

# 2024 Formulary

Effective January 1, 2024



# Formulary Introduction

## FORMULARY

The Ambetter from NH Health Families Formulary, or Prescription Drug List, is a guide to available brand and generic drugs that are approved by the Food and Drug Administration (FDA) and covered through your prescription drug benefit. Generic drugs have the same active ingredients as their brand name counterparts and should be considered the first line of treatment. The FDA requires generics to be safe and work the same as brand name drugs. If there is no generic available, there may be more than one brand name drug to treat a condition. Preferred brand name drugs are listed on Tier 2 to help identify brand drugs that are clinically appropriate, safe, and cost-effective treatment options, if a generic medication on the formulary is not suitable for your condition.

Please note, the Formulary is not meant to be a complete list of the drugs covered under your prescription benefit. Not all dosage forms or strengths of a drug may be covered. This list is periodically reviewed and updated and may be subject to change. Drugs may be added or removed, or additional requirements may be added in order to approve continued usage of a specific drug.

Specific prescription benefit plan designs may not cover certain products or categories, regardless of their appearance in this document. Please check your benefits for coverage limitations and your share of cost for your drugs.

### Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are lower case.

Drugs are covered under different copay tiers depending on your benefit:

- Tier 0** - No copayment for those drugs that are used for prevention and are mandated by the Affordable Care Act. Select oral contraceptives, vitamin D, folic acid for women of child bearing age, over-the-counter (OTC) aspirin, and smoking cessation products may be covered under this tier. Certain age limits may apply.
- Tier 1<sub>A</sub>** - Lowest copayment for select drugs that offer the greatest value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.
- Tier 1<sub>B</sub>** - Low copayment for those drugs that offer great value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.
- Tier 2** - Medium copayment covers brand name drugs that are generally more affordable, or may be preferred compared to other drugs to treat the same conditions.
- Tier 3** - High copayment covers higher cost brand name and non-preferred generic drugs. This tier may also cover non-specialty drugs that are not on the Prescription Drug List but approval has been granted for coverage.
- Tier 4** - **Highest copayment is for “specialty” drugs used to treat complex, chronic conditions that may require special handling, storage or clinical management.** Prescription drugs covered under the specialty tier may require fulfillment at a pharmacy that participates in Ambetter's "specialty" or "hemophilia" networks. For additional information on which pharmacies are within our "specialty" or "hemophilia" networks, please consult Ambetter website's pharmacy information section.

### Prior Authorization for Non-Formulary Drugs

To obtain prior authorization for a non-formulary drug, your provider must fill out the Prior Authorization form. Services will respond via fax or phone within 24 hours of receipt of all necessary information for urgent requests, and within 72 hours for non-urgent requests, unless state law requires faster response. If the request is disapproved, the notice of disapproval will contain a clear explanation of the specific reasons for disapproving the prior authorization request, or if the request was incomplete, the explanation will identify the missing material information that is necessary to complete the request.

### Formulary Abbreviations:

Abbreviation	Term	What it means
AL	Age Limit	Some drugs are only covered for certain ages.
QL	Quantity Limit	Some drugs are only covered for a certain amount.
PA	Prior Authorization	Your doctor must ask for approval from Ambetter before some drugs will be covered.
ST	Step Therapy	In some cases, you must first try certain drugs before Ambetter covers another drug for your medical condition. For example, if Drug A and Drug B both treat your medical condition, Ambetter may not cover Drug B unless you try Drug A first.
NF	Non-formulary	This product is not covered unless you or your provider request an exception. Alternative medications are listed next to non-covered product
RX/OTC	Prescription and OTC	These drugs are made in both prescription form and Over-the-counter (OTC) form.
SP	Specialty Drug	These products are Specialty Drugs that may have special fill requirements.
SF	Split Fill	Initially, certain medications may only be available in 15-day-supply increments until you are stabilized on the medication. After you have been taking the medication for 90 days, this restriction may no longer apply.

### Opioid Medications:

Medications identified on the formulary by "**New starts limited to 7 day supply**" allow up to two 7 day fills during any 28 day period and up to a total of 28 day non-consecutive supply in any 90 day period. This limit applies cumulatively to all opioid medications filled. For fills exceeding these limits, your providers may submit a Prior Authorization request.

# Introducción al Formulario

## FORMULARIO

El Formulario de Ambetter from NH Health Families, o la Lista de medicamentos recetados, es una guía de los medicamentos de marca y genéricos disponibles que están aprobados por la Administración de Alimentos y Medicamentos (FDA) y que están cubiertos a través de su beneficio de medicamentos recetados. Los medicamentos genéricos tienen los mismos principios activos que los de marca y deben considerarse la primera línea de tratamiento. La FDA exige que los medicamentos genéricos sean seguros y funcionen igual que los medicamentos de marca. Si no hay un genérico disponible, podría haber más de un medicamento de marca para tratar una condición. Los medicamentos de marca preferidos figuran en el nivel 2 para ayudar a identificar los medicamentos de marca que son opciones de tratamiento clínicamente adecuadas, seguras y rentables, si un medicamento genérico del Formulario no es adecuado para su condición.

Tenga en cuenta que el Formulario no pretende ser una lista completa de los medicamentos cubiertos por su beneficio de medicamentos recetados. Es posible que no estén cubiertas todas las formas farmacéuticas o concentraciones de un medicamento. Esta lista se revisa y actualiza periódicamente y puede estar sujeta a cambios. Se pueden agregar o eliminar medicamentos, o se pueden incorporar requisitos adicionales para aprobar el uso continuado de un medicamento específico.

Es posible que determinados diseños de planes de beneficios de medicamentos recetados no cubran algunos productos o categorías, independientemente de que figuren en este documento. Revise sus beneficios para conocer las limitaciones de la cobertura y la parte que le corresponde pagar por sus medicamentos.

Clave de la lista de medicamentos:

Los medicamentos de marca aparecen en MAYÚSCULAS y los medicamentos genéricos aparecen en minúsculas.

Los medicamentos están cubiertos por diferentes niveles de copago en función de su beneficio:

- Nivel 0** - Sin copago para aquellos medicamentos que se usan para prevención y son obligatorios según la Ley de Cuidado de Salud Asequible. Los anticonceptivos orales seleccionados, la vitamina D, el ácido fólico para mujeres en edad fértil, las aspirinas de venta libre (OTC) y los productos para dejar de fumar pueden estar cubiertos en este nivel. Es posible que se apliquen ciertos límites de edad.
- Nivel 1<sub>A</sub>** - El copago más bajo para medicamentos seleccionados que ofrecen el mayor valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 1<sub>B</sub>** - Copago bajo para aquellos medicamentos que ofrecen un gran valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 2** - El copago medio cubre los medicamentos de marca que suelen ser más asequibles o que pueden ser preferidos en comparación con otros medicamentos para tratar las mismas condiciones.
- Nivel 3** - El copago alto cubre los medicamentos de marca de costo más alto y medicamentos genéricos no preferidos. Este nivel también puede cubrir medicamentos no especializados que no figuran en la Lista de medicamentos recetados, pero cuya cobertura ha sido aprobada.
- Nivel 4** - El copago más alto es para medicamentos “de especialidad” usados para tratar condiciones crónicas complejas que pueden requerir una manipulación, almacenamiento o administración clínica especiales. Los medicamentos recetados cubiertos en el nivel de especialidad pueden tener que ser surtidos en una farmacia que participe de las redes de “especialidad” o de “hemofilia” de Ambetter. Para obtener información adicional sobre qué farmacias están dentro de nuestras redes de “especialidad” o “hemofilia”, debe consultar la sección de información farmacéutica del sitio web de Ambetter.

### Autorización previa para medicamentos no incluidos en el Formulario

Para obtener autorización previa para un medicamento no incluido en el Formulario, su proveedor debe completar el formulario de autorización previa. Los servicios responderán por fax o teléfono en un plazo de 24 horas a partir de la recepción de toda la información necesaria para las solicitudes urgentes, y en un plazo de 72 horas en caso de solicitudes no urgentes, a menos que la legislación estatal exija una respuesta más rápida. Si la solicitud es denegada, el aviso de la denegación incluirá una explicación clara de los motivos específicos para denegar la solicitud de autorización previa o, si la autorización estaba incompleta, la explicación identificará la información material faltante necesaria para completar la solicitud.

### Abreviaturas del Formulario:

Abreviatura	Término	Significado
AL	Límite de edad	Algunos medicamentos solo están cubiertos para determinadas edades.
QL	Límite de cantidad	Algunos medicamentos solo están cubiertos para determinadas cantidades.
PA	Autorización previa	Su médico debe solicitar la aprobación de Ambetter antes de que algunos medicamentos tengan cobertura.
ST	Terapia escalonada	En algunos casos, usted primero debe probar un medicamento determinado antes de que Ambetter cubra otro medicamento para su condición médica. Por ejemplo, si tanto el medicamento A como el medicamento B tratan su condición médica, Ambetter podría no cubrir el medicamento B a menos que usted pruebe primero el medicamento A.
NF	No incluido en el Formulario	Este producto no está cubierto a menos que usted o su proveedor soliciten una excepción. Hay medicamentos alternativos que figuran a continuación del producto no cubierto.
RX/OTC	Medicamentos recetados y OTC	Estos medicamentos se fabrican tanto como medicamento recetado como de venta libre (OTC).
SP	Medicamento de especialidad	Estos productos son medicamentos de especialidad que pueden tener requisitos de surtido especiales.
SF	Surtido dividido	Al principio es posible que ciertos medicamentos solo estén disponibles en suministros incrementales cada 15 días hasta que usted se estabilice con el medicamento. Una vez transcurridos 90 días desde que comenzó a tomar este medicamento, es posible que esta restricción ya no se aplique.

### Medicamentos opioides:

Los medicamentos identificados en el Formulario como “**Nuevos pedidos limitados a suministro de 7 días**” permiten hasta dos surtidos de 7 días durante cualquier periodo de 28 días y hasta un total de 28 días no consecutivos en un periodo de 90 días. Este límite se aplica de forma acumulativa a todos los medicamentos opioides surtidos. Para surtidos que superen estos límites, sus proveedores pueden presentar una solicitud de autorización previa.

Drug Name	Drug Tier	Requirements/Limits
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders</b>		
<b>Amphetamines</b>		
<i>amphetamine sulfate TABS</i>	3	PA
<i>amphetamine-dextroamphetamine CP24 3.75 MG-3.75 MG-3.75 MG-3.75 MG</i>	1B	
<i>amphetamine-dextroamphetamine CP24 5 MG-5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG-7.5 MG</i>	1B	QL(2 ea daily)
<i>amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG</i>	1B	QL(1 ea daily)
<i>amphetamine-dextroamphetamine TABS 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 1.875 MG-1.875 MG-1.875 MG, 2.5 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG</i>	1B	QL(3 ea daily)
<i>amphetamine-dextroamphetamine TABS 7.5 MG-7.5 MG-7.5 MG-7.5 MG</i>	1B	QL(2 ea daily)
<i>dextroamphetamine sulfate CP24 5 MG</i>	1B	
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	1B	QL(4 ea daily)
<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	1B	
<i>lisdexamfetamine dimesylate CAPS</i>	1B	QL(1 ea daily); ST
<i>lisdexamfetamine dimesylate CHEW</i>	1B	QL(1 ea daily); ST
<i>methamphetamine hcl</i>	1B	QL(5 ea daily); AL(At least 6 yrs old)
VYVANSE CAPS	3	QL(1 ea daily); ST
<b>Anorexiants Non-Amphetamine</b>		
<i>phendimetrazine tartrate TABS</i>	1B	PA
<i>phentermine hcl CAPS</i>	1B	PA
<b>Anti-Obesity Agents</b>		
CONTRACE	3	QL(4 ea daily); PA
<b>Attention-Deficit/Hyperactivity Disorder (ADHD) Agents</b>		
<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)
<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>clonidine hcl (adhd) TB12</i>	1B	
<i>guanfacine hcl (adhd)</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<b>Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)</b>		
SUNOSI 150 MG	3	QL(1 ea daily); PA
SUNOSI 75 MG	3	QL(2 ea daily); PA
<b>Stimulants - Misc.</b>		
<i>armodafinil</i>	1B	QL(1 ea daily); AL(At least 17 yrs old); PA

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Drug Name	Drug Tier	Requirements/Limits
<i>dexmethylphenidate hcl CP24</i>	1B	QL(1 ea daily)
<i>dexmethylphenidate hcl TABS</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CHEW 10 MG</i>	1B	QL(5 ea daily)
<i>methylphenidate hcl CHEW 5 MG</i>	1B	QL(6 ea daily)
<i>methylphenidate hcl CHEW 2.5 MG</i>	1B	QL(2 ea daily)
<i>methylphenidate hcl CP24 20 MG, 40 MG</i>	1B	AL(At least 6 yrs old)
<i>methylphenidate hcl CP24 10 MG, 60 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24</i>	1B	
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(3 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CPCR</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl SOLN</i>	1B	QL(30 ml daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	1B	QL(5 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TABS 5 MG</i>	1B	QL(6 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 18 MG, 27 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1B	QL(3 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate PTCH</i>	1B	QL(1 ea daily); PA
<i>modafinil 100 MG</i>	1B	QL(1 ea daily); PA
<i>modafinil 200 MG</i>	1B	QL(2 ea daily); PA
<b>ALLERGENIC EXTRACTS/BIOLOGICALS MISC</b>		
Allergenic Extracts		
GRASTEK SUBL	3	PA
<b>AMEBICIDES</b>		
Amebicides		
SOLOSEC	3	PA
<b>AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections</b>		
Aminoglycosides		
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1B	
ARIKAYCE	4	PA
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %</i>	1B	
<i>gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML</i>	1B	
<i>neomycin sulfate TABS</i>	1B	
<i>streptomycin sulfate SOLR</i>	3	
<i>tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML</i>	1B	
<i>tobramycin NEBU</i>	4	QL(280 ml per 56 day(s) retail; 280 ml per 56 days mail); PA
<b>ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions</b>		
Antirheumatic - Enzyme Inhibitors		
RINVOQ TB24	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XELJANZ XR TB24	4	QL(1 ea daily); PA	HADLIMA SOSY	4	QL(0.086 ml daily); PA
XELJANZ SOLN	4	QL(20 ml daily); PA	HADLIMA SOSY	4	QL(0.172 ml daily); PA
XELJANZ TABS 10 MG	4	QL(2 ea daily); PA	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
XELJANZ TABS 5 MG	4	QL(2 ea daily); SP; PA	HUMIRA PEN-CD/UC/HS STARTER PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
Antirheumatic Antimetabolites			HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
METHOTREXATE	4	QL(1.714 ea daily); SP; PA	HUMIRA PEN PNKT	4	QL(0.143 ea daily); PA
Anti-TNF-alpha - Monoclonal Antibodies			HUMIRA PEN PNKT 80 MG/0.8ML	4	QL(0.072 ea daily); PA
ADALIMUMAB-ADAZ SOAJ	4	QL(0.086 ml daily); PA	HUMIRA PEN-PS/UV STARTER PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-ADAZ SOSY	4	QL(0.086 ml daily); PA	HUMIRA PSKT	4	QL(0.143 ea daily); PA
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	SIMPONI ARIA SOLN	4	PA
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	QL(0.215 ea daily); PA	Gold Compounds		
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	RIDAURA	3	QL(3 ea daily)
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	4	QL(0.143 ea daily); PA	Interleukin-1 Blockers		
CYLTEZO AJKT	4	QL(0.215 ea daily); PA	ARCALYST	4	QL(0.286 ea daily); SP; PA
CYLTEZO AJKT	4	QL(0.072 ea daily); PA	Interleukin-6 Receptor Inhibitors		
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 ea daily); PA	KEVZARA SOAJ	4	QL(0.082 ml daily); PA
CYLTEZO PSKT 10 MG/0.2ML, 40 MG/0.4ML	4	QL(0.072 ea daily); PA	KEVZARA SOSY	4	QL(0.082 ml daily); PA
HADLIMA PUSHTOUCH SOAJ	4	QL(0.172 ml daily); PA	Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
HADLIMA PUSHTOUCH SOAJ	4	QL(0.086 ml daily); PA			

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Drug Name	Drug Tier	Requirements/Limits
<i>celecoxib</i>	1B	QL(2 ea daily)
<i>diclofenac potassium TABS 50 MG</i>	1B	
<i>diclofenac sodium TB24</i>	1B	
<i>diclofenac sodium TBEC</i>	1B	
<i>diclofenac w/ misoprostol TBEC</i>	1B	
<i>etodolac CAPS</i>	1B	
<i>etodolac TABS</i>	1B	
<i>fenoprofen calcium TABS</i>	1B	QL(4 ea daily); ST
<i>flurbiprofen TABS</i>	1B	
<i>ibuprofen SUSP 100 MG/5ML</i>	1B	RX/OTC
<i>ibuprofen TABS 800 MG</i>	1B	
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A	
<i>indomethacin CAPS 25 MG, 50 MG</i>	1B	
<i>indomethacin CPR</i>	1B	
<i>ketoprofen CAPS 50 MG</i>	1B	
<i>ketorolac tromethamine TABS</i>	1B	QL(0.667 ea daily)
<i>meclofenamate sodium CAPS</i>	1B	
<i>mefenamic acid CAPS</i>	1B	Must try ibuprofen. ; QL(5 ea daily); ST
<i>meloxicam TABS</i>	1A	QL(1 ea daily)
<i>nabumetone</i>	1B	
<i>naproxen sodium TABS 550 MG</i>	1B	
<i>naproxen SUSP</i>	1B	PA
<i>naproxen TABS</i>	1B	
<i>naproxen TBEC 500 MG</i>	1B	QL(3 ea daily)
<i>oxaprozin TABS</i>	1B	
<i>piroxicam CAPS</i>	1B	
<i>sulindac TABS</i>	1B	
<i>tolmetin sodium CAPS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>tolmetin sodium TABS 600 MG</i>	1B	
Phosphodiesterase 4 (PDE4) Inhibitors		
Otezla TABS	4	QL(2 ea daily); PA
Otezla TBPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Otezla TBPK	4	1 package(s) per 180 day(s) retail; PA
Pyrimidine Synthesis Inhibitors		
<i>leflunomide</i>	1B	QL(1 ea daily)
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT	4	QL(0.146 ml daily); PA
ENBREL SURECLICK SOAJ	4	QL(0.146 ml daily); PA
ENBREL SOLN	4	QL(0.146 ml daily); PA
ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ml daily); PA
ENBREL SOSY 50 MG/ML	4	QL(0.286 ml daily); SP; PA
<b>ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions</b>		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 ea daily)
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 ea daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Salicylates</b>			<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B	
<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>meperidine hcl SOLN OR 50 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(500 ml per fill retail)
<i>aspirin TABS 325 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>meperidine hcl TABS 50 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>aspirin TBEC 325 MG</i>	1A		<i>methadone hcl CONC</i>	1B	QL(10 ml daily)
<i>aspirin TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B	
<i>diflunisal TABS</i>	1B		<i>methadone hcl SOLN OR 5 MG/5ML</i>	1B	QL(100 ml daily)
<i>salsalate</i>	1B		<i>methadone hcl SOLN OR 10 MG/5ML</i>	1B	QL(50 ml daily)
<b>ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions</b>			METHADONE HCL SOLN IJ	1B	
<b>Opioid Agonists</b>			<i>methadone hcl TABS 5 MG</i>	1B	QL(4 ea daily)
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply	<i>methadone hcl TABS 10 MG</i>	1B	QL(10 ea daily)
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply	<i>methadone hcl TBSO</i>	1B	QL(2 ea daily)
<i>fentanyl citrate LPOP</i>	1B	QL(4 ea daily); PA	<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1B	QL(2 ea daily); PA
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1B	QL(0.34 ea daily)	<i>morphine sulfate SOLN OR 10 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(100 ml daily)
<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply	<i>morphine sulfate SOLN OR 20 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(50 ml daily)
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B		<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1B	
<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)	<i>morphine sulfate TABS</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 ea daily); PA	<i>morphine sulfate TBCR</i>	1B	QL(2 ea daily)
<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 ea daily); PA	NUCYNTA ER TB12	2	QL(2 ea daily); PA
<i>levorphanol tartrate TABS 2 MG</i>	1B	New starts limited to 7 day supply			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NUCYNTA TABS	2	QL(6 ea daily); PA	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(2 ea daily); PA	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1B	New starts limited to 7 day supply
<i>oxycodone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1B	New starts limited to 7 day supply
<i>oxymorphone hcl TABS</i>	1B	QL(12 ea daily); PA	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>oxymorphone hcl TB12 40 MG</i>	1B	QL(4 ea daily); PA	<i>butalbital-aspirin-caffeine w/cod</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1B	QL(2 ea daily); PA	<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1B	New starts limited to 7 day supply; QL(180 ml daily)
SUBSYS LIQD 100 MCG	3	QL(3 ea daily); PA	<i>hydrocodone-acetaminophen SOLN</i>	1B	New starts limited to 7 day supply
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	3	QL(4 ea daily); PA	<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	3	QL(8 ea daily); PA	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)
<i>tramadol hcl TABS 50 MG</i>	1A	New starts limited to 7 day supply; QL(8 ea daily)	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA
<i>tramadol hcl TB24</i>	1B	QL(1 ea daily)	<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 ea daily)
XTAMPZA ER	2	QL(2 ea daily); PA	<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)
<b>Opioid Combinations</b>					
<i>acetaminophen w/ codeine SOLN</i>	1A	New starts limited to 7 day supply; QL(75 ml daily)			
<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1A	New starts limited to 7 day supply; QL(12 ea daily)			
<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)			
<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)			

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)
<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)
<b>Opioid Partial Agonists</b>		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 ea daily)
<i>buprenorphine hcl SOLN</i>	1B	
<i>buprenorphine hcl SUBL</i>	1B	QL(3 ea daily)
<i>buprenorphine PTWK</i>	1B	QL(0.143 ea daily); PA
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ml daily); PA
<i>nalbuphine hcl</i>	1B	QL(8 ml daily)
<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply
<b>ANDROGENS-ANABOLIC - Drugs to Regulate Hormones</b>		
<b>Anabolic Steroids</b>		
<i>oxandrolone</i>	1B	
<b>Androgens</b>		
<i>ANDRODERM PT24 2 MG/24HR, 4 MG/24HR</i>	2	QL(1 ea daily); PA
<i>danazol CAPS</i>	1B	
<i>METHITEST TABS</i>	3	
<i>testosterone cypionate SOLN IM</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	1B	
<i>testosterone enanthate SOLN IM</i>	1B	
<b>ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching</b>		
<b>Intrarectal Steroids</b>		
<i>budesonide (intrarectal)</i>	4	QL(3.2 gm daily); PA
<i>hydrocortisone (intrarectal)</i>	1B	
<i>UCERIS (budesonide (intrarectal))</i>	4	QL(3.2 gm daily); PA
<b>Rectal Steroids</b>		
<i>hydrocortisone (rectal) EX</i>	1B	RX/OTC
<i>hydrocortisone acetate (rectal)</i>	1B	
<b>Vasodilating Agents</b>		
<i>nitroglycerin (intra-anal)</i>	1B	QL(2 gm daily)
<i>RECTIV (nitroglycerin (intra-anal))</i>	3	QL(2 gm daily)
<b>ANTHELMINTICS - Drugs to Treat Worm Infections</b>		
<b>Anthelmintics</b>		
<i>albendazole</i>	1B	PA
<i>EMVERM CHEW</i>	2	QL(2 ea daily; 6 ea per fill retail; 6 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail
<i>ivermectin</i>	1B	QL(9 ea per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail

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Drug Name	Drug Tier	Requirements/Limits
<i>praziquantel</i>	1B	PA
<b>ANTIANGINAL AGENTS - Drugs to Treat Chest Pain</b>		
Antianginals-Other		
<i>ranolazine TB12 500 MG</i>	1B	QL(3 ea daily)
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 ea daily)
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1B	
<i>isosorbide mononitrate TABS</i>	1B	
<i>isosorbide mononitrate TB24</i>	1B	
NITRO-BID OINT	3	
<i>nitroglycerin CPR</i>	1B	QL(4 ea daily)
<i>nitroglycerin PT24</i>	1B	
NITROGLYCERIN SOLN IV	1B	
<i>nitroglycerin SUBL</i>	1B	
<b>ANTIANGIETY AGENTS - Drugs to Treat Anxiety</b>		
Antianxiety Agents - Misc.		
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B	
<i>buspirone hcl 5 MG</i>	1A	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1B	
<i>hydroxyzine hcl SYRP</i>	1B	
<i>hydroxyzine hcl TABS</i>	1B	
<i>hydroxyzine pamoate CAPS</i>	1B	
<i>meprobamate</i>	1B	QL(6 ea daily)
Benzodiazepines		
<i>alprazolam TABS 2 MG</i>	1B	QL(4 ea daily)
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 ea daily)
<i>alprazolam TB24</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>alprazolam TBDP</i>	1B	
<i>chlordiazepoxide hcl CAPS</i>	1B	
<i>clorazepate dipotassium TABS</i>	1B	
<i>diazepam CONC</i>	1B	
<i>diazepam SOLN OR 5 MG/5ML</i>	1B	
<i>diazepam TABS</i>	1A	QL(4 ea daily)
<i>lorazepam CONC</i>	1B	
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1A	QL(3 ea daily)
<i>lorazepam TABS 1 MG</i>	1A	QL(4 ea daily)
<i>oxazepam CAPS</i>	1B	
<b>ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms</b>		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1B	
<i>procainamide hcl SOLN 500 MG/ML</i>	1B	
<i>quinidine sulfate TABS</i>	1B	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1B	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1B	
<i>propafenone hcl CP12</i>	1B	
<i>propafenone hcl TABS</i>	1B	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 50 MG/ML</i>	1B	
<i>amiodarone hcl TABS</i>	1B	
<i>dofetilide</i>	1B	
<b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions</b>		
Antiasthmatic - Monoclonal Antibodies		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FASENRA PEN SOAJ	4	QL(0.036 ml daily); PA	<i>montelukast sodium TABS</i>	1B	QL(1 ea daily)
FASENRA SOSY 30 MG/ML	4	QL(0.036 ml daily); PA	<i>zafirlukast</i>	1B	QL(2 ea daily)
NUCALA SOAJ	4	QL(0.1073 ml daily); PA	<i>zileuton TB12</i>	1B	QL(4 ea daily)
NUCALA SOLR	4	QL(0.1073 ea daily); PA	Selective Phosphodiesterase 4 (PDE4) Inhibitors		
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ml daily); PA	<i>roflumilast</i>	3	QL(1 ea daily)
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ml daily); PA	Steroid Inhalants		
XOLAIR SOAJ 75 MG/0.5ML	4	QL(0.036 ml daily); PA	ALVESCO	3	PA
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	ARNUITY ELLIPTA	2	
XOLAIR SOLR	4	QL(0.286 ea daily); PA	<i>budesonide (inhalation) SUSP</i>	1B	QL(4 ml daily); PA
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ml daily); PA	<i>fluticasone propionate (inhalation) AEPB</i>	1B	
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA	<i>fluticasone propionate hfa</i>	1B	QL(0.8 gm daily)
Anti-Inflammatory Agents			PULMICORT FLEXHALER AEPB	2	
<i>cromolyn sodium NEBU</i>	1B	QL(8 ml daily)	QVAR REDHALER	2	
Bronchodilators - Anticholinergics			Sympathomimetics		
ATROVENT HFA	3	QL(0.44 gm daily)	AIRDUO DIGIHALER 113/14	3	
INCRUSE ELLIPTA	2	QL(1 ea daily)	AIRDUO DIGIHALER 232/14	3	
<i>ipratropium bromide SOLN 0.02 %</i>	1B	QL(15 ml daily)	AIRDUO DIGIHALER 55/14	3	
SPIRIVA HANDIHALER CAPS ( <i>tiotropium bromide monohydrate</i> )	2	QL(1 ea daily)	AIRSUPRA	3	
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)	<i>albuterol sulfate AERS</i>	1B	
<i>tiotropium bromide monohydrate CAPS</i>	1B	QL(1 ea daily)	<i>albuterol sulfate NEBU 0.083 %, 0.5 %, 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML</i>	1B	
Leukotriene Modulators			<i>albuterol sulfate SYRP</i>	1B	
<i>montelukast sodium CHEW</i>	1B	QL(1 ea daily)	<i>albuterol sulfate TABS</i>	1B	
<i>montelukast sodium PACK</i>	1B	QL(1 ea daily)	ANORO ELLIPTA	2	QL(2 ea daily)
			<i>arformoterol tartrate</i>	1B	QL(4 ml daily)
			BREO ELLIPTA ( <i>fluticasone furoate-vilanterol</i> )	2	
			BREO ELLIPTA	2	

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Drug Name	Drug Tier	Requirements/Limits
BREZTRI AEROSPHERE	2	QL(0.38 gm daily)
<i>budesonide-formoterol fumarate dihydrate</i>	1B	
DULERA	2	
<i>fluticasone furoate-vilanterol</i>	1B	
<i>fluticasone-salmeterol AEPB</i>	1B	
<i>fluticasone-salmeterol AERO</i>	1B	
<i>formoterol fumarate NEBU</i>	1B	QL(4 ml daily)
<i>ipratropium-albuterol SOLN</i>	1B	QL(18 ml daily)
<i>levalbuterol hcl</i>	1B	
<i>levalbuterol tartrate</i>	1B	QL(0.5 gm daily)
PROAIR DIGIHALER	3	
PROAIR RESPICLICK AEPB	3	
SEREVENT DISKUS	2	
STIOLTO RESPIMAT	2	
STRIVERDI RESPIMAT	2	
<i>terbutaline sulfate SOLN</i>	1B	
<i>terbutaline sulfate TABS</i>	1B	
TRELEGY ELLIPTA	2	QL(2 ea daily)
<b>Xanthines</b>		
<i>aminophylline SOLN</i>	1B	
<i>theophylline ELIX</i>	1B	
<i>theophylline SOLN</i>	1B	QL(56 ml daily)
<i>theophylline TB12</i>	1B	
<i>theophylline TB24</i>	1B	
<b>ANTICOAGULANTS - Blood Thinners</b>		
<b>Coumarin Anticoagulants</b>		
<i>warfarin sodium TABS</i>	1B	
<b>Direct Factor Xa Inhibitors</b>		

