

Oscar 2022 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 09/01/2021.

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 114. 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?

Please note, the formulary is reviewed and updated on a monthly basis and may be subject to change. Most changes in drug coverage occur on January 1, but Oscar may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new utilization management restrictions. If you are impacted by a change to the formulary, Oscar will aim to notify you at least 60 days prior to the change becoming effective.

If we make such a change, you or your prescriber may request an exception for continued coverage. You can find information in the section above entitled "How do I request an exception to the Oscar Formulary?"

You can contact Concierge to find out if your drug is still covered, visit hioscar.com and log in to your plan specific account, or use the Oscar app drug search feature.

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 114. 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
^	Insulin Co-Pay Cap	You will pay no more than \$100 per 30 day supply.

Get \$0 Tier 1 Drugs through Oscar Care

We're making medications on our Tier 1 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

IL 6T STND eff 01/01/2022

Drug Name	Drug Tier	Requirements/Limits
-----------	-----------	---------------------

ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS
(DNRIS)

SUNOSI TABS 75mg, 150mg	3	PA, QL (30 tabs / 30 days)
-------------------------	---	----------------------------

AMINOGLYCOSIDES**AMINOGLYCOSIDES**

tobramycin nebu 300mg/4ml	4	PA, QL (224 ml / 28 days)
---------------------------	---	---------------------------

ANALGESICS**COX-2 INHIBITORS**

celecoxib caps 50mg, 100mg, 200mg	2	
-----------------------------------	---	--

GOUT

allopurinol tabs 100mg, 300mg	1A	\$0 copay through Oscar Virtual Care
-------------------------------	----	--------------------------------------

allopurinol sodium solr 500mg	1B	\$0 copay through Oscar Virtual Care
-------------------------------	----	--------------------------------------

colchicine tabs .6mg	2	QL (120 tablets / 25 days)
----------------------	---	----------------------------

colchicine w/ probenecid tab 0.5-500 mg	1B	\$0 copay through Oscar Virtual Care
---	----	--------------------------------------

febuxostat tabs 40mg, 80mg	3	PA
----------------------------	---	----

probenecid tabs 500mg	1B	\$0 copay through Oscar Virtual Care
-----------------------	----	--------------------------------------

NON-OPIOID ANALGESICS

butalbital-acetaminophen-caffeine cap 50-300-40 mg	1B	QL (48 caps / 25 days); \$0 copay through Oscar Virtual Care
--	----	--

butalbital-acetaminophen-caffeine cap 50-325-40 mg	1B	QL (48 caps / 25 days); \$0 copay through Oscar Virtual Care
--	----	--

butalbital-acetaminophen-caffeine tab 50-325-40 mg	1B	QL (48 tabs / 25 days); \$0 copay through Oscar Virtual Care
--	----	--

butalbital-aspirin-caffeine cap 50-325-40 mg	1B	QL (48 caps / 25 days); \$0 copay through Oscar Virtual Care
--	----	--

tencon	1B	QL (48 tabs / 25 days); \$0 copay through Oscar Virtual Care
--------	----	--

NSAIDS

diclofenac potassium tabs 50mg	1B	\$0 copay through Oscar Virtual Care
--------------------------------	----	--------------------------------------

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium tb24 100mg; tbec 25mg, 50mg, 75mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>etodolac caps 200mg, 300mg; tabs 400mg, 500mg; tb24 400mg, 500mg, 600mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>flurbiprofen tabs 50mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>goodsense ibuprofen child susp 100mg/5ml</i>	1B	OTC; \$0 copay through Oscar Virtual Care
<i>ibuprofen tabs 400mg, 600mg, 800mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>ketorolac tromethamine soln 15mg/ml, 30mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>ketorolac tromethamine tabs 10mg</i>	1B	QL (20 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>meclofenamate sodium caps 50mg, 100mg</i>	2	
<i>mefenamic acid caps 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>meloxicam tabs 7.5mg, 15mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>nabumetone tabs 500mg, 750mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>naproxen tabs 250mg, 375mg, 500mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>oxaprozin tabs 600mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>piroxicam caps 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>sulindac tabs 150mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tolmetin sodium caps 400mg; tabs 200mg, 600mg</i>	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 (3 units / day); \$0 copay through Oscar Virtual Care
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1B	QL (3 units / day); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1B	QL (3 units / day); \$0 copay through Oscar Virtual Care
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	1B	QL (2 units / day); \$0 copay through Oscar Virtual Care
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	0	QL (3 units / day); \$0 copay
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	0	QL (3 units / day); \$0 copay
ZUBSOLV SUB 0.7-0.18	2	QL (3 units / day)
ZUBSOLV SUB 1.4-0.36	2	QL (3 units / day)
ZUBSOLV SUB 2.9-0.71	2	QL (3 units / day)
ZUBSOLV SUB 5.7-1.4	2	QL (3 units / day)
ZUBSOLV SUB 8.6-2.1	2	QL (2 units / day)
ZUBSOLV SUB 11.4-2.9	2	QL (1 unit / day)

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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<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 copay through Oscar Virtual Care
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 copay through Oscar Virtual Care
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>fentanyl pt72 12mcg/hr, 25mcg/hr</i>	1B	ST, QL (10 patches / 25 days); \$0 copay through Oscar Virtual Care
<i>fentanyl pt72 50mcg/hr, 75mcg/hr, 100mcg/hr</i>	1B	ST, PA; High Strength Requires PA; \$0 copay through Oscar Virtual Care
<i>fentanyl citrate lpop 200mcg, 400mcg, 600mcg, 800mcg, 1200mcg, 1600mcg</i>	1B	PA, QL (120 lozenges / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone bitartrate t24a 20mg, 30mg, 40mg, 60mg, 80mg</i>	1B	ST, QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>hydrocodone bitartrate t24a 100mg, 120mg</i>	1B	ST, PA; High Strength Requires PA; \$0 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<i>hydromorphone hcl soln 1mg/ml, 2mg/ml, 4mg/ml, 10mg/ml</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
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 copay through Oscar Virtual Care
<i>hydromorphone hcl tabs 4mg</i>	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 copay through Oscar Virtual Care
<i>hydromorphone hcl tabs 8mg</i>	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 copay through Oscar Virtual Care
<i>hydromorphone hcl tb24 8mg, 12mg, 16mg</i>	1B	ST, QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>hydromorphone hcl tb24 32mg</i>	1B	ST, PA; High Strength Requires PA; \$0 copay through Oscar Virtual Care
<i>methadone hcl conc 10mg/ml</i>	1B	QL (30 ml / 25 days); (indicated for opioid addiction); \$0 copay through Oscar Virtual Care
<i>methadone hcl soln 5mg/5ml</i>	1B	ST, QL (450 ml / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl soln 10mg/5ml</i>	1B	ST, QL (300 mL / 25 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>methadone hcl soln 10mg/ml</i>	1B	ST, QL (20 ml / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl tabs 5mg</i>	1B	ST, QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl tabs 10mg</i>	1B	ST, QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hcl tbso 40mg</i>	1B	QL (9 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>methadone hydrochloride i conc 10mg/ml</i>	1B	ST, QL (60 mL / 25 days); (generic of Methadone Intensol, indicated for pain); \$0 copay through Oscar Virtual Care
<i>methadose tbso 40mg</i>	1B	QL (9 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate cp24 10mg, 20mg, 30mg</i>	1B	ST, QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate cp24 50mg, 60mg, 80mg</i>	1B	ST, QL (30 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate cp24 100mg; tbc 60mg, 100mg, 200mg</i>	1B	ST, PA; High Strength Requires PA; \$0 copay through Oscar Virtual Care
MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 150mg/30ml	3	
<i>morphine sulfate soln 10mg/5ml</i>	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 copay through Oscar Virtual Care
<i>morphine sulfate soln 20mg/5ml</i>	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 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate soln 100mg/5ml</i>	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 copay through Oscar Virtual Care
<i>morphine sulfate soln .5mg/ml, 1mg/ml, 4mg/ml, 8mg/ml, 10mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>morphine sulfate supp 5mg, 10mg</i>	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 copay through Oscar Virtual Care
<i>morphine sulfate supp 20mg</i>	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 copay through Oscar Virtual Care
<i>morphine sulfate supp 30mg</i>	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 copay through Oscar Virtual Care
<i>morphine sulfate tabs 15mg</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 copay through Oscar Virtual Care
<i>morphine sulfate tabs 30mg</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 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tbc</i> 15mg, 30mg	1B	ST, QL (90 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate beads cp24</i> 30mg, 45mg, 60mg, 75mg, 90mg	1B	ST, QL (30 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>morphine sulfate beads cp24</i> 120mg	1B	ST, PA; High Strength Requires PA; \$0 copay through Oscar Virtual Care
<i>nalbuphine hcl soln</i> 10mg/ml, 20mg/ml	1B	\$0 copay through Oscar Virtual Care
<i>oxycodone hcl caps</i> 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 copay through Oscar Virtual Care
<i>oxycodone hcl conc</i> 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 copay through Oscar Virtual Care
<i>oxycodone hcl soln</i> 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 copay through Oscar Virtual Care
<i>oxycodone hcl t12a</i> 10mg, 15mg, 20mg, 30mg	1B	ST, QL (60 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>oxycodone hcl t12a</i> 40mg, 60mg, 80mg	1B	ST, PA; High Strength Requires PA; \$0 copay through Oscar Virtual Care
<i>oxycodone hcl tabs</i> 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 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone hcl tabs 15mg</i>	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 copay through Oscar Virtual Care
<i>oxycodone hcl tabs 20mg</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 copay through Oscar Virtual Care
<i>oxycodone hcl tabs 30mg</i>	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 copay through Oscar Virtual Care
<i>oxycodone w/ acetaminophen soln 5-325 mg/5ml</i>	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 copay through Oscar Virtual Care
<i>oxycodone w/ acetaminophen tab 2.5-325 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 copay through Oscar Virtual Care
<i>oxycodone w/ acetaminophen tab 5-325 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 copay through Oscar Virtual Care

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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<i>oxymorphone hcl tb12 5mg, 7.5mg, 10mg, 15mg</i>	2	ST, QL (60 tabs / 25 days)
<i>oxymorphone hcl tb12 20mg, 30mg, 40mg</i>	2	ST, PA; High Strength Requires PA

Drug Name	Drug Tier	Requirements/Limits
<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 copay through Oscar Virtual Care
<i>tramadol hcl tabs 100mg</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 copay through Oscar Virtual Care
<i>tramadol hcl tb24 100mg</i>	1B	ST, QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>tramadol hcl tb24 200mg, 300mg</i>	1B	ST, PA; High Strength Requires PA; \$0 copay through Oscar Virtual Care
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	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 copay through Oscar Virtual Care

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 soln .3mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>buprenorphine hcl subl 2mg, 8mg</i>	0	QL (90 tabs / 30 days); \$0 copay; Must obtain approval after the first 30 day supply
SUBLOCADE SOSY 100mg/0.5ml, 300mg/1.5ml	4	

Drug Name	Drug Tier	Requirements/Limits
SALICYLATES		
<i>aspirin enteric coated ad tbec 81mg</i>	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 tabs 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>goodsense aspirin chew 81mg</i>	0	QL (100 tabs / 30 days), OTC; \$0 copay for members age 50-59 or members at risk for preeclampsia, otherwise not covered

ANALGESICS - ANTI-INFLAMMATORY

NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)

<i>indomethacin caps 25mg, 50mg</i>	1B	\$0 copay through Oscar Virtual Care
-------------------------------------	----	--------------------------------------

ANALGESICS - OPIOID

OPIOID AGONISTS

<i>levorphanol tartrate tabs 2mg, 3mg</i>	3	PA
---	---	----

ANESTHETICS

LOCAL ANESTHETICS

LIDO/DEXTROS INJ 5-7.5%	3	
<i>lidocaine hcl (local anesth.) soln .5%, 1%, 1.5%, 2%, 4%</i>	1B	\$0 copay through Oscar Virtual Care

ANTI-INFECTIVES

ANTI-BACTERIALS - MISCELLANEOUS

<i>amikacin sulfate soln 1gm/4ml, 500mg/2ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>chloramphenicol sodium succinate solr 1gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>fosfomycin tromethamine pack 3gm</i>	2	
<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

Drug Name	Drug Tier	Requirements/Limits
<i>gentamicin sulfate soln 10mg/ml, 40mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>neomycin sulfate tabs 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>paromomycin sulfate caps 250mg</i>	2	
<i>streptomycin sulfate solr 1gm</i>	1B	\$0 copay through Oscar Virtual Care
SULFADIAZINE TABS 500mg	3	
<i>tinidazole tabs 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tobramycin nebu 300mg/5ml</i>	4	PA, QL (280 mL / 28 days)
<i>tobramycin sulfate soln 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml; solr 1.2gm</i>	1B	\$0 copay through Oscar Virtual Care
ANTI-INFECTIVES - MISCELLANEOUS		
ALINIA SUSR 100mg/5ml	3	QL (540mL / 25 days)
<i>atovaquone susp 750mg/5ml</i>	3	
AZACTAM/DEX INJ 1GM	3	
AZACTAM/DEX INJ 2GM	3	
<i>aztreonam solr 1gm, 2gm</i>	1B	\$0 copay through Oscar Virtual Care
CAYSTON SOLR 75mg	4	PA, QL (84 vials / 28 days)
<i>clindamycin hcl caps 75mg, 150mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>clindamycin palmitate hydrochloride solr 75mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>clindamycin phosphate soln 9gm/60ml, 300mg/2ml, 600mg/4ml, 900mg/6ml, 9000mg/60ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>dapsone tabs 25mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>daptomycin solr 500mg</i>	3	
<i>doripenem solr 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
EMVERM CHEW 100mg	3	PA, QL (12 tabs / 365 days)
<i>ertapenem sodium solr 1gm</i>	3	
<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 tabs 3mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>linezolid soln 600mg/300ml; susr 100mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>linezolid tabs 600mg</i>	3	
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	1B	\$0 copay through Oscar Virtual Care
<i>meropenem solr 1gm, 500mg</i>	3	
<i>methenamine hippurate tabs 1gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>metronidazole tabs 250mg, 500mg</i>	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
<i>nitazoxanide tabs 500mg</i>	3	QL (20 tabs / 25 days)
<i>nitrofurantoin susp 25mg/5ml</i>	3	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin macrocrystal caps 25mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>nitrofurantoin macrocrystal caps 50mg, 100mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>nitrofurantoin monohyd macro caps 100mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>pentamidine isethionate solr 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>polymyxin b sulfate solr 500000unit</i>	1B	\$0 copay through Oscar Virtual Care
<i>praziquantel tabs 600mg</i>	3	QL (24 tabs / 365 days)
PRIMSOL SOLN 50mg/5ml	2	
<i>pyrimethamine tabs 25mg</i>	2	PA
SIVEXTRO SOLR 200mg; TABS 200mg	3	
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1A	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>trimethoprim tabs 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>vancomycin hcl caps 125mg, 250mg</i>	3	QL (80 caps / 10 days)
<i>vancomycin hcl solr 1gm, 5gm, 10gm, 500mg, 750mg</i>	3	
XIFAXAN TABS 200mg	3	QL (9 tabs / 25 days)
XIFAXAN TABS 550mg	3	PA

ANTIFUNGALS

<i>amphotericin b solr 50mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>bio-statin</i>	1B	\$0 copay through Oscar Virtual Care
BIO-STATIN CAPS 500000unit, 1000000unit	2	
<i>fluconazole susr 10mg/ml, 40mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>fluconazole tabs 50mg, 100mg, 150mg, 200mg</i>	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 susp 125mg/5ml; tabs 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>griseofulvin ultramicrosize tabs 125mg, 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>itraconazole caps 100mg; soln 10mg/ml</i>	3	PA
<i>nystatin tabs 500000unit</i>	1B	\$0 copay through Oscar Virtual Care
<i>terbinafine hcl tabs 250mg</i>	1B	QL (180 tabs / 365 days); \$0 copay through Oscar Virtual Care
<i>voriconazole susr 40mg/ml; tabs 50mg, 200mg</i>	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 tabs 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
COARTEM TAB 20-120MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>mefloquine hcl tabs 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>primaquine phosphate tabs 26.3mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>quinine sulfate caps 324mg</i>	1B	\$0 copay through Oscar Virtual Care

ANTIRETROVIRAL AGENTS

<i>abacavir sulfate soln 20mg/ml</i>	1B	QL (900 mL / 30 days); \$0 copay through Oscar Virtual Care
<i>abacavir sulfate tabs 300mg</i>	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)
<i>atazanavir sulfate caps 150mg, 300mg</i>	1B	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>atazanavir sulfate caps 200mg</i>	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 cpdr 200mg, 250mg, 400mg</i>	1B	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
EDURANT TABS 25mg	2	QL (60 tabs / 30 days)
<i>efavirenz caps 50mg, 200mg</i>	1B	QL (90 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>efavirenz tabs 600mg</i>	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>emtricitabine caps 200mg</i>	1B	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
EMTRIVA SOLN 10mg/ml	2	QL (680 ml / 28 days)
<i>etravirine tabs 100mg</i>	1B	QL (120 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>etravirine tabs 200mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>fosamprenavir calcium tabs 700mg</i>	1B	QL (120 tabs / 30 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
FUZEON SOLR 90mg	4	QL (60 vials / 30 days)
INTELENCE TABS 25mg	2	QL (120 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 soln 10mg/ml</i>	1B	QL (900 ml / 30 days); \$0 copay through Oscar Virtual Care
<i>lamivudine tabs 150mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>lamivudine tabs 300mg</i>	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
LEXIVA SUSP 50mg/ml	2	QL (1575 mL / 28 days)
<i>nevirapine susp 50mg/5ml</i>	1B	QL (1200 mL / 30 days); \$0 copay through Oscar Virtual Care
<i>nevirapine tabs 200mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>nevirapine tb24 100mg</i>	1B	QL (90 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>nevirapine tb24 400mg</i>	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)

Drug Name	Drug Tier	Requirements/Limits
<i>ritonavir tabs 100mg</i>	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 caps 15mg, 20mg, 30mg, 40mg</i>	1B	QL (60 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>tenofovir disoproxil fumarate tabs 300mg</i>	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)
VIREAD TABS 150mg, 200mg, 250mg	2	QL (30 tabs / 30 days)
ZERIT SOLR 1mg/ml	2	QL (2400 ml / 30 days)
<i>zidovudine caps 100mg</i>	1B	QL (180 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>zidovudine syrp 50mg/5ml</i>	1B	QL (1800 ml / 30 days); \$0 copay through Oscar Virtual Care
<i>zidovudine tabs 300mg</i>	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)

Drug Name	Drug Tier	Requirements/Limits
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 100-150 mg</i>	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 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 1B 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
ODEFSEY TAB	2	QL (30 tabs / 30 days)
PREZCOBIX TAB 800-150	2	QL (30 tabs / 30 days)
TEMIXYS TAB 300-300	2	QL (30 tabs / 30 days)
TRIUMEQ TAB	2	QL (30 tabs / 30 days)
ANTITUBERCULAR AGENTS		
<i>cycloserine caps 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ethambutol hcl tabs 100mg, 400mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>isoniazid soln 100mg/ml; syrp 50mg/5ml; tabs 100mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
PASER PACK 4gm	3	
PRIFTIN TABS 150mg	2	
<i>pyrazinamide tabs 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>rifabutin caps 150mg</i>	2	
RIFAMATE CAP	2	
<i>rifampin caps 150mg, 300mg; solr 600mg</i>	1B	\$0 copay through Oscar Virtual Care
RIFATER TAB	2	
SIRTURO TABS 100mg	4	PA
TRECTOR TABS 250mg	2	

ANTIVIRALS

<i>acyclovir caps 200mg; tabs 400mg, 800mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>acyclovir susp 200mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>acyclovir sodium soln 50mg/ml; solr 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>adefovir dipivoxil tabs 10mg</i>	4	PA
BARACLUDE SOLN .05mg/ml	3	PA, QL (600 mL / 30 days)
<i>cidofovir soln 75mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>entecavir tabs .5mg, 1mg</i>	3	PA
EPIVIR HBV SOLN 5mg/ml	2	
<i>famciclovir tabs 125mg, 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>lamivudine (hbv) tabs 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>oseltamivir phosphate caps 30mg</i>	2	QL (40 caps / 90 days)
<i>oseltamivir phosphate caps 45mg, 75mg</i>	2	QL (20 caps / 90 days)
<i>oseltamivir phosphate susr 6mg/ml</i>	2	QL (360 mL / 90 days)
RELENZA DISKHALER AEPB 5mg/blister	2	QL (2 inhalers / 90 days)
<i>ribavirin solr 6gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>rimantadine hydrochloride tabs 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valacyclovir hcl tabs 500mg, 1000mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valganciclovir hcl solr 50mg/ml</i>	4	QL (1000 mL / 30 days)
<i>valganciclovir hcl tabs 450mg</i>	4	QL (102 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
VEMLIDY TABS 25mg	4	PA, QL (30 tabs / 30 days)

CEPHALOSPORINS

<i>cefaclor caps 250mg, 500mg; susr 125mg/5ml, 250mg/5ml, 375mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefadroxil caps 500mg; susr 250mg/5ml, 500mg/5ml; tabs 1gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefazolin sodium solr 1gm, 10gm, 20gm, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefdinir caps 300mg; susr 125mg/5ml, 250mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefditoren pivoxil tabs 200mg, 400mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefepime hcl solr 1gm, 2gm</i>	3	
<i>cefixime caps 400mg; susr 100mg/5ml, 200mg/5ml</i>	2	
<i>cefotaxime sodium solr 1gm, 2gm, 10gm, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefotetan disodium solr 1gm, 2gm, 10gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefoxitin sodium solr 1gm, 2gm, 10gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefpodoxime proxetil susr 50mg/5ml, 100mg/5ml; tabs 100mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefprozil susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ceftazidime solr 2gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>ceftibuten caps 400mg; susr 180mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
CEFTIN SUSR 125mg/5ml, 250mg/5ml	2	
<i>ceftriaxone sodium solr 1gm, 2gm, 10gm, 250mg, 500mg</i>	3	
<i>cefuroxime axetil tabs 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cefuroxime sodium solr 1.5gm, 7.5gm, 750mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cephalexin caps 250mg, 500mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>cephalexin caps 750mg; susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
SUPRAX CHEW 100mg, 200mg; SUSR 500mg/5ml	2	
<i>tazicef solr 1gm, 2gm, 6gm</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
ERYTHROMYCINS/MACROLIDES		
<i>azithromycin pack 1gm; solr 500mg; susr 100mg/5ml, 200mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>azithromycin tabs 250mg, 500mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>azithromycin tabs 600mg</i>	2	
<i>clarithromycin susr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg; tb24 500mg</i>	1B	\$0 copay through Oscar Virtual Care
DIFICID TABS 200mg	2	PA
<i>e.e.s. 400 tabs 400mg</i>	3	
<i>ery-tab tbec 250mg, 333mg, 500mg</i>	2	
ERYTHROCIN LACTOBIONATE SOLR 500mg	3	
<i>erythrocin stearate tabs 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>erythromycin base cpep 250mg; tabs 500mg</i>	2	
<i>erythromycin base tabs 250mg</i>	3	
<i>erythromycin ethylsuccinate susr 200mg/5ml, 400mg/5ml; tabs 400mg</i>	3	
PCE TBEC 333mg, 500mg	3	
ZMAX SUSR 2gm	3	
FLUOROQUINOLONES		
CIPRO SUSR 500mg/5ml	3	
<i>ciprofloxacin soln 200mg/20ml, 400mg/40ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin 200 mg/100ml in d5w</i>	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin 400 mg/200ml in d5w</i>	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin hcl tabs 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ciprofloxacin hcl tabs 250mg, 500mg, 750mg</i>	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 soln 25mg/ml; tabs 250mg, 500mg, 750mg</i>	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

Drug Name	Drug Tier	Requirements/Limits
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>moxifloxacin hcl tabs 400mg</i>	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 tabs 300mg, 400mg</i>	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) caps 200mg</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>ribavirin (hepatitis c) tabs 200mg</i>	3	PA
SOVALDI PACK 150mg, 200mg	5	QL (28 pellets / 28 days); MNPA
SOVALDI TABS 200mg, 400mg	5	QL (28 tabs / 28 days); MNPA
VOSEVI TAB	4	PA, QL (28 tabs / 28 days)
ZEPATIER TAB 50-100MG	5	QL (28 tabs / 28 days); MNPA

PENICILLINS

<i>amoxicillin caps 250mg, 500mg; susr 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; tabs 500mg, 875mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>amoxicillin chew 125mg, 250mg</i>	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

Drug Name	Drug Tier	Requirements/Limits
<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 caps 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	3	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	3	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	3	
<i>ampicillin sodium solr 1gm, 2gm, 10gm, 125mg, 250mg, 500mg</i>	3	
AUGMENTIN SUS 125/5ML	2	
<i>dicloxacillin sodium caps 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>nafcillin sodium solr 1gm, 2gm, 10gm</i>	3	
<i>oxacillin sodium solr 1gm, 2gm, 10gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>penicillin g potassium solr 5000000unit, 20000000unit</i>	1B	\$0 copay through Oscar Virtual Care
<i>penicillin g sodium solr 5000000unit</i>	1B	\$0 copay through Oscar Virtual Care
<i>penicillin v potassium solr 125mg/5ml, 250mg/5ml; tabs 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>pfizerpen solr 20mu</i>	1B	\$0 copay through Oscar Virtual Care
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	3	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	3	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	3	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	3	

