



2025 FORMULARY

EFFECTIVE JANUARY 1, 2025



[AmbetterHealth.com](https://www.AmbetterHealth.com)

Formulary Introduction

FORMULARY

The Ambetter Health 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_A** - 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_B** - 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 Health, 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_A** - 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_B** - 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	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders					
Amphetamines					
<i>amphetamine sulfate TABS</i>	3	PA	<i>dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	1B	
<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>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1B	QL(4 ea daily)
<i>amphetamine-dextroamphetamine CP24 3.75 MG-3.75 MG-3.75 MG-3.75 MG</i>	1B		<i>lisdexamfetamine dimesylate CAPS</i>	1B	QL(1 ea daily); ST
<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>lisdexamfetamine dimesylate CHEW</i>	1B	QL(1 ea daily); ST
<i>amphetamine-dextroamphetamine TABS 7.5 MG-7.5 MG-7.5 MG-7.5 MG</i>	1B	QL(2 ea daily)	<i>methamphetamine hcl</i>	1B	QL(5 ea daily); AL(At least 6 yrs old)
<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-1.875 MG, 2.5 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)	Anorexiants Non-Amphetamine		
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	1B	QL(4 ea daily)	<i>phendimetrazine tartrate TABS</i>	1B	PA
<i>dextroamphetamine sulfate CP24 5 MG</i>	1B		<i>phentermine hcl CAPS</i>	1B	PA
			Anti-Obesity Agents		
			CONTRAVE	3	QL(4 ea daily); PA
			Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
			<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
			<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1B	QL(2 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)
			Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
			SUNOSI 75 MG	3	QL(2 ea daily); PA
			SUNOSI 150 MG	3	QL(1 ea daily); PA
			Stimulants - Misc.		

Drug Name	Drug Tier	Requirements/Limits
<i>armodafinil</i>	1B	QL(1 ea daily); AL(At least 17 yrs old); PA
<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 2.5 MG</i>	1B	QL(2 ea daily)
<i>methylphenidate hcl CHEW 5 MG</i>	1B	QL(6 ea daily)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24</i>	1B	QL(1 ea daily)
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(2 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 5 MG</i>	1B	QL(6 ea 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 TB24 36 MG, 54 MG</i>	1B	QL(2 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 TBCR 10 MG, 20 MG</i>	1B	QL(3 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)
<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1B	QL(2 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 200 MG</i>	1B	QL(2 ea daily); PA
<i>modafinil 100 MG</i>	1B	QL(1 ea daily); PA
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASTEK SUBL	3	PA
AMEBICIDES		
Amebicides		
SOLOSEC	3	PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
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
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
RINVOQ TB24	4	QL(1 ea daily); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XELJANZ XR TB24	4	QL(1 ea daily); 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
XELJANZ SOLN	4	QL(20 ml daily); PA			
XELJANZ TABS 5 MG	4	QL(2 ea daily); SP; PA			
XELJANZ TABS 10 MG	4	QL(2 ea daily); PA	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
Antirheumatic Antimetabolites			HUMIRA PEN PNKT	4	QL(0.143 ea daily); PA
METHOTREXATE	4	QL(1.714 ea daily); SP; PA			
Anti-TNF-alpha - Monoclonal Antibodies			HUMIRA PEN PNKT 80 MG/0.8ML	4	QL(0.072 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	HUMIRA PEN-PS/UV STARTER PNKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	QL(0.215 ea daily); PA			
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	HUMIRA PSKT	4	QL(0.143 ea daily); PA
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	4	QL(0.143 ea daily); PA	SIMPONI ARIA SOLN	4	PA
CYLTEZO AJKT	4	QL(0.215 ea daily); PA	YUFLYMA 1-PEN KIT AJKT	4	QL(0.143 ea daily); PA
CYLTEZO AJKT	4	QL(0.072 ea daily); PA	YUFLYMA 2-PEN KIT AJKT	4	QL(0.29 ea daily); PA
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 ea daily); PA	YUFLYMA 2-SYRINGE KIT PSKT	4	QL(0.143 ea daily); PA
CYLTEZO PSKT 10 MG/0.2ML, 40 MG/0.4ML	4	QL(0.072 ea daily); PA	YUFLYMA CD/UC/HS STARTER AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; 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	Gold Compounds		
			RIDAURA	3	QL(3 ea daily)
			Interleukin-1 Blockers		
			ARCALYST	4	QL(0.286 ea daily); SP; PA
			Interleukin-6 Receptor Inhibitors		
			KEVZARA SOAJ	4	QL(0.082 ml daily); PA

Drug Name	Drug Tier	Requirements/Limits
KEVZARA SOSY	4	QL(0.082 ml daily); PA
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>piroxicam CAPS</i>	1B	
<i>sulindac TABS</i>	1B	
<i>tolmetin sodium CAPS</i>	1B	
<i>tolmetin sodium TABS 600 MG</i>	1B	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS	4	QL(2 ea daily); PA
OTEZLA TBPK	4	1 package(s) per 180 day(s) retail; PA
OTEZLA TBPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; 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
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 ea daily)
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 ea daily)	<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 ea daily)	<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 ea daily); PA
Salicylates			<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 ea daily); PA
<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>levorphanol tartrate TABS 2 MG</i>	1B	New starts limited to 7 day supply
<i>aspirin TABS 325 MG</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 TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B	
<i>aspirin TBEC 325 MG</i>	1A		<i>meperidine hcl TABS 50 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>diflunisal TABS</i>	1B		<i>methadone hcl CONC</i>	1B	QL(10 ml daily)
<i>salsalate</i>	1B		<i>methadone hcl SOLN OR 10 MG/5ML</i>	1B	QL(50 ml daily)
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B	
Opioid Agonists			<i>methadone hcl SOLN OR 5 MG/5ML</i>	1B	QL(100 ml daily)
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply	METHADONE HCL SOLN IJ	1B	
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply	<i>methadone hcl TABS 5 MG</i>	1B	QL(4 ea daily)
<i>fentanyl citrate LPOP</i>	1B	QL(4 ea daily); PA	<i>methadone hcl TABS 10 MG</i>	1B	QL(10 ea daily)
<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>methadone hcl TBSO</i>	1B	QL(2 ea daily)
<i>hydrocodone bitartrate CP12</i>	3	QL(2 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>hydrocodone bitartrate T24A</i>	3	QL(2 ea daily); PA	<i>morphine sulfate SOLN OR 20 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(50 ml daily)
<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply			
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1B		<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1A	New starts limited to 7 day supply; QL(12 ea daily)
<i>morphine sulfate SOLN OR 10 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(100 ml daily)	<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)
<i>morphine sulfate TABS</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA
<i>morphine sulfate TBCR</i>	1B	QL(2 ea daily)	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1B	New starts limited to 7 day supply
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(2 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>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-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)
<i>oxymorphone hcl TB12 40 MG</i>	1B	QL(4 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)
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	3	QL(8 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 100 MCG	3	QL(3 ea daily); PA	<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 ea daily)
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	3	QL(4 ea daily); PA	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA
<i>tramadol hcl TABS 50 MG</i>	1A	New starts limited to 7 day supply; QL(8 ea daily)			
<i>tramadol hcl TB24</i>	1B	QL(1 ea daily)			
Opioid Combinations					
<i>acetaminophen w/ codeine SOLN</i>	1A	New starts limited to 7 day supply; QL(75 ml daily)			
<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)			

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Drug Name	Drug Tier	Requirements/Limits
<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)
<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)
Opioid Partial Agonists		
<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 NA 10 MG/ML</i>	1B	QL(0.34 ml daily); PA
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
<i>nalbuphine hcl</i>	1B	QL(8 ml daily)
<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Anabolic Steroids		
<i>oxandrolone</i>	1B	
Androgens		
<i>ANDRODERM PT24 2 MG/24HR, 4 MG/24HR</i>	2	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
<i>danazol CAPS</i>	1B	
<i>METHITEST TABS</i>	3	
<i>testosterone cypionate SOLN IM</i>	1B	
<i>TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML</i>	1B	
<i>testosterone enanthate SOLN IM</i>	1B	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	4	QL(3.2 gm daily); PA
<i>hydrocortisone (intrarectal)</i>	1B	
Rectal Steroids		
<i>hydrocortisone (rectal) EX</i>	1B	RX/OTC
<i>hydrocortisone acetate (rectal)</i>	1B	
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1B	QL(2 gm daily)
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<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
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 ea daily)
<i>ranolazine TB12 500 MG</i>	1B	QL(3 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	
ANTIANGIETY AGENTS - Drugs to Treat Anxiety		
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 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 ea daily)
<i>alprazolam TABS 2 MG</i>	1B	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	
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
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	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		

Drug Name	Drug Tier	Requirements/Limits
FASENRA PEN SOAJ	4	QL(0.036 ml daily); PA
FASENRA SOSY 30 MG/ML	4	QL(0.036 ml daily); PA
NUCALA SOAJ	4	QL(0.1073 ml daily); PA
NUCALA SOLR	4	QL(0.1073 ea daily); PA
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ml daily); PA
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ml daily); PA
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA
XOLAIR SOAJ 75 MG/0.5ML	4	QL(0.036 ml daily); PA
XOLAIR SOLR	4	QL(0.286 ea daily); PA
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ml daily); PA
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	4	QL(0.286 ml daily); PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1B	QL(8 ml daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	3	QL(0.44 gm daily)
INCRUSE ELLIPTA	2	QL(1 ea daily)
<i>ipratropium bromide SOLN 0.02 %</i>	1B	QL(15 ml daily)
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)
<i>tiotropium bromide monohydrate CAPS</i>	1B	QL(1 ea daily)
Leukotriene Modulators		
<i>montelukast sodium CHEW</i>	1B	QL(1 ea daily)
<i>montelukast sodium PACK</i>	1B	QL(1 ea daily)
<i>montelukast sodium TABS</i>	1B	QL(1 ea daily)
<i>zafirlukast</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>zileuton TB12</i>	3	QL(4 ea daily); PA
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
<i>roflumilast</i>	3	QL(1 ea daily)
Steroid Inhalants		
ALVESCO	3	PA
ARNUIITY ELLIPTA	2	
<i>budesonide (inhalation) SUSP</i>	1B	QL(4 ml daily); PA
<i>fluticasone propionate (inhalation) AEPB</i>	1B	
<i>fluticasone propionate hfa</i>	1B	QL(0.8 gm daily)
PULMICORT FLEXHALER AEPB	2	
QVAR REDHALER	2	
Sympathomimetics		
AIRDUO DIGIHALER 113/14	3	
AIRDUO DIGIHALER 232/14	3	
AIRDUO DIGIHALER 55/14	3	
AIRSUPRA	3	
<i>albuterol sulfate AERS</i>	1B	
<i>albuterol sulfate NEBU 0.083 %, 0.5 %, 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML</i>	1B	
<i>albuterol sulfate SYRP</i>	1B	
<i>albuterol sulfate TABS</i>	1B	
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	
BREZTRI AEROSPHERE	2	QL(0.38 gm daily)

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Drug Name	Drug Tier	Requirements/Limits
<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)
Xanthines		
<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	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
<i>warfarin sodium TABS</i>	1B	
Direct Factor Xa Inhibitors		
ELIQUIS STARTER PACK TBPK	2	QL(2.47 ea daily); 1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
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)
Heparins And Heparinoid-Like Agents		
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ml daily)
<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>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ml daily; 30 Day(s) limit); SP
<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>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
<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

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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		Anticonvulsants - Misc.		
Thrombin Inhibitors			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
ANTICONVULSANTS - Drugs to Treat Seizures			BANZEL TABS 200 MG (<i>rufinamide</i>)	2	QL(2 ea daily); PA
AMPA Glutamate Receptor Antagonists			BRIVIACT SOLN OR 10 MG/ML	3	QL(20 ml daily); PA
FYCOMPA TABS 2 MG	3	QL(6 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 100 MG</i>	1B	
FYCOMPA TABS 6 MG	3	QL(2 ea daily); PA	<i>carbamazepine CP12 200 MG</i>	1B	QL(6 ea daily)
Anticonvulsants - Benzodiazepines			<i>carbamazepine CP12 300 MG</i>	1B	QL(4 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 100 MG, 400 MG</i>	1B	QL(4 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 200 MG</i>	1B	QL(6 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 500 MG	4	QL(6 ea daily); PA
			DIACOMIT PACK 250 MG	4	QL(12 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
<i>gabapentin TABS 600 MG, 800 MG</i>	1B	
<i>lacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ml daily)
<i>lacosamide TABS</i>	1B	QL(2 ea daily)
<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 ea daily)
<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 ea daily)
<i>lamotrigine TABS</i>	1B	
<i>lamotrigine TBDP</i>	1B	QL(1 ea daily)
<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ml daily)
<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 ea daily)
<i>levetiracetam TABS 500 MG</i>	1B	QL(6 ea daily)
<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 ea daily)
<i>levetiracetam TB24</i>	1B	QL(4 ea daily)
<i>oxcarbazepine SUSP</i>	1B	QL(40 ml daily)
<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 ea daily)
<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 ea daily)
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 ea daily); PA
<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 ea daily); PA
<i>pregabalin SOLN</i>	3	QL(30 ml daily); PA
<i>primidone 50 MG, 250 MG</i>	1B	
<i>rufinamide SUSP</i>	1B	QL(80 ml daily); PA
<i>rufinamide TABS 200 MG</i>	1B	QL(2 ea daily); PA
<i>rufinamide TABS 400 MG</i>	1B	QL(8 ea daily); PA
<i>TEGRETOL SUSP (carbamazepine)</i>	2	
<i>TEGRETOL TABS (carbamazepine)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>topiramate CPSP 15 MG</i>	1B	QL(6 ea daily)
<i>topiramate CPSP 25 MG</i>	1B	QL(8 ea daily)
<i>topiramate CS24</i>	3	PA
<i>topiramate TABS 200 MG</i>	1B	QL(2 ea daily)
<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 ea daily)
<i>topiramate TABS 50 MG</i>	1B	QL(6 ea daily)
<i>zonisamide CAPS</i>	1B	QL(6 ea daily)
Carbamates		
<i>felbamate SUSP</i>	1B	QL(30 ml daily)
<i>felbamate TABS 600 MG</i>	1B	QL(6 ea daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 ea daily)
GABA Modulators		
<i>tiagabine hcl</i>	1B	
<i>vigabatrin PACK</i>	4	QL(6 ea daily); SP; PA
<i>vigabatrin TABS</i>	4	QL(6 ea daily); SP; PA
Hydantoins		
<i>DILANTIN (phenytoin sodium extended)</i>	2	
<i>DILANTIN</i>	2	
<i>DILANTIN INFATABS CHEW (phenytoin)</i>	2	
<i>DILANTIN-125 SUSP (phenytoin)</i>	2	
<i>fosphenytoin sodium</i>	1B	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B	
<i>phenytoin sodium SOLN</i>	1B	
<i>phenytoin CHEW</i>	1B	
<i>phenytoin SUSP</i>	1B	
Succinimides		
<i>ethosuximide CAPS</i>	1B	QL(6 ea daily)
<i>ethosuximide SOLN</i>	1B	QL(30 ml daily)
<i>methsuximide</i>	1B	QL(4 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
ZARONTIN CAPS (ethosuximide)	2	QL(6 ea daily)
Valproic Acid		
<i>divalproex sodium TB24</i>	1B	
<i>divalproex sodium TBEC</i>	1B	
<i>valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML</i>	1B	
<i>valproic acid CAPS</i>	1B	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS 15 MG</i>	1B	QL(3 ea daily)
<i>mirtazapine TABS 7.5 MG, 45 MG</i>	1B	QL(1 ea daily)
<i>mirtazapine TABS 30 MG</i>	1B	QL(1.5 ea daily)
<i>mirtazapine TBDP 30 MG</i>	1B	QL(1.5 ea daily)
<i>mirtazapine TBDP 15 MG</i>	1B	QL(3 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 200 MG</i>	1B	+; QL(2 ea daily)
<i>bupropion hcl TB12 100 MG</i>	1B	+; QL(4 ea daily)
<i>bupropion hcl TB12 150 MG</i>	1B	+; QL(3 ea daily)
<i>bupropion hcl TB24 300 MG</i>	1B	QL(1 ea daily)
<i>bupropion hcl TB24 150 MG</i>	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	
N-Methyl-D-aspartic acid (NMDA) Receptor		

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

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Drug Name	Drug Tier	Requirements/Limits
<i>paroxetine hcl TABS 30 MG</i>	1B	#; QL(2 ea daily)
<i>paroxetine hcl TABS 10 MG</i>	1B	#; QL(6 ea daily)
<i>paroxetine hcl TABS 20 MG</i>	1B	#; QL(3 ea daily)
<i>paroxetine hcl TB24 12.5 MG</i>	1B	QL(1 ea daily)
<i>paroxetine hcl TB24 25 MG, 37.5 MG</i>	1B	QL(2 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)
Serotonin Modulators		
<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)
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<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 40 MG</i>	1B	#
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	1B	#; QL(2 ea daily)
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 75 MG</i>	1B	+; QL(5 ea daily)
<i>venlafaxine hcl CP24 150 MG</i>	1B	+; QL(2 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)
Tricyclic Agents		
<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	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	1B	QL(3 ea daily)
<i>miglitol</i>	1B	QL(3 ea daily)
Antidiabetic Combinations		
<i>alogliptin-metformin hcl</i>	1B	QL(2 ea daily); PA
<i>alogliptin-pioglitazone 30 MG-12.5 MG</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>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	2	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 ea daily)
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1B	+; QL(2 ea daily)
<i>glipizide-metformin hcl 500 MG-5 MG</i>	1B	+; QL(4 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-50 MG, 500 MG-50 MG	2	QL(2 ea daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 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-5 MG, 500 MG-5 MG</i>	1B	QL(1 ea daily)
<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1B	QL(2 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-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 ea daily)
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
XIGDUO XR <i>(dapagliflozin propanediol-metformin hcl)</i>	2	QL(1 ea daily)
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 ea daily)
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(2 ea daily)
XULTOPHY 100/3.6	2	QL(0.5 ml daily); PA
Biguanides		
<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 TABS 1000 MG</i>	1B	+; QL(2.5 ea daily)
<i>metformin hcl TB24 750 MG</i>	1B	+; QL(3 ea daily)
<i>metformin hcl TB24 500 MG</i>	1B	+; QL(4 ea daily)
Diabetic Other		
<i>diazoxide</i>	3	
<i>glucagon (rdna)</i>	1B	+; QL(0.035 ea daily)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	1B	QL(1 ea daily)
JANUVIA	2	QL(1 ea daily)
<i>saxagliptin hcl</i>	1B	QL(1 ea daily)
Incretin Mimetic Agents		
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 18 MG/3ML (<i>liraglutide</i>)	2	QL(0.3 ml daily); PA
Insulin		
APIDRA SOLOSTAR SOPN	3	PA
APIDRA SOLN	3	PA
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	#
INSULIN LISPRO SOLN IJ	2	
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	#
NOVOLIN R SOLN IJ	2	#
REZVOGLAR KWIKPEN	3	PA
Insulin Sensitizing Agents		
<i>pioglitazone hcl</i>	1B	+; QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
Meglitinide Analogues		
<i>nateglinide</i>	1B	QL(3 ea daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 ea daily)
<i>repaglinide 2 MG</i>	1B	QL(8 ea daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	2	QL(1 ea daily)
FARXIGA	2	QL(1 ea daily)
FARXIGA (<i>dapagliflozin propanediol</i>)	2	QL(1 ea daily)
JARDIANCE	2	QL(1 ea daily)
Sulfonylureas		
<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)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1B	
<i>diphenoxylate w/ atropine TABS</i>	1B	
<i>loperamide hcl CAPS</i>	1B	RX/OTC
MOTOFEN	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/Limits
<i>deferasirox TBSO</i>	4	SP; PA
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Opioid Antagonists		
<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	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
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 4 MG</i>	1B	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)
<i>ondansetron hcl TABS 24 MG</i>	1B	QL(0.143 ea daily)
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 ea daily; 45 ea per fill retail; 45 per fill mail)
<i>ondansetron TBDP 4 MG</i>	1B	QL(1 ea daily)
<i>ondansetron TBDP 8 MG</i>	1B	
<i>palonosetron hcl SOLN</i>	1B	
Antiemetics - Anticholinergic		

