



CIGNA VALUE 4-TIER PRESCRIPTION DRUG LIST

Coverage as of January 1, 2023



Offered by: Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, or their affiliates.

916154 m Value 4-Tier O/I SRx 08/22



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View the drug list online

This document was last updated on 08/01/2022.* You can go online to see the current list of medications your plan covers.



myCigna^{®1} App or myCigna.com^{®2}. Click on the Find Care & Costs tab. Then select Price a Medication, and type in your medication name.



Cigna.com/PDL. Scroll down until you see a pdf of the **Cigna Value 4-Tier Prescription Drug List (all specialty medications covered on Tier 4).**

Questions?

- › **myCigna.com:** Click to Chat - Monday-Friday, 9:00 am-8:00 pm EST.
- › **By phone:** Call the toll-free number on your Cigna ID card. We're here 24/7/365.

* Drug list created: originally created 01/01/2004

Last updated: 08/01/2022, for changes starting 01/01/2023

Next planned update: 03/01/2023, for changes starting 07/01/2023

About this drug list

This is a list of the most commonly prescribed medications covered on the Cigna Value 4-Tier Prescription Drug List as of January 1, 2023.^{3,4} Medications are listed by the condition they treat, then listed alphabetically within tiers (or cost-share levels). **The drug list is updated often so it isn't a complete list of the medications your plan covers.** Also, your specific plan may not cover all of these medications. Log in to the **myCigna** App or **myCigna.com**, or check your plan materials, to see all of the medications your plan covers.

Prescription medications used to treat allergies (ex. Allegra, Clarinex, Xyzal and generics) and heartburn/stomach acid conditions (ex. Nexium, Prilosec and generics) aren't covered on this drug list. These medications are considered plan (or benefit) exclusions. You can get over-the-counter (OTC) versions at the pharmacy without a prescription.

How to read this drug list

Use the chart below to help you read this drug list. This chart is just an example. It may not show how these medications are actually covered on the Cigna Value 4-Tier Prescription Drug List.

Tier (cost-share level) gives you an idea of how much you may pay for a medication

Medications are grouped by the **condition** they treat; Speciality medications are listed on Tier 4 (pages 18-24)

Medications are listed in **alphabetical** order within each column

Medications that have extra coverage requirements have an **abbreviation** listed next to them

Brand-name medications are in all **capital letters**

Generic medications are in all **lowercase letters**

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
HORMONAL AGENTS		
AMABELZ	ANDRODERM (PA, QL)	ACTIVELLA
budesonide EC	ANDROGEL 1.62% (PA, QL)	ALORA (QL)
cabergoline (QL)	ARMOUR THYROID	ANDROGEL 1.0% (PA, QL)
COVARYX	CYTOMEL 50MCG	ANGELIQ
COVARYX H.S.	DIVIGEL	CLIMARA
DECADRON	DUAVEE	CLIMARA PRO
desmopressin	ESTRING (QL)	COMBIPATCH
dexamethasone	PREMARIN	CYTOMEL 5, 25mcg
estradiol-norethindrone	PREMPHASE	DEPO-TESTOSTERONE
estrogen-methyltestosterone	PREMPRO	ELESTRIN
levothyroxine		ENTOCORT EC
LEVOXYL		ESTRACE
liothyronine		ESTROGEL
medroxy-progesterone		EVAMIST
methimazole		FEMRING
methylprednisolone		INTRAROSA
MIMVEY		LEVO-T
MIMVEY LO		MENOSTAR (QL)
NATURE-THROID		MINIVELLE (QL)
NP THYROID		OSPHENA
prednisolone		TIROSINT
prednisolone ODT		UNITHROID
prednisone		VAGIFEM (QL)
prednisone intensol		VIVELLE-DOT (QL)
progesterone		

This chart is just a sample. It may not show how these medications are actually covered on the Cigna Value 4-Tier Prescription Drug List.

Tiers

Covered medications are divided into tiers or cost-share levels. Typically, the higher the tier, the higher the price you'll pay to fill the prescription.

› Tier 1 – Typically Generics	(Lowest-cost medication)	\$
› Tier 2 – Typically Preferred Brands	(Medium-cost medication)	\$\$
› Tier 3 – Typically Non-Preferred Brands	(Higher-cost medication)	\$\$\$
› Tier 4 – Specialty Medications	(Highest-cost medication)	\$\$\$\$

Abbreviations next to medications

In this drug list, medications that have limits and/or extra coverage requirements have an abbreviation listed next to them.* Here's what they mean.

(PA)	Prior Authorization – Certain medications need approval from Cigna before your plan will cover them. These medications have a (PA) next to them. Your plan won't cover these medications unless your doctor requests, and receives, approval from Cigna.
(QL)	Quantity Limits – Some medications have a quantity limit. This means your plan will only cover up to a certain amount over a certain length of time. These medications have a (QL) next to them. Your plan will only cover a larger amount if your doctor requests, and receives, approval from Cigna.
(ST)	Step Therapy – Certain high-cost medications aren't covered until you try one or more lower-cost alternatives first.** These medications have a (ST) next to them. You have many covered options to choose from, and they're used to treat the same condition.
(AGE)	Age Requirements – Certain medications will only be covered if you're within a specific age range. These medications have (AGE) next to them. If you're not within the allowed age range, your plan will only cover the medication if your doctor requests, and receives, approval from Cigna.

* These coverage requirements may not apply to your specific plan. Log in to the myCigna App or myCigna.com, or check your plan materials, to find out if your plan includes prior authorization, quantity limits, Step Therapy, and/or age requirements.

** If your doctor feels an alternative isn't right for you, he or she can ask Cigna to consider approving coverage of your medication.

Brand-name medications are in all capital letters

In this drug list, generic medications are listed in all lowercase letters and brand-name medications are listed in all capital letters.

Specialty medications are covered on Tier 4

Specialty medications are used to treat complex medical conditions. Some plans may limit coverage to a 30-day supply and/or require you to use a preferred specialty pharmacy to receive coverage. In this drug list, all specialty medications are covered on Tier 4 (see pages 18-24). Injectable specialty medications are marked with an asterisk (*) and oral specialty medications are marked with a double asterisk (**).

No cost-share preventive medications have a plus sign next to them

Health care reform under the Patient Protection and Affordable Care Act (PPACA) requires plans to cover certain preventive medications and products at 100%, or no cost-share (\$0), to you. In this drug list, these medications have a plus sign (+) next to them.

Some plans may cover certain non-covered medications

Plans can choose to offer coverage of certain medications/products and/or drug classes that aren't typically covered. In this drug list, these medications/products have a caret (^) next to them. Log in to the **myCigna** App or **myCigna.com** to see if your plan covers them.

How to find your medication

First, look for your condition in the alphabetical list below. Then, go to that page to see the covered medications available to treat the condition.

Condition	Page	Condition	Page
ALLERGY/NASAL SPRAYS	6	FEMININE PRODUCTS	11
ALZHEIMER'S DISEASE	6	GASTROINTESTINAL/HEARTBURN	11, 12
ANXIETY/DEPRESSION/BIPOLAR DISORDER	6	HORMONAL AGENTS	12
ASTHMA/COPD/RESPIRATORY	6	INFECTIONS	12, 13
ATTENTION DEFICIT HYPERACTIVITY DISORDER	6, 7	INFERTILITY	13
BLOOD MODIFIERS/BLEEDING DISORDERS	7	MISCELLANEOUS	13
BLOOD PRESSURE/HEART MEDICATIONS	7	NUTRITIONAL/DIETARY	13, 14
BLOOD THINNERS/ANTI-CLOTTING	8	OSTEOPOROSIS PRODUCTS	14
CANCER	8	PAIN RELIEF AND INFLAMMATORY DISEASE	14
CHOLESTEROL MEDICATIONS	7, 8	PARKINSON'S DISEASE	14
CONTRACEPTION PRODUCTS	8-9	SCHIZOPHRENIA/ANTI-PSYCHOTICS	14
COUGH/COLD MEDICATIONS	10	SEIZURE DISORDERS	15
DENTAL PRODUCTS	10	SKIN CONDITIONS	15
DIABETES	10, 11	SLEEP DISORDERS/SEDATIVES	15
DIURETICS	11	SMOKING CESSATION	16
EAR MEDICATIONS	11	SUBSTANCE ABUSE	16
ERECTILE DYSFUNCTION	11	URINARY TRACT CONDITIONS	16
EYE CONDITIONS	11	VACCINES	16
		WEIGHT MANAGEMENT	16, 17