Drug Name	Drug Tier	Requirements/Limits
ELIQUIS STARTER PACK TBPK	2	QL(2.47 ea daily); 1 max fill(s) per 180 day(s) retail
ELIQUIS TABS	2	QL(2 ea daily)
XARELTO STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail
XARELTO SUSR	2	QL(900 ml per 30 day(s) retail; 900 ml per 30 days mail)
XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)
XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)
<b>Heparins And Heparinoid-Like Agents</b>		
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ml daily)
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ml daily)
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ml daily; 30 Day(s) limit); SP
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ml daily; 30 Day(s) limit); SP
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ml daily); SP
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ml daily)
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ml per 180 day(s) retail; 4 ml per 180 days mail); SP
<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ml per 180 day(s) retail; 7 ml per 180 days mail); SP
<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ml per 180 day(s) retail; 5 ml per 180 days mail); SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fondaparinux sodium 5 MG/0.4ML</i>	4	QL(3.6 ml per 180 day(s) retail; 4 ml per 180 days mail); SP	VALTOCO 15 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
FRAGMIN SOSY	4	SP; PA	VALTOCO 20 MG DOSE LQPK	4	QL(10 ea per 30 day(s) retail); PA
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B		VALTOCO 5 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA
HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML	1B		<b>Anticonvulsants - Misc.</b>		
<b>Thrombin Inhibitors</b>			APTIOM	3	QL(2 ea daily); ST
<i>dabigatran etexilate mesylate CAPS</i>	1B		BANZEL TABS 400 MG ( <i>rufinamide</i> )	2	QL(8 ea daily); PA
<b>ANTICONVULSANTS - Drugs to Treat Seizures</b>			BANZEL TABS 200 MG ( <i>rufinamide</i> )	2	QL(2 ea daily); PA
<b>AMPA Glutamate Receptor Antagonists</b>			BRIVIACT SOLN OR 10 MG/ML	3	QL(20 ml daily); PA
FYCOMPA TABS 6 MG	3	QL(2 ea daily); PA	BRIVIACT TABS	3	QL(2 ea daily); PA
FYCOMPA TABS 8 MG, 10 MG, 12 MG	3	QL(1 ea daily); PA	<i>carbamazepine CHEW</i>	1B	
FYCOMPA TABS 4 MG	3	QL(3 ea daily); PA	<i>carbamazepine CP12 300 MG</i>	1B	QL(4 ea daily)
FYCOMPA TABS 2 MG	3	QL(6 ea daily); PA	<i>carbamazepine CP12 100 MG</i>	1B	
<b>Anticonvulsants - Benzodiazepines</b>			<i>carbamazepine CP12 200 MG</i>	1B	QL(6 ea daily)
<i>clobazam SUSP</i>	1B	QL(16 ml daily); PA	<i>carbamazepine SUSP</i>	1B	
<i>clobazam TABS</i>	1B	QL(2 ea daily); PA	<i>carbamazepine TABS</i>	1B	
<i>clonazepam TABS</i>	1A		<i>carbamazepine TB12 200 MG</i>	1B	QL(6 ea daily)
<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail	<i>carbamazepine TB12 100 MG, 400 MG</i>	1B	QL(4 ea daily)
NAYZILAM	3	QL(10 ea per 30 day(s) retail); PA	DIACOMIT CAPS 250 MG	4	QL(12 ea daily); PA
VALTOCO 10 MG DOSE LIQD	4	QL(10 ea per 30 day(s) retail); PA	DIACOMIT CAPS 500 MG	4	QL(6 ea daily); PA
			DIACOMIT PACK 250 MG	4	QL(12 ea daily); PA
			DIACOMIT PACK 500 MG	4	QL(6 ea daily); PA
			EPIDIOLEX	3	PA
			<i>gabapentin CAPS</i>	1B	
			<i>gabapentin SOLN</i>	1B	QL(60 ml daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>gabapentin TABS 600 MG, 800 MG</i>	1B		<i>topiramate CPSP 25 MG</i>	1B	QL(8 ea daily)
<i>iacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ml daily)	<i>topiramate CPSP 15 MG</i>	1B	QL(6 ea daily)
<i>iacosamide TABS</i>	1B	QL(2 ea daily)	<i>topiramate CS24</i>	3	PA
<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 ea daily)	<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 ea daily)
<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 ea daily)	<i>topiramate TABS 200 MG</i>	1B	QL(2 ea daily)
<i>lamotrigine TABS</i>	1B		<i>topiramate TABS 50 MG</i>	1B	QL(6 ea daily)
<i>lamotrigine TBDP</i>	1B	QL(1 ea daily)	<i>zonisamide CAPS</i>	1B	QL(6 ea daily)
<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ml daily)	<b>Carbamates</b>		
<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 ea daily)	<i>felbamate SUSP</i>	1B	QL(30 ml daily)
<i>levetiracetam TABS 500 MG</i>	1B	QL(6 ea daily)	<i>felbamate TABS 400 MG</i>	1B	QL(9 ea daily)
<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 ea daily)	<i>felbamate TABS 600 MG</i>	1B	QL(6 ea daily)
<i>levetiracetam TB24</i>	1B	QL(4 ea daily)	<b>GABA Modulators</b>		
<i>oxcarbazepine SUSP</i>	1B	QL(40 ml daily)	<i>tiagabine hcl</i>	1B	
<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 ea daily)	<i>vigabatrin PACK</i>	4	QL(6 ea daily); SP; PA
<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 ea daily)	<i>vigabatrin TABS</i>	4	QL(6 ea daily); SP; PA
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 ea daily); PA	<b>Hydantoins</b>		
<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 ea daily); PA	<b>DILANTIN</b>	2	
<i>pregabalin SOLN</i>	3	QL(30 ml daily); PA	<b>DILANTIN (phenytoin sodium extended)</b>	2	
<i>primidone 50 MG, 250 MG</i>	1B		<b>DILANTIN INFATABS CHEW (phenytoin)</b>	2	
<i>rufinamide SUSP</i>	1B	QL(80 ml daily); PA	<b>DILANTIN-125 SUSP (phenytoin)</b>	2	
<i>rufinamide TABS 200 MG</i>	1B	QL(2 ea daily); PA	<i>fosphenytoin sodium</i>	1B	
<i>rufinamide TABS 400 MG</i>	1B	QL(8 ea daily); PA	<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B	
<b>TEGRETOL SUSP (carbamazepine)</b>	2		<i>phenytoin sodium SOLN</i>	1B	
<b>TEGRETOL TABS (carbamazepine)</b>	2		<i>phenytoin CHEW</i>	1B	
			<i>phenytoin SUSP</i>	1B	
			<b>Succinimides</b>		
			<b>CELONTIN (methsuximide)</b>	3	QL(4 ea daily)
			<i>ethosuximide CAPS</i>	1B	QL(6 ea daily)
			<i>ethosuximide SOLN</i>	1B	QL(30 ml daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>methsuximide</i>	1B	QL(4 ea daily)
ZARONTIN CAPS ( <i>ethosuximide</i> )	2	QL(6 ea daily)
Valproic Acid		
<i>divalproex sodium TB24</i>	1B	
<i>divalproex sodium TBEC</i>	1B	
<i>valproate sodium SOLN</i> OR 250 MG/5ML, 500 MG/10ML	1B	
<i>valproic acid CAPS</i>	1B	
<b>ANTIDEPRESSANTS - Drugs to Treat Depression</b>		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS 7.5</i> MG, 45 MG	1B	QL(1 ea daily)
<i>mirtazapine TABS 30 MG</i>	1B	QL(1.5 ea daily)
<i>mirtazapine TABS 15 MG</i>	1B	QL(3 ea daily)
<i>mirtazapine TBDP 15 MG</i>	1B	QL(3 ea daily)
<i>mirtazapine TBDP 30 MG</i>	1B	QL(1.5 ea daily)
<i>mirtazapine TBDP 45 MG</i>	1B	QL(1 ea daily)
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	1B	QL(3 ea daily)
<i>bupropion hcl TB12 150</i> MG	1B	QL(3 ea daily)
<i>bupropion hcl TB12 200</i> MG	1B	QL(2 ea daily)
<i>bupropion hcl TB12 100</i> MG	1B	QL(4 ea daily)
<i>bupropion hcl TB24 300</i> MG	1B	QL(1 ea daily)
<i>bupropion hcl TB24 150</i> MG	1B	QL(3 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	3	QL(1 ea daily)
MARPLAN	2	QL(6 ea daily)
<i>phenelzine sulfate</i>	1B	
<i>tranylcypromine sulfate</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
SPRAVATO 56MG DOSE	4	PA
SPRAVATO 84MG DOSE	4	PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		
<i>citalopram hydrobromide</i> SOLN	1B	QL(20 ml daily)
<i>citalopram hydrobromide</i> TABS 10 MG	1B	QL(4 ea daily)
<i>citalopram hydrobromide</i> TABS 40 MG	1B	QL(1 ea daily)
<i>citalopram hydrobromide</i> TABS 20 MG	1B	QL(2 ea daily)
<i>escitalopram oxalate</i> SOLN	1B	QL(20 ml daily)
<i>escitalopram oxalate</i> TABS 5 MG	1B	QL(4 ea daily)
<i>escitalopram oxalate</i> TABS 20 MG	1B	QL(1 ea daily)
<i>escitalopram oxalate</i> TABS 10 MG	1B	QL(2 ea daily)
<i>fluoxetine hcl CAPS 40</i> MG	1B	QL(2 ea daily)
<i>fluoxetine hcl CAPS 10</i> MG	1A	QL(1 ea daily)
<i>fluoxetine hcl CAPS 20</i> MG	1B	QL(3 ea daily)
<i>fluoxetine hcl CPDR</i>	1B	
<i>fluoxetine hcl SOLN</i>	1B	QL(20 ml daily)
<i>fluoxetine hcl TABS 20</i> MG	1B	QL(3 ea daily)
<i>fluoxetine hcl TABS 10</i> MG, 60 MG	1B	QL(1 ea daily)
<i>fluvoxamine maleate</i> TABS 100 MG	1B	QL(3 ea daily)
<i>fluvoxamine maleate</i> TABS 25 MG, 50 MG	1B	QL(2 ea daily)
<i>paroxetine hcl SUSP</i>	1B	QL(30 ml daily)
<i>paroxetine hcl TABS 10</i> MG	1B	QL(6 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>paroxetine hcl TABS 20 MG</i>	1B	QL(3 ea daily)
<i>paroxetine hcl TABS 40 MG</i>	1B	QL(1 ea daily)
<i>paroxetine hcl TABS 30 MG</i>	1B	QL(2 ea daily)
<i>paroxetine hcl TB24 25 MG, 37.5 MG</i>	1B	QL(2 ea daily)
<i>paroxetine hcl TB24 12.5 MG</i>	1B	QL(1 ea daily)
<i>sertraline hcl CONC</i>	1B	QL(10 ml daily)
<i>sertraline hcl TABS 100 MG</i>	1B	QL(2 ea daily)
<i>sertraline hcl TABS 25 MG, 50 MG</i>	1B	QL(4 ea daily)
<b>Serotonin Modulators</b>		
<i>nefazodone hcl</i>	1B	
<i>trazodone hcl TABS</i>	1B	
TRINTELLIX	3	QL(1 ea daily); PA
VIIBRYD STARTER PACK KIT	3	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail
<i>vilazodone hcl TABS</i>	1B	QL(1 ea daily)
<b>Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)</b>		
<i>desvenlafaxine succinate 100 MG</i>	1B	QL(4 ea daily)
<i>desvenlafaxine succinate 25 MG, 50 MG</i>	1B	QL(1 ea daily)
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	1B	QL(2 ea daily)
<i>duloxetine hcl CPEP 40 MG</i>	1B	
FETZIMA TITRATION PACK C4PK	3	PA
FETZIMA CP24	3	QL(1 ea daily); PA
<i>venlafaxine hcl CP24 37.5 MG</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl CP24 150 MG</i>	1B	QL(2 ea daily)
<i>venlafaxine hcl CP24 75 MG</i>	1B	QL(5 ea daily)
<i>venlafaxine hcl TABS</i>	1B	QL(3 ea daily)
<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	1B	QL(1 ea daily)
<i>venlafaxine hcl TB24 150 MG</i>	1B	QL(2 ea daily)
<b>Tricyclic Agents</b>		
<i>amitriptyline hcl TABS</i>	1B	
<i>amoxapine</i>	1B	
<i>clomipramine hcl</i>	1B	
<i>desipramine hcl TABS</i>	1B	
<i>doxepin hcl CAPS</i>	1B	
<i>doxepin hcl CONC</i>	1B	
<i>imipramine hcl TABS</i>	1B	
<i>imipramine pamoate</i>	1B	
<i>nortriptyline hcl CAPS</i>	1B	
<i>nortriptyline hcl SOLN</i>	1B	
<i>protriptyline hcl</i>	1B	
<i>trimipramine maleate CAPS</i>	1B	
<b>ANTIDIABETICS - Drugs to Regulate Blood Sugar</b>		
<b>Alpha-Glucosidase Inhibitors</b>		
<i>acarbose</i>	1B	QL(3 ea daily)
<i>miglitol</i>	1B	QL(3 ea daily)
<b>Antidiabetic Combinations</b>		
<i>alogliptin-metformin hcl</i>	1B	QL(2 ea daily); PA
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1B	QL(1 ea daily); PA
<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1B	QL(2 ea daily); PA
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	2	QL(1 ea daily)
<i>glipizide-metformin hcl 500 MG-5 MG</i>	1B	QL(4 ea daily)
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1B	QL(2 ea daily)
<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1B	QL(4 ea daily)
<i>glyburide-metformin 250 MG-1.25 MG</i>	1B	QL(2 ea daily)
GLYXAMBI	2	QL(1 ea daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 ea daily)
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 ea daily)
JANUMET TABS	2	QL(2 ea daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 ea daily)
<i>pioglitazone hcl-metformin hcl TABS</i>	1B	QL(2 ea daily)
<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1B	QL(2 ea daily)
<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1B	QL(1 ea daily)
SOLIQUA 100/33	2	QL(0.5 ml daily); PA
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 ea daily)
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
SYNJARDY TABS	2	QL(2 ea daily)
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 ea daily)
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
XIGDUO XR ( <i>dapagliflozin propanediol-metformin hcl</i> )	2	QL(1 ea daily)
XIGDUO XR ( <i>dapagliflozin propanediol-metformin hcl</i> )	2	QL(2 ea daily)
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 ea daily)
XULTOPHY 100/3.6	2	QL(0.5 ml daily); PA
<b>Biguanides</b>		
<i>metformin hcl TABS 1000 MG</i>	1B	QL(2.5 ea daily)
<i>metformin hcl TABS 850 MG</i>	0	QL(3 ea daily)
<i>metformin hcl TABS 500 MG</i>	1B	QL(5 ea daily)
<i>metformin hcl TB24 500 MG</i>	1B	QL(4 ea daily)
<i>metformin hcl TB24 750 MG</i>	1B	QL(3 ea daily)
<b>Diabetic Other</b>		
<i>diazoxide</i>	3	
<i>glucagon (rdna)</i>	1B	QL(0.035 ea daily)
<b>Dipeptidyl Peptidase-4 (DPP-4) Inhibitors</b>		
<i>alogliptin benzoate</i>	1B	QL(1 ea daily)
JANUVIA	2	QL(1 ea daily)
<i>saxagliptin hcl</i>	1B	QL(1 ea daily)
<b>Incretin Mimetic Agents</b>		
OZEMPIC SOPN	2	QL(0.108 ml daily); PA
OZEMPIC SOPN 2 MG/1.5ML	2	QL(0.054 ml daily); PA
RYBELSUS TABS	2	QL(1 ea daily); PA
TRULICITY	2	QL(0.143 ml daily); PA

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Drug Name	Drug Tier	Requirements/Limits
VICTOZA ( <i>liraglutide</i> )	2	QL(0.3 ml daily); PA
<b>Insulin</b>		
APIDRA SOLOSTAR SOPN	3	PA
APIDRA SOLN	3	PA
BASAGLAR KWIKPEN SOPN	2	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ml daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ml daily)
INSULIN ASPART FLEXPEN SOPN	1B	
INSULIN ASPART PENFILL SOCT	1B	
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	1B	
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	1B	
INSULIN ASPART SOLN IJ	1B	
INSULIN DEGLUDEC FLEXTOUCH SOPN	2	
INSULIN DEGLUDEC SOLN	2	
LEVEMIR FLEXPEN SOPN	3	PA
LEVEMIR FLEXTOUCH SOPN	3	PA
LEVEMIR SOLN	3	PA
NOVOLIN 70/30 FLEXPEN SUPN	2	
NOVOLIN 70/30 SUSP	2	
NOVOLIN N FLEXPEN SUPN	2	
NOVOLIN N SUSP	2	
NOVOLIN R FLEXPEN SOPN IJ	2	

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN R SOLN IJ	2	
<b>Insulin Sensitizing Agents</b>		
<i>pioglitazone hcl</i>	1B	QL(1 ea daily)
<b>Meglitinide Analogues</b>		
<i>nateglinide</i>	1B	QL(3 ea daily)
<i>repaglinide 2 MG</i>	1B	QL(8 ea daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 ea daily)
<b>Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors</b>		
<i>dapagliflozin propanediol</i>	2	QL(1 ea daily)
FARXIGA ( <i>dapagliflozin propanediol</i> )	2	QL(1 ea daily)
FARXIGA	2	QL(1 ea daily)
JARDIANCE	2	QL(1 ea daily)
<b>Sulfonylureas</b>		
<i>glimepiride 4 MG</i>	1B	QL(2 ea daily)
<i>glimepiride 1 MG, 2 MG</i>	1B	QL(4 ea daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1B	QL(4 ea daily)
<i>glipizide TB24</i>	1B	QL(2 ea daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1B	QL(4 ea daily)
<i>glyburide TABS</i>	1B	QL(4 ea daily)
<b>ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea</b>		
<b>Antiperistaltic Agents</b>		
<i>diphenoxylate w/ atropine LIQD</i>	1B	
<i>diphenoxylate w/ atropine TABS</i>	1B	
<i>loperamide hcl CAPS</i>	1B	RX/OTC
MOTOFEN	3	
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<b>Antidotes - Chelating Agents</b>		
CHEMET	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA
<i>deferiprone TABS 500 MG</i>	1B	
<b>Antidotes and Specific Antagonists</b>		
VISTOGARD	4	PA
<b>Opioid Antagonists</b>		
<i>naloxone hcl LIQD</i>	1B	QL(2 ea per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1B	
<i>naltrexone hcl</i>	1B	
<b>ANTIEMETICS - Drugs to Treat Nausea and Vomiting</b>		
<b>5-HT3 Receptor Antagonists</b>		
ANZEMET TABS 50 MG	3	QL(0.167 ea daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1B	
<i>granisetron hcl TABS</i>	1B	QL(0.34 ea daily)
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1B	
<i>ondansetron hcl SOLN OR 4 MG/5ML</i>	1B	QL(3.34 ml daily)
<i>ondansetron hcl SOSY</i>	1B	
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 ea daily; 45 ea per fill retail; 45 per fill mail)
<i>ondansetron hcl TABS 24 MG</i>	1B	QL(0.143 ea daily)
<i>ondansetron hcl TABS 4 MG</i>	1B	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)
<i>ondansetron TBDP 4 MG</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron TBDP 8 MG</i>	1B	
<i>palonosetron hcl SOLN</i>	1B	
<b>Antiemetics - Anticholinergic</b>		
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 ea daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
<b>Antiemetics - Miscellaneous</b>		
AKYNZEO	3	PA
<i>doxylamine-pyridoxine TBEC</i>	1B	QL(4 ea daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA
<i>dronabinol CAPS</i>	1B	
<b>Substance P/Neurokinin 1 (NK1) Receptor Antagonists</b>		
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 ea daily)
<i>aprepitant CAPS</i>	1B	PA
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 ea daily)
<i>aprepitant MISC</i>	1B	PA
VARUBI TBPK	3	PA
<b>ANTIFUNGALS - Drugs to Treat Fungal Infections</b>		
<b>Antifungal - Glucan Synthesis Inhibitors</b>		
<i>caspofungin acetate</i>	1B	
ERAXIS	3	
<i>micafungin sodium</i>	1B	PA
<b>Antifungals</b>		
ABELCET	3	
<i>amphotericin b IV</i>	3	
<i>amphotericin b liposome</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>flucytosine</i>	1B	
<i>griseofulvin microsize SUSP</i>	1B	AL(At least 2 yrs old)
<i>griseofulvin microsize TABS</i>	1B	
<i>griseofulvin ultramicrosize</i>	1B	
<i>nystatin TABS</i>	1B	
<i>terbinafine hcl TABS</i>	1B	QL(1 ea daily)
<b>Imidazole-Related Antifungals</b>		
CRESEMBA CAPS 186 MG	3	PA
<i>fluconazole SUSP</i>	1B	
<i>fluconazole TABS</i>	1B	
<i>itraconazole CAPS</i>	1B	QL(4 ea daily); PA
<i>itraconazole SOLN</i>	1B	QL(20 ml daily); PA
<i>ketoconazole</i>	1B	
NOXAFIL SUSP ( <i>posaconazole</i> )	3	QL(20 ml daily)
<i>posaconazole SUSP</i>	1B	QL(20 ml daily)
TOLSURA CAPS	4	PA
<i>voriconazole TABS</i>	1B	QL(4 ea daily)
<b>ANTIHISTAMINES - Drugs to Treat Allergies</b>		
<b>Antihistamines - Alkylamines</b>		
<i>dexchlorpheniramine maleate SOLN</i>	1B	
<b>Antihistamines - Ethanolamines</b>		
<i>carbinoxamine maleate SOLN</i>	1B	
<i>carbinoxamine maleate TABS 4 MG</i>	1B	
<i>clemastine fumarate SYRP</i>	1B	
<i>clemastine fumarate TABS 2.68 MG</i>	1B	
<i>diphenhydramine hcl CAPS 50 MG</i>	1A	

Drug Name	Drug Tier	Requirements/Limits
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B	
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1B	QL(20 ml daily)
<i>diphenhydramine hcl SOLN 50 MG/ML</i>	1B	
<b>Antihistamines - Non-Sedating</b>		
<i>cetirizine hcl TABS</i>	1A	QL(1 ea daily)
<i>desloratadine TABS</i>	1B	QL(1 ea daily)
<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 ea daily)
<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ml daily); RX/OTC
<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 ea daily); RX/OTC
<i>loratadine CAPS</i>	1B	
<i>loratadine CHEW</i>	1B	
<i>loratadine SOLN</i>	1B	
<i>loratadine TABS</i>	1A	
<i>loratadine TBDP</i>	1B	
QUZYTIR SOLN IV	3	PA
<b>Antihistamines - Phenothiazines</b>		
<i>promethazine hcl SOLN OR 6.25 MG/5ML</i>	1B	
<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 ea daily)
<i>promethazine hcl SUPP 50 MG</i>	1B	
<i>promethazine hcl TABS</i>	1B	
<b>Antihistamines - Piperidines</b>		
<i>cyproheptadine hcl SYRP</i>	1B	
<i>cyproheptadine hcl TABS</i>	1B	
<b>ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol</b>		
<b>Antihyperlipidemics - Combinations</b>		
<i>ezetimibe-simvastatin</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Antihyperlipidemics - Misc.			<i>lovastatin TABS 10 MG, 20 MG</i>	1B	\$0 copay for generic only, age 40 to 76; QL(1 ea daily); PV
<i>icosapent ethyl 1 GM</i>	1B	QL(4 ea daily); PA			
<i>omega-3-acid ethyl esters</i>	1B	QL(4 ea daily)	<i>pravastatin sodium</i>	1B	QL(1 ea daily)
Bile Acid Sequestrants			<i>rosuvastatin calcium TABS</i>	3	QL(1 ea daily)
<i>cholestyramine light PACK</i>	1B	QL(6 ea daily)	<i>simvastatin TABS</i>	1B	QL(1 ea daily)
<i>cholestyramine light POWD</i>	1B	QL(24 gm daily)	Intestinal Cholesterol Absorption Inhibitors		
<i>cholestyramine PACK</i>	1B	QL(6 ea daily)	<i>ezetimibe</i>	1B	QL(1 ea daily)
<i>cholestyramine POWD</i>	1B	QL(25.2 gm daily)	Nicotinic Acid Derivatives		
<i>colesevelam hcl PACK</i>	1B	QL(1 ea daily); PA	<i>niacin (antihyperlipidemic) TBCR</i>	1B	QL(2 ea daily)
<i>colesevelam hcl TABS</i>	1B	QL(7 ea daily)	Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
<i>colestipol hcl GRAN</i>	1B	QL(6 gm daily)	<i>REPATHA PUSHTRONEX SYSTEM SOCT</i>	4	QL(0.25 ml daily); PA
<i>colestipol hcl PACK</i>	1B	QL(6 ea daily)	<i>REPATHA SURECLICK SOAJ</i>	4	QL(0.0714 ml daily); PA
<i>colestipol hcl TABS</i>	1B	QL(16 ea daily)	<i>REPATHA SOSY</i>	4	QL(0.0714 ml daily); PA
Fibric Acid Derivatives			<b>ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure</b>		
<i>choline fenofibrate</i>	1B	QL(1 ea daily)	ACE Inhibitors		
<i>fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG</i>	1B	QL(1 ea daily)	<i>benazepril hcl</i>	1B	
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	QL(1 ea daily)	<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 ea daily)
<i>gemfibrozil TABS</i>	1B	QL(2 ea daily)	<i>captopril 12.5 MG</i>	1B	
HMG CoA Reductase Inhibitors			<i>enalapril maleate TABS</i>	1B	
<i>atorvastatin calcium TABS</i>	1B	QL(1 ea daily)	<i>fosinopril sodium</i>	1B	
<i>fluvastatin sodium CAPS 40 MG</i>	1B	QL(2 ea daily)	<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1B	
<i>fluvastatin sodium CAPS 20 MG</i>	1B	QL(1 ea daily)	<i>moexipril hcl</i>	1B	QL(2 ea daily)
<i>lovastatin TABS 40 MG</i>	1B	\$0 copay for generic only, age 40 to 76; QL(2 ea daily); PV	<i>perindopril erbumine 2 MG, 8 MG</i>	1B	QL(2 ea daily)
			<i>perindopril erbumine 4 MG</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>quinapril hcl 20 MG, 40 MG</i>	1B		<i>benazepril &amp; hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 ea daily)
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 ea daily)	<i>benazepril &amp; hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B	
<i>ramipril CAPS</i>	1B		<i>bisoprolol &amp; hydrochlorothiazide</i>	1B	QL(2 ea daily)
<i>trandolapril 4 MG</i>	1B	QL(2 ea daily)	<i>candesartan cilexetil-hydrochlorothiazide</i>	1B	
<i>trandolapril 1 MG, 2 MG</i>	1B	QL(1 ea daily)	<i>enalapril maleate &amp; hydrochlorothiazide 25 MG-10 MG</i>	1B	
<b>Agents for Pheochromocytoma</b>			<i>enalapril maleate &amp; hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 ea daily)
<i>phenoxybenzamine hcl</i>	3	PA	<i>fosinopril sodium &amp; hydrochlorothiazide</i>	1B	QL(1 ea daily)
<b>Angiotensin II Receptor Antagonists</b>			<i>irbesartan-hydrochlorothiazide</i>	1B	
<i>candesartan cilexetil</i>	1B	QL(1 ea daily)	<i>lisinopril &amp; hydrochlorothiazide</i>	1B	
EDARBI	3	QL(1 ea daily); ST	<i>losartan potassium &amp; hydrochlorothiazide 12.5 MG-50 MG</i>	1B	QL(2 ea daily)
<i>irbesartan</i>	1B	QL(1 ea daily)	<i>losartan potassium &amp; hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1B	QL(1 ea daily)
<i>losartan potassium</i>	1B	QL(1 ea daily)	<i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 ea daily)
<i>olmesartan medoxomil</i>	1B	QL(1 ea daily)	<i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
<i>telmisartan</i>	1B	QL(1 ea daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST
<i>valsartan TABS</i>	1B	QL(1 ea daily)	<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B	
<b>Antiadrenergic Antihypertensives</b>					
<i>clonidine</i>	3	QL(0.15 ea daily)			
<i>clonidine hcl TABS</i>	1B	QL(8 ea daily)			
<i>doxazosin mesylate</i>	1B				
<i>guanfacine hcl</i>	1B				
<i>methyldopa TABS</i>	1B	QL(6 ea daily)			
<i>prazosin hcl CAPS</i>	1B	QL(4 ea daily)			
<i>terazosin hcl</i>	1B				
<b>Antihypertensive Combinations</b>					
<i>amlodipine besylate-benazepril hcl</i>	1B				
<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST			
<i>amlodipine besylate-valsartan</i>	1B	QL(1 ea daily)			
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3				
<i>atenolol &amp; chlorthalidone</i>	1B				

Drug Name	Drug Tier	Requirements/Limits
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 ea daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 ea daily)
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 ea daily)
<i>telmisartan-amlodipine</i>	1B	QL(1 ea daily)
<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)
<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 ea daily)
<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>valsartan-hydrochlorothiazide</i>	1B	QL(1 ea daily)
<b>Antihypertensives - Misc.</b>		
VECAMYL	3	PA
<b>Direct Renin Inhibitors</b>		
<i>aliskiren fumarate</i>	1B	QL(1 ea daily)
<b>Selective Aldosterone Receptor Antagonists (SARAs)</b>		
<i>eplerenone</i>	1B	
<b>Vasodilators</b>		
<i>hydralazine hcl SOLN</i>	1B	
<i>hydralazine hcl TABS</i>	1B	
<i>minoxidil 2.5 MG, 10 MG</i>	1B	
<b>ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections</b>		
<b>Anti-infective Agents - Misc.</b>		
<i>bacitracin</i>	3	
IMPAVIDO	3	QL(3 ea daily); PA
<i>metronidazole TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>trimethoprim TABS</i>	1B	
XIFAXAN 200 MG	3	QL(3 ea daily; 9 ea per 3 day(s) retail; 9 ea per 3 days mail); AL(At least 12 yrs old); PA
XIFAXAN 550 MG	3	QL(3 ea daily); AL(At least 12 yrs old); PA
<b>Anti-infective Misc. - Combinations</b>		
<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>sulfamethoxazole-trimethoprim TABS</i>	1A	
<b>Antiprotozoal Agents</b>		
ALINIA SUSR	2	PA
<i>atovaquone</i>	1B	
<i>nitazoxanide TABS</i>	1B	PA
<b>Carbapenems</b>		
<i>ertapenem sodium IJ</i>	1B	
<i>imipenem-cilastatin IV</i>	1B	
<i>meropenem</i>	1B	
<b>Chloramphenicols</b>		
<i>chloramphenicol sodium succinate</i>	4	SP; PA
<b>Cyclic Lipopeptides</b>		
<i>daptomycin 500 MG</i>	1B	
<b>Glycopeptides</b>		
<i>vancomycin hcl CAPS</i>	1B	QL(4 ea daily; 40 ea per fill retail)
<i>vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ml per fill retail)
<b>Leprostatics</b>		
<i>dapsone</i>	1B	
<b>Lincosamides</b>		
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1B	
<i>lincomycin hcl</i>	1B	
<b>Monobactams</b>		
<i>aztreonam 1 GM</i>	1B	
CAYSTON	4	QL(3 ml daily); PA
<b>Oxazolidinones</b>		
<i>linezolid SUSR</i>	1B	
<i>linezolid TABS</i>	1B	QL(2 ea daily); PA
SIVEXTRO TABS	3	PA
<b>Polymyxins</b>		
<i>polymyxin b sulfate SOLR</i>	1B	
<b>Urinary Anti-infectives</b>		
<i>fosfomycin tromethamine</i>	1B	
<i>methenamine hippurate</i>	1B	
<i>nitrofurantoin</i>	1B	
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1B	
<i>nitrofurantoin monohyd macro</i>	1B	
<b>ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)</b>		
<b>Antimalarial Combinations</b>		

Drug Name	Drug Tier	Requirements/Limits
<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 ea per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<b>Antimalarials</b>		
<i>chloroquine phosphate TABS 500 MG</i>	1B	
<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 ea daily)
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 ea daily)
<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 ea daily)
<i>hydroxychloroquine sulfate 400 MG</i>	1B	QL(1 ea daily)
KRINTAFEL	3	QL(2 ea per 30 day(s) retail)

