

Oscar 2021 Formulary

(List of Covered Drugs)



oscar

What is the Oscar Formulary?

A formulary is a list of covered drugs selected by Oscar in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Oscar will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at an Oscar network pharmacy, and other plan rules are followed. This Formulary was updated as of 02/01/2021.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., BYSTOLIC) and generic drugs are listed in lower-case italics (e.g., carvedilol). There are two ways to find your drug within the formulary:

① Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, Antiarrhythmics. If you know what your drug is used for, look for the category name in the list that begins page 1. Then look under the category name for your drug.

② Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 106. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

Oscar covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Oscar requires you [or your physician] to get prior authorization for certain drugs. This means that you will need to get approval from Oscar before you fill your prescriptions. If you don't get approval, Oscar may not cover the drug.
- **Quantity Limits:** For certain drugs, Oscar limits the amount of the drug being filled. For example Oscar may limit a drug to only 48 pills in a 1-month timeframe. These amounts will be listed in the formulary below if they are applicable to your medication.
- **Step Therapy:** In some cases, Oscar requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, Oscar may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Oscar will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1.

What if my drug is not on the Formulary?

If your drug is not included in this formulary, you should first contact Concierge and ask if your drug is covered.

If you learn that Oscar does not cover your drug, you can ask Concierge for similar drugs that are covered by Oscar. Discuss these alternatives with your doctor and ask him or her to prescribe one of the alternatives that are covered by Oscar.

How do I request an exception to the Oscar Formulary?

Your Doctor can ask Oscar to make an exception to our coverage rules.

Generally, Oscar will only approve your request for an exception if the alternative drugs included on the plan's formulary, or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

Can the Formulary change?

Most changes in drug coverage happen on January 1, but during the year Oscar may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. You can contact Concierge to find out if your drug is still covered, visit [hioscar.com](https://www.hioscar.com) and log in to your plan specific account, or use the Oscar app drug search feature.

Changes that can affect you this year:

- New generic drugs. We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. You can find information in the section above entitled "How do I request an exception to the Oscar Formulary?"

- Drugs removed from the market. If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.
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For more information

For more detailed information about your Oscar prescription drug coverage, please visit www.hioscar.com or call Concierge at 1-855-OSCAR-88. You can also find your plan specific information on our Oscar app available through iTunes or Google Play.

Formulary Terminology

The formulary that begins on page 1 provides coverage information about the drugs covered by Oscar. If you have trouble finding your drug in the list, turn to the Index that begins on page 106.

The information in the Requirements/Limits column tells you if Oscar has any special requirements for coverage of your drug.

Abbreviation	Term	Description
PA	Prior Authorization	Your Physician must get approval from Oscar to cover this medication
QL	Quantity Limits	Some drugs have a limit of how much you can fill at a time
ST	Step Therapy	For some drugs you must first try certain drugs to treat your medical condition before we will cover another drug for that condition
OTC	Over-the-counter	Medications that can be purchased with ¹ or without a prescription from your Physician
PA**	Prior Authorization if Step Therapy is not met	A Prior authorization will be needed if you do not meet the step therapy

Get \$0 Tier 1 Drugs through Oscar Care

Starting January 1, 2021, we're making Tier 1 medications more affordable. That's right, any medications that are prescribed to you through providers through Oscar Care (which includes Virtual Urgent Care and Virtual Primary Care in some markets) and that are listed as Tier 1 drugs will be \$0*.

In the formulary pages below, any drugs that are listed as being on Tier 1, 1A or 1B will be \$0 if prescribed by an Oscar Virtual Care provider.

*\$0 prescriptions vary by market and may not be available in your service area. If you have an HSA-compatible high-deductible health plan or a Secure plan, you won't be eligible for \$0 follow-up services. Visits, prescriptions and services may be limited per provider discretion. \$0 prescriptions are available when prescribed by a provider through Oscar Virtual Urgent Care or Oscar Virtual Primary Care.

¹to be covered at the pharmacy a prescription from your doctor is required

Oscar Base Plus 6T eff 02/01/2021

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
COX-2 INHIBITORS		
<i>celecoxib</i> CAPS 50mg, 100mg, 200mg	2	
GOUT		
<i>allopurinol</i> TABS 100mg, 300mg	1A	\$0 copay through Oscar Virtual Care
<i>allopurinol sodium</i> SOLR 500mg	1B	\$0 copay through Oscar Virtual Care
<i>colchicine</i> TABS .6mg	2	QL (120 tablets / 25 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>febuxostat</i> TABS 40mg, 80mg	3	PA
<i>probenecid</i> TABS 500mg	1B	\$0 copay through Oscar Virtual Care
NON-OPIOID ANALGESICS		
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1B	QL (48 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1B	QL (48 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1B	QL (48 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1B	QL (48 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>tencon</i>	1B	QL (48 tabs / 25 days); \$0 copay through Oscar Virtual Care
NSAIDS		
<i>diclofenac potassium</i> TABS 50mg	1B	\$0 copay through Oscar Virtual Care
<i>diclofenac sodium</i> TB24 100mg; TBEC 25mg, 50mg, 75mg	1B	\$0 copay through Oscar Virtual Care
<i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	1B	\$0 copay through Oscar Virtual Care
<i>flurbiprofen</i> TABS 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>ibuprofen</i> SUSP 100mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>ibuprofen</i> TABS 400mg, 600mg, 800mg	1A	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>ketorolac tromethamine</i> SOLN 15mg/ml, 30mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>ketorolac tromethamine</i> TABS 10mg	1B	QL (20 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>meclofenamate sodium</i> CAPS 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>mefenamic acid</i> CAPS 250mg	1B	\$0 copay through Oscar Virtual Care
<i>meloxicam</i> TABS 7.5mg, 15mg	1A	\$0 copay through Oscar Virtual Care
<i>nabumetone</i> TABS 500mg, 750mg	1B	\$0 copay through Oscar Virtual Care
<i>naproxen</i> TABS 250mg, 375mg, 500mg	1A	\$0 copay through Oscar Virtual Care
<i>oxaprozin</i> TABS 600mg	1B	\$0 copay through Oscar Virtual Care
<i>piroxicam</i> CAPS 10mg, 20mg	1B	\$0 copay through Oscar Virtual Care
<i>sulindac</i> TABS 150mg, 200mg	1B	\$0 copay through Oscar Virtual Care
<i>tolmetin sodium</i> CAPS 400mg; TABS 200mg, 600mg	1B	\$0 copay through Oscar Virtual Care

NSAIDS, COMBINATIONS

<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	1B	\$0 copay through Oscar Virtual Care

OPIOID AGONIST/ANTAGONIST

<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1B	QL (90 units / 25 days); \$0 copay through Oscar Virtual Care
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1B	QL (90 units / 25 days); \$0 copay through Oscar Virtual Care
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1B	QL (90 units / 25 days); \$0 copay through Oscar Virtual Care
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	1B	QL (60 units / 25 days); \$0 copay through Oscar Virtual Care
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	0	QL (90 tabs / 25 days); \$0 copay
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	0	QL (90 tabs / 25 days); \$0 copay
ZUBSOLV SUB 0.7-0.18	2	QL (90 units / 25 days)
ZUBSOLV SUB 1.4-0.36	2	QL (90 units / 25 days)

Drug Name	Drug Tier	Requirements/Limits
ZUBSOLV SUB 2.9-0.71	2	QL (90 units / 25 days)
ZUBSOLV SUB 5.7-1.4	2	QL (90 units / 25 days)
ZUBSOLV SUB 8.6-2.1	2	QL (60 units / 25 days)
ZUBSOLV SUB 11.4-2.9	2	QL (30 units / 25 days)

OPIOID ANALGESICS

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1B	ST, QL (2700 ml / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1B	ST, QL (400 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1B	ST, QL (360 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	1B	QL (48 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>butorphanol tartrate SOLN 1mg/ml, 2mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>butorphanol tartrate SOLN 10mg/ml</i>	1B	QL (2 bottles / 25 days); \$0 copay through Oscar Virtual Care
<i>codeine sulfate TABS 30mg</i>	1B	ST, QL (42 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*

Drug Name	Drug Tier	Requirements/Limits
CODEINE SULFATE TABS 60mg	2	ST, QL (42 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
EMBEDA CAP 20-0.8MG	2	ST, QL (60 caps / 25 days)
EMBEDA CAP 30-1.2MG	2	ST, QL (60 caps / 25 days)
EMBEDA CAP 50-2MG	2	ST, QL (30 caps / 25 days)
EMBEDA CAP 60-2.4MG	2	ST, QL (30 caps / 25 days)
EMBEDA CAP 80-3.2MG	2	ST, QL (30 caps / 25 days)
EMBEDA CAP 100-4MG	2	ST, PA; High Strength Requires PA
<i>endocet</i>	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>endocet</i>	1B	ST, QL (240 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>endocet</i>	1B	ST, QL (360 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr	1B	ST, QL (10 patches / 25 days); \$0 copay through Oscar Virtual Care
<i>fentanyl</i> PT72 50mcg/hr, 75mcg/hr, 100mcg/hr	1B	ST, PA; High Strength Requires PA; \$0*
<i>fentanyl citrate</i> LPOP 200mcg, 400mcg, 600mcg, 800mcg, 1200mcg, 1600mcg	1B	PA, QL (120 lozenges / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1B	ST, QL (2700 ml / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1B	ST, QL (240 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	1B	ST, QL (50 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>hydromorphone hcl SOLN 1mg/ml, 2mg/ml, 4mg/ml, 10mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
HYDROMORPHONE HCL SUPP 3mg	3	ST, QL (120 suppositories / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages
<i>hydromorphone hcl TABS 2mg</i>	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl</i> TABS 4mg	1B	ST, QL (150 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>hydromorphone hcl</i> TABS 8mg	1B	ST, QL (60 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>hydromorphone hcl</i> TB24 8mg, 12mg, 16mg	1B	ST, QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>hydromorphone hcl</i> TB24 32mg	1B	ST, PA; High Strength Requires PA; \$0*
HYSINGLA ER T24A 20mg, 30mg, 40mg, 60mg, 80mg	3	ST, QL (30 tabs / 25 days)
HYSINGLA ER T24A 100mg, 120mg	3	ST, PA; High Strength Requires PA
<i>methadone hcl</i> CONC 10mg/ml	1B	QL (30 ml / 25 days); (indicated for opioid addiction); \$0*
<i>methadone hcl</i> SOLN 5mg/5ml	1B	ST, QL (450 ml / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl</i> SOLN 10mg/5ml	1B	ST, QL (300 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl</i> SOLN 10mg/ml	1B	ST, QL (20 ml / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl</i> TABS 5mg	1B	ST, QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl</i> TABS 10mg	1B	ST, QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl</i> TBSO 40mg	1B	QL (9 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl intensol</i> CONC 10mg/ml	1B	ST, QL (60 mL / 25 days); (generic of Methadone Intensol, indicated for pain); \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>methadose</i> TBSO 40mg	1B	QL (9 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate</i> CP24 10mg, 20mg, 30mg	1B	ST, QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate</i> CP24 50mg, 60mg, 80mg	1B	ST, QL (30 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate</i> CP24 100mg; TBCR 60mg, 100mg, 200mg	1B	ST, PA; High Strength Requires PA; \$0*
MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 150mg/30ml	3	
<i>morphine sulfate</i> SOLN 10mg/5ml	1B	ST, QL (900 ml / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>morphine sulfate</i> SOLN 20mg/5ml	1B	ST, QL (675 mL / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>morphine sulfate</i> SOLN 100mg/5ml	1B	ST, QL (135 mL / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>morphine sulfate</i> SOLN .5mg/ml, 1mg/ml, 4mg/ml, 8mg/ml, 10mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>morphine sulfate</i> SUPP 5mg, 10mg	1B	ST, QL (180 suppositories / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>morphine sulfate</i> SUPP 20mg	1B	ST, QL (120 supp / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate</i> SUPP 30mg	1B	ST, QL (90 supp / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>morphine sulfate</i> TABS 15mg	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>morphine sulfate</i> TABS 30mg	1B	ST, QL (90 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>morphine sulfate</i> TBCR 15mg, 30mg	1B	ST, QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate beads</i> CP24 30mg, 45mg, 60mg, 75mg, 90mg	1B	ST, QL (30 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate beads</i> CP24 120mg	1B	ST, PA; High Strength Requires PA; \$0*
<i>nalbuphine hcl</i> SOLN 10mg/ml, 20mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>oxycodone hcl</i> CAPS 5mg	1B	ST, QL (180 caps / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone hcl</i> CONC 100mg/5ml	1B	ST, QL (90 mL / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone hcl</i> SOLN 5mg/5ml	1B	ST, QL (900 ml / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone hcl</i> T12A 10mg, 15mg, 20mg, 30mg	1B	ST, QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>oxycodone hcl</i> T12A 40mg, 60mg, 80mg	1B	ST, PA; High Strength Requires PA; \$0*
<i>oxycodone hcl</i> TABS 5mg, 10mg	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone hcl</i> TABS 15mg	1B	ST, QL (120 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone hcl</i> TABS 20mg	1B	ST, QL (90 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone hcl</i> TABS 30mg	1B	ST, QL (60 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone w/ acetaminophen soln</i> 5-325 mg/5ml	1B	ST, QL (1800 ml / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone w/ acetaminophen tab</i> 2.5-325 mg	1B	ST, QL (360 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone w/ acetaminophen tab</i> 5-325 mg	1B	ST, QL (360 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1B	ST, QL (240 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone-aspirin tab 4.8355-325 mg</i>	1B	ST, QL (360 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxycodone-ibuprofen tab 5-400 mg</i>	1B	ST, QL (28 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxymorphone hcl TABS 5mg</i>	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxymorphone hcl TABS 10mg</i>	1B	ST, QL (90 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>oxymorphone hcl TB12 5mg, 7.5mg, 10mg, 15mg</i>	1B	ST, QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>oxymorphone hcl TB12 20mg, 30mg, 40mg</i>	1B	ST, PA; High Strength Requires PA; \$0*
<i>tramadol hcl TABS 50mg</i>	1B	ST, QL (180 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl</i> TABS 100mg	1B	ST, QL (90 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*
<i>tramadol hcl</i> TB24 100mg	1B	ST, QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>tramadol hcl</i> TB24 200mg, 300mg	1B	ST, PA; High Strength Requires PA; \$0*
<i>tramadol-acetaminophen tab</i> 37.5-325 mg	1B	ST, QL (40 tabs / 25 days); Subject to initial 3-day limit for 19 and younger; 7-day initial limit for all other ages; \$0*

OPIOID PARTIAL AGONISTS

BELBUCA FILM 75mcg, 150mcg, 300mcg, 450mcg	2	ST, QL (60 films / 25 days)
BELBUCA FILM 600mcg, 750mcg, 900mcg	2	ST, PA; High Strength Requires Prior Auth
<i>buprenorphine hcl</i> SOLN .3mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>buprenorphine hcl</i> SUBL 2mg, 8mg	0	QL (90 tabs / 25 days); \$0 copay; Must obtain approval after the first 30 day supply
SUBLOCADE SOSY 100mg/0.5ml, 300mg/1.5ml	4	

SALICYLATES

<i>aspirin enteric coated ad</i> TBEC 81mg	0	QL (100 tabs / 30 days), OTC; \$0 copay for members age 50-59 or members at risk for preeclampsia, otherwise not covered
<i>diflunisal</i> TABS 500mg	1B	\$0 copay through Oscar Virtual Care
<i>goodsense aspirin</i> CHEW 81mg	0	QL (100 tabs / 30 days), OTC; \$0 copay for members age 50-59 or members at risk for preeclampsia, otherwise not covered

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS - ANTI-INFLAMMATORY		
<i>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)</i>		
<i>indomethacin</i> CAPS 25mg, 50mg	1B	\$0 copay through Oscar Virtual Care
ANESTHETICS		
<i>LOCAL ANESTHETICS</i>		
LIDO/DEXTROS INJ 5-7.5%	3	
<i>lidocaine hcl (local anesth.)</i> SOLN .5%, 1%, 1.5%, 2%, 4%	1B	\$0 copay through Oscar Virtual Care
ANTI-INFECTIVES		
<i>ANTI-BACTERIALS - MISCELLANEOUS</i>		
<i>amikacin sulfate</i> SOLN 1gm/4ml, 500mg/2ml	1B	\$0 copay through Oscar Virtual Care
<i>chloramphenicol sodium succinate</i> SOLR 1gm	1B	\$0 copay through Oscar Virtual Care
<i>fosfomycin tromethamine</i> PACK 3gm	1B	\$0 copay through Oscar Virtual Care
<i>gentamicin in saline inj 0.8 mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>gentamicin in saline inj 1 mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>gentamicin in saline inj 1.2 mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>gentamicin in saline inj 1.6 mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>gentamicin in saline inj 2 mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>gentamicin sulfate</i> SOLN 10mg/ml, 40mg/ml	1B	\$0 copay through Oscar Virtual Care
MONUROL PACK 5.631gm	3	
<i>neomycin sulfate</i> TABS 500mg	1B	\$0 copay through Oscar Virtual Care
<i>paromomycin sulfate</i> CAPS 250mg	1B	\$0 copay through Oscar Virtual Care
<i>streptomycin sulfate</i> SOLR 1gm	1B	\$0 copay through Oscar Virtual Care
SULFADIAZINE TABS 500mg	3	
<i>tinidazole</i> TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>tobramycin</i> NEBU 300mg/5ml	4	PA, QL (280 mL / 28 days)
<i>tobramycin sulfate</i> SOLN 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml; SOLR 1.2gm	1B	\$0 copay through Oscar Virtual Care
<i>ANTI-INFECTIVES - MISCELLANEOUS</i>		
ALINIA SUSR 100mg/5ml	3	QL (540mL / 25 days)

Drug Name	Drug Tier	Requirements/Limits
ALINIA TABS 500mg	3	QL (20 tabs / 25 days)
<i>atovaquone</i> SUSP 750mg/5ml	1B	\$0 copay through Oscar Virtual Care
AZACTAM/DEX INJ 1GM	3	
AZACTAM/DEX INJ 2GM	3	
<i>aztreonam</i> SOLR 1gm, 2gm	1B	\$0 copay through Oscar Virtual Care
CAYSTON SOLR 75mg	4	PA, QL (84 vials / 28 days)
<i>clindamycin hcl</i> CAPS 75mg, 150mg, 300mg	1B	\$0 copay through Oscar Virtual Care
<i>clindamycin palmitate hydrochloride</i> SOLR 75mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>clindamycin phosphate</i> SOLN 9gm/60ml, 300mg/2ml, 600mg/4ml, 900mg/6ml, 9000mg/60ml	1B	\$0 copay through Oscar Virtual Care
<i>dapsone</i> TABS 25mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>daptomycin</i> SOLR 500mg	1B	\$0 copay through Oscar Virtual Care
DARAPRIM TABS 25mg	3	PA
<i>doripenem</i> SOLR 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
EMVERM CHEW 100mg	3	PA, QL (12 tabs / 365 days)
<i>ertapenem sodium</i> SOLR 1gm	1B	\$0 copay through Oscar Virtual Care
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	1B	\$0 copay through Oscar Virtual Care
INVANZ SOLR 1gm	3	
<i>ivermectin</i> TABS 3mg	1B	\$0 copay through Oscar Virtual Care
<i>linezolid</i> SOLN 600mg/300ml; SUSR 100mg/5ml; TABS 600mg	1B	\$0 copay through Oscar Virtual Care
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	1B	\$0 copay through Oscar Virtual Care
<i>meropenem</i> SOLR 1gm, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>methenamine hippurate</i> TABS 1gm	1B	\$0 copay through Oscar Virtual Care
<i>metronidazole</i> TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>nitrofurantoin</i> SUSP 25mg/5ml	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>nitrofurantoin macrocrystal</i> CAPS 25mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>nitrofurantoin macrocrystal</i> CAPS 50mg, 100mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>nitrofurantoin monohyd macro</i> CAPS 100mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>pentamidine isethionate</i> SOLR 300mg	1B	\$0 copay through Oscar Virtual Care
<i>polymyxin b sulfate</i> SOLR 500000unit	1B	\$0 copay through Oscar Virtual Care
<i>praziquantel</i> TABS 600mg	1B	QL (24 tabs / 365 days); \$0 copay through Oscar Virtual Care
PRIMSOL SOLN 50mg/5ml	2	
SIVEXTRO SOLR 200mg; TABS 200mg	3	
<i>sulfamethoxazole-trimethoprim iv soln</i> 400-80 mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>sulfamethoxazole-trimethoprim susp</i> 200-40 mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>sulfamethoxazole-trimethoprim tab</i> 400-80 mg	1A	\$0 copay through Oscar Virtual Care
<i>sulfamethoxazole-trimethoprim tab</i> 800-160 mg	1A	\$0 copay through Oscar Virtual Care
<i>trimethoprim</i> TABS 100mg	1B	\$0 copay through Oscar Virtual Care
<i>vancomycin hcl</i> CAPS 125mg, 250mg	1B	QL (80 caps / 10 days); \$0 copay through Oscar Virtual Care
<i>vancomycin hcl</i> SOLR 1gm, 5gm, 10gm, 500mg, 750mg	1B	\$0 copay through Oscar Virtual Care
XIFAXAN TABS 200mg	3	QL (9 tabs / 25 days)
XIFAXAN TABS 550mg	3	PA
ANTIFUNGALS		
<i>amphotericin b</i> SOLR 50mg	1B	\$0 copay through Oscar Virtual Care
<i>bio-statin</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
BIO-STATIN CAPS 500000unit, 1000000unit	2	
<i>fluconazole</i> SUSR 10mg/ml, 40mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>fluconazole</i> TABS 50mg, 100mg, 150mg, 200mg	1A	\$0 copay through Oscar Virtual Care
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	1B	\$0 copay through Oscar Virtual Care
FLUCONAZOLE/ INJ NACL 100	3	
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	1B	\$0 copay through Oscar Virtual Care
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	1B	\$0 copay through Oscar Virtual Care
<i>itraconazole</i> CAPS 100mg; SOLN 10mg/ml	3	PA
<i>nystatin</i> TABS 500000unit	1B	\$0 copay through Oscar Virtual Care
<i>terbinafine hcl</i> TABS 250mg	1B	QL (180 tabs / 365 days); \$0 copay through Oscar Virtual Care
<i>voriconazole</i> SUSR 40mg/ml; TABS 50mg, 200mg	3	PA
ANTIMALARIALS		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>chloroquine phosphate</i> TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
COARTEM TAB 20-120MG	3	
<i>mefloquine hcl</i> TABS 250mg	1B	\$0 copay through Oscar Virtual Care
<i>primaquine phosphate</i> TABS 26.3mg	1B	\$0 copay through Oscar Virtual Care
<i>quinine sulfate</i> CAPS 324mg	1B	\$0 copay through Oscar Virtual Care
ANTIRETROVIRAL AGENTS		
<i>abacavir sulfate</i> SOLN 20mg/ml	1B	QL (900 mL / 30 days); \$0 copay through Oscar Virtual Care
<i>abacavir sulfate</i> TABS 300mg	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
APTIVUS CAPS 250mg	2	QL (120 caps / 30 days)
APTIVUS SOLN 100mg/ml	2	QL (285 mL / 28 days)

Drug Name	Drug Tier	Requirements/Limits
<i>atazanavir sulfate</i> CAPS 150mg, 300mg	1B	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>atazanavir sulfate</i> CAPS 200mg	1B	QL (60 caps / 30 days); \$0 copay through Oscar Virtual Care
CRIXIVAN CAPS 200mg	2	QL (450 caps / 30 days)
CRIXIVAN CAPS 400mg	2	QL (180 caps / 30 days)
<i>didanosine</i> CPDR 200mg, 250mg, 400mg	1B	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
EDURANT TABS 25mg	2	QL (60 tabs / 30 days)
<i>efavirenz</i> CAPS 50mg, 200mg	1B	QL (90 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>efavirenz</i> TABS 600mg	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>emtricitabine</i> CAPS 200mg	1B	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
EMTRIVA CAPS 200mg	2	QL (30 caps / 30 days)
EMTRIVA SOLN 10mg/ml	2	QL (680 ml / 28 days)
<i>fosamprenavir calcium</i> TABS 700mg	1B	QL (120 tabs / 30 days); \$0 copay through Oscar Virtual Care
FUZEON SOLR 90mg	4	QL (60 vials / 30 days)
INTELENCE TABS 25mg, 100mg	2	QL (120 tabs / 30 days)
INTELENCE TABS 200mg	2	QL (60 tabs / 30 days)
INVIRASE CAPS 200mg	2	QL (300 caps / 30 days)
INVIRASE TABS 500mg	2	QL (120 tabs / 30 days)
ISENTRESS CHEW 25mg, 100mg	2	QL (180 tabs / 30 days)
ISENTRESS PACK 100mg	2	QL (60 packets / 30 days)
ISENTRESS TABS 400mg	2	QL (120 tabs / 30 days)
ISENTRESS HD TABS 600mg	2	QL (60 tabs / 30 days)
<i>lamivudine</i> SOLN 10mg/ml	1B	QL (900 ml / 30 days); \$0 copay through Oscar Virtual Care
<i>lamivudine</i> TABS 150mg	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>lamivudine</i> TABS 300mg	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
LEXIVA SUSP 50mg/ml	2	QL (1575 mL / 28 days)

