



# Danh Mục Thuốc 2024

Có hiệu lực vào ngày 1 tháng 1 năm 2024



[Ambetter.SuperiorHealthPlan.com](https://Ambetter.SuperiorHealthPlan.com)

# Giới Thiệu về Danh Mục Thuốc

## TÓM TẮT QUYỀN LỢI DANH MỤC THUỐC

Thông tin trong tài liệu này được thiết kế để giúp quý vị hiểu được các quyền lợi về thuốc theo toa được cung cấp theo chương trình này, và so sánh các quyền lợi này với các quyền lợi mà các chương trình khác cung cấp. Thông tin trong bản tóm tắt này được thiết kế để giúp quý vị so sánh giá trị và phạm vi quyền lợi danh mục thuốc.

## HƯỚNG DẪN TÌM THÔNG TIN VỀ CHI PHÍ CỦA THUỐC THEO TOA

Để tìm chi phí thuốc theo toa, vui lòng truy cập <https://ambetter.superiorhealthplan.com/resources/pharmacy-resources.html>. Trong công cụ Chi Phí Thuốc, vui lòng chọn chương trình mà quý vị đang tham gia (dự định tham gia) và nhập loại thuốc quý vị đang dùng. Công cụ này sẽ cung cấp cho quý vị chi phí ước tính của thuốc theo toa và chi phí thực tế được phép cho các sản phẩm biệt dược. Nếu tổng chi phí thuốc nhỏ hơn khoản đồng thanh toán mà quý vị phải trả cho Bậc đó, quý vị sẽ chỉ có trách nhiệm chi trả khoản tiền nào ít hơn.

## DANH MỤC THUỐC THEO CHƯƠNG TRÌNH QUYỀN LỢI Y TẾ

Chương Trình	Danh Mục Thuốc	Tóm Tắt Quyền Lợi và Bảo Hiểm
Ambetter Virtual Access Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Ambetter Virtual Access Gold \$0 Deductible (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Ambetter Virtual Access Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Clear Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Clear Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Clear Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Clear Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Clear VALUE Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Complete Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Complete Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Complete Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Complete Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>

<b>Chương Trình</b>	<b>Danh Mục Thuốc</b>	<b>Tóm Tắt Quyền Lợi và Bảo Hiểm</b>
Complete VALUE Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Everyday Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Everyday VALUE Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Focused Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Focused Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Focused VALUE Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Gold 201 HSA (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Gold 202 (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Silver 201 HSA (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Silver 203 (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Standard Ambetter Virtual Access Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Standard Ambetter Virtual Access Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Standard Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Standard Gold (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Standard Gold VALUE (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
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Standard Silver (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>
Standard Silver VALUE (2024)	Danh Mục Thuốc Tiêu Chuẩn	<a href="https://ambetter.superiorhealthplan.com/2024-brochures.html">https://ambetter.superiorhealthplan.com/2024-brochures.html</a>

## THUỐC THEO BẬC CHIA SẼ CHI PHÍ

Bậc	Phần trăm thuốc trong mỗi bậc chia sẻ chi phí:
0	5.68%
1a	4.89%
1b	77.32%
2	1.26%
3	3.58%
4	7.27%

## THUỐC THEO TOA ĐƯỢC ĐÀI THỌ NHƯ THẾ NÀO THEO CHƯƠNG TRÌNH

### A. THÀNH PHẦN CỦA DANH MỤC THUỐC:

Danh mục thuốc của Ambetter được hướng dẫn theo nguyên tắc về cung cấp khả năng tiếp cận lớn nhất có thể với các loại thuốc ở mức chi phí thấp nhất. Với suy nghĩ đó, chúng tôi bắt đầu áp dụng thang điểm chuẩn bắt buộc của Đạo Luật Chăm Sóc Sức Khỏe Giá Cả Phải Chăng. Sau đó chúng tôi sẽ xem xét danh mục thuốc để bổ sung các loại thuốc phù hợp và cần thiết về mặt lâm sàng khác. Danh mục thuốc của Ambetter được coi là một danh mục thuốc hạn chế. Điều này có nghĩa là bất kỳ loại thuốc nào không có trong danh mục thuốc đều phải có sự ủy quyền trước. Để đảm bảo rằng các hội viên của chúng tôi có thể tiếp cận các loại thuốc thích hợp, chúng tôi xem xét và cập nhật danh mục thuốc của mình hàng tháng.

### B. QUYỀN KHÁNG CÁO

Nếu chúng tôi từ chối yêu cầu Ủy Quyền Trước của quý vị, quý vị có 180 ngày kể từ khi bị từ chối bảo hiểm cho một loại thuốc để nộp đơn kháng cáo, và kháng cáo của quý vị sẽ được giải quyết trong vòng 30 ngày. Trong trường hợp kháng cáo của quý vị thành công, các loại thuốc không chuyên khoa không thuộc danh mục thuốc sẽ được đài thọ theo mức chia sẻ chi phí Bậc 3 (đồng thanh toán hoặc đồng bảo hiểm) và các loại thuốc chuyên khoa không thuộc danh mục thuốc sẽ được đài thọ theo mức chia sẻ chi phí Bậc 4 (đồng thanh toán hoặc đồng bảo hiểm). Vui lòng tham khảo Tóm Tắt Quyền Lợi và Bảo Hiểm của cá nhân quý vị để biết thêm thông tin về mức chia sẻ chi phí của mình. Tất cả những điều khoản khác về quyền lợi của quý vị, chẳng hạn như khoản khấu trừ và số tiền tự trả tối đa, áp dụng cho các loại thuốc có trong danh mục thuốc và không có trong danh mục thuốc đã được cung cấp thông qua kháng cáo.

### C. DUY TRÌ BẢO HIỂM

Ambetter không thực hiện thay đổi đối với danh mục thuốc cần duy trì bảo hiểm. Tuy nhiên, nếu một thay đổi về danh mục thuốc yêu cầu phải duy trì bảo hiểm, quý vị sẽ có quyền tiếp tục nhận thuốc ở mức hoặc bậc bảo hiểm mà tại đó, thuốc này đã được đài thọ vào thời điểm đầu năm chương trình, cho tới khi chương trình của quý vị được gia hạn.

### D. SỬ DỤNG THUỐC KHÔNG THEO HƯỚNG DẪN TRÊN NHÃN

Chúng tôi có đài thọ cho trường hợp sử dụng thuốc không theo hướng dẫn trên nhãn. Việc sử dụng thuốc không theo hướng dẫn trên nhãn chưa được FDA chấp thuận cho tình trạng đó. Việc chi trả bảo hiểm cho một sản phẩm theo chính sách sử dụng thuốc không theo hướng dẫn trên nhãn yêu cầu những điều sau phải đúng:

- Mục đích sử dụng thuốc phải được chẩn đoán cụ thể được xác định theo mã ICD-10 VÀ
- Việc sử dụng thuốc không theo hướng dẫn trên nhãn phải được hỗ trợ bởi một nghiên cứu lớn tại nhiều địa điểm hoặc ba nghiên cứu nhỏ hơn được công bố trên tạp chí y khoa, tạp chí y chuyên khoa được bình duyệt uy tín, hoặc được liệt kê trong bản tóm tắt có uy tín.

## E. CHIA SẼ CHI PHÍ

Chia sẻ chi phí là khoản tiền quý vị cần đóng góp vào dịch vụ chăm sóc của quý vị. Quý vị sẽ cần biết một số mục để xác định mức chia sẻ chi phí mà quý vị chịu trách nhiệm thanh toán. Việc nắm được các mục dưới đây sẽ giúp quý vị ước tính chi phí mà quý vị sẽ phải chịu tại bất kỳ thời điểm nào: quý vị đã thanh toán bao nhiêu cho khoản khấu trừ, số tiền khấu trừ còn lại, loại thuốc quý vị được kê toa và khoản trợ cấp tự chi trả tối đa của quý vị. Quý vị có thể xem tất cả các mục này, ngoại trừ bậc thuốc, trong bản Tóm Tắt Quyền Lợi và Bảo Hiểm (xem các đường liên kết ở trên). Để xem bậc thuốc của quý vị, vui lòng tham khảo Danh Mục Thuốc. Để xác định mức chia sẻ chi phí của quý vị, vui lòng thực hiện theo các bước sau đây:

- a. Xác định bậc của loại thuốc/sản phẩm quý vị đang mua bằng cách tham khảo Danh Mục Thuốc.
- b. Khi quý vị đã xác định được bậc thuốc, hãy sử dụng bản Tóm Tắt Quyền Lợi và Bảo Hiểm (SBC) để xác định mức chia sẻ chi phí sẽ được áp dụng cho thuốc/sản phẩm đã chọn của quý vị.
- c. Nếu quý vị chưa đáp ứng khoản khấu trừ của mình, quý vị sẽ có trách nhiệm thanh toán toàn bộ chi phí thuốc cho đến khi quý vị đáp ứng khoản khấu trừ của mình.
- d. Nếu quý vị đã đáp ứng khoản khấu trừ nhưng chưa đáp ứng được Số Tiền Tự Trả Tối Đa, quý vị sẽ phải thanh toán một khoản đồng thanh toán cho các loại thuốc được chỉ định đồng thanh toán theo SBC của quý vị và khoản đồng bảo hiểm cho các loại thuốc được chỉ định đồng bảo hiểm theo SBC của quý vị. Thông thường, quý vị sẽ thanh toán một (1) khoản đồng thanh toán cho mỗi lượng thuốc đủ dùng trong 30 ngày. Hai khoản đồng thanh toán sẽ được tính cho lượng thuốc đủ dùng trong 2 tháng, và ba khoản đồng thanh toán sẽ được tính cho lượng thuốc đủ dùng trong 3 tháng.
- e. Để xác định chi phí cho thuốc/sản phẩm đồng bảo hiểm, vui lòng sử dụng công cụ tìm kiếm thuốc trực tuyến của chúng tôi. Vui lòng xem mục: “HƯỚNG DẪN TÌM THÔNG TIN VỀ CHI PHÍ CỦA THUỐC THEO TOA” ở trên.

Xin lưu ý rằng yêu cầu bảo hiểm nhà thuốc sẽ chỉ được xử lý nếu quý vị xuất trình toa thuốc của mình cho nhà thuốc trong hệ thống. Các yêu cầu bảo hiểm ngoài hệ thống sẽ không được đài thọ. Để tìm một nhà thuốc trong hệ thống gần quý vị, vui lòng tham khảo công cụ Tìm Nhà Cung Cấp trên trang web của chúng tôi trong mục Tài Nguyên Nhà Thuốc.

Phần chi phí chia sẻ của quý vị cho thuốc điều trị duy trì nhận được qua hình thức Đặt Mua Qua Đường Bưu Điện hoặc tại các nhà thuốc bán lẻ tham gia mạng lưới bán lẻ cung ứng Extended Day của chúng tôi sẽ được tính dựa theo lượng thuốc đủ dùng theo ngày mà quý vị nhận được. Đối với lượng thuốc đủ dùng trong 30 ngày, quý vị sẽ phải trả một (1) khoản đồng thanh toán hoặc đồng bảo hiểm, đối với lượng thuốc đủ dùng 31-60 ngày, quý vị sẽ chịu trách nhiệm thanh toán hai (2) khoản đồng thanh toán hoặc đồng bảo hiểm, và đối với lượng thuốc đủ dùng nhiều hơn 60 ngày nhưng ít hơn 91 ngày, quý vị sẽ thanh toán ba (3) khoản đồng thanh toán hoặc đồng bảo hiểm. Một số thiết kế quyền lợi có thể cung cấp khoản đồng thanh toán hoặc đồng bảo hiểm thấp hơn cho lượng thuốc đủ dùng trong 61 ngày nhưng ít hơn 91 ngày cho hình thức Đặt Mua Qua Đường Bưu Điện. Vui lòng tham khảo Tóm Tắt Quyền Lợi và Bảo Hiểm (SBC) của quý vị để biết thêm thông tin chi tiết.

## F. YÊU CẦU VỀ QUẢN LÝ Y TẾ

**Sự Ủy Quyền Trước (PA)** – Các loại thuốc có chỉ định PA trong danh mục thuốc cần có Sự Ủy Quyền Trước. Quý vị hoặc nhà cung cấp của quý vị phải yêu cầu sự ủy quyền từ chúng tôi để sử dụng thuốc/sản phẩm này trước khi mua thuốc/sản phẩm đó theo toa.

**Phương Pháp Trị Liệu Từng Bước (ST)** - Các loại thuốc có chỉ định ST trên danh mục thuốc yêu cầu quý vị phải dùng thử và không đáp ứng với các sản phẩm khác trong danh mục thuốc trước khi có thể nhận được thuốc/sản phẩm. Khi nhà cung cấp của quý vị không cảm thấy rằng việc thử dùng một sản phẩm khác là phù hợp, thì họ hoặc quý vị có thể gửi Sự Ủy Quyền Trước theo định kỳ để nhận thuốc/sản phẩm theo Phương Pháp Trị Liệu Từng Bước.

**Giới Hạn Số Lượng (QL)** – Các loại thuốc có chỉ định QL trên Danh Mục Thuốc là thuốc có hạn chế theo số lượng được chỉ định. Những giới hạn số lượng này dựa trên liều tối đa mà FDA chấp thuận. Nếu nhà cung cấp của quý vị muốn yêu cầu ngoại lệ đối với những giới hạn đó, họ có thể gửi yêu cầu để nhận Sự Ủy Quyền Trước. Tất cả các yêu cầu đối với ngoại lệ về giới hạn số lượng sẽ được xử lý theo chính sách về sử dụng thuốc Không Theo Hướng Dẫn Trên Nhãn của chúng tôi.

**Thuốc Không Thuộc Danh Mục Thuốc** – Các loại thuốc không có trong danh mục thuốc này được coi là thuốc không thuộc danh mục thuốc. Để nhận được thuốc không thuộc danh mục thuốc, nhà cung cấp của quý vị sẽ phải gửi yêu cầu thường xuyên để nhận Sự Ủy Quyền Trước. Tất cả các yêu cầu đối với Thuốc Không Thuộc Danh Mục Thuốc sẽ được xem xét theo Chính Sách về Thuốc Không Thuộc Danh Mục Thuốc của chúng tôi.

## DANH MỤC THUỐC TIÊU CHUẨN

Danh Mục Thuốc Ambetter from Superior Healthplan, hay còn gọi là Danh Sách Thuốc Theo Toa, là tài liệu hướng dẫn về các loại thuốc gốc và thuốc biệt dược hiện có đã được Cục Quản Lý Thực Phẩm và Dược Phẩm Hoa Kỳ (FDA) phê duyệt và được đài thọ thông qua quyền lợi thuốc theo toa của quý vị. Thuốc gốc có cùng thành phần hoạt chất như thuốc biệt dược và nên được coi là điều trị bước một. FDA yêu cầu thuốc gốc phải an toàn và có tác dụng giống như thuốc biệt dược. Nếu không có sẵn thuốc gốc, có thể có nhiều hơn một loại thuốc biệt dược để điều trị bệnh trạng. Thuốc biệt dược ưu tiên được liệt kê ở Bậc 2 giúp xác định các loại thuốc biệt dược là các phương án điều trị phù hợp về mặt lâm sàng, an toàn và tiết kiệm chi phí, nếu thuốc gốc trong danh mục thuốc không phù hợp với bệnh trạng của quý vị.

Xin lưu ý rằng Danh Mục Thuốc không phải là một danh sách đầy đủ các thuốc được quyền lợi thuốc theo toa của quý vị đài thọ. Không phải tất cả các dạng bào chế hoặc hàm lượng của một loại thuốc đều có thể được đài thọ. Danh sách này được đánh giá và cập nhật định kỳ và có thể thay đổi. Thuốc có thể được bổ sung hoặc xóa khỏi danh sách, hoặc yêu cầu bổ sung có thể được đưa vào để có thể phê duyệt việc tiếp tục sử dụng một loại thuốc cụ thể.

Các thiết kế chương trình quyền lợi thuốc theo toa cụ thể có thể không bao gồm một số sản phẩm hoặc danh mục nhất định, bất kể chúng xuất hiện trong tài liệu này hay không. Vui lòng kiểm tra quyền lợi của quý vị để biết các giới hạn về bảo hiểm và khoản chia sẻ chi phí cho thuốc của quý vị.

### Chú Thích Trong Danh Sách Thuốc:

Thuốc biệt dược được liệt kê bằng CHỮ IN HOA và thuốc gốc được liệt kê bằng chữ in thường.  
Các loại thuốc được đài thọ theo các bậc đồng thanh toán khác nhau tùy thuộc vào quyền lợi của quý vị:

- Bậc 0** - Không có khoản đồng thanh toán cho những loại thuốc được sử dụng cho mục đích phòng ngừa và được Đạo luật Bảo Vệ Bệnh Nhân và Chăm Sóc Sức Khỏe Giá Phải Chăng quy định. Một số loại thuốc chọn lọc bao gồm thuốc tránh thai đường uống, vitamin D, axit folic cho phụ nữ trong độ tuổi sinh đẻ, aspirin không cần toa (OTC) và các sản phẩm cai thuốc lá có thể được đài thọ theo bậc này. Có thể áp dụng một số giới hạn nhất định về độ tuổi.
- Bậc 1a**- Khoản đồng thanh toán thấp nhất dành cho một số loại thuốc chọn lọc mang lại giá trị lớn nhất so với các loại thuốc khác được sử dụng để điều trị các bệnh trạng tương tự. Một số thuốc không cần toa (OTC) chọn lọc có thể được đài thọ theo bậc này.
- Bậc 1b**- Khoản đồng thanh toán thấp dành cho những loại thuốc mang lại giá trị lớn so với các loại thuốc khác được sử dụng để điều trị các bệnh trạng tương tự. Một số thuốc không cần toa (OTC) chọn lọc có thể được đài thọ theo bậc này.
- Bậc 2** - Khoản đồng thanh toán trung bình đài thọ các loại thuốc biệt dược thường có giá cả phải chăng hơn hoặc có thể được ưu tiên hơn so với các loại thuốc khác để điều trị cho cùng bệnh trạng.
- Bậc 3** - Khoản đồng thanh toán cao đài thọ các loại thuốc biệt dược và thuốc gốc không ưu tiên có chi phí cao hơn. Bậc này cũng có thể đài thọ các loại thuốc không chuyên khoa không có trong Danh Sách Thuốc Theo Toa nhưng đã được phê duyệt bảo hiểm.
- Bậc 4** - Khoản đồng thanh toán cao nhất dành cho các loại thuốc “chuyên khoa” dùng để điều trị các bệnh trạng phức tạp, mạn tính có thể cần xử lý, bảo quản hoặc quản lý lâm sàng đặc biệt. Các thuốc theo toa được đài thọ theo bậc thuốc chuyên khoa có thể được yêu cầu mua tại nhà thuốc tham gia vào các hệ thống “chuyên khoa” hoặc “bệnh máu khó đông” của Ambetter. Để biết thêm thông tin về các nhà thuốc trong các hệ thống “chuyên khoa” hoặc “bệnh máu khó đông” của chúng tôi, vui lòng tham khảo phần thông tin nhà thuốc trên trang web của Ambetter.

## Sự Ủy Quyền Trước đối với Các Loại Thuốc Không Thuộc Danh Mục Thuốc

Để có được sự ủy quyền trước đối với một loại thuốc không thuộc danh mục thuốc, nhà cung cấp của quý vị phải điền vào mẫu đơn Ủy Quyền Trước. Pharmacy Services sẽ phản hồi qua fax hoặc điện thoại trong vòng 24 giờ kể từ khi nhận được tất cả thông tin cần thiết đối với các yêu cầu khẩn cấp và trong vòng 72 giờ đối với các yêu cầu không khẩn cấp, trừ khi luật tiểu bang yêu cầu phản hồi nhanh hơn. Nếu yêu cầu không được phê duyệt, thông báo từ chối sẽ có phần giải thích rõ ràng về các lý do cụ thể dẫn đến việc từ chối yêu cầu ủy quyền trước hoặc nếu yêu cầu không đầy đủ, phần giải thích sẽ chỉ rõ thông tin quan trọng còn thiếu cần thiết để hoàn thành yêu cầu.

### Các Từ Viết Tắt trong Danh Mục Thuốc:

Từ viết tắt	Thuật ngữ	Ý nghĩa
AL	Giới Hạn về Độ Tuổi	Một số loại thuốc chỉ được đài thọ cho một số độ tuổi nhất định.
QL	Giới Hạn Số Lượng	Một số loại thuốc chỉ được đài thọ cho một lượng nhất định.
PA	Sự Ủy Quyền Trước	Bác sĩ của quý vị phải xin Ambetter phê duyệt trước khi một số loại thuốc được đài thọ.
ST	Liệu Pháp Từng Bước	Trong một số trường hợp, quý vị trước tiên phải dùng thử một số loại thuốc nhất định trước khi Ambetter đài thọ cho một loại thuốc khác để điều trị bệnh trạng của quý vị. Ví dụ: nếu cả Thuốc A và Thuốc B đều điều trị cho bệnh trạng của quý vị, Ambetter có thể không đài thọ cho Thuốc B trừ khi quý vị dùng thử Thuốc A trước.
NF	Không thuộc danh mục thuốc	Sản phẩm này không được đài thọ trừ khi quý vị hoặc nhà cung cấp của quý vị yêu cầu một trường hợp ngoại lệ. Các loại thuốc thay thế được liệt kê bên cạnh sản phẩm không được đài thọ
RX/OTC	Thuốc Theo Toa và OTC	Những loại thuốc này được sản xuất ở cả dạng theo toa và dạng không cần toa (OTC).
SP	Thuốc Chuyên Khoa	Những sản phẩm này là Thuốc Chuyên Khoa có thể có yêu cầu đặc biệt khi mua thuốc.
SF	Chia Nhỏ Lượng Thuốc	Ban đầu, một số loại thuốc nhất định có thể chỉ được cung cấp với các lượng nhỏ đủ dùng trong 15 ngày cho đến khi tình trạng của quý vị ổn định sau khi dùng thuốc. Sau khi quý vị đã dùng thuốc được 90 ngày, hạn chế này có thể không còn được áp dụng nữa.

### Nhóm Thuốc Opioid:

Các loại thuốc được xác định trong danh mục thuốc theo yêu cầu “**Các lần mua thuốc đầu tiên được giới hạn ở lượng thuốc đủ dùng trong 7 ngày**” cho phép tối đa hai lần mua thuốc cho lượng thuốc đủ dùng trong 7 ngày trong khoảng thời gian 28 ngày bất kỳ và tối đa tổng lượng thuốc đủ dùng trong 28 ngày không liên tục trong khoảng thời gian 90 ngày bất kỳ. Giới hạn này áp dụng theo hình thức tích lũy cho tất cả các loại thuốc opioid được mua. Đối với những lần mua thuốc vượt quá các giới hạn này, nhà cung cấp của quý vị có thể gửi yêu cầu Ủy Quyền Trước.



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

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

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Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl CP24 20 MG, 40 MG</i>	1B	AL(At least 6 yrs old)
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(3 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24</i>	1B	
<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 27 MG</i>	1B	QL(1 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1B	QL(2 ea daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 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)
<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1B	QL(3 ea daily); AL(At least 6 yrs old)
<i>methylphenidate PTCH</i>	1B	QL(1 ea daily); PA
<i>modafinil 100 MG</i>	1B	QL(1 ea daily); PA
<i>modafinil 200 MG</i>	1B	QL(2 ea daily); PA
RELEXXII TBCR 27 MG	2	QL(1 ea daily); AL(At least 6 yrs old)
RELEXXII TBCR 36 MG, 54 MG	2	QL(2 ea daily); AL(At least 6 yrs old)
<b>ALLERGENIC EXTRACTS/BIOLOGICALS MISC</b>		
Allergenic Extracts		

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

Drug Name	Drug Tier	Requirements/Limits
METHOTREXATE	4	QL(1.714 ea daily); SP; PA
Anti-TNF-alpha - Monoclonal Antibodies		
ADALIMUMAB-ADAZ SOAJ	4	QL(0.086 ml daily); PA
ADALIMUMAB-ADAZ SOSY	4	QL(0.086 ml daily); PA
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	4	QL(0.215 ea daily); PA
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	4	QL(0.143 ea daily); PA
CYLTEZO AJKT	4	QL(0.215 ea daily); PA
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 ea daily); PA
CYLTEZO PSKT 10 MG/0.2ML	4	QL(0.072 ea daily); PA
HADLIMA PUSHTOUCH SOAJ	4	QL(0.086 ml daily); PA
HADLIMA PUSHTOUCH SOAJ	4	QL(0.172 ml daily); PA
HADLIMA SOSY	4	QL(0.172 ml daily); PA
HADLIMA SOSY	4	QL(0.086 ml daily); PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	4	1 rtl pack lmt amt; 180 rtl pack lmt day(s); 1 mail pack lmt amt; 180 mail pack lmt day(s); PA
HUMIRA PEN-CD/UC/HS STARTER PNKT	4	1 rtl pack lmt amt; 180 rtl pack lmt day(s); 1 mail pack lmt amt; 180 mail pack lmt day(s); PA

Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	4	1 rtl pack lmt amt; 180 rtl pack lmt day(s); 1 mail pack lmt amt; 180 mail pack lmt day(s); PA
HUMIRA PEN PNKT 80 MG/0.8ML	4	QL(0.072 ea daily); PA
HUMIRA PEN PNKT	4	QL(0.143 ea daily); PA
HUMIRA PEN-PS/UV STARTER PNKT	4	1 rtl pack lmt amt; 180 rtl pack lmt day(s); 1 mail pack lmt amt; 180 mail pack lmt day(s); PA
HUMIRA PSKT	4	QL(0.143 ea daily); PA
SIMPONI ARIA SOLN	4	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
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

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Drug Name	Drug Tier	Requirements/Limits
<i>flurbiprofen TABS</i>	1B	
<i>ibuprofen SUSP 100 MG/5ML</i>	1B	RX/OTC
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A	
<i>ibuprofen TABS 800 MG</i>	1B	
<i>indomethacin CAPS 25 MG, 50 MG</i>	1B	
<i>indomethacin CPR</i>	1B	
<i>ketoprofen CAPS 50 MG</i>	1B	
<i>ketorolac tromethamine TABS</i>	1B	QL(0.667 ea daily)
<i>meclofenamate sodium CAPS</i>	1B	
<i>mefenamic acid CAPS</i>	1B	Must try ibuprofen. ; QL(5 ea daily); ST
<i>meloxicam TABS</i>	1A	QL(1 ea daily)
<i>nabumetone</i>	1B	
<i>naproxen sodium TABS 550 MG</i>	1B	
<i>naproxen SUSP</i>	1B	PA
<i>naproxen TABS</i>	1B	
<i>naproxen TBEC 500 MG</i>	1B	QL(3 ea daily)
<i>oxaprozin TABS</i>	1B	
<i>piroxicam CAPS</i>	1B	
<i>sulindac TABS</i>	1B	
<i>tolmetin sodium CAPS</i>	1B	
<i>tolmetin sodium TABS 600 MG</i>	1B	
<b>Phosphodiesterase 4 (PDE4) Inhibitors</b>		
<i>OTEZLA TABS</i>	4	QL(2 ea daily); PA
<i>OTEZLA TBPk</i>	4	1 rtl pack lmt amt; 180 rtl pack lmt day(s); PA
<b>Pyrimidine Synthesis Inhibitors</b>		
<i>leflunomide</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<b>Soluble Tumor Necrosis Factor Receptor Agents</b>		
<i>ENBREL MINI SOCT</i>	4	QL(0.146 ml daily); PA
<i>ENBREL SURECLICK SOAJ</i>	4	QL(0.146 ml daily); PA
<i>ENBREL SOLN</i>	4	QL(0.146 ml daily); PA
<i>ENBREL SOLR</i>	4	QL(0.286 ea daily); SP; PA
<i>ENBREL SOSY 25 MG/0.5ML</i>	4	QL(0.146 ml daily); PA
<i>ENBREL SOSY 50 MG/ML</i>	4	QL(0.286 ml daily); SP; PA
<b>ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions</b>		
<b>Analgesic Combinations</b>		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 ea daily)
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 ea daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 ea daily)
<b>Salicylates</b>		
<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TABS 325 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TBEC 325 MG</i>	1A	
<i>aspirin TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>diflunisal TABS</i>	1B	
<i>salsalate</i>	1B	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions</b>					
<b>Opioid Agonists</b>					
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply	<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B	
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply	<i>methadone hcl SOLN OR 10 MG/5ML</i>	1B	QL(50 ml daily)
<i>fentanyl citrate LPOP</i>	1B	QL(4 ea daily); PA	METHADONE HCL SOLN IJ	1B	
<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 TABS 5 MG</i>	1B	QL(4 ea daily)
<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply	<i>methadone hcl TABS 10 MG</i>	1B	QL(10 ea daily)
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B		<i>methadone hcl TBSO</i>	1B	QL(2 ea daily)
<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)	<i>morphine sulfate CP24 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1B	QL(2 ea daily); PA
<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 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 TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 ea daily); PA	<i>morphine sulfate SOLN OR 10 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(100 ml daily)
<i>levorphanol tartrate TABS 2 MG</i>	1B	New starts limited to 7 day supply	<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1B	
<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B		<i>morphine sulfate TABS</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>meperidine hcl SOLN OR 50 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(500 ml per fill retail)	<i>morphine sulfate TBCR</i>	1B	QL(2 ea daily)
<i>meperidine hcl TABS 50 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)	NUCYNTA ER TB12	2	QL(2 ea daily); PA
<i>methadone hcl CONC</i>	1B	QL(10 ml daily)	NUCYNTA TABS	2	QL(6 ea daily); PA
<i>methadone hcl SOLN OR 5 MG/5ML</i>	1B	QL(100 ml daily)	<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(2 ea daily); PA
			<i>oxycodone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)
			<i>oxymorphone hcl TABS</i>	1B	QL(12 ea daily); PA
			<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1B	QL(2 ea daily); PA