Drug Name	Drug Tier	Requirements/Limits
<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	
Antiemetics - Miscellaneous		
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	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<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 TBPB	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
<i>caspofungin acetate</i>	1B	
ERAXIS	3	
<i>miconazole sodium</i>	1B	PA
Antifungals		
ABELCET	3	
<i>amphotericin b IV</i>	3	
<i>amphotericin b liposome</i>	3	
<i>flucytosine</i>	1B	
<i>griseofulvin microsize SUSP</i>	1B	AL(At least 2 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<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)
Imidazole-Related Antifungals		
CRESEMBA CAPS 186 MG	3	PA
<i>fluconazole SUSR</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	
<i>posaconazole SUSP</i>	3	QL(20 ml daily)
TOLSURA CAPS	4	PA
<i>voriconazole TABS</i>	1B	QL(4 ea daily)
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
<i>dexchlorpheniramine maleate SOLN</i>	1B	
Antihistamines - Ethanolamines		
<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	
<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	

Drug Name	Drug Tier	Requirements/Limits
Antihistamines - Non-Sedating		
<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
Antihistamines - Phenothiazines		
<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	
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	1B	
<i>cyproheptadine hcl TABS</i>	1B	
ANTIHYPERTENSIVES - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	1B	QL(1 ea daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 ea daily); PA
<i>omega-3-acid ethyl esters</i>	1B	+; QL(4 ea daily)
Bile Acid Sequestrants		

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Drug Name	Drug Tier	Requirements/Limits
<i>cholestyramine light PACK</i>	1B	QL(6 ea daily)
<i>cholestyramine light POWD</i>	1B	QL(24 gm daily)
<i>cholestyramine PACK</i>	1B	QL(6 ea daily)
<i>cholestyramine POWD</i>	1B	QL(25.2 gm daily)
<i>colesevelam hcl PACK</i>	1B	QL(1 ea daily); PA
<i>colesevelam hcl TABS</i>	1B	QL(7 ea daily)
<i>colestipol hcl GRAN</i>	1B	QL(6 gm daily)
<i>colestipol hcl PACK</i>	1B	QL(6 ea daily)
<i>colestipol hcl TABS</i>	1B	QL(16 ea daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1B	+; QL(1 ea daily)
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	1B	+; QL(1 ea daily)
<i>fenofibrate micronized 43 MG, 130 MG</i>	1B	QL(1 ea daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	+; QL(1 ea daily)
<i>gemfibrozil TABS</i>	1B	+; QL(2 ea daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	1B	+; QL(1 ea daily)
<i>fluvastatin sodium CAPS 40 MG</i>	1B	QL(2 ea daily)
<i>fluvastatin sodium CAPS 20 MG</i>	1B	QL(1 ea daily)
<i>lovastatin TABS 40 MG</i>	1B	+; QL(2 ea daily); PV
<i>lovastatin TABS 10 MG, 20 MG</i>	1B	+; QL(1 ea daily); PV
<i>pravastatin sodium</i>	1B	+; QL(1 ea daily)
<i>rosuvastatin calcium TABS</i>	3	QL(1 ea daily)
<i>simvastatin TABS</i>	1B	+; QL(1 ea daily)
Intestinal Cholesterol Absorption Inhibitors		

Drug Name	Drug Tier	Requirements/Limits
<i>ezetimibe</i>	1B	+; QL(1 ea daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1B	QL(2 ea daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ml daily); PA
REPATHA SURECLICK SOAJ	4	QL(0.0714 ml daily); PA
REPATHA SOSY	4	QL(0.0714 ml daily); PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
<i>benazepril hcl</i>	1B	+
<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 ea daily)
<i>captopril 12.5 MG</i>	1B	
<i>enalapril maleate TABS</i>	1B	+
<i>fosinopril sodium</i>	1B	+
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1B	+
<i>moexipril hcl</i>	1B	QL(2 ea daily)
<i>perindopril erbumine 2 MG, 8 MG</i>	1B	QL(2 ea daily)
<i>perindopril erbumine 4 MG</i>	1B	
<i>quinapril hcl 20 MG, 40 MG</i>	1B	
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 ea daily)
<i>ramipril CAPS</i>	1B	+
<i>trandolapril 1 MG, 2 MG</i>	1B	+; QL(1 ea daily)
<i>trandolapril 4 MG</i>	1B	+; QL(2 ea daily)
Agents for Pheochromocytoma		

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

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

Drug Name	Drug Tier	Requirements/Limits
XIFAXAN 550 MG	3	QL(3 ea daily); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>sulfamethoxazole-trimethoprim TABS</i>	1A	
Antiprotozoal Agents		
ALINIA SUSR	2	PA
<i>atovaquone</i>	1B	
<i>nitazoxanide TABS</i>	1B	PA
Carbapenems		
<i>ertapenem sodium IJ</i>	1B	
<i>imipenem-cilastatin IV</i>	1B	
<i>meropenem</i>	1B	
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	SP; PA
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	1B	
Glycopeptides		
<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	
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ml per fill retail)
Leprostics		
<i>dapsone</i>	1B	
Lincosamides		
<i>clindamycin hcl</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<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	
Monobactams		
<i>aztreonam 1 GM</i>	1B	
CAYSTON	4	QL(3 ml daily); PA
Oxazolidinones		
<i>linezolid SUSR</i>	1B	
<i>linezolid TABS</i>	1B	QL(2 ea daily); PA
SIVEXTRO TABS	3	PA
Polymyxins		
<i>polymyxin b sulfate SOLR</i>	1B	
Urinary Anti-infectives		
<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	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		

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
Antimalarials		
<i>chloroquine phosphate TABS 500 MG</i>	1B	
<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 ea daily)
<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 ea daily)
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 ea daily)
<i>hydroxychloroquine sulfate 400 MG</i>	1B	QL(1 ea daily)
KRINTAFEL	3	QL(2 ea per 30 day(s) retail)

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>melphalan</i>	1B	
<i>melphalan 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
Antineoplastic - Angiogenesis Inhibitors		
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
Antineoplastic - Antibodies		
ADCETRIS	4	SP; PA
ARZERRA	4	SP; PA
RUXIENCE	4	PA
TRUXIMA	4	PA
YERVOY	4	SP; PA
Antineoplastic - Anti-HER2 Agents		
KANJINTI	4	PA
OGIVRI	4	PA
PERJETA	4	SP; PA
TRAZIMERA	4	PA
TUKYSA	4	PA
Antineoplastic - EGFR Inhibitors		
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
TAGRISO 80 MG	4	QL(1 ea daily); PA
TAGRISO 40 MG	4	QL(2 ea daily); PA
VECTIBIX 100 MG/5ML	4	SP; PA
VIZIMPRO	4	QL(1 ea daily); PA
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO	4	PA
ERIVEDGE	4	QL(1 ea daily); SP; PA
ODOMZO	4	QL(1 ea daily); PA
Antineoplastic - Hormonal and Related Agents		

Drug Name	Drug Tier	Requirements/Limits
<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	
<i>toremifene citrate</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
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 3.6 MG	4	QL(0.0357 ea daily); SP; PA
ZOLADEX 10.8 MG	4	QL(0.0119 ea daily); SP; PA
Antineoplastic - Immunomodulators		
POMALYST	4	QL(1 ea daily); PA
Antineoplastic - PDGFR-alpha Inhibitors		
AYVAKIT	4	QL(1 ea daily); PA
Antineoplastic - XPO1 Inhibitors		
XPOVIO	4	PA
XPOVIO 60 MG TWICE WEEKLY	4	PA
XPOVIO 80 MG TWICE WEEKLY	4	PA
Antineoplastic Antibiotics		
<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
Antineoplastic Combinations		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KISQALI FEMARA 200 DOSE	4	QL(2 ea daily); PA	IBRANCE CAPS	4	QL(1 ea daily); PA
KISQALI FEMARA 400 DOSE	4	QL(2.5 ea daily); PA	IBRANCE TABS	4	QL(1 ea daily); PA
KISQALI FEMARA 600 DOSE	4	QL(3.25 ea daily); PA	ICLUSIG	4	QL(1 ea daily); PA
Antineoplastic Enzyme Inhibitors			<i>imatinib mesylate</i>	4	QL(2 ea daily); SP; 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 CAPS 70 MG	4	QL(1 ea daily); PA
ALUNBRIG TBPk	4	QL(1 ea daily); PA	IMBRUVICA SUSP	4	QL(8 ml daily); PA
BALVERSA	4	PA	IMBRUVICA TABS	4	QL(1 ea daily); PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	INREBIC	4	PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA	JAKAFI	4	QL(2 ea daily); SP; PA
BOSULIF TABS 100 MG, 500 MG	4	QL(1 ea daily); SP; PA	KISQALI	4	QL(2.5 ea daily); PA
BOSULIF TABS 400 MG	4	QL(1 ea daily); PA	KISQALI	4	QL(2 ea daily); PA
BRAFTOVI 75 MG	4	QL(6 ea daily); SP; PA	KOSELUGO	4	PA
BRUKINSA	4	PA	KYPROLIS	4	PA
CABOMETYX TABS	4	QL(1 ea daily); PA	<i>lapatinib ditosylate</i>	4	QL(6 ea daily); SP; PA
CALQUENCE	4	QL(2 ea daily); PA	LORBRENA	4	QL(1 ea daily); PA
CALQUENCE	4	QL(2 ea daily); PA	LYNPARZA TABS	4	QL(4 ea daily); PA
CAPRELSA	4	QL(1 ea daily); SP; PA	MEKINIST SOLR	4	QL(40 ml daily); PA
COMETRIQ KIT	4	QL(2 ea daily); SP; PA	MEKINIST TABS 0.5 MG	4	QL(3 ea daily); PA
COMETRIQ KIT	4	QL(4 ea daily); SP; PA	MEKINIST TABS 2 MG	4	QL(1 ea daily); PA
COMETRIQ KIT	4	QL(3 ea daily); SP; PA	MEKTOVI	4	QL(6 ea daily); SP; PA
COPIKTRA	4	PA	NINLARO	4	QL(0.143 ea daily); PA
<i>dasatinib 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG</i>	4	QL(1 ea daily); SP; PA	<i>pazopanib hcl</i>	4	QL(4 ea daily); SP; PA
<i>everolimus TABS</i>	4	QL(1 ea daily); SP; PA	PEMAZYRE	4	QL(1 ea daily); PA
			PIQRAY 200MG DAILY DOSE	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PIQRAY 250MG DAILY DOSE	4	QL(1 ea daily); PA	VITRAKVI SOLN	4	PA
PIQRAY 300MG DAILY DOSE	4	QL(1 ea daily); PA	XALKORI CAPS	4	QL(2 ea daily); SP; PA
QINLOCK	4	PA	XOSPATA	4	PA
RETEVMO CAPS	4	PA	ZEJULA CAPS	4	QL(3 ea daily); PA
<i>romidepsin SOLR</i>	4	SP; PA	ZEJULA TABS 100 MG	4	QL(3 ea daily); PA
ROZLYTREK CAPS	4	PA	ZEJULA TABS 200 MG, 300 MG	4	QL(1 ea daily); PA
RUBRACA	4	QL(4 ea daily); PA	ZELBORAF	4	QL(8 ea daily); SP; PA
SCEMBLIX 100 MG	4	QL(4 ea daily); PA	ZOLINZA	4	QL(4 ea daily); SP; PA
SCEMBLIX 20 MG, 40 MG	4	QL(2 ea daily); PA	ZYDELIG	4	QL(2 ea daily); PA
<i>sorafenib tosylate</i>	4	QL(4 ea daily); SP; PA	Antineoplastic Enzymes		
SPRYCEL 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG (<i>dasatinib</i>)	4	QL(1 ea daily); SP; PA	ONCASPAR	4	SP; PA
STIVARGA	4	QL(4 ea daily); SP; PA	Antineoplastics Misc.		
<i>sunitinib malate 37.5 MG</i>	4	QL(1 ea daily); PA	ACTIMMUNE 100 MCG/0.5ML	4	SP; PA
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 ea daily); SP; PA	<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
TABRECTA	4	PA	<i>bexarotene</i>	4	SP; PA
TAFINLAR CAPS	4	QL(4 ea daily); PA	<i>dacarbazine SOLR 200 MG</i>	4	SP; PA
TAFINLAR TBSO	4	QL(30 ea daily); PA	<i>hydroxyurea</i>	1B	
TALZENNA	4	QL(1 ea daily); PA	MATULANE	4	SP; PA
TASIGNA 50 MG	4	QL(4 ea daily); PA	NIPENT	4	SP; PA
TASIGNA 150 MG, 200 MG	4	QL(4 ea daily); SP; PA	PHOTOFRIN	4	SP; PA
TAZVERIK	4	PA	PROLEUKIN	4	SP; PA
<i>temsirolimus</i>	4	QL(0.143 ml daily); SP; PA	SYNRIBO	4	SP; PA
TIBSOVO	4	PA	<i>tretinoin (chemotherapy)</i>	1B	
TURALIO	4	PA	UVADEX	4	SP; PA
VERZENIO	4	QL(2 ea daily); PA	Chemotherapy Adjuncts		
VITRAKVI CAPS	4	PA	KEPIVANCE 6.25 MG	4	SP; PA
			Chemotherapy Rescue/Antidote/Protective Agents		
			<i>leucovorin calcium SOLR</i>	1B	
			<i>leucovorin calcium TABS</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits
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
<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	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1B	
Antiparkinson Anticholinergics		
<i>benztropine mesylate SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<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	
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 2 MG, 4 MG, 6 MG</i>	1B	QL(1 ea daily); ST
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 ea daily); ST
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	1B	QL(1 ea daily); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>selegiline hcl CAPS</i>	1B		<i>haloperidol lactate CONC</i>	1B	
<i>selegiline hcl TABS</i>	1B		<i>haloperidol lactate SOLN</i>	1B	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders			<i>haloperidol TABS</i>	1B	
Antimanic Agents			Dibenzapines		
<i>lithium</i>	1B		<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily); PA
<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>clozapine TABS</i>	1B	
<i>lithium carbonate TBCR</i>	1B		<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)
Antipsychotics - Misc.			<i>clozapine TBDP 100 MG</i>	1B	QL(9 ea daily)
EQUETRO 100 MG	3	QL(2 ea daily); ST	<i>clozapine TBDP 25 MG</i>	1B	QL(3 ea daily)
EQUETRO 300 MG	3	QL(4 ea daily); ST	<i>loxapine succinate</i>	1B	
EQUETRO 200 MG	3	QL(8 ea daily); ST	<i>olanzapine SOLR</i>	1B	QL(0.215 ea daily)
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 ea daily)	<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 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 TBDP 20 MG</i>	1B	QL(1 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>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	1B	QL(4 ea daily); AL(At least 10 yrs old)
FANAPT TITRATION PACK	2	PA	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	1B	QL(2 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 TB24 300 MG, 400 MG</i>	1B	QL(2 ea daily)
<i>paliperidone 6 MG</i>	1B	QL(2 ea daily)	<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)
PERSERIS PRSY	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	

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Drug Name	Drug Tier	Requirements/Limits
<i>perphenazine TABS</i>	1B	
<i>prochlorperazine</i>	1B	
<i>prochlorperazine maleate TABS</i>	1B	
<i>thioridazine hcl</i>	1B	
<i>trifluoperazine hcl TABS</i>	1B	
Quinolinone 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	
ANTIVIRALS - Drugs to Treat Viral Infections		
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)

Drug Name	Drug Tier	Requirements/Limits
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>efavirenz TABS</i>	1B	QL(1 ea daily)
<i>emtricitabine CAPS</i>	1B	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)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	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 300 MG</i>	1B	QL(1 ea daily)
<i>lamivudine TABS 150 MG</i>	1B	QL(2 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 300 MG</i>	1B	QL(4 ea daily)
<i>maraviroc TABS 150 MG</i>	1B	QL(2 ea daily)
<i>nevirapine SUSP</i>	1B	QL(40 ml daily)
<i>nevirapine TABS</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<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)
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 75 MG, 150 MG	3	QL(2 ea daily)
RETROVIR IV INFUSION SOLN	3	
<i>ritonavir TABS</i>	1B	QL(12 ea daily)
SELZENTRY SOLN	3	QL(30 ml daily)
SELZENTRY TABS 25 MG, 75 MG	3	QL(2 ea daily)
<i>stavudine CAPS</i>	1B	QL(2 ea daily)
STRIBILD	3	QL(1 ea daily)
<i>tenofovir disoproxil fumarate TABS</i>	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)
<i>zidovudine CAPS</i>	1B	QL(6 ea daily)
<i>zidovudine SYRP</i>	1B	QL(60 ml daily)
<i>zidovudine TABS</i>	1B	QL(2 ea daily)
CMV Agents		
<i>cidofovir</i>	3	
<i>ganciclovir sodium SOLR</i>	1B	
<i>valganciclovir hcl TABS</i>	1B	QL(4 ea daily); PA