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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ALLERGY/NASAL SPRAYS

azelastine		GASTROCROM
azelastine-fluticasone		GRASTEK (PA, QL)
cromolyn oral concentrate		KARBINAL ER
desloratadine^ (QL)		ODACTRA (PA, QL)
fluticasone^		ORALAIR (PA, QL)
hydroxyzine hcl solution, syrup, tablet		QNASL
hydroxyzine pamoate		QNASL CHILDREN
ipratropium		PATANASE
levocetirizine^		RAGWITEK (PA, QL)
mometasone^ (QL)		XHANCE
olopatadine		VISTARIL
promethazine solution, syrup, tablet		

ALZHEIMER'S DISEASE

donepezil		ARICEPT
donepezil odt		EXELON
memantine		MESTINON
memantine er (QL)		NAMENDA
pyridostigmine 60 mg/5 ml, 60 mg		NAMENDA XR (QL)
pyridostigmine er rivastigmine		NAMZARIC (QL)

ANXIETY/DEPRESSION/BIPOLAR DISORDER⁵

alprazolam	DESVENLAFAXINE	CELEXA (QL, ST)
alprazolam er	ER (QL,ST)	EFFEXOR XR (QL, ST)
alprazolam intensol		EMSAM (QL)
alprazolam odt		FETZIMA (QL, ST)
alprazolam xr		PAXIL (QL, ST)
amitriptyline		PAXIL CR (QL, ST)
bupropion (QL)		PROZAC (QL, ST)
bupropion sr (QL)		REMERON
bupropion xl 150 mg tablet (QL)		TRINTELLIX (QL, ST)
bupropion xl 300 mg tablet (QL)		WELLBUTRIN SR (QL, ST)
bupirone		XANAX
citalopram (QL)		XANAX XR
clomipramine		ZOLOFT (QL, ST)
duloxetine (QL)		
escitalopram (QL)		
fluoxetine dr (QL)		
fluoxetine (QL)		
fluvoxamine (QL)		

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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ANXIETY/DEPRESSION/BIPOLAR DISORDER⁵ (cont)

fluvoxamine er (QL)		
lorazepam		
lorazepam intensol		
mirtazapine		
paroxetine cr (QL)		
paroxetine er (QL)		
paroxetine (QL)		
sertraline (QL)		
trazodone		
venlafaxine (QL)		
venlafaxine er (QL)		

ASTHMA/COPD/RESPIRATORY

albuterol	ANORO ELLIPTA	AIRDUO DIGIHALER
ALBUTEROL HFA (QL)	(QL)	(QL,ST)
budesonide (QL)	ATROVENT HFA	COMBIVENT
fluticasone-salmeterol (QL)	(QL)	RESPIMAT (QL)
ipratropium-albuterol	BREZTRI	DALIRESP (QL)
montelukast	AEROSPHERE	LONHALA MAGNAIR
wixela inhub (QL)	(QL)	(PA,QL)
	DULERA (QL)	PULMICORT (QL)
	FLOVENT DISKUS	SINGULAIR
	(QL)	
	FLOVENT HFA	
	(QL)	
	INCRUSE ELLIPTA	
	QVAR REDIHALER	
	SEREVENT	
	DISKUS (QL)	
	SPIRIVA (QL)	
	SPIRIVA RESPIMAT	
	(QL)	
	STIOLTO	
	RESPIMAT (QL)	
	SYMBICORT (QL)	
	TRELEGY ELLIPTA	
	(QL)	

ATTENTION DEFICIT HYPERACTIVITY DISORDER⁵

amphetamine (PA)		ADDERALL
atomoxetine (QL)		(PA,QL,ST)
dexmethylphenidate (PA,QL)		DAYTRANA (PA, QL)
dexmethylphenidate er (PA, QL)		FOCALIN (PA,ST,QL)
dextroamphetamine-amphetamine (PA,QL)		INTUNIV (QL)
		METHYLIN (PA,QL)
		QUILLIVANT XR (PA, QL)
		RITALIN (PA,ST,QL)

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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ATTENTION DEFICIT HYPERACTIVITY DISORDER⁵ (cont)

dextroamp- hetamine- amphetamine er (PA, QL)		STRATTERA (QL)
guanfacine er (QL)		zenzedi 5 mg, 10 mg tablet (PA,ST,QL)
methylphenidate (PA,QL)		
methylphenidate er (la) (PA, QL)		
methylphenidate cd (PA, QL)		
methylphenidate er (cd) (PA, QL)		
methylphenidate la (PA, QL)		
procentra (PA,QL)		

BLOOD MODIFIERS/BLEEDING DISORDERS

DROXIA	SIKLOS (PA)
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BLOOD PRESSURE/HEART MEDICATIONS

amlodipine	CORLANOR (PA)	ADALAT
amlodipine- benazepril	ENTRESTO (QL)	BIDIL (QL)
amlodipine- olmesartan (QL)		CALAN SR
amlodipine-valsartan		CARDIZEM LA 120MG (QL)
atenolol		CATAPRES-TTS 1
benazepril		CATAPRES-TTS 2
bisoprolol		CATAPRES-TTS 3
bisoprolol-hctz		CORGARD (ST)
candesartan		EPANED
cartia xt		HEMANGEOL
carvedilol		INDERAL LA (ST)
CARVEDILOL ER (QL)		INDERAL XL (ST)
clonidine		KAPSPARGO SPRINKLE (ST)
diltiazem 12hr er		KATERZIA (QL)
diltiazem 24hr er		LOPRESSOR (ST)
diltiazem 24hr er (cd)		MINIPRESS
diltiazem 24hr er (la)		NITROSTAT
diltiazem 24hr er (xr)		NORVASC
diltiazem		PROCARDIA XL
DILT-XR		RANEXA (QL)
DOFETILIDE (QL)		TENORETIC 50 (ST)
enalapril		TENORETIC 100 (ST)
flecainide		TENORMIN (ST)
hydralazine tablet		TIAZAC
irbesartan		TIKOSYN (PA, QL)
labetalol tablet		TOPROL XL (ST)

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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BLOOD PRESSURE/HEART MEDICATIONS (cont)

lisinopril		VERELAN
lisinopril-hctz		VERELAN PM
losartan		ZIAC (ST)
losartan-hctz		
matzim la		
metoprolol succinate		
metoprolol tablet		
nadolol		
nebivolol hcl (QL)		
nifedipine		
nifedipine er		
olmesartan (QL)		
olmesartan- amlodipine-hctz		
olmesartan-hctz (QL)		
prazosin		
propranolol tablet		
propranolol er		
ramipril		
ranolazine er (QL)		
taztia xt		
telmisartan (QL)		
telmisartan-hctz (QL)		
tiadyt er		
valsartan		
valsartan-hctz		
verapamil tablet		
verapamil er		
verapamil er pm		
verapamil sr		

BLOOD THINNERS/ANTI-CLOTTING

clopidogrel	BRILINTA	EFFIENT
jantoven	ELIQUIS (PA)	PLAVIX
prasugrel	XARELTO (PA)	PRADAXA (PA ZONTIVITY)
warfarin		

CANCER

anastrozole+ exemestane+ letrozole methotrexate tamoxifen+	GLEOSTINE	
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CHOLESTEROL MEDICATIONS

atorvastatin+ colesevelam ezetimibe fenofibrate	REPATHA (PA) VASCEPA (PA)	CADUET (QL) LIPOFEN (ST) ROSZET TRICOR (ST)
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Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

