Introduction
The ProAct Prescription Drug List references the most commonly prescribed medications available to treat a variety of conditions. The medications are sorted by categories or classes and are placed into levels known as “tiers” that will determine what your cost share will be (see below).
- Tier 1 = primarily generic medications
- Tier 2 = preferred brand-name medications
- Tier 3 = non-preferred medications
- Specialty Medications (SP) = also tiered, but may be subject to other copay/coinsurance structure

This is not an all-inclusive list as there may be prescription drug products that do not appear. A medication may move to a lower tier at any time, while a brand name medication may move to a higher tier when a generic becomes available. Formulary updates will occur in January and July which may result in a medication being moved to new tier resulting in a change to the copay.

Medications
Drugs are listed according to their therapeutic category or drug class. To distinguish between generic and brand medications, generic drugs will be listed in lowercase, while brand name medication will be in UPPERCASE. It is important to realize that even though a medication may be listed in this document, plan benefits override the drug listing and some items may not be covered through your prescription drug benefit.

Specialty Medications (SP)
This formulary document also includes specialty medications. Specialty medications (SP) can be described as drugs that are high cost, highly complex, or typically require specialized administration, handling, or distribution. They are used to treat rare or complex conditions. These medications may process differently depending on your plan design and may require prior authorization and/or have other restrictions.

Utilization Management Programs (QL, PA, ST)
- Quantity Limit (QL) - medication may be limited to a certain quantity
- Prior Authorization (PA) - your provider is required to provide additional information to determine coverage
- Step Therapy (ST) - lower-cost medication(s) must be tried before higher-cost medication(s) can be covered

Please note: Some plans may not utilize one or more of these (QL, PA, ST) programs. In the case where the plan does not use the program, the medication will not be subject to the terms of that particular program regardless of what is listed in the Notes column.
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**Anesthetics**

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

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### Antibacterials

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**Antifungals**

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<td>terbinafine hcl oral</td>
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<td>terconazole vaginal cream</td>
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**Antigout Agents**

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**Antimigraine Agents**

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**Antineoplastics - Drugs for Cancer**

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<td>IDHIFA</td>
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**Antiparasitics**

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**Antiplatelets**

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<td>clindamycin phosphate-benzoyl peroxide external gel 1-5%</td>
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<td>myorisan</td>
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**Diabetes - Antidiabetic Agents**

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**Diabetes - Glucose Monitoring**

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### Electrolytes / Minerals / Metals / Vitamins

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### Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer

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<td>ACTEMRA ACTPEN</td>
<td>3</td>
<td>PA; SP</td>
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<tr>
<td>ACTEMRA SUBCUTANEOUS</td>
<td>3</td>
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</tr>
<tr>
<td>azathioprine oral</td>
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<tr>
<td>CIMZIA</td>
<td>2</td>
<td>PA; SP</td>
</tr>
<tr>
<td>CIMZIA PREFILLED KIT</td>
<td>2</td>
<td>PA; SP</td>
</tr>
<tr>
<td>CIMZIA STARTER KIT</td>
<td>2</td>
<td>PA; SP</td>
</tr>
<tr>
<td>COSENTYX SENOREADY (300 MG)</td>
<td>3</td>
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</tr>
<tr>
<td>COSENTYX SENOREADY PEN</td>
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<tr>
<td>cyclosporine modified oral capsule</td>
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<td>ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</td>
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<tr>
<td>ENBREL SURECLICK</td>
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<td>PA; SP</td>
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<tr>
<td>FIRAZYR</td>
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<td>PA; SP</td>
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<td>HAEGARDA</td>
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<td><strong>Drug Tier</strong></td>
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<tr>
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<td>HUMIRA PEN</td>
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<td>HUMIRA PEN-CD/UC/HS STARTER</td>
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<td>PA; SP</td>
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<tr>
<td>HUMIRA PEN-PS/UV/ADOL HS START</td>
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<td>INFLECTRA</td>
<td>2</td>
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<tr>
<td>leflunomide oral</td>
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<tr>
<td>methotrexate oral</td>
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<td></td>
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<tr>
<td>methotrexate sodium oral</td>
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<td></td>
</tr>
<tr>
<td>mycophenolate mofetil oral capsule</td>
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<td>SP</td>
</tr>
<tr>
<td>mycophenolate mofetil oral tablet</td>
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<td>SP</td>
</tr>
<tr>
<td>mycophenolate sodium</td>
<td>1</td>
<td>SP</td>
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<tr>
<td>ORENCIA</td>
<td>3</td>
<td>PA; SP</td>
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<tr>
<td>ORENCIA CLICKJECT</td>
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<td>PA; SP</td>
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<td>OTEZLA</td>
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<td>PA; SP</td>
</tr>
<tr>
<td>RASUVO</td>
<td>2</td>
<td>PA; SP; QL</td>
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<tr>
<td>RENFLEXIS</td>
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<td>PA; SP</td>
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<td>RUCONEST</td>
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<td>SIMPONI</td>
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<tr>
<td>SKYRIZI (150 MG DOSE)</td>
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<td>STELARA INTRAVENOUS</td>
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<td>STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</td>
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<tr>
<td>tacrolimus oral</td>
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<tr>
<td>TALTZ</td>
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<tr>
<td>TREMFYA</td>
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<td>PA; SP</td>
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<td>Drug Name</td>
<td>Drug Tier</td>
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</tr>
<tr>
<td>-----------------</td>
<td>-----------</td>
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<tr>
<td>XELJANZ</td>
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<td>XELJANZ XR</td>
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**Inflammatory Bowel Disease Agents**