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Drug Name	Drug Tier	Requirements/Limits
<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 ea daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>primaquine phosphate TABS</i>	3	
<i>pyrimethamine</i>	1B	QL(3 ea daily); PA
<i>quinine sulfate CAPS 324 MG</i>	1B	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
FIRDAPSE	4	PA
<i>neostigmine methylsulfate SOSY</i>	3	PA
<i>pyridostigmine bromide SOLN OR</i>	1B	
<i>pyridostigmine bromide TABS 60 MG</i>	1B	
<i>pyridostigmine bromide TBCR</i>	1B	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine</i>	1B	QL(4 ea daily)
<i>ethambutol hcl TABS</i>	1B	
<i>isoniazid SOLN</i>	1B	
<i>isoniazid SYRP</i>	1B	
<i>isoniazid TABS</i>	1B	
PASER PACK	3	QL(3 ea daily)
PRIFTIN	3	
<i>pyrazinamide</i>	1B	
<i>rifabutin</i>	1B	PA
<i>rifampin CAPS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>rifampin SOLR</i>	1B	
SIRTURO	3	PA
TRECTOR	3	QL(4 ea daily)
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
<i>bendamustine hcl SOLR</i>	4	SP; PA
<i>busulfan SOLN</i>	4	SP; PA
<i>carboplatin SOLN 50 MG/5ML</i>	4	SP; PA
<i>carmustine</i>	4	SP; PA
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA
<i>cyclophosphamide CAPS</i>	1B	PA
<i>cyclophosphamide SOLR IJ</i>	4	
GLEOSTINE 10 MG	4	SP; PA
GLEOSTINE 40 MG, 100 MG	4	PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA
<i>ifosfamide SOLR</i>	4	SP; PA
LEUKERAN	4	SP; PA
<i>melfhalan</i>	1B	
<i>melfhalan hcl IV</i>	1B	
MYLERAN TABS	4	SP; PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA
TEMODAR SOLR	4	
<i>temozolomide CAPS</i>	4	SP; PA
<i>thiotepa 15 MG</i>	4	SP; PA
ZANOSAR	4	SP; PA
Antimetabolites		
<i>azacitidine SUSR</i>	4	SP; PA
<i>capecitabine</i>	4	SP; PA
<i>clofarabine</i>	4	SP; PA
<i>cytarabine SOLN</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/Limits
<i>decitabine</i>	4	SP; PA
<i>floxuridine</i>	4	SP; PA
<i>fludarabine phosphate SOLN</i>	4	SP; PA
<i>fludarabine phosphate SOLR</i>	4	SP; PA
<i>fluorouracil 500 MG/10ML</i>	4	SP; PA
<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA
<i>mercaptopurine TABS</i>	1B	
<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B	
<i>methotrexate sodium SOLR</i>	1B	SP
<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP
<i>nelarabine</i>	4	SP; PA
<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA
<i>pralatrexate 20 MG/ML</i>	4	SP; PA
TABLOID	4	SP; PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA
<b>Antineoplastic - Angiogenesis Inhibitors</b>		
INLYTA	4	QL(2 ea daily); SP; PA
LENVIMA 10 MG DAILY DOSE	4	QL(1 ea daily); PA
LENVIMA 12MG DAILY DOSE	4	QL(3 ea daily); PA
LENVIMA 14 MG DAILY DOSE	4	QL(2 ea daily); PA
LENVIMA 18 MG DAILY DOSE	4	QL(3 ea daily); PA
LENVIMA 20 MG DAILY DOSE	4	QL(2 ea daily); PA
LENVIMA 24 MG DAILY DOSE	4	QL(3 ea daily); PA
LENVIMA 4 MG DAILY DOSE	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
LENVIMA 8 MG DAILY DOSE	4	QL(2 ea daily); PA
MVASI	4	PA
ZALTRAP 100 MG/4ML	4	SP; PA
ZIRABEV	4	PA
<b>Antineoplastic - Antibodies</b>		
ADCETRIS	4	SP; PA
ARZERRA	4	SP; PA
RUXIENCE	4	PA
TRUXIMA	4	PA
YERVOY	4	SP; PA
<b>Antineoplastic - Anti-HER2 Agents</b>		
KANJINTI	4	PA
OGIVRI	4	PA
PERJETA	4	SP; PA
TRAZIMERA	4	PA
TUKYSA	4	PA
<b>Antineoplastic - EGFR Inhibitors</b>		
ERBITUX	4	SP; PA
<i>erlotinib hcl</i>	4	QL(1 ea daily); SP; PA
<i>gefitinib</i>	4	QL(2 ea daily); PA
GILOTRIF	4	QL(1 ea daily); PA
IRESSA ( <i>gefitinib</i> )	4	QL(2 ea daily); PA
TAGRISSE 80 MG	4	QL(1 ea daily); PA
TAGRISSE 40 MG	4	QL(2 ea daily); PA
VECTIBIX 100 MG/5ML	4	SP; PA
VIZIMPRO	4	QL(1 ea daily); PA
<b>Antineoplastic - Hedgehog Pathway Inhibitors</b>		
DAURISMO	4	PA
ERIVEDGE	4	QL(1 ea daily); SP; PA
ODOMZO	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
<b>Antineoplastic - Hormonal and Related Agents</b>		
<i>abiraterone acetate 250 MG</i>	4	QL(4 ea daily); SP; PA
<i>abiraterone acetate 500 MG</i>	4	QL(2 ea daily); PA
<i>anastrozole</i>	1B	QL(1 ea daily)
<i>bicalutamide</i>	1B	QL(1 ea daily); SP
ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
ELIGARD KIT SC 7.5 MG	4	QL(0.0089 ea daily); SP; PA
EMCYT	4	SP; PA
ERLEADA 60 MG	4	QL(4 ea daily); PA
ERLEADA 240 MG	4	QL(1 ea daily); PA
<i>exemestane</i>	4	QL(1 ea daily); SP
FIRMAGON	4	QL(0.143 ea daily); SP; PA
<i>flutamide</i>	4	QL(6 ea daily); SP; PA
<i>fulvestrant SOSY</i>	4	QL(0.357 ml daily); SP; PA
<i>letrozole</i>	1B	
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0358 ea daily); SP; PA
LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 ea daily); SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 ea daily); SP; PA
LYSODREN	4	SP; PA
<i>megestrol acetate SUSP</i>	1B	
<i>megestrol acetate TABS</i>	1B	
<i>nilutamide</i>	1B	QL(2 ea daily)
NUBEQA	4	QL(4 ea daily); PA
<i>tamoxifen citrate TABS</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>toremifene citrate</i>	1B	
TRELSTAR MIXJECT	4	SP; PA
XTANDI CAPS	4	QL(4 ea daily); SP; PA
XTANDI TABS 40 MG	4	QL(4 ea daily); PA
XTANDI TABS 80 MG	4	QL(2 ea daily); PA
YONSA	4	QL(4 ea daily); PA
ZOLADEX 10.8 MG	4	QL(0.0119 ea daily); SP; PA
ZOLADEX 3.6 MG	4	QL(0.0357 ea daily); SP; PA
<b>Antineoplastic - Immunomodulators</b>		
POMALYST	4	QL(1 ea daily); PA
<b>Antineoplastic - PDGFR-alpha Inhibitors</b>		
AYVAKIT	4	QL(1 ea daily); PA
<b>Antineoplastic - XPO1 Inhibitors</b>		
XPOVIO	4	PA
XPOVIO 60 MG TWICE WEEKLY	4	PA
XPOVIO 80 MG TWICE WEEKLY	4	PA
<b>Antineoplastic Antibiotics</b>		
<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA
<i>dactinomycin</i>	4	SP; PA
<i>doxorubicin hcl liposomal</i>	4	SP; PA
<i>doxorubicin hcl SOLN</i>	4	SP; PA
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	SP; PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA
<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA
<i>mitoxantrone hcl 2 MG/ML</i>	4	SP; PA
<i>valrubicin</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Antineoplastic Combinations			IBRANCE CAPS	4	QL(1 ea daily); PA
KISQALI FEMARA 200 DOSE	4	PA	IBRANCE TABS	4	QL(1 ea daily); PA
KISQALI FEMARA 400 DOSE	4	PA	ICLUSIG	4	QL(1 ea daily); PA
KISQALI FEMARA 600 DOSE	4	PA	<i>imatinib mesylate</i>	4	QL(2 ea daily); SP; PA
Antineoplastic Enzyme Inhibitors			IMBRUVICA CAPS 70 MG	4	QL(1 ea daily); PA
ALECENSA	4	QL(4 ea daily); PA	IMBRUVICA CAPS 140 MG	4	QL(3 ea daily); PA
ALUNBRIG TABS	4	QL(1 ea daily); PA	IMBRUVICA SUSP	4	QL(8 ml daily); PA
ALUNBRIG TBPk	4	QL(1 ea daily); PA	IMBRUVICA TABS	4	QL(1 ea daily); PA
BALVERSA	4	PA	INREBIC	4	PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	JAKAFI	4	QL(2 ea daily); SP; PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA	KISQALI	4	PA
BOSULIF TABS 400 MG	4	QL(1 ea daily); PA	KOSELUGO	4	PA
BOSULIF TABS 100 MG, 500 MG	4	QL(1 ea daily); SP; PA	KYPROLIS	4	PA
BRAFTOVI 75 MG	4	SP; PA	<i>lapatinib ditosylate</i>	4	QL(6 ea daily); SP; PA
BRUKINSA	4	PA	LORBRENA	4	QL(1 ea daily); PA
CABOMETYX TABS	4	QL(1 ea daily); PA	LYNPARZA TABS	4	QL(4 ea daily); PA
CALQUENCE	4	QL(2 ea daily); PA	MEKINIST SOLR	4	PA
CALQUENCE	4	QL(2 ea daily); PA	MEKINIST TABS	4	PA
CAPRELSA	4	QL(1 ea daily); SP; PA	MEKTOVI	4	SP; PA
COMETRIQ KIT	4	QL(4 ea daily); SP; PA	NINLARO	4	QL(0.143 ea daily); PA
COMETRIQ KIT	4	QL(2 ea daily); SP; PA	<i>pazopanib hcl</i>	4	QL(4 ea daily); SP; PA
COMETRIQ KIT	4	QL(3 ea daily); SP; PA	PEMAZYRE	4	QL(1 ea daily); PA
COPIKTRA	4	PA	PIQRAY 200MG DAILY DOSE	4	PA
<i>dasatinib</i>	4	QL(1 ea daily); SP; PA	PIQRAY 250MG DAILY DOSE	4	PA
<i>everolimus TABS</i>	4	QL(1 ea daily); SP; PA	PIQRAY 300MG DAILY DOSE	4	PA
			QINLOCK	4	PA
			RETEVMO CAPS	4	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>romidepsin SOLR</i>	4	SP; PA
ROZLYTREK CAPS	4	PA
RUBRACA	4	QL(4 ea daily); PA
SCEMBLIX 40 MG	4	QL(10 ea daily); PA
SCEMBLIX 100 MG	4	QL(4 ea daily); PA
SCEMBLIX 20 MG	4	QL(2 ea daily); PA
<i>sorafenib tosylate</i>	4	QL(4 ea daily); SP; PA
SPRYCEL ( <i>dasatinib</i> )	4	QL(1 ea daily); SP; PA
STIVARGA	4	QL(4 ea daily); SP; PA
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 ea daily); SP; PA
<i>sunitinib malate 37.5 MG</i>	4	QL(1 ea daily); PA
TABRECTA	4	PA
TAFINLAR CAPS	4	PA
TAFINLAR TBSO	4	PA
TALZENNA	4	QL(1 ea daily); PA
TASIGNA 150 MG, 200 MG	4	QL(4 ea daily); SP; PA
TASIGNA 50 MG	4	QL(4 ea daily); PA
TAZVERIK	4	PA
<i>temsirolimus</i>	4	QL(0.143 ml daily); SP; PA
TIBSOVO	4	PA
TURALIO	4	PA
VERZENIO	4	PA
VITRAKVI CAPS	4	PA
VITRAKVI SOLN	4	PA
VOTRIENT ( <i>pazopanib hcl</i> )	4	QL(4 ea daily); SP; PA
XALKORI CAPS	4	QL(2 ea daily); SP; PA
XOSPATA	4	PA
ZEJULA CAPS	4	QL(3 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
ZEJULA TABS 100 MG	4	QL(3 ea daily); PA
ZEJULA TABS 200 MG, 300 MG	4	QL(1 ea daily); PA
ZELBORAF	4	SP; PA
ZOLINZA	4	QL(4 ea daily); SP; PA
ZYDELIG	4	QL(2 ea daily); PA
Antineoplastic Enzymes		
ONCASPAR	4	SP; PA
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA
<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
<i>bexarotene</i>	4	SP; PA
<i>dacarbazine SOLR 200 MG</i>	4	SP; PA
<i>hydroxyurea</i>	1B	
MATULANE	4	SP; PA
NIPENT	4	SP; PA
PHOTOFRIN	4	SP; PA
PROLEUKIN	4	SP; PA
SYNRIBO	4	SP; PA
<i>tretinoin (chemotherapy)</i>	1B	
UVADEX	4	SP; PA
Chemotherapy Adjuncts		
KEPIVANCE 6.25 MG	4	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium SOLR</i>	1B	
<i>leucovorin calcium TABS</i>	1B	
VORAXAZE	4	SP; PA
Mitotic Inhibitors		
<i>docetaxel CONC 20 MG/ML</i>	4	SP; PA
<i>docetaxel SOLN 20 MG/2ML</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/Limits
<i>eribulin mesylate</i>	4	SP; PA
ETOPOPHOS	4	SP; PA
<i>etoposide CAPS</i>	4	SP; PA
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	PA
HALAVEN ( <i>eribulin mesylate</i> )	4	SP; PA
IXEMPRA KIT 15 MG	4	SP; PA
JEVTANA	4	SP; PA
<i>paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML</i>	4	SP; PA
<i>paclitaxel protein-bound particles</i>	4	SP; PA
<i>vincristine sulfate</i>	4	SP; PA
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA
Topoisomerase I Inhibitors		
HYCAMTIN CAPS	4	SP; PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
<i>topotecan hcl SOLN</i>	4	
<i>topotecan hcl SOLR</i>	4	
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease</b>		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1B	
Antiparkinson Anticholinergics		
<i>benztropine mesylate SOLN</i>	1B	
<i>benztropine mesylate TABS</i>	1B	
<i>trihexyphenidyl hcl SOLN</i>	1B	
<i>trihexyphenidyl hcl TABS</i>	1B	
Antiparkinson COMT Inhibitors		
<i>entacapone</i>	1B	QL(8 ea daily)
<i>tolcapone</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	1B	
<i>amantadine hcl SOLN</i>	1B	
<i>amantadine hcl TABS</i>	1B	
<i>apomorphine hydrochloride SOCT</i>	4	PA
<i>bromocriptine mesylate CAPS</i>	1B	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1B	
<i>carbidopa-levodopa-entacapone</i>	1B	
<i>carbidopa-levodopa TABS</i>	1B	
<i>carbidopa-levodopa TBCR</i>	1B	
<i>carbidopa-levodopa TBDP</i>	1B	
NEUPRO	2	
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 ea daily)
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
<i>ropinirole hydrochloride TABS</i>	1B	
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 ea daily); ST
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 ea daily); ST
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	1B	QL(1 ea daily); PA
<i>selegiline hcl CAPS</i>	1B	
<i>selegiline hcl TABS</i>	1B	
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders</b>		
Antimanic Agents		
<i>lithium</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>lithium carbonate CAPS</i>	1B		<i>asenapine maleate 2.5 MG</i>	1B	QL(4 ea daily); PA
<i>lithium carbonate TABS</i>	1B		<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily); PA
<i>lithium carbonate TBCR</i>	1B		<i>clozapine TABS</i>	1B	
Antipsychotics - Misc.			<i>clozapine TBDP 100 MG</i>	1B	QL(9 ea daily)
EQUETRO 300 MG	3	QL(4 ea daily); ST	<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)
EQUETRO 100 MG	3	QL(2 ea daily); ST	<i>clozapine TBDP 25 MG</i>	1B	QL(3 ea daily)
EQUETRO 200 MG	3	QL(8 ea daily); ST	<i>loxapine succinate</i>	1B	
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 ea daily)	<i>olanzapine SOLR</i>	1B	QL(0.215 ea daily)
<i>lurasidone hcl 80 MG</i>	1B	QL(2 ea daily)	<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 ea daily)
<i>ziprasidone hcl</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)	<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 ea daily)
Benzisoxazoles			<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 ea daily)
FANAPT	2	QL(2 ea daily); PA	<i>olanzapine TBDP 20 MG</i>	1B	QL(1 ea daily)
FANAPT TITRATION PACK	2	PA	<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	1B	QL(4 ea daily); AL(At least 10 yrs old)
<i>paliperidone 1.5 MG, 3 MG, 9 MG</i>	1B	QL(1 ea daily)	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	1B	QL(2 ea daily); AL(At least 10 yrs old)
<i>paliperidone 6 MG</i>	1B	QL(2 ea daily)	<i>quetiapine fumarate TB24 300 MG, 400 MG</i>	1B	QL(2 ea daily)
PERSERIS PRSY	2	QL(0.072 ea daily); PA	<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)
RISPERDAL CONSTA ( <i>risperidone microspheres</i> )	2	QL(0.072 ea daily); PA	Phenothiazines		
<i>risperidone microspheres</i>	1B	QL(0.072 ea daily); PA	<i>chlorpromazine hcl SOLN</i>	3	
<i>risperidone SOLN</i>	1B	QL(8 ml daily)	<i>chlorpromazine hcl TABS</i>	1B	
<i>risperidone TABS</i>	1B	QL(4 ea daily)	<i>fluphenazine hcl CONC</i>	1B	
<i>risperidone TBDP</i>	1B	QL(4 ea daily)	<i>fluphenazine hcl ELIX</i>	1B	
Butyrophenones			<i>fluphenazine hcl SOLN</i>	1B	
<i>haloperidol decanoate</i>	1B	QL(0.036 ml daily)	<i>fluphenazine hcl TABS</i>	1B	
<i>haloperidol lactate CONC</i>	1B		<i>perphenazine TABS</i>	1B	
<i>haloperidol lactate SOLN</i>	1B		<i>prochlorperazine</i>	1B	
<i>haloperidol TABS</i>	1B		<i>prochlorperazine maleate TABS</i>	1B	
Dibenzapines					

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Drug Name	Drug Tier	Requirements/Limits
<i>thioridazine hcl</i>	1B	
<i>trifluoperazine hcl TABS</i>	1B	
Quinolone Derivatives		
<i>aripiprazole SOLN OR</i>	1B	QL(30 ml daily); AL(At least 6 yrs old)
<i>aripiprazole TABS</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
REXULTI	3	PA
Thioxanthenes		
<i>thiothixene</i>	1B	
<b>ANTIVIRALS - Drugs to Treat Viral Infections</b>		
Antiretrovirals		
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 ea daily)
<i>abacavir sulfate SOLN</i>	1B	QL(32 ml daily)
<i>abacavir sulfate TABS</i>	1B	QL(2 ea daily)
APTIVUS CAPS	3	QL(4 ea daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 ea daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 ea daily)
BIKTARVY	3	QL(1 ea daily)
CIMDUO	3	QL(1 ea daily); ST
COMPLERA	3	QL(1 ea daily)
<i>darunavir TABS</i>	1B	
DELSTRIGO	3	QL(1 ea daily)
DOVATO	3	QL(1 ea daily)
EDURANT	3	QL(1 ea daily)
<i>efavirenz CAPS 200 MG</i>	1B	QL(2 ea daily)
<i>efavirenz CAPS 50 MG</i>	1B	QL(3 ea daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>efavirenz TABS</i>	1B	QL(1 ea daily)
<i>emtricitabine CAPS</i>	1B	QL(1 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 ea daily)
EMTRIVA SOLN	3	QL(24 ml daily)
<i>etravirine 100 MG</i>	1B	QL(4 ea daily)
<i>etravirine 200 MG</i>	1B	QL(2 ea daily)
EVOTAZ	3	QL(1 ea daily)
<i>fosamprenavir calcium TABS</i>	1B	QL(4 ea daily)
FUZEON SOLR	4	SP; PA
GENVOYA	3	QL(1 ea daily)
INTELENCE 25 MG	3	QL(8 ea daily)
ISENTRESS HD TABS	3	QL(2 ea daily)
ISENTRESS CHEW	3	QL(6 ea daily)
ISENTRESS TABS	3	QL(2 ea daily)
JULUCA	3	QL(1 ea daily)
<i>lamivudine SOLN</i>	1B	QL(30 ml daily)
<i>lamivudine TABS 150 MG</i>	1B	QL(2 ea daily)
<i>lamivudine TABS 300 MG</i>	1B	QL(1 ea daily)
<i>lamivudine-zidovudine</i>	1B	QL(2 ea daily)
LEXIVA SUSP	3	QL(56 ml daily)
<i>lopinavir-ritonavir SOLN</i>	1B	QL(12.5 ml daily)
<i>lopinavir-ritonavir TABS</i>	1B	QL(4 ea daily)
<i>maraviroc TABS 150 MG</i>	1B	QL(2 ea daily)
<i>maraviroc TABS 300 MG</i>	1B	QL(4 ea daily)
<i>nevirapine SUSP</i>	1B	QL(40 ml daily)
<i>nevirapine TABS</i>	1B	QL(2 ea daily)
<i>nevirapine TB24 100 MG</i>	1B	QL(3 ea daily)
<i>nevirapine TB24 400 MG</i>	1B	QL(1 ea daily)
NORVIR CAPS	2	QL(12 ea daily)
NORVIR PACK	3	QL(12 ea daily)
NORVIR SOLN	3	QL(15 ml daily)

Drug Name	Drug Tier	Requirements/Limits
ODEFSEY	3	QL(1 ea daily)
PIFELTRO	3	QL(1 ea daily)
PREZCOBIX	3	QL(1 ea daily)
PREZISTA SUSP	3	QL(12 ml daily)
PREZISTA TABS (darunavir)	3	
PREZISTA TABS 75 MG, 150 MG	3	QL(2 ea daily)
RETROVIR IV INFUSION SOLN	3	
ritonavir TABS	1B	QL(12 ea daily)
RUKOBIA	4	PA
SELZENTRY SOLN	3	QL(30 ml daily)
SELZENTRY TABS 25 MG, 75 MG	3	QL(2 ea daily)
stavudine CAPS	1B	QL(2 ea daily)
STRIBILD	3	QL(1 ea daily)
tenofovir disoproxil fumarate TABS	1B	
TIVICAY TABS	3	QL(2 ea daily)
TRIUMEQ TABS	3	QL(1 ea daily)
TRIZIVIR	3	QL(2 ea daily)
TYBOST	3	QL(1 ea daily)
VIRACEPT TABS 625 MG	3	QL(4 ea daily)
VIRACEPT TABS 250 MG	3	QL(10 ea daily)
VIREAD POWD	3	QL(7.5 gm daily)
VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 ea daily)
zidovudine CAPS	1B	QL(6 ea daily)
zidovudine SYRP	1B	QL(60 ml daily)
zidovudine TABS	1B	QL(2 ea daily)
<b>CMV Agents</b>		
cidofovir	3	
ganciclovir sodium SOLR	1B	
valganciclovir hcl TABS	1B	QL(4 ea daily); PA
<b>Hepatitis Agents</b>		

Drug Name	Drug Tier	Requirements/Limits
adefovir dipivoxil	4	QL(1 ea daily); SP
BARACLUDGE SOLN	4	QL(20 ml daily); SP; PA
entecavir TABS	4	QL(1 ea daily); SP
EPIVIR HBV SOLN	4	QL(60 ml daily); SP; PA
lamivudine (hbv) TABS	1B	QL(3 ea daily); SP
PEGASYS SOLN	4	QL(0.0714 ml daily); SP; PA
PEGASYS SOSY	4	QL(0.072 ml daily); PA
ribavirin (hepatitis c) CAPS	1B	QL(7 ea daily)
ribavirin (hepatitis c) TABS 200 MG	1B	QL(7 ea daily)
SOFOSBUVIR/VELPATA SVIR TABS	1B	QL(1 ea daily); PA
SOVALDI TABS 400 MG	4	QL(1 ea daily); SP; PA
SOVALDI TABS 200 MG	4	QL(1 ea daily); PA
VOSEVI	4	PA
<b>Herpes Agents</b>		
acyclovir CAPS	1A	QL(5 ea daily; 50 ea per fill retail; 50 per fill mail)
acyclovir SUSP	1B	QL(13.34 ml daily)
acyclovir TABS OR	1B	QL(5 ea daily)
famciclovir 500 MG	1B	QL(4 ea daily)
famciclovir 125 MG, 250 MG	1B	QL(3 ea daily)
valacyclovir hcl 1 GM, 1000 MG	1B	QL(4 ea daily)
valacyclovir hcl 500 MG	1B	QL(2 ea daily)
<b>Influenza Agents</b>		

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Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate CAPS</i>	1B	Limit 1 fill every 90 days.; QL(10 ea per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>oseltamivir phosphate SUSR</i>	1B	Limit 1 fill every 90 days.; QL(125 ml per fill retail); 1 max fill(s) per 90 day(s) retail
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 ea daily)
<b>BETA BLOCKERS - Drugs to Treat High Blood Pressure</b>		
Alpha-Beta Blockers		
<i>carvedilol</i>	1B	
<i>carvedilol phosphate</i>	3	QL(1 ea daily)
<i>labetalol hcl SOLN</i>	1B	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	
<i>labetalol hcl TABS 300 MG</i>	1B	QL(8 ea daily)
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	1B	
<i>atenolol TABS</i>	1B	
<i>betaxolol hcl</i>	1B	
<i>bisoprolol fumarate</i>	1B	
<i>metoprolol succinate TB24 200 MG</i>	1B	QL(2 ea daily)
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1B	
<i>nebivolol hcl 20 MG</i>	3	QL(2 ea daily)
<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 ea daily)
Beta Blockers Non-Selective		
HEMANGEOL SOLN OR	4	QL(75 ml daily); PA
<i>nadolol TABS 20 MG</i>	1B	QL(3 ea daily)
<i>nadolol TABS 40 MG</i>	1B	QL(6 ea daily)
<i>nadolol TABS 80 MG</i>	1B	
<i>pindolol TABS</i>	1B	
<i>propranolol hcl CP24</i>	1B	QL(2 ea daily)
<i>propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML</i>	1B	
<i>propranolol hcl TABS</i>	1B	
<i>sotalol hcl (afib/afll)</i>	1B	
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 ea daily)
<i>sotalol hcl TABS 240 MG</i>	1B	
<i>timolol maleate TABS</i>	1B	
<b>CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure</b>		
Calcium Channel Blockers		
<i>amlodipine besylate TABS</i>	1B	
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 ea daily)
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B	
<i>diltiazem hcl extended release beads</i>	1B	
<i>diltiazem hcl CP12</i>	1B	QL(2 ea daily)
<i>diltiazem hcl CP24</i>	1B	
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	
DILTIAZEM HCL SOLR	1B	
<i>diltiazem hcl TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl TB24</i>	1B	
<i>felodipine</i>	1B	
<i>isradipine CAPS</i>	1B	
<i>nicardipine hcl CAPS</i>	1B	
<i>nicardipine hcl SOLN</i>	1B	
<i>nifedipine CAPS 20 MG</i>	1B	QL(9 ea daily)
<i>nifedipine CAPS 10 MG</i>	1B	
<i>nifedipine TB24 60 MG</i>	1B	QL(2 ea daily)
<i>nifedipine TB24</i>	1B	
<i>nifedipine TB24 90 MG</i>	1B	QL(1 ea daily)
<i>nimodipine CAPS</i>	1B	
<i>nisoldipine</i>	1B	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B	
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 ea daily)
<i>verapamil hcl SOLN 2.5 MG/ML</i>	1B	
<i>verapamil hcl TABS</i>	1B	
<i>verapamil hcl TBCR</i>	1B	
<b>CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm</b>		
Cardiac Glycosides		
<i>digoxin SOLN OR 0.05 MG/ML</i>	1B	
<i>digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
LANOXIN SOLN IJ ( <i>digoxin</i> )	2	
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG ( <i>digoxin</i> )	2	
<b>CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions</b>		
Cardiovascular Agents Misc. - Combinations		

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 ea daily)
<i>isosorbide dinitrate-hydralazine hcl</i>	1B	
Impotence Agents		
<i>sildenafil citrate</i>	1B	QL(0.1334 ea daily); PA
STENDRA	3	QL(0.134 ea daily)
<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 ea daily); PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	PA
ORENITRAM TBCR	4	PA
<i>treprostinil SOLN IJ</i>	4	SP; PA
TYVASO REFILL KIT SOLN IN	4	PA
TYVASO STARTER KIT SOLN IN	4	PA
TYVASO SOLN IN	4	PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 ea daily); SP; PA
<i>bosentan TABS 62.5 MG</i>	4	QL(2 ea daily); PA
<i>bosentan TABS 125 MG</i>	4	QL(2 ea daily); SP; PA
OPSUMIT	4	QL(1 ea daily); PA
TRACLEER TBSO	4	QL(2 ea daily); SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ml daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ml daily); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 ea daily); SP; PA	<i>cephalexin CAPS</i>	1B	
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 ea daily); SP; PA	<i>cephalexin SUSR</i>	1B	
Pulmonary Hypertension - Prostacyclin Receptor Agonist			Cephalosporins - 2nd Generation		
UPTRAVI TITRATION PACK TBPB	4	1 max fill(s) per 180 day(s) retail; PA	<i>cefaclor CAPS</i>	1B	
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 ea daily); PA	<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1B	
UPTRAVI TABS 200 MCG	4	PA	<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator			<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
ADEMPAS	4	QL(3 ea daily); PA	<i>cefprozil SUSR</i>	1B	
Sinus Node Inhibitors			<i>cefprozil TABS</i>	1B	
CORLANOR SOLN	3	QL(15 ml daily); PA	<i>cefuroxime axetil TABS</i>	1B	
CORLANOR TABS ( <i>ivabradine hcl</i> )	3	QL(2 ea daily); PA	<i>cefuroxime sodium IJ 750 MG</i>	1B	
<i>ivabradine hcl TABS</i>	1B	QL(2 ea daily); PA	Cephalosporins - 3rd Generation		
Transthyretin Stabilizers			<i>cefdinir CAPS</i>	1B	
VYNDAMAX	4	QL(1 ea daily); PA	<i>cefdinir SUSR</i>	1B	
VYNDAQEL	4	QL(4 ea daily); PA	<i>cefixime CAPS</i>	1B	
CEPHALOSPORINS - Drugs to Treat Bacterial Infections			<i>cefixime SUSR</i>	1B	ST
Cephalosporins - 1st Generation			<i>cefotaxime sodium IJ 1 GM, 2 GM</i>	1B	
<i>cefadroxil CAPS</i>	1B		<i>cefpodoxime proxetil SUSR</i>	1B	
<i>cefadroxil SUSR</i>	1B		<i>cefpodoxime proxetil TABS</i>	1B	
<i>cefadroxil TABS</i>	1B		<i>ceftazidime IJ 1 GM, 6 GM</i>	1B	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B		<i>ceftriaxone sodium IJ 250 MG</i>	1A	
			<i>ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG</i>	1B	
			Cephalosporins - 4th Generation		
			<i>cefepime hcl SOLR IV 2 GM</i>	1B	
			Cephalosporins - 5th Generation		
			TEFLARO	3	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<b>CONTRACEPTIVES - Drugs to Prevent Pregnancy</b>					
<b>Combination Contraceptives - Oral</b>					
BALCOLTRA (levonorgestrel-ethinyl estradiol-iron)	0		norethindrone & ethinyl estradiol-fe	0	
desogestrel & ethinyl estradiol	0		norethindrone acet & eth estra TABS	0	
desogestrel-ethinyl estradiol (biphasic)	0		norethindrone acetate-ethinyl estradiol-fe	0	
desogestrel-ethinyl estradiol (triphasic)	0		norethindrone-eth estradiol (triphasic)	0	
drospirenone-ethinyl estradiol	0		norgestimate-ethinyl estradiol	0	
drospirenone-ethinyl estradiol-levomefolate calcium	0		norgestimate-ethinyl estradiol (triphasic)	0	
ethynodiol diacet & eth estrad	0		norgestrel & ethinyl estradiol 30 MCG-0.3 MG	0	
levonorgestrel & eth estradiol TABS	0		TYBLUME CHEW	0	
levonorgestrel-eth estradiol (triphasic)	0		<b>Combination Contraceptives - Transdermal</b>		
levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	0		norelgestromin-ethinyl estradiol	0	
levonorgestrel-ethinyl estradiol (continuous)	0		TWIRLA	0	QL(3 ea per 28 day(s) retail; 9 ea per 84 days mail)
levonorgestrel-ethinyl estradiol-iron	0		<b>Combination Contraceptives - Vaginal</b>		
LO LOESTRIN FE TABS	0		ANNOVERA	0	
NATAZIA	0		etonogestrel-ethinyl estradiol	0	QL(0.05 ea daily)
NEXTSTELLIS	0		<b>Copper Contraceptives - IUD</b>		
norethin acet & estrad-fe CAPS	0		PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	0	
norethin acet & estrad-fe CHEW	0		<b>Emergency Contraceptives</b>		
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	0		ELLA	0	
norethindrone & eth estradiol	0		levonorgestrel (emergency oc) 1.5 MG	0	
			<b>Progestin Contraceptives - Implants</b>		
			NEXPLANON	0	
			<b>Progestin Contraceptives - Injectable</b>		
			DEPO-SUBQ PROVERA 104 SUSY SC	0	

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Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ml per 90 day(s) retail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(90 Day(s) limit ; 1 ml per 90 day(s) retail)
<b>Progestin Contraceptives - IUD</b>		
KYLEENA	0	
LILETTA 20.1 MCG/DAY	0	
MIRENA	0	
SKYLA	0	
<b>Progestin Contraceptives - Oral</b>		
<i>norethindrone (contraceptive)</i>	0	
OPILL	0	
SLYND	0	QL(1 ea daily)
<b>CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions</b>		
<b>Glucocorticosteroids</b>		
<i>budesonide CPEP</i>	1B	QL(3 ea daily)
<i>deflazacort SUSP</i>	4	PA
<i>deflazacort TABS</i>	4	PA
DEPO-MEDROL SUSP	3	
DEXAMETHASONE INTENSOL CONC	1B	
<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	1B	
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	1B	
<i>dexamethasone ELIX</i>	1B	
<i>dexamethasone SOLN</i>	1B	
<i>dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG</i>	1B	
<i>dexamethasone TABS 0.5 MG, 0.75 MG</i>	1A	