CHOLESTEROL MEDICATIONS (cont)			CONTRACEPTION PRODUCTS (cont)		
TIER 1	TIER 2	TIER 3	TIER 1	TIER 2	TIER 3
\$	\$\$	\$\$\$	\$	\$\$	\$\$\$
fenofbric acid		TRILIPIX (ST)	desogestrel-ethinyl		
fluvastatin+		WELCHOL	estradiol+		
fluvastatin er+		ZETIA	desogestrel-ethinyl		
icosapent ethyl			estradiol - ethinyl		
lovastatin+			estradiol+		
omega-3 acid ethyl esters			DOLISHALE+		
pravastatin+			drospirenone-ethinyl estradiol-		
rosuvastatin+ (QL)			levomefolate+		
simvastatin+ (QL)			drospirenone-ethinyl estradiol+		
			ELINEST+		
			ELURYNG+		
			ENPRESSE+		
			ENSKYCE+		
			ERRIN+		
			ESTARYLLA+		
			ethynodiol-ethinyl estradiol+		
			etonogestrel-ethinyl estradiol+		
			FALMINA+		
			FEMCAP+		
			FEMYNOR+		
			GEMMILY+		
			HAILEY+		
			HAILEY FE+		
			HAILEY 24 FE+		
			HEATHER+		
			ICLEVIA+		
			INCASSIA+		
			ISIBLOOM+		
			JAIMIESS+		
			JASMIEL+		
			JENCYCLA+		
			JOLESSA+		
			JULEBER+		
			JUNEL+		
			JUNEL FE+		
			JUNEL FE 24+		
			KAITLIB FE+		
			KALLIGA+		
			KARIVA+		
			KELNOR 1-35+		
			KELNOR 1-50+		
			KURVELO+		
			LARIN+		
			LARIN FE+		
			LARIN 24 FE+		

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$	TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
CONTRACEPTION PRODUCTS (cont)			CONTRACEPTION PRODUCTS (cont)		
LARISSIA+			PIRMELLA+		
LEENA+			PORTIA+		
LESSINA+			PREVIFEM+		
LEVONEST+			RECLIPSEN+		
levonorgestrel- ethinyl estradiol+			RIVELSA+		
levonorgestrel- ethinyl estradiol ethinyl estradiol+			SETLAKIN+		
LEVORA+			SHAROBEL+		
LILLOW+			SIMLIYA+		
LOJAIMIESS+			SIMPESSE+		
LORYNA+			SPRINTEC+		
LOW-OGESTREL+			SRONYX+		
LO-ZUMANDIMINE+			SYEDA+		
LUTERA+			TARINA FE+		
LYLEQ+			TARINA FE 1-20 EQ+		
LYZA+			TARINA 24 FE+		
MARLISSA+			taysofy+		
medroxyprogest- erone+			TILIA FE+		
MERZEE+			TRI FEMYNOR+		
MICROGESTIN+			TRI-ESTARYLLA+		
MICROGESTIN FE+			TRI-LEGEST FE+		
MILI+			TRI-LINYAH+		
MONO-LINYAH+			TRI-LO-ESTARYLLA+		
NECON+			TRI-LO-MARZIA+		
NIKKI+			TRI-LO-MILI+		
NORA-BE+			TRI-LO-SPRINTEC+		
norethindrone+			TRI-MILI+		
norethindrone- ethinyl estradiol- iron+			TRI-NYMYO+		
norethindrone- ethinyl estradiol+			TRI-SPRINTEC+		
norethindrone- ethinyl estradiol- ferrous fumarate			TRIVORA+		
norgestimate-ethinyl estradiol+			TRI-VYLIBRA LO+		
NORLYDA+			TRI-VYLIBRA+		
NORTREL+			TULANA+		
NYLIA+			TYDEMY+		
NYMYO+			VELIVET+		
OCELLA+			VESTURA+		
PHILITH+			VIENVA+		
PIMTREA+			VIORELE+		
			VOLNEA+		
			VYFEMLA+		
			VYLIBRA+		
			WERA+		
			wide seal		
			diaphragm+		
			WYMZYA FE+		
			XULANE+		
			ZAFEMY+		
			ZOVIA 1-35+		
			ZUMANDIMINE+		

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

COUGH/COLD MEDICATIONS			DIABETES (cont)		
TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$	TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
bromphen-iramine- pseudoephed -dm promethazine-dm		HYCODAN (PA, QL) TUXARIN ER (PA, QL) TUZISTRA XR (PA, QL)	DROPLET DROPSAFE FREESTYLE FREEDOM LITE FREESTYLE LITE METER glimepiride glipizide glipizide er glipizide xl GLUCOCARD SHINE CONNEX, EXPRESS, XL GUARDIAN RT CHARGER GUARDIAN TEST PLUG INPEN INSULIN SYRINGE metformin metformin er MICROLET NEXT LANCING DEVICE MULTI-LANCET NANO 2ND GEN PEN NEEDLE NOVOFINE ONETOUCH ULTRA2 ONETOUCH ULTRAMINI ONETOUCH VERIO FLEX, REFLECT, METER PARADIGM POGO AUTOMATIC BLOOD GLUC SYS TECHLITE TRU METRIX AIR GLUCOS METER TRU METRIX BLOOD GLUCOSE MTR TRUE METRIX CONTROL SOULTION TRUEPLUS PEN NEEDLE	HUMULIN R INSULIN LISPRO (QL) JANUMET (QL, ST) JANUMET XR (QL, ST) JANUVIA (QL, ST) JARDIANCE (QL, ST) LEVEMIR (QL) LYUMJEV OMNIPOD CLASSIC PDM, PODS (GEN 3) (QL) OMNIPOD DASH INTRO KIT, PODS (GEN 4) (QL) OMIPOD 5 G6 INTRO KIT, PODS (GEN 5) (QL) ONETOUCH ULTRA TEST STRIP ONETOUCH VERIO TEST STRIP OZEMPIC (PA, QL) RYBELSUS (PA, QL) SOLIQUA 100-33 SYMLINPEN SYNJARDY (QL, ST) SYNJARDY XR (QL, ST) TRESIBA (QL) TRIJARDY XR (ST, QL) TRULICITY (PA, QL) V-GO 20 V-GO 30 V-GO 40	
DENTAL PRODUCTS					
chlorhexidine DENTA 5000 PLUS DENTAGEL doxycycline hyclate FLUORIDEX DAILY DEFENSE 1.1% ORALONE PERIOGARD SF 1.1% GEL SF 5000 PLUS sodium fluoride sodium fluoride 5000 dry mouth sodium fluoride 5000 plus triamcinolone acetamide		CLINPRO 5000 FLORIVA+^ FLUORIDEX SENSITIVITY RELIEF PERIDEX PREVIDENT 5000 DRY MOUTH			
DIABETES					
ACCU-CHEK LANCETS GUIDE ME GLUCOSE MTR ACCU-CHEK LANCETS GUIDE MONITOR SYSTEM ACCU-CHEK LANCETS ACCU-CHEK SMARTVIEW CONTRL SOLUTION ACCUTREND GLUCOSE CONTROL AUTOSHIELD DUO PEN NEEDLE BD INSULIN SYRINGE BD LANCETS BD PEN NEEDLE CONTOUR CONTOUR NEXT CONTOUR NEXT EZ CONTOUR NEXT ONE CONTOUR SOLUTION	BAQSIMI (QL) BASAGLAR (QL) BYDUREON BCISE (PA, QL) BYETTA (PA, QL) DEXCOM G6 RECEIVER, SENSOR, TRANSMITTER (PA, QL) FARXIGA (QL, ST) FREESTYLE LIBRE 2 SENSOR (PA, QL) FREESTYLE LIBRE 14 DAY SENSOR (PA, QL) FREESTYLE LIBRE READER (PA, QL) GLYXAMBI (QL, ST) HUMALOG (QL) HUMULIN (QL)	CEQUR CONTOUR NEXT TEST STRIP CONTOUR TEST STRIP CYCLOSET GLUCAGON EMERGENCY KIT (QL) PRECISION XTRA KETONE-GLUC KIT RIOMET			