Drug Name	Drug Tier	Requirements/Limits
<i>nevirapine</i> SUSP 50mg/5ml	1B	QL (1200 mL / 30 days); \$0 copay through Oscar Virtual Care
<i>nevirapine</i> TABS 200mg	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>nevirapine</i> TB24 100mg	1B	QL (90 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>nevirapine</i> TB24 400mg	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
NORVIR PACK 100mg	2	QL (360 packets / 30 days)
NORVIR SOLN 80mg/ml	2	QL (480 mL / 30 days)
PREZISTA SUSP 100mg/ml	2	QL (400 ml / 30 days)
PREZISTA TABS 75mg	2	QL (300 tabs / 30 days)
PREZISTA TABS 150mg	2	QL (180 tabs / 30 days)
PREZISTA TABS 600mg	2	QL (60 tabs / 30 days)
PREZISTA TABS 800mg	2	QL (30 tabs / 30 days)
RESCRIPTOR TABS 100mg	3	QL (900 tabs / 30 days)
RESCRIPTOR TABS 200mg	3	QL (180 tabs / 30 days)
RETROVIR IV INFUSION SOLN 10mg/ml	2	
REYATAZ PACK 50mg	2	QL (180 packets / 30 days)
<i>ritonavir</i> TABS 100mg	1B	QL (360 tabs / 30 days); \$0 copay through Oscar Virtual Care
SELZENTRY SOLN 20mg/ml	2	QL (1840 mL / 30 days)
SELZENTRY TABS 25mg	2	QL (240 tabs / 30 days)
SELZENTRY TABS 75mg, 150mg	2	QL (60 tabs / 30 days)
SELZENTRY TABS 300mg	2	QL (120 tabs / 30 days)
<i>stavudine</i> CAPS 15mg, 20mg, 30mg, 40mg	1B	QL (60 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>tenofovir disoproxil fumarate</i> TABS 300mg	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
TIVICAY TABS 10mg, 25mg, 50mg	2	QL (60 tabs / 30 days)
TROGARZO SOLN 200mg/1.33ml	4	
TYBOST TABS 150mg	2	QL (30 tabs / 30 days)
VIDEX EC CPDR 125mg	2	QL (30 caps / 30 days)
VIDEX PEDIATRIC SOLR 2gm, 4gm	2	QL (1200 ml / 30 days)
VIRACEPT TABS 250mg	2	QL (300 tabs / 30 days)
VIRACEPT TABS 625mg	2	QL (120 tabs / 30 days)
VIREAD POWD 40mg/gm	2	QL (240 gm / 30 days)

Drug Name	Drug Tier	Requirements/Limits
VIREAD TABS 150mg, 200mg, 250mg	2	QL (30 tabs / 30 days)
ZERIT SOLR 1mg/ml	2	QL (2400 ml / 30 days)
<i>zidovudine</i> CAPS 100mg	1B	QL (180 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>zidovudine</i> SYRP 50mg/5ml	1B	QL (1800 ml / 30 days); \$0 copay through Oscar Virtual Care
<i>zidovudine</i> TABS 300mg	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care

ANTIRETROVIRAL COMBINATION AGENTS

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
BIKTARVY TAB	2	QL (30 tabs / 30 days)
CIMDUO TAB 300-300	2	QL (30 tabs / 30 days)
DESCOVY TAB 200/25MG	2	PA, QL (30 tabs / 30 days); Exception process available for \$0 copay when medically necessary for pre-exposure prophylaxis
DOVATO TAB 50-300MG	2	QL (30 tabs / 30 days)
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	0	QL (30 tabs / 30 days); \$0 for pre-exposure prophylaxis only; Tier 3 for all others
EVOTAZ TAB 300-150	2	QL (30 tabs / 30 days)
GENVOYA TAB	2	QL (30 tabs / 30 days)
KALETRA TAB 100-25MG	2	QL (240 tabs / 30 days)
KALETRA TAB 200-50MG	2	QL (120 tabs / 30 days)
<i>lamivudine-zidovudine tab 150-300 mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1B	QL (390 mL / 30 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
ODEFSEY TAB	2	QL (30 tabs / 30 days)
PREZCOBIX TAB 800-150	2	QL (30 tabs / 30 days)
SYMFI LO TAB	2	QL (30 tabs / 30 days)
SYMFI TAB	2	QL (30 tabs / 30 days)
TEMIXYS TAB 300-300	2	QL (30 tabs / 30 days)
TRIUMEQ TAB	2	QL (30 tabs / 30 days)
TRUVADA TAB 100-150	2	QL (30 tabs / 30 days)
TRUVADA TAB 133-200	2	QL (30 tabs / 30 days)
TRUVADA TAB 167-250	2	QL (30 tabs / 30 days)

ANTITUBERCULAR AGENTS

<i>cycloserine</i> CAPS 250mg	1B	\$0 copay through Oscar Virtual Care
<i>ethambutol hcl</i> TABS 100mg, 400mg	1B	\$0 copay through Oscar Virtual Care
<i>isoniazid</i> SOLN 100mg/ml; SYRP 50mg/5ml; TABS 100mg, 300mg	1B	\$0 copay through Oscar Virtual Care
PASER PACK 4gm	3	
PRIFTIN TABS 150mg	2	
<i>pyrazinamide</i> TABS 500mg	1B	\$0 copay through Oscar Virtual Care
<i>rifabutin</i> CAPS 150mg	1B	\$0 copay through Oscar Virtual Care
RIFAMATE CAP	2	
<i>rifampin</i> CAPS 150mg, 300mg; SOLR 600mg	1B	\$0 copay through Oscar Virtual Care
RIFATER TAB	2	
SIRTURO TABS 100mg	4	PA
TRECTOR TABS 250mg	2	

ANTIVIRALS

<i>acyclovir</i> CAPS 200mg; TABS 400mg, 800mg	1A	\$0 copay through Oscar Virtual Care
<i>acyclovir</i> SUSP 200mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>acyclovir sodium</i> SOLN 50mg/ml; SOLR 500mg	1B	\$0 copay through Oscar Virtual Care
<i>adefovir dipivoxil</i> TABS 10mg	4	PA
BARACLUDE SOLN .05mg/ml	3	
<i>cidofovir</i> SOLN 75mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>entecavir</i> TABS .5mg, 1mg	3	PA
EPIVIR HBV SOLN 5mg/ml	2	
<i>famciclovir</i> TABS 125mg, 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>lamivudine (hbv)</i> TABS 100mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate</i> CAPS 30mg	1B	QL (40 caps / 90 days); \$0 copay through Oscar Virtual Care
<i>oseltamivir phosphate</i> CAPS 45mg, 75mg	1B	QL (20 caps / 90 days); \$0 copay through Oscar Virtual Care
<i>oseltamivir phosphate</i> SUSR 6mg/ml	1B	QL (360 mL / 90 days); \$0 copay through Oscar Virtual Care
RELENZA DISKHALER AEPB 5mg/blister	2	QL (2 inhalers / 90 days)
<i>ribavirin</i> SOLR 6gm	1B	\$0 copay through Oscar Virtual Care
<i>rimantadine hydrochloride</i> TABS 100mg	1B	\$0 copay through Oscar Virtual Care
<i>valacyclovir hcl</i> TABS 500mg, 1000mg	1B	\$0 copay through Oscar Virtual Care
<i>valganciclovir hcl</i> SOLR 50mg/ml	4	QL (1000 mL / 30 days)
<i>valganciclovir hcl</i> TABS 450mg	4	QL (102 tabs / 30 days)
VEMLIDY TABS 25mg	4	PA, QL (30 tabs / 30 days)

CEPHALOSPORINS

<i>cefaclor</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 250mg/5ml, 375mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>cefadroxil</i> CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml; TABS 1gm	1B	\$0 copay through Oscar Virtual Care
<i>cefazolin sodium</i> SOLR 1gm, 10gm, 20gm, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>cefdinir</i> CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>cefditoren pivoxil</i> TABS 200mg, 400mg	1B	\$0 copay through Oscar Virtual Care
<i>cefepime hcl</i> SOLR 1gm, 2gm	1B	\$0 copay through Oscar Virtual Care
<i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>cefotaxime sodium</i> SOLR 1gm, 2gm, 10gm, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>cefotetan disodium</i> SOLR 1gm, 2gm, 10gm	1B	\$0 copay through Oscar Virtual Care
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	1B	\$0 copay through Oscar Virtual Care
<i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	1B	\$0 copay through Oscar Virtual Care
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>ceftazidime</i> SOLR 2gm	1B	\$0 copay through Oscar Virtual Care
<i>ceftibuten</i> CAPS 400mg; SUSR 180mg/5ml	1B	\$0 copay through Oscar Virtual Care
CEFTIN SUSR 125mg/5ml, 250mg/5ml	2	
<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>cefuroxime axetil</i> TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>cefuroxime sodium</i> SOLR 1.5gm, 7.5gm, 750mg	1B	\$0 copay through Oscar Virtual Care
<i>cephalexin</i> CAPS 250mg, 500mg	1A	\$0 copay through Oscar Virtual Care
<i>cephalexin</i> CAPS 750mg; SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
SUPRAX CHEW 100mg, 200mg; SUSR 500mg/5ml	2	
<i>tazicef</i> SOLR 1gm, 2gm, 6gm	1B	\$0 copay through Oscar Virtual Care
ERYTHROMYCINS/MACROLIDES		
<i>azithromycin</i> PACK 1gm; SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>azithromycin</i> TABS 250mg, 500mg	1A	\$0 copay through Oscar Virtual Care
<i>azithromycin</i> TABS 600mg	2	
<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg; TB24 500mg	1B	\$0 copay through Oscar Virtual Care
DIFICID TABS 200mg	2	PA
<i>e.e.s. 400</i> TABS 400mg	1B	\$0 copay through Oscar Virtual Care
<i>ery-tab</i> TBEC 250mg, 333mg, 500mg	1B	\$0 copay through Oscar Virtual Care
ERYTHROCIN LACTOBIONATE SOLR 500mg	3	
<i>erythrocin stearate</i> TABS 250mg	1B	\$0 copay through Oscar Virtual Care
<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>erythromycin ethylsuccinate</i> SUSR 200mg/5ml, 400mg/5ml; TABS 400mg	1B	\$0 copay through Oscar Virtual Care
PCE TBEC 333mg, 500mg	3	
ZMAX SUSR 2gm	3	
FLUOROQUINOLONES		
CIPRO SUSR 500mg/5ml	3	

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin</i> SOLN 200mg/20ml, 400mg/40ml	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin</i> 200 mg/100ml in d5w	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin</i> 400 mg/200ml in d5w	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin hcl</i> TABS 100mg	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin hcl</i> TABS 250mg, 500mg, 750mg	1A	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr 500 mg (base eq)</i>	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr 1000 mg(base eq)</i>	1B	\$0 copay through Oscar Virtual Care
FACTIVE TABS 320mg	3	
<i>levofloxacin</i> SOLN 25mg/ml; TABS 250mg, 500mg, 750mg	1B	\$0 copay through Oscar Virtual Care
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>moxifloxacin hcl</i> TABS 400mg	1B	\$0 copay through Oscar Virtual Care
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	1B	\$0 copay through Oscar Virtual Care
<i>ofloxacin</i> TABS 300mg, 400mg	1B	\$0 copay through Oscar Virtual Care

HEPATITIS C

EPCLUSA TAB 400-100	4	PA, QL (28 tabs / 28 days)
HARVONI PAK	4	PA, QL (28 pellets / 28 days)
HARVONI PAK 45-200MG	4	PA, QL (28 pellets / 28 days)
HARVONI TAB 45-200MG	4	PA, QL (28 tabs / 28 days)
HARVONI TAB 90-400MG	4	PA, QL (28 tabs / 28 days)
PEGASYS SOLN 180mcg/0.5ml, 180mcg/ml	4	PA
PEGASYS PROCLICK SOLN 135mcg/0.5ml	4	PA
REBETOL SOLN 40mg/ml	4	PA
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	1B	PA; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
SOVALDI PACK 150mg, 200mg	5	ST, PA, QL (28 pellets / 28 days)
SOVALDI TABS 200mg, 400mg	5	ST, PA, QL (28 tabs / 28 days)
TECHNIVIE TAB	5	ST, PA, QL (56 tabs / 28 days)
VOSEVI TAB	4	PA, QL (28 tabs / 28 days)
ZEPATIER TAB 50-100MG	5	ST, PA, QL (28 tabs / 28 days)

PENICILLINS

<i>amoxicillin</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	1A	\$0 copay through Oscar Virtual Care
<i>amoxicillin</i> CHEW 125mg, 250mg	1B	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ampicillin</i> CAPS 500mg	1B	\$0 copay through Oscar Virtual Care
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>ampicillin sodium</i> SOLR 1gm, 2gm, 10gm, 125mg, 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
AUGMENTIN SUS 125/5ML	2	

Drug Name	Drug Tier	Requirements/Limits
<i>dicloxacillin sodium</i> CAPS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>nafcillin sodium</i> SOLR 1gm, 2gm, 10gm	1B	\$0 copay through Oscar Virtual Care
<i>oxacillin sodium</i> SOLR 1gm, 2gm, 10gm	1B	\$0 copay through Oscar Virtual Care
<i>penicillin g potassium</i> SOLR 5000000unit, 20000000unit	1B	\$0 copay through Oscar Virtual Care
<i>penicillin g sodium</i> SOLR 5000000unit	1B	\$0 copay through Oscar Virtual Care
<i>penicillin v potassium</i> SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>pfizerpen</i> SOLR 20mu	1B	\$0 copay through Oscar Virtual Care
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	1B	\$0 copay through Oscar Virtual Care
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	1B	\$0 copay through Oscar Virtual Care
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	1B	\$0 copay through Oscar Virtual Care
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	1B	\$0 copay through Oscar Virtual Care
TETRACYCLINES		
<i>avidoxy</i> TABS 100mg	1B	\$0 copay through Oscar Virtual Care
<i>demeclocycline hcl</i> TABS 150mg, 300mg	1B	\$0 copay through Oscar Virtual Care
<i>doxy 100</i> SOLR 100mg	1B	\$0 copay through Oscar Virtual Care
<i>doxycycline (monohydrate)</i> CAPS 50mg, 100mg	1A	\$0 copay through Oscar Virtual Care
<i>doxycycline (monohydrate)</i> CAPS 75mg, 150mg; SUSR 25mg/5ml; TABS 50mg, 75mg, 150mg	1B	\$0 copay through Oscar Virtual Care
<i>doxycycline hyclate</i> CAPS 50mg, 100mg	1A	\$0 copay through Oscar Virtual Care
<i>doxycycline hyclate</i> SOLR 100mg; TABS 20mg, 100mg; TBEC 75mg, 100mg, 150mg	1B	\$0 copay through Oscar Virtual Care
<i>minocycline hcl</i> CAPS 50mg, 75mg, 100mg	1A	\$0 copay through Oscar Virtual Care
<i>minocycline hcl</i> TABS 50mg, 75mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>morgidox 1x100mg</i> CAPS 100mg	1A	\$0 copay through Oscar Virtual Care
<i>tetracycline hcl</i> CAPS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
VIBRAMYCIN SYRP 50mg/5ml	3	
ANTINEOPLASTIC AGENTS		
ALKYLATING AGENTS		
<i>busulfan</i> SOLN 6mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>carmustine</i> SOLR 100mg	1B	\$0 copay through Oscar Virtual Care
<i>cyclophosphamide</i> CAPS 25mg, 50mg	1B	\$0 copay through Oscar Virtual Care
<i>cyclophosphamide</i> SOLR 1gm, 2gm, 500mg	4	
<i>dacarbazine</i> SOLR 100mg, 200mg	1B	\$0 copay through Oscar Virtual Care
EMCYT CAPS 140mg	4	
GLEOSTINE CAPS 5mg, 10mg, 40mg, 100mg	4	
GLIADEL WAF 7.7MG	2	
HEXALEN CAPS 50mg	2	
<i>ifosfamide</i> SOLN 1gm/20ml, 3gm/60ml; SOLR 1gm	1B	\$0 copay through Oscar Virtual Care
LEUKERAN TABS 2mg	2	
<i>melphalan</i> TABS 2mg	1B	\$0 copay through Oscar Virtual Care
<i>melphalan hcl</i> SOLR 50mg	1B	\$0 copay through Oscar Virtual Care
TEMODAR SOLR 100mg	4	PA
<i>temozolomide</i> CAPS 5mg, 20mg, 100mg, 140mg, 180mg, 250mg	4	PA
ANTHRACYCLINES		
<i>daunorubicin hcl</i> SOLN 20mg/4ml	1B	\$0 copay through Oscar Virtual Care
<i>doxorubicin hcl</i> SOLN 2mg/ml; SOLR 10mg, 50mg	1B	\$0 copay through Oscar Virtual Care
<i>doxorubicin hcl liposomal</i> INJ 2mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>epirubicin hcl</i> SOLN 50mg/25ml, 200mg/100ml	1B	\$0 copay through Oscar Virtual Care
<i>idarubicin hcl</i> SOLN 5mg/5ml, 10mg/10ml, 20mg/20ml	1B	\$0 copay through Oscar Virtual Care
ANTIBIOTICS		
<i>bleomycin sulfate</i> SOLR 15unit, 30unit	1B	\$0 copay through Oscar Virtual Care
<i>mitomycin</i> SOLR 5mg, 20mg, 40mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
ANTIMETABOLITES		
<i>adrucil</i> SOLN 500mg/10ml	1B	\$0 copay through Oscar Virtual Care
ALIMTA SOLR 100mg, 500mg	4	
ARRANON SOLN 5mg/ml	2	
<i>azacitidine</i> SUSR 100mg	4	PA
<i>capecitabine</i> TABS 150mg	4	PA, QL (120 tabs / 30 days)
<i>capecitabine</i> TABS 500mg	4	PA, QL (300 tabs / 30 days)
<i>cladribine</i> SOLN 10mg/10ml	1B	\$0 copay through Oscar Virtual Care
<i>clofarabine</i> SOLN 1mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>cytarabine</i> SOLN 20mg/ml, 100mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>decitabine</i> SOLR 50mg	4	PA
<i>floxuridine</i> SOLR .5gm	1B	\$0 copay through Oscar Virtual Care
<i>fludarabine phosphate</i> SOLN 50mg/2ml; SOLR 50mg	1B	\$0 copay through Oscar Virtual Care
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	1B	\$0 copay through Oscar Virtual Care
<i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	4	
<i>mercaptopurine</i> TABS 50mg	1B	\$0 copay through Oscar Virtual Care
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	1B	\$0 copay through Oscar Virtual Care
NIPENT SOLR 10mg	2	
TABLOID TABS 40mg	2	
ANTIMITOTIC, TAXOIDS		
ABRAXANE INJ 100MG	2	
DOCETAXEL CONC 20mg/0.5ml, 80mg/2ml	2	
<i>docetaxel</i> CONC 20mg/ml, 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	1B	\$0 copay through Oscar Virtual Care
DOCETAXEL (NON-ALCOHOL FO SOLN 20mg/ml, 80mg/4ml, 160mg/8ml	2	
<i>paclitaxel</i> CONC 30mg/5ml, 100mg/16.7ml, 150mg/25ml, 300mg/50ml	1B	\$0 copay through Oscar Virtual Care
ANTIMITOTIC, VINCA ALKALOIDS		
<i>vinblastine sulfate</i> SOLN 1mg/ml	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>vincasar pfs</i> SOLN 1mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>vincristine sulfate</i> SOLN 1mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml	1B	\$0 copay through Oscar Virtual Care

BIOLOGIC RESPONSE MODIFIERS

ERBITUX SOLN 100mg/50ml, 200mg/100ml	4	PA
ERIVEDGE CAPS 150mg	4	PA, QL (30 caps / 30 days)
FARYDAK CAPS 10mg, 15mg, 20mg	4	PA, QL (6 caps / 21 days)
GAZYVA SOLN 1000mg/40ml	4	PA
IBRANCE CAPS 75mg, 100mg, 125mg	4	PA, QL (21 caps / 28 days)
IBRANCE TABS 75mg, 100mg, 125mg	4	PA, QL (21 tabs / 28 days)
KADCYLA SOLR 100mg, 160mg	4	PA
KEYTRUDA SOLN 100mg/4ml	4	PA
KISQALI TBPK 200mg	4	PA, QL (21 tabs / 28 days); 200 mg dose
KISQALI TBPK 200mg	4	PA, QL (42 tabs / 28 days); 400 mg dose
KISQALI TBPK 200mg	4	PA, QL (63 tabs / 28 days)
LYNPARZA CAPS 50mg	4	PA, QL (480 caps / 30 days)
LYNPARZA TABS 100mg, 150mg	4	PA, QL (120 tabs / 30 days)
RYDAPT CAPS 25mg	5	PA, QL (224 caps / 28 days)
ZEJULA CAPS 100mg	4	PA, QL (90 caps / 30 days)
ZOLINZA CAPS 100mg	4	PA, QL (120 caps / 30 days)

HORMONAL ANTINEOPLASTIC AGENTS

<i>abiraterone acetate</i> TABS 250mg	4	PA, QL (120 tabs / 30 days)
<i>anastrozole</i> TABS 1mg	1B	\$0 copay for women ages 35 and older for the primary prevention of breast cancer; \$0*
<i>bicalutamide</i> TABS 50mg	1B	\$0 copay through Oscar Virtual Care
DEPO-PROVERA SUSP 400mg/ml	3	

Drug Name	Drug Tier	Requirements/Limits
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	4	PA
ERLEADA TABS 60mg	4	PA, QL (120 tabs / 30 days)
<i>exemestane</i> TABS 25mg	1B	PA; \$0 copay for women ages 35 and older for the primary prevention of breast cancer; \$0*
<i>flutamide</i> CAPS 125mg	1B	\$0 copay through Oscar Virtual Care
<i>fulvestrant</i> SOLN 250mg/5ml	4	
<i>letrozole</i> TABS 2.5mg	1B	\$0 copay through Oscar Virtual Care
<i>leuprolide acetate</i> KIT 1mg/0.2ml	4	PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg)	4	PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg)	4	PA
LYSODREN TABS 500mg	2	
<i>megestrol acetate</i> SUSP 40mg/ml; TABS 20mg, 40mg	1B	\$0 copay through Oscar Virtual Care
<i>megestrol acetate (appetite)</i> SUSP 625mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>nilutamide</i> TABS 150mg	1B	\$0 copay through Oscar Virtual Care
NUBEQA TABS 300mg	4	PA, QL (120 tabs / 30 days)
<i>tamoxifen citrate</i> TABS 10mg, 20mg	1B	\$0 copay for women ages 35 and older for the primary prevention of breast cancer; \$0*
<i>toremifene citrate</i> TABS 60mg	1B	\$0 copay through Oscar Virtual Care
XTANDI CAPS 40mg	4	PA, QL (120 caps / 30 days)
YONSA TABS 125mg	4	PA, QL (120 tabs / 30 days)
ZYTIGA TABS 500mg	4	PA, QL (60 tabs / 30 days)
KINASE INHIBITORS		
AFINITOR TABS 10mg	4	PA, QL (30 tabs / 30 days)
AFINITOR DISPERZ TBSO 2mg, 5mg	4	PA, QL (60 tabs / 30 days)
AFINITOR DISPERZ TBSO 3mg	4	PA, QL (90 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
ALECENSA CAPS 150mg	4	PA, QL (240 caps / 30 days)
BOSULIF TABS 100mg	4	PA, QL (90 tabs / 30 days)
BOSULIF TABS 400mg, 500mg	4	PA, QL (30 tabs / 30 days)
CALQUENCE CAPS 100mg	5	PA, QL (60 caps / 30 days)
CAPRELSA TABS 100mg	4	PA, QL (60 tabs / 30 days)
CAPRELSA TABS 300mg	4	PA, QL (30 tabs / 30 days)
COMETRIQ KIT 20mg	4	PA, QL (1 kit / 28 days)
COMETRIQ KIT 100MG	4	PA, QL (1 kit / 28 days)
COMETRIQ KIT 140MG	4	PA, QL (1 kit / 28 days)
<i>erlotinib hcl</i> TABS 25mg	4	PA, QL (60 tabs / 30 days)
<i>erlotinib hcl</i> TABS 100mg, 150mg	4	PA, QL (30 tabs / 30 days)
<i>everolimus</i> TABS 2.5mg, 5mg, 7.5mg	4	PA, QL (30 tabs / 30 days)
ICLUSIG TABS 15mg	4	PA, QL (60 tabs / 30 days)
ICLUSIG TABS 45mg	4	PA, QL (30 tabs / 30 days)
IDHIFA TABS 50mg, 100mg	4	PA, QL (30 tabs / 30 days)
<i>imatinib mesylate</i> TABS 100mg	4	PA, QL (90 tabs / 30 days)
<i>imatinib mesylate</i> TABS 400mg	4	PA, QL (60 tabs / 30 days)
IMBRUVICA CAPS 70mg	4	PA, QL (30 caps / 30 days)
IMBRUVICA CAPS 140mg	4	PA, QL (90 caps / 30 days)
IMBRUVICA TABS 140mg, 280mg, 420mg, 560mg	4	PA, QL (30 tabs / 30 days)
INLYTA TABS 1mg	4	PA, QL (240 tabs / 30 days)
INLYTA TABS 5mg	4	PA, QL (120 tabs / 30 days)
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	4	PA, QL (60 tabs / 30 days)
<i>lapatinib ditosylate</i> TABS 250mg	4	PA, QL (180 tabs / 30 days)
LENVIMA 4 MG DAILY DOSE CPPK 4mg	4	PA, QL (30 caps / 30 days)