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<tr>
<td>DIPENTUM</td>
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<td></td>
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<tr>
<td>LIALDA</td>
<td>3</td>
<td>ST</td>
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<tr>
<td>mesalamine oral tablet delayed release</td>
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<tr>
<td>PENTASA</td>
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<td></td>
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<tr>
<td>PROCTOFOAM HC</td>
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<tr>
<td>UCERIS RECTAL</td>
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**Metabolic Bone Disease Agents - Drugs for Osteoporosis**

<table>
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<th>Drug Name</th>
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<th>Notes</th>
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<tbody>
<tr>
<td>alendronate sodium oral tablet 10 mg, 40 mg, 5 mg</td>
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<tr>
<td>alendronate sodium oral tablet 35 mg, 70 mg</td>
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<td>QL</td>
</tr>
<tr>
<td>BINOSTO</td>
<td>3</td>
<td>QL</td>
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<tr>
<td>calcitriol oral capsule</td>
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<td></td>
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<tr>
<td>FORTEO</td>
<td>2</td>
<td>PA; SP</td>
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<tr>
<td>ibandronate sodium oral</td>
<td>1</td>
<td>QL</td>
</tr>
<tr>
<td>RAYALDEE</td>
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<tr>
<td>TYMLOS</td>
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**Miscellaneous Therapeutic Agents**

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<td>BOTOX</td>
<td>2</td>
<td>PA; Non-Cosmetic; SP</td>
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<tr>
<td>DUROLANE</td>
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<tr>
<td>EUFLEXXA</td>
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<td>PA; SP</td>
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<tr>
<td>GELSYN-3</td>
<td>2</td>
<td>PA; SP</td>
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<tr>
<td>TAKHZYRO</td>
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<td>PA; SP</td>
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<table>
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<th>Drug Name</th>
<th>Drug Tier</th>
<th>Notes</th>
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<td>AZASITE</td>
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<tr>
<td>BESIVANCE</td>
<td>3</td>
<td></td>
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<tr>
<td>erythromycin ophthalmic</td>
<td>1</td>
<td></td>
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<tr>
<td>gentamicin sulfate ophthalmic</td>
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</tr>
<tr>
<td>INVELTYS</td>
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<td></td>
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<tr>
<td>ketorolac tromethamine ophthalmic</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>LOTEMAX OPTHALMIC GEL</td>
<td>3</td>
<td>QL</td>
</tr>
<tr>
<td>LOTE MAX OPTHALMIC OINTMENT</td>
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<td>QL</td>
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<td>LOTE MAX SM</td>
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<td></td>
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<tr>
<td>MOXEZA</td>
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<tr>
<td>moxifloxacin hcl ophthalmic</td>
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<tr>
<td>ofloxacin ophthalmic</td>
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<tr>
<td>olopatadine hcl ophthalmic</td>
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<tr>
<td>PAZEO</td>
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<tr>
<td>prednisolone acetate ophthalmic</td>
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<tr>
<td>PROLENSA</td>
<td>2</td>
<td>QL</td>
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<tr>
<td>tobramycin ophthalmic</td>
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**Ophthalmic Agents - Drugs for Glaucoma**