Drug Name	Drug Tier	Requirements/Limits
TETRACYCLINES		
<i>avidoxy tabs 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>demeclocycline hcl tabs 150mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>doxy 100 solr 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>doxycycline (monohydrate) caps 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>doxycycline (monohydrate) caps 75mg, 150mg; susr 25mg/5ml; tabs 50mg, 75mg, 150mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>doxycycline hyclate caps 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>doxycycline hyclate solr 100mg; tabs 20mg, 100mg; tbec 75mg, 100mg, 150mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>minocycline hcl caps 50mg, 75mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>minocycline hcl tabs 50mg, 75mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>morgidox 1x100mg caps 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>tetracycline hcl caps 250mg, 500mg</i>	3	
VIBRAMYCIN SYRP 50mg/5ml	3	
ANTI-ANXIETY AGENTS		
BENZODIAZEPINES		
<i>chlordiazepoxide hcl caps 5mg, 10mg, 25mg</i>	1B	\$0 copay through Oscar Virtual Care
ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS		
STEROID INHALANTS		
FLOVENT DISKUS AEPB 50mcg/blist, 100mcg/blist, 250mcg/blist	2	QL (1 package / 25 days)
FLOVENT HFA AERO 44mcg/act, 110mcg/act, 220mcg/act	2	QL (1 package / 25 days)
SYMPATHOMIMETICS		
DUAKLIR AER 400/12	3	QL (1 inhaler / 25 days); MNPA
ANTIDIABETICS		
INSULIN		
APIDRA SOLN 100unit/ml	3	MNPA
ANTINEOPLASTIC AGENTS		
ALKYLATING AGENTS		
<i>busulfan soln 6mg/ml</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>carmustine solr 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cyclophosphamide caps 25mg, 50mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cyclophosphamide solr 1gm, 2gm, 500mg</i>	4	
<i>dacarbazine solr 100mg, 200mg</i>	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 soln 1gm/20ml, 3gm/60ml; solr 1gm</i>	1B	\$0 copay through Oscar Virtual Care
LEUKERAN TABS 2mg	2	
<i>melphalan tabs 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>melphalan hcl solr 50mg</i>	1B	\$0 copay through Oscar Virtual Care
TEMODAR SOLR 100mg	4	PA
<i>temozolomide caps 5mg, 20mg, 100mg, 140mg, 180mg, 250mg</i>	4	PA
ANTHRACYCLINES		
<i>daunorubicin hcl soln 20mg/4ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>doxorubicin hcl soln 2mg/ml; solr 10mg, 50mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>doxorubicin hcl liposomal inj 2mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>epirubicin hcl soln 50mg/25ml, 200mg/100ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>idarubicin hcl soln 5mg/5ml, 10mg/10ml, 20mg/20ml</i>	1B	\$0 copay through Oscar Virtual Care
ANTIBIOTICS		
<i>bleomycin sulfate solr 15unit, 30unit</i>	1B	\$0 copay through Oscar Virtual Care
<i>mitomycin solr 5mg, 20mg, 40mg</i>	1B	\$0 copay through Oscar Virtual Care
ANTIMETABOLITES		
<i>adrucil soln 500mg/10ml</i>	1B	\$0 copay through Oscar Virtual Care
ALIMTA SOLR 100mg, 500mg	4	
ARRANON SOLN 5mg/ml	2	
<i>azacitidine susr 100mg</i>	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>capecitabine tabs 150mg</i>	4	PA, QL (120 tabs / 30 days)
<i>capecitabine tabs 500mg</i>	4	PA, QL (300 tabs / 30 days)
<i>cladribine soln 10mg/10ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>clofarabine soln 1mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>cytarabine soln 20mg/ml, 100mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>decitabine solr 50mg</i>	4	PA
<i>floxuridine solr .5gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>fludarabine phosphate soln 50mg/2ml; solr 50mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>fluorouracil soln 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>gemcitabine hcl soln 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; solr 1gm, 2gm, 200mg</i>	4	
<i>mercaptopurine tabs 50mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>methotrexate sodium soln 1gm/40ml, 50mg/2ml, 250mg/10ml; solr 1gm</i>	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 conc 20mg/ml, 80mg/4ml, 160mg/8ml; soln 20mg/2ml, 80mg/8ml, 160mg/16ml</i>	1B	\$0 copay through Oscar Virtual Care
DOCETAXEL (NON-ALCOHOL FO SOLN 20mg/ml, 80mg/4ml, 160mg/8ml	2	
<i>paclitaxel conc 30mg/5ml, 100mg/16.7ml, 150mg/25ml, 300mg/50ml</i>	1B	\$0 copay through Oscar Virtual Care
ANTIMITOTIC, VINCA ALKALOIDS		
<i>vinblastine sulfate soln 1mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>vincasar pfs soln 1mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>vincristine sulfate soln 1mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>vinorelbine tartrate soln 10mg/ml, 50mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
BIOLGIC 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 tabs 250mg</i>	4	PA, QL (120 tabs / 30 days)
<i>abiraterone acetate tabs 500mg</i>	4	PA, QL (60 tabs / 30 days)
<i>anastrozole tabs 1mg</i>	1B	\$0 copay for women ages 35 and older for the primary prevention of breast cancer; \$0 copay through Oscar Virtual Care
<i>bicalutamide tabs 50mg</i>	1B	\$0 copay through Oscar Virtual Care
DEPO-PROVERA SUSP 400mg/ml	3	
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	4	PA

Drug Name	Drug Tier	Requirements/Limits
ERLEADA TABS 60mg	4	PA, QL (120 tabs / 30 days)
<i>exemestane tabs 25mg</i>	1B	PA; \$0 copay for women ages 35 and older for the primary prevention of breast cancer; \$0 copay through Oscar Virtual Care
<i>flutamide caps 125mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>fulvestrant soln 250mg/5ml</i>	4	
<i>letrozole tabs 2.5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>leuprolide acetate kit 1mg/0.2ml</i>	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 susp 40mg/ml; tabs 20mg, 40mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>megestrol acetate (appetite) susp 625mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>nilutamide tabs 150mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tamoxifen citrate tabs 10mg, 20mg</i>	1B	\$0 copay for women ages 35 and older for the primary prevention of breast cancer; \$0 copay through Oscar Virtual Care
<i>toremifene citrate tabs 60mg</i>	2	
XTANDI CAPS 40mg	4	PA, QL (120 caps / 30 days)
XTANDI TABS 40mg	4	PA, QL (120 tabs / 30 days)
XTANDI TABS 80mg	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 tabs 25mg</i>	4	PA, QL (60 tabs / 30 days)
<i>erlotinib hcl tabs 100mg, 150mg</i>	4	PA, QL (30 tabs / 30 days)
<i>everolimus tabs 2.5mg, 5mg, 7.5mg</i>	4	PA, QL (30 tabs / 30 days)
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg	4	PA, QL (30 tabs / 30 days)
IDHIFA TABS 50mg, 100mg	4	PA, QL (30 tabs / 30 days)
<i>imatinib mesylate tabs 100mg</i>	4	PA, QL (90 tabs / 30 days)
<i>imatinib mesylate tabs 400mg</i>	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 tabs 250mg</i>	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)
<i>sunitinib malate caps 12.5mg, 25mg, 37.5mg, 50mg</i>	4	PA, QL (30 caps / 30 days)
TAFINLAR CAPS 50mg, 75mg	4	PA, QL (120 caps / 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 (120 caps / 30 days)
ZELBORAF TABS 240mg	4	PA, QL (240 tabs / 30 days)

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 soln 10mg/10ml, 12mg/6ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>bexarotene caps 75mg</i>	4	PA
DROXIA CAPS 200mg, 300mg, 400mg	2	
<i>hydroxyurea caps 500mg</i>	1B	\$0 copay through Oscar Virtual Care
MATULANE CAPS 50mg	2	
<i>mitoxantrone hcl conc 2mg/ml</i>	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) caps 10mg</i>	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 soln 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>cisplatin soln 50mg/50ml, 100mg/100ml, 200mg/200ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>oxaliplatin soln 50mg/10ml, 100mg/20ml; solr 50mg, 100mg</i>	4	

PROTECTIVE AGENTS

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

TOPOISOMERASE INHIBITORS

<i>etoposide caps 50mg; soln 100mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
--	----	--------------------------------------

Drug Name	Drug Tier	Requirements/Limits
<i>irinotecan hcl soln 40mg/2ml, 100mg/5ml, 500mg/25ml</i>	4	
<i>irinotecan hcl soln 300mg/15ml</i>	1B	\$0 copay through Oscar Virtual Care
TENIPOSIDE SOLN 10mg/ml	2	
<i>toposar soln 1gm/50ml, 100mg/5ml, 500mg/25ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>topotecan hcl solr 4mg</i>	1B	\$0 copay through Oscar Virtual Care

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ALKYLATING AGENTS

<i>paraplatin soln 1000mg/100ml</i>	1B	\$0 copay through Oscar Virtual Care
-------------------------------------	----	--------------------------------------

ANTINEOPLASTIC COMBINATIONS

KISQALI 200 PAK FEMARA	4	PA, QL (49 tabs / 28 days)
KISQALI 400 PAK FEMARA	4	PA, QL (70 tabs / 28 days)
KISQALI 600 PAK FEMARA	4	PA, QL (91 tabs / 28 days)

ANTINEOPLASTIC ENZYME INHIBITORS

VERZENIO TABS 50mg, 100mg, 150mg, 200mg	5	PA, QL (60 tabs / 30 days)
---	---	----------------------------

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

ANTIPSYCHOTICS/ANTIMANIC AGENTS

BENZISOXAZOLES

INVEGA SUSTENNA SUSY 39mg/0.25ml, 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	2	QL (1 injection / 25 days)
INVEGA TRINZA SUSY 273mg/0.875ml, 410mg/1.315ml, 546mg/1.75ml, 819mg/2.625ml	2	QL (1 injection / 84 days)
PERSERIS PRSY 90mg, 120mg	2	QL (1 injection / 25 days)
RISPERDAL CONSTA SRER 12.5mg, 25mg, 37.5mg, 50mg	2	QL (2 injections / 25 days)

DIBENZAPINES

ZYPREXA RELPREVV SUSR 210mg, 300mg	2	QL (2 injections / 25 days)
------------------------------------	---	-----------------------------

Drug Name	Drug Tier	Requirements/Limits
ZYPREXA RELPREVV SUSR 405mg	2	QL (1 injection / 25 days)

QUINOLINONE DERIVATIVES

ABILIFY MAINTENA PRSY 300mg, 400mg; SRER 300mg, 400mg	2	QL (1 injection / 25 days)
--	---	----------------------------

ANTIVIRALS

HEPATITIS AGENTS

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

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
<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

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

Drug Name	Drug Tier	Requirements/Limits
<i>ramipril caps 1.25mg, 2.5mg, 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>trandolapril tabs 1mg, 2mg, 4mg</i>	1A	\$0 copay through Oscar Virtual Care

ALDOSTERONE RECEPTOR ANTAGONISTS

<i>eplerenone tabs 25mg, 50mg</i>	1B	\$0 copay through Oscar Virtual Care
-----------------------------------	----	--------------------------------------

ALPHA BLOCKERS

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

Drug Name	Drug Tier	Requirements/Limits
<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
<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

Drug Name	Drug Tier	Requirements/Limits
<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
MULTAQ TABS 400mg	3	PA
NEXTERONE INJ	3	
NORPACE CR CP12 100mg, 150mg	2	
<i>pacerone tabs 100mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>procainamide hcl soln 100mg/ml</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>propafenone hcl cp12 225mg, 325mg, 425mg; tabs 150mg, 225mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>quinidine sulfate tabs 200mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>sorine tabs 80mg, 120mg, 160mg, 240mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>sotalol hcl tabs 80mg, 120mg, 160mg, 240mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>sotalol hcl (afib/afl) tabs 80mg, 120mg, 160mg</i>	1B	\$0 copay through Oscar Virtual Care
SOTALOL HYDROCHLORIDE SOLN 150mg/10ml	3	

ANTILIPEMICS, BILE ACID RESINS

<i>cholestyramine pack 4gm; powd 4gm/dose</i>	1B	\$0 copay through Oscar Virtual Care
<i>cholestyramine light pack 4gm; powd 4gm/dose</i>	1B	\$0 copay through Oscar Virtual Care
<i>colestipol hcl gran 5gm; pack 5gm; tabs 1gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>prevalite powd 4gm/dose</i>	1B	\$0 copay through Oscar Virtual Care

ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITOR

<i>ezetimibe tabs 10mg</i>	1B	PA; \$0 copay through Oscar Virtual Care
----------------------------	----	--

ANTILIPEMICS, FIBRATES

<i>choline fenofibrate cpdr 45mg, 135mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>fenofibrate caps 50mg, 150mg; tabs 48mg, 54mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>fenofibrate tabs 145mg</i>	2	
<i>fenofibrate tabs 160mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>fenofibrate micronized caps 43mg, 67mg, 130mg, 134mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>gemfibrozil tabs 600mg</i>	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	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
<i>atorvastatin calcium tabs 10mg, 20mg</i>	1A	\$0 copay for members age 40 through 75; \$0 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<i>pravastatin sodium tabs 10mg, 20mg, 40mg, 80mg</i>	1B	\$0 copay for members age 40 through 75; \$0 copay through Oscar Virtual Care
<i>rosuvastatin calcium tabs 5mg, 10mg</i>	1B	PA; \$0 copay for members age 40 through 75; \$0 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
<i>simvastatin tabs 80mg</i>	1A	\$0 copay through Oscar Virtual Care
ANTILIPEMICS, MISCELLANEOUS		
<i>niacin (antihyperlipidemic) tbc 500mg, 750mg, 1000mg</i>	1B	\$0 copay through Oscar Virtual Care
ANTILIPEMICS, OMEGA-3 FATTY ACIDS		
<i>icosapent ethyl caps 1gm</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>omega-3-acid ethyl esters cap 1 gm</i>	1B	PA; \$0 copay through Oscar Virtual Care
VASCEPA CAPS .5gm	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

Drug Name	Drug Tier	Requirements/Limits
<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
<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

Drug Name	Drug Tier	Requirements/Limits
<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

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	

Drug Name	Drug Tier	Requirements/Limits
<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
<i>matzim la tb24 180mg, 240mg, 300mg, 360mg, 420mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>nicardipine hcl caps 20mg, 30mg; soln 2.5mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>nifedipine tb24 30mg, 60mg, 90mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>nimodipine caps 30mg</i>	3	
<i>nisoldipine tb24 8.5mg, 17mg, 20mg, 25.5mg, 30mg, 34mg, 40mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>taztia xt cp24 120mg, 180mg, 240mg, 300mg, 360mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>verapamil hcl cp24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; soln 2.5mg/ml; tbc 120mg, 180mg, 240mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>verapamil hcl tabs 40mg, 80mg, 120mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>DIGITALIS GLYCOSIDES</i>		
<i>digox tabs 125mcg, 250mcg</i>	1B	\$0 copay through Oscar Virtual Care
<i>digoxin soln .05mg/ml, .25mg/ml; tabs 125mcg, 250mcg</i>	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 tabs 150mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>DIURETICS</i>		
<i>acetazolamide cp12 500mg; tabs 125mg, 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>acetazolamide sodium solr 500mg</i>	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

Drug Name	Drug Tier	Requirements/Limits
<i>amiloride hcl tabs 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>bumetanide soln .25mg/ml; tabs .5mg, 1mg, 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>chlorothiazide tabs 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>chlorothiazide tabs 500mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>chlorothiazide sodium solr 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>chlorthalidone tabs 25mg, 50mg</i>	1A	\$0 copay through Oscar Virtual Care
DIURIL SUSP 250mg/5ml	3	
<i>ethacrynate sodium solr 50mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ethacrynic acid tabs 25mg</i>	2	
<i>furosemide soln 8mg/ml, 10mg/ml; tabs 80mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>furosemide tabs 20mg, 40mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>hydrochlorothiazide caps 12.5mg; tabs 12.5mg, 25mg, 50mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>indapamide tabs 1.25mg, 2.5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>mannitol soln 20%, 25%</i>	1B	\$0 copay through Oscar Virtual Care
<i>methazolamide tabs 25mg, 50mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>methyclothiazide tabs 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>metolazone tabs 2.5mg, 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>osmitrol viaflex soln 5%, 10%, 15%</i>	1B	\$0 copay through Oscar Virtual Care
<i>spironolactone tabs 25mg, 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>torseamide tabs 5mg, 10mg, 20mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>triamterene caps 50mg, 100mg</i>	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

Drug Name	Drug Tier	Requirements/Limits
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1B	\$0 copay through Oscar Virtual Care

MISCELLANEOUS

<i>clonidine ptwk .1mg/24hr, .2mg/24hr, .3mg/24hr</i>	1B	\$0 copay through Oscar Virtual Care
<i>clonidine hcl tabs .1mg, .2mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>clonidine hcl tabs .3mg</i>	1B	\$0 copay through Oscar Virtual Care
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 tabs 1mg, 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>hydralazine hcl soln 20mg/ml; tabs 10mg, 25mg, 50mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>methyldopa tabs 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>methyldopate hcl soln 250mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>midodrine hcl tabs 2.5mg, 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>minoxidil tabs 2.5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>phenoxybenzamine hcl caps 10mg</i>	3	PA
<i>ranolazine tb12 500mg, 1000mg</i>	1B	ST; PA**; \$0 copay through Oscar Virtual Care

NITRATES

DILATRATE SR CPR 40mg	3	
<i>isosorbide dinitrate tabs 5mg, 10mg, 20mg, 30mg, 40mg; tbc 40mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>isosorbide mononitrate tabs 10mg, 20mg; tb24 120mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>isosorbide mononitrate tb24 30mg, 60mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>minitran pt24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr</i>	1B	\$0 copay through Oscar Virtual Care
NITRO-BID OINT 2%	3	
NITRO-DUR PT24 .3mg/hr, .8mg/hr	2	
<i>nitroglycerin pt24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr; soln .4mg/spray; subl .3mg, .6mg</i>	1B	\$0 copay through Oscar Virtual Care
NITROGLYCERIN SOLN 5mg/ml	3	

Drug Name	Drug Tier	Requirements/Limits
<i>nitroglycerin sublingual .4mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>nitroglycerin intravenous solution 100 mcg/ml in 5 days</i>	1B	\$0 copay through Oscar Virtual Care
<i>nitroglycerin intravenous solution 200 mcg/ml in 5 days</i>	1B	\$0 copay through Oscar Virtual Care
<i>nitroglycerin intravenous solution 400 mcg/ml in 5 days</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)
<i>ambrisentan tablets 5mg, 10mg</i>	4	PA, QL (30 tabs / 30 days)
<i>bosentan tablets 62.5mg, 125mg</i>	4	PA, QL (60 tabs / 30 days)
<i>epoprostenol sodium solution .5mg, 1.5mg</i>	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) solution 10mg/12.5ml</i>	4	PA
<i>sildenafil citrate (pulmonary hypertension) tablets 20mg</i>	4	PA, QL (90 tabs / 30 days)
<i>tadalafil (pulmonary hypertension) tablets 20mg</i>	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 tablets .25mg, .5mg, 1mg, 2mg; tbdp .25mg, .5mg, 1mg, 2mg</i>	1B	QL (150 tabs / 25 days); \$0 copay through Oscar Virtual Care
ALPRAZOLAM INTENSOL CONC 1mg/ml	2	QL (300 mL / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>lorazepam conc 2mg/ml</i>	1B	QL (150 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>lorazepam tabs .5mg, 1mg, 2mg</i>	1B	QL (150 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>meprobamate tabs 200mg, 400mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>oxazepam caps 10mg, 15mg, 30mg</i>	1B	QL (120 caps / 25 days); \$0 copay through Oscar Virtual Care

ANTICONVULSANTS

APTIOM TABS 200mg, 400mg, 600mg, 800mg	3	PA
BRIVIACT SOLN 10mg/ml, 50mg/5ml; TABS 10mg, 25mg, 50mg, 75mg, 100mg	3	PA
<i>carbamazepine chew 100mg; cp12 100mg, 200mg, 300mg; susp 100mg/5ml; tabs 200mg; tb12 100mg, 200mg, 400mg</i>	1B	\$0 copay through Oscar Virtual Care
CELONTIN CAPS 300mg	3	
<i>clobazam susp 2.5mg/ml; tabs 10mg, 20mg</i>	2	PA
<i>clonazepam tabs .5mg, 1mg, 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>clorazepate dipotassium tabs 3.75mg, 7.5mg, 15mg</i>	2	QL (180 tabs / 25 days)
<i>diazepam soln 5mg/5ml</i>	1B	QL (1200 mL / 25 days); \$0 copay through Oscar Virtual Care
<i>diazepam soln 5mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>diazepam tabs 2mg, 5mg, 10mg</i>	1B	QL (120 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>diazepam intensol conc 5mg/ml</i>	1B	QL (240 mL / 25 days); \$0 copay through Oscar Virtual Care
DILANTIN CAPS 30mg	3	
<i>divalproex sodium csdr 125mg; tb24 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>divalproex sodium tbec 125mg, 250mg, 500mg</i>	1A	\$0 copay through Oscar Virtual Care
EPIDIOLEX SOLN 100mg/ml	4	PA, QL (800 mL / 30 days)
<i>epitol tabs 200mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>ethosuximide caps 250mg; soln 250mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>felbamate susp 600mg/5ml; tabs 400mg, 600mg</i>	2	
<i>fosphenytoin sodium soln 100mgpe/2ml, 500mgpe/10ml</i>	1B	\$0 copay through Oscar Virtual Care
FYCOMPA SUSP .5mg/ml; TABS 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	2	
<i>gabapentin caps 100mg, 300mg, 400mg; soln 250mg/5ml; tabs 600mg, 800mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>lamotrigine chew 5mg, 25mg; kit 25mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>lamotrigine tabs 25mg, 100mg, 150mg, 200mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>lamotrigine tb24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>lamotrigine tbdp 25mg, 50mg, 100mg, 200mg</i>	2	PA
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	2	
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	1B	\$0 copay through Oscar Virtual Care
<i>levetiracetam soln 100mg/ml, 500mg/5ml; tabs 250mg, 500mg, 750mg, 1000mg; tb24 500mg, 750mg</i>	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 susp 60mg/ml; tabs 150mg, 300mg, 600mg</i>	1B	\$0 copay through Oscar Virtual Care
PEGANONE TABS 250mg	3	
<i>phenobarbital elix 20mg/5ml; tabs 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>phenytoin chew 50mg; susp 125mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>phenytoin sodium soln 50mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>phenytoin sodium extended caps 100mg, 200mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>pregabalin caps 25mg, 50mg, 75mg, 100mg, 150mg, 200mg, 225mg, 300mg; soln 20mg/ml</i>	1B	PA; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>primidone tabs 50mg, 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tiagabine hcl tabs 2mg, 4mg, 12mg, 16mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>topiramate csp 15mg, 25mg; tabs 25mg, 50mg, 100mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>valproate sodium soln 100mg/ml, 250mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>valproic acid caps 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>vigabatrin pack 500mg</i>	4	PA, QL (180 packets / 30 days)
<i>vigabatrin tabs 500mg</i>	4	PA, QL (180 tabs / 30 days)
VIMPAT SOLN 10mg/ml, 200mg/20ml; TABS 50mg, 100mg, 150mg, 200mg	3	PA
<i>zonisamide caps 25mg, 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
ANTIDEMENTIA		
<i>donepezil hydrochloride tabs 5mg, 10mg, 23mg; tbdp 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ergoloid mesylates tabs 1mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>galantamine hydrobromide cp24 8mg, 16mg, 24mg; soln 4mg/ml; tabs 4mg, 8mg, 12mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>memantine hcl cp24 7mg, 14mg, 21mg, 28mg; soln 2mg/ml; tabs 5mg, 10mg</i>	1B	PA; PA applies for members less than 30 years of age; \$0 copay through Oscar Virtual Care
<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 copay through Oscar Virtual Care
NAMENDA XR CAP TITRATIO	2	PA; PA applies for members less than 30 years of age
<i>rivastigmine pt24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>rivastigmine tartrate caps 1.5mg, 3mg, 4.5mg, 6mg</i>	1B	PA; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
ANTIDEPRESSANTS		
<i>amitriptyline hcl tabs 10mg</i>	1A	QL (150 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>amitriptyline hcl tabs 25mg</i>	1A	QL (60 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>amitriptyline hcl tabs 50mg</i>	1A	QL (30 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>amitriptyline hcl tabs 75mg, 100mg, 150mg</i>	1B	PA; Members 70 and older subject to PA; \$0 copay through Oscar Virtual Care
<i>amoxapine tabs 25mg, 50mg, 100mg</i>	1B	QL (90 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>amoxapine tabs 150mg</i>	1B	QL (60 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>bupropion hcl tabs 75mg, 100mg; tb12 100mg, 150mg, 200mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>bupropion hcl tb24 150mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>citalopram hydrobromide soln 10mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>citalopram hydrobromide tabs 10mg, 20mg, 40mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>desipramine hcl tabs 10mg, 25mg, 50mg</i>	1B	QL (90 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>desipramine hcl tabs 75mg</i>	1B	QL (60 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>desipramine hcl tabs 100mg, 150mg</i>	1B	QL (30 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>desvenlafaxine succinate tb24 25mg, 50mg, 100mg</i>	1B	PA, QL (30 tabs / 25 days); (generic of Pristiq); \$0 copay through Oscar Virtual Care
<i>doxepin hcl caps 10mg, 25mg, 50mg</i>	1B	QL (90 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>doxepin hcl caps 75mg</i>	1B	QL (60 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>doxepin hcl caps 100mg, 150mg</i>	1B	QL (30 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>doxepin hcl conc 10mg/ml</i>	1B	QL (450 mL / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>duloxetine hcl cpep 20mg, 30mg, 60mg</i>	1B	\$0 copay through Oscar Virtual Care
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	3	PA
<i>escitalopram oxalate soln 5mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>escitalopram oxalate tabs 5mg, 10mg, 20mg</i>	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)