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

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Drug Name	Drug Tier	Requirements/Limits	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>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1B	+
<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	<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 ea daily)
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail	<i>nebivolol hcl 20 MG</i>	3	QL(2 ea daily)
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 ea daily)	Beta Blockers Non-Selective		
BETA BLOCKERS - Drugs to Treat High Blood Pressure			HEMANGEOL SOLN OR	4	QL(75 ml daily); PA
Alpha-Beta Blockers			<i>nadolol TABS 20 MG</i>	1B	QL(3 ea daily)
<i>carvedilol</i>	1B	+	<i>nadolol TABS 40 MG</i>	1B	QL(6 ea daily)
<i>carvedilol phosphate</i>	3	QL(1 ea daily)	<i>nadolol TABS 80 MG</i>	1B	
<i>labetalol hcl SOLN</i>	1B		<i>pindolol TABS</i>	1B	
<i>labetalol hcl TABS 300 MG</i>	1B	++; QL(8 ea daily)	<i>propranolol hcl CP24</i>	1B	QL(2 ea daily)
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	+	<i>propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML</i>	1B	
Beta Blockers Cardio-Selective			<i>propranolol hcl TABS</i>	1B	
<i>acebutolol hcl CAPS</i>	1B		<i>sotalol hcl (afib/af)</i>	1B	
<i>atenolol TABS</i>	1B	+	<i>sotalol hcl TABS 240 MG</i>	1B	
<i>betaxolol hcl</i>	1B		<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 ea daily)
<i>bisoprolol fumarate</i>	1B	+	<i>timolol maleate TABS</i>	1B	
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	+	CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
<i>metoprolol succinate TB24 200 MG</i>	1B	++; QL(2 ea daily)	Calcium Channel Blockers		
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B		<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 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	1B	+
			<i>diltiazem hcl extended release beads 420 MG</i>	1B	
			<i>diltiazem hcl CP12</i>	1B	QL(2 ea daily)
			<i>diltiazem hcl CP24</i>	1B	+

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	
DILTIAZEM HCL SOLR	1B	
<i>diltiazem hcl TABS</i>	1B	+
<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 10 MG</i>	1B	
<i>nifedipine CAPS 20 MG</i>	1B	QL(9 ea daily)
<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>nifedipine TB24 30 MG</i>	1B	+
<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	+
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
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	

Drug Name	Drug Tier	Requirements/Limits
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (<i>digoxin</i>)	2	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<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 125 MG</i>	4	QL(2 ea daily); SP; PA
<i>bosentan TABS 62.5 MG</i>	4	QL(2 ea daily); PA
OPSUMIT	4	QL(1 ea daily); PA
TRACLEER TBSO	4	QL(2 ea daily); SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		

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Drug Name	Drug Tier	Requirements/Limits
<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
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 ea daily); SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 ea daily); SP; PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION PACK TBPK	4	1 max fill(s) per 180 day(s) retail; PA
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 ea daily); PA
UPTRAVI TABS 200 MCG	4	PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	4	QL(3 ea daily); PA
Sinus Node Inhibitors		
<i>ivabradine hcl TABS</i>	3	QL(2 ea daily); PA
Transthyretin Stabilizers		
VYNDAMAX	4	QL(1 ea daily); PA
VYNDAQEL	4	QL(4 ea daily); PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1B	
<i>cefadroxil SUSR</i>	1B	
<i>cefadroxil TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B	
<i>cephalexin CAPS</i>	1B	
<i>cephalexin SUSR</i>	1B	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	1B	
<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1B	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
<i>cefprozil SUSR</i>	1B	
<i>cefprozil TABS</i>	1B	
<i>cefuroxime axetil TABS</i>	1B	
<i>cefuroxime sodium IJ 750 MG</i>	1B	
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	1B	
<i>cefdinir SUSR</i>	1B	
<i>cefixime CAPS</i>	1B	
<i>cefixime SUSR</i>	1B	ST
<i>cefotaxime sodium IJ 1 GM, 2 GM</i>	1B	
<i>cefpodoxime proxetil SUSR</i>	1B	
<i>cefpodoxime proxetil TABS</i>	1B	
<i>ceftazidime IJ 1 GM, 6 GM</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		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TEFLARO	3		<i>norethindrone & ethinyl estradiol-fe</i>	0	
CONTRACEPTIVES - Drugs to Prevent Pregnancy					
Combination Contraceptives - Oral					
<i>desogestrel & ethinyl estradiol</i>	0		<i>norethindrone acet & eth estra</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0		<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0		<i>norethindrone-eth estradiol (triphasic)</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0		<i>norgestimate-ethinyl estradiol</i>	0	
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0		<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	
<i>ethynodiol diacet & eth estrad</i>	0		<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	
<i>levonorgestrel & eth estradiol TABS</i>	0		TYBLUME CHEW	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0		Combination Contraceptives - Transdermal		
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0		<i>norelgestromin-ethinyl estradiol</i>	0	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0		TWIRLA	0	QL(3 ea per 28 day(s) retail; 9 ea per 84 days mail)
<i>levonorgestrel-ethinyl estradiol-iron</i>	0		Combination Contraceptives - Vaginal		
LO LOESTRIN FE TABS	0		ANNOVERA	0	
NATAZIA	0		<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 ea daily)
NEXTSTELLIS	0		Copper Contraceptives - IUD		
<i>norethin acet & estrad-fe CAPS</i>	0		PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	0	
<i>norethin acet & estrad-fe CHEW</i>	0		Emergency Contraceptives		
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0		ELLA	0	
<i>norethindrone & eth estradiol</i>	0		<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
			Progestin Contraceptives - Implants		
			NEXPLANON	0	
			Progestin Contraceptives - Injectable		
			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)
Progestin Contraceptives - IUD		
KYLEENA	0	
LILETTA 20.1 MCG/DAY	0	
MIRENA	0	
SKYLA	0	
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	0	
OPILL	0	
SLYND	0	QL(1 ea daily)
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
<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 22.75 MG/ML (<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 1 MG, 5 MG</i>	1B	
<i>prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG</i>	1A	
<i>prednisone TBPK</i>	1B	
SOLU-CORTEF 250 MG	3	
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-MEDROL 2 GM	3	
<i>triamcinolone acetate SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML</i>	1B	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1B	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 150 MG</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>benzonatate 200 MG</i>	1B	QL(3 ea daily)
<i>benzonatate 100 MG</i>	1B	QL(6 ea daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1B	
TUZISTRA XR	2	PA
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1B	
NEBUSAL NEBU	1B	
<i>sodium chloride (inhalant) NEBU 7 %</i>	1B	
Mucolytics		
<i>acetylcysteine SOLN</i>	1B	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1B	AL(At least 12 yrs old); ST
<i>adapalene CREA</i>	1B	AL(At least 12 yrs old); ST
<i>adapalene GEL</i>	1B	AL(At least 12 yrs old); ST; RX/OTC
AZELEX	3	QL(50 gm per 30 day(s) retail; 50 gm per 30 days mail); AL(At least 12 yrs old); ST
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide-erythromycin GEL</i>	1B	AL(At least 12 yrs old); PA
<i>benzoyl peroxide FOAM 5.3 %, 9.8 %</i>	1B	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>benzoyl peroxide GEL 10 %</i>	1B	AL(At least 12 yrs old)
<i>benzoyl peroxide LIQD 4 %, 7 %, 10 %</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) FOAM</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate (topical) GEL</i>	1B	QL(8 gm daily)
<i>clindamycin phosphate (topical) LOTN</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SOLN</i>	1B	QL(4 ml daily); AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate-tretinoin</i>	1B	AL(At least 12 yrs old); ST
DIFFERIN LOTN	2	AL(At least 12 yrs old); ST
<i>erythromycin (acne aid) PADS</i>	1B	AL(At least 12 yrs old)
<i>erythromycin (acne aid) SOLN</i>	1B	AL(At least 12 yrs old)
<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	AL(At least 12 yrs old); PA
PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old); RX/OTC
<i>sulfacetamide sodium (acne)</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %</i>	1B	AL(At least 12 yrs old); ST
<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	1B	AL(At least 12 yrs old)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	1B	AL(At least 12 yrs old)	<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 gm daily); RX/OTC
<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) SOLN</i>	1B	QL(10 ml 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 w/ betamethasone CREA</i>	1B	QL(8 gm daily)
<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 LOTN</i>	1B	
Agents for External Genital and Perianal Warts			<i>econazole nitrate CREA</i>	1B	QL(85 gm per fill retail; 85 per fill mail)
VEREGEN	3	QL(1 gm daily)	ERTACZO	3	QL(2.15 gm daily)
Antibiotics - Topical			<i>ketoconazole (topical) CREA</i>	1B	QL(10 gm daily)
ALTABAX	2	QL(15 gm per 30 day(s) retail; 15 gm per 30 days mail)	<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ml daily)
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 gm daily)	<i>luliconazole</i>	1B	PA
<i>gentamicin sulfate (topical) OINT</i>	1B		<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
<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>nystatin (topical) CREA</i>	1B	QL(10 gm daily)
Antifungals - Topical			<i>nystatin (topical) OINT</i>	1B	QL(6 gm daily)
<i>butenafine hcl</i>	1B	QL(6 gm daily); RX/OTC	<i>nystatin (topical) POWD EX</i>	1B	QL(10 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-triamcinolone CREA</i>	1B	QL(10 gm daily)
<i>ciclopirox olamine SUSP</i>	1B		<i>nystatin-triamcinolone OINT</i>	1B	QL(4 gm daily)
<i>ciclopirox GEL</i>	1B	QL(3.35 gm daily)			
<i>ciclopirox SHAM</i>	1B	QL(10 ml daily)			
<i>ciclopirox SOLN</i>	1B	QL(0.22 ml 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	Antipsoriatics		
<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
Anti-inflammatory Agents - Topical			<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)
Antineoplastic or Premalignant Lesion Agents - Topical			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)
Antipruritics - Topical			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
<i>tazarotene CREA</i>	1B	QL(1 gm daily)
TREMFYA SOPN	4	QL(0.018 ml daily); PA
TREMFYA SOSY	4	QL(0.018 ml daily); PA
Antiseborrheic Products		
<i>selenium sulfide LOTN 2.5 %</i>	1B	
Antivirals - Topical		
<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
<i>penciclovir</i>	3	QL(0.18 gm daily)
Burn Products		
<i>mafenide acetate PACK</i>	3	
<i>silver sulfadiazine</i>	1B	QL(20 gm daily)
SULFAMYLON CREA	3	
Corticosteroids - Topical		
<i>alclometasone dipropionate CREA</i>	1B	QL(2 gm daily)
<i>alclometasone dipropionate OINT</i>	1B	QL(3 gm daily)
<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>amcinonide LOTN</i>	3	
<i>amcinonide OINT</i>	3	
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 gm daily)

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate (topical) LOTN</i>	1B	
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 gm daily)
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 gm daily)
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ml daily)
<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 gm daily)
<i>betamethasone valerate CREA</i>	1B	QL(2.5 gm daily)
<i>betamethasone valerate FOAM</i>	1B	QL(1.67 gm daily)
<i>betamethasone valerate LOTN</i>	1B	QL(5 ml daily)
<i>betamethasone valerate OINT</i>	1B	QL(3 gm daily)
<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST
<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 gm daily); PA
<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 gm daily); PA
<i>clobetasol propionate FOAM</i>	1B	QL(3 gm daily); ST
<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 gm daily); ST
<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 gm daily); PA
<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ml daily); PA
<i>clocortolone pivalate</i>	3	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 gm 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 0.025 %</i>	1B	QL(15.15 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 0.1 %</i>	1B	QL(3.34 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)
Eczema Agents		
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 100 MG/0.67ML	4	QL(0.048 ml daily); PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ml daily); PA
Emollients		
<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
Enzymes - Topical		
SANTYL OINT	3	PA
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	1B	QL(12 ea per fill retail; 12 per fill mail)
Immunosuppressive Agents - Topical		
<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
Keratolytic/Antimitotic/Vesicant Agents		
<i>podofilox SOLN</i>	1B	
Local Anesthetics - Topical		
<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
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	3	QL(2 gm daily); PA
Rosacea Agents		
<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 0.75 %</i>	1B	QL(3 gm daily)
<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 gm daily)
<i>metronidazole (topical) LOTN</i>	1B	
Scabicides & Pediculicides		
<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
Wound Care Products		
REGRANEX	3	QL(0.5 gm daily)
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
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
Diagnostic Tests		
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 GLUCOSE TEST STRIPS STRP	1B	#; QL(3.34 ea daily); RX/OTC
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1B	#; QL(3.34 ea daily); RX/OTC
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	2	Non-FDA approved uses require Prior Authorization

Drug Name	Drug Tier	Requirements/Limits
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
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 ea daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 ea daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 ea daily)
<i>dichlorphenamide</i>	4	QL(4 ea daily); PA
<i>methazolamide TABS</i>	1B	QL(6 ea daily)
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1B	
<i>spironolactone & hydrochlorothiazide</i>	1B	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1B	
<i>triamterene & hydrochlorothiazide TABS</i>	1B	
Loop Diuretics		
<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
<i>bumetanide TABS</i>	1B	QL(5 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ethacrynic acid</i>	1B	QL(16 ea daily)	<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA
<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	1B		PAMIDRONATE DISODIUM SOLN	4	SP; PA
<i>furosemide TABS</i>	1B		PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
<i>torseamide TABS</i>	1B		<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 ea daily); PA
Potassium Sparing Diuretics			<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 ea daily); PA
<i>amiloride hcl TABS</i>	1B		<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 ea daily); PA
<i>spironolactone TABS</i>	1B		<i>risedronate sodium TBEC</i>	1B	PA
<i>triamterene CAPS</i>	1B	QL(3 ea daily)	<i>teriparatide (recombinant) SOPN</i>	4	QL(0.09 ml daily); SP; PA
Thiazides and Thiazide-Like Diuretics			TYMLOS	4	PA
<i>chlorthalidone 25 MG, 50 MG</i>	1B		XGEVA SOLN	4	SP; PA
DIURIL SUSP	2	QL(20 ml daily)	<i>zoledronic acid CONC</i>	4	SP; PA
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 ea daily)	<i>zoledronic acid SOLN</i>	4	SP; PA
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 ea daily)	Corticotropin		
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 ea daily)	ACTHAR GEL	3	PA
<i>indapamide TABS 1.25 MG</i>	1B	QL(1 ea daily)	Fertility Regulators		
<i>indapamide TABS 2.5 MG</i>	1B	QL(2 ea daily)	CHORIONIC GONADOTROPIN IM	4	PA
<i>metolazone</i>	1B	QL(2 ea daily)	<i>clomiphene citrate TABS</i>	3	PA
ENDOCRINE AND METABOLIC AGENTS - MISC.			GnRH/LHRH Antagonists		
- Drugs to Treat Bone Disease and Regulate Hormones			<i>ganirelix acetate</i>	4	PA
Bone Density Regulators			ORLISSA	2	PA
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1B	QL(0.143 ea daily)	Growth Hormone Releasing Hormones (GHRH)		
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1B	QL(1 ea daily)	EGRIFTA 2 MG	4	PA
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ml daily)	EGRIFTA SV	4	PA
FOSAMAX PLUS D	3	QL(0.143 ea daily); PA	Growth Hormones		
<i>ibandronate sodium SOLN</i>	4	SP; PA	GENOTROPIN MINIQUICK PRSY	4	PA
<i>ibandronate sodium TABS</i>	1B	QL(0.036 ea daily)	GENOTROPIN CART SC	4	PA
			HUMATROPE CART IJ	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	PA	<i>sapropterin dihydrochloride</i> PACK	4	PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA	<i>sapropterin dihydrochloride</i> TABS	4	PA
ZORBTIVE SC	4	SP; PA	<i>sodium phenylbutyrate</i> POWD	1B	PA
Hormone Receptor Modulators			<i>sodium phenylbutyrate</i> TABS	1B	PA
OSPHENA	3	PA	STRENSIQ	4	PA
<i>raloxifene hcl</i>	0	QL(1 ea daily)	Posterior Pituitary Hormones		
Insulin-Like Growth Factors (Somatomedins)			<i>desmopressin acetate</i> spray	1B	
INCRELEX	4	SP; PA	<i>desmopressin acetate</i> spray refrigerated	1B	
LHRH/GnRH Agonist Analog Pituitary Suppressants			<i>desmopressin acetate</i> SOLN IJ	1B	PA
FENSOLVI SC	4	SP; PA	DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
LUPRON DEPOT-PED (1-MONTH)	4	SP; PA	<i>desmopressin acetate</i> TABS 0.1 MG	1B	QL(6 ea daily)
LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA	<i>desmopressin acetate</i> TABS 0.2 MG	1B	QL(8 ea daily)
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA	STIMATE SOLN NA	4	SP; PA
SYNAREL	4	SP; PA	Prolactin Inhibitors		
Metabolic Modifiers			<i>cabergoline</i>	1B	
ALDURAZYME	4	SP; PA	Somatostatic Agents		
<i>betaine</i>	4	SP; PA	<i>octreotide acetate</i> SOLN	4	SP; PA
<i>calcitriol</i> CAPS	1B		SIGNIFOR	4	PA
<i>calcitriol</i> SOLN IV	1B		Vasopressin Receptor Antagonists		
<i>cinacalcet hcl</i>	4	QL(4 ea daily); SP; PA	JYNARQUE TBPK	4	SP; PA
<i>doxercalciferol</i> CAPS	1B		<i>tolvaptan</i> TABS	4	QL(2 ea daily); SP; PA
<i>doxercalciferol</i> SOLN	1B		ESTROGENS - Hormone Replacement/Modifying Drugs		
ELAPRASE	4	SP; PA	Estrogen Combinations		
LUMIZYME	4	SP; PA	ACTIVEVELLA TABS 1 MG-0.5 MG (<i>estradiol & norethindrone acetate</i>)	3	
MYALEPT	4	PA			
<i>nitisinone</i> CAPS	4	PA			
<i>paricalcitol</i> CAPS	1B				
<i>paricalcitol</i> SOLN	1B				
PHEBURANE PLLT	4	PA			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ANGELIQ	3		BAXDELA SOLR	3	PA
BIJUVA	3		BAXDELA TABS	3	PA
CLIMARA PRO	3		<i>ciprofloxacin hcl TABS</i>	1B	
COMBIPATCH PTTW	3		<i>ciprofloxacin in d5w 5 %-200 MG/100ML</i>	3	
DUAVEE	3		<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	1B	2 max fill(s) per 30 day(s) retail
<i>esterified estrogens & methyltestosterone</i>	3		<i>levofloxacin in d5w 5 %-500 MG/100ML</i>	1B	
<i>estradiol & norethindrone acetate TABS</i>	3		<i>levofloxacin SOLN OR</i>	1B	
<i>norethindrone acetate-ethinyl estradiol</i>	1B		<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
PREFEST	3		<i>levofloxacin TABS 500 MG</i>	1A	
PREMPHASE	2		<i>levofloxacin TABS 500 MG</i>	1A	
PREMPRO	2	QL(1 ea daily)	<i>moxifloxacin hcl in sodium chloride</i>	1B	
Estrogens			<i>moxifloxacin hcl TABS</i>	1B	
DEPO-ESTRADIOL	3		<i>ofloxacin 300 MG, 400 MG</i>	1B	
ELESTRIN GEL	3		GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
<i>estradiol valerate</i>	1B		Bile Acid Synthesis Disorder Agents		
<i>estradiol GEL 0.06 %</i>	3		CHOLBAM	4	SP; PA
<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		Gallstone Solubilizing Agents		
<i>estradiol PTTW</i>	1B	QL(0.286 ea daily)	<i>ursodiol CAPS</i>	1B	QL(3 ea daily)
<i>estradiol PTWK</i>	1B		<i>ursodiol TABS</i>	1B	
<i>estradiol TABS</i>	1B		Gastrointestinal Chloride Channel Activators		
ESTROGEL GEL (<i>estradiol</i>)	3		<i>lubiprostone</i>	1B	QL(2 ea daily)
EVAMIST SOLN	3		Gastrointestinal Stimulants		
MENEST	3		<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ml daily)
MENOSTAR PTWK	3		<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
PREMARIN SOLR	2		<i>metoclopramide hcl TABS</i>	1A	QL(6 ea daily)
PREMARIN TABS	2	QL(1 ea daily)	Inflammatory Bowel Agents		
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections					
Fluoroquinolones					

