

Plan for your best health

Aetna Standard Plan

Visit **www.aetna.com/formulary** for the most up-to-date information. For a summary of your coverage or benefits plan log in to your secure member site. Or call the toll-free number on your member ID card.

The formulary is updated the first week of each month. The formulary is subject to change. Previous versions are no longer in effect.

Health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Health Assurance Pennsylvania Inc., Aetna Health Insurance company and/or Aetna Life Insurance Company (Aetna). In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Utah and Wyoming by Aetna Health of Utah Inc. and Aetna Life Insurance Company. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Each insurer has sole financial responsibility for its own products. Pharmacy benefits are administered by an affiliated pharmacy benefit manager, CVS Caremark. Aetna is part of the CVS Health family of companies.

2026 Pharmacy Drug Guide

Aetna Standard Plan

Table of Contents

INFORMATIONAL SECTION.....	4
ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION.....	13
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS.....	21
ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER.....	33
CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS.....	42
CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS.....	56
ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES.....	84
GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS.....	157
GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS.....	165
HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS.....	168
IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM.....	175
MEDICAL DEVICES.....	187
NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS.....	187
OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS.....	196
OTHER.....	202
RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS.....	203
TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS.....	211

How to use this guide

Your guide includes a list of commonly used drugs covered on your pharmacy plan. The amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percentage of the prescription's price after you meet your deductible, if applicable. Preferred generic drugs cost less. Preferred brand drugs will have a higher cost.

Your plan includes

- Brand and generic drugs that are hand-picked for their quality and effectiveness
- A specialty pharmacy that fills specialty prescriptions (ones that are injected, infused or taken by mouth) — and provides services that include personal support, helpful resources and training, and free secure home delivery
- A home delivery pharmacy that delivers maintenance drugs to your home or wherever you choose (for drugs that are taken regularly to treat conditions like diabetes or asthma)

What you can expect to pay

With your pharmacy plan, the amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percentage of the drug's/medicine's price.

Each drug is grouped as a generic, a brand or a specialty drug. The preferred drugs within these groups will generally save you money compared to a non-preferred drug. Typically, generic drugs are less expensive than brands.

Specialty prescription drugs typically include higher-cost drugs that require special handling, special storage or monitoring. These types of drugs may include, but are not limited to, drugs that are injected, infused, inhaled or taken by mouth.

You're covered for all types of medicine — some more expensive, and some less.

- **Generic:** the lowest cost
- **Preferred brand:** a slightly higher cost
- **Non-preferred brand:** a higher cost
- **Preferred Specialty:** lower cost for specialty drugs
- **Non-preferred Specialty:** higher cost for non-preferred specialty drugs

Your pharmacy plan may not have all the coverage levels listed above so check your plan documents to see how much you will pay.

For your exact coverage and cost, and to learn more about your plan

Visit the website that's on your member ID card. Then log in to your account, where you can:

- Find out the coverage* and estimate of cost for specific drugs
- View your deductibles and plan limits
- Order medications
- Check your pharmacy order status
- Get a member ID card
- View your claims, Explanation of Benefits and more.

* Check your plan documents for coverage information. Your plan may not cover certain drugs such as infertility, erectile dysfunction, and weight loss.

Have more questions about your pharmacy benefits?

We're here to help. There are several ways you can learn more about your benefits:

- Check your Plan Design and Benefits Summary in your enrollment kit.
- Call the toll-free number on your member ID card.
- Review our pharmacy frequently asked questions (FAQs) and answers. Just visit the website that's on your member ID card to search for the "Pharmacy FAQ."

Specialty Pharmacy Network

An in-network specialty pharmacy can fill your prescriptions for specialty drugs. These are the types of drugs that may be injected, infused or taken by mouth. They often need special storage and handling. And they need to be delivered quickly. A nurse or pharmacist may monitor you during your treatment, if needed. With this type of pharmacy, you can get this medicine sent right to your home.

How to get started with a specialty pharmacy

Ordering your prescriptions through our specialty pharmacy is easy. And we typically offer a 30-day medicine supply.

- **To transfer your prescription**, just call us toll-free at [1-866-353-1892](tel:1-866-353-1892) (TTY: [711](tel:1-866-353-1892)).
- **For a new prescription**, your doctor can send it to us in one of four ways:
 - 1. Electronically:** Through e-prescribe
 - 2. Fax:** [1-800-323-2445](tel:1-800-323-2445)
 - 3. Phone:** [1-800-237-2767](tel:1-800-237-2767) (TTY: [711](tel:1-800-237-2767))

If you mail in your own prescription, please send it with a completed Patient Profile Form. To find this form, just visit the website that's on your member ID card, to search for the "Patient Profile Form."

CVS Caremark Mail Service Pharmacy™

You can have maintenance drugs sent right to your home or anywhere else you choose by CVS Caremark Mail Service Pharmacy. These are drugs that are taken regularly for chronic conditions like diabetes or asthma. Depending on your plan, you can get up to a 90-day supply of medicine for less cost. It's fast and convenient, and standard shipping is always free.

Get started right away

You can submit your order using one of these options:

- 1. Online** — Visit your secure member website and sign in to your account. There you can add or remove your prescriptions.
- 2. Phone** — Call us toll-free, 24/7 at [1-888-792-3862](tel:1-888-792-3862) (TTY: [711](tel:1-888-792-3862)). If you need the help of a telephone device for the hard of hearing, call [1-877-833-2779](tel:1-877-833-2779) (TTY: [711](tel:1-877-833-2779)).
- 3. Mail** — Get a new prescription from your doctor. Then mail it to us with a completed order form. You can find the form on your secure member website. The mailing address is on the form.

Your doctor can submit your order using one of these options:

- 1. Online** — They can submit your prescriptions using the e-prescribe services on our provider website.
- 2. Fax** — They can fax your prescription to [1-877-270-3317](tel:1-877-270-3317). Make sure they include your member ID number, date of birth and mailing address on the fax cover sheet. Only a doctor may fax a prescription.

Frequently asked questions

How can I save on prescriptions?

Here are some tips to pay less out of pocket for your prescription drugs:

- Ask your doctor to consider prescribing drugs that are on the Pharmacy Drug Guide (formulary).
- Ask your doctor to consider prescribing generic drugs instead of brand-name drugs.
- Our home delivery pharmacy may save you money. For more information, visit the website on your member ID card and log in to your account.

What are generic drugs?

Generic drugs are proven to be just as safe and effective as brand-name drugs. They contain the same active ingredients in the same amounts as the brand-name drugs and work the same way. So they have the same risks and benefits as brand-name drugs. However, they typically cost less.

When appropriate, your doctor may decide to prescribe a generic drug or allow the pharmacist to substitute a generic drug.

What is precertification/prior authorization (PA)?

Precertification is one way that we can help you and your doctor find safe, appropriate drugs and keep costs down. Precertification means that you or your doctor need to get approval from the plan before certain drugs will be covered. Generally, precertification applies to drugs that:

- Are often taken in the wrong way
- Should only be used for certain conditions
- Often cost more than other drugs that are proven to be just as effective

Keep in mind that your doctor must contact us to request approval of coverage for these drugs.

What is step therapy (ST)?

Some drugs require step therapy. This means that you must try one or more prerequisite drug(s) before a step therapy drug is covered.

The prerequisite drugs have U.S. Food and Drug Administration (FDA) approval and may cost less. They treat the same condition as the step therapy drug.

If you don't try the appropriate prerequisite drug first, you may need to pay full cost for the step-therapy drug.

What are quantity limits (QL)?

Quantity limits help your doctor and pharmacist make sure that you use your drug correctly and safely. We use medical guidelines and FDA-approved recommendations from drug makers to set these coverage limits. The quantity limit program includes:

- **Dose efficiency edits** — Limits prescription coverage to one dose per day for drugs that have approval for once-daily dosing
- **Maximum daily dose** — If a prescription is lower than the minimum or higher than the maximum allowed dose, a message is sent to the pharmacy
- **Quantity limits over time** — Limits prescription coverage to a specific number of units over a specific amount of time

What if I need a drug that requires an exception to the precertification, step therapy or quantity limits requirements? Or what if I need a drug that's not covered under my plan?

In certain cases, you or your prescriber can request a medical exception to the precertification, step therapy or quantity limits requirements or for a drug that's not covered on your plan. You can ask for your request to be expedited. Expedited coverage decisions are made within 24 hours.

We'll then contact you or your prescriber with our decision. All medically necessary outpatient prescription drugs will be covered. If a medical exception is approved, you only need to pay the copay after the deductible. This amount is based on your pharmacy plan design.

How can your provider request a medical exception?

- Submit their request through our secure provider website on www.availity.com.
- Call the Aetna Pharmacy Precertification Unit: Non-Specialty **1-800-294-5979 (TTY: 711)** or Specialty **1-866-814-5506 (TTY: 711)**.
- Fax the completed request form to:
Non-Specialty **1-888-836-0730** or
Specialty **1-866-249-6155**.
- Mail the completed request form to:
Medical Exception to Pharmacy Prior Authorization Unit
1300 East Campbell Road
Richardson, TX 75081

Pharmacy and Therapeutics (P&T) committee

The services of an independent National Pharmacy and Therapeutics Committee (“P&T Committee”) are utilized to approve safe and clinically effective drug therapies. The P&T Committee is an external advisory body of clinical professionals from across the United States. The P&T Committee’s voting members include physicians, pharmacists, a pharmacoeconomist and a medical ethicist, all of whom have a broad background of clinical and academic expertise regarding prescription drugs. Voting members of the P&T Committee are not employees of CVS Caremark and must disclose any financial relationship or conflicts of interest with any pharmaceutical manufacturers.

Can the formulary change during the year?

The formulary can change throughout the year. Some reasons why it can change include:

- New drugs are approved.
- Existing drugs are removed from the market.
- Prescription drugs may become available over the counter (without a prescription). Over-the-counter drugs are not generally covered in a formulary.
- Brand-name drugs lose patent protection and generic versions become available. When this happens, the generic drug will be covered in place of the brand-name drug. The brand-name drug is likely to become non-formulary or covered at a higher cost. See the “What are generic drugs?” section above for more information.

Commercial 1557 Nondiscrimination Notice

Aetna complies with applicable Federal civil rights laws and does not discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

Aetna provides free aids/services to people with disabilities and to people who need language assistance.

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting:

Civil Rights Coordinator,

P.O. Box 14462, Lexington, KY 40512 (CA HMO customers: PO Box 24030 Fresno, CA 93779),

1-800-648-7817 (TTY: 711),

Fax: 859-425-3379 (CA HMO customers: 860-262-7705),

CRCordinator@aetna.com.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or at:

U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at **1-800-368-1019 (TTY: 711)**, **1-800-537-7697 (TDD) (TTY: 711)**.

TTY:711

English	To access language services at no cost to you, call the number on your ID card.
Albanian	Për shërbime përkthimi falas për ju, telefononi në numrin që gjendet në kartën tuaj të identitetit.
Amharic	የ ቋንቋ አገልግሎቶችን ያለክፍያ ለማግኘት፣ በመታወቂያዎት ላይ ያለውን ቁጥር ይደውሉ፡፡
Arabic	للحصول على الخدمات اللغوية دون أي تكلفة، الرجاء الاتصال على الرقم الموجود على بطاقة اشتراكك.
Armenian	Ձեր նախընտրած լեզվով ավստիպար խորհրդատվություն ստանալու համար գանգահարեք ձեր բժշկական ապահովագրության քարտի վրա նշված հեռախոսահամարով
Bantu-Kirundi	Kugira uronke serivisi z'indimi ata kiguzi, hamagara inomero iri ku karangamuntu kawe
Bengali	আপনাকে বিনামূল্যে ভাষা পরিষেবা পেতে হলে আপনার পরিচয়পত্রে দেওয়া নম্বরে টেলিফোন করুন।
Burmese	သင့်အနေဖြင့် အခကြေးငွေ မပေးရဲဘဲ ဘာသာစကားဝန်ဆောင်မှုများ ရရှိနိုင်ရန်၊ သင့် ID ကတ်ပေါ်တွင်ရှိသော ဖုန်းနံပါတ်အား ခေါ်ဆိုပါ။
Catalan	Per accedir a serveis lingüístics sense cap cost per a vostè, telefoni al número indicat a la seva targeta d'identificació.
Cebuano	Aron maakses ang mga serbisyo sa lengguwahe nga wala kay bayran, tawagi ang numero nga anaa sa imong kard sa ID.
Chamorro	Para un hago' i setbision lengguaåhi ni dibåtde para hægu, ågang i numiru gi iyo-mu kard aidentifikasion.
Cherokee	ᄆᄃᄇᄀ ᄅᄊᄃᄀᄇᄀ ᄇᄃᄃᄃᄃᄃ ᄃ ᄃᄃᄃᄀ ᄃᄃᄃᄃᄃᄃᄀ ᄃᄃ, ᄃᄃᄃᄃᄃᄃ ᄃᄃᄃ ᄃᄃᄃᄀ ᄃᄃᄃᄃᄃᄃ ᄃᄃᄃᄀ ᄃᄃᄃᄀ ᄃᄃᄃᄀ ᄃᄃᄃᄀ ᄃᄃᄃᄀ.
Chinese Traditional	如欲使用免費語言服務，請撥打您健康保險卡上所列的電話號碼
Choctaw	Anumpa tosholi i toksvli ya peh pilla ho ish i payahinla kvt chi holisso kallo iskitini holhtena takanli ma i payah
Chuukese	Ren omw kopwe angei anininisin eman chon awewei (ese kamé), kopwe kééri ewe nampa mei mak won noum ena katen ID
Cushitic-Oromo	Tajaajiiloota afaanii gatii bilisaa ati argaachuuf,lakkoofsa fuula waraaqaa eenyummaa (ID) kee irraa jiruun bilbili.
Dutch	Voor gratis taaldiensten, bel het nummer op uw ziekteverzekeringskaart.
French	Pour accéder gratuitement aux services linguistiques, veuillez composer le numéro indiqué sur votre carte d'assurance santé.
French Creole (Haitian)	Pou ou jwenn sèvis gratis nan lang ou, rele nimewo telefòn ki sou kat idantifikasyon asirans sante ou.
German	Um auf den für Sie kostenlosen Sprachservice auf Deutsch zuzugreifen, rufen Sie die Nummer auf Ihrer ID-Karte an.
Greek	Για πρόσβαση στις υπηρεσίες γλώσσας χωρίς χρέωση, καλέστε τον αριθμό στην κάρτα ασφάλισής σας.
Gujarati	તમારે કોઇ પણ જાતના ખર્ચ વિના ભાષા સેવાઓ મેળવવા માટે, તમારા આઈડી કાર્ડ પર રહેલ નંબર પર કોલ કરવો.

Hawaiian	No ka wala‘au ‘ana me ka lawelawe ‘ōlelo e kahea aku i ka helu kelepona ma kāu kāleka ID. Kāki ‘ole ‘ia kēia kōkua nei.
Hindi	बिना किसी कीमत के भाषा सेवाओं का उपयोग करने के लिए, अपने आईडी कार्ड पर दिए नंबर पर कॉल करें।
Hmong	Yuav kom tau kev pab txhais lus tsis muaj nqi them rau koj, hu tus naj npawb ntawm koj daim npav ID.
Igbo	Inweta enyemaka asụsụ na akwughi ụgwọ obula, kpọọ nọmba nọ na kaadi njirimara gi
Ilocano	Tapno maakses dagiti serbisio ti pagsasao nga awanan ti bayadna, awagan ti numero nga adda ayan ti ID kardmo.
Indonesian	Untuk mengakses layanan bahasa tanpa dikenakan biaya, silakan hubungi nomor telepon di kartu asuransi Anda.
Italian	Per accedere ai servizi linguistici senza alcun costo per lei, chiami il numero sulla tessera identificativa.
Japanese	無料の言語サービスは、IDカードにある番号にお電話ください。
Karen	လၢတၢ်ကမၤန့ၢ်ကိၣ်တၢ်မၤစၢအတၢ်ဖဲတၢ်မၤတဖၣ် လၢတအိၣ်ဒီးအပူၤလၢနကဘၣ်ဟ့ၣ်အီၤအဂီၢ်,ကိးဘၣ်လိတဝ်နီၣ်ဂံၢ်လၢအအိၣ်လၢနခိၣ်ဂီၢ် (ID) အလိၤန့ၣ်တက့ၢ်.
Korean	무료 다국어 서비스를 이용하려면 보험 ID 카드에 수록된 번호로 전화해 주십시오.
Kru-Bassa	I nyuu kosna mahola ni language services ngui nsaa wogui wo, sebel i nsinga i ye ntilga i kat yong matibla
Kurdish	بۆ دەستگیر ئەگەریتن بە خزمەتگوزاری زمان بەبێ تێچوون بۆ تۆ، پەیوەندی بکە بە ژمارەی سەر ئای دی (ID) کارتێ خۆت.
Lao	ເພື່ອເຂົ້າເຖິງບໍລິການພາສາທີ່ບໍ່ເສຍຄ່າ, ໃຫ້ໃບຫາເປີໂທຢູ່ໃນບັດປະຈຳຕົວຂອງທ່ານ.
Marathi	आपल्याला कोणत्याही शुल्काशिवाय भाषा सेवांपर्यंत पोहोचण्यासाठी, आपल्या ID कार्डावरील क्रमांकावर फोन करा.
Marshallese	Nan bōk jipañ kōn kajin ilo an ejjelōk wōṇean ñan kwe, kwōn kallok nōṃba eo ilo kaat in ID eo am.
Micronesia-Ponapean	Pwehn alehdi sawas en lokaia kan ni sohte pweipwei, koahlih nempe nan amhw doaropwe en ID.
Mon-Khmer, Cambodian	ដើម្បីទទួលបានសេវាកម្មភាសាដែលឥតគិតថ្លៃសម្រាប់លោកអ្នក សូមហៅទូរសព្ទទៅកាន់លេខដែលមាននៅលើប័ណ្ណសម្គាល់ខ្លួនរបស់លោកអ្នក។
Navajo	T'áá ni nizaad k'ehjí bee níká a'doowoł doo bááh ílínígóó naaltsoos bee atah nílíggo nanitinígíí bee néého'dółzinígíí béesh bee hane'í biká'ígíí áaji' hólne'.
Nepali	भाषासम्बन्धी सेवाहरूमाथि निःशुल्क पहुँच राख्न आफ्नो कार्डमा रहेको नम्बरमा कल गर्नुहोस्।
Nilotic-Dinka	Të koor yin ran de wëër de thokic ke cîn wëu kor keek tënɔŋ yin. Ke yin col ran ye koc kuony në namba de abac tɔ në ID kard duɔn de tīt de nyin de panakim kōu.
Norwegian	For tilgang til kostnadsfri språktjenester, ring nummeret på ID-kortet ditt.
Pennsylvanian-Dutch	Um Schprooch Services zu griege mitaus Koscht, ruff die Nummer uff dei ID Kaart.

[illegible]

Remember to visit the website on your member ID card. Then sign in to your account for the most up-to-date information.

Please note that if your prescription drug benefits plan changes, the information here may no longer apply.

Medications on the Aetna Drug Guide, precertification, step-therapy and quantity limits lists are subject to change.

Health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Health Assurance Pennsylvania Inc., Aetna Health Insurance company and/or Aetna Life Insurance Company (Aetna). In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Utah and Wyoming by Aetna Health of Utah Inc. and Aetna Life Insurance Company. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Pharmacy benefits are administered through an affiliated pharmacy benefit manager, CVS Caremark. Aetna is part of the CVS Health family of companies.

Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. To check coverage and copay information for a specific medicine, log into your member website. For questions, please call the toll-free number on the back of your member ID card.

The drugs on the Pharmacy Drug Guide (formulary), Formulary Exclusions, Precertification, and Quantity Limit Lists are subject to change. The quantity limits and step therapy drug coverage review programs are not available in all service areas. However, these programs are available to self-funded plans.

Information is subject to change. In accordance with state law or insurer policies, changes to drug coverage are not effective for commercial fully insured plans (including HMOs) in Louisiana, New York, Texas, and in most circumstances Connecticut and Vermont, until the plans' renewal date.

In accordance with state law, certain fully insured commercial California members (except Federal Employee Health Benefit Plan members) who obtained approval from an Aetna plan for coverage of drugs that are later added to the Preauthorization or Step Therapy Lists or removed from the Pharmacy Drug Guide will continue to have those drugs covered, for as long as the treating in-network provider continues prescribing them, provided that the drug is appropriately prescribed and is considered safe and effective for treating the enrollee's medical condition. Aetna reserves the right to periodically request clinical information from your provider to assess your medical condition and the appropriateness of your ongoing treatment. Failure to provide clinical information could result in subsequent denial of coverage for this medication.

In accordance with state law, fully insured Commercial Connecticut preferred provider organization (PPO) members (except Federal Employee Health Benefit Plan members) who are receiving coverage for drugs that are added to the Precertification or Step-Therapy Lists will continue to have those drugs covered for as long as the prescriber prescribes them, provided the drug is medically necessary and more medically beneficial than other covered drugs. Nothing in this section shall preclude the prescribing provider from prescribing another drug covered by the plan that is medically appropriate for the enrollee, nor shall anything in this section be construed to prohibit generic drug substitutions.

In accordance with state law, commercial fully insured (including HMO) members in Connecticut, Louisiana, New Mexico and Texas (except Federal Employee Health Benefit Plan members) who are receiving coverage for drugs that are added or removed from the Pharmacy Drug Guide and Specialty Drug List will continue to have those drugs covered at the same benefit level until their plan's renewal date. In Texas, preauthorization approval is known as "preservice utilization review." It is not "verification" as defined by Texas law. Preauthorization means a determination that healthcare services proposed to be provided to a patient are medically necessary and appropriate.

In certain states, including Arkansas, Colorado, Connecticut, Delaware, Georgia, Illinois, Louisiana, Maryland, Minnesota, North Dakota, Pennsylvania and Texas, step therapy programs do not apply to fully insured members utilizing prescription drugs for the treatment of stage-four advanced, metastatic cancer.

This document contains trademarks or registered trademarks of CVS Pharmacy, Inc. or one of its affiliates; it may also contain references to products that are trademarks or registered trademarks of entities not affiliated with CVS Health.

This material is for information only. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Information is subject to change. CVS Caremark Mail Service Pharmacy is part of the CVS Health family of companies.

Aetna Standard Plan

Drug Tier

CE = Copay Exception: Available to some members at no cost with a prescription from your provider when obtained at an in-network pharmacy. Certain limitations may apply.

G = Generics

NF = Non-formulary, not covered unless exception request granted

NPB = Non-Preferred Brands

NPSP = Non-Preferred Specialty

PB = Preferred Brands

PSP = Preferred Specialty

Drug Notes

N8 = Drug Specific Coverage

SPC = Select Plan Coverage: Only available for select plans. Refer to member plan documents for coverage.