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$	TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
DIABETES (cont)			EYE CONDITIONS (cont)		
TRUEPLUS SYRINGE ULTRA-FINE MICRO PEN NEEDLE VEO INSULIN SYRINGE	VICTOZA (PA, QL) XIGDUO XR (QL, ST) XULTOPHY ZEGALOGUE (QL)		neomycin-polymyxin b-dexamethasone ofloxacin polymyxin b sulfate- trimethoprim prednisolone timolol tobramycin- dexamethasone travoprost		DUREZOL FLAREX FML FORTE 0.25% EYE DROPS FML LIQUIFILM 0.1% EYE DROP FML S.O.P. 0.1% OINTMENT ILEVRO INVELTYS ISTALOL LOTEMAX LOTEMAX SM MAXITROL OCUFLOX POLYTRIM PRED FORTE PROLENSA RHOPRESSA ROCKLATAN TIMOPTIC TIMOPTIC OCUDOSE TIMOPTIC-XE TOBRADEX TOBRADEX ST VIGAMOX ZERVIAE ZIRGAN ZYLET
DIURETICS					
acetazolamide tablet acetazolamide er capsule bumetanide tablet chlorthalidone eplerenone furosemide solution, tablet hydrochloro- thiazide spironolactone torsemide triamterene-hctz	KERENDIA (PA, QL)	TRIAMTERENE-HCTZ CAROSPIR DIURIL LASIX MAXZIDE			
EAR MEDICATIONS					
ciprofloxacin- dexamethasone neomycin-polymyxin b-hydrocortisone ofloxacin		CIPRODEX CIPROFLOXACIN- FLUOCINOLONE CIPRO HC CORTISPORIN-TC DERMOTIC OTOVEL			
ERECTILE DYSFUNCTION			FEMININE PRODUCTS		
sildenafil^ (QL) TADALAFIL^ (QL) vardenafil^ (QL)		CIALIS^ (QL, ST) MUSE^ (PA, QL) STENDRA^ (QL, ST) VIAGRA^ (QL, ST)	GYNAZOLE 1 miconazole 3 200 mg terconazole		
EYE CONDITIONS			GASTROINTESTINAL/HEARTBURN		
BIMATOPROST (QL) brimonidine brinzolamide ciprofloxacin difluprednate dorzolamide-timolol erythromycin fluorome-tholone latanoprost loteprednol moxifloxacin eye drops	CEQUA COMBIGAN EYSUVIS (QL) SIMBRINZA XIIDRA	ACUVAIL ALPHAGAN P ALREX AZASITE AZOPT BEPREVE BESIVANCE BETIMOL BETOPTIC S BROMSITE COSOPT COSOPT PF	ANUCORT-HC balsalazide dicyclomine capsule, solution, tablet esomeprazole 20 mg capsule, 40 mg capsule, packets^ (QL) famotidine 40 mg/5 ml suspension GAVILYTE-C+ GAVILYTE-G+ GAVILYTE-N+	AMITIZA CLENPIQ+ LINZESS PANCREAZE PENTASA SUPREP+ SUTAB+ VIBERZI	APRISO BONJESTA CANASA CARAFATE DEXILANT (QL) DICLEGIS LITHOSTAT MOTOFEN MOVANTIK (PA) NEXIUM DR 2.5 MG PACKET (QL) NEXIUM DR 5 MG PACKET (QL)

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$	TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
GASTROINTESTINAL/HEARTBURN (cont)			HORMONAL AGENTS (cont)		
GENTLE LAXATIVE TABLET+		RECTIV			MEDROL
HEMMOREX-HC		RELISTOR (PA)			MENOSTAR (QL)
hydrocortisone		SALIVAMAX			MYFEMBREE (QL)
lansoprazole^ (QL)		SANCUSO (PA, QL)			OSPHENA (QL)
mesalamine		SFROWASA			PROMETRIUM
mesalamine dr		SYMPROIC (PA)			RAYALDEE
mesalamine er		TRANSDERM-SCOP			UNITHROID
metoclopramide solution, tablet		URSO			
metoclopramide odt		URSO FORTE			
OMEPRAZOLE^ (QL)		VARUBI (PA, QL)			
ondansetron		VIOKACE			
ondansetron odt					
pantoprazole ^ (QL)					
peg 3350- electrolyte+					
peg3350-sodium sulfate-sodium chloride-potassium chloride-sodium ascorbate-ascorbic acid+					
PEG-PREP+					
prochlorperazine tablet					
rabeprazole tablet^ (QL)					
scopolamine					
sucralfate					
HORMONAL AGENTS			INFECTIONS		
AMABELZ	DUAVEE	ACTIVELLA	acyclovir capsule, suspension, tablet	BAXDELA	AEMCOLO (QL)
budesonide dr	COMBIPATCH	ALORA (QL)	albendazole	EURAX 10% CREAM	ALINIA
budesonide ec	ESTROGEL	ANDRODERM (PA, QL)	amoxicillin	LAGEVRIO (EUA) (QL)	BACTRIM
budesonide er (PA, QL)	MYFEMBREE (PA, QL)	ANDROGEL (PA, QL)	amoxicillin- clavulanate er	PAXLOVID (QL)	BACTRIM DS
CABERGOLINE (QL)	ORIAHNN (PA, QL)	ANGELIQ	amoxicillin- clavulanate	SIVEXTRO (PA)	CIPRO
desmopressin	ORILISSA (PA, QL)	AYGESTIN	atovaquone	XIFAXAN (QL)	CLEOCIN
dexamethasone intensol	PREMARIN	BIJUVA	atovaquone- proguanil		CLINDESSE
DOTTI (QL)	TABLET, VAGINAL CREAM	CRINONE 4% GEL	AVIDOXY		CRESEMBA CAPSULE (PA)
LEVOXYL	APPLICATOR	CYTOMEL	azithromycin packet, suspension, tablets		E.E.S. 400
	PREMPHASE	DEPO- TESTOSTERONE	cefdinir		ELIMITE
	PREMPRO	ESTRACE	cefuroxime tablets		ERYPED 200
		ESTRING (QL)	cephalexin		ERY-TAB DR
		EVAMIST	ciprofloxacin		EURAX 10% LOTION
		EVAMIST	clindamycin		FLAGYL
		INTRAROSA (QL)	COREMINO ER (QL)		MACROBID
			dapsone		MACRODANTIN
			doxycycline monohydrate		MALARONE (PA)
			EMVERM		NUVESSA
			erythromycin		PLAQUENIL (PA)
			erythromycin ethylsuccinate		POSACONAZOLE SUSPENSION
			famciclovir		PRIFTIN
			fluconazole		SKLICE
			hydroxychlor- oquine		SOLOSEC
			ivermectin (PA)		STROMECTOL (PA)
			levofloxacin solution, tablet		SULFATRIM
			metronidazole gel, capsule, tablet		TAMIFLU (QL)
			minocycline (QL)		URIBEL
			minocycline er tablet (QL)		VALTRESX
					XENLETA 600MG TABLET (PA, QL)
					XOFLUZA (QL)
					ZITHROMAX
					ZITHROMAX TRI-PAK
					ZYVOX SUSPENSION, TABLET (PA)

