | | |
| Sleep Disorder Agents | TEMAZEPAM CAP 7.5MG | TEMAZEPAM CAP 7.5 MG | Tier 1 | | | | |
| Sleep Disorder Agents | TRIAZOLAM TAB 0.125MG | TRIAZOLAM TAB 0.125 MG | Tier 1 | | | | |
| Sleep Disorder Agents | TRIAZOLAM TAB 0.25MG | TRIAZOLAM TAB 0.25 MG | Tier 1 | | | | |
| Sleep Disorder Agents | WAKIX TAB 17.8MG | PITOLISANT HCL TAB 17.8 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |

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|--|---------------------------|---|------------|------|--------------|--------------|-----------|
| Sleep Disorder Agents | WAKIX TAB 4.45MG | PITOLISANT HCL TAB 4.45 MG (BASE EQUIVALENT) | Tier 3 | X | X | | X |
| Sleep Disorder Agents | XYREM SOL 500MG/ML | SODIUM OXYBATE ORAL SOLUTION 500 MG/ML | Tier 3 | X | X | X | X |
| Sleep Disorder Agents | ZALEPLON CAP 10MG | ZALEPLON CAP 10 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ZALEPLON CAP 5MG | ZALEPLON CAP 5 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ZOLPIDEM TAB 10MG | ZOLPIDEM TARTRATE TAB 10 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ZOLPIDEM TAB 5MG | ZOLPIDEM TARTRATE TAB 5 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ZOLPIDEM ER TAB 12.5MG | ZOLPIDEM TARTRATE TAB ER 12.5 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ZOLPIDEM ER TAB 6.25MG | ZOLPIDEM TARTRATE TAB ER 6.25 MG | Tier 1 | | | | |
| Sleep Disorder Agents | ZOLPIDEM TAR CAP 7.5MG | ZOLPIDEM TARTRATE CAP 7.5 MG | Tier 3 | | X | | |
| Sleep Disorder Agents | ZOLPIDEM TAR SUB 1.75MG | ZOLPIDEM TARTRATE SL TAB 1.75 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | ZOLPIDEM TAR SUB 3.5MG | ZOLPIDEM TARTRATE SL TAB 3.5 MG | Tier 1 | | X | | |
| Sleep Disorder Agents | ZOLPIMIST SPR 5MG | ZOLPIDEM TARTRATE ORAL SPRAY 5 MG/ACT | Tier 3 | | X | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | ADC/FLUORIDE DRO 0.5MG | *PEDIATRIC VITAMINS ACD W/ FLUORIDE SOLN 0.5 MG/ML*** | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | ASCORBIC ACD POW | *ASCORBIC ACID ORAL POWDER*** | Tier 1 | X | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | ATABEX EC TAB 29-1MG | *PRENATAL VIT W/ DSS-IRON CARBONYL-FA TAB DR 29-1 MG*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | CYANOCOBAL POW | CYANOCOBALAMIN (BULK) POWDER | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | CYANOCOBALAM CRY | CYANOCOBALAMIN (BULK) CRYSTALS | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | CYANOCOBALAM INJ 10000MCG | CYANOCOBALAMIN INJ 1000 MCG/ML | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | CYANOCOBALAM INJ 1000MCG | CYANOCOBALAMIN INJ 1000 MCG/ML | Tier 1 | | | | |

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|--|---------------------------|--|------------|------|--------------|--------------|-----------|
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | CYANOCOBALAM INJ 30000MCG | CYANOCOBALAMIN INJ 1000 MCG/ML | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | CYANOCOBALAM SOL 2000MCG | CYANOCOBALAMIN INJ 2000 MCG/ML | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | CYANOCOBALAM SPR 500MCG | CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | DODEX INJ | CYANOCOBALAMIN INJ 1000 MCG/ML | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | DRISDOL CAP 50000UNT | ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT) | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | EFFER-K TAB 25MEQ EF | POTASSIUM BICARBONATE EFFER TAB 25 MEQ | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | ERGOCAL CAP 2500UNIT | ERGOCALCIFEROL CAP 62.5 MCG (2500 UNIT) | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | INATAL GT TAB | *PRENATAL VIT W/ DSS-IRON CARBONYL-FA TAB 90-1 MG*** | Tier 2 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | ISOLEUCINE PAK 50MG | ISOLEUCINE ORAL POWDER PACKET 50 MG | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | ISOLEUCINE POW 1000 | ISOLEUCINE ORAL POWDER PACKET 1 GM | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | K/NA CITRATE SOL CITR ACD | POT & SOD CITRATES W/ CIT AC SOLN 550-500-334 MG/5ML | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | KLOR-CON/EF TAB 25MEQ FR | POTASSIUM BICARBONATE EFFER TAB 25 MEQ | Tier 1 | | | | |