Drug Name	Drug Tier	Requirements/Limits
LENVIMA 8 MG DAILY DOSE CPPK 4mg	4	PA, QL (60 caps / 30 days)
LENVIMA 10 MG DAILY DOSE CPPK 10mg	4	PA, QL (30 caps / 30 days)
LENVIMA 12MG DAILY DOSE CPPK 4mg	4	PA, QL (90 caps / 30 days)
LENVIMA 20 MG DAILY DOSE CPPK 10mg	4	PA, QL (60 caps / 30 days)
LENVIMA CAP 14 MG	4	PA, QL (60 caps / 30 days)
LENVIMA CAP 18 MG	4	PA, QL (90 caps / 30 days)
LENVIMA CAP 24 MG	4	PA, QL (90 caps / 30 days)
LORBRENA TABS 25mg	5	PA, QL (90 tabs / 30 days)
LORBRENA TABS 100mg	5	PA, QL (30 tabs / 30 days)
MEKINIST TABS 2mg	4	PA, QL (30 tabs / 30 days)
MEKINIST TABS .5mg	4	PA, QL (90 tabs / 30 days)
NEXAVAR TABS 200mg	4	PA, QL (120 tabs / 30 days)
SPRYCEL TABS 20mg	4	PA, QL (90 tabs / 30 days)
SPRYCEL TABS 50mg, 70mg, 80mg, 100mg, 140mg	4	PA, QL (30 tabs / 30 days)
STIVARGA TABS 40mg	4	PA, QL (84 tabs / 28 days)
SUTENT CAPS 12.5mg, 25mg, 37.5mg, 50mg	4	PA, QL (30 caps / 30 days)
TAFINLAR CAPS 50mg, 75mg	4	PA, QL (120 caps / 30 days)
TYKERB TABS 250mg	4	PA, QL (180 tabs / 30 days)
VITRAKVI CAPS 25mg	5	PA, QL (180 caps / 30 days)
VITRAKVI CAPS 100mg	5	PA, QL (60 caps / 30 days)
VITRAKVI SOLN 20mg/ml	5	PA, QL (300 mL / 30 days)
VOTRIENT TABS 200mg	4	PA, QL (120 tabs / 30 days)
XALKORI CAPS 200mg, 250mg	4	PA, QL (60 caps / 30 days)
ZELBORAF TABS 240mg	4	PA, QL (240 tabs / 30 days)

OTC - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met
QL - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ZYDELIG TABS 100mg, 150mg	4	PA, QL (60 tabs / 30 days)
ZYKADIA CAPS 150mg	4	PA, QL (90 caps / 30 days)
ZYKADIA TABS 150mg	4	PA, QL (90 tabs / 30 days)

MISCELLANEOUS

<i>arsenic trioxide</i> SOLN 10mg/10ml, 12mg/6ml	1B	\$0 copay through Oscar Virtual Care
<i>bexarotene</i> CAPS 75mg	4	PA
DROXIA CAPS 200mg, 300mg, 400mg	2	
<i>hydroxyurea</i> CAPS 500mg	1B	\$0 copay through Oscar Virtual Care
MATULANE CAPS 50mg	2	
<i>mitoxantrone hcl</i> CONC 2mg/ml	4	PA
ODOMZO CAPS 200mg	4	PA, QL (30 caps / 30 days)
ONCASPAR SOLN 750unit/ml	4	PA
PHOTOFRIN SOLR 75mg	2	
QUADRAMET SOLN 1850mbq/ml	2	
TICE BCG SUSR 50mg	2	
<i>tretinoin (chemotherapy)</i> CAPS 10mg	1B	\$0 copay through Oscar Virtual Care
UVADEX SOLN 20mcg/ml	2	
VISTOGARD PACK 10gm	2	QL (20 packets / 5 days)

PLATINUM-BASED AGENTS

<i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	1B	\$0 copay through Oscar Virtual Care
<i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml	1B	\$0 copay through Oscar Virtual Care
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml; SOLR 50mg, 100mg	4	

PROTECTIVE AGENTS

<i>dexrazoxane hcl</i> SOLR 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>leucovorin calcium</i> SOLR 50mg, 100mg, 200mg, 350mg, 500mg; TABS 5mg, 10mg, 15mg, 25mg	1B	\$0 copay through Oscar Virtual Care
<i>mesna</i> SOLN 100mg/ml	1B	\$0 copay through Oscar Virtual Care
MESNEX TABS 400mg	4	

TOPOISOMERASE INHIBITORS

<i>etoposide</i> CAPS 50mg; SOLN 100mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 500mg/25ml	4	

Drug Name	Drug Tier	Requirements/Limits
<i>irinotecan hcl</i> SOLN 300mg/15ml	1B	\$0 copay through Oscar Virtual Care
TENIPOSIDE SOLN 10mg/ml	2	
<i>toposar</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	1B	\$0 copay through Oscar Virtual Care
<i>topotecan hcl</i> SOLR 4mg	1B	\$0 copay through Oscar Virtual Care

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ALKYLATING AGENTS

<i>paraplatin</i> SOLN 1000mg/100ml	1B	\$0 copay through Oscar Virtual Care
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ANTINEOPLASTIC, BCL-2 INHIBITORS

VENCLEXTA TABS 10mg, 50mg	4	PA, QL (120 tabs / 30 days)
VENCLEXTA TABS 100mg	4	PA, QL (180 tabs / 30 days)
VENCLEXTA TAB START PK	4	PA

ANTIVIRALS

HEPATITIS AGENTS

EPCLUSA TAB 200-50MG	4	PA, QL (28 tabs / 28 days)
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CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>moexipril-hydrochlorothiazide tab 7.5-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>moexipril-hydrochlorothiazide tab 15-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>moexipril-hydrochlorothiazide tab 15-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	1B	\$0 copay through Oscar Virtual Care

ACE INHIBITORS

<i>benazepril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>captopril TABS 12.5mg, 25mg, 50mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>fosinopril sodium</i> TABS 10mg, 20mg, 40mg	1A	\$0 copay through Oscar Virtual Care
<i>lisinopril</i> TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	1A	\$0 copay through Oscar Virtual Care
<i>moexipril hcl</i> TABS 7.5mg, 15mg	1B	\$0 copay through Oscar Virtual Care
<i>perindopril erbumine</i> TABS 2mg, 4mg, 8mg	1B	\$0 copay through Oscar Virtual Care
<i>quinapril hcl</i> TABS 5mg, 10mg, 20mg, 40mg	1A	\$0 copay through Oscar Virtual Care
<i>ramipril</i> CAPS 1.25mg, 2.5mg, 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>trandolapril</i> TABS 1mg, 2mg, 4mg	1A	\$0 copay through Oscar Virtual Care

ALDOSTERONE RECEPTOR ANTAGONISTS

<i>eplerenone</i> TABS 25mg, 50mg	1B	\$0 copay through Oscar Virtual Care
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ALPHA BLOCKERS

<i>doxazosin mesylate</i> TABS 1mg, 2mg, 4mg, 8mg	1B	\$0 copay through Oscar Virtual Care
<i>prazosin hcl</i> CAPS 1mg, 2mg, 5mg	1B	\$0 copay through Oscar Virtual Care
<i>terazosin hcl</i> CAPS 1mg, 2mg, 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care

ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS

<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
BYVALSON TAB 5-80MG	3	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>telmisartan-amlodipine tab 40-5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>telmisartan-amlodipine tab 40-10 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>telmisartan-amlodipine tab 80-5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>telmisartan-amlodipine tab 80-10 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1B	\$0 copay through Oscar Virtual Care

ANGIOTENSIN II RECEPTOR ANTAGONISTS

<i>candesartan cilexetil TABS 4mg, 8mg, 16mg, 32mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>eprosartan mesylate TABS 600mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>irbesartan TABS 75mg, 150mg, 300mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>losartan potassium TABS 25mg, 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>olmesartan medoxomil TABS 5mg, 20mg, 40mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>telmisartan TABS 20mg, 40mg, 80mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valsartan TABS 40mg, 80mg, 160mg, 320mg</i>	1B	\$0 copay through Oscar Virtual Care

ANTIARRHYTHMICS

<i>amiodarone hcl SOLN 50mg/ml, 900mg/18ml; TABS 200mg, 400mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>disopyramide phosphate CAPS 100mg, 150mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>dofetilide CAPS 125mcg, 250mcg, 500mcg</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>flecainide acetate TABS 50mg, 100mg, 150mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>lidocaine hcl (cardiac) SOSY 50mg/5ml, 100mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>lidocaine iv infusion in d5w inj 4 mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>lidocaine iv infusion in d5w inj 8 mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>mexiletine hcl CAPS 150mg, 200mg, 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>MULTAQ TABS 400mg</i>	3	PA

Drug Name	Drug Tier	Requirements/Limits
NEXTERONE INJ	3	
NORPACE CR CP12 100mg, 150mg	2	
<i>pacerone</i> TABS 100mg, 200mg	1B	\$0 copay through Oscar Virtual Care
<i>procainamide hcl</i> SOLN 100mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>propafenone hcl</i> CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg	1B	\$0 copay through Oscar Virtual Care
<i>quinidine sulfate</i> TABS 200mg, 300mg	1B	\$0 copay through Oscar Virtual Care
<i>sorine</i> TABS 80mg, 120mg, 160mg, 240mg	1B	\$0 copay through Oscar Virtual Care
<i>sotalol hcl</i> TABS 80mg, 120mg, 160mg, 240mg	1B	\$0 copay through Oscar Virtual Care
<i>sotalol hcl (afib/afl)</i> TABS 80mg, 120mg, 160mg	1B	\$0 copay through Oscar Virtual Care
SOTALOL HYDROCHLORIDE SOLN 150mg/10ml	3	
ANTILIPEMICS, BILE ACID RESINS		
<i>cholestyramine</i> PACK 4gm; POWD 4gm/dose	1B	\$0 copay through Oscar Virtual Care
<i>cholestyramine light</i> PACK 4gm; POWD 4gm/dose	1B	\$0 copay through Oscar Virtual Care
<i>colestipol hcl</i> GRAN 5gm; PACK 5gm; TABS 1gm	1B	\$0 copay through Oscar Virtual Care
<i>prevalite</i> POWD 4gm/dose	1B	\$0 copay through Oscar Virtual Care
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITOR		
<i>ezetimibe</i> TABS 10mg	1B	PA; \$0 copay through Oscar Virtual Care
ANTILIPEMICS, FIBRATES		
<i>choline fenofibrate</i> CPDR 45mg, 135mg	1B	\$0 copay through Oscar Virtual Care
<i>fenofibrate</i> CAPS 50mg, 150mg; TABS 48mg, 54mg	1B	\$0 copay through Oscar Virtual Care
<i>fenofibrate</i> TABS 145mg	2	
<i>fenofibrate</i> TABS 160mg	1A	\$0 copay through Oscar Virtual Care
<i>fenofibrate micronized</i> CAPS 43mg, 67mg, 130mg, 134mg, 200mg	1B	\$0 copay through Oscar Virtual Care
<i>gemfibrozil</i> TABS 600mg	1A	\$0 copay through Oscar Virtual Care
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS/COMBINATIONS		
<i>ezetimibe-simvastatin tab 10-10 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>ezetimibe-simvastatin tab 10-40 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	2	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
<i>atorvastatin calcium TABS 10mg, 20mg</i>	1A	\$0 copay for members age 40 through 75; \$0*
<i>atorvastatin calcium TABS 40mg, 80mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>fluvastatin sodium CAPS 20mg, 40mg; TB24 80mg</i>	2	\$0 copay for members age 40 through 75
<i>lovastatin TABS 10mg, 20mg, 40mg</i>	1A	\$0 copay for members age 40 through 75; \$0*
<i>pravastatin sodium TABS 10mg, 20mg, 40mg, 80mg</i>	1B	\$0 copay for members age 40 through 75; \$0*
<i>rosuvastatin calcium TABS 5mg, 10mg</i>	1B	PA; \$0 copay for members age 40 through 75; \$0*
<i>rosuvastatin calcium TABS 20mg, 40mg</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>simvastatin TABS 5mg, 10mg, 20mg, 40mg</i>	1A	\$0 copay for members age 40 through 75; \$0*
<i>simvastatin TABS 80mg</i>	1A	\$0 copay through Oscar Virtual Care
ANTILIPEMICS, MISCELLANEOUS		
<i>niacin (antihyperlipidemic) TBCR 500mg, 750mg, 1000mg</i>	1B	\$0 copay through Oscar Virtual Care
ANTILIPEMICS, OMEGA-3 FATTY ACIDS		
<i>icosapent ethyl CAPS 1gm</i>	2	PA
<i>omega-3-acid ethyl esters cap 1 gm</i>	1B	PA; \$0 copay through Oscar Virtual Care
VASCEPA CAPS .5gm, 1gm	2	PA
ANTILIPEMICS, PCSK9 INHIBITORS		
PRALUENT SOAJ 75mg/ml, 150mg/ml	4	PA, QL (2 pens / 28 days)
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>nadolol & bendroflumethiazide tab 40-5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>propranolol & hydrochlorothiazide tab 40-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>propranolol & hydrochlorothiazide tab 80-25 mg</i>	1B	\$0 copay through Oscar Virtual Care

BETA-BLOCKERS

<i>acebutolol hcl CAPS 200mg, 400mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>atenolol TABS 25mg, 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>betaxolol hcl TABS 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>bisoprolol fumarate TABS 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
BYSTOLIC TABS 2.5mg, 5mg, 10mg, 20mg	3	
<i>carvedilol TABS 3.125mg, 6.25mg, 12.5mg, 25mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carvedilol phosphate CP24 10mg, 20mg, 40mg, 80mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>labetalol hcl SOLN 5mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>labetalol hcl TABS 100mg, 200mg, 300mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>metoprolol succinate TB24 25mg, 50mg, 100mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>metoprolol tartrate SOCT 5mg/5ml; SOLN 5mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>metoprolol tartrate TABS 25mg, 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>nadolol TABS 20mg, 40mg, 80mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>pindolol TABS 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>propranolol hcl CP24 60mg, 80mg, 120mg, 160mg; SOLN 1mg/ml, 20mg/5ml, 40mg/5ml; TABS 60mg, 80mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>propranolol hcl TABS 10mg, 20mg, 40mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>timolol maleate TABS 5mg, 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
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CALCIUM CHANNEL BLOCKER/ANTILIPEMIC COMBINATIONS

<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1B	\$0 copay through Oscar Virtual Care

CALCIUM CHANNEL BLOCKERS

<i>afeditab cr TB24 30mg, 60mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amlodipine besylate TABS 2.5mg, 5mg, 10mg</i>	1A	\$0 copay through Oscar Virtual Care
CARDENE IV SOL 20/200ML	3	
<i>cartia xt CP24 120mg, 180mg, 240mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>diltiazem hcl CP12 60mg, 90mg, 120mg; CP24 120mg, 180mg, 240mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml</i>	1B	\$0 copay through Oscar Virtual Care
DILTIAZEM HCL SOLR 100mg	3	
<i>diltiazem hcl TABS 30mg, 60mg, 90mg, 120mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>diltiazem hcl coated beads CP24 120mg, 180mg, 240mg, 300mg, 360mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>diltiazem hcl extended release beads CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>felodipine TB24 2.5mg, 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>isradipine CAPS 2.5mg, 5mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>matzim la</i> TB24 180mg, 240mg, 300mg, 360mg, 420mg	1B	\$0 copay through Oscar Virtual Care
<i>nicardipine hcl</i> CAPS 20mg, 30mg; SOLN 2.5mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	1B	\$0 copay through Oscar Virtual Care
<i>nimodipine</i> CAPS 30mg	1B	\$0 copay through Oscar Virtual Care
<i>nisoldipine</i> TB24 8.5mg, 17mg, 20mg, 25.5mg, 30mg, 34mg, 40mg	1B	\$0 copay through Oscar Virtual Care
<i>taztia xt</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg	1B	\$0 copay through Oscar Virtual Care
<i>verapamil hcl</i> CP24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; SOLN 2.5mg/ml; TBCR 120mg, 180mg, 240mg	1B	\$0 copay through Oscar Virtual Care
<i>verapamil hcl</i> TABS 40mg, 80mg, 120mg	1A	\$0 copay through Oscar Virtual Care
<i>DIGITALIS GLYCOSIDES</i>		
<i>digox</i> TABS 125mcg, 250mcg	1B	\$0 copay through Oscar Virtual Care
<i>digoxin</i> SOLN .05mg/ml, .25mg/ml; TABS 125mcg, 250mcg	1B	\$0 copay through Oscar Virtual Care
LANOXIN TABS 62.5mcg, 187.5mcg	2	
LANOXIN PEDIATRIC SOLN .1mg/ml	3	
<i>DIRECT RENIN INHIBITORS/COMBINATIONS</i>		
<i>aliskiren fumarate</i> TABS 150mg, 300mg	1B	\$0 copay through Oscar Virtual Care
<i>DIURETICS</i>		
<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	1B	\$0 copay through Oscar Virtual Care
<i>acetazolamide sodium</i> SOLR 500mg	1B	\$0 copay through Oscar Virtual Care
ALDACTAZIDE TAB 50/50	2	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>amiloride hcl</i> TABS 5mg	1B	\$0 copay through Oscar Virtual Care
<i>bumetanide</i> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care
<i>chlorothiazide</i> TABS 250mg	1B	\$0 copay through Oscar Virtual Care
<i>chlorothiazide</i> TABS 500mg	1A	\$0 copay through Oscar Virtual Care
<i>chlorothiazide sodium</i> SOLR 500mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>chlorthalidone</i> TABS 25mg, 50mg	1A	\$0 copay through Oscar Virtual Care
DIURIL SUSP 250mg/5ml	3	
<i>ethacrynate sodium</i> SOLR 50mg	1B	\$0 copay through Oscar Virtual Care
<i>ethacrynic acid</i> TABS 25mg	1B	\$0 copay through Oscar Virtual Care
<i>furosemide</i> SOLN 8mg/ml, 10mg/ml; TABS 80mg	1B	\$0 copay through Oscar Virtual Care
<i>furosemide</i> TABS 20mg, 40mg	1A	\$0 copay through Oscar Virtual Care
<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1A	\$0 copay through Oscar Virtual Care
<i>indapamide</i> TABS 1.25mg, 2.5mg	1B	\$0 copay through Oscar Virtual Care
<i>mannitol</i> SOLN 20%, 25%	1B	\$0 copay through Oscar Virtual Care
<i>methazolamide</i> TABS 25mg, 50mg	1B	\$0 copay through Oscar Virtual Care
<i>methyclothiazide</i> TABS 5mg	1B	\$0 copay through Oscar Virtual Care
<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>osmitrol viaflex</i> SOLN 5%, 10%, 15%	1B	\$0 copay through Oscar Virtual Care
<i>spironolactone</i> TABS 25mg, 50mg, 100mg	1A	\$0 copay through Oscar Virtual Care
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>torseamide</i> TABS 5mg, 10mg, 20mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>triamterene</i> CAPS 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>triamterene & hydrochlorothiazide tab 75- 50 mg</i>	1B	\$0 copay through Oscar Virtual Care
MISCELLANEOUS		
<i>clonidine</i> PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr	1B	\$0 copay through Oscar Virtual Care
<i>clonidine hcl</i> TABS .1mg, .2mg	1A	\$0 copay through Oscar Virtual Care
<i>clonidine hcl</i> TABS .3mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
CORLANOR SOLN 5mg/5ml; TABS 5mg, 7.5mg	2	
ENTRESTO TAB 24-26MG	2	
ENTRESTO TAB 49-51MG	2	
ENTRESTO TAB 97-103MG	2	
<i>guanfacine hcl</i> TABS 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care
<i>hydralazine hcl</i> SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>methyldopa</i> TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>methyldopate hcl</i> SOLN 250mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>midodrine hcl</i> TABS 2.5mg, 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>minoxidil</i> TABS 2.5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>phenoxybenzamine hcl</i> CAPS 10mg	3	PA
<i>ranolazine</i> TB12 500mg, 1000mg	1B	ST; PA**; \$0*

NITRATES

DILATRATE SR CPR 40mg	3	
<i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg, 40mg; TBCR 40mg	1B	\$0 copay through Oscar Virtual Care
<i>isosorbide mononitrate</i> TABS 10mg, 20mg; TB24 120mg	1B	\$0 copay through Oscar Virtual Care
<i>isosorbide mononitrate</i> TB24 30mg, 60mg	1A	\$0 copay through Oscar Virtual Care
<i>minitran</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	1B	\$0 copay through Oscar Virtual Care
NITRO-BID OINT 2%	3	
NITRO-DUR PT24 .3mg/hr, .8mg/hr	2	
<i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr; SOLN .4mg/spray; SUBL .3mg, .6mg	1B	\$0 copay through Oscar Virtual Care
NITROGLYCERIN SOLN 5mg/ml	3	
<i>nitroglycerin</i> SUBL .4mg	1A	\$0 copay through Oscar Virtual Care
<i>nitroglycerin iv soln 100 mcg/ml in d5w</i>	1B	\$0 copay through Oscar Virtual Care
<i>nitroglycerin iv soln 200 mcg/ml in d5w</i>	1B	\$0 copay through Oscar Virtual Care
<i>nitroglycerin iv soln 400 mcg/ml in d5w</i>	1B	\$0 copay through Oscar Virtual Care

PULMONARY ARTERIAL HYPERTENSION

ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg	5	PA, QL (90 tabs / 30 days)
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Drug Name	Drug Tier	Requirements/Limits
<i>ambrisentan</i> TABS 5mg, 10mg	4	PA, QL (30 tabs / 30 days)
<i>bosentan</i> TABS 62.5mg, 125mg	4	PA, QL (60 tabs / 30 days)
<i>epoprostenol sodium</i> SOLR .5mg, 1.5mg	4	PA
OPSUMIT TABS 10mg	4	PA, QL (30 tabs / 30 days)
ORENITRAM TBCR .125mg, .25mg, 1mg, 2.5mg, 5mg	4	PA
REMODULIN SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	5	PA
<i>sildenafil citrate (pulmonary hypertension)</i> SOLN 10mg/12.5ml	4	PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg	4	PA, QL (90 tabs / 30 days)
<i>tadalafil (pulmonary hypertension)</i> TABS 20mg	5	PA, QL (60 tabs / 30 days)
TYVASO STARTER SOLN .6mg/ml	4	PA, QL (28 ampules / 28 days)
UPTRAVI TABS 200mcg	4	PA, QL (140 tabs / 28 days)
UPTRAVI TABS 400mcg, 600mcg, 800mcg, 1000mcg, 1200mcg, 1400mcg, 1600mcg	4	PA, QL (60 tabs / 30 days)
UPTRAVI TAB 200/800	4	PA
VENTAVIS SOLN 10mcg/ml, 20mcg/ml	4	PA, QL (270 ampules / 30 days)

CENTRAL NERVOUS SYSTEM

ANTI-ANXIETY

<i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg; TBCD .25mg, .5mg, 1mg, 2mg	1B	QL (150 tabs / 25 days); \$0 copay through Oscar Virtual Care
ALPRAZOLAM INTENSOL CONC 1mg/ml	2	QL (300 mL / 25 days)
<i>lorazepam</i> CONC 2mg/ml	1B	QL (150 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>lorazepam</i> TABS .5mg, 1mg, 2mg	1B	QL (150 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>meprobamate</i> TABS 200mg, 400mg	1B	\$0 copay through Oscar Virtual Care
<i>oxazepam</i> CAPS 10mg, 15mg, 30mg	1B	QL (120 caps / 25 days); \$0 copay through Oscar Virtual Care

ANTICONVULSANTS

APTIOM TABS 200mg, 400mg, 600mg, 800mg	3	PA
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Drug Name	Drug Tier	Requirements/Limits
BRIVIACT SOLN 10mg/ml, 50mg/5ml; TABS 10mg, 25mg, 50mg, 75mg, 100mg	3	PA
<i>carbamazepine</i> CHEW 100mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TABS 200mg; TB12 100mg, 200mg, 400mg	1B	\$0 copay through Oscar Virtual Care
CELONTIN CAPS 300mg	3	
<i>clobazam</i> SUSP 2.5mg/ml; TABS 10mg, 20mg	2	PA
<i>clonazepam</i> TABS .5mg, 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg	2	QL (180 tabs / 25 days)
<i>diazepam</i> SOLN 5mg/5ml	1B	QL (1200 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>diazepam</i> SOLN 5mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>diazepam</i> TABS 2mg, 5mg, 10mg	1B	QL (120 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>diazepam intensol</i> CONC 5mg/ml	1B	QL (240 mL / 25 days); \$0 copay through Oscar Virtual Care
DILANTIN CAPS 30mg	3	
<i>divalproex sodium</i> CSDR 125mg; TB24 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>divalproex sodium</i> TBEC 125mg, 250mg, 500mg	1A	\$0 copay through Oscar Virtual Care
EPIDIOLEX SOLN 100mg/ml	4	PA, QL (800 mL / 30 days)
<i>epitol</i> TABS 200mg	1B	\$0 copay through Oscar Virtual Care
<i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>felbamate</i> SUSP 600mg/5ml; TABS 400mg, 600mg	1B	\$0 copay through Oscar Virtual Care
<i>fosphenytoin sodium</i> SOLN 100mgpe/2ml, 500mgpe/10ml	1B	\$0 copay through Oscar Virtual Care
FYCOMPA SUSP .5mg/ml; TABS 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	2	
<i>gabapentin</i> CAPS 100mg, 300mg, 400mg; SOLN 250mg/5ml; TABS 600mg, 800mg	1A	\$0 copay through Oscar Virtual Care
<i>lamotrigine</i> CHEW 5mg, 25mg; KIT 25mg	1B	\$0 copay through Oscar Virtual Care
<i>lamotrigine</i> TABS 25mg, 100mg, 150mg, 200mg	1A	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine</i> TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	1B	PA; \$0 copay through Oscar Virtual Care
<i>lamotrigine</i> TBDP 25mg, 50mg, 100mg, 200mg	2	PA
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	1B	\$0 copay through Oscar Virtual Care
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	1B	\$0 copay through Oscar Virtual Care
<i>levetiracetam</i> SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg; TB24 500mg, 750mg	1B	\$0 copay through Oscar Virtual Care
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>oxcarbazepine</i> SUSP 60mg/ml; TABS 150mg, 300mg, 600mg	1B	\$0 copay through Oscar Virtual Care
PEGANONE TABS 250mg	3	
<i>phenobarbital</i> ELIX 20mg/5ml; TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>phenytoin sodium</i> SOLN 50mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg	1B	\$0 copay through Oscar Virtual Care
<i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg, 200mg, 225mg, 300mg; SOLN 20mg/ml	1B	PA; \$0 copay through Oscar Virtual Care
<i>primidone</i> TABS 50mg, 250mg	1B	\$0 copay through Oscar Virtual Care
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	1B	\$0 copay through Oscar Virtual Care
<i>topiramate</i> CPSP 15mg, 25mg; TABS 25mg, 50mg, 100mg, 200mg	1B	\$0 copay through Oscar Virtual Care
<i>valproate sodium</i> SOLN 100mg/ml, 250mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>valproic acid</i> CAPS 250mg	1B	\$0 copay through Oscar Virtual Care
<i>vigabatrin</i> PACK 500mg	4	PA, QL (180 packets / 30 days)
<i>vigabatrin</i> TABS 500mg	4	PA, QL (180 tabs / 30 days)
VIMPAT SOLN 10mg/ml, 200mg/20ml; TABS 50mg, 100mg, 150mg, 200mg	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>zonisamide</i> CAPS 25mg, 50mg, 100mg	1A	\$0 copay through Oscar Virtual Care