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Drug Name	Drug Tier	Requirements/Limits
<i>oxymorphone hcl TB12 40 MG</i>	1B	QL(4 ea daily); PA
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	3	QL(4 ea daily); PA
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	3	QL(8 ea daily); PA
SUBSYS LIQD 100 MCG	3	QL(3 ea daily); 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)
XTAMPZA ER	2	QL(2 ea daily); PA
<b>Opioid Combinations</b>		
<i>acetaminophen w/ codeine SOLN</i>	1A	New starts limited to 7 day supply; QL(75 ml daily)
<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1A	New starts limited to 7 day supply; QL(12 ea daily)
<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(13 ea daily)
<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1B	New starts limited to 7 day supply
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1B	New starts limited to 7 day supply
<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)

Drug Name	Drug Tier	Requirements/Limits
<i>butalbital-aspirin-caffeine w/cod</i>	1B	New starts limited to 7 day supply; QL(6 ea daily)
<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>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)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 ea daily)
<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA
<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 ea daily)
<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>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 ea daily)
<b>Opioid Partial Agonists</b>		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 ea daily)
<i>buprenorphine hcl SOLN</i>	1B	
<i>buprenorphine hcl SUBL</i>	1B	QL(3 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
<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
<b>ANDROGENS-ANABOLIC - Drugs to Regulate Hormones</b>		
Anabolic Steroids		
<i>oxandrolone</i>	1B	
Androgens		
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 ea daily); PA
<i>danazol CAPS</i>	1B	
METHITEST TABS	3	
<i>testosterone cypionate SOLN IM</i>	1B	
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	1B	
<i>testosterone enanthate SOLN IM</i>	1B	
<b>ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching</b>		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	4	QL(3.2 gm daily); PA
<i>hydrocortisone (intrarectal)</i>	1B	
UCERIS ( <i>budesonide (intrarectal)</i> )	4	QL(3.2 gm daily); PA
Rectal Steroids		
<i>hydrocortisone (rectal) EX</i>	1B	RX/OTC
<i>hydrocortisone acetate (rectal)</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1B	QL(2 gm daily)
RECTIV ( <i>nitroglycerin (intra-anal)</i> )	3	QL(2 gm daily)
<b>ANTHELMINTICS - Drugs to Treat Worm Infections</b>		
Anthelmintics		
<i>albendazole</i>	1B	PA
EMVERM CHEW	2	1 rtl MAX fill; 60 rtl day(s) supply; 1 mail MAX fill; QL(2 ea daily; 6 ea per fill retail; 6 per fill mail)
<i>ivermectin</i>	1B	1 rtl MAX fill; 75 rtl day(s) supply; 1 mail MAX fill; QL(9 ea per fill retail; 9 per fill mail)
<i>praziquantel</i>	1B	PA
<b>ANTIANGINAL AGENTS - Drugs to Treat Chest Pain</b>		
Antianginals-Other		
<i>ranolazine TB12 500 MG</i>	1B	QL(3 ea daily)
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 ea daily)
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1B	
<i>isosorbide mononitrate TABS</i>	1B	
<i>isosorbide mononitrate TB24</i>	1B	
NITRO-BID OINT	3	
<i>nitroglycerin CPCR</i>	1B	QL(4 ea daily)
<i>nitroglycerin PT24</i>	1B	
NITROGLYCERIN SOLN IV	1B	

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Drug Name	Drug Tier	Requirements/Limits
<i>nitroglycerin SUBL</i>	1B	
<b>ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety</b>		
Antianxiety Agents - Misc.		
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B	
<i>buspirone hcl 5 MG</i>	1A	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1B	
<i>hydroxyzine hcl SYRP</i>	1B	
<i>hydroxyzine hcl TABS</i>	1B	
<i>hydroxyzine pamoate CAPS</i>	1B	
<i>meprobamate</i>	1B	QL(6 ea daily)
Benzodiazepines		
<i>alprazolam TABS 2 MG</i>	1B	QL(4 ea daily)
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 ea daily)
<i>alprazolam TB24</i>	1B	
<i>alprazolam TBDP</i>	1B	
<i>chlordiazepoxide hcl CAPS</i>	1B	
<i>clorazepate dipotassium TABS</i>	1B	
<i>diazepam CONC</i>	1B	
<i>diazepam SOLN OR 5 MG/5ML</i>	1B	
<i>diazepam TABS</i>	1A	QL(4 ea daily)
<i>lorazepam CONC</i>	1B	
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1A	QL(3 ea daily)
<i>lorazepam TABS 1 MG</i>	1A	QL(4 ea daily)
<i>oxazepam CAPS</i>	1B	
<b>ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms</b>		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>procainamide hcl SOLN 500 MG/ML</i>	1B	
<i>quinidine sulfate TABS</i>	1B	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1B	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1B	
<i>propafenone hcl CP12</i>	1B	
<i>propafenone hcl TABS</i>	1B	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 50 MG/ML</i>	1B	
<i>amiodarone hcl TABS</i>	1B	
<i>dofetilide</i>	1B	
<b>ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions</b>		
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	4	QL(0.036 ml daily); PA
FASENRA SOSY	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 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	4	QL(0.286 ml daily); PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1B	QL(8 ml daily)
Bronchodilators - Anticholinergics		



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ATROVENT HFA	3	QL(0.44 gm daily)	AIRDUO DIGIHALER 55/14	3	
INCRUSE ELLIPTA	2	QL(1 ea daily)	AIRSUPRA	3	
<i>ipratropium bromide SOLN 0.02 %</i>	1B	QL(15 ml daily)	<i>albuterol sulfate AERS</i>	1B	
SPIRIVA HANDIHALER CAPS ( <i>tiotropium bromide monohydrate</i> )	2	QL(1 ea daily)	<i>albuterol sulfate NEBU 0.083 %, 0.5 %, 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML</i>	1B	
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)	<i>albuterol sulfate SYRP</i>	1B	
<i>tiotropium bromide monohydrate CAPS</i>	1B	QL(1 ea daily)	<i>albuterol sulfate TABS</i>	1B	
Leukotriene Modulators			ANORO ELLIPTA	2	QL(2 ea daily)
<i>montelukast sodium CHEW</i>	1B	QL(1 ea daily)	<i>arformoterol tartrate</i>	1B	QL(4 ml daily)
<i>montelukast sodium PACK</i>	1B	QL(1 ea daily)	BREO ELLIPTA ( <i>fluticasone furoate-vilanterol</i> )	2	
<i>montelukast sodium TABS</i>	1B	QL(1 ea daily)	BREO ELLIPTA	2	
<i>zafirlukast</i>	1B	QL(2 ea daily)	BREZTRI AEROSPHERE	2	QL(0.38 gm daily)
<i>zileuton TB12</i>	1B	QL(4 ea daily)	<i>budesonide-formoterol fumarate dihydrate</i>	1B	
Selective Phosphodiesterase 4 (PDE4) Inhibitors			DULERA	2	
<i>roflumilast</i>	3	QL(1 ea daily)	<i>fluticasone furoate-vilanterol</i>	1B	
Steroid Inhalants			<i>fluticasone-salmeterol AEPB</i>	1B	
ALVESCO	3	PA	<i>fluticasone-salmeterol AERO</i>	1B	
ARNUITY ELLIPTA	2		<i>formoterol fumarate NEBU</i>	1B	QL(4 ml daily)
<i>budesonide (inhalation) SUSP</i>	1B	QL(4 ml daily); PA	<i>ipratropium-albuterol SOLN</i>	1B	QL(18 ml daily)
<i>fluticasone propionate (inhalation) AEPB</i>	1B		<i>levalbuterol hcl</i>	1B	
<i>fluticasone propionate hfa</i>	1B	QL(0.8 gm daily)	<i>levalbuterol tartrate</i>	1B	QL(0.5 gm daily)
PULMICORT FLEXHALER AEPB	2		PROAIR DIGIHALER	3	
QVAR REDIHALER	2		PROAIR RESPICLICK AEPB	3	
Sympathomimetics			SEREVENT DISKUS	2	
AIRDUO DIGIHALER 113/14	3		STIOLTO RESPIMAT	2	
AIRDUO DIGIHALER 232/14	3		STRIVERDI RESPIMAT	2	
			<i>terbutaline sulfate SOLN</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>terbutaline sulfate</i> TABS	1B		<i>enoxaparin sodium</i> SOSY 60 MG/0.6ML	4	QL(1.2 ml daily; 30 Day(s) limit); SP
TRELEGY ELLIPTA	2	QL(2 ea daily)	<i>enoxaparin sodium</i> SOSY 40 MG/0.4ML	4	QL(0.8 ml daily; 30 Day(s) limit); SP
<b>Xanthines</b>			<i>fondaparinux sodium</i> 5 MG/0.4ML	4	QL(3.6 ml per 180 days retail; 4 ml per 180 days mail); SP
<i>aminophylline</i> SOLN	1B		<i>fondaparinux sodium</i> 2.5 MG/0.5ML	4	QL(4.5 ml per 180 days retail; 4 ml per 180 days mail); SP
<i>theophylline</i> ELIX	1B		<i>fondaparinux sodium</i> 7.5 MG/0.6ML	4	QL(5.4 ml per 180 days retail; 5 ml per 180 days mail); SP
<i>theophylline</i> SOLN	1B	QL(56 ml daily)	<i>fondaparinux sodium</i> 10 MG/0.8ML	4	QL(7.2 ml per 180 days retail; 7 ml per 180 days mail); SP
<i>theophylline</i> TB12	1B		FRAGMIN SOSY	4	SP; PA
<i>theophylline</i> TB24	1B		<i>heparin sodium (porcine)</i> SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	1B	
<b>ANTICOAGULANTS - Blood Thinners</b>			HEPARIN SODIUM/NAACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML	1B	
<b>Coumarin Anticoagulants</b>			<b>Thrombin Inhibitors</b>		
<i>warfarin sodium</i> TABS	1B		<i>dabigatran etexilate mesylate</i> CAPS	1B	
<b>Direct Factor Xa Inhibitors</b>			<b>ANTICONVULSANTS - Drugs to Treat Seizures</b>		
ELIQUIS STARTER PACK TBPK	2	1 rtl MAX fill; 180 rtl day(s) supply; QL(2.47 ea daily)	<b>AMPA Glutamate Receptor Antagonists</b>		
ELIQUIS TABS	2	QL(2 ea daily)	FYCOMPA TABS 6 MG	3	QL(2 ea daily); PA
XARELTO STARTER PACK TBPK	2	1 rtl MAX fill; 365 rtl day(s) supply	FYCOMPA TABS 8 MG, 10 MG, 12 MG	3	QL(1 ea daily); PA
XARELTO SUSR	2	QL(900 ml per 30 days retail; 900 ml per 30 days mail)	FYCOMPA TABS 2 MG	3	QL(6 ea daily); PA
XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)	FYCOMPA TABS 4 MG	3	QL(3 ea daily); PA
XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)	<b>Anticonvulsants - Benzodiazepines</b>		
<b>Heparins And Heparinoid-Like Agents</b>					
<i>enoxaparin sodium</i> SOLN IJ 300 MG/3ML	4	QL(6 ml daily)			
<i>enoxaparin sodium</i> SOSY 100 MG/ML, 150 MG/ML	4	QL(2 ml daily)			
<i>enoxaparin sodium</i> SOSY 30 MG/0.3ML	4	QL(0.6 ml daily); SP			
<i>enoxaparin sodium</i> SOSY 80 MG/0.8ML, 120 MG/0.8ML	4	QL(1.6 ml daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clobazam SUSP</i>	1B	QL(16 ml daily); PA	<i>carbamazepine TABS</i>	1B	
<i>clobazam TABS</i>	1B	QL(2 ea daily); PA	<i>carbamazepine TB12 200 MG</i>	1B	QL(6 ea daily)
<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 rtl pack lmt amt; 30 rtl pack lmt day(s); 5 rtl pack lmt per fill; 30 mail pack lmt amt	DIACOMIT CAPS 500 MG	4	QL(6 ea daily); PA
NAYZILAM	3	QL(10 ea per 30 days retail); PA	DIACOMIT CAPS 250 MG	4	QL(12 ea daily); PA
VALTOCO 10 MG DOSE LIQD	4	QL(10 ea per 30 days retail); PA	DIACOMIT PACK 250 MG	4	QL(12 ea daily); PA
VALTOCO 15 MG DOSE LQPK	4	QL(10 ea per 30 days retail); PA	DIACOMIT PACK 500 MG	4	QL(6 ea daily); PA
VALTOCO 20 MG DOSE LQPK	4	QL(10 ea per 30 days retail); PA	EPIDIOLEX	3	PA
VALTOCO 5 MG DOSE LIQD	4	QL(10 ea per 30 days retail); PA	<i>gabapentin CAPS</i>	1B	
Anticonvulsants - Misc.			<i>gabapentin SOLN</i>	1B	QL(60 ml daily)
APTIOM	3	QL(2 ea daily); ST	<i>gabapentin TABS 600 MG, 800 MG</i>	1B	
BANZEL TABS 200 MG ( <i>rufinamide</i> )	2	QL(2 ea daily); PA	<i>lacosamide SOLN OR</i>	1B	QL(40 ml daily)
BANZEL TABS 400 MG ( <i>rufinamide</i> )	2	QL(8 ea daily); PA	<i>lacosamide TABS</i>	1B	QL(2 ea daily)
BRIVIACT SOLN OR 10 MG/ML	3	QL(20 ml daily); PA	<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 ea daily)
BRIVIACT TABS	3	QL(2 ea daily); PA	<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 ea daily)
<i>carbamazepine CHEW</i>	1B		<i>lamotrigine TABS</i>	1B	
<i>carbamazepine CP12 300 MG</i>	1B	QL(4 ea daily)	<i>lamotrigine TBDP</i>	1B	QL(1 ea daily)
<i>carbamazepine CP12 100 MG</i>	1B		<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ml daily)
<i>carbamazepine CP12 200 MG</i>	1B	QL(6 ea daily)	<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 ea daily)
<i>carbamazepine SUSP</i>	1B		<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 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 225 MG, 300 MG</i>	3	QL(2 ea daily); PA

Drug Name	Drug Tier	Requirements/Limits
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 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 400 MG</i>	1B	QL(8 ea daily); PA
<i>rufinamide TABS 200 MG</i>	1B	QL(2 ea daily); PA
<i>TEGRETOL SUSP (carbamazepine)</i>	2	
<i>TEGRETOL TABS (carbamazepine)</i>	2	
<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 50 MG</i>	1B	QL(6 ea daily)
<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>zonisamide CAPS</i>	1B	QL(6 ea daily)
<b>Carbamates</b>		
<i>felbamate SUSP</i>	1B	QL(30 ml daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 ea daily)
<i>felbamate TABS 600 MG</i>	1B	QL(6 ea daily)
<b>GABA Modulators</b>		
<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
<b>Hydantoins</b>		
<i>DILANTIN</i>	2	
<i>DILANTIN (phenytoin sodium extended)</i>	2	
<i>DILANTIN INFATABS CHEW (phenytoin)</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl TB12 200 MG</i>	1B	QL(2 ea daily)	<i>fluoxetine hcl CAPS 10 MG</i>	1A	QL(1 ea daily)
<i>bupropion hcl TB12 150 MG</i>	1B	QL(3 ea daily)	<i>fluoxetine hcl CPDR</i>	1B	
<i>bupropion hcl TB24 300 MG</i>	1B	QL(1 ea daily)	<i>fluoxetine hcl SOLN</i>	1B	QL(20 ml daily)
<i>bupropion hcl TB24 150 MG</i>	1B	QL(3 ea daily)	<i>fluoxetine hcl TABS 20 MG</i>	1B	QL(3 ea daily)
<b>Monoamine Oxidase Inhibitors (MAOIs)</b>			<i>fluoxetine hcl TABS 10 MG, 60 MG</i>	1B	QL(1 ea daily)
EMSAM	3	QL(1 ea daily)	<i>fluvoxamine maleate TABS 100 MG</i>	1B	QL(3 ea daily)
MARPLAN	2	QL(6 ea daily)	<i>fluvoxamine maleate TABS 25 MG, 50 MG</i>	1B	QL(2 ea daily)
<i>phenelzine sulfate</i>	1B		<i>paroxetine hcl SUSP</i>	1B	QL(30 ml daily)
<i>tranylcypromine sulfate</i>	1B		<i>paroxetine hcl TABS 20 MG</i>	1B	QL(3 ea daily)
<b>N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists</b>			<i>paroxetine hcl TABS 30 MG</i>	1B	QL(2 ea daily)
SPRAVATO 56MG DOSE	4	PA	<i>paroxetine hcl TABS 10 MG</i>	1B	QL(6 ea daily)
SPRAVATO 84MG DOSE	4	PA	<i>paroxetine hcl TABS 40 MG</i>	1B	QL(1 ea daily)
<b>Selective Serotonin Reuptake Inhibitors (SSRIs)</b>			<i>paroxetine hcl TB24 25 MG, 37.5 MG</i>	1B	QL(2 ea daily)
<i>citalopram hydrobromide SOLN</i>	1B	QL(20 ml daily)	<i>paroxetine hcl TB24 12.5 MG</i>	1B	QL(1 ea daily)
<i>citalopram hydrobromide TABS 40 MG</i>	1B	QL(1 ea daily)	<i>sertraline hcl CONC</i>	1B	QL(10 ml daily)
<i>citalopram hydrobromide TABS 20 MG</i>	1B	QL(2 ea daily)	<i>sertraline hcl TABS 25 MG, 50 MG</i>	1B	QL(4 ea daily)
<i>citalopram hydrobromide TABS 10 MG</i>	1B	QL(4 ea daily)	<i>sertraline hcl TABS 100 MG</i>	1B	QL(2 ea daily)
<i>escitalopram oxalate SOLN</i>	1B	QL(20 ml daily)	<b>Serotonin Modulators</b>		
<i>escitalopram oxalate TABS 20 MG</i>	1B	QL(1 ea daily)	<i>nefazodone hcl</i>	1B	
<i>escitalopram oxalate TABS 5 MG</i>	1B	QL(4 ea daily)	<i>trazodone hcl TABS</i>	1B	
<i>escitalopram oxalate TABS 10 MG</i>	1B	QL(2 ea daily)	TRINTELLIX	3	QL(1 ea daily); PA
<i>fluoxetine hcl CAPS 20 MG</i>	1B	QL(3 ea daily)	VIIBRYD STARTER PACK KIT	3	1 rtl pack lmt amt; 180 rtl pack lmt day(s); 1 mail pack lmt amt; 180 mail pack lmt day(s)
<i>fluoxetine hcl CAPS 40 MG</i>	1B	QL(2 ea daily)			

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Drug Name	Drug Tier	Requirements/Limits
<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 20 MG, 30 MG, 60 MG</i>	1B	QL(2 ea daily)
<i>duloxetine hcl CPEP 40 MG</i>	1B	
FETZIMA TITRATION PACK C4PK	3	PA
FETZIMA CP24	3	QL(1 ea daily); PA
<i>venlafaxine hcl CP24 150 MG</i>	1B	QL(2 ea daily)
<i>venlafaxine hcl CP24 37.5 MG</i>	1B	QL(4 ea daily)
<i>venlafaxine hcl CP24 75 MG</i>	1B	QL(5 ea daily)
<i>venlafaxine hcl TABS</i>	1B	QL(3 ea daily)
<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	1B	QL(1 ea daily)
<i>venlafaxine hcl TB24 150 MG</i>	1B	QL(2 ea daily)
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	

Drug Name	Drug Tier	Requirements/Limits
<i>trimipramine maleate CAPS</i>	1B	
<b>ANTIDIABETICS - Drugs to Regulate Blood Sugar</b>		
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 15 MG-12.5 MG, 30 MG-12.5 MG, 45 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>glipizide-metformin hcl 500 MG-5 MG</i>	1B	QL(4 ea daily)
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1B	QL(2 ea daily)
<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1B	QL(4 ea daily)
<i>glyburide-metformin 250 MG-1.25 MG</i>	1B	QL(2 ea daily)
GLYXAMBI	2	QL(1 ea daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 ea daily)
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 ea daily)
JANUMET TABS	2	QL(2 ea daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 ea daily)
<i>pioglitazone hcl-metformin hcl TABS</i>	1B	QL(2 ea daily)
<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1B	QL(2 ea daily)
<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
SOLIQUA 100/33	2	QL(0.5 ml daily); PA
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 ea daily)
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 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)
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)
XULTOPHY 100/3.6	2	QL(0.5 ml daily); PA
<b>Biguanides</b>		
<i>metformin hcl TABS 850 MG</i>	0	QL(3 ea daily)
<i>metformin hcl TABS 1000 MG</i>	1B	QL(2.5 ea daily)
<i>metformin hcl TABS 500 MG</i>	1B	QL(5 ea daily)
<i>metformin hcl TB24 500 MG</i>	1B	QL(4 ea daily)
<i>metformin hcl TB24 750 MG</i>	1B	QL(3 ea daily)
<b>Diabetic Other</b>		
<i>diazoxide</i>	3	
<i>glucagon (rdna)</i>	1B	QL(0.035 ea daily)
<b>Dipeptidyl Peptidase-4 (DPP-4) Inhibitors</b>		
<i>alogliptin benzoate</i>	1B	QL(1 ea daily)
JANUVIA	2	QL(1 ea daily)
<i>saxagliptin hcl</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<b>Incretin Mimetic Agents</b>		
OZEMPIC SOPN	2	QL(0.108 ml daily); PA
OZEMPIC SOPN 2 MG/1.5ML	2	QL(0.054 ml daily); PA
RYBELSUS TABS	2	QL(1 ea daily); PA
TRULICITY	2	QL(0.143 ml daily); PA
VICTOZA	2	QL(0.3 ml daily); PA
<b>Insulin</b>		
APIDRA SOLOSTAR SOPN	3	PA
APIDRA SOLN	3	PA
BASAGLAR KWIKPEN SOPN	2	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ml daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ml daily)
INSULIN ASPART FLEXPEN SOPN	1B	
INSULIN ASPART PENFILL SOCT	1B	
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	1B	
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	1B	
INSULIN ASPART SOLN IJ	1B	
INSULIN DEGLUDEC FLEXTOUCH SOPN	2	
INSULIN DEGLUDEC SOLN	2	
LEVEMIR FLEXPEN SOPN	3	PA
LEVEMIR FLEXTOUCH SOPN	3	PA
LEVEMIR SOLN	3	PA

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

Drug Name	Drug Tier	Requirements/Limits
MOTOFEN	3	
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA
<i>deferiprone TABS 500 MG</i>	1B	
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Opioid Antagonists		
<i>naloxone hcl LIQD</i>	1B	2 rti MAX fill; 30 rti day(s) supply; QL(2 ea per fill retail); RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1B	
<i>naltrexone hcl</i>	1B	
<b>ANTIEMETICS - Drugs to Treat Nausea and Vomiting</b>		
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 24 MG</i>	1B	QL(0.143 ea daily)
<i>ondansetron hcl TABS 4 MG</i>	1B	QL(4 ea daily; 60 ea per fill retail; 60 per fill mail)

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Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 ea daily; 45 ea per fill retail; 45 per fill mail)
<i>ondansetron TBDP 8 MG</i>	1B	
<i>ondansetron TBDP 4 MG</i>	1B	QL(1 ea daily)
<i>palonosetron hcl SOLN</i>	1B	
<b>Antiemetics - Anticholinergic</b>		
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 ea daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
<b>Antiemetics - Miscellaneous</b>		
AKYNZEO	3	PA
<i>doxylamine-pyridoxine TBEC</i>	1B	3 rti MAX fill; 365 rti day(s) supply; 3 mail MAX fill; QL(4 ea daily); PA
<i>dronabinol CAPS</i>	1B	
<b>Substance P/Neurokinin 1 (NK1) Receptor Antagonists</b>		
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 ea daily)
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 ea daily)
<i>aprepitant CAPS</i>	1B	PA
<i>aprepitant MISC</i>	1B	PA
VARUBI TBPB	3	PA
<b>ANTIFUNGALS - Drugs to Treat Fungal Infections</b>		
<b>Antifungal - Glucan Synthesis Inhibitors</b>		
<i>caspofungin acetate</i>	1B	
ERAXIS	3	
<i>miconazole sodium</i>	1B	PA
<b>Antifungals</b>		

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

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

Drug Name	Drug Tier	Requirements/Limits
<i>ezetimibe-simvastatin</i>	1B	QL(1 ea daily)
<b>Antihyperlipidemics - Misc.</b>		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 ea daily); PA
<i>omega-3-acid ethyl esters</i>	1B	QL(4 ea daily)
<b>Bile Acid Sequestrants</b>		
<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)
<b>Fibric Acid Derivatives</b>		
<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 TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	QL(1 ea daily)
<i>gemfibrozil TABS</i>	1B	QL(2 ea daily)
<b>HMG CoA Reductase Inhibitors</b>		
<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 10 MG, 20 MG</i>	1B	\$0 copay for generic only, age 40 to 76; QL(1 ea daily); PV

Drug Name	Drug Tier	Requirements/Limits
<i>lovastatin TABS 40 MG</i>	1B	\$0 copay for generic only, age 40 to 76; QL(2 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		
<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
<b>ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure</b>		
ACE Inhibitors		
<i>benazepril hcl</i>	1B	
<i>captopril 12.5 MG</i>	1B	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 ea daily)
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 ea daily)
<i>quinapril hcl 20 MG, 40 MG</i>	1B	
<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		
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	1B	QL(1 ea daily)
EDARBI	3	QL(1 ea daily); ST
<i>irbesartan</i>	1B	QL(1 ea daily)
<i>losartan potassium</i>	1B	QL(1 ea daily)
<i>olmesartan medoxomil</i>	1B	QL(1 ea daily)
<i>telmisartan</i>	1B	QL(1 ea daily)
<i>valsartan TABS</i>	1B	QL(1 ea daily)
Antiadrenergic Antihypertensives		
<i>clonidine</i>	3	QL(0.15 ea daily)
<i>clonidine hcl TABS</i>	1B	QL(8 ea daily)
<i>doxazosin mesylate</i>	1B	
<i>guanfacine hcl</i>	1B	
<i>methyldopa TABS</i>	1B	QL(6 ea daily)
<i>prazosin hcl CAPS</i>	1B	QL(4 ea daily)
<i>terazosin hcl</i>	1B	
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-valsartan-hydrochlorothiazide</i>	3	
<i>atenolol &amp; chlorthalidone</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits
<i>benazepril &amp; hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 ea daily)
<i>benazepril &amp; hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B	
<i>bisoprolol &amp; hydrochlorothiazide</i>	1B	QL(2 ea daily)
<i>candesartan cilexetil-hydrochlorothiazide</i>	1B	
<i>enalapril maleate &amp; hydrochlorothiazide 25 MG-10 MG</i>	1B	
<i>enalapril maleate &amp; hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 ea daily)
<i>fosinopril sodium &amp; hydrochlorothiazide</i>	1B	QL(1 ea daily)
<i>irbesartan-hydrochlorothiazide</i>	1B	
<i>lisinopril &amp; hydrochlorothiazide</i>	1B	
<i>losartan potassium &amp; hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1B	QL(1 ea daily)
<i>losartan potassium &amp; hydrochlorothiazide 12.5 MG-50 MG</i>	1B	QL(2 ea daily)
<i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
<i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 ea daily)
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B	