Drug Name	Drug Tier	Requirements/Limits
<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 1.2 GM</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 ea daily)
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	

Drug Name	Drug Tier	Requirements/Limits
<i>sevelamer carbonate PACK</i>	1B	
<i>sevelamer carbonate TABS</i>	1B	
VELPHORO	3	PA
GENITOURINARY AGENTS - MISCELLANEOUS -		
Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	1B	
<i>sodium citrate & 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	

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Drug Name	Drug Tier	Requirements/Limits
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
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1B	
Gout Agents		
<i>allopurinol</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	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
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

Drug Name	Drug Tier	Requirements/Limits
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		
GOHIBIC	4	PA
HAEGARDA SOLR SC	4	PA
Hemataologic - Tyrosine Kinase Inhibitors		
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)
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1B	QL(1 ea daily)
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>dipyridamole</i>	1B	
<i>prasugrel hcl</i>	1B	QL(1 ea daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 ea daily); PA
CEREZYME 400 UNIT	4	SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>miglustat</i>	4	QL(3 ea daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ml daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	0	
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN 25 MCG/ML	4	SP; PA
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 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
PROCRIT 40000 UNIT/ML	4	SP; PA
PROMACTA PACK	4	QL(1 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
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
Hematopoietic Mixtures		
<i>ferrous fumarate-folic acid</i>	1B	QL(1 ea daily)
Iron		
<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	
Stem Cell Mobilizers		
<i>plerixafor</i>	4	SP; PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1B	PA
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
<i>tranexamic acid TABS</i>	1B	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1B	
<i>phenobarbital TABS</i>	1B	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1B	QL(1 ea daily); PA
Non-Barbiturate Hypnotics		
<i>estazolam</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits
<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)
<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)
Orexin Receptor Antagonists		
<i>BELSOMRA</i>	3	PA
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1B	QL(1 ea daily); AL(At least 18 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	1B	
Laxative Combinations		
<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

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clarithromycin TB24</i>	1B		KIMONO MAXX/LARGE FLARE MISC	0	
Erythromycins			KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	0	
<i>erythromycin base CPEP</i>	3		KIMONO PLUS SPERMICIDE LUBRICATED MISC	0	
<i>erythromycin base TABS</i>	3		KIMONO PLUS SPERMICIDE/LUBRICATED MISC	0	
<i>erythromycin base TBEC</i>	1B		KIMONO PS LUBRICATED MISC	0	
<i>erythromycin ethylsuccinate SUSR</i>	1B		KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	0	
<i>erythromycin ethylsuccinate TABS</i>	3		KIMONO SENSATION LUBRICATED MISC	0	
Fidaxomicin			KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	0	
DIFICID TABS	2		KIMONO SPECIAL DEVI	0	
MEDICAL DEVICES AND SUPPLIES					
Contraceptives					
AIMSCO LUBRICATED MISC	0		K-Y ME & YOU EXTRA LUBRICATED DEVI	0	
CAYA DPRH	0		K-Y ME & YOU INTENSE DEVI	0	
DUREX EXTRA SENSITIVE THIN DEVI	0		MAXX LUBRICATED MISC	0	
DUREX EXTRA SENSITIVE THIN MISC	0		MAXX PLUS SPERMICIDE LUBRICATED MISC	0	
DUREX TROPICAL MISC	0		OMNIFLEX DIAPHRAGM	0	
FANTASY LUBRICATED/SPERMICIDE MISC	0		REALITY LATEX CONDOMS/LUBRICATED MISC	0	
FANTASY LUBRICATED MISC	0		REALITY LATEX/ULTRA TEXTURED DEVI	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	REALITY LATEX/ULTRA THIN DEVI	0	
FEMCAP DEVI	0		TRUE COVER DEVI	0	
KAMELEON LUBRICATED MISC	0		TRUSTEX COLOR CONDOMS + LUBE MISC	0	
KIMONO COLORS DEVI	0				
KIMONO LUBRICATED MISC	0				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUSTEX LUBRICATED EXTRALARGE MISC	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0	
TRUSTEX LUBRICATED EXTRASTRENGTH MISC	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0	
TRUSTEX LUBRICATED/RIBBED/STUDDED MISC	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0	
TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	0		WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0	
TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	0		Diabetic Supplies		
TRUSTEX LUBRICATED/SPERMICIDE MISC	0		FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA
TRUSTEX LUBRICATED MISC	0		FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	0		FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDDED MISC	0		FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	0		FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	0		FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX/RIA LUBRICATED MISC	0		FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	PA
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0		ONETOUCH DELICA SAFETY LANCING DEVICE	1B	#, RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0		ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1B	#, RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0		RELION 2-IN-1 LANCET DEVICES 30G	1B	#, RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0		RELION 2-IN-1 LANCING DEVICE 25G	1B	#, RX/OTC
			RELION 2-IN-1 LANCING DEVICE 30G	1B	#, RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SELECT LANCETS	1B	6.66/day	ERGOMAR SUBL	3	QL(0.667 ea daily)
SELECT LANCETS	1	6.66/day	Serotonin Agonists		
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	#	<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 ea daily); AL(At least 12 yrs old); ST
Parenteral Therapy Supplies			<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST
SELECT INSULIN SYRINGES	1B	5/day	<i>eletriptan hydrobromide</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old); ST
SELECT INSULIN SYRINGES	1	5/day	<i>frovatriptan succinate</i>	1B	QL(0.4 ea daily); AL(At least 18 yrs old); ST
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches			<i>naratriptan hcl</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag			<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
AIMOVIG	2	QL(0.04 ml daily); PA	<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
EMGALITY SOAJ	2	QL(0.07 ml daily); PA	<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
EMGALITY SOSY 120 MG/ML	2	QL(0.07 ml daily); PA	<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
EMGALITY SOSY 100 MG/ML	2	QL(0.1 ml daily); PA	<i>sumatriptan</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old)
UBRELVY	3	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail); ST	<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
Migraine Combinations			<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 ea daily)	Migraine Products		
<i>sumatriptan-naproxen sodium</i>	3	QL(10 ea per 30 day(s) retail; 10 ea per 30 days mail)	<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
Migraine Products			<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ml daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)	NORMOSOL-M/D5W	1B	
<i>sumatriptan succinate TABS</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)	NORMOSOL-R	1B	
<i>zolmitriptan SOLN</i>	1B	QL(0.2 ea daily); AL(At least 12 yrs old); ST	PLASMA-LYTE A (<i>electrolyte-a</i>)	1B	
<i>zolmitriptan TABS</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST	PLASMA-LYTE-148 (<i>electrolyte-148</i>)	1B	
<i>zolmitriptan TBDP</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST	<i>potassium chloride in dextrose 5 %-20 MEQ/L</i>	1B	
MINERALS & ELECTROLYTES			<i>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 %</i>	1B	
Bicarbonates			<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %</i>	1B	
<i>sodium acetate SOLN</i>	1B		POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	1B	
SODIUM ACETATE SOLN (<i>sodium acetate</i>)	1B		POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (<i>potassium chloride in nacl</i>)	1B	
Calcium			<i>ringer's</i>	1B	
<i>calcium chloride (dihydrate) SOLN</i>	1B		Fluoride		
Electrolyte Mixtures			<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG</i>	0	QL(1 ea daily)
<i>dextrose in lactated ringers</i>	1B		Magnesium		
<i>electrolyte-148</i>	1B		<i>magnesium sulfate IJ 50 %</i>	1B	
<i>electrolyte-a</i>	1B		Phosphate		
IONOSOL-MB/DEXTROSE 5%	1B		<i>potassium phosphates 236 MG/ML-224 MG/ML</i>	1B	
ISOLYTE-P/DEXTROSE 5%	1B				
ISOLYTE-S	1B				
KCL 0.3%/D5W/NACL 0.9% (<i>potassium chloride in dextrose & sodium chloride</i>)	1B				
<i>lactated ringer's</i>	1B				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Potassium			<i>azathioprine TABS</i>	1B	
<i>potassium acetate SOLN 2 MEQ/ML</i>	1B		<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
<i>potassium bicarbonate TBEF</i>	1B		<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	
<i>potassium chloride microencapsulated crystals er</i>	1B		<i>cyclosporine CAPS</i>	1B	
<i>potassium chloride CPR</i>	1B		<i>cyclosporine SOLN IV 50 MG/ML</i>	1B	
<i>potassium chloride PACK OR 20 MEQ</i>	1B	PA	ENSPRYNG	4	PA
<i>potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML</i>	1B		<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 ea daily); SP; PA
POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>potassium chloride</i>)	1B		<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 ea daily); PA
<i>potassium chloride TBCR</i>	1B		<i>mycophenolate mofetil CAPS</i>	1B	
Sodium			<i>mycophenolate mofetil TABS</i>	1B	
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	1B		<i>mycophenolate sodium</i>	1B	
MISCELLANEOUS THERAPEUTIC CLASSES			NULOJIX	4	SP; PA
Chelating Agents			PROGRAF PACK	2	PA
<i>penicillamine CAPS</i>	1B	PA	PROGRAF SOLN	2	
<i>penicillamine TABS</i>	1B	QL(8 ea daily)	SIMULECT	3	
<i>trientine hcl 250 MG</i>	4	QL(8 ea daily); SP; PA	<i>sirolimus TABS</i>	1B	
Immunomodulators			<i>tacrolimus CAPS</i>	1B	
<i>lenalidomide 20 MG</i>	4	QL(1 ea daily); PA	THYMOGLOBULIN	4	SP; PA
<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 ea daily); SP; PA	Irrigation Solutions		
THALOMID	4	QL(3 ea daily); SP; PA	<i>irrigation solutions, physiological</i>	1B	
Immunosuppressive Agents			<i>lactated ringer's (irrigation)</i>	1B	
ATGAM	4	SP; PA	<i>ringer's irrigation</i>	1B	
AZATHIOPRINE	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	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sodium polystyrene sulfonate SUSP OR 15 GM/60ML</i>	1B		EQL PRENATAL FORMULA TABS	2	QL(1 ea daily)
MOUTH/THROAT/DENTAL AGENTS			GNP PRENATAL TABS	2	QL(1 ea daily)
Anesthetics Topical Oral			KP PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B		MASONATAL TABS	2	QL(1 ea daily)
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ml daily)	M-NATAL PLUS TABS	2	QL(1 ea daily); RX/OTC
Anti-infectives - Throat			MULTI PRENATAL TABS	2	QL(1 ea daily)
<i>clotrimazole</i>	1B		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
<i>nystatin (mouth-throat)</i>	1B		NEONATAL PLUS TABS	2	QL(1 ea daily); RX/OTC
Antiseptics - Mouth/Throat			NEONATAL PRENATAL VITAMIN TABS	2	QL(1 ea daily)
<i>chlorhexidine gluconate (mouth-throat)</i>	1B		NEONATAL VITAMIN TABS	2	QL(1 ea daily)
DEBACTEROL	2		NIVA-PLUS TABS	2	QL(1 ea daily); RX/OTC
Dental Products			ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	2	QL(1 ea daily); RX/OTC
<i>stannous fluoride CONC</i>	0	RX/OTC	ONE VITE WOMENS PRENATALVITAMIN TABS	2	QL(1 ea daily)
Steroids - Mouth/Throat/Dental			PRENATAL MULTIVITAMIN TABS	2	QL(1 ea daily)
<i>triamcinolone acetonide (mouth)</i>	1B		PRENATAL ONE DAILY TABS	2	QL(1 ea daily)
Throat Products - Misc.			PRENATAL PLUS VITAMIN ANDMINERAL TABS	2	QL(1 ea daily); RX/OTC
<i>cevimeline hcl</i>	1B		PRENATAL PLUS TABS	2	QL(1 ea daily); RX/OTC
<i>pilocarpine hcl (oral)</i>	1B		PRENATAL VITAMIN & MINERAL TABS	2	QL(1 ea daily)
MULTIVITAMINS			PRENATAL VITAMIN/IRON TABS	2	QL(1 ea daily)
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)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRENATAL VITAMINS PLUS LOW IRON TABS	2	QL(1 ea daily); RX/OTC	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 ea daily)
PRENATAL VITAMINS TABS 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)	<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)
PRENATAL VITAMIN TABS	2	QL(1 ea daily)	<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
PRENATAL TABS	2	QL(1 ea daily)	<i>orphenadrine citrate TB12</i>	1B	QL(2 ea daily)
PRENATRIX TABS	2	QL(1 ea daily); RX/OTC	<i>tizanidine hcl CAPS</i>	1B	
PRENATRYL TABS	2	QL(1 ea daily); RX/OTC	<i>tizanidine hcl TABS</i>	1B	
PX PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)	Direct Muscle Relaxants		
QC PRENATAL TABS	2	QL(1 ea daily)	<i>dantrolene sodium CAPS</i>	1B	QL(4 ea daily)
RA PRENATAL FORMULA/FOLICACID TABS	2	QL(1 ea daily)	NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
RA PRENATAL TABS	2	QL(1 ea daily)	Nasal Antiallergy		
SM PRENATAL VITAMINS TABS	2	QL(1 ea daily)	<i>azelastine hcl</i>	1B	RX/OTC
THERANATAL CORE NUTRITION TABS	2	QL(1 ea daily); RX/OTC	<i>olopatadine hcl (nasal)</i>	1B	
TRICARE TABS	2	QL(1 ea daily); RX/OTC	Nasal Anticholinergics		
VITATHELY/GINGER TABS	2	QL(1 ea daily); RX/OTC	<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ml daily)
WESTAB PLUS TABS	2	QL(1 ea daily); RX/OTC	<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms			Nasal Steroids		
Central Muscle Relaxants			<i>budesonide (nasal)</i>	1B	
<i>baclofen TABS 10 MG, 20 MG</i>	1B		<i>flunisolide (nasal) 0.025 %</i>	1B	1 package(s) per fill retail
<i>carisoprodol TABS</i>	1B		<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ml per 30 day(s) retail); RX/OTC
<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 ea daily)	<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 gm daily); PA; RX/OTC
<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 ea daily)	<i>triamcinolone acetanide (nasal) AERO</i>	1B	
			XHANCE EXHU	3	PA
			NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
			ALS Agents		

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Drug Name	Drug Tier	Requirements/Limits
<i>riluzole TABS</i>	3	
Neuromuscular Blocking Agent - Neurotoxins		
XEOMIN	3	PA
Nondepolarizing Muscle Relaxants		
<i>atracurium besylate 50 MG/5ML, 100 MG/10ML</i>	3	PA
NUTRIENTS		
Proteins		
CLINIMIX 4.25%/DEXTROSE 10%	3	
CLINIMIX 4.25%/DEXTROSE 5%	3	
CLINIMIX E 5%/DEXTROSE 20%	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
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		
<i>apraclonidine hcl</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B	
IOPIDINE	3	
Ophthalmic Anti-infectives		
<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	
<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		
<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

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Drug Name	Drug Tier	Requirements/Limits
<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-polymyx-dexameth OINT</i>	1B	
<i>neomycin-polymyx-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.		
ALOCRIAL	3	PA
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	

Drug Name	Drug Tier	Requirements/Limits
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	
OTIC AGENTS - Drugs to Treat the Ear		
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
<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		

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Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide (otic)</i>	1B	
<i>hydrocortisone w/acetic acid</i>	1B	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
GAMMAGARD LIQUID 30 GM/300ML	4	PA
GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; 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
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	
<i>amoxicillin TABS</i>	1B	
<i>ampicillin sodium IJ 1 GM</i>	1B	
<i>ampicillin CAPS 500 MG</i>	1B	
Natural Penicillins		
<i>penicillin g potassium 5000000 UNIT</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
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	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	1B	
<i>amoxicillin & pot clavulanate SUSR</i>	1B	
<i>amoxicillin & pot clavulanate TABS</i>	1B	
<i>amoxicillin & pot clavulanate TB12</i>	1B	
<i>ampicillin & sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	1B	
<i>piperacillin sodium-tazobactam sodium</i>	1B	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1B	
<i>nafcillin sodium IV 10 GM</i>	1B	
<i>oxacillin sodium IV 10 GM</i>	1B	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 10 MG</i>	1A	
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B	
<i>megestrol acetate (appetite)</i>	1B	PA

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acetate</i> TABS	0	
<i>progesterone</i> CAPS	1B	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1B	
<i>disulfiram</i>	1B	
<i>lofexidine hcl 0.18 MG</i>	1B	QL(224 ea per 14 day(s) retail); PA
LUCEMYRA 0.18 MG (<i>lofexidine hcl</i>)	3	QL(224 ea per 14 day(s) retail); PA
Antidementia Agents		
<i>donepezil hydrochloride</i> TABS 10 MG	1B	QL(2 ea daily)
<i>donepezil hydrochloride</i> TABS 5 MG, 23 MG	1B	QL(1 ea daily)
<i>donepezil hydrochloride</i> TBDP 5 MG	1B	QL(1 ea daily)
<i>donepezil hydrochloride</i> TBDP 10 MG	1B	QL(2 ea daily)
<i>galantamine hydrobromide</i> CP24	1B	QL(1 ea daily)
<i>galantamine hydrobromide</i> SOLN	1B	QL(6 ml daily)
<i>galantamine hydrobromide</i> TABS	1B	QL(2 ea daily)
<i>memantine hcl</i> TABS	1B	QL(2 ea daily)
<i>memantine hcl</i> TABS	1B	
<i>rivastigmine tartrate</i> CAPS	1B	
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline</i>	1B	
<i>perphenazine-amitriptyline</i>	1B	QL(4 ea daily)
Fibromyalgia Agents		