Drug Name	Drug Tier	Requirements/Limits
EMFLAZA SUSP ( <i>deflazacort</i> )	4	PA
EMFLAZA TABS ( <i>deflazacort</i> )	4	PA
<i>hydrocortisone TABS</i>	1B	
MEDROL TABS	3	
<i>methylprednisolone acetate SUSP</i>	1B	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1B	
<i>methylprednisolone TABS</i>	1B	
<i>methylprednisolone TBPK</i>	1B	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1B	
<i>prednisolone sodium phosphate TBDP</i>	3	
<i>prednisolone SOLN</i>	1B	
<i>prednisolone TABS</i>	1B	
<i>prednisone SOLN</i>	1B	
<i>prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG</i>	1A	
<i>prednisone TABS 1 MG, 5 MG</i>	1B	
<i>prednisone TBPK</i>	1B	
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-CORTEF 250 MG	3	
SOLU-MEDROL 2 GM	3	
<i>triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML</i>	1B	
<b>Mineralocorticoids</b>		
<i>fludrocortisone acetate TABS</i>	1B	
<b>COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms</b>		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Antitussives</b>			<i>benzoyl peroxide FOAM 5.3 %, 9.8 %</i>	1B	AL(At least 12 yrs old); RX/OTC
<i>benzonatate 150 MG</i>	1B	QL(4 ea daily)	<i>benzoyl peroxide GEL 10 %</i>	1B	AL(At least 12 yrs old)
<i>benzonatate 200 MG</i>	1B	QL(3 ea daily)	<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old)
<i>benzonatate 100 MG</i>	1B	QL(6 ea daily)	<i>benzoyl peroxide LIQD 4 %, 7 %, 10 %</i>	1B	AL(At least 12 yrs old)
<b>Cough/Cold/Allergy Combinations</b>			<i>clindamycin phosphate (topical) FOAM</i>	1B	AL(At least 12 yrs old); PA
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1B		<i>clindamycin phosphate (topical) GEL</i>	1B	QL(8 gm daily)
TUZISTRA XR	2	PA	<i>clindamycin phosphate (topical) LOTN</i>	1B	AL(At least 12 yrs old)
<b>Misc. Respiratory Inhalants</b>			<i>clindamycin phosphate (topical) SOLN</i>	1B	QL(4 ml daily); AL(At least 12 yrs old)
HYPERSAL NEBU	1B		<i>clindamycin phosphate (topical) SWAB</i>	1B	AL(At least 12 yrs old)
NEBUSAL NEBU	1B		<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1B	AL(At least 12 yrs old); PA
<i>sodium chloride (inhalant) NEBU 7 %</i>	1B		<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1B	AL(At least 12 yrs old); PA
<b>Mucolytics</b>			<i>clindamycin phosphate-tretinoin</i>	1B	AL(At least 12 yrs old); ST
<i>acetylcysteine SOLN</i>	1B		DIFFERIN LOTN	2	AL(At least 12 yrs old); ST
<b>DERMATOLOGICALS - Drugs to Treat Skin Conditions</b>			<i>erythromycin (acne aid) PADS</i>	1B	AL(At least 12 yrs old)
<b>Acne Products</b>			<i>erythromycin (acne aid) SOLN</i>	1B	AL(At least 12 yrs old)
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1B	AL(At least 12 yrs old); ST	<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	AL(At least 12 yrs old); PA
<i>adapalene CREA</i>	1B	AL(At least 12 yrs old); ST	PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old); RX/OTC
<i>adapalene GEL</i>	1B	AL(At least 12 yrs old); ST; RX/OTC	<i>sulfacetamide sodium (acne)</i>	1B	AL(At least 12 yrs old)
AZELEX	3	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 12 yrs old); ST	<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1B	AL(At least 12 yrs old)
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old); RX/OTC			
BENZEPRO FOAM 5.3 %	2	AL(At least 12 yrs old); RX/OTC			
<i>benzoyl peroxide-erythromycin GEL</i>	1B	AL(At least 12 yrs old); PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %</i>	1B	AL(At least 12 yrs old); ST	<i>ciclopirox GEL</i>	1B	QL(3.35 gm daily)
<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	1B	AL(At least 12 yrs old)	<i>ciclopirox SHAM</i>	1B	QL(10 ml daily)
<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	1B	AL(At least 12 yrs old)	<i>ciclopirox SOLN</i>	1B	QL(0.22 ml daily)
<i>tretinoin microsphere 0.1 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 gm daily); RX/OTC
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	<i>clotrimazole (topical) SOLN</i>	1B	QL(10 ml daily); RX/OTC
<i>tretinoin GEL 0.01 %, 0.025 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	<i>clotrimazole w/ betamethasone CREA</i>	1B	QL(8 gm daily)
<b>Agents for External Genital and Perianal Warts</b>			<i>clotrimazole w/ betamethasone LOTN</i>	1B	
VEREGEN	3	QL(1 gm daily)	<i>econazole nitrate CREA</i>	1B	QL(85 gm per fill retail; 85 per fill mail)
<b>Antibiotics - Topical</b>			ERTACZO	3	QL(2.15 gm daily)
ALTABAX	2	QL(15 gm per 30 day(s) retail; 15 gm per 30 days mail)	<i>ketoconazole (topical) CREA</i>	1B	QL(10 gm daily)
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 gm daily)	<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ml daily)
<i>gentamicin sulfate (topical) OINT</i>	1B		<i>luliconazole</i>	1B	PA
<i>mupirocin OINT</i>	1B	QL(6 gm daily)	<i>naftifine hcl CREA 2 %</i>	1B	QL(2 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
NEO-SYNALAR	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail); PA	<i>naftifine hcl CREA 1 %</i>	1B	QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<b>Antifungals - Topical</b>			<i>nystatin (topical) CREA</i>	1B	QL(10 gm daily)
<i>butenafine hcl</i>	1B	QL(6 gm daily); RX/OTC	<i>nystatin (topical) OINT</i>	1B	QL(6 gm daily)
<i>ciclopirox olamine CREA</i>	1B	QL(90 gm per fill retail); 1 max fill(s) per 30 day(s) retail	<i>nystatin (topical) POWD EX</i>	1B	QL(10 gm daily)
<i>ciclopirox olamine SUSP</i>	1B		<i>nystatin-triamcinolone CREA</i>	1B	QL(10 gm daily)
			<i>nystatin-triamcinolone OINT</i>	1B	QL(4 gm daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>oxiconazole nitrate CREA</i>	1B	Limit 1 Fill per 180 days; QL(3 gm daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 gm per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
OXISTAT LOTN	2	Limit 1 Fill per 180 days; QL(2 ml daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	<b>Antipsoriatics</b>		
<i>sulconazole nitrate CREA</i>	1B		<i>acitretin 25 MG</i>	1B	QL(2 ea daily)
<i>sulconazole nitrate SOLN</i>	1B	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 ea daily)
<i>tavaborole</i>	1B	PA	<i>calcipotriene CREA</i>	1B	QL(4 gm daily); PA
<b>Anti-inflammatory Agents - Topical</b>			<i>calcipotriene OINT</i>	1B	QL(4 gm daily); PA
<i>diclofenac epolamine PTCH EX</i>	1B	QL(2 ea daily); PA	<i>calcipotriene SOLN</i>	1B	QL(4 ml daily); PA
<i>diclofenac sodium (topical) GEL EX</i>	1B	QL(3.34 gm daily); RX/OTC	<i>calcitriol (topical)</i>	1B	QL(3.34 gm daily)
<b>Antineoplastic or Premalignant Lesion Agents - Topical</b>			COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ml daily); PA
<i>bexarotene (topical)</i>	4	SP; PA	COSENTYX UNOREADY SOAJ	4	QL(0.072 ml daily); PA
<i>diclofenac sodium (actinic keratoses) EX</i>	1B	QL(3.34 gm daily); PA	COSENTYX SOSY 150 MG/ML	4	QL(0.072 ml daily); PA
<i>fluorouracil (topical) CREA 5 %</i>	1B	QL(4 gm daily)	COSENTYX SOSY 150 MG/ML	4	QL(0.036 ml daily); PA
<i>fluorouracil (topical) SOLN</i>	1B	QL(2 ml daily)	COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ml daily); PA
PANRETIN	3	QL(60 gm per 30 day(s) retail; 60 gm per 30 days mail)	<i>methoxsalen rapid</i>	1B	QL(4 ea daily)
<b>Antipruritics - Topical</b>			SKYRIZI PEN SOAJ	4	QL(0.025 ml daily); PA
			SKYRIZI PSKT	4	QL(0.025 ea daily); PA
			SKYRIZI SOSY	4	QL(0.025 ml daily); PA
			STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ml daily); PA
			STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ml daily); PA
			STELARA SOSY 90 MG/ML	4	QL(0.018 ml daily); SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tazarotene CREA 0.1 %</i>	1B	QL(1 gm daily)	<i>betamethasone dipropionate (topical) LOTN</i>	1B	
TREMFYA SOPN	4	QL(0.018 ml daily); PA	<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 gm daily)
TREMFYA SOSY 100 MG/ML	4	QL(0.018 ml daily); PA	<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 gm daily)
Antiseborrheic Products			<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ml daily)
<i>selenium sulfide LOTN 2.5 %</i>	1B		<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 gm daily)
Antivirals - Topical			<i>betamethasone valerate CREA</i>	1B	QL(2.5 gm daily)
<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone valerate FOAM</i>	1B	QL(1.67 gm daily)
<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail	<i>betamethasone valerate LOTN</i>	1B	QL(5 ml daily)
<i>penciclovir</i>	3	QL(0.18 gm daily)	<i>betamethasone valerate OINT</i>	1B	QL(3 gm daily)
Burn Products			<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST
<i>mafenide acetate PACK</i>	3		<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
<i>silver sulfadiazine</i>	1B	QL(20 gm daily)	<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 gm daily); PA
SULFAMYLON CREA	3		<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 gm daily); PA
Corticosteroids - Topical			<i>clobetasol propionate FOAM</i>	1B	QL(3 gm daily); ST
<i>alclometasone dipropionate CREA</i>	1B	QL(2 gm daily)	<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 gm daily); ST
<i>alclometasone dipropionate OINT</i>	1B	QL(3 gm daily)	<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 gm daily); PA
<i>amcinonide CREA</i>	1B	QL(60 gm per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ml daily); PA
<i>amcinonide LOTN</i>	3		<i>clocortolone pivalate</i>	3	QL(3 gm daily)
<i>amcinonide OINT</i>	3				
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 gm daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>fluticasone propionate OINT</i>	1B	QL(4 gm daily)
<i>desonide CREA</i>	1B	QL(4 gm daily)	<i>halcinonide CREA</i>	1B	PA
<i>desonide LOTN</i>	1B	QL(4 ml daily)	<i>halobetasol propionate CREA</i>	1B	QL(3.5 gm daily)
<i>desonide OINT</i>	1B	QL(3 gm daily)	<i>halobetasol propionate OINT</i>	1B	QL(3.5 gm daily)
<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 gm daily)	HALOG OINT	3	PA
<i>desoximetasone GEL</i>	1B	QL(3 gm daily)	<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1B	QL(15.15 ea daily); RX/OTC
<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 gm daily)	<i>hydrocortisone (topical) LOTN 2.5 %</i>	1B	
<i>diflorasone diacetate CREA</i>	1B	PA	<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1B	QL(15.15 gm daily); RX/OTC
<i>diflorasone diacetate OINT</i>	1B	PA	<i>hydrocortisone butyrate CREA</i>	1B	QL(3 gm daily)
<i>fluocinolone acetonide CREA 0.01 %</i>	1B		<i>hydrocortisone butyrate OINT</i>	1B	QL(3 gm daily)
<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 gm daily)	<i>hydrocortisone butyrate SOLN</i>	1B	QL(5 ml daily)
<i>fluocinolone acetonide OIL</i>	1B	QL(8 ml daily)	<i>hydrocortisone valerate CREA</i>	1B	
<i>fluocinolone acetonide OINT</i>	1B	QL(4 gm daily)	<i>hydrocortisone valerate OINT</i>	1B	
<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ml daily)	<i>mometasone furoate CREA</i>	1B	QL(3 gm daily)
<i>fluocinonide emulsified base</i>	1B	QL(2 gm daily)	<i>mometasone furoate OINT</i>	1B	QL(4 gm daily)
<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 gm daily)	<i>mometasone furoate SOLN</i>	1B	QL(5 ml daily)
<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 gm daily)	<i>prednicarbate OINT</i>	1B	
<i>fluocinonide GEL</i>	1B		<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 gm daily)
<i>fluocinonide OINT</i>	1B	QL(2 gm daily)	<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 gm daily)
<i>fluocinonide SOLN</i>	1B	QL(2 ml daily)	<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 gm daily)
<i>flurandrenolide CREA</i>	2	QL(2 gm daily)	<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ml daily)
<i>flurandrenolide LOTN</i>	2	QL(2 ml daily)	<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B	
<i>fluticasone propionate CREA 0.05 %</i>	1B	QL(4 gm daily)			
<i>fluticasone propionate LOTN</i>	1B	QL(6 ml daily)			

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 gm daily)
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 gm daily)
<b>Eczema Agents</b>		
DUPIXENT SOPN 300 MG/2ML	4	QL(0.29 ml daily); PA
DUPIXENT SOPN 200 MG/1.14ML	4	QL(0.082 ml daily); PA
DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ml daily); PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ml daily); PA
DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ml daily); PA
<b>Emollients</b>		
<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 gm daily); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC
<b>Enzymes - Topical</b>		
SANTYL OINT	3	PA
<b>Immunomodulating Agents - Topical</b>		
<i>imiquimod 5 %</i>	1B	QL(12 ea per fill retail; 12 per fill mail)
<b>Immunosuppressive Agents - Topical</b>		
<i>pimecrolimus</i>	1B	QL(3 gm daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA
<b>Keratolytic/Antimitotic/Vesicant Agents</b>		
<i>podofilox SOLN</i>	1B	
<b>Local Anesthetics - Topical</b>		
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ml daily)
<i>lidocaine hcl PRSY</i>	1B	QL(4 ml daily)
<i>lidocaine hcl SOLN</i>	1B	QL(10 ml daily)

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 gm daily)
<i>lidocaine PTCH 5 %</i>	1B	PA
SYNERA PTCH	3	QL(10 ea per fill retail; 10 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
<b>Phosphodiesterase 4 (PDE4) Inhibitors - Topical</b>		
EUCRISA	3	QL(2 gm daily); PA
<b>Rosacea Agents</b>		
<i>azelaic acid GEL</i>	1B	QL(1.67 gm daily)
<i>brimonidine tartrate (topical)</i>	3	QL(1 gm daily); PA
<i>metronidazole (topical) CREA</i>	1B	QL(3 gm daily)
<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 gm daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 gm daily)
<i>metronidazole (topical) LOTN</i>	1B	
<b>Scabicides &amp; Pediculicides</b>		
<i>crotamiton LOTN</i>	1B	PA
<i>ivermectin (pediculicide)</i>	1B	PA; RX/OTC
<i>malathion</i>	1B	
<i>permethrin CREA</i>	1B	
<i>permethrin LIQD EX</i>	1B	
<i>spinosad</i>	1B	PA
<b>Wound Care Products</b>		
REGRANEX	3	QL(0.5 gm daily)
<b>DIAGNOSTIC PRODUCTS</b>		
<b>Diagnostic Drugs</b>		
GLUCAGEN DIAGNOSTIC	3	QL(0.035 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; PA
<b>Diagnostic Tests</b>		
CHEMSTRIP-K STRP	1B	
FORA GTEL BLOOD KETONE TEST STRIPS	1B	
FORA TEST N' GO ADVANCE/VOICE/6 CONNECT	1B	
GOJJI BLOOD KETONE TEST STRIPS	1B	
KETONE TEST STRIPS STRP	1B	
KETONE STRP	1B	
KETOSTIX STRP	1B	
NOVA MAX PLUS KETONE TESTSTRIPS	1B	
PRECISION XTRA	1B	
RELION KETONE TEST STRIPS STRP	1B	
RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	1B	QL(3.34 ea daily); RX/OTC
TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP	1B	Limit 100 per month; QL(3.34 ea daily); RX/OTC
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1B	QL(3.34 ea daily); RX/OTC
TRUETRACK TEST STRP	1B	Limit 100 per month; QL(3.34 ea daily); RX/OTC
<b>DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes</b>		
Digestive Enzymes		

Drug Name	Drug Tier	Requirements/Limits
CREON CPEP	2	Non-FDA approved uses require Prior Authorization
PANCREAZE CPEP 149900 UNIT-97300 UNIT-37000 UNIT, 15200 UNIT-8800 UNIT-2600 UNIT, 24600 UNIT-14200 UNIT-4200 UNIT, 61500 UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000 UNIT, 98400 UNIT-56800 UNIT-16800 UNIT	3	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization
<b>DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure</b>		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 ea daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 ea daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 ea daily)
<i>dichlorphenamide</i>	4	QL(4 ea daily); PA
<i>methazolamide TABS</i>	1B	QL(6 ea daily)
Diuretic Combinations		



Drug Name	Drug Tier	Requirements/Limits
<i>amiloride &amp; hydrochlorothiazide</i>	1B	
<i>spironolactone &amp; hydrochlorothiazide</i>	1B	
<i>triamterene &amp; hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1B	
<i>triamterene &amp; hydrochlorothiazide TABS</i>	1B	
<b>Loop Diuretics</b>		
<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
<i>bumetanide TABS</i>	1B	QL(5 ea daily)
<i>ethacrynic acid</i>	1B	QL(16 ea daily)
<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	1B	
<i>furosemide TABS</i>	1B	
<i>toremide TABS</i>	1B	
<b>Potassium Sparing Diuretics</b>		
<i>amiloride hcl TABS</i>	1B	
<i>spironolactone TABS</i>	1B	
<i>triamterene CAPS</i>	1B	QL(3 ea daily)
<b>Thiazides and Thiazide-Like Diuretics</b>		
<i>chlorthalidone 25 MG, 50 MG</i>	1B	
DIURIL SUSP	2	QL(20 ml daily)
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 ea daily)
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 ea daily)
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 ea daily)
<i>indapamide TABS 2.5 MG</i>	1B	QL(2 ea daily)
<i>indapamide TABS 1.25 MG</i>	1B	QL(1 ea daily)
<i>metolazone</i>	1B	QL(2 ea daily)
<b>ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Bone Density Regulators</b>		
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1B	QL(0.143 ea daily)
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1B	QL(1 ea daily)
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ml daily)
FORTEO SOPN ( <i>teriparatide (recombinant)</i> )	4	QL(0.09 ml daily); SP; PA
FOSAMAX PLUS D	3	QL(0.143 ea daily); PA
<i>ibandronate sodium SOLN</i>	4	SP; PA
<i>ibandronate sodium TABS</i>	1B	QL(0.036 ea daily)
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA
PAMIDRONATE DISODIUM SOLN	4	SP; PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 ea daily); PA
<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 ea daily); PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 ea daily); PA
<i>risedronate sodium TBEC</i>	1B	PA
<i>teriparatide (recombinant) SOPN</i>	4	QL(0.09 ml daily); SP; PA
TERIPARATIDE SOPN	4	QL(0.09 ml daily); PA
TYMLOS	4	PA
XGEVA SOLN	4	SP; PA
<i>zoledronic acid CONC</i>	4	SP; PA
<i>zoledronic acid SOLN</i>	4	SP; PA
<b>Corticotropin</b>		
ACTHAR GEL	3	PA
<b>Fertility Regulators</b>		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CHORIONIC GONADOTROPIN IM	4	PA	LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA
<i>clomiphene citrate TABS</i>	3	PA	SYNAREL	4	SP; PA
GnRH/LHRH Antagonists			Metabolic Modifiers		
<i>ganirelix acetate</i>	4	PA	ALDURAZYME	4	SP; PA
ORLISSA	2	PA	<i>betaine</i>	4	SP; PA
Growth Hormone Receptor Antagonists			<i>calcitriol CAPS</i>	1B	
SOMAVERT 10 MG, 15 MG, 20 MG	4	SP; PA	<i>calcitriol SOLN IV</i>	1B	
Growth Hormone Releasing Hormones (GHRH)			<i>cinacalcet hcl</i>	4	QL(4 ea daily); SP; PA
EGRIFTA 2 MG	4	PA	<i>doxercalciferol CAPS</i>	1B	
EGRIFTA SV	4	PA	<i>doxercalciferol SOLN</i>	1B	
Growth Hormones			ELAPRASE	4	SP; PA
GENOTROPIN MINIQUICK PRSY	4	PA	GALAFOLD	4	QL(0.5 ea daily); PA
GENOTROPIN CART SC	4	PA	LUMIZYME	4	SP; PA
HUMATROPE CART IJ	4	SP; PA	MYALEPT	4	PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA	NAGLAZYME	4	SP; PA
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	PA	<i>nitisinone CAPS</i>	4	PA
ZORBTIVE SC	4	SP; PA	<i>paricalcitol CAPS</i>	1B	
Hormone Receptor Modulators			<i>paricalcitol SOLN</i>	1B	
OSPHENA	3	PA	PHEBURANE PLLT	4	PA
<i>raloxifene hcl</i>	0	QL(1 ea daily)	<i>sapropterin dihydrochloride PACK</i>	4	PA
Insulin-Like Growth Factors (Somatomedins)			<i>sapropterin dihydrochloride TABS</i>	4	PA
INCRELEX	4	SP; PA	<i>sodium phenylbutyrate POWD</i>	1B	PA
LHRH/GnRH Agonist Analog Pituitary Suppressants			<i>sodium phenylbutyrate TABS</i>	1B	PA
FENSOLVI SC	4	SP; PA	STRENSIQ	4	PA
LUPRON DEPOT-PED (1-MONTH)	4	SP; PA	Posterior Pituitary Hormones		
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA	<i>desmopressin acetate spray</i>	1B	
			<i>desmopressin acetate spray refrigerated</i>	1B	
			<i>desmopressin acetate SOLN IJ</i>	1B	PA

Drug Name	Drug Tier	Requirements/Limits
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 ea daily)
<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 ea daily)
STIMATE SOLN NA	4	SP; PA
<b>Prolactin Inhibitors</b>		
<i>cabergoline</i>	1B	
<b>Somatostatic Agents</b>		
<i>octreotide acetate SOLN</i>	4	SP; PA
SANDOSTATIN LAR DEPOT KIT	4	PA
SIGNIFOR	4	PA
<b>Vasopressin Receptor Antagonists</b>		
JYNARQUE TBPK	4	SP; PA
<i>tolvaptan TABS</i>	4	QL(2 ea daily); SP; PA
<b>ESTROGENS - Hormone Replacement/Modifying Drugs</b>		
<b>Estrogen Combinations</b>		
ACTIVELLA TABS 1 MG-0.5 MG ( <i>estradiol &amp; norethindrone acetate</i> )	3	
ANGELIQ	3	
BIJUVA	3	
CLIMARA PRO	3	
COMBIPATCH PTTW	3	
DUAVEE	3	
<i>esterified estrogens &amp; methyltestosterone</i>	3	
<i>estradiol &amp; norethindrone acetate TABS</i>	3	
<i>norethindrone acetate-ethinyl estradiol</i>	1B	
PREFEST	3	
PREMPHASE	2	
PREMPRO	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<b>Estrogens</b>		
DELESTROGEN 10 MG/ML ( <i>estradiol valerate</i> )	1B	
DEPO-ESTRADIOL	3	
ELESTRIN GEL	3	
<i>estradiol valerate</i>	1B	
<i>estradiol GEL 0.06 %</i>	3	
<i>estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM</i>	1B	
<i>estradiol PTTW</i>	1B	QL(0.286 ea daily)
<i>estradiol PTWK</i>	1B	
<i>estradiol TABS</i>	1B	
ESTROGEL GEL ( <i>estradiol</i> )	3	
EVAMIST SOLN	3	
MENEST	3	
MENOSTAR PTWK	3	
PREMARIN SOLR	2	
PREMARIN TABS	2	QL(1 ea daily)
<b>FLUOROQUINOLONES - Drugs to Treat Bacterial Infections</b>		
<b>Fluoroquinolones</b>		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
<i>ciprofloxacin hcl TABS</i>	1B	
<i>ciprofloxacin in d5w 5 %-200 MG/100ML</i>	3	
<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	1B	2 max fill(s) per 30 day(s) retail
CIPRO SUSR	2	2 max fill(s) per 30 day(s) retail
<i>levofloxacin in d5w 5 %-500 MG/100ML</i>	1B	
<i>levofloxacin SOLN OR</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits
<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
<i>levofloxacin TABS 500 MG</i>	1A	
<i>moxifloxacin hcl in sodium chloride</i>	1B	
<i>moxifloxacin hcl TABS</i>	1B	
<i>ofloxacin 300 MG, 400 MG</i>	1B	
<b>GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs</b>		
Bile Acid Synthesis Disorder Agents		
CHOLBAM	4	SP; PA
Gallstone Solubilizing Agents		
<i>ursodiol CAPS</i>	1B	QL(3 ea daily)
<i>ursodiol TABS</i>	1B	
Gastrointestinal Chloride Channel Activators		
<i>lubiprostone</i>	1B	QL(2 ea daily)
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ml daily)
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
<i>metoclopramide hcl TABS</i>	1A	QL(6 ea daily)
Inflammatory Bowel Agents		
<i>balsalazide disodium CAPS</i>	1B	QL(9 ea daily)
DIPENTUM	2	
INFLECTRA SOLR	4	PA
<i>mesalamine CP24</i>	1B	
<i>mesalamine CPDR</i>	1B	
<i>mesalamine ENEM</i>	3	
<i>mesalamine SUPP</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine TBEC 1.2 GM</i>	3	
RENFLEXIS	4	PA
SKYRIZI SOCT	4	QL(0.043 ml daily); PA
SKYRIZI SOLN	4	QL(0.36 ml daily); PA
STELARA 130 MG/26ML	4	QL(3.47 ml daily); PA
<i>sulfasalazine TABS</i>	1B	
<i>sulfasalazine TBEC</i>	1B	
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1B	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	1B	QL(2 ea daily)
LINZESS	2	QL(1 ea daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1B	
MOVANTIK	3	QL(1 ea daily); PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1B	
<i>calcium acetate (phosphate binder) TABS</i>	1B	RX/OTC
<i>lanthanum carbonate CHEW</i>	1B	
PHOSLYRA SOLN	2	
<i>sevelamer carbonate PACK</i>	1B	
<i>sevelamer carbonate TABS</i>	1B	
VELPHORO	3	PA
<b>GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System</b>		
Alkalinizers		

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Drug Name	Drug Tier	Requirements/Limits
<i>potassium citrate (alkalinizer) TBCR</i>	1B	
<i>sodium citrate &amp; citric acid</i>	1B	RX/OTC
Cystinosis Agents		
CYSTAGON CAPS	3	PA
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1B	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1B	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1B	
SORBITOL 3 %	1B	
SORBITOL/MANNITOL IRRIGATION	1B	
Interstitial Cystitis Agents		
ELMIRON CAPS	2	QL(3 ea daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1B	QL(1 ea daily)
<i>dutasteride</i>	1B	QL(1 ea daily)
<i>dutasteride-tamsulosin hcl</i>	3	PA
<i>finasteride</i>	1B	5 mg only
<i>silodosin</i>	1B	
<i>tamsulosin hcl</i>	1B	
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG</i>	1B	
Urinary Stone Agents		
THIOLA EC TBEC 100 MG ( <i>tiopronin</i> )	3	QL(3 ea daily); PA
THIOLA EC TBEC 300 MG ( <i>tiopronin</i> )	3	QL(10 ea daily); PA
<i>tiopronin TBEC 100 MG</i>	3	QL(3 ea daily); PA
<i>tiopronin TBEC 300 MG</i>	3	QL(10 ea daily); PA
<b>GOUT AGENTS - Drugs to Treat Gout</b>		

Drug Name	Drug Tier	Requirements/Limits
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1B	
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	1B	
<i>colchicine TABS</i>	1B	QL(1 ea daily)
<i>febuxostat</i>	1B	QL(1 ea daily); PA
Uricosurics		
<i>probenecid</i>	1B	
<b>HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders</b>		
Antihemophilic Products		
ADVATE	4	PA
ADYNOVATE	4	PA
AFSTYLA	4	PA
ALPROLIX	4	PA
ALTUVIIIIO	4	PA
BENEFIX KIT	4	PA
ELOCTATE	4	PA
ESPEROCT	4	PA
IDELVION	4	PA
JIVI	4	PA
KOGENATE FS KIT	4	PA
KOVALTRY	4	PA
NOVOEIGHT	4	PA
XYNTHA	4	PA
XYNTHA SOLOFUSE	4	PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOLN</i>	4	QL(9 ml daily); PA
<i>icatibant acetate SOSY</i>	4	QL(9 ml daily); PA
Complement Inhibitors		
HAEGARDA SOLR SC	4	PA
Hemataologic - Tyrosine Kinase Inhibitors		

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Drug Name	Drug Tier	Requirements/Limits
TAVALISSE	4	QL(2 ea daily); SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1B	QL(3 ea daily)
Plasma Kallikrein Inhibitors		
ORLADEYO	4	PA
TAKHZYRO SOLN	4	PA
TAKHZYRO SOSY	4	PA
Platelet Aggregation Inhibitors		
<i>anagrelide hcl</i>	1B	
<i>aspirin-dipyridamole</i>	1B	QL(2 ea daily); PA
BRILINTA	2	QL(2 ea daily)
CABLIVI	4	PA
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1B	QL(1 ea daily)
<i>dipyridamole</i>	1B	
<i>prasugrel hcl</i>	1B	QL(1 ea daily)
ZONTIVITY	3	PA
<b>HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders</b>		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 ea daily); PA
CEREZYME 400 UNIT	4	SP; PA
<i>miglustat</i>	4	QL(3 ea daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
OXBRYTA TABS 500 MG	4	PA
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ml daily)
Folic Acid/Folates		

Drug Name	Drug Tier	Requirements/Limits
<i>folic acid TABS</i>	0	
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN 25 MCG/ML	4	SP
ARANESP ALBUMIN FREE SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP; PA
ARANESP ALBUMIN FREE SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP; PA
DOPTELET	4	QL(3 ea daily); PA
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
LEUKINE SOLR IJ	4	SP; PA
MIRCERA	4	PA
MULPLETA	4	QL(1 ea daily); PA
NYVEPRIA	4	PA
PROCRIT 40000 UNIT/ML	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
PROMACTA PACK	4	QL(1 ea daily); PA
PROMACTA TABS	4	QL(1 ea daily); PA
RETACRIT	4	PA
UDENYCA ONBODY SOSY	4	PA
UDENYCA SOAJ	4	PA
UDENYCA SOSY	4	PA
ZARXIO	4	PA
ZIEXTENZO	4	PA

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Drug Name	Drug Tier	Requirements/Limits
<b>Hematopoietic Mixtures</b>		
<i>ferrous fumarate-folic acid</i>	1B	QL(1 ea daily)
<b>Iron</b>		
<i>ferrous sulfate SOLN 15 MG/ML</i>	0	AL(Up to 1 yrs old)
<i>ferrous sulfate TABS 65 MG, 325 MG</i>	0	
<i>ferrous sulfate TBEC 325 MG</i>	0	
<b>Stem Cell Mobilizers</b>		
MOZOBIL ( <i>plerixafor</i> )	4	SP; PA
<i>plerixafor</i>	4	SP; PA
<b>HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders</b>		
<b>Hemostatics - Systemic</b>		
<i>aminocaproic acid TABS</i>	1B	PA
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
<i>tranexamic acid TABS</i>	1B	
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
<b>Barbiturate Hypnotics</b>		
<i>phenobarbital ELIX</i>	1B	
<i>phenobarbital TABS</i>	1B	
<b>Hypnotics - Tricyclic Agents</b>		
<i>doxepin hcl (sleep)</i>	1B	QL(1 ea daily); PA
<b>Non-Barbiturate Hypnotics</b>		
<i>estazolam</i>	1B	
<i>eszopiclone</i>	1B	QL(1 ea daily); AL(At least 18 yrs old); ST
<i>flurazepam hcl</i>	1B	PA
<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 ea daily)
<i>triazolam</i>	1B	
<i>zaleplon 5 MG</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)
<i>zaleplon 10 MG</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TABS</i>	1A	QL(1 ea daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TBCR</i>	1B	QL(1 ea daily)
<b>Orexin Receptor Antagonists</b>		
BELSOMRA	3	PA
<b>Selective Melatonin Receptor Agonists</b>		
<i>ramelteon</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)
<b>LAXATIVES - Bowel Treatment Drugs</b>		
<b>Bulk Laxatives</b>		
<i>calcium polycarbophil TABS</i>	1B	
<b>Laxative Combinations</b>		
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1B	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM-2.97 GM-5.86 GM-22.74 GM-236 GM</i>	0	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1B	PA
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1B	
<b>Laxatives - Miscellaneous</b>		
<i>lactulose SOLN</i>	1B	
<b>Saline Laxatives</b>		

Drug Name	Drug Tier	Requirements/Limits
OSMOPREP	3	PA
<b>Stimulant Laxatives</b>		
<i>bisacodyl SUPP</i>	1A	
<i>bisacodyl TBEC</i>	1A	
<b>Surfactant Laxatives</b>		
<i>docusate calcium</i>	1A	QL(1 ea daily)
<i>docusate sodium CAPS 100 MG</i>	1A	QL(4 ea daily)
<i>docusate sodium CAPS 250 MG</i>	1A	
<b>LOCAL ANESTHETICS-Parenteral - Drugs for Numbing</b>		
<b>Local Anesthetics - Amides</b>		
<i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %</i>	1B	
<b>MACROLIDES - Drugs to Treat Bacterial Infections</b>		
<b>Azithromycin</b>		
<i>azithromycin PACK</i>	1B	
<i>azithromycin SOLR</i>	1B	
<i>azithromycin SUSR</i>	1B	
<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 ea daily)
<i>azithromycin TABS 250 MG</i>	1B	QL(6 ea per fill retail; 6 per fill mail)
<i>azithromycin TABS 500 MG</i>	1B	QL(4 ea per fill retail; 4 per fill mail)
<b>Clarithromycin</b>		
<i>clarithromycin SUSR</i>	1B	
<i>clarithromycin TABS</i>	1B	
<i>clarithromycin TB24</i>	1B	
<b>Erythromycins</b>		
<i>erythromycin base CPEP</i>	3	
<i>erythromycin base TABS</i>	3	
<i>erythromycin base TBEC</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>erythromycin ethylsuccinate SUSR</i>	1B	
<i>erythromycin ethylsuccinate TABS</i>	3	
<b>Fidaxomicin</b>		
DIFICID TABS	2	
<b>MEDICAL DEVICES AND SUPPLIES</b>		
<b>Contraceptives</b>		
AIMSCO LUBRICATED MISC	0	
CAYA DPRH	0	
DUREX EXTRA SENSITIVE THIN DEVI	0	
DUREX EXTRA SENSITIVE THIN MISC	0	
DUREX TROPICAL MISC	0	
FANTASY LUBRICATED/SPERMICI DE MISC	0	
FANTASY LUBRICATED MISC	0	
FC2 FEMALE CONDOM	0	QL(12 ea per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
FEMCAP DEVI	0	
KAMELEON LUBRICATED MISC	0	
KIMONO COLORS DEVI	0	
KIMONO LUBRICATED MISC	0	
KIMONO MAXX/LARGE FLARE MISC	0	
KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	0	
KIMONO PLUS SPERMICIDE LUBRICATED MISC	0	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KIMONO PLUS SPERMICIDE/LUBRICATED MISC	0		TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	0	
KIMONO PS LUBRICATED MISC	0		TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	0	
KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	0		TRUSTEX LUBRICATED/SPERMICIDE MISC	0	
KIMONO SENSATION LUBRICATED MISC	0		TRUSTEX LUBRICATED MISC	0	
KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	0		TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	0	
KIMONO SPECIAL DEVI	0		TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDED MISC	0	
K-Y ME & YOU EXTRA LUBRICATED DEVI	0		TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	0	
K-Y ME & YOU INTENSE DEVI	0		TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	0	
MAXX LUBRICATED MISC	0		TRUSTEX/RIA LUBRICATED MISC	0	
MAXX PLUS SPERMICIDE LUBRICATED MISC	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0	
OMNIFLEX DIAPHRAGM	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0	
REALITY LATEX CONDOMS/LUBRICATED MISC	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0	
REALITY LATEX/ULTRA TEXTURED DEVI	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0	
REALITY LATEX/ULTRA THIN DEVI	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0	
TRUE COVER DEVI	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0	
TRUSTEX COLOR CONDOMS + LUBE MISC	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0	
TRUSTEX LUBRICATED EXTRALARGE MISC	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0	
TRUSTEX LUBRICATED EXTRASTRENGTH MISC	0				
TRUSTEX LUBRICATED/RIBBED/STUDED MISC	0				