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

Drug Name	Drug Tier	Requirements/Limits
<i>trimethoprim TABS</i>	1B	
XIFAXAN 550 MG	3	QL(3 ea daily); AL(At least 12 yrs old); PA
XIFAXAN 200 MG	3	QL(3 ea daily; 9 ea per 3 days retail; 9 ea per 3 days mail); AL(At least 12 yrs old); PA
<b>Anti-infective Misc. - Combinations</b>		
<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>sulfamethoxazole-trimethoprim TABS</i>	1A	
<b>Antiprotozoal Agents</b>		
ALINIA SUSR	2	PA
<i>atovaquone</i>	1B	
<i>nitazoxanide TABS</i>	1B	PA
<b>Carbapenems</b>		
<i>ertapenem sodium IJ</i>	1B	
<i>imipenem-cilastatin IV</i>	1B	
<i>meropenem</i>	1B	
<b>Chloramphenicols</b>		
<i>chloramphenicol sodium succinate</i>	4	SP; PA
<b>Cyclic Lipopeptides</b>		
<i>daptomycin 500 MG</i>	1B	
<b>Glycopeptides</b>		
<i>vancomycin hcl CAPS</i>	1B	QL(4 ea daily; 40 ea per fill retail)
<i>vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG</i>	1B	
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ml per fill retail)

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

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Drug Name	Drug Tier	Requirements/Limits
<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; 1 rtl MAX fill; 180 rtl day(s) supply; 1 mail MAX fill; QL(12 ea per fill retail; 12 per fill mail)
COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; 1 rtl MAX fill; 180 rtl day(s) supply; 1 mail MAX fill; QL(24 ea per fill retail; 24 per fill mail)
<b>Antimalarials</b>		
<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 ea daily)
<i>chloroquine phosphate TABS 500 MG</i>	1B	
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 ea daily)
KRINTAFEL	3	QL(2 ea per 30 days retail)
<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; 1 rtl MAX fill; 180 rtl day(s) supply; 1 mail MAX fill; QL(5 ea daily)
<i>primaquine phosphate TABS</i>	3	
<i>pyrimethamine</i>	1B	QL(3 ea daily); PA
<i>quinine sulfate CAPS 324 MG</i>	1B	PA
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Antimyasthenic/Cholinergic Agents</b>		
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	
<b>ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)</b>		
<b>Antimycobacterial Agents</b>		
CAPASTAT SULFATE	3	
<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	
<i>rifampin SOLR</i>	1B	
SIRTURO	3	PA
TRECTOR	3	QL(4 ea daily)
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer</b>		
<b>Alkylating Agents</b>		
<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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>cyclophosphamide CAPS</i>	1B	PA	<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP
<i>cyclophosphamide SOLR IJ</i>	4		<i>nelarabine</i>	4	SP; PA
GLEOSTINE 40 MG, 100 MG	4	PA	<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA
GLEOSTINE 10 MG	4	SP; PA	<i>pralatrexate 20 MG/ML</i>	4	SP; PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA	TABLOID	4	SP; PA
<i>ifosfamide SOLR</i>	4	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA
LEUKERAN	4	SP; PA	<b>Antineoplastic - Angiogenesis Inhibitors</b>		
<i>melphalan</i>	1B		INLYTA	4	QL(2 ea daily); SP; PA
<i>melphalan hcl</i>	1B		LENVIMA 10 MG DAILY DOSE	4	QL(1 ea daily); PA
MYLERAN TABS	4	SP; PA	LENVIMA 12MG DAILY DOSE	4	QL(3 ea daily); PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA	LENVIMA 14 MG DAILY DOSE	4	QL(2 ea daily); PA
TEMODAR SOLR	4		LENVIMA 18 MG DAILY DOSE	4	QL(3 ea daily); PA
<i>temozolomide CAPS</i>	4	SP; PA	LENVIMA 20 MG DAILY DOSE	4	QL(2 ea daily); PA
<i>thiotepa 15 MG</i>	4	SP; PA	LENVIMA 24 MG DAILY DOSE	4	QL(3 ea daily); PA
ZANOSAR	4	SP; PA	LENVIMA 4 MG DAILY DOSE	4	QL(1 ea daily); PA
<b>Antimetabolites</b>			LENVIMA 8 MG DAILY DOSE	4	QL(2 ea daily); PA
<i>azacitidine SUSR</i>	4	SP; PA	MVASI	4	PA
<i>capecitabine</i>	4	SP; PA	ZALTRAP 100 MG/4ML	4	SP; PA
<i>clofarabine</i>	4	SP; PA	ZIRABEV	4	PA
<i>cytarabine SOLN</i>	4	SP; PA	<b>Antineoplastic - Antibodies</b>		
<i>decitabine</i>	4	SP; PA	ADCETRIS	4	SP; PA
<i>floxuridine</i>	4	SP; PA	ARZERRA	4	SP; PA
<i>fludarabine phosphate SOLN</i>	4	SP; PA	RUXIENCE	4	PA
<i>fludarabine phosphate SOLR</i>	4	SP; PA	TRUXIMA	4	PA
<i>fluorouracil 500 MG/10ML</i>	4	SP; PA	YERVOY	4	SP; PA
<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA	<b>Antineoplastic - Anti-HER2 Agents</b>		
<i>mercaptopurine TABS</i>	1B		KANJINTI	4	PA
<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B				
<i>methotrexate sodium SOLR</i>	1B	SP			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OGIVRI	4	PA	ERLEADA 60 MG	4	QL(4 ea daily); PA
PERJETA	4	SP; PA	<i>exemestane</i>	4	QL(1 ea daily); SP
TRAZIMERA	4	PA	FIRMAGON	4	QL(0.143 ea daily); SP; PA
TUKYSA	4	PA	<i>flutamide</i>	4	QL(6 ea daily); SP; PA
Antineoplastic - EGFR Inhibitors			<i>fulvestrant SOSY</i>	4	QL(0.357 ml daily); SP; PA
ERBITUX	4	SP; PA	<i>letrozole</i>	1B	
<i>erlotinib hcl</i>	4	QL(1 ea daily); SP; PA	<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA
<i>gefitinib</i>	4	QL(2 ea daily); PA	LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0358 ea daily); SP; PA
GILOTRIF	4	QL(1 ea daily); PA	LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA
IRESSA ( <i>gefitinib</i> )	4	QL(2 ea daily); PA	LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 ea daily); SP; PA
TAGRISSE 80 MG	4	QL(1 ea daily); PA	LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 ea daily); SP; PA
TAGRISSE 40 MG	4	QL(2 ea daily); PA	LYSODREN	4	SP; PA
VECTIBIX 100 MG/5ML	4	SP; PA	<i>megestrol acetate SUSP</i>	1B	
VIZIMPRO	4	QL(1 ea daily); PA	<i>megestrol acetate TABS</i>	1B	
Antineoplastic - Hedgehog Pathway Inhibitors			<i>nilutamide</i>	1B	QL(2 ea daily)
DAURISMO	4	PA	NUBEQA	4	QL(4 ea daily); PA
ERIVEDGE	4	QL(1 ea daily); SP; PA	<i>tamoxifen citrate TABS</i>	0	
ODOMZO	4	QL(1 ea daily); PA	<i>toremifene citrate</i>	1B	
Antineoplastic - Hormonal and Related Agents			TRELSTAR MIXJECT	4	SP; PA
<i>abiraterone acetate 250 MG</i>	4	QL(4 ea daily); SP; PA	XTANDI CAPS	4	QL(4 ea daily); SP; PA
<i>abiraterone acetate 500 MG</i>	4	QL(2 ea daily); PA	XTANDI TABS 80 MG	4	QL(2 ea daily); PA
<i>anastrozole</i>	1B	QL(1 ea daily)	XTANDI TABS 40 MG	4	QL(4 ea daily); PA
<i>bicalutamide</i>	4	QL(1 ea daily); SP; PA	YONSA	4	QL(4 ea daily); PA
ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA	ZOLADEX 10.8 MG	4	QL(0.0119 ea daily); SP; PA
ELIGARD KIT SC 7.5 MG	4	QL(0.0089 ea daily); SP; PA	ZOLADEX 3.6 MG	4	QL(0.0357 ea daily); SP; PA
EMCYT	4	SP; PA	Antineoplastic - Immunomodulators		
ERLEADA 240 MG	4	QL(1 ea daily); PA			



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POMALYST	4	QL(1 ea daily); PA	BALVERSA	4	PA
Antineoplastic - PDGFR-alpha Inhibitors			<i>bortezomib SOLR IJ</i>	4	SP; PA
AYVAKIT	4	QL(1 ea daily); PA	BORTEZOMIB SOLR IV 3.5 MG	4	PA
Antineoplastic - XPO1 Inhibitors			BOSULIF TABS 400 MG	4	QL(1 ea daily); PA
XPOVIO	4	PA	BOSULIF TABS 100 MG, 500 MG	4	QL(1 ea daily); SP; PA
XPOVIO 60 MG TWICE WEEKLY	4	PA	BRAFTOVI 75 MG	4	SP; PA
XPOVIO 80 MG TWICE WEEKLY	4	PA	BRUKINSA	4	PA
Antineoplastic Antibiotics			CABOMETYX TABS	4	QL(1 ea daily); PA
<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA	CALQUENCE	4	QL(2 ea daily); PA
<i>dactinomycin</i>	4	SP; PA	CALQUENCE	4	QL(2 ea daily); PA
<i>doxorubicin hcl liposomal</i>	4	SP; PA	CAPRELSA	4	QL(1 ea daily); SP; PA
<i>doxorubicin hcl SOLN</i>	4	SP; PA	COMETRIQ KIT	4	QL(3 ea daily); SP; PA
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	SP; PA	COMETRIQ KIT	4	QL(2 ea daily); SP; PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA	COMETRIQ KIT	4	QL(4 ea daily); SP; PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA	COPIKTRA	4	PA
<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA	<i>everolimus TABS</i>	4	QL(1 ea daily); SP; PA
<i>mitoxantrone hcl 2 MG/ML</i>	4	SP; PA	IBRANCE CAPS	4	QL(1 ea daily); PA
<i>valrubicin</i>	4	SP; PA	IBRANCE TABS	4	QL(1 ea daily); PA
Antineoplastic Combinations			ICLUSIG	4	QL(1 ea daily); PA
KISQALI FEMARA 200 DOSE	4	QL(2 ea daily); PA	<i>imatinib mesylate</i>	4	QL(2 ea daily); SP; PA
KISQALI FEMARA 400 DOSE	4	QL(2.5 ea daily); PA	IMBRUVICA CAPS 140 MG	4	QL(3 ea daily); PA
KISQALI FEMARA 600 DOSE	4	QL(3.25 ea daily); PA	IMBRUVICA CAPS 70 MG	4	QL(1 ea daily); PA
Antineoplastic Enzyme Inhibitors			IMBRUVICA SUSP	4	QL(8 ml daily); PA
ALECENSA	4	QL(4 ea daily); PA	IMBRUVICA TABS	4	QL(1 ea daily); PA
ALUNBRIG TABS	4	QL(1 ea daily); PA	INREBIC	4	PA
ALUNBRIG TBPK	4	QL(1 ea daily); PA	JAKAFI	4	QL(2 ea daily); SP; PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KISQALI	4	QL(2 ea daily); PA	TAFINLAR CAPS	4	QL(4 ea daily); PA
KISQALI	4	QL(2.5 ea daily); PA	TAFINLAR TBSO	4	PA
KOSELUGO	4	PA	TALZENNA 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	4	QL(1 ea daily); PA
KYPROLIS	4	PA	TASIGNA 50 MG	4	QL(4 ea daily); PA
<i>lapatinib ditosylate</i>	4	QL(6 ea daily); SP; PA	TASIGNA 150 MG, 200 MG	4	QL(4 ea daily); SP; PA
LORBRENA	4	QL(1 ea daily); PA	TAZVERIK	4	PA
LYNPARZA TABS	4	QL(4 ea daily); PA	<i>temsirolimus</i>	4	QL(0.143 ml daily); SP; PA
MEKINIST SOLR	4	PA	TIBSOVO	4	PA
MEKINIST TABS 2 MG	4	QL(1 ea daily); PA	TURALIO	4	PA
MEKINIST TABS 0.5 MG	4	QL(3 ea daily); PA	VERZENIO	4	QL(2 ea daily); PA
MEKTOVI	4	SP; PA	VITRAKVI CAPS	4	PA
NINLARO	4	QL(0.143 ea daily); PA	VITRAKVI SOLN	4	PA
<i>pazopanib hcl</i>	4	QL(4 ea daily); SP; PA	VOTRIENT ( <i>pazopanib hcl</i> )	4	QL(4 ea daily); SP; PA
PEMAZYRE	4	QL(1 ea daily); PA	XALKORI CAPS	4	QL(2 ea daily); SP; PA
PIQRAY 200MG DAILY DOSE	4	PA	XOSPATA	4	PA
PIQRAY 250MG DAILY DOSE	4	PA	ZEJULA CAPS	4	QL(3 ea daily); PA
PIQRAY 300MG DAILY DOSE	4	PA	ZEJULA TABS 100 MG	4	QL(3 ea daily); PA
QINLOCK	4	PA	ZEJULA TABS 200 MG, 300 MG	4	QL(1 ea daily); PA
RETEVMO	4	PA	ZELBORAF	4	SP; PA
<i>romidepsin SOLR</i>	4	SP; PA	ZOLINZA	4	QL(4 ea daily); SP; PA
ROZLYTREK CAPS	4	PA	ZYDELIG	4	QL(2 ea daily); PA
RUBRACA	4	QL(4 ea daily); PA	Antineoplastic Enzymes		
<i>sorafenib tosylate</i>	4	QL(4 ea daily); SP; PA	ONCASPAR	4	SP; PA
SPRYCEL	4	QL(1 ea daily); SP; PA	Antineoplastics Misc.		
STIVARGA	4	QL(4 ea daily); SP; PA	ACTIMMUNE	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

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Drug Name	Drug Tier	Requirements/Limits
<i>dacarbazine SOLR 200 MG</i>	4	SP; PA
<i>hydroxyurea</i>	1B	
INTRON A SOLR 18000000 UNIT	4	SP
MATULANE	4	SP; PA
NIPENT	4	SP; PA
PHOTOFRIN	4	SP; PA
PROLEUKIN	4	SP; PA
SYNRIBO	4	SP; PA
<i>tretinoin (chemotherapy)</i>	1B	
UVADEX	4	SP; PA
Chemotherapy Adjuncts		
KEPIVANCE 6.25 MG	4	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium SOLR</i>	1B	
<i>leucovorin calcium TABS</i>	1B	
VORAXAZE	4	SP; PA
Mitotic Inhibitors		
<i>docetaxel CONC 20 MG/ML</i>	4	SP; PA
<i>docetaxel SOLN 20 MG/2ML</i>	4	SP; PA
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	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

Drug Name	Drug Tier	Requirements/Limits
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA
Topoisomerase I Inhibitors		
HYCAMTIN CAPS	4	SP; PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
<i>topotecan hcl SOLN</i>	4	
<i>topotecan hcl SOLR</i>	4	
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease</b>		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1B	
Antiparkinson Anticholinergics		
<i>benztropine mesylate SOLN</i>	1B	
<i>benztropine mesylate TABS</i>	1B	
<i>trihexyphenidyl hcl SOLN</i>	1B	
<i>trihexyphenidyl hcl TABS</i>	1B	
Antiparkinson COMT Inhibitors		
<i>entacapone</i>	1B	QL(8 ea daily)
<i>tolcapone</i>	1B	
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	

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Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa-levodopa TBDP</i>	1B	
NEUPRO	2	
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 ea daily)
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
<i>ropinirole hydrochloride TABS</i>	1B	
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 ea daily); ST
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 ea daily); ST
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	1B	QL(1 ea daily); PA
<i>selegiline hcl CAPS</i>	1B	
<i>selegiline hcl TABS</i>	1B	
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders</b>		
Antimanic Agents		
<i>lithium</i>	1B	
<i>lithium carbonate CAPS</i>	1B	
<i>lithium carbonate TABS</i>	1B	
<i>lithium carbonate TBCR</i>	1B	
Antipsychotics - Misc.		
EQUETRO 100 MG	3	QL(2 ea daily); ST
EQUETRO 200 MG	3	QL(8 ea daily); ST
EQUETRO 300 MG	3	QL(4 ea daily); ST
<i>lurasidone hcl 80 MG</i>	1B	QL(2 ea daily)
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 ea daily)
<i>ziprasidone hcl</i>	1B	QL(2 ea daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits
Benzisoxazoles		
FANAPT	2	QL(2 ea daily); PA
FANAPT TITRATION PACK	2	PA
<i>paliperidone 6 MG</i>	1B	QL(2 ea daily)
<i>paliperidone 1.5 MG, 3 MG, 9 MG</i>	1B	QL(1 ea daily)
PERSERIS PRSY	2	QL(0.072 ea daily); PA
RISPERDAL CONSTA ( <i>risperidone microspheres</i> )	2	QL(0.072 ea daily); PA
<i>risperidone microspheres</i>	1B	QL(0.072 ea daily); PA
<i>risperidone SOLN</i>	1B	QL(8 ml daily)
<i>risperidone TABS</i>	1B	QL(4 ea daily)
<i>risperidone TBDP</i>	1B	QL(4 ea daily)
Butyrophenones		
<i>haloperidol decanoate</i>	1B	QL(0.036 ml daily)
<i>haloperidol lactate CONC</i>	1B	
<i>haloperidol lactate SOLN</i>	1B	
<i>haloperidol TABS</i>	1B	
Dibenzapines		
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily); PA
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 ea daily); PA
<i>clozapine TABS</i>	1B	
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)
<i>clozapine TBDP 100 MG</i>	1B	QL(9 ea daily)
<i>clozapine TBDP 25 MG</i>	1B	QL(3 ea daily)
<i>loxapine succinate</i>	1B	
<i>olanzapine SOLR</i>	1B	QL(0.215 ea daily)
<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 ea daily)
<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 ea daily)
<i>olanzapine TBDP 20 MG</i>	1B	QL(1 ea daily)
<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	1B	QL(2 ea daily); AL(At least 10 yrs old)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	1B	QL(4 ea daily); AL(At least 10 yrs old)
<i>quetiapine fumarate TB24 300 MG, 400 MG</i>	1B	QL(2 ea daily)
<i>quetiapine fumarate TB24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)
<b>Phenothiazines</b>		
<i>chlorpromazine hcl SOLN</i>	3	
<i>chlorpromazine hcl TABS</i>	1B	
<i>fluphenazine hcl CONC</i>	1B	
<i>fluphenazine hcl ELIX</i>	1B	
<i>fluphenazine hcl SOLN</i>	1B	
<i>fluphenazine hcl TABS</i>	1B	
<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	
<b>Quinolinone Derivatives</b>		
<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
<b>Thioxanthenes</b>		
<i>thiothixene</i>	1B	
<b>ANTIVIRALS - Drugs to Treat Viral Infections</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Antiretrovirals</b>		
<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 200 MG</i>	1B	QL(2 ea daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 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 50 MG</i>	1B	QL(3 ea daily)
<i>efavirenz CAPS 200 MG</i>	1B	QL(2 ea daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<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)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fosamprenavir calcium TABS</i>	1B	QL(4 ea daily)	SELZENTRY TABS 25 MG, 75 MG	3	QL(2 ea daily)
FUZEON SOLR	4	SP; PA	<i>stavudine CAPS</i>	1B	QL(2 ea daily)
GENVOYA	3	QL(1 ea daily)	STRIBILD	3	QL(1 ea daily)
INTELENCE 25 MG	3	QL(8 ea daily)	<i>tenofovir disoproxil fumarate TABS</i>	1B	
ISENTRESS HD TABS	3	QL(2 ea daily)	TIVICAY TABS	3	QL(2 ea daily)
ISENTRESS CHEW	3	QL(6 ea daily)	TRIUMEQ TABS	3	QL(1 ea daily)
ISENTRESS TABS	3	QL(2 ea daily)	TRIZIVIR	3	QL(2 ea daily)
JULUCA	3	QL(1 ea daily)	TYBOST	3	QL(1 ea daily)
<i>lamivudine SOLN</i>	1B	QL(30 ml daily)	VIRACEPT TABS 250 MG	3	QL(10 ea daily)
<i>lamivudine TABS 150 MG</i>	1B	QL(2 ea daily)	VIRACEPT TABS 625 MG	3	QL(4 ea daily)
<i>lamivudine TABS 300 MG</i>	1B	QL(1 ea daily)	VIREAD POWD	3	QL(7.5 gm daily)
<i>lamivudine-zidovudine</i>	1B	QL(2 ea daily)	VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 ea daily)
LEXIVA SUSP	3	QL(56 ml daily)	<i>zidovudine CAPS</i>	1B	QL(6 ea daily)
<i>lopinavir-ritonavir SOLN</i>	1B	QL(12.5 ml daily)	<i>zidovudine SYRP</i>	1B	QL(60 ml daily)
<i>lopinavir-ritonavir TABS</i>	1B	QL(4 ea daily)	<i>zidovudine TABS</i>	1B	QL(2 ea daily)
<i>maraviroc TABS 150 MG</i>	1B	QL(2 ea daily)	<b>CMV Agents</b>		
<i>maraviroc TABS 300 MG</i>	1B	QL(4 ea daily)	<i>cidofovir</i>	3	
<i>nevirapine SUSP</i>	1B	QL(40 ml daily)	<i>ganciclovir sodium SOLR</i>	1B	
<i>nevirapine TABS</i>	1B	QL(2 ea daily)	<i>valganciclovir hcl TABS</i>	1B	QL(4 ea daily); PA
<i>nevirapine TB24 100 MG</i>	1B	QL(3 ea daily)	<b>Hepatitis Agents</b>		
<i>nevirapine TB24 400 MG</i>	1B	QL(1 ea daily)	<i>adefovir dipivoxil</i>	4	QL(1 ea daily); SP
NORVIR PACK	3	QL(12 ea daily)	BARACLUDGE SOLN	4	QL(20 ml daily); SP; PA
NORVIR SOLN	3	QL(15 ml daily)	<i>entecavir TABS</i>	4	QL(1 ea daily); SP
ODEFSEY	3	QL(1 ea daily)	EPIVIR HBV SOLN	4	QL(60 ml daily); SP; PA
PIFELTRO	3	QL(1 ea daily)	<i>lamivudine (hbv) TABS</i>	1B	QL(3 ea daily); SP
PREZCOBIX	3	QL(1 ea daily)	PEGASYS SOLN	4	QL(0.0714 ml daily); SP; PA
PREZISTA SUSP	3	QL(12 ml daily)	PEGASYS SOSY	4	QL(0.072 ml daily); PA
PREZISTA TABS 75 MG, 150 MG	3	QL(2 ea daily)	<i>ribavirin (hepatitis c) CAPS</i>	1B	QL(7 ea daily)
PREZISTA TABS ( <i>darunavir</i> )	3				
RETROVIR IV INFUSION SOLN	3				
<i>ritonavir TABS</i>	1B	QL(12 ea daily)			
RUKOBIA	4	PA			
SELZENTRY SOLN	3	QL(30 ml daily)			

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Drug Name	Drug Tier	Requirements/Limits
<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
<b>Herpes Agents</b>		
<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 500 MG</i>	1B	QL(4 ea daily)
<i>famciclovir 125 MG, 250 MG</i>	1B	QL(3 ea daily)
<i>valacyclovir hcl 1 GM, 1000 MG</i>	1B	QL(4 ea daily)
<i>valacyclovir hcl 500 MG</i>	1B	QL(2 ea daily)
<b>Influenza Agents</b>		
<i>oseltamivir phosphate CAPS</i>	1B	Limit 1 fill every 90 days.; 1 rtl MAX fill; 90 rtl day(s) supply; 1 mail MAX fill; QL(10 ea per fill retail; 10 per fill mail)
<i>oseltamivir phosphate SUSR</i>	1B	Limit 1 fill every 90 days.; 1 rtl MAX fill; 90 rtl day(s) supply; QL(125 ml per fill retail)
RELENZA DISKHALER	2	1 rtl pack lmt amt; 30 rtl pack lmt day(s)
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 ea daily)
<b>BETA BLOCKERS - Drugs to Treat High Blood Pressure</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Alpha-Beta Blockers</b>		
<i>carvedilol</i>	1B	
<i>carvedilol phosphate</i>	3	QL(1 ea daily)
<i>labetalol hcl SOLN</i>	1B	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	
<i>labetalol hcl TABS 300 MG</i>	1B	QL(8 ea daily)
<b>Beta Blockers Cardio-Selective</b>		
<i>acebutolol hcl CAPS</i>	1B	
<i>atenolol TABS</i>	1B	
<i>betaxolol hcl</i>	1B	
<i>bisoprolol fumarate</i>	1B	
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	
<i>metoprolol succinate TB24 200 MG</i>	1B	QL(2 ea daily)
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B	
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1B	
<i>nebivolol hcl 20 MG</i>	3	QL(2 ea daily)
<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 ea daily)
<b>Beta Blockers Non-Selective</b>		
HEMANGEOL SOLN OR	4	QL(75 ml daily); PA
<i>nadolol TABS 20 MG</i>	1B	QL(3 ea daily)
<i>nadolol TABS 80 MG</i>	1B	
<i>nadolol TABS 40 MG</i>	1B	QL(6 ea daily)
<i>pindolol TABS</i>	1B	
<i>propranolol hcl CP24</i>	1B	QL(2 ea daily)
<i>propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML</i>	1B	
<i>propranolol hcl TABS</i>	1B	
<i>sotalol hcl (afib/af)</i>	1B	
<i>sotalol hcl TABS 240 MG</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 ea daily)
<i>timolol maleate TABS</i>	1B	
<b>CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure</b>		
Calcium Channel Blockers		
<i>amlodipine besylate TABS</i>	1B	
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 ea daily)
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B	
<i>diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	1B	
<i>diltiazem hcl CP12</i>	1B	QL(2 ea daily)
<i>diltiazem hcl CP24</i>	1B	
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	
<b>DILTIAZEM HCL SOLR</b>	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</i>	1B	
<i>nifedipine TB24 90 MG</i>	1B	QL(1 ea daily)
<i>nifedipine TB24 60 MG</i>	1B	QL(2 ea daily)
<i>nimodipine CAPS</i>	1B	
<i>nisoldipine 8.5 MG, 17 MG, 20 MG, 30 MG, 34 MG, 40 MG</i>	1B	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 ea daily)
<i>verapamil hcl SOLN 2.5 MG/ML</i>	1B	
<i>verapamil hcl TABS</i>	1B	
<i>verapamil hcl TBCR</i>	1B	
<b>CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm</b>		
Cardiac Glycosides		
<i>digoxin SOLN OR 0.05 MG/ML</i>	1B	
<i>digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
<b>LANOXIN SOLN IJ (digoxin)</b>	2	
<b>LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)</b>	2	
<b>CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions</b>		
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
<b>STENDRA</b>	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
<b>ORENITRAM TBCR</b>	4	PA
<i>treprostinil SOLN IJ</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/Limits
TYVASO REFILL SOLN IN	4	PA
TYVASO STARTER 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		
<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 rtl MAX fill; 180 rtl day(s) supply; PA
UPTRAVI TABS 200 MCG	4	PA
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 ea daily); PA
Pulmonary Hypertension - Sol Guanylate Cyclase		