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|--|-----------------------|--|------------|------|--------------|--------------|-----------|
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | K-PRIME TAB 25MEQ EF | POTASSIUM BICARBONATE EFFER TAB 25 MEQ | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | L-GLUTAMINE POW | GLUTAMINE POWDER (BULK) | Tier 3 | X | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | L-ISOLEUCINE POW | ISOLEUCINE POWDER | Tier 3 | X | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | L-LYSINE TAB 500MG | LYSINE TAB 500 MG | Tier 1 | X | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | L-TYROSINE CAP 500MG | TYROSINE CAP 500 MG | Tier 1 | X | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | L-TYROSINE CAP 500MG | TYROSINE CAP 500 MG | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | NASCOBAL SPR 500MCG | CYANOCOBALAMIN NASAL SPRAY 500 MCG/0.1ML | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | OBSTETRIX EC TAB | *PRENATAL VIT W/ DSS-IRON CARBONYL-FA TAB 29-1 MG*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PHENYLALANIN PAK 50MG | PHENYLALANINE PACKET 50 MG | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRENA 1 TRUE MIS | *PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK* | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRISMASOL SOL 0/0/1.2 | *BICARB 32 MEQ/L SOLN WITH MG 1.2 MEQ/L (CRRT)*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRISMASOL SOL 0/2.5 | *BICARB 32 MEQ/L-DEXT SOLN WITH CA 2.5 MEQ/L (CRRT)*** | Tier 3 | | | | |

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| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRISMASOL SOL 2/0 | *BICARB 32 MEQ/L-DEXT SOLN WITH K 2 MEQ/L (CRRT)*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRISMASOL SOL 2/3.5 | *BICARB 32 MEQ/L-DEXT SOLN WITH K-CA 2-3.5 MEQ/L (CRRT)** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRISMASOL SOL 4/0/1.2 | *BICARB 32 MEQ/L-DEXT SOLN WITH K-MG 4-1.2 MEQ/L (CRRT)** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRISMASOL SOL 4/2.5 | *BICARB 32 MEQ/L-DEXT SOLN WITH K-CA 4-2.5 MEQ/L (CRRT)** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRISMASOL SOL B22GK4/0 | *BICARB 22 MEQ/L-DEXT SOLN WITH K 4 MEQ/L (CRRT)*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PRO-STAT LIQ FIBER | *AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PROTEINEX LIQ | *AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PROTEINEX LIQ COC PINE | *AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PROTEINEX LIQ P100 | *AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PROTEINEX LIQ P18 | *AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | PROTEINEX-18 LIQ LEM/ LIME | *AMINO ACIDS-PROTEIN HYDROLYSATE LIQUID*** | Tier 3 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | SM L-LYSINE TAB 500MG | LYSINE TAB 500 MG | Tier 1 | X | | | |

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| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | TAURINE CAP 500MG | TAURINE CAP 500 MG | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | TRICITRATES SOL | POT & SOD CITRATES W/ CIT AC SOLN 550-500-334 MG/5ML | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | TRI-VIT/FLUO DRO 0.25MG | *PEDIATRIC VITAMINS ACD W/ FLUORIDE SOLN 0.25 MG/ML*** | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | TRI-VIT/FLUO DRO 0.5MG | *PEDIATRIC VITAMINS ACD W/ FLUORIDE SOLN 0.5 MG/ML*** | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | TYROSINE PAK 1000MG | TYROSINE ORAL POWDER PACKET 1000 MG | Tier 1 | X | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | VIT A/C/D/FL DRO 0.25MG | *PEDIATRIC VITAMINS ACD W/ FLUORIDE SOLN 0.25 MG/ML*** | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | VITAMIN C POW | *ASCORBIC ACID ORAL POWDER*** | Tier 1 | X | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | VITAMIN C TAB 500MG | ASCORBIC ACID TAB 500 MG | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | VITAMIN D CAP 1.25MG | ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT) | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | VITAMIN D CAP 50000 | ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT) | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | VITAMIN D CAP 50000UNT | ERGOCALCIFEROL CAP 1.25 MG (50000 UNIT) | Tier 1 | | | | |
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | VITAMIN E POW ACETATE | VITAMIN E POWDER | Tier 3 | X | | | |

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|--|-----------------|--|------------|------|--------------|--------------|-----------|
| Therapeutic Nutrients/ Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies | VITATRUE MIS | *PRENAT W/O A W/FE CHEL-FA TAB 30-1.4 MG & DHA CAP 300MG PK* | Tier 3 | | | | |

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