Drug Name	Drug Tier	Requirements/Limits
<i>fluoxetine hcl caps 10mg, 20mg, 40mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>fluoxetine hcl cpdr 90mg; soln 20mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>fluoxetine hcl tabs 10mg, 20mg</i>	1B	(generic Sarafem not covered); \$0 copay through Oscar Virtual Care
<i>imipramine hcl tabs 10mg, 25mg</i>	1B	QL (120 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>imipramine hcl tabs 50mg</i>	1B	QL (60 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>imipramine pamoate caps 75mg, 100mg</i>	1B	QL (30 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>imipramine pamoate caps 125mg, 150mg</i>	1B	PA; Members 70 and older subject to PA; \$0 copay through Oscar Virtual Care
<i>maprotiline hcl tabs 25mg, 50mg, 75mg</i>	1B	\$0 copay through Oscar Virtual Care
MARPLAN TABS 10mg	3	
<i>mirtazapine tabs 7.5mg, 30mg, 45mg; tbdp 15mg, 30mg, 45mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>mirtazapine tabs 15mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>nefazodone hcl tabs 50mg, 100mg, 150mg, 200mg, 250mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>nortriptyline hcl caps 10mg</i>	1B	QL (150 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>nortriptyline hcl caps 25mg</i>	1B	QL (60 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>nortriptyline hcl caps 50mg</i>	1B	QL (30 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>nortriptyline hcl caps 75mg</i>	1B	PA; High strength requires PA for members age 65 and older
<i>nortriptyline hcl soln 10mg/5ml</i>	1B	QL (750 mL / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>paroxetine hcl tabs 10mg, 20mg, 30mg, 40mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>paroxetine hcl tb24 12.5mg, 25mg, 37.5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>phenelzine sulfate tabs 15mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>protriptyline hcl tabs 5mg</i>	1B	QL (90 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>protriptyline hcl tabs 10mg</i>	1B	QL (60 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>sertraline hcl conc 20mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>sertraline hcl tabs 25mg, 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>tranylcypromine sulfate tabs 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>trazodone hcl tabs 50mg, 100mg, 150mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>trazodone hcl tabs 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>trimipramine maleate caps 25mg, 50mg</i>	1B	QL (60 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>trimipramine maleate caps 100mg</i>	1B	QL (30 caps / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>venlafaxine hcl cp24 37.5mg, 75mg, 150mg; tabs 25mg, 37.5mg, 50mg, 75mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>venlafaxine hcl tb24 37.5mg, 75mg, 150mg</i>	1B	\$0 copay through Oscar Virtual Care
VIIBRYD TABS 10mg, 20mg, 40mg	3	PA
VIIBRYD KIT STARTER	3	PA

ANTIPARKINSONIAN AGENTS

<i>amantadine hcl caps 100mg; syrp 50mg/5ml; tabs 100mg</i>	1B	\$0 copay through Oscar Virtual Care
APOKYN SOCT 30mg/3ml	4	PA, QL (20 cartridges / 25 days)
<i>benztropine mesylate soln 1mg/ml; tabs .5mg, 1mg, 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>bromocriptine mesylate caps 5mg; tabs 2.5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbidopa tabs 25mg</i>	3	
<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
<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

Drug Name	Drug Tier	Requirements/Limits
<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>	2	PA
<i>rasagiline mesylate tabs .5mg</i>	2	
<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</i>	2	
<i>aripiprazole 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	
<i>asenapine maleate subl 2.5mg, 5mg, 10mg</i>	2	PA
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
<i>clozapine tabs 25mg, 50mg, 100mg, 200mg; tbdp 12.5mg, 25mg, 100mg, 150mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>fluphenazine decanoate soln 25mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>fluphenazine hcl conc 5mg/ml; elix 2.5mg/5ml; soln 2.5mg/ml; tabs 1mg, 2.5mg, 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>haloperidol tabs .5mg, 1mg, 2mg, 5mg, 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>haloperidol decanoate soln 50mg/ml, 100mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>haloperidol lactate conc 2mg/ml; soln 5mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
LATUDA TABS 20mg, 40mg, 60mg, 120mg	2	PA, QL (30 tabs / 30 days)
LATUDA TABS 80mg	2	PA, QL (60 tabs / 30 days)
<i>loxapine succinate caps 5mg, 10mg, 25mg, 50mg</i>	1B	\$0 copay through Oscar Virtual Care
NUPLAZID TABS 17mg	4	PA
<i>olanzapine solr 10mg; tabs 2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg; tbdp 5mg, 10mg, 15mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>paliperidone tb24 1.5mg, 3mg, 6mg, 9mg</i>	2	
<i>perphenazine tabs 2mg, 4mg, 8mg, 16mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>quetiapine fumarate tabs 25mg, 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>quetiapine fumarate tabs 200mg, 300mg, 400mg; tb24 50mg, 150mg, 200mg, 300mg, 400mg</i>	1B	\$0 copay through Oscar Virtual Care
REXULTI TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	3	PA
<i>risperidone soln 1mg/ml; tabs .25mg, .5mg, 1mg, 2mg, 3mg, 4mg; tbdp .25mg, .5mg, 1mg, 2mg, 3mg, 4mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>thioridazine hcl tabs 10mg, 25mg, 50mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>thiothixene caps 1mg, 2mg, 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>trifluoperazine hcl tabs 1mg, 2mg, 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ziprasidone hcl caps 20mg, 40mg, 60mg, 80mg</i>	1B	\$0 copay through Oscar Virtual Care
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
<i>amphetamine sulfate tabs 10mg</i>	3	
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1B	QL (90 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1B	QL (90 caps / 30 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1B	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1B	QL (60 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1B	QL (60 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1B	QL (60 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1B	QL (90 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1B	QL (90 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1B	QL (90 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1B	QL (90 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1B	QL (60 tabs / 30 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 / 30 days)
<i>dexmethylphenidate hcl cp24 25mg, 30mg, 35mg, 40mg</i>	2	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl tabs 2.5mg, 5mg</i>	1B	QL (120 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>dexmethylphenidate hcl tabs 10mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>dextroamphetamine sulfate cp24 5mg, 10mg, 15mg</i>	1B	QL (120 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>dextroamphetamine sulfate soln 5mg/5ml</i>	1B	QL (2,160 mL / 30 days); \$0 copay through Oscar Virtual Care
<i>dextroamphetamine sulfate tabs 5mg, 10mg</i>	1B	QL (120 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>guanfacine hcl (adhd) tb24 1mg, 2mg, 3mg, 4mg</i>	1B	ST; PA**; \$0 copay through Oscar Virtual Care
<i>methamphetamine hcl tabs 5mg</i>	3	QL (150 tabs / 30 days)
<i>methylphenidate hcl chew 2.5mg, 5mg, 10mg</i>	3	QL (180 tabs / 30 days)
<i>methylphenidate hcl cp24 20mg, 30mg</i>	1B	QL (60 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl cp24 40mg, 60mg</i>	1B	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl cpcr 10mg, 20mg, 30mg</i>	2	QL (60 caps / 30 days)
<i>methylphenidate hcl cpcr 40mg, 50mg, 60mg</i>	2	QL (30 caps / 30 days)
<i>methylphenidate hcl soln 5mg/5ml</i>	3	QL (2,160 mL / 30 days)
<i>methylphenidate hcl soln 10mg/5ml</i>	3	QL (1080 mL / 30 days)
<i>methylphenidate hcl tabs 5mg, 10mg</i>	1B	QL (180 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl tabs 20mg</i>	1B	QL (90 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>methylphenidate hcl tb24 18mg, 27mg, 36mg; tbc 18mg, 27mg, 36mg</i>	3	QL (60 tabs / 30 days)
<i>methylphenidate hcl tb24 54mg; tbc 54mg</i>	3	QL (30 tabs / 30 days)
<i>methylphenidate hcl tbc 10mg, 20mg</i>	2	QL (90 tabs / 30 days)
<i>zenzedi tabs 2.5mg, 7.5mg</i>	1B	QL (120 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>zenzedi tabs 15mg</i>	1B	QL (90 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>zenzedi tabs 20mg, 30mg</i>	1B	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
HYPNOTICS		
BELSOMRA TABS 5mg, 10mg, 15mg, 20mg	2	PA
<i>doxepin hcl (sleep) tabs 3mg, 6mg</i>	1B	QL (30 tabs / 30 days); QL applies to members age 65 and older; \$0 copay through Oscar Virtual Care
<i>doxylamine succinate (sleep) tabs 25mg</i>	1B	OTC; \$0 copay through Oscar Virtual Care
<i>eszopiclone tabs 1mg, 2mg, 3mg</i>	1B	QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
HETLIOZ CAPS 20mg	5	PA, QL (30 caps / 30 days)
<i>ramelteon tabs 8mg</i>	1B	QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>temazepam caps 7.5mg, 15mg, 22.5mg, 30mg</i>	1B	QL (15 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>zaleplon caps 5mg</i>	1B	QL (30 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>zaleplon caps 10mg</i>	1B	QL (60 caps / 25 days); \$0 copay through Oscar Virtual Care
<i>zolpidem tartrate tabs 5mg, 10mg; tbc 6.25mg, 12.5mg</i>	1B	QL (30 tabs / 25 days); \$0 copay through Oscar Virtual Care
MIGRAINE		
AIMOVIG SOAJ 70mg/ml	2	PA, QL (2 injections / 25 days)
AIMOVIG SOAJ 140mg/ml	2	PA, QL (1 injection / 25 days)
AJOVY SOAJ 225mg/1.5ml; SOSY 225mg/1.5ml	2	PA, QL (3 injections / 75 days)
<i>almotriptan malate tabs 6.25mg</i>	2	QL (18 tabs / 25 days)
<i>almotriptan malate tabs 12.5mg</i>	2	QL (12 tabs / 25 days)
<i>eletriptan hydrobromide tabs 20mg</i>	2	QL (18 tabs / 25 days)
<i>eletriptan hydrobromide tabs 40mg</i>	2	QL (12 tabs / 25 days)
EMGALITY SOAJ 120mg/ml; SOSY 120mg/ml	2	PA, QL (2 injections / 25 days)
EMGALITY SOSY 100mg/ml	2	PA, QL (3 injections / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>naratriptan hcl tabs 1mg</i>	1A	QL (18 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>naratriptan hcl tabs 2.5mg</i>	1A	QL (12 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>rizatriptan benzoate tabs 5mg; tbdp 5mg</i>	1A	QL (27 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>rizatriptan benzoate tabs 10mg; tbdp 10mg</i>	1A	QL (18 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>sumatriptan soln 5mg/act</i>	2	QL (36 sprays / 25 days)
<i>sumatriptan soln 20mg/act</i>	2	QL (12 sprays / 25 days)
<i>sumatriptan succinate soaj 4mg/0.5ml; soct 4mg/0.5ml</i>	2	QL (18 syringes / 25 days)
<i>sumatriptan succinate soaj 6mg/0.5ml; soct 6mg/0.5ml; sosy 6mg/0.5ml</i>	2	QL (12 units / 25 days)
<i>sumatriptan succinate soln 6mg/0.5ml</i>	2	QL (12 vials / 25 days)
<i>sumatriptan succinate tabs 25mg, 50mg, 100mg</i>	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 soln 2.5mg</i>	1B	QL (18 sprays / 25 days); \$0 copay through Oscar Virtual Care
<i>zolmitriptan soln 5mg</i>	1B	QL (12 sprays / 25 days); \$0 copay through Oscar Virtual Care
<i>zolmitriptan tabs 2.5mg; tbdp 2.5mg</i>	2	QL (18 tabs / 25 days)
<i>zolmitriptan tabs 5mg</i>	1B	QL (12 tabs / 25 days); \$0 copay through Oscar Virtual Care
<i>zolmitriptan tbdp 5mg</i>	2	QL (12 tabs / 25 days)
MISCELLANEOUS		
<i>bupirone hcl tabs 5mg, 7.5mg, 10mg, 15mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>bupirone hcl tabs 30mg</i>	2	
<i>clomipramine hcl caps 25mg, 50mg</i>	3	QL (150 caps / 30 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>clomipramine hcl caps 75mg</i>	3	QL (90 caps / 30 days); QL applies to members age 65 and older
<i>fluvoxamine maleate cp24 100mg, 150mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>fluvoxamine maleate tabs 25mg, 50mg, 100mg</i>	1A	\$0 copay through Oscar Virtual Care
GUANIDINE HCL TABS 125mg	3	
LITHIUM SOLN 8meq/5ml	3	
<i>lithium carbonate caps 150mg, 300mg, 600mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>lithium carbonate tabs 300mg; tbc 300mg, 450mg</i>	1B	\$0 copay through Oscar Virtual Care
NUEDEXTA CAP 20-10MG	2	PA
<i>pimozide tabs 1mg, 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>pyridostigmine bromide soln 60mg/5ml; tabs 60mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>pyridostigmine bromide tbc 180mg</i>	2	
REGONOL SOLN 10mg/2ml	3	
<i>riluzole tabs 50mg</i>	3	
SAVELLA TABS 12.5mg, 25mg, 50mg, 100mg	3	PA
SAVELLA MIS TITR PAK	3	PA
<i>tetrabenazine tabs 12.5mg</i>	4	PA, QL (120 tabs / 30 days)
<i>tetrabenazine tabs 25mg</i>	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	QL (4 injections / 28 days); MNPA
AVONEX PEN AJKT 30mcg/0.5ml	5	QL (4 injections / 28 days); MNPA
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 tb12 10mg</i>	5	PA, QL (60 tabs / 30 days)
<i>dimethyl fumarate cpdr 120mg</i>	4	PA, QL (14 caps / 28 days)

MNPA - Medical Necessity Prior Authorization **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy **^** - Insulin Cost-Sharing Cap Will Apply

Drug Name	Drug Tier	Requirements/Limits
<i>dimethyl fumarate cpdr 240mg</i>	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)
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	QL (1 carton / 28 days); MNPA
PLEGRIDY INJ STARTER	5	QL (1 kit / 28 days); MNPA
PLEGRIDY PEN INJ STARTER	5	QL (1 pack / 28 days); MNPA
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)
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 tabs 5mg, 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carisoprodol tabs 350mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>chlorzoxazone tabs 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cyclobenzaprine hcl tabs 5mg, 10mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>dantrolene sodium caps 25mg, 50mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>metaxalone tabs 400mg, 800mg</i>	2	PA; High Risk Medications require PA for members age 70 and older
<i>methocarbamol tabs 500mg, 750mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>orphenadrine citrate soln 60mg/2ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>orphenadrine citrate tb12 100mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>tizanidine hcl tabs 2mg, 4mg</i>	1A	\$0 copay through Oscar Virtual Care
NARCOLEPSY/CATAPLEXY		
<i>armodafinil tabs 50mg, 150mg, 200mg, 250mg</i>	1B	PA, QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>modafinil tabs 100mg, 200mg</i>	3	PA, QL (30 tabs / 30 days)
PSYCHOTHERAPEUTIC-MISC		
<i>acamprosate calcium tbec 333mg</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>bupropion hcl (smoking deterrent) tb12 150mg</i>	0	\$0 limited to 2 treatment cycles/year
CHANTIX TABS .5mg, 1mg	0	\$0 limited to 2 treatment cycles/year
CHANTIX CONTINUING MONTH TABS 1mg	0	\$0 limited to 2 treatment cycles/year
CHANTIX PAK 0.5& 1MG	0	\$0 limited to 2 treatment cycles/year
<i>disulfiram tabs 250mg, 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>goodsense nicotine lozg 2mg</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>goodsense nicotine polacr lozg 4mg</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>naloxone hcl soct .4mg/ml; soln .4mg/ml, 4mg/10ml; sosy 2mg/2ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>naltrexone hcl tabs 50mg</i>	0	\$0 copay
NARCAN LIQD 4mg/0.1ml	2	

Drug Name	Drug Tier	Requirements/Limits
<i>nicorelief gum 4mg</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine pt24 7mg/24hr, 14mg/24hr, 21mg/24hr</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex gum 2mg, 4mg</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine step 3 pt24 7mg/24hr</i>	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
<i>sm nicotine transdermal s pt24 7mg/24hr, 14mg/24hr, 21mg/24hr</i>	0	OTC; \$0 limited to 2 treatment cycles/year
VIVITROL SUSR 380mg	4	PA, QL (1 vial / 28 days)

DERMATOLOGICALS

ANTIBIOTICS - TOPICAL

ALTABAX OINT 1%	2	
XEPI CREA 1%	2	

ANTIFUNGALS - TOPICAL

<i>luliconazole crea 1%</i>	2	
<i>oxiconazole nitrate crea 1%</i>	2	PA

ANTIPSORIATICS

SKYRIZI SOSY 150mg/ml	4	PA, QL (1 syringe / 12 weeks); Preferred agent for Psoriasis
SKYRIZI PEN SOAJ 150mg/ml	4	PA, QL (1 syringe / 12 weeks); Preferred agent for Psoriasis

ANTIVIRALS - TOPICAL

<i>acyclovir topical oint 5%</i>	2	PA
----------------------------------	---	----

CORTICOSTEROIDS - TOPICAL

<i>diflorasone diacetate oint .05%</i>	2	
<i>halcinonide crea .1%</i>	3	QL (60g / 30 days)

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	

MNPA - Medical Necessity Prior Authorization **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy **^** - Insulin Cost-Sharing Cap Will Apply

Drug Name	Drug Tier	Requirements/Limits
<i>methylestosterone caps 10mg</i>	3	PA
<i>oxandrolone tabs 2.5mg, 10mg</i>	2	PA
<i>testosterone gel 10mg/act, 25mg/2.5gm</i>	3	PA
<i>testosterone cypionate soln 100mg/ml, 200mg/ml</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>testosterone enanthate soln 200mg/ml</i>	1B	PA; \$0 copay through Oscar Virtual Care

ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS

<i>acarbose tabs 25mg, 50mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>miglitol tabs 25mg, 50mg, 100mg</i>	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 tabs 500mg, 850mg, 1000mg; tb24 500mg, 750mg</i>	1A	\$0 copay through Oscar Virtual Care
---	----	--------------------------------------

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

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, QL (30 tabs / 30 days); PA**

Drug Name	Drug Tier	Requirements/Limits
ANTIDIABETICS, DOPAMINE RECEPTOR AGONISTS		
CYCLOSET TABS .8mg	3	
ANTIDIABETICS, DPP-4 INHIBITOR COMBINATIONS		
JANUMET TAB 50-500MG	2	ST, QL (60 tabs / 30 days); PA**
JANUMET TAB 50-1000	2	ST, QL (60 tabs / 30 days); PA**
JANUMET XR TAB 50-500MG	2	ST, QL (60 tabs / 30 days); PA**
JANUMET XR TAB 50-1000	2	ST, QL (60 tabs / 30 days); PA**
JANUMET XR TAB 100-1000	2	ST, QL (30 tabs / 30 days); PA**
ANTIDIABETICS, INCRETIN MIMETIC AGENTS		
OZEMPIC SOPN 2mg/1.5ml	2	ST, QL (2 pens / 28 days); PA**
OZEMPIC SOPN 4mg/3ml	2	ST, QL (1 pen / 28 days); PA**
TRULICITY SOPN .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	2	ST, QL (4 pens / 28 days); PA**
VICTOZA SOPN 18mg/3ml	2	ST, QL (3 pens / 30 days); PA**
ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS		
SOLIQUA INJ 100/33	2	ST, QL (6 pens / 30 days); PA**
XULTOPHY INJ 100/3.6	2	ST, QL (5 pens / 30 days); 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 copay through Oscar Virtual Care
NOVOLIN INJ 70/30 FP	2	OTC; RELION not covered

MNPA - Medical Necessity Prior Authorization **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy **^** - Insulin Cost-Sharing Cap Will Apply

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN N SUSP 100unit/ml	1A	OTC; RELION not covered; \$0 copay through Oscar Virtual Care
NOVOLIN N FLEXPEN SUPN 100unit/ml	2	OTC; RELION not covered
NOVOLIN R SOLN 100unit/ml	1A	OTC; RELION not covered; \$0 copay through Oscar Virtual Care
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 tabs 15mg, 30mg, 45mg</i>	1A	\$0 copay through Oscar Virtual Care
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 tabs 60mg, 120mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>repaglinide tabs .5mg, 1mg, 2mg</i>	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

Drug Name Drug Tier Requirements/Limits
ANTIDIABETICS, SODIUM-GLUC CO-TRANSPOR2 INHIB (SGLT2)
COMBO

SYNJARDY TAB	2	ST, QL (60 tabs / 30 days); PA**
SYNJARDY TAB 5-500MG	2	ST, QL (60 tabs / 30 days); PA**
SYNJARDY TAB 5-1000MG	2	ST, QL (60 tabs / 30 days); PA**
SYNJARDY TAB 12.5-500	2	ST, QL (60 tabs / 30 days); PA**
SYNJARDY XR TAB	2	ST, QL (60 tabs / 30 days); PA**
SYNJARDY XR TAB 5-1000MG	2	ST, QL (60 tabs / 30 days); PA**
SYNJARDY XR TAB 10-1000	2	ST, QL (30 tabs / 30 days); PA**
SYNJARDY XR TAB 25-1000	2	ST, QL (30 tabs / 30 days); PA**
XIGDUO XR TAB 2.5-1000	2	ST, QL (60 tabs / 30 days); PA**
XIGDUO XR TAB 5-500MG	2	ST, QL (30 tabs / 30 days); PA**
XIGDUO XR TAB 5-1000MG	2	ST, QL (60 tabs / 30 days); PA**
XIGDUO XR TAB 10-500MG	2	ST, QL (30 tabs / 30 days); PA**
XIGDUO XR TAB 10-1000	2	ST, QL (30 tabs / 30 days); PA**

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

GLYXAMBI TAB 10-5 MG	2	ST, QL (30 tabs / 30 days); PA**
GLYXAMBI TAB 25-5 MG	2	ST, QL (30 tabs / 30 days); PA**

ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER2(SGLT2) INHIB

FARXIGA TABS 5mg, 10mg	2	ST, QL (30 tabs / 30 days); PA**
JARDIANCE TABS 10mg, 25mg	2	ST, QL (30 tabs / 30 days); PA**

ANTIDIABETICS, SULFONYLUREA

<i>glimepiride tabs 1mg, 2mg, 4mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>glipizide tabs 5mg, 10mg; tb24 2.5mg, 5mg, 10mg</i>	1A	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>glyburide tabs 1.25mg, 2.5mg, 5mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>glyburide micronized tabs 1.5mg, 3mg, 6mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care

BISPHOSPHONATES

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

CALCIUM RECEPTOR AGONISTS

<i>cinacalcet hcl tabs 30mg, 60mg</i>	4	PA, QL (60 tabs / 30 days)
<i>cinacalcet hcl tabs 90mg</i>	4	PA, QL (120 tabs / 30 days)

CHELATING AGENTS

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

Drug Name	Drug Tier	Requirements/Limits
<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 tabs .35mg</i>	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	
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>kurvelo</i>	0	
KYLEENA IUD 19.5mg	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	
LILETTA IUD 19.5mcg/day	0	QL (1 / 300 days)
<i>loryna</i>	0	
<i>low-ogestrel</i>	0	
<i>luttera</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	
MIRENA IUD 20mcg/24hr	0	QL (1 / 300 days)
<i>mono-lynyah</i>	0	
<i>mononessa</i>	0	
<i>myzilra</i>	0	
<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	

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

ENDOMETRIOSIS

<i>danazol caps 50mg, 100mg, 200mg</i>	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
MYALEPT SOLR 11.3mg	4	PA, QL (30 vials / 30 days)
<i>nitisinone caps 2mg, 5mg, 10mg</i>	4	PA
ORFADIN CAPS 20mg; SUSP 4mg/ml	4	PA

MNPA - Medical Necessity Prior Authorization **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy **^** - Insulin Cost-Sharing Cap Will Apply