Drug Name	Drug Tier	Requirements/Limits
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
<i>dimethyl fumarate</i> CDPK	1B	QL(2 ea daily)
<i>dimethyl fumarate</i> CPDR	1B	QL(2 ea daily)
<i> fingolimod hcl</i>	4	QL(1 ea daily)
<i>glatiramer acetate</i> SOSY 40 MG/ML	4	QL(0.43 ml daily)
<i>glatiramer acetate</i> SOSY 20 MG/ML	4	QL(1 ml daily)

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Drug Name	Drug Tier	Requirements/Limits
LEMTRADA	4	QL(1.2 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	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 ea daily)
<i>nicotine polacrilex GUM</i>	0	
<i>nicotine polacrilex LOZG</i>	0	

Drug Name	Drug Tier	Requirements/Limits
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	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
PROLASTIN-C SOLN	4	PA
Cystic Fibrosis Agents		
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
Pulmonary Fibrosis Agents		
OFEV	4	QL(2 ea daily); PA
<i>pirfenidone CAPS</i>	4	QL(1 ea daily); PA
<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
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Fluorocyclines		
XERAVA	4	PA
Glycylcyclines		
<i>tigecycline</i>	1B	
Tetracyclines		
<i>demeclocycline hcl TABS</i>	1B	
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 ea daily)
<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)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	1B	
<i>propylthiouracil</i>	1B	
Thyroid Hormones		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<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	
TOXOIDS		
Toxoid Combinations		
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	
TETANUS/DIPHTHERIA TOXOIDS-ADSORBED ADULT SUSP	0	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<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	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B		<i>lansoprazole CPDR 30 MG</i>	1B	
<i>dicyclomine hcl CAPS</i>	1B		NEXIUM 24HR TBEC (<i>esomeprazole magnesium</i>)	1B	QL(2 ea daily)
<i>dicyclomine hcl SOLN OR</i>	1B		<i>omeprazole magnesium CPDR</i>	1B	QL(4 ea daily)
<i>dicyclomine hcl TABS</i>	1B		<i>omeprazole CPDR</i>	1B	QL(2 ea daily)
<i>glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML</i>	1B		<i>omeprazole TBEC</i>	1B	QL(2 ea daily)
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 ea daily)	<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 ea daily)
<i>glycopyrrolate TABS 1 MG</i>	1B		<i>pantoprazole sodium TBEC 40 MG</i>	1B	
<i>methscopolamine bromide</i>	1B		<i>rabeprazole sodium TBEC</i>	3	QL(1 ea daily)
H-2 Antagonists			Ulcer Drugs - Prostaglandins		
<i>cimetidine TABS</i>	1B	RX/OTC	<i>misoprostol</i>	1B	QL(4 ea daily)
<i>famotidine in nacl SOLN</i>	1B		Ulcer Therapy Combinations		
<i>famotidine SOLN 40 MG/4ML, 200 MG/20ML</i>	1B		<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>famotidine SOLN 20 MG/2ML</i>	1A		<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 ea daily); RX/OTC
<i>famotidine SUSR</i>	1B	QL(10 ml daily)	URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
<i>famotidine TABS 20 MG, 40 MG</i>	1B	RX/OTC	Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>nizatidine CAPS</i>	1B		<i>darifenacin hydrobromide</i>	1B	QL(1 ea daily)
<i>ranitidine hcl TABS 150 MG</i>	1B		<i>fesoterodine fumarate</i>	1B	QL(1 ea daily); PA
Misc. Anti-Ulcer			<i>oxybutynin chloride SOLN</i>	1B	
<i>sucralfate SUSP</i>	1B	QL(40 ml daily)	<i>oxybutynin chloride TABS 5 MG</i>	1B	
<i>sucralfate TABS</i>	1B	QL(4 ea daily)	<i>oxybutynin chloride TB24</i>	1B	
Proton Pump Inhibitors			<i>solifenacin succinate TABS</i>	1B	QL(1 ea daily); PA
<i>dexlansoprazole</i>	3	QL(1 ea daily)	<i>tolterodine tartrate CP24</i>	1B	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			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tolterodine tartrate TABS</i>	1B		AFLURIA QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>trospium chloride CP24</i>	1B	QL(1 ea daily)	AFLURIA QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>trospium chloride TABS</i>	1B	QL(3 ea daily)	AFLURIA QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
Urinary Antispasmodics - Cholinergic Agonists			AFLURIA QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>bethanechol chloride 25 MG</i>	1B		AFLURIA QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)	AREXVY	0	
Urinary Antispasmodics - Direct Muscle Relaxants			COMIRNATY 2023-24 SUSP	0	
<i>flavoxate hcl</i>	1B		COMIRNATY 2023-24 SUSY	0	
VACCINES			COMIRNATY 2024-25 SUSY 30 MCG/0.3ML	0	
Bacterial Vaccines			COMIRNATY SUSP	0	
ACTHIB SOLR IM	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
BEXSERO	0		ENGERIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
HIBERIX SOLR IJ	0		FLUAD 2024-2025	0	1 max fill(s) per 180 day(s) retail
MENACTRA	0		FLUAD QUADRIVALENT 2022-2023	0	1 max fill(s) per 180 day(s) retail
MENQUADFI	0		FLUAD QUADRIVALENT 2023-2024	0	1 max fill(s) per 180 day(s) retail
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				
VAXNEUVANCE	0	4 max fill(s) per 999 day(s) retail			
Viral Vaccines					
ABRYSVO	0				
AFLURIA 2024-2025 SUSP	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			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FLUARIX 2024-2025 SUSY	0	Limit 1 dose per season; 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
FLUARIX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 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
FLUARIX QUADRIVALENT 2023-2024 SUSY	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
FLUBLOK 2024-2025 SOSY	0	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
FLUBLOK QUADRIVALENT 2022-2023	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
FLUBLOK QUADRIVALENT 2023-2024	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
FLUCELVAX 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail	FLUZONE 2024-2025 SUSP	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX 2024-2025 SUSY	0	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 SUSP	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 2022-2023 SUSY	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 SUSP	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
			FLUZONE QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUZONE QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP 10 MCG/0.3ML	0	
FLUZONE QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	0	
FLUZONE QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	0	
GARDASIL 9 SUSP	0	3 max fill(s) per 365 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP 3 MCG/0.3ML	0	
GARDASIL 9 SUSY	0	3 max fill(s) per 365 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	0	
HAVRIX	0		PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	0	
HEPLISAV-B SOSY	0	2 max fill(s) per 292 day(s) retail; 2 max fill(s) per 292 day(s) mail	PFIZER-BIONTECH COVID-19VACCINE SUSP	0	
IPOL INACTIVATED IPV	0		PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail
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 25 MCG/0.25ML	0		RECOMBIVAX HB SUSY	0	
MODERNA COVID-19 VACCINE6MO-5Y SUSP	0		ROTARIX SUSP	0	
MODERNA COVID-19 VACCINE SUSP	0		ROTARIX SUSR	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	0		ROTATEQ SOLN	0	
			SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
			SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	0	
			SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	0	

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Drug Name	Drug Tier	Requirements/Limits
SPIKEVAX COVID-19 VACCINE/2024-25 SUSY 50 MCG/0.5ML	0	
SPIKEVAX COVID-19 VACCINE SUSP	0	
TWINRIX SUSY	0	
VAQTA	0	
VARIVAX INJ	0	2 max fill(s) per 365 day(s) retail
VAGINAL AND RELATED PRODUCTS		
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)
<i>metronidazole vaginal</i>	1B	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal SUPP</i>	1B	
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone vaginal</i>	1B	QL(15.15 gm daily)
Vaginal Contraceptive - pH Modulators		
PHEXXI	0	PV
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	1B	QL(2 gm daily)
<i>estradiol vaginal TABS</i>	1B	
ESTRING RING	3	
FEMRING	3	

Drug Name	Drug Tier	Requirements/Limits
PREMARIN	2	QL(1.5 gm daily)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
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>midodrine hcl</i>	1B	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 10 MCG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT</i>	1A	
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0	
<i>ergocalciferol CAPS</i>	0	
<i>ergocalciferol SOLN OR</i>	1B	
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		
<i>ascorbic acid SOLN IJ</i>	3	QL(0.4 ml daily)
NIACIN TR TBCR	1B	
<i>niacinamide TABS 100 MG</i>	1B	
<i>niacinamide TABS 500 MG</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits
<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>niacin TABS</i>	1A	
<i>niacin TBCR</i>	1A	

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CYLTEZO AJKT	3	darunavir TABS	30	desonide CREA	41
CYLTEZO PSKT 10 MG/0.2ML, 40 MG/0.4ML	3	dasatinib 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG	26	desonide LOTN	41
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	3	DAURISMO	24	desonide OINT	41
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	3	DEBACTEROL	56	desoximetasone CREA 0.25 %	41
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	3	decitabine	24	desoximetasone GEL	41
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT ...	3	deferasirox PACK	16	desoximetasone OINT 0.25 %	41
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT ...	3	deferasirox TABS	16	desvenlafaxine succinate 100 MG .	14
cyproheptadine hcl SYRP	18	deferasirox TBSO	17	desvenlafaxine succinate 25 MG, 50 MG	14
cyproheptadine hcl TABS	18	deflazacort SUSP	36	dexamethasone ELIX	36
CYSTAGON CAPS	47	deflazacort TABS	36	DEXAMETHASONE INTENSOL CONC	36
CYSTARAN	59	DELSTRIGO	30	dexamethasone sodium phosphate (ophth)	58
cytarabine SOLN	23	demeclocycline hcl TABS	63	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	36
dabigatran etexilate mesylate CAPS . 11		DEPO-ESTRADIOL	46	dexamethasone sodium phosphate SOSY IJ 4 MG/ML	36
dacarbazine SOLR 200 MG	27	DEPO-MEDROL SUSP	36	dexamethasone SOLN	36
dactinomycin	25	DEPO-SUBQ PROVERA 104 SUSY SC	35		
dalfampridine	61	desipramine hcl TABS	14		
danazol CAPS	7	desloratadine TABS	18		
		desloratadine TBDP 2.5 MG	18		
		desmopressin acetate SOLN IJ ...	45		

dexamethasone TABS 0.5 MG, 0.75 MG	36	diclofenac sodium (ophth)	59	MG, 240 MG	32
dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	36	diclofenac sodium (topical) GEL EX 39		diltiazem hcl CP12	32
dexchlorpheniramine maleate SOLN . 18		diclofenac sodium TB24	4	diltiazem hcl CP24	32
dexlansoprazole	64	diclofenac sodium TBEC	4	diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	32
dexmethylphenidate hcl CP24	2	diclofenac w/ misoprostol TBEC	4	diltiazem hcl extended release beads 420 MG	32
dexmethylphenidate hcl TABS	2	dicloxacillin sodium	60	diltiazem hcl SOLN 50 MG/10ML ..	33
dextroamphetamine sulfate CP24 10 MG, 15 MG	1	dicyclomine hcl CAPS	64	DILTIAZEM HCL SOLR	33
dextroamphetamine sulfate CP24 5 MG	1	dicyclomine hcl SOLN OR	64	diltiazem hcl TABS	33
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1		dicyclomine hcl TABS	64	diltiazem hcl TB24	33
dextroamphetamine sulfate TABS 5 MG, 10 MG	1	DIFFERIN LOTN	37	dimethyl fumarate CDPK	61
dextrose in lactated ringers	54	DIFICID TABS	51	dimethyl fumarate CPDR	61
DIACOMIT CAPS 250 MG	11	diflorasone diacetate CREA	41	DIPENTUM	47
DIACOMIT CAPS 500 MG	11	diflorasone diacetate OINT	41	diphenhydramine hcl CAPS 50 MG 18	
DIACOMIT PACK 250 MG	11	diflunisal TABS	5	diphenhydramine hcl ELIX 12.5 MG/5ML	18
DIACOMIT PACK 500 MG	11	difluprednate	58	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	18
diazepam (anticonvulsant) GEL ...	11	digoxin SOLN OR 0.05 MG/ML ...	33	diphenhydramine hcl SOLN 50 MG/ML	18
diazepam CONC	8	digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG	33	diphenoxylate w/ atropine LIQD ...	16
diazepam SOLN OR 5 MG/5ML	8	dihydroergotamine mesylate SOLN IJ 1 MG/ML	53	diphenoxylate w/ atropine TABS ...	16
diazepam TABS	8	dihydroergotamine mesylate SOLN NA 4 MG/ML	53	DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP ...	63
diazoxide	15	DILANTIN (phenytoin sodium extended)	12	dipyridamole	48
dichlorphenamide	43	DILANTIN	12	disopyramide phosphate CAPS	8
diclofenac epolamine PTCH EX ...	39	DILANTIN INFATABS CHEW (phenytoin)	12	disulfiram	61
diclofenac potassium TABS 50 MG .	4	DILANTIN-125 SUSP (phenytoin) .	12	DIURIL SUSP	44
diclofenac sodium (actinic keratoses) EX	39	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	32	divalproex sodium TB24	13
		diltiazem hcl coated beads CP24 180			

divalproex sodium TBEC	13	doxycycline (monohydrate) CAPS 75 MG	63	dutasteride	47
docetaxel CONC 20 MG/ML	28	doxycycline (monohydrate) TABS 100 MG	63	dutasteride-tamsulosin hcl	47
docetaxel SOLN 20 MG/2ML	28	doxycycline (monohydrate) TABS 50 MG, 75 MG	63	econazole nitrate CREA	38
docusate calcium	50	doxycycline hyclate CAPS	63	EDARBI	20
docusate sodium CAPS 100 MG ..	50	doxycycline hyclate SOLR	63	EDURANT	30
docusate sodium CAPS 250 MG ..	50	doxycycline hyclate TABS 20 MG, 100 MG	63	efavirenz CAPS 200 MG	30
dofetilide	8	doxylamine-pyridoxine TBEC	17	efavirenz CAPS 50 MG	30
donepezil hydrochloride TABS 10 MG	61	dronabinol CAPS	17	efavirenz TABS	30
donepezil hydrochloride TABS 5 MG, 23 MG	61	drospirenone-ethinyl estradiol	35	efavirenz-emtricitabine-tenofovir disoproxil fumarate	30
donepezil hydrochloride TBDP 10 MG	61	drospirenone-ethinyl estradiol-levomefolate calcium	35	efavirenz-lamivudine-tenofovir disoproxil fumarate	30
donepezil hydrochloride TBDP 5 MG 61		DROXIA CAPS	49	EGRIFTA 2 MG	44
DOPTELET	49	DUAVEE	46	EGRIFTA SV	44
dorzolamide hcl	59	DULERA	10	ELAPRASE	45
dorzolamide hcl-timolol maleate ..	58	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	14	electrolyte-148	54
DOVATO	30	duloxetine hcl CPEP 40 MG	14	electrolyte-a	54
doxazosin mesylate	20	DUPIXENT SOPN 200 MG/1.14ML 42		ELESTRIN GEL	46
doxepin hcl (antipruritic)	39	DUPIXENT SOPN 300 MG/2ML ..	42	eletriptan hydrobromide	53
doxepin hcl (sleep)	49	DUPIXENT SOSY 100 MG/0.67ML 42		ELIGARD KIT SC 7.5 MG	25
doxepin hcl CAPS	14	DUPIXENT SOSY 200 MG/1.14ML 42		ELIGARD SC 22.5 MG, 30 MG, 45 MG	25
doxepin hcl CONC	14	DUPIXENT SOSY 300 MG/2ML ..	42	ELIQUIS STARTER PACK TBPK ..	10
doxercalciferol CAPS	45	DUREX EXTRA SENSITIVE THIN DEVI	51	ELIQUIS TABS	10
doxercalciferol SOLN	45	DUREX EXTRA SENSITIVE THIN MISC	51	ELLA	35
doxorubicin hcl liposomal	25	DUREX TROPICAL MISC	51	ELMIRON CAPS	47
doxorubicin hcl SOLN	25			ELOCTATE	48
doxorubicin hcl SOLR 10 MG, 50 MG	25			EMCYT	25
doxycycline (monohydrate) CAPS 50 MG, 100 MG	63			EMFLAZA SUSP 22.75 MG/ML (deflazacort)	36
				EMGALITY SOAJ	53

EMGALITY SOSY 100 MG/ML	53	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	10	ERLEADA 60 MG	25
EMGALITY SOSY 120 MG/ML	53	ENSPRYNG	55	erlotinib hcl	24
EMSAM	13	entacapone	28	ERTACZO	38
emtricitabine CAPS	30	entecavir TABS	31	ertapenem sodium IJ	21
emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG	30	EPIDIOLEX	11	erythromycin (acne aid) PADS	37
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	30	epinastine hcl (ophth)	59	erythromycin (acne aid) SOLN	37
EMTRIVA SOLN	30	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML	68	erythromycin (ophth)	58
EMVERM CHEW	7	epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML	68	erythromycin base CPEP	51
enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20		EPIVIR HBV SOLN	31	erythromycin base TABS	51
enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20		eplerenone	21	erythromycin base TBEC	51
enalapril maleate TABS	19	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	49	erythromycin ethylsuccinate SUSR 51	
ENBREL MINI SOCT	4	epoprostenol sodium	33	erythromycin ethylsuccinate TABS	51
ENBREL SOLN	4	EQL PRENATAL FORMULA TABS	56	escitalopram oxalate SOLN	13
ENBREL SOSY 25 MG/0.5ML	4	EQUETRO 100 MG	29	escitalopram oxalate TABS 10 MG 13	
ENBREL SOSY 50 MG/ML	4	EQUETRO 200 MG	29	escitalopram oxalate TABS 20 MG 13	
ENBREL SURECLICK SOAJ	4	EQUETRO 300 MG	29	escitalopram oxalate TABS 5 MG	13
ENGERIX-B SUSP 20 MCG/ML	65	ERAXIS	17	esomeprazole magnesium CPDR 20 MG	64
ENGERIX-B SUSY	65	ERBITUX	24	esomeprazole magnesium CPDR 40 MG	64
enoxaparin sodium SOLN IJ 300 MG/3ML	10	ergocalciferol CAPS	68	esomeprazole magnesium TBEC	64
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	10	ergocalciferol SOLN OR	68	ESPEROCT	48
enoxaparin sodium SOSY 30 MG/0.3ML	10	ergoloid mesylates TABS	62	estazolam	49
enoxaparin sodium SOSY 40 MG/0.4ML	10	ERGOMAR SUBL	53	esterified estrogens & methyltestosterone	46
enoxaparin sodium SOSY 60 MG/0.6ML	10	ergotamine w/ caffeine TABS	53	estradiol & norethindrone acetate TABS	46
		eribulin mesylate	28	estradiol GEL 0.06 %	46
		ERIVEDGE	24	estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1	
		ERLEADA 240 MG	25		