Drug Name	Drug Tier	Requirements/Limits
Stimulator		
ADEMPAS	4	QL(3 ea daily); PA
Sinus Node Inhibitors		
CORLANOR SOLN	3	QL(15 ml daily); PA
CORLANOR TABS	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	
<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		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefdinir CAPS</i>	1B		<i>levonorgestrel &amp; eth estradiol TABS</i>	0	
<i>cefdinir SUSR</i>	1B		<i>levonorgestrel-eth estradiol (triphasic)</i>	0	
<i>cefixime CAPS</i>	1B		<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0	
<i>cefixime SUSR</i>	1B	ST	<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0	
<i>cefotaxime sodium IJ 1 GM, 2 GM</i>	1B		<i>levonorgestrel-ethinyl estradiol-iron</i>	0	
<i>cefpodoxime proxetil SUSR</i>	1B		LO LOESTRIN FE TABS	0	
<i>cefpodoxime proxetil TABS</i>	1B		NATAZIA	0	
<i>ceftazidime IJ 1 GM, 6 GM</i>	1B		NEXTSTELLIS	0	
<i>ceftriaxone sodium IJ 250 MG</i>	1A		<i>norethin acet &amp; estrad-fe CAPS</i>	0	
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG</i>	1B		<i>norethin acet &amp; estrad-fe CHEW</i>	0	
Cephalosporins - 4th Generation			<i>norethin acet &amp; estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	
<i>cefepime hcl SOLR IV 2 GM</i>	1B		<i>norethindrone &amp; eth estradiol</i>	0	
Cephalosporins - 5th Generation			<i>norethindrone &amp; ethinyl estradiol-fe</i>	0	
TEFLARO	3		<i>norethindrone acet &amp; eth estra</i>	0	
<b>CONTRACEPTIVES - Drugs to Prevent Pregnancy</b>					
Combination Contraceptives - Oral					
BALCOLTRA ( <i>levonorgestrel-ethinyl estradiol-iron</i> )	0		<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	
<i>desogestrel &amp; ethinyl estradiol</i>	0		<i>norethindrone-eth estradiol (triphasic)</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0		<i>norgestimate-ethinyl estradiol</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0		<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0		<i>norgestrel &amp; ethinyl estradiol 30 MCG-0.3 MG</i>	0	
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0		TYBLUME CHEW	0	
<i>ethynodiol diacet &amp; eth estrad</i>	0		Combination Contraceptives - Transdermal		
			<i>norelgestromin-ethinyl estradiol</i>	0	

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Drug Name	Drug Tier	Requirements/Limits
TWIRLA	0	QL(3 ea per 28 days retail; 9 ea per 84 days mail)
Combination Contraceptives - Vaginal		
ANNOVERA	0	PA
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 ea daily)
Copper Contraceptives - IUD		
PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	0	
Emergency Contraceptives		
ELLA	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	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	90 rtl day(s) supply; 90 rtl lmt day(s); QL(1 ml per 90 days retail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(90 Day(s) limit ; 1 ml per 90 days 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)

Drug Name	Drug Tier	Requirements/Limits
<b>CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions</b>		
Glucocorticosteroids		
<i>budesonide CPEP</i>	1B	QL(3 ea daily)
<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	
EMFLAZA SUSP	4	PA
EMFLAZA TABS ( <i>deflazacort</i> )	4	PA
<i>hydrocortisone TABS</i>	1B	
MEDROL TABS	3	
<i>methylprednisolone acetate SUSP</i>	1B	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1B	
<i>methylprednisolone TABS</i>	1B	
<i>methylprednisolone TBPK</i>	1B	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1B	
<i>prednisolone sodium phosphate TBP</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<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 100 MG, 500 MG, 1000 MG	3	2 rtl MAX fill; 30 rtl day(s) supply
SOLU-CORTEF 250 MG	3	
SOLU-MEDROL 2 GM	3	
<i>triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML</i>	1B	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1B	
<b>COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms</b>		
Antitussives		
<i>benzonatate 150 MG</i>	1B	QL(4 ea daily)
<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	
<b>DERMATOLOGICALS - Drugs to Treat Skin</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Conditions</b>		
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); PA
<i>adapalene GEL 0.3 %</i>	1B	AL(At least 12 yrs old); ST
<i>adapalene GEL 0.1 %</i>	1B	AL(At least 12 yrs old); PA; RX/OTC
AZELEX	3	QL(50 gm per 30 days 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 10 %</i>	1B	AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 gm daily); 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)

Drug Name	Drug Tier	Requirements/Limits
<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)
<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	1B	AL(At least 12 yrs old)
<i>tretinoin microsphere 0.1 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<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>tretinoin GEL 0.01 %, 0.025 %</i>	1B	QL(3 gm daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<b>Agents for External Genital and Perianal Warts</b>		
VEREGEN	3	QL(1 gm daily)

Drug Name	Drug Tier	Requirements/Limits
<b>Antibiotics - Topical</b>		
ALTABAX	2	QL(15 gm per 30 days retail; 15 gm per 30 days mail)
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 gm daily)
<i>gentamicin sulfate (topical) OINT</i>	1B	
<i>mupirocin OINT</i>	1B	QL(6 gm daily)
NEO-SYNALAR	3	QL(60 gm per 30 days retail; 60 gm per 30 days mail); PA
<b>Antifungals - Topical</b>		
<i>butenafine hcl</i>	1B	QL(6 gm daily); RX/OTC
<i>ciclopirox olamine CREA</i>	1B	1 rti MAX fill; 30 rti day(s) supply; QL(90 gm per fill retail)
<i>ciclopirox olamine SUSP</i>	1B	
<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)
<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 gm daily); RX/OTC
<i>clotrimazole (topical) SOLN</i>	1B	QL(10 ml daily); RX/OTC
<i>clotrimazole w/ betamethasone CREA</i>	1B	QL(8 gm daily)
<i>clotrimazole w/ betamethasone LOTN</i>	1B	
<i>econazole nitrate CREA</i>	1B	QL(85 gm per fill retail; 85 per fill mail)
ERTACZO	3	QL(2.15 gm daily)
<i>ketoconazole (topical) CREA</i>	1B	QL(10 gm daily)

Drug Name	Drug Tier	Requirements/Limits
<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ml daily)
<i>luliconazole</i>	1B	PA
<i>naftifine hcl CREA 2 %</i>	1B	1 rtl MAX fill; 180 rtl day(s) supply; 1 mail MAX fill; QL(2 gm daily)
<i>naftifine hcl CREA 1 %</i>	1B	1 rtl MAX fill; 180 rtl day(s) supply; 1 mail MAX fill; QL(3 gm daily)
<i>nystatin (topical) CREA</i>	1B	QL(10 gm daily)
<i>nystatin (topical) OINT</i>	1B	QL(6 gm daily)
<i>nystatin (topical) POWD EX</i>	1B	QL(10 gm daily)
<i>nystatin-triamcinolone CREA</i>	1B	QL(10 gm daily)
<i>nystatin-triamcinolone OINT</i>	1B	QL(4 gm daily)
<i>oxiconazole nitrate CREA</i>	1B	Limit 1 Fill per 180 days; 1 rtl MAX fill; 180 rtl day(s) supply; 1 mail MAX fill; QL(3 gm daily)
OXISTAT LOTN	2	Limit 1 Fill per 180 days; 1 rtl MAX fill; 180 rtl day(s) supply; 1 mail MAX fill; QL(2 ml daily)
<i>sulconazole nitrate CREA</i>	1B	
<i>sulconazole nitrate SOLN</i>	1B	1 rtl MAX fill; 90 rtl day(s) supply; 1 mail MAX fill
<i>tavaborole</i>	1B	PA
Anti-inflammatory Agents - Topical		
<i>diclofenac epolamine PTCH EX</i>	1B	QL(2 ea daily); PA
<i>diclofenac sodium (topical) GEL EX</i>	1B	QL(3.34 gm daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP; PA
<i>diclofenac sodium (actinic keratoses) EX</i>	1B	QL(3.34 gm daily); PA
<i>fluorouracil (topical) CREA 5 %</i>	1B	QL(4 gm daily)
<i>fluorouracil (topical) SOLN</i>	1B	QL(2 ml daily)
PANRETIN	3	QL(60 gm per 30 days retail; 60 gm per 30 days mail)
Antipruritics - Topical		
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; 1 rtl MAX fill; 180 rtl day(s) supply; 1 mail MAX fill; QL(45 gm per fill retail; 45 per fill mail); PA
Antipsoriatics		
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 ea daily)
<i>acitretin 25 MG</i>	1B	QL(2 ea daily)
<i>calcipotriene CREA</i>	1B	QL(4 gm daily); PA
<i>calcipotriene OINT</i>	1B	QL(4 gm daily); PA
<i>calcipotriene SOLN</i>	1B	QL(4 ml daily); PA
<i>calcitriol (topical)</i>	1B	QL(3.34 gm daily)
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ml daily); PA
COSENTYX UNOREADY SOAJ	4	QL(0.072 ml daily); PA
COSENTYX SOSY 150 MG/ML	4	QL(0.072 ml daily); PA
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ml daily); PA
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ml daily); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>methoxsalen rapid</i>	1B	QL(4 ea daily)	<i>amcinonide CREA</i>	1B	1 rtl MAX fill; 30 rtl day(s) supply; 1 mail MAX fill; QL(60 gm per fill retail; 60 per fill mail)
SKYRIZI PEN SOAJ	4	QL(0.025 ml daily); PA			
SKYRIZI PSKT	4	QL(0.025 ea daily); PA	<i>amcinonide LOTN</i>	3	
SKYRIZI SOSY	4	QL(0.025 ml daily); PA	<i>amcinonide OINT</i>	3	
STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ml daily); PA	<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 gm daily)
STELARA SOSY 90 MG/ML	4	QL(0.018 ml daily); SP; PA	<i>betamethasone dipropionate (topical) LOTN</i>	1B	
STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ml daily); PA	<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 gm daily)
<i>tazarotene CREA</i>	1B	QL(1 gm daily)	<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 gm daily)
TREMFYA SOPN	4	QL(0.018 ml daily); PA	<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ml daily)
TREMFYA SOSY	4	QL(0.018 ml daily); PA	<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 gm daily)
Antiseborrheic Products			<i>betamethasone valerate CREA</i>	1B	QL(2.5 gm daily)
<i>selenium sulfide LOTN 2.5 %</i>	1B		<i>betamethasone valerate FOAM</i>	1B	QL(1.67 gm daily)
Antivirals - Topical			<i>betamethasone valerate LOTN</i>	1B	QL(5 ml daily)
<i>acyclovir topical CREA</i>	1B	1 rtl pack lmt per fill; 1 mail pack lmt per fill	<i>betamethasone valerate OINT</i>	1B	QL(3 gm daily)
<i>acyclovir topical OINT</i>	1B	1 rtl pack lmt per fill; 1 mail pack lmt per fill	<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST
<i>penciclovir</i>	3	QL(0.18 gm daily)	<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST
Burn Products			<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 gm daily); PA
<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)			

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



Drug Name	Drug Tier	Requirements/Limits
<i>prednicarbate OINT</i>	1B	
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 gm daily)
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 gm daily)
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 gm daily)
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B	
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ml daily)
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 gm daily)
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 gm daily)
<i>triamcinolone acetonide-dimethicone-silicone</i>	1B	PA
<b>Emollients</b>		
<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 gm daily); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC
<b>Enzymes - Topical</b>		
SANTYL OINT	3	PA
<b>Immunomodulating Agents - Topical</b>		
<i>imiquimod 5 %</i>	1B	QL(12 ea per fill retail; 12 per fill mail)
<b>Immunosuppressive Agents - Topical</b>		
<i>pimecrolimus</i>	1B	QL(3 gm daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA
<b>Keratolytic/Antimitotic/Vesicant Agents</b>		
<i>podofilox SOLN</i>	1B	
<b>Local Anesthetics - Topical</b>		
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ml daily)

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

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Drug Name	Drug Tier	Requirements/Limits
GLUCAGEN DIAGNOSTIC	3	QL(0.035 ea daily)
THYROGEN 0.9 MG	3	1 rtl MAX fill; 365 rtl day(s) supply; 1 mail MAX fill; PA
<b>Diagnostic Tests</b>		
CHEMSTRIP-K STRP	1B	
FORA GTEL BLOOD KETONE TEST STRIPS	1B	
FORA TEST N' GO ADVANCE/VOICE/6 CONNECT	1B	
GOJJI BLOOD KETONE TEST STRIPS	1B	
KETONE TEST STRIPS STRP	1B	
KETONE STRP	1B	
KETOSTIX STRP	1B	
NOVA MAX PLUS KETONE TESTSTRIPS	1B	
PRECISION XTRA	1B	
PTS PANELS KETONE TEST	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	Limit 100 per month; QL(3.34 ea daily); RX/OTC
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	1B	QL(3.34 ea daily); RX/OTC
TRUE TRACK TEST STRP	1B	Limit 100 per month; QL(3.34 ea daily); RX/OTC
<b>DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes</b>		
<b>Digestive Enzymes</b>		

Drug Name	Drug Tier	Requirements/Limits
CREON CPEP	2	Non-FDA approved uses require Prior Authorization
PANCREAZE CPEP 149900 UNIT-97300 UNIT-37000 UNIT, 15200 UNIT-8800 UNIT-2600 UNIT, 24600 UNIT-14200 UNIT-4200 UNIT, 61500 UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000 UNIT, 98400 UNIT-56800 UNIT-16800 UNIT	3	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 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	
<b>DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure</b>		
<b>Carbonic Anhydrase Inhibitors</b>		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 ea daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 ea daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 ea daily)
<i>dichlorphenamide</i>	4	QL(4 ea daily); PA
<i>methazolamide TABS</i>	1B	QL(6 ea daily)
<b>Diuretic Combinations</b>		

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

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CHORIONIC GONADOTROPIN IM	4	30 rtl day(s) supply; PA	ALDURAZYME	4	SP; PA
<i>clomiphene citrate TABS</i>	3	PA	<i>betaine</i>	4	SP; PA
GnRH/LHRH Antagonists			<i>calcitriol CAPS</i>	1B	
<i>ganirelix acetate</i>	4	PA	<i>calcitriol SOLN IV</i>	1B	
ORLISSA	2	PA	<i>cinacalcet hcl</i>	4	QL(4 ea daily); SP; PA
Growth Hormone Receptor Antagonists			<i>doxercalciferol CAPS</i>	1B	
SOMAVERT 10 MG, 15 MG, 20 MG	4	SP; PA	<i>doxercalciferol SOLN</i>	1B	
Growth Hormone Releasing Hormones (GHRH)			ELAPRASE	4	SP; PA
EGRIFTA 2 MG	4	PA	GALAFOLD	4	QL(0.5 ea daily); PA
EGRIFTA SV	4	PA	LUMIZYME	4	SP; PA
Growth Hormones			MYALEPT	4	PA
HUMATROPE CART IJ	4	SP; PA	NAGLAZYME	4	SP; PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA	<i>nitisinone CAPS</i>	4	PA
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	PA	<i>paricalcitol CAPS</i>	1B	
ZORBTIVE SC	4	SP; PA	<i>paricalcitol SOLN</i>	1B	
Hormone Receptor Modulators			PHEBURANE PLLT	4	PA
OSPHENA	3	PA	<i>sapropterin dihydrochloride PACK</i>	4	PA
<i>raloxifene hcl</i>	0	QL(1 ea daily)	<i>sapropterin dihydrochloride TABS</i>	4	PA
Insulin-Like Growth Factors (Somatomedins)			<i>sodium phenylbutyrate POWD</i>	1B	PA
INCRELEX	4	SP; PA	<i>sodium phenylbutyrate TABS</i>	1B	PA
LHRH/GnRH Agonist Analog Pituitary Suppressants			Posterior Pituitary Hormones		
FENSOLVI SC	4	SP; PA	<i>desmopressin acetate spray</i>	1B	
LUPRON DEPOT-PED (1-MONTH)	4	SP; PA	<i>desmopressin acetate spray refrigerated</i>	1B	
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA	<i>desmopressin acetate SOLN IJ</i>	1B	PA
LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA	DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
SYNAREL	4	SP; PA	<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 ea daily)
Metabolic Modifiers			<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 ea daily)
			STIMATE SOLN NA	4	SP; PA

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Drug Name	Drug Tier	Requirements/Limits
<b>Prolactin Inhibitors</b>		
<i>cabergoline</i>	1B	
<b>Somatostatic Agents</b>		
<i>octreotide acetate SOLN</i>	4	SP; PA
SANDOSTATIN LAR DEPOT KIT	4	PA
SIGNIFOR	4	PA
<b>Vasopressin Receptor Antagonists</b>		
<i>tolvaptan TABS</i>	4	QL(2 ea daily); SP; PA
<b>ESTROGENS - Hormone Replacement/Modifying Drugs</b>		
<b>Estrogen Combinations</b>		
CLIMARA PRO	3	
DUAVEE	3	PA
<i>norethindrone acetate-ethinyl estradiol</i>	1B	
PREMPHASE	2	
PREMPRO	2	QL(1 ea daily)
<b>Estrogens</b>		
DELESTROGEN 10 MG/ML ( <i>estradiol valerate</i> )	1B	
DEPO-ESTRADIOL	3	
ELESTRIN GEL	3	
<i>estradiol valerate</i>	1B	
<i>estradiol GEL</i>	1B	
<i>estradiol GEL 0.06 %</i>	3	
<i>estradiol PTTW</i>	1B	QL(0.286 ea daily)
<i>estradiol PTWK</i>	1B	
<i>estradiol TABS</i>	1B	
ESTROGEL GEL 0.06 % ( <i>estradiol</i> )	3	
EVAMIST SOLN	3	
MENEST	3	
MENOSTAR PTWK	3	

Drug Name	Drug Tier	Requirements/Limits
PREMARIN SOLR	2	
PREMARIN TABS	2	QL(1 ea daily)
<b>FLUOROQUINOLONES - Drugs to Treat Bacterial Infections</b>		
<b>Fluoroquinolones</b>		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
<i>ciprofloxacin hcl TABS</i>	1B	
<i>ciprofloxacin in d5w 5 %-200 MG/100ML</i>	3	
<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	1B	2 rtl MAX fill; 30 rtl day(s) supply
CIPRO SUSR	2	2 rtl MAX fill; 30 rtl day(s) supply
<i>levofloxacin in d5w 5 %-500 MG/100ML</i>	1B	
<i>levofloxacin SOLN OR</i>	1B	
<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
<i>levofloxacin TABS 500 MG</i>	1A	
<i>moxifloxacin hcl in sodium chloride</i>	1B	
<i>moxifloxacin hcl TABS</i>	1B	
<i>ofloxacin 300 MG, 400 MG</i>	1B	
<b>GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs</b>		
<b>Bile Acid Synthesis Disorder Agents</b>		
CHOLBAM	4	SP; PA
<b>Gallstone Solubilizing Agents</b>		
<i>ursodiol CAPS</i>	1B	QL(3 ea daily)
<i>ursodiol TABS</i>	1B	
<b>Gastrointestinal Chloride Channel Activators</b>		
<i>lubiprostone</i>	1B	QL(2 ea daily)
<b>Gastrointestinal Stimulants</b>		

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Drug Name	Drug Tier	Requirements/Limits
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ml daily)
<i>metoclopramide hcl TABS</i>	1A	QL(6 ea daily)
<b>Inflammatory Bowel Agents</b>		
<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
STELARA 130 MG/26ML	4	QL(3.47 ml daily); PA
<i>sulfasalazine TABS</i>	1B	
<i>sulfasalazine TBEC</i>	1B	
<b>Intestinal Acidifiers</b>		
<i>lactulose (encephalopathy)</i>	1B	
<b>Irritable Bowel Syndrome (IBS) Agents</b>		
<i>alosetron hcl</i>	1B	QL(2 ea daily)
LINZESS	2	QL(1 ea daily)
<b>Peripheral Opioid Receptor Antagonists</b>		
<i>alvimopan</i>	1B	
MOVANTIK	3	QL(1 ea daily); PA
<b>Phosphate Binder Agents</b>		

Drug Name	Drug Tier	Requirements/Limits
<i>calcium acetate (phosphate binder) CAPS</i>	1B	
<i>calcium acetate (phosphate binder) TABS</i>	1B	RX/OTC
<i>lanthanum carbonate CHEW</i>	1B	
PHOSLYRA SOLN	2	
<i>sevelamer carbonate PACK</i>	1B	
<i>sevelamer carbonate TABS</i>	1B	
VELPHORO	3	PA
<b>GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System</b>		
<b>Alkalinizers</b>		
<i>potassium citrate (alkalinizer) TBCR 10 MEQ, 1080 MG</i>	1B	
<i>sodium citrate &amp; citric acid</i>	1B	RX/OTC
<b>Cystinosis Agents</b>		
CYSTAGON CAPS	3	PA
<b>Genitourinary Irrigants</b>		
<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	
<b>Interstitial Cystitis Agents</b>		
ELMIRON CAPS	2	QL(3 ea daily)
<b>Prostatic Hypertrophy Agents</b>		
<i>alfuzosin hcl</i>	1B	QL(1 ea daily)
<i>dutasteride</i>	1B	QL(1 ea daily)
<i>dutasteride-tamsulosin hcl</i>	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>finasteride</i>	1B	5 mg only
<i>silodosin</i>	1B	
<i>tamsulosin hcl</i>	1B	
Urinary Analgesics		
<i>phenazopyridine hcl</i> TABS 100 MG, 100 MG, 200 MG	1B	
Urinary Stone Agents		
THIOLA EC TBEC 100 MG ( <i>tiopronin</i> )	3	QL(3 ea daily); PA
THIOLA EC TBEC 300 MG ( <i>tiopronin</i> )	3	QL(10 ea daily); PA
<i>tiopronin TBEC 100 MG</i>	3	QL(3 ea daily); PA
<i>tiopronin TBEC 300 MG</i>	3	QL(10 ea daily); PA
<b>GOUT AGENTS - Drugs to Treat Gout</b>		
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	
<b>HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders</b>		
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOLN</i>	4	QL(9 ml daily); PA
<i>icatibant acetate SOSY</i>	4	QL(9 ml daily); PA
Complement Inhibitors		
HAEGARDA SOLR SC	4	PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1B	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
Plasma Kallikrein Inhibitors		
ORLADEYO	4	PA
TAKHZYRO SOLN	4	PA
TAKHZYRO SOSY	4	PA
Platelet Aggregation Inhibitors		
<i>anagrelide hcl</i>	1B	
<i>aspirin-dipyridamole</i>	1B	QL(2 ea daily); PA
BRILINTA	2	QL(2 ea daily)
CABLIVI	4	PA
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1B	QL(1 ea daily)
<i>dipyridamole</i>	1B	
<i>prasugrel hcl</i>	1B	QL(1 ea daily)
ZONTIVITY	3	PA
<b>HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders</b>		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 ea daily); PA
CEREZYME 400 UNIT	4	SP; PA
<i>miglustat</i>	4	QL(3 ea daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
OXBRYTA TABS 500 MG	4	PA
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ml daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	0	
Hematopoietic Growth Factors		

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Drug Name	Drug Tier	Requirements/Limits
ARANESP ALBUMIN FREE SOLN 25 MCG/ML	4	SP
ARANESP ALBUMIN FREE SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP; PA
ARANESP ALBUMIN FREE SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP; PA
DOPTELET	4	QL(3 ea daily); PA
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
LEUKINE SOLR IJ	4	SP; PA
MIRCERA 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML, 100 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML	4	PA
MULPLETA	4	QL(1 ea daily); PA
PROCRIT 40000 UNIT/ML	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
RETACRIT	4	PA
UDENYCA ONBODY SOSY	4	PA
UDENYCA SOAJ	4	PA
UDENYCA SOSY	4	PA
ZARXIO	4	PA
ZIEXTENZO	4	PA
Hematopoietic Mixtures		
<i>ferrous fumarate-folic acid</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
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		
MOZOBIL ( <i>plerixafor</i> )	4	SP; PA
<i>plerixafor</i>	4	SP; PA
<b>HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders</b>		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1B	PA
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
<i>tranexamic acid TABS</i>	1B	
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1B	
<i>phenobarbital TABS 15 MG, 16.2 MG, 30 MG, 32.4 MG, 64.8 MG, 97.2 MG, 100 MG</i>	1B	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1B	QL(1 ea daily); PA
Non-Barbiturate Hypnotics		
<i>estazolam</i>	1B	
<i>eszopiclone</i>	1B	QL(1 ea daily); AL(At least 18 yrs old); ST
<i>flurazepam hcl</i>	1B	PA
<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 ea daily)
<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 ea daily)

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

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>erythromycin ethylsuccinate</i> TABS	3		KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	0	
Fidaxomicin			KIMONO SENSATION LUBRICATED MISC	0	
DIFICID TABS	2		KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	0	
<b>MEDICAL DEVICES AND SUPPLIES</b>			KIMONO SPECIAL DEVI	0	
Contraceptives			K-Y ME & YOU EXTRA LUBRICATED DEVI	0	
AIMSCO LUBRICATED MISC	0		K-Y ME & YOU INTENSE DEVI	0	
CAYA DPRH	0		MAXX LUBRICATED MISC	0	
DUREX EXTRA SENSITIVE THIN DEVI	0		MAXX PLUS SPERMICIDE LUBRICATED MISC	0	
FANTASY LUBRICATED/SPERMICIDE MISC	0		OMNIFLEX DIAPHRAGM	0	
FANTASY LUBRICATED MISC	0		PREMIUM CONDOMS LUBRICATED MISC	0	
FC2 FEMALE CONDOM	0	1 rtl MAX fill; 90 rtl day(s) supply; 1 mail MAX fill; QL(12 ea per fill retail; 12 per fill mail)	REALITY LATEX CONDOMS/LUBRICATED MISC	0	
FEMCAP DEVI	0		REALITY LATEX/ULTRA TEXTURED DEVI	0	
KAMELEON LUBRICATED MISC	0		REALITY LATEX/ULTRA THIN DEVI	0	
KIMONO COLORS DEVI	0		TRUSTEX COLOR CONDOMS + LUBE MISC	0	
KIMONO LUBRICATED MISC	0		TRUSTEX LUBRICATED EXTRALARGE MISC	0	
KIMONO MAXX/LARGE FLARE MISC	0		TRUSTEX LUBRICATED EXTRASTRENGTH MISC	0	
KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	0		TRUSTEX LUBRICATED/RIBBED/STUDDDED MISC	0	
KIMONO PLUS SPERMICIDE LUBRICATED MISC	0		TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	0	
KIMONO PLUS SPERMICIDE/LUBRICATED MISC	0				
KIMONO PS LUBRICATED MISC	0				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	0		FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	PA
TRUSTEX LUBRICATED/SPERMICIDE MISC	0		FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX LUBRICATED MISC	0		FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	PA
TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	0		FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily); PA
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDDED 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/SPERMICIDE MISC	0		FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	PA
TRUSTEX/RIA LUBRICATED MISC	0		ONETOUCH DELICA SAFETY LANCING DEVICE	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0		ONETOUCH DELICA SAFETY LANCING DEVICE 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0		RELION 2-IN-1 LANCET DEVICES 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0		RELION 2-IN-1 LANCING DEVICE 25G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0		RELION 2-IN-1 LANCING DEVICE 30G	1B	RX/OTC
WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0		SELECT LANCETS	1B	6.66/day
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0		SELECT LANCETS	1	6.66/day
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0		TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0		Parenteral Therapy Supplies		
Diabetic Supplies			SELECT INSULIN SYRINGES	1B	5/day

Drug Name	Drug Tier	Requirements/Limits
SELECT INSULIN SYRINGES	1	5/day
<b>MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches</b>		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ml daily); PA
EMGALITY SOAJ	2	QL(0.07 ml daily); PA
EMGALITY SOSY 120 MG/ML	2	QL(0.07 ml daily); PA
EMGALITY SOSY 100 MG/ML	2	QL(0.1 ml daily); PA
UBRELVY	3	QL(10 ea per 30 days retail); ST
Migraine Combinations		
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 ea daily)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 ea per 30 days retail; 10 ea per 30 days mail)
Migraine Products		
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ml daily)
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
ERGOMAR SUBL	3	QL(0.667 ea daily)
Serotonin Agonists		
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 ea daily); AL(At least 12 yrs old); ST
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST

Drug Name	Drug Tier	Requirements/Limits
<i>eletriptan hydrobromide</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 ea daily); AL(At least 18 yrs old); ST
<i>naratriptan hcl</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)
<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 ea daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 ea daily); AL(At least 6 yrs old)
<i>sumatriptan</i>	1B	QL(0.2 ea daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ml daily); AL(At least 18 yrs old)
<i>sumatriptan succinate TABS</i>	1B	QL(0.3 ea daily); AL(At least 18 yrs old)
<i>zolmitriptan SOLN</i>	1B	QL(0.2 ea daily); AL(At least 12 yrs old); ST