Drug Name	Drug Tier	Requirements/Limits
<i>sapropterin dihydrochloride pack 100mg, 500mg; tabs 100mg</i>	4	PA
<i>sodium phenylbutyrate powd 3gm/tsp</i>	4	PA, QL (600g / 30 days)
<i>sodium phenylbutyrate tabs 500mg</i>	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 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</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>estradiol tabs .5mg, 1mg, 2mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<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 crea .1mg/gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>estradiol valerate oil 20mg/ml, 40mg/ml</i>	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 tabs .75mg, 1.5mg, 3mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
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>yuvaferm tabs 10mcg</i>	1B	\$0 copay through Oscar Virtual Care

GLUCOCORTICOIDS

<i>cortisone acetate tabs 25mg</i>	1B	\$0 copay through Oscar Virtual Care
DEPO-MEDROL SUSP 20mg/ml	3	
<i>dexamethasone elix .5mg/5ml; soln .5mg/5ml; tabs 1mg, 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>dexamethasone tabs .5mg, .75mg, 1.5mg, 4mg, 6mg</i>	1A	\$0 copay through Oscar Virtual Care
DEXAMETHASONE INTENSOL CONC 1mg/ml	2	
<i>dexamethasone sodium phosphate soln 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>fludrocortisone acetate tabs .1mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>hydrocortisone tabs 5mg, 10mg, 20mg</i>	1A	\$0 copay through Oscar Virtual Care
MEDROL TABS 2mg	2	
<i>methylprednisolone tabs 4mg, 8mg, 16mg, 32mg; tbpk 4mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>methylprednisolone acetate susp 40mg/ml, 80mg/ml</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>methylprednisolone sod succ solr 40mg, 125mg, 1000mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>prednisolone soln 15mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>prednisolone sodium phosphate soln 5mg/5ml, 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml; tbdp 10mg, 15mg, 30mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>prednisone soln 5mg/5ml; tabs 50mg; tbpk 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>prednisone tabs 1mg, 2.5mg, 5mg, 10mg, 20mg</i>	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		
<i>glucagon (rdna) kit 1mg</i>	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 tabs .5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>calcitonin (salmon) soln 200unit/act</i>	2	
CHORIONIC GONADOTROPIN SOLR 10000unit	4	PA
INCRELEX SOLN 40mg/4ml	4	PA
MIACALCIN SOLN 200unit/ml	3	
<i>octreotide acetate soln 50mcg/ml, 100mcg/ml, 500mcg/ml</i>	4	PA, QL (90 ml / 30 days)
<i>octreotide acetate soln 200mcg/ml</i>	4	PA, QL (225 ml / 30 days)
<i>octreotide acetate soln 1000mcg/ml</i>	4	PA, QL (45 ml / 30 days)
OSPHENA TABS 60mg	2	
PROLIA SOSY 60mg/ml	4	PA, QL (60mg / 24 weeks)
<i>raloxifene hcl tabs 60mg</i>	1B	\$0 copay for women ages 35 and older for the primary prevention of breast cancer; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
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 tabs 15mg, 30mg</i>	4	PA
TYMLOS SOPN 3120mcg/1.56ml	4	PA, QL (1 pen / 30 days)

PHOSPHATE BINDER AGENTS

<i>calcium acetate (phosphate binder) caps 667mg; tabs 667mg</i>	1B	\$0 copay through Oscar Virtual Care
FOSRENOL PACK 750mg, 1000mg	3	
PHOSLYRA SOLN 667mg/5ml	2	
<i>sevelamer carbonate pack .8gm, 2.4gm</i>	2	
<i>sevelamer carbonate tabs 800mg</i>	3	
VELPHORO CHEW 500mg	3	

PROGESTINS

CRINONE GEL 4%, 8%	2	
<i>medroxyprogesterone acetate tabs 2.5mg, 10mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>medroxyprogesterone acetate tabs 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>norethindrone acetate tabs 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>progesterone caps 100mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care

THYROID AGENTS

<i>levothyroxine sodium tabs 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg</i>	1B	\$0 copay through Oscar Virtual Care
<i>levoxyl tabs 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg</i>	1B	\$0 copay through Oscar Virtual Care
<i>liothyronine sodium soln 10mcg/ml; tabs 5mcg, 25mcg, 50mcg</i>	1B	\$0 copay through Oscar Virtual Care
<i>methimazole tabs 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>propylthiouracil tabs 50mg</i>	1B	\$0 copay through Oscar Virtual Care
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>unithroid tabs 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 200mcg, 300mcg</i>	1B	\$0 copay through Oscar Virtual Care

VASOPRESSINS

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

GASTROINTESTINAL

ANTICHOLINERGICS

<i>atropine sulfate sosy .25mg/5ml, 1mg/10ml</i>	1B	\$0 copay through Oscar Virtual Care
CUVPOSA SOLN 1mg/5ml	2	
<i>dicyclomine hcl caps 10mg; soln 10mg/5ml, 10mg/ml; tabs 20mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ed-spaz tbdp .125mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>glycopyrrolate soln .2mg/ml, .4mg/2ml, 1mg/5ml, 4mg/20ml; tabs 1mg, 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>hyoscyamine sulfate subl .125mg; tabs .125mg; tb12 .375mg; tbdp .125mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>methscopolamine bromide tabs 2.5mg, 5mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>nulev tbdp .125mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>oscimin subl .125mg; tabs .125mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>oscimin sr tb12 .375mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>symax-sl subl .125mg</i>	1B	\$0 copay through Oscar Virtual Care

ANTIEMETICS

AKYNZEO CAP 300-0.5	3	QL (2 caps / 21 days)
<i>aprepitant caps 40mg</i>	3	QL (3 caps / 180 days)
<i>aprepitant caps 80mg</i>	3	QL (4 caps / 21 days)
<i>aprepitant caps 125mg</i>	3	QL (2 caps / 21 days)
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	3	QL (2 packs / 21 days)
CESAMET CAPS 1mg	3	QL (18 caps / 21 days)
<i>compro supp 25mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>dronabinol caps 2.5mg, 5mg, 10mg</i>	2	QL (60 caps / 25 days)
<i>granisetron hcl soln .1mg/ml, 1mg/ml, 4mg/4ml</i>	1B	QL (2 mL / 21 days); \$0 copay through Oscar Virtual Care
<i>granisetron hcl tabs 1mg</i>	1B	QL (12 tabs / 21 days); \$0 copay through Oscar Virtual Care
<i>meclizine hcl tabs 12.5mg, 25mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>metoclopramide hcl soln 5mg/ml, 10mg/10ml; tabs 5mg, 10mg; tbdp 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ondansetron tbdp 4mg, 8mg</i>	1A	QL (60 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>ondansetron hcl soln 4mg/2ml, 40mg/20ml</i>	1B	QL (20 mL / 21 days); \$0 copay through Oscar Virtual Care
<i>ondansetron hcl soln 4mg/5ml</i>	1B	QL (200 mL / 21 days); \$0 copay through Oscar Virtual Care
<i>ondansetron hcl tabs 4mg, 8mg</i>	1A	QL (18 tabs / 21 days); \$0 copay through Oscar Virtual Care
<i>ondansetron hcl tabs 24mg</i>	1B	QL (2 tabs / 21 days); \$0 copay through Oscar Virtual Care
<i>prochlorperazine supp 25mg</i>	2	
<i>prochlorperazine edisylate soln 10mg/2ml, 50mg/10ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>prochlorperazine maleate tabs 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>promethazine hcl soln 25mg/ml, 50mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>promethazine hcl syrp 6.25mg/5ml; tabs 12.5mg, 25mg, 50mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>SANCUSO PTCH 3.1mg/24hr</i>	2	PA
<i>scopolamine pt72 1mg/3days</i>	1B	\$0 copay through Oscar Virtual Care
<i>trimethobenzamide hcl caps 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>VARUBI EMUL 166.5mg/92.5ml; TBPk 90mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
H2-RECEPTOR ANTAGONISTS		
<i>cimetidine tabs 200mg, 300mg, 400mg, 800mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cimetidine hcl soln 300mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>famotidine soln 20mg/2ml, 40mg/4ml, 200mg/20ml; susr 40mg/5ml; tabs 20mg, 40mg</i>	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 caps 150mg, 300mg; soln 15mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>ranitidine hcl soln 50mg/2ml, 150mg/6ml</i>	1B	\$0 copay through Oscar Virtual Care
INFLAMMATORY BOWEL DISEASE		
<i>balsalazide disodium caps 750mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>budesonide cpep 3mg</i>	2	PA
<i>colocort enem 100mg/60ml</i>	1B	\$0 copay through Oscar Virtual Care
DIPENTUM CAPS 250mg	3	PA
<i>mesalamine cpdr 400mg; enem 4gm; supp 1000mg; tbec 1.2gm</i>	2	
<i>mesalamine tbec 800mg</i>	2	PA
<i>sulfasalazine tabs 500mg; tbec 500mg</i>	1B	\$0 copay through Oscar Virtual Care
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION		
LINZESS CAPS 72mcg, 145mcg, 290mcg	2	
<i>lubiprostone caps 8mcg, 24mcg</i>	1B	\$0 copay through Oscar Virtual Care
IRRITABLE BOWEL SYNDROME WITH DIARRHEA		
<i>alosetron hcl tabs .5mg, 1mg</i>	3	PA
LAXATIVES		
CLENPIQ SOL	2	
<i>enulose soln 10gm/15ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>gavilyte-c</i>	1B	\$0 copay through Oscar Virtual Care; \$0 copay for members age 45 through 75
<i>gavilyte-g</i>	1B	\$0 copay through Oscar Virtual Care; \$0 copay for members age 45 through 75

Drug Name	Drug Tier	Requirements/Limits
<i>gavilyte-h</i>	1B	\$0 copay through Oscar Virtual Care; \$0 copay for members age 45 through 75
<i>gavilyte-n/flavor pack</i>	1B	\$0 copay through Oscar Virtual Care; \$0 copay for members age 45 through 75
<i>generlac soln 10gm/15ml</i>	1B	\$0 copay through Oscar Virtual Care
GOLYTELY SOL	1B	
<i>lactulose soln 10gm/15ml</i>	1B	\$0 copay through Oscar Virtual Care
OSMOPREP TAB 1.5GM	3	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1B	\$0 copay through Oscar Virtual Care; \$0 copay for members age 45 through 75
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	1B	\$0 copay through Oscar Virtual Care; \$0 copay for members age 45 through 75
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm</i>	1B	\$0 copay through Oscar Virtual Care; \$0 copay for members age 45 through 75
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1B	\$0 copay through Oscar Virtual Care; \$0 copay for members age 45 through 75
PLENVU SOL	2	
<i>polyethylene glycol 3350 powd 17gm/scoop</i>	1B	OTC; \$0 copay through Oscar Virtual Care
PREPOPIK PAK	2	
SUPREP BOWEL SOL PREP KIT	2	
MISCELLANEOUS		
<i>cromolyn sodium (mastocytosis) conc 100mg/5ml</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>loperamide hcl caps 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>misoprostol tabs 100mcg, 200mcg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
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 tabs 1gm</i>	1B	\$0 copay through Oscar Virtual Care
<i>ursodiol caps 300mg; tabs 250mg, 500mg</i>	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**
<i>esomeprazole magnesium cpdr 20mg, 40mg</i>	3	PA, QL (30 caps / 30 days)
<i>esomeprazole sodium solr 20mg, 40mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>lansoprazole cpdr 15mg, 30mg</i>	1A	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>omeprazole cpdr 10mg, 20mg, 40mg</i>	1A	QL (30 caps / 30 days); \$0 copay through Oscar Virtual Care
<i>pantoprazole sodium tbec 20mg, 40mg</i>	1B	QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>rabeprazole sodium tbec 20mg</i>	2	PA, QL (30 tabs / 30 days)

RECTAL,CORTICOSTEROIDS

<i>procto-pak crea 1%</i>	1B	\$0 copay through Oscar Virtual Care
---------------------------	----	--------------------------------------

Drug Name	Drug Tier	Requirements/Limits
<i>proctosol hc crea 2.5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>proctozone-hc crea 2.5%</i>	1B	\$0 copay through Oscar Virtual Care

GASTROINTESTINAL AGENTS - MISC.

INFLAMMATORY BOWEL AGENTS

REMICADE SOLR 100mg	4	PA
STELARA SOLN 130mg/26ml	4	PA, QL (4 vials / 365 days)

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl tb24 10mg</i>	1B	\$0 copay through Oscar Virtual Care
CARDURA XL TB24 4mg, 8mg	3	ST; PA**
<i>dutasteride caps .5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>finasteride tabs 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>silodosin caps 4mg, 8mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tadalafil tabs 2.5mg, 5mg</i>	1B	PA, QL (30 tabs / 30 days); \$0 copay through Oscar Virtual Care
<i>tamsulosin hcl caps .4mg</i>	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
VCF VAGINAL CONTRACEPTIVE FILM 28%; FOAM 12.5%	0	OTC

MISCELLANEOUS

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

Drug Name	Drug Tier	Requirements/Limits
URINARY ANTISPASMODICS		
<i>darifenacin hydrobromide tb24 7.5mg, 15mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>oxybutynin chloride syrp 5mg/5ml; tabs 5mg; tb24 5mg, 10mg, 15mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>solifenacin succinate tabs 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tolterodine tartrate cp24 2mg, 4mg; tabs 1mg, 2mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tropium chloride cp24 60mg; tabs 20mg</i>	1B	\$0 copay through Oscar Virtual Care
VAGINAL ANTI-INFECTIVES		
CLEOCIN SUPP 100mg	2	
<i>clindamycin phosphate vaginal crea 2%</i>	1B	\$0 copay through Oscar Virtual Care
GYNAZOLE-1 CREA 2%	3	
<i>metronidazole vaginal gel .75%</i>	2	
<i>miconazole 3 supp 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>terconazole vaginal crea .4%, .8%; supp 80mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>vandazole gel .75%</i>	2	
HEMATOLOGIC		
ANTICOAGULANTS		
ARGATRB/NAACL INJ 50MG/50	3	
<i>argatroban soln 250mg/2.5ml</i>	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	
<i>enoxaparin sodium soln 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml, 300mg/3ml</i>	2	
<i>fondaparinux sodium soln 2.5mg/0.5ml, 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml</i>	3	
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) soln 1000unit/ml, 5000unit/0.5ml, 5000unit/ml, 10000unit/ml, 20000unit/ml</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>jantoven tabs 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>warfarin sodium tabs 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg</i>	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
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

MISCELLANEOUS

<i>anagrelide hcl caps .5mg, 1mg</i>	2	
<i>cilostazol tabs 50mg, 100mg</i>	1B	\$0 copay through Oscar Virtual Care
HEMLIBRA SOLN 30mg/ml, 60mg/0.4ml, 105mg/0.7ml, 150mg/ml	5	PA
<i>icatibant acetate soln 30mg/3ml</i>	4	PA, QL (45 syringes / 90 days)
<i>pentoxifylline tbc 400mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tranexamic acid soln 1000mg/10ml; tabs 650mg</i>	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	

Drug Name	Drug Tier	Requirements/Limits
<i>clopidogrel bisulfate tabs 75mg</i>	1A	\$0 copay through Oscar Virtual Care
<i>clopidogrel bisulfate tabs 300mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>dipyridamole tabs 25mg, 50mg, 75mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>prasugrel hcl tabs 5mg, 10mg</i>	1B	\$0 copay through Oscar Virtual Care

HEMATOPOIETIC AGENTS

HEMATOPOIETIC GROWTH FACTORS

NYVEPRIA SOSY 6mg/0.6ml	4	PA
-------------------------	---	----

IRON

FERROUS FUMARATE TABS 29mg	1B	OTC; \$0 copay through Oscar Virtual Care
<i>ferrous fumarate tabs 324mg</i>	1B	OTC; \$0 copay through Oscar Virtual Care
<i>ferrous gluconate tabs 240mg</i>	1B	OTC; \$0 copay through Oscar Virtual Care
FERROUS GLUCONATE TABS 324mg	1B	OTC; \$0 copay through Oscar Virtual Care
<i>ferrous sulfate elix 220mg/5ml; tbec 325mg</i>	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

HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS

NON-BARBITURATE HYPNOTICS

<i>quazepam tabs 15mg</i>	2	ST
---------------------------	---	----

IMMUNOLOGIC AGENTS

BIOLOGIC DISEASE-MODIFYING AGENTS

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 (4 syringes / 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis

Drug Name	Drug Tier	Requirements/Limits
ENBREL MINI SOCT 50mg/ml	4	PA, QL (4 cartridges / 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL SURECLICK SOAJ 50mg/ml	4	PA, QL (4 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)
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)

Drug Name	Drug Tier	Requirements/Limits
SIMPONI ARIA SOLN 50mg/4ml	4	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
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 tabs 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>leflunomide tabs 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>methotrexate sodium tabs 2.5mg</i>	1B	\$0 copay through Oscar Virtual Care
OTEZLA TABS 30mg	4	PA, QL (60 tabs / 30 days); Preferred agent for Psoriasis and Psoriatic Arthritis

Drug Name	Drug Tier	Requirements/Limits
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 (8 vials / 28 days)
POMALYST CAPS 1mg, 2mg, 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)

IMMUNOSUPPRESSANTS

AZASAN TABS 75mg, 100mg	3	
<i>azathioprine tabs 50mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cyclosporine caps 25mg, 100mg</i>	3	
<i>cyclosporine soln 50mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>cyclosporine modified (for microemulsion) caps 25mg, 50mg, 100mg; soln 100mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>gengraf caps 25mg, 100mg; soln 100mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>mycophenolate mofetil caps 250mg; tabs 500mg</i>	2	
<i>mycophenolate mofetil susr 200mg/ml</i>	3	
<i>mycophenolate mofetil hcl solr 500mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>mycophenolate sodium tbec 180mg, 360mg</i>	3	
PROGRAF SOLN 5mg/ml	3	
SANDIMMUNE SOLN 100mg/ml	3	

Drug Name	Drug Tier	Requirements/Limits
<i>sirolimus soln 1mg/ml; tabs .5mg, 1mg, 2mg</i>	3	
<i>tacrolimus caps 1mg, 5mg</i>	3	
<i>tacrolimus caps .5mg</i>	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	
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

Drug Name	Drug Tier	Requirements/Limits
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
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

Drug Name	Drug Tier	Requirements/Limits
MACROLIDES		
FIDAXOMICIN		
DIFICID SUSR 40mg/ml	2	PA
MEDICAL DEVICES		
CONTRACEPTIVES		
CAYA DPR	0	QL (1 / 300 days)
FC2 FEMALE MIS CONDOM	0	QL (12 condoms / 30 days), 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	
INSULIN PEN NEEDLES/SYRINGES	2	OTC
KETONE URINE TEST STRIPS	2	OTC
LANCETS	2	OTC
LANCING DEVICE	2	OTC
MISC LANCETS	2	OTC
NOVOFINE PEN NEEDLES	2	OTC
SHARPS CONTAINER	2	OTC
URINE GLUCOSE MONITORING SUPPLIES	2	OTC
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
MEDICAL DEVICES AND SUPPLIES		
DIABETIC SUPPLIES		
OMNIPOD KIT STARTER	2	PA
OMNIPOD MIS 5 PACK	2	PA

MNPA - Medical Necessity Prior Authorization **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy **^** - Insulin Cost-Sharing Cap Will Apply

Drug Name	Drug Tier	Requirements/Limits
MIGRAINE PRODUCTS		
MIGRAINE COMBINATIONS		
<i>migergot</i>	2	
SEROTONIN AGONISTS		
<i>frovatriptan succinate tabs 2.5mg</i>	2	ST, QL (12 tabs / 30 days)
MUSCULOSKELETAL THERAPY AGENTS		
MUSCLE RELAXANT COMBINATIONS		
<i>carisoprodol w/ aspirin & codeine tab 200-325-16 mg</i>	2	PA
NUTRITIONAL/SUPPLEMENTS		
ELECTROLYTES		
FLUORABON SOLN .55mg/0.6ml	0	\$0 applies for ages 5 and under, otherwise not covered
<i>floritab chew 1mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>floritab chew .25mg, .5mg; soln .125mg/drop</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>flura-drops soln .25mg/drop</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>k-effervescent tbcf 25meq</i>	1B	\$0 copay through Oscar Virtual Care
<i>klor-con 8 tbcf 8meq</i>	1B	\$0 copay through Oscar Virtual Care
<i>klor-con 10 tbcf 10meq</i>	1B	\$0 copay through Oscar Virtual Care
<i>klor-con m15 tbcf 15meq</i>	1B	\$0 copay through Oscar Virtual Care
<i>klor-con m20 tbcf 20meq</i>	1B	\$0 copay through Oscar Virtual Care
<i>ludent chew 1mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>ludent chew .25mg, .5mg</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>magnesium sulfate soln 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>	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 chew 2.2mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>nafrinse drops soln .125mg/drop</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>potassium chloride cpcr 8meq, 10meq; tbc 8meq, 10meq, 20meq</i>	1B	\$0 copay through Oscar Virtual Care
<i>potassium chloride soln 10%, 20%</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>potassium chloride microencapsulated crystals er tbc 10meq, 20meq</i>	1B	\$0 copay through Oscar Virtual Care
<i>sodium chloride soln 2.5meq/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>sodium chloride flush soln .9%</i>	1B	\$0 copay through Oscar Virtual Care
<i>sodium fluoride chew 1mg; tabs 1mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>sodium fluoride chew .25mg, .5mg; soln .5mg/ml; tabs .5mg</i>	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 soln 2meq/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>sodium chloride soln .45%, .9%, 3%, 5%</i>	1B	\$0 copay through Oscar Virtual Care

VITAMINS

<i>calcitriol caps .25mcg, .5mcg; soln 1mcg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>cholecalciferol caps 50000unit</i>	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 soln 1000mcg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>doxercalciferol caps .5mcg, 1mcg, 2.5mcg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>doxercalciferol soln 4mcg/2ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>elite-ob</i>	1B	\$0 copay through Oscar Virtual Care
<i>ergocalciferol caps 50000unit</i>	1B	\$0 copay through Oscar Virtual Care
<i>folic acid caps 800mcg</i>	0	QL (100 caps / 30 days), OTC; \$0 copay for women ages 55 and under, otherwise not covered
<i>folic acid tabs 1mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>folic acid tabs 400mcg, 800mcg</i>	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	OTC; \$0 copay through Oscar Virtual Care
<i>multi-vitamin/fluoride dr</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>multivitamin/fluoride</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 caps 1mcg, 2mcg, 4mcg; soln 2mcg/ml, 5mcg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>phytonadione tabs 5mg</i>	3	
<i>prenatabs rx</i>	1B	\$0 copay through Oscar Virtual Care
<i>pyridoxine hcl tabs 25mg, 50mg</i>	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

Drug Name	Drug Tier	Requirements/Limits
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	
<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

Drug Name	Drug Tier	Requirements/Limits
<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
<i>trifluridine soln 1%</i>	1B	\$0 copay through Oscar Virtual Care
ZIRGAN GEL .15%	3	

ANTI-INFLAMMATORIES

ACUVAIL SOLN .45%	2	
<i>bromfenac sodium (ophth) soln .09%</i>	1B	\$0 copay through Oscar Virtual Care
<i>dexamethasone sodium phosphate (ophth) soln .1%</i>	1B	\$0 copay through Oscar Virtual Care
<i>diclofenac sodium (ophth) soln .1%</i>	1B	\$0 copay through Oscar Virtual Care
DUREZOL EMUL .05%	2	ST; PA**
<i>flurbiprofen sodium soln .03%</i>	1B	\$0 copay through Oscar Virtual Care
FML OINT .1%	2	
FML FORTE SUSP .25%	2	
<i>ketorolac tromethamine (ophth) soln .4%, .5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>loteprednol etabonate susp .5%</i>	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) susp 1%</i>	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) soln .05%</i>	1B	\$0 copay through Oscar Virtual Care
<i>bepotastine besilate soln 1.5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>cromolyn sodium (ophth) soln 4%</i>	1B	\$0 copay through Oscar Virtual Care
EMADINE SOLN .05%	3	
<i>epinastine hcl (ophth) soln .05%</i>	1B	\$0 copay through Oscar Virtual Care
LASTACFT SOLN .25%	2	

Drug Name	Drug Tier	Requirements/Limits
<i>olopatadine hcl soln .1%, .2%</i>	1B	PA; \$0 copay through Oscar Virtual Care
PAZEO SOLN .7%	2	PA
ANTIGLAUCOMA		
ALPHAGAN P SOLN .1%	3	
<i>apraclonidine hcl soln .5%</i>	1B	\$0 copay through Oscar Virtual Care
<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>brinzolamide susp 1%</i>	1B	
<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	

Drug Name	Drug Tier	Requirements/Limits
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

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

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

MULTIPLE SCLEROSIS AGENTS

ZEPOSIA CAPS .92mg	4	PA, QL (30 / 30 Days)
ZEPOSIA 7DAY CAP STR PACK	4	PA, QL (1 / 365 Days)
ZEPOSIA CAP STR KIT	4	PA, QL (1 kit / 365 days)

RESPIRATORY

ANAPHYLAXIS TREATMENT AGENTS

<i>epinephrine (anaphylaxis) soaj .15mg/0.15ml, .15mg/0.3ml, .3mg/0.3ml</i>	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 ELLIPT 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 AER ELLIPTA	2	QL (1 package / 25 days)
TRELEGY AER ELLIPTA	2	QL (1 package / 30 days)