lowercase italics = Generic drugs

UPPERCASE = Brand name drugs

Prescription Drug Name	Drug Tier	Drug Notes
ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION		
COX-2 INHIBITORS		
CELEBREX ORAL CAPSULE 100 MG, 200 MG, 400 MG, 50 MG (<i>celecoxib</i>)	NF	
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg</i>	G	
<i>celecoxib oral capsule 50 mg</i>	G	N8 (Listing does not include certain NDCs)
ELYXYB ORAL SOLUTION 120 MG/4.8ML (<i>celecoxib (migraine)</i>)	NF	
GOUT		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>colchicine oral capsule 0.6 mg</i>	G	
<i>colchicine oral tablet 0.6 mg</i>	G	
<i>colchicine-probenecid oral tablet 0.5-500 mg</i>	G	
<i>febuxostat oral tablet 40 mg, 80 mg</i>	G	
GLOPERBA ORAL SOLUTION 0.6 MG/5ML (<i>colchicine</i>)	NF	
KRYSTEXXA INTRAVENOUS SOLUTION 8 MG/ML (<i>pegloticase</i>)	NPSP	
MITIGARE ORAL CAPSULE 0.6 MG (<i>colchicine</i>)	NF	
<i>probenecid oral tablet 500 mg</i>	G	
ULORIC ORAL TABLET 40 MG, 80 MG (<i>febuxostat</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
MISCELLANEOUS		
PRIALT INTRATHECAL SOLUTION 100 MCG/ML, 500 MCG/20ML, 500 MCG/5ML (<i>ziconotide acetate</i>)	NPSP	
NON-OPIOID ANALGESICS		
ALLZITAL ORAL TABLET 25-325 MG (<i>butalbital-acetaminophen</i>)	NF	
<i>butalbital-apap-caffeine</i> (Bac (Butalbital-Acetamin-Caff) Oral Tablet 50-325-40 Mg)	G	
<i>butalbital-acetaminophen oral capsule 50-300 mg</i>	NF	
<i>butalbital-acetaminophen oral tablet 50-300 mg</i>	NF	
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	G	
<i>butalbital-apap-caffeine oral capsule 50-300-40 mg, 50-325-40 mg</i>	NF	
<i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	G	N8 (Listing does not include certain NDCs)
FIORICET ORAL CAPSULE 50-300-40 MG (<i>butalbital-apap-caffeine</i>)	NF	
TENCON ORAL TABLET 50-325 MG (<i>butalbital-acetaminophen</i>)	G	
NSAIDS		
CAMBIA ORAL PACKET 50 MG (<i>diclofenac potassium(migraine)</i>)	NF	
COXANTO ORAL CAPSULE 300 MG (<i>oxaprozin</i>)	NF	
<i>diclofenac epolamine external patch 1.3 %</i>	G	
<i>diclofenac potassium oral capsule 25 mg</i>	NF	
<i>diclofenac potassium oral tablet 25 mg</i>	NF	
<i>diclofenac potassium oral tablet 50 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>diclofenac potassium(migraine) oral packet 50 mg</i>	NF	
<i>diclofenac sodium er oral tablet extended release 24 hour 100 mg</i>	G	
<i>diclofenac sodium external solution 1.5 %</i>	G	
<i>diclofenac sodium external solution 2 %</i>	NF	
<i>diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg</i>	G	
<i>etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>etodolac oral capsule 300 mg</i>	G	
<i>etodolac oral tablet 400 mg, 500 mg</i>	G	
<i>fenoprofen calcium oral capsule 400 mg</i>	NF	
<i>flurbiprofen oral tablet 100 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>flurbiprofen oral tablet 50 mg</i>	G	
<i>ibuprofen (Ibu Oral Tablet 400 Mg, 600 Mg, 800 Mg)</i>	G	
<i>ibuprofen oral suspension 100 mg/5ml</i>	G	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	G	N8 (Listing does not include certain NDCs)
INDOCIN ORAL SUSPENSION 25 MG/5ML (<i>indomethacin</i>)	NF	
<i>indomethacin (Indocin Rectal Suppository 50 Mg)</i>	NF	
<i>indomethacin er oral capsule extended release 75 mg</i>	G	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	G	
<i>ketoprofen er oral capsule extended release 24 hour 200 mg</i>	NF	
<i>ketoprofen oral capsule 25 mg</i>	NF	
<i>ketorolac tromethamine oral tablet 10 mg</i>	G	N8 (Listing does not include certain NDCs)
LICART EXTERNAL PATCH 24 HOUR 1.3 % (<i>diclofenac epolamine</i>)	NF	
LODINE ORAL TABLET 400 MG (<i>etodolac</i>)	NF	
<i>diclofenac potassium (Lofena Oral Tablet 25 Mg)</i>	NF	
<i>meclofenamate sodium oral capsule 100 mg, 50 mg</i>	G	
<i>mefenamic acid oral capsule 250 mg</i>	NF	
<i>meloxicam oral capsule 10 mg, 5 mg</i>	NF	
<i>meloxicam oral tablet 15 mg, 7.5 mg</i>	G	
<i>nabumetone oral tablet 500 mg, 750 mg</i>	G	N8 (Listing does not include certain NDCs)
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG (<i>naproxen sodium</i>)	NF	
<i>naproxen oral suspension 125 mg/5ml</i>	NF	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	G	
<i>naproxen oral tablet delayed release 375 mg, 500 mg</i>	G	
<i>naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg, 750 mg</i>	NF	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	G	
<i>oxaprozin oral tablet 600 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
PENNSAID EXTERNAL SOLUTION 2 % (<i>diclofenac sodium</i>)	NF	
<i>piroxicam oral capsule 10 mg, 20 mg</i>	G	
SPRIX NASAL SOLUTION 15.75 MG/SPRAY (<i>ketorolac tromethamine</i>)	NF	
<i>sulindac oral tablet 150 mg, 200 mg</i>	G	
VOLTAREN EXTERNAL GEL 1 % (<i>diclofenac sodium</i>)	NPB	
ZIPSOR ORAL CAPSULE 25 MG (<i>diclofenac potassium</i>)	NPB	
NSAIDS, COMBINATIONS		
ARTHROTEC ORAL TABLET DELAYED RELEASE 50-0.2 MG, 75-0.2 MG (<i>diclofenac-misoprostol</i>)	NF	
COMBOGESIC ORAL TABLET 325-97.5 MG (<i>ibuprofen-acetaminophen</i>)	NF	
<i>diclofenac-misoprostol oral tablet delayed release 50-0.2 mg, 75-0.2 mg</i>	G	
<i>ibuprofen-famotidine oral tablet 800-26.6 mg</i>	G	
<i>naproxen-esomeprazole mg oral tablet delayed release 375-20 mg, 500-20 mg</i>	NF	
PREVIDOLRX ANALGESIC COMBINATION THERAPY PACK 75-20-0.025 MG-MG-% (<i>diclofenac-omeprazole-capsicum</i>)	NF	
VIMOVO ORAL TABLET DELAYED RELEASE 500-20 MG (<i>naproxen-esomeprazole</i>)	NPB	
OPIOID ANALGESICS		
<i>acetaminophen-codeine oral solution 120-12 mg/5ml, 300-30 mg/12.5ml</i>	G	
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>	G	
<i>apap-caff-dihydrocodeine oral capsule 320.5-30-16 mg</i>	G	
<i>butalbital-asa-caff-codeine</i> (Ascomp-Codeine Oral Capsule 50-325-40-30 Mg)	G	
<i>butalbital-apap-caff-cod oral capsule 50-300-40-30 mg, 50-325-40-30 mg</i>	G	
<i>butalbital-asa-caff-codeine oral capsule 50-325-40-30 mg</i>	G	
<i>butorphanol tartrate nasal solution 10 mg/ml</i>	G	
<i>codeine sulfate oral tablet 60 mg</i>	NPB	
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG (<i>tramadol hcl</i>)	NPB	
DILAUDID INJECTION SOLUTION 2 MG/ML (<i>hydromorphone hcl</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
DILAUDID ORAL LIQUID 1 MG/ML (<i>hydromorphone hcl</i>)	NPB	
DILAUDID ORAL TABLET 2 MG, 4 MG, 8 MG (<i>hydromorphone hcl</i>)	NPB	
DSUVIA SUBLINGUAL TABLET SUBLINGUAL 30 MCG (<i>sufentanil citrate</i>)	NPB	
<i>oxycodone-acetaminophen</i> (Endocet Oral Tablet 10-325 Mg, 2.5-325 Mg, 5-325 Mg, 7.5-325 Mg)	G	
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr</i>	G	
<i>hydrocodone-acetaminophen oral solution 5-217 mg/10ml</i>	G	
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	G	
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	G	
<i>hydromorphone hcl er oral tablet extended release 24 hour 12 mg, 16 mg, 32 mg, 8 mg</i>	G	
<i>hydromorphone hcl oral liquid 1 mg/ml</i>	G	
<i>hydromorphone hcl oral tablet 2 mg, 4 mg, 8 mg</i>	G	
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 100 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG (<i>hydrocodone bitartrate</i>)	NF	
<i>levorphanol tartrate oral tablet 2 mg, 3 mg</i>	NF	
<i>meperidine hcl oral solution 50 mg/5ml</i>	G	
<i>meperidine hcl oral tablet 50 mg</i>	G	
<i>methadone hcl injection solution 10 mg/ml</i>	NPB	N8 (Listing does not include certain NDCs)
<i>methadone hcl</i> (Methadone Hcl Intensol Oral Concentrate 10 Mg/ML)	G	
<i>methadone hcl oral concentrate 10 mg/ml</i>	G	
<i>methadone hcl oral solution 10 mg/5ml, 5 mg/5ml</i>	G	
<i>methadone hcl oral tablet 10 mg, 5 mg</i>	G	
<i>methadone hcl oral tablet soluble 40 mg</i>	G	
<i>methadone hcl-sodium chloride intravenous solution prefilled syringe 1-0.9 mg/ml-%</i>	NPB	
METHADOSE ORAL CONCENTRATE 10 MG/ML (<i>methadone hcl</i>)	NPB	
<i>methadone hcl</i> (Methadose Oral Tablet Soluble 40 Mg)	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
METHADOSE SUGAR-FREE ORAL CONCENTRATE 10 MG/ML (<i>methadone hcl</i>)	NPB	
<i>morphine sulfate (concentrate) oral solution 20 mg/ml</i>	G	
<i>morphine sulfate er beads oral capsule extended release 24 hour 120 mg, 30 mg, 45 mg, 60 mg, 75 mg, 90 mg</i>	G	
<i>morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	G	
<i>morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	G	
<i>morphine sulfate oral solution 10 mg/5ml</i>	G	
<i>morphine sulfate oral tablet 15 mg, 30 mg</i>	G	
MS CONTIN ORAL TABLET EXTENDED RELEASE 15 MG, 30 MG, 60 MG (<i>morphine sulfate</i>)	NPB	
<i>nalocet oral tablet 2.5-300 mg</i>	NF	
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG (<i>tapentadol hcl</i>)	NF	
NUCYNTA ORAL TABLET 100 MG, 50 MG, 75 MG (<i>tapentadol hcl</i>)	NF	
<i>oxycodone hcl oral capsule 5 mg</i>	G	
<i>oxycodone hcl oral concentrate 100 mg/5ml</i>	G	
<i>oxycodone hcl oral solution 5 mg/5ml</i>	G	
<i>oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	G	
<i>oxycodone hcl oral tablet abuse-deterrent 15 mg</i>	G	
<i>oxycodone-acetaminophen oral solution 10-300 mg/5ml, 5-325 mg/5ml</i>	NF	
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 2.5-300 mg, 5-300 mg, 7.5-300 mg</i>	NF	
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	G	
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG (<i>oxycodone hcl</i>)	NF	
<i>oxymorphone hcl er oral tablet extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg</i>	NF	
<i>oxymorphone hcl oral tablet 10 mg, 5 mg</i>	G	
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG (<i>oxycodone-acetaminophen</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
PROLATE ORAL SOLUTION 10-300 MG/5ML (<i>oxycodone-acetaminophen</i>)	NF	
PROLATE ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG (<i>oxycodone-acetaminophen</i>)	NF	
ROXICODONE ORAL TABLET 15 MG, 30 MG (<i>oxycodone hcl</i>)	NPB	
ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG, 30 MG, 5 MG (<i>oxycodone hcl</i>)	NF	
<i>tramadol hcl (er biphasic) oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg</i>	NF	
<i>tramadol hcl (er biphasic) oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg</i>	G	
<i>tramadol hcl er oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg</i>	G	
<i>tramadol hcl oral solution 5 mg/ml</i>	NF	
<i>tramadol hcl oral tablet 100 mg</i>	NF	
<i>tramadol hcl oral tablet 50 mg, 75 mg</i>	G	
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	G	
TREZIX ORAL CAPSULE 320.5-30-16 MG (<i>apap-caff-dihydrocodeine</i>)	G	
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG (<i>oxycodone</i>)	NF	
OPIOID PARTIAL AGONISTS		
BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG (<i>buprenorphine hcl</i>)	PB	
<i>buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr</i>	G	
BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 20 MCG/HR, 5 MCG/HR, 7.5 MCG/HR (<i>buprenorphine</i>)	NF	
<i>pentazocine-naloxone hcl oral tablet 50-0.5 mg</i>	G	
SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.5ML, 300 MG/1.5ML (<i>buprenorphine</i>)	NPB	
SALICYLATES		
<i>aspirin adult low dose oral tablet delayed release 81 mg</i>	CE	
<i>aspirin adult low strength oral tablet delayed release 81 mg</i>	CE	
<i>aspirin ec adult low dose oral tablet delayed release 81 mg</i>	CE	
<i>aspirin ec low strength oral tablet delayed release 81 mg</i>	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>aspirin low dose oral tablet chewable 81 mg</i>	CE	
<i>aspirin low dose oral tablet delayed release 81 mg</i>	CE	
<i>aspirin oral tablet chewable 81 mg</i>	CE	
<i>aspirin oral tablet delayed release 81 mg</i>	CE	
<i>aspirin regimen oral tablet delayed release 81 mg</i>	CE	
BAYER ASPIRIN EC LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG (<i>aspirin</i>)	CE	
BAYER LOW DOSE ORAL TABLET CHEWABLE 81 MG (<i>aspirin</i>)	CE	
BAYER LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG (<i>aspirin</i>)	CE	
<i>childrens aspirin oral tablet chewable 81 mg</i>	CE	
<i>cvs aspirin low dose oral tablet delayed release 81 mg</i>	CE	
<i>cvs aspirin low strength oral tablet delayed release 81 mg</i>	CE	
<i>diflunisal oral tablet 500 mg</i>	G	N8 (Listing does not include certain NDCs)
ECOTRIN LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG (<i>aspirin</i>)	CE	
<i>eq aspirin low dose oral tablet chewable 81 mg</i>	CE	
<i>eql aspirin low dose oral tablet chewable 81 mg</i>	CE	
<i>ft aspirin low dose oral tablet delayed release 81 mg</i>	CE	
<i>ft aspirin oral tablet chewable 81 mg</i>	CE	
<i>gnp adult aspirin low strength oral tablet chewable 81 mg</i>	CE	
<i>gnp aspirin oral tablet delayed release 81 mg</i>	CE	
<i>goodsense aspirin low dose oral tablet delayed release 81 mg</i>	CE	
<i>h-e-b aspirin oral tablet delayed release 81 mg</i>	CE	
<i>kls aspirin low dose oral tablet delayed release 81 mg</i>	CE	
<i>kp aspirin oral tablet delayed release 81 mg</i>	CE	
<i>mm aspirin oral tablet delayed release 81 mg</i>	CE	
<i>qc aspirin low dose oral tablet chewable 81 mg</i>	CE	
<i>qc childrens aspirin oral tablet chewable 81 mg</i>	CE	
<i>sb childrens aspirin oral tablet chewable 81 mg</i>	CE	
ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE 81 MG (<i>aspirin</i>)	CE	
ST JOSEPH LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG (<i>aspirin</i>)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
VISCOSUPPLEMENTS		
DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE 60 MG/3ML (<i>sodium hyaluronate (viscosup)</i>)	PSP	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	PSP	
GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE 30 MG/3ML (<i>cross-link hyal acid (visc)</i>)	NF	
GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16.8 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	PSP	
GENVISC 850 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML (<i>sodium hyaluronate (viscosup)</i>)	NF	
HYALGAN INTRA-ARTICULAR SOLUTION 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	NF	
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	NF	
HYMOVIS INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 24 MG/3ML (<i>hyaluronan</i>)	NF	
MONOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 88 MG/4ML (<i>hyaluronan</i>)	NF	
ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 30 MG/2ML (<i>hyaluronan</i>)	PSP	
SUPARTZ FX INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML (<i>sodium hyaluronate (viscosup)</i>)	NF	
SYNOJOYNT INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	NF	
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16 MG/2ML (<i>hylan g-f 20</i>)	NF	
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 48 MG/6ML (<i>hylan g-f 20</i>)	NF	
TRILURON INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	NF	
TRIVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML (<i>sodium hyaluronate (viscosup)</i>)	NF	
VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML (<i>sodium hyaluronate (viscosup)</i>)	NF	
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS		
ANTHELMINTICS - DRUGS FOR WORM INFECTION		
<i>albendazole oral tablet 200 mg</i>	G	
<i>benznidazole oral tablet 100 mg, 12.5 mg</i>	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
EMVERM ORAL TABLET CHEWABLE 100 MG (mebendazole)	PB	
ivermectin oral tablet 3 mg	G	
praziquantel oral tablet 600 mg	G	
ANTI-BACTERIALS - MISCELLANEOUS		
ARIKAYCE INHALATION SUSPENSION 590 MG/8.4ML (amikacin sulfate liposome)	NPSP	
HUMATIN ORAL CAPSULE 250 MG (paromomycin sulfate)	NF	
neomycin sulfate oral tablet 500 mg	G	N8 (Listing does not include certain NDCs)
sulfadiazine oral tablet 500 mg	NPB	
tinidazole oral tablet 250 mg, 500 mg	G	
ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS		
BREXAFEMME ORAL TABLET 150 MG (ibrexafungerp citrate)	NPB	
CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG (isavuconazonium sulfate)	NF	
fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml	G	
fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg	G	
flucytosine oral capsule 250 mg	G	
flucytosine oral capsule 500 mg	NF	
griseofulvin microsize oral suspension 125 mg/5ml	G	
griseofulvin microsize oral tablet 500 mg	G	
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	G	
itraconazole oral capsule 100 mg	G	
itraconazole oral solution 10 mg/ml	G	
ketoconazole oral tablet 200 mg	G	
NOXAFIL INTRAVENOUS SOLUTION 300 MG/16.7ML (posaconazole)	NF	
NOXAFIL ORAL PACKET 300 MG (posaconazole)	NF	
NOXAFIL ORAL SUSPENSION 40 MG/ML (posaconazole)	NF	
nystatin oral tablet 500000 unit	G	N8 (Listing does not include certain NDCs)
posaconazole oral suspension 40 mg/ml	G	
posaconazole oral tablet delayed release 100 mg	NF	
terbinafine hcl oral tablet 250 mg	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>tolsura oral capsule 65 mg</i>	NF	
VFEND ORAL SUSPENSION RECONSTITUTED 40 MG/ML (<i>voriconazole</i>)	NPB	
VIVJOA ORAL CAPSULE THERAPY PACK 150 MG (<i>oteseconazole</i>)	NPSP	
<i>voriconazole oral suspension reconstituted 40 mg/ml</i>	G	
<i>voriconazole oral tablet 200 mg, 50 mg</i>	G	
ANTIMALARIALS - DRUGS TO TREAT MALARIA		
ARAKODA ORAL TABLET 100 MG (<i>tafenoquine succinate</i>)	NF	
<i>atovaquone-proguanil hcl oral tablet 250-100 mg, 62.5-25 mg</i>	G	
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	G	
COARTEM ORAL TABLET 20-120 MG (<i>artemether-lumefantrine</i>)	NPB	
<i>hydroxychloroquine sulfate oral tablet 100 mg, 300 mg, 400 mg</i>	NF	
KRINTAFEL ORAL TABLET 150 MG (<i>tafenoquine succinate</i>)	NF	
MALARONE ORAL TABLET 250-100 MG, 62.5-25 MG (<i>atovaquone-proguanil hcl</i>)	NPB	
<i>mefloquine hcl oral tablet 250 mg</i>	G	
<i>primaquine phosphate oral tablet 26.3 (15 base) mg</i>	NPB	
<i>quinine sulfate oral capsule 324 mg</i>	G	
SOVUNA ORAL TABLET 300 MG (<i>hydroxychloroquine sulfate</i>)	NF	
ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION		
<i>abacavir sulfate oral solution 20 mg/ml</i>	G	
<i>abacavir sulfate oral tablet 300 mg</i>	G	
APTIVUS ORAL CAPSULE 250 MG (<i>tipranavir</i>)	NF	
<i>atazanavir sulfate oral capsule 150 mg, 200 mg, 300 mg</i>	G	
EDURANT ORAL TABLET 25 MG (<i>rilpivirine hcl</i>)	NF	
<i>efavirenz oral tablet 600 mg</i>	G	
EMTRIVA ORAL CAPSULE 200 MG (<i>emtricitabine</i>)	NPSP	
EMTRIVA ORAL SOLUTION 10 MG/ML (<i>emtricitabine</i>)	NPSP	
<i>fosamprenavir calcium oral tablet 700 mg</i>	G	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG (<i>enfuvirtide</i>)	NPSP	
INTELENCE ORAL TABLET 100 MG, 200 MG, 25 MG (<i>etravirine</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
ISENTRESS HD ORAL TABLET 600 MG (<i>raltegravir potassium</i>)	PSP	
ISENTRESS ORAL PACKET 100 MG (<i>raltegravir potassium</i>)	PSP	
ISENTRESS ORAL TABLET 400 MG (<i>raltegravir potassium</i>)	PSP	
ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG (<i>raltegravir potassium</i>)	PSP	
<i>lamivudine oral solution 10 mg/ml</i>	G	
<i>lamivudine oral tablet 150 mg, 300 mg</i>	G	
<i>nevirapine er oral tablet extended release 24 hour 400 mg</i>	G	
<i>nevirapine oral suspension 50 mg/5ml</i>	G	
<i>nevirapine oral tablet 200 mg</i>	G	
NORVIR ORAL PACKET 100 MG (<i>ritonavir</i>)	NF	
NORVIR ORAL TABLET 100 MG (<i>ritonavir</i>)	NF	
PIFELTRO ORAL TABLET 100 MG (<i>doravirine</i>)	NF	
PREZISTA ORAL SUSPENSION 100 MG/ML (<i>darunavir</i>)	NF	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG (<i>darunavir</i>)	NF	
REYATAZ ORAL CAPSULE 200 MG, 300 MG (<i>atazanavir sulfate</i>)	NF	
REYATAZ ORAL PACKET 50 MG (<i>atazanavir sulfate</i>)	NF	
<i>ritonavir oral tablet 100 mg</i>	G	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR 600 MG (<i>fostemsavir tromethamine</i>)	NPSP	
SELZENTRY ORAL SOLUTION 20 MG/ML (<i>maraviroc</i>)	NF	
SELZENTRY ORAL TABLET 150 MG, 300 MG (<i>maraviroc</i>)	NF	
SUNLENCA ORAL TABLET 300 MG (<i>lenacapavir sodium</i>)	NF	
SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG, 5 X 300 MG (<i>lenacapavir sodium</i>)	NF	
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	G	
TIVICAY ORAL TABLET 50 MG (<i>dolutegravir sodium</i>)	PSP	
TIVICAY PD ORAL TABLET SOLUBLE 5 MG (<i>dolutegravir sodium</i>)	PSP	
TYBOST ORAL TABLET 150 MG (<i>cobicistat</i>)	NPSP	
VIRACEPT ORAL TABLET 250 MG, 625 MG (<i>nelfinavir mesylate</i>)	NF	
VIREAD ORAL POWDER 40 MG/GM (<i>tenofovir disoproxil fumarate</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG, 300 MG (tenofovir disoproxil fumarate)	NPSP	
YEZTUGO ORAL TABLET 300 MG (lenacapavir sodium)	NF	
zidovudine oral capsule 100 mg	G	
zidovudine oral syrup 50 mg/5ml	G	
zidovudine oral tablet 300 mg	G	
ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION		
abacavir sulfate-lamivudine oral tablet 600-300 mg	G	
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG (bictegravir-emtricitab-tenofovir)	PSP	
CIMDUO ORAL TABLET 300-300 MG (lamivudine-tenofovir)	PSP	
COMPLERA ORAL TABLET 200-25-300 MG (emtricitab-rilpivir-tenofovir)	NF	
DELSTRIGO ORAL TABLET 100-300-300 MG (doravirin-lamivudin-tenofovir df)	NF	
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG (emtricitabine-tenofovir af)	PSP	
DOVATO ORAL TABLET 50-300 MG (dolutegravir-lamivudine)	PSP	
emtricitabine-tenofovir df oral tablet 200-300 mg	CE	
EVOTAZ ORAL TABLET 300-150 MG (atazanavir-cobicistat)	NPSP	
GENVOYA ORAL TABLET 150-150-200-10 MG (elviteg-cobic-emtricit-tenofaf)	PSP	
JULUCA ORAL TABLET 50-25 MG (dolutegravir-rilpivirine)	NPSP	
KALETRA ORAL SOLUTION 400-100 MG/5ML (lopinavir-ritonavir)	NPSP	
KALETRA ORAL TABLET 100-25 MG, 200-50 MG (lopinavir-ritonavir)	NF	
lamivudine-zidovudine oral tablet 150-300 mg	G	
ODEFSEY ORAL TABLET 200-25-25 MG (emtricitab-rilpivir-tenofovir af)	PSP	
PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG (darunavir-cobicistat)	NPSP	
STRIBILD ORAL TABLET 150-150-200-300 MG (elviteg-cobic-emtricit-tenofdf)	NF	
SYMFI ORAL TABLET 600-300-300 MG (efavirenz-lamivudine-tenofovir)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
SYMTUZA ORAL TABLET 800-150-200-10 MG (<i>darun-cobic-emtricit-tenofaf</i>)	PSP	
TRIUMEQ ORAL TABLET 600-50-300 MG (<i>abacavir-dolutegravir-lamivud</i>)	PSP	
<i>trimeq pd oral tablet soluble 60-5-30 mg</i>	PSP	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG (<i>emtricitabine-tenofovir df</i>)	NF	
ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS		
<i>cycloserine oral capsule 250 mg</i>	G	
<i>ethambutol hcl oral tablet 100 mg, 400 mg</i>	G	
<i>isoniazid oral syrup 50 mg/5ml</i>	G	
<i>isoniazid oral tablet 100 mg</i>	G	
<i>isoniazid oral tablet 300 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>pretomanid oral tablet 200 mg</i>	NPB	
PRIFTIN ORAL TABLET 150 MG (<i>rifapentine</i>)	NPB	
<i>pyrazinamide oral tablet 500 mg</i>	G	
<i>rifabutin oral capsule 150 mg</i>	G	
<i>rifampin oral capsule 150 mg, 300 mg</i>	G	N8 (Listing does not include certain NDCs)
RIFAMPIN+SYRSPEND SF ORAL SUSPENSION 25 MG/ML (<i>rifampin</i>)	NF	
SIRTURO ORAL TABLET 20 MG (<i>bedaquiline fumarate</i>)	NPB	
ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS		
<i>acyclovir oral capsule 200 mg</i>	G	
<i>acyclovir oral suspension 200 mg/5ml</i>	G	
<i>acyclovir oral tablet 400 mg, 800 mg</i>	G	
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	G	
LIVTENCITY ORAL TABLET 200 MG (<i>maribavir</i>)	NPSP	
<i>oseltamivir phosphate oral capsule 30 mg, 45 mg, 75 mg</i>	G	
<i>oseltamivir phosphate oral suspension reconstituted 6 mg/ml</i>	G	
PAXLOVID (150/100) ORAL TABLET THERAPY PACK 10 X 150 MG & 10 X 100MG (<i>nirmatrelvir-ritonavir</i>)	PB	
PAXLOVID (300/100 & 150/100) ORAL TABLET THERAPY PACK 6 X 150 MG & 5 X 100MG (<i>nirmatrelvir-ritonavir</i>)	PB	
PAXLOVID (300/100) ORAL TABLET THERAPY PACK 20 X 150 MG & 10 X 100MG (<i>nirmatrelvir-ritonavir</i>)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
PREVYMIS ORAL PACKET 120 MG, 20 MG (<i>letermovir</i>)	NPB	
PREVYMIS ORAL TABLET 240 MG, 480 MG (<i>letermovir</i>)	NPB	
RAPIVAB INTRAVENOUS SOLUTION 200 MG/20ML (<i>peramivir</i>)	NPB	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT (<i>zanamivir</i>)	PB	
<i>rimantadine hcl oral tablet 100 mg</i>	G	
SITAVIG BUCCAL TABLET 50 MG (<i>acyclovir</i>)	NPB	
TEMBEXA ORAL SUSPENSION 10 MG/ML (<i>brincidofovir</i>)	NPB	
TEMBEXA ORAL TABLET 100 MG (<i>brincidofovir</i>)	NPB	
TPOXX ORAL CAPSULE 200 MG (<i>tecovirimat</i>)	NPB	
<i>valacyclovir hcl oral tablet 1 gm, 500 mg</i>	G	
VALCYTE ORAL SOLUTION RECONSTITUTED 50 MG/ML (<i>valganciclovir hcl</i>)	NF	
VALCYTE ORAL TABLET 450 MG (<i>valganciclovir hcl</i>)	NF	
<i>valganciclovir hcl oral solution reconstituted 50 mg/ml</i>	G	
<i>valganciclovir hcl oral tablet 450 mg</i>	G	
VALTREX ORAL TABLET 1 GM, 500 MG (<i>valacyclovir hcl</i>)	NF	
XERESE EXTERNAL CREAM 5-1 % (<i>acyclovir-hydrocortisone</i>)	NF	
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG (<i>baloxavir marboxil</i>)	NF	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG (<i>baloxavir marboxil</i>)	NF	
CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS		
<i>cefaclor er oral tablet extended release 12 hour 500 mg</i>	NPB	
<i>cefaclor oral capsule 250 mg, 500 mg</i>	G	
<i>cefadroxil oral capsule 500 mg</i>	G	
<i>cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml</i>	G	
<i>cefadroxil oral tablet 1 gm</i>	G	
<i>cefdinir oral capsule 300 mg</i>	G	
<i>cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>cefixime oral capsule 400 mg</i>	G	
<i>cefixime oral suspension reconstituted 100 mg/5ml, 200 mg/5ml</i>	G	
<i>cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml</i>	G	
<i>cefpodoxime proxetil oral tablet 100 mg, 200 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	G	
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	G	
<i>cephalexin oral capsule 250 mg, 500 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>cephalexin oral capsule 750 mg</i>	G	
<i>cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>cephalexin oral tablet 250 mg, 500 mg</i>	G	
ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS		
<i>azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	G	
<i>clarithromycin er oral tablet extended release 24 hour 500 mg</i>	G	
<i>clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	G	
DIFICID ORAL SUSPENSION RECONSTITUTED 40 MG/ML (<i>fidaxomicin</i>)	PB	
DIFICID ORAL TABLET 200 MG (<i>fidaxomicin</i>)	PB	
E.E.S. 400 ORAL TABLET 400 MG (<i>erythromycin ethylsuccinate</i>)	G	
E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED 200 MG/5ML (<i>erythromycin ethylsuccinate</i>)	NF	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED 400 MG/5ML (<i>erythromycin ethylsuccinate</i>)	NF	
<i>erythromycin base (Ery-Tab Oral Tablet Delayed Release 250 Mg, 333 Mg, 500 Mg)</i>	G	
<i>erythromycin base oral capsule delayed release particles 250 mg</i>	G	
<i>erythromycin base oral tablet 250 mg, 500 mg</i>	G	
<i>erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml, 400 mg/5ml</i>	G	
<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	G	
<i>erythromycin oral tablet delayed release 250 mg, 333 mg, 500 mg</i>	G	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML, 200 MG/5ML (<i>azithromycin</i>)	NPB	
ZITHROMAX ORAL TABLET 250 MG, 500 MG (<i>azithromycin</i>)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
ZITHROMAX TRI-PAK ORAL TABLET 500 MG (<i>azithromycin</i>)	NPB	
ZITHROMAX Z-PAK ORAL TABLET 250 MG (<i>azithromycin</i>)	NPB	
FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS		
BAXDELA ORAL TABLET 450 MG (<i>delafloxacin meglumine</i>)	NPB	
CIPRO ORAL SUSPENSION RECONSTITUTED 250 MG/5ML (5%) (<i>ciprofloxacin</i>)	NPB	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg</i>	G	
<i>levofloxacin oral solution 25 mg/ml</i>	G	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	G	
<i>moxifloxacin hcl oral tablet 400 mg</i>	G	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	G	
HEPATITIS B		
<i>adefovir dipivoxil oral tablet 10 mg</i>	G	
BARACLUDE ORAL SOLUTION 0.05 MG/ML (<i>entecavir</i>)	NPSP	
BARACLUDE ORAL TABLET 0.5 MG, 1 MG (<i>entecavir</i>)	NF	
<i>entecavir oral tablet 0.5 mg, 1 mg</i>	G	
<i>lamivudine oral tablet 100 mg</i>	G	
VEMLIDY ORAL TABLET 25 MG (<i>tenofovir alafenamide fumarate</i>)	NF	
HEPATITIS C		
EPCLUSA ORAL PACKET 150-37.5 MG, 200-50 MG (<i>sofosbuvir-velpatasvir</i>)	PSP	
EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG (<i>sofosbuvir-velpatasvir</i>)	PSP	
HARVONI ORAL PACKET 33.75-150 MG, 45-200 MG (<i>ledipasvir-sofosbuvir</i>)	PSP	
HARVONI ORAL TABLET 45-200 MG, 90-400 MG (<i>ledipasvir-sofosbuvir</i>)	PSP	
<i>ledipasvir-sofosbuvir oral tablet 90-400 mg</i>	NF	
MAVYRET ORAL PACKET 50-20 MG (<i>glecaprevir-pibrentasvir</i>)	NF	
MAVYRET ORAL TABLET 100-40 MG (<i>glecaprevir-pibrentasvir</i>)	NF	
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML (<i>peginterferon alfa-2a</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 180 MCG/0.5ML (<i>peginterferon alfa-2a</i>)	NF	
<i>ribavirin oral capsule 200 mg</i>	G	
<i>ribavirin oral tablet 200 mg</i>	G	
<i>sofosbuvir-velpatasvir oral tablet 400-100 mg</i>	NF	
SOVALDI ORAL PACKET 150 MG, 200 MG (<i>sofosbuvir</i>)	NPSP	
SOVALDI ORAL TABLET 200 MG, 400 MG (<i>sofosbuvir</i>)	NPSP	
VOSEVI ORAL TABLET 400-100-100 MG (<i>sofosbuv-velpatasv-voxilaprev</i>)	PSP	
ZEPATIER ORAL TABLET 50-100 MG (<i>elbasvir-grazoprevir</i>)	NF	
MISCELLANEOUS		
<i>atovaquone oral suspension 750 mg/5ml</i>	G	
BACTRIM DS ORAL TABLET 800-160 MG (<i>sulfamethoxazole-trimethoprim</i>)	NPB	
BACTRIM ORAL TABLET 400-80 MG (<i>sulfamethoxazole-trimethoprim</i>)	NPB	
BLUJEPAL ORAL TABLET 750 MG (<i>gepotidacin mesylate</i>)	NPB	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG, 75 MG (<i>clindamycin hcl</i>)	NPB	
CLEOCIN ORAL SOLUTION RECONSTITUTED 75 MG/5ML (<i>clindamycin palmitate hcl</i>)	NPB	
<i>clindamycin hcl oral capsule 150 mg, 75 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>clindamycin hcl oral capsule 300 mg</i>	G	
<i>clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml</i>	G	
<i>dapsone oral tablet 100 mg, 25 mg</i>	G	
DARAPRIM ORAL TABLET 25 MG (<i>pyrimethamine</i>)	NF	
FIRST-METRONIDAZOLE ORAL SUSPENSION RECONSTITUTED 50 MG/ML (<i>metronidazole benzoate</i>)	NF	
FIRVANQ ORAL SOLUTION RECONSTITUTED 25 MG/ML, 50 MG/ML (<i>vancomycin hcl</i>)	NF	
LAMPIT ORAL TABLET 120 MG, 30 MG (<i>nifurtimox</i>)	NPB	
LIKMEZ ORAL SUSPENSION 500 MG/5ML (<i>metronidazole</i>)	NF	
<i>linezolid oral suspension reconstituted 100 mg/5ml</i>	G	
<i>linezolid oral tablet 600 mg</i>	G	N8 (Listing does not include certain NDCs)
MACROBID ORAL CAPSULE 100 MG (<i>nitrofurantoin monohyd macro</i>)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
MACRODANTIN ORAL CAPSULE 100 MG, 25 MG, 50 MG (nitrofurantoin macrocrystal)	NF	
<i>mb caps oral capsule 120 mg</i>	NF	
<i>methenamine hippurate oral tablet 1 gm</i>	G	
<i>methenamine mandelate oral tablet 0.5 gm, 1 gm</i>	G	
<i>metronidazole oral capsule 375 mg</i>	G	
<i>metronidazole oral tablet 250 mg, 500 mg</i>	G	N8 (Listing does not include certain NDCs)
NEBUPENT INHALATION SOLUTION RECONSTITUTED 300 MG (pentamidine isethionate)	NPB	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg</i>	G	
<i>nitrofurantoin monohyd macro oral capsule 100 mg</i>	G	
<i>nitrofurantoin oral suspension 25 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>nitrofurantoin oral suspension 50 mg/5ml</i>	NF	
ORLYNVAH ORAL TABLET 500-500 MG (sulopenem etzadrox-probenecid)	NPB	
<i>pyrimethamine oral tablet 25 mg</i>	G	
SIVEXTRO ORAL TABLET 200 MG (tedizolid phosphate)	NPB	
SOLOSEC ORAL PACKET 2 GM (secnidazole)	NF	
<i>sulfamethoxazole-trimethoprim oral suspension 800-160 mg/20ml</i>	G	
<i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>sulfamethoxazole-trimethoprim (Sulfatrim Pediatric Oral Suspension 200-40 Mg/5Ml)</i>	G	
<i>trimethoprim oral tablet 100 mg</i>	G	
<i>meth-hyo-m bl-na phos-ph sal (Urimar-T Oral Capsule 120 Mg)</i>	NF	
VANCOCIN ORAL CAPSULE 125 MG, 250 MG (vancomycin hcl)	NPB	
<i>vancomycin hcl intravenous solution 500 mg/100ml</i>	NPB	
<i>vancomycin hcl intravenous solution reconstituted 100 gm</i>	NPB	
<i>vancomycin hcl oral capsule 125 mg, 250 mg</i>	G	
<i>vancomycin hcl oral solution reconstituted 250 mg/5ml</i>	NF	
VANCOMYCIN+SYRSPEND SF ORAL SUSPENSION 50 MG/ML (vancomycin hcl)	NF	
XIFAXAN ORAL TABLET 200 MG (rifaximin)	NPB	
XIFAXAN ORAL TABLET 550 MG (rifaximin)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
PENICILLINS - DRUGS TO TREAT INFECTIONS		
<i>amoxicillin oral capsule 250 mg, 500 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>amoxicillin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>amoxicillin oral suspension reconstituted 200 mg/5ml, 400 mg/5ml</i>	G	
<i>amoxicillin oral tablet 500 mg, 875 mg</i>	G	
<i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>	G	
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour 1000-62.5 mg</i>	G	
<i>amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml</i>	G	
<i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg</i>	G	
<i>amoxicillin-pot clavulanate oral tablet 875-125 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>ampicillin oral capsule 500 mg</i>	G	
<i>ampicillin sodium intravenous solution reconstituted 10 gm</i>	G	N8 (Listing does not include certain NDCs)
<i>dicloxacillin sodium oral capsule 250 mg, 500 mg</i>	G	
<i>naftillin sodium intravenous solution reconstituted 10 gm</i>	G	
<i>penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	G	
<i>penicillin g potassium (Pfizerpen Injection Solution Reconstituted 20000000 Unit, 5000000 Unit)</i>	NF	
TETRACYCLINES - DRUGS TO TREAT INFECTIONS		
<i>avidoxy oral tablet 100 mg</i>	G	
<i>demeclocycline hcl oral tablet 150 mg, 300 mg</i>	G	
DORYX MPC ORAL TABLET DELAYED RELEASE 60 MG (doxycycline hyclate)	NF	
<i>doxycycline hyclate oral capsule 100 mg, 50 mg</i>	G	
<i>doxycycline hyclate oral tablet 100 mg</i>	G	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	NF	
<i>doxycycline hyclate oral tablet 20 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg, 80 mg</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	G	
<i>doxycycline monohydrate oral capsule 150 mg, 75 mg</i>	NF	
<i>doxycycline monohydrate oral suspension reconstituted 25 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>doxycycline monohydrate oral tablet 100 mg, 150 mg, 75 mg</i>	G	
<i>doxycycline monohydrate oral tablet 50 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>minocycline hcl er oral tablet extended release 24 hour 105 mg, 115 mg, 135 mg, 45 mg, 55 mg, 65 mg, 80 mg, 90 mg</i>	NF	
<i>minocycline hcl oral capsule 100 mg, 50 mg, 75 mg</i>	G	
<i>minocycline hcl oral tablet 100 mg, 50 mg, 75 mg</i>	G	
<i>doxycycline monohydrate (Mondoxyme NI Oral Capsule 100 Mg)</i>	G	
NUZYRA ORAL TABLET 150 MG (<i>omadacycline tosylate</i>)	NPB	
SEYSARA ORAL TABLET 100 MG, 150 MG, 60 MG (<i>sarecycline hcl</i>)	NF	
<i>doxycycline hyclate (Targadox Oral Tablet 50 Mg)</i>	NF	
<i>tetracycline hcl oral capsule 250 mg, 500 mg</i>	G	
ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER		
ALKYLATING AGENTS		
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	G	
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG (<i>lomustine</i>)	NPSP	
LEUKERAN ORAL TABLET 2 MG (<i>chlorambucil</i>)	NPB	
MATULANE ORAL CAPSULE 50 MG (<i>procarbazine hcl</i>)	NPSP	
MYLERAN ORAL TABLET 2 MG (<i>busulfan</i>)	NPB	
TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>temozolomide</i>)	NPSP	
<i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg</i>	G	
ANTIMETABOLITES		
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 500 MG (<i>pemetrexed disodium</i>)	NF	
<i>capecitabine oral tablet 150 mg, 500 mg</i>	G	
INQOVI ORAL TABLET 35-100 MG (<i>decitabine-cedazuridine</i>)	NPSP	
JYLAMVO ORAL SOLUTION 2 MG/ML (<i>methotrexate</i>)	NPB	
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG (<i>trifluridine-tipiracil</i>)	PSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>mercaptopurine oral tablet 50 mg</i>	G	
<i>methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml</i>	G	
<i>methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml</i>	G	
<i>methotrexate sodium injection solution reconstituted 1 gm</i>	G	
ONUREG ORAL TABLET 200 MG, 300 MG (<i>azacitidine</i>)	NPSP	
PURIXAN ORAL SUSPENSION 2000 MG/100ML (<i>mercaptopurine</i>)	NPSP	
TABLOID ORAL TABLET 40 MG (<i>thioguanine</i>)	NPB	
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG (<i>methotrexate sodium</i>)	NPB	
ANTINEOPLASTIC, BCL-2 INHIBITORS		
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG (<i>venetoclax</i>)	NPSP	
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG (<i>venetoclax</i>)	NPSP	
BIOLOGIC RESPONSE MODIFIERS		
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 500 MCG/ML (<i>ropeginterferon alfa-2b-njft</i>)	PSP	
DAURISMO ORAL TABLET 100 MG, 25 MG (<i>glasdegib maleate</i>)	NF	
ERIVEDGE ORAL CAPSULE 150 MG (<i>vismodegib</i>)	PSP	
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG (<i>pomalidomide</i>)	NPSP	
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG (<i>lenalidomide</i>)	NF	
THALOMID ORAL CAPSULE 100 MG, 50 MG (<i>thalidomide</i>)	PSP	
HORMONAL ANTINEOPLASTIC AGENTS		
<i>abiraterone acetate oral tablet 250 mg</i>	G	
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG (<i>niraparib-abiraterone acetate</i>)	NF	
<i>anastrozole oral tablet 1 mg</i>	CE	
ARIMIDEX ORAL TABLET 1 MG (<i>anastrozole</i>)	NPB	
AROMASIN ORAL TABLET 25 MG (<i>exemestane</i>)	NPB	
<i>bicalutamide oral tablet 50 mg</i>	G	
ELIGARD SUBCUTANEOUS KIT 22.5 MG (<i>leuprolide acetate (3 month)</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
ELIGARD SUBCUTANEOUS KIT 30 MG (<i>leuprolide acetate (4 month)</i>)	PSP	
ELIGARD SUBCUTANEOUS KIT 45 MG (<i>leuprolide acetate (6 month)</i>)	PSP	
ELIGARD SUBCUTANEOUS KIT 7.5 MG (<i>leuprolide acetate</i>)	PSP	
ERLEADA ORAL TABLET 240 MG, 60 MG (<i>apalutamide</i>)	PSP	
EULEXIN ORAL CAPSULE 125 MG (<i>flutamide</i>)	NF	
<i>exemestane oral tablet 25 mg</i>	CE	
FEMARA ORAL TABLET 2.5 MG (<i>letrozole</i>)	NPB	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG/VIAL (<i>degarelix acetate</i>)	NF	
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG (<i>degarelix acetate</i>)	NF	
<i>letrozole oral tablet 2.5 mg</i>	G	
<i>leuprolide acetate injection kit 1 mg/0.2ml</i>	G	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG, 7.5 MG (<i>leuprolide acetate</i>)	NF	
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG, 22.5 MG (<i>leuprolide acetate (3 month)</i>)	NF	
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30 MG (<i>leuprolide acetate (4 month)</i>)	NF	
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45 MG (<i>leuprolide acetate (6 month)</i>)	NF	
LYSODREN ORAL TABLET 500 MG (<i>mitotane</i>)	NPSP	
<i>megestrol acetate oral tablet 20 mg, 40 mg</i>	G	
<i>nilutamide oral tablet 150 mg</i>	G	
NUBEQA ORAL TABLET 300 MG (<i>darolutamide</i>)	PSP	
ORGOVYX ORAL TABLET 120 MG (<i>relugolix</i>)	NPSP	
ORSERDU ORAL TABLET 345 MG, 86 MG (<i>elacestrant hydrochloride</i>)	NF	
SOLTAMOX ORAL SOLUTION 10 MG/5ML (<i>tamoxifen citrate</i>)	NPB	
<i>tamoxifen citrate oral tablet 10 mg, 20 mg</i>	CE	
<i>toremifene citrate oral tablet 60 mg</i>	G	
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG, 22.5 MG, 3.75 MG (<i>triptorelin pamoate</i>)	NF	
XTANDI ORAL CAPSULE 40 MG (<i>enzalutamide</i>)	PSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
XTANDI ORAL TABLET 40 MG, 80 MG (<i>enzalutamide</i>)	PSP	
YONSA ORAL TABLET 125 MG (<i>abiraterone acetate micronized</i>)	PSP	
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG, 3.6 MG (<i>goserelin acetate</i>)	NF	
ZYTIGA ORAL TABLET 250 MG, 500 MG (<i>abiraterone acetate</i>)	NF	
KINASE INHIBITORS		
AFINITOR DISPERZ ORAL TABLET SOLUBLE 2 MG, 3 MG, 5 MG (<i>everolimus</i>)	NF	
AFINITOR ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG (<i>everolimus</i>)	NF	
ALECENSA ORAL CAPSULE 150 MG (<i>alectinib hcl</i>)	PSP	
ALUNBRIG ORAL TABLET 180 MG, 30 MG, 90 MG (<i>brigatinib</i>)	PSP	
ALUNBRIG ORAL TABLET THERAPY PACK 90 & 180 MG (<i>brigatinib</i>)	PSP	
AUGTYRO ORAL CAPSULE 160 MG, 40 MG (<i>repotrectinib</i>)	PSP	
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG (<i>avapritinib</i>)	NF	
BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG (<i>erdafitinib</i>)	NPSP	
BOSULIF ORAL CAPSULE 100 MG, 50 MG (<i>bosutinib</i>)	PSP	
BOSULIF ORAL TABLET 100 MG, 400 MG, 500 MG (<i>bosutinib</i>)	PSP	
BRAFTOVI ORAL CAPSULE 75 MG (<i>encorafenib</i>)	PSP	
BRUKINSA ORAL CAPSULE 80 MG (<i>zanubrutinib</i>)	PSP	
BRUKINSA ORAL TABLET 160 MG (<i>zanubrutinib</i>)	PSP	
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG (<i>cabozantinib s-malate</i>)	PSP	
CALQUENCE ORAL TABLET 100 MG (<i>acalabrutinib maleate</i>)	PSP	
CAPRELSA ORAL TABLET 100 MG, 300 MG (<i>vandetanib</i>)	NPSP	
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG (<i>cabozantinib s-malate</i>)	NPSP	
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG (<i>cabozantinib s-malate</i>)	NPSP	
COMETRIQ (60 MG DAILY DOSE) ORAL KIT 20 MG (<i>cabozantinib s-malate</i>)	NPSP	
COPIKTRA ORAL CAPSULE 15 MG, 25 MG (<i>duvelisib</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
COTELLIC ORAL TABLET 20 MG (<i>cobimetinib fumarate</i>)	NF	
DANZITEN ORAL TABLET 71 MG, 95 MG (<i>nilotinib tartrate</i>)	NF	
<i>erlotinib hcl oral tablet 100 mg, 150 mg, 25 mg</i>	G	
FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG (<i>tivozanib hcl</i>)	NF	
FRUZAQLA ORAL CAPSULE 1 MG, 5 MG (<i>fruquintinib</i>)	NPSP	
GAVRETO ORAL CAPSULE 100 MG (<i>pralsetinib</i>)	PSP	
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG (<i>afatinib dimaleate</i>)	NPSP	
GLEEVEC ORAL TABLET 100 MG, 400 MG (<i>imatinib mesylate</i>)	NF	
GOMEKLI ORAL CAPSULE 1 MG, 2 MG (<i>mirdametinib</i>)	PSP	
GOMEKLI ORAL TABLET SOLUBLE 1 MG (<i>mirdametinib</i>)	PSP	
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG (<i>palbociclib</i>)	PSP	
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG (<i>palbociclib</i>)	PSP	
IBTROZI ORAL CAPSULE 200 MG (<i>taletrectinib adipate</i>)	PSP	
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG (<i>ponatinib hcl</i>)	NF	
<i>imatinib mesylate oral tablet 100 mg, 400 mg</i>	G	
IMBRUVICA ORAL CAPSULE 140 MG, 70 MG (<i>ibrutinib</i>)	NF	
IMBRUVICA ORAL SUSPENSION 70 MG/ML (<i>ibrutinib</i>)	NF	
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG (<i>ibrutinib</i>)	NF	
<i>imkeldi oral solution 80 mg/ml</i>	NF	
INLYTA ORAL TABLET 1 MG, 5 MG (<i>axitinib</i>)	PSP	
INREBIC ORAL CAPSULE 100 MG (<i>fedratinib hcl</i>)	NF	
IRESSA ORAL TABLET 250 MG (<i>gefitinib</i>)	NF	
ITOVEBI ORAL TABLET 3 MG, 9 MG (<i>inavolisib</i>)	NPSP	
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG (<i>ruxolitinib phosphate</i>)	PSP	
JAYPIRCA ORAL TABLET 100 MG, 50 MG (<i>pirtobrutinib</i>)	NF	
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK 200 MG (<i>ribociclib succinate</i>)	PSP	
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK 200 MG (<i>ribociclib succinate</i>)	PSP	
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK 200 MG (<i>ribociclib succinate</i>)	PSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
KOSELUGO ORAL CAPSULE 10 MG, 25 MG (<i>selumetinib sulfate</i>)	PSP	
LAZCLUZE ORAL TABLET 240 MG, 80 MG (<i>lazertinib mesylate</i>)	NF	
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG (<i>lenvatinib mesylate</i>)	PSP	
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 3 X 4 MG (<i>lenvatinib mesylate</i>)	PSP	
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 & 4 MG (<i>lenvatinib mesylate</i>)	PSP	
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG (<i>lenvatinib mesylate</i>)	PSP	
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG (<i>lenvatinib mesylate</i>)	PSP	
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG & 4 MG (<i>lenvatinib mesylate</i>)	PSP	
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 4 MG (<i>lenvatinib mesylate</i>)	PSP	
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 4 MG (<i>lenvatinib mesylate</i>)	PSP	
LORBRENA ORAL TABLET 100 MG, 25 MG (<i>lorlatinib</i>)	NPSP	
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG (<i>futibatinib</i>)	NF	
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG (<i>futibatinib</i>)	NF	
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG (<i>futibatinib</i>)	NF	
MEKINIST ORAL SOLUTION RECONSTITUTED 0.05 MG/ML (<i>trametinib dimethyl sulfoxide</i>)	PSP	
MEKINIST ORAL TABLET 0.5 MG, 2 MG (<i>trametinib dimethyl sulfoxide</i>)	PSP	
MEKTOVI ORAL TABLET 15 MG (<i>binimetinib</i>)	PSP	
NERLYNX ORAL TABLET 40 MG (<i>neratinib maleate</i>)	NPSP	
NEXAVAR ORAL TABLET 200 MG (<i>sorafenib tosylate</i>)	NF	
OJEMDA ORAL SUSPENSION RECONSTITUTED 25 MG/ML (<i>tovorafenib</i>)	NF	
OJEMDA ORAL TABLET 100 MG (<i>tovorafenib</i>)	NF	
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG (<i>momelotinib dihydrochloride</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG (<i>pemigatinib</i>)	NF	
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 MG (<i>alpelisib</i>)	PSP	
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 & 50 MG (<i>alpelisib</i>)	PSP	
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK 2 X 150 MG (<i>alpelisib</i>)	PSP	
QINLOCK ORAL TABLET 50 MG (<i>ripretinib</i>)	NF	
RETEVMO ORAL TABLET 120 MG, 160 MG, 40 MG, 80 MG (<i>selpercatinib</i>)	PSP	
ROZLYTREK ORAL CAPSULE 100 MG, 200 MG (<i>entrectinib</i>)	PSP	
ROZLYTREK ORAL PACKET 50 MG (<i>entrectinib</i>)	PSP	
RYDAPT ORAL CAPSULE 25 MG (<i>midostaurin</i>)	PSP	
SCSEMBLIX ORAL TABLET 100 MG, 20 MG, 40 MG (<i>asciminib hcl</i>)	PSP	
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG (<i>dasatinib</i>)	NF	
STIVARGA ORAL TABLET 40 MG (<i>regorafenib</i>)	PSP	
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG (<i>sunitinib malate</i>)	NF	
TABRECTA ORAL TABLET 150 MG, 200 MG (<i>capmatinib hcl</i>)	NF	
TAFINLAR ORAL CAPSULE 50 MG, 75 MG (<i>dabrafenib mesylate</i>)	PSP	
TAFINLAR ORAL TABLET SOLUBLE 10 MG (<i>dabrafenib mesylate</i>)	PSP	
TAGRISSO ORAL TABLET 40 MG, 80 MG (<i>osimertinib mesylate</i>)	PSP	
TARCEVA ORAL TABLET 100 MG (<i>erlotinib hcl</i>)	NPSP	
TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG (<i>nilotinib hcl</i>)	NF	
TEPMETKO ORAL TABLET 225 MG (<i>tepotinib hcl</i>)	NF	
TRUQAP ORAL TABLET 200 MG (<i>capivasertib</i>)	PSP	
TRUQAP ORAL TABLET THERAPY PACK 160 MG, 200 MG (<i>capivasertib</i>)	PSP	
TUKYSA ORAL TABLET 150 MG, 50 MG (<i>tucatinib</i>)	NPSP	
TURALIO ORAL CAPSULE 125 MG (<i>pexidartinib hcl</i>)	PSP	
TYKERB ORAL TABLET 250 MG (<i>lapatinib ditosylate</i>)	NPSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG (<i>quizartinib dihydrochloride</i>)	NPSP	
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG (<i>abemaciclib</i>)	NPSP	
VITRAKVI ORAL CAPSULE 100 MG, 25 MG (<i>larotrectinib sulfate</i>)	PSP	
VITRAKVI ORAL SOLUTION 20 MG/ML (<i>larotrectinib sulfate</i>)	PSP	
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG (<i>dacomitinib</i>)	NF	
VONJO ORAL CAPSULE 100 MG (<i>pacritinib citrate</i>)	NPSP	
VOTRIENT ORAL TABLET 200 MG (<i>pazopanib hcl</i>)	NF	
XALKORI ORAL CAPSULE 200 MG, 250 MG (<i>crizotinib</i>)	NF	
XALKORI ORAL CAPSULE SPRINKLE 150 MG, 20 MG, 50 MG (<i>crizotinib</i>)	NPSP	
XOSPATA ORAL TABLET 40 MG (<i>gilteritinib fumarate</i>)	PSP	
ZELBORAF ORAL TABLET 240 MG (<i>vemurafenib</i>)	NF	
ZYDELIG ORAL TABLET 100 MG, 150 MG (<i>idelalisib</i>)	NF	
ZYKADIA ORAL TABLET 150 MG (<i>ceritinib</i>)	PSP	
MISCELLANEOUS		
<i>bexarotene oral capsule 75 mg</i>	G	
HYDREA ORAL CAPSULE 500 MG (<i>hydroxyurea</i>)	NPB	
<i>hydroxyurea oral capsule 500 mg</i>	G	
IDHIFA ORAL TABLET 100 MG, 50 MG (<i>enasidenib mesylate</i>)	NPSP	
IWILFIN ORAL TABLET 192 MG (<i>eflornithine hcl</i>)	NPSP	
KRAZATI ORAL TABLET 200 MG (<i>adagrasib</i>)	PSP	
LUMAKRAS ORAL TABLET 120 MG, 240 MG, 320 MG (<i>sotorasib</i>)	PSP	
LYNPARZA ORAL TABLET 100 MG, 150 MG (<i>olaparib</i>)	PSP	
ODOMZO ORAL CAPSULE 200 MG (<i>sonidegib phosphate</i>)	PSP	
OGSIVEO ORAL TABLET 100 MG, 150 MG, 50 MG (<i>nirogacestat hydrobromide</i>)	NF	
REZLIDHIA ORAL CAPSULE 150 MG (<i>olutasidenib</i>)	NF	
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG (<i>rucaparib camsylate</i>)	NF	
TALZENNA ORAL CAPSULE 0.1 MG, 0.25 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG (<i>talazoparib tosylate</i>)	NF	
TARGRETIN ORAL CAPSULE 75 MG (<i>bexarotene</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
TAZVERIK ORAL TABLET 200 MG (<i>tazemetostat hbr</i>)	NF	
TIBSOVO ORAL TABLET 250 MG (<i>ivosidenib</i>)	NPSP	
<i>tretinoin oral capsule 10 mg</i>	G	
VISTOGARD ORAL PACKET 10 GM (<i>uridine triacetate</i>)	PSP	
VORANIGO ORAL TABLET 10 MG, 40 MG (<i>vorasidenib</i>)	NPSP	
WELIREG ORAL TABLET 40 MG (<i>belzutifan</i>)	NF	
XOFIGO INTRAVENOUS SOLUTION 30 MCCI/ML (<i>radium ra 223 dichloride</i>)	NF	
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG (<i>selinexor</i>)	NPSP	
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 10 MG (<i>selinexor</i>)	NPSP	
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG (<i>selinexor</i>)	NPSP	
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG (<i>selinexor</i>)	NPSP	
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	NPSP	
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG (<i>selinexor</i>)	NPSP	
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	NPSP	
ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG (<i>niraparib tosylate</i>)	PSP	
ZOLINZA ORAL CAPSULE 100 MG (<i>vorinostat</i>)	NPSP	
MITOTIC INHIBITORS		
DOCIVYX INTRAVENOUS SOLUTION 160 MG/16ML, 20 MG/2ML, 80 MG/8ML (<i>docetaxel</i>)	NF	
PROTEASOME INHIBITORS		
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG (<i>ixazomib citrate</i>)	PSP	
PROTECTIVE AGENTS		
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	G	
MESNEX ORAL TABLET 400 MG (<i>mesna</i>)	NPB	
TOPOISOMERASE INHIBITORS		
<i>etoposide oral capsule 50 mg</i>	G	
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG (<i>topotecan hcl</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
ONIVYDE INTRAVENOUS SUSPENSION 43 MG/10ML (irinotecan hcl liposome)	NPSP	
CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS		
ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG (quinapril-hydrochlorothiazide)	NPB	
amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	G	
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	G	
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	G	
fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg	G	
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	G	N8 (Listing does not include certain NDCs)
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG (amlodipine besy-benazepril hcl)	NPB	
PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7-5 MG (perindopril arg-amlodipine)	NF	
quinapril-hydrochlorothiazide oral tablet 20-12.5 mg, 20-25 mg	G	N8 (Listing does not include certain NDCs)
trandolapril-verapamil hcl er oral tablet extended release 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	NPB	
ZESTORETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG (lisinopril-hydrochlorothiazide)	NF	
ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	G	N8 (Listing does not include certain NDCs)
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	G	
enalapril maleate oral solution 1 mg/ml	G	
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	G	N8 (Listing does not include certain NDCs)
EPANED ORAL SOLUTION 1 MG/ML (enalapril maleate)	NF	
fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg	G	N8 (Listing does not include certain NDCs)
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg	G	N8 (Listing does not include certain NDCs)