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>zolmitriptan TABS</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST	<i>potassium chloride in dextrose &amp; sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 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	
<i>zolmitriptan TBDP</i>	1B	QL(0.3 ea daily); AL(At least 12 yrs old); ST			
<b>MINERALS &amp; ELECTROLYTES</b>					
<b>Bicarbonates</b>					
<i>sodium acetate SOLN</i>	1B		<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %</i>	1B	
SODIUM ACETATE SOLN ( <i>sodium acetate</i> )	1B				
<b>Calcium</b>					
<i>calcium chloride (dihydrate) SOLN</i>	1B		POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	1B	
<b>Electrolyte Mixtures</b>					
<i>dextrose in lactated ringers</i>	1B		POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % ( <i>potassium chloride in nacl</i> )	1B	
<i>electrolyte-148</i>	1B		<i>ringer's</i>	1B	
<i>electrolyte-a</i>	1B		<b>Fluoride</b>		
IONOSOL-MB/DEXTROSE 5%	1B		<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG</i>	0	QL(1 ea daily)
ISOLYTE-P/DEXTROSE 5%	1B		<b>Magnesium</b>		
ISOLYTE-S	1B		<i>magnesium sulfate IJ 50 %</i>	1B	
KCL 0.3%/D5W/NACL 0.9% ( <i>potassium chloride in dextrose &amp; sodium chloride</i> )	1B		<b>Phosphate</b>		
<i>lactated ringer's</i>	1B		<i>potassium phosphates 236 MG/ML-224 MG/ML</i>	1B	
NORMOSOL-M/D5W	1B		<b>Potassium</b>		
NORMOSOL-R	1B		<i>potassium acetate SOLN 2 MEQ/ML</i>	1B	
PLASMA-LYTE A ( <i>electrolyte-a</i> )	1B		<i>potassium bicarbonate TBEF</i>	1B	
PLASMA-LYTE-148 ( <i>electrolyte-148</i> )	1B		<i>potassium chloride microencapsulated crystals er</i>	1B	
<i>potassium chloride in dextrose 5 %-20 MEQ/L</i>	1B				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<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>mycophenolate mofetil CAPS</i>	1B	
<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	1B		<i>mycophenolate mofetil TABS</i>	1B	
Sodium			<i>mycophenolate sodium</i>	1B	
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	1B		NULOJIX	4	SP; PA
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>			PROGRAF PACK	2	PA
Chelating Agents			PROGRAF SOLN	2	
<i>penicillamine CAPS</i>	1B	PA	SIMULECT	3	
<i>penicillamine TABS</i>	1B	QL(8 ea daily)	<i>sirolimus TABS</i>	1B	
<i>trientine hcl 250 MG</i>	4	QL(8 ea daily); SP; PA	<i>tacrolimus CAPS</i>	1B	
Immunomodulators			THYMOGLOBULIN	4	SP; PA
<i>lenalidomide 20 MG</i>	4	QL(1 ea daily); PA	Irrigation Solutions		
<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 ea daily); SP; PA	<i>irrigation solutions, physiological</i>	1B	
THALOMID	4	QL(3 ea daily); SP; PA	<i>lactated ringer's (irrigation)</i>	1B	
Immunosuppressive Agents			<i>ringer's irrigation</i>	1B	
ATGAM	4	SP; PA	<i>water for irrigation, sterile</i>	1B	
AZATHIOPRINE	1B		Potassium Removing Agents		
<i>azathioprine TABS</i>	1B		LOKELMA	3	QL(1 ea daily); PA
<i>cyclosporine modified (for microemulsion) CAPS</i>	1B		<i>sodium polystyrene sulfonate POWD</i>	1B	
<i>cyclosporine modified (for microemulsion) SOLN</i>	1B		<i>sodium polystyrene sulfonate SUSP OR 15 GM/60ML</i>	1B	
<i>cyclosporine CAPS</i>	1B		<b>MOUTH/THROAT/DENTAL AGENTS</b>		
			Anesthetics Topical Oral		
			<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ml daily)

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

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Drug Name	Drug Tier	Requirements/Limits
PRENATAL TABS	2	QL(1 ea daily)
PRENATRIX TABS	2	QL(1 ea daily); RX/OTC
PRENATRYL TABS	2	QL(1 ea daily); RX/OTC
PREPLUS TABS	2	QL(1 ea daily); RX/OTC
PX PRENATAL MULTIVITAMINS TABS	2	QL(1 ea daily)
QC PRENATAL TABS	2	QL(1 ea daily)
RA PRENATAL FORMULA/FOLICACID TABS	2	QL(1 ea daily)
RA PRENATAL TABS	2	QL(1 ea daily)
SM PRENATAL VITAMINS TABS	2	QL(1 ea daily)
THERANATAL CORE NUTRITION TABS	2	QL(1 ea daily); RX/OTC
TRICARE TABS	2	QL(1 ea daily); RX/OTC
VITATHELY/GINGER TABS	2	QL(1 ea daily); RX/OTC
WESTAB PLUS TABS	2	QL(1 ea daily); RX/OTC
<b>MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms</b>		
Central Muscle Relaxants		
<i>baclofen TABS 10 MG, 20 MG</i>	1B	
<i>carisoprodol TABS</i>	1B	
<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 ea daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 ea daily)
<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)
<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
<i>orphenadrine citrate TB12</i>	1B	QL(2 ea daily)
<i>tizanidine hcl CAPS</i>	1B	
<i>tizanidine hcl TABS</i>	1B	
Direct Muscle Relaxants		

Drug Name	Drug Tier	Requirements/Limits
<i>dantrolene sodium CAPS</i>	1B	QL(4 ea daily)
Muscle Relaxant Combinations		
<i>carisoprodol w/ aspirin &amp; codeine</i>	3	PA
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus</b>		
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	RX/OTC
<i>olopatadine hcl (nasal)</i>	1B	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ml daily)
<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
Nasal Steroids		
<i>budesonide (nasal)</i>	1B	
<i>flunisolide (nasal) 0.025 %</i>	1B	1 rtl pack lmt per fill
<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ml per 30 days retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 ml daily); PA; RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1B	
XHANCE EXHU	3	PA
<b>NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles</b>		
ALS Agents		
<i>riluzole TABS</i>	3	
Neuromuscular Blocking Agent - Neurotoxins		
XEOMIN	3	PA
Nondepolarizing Muscle Relaxants		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>atracurium besylate 100 MG/10ML</i>	3	PA	AZASITE	3	QL(2.5 ml per 30 days retail; 2 ml per 30 days mail)
<b>NUTRIENTS</b>			<i>bacitracin (ophthalmic)</i>	3	
Proteins			BESIVANCE	3	PA
CLINIMIX 4.25%/DEXTROSE 10%	3		<i>ciprofloxacin hcl (ophth) SOLN</i>	1B	
CLINIMIX 4.25%/DEXTROSE 5%	3		<i>erythromycin (ophth)</i>	1B	
CLINIMIX E 5%/DEXTROSE 20%	3		<i>gatifloxacin (ophth)</i>	1B	
<b>OPHTHALMIC AGENTS - Drugs to Treat the Eye</b>			<i>gentamicin sulfate (ophth) OINT</i>	1B	
Beta-blockers - Ophthalmic			<i>gentamicin sulfate (ophth) SOLN</i>	1B	
<i>betaxolol hcl (ophth) SOLN</i>	1B		KLARITY-A	3	QL(2.5 ml per 30 days retail; 2 ml per 30 days mail)
<i>brimonidine tartrate-timolol maleate</i>	1B		<i>levofloxacin (ophth) 0.5 %</i>	1B	
<i>carteolol hcl (ophth)</i>	1B		<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B	
<i>dorzolamide hcl-timolol maleate</i>	1B		NATACYN	2	
<i>levobunolol hcl 0.5 %</i>	1B		<i>neomycin-bacitracin zn-polymyxin</i>	1B	
<i>timolol maleate (ophth) SOLG</i>	1B		<i>ofloxacin (ophth)</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B		<i>polymyxin b-trimethoprim</i>	1B	
Cycloplegic Mydriatics			<i>sulfacetamide sodium (ophth) SOLN</i>	1B	
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ml daily)	<i>tobramycin (ophth) SOLN</i>	1B	
<i>tropicamide SOLN 1 %</i>	1B		<i>trifluridine</i>	1B	
Miotics			ZIRGAN GEL	2	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B		<b>Ophthalmic Immunomodulators</b>		
Ophthalmic Adrenergic Agents			<i>cyclosporine (ophth) EMUL</i>	3	PA
<i>apraclonidine hcl</i>	1B		<b>Ophthalmic Local Anesthetics</b>		
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B		<i>proparacaine hcl</i>	1B	
IOPIDINE	3		<b>Ophthalmic Steroids</b>		
Ophthalmic Anti-infectives			ALREX SUSP ( <i>loteprednol etabonate</i> )	3	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ml daily)
<i>difluprednate</i>	1B	PA
<i>fluorometholone (ophth) SUSP</i>	1B	
FML FORTE SUSP	3	PA
FML OINT	3	PA
LOTEMAX OINT	3	PA
<i>loteprednol etabonate GEL</i>	1B	PA
<i>loteprednol etabonate SUSP</i>	1B	PA
MAXIDEX SUSP OP	3	PA
<i>neomycin-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	

Drug Name	Drug Tier	Requirements/ Limits
<i>bromfenac sodium (ophth) 0.09 %</i>	1B	
<i>cromolyn sodium (ophth)</i>	1B	
CYSTARAN	2	QL(2.143 ml daily); PA
<i>diclofenac sodium (ophth)</i>	1B	
<i>dorzolamide hcl</i>	1B	
<i>epinastine hcl (ophth)</i>	1B	
<i>flurbiprofen sodium</i>	1B	
<i>ketorolac tromethamine (ophth)</i>	1B	
<i>ketotifen fumarate (ophth) 0.035 %</i>	1B	
LASTACAFT	3	PA
NEVANAC	3	QL(0.2 ml daily); ST
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ml daily); RX/OTC
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	3	
<i>latanoprost SOLN</i>	1B	
<i>tafluprost</i>	1B	
<i>travoprost SOLN</i>	1B	
<b>OTIC AGENTS - Drugs to Treat the Ear</b>		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1B	QL(0.5 ml daily)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	1B	
<i>ofloxacin (otic)</i>	1B	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	1B	PA
<i>ciprofloxacin-fluocinolone acetate</i>	1B	QL(0.5 ea daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1B	QL(2 ml daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1B	
<b>Otic Steroids</b>		
<i>fluocinolone acetonide (otic)</i>	1B	
<i>hydrocortisone w/acetic acid</i>	1B	
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System</b>		
<b>Immune Serums</b>		
GAMMAGARD LIQUID 1 GM/10ML	4	SP; PA
GAMMAGARD LIQUID 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMMAGARD LIQUID 30 GM/300ML	4	PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	4	SP; PA
GAMMAKED 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMMAKED 1 GM/10ML	4	SP; PA
GAMUNEX-C 1 GM/10ML	4	SP; PA
GAMUNEX-C 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML, 40 GM/400ML	4	SP; PA
<b>Passive Immunizing Agents - Combinations</b>		
HYQVIA	4	PA
<b>PENICILLINS - Drugs to Treat Bacterial Infections</b>		
<b>Aminopenicillins</b>		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	

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

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

Drug Name	Drug Tier	Requirements/Limits
<i>chlordiazepoxide-amitriptyline</i>	1B	
<i>perphenazine-amitriptyline</i>	1B	QL(4 ea daily)
<b>Fibromyalgia Agents</b>		
SAVELLA TITRATION PACK MISC	2	1 rtl MAX fill; 365 rtl day(s) supply; PA
SAVELLA TABS	2	QL(2 ea daily); PA
<b>Movement Disorder Drug Therapy</b>		
AUSTEDO TABS	4	QL(4 ea daily); PA
INGREZZA CAPS	4	QL(1 ea daily); PA
INGREZZA CPPK	4	1 rtl MAX fill; 180 rtl day(s) supply; PA
<i>tetrabenazine</i>	4	QL(3 ea daily); SP; PA
<b>Multiple Sclerosis Agents</b>		
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 CDPK</i>	1B	QL(2 ea daily)
<i>dimethyl fumarate CPDR</i>	1B	QL(2 ea daily)
<i> fingolimod hcl</i>	4	QL(1 ea daily)
<i>glatiramer acetate SOSY 20 MG/ML</i>	3	QL(1 ml daily)
<i>glatiramer acetate SOSY 40 MG/ML</i>	3	QL(0.43 ml daily)
KESIMPTA	4	QL(0.0144 ml daily); PA
PLEGRIDY STARTER PACK SOPN	4	QL(0.036 ml daily); PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ml daily); PA
PLEGRIDY SOPN	4	QL(0.036 ml daily); PA

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Drug Name	Drug Tier	Requirements/Limits
PLEGRIDY SOSY SC	4	QL(0.036 ml daily); PA
REBIF REBIDOSE TITRATIONPACK SOAJ	4	1 rtl MAX fill; 365 rtl day(s) supply; SP; PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ml daily); SP; PA
REBIF TITRATION PACK SOSY	4	1 rtl MAX fill; 365 rtl day(s) supply; 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) 330 MG</i>	3	QL(2 ea daily); PA
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 ea daily); PA
Pseudobulbar Affect (PBA) Agents		
NUDEXTA	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	
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	

Drug Name	Drug Tier	Requirements/Limits
<i>varenicline tartrate TABS</i>	0	QL(2 ea daily)
<i>varenicline tartrate TBPK</i>	0	
Transthyretin Amyloidosis Agents		
TEGSEDI	4	PA
<b>RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions</b>		
Alpha-Proteinase Inhibitor (Human)		
PROLASTIN-C SOLN	4	PA
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 ea daily); SP; PA
ORKAMBI PACK 125 MG-100 MG, 188 MG-150 MG	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 100 MG-50 MG	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
<b>SULFONAMIDES - Drugs to Treat Bacterial Infections</b>		
Sulfonamides		
<i>sulfadiazine TABS</i>	1B	
<b>TETRACYCLINES - Drugs to Treat Bacterial Infections</b>		
Fluorocyclines		
XERAVA	4	PA
Glycylcyclines		

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Drug Name	Drug Tier	Requirements/Limits
<i>tigecycline</i>	1B	
<b>Tetracyclines</b>		
<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 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline (monohydrate) TABS 50 MG</i>	1B	
<i>doxycycline hyclate CAPS</i>	1B	QL(2 ea daily)
<i>doxycycline hyclate SOLR</i>	1B	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>minocycline hcl CAPS</i>	1B	QL(3 ea daily)
<i>minocycline hcl TABS</i>	1B	QL(3 ea daily)
<i>tetracycline hcl CAPS</i>	1B	QL(8 ea daily)
<b>THYROID AGENTS - Drugs to Regulate Thyroid Hormones</b>		
<b>Antithyroid Agents</b>		
<i>methimazole TABS</i>	1B	
<i>propylthiouracil</i>	1B	
<b>Thyroid Hormones</b>		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 ea daily)
<i>levothyroxine sodium TABS</i>	1B	
<i>liothyronine sodium SOLN</i>	1B	
<i>liothyronine sodium TABS</i>	1B	
NP THYROID 120 TABS	1B	QL(1 ea daily)
NP THYROID 15 TABS	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
NP THYROID 30 TABS	1B	QL(1 ea daily)
NP THYROID 60 TABS	1B	QL(1 ea daily)
NP THYROID 90 TABS	1B	QL(1 ea daily)
SYNTHROID TABS ( <i>levothyroxine sodium</i> )	2	
<b>TOXOIDS</b>		
<b>Toxoid Combinations</b>		
ADACEL SUSP	0	
BOOSTRIX SUSP	0	
BOOSTRIX SUSY	0	
DAPTACEL	0	
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	0	
INFANRIX	0	
KINRIX SUSY	0	
PEDIARIX SUSY	0	
PENTACEL	0	
QUADRACEL SUSP	0	
QUADRACEL SUSY	0	
TDVAX SUSP	0	
TENIVAC INJ	0	
TETANUS/DIPHThERIA TOXOIDS-ADSORBED ADULT SUSP	0	
<b>ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions</b>		
<b>Antispasmodics</b>		
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	1B	
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1B	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B	
<i>dicyclomine hcl CAPS</i>	1B	
<i>dicyclomine hcl SOLN OR</i>	1B	
<i>dicyclomine hcl TABS</i>	1B	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>glycopyrrolate SOLN IJ 0.2 MG/ML, 4 MG/20ML</i>	1B		<i>omeprazole magnesium CPDR</i>	1B	QL(4 ea daily)
<i>glycopyrrolate TABS 1 MG</i>	1B		<i>omeprazole CPDR</i>	1B	QL(2 ea daily)
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 ea daily)	<i>omeprazole TBEC</i>	1B	QL(2 ea daily)
<i>methscopolamine bromide</i>	1B		<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 ea daily)
<b>H-2 Antagonists</b>			<i>pantoprazole sodium TBEC 40 MG</i>	1B	
<i>cimetidine TABS</i>	1B	RX/OTC	<i>rabeprazole sodium TBEC</i>	3	QL(1 ea daily)
<i>famotidine in nacl SOLN</i>	1B		<b>Ulcer Drugs - Prostaglandins</b>		
<i>famotidine SOLN 20 MG/2ML</i>	1A		<i>misoprostol</i>	1B	QL(4 ea daily)
<i>famotidine SOLN 40 MG/4ML, 200 MG/20ML</i>	1B		<b>Ulcer Therapy Combinations</b>		
<i>famotidine SUSR</i>	1B	QL(10 ml daily)	<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 rtl MAX day(s) supply; 365 rtl lmt day(s); 14 mail MAX day(s) supply; 365 mail lmt day(s)
<i>famotidine TABS 20 MG, 40 MG</i>	1B		<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 ea daily); RX/OTC
<i>nizatidine CAPS</i>	1B		<b>URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms</b>		
<i>nizatidine SOLN</i>	1B	QL(20 ml daily)	<b>Urinary Antispasmodic - Antimuscarinics (Anticholinergic)</b>		
<i>ranitidine hcl TABS 150 MG</i>	1B		<i>darifenacin hydrobromide</i>	1B	QL(1 ea daily)
<b>Misc. Anti-Ulcer</b>			<i>fesoterodine fumarate</i>	1B	QL(1 ea daily); PA
<i>sucralfate SUSP</i>	1B	QL(40 ml daily)	<i>oxybutynin chloride SOLN</i>	1B	
<i>sucralfate TABS</i>	1B	QL(4 ea daily)	<i>oxybutynin chloride TABS 5 MG</i>	1B	
<b>Proton Pump Inhibitors</b>			<i>oxybutynin chloride TB24</i>	1B	
<i>dexlansoprazole</i>	3	QL(1 ea daily)	<i>solifenacin succinate TABS</i>	1B	QL(1 ea daily); PA
<i>esomeprazole magnesium CPDR 20 MG</i>	1B	QL(2 ea daily); RX/OTC	<i>tolterodine tartrate CP24</i>	1B	QL(1 ea daily)
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 ea daily)	<i>tolterodine tartrate TABS</i>	1B	
<i>esomeprazole magnesium TBEC</i>	1B	QL(2 ea daily)	<i>trosipium chloride CP24</i>	1B	QL(1 ea daily)
<i>lansoprazole CPDR 30 MG</i>	1B		<i>trosipium chloride TABS</i>	1B	QL(3 ea daily)
<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 ea daily); RX/OTC			
<i>NEXIUM 24HR TBEC (esomeprazole magnesium)</i>	1B	QL(2 ea daily)			

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Drug Name	Drug Tier	Requirements/Limits
<b>Urinary Antispasmodics - Cholinergic Agonists</b>		
<i>bethanechol chloride 25 MG</i>	1B	
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)
<b>Urinary Antispasmodics - Direct Muscle Relaxants</b>		
<i>flavoxate hcl</i>	1B	
<b>VACCINES</b>		
<b>Bacterial Vaccines</b>		
ACTHIB SOLR IM	0	
BEXSERO	0	
HIBERIX SOLR IJ	0	
MENACTRA	0	
MENQUADFI	0	
MENVEO SOLR	0	
PEDVAX HIB SUSP	0	
PNEUMOVAX 23	0	
PNEUMOVAX 23/1 DOSE	0	
PREVNAR 13	0	
PREVNAR 20	0	1 rtl MAX fill; 999 rtl day(s) supply
TRUMENBA	0	
VAXNEUVANCE	0	4 rtl MAX fill; 999 rtl day(s) supply
<b>Viral Vaccines</b>		
ABRYSVO	0	
AFLURIA QUADRIVALENT 2021-2022 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
AFLURIA QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply

Drug Name	Drug Tier	Requirements/Limits
AFLURIA QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
AFLURIA QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
AFLURIA QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
AFLURIA QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
AREXVY	0	
COMIRNATY 2023-24 SUSP	0	
COMIRNATY 2023-24 SUSY	0	
COMIRNATY SUSP	0	
ENGERIX-B SUSP 20 MCG/ML	0	3 rtl MAX fill; 365 rtl day(s) supply; 3 mail MAX fill
ENGERIX-B SUSY	0	3 rtl MAX fill; 365 rtl day(s) supply; 3 mail MAX fill
FLUAD QUADRIVALENT 2021-2022	0	1 rtl MAX fill; 180 rtl day(s) supply
FLUAD QUADRIVALENT 2022-2023	0	1 rtl MAX fill; 180 rtl day(s) supply
FLUAD QUADRIVALENT 2023-2024	0	1 rtl MAX fill; 180 rtl day(s) supply
FLUARIX QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply



Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUARIX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLUCELVAX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
FLUARIX QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLULAVAL QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
FLUBLOK QUADRIVALENT 2021-2022	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLULAVAL QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
FLUBLOK QUADRIVALENT 2022-2023	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLULAVAL QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
FLUBLOK QUADRIVALENT 2023-2024	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2021-2022 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLUZONE HIGH-DOSE PF 2021-2022	0	1 rtl MAX fill; 180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLUZONE HIGH-DOSE PF 2022-2023	0	1 rtl MAX fill; 180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLUZONE HIGH-DOSE PF 2023-2024	0	1 rtl MAX fill; 180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLUZONE QUADRIVALENT 2021-2022 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	FLUZONE QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply
			FLUZONE QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply

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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 rtl MAX fill; 180 rtl day(s) supply	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	0	
FLUZONE QUADRIVALENT 2023-2024 SUSP	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	0	
FLUZONE QUADRIVALENT 2023-2024 SUSY	0	Limit 1 dose per season; 1 rtl MAX fill; 180 rtl day(s) supply	PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	0	
GARDASIL 9 SUSP	0	3 rtl MAX fill; 365 rtl day(s) supply	PFIZER-BIONTECH COVID-19VACCINE SUSP	0	
GARDASIL 9 SUSY	0	3 rtl MAX fill; 365 rtl day(s) supply	PREHEVBRIO	0	3 rtl MAX fill; 365 rtl day(s) supply
HAVRIX	0		PRIORIX SUSR	0	3 rtl MAX fill; 365 rtl day(s) supply
HEPLISAV-B SOSY	0	2 rtl MAX fill; 292 rtl day(s) supply; 2 mail MAX fill	RECOMBIVAX HB SUSP	0	
IPOL INACTIVATED IPV	0		RECOMBIVAX HB SUSY	0	
M-M-R II SOLR	0	2 rtl MAX fill; 365 rtl day(s) supply	ROTARIX SUSP	0	
MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	0		ROTARIX SUSR	0	
MODERNA COVID-19 VACCINE6-11Y SUSP	0		ROTATEQ SOLN	0	
MODERNA COVID-19 VACCINE6MO-5Y SUSP	0		SHINGRIX	0	2 rtl MAX fill; 999 rtl day(s) supply; AL(At least 50 yrs old)
MODERNA COVID-19 VACCINE SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	0		SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	0	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	0		SPIKEVAX COVID-19 VACCINE SUSP	0	
			TWINRIX SUSY	0	
			VAQTA	0	
			VARIVAX INJ	0	2 rtl MAX fill; 365 rtl day(s) supply
			<b>VAGINAL AND RELATED PRODUCTS</b>		
			Miscellaneous Vaginal Products		
			INTRAROSA	3	QL(1 ea daily); PA

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Drug Name	Drug Tier	Requirements/Limits
<b>Spermicides</b>		
TODAY SPONGE MISC	0	
<b>Vaginal Anti-infectives</b>		
<i>clindamycin phosphate vaginal CREA</i>	1B	
<i>clotrimazole vaginal CREA 1 %</i>	1B	
GYNAZOLE-1	3	QL(5 gm per 30 days 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	
<b>Vaginal Anti-inflammatory Agents</b>		
<i>hydrocortisone vaginal</i>	1B	QL(15.15 gm daily)
<b>Vaginal Contraceptive - pH Modulators</b>		
PHEXXI	0	PV
<b>Vaginal Estrogens</b>		
<i>estradiol vaginal CREA</i>	1B	QL(2 gm daily)
<i>estradiol vaginal TABS</i>	1B	
FEMRING	3	PA
PREMARIN	2	QL(1.5 gm daily)
<b>VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions</b>		
<b>Anaphylaxis Therapy Agents</b>		
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	2 rtl MAX fill; 365 rtl day(s) supply; 2 mail MAX fill; QL(2 ea per fill retail; 2 per fill mail)

Drug Name	Drug Tier	Requirements/Limits
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1B	2 rtl MAX fill; 365 rtl day(s) supply; 2 mail MAX fill; QL(2 ea per fill retail; 2 per fill mail)
<b>Vasopressors</b>		
<i>midodrine hcl</i>	1B	
<b>VITAMINS</b>		
<b>Oil Soluble Vitamins</b>		
<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)
<b>Water Soluble Vitamins</b>		
<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	
<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>niacin TABS</i>	1A	
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butorphanol tartrate IJ 1 MG/ML, 2 MG/ML	7	capecitabine	23	CAYA DPRH	50
butorphanol tartrate NA 10 MG/ML	7	CAPRELSA	25	CAYSTON	21
cabergoline	45	captopril 12.5 MG	19	cefaclor CAPS	33
CABLIVI	47	captopril 25 MG, 50 MG, 100 MG	19	cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	33
CABOMETYX TABS	25	carbamazepine CHEW	11	cefadroxil CAPS	33
calcipotriene CREA	38	carbamazepine CP12 100 MG	11	cefadroxil SUSR	33
calcipotriene OINT	38	carbamazepine CP12 200 MG	11	cefadroxil TABS	33
calcipotriene SOLN	38	carbamazepine CP12 300 MG	11	cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG	33
calcipotriene-betamethasone dipropionate OINT	39	carbamazepine SUSP	11	cefdinir CAPS	34
calcipotriene-betamethasone		carbamazepine TABS	11	cefdinir SUSR	34
		carbamazepine TB12 100 MG, 400 MG	11	cefepime hcl SOLR IV 2 GM	34
		carbamazepine TB12 200 MG	11	cefixime CAPS	34
		carbidopa	27	cefixime SUSR	34
		carbidopa-levodopa TABS	27	cefotaxime sodium IJ 1 GM, 2 GM	34
				cefotetan disodium IJ 1 GM, 2 GM	33



cefoxitin sodium IV 1 GM, 2 GM ...	33	MG .....	22	ciprofloxacin hcl TABS .....	45
cefepodoxime proxetil SUSR .....	34	chlorpromazine hcl SOLN .....	29	ciprofloxacin in d5w 5 %-200	
cefepodoxime proxetil TABS .....	34	chlorpromazine hcl TABS .....	29	MG/100ML .....	45
cefprozil SUSR .....	33	chlorthalidone 25 MG, 50 MG .....	43	ciprofloxacin SUSR 5 GM/100ML,	
cefprozil TABS .....	33	chlorzoxazone TABS 500 MG .....	56	500 MG/5ML .....	45
ceftazidime IJ 1 GM, 6 GM .....	34	CHOLBAM .....	45	ciprofloxacin-dexamethasone .....	58
ceftriaxone sodium IJ 1 GM, 2 GM,		cholecalciferol CAPS 1.25 MG, 1.25		ciprofloxacin-fluocinolone acetonide .	
500 MG .....	34	MG, 10 MCG, 50 MCG, 400 UNIT,		58	
ceftriaxone sodium IJ 250 MG .....	34	2000 UNIT, 50000 UNIT .....	67	cisplatin SOLN 100 MG/100ML ...	22
cefuroxime axetil TABS .....	33	cholecalciferol TABS 10 MCG, 400		citalopram hydrobromide SOLN ...	13
cefuroxime sodium IJ 750 MG .....	33	UNIT .....	67	citalopram hydrobromide TABS 10	
celecoxib .....	3	cholestyramine light PACK .....	18	MG .....	13
CELONTIN (methsuximide) .....	12	cholestyramine light POWD .....	18	citalopram hydrobromide TABS 20	
cephalexin CAPS .....	33	cholestyramine PACK .....	18	MG .....	13
cephalexin SUSR .....	33	cholestyramine POWD .....	18	citalopram hydrobromide TABS 40	
CERDELGA .....	47	choline fenofibrate .....	18	MG .....	13
CEREZYME 400 UNIT .....	47	CHORIONIC GONADOTROPIN IM		clarithromycin SUSR .....	49
cetirizine hcl TABS .....	18	44		clarithromycin TABS .....	49
cevimeline hcl .....	55	ciclopirox GEL .....	37	clarithromycin TB24 .....	49
CHEMET .....	16	ciclopirox olamine CREA .....	37	CLASSIC PRENATAL TABS .....	55
CHEMSTRIP-K STRP .....	42	ciclopirox olamine SUSP .....	37	clemastine fumarate SYRP .....	17
chloramphenicol sodium succinate		ciclopirox SHAM .....	37	clemastine fumarate TABS 2.68 MG .	
21		ciclopirox SOLN .....	37	17	
chlordiazepoxide hcl CAPS .....	8	cidofovir .....	30	CLIMARA PRO .....	45
chlordiazepoxide hcl-clidinium		cilostazol .....	47	clindamycin hcl .....	21
bromide .....	62	CIMDUO .....	29	clindamycin palmitate hydrochloride .	
chlordiazepoxide-amitriptyline .....	60	cimetidine TABS .....	63	21	
chlorhexidine gluconate (mouth-		cinacalcet hcl .....	44	clindamycin phosphate (topical)	
throat) .....	55	CIPRO SUSR .....	45	FOAM .....	36
chloroquine phosphate TABS 250		ciprofloxacin hcl (ophth) SOLN ...	57	clindamycin phosphate (topical) GEL	
MG .....	22	ciprofloxacin hcl (otic) .....	58	36	
chloroquine phosphate TABS 500				clindamycin phosphate (topical)	
				LOTN .....	36
				clindamycin phosphate (topical)	