Drug Name	Drug Tier	Requirements/Limits
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
<i>brompheniramine tannate chew 12mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>carbinoxamine maleate soln 4mg/5ml; tabs 4mg</i>	1B	\$0 copay through Oscar Virtual Care
CLARINEX SYRP .5mg/ml	3	
<i>clemastine fumarate tabs 2.68mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>cyproheptadine hcl syrup 2mg/5ml; tabs 4mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>desloratadine tabs 5mg; tbdp 2.5mg, 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>diphenhydramine hcl elix 12.5mg/5ml; soln 50mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>hydroxyzine hcl soln 25mg/ml, 50mg/ml; syrup 10mg/5ml</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>hydroxyzine hcl tabs 10mg, 25mg, 50mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyzine pamoate caps 25mg, 50mg</i>	1A	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>hydroxyzine pamoate caps 100mg</i>	1B	PA; High Risk Medications require PA for members age 70 and older; \$0 copay through Oscar Virtual Care
<i>levocetirizine dihydrochloride soln 2.5mg/5ml; tabs 5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>olopatadine hcl (nasal) soln .6%</i>	1B	QL (1 container / 25 days); \$0 copay through Oscar Virtual Care

BETA AGONISTS

<i>albuterol sulfate aers 108mcg/act</i>	1B	QL (2 inhalers / 25 days); \$0 copay through Oscar Virtual Care
<i>albuterol sulfate nebu 2.5mg/0.5ml</i>	1B	QL (60 mL / 30 days); \$0 copay through Oscar Virtual Care
<i>albuterol sulfate nebu .083%, .63mg/3ml, 1.25mg/3ml</i>	1B	QL (5 boxes / 25 days); \$0 copay through Oscar Virtual Care
<i>albuterol sulfate syrp 2mg/5ml; tabs 2mg, 4mg; tb12 4mg, 8mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>levalbuterol hcl nebu 1.25mg/0.5ml</i>	1B	QL (45 mL / 30 days); \$0 copay through Oscar Virtual Care
<i>levalbuterol hcl nebu .31mg/3ml, .63mg/3ml, 1.25mg/3ml</i>	1B	QL (300 mL / 30 days); \$0 copay through Oscar Virtual Care
<i>levalbuterol tartrate aero 45mcg/act</i>	1B	QL (2 inhalers / 30 days); \$0 copay through Oscar Virtual Care
<i>metaproterenol sulfate syrp 10mg/5ml; tabs 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care
PERFOROMIST NEBU 20mcg/2ml	2	QL (60 vials / 25 days)
STRIVERDI RESPIMAT AERS 2.5mcg/act	2	QL (1 package / 25 days)
<i>terbutaline sulfate soln 1mg/ml; tabs 2.5mg, 5mg</i>	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)
---	---	---------------------------------

Drug Name	Drug Tier	Requirements/Limits
XOLAIR SOLR 150mg	4	PA, QL (8 vials / 28 days)
XOLAIR SOSY 75mg/0.5ml	4	PA, QL (2 syringes / 28 days)
XOLAIR SOSY 150mg/ml	4	PA, QL (8 syringes / 28 days)

COLD/COUGH

<i>benzonatate caps 100mg, 200mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>cheratussin ac</i>	1B	OTC; \$0 copay through Oscar Virtual Care
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	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 6.25-5 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>promethazine vc/codeine</i>	1B	\$0 copay through Oscar Virtual Care
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>tussigon</i>	1B	\$0 copay through Oscar Virtual Care
TUZISTRA XR SUS	3	
VITUZ SOL 5-4MG	3	

LEUKOTRIENE MODIFIERS

<i>zileuton tb12 600mg</i>	3	
----------------------------	---	--

LEUKOTRIENE RECEPTOR ANTAGONISTS

<i>montelukast sodium chew 4mg, 5mg; pack 4mg; tabs 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>zafirlukast tabs 10mg, 20mg</i>	1B	\$0 copay through Oscar Virtual Care

MAST CELL STABILIZERS

<i>cromolyn sodium nebu 20mg/2ml</i>	1B	QL (2 boxes / 25 days); \$0 copay through Oscar Virtual Care
--------------------------------------	----	--

MISCELLANEOUS

<i>acetylcysteine soln 10%, 20%</i>	2	
-------------------------------------	---	--

Drug Name	Drug Tier	Requirements/Limits
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) nebu .9%, 3%, 7%, 10%</i>	1B	\$0 copay through Oscar Virtual Care
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) soln .025%</i>	1B	QL (3 containers / 25 days); \$0 copay through Oscar Virtual Care
<i>fluticasone propionate (nasal) susp 50mcg/act</i>	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) aero 55mcg/act</i>	1A	QL (1 bottle / 25 days), OTC; \$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
STEROID INHALANTS		
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	2	QL (1 package / 25 days)
<i>budesonide (inhalation) susp 1mg/2ml</i>	1B	QL (1 box / 25 days); \$0 copay through Oscar Virtual Care
<i>budesonide (inhalation) susp .5mg/2ml</i>	1B	QL (2 boxes / 25 days); \$0 copay through Oscar Virtual Care
<i>budesonide (inhalation) susp .25mg/2ml</i>	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)
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 soln 25mg/ml</i>	1B	\$0 copay through Oscar Virtual Care
ELIXOPHYLLIN ELIX 80mg/15ml	3	
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	3	
<i>theochron tb12 100mg, 200mg, 300mg</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>theophylline soln 80mg/15ml; tb12 450mg; tb24 400mg, 600mg</i>	1B	\$0 copay through Oscar Virtual Care

RESPIRATORY AGENTS - MISC.

PULMONARY FIBROSIS AGENTS

OFEV CAPS 100mg, 150mg	5	PA, QL (60 caps / 30 days)
------------------------	---	----------------------------

TOPICAL

DERMATOLOGY, ACNE

<i>adapalene crea .1%; gel .1%, .3%</i>	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 crea .025%; gel .025%</i>	2	PA; PA applies for members age 35 and older
BENZIQL GEL 5.25%	2	
BENZIQL LS GEL 2.75%	2	
<i>benziq wash liqd 5.25%</i>	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 liqd 2.5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>clindamycin phosphate (topical) foam 1%; swab 1%</i>	1B	\$0 copay through Oscar Virtual Care
<i>clindamycin phosphate (topical) gel 1%</i>	1B	QL (75g / 25 days); \$0 copay through Oscar Virtual Care
<i>clindamycin phosphate (topical) lotn 1%; soln 1%</i>	1B	QL (60mL / 25 days); \$0 copay through Oscar Virtual Care
<i>ery pads 2%</i>	1B	\$0 copay through Oscar Virtual Care
<i>erythromycin (acne aid) gel 2%</i>	1B	QL (60g / 25 days); \$0 copay through Oscar Virtual Care
<i>erythromycin (acne aid) pads 2%</i>	1B	\$0 copay through Oscar Virtual Care
<i>erythromycin (acne aid) soln 2%</i>	1B	QL (60mL / 25 days); \$0 copay through Oscar Virtual Care
<i>isotretinoin caps 10mg, 20mg, 30mg, 40mg</i>	2	PA
<i>sulfacetamide sodium (acne) lotn 10%</i>	1B	\$0 copay through Oscar Virtual Care

Drug Name	Drug Tier	Requirements/Limits
<i>tretinoin crea .025%, .05%, .1%; gel .01%, .025%, .05%</i>	2	PA; PA applies for members age 35 and older
<i>tretinoin microsphere gel .04%, .1%</i>	2	PA; PA applies for members age 35 and older

DERMATOLOGY, ACTINIC KERATOSIS

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

DERMATOLOGY, ANTIBIOTICS

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

DERMATOLOGY, ANTIFUNGALS

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

Drug Name	Drug Tier	Requirements/Limits
<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)
<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
<i>sulconazole nitrate crea 1%</i>	1B	ST, QL (60g / 21 days); PA**, \$0 copay through Oscar Virtual Care
<i>sulconazole nitrate soln 1%</i>	1B	ST, QL (60mL / 21 days); PA**, \$0 copay through Oscar Virtual Care
DERMATOLOGY, ANTIPRURITIC		
<i>doxepin hcl (antipruritic) crea 5%</i>	3	ST, QL (90 grams / 25 days); PA**
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin caps 10mg, 17.5mg, 25mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>calcipotriene soln .005%</i>	1B	\$0 copay through Oscar Virtual Care
<i>calcitriol (topical) oint 3mcg/gm</i>	3	
COSENTYX SOSY 75mg/0.5ml, 150mg/ml	4	PA, QL (1 syringe / 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
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
COSENTYX SENSOREADY PEN SOAJ 150mg/ml	4	PA, QL (1 syringe / 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
<i>methoxsalen rapid caps 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>tazarotene crea .1%</i>	1B	PA; \$0 copay through Oscar Virtual Care
TAZORAC CREA .05%; GEL .05%, .1%	2	PA
DERMATOLOGY, ANTISEBORRHEICS		
<i>ketoconazole (topical) sham 2%</i>	1B	\$0 copay through Oscar Virtual Care
<i>selenium sulfide lotn 2.5%</i>	1B	\$0 copay through Oscar Virtual Care
DERMATOLOGY, CORTICOSTEROIDS		
<i>ala-cort crea 1%</i>	1A	QL (300g / 25 days); \$0 copay through Oscar Virtual Care
<i>alclometasone dipropionate crea .05%; oint .05%</i>	1B	QL (300g / 25 days); \$0 copay through Oscar Virtual Care
<i>amcinonide lotn .1%</i>	1B	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
AMCINONIDE OINT .1%	2	QL (240g / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate (topical) crea .05%; oint .05%</i>	1A	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone dipropionate (topical) lotn .05%</i>	1A	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone dipropionate augmented crea .05%; oint .05%</i>	1A	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone dipropionate augmented gel .05%</i>	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone dipropionate augmented lotn .05%</i>	1A	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone valerate crea .1%; oint .1%</i>	1A	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>betamethasone valerate lotn .1%</i>	1A	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	3	
<i>clobetasol propionate crea .05%; foam .05%; gel .05%; oint .05%</i>	2	QL (240g / 25 days)
<i>clobetasol propionate liqd .05%; sham .05%</i>	2	QL (300mL / 25 days)
<i>clobetasol propionate lotn .05%; soln .05%</i>	2	QL (240mL / 25 days)
<i>desonide crea .05%; oint .05%</i>	2	QL (300g / 25 days)
<i>desonide lotn .05%</i>	2	QL (300mL / 25 days)
<i>desoximetasone crea .25%; oint .25%</i>	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>fluocinolone acetonide crea .01%, .025%; oint .025%</i>	1B	QL (300g / 25 days); \$0 copay through Oscar Virtual Care
<i>fluocinolone acetonide oil .01%; soln .01%</i>	1B	QL (300mL / 25 days); \$0 copay through Oscar Virtual Care
<i>fluocinonide crea .05%; gel .05%; oint .05%</i>	1B	QL (240g / 25 days); \$0 copay through Oscar Virtual Care
<i>fluocinonide soln .05%</i>	1B	QL (240mL / 25 days); \$0 copay through Oscar Virtual Care

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

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine hcl gel 2%; prsy 2%</i>	1B	QL (60mL / 25 days); \$0 copay through Oscar Virtual Care
<i>lidocaine hcl soln 4%</i>	1B	QL (50mL / 25 days); \$0 copay through Oscar Virtual Care
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1B	QL (30gm / 25 days); \$0 copay through Oscar Virtual Care
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>pramox gel gel 1%</i>	1B	\$0 copay through Oscar Virtual Care
SYNERA DIS 70-70MG	3	QL (2 patches / 25 days)
<i>7t lido gel gel 2%</i>	1B	QL (30gm / 25 days); \$0 copay through Oscar Virtual Care

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

CONDYLOX GEL .5%	3	
<i>diclofenac sodium (topical) gel 1%</i>	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) crea 12%; lotn 10%, 12%</i>	1B	\$0 copay through Oscar Virtual Care
<i>podofilox soln .5%</i>	1B	\$0 copay through Oscar Virtual Care
RECTIV OINT .4%	3	
<i>tacrolimus (topical) oint .03%, .1%</i>	3	
TARGRETIN GEL 1%	4	PA
VOLTAREN GEL 1%	1B	QL (300g / 25 days), OTC; \$0 copay through Oscar Virtual Care

DERMATOLOGY, ROSACEA

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

Drug Name	Drug Tier	Requirements/Limits
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>crotan lotn 10%</i>	1B	\$0 copay through Oscar Virtual Care
EURAX CREA 10%	3	
<i>ivermectin (pediculicide) lotn .5%</i>	1B	PA; \$0 copay through Oscar Virtual Care
<i>lindane sham 1%</i>	1B	\$0 copay through Oscar Virtual Care
<i>malathion lotn .5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>permethrin crea 5%</i>	1B	\$0 copay through Oscar Virtual Care
<i>spinosad susp .9%</i>	2	
DERMATOLOGY, WOUND CARE AGENTS		
REGANEX GEL .01%	3	PA, QL (30g / 25 days)
<i>sodium chloride (gu irrigant) soln .9%</i>	1B	\$0 copay through Oscar Virtual Care
MOUTH/THROAT/DENTAL AGENTS		
<i>cevimeline hcl caps 30mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>chlorhexidine gluconate (mouth-throat) soln .12%</i>	1A	\$0 copay through Oscar Virtual Care
<i>clotrimazole troc 10mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>lidocaine hcl (mouth-throat) soln 2%, 4%</i>	1B	\$0 copay through Oscar Virtual Care
<i>nystatin (mouth-throat) susp 100000unit/ml</i>	1B	\$0 copay through Oscar Virtual Care
<i>oralone dental paste pste .1%</i>	1B	\$0 copay through Oscar Virtual Care
ORAVIG TABS 50mg	3	QL (14 tabs / 25 days)
<i>periogard soln .12%</i>	1A	\$0 copay through Oscar Virtual Care
<i>pilocarpine hcl (oral) tabs 5mg, 7.5mg</i>	1B	\$0 copay through Oscar Virtual Care
<i>triamcinolone acetonide (mouth) pste .1%</i>	1B	\$0 copay through Oscar Virtual Care
OTIC		
<i>acetic acid (otic) soln 2%</i>	1B	\$0 copay through Oscar Virtual Care
CIPRO HC SUS OTIC	3	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	2	
COLY-MYCIN S SUS OTIC	3	

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide (otic) oil .01%</i>	1B	\$0 copay through Oscar Virtual Care
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1B	\$0 copay through Oscar Virtual Care
<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

TOXOIDS

TOXOID COMBINATIONS

VAXELIS INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
-------------	---	---

URINARY ANTISPASMODICS

URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)

TOVIAZ TB24 4mg, 8mg	3	PA, QL (30 tabs / 30 days)
----------------------	---	----------------------------

VACCINES

VIRAL VACCINES

JANSSEN COVID-19 VACCINE SUSP .5ml	0	
MODERNA COVID-19 VACCINE SUSP 100mcg/0.5ml	0	
PFIZER-BIONTECH COVID-19 SUSP 30mcg/0.3ml	0	

Index

7	
<i>7t lido gel</i>	111
A	
<i>abacavir sulfate</i>	17
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	19
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	19
ABILIFY MAINTENA	35
<i>abiraterone acetate</i>	29
ABRAXANE INJ 100MG	28
<i>acamprosate calcium</i>	64
<i>acarbose</i>	66
ACCU-CHEK BLOOD GLUCOSE TEST KITS	92
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS.....	92
<i>acebutolol hcl</i>	42
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	3
<i>acetaminophen w/ codeine tab 300-15 mg</i>	3
<i>acetaminophen w/ codeine tab 300-30 mg</i>	3
<i>acetaminophen w/ codeine tab 300-60 mg</i>	3
<i>acetazolamide</i>	44
<i>acetazolamide sodium</i>	44
<i>acetic acid (otic)</i>	112
<i>acetylcysteine</i>	102
<i>acitretin</i>	107
ACTEMRA	86
ACTHIB INJ.....	90
ACTIMMUNE	89
ACUVAIL	97
<i>acyclovir</i>	21
<i>acyclovir sodium</i>	21
<i>acyclovir topical</i>	65
ADACEL INJ	90
<i>adapalene</i>	105
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	105
<i>adefovir dipivoxil</i>	21
ADEMPAS	47
<i>adrucil</i>	27
ADULT RESPIRATORY MASK.....	92
ADVAIR DISKU AER 100/50.....	104
ADVAIR DISKU AER 250/50.....	104
ADVAIR DISKU AER 500/50.....	104
ADVAIR HFA AER 115/21	104
ADVAIR HFA AER 230/21	104
ADVAIR HFA AER 45/21	104
<i>afeditab cr</i>	43
AFINITOR	30
AFINITOR DISPERZ	30
AFLURIA QUAD INJ 2020-21	90
AIMOVIG	60
AJOVY	60
AKYNZEO CAP 300-0.5	78
<i>ala-cort</i>	108
<i>albuterol sulfate</i>	101
<i>alclometasone dipropionate</i>	108
ALCOHOL PREP WIPES AND SWABS..	92
ALCOH-WIPE MIS 12	92
ALDACTAZIDE TAB 50/50.....	44
ALECENSA	31
<i>alendronate sodium</i>	70
ALFERON N	89
<i>alfuzosin hcl</i>	83
ALIMTA.....	27
ALINIA	14
<i>aliskiren fumarate</i>	44
<i>allopurinol</i>	1
<i>allopurinol sodium</i>	1
<i>almotriptan malate</i>	60
ALOCRIAL	97
<i>alogliptin benzoate</i>	66
ALOMIDE	97
<i>alosectron hcl</i>	80
ALPHAGAN P	98
<i>alprazolam</i>	47
ALPRAZOLAM INTENSOL	47
ALTABAX	65
<i>altavera</i>	70
<i>alyacen 1/35</i>	70
<i>alyacen 7/7/7</i>	70
<i>amantadine hcl</i>	55
<i>ambrisentan</i>	47
<i>amcinonide</i>	108
AMCINONIDE.....	108
<i>amethia</i>	70
<i>amethyst</i>	71

<i>amikacin sulfate</i>	13	<i>amlodipine besylate-olmesartan</i>	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	44	<i>medoxomil tab 5-20 mg</i>	37
<i>amiloride hcl</i>	45	<i>amlodipine besylate-olmesartan</i>	
<i>aminophylline</i>	104	<i>medoxomil tab 5-40 mg</i>	37
<i>amiodarone hcl</i>	39	<i>amlodipine besylate-valsartan tab 10-160 mg</i>	37
<i>amitriptyline hcl</i>	51	<i>amlodipine besylate-valsartan tab 10-320 mg</i>	37
<i>amlodipine besylate</i>	43	<i>amlodipine besylate-valsartan tab 5-160 mg</i>	37
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	43	<i>amlodipine besylate-valsartan tab 5-320 mg</i>	37
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	43	<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	37
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	43	<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	37
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	43	<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	37
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	43	<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	37
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	43	<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	37
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	43	<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	37
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	43	<i>amoxapine</i>	51
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	43	<i>amoxicillin</i>	24
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	43	<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	24
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	43	<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	24
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	35	<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	24
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	35	<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	25
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	35	<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	25
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	35	<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	25
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	35	<i>amoxicillin & k clavulanate tab 250-125 mg</i>	25
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	35	<i>amoxicillin & k clavulanate tab 500-125 mg</i>	25
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	37	<i>amoxicillin & k clavulanate tab 875-125 mg</i>	25
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	37		

<i>amoxicillin & k clavulanate tab er 12hr</i> 1000-62.5 mg	25	<i>aprepitant capsule therapy pack 80 &</i> 125 mg	78
<i>amphetamine sulfate</i>	57	<i>apri</i>	71
<i>amphetamine-dextroamphetamine cap</i> <i>er 24hr 10 mg</i>	57	APTIOM	48
<i>amphetamine-dextroamphetamine cap</i> <i>er 24hr 15 mg</i>	58	APTIVUS	17
<i>amphetamine-dextroamphetamine cap</i> <i>er 24hr 20 mg</i>	58	<i>aranelle</i>	71
<i>amphetamine-dextroamphetamine cap</i> <i>er 24hr 25 mg</i>	58	ARANESP ALBUMIN FREE	85
<i>amphetamine-dextroamphetamine cap</i> <i>er 24hr 30 mg</i>	58	ARCALYST	89
<i>amphetamine-dextroamphetamine cap</i> <i>er 24hr 5 mg</i>	57	ARGATRB/NACL INJ 50MG/50	84
<i>amphetamine-dextroamphetamine tab</i> 10 mg	58	<i>argatroban</i>	84
<i>amphetamine-dextroamphetamine tab</i> 12.5 mg	58	ARGATROBAN INJ 125/125	84
<i>amphetamine-dextroamphetamine tab</i> 15 mg	58	ARGATROBAN INJ 250/250	84
<i>amphetamine-dextroamphetamine tab</i> 20 mg	58	<i>aripiprazole</i>	56
<i>amphetamine-dextroamphetamine tab</i> 30 mg	58	ARISTADA	56
<i>amphetamine-dextroamphetamine tab</i> 5 mg	58	ARISTADA INITIO	56
<i>amphetamine-dextroamphetamine tab</i> 7.5 mg	58	<i>armodafinil</i>	64
<i>amphotericin b</i>	16	ARNUITY ELLIPTA	104
<i>ampicillin</i>	25	ARRANON	27
<i>ampicillin & sulbactam sodium for inj</i> 1.5 (1-0.5) gm	25	<i>arsenic trioxide</i>	33
<i>ampicillin & sulbactam sodium for inj 3</i> (2-1) gm	25	<i>asenapine maleate</i>	56
<i>ampicillin & sulbactam sodium for iv</i> <i>soln 15 (10-5) gm</i>	25	<i>ashlyna</i>	71
<i>ampicillin sodium</i>	25	<i>aspirin enteric coated ad</i>	13
ANADROL-50	65	<i>aspirin-dipyridamole cap er 12hr 25-</i> 200 mg	85
<i>anagrelide hcl</i>	85	<i>atazanavir sulfate</i>	17
<i>anastrozole</i>	29	<i>atenolol</i>	42
ANNOVERA MIS	71	<i>atenolol & chlorthalidone tab 100-25</i> <i>mg</i>	42
ANORO ELLIPT AER 62.5-25	99	<i>atenolol & chlorthalidone tab 50-25 mg</i>	41
APIDRA	26	<i>atomoxetine hcl</i>	58
APOKYN	55	<i>atorvastatin calcium</i>	41
<i>apraclonidine hcl</i>	98	<i>atovaquone</i>	14
<i>aprepitant</i>	78	<i>atovaquone-proguanil hcl tab 250-100</i> <i>mg</i>	16
		<i>atovaquone-proguanil hcl tab 62.5-25</i> <i>mg</i>	16
		<i>atropine sulfate</i>	78, 98
		AUBAGIO	62
		AUGMENTIN SUS 125/5ML	25
		<i>aviane</i>	71
		<i>avidoxy</i>	26
		<i>avita</i>	105
		AVONEX	62
		AVONEX PEN	62
		<i>azacitidine</i>	27
		AZACTAM/DEX INJ 1GM	14

AZACTAM/DEX INJ 2GM.....	14	<i>betaxolol hcl (ophth)</i>	98
AZASAN	89	<i>bethanechol chloride</i>	83
AZASITE	96	BETIMOL.....	98
<i>azathioprine</i>	89	BETOPTIC-S	98
<i>azelaic acid</i>	111	BEVESPI AER 9-4.8MCG	99
<i>azelastine hcl</i>	100	<i>bexarotene</i>	33
<i>azelastine hcl (ophth)</i>	97	BEXSERO INJ	90
<i>azithromycin</i>	23	<i>bicalutamide</i>	29
<i>aztreonam</i>	14	BIKTARVY TAB.....	19
<i>azurette</i>	71	<i>bimatoprost</i>	98
B		<i>bio-statin</i>	16
<i>bacitracin (ophthalmic)</i>	96	BIO-STATIN	16
<i>bacitracin-polymyxin b ophth oint</i>	96	<i>bisoprolol & hydrochlorothiazide tab</i>	
<i>bacitracin-polymyxin-neomycin-hc</i>		10-6.25 mg	42
<i>ophth oint 1%</i>	96	<i>bisoprolol & hydrochlorothiazide tab</i>	
<i>baclofen</i>	63	2.5-6.25 mg	42
BACTROBAN NASAL	106	<i>bisoprolol & hydrochlorothiazide tab 5-</i>	
<i>balsalazide disodium</i>	80	6.25 mg	42
BARACLUDGE.....	21	<i>bisoprolol fumarate</i>	42
BASAGLAR KWIKPEN	67	<i>bleomycin sulfata</i>	27
BELBUCA.....	12	BLEPHAMIDE OIN S.O.P.	96
BELSOMRA	60	BLEPHAMIDE SUS OP	96
<i>benazepril & hydrochlorothiazide tab</i>		BLOOD GLUCOSE CALIBRATION	
10-12.5 mg	35	SOLUTION.....	92
<i>benazepril & hydrochlorothiazide tab</i>		BOOSTRIX INJ.....	90
20-12.5 mg	35	<i>bosentan</i>	47
<i>benazepril & hydrochlorothiazide tab</i>		BOSULIF.....	31
20-25 mg	35	<i>bp wash</i>	105
<i>benazepril & hydrochlorothiazide tab 5-</i>		BREO ELLIPTA INH 100-25	104
6.25 mg	35	BREO ELLIPTA INH 200-25	104
<i>benazepril hcl</i>	36	BRILINTA.....	85
BENZIQU.....	105	<i>brimonidine tartrate</i>	98
BENZIQU LS	105	<i>brinzolamide</i>	98
<i>benziq wash</i>	105	BRIVIACT.....	48
<i>benzonatate</i>	102	<i>bromfenac sodium (ophth)</i>	97
<i>benzoyl peroxide-erythromycin gel 5-</i>		<i>bromocriptine mesylate</i>	55
3%	105	<i>brompheniramine tannate</i>	100
<i>benztropine mesylate</i>	55	<i>budesonide</i>	80
<i>bepotastine besilate</i>	97	<i>budesonide (inhalation)</i>	104
BESIVANCE	96	<i>bumetanide</i>	45
<i>betamethasone dipropionate (topical)</i>		<i>buprenorphine hcl</i>	12
.....	109	<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>betamethasone dipropionate</i>		12-3 mg (base equiv)	3
<i>augmented</i>	109	<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>betamethasone valerate</i>	109	2-0.5 mg (base equiv)	2
BETASERON.....	62	<i>buprenorphine hcl-naloxone hcl sl film</i>	
<i>betaxolol hcl</i>	42	4-1 mg (base equiv)	2