Prescription Drug Name	Drug Tier	Drug Notes
<i>moexipril hcl oral tablet 15 mg, 7.5 mg</i>	G	
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	G	
QBRELIS ORAL SOLUTION 1 MG/ML (<i>lisinopril</i>)	NPB	
<i>quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	G	
<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	G	
VASOTEC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG (<i>enalapril maleate</i>)	NPB	
ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
ALDACTONE ORAL TABLET 100 MG, 25 MG, 50 MG (<i>spironolactone</i>)	NPB	
CAROSPIR ORAL SUSPENSION 25 MG/5ML (<i>spironolactone</i>)	NF	
<i>eplerenone oral tablet 25 mg, 50 mg</i>	G	
INSPIRA ORAL TABLET 25 MG, 50 MG (<i>eplerenone</i>)	NPB	
KERENDIA ORAL TABLET 10 MG, 20 MG, 40 MG (<i>finerenone</i>)	PB	
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	G	
ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>prazosin hcl oral capsule 1 mg, 2 mg, 5 mg</i>	G	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	G	
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	G	
ATACAND HCT ORAL TABLET 16-12.5 MG, 32-12.5 MG, 32-25 MG (<i>candesartan cilexetil-hctz</i>)	NF	
AZOR ORAL TABLET 10-20 MG, 10-40 MG, 5-20 MG, 5-40 MG (<i>amlodipine-olmesartan</i>)	NF	
BENICAR HCT ORAL TABLET 20-12.5 MG, 40-12.5 MG, 40-25 MG (<i>olmesartan medoxomil-hctz</i>)	NF	
<i>candesartan cilexetil-hctz oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
DIOVAN HCT ORAL TABLET 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG (<i>valsartan-hydrochlorothiazide</i>)	NF	
EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG (<i>azilsartan-chlorthalidone</i>)	NF	
EXFORGE HCT ORAL TABLET 10-160-12.5 MG, 10-160-25 MG, 10-320-25 MG, 5-160-12.5 MG, 5-160-25 MG (<i>amlodipine-valsartan-hctz</i>)	NF	
EXFORGE ORAL TABLET 10-160 MG, 10-320 MG, 5-160 MG, 5-320 MG (<i>amlodipine besylate-valsartan</i>)	NF	
HYZAAR ORAL TABLET 100-12.5 MG, 100-25 MG, 50-12.5 MG (<i>losartan potassium-hctz</i>)	NF	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	G	
<i>losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	G	
MICARDIS HCT ORAL TABLET 40-12.5 MG, 80-12.5 MG, 80-25 MG (<i>telmisartan-hctz</i>)	NF	
<i>olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	G	
<i>olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</i>	G	
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	G	
<i>telmisartan-hctz oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	G	
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	G	
ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
ATACAND ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG (<i>candesartan cilexetil</i>)	NF	
BENICAR ORAL TABLET 20 MG, 40 MG, 5 MG (<i>olmesartan medoxomil</i>)	NF	
<i>candesartan cilexetil oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	G	
COZAAR ORAL TABLET 100 MG, 25 MG, 50 MG (<i>losartan potassium</i>)	NF	
DIOVAN ORAL TABLET 160 MG, 320 MG, 40 MG, 80 MG (<i>valsartan</i>)	NF	
EDARBI ORAL TABLET 40 MG, 80 MG (<i>azilsartan medoxomil</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	G	
<i>losartan potassium oral tablet 100 mg, 25 mg, 50 mg</i>	G	
MICARDIS ORAL TABLET 40 MG, 80 MG (<i>telmisartan</i>)	NF	
<i>olmesartan medoxomil oral tablet 20 mg, 40 mg, 5 mg</i>	G	
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	G	
<i>valsartan oral solution 4 mg/ml</i>	NF	
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	G	
ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM		
<i>amiodarone hcl oral tablet 100 mg, 200 mg, 400 mg</i>	G	
BETAPACE AF ORAL TABLET 120 MG, 160 MG, 80 MG (<i>sotalol hcl af</i>)	NF	
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG (<i>sotalol hcl</i>)	NF	
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>	G	
<i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>	G	
<i>flecainide acetate oral tablet 100 mg, 150 mg</i>	G	
<i>flecainide acetate oral tablet 50 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>mexiletine hcl oral capsule 150 mg, 200 mg, 250 mg</i>	G	
MULTAQ ORAL TABLET 400 MG (<i>dronedarone hcl</i>)	PB	
NEXTERONE INTRAVENOUS SOLUTION 150-4.21 MG/100ML-%, 360-4.14 MG/200ML-% (<i>amiodarone hcl in dextrose</i>)	NF	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 150 MG (<i>disopyramide phosphate</i>)	NPB	
NORPACE ORAL CAPSULE 100 MG, 150 MG (<i>disopyramide phosphate</i>)	NF	
<i>amiodarone hcl</i> (Pacerone Oral Tablet 100 Mg, 200 Mg)	G	
<i>propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg</i>	G	
<i>propafenone hcl oral tablet 150 mg, 225 mg, 300 mg</i>	G	
<i>quinidine gluconate er oral tablet extended release 324 mg</i>	G	
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	G	
<i>sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg</i>	G	
<i>sotalol hcl oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	G	
SOTYLIZE ORAL SOLUTION 5 MG/ML (<i>sotalol hcl</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
TIKOSYN ORAL CAPSULE 125 MCG, 250 MCG, 500 MCG (<i>dofetilide</i>)	NPSP	
ANTILIPEMICS, ACL INHIBITORS/COMBINATIONS - DRUGS TO TREAT HIGH CHOLESTEROL		
NEXLETOL ORAL TABLET 180 MG (<i>bempedoic acid</i>)	PB	
NEXLIZET ORAL TABLET 180-10 MG (<i>bempedoic acid-ezetimibe</i>)	PB	
ANTILIPEMICS, BILE ACID RESINS - DRUGS TO TREAT HIGH CHOLESTEROL		
<i>cholestyramine light oral packet 4 gm</i>	G	
<i>cholestyramine light oral powder 4 gm/dose</i>	G	N8 (Listing does not include certain NDCs)
<i>cholestyramine oral packet 4 gm</i>	G	
<i>cholestyramine oral powder 4 gm/dose</i>	G	N8 (Listing does not include certain NDCs)
<i>colesevelam hcl oral packet 3.75 gm</i>	G	
<i>colesevelam hcl oral tablet 625 mg</i>	G	
<i>colestipol hcl oral granules 5 gm</i>	G	
<i>colestipol hcl oral packet 5 gm</i>	G	
<i>colestipol hcl oral tablet 1 gm</i>	G	
<i>cholestyramine light</i> (Prevalite Oral Packet 4 Gm)	G	
<i>cholestyramine light</i> (Prevalite Oral Powder 4 Gm/Dose)	G	
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITOR - DRUGS TO TREAT HIGH CHOLESTEROL		
<i>ezetimibe oral tablet 10 mg</i>	G	
ZETIA ORAL TABLET 10 MG (<i>ezetimibe</i>)	NF	
ANTILIPEMICS, FIBRATES - DRUGS TO TREAT HIGH CHOLESTEROL		
<i>fenofibrate micronized oral capsule 130 mg</i>	NF	
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>fenofibrate micronized oral capsule 43 mg</i>	G	
<i>fenofibrate oral capsule 150 mg</i>	G	
<i>fenofibrate oral capsule 50 mg</i>	NF	
<i>fenofibrate oral tablet 120 mg, 40 mg, 54 mg</i>	NF	
<i>fenofibrate oral tablet 145 mg, 48 mg</i>	G	
<i>fenofibrate oral tablet 160 mg</i>	G	N8 (Listing does not include certain NDCs)