MG/GM, 1.25 MG/1.25GM	46	EVOTAZ	30	fenofibrate micronized 43 MG, 130 MG	19
estradiol PTTW	46	exemestane	25	fenofibrate micronized 67 MG, 134 MG, 200 MG	19
estradiol PTWK	46	ezetimibe	19	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	19
estradiol TABS	46	ezetimibe-simvastatin	18	fenoprofen calcium TABS	4
estradiol vaginal CREA	68	famciclovir 125 MG, 250 MG	31	FENSOLVI SC	45
estradiol vaginal TABS	68	famciclovir 500 MG	31	fentanyl citrate LPOP	5
estradiol valerate	46	famotidine in nacl SOLN	64	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	5
ESTRING RING	68	famotidine SOLN 20 MG/2ML	64	ferrous fumarate-folic acid	49
ESTROGEL GEL (estradiol)	46	famotidine SOLN 40 MG/4ML, 200 MG/20ML	64	ferrous sulfate SOLN 15 MG/ML	49
eszopiclone	50	famotidine SUSR	64	ferrous sulfate TABS 65 MG, 325 MG	49
ethacrynic acid	44	famotidine TABS 20 MG, 40 MG	64	ferrous sulfate TBEC 325 MG	49
ethambutol hcl TABS	23	FANAPT	29	fesoterodine fumarate	64
ethosuximide CAPS	12	FANAPT TITRATION PACK	29	FETZIMA CP24	14
ethosuximide SOLN	12	FANTASY LUBRICATED MISC	51	FETZIMA TITRATION PACK C4PK	14
ethynodiol diacet & eth estrad	35	FANTASY LUBRICATED/SPERMICIDE MISC	51	finasteride	47
etodolac CAPS	4	FARXIGA (dapagliflozin propanediol)	16	fingolimod hcl	61
etodolac TABS	4	FARXIGA	16	FIRDAPSE	23
etonogestrel-ethinyl estradiol	35	FASENRA PEN SOAJ	9	FIRMAGON	25
ETOPOPHOS	28	FASENRA SOSY 30 MG/ML	9	flavoxate hcl	65
etoposide CAPS	28	FC2 FEMALE CONDOM	51	flecainide acetate	8
etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	28	febuxostat	48	floxuridine	24
etravirine 100 MG	30	felbamate SUSP	12	FLUAD 2024-2025	65
etravirine 200 MG	30	felbamate TABS 400 MG	12	FLUAD QUADRIVALENT 2022-2023	65
EUCRISA	42	felbamate TABS 600 MG	12	FLUAD QUADRIVALENT 2023-2024	65
EVAMIST SOLN	46	felodipine	33		
everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	55	FEMCAP DEVI	51		
everolimus (immunosuppressant) 1 MG	55	FEMRING	68		
everolimus TABS	26				

FLUARIX 2024-2025 SUSY 66	flunisolide (nasal) 0.025 % 57	flurandrenolide CREA 41
FLUARIX QUADRIVALENT 2022-2023 SUSY 66	fluocinolone acetonide (otic) 60	flurandrenolide LOTN 41
FLUARIX QUADRIVALENT 2023-2024 SUSY 66	fluocinolone acetonide CREA 0.01 % 41	flurazepam hcl 50
FLUBLOK 2024-2025 SOSY 66	fluocinolone acetonide CREA 0.025 % 41	flurbiprofen sodium 59
FLUBLOK QUADRIVALENT 2022-2023 66	fluocinolone acetonide OIL 41	flurbiprofen TABS 4
FLUBLOK QUADRIVALENT 2023-2024 66	fluocinolone acetonide OINT 41	flutamide 25
FLUCELVAX 2024-2025 SUSP ... 66	fluocinolone acetonide SOLN 41	fluticasone furoate-vilanterol 10
FLUCELVAX 2024-2025 SUSY ... 66	fluocinonide CREA 0.05 % 41	fluticasone propionate (inhalation) AEPB 9
FLUCELVAX QUADRIVALENT 2022-2023 SUSP 66	fluocinonide CREA 0.1 % 41	fluticasone propionate (nasal) SUSP . 57
FLUCELVAX QUADRIVALENT 2022-2023 SUSY 66	fluocinonide emulsified base 41	fluticasone propionate CREA 0.05 % 41
FLUCELVAX QUADRIVALENT 2023-2024 SUSP 66	fluocinonide GEL 41	fluticasone propionate hfa 9
FLUCELVAX QUADRIVALENT 2023-2024 SUSY 66	fluocinonide OINT 41	fluticasone propionate LOTN 41
FLUCELVAX QUADRIVALENT 2023-2024 SUSP 66	fluocinonide SOLN 41	fluticasone propionate OINT 41
FLUCELVAX QUADRIVALENT 2023-2024 SUSY 66	fluorometholone (ophth) SUSP 59	fluticasone-salmeterol AEPB 10
fluconazole SUSR 18	fluorouracil (topical) CREA 5 % ... 39	fluticasone-salmeterol AERO 10
fluconazole TABS 18	fluorouracil (topical) SOLN 39	fluvastatin sodium CAPS 20 MG ... 19
flucytosine 17	fluorouracil 500 MG/10ML 24	fluvastatin sodium CAPS 40 MG ... 19
fludarabine phosphate SOLN 24	fluoxetine hcl CAPS 10 MG 13	fluvoxamine maleate TABS 100 MG . 13
fludarabine phosphate SOLR 24	fluoxetine hcl CAPS 20 MG 13	fluvoxamine maleate TABS 25 MG, 50 MG 13
fludrocortisone acetate TABS 36	fluoxetine hcl CAPS 40 MG 13	FLUZONE 2024-2025 SUSP 66
FLULAVAL 2024-2025 SUSY 66	fluoxetine hcl CAPS 13	FLUZONE 2024-2025 SUSY 66
FLULAVAL QUADRIVALENT 2022-2023 SUSY 66	fluoxetine hcl CPDR 13	FLUZONE HIGH-DOSE 2024-2025 SUSY 66
FLULAVAL QUADRIVALENT 2023-2024 SUSY 66	fluoxetine hcl SOLN 13	FLUZONE HIGH-DOSE PF 2022-2023 66
FLUMIST NASAL VACCINE 2024-2025 66	fluphenazine hcl CONC 29	FLUZONE HIGH-DOSE PF 2023-2024 66
FLUMIST QUADRIVALENT 66	fluphenazine hcl ELIX 29	FLUZONE QUADRIVALENT 2022-
	fluphenazine hcl SOLN 29	
	fluphenazine hcl TABS 29	

2023 SUSP	66	DAY/SENSOR/FLASH MONITORING SYSTEM	52	GAMMAGARD LIQUID 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	60
FLUZONE QUADRIVALENT 2022-2023 SUSY	67	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	52	GAMMAGARD LIQUID 30 GM/300ML	60
FLUZONE QUADRIVALENT 2023-2024 SUSP	67	FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	52	GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	60
FLUZONE QUADRIVALENT 2023-2024 SUSY	67	FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	52	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	60
FML FORTE SUSP	59	FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	52	GAMUNEX-C	60
FML OINT	59	FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	52	ganciclovir sodium SOLR	31
folic acid TABS	49	FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	52	ganirelix acetate	44
fondaparinux sodium 10 MG/0.8ML 10		FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	52	GARDASIL 9 SUSP	67
fondaparinux sodium 2.5 MG/0.5ML . 10		frovatriptan succinate	53	GARDASIL 9 SUSY	67
fondaparinux sodium 5 MG/0.4ML . 11		fulvestrant SOSY	25	gatifloxacin (ophth)	58
fondaparinux sodium 7.5 MG/0.6ML . 10		furosemide SOLN OR 10 MG/ML, 40 MG/5ML	44	gefitinib	24
FORA GTEL BLOOD KETONE TEST STRIPS	43	furosemide TABS	44	gemcitabine hcl SOLR 2 GM, 200 MG	24
FORA TEST N' GO ADVANCE/VOICE/6 CONNECT ..	43	FUZEON SOLR	30	gemfibrozil TABS	19
formoterol fumarate NEBU	10	FYCOMPA TABS 2 MG	11	GENOTROPIN CART SC	44
FOSAMAX PLUS D	44	FYCOMPA TABS 4 MG	11	GENOTROPIN MINIQUICK PRSY 44	
fosamprenavir calcium TABS	30	FYCOMPA TABS 6 MG	11	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
fosfomycin tromethamine	22	FYCOMPA TABS 8 MG, 10 MG, 12 MG	11	gentamicin sulfate (ophth) OINT ...	58
fosinopril sodium & hydrochlorothiazide	20	gabapentin CAPS	11	gentamicin sulfate (ophth) SOLN ..	58
fosinopril sodium	19	gabapentin SOLN	11	gentamicin sulfate (topical) CREA .	38
fosphenytoin sodium	12	gabapentin TABS 600 MG, 800 MG 12		gentamicin sulfate (topical) OINT ..	38
FRAGMIN SOSY	11	galantamine hydrobromide CP24 ..	61	gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML	2
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	52	galantamine hydrobromide SOLN ..	61	GENVOYA	30
FREESTYLE LIBRE 14		galantamine hydrobromide TABS ..	61	GILOTRIF	24

glatiramer acetate SOSY 20 MG/ML . 61	granisetron hcl SOLN IV 1 MG/ML 17	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML 3
glatiramer acetate SOSY 40 MG/ML . 61	granisetron hcl TABS 17	HUMIRA PEN PNKT 80 MG/0.8ML .3
GLEOSTINE 10 MG 23	GRASTEK SUBL 2	HUMIRA PEN PNKT 3
GLEOSTINE 40 MG, 100 MG 23	griseofulvin microsize SUSP 17	HUMIRA PEN-CD/UC/HS STARTER PNKT 3
glimepiride 1 MG, 2 MG 16	griseofulvin microsize TABS 18	HUMIRA PEN-PS/UV STARTER PNKT 3
glimepiride 4 MG 16	griseofulvin ultramicrosize 18	HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT 3
glipizide TABS 5 MG, 10 MG 16	guanfacine hcl (adhd) 1	HUMIRA PEN-PS/UV STARTER PNKT 3
glipizide TB24 16	guanfacine hcl 20	HUMIRA PSKT 3
glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG 15	GYNAZOLE-1 68	HUMULIN R U-500 (CONCENTRATED) SOLN SC 16
glipizide-metformin hcl 500 MG-5 MG 15	HAEGARDA SOLR SC 48	HUMULIN R U-500 KWIKPEN SOPN SC 16
GLUCAGEN DIAGNOSTIC 42	HALAVEN (eribulin mesylate) 28	HYCAMTIN CAPS 28
glucagon (rdna) 15	halcinonide CREA 41	hydralazine hcl SOLN 21
glyburide micronized 1.5 MG, 3 MG, 6 MG 16	halobetasol propionate CREA 41	hydralazine hcl TABS 21
glyburide TABS 16	halobetasol propionate OINT 41	hydrochlorothiazide CAPS 44
glyburide-metformin 250 MG-1.25 MG 15	HALOG OINT 41	hydrochlorothiazide TABS 12.5 MG 44
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG 15	haloperidol decanoate 29	hydrochlorothiazide TABS 25 MG, 50 MG 44
glycine (gu irrigant) SOLN 1.5 % .. 47	haloperidol lactate CONC 29	hydrocodone bitartrate CP12 5
glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML 64	haloperidol lactate SOLN 29	hydrocodone bitartrate T24A 5
glycopyrrolate TABS 1 MG 64	haloperidol TABS 29	hydrocodone polistirex-chlorpheniramine polistirex SUER .37
glycopyrrolate TABS 2 MG 64	HAVRIX 67	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML 6
GLYXAMBI 15	HEALON PRO SOSY 59	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG 6
GNP PRENATAL TABS 56	HEMANGEOL SOLN OR 32	
GOHIBIC 48	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML 11	
GOJJI BLOOD KETONE TEST STRIPS 43	HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML 11	
	HEPLISAV-B SOSY 67	
	HIBERIX SOLR IJ 65	
	HUMATROPE CART IJ 44	

hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG6	hydroxychloroquine sulfate 200 MG 22	IMBRUVICA SUSP 26
hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG6	hydroxychloroquine sulfate 400 MG 22	IMBRUVICA TABS 26
hydrocodone-ibuprofen 7.5 MG-200 MG6	hydroxyurea 27	imipenem-cilastatin IV 21
hydrocortisone (intrarectal)7	hydroxyzine hcl SOLN 50 MG/ML .. 8	imipramine hcl TABS 14
hydrocortisone (rectal) EX7	hydroxyzine hcl SYRP 8	imipramine pamoate 14
hydrocortisone (topical) CREA 1 %, 2.5 % 41	hydroxyzine hcl TABS 8	imiquimod 5 % 42
hydrocortisone (topical) LOTN 2.5 % . 41	hydroxyzine pamoate CAPS 8	IMPAVIDO 21
hydrocortisone (topical) OINT 1 %, 2.5 % 41	HYPERSAL NEBU 37	INCRELEX 45
hydrocortisone acetate (rectal)7	HYQVIA 60	INCRUSE ELLIPTA 9
hydrocortisone butyrate CREA 41	ibandronate sodium SOLN 44	indapamide TABS 1.25 MG 44
hydrocortisone butyrate OINT 41	ibandronate sodium TABS 44	indapamide TABS 2.5 MG 44
hydrocortisone butyrate SOLN 41	IBRANCE CAPS 26	indomethacin CAPS 25 MG, 50 MG 4
hydrocortisone TABS 36	IBRANCE TABS 26	indomethacin CPR 4
hydrocortisone vaginal 68	ibuprofen SUSP 100 MG/5ML 4	INFANRIX 63
hydrocortisone valerate CREA 41	ibuprofen TABS 400 MG, 600 MG .. 4	INFLECTRA SOLR 47
hydrocortisone valerate OINT 41	ibuprofen TABS 800 MG 4	INGREZZA CAPS 61
hydrocortisone w/acetic acid 60	icatibant acetate SOLN 48	INGREZZA CPPK 61
hydromorphone hcl LIQD 5	icatibant acetate SOSY 48	INGREZZA CPSP 61
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML . 5	ICLUSIG 26	INLYTA 24
hydromorphone hcl TABS 5	icosapent ethyl 1 GM 18	INREBIC 26
hydromorphone hcl TB24 32 MG ... 5	idarubicin hcl 20 MG/20ML 25	INSULIN ASPART FLEXPEN SOPN . 16
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG 5	idarubicin hcl 5 MG/5ML, 10 MG/10ML 25	INSULIN ASPART PENFILL SOCT 16
hydroxychloroquine sulfate 100 MG 22	IDELVION 48	INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN 16
	ifosfamide SOLN 1 GM/20ML 23	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP 16
	ifosfamide SOLR 23	INSULIN ASPART SOLN IJ 16
	imatinib mesylate 26	INSULIN DEGLUDEC FLEXTOUCH
	IMBRUVICA CAPS 140 MG 26	
	IMBRUVICA CAPS 70 MG 26	

SOPN	16	isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	37	KETONE TEST STRIPS STRP	43
INSULIN DEGLUDEC SOLN	16	isradipine CAPS	33	ketoprofen CAPS 50 MG	4
INSULIN LISPRO SOLN IJ	16	itraconazole CAPS	18	ketorolac tromethamine (ophth) ...	59
INTELENCE 25 MG	30	itraconazole SOLN	18	ketorolac tromethamine TABS	4
IONOSOL-MB/DEXTROSE 5% ...	54	ivabradine hcl TABS	34	KETOSTIX STRP	43
IOPIDINE	58	ivermectin (pediculicide)	42	ketotifen fumarate (ophth) 0.035 %	59
IPOL INACTIVATED IPV	67	ivermectin	7	KEVZARA SOAJ	3
ipratropium bromide (nasal) 0.03 %	57	IXEMPRA KIT 15 MG	28	KEVZARA SOSY	4
ipratropium bromide (nasal) 0.06 %	57	JAKAFI	26	KIMONO COLORS DEVI	51
ipratropium bromide SOLN 0.02 % .	9	JANUMET TABS	15	KIMONO LUBRICATED MISC	51
ipratropium-albuterol SOLN	10	JANUMET XR TB24 1000 MG-100 MG	15	KIMONO MAXX/LARGE FLARE MISC	51
irbesartan	20	JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	15	KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	51
irbesartan-hydrochlorothiazide	20	JANUVIA	15	KIMONO PLUS SPERMICIDE LUBRICATED MISC	51
irinotecan hcl 40 MG/2ML, 100 MG/5ML	28	JARDIANCE	16	KIMONO PLUS SPERMICIDE LUBRICATED MISC	51
irrigation solutions, physiological ..	55	JEVTANA	28	KIMONO PLUS SPERMICIDE/LUBRICATED MISC	51
ISENTRESS CHEW	30	JIVI	48	KIMONO PS LUBRICATED MISC .	51
ISENTRESS HD TABS	30	JULUCA	30	KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	51
ISENTRESS TABS	30	JYNARQUE TBPK	45	KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	51
ISOLYTE-P/DEXTROSE 5%	54	KALYDECO TABS	62	KIMONO SENSATION LUBRICATED MISC	51
ISOLYTE-S	54	KAMELEON LUBRICATED MISC .	51	KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	51
isoniazid SOLN	23	KANJINTI	24	KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	51
isoniazid SYRP	23	KCL 0.3%/D5W/NAACL 0.9% (potassium chloride in dextrose & sodium chloride)	54	KIMONO SPECIAL DEVI	51
isoniazid TABS	23	KEPIVANCE 6.25 MG	27	KINRIX SUSY	63
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	8	ketoconazole (topical) CREA	38	KISQALI	26
isosorbide dinitrate-hydralazine hcl	33	ketoconazole (topical) SHAM 2 % .	38	KISQALI FEMARA 200 DOSE	26
isosorbide mononitrate TABS	8	ketoconazole	18		
isosorbide mononitrate TB24	8	KETONE STRP	43		