SOLN .....	36	clomipramine hcl .....	14	COMETRIQ KIT .....	25
clindamycin phosphate (topical) SWAB .....	36	clonazepam TABS .....	11	COMIRNATY 2023-24 SUSP .....	64
clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML .....	21	clonidine .....	19	COMIRNATY 2023-24 SUSY .....	64
clindamycin phosphate vaginal CREA .....	67	clonidine hcl (adhd) TB12 .....	1	COMIRNATY SUSP .....	64
clindamycin phosphate-benzoyl peroxide (refrigerate) .....	37	clonidine hcl TABS .....	19	COMPLERA .....	29
clindamycin phosphate-benzoyl peroxide GEL 5 %-1 % .....	37	clopidogrel bisulfate 300 MG .....	47	CONTRACE .....	1
clindamycin phosphate-tretinoin ..	37	clopidogrel bisulfate 75 MG .....	47	COPIKTRA .....	25
CLINIMIX 4.25%/DEXTROSE 10% 57		clorazepate dipotassium TABS .....	8	CORDRAN TAPE .....	40
CLINIMIX 4.25%/DEXTROSE 5%	57	clotrimazole (topical) CREA .....	37	CORLANOR SOLN .....	33
CLINIMIX E 5%/DEXTROSE 20% 57		clotrimazole (topical) SOLN .....	37	CORLANOR TABS .....	33
clobazam SUSP .....	11	clotrimazole .....	55	CORTISPORIN-TC .....	58
clobazam TABS .....	11	clotrimazole vaginal CREA 1 % ...	67	COSENTYX SENSOREADY PEN SOAJ .....	38
clobetasol propionate CREA 0.05 % . 40		clotrimazole w/ betamethasone CREA .....	37	COSENTYX SOSY 150 MG/ML ...	38
clobetasol propionate emollient base 0.05 % .....	39	clotrimazole w/ betamethasone LOTN .....	37	COSENTYX SOSY 75 MG/0.5ML .	38
clobetasol propionate FOAM .....	40	clozapine TABS .....	28	COSENTYX UNOREADY SOAJ ..	38
clobetasol propionate GEL 0.05 %	40	clozapine TBDP 100 MG .....	28	CREON CPEP .....	42
clobetasol propionate OINT 0.05 % 40		clozapine TBDP 12.5 MG, 150 MG 28		CRESEMBA CAPS 186 MG .....	17
clobetasol propionate SOLN 0.05 % . 40		clozapine TBDP 25 MG .....	28	cromolyn sodium (ophth) .....	58
clocortolone pivalate .....	40	COARTEM .....	22	cromolyn sodium NEBU .....	8
clofarabine .....	23	codeine sulfate TABS 30 MG .....	5	crotamiton LOTN .....	41
clomiphene citrate TABS .....	44	CODEINE SULFATE TABS .....	5	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 .....	55
		colchicine TABS .....	47	cyanocobalamin SOLN IJ 1000 MCG/ML .....	47
		colchicine w/ probenecid .....	47	cyclobenzaprine hcl TABS 5 MG, 10 MG .....	56
		colesevelam hcl PACK .....	18	cyclophosphamide CAPS .....	23
		colesevelam hcl TABS .....	18	cyclophosphamide SOLR IJ .....	23
		colestipol hcl GRAN .....	18	cycloserine .....	22
		colestipol hcl PACK .....	18		
		colestipol hcl TABS .....	18		

cyclosporine (ophth) EMUL .....	57	darunavir TABS .....	29	(biphasic) .....	34
cyclosporine CAPS .....	54	DAURISMO .....	24	desogestrel-ethinyl estradiol (triphasic) .....	34
cyclosporine modified (for microemulsion) CAPS .....	54	DEBACTEROL .....	55	desonide CREA .....	40
cyclosporine modified (for microemulsion) SOLN .....	54	decitabine .....	23	desonide LOTN .....	40
cyclosporine SOLN IV 50 MG/ML .	54	deferasirox PACK .....	16	desonide OINT .....	40
CYLTEZO AJKT .....	3	deferasirox TABS .....	16	desoximetasone CREA 0.25 % ....	40
CYLTEZO PSKT 10 MG/0.2ML .....	3	deferasirox TBSO .....	16	desoximetasone GEL .....	40
CYLTEZO PSKT 20 MG/0.4ML, 40 MG/0.8ML .....	3	deferiprone TABS 500 MG .....	16	desoximetasone OINT 0.25 % .....	40
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT .....	3	deflazacort TABS .....	35	desvenlafaxine succinate 100 MG .	14
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT .....	3	DELESTROGEN 10 MG/ML (estradiol valerate) .....	45	desvenlafaxine succinate 25 MG, 50 MG .....	14
cyproheptadine hcl SYRP .....	18	DELSTRIGO .....	29	dexamethasone ELIX .....	35
cyproheptadine hcl TABS .....	18	demeclocycline hcl TABS .....	62	DEXAMETHASONE INTENSOL CONC .....	35
CYSTAGON CAPS .....	46	DEPO-ESTRADIOL .....	45	dexamethasone sodium phosphate (ophth) .....	58
CYSTARAN .....	58	DEPO-MEDROL SUSP .....	35	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML .....	35
cytarabine SOLN .....	23	DEPO-SUBQ PROVERA 104 SUSY SC .....	35	dexamethasone sodium phosphate SOSY IJ 4 MG/ML .....	35
dabigatran etexilate mesylate CAPS . 10		desipramine hcl TABS .....	14	dexamethasone SOLN .....	35
dacarbazine SOLR 200 MG .....	27	desloratadine TABS .....	18	dexamethasone TABS 0.5 MG, 0.75 MG .....	35
dactinomycin .....	25	desloratadine TBDP 2.5 MG .....	18	dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG .....	35
dalfampridine .....	60	desmopressin acetate SOLN IJ ...	44	dexchlorpheniramine maleate SOLN . 17	
danazol CAPS .....	7	DESMOPRESSIN ACETATE SOLN NA .....	44	dexlansoprazole .....	63
dantrolene sodium CAPS .....	56	desmopressin acetate spray .....	44	dexmethylphenidate hcl CP24 .....	1
dapsone .....	21	desmopressin acetate spray refrigerated .....	44	dexmethylphenidate hcl TABS .....	1
DAPTACEL .....	62	desmopressin acetate TABS 0.1 MG 44		dextroamphetamine sulfate CP24 10 MG, 15 MG .....	1
daptomycin 500 MG .....	21	desmopressin acetate TABS 0.2 MG 44			
darifenacin hydrobromide .....	63	desogestrel & ethinyl estradiol ....	34		
		desogestrel-ethinyl estradiol			

dextroamphetamine sulfate CP24 5 MG .....	1	diflorasone diacetate CREA .....	40	DIPENTUM .....	46
dextroamphetamine sulfate TABS 5 MG, 10 MG .....	1	diflorasone diacetate OINT .....	40	diphenhydramine hcl CAPS 50 MG 18	
dextrose in lactated ringers .....	53	diflunisal TABS .....	4	diphenhydramine hcl ELIX 12.5 MG/5ML .....	18
DIACOMIT CAPS 250 MG .....	11	difluprednate .....	58	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML .....	18
DIACOMIT CAPS 500 MG .....	11	digoxin SOLN OR 0.05 MG/ML .....	32	diphenhydramine hcl SOLN 50 MG/ML .....	18
DIACOMIT PACK 250 MG .....	11	digoxin TABS 0.0625 MG, 0.125 MG, 0.25 MG, 62.5 MCG, 125 MCG, 250 MCG .....	32	diphenoxylate w/ atropine LIQD ...	16
DIACOMIT PACK 500 MG .....	11	dihydroergotamine mesylate SOLN IJ 1 MG/ML .....	52	diphenoxylate w/ atropine TABS ...	16
diazepam (anticonvulsant) GEL ...	11	dihydroergotamine mesylate SOLN NA 4 MG/ML .....	52	DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP ...	62
diazepam CONC .....	8	DILANTIN (phenytoin sodium extended) .....	12	dipyridamole .....	47
diazepam SOLN OR 5 MG/5ML ....	8	DILANTIN .....	12	disopyramide phosphate CAPS ....	8
diazepam TABS .....	8	DILANTIN INFATABS CHEW (phenytoin) .....	12	disulfiram .....	60
diazoxide .....	15	DILANTIN-125 SUSP (phenytoin) .	12	DIURIL SUSP .....	43
dichlorphenamide .....	42	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG .....	32	divalproex sodium TB24 .....	12
diclofenac epolamine PTCH EX ...	38	diltiazem hcl coated beads CP24 180 MG, 240 MG .....	32	divalproex sodium TBEC .....	12
diclofenac potassium TABS 50 MG .	3	diltiazem hcl CP12 .....	32	docetaxel CONC 20 MG/ML .....	27
diclofenac sodium (actinic keratoses) EX .....	38	diltiazem hcl CP24 .....	32	docetaxel SOLN 20 MG/2ML .....	27
diclofenac sodium (ophth) .....	58	diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG .....	32	docosate calcium .....	49
diclofenac sodium (topical) GEL EX 38		diltiazem hcl SOLN 50 MG/10ML ..	32	docosate sodium CAPS 100 MG ..	49
diclofenac sodium TB24 .....	3	DILTIAZEM HCL SOLR .....	32	docosate sodium CAPS 250 MG ..	49
diclofenac sodium TBEC .....	3	diltiazem hcl TABS .....	32	dofetilide .....	8
diclofenac w/ misoprostol TBEC ....	3	diltiazem hcl TB24 .....	32	donepezil hydrochloride TABS 10 MG .....	60
dicloxacillin sodium .....	59	dimethyl fumarate CDPK .....	60	donepezil hydrochloride TABS 5 MG .	60
dicyclomine hcl CAPS .....	62	dimethyl fumarate CPDR .....	60	donepezil hydrochloride TBDP 10 MG .....	60
dicyclomine hcl SOLN OR .....	62			donepezil hydrochloride TBDP 5 MG	
dicyclomine hcl TABS .....	62				
DIFFERIN LOTN .....	37				
DIFICID TABS .....	50				

60	levomefolate calcium	34	ELIQUIS TABS	10
DOPTELET	DROXIA CAPS	48	ELLA	35
dorzolamide hcl	DUAVEE	58	ELMIRON CAPS	46
dorzolamide hcl-timolol maleate	DULERA	57	EMCYT	24
DOVATO	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	29	EMFLAZA SUSP	35
doxazosin mesylate	duloxetine hcl CPEP 40 MG	19	EMFLAZA TABS (deflazacort)	35
doxepin hcl (antipruritic)	DUREX EXTRA SENSITIVE THIN DEVI	38	EMGALITY SOAJ	52
doxepin hcl (sleep)	dutasteride	48	EMGALITY SOSY 100 MG/ML	52
doxepin hcl CAPS	dutasteride-tamsulosin hcl	14	EMGALITY SOSY 120 MG/ML	52
doxepin hcl CONC	econazole nitrate CREA	14	EMSAM	13
doxercalciferol CAPS	EDARBI	44	emtricitabine CAPS	29
doxercalciferol SOLN	EDURANT	44	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG	29
doxorubicin hcl liposomal	efavirenz CAPS 200 MG	25	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	29
doxorubicin hcl SOLN	efavirenz CAPS 50 MG	25	EMTRIVA SOLN	29
doxorubicin hcl SOLR 10 MG, 50 MG	efavirenz TABS	25	EMVERM CHEW	7
doxycycline (monohydrate) CAPS 50 MG, 100 MG	efavirenz-emtricitabine-tenofovir disoproxil fumarate	62	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20	
doxycycline (monohydrate) CAPS 75 MG	efavirenz-lamivudine-tenofovir disoproxil fumarate	62	enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20	
doxycycline (monohydrate) TABS 100 MG	EGRIFTA 2 MG	62	enalapril maleate TABS	19
doxycycline (monohydrate) TABS 50 MG	EGRIFTA SV	62	ENBREL MINI SOCT	4
doxycycline hyclate CAPS	ELAPRASE	62	ENBREL SOLN	4
doxycycline hyclate SOLR	electrolyte-148	62	ENBREL SOLR	4
doxycycline hyclate TABS 20 MG, 100 MG	electrolyte-a	62	ENBREL SOSY 25 MG/0.5ML	4
doxylamine-pyridoxine TBEC	ELESTRIN GEL	17	ENBREL SOSY 50 MG/ML	4
dronabinol CAPS	eletriptan hydrobromide	17	ENBREL SURECLICK SOAJ	4
drosiprenone-ethinyl estradiol	ELIGARD KIT SC 7.5 MG	34	ENGERIX-B SUSP 20 MCG/ML	64
drosiprenone-ethinyl estradiol-	ELIGARD SC 22.5 MG, 30 MG, 45 MG	34	ENGERIX-B SUSY	64
	ELIQUIS STARTER PACK TBPK	10		

enoxaparin sodium SOLN IJ 300 MG/3ML .....	10	ergocalciferol CAPS .....	67	estradiol GEL 0.06 % .....	45
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML .....	10	ergocalciferol SOLN OR .....	67	estradiol GEL .....	45
enoxaparin sodium SOSY 30 MG/0.3ML .....	10	ergoloid mesylates TABS .....	61	estradiol PTTW .....	45
enoxaparin sodium SOSY 40 MG/0.4ML .....	10	ERGOMAR SUBL .....	52	estradiol PTWK .....	45
enoxaparin sodium SOSY 60 MG/0.6ML .....	10	ergotamine w/ caffeine TABS .....	52	estradiol TABS .....	45
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML .....	10	ERIVEDGE .....	24	estradiol vaginal CREA .....	67
ENSPRYNG .....	54	ERLEADA 240 MG .....	24	estradiol vaginal TABS .....	67
entacapone .....	27	ERLEADA 60 MG .....	24	estradiol valerate .....	45
entecavir TABS .....	30	erlotinib hcl .....	24	ESTROGEL GEL 0.06 % (estradiol) 45	
EPIDIOLEX .....	11	ERTACZO .....	37	eszopiclone .....	48
epinastine hcl (ophth) .....	58	ertapenem sodium IJ .....	21	ethacrynic acid .....	43
epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML .....	67	erythromycin (acne aid) PADS .....	37	ethambutol hcl TABS .....	22
epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML .....	67	erythromycin (acne aid) SOLN .....	37	ethosuximide CAPS .....	12
EPIVIR HBV SOLN .....	30	erythromycin (ophth) .....	57	ethosuximide SOLN .....	12
eplerenone .....	20	erythromycin base CPEP .....	49	ethynodiol diacet & eth estrad .....	34
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	48	erythromycin base TABS .....	49	etodolac CAPS .....	3
epoprostenol sodium .....	32	erythromycin base TBEC .....	49	etodolac TABS .....	3
EQL PRENATAL FORMULA TABS 55		erythromycin ethylsuccinate SUSR 49		etonogestrel-ethinyl estradiol .....	35
EQUETRO 100 MG .....	28	erythromycin ethylsuccinate TABS 50		ETOPOPHOS .....	27
EQUETRO 200 MG .....	28	escitalopram oxalate SOLN .....	13	etoposide CAPS .....	27
EQUETRO 300 MG .....	28	escitalopram oxalate TABS 10 MG 13		etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML .....	27
ERAXIS .....	17	escitalopram oxalate TABS 20 MG 13		etravirine 100 MG .....	29
ERBITUX .....	24	escitalopram oxalate TABS 5 MG .	13	etravirine 200 MG .....	29
		esomeprazole magnesium CPDR 20 MG .....	63	EUCRISA .....	41
		esomeprazole magnesium CPDR 40 MG .....	63	EVAMIST SOLN .....	45
		esomeprazole magnesium TBEC .	63	everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG .....	54
		estazolam .....	48	everolimus TABS .....	25
				EVOTAZ .....	29

exemestane .....	24	fenoprofen calcium TABS .....	3	2024 SUSY .....	65
ezetimibe .....	19	FENSOLVI SC .....	44	FLUBLOK QUADRIVALENT 2021-2022 .....	65
ezetimibe-simvastatin .....	18	fentanyl citrate LPOP .....	5	FLUBLOK QUADRIVALENT 2022-2023 .....	65
famciclovir 125 MG, 250 MG .....	31	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR .....	5	FLUBLOK QUADRIVALENT 2023-2024 .....	65
famciclovir 500 MG .....	31	ferrous fumarate-folic acid .....	48	FLUCELVAX QUADRIVALENT 2021-2022 SUSP .....	65
famotidine in nacl SOLN .....	63	ferrous sulfate SOLN 15 MG/ML ..	48	FLUCELVAX QUADRIVALENT 2021-2022 SUSY .....	65
famotidine SOLN 20 MG/2ML .....	63	ferrous sulfate TABS 65 MG, 325 MG .....	48	FLUCELVAX QUADRIVALENT 2022-2023 SUSP .....	65
famotidine SOLN 40 MG/4ML, 200 MG/20ML .....	63	ferrous sulfate TBEC 325 MG .....	48	FLUCELVAX QUADRIVALENT 2022-2023 SUSY .....	65
famotidine SUSR .....	63	fesoterodine fumarate .....	63	FLUCELVAX QUADRIVALENT 2023-2024 SUSP .....	65
famotidine TABS 20 MG, 40 MG ..	63	FETZIMA CP24 .....	14	FLUCELVAX QUADRIVALENT 2023-2024 SUSY .....	65
FANAPT .....	28	FETZIMA TITRATION PACK C4PK 14		FLUCELVAX QUADRIVALENT 2023-2024 SUSY .....	65
FANAPT TITRATION PACK .....	28	finasteride .....	47	FLUCELVAX QUADRIVALENT 2023-2024 SUSY .....	65
FANTASY LUBRICATED MISC ...	50	fingolimod hcl .....	60	fluconazole SUSR .....	17
FANTASY LUBRICATED/SPERMICIDE MISC 50		FIRDAPSE .....	22	fluconazole TABS .....	17
FARXIGA .....	16	FIRMAGON .....	24	flucytosine .....	17
FASENRA PEN SOAJ .....	8	flavoxate hcl .....	64	fludarabine phosphate SOLN .....	23
FASENRA SOSY .....	8	flecainide acetate .....	8	fludarabine phosphate SOLR .....	23
FC2 FEMALE CONDOM .....	50	floxuridine .....	23	fludrocortisone acetate TABS .....	36
febuxostat .....	47	FLUAD QUADRIVALENT 2021-2022 .....	64	FLULAVAL QUADRIVALENT 2021-2022 SUSY .....	65
felbamate SUSP .....	12	FLUAD QUADRIVALENT 2022-2023 .....	64	FLULAVAL QUADRIVALENT 2022-2023 SUSY .....	65
felbamate TABS 400 MG .....	12	FLUAD QUADRIVALENT 2023-2024 .....	64	FLULAVAL QUADRIVALENT 2023-2024 SUSY .....	65
felbamate TABS 600 MG .....	12	FLUARIX QUADRIVALENT 2021-2022 SUSY .....	64	FLUMIST QUADRIVALENT .....	65
felodipine .....	32	FLUARIX QUADRIVALENT 2022-2023 SUSY .....	65	flunisolide (nasal) 0.025 % .....	56
FEMCAP DEVI .....	50	FLUARIX QUADRIVALENT 2023-		fluocinolone acetonide (otic) .....	59
FEMRING .....	67				
fenofibrate micronized 67 MG, 134 MG, 200 MG .....	18				
fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG .....	18				

fluocinolone acetonide CREA 0.01 % 40	flurbiprofen sodium .....58	2023 SUSY .....66
fluocinolone acetonide CREA 0.025 % .....40	flurbiprofen TABS .....4	FLUZONE QUADRIVALENT 2023- 2024 SUSP .....66
fluocinolone acetonide OIL .....40	flutamide .....24	FLUZONE QUADRIVALENT 2023- 2024 SUSY .....66
fluocinolone acetonide OINT .....40	fluticasone furoate-vilanterol .....9	FML FORTE SUSP .....58
fluocinolone acetonide SOLN .....40	fluticasone propionate (inhalation) AEPB .....9	FML OINT .....58
fluocinonide CREA 0.05 % .....40	fluticasone propionate (nasal) SUSP . 56	folic acid TABS .....47
fluocinonide emulsified base .....40	fluticasone propionate CREA 0.05 % 40	fondaparinux sodium 10 MG/0.8ML 10
fluocinonide GEL .....40	fluticasone propionate hfa .....9	fondaparinux sodium 2.5 MG/0.5ML . 10
fluocinonide OINT .....40	fluticasone propionate LOTN .....40	fondaparinux sodium 5 MG/0.4ML .10
fluocinonide SOLN .....40	fluticasone propionate OINT .....40	fondaparinux sodium 7.5 MG/0.6ML . 10
fluorometholone (ophth) SUSP ....58	fluticasone-salmeterol AEPB .....9	FORA GTEL BLOOD KETONE TEST STRIPS .....42
fluorouracil (topical) CREA 5 % ....38	fluticasone-salmeterol AERO .....9	FORA TEST N' GO ADVANCE/VOICE/6 CONNECT ..42
fluorouracil (topical) SOLN .....38	fluvastatin sodium CAPS 20 MG ..18	formoterol fumarate NEBU .....9
fluorouracil 500 MG/10ML .....23	fluvastatin sodium CAPS 40 MG ..18	FORTEO SOPN (teriparatide (recombinant)) .....43
fluoxetine hcl CAPS 10 MG .....13	fluvoxamine maleate TABS 100 MG . 13	FOSAMAX PLUS D .....43
fluoxetine hcl CAPS 20 MG .....13	fluvoxamine maleate TABS 25 MG, 50 MG .....13	fosamprenavir calcium TABS .....30
fluoxetine hcl CAPS 40 MG .....13	FLUZONE HIGH-DOSE PF 2021- 2022 .....65	fosfomycin tromethamine .....21
fluoxetine hcl CPDR .....13	FLUZONE HIGH-DOSE PF 2022- 2023 .....65	fosinopril sodium & hydrochlorothiazide .....20
fluoxetine hcl SOLN .....13	FLUZONE HIGH-DOSE PF 2023- 2024 .....65	fosinopril sodium .....19
fluoxetine hcl TABS 10 MG, 60 MG 13	FLUZONE QUADRIVALENT 2021- 2022 SUSP .....65	fosphenytoin sodium .....12
fluoxetine hcl TABS 20 MG .....13	FLUZONE QUADRIVALENT 2021- 2022 SUSY .....65	FRAGMIN SOSY .....10
fluphenazine hcl CONC .....29	FLUZONE QUADRIVALENT 2022- 2023 SUSP .....65	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM .....51
fluphenazine hcl ELIX .....29	FLUZONE QUADRIVALENT 2022- 2023 SUSY .....65	FREESTYLE LIBRE 14
fluphenazine hcl SOLN .....29	FLUZONE QUADRIVALENT 2022- 2023 SUSP .....65	
fluphenazine hcl TABS .....29	FLUZONE QUADRIVALENT 2022- 2023 SUSY .....65	
flurandrenolide CREA .....40		
flurandrenolide LOTN .....40		
flurazepam hcl .....48		