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>fenofibric acid oral capsule delayed release 135 mg, 45 mg</i>	G	
<i>fenofibric acid oral tablet 105 mg</i>	G	
<i>gemfibrozil oral tablet 600 mg</i>	G	N8 (Listing does not include certain NDCs)
LIPOFEN ORAL CAPSULE 150 MG, 50 MG (<i>fenofibrate</i>)	NPB	
TRICOR ORAL TABLET 145 MG, 48 MG (<i>fenofibrate</i>)	NF	
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR 20 MG, 40 MG, 60 MG (<i>lovastatin</i>)	NF	
ATORVALIQ ORAL SUSPENSION 20 MG/5ML (<i>atorvastatin calcium</i>)	NF	
<i>atorvastatin calcium oral tablet 10 mg, 20 mg</i>	CE	
<i>atorvastatin calcium oral tablet 40 mg, 80 mg</i>	G	
CRESTOR ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG (<i>rosuvastatin calcium</i>)	NF	
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE 10 MG, 20 MG, 40 MG, 5 MG (<i>rosuvastatin calcium</i>)	NF	
<i>flolipid oral suspension 20 mg/5ml, 40 mg/5ml</i>	NF	
<i>fluvastatin sodium er oral tablet extended release 24 hour 80 mg</i>	G	
<i>fluvastatin sodium oral capsule 20 mg, 40 mg</i>	G	
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 80 MG (<i>fluvastatin sodium</i>)	NF	
LIPITOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG (<i>atorvastatin calcium</i>)	NF	
LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG (<i>pitavastatin calcium</i>)	NF	
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	G	
<i>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	G	
<i>rosuvastatin calcium oral tablet 10 mg, 20 mg, 5 mg</i>	G	
<i>rosuvastatin calcium oral tablet 40 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	CE	
<i>simvastatin oral tablet 80 mg</i>	G	
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG (<i>simvastatin</i>)	NPB	
ZYPITAMAG ORAL TABLET 2 MG, 4 MG (<i>pitavastatin magnesium</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS/COMBINATIONS - DRUGS TO TREAT HIGH CHOLESTEROL		
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	G	
VYTORIN ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG (<i>ezetimibe-simvastatin</i>)	NPB	
ANTILIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL		
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG (<i>lomitapide mesylate</i>)	NF	
<i>niacin (antihyperlipidemic) oral tablet 500 mg</i>	NF	
<i>niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg</i>	G	
NIACOR ORAL TABLET 500 MG (<i>niacin (antihyperlipidemic)</i>)	NF	
ANTILIPEMICS, OMEGA-3 FATTY ACIDS - DRUGS TO TREAT HIGH CHOLESTEROL		
<i>icosapent ethyl oral capsule 0.5 gm, 1 gm</i>	NF	
LOVAZA ORAL CAPSULE 1 GM (<i>omega-3-acid ethyl esters</i>)	NF	
<i>omega-3-acid ethyl esters oral capsule 1 gm</i>	G	
VASCEPA ORAL CAPSULE 0.5 GM, 1 GM (<i>icosapent ethyl</i>)	PB	
ANTILIPEMICS, PCSK9 INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL		
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 75 MG/ML (<i>alirocumab</i>)	NF	
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 140 MG/ML (<i>evolocumab</i>)	PSP	
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML (<i>evolocumab</i>)	PSP	
BETA-BLOCKER/DIURETIC COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	G	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	G	
<i>metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
BETA-BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
<i>acebutolol hcl oral capsule 200 mg, 400 mg</i>	G	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	G	
ATENOLOL+SYRSPEND SF ORAL SUSPENSION 1 MG/ML (<i>atenolol</i>)	NF	
<i>betaxolol hcl oral tablet 10 mg, 20 mg</i>	G	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	G	
BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG (<i>nebivolol hcl</i>)	NF	
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	G	
<i>carvedilol phosphate er oral capsule extended release 24 hour 10 mg, 20 mg, 40 mg, 80 mg</i>	G	N8 (Listing does not include certain NDCs)
COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 40 MG, 80 MG (<i>carvedilol phosphate</i>)	NF	
COREG ORAL TABLET 12.5 MG, 25 MG, 3.125 MG, 6.25 MG (<i>carvedilol</i>)	NPB	
HEMANGEOL ORAL SOLUTION 4.28 MG/ML (<i>propranolol hcl</i>)	NPB	
INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 160 MG, 60 MG, 80 MG (<i>propranolol hcl</i>)	NF	
INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG (<i>propranolol hcl sr beads</i>)	NF	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG (<i>propranolol hcl sr beads</i>)	NF	
KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 200 MG, 25 MG, 50 MG (<i>metoprolol succinate</i>)	NF	
<i>labetalol hcl intravenous solution prefilled syringe 20 mg/4ml</i>	NF	
<i>labetalol hcl oral tablet 100 mg, 200 mg, 300 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>labetalol hcl oral tablet 400 mg</i>	G	
LOPRESSOR ORAL SOLUTION 10 MG/ML (<i>metoprolol tartrate</i>)	NPB	
LOPRESSOR ORAL TABLET 100 MG, 50 MG (<i>metoprolol tartrate</i>)	NPB	
<i>metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	G	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	G	
<i>nebivolol hcl oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>pindolol oral tablet 10 mg, 5 mg</i>	G	
<i>propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg</i>	G	
<i>propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml</i>	G	
<i>propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	G	
TENORMIN ORAL TABLET 100 MG, 25 MG, 50 MG (<i>atenolol</i>)	NPB	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	G	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG (<i>metoprolol succinate</i>)	NF	
CALCIUM CHANNEL BLOCKER/ANTILIPEMIC COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	G	
CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
AMLODIPINE BES+SYRSPEND SF ORAL SUSPENSION 1 MG/ML (<i>amlodipine besylate</i>)	NF	
<i>amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	
CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG (<i>diltiazem hcl coated beads</i>)	NF	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (<i>diltiazem hcl</i>)	NF	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG (<i>diltiazem hcl</i>)	NF	
<i>diltiazem hcl coated beads</i> (Cartia Xt Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg, 240 Mg, 300 Mg)	G	
CONJUPRI ORAL TABLET 2.5 MG, 5 MG (<i>levamlodipine maleate</i>)	NF	
<i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	G	
<i>diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg</i>	G	
<i>diltiazem hcl er oral tablet extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	NF	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>	G	
<i>felodipine er oral tablet extended release 24 hour 10 mg</i>	G	
<i>felodipine er oral tablet extended release 24 hour 2.5 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	G	
KATERZIA ORAL SUSPENSION 1 MG/ML (<i>amlodipine benzoate</i>)	NF	
<i>diltiazem hcl</i> (Matzim La Oral Tablet Extended Release 24 Hour 180 Mg, 240 Mg, 300 Mg, 360 Mg, 420 Mg)	NF	
<i>nicardipine hcl oral capsule 20 mg, 30 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>	G	
<i>nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>nifedipine oral capsule 10 mg, 20 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>nimodipine oral capsule 30 mg</i>	G	
<i>nisoldipine er oral tablet extended release 24 hour 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg</i>	G	
NORLIQVA ORAL SOLUTION 1 MG/ML (<i>amlodipine besylate</i>)	NF	
NORVASC ORAL TABLET 10 MG, 2.5 MG, 5 MG (<i>amlodipine besylate</i>)	NF	
NYMALIZE ORAL SOLUTION 6 MG/ML (<i>nimodipine</i>)	NPB	
<i>verapamil hcl er oral capsule extended release 24 hour 100 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg</i>	G	
<i>verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>verapamil hcl oral tablet 120 mg, 40 mg, 80 mg</i>	G	N8 (Listing does not include certain NDCs)
DIGITALIS GLYCOSIDES - DRUGS TO TREAT HEART CONDITIONS		
<i>digoxin (Digox Oral Tablet 125 Mcg, 250 Mcg)</i>	G	
<i>digoxin oral solution 0.05 mg/ml</i>	G	
<i>digoxin oral tablet 125 mcg, 250 mcg</i>	G	
LANOXIN ORAL TABLET 125 MCG, 250 MCG (<i>digoxin</i>)	NF	
LANOXIN ORAL TABLET 62.5 MCG (<i>digoxin</i>)	NPB	
DIRECT RENIN INHIBITORS/COMBINATIONS - DRUGS TO TREAT HEART CONDITIONS		
<i>aliskiren fumarate oral tablet 150 mg, 300 mg</i>	G	
TEKTURNA ORAL TABLET 150 MG, 300 MG (<i>aliskiren fumarate</i>)	NPB	
DIURETICS - DRUGS TO TREAT HEART CONDITIONS		
<i>acetazolamide er oral capsule extended release 12 hour 500 mg</i>	G	
<i>acetazolamide oral tablet 125 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>acetazolamide oral tablet 250 mg</i>	G	
<i>amiloride hcl oral tablet 5 mg</i>	G	
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	G	
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	G	
DIURIL ORAL SUSPENSION 250 MG/5ML (<i>chlorothiazide</i>)	NPB	
DYRENIUM ORAL CAPSULE 100 MG, 50 MG (<i>triamterene</i>)	NF	
<i>ethacrynic acid oral tablet 25 mg</i>	G	
FUROSCIX SUBCUTANEOUS CARTRIDGE KIT 80 MG/10ML (<i>furosemide</i>)	NF	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	G	
<i>furosemide oral tablet 20 mg, 40 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>furosemide oral tablet 80 mg</i>	G	
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	G	
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	G	
KEVEYIS ORAL TABLET 50 MG (<i>dichlorphenamide</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
<i>methazolamide oral tablet 25 mg, 50 mg</i>	G	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	
SOAANZ ORAL TABLET 20 MG, 40 MG, 60 MG (<i>torsemide</i>)	NF	
<i>spironolactone-hctz oral tablet 25-25 mg</i>	G	
THALITONE ORAL TABLET 15 MG (<i>chlorthalidone</i>)	NF	
<i>torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>triamterene oral capsule 100 mg, 50 mg</i>	G	
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg</i>	G	
HEART FAILURE		
BIDIL ORAL TABLET 20-37.5 MG (<i>isosorb dinitrate-hydralazine</i>)	NPB	
CORLANOR ORAL SOLUTION 5 MG/5ML (<i>ivabradine hcl</i>)	NPB	
CORLANOR ORAL TABLET 5 MG, 7.5 MG (<i>ivabradine hcl</i>)	NPB	
ENTRESTO ORAL CAPSULE SPRINKLE 15-16 MG, 6-6 MG (<i>sacubitril-valsartan</i>)	NPB	
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG (<i>sacubitril-valsartan</i>)	NPB	
INPEFA ORAL TABLET 200 MG, 400 MG (<i>sotagliflozin</i>)	NF	
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG (<i>vericiguat</i>)	PB	
MISCELLANEOUS		
ADRENALIN INTRAVENOUS SOLUTION 5-0.9 MG/250ML-% (<i>epinephrine-nacl</i>)	NF	
ATTRUBY ORAL TABLET THERAPY PACK 356 MG (<i>acoramidis hcl</i>)	NF	
BIORPHEN INTRAVENOUS SOLUTION 0.5 MG/5ML (<i>phenylephrine hcl (pressors)</i>)	NF	
CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG (<i>mavacamten</i>)	NPSP	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY 0.1 MG/24HR (<i>clonidine</i>)	NPB	
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY 0.2 MG/24HR (<i>clonidine</i>)	NPB	
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY 0.3 MG/24HR (<i>clonidine</i>)	NPB	
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>clonidine transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr</i>	G	N8 (Listing does not include certain NDCs)
DEMSER ORAL CAPSULE 250 MG (<i>metyrosine</i>)	NPSP	
GIAPREZA INTRAVENOUS SOLUTION 0.5 MG/ML, 2.5 MG/ML (<i>angiotensin ii acetate</i>)	NF	
<i>guanfacine hcl oral tablet 1 mg, 2 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	G	N8 (Listing does not include certain NDCs)
LODOCO ORAL TABLET 0.5 MG (<i>colchicine</i>)	NF	
<i>methyldopa oral tablet 250 mg, 500 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	G	
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.17 MG (<i>clonidine</i>)	NF	
NIPRIDE RTU INTRAVENOUS SOLUTION 20-0.9 MG/100ML-%, 50-0.9 MG/100ML-% (<i>nitroprusside sodium-nacl</i>)	NF	
NORTHERA ORAL CAPSULE 100 MG, 200 MG, 300 MG (<i>droxidopa</i>)	NF	
<i>phenoxybenzamine hcl oral capsule 10 mg</i>	G	
<i>ranolazine er oral tablet extended release 12 hour 1000 mg, 500 mg</i>	G	
TRYVIO ORAL TABLET 12.5 MG (<i>aprocitentan</i>)	NF	
VECAMYL ORAL TABLET 2.5 MG (<i>mecamylamine hcl</i>)	NPB	
VYNDAMAX ORAL CAPSULE 61 MG (<i>tafamidis</i>)	PSP	
VYNDAQEL ORAL CAPSULE 20 MG (<i>tafamidis meglumine (cardiac)</i>)	NF	
NITRATES - DRUGS TO TREAT HEART CONDITIONS		
ISORDIL TITRADOSE ORAL TABLET 40 MG, 5 MG (<i>isosorbide dinitrate</i>)	NPB	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	G	
<i>isosorbide dinitrate oral tablet 40 mg</i>	NF	
<i>isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg</i>	G	
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	NPB	
NITRO-BID TRANSDERMAL OINTMENT 2 % (<i>nitroglycerin</i>)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.3 MG/HR, 0.4 MG/HR, 0.6 MG/HR, 0.8 MG/HR (<i>nitroglycerin</i>)	NPB	
<i>nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg</i>	G	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	G	
<i>nitroglycerin translingual solution 0.4 mg/spray</i>	G	
NITROLINGUAL TRANSLINGUAL SOLUTION 0.4 MG/SPRAY (<i>nitroglycerin</i>)	NPB	
PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT PULMONARY HYPERTENSION		
ADCIRCA ORAL TABLET 20 MG (<i>tadalafil (pah)</i>)	NF	
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG (<i>riociguat</i>)	PSP	
<i>tadalafil (pah)</i> (Alyq Oral Tablet 20 Mg)	G	
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	G	
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	G	
<i>epoprostenol sodium intravenous solution reconstituted 0.5 mg, 1.5 mg</i>	G	
FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED 0.5 MG, 1.5 MG (<i>epoprostenol sodium</i>)	NPSP	
LETAIRIS ORAL TABLET 10 MG, 5 MG (<i>ambrisentan</i>)	NF	
OPSUMIT ORAL TABLET 10 MG (<i>macitentan</i>)	PSP	
OPSYNVI ORAL TABLET 10-20 MG, 10-40 MG (<i>macitentan-tadalafil</i>)	PSP	
ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25 MG (<i>treprostinil diolamine</i>)	PSP	
ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25 MG (<i>treprostinil diolamine</i>)	PSP	
ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25 & 1 MG (<i>treprostinil diolamine</i>)	PSP	
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG (<i>treprostinil diolamine</i>)	PSP	
REMODULIN INJECTION SOLUTION 100 MG/20ML, 20 MG/20ML, 200 MG/20ML, 50 MG/20ML, 8 MG/20ML (<i>treprostinil</i>)	NF	
REVATIO ORAL TABLET 20 MG (<i>sildenafil citrate</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>sildenafil citrate oral suspension reconstituted 10 mg/ml</i>	G	
<i>sildenafil citrate oral tablet 20 mg</i>	G	
<i>tadalafil (pah) oral tablet 20 mg</i>	G	
TADLIQ ORAL SUSPENSION 20 MG/5ML (<i>tadalafil (pah)</i>)	PSP	
TRACLEER ORAL TABLET 125 MG, 62.5 MG (<i>bosentan</i>)	NF	
TRACLEER ORAL TABLET SOLUBLE 32 MG (<i>bosentan</i>)	NF	
<i>treprostinil injection solution 100 mg/20ml, 20 mg/20ml, 200 mg/20ml, 50 mg/20ml</i>	G	
TYVASO DPI INSTITUTIONAL KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG (<i>treprostinil</i>)	PSP	
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG (<i>treprostinil</i>)	PSP	
TYVASO DPI TITRATION KIT INHALATION POWDER 16 & 32 & 48 MCG (<i>treprostinil</i>)	PSP	
TYVASO INHALATION SOLUTION 0.6 MG/ML (<i>treprostinil</i>)	PSP	
TYVASO REFILL KIT INHALATION SOLUTION 0.6 MG/ML (<i>treprostinil</i>)	PSP	
TYVASO STARTER KIT INHALATION SOLUTION 0.6 MG/ML (<i>treprostinil</i>)	PSP	
UPTRAVI ORAL TABLET 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG (<i>selexipag</i>)	PSP	
UPTRAVI TITRATION ORAL TABLET THERAPY PACK 200 & 800 MCG (<i>selexipag</i>)	PSP	
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED 0.5 MG, 1.5 MG (<i>epoprostenol sodium</i>)	NPSP	
WINREVAIR SUBCUTANEOUS KIT 2 X 45 MG, 2 X 60 MG, 45 MG, 60 MG (<i>sotatercept-csrk</i>)	NPSP	
YUTREPIA INHALATION CAPSULE 106 MCG, 26.5 MCG, 53 MCG, 79.5 MCG (<i>treprostinil sodium</i>)	PSP	
CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS		
ALCOHOL DETERRENTS		
<i>acamprosate calcium oral tablet delayed release 333 mg</i>	G	
<i>disulfiram oral tablet 250 mg, 500 mg</i>	G	
AMYOTROPHIC LATERAL SCLEROSIS (ALS) - DRUGS TO TREAT ALS		
RADICAVA ORS ORAL SUSPENSION 105 MG/5ML (<i>edaravone</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
RADICAVA ORS STARTER KIT ORAL SUSPENSION 105 MG/5ML (<i>edaravone</i>)	PSP	
<i>riluzole oral tablet 50 mg</i>	G	
TEGLUTIK ORAL SUSPENSION 50 MG/10ML (<i>riluzole</i>)	NF	
ANTIANXIETY - DRUGS TO TREAT ANXIETY		
<i>alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg</i>	G	
ALPRAZOLAM INTENSOL ORAL CONCENTRATE 1 MG/ML (<i>alprazolam</i>)	NPB	
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	G	
<i>alprazolam oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	G	
<i>alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg</i>	G	
ANAFRANIL ORAL CAPSULE 25 MG, 50 MG, 75 MG (<i>clomipramine hcl</i>)	NPB	
ATIVAN INJECTION SOLUTION 2 MG/ML, 4 MG/ML (<i>lorazepam</i>)	NF	
ATIVAN ORAL TABLET 0.5 MG, 1 MG, 2 MG (<i>lorazepam</i>)	NF	
<i>buspirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>	G	
<i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>	G	
<i>clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg</i>	G	
<i>fluvoxamine maleate er oral capsule extended release 24 hour 100 mg, 150 mg</i>	G	
<i>fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg</i>	G	
<i>lorazepam oral concentrate 2 mg/ml</i>	G	N8 (Listing does not include certain NDCs)
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	N8 (Listing does not include certain NDCs)
LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE 1 MG, 1.5 MG, 2 MG, 3 MG (<i>lorazepam</i>)	NPB	
<i>meprobamate oral tablet 200 mg, 400 mg</i>	G	
<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>	G	
XANAX ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG (<i>alprazolam</i>)	NF	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 2 MG, 3 MG (<i>alprazolam</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS		
ADLARTY TRANSDERMAL PATCH WEEKLY 10 MG/DAY, 5 MG/DAY (<i>donepezil hcl</i>)	NF	
<i>donepezil hcl oral tablet 10 mg, 23 mg, 5 mg</i>	G	
<i>donepezil hcl oral tablet dispersible 10 mg, 5 mg</i>	G	
<i>galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg</i>	G	
<i>galantamine hydrobromide oral solution 4 mg/ml</i>	G	
<i>galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg</i>	G	
<i>memantine hcl er oral capsule extended release 24 hour 14 mg, 21 mg, 28 mg, 7 mg</i>	G	
<i>memantine hcl oral solution 2 mg/ml</i>	G	
<i>memantine hcl oral tablet 10 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg</i>	G	
NAMENDA TITRATION PAK ORAL TABLET 28 X 5 MG & 21 X 10 MG (<i>memantine hcl</i>)	NPB	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG (<i>memantine hcl-donepezil hcl</i>)	PB	
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	G	
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr</i>	G	
ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION		
<i>amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	G	
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	G	N8 (Listing does not include certain NDCs)
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG, 522 MG (<i>bupropion hbr</i>)	NF	
AUVELITY ORAL TABLET EXTENDED RELEASE 45-105 MG (<i>dextromethorphan-bupropion</i>)	PB	
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg</i>	G	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg</i>	G	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 450 mg</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>citalopram hydrobromide oral capsule 30 mg</i>	NF	
<i>citalopram hydrobromide oral solution 20 mg/10ml</i>	G	
<i>citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg</i>	G	
<i>desipramine hcl oral tablet 10 mg, 25 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>desipramine hcl oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>	G	
<i>desvenlafaxine er oral tablet extended release 24 hour 100 mg, 50 mg</i>	NPB	
<i>desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg</i>	G	
<i>doxepin hcl oral capsule 10 mg, 100 mg, 25 mg, 50 mg, 75 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>doxepin hcl oral capsule 150 mg</i>	G	
<i>doxepin hcl oral concentrate 10 mg/ml</i>	G	
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 40 mg, 60 mg</i>	G	
EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 150 MG, 37.5 MG, 75 MG (<i>venlafaxine hcl</i>)	NF	
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 6 MG/24HR, 9 MG/24HR (<i>selegiline</i>)	NPB	
<i>escitalopram oxalate oral solution 5 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	G	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 20 MG, 40 MG, 80 MG (<i>levomilnacipran hcl</i>)	NPB	
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG (<i>levomilnacipran hcl</i>)	NPB	
<i>fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg</i>	G	
<i>fluoxetine hcl oral capsule delayed release 90 mg</i>	G	
<i>fluoxetine hcl oral solution 20 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>fluoxetine hcl oral tablet 10 mg, 20 mg</i>	G	
<i>fluoxetine hcl oral tablet 60 mg</i>	NF	
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	G	
<i>imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
LEXAPRO ORAL TABLET 10 MG, 20 MG, 5 MG (escitalopram oxalate)	NF	
MARPLAN ORAL TABLET 10 MG (isocarboxazid)	NPB	
mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg	G	
mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg	G	
NARDIL ORAL TABLET 15 MG (phenelzine sulfate)	NPB	
nefazodone hcl oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	G	
NORPRAMIN ORAL TABLET 10 MG, 25 MG (desipramine hcl)	NPB	
nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg	G	
nortriptyline hcl oral solution 10 mg/5ml	G	
PAMELOR ORAL CAPSULE 10 MG, 25 MG, 50 MG, 75 MG (nortriptyline hcl)	NPB	
PARNATE ORAL TABLET 10 MG (tranylcypromine sulfate)	NPB	
paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg	G	
paroxetine hcl er oral tablet extended release 24 hour 37.5 mg	NF	
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	G	N8 (Listing does not include certain NDCs)
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5 MG, 25 MG, 37.5 MG (paroxetine hcl)	NF	
PAXIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG (paroxetine hcl)	NF	
phenelzine sulfate oral tablet 15 mg	G	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 25 MG, 50 MG (desvenlafaxine succinate)	NF	
protriptyline hcl oral tablet 10 mg, 5 mg	G	
RALDESY ORAL SOLUTION 10 MG/ML (trazodone hcl)	NF	
REMERON ORAL TABLET 15 MG, 30 MG (mirtazapine)	NPB	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG, 45 MG (mirtazapine)	NPB	
sertraline hcl oral capsule 150 mg, 200 mg	NF	
sertraline hcl oral concentrate 20 mg/ml	G	
sertraline hcl oral tablet 100 mg, 25 mg, 50 mg	G	
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK 28 MG/DEVICE (esketamine hcl)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK 28 MG/DEVICE (<i>esketamine hcl</i>)	NPB	
<i>tranylcypromine sulfate oral tablet 10 mg</i>	G	
<i>trazodone hcl oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>	G	
<i>trimipramine maleate oral capsule 100 mg, 25 mg, 50 mg</i>	G	N8 (Listing does not include certain NDCs)
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG (<i>vortioxetine hbr</i>)	PB	
<i>venlafaxine besylate er oral tablet extended release 24 hour 112.5 mg</i>	NF	
<i>venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg</i>	G	
<i>venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 37.5 mg, 75 mg</i>	NF	
<i>venlafaxine hcl er oral tablet extended release 24 hour 225 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	G	
VIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG (<i>vilazodone hcl</i>)	NF	
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG (<i>bupropion hcl</i>)	NF	
ZOLOFT ORAL CONCENTRATE 20 MG/ML (<i>sertraline hcl</i>)	NF	
ZOLOFT ORAL TABLET 100 MG, 25 MG, 50 MG (<i>sertraline hcl</i>)	NF	
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG, 30 MG (<i>zuranolone</i>)	PSP	
ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS DISEASE		
<i>amantadine hcl oral capsule 100 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>amantadine hcl oral solution 50 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>amantadine hcl oral tablet 100 mg</i>	G	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE 30 MG/3ML (<i>apomorphine hcl</i>)	NF	
<i>benztropine mesylate oral tablet 0.5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>benztropine mesylate oral tablet 1 mg, 2 mg</i>	G	
<i>bromocriptine mesylate oral capsule 5 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>bromocriptine mesylate oral tablet 2.5 mg</i>	G	
<i>carbidopa oral tablet 25 mg</i>	G	
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>	G	
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	G	
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	NPB	
CREXONT ORAL CAPSULE EXTENDED RELEASE 35-140 MG, 52.5-210 MG, 70-280 MG, 87.5-350 MG (<i>carbidopa-levodopa</i>)	PB	
DHIVY ORAL TABLET 25-100 MG (<i>carbidopa-levodopa</i>)	NPB	
DUOPA ENTERAL SUSPENSION 4.63-20 MG/ML (<i>carbidopa-levodopa</i>)	NPSP	
<i>entacapone oral tablet 200 mg</i>	G	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 137 MG, 68.5 MG (<i>amantadine hcl</i>)	NF	
<i>haloperidol oral tablet 2 mg</i>	G	
INBRIJA INHALATION CAPSULE 42 MG (<i>levodopa</i>)	PSP	
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24HR, 2 MG/24HR, 3 MG/24HR, 4 MG/24HR, 6 MG/24HR, 8 MG/24HR (<i>rotigotine</i>)	PB	
NOURIANZ ORAL TABLET 20 MG, 40 MG (<i>istradefylline</i>)	NF	
ONGENTYS ORAL CAPSULE 25 MG, 50 MG (<i>opicapone</i>)	NF	
<i>pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg</i>	G	
<i>pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	G	
<i>rasagiline mesylate oral tablet 0.5 mg, 1 mg</i>	G	
<i>ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>	G	
<i>ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	G	
RYTARY ORAL CAPSULE EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG (<i>carbidopa-levodopa</i>)	PB	
<i>selegiline hcl oral capsule 5 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>selegiline hcl oral tablet 5 mg</i>	G	N8 (Listing does not include certain NDCs)
SINEMET ORAL TABLET 10-100 MG, 25-100 MG (<i>carbidopa-levodopa</i>)	NPB	
<i>tolcapone oral tablet 100 mg</i>	G	
<i>trihexyphenidyl hcl oral solution 0.4 mg/ml</i>	G	
<i>trihexyphenidyl hcl oral tablet 2 mg, 5 mg</i>	G	
VYALEV SUBCUTANEOUS SOLUTION 12-240 MG/ML (<i>foscarbidopa-foslevodopa</i>)	NF	
XADAGO ORAL TABLET 100 MG, 50 MG (<i>safinamide mesylate</i>)	NF	
ZELAPAR ORAL TABLET DISPERSIBLE 1.25 MG (<i>selegiline hcl</i>)	NPB	
ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES		
ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE 720 MG/2.4ML, 960 MG/3.2ML (<i>aripiprazole</i>)	PB	
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG (<i>aripiprazole</i>)	PB	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG (<i>aripiprazole</i>)	PB	
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG (<i>aripiprazole w/ sens-strip-pod</i>)	NF	
ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG (<i>aripiprazole w/ sens-strip-pod</i>)	NF	
ABILIFY ORAL TABLET 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG (<i>aripiprazole</i>)	NF	
<i>aripiprazole oral solution 1 mg/ml</i>	G	
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	G	
<i>aripiprazole oral tablet dispersible 10 mg, 15 mg</i>	G	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML (<i>aripiprazole lauroxil</i>)	NPB	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML, 441 MG/1.6ML, 662 MG/2.4ML, 882 MG/3.2ML (<i>aripiprazole lauroxil</i>)	NPB	
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG (<i>limateperone tosylate</i>)	NPB	
<i>chlorpromazine hcl injection solution 25 mg/ml, 50 mg/2ml</i>	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>chlorpromazine hcl oral concentrate 100 mg/ml, 30 mg/ml</i>	NF	
<i>chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	G	
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	G	
<i>clozapine oral tablet dispersible 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg</i>	G	
COBENFY ORAL CAPSULE 100-20 MG, 125-30 MG, 50-20 MG (<i>xanomeline-trospium chloride</i>)	NPB	
COBENFY STARTER PACK ORAL CAPSULE THERAPY PACK 50-20 & 100-20 MG (<i>xanomeline-trospium chloride</i>)	NPB	
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG (<i>carbamazepine (antipsychotic)</i>)	NPB	
ERZOFRI INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 351 MG/2.25ML, 39 MG/0.25ML, 78 MG/0.5ML (<i>paliperidone palmitate</i>)	NF	
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG (<i>iloperidone</i>)	NF	
FANAPT TITRATION PACK A ORAL TABLET 1 & 2 & 4 & 6 MG (<i>iloperidone</i>)	NF	
FANAPT TITRATION PACK C ORAL TABLET 1 & 2 & 6 MG (<i>iloperidone</i>)	NF	
<i>fluphenazine decanoate injection solution 25 mg/ml</i>	G	
<i>fluphenazine hcl injection solution 2.5 mg/ml</i>	G	
<i>fluphenazine hcl oral concentrate 5 mg/ml</i>	G	
<i>fluphenazine hcl oral elixir 2.5 mg/5ml</i>	G	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	G	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED 20 MG (<i>ziprasidone mesylate</i>)	NPB	
GEODON ORAL CAPSULE 20 MG, 40 MG, 60 MG, 80 MG (<i>ziprasidone hcl</i>)	NPB	
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml</i>	G	
<i>haloperidol lactate injection solution 5 mg/ml</i>	G	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	G	
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 20 mg, 5 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML, 1560 MG/5ML (paliperidone palmitate)	NF	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML (paliperidone palmitate)	NPB	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML (paliperidone palmitate)	NF	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG (lurasidone hcl)	NF	
loxapine succinate oral capsule 10 mg, 5 mg	G	N8 (Listing does not include certain NDCs)
loxapine succinate oral capsule 25 mg, 50 mg	G	
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5- 10 MG (olanzapine-samidorphan)	NPB	
NUPLAZID ORAL CAPSULE 34 MG (pimavanserin tartrate)	NPSP	
NUPLAZID ORAL TABLET 10 MG (pimavanserin tartrate)	NPSP	
olanzapine intramuscular solution reconstituted 10 mg	G	
olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	G	
olanzapine oral tablet dispersible 10 mg, 15 mg, 20 mg, 5 mg	G	
OPIPZA ORAL FILM 10 MG, 2 MG, 5 MG (aripiprazole)	NF	
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 6 mg, 9 mg	G	
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	G	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE 120 MG, 90 MG (risperidone)	PB	
quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 300 mg, 400 mg, 50 mg	G	
quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	G	
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (brexpiprazole)	NPB	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG, 25 MG, 37.5 MG, 50 MG (risperidone microspheres)	NPB	
risperidone oral solution 1 mg/ml	G	
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	G	
RYKINDO INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 25 MG, 37.5 MG, 50 MG (<i>risperidone</i>)	NF	
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG, 2.5 MG, 5 MG (<i>asenapine maleate</i>)	NPB	
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24HR, 5.7 MG/24HR, 7.6 MG/24HR (<i>asenapine</i>)	NF	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 200 MG, 300 MG, 400 MG, 50 MG (<i>quetiapine fumarate</i>)	NF	
<i>thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	G	
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	G	
<i>trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	G	
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 100 MG/0.28ML, 125 MG/0.35ML, 150 MG/0.42ML, 200 MG/0.56ML, 250 MG/0.7ML, 50 MG/0.14ML, 75 MG/0.21ML (<i>risperidone</i>)	NF	
VERSACLOZ ORAL SUSPENSION 50 MG/ML (<i>clozapine</i>)	NPB	
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG (<i>cariprazine hcl</i>)	PB	
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	G	
ANTISEIZURE AGENTS - DRUGS TO TREAT SEIZURES		
APTOM ORAL TABLET 200 MG, 400 MG, 600 MG, 800 MG (<i>eslicarbazepine acetate</i>)	NPB	
BANZEL ORAL SUSPENSION 40 MG/ML (<i>rufinamide</i>)	NF	
BANZEL ORAL TABLET 200 MG, 400 MG (<i>rufinamide</i>)	NF	
BRIVIACT ORAL SOLUTION 10 MG/ML (<i>brivaracetam</i>)	PB	
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG (<i>brivaracetam</i>)	PB	
<i>carbamazepine er oral capsule extended release 12 hour 100 mg, 300 mg</i>	G	
<i>carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>carbamazepine oral suspension 100 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>carbamazepine oral suspension 200 mg/10ml</i>	NF	
<i>carbamazepine oral tablet 200 mg</i>	G	
<i>carbamazepine oral tablet chewable 100 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
CELONTIN ORAL CAPSULE 300 MG (<i>methsuximide</i>)	NPB	
<i>clobazam oral suspension 2.5 mg/ml</i>	G	
<i>clobazam oral tablet 10 mg, 20 mg</i>	G	
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	G	
<i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>	G	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 250 MG, 500 MG (<i>divalproex sodium</i>)	NF	
DEPAKOTE ORAL TABLET DELAYED RELEASE 125 MG, 250 MG, 500 MG (<i>divalproex sodium</i>)	NF	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE 125 MG (<i>divalproex sodium</i>)	NF	
DIACOMIT ORAL CAPSULE 250 MG, 500 MG (<i>stiripentol</i>)	NF	
DIACOMIT ORAL PACKET 250 MG, 500 MG (<i>stiripentol</i>)	NF	
<i>diazepam</i> (Diazepam Intensol Oral Concentrate 5 Mg/ML)	G	
<i>diazepam oral concentrate 5 mg/ml</i>	G	
<i>diazepam oral solution 5 mg/5ml</i>	G	
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>diazepam rectal gel 10 mg, 2.5 mg, 20 mg</i>	G	
DILANTIN INFATABS ORAL TABLET CHEWABLE 50 MG (<i>phenytoin</i>)	NF	
DILANTIN ORAL CAPSULE 100 MG, 30 MG (<i>phenytoin sodium extended</i>)	NF	
DILANTIN-125 ORAL SUSPENSION 125 MG/5ML (<i>phenytoin</i>)	NF	
<i>divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg</i>	G	
<i>divalproex sodium oral capsule delayed release sprinkle 125 mg</i>	G	
<i>divalproex sodium oral tablet delayed release 125 mg, 500 mg</i>	G	
<i>divalproex sodium oral tablet delayed release 250 mg</i>	G	N8 (Listing does not include certain NDCs)
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 1500 MG (<i>levetiracetam</i>)	NF	
EPIDIOLEX ORAL SOLUTION 100 MG/ML (<i>cannabidiol</i>)	NPSP	
EPRONTIA ORAL SOLUTION 25 MG/ML (<i>topiramate</i>)	NF	
<i>ethosuximide oral capsule 250 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>ethosuximide oral solution 250 mg/5ml</i>	G	
<i>felbamate oral suspension 600 mg/5ml</i>	G	
<i>felbamate oral tablet 400 mg, 600 mg</i>	G	
FINTEPLA ORAL SOLUTION 2.2 MG/ML (<i>fenfluramine hcl</i>)	NF	
FYCOMPA ORAL SUSPENSION 0.5 MG/ML (<i>perampanel</i>)	NPB	
FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG (<i>perampanel</i>)	NPB	
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	G	
<i>gabapentin oral solution 250 mg/5ml, 300 mg/6ml</i>	G	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	G	
KEPPRA INTRAVENOUS SOLUTION 500 MG/5ML (<i>levetiracetam</i>)	NF	
KEPPRA ORAL SOLUTION 100 MG/ML (<i>levetiracetam</i>)	NF	
KEPPRA ORAL TABLET 1000 MG, 250 MG, 500 MG, 750 MG (<i>levetiracetam</i>)	NF	
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG, 750 MG (<i>levetiracetam</i>)	NF	
KLONOPIN ORAL TABLET 0.5 MG, 1 MG, 2 MG (<i>clonazepam</i>)	NPB	
LAMICTAL ODT ORAL KIT 21 X 25 MG & 7 X 50 MG, 25 & 50 & 100 MG, 42 X 50 MG & 14X100 MG (<i>lamotrigine</i>)	NF	
LAMICTAL ODT ORAL TABLET DISPERSIBLE 100 MG, 200 MG, 25 MG, 50 MG (<i>lamotrigine</i>)	NF	
LAMICTAL ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG (<i>lamotrigine</i>)	NF	
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG (<i>lamotrigine</i>)	NF	
LAMICTAL STARTER ORAL KIT 35 X 25 MG, 42 X 25 MG & 7 X 100 MG, 84 X 25 MG & 14X100 MG (<i>lamotrigine</i>)	NF	
LAMICTAL XR ORAL KIT 21 X 25 MG & 7 X 50 MG, 25 & 50 & 100 MG, 50 & 100 & 200 MG (<i>lamotrigine</i>)	NF	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 250 MG, 300 MG, 50 MG (<i>lamotrigine</i>)	NF	
<i>lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	G	
<i>lamotrigine oral tablet chewable 25 mg, 5 mg</i>	G	
<i>lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>lamotrigine starter kit-blue oral kit 35 x 25 mg</i>	G	
<i>lamotrigine starter kit-green oral kit 84 x 25 mg & 14x100 mg</i>	G	
<i>lamotrigine starter kit-orange oral kit 42 x 25 mg & 7 x 100 mg</i>	G	
<i>levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg</i>	G	
<i>levetiracetam oral solution 100 mg/ml</i>	G	N8 (Listing does not include certain NDCs)
<i>levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg</i>	G	
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG (<i>pregabalin</i>)	NF	
LYRICA ORAL SOLUTION 20 MG/ML (<i>pregabalin</i>)	NF	
MOTPOLY XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 150 MG, 200 MG (<i>lacosamide</i>)	NF	
NAYZILAM NASAL SOLUTION 5 MG/0.1ML (<i>midazolam (anticonvulsant)</i>)	PB	