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$			TIER 2 \$\$			TIER 3 \$\$\$											
INFECTIONS (cont)						MISCELLANEOUS (cont)											
monodoxyne nl nitazoxanide nitrofurantoin nitrofurantoin monohydrate- macrocrystal nystatin suspension, tablet oseltamivir (QL) penicillin v potassium posaconazole tablet sulfamethoxazole- trimethoprim suspension, tablet terbinafine tetracycline valacyclovir valganciclovir vancomycin capsule, solution vandazole									FLEXICHAMBER (QL) INSPIRACHA- MBER (QL) MICROCHAMBER (QL) MICROSPACER (QL) OPTICHAMBER DIAMOND (QL) POCKET CHAMBER (QL) PRO COMFORT SPACER WITH MASK (QL) PROCARE SPACER WITH CHILD MASK (QL) RITEFLO (QL) SPACE CHAMBER (QL) SPACE CHAMBER- MEDIUM MASK (QL) SPACE CHAMBER- SMALL MASK (QL) VORTEX (QL)								
INFERTILITY																	
clomiphene ^						CRINONE 8% GEL ^			ENDOMETRIN ^								
MISCELLANEOUS						NUTRITIONAL/DIETARY											
ACCU-CHEK disulfram DROPLET LANCETS KETONE CARE TEST STRIP KETONE TEST STRIP KETOSTIX REAGENT MICROLET ONETOUCH LANCETS POGO AUTOMATIC TEST CARTRIDGE PRECISION XTRA sodium chloride inhalation vial, irrigation solution, vial TECHLITE LANCETS TRUEPLUS KETONE TEST STRIP			ACE AEROSOL CLOUD ENHANCER (QL) AEROCHAMBER MINI (QL) AEROCHAMBER MV (QL) AEROCHAMBER PLUS FLOW-VU (QL) AEROCHAMBER Z-STAT PLUS (QL) AEROTRACH PLUS (QL) AEROVENT PLUS (QL) BREATHRITE (QL) CLEVER CHOICE HOLDING CHAMBER (QL) EASIVENT (QL)			ADDYI ^ (PA, QL) NUEDEXTA (QL)			calcitriol capsule, solution ^ cyanocobalamin dodox fluoride+ ^ folic acid ^+ klor-con KLOR-CON 8 MEQ TABLET KLOR-CON 10 MEQ TABLET potassium chloride 10%, capsule, packet, tablet sevelamer carbonate vitamin d2 1.25 mg (50,000 unit) ^ VITAMINS A,C,D AND FLUORIDE+			DRISDOL ^ FLORIVA CHEWABLE TABLET+ LOKELMA NEEVO DHA ^ OB COMPLETE PREMIER OB COMPLETE PREMIER POLY-VI-FLOR WITH IRON+ POLY-VI-FLOR+ PRENATE ^ QUFLORA PEDIATRIC 1 MG CHEWABLE TABLET+			ACCRUFER ^ AURYXIA (QL) CITRANATAL 90 DHA CITRANATAL ASSURE CITRANATAL B-CALM CITRANATAL BLOOM TABLET ^ CITRANATAL DHA CITRANATAL HARMONY DRISDOL ^ K-TAB ER MEPHYTON ^ MULTI-VIT-FLOR+ OB COMPLETE ^ PHOSLYRA PRENATE PRIMACARE		

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$	TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
NUTRITIONAL/DIETARY (cont)			PAIN RELIEF AND INFLAMMATORY DISEASE (cont)		
	QUFLORA PEDIATRIC 0.25 MG/ML DROP+ QUFLORA PEDIATRIC 0.5 MG/ML DROP+ TRI-VI-FLOR+ VELTASSA VELPHORO	REVELA ROCALTROL ^	ketorolac tromethamine (QL) leflunomide lidocaine 5% ointment, 5% patch, viscous (QL) meloxicam tablet metaxalone methocarbamol morphine (PA) morphine er (PA) oxycodone (PA) oxycodone er (PA) oxycodone- acetaminophen (PA) PROLATE TABLET (PA) rizatriptan (QL) sumatriptan (QL) tramadol 50 mg tablet (QL) tramadol er (QL) VANADOM		
OSTEOPOROSIS PRODUCTS			PAIN RELIEF AND INFLAMMATORY DISEASE		
alendronate ibandronate 150 mg tablet raloxifene + risedronate risedronate dr	FOSAMAX PLUS D (ST)	ACTONEL (ST) ATELVIA (ST) BINOSTO (ST) EVISTA FOSAMAX (ST)	ACETAMINOPHEN- CODEINE (PA) allopurinol tablet baclofen tablet buprenorphine patch (QL) butalbital- acetaminophen- caffeine (QL) carisoprodol CELECOXIB (QL) colchicine cyclobenzaprine DICLOFENAC 1% GEL (QL) diclofenac dr (QL) diclofenac ec (QL) EC-NAPROXEN ECOTRIN EC 81 MG TABLET+ eletriptan (QL) ENDOCET (PA) FEBUXOSTAT (QL) GLYDO hydrocodone- acetaminophen (PA) IBU ibuprofen indomethacin indomethacin e	AIMOVIG (PA) AJOVY (PA) BELBUCA (QL) EMGALITY (PA) HYSINGLA ER (PA) MITIGARE NURTEC ODT (PA, QL) OTREXUP (PA) QULIPTA (PA,QL) RASUVO (PA) REDITREX (PA) TRUDHESA (PA, QL) UBRELVY (PA, QL) XTAMPZA ER (PA) ZTLIDO)	ARAVA BUTRANS (QL) CELEBREX (QL, ST) EC-NAPROSYN (ST) ESGIC (QL) FEXMID FIORICET (QL) NAPROSYN (ST) NUCYNTA (PA) NUCYNTA ER (PA) OTREXUP (PA) OXAYDO (PA) PERCOCET (PA) PROCTOFOAM-HC RASUVO (PA) ROXYBOND (PA) SAVELLA ULTRAM 50 MG TABLET (QL) ZANAFLEX ZEBUTAL (QL) ZOHYDRO ER (PA)
PAIN RELIEF AND INFLAMMATORY DISEASE			PARKINSON'S DISEASE		
			benztropine tablet carbidopa-levodopa carbidopa-levodopa er pramipexole (QL) PRAMIPEXOLE ER (QL) RASAGILINE (QL) ROPINIROLE ER ROPINIROLE	KYNMOBI (PA)	AZILECT (QL) MIRAPEX ER (QL) NEUPRO OSMOLEX ER (QL) RYTARY SINEMET 10-100 SINEMET 25-100 TASMAR XADAGO (ST)
PAIN RELIEF AND INFLAMMATORY DISEASE			SCHIZOPHRENIA/ANTI-PSYCHOTICS⁵		
			ARIPIRAZOLE (QL) aripiprazole odt asenapine chlorpromazine tablet olanzapine tablet olanzapine odt PALIPERIDONE ER (QL) quetiapine quetiapine er risperidone risperidone odt ziprasidone tablet	ABILIFY MAINTENA ARISTADA ARISTADA INITIO INVEGA SUSTENNA INVEGA TRINZA LATUDA (QL) PERSERIS (QL) RISPERDAL CONSTA	FANAPT (QL, ST) INVEGA (QL, ST) INVEGA HAFYERA REXULTI (QL, ST) RISPERDAL (ST) SAPHRIS (ST) SECUADO (ST) SEROQUEL (ST) SEROQUEL XR (ST) VRAYLAR (QL, ST)

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$	TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
SEIZURE DISORDERS			SKIN CONDITIONS (cont)		
carbamazepine	BRIVIACT ORAL	APTIOM (PA, QL)	BP 10-1		EFUDEX
carbamazepine er	SOLUTION,	BANZEL (PA, QL)	calcipotriene cream,		ELIDEL
clonazepam	TABLET (PA)	CARBATROL (PA)	ointment, solution		EVOCLIN
divalproex	FYCOMPA (PA,	DEPAKOTE (PA)	calcipotriene-		NAFTIN
divalproex er	QL)	DEPAKOTE ER (PA)	betamethasone		OPZELURA (PA)
EPITOL	NAYZILAM (PA,	DEPAKOTE SPRINKLE	CLARAVIS		PICATO
gabapentin	QL)	(PA)	CLINDACIN ETZ 1%		PRAMOSONE
lamotrigine	VIMPAT	DIASTAT (PA)	PLEDGET		REGRANEX (PA,QL)
lamotrigine (blue)		DILANTIN 50 MG	CLINDACIN P 1%		SANTYL (QL)
lamotrigine (green)		INFATAB (PA)	PLEDGETS		TEMOVATE (ST)
lamotrigine (orange)		KLONOPIN (PA)	clindamycin 1%		XENLETA 600 MG
lamotrigine er		LYRICA ORAL	foam, gel, lotion,		TABLET (PA, QL)
lamotrigine odt		SOLUTION (PA)	pledget, solution		XEPI
lamotrigine odt		NEURONTIN (PA)	clindamycin-benzoyl		
(blue)		OXTELLAR XR (PA)	peroxoxide		
lamotrigine odt		PHENYTEK (PA)	clindamycin-		
(green)		SPRITAM (PA)	tretinoin		
lamotrigine odt		TEGRETOL (PA)	clobetasol		
(orange)		TEGRETOL XR (PA)	CLODAN		
levetiracetam		VALTOCO (PA, QL)	clotrimazole-		
solution, tablet		XCOPRI (PA, QL)	betamethasone		
levetiracetam er			dapsone gel		
oxcarbazepine			fluocinonide		
pregabalin capsule,			fluorouracil cream,		
solution			topical solution		
ROWEEPRA			isotretinoin		
rufinamide (PA, QL)			ketoconazole		
SUBVENITE			KETODAN		
SUBVENITE (BLUE)			metronidazole		
SUBVENITE (GREEN)			MYORISAN		
SUBVENITE			NEUAC GEL		
(ORANGE)			pimecrolimus		
topiramate			ROSADAN		
topiramate er			sodium		
			sulfacetamide-		
			sulfur		
			SSS 10-5		
			SULFACLEANSE 8-4		
			tacrolimus ointment		
			tazarotene 0.1%		
			cream		
			TRETINOIN (PA)		
			TRIDERM		
			ZENATANE		
SKIN CONDITIONS			SLEEP DISORDERS/SEDATIVES		
AC CUTANE	EUCRISA (ST)	ANALPRAM HC	eszopiclone	DAYVIGO (QL, ST)	LUNESTA (ST)
ADAPALENE (PA)		2.5%-1% LOTION	MODAFINIL (PA)	SUNOSI (PA, QL)	
adapalene-benzoyl		AVAR 9.5-5%	zolpidem		
peroxide		CLEANSING PADS	ZOLPIDEM ER (QL)		
AMNESTEEM		BRYHALI (ST)			
AVAR CLEANSER		calcipotriene foam			
azelaic acid		CAPEX SHAMPOO			
BP 10-1		(ST)			
AVAR CLEANSER		CLEOCIN T			
azelaic acid		CLINDACIN ETZ KIT			
betamethasone		CLINDACIN PAC KIT			
augmented		CLODERM (ST)			
betamethasone		DESOWEN (ST)			
dipropionate		DRYSOL			

Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$	TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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SMOKING CESSATION⁵

bupropion sr 150 mg tablet+^ varenicline+^		APO-VARENICLINE^ NICODERM CQ+ NICORETTE+ NICOTROL NS+^ NICOTROL+^ VARENICLINE TARTRATE^
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SUBSTANCE ABUSE

buprenorphine-naloxone	KLOXXADO (QL) LUCEMYRA (QL) NARCAN (QL) ZUBSOLV	SUBOXONE ZIMHI (QL)
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URINARY TRACT CONDITIONS

alfuzosin er cevimeline dutasteride finasteride oxybutynin oxybutynin er phenazopyridine potassium er SILODOSIN (QL) SOLIFENACIN (QL) tamsulosin tolterodine TOLTERODINE ER (QL)		AVODART ELMIRON EVOXAC FLOMAX K-PHOS ORIGINAL PROSCAR PYRIDIUM RAPAFLO (QL) UROCIT-K UROXATRAL
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VACCINES

Not all plans cover vaccines in the same way. Log in to the **myCigna App** or **myCigna.com**, or check your plan materials, to find out how your specific plan covers them.

	BEXSERO+ BOOSTRIX TDAP+ COMIRNATY+ DAPTACEL DTAP+ DENGVAXIA+ DIPHThERIA-TETANUS TOXOIDS-PED+ GARDASIL 9+ HEPLISAV-B+ HIBERIX+ INFANRIX DTAP+ IPOL+ ANSSSEN COVID-19 VACCINE (EUA)+	QUADRACEL DTAP-IPV SYRINGE+
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VACCINES

Not all plans cover vaccines in the same way. Log in to the **myCigna App** or **myCigna.com**, or check your plan materials, to find out how your specific plan covers them.

	KINRIX+ MENACTRA+ JMENQUADFI+ MENVEO A-C-Y-W-135-DIP+ M-M-R II VACCINE+ MODERNA COVID (12Y UP) VAC(EUA)+ MODERNA COVID (6M-5Y) VACC (EUA+) MODERNA COVID-19 BOOSTER (EUA)+ NOVAVAX COVID-19 VACC, ADJ (EUA)+ PEDIARIX+ PEDVAXHIB+ PENTACEL+ PFIZER COVID (12Y UP) VAC(EUA)+ PFIZER COVID (6M-4Y) VACC (EUA)+ PFIZER COVID (5-11Y) VAC (EUA)+ PFIZER COVID-19 VACCINE (EUA)+ PNEUMOVAX 23+ PREHEVBRIO+ PREVNAR 13+ PREVNAR 20+ PROQUAD+ QUADRACEL DTAP-IPV VIAL+ RECOMBIVAX HB+ SHINGRIX+ (QL) SPIKEVAX COVID (18Y UP) VACC+ TDVAX+	
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Cigna Value 4-Tier Prescription Drug List

Specialty medications are covered on Tier 4 (listed on pages 18-25).

TIER 1	TIER 2	TIER 3
\$	\$\$	\$\$\$

VACCINES

Not all plans cover vaccines in the same way. Log in to the [myCigna App](#) or [myCigna.com](#), or check your plan materials, to find out how your specific plan covers them.

	TENIVAC+	
	TRUMENBA+	
	TWINRIX+	
	VARIVAX	
	VACCINE+	
	VAXELIS+	
	VAXNEUVANCE+	

WEIGHT MANAGEMENT

megestrol suspension	WEGOVY^ (PA, QL)	CONTRACE^ (PA)
phentermine ^		QSYMIA^ (PA)
		SAXENDA^ (PA)

Specialty medications

The oral and injectable specialty medications listed below are covered on Tier 4 and may need approval from Cigna before your plan will cover them.

MEDICATION NAME	DRUG CLASS
abacavir-lamivudine** (PA)	AIDS/HIV
abiraterone** (PA)	CANCER
ACTEMRA SYRINGE* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
ACTEMRA ACTPEN* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
ACTHAR*	HORMONAL AGENTS
ACTIMMUNE* (PA)	CANCER
ADBRY*	SKIN CONDITIONS
ADCIRCA** (PA)	ASTHMA/COPD/RESPIRATORY
ADEMPAS** (PA)	ASTHMA/COPD/RESPIRATORY
ADVATE*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
ADYNOVATE*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
AFINITOR** (PA)	CANCER
AFINITOR DISPERZ** (PA)	CANCER
AFSTYLA*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
ALECENSA** (PA,QL)	CANCER
ALUNBRIG** (PA,QL)	CANCER
ALYQ** (PA)	ASTHMA/COPD/RESPIRATORY
AMICAR**	BLOOD MODIFIERS/BLEEDING DISORDERS
aminocaproic acid 0.25 gram/ml, tablets **	BLOOD MODIFIERS/BLEEDING DISORDERS
APRETUDE*+ (PA)	AIDS/HIV
APOKYN* (PA)	PARKINSON'S DISEASE
ARALAST NP*	ASTHMA/COPD/RESPIRATORY
ARANESP*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
ARCALYST* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
ARIKAYCE** (PA)	INFECTIONS
ARIXTRA* (QL)	BLOOD THINNERS/ANTI-CLOTTING
ASTAGRAF XL**	TRANSPLANT MEDICATIONS
atazanavir** (PA)	AIDS/HIV
ATRIPLA** (PA)	AIDS/HIV
AUBAGIO* (PA)	MULTIPLE SCLEROSIS
AUSTEDO** (PA)	MISCELLANEOUS
AVONEX* (PA)	MULTIPLE SCLEROSIS
AVSOLA*^ (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
AYVAKIT** (PA, QL)	CANCER
azathioprine tablet**	TRANSPLANT MEDICATIONS
BAFIERTAM** (PA)	MULTIPLE SCLEROSIS
BARACLUDE SOLUTION**	INFECTIONS
BENLYSTA* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE

MEDICATION NAME	DRUG CLASS
betaine anhydrous**	NUTRITIONAL/DIETARY
BETASERON* (PA)	MULTIPLE SCLEROSIS
BIKTARVY** (QL)	AIDS/HIV
BOSULIF** (PA,QL)	CANCER
BRONCHITOL** (PA)	ASTHMA/COPD/RESPIRATORY
BRUKINSA ** (PA,QL)	CANCER
BYNFEZIA* (PA)	HORMONAL AGENTS
CABENUVA*^ (PA)	AIDS/HIV
CABLIVI*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
CABOMETYX** (PA)	CANCER
CALQUENCE* (PA)	CANCER
capecitabine** (PA)	CANCER
CAYSTON** (PA, QL)	INFECTIONS
CELLCEPT**	TRANSPLANT MEDICATIONS
CERDELGA** (PA)	MISCELLANEOUS
CEREZYME*	MISCELLANEOUS
CETROTIDE*^ (PA)	HORMONAL AGENTS
CHOLBAM** (PA)	GASTROINTESTINAL/HEARTBURN
chorionic gonadotropin*^ (PA)	INFERTILITY
CIBINQO** (PA,QL)	SKIN CONDITIONS
CIMDUO** (PA)	AIDS/HIV
CIMZIA* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
COMETRIQ** (PA,QL)	CANCER
COMPLERA** (PA,QL)	AIDS/HIV
CORTROPHIN*	HORMONAL AGENTS
CYSTAGON**	URINARY TRACT CONDITIONS
CYSTARAN** (PA, QL)	EYE CONDITIONS
DARAPRIM** (PA)	INFECTIONS
deferiprone** (PA)	MISCELLANEOUS
DEPEN** (PA,QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
DESCOVY**+ (PA)	AIDS/HIV
DIFICID* (QL)	INFECTIONS
dimethyl** (PA)	MULTIPLE SCLEROSIS
DOPTELET* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
DOVATO** (QL)	AIDS/HIV
DUOPA**	PARKINSON'S DISEASE
DUPIXENT* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
DUROLANE*	PAIN RELIEF AND INFLAMMATORY DISEASE
DYSPORT*	MISCELLANEOUS
efavirenz-emtricitabine-tenofovir disoproxil fumarate** (QL)	AIDS/HIV
EGRIFTA* (PA)	HORMONAL AGENTS
ELIGARD*	CANCER

MEDICATION NAME	DRUG CLASS
ELOCTATE*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
EMFLAZA** (PA)	HORMONAL AGENTS
EMPAVELI* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
emtricitabine-tenofovir disop**+	AIDS/HIV
ENBREL* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
enoxaparin* (QL)	BLOOD THINNERS/ANTI-CLOTTING
entecavir** (QL)	INFECTIONS
ENTYVIO*^ (PA)	GASTROINTESTINAL/HEARTBURN
ENVARUS XR**	TRANSPLANT MEDICATIONS
EPCLUSA** (PA, QL)	INFECTIONS
EPIDIOLEX** (PA)	SEIZURE DISORDERS
EPOGEN*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
ERIVEDGE** (PA)	CANCER
ERLEADA** (PA)	CANCER
ESBRIET** (PA)	MISCELLANEOUS
ESPEROCT*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
ETRAVIRINE**	AIDS/HIV
EUFLEXA*	PAIN RELIEF AND INFLAMMATORY DISEASE
everolimus** (PA,QL)	CANCER
EVOTAZ** (PA)	AIDS/HIV
EXJADE** (PA)	MISCELLANEOUS
EXKIVITY** (PA,QL)	CANCER
EXTAVIA* (PA)	MULTIPLE SCLEROSIS
FASENRA*	ASTHMA/COPD/RESPIRATORY
FASENRA PEN* (PA)	ASTHMA/COPD/RESPIRATORY
FENSOLVI*^ (PA)	HORMONAL AGENTS
FERRIPROX** (PA)	MISCELLANEOUS
FIRDAPSE** (PA, QL)	MULTIPLE SCLEROSIS
FOLLISTIM AQ*^ (PA)	INFERTILITY
fondaparinux* (QL)	BLOOD THINNERS/ANTI-CLOTTING
Forteo* (PA, QL)	HORMONAL AGENTS
FRAGMIN* (QL)	BLOOD THINNERS/ANTI-CLOTTING
FULPHILA* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
GALAFOLD** (PA)	MISCELLANEOUS
GANIRELIX*^ (PA)	HORMONAL AGENTS
GATTEX* (PA)	GASTROINTESTINAL/HEARTBURN
GEL-ONE*	PAIN RELIEF AND INFLAMMATORY DISEASE
GELSYN-3*	PAIN RELIEF AND INFLAMMATORY DISEASE
GENVOYA** (QL)	AIDS/HIV
GILENYA** (PA)	MULTIPLE SCLEROSIS
glatiramer* (PA)	MULTIPLE SCLEROSIS
GLASSIA*	ASTHMA/COPD/RESPIRATORY

MEDICATION NAME	DRUG CLASS
GLATOPA* (PA)	MULTIPLE SCLEROSIS
GLEEVEC** (PA)	CANCER
GONAL-F*^ (PA)	INFERTILITY
GONAL-F RFF*^ (PA)	INFERTILITY
GONAL F RFF REDI-JECT*^ (PA)	INFERTILITY
GRANIX*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
HAEGARDA* (PA)	BLOOD PRESSURE/HEART MEDICATIONS
HARVONI** (PA, QL)	INFECTIONS
HEMLIBRA* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
HETLIOZ** (PA)	SLEEP DISORDERS/SEDATIVES
HIZENTRA*	MISCELLANEOUS
HUMATROPE* (PA)	HORMONAL AGENTS
HUMIRA* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
HYALGAN*	PAIN RELIEF AND INFLAMMATORY DISEASE
HYMOVIS*	PAIN RELIEF AND INFLAMMATORY DISEASE
IBRANCE** (PA,QL)	CANCER
ICLUSIG** (PA,QL)	CANCER
ILARIS*^ (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
ILUMYA* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
imatinib** (QL)	CANCER
IMBRUVICA** (PA,QL)	CANCER
INBRIJA** (PA)	PARKINSON'S DISEASE
INCRELEX* (PA)	HORMONAL AGENTS
INFLECTRA*^ (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
INGREZZA** (PA)	MISCELLANEOUS
INLYTA** (PA)	CANCER
INTELENCE** (PA)	AIDS/HIV
ISENTRESS**	AIDS/HIV
ISENTRESS HD** (PA)	AIDS/HIV
JADENU** (PA)	MISCELLANEOUS
JADENU SPRINKLE** (PA)	MISCELLANEOUS
JAKAFI** (PA,QL)	CANCER
JIVI*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
JULUCA** (QL)	AIDS/HIV
JYNARQUE** (PA)	DIURETICS
KALBITOR*^ (PA)	BLOOD PRESSURE/HEART MEDICATIONS
KALYDECO** (PA, QL)	ASTHMA/COPD/RESPIRATORY
KANJINTI*	CANCER
KESIMPTA* (PA)	MULTIPLE SCLEROSIS
KEVZARA* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
KISQALI** (PA)	CANCER
KISQALI FEMARA CO-PACK** (PA)	CANCER

MEDICATION NAME	DRUG CLASS
KITABIS PAK** (PA, QL)	INFECTIONS
KOGENATE FS*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
KORLYM** (PA)	DIABETES
KOVALTRY*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
KUVAN** (PA)	MISCELLANEOUS
KYLEENA**+	CONTRACEPTION PRODUCTS
LANREOTIDE*^ (PA)	HORMONAL AGENTS
ledipasvir-sofosbuvir** (PA,QL)	INFECTIONS
LENVIMA** (PA)	CANCER
LETAIRIS** (PA)	ASTHMA/COPD/RESPIRATORY
LONSURF** (PA)	CANCER
LORBRENA** (PA,QL)	CANCER
LOVENOX* (QL)	BLOOD THINNERS/ANTI-CLOTTING
LUMAKRAS** (PA, QL)	CANCER
LUPANETA PACK**^ (PA)	HORMONAL AGENTS
LUPRON DEPOT*^ (PA)	CANCER
LUPRON DEPOT-PED*^ (PA)	CANCER
LYNPARZA** (PA,QL)	CANCER
LYSTEDA**	BLOOD MODIFIERS/BLEEDING DISORDERS
MAKENA*	INFERTILITY
MAVENCLAD** (PA)	MULTIPLE SCLEROSIS
MAVYRET** (PA, QL)	INFECTIONS
MAYZENT** (PA)	MULTIPLE SCLEROSIS
MEKINIST** (PA,QL)	CANCER
MEKTOVI** (PA,QL)	CANCER
MENOPUR*^ (PA)	INFERTILITY
MIRENA**+	CONTRACEPTION PRODUCTS
MONOVISC*	PAIN RELIEF AND INFLAMMATORY DISEASE
MVASI*	CANCER
MYALEPT* (PA)	MISCELLANEOUS
mycophenolate**	TRANSPLANT MEDICATIONS
mycophenolic acid**	TRANSPLANT MEDICATIONS
MYFORTIC**	TRANSPLANT MEDICATIONS
NATPARA* (PA)	HORMONAL AGENTS
NERLYNX** (PA)	CANCER
NUBEQA** (PA)	CANCER
NEULASTA*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
NEULASTA ONPRO*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
NEUPOGEN*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
NEXAVAR** (PA)	CANCER
NINLARO** (PA,QL)	CANCER
NITYR** (PA)	MISCELLANEOUS