GOJJI BLOOD KETONE TEST STRIPS .....	42	HEPLISAV-B SOSY .....	66	MG-7.5 MG .....	6
granisetron hcl SOLN IV 1 MG/ML	16	HIBERIX SOLR IJ .....	64	hydrocodone-acetaminophen TABS	
granisetron hcl TABS .....	16	HUMATROPE CART IJ .....	44	325 MG-10 MG, 325 MG-5 MG, 325	
GRASTEK SUBL .....	2	HUMIRA PEDIATRIC CROHNS		MG-7.5 MG .....	6
griseofulvin microsize SUSP .....	17	DISEASE STARTER PACK PSKT 80		hydrocodone-ibuprofen 10 MG-200	
griseofulvin microsize TABS .....	17	MG/0.8ML .....	3	MG, 5 MG-200 MG .....	6
griseofulvin ultramicrosize .....	17	HUMIRA PEN PNKT 80 MG/0.8ML	3	hydrocodone-ibuprofen 7.5 MG-200	
guanfacine hcl (adhd) .....	1	HUMIRA PEN PNKT .....	3	MG .....	6
guanfacine hcl .....	19	HUMIRA PEN-CD/UC/HS STARTER		hydrocortisone (intrarectal) .....	7
GNAZOLE-1 .....	67	PNKT .....	3	hydrocortisone (rectal) EX .....	7
HADLIMA PUSHTOUCH SOAJ .....	3	HUMIRA PEN-PEDIATRIC UC		hydrocortisone (topical) CREA 1 %,	
HADLIMA SOSY .....	3	STARTER PACK PNKT .....	3	2.5 % .....	40
HAEGARDA SOLR SC .....	47	HUMIRA PEN-PS/UV STARTER		hydrocortisone (topical) LOTN 2.5 % .	
HALAVEN .....	27	PNKT .....	3	40	
halcinonide CREA .....	40	HUMIRA PSKT .....	3	hydrocortisone (topical) OINT 1 %,	
halobetasol propionate CREA .....	40	HUMULIN R U-500		2.5 % .....	40
halobetasol propionate OINT .....	40	(CONCENTRATED) SOLN SC .....	15	hydrocortisone acetate (rectal) .....	7
HALOG OINT .....	40	HUMULIN R U-500 KWIKPEN SOPN		hydrocortisone butyrate CREA .....	40
haloperidol decanoate .....	28	SC .....	15	hydrocortisone butyrate OINT .....	40
haloperidol lactate CONC .....	28	HYCAMTIN CAPS .....	27	hydrocortisone butyrate SOLN .....	40
haloperidol lactate SOLN .....	28	hydralazine hcl SOLN .....	20	hydrocortisone TABS .....	35
haloperidol TABS .....	28	hydralazine hcl TABS .....	20	hydrocortisone vaginal .....	67
HAVRIX .....	66	hydrochlorothiazide CAPS .....	43	hydrocortisone valerate CREA .....	40
HEALON PRO SOSY .....	58	hydrochlorothiazide TABS 12.5 MG		hydrocortisone valerate OINT .....	40
HEMANGEOL SOLN OR .....	31	43		hydrocortisone w/acetic acid .....	59
heparin sodium (porcine) SOLN IJ		hydrochlorothiazide TABS 25 MG, 50		hydromorphone hcl LIQD .....	5
5000 UNIT/ML, 10000 UNIT/ML,		MG .....	43	hydromorphone hcl SOLN IJ 10	
20000 UNIT/ML .....	10	hydrocodone polistirex-		MG/ML, 50 MG/5ML, 500 MG/50ML .	
HEPARIN SODIUM/NACL 0.45%		chlorpheniramine polistirex SUER	36	5	
SOLN IV 0.45 %-12500 UNIT/250ML		hydrocodone-acetaminophen SOLN		hydromorphone hcl TABS .....	5
10		108 MG/5ML-2.5 MG/5ML, 217		hydromorphone hcl TB24 32 MG ...	5
		MG/10ML-5 MG/10ML, 325		hydromorphone hcl TB24 8 MG, 12	
		MG/15ML-7.5 MG/15ML .....	6	MG, 16 MG .....	5
		hydrocodone-acetaminophen TABS			
		300 MG-10 MG, 300 MG-5 MG, 300			

hydroxychloroquine sulfate 200 MG 22	imipramine hcl TABS .....14	INTRON A SOLR 18000000 UNIT 27
hydroxyurea .....27	imipramine pamoate .....14	IONOSOL-MB/DEXTROSE 5% ...53
hydroxyzine hcl SOLN 50 MG/ML .. 8	imiquimod 5 % ..... 41	IOPIDINE .....57
hydroxyzine hcl SYRP .....8	IMPAVIDO .....20	IPOL INACTIVATED IPV .....66
hydroxyzine hcl TABS .....8	INCRELEX ..... 44	ipratropium bromide (nasal) 0.03 % 56
hydroxyzine pamoate CAPS .....8	INCRUSE ELLIPTA .....9	ipratropium bromide (nasal) 0.06 % 56
HYPERSAL NEBU .....36	indapamide TABS 1.25 MG .....43	ipratropium bromide SOLN 0.02 % . 9
HYQVIA ..... 59	indapamide TABS 2.5 MG .....43	ipratropium-albuterol SOLN .....9
ibandronate sodium SOLN .....43	indomethacin CAPS 25 MG, 50 MG 4	irbesartan .....19
ibandronate sodium TABS .....43	indomethacin CPCR ..... 4	irbesartan-hydrochlorothiazide ...20
IBRANCE CAPS .....25	INFANRIX ..... 62	IRESSA (gefitinib) .....24
IBRANCE TABS .....25	INFLECTRA SOLR ..... 46	irinotecan hcl 40 MG/2ML, 100 MG/5ML .....27
ibuprofen SUSP 100 MG/5ML ..... 4	INGREZZA CAPS .....60	irrigation solutions, physiological ..54
ibuprofen TABS 400 MG, 600 MG ..4	INGREZZA CPPK .....60	ISENTRESS CHEW ..... 30
ibuprofen TABS 800 MG .....4	INLYTA .....23	ISENTRESS HD TABS ..... 30
icatibant acetate SOLN .....47	INREBIC .....25	ISENTRESS TABS ..... 30
icatibant acetate SOSY .....47	INSULIN ASPART FLEXPEN SOPN . 15	ISOLYTE-P/DEXTROSE 5% .....53
ICLUSIG .....25	INSULIN ASPART PENFILL SOCT 15	ISOLYTE-S .....53
icosapent ethyl 1 GM ..... 18	INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN .....15	isoniazid SOLN ..... 22
idarubicin hcl 20 MG/20ML .....25	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP .....15	isoniazid SYRP ..... 22
idarubicin hcl 5 MG/5ML, 10 MG/10ML .....25	INSULIN ASPART SOLN IJ ..... 15	isoniazid TABS .....22
ifosfamide SOLN 1 GM/20ML .....23	INSULIN DEGLUDEC FLEXTOUCH SOPN ..... 15	isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG ..... 7
ifosfamide SOLR .....23	INSULIN DEGLUDEC SOLN .....15	isosorbide dinitrate-hydralazine hcl 32
imatinib mesylate .....25	INTELENCE 25 MG .....30	isosorbide mononitrate TABS .....7
IMBRUVICA CAPS 140 MG .....25	INTRAROSA ..... 66	isosorbide mononitrate TB24 ..... 7
IMBRUVICA CAPS 70 MG .....25		isotretinoin 10 MG, 20 MG, 30 MG, 40 MG .....37
IMBRUVICA SUSP .....25		
IMBRUVICA TABS .....25		
imipenem-cilastatin IV ..... 21		

isradipine CAPS .....	32	ketorolac tromethamine TABS .....	4	KOSELUGO .....	26
itraconazole CAPS .....	17	KETOSTIX STRP .....	42	KP PRENATAL MULTIVITAMINS TABS .....	55
itraconazole SOLN .....	17	ketotifen fumarate (ophth) 0.035 % 58		KRINTAFEL .....	22
ivermectin (pediculicide) .....	41	KEVZARA SOAJ .....	3	K-Y ME & YOU EXTRA LUBRICATED DEVI .....	50
ivermectin .....	7	KEVZARA SOSY .....	3	K-Y ME & YOU INTENSE DEVI ...	50
IXEMPRA KIT 15 MG .....	27	KIMONO COLORS DEVI .....	50	KYLEENA .....	35
JAKAFI .....	25	KIMONO LUBRICATED MISC ....	50	KYPROLIS .....	26
JANUMET TABS .....	14	KIMONO MAXX/LARGE FLARE MISC .....	50	labetalol hcl SOLN .....	31
JANUMET XR TB24 1000 MG-100 MG .....	14	KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC 50		labetalol hcl TABS 100 MG, 200 MG .	31
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG .....	14	KIMONO PLUS SPERMICIDE LUBRICATED MISC .....	50	labetalol hcl TABS 300 MG .....	31
JANUVIA .....	15	KIMONO PLUS SPERMICIDE LUBRICATED MISC .....	50	lacosamide SOLN OR .....	11
JARDIANCE .....	16	KIMONO PLUS SPERMICIDE/LUBRICATED MISC 50		lacosamide TABS .....	11
JEVTANA .....	27	KIMONO PS LUBRICATED MISC .	50	lactated ringer's (irrigation) .....	54
JULUCA .....	30	KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC 50		lactated ringer's .....	53
KALYDECO TABS .....	61	KIMONO SENSATION LUBRICATED MISC .....	50	lactic acid (ammonium lactate) CREA .....	41
KAMELEON LUBRICATED MISC .	50	KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC 50		lactic acid (ammonium lactate) LOTN 12 % .....	41
KANJINTI .....	23	KIMONO SPECIAL DEVI .....	50	lactulose (encephalopathy) .....	46
KCL 0.3%/D5W/NACL 0.9% (potassium chloride in dextrose & sodium chloride) .....	53	KINRIX SUSY .....	62	lactulose SOLN .....	49
KEPIVANCE 6.25 MG .....	27	KISQALI .....	26	lamivudine (hbv) TABS .....	30
KESIMPTA .....	60	KISQALI FEMARA 200 DOSE ...	25	lamivudine SOLN .....	30
ketoconazole (topical) CREA .....	37	KISQALI FEMARA 400 DOSE ...	25	lamivudine TABS 150 MG .....	30
ketoconazole (topical) SHAM 2 % .	38	KISQALI FEMARA 600 DOSE ...	25	lamivudine TABS 300 MG .....	30
ketoconazole .....	17	KLARITY-A .....	57	lamivudine-zidovudine .....	30
KETONE STRP .....	42			lamotrigine CHEW 25 MG .....	11
KETONE TEST STRIPS STRP ....	42			lamotrigine CHEW 5 MG .....	11
ketoprofen CAPS 50 MG .....	4			lamotrigine TABS .....	11
ketorolac tromethamine (ophth) ...	58			lamotrigine TBDP .....	11

LANOXIN SOLN IJ (digoxin) .....	32	LEVEMIR FLEXTOUCH SOPN .....	15	levothyroxine sodium TABS .....	62
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin) .....	32	LEVEMIR SOLN .....	15	LEXIVA SUSP .....	30
lansoprazole CPDR 15 MG .....	63	levetiracetam SOLN IV 500 MG/5ML 11		lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 % .....	49
lansoprazole CPDR 30 MG .....	63	levetiracetam TABS 1000 MG .....	11	lidocaine hcl (mouth-throat) 2 % .....	54
lanthanum carbonate CHEW .....	46	levetiracetam TABS 250 MG, 750 MG .....	11	lidocaine hcl (mouth-throat) 4 % .....	55
lapatinib ditosylate .....	26	levetiracetam TABS 500 MG .....	11	lidocaine hcl GEL 2 % .....	41
LASTACAFT .....	58	levetiracetam TB24 .....	11	lidocaine hcl PRSY .....	41
latanoprost SOLN .....	58	levobunolol hcl 0.5 % .....	57	lidocaine hcl SOLN .....	41
leflunomide .....	4	levocetirizine dihydrochloride SOLN 18		lidocaine PTCH 5 % .....	41
lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG .....	54	levocetirizine dihydrochloride TABS 18		lidocaine-prilocaine CREA .....	41
lenalidomide 20 MG .....	54	levofloxacin (ophth) 0.5 % .....	57	LILETTA 20.1 MCG/DAY .....	35
LENVIMA 10 MG DAILY DOSE ..	23	levofloxacin in d5w 5 %-500 MG/100ML .....	45	lincomycin hcl .....	21
LENVIMA 12MG DAILY DOSE ..	23	levofloxacin SOLN OR .....	45	linezolid SUSR .....	21
LENVIMA 14 MG DAILY DOSE ..	23	levofloxacin TABS 250 MG, 750 MG .	45	linezolid TABS .....	21
LENVIMA 18 MG DAILY DOSE ..	23	levofloxacin TABS 500 MG .....	45	LINZESS .....	46
LENVIMA 20 MG DAILY DOSE ..	23	levonorgestrel & eth estradiol TABS 34		lithyronine sodium SOLN .....	62
LENVIMA 24 MG DAILY DOSE ..	23	levonorgestrel (emergency oc) 1.5 MG .....	35	lithyronine sodium TABS .....	62
LENVIMA 4 MG DAILY DOSE .....	23	levonorgestrel-eth estradiol (triphasic) .....	34	lisdexamfetamine dimesylate CAPS 1	
LENVIMA 8 MG DAILY DOSE .....	23	levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG .....	34	lisinopril & hydrochlorothiazide ...	20
letrozole .....	24	levonorgestrel-ethinyl estradiol (continuous) .....	34	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG .....	19
leucovorin calcium SOLR .....	27	levorphanol tartrate TABS 2 MG .....	5	lithium .....	28
leucovorin calcium TABS .....	27			lithium carbonate CAPS .....	28
LEUKERAN .....	23			lithium carbonate TABS .....	28
LEUKINE SOLR IJ .....	48			lithium carbonate TBCR .....	28
leuprolide acetate KIT IJ 1 MG/0.2ML .....	24			LO LOESTRIN FE TABS .....	34
levabuterol hcl .....	9			LOKELMA .....	54
levabuterol tartrate .....	9			loperamide hcl CAPS .....	16
LEVEMIR FLEXPEN SOPN .....	15			lopinavir-ritonavir SOLN .....	30



mesalamine SUPP .....	46	methoxsalen rapid .....	39	metolazone .....	43
mesalamine TBEC 1.2 GM .....	46	methscopolamine bromide .....	63	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG .....	20
mesalamine TBEC 800 MG .....	46	methsuximide .....	12	metoprolol & hydrochlorothiazide TABS 25 MG-50 MG .....	20
metaxalone 800 MG .....	56	methyldopa TABS .....	19	metoprolol succinate TB24 200 MG 31	
metformin hcl TABS 1000 MG .....	15	methylphenidate hcl CP24 20 MG, 40 MG .....	2	metoprolol succinate TB24 25 MG, 50 MG, 100 MG .....	31
metformin hcl TABS 500 MG .....	15	methylphenidate hcl CP24 30 MG ..	2	metoprolol tartrate SOLN IV 5 MG/5ML .....	31
metformin hcl TABS 850 MG .....	15	methylphenidate hcl CP24 .....	2	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG .....	31
metformin hcl TB24 500 MG .....	15	methylphenidate hcl CPCR .....	2	metronidazole (topical) CREA .....	41
metformin hcl TB24 750 MG .....	15	methylphenidate hcl SOLN .....	2	metronidazole (topical) GEL 0.75 % 41	
methadone hcl CONC .....	5	methylphenidate hcl TABS 10 MG, 20 MG .....	2	metronidazole (topical) GEL 1 % ..	41
methadone hcl SOLN IJ 10 MG/ML .5	5	methylphenidate hcl TABS 5 MG ...	2	metronidazole (topical) LOTN .....	41
METHADONE HCL SOLN IJ .....	5	methylphenidate hcl TB24 27 MG ..	2	metronidazole TABS .....	20
methadone hcl SOLN OR 10 MG/5ML .....	5	methylphenidate hcl TB24 36 MG, 54 MG .....	2	metronidazole vaginal .....	67
methadone hcl SOLN OR 5 MG/5ML 5		methylphenidate hcl TBCR 10 MG, 20 MG .....	2	mexiletine hcl .....	8
methadone hcl TABS 10 MG .....	5	methylphenidate hcl TBCR 18 MG, 27 MG .....	2	micafungin sodium .....	17
methadone hcl TABS 5 MG .....	5	methylphenidate hcl TBCR 36 MG, 54 MG .....	2	miconazole nitrate vaginal SUPP 200 MG .....	67
methadone hcl TBSO .....	5	methylphenidate PTCH .....	2	midodrine hcl .....	67
methamphetamine hcl .....	1	methylprednisolone acetate SUSP 35		miglitol .....	14
methazolamide TABS .....	42	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG .....	35	miglustat .....	47
methenamine hippurate .....	21	methylprednisolone TABS .....	35	minocycline hcl CAPS .....	62
methimazole TABS .....	62	methylprednisolone TBPK .....	35	minocycline hcl TABS .....	62
METHITEST TABS .....	7	metoclopramide hcl SOLN IJ 5 MG/ML .....	46	minoxidil 2.5 MG, 10 MG .....	20
methocarbamol TABS 500 MG, 750 MG .....	56	metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML .....	46	MIRCERA 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML, 100 MCG/0.3ML, 150 MCG/0.3ML, 200	
METHOTREXATE .....	3	metoclopramide hcl TABS .....	46		
methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML .....	23				
methotrexate sodium SOLR .....	23				
methotrexate sodium TABS 2.5 MG 23					

MCG/0.3ML	48	montelukast sodium TABS	9	nafcillin sodium IV 10 GM	59
MIRENA	35	morphine sulfate CP24 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG 5		naftifine hcl CREA 1 %	38
mirtazapine TABS 15 MG	12	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	5	naftifine hcl CREA 2 %	38
mirtazapine TABS 30 MG	12	morphine sulfate SOLN OR 10 MG/5ML	5	NAGLAZYME	44
mirtazapine TABS 7.5 MG, 45 MG	12	morphine sulfate SOLN OR 20 MG/5ML	5	nalbuphine hcl	7
mirtazapine TBDP 15 MG	12	morphine sulfate TABS	5	naloxone hcl LIQD	16
mirtazapine TBDP 30 MG	12	morphine sulfate TBCR	5	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	16
mirtazapine TBDP 45 MG	12	MOTOFEN	16	naltrexone hcl	16
misoprostol	63	MOVANTIK	46	naproxen sodium TABS 550 MG	4
mitomycin SOLR IV 20 MG	25	moxifloxacin hcl (ophth) SOLN OP	57	naproxen SUSP	4
mitoxantrone hcl 2 MG/ML	25	moxifloxacin hcl in sodium chloride 45		naproxen TABS	4
M-M-R II SOLR	66	moxifloxacin hcl TABS	45	naproxen TBEC 500 MG	4
M-NATAL PLUS TABS	55	MOZOBIL (plerixafor)	48	naratriptan hcl	52
modafinil 100 MG	2	MULPLETA	48	NATAACYN	57
modafinil 200 MG	2	MULTI PRENATAL TABS	55	NATAZIA	34
MODERNA COVID-19 VACCINE SUSP	66	mupirocin OINT	37	nateglinide	16
MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	66	MVASI	23	NAYZILAM	11
MODERNA COVID-19 VACCINE6-11Y SUSP	66	MYALEPT	44	nebivolol hcl 2.5 MG, 5 MG, 10 MG 31	
MODERNA COVID-19 VACCINE6MO-5Y SUSP	66	mycophenolate mofetil CAPS	54	nebivolol hcl 20 MG	31
moexipril hcl	19	mycophenolate mofetil TABS	54	NEBUSAL NEBU	36
mometasone furoate (nasal) SUSP 56		mycophenolate sodium	54	nefazodone hcl	13
mometasone furoate CREA	40	MYLERAN TABS	23	nelarabine	23
mometasone furoate OINT	40	nabumetone	4	neomycin sulfate TABS	2
mometasone furoate SOLN	40	nadolol TABS 20 MG	31	neomycin-bacitracin zn-polymyxin	57
montelukast sodium CHEW	9	nadolol TABS 40 MG	31	neomycin-polymy-dexameth OINT	58
montelukast sodium PACK	9	nadolol TABS 80 MG	31	neomycin-polymy-dexameth SUSP 58	
				neomycin-polymyxin-hc (ophth)	58
				neomycin-polymyxin-hc (otic) SOLN	



58	nicardipine hcl SOLN	32	NITROGLYCERIN SOLN IV	7
neomycin-polymyxin-hc (otic) SUSP	nicotine MISC XX	61	nitroglycerin SUBL	8
59	nicotine polacrilex GUM	61	NIVA-PLUS TABS	55
NEONATAL COMPLETE TABS 120	nicotine polacrilex LOZG	61	nizatidine CAPS	63
MG-10 MG-9.2 MG-1000 MCG-10	nicotine PT24 TD 7 MG/24HR, 14	61	nizatidine SOLN	63
MCG-12 MCG-3 MG-5 MG-20 MG-	MG/24HR, 21 MG/24HR	61	NORDITROPIN FLEXPPO SOPN 30	44
27 MG-200 MG-1.84 MG-25 MG-2	NICOTINE TRANSDERMAL		MG/3ML	
MG-1200 MCG-2 MG-0.2 MG	SYSTEM KIT	61	NORDITROPIN FLEXPPO SOPN 5	44
NEONATAL PLUS TABS	NICOTROL INHALER INHA	61	MG/1.5ML, 10 MG/1.5ML, 15	
NEONATAL PRENATAL VITAMIN	NICOTROL NS SOLN	61	MG/1.5ML	44
TABS	nifedipine CAPS 10 MG	32	norelgestromin-ethinyl estradiol	34
NEONATAL VITAMIN TABS	nifedipine CAPS 20 MG	32	norethin acet & estrad-fe CAPS	34
neostigmine methylsulfate SOSY	nifedipine TB24 60 MG	32	norethin acet & estrad-fe CHEW	34
NEO-SYNALAR	nifedipine TB24 90 MG	32	norethin acet & estrad-fe TABS 1	
NEUPRO	nifedipine TB24	32	MG-20 MCG-75 MG, 1.5 MG-30	
NEVANAC	nilutamide	24	MCG-75 MG	34
nevirapine SUSP	nimodipine CAPS	32	norethindrone & eth estradiol	34
nevirapine TABS	NINLARO	26	norethindrone & ethinyl estradiol-fe	34
nevirapine TB24 100 MG	NIPENT	27	34	
nevirapine TB24 400 MG	nisoldipine 8.5 MG, 17 MG, 20 MG,	32	norethindrone (contraceptive)	35
NEXIUM 24HR TBEC (esomeprazole	30 MG, 34 MG, 40 MG	32	norethindrone acet & eth estra	34
magnesium)	nitazoxanide TABS	21	norethindrone acetate TABS	60
NEXPLANON	nitisinone CAPS	44	norethindrone acetate-ethinyl	
NEXTSTELLIS	NITRO-BID OINT	7	estradiol	45
niacin (antihyperlipidemic) TBCR	nitrofurantoin	21	norethindrone acetate-ethinyl	
niacin CPCR 250 MG, 500 MG	nitrofurantoin macrocrystal 50 MG,	21	estradiol-fe	34
niacin TABS	100 MG	21	norethindrone-eth estradiol (triphasic)	
niacin TBCR	nitrofurantoin monohyd macro	21	34	
NIACIN TR TBCR	nitroglycerin (intra-anal)	7	norgestimate-ethinyl estradiol	
niacinamide TABS 100 MG	nitroglycerin CPCR	7	(triphasic)	34
niacinamide TABS 500 MG	nitroglycerin PT24	7	norgestimate-ethinyl estradiol	34
nicardipine hcl CAPS			norgestrel & ethinyl estradiol 30	
			MCG-0.3 MG	34
			NORMOSOL-M/D5W	53

NORMOSOL-R	53	nystatin (topical) OINT	38	omeprazole TBEC	63
nortriptyline hcl CAPS	14	nystatin (topical) POWD EX	38	omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG	63
nortriptyline hcl SOLN	14	nystatin TABS	17	OMNIFLEX DIAPHRAGM	50
NORVIR PACK	30	nystatin-triamcinolone CREA	38	ONCASPAR	26
NORVIR SOLN	30	nystatin-triamcinolone OINT	38	ondansetron hcl SOLN IJ 4 MG/2ML	16
NOVA MAX PLUS KETONE TESTSTRIPS	42	octreotide acetate SOLN	45	ondansetron hcl SOLN OR 4 MG/5ML	16
NOVOLIN 70/30 FLEXPEN SUPN	16	ODEFSEY	30	ondansetron hcl SOSY	16
NOVOLIN 70/30 SUSP	16	ODOMZO	24	ondansetron hcl TABS 24 MG	16
NOVOLIN N FLEXPEN SUPN	16	OFEV	61	ondansetron hcl TABS 4 MG	16
NOVOLIN N SUSP	16	ofloxacin (ophth)	57	ondansetron hcl TABS 8 MG	17
NOVOLIN R FLEXPEN SOPN IJ	16	ofloxacin (otic)	58	ondansetron TBDP 4 MG	17
NOVOLIN R SOLN IJ	16	ofloxacin 300 MG, 400 MG	45	ondansetron TBDP 8 MG	17
NOXAFIL SUSP (posaconazole)	17	OGIVRI	24	ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	55
NP THYROID 120 TABS	62	olanzapine SOLR	28	ONE VITE WOMENS PRENATALVITAMIN TABS	55
NP THYROID 15 TABS	62	olanzapine TABS 2.5 MG, 5 MG	28	ONETOUCH DELICA SAFETY LANCING DEVICE	51
NP THYROID 30 TABS	62	olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG	29	ONETOUCH DELICA SAFETY LANCING DEVICE 30G	51
NP THYROID 60 TABS	62	olanzapine TBDP 20 MG	29	OPILL	35
NP THYROID 90 TABS	62	olanzapine TBDP 5 MG, 10 MG, 15 MG	29	OPSUMIT	33
NUBEQA	24	olmesartan medoxomil	19	ORENITRAM TBCR	32
NUCALA SOAJ	8	olmesartan medoxomil-amlodipine- hydrochlorothiazide	20	ORILISSA	44
NUCALA SOLR	8	olmesartan medoxomil- hydrochlorothiazide	20	ORKAMBI PACK 125 MG-100 MG, 188 MG-150 MG	61
NUCALA SOSY 100 MG/ML	8	olopatadine hcl (nasal)	56	ORKAMBI TABS	61
NUCALA SOSY 40 MG/0.4ML	8	olopatadine hcl 0.1 %	58	ORLADEYO	47
NUCYNTA ER TB12	5	olopatadine hcl 0.2 %	58	orphenadrine citrate TB12	56
NUCYNTA TABS	5	omega-3-acid ethyl esters	18	oseltamivir phosphate CAPS	31
NUEDEXTA	61	omeprazole CPDR	63		
NULOJIX	54	omeprazole magnesium CPDR	63		
nystatin (mouth-throat)	55				
nystatin (topical) CREA	38				

oseltamivir phosphate SUSP ..... 31	OZEMPIC SOPN .....15	paroxetine hcl TB24 25 MG, 37.5 MG .....13
OSMOPREP ..... 49	paclitaxel 6 MG/ML, 100 MG/16.7ML, 150 MG/25ML .....27	PASER PACK .....22
OSPHENA ..... 44	paclitaxel protein-bound particles .27	pazopanib hcl ..... 26
OTEZLA TABS .....4	paliperidone 1.5 MG, 3 MG, 9 MG .28	PEDIARIX SUSY ..... 62
OTEZLA TBPK .....4	paliperidone 6 MG ..... 28	pediatric multivitamins w/fl CHEW .55
oxacillin sodium IV 10 GM .....59	palonosetron hcl SOLN ..... 17	PEDVAX HIB SUSP ..... 64
oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML ..... 23	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML ..... 43	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid .....49
oxandrolone .....7	PAMIDRONATE DISODIUM SOLN 43	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 6.74 GM- 2.97 GM-5.86 GM-22.74 GM-236 GM .....49
oxaprozin TABS .....4	PANCREAZE CPEP 149900 UNIT- 97300 UNIT-37000 UNIT, 15200 UNIT-8800 UNIT-2600 UNIT, 24600 UNIT-14200 UNIT-4200 UNIT, 61500 UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000 UNIT, 98400 UNIT-56800 UNIT- 16800 UNIT ..... 42	PEGASYS SOLN ..... 30
oxazepam CAPS .....8	PANRETIN ..... 38	PEGASYS SOSY ..... 30
OXBRYTA TABS 500 MG ..... 47	pantoprazole sodium TBEC 20 MG 63	PEMAZYRE ..... 26
oxcarbazepine SUSP ..... 11	pantoprazole sodium TBEC 40 MG 63	pemetrexed disodium SOLR 500 MG 23
oxcarbazepine TABS 150 MG, 300 MG ..... 11	PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A .....35	penciclovir .....39
oxcarbazepine TABS 600 MG .....11	paricalcitol CAPS ..... 44	penicillamine CAPS .....54
oxiconazole nitrate CREA .....38	paricalcitol SOLN ..... 44	penicillamine TABS ..... 54
OXISTAT LOTN .....38	paroxetine hcl SUSP .....13	penicillin g potassium 5000000 UNIT 59
oxybutynin chloride SOLN .....63	paroxetine hcl TABS 10 MG ..... 13	PENICILLIN G POTASSIUM IN ISO- OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML .....59
oxybutynin chloride TABS 5 MG ...63	paroxetine hcl TABS 20 MG ..... 13	PENICILLIN G PROCAINE ..... 59
oxybutynin chloride TB24 .....63	paroxetine hcl TABS 30 MG ..... 13	penicillin g sodium .....59
oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG .....5	paroxetine hcl TABS 40 MG ..... 13	penicillin v potassium SOLR .....59
oxycodone hcl TABS .....5	paroxetine hcl TB24 12.5 MG .....13	penicillin v potassium TABS ..... 59
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG .....6		PENTACEL .....62
oxymorphone hcl TABS .....5		
oxymorphone hcl TB12 40 MG .....6		
oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG 5		
OZEMPIC SOPN 2 MG/1.5ML .....15		

pentazocine w/ naloxone hcl	7	phentermine hcl CAPS	1	53	
pentoxifylline	47	phenytoin CHEW	12	PLEGRIDY SOPN	60
perindopril erbumine 2 MG, 8 MG	19	phenytoin sodium extended 100 MG, 200 MG, 300 MG	12	PLEGRIDY SOSY SC	61
perindopril erbumine 4 MG	19	phenytoin sodium SOLN	12	PLEGRIDY STARTER PACK SOPN	60
PERJETA	24	phenytoin SUSP	12	PLEGRIDY STARTER PACK SOSY SC	60
permethrin CREA	41	PHEXXI	67	plerixafor	48
permethrin LIQD EX	41	PHOSLYRA SOLN	46	PNEUMOVAX 23	64
perphenazine TABS	29	PHOTOFRIN	27	PNEUMOVAX 23/1 DOSE	64
perphenazine-amitriptyline	60	PIFELTRO	30	podofilox SOLN	41
PERSERIS PRSY	28	pilocarpine hcl (oral)	55	polymyxin b sulfate SOLR	21
PFIZER-BIONTECH COVID-19VACCINE SUSP	66	pilocarpine hcl SOLN 1 %, 2 %, 4 %	57	polymyxin b-trimethoprim	57
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	66	pimecrolimus	41	POMALYST	25
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	66	pimozide	61	posaconazole SUSP	17
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	66	pindolol TABS	31	potassium acetate SOLN 2 MEQ/ML	53
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	66	pioglitazone hcl	16	potassium bicarbonate TBEF	53
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	66	pioglitazone hcl-glimepiride	14	potassium chloride CPCR	54
PHEBURANE PLLT	44	pioglitazone hcl-metformin hcl TABS	14	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 %	53
phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG	47	piperacillin sodium-tazobactam sodium	59	potassium chloride in dextrose 5 %-20 MEQ/L	53
phendimetrazine tartrate TABS	1	PIQRAY 200MG DAILY DOSE	26	potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %	53
phenelzine sulfate	13	PIQRAY 250MG DAILY DOSE	26	potassium chloride microencapsulated crystals er	53
phenobarbital ELIX	48	PIQRAY 300MG DAILY DOSE	26	potassium chloride PACK OR 20	
phenobarbital TABS 15 MG, 16.2 MG, 30 MG, 32.4 MG, 64.8 MG, 97.2 MG, 100 MG	48	pirfenidone CAPS	61		
phenoxybenzamine hcl	19	pirfenidone TABS 267 MG, 801 MG	61		
		pirfenidone TABS 534 MG	61		
		piroxicam CAPS	4		
		PLASMA-LYTE A (electrolyte-a)	53		
		PLASMA-LYTE-148 (electrolyte-148)	53		