NEURONTIN ORAL SOLUTION 250 MG/5ML (<i>gabapentin</i>)	NPB	
ONFI ORAL SUSPENSION 2.5 MG/ML (<i>clobazam</i>)	NF	
ONFI ORAL TABLET 10 MG, 20 MG (<i>clobazam</i>)	NF	
<i>oxcarbazepine oral suspension 300 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	G	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG, 600 MG (<i>oxcarbazepine</i>)	PB	
<i>phenobarbital oral elixir 30 mg/7.5ml, 60 mg/15ml</i>	G	
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	G	
<i>phenytoin oral suspension 100 mg/4ml</i>	G	
<i>phenytoin oral tablet chewable 50 mg</i>	G	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	G	
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	G	
<i>pregabalin oral solution 20 mg/ml</i>	G	
<i>primidone oral tablet 125 mg</i>	NF	
<i>primidone oral tablet 250 mg</i>	G	
<i>primidone oral tablet 50 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>levetiracetam (Roweepra Oral Tablet 500 Mg)</i>	G	
<i>rufinamide oral suspension 40 mg/ml</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
SABRIL ORAL PACKET 500 MG (<i>vigabatrin</i>)	NF	
SABRIL ORAL TABLET 500 MG (<i>vigabatrin</i>)	NF	
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 250 MG, 500 MG (<i>levetiracetam</i>)	NF	
<i>lamotrigine</i> (Subvenite Oral Tablet 100 Mg, 150 Mg, 200 Mg, 25 Mg)	G	
<i>lamotrigine</i> (Subvenite Starter Kit-Blue Oral Kit 35 X 25 Mg)	G	
<i>lamotrigine</i> (Subvenite Starter Kit-Green Oral Kit 84 X 25 Mg & 14X100 Mg)	G	
<i>lamotrigine</i> (Subvenite Starter Kit-Orange Oral Kit 42 X 25 Mg & 7 X 100 Mg)	G	
SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG (<i>clobazam</i>)	NF	
TEGRETOL ORAL SUSPENSION 100 MG/5ML (<i>carbamazepine</i>)	NF	
TEGRETOL ORAL TABLET 200 MG (<i>carbamazepine</i>)	NF	
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 400 MG (<i>carbamazepine</i>)	NF	
<i>tiagabine hcl oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>	G	
<i>topiramate er oral capsule er 24 hour sprinkle 100 mg, 150 mg, 200 mg, 25 mg, 50 mg</i>	NF	
<i>topiramate oral capsule sprinkle 15 mg, 25 mg</i>	G	
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	G	
TRILEPTAL ORAL SUSPENSION 300 MG/5ML (<i>oxcarbazepine</i>)	NF	
TRILEPTAL ORAL TABLET 150 MG, 300 MG, 600 MG (<i>oxcarbazepine</i>)	NF	
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG (<i>topiramate</i>)	NPB	
VALIUM ORAL TABLET 10 MG, 2 MG, 5 MG (<i>diazepam</i>)	NPB	
<i>valproic acid oral capsule 250 mg</i>	G	
<i>valproic acid oral solution 250 mg/5ml</i>	G	
VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML (<i>diazepam</i>)	PB	
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 2 X 7.5 MG/0.1ML (<i>diazepam</i>)	PB	
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 2 X 10 MG/0.1ML (<i>diazepam</i>)	PB	
VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML (<i>diazepam</i>)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>vigabatrin oral packet 500 mg</i>	G	
<i>vigabatrin oral tablet 500 mg</i>	G	
<i>vigabatrin (Vigadrone Oral Packet 500 Mg)</i>	G	
VIGAFYDE ORAL SOLUTION 100 MG/ML (<i>vigabatrin</i>)	NF	
VIMPAT INTRAVENOUS SOLUTION 200 MG/20ML (<i>lacosamide</i>)	NF	
VIMPAT ORAL SOLUTION 10 MG/ML (<i>lacosamide</i>)	NF	
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG (<i>lacosamide</i>)	NF	
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 100 & 150 MG (<i>cenobamate</i>)	PB	
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK 150 & 200 MG (<i>cenobamate</i>)	PB	
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG (<i>cenobamate</i>)	PB	
XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG (<i>cenobamate</i>)	PB	
ZARONTIN ORAL SOLUTION 250 MG/5ML (<i>ethosuximide</i>)	NPB	
ZONEGRAN ORAL CAPSULE 100 MG, 25 MG (<i>zonisamide</i>)	NF	
ZONISADE ORAL SUSPENSION 100 MG/5ML (<i>zonisamide</i>)	NF	
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	G	
ZTALMY ORAL SUSPENSION 50 MG/ML (<i>ganaxolone</i>)	NF	
ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD		
ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG (<i>amphetamine-dextroamphetamine</i>)	NF	
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 5 MG (<i>amphetamine-dextroamphetamine</i>)	NF	
ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 12.5 MG, 15.7 MG, 18.8 MG, 3.1 MG, 6.3 MG, 9.4 MG (<i>amphetamine</i>)	NF	
<i>amphetamine sulfate oral tablet 10 mg, 5 mg</i>	G	
<i>amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	G	
<i>amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG (<i>methylphenidate hcl</i>)	NF	
<i>atomoxetine hcl oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	G	
AZSTARYS ORAL CAPSULE 26.1-5.2 MG, 39.2-7.8 MG, 52.3-10.4 MG (<i>serdexmethylphen-dexmethylphen</i>)	PB	
<i>clonidine hcl er oral tablet extended release 12 hour 0.1 mg</i>	G	
CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 54 MG (<i>methylphenidate hcl</i>)	NF	
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 17.3 MG, 25.9 MG, 8.6 MG (<i>methylphenidate</i>)	NF	
DAYTRANA TRANSDERMAL PATCH 10 MG/9HR, 15 MG/9HR, 20 MG/9HR, 30 MG/9HR (<i>methylphenidate</i>)	NF	
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	G	
<i>dexmethylphenidate hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg</i>	G	
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	G	
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	G	
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE 2.5 MG/ML (<i>amphetamine</i>)	NF	
DYANAVEL XR ORAL TABLET EXTENDED RELEASE 10 MG, 15 MG, 20 MG, 5 MG (<i>amphetamine</i>)	NF	
EVEKEO ORAL TABLET 10 MG, 5 MG (<i>amphetamine sulfate</i>)	NF	
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG, 5 MG (<i>dexmethylphenidate hcl</i>)	NF	
<i>guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 3 mg, 4 mg</i>	G	
INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR 1 MG, 2 MG, 3 MG, 4 MG (<i>guanfacine hcl</i>)	NF	
JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 20 MG, 40 MG, 60 MG, 80 MG (<i>methylphenidate hcl</i>)	NF	
<i>lisdexamfetamine dimesylate oral capsule 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>lisdexamfetamine dimesylate oral tablet chewable 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	G	
<i>methamphetamine hcl oral tablet 5 mg</i>	G	
<i>methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	G	
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg, 60 mg</i>	G	
<i>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg</i>	G	
<i>methylphenidate hcl er (osm) oral tablet extended release 45 mg, 63 mg</i>	NF	
<i>methylphenidate hcl er oral tablet extended release 10 mg, 20 mg</i>	G	
<i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 36 mg, 54 mg</i>	G	
<i>methylphenidate hcl oral solution 10 mg/5ml, 5 mg/5ml</i>	G	
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	G	
<i>methylphenidate hcl oral tablet chewable 10 mg, 2.5 mg, 5 mg</i>	G	
MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR 12.5 MG, 25 MG, 37.5 MG, 50 MG (<i>amphetamine-dextroamphetamine</i>)	NF	
ONYDA XR ORAL SUSPENSION EXTENDED RELEASE 0.1 MG/ML (<i>clonidine hcl</i>)	NF	
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 150 MG, 200 MG (<i>viloxazine hcl</i>)	PB	
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 30 MG, 40 MG (<i>methylphenidate hcl</i>)	NF	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER 25 MG/5ML (<i>methylphenidate hcl</i>)	NF	
RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG (<i>methylphenidate hcl</i>)	NF	
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG (<i>lisdexamfetamine dimesylate</i>)	NF	
VYVANSE ORAL TABLET CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG (<i>lisdexamfetamine dimesylate</i>)	NF	
XELSTRYM TRANSDERMAL PATCH 13.5 MG/9HR, 18 MG/9HR, 4.5 MG/9HR, 9 MG/9HR (<i>dextroamphetamine</i>)	NF	
<i>dextroamphetamine sulfate (Zenzedi Oral Tablet 10 Mg, 15 Mg, 2.5 Mg, 20 Mg, 30 Mg, 5 Mg, 7.5 Mg)</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
BOTULINUM TOXINS		
BOTOX INJECTION SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT (<i>onabotulinumtoxin</i>)	NF	
DAXXIFY INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT (<i>daxibotulinumtoxin-lanm</i>)	PSP	
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED 300 UNIT, 500 UNIT (<i>abobotulinumtoxin</i>)	PSP	
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT, 50 UNIT (<i>incobotulinumtoxin</i>)	PSP	
FIBROMYALGIA		
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG (<i>milnacipran hcl</i>)	NPB	
SAVELLA TITRATION PACK ORAL 12.5 & 25 & 50 MG (<i>milnacipran hcl</i>)	NPB	
HYPNOTICS - DRUGS TO TREAT INSOMNIA		
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG (<i>suvorexant</i>)	PB	
DAYVIGO ORAL TABLET 10 MG, 5 MG (<i>lemborexant</i>)	NF	
<i>doxepin hcl oral tablet 3 mg, 6 mg</i>	G	
EDLUAR SUBLINGUAL TABLET SUBLINGUAL 10 MG, 5 MG (<i>zolpidem tartrate</i>)	NF	
<i>estazolam oral tablet 1 mg, 2 mg</i>	G	
<i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>	G	
<i>flurazepam hcl oral capsule 15 mg, 30 mg</i>	NF	
HALCION ORAL TABLET 0.25 MG (<i>triazolam</i>)	NPB	
HETLIOZ LQ ORAL SUSPENSION 4 MG/ML (<i>tasimelteon</i>)	NPSP	
HETLIOZ ORAL CAPSULE 20 MG (<i>tasimelteon</i>)	NPSP	
LUNESTA ORAL TABLET 1 MG, 2 MG, 3 MG (<i>eszopiclone</i>)	NF	
<i>midazolam hcl oral syrup 2 mg/ml</i>	G	
MIDAZOLAM+SYRSPEND SF ORAL SUSPENSION 1 MG/ML (<i>midazolam</i>)	NF	
<i>quazepam oral tablet 15 mg</i>	NF	
QUVIVIQ ORAL TABLET 25 MG, 50 MG (<i>daridorexant hcl</i>)	PB	
<i>ramelteon oral tablet 8 mg</i>	G	
ROZEREM ORAL TABLET 8 MG (<i>ramelteon</i>)	NF	
SILENOR ORAL TABLET 3 MG, 6 MG (<i>doxepin hcl</i>)	NF	
<i>temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>triazolam oral tablet 0.125 mg, 0.25 mg</i>	G	
<i>zaleplon oral capsule 10 mg, 5 mg</i>	G	
<i>zolpidem tartrate er oral tablet extended release 12.5 mg, 6.25 mg</i>	G	
<i>zolpidem tartrate oral capsule 7.5 mg</i>	NF	
<i>zolpidem tartrate oral tablet 10 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>zolpidem tartrate sublingual tablet sublingual 1.75 mg, 3.5 mg</i>	NF	
MIGRAINE - ERGOTAMINE DERIVATIVES - DRUGS TO TREAT SEVERE HEADACHES		
<i>dihydroergotamine mesylate injection solution 1 mg/ml</i>	G	
<i>dihydroergotamine mesylate nasal solution 4 mg/ml</i>	NF	
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL 2 MG (<i>ergotamine tartrate</i>)	NPB	
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	NF	
MIGERGOT RECTAL SUPPOSITORY 2-100 MG (<i>ergotamine-caffeine</i>)	NF	
TRUDHESA NASAL AEROSOL SOLUTION 0.725 MG/ACT (<i>dihydroergotamine mesylate hfa</i>)	NF	
MIGRAINE - MISCELLANEOUS - DRUGS TO TREAT SEVERE HEADACHES		
NURTEC ORAL TABLET DISPERSIBLE 75 MG (<i>rimegepant sulfate</i>)	PB	
QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG (<i>atogepant</i>)	PB	
REYVOW ORAL TABLET 100 MG, 50 MG (<i>lasmiditan succinate</i>)	NPB	
UBRELVIY ORAL TABLET 100 MG, 50 MG (<i>ubrogepant</i>)	PB	
ZAVZPRET NASAL SOLUTION 10 MG/ACT (<i>zavegepant hcl</i>)	NF	
MIGRAINE - MONOCLONAL ANTIBODIES - DRUGS TO TREAT SEVERE HEADACHES		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML (<i>erenumab-aooe</i>)	NF	
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 225 MG/1.5ML (<i>fremanezumab-vfrm</i>)	PB	
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 225 MG/1.5ML (<i>fremanezumab-vfrm</i>)	PB	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (<i>galcanezumab-gnlm</i>)	PB	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML (<i>galcanezumab-gnlm</i>)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML (<i>galcanezumab-gnlm</i>)	PB	
MIGRAINE - TRIPTANS AND COMBINATIONS - DRUGS TO TREAT SEVERE HEADACHES		
<i>almotriptan malate oral tablet 12.5 mg, 6.25 mg</i>	G	
<i>eletriptan hydrobromide oral tablet 20 mg, 40 mg</i>	G	
<i>frovatriptan succinate oral tablet 2.5 mg</i>	G	
MAXALT ORAL TABLET 10 MG (<i>rizatriptan benzoate</i>)	NF	
MAXALT-MLT ORAL TABLET DISPERSIBLE 10 MG (<i>rizatriptan benzoate</i>)	NF	
<i>naratriptan hcl oral tablet 1 mg, 2.5 mg</i>	G	
ONZETRA XSAIL NASAL EXHALER POWDER 11 MG/NOSEPC (<i>sumatriptan succinate</i>)	NF	
<i>rizatriptan benzoate oral tablet 10 mg, 5 mg</i>	G	
<i>rizatriptan benzoate oral tablet dispersible 10 mg, 5 mg</i>	G	
<i>sumatriptan nasal solution 20 mg/act, 5 mg/act</i>	G	
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	G	
<i>sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml, 6 mg/0.5ml</i>	G	
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>	G	
<i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml</i>	G	
<i>sumatriptan-naproxen sodium oral tablet 85-500 mg</i>	NF	
TOSYMRA NASAL SOLUTION 10 MG/ACT (<i>sumatriptan</i>)	PB	
TREXIMET ORAL TABLET 85-500 MG (<i>sumatriptan-naproxen sodium</i>)	NF	
ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 3 MG/0.5ML (<i>sumatriptan succinate</i>)	PB	
<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i>	G	
<i>zolmitriptan oral tablet dispersible 2.5 mg, 5 mg</i>	G	
ZOMIG NASAL SOLUTION 5 MG (<i>zolmitriptan</i>)	NPB	
<i>zolmitriptan</i> (Zomig Oral Tablet 2.5 Mg, 5 Mg)	NF	
MISCELLANEOUS		
DAYBUE ORAL SOLUTION 200 MG/ML (<i>trofinetide</i>)	NPSP	
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML (<i>satralizumab-mwge</i>)	PSP	
EVRYSDI ORAL SOLUTION RECONSTITUTED 0.75 MG/ML (<i>risdiplam</i>)	NPSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
EVRYSDI ORAL TABLET 5 MG (<i>risdiplam</i>)	NPSP	
FIRDAPSE ORAL TABLET 10 MG (<i>amifampridine phosphate</i>)	NPSP	
SKYCLARYS ORAL CAPSULE 50 MG (<i>omaveloxolone</i>)	NPSP	
ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 16.6 MG/0.416ML, 23 MG/0.574ML, 32.4 MG/0.81ML (<i>ziluoplan sodium</i>)	NF	
MOOD STABILIZERS - DRUGS TO TREAT MOOD DISORDERS		
<i>lithium carbonate er oral tablet extended release 300 mg, 450 mg</i>	G	
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>	G	
<i>lithium carbonate oral tablet 300 mg</i>	G	
LITHOBID ORAL TABLET EXTENDED RELEASE 300 MG (<i>lithium carbonate</i>)	NPB	
MOVEMENT DISORDERS		
AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG (<i>deutetrabenazine</i>)	PSP	
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 18 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG (<i>deutetrabenazine</i>)	NF	
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 12 & 18 & 24 & 30 MG (<i>deutetrabenazine</i>)	NF	
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG (<i>valbenazine tosylate</i>)	PSP	
INGREZZA ORAL CAPSULE SPRINKLE 40 MG, 60 MG, 80 MG (<i>valbenazine tosylate</i>)	PSP	
INGREZZA ORAL CAPSULE THERAPY PACK 40 & 80 MG (<i>valbenazine tosylate</i>)	PSP	
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	G	
XENAZINE ORAL TABLET 12.5 MG, 25 MG (<i>tetrabenazine</i>)	NF	
MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS		
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR 10 MG (<i>dalfampridine</i>)	NPSP	
AUBAGIO ORAL TABLET 14 MG, 7 MG (<i>teriflunomide</i>)	NF	
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT 30 MCG/0.5ML (<i>interferon beta-1a</i>)	PSP	
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML (<i>interferon beta-1a</i>)	PSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
BAFIERTAM ORAL CAPSULE DELAYED RELEASE 95 MG (<i>monomethyl fumarate</i>)	PSP	
BETASERON SUBCUTANEOUS KIT 0.3 MG (<i>interferon beta-1b</i>)	PSP	
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML (<i>glatiramer acetate</i>)	NF	
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML (<i>glatiramer acetate</i>)	PSP	
<i>dalfampridine er oral tablet extended release 12 hour 10 mg</i>	G	
<i>dimethyl fumarate oral capsule delayed release 120 mg</i>	NF	
<i>dimethyl fumarate oral capsule delayed release 240 mg</i>	G	
<i>dimethyl fumarate starter pack oral capsule delayed release therapy pack 120 & 240 mg</i>	G	
GILENYA ORAL CAPSULE 0.25 MG, 0.5 MG (<i>fingolimod hcl</i>)	NF	
<i>glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml, 40 mg/ml</i>	G	
<i>glatiramer acetate</i> (Glatopa Subcutaneous Solution Prefilled Syringe 20 Mg/ML, 40 Mg/ML)	G	
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML (<i>ofatumumab</i>)	PSP	
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	
MAYZENT ORAL TABLET 0.25 MG, 1 MG, 2 MG (<i>siponimod fumarate</i>)	PSP	
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG, 7 X 0.25 MG (<i>siponimod fumarate</i>)	PSP	
PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML (<i>peginterferon beta-1a</i>)	NPSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 63 & 94 MCG/0.5ML (<i>peginterferon beta-1a</i>)	NPSP	
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 63 & 94 MCG/0.5ML (<i>peginterferon beta-1a</i>)	NPSP	
PLEGRIDY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MCG/0.5ML (<i>peginterferon beta-1a</i>)	NPSP	
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML (<i>peginterferon beta-1a</i>)	NPSP	
PONVORY ORAL TABLET 20 MG (<i>ponesimod</i>)	NPSP	
PONVORY STARTER PACK ORAL TABLET THERAPY PACK 2-3-4-5-6-7-8-9 & 10 MG (<i>ponesimod</i>)	NPSP	
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML, 44 MCG/0.5ML (<i>interferon beta-1a</i>)	PSP	
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6X8.8 & 6X22 MCG (<i>interferon beta-1a</i>)	PSP	
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML, 44 MCG/0.5ML (<i>interferon beta-1a</i>)	PSP	
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6X8.8 & 6X22 MCG (<i>interferon beta-1a</i>)	PSP	
TASCENSO ODT ORAL TABLET DISPERSIBLE 0.25 MG, 0.5 MG (<i>fingolimod lauryl sulfate</i>)	NF	
TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG, 240 MG (<i>dimethyl fumarate</i>)	NF	
TECFIDERA ORAL CAPSULE DELAYED RELEASE THERAPY PACK 120 & 240 MG (<i>dimethyl fumarate</i>)	NF	
TYSABRI INTRAVENOUS CONCENTRATE 300 MG/15ML (<i>natalizumab</i>)	PSP	
VUMERITY ORAL CAPSULE DELAYED RELEASE 231 MG (<i>diroximel fumarate</i>)	PSP	
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK 4 X 0.23MG & 3 X 0.46MG (<i>ozanimod hcl</i>)	PSP	
ZEPOSIA ORAL CAPSULE 0.92 MG (<i>ozanimod hcl</i>)	PSP	
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG 0.92MG(21) (<i>ozanimod hcl</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
MUSCULOSKELETAL THERAPY AGENTS		
AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR 15 MG, 30 MG (<i>cyclobenzaprine hcl</i>)	NF	
<i>baclofen oral suspension 25 mg/5ml</i>	NF	
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>carisoprodol oral tablet 250 mg</i>	NF	
<i>carisoprodol oral tablet 350 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>chlorzoxazone oral tablet 250 mg, 375 mg, 500 mg, 750 mg</i>	NF	
<i>cyclobenzaprine hcl er oral capsule extended release 24 hour 15 mg, 30 mg</i>	NF	
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>	G	
<i>cyclobenzaprine hcl oral tablet 7.5 mg</i>	NF	
DANTRIUM ORAL CAPSULE 25 MG (<i>dantrolene sodium</i>)	NPB	
<i>dantrolene sodium oral capsule 100 mg, 25 mg, 50 mg</i>	G	
DUVYZAT ORAL SUSPENSION 8.86 MG/ML (<i>givinostat hcl</i>)	NF	
<i>cyclobenzaprine hcl</i> (Fexmid Oral Tablet 7.5 Mg)	NF	
FLEQSUVY ORAL SUSPENSION 25 MG/5ML (<i>baclofen</i>)	NF	
<i>metaxalone oral tablet 400 mg</i>	NF	
<i>metaxalone oral tablet 800 mg</i>	G	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	NF	
<i>norgesic forte oral tablet 50-770-60 mg</i>	NF	
<i>orphenadrine citrate er oral tablet extended release 12 hour 100 mg</i>	G	
<i>orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg</i>	NF	
ORPHENGESIC FORTE ORAL TABLET 50-770-60 MG (<i>orphenadrine-aspirin-caffeine</i>)	NF	
OZOBAX DS ORAL SOLUTION 10 MG/5ML (<i>baclofen</i>)	NF	
SOHONOS ORAL CAPSULE 1 MG, 1.5 MG, 10 MG, 2.5 MG, 5 MG (<i>palovarotene</i>)	NF	
<i>tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg</i>	G	
<i>tizanidine hcl oral tablet 2 mg, 4 mg</i>	G	
ZANAFLEX ORAL CAPSULE 8 MG (<i>tizanidine hcl</i>)	NPB	
ZANAFLEX ORAL TABLET 4 MG (<i>tizanidine hcl</i>)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
MYASTHENIA GRAVIS - DRUGS TO TREAT MYASTHENIA GRAVIS		
MESTINON ORAL SOLUTION 60 MG/5ML (<i>pyridostigmine bromide</i>)	NPB	
MESTINON ORAL TABLET 60 MG (<i>pyridostigmine bromide</i>)	NPB	
<i>pyridostigmine bromide er oral tablet extended release 180 mg</i>	G	
<i>pyridostigmine bromide oral solution 60 mg/5ml</i>	G	
<i>pyridostigmine bromide oral tablet 60 mg</i>	G	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1000-10000 MG-UNT/5ML (<i>efgartigimod alfa-hyalur-qvfc</i>)	PSP	
NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS		
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg</i>	G	
LUMRYZ ORAL PACKET 4.5 GM, 6 GM, 7.5 GM, 9 GM (<i>sodium oxybate</i>)	PSP	
LUMRYZ STARTER PACK ORAL THERAPY PACK 4.5 & 6 & 7.5 GM (<i>sodium oxybate</i>)	PSP	
<i>modafinil oral tablet 100 mg, 200 mg</i>	G	
NUVIGIL ORAL TABLET 150 MG, 200 MG, 250 MG, 50 MG (<i>armodafinil</i>)	NF	
PROVIGIL ORAL TABLET 100 MG, 200 MG (<i>modafinil</i>)	NF	
<i>sodium oxybate oral solution 500 mg/ml</i>	NF	
SUNOSI ORAL TABLET 150 MG, 75 MG (<i>solriamfetol hcl</i>)	PB	
WAKIX ORAL TABLET 17.8 MG, 4.45 MG (<i>pitolisant hcl</i>)	PSP	
XYREM ORAL SOLUTION 500 MG/ML (<i>sodium oxybate</i>)	NF	
XYWAV ORAL SOLUTION 500 MG/ML (<i>ca, mg, k, and na oxybates</i>)	PSP	
OPIOID AGONIST/ANTAGONIST		
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg</i>	G	
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg, 8-2 mg</i>	G	
SUBOXONE SUBLINGUAL FILM 12-3 MG, 2-0.5 MG, 4-1 MG, 8-2 MG (<i>buprenorphine hcl-naloxone hcl</i>)	NF	
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG, 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG (<i>buprenorphine hcl-naloxone hcl</i>)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
OPIOID ANTAGONIST		
KLOXXADO NASAL LIQUID 8 MG/0.1ML (<i>naloxone hcl</i>)	NPB	
<i>nalmefene hcl injection solution 1 mg/ml</i>	NF	
<i>naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml</i>	G	
<i>naloxone hcl injection solution cartridge 0.4 mg/ml</i>	G	
<i>naloxone hcl injection solution prefilled syringe 2 mg/2ml</i>	G	
<i>naloxone hcl nasal liquid 4 mg/0.1ml</i>	G	
<i>naltrexone hcl oral tablet 50 mg</i>	G	
NARCAN NASAL LIQUID 4 MG/0.1ML (<i>naloxone hcl</i>)	NPB	
OPVEE NASAL SOLUTION 2.7 MG/0.1ML (<i>nalmefene hcl</i>)	NF	
REXTOVY NASAL LIQUID 4 MG/0.25ML (<i>naloxone hcl</i>)	NF	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG (<i>naltrexone</i>)	NPSP	
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE 5 MG/0.5ML (<i>naloxone hcl</i>)	NF	
OPIOID PARTIAL AGONISTS		
<i>buprenorphine hcl sublingual tablet sublingual 2 mg, 8 mg</i>	G	
POSTHERPETIC NEURALGIA (PHN)		
GRALISE ORAL TABLET 300 MG, 450 MG, 600 MG, 750 MG, 900 MG (<i>gabapentin (once-daily)</i>)	PB	
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG (<i>gabapentin enacarbil</i>)	NF	
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 330 MG, 82.5 MG (<i>pregabalin</i>)	NF	
PSYCHOTHERAPEUTIC-MISC		
<i>chlordiazepoxide-amitriptyline oral tablet 10-25 mg, 5-12.5 mg</i>	G	
<i>fluoxetine hcl (pmd) oral tablet 10 mg, 20 mg</i>	NF	
LUCEMYRA ORAL TABLET 0.18 MG (<i>lofexidine hcl</i>)	NF	
NUEDEXTA ORAL CAPSULE 20-10 MG (<i>dextromethorphan- quinidine</i>)	NF	
<i>olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg</i>	G	
<i>paroxetine mesylate oral capsule 7.5 mg</i>	NF	
<i>perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg</i>	G	
<i>pimozide oral tablet 1 mg, 2 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1.75 MG/0.3ML (<i>bremelanotide acetate</i>)	NF	
SMOKING DETERRENTS		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg</i>	CE	
<i>cvs nicotine mouth/throat gum 2 mg, 4 mg</i>	CE	
<i>cvs nicotine polacrilex mouth/throat gum 2 mg, 4 mg</i>	CE	
<i>cvs nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg</i>	CE	
<i>cvs nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr</i>	CE	
<i>eq nicotine mouth/throat lozenge 4 mg</i>	CE	
<i>eq nicotine polacrilex mouth/throat gum 2 mg, 4 mg</i>	CE	
<i>eq nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg</i>	CE	
<i>eq nicotine step 3 transdermal patch 24 hour 7 mg/24hr</i>	CE	
<i>eq nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr</i>	CE	
<i>ft nicotine mini mouth/throat lozenge 2 mg, 4 mg</i>	CE	
<i>ft nicotine mouth/throat gum 2 mg, 4 mg</i>	CE	
<i>ft nicotine mouth/throat lozenge 2 mg, 4 mg</i>	CE	
<i>ft nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr</i>	CE	
<i>gnp nicotine mini mouth/throat lozenge 2 mg, 4 mg</i>	CE	
<i>gnp nicotine mouth/throat gum 4 mg</i>	CE	
<i>gnp nicotine polacrilex mouth/throat gum 2 mg, 4 mg</i>	CE	
<i>gnp nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg</i>	CE	
<i>gnp nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i>	CE	
<i>goodsense nicotine mouth/throat gum 4 mg</i>	CE	
<i>goodsense nicotine mouth/throat lozenge 4 mg</i>	CE	
HABITROL TRANSDERMAL PATCH 24 HOUR 21 MG/24HR (<i>nicotine</i>)	CE	
KLS QUIT2 MOUTH/THROAT GUM 2 MG (<i>nicotine polacrilex</i>)	CE	
KLS QUIT2 MOUTH/THROAT LOZENGE 2 MG (<i>nicotine polacrilex</i>)	CE	
KLS QUIT4 MOUTH/THROAT GUM 4 MG (<i>nicotine polacrilex</i>)	CE	
KLS QUIT4 MOUTH/THROAT LOZENGE 4 MG (<i>nicotine polacrilex</i>)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
NICORELIEF MOUTH/THROAT GUM 2 MG (<i>nicotine polacrilex</i>)	CE	
<i>nicotine mini mouth/throat lozenge 2 mg</i>	CE	
<i>nicotine polacrilex mini mouth/throat lozenge 2 mg</i>	CE	
<i>nicotine polacrilex mouth/throat gum 2 mg, 4 mg</i>	CE	
<i>nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg</i>	CE	
<i>nicotine step 1 transdermal patch 24 hour 21 mg/24hr</i>	CE	
<i>nicotine step 2 transdermal patch 24 hour 14 mg/24hr</i>	CE	
<i>nicotine step 3 transdermal patch 24 hour 7 mg/24hr</i>	CE	
<i>nicotine transdermal kit 21-14-7 mg/24hr</i>	CE	
<i>nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr</i>	CE	
NICOTROL NS NASAL SOLUTION 10 MG/ML (<i>nicotine</i>)	CE	
<i>qc nicotine transdermal system transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr</i>	CE	
<i>sm nicotine mouth/throat gum 4 mg</i>	CE	
<i>sm nicotine mouth/throat lozenge 2 mg</i>	CE	
<i>sm nicotine polacrilex mouth/throat gum 4 mg</i>	CE	
<i>sm nicotine polacrilex mouth/throat lozenge 4 mg</i>	CE	
THRIVE MOUTH/THROAT GUM 2 MG (<i>nicotine polacrilex</i>)	CE	
<i>varenicline tartrate (starter) oral tablet therapy pack 0.5 mg x 11 & 1 mg x 42</i>	CE	
<i>varenicline tartrate oral tablet 0.5 mg, 1 mg</i>	CE	
ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES		
ACROMEGALY - DRUGS TO TREAT CONDITIONS THAT CAUSE EXCESSIVE GROWTH		
BYNFEZIA PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 2500 MCG/ML (<i>octreotide acetate</i>)	NF	
<i>lanreotide acetate subcutaneous solution 120 mg/0.5ml</i>	NF	
MYCAPSSA ORAL CAPSULE DELAYED RELEASE 20 MG (<i>octreotide acetate</i>)	NF	
<i>octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	G	
<i>octreotide acetate subcutaneous solution prefilled syringe 100 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	G	
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML (<i>octreotide acetate</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 10 MG, 20 MG, 30 MG (<i>octreotide acetate</i>)	NF	
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML, 60 MG/0.2ML, 90 MG/0.3ML (<i>lanreotide acetate</i>)	PSP	
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG, 25 MG, 30 MG (<i>pegvisomant</i>)	NF	
ANDROGENS - DRUGS TO REGULATE MALE HORMONES		
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%) (<i>testosterone</i>)	NF	
<i>testosterone cypionate</i> (Depo-Testosterone Intramuscular Solution 100 Mg/ML, 200 Mg/ML)	NPB	
<i>ec-rx testosterone transdermal cream 0.2 %, 0.4 %, 10 %, 20 %</i>	NF	
JATENZO ORAL CAPSULE 158 MG, 198 MG, 237 MG (<i>testosterone undecanoate</i>)	NF	
KYZATREX ORAL CAPSULE 150 MG, 200 MG (<i>testosterone undecanoate</i>)	NF	
<i>methitest oral tablet 10 mg</i>	G	
<i>methyltestosterone oral capsule 10 mg</i>	G	
NATESTO NASAL GEL 5.5 MG/ACT (<i>testosterone</i>)	PB	
TESTIM TRANSDERMAL GEL 50 MG/5GM (1%) (<i>testosterone</i>)	NF	
TESTOPEL IMPLANT PELLETT 75 MG (<i>testosterone</i>)	NPB	
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i>	G	
<i>testosterone enanthate intramuscular solution 200 mg/ml</i>	G	
<i>testosterone transdermal gel 1.62 %, 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%)</i>	G	
<i>testosterone transdermal gel 12.5 mg/act (1%), 50 mg/5gm (1%)</i>	G	N8 (Listing does not include certain NDCs)
<i>testosterone transdermal solution 30 mg/act</i>	G	
TLANDO ORAL CAPSULE 112.5 MG (<i>testosterone undecanoate</i>)	NF	
VOGELXO PUMP TRANSDERMAL GEL 12.5 MG/ACT (1%) (<i>testosterone</i>)	NF	
VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%) (<i>testosterone</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/0.5ML, 50 MG/0.5ML, 75 MG/0.5ML (<i>testosterone enanthate</i>)	NF	
ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>miglitol oral tablet 100 mg, 25 mg, 50 mg</i>	G	
ANTIDIABETICS, BIGUANIDE		
<i>metformin hcl er (mod) oral tablet extended release 24 hour 1000 mg, 500 mg</i>	NF	
<i>metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg</i>	NF	
<i>metformin hcl er oral tablet extended release 24 hour 500 mg, 750 mg</i>	G	
<i>metformin hcl oral solution 500 mg/5ml</i>	G	
<i>metformin hcl oral tablet 1000 mg, 500 mg</i>	G	
<i>metformin hcl oral tablet 625 mg</i>	NF	
<i>metformin hcl oral tablet 850 mg</i>	CE	
RIOMET ORAL SOLUTION 500 MG/5ML (<i>metformin hcl</i>)	NF	
ANTIDIABETICS, BIGUANIDE/ SULFONYLUREA COMBINATIONS		
<i>glipizide-metformin hcl oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg</i>	G	
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR COMBINATIONS		
<i>alogliptin-metformin hcl oral tablet 12.5-1000 mg, 12.5-500 mg</i>	NF	
<i>alogliptin-pioglitazone oral tablet 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg</i>	NF	
JANUMET ORAL TABLET 50-1000 MG, 50-500 MG (<i>sitagliptin phos-metformin hcl</i>)	NF	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG (<i>sitagliptin phos-metformin hcl</i>)	NF	
JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 2.5-850 MG (<i>linagliptin-metformin hcl</i>)	NF	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG (<i>linagliptin-metformin hcl</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>sitagliptin base-metformin hcl oral tablet 50-1000 mg, 50-500 mg</i>	NF	
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 12.5-2.5-1000 MG, 25-5-1000 MG, 5-2.5-1000 MG (<i>empagliflozin-linagliptin-metform</i>)	PB	
ZITUVIMET ORAL TABLET 50-1000 MG, 50-500 MG (<i>sitagliptin base-metformin hcl</i>)	PB	
ZITUVIMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG (<i>sitagliptin base-metformin hcl</i>)	PB	
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
<i>alogliptin benzoate oral tablet 12.5 mg, 25 mg, 6.25 mg</i>	NF	
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG (<i>sitagliptin phosphate</i>)	NF	
ONGLYZA ORAL TABLET 5 MG (<i>saxagliptin hcl</i>)	NF	
<i>sitagliptin oral tablet 100 mg, 25 mg, 50 mg</i>	NF	
TRADJENTA ORAL TABLET 5 MG (<i>linagliptin</i>)	NF	
ZITUVIO ORAL TABLET 100 MG, 25 MG, 50 MG (<i>sitagliptin</i>)	PB	
ANTIDIABETICS, DOPAMINE RECEPTOR AGONISTS		
CYCLOSET ORAL TABLET 0.8 MG (<i>bromocriptine mesylate</i>)	NPB	
ANTIDIABETICS, INCRETIN MIMETIC AGENTS		
<i>exenatide subcutaneous solution pen-injector 10 mcg/0.04ml, 5 mcg/0.02ml</i>	NF	
<i>liraglutide subcutaneous solution pen-injector 18 mg/3ml</i>	G	
MOUNJARO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.5ML, 12.5 MG/0.5ML, 15 MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML (<i>tirzepatide</i>)	PB	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML (<i>semaglutide</i>)	PB	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML (<i>semaglutide</i>)	PB	
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML (<i>semaglutide</i>)	PB	
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG (<i>semaglutide</i>)	PB	
TRULICITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML (<i>dulaglutide</i>)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML (<i>liraglutide</i>)	NF	
ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS		
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-33 UNT-MCG/ML (<i>insulin glargine-lixisenatide</i>)	PB	
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-3.6 UNIT-MG/ML (<i>insulin degludec-liraglutide</i>)	PB	
ANTIDIABETICS, INSULIN		
ADMELOG INJECTION SOLUTION 100 UNIT/ML (<i>insulin lispro</i>)	NF	
AFREZZA INHALATION POWDER 12 UNIT, 4 UNIT, 8 UNIT, 90 X 4 UNIT & 90X8 UNIT, 90 X 8 UNIT & 90X12 UNIT (<i>insulin regular human</i>)	NF	
APIDRA INJECTION SOLUTION 100 UNIT/ML (<i>insulin glulisine</i>)	NF	
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin glulisine</i>)	NF	
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin glargine</i>)	NF	
BASAGLAR TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin glargine</i>)	NF	
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin aspart (w/niacinamide)</i>)	PB	
FIASP INJECTION SOLUTION 100 UNIT/ML (<i>insulin aspart (w/niacinamide)</i>)	PB	
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (<i>insulin aspart (w/niacinamide)</i>)	PB	
FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (<i>insulin aspart (w/niacinamide)</i>)	NF	
HUMALOG INJECTION SOLUTION 100 UNIT/ML (<i>insulin lispro</i>)	NF	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 UNIT/ML (<i>insulin lispro</i>)	NF	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (50-50) 100 UNIT/ML (<i>insulin lispro prot & lispro</i>)	NF	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (75-25) 100 UNIT/ML (<i>insulin lispro prot & lispro</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION (75-25) 100 UNIT/ML (<i>insulin lispro prot & lispro</i>)	NF	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (<i>insulin lispro</i>)	NF	
HUMALOG TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin lispro</i>)	NF	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (<i>insulin nph isophane & regular</i>)	NF	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (<i>insulin nph isophane & regular</i>)	NF	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML (<i>insulin nph human (isophane)</i>)	NF	
HUMULIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML (<i>insulin nph human (isophane)</i>)	NF	
HUMULIN R INJECTION SOLUTION 100 UNIT/ML (<i>insulin regular human</i>)	NF	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML (<i>insulin regular human</i>)	PB	
<i>insulin degludec flextouch subcutaneous solution pen-injector 100 unit/ml, 200 unit/ml</i>	NF	
<i>insulin degludec subcutaneous solution 100 unit/ml</i>	NF	
<i>insulin glargine max solostar subcutaneous solution pen-injector 300 unit/ml</i>	NF	
<i>insulin glargine solostar subcutaneous solution pen-injector 300 unit/ml</i>	NF	
<i>insulin glargine-yfgn subcutaneous solution 100 unit/ml</i>	PB	
<i>insulin glargine-yfgn subcutaneous solution pen-injector 100 unit/ml</i>	PB	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin glargine</i>)	PB	
LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML (<i>insulin glargine</i>)	PB	
LYUMJEV INJECTION SOLUTION 100 UNIT/ML (<i>insulin lispro-aabc</i>)	NF	
LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML (<i>insulin lispro-aabc</i>)	NF	
LYUMJEV TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin lispro-aabc</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
MYXREDLIN INTRAVENOUS SOLUTION 100-0.9 UT/100ML-% (<i>insulin regular(human) in nacl</i>)	NF	
NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (<i>insulin nph isophane & regular</i>)	NF	
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (<i>insulin nph isophane & regular</i>)	PB	
NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (<i>insulin nph isophane & regular</i>)	NF	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (<i>insulin nph isophane & regular</i>)	PB	
NOVOLIN N FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML (<i>insulin nph human (isophane)</i>)	NF	
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML (<i>insulin nph human (isophane)</i>)	PB	
NOVOLIN N RELION SUBCUTANEOUS SUSPENSION 100 UNIT/ML (<i>insulin nph human (isophane)</i>)	NF	
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML (<i>insulin nph human (isophane)</i>)	PB	
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin regular human</i>)	PB	
NOVOLIN R FLEXPEN RELION INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin regular human</i>)	NF	
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML (<i>insulin regular human</i>)	PB	
NOVOLIN R RELION INJECTION SOLUTION 100 UNIT/ML (<i>insulin regular human</i>)	NF	
NOVOLOG 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (<i>insulin aspart prot & aspart</i>)	NF	
NOVOLOG FLEXPEN RELION SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin aspart</i>)	NF	
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin aspart</i>)	PB	
NOVOLOG INJECTION SOLUTION 100 UNIT/ML (<i>insulin aspart</i>)	PB	
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (<i>insulin aspart prot & aspart</i>)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month