Drug Name	Drug Tier	Requirements/Limits
Diabetic Supplies		
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	PA
ONETOUCH DELICA SAFETY LANCING DEVICE	1B	RX/OTC
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1B	RX/OTC
RELION 2-IN-1 LANCET DEVICES 30G	1B	RX/OTC
RELION 2-IN-1 LANCING DEVICE 25G	1B	RX/OTC
RELION 2-IN-1 LANCING DEVICE 30G	1B	RX/OTC
SELECT LANCETS	1B	6.66/day
SELECT LANCETS	1	6.66/day
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	
Parenteral Therapy Supplies		

Drug Name	Drug Tier	Requirements/Limits
SELECT INSULIN SYRINGES	1B	5/day
SELECT INSULIN SYRINGES	1	5/day
<b>MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches</b>		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ml daily); PA
EMGALITY SOAJ	2	QL(0.07 ml daily); PA
EMGALITY SOSY 120 MG/ML	2	QL(0.07 ml daily); PA
EMGALITY SOSY 100 MG/ML	2	QL(0.1 ml daily); PA
UBRELVY	3	QL(10 ea per 30 day(s) retail); ST
Migraine Combinations		
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 ea daily)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)
Migraine Products		
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ml daily)
ERGOMAR SUBL	3	QL(0.667 ea daily)
Serotonin Agonists		
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 ea daily); AL(At least 12 yrs old); ST	<i>zolmitriptan SOLN</i>	1B	QL(0.2 ea daily); AL(At least 12 yrs old); ST
<i>eletriptan hydrobromide</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old); ST	<i>zolmitriptan TABS</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 ea daily); AL(At least 18 yrs old); ST	<i>zolmitriptan TBDP</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
<i>naratriptan hcl</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)	<b>MINERALS &amp; ELECTROLYTES</b>		
<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)	Bicarbonates		
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)	<i>sodium acetate SOLN</i>	1B	
<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)	SODIUM ACETATE SOLN ( <i>sodium acetate</i> )	1B	
<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)	Calcium		
<i>sumatriptan</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old)	<i>calcium chloride (dihydrate) SOLN</i>	1B	
<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)	Electrolyte Mixtures		
<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)	<i>dextrose in lactated ringers</i>	1B	
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)	<i>electrolyte-148</i>	1B	
<i>sumatriptan succinate TABS</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)	<i>electrolyte-a</i>	1B	
			IONOSOL-MB/DEXTROSE 5%	1B	
			ISOLYTE-P/DEXTROSE 5%	1B	
			ISOLYTE-S	1B	
			KCL 0.3%/D5W/NACL 0.9% ( <i>potassium chloride in dextrose &amp; sodium chloride</i> )	1B	
			<i>lactated ringer's</i>	1B	
			NORMOSOL-M/D5W	1B	
			NORMOSOL-R	1B	
			PLASMA-LYTE A ( <i>electrolyte-a</i> )	1B	
			PLASMA-LYTE-148 ( <i>electrolyte-148</i> )	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride in dextrose 5 %-20 MEQ/L</i>	1B		<i>potassium chloride microencapsulated crystals er</i>	1B	
<i>potassium chloride in dextrose &amp; sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	1B		<i>potassium chloride CPCR</i>	1B	
<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %</i>	1B		<i>potassium chloride PACK OR 20 MEQ</i>	1B	PA
POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	1B		<i>potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML</i>	1B	
POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % ( <i>potassium chloride in nacl</i> )	1B		POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML ( <i>potassium chloride</i> )	1B	
<i>ringer's</i>	1B		<i>potassium chloride TBCR</i>	1B	
Fluoride			Sodium		
<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG</i>	0	QL(1 ea daily)	<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	1B	
Magnesium			<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>		
<i>magnesium sulfate IJ 50 %</i>	1B		Chelating Agents		
Phosphate			<i>penicillamine CAPS</i>	1B	PA
<i>potassium phosphates 236 MG/ML-224 MG/ML</i>	1B		<i>penicillamine TABS</i>	1B	QL(8 ea daily)
Potassium			<i>trientine hcl 250 MG</i>	4	QL(8 ea daily); SP; PA
<i>potassium acetate SOLN 2 MEQ/ML</i>	1B		Immunomodulators		
<i>potassium bicarbonate TBEF</i>	1B		<i>lenalidomide 20 MG</i>	4	QL(1 ea daily); PA
			<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 ea daily); SP; PA
			THALOMID	4	QL(3 ea daily); SP; PA
			Immunosuppressive Agents		
			ATGAM	4	SP; PA
			AZATHIOPRINE	1B	
			<i>azathioprine TABS</i>	1B	
			<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
			<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>cyclosporine CAPS</i>	1B	
<i>cyclosporine SOLN IV 50 MG/ML</i>	1B	
ENSPRYNG	4	PA
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 ea daily); SP; PA
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 ea daily); PA
<i>mycophenolate mofetil CAPS</i>	1B	
<i>mycophenolate mofetil TABS</i>	1B	
<i>mycophenolate sodium</i>	1B	
NULOJIX	4	SP; PA
PROGRAF PACK	2	PA
PROGRAF SOLN	2	
SIMULECT	3	
<i>sirolimus TABS</i>	1B	
<i>tacrolimus CAPS</i>	1B	
THYMOGLOBULIN	4	SP; PA
Irrigation Solutions		
<i>irrigation solutions, physiological</i>	1B	
<i>lactated ringer's (irrigation)</i>	1B	
<i>ringer's irrigation</i>	1B	
<i>water for irrigation, sterile</i>	1B	
Potassium Removing Agents		
LOKELMA	3	QL(1 ea daily); PA
<i>sodium polystyrene sulfonate POWD</i>	1B	
<i>sodium polystyrene sulfonate SUSP OR 15 GM/60ML</i>	1B	
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
Anesthetics Topical Oral		

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B	
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ml daily)
Anti-infectives - Throat		
<i>clotrimazole</i>	1B	
<i>nystatin (mouth-throat)</i>	1B	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1B	
DEBACTEROL	2	
Dental Products		
<i>stannous fluoride CONC</i>	0	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1B	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1B	
<i>pilocarpine hcl (oral)</i>	1B	
<b>MULTIVITAMINS</b>		
Ped MV w/ Fluoride		
<i>pediatric multivitamins w/fl CHEW</i>	1A	RX/OTC
Prenatal Vitamins		
CLASSIC PRENATAL TABS	2	QL(1 ea daily)
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	2	QL(1 ea daily)
EQL PRENATAL FORMULA TABS	2	QL(1 ea daily)
GNP PRENATAL TABS	2	QL(1 ea daily)
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MASONATAL TABS	2	QL(1 ea daily)	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 ea daily)
M-NATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	PRENATAL VITAMIN TABS	2	QL(1 ea daily)
MULTI PRENATAL TABS	2	QL(1 ea daily)	PRENATAL TABS	2	QL(1 ea daily)
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 ea daily); RX/OTC	PRENATRIX TABS	2	QL(1 ea daily); RX/OTC
NEONATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	PRENATRYL TABS	2	QL(1 ea daily); RX/OTC
NEONATAL PRENATAL VITAMIN TABS	2	QL(1 ea daily)	PX PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)
NEONATAL VITAMIN TABS	2	QL(1 ea daily)	QC PRENATAL TABS	2	QL(1 ea daily)
NIVA-PLUS TABS	2	QL(1 ea daily); RX/OTC	RA PRENATAL FORMULA/FOLICACID TABS	2	QL(1 ea daily)
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	2	QL(1 ea daily); RX/OTC	RA PRENATAL TABS	2	QL(1 ea daily)
ONE VITE WOMENS PRENATALVITAMIN TABS	2	QL(1 ea daily)	SM PRENATAL VITAMINS TABS	2	QL(1 ea daily)
PRENATAL MULTIVITAMIN TABS	2	QL(1 ea daily)	THERANATAL CORE NUTRITION TABS	2	QL(1 ea daily); RX/OTC
PRENATAL ONE DAILY TABS	2	QL(1 ea daily)	TRICARE TABS	2	QL(1 ea daily); RX/OTC
PRENATAL PLUS VITAMIN ANDMINERAL TABS	2	QL(1 ea daily); RX/OTC	VITATHELY/GINGER TABS	2	QL(1 ea daily); RX/OTC
PRENATAL PLUS TABS	2	QL(1 ea daily); RX/OTC	WESTAB PLUS TABS	2	QL(1 ea daily); RX/OTC
PRENATAL VITAMIN & MINERAL TABS	2	QL(1 ea daily)	<b>MUSCULOSKELETAL THERAPY AGENTS -</b>		
PRENATAL VITAMIN/IRON TABS	2	QL(1 ea daily)	<b>Drugs to Treat Spasms</b>		
PRENATAL VITAMINS PLUS LOW IRON TABS	2	QL(1 ea daily); RX/OTC	<b>Central Muscle Relaxants</b>		
			<i>baclofen TABS 10 MG, 20 MG</i>	1B	
			<i>carisoprodol TABS</i>	1B	
			<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 ea daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 ea daily)
<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)
<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
<i>orphenadrine citrate TB12</i>	1B	QL(2 ea daily)
<i>tizanidine hcl CAPS</i>	1B	
<i>tizanidine hcl TABS</i>	1B	
Direct Muscle Relaxants		
<i>dantrolene sodium CAPS</i>	1B	QL(4 ea daily)
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus</b>		
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	RX/OTC
<i>olopatadine hcl (nasal)</i>	1B	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ml daily)
Nasal Steroids		
<i>budesonide (nasal)</i>	1B	
<i>flunisolide (nasal) 0.025 %</i>	1B	1 package(s) per fill retail
<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ml per 30 day(s) retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 gm daily); PA; RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1B	
XHANCE EXHU	3	PA
<b>NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles</b>		

Drug Name	Drug Tier	Requirements/Limits
ALS Agents		
<i>riluzole TABS</i>	3	
Neuromuscular Blocking Agent - Neurotoxins		
XEOMIN	3	PA
Nondepolarizing Muscle Relaxants		
<i>atracurium besylate 100 MG/10ML</i>	3	PA
<b>NUTRIENTS</b>		
Proteins		
CLINIMIX 4.25%/DEXTROSE 10%	3	
CLINIMIX 4.25%/DEXTROSE 5%	3	
CLINIMIX E 5%/DEXTROSE 20%	3	
<b>OPHTHALMIC AGENTS - Drugs to Treat the Eye</b>		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1B	
<i>brimonidine tartrate-timolol maleate</i>	1B	
<i>carteolol hcl (ophth)</i>	1B	
<i>dorzolamide hcl-timolol maleate</i>	1B	
<i>levobunolol hcl 0.5 %</i>	1B	
<i>timolol maleate (ophth) SOLG</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B	
Cycloplegic Mydriatics		
<i>tropicamide SOLN 1 %</i>	1B	
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ml daily)
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B	
Ophthalmic Adrenergic Agents		

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Drug Name	Drug Tier	Requirements/Limits
<i>apraclonidine hcl</i>	1B	
<i>brimonidine tartrate 0.15 % , 0.2 %</i>	1B	
IOPIDINE	3	
Ophthalmic Anti-infectives		
AZASITE	3	QL(2.5 ml per 30 day(s) retail; 2 ml per 30 days mail)
<i>bacitracin (ophthalmic)</i>	3	
BESIVANCE	3	PA
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B	
<i>erythromycin (ophth)</i>	1B	
<i>gatifloxacin (ophth)</i>	1B	
<i>gentamicin sulfate (ophth) OINT</i>	1B	
<i>gentamicin sulfate (ophth) SOLN</i>	1B	
KLARITY-A	3	QL(2.5 ml per 30 day(s) retail; 2 ml per 30 days mail)
<i>levofloxacin (ophth) 0.5 %</i>	1B	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B	
NATACYN	2	
<i>neomycin-bacitracin zn-polymyxin</i>	1B	
<i>ofloxacin (ophth)</i>	1B	
<i>polymyxin b-trimethoprim</i>	1B	
<i>sulfacetamide sodium (ophth) SOLN</i>	1B	
<i>tobramycin (ophth) SOLN</i>	1B	
<i>trifluridine</i>	1B	
ZIRGAN GEL	2	
Ophthalmic Immunomodulators		
<i>cyclosporine (ophth) EMUL</i>	3	PA
Ophthalmic Local Anesthetics		

Drug Name	Drug Tier	Requirements/Limits
<i>proparacaine hcl</i>	1B	
Ophthalmic Steroids		
ALREX SUSP ( <i>loteprednol etabonate</i> )	3	PA
<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ml daily)
<i>difluprednate</i>	1B	PA
<i>fluorometholone (ophth) SUSP</i>	1B	
FML FORTE SUSP	3	PA
FML OINT	3	PA
LOTEMAX OINT	3	PA
<i>loteprednol etabonate GEL</i>	1B	PA
<i>loteprednol etabonate SUSP</i>	1B	PA
MAXIDEX SUSP OP	3	PA
<i>neomycin-polymy-dexameth OINT</i>	1B	
<i>neomycin-polymy-dexameth SUSP</i>	1B	
<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ml daily)
PRED MILD	3	PA
PRED-G SUSP	3	PA
<i>prednisolone acetate (ophth)</i>	1B	
PREDNISOLONE SODIUM PHOSPHATE	3	
<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA
<i>tobramycin-dexamethasone SUSP</i>	1B	
ZYLET	3	PA
Ophthalmic Surgical Aids		
HEALON PRO SOSY	3	PA
PROVISC SOSY	3	PA
Ophthalmics - Misc.		
ALOCRIIL	3	PA

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Drug Name	Drug Tier	Requirements/Limits
ALOMIDE	3	PA
<i>azelastine hcl (ophth)</i>	1B	
<i>bepotastine besilate</i>	3	PA
<i>brinzolamide</i>	1B	
<i>bromfenac sodium (ophth)</i>	1B	
<i>cromolyn sodium (ophth)</i>	1B	
CYSTARAN	2	QL(2.143 ml daily); PA
<i>diclofenac sodium (ophth)</i>	1B	
<i>dorzolamide hcl</i>	1B	
<i>epinastine hcl (ophth)</i>	1B	
<i>flurbiprofen sodium</i>	1B	
<i>ketorolac tromethamine (ophth)</i>	1B	
<i>ketotifen fumarate (ophth) 0.035 %</i>	1B	
LASTACAFT	3	PA
NEVANAC	3	QL(0.2 ml daily); ST
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ml daily); RX/OTC
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	3	
<i>latanoprost SOLN</i>	1B	
<i>tafluprost</i>	1B	
<i>travoprost SOLN</i>	1B	
<b>OTIC AGENTS - Drugs to Treat the Ear</b>		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1B	QL(0.5 ml daily)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	1B	
<i>ofloxacin (otic)</i>	1B	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	1B	PA

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin-fluocinolone acetamide</i>	1B	QL(0.5 ea daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1B	QL(2 ml daily)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1B	
Otic Steroids		
<i>fluocinolone acetamide (otic)</i>	1B	
<i>hydrocortisone w/acetic acid</i>	1B	
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System</b>		
Immune Serums		
GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMMAGARD LIQUID 30 GM/300ML	4	PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	4	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMUNEX-C	4	SP; PA
Passive Immunizing Agents - Combinations		
HYQVIA	4	PA
<b>PENICILLINS - Drugs to Treat Bacterial Infections</b>		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin TABS</i>	1B	
<i>ampicillin sodium IJ 1 GM</i>	1B	
<i>ampicillin CAPS 500 MG</i>	1B	
<b>Natural Penicillins</b>		
<i>penicillin g potassium 5000000 UNIT</i>	1B	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B	
PENICILLIN G PROCAINE	3	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium SOLR</i>	1B	
<i>penicillin v potassium TABS</i>	1B	
<b>Penicillin Combinations</b>		
<i>amoxicillin &amp; pot clavulanate CHEW</i>	1B	
<i>amoxicillin &amp; pot clavulanate SUSR</i>	1B	
<i>amoxicillin &amp; pot clavulanate TABS</i>	1B	
<i>amoxicillin &amp; pot clavulanate TB12</i>	1B	
<i>ampicillin &amp; sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	1B	
<i>piperacillin sodium-tazobactam sodium</i>	1B	
<b>Penicillinase-Resistant Penicillins</b>		
<i>dicloxacillin sodium</i>	1B	
<i>nafcillin sodium IV 10 GM</i>	1B	
<i>oxacillin sodium IV 10 GM</i>	1B	
<b>PROGESTINS - Hormone Replacement/Modifying</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Drugs</b>		
<b>Progestins</b>		
<i>medroxyprogesterone acetate 10 MG</i>	1A	
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B	
<i>megestrol acetate (appetite)</i>	1B	PA
<i>norethindrone acetate TABS</i>	0	
<i>progesterone CAPS</i>	1B	
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions</b>		
<b>Agents for Chemical Dependency</b>		
<i>acamprosate calcium</i>	1B	
<i>disulfiram</i>	1B	
<i>lofexidine hcl</i>	1B	QL(224 ea per 14 day(s) retail); PA
LUCEMYRA ( <i>lofexidine hcl</i> )	3	QL(224 ea per 14 day(s) retail); PA
<b>Antidementia Agents</b>		
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 ea daily)
<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 ea daily)
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 ea daily)
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 ea daily)
<i>galantamine hydrobromide CP24</i>	1B	QL(1 ea daily)
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ml daily)
<i>galantamine hydrobromide TABS</i>	1B	QL(2 ea daily)
<i>memantine hcl TABS</i>	1B	QL(2 ea daily)
<i>memantine hcl TABS</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits
<i>rivastigmine tartrate CAPS</i>	1B	
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline</i>	1B	
<i>perphenazine-amitriptyline</i>	1B	QL(4 ea daily)
Fibromyalgia Agents		
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA
SAVELLA TABS	2	QL(2 ea daily); PA
Movement Disorder Drug Therapy		
AUSTEDO PATIENT TITRATION KIT TBPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
AUSTEDO XR PATIENT TITRATION KIT TEPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
AUSTEDO XR TB24	4	QL(1 ea daily); PA
AUSTEDO TABS	4	QL(4 ea daily); PA
INGREZZA CAPS	4	QL(1 ea daily); PA
INGREZZA CPPK	4	1 max fill(s) per 180 day(s) retail; PA
INGREZZA CPSP	4	QL(1 ea daily); PA
<i>tetrabenazine</i>	4	QL(3 ea daily); SP; PA
Multiple Sclerosis Agents		
AVONEX PEN AJKT	4	QL(0.0714 ml daily); SP; PA
AVONEX PSKT	4	QL(0.0714 ml daily); SP; PA
BETASERON KIT	4	QL(0.5 ea daily); SP; PA
<i>dalfampridine</i>	4	QL(2 ea daily); SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>dimethyl fumarate CDPK</i>	1B	QL(2 ea daily)
<i>dimethyl fumarate CPDR</i>	1B	QL(2 ea daily)
<i> fingolimod hcl</i>	4	QL(1 ea daily)
<i>glatiramer acetate SOSY 40 MG/ML</i>	3	QL(0.43 ml daily)
<i>glatiramer acetate SOSY 20 MG/ML</i>	3	QL(1 ml daily)
KESIMPTA	4	QL(0.0144 ml daily); PA
PLEGRIDY STARTER PACK SOPN	4	QL(0.036 ml daily); PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ml daily); PA
PLEGRIDY SOPN	4	QL(0.036 ml daily); PA
PLEGRIDY SOSY SC	4	QL(0.036 ml daily); PA
REBIF REBIDOSE TITRATIONPACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ml daily); SP; PA
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF SOSY	4	QL(0.214 ml daily); SP; PA
<i>teriflunomide</i>	4	QL(1 ea daily)
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 ea daily); PA
<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 ea daily); PA
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA	3	QL(2 ea daily); PA
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1B	
<i>pimozide</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits
<b>Smoking Deterrents</b>		
<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 ea daily)
<i>nicotine polacrilex GUM</i>	0	
<i>nicotine polacrilex LOZG</i>	0	
NICOTINE TRANSDERMAL SYSTEM KIT	0	
<i>nicotine MISC XX</i>	0	QL(1 ea daily)
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 ea daily)
NICOTROL INHALER INHA	0	
NICOTROL NS SOLN	0	
<i>varenicline tartrate TABS</i>	0	QL(2 ea daily)
<i>varenicline tartrate TBPk</i>	0	
<b>Transthyretin Amyloidosis Agents</b>		
TEGSEDI	4	PA
<b>RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions</b>		
<b>Alpha-Proteinase Inhibitor (Human)</b>		
PROLASTIN-C SOLN	4	PA
<b>Cystic Fibrosis Agents</b>		
KALYDECO TABS	4	QL(2 ea daily); SP; PA
ORKAMBI PACK	4	QL(2 ea daily); PA
ORKAMBI TABS	4	QL(4 ea daily); PA
PULMOZYME	4	QL(2.5 ml daily); SP; PA
TRIKAFTA TBPk	4	QL(3 ea daily); PA
<b>Pulmonary Fibrosis Agents</b>		
OFEV	4	QL(2 ea daily); PA
<i>pirfenidone CAPS</i>	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	QL(1 ea daily); PA
<i>pirfenidone TABS 534 MG</i>	4	QL(3 ea daily); PA
<b>SULFONAMIDES - Drugs to Treat Bacterial Infections</b>		
<b>Sulfonamides</b>		
<i>sulfadiazine TABS</i>	1B	
<b>TETRACYCLINES - Drugs to Treat Bacterial Infections</b>		
<b>Fluorocyclines</b>		
XERAVAL	4	PA
<b>Glycylcyclines</b>		
<i>tigecycline</i>	1B	
<b>Tetracyclines</b>		
<i>demeclocycline hcl TABS</i>	1B	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>doxycycline hyclate CAPS</i>	1B	QL(2 ea daily)
<i>doxycycline hyclate SOLR</i>	1B	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>minocycline hcl CAPS</i>	1B	QL(3 ea daily)
<i>minocycline hcl TABS</i>	1B	QL(3 ea daily)
<i>tetracycline hcl CAPS</i>	1B	QL(8 ea daily)
<b>THYROID AGENTS - Drugs to Regulate Thyroid Hormones</b>		
<b>Antithyroid Agents</b>		

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Drug Name	Drug Tier	Requirements/Limits
<i>methimazole TABS</i>	1B	
<i>propylthiouracil</i>	1B	
<b>Thyroid Hormones</b>		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 ea daily)
<i>levothyroxine sodium TABS</i>	1B	
<i>liothyronine sodium SOLN</i>	1B	
<i>liothyronine sodium TABS</i>	1B	
NP THYROID 120 TABS	1B	QL(1 ea daily)
NP THYROID 15 TABS	1B	QL(1 ea daily)
NP THYROID 30 TABS	1B	QL(1 ea daily)
NP THYROID 60 TABS	1B	QL(1 ea daily)
NP THYROID 90 TABS	1B	QL(1 ea daily)
SYNTHROID TABS ( <i>levothyroxine sodium</i> )	2	
<b>TOXOIDS</b>		
<b>Toxoid Combinations</b>		
ADACEL SUSP	0	
BOOSTRIX SUSP	0	
BOOSTRIX SUSY	0	
DAPTACEL	0	
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	0	
INFANRIX	0	
KINRIX SUSY	0	
PEDIARIX SUSY	0	
PENTACEL	0	
QUADRACEL SUSP	0	
QUADRACEL SUSY	0	
TDVAX SUSP	0	
TENIVAC INJ	0	

Drug Name	Drug Tier	Requirements/Limits
TETANUS/DIPHThERIA TOXOIDS-ADSORBED ADULT SUSP	0	
<b>ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions</b>		
<b>Antispasmodics</b>		
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	1B	
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1B	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B	
<i>dicyclomine hcl CAPS</i>	1B	
<i>dicyclomine hcl SOLN OR</i>	1B	
<i>dicyclomine hcl TABS</i>	1B	
<i>glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML</i>	1B	
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 ea daily)
<i>glycopyrrolate TABS 1 MG</i>	1B	
<i>methscopolamine bromide</i>	1B	
<b>H-2 Antagonists</b>		
<i>cimetidine TABS</i>	1B	RX/OTC
<i>famotidine in nacl SOLN</i>	1B	
<i>famotidine SOLN 40 MG/4ML, 200 MG/20ML</i>	1B	
<i>famotidine SOLN 20 MG/2ML</i>	1A	
<i>famotidine SUSR</i>	1B	QL(10 ml daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1B	RX/OTC
<i>nizatidine CAPS</i>	1B	
<i>ranitidine hcl TABS 150 MG</i>	1B	
<b>Misc. Anti-Ulcer</b>		
<i>sucralfate SUSP</i>	1B	QL(40 ml daily)
<i>sucralfate TABS</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<b>Proton Pump Inhibitors</b>		
<i>dexlansoprazole</i>	3	QL(1 ea daily)
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 ea daily)
<i>esomeprazole magnesium CPDR 20 MG</i>	1B	QL(2 ea daily); RX/OTC
<i>esomeprazole magnesium TBEC</i>	1B	QL(2 ea daily)
<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 ea daily); RX/OTC
<i>lansoprazole CPDR 30 MG</i>	1B	
<b>NEXIUM 24HR TBEC (esomeprazole magnesium)</b>	1B	QL(2 ea daily)
<i>omeprazole magnesium CPDR</i>	1B	QL(4 ea daily)
<i>omeprazole CPDR</i>	1B	QL(2 ea daily)
<i>omeprazole TBEC</i>	1B	QL(2 ea daily)
<i>pantoprazole sodium TBEC 40 MG</i>	1B	
<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 ea daily)
<i>rabeprazole sodium TBEC</i>	3	QL(1 ea daily)
<b>Ulcer Drugs - Prostaglandins</b>		
<i>misoprostol</i>	1B	QL(4 ea daily)
<b>Ulcer Therapy Combinations</b>		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 ea daily); RX/OTC
<b>URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms</b>		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		

Drug Name	Drug Tier	Requirements/Limits
<i>darifenacin hydrobromide</i>	1B	QL(1 ea daily)
<i>fesoterodine fumarate</i>	1B	QL(1 ea daily); PA
<i>oxybutynin chloride SOLN</i>	1B	
<i>oxybutynin chloride TABS 5 MG</i>	1B	
<i>oxybutynin chloride TB24</i>	1B	
<i>solifenacin succinate TABS</i>	1B	QL(1 ea daily); PA
<i>tolterodine tartrate CP24</i>	1B	QL(1 ea daily)
<i>tolterodine tartrate TABS</i>	1B	
<i>tropium chloride CP24</i>	1B	QL(1 ea daily)
<i>tropium chloride TABS</i>	1B	QL(3 ea daily)
<b>Urinary Antispasmodics - Cholinergic Agonists</b>		
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)
<i>bethanechol chloride 25 MG</i>	1B	
<b>Urinary Antispasmodics - Direct Muscle Relaxants</b>		
<i>flavoxate hcl</i>	1B	
<b>VACCINES</b>		
<b>Bacterial Vaccines</b>		
ACTHIB SOLR IM	0	
BEXSERO	0	
HIBERIX SOLR IJ	0	
MENACTRA	0	
MENQUADFI	0	
MENVEO SOLN	0	
MENVEO SOLR	0	
PEDVAX HIB SUSP	0	
PNEUMOVAX 23	0	
PNEUMOVAX 23/1 DOSE	0	
PREVNAR 13	0	
PREVNAR 20	0	1 max fill(s) per 999 day(s) retail
TRUMENBA	0	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VAXNEUVANCE	0	4 max fill(s) per 999 day(s) retail	ENGERIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
Viral Vaccines			FLUAD 2024-2025	0	1 max fill(s) per 180 day(s) retail
ABRYSVO	0		FLUAD QUADRIVALENT 2022-2023	0	1 max fill(s) per 180 day(s) retail
AFLURIA 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail	FLUAD QUADRIVALENT 2023-2024	0	1 max fill(s) per 180 day(s) retail
AFLURIA 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUARIX 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUARIX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUARIX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUBLOK 2024-2025 SOSY	0	1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUBLOK QUADRIVALENT 2022-2023	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AREXVY	0		FLUBLOK QUADRIVALENT 2023-2024	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
COMIRNATY 2023-24 SUSP	0		FLUCELVAX 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail
COMIRNATY 2023-24 SUSY	0		FLUCELVAX 2024-2025 SUSY	0	1 max fill(s) per 180 day(s) retail
COMIRNATY 2024-25 SUSY	0				
COMIRNATY SUSP	0				
ENGERIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FLUCELVAX QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE HIGH-DOSE 2024-2025 SUSY	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE HIGH-DOSE PF 2022-2023	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE HIGH-DOSE PF 2023-2024	0	1 max fill(s) per 180 day(s) retail
FLULAVAL 2024-2025 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLULAVAL QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLULAVAL QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUMIST NASAL VACCINE 2024-2025	0	1 max fill(s) per 180 day(s) retail	FLUZONE QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	GARDASIL 9 SUSP	0	3 max fill(s) per 365 day(s) retail
FLUZONE 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail	GARDASIL 9 SUSY	0	3 max fill(s) per 365 day(s) retail
			HAVRIX	0	
			HEPLISAV-B SOSY	0	2 max fill(s) per 292 day(s) retail; 2 max fill(s) per 292 day(s) mail
			IPOL INACTIVATED IPV	0	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail	PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail
MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	0		RECOMBIVAX HB SUSP	0	
MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY	0		RECOMBIVAX HB SUSY	0	
MODERNA COVID-19 VACCINE6MO-5Y SUSP	0		ROTARIX SUSP	0	
MODERNA COVID-19 VACCINE SUSP	0		ROTARIX SUSR	0	
NOVAVAX COVID-19 VACCINE/2024-25 SUSY	0		ROTATEQ SOLN	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	0		SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	0		SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP	0		SPIKEVAX COVID-19 VACCINE SUSP	0	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	0		TWINRIX SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	0		VAQTA	0	
PFIZER-BIONTECH COVID-19VACCINE SUSP	0		VARIVAX INJ	0	2 max fill(s) per 365 day(s) retail
PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail	<b>VAGINAL AND RELATED PRODUCTS</b>		
			Miscellaneous Vaginal Products		
			INTRAROSA	3	QL(1 ea daily); PA
			Spermicides		
			TODAY SPONGE MISC	0	
			Vaginal Anti-infectives		
			<i>clindamycin phosphate vaginal CREA</i>	1B	
			<i>clotrimazole vaginal CREA 1 %</i>	1B	
			GYNAZOLE-1	3	QL(5 gm per 30 day(s) retail; 5 gm per 30 days mail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole vaginal</i>	1B		<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT</i>	1A	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B		<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0	
<i>terconazole vaginal CREA</i>	1B		<i>ergocalciferol CAPS</i>	0	
<i>terconazole vaginal CREA</i>	1B		<i>ergocalciferol SOLN OR</i>	1B	
<i>terconazole vaginal SUPP</i>	1B		VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Vaginal Anti-inflammatory Agents			Water Soluble Vitamins		
<i>hydrocortisone vaginal</i>	1B	QL(15.15 gm daily)	<i>ascorbic acid SOLN IJ</i>	3	QL(0.4 ml daily)
Vaginal Contraceptive - pH Modulators			NIACIN TR TBCR	1B	
PHEXXI	0	PV	<i>niacinamide TABS 100 MG</i>	1B	
Vaginal Estrogens			<i>niacinamide TABS 500 MG</i>	1A	
<i>estradiol vaginal CREA</i>	1B	QL(2 gm daily)	<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>estradiol vaginal TABS</i>	1B		<i>niacin TABS</i>	1A	
ESTRING RING	3		<i>niacin TBCR</i>	1A	
FEMRING	3		<b>VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions</b>		
PREMARIN	2	QL(1.5 gm daily)	Anaphylaxis Therapy Agents		
<b>VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions</b>			<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Anaphylaxis Therapy Agents			<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1B	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail	Vasopressors		
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1B	QL(2 ea per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail	<i>midodrine hcl</i>	1B	
Vasopressors			<b>VITAMINS</b>		
<i>midodrine hcl</i>	1B		Oil Soluble Vitamins		
<b>VITAMINS</b>			Oil Soluble Vitamins		