MEQ .....	54	prednisolone acetate (ophth) .....	58	PRENATAL ONE DAILY TABS .....	55
POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride) 54		PREDNISOLONE SODIUM PHOSPHATE .....	58	PRENATAL PLUS TABS .....	55
potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML .....	54	prednisolone sodium phosphate SOLN 5 MG/5ML, 6.7 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML 35		PRENATAL PLUS VITAMIN ANDMINERAL TABS .....	55
potassium chloride TBCR 8 MEQ, 10 MEQ .....	54	prednisolone sodium phosphate TBDP .....	35	PRENATAL TABS .....	56
POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS .....	53	prednisolone SOLN .....	36	PRENATAL VITAMIN & MINERAL TABS .....	55
POTASSIUM CHLORIDE/SODIUM CHLORIDE 20 MEQ/L-0.45 % (potassium chloride in nacl) .....	53	prednisolone TABS .....	36	PRENATAL VITAMIN TABS .....	55
potassium citrate (alkalinizer) TBCR 10 MEQ, 1080 MG .....	46	prednisone SOLN .....	36	PRENATAL VITAMIN/IRON TABS	55
potassium phosphates 236 MG/ML- 224 MG/ML .....	53	prednisone TABS 1 MG, 5 MG ....	36	PRENATAL VITAMINS PLUS LOW IRON TABS .....	55
PR BENZOYL PEROXIDE WASH LIQD .....	37	prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG .....	36	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 .....	55
pralatrexate 20 MG/ML .....	23	prednisone TBPK .....	36	PRENATRIX TABS .....	56
pramipexole dihydrochloride TABS 0.125 MG .....	28	pregabalin (once-daily) 330 MG ...	61	PRENATRYL TABS .....	56
pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG .....	28	pregabalin (once-daily) 82.5 MG, 165 MG .....	61	PREPLUS TABS .....	56
prasugrel hcl .....	47	pregabalin CAPS 225 MG, 300 MG 11		PREVNAR 13 .....	64
pravastatin sodium .....	19	pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ...	12	PREVNAR 20 .....	64
praziquantel .....	7	pregabalin SOLN .....	12	PREZCOBIX .....	30
prazosin hcl CAPS .....	19	PREHEVBRIO .....	66	PREZISTA SUSP .....	30
PRECISION XTRA .....	42	PREMARIN .....	67	PREZISTA TABS (darunavir) .....	30
PRED MILD .....	58	PREMARIN SOLR .....	45	PREZISTA TABS 75 MG, 150 MG	30
PRED-G SUSP .....	58	PREMARIN TABS .....	45	PRIFTIN .....	22
prednicarbate OINT .....	41	PREMIUM CONDOMS LUBRICATED MISC .....	50	primaquine phosphate TABS .....	22
		PREMPHASE .....	45	primidone 50 MG, 250 MG .....	12
		PREMPRO .....	45	PRIORIX SUSR .....	66
		PRENATAL MULTIVITAMIN TABS		PROAIR DIGIHALER .....	9
		55		PROAIR RESPICLICK AEPB .....	9
				probenecid .....	47

procainamide hcl SOLN 500 MG/ML . 8	PULMOZYME ..... 61	RA PRENATAL FORMULA/FOLICACID TABS ..... 56
prochlorperazine ..... 29	PX PRENATAL MULTIVITAMINS TABS ..... 56	RA PRENATAL TABS ..... 56
prochlorperazine maleate TABS ... 29	pyrazinamide ..... 22	rabeprazole sodium TBEC ..... 63
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML ..... 48	pyridostigmine bromide SOLN OR 22	raloxifene hcl ..... 44
PROCRIT 40000 UNIT/ML ..... 48	pyridostigmine bromide TABS 60 MG ..... 22	ramelteon ..... 49
progesterone CAPS ..... 60	pyridostigmine bromide TBCR .... 22	ramipril CAPS ..... 19
PROGRAF PACK ..... 54	pyrimethamine ..... 22	ranitidine hcl TABS 150 MG ..... 63
PROGRAF SOLN ..... 54	QC PRENATAL TABS ..... 56	ranolazine TB12 1000 MG ..... 7
PROLASTIN-C SOLN ..... 61	QINLOCK ..... 26	ranolazine TB12 500 MG ..... 7
PROLEUKIN ..... 27	QUADRACEL SUSP ..... 62	rasagiline mesylate ..... 28
PROLIA SOSY ..... 43	QUADRACEL SUSY ..... 62	REALITY LATEX CONDOMS/LUBRICATED MISC .. 50
promethazine hcl SOLN OR 6.25 MG/5ML ..... 18	quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG ..... 29	REALITY LATEX/ULTRA TEXTURED DEVI ..... 50
promethazine hcl SUPP 12.5 MG, 25 MG ..... 18	quetiapine fumarate TABS 300 MG, 400 MG ..... 29	REALITY LATEX/ULTRA THIN DEVI 50
promethazine hcl SUPP 50 MG ... 18	quetiapine fumarate TB24 300 MG, 400 MG ..... 29	REBIF REBIDOSE SOAJ ..... 61
promethazine hcl TABS ..... 18	quetiapine fumarate TB24 50 MG, 150 MG, 200 MG ..... 29	REBIF REBIDOSE TITRATIONPACK SOAJ ..... 61
propafenone hcl CP12 ..... 8	quinapril hcl 20 MG, 40 MG ..... 19	REBIF SOSY ..... 61
propafenone hcl TABS ..... 8	quinapril hcl 5 MG, 10 MG ..... 19	REBIF TITRATION PACK SOSY .. 61
proparacaine hcl ..... 57	quinapril-hydrochlorothiazide 12.5 MG-10 MG ..... 20	RECOMBIVAX HB SUSP ..... 66
propranolol hcl CP24 ..... 31	quinapril-hydrochlorothiazide 12.5 MG-20 MG ..... 20	RECOMBIVAX HB SUSY ..... 66
propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML ..... 31	quinapril-hydrochlorothiazide 25 MG-20 MG ..... 20	RECTIV (nitroglycerin (intra-anal)) . 7
propranolol hcl TABS ..... 31	quinidine sulfate TABS ..... 8	REGRANEX ..... 41
propylthiouracil ..... 62	quinine sulfate CAPS 324 MG .... 22	RELENZA DISKHALER ..... 31
protriptyline hcl ..... 14	QUZYTIR SOLN IV ..... 18	RELEXXII TBCR 27 MG ..... 2
PROVISC SOSY ..... 58	QVAR REDIHALER ..... 9	RELEXXII TBCR 36 MG, 54 MG ... 2
PTS PANELS KETONE TEST .... 42		RELION 2-IN-1 LANCET DEVICES 30G ..... 51
PULMICORT FLEXHALER AEPB .. 9		RELION 2-IN-1 LANCING DEVICE

25G .....	51	risedronate sodium TABS 35 MG ..	43	rufinamide TABS 400 MG .....	12
RELION 2-IN-1 LANCING DEVICE		risedronate sodium TABS 5 MG, 30		RUKOBIA .....	30
30G .....	51	MG .....	43	RUXIENCE .....	23
RELION KETONE TEST STRIPS		risedronate sodium TBEC .....	43	RYBELSUS TABS .....	15
STRP .....	42	RISPERDAL CONSTA (risperidone		salsalate .....	4
RELION TRUE METRIX		microspheres) .....	28	SANDOSTATIN LAR DEPOT KIT ..	45
BLOODGLUCOSE TEST STRIPS		risperidone microspheres .....	28	SANTYL OINT .....	41
STRP .....	42	risperidone SOLN .....	28	sapropterin dihydrochloride	44
RENFLEXIS .....	46	risperidone TABS .....	28	sapropterin dihydrochloride	44
repaglinide 0.5 MG, 1 MG .....	16	risperidone TBDP .....	28	SAVELLA TABS .....	60
repaglinide 2 MG .....	16	ritonavir TABS .....	30	SAVELLA TITRATION PACK MISC	
REPATHA PUSHTRONEX SYSTEM		rivastigmine tartrate CAPS .....	60	60	
SOCT .....	19	rizatriptan benzoate TABS 10 MG ..	52	saxagliptin hcl .....	15
REPATHA SOSY .....	19	rizatriptan benzoate TABS 5 MG ..	52	saxagliptin-metformin hcl 1000	
REPATHA SURECLICK SOAJ ....	19	rizatriptan benzoate TBDP 10 MG ..	52	2.5 MG .....	14
RETACRIT .....	48	rizatriptan benzoate TBDP 5 MG ..	52	saxagliptin-metformin hcl 1000	
RETEVMO .....	26	roflumilast .....	9	MG, 500 MG-5 MG .....	14
RETROVIR IV INFUSION SOLN ..	30	romidepsin SOLR .....	26	scopolamine .....	17
REXULTI .....	29	ropinirole hydrochloride TABS ....	28	SELECT INSULIN SYRINGES ....	51
ribavirin (hepatitis c) CAPS .....	30	ropinirole hydrochloride TB24 2 MG,		SELECT INSULIN SYRINGES ....	52
ribavirin (hepatitis c) TABS 200		4 MG, 6 MG .....	28	SELECT LANCETS .....	51
31		ropinirole hydrochloride TB24 8 MG,		selegiline hcl CAPS .....	28
RIDAURA .....	3	12 MG .....	28	selegiline hcl TABS .....	28
rifabutin .....	22	rosuvastatin calcium TABS .....	19	selenium sulfide LOTN 2.5 % .....	39
rifampin CAPS .....	22	ROTARIX SUSP .....	66	SELZENTRY SOLN .....	30
rifampin SOLR .....	22	ROTARIX SUSR .....	66	SELZENTRY TABS 25 MG, 75 MG	
riluzole TABS .....	56	ROTATEQ SOLN .....	66	30	
rimantadine hydrochloride TABS ..	31	ROZLYTREK CAPS .....	26	SEREVENT DISKUS .....	9
ringer's .....	53	RUBRACA .....	26	sertraline hcl CONC .....	13
ringer's irrigation .....	54	rufinamide SUSP .....	12	sertraline hcl TABS 100 MG .....	13
RINVOQ .....	2	rufinamide TABS 200 MG .....	12	sertraline hcl TABS 25 MG, 50	
risedronate sodium TABS 150 MG	43			13	

sevelamer carbonate PACK .....	46	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 % .....	54	SOVALDI TABS 400 MG .....	31
sevelamer carbonate TABS .....	46	sodium citrate & citric acid .....	46	SPIKEVAX COVID-19 VACCINE SUSP .....	66
SHINGRIX .....	66	sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG .....	53	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP .....	66
SIGNIFOR .....	45	sodium phenylbutyrate POWD ....	44	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY .....	66
sildenafil citrate (pulmonary hypertension) SOLN .....	33	sodium phenylbutyrate TABS .....	44	spinosad .....	41
sildenafil citrate (pulmonary hypertension) SUSR .....	33	sodium polystyrene sulfonate POWD 54		SPIRIVA HANDIHALER CAPS (tiotropium bromide monohydrate) ..	9
sildenafil citrate (pulmonary hypertension) TABS .....	33	sodium polystyrene sulfonate SUSP OR 15 GM/60ML .....	54	SPIRIVA RESPIMAT AERS .....	9
sildenafil citrate .....	32	sodium sulfate-potassium sulfate- magnesium sulfate .....	49	spironolactone & hydrochlorothiazide .....	43
silodosin .....	47	SOFOSBUVIR/VELPATASVIR TABS .....	31	spironolactone TABS .....	43
silver sulfadiazine .....	39	SOLIFENACIN SUCCINATE TABS .....	63	SPRAVATO 56MG DOSE .....	13
SIMPONI ARIA SOLN .....	3	SOLU-CORTEF 100 MG, 500 MG, 1000 MG .....	36	SPRAVATO 84MG DOSE .....	13
SIMULECT .....	54	SOLU-CORTEF 250 MG .....	36	SPRYCEL .....	26
simvastatin TABS .....	19	SOLU-MEDROL 2 GM .....	36	stannous fluoride CONC .....	55
sirolimus TABS .....	54	SOMAVERT 10 MG, 15 MG, 20 MG . 44		stavudine CAPS .....	30
SIRTURO .....	22	SORafenib tosylate .....	26	STELARA 130 MG/26ML .....	46
SIVEXTRO TABS .....	21	SORBITOL 3 % .....	46	STELARA SOLN 45 MG/0.5ML ...	39
SKYLA .....	35	SORBITOL/MANNITOL IRRIGATION .....	46	STELARA SOSY 45 MG/0.5ML ...	39
SKYRIZI PEN SOAJ .....	39	sotalol hcl (afib/af) .....	31	STELARA SOSY 90 MG/ML .....	39
SKYRIZI PSKT .....	39	sotalol hcl TABS 240 MG .....	31	STENDRA .....	32
SKYRIZI SOCT .....	46	sotalol hcl TABS 80 MG, 120 MG, 160 MG .....	32	STIMATE SOLN NA .....	44
SKYRIZI SOSY .....	39	SOVALDI TABS 200 MG .....	31	STIOLTO RESPIMAT .....	9
SLYND .....	35			STIVARGA .....	26
SM PRENATAL VITAMINS TABS .	56			streptomycin sulfate SOLR .....	2
SODIUM ACETATE SOLN (sodium acetate) .....	53			STRIBILD .....	30
sodium acetate SOLN .....	53			STRIVERDI RESPIMAT .....	9
sodium chloride (gu irrigant) 0.9 %	46			SUBSYS LIQD 100 MCG .....	6
sodium chloride (inhalant) NEBU 7 % .....	36			SUBSYS LIQD 200 MCG, 400 MCG,	



600 MCG .....	6	sumatriptan succinate SOCT .....	52	TAKHZYRO SOLN .....	47
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG .....	6	sumatriptan succinate SOLN 6 MG/0.5ML .....	52	TAKHZYRO SOSY .....	47
sucralfate SUSP .....	63	sumatriptan succinate TABS .....	52	TALZENNA 0.25 MG, 0.5 MG, 0.75 MG, 1 MG .....	26
sucralfate TABS .....	63	sumatriptan-naproxen sodium .....	52	tamoxifen citrate TABS .....	24
sulconazole nitrate CREA .....	38	sunitinib malate 12.5 MG, 25 MG, 50 MG .....	26	tamsulosin hcl .....	47
sulconazole nitrate SOLN .....	38	SUNOSI 150 MG .....	1	TASIGNA 150 MG, 200 MG .....	26
sulfacetamide sodium (acne) .....	37	SUNOSI 75 MG .....	1	TASIGNA 50 MG .....	26
sulfacetamide sodium (ophth) SOLN . 57		SYNAREL .....	44	tavorole .....	38
sulfacetamide sodium w/ sulfur CREA 10 %-5 % .....	37	SYNERA PTCH .....	41	tazarotene CREA .....	39
sulfacetamide sodium w/ sulfur LIQD 10 %-5 % .....	37	SYNJARDY TABS .....	15	TAZVERIK .....	26
sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 % .....	37	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG .....	15	TDVAX SUSP .....	62
sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 % .....	37	SYNJARDY XR TB24 1000 MG-25 MG .....	15	TEFLARO .....	34
sulfacetamide sod-prednisolone SOLN .....	58	SYNRIBO .....	27	TEGRETOL SUSP (carbamazepine) . 12	
sulfadiazine TABS .....	61	SYNTHROID TABS (levothyroxine sodium) .....	62	TEGRETOL TABS (carbamazepine) . 12	
sulfamethoxazole-trimethoprim SOLN .....	21	TABLOID .....	23	TEGSEDI .....	61
sulfamethoxazole-trimethoprim SUSP .....	21	TABRECTA .....	26	telmisartan .....	19
sulfamethoxazole-trimethoprim TABS .....	21	tacrolimus (topical) OINT .....	41	telmisartan-amlodipine .....	20
SULFAMYLON CREA .....	39	tacrolimus CAPS .....	54	telmisartan-hydrochlorothiazide ..	20
sulfasalazine TABS .....	46	tadalafil (pulmonary hypertension) TABS .....	33	temazepam 15 MG, 30 MG .....	48
sulfasalazine TBEC .....	46	tadalafil 5 MG .....	32	temazepam 7.5 MG, 22.5 MG .....	48
sulindac TABS .....	4	TAFINLAR CAPS .....	26	TEMODAR SOLR .....	23
sumatriptan .....	52	TAFINLAR TBSO .....	26	temozolomide CAPS .....	23
sumatriptan succinate SOAJ .....	52	tafluprost .....	58	temsirolimus .....	26
		TAGRISSO 40 MG .....	24	TENIVAC INJ .....	62
		TAGRISSO 80 MG .....	24	tenofovir disoproxil fumarate TABS 30	
				terazosin hcl .....	19
				terbinafine hcl TABS .....	17

terbutaline sulfate SOLN .....	9	TIBSOVO .....	26	topiramate TABS 50 MG .....	12
terbutaline sulfate TABS .....	10	tigecycline .....	62	topotecan hcl SOLN .....	27
terconazole vaginal CREA .....	67	timolol maleate (ophth) SOLG .....	57	topotecan hcl SOLR .....	27
terconazole vaginal SUPP .....	67	timolol maleate (ophth) SOLN .....	57	toremifene citrate .....	24
teriflunomide .....	61	timolol maleate TABS .....	32	torseamide TABS .....	43
teriparatide (recombinant) SOPN ..	43	tiopronin TBEC 100 MG .....	47	TRACLEER TBSO .....	33
TERIPARATIDE SOPN .....	43	tiopronin TBEC 300 MG .....	47	tramadol hcl TABS 50 MG .....	6
TESTOSTERONE CYPIONATE		tiotropium bromide monohydrate		tramadol hcl TB24 .....	6
SOLN IJ 200 MG/ML .....	7	CAPS .....	9	tramadol-acetaminophen .....	6
testosterone cypionate SOLN IM ...	7	TIVICAY TABS .....	30	trandolapril 1 MG, 2 MG .....	19
testosterone enanthate SOLN IM ...	7	tizanidine hcl CAPS .....	56	trandolapril 4 MG .....	19
TETANUS/DIPHTHERIA TOXOIDS-		tizanidine hcl TABS .....	56	trandolapril-verapamil hcl 180 MG-2	
ADSORBED ADULT SUSP .....	62	tobramycin (ophth) SOLN .....	57	MG, 240 MG-1 MG .....	20
tetrabenazine .....	60	tobramycin NEBU .....	2	trandolapril-verapamil hcl 240 MG-2	
tetracycline hcl CAPS .....	62	tobramycin sulfate SOLN IJ 10		MG, 240 MG-4 MG .....	20
THALOMID .....	54	MG/ML, 40 MG/ML, 80 MG/2ML ...	2	tranexamic acid SOLN 1000	
theophylline ELIX .....	10	tobramycin-dexamethasone SUSP		MG/10ML .....	48
theophylline SOLN .....	10	58		tranexamic acid TABS .....	48
theophylline TB12 .....	10	TODAY SPONGE MISC .....	67	tranylcypromine sulfate .....	13
theophylline TB24 .....	10	tolcapone .....	27	travoprost SOLN .....	58
THERANATAL CORE NUTRITION		tolmetin sodium CAPS .....	4	TRAZIMERA .....	24
TABS .....	56	tolmetin sodium TABS 600 MG .....	4	trazodone hcl TABS .....	13
THIOLA EC TBEC 100 MG		TOLSURA CAPS .....	17	TRECATOR .....	22
(tiopronin) .....	47	tolterodine tartrate CP24 .....	63	TRELEGY ELLIPTA .....	10
THIOLA EC TBEC 300 MG		tolterodine tartrate TABS .....	63	TRELSTAR MIXJECT .....	24
(tiopronin) .....	47	tolvaptan TABS .....	45	TREMFYA SOPN .....	39
thioridazine hcl .....	29	topiramate CPSP 15 MG .....	12	TREMFYA SOSY .....	39
thiotepa 15 MG .....	23	topiramate CPSP 25 MG .....	12	treprostinil SOLN IJ .....	32
thiothixene .....	29	topiramate CS24 .....	12	tretinoin (chemotherapy) .....	27
THYMOGLOBULIN .....	54	topiramate TABS 200 MG .....	12	tretinoin CREA 0.025 %, 0.05 %, 0.1	
THYROGEN 0.9 MG .....	42	topiramate TABS 25 MG, 100 MG ..	12	% .....	37
tiagabine hcl .....	12				

tretinoin GEL 0.01 %, 0.025 %	37	trifluridine	57	EXTRASTRENGTH MISC	50
tretinoin microsphere 0.1 %	37	trihexyphenidyl hcl SOLN	27	TRUSTEX LUBRICATED MISC	51
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	23	trihexyphenidyl hcl TABS	27	TRUSTEX LUBRICATED/RIBBED/STUDED MISC	50
triamcinolone acetonide (mouth)	55	TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	15	TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	50
triamcinolone acetonide (nasal) AERO	56	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	15	TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	51
triamcinolone acetonide (topical) CREA 0.025 %	41	TRIKAFTA TBPK 100 MG-50 MG	61	TRUSTEX LUBRICATED/SPERMICIDE MISC	51
triamcinolone acetonide (topical) CREA 0.1 %	41	trimethobenzamide hcl CAPS	17	TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	51
triamcinolone acetonide (topical) CREA 0.5 %	41	trimethoprim TABS	21	TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDED MISC	51
triamcinolone acetonide (topical) LOTN 0.025 %	41	trimipramine maleate CAPS	14	TRUSTEX/RIA LUBRICATED MISC	51
triamcinolone acetonide (topical) LOTN 0.1 %	41	TRINTELLIX	13	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	51
triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	41	TRIUMEQ TABS	30	TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	51
triamcinolone acetonide (topical) OINT 0.5 %	41	TRIZIVIR	30	TRUXIMA	23
triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML	36	tropicamide SOLN 0.5 %	57	TUKYSA	24
triamcinolone acetonide-dimethicone-silicone	41	tropicamide SOLN 1 %	57	TURALIO	26
triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	43	tropium chloride CP24	63	TUZISTRA XR	36
triamterene & hydrochlorothiazide TABS	43	tropium chloride TABS	63	TWINRIX SUSY	66
triamterene CAPS	43	TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP	42	TWIRLA	35
triazolam	49	TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	51	TYBLUME CHEW	34
TRICARE TABS	56	TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	42	TYBOST	30
trientine hcl 250 MG	54	TRULICITY	15	TYMLOS	43
trifluoperazine hcl TABS	29	TRUMENBA	64	TYVASO REFILL SOLN IN	33
		TRUSTEX COLOR CONDOMS + LUBE MISC	50		
		TRUSTEX LUBRICATED EXTRALARGE MISC	50		
		TRUSTEX LUBRICATED			

TYVASO SOLN IN .....	33	vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML ..	21	vilazodone hcl TABS .....	14
TYVASO STARTER SOLN IN .....	33	VAQTA .....	66	vincristine sulfate .....	27
UBRELVY .....	52	varenicline tartrate TABS .....	61	vinorelbine tartrate 10 MG/ML .....	27
UCERIS (budesonide (intrarectal)) ..	7	varenicline tartrate TBPK .....	61	VIRACEPT TABS 250 MG .....	30
UDENYCA ONBODY SOSY .....	48	VARIVAX INJ .....	66	VIRACEPT TABS 625 MG .....	30
UDENYCA SOAJ .....	48	VARUBI TBPK .....	17	VIREAD POWD .....	30
UDENYCA SOSY .....	48	VAXNEUVANCE .....	64	VIREAD TABS 150 MG, 200 MG, 250 MG .....	30
UPTRAVI TABS 200 MCG .....	33	VECAMYL .....	20	VISTOGARD .....	16
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG .....	33	VECTIBIX 100 MG/5ML .....	24	VITAMIN D2 TABS 400 UNIT .....	67
UPTRAVI TITRATION PACK TBPK 33		VELPHORO .....	46	VITATHELY/GINGER TABS .....	56
ursodiol CAPS .....	45	venlafaxine hcl CP24 150 MG .....	14	VITRAKVI CAPS .....	26
ursodiol TABS .....	45	venlafaxine hcl CP24 37.5 MG .....	14	VITRAKVI SOLN .....	26
UVADEX .....	27	venlafaxine hcl CP24 75 MG .....	14	VIZIMPRO .....	24
valacyclovir hcl 1 GM, 1000 MG ...	31	venlafaxine hcl TABS .....	14	VORAXAZE .....	27
valacyclovir hcl 500 MG .....	31	venlafaxine hcl TB24 150 MG .....	14	voriconazole TABS .....	17
valganciclovir hcl TABS .....	30	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG .....	14	VOTRIENT (pazopanib hcl) .....	26
valproate sodium SOLN OR 250 MG/5ML .....	12	verapamil hcl CP24 100 MG, 200 MG, 300 MG .....	32	VYNDAMAX .....	33
valproic acid CAPS .....	12	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG .....	32	VYNDAQEL .....	33
valrubicin .....	25	verapamil hcl SOLN 2.5 MG/ML ...	32	VYVANSE CAPS .....	1
valsartan TABS .....	19	verapamil hcl TABS .....	32	warfarin sodium TABS .....	10
valsartan-hydrochlorothiazide .....	20	verapamil hcl TBCR .....	32	water for irrigation, sterile .....	54
VALTOCO 10 MG DOSE LIQD ...	11	VEREGEN .....	37	WESTAB PLUS TABS .....	56
VALTOCO 15 MG DOSE LQPK ...	11	VERZENIO .....	26	WIDE-SEAL SILICONE DIAPHRAGM KIT 60 .....	51
VALTOCO 20 MG DOSE LQPK ...	11	VICTOZA .....	15	WIDE-SEAL SILICONE DIAPHRAGM KIT 65 .....	51
VALTOCO 5 MG DOSE LIQD .....	11	vigabatrin PACK .....	12	WIDE-SEAL SILICONE DIAPHRAGM KIT 70 .....	51
vancomycin hcl CAPS .....	21	vigabatrin TABS .....	12	WIDE-SEAL SILICONE DIAPHRAGM KIT 75 .....	51
vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG, 1000 MG .....	21	VIIBRYD STARTER PACK KIT ...	13	WIDE-SEAL SILICONE	

DIAPHRAGM KIT 80	51	XPOVIO 60 MG TWICE WEEKLY 25	zidovudine SYRP	30
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	51	XPOVIO 80 MG TWICE WEEKLY 25	zidovudine TABS	30
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	51	XTAMPZA ER	ZIEXTENZO	48
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	51	XTANDI CAPS	zileuton TB12	9
XALKORI CAPS	26	XTANDI TABS 40 MG	ziprasidone hcl	28
XARELTO STARTER PACK TBPK 10		XTANDI TABS 80 MG	ZIRABEV	23
XARELTO SUSR	10	XULTOPHY 100/3.6	ZIRGAN GEL	57
XARELTO TABS 10 MG, 20 MG	10	YERVOY	ZOLADEX 10.8 MG	24
XARELTO TABS 2.5 MG, 15 MG	10	YONSA	ZOLADEX 3.6 MG	24
XELJANZ SOLN	2	zafirlukast	zoledronic acid CONC	43
XELJANZ TABS 10 MG	2	zaleplon 10 MG	zoledronic acid SOLN	43
XELJANZ TABS 5 MG	2	zaleplon 5 MG	ZOLINZA	26
XELJANZ XR TB24	2	ZALTRAP 100 MG/4ML	zolmitriptan SOLN	52
XEOMIN	56	ZANOSAR	zolmitriptan TABS	53
XERAIVA	61	ZARONTIN CAPS (ethosuximide)	zolmitriptan TBDP	53
XGEVA SOLN	43	ZARXIO	zolpidem tartrate TABS	49
XHANCE EXHU	56	ZEJULA CAPS	zolpidem tartrate TBCR	49
XIFAXAN 200 MG	21	ZEJULA TABS 100 MG	zonisamide CAPS	12
XIFAXAN 550 MG	21	ZEJULA TABS 200 MG, 300 MG	ZONTIVITY	47
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	15	ZEJULA TABS 200 MG, 300 MG	ZORBTIVE SC	44
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	15	ZELBORAF	ZYDELIG	26
XOLAIR SOLR	8	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	ZYLET	58
XOLAIR SOSY 150 MG/ML	8	ZENPEP CPEP 252600 UNIT- 189600 UNIT-60000 UNIT		
XOLAIR SOSY 75 MG/0.5ML	8	zidovudine CAPS		30
XOSPATA	26			
XPOVIO	25			

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