01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
NOVOLOG MIX 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (<i>insulin aspart prot & aspart</i>)	NF	
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (<i>insulin aspart prot & aspart</i>)	PB	
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (<i>insulin aspart</i>)	PB	
NOVOLOG RELION INJECTION SOLUTION 100 UNIT/ML (<i>insulin aspart</i>)	NF	
REZVOGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin glargine-aglr</i>)	NF	
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION 100 UNIT/ML (<i>insulin glargine-yfgn</i>)	NF	
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin glargine-yfgn</i>)	NF	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML (<i>insulin glargine</i>)	PB	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML (<i>insulin glargine</i>)	PB	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML (<i>insulin degludec</i>)	PB	
TRESIBA SUBCUTANEOUS SOLUTION 100 UNIT/ML (<i>insulin degludec</i>)	PB	
ANTIDIABETICS, INSULIN SENSITIZER		
ACTOS ORAL TABLET 15 MG, 30 MG, 45 MG (<i>pioglitazone hcl</i>)	NF	
<i>pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg</i>	G	
ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION		
<i>pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg</i>	G	
ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION		
<i>pioglitazone hcl-glimepiride oral tablet 30-2 mg, 30-4 mg</i>	G	
ANTIDIABETICS, MEGLITINIDE		
<i>nateglinide oral tablet 120 mg, 60 mg</i>	G	
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR COMBINATIONS		
<i>dapagliflozin pro-metformin er oral tablet extended release 24 hour 10-1000 mg, 5-1000 mg</i>	NF	
INVOKAMET ORAL TABLET 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG (<i>canagliflozin-metformin hcl</i>)	NF	
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG (<i>canagliflozin-metformin hcl</i>)	NF	
SEGLUROMET ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 7.5-1000 MG, 7.5-500 MG (<i>ertugliflozin-metformin hcl</i>)	NF	
SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG, 5-500 MG (<i>empagliflozin-metformin hcl</i>)	PB	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 25-1000 MG, 5-1000 MG (<i>empagliflozin-metformin hcl</i>)	PB	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 2.5-1000 MG, 5-1000 MG, 5-500 MG (<i>dapagliflozin prop-metformin</i>)	PB	
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR/DPP-4 INHIBITOR COMBINATIONS		
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG (<i>empagliflozin-linagliptin</i>)	PB	
STEGLUJAN ORAL TABLET 15-100 MG, 5-100 MG (<i>ertugliflozin-sitagliptin</i>)	NF	
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITORS		
<i>bexagliflozin oral tablet 20 mg</i>	NF	
BRENZAVVY ORAL TABLET 20 MG (<i>bexagliflozin</i>)	NF	
<i>dapagliflozin propanediol oral tablet 10 mg, 5 mg</i>	NF	
FARXIGA ORAL TABLET 10 MG, 5 MG (<i>dapagliflozin propanediol</i>)	PB	
INVOKANA ORAL TABLET 100 MG, 300 MG (<i>canagliflozin</i>)	NF	
JARDIANCE ORAL TABLET 10 MG, 25 MG (<i>empagliflozin</i>)	PB	
STEGLATRO ORAL TABLET 15 MG, 5 MG (<i>ertugliflozin l-pyrogutamicac</i>)	NF	
ANTIDIABETICS, SULFONYLUREA		
<i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>glipizide er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg</i>	G	
<i>glipizide oral tablet 10 mg, 5 mg</i>	G	
<i>glipizide oral tablet 2.5 mg</i>	NF	
<i>glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg</i>	G	
<i>glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
ANTI OBESITY		
ADIPEX-P ORAL TABLET 37.5 MG (<i>phentermine hcl</i>)	NPB	
CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR 8-90 MG (<i>naltrexone-bupropion hcl</i>)	NF	
<i>diethylpropion hcl er oral tablet extended release 24 hour 75 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>phentermine hcl</i> (Lomaira Oral Tablet 8 Mg)	G	
<i>phendimetrazine tartrate er oral capsule extended release 24 hour 105 mg</i>	NF	
PLENITY ORAL CAPSULE (<i>cellulose-citric acid</i>)	NF	
PLENITY WELCOME KIT ORAL CAPSULE (<i>cellulose-citric acid</i>)	NF	
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 11.25-69 MG, 15-92 MG, 3.75-23 MG, 7.5-46 MG (<i>phentermine-topiramate</i>)	PB	
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML (<i>liraglutide -weight management</i>)	PB	
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML, 1.7 MG/0.75ML, 2.4 MG/0.75ML (<i>semaglutide-weight management</i>)	PB	
XENICAL ORAL CAPSULE 120 MG (<i>orlistat</i>)	NF	
ZEPBOUND SUBCUTANEOUS SOLUTION 10 MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML (<i>tirzepatide-weight management</i>)	NF	
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.5ML, 12.5 MG/0.5ML, 15 MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML (<i>tirzepatide-weight management</i>)	NF	
CALCIUM RECEPTOR AGONISTS		
<i>cinacalcet hcl oral tablet 30 mg, 60 mg, 90 mg</i>	G	
SENSIPAR ORAL TABLET 30 MG, 60 MG, 90 MG (<i>cinacalcet hcl</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
CALCIUM REGULATORS, BISPHOSPHONATES - DRUGS TO TREAT BONE LOSS		
<i>alendronate sodium oral solution 70 mg/75ml</i>	G	
<i>alendronate sodium oral tablet 10 mg, 35 mg, 70 mg</i>	G	
BINOSTO ORAL TABLET EFFERVESCENT 70 MG (<i>alendronate sodium</i>)	NPB	
FOSAMAX ORAL TABLET 70 MG (<i>alendronate sodium</i>)	NPB	
FOSAMAX PLUS D ORAL TABLET 70-2800 MG-UNIT, 70-5600 MG-UNIT (<i>alendronate-cholecalciferol</i>)	NPB	
<i>ibandronate sodium oral tablet 150 mg</i>	G	
RECLAST INTRAVENOUS SOLUTION 5 MG/100ML (<i>zoledronic acid</i>)	NPSP	
<i>risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg</i>	G	
<i>risedronate sodium oral tablet delayed release 35 mg</i>	G	
<i>zoledronic acid intravenous concentrate 4 mg/5ml</i>	G	
<i>zoledronic acid intravenous solution 4 mg/100ml</i>	NPSP	
<i>zoledronic acid intravenous solution 5 mg/100ml</i>	G	
CALCIUM REGULATORS, MISCELLANEOUS		
<i>calcitonin (salmon) nasal solution 200 unit/act</i>	G	
MIACALCIN INJECTION SOLUTION 200 UNIT/ML (<i>calcitonin (salmon)</i>)	NF	
OSENVLT SUBCUTANEOUS SOLUTION 120 MG/1.7ML (<i>denosumab-bmwo</i>)	PSP	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML (<i>denosumab</i>)	PSP	
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7ML (<i>denosumab</i>)	NF	
CALCIUM REGULATORS, PARATHYROID HORMONES		
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 560 MCG/2.24ML (<i>teriparatide</i>)	NPSP	
<i>teriparatide subcutaneous solution pen-injector 560 mcg/2.24ml</i>	NF	
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR 3120 MCG/1.56ML (<i>abaloparatide</i>)	PSP	
YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR 168 MCG/0.56ML, 294 MCG/0.98ML, 420 MCG/1.4ML (<i>palopegteriparatide</i>)	NF	
CARNITINE DEFICIENCY AGENTS		
CARNITOR ORAL SOLUTION 1 GM/10ML (<i>levocarnitine</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
CARNITOR ORAL TABLET 330 MG (<i>levocarnitine</i>)	NF	
CARNITOR SF ORAL SOLUTION 1 GM/10ML (<i>levocarnitine</i>)	NF	
<i>levocarnitine oral solution 1 gm/10ml</i>	G	
<i>levocarnitine oral tablet 330 mg</i>	G	
CENTRAL PRECOCIOUS PUBERTY - DRUGS TO SUPPRESS PITUITARY HORMONES		
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG (<i>leuprolide acetate</i>)	PSP	
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG, 30 MG (<i>leuprolide acetate (3 month)</i>)	PSP	
SUPPRELIN LA SUBCUTANEOUS KIT 50 MG (<i>histrelin acetate</i>)	PSP	
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 22.5 MG (<i>triptorelin pamoate</i>)	PSP	
CHELATING AGENTS		
CHEMET ORAL CAPSULE 100 MG (<i>succimer</i>)	NPB	
CUPRIMINE ORAL CAPSULE 250 MG (<i>penicillamine</i>)	NF	
CUVRIOR ORAL TABLET 300 MG (<i>trientine tetrahydrochloride</i>)	NF	
<i>deferasirox oral tablet soluble 125 mg, 250 mg, 500 mg</i>	G	
<i>deferoxamine mesylate injection solution reconstituted 2 gm, 500 mg</i>	G	
DEPEN TITRATABS ORAL TABLET 250 MG (<i>penicillamine</i>)	NPSP	
DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG (<i>deferoxamine mesylate</i>)	NF	
EXJADE ORAL TABLET SOLUBLE 125 MG, 250 MG, 500 MG (<i>deferasirox</i>)	NF	
FERRIPROX ORAL SOLUTION 100 MG/ML (<i>deferiprone</i>)	NF	
FERRIPROX ORAL TABLET 1000 MG (<i>deferiprone</i>)	NF	
FERRIPROX TWICE-A-DAY ORAL TABLET 1000 MG (<i>deferiprone</i>)	NF	
JADENU ORAL TABLET 180 MG, 360 MG, 90 MG (<i>deferasirox</i>)	NF	
JADENU SPRINKLE ORAL PACKET 180 MG, 360 MG, 90 MG (<i>deferasirox</i>)	NF	
<i>penicillamine oral capsule 250 mg</i>	G	
SYPRINE ORAL CAPSULE 250 MG (<i>trientine hcl</i>)	NF	
<i>trientine hcl oral capsule 250 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
CONTRACEPTIVES - PRODUCTS FOR BIRTH CONTROL		
<i>levonorgestrel-ethinyl estrad</i> (Afirmelle Oral Tablet 0.1-20 Mg-Mcg)	CE	
AFTERA ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
AFTERPILL ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Altavera Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>alyacen 1/35 oral tablet 1-35 mg-mcg</i>	CE	
<i>alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>	CE	
<i>levonorgestrel-ethinyl estrad</i> (Amethyst Oral Tablet 90-20 Mcg)	CE	
ANNOVERA VAGINAL RING 0.013-0.15 MG/24HR (<i>segesterone-ethinyl estradiol</i>)	CE	
<i>desogestrel-ethinyl estradiol</i> (Apri Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>norethin-eth estrad triphasic</i> (Aranelle Oral Tablet 0.5/1/0.5-35 Mg-Mcg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Ashlyna Oral Tablet 0.15-0.03 & 0.01 Mg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Aubra Eq Oral Tablet 0.1-20 Mg-Mcg)	CE	
<i>norethindrone acet-ethinyl est</i> (Aurovela 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethindrone acet-ethinyl est</i> (Aurovela 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Aurovela 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
<i>norethin ace-eth estrad-fe</i> (Aurovela Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Aurovela Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
AVERI ORAL TABLET 0.15-0.03 MG (<i>desogestrel-eth estrad-fe</i>)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Aviane Oral Tablet 0.1-20 Mg-Mcg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Ayuna Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>desogestrel-ethinyl estradiol</i> (Azurette Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
<i>norethindrone-eth estradiol</i> (Balziva Oral Tablet 0.4-35 Mg-Mcg)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
BEYAZ ORAL TABLET 3-0.02-0.451 MG (<i>drospiren-eth estrad-levomefol</i>)	NF	
<i>norethin ace-eth estrad-fe</i> (Blisovi 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
<i>norethin ace-eth estrad-fe</i> (Blisovi Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Blisovi Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>briellyn oral tablet 0.4-35 mg-mcg</i>	CE	
<i>norethindrone</i> (Camila Oral Tablet 0.35 Mg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Camrese Lo Oral Tablet 0.1-0.02 & 0.01 Mg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Camrese Oral Tablet 0.15-0.03 & 0.01 Mg)	CE	
CAYA VAGINAL DIAPHRAGM (<i>diaphragm arc-spring</i>)	CE	
<i>norethin ace-eth estrad-fe</i> (Charlotte 24 Fe Oral Tablet Chewable 1-20 Mg-Mcg(24))	CE	
<i>levonorgestrel-ethinyl estrad</i> (Chateal Eq Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>condoms</i>	CE	
<i>norgestrel-ethinyl estradiol</i> (Cryselle-28 Oral Tablet 0.3-30 Mg-Mcg)	CE	
<i>desogestrel-ethinyl estradiol</i> (Cyred Eq Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>norethindrone-eth estradiol</i> (Dasetta 1/35 (28) Oral Tablet 1-35 Mg-Mcg)	CE	
<i>norethin-eth estrad triphasic</i> (Dasetta 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Daysee Oral Tablet 0.15-0.03 & 0.01 Mg)	CE	
<i>norethindrone</i> (Deblitane Oral Tablet 0.35 Mg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Delyla Oral Tablet 0.1-20 Mg-Mcg)	CE	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML (<i>medroxyprogesterone acetate</i>)	NPB	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 150 MG/ML (<i>medroxyprogesterone acetate</i>)	NPB	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 104 MG/0.65ML (<i>medroxyprogesterone acetate</i>)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</i>	CE	
<i>levonorgestrel-ethinyl estrad (Dolishale Oral Tablet 90-20 Mcg)</i>	CE	
<i>drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg, 3-0.03-0.451 mg</i>	CE	
<i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg</i>	CE	
ECONTRA ONE-STEP ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
<i>norgestrel-ethinyl estradiol (Elinest Oral Tablet 0.3-30 Mg-Mcg)</i>	CE	
ELLA ORAL TABLET 30 MG (<i>ulipristal acetate</i>)	CE	
<i>etonogestrel-ethinyl estradiol (Eluryng Vaginal Ring 0.12-0.015 Mg/24Hr)</i>	CE	
<i>norethindrone (Emzahh Oral Tablet 0.35 Mg)</i>	CE	
<i>etonogestrel-ethinyl estradiol (Enilloring Vaginal Ring 0.12-0.015 Mg/24Hr)</i>	CE	
<i>levonorg-eth estrad triphasic (Enpresse-28 Oral Tablet 50-30/75-40/ 125-30 Mcg)</i>	CE	
<i>desogestrel-ethinyl estradiol (Enskyce Oral Tablet 0.15-30 Mg-Mcg)</i>	CE	
<i>norethindrone (Errin Oral Tablet 0.35 Mg)</i>	CE	
<i>norgestimate-eth estradiol (Estarylla Oral Tablet 0.25-35 Mg-Mcg)</i>	CE	
<i>ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg</i>	CE	
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr</i>	CE	
<i>levonorgestrel-ethinyl estrad (Falmina Oral Tablet 0.1-20 Mg-Mcg)</i>	CE	
FC2 FEMALE CONDOM (<i>condoms - female</i>)	CE	
<i>norethin ace-eth estrad-fe (Feirza 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)</i>	CE	
<i>norethin ace-eth estrad-fe (Feirza 1/20 Oral Tablet 1-20 Mg-Mcg)</i>	CE	
FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM (<i>cervical caps</i>)	CE	
FEMLYV ORAL TABLET DISPERSIBLE 1-0.02 MG (<i>norethindrone acet-ethinyl est</i>)	CE	
<i>norethin ace-eth estrad-fe (Finzala Oral Tablet Chewable 1-20 Mg-Mcg(24))</i>	CE	
<i>norethin ace-eth estrad-fe (Gemmily Oral Capsule 1-20 Mg-Mcg(24))</i>	CE	

Prescription Drug Name	Drug Tier	Drug Notes
<i>norethindrone acet-ethinyl est</i> (Hailey 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Hailey 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
<i>norethin ace-eth estrad-fe</i> (Hailey Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Hailey Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>etonogestrel-ethinyl estradiol</i> (Haloette Vaginal Ring 0.12-0.015 Mg/24Hr)	CE	
<i>norethindrone</i> (Heather Oral Tablet 0.35 Mg)	CE	
HER STYLE ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
<i>levonorgest-eth estrad 91-day</i> (Iclevia Oral Tablet 0.15-0.03 Mg)	CE	
<i>norethindrone</i> (Incassia Oral Tablet 0.35 Mg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Introvale Oral Tablet 0.15-0.03 Mg)	CE	
<i>desogestrel-ethinyl estradiol</i> (Isibloom Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Jaimiess Oral Tablet 0.15-0.03 &0.01 Mg)	CE	
<i>drospirenone-ethinyl estradiol</i> (Jasmiel Oral Tablet 3-0.02 Mg)	CE	
<i>norethindrone</i> (Jencycla Oral Tablet 0.35 Mg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Jolessa Oral Tablet 0.15-0.03 Mg)	CE	
<i>levonorgest-eth estrad-fe bisg</i> (Joyeaux Oral Tablet 0.1-20 Mg-Mcg(21))	CE	
<i>desogestrel-ethinyl estradiol</i> (Juleber Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>norethindrone acet-ethinyl est</i> (Junel 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethindrone acet-ethinyl est</i> (Junel 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Junel Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Junel Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Junel Fe 24 Oral Tablet 1-20 Mg-Mcg(24))	CE	
<i>norethin-eth estradiol-fe</i> (Kaitlib Fe Oral Tablet Chewable 0.8-25 Mg-Mcg)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>desogestrel-ethinyl estradiol</i> (Kalliga Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>desogestrel-ethinyl estradiol</i> (Kariva Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
<i>ethynodiol diac-eth estradiol</i> (Kelnor 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Kurvelo Oral Tablet 0.15-30 Mg-Mcg)	CE	
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 19.5 MG (<i>levonorgestrel</i>)	CE	
<i>norethindrone acet-ethinyl est</i> (Larin 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethindrone acet-ethinyl est</i> (Larin 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Larin 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
<i>norethin ace-eth estrad-fe</i> (Larin Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Larin Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norethin-eth estrad triphasic</i> (Leena Oral Tablet 0.5/1/0.5-35 Mg-Mcg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Lessina Oral Tablet 0.1-20 Mg-Mcg)	CE	
<i>levonorg-eth estrad triphasic</i> (Levonest Oral Tablet 50-30/75-40/125-30 Mcg)	CE	
<i>levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 & 0.01 mg, 0.15-0.03 mg</i>	CE	
<i>levonorgest-eth estradiol-iron oral tablet 0.1-20 mg-mcg(21)</i>	CE	
<i>levonorgestrel oral tablet 1.5 mg</i>	CE	
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg, 90-20 mcg</i>	CE	
<i>levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg</i>	CE	
<i>levonorgestrel-ethinyl estrad</i> (Levora 0.15/30 (28) Oral Tablet 0.15-30 Mg-Mcg)	CE	
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY (<i>levonorgestrel</i>)	CE	
LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG / 10 MCG (<i>norethin-eth estrad-fe biphas</i>)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
<i>norethindrone acet-ethinyl est</i> (Loestrin 1.5/30 (21) Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethindrone acet-ethinyl est</i> (Loestrin 1/20 (21) Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Loestrin Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Loestrin Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Lojaimiess Oral Tablet 0.1-0.02 & 0.01 Mg)	CE	
<i>drospirenone-ethinyl estradiol</i> (Loryna Oral Tablet 3-0.02 Mg)	CE	
<i>norgestrel-ethinyl estradiol</i> (Low-Ogestrel Oral Tablet 0.3-30 Mg-Mcg)	CE	
<i>drospirenone-ethinyl estradiol</i> (Lo-Zumandimine Oral Tablet 3-0.02 Mg)	CE	
<i>norethindrone acet-ethinyl est</i> (Luizza 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethindrone acet-ethinyl est</i> (Luizza 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Lutera Oral Tablet 0.1-20 Mg-Mcg)	CE	
<i>norethindrone</i> (Lyleq Oral Tablet 0.35 Mg)	CE	
<i>norethindrone</i> (Lyza Oral Tablet 0.35 Mg)	CE	
<i>marlissa oral tablet 0.15-30 mg-mcg</i>	CE	
<i>medroxyprogesterone acetate intramuscular suspension 150 mg/ml</i>	CE	
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml</i>	CE	
<i>norethindrone</i> (Meleya Oral Tablet 0.35 Mg)	CE	
<i>norethin ace-eth estrad-fe</i> (Mibelas 24 Fe Oral Tablet Chewable 1-20 Mg-Mcg(24))	CE	
<i>norethindrone acet-ethinyl est</i> (Microgestin 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethindrone acet-ethinyl est</i> (Microgestin 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Microgestin Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Microgestin Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norgestimate-eth estradiol</i> (Mili Oral Tablet 0.25-35 Mg-Mcg)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>levonorgest-eth estradiol-iron</i> (Minzoya Oral Tablet 0.1-20 Mg-Mcg(21))	CE	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/DAY (<i>levonorgestrel</i>)	CE	
<i>norgestimate-eth estradiol</i> (Mono-Linyah Oral Tablet 0.25-35 Mg-Mcg)	CE	
MY CHOICE ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
MY WAY ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
NATAZIA ORAL TABLET 3/2-2/2-3/1 MG (<i>estradiol valerate-dienogest</i>)	CE	
<i>norethindrone-eth estradiol</i> (Necon 0.5/35 (28) Oral Tablet 0.5-35 Mg-Mcg)	CE	
<i>norethindrone-eth estradiol</i> (Necon 1/35 (28) Oral Tablet 1-35 Mg-Mcg)	CE	
NEW DAY ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
NEXPLANON SUBCUTANEOUS IMPLANT 68 MG (<i>etonogestrel</i>)	CE	
NEXTSTELLIS ORAL TABLET 3-14.2 MG (<i>drospirenone-estetrol</i>)	CE	
<i>drospirenone-ethinyl estradiol</i> (Nikki Oral Tablet 3-0.02 Mg)	CE	
<i>norethindrone</i> (Nora-Be Oral Tablet 0.35 Mg)	CE	
<i>norelgestromin-eth estradiol transdermal patch weekly 150-35 mcg/24hr</i>	CE	
<i>norethin ace-eth estrad-fe oral capsule 1-20 mg-mcg(24)</i>	CE	
<i>norethin ace-eth estrad-fe oral tablet 1.5-30 mg-mcg</i>	CE	
<i>norethin ace-eth estrad-fe oral tablet chewable 1-20 mg-mcg(24)</i>	CE	
<i>norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	CE	
<i>norethindrone oral tablet 0.35 mg</i>	CE	
<i>norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg, 0.8-25 mg-mcg</i>	CE	
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	CE	
<i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg</i>	CE	
<i>norethindrone</i> (Norlyda Oral Tablet 0.35 Mg)	CE	
<i>norethindrone</i> (Norlyroc Oral Tablet 0.35 Mg)	CE	
<i>norethindrone-eth estradiol</i> (Nortrel 0.5/35 (28) Oral Tablet 0.5-35 Mg-Mcg)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
<i>norethindrone-eth estradiol</i> (Nortrel 1/35 (21) Oral Tablet 1-35 Mg-Mcg)	CE	
<i>norethindrone-eth estradiol</i> (Nortrel 1/35 (28) Oral Tablet 1-35 Mg-Mcg)	CE	
<i>norethin-eth estrad triphasic</i> (Nortrel 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	
NUVARING VAGINAL RING 0.12-0.015 MG/24HR (<i>etonogestrel-ethinyl estradiol</i>)	NF	
<i>norethindrone-eth estradiol</i> (Nylia 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	
<i>norethin-eth estrad triphasic</i> (Nylia 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	
OMNIFLEX DIAPHRAGM VAGINAL DIAPHRAGM (<i>diaphragms</i>)	CE	
OPCICON ONE-STEP ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
OPILL ORAL TABLET 0.075 MG (<i>norgestrel</i>)	CE	
OPTION 2 ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
<i>norethindrone</i> (Orquidea Oral Tablet 0.35 Mg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Orsythia Oral Tablet 0.1-20 Mg-Mcg)	CE	
PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE (<i>copper</i>)	CE	
<i>norethindrone-eth estradiol</i> (Philith Oral Tablet 0.4-35 Mg-Mcg)	CE	
<i>desogestrel-ethinyl estradiol</i> (Pimtrea Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
<i>norethin-eth estrad triphasic</i> (Pirmella 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Portia-28 Oral Tablet 0.15-30 Mg-Mcg)	CE	
REACT ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
<i>desogestrel-ethinyl estradiol</i> (Reclipsen Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>levonorgest-eth estrad 91-day</i> (Rivelsa Oral Tablet 42-21-21-7 Days)	CE	
SAFYRAL ORAL TABLET 3-0.03-0.451 MG (<i>drospiren-eth estrad-levomefol</i>)	NPB	
<i>levonorgest-eth estrad 91-day</i> (Setlakin Oral Tablet 0.15-0.03 Mg)	CE	
<i>norethindrone</i> (Sharobel Oral Tablet 0.35 Mg)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>desogestrel-ethinyl estradiol</i> (Simliya Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
<i>levonorgest-eth estrad 91-day</i> (Simpesse Oral Tablet 0.15-0.03 &0.01 Mg)	CE	
SKYLA INTRAUTERINE INTRAUTERINE DEVICE 13.5 MG (<i>levonorgestrel</i>)	CE	
SLYND ORAL TABLET 4 MG (<i>drospirenone</i>)	CE	
<i>desogestrel-ethinyl estradiol</i> (Solia Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>norgestimate-eth estradiol</i> (Sprintec 28 Oral Tablet 0.25-35 Mg-Mcg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Sronyx Oral Tablet 0.1-20 Mg-Mcg)	CE	
<i>drospirenone-ethinyl estradiol</i> (Syeda Oral Tablet 3-0.03 Mg)	CE	
TAKE ACTION ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
<i>norethin ace-eth estrad-fe</i> (Tarina 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
<i>norethin ace-eth estrad-fe</i> (Tarina Fe 1/20 Eq Oral Tablet 1-20 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Taysofy Oral Capsule 1-20 Mg-Mcg(24))	CE	
TAYTULLA ORAL CAPSULE 1-20 MG-MCG(24) (<i>norethin ace-eth estrad-fe</i>)	NF	
<i>norethindron-ethinyl estrad-fe</i> (Tilia Fe Oral Tablet 1-20/1-30/1-35 Mg-Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri Femynor Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Estarylla Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
<i>norethindron-ethinyl estrad-fe</i> (Tri-Legest Fe Oral Tablet 1-20/1-30/1-35 Mg-Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Linyah Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Lo-Estarylla Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Lo-Marzia Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Lo-Mili Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Lo-Sprintec Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>norgestim-eth estrad triphasic</i> (Tri-Mili Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Trinessa (28) Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Sprintec Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
<i>levonorg-eth estrad triphasic</i> (Trivora (28) Oral Tablet 50-30/75-40/ 125-30 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Vylibra Lo Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
<i>norgestim-eth estrad triphasic</i> (Tri-Vylibra Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
<i>norgestrel-ethinyl estradiol</i> (Turqoz Oral Tablet 0.3-30 Mg-Mcg)	CE	
TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24HR (<i>levonorgestrel-eth estradiol</i>)	CE	
TYBLUME ORAL TABLET CHEWABLE 0.1-20 MG-MCG (<i>levonorgestrel-ethinyl estrad</i>)	CE	
<i>drospiren-eth estrad-levomefol</i> (Tydemy Oral Tablet 3-0.03-0.451 Mg)	CE	
<i>ethynodiol diac-eth estradiol</i> (Valtya 1/50 Oral Tablet 1-50 Mg-Mcg)	CE	
VELIVET ORAL TABLET 0.1/0.125/0.15 -0.025 MG (<i>desogestrel-ethinyl estradiol</i>)	CE	
<i>drospirenone-ethinyl estradiol</i> (Vestura Oral Tablet 3-0.02 Mg)	CE	
<i>levonorgestrel-ethinyl estrad</i> (Vienva Oral Tablet 0.1-20 Mg-Mcg)	CE	
<i>viorele oral tablet 0.15-0.02/0.01 mg (21/5)</i>	CE	
<i>desogestrel-ethinyl estradiol</i> (Volnea Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
<i>norethindrone-eth estradiol</i> (Vyfemla Oral Tablet 0.4-35 Mg-Mcg)	CE	
<i>norgestimate-eth estradiol</i> (Vylibra Oral Tablet 0.25-35 Mg-Mcg)	CE	
<i>norethindrone-eth estradiol</i> (Wera Oral Tablet 0.5-35 Mg-Mcg)	CE	
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	
WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	
WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	
WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	
WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	
WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	
WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	
<i>norethin-eth estradiol-fe</i> (Wymzya Fe Oral Tablet Chewable 0.4-35 Mg-Mcg)	CE	
<i>norethindron-ethinyl estrad-fe</i> (Xarah Fe Oral Tablet 1-20/1-30/1-35 Mg-Mcg)	CE	
<i>norethin-eth estradiol-fe</i> (Xelria Fe Oral Tablet Chewable 0.4-35 Mg-Mcg)	CE	
<i>norelgestromin-eth estradiol</i> (Xulane Transdermal Patch Weekly 150-35 Mcg/24Hr)	CE	
YASMIN 28 ORAL TABLET 3-0.03 MG (<i>drospirenone-ethinyl estradiol</i>)	NF	
YAZ ORAL TABLET 3-0.02 MG (<i>drospirenone-ethinyl estradiol</i>)	NF	
<i>norelgestromin-eth estradiol</i> (Zafemy Transdermal Patch Weekly 150-35 Mcg/24Hr)	CE	
<i>ethynodiol diac-eth estradiol</i> (Zovia 1/35 (28) Oral Tablet 1-35 Mg-Mcg)	CE	
<i>drospirenone-ethinyl estradiol</i> (Zumandimine Oral Tablet 3-0.03 Mg)	CE	
CORTISOL SYNTHESIS INHIBITORS		
ISTURISA ORAL TABLET 1 MG, 5 MG (<i>osilodrostat phosphate</i>)	NF	
RECORLEV ORAL TABLET 150 MG (<i>levoketoconazole</i>)	NF	
DIABETIC SUPPLIES		
12-PANEL POC TOXICOLOGY SYSTEM IN VITRO KIT (<i>drug assay (urine)</i>)	NPB	
<i>1st tier unifine pentips 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 32g x 6 mm , 33g x 4 mm</i>	NF	
<i>1st tier unifine pentips plus 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 33g x 4 mm</i>	NF	
ACCU-CHEK AVIVA PLUS IN VITRO STRIP (<i>glucose blood</i>)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month