ANTIDEMENTIA

<i>donepezil hydrochloride</i> TABS 5mg, 10mg, 23mg; TBDP 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>ergoloid mesylates</i> TABS 1mg	1B	\$0 copay through Oscar Virtual Care
<i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg; SOLN 4mg/ml; TABS 4mg, 8mg, 12mg	1B	\$0 copay through Oscar Virtual Care
<i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg	1B	PA; PA applies for members less than 30 years of age; \$0*
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	1B	PA; PA applies for members less than 30 years of age; \$0*
NAMENDA XR CAP TITRATIO	2	PA; PA applies for members less than 30 years of age
<i>rivastigmine</i> PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	1B	PA; \$0 copay through Oscar Virtual Care
<i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg, 4.5mg, 6mg	1B	PA; \$0 copay through Oscar Virtual Care

ANTIDEPRESSANTS

<i>amitriptyline hcl</i> TABS 10mg	1A	QL (150 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>amitriptyline hcl</i> TABS 25mg	1A	QL (60 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>amitriptyline hcl</i> TABS 50mg	1A	QL (30 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>amitriptyline hcl</i> TABS 75mg, 100mg, 150mg	1B	PA; Members 70 and older subject to PA; \$0*
<i>amoxapine</i> TABS 25mg, 50mg, 100mg	1B	QL (90 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>amoxapine</i> TABS 150mg	1B	QL (60 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>bupropion hcl</i> TABS 75mg, 100mg; TB12 100mg, 150mg, 200mg	1A	\$0 copay through Oscar Virtual Care
<i>bupropion hcl</i> TB24 150mg, 300mg	1B	\$0 copay through Oscar Virtual Care
<i>citalopram hydrobromide</i> SOLN 10mg/5ml	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>citalopram hydrobromide</i> TABS 10mg, 20mg, 40mg	1A	\$0 copay through Oscar Virtual Care
<i>desipramine hcl</i> TABS 10mg, 25mg, 50mg	1B	QL (90 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>desipramine hcl</i> TABS 75mg	1B	QL (60 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>desipramine hcl</i> TABS 100mg, 150mg	1B	QL (30 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>desvenlafaxine succinate</i> TB24 25mg, 50mg, 100mg	1B	PA, QL (30 tabs / 25 days); (generic of Pristiq); \$0*
<i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg	1B	QL (90 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>doxepin hcl</i> CAPS 75mg	1B	QL (60 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>doxepin hcl</i> CAPS 100mg, 150mg	1B	QL (30 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>doxepin hcl</i> CONC 10mg/ml	1B	QL (450 mL / 25 days); QL applies to members age 65 and older; \$0*
<i>duloxetine hcl</i> CPEP 20mg, 30mg, 60mg	1B	\$0 copay through Oscar Virtual Care
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	3	PA
<i>escitalopram oxalate</i> SOLN 5mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>escitalopram oxalate</i> TABS 5mg, 10mg, 20mg	1A	\$0 copay through Oscar Virtual Care
FETZIMA CP24 20mg, 40mg, 80mg, 120mg	3	PA, QL (30 caps / 25 days)
FETZIMA CAP TITRATIO	3	PA, QL (30 caps / 25 days)
<i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg	1A	\$0 copay through Oscar Virtual Care
<i>fluoxetine hcl</i> CPDR 90mg; SOLN 20mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>fluoxetine hcl</i> TABS 10mg, 20mg	1B	(generic Sarafem not covered); \$0*
<i>imipramine hcl</i> TABS 10mg, 25mg	1B	QL (120 tabs / 25 days); QL applies to members age 65 and older; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>imipramine hcl</i> TABS 50mg	1B	QL (60 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>imipramine pamoate</i> CAPS 75mg, 100mg	1B	QL (30 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>imipramine pamoate</i> CAPS 125mg, 150mg	1B	PA; Members 70 and older subject to PA; \$0*
<i>maprotiline hcl</i> TABS 25mg, 50mg, 75mg	1B	\$0 copay through Oscar Virtual Care
MARPLAN TABS 10mg	3	
<i>mirtazapine</i> TABS 7.5mg, 30mg, 45mg; TBDP 15mg, 30mg, 45mg	1B	\$0 copay through Oscar Virtual Care
<i>mirtazapine</i> TABS 15mg	1A	\$0 copay through Oscar Virtual Care
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	1B	\$0 copay through Oscar Virtual Care
<i>nortriptyline hcl</i> CAPS 10mg	1B	QL (150 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>nortriptyline hcl</i> CAPS 25mg	1B	QL (60 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>nortriptyline hcl</i> CAPS 50mg	1B	QL (30 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>nortriptyline hcl</i> CAPS 75mg	1B	PA; High strength requires PA for members age 65 and older
<i>nortriptyline hcl</i> SOLN 10mg/5ml	1B	QL (750 mL / 25 days); QL applies to members age 65 and older; \$0*
<i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg, 40mg	1A	\$0 copay through Oscar Virtual Care
<i>paroxetine hcl</i> TB24 12.5mg, 25mg, 37.5mg	1B	\$0 copay through Oscar Virtual Care
<i>phenelzine sulfate</i> TABS 15mg	1B	\$0 copay through Oscar Virtual Care
<i>protriptyline hcl</i> TABS 5mg	1B	QL (90 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>protriptyline hcl</i> TABS 10mg	1B	QL (60 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>sertraline hcl</i> CONC 20mg/ml	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>sertraline hcl</i> TABS 25mg, 50mg, 100mg	1A	\$0 copay through Oscar Virtual Care
<i>tranylcypromine sulfate</i> TABS 10mg	1B	\$0 copay through Oscar Virtual Care
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg	1A	\$0 copay through Oscar Virtual Care
<i>trazodone hcl</i> TABS 300mg	1B	\$0 copay through Oscar Virtual Care
<i>trimipramine maleate</i> CAPS 25mg, 50mg	1B	QL (60 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>trimipramine maleate</i> CAPS 100mg	1B	QL (30 caps / 25 days); QL applies to members age 65 and older; \$0*
<i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg; TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	1A	\$0 copay through Oscar Virtual Care
<i>venlafaxine hcl</i> TB24 37.5mg, 75mg, 150mg	1B	\$0 copay through Oscar Virtual Care
VIIBRYD TABS 10mg, 20mg, 40mg	3	PA
VIIBRYD KIT STARTER	3	PA

ANTIPARKINSONIAN AGENTS

<i>amantadine hcl</i> CAPS 100mg; SYRP 50mg/5ml; TABS 100mg	1B	\$0 copay through Oscar Virtual Care
APOKYN SOCT 30mg/3ml	4	PA
<i>benztropine mesylate</i> SOLN 1mg/ml; TABS .5mg, 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care
<i>bromocriptine mesylate</i> CAPS 5mg; TABS 2.5mg	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa</i> TABS 25mg	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa & levodopa tab 10-100 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa & levodopa tab 25-100 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa & levodopa tab 25-250 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa & levodopa tab er 25-100 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa & levodopa tab er 50-200 mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>entacapone TABS 200mg</i>	1B	\$0 copay through Oscar Virtual Care
NEUPRO PT24 1mg/24hr, 2mg/24hr, 3mg/24hr, 4mg/24hr, 6mg/24hr, 8mg/24hr	2	
<i>pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg; TB24 .375mg, .75mg, 1.5mg, 2.25mg, 3mg, 3.75mg, 4.5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>rasagiline mesylate TABS 1mg</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>rasagiline mesylate TABS .5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ropinirole hydrochloride TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>selegiline hcl CAPS 5mg; TABS 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tolcapone TABS 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>trihexyphenidyl hcl SOLN .4mg/ml; TABS 2mg, 5mg</i>	1B	\$0 copay through Oscar Virtual Care
ANTIPSYCHOTICS		
<i>aripiprazole SOLN 1mg/ml; TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg; TBDP 10mg, 15mg</i>	1B	\$0 copay through Oscar Virtual Care
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml, 1064mg/3.9ml	2	
ARISTADA INITIO PRSY 675mg/2.4ml	2	
CHLORPROMAZINE HCL SOLN 25mg/ml, 50mg/2ml	1B	\$0 copay through Oscar Virtual Care
<i>chlorpromazine hcl TABS 10mg, 25mg, 50mg, 100mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>clozapine</i> TABS 25mg, 50mg, 100mg, 200mg; TBP 12.5mg, 25mg, 100mg, 150mg, 200mg	1B	\$0 copay through Oscar Virtual Care
<i>fluphenazine decanoate</i> SOLN 25mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	1B	\$0 copay through Oscar Virtual Care
<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml	1B	\$0 copay through Oscar Virtual Care
LATUDA TABS 20mg, 40mg, 60mg, 80mg, 120mg	2	ST; PA**
<i>loxapine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	1B	\$0 copay through Oscar Virtual Care
NUPLAZID TABS 17mg	4	PA
<i>olanzapine</i> SOLR 10mg; TABS 2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg; TBP 5mg, 10mg, 15mg, 20mg	1B	\$0 copay through Oscar Virtual Care
<i>paliperidone</i> TB24 1.5mg, 3mg, 6mg, 9mg	1B	\$0 copay through Oscar Virtual Care
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	1B	\$0 copay through Oscar Virtual Care
<i>quetiapine fumarate</i> TABS 25mg, 50mg, 100mg	1A	\$0 copay through Oscar Virtual Care
<i>quetiapine fumarate</i> TABS 200mg, 300mg, 400mg; TB24 50mg, 150mg, 200mg, 300mg, 400mg	1B	\$0 copay through Oscar Virtual Care
REXULTI TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	3	PA
<i>risperidone</i> SOLN 1mg/ml; TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg; TBP .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	1B	\$0 copay through Oscar Virtual Care
SAPHRIS SUBL 2.5mg, 5mg, 10mg	3	PA
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg	1B	\$0 copay through Oscar Virtual Care
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
<i>amphetamine sulfate</i> TABS 10mg	3	

Drug Name	Drug Tier	Requirements/Limits
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1B	QL (90 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1B	QL (90 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1B	QL (30 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1B	QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1B	QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1B	QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1B	QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1B	QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1B	QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1B	QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1B	QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1B	QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1B	QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>atomoxetine hcl CAPS 10mg, 18mg, 25mg, 40mg, 60mg, 80mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>dexmethylphenidate hcl CP24 5mg, 10mg, 15mg, 20mg</i>	2	QL (60 caps / 25 days)
<i>dexmethylphenidate hcl CP24 25mg, 30mg, 35mg, 40mg</i>	2	QL (30 caps / 25 days)
<i>dexmethylphenidate hcl TABS 2.5mg, 5mg</i>	1B	QL (120 tabs / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>dexmethylphenidate hcl</i> TABS 10mg	1B	QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>dextroamphetamine sulfate</i> CP24 5mg, 10mg, 15mg	1B	QL (120 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>dextroamphetamine sulfate</i> SOLN 5mg/5ml	1B	QL (2,160 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>dextroamphetamine sulfate</i> TABS 5mg, 10mg	1B	QL (120 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>guanfacine hcl (adhd)</i> TB24 1mg, 2mg, 3mg, 4mg	1B	ST; PA**; \$0*
<i>methamphetamine hcl</i> TABS 5mg	1B	QL (150 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl</i> CHEW 2.5mg, 5mg, 10mg	3	QL (180 chew tabs / 25 days)
<i>methylphenidate hcl</i> CP24 20mg, 30mg	1B	QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl</i> CP24 40mg, 60mg	1B	QL (30 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl</i> CPCR 10mg, 20mg, 30mg	2	QL (60 caps / 25 days)
<i>methylphenidate hcl</i> CPCR 40mg, 50mg, 60mg	2	QL (30 caps / 25 days)
<i>methylphenidate hcl</i> SOLN 5mg/5ml	3	QL (2,160 mL / 25 days)
<i>methylphenidate hcl</i> SOLN 10mg/5ml	3	QL (1080 mL / 25 days)
<i>methylphenidate hcl</i> TABS 5mg, 10mg	1B	QL (180 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl</i> TABS 20mg	1B	QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl</i> TB24 18mg, 27mg, 36mg; TBCR 18mg, 27mg, 36mg	3	QL (60 tabs / 25 days)
<i>methylphenidate hcl</i> TB24 54mg; TBCR 54mg	3	QL (30 tabs / 25 days)
<i>methylphenidate hcl</i> TBCR 10mg, 20mg	2	QL (90 tabs / 25 days)
<i>zenzedi</i> TABS 2.5mg, 7.5mg	1B	QL (120 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>zenzedi</i> TABS 15mg	1B	QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>zenzedi</i> TABS 20mg, 30mg	1B	QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care

HYPNOTICS

<i>BELSOMRA</i> TABS 5mg, 10mg, 15mg, 20mg	2	PA
<i>cvs sleep-aid nighttime</i> TABS 25mg	1B	OTC; \$0 copay through Oscar Virtual Care
<i>doxepin hcl (sleep)</i> TABS 3mg, 6mg	1B	QL (30 tabs / 25 days); QL applies to members age 65 and older; \$0*
<i>eszopiclone</i> TABS 1mg, 2mg, 3mg	1B	QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>HETLIOZ</i> CAPS 20mg	5	PA, QL (30 caps / 30 days)
<i>ramelteon</i> TABS 8mg	1B	QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>temazepam</i> CAPS 7.5mg, 15mg, 22.5mg, 30mg	1B	QL (15 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>zaleplon</i> CAPS 5mg	1B	QL (30 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>zaleplon</i> CAPS 10mg	1B	QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>zolpidem tartrate</i> TABS 5mg, 10mg; TBCR 6.25mg, 12.5mg	1B	QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care

MIGRAINE

<i>AIMOVIG</i> SOAJ 70mg/ml	2	PA, QL (2 injections / 25 days)
<i>AIMOVIG</i> SOAJ 140mg/ml	2	PA, QL (1 injection / 25 days)
<i>AJOVY</i> SOAJ 225mg/1.5ml; <i>SOSY</i> 225mg/1.5ml	1B	PA, QL (3 injections / 75 days)
<i>almotriptan malate</i> TABS 6.25mg	2	QL (18 tabs / 25 days)
<i>almotriptan malate</i> TABS 12.5mg	2	QL (12 tabs / 25 days)
<i>eletriptan hydrobromide</i> TABS 20mg	2	QL (18 tabs / 25 days)
<i>eletriptan hydrobromide</i> TABS 40mg	2	QL (12 tabs / 25 days)
<i>EMGALITY</i> SOAJ 120mg/ml; <i>SOSY</i> 120mg/ml	2	PA, QL (2 injections / 25 days)
<i>EMGALITY</i> <i>SOSY</i> 100mg/ml	2	PA, QL (3 injections / 25 days)
<i>ergotamine w/ caffeine tab 1-100 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>naratriptan hcl</i> TABS 1mg	1A	QL (18 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>naratriptan hcl</i> TABS 2.5mg	1A	QL (12 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>rizatriptan benzoate</i> TABS 5mg; TBDP 5mg	1A	QL (27 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>rizatriptan benzoate</i> TABS 10mg; TBDP 10mg	1A	QL (18 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>sumatriptan</i> SOLN 5mg/act	2	QL (36 sprays / 25 days)
<i>sumatriptan</i> SOLN 20mg/act	2	QL (12 sprays / 25 days)
<i>sumatriptan succinate</i> SOAJ 4mg/0.5ml; SOCT 4mg/0.5ml	2	QL (18 syringes / 25 days)
<i>sumatriptan succinate</i> SOAJ 6mg/0.5ml; SOCT 6mg/0.5ml; SOSY 6mg/0.5ml	2	QL (12 units / 25 days)
<i>sumatriptan succinate</i> SOLN 6mg/0.5ml	2	QL (12 vials / 25 days)
<i>sumatriptan succinate</i> TABS 25mg, 50mg, 100mg	1A	QL (18 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	3	ST, QL (9 tabs / 25 days); PA**
<i>zolmitriptan</i> TABS 2.5mg; TBDP 2.5mg	2	QL (18 tabs / 25 days)
<i>zolmitriptan</i> TABS 5mg	1B	QL (12 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>zolmitriptan</i> TBDP 5mg	2	QL (12 tabs / 25 days)
ZOMIG SOLN 2.5mg	3	QL (18 sprays / 25 days)
ZOMIG SOLN 5mg	3	QL (12 sprays / 25 days)
MISCELLANEOUS		
<i>bupirone hcl</i> TABS 5mg, 7.5mg, 10mg, 15mg	1B	\$0 copay through Oscar Virtual Care
<i>bupirone hcl</i> TABS 30mg	2	
<i>clomipramine hcl</i> CAPS 25mg, 50mg	3	QL (150 caps / 25 days); QL applies to members age 65 and older
<i>clomipramine hcl</i> CAPS 75mg	3	QL (90 caps / 25 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>fluvoxamine maleate</i> CP24 100mg, 150mg	1B	\$0 copay through Oscar Virtual Care
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	1A	\$0 copay through Oscar Virtual Care
GUANIDINE HCL TABS 125mg	3	
LITHIUM SOLN 8meq/5ml	3	
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg	1A	\$0 copay through Oscar Virtual Care
<i>lithium carbonate</i> TABS 300mg; TBCR 300mg, 450mg	1B	\$0 copay through Oscar Virtual Care
NUDEXTA CAP 20-10MG	2	PA
<i>pimozide</i> TABS 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care
<i>pyridostigmine bromide</i> SOLN 60mg/5ml; TABS 60mg; TBCR 180mg	1B	\$0 copay through Oscar Virtual Care
REGONOL SOLN 10mg/2ml	3	
<i>riluzole</i> TABS 50mg	1B	\$0 copay through Oscar Virtual Care
SAVELLA TABS 12.5mg, 25mg, 50mg, 100mg	3	PA
SAVELLA MIS TITR PAK	3	PA
<i>tetrabenazine</i> TABS 12.5mg	4	PA, QL (120 tabs / 30 days)
<i>tetrabenazine</i> TABS 25mg	4	PA, QL (60 tabs / 30 days)

MULTIPLE SCLEROSIS AGENTS

AUBAGIO TABS 7mg, 14mg	4	PA, QL (30 tabs / 30 days)
AVONEX KIT 30mcg/vial; PSKT 30mcg/0.5ml	5	ST, PA, QL (4 injections / 28 days)
AVONEX PEN AJKT 30mcg/0.5ml	5	ST, PA, QL (4 injections / 28 days)
BETASERON KIT .3mg	4	PA, QL (14 injections / 28 days)
COPAXONE SOSY 20mg/ml	4	PA, QL (30 injections / 30 days)
COPAXONE SOSY 40mg/ml	4	PA, QL (12 syringes / 28 days)
<i>dalfampridine</i> TB12 10mg	5	PA, QL (60 tabs / 30 days)
<i>dimethyl fumarate</i> CPDR 120mg	4	PA, QL (14 caps / 28 days)
<i>dimethyl fumarate</i> CPDR 240mg	4	PA, QL (60 caps / 30 days)
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	4	PA, QL (1 kit / 30 days)

Drug Name	Drug Tier	Requirements/Limits
GILENYA CAPS .5mg	4	PA, QL (30 caps / 30 days)
MAYZENT TABS 2mg	4	PA, QL (30 tabs / 30 days)
MAYZENT TABS .25mg	4	PA, QL (112 tabs / 28 days)
PLEGRIDY SOPN 125mcg/0.5ml; SOSY 125mcg/0.5ml	5	ST, PA, QL (1 carton / 28 days)
PLEGRIDY INJ STARTER	5	ST, PA, QL (1 kit / 28 days)
PLEGRIDY PEN INJ STARTER	5	ST, PA, QL (1 pack / 28 days)
REBIF SOSY 22mcg/0.5ml, 44mcg/0.5ml	4	PA, QL (12 syringes / 28 days)
REBIF REBIDO INJ TITRATN	4	PA, QL (1 box / 28 days)
REBIF REBIDOSE SOAJ 22mcg/0.5ml, 44mcg/0.5ml	4	PA, QL (12 syringes / 28 days)
REBIF TITRTN INJ PACK	4	PA, QL (1 box / 28 days)
TECFIDERA MIS STARTER	4	PA, QL (1 kit / 30 days)
TYSABRI CONC 300mg/15ml	4	PA, QL (1 vial / 28 days)
VUMERITY CPDR 231mg	4	PA, QL (106 caps / 30 days)
VUMERITY CPDR 231mg	4	PA, QL (120 caps / 30 days)

MUSCULOSKELETAL THERAPY AGENTS

<i>baclofen</i> TABS 5mg, 10mg, 20mg	1B	\$0 copay through Oscar Virtual Care
<i>carisoprodol</i> TABS 250mg, 350mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>chlorzoxazone</i> TABS 500mg	1B	\$0 copay through Oscar Virtual Care
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>dantrolene sodium</i> CAPS 25mg, 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>metaxalone</i> TABS 400mg, 800mg	2	PA; High Risk Medications require PA for members age 70 and older
<i>methocarbamol</i> TABS 500mg, 750mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>orphenadrine citrate</i> SOLN 30mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>orphenadrine citrate</i> TB12 100mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>tizanidine hcl</i> TABS 2mg, 4mg	1A	\$0 copay through Oscar Virtual Care
NARCOLEPSY/CATAPLEXY		
<i>armodafinil</i> TABS 50mg, 150mg, 200mg, 250mg	1B	PA; \$0 copay through Oscar Virtual Care
<i>modafinil</i> TABS 100mg, 200mg	1B	PA; \$0 copay through Oscar Virtual Care
PSYCHOTHERAPEUTIC-MISC		
<i>acamprosate calcium</i> TBEC 333mg	1B	PA; \$0 copay through Oscar Virtual Care
<i>bupropion hcl (smoking deterrent)</i> TB12 150mg	0	\$0 limited to 2 treatment cycles/year
CHANTIX TABS .5mg, 1mg	0	PA; \$0 limited to 2 treatment cycles/year
CHANTIX CONTINUING MONTH TABS 1mg	0	PA; \$0 limited to 2 treatment cycles/year
CHANTIX PAK 0.5& 1MG	0	PA; \$0 limited to 2 treatment cycles/year
<i>disulfiram</i> TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care
<i>goodsense nicotine polacr</i> LOZG 4mg	0	OTC; \$0 limited to 2 treatment cycles/year
<i>naloxone hcl</i> SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY 2mg/2ml	1B	\$0 copay through Oscar Virtual Care
<i>naltrexone hcl</i> TABS 50mg	0	\$0 copay
NARCAN LIQD 4mg/0.1ml	2	
<i>nicorelief</i> GUM 4mg	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine step 3</i> PT24 7mg/24hr	0	OTC; \$0 limited to 2 treatment cycles/year
NICOTROL INHALER INHA 10mg	0	QL (max 168 days / year); \$0 limited to 2 treatment cycles/year
NICOTROL NS SOLN 10mg/ml	0	QL (max 168 days / year); \$0 limited to 2 treatment cycles/year

Drug Name	Drug Tier	Requirements/Limits
<i>sm nicotine transdermal s</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	0	OTC; \$0 limited to 2 treatment cycles/year
VIVITROL SUSR 380mg	4	PA, QL (1 vial / 28 days)

DERMATOLOGICALS

MISC. TOPICAL

DRYSOL SOLN 20%	2	
HYPERCARE SOLN 15%	2	OTC
XERAC AC SOLN 6.25%	2	

ENDOCRINE AND METABOLIC

ANDROGENS

ANADROL-50 TABS 50mg	3	PA
INTRAROSA INST 6.5mg	3	
<i>methyltestosterone</i> CAPS 10mg	1B	PA; \$0 copay through Oscar Virtual Care
<i>oxandrolone</i> TABS 2.5mg, 10mg	1B	PA; \$0 copay through Oscar Virtual Care
<i>testosterone</i> GEL 10mg/act, 25mg/2.5gm	3	PA
<i>testosterone cypionate</i> SOLN 100mg/ml, 200mg/ml	1B	PA; \$0 copay through Oscar Virtual Care
<i>testosterone enanthate</i> SOLN 200mg/ml	1B	PA; \$0 copay through Oscar Virtual Care

ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS

<i>acarbose</i> TABS 25mg, 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care
<i>miglitol</i> TABS 25mg, 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care

ANTIDIABETICS, AMYLIN ANALOGS

SYMLINPEN 60 SOPN 1500mcg/1.5ml	3	ST; PA**
SYMLINPEN 120 SOPN 2700mcg/2.7ml	3	ST; PA**