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butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	6	calcium chloride (dihydrate) SOLN	54	carmustine	23
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	6	calcium polycarbophil TABS	50	carteolol hcl (ophth)	58
butalbital-aspirin-caffeine CAPS	4	CALQUENCE	26	carvedilol	32
		candesartan cilexetil	20	carvedilol phosphate	32
		candesartan cilexetil-hydrochlorothiazide	20	caspofungin acetate	17
		capecitabine	23	CAYA DPRH	51
		CAPRELSA	26	CAYSTON	22
		captopril 12.5 MG	19	cefaclor CAPS	34
				cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	34
				cefadroxil CAPS	34

cefadroxil SUSR .....	34	CHEMSTRIP-K STRP .....	43	ciclopirox olamine SUSP .....	38
cefadroxil TABS .....	34	chloramphenicol sodium succinate 21		ciclopirox SHAM .....	38
cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG .....	34	chlordiazepoxide hcl CAPS .....	8	ciclopirox SOLN .....	38
cefdinir CAPS .....	34	chlordiazepoxide hcl-clidinium bromide .....	64	cidofovir .....	31
cefdinir SUSR .....	34	chlordiazepoxide-amitriptyline .....	62	cilostazol .....	49
cefepime hcl SOLR IV 2 GM .....	34	chlorhexidine gluconate (mouth- throat) .....	56	CIMDUO .....	30
cefixime CAPS .....	34	chloroquine phosphate TABS 250 MG .....	22	cimetidine TABS .....	64
cefixime SUSR .....	34	chloroquine phosphate TABS 500 MG .....	22	cinacalcet hcl .....	45
cefotaxime sodium IJ 1 GM, 2 GM	34	chlorpromazine hcl SOLN .....	29	CIPRO SUSR .....	46
cefotetan disodium IJ 1 GM, 2 GM	34	chlorpromazine hcl TABS .....	29	ciprofloxacin hcl (ophth) SOLN ....	59
cefoxitin sodium IV 1 GM, 2 GM ...	34	chlorthalidone 25 MG, 50 MG .....	44	ciprofloxacin hcl (otic) .....	60
cefpodoxime proxetil SUSR .....	34	chlorthalidone 25 MG, 50 MG .....	44	ciprofloxacin hcl TABS .....	46
cefpodoxime proxetil TABS .....	34	chlorzoxazone TABS 500 MG .....	57	ciprofloxacin in d5w 5 %-200 MG/100ML .....	46
cefprozil SUSR .....	34	chlorzoxazone TABS 750 MG .....	58	ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML .....	46
cefprozil TABS .....	34	CHOLBAM .....	47	ciprofloxacin-dexamethasone .....	60
ceftazidime IJ 1 GM, 6 GM .....	34	cholecalciferol CAPS 1.25 MG, 1.25 MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT .....	69	ciprofloxacin-fluocinolone acetonide .	60
ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG .....	34	cholecalciferol TABS 10 MCG, 400 UNIT .....	69	cisplatin SOLN 100 MG/100ML ....	23
ceftriaxone sodium IJ 250 MG .....	34	cholestyramine light PACK .....	19	citalopram hydrobromide SOLN ...	13
cefuroxime axetil TABS .....	34	cholestyramine light POWD .....	19	citalopram hydrobromide TABS 10 MG .....	13
cefuroxime sodium IJ 750 MG .....	34	cholestyramine PACK .....	19	citalopram hydrobromide TABS 20 MG .....	13
celecoxib .....	4	cholestyramine POWD .....	19	citalopram hydrobromide TABS 40 MG .....	13
CELONTIN (methsuximide) .....	12	choline fenofibrate .....	19	clarithromycin SUSR .....	51
cephalexin CAPS .....	34	CHORIONIC GONADOTROPIN IM 45		clarithromycin TABS .....	51
cephalexin SUSR .....	34	ciclopirox GEL .....	38	clarithromycin TB24 .....	51
CERDELGA .....	49	ciclopirox olamine CREA .....	38	CLASSIC PRENATAL TABS .....	56
CEREZYME 400 UNIT .....	49			clemastine fumarate SYRP .....	18
cetirizine hcl TABS .....	18				
cevimeline hcl .....	56				
CHEMET .....	16				



clemastine fumarate TABS 2.68 MG . 18	40	clozapine TBDP 25 MG .....	29
CLIMARA PRO .....	46	COARTEM .....	22
clindamycin hcl .....	22	codeine sulfate TABS 30 MG .....	5
clindamycin palmitate hydrochloride . 22		CODEINE SULFATE TABS .....	5
clindamycin phosphate (topical) FOAM .....	37	colchicine TABS .....	48
clindamycin phosphate (topical) GEL 37	40	colchicine w/ probenecid .....	48
clindamycin phosphate (topical) LOTN .....	37	colesevelam hcl PACK .....	19
clindamycin phosphate (topical) SOLN .....	37	colesevelam hcl TABS .....	19
clindamycin phosphate (topical) SWAB .....	37	colestipol hcl GRAN .....	19
clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML .....	22	colestipol hcl PACK .....	19
clindamycin phosphate vaginal CREA .....	68	colestipol hcl TABS .....	19
clindamycin phosphate-benzoyl peroxide (refrigerate) .....	37	COMBIPATCH PTTW .....	46
clindamycin phosphate-benzoyl peroxide GEL 5 %-1 % .....	37	COMETRIQ KIT .....	26
clindamycin phosphate-tretinoin .. 37		COMIRNATY 2023-24 SUSP .....	66
CLINIMIX 4.25%/DEXTROSE 10% 58		COMIRNATY 2023-24 SUSY .....	66
CLINIMIX 4.25%/DEXTROSE 5% 58		COMIRNATY 2024-25 SUSY .....	66
CLINIMIX E 5%/DEXTROSE 20% 58		COMIRNATY SUSP .....	66
clobazam SUSP .....	11	COMPLERA .....	30
clobazam TABS .....	11	CONTRACE .....	1
clobetasol propionate CREA 0.05 % . 29		COPIKTRA .....	26
		CORDRAN TAPE .....	41
		CORLANOR SOLN .....	34
		CORLANOR TABS (ivabradine hcl) 34	
		CORTISPORIN-TC .....	60
		COSENTYX SENSOREADY PEN SOAJ .....	39
		COSENTYX SOSY 150 MG/ML ...	39
		COSENTYX SOSY 75 MG/0.5ML .	39
		COSENTYX UNOREADY SOAJ ..	39
		CREON CPEP .....	43

CRESEMBA CAPS 186 MG ..... 18	cyproheptadine hcl SYRP ..... 18	deflazacort TABS ..... 36
cromolyn sodium (ophth) ..... 60	cyproheptadine hcl TABS ..... 18	DELESTROGEN 10 MG/ML (estradiol valerate) ..... 46
cromolyn sodium NEBU ..... 9	CYTAGON CAPS ..... 48	DELSTRIGO ..... 30
crotamiton LOTN ..... 42	CYSTARAN ..... 60	demeclocycline hcl TABS ..... 63
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG- 263 MG-11 UNIT-4000 UNIT ..... 56	cytarabine SOLN ..... 23	DEPO-ESTRADIOL ..... 46
cyanocobalamin SOLN IJ 1000 MCG/ML ..... 49	dabigatran etexilate mesylate CAPS . 11	DEPO-MEDROL SUSP ..... 36
cyclobenzaprine hcl TABS 5 MG, 10 MG ..... 58	dacarbazine SOLR 200 MG ..... 27	DEPO-SUBQ PROVERA 104 SUSY SC ..... 35
cyclophosphamide CAPS ..... 23	dactinomycin ..... 25	desipramine hcl TABS ..... 14
cyclophosphamide SOLR IJ ..... 23	dalfampridine ..... 62	desloratadine TABS ..... 18
cycloserine ..... 23	danazol CAPS ..... 7	desloratadine TBDP 2.5 MG ..... 18
cyclosporine (ophth) EMUL ..... 59	dantrolene sodium CAPS ..... 58	desmopressin acetate SOLN IJ ... 45
cyclosporine CAPS ..... 56	dapagliflozin propanediol ..... 16	DESMOPRESSIN ACETATE SOLN NA ..... 46
cyclosporine modified (for microemulsion) CAPS ..... 55	dapagliflozin propanediol-metformin hcl 1000 MG-10 MG ..... 15	desmopressin acetate spray ..... 45
cyclosporine modified (for microemulsion) SOLN ..... 55	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG ..... 14	desmopressin acetate spray refrigerated ..... 45
cyclosporine SOLN IV 50 MG/ML . 56	dapsone ..... 22	desmopressin acetate TABS 0.1 MG 46
CYLTEZO AJKT ..... 3	DAPTACEL ..... 64	desmopressin acetate TABS 0.2 MG 46
CYLTEZO PSKT 10 MG/0.2ML, 40 MG/0.4ML ..... 3	daptomycin 500 MG ..... 21	desogestrel & ethinyl estradiol .... 35
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML ..... 3	darifenacin hydrobromide ..... 65	desogestrel-ethinyl estradiol (biphasic) ..... 35
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT ..... 3	darunavir TABS ..... 30	desogestrel-ethinyl estradiol (triphasic) ..... 35
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT ..... 3	dasatinib ..... 26	desonide CREA ..... 41
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT ... 3	DAURISMO ..... 24	desonide LOTN ..... 41
	DEBACTEROL ..... 56	desonide OINT ..... 41
	decitabine ..... 24	desoximetasone CREA 0.25 % ... 41
	deferasirox PACK ..... 17	desoximetasone GEL ..... 41
	deferasirox TABS ..... 17	desoximetasone OINT 0.25 % .... 41
	deferasirox TBSO ..... 17	
	deferiprone TABS 500 MG ..... 17	
	deflazacort SUSP ..... 36	

desvenlafaxine succinate 100 MG .14	DIACOMIT PACK 250 MG .....11	MCG ..... 33
desvenlafaxine succinate 25 MG, 50 MG ..... 14	DIACOMIT PACK 500 MG .....11	dihydroergotamine mesylate SOLN IJ 1 MG/ML ..... 53
dexamethasone ELIX .....36	diazepam (anticonvulsant) GEL ... 11	dihydroergotamine mesylate SOLN NA 4 MG/ML ..... 53
DEXAMETHASONE INTENSOL CONC .....36	diazepam CONC ..... 8	DILANTIN (phenytoin sodium extended) ..... 12
dexamethasone sodium phosphate (ophth) .....59	diazepam SOLN OR 5 MG/5ML .... 8	DILANTIN .....12
dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML .....36	diazepam TABS .....8	DILANTIN INFATABS CHEW (phenytoin) ..... 12
dexamethasone sodium phosphate SOSY IJ 4 MG/ML ..... 36	diazoxide ..... 15	DILANTIN-125 SUSP (phenytoin) . 12
dexamethasone SOLN .....36	dichlorphenamide ..... 43	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG ..... 32
dexamethasone TABS 0.5 MG, 0.75 MG ..... 36	diclofenac epolamine PTCH EX ... 39	diltiazem hcl coated beads CP24 180 MG, 240 MG ..... 32
dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG ..... 36	diclofenac potassium TABS 50 MG .4	diltiazem hcl CP12 ..... 32
dexchlorpheniramine maleate SOLN . 18	diclofenac sodium (actinic keratoses) EX ..... 39	diltiazem hcl CP24 ..... 32
dexlansoprazole .....65	diclofenac sodium (ophth) .....60	diltiazem hcl extended release beads .....32
dexmethylphenidate hcl CP24 ..... 2	diclofenac sodium (topical) GEL EX 39	diltiazem hcl SOLN 50 MG/10ML ..32
dexmethylphenidate hcl TABS .....2	diclofenac sodium TB24 ..... 4	DILTIAZEM HCL SOLR ..... 32
dextroamphetamine sulfate CP24 10 MG, 15 MG ..... 1	diclofenac sodium TBEC ..... 4	diltiazem hcl TABS .....32
dextroamphetamine sulfate CP24 5 MG .....1	diclofenac w/ misoprostol TBEC .... 4	diltiazem hcl TB24 ..... 33
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1	dicloxacin sodium .....61	dimethyl fumarate CDPK ..... 62
dextroamphetamine sulfate TABS 5 MG, 10 MG ..... 1	dicyclomine hcl CAPS ..... 64	dimethyl fumarate CPDR ..... 62
dextrose in lactated ringers ..... 54	dicyclomine hcl SOLN OR .....64	DIPENTUM .....47
DIACOMIT CAPS 250 MG .....11	dicyclomine hcl TABS .....64	diphenhydramine hcl CAPS 50 MG 18
DIACOMIT CAPS 500 MG .....11	DIFFERIN LOTN .....37	diphenhydramine hcl ELIX 12.5 MG/5ML ..... 18
	DIFICID TABS ..... 51	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML ..... 18
	diflorasone diacetate CREA ..... 41	diphenhydramine hcl SOLN 50
	diflorasone diacetate OINT ..... 41	
	diflunisal TABS ..... 5	
	difluprednate ..... 59	
	digoxin SOLN OR 0.05 MG/ML ....33	
	digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250	

MG/ML .....	18	doxepin hcl CAPS .....	14	DUPIXENT SOPN 300 MG/2ML ...	42
diphenoxylate w/ atropine LIQD ...	16	doxepin hcl CONC .....	14	DUPIXENT SOSY 100 MG/0.67ML	42
diphenoxylate w/ atropine TABS ...	16	doxercalciferol CAPS .....	45	DUPIXENT SOSY 200 MG/1.14ML	42
DIPHThERIA/TETANUS TOXOIDS		doxercalciferol SOLN .....	45	DUPIXENT SOSY 300 MG/2ML ...	42
ADSORBED PEDIATRIC SUSP ...	64	doxorubicin hcl liposomal .....	25	DUREX EXTRA SENSITIVE THIN	
dipyridamole .....	49	doxorubicin hcl SOLN .....	25	DEVI .....	51
disopyramide phosphate CAPS .....	8	doxorubicin hcl SOLR 10 MG, 50 MG		DUREX EXTRA SENSITIVE THIN	
disulfiram .....	61	.....	25	MISC .....	51
DIURIL SUSP .....	44	doxycycline (monohydrate) CAPS 50	50	DUREX TROPICAL MISC .....	51
divalproex sodium TB24 .....	13	MG, 100 MG .....	63	dutasteride .....	48
divalproex sodium TBEC .....	13	doxycycline (monohydrate) CAPS 75	63	dutasteride-tamsulosin hcl .....	48
docetaxel CONC 20 MG/ML .....	27	MG .....	63	econazole nitrate CREA .....	38
docetaxel SOLN 20 MG/2ML .....	27	doxycycline (monohydrate) TABS		EDARBI .....	20
docusate calcium .....	51	100 MG .....	63	EDURANT .....	30
docusate sodium CAPS 100 MG ..	51	doxycycline (monohydrate) TABS 50	50	efavirenz CAPS 200 MG .....	30
docusate sodium CAPS 250 MG ..	51	MG, 75 MG .....	63	efavirenz CAPS 50 MG .....	30
dofetilide .....	8	doxycycline hyclate CAPS .....	63	efavirenz TABS .....	30
donepezil hydrochloride TABS 10		doxycycline hyclate SOLR .....	63	efavirenz-emtricitabine-tenofovir	
MG .....	61	doxycycline hyclate TABS 20 MG,		disoproxil fumarate .....	30
donepezil hydrochloride TABS 5 MG,		100 MG .....	63	efavirenz-lamivudine-tenofovir	
23 MG .....	61	doxylamine-pyridoxine TBEC .....	17	disoproxil fumarate .....	30
donepezil hydrochloride TBDP 10		dronabinol CAPS .....	17	EGRIFTA 2 MG .....	45
MG .....	61	drospirenone-ethinyl estradiol ....	35	EGRIFTA SV .....	45
donepezil hydrochloride TBDP 5 MG		drospirenone-ethinyl estradiol-		ELAPRASE .....	45
61		levomefolate calcium .....	35	electrolyte-148 .....	54
DOPTelet .....	49	DROXIA CAPS .....	49	electrolyte-a .....	54
dorzolamide hcl .....	60	DUAVEE .....	46	ELESTRIN GEL .....	46
dorzolamide hcl-timolol maleate ..	58	DULERA .....	10	eletriptan hydrobromide .....	54
DOVATO .....	30	duloxetine hcl CPEP 20 MG, 30 MG,		ELIGARD KIT SC 7.5 MG .....	25
doxazosin mesylate .....	20	60 MG .....	14	ELIGARD SC 22.5 MG, 30 MG, 45	
doxepin hcl (antipruritic) .....	39	duloxetine hcl CPEP 40 MG .....	14		
doxepin hcl (sleep) .....	50	DUPIXENT SOPN 200 MG/1.14ML			
		42			

MG .....	25	ENGERIX-B SUSP 20 MCG/ML .....	66	ERAXIS .....	17
ELIQUIS STARTER PACK TBPK .....	10	ENGERIX-B SUSY .....	66	ERBITUX .....	24
ELIQUIS TABS .....	10	enoxaparin sodium SOLN IJ 300 MG/3ML .....	10	ergocalciferol CAPS .....	69
ELLA .....	35	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML .....	10	ergocalciferol SOLN OR .....	69
ELMIRON CAPS .....	48	enoxaparin sodium SOSY 30 MG/0.3ML .....	10	ergoloid mesylates TABS .....	62
ELOCTATE .....	48	enoxaparin sodium SOSY 40 MG/0.4ML .....	10	ERGOMAR SUBL .....	53
EMCYT .....	25	enoxaparin sodium SOSY 60 MG/0.6ML .....	10	ergotamine w/ caffeine TABS .....	53
EMFLAZA SUSP (deflazacort) .....	36	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML .....	10	eribulin mesylate .....	28
EMFLAZA TABS (deflazacort) .....	36	ENSPRYNG .....	56	ERIVEDGE .....	24
EMGALITY SOAJ .....	53	entacapone .....	28	ERLEADA 240 MG .....	25
EMGALITY SOSY 100 MG/ML .....	53	entecavir TABS .....	31	ERLEADA 60 MG .....	25
EMGALITY SOSY 120 MG/ML .....	53	EPIDIOLEX .....	11	erlotinib hcl .....	24
EMSAM .....	13	epinastine hcl (ophth) .....	60	ERTACZO .....	38
emtricitabine CAPS .....	30	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML .....	69	ertapenem sodium IJ .....	21
emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG .....	30	epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML .....	69	erythromycin (acne aid) PADS .....	37
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG .....	30	EPIVIR HBV SOLN .....	31	erythromycin (acne aid) SOLN .....	37
EMTRIVA SOLN .....	30	eplerenone .....	21	erythromycin (ophth) .....	59
EMVERM CHEW .....	7	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	49	erythromycin base CPEP .....	51
enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20		epoprostenol sodium .....	33	erythromycin base TABS .....	51
enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20		EQL PRENATAL FORMULA TABS 56		erythromycin base TBEC .....	51
enalapril maleate TABS .....	19	EQUETRO 100 MG .....	29	erythromycin ethylsuccinate SUSR 51	
ENBREL MINI SOCT .....	4	EQUETRO 200 MG .....	29	erythromycin ethylsuccinate TABS 51	
ENBREL SOLN .....	4	EQUETRO 300 MG .....	29	escitalopram oxalate SOLN .....	13
ENBREL SOSY 25 MG/0.5ML .....	4			escitalopram oxalate TABS 10 MG 13	
ENBREL SOSY 50 MG/ML .....	4			escitalopram oxalate TABS 20 MG 13	
ENBREL SURECLICK SOAJ .....	4			escitalopram oxalate TABS 5 MG . 13	

esomeprazole magnesium CPDR 40 MG .....	65	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML .....	28	FASENRA PEN SOAJ .....	9
esomeprazole magnesium TBEC ..	65	etravirine 100 MG .....	30	FASENRA SOSY 30 MG/ML .....	9
ESPEROCT .....	48	etravirine 200 MG .....	30	FC2 FEMALE CONDOM .....	51
estazolam .....	50	EUCRISA .....	42	febuxostat .....	48
esterified estrogens & methyltestosterone .....	46	EVAMIST SOLN .....	46	felbamate SUSP .....	12
estradiol & norethindrone acetate TABS .....	46	everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG .....	56	felbamate TABS 400 MG .....	12
estradiol GEL 0.06 % .....	46	everolimus (immunosuppressant) 1 MG .....	56	felbamate TABS 600 MG .....	12
estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM .....	46	everolimus TABS .....	26	felodipine .....	33
estradiol PTTW .....	46	EVOTAZ .....	30	FEMCAP DEVI .....	51
estradiol PTWK .....	46	exemestane .....	25	FEMRING .....	69
estradiol TABS .....	46	ezetimibe .....	19	fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG ...	19
estradiol vaginal CREA .....	69	ezetimibe-simvastatin .....	18	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
estradiol vaginal TABS .....	69	famciclovir 125 MG, 250 MG .....	31	fenoprofen calcium TABS .....	4
estradiol valerate .....	46	famciclovir 500 MG .....	31	FENSOLVI SC .....	45
ESTRING RING .....	69	famotidine in nacl SOLN .....	64	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
ESTROGEL GEL (estradiol) .....	46	famotidine SOLN 20 MG/2ML .....	64	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
eszopiclone .....	50	famotidine SOLN 40 MG/4ML, 200 MG/20ML .....	64	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
ethacrynic acid .....	44	famotidine SUSR .....	64	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
ethambutol hcl TABS .....	23	famotidine TABS 20 MG, 40 MG ..	64	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
ethosuximide CAPS .....	12	FANAPT .....	29	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
ethosuximide SOLN .....	12	FANAPT TITRATION PACK .....	29	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
ethynodiol diacet & eth estrad .....	35	FANTASY LUBRICATED MISC ...	51	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
etodolac CAPS .....	4	FANTASY LUBRICATED/SPERMICIDE MISC	51	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
etodolac TABS .....	4	FARXIGA (dapagliflozin propanediol) .....	16	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	19
etonogestrel-ethinyl estradiol .....	35	FARXIGA .....	16	ferrous fumarate-folic acid .....	50
ETOPOPHOS .....	28			ferrous sulfate SOLN 15 MG/ML ..	50
etoposide CAPS .....	28			ferrous sulfate TABS 65 MG, 325 MG .....	50
				ferrous sulfate TBEC 325 MG .....	50
				fesoterodine fumarate .....	65
				FETZIMA CP24 .....	14
				FETZIMA TITRATION PACK C4PK	14
				finasteride .....	48
				fingolimod hcl .....	62
				FIRDAPSE .....	23

FIRMAGON .....	25	fludarabine phosphate SOLR .....	24	fluoxetine hcl CPDR .....	13
flavoxate hcl .....	65	fludrocortisone acetate TABS .....	36	fluoxetine hcl SOLN .....	13
flecainide acetate .....	8	FLULAVAL 2024-2025 SUSY .....	67	fluoxetine hcl TABS 10 MG, 60 MG	13
floxuridine .....	24	FLULAVAL QUADRIVALENT 2022-			
FLUAD 2024-2025 .....	66	2023 SUSY .....	67	fluoxetine hcl TABS 20 MG .....	13
FLUAD QUADRIVALENT 2022-2023		FLULAVAL QUADRIVALENT 2023-			
.....	66	2024 SUSY .....	67	fluphenazine hcl CONC .....	29
FLUAD QUADRIVALENT 2023-2024		FLUMIST NASAL VACCINE 2024-		fluphenazine hcl ELIX .....	29
.....	66	2025 .....	67	fluphenazine hcl SOLN .....	29
FLUARIX 2024-2025 SUSY .....	66	FLUMIST QUADRIVALENT .....	67	fluphenazine hcl TABS .....	29
FLUARIX QUADRIVALENT 2022-		flunisolide (nasal) 0.025 % .....	58	flurandrenolide CREA .....	41
2023 SUSY .....	66	fluocinolone acetonide (otic) .....	60	flurandrenolide LOTN .....	41
FLUARIX QUADRIVALENT 2023-		fluocinolone acetonide CREA 0.01 %		flurazepam hcl .....	50
2024 SUSY .....	66	41		flurbiprofen sodium .....	60
FLUBLOK 2024-2025 SOSY .....	66	fluocinolone acetonide CREA 0.025		flurbiprofen TABS .....	4
FLUBLOK QUADRIVALENT 2022-		% .....	41	flutamide .....	25
2023 .....	66	fluocinolone acetonide OIL .....	41	fluticasone furoate-vilanterol .....	10
FLUBLOK QUADRIVALENT 2023-		fluocinolone acetonide OINT .....	41	fluticasone propionate (inhalation)	
2024 .....	66	fluocinolone acetonide SOLN .....	41	AEPB .....	9
FLUCELVAX 2024-2025 SUSP ...	66	fluocinonide CREA 0.05 % .....	41	fluticasone propionate (nasal) SUSP .	
FLUCELVAX 2024-2025 SUSY ...	66	fluocinonide CREA 0.1 % .....	41	58	
FLUCELVAX QUADRIVALENT		fluocinonide emulsified base .....	41	fluticasone propionate CREA 0.05 %	
2022-2023 SUSP .....	67	fluocinonide GEL .....	41	41	
FLUCELVAX QUADRIVALENT		fluocinonide OINT .....	41	fluticasone propionate hfa .....	9
2022-2023 SUSY .....	67	fluocinonide SOLN .....	41	fluticasone propionate LOTN .....	41
FLUCELVAX QUADRIVALENT		fluorometholone (ophth) SUSP ....	59	fluticasone propionate OINT .....	41
2023-2024 SUSP .....	67	fluorouracil (topical) CREA 5 % ...	39	fluticasone-salmeterol AEPB .....	10
FLUCELVAX QUADRIVALENT		fluorouracil (topical) SOLN .....	39	fluticasone-salmeterol AERO .....	10
2023-2024 SUSY .....	67	fluorouracil 500 MG/10ML .....	24	fluvastatin sodium CAPS 20 MG ...	19
fluconazole SUSR .....	18	fluoxetine hcl CAPS 10 MG .....	13	fluvastatin sodium CAPS 40 MG ...	19
fluconazole TABS .....	18	fluoxetine hcl CAPS 20 MG .....	13	fluvoxamine maleate TABS 100 MG .	
flucytosine .....	18	fluoxetine hcl CAPS 40 MG .....	13	13	
fludarabine phosphate SOLN .....	24			fluvoxamine maleate TABS 25 MG,	

50 MG .....	13	FOSAMAX PLUS D .....	44	FYCOMPA TABS 2 MG .....	11
FLUZONE 2024-2025 SUSP .....	67	fosamprenavir calcium TABS .....	30	FYCOMPA TABS 4 MG .....	11
FLUZONE 2024-2025 SUSY .....	67	fosfomycin tromethamine .....	22	FYCOMPA TABS 6 MG .....	11
FLUZONE HIGH-DOSE 2024-2025 SUSY .....	67	fosinopril sodium & hydrochlorothiazide .....	20	FYCOMPA TABS 8 MG, 10 MG, 12 MG .....	11
FLUZONE HIGH-DOSE PF 2022- 2023 .....	67	fosinopril sodium .....	19	gabapentin CAPS .....	11
FLUZONE HIGH-DOSE PF 2023- 2024 .....	67	fosphenytoin sodium .....	12	gabapentin SOLN .....	11
FLUZONE QUADRIVALENT 2022- 2023 SUSP .....	67	FRAGMIN SOSY .....	11	gabapentin TABS 600 MG, 800 MG 12	
FLUZONE QUADRIVALENT 2022- 2023 SUSY .....	67	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM .....	53	GALAFOLD .....	45
FLUZONE QUADRIVALENT 2023- 2024 SUSP .....	67	FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM .....	53	galantamine hydrobromide CP24 ..	61
FLUZONE QUADRIVALENT 2023- 2024 SUSY .....	67	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM .....	53	galantamine hydrobromide SOLN ..	61
FML FORTE SUSP .....	59	FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM .....	53	galantamine hydrobromide TABS ..	61
FML OINT .....	59	FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM .....	53	GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	60
folic acid TABS .....	49	FREESTYLE LIBRE 3/SENSOR/FLASH GLUCOSE MONITORING SYSTEM .....	53	GAMMAGARD LIQUID 30 GM/300ML .....	60
fondaparinux sodium 10 MG/0.8ML 10		FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM .....	53	GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR .....	60
fondaparinux sodium 2.5 MG/0.5ML . 10		FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM .....	53	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	60
fondaparinux sodium 5 MG/0.4ML .11		FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM .....	53	GAMUNEX-C .....	60
fondaparinux sodium 7.5 MG/0.6ML . 10		frovatriptan succinate .....	54	ganciclovir sodium SOLR .....	31
FORA GTEL BLOOD KETONE TEST STRIPS .....	43	fulvestrant SOSY .....	25	ganirelix acetate .....	45
FORA TEST N' GO ADVANCE/VOICE/6 CONNECT ..43		furosemide SOLN OR 10 MG/ML, 40 MG/5ML .....	44	GARDASIL 9 SUSP .....	67
formoterol fumarate NEBU .....	10	furosemide TABS .....	44	GARDASIL 9 SUSY .....	67
FORTEO SOPN (teriparatide (recombinant)) .....	44	FUZEON SOLR .....	30	gatifloxacin (ophth) .....	59
				gefitinib .....	24
				gemcitabine hcl SOLR 2 GM, 200 MG .....	24
				gemfibrozil TABS .....	19