KISQALI FEMARA 400 DOSE	26	lamivudine-zidovudine	30	LEUKINE SOLR IJ	49
KISQALI FEMARA 600 DOSE	26	lamotrigine CHEW 25 MG	12	leuprolide acetate KIT IJ 1 MG/0.2ML	25
KOGENATE FS KIT	48	lamotrigine CHEW 5 MG	12	levabuterol hcl	10
KOSELUGO	26	lamotrigine TABS	12	levabuterol tartrate	10
KOVALTRY	48	lamotrigine TBDP	12	levetiracetam SOLN IV 500 MG/5ML	12
KP PRENATAL MULTIVITAMINS		LANOXIN SOLN IJ (digoxin)	33	levetiracetam TABS 1000 MG	12
TABS	56	LANOXIN TABS 62.5 MCG, 125		levetiracetam TABS 250 MG, 750	12
KRINTAFEL	22	MCG, 250 MCG (digoxin)	33	levetiracetam TABS 500 MG	12
K-Y ME & YOU EXTRA		lansoprazole CPDR 15 MG	64	levetiracetam TB24	12
LUBRICATED DEVI	51	lansoprazole CPDR 30 MG	64	levobunolol hcl 0.5 %	58
K-Y ME & YOU INTENSE DEVI	51	lanthanum carbonate CHEW	47	levocetirizine dihydrochloride SOLN	18
KYLEENA	36	lapatinib ditosylate	26	levocetirizine dihydrochloride TABS	18
KYPROLIS	26	LASTACAFT	59	levofloxacin (ophth) 0.5 %	58
labetalol hcl SOLN	32	latanoprost SOLN	59	levofloxacin in d5w 5 %-500	46
labetalol hcl TABS 100 MG, 200 MG	32	leflunomide	4	MG/100ML	46
labetalol hcl TABS 300 MG	32	LEMTRADA	62	levofloxacin SOLN OR	46
lacosamide SOLN IV 200 MG/20ML	12	lenalidomide 2.5 MG, 5 MG, 10 MG,		levofloxacin TABS 250 MG, 750 MG	46
lacosamide TABS	12	15 MG, 25 MG	55	levofloxacin TABS 500 MG	46
lactated ringer's (irrigation)	55	lenalidomide 20 MG	55	levonorgestrel & eth estradiol TABS	35
lactated ringer's	54	LENVIMA 10 MG DAILY DOSE	24	levonorgestrel (emergency oc) 1.5	35
lactic acid (ammonium lactate) CREA		LENVIMA 12MG DAILY DOSE	24	MG	
	42	LENVIMA 14 MG DAILY DOSE	24	levonorgestrel-eth estradiol	
lactic acid (ammonium lactate) LOTN		LENVIMA 18 MG DAILY DOSE	24	(triphasic)	35
12 %	42	LENVIMA 20 MG DAILY DOSE	24	levonorgestrel-ethinyl estradiol (91-	
lactulose (encephalopathy)	47	LENVIMA 24 MG DAILY DOSE	24	day) 0.03 MG-0.15 MG	35
lactulose SOLN	50	LENVIMA 4 MG DAILY DOSE	24	levonorgestrel-ethinyl estradiol	
lamivudine (hbv) TABS	31	LENVIMA 8 MG DAILY DOSE	24	(continuous)	35
lamivudine SOLN	30	letrozole	25		
lamivudine TABS 150 MG	30	leucovorin calcium SOLR	27		
lamivudine TABS 300 MG	30	leucovorin calcium TABS	27		
		LEUKERAN	23		

levonorgestrel-ethinyl estradiol-iron 35	LO LOESTRIN FE TABS 35	LUMIZYME 45
levorphanol tartrate TABS 2 MG5	lofedidine hcl 0.18 MG 61	LUPRON DEPOT (1-MONTH) KIT IM25
levothyroxine sodium TABS 63	LOKELMA 55	LUPRON DEPOT (3-MONTH) KIT IM25
LEXIVA SUSP 30	loperamide hcl CAPS 16	LUPRON DEPOT (4-MONTH) IM . 25
lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %50	lopinavir-ritonavir SOLN 30	LUPRON DEPOT (6-MONTH) IM . 25
lidocaine hcl (mouth-throat) 2 % ...56	lopinavir-ritonavir TABS30	LUPRON DEPOT-PED (1-MONTH) . 45
lidocaine hcl (mouth-throat) 4 % ...56	loratadine CAPS 18	LUPRON DEPOT-PED (3-MONTH) 11.25 MG 45
lidocaine hcl GEL 2 % 42	loratadine CHEW18	LUPRON DEPOT-PED (3-MONTH) 30 MG45
lidocaine hcl PRSY 42	loratadine SOLN 18	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG 29
lidocaine hcl SOLN 42	loratadine TABS18	lurasidone hcl 80 MG 29
lidocaine PTCH 5 % 42	loratadine TBDP 18	LYNPARZA TABS 26
lidocaine-prilocaine CREA 42	lorazepam CONC 8	LYSODREN 25
LILETTA 20.1 MCG/DAY 36	lorazepam TABS 0.5 MG, 2 MG ... 8	mafenide acetate PACK 40
lincomycin hcl 22	lorazepam TABS 1 MG 8	magnesium sulfate IJ 50 % 54
linezolid SUSR 22	LORBRENA 26	malathion 42
linezolid TABS 22	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG 20	maraviroc TABS 150 MG 30
LINZESS 47	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG . 20	maraviroc TABS 300 MG 30
liothyronine sodium SOLN 63	losartan potassium 20	MARPLAN 13
liothyronine sodium TABS 63	LOTEMAX OINT 59	MASONATAL TABS 56
lisdexamphetamine dimesylate CAPS 1	loteprednol etabonate GEL 59	MATULANE 27
lisdexamphetamine dimesylate CHEW . 1	loteprednol etabonate SUSP 59	MAXIDEX SUSP OP 59
lisinopril & hydrochlorothiazide ... 20	lovastatin TABS 10 MG, 20 MG ... 19	MAXX LUBRICATED MISC 51
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG 19	lovastatin TABS 40 MG 19	MAXX PLUS SPERMICIDE LUBRICATED MISC 51
lithium 29	loxapine succinate 29	meclizine hcl TABS 12.5 MG 17
lithium carbonate CAPS 29	lubiprostone 46	meclizine hcl TABS 25 MG 17
lithium carbonate TABS 29	LUCEMYRA 0.18 MG (lofedidine hcl) 61	
lithium carbonate TBCR 29	luliconazole 38	

meclofenamate sodium CAPS	4	meperidine hcl TABS 50 MG	5	methocarbamol TABS 500 MG, 750	
MEDROL TABS	36	meprobamate	8	MG	57
medroxyprogesterone acetate		mercaptapurine TABS	24	METHOTREXATE	3
(contraceptive) SUSP IM	36	meropenem	21	methotrexate sodium SOLN 50	
medroxyprogesterone acetate		mesalamine CP24	47	MG/2ML, 250 MG/10ML	24
(contraceptive) SUSY IM	36	mesalamine CPDR	47	methotrexate sodium SOLR	24
medroxyprogesterone acetate 10 MG		mesalamine ENEM	47	methotrexate sodium TABS 2.5 MG	
.....	60			24	
medroxyprogesterone acetate 2.5		mesalamine SUPP	47	methoxsalen rapid	39
MG, 5 MG	60	mesalamine TBEC 1.2 GM	47	methscopolamine bromide	64
mefenamic acid CAPS	4	mesalamine TBEC 800 MG	47	methsuximide	12
mefloquine hcl	23	metaxalone 800 MG	57	methyl dopa TABS	20
megestrol acetate (appetite)	60	metformin hcl TABS 1000 MG	15	methylphenidate hcl CHEW 10 MG .	2
megestrol acetate SUSP	25	metformin hcl TABS 500 MG	15	methylphenidate hcl CHEW 2.5 MG 2	
megestrol acetate TABS	25	metformin hcl TABS 850 MG	15	methylphenidate hcl CHEW 5 MG ..	2
MEKINIST SOLR	26	metformin hcl TB24 500 MG	15	methylphenidate hcl CP24 10 MG, 20	
MEKINIST TABS 0.5 MG	26	metformin hcl TB24 750 MG	15	MG, 40 MG, 60 MG	2
MEKINIST TABS 2 MG	26	methadone hcl CONC	5	methylphenidate hcl CP24 30 MG ..	2
MEKTOVI	26	methadone hcl SOLN IJ 10 MG/ML .	5	methylphenidate hcl CP24	2
meloxicam TABS	4	METHADONE HCL SOLN IJ	5	methylphenidate hcl CPCR	2
melphalan	23	methadone hcl SOLN OR 10		methylphenidate hcl SOLN	2
melphalan hcl IV	23	MG/5ML	5	methylphenidate hcl TABS 10 MG,	
memantine hcl TABS	61	methadone hcl SOLN OR 5 MG/5ML		20 MG	2
MENACTRA	65	5		methylphenidate hcl TABS 5 MG ...	2
MENEST	46	methadone hcl TABS 10 MG	5	methylphenidate hcl TB24 18 MG, 27	
MENOSTAR PTWK	46	methadone hcl TABS 5 MG	5	MG	2
MENQUADFI	65	methadone hcl TBSO	5	methylphenidate hcl TB24 36 MG, 54	
MENVEO SOLR	65	methamphetamine hcl	1	MG	2
meperidine hcl SOLN IJ 25 MG/ML,		methazolamide TABS	43	methylphenidate hcl TBCR 10 MG,	
50 MG/ML, 100 MG/ML	5	methenamine hippurate	22	20 MG	2
meperidine hcl SOLN OR 50		methimazole TABS	63	methylphenidate hcl TBCR 18 MG,	
MG/5ML	5	METHITEST TABS	7	27 MG	2
				methylphenidate hcl TBCR 36 MG,	

54 MG	2	micafungin sodium	17	MODERNA COVID-19 VACCINE6MO-5Y SUSP	67
methylphenidate PTCH	2	miconazole nitrate vaginal SUPP 200 MG	68	moexipril hcl	19
methylprednisolone acetate SUSP 36		midodrine hcl	68	mometasone furoate (nasal) SUSP 57	
methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	36	miglitol	14	mometasone furoate CREA	41
methylprednisolone TABS	36	miglustat	49	mometasone furoate OINT	41
methylprednisolone TBPK	36	minocycline hcl CAPS	63	mometasone furoate SOLN	41
metoclopramide hcl SOLN IJ 5 MG/ML	46	minocycline hcl TABS	63	montelukast sodium CHEW	9
metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML	46	minoxidil 2.5 MG, 10 MG	21	montelukast sodium PACK	9
metoclopramide hcl TABS	46	MIRCERA	49	montelukast sodium TABS	9
metolazone	44	MIRENA	36	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	5
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG	20	mirtazapine TABS 15 MG	13	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	6
metoprolol & hydrochlorothiazide TABS 25 MG-50 MG	20	mirtazapine TABS 30 MG	13	morphine sulfate SOLN OR 10 MG/5ML	6
metoprolol succinate TB24 200 MG 32		mirtazapine TABS 7.5 MG, 45 MG 13		morphine sulfate SOLN OR 20 MG/5ML	5
metoprolol succinate TB24 25 MG, 50 MG, 100 MG	32	mirtazapine TBDP 15 MG	13	morphine sulfate TABS	6
metoprolol tartrate SOLN IV 5 MG/5ML	32	mirtazapine TBDP 30 MG	13	morphine sulfate TBCR	6
metoprolol tartrate TABS 25 MG, 50 MG, 100 MG	32	mirtazapine TBDP 45 MG	13	MOTOFEN	16
metronidazole (topical) CREA	42	misoprostol	64	MOVANTIK	47
metronidazole (topical) GEL 0.75 % 42		mitomycin SOLR IV 20 MG	25	moxifloxacin hcl (ophth) SOLN OP 58	
metronidazole (topical) GEL 1 % ..	42	mitoxantrone hcl 2 MG/ML	25	moxifloxacin hcl in sodium chloride 46	
metronidazole (topical) LOTN	42	M-M-R II SOLR	67	moxifloxacin hcl TABS	46
metronidazole TABS	21	M-NATAL PLUS TABS	56	MULPLETA	49
metronidazole vaginal	68	modafinil 100 MG	2	MULTI PRENATAL TABS	56
mexiletine hcl	8	modafinil 200 MG	2	mupirocin OINT	38
		MODERNA COVID-19 VACCINE SUSP	67	MVASI	24
		MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP . 67		MYALEPT	45
		MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY 25 MCG/0.25ML	67		

mycophenolate mofetil CAPS	55	neomycin sulfate TABS	2	niacin TABS	69
mycophenolate mofetil TABS	55	neomycin-bacitracin zn-polymyxin	58	niacin TBCR	69
mycophenolate sodium	55	neomycin-polymy-dexameth OINT	59	NIACIN TR TBCR	68
MYLERAN TABS	23	neomycin-polymy-dexameth SUSP	59	niacinamide TABS 100 MG	68
nabumetone	4	neomycin-polymyxin-hc (ophth)	59	niacinamide TABS 500 MG	68
nadolol TABS 20 MG	32	neomycin-polymyxin-hc (otic) SOLN	59	nicardipine hcl CAPS	33
nadolol TABS 40 MG	32	neomycin-polymyxin-hc (otic) SUSP	59	nicardipine hcl SOLN	33
nadolol TABS 80 MG	32	NEONATAL COMPLETE TABS 120		nicotine MISC XX	62
nafcillin sodium IV 10 GM	60	MG-10 MG-9.2 MG-1000 MCG-10		nicotine polacrilex GUM	62
naftifine hcl CREA 1 %	38	MCG-12 MCG-3 MG-5 MG-20 MG-		nicotine polacrilex LOZG	62
naftifine hcl CREA 2 %	38	27 MG-200 MG-1.84 MG-25 MG-2		nicotine PT24 TD 7 MG/24HR, 14	
nalbuphine hcl	7	MG-1200 MCG-2 MG-0.2 MG	56	MG/24HR, 21 MG/24HR	62
naloxone hcl LIQD	17	NEONATAL PLUS TABS	56	NICOTINE TRANSDERMAL	
naloxone hcl SOLN 0.4 MG/ML, 4		NEONATAL PRENATAL VITAMIN		SYSTEM KIT	62
MG/10ML	17	TABS	56	NICOTROL INHALER INHA	62
naltrexone hcl	17	NEONATAL VITAMIN TABS	56	NICOTROL NS SOLN	62
naproxen sodium TABS 550 MG	4	neostigmine methylsulfate SOSY	23	nifedipine CAPS 10 MG	33
naproxen SUSP	4	NEO-SYNALAR	38	nifedipine CAPS 20 MG	33
naproxen TABS	4	NEUPRO	28	nifedipine TB24 30 MG	33
naproxen TBEC 500 MG	4	NEVANAC	59	nifedipine TB24 60 MG	33
naratriptan hcl	53	nevirapine SUSP	30	nifedipine TB24 90 MG	33
NATACYN	58	nevirapine TABS	30	nifedipine TB24	33
NATAZIA	35	nevirapine TB24 100 MG	31	nilutamide	25
nateglinide	16	nevirapine TB24 400 MG	31	nimodipine CAPS	33
NAYZILAM	11	NEXIUM 24HR TBEC (esomeprazole		NINLARO	26
nebivolol hcl 2.5 MG, 5 MG, 10 MG	32	magnesium)	64	NIPENT	27
nebivolol hcl 20 MG	32	NEXPLANON	35	nisoldipine	33
NEBUSAL NEBU	37	NEXTSTELLIS	35	nitazoxanide TABS	21
nefazodone hcl	14	niacin (antihyperlipidemic) TBCR	19	nitisinone CAPS	45
nelarabine	24	niacin CPCR 250 MG, 500 MG	69	NITRO-BID OINT	8
				nitrofurantoin	22

nitrofurantoin macrocrystal 50 MG, 100 MG	22	norgestimate-ethinyl estradiol (triphasic)	35	NUEDEXTA	62
nitrofurantoin monohyd macro	22	norgestimate-ethinyl estradiol	35	NULOJIX	55
nitroglycerin (intra-anal)	7	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	35	nystatin (mouth-throat)	56
nitroglycerin CPCR	8	NORMOSOL-M/D5W	54	nystatin (topical) CREA	38
nitroglycerin PT24	8	NORMOSOL-R	54	nystatin (topical) OINT	38
NITROGLYCERIN SOLN IV	8	nortriptyline hcl CAPS	14	nystatin (topical) POWD EX	38
nitroglycerin SUBL	8	nortriptyline hcl SOLN	14	nystatin TABS	18
NIVA-PLUS TABS	56	NORVIR CAPS	31	nystatin-triamcinolone CREA	38
nizatidine CAPS	64	NORVIR PACK	31	nystatin-triamcinolone OINT	38
NORDITROPIN FLEXPLO SOPN 30 MG/3ML	45	NORVIR SOLN	31	NYVEPRIA	49
NORDITROPIN FLEXPLO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	45	NOVA MAX PLUS KETONE TESTSTRIPS	43	octreotide acetate SOLN	45
norelgestromin-ethinyl estradiol ...	35	NOVOEIGHT	48	ODEFSEY	31
norethin acet & estrad-fe CAPS ...	35	NOVOLIN 70/30 FLEXPEN SUPN	16	ODOMZO	24
norethin acet & estrad-fe CHEW ...	35	NOVOLIN 70/30 SUSP	16	OFEV	62
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	35	NOVOLIN N FLEXPEN SUPN	16	ofloxacin (ophth)	58
norethindrone & eth estradiol	35	NOVOLIN N SUSP	16	ofloxacin (otic)	59
norethindrone & ethinyl estradiol-fe 35		NOVOLIN R FLEXPEN SOPN IJ ..	16	ofloxacin 300 MG, 400 MG	46
norethindrone (contraceptive)	36	NOVOLIN R SOLN IJ	16	OGIVRI	24
norethindrone acet & eth estra ...	35	NP THYROID 120 TABS	63	olanzapine SOLR	29
norethindrone acetate TABS	61	NP THYROID 15 TABS	63	olanzapine TABS 2.5 MG, 5 MG ..	29
norethindrone acetate-ethinyl estradiol	46	NP THYROID 30 TABS	63	olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG	29
norethindrone acetate-ethinyl estradiol-fe	35	NP THYROID 60 TABS	63	olanzapine TBDP 20 MG	29
norethindrone-eth estradiol (triphasic)	35	NP THYROID 90 TABS	63	olanzapine TBDP 5 MG, 10 MG, 15 MG	29
		NUBEQA	25	olmesartan medoxomil	20
		NUCALA SOAJ	9	olmesartan medoxomil-amlodipine- hydrochlorothiazide	20
		NUCALA SOLR	9	olmesartan medoxomil- hydrochlorothiazide	20
		NUCALA SOSY 100 MG/ML	9	olopatadine hcl (nasal)	57
		NUCALA SOSY 40 MG/0.4ML	9		