01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
ACCU-CHEK AVIVA PLUS KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	PB	
ACCU-CHEK FASTCLIX LANCET KIT (<i>lancets misc.</i>)	PB	
ACCU-CHEK FASTCLIX LANCETS (<i>lancets</i>)	PB	
ACCU-CHEK GUIDE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	PB	
ACCU-CHEK GUIDE ME KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	PB	
ACCU-CHEK GUIDE TEST IN VITRO STRIP (<i>glucose blood</i>)	PB	
ACCU-CHEK LINKASSIST (<i>insulin pump accessories</i>)	NPB	
ACCU-CHEK PLASTIC CARTRIDGE (<i>insulin infusion pump supplies</i>)	NPB	
ACCU-CHEK SAFE-T PRO LANCETS (<i>lancets</i>)	PB	
ACCU-CHEK SMARTVIEW IN VITRO STRIP (<i>glucose blood</i>)	PB	
ACCU-CHEK SOFTCLIX LANCET DEV KIT (<i>lancets misc.</i>)	PB	
ACCU-CHEK SOFTCLIX LANCETS (<i>lancets</i>)	PB	
ACCU-CHEK ULTRAFLEX INF SET (<i>insulin infusion pump supplies</i>)	NPB	
ACCU-CHEK ULTRAFLEX-1 INF SET (<i>insulin infusion pump supplies</i>)	NPB	
ACCUTREND GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>acti-lance 28g</i>	NPB	
<i>acti-lance lite lancets 28g</i>	NPB	
<i>acti-lance special lancets 17g</i>	NPB	
<i>acti-lance universal 23g</i>	NPB	
<i>adjustable lancing device</i>	NPB	
ADVANCE INTUITION METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ADVANCE INTUITION MONITOR KIT (<i>blood glucose monitoring suppl</i>)	NF	
ADVANCE INTUITION TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ADVANCE MICRO-DRAW METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ADVANCE MICRO-DRAW TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>advanced mobile lancet</i>	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
ADVOCATE BLOOD GLUCOSE MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ADVOCATE BLOOD GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ADVOCATE INSULIN PEN NEEDLE 32G X 4 MM (<i>insulin pen needle</i>)	NF	
ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM , 31G X 5 MM , 31G X 8 MM , 33G X 4 MM (<i>insulin pen needle</i>)	NF	
ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
ADVOCATE LANCETS (<i>lancets</i>)	NPB	
ADVOCATE LANCETS 30G (<i>lancets</i>)	NPB	
ADVOCATE LANCING DEVICE (<i>lancet devices</i>)	NPB	
ADVOCATE RAPID-SAFE LANCING (<i>lancet devices</i>)	NPB	
ADVOCATE REDI-CODE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ADVOCATE REDI-CODE IN VITRO STRIP (<i>glucose blood</i>)	NF	
ADVOCATE REDI-CODE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ADVOCATE REDI-CODE+ DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ADVOCATE REDI-CODE+ TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ADVOCATE SAFETY LANCETS (<i>lancets</i>)	NPB	
ADVOCATE SAFETY LANCETS 26G (<i>lancets</i>)	NPB	
ADVOCATE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
AGAMATRIX AMP TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
AGAMATRIX CONTROL LEVEL 2 IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
AGAMATRIX CONTROL LEVEL 4 IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
AGAMATRIX JAZZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
AGAMATRIX JAZZ WIRELESS 2 KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
AGAMATRIX PRESTO KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
AGAMATRIX PRESTO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
AGAMATRIX ULTRA-THIN LANCETS (<i>lancets</i>)	NPB	
<i>aimsco twist lancets 32g</i>	NPB	
AIMSCO TWIST LANCETS 33G (<i>lancets</i>)	NPB	
<i>aq insulin syringe 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
<i>aqinject pen needle 31g x 5 mm , 32g x 4 mm</i>	NF	
AQUALANCE LANCETS 30G (<i>lancets</i>)	NPB	
ASSURE 3 METER KIT (<i>blood glucose monitoring suppl</i>)	NF	
ASSURE 3 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE 4 METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ASSURE 4 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>assure comfort lancets 28g</i>	NPB	
ASSURE ID DUO PRO PEN NEEDLES 31G X 5 MM (<i>insulin pen needle</i>)	NF	
ASSURE ID PRO PEN NEEDLES 30G X 5 MM (<i>insulin pen needle</i>)	NF	
ASSURE ID SAFETY PEN NEEDLES 30G X 8 MM (<i>insulin pen needle</i>)	NF	
ASSURE II CHECK IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE II IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE LANCE LANCETS (<i>lancets</i>)	NPB	
ASSURE LANCE LANCETS 21G (<i>lancets</i>)	NPB	
ASSURE LANCE PLUS SAFETY 25G (<i>lancets</i>)	NPB	
ASSURE LANCE PLUS SAFETY 30G (<i>lancets</i>)	NPB	
ASSURE LANCE SAFETY LANCET 28G (<i>lancets</i>)	NPB	
ASSURE PLATINUM IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE PLATINUM METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ASSURE PRISM MULTI TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE PRO BLOOD GLUCOSE METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ASSURE PRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>aum insulin safety pen needle 31g x 4 mm , 31g x 5 mm</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>aum mini insulin pen needle 32g x 4 mm , 32g x 5 mm , 32g x 6 mm , 32g x 8 mm , 33g x 4 mm , 33g x 5 mm , 33g x 6 mm</i>	NF	
<i>aum pen needle 32g x 4 mm , 32g x 5 mm , 32g x 6 mm , 33g x 4 mm , 33g x 5 mm , 33g x 6 mm</i>	NF	
AUM READYGARD DUO PEN NEEDLE 32G X 4 MM (<i>insulin pen needle</i>)	NF	
AUM SAFETY PEN NEEDLE 31G X 4 MM , 31G X 5 MM (<i>insulin pen needle</i>)	NF	
<i>aurora lancet super thin 30g</i>	NPB	
<i>aurora lancet thin 23g</i>	NPB	
<i>aurora pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm</i>	NF	
AUTO-LANCET (<i>lancet devices</i>)	NPB	
AUTO-LANCET MINI (<i>lancet devices</i>)	NPB	
AUTOLET II CLINISAFE KIT (<i>lancets misc.</i>)	NPB	
AUTOLET LANCING DEVICE (<i>lancet devices</i>)	NPB	
AUTOLET LITE CLINISAFE KIT (<i>lancets misc.</i>)	NPB	
AUTOLET LITE STARTER PACK KIT (<i>lancets misc.</i>)	NPB	
AUTOLET MINI (<i>lancet devices</i>)	NPB	
AUTOLET PLATFORMS (<i>lancets misc.</i>)	NPB	
AUTOLET PLUS (<i>lancet devices</i>)	NPB	
AUTOSOFT 30 INFUSION SET (<i>insulin infusion pump supplies</i>)	NPB	
AUTOSOFT 90 INFUSION SET (<i>insulin infusion pump supplies</i>)	NPB	
AUTOSOFT XC INFUSION SET (<i>insulin infusion pump supplies</i>)	NPB	
BD INSULIN SYRINGE 27.5G X 5/8" 2 ML, 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	PB	
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	PB	
BD INSULIN SYRINGE U-100 1 ML (<i>insulin syringes (disposable)</i>)	PB	
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML (<i>insulin syringe/needle u-500</i>)	PB	
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	PB	
BD LATITUDE DIABETES KIT (<i>blood glucose monitoring suppl</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
BD LOGIC BLOOD GLUCOSE MONITOR KIT W/DEVICE (blood glucose monitoring suppl)	NF	
BD MICROTAINER LANCETS (lancets)	NPB	
BD PEN NEEDLE MICRO ULTRAFINE 32G X 6 MM (insulin pen needle)	PB	
BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM (insulin pen needle)	PB	
BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM (insulin pen needle)	PB	
BD PEN NEEDLE NANO ULTRAFINE 32G X 4 MM (insulin pen needle)	PB	
BD PEN NEEDLE ORIG ULTRAFINE 29G X 12.7MM (insulin pen needle)	PB	
BD PEN NEEDLE SHORT ULTRAFINE 31G X 8 MM (insulin pen needle)	PB	
BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML, 31G X 15/64" 0.3 ML (insulin syringe-needle u-100)	PB	
BD VEO INSULIN SYR U/F 1/2UNIT 31G X 15/64" 0.3 ML (insulin syringe-needle u-100)	PB	
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML (insulin syringe-needle u-100)	PB	
BIOTEL CARE BLOOD GLUCOSE KIT W/DEVICE (blood glucose monitoring suppl)	NF	
BIOTEL CARE BLOOD GLUCOSE SYST KIT W/DEVICE (blood glucose monitoring suppl)	NF	
BIOTEL CARE TEST STRIPS IN VITRO STRIP (glucose blood)	NF	
blood glucose monitor system kit w/device	NF	
blood glucose monitoring 333 device	NF	
blood glucose system pak kit	NF	
blood glucose test in vitro strip	NF	
blood glucose test strips 333 in vitro strip	NF	
BLULINK CONTROL HIGH & LOW IN VITRO LIQUID (blood glucose calibration)	NPB	
CARDIOCOM LANCING DEVICE (lancet devices)	NPB	
CAREFINE PEN NEEDLES 29G X 12MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM (insulin pen needle)	NF	
careone advanced lancing dev	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>careone insulin syringe 30g x 1/2" 0.3 ml, 30g x 1/2" 0.5 ml, 30g x 1/2" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
CAREONE LANCET SUPER THIN 30G (<i>lancets</i>)	NPB	
<i>careone lancet thin 23g</i>	NPB	
<i>careone unifine pentips plus 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 33g x 4 mm</i>	NF	
CARESENS LANCETS (<i>lancets</i>)	NPB	
CARESENS LANCETS 30G (<i>lancets</i>)	NPB	
CARESENS N FELIZ BT DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CARESENS N FELIZ DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CARESENS N GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CARESENS N GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CARESENS N VOICE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CARESENS S FIT BLOOD GLUC MON DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CARESENS S FIT BT BLOOD GLUC DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CARESENS S GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CARETOUCH CONTROL SOL LEVEL 2 IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
CARETOUCH INSULIN SYRINGE 28G X 5/16" 1 ML, 29G X 5/16" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
CARETOUCH LANCING/EJECTOR (<i>lancet devices</i>)	NPB	
CARETOUCH MONITOR SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CARETOUCH PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 33G X 4 MM (<i>insulin pen needle</i>)	NF	
CARETOUCH SAFETY LANCETS (<i>lancets</i>)	NPB	
CARETOUCH SAFETY LANCETS 26G (<i>lancets</i>)	NPB	
CARETOUCH TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CARETOUCH TWIST LANCETS 28G (<i>lancets</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
CARETOUCH TWIST LANCETS 30G (<i>lancets</i>)	NPB	
CARETOUCH TWIST LANCETS 33G (<i>lancets</i>)	NPB	
CARETOUCH TWIST MC LANCETS 30G (<i>lancets</i>)	NPB	
CHEMSTRIP K IN VITRO STRIP (<i>acetone (urine) test</i>)	NPB	
CHEMSTRIP UGK IN VITRO STRIP (<i>urine glucose-ketones test</i>)	NPB	
CLEANLET LANCETS 28G (<i>lancets</i>)	NPB	
CLEVER CHEK AUTO-CODE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHEK AUTO-CODE VOICE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHEK LANCETS (<i>lancets</i>)	NPB	
CLEVER CHEK SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CLEVER CHEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHOICE AUTO-CODE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHOICE COMFORT EZ (<i>lancets</i>)	NPB	
CLEVER CHOICE COMFORT EZ 29G X 12MM , 33G X 4 MM (<i>insulin pen needle</i>)	NF	
CLEVER CHOICE LANCETS 21G (<i>lancets</i>)	NPB	
CLEVER CHOICE LANCETS 23G (<i>lancets</i>)	NPB	
CLEVER CHOICE LANCETS 28G (<i>lancets</i>)	NPB	
CLEVER CHOICE MICRO SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CLEVER CHOICE MICRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHOICE MINI SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CLEVER CHOICE NO CODING IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHOICE TALK SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP (<i>glucose blood</i>)	NF	
COAGUCHEK LANCETS (<i>lancets</i>)	NPB	
<i>comfort assured lancets 28g</i>	NPB	
<i>comfort assured lancets 33g</i>	NPB	
COMFORT EZ INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
COMFORT EZ MICRO PEN NEEDLES 32G X 4 MM (<i>insulin pen needle</i>)	NF	
COMFORT EZ PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM , 33G X 8 MM (<i>insulin pen needle</i>)	NF	
COMFORT EZ PRO PEN NEEDLES 30G X 8 MM , 31G X 4 MM , 31G X 5 MM (<i>insulin pen needle</i>)	NF	
COMFORT EZ SHORT PEN NEEDLES 31G X 8 MM (<i>insulin pen needle</i>)	NF	
COMFORT TOUCH INSULIN PEN NEED 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM (<i>insulin pen needle</i>)	NF	
COMFORT TOUCH LANCETS 31G (<i>lancets</i>)	NPB	
COMFORT TOUCH PLUS LANCETS 28G (<i>lancets</i>)	NPB	
COMFORT TOUCH PLUS LANCETS 30G (<i>lancets</i>)	NPB	
CONTOUR MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CONTOUR NEXT EZ KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CONTOUR NEXT GEN MONITOR KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CONTOUR NEXT LINK KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CONTOUR NEXT MONITOR KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CONTOUR NEXT ONE KIT , W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
CONTOUR NEXT TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CONTOUR PLUS BLUE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CONTOUR PLUS TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CONTOUR TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
COOL BLOOD GLUCOSE TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NF	
COOL MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
COOL MONITOR KIT KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
CVS ADVANCED GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>cvs glucose meter test strips in vitro strip</i>	NF	
CVS KETONE CARE IN VITRO STRIP (<i>urine glucose-ketones test</i>)	NPB	
<i>cvs lancets original</i>	NPB	
<i>cvs lancets thin 26g</i>	NPB	
<i>cvs lancing device</i>	NPB	
<i>cvs true metrix glucose test in vitro strip</i>	NF	
<i>cvs ultra thin lancets</i>	NPB	
D-CARE BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
D-CARE GLUCOMETER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
DEXCOM G6 RECEIVER DEVICE (<i>continuous glucose receiver</i>)	PB	
DEXCOM G6 SENSOR (<i>continuous glucose sensor</i>)	PB	
DEXCOM G6 TRANSMITTER (<i>continuous glucose transmitter</i>)	PB	
DEXCOM G7 15 DAY SENSOR (<i>continuous glucose sensor</i>)	PB	
DEXCOM G7 RECEIVER DEVICE (<i>continuous glucose receiver</i>)	PB	
DEXCOM G7 SENSOR (<i>continuous glucose sensor</i>)	PB	
DIASTIX IN VITRO STRIP (<i>glucose urine test-glucose ox</i>)	NPB	
DIATHRIVE BLOOD GLUCOSE METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
DIATHRIVE GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
DIATHRIVE LANCET ULTRA THIN 30 (<i>lancets</i>)	NPB	
DIATHRIVE LANCETS (<i>lancets</i>)	NPB	
DIATHRIVE LANCING DEVICE (<i>lancet devices</i>)	NPB	
DIATHRIVE PEN NEEDLE 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
DIATHRIVE+ GLUCOSE MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
DIATHRIVE+ GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
DROPLET GENTEEL LANCING DEVICE (<i>lancet devices</i>)	NPB	
DROPLET INSULIN SYRINGE 30G X 15/64" 0.3 ML, 30G X 15/64" 0.5 ML, 30G X 15/64" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
DROPLET LANCETS ULTRA THIN 30G (<i>lancets</i>)	NPB	
DROPLET LANCING DEVICE (<i>lancet devices</i>)	NPB	
DROPLET MICRON 34G X 3.5 MM (<i>insulin pen needle</i>)	NF	
DROPLET PERSONAL LANCETS 30G (<i>lancets</i>)	NPB	
<i>dropsafe safety pen needles 31g x 5 mm , 31g x 6 mm , 31g x 8 mm</i>	NF	
DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
DRUG MART ON-THE-GO LANCET 30G (<i>lancets</i>)	NPB	
<i>drug mart unifine pentips 29g x 12mm , 31g x 6 mm , 31g x 8 mm</i>	NF	
<i>drug mart unifine pentips plus 32g x 4 mm</i>	NF	
DRUG MART UNILET LANCETS 28G (<i>lancets</i>)	NPB	
DRUG MART UNILET LANCETS 30G (<i>lancets</i>)	NPB	
DRUG MART UNILET LANCETS 33G (<i>lancets</i>)	NPB	
DUO-CARE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>easy comfort insulin syringe 29g x 5/16" 0.5 ml, 29g x 5/16" 1 ml, 30g x 1/2" 0.5 ml, 30g x 1/2" 1 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 1/2" 0.3 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml, 32g x 5/16" 0.5 ml, 32g x 5/16" 1 ml</i>	NF	
<i>easy comfort lancets</i>	NPB	
<i>easy comfort lancets twist top</i>	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
<i>easy comfort pen needles 29g x 4mm , 29g x 5mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 33g x 4 mm , 33g x 5 mm , 33g x 6 mm</i>	NF	
<i>easy glide pen needles 33g x 4 mm</i>	NF	
EASY MAX BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EASY MAX T1 GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
<i>easy mini eject lancing device</i>	NPB	
<i>easy mini lancing device</i>	NPB	
<i>easy plus ii glucose system device</i>	NF	
<i>easy plus ii glucose test in vitro strip</i>	NF	
EASY STEP GLUCOSE MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
EASY STEP TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>easy talk blood glucose system device</i>	NF	
<i>easy talk blood glucose test in vitro strip</i>	NF	
<i>easy talk plus ii test strips in vitro strip</i>	NF	
EASY TOUCH FLIPLOCK INSULIN SY 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 1 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
EASY TOUCH GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
EASY TOUCH HEALTHPRO GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML (<i>insulin syringe-needle u-100</i>)	NF	
EASY TOUCH INSULIN SYRINGE 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
EASY TOUCH LANCETS 21G (<i>lancets</i>)	NPB	
EASY TOUCH LANCETS 23G (<i>lancets</i>)	NPB	
EASY TOUCH LANCETS 26G (<i>lancets</i>)	NPB	
EASY TOUCH LANCETS 28G (<i>lancets</i>)	NPB	
EASY TOUCH LANCETS 28G/TWIST (<i>lancets</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
EASY TOUCH LANCETS 30G (<i>lancets</i>)	NPB	
EASY TOUCH LANCETS 30G/TWIST (<i>lancets</i>)	NPB	
EASY TOUCH LANCETS 32G (<i>lancets</i>)	NPB	
EASY TOUCH LANCETS 32G/TWIST (<i>lancets</i>)	NPB	
EASY TOUCH LANCETS 33G/TWIST (<i>lancets</i>)	NPB	
EASY TOUCH LANCING DEVICE (<i>lancet devices</i>)	NPB	
EASY TOUCH PEN NEEDLES 29G X 12MM , 30G X 8 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
EASY TOUCH SAFETY LANCETS 21G (<i>lancets</i>)	NPB	
EASY TOUCH SAFETY LANCETS 23G (<i>lancets</i>)	NPB	
EASY TOUCH SAFETY LANCETS 26G (<i>lancets</i>)	NPB	
EASY TOUCH SAFETY LANCETS 28G (<i>lancets</i>)	NPB	
EASY TOUCH SAFETY PEN NEEDLES 29G X 5MM , 29G X 8MM , 30G X 8 MM (<i>insulin pen needle</i>)	NF	
EASY TOUCH SHEATHLOCK SYRINGE 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 1 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
EASY TOUCH TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>easy trak blood glucose system device</i>	NF	
<i>easy trak blood glucose test in vitro strip</i>	NF	
<i>easy trak ii blood glucose sys device</i>	NF	
<i>easy trak ii glucose test in vitro strip</i>	NF	
EASYGLUCO IN VITRO STRIP (<i>glucose blood</i>)	NF	
EASYGLUCO KIT (<i>blood glucose monitoring suppl</i>)	NF	
EASYMAX 15 LEVEL 2-3 CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
EASYMAX 15 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EASYMAX CONTROL NORMAL/HIGH IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
EASYMAX NG BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
EASYMAX NG BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
EASYMAX TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EASYMAX V BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
EASYPRO BLOOD GLUCOSE MONITOR KIT W/DEVICE (blood glucose monitoring suppl)	NF	
EASYPRO BLOOD GLUCOSE TEST IN VITRO STRIP (glucose blood)	NF	
EASYPRO PLUS IN VITRO STRIP (glucose blood)	NF	
EASYPRO PLUS KIT W/DEVICE (blood glucose monitoring suppl)	NF	
ELEMENT AUTOCODE SYSTEM KIT W/DEVICE (blood glucose monitoring suppl)	NF	
element compact glucose system device	NF	
element compact test in vitro strip	NF	
element compact v glucose sys device	NF	
ELEMENT PLUS DEVICE (blood glucose monitoring suppl)	NF	
ELEMENT TEST IN VITRO STRIP (glucose blood)	NF	
EMBECTA AUTOSHIELD DUO 30G X 5 MM (insulin pen needle)	PB	
EMBECTA INS SYR U/F 1/2 UNIT 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML (insulin syringe-needle u-100)	PB	
EMBECTA INSULIN SYR ULTRAFINE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (insulin syringe-needle u-100)	PB	
EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML (insulin syringe/needle u-500)	PB	
EMBECTA PEN NEEDLE NANO 2 GEN 32G X 4 MM (insulin pen needle)	PB	
EMBECTA PEN NEEDLE NANO 32G X 4 MM (insulin pen needle)	PB	
EMBECTA PEN NEEDLE ULTRAFINE 29G X 12.7MM , 31G X 5 MM , 31G X 8 MM , 32G X 6 MM (insulin pen needle)	PB	
EMBRACE BLOOD GLUCOSE MONITOR DEVICE (blood glucose monitoring suppl)	NF	
EMBRACE BLOOD GLUCOSE TEST IN VITRO STRIP (glucose blood)	NF	
EMBRACE EVO BLOOD GLUCOSE TEST IN VITRO STRIP (glucose blood)	NF	
EMBRACE EVO GLUCOSE MONITOR DEVICE (blood glucose monitoring suppl)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
EMBRACE EVO GLUCOSE MONITORING KIT W/DEVICE (blood glucose monitoring suppl)	NF	
EMBRACE LANCETS ULTRA THIN 30G (lancets)	NPB	
EMBRACE PEN NEEDLES 29G X 12MM , 30G X 5 MM , 30G X 8 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (insulin pen needle)	NF	
EMBRACE PRESSURE ACTIVATED 21G (lancets)	NPB	
EMBRACE PRESSURE ACTIVATED 28G (lancets)	NPB	
EMBRACE PRO GLUCOSE METER DEVICE (blood glucose monitoring suppl)	NF	
EMBRACE PRO GLUCOSE TEST IN VITRO STRIP (glucose blood)	NF	
EMBRACE TALK BLOOD GLUCOSE DEVICE (blood glucose monitoring suppl)	NF	
EMBRACE TALK GLUCOSE TEST IN VITRO STRIP (glucose blood)	NF	
EMBRACE TALK MONITORING SYSTEM KIT W/DEVICE (blood glucose monitoring suppl)	NF	
EMBRACE WAVE BLOOD GLUCOSE DEVICE (blood glucose monitoring suppl)	NF	
EMBRACE WAVE BLOOD GLUCOSE IN VITRO STRIP (glucose blood)	NF	
EMBRACE WAVE GLUCOSE METER DEVICE (blood glucose monitoring suppl)	NF	
ENLITE GLUCOSE SENSOR (continuous glucose sensor)	NF	
ENLITE SERTER (insulin infusion pump supplies)	NPB	
eq blood glucose test in vitro strip	NF	
EVERSENSE 365 SENSOR/HOLDER (continuous glucose sensor)	NF	
EVERSENSE 365 SMART TRANSMIT (continuous glucose transmitter)	NF	
EVERSENSE SENSOR/HOLDER (continuous glucose sensor)	NF	
EVERSENSE SMART TRANSMITTER (continuous glucose transmitter)	NF	
EVOLUTION AUTOCODE DEVICE (blood glucose monitoring suppl)	NF	
EVOLUTION AUTOCODE IN VITRO STRIP (glucose blood)	NF	
EZ-LETS LANCETS 21G (lancets)	NPB	
EZ-LETS LANCETS 26G (lancets)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
EZ-LETS LANCETS 28G (<i>lancets</i>)	NPB	
EZ-LETS LANCETS 30G (<i>lancets</i>)	NPB	
FIFTY50 GLUCOSE METER 2.0 KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FIFTY50 GLUCOSE TEST 2.0 IN VITRO STRIP (<i>glucose blood</i>)	NF	
FIFTY50 PEN NEEDLES 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
FIFTY50 SAFETY SEAL LANCETS (<i>lancets</i>)	NPB	
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
FIFTY50 UNILET LANCETS 33G (<i>lancets</i>)	NPB	
FINGERSTIX LANCETS (<i>lancets</i>)	NPB	
FORA 6 CONNECT IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA 6 CONNECT/GTEL TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA D40/G31 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA G20 BLOOD GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA G20 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA G30A BLOOD GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA GD20 BLOOD GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA GD20 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA GD50 BLOOD GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA GD50 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA GTEL BLOOD KETONE TEST IN VITRO STRIP (<i>ketone blood test</i>)	NPB	
FORA LANCETS (<i>lancets</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
FORA LANCING DEVICE (<i>lancet devices</i>)	NPB	
FORA PREMIUM V10 BLE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA TEST N' GO MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA TN'G ADVANCE PRO IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA TN'G VOICE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA TN'G/TN'G VOICE IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA V10 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA V12 BLOOD GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORA V30A BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORACARE GD40 MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORACARE GD40 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORACARE PREMIUM V10 DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORACARE PREMIUM V10 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORACARE TEST N GO MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FORACARE TEST N GO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FREESTYLE FREEDOM LITE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FREESTYLE INSULINX TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FREESTYLE LANCETS (<i>lancets</i>)	NPB	
FREESTYLE LIBRE 14 DAY READER DEVICE (<i>continuous glucose receiver</i>)	NF	
FREESTYLE LIBRE 14 DAY SENSOR (<i>continuous glucose sensor</i>)	NF	
FREESTYLE LIBRE 2 PLUS SENSOR (<i>continuous glucose sensor</i>)	NF	
FREESTYLE LIBRE 2 READER DEVICE (<i>continuous glucose receiver</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
FREESTYLE LIBRE 2 SENSOR (<i>continuous glucose sensor</i>)	NF	
FREESTYLE LIBRE 3 PLUS SENSOR (<i>continuous glucose sensor</i>)	NF	
FREESTYLE LIBRE 3 READER DEVICE (<i>continuous glucose receiver</i>)	NF	
FREESTYLE LIBRE 3 SENSOR (<i>continuous glucose sensor</i>)	NF	
FREESTYLE LIBRE READER DEVICE (<i>continuous glucose receiver</i>)	NF	
FREESTYLE LITE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FREESTYLE LITE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FREESTYLE LITE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FREESTYLE PRECISION NEO SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FREESTYLE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FREESTYLE UNISTICK II LANCETS (<i>lancets</i>)	NPB	
<i>ge100 blood glucose system device</i>	NF	
<i>ge100 blood glucose system kit w/device</i>	NF	
<i>ge100 blood glucose test in vitro strip</i>	NF	
GENTEEL BUTTERFLY TOUCH LANCET (<i>lancets</i>)	NPB	
GENTEEL CONTACT TIPS (BLUE) (<i>lancets misc.</i>)	NPB	
GENTEEL CONTACT TIPS (CLEAR) (<i>lancets misc.</i>)	NPB	
GENTEEL CONTACT TIPS (GREEN) (<i>lancets misc.</i>)	NPB	
GENTEEL CONTACT TIPS (ORANGE) (<i>lancets misc.</i>)	NPB	
GENTEEL CONTACT TIPS (RAINBOW) (<i>lancets misc.</i>)	NPB	
GENTEEL CONTACT TIPS (VIOLET) (<i>lancets misc.</i>)	NPB	
GENTEEL CONTACT TIPS (YELLOW) (<i>lancets misc.</i>)	NPB	
GENTEEL LANCING KIT (BLUE) KIT (<i>lancets misc.</i>)	NPB	
GENTEEL NOZZLES (<i>lancets misc.</i>)	NPB	
GENTEEL PLUS LANCING (BLACK) (<i>lancet devices</i>)	NPB	
GENTEEL PLUS LANCING (PURPLE) (<i>lancet devices</i>)	NPB	
GENTEEL PLUS LANCING (WHITE) (<i>lancet devices</i>)	NPB	
GENTEEL PLUS LANCING DEV(BLUE) (<i>lancet devices</i>)	NPB	
GENTEEL PLUS LANCING DEV(PINK) (<i>lancet devices</i>)	NPB	
GENULTIMATE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>ght blood glucose monitor kit w/device</i>	NF	
<i>ght test in vitro strip</i>	NF	
<i>global ease inject pen needles 29g x 12mm , 31g x 5 mm , 31g x 8 mm , 32g x 4 mm</i>	NF	
<i>global easy glide insulin syr 31g x 15/64" 0.3 ml, 31g x 15/64" 0.5 ml, 31g x 15/64" 1 ml, 31g x 5/16" 0.3 ml</i>	NF	
<i>global easy glide pen needles 32g x 4 mm</i>	NF	
<i>global inject ease insulin syr 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml, 29g x 1/2" 0.3 ml, 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml, 30g x 1/2" 0.3 ml, 30g x 1/2" 0.5 ml, 30g x 1/2" 1 ml, 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
<i>global inject ease lancets 28g</i>	NPB	
<i>global inject ease lancets 30g</i>	NPB	
<i>global insulin syringes 30g x 1/2" 0.3 ml, 30g x 5/16" 0.3 ml</i>	NF	
<i>global lancing device</i>	NPB	
GLUCO PERFECT 3 METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCO PERFECT 3 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD 01 BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCARD 01 BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD 01-MINI GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCARD EXPRESSION MONITOR KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCARD EXPRESSION TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD SHINE CONNEX KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCARD SHINE EXPRESS KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCARD SHINE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD SHINE XL DEVICE (<i>blood glucose monitoring suppl</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
GLUCOCARD VITAL MONITOR KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCARD VITAL TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD X-METER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCARD X-SENSOR IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCOM BLOOD GLUCOSE MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCOM LANCETS 28G (<i>lancets</i>)	NPB	
GLUCOCOM LANCETS 30G (<i>lancets</i>)	NPB	
GLUCOCOM LANCETS 33G (<i>lancets</i>)	NPB	
GLUCOCOM MONITOR KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCOCOM TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCONAVII BLOOD GLUCOSE SYS KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GLUCONAVII BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
GLUCOPRO SYR RES 3ML 22GX3/8" (<i>insulin infusion pump supplies</i>)	NPB	
<i>glucose meter test in vitro strip</i>	NF	
GNP EASY TOUCH CONT HIGH/LOW IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
GNP EASY TOUCH GLUCOSE METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
<i>gnp easy touch glucose test in vitro strip</i>	NF	
<i>gnp insulin syringe 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
<i>gnp insulin syringes 28gx1/2" 28g x 1/2" 1 ml</i>	NF	
<i>gnp insulin syringes 29gx1/2" 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml</i>	NF	
<i>gnp insulin syringes 30g x 5/16" 1 ml</i>	NF	
<i>gnp insulin syringes 30gx5/16" 30g x 5/16" 0.3 ml</i>	NF	
<i>gnp insulin syringes 31gx5/16" 31g x 5/16" 0.3 ml</i>	NF	
<i>gnp sterile lancets 28g</i>	NPB	
<i>gnp sterile lancets 30g</i>	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>gnp sterile lancets 33g</i>	NPB	
GNP TRUE METRIX AIR METER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GNP TRUE METRIX GLUCOSE METER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
GNP TRUE METRIX GLUCOSE STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NF	
GNP TRUETRACK SMART SYSTEM IN VITRO STRIP (<i>glucose blood</i>)	NF	
GNP TRUETRACK TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>gnp ulticare pen needles 31g x 5 mm , 31g x 8 mm , 32g x 4 mm , 32g x 6 mm</i>	NF	
GNP ULTIGUARD SAFEPAK NEEDLE 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
<i>gnp ultra com insulin syringe 28g x 1/2" 1 ml</i>	NF	
GOJJI LANCING DEVICE/CLEAR CAP (<i>lancet devices</i>)	NPB	
GOJJI STERILE LANCETS (<i>lancets</i>)	NPB	
GUARDIAN 4 GLUCOSE SENSOR (<i>continuous glucose sensor</i>)	NF	
GUARDIAN 4 TRANSMITTER (<i>continuous glucose transmitter</i>)	NF	
GUARDIAN LINK 3 TRANSMITTER (<i>continuous glucose transmitter</i>)	NF	
GUARDIAN REAL-TIME CHARGER (<i>continuous glucose monitor sup</i>)	NPB	
GUARDIAN REAL-TIME TEST PLUG (<i>continuous glucose monitor sup</i>)	NPB	
GUARDIAN SENSOR (3) (<i>continuous glucose sensor</i>)	NF	
<i>guardian sensor 3</i>	NF	
HAEMOLANCE (<i>lancets</i>)	NPB	
HAEMOLANCE LOW FLOW LANCETS (<i>lancets</i>)	NPB	
HAEMOLANCE PLUS (<i>lancets</i>)	NPB	
HAEMOLANCE PLUS HIGH FLOW (<i>lancets</i>)	NPB	
HAEMOLANCE PLUS LOW FLOW (<i>lancets</i>)	NPB	
HAEMOLANCE PLUS MAX FLOW (<i>lancets</i>)	NPB	
HAEMOLANCE PLUS PEDIATRIC FLOW (<i>lancets</i>)	NPB	
<i>healthwise insulin syr/needle 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>healthwise micron pen needles 32g x 4 mm</i>	NF	
<i>healthwise short pen needles 31g x 5 mm , 31g x 8 mm</i>	NF	
<i>h-e-b incontrol adv lancing</i>	NPB	
<i>h-e-b incontrol lancets 28g</i>	NPB	
<i>h-e-b incontrol lancets 30g</i>	NPB	
<i>h-e-b incontrol lancets 33g</i>	NPB	
<i>h-e-b incontrol pen needles 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm</i>	NF	
H-E-B INCONTROL UNIFINE PENTIP 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 33G X 4 MM (<i>insulin pen needle</i>)	NF	
HM EMBRACE TALK SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
HM ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML (<i>insulin syringe-needle u-100</i>)	NF	
HM ULTICARE MINI PEN NEEDLES 31G X 5 MM (<i>insulin pen needle</i>)	NF	
HM ULTICARE SHORT PEN NEEDLES 31G X 8 MM (<i>insulin pen needle</i>)	NF	
HW EMBRACE PRO GLUCOSE METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
HW EMBRACE TALK BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
HY-VEE LANCETS (<i>lancets</i>)	NPB	
<i>hy-vee thin lancets</i>	NPB	
IGLUCOSE MONITORING SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
IGLUCOSE TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NF	
IHEALTH BLOOD GLUCOSE TEST STR IN VITRO STRIP (<i>glucose blood</i>)	NF	
IN TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
IN TOUCH DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
IN TOUCH LANCING DEVICE (<i>lancet devices</i>)	NPB	
IN TOUCH STERILE LANCETS 30G (<i>lancets</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
INCONTROL ULTICARE PEN NEEDLES 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
INFINITY BLOOD GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
INFINITY VOICE IN VITRO STRIP (<i>glucose blood</i>)	NF	
INFINITY VOICE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
<i>insulin syringe 29g x 1/2" 0.3 ml, 30g x 5/16" 0.3 ml, 30g x 5/16" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml</i>	NF	
<i>insulin syringe-needle u-100 27g x 1/2" 0.5 ml, 27g x 1/2" 1 ml, 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml, 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml, 30g x 1/2" 1 ml, 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
<i>insupen pen needles 29g x 12mm , 31g x 5 mm , 31g x 8 mm , 32g x 4 mm</i>	NF	
KETO-DIASTIX IN VITRO STRIP (<i>urine glucose-ketones test</i>)	NPB	
<i>ketone test in vitro strip</i>	NPB	
KETOSTIX IN VITRO STRIP (<i>acetone (urine) test</i>)	NPB	
<i>kinney lancets</i>	NPB	
<i>kinney thin lancets</i>	NPB	
<i>kinray insulin syringe 29g x 1/2" 0.5 ml</i>	NF	
KROGER AUTOLET LANCING DEVICE (<i>lancet devices</i>)	NPB	
KROGER HEALTHPRO LANCET 26G (<i>lancets</i>)	NPB	
<i>kroger lancets</i>	NPB	
<i>kroger lancets super thin</i>	NPB	
<i>kroger lancets thin</i>	NPB	
<i>kroger pen needles 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 33g x 4 mm</i>	NF	
<i>lancet device</i>	NPB	
<i>lancet device with ejector</i>	NPB	
<i>lancets</i>	NPB	
<i>lancets 30g</i>	NPB	
<i>lancets 33g</i>	NPB	
<i>lancets micro thin 33g</i>	NPB	
<i>lancets super thin 28g</i>	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
<i>lancets thin</i>	NPB	
LANCETS ULTRA THIN (<i>lancets</i>)	NPB	
<i>lancing device</i>	NPB	
LANZO (<i>lancet devices</i>)	NPB	
LEADER UNIFINE PENTIPS 31G X 5 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
LEADER UNIFINE PENTIPS PLUS 31G X 5 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
LIBERTY MEDICAL LANCETS (<i>lancets</i>)	NPB	
<i>lite touch lancets</i>	NPB	
LITE TOUCH LANCING PEN (<i>lancet devices</i>)	NPB	
LITETOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
LITETOUCH LANCETS (<i>lancets</i>)	NPB	
LITETOUCH PEN NEEDLES 29G X 12.7MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
<i>live better lancet super thin</i>	NPB	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
MARATHON MEDICAL PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
MAXICOMFORT II PEN NEEDLE 31G X 6 MM (<i>insulin pen needle</i>)	NF	
MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
MAXI-COMFORT SAFETY PEN NEEDLE 29G X 5MM , 29G X 8MM (<i>insulin pen needle</i>)	NF	
MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
<i>medic insulin syringe 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml</i>	NF	
<i>medichoice safety lancet</i>	NPB	
<i>medichoice safety lancet extra</i>	NPB	
<i>medichoice safety lancet norm</i>	NPB	
<i>medicine shoppe pen needles 29g x 12mm , 31g x 8 mm</i>	NF	
MEDLANCE PLUS EXTRA 21G (<i>lancets</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
MEDLANCE PLUS LITE 25G (<i>lancets</i>)	NPB	
MEDLANCE PLUS SPECIAL 0.8MM (<i>lancets</i>)	NPB	
MEDLANCE PLUS SUPERLITE 30G (<i>lancets</i>)	NPB	
MEDLANCE PLUS UNIVERSAL 21G (<i>lancets</i>)	NPB	
MEIJER LANCETS (<i>lancets</i>)	NPB	
MEIJER LANCETS UNIVERSAL 21G (<i>lancets</i>)	NPB	
MEIJER LANCETS UNIVERSAL 30G (<i>lancets</i>)	NPB	
MEIJER LANCETS UNIVERSAL 33G (<i>lancets</i>)	NPB	
<i>meijer pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm</i>	NF	
MEIJER TRUE2GO BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
MEIJER TRUERESULT GLUCOSE SYS KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
MEIJER TRUETEST TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
MEIJER TRUETRACK GLUCOSE SYS KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
MEIJER TRUETRACK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
MICRODOT BLOOD GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
MICRODOT TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
MICROLET LANCETS (<i>lancets</i>)	NPB	
MICROLET NEXT LANCING DEVICE (<i>lancet devices</i>)	NPB	
<i>mini lancing device</i>	NPB	
MINIMED INSTINCT GLUC SENSOR (<i>continuous glucose sensor</i>)	NF	
MINIMED PUMP RESERVOIR 3ML (<i>insulin infusion pump supplies</i>)	NPB	
MINIMED RESERVOIR 1.8ML (<i>insulin infusion pump supplies</i>)	NPB	
MINIMED RESERVOIR 3ML (<i>insulin infusion pump supplies</i>)	NPB	
MM BLOOD GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
MM BLOOD GLUCOSE SYSTEM REFILL KIT (<i>blood glucose monitoring suppl</i>)	NF	
MM BLULINK GLUCOSE MONIT SYS DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
MM BLULINK GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
MM EASY TOUCH GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
MM EASY TOUCH GLUCOSE METER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
<i>mm insulin syringe/needle 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
MM PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
MM TWIST LANCETS (<i>lancets</i>)	NPB	
MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
MONOJECT INSULIN SYRINGE U-100 1 ML (<i>insulin syringes (disposable)</i>)	NF	
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML (<i>insulin syringe-needle u-100</i>)	NF	
MONOLET LANCETS (<i>lancets</i>)	NPB	
MONOLET OPD LANCETS (<i>lancets</i>)	NPB	
MONOLETTOR SAFETY LANCETS (<i>lancets</i>)	NPB	
MULTI-LANCET DEVICE 2 KIT (<i>lancets misc.</i>)	NPB	
MYGLUCOHEALTH BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
MYGLUCOHEALTH LANCETS 30G (<i>lancets</i>)	NPB	
MYGLUCOHEALTH TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
NEUTEK 2TEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
NOVA MAX BLOOD GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
NOVA MAX BLOOD GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
NOVA MAX GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
NOVA MAX PLUS KETONE TEST IN VITRO STRIP (<i>ketone blood test</i>)	NPB	
NOVA SAFETY LANCETS 23G (<i>lancets</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
NOVA SAFETY LANCETS 28G (<i>lancets</i>)	NPB	
NOVA SUREFLEX LANCETS (<i>lancets</i>)	NPB	
NOVA SUREFLEX LANCING DEVICE (<i>lancet devices</i>)	NPB	
NOVOFINE PEN NEEDLE 32G X 6 MM (<i>insulin pen needle</i>)	NF	
NOVOFINE PLUS PEN NEEDLE 32G X 4 MM (<i>insulin pen needle</i>)	NF	
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT (<i>insulin disposable pump</i>)	PB	
OMNIPOD 5 DEXG7G6 PODS GEN 5 (<i>insulin disposable pump</i>)	PB	
OMNIPOD DASH INTRO (GEN 4) KIT (<i>insulin disposable pump</i>)	PB	
OMNIPOD DASH PDM (GEN 4) KIT (<i>insulin disposable pump</i>)	PB	
OMNIPOD DASH PODS (GEN 4) (<i>insulin disposable pump</i>)	PB	
OMNIPOD POD PALS (<i>insulin dispos pmp accessories</i>)	NF	
ON CALL EXPRESS BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
ON CALL EXPRESS MONITORING SYS KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
<i>one drop blood glucose monitor kit w/device</i>	NF	
<i>one drop test in vitro strip</i>	NF	
ONETOUCH DELICA PLUS LANCET30G (<i>lancets</i>)	NF	
ONETOUCH DELICA PLUS LANCET33G (<i>lancets</i>)	NF	
ONETOUCH DELICA PLUS LANCING (<i>lancet devices</i>)	NF	
ONETOUCH DELICA SAFETY LANCING (<i>lancets</i>)	NF	
ONETOUCH ULTRA 2 KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ONETOUCH ULTRA BLUE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ONETOUCH ULTRA IN VITRO STRIP (<i>glucose blood</i>)	NF	
ONETOUCH ULTRA TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ONETOUCH ULTRASOFT 2 LANCETS (<i>lancets</i>)	NF	
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
ONETOUCH VERIO IN VITRO STRIP (<i>glucose blood</i>)	NF	
ONETOUCH VERIO REFLECT KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
OPTIUMEZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
PARADIGM SILHOUETTE COMBO 23" (<i>insulin infusion pump supplies</i>)	NPB	
<i>pc unifine pentips 31g x 5 mm , 31g x 6 mm , 31g x 8 mm</i>	NF	
<i>pen needle/5-bevel tip 31g x 8 mm , 32g x 4 mm</i>	NF	
<i>pen needles 29g x 12mm , 30g x 5 mm , 30g x 8 mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 32g x 5 mm , 32g x 6 mm</i>	NF	
PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
PENTIPS GENERIC PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
PERFECT LANCETS 28G (<i>lancets</i>)	NPB	
PERFECT LANCETS 30G (<i>lancets</i>)	NPB	
<i>ph strips in vitro diagnostic test</i>	NPB	
PHARMACIST CHOICE AUTOCODE IN VITRO STRIP (<i>glucose blood</i>)	NF	
PHARMACIST CHOICE AUTOCODE SYS KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
PHARMACIST CHOICE LANCETS (<i>lancets</i>)	NPB	
PHARMACIST CHOICE MINI SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
<i>pharmacist choice no coding in vitro strip</i>	NF	
PIP BLOOD GLUCOSE MONITORING DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
PIP BLOOD GLUCOSE TEST STRIP IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>pip lancets 28g</i>	NPB	
<i>pip lancets 30g</i>	NPB	
POCKETCHEM EZ SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
POCKETCHEM EZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
POGO AUTOMATIC BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST (<i>glucose blood</i>)	NF	
PRECISION SURE-DOSE SYRINGE 30G X 5/16" 0.3 ML (<i>insulin syringe-needle u-100</i>)	NF	
<i>preferred plus unifine pentips 29g x 12mm</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
PREVENT DROPSAFE PEN NEEDLES 31G X 6 MM , 31G X 8 MM (<i>insulin pen needle</i>)	NF	
PREVENT SAFETY PEN NEEDLES 31G X 6 MM , 31G X 8 MM (<i>insulin pen needle</i>)	NF	
PRO COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
<i>pro comfort lancets 30g</i>	NPB	
<i>pro comfort lancets 31g</i>	NPB	
<i>pro comfort pen needles 32g x 4 mm , 32g x 5 mm , 32g x 6 mm , 32g x 8 mm</i>	NF	
<i>pro comfort safety lancets 30g</i>	NPB	
<i>pro voice v8/v9 glucose in vitro strip</i>	NF	
<i>pro voice v9 glucose system device</i>	NF	
PRODIGY AUTOCODE BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
PRODIGY AUTOCODE BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
PRODIGY INSULIN SYRINGE 28G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML (<i>insulin syringe-needle u-100</i>)	NF	
PRODIGY LANCETS 28G (<i>lancets</i>)	NPB	
PRODIGY LANCING DEVICE (<i>lancet devices</i>)	NPB	
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP (<i>glucose blood</i>)	NF	
PRODIGY POCKET BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
PRODIGY SAFETY LANCETS 26G (<i>lancets</i>)	NPB	
PRODIGY TWIST TOP LANCETS 28G (<i>lancets</i>)	NPB	
PRODIGY VOICE BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
PTS PANELS EGLU TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>pure comfort lancets 30g</i>	NPB	
<i>pure comfort safety pen needle 31g x 5 mm , 31g x 6 mm , 32g x 4 mm</i>	NF	
<i>px insulin syringe 30g x 1/2" 0.5 ml</i>	NF	
<i>px lancets microthin 33g</i>	NPB	
<i>px lancets ultra thin 28g</i>	NPB	
<i>px mini pen needles 31g x 5 mm</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>qc advanced lancing device</i>	NPB	
<i>qc lancets super thin 30g</i>	NPB	
<i>qc lancets ultra thin</i>	NPB	
<i>qc pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm</i>	NF	
<i>qc unifine pentips 32g x 4 mm</i>	NF	
<i>qc unilet lancets 28g</i>	NPB	
<i>qc unilet lancets micro thin</i>	NPB	
QUICKTEK KIT (<i>blood glucose monitoring suppl</i>)	NF	
QUICKTEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
QUICKTEK/METER KIT (<i>blood glucose monitoring suppl</i>)	NF	
QUINTET AC BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
QUINTET AC BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
QUINTET BLOOD GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
QUINTET BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>raya sure pen needle 29g x 12mm , 31g x 4 mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm</i>	NF	
READYLANCE SAFETY LANCETS (<i>lancets</i>)	NPB	
<i>reality insulin syringe 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml, 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml</i>	NF	
<i>reality lancets</i>	NPB	
<i>reality trigger lancets</i>	NPB	
REFUAH PLUS BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
REFUAH PLUS MONITORING SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RELION ALL-IN-ONE DEVICE (<i>blood gluc meter disp-strips</i>)	NF	
RELION BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
RELION CONFIRM GLUCOSE MONITOR KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RELION CONFIRM/MICRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
RELION GLUCOSE TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
RELION INSULIN SYRINGE 29G X 1/2" 0.5 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
RELION INSULIN SYRINGE 31G X 15/64" 0.5 ML (<i>insulin syringe-needle u-100</i>)	PB	
RELION KETONE TEST IN VITRO STRIP (<i>acetone (urine) test</i>)	NPB	
RELION LANCET DEVICES 30G (<i>lancets</i>)	NPB	
RELION LANCETS MICRO-THIN 33G (<i>lancets</i>)	NPB	
RELION LANCETS THIN 26G (<i>lancets</i>)	NPB	
RELION LANCETS ULTRA-THIN 30G (<i>lancets</i>)	NPB	
RELION LANCING DEVICE (<i>lancet devices</i>)	NPB	
RELION MICRO KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RELION PEN NEEDLES 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
RELION PREMIER BLU MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RELION PREMIER COMPACT SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RELION PREMIER VOICE MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RELION PRIME MONITOR DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RELION PRIME TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
RELION TRUE MET AIR GLUC METER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	PB	
RELION TRUE METRIX TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	PB	
RELION ULTIMA GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RELION ULTIMA TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
RELION ULTRA THIN LANCETS 30G (<i>lancets</i>)	NPB	
RIGHTEST ALTERNATE SITE ADAPT (<i>lancets misc.</i>)	NPB	
RIGHTEST GD500 LANCING DEVICE (<i>lancet devices</i>)	NPB	
RIGHTEST GL300 LANCETS (<i>lancets</i>)	NPB	
RIGHTEST GM100 BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
RIGHTEST GM300 BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RIGHTEST GM550 BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RIGHTEST GS100 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
RIGHTEST GS300 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
RIGHTEST GS550 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
RIGHTEST GT333 BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
RIGHTEST GT333 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
RIGHTEST GT333 GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>safety lancet 30g/pressure act</i>	NPB	
SAFETY LANCETS (<i>lancets</i>)	NPB	
SAFETY LANCETS 21G (<i>lancets</i>)	NPB	
SAFETY LANCETS 23G (<i>lancets</i>)	NPB	
<i>safety lancets 28g</i>	NPB	
<i>safety pen needles 30g x 5 mm , 30g x 8 mm</i>	NF	
<i>saps health plus lancets</i>	NPB	
<i>saps health twist top lancets</i>	NPB	
<i>saps twist top lancets</i>	NPB	
<i>sapscare twist top lancets</i>	NPB	
<i>sb insulin syringe 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 5/16" 1 ml</i>	NF	
<i>sb lancets thin</i>	NPB	
<i>sb lancets ultra thin</i>	NPB	
SECURESAFE INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
SECURESAFE SAFETY PEN NEEDLES 30G X 8 MM (<i>insulin pen needle</i>)	NF	
<i>select-lite lancing device</i>	NPB	
SIMPLE DIAGNOSTICS LANCING DEV (<i>lancet devices</i>)	NPB	
SIMPLERA SENSOR (<i>continuous glucose sensor</i>)	NF	
SIMPLERA SYNC SENSOR (<i>continuous glucose sensor</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
SIMPLERA SYSTEM (<i>continuous glucose sensor</i>)	NF	
SINGLE-LET (<i>lancets</i>)	NPB	
SMART DIABETES VANTAGE LANCING (<i>lancet devices</i>)	NPB	
SMARTEST BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
SMARTEST EJECT DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
SMARTEST EJECT STARTER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
SMARTEST LANCETS 28G (<i>lancets</i>)	NPB	
SMARTEST PERSONA STARTER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
SMARTEST PRONTO STARTER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
SMARTEST PROTEGE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
SMARTEST PROTEGE STARTER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
SOLUS V2 BLOOD GLUCOSE SYSTEM DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
SOLUS V2 BLOOD GLUCOSE SYSTEM KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
SOLUS V2 LANCETS 28G (<i>lancets</i>)	NPB	
SOLUS V2 LANCING DEVICE (<i>lancet devices</i>)	NPB	
SOLUS V2 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
SOLUS V2 TWIST LANCETS 30G (<i>lancets</i>)	NPB	
STERILANCE TL (<i>lancets</i>)	NPB	
<i>super thin lancets</i>	NPB	
SUPREME TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>sure comfort insulin syringe 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml, 29g x 1/2" 0.3 ml, 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml, 30g x 1/2" 0.3 ml, 30g x 1/2" 0.5 ml, 30g x 1/2" 1 ml, 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 1/4" 0.3 ml, 31g x 1/4" 0.5 ml, 31g x 1/4" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