GENOTROPIN CART SC .....	45	MG .....	15	haloperidol lactate SOLN .....	29
GENOTROPIN MINIQUICK PRSY	45	glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG .....	15	haloperidol TABS .....	29
gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 % .....	2	glycine (gu irrigant) SOLN 1.5 % ..	48	HAVRIX .....	67
gentamicin sulfate (ophth) OINT ..	59	glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML .....	64	HEALON PRO SOSY .....	59
gentamicin sulfate (ophth) SOLN ..	59	glycopyrrolate TABS 1 MG .....	64	HEMANGEOL SOLN OR .....	32
gentamicin sulfate (topical) CREA .	38	glycopyrrolate TABS 2 MG .....	64	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	11
gentamicin sulfate (topical) OINT ..	38	GLYXAMBI .....	15	HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML 11	
gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML .....	2	GNP PRENATAL TABS .....	56	HEPLISAV-B SOSY .....	67
GENVOYA .....	30	GOJJI BLOOD KETONE TEST STRIPS .....	43	HIBERIX SOLR IJ .....	65
GILOTRIF .....	24	granisetron hcl SOLN IV 1 MG/ML	17	HUMATROPE CART IJ .....	45
glatiramer acetate SOSY 20 MG/ML . 62		granisetron hcl TABS .....	17	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML .....	3
glatiramer acetate SOSY 40 MG/ML . 62		GRASTEK SUBL .....	2	HUMIRA PEN PNKT 80 MG/0.8ML .	3
GLEOSTINE 10 MG .....	23	griseofulvin microsize SUSP .....	18	HUMIRA PEN PNKT .....	3
GLEOSTINE 40 MG, 100 MG .....	23	griseofulvin microsize TABS .....	18	HUMIRA PEN-CD/UC/HS STARTER PNKT .....	3
glimepiride 1 MG, 2 MG .....	16	griseofulvin ultramicrosize .....	18	HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT .....	3
glimepiride 4 MG .....	16	guanfacine hcl (adhd) .....	1	HUMIRA PEN-PS/UV STARTER PNKT .....	3
glipizide TABS 5 MG, 10 MG .....	16	guanfacine hcl .....	20	HUMIRA PSKT .....	3
glipizide TB24 .....	16	GYNAZOLE-1 .....	68	HUMULIN R U-500 (CONCENTRATED) SOLN SC ....	16
glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG .....	15	HADLIMA PUSHTOUCH SOAJ ....	3	HUMULIN R U-500 KWIKPEN SOPN SC .....	16
glipizide-metformin hcl 500 MG-5 MG .....	15	HADLIMA SOSY .....	3	HYCANTIN CAPS .....	28
GLUCAGEN DIAGNOSTIC .....	42	HAEGARDA SOLR SC .....	48	hydralazine hcl SOLN .....	21
glucagon (rdna) .....	15	HALAVEN (eribulin mesylate) ....	28	hydralazine hcl TABS .....	21
glyburide micronized 1.5 MG, 3 MG, 6 MG .....	16	halcinonide CREA .....	41	hydrochlorothiazide CAPS .....	44
glyburide TABS .....	16	halobetasol propionate CREA ....	41		
glyburide-metformin 250 MG-1.25		halobetasol propionate OINT .....	41		
		HALOG OINT .....	41		
		haloperidol decanoate .....	29		
		haloperidol lactate CONC .....	29		

hydrochlorothiazide TABS 12.5 MG 44	hydrocortisone vaginal ..... 69	icatibant acetate SOLN ..... 48
hydrochlorothiazide TABS 25 MG, 50 MG ..... 44	hydrocortisone valerate CREA .... 41	icatibant acetate SOSY ..... 48
hydrocodone polistirex- chlorpheniramine polistirex SUER .37	hydrocortisone valerate OINT ..... 41	ICLUSIG ..... 26
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML ..... 6	hydrocortisone w/acetic acid ..... 60	icosapent ethyl 1 GM ..... 19
hydrocodone-acetaminophen SOLN . 6	hydromorphone hcl LIQD ..... 5	idarubicin hcl 20 MG/20ML ..... 25
hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG ..... 6	hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML . 5	idarubicin hcl 5 MG/5ML, 10 MG/10ML ..... 25
hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG ..... 6	hydromorphone hcl TABS ..... 5	IDELVION ..... 48
hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG ..... 6	hydromorphone hcl TB24 32 MG ... 5	ifosfamide SOLN 1 GM/20ML ..... 23
hydrocodone-ibuprofen 7.5 MG-200 MG ..... 6	hydromorphone hcl TB24 8 MG, 12 MG, 16 MG ..... 5	ifosfamide SOLR ..... 23
hydrocortisone (intrarectal) ..... 7	hydroxychloroquine sulfate 100 MG 22	imatinib mesylate ..... 26
hydrocortisone (rectal) EX ..... 7	hydroxychloroquine sulfate 200 MG 22	IMBRUVICA CAPS 140 MG ..... 26
hydrocortisone (topical) CREA 1 %, 2.5 % ..... 41	hydroxychloroquine sulfate 400 MG 22	IMBRUVICA CAPS 70 MG ..... 26
hydrocortisone (topical) LOTN 2.5 % . 41	hydroxyurea ..... 27	IMBRUVICA SUSP ..... 26
hydrocortisone (topical) OINT 1 %, 2.5 % ..... 41	hydroxyzine hcl SOLN 50 MG/ML ... 8	IMBRUVICA TABS ..... 26
hydrocortisone acetate (rectal) ..... 7	hydroxyzine hcl SYRP ..... 8	imipenem-cilastatin IV ..... 21
hydrocortisone butyrate CREA .... 41	hydroxyzine hcl TABS ..... 8	imipramine hcl TABS ..... 14
hydrocortisone butyrate OINT ..... 41	hydroxyzine pamoate CAPS ..... 8	imipramine pamoate ..... 14
hydrocortisone butyrate SOLN .... 41	HYPERSAL NEBU ..... 37	imiquimod 5 % ..... 42
hydrocortisone TABS ..... 36	HYQVIA ..... 60	IMPAVIDO ..... 21
	ibandronate sodium SOLN ..... 44	INCRELEX ..... 45
	ibandronate sodium TABS ..... 44	INCRUSE ELLIPTA ..... 9
	IBRANCE CAPS ..... 26	indapamide TABS 1.25 MG ..... 44
	IBRANCE TABS ..... 26	indapamide TABS 2.5 MG ..... 44
	ibuprofen SUSP 100 MG/5ML ..... 4	indomethacin CAPS 25 MG, 50 MG 4
	ibuprofen TABS 400 MG, 600 MG ... 4	indomethacin CPCR ..... 4
	ibuprofen TABS 800 MG ..... 4	INFANRIX ..... 64
		INFLECTRA SOLR ..... 47
		INGREZZA CAPS ..... 62
		INGREZZA CPPK ..... 62

INGREZZA CPSP .....	62	irrigation solutions, physiological ..	56	JEVTANA .....	28
INLYTA .....	24	ISENTRESS CHEW .....	30	JIVI .....	48
INREBIC .....	26	ISENTRESS HD TABS .....	30	JULUCA .....	30
INSULIN ASPART FLEXPEN SOPN .	16	ISENTRESS TABS .....	30	JYNARQUE TBPK .....	46
INSULIN ASPART PENFILL SOCT	16	ISOLYTE-P/DEXTROSE 5% .....	54	KALYDECO TABS .....	63
INSULIN ASPART		ISOLYTE-S .....	54	KAMELEON LUBRICATED MISC .	51
PROTAMINE/INSULIN ASPART		isoniazid SOLN .....	23	KANJINTI .....	24
FLEXPEN SUPN .....	16	isoniazid SYRP .....	23	KCL 0.3%/D5W/NACL 0.9%	
INSULIN ASPART		isoniazid TABS .....	23	(potassium chloride in dextrose &	
PROTAMINE/INSULIN ASPART		isosorbide dinitrate TABS 5 MG, 10		sodium chloride) .....	54
SUSP .....	16	MG, 20 MG, 30 MG .....	8	KEPIVANCE 6.25 MG .....	27
INSULIN ASPART SOLN IJ .....	16	isosorbide dinitrate-hydralazine hcl		KESIMPTA .....	62
INSULIN DEGLUDEC FLEXTOUCH		33		ketoconazole (topical) CREA .....	38
SOPN .....	16	isosorbide mononitrate TABS .....	8	ketoconazole (topical) SHAM 2 % .	38
INSULIN DEGLUDEC SOLN .....	16	isosorbide mononitrate TB24 .....	8	ketoconazole .....	18
INTELENCE 25 MG .....	30	isotretinoin 10 MG, 20 MG, 30 MG,		KETONE STRP .....	43
INTRAROSA .....	68	40 MG .....	37	KETONE TEST STRIPS STRP ...	43
IONOSOL-MB/DEXTROSE 5% ..	54	isradipine CAPS .....	33	ketoprofen CAPS 50 MG .....	4
IOPIDINE .....	59	itraconazole CAPS .....	18	ketorolac tromethamine (ophth) ...	60
IPOSOL-MB/DEXTROSE 5% ..	54	itraconazole SOLN .....	18	ketorolac tromethamine TABS .....	4
IOPIDINE .....	59	ivabradine hcl TABS .....	34	KETOSTIX STRP .....	43
IPOSOL-MB/DEXTROSE 5% ..	54	ivermectin (pediculicide) .....	42	ketotifen fumarate (ophth) 0.035 %	
IOPIDINE .....	59	ivermectin .....	7	60	
IPOSOL-MB/DEXTROSE 5% ..	54	IXEMPRA KIT 15 MG .....	28	KEVZARA SOAJ .....	3
IOPIDINE .....	59	JAKAFI .....	26	KEVZARA SOSY .....	3
IPOSOL-MB/DEXTROSE 5% ..	54	JANUMET TABS .....	15	KIMONO COLORS DEVI .....	51
IOPIDINE .....	59	JANUMET XR TB24 1000 MG-100		KIMONO LUBRICATED MISC ....	51
IPOSOL-MB/DEXTROSE 5% ..	54	MG .....	15	KIMONO MAXX/LARGE FLARE	
IOPIDINE .....	59	JANUMET XR TB24 1000 MG-50		MISC .....	51
IPOSOL-MB/DEXTROSE 5% ..	54	MG, 500 MG-50 MG .....	15	KIMONO MICRO THIN PLUS	
IOPIDINE .....	59	JANUVIA .....	15	SPERMICIDE LUBRICATED MISC	
IPOSOL-MB/DEXTROSE 5% ..	54	JARDIANCE .....	16	51	

KIMONO PLUS SPERMICIDE LUBRICATED MISC .....	51	labetalol hcl TABS 100 MG, 200 MG . 32	leflunomide .....	4
KIMONO PLUS SPERMICIDE/LUBRICATED MISC 52		labetalol hcl TABS 300 MG .....	lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG .....	32 55
KIMONO PS LUBRICATED MISC .52		lacosamide SOLN IV 200 MG/20ML . 12	lenalidomide 20 MG .....	55
KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC 52		lacosamide TABS .....	LENVIMA 10 MG DAILY DOSE ...	24
KIMONO SENSATION LUBRICATED MISC .....	52	lactated ringer's (irrigation) .....	LENVIMA 12MG DAILY DOSE ...	24
KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC 52		lactated ringer's .....	LENVIMA 14 MG DAILY DOSE ...	24
KIMONO SPECIAL DEVI .....	52	lactic acid (ammonium lactate) CREA .....	LENVIMA 18 MG DAILY DOSE ...	24
KINRIX SUSY .....	64	lactic acid (ammonium lactate) LOTN 12 % .....	LENVIMA 20 MG DAILY DOSE ...	24
KISQALI .....	26	lactulose (encephalopathy) .....	LENVIMA 24 MG DAILY DOSE ...	24
KISQALI FEMARA 200 DOSE ....	26	lactulose SOLN .....	LENVIMA 4 MG DAILY DOSE ....	24
KISQALI FEMARA 400 DOSE ....	26	laminovudine (hbv) TABS .....	LENVIMA 8 MG DAILY DOSE ....	24
KISQALI FEMARA 600 DOSE ....	26	laminovudine SOLN .....	letrozole .....	25
KLARITY-A .....	59	laminovudine TABS 150 MG .....	leucovorin calcium SOLR .....	27
KOGENATE FS KIT .....	48	laminovudine TABS 300 MG .....	leucovorin calcium TABS .....	27
KOSELUGO .....	26	laminovudine-zidovudine .....	LEUKERAN .....	23
KOVALTRY .....	48	lamotrigine CHEW 25 MG .....	LEUKINE SOLR IJ .....	49
KP PRENATAL MULTIVITAMINS TABS .....	56	lamotrigine CHEW 5 MG .....	leuprolide acetate KIT IJ 1 MG/0.2ML .....	25
KRINTAFEL .....	22	lamotrigine TABS .....	levalbuterol hcl .....	10
K-Y ME & YOU EXTRA LUBRICATED DEVI .....	52	lamotrigine TBP .....	levalbuterol tartrate .....	10
K-Y ME & YOU INTENSE DEVI ...	52	LANOXIN SOLN IJ (digoxin) .....	LEVEMIR FLEXPEN SOPN .....	16
KYLEENA .....	36	LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin) .....	LEVEMIR FLEXTOUCH SOPN ....	16
KYPROLIS .....	26	lansoprazole CPDR 15 MG .....	LEVEMIR SOLN .....	16
labetalol hcl SOLN .....	32	lansoprazole CPDR 30 MG .....	levetiracetam SOLN IV 500 MG/5ML 12	
		lanthanum carbonate CHEW .....	levetiracetam TABS 1000 MG .....	12
		lapatinib ditosylate .....	levetiracetam TABS 250 MG, 750 MG .....	12
		LASTACFT .....	levetiracetam TABS 500 MG .....	12
		latanoprost SOLN .....	levetiracetam TB24 .....	12

levobunolol hcl 0.5 %	58	lidocaine PTCH 5 %	42	lorazepam TABS 0.5 MG, 2 MG	8
levocetirizine dihydrochloride SOLN 18		lidocaine-prilocaine CREA	42	lorazepam TABS 1 MG	8
levocetirizine dihydrochloride TABS 18		LILETTA 20.1 MCG/DAY	36	LORBRENA	26
levofloxacin (ophth) 0.5 %	59	lincomycin hcl	22	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	20
levofloxacin in d5w 5 %-500 MG/100ML	46	linezolid SUSR	22	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG	20
levofloxacin SOLN OR	46	linezolid TABS	22	losartan potassium	20
levofloxacin TABS 250 MG, 750 MG	47	LINZESS	47	LOTEMAX OINT	59
levofloxacin TABS 500 MG	47	liothyronine sodium SOLN	64	loteprednol etabonate GEL	59
levonorgestrel & eth estradiol TABS 35		liothyronine sodium TABS	64	loteprednol etabonate SUSP	59
levonorgestrel (emergency oc) 1.5 MG	35	lisdexamfetamine dimesylate CAPS 1		lovastatin TABS 10 MG, 20 MG	19
levonorgestrel-eth estradiol (triphasic)	35	lisdexamfetamine dimesylate CHEW 1		lovastatin TABS 40 MG	19
levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	35	lisinopril & hydrochlorothiazide	20	loxapine succinate	29
levonorgestrel-ethinyl estradiol (continuous)	35	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	19	lubiprostone	47
levonorgestrel-ethinyl estradiol-iron	35	lithium	28	LUCEMYRA (lofexidine hcl)	61
levorphanol tartrate TABS 2 MG	5	lithium carbonate CAPS	29	luliconazole	38
levothyroxine sodium TABS	64	lithium carbonate TABS	29	LUMIZYME	45
LEXIVA SUSP	30	lithium carbonate TBCR	29	LUPRON DEPOT (1-MONTH) KIT IM	25
lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %	51	LO LOESTRIN FE TABS	35	LUPRON DEPOT (3-MONTH) KIT IM	25
lidocaine hcl (mouth-throat) 2 %	56	lofexidine hcl	61	LUPRON DEPOT (4-MONTH) IM	25
lidocaine hcl (mouth-throat) 4 %	56	LOKELMA	56	LUPRON DEPOT (6-MONTH) IM	25
lidocaine hcl GEL 2 %	42	loperamide hcl CAPS	16	LUPRON DEPOT-PED (1-MONTH)	45
lidocaine hcl PRSY	42	lopinavir-ritonavir SOLN	30	LUPRON DEPOT-PED (3-MONTH) 11.25 MG	45
lidocaine hcl SOLN	42	lopinavir-ritonavir TABS	30	LUPRON DEPOT-PED (3-MONTH) 30 MG	45
		loratadine CAPS	18	lurasidone hcl 20 MG, 40 MG, 60	
		loratadine CHEW	18		
		loratadine SOLN	18		
		loratadine TABS	18		
		loratadine TBDP	18		
		lorazepam CONC	8		

MG, 120 MG .....	29	megestrol acetate TABS .....	25	metformin hcl TABS 850 MG .....	15
lurasidone hcl 80 MG .....	29	MEKINIST SOLR .....	26	metformin hcl TB24 500 MG .....	15
LYNPARZA TABS .....	26	MEKINIST TABS .....	26	metformin hcl TB24 750 MG .....	15
LYSODREN .....	25	MEKTOVI .....	26	methadone hcl CONC .....	.5
mafenide acetate PACK .....	40	meloxicam TABS .....	4	methadone hcl SOLN IJ 10 MG/ML .....	.5
magnesium sulfate IJ 50 % .....	55	melphalan .....	23	METHADONE HCL SOLN IJ .....	.5
malathion .....	42	melphalan hcl IV .....	23	methadone hcl SOLN OR 10 MG/5ML .....	5
maraviroc TABS 150 MG .....	30	memantine hcl TABS .....	61	methadone hcl SOLN OR 5 MG/5ML 5	
maraviroc TABS 300 MG .....	30	MENACTRA .....	65	methadone hcl TABS 10 MG .....	.5
MARPLAN .....	13	MENEST .....	46	methadone hcl TABS 5 MG .....	.5
MASONATAL TABS .....	57	MENOSTAR PTWK .....	46	methadone hcl TBSO .....	5
MATULANE .....	27	MENQUADFI .....	65	methamphetamine hcl .....	1
MAXIDEX SUSP OP .....	59	MENVEO SOLN .....	65	methazolamide TABS .....	43
MAXX LUBRICATED MISC .....	52	MENVEO SOLR .....	65	methenamine hippurate .....	22
MAXX PLUS SPERMICIDE LUBRICATED MISC .....	52	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML .....	5	methimazole TABS .....	64
meclizine hcl TABS 12.5 MG .....	17	meperidine hcl SOLN OR 50 MG/5ML .....	5	METHITEST TABS .....	7
meclizine hcl TABS 25 MG .....	17	meperidine hcl TABS 50 MG .....	5	methocarbamol TABS 500 MG, 750 MG .....	58
meclofenamate sodium CAPS .....	4	meprobamate .....	8	METHOTREXATE .....	3
MEDROL TABS .....	36	mercaptopurine TABS .....	24	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML .....	24
medroxyprogesterone acetate (contraceptive) SUSP IM .....	36	meropenem .....	21	methotrexate sodium SOLR .....	24
medroxyprogesterone acetate (contraceptive) SUSY IM .....	36	mesalamine CP24 .....	47	methotrexate sodium TABS 2.5 MG 24	
medroxyprogesterone acetate 10 MG .....	61	mesalamine CPDR .....	47	methoxsalen rapid .....	39
medroxyprogesterone acetate 2.5 MG, 5 MG .....	61	mesalamine ENEM .....	47	methscopolamine bromide .....	64
mefenamic acid CAPS .....	4	mesalamine SUPP .....	47	methsuximide .....	13
mefloquine hcl .....	23	mesalamine TBEC 1.2 GM .....	47	methyldopa TABS .....	20
megestrol acetate (appetite) .....	61	mesalamine TBEC 800 MG .....	47	methylphenidate hcl CHEW 10 MG .....	.2
megestrol acetate SUSP .....	25	metaxalone 800 MG .....	58	methylphenidate hcl CHEW 2.5 MG .....	2
		metformin hcl TABS 1000 MG .....	15		
		metformin hcl TABS 500 MG .....	15		

methylphenidate hcl CHEW 5 MG ..2	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG .....20	mirtazapine TABS 30 MG .....13
methylphenidate hcl CP24 10 MG, 60 MG .....2	metoprolol & hydrochlorothiazide TABS 25 MG-50 MG .....20	mirtazapine TABS 7.5 MG, 45 MG 13
methylphenidate hcl CP24 20 MG, 40 MG .....2	metoprolol succinate TB24 200 MG 32	mirtazapine TBDP 15 MG .....13
methylphenidate hcl CP24 30 MG ..2	metoprolol succinate TB24 25 MG, 50 MG, 100 MG .....32	mirtazapine TBDP 30 MG .....13
methylphenidate hcl CP24 .....2	metoprolol tartrate SOLN IV 5 MG/5ML .....32	mirtazapine TBDP 45 MG .....13
methylphenidate hcl CPRC .....2	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG .....32	misoprostol .....65
methylphenidate hcl SOLN .....2	metronidazole (topical) CREA .....42	mitomycin SOLR IV 20 MG .....25
methylphenidate hcl TABS 10 MG, 20 MG .....2	metronidazole (topical) GEL 0.75 % 42	mitoxantrone hcl 2 MG/ML .....25
methylphenidate hcl TABS 5 MG ...2	metronidazole (topical) GEL 1 % ..42	M-M-R II SOLR .....68
methylphenidate hcl TB24 18 MG, 27 MG .....2	metronidazole (topical) LOTN .....42	M-NATAL PLUS TABS .....57
methylphenidate hcl TB24 36 MG, 54 MG .....2	metronidazole TABS .....21	modafinil 100 MG .....2
methylphenidate hcl TBCR 10 MG, 20 MG .....2	metronidazole vaginal .....69	modafinil 200 MG .....2
methylphenidate hcl TBCR 18 MG, 27 MG .....2	mexiletine hcl .....8	MODERNA COVID-19 VACCINE SUSP .....68
methylphenidate hcl TBCR 36 MG, 54 MG .....2	micafungin sodium .....17	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP . 68
methylphenidate PTCH .....2	miconazole nitrate vaginal SUPP 200 MG .....69	MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY . 68
methylprednisolone acetate SUSP 36	midodrine hcl .....69	MODERNA COVID-19 VACCINE6MO-5Y SUSP .....68
methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG .....36	miglitol .....14	moexipril hcl .....19
methylprednisolone TABS .....36	miglustat .....49	mometasone furoate (nasal) SUSP 58
methylprednisolone TBPK .....36	minocycline hcl CAPS .....63	mometasone furoate CREA .....41
metoclopramide hcl SOLN IJ 5 MG/ML .....47	minocycline hcl TABS .....63	mometasone furoate OINT .....41
metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML .....47	minoxidil 2.5 MG, 10 MG .....21	mometasone furoate SOLN .....41
metoclopramide hcl TABS .....47	MIRCERA .....49	montelukast sodium CHEW .....9
metolazone .....44	MIRENA .....36	montelukast sodium PACK .....9
	mirtazapine TABS 15 MG .....13	montelukast sodium TABS .....9
		morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG,

100 MG .....	5	naftifine hcl CREA 2 % .....	38	NEONATAL COMPLETE TABS 120	
morphine sulfate SOLN IJ 0.5		NAGLAZYME .....	45	MG-10 MG-9.2 MG-1000 MCG-10	
MG/ML, 1 MG/ML .....	5	nalbuphine hcl .....	7	MCG-12 MCG-3 MG-5 MG-20 MG-	
morphine sulfate SOLN OR 10		naloxone hcl LIQD .....	17	27 MG-200 MG-1.84 MG-25 MG-2	
MG/5ML .....	5	naloxone hcl SOLN 0.4 MG/ML, 4		MG-1200 MCG-2 MG-0.2 MG .....	57
morphine sulfate SOLN OR 20		MG/10ML .....	17	NEONATAL PLUS TABS .....	57
MG/5ML .....	5	naltrexone hcl .....	17	NEONATAL PRENATAL VITAMIN	
morphine sulfate TABS .....	5	naproxen sodium TABS 550 MG ...	4	TABS .....	57
morphine sulfate TBCR .....	5	naproxen SUSP .....	4	NEONATAL VITAMIN TABS .....	57
MOTOFEN .....	16	naproxen TABS .....	4	neostigmine methylsulfate SOSY ..	23
MOVANTIK .....	47	naproxen TBEC 500 MG .....	4	NEO-SYNALAR .....	38
moxifloxacin hcl (ophth) SOLN OP	59	naratriptan hcl .....	54	NEUPRO .....	28
moxifloxacin hcl in sodium chloride		NATAACYN .....	59	NEVANAC .....	60
47		NATAZIA .....	35	nevirapine SUSP .....	30
moxifloxacin hcl TABS .....	47	nateglinide .....	16	nevirapine TABS .....	30
MOZOBIL (plerixafor) .....	50	NAYZILAM .....	11	nevirapine TB24 100 MG .....	30
MULPLETA .....	49	nebivolol hcl 2.5 MG, 5 MG, 10 MG		nevirapine TB24 400 MG .....	30
MULTI PRENATAL TABS .....	57	32		NEXIUM 24HR TBEC (esomeprazole	
mupirocin OINT .....	38	nebivolol hcl 20 MG .....	32	magnesium) .....	65
MVASI .....	24	NEBUSAL NEBU .....	37	NEXPLANON .....	35
MYALEPT .....	45	nefazodone hcl .....	14	NEXTSTELLIS .....	35
mycophenolate mofetil CAPS .....	56	nelarabine .....	24	niacin (antihyperlipidemic) TBCR ..	19
mycophenolate mofetil TABS .....	56	neomycin sulfate TABS .....	2	niacin CPCR 250 MG, 500 MG ....	69
mycophenolate sodium .....	56	neomycin-bacitracin zn-polymyxin	59	niacin TABS .....	69
MYLERAN TABS .....	23	neomycin-polymy-dexameth OINT	59	niacin TBCR .....	69
nabumetone .....	4	neomycin-polymy-dexameth SUSP	59	NIACIN TR TBCR .....	69
nadolol TABS 20 MG .....	32	59		niacinamide TABS 100 MG .....	69
nadolol TABS 40 MG .....	32	neomycin-polymyxin-hc (ophth) ...	59	niacinamide TABS 500 MG .....	69
nadolol TABS 80 MG .....	32	neomycin-polymyxin-hc (otic) SOLN .	60	nicardipine hcl CAPS .....	33
nafcillin sodium IV 10 GM .....	61	60		nicardipine hcl SOLN .....	33
naftifine hcl CREA 1 % .....	38	neomycin-polymyxin-hc (otic) SUSP .	60	nicotine MISC XX .....	63
		60		nicotine polacrilex GUM .....	63



nicotine polacrilex LOZG .....	63	NORDITROPIN FLEXPLO SOPN 30 MG/3ML .....	45	NORVIR PACK .....	30
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR .....	63	NORDITROPIN FLEXPLO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML .....	45	NORVIR SOLN .....	30
NICOTINE TRANSDERMAL SYSTEM KIT .....	63	norelgestromin-ethinyl estradiol ...	35	NOVA MAX PLUS KETONE TESTSTRIPS .....	43
NICOTROL INHALER INHA .....	63	norethin acet & estrad-fe CAPS ...	35	NOVAVAX COVID-19 VACCINE/2024-25 SUSY .....	68
NICOTROL NS SOLN .....	63	norethin acet & estrad-fe CHEW ...	35	NOVOEIGHT .....	48
nifedipine CAPS 10 MG .....	33	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG .....	35	NOVOLIN 70/30 FLEXPEN SUPN	16
nifedipine CAPS 20 MG .....	33	norethindrone & eth estradiol .....	35	NOVOLIN 70/30 SUSP .....	16
nifedipine TB24 60 MG .....	33	norethindrone & ethinyl estradiol-fe 35		NOVOLIN N FLEXPEN SUPN .....	16
nifedipine TB24 90 MG .....	33	norethindrone (contraceptive) .....	36	NOVOLIN N SUSP .....	16
nifedipine TB24 .....	33	norethindrone acet & eth estra TABS 35		NOVOLIN R FLEXPEN SOPN IJ ..	16
nilutamide .....	25	norethindrone acetate TABS .....	61	NOVOLIN R SOLN IJ .....	16
nimodipine CAPS .....	33	norethindrone acetate-ethinyl estradiol .....	46	NOXAFIL SUSP (posaconazole) ..	18
NINLARO .....	26	norethindrone acetate-ethinyl estradiol-fe .....	35	NP THYROID 120 TABS .....	64
NIPENT .....	27	norethindrone-eth estradiol (triphasic) .....	35	NP THYROID 15 TABS .....	64
nisoldipine .....	33	norgestimate-ethinyl estradiol (triphasic) .....	35	NP THYROID 30 TABS .....	64
nitazoxanide TABS .....	21	norgestimate-ethinyl estradiol .....	35	NP THYROID 60 TABS .....	64
nitisinone CAPS .....	45	norgestrel & ethinyl estradiol 30 MCG-0.3 MG .....	35	NP THYROID 90 TABS .....	64
NITRO-BID OINT .....	8	NORMOSOL-M/D5W .....	54	NUBEQA .....	25
nitrofurantoin .....	22	NORMOSOL-R .....	54	NUCALA SOAJ .....	9
nitrofurantoin macrocrystal 50 MG, 100 MG .....	22	nortriptyline hcl CAPS .....	14	NUCALA SOLR .....	9
nitrofurantoin monohyd macro .....	22	nortriptyline hcl SOLN .....	14	NUCALA SOSY 100 MG/ML .....	9
nitroglycerin (intra-anal) .....	7	NORVIR CAPS .....	30	NUCALA SOSY 40 MG/0.4ML .....	9
nitroglycerin CPCR .....	8			NUCYNTA ER TB12 .....	5
nitroglycerin PT24 .....	8			NUCYNTA TABS .....	6
NITROGLYCERIN SOLN IV .....	8			NUEDEXTA .....	62
nitroglycerin SUBL .....	8			NULOJIX .....	56
NIVA-PLUS TABS .....	57			nystatin (mouth-throat) .....	56
nizatidine CAPS .....	64			nystatin (topical) CREA .....	38
				nystatin (topical) OINT .....	38

nystatin (topical) POWD EX	38	omeprazole TBEC	65	oseltamivir phosphate SUSR	32
nystatin TABS	18	omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG	65	OSMOPREP	51
nystatin-triamcinolone CREA	38	OMNIFLEX DIAPHRAGM	52	OSPHENA	45
nystatin-triamcinolone OINT	38	ONCASPAR	27	OTEZLA TABS	4
NYVEPRIA	49	ondansetron hcl SOLN IJ 4 MG/2ML 17		OTEZLA TBPK	4
octreotide acetate SOLN	46	ondansetron hcl SOLN OR 4 MG/5ML	17	oxacillin sodium IV 10 GM	61
ODEFSEY	31	ondansetron hcl SOSY	17	oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML	23
ODOMZO	24	ondansetron hcl TABS 24 MG	17	oxandrolone	7
OFEV	63	ondansetron hcl TABS 4 MG	17	oxaprozin TABS	4
ofloxacin (ophth)	59	ondansetron hcl TABS 8 MG	17	oxazepam CAPS	8
ofloxacin (otic)	60	ondansetron TBDP 4 MG	17	OXBRYTA TABS 500 MG	49
ofloxacin 300 MG, 400 MG	47	ondansetron TBDP 8 MG	17	oxcarbazepine SUSP	12
OGIVRI	24	ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	57	oxcarbazepine TABS 150 MG, 300 MG	12
olanzapine SOLR	29	ONE VITE WOMENS PRENATALVITAMIN TABS	57	oxcarbazepine TABS 600 MG	12
olanzapine TABS 2.5 MG, 5 MG	29	ONETOUCH DELICA SAFETY LANCING DEVICE	53	oxiconazole nitrate CREA	39
olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG	29	ONETOUCH DELICA SAFETY LANCING DEVICE 30G	53	OXISTAT LOTN	39
olanzapine TBDP 20 MG	29	OPILL	36	oxybutynin chloride SOLN	65
olanzapine TBDP 5 MG, 10 MG, 15 MG	29	OPSUMIT	33	oxybutynin chloride TABS 5 MG	65
olmesartan medoxomil	20	ORENITRAM TBCR	33	oxybutynin chloride TB24	65
olmesartan medoxomil-amlodipine- hydrochlorothiazide	20	ORLISSA	45	oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	6
olmesartan medoxomil- hydrochlorothiazide	20	ORKAMBI PACK	63	oxycodone hcl TABS	6
olopatadine hcl (nasal)	58	ORKAMBI TABS	63	oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	6
olopatadine hcl 0.1 %	60	ORLADEYO	49	oxycodone w/ acetaminophen TABS 325 MG-2.5 MG	7
olopatadine hcl 0.2 %	60	orphenadrine citrate TB12	58	oxymorphone hcl TABS	6
omega-3-acid ethyl esters	19	oseltamivir phosphate CAPS	32	oxymorphone hcl TB12 40 MG	6
omeprazole CPDR	65			oxymorphone hcl TB12 5 MG, 7.5	

MG, 10 MG, 15 MG, 20 MG, 30 MG 6	paroxetine hcl TABS 40 MG ..... 14	penicillin v potassium TABS ..... 61
OZEMPIC SOPN 2 MG/1.5ML .....15	paroxetine hcl TB24 12.5 MG .....14	PENTACEL .....64
OZEMPIC SOPN .....15	paroxetine hcl TB24 25 MG, 37.5 MG .....14	pentazocine w/ naloxone hcl ..... 7
paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML .....28	PASER PACK .....23	pentoxifylline ..... 49
paclitaxel protein-bound particles .28	pazopanib hcl .....26	perindopril erbumine 2 MG, 8 MG . 19
paliperidone 1.5 MG, 3 MG, 9 MG .29	PEDIARIX SUSY .....64	perindopril erbumine 4 MG ..... 19
paliperidone 6 MG ..... 29	pediatric multivitamins w/fl CHEW .56	PERJETA .....24
palonosetron hcl SOLN ..... 17	PEDVAX HIB SUSP ..... 65	permethrin CREA ..... 42
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML .....44	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid .....50	permethrin LIQD EX ..... 42
PAMIDRONATE DISODIUM SOLN 44	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM- 2.97 GM-5.86 GM-22.74 GM-236 GM .....50	perphenazine TABS ..... 29
PANCREAZE CPEP 149900 UNIT- 97300 UNIT-37000 UNIT, 15200 UNIT-8800 UNIT-2600 UNIT, 24600 UNIT-14200 UNIT-4200 UNIT, 61500 UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000 UNIT, 98400 UNIT-56800 UNIT- 16800 UNIT .....43	peg 3350-potassium chloride-sod bicarbonate-sod chloride .....50	perphenazine-amitriptyline .....62
PANRETIN ..... 39	PEGASYS SOLN ..... 31	PERSERIS PRSY .....29
pantoprazole sodium TBEC 20 MG 65	PEGASYS SOSY ..... 31	PFIZER-BIONTECH COVID- 19VACCINE SUSP ..... 68
pantoprazole sodium TBEC 40 MG 65	PEMAZYRE .....26	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y SUSP ..... 68
PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A .....35	pemetrexed disodium SOLR 500 MG 24	PFIZER-BIONTECH COVID- 19VACCINE/5-11Y/2023-24 SUSP 68
paricalcitol CAPS .....45	penciclovir .....40	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y SUSP .....68
paricalcitol SOLN .....45	penicillamine CAPS .....55	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2023-24 SUSP .....68
paroxetine hcl SUSP .....13	penicillamine TABS ..... 55	PFIZER-BIONTECH COVID- 19VACCINE/6MO-4Y/2024-25 SUSP .....68
paroxetine hcl TABS 10 MG ..... 13	penicillin g potassium 5000000 UNIT 61	PFIZER-BIONTECH COVID- 19VACCINE/ADULT RTU SUSP ..68
paroxetine hcl TABS 20 MG ..... 14	PENICILLIN G POTASSIUM IN ISO- OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML .....61	PHEBURANE PLLT ..... 45
paroxetine hcl TABS 30 MG ..... 14	PENICILLIN G PROCAINE ..... 61	phenazopyridine hcl TABS 100 MG,
	penicillin g sodium .....61	
	penicillin v potassium SOLR .....61	