ANTIDIABETICS, BIGUANIDE

<i>metformin hcl</i> TABS 500mg, 850mg, 1000mg; TB24 500mg, 750mg	1A	\$0 copay through Oscar Virtual Care
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ANTIDIABETICS, BIGUANIDE/ SULFONYLUREA COMBINATIONS

<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>glipizide-metformin hcl tab 5-500 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>glyburide-metformin tab 1.25-250 mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>glyburide-metformin tab 2.5-500 mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>glyburide-metformin tab 5-500 mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 INHIBITORS		
<i>alogliptin benzoate TABS 6.25mg, 12.5mg, 25mg</i>	1B	\$0 copay through Oscar Virtual Care
JANUVIA TABS 25mg, 50mg, 100mg	2	ST; PA**
ANTIDIABETICS, DOPAMINE RECEPTOR AGONISTS		
CYCLOSET TABS .8mg	3	
ANTIDIABETICS, DPP-4 INHIBITOR COMBINATIONS		
JANUMET TAB 50-500MG	2	ST; PA**
JANUMET TAB 50-1000	2	ST; PA**
JANUMET XR TAB 50-500MG	2	ST; PA**
JANUMET XR TAB 50-1000	2	ST; PA**
JANUMET XR TAB 100-1000	2	ST; PA**
ANTIDIABETICS, INCRETIN MIMETIC AGENTS		
OZEMPIC SOPN 2mg/1.5ml	2	ST; PA**
TRULICITY SOPN .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	2	ST; PA**
VICTOZA SOPN 18mg/3ml	2	ST; PA**
ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS		
SOLIQUA INJ 100/33	2	ST; PA**
XULTOPHY INJ 100/3.6	2	ST; PA**
ANTIDIABETICS, INSULIN		
BASAGLAR KWIKPEN SOPN 100unit/ml	2	
FIASP FLEX INJ TOUCH	2	
FIASP INJ 100/ML	2	
FIASP PENFIL INJ U-100	2	
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	2	
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	2	
LEVEMIR SOLN 100unit/ml	2	
LEVEMIR FLEXTOUCH SOPN 100unit/ml	2	
NOVOLIN INJ 70/30	1A	OTC; RELION not covered; \$0*
NOVOLIN INJ 70/30 FP	2	OTC; RELION not covered
NOVOLIN N SUSP 100unit/ml	1A	OTC; RELION not covered; \$0*

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN N FLEXPEN SUPN 100unit/ml	2	OTC; RELION not covered
NOVOLIN R SOLN 100unit/ml	1A	OTC; RELION not covered; \$0*
NOVOLIN R FLEXPEN SOPN 100unit/ml	2	OTC; RELION not covered
NOVOLOG SOLN 100unit/ml	2	
NOVOLOG FLEXPEN SOPN 100unit/ml	2	
NOVOLOG MIX INJ 70/30	2	
NOVOLOG MIX INJ FLEXPEN	2	
NOVOLOG PENFILL SOCT 100unit/ml	2	
TRESIBA SOLN 100unit/ml	2	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	2	

ANTIDIABETICS, INSULIN SENSITIZER

<i>pioglitazone hcl</i> TABS 15mg, 30mg, 45mg	1A	\$0 copay through Oscar Virtual Care
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ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION

<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1B	\$0 copay through Oscar Virtual Care

ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION

<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	1B	\$0 copay through Oscar Virtual Care

ANTIDIABETICS, MEGLITINIDE

<i>nateglinide</i> TABS 60mg, 120mg	1B	\$0 copay through Oscar Virtual Care
<i>repaglinide</i> TABS .5mg, 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care

ANTIDIABETICS, MEGLITINIDE/BIGUANIDE COMBINATION

<i>repaglinide-metformin hcl tab 1-500 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>repaglinide-metformin hcl tab 2-500 mg</i>	1B	\$0 copay through Oscar Virtual Care

ANTIDIABETICS, SODIUM-GLUC CO-TRANSPOR2 INHIB (SGLT2) COMBO

SYNJARDY TAB	2	ST; PA**
SYNJARDY TAB 5-500MG	2	ST; PA**
SYNJARDY TAB 5-1000MG	2	ST; PA**
SYNJARDY TAB 12.5-500	2	ST; PA**
SYNJARDY XR TAB	2	ST; PA**

Drug Name	Drug Tier	Requirements/Limits
SYNJARDY XR TAB 5-1000MG	2	ST; PA**
SYNJARDY XR TAB 10-1000	2	ST; PA**
SYNJARDY XR TAB 25-1000	2	ST; PA**
XIGDUO XR TAB 2.5-1000	2	ST; PA**
XIGDUO XR TAB 5-500MG	2	ST; PA**
XIGDUO XR TAB 5-1000MG	2	ST; PA**
XIGDUO XR TAB 10-500MG	2	ST; PA**
XIGDUO XR TAB 10-1000	2	ST; PA**

ANTIDIABETICS, SODIUM-GLUC CO-TRANSPOR2 INHIB (SGLT2)/DPP-4 INHIBITOR COMBINATIONS

GLYXAMBI TAB 10-5 MG	2	ST; PA**
GLYXAMBI TAB 25-5 MG	2	ST; PA**

ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER2(SGLT2) INHIB

FARXIGA TABS 5mg, 10mg	2	ST; PA**
JARDIANCE TABS 10mg, 25mg	2	ST; PA**

ANTIDIABETICS, SULFONYLUREA

<i>glimepiride</i> TABS 1mg, 2mg, 4mg	1B	\$0 copay through Oscar Virtual Care
<i>glipizide</i> TABS 5mg, 10mg; TB24 2.5mg, 5mg, 10mg	1A	\$0 copay through Oscar Virtual Care
<i>glyburide</i> TABS 1.25mg, 2.5mg, 5mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>glyburide micronized</i> TABS 1.5mg, 3mg, 6mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*

BISPHOSPHONATES

<i>alendronate sodium</i> SOLN 70mg/75ml	1B	\$0 copay through Oscar Virtual Care
<i>alendronate sodium</i> TABS 5mg, 10mg, 35mg, 40mg, 70mg	1A	\$0 copay through Oscar Virtual Care
<i>ibandronate sodium</i> SOLN 3mg/3ml; TABS 150mg	1B	\$0 copay through Oscar Virtual Care
<i>pamidronate disodium</i> SOLN 30mg/10ml, 90mg/10ml; SOLR 30mg, 90mg	1B	\$0 copay through Oscar Virtual Care
<i>risedronate sodium</i> TABS 5mg, 30mg, 35mg, 150mg; TBEC 35mg	2	
<i>zoledronic acid</i> CONC 4mg/5ml; SOLN 5mg/100ml	4	PA

CALCIUM RECEPTOR AGONISTS

<i>cinacalcet hcl</i> TABS 30mg, 60mg	4	PA, QL (60 tabs / 30 days)
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Drug Name	Drug Tier	Requirements/Limits
<i>cinacalcet hcl</i> TABS 90mg	4	PA, QL (120 tabs / 30 days)

CHELATING AGENTS

CHEMET CAPS 100mg	3	
<i>deferiprone</i> TABS 500mg	4	PA
FERRIPROX SOLN 100mg/ml; TABS 500mg, 1000mg	4	PA
FERRIPROX TWICE-A-DAY TABS 1000mg	4	PA
<i>kionex</i> SUSP 15gm/60ml	1B	\$0 copay through Oscar Virtual Care
<i>penicillamine</i> TABS 250mg	1B	\$0 copay through Oscar Virtual Care
<i>sodium polystyrene sulfonate</i> SUSP 15gm/60ml, 30gm/120ml	1B	\$0 copay through Oscar Virtual Care
THYROSAFE TABS 65mg	2	OTC

CONTRACEPTIVES

<i>altavera</i>	0	
<i>alyacen 1/35</i>	0	
<i>alyacen 7/7/7</i>	0	
<i>amethia</i>	0	
<i>amethyst</i>	0	
ANNOVERA MIS	0	QL (1 / 300 days)
<i>apri</i>	0	
<i>aranelle</i>	0	
<i>ashlyna</i>	0	
<i>aviane</i>	0	
<i>azurette</i>	0	
<i>camila</i> TABS .35mg	0	
<i>caziant</i>	0	
<i>chateal</i>	0	
<i>cryselle-28</i>	0	
<i>cyclafem 1/35</i>	0	
<i>cyclafem 7/7/7</i>	0	
<i>dasetta 1/35</i>	0	
<i>dasetta 7/7/7</i>	0	
<i>delyla</i>	0	
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	0	QL (4 inj / 300 days)
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	0	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	0	
<i>elinest</i>	0	
ELLA TABS 30mg	0	
<i>emoquette</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>enpresse-28</i>	0	
<i>enskyce</i>	0	
<i>errin TABS .35mg</i>	0	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	0	
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	0	QL (13 / 300 days)
<i>falmina</i>	0	
<i>fayosim</i>	0	
<i>gianvi</i>	0	
<i>heather TABS .35mg</i>	0	
<i>introvale</i>	0	
<i>jolessa</i>	0	
<i>jolivette TABS .35mg</i>	0	
<i>junel 1.5/30</i>	0	
<i>junel 1/20</i>	0	
<i>junel fe 1.5/30</i>	0	
<i>junel fe 1/20</i>	0	
<i>kariva</i>	0	
<i>kelnor 1/35</i>	0	
<i>kurvelo</i>	0	
<i>KYLEENA IUD 19.5mg</i>	0	QL (1 / 300 days)
<i>larin 1.5/30</i>	0	
<i>leena</i>	0	
<i>lessina</i>	0	
<i>levonest</i>	0	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	0	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	
<i>levora 0.15/30-28</i>	0	
<i>LILETTA IUD 19.5mcg/day</i>	0	QL (1 / 300 days)
<i>loryna</i>	0	
<i>low-ogestrel</i>	0	
<i>lutra</i>	0	
<i>marlissa</i>	0	
<i>medroxyprogesterone acetate (contraceptive) SUSP 150mg/ml; SUSY 150mg/ml</i>	0	QL (4 inj / 300 days)
<i>microgestin 1.5/30</i>	0	
<i>MIRENA IUD 20mcg/24hr</i>	0	QL (1 / 300 days)
<i>mono-linyah</i>	0	
<i>mononessa</i>	0	
<i>myzilra</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>necon 0.5/35-28</i>	0	
NEXPLANON IMPL 68mg	0	QL (1 / 300 days)
<i>nikki</i>	0	
<i>nora-be TABS .35mg</i>	0	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	0	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	0	
<i>norethindrone (contraceptive) TABS .35mg</i>	0	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	0	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	0	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	0	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	0	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	0	
<i>nortrel 0.5/35 (28)</i>	0	
<i>nortrel 1/35</i>	0	
<i>nortrel 7/7/7</i>	0	
<i>ocella</i>	0	
<i>ogestrel</i>	0	
<i>orsythia</i>	0	
PARAGARD IUD T380A	0	QL (1 unit / 300 days)
<i>pirmella 1/35</i>	0	
<i>pirmella 7/7/7</i>	0	
<i>portia-28</i>	0	
<i>previfem</i>	0	
<i>quasense</i>	0	
<i>reclipsen</i>	0	
<i>rivelsa</i>	0	
SKYLA IUD 13.5mg	0	QL (1 / 300 days)
<i>sprintec 28</i>	0	
<i>sronyx</i>	0	
<i>syeda</i>	0	
<i>take action TABS 1.5mg</i>	0	OTC
<i>tri-linyah</i>	0	
<i>tri-sprintec</i>	0	
<i>trinessa</i>	0	
<i>trivora-28</i>	0	
<i>velivet</i>	0	
<i>viorele</i>	0	
<i>wera</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>xulane</i>	0	
<i>zarah</i>	0	
<i>zenchent</i>	0	
<i>zovia 1/35e</i>	0	

ENDOMETRIOSIS

<i>danazol</i> CAPS 50mg, 100mg, 200mg	1B	\$0 copay through Oscar Virtual Care
SYNAREL SOLN 2mg/ml	5	PA

ENZYME REPLACEMENTS

CARBAGLU TABS 200mg	4	PA
CERDELGA CAPS 84mg	4	PA, QL (60 caps / 30 days)
CYSTADANE POW	4	PA
CYSTAGON CAPS 50mg, 150mg	4	PA
KUVAN PACK 100mg, 500mg; TBSO 100mg	4	PA
MYALEPT SOLR 11.3mg	4	PA, QL (30 vials / 30 days)
<i>nitisinone</i> CAPS 2mg, 5mg, 10mg	4	PA
ORFADIN CAPS 20mg; SUSP 4mg/ml	4	PA
<i>sapropterin pow 100mg</i> PACK 100mg	4	PA
<i>sapropterin pow 500mg</i> PACK 500mg	4	PA
<i>sapropterin tab 100mg</i> TBSO 100mg	4	PA
<i>sodium phenylbutyrate</i> POWD 3gm/tsp	4	PA, QL (600g / 30 days)
<i>sodium phenylbutyrate</i> TABS 500mg	4	PA, QL (1200 tabs / 30 days)

ESTROGENS

CLIMARA PRO DIS WEEKLY	2	
DEPO-ESTRADIOL OIL 5mg/ml	3	
DIVIGEL GEL .25mg/0.25gm, .5mg/0.5gm, .75mg/0.75gm, 1mg/gm, 1.25mg/1.25gm	3	PA; High Risk Medications require PA for members age 70 and older
DUAVEE TAB 0.45-20	2	
ELESTRIN GEL .06%	3	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol</i> TABS .5mg, 1mg, 2mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>estradiol vaginal</i> CREA .1mg/gm	1B	\$0 copay through Oscar Virtual Care
<i>estradiol valerate</i> OIL 20mg/ml, 40mg/ml	1B	\$0 copay through Oscar Virtual Care
ESTROGEL GEL .06%	3	PA; High Risk Medications require PA for members age 70 and older
<i>estropipate</i> TABS .75mg, 1.5mg, 3mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
EVAMIST SOLN 1.53mg/spray	3	PA; High Risk Medications require PA for members age 70 and older
<i>jinteli</i>	1B	\$0 copay through Oscar Virtual Care
MENEST TABS .3mg, .625mg, 1.25mg, 2.5mg	3	PA; High Risk Medications require PA for members age 70 and older
<i>mimvey</i>	1B	\$0 copay through Oscar Virtual Care
<i>mimvey lo</i>	1B	\$0 copay through Oscar Virtual Care
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1B	\$0 copay through Oscar Virtual Care
PREMARIN CREA .625mg/gm	2	
PREMARIN SOLR 25mg	3	
PREMARIN TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	3	PA; High Risk Medications require PA for members age 70 and older
<i>yuvafem</i> TABS 10mcg	1B	\$0 copay through Oscar Virtual Care
GLUCOCORTICOIDS		
<i>cortisone acetate</i> TABS 25mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
DEPO-MEDROL SUSP 20mg/ml	3	
<i>dexamethasone</i> ELIX .5mg/5ml; SOLN .5mg/5ml; TABS 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care
<i>dexamethasone</i> TABS .5mg, .75mg, 1.5mg, 4mg, 6mg	1A	\$0 copay through Oscar Virtual Care
DEXAMETHASONE INTENSOL CONC 1mg/ml	2	
<i>dexamethasone sodium phosphate</i> SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml	1B	\$0 copay through Oscar Virtual Care
<i>fludrocortisone acetate</i> TABS .1mg	1B	\$0 copay through Oscar Virtual Care
<i>hydrocortisone</i> TABS 5mg, 10mg, 20mg	1A	\$0 copay through Oscar Virtual Care
MEDROL TABS 2mg	2	
<i>methylprednisolone</i> TABS 4mg, 8mg, 16mg, 32mg; TBPK 4mg	1B	\$0 copay through Oscar Virtual Care
<i>methylprednisolone acetate</i> SUSP 40mg/ml, 80mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>methylprednisolone sod succ</i> SOLR 40mg, 125mg, 1000mg	1B	\$0 copay through Oscar Virtual Care
<i>prednisolone</i> SOLN 15mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>prednisolone sodium phosphate</i> SOLN 5mg/5ml, 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml; TBDP 10mg, 15mg, 30mg	1B	\$0 copay through Oscar Virtual Care
<i>prednisone</i> SOLN 5mg/5ml; TABS 50mg; TBPK 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>prednisone</i> TABS 1mg, 2.5mg, 5mg, 10mg, 20mg	1A	\$0 copay through Oscar Virtual Care
PREDNISONE INTENSOL CONC 5mg/ml	2	
SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg	3	
SOLU-MEDROL SOLR 2gm	3	
GLUCOSE ELEVATING AGENTS		
GLUCAGON EMERGENCY KIT KIT 1mg	2	
INSTA-GLUCOSE GEL 77.4%	2	OTC
HUMAN GROWTH HORMONES		
HUMATROPE SOLR 6mg, 12mg, 24mg	4	PA
HUMATROPE COMBO PACK SOLR 5mg	4	PA
MISCELLANEOUS		
<i>cabergoline</i> TABS .5mg	1B	\$0 copay through Oscar Virtual Care
<i>calcitonin (salmon)</i> SOLN 200unit/act	2	

Drug Name	Drug Tier	Requirements/Limits
CHORIONIC GONADOTROPIN SOLR 10000unit	4	PA
INCRELEX SOLN 40mg/4ml	4	PA
MIACALCIN SOLN 200unit/ml	3	
<i>octreotide acetate</i> SOLN 50mcg/ml, 100mcg/ml, 500mcg/ml	4	PA, QL (90 ml / 30 days)
<i>octreotide acetate</i> SOLN 200mcg/ml	4	PA, QL (225 ml / 30 days)
<i>octreotide acetate</i> SOLN 1000mcg/ml	4	PA, QL (45 ml / 30 days)
OSPHENA TABS 60mg	2	
PROLIA SOSY 60mg/ml	4	PA, QL (60mg / 24 weeks)
<i>raloxifene hcl</i> TABS 60mg	1B	\$0 copay for women ages 35 and older for the primary prevention of breast cancer; \$0*
SAMSCA TABS 15mg	4	PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	5	PA, QL (60 ampules / 30 days)
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	4	PA, QL (1 injection / 28 days)
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	4	PA, QL (30 vials / 30 days)
<i>tolvaptan</i> TABS 15mg, 30mg	4	PA
TYMLOS SOPN 3120mcg/1.56ml	4	PA, QL (1 pen / 30 days)
PHOSPHATE BINDER AGENTS		
<i>calcium acetate (phosphate binder)</i> CAPS 667mg; TABS 667mg	1B	\$0 copay through Oscar Virtual Care
FOSRENOL PACK 750mg, 1000mg	3	
PHOSLYRA SOLN 667mg/5ml	2	
<i>sevelamer carbonate</i> PACK .8gm, 2.4gm	1B	\$0 copay through Oscar Virtual Care
<i>sevelamer carbonate</i> TABS 800mg	3	
VELPHORO CHEW 500mg	3	
PROGESTINS		
CRINONE GEL 4%, 8%	2	
LUPANETA KIT 3.75-5	5	PA
LUPANETA KIT 11.25-5	5	PA
<i>medroxyprogesterone acetate</i> TABS 2.5mg, 10mg	1A	\$0 copay through Oscar Virtual Care
<i>medroxyprogesterone acetate</i> TABS 5mg	1B	\$0 copay through Oscar Virtual Care
<i>norethindrone acetate</i> TABS 5mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>progesterone micronized</i> CAPS 100mg, 200mg	1B	\$0 copay through Oscar Virtual Care

THYROID AGENTS

<i>levothyroxine sodium</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1B	\$0 copay through Oscar Virtual Care
<i>levoxyl</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1B	\$0 copay through Oscar Virtual Care
<i>liothyronine sodium</i> SOLN 10mcg/ml; TABS 5mcg, 25mcg, 50mcg	1B	\$0 copay through Oscar Virtual Care
<i>methimazole</i> TABS 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>propylthiouracil</i> TABS 50mg	1B	\$0 copay through Oscar Virtual Care
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	2	
THYROLAR-1 TABS 60mg	3	
THYROLAR-1/2 TABS 30mg	3	
THYROLAR-1/4 TABS 15mg	3	
THYROLAR-2 TABS 120mg	3	
THYROLAR-3 TAB 180MG	3	
<i>unithroid</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 200mcg, 300mcg	1B	\$0 copay through Oscar Virtual Care

VASOPRESSINS

<i>desmopressin acetate</i> SOLN 4mcg/ml; TABS .1mg, .2mg	1B	\$0 copay through Oscar Virtual Care
<i>desmopressin acetate spray</i> SOLN .01%	1B	\$0 copay through Oscar Virtual Care
<i>desmopressin acetate spray refrigerated</i> SOLN .01%	1B	\$0 copay through Oscar Virtual Care

GASTROINTESTINAL

ANTICHOLINERGICS

<i>atropine sulfate</i> SOSY .25mg/5ml, 1mg/10ml	1B	\$0 copay through Oscar Virtual Care
CUVPOSA SOLN 1mg/5ml	2	
<i>dicyclomine hcl</i> CAPS 10mg; SOLN 10mg/5ml, 10mg/ml; TABS 20mg	1B	\$0 copay through Oscar Virtual Care
<i>ed-spaz</i> TBDP .125mg	1B	\$0 copay through Oscar Virtual Care
<i>glycopyrrolate</i> SOLN .2mg/ml, .4mg/2ml, 1mg/5ml, 4mg/20ml; TABS 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>hyoscyamine sulfate</i> SUBL .125mg; TABS .125mg; TB12 .375mg; TBDP .125mg	1B	\$0 copay through Oscar Virtual Care
<i>methscopolamine bromide</i> TABS 2.5mg, 5mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>nulev</i> TBDP .125mg	1B	\$0 copay through Oscar Virtual Care
<i>oscimin</i> SUBL .125mg; TABS .125mg	1B	\$0 copay through Oscar Virtual Care
<i>oscimin sr</i> TB12 .375mg	1B	\$0 copay through Oscar Virtual Care
<i>symax-sl</i> SUBL .125mg	1B	\$0 copay through Oscar Virtual Care

ANTIEMETICS

<i>AKYNZEO</i> CAP 300-0.5	3	QL (2 caps / 21 days)
<i>aprepitant</i> CAPS 40mg	1B	QL (3 caps / 180 days); \$0 copay through Oscar Virtual Care
<i>aprepitant</i> CAPS 80mg	1B	QL (4 caps / 21 days); \$0 copay through Oscar Virtual Care
<i>aprepitant</i> CAPS 125mg	1B	QL (2 caps / 21 days); \$0 copay through Oscar Virtual Care
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	1B	QL (2 packs / 21 days); \$0 copay through Oscar Virtual Care
<i>CESAMET</i> CAPS 1mg	3	QL (18 caps / 21 days)
<i>compro</i> SUPP 25mg	1B	\$0 copay through Oscar Virtual Care
<i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg	1B	QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>granisetron hcl</i> SOLN .1mg/ml, 1mg/ml, 4mg/4ml	1B	QL (2 mL / 21 days); \$0 copay through Oscar Virtual Care
<i>granisetron hcl</i> TABS 1mg	1B	QL (12 tabs / 21 days); \$0 copay through Oscar Virtual Care
<i>meclizine hcl</i> TABS 12.5mg, 25mg	1B	\$0 copay through Oscar Virtual Care
<i>metoclopramide hcl</i> SOLN 5mg/ml, 10mg/10ml; TABS 5mg, 10mg; TBDP 5mg	1B	\$0 copay through Oscar Virtual Care
<i>ondansetron</i> TBDP 4mg, 8mg	1A	QL (18 tabs / 21 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml	1B	QL (20 mL / 21 days); \$0 copay through Oscar Virtual Care
<i>ondansetron hcl</i> SOLN 4mg/5ml	1B	QL (200 mL / 21 days); \$0 copay through Oscar Virtual Care
<i>ondansetron hcl</i> TABS 4mg, 8mg	1A	QL (18 tabs / 21 days); \$0 copay through Oscar Virtual Care
<i>ondansetron hcl</i> TABS 24mg	1B	QL (2 tabs / 21 days); \$0 copay through Oscar Virtual Care
<i>prochlorperazine</i> SUPP 25mg	1B	\$0 copay through Oscar Virtual Care
<i>prochlorperazine edisylate</i> SOLN 10mg/2ml, 50mg/10ml	1B	\$0 copay through Oscar Virtual Care
<i>prochlorperazine maleate</i> TABS 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>promethazine hcl</i> SOLN 25mg/ml, 50mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>promethazine hcl</i> SYRP 6.25mg/5ml; TABS 12.5mg, 25mg, 50mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
SANCUSO PTCH 3.1mg/24hr	2	PA
<i>scopolamine</i> PT72 1mg/3days	1B	\$0 copay through Oscar Virtual Care
<i>trimethobenzamide hcl</i> CAPS 300mg	1B	\$0 copay through Oscar Virtual Care
VARUBI EMUL 166.5mg/92.5ml; TBPK 90mg	2	
H2-RECEPTOR ANTAGONISTS		
<i>cimetidine</i> TABS 200mg, 300mg, 400mg, 800mg	1B	\$0 copay through Oscar Virtual Care
<i>cimetidine hcl</i> SOLN 300mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml; SUSR 40mg/5ml; TABS 20mg, 40mg	1B	\$0 copay through Oscar Virtual Care
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>nizatidine</i> CAPS 150mg, 300mg; SOLN 15mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>ranitidine hcl</i> SOLN 50mg/2ml, 150mg/6ml	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
INFLAMMATORY BOWEL DISEASE		
<i>balsalazide disodium</i> CAPS 750mg	1B	\$0 copay through Oscar Virtual Care
<i>budesonide</i> CPEP 3mg	2	PA
<i>colocort</i> ENEM 100mg/60ml	1B	\$0 copay through Oscar Virtual Care
DIPENTUM CAPS 250mg	3	PA
<i>mesalamine</i> CPDR 400mg; ENEM 4gm; SUPP 1000mg; TBEC 1.2gm	2	
<i>mesalamine</i> TBEC 800mg	2	PA
<i>sulfasalazine</i> TABS 500mg; TBEC 500mg	1B	\$0 copay through Oscar Virtual Care
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION		
AMITIZA CAPS 8mcg, 24mcg	2	
LINZESS CAPS 72mcg, 145mcg, 290mcg	2	
<i>lubiprostone</i> CAPS 8mcg, 24mcg	2	
IRRITABLE BOWEL SYNDROME WITH DIARRHEA		
<i>alosetron hcl</i> TABS .5mg, 1mg	3	PA
LAXATIVES		
CLENPIQ SOL	2	Members age 50 through 74, otherwise not covered
<i>enulose</i> SOLN 10gm/15ml	1B	\$0 copay through Oscar Virtual Care
<i>gavilyte-c</i>	0	
<i>gavilyte-g</i>	0	
<i>gavilyte-h</i>	0	\$0 copay for members age 50 through 74, otherwise not covered
<i>gavilyte-n/flipack</i>	0	
<i>generlac</i> SOLN 10gm/15ml	1B	\$0 copay through Oscar Virtual Care
GOLYTELY SOL	0	
<i>lactulose</i> SOLN 10gm/15ml	1B	\$0 copay through Oscar Virtual Care
MOVIPREP SOL	2	\$0 copay for members age 50 through 74; Tier 3 for all others
OSMOPREP TAB 1.5GM	3	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	0	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	0	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	0	