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<tbody>
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<tr>
<td>AZOPT</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>BETIMOL</td>
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<td></td>
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<tr>
<td>brimonidine tartrate ophthalmic</td>
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</tr>
<tr>
<td>COMBIGAN</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Drug Name</td>
<td>Drug Tier</td>
<td>Notes</td>
</tr>
<tr>
<td>-----------</td>
<td>-----------</td>
<td>-------</td>
</tr>
<tr>
<td>dorzolamide hcl-timolol male</td>
<td>1</td>
<td></td>
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<tr>
<td>latanoprost ophthalmic</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>LUMIGAN</td>
<td>2</td>
<td>QL</td>
</tr>
<tr>
<td>RHOPRESSA</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>ROCKLATAN</td>
<td>2</td>
<td>QL</td>
</tr>
<tr>
<td>SIMBRINZA</td>
<td>2</td>
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<tr>
<td>timolol maleate ophthalmic solution</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>TRAVATAN Z</td>
<td>2</td>
<td>QL</td>
</tr>
<tr>
<td>ZIOPTAN</td>
<td>3</td>
<td>QL</td>
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**Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions**

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<tbody>
<tr>
<td>LASTACAFT</td>
<td>3</td>
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</tr>
<tr>
<td>neomycin-polymyxin-dexameth ophthalmic ointment</td>
<td>1</td>
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<tr>
<td>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</td>
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<tr>
<td>polymyxin b-trimethoprim</td>
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<tr>
<td>RESTASIS</td>
<td>2</td>
<td>PA</td>
</tr>
<tr>
<td>RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05%</td>
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<td>PA</td>
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<tr>
<td>tobramycin-dexamethasone</td>
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<tr>
<td>XIIDRA</td>
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**Otic Agents - Drugs for Ear Conditions**

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<td>CIPRODEX</td>
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<tr>
<td>neomycin-polymyxin-hc otic suspension</td>
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<tr>
<td>ofloxacin otic</td>
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<tr>
<td>OTOVEL</td>
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**Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold**