100 MG, 200 MG	48	pirfenidone CAPS	63	potassium chloride in dextrose 5 %-20 MEQ/L	55
phendimetrazine tartrate TABS	1	pirfenidone TABS 267 MG, 801 MG	63	potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %	55
phenelzine sulfate	13	pirfenidone TABS 534 MG	63	potassium chloride microencapsulated crystals er	55
phenobarbital ELIX	50	piroxicam CAPS	4	potassium chloride PACK OR 20 MEQ	55
phenobarbital TABS	50	PLASMA-LYTE A (electrolyte-a)	54	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride)	55
phenoxybenzamine hcl	20	PLASMA-LYTE-148 (electrolyte-148)	54	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	55
phentermine hcl CAPS	1	PLEGRIDY SOPN	62	potassium chloride TBCR	55
phenytoin CHEW	12	PLEGRIDY SOSY SC	62	POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	55
phenytoin sodium extended 100 MG, 200 MG, 300 MG	12	PLEGRIDY STARTER PACK SOPN	62	POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl)	55
phenytoin sodium SOLN	12	PLEGRIDY STARTER PACK SOSY SC	62	potassium citrate (alkalinizer) TBCR	48
phenytoin SUSP	12	plerixafor	50	potassium phosphates 236 MG/ML-224 MG/ML	55
PHEXXI	69	PNEUMOVAX 23	65	PR BENZOYL PEROXIDE WASH LIQD	37
PHOSLYRA SOLN	47	PNEUMOVAX 23/1 DOSE	65	pralatrexate 20 MG/ML	24
PHOTOFRIN	27	podofilox SOLN	42	pramipexole dihydrochloride TABS 0.125 MG	28
PIFELTRO	31	polymyxin b sulfate SOLR	22	pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	28
pilocarpine hcl (oral)	56	polymyxin b-trimethoprim	59	prasugrel hcl	49
pilocarpine hcl SOLN 1 %, 2 %, 4 %	58	POMALYST	25	pravastatin sodium	19
pimecrolimus	42	posaconazole SUSP	18	praziquantel	8
pimozide	62	potassium acetate SOLN 2 MEQ/ML	55		
pindolol TABS	32	potassium bicarbonate TBEF	55		
pioglitazone hcl	16	potassium chloride CPCR	55		
pioglitazone hcl-glimepiride	15	potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %	55		
pioglitazone hcl-metformin hcl TABS	15				
piperacillin sodium-tazobactam sodium	61				
PIQRAY 200MG DAILY DOSE	26				
PIQRAY 250MG DAILY DOSE	26				
PIQRAY 300MG DAILY DOSE	26				

prazosin hcl CAPS .....	20	PREMARIN TABS .....	46	primidone 50 MG, 250 MG .....	12
PRECISION XTRA .....	43	PREMPHASE .....	46	PRIORIX SUSR .....	68
PRED MILD .....	59	PREMPRO .....	46	PROAIR DIGIHALER .....	10
PRED-G SUSP .....	59	PRENATAL MULTIVITAMIN TABS		PROAIR RESPICLICK AEPB .....	10
prednicarbate OINT .....	41	57		probenecid .....	48
prednisolone acetate (ophth) .....	59	PRENATAL ONE DAILY TABS ...	57	procainamide hcl SOLN 500 MG/ML .	8
PREDNISOLONE SODIUM		PRENATAL PLUS TABS .....	57	prochlorperazine .....	29
PHOSPHATE .....	59	PRENATAL PLUS VITAMIN		prochlorperazine maleate TABS ...	29
prednisolone sodium phosphate		ANDMINERAL TABS .....	57	PROCRIT 2000 UNIT/ML, 3000	
SOLN 5 MG/5ML, 6.7 MG/5ML, 10		PRENATAL TABS .....	57	UNIT/ML, 4000 UNIT/ML, 10000	
MG/5ML, 15 MG/5ML, 25 MG/5ML		PRENATAL VITAMIN & MINERAL		UNIT/ML, 20000 UNIT/ML .....	49
36		TABS .....	57	PROCRIT 40000 UNIT/ML .....	49
prednisolone sodium phosphate		PRENATAL VITAMIN TABS .....	57	progesterone CAPS .....	61
TBDP .....	36	PRENATAL VITAMIN/IRON TABS	57	PROGRAF PACK .....	56
prednisolone SOLN .....	36	PRENATAL VITAMINS PLUS LOW		PROGRAF SOLN .....	56
prednisolone TABS .....	36	IRON TABS .....	57	PROLASTIN-C SOLN .....	63
prednisone SOLN .....	36	PRENATAL VITAMINS TABS 100		PROLEUKIN .....	27
prednisone TABS 1 MG, 5 MG ....	36	MG-800 MCG-1.84 MG-18 MG-2.6		PROLIA SOSY .....	44
prednisone TABS 2.5 MG, 10 MG, 20		MG-1.7 MG-27 MG-10 MCG-4.95		PROMACTA PACK .....	49
MG, 50 MG .....	36	MG-25 MG-200 MG-160 MG-1200		PROMACTA TABS .....	49
prednisone TBPK .....	36	MCG-4 MCG, 120 MG-2.6 MG-800		promethazine hcl SOLN OR 6.25	
PREFEST .....	46	MCG-400 UNIT-8 MCG-1.7 MG-20		MG/5ML .....	18
pregabalin (once-daily) 330 MG ...	62	MG-28 MG-200 MG-1.8 MG-25 MG-		promethazine hcl SUPP 12.5 MG, 25	
pregabalin (once-daily) 82.5 MG, 165		4000 UNIT-30 UNIT .....	57	MG .....	18
MG .....	62	PRENATRIX TABS .....	57	promethazine hcl SUPP 50 MG ...	18
pregabalin CAPS 225 MG, 300 MG		PRENATRYL TABS .....	57	promethazine hcl TABS .....	18
12		PREVNAR 13 .....	65	propafenone hcl CP12 .....	8
pregabalin CAPS 25 MG, 50 MG, 75		PREVNAR 20 .....	65	propafenone hcl TABS .....	8
MG, 100 MG, 150 MG, 200 MG ...	12	PREZCOBIX .....	31	proparacaine hcl .....	59
pregabalin SOLN .....	12	PREZISTA SUSP .....	31	propranolol hcl CP24 .....	32
PREHEVBRIO .....	68	PREZISTA TABS (darunavir) .....	31	propranolol hcl SOLN OR 20	
PREMARIN .....	69	PREZISTA TABS 75 MG, 150 MG	31		
PREMARIN SOLR .....	46	PRIFTIN .....	23		
		primaquine phosphate TABS .....	23		

MG/5ML, 40 MG/5ML .....	32	quinapril-hydrochlorothiazide 25 MG- 20 MG .....	21	RELENZA DISKHALER .....	32
propranolol hcl TABS .....	32	quinidine sulfate TABS .....	8	RELION 2-IN-1 LANCET DEVICES 30G .....	53
propylthiouracil .....	64	quinine sulfate CAPS 324 MG .....	23	RELION 2-IN-1 LANCING DEVICE 25G .....	53
protriptyline hcl .....	14	QUZYTIR SOLN IV .....	18	RELION 2-IN-1 LANCING DEVICE 30G .....	53
PROVISC SOSY .....	59	QVAR REDIHALER .....	9	RELION KETONE TEST STRIPS STRP .....	43
PULMICORT FLEXHALER AEPB ..	9	RA PRENATAL FORMULA/FOLICACID TABS .....	57	RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP .....	43
PULMOZYME .....	63	RA PRENATAL TABS .....	57	RENFLXIS .....	47
PX PRENATAL MULTIVITAMINS TABS .....	57	rabeprazole sodium TBEC .....	65	repaglinide 0.5 MG, 1 MG .....	16
pyrazinamide .....	23	raloxifene hcl .....	45	repaglinide 2 MG .....	16
pyridostigmine bromide SOLN OR	23	ramelteon .....	50	REPATHA PUSHTRONEX SYSTEM SOCT .....	19
pyridostigmine bromide TABS 60 MG .....	23	ramipril CAPS .....	20	REPATHA SOSY .....	19
pyridostigmine bromide TBCR .....	23	ranitidine hcl TABS 150 MG .....	64	REPATHA SURECLICK SOAJ .....	19
pyrimethamine .....	23	ranolazine TB12 1000 MG .....	8	RETACRIT .....	49
QC PRENATAL TABS .....	57	ranolazine TB12 500 MG .....	8	RETEVMO CAPS .....	26
QINLOCK .....	26	rasagiline mesylate .....	28	RETROVIR IV INFUSION SOLN ..	31
QUADRACEL SUSP .....	64	REALITY LATEX CONDOMS/LUBRICATED MISC ..	52	REXULTI .....	30
QUADRACEL SUSY .....	64	REALITY LATEX/ULTRA TEXTURED DEVI .....	52	ribavirin (hepatitis c) CAPS .....	31
quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG .....	29	REALITY LATEX/ULTRA THIN DEVI 52		ribavirin (hepatitis c) TABS 200 MG 31	
quetiapine fumarate TABS 300 MG, 400 MG .....	29	REBIF REBIDOSE SOAJ .....	62	RIDAURA .....	3
quetiapine fumarate TB24 300 MG, 400 MG .....	29	REBIF REBIDOSE TITRATIONPACK SOAJ .....	62	rifabutin .....	23
quetiapine fumarate TB24 50 MG, 150 MG, 200 MG .....	29	REBIF SOSY .....	62	rifampin CAPS .....	23
quinapril hcl 20 MG, 40 MG .....	20	REBIF TITRATION PACK SOSY ..	62	rifampin SOLR .....	23
quinapril hcl 5 MG, 10 MG .....	20	RECOMBIVAX HB SUSP .....	68	riluzole TABS .....	58
quinapril-hydrochlorothiazide 12.5 MG-10 MG .....	21	RECOMBIVAX HB SUSY .....	68	rimantadine hydrochloride TABS ..	32
quinapril-hydrochlorothiazide 12.5 MG-20 MG .....	21	RECTIV (nitroglycerin (intra-anal))	7	ringer's .....	55
		REGRANEX .....	42		

ringer's irrigation .....	56	RUBRACA .....	27	31	
RINVOQ TB24 .....	2	rufinamide SUSP .....	12	SEREVENT DISKUS .....	10
risedronate sodium TABS 150 MG	44	rufinamide TABS 200 MG .....	12	sertraline hcl CONC .....	14
risedronate sodium TABS 35 MG	.44	rufinamide TABS 400 MG .....	12	sertraline hcl TABS 100 MG .....	14
risedronate sodium TABS 5 MG, 30	MG	RUKOBIA .....	31	sertraline hcl TABS 25 MG, 50 MG	14
.....	44	RUXIENCE .....	24	sevelamer carbonate PACK .....	47
risedronate sodium TBEC .....	44	RYBELSUS TABS .....	15	sevelamer carbonate TABS .....	47
RISPERDAL CONSTA (risperidone	microspheres) .....	salsalate .....	5	SHINGRIX .....	68
.....	29	SANDOSTATIN LAR DEPOT KIT	.46	SIGNIFOR .....	46
risperidone microspheres .....	29	SANTYL OINT .....	42	sildenafil citrate (pulmonary	hypertension) SOLN .....
risperidone SOLN .....	29	sapropterin dihydrochloride	PACK	.....	33
risperidone TABS .....	29	sapropterin dihydrochloride	TABS	.....	45
risperidone TBDP .....	29	SAVELLA TABS .....	62	sildenafil citrate (pulmonary	hypertension) SUSR .....
ritonavir TABS .....	31	SAVELLA TITRATION PACK MISC	62	.....	33
rivastigmine tartrate CAPS .....	62	saxagliptin hcl .....	15	sildenafil citrate (pulmonary	hypertension) TABS .....
rizatriptan benzoate TABS 10 MG	.54	saxagliptin-metformin hcl 1000	MG-	.....	34
rizatriptan benzoate TABS 5 MG	..54	2.5 MG .....	15	sildenafil citrate .....	33
rizatriptan benzoate TBDP 10 MG	.54	saxagliptin-metformin hcl 1000	MG-5	silodosin .....	48
rizatriptan benzoate TBDP 5 MG	..54	MG, 500 MG-5 MG .....	15	silver sulfadiazine .....	40
roflumilast .....	9	SCEMBLIX 100 MG .....	27	SIMPONI ARIA SOLN .....	3
romidepsin SOLR .....	27	SCEMBLIX 20 MG .....	27	SIMULECT .....	56
ropinirole hydrochloride TABS	.....28	SCEMBLIX 40 MG .....	27	simvastatin TABS .....	19
ropinirole hydrochloride TB24 2 MG,	4 MG, 6 MG .....	scopolamine .....	17	sirolimus TABS .....	56
.....	28	SELECT INSULIN SYRINGES	...53	SIRTURO .....	23
ropinirole hydrochloride TB24 8 MG,	12 MG .....	SELECT LANCETS .....	53	SIVEXTRO TABS .....	22
.....	28	selegiline hcl CAPS .....	28	SKYLA .....	36
rosuvastatin calcium TABS .....	19	selegiline hcl TABS .....	28	SKYRIZI PEN SOAJ .....	39
ROTARIX SUSP .....	68	selenium sulfide LOTN 2.5 %	.....40	SKYRIZI PSKT .....	39
ROTARIX SUSR .....	68	SELZENTRY SOLN .....	31	SKYRIZI SOCT .....	47
ROTATEQ SOLN .....	68	SELZENTRY TABS 25 MG, 75 MG		SKYRIZI SOLN .....	47
ROZLYTREK CAPS .....	27			SKYRIZI SOSY .....	39

SLYND .....	36	SORBITOL 3 % .....	48	STENDRA .....	33
SM PRENATAL VITAMINS TABS .	57	SORBITOL/MANNITOL IRRIGATION .....	48	STIMATE SOLN NA .....	46
SODIUM ACETATE SOLN (sodium acetate) .....	54	sotalol hcl (afib/afi) .....	32	STIOLTO RESPIMAT .....	10
sodium acetate SOLN .....	54	sotalol hcl TABS 240 MG .....	32	STIVARGA .....	27
sodium chloride (gu irrigant) 0.9 %	48	sotalol hcl TABS 80 MG, 120 MG, 160 MG .....	32	STRENSIQ .....	45
sodium chloride (inhalant) NEBU 7 % .....	37	SOVALDI TABS 200 MG .....	31	streptomycin sulfate SOLR .....	2
sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 % .....	55	SOVALDI TABS 400 MG .....	31	STRIBILD .....	31
sodium citrate & citric acid .....	48	SPIKEVAX COVID-19 VACCINE SUSP .....	68	STRIVERDI RESPIMAT .....	10
sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG .....	55	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP .....	68	SUBSYS LIQD 100 MCG .....	6
sodium phenylbutyrate POWD ....	45	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY .....	68	SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG .....	6
sodium phenylbutyrate TABS .....	45	SPIKEVAX COVID-19 VACCINE/2024-25 SUSY .....	68	SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG .....	6
sodium polystyrene sulfonate POWD 56		spinosad .....	42	sucralfate SUSP .....	64
sodium polystyrene sulfonate SUSP OR 15 GM/60ML .....	56	SPIRIVA HANDIHALER CAPS (tiotropium bromide monohydrate) ..	9	sucralfate TABS .....	64
sodium sulfate-potassium sulfate-magnesium sulfate .....	50	SPIRIVA RESPIMAT AERS .....	9	sulconazole nitrate CREA .....	39
SOFOSBUVIR/VELPATASVIR TABS .....	31	spironolactone & hydrochlorothiazide .....	44	sulconazole nitrate SOLN .....	39
solifenacin succinate TABS .....	65	spironolactone TABS .....	44	sulfacetamide sodium (acne) .....	37
SOLQUA 100/33 .....	15	SPRAVATO 56MG DOSE .....	13	sulfacetamide sodium (ophth) SOLN .	59
SOLOSEC .....	2	SPRAVATO 84MG DOSE .....	13	sulfacetamide sodium w/ sulfur CREA 10 %-5 % .....	37
SOLU-CORTEF 100 MG, 500 MG, 1000 MG .....	36	SPRYCEL (dasatinib) .....	27	sulfacetamide sodium w/ sulfur LIQD 10 %-5 % .....	38
SOLU-CORTEF 250 MG .....	36	stannous fluoride CONC .....	56	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 % .....	38
SOLU-MEDROL 2 GM .....	36	stavudine CAPS .....	31	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 % .....	38
SOMAVERT 10 MG, 15 MG, 20 MG .	45	STELARA 130 MG/26ML .....	47	sulfacetamide sod-prednisolone SOLN .....	59
sorafenib tosylate .....	27	STELARA SOLN 45 MG/0.5ML ...	39	sulfadiazine TABS .....	63
		STELARA SOSY 45 MG/0.5ML ...	39	sulfamethoxazole-trimethoprim SOLN .....	21
		STELARA SOSY 90 MG/ML .....	39		



sulfamethoxazole-trimethoprim SUSP .....21	tacrolimus (topical) OINT ..... 42	temazepam 15 MG, 30 MG .....50
sulfamethoxazole-trimethoprim TABS .....21	tacrolimus CAPS ..... 56	temazepam 7.5 MG, 22.5 MG ..... 50
SULFAMYLON CREA ..... 40	tadalafil (pulmonary hypertension) TABS ..... 34	TEMODAR SOLR ..... 23
sulfasalazine TABS ..... 47	tadalafil 5 MG ..... 33	temozolomide CAPS ..... 23
sulfasalazine TBEC ..... 47	TAFINLAR CAPS ..... 27	temsirolimus ..... 27
sulindac TABS ..... 4	TAFINLAR TBSO ..... 27	TENIVAC INJ ..... 64
sumatriptan ..... 54	tafluprost ..... 60	tenofovir disoproxil fumarate TABS 31
sumatriptan succinate SOAJ ..... 54	TAGRISSO 40 MG ..... 24	terazosin hcl ..... 20
sumatriptan succinate SOCT ..... 54	TAGRISSO 80 MG ..... 24	terbinafine hcl TABS ..... 18
sumatriptan succinate SOLN 6 MG/0.5ML ..... 54	TAKHZYRO SOLN ..... 49	terbutaline sulfate SOLN ..... 10
sumatriptan succinate TABS ..... 54	TAKHZYRO SOSY ..... 49	terbutaline sulfate TABS ..... 10
sumatriptan-naproxen sodium .... 53	TALZENNA ..... 27	terconazole vaginal CREA ..... 69
sunitinib malate 12.5 MG, 25 MG, 50 MG ..... 27	tamoxifen citrate TABS ..... 25	terconazole vaginal SUPP ..... 69
sunitinib malate 37.5 MG ..... 27	tamsulosin hcl ..... 48	teriflunomide ..... 62
SUNOSI 150 MG ..... 1	TASIGNA 150 MG, 200 MG ..... 27	teriparatide (recombinant) SOPN .. 44
SUNOSI 75 MG ..... 1	TASIGNA 50 MG ..... 27	TERIPARATIDE SOPN ..... 44
SYNAREL ..... 45	tavaborole ..... 39	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML ..... 7
SYNERA PTCH ..... 42	TAVALISSE ..... 49	testosterone cypionate SOLN IM ... 7
SYNJARDY TABS ..... 15	tazarotene CREA 0.1 % ..... 40	testosterone enanthate SOLN IM ... 7
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG ..... 15	TAZVERIK ..... 27	TETANUS/DIPHTHERIA TOXOIDS- ADSORBED ADULT SUSP ..... 64
SYNJARDY XR TB24 1000 MG-25 MG ..... 15	TDVAX SUSP ..... 64	tetrabenazine ..... 62
SYNRIBO ..... 27	TEFLARO ..... 34	tetracycline hcl CAPS ..... 63
SYNTHROID TABS (levothyroxine sodium) ..... 64	TEGRETOL SUSP (carbamazepine) . 12	THALOMID ..... 55
TABLOID ..... 24	TEGRETOL TABS (carbamazepine) . 12	theophylline ELIX ..... 10
TABRECTA ..... 27	TEGSEDI ..... 63	theophylline SOLN ..... 10
	telmisartan ..... 20	theophylline TB12 ..... 10
	telmisartan-amlodipine ..... 21	theophylline TB24 ..... 10
	telmisartan-hydrochlorothiazide .. 21	THERANATAL CORE NUTRITION

TABS .....	57	tolmetin sodium TABS 600 MG .....	4	trazodone hcl TABS .....	14
THIOLA EC TBEC 100 MG (tiopronin) .....	48	TOLSURA CAPS .....	18	TRECTOR .....	23
THIOLA EC TBEC 300 MG (tiopronin) .....	48	tolterodine tartrate CP24 .....	65	TRELEGY ELLIPTA .....	10
thioridazine hcl .....	30	tolterodine tartrate TABS .....	65	TRELSTAR MIXJECT .....	25
thiotepa 15 MG .....	23	tolvaptan TABS .....	46	TREMFYA SOPN .....	40
thiothixene .....	30	topiramate CPSP 15 MG .....	12	TREMFYA SOSY 100 MG/ML .....	40
THYMOGLOBULIN .....	56	topiramate CPSP 25 MG .....	12	treprostinil SOLN IJ .....	33
THYROGEN 0.9 MG .....	43	topiramate CS24 .....	12	tretinoin (chemotherapy) .....	27
tiagabine hcl .....	12	topiramate TABS 200 MG .....	12	tretinoin CREA 0.025 %, 0.05 %, 0.1 % .....	38
TIBSOVO .....	27	topiramate TABS 25 MG, 100 MG .....	12	tretinoin GEL 0.01 %, 0.025 % .....	38
tigecycline .....	63	topiramate TABS 50 MG .....	12	tretinoin microsphere 0.1 % .....	38
timolol maleate (ophth) SOLG .....	58	topotecan hcl SOLN .....	28	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG .....	24
timolol maleate (ophth) SOLN .....	58	topotecan hcl SOLR .....	28	triamcinolone acetonide (mouth) .....	56
timolol maleate TABS .....	32	toremifene citrate .....	25	triamcinolone acetonide (nasal) AERO .....	58
tiopronin TBEC 100 MG .....	48	torsemide TABS .....	44	triamcinolone acetonide (topical) CREA 0.025 % .....	41
tiopronin TBEC 300 MG .....	48	TRACLEER TBSO .....	33	triamcinolone acetonide (topical) CREA 0.1 % .....	41
tiotropium bromide monohydrate CAPS .....	9	tramadol hcl TABS 50 MG .....	6	triamcinolone acetonide (topical) CREA 0.5 % .....	41
TIVICAY TABS .....	31	tramadol hcl TB24 .....	6	triamcinolone acetonide (topical) CREA 0.025 % .....	41
tizanidine hcl CAPS .....	58	tramadol-acetaminophen .....	7	triamcinolone acetonide (topical) LOTN 0.1 % .....	41
tizanidine hcl TABS .....	58	trandolapril 1 MG, 2 MG .....	20	triamcinolone acetonide (topical) LOTN 0.025 % .....	41
tobramycin (ophth) SOLN .....	59	trandolapril 4 MG .....	20	triamcinolone acetonide (topical) LOTN 0.1 % .....	41
tobramycin NEBU .....	2	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG .....	21	triamcinolone acetonide (topical) LOTN 0.1 % .....	41
tobramycin sulfate SOLN IJ 10 MG/ML, 40 MG/ML, 80 MG/2ML .....	2	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG .....	21	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 % .....	42
tobramycin-dexamethasone SUSP 59		tranexamic acid SOLN 1000 MG/10ML .....	50	triamcinolone acetonide (topical) OINT 0.5 % .....	42
TODAY SPONGE MISC .....	68	tranexamic acid TABS .....	50	triamcinolone acetonide (topical) OINT 0.5 % .....	42
tolcapone .....	28	tranylcypromine sulfate .....	13	triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML .....	36
tolmetin sodium CAPS .....	4	travoprost SOLN .....	60		
		TRAZIMERA .....	24		

triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG .....	44	TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP 43	TUKYSA .....	24
triamterene & hydrochlorothiazide TABS .....	44	TRUETRACK TEST STRP .....	TURALIO .....	27
triamterene CAPS .....	44	TRULICITY .....	TUZISTRA XR .....	37
triazolam .....	50	TRUMENBA .....	TWINRIX SUSY .....	68
TRICARE TABS .....	57	TRUSTEX COLOR CONDOMS + LUBE MISC .....	TWIRLA .....	35
trientine hcl 250 MG .....	55	TRUSTEX LUBRICATED EXTRALARGE MISC .....	TYBLUME CHEW .....	35
trifluoperazine hcl TABS .....	30	TRUSTEX LUBRICATED EXTRASTRENGTH MISC .....	TYBOST .....	31
trifluridine .....	59	TRUSTEX LUBRICATED MISC ..	TYMLOS .....	44
trihexyphenidyl hcl SOLN .....	28	TRUSTEX LUBRICATED/RIBBED/STUDDED MISC .....	TYVASO REFILL KIT SOLN IN ...	33
trihexyphenidyl hcl TABS .....	28	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC .....	TYVASO SOLN IN .....	33
TRIJARDY XR 1000 MG-2.5 MG- 12.5 MG, 1000 MG-2.5 MG-5 MG .	15	TRUSTEX LUBRICATED/SPERMICIDE MISC	TYVASO STARTER KIT SOLN IN	33
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG .....	15	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC .....	UBRELVY .....	53
TRIKAFTA TBPK .....	63	TRUSTEX LUBRICATED/SPERMICIDE MISC	UCERIS (budesonide (intrarectal))	.7
trimethobenzamide hcl CAPS .....	17	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC .....	UDENYCA ONBODY SOSY .....	49
trimethoprim TABS .....	21	TRUSTEX LUBRICATED/SPERMICIDE MISC	UDENYCA SOAJ .....	49
trimipramine maleate CAPS .....	14	TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC .....	UDENYCA SOSY .....	49
TRINTELLIX .....	14	TRUSTEX WITH NONOXYNOL- 9/RIBBED/STUDDED MISC .....	UPTRAVI TABS 200 MCG .....	34
TRIUMEQ TABS .....	31	TRUSTEX/RIA LUBRICATED MISC .	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG .....	34
TRIZIVIR .....	31	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC .....	UPTRAVI TITRATION PACK TBPK 34	
tropicamide SOLN 0.5 % .....	58	TRUSTEX/RIA LUBRICATED LUBRICATED/SPERMICIDE MISC	ursodiol CAPS .....	47
tropicamide SOLN 1 % .....	58	TRUXIMA .....	ursodiol TABS .....	47
tropium chloride CP24 .....	65		UVADEX .....	27
tropium chloride TABS .....	65		valacyclovir hcl 1 GM, 1000 MG ...	31
TRUE COVER DEVI .....	52		valacyclovir hcl 500 MG .....	31
TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP ...	43		valganciclovir hcl TABS .....	31
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN .....	53		valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML .....	13
			valproic acid CAPS .....	13

valrubicin .....	25	verapamil hcl SOLN 2.5 MG/ML ...	33	warfarin sodium TABS .....	10
valsartan TABS .....	20	verapamil hcl TABS .....	33	water for irrigation, sterile .....	56
valsartan-hydrochlorothiazide .....	21	verapamil hcl TBCR .....	33	WESTAB PLUS TABS .....	57
VALTOCO 10 MG DOSE LIQD ...	11	VEREGEN .....	38	WIDE-SEAL SILICONE DIAPHRAGM KIT 60 .....	52
VALTOCO 15 MG DOSE LQPK ...	11	VERZENIO .....	27	WIDE-SEAL SILICONE DIAPHRAGM KIT 65 .....	52
VALTOCO 20 MG DOSE LQPK ...	11	VICTOZA (liraglutide) .....	16	WIDE-SEAL SILICONE DIAPHRAGM KIT 70 .....	52
VALTOCO 5 MG DOSE LIQD .....	11	vigabatrin PACK .....	12	WIDE-SEAL SILICONE DIAPHRAGM KIT 75 .....	52
vancomycin hcl CAPS .....	21	vigabatrin TABS .....	12	WIDE-SEAL SILICONE DIAPHRAGM KIT 80 .....	52
vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG .....	21	VIIBRYD STARTER PACK KIT ...	14	WIDE-SEAL SILICONE DIAPHRAGM KIT 85 .....	52
vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML ..	22	vilazodone hcl TABS .....	14	WIDE-SEAL SILICONE DIAPHRAGM KIT 90 .....	52
VAQTA .....	68	vincristine sulfate .....	28	WIDE-SEAL SILICONE DIAPHRAGM KIT 95 .....	52
varenicline tartrate TABS .....	63	vinorelbine tartrate 10 MG/ML .....	28	XALKORI CAPS .....	27
varenicline tartrate TBPK .....	63	VIRACEPT TABS 250 MG .....	31	XARELTO STARTER PACK TBPK 10	
VARIVAX INJ .....	68	VIRACEPT TABS 625 MG .....	31	XARELTO SUSR .....	10
VARUBI TBPK .....	17	VIREAD POWD .....	31	XARELTO TABS 10 MG, 20 MG ..	10
VAXNEUVANCE .....	66	VIREAD TABS 150 MG, 200 MG, 250 MG .....	31	XARELTO TABS 2.5 MG, 15 MG ..	10
VECAMYL .....	21	VISTOGARD .....	17	XELJANZ SOLN .....	3
VECTIBIX 100 MG/5ML .....	24	VITAMIN D2 TABS 400 UNIT .....	69	XELJANZ TABS 10 MG .....	3
VELPHORO .....	47	VITATHELY/GINGER TABS .....	57	XELJANZ TABS 5 MG .....	3
venlafaxine hcl CP24 150 MG .....	14	VITRAKVI CAPS .....	27	XELJANZ XR TB24 .....	3
venlafaxine hcl CP24 37.5 MG .....	14	VITRAKVI SOLN .....	27	XEOMIN .....	58
venlafaxine hcl CP24 75 MG .....	14	VIZIMPRO .....	24	XERAIVA .....	63
venlafaxine hcl TABS .....	14	VORAXAZE .....	27	XGEVA SOLN .....	44
venlafaxine hcl TB24 150 MG .....	14	voriconazole TABS .....	18	XHANCE EXHU .....	58
venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG .....	14	VOSEVI .....	31		
verapamil hcl CP24 100 MG, 200 MG, 300 MG .....	33	VOTRIENT (pazopanib hcl) .....	27		
verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG .....	33	VYNDAMAX .....	34		
		VYNDAQEL .....	34		
		VYVANSE CAPS .....	1		

XIFAXAN 200 MG .....	21	zaleplon 5 MG .....	50	zolmitriptan SOLN .....	54
XIFAXAN 550 MG .....	21	ZALTRAP 100 MG/4ML .....	24	zolmitriptan TABS .....	54
XIGDUO XR (dapagliflozin propanediol-metformin hcl) .....	15	ZANOSAR .....	23	zolmitriptan TBDP .....	54
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG .....	15	ZARONTIN CAPS (ethosuximide) .	13	zolpidem tartrate TABS .....	50
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG .....	15	ZARXIO .....	49	zolpidem tartrate TBCR .....	50
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML .....	9	ZEJULA CAPS .....	27	zonisamide CAPS .....	12
XOLAIR SOAJ 75 MG/0.5ML .....	9	ZEJULA TABS 100 MG .....	27	ZONTIVITY .....	49
XOLAIR SOLR .....	9	ZEJULA TABS 200 MG, 300 MG .	27	ZORBTIVE SC .....	45
XOLAIR SOSY 150 MG/ML, 300 MG/2ML .....	9	ZELBORAF .....	27	ZYDELIG .....	27
XOLAIR SOSY 75 MG/0.5ML .....	9	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT- 10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT- 15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT .....	43	ZYLET .....	59
XOSPATA .....	27	ZENPEP CPEP 252600 UNIT- 189600 UNIT-60000 UNIT .....	43		
XPOVIO .....	25	zidovudine CAPS .....	31		
XPOVIO 60 MG TWICE WEEKLY 25		zidovudine SYRP .....	31		
XPOVIO 80 MG TWICE WEEKLY 25		zidovudine TABS .....	31		
XTAMPZA ER .....	6	ZIEXTENZO .....	49		
XTANDI CAPS .....	25	zileuton TB12 .....	9		
XTANDI TABS 40 MG .....	25	ziprasidone hcl .....	29		
XTANDI TABS 80 MG .....	25	ZIRABEV .....	24		
XULTOPHY 100/3.6 .....	15	ZIRGAN GEL .....	59		
XYNTHA .....	48	ZOLADEX 10.8 MG .....	25		
XYNTHA SOLOFUSE .....	48	ZOLADEX 3.6 MG .....	25		
YERVOY .....	24	zoledronic acid CONC .....	44		
YONSA .....	25	zoledronic acid SOLN .....	44		
zafirlukast .....	9	ZOLINZA .....	27		
zaleplon 10 MG .....	50				

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