Drug Name	Drug Tier	Requirements/Limits
PLENVU SOL	2	Members age 50 through 74, otherwise not covered
<i>polyethylene glycol 3350</i> POWD 17gm/scoop	1B	OTC; \$0 copay through Oscar Virtual Care
PREPOPIK PAK	2	Members age 50 through 74, otherwise not covered
SUPREP BOWEL SOL PREP KIT	2	

MISCELLANEOUS

<i>cromolyn sodium (mastocytosis)</i> CONC 100mg/5ml	1B	PA; \$0 copay through Oscar Virtual Care
<i>diphenoxylate w/ atropine liq 2.5-0.025</i> <i>mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>diphenoxylate w/ atropine tab 2.5-0.025</i> <i>mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>loperamide hcl</i> CAPS 2mg	1B	\$0 copay through Oscar Virtual Care
<i>misoprostol</i> TABS 100mcg, 200mcg	1B	\$0 copay through Oscar Virtual Care
MOTOFEN TAB 1-0.025	3	
MOVANTIK TABS 12.5mg, 25mg	2	
SUCRAID SOLN 8500unit/ml	3	PA, QL (354 mL / 25 days)
<i>sucralfate</i> TABS 1gm	1B	\$0 copay through Oscar Virtual Care
<i>ursodiol</i> CAPS 300mg; TABS 250mg, 500mg	1B	\$0 copay through Oscar Virtual Care

PANCREATIC ENZYMES

CREON CAP 3000UNIT	2	PA
CREON CAP 6000UNIT	2	PA
CREON CAP 12000UNT	2	PA
CREON CAP 24000UNT	2	PA
CREON CAP 36000UNT	2	PA
VIOKACE TAB 10440	2	PA
VIOKACE TAB 20880	2	PA
ZENPEP CAP 3000UNIT	2	PA
ZENPEP CAP 5000UNIT	2	PA
ZENPEP CAP 10000UNT	2	PA
ZENPEP CAP 15000UNT	2	PA
ZENPEP CAP 20000UNT	2	PA
ZENPEP CAP 25000	2	PA
ZENPEP CAP 40000	2	PA

PROTON PUMP INHIBITORS

DEXILANT CPDR 30mg, 60mg	3	ST, QL (30 caps / 30 days); PA**
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Drug Name	Drug Tier	Requirements/Limits
<i>esomeprazole magnesium</i> CPDR 20mg, 40mg	3	PA, QL (30 caps / 30 days)
<i>esomeprazole sodium</i> SOLR 20mg, 40mg	1B	\$0 copay through Oscar Virtual Care
<i>lansoprazole</i> CPDR 15mg, 30mg	1A	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	1A	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>pantoprazole sodium</i> TBEC 20mg, 40mg	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>rabeprazole sodium</i> TBEC 20mg	2	PA, QL (30 tabs / 30 days)

RECTAL, CORTICOSTEROIDS

<i>procto-pak</i> CREA 1%	1B	\$0 copay through Oscar Virtual Care
<i>proctosol hc</i> CREA 2.5%	1B	\$0 copay through Oscar Virtual Care
<i>proctozone-hc</i> CREA 2.5%	1B	\$0 copay through Oscar Virtual Care

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl</i> TB24 10mg	1B	\$0 copay through Oscar Virtual Care
CARDURA XL TB24 4mg, 8mg	3	ST; PA**
<i>dutasteride</i> CAPS .5mg	1B	\$0 copay through Oscar Virtual Care
<i>dutasteride-tamsulosin hcl cap</i> 0.5-0.4 mg	1B	\$0 copay through Oscar Virtual Care
<i>finasteride</i> TABS 5mg	1B	\$0 copay through Oscar Virtual Care
<i>silodosin</i> CAPS 4mg, 8mg	1B	\$0 copay through Oscar Virtual Care
<i>tadalafil</i> TABS 2.5mg, 5mg	1B	PA, QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>tamsulosin hcl</i> CAPS .4mg	1B	\$0 copay through Oscar Virtual Care

CONTRACEPTIVES

ENCARE SUPP 100mg	0	OTC
OPTIONS CONCEPTROL VAGINA GEL 4%	0	OTC
OPTIONS GYNOL II VAGINAL GEL 3%	0	OTC
SHUR-SEAL GEL 2%	0	OTC
TODAY SPONGE MISC 1000mg	0	OTC

Drug Name	Drug Tier	Requirements/Limits
VCF VAGINAL CONTRACEPTIVE FILM 28%; FOAM 12.5%	0	OTC

MISCELLANEOUS

<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	1B	\$0 copay through Oscar Virtual Care
ELMIRON CAPS 100mg	3	
<i>flavoxate hcl</i> TABS 100mg	1B	\$0 copay through Oscar Virtual Care
<i>phenazopyridine tab 95mg</i> TABS 95mg	1B	OTC; \$0 copay through Oscar Virtual Care
<i>potassium citrate (alkalinizer)</i> TBCR 15meq, 540mg, 1080mg	1B	\$0 copay through Oscar Virtual Care

URINARY ANTISPASMODICS

<i>darifenacin hydrobromide</i> TB24 7.5mg, 15mg	1B	\$0 copay through Oscar Virtual Care
<i>oxybutynin chloride</i> SYRP 5mg/5ml; TABS 5mg; TB24 5mg, 10mg, 15mg	1B	\$0 copay through Oscar Virtual Care
<i>solifenacin succinate</i> TABS 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
<i>tolterodine tartrate</i> CP24 2mg, 4mg; TABS 1mg, 2mg	1B	\$0 copay through Oscar Virtual Care
<i>tropium chloride</i> CP24 60mg; TABS 20mg	1B	\$0 copay through Oscar Virtual Care

VAGINAL ANTI-INFECTIVES

CLEOCIN SUPP 100mg	2	
<i>clindamycin phosphate vaginal</i> CREA 2%	1B	\$0 copay through Oscar Virtual Care
GYNAZOLE-1 CREA 2%	3	
<i>metronidazole vaginal</i> GEL .75%	2	
<i>miconazole 3</i> SUPP 200mg	1B	\$0 copay through Oscar Virtual Care
<i>terconazole vaginal</i> CREA .4%, .8%; SUPP 80mg	1B	\$0 copay through Oscar Virtual Care
<i>vandazole</i> GEL .75%	2	

HEMATOLOGIC

ANTICOAGULANTS

ARGATRB/NACL INJ 50MG/50	3	
<i>argatroban</i> SOLN 250mg/2.5ml	1B	\$0 copay through Oscar Virtual Care
ARGATROBAN INJ 125/125	3	
ARGATROBAN INJ 250/250	3	
ELIQUIS TABS 2.5mg, 5mg	2	
ELIQUIS STARTER PACK TBPK 5mg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium</i> SOLN 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml, 300mg/3ml	1B	\$0 copay through Oscar Virtual Care
<i>fondaparinux sodium</i> SOLN 2.5mg/0.5ml, 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	1B	\$0 copay through Oscar Virtual Care
FRAGMIN SOLN 2500unit/0.2ml, 5000unit/0.2ml, 7500unit/0.3ml, 10000unit/ml, 12500unit/0.5ml, 15000unit/0.6ml, 18000unt/0.72ml, 95000unit/3.8ml	3	
<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/0.5ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	1B	\$0 copay through Oscar Virtual Care
<i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1A	\$0 copay through Oscar Virtual Care
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1A	\$0 copay through Oscar Virtual Care
XARELTO TABS 2.5mg, 10mg, 15mg, 20mg	2	
XARELTO STAR TAB 15/20MG	2	
HEMATOPOIETIC GROWTH FACTORS		
ARANESP ALBUMIN FREE SOLN 25mcg/ml, 40mcg/ml, 60mcg/ml, 100mcg/ml, 200mcg/ml, 300mcg/ml; SOSY 10mcg/0.4ml, 25mcg/0.42ml, 40mcg/0.4ml, 60mcg/0.3ml, 100mcg/0.5ml, 150mcg/0.3ml, 200mcg/0.4ml, 300mcg/0.6ml, 500mcg/ml	4	PA
MIRCERA SOSY 30mcg/0.3ml, 50mcg/0.3ml, 75mcg/0.3ml, 100mcg/0.3ml, 150mcg/0.3ml, 200mcg/0.3ml	5	PA
NEULASTA SOSY 6mg/0.6ml	4	PA, QL (2 injections / 28 days)
NEULASTA ONPRO KIT PSKT 6mg/0.6ml	4	PA, QL (2 injections / 28 days)
NIVESTYM SOLN 300mcg/ml, 480mcg/1.6ml; SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	PA
PROMACTA TABS 12.5mg, 25mg	5	PA, QL (30 tabs / 30 days)
PROMACTA TABS 50mg, 75mg	5	PA, QL (60 tabs / 30 days)
RETACRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml, 20000unit/ml, 40000unit/ml	4	PA

Drug Name	Drug Tier	Requirements/Limits
UDENYCA SOSY 6mg/0.6ml	4	PA, QL (2 injections / 28 days)

MISCELLANEOUS

<i>anagrelide hcl</i> CAPS .5mg, 1mg	1B	\$0 copay through Oscar Virtual Care
<i>cilostazol</i> TABS 50mg, 100mg	1B	\$0 copay through Oscar Virtual Care
HEMLIBRA SOLN 30mg/ml, 60mg/0.4ml, 105mg/0.7ml, 150mg/ml	5	PA
<i>icatibant acetate</i> SOLN 30mg/3ml	4	PA, QL (45 syringes / 90 days)
<i>pentoxifylline</i> TBCR 400mg	1B	\$0 copay through Oscar Virtual Care
<i>tranexamic acid</i> SOLN 1000mg/10ml; TABS 650mg	1B	\$0 copay through Oscar Virtual Care

PLATELET AGGREGATION INHIBITORS

<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1B	\$0 copay through Oscar Virtual Care
BRILINTA TABS 60mg, 90mg	2	
<i>clopidogrel bisulfate</i> TABS 75mg	1A	\$0 copay through Oscar Virtual Care
<i>clopidogrel bisulfate</i> TABS 300mg	1B	\$0 copay through Oscar Virtual Care
<i>dipyridamole</i> TABS 25mg, 50mg, 75mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>prasugrel hcl</i> TABS 5mg, 10mg	1B	\$0 copay through Oscar Virtual Care
YOSPRALA TAB 81-40MG	3	
YOSPRALA TAB 325-40MG	3	
ZONTIVITY TABS 2.08mg	2	

HEMATOPOIETIC AGENTS

IRON

FERROUS FUMARATE TABS 29mg	1B	OTC; \$0 copay through Oscar Virtual Care
<i>ferrous fumarate</i> TABS 324mg	1B	OTC; \$0 copay through Oscar Virtual Care
<i>ferrous gluconate</i> TABS 240mg	1B	OTC; \$0 copay through Oscar Virtual Care
FERROUS GLUCONATE TABS 324mg	1B	OTC; \$0 copay through Oscar Virtual Care
<i>ferrous sulfate</i> ELIX 220mg/5ml; TBEC 325mg	1B	OTC; \$0 copay through Oscar Virtual Care
FERROUS SULFATE LIQD 220mg/5ml; TBCR 140mg; TBEC 324mg	1B	OTC; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
IMMUNOLOGIC AGENTS		
BIOLOGIC DISEASE-MODIFYING AGENTS		
ACTEMRA SOLN 80mg/4ml	5	ST, PA, QL (5 vials / 28 days)
ACTEMRA SOLN 200mg/10ml	5	ST, PA, QL (4 vials / 14 days)
ACTEMRA SOLN 400mg/20ml	5	ST, PA, QL (2 vials / 14 days)
ACTEMRA SOSY 162mg/0.9ml	5	ST, PA, QL (4 syringes / 28 days)
ENBREL SOLR 25mg; SOSY 25mg/0.5ml, 50mg/ml	4	PA, QL (8 syringes / 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL MINI SOCT 50mg/ml	4	PA, QL (8 cartridges / 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL SURECLICK SOAJ 50mg/ml	4	PA, QL (8 syringes / 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
HUMIRA PSKT 10mg/0.1ml, 10mg/0.2ml, 20mg/0.2ml, 20mg/0.4ml	4	PA, QL (2 injections / 28 days)
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	4	PA, QL (4 injections / 28 days)
HUMIRA PEDIA INJ CROHNS	4	PA, QL (2 injections / 28 days); (80mg and 40mg dual strength kit)
HUMIRA PEDIATRIC CROHNS D PSKT 80mg/0.8ml	4	PA, QL (3 injections / 28 days); (80mg single strength kit)
HUMIRA PEN PNKT 40mg/0.4ml	4	PA, QL (4 injections / 28 days)
HUMIRA PEN KIT PS/UV	4	PA, QL (1 kit / 28 days)
HUMIRA PEN-CD/UC/HS START PNKT 40mg/0.8ml	4	PA, QL (6 pens / 28 days)
HUMIRA PEN-CD/UC/HS START PNKT 80mg/0.8ml	4	PA, QL (1 kit / 28 days)
HUMIRA PEN-PS/UV STARTER PNKT 40mg/0.8ml	4	PA, QL (4 pens / 28 days)

Drug Name	Drug Tier	Requirements/Limits
KEVZARA SOAJ 150mg/1.14ml, 200mg/1.14ml	4	PA, QL (2 pens / 28 days); Preferred agent for Rheumatoid Arthritis (after failure of 2 other preferred agents)
KEVZARA SOSY 150mg/1.14ml, 200mg/1.14ml	4	PA, QL (2 syringes / 4 weeks); Preferred agent for Rheumatoid Arthritis (after failure of 2 other preferred agents)
RINVOQ TB24 15mg	4	PA, QL (30 tabs / 30 days); Preferred agent for Rheumatoid Arthritis
SIMPONI SOAJ 50mg/0.5ml, 100mg/ml; SOSY 50mg/0.5ml, 100mg/ml	5	PA, QL (1 injection / 28 days)
SIMPONI ARIA SOLN 50mg/4ml	5	PA, QL (200 mg / 8 weeks)
SKYRIZI PSKT 75mg/0.83ml	4	PA, QL (2 syringes / 12 weeks); Preferred agent for Psoriasis
STELARA SOSY 45mg/0.5ml	4	PA, QL (1 syringe / 84 days); Preferred agent for Crohn's Disease (after failure of Humira) and Psoriasis
STELARA SOSY 90mg/ml	4	PA, QL (1 syringe / 56 days); Preferred agent for Crohn's Disease (after failure of Humira) and Psoriasis
TALTZ SOAJ 80mg/ml; SOSY 80mg/ml	4	PA, QL (1 injection / 28 days); Preferred agent for Psoriasis
TREMFYA SOPN 100mg/ml; SOSY 100mg/ml	4	PA, QL (1 injection / 56 days); Preferred agent for Psoriasis
XELJANZ TABS 5mg	4	PA, QL (60 tabs / 30 days); Preferred agent for Rheumatoid Arthritis
XELJANZ TABS 10mg	4	PA, QL (60 tabs / 30 days); Preferred agent for Ulcerative Colitis (after failure of Humira)
XELJANZ XR TB24 11mg	4	PA, QL (30 tabs / 30 days); Preferred agent for Rheumatoid Arthritis

Drug Name	Drug Tier	Requirements/Limits
XELJANZ XR TB24 22mg	4	PA, QL (30 tabs / 30 days); Preferred agent for Ulcerative Colitis (after failure of Humira)

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)

<i>hydroxychloroquine sulfate</i> TABS 200mg	1B	\$0 copay through Oscar Virtual Care
<i>leflunomide</i> TABS 10mg, 20mg	1B	\$0 copay through Oscar Virtual Care
<i>methotrexate sodium</i> TABS 2.5mg	1B	\$0 copay through Oscar Virtual Care
OTEZLA TABS 30mg	4	PA, QL (60 tabs / 30 days); Preferred agent for Psoriasis and Psoriatic Arthritis
OTEZLA TAB 10/20/30	4	PA, QL (55 tabs / 28 days); Preferred agent for Psoriasis and Psoriatic Arthritis

IMMUNOGLOBULIN

HYQVIA INJ 2.5-200	4	PA
HYQVIA INJ 5-400	4	PA
HYQVIA INJ 10-800	4	PA
HYQVIA INJ 20-1600	4	PA
HYQVIA INJ 30-2400	4	PA

IMMUNOMODULATORS

ACTIMMUNE SOLN 2000000unit/0.5ml	4	PA
ALFERON N SOLN 5mu/ml	4	
ARCALYST SOLR 220mg	4	PA, QL (4 vials / 28 days)
INTRON A SOLN 10mu/ml, 6000000unit/ml; SOLR 10mu, 18mu, 50mu	4	PA
POMALYST CAPS 1mg, 2mg	4	PA, QL (21 caps / 21 days)
POMALYST CAPS 3mg, 4mg	4	PA, QL (21 caps / 28 days)
REVLIMID CAPS 2.5mg, 5mg, 10mg, 15mg	4	PA, QL (28 caps / 28 days)
REVLIMID CAPS 20mg, 25mg	4	PA, QL (21 caps / 28 days)
THALOMID CAPS 50mg, 100mg	4	PA, QL (28 caps / 28 days)
THALOMID CAPS 150mg, 200mg	4	PA, QL (56 caps / 28 days)

Drug Name	Drug Tier	Requirements/Limits
IMMUNOSUPPRESSANTS		
AZASAN TABS 75mg, 100mg	3	
azathioprine TABS 50mg	1B	\$0 copay through Oscar Virtual Care
cyclosporine CAPS 25mg, 100mg	3	
cyclosporine SOLN 50mg/ml	1B	\$0 copay through Oscar Virtual Care
cyclosporine modified (for microemulsion) CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	1B	\$0 copay through Oscar Virtual Care
gengraf CAPS 25mg, 100mg; SOLN 100mg/ml	1B	\$0 copay through Oscar Virtual Care
mycophenolate mofetil CAPS 250mg; TABS 500mg	1B	\$0 copay through Oscar Virtual Care
mycophenolate mofetil SUSR 200mg/ml	3	
mycophenolate mofetil hcl SOLR 500mg	1B	\$0 copay through Oscar Virtual Care
mycophenolate sodium TBEC 180mg, 360mg	3	
PROGRAF SOLN 5mg/ml	3	
SANDIMMUNE SOLN 100mg/ml	3	
sirolimus SOLN 1mg/ml; TABS .5mg, 1mg, 2mg	3	
tacrolimus CAPS 1mg, 5mg	3	
tacrolimus CAPS .5mg	1B	\$0 copay through Oscar Virtual Care
VACCINES		
ACTHIB INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
ADACEL INJ	0	
AFLURIA QUAD INJ 2020-21	0	
BEXSERO INJ	0	
BOOSTRIX INJ	0	
DAPTACEL INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
DIP/TET PED INJ 25-5LFU	0	\$0 copay for members age 18 and younger, otherwise not covered
ENGERIX-B INJ 10mcg/0.5ml, 20mcg/ml; SUSP 10mcg/0.5ml, 20mcg/ml	0	
FLUAD INJ 2020-21	0	
FLUAD QUADRIVALENT INFLUE PRSY .5ml	0	
FLUARIX QUAD INJ 2020-21	0	
FLUBLOK QUAD INJ 2020-21	0	

Drug Name	Drug Tier	Requirements/Limits
FLUCLVX QUAD INJ 2020-21	0	
FLULAVAL QUA INJ 2019-20	0	
FLULAVAL QUA INJ 2020-21	0	
FLUMIST QUAD SUS 2020-21	0	
FLUZONE HD INJ PF 19-20	0	
FLUZONE QUAD INJ 2019-20	0	
FLUZONE QUAD INJ 2020-21	0	
GARDASIL 9 INJ	0	
HAVRIX SUSP 720elu/0.5ml, 1440elu/ml	0	
HEPLISAV-B SOLN 20mcg/0.5ml; SOSY 20mcg/0.5ml	0	
HIBERIX SOLR 10mcg	0	\$0 copay for members age 18 and younger, otherwise not covered
INFANRIX INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
IPOL INJ INACTIVE	0	\$0 copay for members age 18 and younger, otherwise not covered
KINRIX INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
M-M-R II INJ	0	
MENACTRA INJ	0	
MENVEO INJ	0	
PEDIARIX INJ 0.5ML	0	\$0 copay for members age 18 and younger, otherwise not covered
PEDVAX HIB SUSP 7.5mcg/0.5ml	0	\$0 copay for members age 18 and younger, otherwise not covered
PENTACEL INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
PNEUMOVAX 23/1 DOSE INJ 25mcg/0.5ml	0	
PREVNAR 13 INJ	0	
PROQUAD INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml	0	
ROTARIX SUS	0	\$0 copay for members age 18 and younger, otherwise not covered

Drug Name	Drug Tier	Requirements/Limits
ROTATEQ SOL	0	\$0 copay for members age 18 and younger, otherwise not covered
SHINGRIX SUSR 50mcg/0.5ml	0	\$0 copay for members age 19 and older, otherwise not covered
TDVAX INJ 2-2 LF	0	\$0 copay for members age 19 and older, otherwise not covered
TENIVAC INJ 5-2LF	0	\$0 copay for members age 19 and older, otherwise not covered
TRUMENBA INJ	0	
TWINRIX INJ	0	\$0 copay for members age 19 and older, otherwise not covered
VAQTA SUSP 25unit/0.5ml, 50unit/ml	0	
VARIVAX INJ 1350pfu/0.5ml	0	
ZOSTAVAX SUSR 19400unt/0.65ml	0	\$0 copay for members age 19 and older, otherwise not covered

MEDICAL DEVICES

CONTRACEPTIVES

CAYA DPR	0	QL (1 / 300 days)
FC2 FEMALE MIS CONDOM	0	OTC
FEMCAP MIS 22MM	0	QL (1 / 300 days)
FEMCAP MIS 26MM	0	QL (1 / 300 days)
FEMCAP MIS 30MM	0	QL (1 / 300 days)
OMNIFLEX DPR	0	QL (1 / 300 days)
WIDE-SEAL SILICONE DIAPHR DPRH 2%	0	QL (1 / 300 days)

DIABETIC SUPPLIES

ACCU-CHEK BLOOD GLUCOSE TEST KITS	2	OTC
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	2	QL (204 Test Strips / 25 days), OTC
ALCOH-WIPE MIS 12"X12"	2	
ALCOHOL PREP WIPES AND SWABS	2	OTC
BLOOD GLUCOSE CALIBRATION SOLUTION	2	OTC
GLUCOSE URINE TEST STRIPS	2	OTC
INSULIN PEN NEEDLES	2	OTC
INSULIN PEN NEEDLES/SYRINGES	2	OTC
KETONE URINE TEST STRIPS	2	OTC
LANCETS	2	OTC
LANCING DEVICE	2	OTC
MISC LANCETS	2	OTC
SHARPS CONTAINER	2	OTC
URINE GLUCOSE MONITORING SUPPLIES	2	OTC

Drug Name	Drug Tier	Requirements/Limits
URINE TEST STRIPS	2	OTC

MISCELLANEOUS

ADULT RESPIRATORY MASK	2	
ADULT RESPIRATORY MASK	2	OTC
HUMATROPEN MIS FOR 6MG	2	OTC
HUMATROPEN MIS FOR 12MG	2	OTC
HUMATROPEN MIS FOR 24MG	2	OTC
PEDIATRIC RESPIRATORY MASK	2	
PEDIATRIC RESPIRATORY MASK	2	OTC

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTES

FLUORABON SOLN .55mg/0.6ml	0	\$0 applies for ages 5 and under, otherwise not covered
<i>fluoritab</i> CHEW 1mg	1B	\$0 copay through Oscar Virtual Care
<i>fluoritab</i> CHEW .25mg, .5mg; SOLN .125mg/drop	0	\$0 applies for ages 5 and under, otherwise not covered
<i>flura-drops</i> SOLN .25mg/drop	0	\$0 applies for ages 5 and under, otherwise not covered
<i>k-effervescent</i> TBEF 25meq	1B	\$0 copay through Oscar Virtual Care
<i>klor-con 8</i> TBCR 8meq	1B	\$0 copay through Oscar Virtual Care
<i>klor-con 10</i> TBCR 10meq	1B	\$0 copay through Oscar Virtual Care
<i>klor-con m15</i> TBCR 15meq	1B	\$0 copay through Oscar Virtual Care
<i>klor-con m20</i> TBCR 20meq	1B	\$0 copay through Oscar Virtual Care
<i>ludent</i> CHEW 1mg	1B	\$0 copay through Oscar Virtual Care
<i>ludent</i> CHEW .25mg, .5mg	0	\$0 applies for ages 5 and under, otherwise not covered
<i>magnesium sulfate</i> SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%	1B	\$0 copay through Oscar Virtual Care
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>nafrinse</i> CHEW 2.2mg	1B	\$0 copay through Oscar Virtual Care
<i>nafrinse drops</i> SOLN .125mg/drop	0	\$0 applies for ages 5 and under, otherwise not covered