MEDICATION NAME	DRUG CLASS
NIVESTYM*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
NORDITROPIN FLEXPRO* (PA)	HORMONAL AGENTS
NORTHERA** (PA)	BLOOD PRESSURE/HEART MEDICATIONS
NOURIANZ** (PA, QL)	PARKINSON'S DISEASE
NOVAREL*^ (PA)	INFERTILITY
NOVOEIGHT*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
NUBEQA** (PA)	CANCER
NUCALA*	ASTHMA/COPD/RESPIRATORY
NUZYRA*	INFECTIONS
NYVEPRIA* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
OCALIVA** (PA)	GASTROINTESTINAL/HEARTBURN
OCREVUS*	MULTIPLE SCLEROSIS
ODEFSEY** (PA,QL)	AIDS/HIV
ODOMZO** (PA)	CANCER
OFEV** (PA)	ASTHMA/COPD/RESPIRATORY
OGIVRI*	CANCER
OLUMIANT** (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
ONTRUZANT*	CANCER
OPSUMIT** (PA)	ASTHMA/COPD/RESPIRATORY
ORENCIA*	PAIN RELIEF AND INFLAMMATORY DISEASE
ORENITRAM ER** (PA)	ASTHMA/COPD/RESPIRATORY
ORFADIN** (PA)	MISCELLANEOUS
ORGOVYX** (PA)	CANCER
ORKAMBI** (PA, QL)	ASTHMA/COPD/RESPIRATORY
ORLADEYO* (PA, QL)	BLOOD PRESSURE/HEART MEDICATIONS
ORTHOVISC*	PAIN RELIEF AND INFLAMMATORY DISEASE
OTEZLA** (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
OVIDREL*^ (PA)	INFERTILITY
OXERVATE** (PA)	EYE CONDITIONS
PALYNZIQ* (PA)	MISCELLANEOUS
PEGASYS* (PA)	INFECTIONS
penicillamine** (PA,QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
PLEGRIDY* (PA)	MULTIPLE SCLEROSIS
POMALYST** (PA,QL)	CANCER
PONVORY** (PA)	MULTIPLE SCLEROSIS
PREVYMIS**	INFECTIONS
PREZCOBIX** (PA)	AIDS/HIV
PREZISTA**	AIDS/HIV
PROCRIT*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
PROGRAF**	TRANSPLANT MEDICATIONS
PROLASTIN C*	ASTHMA/COPD/RESPIRATORY
PROLIA*	OSTEOPOROSIS PRODUCTS

MEDICATION NAME	DRUG CLASS
PROMACTA** (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
PULMOZYME** (PA)	ASTHMA/COPD/RESPIRATORY
PURIXAN**	CANCER
RAPAMUNE**	TRANSPLANT MEDICATIONS
RAVICTI** (PA)	GASTROINTESTINAL/HEARTBURN
REBIF* (PA)	MULTIPLE SCLEROSIS
REBIF REBIDOSE* (PA)	MULTIPLE SCLEROSIS
REMICADE*^ (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
RENFLIXIS*	PAIN RELIEF AND INFLAMMATORY DISEASE
RETACRIT*^ (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
REVATIO** (PA)	ASTHMA/COPD/RESPIRATORY
REVLIMID** (PA,QL)	CANCER
REZUROCK** (PA)	TRANSPLANT MEDICATIONS
RIABNI*	CANCER
ribavirin**	INFECTIONS
RINVOQ ER** (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
ritonavir**	AIDS/HIV
ROZLYTREK** (PA)	CANCER
RUBRACA** (PA,QL)	CANCER
RUCONEST*^ (PA)	BLOOD PRESSURE/HEART MEDICATIONS
RUXIENCE*	CANCER
sajazir* (PA)	BLOOD PRESSURE/HEART MEDICATIONS
SAMSCA**	DIURETICS
SANDOSTATIN*^ (PA)	HORMONAL AGENTS
SANDOSTATIN LAR DEPOT*^ (PA)	HORMONAL AGENTS
sapropterin** (PA)	MISCELLANEOUS
SELZENTRY** (PA)	AIDS/HIV
SEROSTIM* (PA)	HORMONAL AGENTS
SILIQ* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
SIMPONI* 100MG/ML (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
SIMPONI ARIA* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
sirolimus**	TRANSPLANT MEDICATIONS
SKYLA**+	CONTRACEPTION PRODUCTS
SKYRIZI* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
SKYTROFA* (PA)	HORMONAL AGENTS
sofosbuvir-velpatasvir** (PA,QL)	INFECTIONS
SOMATULINE DEPOT*^ (PA)	HORMONAL AGENTS
SOMAVERT* (PA)	HORMONAL AGENTS
SOVALDI** (PA, QL)	INFECTIONS
SPRYCEL** (PA,QL)	CANCER
STELARA*	PAIN RELIEF AND INFLAMMATORY DISEASE
STRENSIQ* (PA)	MISCELLANEOUS

MEDICATION NAME	DRUG CLASS
STRIBILD** (PA,QL)	AIDS/HIV
STIVARGA** (PA,QL)	CANCER
SUBLOCADE*	SUBSTANCE ABUSE
SUCRAID** (PA)	GASTROINTESTINAL/HEARTBURN
SUPARTZ FX*	PAIN RELIEF AND INFLAMMATORY DISEASE
SUPPRELIN LA**	HORMONAL AGENTS
SUTENT** (PA,QL)	CANCER
SYMDEKO** (PA, QL)	ASTHMA/COPD/RESPIRATORY
SYMTUZA** (QL)	AIDS/HIV
SYMFI**	AIDS/HIV
SYMFI LO**	AIDS/HIV
SYMTUZA**	AIDS/HIV
SYNVISC*	PAIN RELIEF AND INFLAMMATORY DISEASE
SYNVISC-ONE*	PAIN RELIEF AND INFLAMMATORY DISEASE
tacrolimus capsule**	TRANSPLANT MEDICATIONS
tadalafil 20mg** (PA)	ASTHMA/COPD/RESPIRATORY
TAFINLAR** (PA,QL)	CANCER
TAGRISO** (PA)	CANCER
TAKHZYRO* (PA)	BLOOD PRESSURE/HEART MEDICATIONS
TALTZ* (PA, QL)	PAIN RELIEF AND INFLAMMATORY DISEASE
TALZENNA** (PA,QL)	CANCER
TARGRETIN GEL ** (PA)	SKIN CONDITIONS
TASIGNA** (PA,QL)	CANCER
TAVALISSE** (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
TECFIDERA** (PA)	MULTIPLE SCLEROSIS
TEGSEDI* (PA)	MISCELLANEOUS
TEMODAR** (PA)	CANCER
TEMIXYS** (PA)	AIDS/HIV
temozolomide** (PA)	CANCER
tenofovir** (PA)	AIDS/HIV
teriparatide* (PA, QL)	HORMONAL AGENTS
TEZSPIRE* (PA)	ASTHMA/COPD/RESPIRATORY
tetrabenazine** (PA)	MISCELLANEOUS
THALOMID** (PA)	INFECTIONS
THIOLA**	URINARY TRACT CONDITIONS
THIOLA EC**	URINARY TRACT CONDITIONS
TIGLUTIK** (PA)	MISCELLANEOUS
TIVICAY**	AIDS/HIV
TOBI PODHALER** (PA, QL)	INFECTIONS
tobramycin 300 mg/5ml ampule** (PA, QL)	INFECTIONS
TRACLEER** (PA)	ASTHMA/COPD/RESPIRATORY
tranexamic acid**	BLOOD MODIFIERS/BLEEDING DISORDERS