<i>buprenorphine hcl-naloxone hcl sl film</i> 8-2 mg (base equiv)	3	<i>captopril & hydrochlorothiazide tab 25-</i> 15 mg	35
<i>buprenorphine hcl-naloxone hcl sl tab</i> 2-0.5 mg (base equiv).....	3	<i>captopril & hydrochlorothiazide tab 25-</i> 25 mg	35
<i>buprenorphine hcl-naloxone hcl sl tab</i> 8-2 mg (base equiv)	3	<i>captopril & hydrochlorothiazide tab 50-</i> 15 mg	35
<i>bupropion hcl</i>	51	<i>captopril & hydrochlorothiazide tab 50-</i> 25 mg	35
<i>bupropion hcl (smoking deterrent)</i> ...	64	CARBAGLU	73
<i>bupirone hcl</i>	61	<i>carbamazepine</i>	48
<i>busulfan</i>	26	<i>carbidopa</i>	55
<i>butalbital-acetaminophen-caff w/ cod</i> cap 50-300-40-30 mg	4	<i>carbidopa & levodopa orally</i> disintegrating tab 10-100 mg	55
<i>butalbital-acetaminophen-caffeine cap</i> 50-300-40 mg	1	<i>carbidopa & levodopa orally</i> disintegrating tab 25-100 mg	55
<i>butalbital-acetaminophen-caffeine cap</i> 50-325-40 mg	1	<i>carbidopa & levodopa orally</i> disintegrating tab 25-250 mg	55
<i>butalbital-acetaminophen-caffeine tab</i> 50-325-40 mg	1	<i>carbidopa & levodopa tab 10-100 mg</i>	55
<i>butalbital-aspirin-caffeine cap 50-325-</i> 40 mg	1	<i>carbidopa & levodopa tab 25-100 mg</i>	55
<i>butorphanol tartrate</i>	4	<i>carbidopa & levodopa tab 25-250 mg</i>	55
BYSTOLIC.....	42	<i>carbidopa & levodopa tab er 25-100</i> mg	55
BYVALSON TAB 5-80MG	37	<i>carbidopa & levodopa tab er 50-200</i> mg	55
C		<i>carbidopa-levodopa-entacapone tabs</i> 12.5-50-200 mg.....	55
<i>cabergoline</i>	76	<i>carbidopa-levodopa-entacapone tabs</i> 18.75-75-200 mg.....	55
<i>calcipotriene</i>	108	<i>carbidopa-levodopa-entacapone tabs</i> 25-100-200 mg.....	55
<i>calcipotriene-betamethasone</i> dipropionate oint 0.005-0.064% .	109	<i>carbidopa-levodopa-entacapone tabs</i> 31.25-125-200 mg	55
<i>calcitonin (salmon)</i>	76	<i>carbidopa-levodopa-entacapone tabs</i> 37.5-150-200 mg.....	56
<i>calcitriol</i>	94	<i>carbidopa-levodopa-entacapone tabs</i> 50-200-200 mg.....	56
<i>calcitriol (topical)</i>	108	<i>carbinoxamine maleate</i>	100
<i>calcium acetate (phosphate binder)</i> .	77	<i>carboplatin</i>	33
CALQUENCE.....	31	CARDENE IV SOL 20/200ML	43
<i>camila</i>	71	CARDURA XL	83
<i>candesartan cilexetil</i>	39	<i>carisoprodol</i>	63
<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 16-12.5 mg</i>	37	<i>carisoprodol w/ aspirin & codeine tab</i> 200-325-16 mg.....	93
<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 32-12.5 mg</i>	37	<i>carmustine</i>	27
<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 32-25 mg</i> .	38	<i>carteolol hcl (ophth)</i>	98
<i>capecitabine</i>	28	<i>cartia xt</i>	43
CAPRELSA	31	<i>carvedilol</i>	42
<i>captopril</i>	36		

<i>carvedilol phosphate</i>	42	<i>cholestyramine light</i>	40
CAYA DPR.....	92	<i>choline fenofibrate</i>	40
CAYSTON	14	CHORIONIC GONADOTROPIN	76
<i>caziant</i>	71	<i>ciclopirox</i>	106
<i>cefaclor</i>	22	<i>ciclopirox olamine</i>	106
<i>cefadroxil</i>	22	<i>cidofovir</i>	21
<i>cefazolin sodium</i>	22	<i>cilostazol</i>	85
<i>cefdinir</i>	22	CIMDUO TAB 300-300	19
<i>cefditoren pivoxil</i>	22	<i>cimetidine</i>	80
<i>cefepime hcl</i>	22	<i>cimetidine hcl</i>	80
<i>cefixime</i>	22	<i>cinacalcet hcl</i>	70
<i>cefotaxime sodium</i>	22	CIPRO	23
<i>cefotetan disodium</i>	22	CIPRO HC SUS OTIC.....	112
<i>cefoxitin sodium</i>	22	<i>ciprofloxacin</i>	23
<i>cefpodoxime proxetil</i>	22	<i>ciprofloxacin 200 mg/100ml in d5w</i> ..	23
<i>cefprozil</i>	22	<i>ciprofloxacin 400 mg/200ml in d5w</i> ..	23
<i>ceftazidime</i>	22	<i>ciprofloxacin hcl</i>	23
<i>ceftibuten</i>	22	<i>ciprofloxacin hcl (ophth)</i>	96
CEFTIN	22	<i>ciprofloxacin-ciprofloxacin hcl tab er</i> 24hr 1000 mg(base eq)	23
<i>ceftriaxone sodium</i>	22	<i>ciprofloxacin-ciprofloxacin hcl tab er</i> 24hr 500 mg (base eq)	23
<i>cefuroxime axetil</i>	22	<i>ciprofloxacin-dexamethasone otic susp</i> 0.3-0.1%	112
<i>cefuroxime sodium</i>	22	<i>cisplatin</i>	33
<i>celecoxib</i>	1	<i>citalopram hydrobromide</i>	51
CELONTIN	48	CITRANATAL CAP HARMONY	94
<i>cephalexin</i>	22	CITRANATAL CAP MEDLEY	94
CERDELGA.....	73	CITRANATAL MIS	94
CESAMET	78	CITRANATAL MIS 90 DHA.....	94
<i>cevimeline hcl</i>	112	CITRANATAL MIS B-CALM	94
CHANTIX.....	64	CITRANATAL PAK ASSURE	94
CHANTIX CONTINUING MONTH	64	CITRANATAL PAK DHA	94
CHANTIX PAK 0.5& 1MG	64	CITRANATAL TAB BLOOM	94
<i>chateal</i>	71	CITRANATAL TAB RX	94
CHEMET	70	<i>cladribine</i>	28
<i>cheratussin ac</i>	102	CLARINEX	100
<i>chloramphenicol sodium succinate</i> ...	13	<i>clarithromycin</i>	23
<i>chlordiazepoxide hcl</i>	26	<i>clemastine fumarate</i>	100
<i>chlorhexidine gluconate (mouth-throat)</i>	112	CLENPIQ SOL	80
<i>chloroquine phosphate</i>	16	CLEOCIN.....	84
<i>chlorothiazide</i>	45	CLIMARA PRO DIS WEEKLY	74
<i>chlorothiazide sodium</i>	45	<i>clindamycin hcl</i>	14
<i>chlorpromazine hcl</i>	56	<i>clindamycin palmitate hydrochloride</i> .	14
CHLORPROMAZINE HCL.....	56	<i>clindamycin phosphate</i>	14
<i>chlorthalidone</i>	45	<i>clindamycin phosphate (topical)</i>	105
<i>chlorzoxazone</i>	63	<i>clindamycin phosphate vaginal</i>	84
<i>cholecalciferol</i>	94		
<i>cholestyramine</i>	40		

<i>clobazam</i>	48	CUVPOSA.....	78
<i>clobetasol propionate</i>	109	<i>cyanocobalamin</i>	94
<i>clofarabine</i>	28	<i>cyclafem 1/35</i>	71
<i>clomipramine hcl</i>	61, 62	<i>cyclafem 7/7/7</i>	71
<i>clonazepam</i>	48	<i>cyclobenzaprine hcl</i>	63
<i>clonidine</i>	46	<i>cyclophosphamide</i>	27
<i>clonidine hcl</i>	46	<i>cycloserine</i>	20
<i>clopidogrel bisulfate</i>	86	CYCLOSET.....	67
<i>clorazepate dipotassium</i>	48	<i>cyclosporine</i>	89
<i>clotrimazole</i>	112	<i>cyclosporine modified (for</i>	
<i>clotrimazole (topical)</i>	106, 107	<i>microemulsion)</i>	89
<i>clotrimazole w/ betamethasone cream</i>		<i>cyproheptadine hcl</i>	100
<i>1-0.05%</i>	107	CYSTADANE POW.....	73
<i>clotrimazole w/ betamethasone lotion</i>		CYSTAGON.....	73
<i>1-0.05%</i>	107	CYSTARAN	99
<i>clozapine</i>	56	<i>cytarabine</i>	28
COARTEM TAB 20-120MG	16	D	
<i>codeine sulfate</i>	4	<i>dacarbazine</i>	27
CODEINE SULFATE	4	<i>dalfampridine</i>	62
<i>colchicine</i>	1	DALIRESP	103
<i>colchicine w/ probenecid tab 0.5-500</i>		<i>danazol</i>	73
<i>mg</i>	1	<i>dantrolene sodium</i>	63
<i>colestipol hcl</i>	40	<i>dapsone</i>	14
<i>colocort</i>	80	DAPTACEL INJ	90
COLY-MYCIN S SUS OTIC	112	<i>daptomycin</i>	14
COMETRIQ	31	<i>darifenacin hydrobromide</i>	84
COMETRIQ KIT 100MG	31	<i>dasetta 1/35</i>	71
COMETRIQ KIT 140MG	31	<i>dasetta 7/7/7</i>	71
<i>compro</i>	78	<i>daunorubicin hcl</i>	27
CONDYLOX	111	<i>decitabine</i>	28
COPAXONE	62	<i>deferiprone</i>	70
CORLANOR	46	<i>delyla</i>	71
<i>cortisone acetate</i>	75	<i>demeclocycline hcl</i>	26
COSENTYX.....	108	DEPO-ESTRADIOL	74
COSENTYX SENSOREADY PEN	108	DEPO-MEDROL	75
CREON CAP 12000UNT	82	DEPO-PROVERA	29
CREON CAP 24000UNT	82	DEPO-SUBQ PROVERA 104	71
CREON CAP 3000UNIT	82	DESCOVY TAB 200/25MG.....	20
CREON CAP 36000UNT	82	<i>desipramine hcl</i>	51, 52
CREON CAP 6000UNIT	82	<i>desloratadine</i>	100
CRINONE.....	77	<i>desmopressin acetate</i>	78
CRIXIVAN.....	17	<i>desmopressin acetate spray</i>	78
<i>cromolyn sodium</i>	102	<i>refrigerated</i>	78
<i>cromolyn sodium (mastocytosis)</i>	81	<i>desonide</i>	109
<i>cromolyn sodium (ophth)</i>	97	<i>desoximetasone</i>	109
<i>crotan</i>	112	<i>desvenlafaxine succinate</i>	52
<i>cryselle-28</i>	71		

<i>dexamethasone</i>	75	<i>divalproex sodium</i>	48
DEXAMETHASONE INTENSOL	75	DIVIGEL	74
<i>dexamethasone sodium phosphate</i> ..	75	<i>docetaxel</i>	28
<i>dexamethasone sodium phosphate</i> (<i>ophth</i>)	97	DOCETAXEL	28
DEXILANT	82	DOCETAXEL (NON-ALCOHOL FO.....)	28
<i>dexmethylphenidate hcl</i>	58	<i>dofetilide</i>	39
<i>dexrazoxane hcl</i>	33	<i>donepezil hydrochloride</i>	50
<i>dextroamphetamine sulfate</i>	59	<i>doripenem</i>	14
<i>diazepam</i>	48	<i>dorzolamide hcl</i>	98
<i>diazepam intensol</i>	48	<i>dorzolamide hcl-timolol maleate ophth</i> <i>soln 22.3-6.8 mg/ml</i>	98
<i>diclofenac potassium</i>	1	DOVATO TAB 50-300MG	20
<i>diclofenac sodium</i>	2	<i>doxazosin mesylate</i>	37
<i>diclofenac sodium (ophth)</i>	97	<i>doxepin hcl</i>	52
<i>diclofenac sodium (topical)</i>	111	<i>doxepin hcl (antipruritic)</i>	107
<i>diclofenac w/ misoprostol tab delayed</i> <i>release 50-0.2 mg</i>	2	<i>doxepin hcl (sleep)</i>	60
<i>diclofenac w/ misoprostol tab delayed</i> <i>release 75-0.2 mg</i>	2	<i>doxercalciferol</i>	94, 95
<i>dicloxacillin sodium</i>	25	<i>doxorubicin hcl</i>	27
<i>dicyclomine hcl</i>	78	<i>doxorubicin hcl liposomal</i>	27
<i>didanosine</i>	17	<i>doxy 100</i>	26
DIFICID	23, 92	<i>doxycycline (monohydrate)</i>	26
<i>diflorasone diacetate</i>	65	<i>doxycycline hyclate</i>	26
<i>diflunisal</i>	13	<i>doxylamine succinate (sleep)</i>	60
<i>digox</i>	44	<i>dronabinol</i>	79
<i>digoxin</i>	44	<i>drospirenone-ethinyl estradiol tab 3-</i> <i>0.03 mg</i>	71
DILANTIN	48	<i>drospirenone-ethinyl estrad-</i> <i>levomefolate tab 3-0.03-0.451 mg</i>	71
DILATRATE SR	46	DROXIA	33
<i>diltiazem hcl</i>	43, 44	DRYSOL.....	65
DILTIAZEM HCL.....	43	DUAKLIR AER 400/12	26
<i>diltiazem hcl coated beads</i>	44	DUAVEE TAB 0.45-20	74
<i>diltiazem hcl extended release beads</i>	44	<i>duloxetine hcl</i>	52
<i>dimethyl fumarate</i>	62, 63	DUREZOL.....	97
<i>dimethyl fumarate capsule dr starter</i> <i>pack 120 mg & 240 mg</i>	63	<i>dutasteride</i>	83
DIP/TET PED INJ 25-5LFU.....	90	<i>dutasteride-tamsulosin hcl cap 0.5-0.4</i> <i>mg</i>	83
DIPENTUM.....	80	E	
<i>diphenhydramine hcl</i>	100	<i>e.e.s. 400</i>	23
<i>diphenoxylate w/ atropine liq 2.5-0.025</i> <i>mg/5ml</i>	81	<i>econazole nitrate</i>	107
<i>diphenoxylate w/ atropine tab 2.5-</i> <i>0.025 mg</i>	81	<i>ed-spaz</i>	78
<i>dipyridamole</i>	86	EDURANT.....	17
<i>disopyramide phosphate</i>	39	<i>efavirenz</i>	17
<i>disulfiram</i>	64	<i>efavirenz-lamivudine-tenofovir df tab</i> <i>400-300-300 mg</i>	20
DIURIL.....	45	<i>efavirenz-lamivudine-tenofovir df tab</i> <i>600-300-300 mg</i>	20

ELESTRIN	74	ENTRESTO TAB 24-26MG	46
<i>eletriptan hydrobromide</i>	60	ENTRESTO TAB 49-51MG	46
ELIGARD	29	ENTRESTO TAB 97-103MG	46
<i>elinest</i>	71	<i>enulose</i>	80
ELIQUIS	84	EPCLUSA TAB 200-50MG.....	35
ELIQUIS STARTER PACK	84	EPCLUSA TAB 400-100	24
<i>elite-ob</i>	95	EPIDIOLEX	48
ELIXOPHYLLIN	104	<i>epinastine hcl (ophth)</i>	97
ELLA.....	71	<i>epinephrine (anaphylaxis)</i>	99
ELMIRON.....	83	EPIPEN 2-PAK.....	99
EMADINE.....	97	EPIPEN-JR 2-PAK	99
EMBEDA CAP 100-4MG.....	4	<i>epirubicin hcl</i>	27
EMBEDA CAP 20-0.8MG.....	4	<i>epitol</i>	48
EMBEDA CAP 30-1.2MG.....	4	EPIVIR HBV.....	21
EMBEDA CAP 50-2MG.....	4	<i>eplerenone</i>	37
EMBEDA CAP 60-2.4MG.....	4	<i>epoprostenol sodium</i>	47
EMBEDA CAP 80-3.2MG.....	4	<i>eprosartan mesylate</i>	39
EMCYT	27	ERBITUX.....	29
EMGALITY	60	<i>ergocalciferol</i>	95
<i>emoquette</i>	71	<i>ergoloid mesylates</i>	50
EMSAM	52	ERIVEDGE.....	29
<i>emtricitabine</i>	17	ERLEADA	30
<i>emtricitabine-tenofovir disoproxil</i>		<i>erlotinib hcl</i>	31
<i>fumarate tab 100-150 mg</i>	20	<i>errin</i>	71
<i>emtricitabine-tenofovir disoproxil</i>		ERTACZO	107
<i>fumarate tab 133-200 mg</i>	20	<i>ertapenem sodium</i>	14
<i>emtricitabine-tenofovir disoproxil</i>		<i>ery</i>	105
<i>fumarate tab 167-250 mg</i>	20	<i>ery-tab</i>	23
<i>emtricitabine-tenofovir disoproxil</i>		ERYTHROCIN LACTOBIONATE	23
<i>fumarate tab 200-300 mg</i>	20	<i>erythrocin stearate</i>	23
EMTRIVA	17	<i>erythromycin (acne aid)</i>	105
EMVERM.....	14	<i>erythromycin (ophth)</i>	96
<i>enalapril maleate</i>	36	<i>erythromycin base</i>	23
<i>enalapril maleate & hydrochlorothiazide</i>		<i>erythromycin ethylsuccinate</i>	23
<i>tab 10-25 mg</i>	35	ESBRIET	103
<i>enalapril maleate & hydrochlorothiazide</i>		<i>escitalopram oxalate</i>	52
<i>tab 5-12.5 mg</i>	35	<i>esomeprazole magnesium</i>	82
ENBREL.....	86	<i>esomeprazole sodium</i>	82
ENBREL MINI	87	<i>estradiol</i>	74
ENBREL SURECLICK.....	87	<i>estradiol & norethindrone acetate tab</i>	
ENCARE	83	<i>0.5-0.1 mg</i>	74
ENGERIX-B.....	90	<i>estradiol & norethindrone acetate tab</i>	
<i>enoxaparin sodium</i>	84	<i>1-0.5 mg</i>	74
<i>enpresse-28</i>	71	<i>estradiol vaginal</i>	74
<i>enskyce</i>	71	<i>estradiol valerate</i>	74
<i>entacapone</i>	56	ESTROGEL	74
<i>entecavir</i>	21	<i>estropipate</i>	74

<i>eszopiclone</i>	60	FERROUS FUMARATE.....	86
<i>ethacrynate sodium</i>	45	<i>ferrous gluconate</i>	86
<i>ethacrynic acid</i>	45	FERROUS GLUCONATE.....	86
<i>ethambutol hcl</i>	20	<i>ferrous sulfate</i>	86
<i>ethosuximide</i>	49	FERROUS SULFATE.....	86
<i>ethynodiol diacetate & ethinyl estradiol</i> <i>tab 1 mg-50 mcg</i>	71	FETZIMA.....	52
<i>etodolac</i>	2	FETZIMA CAP TITRATIO	52
<i>etonogestrel-ethinyl estradiol va ring</i> <i>0.120-0.015 mg/24hr</i>	71	FIASP FLEX INJ TOUCH	67
<i>etoposide</i>	33	FIASP INJ 100/ML	67
<i>etravirine</i>	17	FIASP PENFIL INJ U-100	67
EUCRISA	111	FINACEA.....	111
EURAX	112	<i>finasteride</i>	83
EVAMIST	75	<i>flavoxate hcl</i>	83
<i>everolimus</i>	31	<i>flecainide acetate</i>	39
EVOTAZ TAB 300-150	20	FLOVENT DISKUS.....	26
<i>exemestane</i>	30	FLOVENT HFA.....	26
<i>ezetimibe</i>	40	<i>floxuridine</i>	28
<i>ezetimibe-simvastatin tab 10-10 mg</i>	40	FLUAD INJ 2020-21.....	90
<i>ezetimibe-simvastatin tab 10-20 mg</i>	40	FLUAD QUADRIVALENT INFLUE	90
<i>ezetimibe-simvastatin tab 10-40 mg</i>	40	FLUARIX QUAD INJ 2020-21	90
<i>ezetimibe-simvastatin tab 10-80 mg</i>	40	FLUBLOK QUAD INJ 2020-21	90
F		FLUCLVX QUAD INJ 2020-21	90
FACTIVE.....	23	<i>fluconazole</i>	16
<i>falmina</i>	71	<i>fluconazole in nacl 0.9% inj 200</i> <i>mg/100ml</i>	16
<i>famciclovir</i>	21	<i>fluconazole in nacl 0.9% inj 400</i> <i>mg/200ml</i>	16
<i>famotidine</i>	80	FLUCONAZOLE/ INJ NAACL 100	16
<i>famotidine in nacl 0.9% iv soln 20</i> <i>mg/50ml</i>	80	<i>fludarabine phosphate</i>	28
FARXIGA	69	<i>fludrocortisone acetate</i>	75
FARYDAK.....	29	FLULAVAL QUA INJ 2019-20	90
<i>fayosim</i>	71	FLULAVAL QUA INJ 2020-21	90
FC2 FEMALE MIS CONDOM.....	92	FLUMIST QUAD SUS 2020-21	90
<i>febuxostat</i>	1	<i>flunisolide (nasal)</i>	103
<i>felbamate</i>	49	<i>fluocinolone acetonide</i>	109
<i>felodipine</i>	44	<i>fluocinolone acetonide (otic)</i>	113
FEMCAP MIS 22MM	92	<i>fluocinonide</i>	109
FEMCAP MIS 26MM	92	FLUORABON	93
FEMCAP MIS 30MM	92	<i>fluoritab</i>	93
<i>fenofibrate</i>	40	FLUROPLEX	106
<i>fenofibrate micronized</i>	40	<i>fluorouracil</i>	28
<i>fentanyl</i>	4	<i>fluorouracil (topical)</i>	106
<i>fentanyl citrate</i>	4	<i>fluoxetine hcl</i>	53
FERRIPROX.....	70	<i>fluphenazine decanoate</i>	56
FERRIPROX TWICE-A-DAY	70	<i>fluphenazine hcl</i>	56
<i>ferrous fumarate</i>	86	<i>flura-drops</i>	93
		<i>flurbiprofen</i>	2