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride</i> CPCR 8meq, 10meq; TBCR 8meq, 10meq, 20meq	1B	\$0 copay through Oscar Virtual Care
<i>potassium chloride</i> SOLN 10%, 20%	1B	PA; \$0 copay through Oscar Virtual Care
<i>potassium chloride microencapsulated crystals er</i> TBCR 10meq, 20meq	1B	\$0 copay through Oscar Virtual Care
<i>sodium chloride</i> SOLN 2.5meq/ml	1B	\$0 copay through Oscar Virtual Care
<i>sodium chloride flush</i> SOLN .9%	1B	\$0 copay through Oscar Virtual Care
<i>sodium fluoride</i> CHEW 1mg; TABS 1mg	1B	\$0 copay through Oscar Virtual Care
<i>sodium fluoride</i> CHEW .25mg, .5mg; SOLN .5mg/ml; TABS .5mg	0	\$0 applies for ages 5 and under, otherwise not covered

IV REPLACEMENT SOLUTIONS

<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	1B	\$0 copay through Oscar Virtual Care
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	1B	\$0 copay through Oscar Virtual Care
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	1B	\$0 copay through Oscar Virtual Care
<i>potassium chloride</i> SOLN 2meq/ml	1B	\$0 copay through Oscar Virtual Care
<i>sodium chloride</i> SOLN .45%, .9%, 3%, 5%	1B	\$0 copay through Oscar Virtual Care

VITAMINS

<i>calcitriol</i> CAPS .25mcg, .5mcg; SOLN 1mcg/ml	1B	\$0 copay through Oscar Virtual Care
<i>cholecalciferol</i> CAPS 50000unit	1B	OTC; \$0 copay through Oscar Virtual Care
CITRANATAL CAP HARMONY	2	
CITRANATAL CAP MEDLEY	2	
CITRANATAL MIS	2	
CITRANATAL MIS 90 DHA	2	
CITRANATAL MIS B-CALM	2	
CITRANATAL PAK ASSURE	2	
CITRANATAL PAK DHA	2	
CITRANATAL TAB BLOOM	2	
CITRANATAL TAB RX	2	
<i>cyanocobalamin</i> SOLN 1000mcg/ml	1B	\$0 copay through Oscar Virtual Care
<i>doxercalciferol</i> CAPS .5mcg, 1mcg, 2.5mcg; SOLN 4mcg/2ml	1B	\$0 copay through Oscar Virtual Care
<i>elite-ob</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>ergocalciferol</i> CAPS 50000unit	1B	\$0 copay through Oscar Virtual Care
<i>folic acid</i> CAPS 800mcg	0	QL (100 caps / 30 days), OTC; \$0 copay for women ages 55 and under, otherwise not covered
<i>folic acid</i> TABS 1mg	1B	\$0 copay through Oscar Virtual Care
<i>folic acid</i> TABS 400mcg, 800mcg	0	QL (100 tabs / 30 days), OTC; \$0 copay for women ages 55 and under, otherwise not covered
<i>multi-vit/fluoride</i>	1B	\$0 copay through Oscar Virtual Care
<i>multi-vit/iron/fluoride</i>	1B	\$0 copay through Oscar Virtual Care
<i>multi-vitamin/fluoride/ir</i>	1B	\$0 copay through Oscar Virtual Care
<i>multivitamin with fluorid</i>	1B	\$0 copay through Oscar Virtual Care
<i>mvc-fluoride</i>	1B	\$0 copay through Oscar Virtual Care
<i>niva-fol</i>	1B	\$0 copay through Oscar Virtual Care
<i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg; SOLN 2mcg/ml, 5mcg/ml	1B	\$0 copay through Oscar Virtual Care
<i>phytonadione</i> TABS 5mg	1B	\$0 copay through Oscar Virtual Care
<i>prenatabs rx</i>	1B	\$0 copay through Oscar Virtual Care
<i>pyridoxine hcl</i> TABS 25mg, 50mg	1B	OTC; \$0 copay through Oscar Virtual Care
<i>tri-vit/fluoride</i>	1B	\$0 copay through Oscar Virtual Care
<i>tri-vit/fluoride/iron</i>	1B	\$0 copay through Oscar Virtual Care
<i>vitamins a/c/d/fluoride</i>	1B	\$0 copay through Oscar Virtual Care

OPHTHALMIC

ANTI-INFECTIVE/ANTI-INFLAMMATORY

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1B	\$0 copay through Oscar Virtual Care
BLEPHAMIDE OIN S.O.P.	2	
BLEPHAMIDE SUS OP	2	

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1B	\$0 copay through Oscar Virtual Care
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1B	\$0 copay through Oscar Virtual Care
<i>neomycin-polymyxin-hc ophth susp</i>	1B	\$0 copay through Oscar Virtual Care
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1B	\$0 copay through Oscar Virtual Care
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	2	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1B	\$0 copay through Oscar Virtual Care
ANTI-INFECTIVES		
AZASITE SOLN 1%	2	
<i>bacitracin (ophthalmic) OINT 500unit/gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>bacitracin-polymyxin b ophth oint</i>	1B	\$0 copay through Oscar Virtual Care
BESIVANCE SUSP .6%	3	
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	1A	\$0 copay through Oscar Virtual Care
<i>erythromycin (ophth) OINT 5mg/gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>gatifloxacin (ophth) SOLN .5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>gentak OINT .3%</i>	1B	\$0 copay through Oscar Virtual Care
<i>gentamicin sulfate (ophth) SOLN .3%</i>	1A	\$0 copay through Oscar Virtual Care
<i>levofloxacin (ophth) SOLN .5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	1B	\$0 copay through Oscar Virtual Care
NATACYN SUSP 5%	2	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>ofloxacin (ophth) SOLN .3%</i>	1B	\$0 copay through Oscar Virtual Care
<i>polycin</i>	1B	\$0 copay through Oscar Virtual Care
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1A	\$0 copay through Oscar Virtual Care
<i>sulfacetamide sodium (ophth) OINT 10%; SOLN 10%</i>	1B	\$0 copay through Oscar Virtual Care
<i>tobramycin (ophth) SOLN .3%</i>	1A	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>trifluridine</i> SOLN 1%	1B	\$0 copay through Oscar Virtual Care
ZIRGAN GEL .15%	3	
ANTI-INFLAMMATORIES		
ACUVAIL SOLN .45%	2	
<i>bromfenac sodium (ophth)</i> SOLN .09%	1B	\$0 copay through Oscar Virtual Care
<i>dexamethasone sodium phosphate (ophth)</i> SOLN .1%	1B	\$0 copay through Oscar Virtual Care
<i>diclofenac sodium (ophth)</i> SOLN .1%	1B	\$0 copay through Oscar Virtual Care
DUREZOL EMUL .05%	2	ST; PA**
<i>flurbiprofen sodium</i> SOLN .03%	1B	\$0 copay through Oscar Virtual Care
FML OINT .1%	2	
FML FORTE SUSP .25%	2	
<i>ketorolac tromethamine (ophth)</i> SOLN .4%, .5%	1B	\$0 copay through Oscar Virtual Care
<i>loteprednol etabonate</i> SUSP .5%	1B	\$0 copay through Oscar Virtual Care
MAXIDEX SUSP .1%	2	
NEVANAC SUSP .1%	2	ST; PA**
PRED MILD SUSP .12%	2	
<i>prednisolone acetate (ophth)</i> SUSP 1%	1B	\$0 copay through Oscar Virtual Care
PREDNISOLONE SODIUM PHOSP SOLN 1%	2	
ANTIALLERGICS		
ALOCRI SOLN 2%	3	
ALOMIDE SOLN .1%	3	
<i>azelastine hcl (ophth)</i> SOLN .05%	1B	\$0 copay through Oscar Virtual Care
BEPREVE SOLN 1.5%	3	
<i>cromolyn sodium (ophth)</i> SOLN 4%	1B	\$0 copay through Oscar Virtual Care
EMADINE SOLN .05%	3	
<i>epinastine hcl (ophth)</i> SOLN .05%	1B	\$0 copay through Oscar Virtual Care
LASTACAFT SOLN .25%	2	
<i>olopatadine hcl</i> SOLN .1%, .2%	1B	PA; \$0 copay through Oscar Virtual Care
PAZEO SOLN .7%	2	
ANTIGLAUCOMA		
ALPHAGAN P SOLN .1%	3	
<i>apraclonidine hcl</i> SOLN .5%	1B	\$0 copay through Oscar Virtual Care
AZOPT SUSP 1%	2	

Drug Name	Drug Tier	Requirements/Limits
<i>betaxolol hcl (ophth) SOLN .5%</i>	1B	\$0 copay through Oscar Virtual Care
BETIMOL SOLN .25%, .5%	3	
BETOPTIC-S SUSP .25%	2	
<i>bimatoprost SOLN .03%</i>	1B	\$0 copay through Oscar Virtual Care
<i>brimonidine tartrate SOLN .2%</i>	1A	\$0 copay through Oscar Virtual Care
<i>brimonidine tartrate SOLN .15%</i>	2	
<i>carteolol hcl (ophth) SOLN 1%</i>	1B	\$0 copay through Oscar Virtual Care
<i>dorzolamide hcl SOLN 2%</i>	1B	\$0 copay through Oscar Virtual Care
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
IOPIDINE SOLN 1%	3	
<i>latanoprost SOLN .005%</i>	1A	\$0 copay through Oscar Virtual Care
<i>levobunolol hcl SOLN .5%</i>	1B	\$0 copay through Oscar Virtual Care
LUMIGAN SOLN .01%	2	ST; PA**
<i>metipranolol SOLN .3%</i>	1B	\$0 copay through Oscar Virtual Care
PHOSPHOLINE IODIDE SOLR .125%	3	
<i>pilocarpine hcl SOLN 1%</i>	1B	\$0 copay through Oscar Virtual Care
SIMBRINZA SUS 1-0.2%	2	
<i>timolol maleate (ophth) SOLG .25%, .5%; SOLN .5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>timolol maleate (ophth) SOLN .25%, .5%</i>	1A	\$0 copay through Oscar Virtual Care
<i>travoprost SOLN .004%</i>	1B	\$0 copay through Oscar Virtual Care
ZIOPTAN SOLN .015mg/ml	3	ST; PA**
MISCELLANEOUS		
<i>atropine sulfate SOLN 1%</i>	3	
CYSTARAN SOLN .44%	5	PA, QL (4 bottles / 28 days)
LACRISERT INST 5mg	3	
<i>phenylephrine hcl (mydriatic) SOLN 2.5%, 10%</i>	1B	\$0 copay through Oscar Virtual Care
<i>proparacaine hcl SOLN .5%</i>	1B	\$0 copay through Oscar Virtual Care
RESTASIS EMUL .05%	2	PA
<i>tropicamide SOLN .5%, 1%</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
OTHER		
IRRIGATION SOLUTIONS		
<i>physiolyte</i>	1B	\$0 copay through Oscar Virtual Care
<i>physiosol irrigation</i>	1B	\$0 copay through Oscar Virtual Care
<i>tis-u-sol</i>	1B	\$0 copay through Oscar Virtual Care
RESPIRATORY		
ANAPHYLAXIS TREATMENT AGENTS		
<i>epinephrine (anaphylaxis) SOAJ</i> .15mg/0.15ml, .15mg/0.3ml, .3mg/0.3ml	1B	QL (4 auto-injectors / 25 days); \$0 copay through Oscar Virtual Care
EPIPEN 2-PAK SOAJ .3mg/0.3ml	2	QL (4 auto-injectors / 25 days)
EPIPEN-JR 2-PAK SOAJ .15mg/0.3ml	2	QL (4 auto-injectors / 25 days)
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPTA AER 62.5-25	2	QL (1 package / 25 days)
BEVESPI AER 9-4.8MCG	2	QL (1 package / 25 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1B	QL (6 boxes / 25 days); \$0 copay through Oscar Virtual Care
TRELEGY ELLIPTA 100-62.5-25 MCG/INH	2	QL (1 package / 25 days)
TRELEGY ELLIPTA 200-62.5-25 MCG/INH	2	QL (1 package / 25 days)
ANTICHOLINERGICS		
INCRUSE ELLIPTA AEPB 62.5mcg/inh	2	QL (1 package / 25 days)
<i>ipratropium bromide SOLN .02%</i>	1B	QL (5 boxes / 25 days); \$0 copay through Oscar Virtual Care
<i>ipratropium bromide (nasal) SOLN .03%, .06%</i>	1B	\$0 copay through Oscar Virtual Care
SPIRIVA HANDIHALER CAPS 18mcg	2	QL (1 package / 25 days)
SPIRIVA RESPIMAT AERS 1.25mcg/act, 2.5mcg/act	2	QL (1 package / 25 days)
ANTI-HISTAMINES		
<i>azelastine hcl SOLN .1%, .15%</i>	1B	QL (2 bottles / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>brompheniramine tannate</i> CHEW 12mg	1B	\$0 copay through Oscar Virtual Care
<i>carbinoxamine maleate</i> SOLN 4mg/5ml; TABS 4mg	1B	\$0 copay through Oscar Virtual Care
CLARINEX SYRP .5mg/ml	3	
<i>clemastine fumarate</i> TABS 2.68mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>cyproheptadine hcl</i> SYRP 2mg/5ml; TABS 4mg	1B	\$0 copay through Oscar Virtual Care
<i>desloratadine</i> TABS 5mg; TBDP 2.5mg, 5mg	1B	\$0 copay through Oscar Virtual Care
<i>diphenhydramine hcl</i> ELIX 12.5mg/5ml; SOLN 50mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>hydroxyzine hcl</i> SOLN 25mg/ml, 50mg/ml; SYRP 10mg/5ml	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>hydroxyzine hcl</i> TABS 10mg, 25mg, 50mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>hydroxyzine pamoate</i> CAPS 25mg, 50mg	1A	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>hydroxyzine pamoate</i> CAPS 100mg	1B	PA; High Risk Medications require PA for members age 70 and older; \$0*
<i>levocetirizine dihydrochloride</i> SOLN 2.5mg/5ml; TABS 5mg	1B	\$0 copay through Oscar Virtual Care
<i>olopatadine hcl (nasal)</i> SOLN .6%	1B	QL (1 container / 25 days); \$0 copay through Oscar Virtual Care
BETA AGONISTS		
<i>albuterol sulfate</i> AERS 108mcg/act	1B	QL (2 inhalers / 25 days); \$0 copay through Oscar Virtual Care
<i>albuterol sulfate</i> NEBU 2.5mg/0.5ml	1B	QL (60 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>albuterol sulfate</i> NEBU .083%, .63mg/3ml, 1.25mg/3ml	1B	QL (5 boxes / 25 days); \$0 copay through Oscar Virtual Care
<i>albuterol sulfate</i> SYRP 2mg/5ml; TABS 2mg, 4mg; TB12 4mg, 8mg	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>levalbuterol hcl</i> NEBU 1.25mg/0.5ml	1B	QL (45 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/3ml	1B	QL (300 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>levalbuterol tartrate</i> AERO 45mcg/act	1B	QL (2 inhalers / 25 days); \$0 copay through Oscar Virtual Care
<i>metaproterenol sulfate</i> SYRP 10mg/5ml; TABS 10mg, 20mg	1B	\$0 copay through Oscar Virtual Care
PERFOROMIST NEBU 20mcg/2ml	2	QL (2 boxes / 25 days)
STRIVERDI RESPIMAT AERS 2.5mcg/act	2	QL (1 package / 25 days)
<i>terbutaline sulfate</i> SOLN 1mg/ml; TABS 2.5mg, 5mg	1B	\$0 copay through Oscar Virtual Care

BIOLOGIC RESPONSE MODIFIERS

NUCALA SOAJ 100mg/ml; SOLR 100mg; SOSY 100mg/ml	4	PA, QL (3 injections / 28 days)
XOLAIR SOLR 150mg	4	PA, QL (6 vials / 28 days)
XOLAIR SOSY 75mg/0.5ml	4	PA, QL (2 syringes / 28 days)
XOLAIR SOSY 150mg/ml	4	PA, QL (4 syringes / 28 days)

COLD/COUGH

<i>benzonatate</i> CAPS 100mg, 200mg	1B	\$0 copay through Oscar Virtual Care
<i>cheratussin ac</i>	1B	OTC; \$0 copay through Oscar Virtual Care
<i>hydrocodone w/ homatropine syrup</i> 5-1.5 mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>hydrocodone w/ homatropine tab</i> 5-1.5 mg	1B	\$0 copay through Oscar Virtual Care
<i>hydromet</i>	1B	\$0 copay through Oscar Virtual Care
NORTUSS-EX LIQ 200-20/5	2	
<i>promethazine & phenylephrine syrup</i> 6.25- 5 mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>promethazine vc/codeine</i>	1B	\$0 copay through Oscar Virtual Care
<i>promethazine w/ codeine syrup</i> 6.25-10 mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>promethazine-dm syrup</i> 6.25-15 mg/5ml	1B	\$0 copay through Oscar Virtual Care
<i>pseudoephed-bromphen-dm syrup</i> 30-2-10 mg/5ml	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>tussigon</i>	1B	\$0 copay through Oscar Virtual Care
TUZISTRA XR SUS	3	
VITUZ SOL 5-4MG	3	
LEUKOTRIENE MODIFIERS		
<i>zileuton</i> TB12 600mg	3	
LEUKOTRIENE RECEPTOR ANTAGONISTS		
<i>montelukast sodium</i> CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	1B	\$0 copay through Oscar Virtual Care
<i>zafirlukast</i> TABS 10mg, 20mg	1B	\$0 copay through Oscar Virtual Care
MAST CELL STABILIZERS		
<i>cromolyn sodium</i> NEBU 20mg/2ml	1B	QL (2 boxes / 25 days); \$0 copay through Oscar Virtual Care
MISCELLANEOUS		
<i>acetylcysteine</i> SOLN 10%, 20%	1B	\$0 copay through Oscar Virtual Care
DALIRESP TABS 250mcg, 500mcg	3	PA
ESBRIET CAPS 267mg	4	PA, QL (270 caps / 30 days)
ESBRIET TABS 267mg	4	PA, QL (270 tabs / 30 days)
ESBRIET TABS 801mg	4	PA, QL (90 tabs / 30 days)
KALYDECO PACK 25mg, 50mg, 75mg	4	PA, QL (56 packets / 28 days)
KALYDECO TABS 150mg	4	PA, QL (56 tabs / 28 days); carton consists of 56 tablets
KALYDECO TABS 150mg	4	PA, QL (60 tabs / 30 days); packet consists of 60 tablets
ORKAMBI GRA 100-125	4	PA, QL (56 packets / 28 days)
ORKAMBI GRA 150-188	4	PA, QL (56 packets / 28 days)
ORKAMBI TAB 100-125	4	PA, QL (112 tabs / 28 days)
ORKAMBI TAB 200-125	4	PA, QL (112 tabs / 28 days)
PROLASTIN-C SOLN 1000mg/20ml; SOLR 1000mg	4	PA
<i>sodium chloride (inhalant)</i> NEBU .9%, 3%, 7%, 10%	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
SYMDEKO TAB 50-75MG	4	PA, QL (56 tabs / 28 days)
SYMDEKO TAB 100-150	4	PA, QL (56 tabs / 28 days)
TRIKAFTA TAB	4	PA, QL (84 tabs / 28 days)

NASAL STEROIDS

<i>flunisolide (nasal)</i> SOLN .025%	1B	QL (3 containers / 25 days); \$0 copay through Oscar Virtual Care
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	1A	QL (1 container / 25 days); \$0 copay through Oscar Virtual Care
OMNARIS SUSP 50mcg/act	3	ST, QL (1 package / 25 days); PA**
<i>triamcinolone acetonide (nasal)</i> AERO 55mcg/act	1A	QL (1 bottle / 25 days), OTC; \$0 copay through Oscar Virtual Care

STEROID INHALANTS

ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	2	QL (1 package / 25 days)
<i>budesonide (inhalation)</i> SUSP 1mg/2ml	1B	QL (1 box / 25 days); \$0 copay through Oscar Virtual Care
<i>budesonide (inhalation)</i> SUSP .5mg/2ml	1B	QL (2 boxes / 25 days); \$0 copay through Oscar Virtual Care
<i>budesonide (inhalation)</i> SUSP .25mg/2ml	1B	QL (3 boxes / 25 days); \$0 copay through Oscar Virtual Care
QVAR REDIHALER AERB 40mcg/act, 80mcg/act	2	QL (2 packages / 25 days)

STEROID/BETA-AGONIST COMBINATIONS

ADVAIR DISKU AER 100/50	1B	QL (1 package / 25 days); \$0 copay through Oscar Virtual Care
ADVAIR DISKU AER 250/50	1B	QL (1 package / 25 days); \$0 copay through Oscar Virtual Care
ADVAIR DISKU AER 500/50	1B	QL (1 package / 25 days); \$0 copay through Oscar Virtual Care
ADVAIR HFA AER 45/21	2	QL (1 package / 25 days)
ADVAIR HFA AER 115/21	2	QL (1 package / 25 days)

Drug Name	Drug Tier	Requirements/Limits
ADVAIR HFA AER 230/21	2	QL (1 package / 25 days)
BREO ELLIPTA INH 100-25	2	QL (1 package / 25 days)
BREO ELLIPTA INH 200-25	2	QL (1 package / 25 days)
SYMBICORT AER 80-4.5	2	QL (1 package / 25 days)
SYMBICORT AER 160-4.5	2	QL (1 package / 25 days)

XANTHINES

<i>aminophylline</i> SOLN 25mg/ml	1B	\$0 copay through Oscar Virtual Care
ELIXOPHYLLIN ELIX 80mg/15ml	3	
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	3	
<i>theochron</i> TB12 100mg, 200mg, 300mg	1B	\$0 copay through Oscar Virtual Care
<i>theophylline</i> SOLN 80mg/15ml; TB12 450mg; TB24 400mg, 600mg	1B	\$0 copay through Oscar Virtual Care

TOPICAL

DERMATOLOGY, ACNE

<i>adapalene</i> CREA .1%; GEL .1%, .3%	2	PA; PA applies for members age 35 and older
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>avita</i> CREA .025%; GEL .025%	2	PA; PA applies for members age 35 and older
BENZIQU GEL 5.25%	2	
BENZIQU LS GEL 2.75%	2	
<i>benziq wash</i> LIQD 5.25%	1B	\$0 copay through Oscar Virtual Care
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1B	\$0 copay through Oscar Virtual Care
<i>bp wash</i> LIQD 2.5%	1B	\$0 copay through Oscar Virtual Care
<i>clindamycin phosphate (topical)</i> FOAM 1%; SWAB 1%	1B	\$0 copay through Oscar Virtual Care
<i>clindamycin phosphate (topical)</i> GEL 1%	1B	QL (75g / 25 days); \$0 copay through Oscar Virtual Care
<i>clindamycin phosphate (topical)</i> LOTN 1%; SOLN 1%	1B	QL (60mL / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>ery</i> PADS 2%	1B	\$0 copay through Oscar Virtual Care
<i>erythromycin (acne aid)</i> GEL 2%	1B	QL (60g / 25 days); \$0 copay through Oscar Virtual Care
<i>erythromycin (acne aid)</i> PADS 2%	1B	\$0 copay through Oscar Virtual Care
<i>erythromycin (acne aid)</i> SOLN 2%	1B	QL (60mL / 25 days); \$0 copay through Oscar Virtual Care
<i>isotretinoin</i> CAPS 10mg, 20mg, 30mg, 40mg	1B	PA; \$0 copay through Oscar Virtual Care
<i>sulfacetamide sodium (acne)</i> LOTN 10%	1B	\$0 copay through Oscar Virtual Care
<i>tretinoin</i> CREA .025%, .05%, .1%; GEL .01%, .025%, .05%	2	PA; PA applies for members age 35 and older
<i>tretinoin microsphere</i> GEL .04%, .1%	2	PA; PA applies for members age 35 and older

DERMATOLOGY, ACTINIC KERATOSIS

FLUOROPLEX CREA 1%	3	
<i>fluorouracil (topical)</i> CREA .5%, 5%; SOLN 2%, 5%	1B	\$0 copay through Oscar Virtual Care
<i>imiquimod</i> CREA 5%	1B	\$0 copay through Oscar Virtual Care
PICATO GEL .015%, .05%	3	

DERMATOLOGY, ANTIBIOTICS

BACTROBAN NASAL OINT 2%	3	
<i>gentamicin sulfate (topical)</i> CREA .1%; OINT .1%	1B	\$0 copay through Oscar Virtual Care
IV PREP WIPE PAD	2	OTC
<i>mupirocin</i> OINT 2%	1B	QL (30g / 25 days); \$0 copay through Oscar Virtual Care
<i>silver sulfadiazine</i> CREA 1%	1B	\$0 copay through Oscar Virtual Care
<i>ssd</i> CREA 1%	1B	\$0 copay through Oscar Virtual Care
SULFAMYLON CREA 85mg/gm	3	