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<td>ASTEPRO</td>
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<tr>
<td>azelastine hcl nasal solution 0.1%, 137 mcg/spray</td>
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<td>benzonatate</td>
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</tr>
<tr>
<td>desloratadine oral tablet</td>
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<tr>
<td>DYMISTA</td>
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<td>QL</td>
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<tr>
<td>fluticasone propionate nasal</td>
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<tr>
<td>hydrocodone polst-cpm polst er</td>
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<td>PA; QL</td>
</tr>
<tr>
<td>ipratropium bromide nasal</td>
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<tr>
<td>levocetirizine dihydrochloride oral tablet</td>
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<td>mometasone furoate nasal</td>
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<td>QL</td>
</tr>
<tr>
<td>OMNARIS</td>
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<td>promethazine hcl oral tablet</td>
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<td>promethazine-codeine</td>
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<td>promethazine-dm</td>
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<td>pseudoephedrine-bromphen-dm</td>
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<td>QNASL</td>
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<tr>
<td>QNASL CHILDRENS</td>
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<td>Drug Name</td>
<td>Drug Tier</td>
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<td><strong>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</strong></td>
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<td>ADVAIR DISKUS</td>
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<tr>
<td>ADVAIR HFA</td>
<td>2</td>
<td>QL</td>
</tr>
<tr>
<td>ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION</td>
<td>3 ST; Made by Par; QL</td>
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</tr>
<tr>
<td>ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION</td>
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<td>albuterol sulfate inhalation</td>
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</tr>
<tr>
<td>ANORO ELLIPTA</td>
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<td>QL</td>
</tr>
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<td>ARNUITY ELLIPTA</td>
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<tr>
<td>ATROVENT HFA</td>
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<td>QL</td>
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<tr>
<td>BREO ELLIPTA</td>
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<td>budesonide inhalation</td>
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<td>COMBIVENT RESPIMAT</td>
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<tr>
<td>EPINEPHRINE INJECTION SOLUTION 0.3 MG/0.3ML</td>
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<tr>
<td><strong>EPINEPHRINE INJECTION SOLUTION AUTO INJECTOR 0.15 MG/0.15ML</strong></td>
<td>1 Made by Mylan</td>
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</tr>
<tr>
<td><strong>EPINEPHRINE INJECTION SOLUTION AUTO INJECTOR 0.15 MG/0.3ML</strong></td>
<td>1 Made by Mylan</td>
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<tr>
<td><strong>epinephrine solution auto-injector 0.3 mg/0.3ml injection</strong></td>
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<td>EPIPEN JR 2-PAK</td>
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<td>ipratropium-albuterol</td>
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</tr>
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<td>LONHALA MAGNAIR REFILL KIT</td>
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</tr>
<tr>
<td>LONHALA MAGNAIR STARTER KIT</td>
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<td>montelukast sodium oral tablet</td>
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<td>PROAIR HFA</td>
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<td>QL</td>
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<tr>
<td>PROAIR RESPICLICK</td>
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<td>QL</td>
</tr>
<tr>
<td>PROVENTIL HFA</td>
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<td>PULMICORT FLEXHALER</td>
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<td>QL</td>
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<tr>
<td>QVAR REDIHALER</td>
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<td>SEREVENT DISKUS</td>
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January 2020 Select Standard Formulary
<table>
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<th>Drug Name</th>
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<td>SPIRIVA HANDIHALER</td>
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<td>SPIRIVA RESPIMAT</td>
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<td>QL</td>
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<td>STIOLTO RESPIMAT</td>
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<td>QL</td>
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<td>SYMJEPI</td>
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<tr>
<td>TRELEGY ELLIPTA</td>
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<tr>
<td>VENTOLIN HFA</td>
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**Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis**

<table>
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<tr>
<th>Drug Name</th>
<th>Drug Tier</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>BETHKIS</td>
<td>2</td>
<td>SP</td>
</tr>
<tr>
<td>TOBI PODHALER</td>
<td>3</td>
<td>SP; QL</td>
</tr>
</tbody>
</table>

**Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension**

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>Drug Tier</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADEMPAS</td>
<td>2</td>
<td>PA; SP; QL</td>
</tr>
<tr>
<td>OPSUMIT</td>
<td>2</td>
<td>PA; SP; QL</td>
</tr>
<tr>
<td>ORENITRAM</td>
<td>3</td>
<td>PA; SP</td>
</tr>
<tr>
<td>sildenafil citrate oral tablet 20 mg</td>
<td>1</td>
<td>PA; SP; QL</td>
</tr>
<tr>
<td>TRACLEER 62.5 MG, 125 MG</td>
<td>3</td>
<td>PA; SP; QL</td>
</tr>
<tr>
<td>TRACLEER 32 MG</td>
<td>2</td>
<td>PA; SP; QL</td>
</tr>
</tbody>
</table>

**Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm**

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>Drug Tier</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>baclofen oral</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>carisoprodol oral</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>cyclobenzaprine hcl oral</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>LORZONE</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>methocarbamol oral</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>tizanidine hcl oral</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

**Sleep Disorder Agents**

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>Drug Tier</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>eszopiclone</td>
<td>1</td>
<td>QL</td>
</tr>
<tr>
<td>modafinil</td>
<td>1</td>
<td>PA; QL</td>
</tr>
<tr>
<td>SILENOR</td>
<td>3</td>
<td>QL</td>
</tr>
<tr>
<td>temazepam</td>
<td>1</td>
<td>QL</td>
</tr>
<tr>
<td>XYREM</td>
<td>3</td>
<td>PA; SP; QL</td>
</tr>
<tr>
<td>zolpidem tartrate er</td>
<td>1</td>
<td>QL</td>
</tr>
<tr>
<td>zolpidem tartrate oral</td>
<td>1</td>
<td>QL</td>
</tr>
</tbody>
</table>