<i>flurbiprofen sodium</i>	97	<i>gentamicin in saline inj 2 mg/ml</i>	13
<i>flutamide</i>	30	<i>gentamicin sulfate</i>	14
<i>fluticasone propionate</i>	110	<i>gentamicin sulfate (ophth)</i>	96
<i>fluticasone propionate (nasal)</i>	103	<i>gentamicin sulfate (topical)</i>	106
<i>fluvastatin sodium</i>	41	GENVOYA TAB	20
<i>fluvoxamine maleate</i>	62	<i>gianvi</i>	71
FLUZONE HD INJ PF 19-20.....	90	GILENYA	63
FLUZONE QUAD INJ 2019-20	90	GLEOSTINE	27
FLUZONE QUAD INJ 2020-21	90	GLIADEL WAF 7.7MG	27
FML	97	<i>glimepiride</i>	69
FML FORTE	97	<i>glipizide</i>	69
<i>folic acid</i>	95	<i>glipizide-metformin hcl tab 2.5-250 mg</i>	66
<i>fondaparinux sodium</i>	84	<i>glipizide-metformin hcl tab 2.5-500 mg</i>	66
<i>fosamprenavir calcium</i>	17	<i>glipizide-metformin hcl tab 5-500 mg</i> 66	
<i>fosfomycin tromethamine</i>	13	<i>glucagon (rdna)</i>	76
<i>fosinopril sodium</i>	36	GLUCOSE URINE TEST STRIPS.....	92
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 10-12.5 mg</i>	35	<i>glyburide</i>	70
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 20-12.5 mg</i>	36	<i>glyburide micronized</i>	70
<i>fosphenytoin sodium</i>	49	<i>glyburide-metformin tab 1.25-250 mg</i>	66
FOSRENOL.....	77	<i>glyburide-metformin tab 2.5-500 mg</i> 66	
FRAGMIN.....	84	<i>glyburide-metformin tab 5-500 mg</i> ...66	
<i>frovatriptan succinate</i>	93	<i>glycopyrrolate</i>	78
<i>fulvestrant</i>	30	GLYXAMBI TAB 10-5 MG	69
<i>furosemide</i>	45	GLYXAMBI TAB 25-5 MG	69
FUZEON	18	GOLYTELY SOL	81
FYCOMPA	49	<i>goodsense aspirin</i>	13
G		<i>goodsense ibuprofen child</i>	2
<i>gabapentin</i>	49	<i>goodsense nicotine</i>	64
<i>galantamine hydrobromide</i>	50	<i>goodsense nicotine polacr</i>	64
GARDASIL 9 INJ	90	<i>granisetron hcl</i>	79
<i>gatifloxacin (ophth)</i>	96	<i>griseofulvin microsize</i>	16
<i>gavilyte-c</i>	80	<i>griseofulvin ultramicrosize</i>	16
<i>gavilyte-g</i>	80	<i>guanfacine hcl</i>	46
<i>gavilyte-h</i>	81	<i>guanfacine hcl (adhd)</i>	59
<i>gavilyte-n/flavor pack</i>	81	GUANIDINE HCL	62
GAZYVA	29	GYNAZOLE-1	84
<i>gemcitabine hcl</i>	28	H	
<i>gemfibrozil</i>	40	<i>halcinonide</i>	65
<i>generlac</i>	81	<i>halobetasol propionate</i>	110
<i>gengraf</i>	89	<i>haloperidol</i>	57
<i>gentak</i>	96	<i>haloperidol decanoate</i>	57
<i>gentamicin in saline inj 0.8 mg/ml</i> ...	13	<i>haloperidol lactate</i>	57
<i>gentamicin in saline inj 1 mg/ml</i>	13	HARVONI PAK.....	24
<i>gentamicin in saline inj 1.2 mg/ml</i> ...	13	HARVONI PAK 45-200MG	24
<i>gentamicin in saline inj 1.6 mg/ml</i> ...	13		

HARVONI TAB 45-200MG.....	24	<i>hydromet</i>	102
HARVONI TAB 90-400MG.....	24	<i>hydromorphone hcl</i>	5, 6
HAVRIX.....	90	HYDROMORPHONE HCL.....	6
<i>heather</i>	71	<i>hydroxychloroquine sulfate</i>	88
HEMLIBRA	85	<i>hydroxyurea</i>	33
<i>heparin sodium (porcine)</i>	84	<i>hydroxyzine hcl</i>	100
HEPLISAV-B.....	90	<i>hydroxyzine pamoate</i>	101
HETLIOZ	60	<i>hyoscyamine sulfate</i>	78
HEXALEN.....	27	HYPERCARE.....	65
HIBERIX.....	90	HYQVIA INJ 10-800	89
HUMATROPE	76	HYQVIA INJ 2.5-200	89
HUMATROPE COMBO PACK	76	HYQVIA INJ 20-1600	89
HUMATROPEN MIS FOR 12MG	92	HYQVIA INJ 30-2400	89
HUMATROPEN MIS FOR 24MG	92	HYQVIA INJ 5-400.....	89
HUMATROPEN MIS FOR 6MG	92	I	
HUMIRA	87	<i>ibandronate sodium</i>	70
HUMIRA PEDIA INJ CROHNS	87	IBRANCE.....	29
HUMIRA PEDIATRIC CROHNS D	87	<i>ibuprofen</i>	2
HUMIRA PEN.....	87	<i>icatibant acetate</i>	85
HUMIRA PEN KIT PS/UV	87	ICLUSIG	31
HUMIRA PEN-CD/UC/HS START	87	<i>icosapent ethyl</i>	41
HUMIRA PEN-PS/UV STARTER	87	<i>idarubicin hcl</i>	27
HUMULIN R U-500 (CONCENTR	67	IDHIFA	31
HUMULIN R U-500 KWIKPEN	67	<i>ifosfamide</i>	27
<i>hydralazine hcl</i>	46	<i>imatinib mesylate</i>	31
<i>hydrochlorothiazide</i>	45	IMBRUVICA.....	31
<i>hydrocodone bitartrate</i>	5	<i>imipenem-cilastatin intravenous for</i>	
<i>hydrocodone w/ homatropine syrup 5-</i>		<i>soln 250 mg</i>	14
<i>1.5 mg/5ml</i>	102	<i>imipenem-cilastatin intravenous for</i>	
<i>hydrocodone w/ homatropine tab 5-1.5</i>		<i>soln 500 mg</i>	14
<i>mg</i>	102	<i>imipramine hcl</i>	53
<i>hydrocodone-acetaminophen soln 7.5-</i>		<i>imipramine pamoate</i>	53
<i>325 mg/15ml</i>	5	<i>imiquimod</i>	106
<i>hydrocodone-acetaminophen tab 10-</i>		INCRELEX	76
<i>325 mg</i>	5	INCRUSE ELLIPTA	100
<i>hydrocodone-acetaminophen tab 5-325</i>		<i>indapamide</i>	45
<i>mg</i>	5	<i>indomethacin</i>	13
<i>hydrocodone-acetaminophen tab 7.5-</i>		INFANRIX INJ	90
<i>325 mg</i>	5	INLYTA	31
<i>hydrocodone-ibuprofen tab 10-200 mg</i>		INSTA-GLUCOSE.....	76
.....	5	INSULIN PEN NEEDLES	92
<i>hydrocortisone</i>	75	INSULIN PEN NEEDLES/SYRINGES ..	92
<i>hydrocortisone (topical)</i>	110	INTELENCE	18
<i>hydrocortisone butyrate</i>	110	INTRAROSA.....	65
<i>hydrocortisone valerate</i>	110	<i>introvale</i>	71
<i>hydrocortisone w/ acetic acid otic soln</i>		INVANZ	14
<i>1-2%</i>	113	INVEGA SUSTENNA	34

INVEGA TRINZA	34	KALYDECO	103
INVIRASE	18	<i>kariva</i>	71
IOPIDINE	98	<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	94
IPOL INJ INACTIVE	90	<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	94
<i>ipratropium bromide</i>	100	<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	94
<i>ipratropium bromide (nasal)</i>	100	<i>k-effervescent</i>	93
<i>ipratropium-albuterol nebu soln 0.5- 2.5(3) mg/3ml</i>	99	<i>kelnor 1/35</i>	71
<i>irbesartan</i>	39	<i>ketoconazole (topical)</i>	107, 108
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	38	KETONE URINE TEST STRIPS	92
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	38	<i>ketorolac tromethamine</i>	2
<i>irinotecan hcl</i>	34	<i>ketorolac tromethamine (ophth)</i>	97
ISENTRESS.....	18	KEVZARA	87
ISENTRESS HD	18	KEYTRUDA	29
<i>isoniazid</i>	21	KINRIX INJ.....	91
<i>isosorbide dinitrate</i>	46	<i>kionex</i>	70
<i>isosorbide mononitrate</i>	46	KISQALI	29
<i>isotretinoin</i>	105	KISQALI 200 PAK FEMARA.....	34
<i>isradipine</i>	44	KISQALI 400 PAK FEMARA.....	34
<i>itraconazole</i>	16	KISQALI 600 PAK FEMARA.....	34
IV PREP WIPE PAD.....	106	<i>klor-con 10</i>	93
<i>ivermectin</i>	14	<i>klor-con 8</i>	93
<i>ivermectin (pediculicide)</i>	112	<i>klor-con m15</i>	93
J		<i>klor-con m20</i>	93
JAKAFI.....	31	<i>kurvelo</i>	72
JANSSEN COVID-19 VACCINE	113	KYLEENA.....	72
<i>jantoven</i>	85	L	
JANUMET TAB 50-1000	67	<i>labetalol hcl</i>	42
JANUMET TAB 50-500MG.....	67	LACRISERT	99
JANUMET XR TAB 100-1000	67	<i>lactic acid (ammonium lactate)</i>	111
JANUMET XR TAB 50-1000.....	67	<i>lactulose</i>	81
JANUMET XR TAB 50-500MG	67	<i>lamivudine</i>	18
JANUVIA	66	<i>lamivudine (hbv)</i>	21
JARDIANCE.....	69	<i>lamivudine-zidovudine tab 150-300 mg</i>	20
<i>jinteli</i>	75	<i>lamotrigine</i>	49
<i>jolessa</i>	71	<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	49
<i>jolivette</i>	71	<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	49
<i>junel 1.5/30</i>	71	LANCETS	92
<i>junel 1/20</i>	71	LANCING DEVICE.....	92
<i>junel fe 1.5/30</i>	71	LANOXIN	44
<i>junel fe 1/20</i>	71	LANOXIN PEDIATRIC	44
K		<i>lansoprazole</i>	82
KADCYLA.....	29	<i>lapatinib ditosylate</i>	31
KALETRA TAB 100-25MG	20		
KALETRA TAB 200-50MG	20		

<i>larin 1.5/30</i>	72	<i>levora 0.15/30-28</i>	72
LASTACFT	97	<i>levorphanol tartrate</i>	13
<i>latanoprost</i>	98	<i>levothyroxine sodium</i>	77
LATUDA	57	<i>levoxyl</i>	77
<i>leena</i>	72	LEXIVA	18
<i>leflunomide</i>	88	LIDO/DEXTROS INJ 5-7.5%.....	13
LENVIMA 10 MG DAILY DOSE	32	<i>lidocaine</i>	110
LENVIMA 12MG DAILY DOSE.....	32	<i>lidocaine hcl</i>	111
LENVIMA 20 MG DAILY DOSE	32	<i>lidocaine hcl (cardiac)</i>	39
LENVIMA 4 MG DAILY DOSE.....	31	<i>lidocaine hcl (local anesth.)</i>	13
LENVIMA 8 MG DAILY DOSE.....	32	<i>lidocaine hcl (mouth-throat)</i>	112
LENVIMA CAP 14 MG.....	32	<i>lidocaine iv infusion in d5w inj 4 mg/ml</i>	39
LENVIMA CAP 18 MG.....	32	<i>lidocaine iv infusion in d5w inj 8 mg/ml</i>	39
LENVIMA CAP 24 MG.....	32	<i>lidocaine-prilocaine cream 2.5-2.5%</i>	111
<i>lessina</i>	72	<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	111
<i>letrozole</i>	30	LILETTA	72
<i>leucovorin calcium</i>	33	<i>lindane</i>	112
LEUKERAN	27	<i>linezolid</i>	15
<i>leuprolide acetate</i>	30	<i>linezolid in sodium chloride iv soln 600</i> <i>mg/300ml-0.9%</i>	15
<i>levabuterol hcl</i>	101	LINZESS	80
<i>levabuterol tartrate</i>	101	<i>liothyronine sodium</i>	77
LEVEMIR	67	<i>lisinopril</i>	36
LEVEMIR FLEXTOUCH.....	67	<i>lisinopril & hydrochlorothiazide tab 10-</i> <i>12.5 mg</i>	36
<i>levetiracetam</i>	49	<i>lisinopril & hydrochlorothiazide tab 20-</i> <i>12.5 mg</i>	36
<i>levetiracetam in sodium chloride iv soln</i> <i>1000 mg/100ml</i>	49	<i>lisinopril & hydrochlorothiazide tab 20-</i> <i>25 mg</i>	36
<i>levetiracetam in sodium chloride iv soln</i> <i>1500 mg/100ml</i>	49	LITHIUM	62
<i>levetiracetam in sodium chloride iv soln</i> <i>500 mg/100ml</i>	49	<i>lithium carbonate</i>	62
<i>levobunolol hcl</i>	98	<i>loperamide hcl</i>	81
<i>levocetirizine dihydrochloride</i>	101	<i>lopinavir-ritonavir soln 400-100</i> <i>mg/5ml (80-20 mg/ml)</i>	20
<i>levofloxacin</i>	23	<i>lorazepam</i>	48
<i>levofloxacin (ophth)</i>	96	LORBRENA	32
<i>levofloxacin in d5w iv soln 250</i> <i>mg/50ml</i>	23	<i>loryna</i>	72
<i>levofloxacin in d5w iv soln 500</i> <i>mg/100ml</i>	23	<i>losartan potassium</i>	39
<i>levofloxacin in d5w iv soln 750</i> <i>mg/150ml</i>	24	<i>losartan potassium &</i> <i>hydrochlorothiazide tab 100-12.5 mg</i>	38
<i>levonest</i>	72	<i>losartan potassium &</i> <i>hydrochlorothiazide tab 100-25 mg</i>	38
<i>levonorgestrel & ethinyl estradiol (91-</i> <i>day) tab 0.15-0.03 mg</i>	72		
<i>levonorgestrel & ethinyl estradiol tab</i> <i>0.15 mg-30 mcg</i>	72		
<i>levonorg-eth est tab 0.1-0.02mg(84) &</i> <i>eth est tab 0.01mg(7)</i>	72		

<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	38	MENEST.....	75
.....	38	MENTAX.....	107
<i>loteprednol etabonate</i>	97	MENVEO INJ.....	91
<i>lovastatin</i>	41	<i>meprobamate</i>	48
<i>low-ogestrel</i>	72	<i>mercaptopurine</i>	28
<i>loxapine succinate</i>	57	<i>meropenem</i>	15
<i>lubiprostone</i>	80	<i>mesalamine</i>	80
<i>ludent</i>	93	<i>mesna</i>	33
<i>luliconazole</i>	65	MESNEX	33
LUMIGAN	98	<i>metaproterenol sulfate</i>	101
LUPRON DEPOT-PED (1-MONTH)	30	<i>metaxalone</i>	64
LUPRON DEPOT-PED (3-MONTH)	30	<i>metformin hcl</i>	66
<i>lutera</i>	72	<i>methadone hcl</i>	6, 7
LYNPARZA	29	<i>methadone hydrochloride i</i>	7
LYSODREN	30	<i>methadose</i>	7
M		<i>methamphetamine hcl</i>	59
<i>magnesium sulfate</i>	93	<i>methazolamide</i>	45
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	93	<i>methenamine hippurate</i>	15
<i>malathion</i>	112	<i>methimazole</i>	77
<i>mannitol</i>	45	<i>methocarbamol</i>	64
<i>maprotiline hcl</i>	53	<i>methotrexate sodium</i>	28, 88
<i>marlissa</i>	72	<i>methoxsalen rapid</i>	108
MARPLAN	53	<i>methscopolamine bromide</i>	78
MATULANE	33	<i>methyclothiazide</i>	45
<i>matzim la</i>	44	<i>methyl dopa</i>	46
MAXIDEX.....	97	<i>methyl dopate hcl</i>	46
MAYZENT	63	<i>methylphenidate hcl</i>	59
<i>meclizine hcl</i>	79	<i>methylprednisolone</i>	75
<i>meclofenamate sodium</i>	2	<i>methylprednisolone acetate</i>	75
MEDROL.....	75	<i>methylprednisolone sod succ</i>	76
<i>medroxyprogesterone acetate</i>	77	<i>methyltestosterone</i>	66
<i>medroxyprogesterone acetate (contraceptive)</i>	72	<i>metipranolol</i>	98
<i>mefenamic acid</i>	2	<i>metoclopramide hcl</i>	79
<i>mefloquine hcl</i>	17	<i>metolazone</i>	45
<i>megestrol acetate</i>	30	<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	42
<i>megestrol acetate (appetite)</i>	30	<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	42
MEKINIST.....	32	<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	42
<i>meloxicam</i>	2	<i>metoprolol succinate</i>	42
<i>melphalan</i>	27	<i>metoprolol tartrate</i>	42
<i>melphalan hcl</i>	27	<i>metronidazole</i>	15
<i>memantine hcl</i>	50	<i>metronidazole (topical)</i>	111
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	50	<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	15
MENACTRA INJ.....	91	<i>metronidazole vaginal</i>	84

<i>mexiletine hcl</i>	39	<i>multivitamin with fluorid</i>	95
MIACALCIN	76	<i>multivitamin/fluoride</i>	95
<i>miconazole 3</i>	84	<i>multi-vitamin/fluoride dr</i>	95
<i>microgestin 1.5/30</i>	72	<i>multi-vitamin/fluoride/ir</i>	95
<i>midodrine hcl</i>	46	<i>mupirocin</i>	106
<i>migergot</i>	93	<i>mvc-fluoride</i>	95
<i>miglitol</i>	66	MYALEPT	73
<i>mimvey</i>	75	<i>mycophenolate mofetil</i>	89
<i>mimvey lo</i>	75	<i>mycophenolate mofetil hcl</i>	89
<i>minitran</i>	46	<i>mycophenolate sodium</i>	89
<i>minocycline hcl</i>	26	<i>myzilra</i>	72
<i>minoxidil</i>	46	N	
MIRCERA	85	<i>nabumetone</i>	2
MIRENA	72	<i>nadolol</i>	43
<i>mirtazapine</i>	53	<i>nadolol & bendroflumethiazide tab 40-5</i>	
MIRVASO	111	<i>mg</i>	42
MISC LANCETS	92	<i>nafcillin sodium</i>	25
<i>misoprostol</i>	81	<i>nafrinse</i>	93
<i>mitomycin</i>	27	<i>nafrinse drops</i>	94
<i>mitoxantrone hcl</i>	33	<i>naftifine hcl</i>	107
M-M-R II INJ	91	<i>nalbuphine hcl</i>	9
<i>modafinil</i>	64	<i>naloxone hcl</i>	64
MODERNA COVID-19 VACCINE	113	<i>naltrexone hcl</i>	64
<i>moexipril hcl</i>	36	NAMENDA XR CAP TITRATIO	50
<i>moexipril-hydrochlorothiazide tab 15-</i>		<i>naproxen</i>	2
<i>12.5 mg</i>	36	<i>naratriptan hcl</i>	61
<i>moexipril-hydrochlorothiazide tab 15-</i>		NARCAN	64
<i>25 mg</i>	36	NATACYN	96
<i>moexipril-hydrochlorothiazide tab 7.5-</i>		<i>nateglinide</i>	68
<i>12.5 mg</i>	36	<i>necon 0.5/35-28</i>	72
<i>mometasone furoate</i>	110	<i>nefazodone hcl</i>	53
<i>mono-lynyah</i>	72	<i>neomycin sulfate</i>	14
<i>mononessa</i>	72	<i>neomycin-polymy-gramicid op sol</i>	
<i>montelukast sodium</i>	102	<i>1.75-10000-0.025mg-unt-mg/ml</i> ..	96
<i>morgidox 1x100mg</i>	26	<i>neomycin-polymyxin-dexamethasone</i>	
<i>morphine sulfate</i>	7, 8, 9	<i>ophth oint 0.1%</i>	96
MORPHINE SULFATE	7	<i>neomycin-polymyxin-dexamethasone</i>	
<i>morphine sulfate beads</i>	9	<i>ophth susp 0.1%</i>	96
MOTOFEN TAB 1-0.025	82	<i>neomycin-polymyxin-hc ophth susp</i> ..	96
MOVANTIK	82	<i>neomycin-polymyxin-hc otic soln 1%</i>	
<i>moxifloxacin hcl</i>	24	113
<i>moxifloxacin hcl (ophth)</i>	96	<i>neomycin-polymyxin-hc otic susp 3.5</i>	
<i>moxifloxacin hcl 400 mg/250ml in</i>		<i>mg/ml-10000 unit/ml-1%</i>	113
<i>sodium chloride 0.8% inj</i>	24	NEUPRO	56
MULTAQ	39	NEVANAC	97
<i>multi-vit/fluoride</i>	95	<i>nevirapine</i>	18
<i>multi-vit/iron/fluoride</i>	95	NEXAVAR	32

NEXPLANON.....	72	<i>norgestimate & ethinyl estradiol tab</i>	
NEXTERONE INJ	39	0.25 mg-35 mcg	72
<i>niacin (antihyperlipidemic)</i>	41	<i>norgestimate-eth estrad tab 0.18-</i>	
<i>nicardipine hcl</i>	44	25/0.215-25/0.25-25 mg-mcg	72
<i>nicorelief</i>	65	<i>norgestimate-eth estrad tab 0.18-</i>	
<i>nicotine</i>	65	35/0.215-35/0.25-35 mg-mcg	72
<i>nicotine polacrilex</i>	65	NORPACE CR	39
<i>nicotine step 3</i>	65	<i>nortrel 0.5/35 (28)</i>	73
NICOTROL INHALER.....	65	<i>nortrel 1/35</i>	73
NICOTROL NS	65	<i>nortrel 7/7/7</i>	73
<i>nifedipine</i>	44	<i>nortriptyline hcl</i>	53, 54
<i>nikki</i>	72	NORTUSS-EX LIQ 200-20/5.....	102
<i>nilutamide</i>	30	NORVIR	18
<i>nimodipine</i>	44	NOVOFINE PEN NEEDLES	92
NIPENT	28	NOVOLIN INJ 70/30	67
<i>nisoldipine</i>	44	NOVOLIN INJ 70/30 FP	67
<i>nitazoxanide</i>	15	NOVOLIN N	68
<i>nitisinone</i>	73	NOVOLIN N FLEXPEN	68
NITRO-BID	46	NOVOLIN R	68
NITRO-DUR	46	NOVOLIN R FLEXPEN	68
<i>nitrofurantoin</i>	15	NOVOLOG	68
<i>nitrofurantoin macrocrystal</i>	15	NOVOLOG FLEXPEN.....	68
<i>nitrofurantoin monohyd macro</i>	15	NOVOLOG MIX INJ 70/30	68
<i>nitroglycerin</i>	46, 47	NOVOLOG MIX INJ FLEXPEN	68
NITROGLYCERIN	46	NOVOLOG PENFILL.....	68
<i>nitroglycerin iv soln 100 mcg/ml in d5w</i>		NUCALA.....	101
.....	47	NUEDEXTA CAP 20-10MG.....	62
<i>nitroglycerin iv soln 200 mcg/ml in d5w</i>		<i>nulev</i>	78
.....	47	NUPLAZID	57
<i>nitroglycerin iv soln 400 mcg/ml in d5w</i>		<i>nyamyc</i>	107
.....	47	<i>nystatin</i>	16
<i>niva-fol</i>	95	<i>nystatin (mouth-throat)</i>	112
NIVESTYM	85	<i>nystatin (topical)</i>	107
<i>nizatidine</i>	80	<i>nystatin-triamcinolone cream 100000-</i>	
<i>nora-be</i>	72	0.1 unit/gm-%.....	107
<i>norethindrone (contraceptive)</i>	72	<i>nystatin-triamcinolone oint 100000-0.1</i>	
<i>norethindrone & ethinyl estradiol-fe</i>		unit/gm-%	107
<i>chew tab 0.4 mg-35 mcg</i>	72	<i>nystop</i>	107
<i>norethindrone & ethinyl estradiol-fe</i>		NYVEPRIA	86
<i>chew tab 0.8 mg-25 mcg</i>	72	O	
<i>norethindrone ace & ethinyl estradiol</i>		<i>ocella</i>	73
<i>tab 1 mg-20 mcg</i>	72	<i>octreotide acetate</i>	76
<i>norethindrone ace-ethinyl estradiol-fe</i>		ODEFSEY TAB.....	20
<i>tab 1 mg-20 mcg (24)</i>	72	ODOMZO	33
<i>norethindrone acetate</i>	77	OFEV.....	105
<i>norethindrone acetate-ethinyl estradiol</i>		<i>ofloxacin</i>	24
<i>tab 0.5 mg-2.5 mcg</i>	75	<i>ofloxacin (ophth)</i>	96