olopatadine hcl 0.1 %	59	ORKAMBI PACK	62	325 MG-2.5 MG	7
olopatadine hcl 0.2 %	59	ORKAMBI TABS	62	oxymorphone hcl TABS	6
omega-3-acid ethyl esters	18	ORLADEYO	48	oxymorphone hcl TB12 40 MG	6
omeprazole CPDR	64	orphenadrine citrate TB12	57	oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG	6
omeprazole magnesium CPDR	64	oseltamivir phosphate CAPS	32	OZEMPIC SOPN 2 MG/1.5ML	15
omeprazole TBEC	64	oseltamivir phosphate SUSR	32	OZEMPIC SOPN	15
omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG	64	OSMOPREP	50	paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML	28
OMNIFLEX DIAPHRAGM	51	OSPHENA	45	paclitaxel protein-bound particles	28
ONCASPAR	27	OTEZLA TABS	4	paliperidone 1.5 MG, 3 MG, 9 MG	29
ondansetron hcl SOLN IJ 4 MG/2ML	17	OTEZLA TBPK	4	paliperidone 6 MG	29
ondansetron hcl SOLN OR 4 MG/5ML	17	oxacillin sodium IV 10 GM	60	palonosetron hcl SOLN	17
ondansetron hcl SOSY	17	oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML	23	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	44
ondansetron hcl TABS 24 MG	17	oxandrolone	7	PAMIDRONATE DISODIUM SOLN	44
ondansetron hcl TABS 4 MG	17	oxaprozin TABS	4	PANRETIN	39
ondansetron hcl TABS 8 MG	17	oxazepam CAPS	8	pantoprazole sodium TBEC 20 MG	64
ondansetron TBP 4 MG	17	oxcarbazepine SUSP	12	pantoprazole sodium TBEC 40 MG	64
ondansetron TBP 8 MG	17	oxcarbazepine TABS 150 MG, 300 MG	12	PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	35
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	56	oxcarbazepine TABS 600 MG	12	paricalcitol CAPS	45
ONE VITE WOMENS PRENATALVITAMIN TABS	56	oxiconazole nitrate CREA	39	paricalcitol SOLN	45
ONETOUCH DELICA SAFETY LANCING DEVICE	52	OXISTAT LOTN	39	paroxetine hcl SUSP	13
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	52	oxybutynin chloride SOLN	64	paroxetine hcl TABS 10 MG	14
OPILL	36	oxybutynin chloride TABS 5 MG	64	paroxetine hcl TABS 20 MG	14
OPSUMIT	33	oxybutynin chloride TB24	64	paroxetine hcl TABS 30 MG	14
ORENITRAM TBCR	33	oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	6	paroxetine hcl TABS 40 MG	13
ORLISSA	44	oxycodone hcl TABS	6	paroxetine hcl TB24 12.5 MG	14
		oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	7		
		oxycodone w/ acetaminophen TABS			

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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 30	phenytoin sodium SOLN 12
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penicillin g sodium 60		phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG 47	pioglitazone hcl-metformin hcl TABS . 15
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PLEGRIDY SOPN	62	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML	55	PREDNISOLONE SODIUM PHOSPHATE	59
PLEGRIDY SOSY SC	62	potassium chloride TBCR	55	prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML 36	
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PNEUMOVAX 23/1 DOSE	65	PR BENZOYL PEROXIDE WASH LIQD	37	prednisone TABS 1 MG, 5 MG	36
podofilox SOLN	42	pralatrexate 20 MG/ML	24	prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG	36
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PREZISTA SUSP	31	quinapril hcl 20 MG, 40 MG	19
PREZISTA TABS 75 MG, 150 MG	31	quinapril hcl 5 MG, 10 MG	19
PRIFTIN	23	quinapril-hydrochlorothiazide 12.5 MG-10 MG	20
primaquine phosphate TABS	23	quinapril-hydrochlorothiazide 12.5 MG-20 MG	20
primidone 50 MG, 250 MG	12	quinapril-hydrochlorothiazide 25 MG- 20 MG	20
PRIORIX SUSR	67	quinidine sulfate TABS	8
PROAIR DIGIHALER	10	quinine sulfate CAPS 324 MG	23
PROAIR RESPICLICK AEPB	10	QUZYTIR SOLN IV	18
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prochlorperazine	30		
prochlorperazine maleate TABS ...	30		
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sevelamer carbonate TABS 47	sodium chloride (inhalant) NEBU 7 %37	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY 67
SHINGRIX67	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 % 55	
SIGNIFOR45	sodium citrate & citric acid 47	
sildenafil citrate (pulmonary hypertension) SOLN 34	sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG54	

SPIKEVAX COVID-19 VACCINE/2024-25 SUSY 50 MCG/0.5ML	68	sucralfate SUSP	64	sumatriptan succinate TABS	54
spinosad	42	sucralfate TABS	64	sumatriptan-naproxen sodium	53
SPIRIVA RESPIMAT AERS	9	sulconazole nitrate CREA	39	sunitinib malate 12.5 MG, 25 MG, 50 MG	27
spironolactone & hydrochlorothiazide	43	sulconazole nitrate SOLN	39	sunitinib malate 37.5 MG	27
spironolactone TABS	44	sulfacetamide sodium (acne)	37	SUNOSI 150 MG	1
SPRAVATO 56MG DOSE	13	sulfacetamide sodium (ophth) SOLN	58	SUNOSI 75 MG	1
SPRAVATO 84MG DOSE	13	sulfacetamide sodium w/ sulfur CREA 10 %-5 %	37	SYNAREL	45
SPRYCEL 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG (dasatinib)	27	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	37	SYNERA PTCH	42
stannous fluoride CONC	56	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	37	SYNJARDY TABS	15
stavudine CAPS	31	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	38	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	15
STELARA 130 MG/26ML	47	sulfacetamide sodium-prednisolone SOLN	59	SYNJARDY XR TB24 1000 MG-25 MG	15
STELARA SOLN 45 MG/0.5ML	39	sulfadiazine TABS	62	SYNRIBO	27
STELARA SOSY 45 MG/0.5ML	39	sulfamethoxazole-trimethoprim SOLN	21	SYNTHROID TABS (levothyroxine sodium)	63
STELARA SOSY 90 MG/ML	39	sulfamethoxazole-trimethoprim SUSP	21	TABLOID	24
STENDRA	33	sulfamethoxazole-trimethoprim TABS	21	TABRECTA	27
STIMATE SOLN NA	45	SULFAMILYLON CREA	40	tacrolimus (topical) OINT	42
STIOLTO RESPIMAT	10	sulfasalazine TABS	47	tacrolimus CAPS	55
STIVARGA	27	sulfasalazine TBEC	47	tadalafil (pulmonary hypertension) TABS	34
STRENSIQ	45	sulindac TABS	4	tadalafil 5 MG	33
streptomycin sulfate SOLR	2	sumatriptan	53	TAFINLAR CAPS	27
STRIBILD	31	sumatriptan succinate SOAJ	53	TAFINLAR TBSO	27
STRIVERDI RESPIMAT	10	sumatriptan succinate SOCT	53	tafluprost	59
SUBSYS LIQD 100 MCG	6	sumatriptan succinate SOLN 6 MG/0.5ML	54	TAGRISSE 40 MG	24
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	6			TAGRISSE 80 MG	24
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	6			TAKHZYRO SOLN	48
				TAKHZYRO SOSY	48

TALZENNA	27	terconazole vaginal SUPP	68	timolol maleate TABS	32
tamoxifen citrate TABS	25	teriflunomide	62	tiopronin TBEC 100 MG	48
tamsulosin hcl	47	teriparatide (recombinant) SOPN ..	44	tiopronin TBEC 300 MG	48
TASIGNA 150 MG, 200 MG	27	TESTOSTERONE CYPIONATE		tiotropium bromide monohydrate	
TASIGNA 50 MG	27	SOLN IJ 200 MG/ML	7	CAPS	9
tavorole	39	testosterone cypionate SOLN IM ...	7	TIVICAY TABS	31
TAVALISSE	48	testosterone enanthate SOLN IM ...	7	tizanidine hcl CAPS	57
tazarotene CREA	40	TETANUS/DIPHTHERIA TOXOIDS-		tizanidine hcl TABS	57
TAZVERIK	27	ADSORBED ADULT SUSP	63	tobramycin (ophth) SOLN	58
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TEFLARO	35	tetracycline hcl CAPS	63	tobramycin sulfate SOLN IJ 10	
TEGRETOL SUSP (carbamazepine) .		THALOMID	55	MG/ML, 40 MG/ML, 80 MG/2ML ...	2
12		theophylline ELIX	10	tobramycin-dexamethasone SUSP	
TEGRETOL TABS (carbamazepine) .		theophylline SOLN	10	59	
12		theophylline TB12	10	TODAY SPONGE MISC	68
telmisartan	20	theophylline TB24	10	tolcapone	28
telmisartan-amlodipine	21	THERANATAL CORE NUTRITION		tolmetin sodium CAPS	4
telmisartan-hydrochlorothiazide ..	21	TABS	57	tolmetin sodium TABS 600 MG	4
temazepam 15 MG, 30 MG	50	THIOLA EC TBEC 100 MG		TOLSURA CAPS	18
temazepam 7.5 MG, 22.5 MG	50	(tiopronin)	48	tolterodine tartrate CP24	64
TEMODAR SOLR	23	THIOLA EC TBEC 300 MG		tolterodine tartrate TABS	65
temozolomide CAPS	23	(tiopronin)	48	tolvaptan TABS	45
temsirolimus	27	thioridazine hcl	30	topiramate CPSP 15 MG	12
TENIVAC INJ	63	thiotepa 15 MG	23	topiramate CPSP 25 MG	12
tenofovir disoproxil fumarate TABS		thiothixene	30	topiramate CS24	12
31		THYMOGLOBULIN	55	topiramate TABS 200 MG	12
terazosin hcl	20	THYROGEN 0.9 MG	43	topiramate TABS 25 MG, 100 MG .	12
terbinafine hcl TABS	18	tiagabine hcl	12	topiramate TABS 50 MG	12
terbutaline sulfate SOLN	10	TIBSOVO	27	topotecan hcl SOLN	28
terbutaline sulfate TABS	10	tigecycline	63	topotecan hcl SOLR	28
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		timolol maleate (ophth) SOLN	58		

torseamide TABS	44	triamcinolone acetonide (nasal) AERO	57	TRIKAFTA TBPB	62
TRACLEER TBSO	33	triamcinolone acetonide (topical) CREA 0.025 %	41	trimethobenzamide hcl CAPS	17
tramadol hcl TABS 50 MG	6	triamcinolone acetonide (topical) CREA 0.1 %	41	trimethoprim TABS	21
tramadol hcl TB24	6	triamcinolone acetonide (topical) CREA 0.5 %	41	trimipramine maleate CAPS	14
tramadol-acetaminophen	7	triamcinolone acetonide (topical) LOTN 0.025 %	41	TRINTELLIX	14
trandolapril 1 MG, 2 MG	19	triamcinolone acetonide (topical) LOTN 0.1 %	41	TRIUMEQ TABS	31
trandolapril 4 MG	19	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	42	TRIZIVIR	31
trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	21	triamcinolone acetonide (topical) OINT 0.5 %	42	tropicamide SOLN 0.5 %	58
trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	21	triamcinolone acetonide (topical) SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML	36	tropicamide SOLN 1 %	58
tranexamic acid SOLN 1000 MG/10ML	49	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	43	tropium chloride CP24	65
tranexamic acid TABS	49	triamterene & hydrochlorothiazide TABS	43	tropium chloride TABS	65
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TRECTOR	23	trifluoperazine hcl TABS	30	TRULICITY	15
TRELEGY ELLIPTA	10	trifluridine	58	TRUMENBA	65
TRELSTAR MIXJECT	25	trihexyphenidyl hcl SOLN	28	TRUSTEX COLOR CONDOMS + LUBE MISC	51
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tretinoin CREA 0.025 %, 0.05 %, 0.1 %	38			TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	52
tretinoin GEL 0.01 %, 0.025 %	38				
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TRUXIMA24	valacyclovir hcl 500 MG31	venlafaxine hcl TB24 150 MG14
TUKYSA24	valganciclovir hcl TABS31	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG14
TURALIO27	valproate sodium SOLN OR 250 MG/5ML, 500 MG/10ML13	verapamil hcl CP24 100 MG, 200 MG, 300 MG33
TUZISTRA XR37	valproic acid CAPS13	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG33
TWINRIX SUSY68	valrubicin25	verapamil hcl SOLN 2.5 MG/ML ...33
TWIRLA35	valsartan TABS20	verapamil hcl TABS33
TYBLUME CHEW35	valsartan-hydrochlorothiazide21	verapamil hcl TBCR33
TYBOST31	VALTOCO 10 MG DOSE LIQD ...11	VEREGEN38
TYMLOS44	VALTOCO 15 MG DOSE LQPK ...11	VERZENIO27
TYVASO REFILL KIT SOLN IN ...33	VALTOCO 20 MG DOSE LQPK ...11	VICTOZA 18 MG/3ML (liraglutide) .16
TYVASO SOLN IN33	VALTOCO 5 MG DOSE LIQD11	vigabatrin PACK12
TYVASO STARTER KIT SOLN IN 33	vancomycin hcl CAPS21	vigabatrin TABS12
UBRELVY53	vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG21	VIIBRYD STARTER PACK KIT14
UDENYCA ONBODY SOSY49	vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML .21	vilazodone hcl TABS14
UDENYCA SOAJ49	VAQTA68	vincristine sulfate28
UDENYCA SOSY49	varenicline tartrate TABS62	vinorelbine tartrate 10 MG/ML28
	varenicline tartrate TBPK62	VIRACEPT TABS 250 MG31
	VARIVAX INJ68	VIRACEPT TABS 625 MG31
	VARUBI TBPK17	VIREAD POWD31
		VIREAD TABS 150 MG, 200 MG,

250 MG	31	10	25
VISTOGARD	17	XARELTO SUSR	10 XTANDI CAPS
VITAMIN D2 TABS 400 UNIT	68	XARELTO TABS 10 MG, 20 MG ..	10 XTANDI TABS 40 MG
VITATHELY/GINGER TABS	57	XARELTO TABS 2.5 MG, 15 MG ..	10 XTANDI TABS 80 MG
VITRAKVI CAPS	27	XELJANZ SOLN	3 XULTOPHY 100/3.6
VITRAKVI SOLN	27	XELJANZ TABS 10 MG	3 XYNTHA
VIZIMPRO	24	XELJANZ TABS 5 MG	3 XYNTHA SOLOFUSE
VORAXAZE	28	XELJANZ XR TB24	3 YERVOY
voriconazole TABS	18	XEOMIN	58 YONSA
VOSEVI	31	XERAIVA	63 YUFLYMA 1-PEN KIT AJKT
VYNDAMAX	34	XGEVA SOLN	44 YUFLYMA 2-PEN KIT AJKT
VYNDAQEL	34	XHANCE EXHU	57 YUFLYMA 2-SYRINGE KIT PSKT ..
warfarin sodium TABS	10	XIFAXAN 200 MG	21 YUFLYMA CD/UC/HS STARTER
water for irrigation, sterile	55	XIFAXAN 550 MG	21 AJKT
WESTAB PLUS TABS	57	XIGDUO XR (dapagliflozin	zafirlukast
WIDE-SEAL SILICONE		propanediol-metformin hcl)	15 zaleplon 10 MG
DIAPHRAGM KIT 60	52	XIGDUO XR 1000 MG-10 MG, 500	zaleplon 5 MG
WIDE-SEAL SILICONE		MG-10 MG, 500 MG-5 MG	15 ZALTRAP 100 MG/4ML
DIAPHRAGM KIT 65	52	XIGDUO XR 1000 MG-2.5 MG, 1000	ZANOSAR
WIDE-SEAL SILICONE		MG-5 MG	15 ZARONTIN CAPS (ethosuximide) .13
DIAPHRAGM KIT 70	52	XOLAIR SOAJ 150 MG/ML, 300	ZARXIO
WIDE-SEAL SILICONE		MG/2ML	9 ZEJULA CAPS
DIAPHRAGM KIT 75	52	XOLAIR SOAJ 75 MG/0.5ML	9 ZEJULA TABS 100 MG
WIDE-SEAL SILICONE		XOLAIR SOLR	9 ZEJULA TABS 200 MG, 300 MG ..
DIAPHRAGM KIT 80	52	XOLAIR SOSY 150 MG/ML, 300	ZELBORAF
WIDE-SEAL SILICONE		MG/2ML	9 ZENPEP CPEP 105000 UNIT-79000
DIAPHRAGM KIT 85	52	XOLAIR SOSY 75 MG/0.5ML	9 UNIT-25000 UNIT, 14000 UNIT-
WIDE-SEAL SILICONE		XOSPATA	27 10000 UNIT-3000 UNIT, 168000
DIAPHRAGM KIT 90	52	XPOVIO	25 UNIT-126000 UNIT-40000 UNIT,
WIDE-SEAL SILICONE		XPOVIO 60 MG TWICE WEEKLY	25 UNIT-17000 UNIT-5000 UNIT,
DIAPHRAGM KIT 95	52	25 UNIT, 63000 UNIT-47000 UNIT-	15000 UNIT, 84000 UNIT-63000
XALKORI CAPS	27	XPOVIO 80 MG TWICE WEEKLY	
XARELTO STARTER PACK TBPK			

UNIT-20000 UNIT	43
ZENPEP CPEP 252600 UNIT- 189600 UNIT-60000 UNIT	43
zidovudine CAPS	31
zidovudine SYRP	31
zidovudine TABS	31
zileuton TB12	9
ziprasidone hcl	29
ZIRABEV	24
ZIRGAN GEL	58
ZOLADEX 10.8 MG	25
ZOLADEX 3.6 MG	25
zoledronic acid CONC	44
zoledronic acid SOLN	44
ZOLINZA	27
zolmitriptan SOLN	54
zolmitriptan TABS	54
zolmitriptan TBDP	54
zolpidem tartrate TABS	50
zolpidem tartrate TBCR	50
zonisamide CAPS	12
ZONTIVITY	48
ZORBTIVE SC	45
ZYDELIG	27
ZYLET	59

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