DERMATOLOGY, ANTIFUNGALS

<i>ciclopirox</i> GEL .77%	1B	QL (120g / 25 days); \$0 copay through Oscar Virtual Care
<i>ciclopirox</i> SHAM 1%	1B	QL (120mL / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>ciclopirox SOLN 8%</i>	1B	\$0 copay through Oscar Virtual Care
<i>ciclopirox olamine CREA .77%</i>	1B	QL (120g / 25 days); \$0 copay through Oscar Virtual Care
<i>ciclopirox olamine SUSP .77%</i>	1B	QL (120mL / 25 days); \$0 copay through Oscar Virtual Care
<i>clotrimazole (topical) CREA 1%</i>	1A	QL (120g / 25 days); \$0 copay through Oscar Virtual Care
<i>clotrimazole (topical) SOLN 1%</i>	1B	QL (120mL / 25 days); \$0 copay through Oscar Virtual Care
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1B	QL (60g / 25 days); \$0 copay through Oscar Virtual Care
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	2	QL (60mL / 25 days)
<i>econazole nitrate CREA 1%</i>	1B	QL (60g / 25 days); \$0 copay through Oscar Virtual Care
ERTACZO CREA 2%	3	QL (60g / 25 days)
EXELDERM SOLN 1%	3	ST, QL (60mL / 21 days); PA**
<i>ketoconazole (topical) CREA 2%</i>	1B	QL (120g / 25 days); \$0 copay through Oscar Virtual Care
MENTAX CREA 1%	3	QL (60g / 25 days)
<i>naftifine hcl CREA 1%, 2%</i>	1B	QL (60g / 25 days); \$0 copay through Oscar Virtual Care
<i>nyamyc POWD 100000unit/gm</i>	1B	QL (120g / 25 days); \$0 copay through Oscar Virtual Care
<i>nystatin (topical) CREA 100000unit/gm; OINT 100000unit/gm; POWD 100000unit/gm</i>	1B	QL (120g / 25 days); \$0 copay through Oscar Virtual Care
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1B	QL (60g / 25 days); \$0 copay through Oscar Virtual Care
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1B	QL (60g / 25 days); \$0 copay through Oscar Virtual Care
<i>nystop POWD 100000unit/gm</i>	1B	QL (120g / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>sulconazole nitrate</i> CREA 1%	1B	ST, QL (60g / 21 days); PA**
DERMATOLOGY, ANTIPRURITIC		
<i>doxepin hcl (antipruritic)</i> CREA 5%	3	ST, QL (90 grams / 25 days); PA**
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	1B	\$0 copay through Oscar Virtual Care
<i>calcipotriene</i> SOLN .005%	1B	\$0 copay through Oscar Virtual Care
<i>calcitriol (topical)</i> OINT 3mcg/gm	3	
COSENTYX SOSY 150mg/ml	4	PA, QL (1 box / 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX SENSOREADY PEN SOAJ 150mg/ml	4	PA, QL (1 box / 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
<i>methoxsalen rapid</i> CAPS 10mg	1B	\$0 copay through Oscar Virtual Care
<i>tazarotene</i> CREA .1%	1B	PA; \$0 copay through Oscar Virtual Care
TAZORAC CREA .05%; GEL .05%, .1%	2	PA
DERMATOLOGY, ANTISEBORRHEICS		
<i>ketoconazole (topical)</i> SHAM 2%	1B	\$0 copay through Oscar Virtual Care
<i>selenium sulfide</i> LOTN 2.5%	1B	\$0 copay through Oscar Virtual Care
DERMATOLOGY, CORTICOSTEROIDS		
<i>ala-cort</i> CREA 1%	1A	QL (300g / 25 days); \$0 copay through Oscar Virtual Care
<i>alclometasone dipropionate</i> CREA .05%; OINT .05%	1B	QL (300g / 25 days); \$0 copay through Oscar Virtual Care
<i>amcinonide</i> LOTN .1%	1B	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
AMCINONIDE OINT .1%	2	QL (240g / 25 days)
<i>betamethasone dipropionate (topical)</i> CREA .05%; OINT .05%	1A	QL (240g / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate (topical)</i> LOTN .05%	1A	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone dipropionate augmented</i> CREA .05%; OINT .05%	1A	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone dipropionate augmented</i> GEL .05%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone dipropionate augmented</i> LOTN .05%	1A	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone valerate</i> CREA .1%; OINT .1%	1A	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone valerate</i> LOTN .1%	1A	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>calcipotriene-betamethasone dipropionate</i> oint 0.005-0.064%	3	
<i>clobetasol propionate</i> CREA .05%; FOAM .05%; GEL .05%; OINT .05%	2	QL (240g / 25 days)
<i>clobetasol propionate</i> LIQD .05%; SHAM .05%	2	QL (300mL / 25 days)
<i>clobetasol propionate</i> LOTN .05%; SOLN .05%	2	QL (240mL / 25 days)
<i>clocortolone pivalate</i> CREA .1%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>desonide</i> CREA .05%; OINT .05%	2	QL (300g / 25 days)
<i>desonide</i> LOTN .05%	2	QL (300mL / 25 days)
<i>desoximetasone</i> CREA .25%; OINT .25%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>fluocinolone acetonide</i> CREA .01%, .025%; OINT .025%	1B	QL (300g / 25 days); \$0 copay through Oscar Virtual Care
<i>fluocinolone acetonide</i> OIL .01%; SOLN .01%	1B	QL (300mL / 25 days); \$0 copay through Oscar Virtual Care
<i>fluocinonide</i> CREA .05%; GEL .05%; OINT .05%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>fluocinonide</i> SOLN .05%	1B	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone propionate</i> CREA .05%; OINT .005%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>fluticasone propionate</i> LOTN .05%	1B	QL (300mL / 25 days); \$0 copay through Oscar Virtual Care
<i>halobetasol propionate</i> CREA .05%; OINT .05%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>hydrocortisone (topical)</i> CREA 1%, 2.5%; OINT 2.5%	1A	QL (300g / 25 days); \$0 copay through Oscar Virtual Care
<i>hydrocortisone (topical)</i> LOTN 2.5%	1A	QL (300mL / 25 days); \$0 copay through Oscar Virtual Care
<i>hydrocortisone butyrate</i> CREA .1%; OINT .1%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>hydrocortisone butyrate</i> SOLN .1%	1B	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>hydrocortisone valerate</i> CREA .2%; OINT .2%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>mometasone furoate</i> CREA .1%; OINT .1%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>mometasone furoate</i> SOLN .1%	1B	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>prednicarbate</i> CREA .1%; OINT .1%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>triamcinolone acetonide (topical)</i> CREA .025%, .1%, .5%; OINT .025%, .1%, .5%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>triamcinolone acetonide (topical)</i> LOTN .025%, .1%	1B	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>triderm</i> CREA .1%	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
DERMATOLOGY, LOCAL ANESTHETICS		
<i>lidocaine</i> PTCH 5%	2	PA, QL (90 patches / 25 days)
<i>lidocaine hcl</i> GEL 2%; PRSY 2%	1B	QL (60mL / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine hcl</i> SOLN 4%	1B	QL (50mL / 25 days); \$0 copay through Oscar Virtual Care
<i>lidocaine-prilocaine cream</i> 2.5-2.5%	1B	QL (30gm / 25 days); \$0 copay through Oscar Virtual Care
<i>lidocaine-prilocaine cream kit</i> 2.5-2.5%	1B	\$0 copay through Oscar Virtual Care
<i>pramox gel</i> GEL 1%	1B	\$0 copay through Oscar Virtual Care
SYNERA DIS 70-70MG	3	QL (2 patches / 25 days)
<i>7t lido gel</i> GEL 2%	1B	QL (30gm / 25 days); \$0 copay through Oscar Virtual Care

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

CONDYLOX GEL .5%	3	
DENAVIR CREA 1%	3	
<i>diclofenac sodium (topical)</i> GEL 1%	1B	QL (300g / 25 days); \$0 copay through Oscar Virtual Care
EUCRISA OINT 2%	2	PA, QL (60 grams / 25 days)
<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 10%, 12%	1B	\$0 copay through Oscar Virtual Care
<i>podofilox</i> SOLN .5%	1B	\$0 copay through Oscar Virtual Care
RECTIV OINT .4%	3	
<i>tacrolimus (topical)</i> OINT .03%, .1%	3	
TARGETIN GEL 1%	4	PA
VOLTAREN GEL 1%	1B	QL (300g / 25 days), OTC; \$0 copay through Oscar Virtual Care

DERMATOLOGY, ROSACEA

<i>azelaic acid</i> GEL 15%	1B	PA; \$0 copay through Oscar Virtual Care
FINACEA FOAM 15%	2	
<i>metronidazole (topical)</i> CREA .75%; GEL .75%	1B	\$0 copay through Oscar Virtual Care
<i>metronidazole (topical)</i> LOTN .75%	2	
MIRVASO GEL .33%	3	
<i>rosadan</i> CREA .75%	1B	\$0 copay through Oscar Virtual Care

DERMATOLOGY, SCABICIDES AND PEDICULIDES

<i>crotan</i> LOTN 10%	1B	\$0 copay through Oscar Virtual Care
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Drug Name	Drug Tier	Requirements/Limits
EURAX CREA 10%	3	
<i>lindane</i> SHAM 1%	1B	\$0 copay through Oscar Virtual Care
<i>malathion</i> LOTN .5%	1B	\$0 copay through Oscar Virtual Care
<i>permethrin</i> CREA 5%	1B	\$0 copay through Oscar Virtual Care
SKLICE LOTN .5%	3	PA
<i>spinosad</i> SUSP .9%	1B	\$0 copay through Oscar Virtual Care

DERMATOLOGY, WOUND CARE AGENTS

REGRANEX GEL .01%	3	PA, QL (30g / 25 days)
<i>sodium chloride (gu irrigant)</i> SOLN .9%	1B	\$0 copay through Oscar Virtual Care

MOUTH/THROAT/DENTAL AGENTS

<i>cevimeline hcl</i> CAPS 30mg	1B	\$0 copay through Oscar Virtual Care
<i>chlorhexidine gluconate (mouth-throat)</i> SOLN .12%	1A	\$0 copay through Oscar Virtual Care
<i>clotrimazole</i> TROC 10mg	1B	\$0 copay through Oscar Virtual Care
<i>lidocaine hcl (mouth-throat)</i> SOLN 2%, 4%	1B	\$0 copay through Oscar Virtual Care
<i>nystatin (mouth-throat)</i> SUSP 100000unit/ml	1B	\$0 copay through Oscar Virtual Care
<i>oralone dental paste</i> PSTE .1%	1B	\$0 copay through Oscar Virtual Care
ORAVIG TABS 50mg	3	QL (14 tabs / 25 days)
<i>periogard</i> SOLN .12%	1A	\$0 copay through Oscar Virtual Care
<i>pilocarpine hcl (oral)</i> TABS 5mg, 7.5mg	1B	\$0 copay through Oscar Virtual Care
<i>triamcinolone acetonide (mouth)</i> PSTE .1%	1B	\$0 copay through Oscar Virtual Care

OTIC

<i>acetic acid (otic)</i> SOLN 2%	1B	\$0 copay through Oscar Virtual Care
CIPRO HC SUS OTIC	3	
CIPRODEX SUS 0.3-0.1%	2	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	2	
COLY-MYCIN S SUS OTIC	3	
<i>fluocinolone acetonide (otic)</i> OIL .01%	1B	\$0 copay through Oscar Virtual Care
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-hc otic soln 1%</i>	1B	\$0 copay through Oscar Virtual Care
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1B	\$0 copay through Oscar Virtual Care
<i>ofloxacin (otic) SOLN .3%</i>	1B	\$0 copay through Oscar Virtual Care

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<i>amlodipine besylate-atorvastatin</i>		<i>amlodipine besylate-valsartan tab 5-</i>	
<i>calcium tab 10-20 mg</i>	40	<i>320 mg</i>	34
<i>amlodipine besylate-atorvastatin</i>		<i>amlodipine-valsartan-</i>	
<i>calcium tab 10-40 mg</i>	40	<i>hydrochlorothiazide tab 10-160-12.5</i>	
<i>amlodipine besylate-atorvastatin</i>		<i>mg</i>	34
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<i>amlodipine besylate-atorvastatin</i>		<i>hydrochlorothiazide tab 10-160-25</i>	
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<i>amlodipine besylate-atorvastatin</i>		<i>amlodipine-valsartan-</i>	
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<i>amlodipine besylate-atorvastatin</i>		<i>mg</i>	35
<i>calcium tab 2.5-40 mg</i>	40	<i>amlodipine-valsartan-</i>	
<i>amlodipine besylate-atorvastatin</i>		<i>hydrochlorothiazide tab 5-160-12.5</i>	
<i>calcium tab 5-10 mg</i>	40	<i>mg</i>	34
<i>amlodipine besylate-atorvastatin</i>		<i>amlodipine-valsartan-</i>	
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<i>amlodipine besylate-benazepril hcl cap</i>		<i>400-57 mg</i>	23
<i>10-40 mg</i>	32	<i>amoxicillin & k clavulanate for susp</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>200-28.5 mg/5ml</i>	23
<i>2.5-10 mg</i>	32	<i>amoxicillin & k clavulanate for susp</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>250-62.5 mg/5ml</i>	23
<i>5-10 mg</i>	32	<i>amoxicillin & k clavulanate for susp</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>400-57 mg/5ml</i>	23
<i>5-20 mg</i>	32	<i>amoxicillin & k clavulanate for susp</i>	
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<i>5-40 mg</i>	32	<i>amoxicillin & k clavulanate tab 250-125</i>	
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<i>medoxomil tab 10-20 mg</i>	34	<i>amoxicillin & k clavulanate tab 500-125</i>	
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<i>medoxomil tab 10-40 mg</i>	34	<i>amoxicillin & k clavulanate tab 875-125</i>	
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<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	23	<i>aspirin enteric coated ad</i>	11
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<i>ampicillin sodium</i>	23	<i>atenolol</i>	39
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B		<i>bio-statin</i>	14
<i>bacitracin (ophthalmic)</i>	89	BIO-STATIN	15
<i>bacitracin-polymyxin b ophth oint</i>	89	<i>bisoprolol & hydrochlorothiazide tab</i> 10-6.25 mg	38
<i>bacitracin-polymyxin-neomycin-hc</i> <i>ophth oint 1%</i>	88	<i>bisoprolol & hydrochlorothiazide tab</i> 2.5-6.25 mg	38
<i>baclofen</i>	58	<i>bisoprolol & hydrochlorothiazide tab 5-</i> 6.25 mg	38
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<i>betamethasone dipropionate</i> <i>augmented</i>	101	<i>buprenorphine hcl</i>	11
<i>betamethasone valerate</i>	101	<i>buprenorphine hcl-naloxone hcl sl film</i> 12-3 mg (base equiv)	2
BETASERON	57	<i>buprenorphine hcl-naloxone hcl sl film</i> 2-0.5 mg (base equiv)	2
<i>betaxolol hcl</i>	39	<i>buprenorphine hcl-naloxone hcl sl film</i> 4-1 mg (base equiv)	2
<i>betaxolol hcl (ophth)</i>	91	<i>buprenorphine hcl-naloxone hcl sl film</i> 8-2 mg (base equiv)	2
<i>bethanechol chloride</i>	77	<i>buprenorphine hcl-naloxone hcl sl tab</i> 2-0.5 mg (base equiv)	2
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<i>bupropion hcl (smoking deterrent)</i> ...	59
<i>bupirone hcl</i>	56
<i>busulfan</i>	25
<i>butalbital-acetaminophen-caffeine cap</i>	
50-300-40 mg	1
<i>butalbital-acetaminophen-caffeine cap</i>	
50-325-40 mg	1
<i>butalbital-acetaminophen-caffeine tab</i>	
50-325-40 mg	1
<i>butalbital-acetaminophen-caff w/ cod</i>	
<i>cap 50-300-40-30 mg</i>	3
<i>butalbital-aspirin-caffeine cap 50-325-</i>	
40 mg	1
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<i>calcitonin (salmon)</i>	69
<i>calcitriol</i>	87
<i>calcitriol (topical)</i>	100
<i>calcium acetate (phosphate binder)</i> ..	70
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<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 10-100 mg</i>	50
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 25-100 mg</i>	50
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 25-250 mg</i>	50
<i>carbidopa & levodopa tab 10-100 mg</i>	50
<i>carbidopa & levodopa tab 25-100 mg</i>	50
<i>carbidopa & levodopa tab 25-250 mg</i>	50
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mg	50
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mg	50
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<i>carbidopa-levodopa-entacapone tabs</i>	
18.75-75-200 mg.....	51
<i>carbidopa-levodopa-entacapone tabs</i>	
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<i>carbidopa-levodopa-entacapone tabs</i>	
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<i>carbidopa-levodopa-entacapone tabs</i>	
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<i>carbidopa-levodopa-entacapone tabs</i>	
50-200-200 mg.....	51
<i>carbinoxamine maleate</i>	93
<i>carboplatin</i>	31
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<i>carmustine</i>	25
<i>carteolol hcl (ophth)</i>	91
<i>cartia xt</i>	40
<i>carvedilol</i>	39
<i>carvedilol phosphate</i>	39
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<i>cefepime hcl</i>	20	<i>cinacalcet hcl</i>	63, 64
<i>cefixime</i>	20	CIPRO	21
<i>cefotaxime sodium</i>	20	CIPRODEX SUS 0.3-0.1%	104
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<i>cefoxitin sodium</i>	20	<i>ciprofloxacin 200 mg/100ml in d5w</i> ..	22
<i>cefpodoxime proxetil</i>	20	<i>ciprofloxacin 400 mg/200ml in d5w</i> ..	22
<i>cefprozil</i>	20	<i>ciprofloxacin-ciprofloxacin hcl tab er</i> 24hr 1000 mg(base eq)	22
<i>ceftazidime</i>	21	<i>ciprofloxacin-ciprofloxacin hcl tab er</i> 24hr 500 mg (base eq)	22
<i>ceftibuten</i>	21	<i>ciprofloxacin-dexamethasone otic susp</i> 0.3-0.1%	104
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<i>ceftriaxone sodium</i>	21	<i>ciprofloxacin hcl (ophth)</i>	89
<i>cefuroxime axetil</i>	21	CIPRO HC SUS OTIC	104
<i>cefuroxime sodium</i>	21	<i>cisplatin</i>	31
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<i>chlorhexidine gluconate (mouth-throat)</i>	104	<i>clemastine fumarate</i>	93
<i>chloroquine phosphate</i>	15	CLENPIQ SOL	74
<i>chlorothiazide</i>	41	CLEOCIN	77
<i>chlorothiazide sodium</i>	41	CLIMARA PRO DIS WEEKLY	67
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<i>chlorthalidone</i>	42	<i>clindamycin phosphate</i>	13
<i>chlorzoxazone</i>	58	<i>clindamycin phosphate (topical)</i>	97
<i>cholecalciferol</i>	87	<i>clindamycin phosphate vaginal</i>	77
<i>cholestyramine</i>	37	<i>clobazam</i>	45
<i>cholestyramine light</i>	37	<i>clobetasol propionate</i>	101
<i>choline fenofibrate</i>	37	<i>clocortolone pivalate</i>	101
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<i>ciclopirox</i>	98, 99	<i>clomipramine hcl</i>	56
<i>ciclopirox olamine</i>	99	<i>clonazepam</i>	45
<i>cidofovir</i>	19		
<i>cilostazol</i>	79		

<i>clonidine</i>	42	<i>cyclobenzaprine hcl</i>	58
<i>clonidine hcl</i>	42	<i>cyclophosphamide</i>	25
<i>clopidogrel bisulfate</i>	79	<i>cycloserine</i>	19
<i>clorazepate dipotassium</i>	45	CYCLOSET	61
<i>clotrimazole</i>	104	<i>cyclosporine</i>	83
<i>clotrimazole (topical)</i>	99	<i>cyclosporine modified (for</i> <i>microemulsion)</i>	83
<i>clotrimazole w/ betamethasone cream</i> <i>1-0.05%</i>	99	<i>cyproheptadine hcl</i>	93
<i>clotrimazole w/ betamethasone lotion</i> <i>1-0.05%</i>	99	CYSTADANE POW	67
<i>clozapine</i>	52	CYSTAGON	67
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<i>codeine sulfate</i>	3	<i>cytarabine</i>	26
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<i>colchicine</i>	1	<i>dacarbazine</i>	25
<i>colchicine w/ probenecid tab 0.5-500</i> <i>mg</i>	1	<i>dalfampridine</i>	57
<i>colestipol hcl</i>	37	DALIRESP	95
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CREON CAP 36000UNT	75	DEPO-ESTRADIOL	67
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<i>cromolyn sodium (mastocytosis)</i>	75	<i>desipramine hcl</i>	48
<i>cromolyn sodium (ophth)</i>	90	<i>desloratadine</i>	93
<i>crotan</i>	103	<i>desmopressin acetate</i>	71
<i>cryselle-28</i>	64	<i>desmopressin acetate spray</i>	71
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<i>cvs sleep-aid nighttime</i>	55	<i>desonide</i>	101
<i>cyanocobalamin</i>	87	<i>desoximetasone</i>	101
<i>cyclafem 1/35</i>	64	<i>desvenlafaxine succinate</i>	48
<i>cyclafem 7/7/7</i>	64	<i>dexamethasone</i>	69
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<i>dexmethylphenidate hcl</i>	53, 54	<i>donepezil hydrochloride</i>	47
<i>dexrazoxane hcl</i>	31	<i>doripenem</i>	13
<i>dextroamphetamine sulfate</i>	54	<i>dorzolamide hcl</i>	91
<i>diazepam</i>	45	<i>dorzolamide hcl-timolol maleate ophth</i> <i>soln 22.3-6.8 mg/ml</i>	91
<i>diazepam intensol</i>	45	DOVATO TAB 50-300MG	18
<i>diclofenac potassium</i>	1	<i>doxazosin mesylate</i>	34
<i>diclofenac sodium</i>	1	<i>doxepin hcl</i>	48
<i>diclofenac sodium (ophth)</i>	90	<i>doxepin hcl (antipruritic)</i>	100
<i>diclofenac sodium (topical)</i>	103	<i>doxepin hcl (sleep)</i>	55
<i>diclofenac w/ misoprostol tab delayed</i> <i>release 50-0.2 mg</i>	2	<i>doxercalciferol</i>	87
<i>diclofenac w/ misoprostol tab delayed</i> <i>release 75-0.2 mg</i>	2	<i>doxorubicin hcl</i>	25
<i>dicloxacillin sodium</i>	24	<i>doxorubicin hcl liposomal</i>	25
<i>dicyclomine hcl</i>	71	<i>doxy 100</i>	24
<i>didanosine</i>	16	<i>doxycycline (monohydrate)</i>	24
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<i>diflunisal</i>	11	<i>dronabinol</i>	72
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<i>digoxin</i>	41	<i>drospirenone-ethinyl estrad-</i> <i>levomefolate tab 3-0.03-0.451 mg</i> 64	64
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<i>diphenoxylate w/ atropine tab 2.5-</i> <i>0.025 mg</i>	75	<i>efavirenz</i>	16
<i>dipyridamole</i>	79	<i>efavirenz-lamivudine-tenofovir df tab</i> <i>400-300-300 mg</i>	18
<i>disopyramide phosphate</i>	36	<i>efavirenz-lamivudine-tenofovir df tab</i> <i>600-300-300 mg</i>	18
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<i>emoquette</i>	64	<i>errin</i>	65
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<i>enalapril maleate</i>	33	<i>erythrocin stearate</i>	21
<i>enalapril maleate & hydrochlorothiazide</i> <i>tab 10-25 mg</i>	33	<i>erythromycin (acne aid)</i>	98
<i>enalapril maleate & hydrochlorothiazide</i> <i>tab 5-12.5 mg</i>	33	<i>erythromycin (ophth)</i>	89
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<i>enskyce</i>	65	<i>estradiol & norethindrone acetate tab</i> <i>1-0.5 mg</i>	68
<i>entacapone</i>	51	<i>estradiol vaginal</i>	68
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<i>epinastine hcl (ophth)</i>	90	<i>ethynodiol diacetate & ethinyl estradiol</i> <i>tab 1 mg-50 mcg</i>	65
<i>epinephrine (anaphylaxis)</i>	92	<i>etodolac</i>	1
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<i>0.120-0.015 mg/24hr</i>	65
<i>etoposide</i>	31
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<i>famciclovir</i>	19
<i>famotidine</i>	73
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<i>mg/50ml</i>	73
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SKLICE	104	<i>400-80 mg/5ml</i>	14
SKYLA	66	<i>sulfamethoxazole-trimethoprim susp</i>	
SKYRIZI	81	<i>200-40 mg/5ml</i>	14
<i>sm nicotine transdermal s</i>	60	<i>sulfamethoxazole-trimethoprim tab</i>	
<i>sodium chloride</i>	87	<i>400-80 mg</i>	14
<i>sodium chloride (gu irrigant)</i>	104	<i>sulfamethoxazole-trimethoprim tab</i>	
<i>sodium chloride (inhalant)</i>	95	<i>800-160 mg</i>	14
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<i>tobramycin</i>	12	37.5-25 mg	42
<i>tobramycin (ophth)</i>	89	<i>triamterene & hydrochlorothiazide tab</i>	
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0.3-0.1%	89	<i>triamterene & hydrochlorothiazide tab</i>	
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<i>toremide</i>	42	<i>trinessa</i>	66
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<i>tramadol hcl</i>	10, 11	<i>tri-vit/fluoride</i>	88
<i>trandolapril</i>	34	<i>tri-vit/fluoride/iron</i>	88
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<i>trandolapril-verapamil hcl tab er 2-180</i>		<i>tropicamide</i>	91
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<i>trandolapril-verapamil hcl tab er 2-240</i>		TRULICITY	61
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