<i>ofloxacin (otic)</i>	113	ORKAMBI TAB 100-125.....	103
<i>ogestrel</i>	73	ORKAMBI TAB 200-125.....	103
<i>olanzapine</i>	57	<i>orphenadrine citrate</i>	64
<i>olmesartan medoxomil</i>	39	<i>orsythia</i>	73
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 20-12.5 mg</i>	38	<i>oscimin</i>	78
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-12.5 mg</i>	38	<i>oscimin sr</i>	78
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-25 mg</i> .	38	<i>oseltamivir phosphate</i>	21
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 20-5-12.5</i> <i>mg</i>	38	<i>osmitrol viaflex</i>	45
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-12.5</i> <i>mg</i>	38	OSMOPREP TAB 1.5GM	81
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-25 mg</i>	38	OSPHERA.....	76
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-12.5</i> <i>mg</i>	38	OTEZLA	88
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-25 mg</i>	38	OTEZLA TAB 10/20/30.....	89
<i>olopatadine hcl</i>	98	<i>oxacillin sodium</i>	25
<i>olopatadine hcl (nasal)</i>	101	<i>oxaliplatin</i>	33
<i>omega-3-acid ethyl esters cap 1 gm</i>	41	<i>oxandrolone</i>	66
<i>omeprazole</i>	82	<i>oxaprozin</i>	2
OMNARIS	103	<i>oxazepam</i>	48
OMNIFLEX DPR	92	<i>oxcarbazepine</i>	49
OMNIPOD KIT STARTER.....	92	<i>oxiconazole nitrate</i>	65
OMNIPOD MIS 5 PACK.....	92	<i>oxybutynin chloride</i>	84
ONCASPAR	33	<i>oxycodone hcl</i>	9, 10
<i>ondansetron</i>	79	<i>oxycodone w/ acetaminophen soln 5-</i> <i>325 mg/5ml</i>	10
<i>ondansetron hcl</i>	79	<i>oxycodone w/ acetaminophen tab 10-</i> <i>325 mg</i>	11
OPSUMIT.....	47	<i>oxycodone w/ acetaminophen tab 2.5-</i> <i>325 mg</i>	10
OPTIONS CONCEPTROL VAGINA	83	<i>oxycodone w/ acetaminophen tab 5-</i> <i>325 mg</i>	10
OPTIONS GYNOL II VAGINAL	83	<i>oxycodone w/ acetaminophen tab 7.5-</i> <i>325 mg</i>	11
<i>oralone dental paste</i>	112	<i>oxycodone-aspirin tab 4.8355-325 mg</i>	11
ORAVIG	112	<i>oxycodone-ibuprofen tab 5-400 mg</i> ..	11
ORENITRAM.....	47	<i>oxymorphone hcl</i>	11
ORFADIN.....	73	OZEMPIC	67
ORKAMBI GRA 100-125.....	103	P	
ORKAMBI GRA 150-188.....	103	<i>pacerone</i>	39
		<i>paclitaxel</i>	28
		<i>paliperidone</i>	57
		<i>pamidronate disodium</i>	70
		<i>pantoprazole sodium</i>	82
		PARAGARD IUD T380A.....	73
		<i>paraplatin</i>	34
		<i>paricalcitol</i>	95
		<i>paromomycin sulfate</i>	14
		<i>paroxetine hcl</i>	54

PASER	21	<i>pilocarpine hcl</i>	98
PAZEO	98	<i>pilocarpine hcl (oral)</i>	112
PCE	23	<i>pimozide</i>	62
PEDIARIX INJ 0.5ML	91	<i>pindolol</i>	43
PEDIATRIC RESPIRATORY MASK.....	92	<i>pioglitazone hcl</i>	68
PEDVAX HIB	91	<i>pioglitazone hcl-glimepiride tab 30-2</i> <i>mg</i>	68
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i> <i>for soln 236 gm</i>	81	<i>pioglitazone hcl-glimepiride tab 30-4</i> <i>mg</i>	68
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i> <i>for soln 240 gm</i>	81	<i>pioglitazone hcl-metformin hcl tab 15-</i> <i>500 mg</i>	68
<i>peg 3350-kcl-nacl-na sulfate-na</i> <i>ascorbate-c for soln 100 gm</i>	81	<i>pioglitazone hcl-metformin hcl tab 15-</i> <i>850 mg</i>	68
<i>peg 3350-kcl-sod bicarb-nacl for soln</i> <i>420 gm</i>	81	<i>piperacillin sod-tazobactam na for inj</i> <i>3.375 gm (3-0.375 gm)</i>	25
PEGANONE	49	<i>piperacillin sod-tazobactam sod for inj</i> <i>2.25 gm (2-0.25 gm)</i>	25
PEGASYS.....	24	<i>piperacillin sod-tazobactam sod for inj</i> <i>4.5 gm (4-0.5 gm)</i>	25
PEGASYS PROCLICK.....	24	<i>piperacillin sod-tazobactam sod for inj</i> <i>40.5 gm (36-4.5 gm)</i>	25
<i>penicillamine</i>	70	<i>pirmella 1/35</i>	73
<i>penicillin g potassium</i>	25	<i>pirmella 7/7/7</i>	73
<i>penicillin g sodium</i>	25	<i>piroxicam</i>	2
<i>penicillin v potassium</i>	25	PLEGRIDY	63
PENTACEL INJ	91	PLEGRIDY INJ STARTER	63
<i>pentamidine isethionate</i>	15	PLEGRIDY PEN INJ STARTER.....	63
<i>pentoxifylline</i>	85	PLENVU SOL.....	81
PERFOROMIST	101	PNEUMOVAX 23/1 DOSE	91
<i>perindopril erbumine</i>	36	<i>podofilox</i>	111
<i>periogard</i>	112	<i>polycin</i>	96
<i>permethrin</i>	112	<i>polyethylene glycol 3350</i>	81
<i>perphenazine</i>	57	<i>polymyxin b sulfate</i>	15
PERSERIS.....	34	<i>polymyxin b-trimethoprim ophth soln</i> <i>10000 unit/ml-0.1%</i>	97
PFIZER-BIONTECH COVID-19	113	POMALYST	89
<i>pfizerpen</i>	25	<i>portia-28</i>	73
<i>phenazopyridine tab 95mg</i>	83	<i>potassium chloride</i>	94
<i>phenelzine sulfate</i>	54	<i>potassium chloride microencapsulated</i> <i>crystals er</i>	94
<i>phenobarbital</i>	49	<i>potassium citrate (alkalinizer)</i>	83
<i>phenoxybenzamine hcl</i>	46	PRALUENT.....	41
<i>phenylephrine hcl (mydriatic)</i>	99	<i>pramipexole dihydrochloride</i>	56
<i>phenytoin</i>	49	<i>pramox gel</i>	111
<i>phenytoin sodium</i>	49	<i>prasugrel hcl</i>	86
<i>phenytoin sodium extended</i>	49	<i>pravastatin sodium</i>	41
PHOSLYRA.....	77	<i>praziquantel</i>	15
PHOSPHOLINE IODIDE	98		
PHOTOFRIN	33		
<i>physiolyte</i>	99		
<i>physiosol irrigation</i>	99		
<i>phytonadione</i>	95		
PICATO	106		

<i>prazosin hcl</i>	37	<i>propranolol & hydrochlorothiazide tab</i>	
PRED MILD	97	80-25 mg	42
<i>prednicarbate</i>	110	<i>propranolol hcl</i>	43
<i>prednisolone</i>	76	<i>propylthiouracil</i>	77
<i>prednisolone acetate (ophth)</i>	97	PROQUAD INJ.....	91
PREDNISOLONE SODIUM PHOSP	97	<i>protriptyline hcl</i>	54
<i>prednisolone sodium phosphate</i>	76	<i>pseudoephed-bromphen-dm syrup 30-</i>	
<i>prednisone</i>	76	2-10 mg/5ml	102
PREDNISONE INTENSOL.....	76	<i>pyrazinamide</i>	21
<i>pregabalin</i>	49	<i>pyridostigmine bromide</i>	62
PREMARIN	75	<i>pyridoxine hcl</i>	95
<i>prenatabs rx</i>	95	<i>pyrimethamine</i>	15
PREPOPIK PAK	81	Q	
<i>prevalite</i>	40	QUADRAMET	33
<i>previfem</i>	73	<i>quasense</i>	73
PREVNAR 13 INJ.....	91	<i>quazepam</i>	86
PREZCOBIX TAB 800-150	20	<i>quetiapine fumarate</i>	57
PREZISTA.....	18	<i>quinapril hcl</i>	36
PRIFTIN	21	<i>quinapril-hydrochlorothiazide tab 10-</i>	
<i>primaquine phosphate</i>	17	12.5 mg	36
<i>primidone</i>	50	<i>quinapril-hydrochlorothiazide tab 20-</i>	
PRIMSOL.....	15	12.5 mg	36
<i>probenecid</i>	1	<i>quinapril-hydrochlorothiazide tab 20-25</i>	
<i>procainamide hcl</i>	39	mg	36
<i>prochlorperazine</i>	79	<i>quinidine sulfate</i>	40
<i>prochlorperazine edisylate</i>	79	<i>quinine sulfate</i>	17
<i>prochlorperazine maleate</i>	79	QVAR REDIHALER	104
<i>procto-pak</i>	82	R	
<i>proctosol hc</i>	83	<i>rabeprazole sodium</i>	82
<i>proctozone-hc</i>	83	<i>raloxifene hcl</i>	76
<i>progesterone</i>	77	<i>ramelteon</i>	60
PROGRAF	89	<i>ramipril</i>	37
PROLASTIN-C	103	<i>ranitidine hcl</i>	80
PROLIA	76	<i>ranolazine</i>	46
PROMACTA	85	<i>rasagiline mesylate</i>	56
<i>promethazine & phenylephrine syrup</i>		REBETOL	24
6.25-5 mg/5ml.....	102	REBIF.....	63
<i>promethazine hcl</i>	79	REBIF REBIDO INJ TITRATN	63
<i>promethazine vc/codeine</i>	102	REBIF REBIDOSE	63
<i>promethazine w/ codeine syrup 6.25-</i>		REBIF TITRTN INJ PACK	63
10 mg/5ml.....	102	<i>reclipsen</i>	73
<i>promethazine-dm syrup 6.25-15</i>		RECOMBIVAX HB	91
mg/5ml.....	102	RECTIV	111
<i>propafenone hcl</i>	40	REGONOL	62
<i>proparacaine hcl</i>	99	REGRANEX.....	112
<i>propranolol & hydrochlorothiazide tab</i>		RELENZA DISKHALER	21
40-25 mg	42	REMICADE	83

REMODULIN.....	47	<i>sevelamer carbonate</i>	77
<i>repaglinide</i>	68	SHARPS CONTAINER	92
<i>repaglinide-metformin hcl tab 1-500</i>		SHINGRIX	91
<i>mg</i>	68	SHUR-SEAL	83
<i>repaglinide-metformin hcl tab 2-500</i>		SIGNIFOR	77
<i>mg</i>	68	<i>sildenafil citrate (pulmonary</i>	
RESCRIPTOR.....	18	<i>hypertension)</i>	47
RESTASIS.....	99	<i>silodosin</i>	83
RETACRIT.....	85	<i>silver sulfadiazine</i>	106
RETROVIR IV INFUSION	18	SIMBRINZA SUS 1-0.2%.....	98
REVLIMID.....	89	SIMPONI.....	87
REXULTI.....	57	SIMPONI ARIA.....	88
REYATAZ	18	<i>simvastatin</i>	41
<i>ribavirin</i>	21	<i>sirolimus</i>	90
<i>ribavirin (hepatitis c)</i>	24	SIRTURO	21
<i>rifabutin</i>	21	SIVEXTRO	15
RIFAMATE CAP	21	SKYLA	73
<i>rifampin</i>	21	SKYRIZI.....	65, 88
RIFATER TAB	21	SKYRIZI PEN	65
<i>riluzole</i>	62	<i>sm nicotine transdermal s</i>	65
<i>rimantadine hydrochloride</i>	21	<i>sodium chloride</i>	94
RINVOQ	87	<i>sodium chloride (gu irrigant)</i>	112
<i>risedronate sodium</i>	70	<i>sodium chloride (inhalant)</i>	103
RISPERDAL CONSTA	34	<i>sodium chloride flush</i>	94
<i>risperidone</i>	57	<i>sodium fluoride</i>	94
<i>ritonavir</i>	19	<i>sodium phenylbutyrate</i>	74
<i>rivastigmine</i>	50	<i>sodium polystyrene sulfonate</i>	70
<i>rivastigmine tartrate</i>	50	<i>solifenacin succinate</i>	84
<i>rivelsa</i>	73	SOLIQUA INJ 100/33	67
<i>rizatriptan benzoate</i>	61	SOLU-CORTEF	76
<i>ropinirole hydrochloride</i>	56	SOLU-MEDROL	76
<i>rosadan</i>	111	SOMATULINE DEPOT	77
<i>rosuvastatin calcium</i>	41	SOMAVERT.....	77
ROTARIX SUS	91	<i>sorine</i>	40
ROTATEQ SOL.....	91	<i>sotalol hcl</i>	40
RYDAPT.....	29	<i>sotalol hcl (afib/afl)</i>	40
S		SOTALOL HYDROCHLORIDE.....	40
SANCUSO.....	79	SOVALDI	24
SANDIMMUNE	89	<i>spinosad</i>	112
<i>sapropterin dihydrochloride</i>	74	SPIRIVA HANDIHALER	100
SAVELLA	62	SPIRIVA RESPIMAT	100
SAVELLA MIS TITR PAK	62	<i>spironolactone</i>	45
<i>scopolamine</i>	79	<i>spironolactone & hydrochlorothiazide</i>	
<i>selegiline hcl</i>	56	<i>tab 25-25 mg</i>	45
<i>selenium sulfide</i>	108	<i>sprintec 28</i>	73
SELZENTRY	19	SPRYCEL.....	32
<i>sertraline hcl</i>	54	<i>sronyx</i>	73

<i>ssd</i>	106	SYNJARDY TAB 5-500MG.....	69
<i>stavudine</i>	19	SYNJARDY XR TAB	69
STELARA	83, 88	SYNJARDY XR TAB 10-1000.....	69
STIVARGA	32	SYNJARDY XR TAB 25-1000.....	69
<i>streptomycin sulfate</i>	14	SYNJARDY XR TAB 5-1000MG	69
STRIVERDI RESPIMAT	101	SYNTHROID	77
SUBLOCADE	12	T	
SUCRAID.....	82	TABLOID.....	28
<i>sucralfate</i>	82	<i>tacrolimus</i>	90
<i>sulconazole nitrate</i>	107	<i>tacrolimus (topical)</i>	111
<i>sulfacetamide sodium (acne)</i>	105	<i>tadalafil</i>	83
<i>sulfacetamide sodium (ophth)</i>	97	<i>tadalafil (pulmonary hypertension)</i> ...	47
<i>sulfacetamide sodium-prednisolone</i> <i>ophth soln 10-0.23(0.25)%</i>	96	TAFINLAR	32
SULFADIAZINE.....	14	<i>take action</i>	73
<i>sulfamethoxazole-trimethoprim iv soln</i> <i>400-80 mg/5ml</i>	15	TALTZ	88
<i>sulfamethoxazole-trimethoprim susp</i> <i>200-40 mg/5ml</i>	15	<i>tamoxifen citrate</i>	30
<i>sulfamethoxazole-trimethoprim tab</i> <i>400-80 mg</i>	15	<i>tamsulosin hcl</i>	83
<i>sulfamethoxazole-trimethoprim tab</i> <i>800-160 mg</i>	16	TARGRETIN.....	111
SULFAMYLON	106	<i>tazarotene</i>	108
<i>sulfasalazine</i>	80	<i>tazicef</i>	22
<i>sulindac</i>	2	TAZORAC.....	108
<i>sumatriptan</i>	61	<i>taztia xt</i>	44
<i>sumatriptan succinate</i>	61	TDVAX INJ 2-2 LF	91
<i>sumatriptan-naproxen sodium tab 85-</i> <i>500 mg</i>	61	<i>telmisartan</i>	39
<i>sunitinib malate</i>	32	<i>telmisartan-amlodipine tab 40-10 mg</i>	38
SUNOSI	1	<i>telmisartan-amlodipine tab 40-5 mg</i> .	38
SUPRAX	22	<i>telmisartan-amlodipine tab 80-10 mg</i>	38
SUPREP BOWEL SOL PREP KIT	81	<i>telmisartan-amlodipine tab 80-5 mg</i> .	38
<i>syeda</i>	73	<i>telmisartan-hydrochlorothiazide tab 40-</i> <i>12.5 mg</i>	38
<i>symax-sl</i>	78	<i>telmisartan-hydrochlorothiazide tab 80-</i> <i>12.5 mg</i>	38
SYMBICORT AER 160-4.5	104	<i>telmisartan-hydrochlorothiazide tab 80-</i> <i>25 mg</i>	38
SYMBICORT AER 80-4.5	104	<i>temazepam</i>	60
SYMDEKO TAB 100-150.....	103	TEMIXYS TAB 300-300.....	20
SYMDEKO TAB 50-75MG.....	103	TEMODAR	27
SYMLINPEN 120	66	<i>temozolomide</i>	27
SYMLINPEN 60	66	<i>tencon</i>	1
SYNAREL.....	73	TENIPOSIDE.....	34
SYNERA DIS 70-70MG.....	111	TENIVAC INJ 5-2LF.....	91
SYNJARDY TAB.....	69	<i>tenofovir disoproxil fumarate</i>	19
SYNJARDY TAB 12.5-500	69	<i>terazosin hcl</i>	37
SYNJARDY TAB 5-1000MG	69	<i>terbinafine hcl</i>	16
		<i>terbutaline sulfate</i>	101

<i>terconazole vaginal</i>	84	<i>trandolapril-verapamil hcl tab er 2-240</i>	
<i>testosterone</i>	66	<i>mg</i>	36
<i>testosterone cypionate</i>	66	<i>trandolapril-verapamil hcl tab er 4-240</i>	
<i>testosterone enanthate</i>	66	<i>mg</i>	36
<i>tetrabenazine</i>	62	<i>tranexamic acid</i>	85
<i>tetracycline hcl</i>	26	<i>tranylcypromine sulfat</i> e	54
THALOMID.....	89	<i>travoprost</i>	98
THEO-24	104	<i>trazodone hcl</i>	54
<i>theochron</i>	104	TRECATOR	21
<i>theophylline</i>	105	TRELEGY AER ELLIPTA	99
<i>thioridazine hcl</i>	57	TREMFYA	88
<i>thiothixene</i>	57	TRESIBA	68
THYROSAFE	70	TRESIBA FLEXTOUCH	68
<i>tiagabine hcl</i>	50	<i>tretinoin</i>	106
TICE BCG	33	<i>tretinoin (chemotherapy)</i>	33
<i>timolol maleate</i>	43	<i>tretinoin microsphere</i>	106
<i>timolol maleate (ophth)</i>	98	<i>triamcinolone acetonide (mouth)</i>	112
<i>tinidazole</i>	14	<i>triamcinolone acetonide (nasal)</i>	103
<i>tis-u-sol</i>	99	<i>triamcinolone acetonide (topical)</i>	110
TIVICAY	19	<i>triamterene</i>	45
<i>tizanidine hcl</i>	64	<i>triamterene & hydrochlorothiazide cap</i>	
TOBRADEX OIN 0.3-0.1%.....	96	<i>37.5-25 mg</i>	45
TOBRADEX ST SUS 0.3-0.05	96	<i>triamterene & hydrochlorothiazide tab</i>	
<i>tobramycin</i>	1, 14	<i>37.5-25 mg</i>	45
<i>tobramycin (ophth)</i>	97	<i>triamterene & hydrochlorothiazide tab</i>	
<i>tobramycin sulfate</i>	14	<i>75-50 mg</i>	46
<i>tobramycin-dexamethasone ophth susp</i>		<i>triderm</i>	110
<i>0.3-0.1%</i>	96	<i>trifluoperazine hcl</i>	57
TODAY SPONGE	83	<i>trifluridine</i>	97
<i>tolcapone</i>	56	<i>trihexyphenidyl hcl</i>	56
<i>tolmetin sodium</i>	2	TRIKAFTA TAB.....	103
<i>tolterodine tartrate</i>	84	<i>tri-linyuh</i>	73
<i>tolvaptan</i>	77	<i>trimethobenzamide hcl</i>	79
<i>topiramate</i>	50	<i>trimethoprim</i>	16
<i>toposar</i>	34	<i>trimipramine maleate</i>	54, 55
<i>topotecan hcl</i>	34	<i>trinessa</i>	73
<i>toremifene citrate</i>	30	<i>tri-sprintec</i>	73
<i>torseamide</i>	45	TRIUMEQ TAB.....	20
TOVIAZ	113	<i>tri-vit/fluoride</i>	95
<i>tramadol hcl</i>	12	<i>tri-vit/fluoride/iron</i>	95
<i>tramadol-acetaminophen tab 37.5-325</i>		<i>trivora-28</i>	73
<i>mg</i>	12	TROGARZO	19
<i>trandolapril</i>	37	<i>tropicamide</i>	99
<i>trandolapril-verapamil hcl tab er 1-240</i>		<i>tropium chloride</i>	84
<i>mg</i>	36	TRULICITY	67
<i>trandolapril-verapamil hcl tab er 2-180</i>		TRUMENBA INJ	91
<i>mg</i>	36	<i>tussigon</i>	102

TUZISTRA XR SUS	102	VERZENIO.....	34
TWINRIX INJ.....	91	VIBRAMYCIN	26
TYBOST.....	19	VICTOZA.....	67
TYMLOS	77	VIDEX EC.....	19
TYSABRI	63	VIDEX PEDIATRIC	19
TYVASO STARTER.....	47	<i>vigabatrin</i>	50
U		VIIBRYD	55
<i>unithroid</i>	78	VIIBRYD KIT STARTER.....	55
UPTRAVI	47	VIMPAT.....	50
UPTRAVI TAB 200/800	47	<i>vinblastine sulfate</i>	28
URINE GLUCOSE MONITORING		<i>vincasar pfs</i>	28
SUPPLIES	92	<i>vincristine sulfate</i>	28
URINE TEST STRIPS.....	92	<i>vinorelbine tartrate</i>	28
<i>ursodiol</i>	82	VIOKACE TAB 10440	82
UVADEX	33	VIOKACE TAB 20880	82
V		<i>viorele</i>	73
<i>valacyclovir hcl</i>	21	VIRACEPT	19
<i>valganciclovir hcl</i>	21	VIREAD	19
<i>valproate sodium</i>	50	VISTOGARD	33
<i>valproic acid</i>	50	<i>vitamins a/c/d/fluoride</i>	95
<i>valsartan</i>	39	VITRAKVI.....	32
<i>valsartan-hydrochlorothiazide tab 160-</i>		VITUZ SOL 5-4MG	102
<i>12.5 mg</i>	38	VIVITROL.....	65
<i>valsartan-hydrochlorothiazide tab 160-</i>		VOLTAREN	111
<i>25 mg</i>	39	<i>voriconazole</i>	16
<i>valsartan-hydrochlorothiazide tab 320-</i>		VOSEVI TAB	24
<i>12.5 mg</i>	39	VOTRIENT	32
<i>valsartan-hydrochlorothiazide tab 320-</i>		VUMERITY.....	63
<i>25 mg</i>	39	W	
<i>valsartan-hydrochlorothiazide tab 80-</i>		<i>warfarin sodium</i>	85
<i>12.5 mg</i>	38	<i>wera</i>	73
<i>vancomycin hcl</i>	16	WIDE-SEAL SILICONE DIAPHR.....	92
<i>vandazole</i>	84	X	
VAQTA	91	XALKORI.....	32
VARIVAX	91	XARELTO	85
VARUBI.....	79	XARELTO STAR TAB 15/20MG	85
VASCEPA.....	41	XELJANZ	88
VAXELIS INJ	113	XELJANZ XR	88
VCF VAGINAL CONTRACEPTIVE	83	XEPI.....	65
<i>velivet</i>	73	XERAC AC	65
VELPHORO	77	XIFAXAN.....	16
VEMLIDY	22	XIGDUO XR TAB 10-1000.....	69
VENCLEXTA	34	XIGDUO XR TAB 10-500MG	69
VENCLEXTA TAB START PK	34	XIGDUO XR TAB 2.5-1000.....	69
<i>venlafaxine hcl</i>	55	XIGDUO XR TAB 5-1000MG	69
VENTAVIS	47	XIGDUO XR TAB 5-500MG	69
<i>verapamil hcl</i>	44	XOLAIR.....	102

XTANDI.....	30	ZERIT.....	19
<i>xulane</i>	73	<i>zidovudine</i>	19
XULTOPHY INJ 100/3.6	67	<i>zileuton</i>	102
Y		ZIOPTAN.....	98
<i>yuvaferm</i>	75	<i>ziprasidone hcl</i>	57
Z		ZIRGAN	97
<i>zafirlukast</i>	102	ZMAX	23
<i>zaleplon</i>	60	<i>zoledronic acid</i>	70
<i>zarah</i>	73	ZOLINZA.....	29
ZEJULA	29	<i>zolmitriptan</i>	61
ZELBORAF	32	<i>zolpidem tartrate</i>	60
<i>zenchent</i>	73	<i>zonisamide</i>	50
ZENPEP CAP 10000UNT	82	ZOSTAVAX	91
ZENPEP CAP 15000UNT	82	<i>zovia 1/35e</i>	73
ZENPEP CAP 20000UNT	82	ZUBSOLV SUB 0.7-0.18	3
ZENPEP CAP 25000.....	82	ZUBSOLV SUB 1.4-0.36	3
ZENPEP CAP 3000UNIT.....	82	ZUBSOLV SUB 11.4-2.9	3
ZENPEP CAP 40000.....	82	ZUBSOLV SUB 2.9-0.71	3
ZENPEP CAP 5000UNIT.....	82	ZUBSOLV SUB 5.7-1.4.....	3
<i>zenzedi</i>	59	ZUBSOLV SUB 8.6-2.1	3
ZEPATIER TAB 50-100MG	24	ZYDELIG.....	33
ZEPOSIA	99	ZYKADIA.....	33
ZEPOSIA 7DAY CAP STR PACK.....	99	ZYPREXA RELPREVV	34, 35
ZEPOSIA CAP STR KIT.....	99		