<i>sure comfort lancets 18g</i>	NPB	
<i>sure comfort lancets 21g</i>	NPB	
<i>sure comfort lancets 23g</i>	NPB	
<i>sure comfort lancets 28g</i>	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
<i>sure comfort lancets 30g</i>	NPB	
<i>sure comfort lancing pen</i>	NPB	
<i>sure comfort pen needles 29g x 12.7mm , 30g x 8 mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 32g x 6 mm</i>	NF	
SURELITE LANCETS (<i>lancets</i>)	NPB	
T:FLEX T:LOCK CARTRIDGE 4.8ML (<i>insulin infusion pump supplies</i>)	NPB	
T:SLIM X2 3ML CARTRIDGE (<i>insulin infusion pump supplies</i>)	NPB	
TANDEM MOBI AUTOSOFT 30 KIT (<i>insulin infusion pump supplies</i>)	NPB	
TANDEM MOBI AUTOSOFT XC KIT (<i>insulin infusion pump supplies</i>)	NPB	
TANDEM MOBI SYSTEM STARTER KIT (<i>insulin infusion pump</i>)	NPB	
TANDEM MOBI TRUSTEEL SUPP KIT (<i>insulin infusion pump supplies</i>)	NPB	
TECHLITE AST LANCETS (<i>lancets</i>)	NPB	
<i>techlite insulin syringe 30g x 1/2" 1 ml, 31g x 15/64" 0.3 ml, 31g x 15/64" 0.5 ml, 31g x 15/64" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
TECHLITE LANCETS (<i>lancets</i>)	NPB	
TECHLITE PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
TEMPO REFILL KIT (<i>blood glucose monitoring suppl</i>)	NF	
TEMPO WELCOME KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
<i>todays health pen needles 29g x 12mm</i>	NF	
<i>todays health short pen needle 31g x 8 mm</i>	NF	
<i>todays health thin lancets 28g</i>	NPB	
<i>todays health thin lancets 30g</i>	NPB	
TOXICOLOGY MED COLLECTION SYS IN VITRO KIT (<i>drug assay (urine)</i>)	NPB	
TRAVEL LANCETS ADVANCED 28G (<i>lancets</i>)	NPB	
<i>true comfort insulin syringe 30g x 1/2" 0.5 ml, 30g x 1/2" 1 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml, 32g x 5/16" 1 ml</i>	NF	
<i>true comfort pen needles 31g x 5 mm , 31g x 6 mm , 32g x 4 mm</i>	NF	
<i>true comfort pro insulin syr 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml, 32g x 5/16" 0.5 ml</i>	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
true comfort pro pen needles 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 32g x 5 mm , 32g x 6 mm , 33g x 4 mm , 33g x 5 mm , 33g x 6 mm	NF	
true comfort safety lancets	NPB	
true comfort twist top lancets	NPB	
TRUE FOCUS BLOOD GLUCOSE METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
true focus blood glucose strip in vitro strip	NF	
TRUE METRIX AIR GLUCOSE METER DEVICE (<i>blood glucose monitoring suppl</i>)	PB	
TRUE METRIX AIR GLUCOSE METER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	PB	
TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	PB	
TRUE METRIX GO GLUCOSE METER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	PB	
TRUE METRIX METER KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	PB	
TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
TRUEPLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
TRUEPLUS LANCETS 26G (<i>lancets</i>)	NPB	
TRUEPLUS LANCETS 28G (<i>lancets</i>)	PB	
TRUEPLUS LANCETS 30G (<i>lancets</i>)	PB	
TRUEPLUS LANCETS 33G (<i>lancets</i>)	PB	
TRUEPLUS SAFETY LANCETS 28G (<i>lancets</i>)	NPB	
TRUERESULT BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
TRUETEST TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
TRUETRACK BLOOD GLUCOSE DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
TRUETRACK BLOOD GLUCOSE KIT W/DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
TRUETRACK SMART SYSTEM KIT (<i>blood glucose monitoring suppl</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
TRUETRACK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
TRUSTEEL INFUSION SET (<i>insulin infusion pump supplies</i>)	NPB	
TWIIIST REFILL KIT KIT (<i>insulin disposable pump</i>)	PB	
TWIIIST REFILL KIT/INFUSION SET KIT (<i>insulin disposable pump</i>)	PB	
TWIIIST STARTER KIT KIT (<i>insulin disposable pump</i>)	PB	
<i>twist top lancets 30g</i>	NPB	
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
ULTICARE INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/4" 0.3 ML, 31G X 1/4" 0.5 ML, 31G X 1/4" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
ULTICARE MICRO PEN NEEDLES 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
ULTICARE MINI PEN NEEDLES 30G X 5 MM , 31G X 6 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
ULTICARE PEN NEEDLES 29G X 12.7MM , 31G X 5 MM (<i>insulin pen needle</i>)	NF	
ULTICARE SHORT PEN NEEDLES 30G X 8 MM , 31G X 8 MM (<i>insulin pen needle</i>)	NF	
ULTIGUARD SAFEPAK PEN NEEDLE 29G X 12.7MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
ULTIGUARD SAFEPAK SYR/NEEDLE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
ULTI-LANCE AUTOMATIC (<i>lancet devices</i>)	NPB	
ULTILET CLASSIC LANCETS (<i>lancets</i>)	NPB	
ULTILET LANCETS (<i>lancets</i>)	NPB	
ULTILET PEN NEEDLE 29G X 12.7MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
ULTILET SAFETY LANCETS (<i>lancets</i>)	NPB	
ULTILET SAFETY LANCETS 23G (<i>lancets</i>)	NPB	
<i>ultra comfort insulin syringe 30g x 5/16" 0.3 ml</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
ULTRA FLO INSULIN PEN NEEDLES 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 33G X 4 MM (<i>insulin pen needle</i>)	NF	
ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 1/2" 0.3 ML, 30G X 5/16" 0.3 ML, 31G X 5/16" 0.3 ML (<i>insulin syringe-needle u-100</i>)	NF	
ULTRA FLO INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
<i>ultra thin lancets 31g</i>	NPB	
ULTRA THIN PEN NEEDLES 32G X 4 MM (<i>insulin pen needle</i>)	NF	
<i>ultracare insulin syringe 30g x 1/2" 0.5 ml, 30g x 1/2" 1 ml, 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml</i>	NF	
<i>ultra-care lancets 30g</i>	NPB	
<i>ultracare pen needles 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm , 32g x 5 mm , 32g x 6 mm , 33g x 4 mm</i>	NF	
ULTRA-THIN II AUTO LANCET (<i>lancets</i>)	NPB	
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
ULTRA-THIN II LANCETS (<i>lancets</i>)	NPB	
ULTRA-THIN II MINI PEN NEEDLE 31G X 5 MM (<i>insulin pen needle</i>)	NF	
ULTRA-THIN II PEN NEEDLE SHORT 31G X 8 MM (<i>insulin pen needle</i>)	NF	
ULTRA-THIN II PEN NEEDLES 29G X 12.7MM (<i>insulin pen needle</i>)	NF	
UNIFINE PENTIPS 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM , 33G X 4 MM (<i>insulin pen needle</i>)	NF	
UNIFINE PENTIPS PLUS 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 33G X 4 MM (<i>insulin pen needle</i>)	NF	
UNIFINE PROTECT PEN NEEDLE 30G X 5 MM , 30G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
UNIFINE SAFECONTROL PEN NEEDLE 30G X 5 MM , 30G X 8 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
UNIFINE ULTRA PEN NEEDLE 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
UNILET COMFORTOUCH LANCET (<i>lancets</i>)	NPB	
UNILET EXCELITE (<i>lancets</i>)	NPB	
UNILET EXCELITE II (<i>lancets</i>)	NPB	
UNILET G.P. LANCET (<i>lancets</i>)	NPB	
UNILET G.P. SUPERLITE LANCET (<i>lancets</i>)	NPB	
UNILET GP 28 ULTRA THIN (<i>lancets</i>)	NPB	
UNILET LANCET (<i>lancets</i>)	NPB	
UNILET MICRO-THIN 33G (<i>lancets</i>)	NPB	
UNILET SUPERLITE LANCET (<i>lancets</i>)	NPB	
UNILET SUPER-THIN 30G (<i>lancets</i>)	NPB	
UNILET ULTRA-THIN 28G (<i>lancets</i>)	NPB	
UNISTIK 1 (<i>lancets</i>)	NPB	
UNISTIK 2 (<i>lancets</i>)	NPB	
UNISTIK 2 COMFORT (<i>lancets</i>)	NPB	
UNISTIK 2 EXTRA (<i>lancets</i>)	NPB	
UNISTIK 2 NEONATAL (<i>lancets</i>)	NPB	
UNISTIK 2 NORMAL (<i>lancets</i>)	NPB	
UNISTIK 2 SUPER (<i>lancets</i>)	NPB	
UNISTIK 3 (<i>lancets</i>)	NPB	
UNISTIK 3 COMFORT (<i>lancets</i>)	NPB	
UNISTIK 3 EXTRA (<i>lancets</i>)	NPB	
UNISTIK 3 GENTLE (<i>lancets</i>)	NPB	
UNISTIK 3 NEONATAL (<i>lancets</i>)	NPB	
UNISTIK 3 NORMAL (<i>lancets</i>)	NPB	
UNISTIK CZT COMFORT (<i>lancets</i>)	NPB	
UNISTIK CZT NORMAL (<i>lancets</i>)	NPB	
UNISTIK NORMAL (<i>lancets</i>)	NPB	
UNISTIK PRO SAFETY LANCET (<i>lancets</i>)	NPB	
UNISTIK SAFETY LANCETS 28G (<i>lancets</i>)	NPB	
UNISTIK SAFETY LANCETS 30G (<i>lancets</i>)	NPB	
UNISTIK TOUCH SAFETY LANC 21G (<i>lancets</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
UNISTIK TOUCH SAFETY LANC 23G (<i>lancets</i>)	NPB	
UNISTIK TOUCH SAFETY LANC 28G (<i>lancets</i>)	NPB	
UNISTIK TOUCH SAFETY LANC 30G (<i>lancets</i>)	NPB	
UNISTRIPI GENERIC IN VITRO STRIP (<i>glucose blood</i>)	NF	
VANISHPOINT INSULIN SYRINGE 29G X 1/2" 1 ML, 29G X 5/16" 1 ML, 30G X 1/2" 0.5 ML, 30G X 3/16" 0.5 ML, 30G X 3/16" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
VARISOFT INFUSION SET (<i>insulin infusion pump supplies</i>)	NPB	
verasens blood glucose meter device	NF	
verasens blood glucose system kit w/device	NF	
verasens blood glucose test in vitro strip	NF	
VERIFINE INSULIN PEN NEEDLE 29G X 12MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NF	
VERIFINE INSULIN SYRINGE 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NF	
VERIFINE PLUS PEN NEEDLE 31G X 5 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NF	
VERIFINE SAFE LANCET MINI 21G (<i>lancets</i>)	NPB	
VERIFINE SAFE LANCET MINI 23G (<i>lancets</i>)	NPB	
VERIFINE SAFE LANCET MINI 28G (<i>lancets</i>)	NPB	
VERIFINE SAFE LANCET MINI 30G (<i>lancets</i>)	NPB	
VERIFINE UNIVERSAL LANCETS 28G (<i>lancets</i>)	NPB	
VERIFINE UNIVERSAL LANCETS 30G (<i>lancets</i>)	NPB	
VERIFINE UNIVERSAL LANCETS 33G (<i>lancets</i>)	NPB	
V-GO 20 KIT 20 UNIT/24HR (<i>insulin disposable pump</i>)	NF	
V-GO 30 KIT 30 UNIT/24HR (<i>insulin disposable pump</i>)	NF	
V-GO 40 KIT 40 UNIT/24HR (<i>insulin disposable pump</i>)	NF	
VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
VIVAGUARD INO GLUCOSE METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
VIVAGUARD INO GLUCOSE METER KIT (<i>blood glucose monitoring suppl</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
VIVAGUARD INO SMART GLUC METER DEVICE (<i>blood glucose monitoring suppl</i>)	NF	
VIVAGUARD INO TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NF	
VIVAGUARD LANCETS (<i>lancets</i>)	NPB	
VIVAGUARD LANCING DEVICE (<i>lancet devices</i>)	NPB	
wegmans unifine pentips plus 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm	NF	
zevrx insulin syringe 30g x 1/2" 0.5 ml, 30g x 1/2" 1 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml	NF	
zevrx pen needles 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm	NF	
zevrx twist top lancets 30g	NPB	
ENDOMETRIOSIS		
danazol oral capsule 100 mg, 200 mg, 50 mg	G	N8 (Listing does not include certain NDCs)
ORILISSA ORAL TABLET 150 MG, 200 MG (<i>elagolix sodium</i>)	PB	
SYNAREL NASAL SOLUTION 2 MG/ML (<i>nafarelin acetate</i>)	NPB	
FERTILITY REGULATORS		
CETROTIDE SUBCUTANEOUS KIT 0.25 MG (<i>cetorelix acetate</i>)	NF	
chorionic gonadotropin intramuscular solution reconstituted 10000 unit	NF	
FOLLISTIM AQ SUBCUTANEOUS SOLUTION 300 UNT/0.36ML, 600 UNT/0.72ML, 900 UNT/1.08ML (<i>follitropin beta</i>)	PSP	
ganirelix acetate (Fyremadel Subcutaneous Solution Prefilled Syringe 250 Mcg/0.5ml)	NF	
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	NF	
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	PSP	
GONAL-F INJECTION SOLUTION RECONSTITUTED 450 UNIT (<i>follitropin alfa</i>)	NF	
GONAL-F RFF REDIJECT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNT/0.48ML, 450 UNT/0.72ML, 900 UNT/1.44ML (<i>follitropin alfa</i>)	NF	
MENOPUR SUBCUTANEOUS SOLUTION RECONSTITUTED 75 UNIT (<i>menotropins</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT (<i>chorionic gonadotropin</i>)	NF	
OVIDREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 250 MCG/0.5ML (<i>choriogonadotropin alfa</i>)	NF	
PREGNYL INTRAMUSCULAR SOLUTION RECONSTITUTED 10000 UNIT (<i>chorionic gonadotropin</i>)	PSP	
GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE		
AGAMREE ORAL SUSPENSION 40 MG/ML (<i>vamorolone</i>)	NF	
ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE 0.5 MG, 1 MG, 2 MG, 5 MG (<i>hydrocortisone</i>)	NF	
<i>dexamethasone (la) injection suspension 8 mg/ml</i>	NF	
DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML (<i>dexamethasone</i>)	NPB	
<i>dexamethasone oral elixir 0.5 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>dexamethasone oral solution 0.5 mg/5ml</i>	G	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 2 mg, 4 mg, 6 mg</i>	G	
<i>dexamethasone oral tablet 1.5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>dexamethasone oral tablet therapy pack 1.5 mg (21), 1.5 mg (35), 1.5 mg (51)</i>	G	
DEXONTO 0.4% IONTOPHORESIS SOLUTION 20 MG/5ML (<i>dexamethasone sodium phosphate</i>)	NF	
EMFLAZA ORAL SUSPENSION 22.75 MG/ML (<i>deflazacort</i>)	NF	
EMFLAZA ORAL TABLET 18 MG, 30 MG, 36 MG, 6 MG (<i>deflazacort</i>)	NF	
<i>fludrocortisone acetate oral tablet 0.1 mg</i>	G	
HEMADY ORAL TABLET 20 MG (<i>dexamethasone</i>)	NF	
<i>dexamethasone</i> (Hidex 6-Day Oral Tablet Therapy Pack 1.5 Mg (21))	G	
<i>hydrocortisone oral tablet 10 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>hydrocortisone oral tablet 20 mg</i>	G	
MEDROL ORAL TABLET 2 MG (<i>methylprednisolone</i>)	NPB	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	G	
<i>methylprednisolone oral tablet therapy pack 4 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
ORAPRED ODT ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 30 MG (<i>prednisolone sodium phosphate</i>)	NPB	
<i>prednisolone oral solution 15 mg/5ml</i>	G	
<i>prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml</i>	NF	
<i>prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml</i>	G	
<i>prednisolone sodium phosphate oral solution 5 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML (<i>prednisone</i>)	NPB	
<i>prednisone oral solution 5 mg/5ml</i>	G	
<i>prednisone oral tablet 1 mg, 20 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>prednisone oral tablet 10 mg, 2.5 mg, 50 mg</i>	G	
<i>prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)</i>	G	
RAYOS ORAL TABLET DELAYED RELEASE 1 MG, 2 MG, 5 MG (<i>prednisone</i>)	NF	
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK 1.5 MG (49) (<i>dexamethasone</i>)	NF	
<i>dexamethasone</i> (Taperdex 6-Day Oral Tablet Therapy Pack 1.5 Mg, 1.5 Mg (21))	NF	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK 1.5 MG (27) (<i>dexamethasone</i>)	NF	
GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR		
BAQSIMI ONE PACK NASAL POWDER 3 MG/DOSE (<i>glucagon</i>)	PB	
BAQSIMI TWO PACK NASAL POWDER 3 MG/DOSE (<i>glucagon</i>)	PB	
<i>glucagon emergency injection solution reconstituted 1 mg, 1 mg/ml</i>	NF	
GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML (<i>glucagon</i>)	PB	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML (<i>glucagon</i>)	PB	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML (<i>glucagon</i>)	PB	
PROGLYCEM ORAL SUSPENSION 50 MG/ML (<i>diazoxide</i>)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.6 MG/0.6ML (<i>dasiglucagon hcl</i>)	PB	
ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.6 MG/0.6ML (<i>dasiglucagon hcl</i>)	PB	
GROWTH IMPROVEMENT AGENTS - DRUGS TO PROMOTE GROWTH		
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED 0.4 MG, 0.56 MG, 1.2 MG (<i>vosoritide</i>)	NPSP	
HEREDITARY TYROSINEMIA TYPE 1 AGENTS - DRUGS FOR REPLACEMENT, MODIFICATION, TREATMENT		
NITYR ORAL TABLET 10 MG, 2 MG, 5 MG (<i>nitisinone</i>)	NF	
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG (<i>nitisinone</i>)	PSP	
ORFADIN ORAL SUSPENSION 4 MG/ML (<i>nitisinone</i>)	PSP	
HUMAN GROWTH HORMONES - DRUGS TO REGULATE PITUITARY HORMONES		
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG (<i>somatropin</i>)	NF	
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG, 5 MG (<i>somatropin</i>)	NF	
HUMATROPE INJECTION CARTRIDGE 12 MG, 24 MG, 6 MG (<i>somatropin</i>)	PSP	
NGENLA SUBCUTANEOUS SOLUTION PEN-INJECTOR 24 MG/1.2ML, 60 MG/1.2ML (<i>somatrogon-ghla</i>)	NF	
NORDIPEN 5 INJECTION DEVICE (<i>injection device</i>)	NF	
NORDITROPIN FLEXPPO SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 30 MG/3ML, 5 MG/1.5ML (<i>somatropin</i>)	PSP	
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/2ML (<i>somatropin</i>)	NF	
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MG/2ML (<i>somatropin</i>)	NF	
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MG/2ML (<i>somatropin</i>)	NF	
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 10 MG/1.5ML, 5 MG/1.5ML (<i>somatropin</i>)	NF	
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED 5.8 MG (<i>somatropin</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG (<i>somatropin (non-refrigerated)</i>)	NPSP	
SKYTROFA SUBCUTANEOUS CARTRIDGE 11 MG, 13.3 MG, 3 MG, 3.6 MG, 4.3 MG, 5.2 MG, 6.3 MG, 7.6 MG, 9.1 MG (<i>lonapegsomatropin-tcgd</i>)	NF	
SOGROYA SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 5 MG/1.5ML (<i>somapacitan-beco</i>)	PSP	
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 5 MG (<i>somatropin</i>)	NF	
LYSOSOMAL STORAGE DISORDERS - DRUGS TO TREAT LYSOSOMAL STORAGE DISORDERS		
MIPLYFFA ORAL CAPSULE 124 MG, 47 MG, 62 MG, 93 MG (<i>arimoclomol citrate</i>)	NF	
OPFOLDA ORAL CAPSULE 65 MG (<i>miglustat (gaa deficiency)</i>)	NF	
LYSOSOMAL STORAGE DISORDERS - FABRY DISEASE - DRUGS TO TREAT FABRY DISEASE		
GALAFOLD ORAL CAPSULE 123 MG (<i>migalastat hcl</i>)	PSP	
LYSOSOMAL STORAGE DISORDERS - GAUCHER DISEASE - DRUGS TO TREAT GAUCHER DISEASE		
CERDELGA ORAL CAPSULE 84 MG (<i>eliglustat tartrate</i>)	PSP	
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT (<i>imiglucerase</i>)	PSP	
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED 200 UNIT (<i>taliglucerase alfa</i>)	NF	
<i>miglustat oral capsule 100 mg</i>	G	
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT (<i>velaglucerase alfa</i>)	NF	
ZAVESCA ORAL CAPSULE 100 MG (<i>miglustat</i>)	NPSP	
MENOPAUSAL SYMPTOM AGENTS - DRUGS TO TREAT MENOPAUSE		
ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NPB	
ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG (<i>drospirenone-estradiol</i>)	NPB	
BIJUVA ORAL CAPSULE 0.5-100 MG, 1-100 MG (<i>estradiol-progesterone</i>)	NPB	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045- 0.015 MG/DAY (<i>estradiol-levonorgestrel</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
CLIMARA TRANSDERMAL PATCH WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NF	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY 0.05-0.14 MG/DAY, 0.05-0.25 MG/DAY (<i>estradiol-norethindrone acet</i>)	PB	
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML (<i>estradiol valerate</i>)	NPB	
DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML (<i>estradiol cypionate</i>)	NPB	
DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM (<i>estradiol</i>)	NF	
<i>estradiol</i> (Dotti Transdermal Patch Twice Weekly 0.025 Mg/24Hr, 0.0375 Mg/24Hr, 0.05 Mg/24Hr, 0.075 Mg/24Hr, 0.1 Mg/24Hr)	G	
DUAVEE ORAL TABLET 0.45-20 MG (<i>conj estrogens-bazedoxifene</i>)	PB	
<i>ec-rx estradiol transdermal cream 0.4 %, 0.6 %</i>	NF	
ELESTRIN TRANSDERMAL GEL 0.52 MG/0.87 GM (0.06%) (<i>estradiol</i>)	NF	
<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	
<i>estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i>	G	
<i>estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i>	G	
<i>estradiol vaginal cream 0.01 %</i>	G	
<i>estradiol vaginal tablet 10 mcg</i>	NF	
<i>estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml</i>	G	
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	G	
ESTRING VAGINAL RING 7.5 MCG/24HR (<i>estradiol</i>)	NF	
ESTROGEL TRANSDERMAL GEL 0.75 MG/1.25 GM (0.06%) (<i>estradiol</i>)	NPB	
EVAMIST TRANSDERMAL SOLUTION 1.53 MG/SPRAY (<i>estradiol</i>)	NF	
FEMRING VAGINAL RING 0.05 MG/24HR, 0.1 MG/24HR (<i>estradiol acetate</i>)	NF	
<i>norethindrone-eth estradiol</i> (Fyavolv Oral Tablet 0.5-2.5 Mg-Mcg, 1-5 Mg-Mcg)	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG (<i>estradiol</i>)	PB	
IMVEXXY STARTER PACK VAGINAL INSERT 10 MCG, 4 MCG (<i>estradiol</i>)	PB	
<i>norethindrone-eth estradiol</i> (Jinteli Oral Tablet 1-5 Mg-Mcg)	G	
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24HR (<i>estradiol</i>)	NF	
<i>estradiol-norethindrone acet</i> (Mimvey Oral Tablet 1-0.5 Mg)	G	
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NF	
<i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	G	
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (<i>estrogens conjugated</i>)	NF	
PREMARIN VAGINAL CREAM 0.625 MG/GM (<i>estrogens, conjugated</i>)	NF	
PREMPHASE ORAL TABLET 0.625-5 MG (<i>conj estrog-medroxyprogesterone ace</i>)	PB	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG (<i>conj estrog-medroxyprogesterone ace</i>)	PB	
VAGIFEM VAGINAL TABLET 10 MCG (<i>estradiol</i>)	PB	
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NF	
<i>estradiol</i> (YuvaFem Vaginal Tablet 10 Mcg)	NF	
MISCELLANEOUS		
ACTHAR GEL SUBCUTANEOUS PEN-INJECTOR 40 UNIT/0.5ML, 80 UNIT/ML (<i>corticotropin</i>)	NPSP	
ACTHAR INJECTION GEL 80 UNIT/ML (<i>corticotropin</i>)	NPSP	
<i>betaine oral powder</i>	G	
<i>cabergoline oral tablet 0.5 mg</i>	G	
CORTROPHIN GEL SUBCUTANEOUS PREFILLED SYRINGE 40 UNIT/0.5ML, 80 UNIT/ML (<i>corticotropin</i>)	NPSP	
CORTROPHIN INJECTION GEL 80 UNIT/ML (<i>corticotropin</i>)	NPSP	
CRENESSITY ORAL CAPSULE 100 MG, 25 MG, 50 MG (<i>crinecerfont</i>)	NPSP	
CRENESSITY ORAL SOLUTION 50 MG/ML (<i>crinecerfont</i>)	NPSP	
CYSTADANE ORAL POWDER (<i>betaine</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
CYSTAGON ORAL CAPSULE 150 MG, 50 MG (<i>cysteamine bitartrate</i>)	PSP	
EGRIFTA WR SUBCUTANEOUS KIT 11.6 MG (<i>tesamorelin acetate</i>)	NPSP	
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 105 MG/1.17ML (<i>romosozumab-aqqg</i>)	NF	
IMCIVREE SUBCUTANEOUS SOLUTION 10 MG/ML (<i>setmelanotide acetate</i>)	NF	
INCRELEX SUBCUTANEOUS SOLUTION 40 MG/4ML (<i>mecasermin</i>)	NPSP	
INTRAROSA VAGINAL INSERT 6.5 MG (<i>prasterone</i>)	NF	
JYNARQUE ORAL TABLET 15 MG, 30 MG (<i>tolvaptan</i>)	NF	
JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 30 & 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG (<i>tolvaptan</i>)	NF	
KORLYM ORAL TABLET 300 MG (<i>mifepristone</i>)	NF	
KUVAN ORAL PACKET 100 MG, 500 MG (<i>sapropterin dihydrochloride</i>)	NF	
KUVAN ORAL TABLET 100 MG (<i>sapropterin dihydrochloride</i>)	NF	
<i>methylergonovine maleate</i> (Methergine Oral Tablet 0.2 Mg)	G	
<i>methylergonovine maleate oral tablet 0.2 mg</i>	G	
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED 11.3 MG (<i>metreleptin</i>)	NPSP	
OSPHENA ORAL TABLET 60 MG (<i>ospemifene</i>)	NF	
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML, 20 MG/ML (<i>pegvaliase-pqpz</i>)	NF	
<i>raloxifene hcl oral tablet 60 mg</i>	CE	
REZDIFFRA ORAL TABLET 100 MG, 60 MG, 80 MG (<i>resmetirom</i>)	NF	
SAMSCA ORAL TABLET 15 MG, 30 MG (<i>tolvaptan</i>)	NPSP	
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 10 MG, 20 MG, 30 MG, 40 MG, 60 MG (<i>pasireotide pamoate</i>)	NF	
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML, 0.6 MG/ML, 0.9 MG/ML (<i>pasireotide diaspertate</i>)	NPSP	
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45ML, 28 MG/0.7ML, 40 MG/ML, 80 MG/0.8ML (<i>asfotase alfa</i>)	NPSP	
VEOZAH ORAL TABLET 45 MG (<i>fezolinetant</i>)	NPB	
VIJOICE ORAL PACKET 50 MG (<i>alpelisib</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 200 & 50 MG, 50 MG (<i>alpelisib</i>)	NF	
XURIDEN ORAL PACKET 2 GM (<i>uridine triacetate</i>)	NPSP	
ZOKINVY ORAL CAPSULE 50 MG, 75 MG (<i>lonafarnib</i>)	NPSP	
PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS		
AURYXIA ORAL TABLET 1 GM 210 MG(Fe) (<i>ferric citrate</i>)	PB	
<i>calcium acetate (phos binder) oral capsule 667 mg</i>	G	
<i>calcium acetate (phos binder) oral tablet 667 mg</i>	G	
FOSRENOL ORAL PACKET 1000 MG, 750 MG (<i>lanthanum carbonate</i>)	NF	
FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG, 750 MG (<i>lanthanum carbonate</i>)	NF	
<i>lanthanum carbonate oral tablet chewable 1000 mg, 500 mg, 750 mg</i>	NF	
REVELA ORAL PACKET 0.8 GM, 2.4 GM (<i>sevelamer carbonate</i>)	NF	
REVELA ORAL TABLET 800 MG (<i>sevelamer carbonate</i>)	NF	
<i>sevelamer carbonate oral packet 0.8 gm, 2.4 gm</i>	G	
<i>sevelamer carbonate oral tablet 800 mg</i>	G	
<i>sevelamer hcl oral tablet 400 mg, 800 mg</i>	G	
VELPHORO ORAL TABLET CHEWABLE 500 MG (<i>sucroferric oxyhydroxide</i>)	NF	
XPHOZAH ORAL TABLET 20 MG, 30 MG (<i>tenapanor hcl (ckd)</i>)	NF	
POLYNEUROPATHY		
WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 45 MG/0.8ML (<i>eplontersen sodium</i>)	NF	
POTASSIUM-REMOVING AGENTS - DRUGS TO REGULATE POTASSIUM LEVELS		
<i>sodium polystyrene sulfonate (Kionex Combination Suspension 15 Gm/60ML)</i>	G	
LOKELMA ORAL PACKET 10 GM, 5 GM (<i>sodium zirconium cyclosilicate</i>)	NF	
<i>sodium polystyrene sulfonate oral powder</i>	G	
<i>sodium polystyrene sulfonate (Sps (Sodium Polystyrene Sulf) Combination Suspension 15 Gm/60ML)</i>	G	
SPS (SODIUM POLYSTYRENE SULF) RECTAL SUSPENSION 30 GM/120ML (<i>sodium polystyrene sulfonate</i>)	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
VELTASSA ORAL PACKET 1 GM, 16.8 GM, 25.2 GM, 8.4 GM (<i>patiromer sorbitex calcium</i>)	PB	
PROGESTINS - DRUGS TO REGULATE PROGESTIN		
CRINONE VAGINAL GEL 4 %, 8 % (<i>progesterone</i>)	PB	
<i>ec-rx progesterone transdermal cream 10 %, 20 %</i>	NF	
ENDOMETRIN VAGINAL INSERT 100 MG (<i>progesterone</i>)	NF	
<i>medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	
<i>megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 625 mg/5ml</i>	G	
<i>norethindrone acetate oral tablet 5 mg</i>	G	
<i>progesterone intramuscular oil 50 mg/ml</i>	G	
<i>progesterone oral capsule 100 mg, 200 mg</i>	G	
PROMETRIUM ORAL CAPSULE 100 MG, 200 MG (<i>progesterone</i>)	NF	
PROVERA ORAL TABLET 10 MG (<i>medroxyprogesterone acetate</i>)	NPB	
THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS		
ADTHYZA ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG (<i>thyroid</i>)	NF	
ARMOUR THYROID ORAL TABLET 180 MG, 240 MG, 300 MG (<i>thyroid</i>)	NPB	
CYTOMEL ORAL TABLET 25 MCG, 5 MCG, 50 MCG (<i>liothyronine sodium</i>)	NF	
ERMEZA ORAL SOLUTION 150 MCG/5ML (<i>levothyroxine sodium</i>)	NF	
<i>levothyroxine sodium</i> (Levo-T Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 300 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	G	
<i>levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	G	
<i>levothyroxine sodium</i> (Levoxyl Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	G	
<i>liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg</i>	G	
<i>methimazole oral tablet 10 mg, 5 mg</i>	G	
<i>niva thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
NP THYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG (<i>thyroid</i>)	NPB	
<i>propylthiouracil oral tablet 50 mg</i>	G	
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG (<i>levothyroxine sodium</i>)	PB	
THYQUIDITY ORAL SOLUTION 100 MCG/5ML (<i>levothyroxine sodium</i>)	NF	
<i>thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	NF	
TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 37.5 MCG, 44 MCG, 50 MCG, 62.5 MCG, 75 MCG, 88 MCG (<i>levothyroxine sodium</i>)	NF	
TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 37.5 MCG/ML, 44 MCG/ML, 50 MCG/ML, 62.5 MCG/ML, 75 MCG/ML, 88 MCG/ML (<i>levothyroxine sodium</i>)	NF	
<i>levothyroxine sodium</i> (Unithroid Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 300 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	G	
THYROID AGENTS-DRUGS TO REGULATE THYROID LEVELS		
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG (<i>thyroid</i>)	NF	
UREA CYCLE DISORDER - DRUGS TO TREAT UREA CYCLE DISORDER		
BUPHENYL ORAL POWDER 3 GM/TSP (<i>sodium phenylbutyrate</i>)	NF	
BUPHENYL ORAL TABLET 500 MG (<i>sodium phenylbutyrate</i>)	NF	
CARBAGLU ORAL TABLET SOLUBLE 200 MG (<i>carglumic acid</i>)	NF	
<i>carglumic acid oral tablet soluble 200 mg</i>	G	
OLPRUVA (2 GM DOSE) ORAL THERAPY PACK 2 GM (<i>sodium phenylbutyrate</i>)	NF	
OLPRUVA (3 GM DOSE) ORAL THERAPY PACK 3 GM (<i>sodium phenylbutyrate</i>)	NF	
OLPRUVA (4 GM DOSE) ORAL THERAPY PACK 2 & 2 GM (<i>sodium phenylbutyrate</i>)	NF	
OLPRUVA (5 GM DOSE) ORAL THERAPY PACK 2 & 3 GM (<i>sodium phenylbutyrate</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
OLPRUVA (6 GM DOSE) ORAL THERAPY PACK 3 & 3 GM (<i>sodium phenylbutyrate</i>)	NF	
OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK 3 & 3.67 GM (<i>sodium phenylbutyrate</i>)	NF	
PHEBURANE ORAL PELLET 483 MG/GM (<i>sodium phenylbutyrate</i>)	PSP	
RAVICTI ORAL LIQUID 1.1 GM/ML (<i>glycerol phenylbutyrate</i>)	NF	
<i>sodium phenylbutyrate oral powder 3 gm/tsp</i>	G	
<i>sodium phenylbutyrate oral tablet 500 mg</i>	G	
UTERINE FIBROIDS - DRUGS TO TREAT UTERINE FIBROIDS		
MYFEMBREE ORAL TABLET 40-1-0.5 MG (<i>relugolix-estradiol-norethind</i>)	PB	
ORIAHNN ORAL CAPSULE THERAPY PACK 300-1-0.5 & 300 MG (<i>elagolix-estradiol-norethind</i>)	PB	
VASOPRESSINS - DRUGS TO REGULATE PITUITARY HORMONES		
DDAVP ORAL TABLET 0.1 MG, 0.2 MG (<i>desmopressin acetate</i>)	NPB	
<i>desmopressin ace spray refrig nasal solution 0.01 %</i>	G	
<i>desmopressin acetate oral tablet 0.1 mg, 0.2 mg</i>	G	
<i>desmopressin acetate spray nasal solution 0.01 %</i>	G	
VITAMIN D ANALOGS		
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	G	N8 (Listing does not include certain NDCs)
<i>calcitriol oral solution 1 mcg/ml</i>	G	
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	G	N8 (Listing does not include certain NDCs)
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	G	
RAYALDEE ORAL CAPSULE EXTENDED RELEASE 30 MCG (<i>calcifediol</i>)	NPB	
ROCALTROL ORAL CAPSULE 0.25 MCG, 0.5 MCG (<i>calcitriol</i>)	NPB	
ROCALTROL ORAL SOLUTION 1 MCG/ML (<i>calcitriol</i>)	NPB	
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG (<i>paricalcitol</i>)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS		
ANTICHOLINERGICS		
CUVPOSA ORAL SOLUTION 1 MG/5ML (<i>glycopyrrolate</i>)	NPB	
<i>dicyclomine hcl oral capsule 10 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>dicyclomine hcl oral solution 10 mg/5ml</i>	G	
<i>dicyclomine hcl oral tablet 20 mg</i>	G	N8 (Listing does not include certain NDCs)
GLYCATATE ORAL TABLET 1.5 MG (<i>glycopyrrolate</i>)	NF	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>glycopyrrolate oral tablet 1.5 mg</i>	NF	
<i>hyoscyamine sulfate er oral tablet extended release 12 hour 0.375 mg</i>	NF	
<i>hyoscyamine sulfate oral elixir 0.125 mg/5ml</i>	G	
<i>hyoscyamine sulfate oral solution 0.125 mg/ml</i>	G	
<i>hyoscyamine sulfate oral tablet 0.125 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>hyoscyamine sulfate oral tablet dispersible 0.125 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>hyoscyamine sulfate sublingual tablet sublingual 0.125 mg</i>	G	N8 (Listing does not include certain NDCs)
LEVBIID ORAL TABLET EXTENDED RELEASE 12 HOUR 0.375 MG (<i>hyoscyamine sulfate</i>)	NPB	
LEVSIN ORAL TABLET 0.125 MG (<i>hyoscyamine sulfate</i>)	NPB	
LEVSIN/SL SUBLINGUAL TABLET SUBLINGUAL 0.125 MG (<i>hyoscyamine sulfate</i>)	NPB	
<i>methscopolamine bromide oral tablet 2.5 mg, 5 mg</i>	G	
<i>hyoscyamine sulfate</i> (Nulev Oral Tablet Dispersible 0.125 Mg)	G	
<i>oscimin oral tablet 0.125 mg</i>	G	
<i>oscimin sublingual tablet sublingual 0.125 mg</i>	G	
ANTIDIARRHEALS		
<i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5ml</i>	G	
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	G	
LACTEROL ORAL CAPSULE (<i>probiotic product</i>)	NF	
<i>lactovive oral capsule</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
LOMOTIL ORAL TABLET 2.5-0.025 MG (<i>diphenoxylate-atropine</i>)	NPB	
<i>loperamide hcl oral capsule 2 mg</i>	G	
MOTOFEN ORAL TABLET 1-0.025 MG (<i>difenoxin-atropine</i>)	NF	
MYTESI ORAL TABLET DELAYED RELEASE 125 MG (<i>crofelemer</i>)	NF	
<i>surebiotic probiotic support oral capsule</i>	NF	
<i>wellpro 31 oral capsule</i>	NF	
<i>zelac oral capsule</i>	NF	
ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING		
AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED 235-0.25 MG (<i>fosnetupitant-palonosetron</i>)	NPB	
AKYNZEO ORAL CAPSULE 300-0.5 MG (<i>netupitant-palonosetron</i>)	NPB	
ANZEMET ORAL TABLET 50 MG (<i>dolasetron mesylate</i>)	NPB	
<i>aprepitant oral capsule 125 mg, 40 mg, 80 & 125 mg, 80 mg</i>	G	
BONJESTA ORAL TABLET EXTENDED RELEASE 20-20 MG (<i>doxylamine-pyridoxine</i>)	NPB	
<i>prochlorperazine (Compro Rectal Suppository 25 Mg)</i>	G	
DICLEGIS ORAL TABLET DELAYED RELEASE 10-10 MG (<i>doxylamine-pyridoxine</i>)	NPB	
<i>doxylamine-pyridoxine oral tablet delayed release 10-10 mg</i>	G	
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	G	
EMEND BIPACK ORAL CAPSULE 80 MG (<i>aprepitant</i>)	NPB	
EMEND INTRAVENOUS SOLUTION RECONSTITUTED 150 MG (<i>fosaprepitant dimeglumine</i>)	NPB	
EMEND ORAL SUSPENSION RECONSTITUTED 125 MG/5ML (<i>aprepitant</i>)	NPB	
EMEND TRIPACK ORAL CAPSULE 80 & 125 MG (<i>aprepitant</i>)	NPB	
<i>granisetron hcl oral tablet 1 mg</i>	G	
<i>meclizine hcl oral tablet 12.5 mg, 25 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>meclizine hcl oral tablet 50 mg</i>	G	
<i>metoclopramide hcl oral solution 10 mg/10ml</i>	G	
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>metoclopramide hcl oral tablet dispersible 5 mg</i>	G	
<i>ondansetron hcl oral solution 4 mg/5ml</i>	G	
<i>ondansetron hcl oral tablet 24 mg, 4 mg, 8 mg</i>	G	
<i>ondansetron oral tablet dispersible 4 mg, 8 mg</i>	G	
<i>prochlorperazine edisylate injection solution 10 mg/2ml</i>	G	
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>prochlorperazine rectal suppository 25 mg</i>	G	
<i>promethazine hcl oral solution 6.25 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg</i>	G	
<i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>	G	
<i>promethazine hcl (Promethegan Rectal Suppository 12.5 Mg, 25 Mg)</i>	G	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG (<i>promethazine hcl</i>)	G	
SANCUSO TRANSDERMAL PATCH 3.1 MG/24HR (<i>granisetron</i>)	PB	
<i>scopolamine transdermal patch 72 hour 1 mg/3days</i>	G	
SYNDROS ORAL SOLUTION 5 MG/ML (<i>dronabinol</i>)	NF	
TRANSDERM SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS (<i>scopolamine base</i>)	NF	
<i>trimethobenzamide hcl oral capsule 300 mg</i>	G	N8 (Listing does not include certain NDCs)
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK 2 X 90 MG (<i>rolapitant hcl</i>)	NPB	
ANTISPASMODICS - DRUGS FOR MUSCLE SPASM		
LIBRAX ORAL CAPSULE 5-2.5 MG (<i>chlordiazepoxide-clidinium</i>)	NF	
H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID		
<i>cimetidine hcl oral solution 300 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<i>cimetidine oral tablet 200 mg, 300 mg, 400 mg, 800 mg</i>	G	
<i>famotidine oral suspension reconstituted 40 mg/5ml</i>	G	
<i>famotidine oral tablet 20 mg, 40 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>nizatidine oral capsule 150 mg, 300 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
INFLAMMATORY BOWEL DISEASE - BOWEL, INTESTINE, AND STOMACH CONDITION DRUGS		
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.375 GM (<i>mesalamine</i>)	NPB	
AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE 500 MG (<i>sulfasalazine</i>)	NPB	
AZULFIDINE ORAL TABLET 500 MG (<i>sulfasalazine</i>)	NPB	
<i>balsalazide disodium oral capsule 750 mg</i>	G	
<i>budesonide er oral tablet extended release 24 hour 9 mg</i>	NF	
<i>budesonide oral capsule delayed release particles 3 mg</i>	G	
COLAZAL ORAL CAPSULE 750 MG (<i>balsalazide disodium</i>)	NF	
CORTENEMA RECTAL ENEMA 100 MG/60ML (<i>hydrocortisone</i>)	NPB	
CORTIFOAM EXTERNAL FOAM 10 % (<i>hydrocortisone acetate</i>)	PB	
DELZICOL ORAL CAPSULE DELAYED RELEASE 400 MG (<i>mesalamine</i>)	NF	
DIPENTUM ORAL CAPSULE 250 MG (<i>olsalazine sodium</i>)	NPB	
<i>hydrocortisone rectal enema 100 mg/60ml</i>	G	
LIALDA ORAL TABLET DELAYED RELEASE 1.2 GM (<i>mesalamine</i>)	NF	
<i>mesalamine er oral capsule extended release 24 hour 0.375 gm</i>	G	
<i>mesalamine oral capsule delayed release 400 mg</i>	G	
<i>mesalamine oral tablet delayed release 1.2 gm, 800 mg</i>	G	
<i>mesalamine rectal enema 4 gm</i>	G	
<i>mesalamine rectal suppository 1000 mg</i>	G	
<i>mesalamine-cleanser rectal kit 4 gm</i>	G	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG, 500 MG (<i>mesalamine</i>)	NF	
SFROWASA RECTAL ENEMA 4 GM/60ML (<i>mesalamine</i>)	NPB	
<i>sulfasalazine oral tablet 500 mg</i>	G	
<i>sulfasalazine oral tablet delayed release 500 mg</i>	G	
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR 9 MG (<i>budesonide</i>)	PB	
UCERIS RECTAL FOAM 2 MG/ACT (<i>budesonide</i>)	NPB	
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION		
AMITIZA ORAL CAPSULE 24 MCG, 8 MCG (<i>lubiprostone</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
IBSRELA ORAL TABLET 50 MG (<i>tenapanor hcl</i>)	NF	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG (<i>linaclotide</i>)	PB	
<i>lubiprostone oral capsule 24 mcg, 8 mcg</i>	G	N8 (Listing does not include certain NDCs)
TRULANCE ORAL TABLET 3 MG (<i>plecanatide</i>)	NPB	
IRRITABLE BOWEL SYNDROME WITH DIARRHEA		
<i>alosetron hcl oral tablet 0.5 mg, 1 mg</i>	G	
LOTRONEX ORAL TABLET 0.5 MG, 1 MG (<i>alosetron hcl</i>)	NPB	
VIBERZI ORAL TABLET 100 MG, 75 MG (<i>eluxadoline</i>)	PB	
LAXATIVES - DRUGS FOR CONSTIPATION		
CLENPIQ ORAL SOLUTION 10-3.5-12 MG-GM -GM/175ML (<i>sod picosulfate-mag ox-cit acd</i>)	CE	
<i>constulose oral solution 10 gm/15ml</i>	G	
<i>enulose oral solution 10 gm/15ml</i>	G	
<i>generlac oral solution 10 gm/15ml</i>	G	N8 (Listing does not include certain NDCs)
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM (<i>peg 3350-kcl-nabcb-nacl-nasulf</i>)	NF	
<i>lactulose (Kristalose Oral Packet 10 Gm, 20 Gm)</i>	G	
<i>lactulose oral packet 10 gm, 20 gm</i>	G	N8 (Listing does not include certain NDCs)
<i>lactulose oral solution 10 gm/15ml</i>	G	N8 (Listing does not include certain NDCs)
<i>lactulose oral solution 20 gm/30ml</i>	NF	
MOVIPREP ORAL SOLUTION RECONSTITUTED 100 GM (<i>peg-kcl-nacl-nasulf-na asc-c</i>)	NF	
<i>na sulfate-k sulfate-mg sulf oral solution 17.5-3.13-1.6 gm/177ml</i>	CE	
<i>peg-3350/electrolytes/ascorbat oral solution reconstituted 100 gm</i>	CE	
<i>peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted 100 gm</i>	CE	
PEG-PREP ORAL KIT 5-210 MG-GM (<i>bisacodyl-peg-kcl-nabicar-nacl</i>)	CE	
PLENVU ORAL SOLUTION RECONSTITUTED 140 GM (<i>peg-kcl-nacl-nasulf-na asc-c</i>)	CE	
SUFLAVE ORAL SOLUTION RECONSTITUTED 178.7 GM (<i>peg 3350-kcl-nacl-nasulf-mgsul</i>)	CE	
SUPREP BOWEL PREP KIT ORAL SOLUTION 17.5-3.13-1.6 GM/177ML (<i>na sulfate-k sulfate-mg sulf</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
SUTAB ORAL TABLET 1479-225-188 MG (<i>sodium sulfate-mag sulfate-kcl</i>)	CE	
MISCELLANEOUS		
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE 200 MCG, 600 MCG (<i>odevixibat</i>)	NF	
BYLVAY ORAL CAPSULE 1200 MCG, 400 MCG (<i>odevixibat</i>)	NF	
CARAFATE ORAL TABLET 1 GM (<i>sucralfate</i>)	NF	
CHOLBAM ORAL CAPSULE 250 MG, 50 MG (<i>cholic acid</i>)	NPSP	
<i>cromolyn sodium oral concentrate 100 mg/5ml</i>	G	
CYTOTEC ORAL TABLET 100 MCG, 200 MCG (<i>misoprostol</i>)	NPB	
EOHILIA ORAL SUSPENSION 2 MG/10ML (<i>budesonide</i>)	NF	
GATTEX SUBCUTANEOUS KIT 5 MG (<i>teduglutide (rdna)</i>)	NPSP	
GIMOTI NASAL SOLUTION 15 MG/ACT (<i>metoclopramide hcl</i>)	NF	
IQIRVO ORAL TABLET 80 MG (<i>elafibranor</i>)	PSP	
LIVDELZI ORAL CAPSULE 10 MG (<i>seladelpar lysine</i>)	G	N8 (Listing does not include certain NDCs)
LIVMARLI ORAL SOLUTION 19 MG/ML, 9.5 MG/ML (<i>maralixibat chloride</i>)	NPSP	
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	G	
MOTEGRITY ORAL TABLET 1 MG, 2 MG (<i>prucalopride succinate</i>)	NF	
MOVANTIK ORAL TABLET 12.5 MG, 25 MG (<i>naloxegol oxalate</i>)	PB	
OALIVA ORAL TABLET 10 MG, 5 MG (<i>obeticholic acid</i>)	NF	
RELISTOR ORAL TABLET 150 MG (<i>methylnaltrexone bromide</i>)	NF	
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML (<i>methylnaltrexone bromide</i>)	NF	
RELISTOR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 12 MG/0.6ML, 8 MG/0.4ML (<i>methylnaltrexone bromide</i>)	NF	
RELTONE ORAL CAPSULE 200 MG, 400 MG (<i>ursodiol</i>)	NF	
SUCRAID ORAL SOLUTION 8500 UNIT/ML (<i>sacrosidase</i>)	NPSP	
<i>sucralfate oral suspension 1 gm/10ml</i>	NF	
<i>sucralfate oral tablet 1 gm</i>	G	N8 (Listing does not include certain NDCs)
SYMPROIC ORAL TABLET 0.2 MG (<i>naldemedine tosylate</i>)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
URSO FORTE ORAL TABLET 500 MG (<i>ursodiol</i>)	NPB	
<i>ursodiol oral capsule 200 mg, 400 mg</i>	NF	
<i>ursodiol oral capsule 300 mg</i>	G	
<i>ursodiol oral tablet 250 mg, 500 mg</i>	G	
URSODIOL+SYRSPEND SF ORAL SUSPENSION 30 MG/ML (<i>ursodiol</i>)	NF	
VOQUEZNA ORAL TABLET 10 MG, 20 MG (<i>vonoprazan fumarate</i>)	NPB	
VOWST ORAL CAPSULE (<i>fecal microb spores, live-brpk</i>)	NPSP	
XERMELO ORAL TABLET 250 MG (<i>telotristat etiprate</i>)	NPSP	
PANCREATIC ENZYMES		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000-38000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000-114000 UNIT, 6000-19000 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	PB	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 2600-8800 UNIT, 37000-97300 UNIT, 4200-14200 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	NPB	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 16000-57500 UNIT, 24000-86250 UNIT, 4000-14375 UNIT, 8000-28750 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	NPB	
VIOKACE ORAL TABLET 10440-39150 UNIT, 20880-78300 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	PB	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	PB	
PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID		
ACIPHEX ORAL TABLET DELAYED RELEASE 20 MG (<i>rabeprazole sodium</i>)	NF	
DEXILANT ORAL CAPSULE DELAYED RELEASE 30 MG, 60 MG (<i>dexlansoprazole</i>)	NF	
<i>dexlansoprazole oral capsule delayed release 30 mg, 60 mg</i>	NF	
<i>esomeprazole magnesium oral capsule delayed release 20 mg, 40 mg</i>	G	
KONVOMEF ORAL SUSPENSION RECONSTITUTED 2-84 MG/ML (<i>omeprazole-sodium bicarbonate</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>lansoprazole oral capsule delayed release 15 mg, 30 mg</i>	G	
<i>lansoprazole oral tablet delayed release dispersible 15 mg, 30 mg</i>	NF	
NEXIUM ORAL CAPSULE DELAYED RELEASE 20 MG, 40 MG (<i>esomeprazole magnesium</i>)	NF	
NEXIUM ORAL PACKET 10 MG, 2.5 MG, 20 MG, 40 MG, 5 MG (<i>esomeprazole magnesium</i>)	NF	
<i>omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg</i>	G	
<i>omeprazole-sodium bicarbonate oral capsule 20-1100 mg, 40-1100 mg</i>	NF	
<i>omeprazole-sodium bicarbonate oral packet 20-1680 mg, 40-1680 mg</i>	NF	
<i>pantoprazole sodium oral packet 40 mg</i>	NF	
<i>pantoprazole sodium oral tablet delayed release 20 mg, 40 mg</i>	G	N8 (Listing does not include certain NDCs)
PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG (<i>lansoprazole</i>)	NF	
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE 15 MG, 30 MG (<i>lansoprazole</i>)	NF	
PRILOSEC ORAL PACKET 10 MG, 2.5 MG (<i>omeprazole magnesium</i>)	NF	
PROTONIX ORAL PACKET 40 MG (<i>pantoprazole sodium</i>)	NF	
PROTONIX ORAL TABLET DELAYED RELEASE 20 MG, 40 MG (<i>pantoprazole sodium</i>)	NF	
<i>rabeprazole sodium oral capsule sprinkle 10 mg</i>	NPB	
<i>rabeprazole sodium oral tablet delayed release 20 mg</i>	G	
RECTAL, CORTICOSTEROIDS		
ANUSOL-HC EXTERNAL CREAM 2.5 % (<i>hydrocortisone</i>)	NPB	
<i>hydrocortisone (perianal) external cream 1 %, 2.5 %</i>	G	
<i>hydrocortisone ace-pramoxine external cream 1-1 %</i>	G	
PROCORT EXTERNAL CREAM 1.85-1.15 % (<i>hydrocortisone ace-pramoxine</i>)	NPB	
PROCTOFOAM HC EXTERNAL FOAM 1-1 % (<i>hydrocortisone ace-pramoxine</i>)	PB	
<i>hydrocortisone (Procto-Med Hc External Cream 2.5 %)</i>	G	
<i>hydrocortisone (Proctozone-Hc External Cream 2.5 %)</i>	G	
RECTAL, MISCELLANEOUS		
BARRIGEL RECTAL GEL 20 MG/ML (<i>hyaluronic acid (rectal)</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
ULCER THERAPY COMBINATIONS		
<i>amoxicill-clarithro-lansopraz oral therapy pack 500 & 500 & 30 mg</i>	G	
OMECLAMOX-PAK ORAL 500-500-20 MG (<i>amoxicill-clarithro-omeprazole</i>)	NPB	
PYLERA ORAL CAPSULE 140-125-125 MG (<i>bis subcit-metronid-tetracyc</i>)	NPB	
TALICIA ORAL CAPSULE DELAYED RELEASE 250-12.5-10 MG (<i>amoxicill-rifabutin-omeprazole</i>)	PB	
GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS		
BENIGN PROSTATIC HYPERPLASIA - DRUGS TO TREAT ENLARGED PROSTATE		
<i>alfuzosin hcl er oral tablet extended release 24 hour 10 mg</i>	G	
CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG (<i>doxazosin mesylate</i>)	NPB	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG (<i>doxazosin mesylate</i>)	NPB	
<i>doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>dutasteride oral capsule 0.5 mg</i>	G	
<i>dutasteride-tamsulosin hcl oral capsule 0.5-0.4 mg</i>	G	
ENTADFI ORAL CAPSULE 5-5 MG (<i>finasteride-tadalafil</i>)	NF	
<i>finasteride oral tablet 5 mg</i>	G	
JALYN ORAL CAPSULE 0.5-0.4 MG (<i>dutasteride-tamsulosin hcl</i>)	NF	
PROSCAR ORAL TABLET 5 MG (<i>finasteride</i>)	NPB	
RAPAFLO ORAL CAPSULE 4 MG, 8 MG (<i>silodosin</i>)	NF	
<i>silodosin oral capsule 4 mg, 8 mg</i>	G	
<i>tamsulosin hcl oral capsule 0.4 mg</i>	G	
<i>terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG (<i>alfuzosin hcl</i>)	NF	
CONTRACEPTIVES - PRODUCTS FOR BIRTH CONTROL		
ENCARE VAGINAL SUPPOSITORY 100 MG (<i>nonoxynol-9</i>)	CE	
OPTIONS GYNOL II CONTRACEPTIVE VAGINAL GEL 3 % (<i>nonoxynol-9</i>)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
PHEXXI VAGINAL GEL 1.8-1-0.4 % (<i>lactic ac-citric ac-pot bitart</i>)	CE	
TODAY SPONGE VAGINAL 1000 MG (<i>nonoxynol-9</i>)	CE	
VCF VAGINAL CONTRACEPTIVE VAGINAL FILM 28 % (<i>nonoxynol-9</i>)	CE	
VCF VAGINAL CONTRACEPTIVE VAGINAL GEL 4 % (<i>nonoxynol-9</i>)	CE	
ERECTILE DYSFUNCTION		
<i>bi-mix intracavernosal solution reconstituted 150-5 mg</i>	NF	
CIALIS ORAL TABLET 10 MG, 20 MG, 5 MG (<i>tadalafil</i>)	NF	
IFE-BIMIX 30/1 INTRACAVERNOSAL SOLUTION 30-1 MG/ML (<i>papaverine-phentolamine</i>)	NF	
<i>quad-mix intracavernosal solution reconstituted 150-10-0.1-1 mg</i>	NF	
STENDRA ORAL TABLET 100 MG, 200 MG, 50 MG (<i>avanafil</i>)	NF	
<i>super bi-mix intracavernosal solution reconstituted 150-10 mg</i>	NF	
<i>super quad-mix intracavernosal solution reconstituted 150-20-0.2-2 mg</i>	NF	
<i>super tri-mix intracavernosal solution reconstituted 150-10-100 mg-mg-mcg</i>	NF	
<i>tadalafil oral tablet 20 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>tri-mix intracavernosal solution reconstituted 150-5-50 mg-mg-mcg</i>	NF	
VIAGRA ORAL TABLET 100 MG, 25 MG, 50 MG (<i>sildenafil citrate</i>)	NF	
MISCELLANEOUS		
<i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>cytra k crystals oral packet 3300-1002 mg</i>	G	
ELMIRON ORAL CAPSULE 100 MG (<i>pentosan polysulfate sodium</i>)	NF	
FILSPARI ORAL TABLET 200 MG, 400 MG (<i>sparsentan</i>)	PSP	
LITHOSTAT ORAL TABLET 250 MG (<i>acetohydroxamic acid</i>)	NF	
ORACIT ORAL SOLUTION 490-640 MG/5ML (<i>sod citrate-citric acid</i>)	NPB	
<i>pot & sod cit-cit ac oral solution 550-500-334 mg/5ml</i>	G	
<i>potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg), 5 meq (540 mg)</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>potassium citrate-citric acid oral solution 1100-334 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
PROCYSBI ORAL CAPSULE DELAYED RELEASE 25 MG, 75 MG (<i>cysteamine bitartrate</i>)	NF	
PROCYSBI ORAL PACKET 300 MG, 75 MG (<i>cysteamine bitartrate</i>)	NF	
RENACIDIN IRRIGATION SOLUTION (<i>citric ac-gluconolact-mg carb</i>)	NPB	
RIVFLOZA SUBCUTANEOUS SOLUTION 80 MG/0.5ML (<i>nedosiran sodium</i>)	NF	
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 128 MG/0.8ML, 160 MG/ML (<i>nedosiran sodium</i>)	NF	
<i>sod citrate-citric acid oral solution 500-334 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
TARPEYO ORAL CAPSULE DELAYED RELEASE 4 MG (<i>budesonide</i>)	NF	
THIOLA EC ORAL TABLET DELAYED RELEASE 100 MG, 300 MG (<i>tiopronin</i>)	NF	
THIOLA ORAL TABLET 100 MG (<i>tiopronin</i>)	NF	
<i>tricitrates oral solution 550-500-334 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE 10 MEQ (1080 MG) (<i>potassium citrate</i>)	NPB	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE 15 MEQ (1620 MG) (<i>potassium citrate</i>)	NPB	
VANRAFIA ORAL TABLET 0.75 MG (<i>atrasentan hcl</i>)	PSP	
URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE		
<i>darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg, 7.5 mg</i>	G	
<i>flavoxate hcl oral tablet 100 mg</i>	G	
GEMTESA ORAL TABLET 75 MG (<i>vibegron</i>)	PB	
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER 8 MG/ML (<i>mirabegron</i>)	NF	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG (<i>mirabegron</i>)	NF	
<i>oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>oxybutynin chloride oral solution 5 mg/5ml</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>oxybutynin chloride oral tablet 2.5 mg</i>	NF	
<i>oxybutynin chloride oral tablet 5 mg</i>	G	
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY 3.9 MG/24HR (<i>oxybutynin</i>)	NF	
<i>solifenacin succinate oral tablet 10 mg, 5 mg</i>	G	
<i>tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg</i>	G	
<i>tolterodine tartrate oral tablet 1 mg, 2 mg</i>	G	
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG (<i>fesoterodine fumarate</i>)	NF	
<i>tropium chloride er oral capsule extended release 24 hour 60 mg</i>	G	
<i>tropium chloride oral tablet 20 mg</i>	G	N8 (Listing does not include certain NDCs)
VAGINAL ANTI-INFECTIVES - DRUGS TO TREAT VAGINAL INFECTIONS		
CLEOCIN VAGINAL CREAM 2 % (<i>clindamycin phosphate</i>)	NPB	
CLEOCIN VAGINAL SUPPOSITORY 100 MG (<i>clindamycin phosphate</i>)	NPB	
<i>clindamycin phosphate vaginal cream 2 %</i>	G	
CLINDESSE VAGINAL CREAM 2 % (<i>clindamycin phosphate (1 dose)</i>)	NPB	
GYNAZOLE-1 VAGINAL CREAM 2 % (<i>butoconazole nitrate (1 dose)</i>)	NPB	
<i>metronidazole vaginal gel 0.75 %</i>	G	
<i>miconazole 3 vaginal suppository 200 mg</i>	G	
NUVESSA VAGINAL GEL 1.3 % (<i>metronidazole</i>)	NF	
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	G	
<i>terconazole vaginal suppository 80 mg</i>	G	
VANDAZOLE VAGINAL GEL 0.75 % (<i>metronidazole</i>)	NF	
XACIATO VAGINAL GEL 2 % (<i>clindamycin phosphate</i>)	NPB	
HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS		
ANTICOAGULANTS - BLOOD THINNERS		
ARIXTRA SUBCUTANEOUS SOLUTION 10 MG/0.8ML, 2.5 MG/0.5ML, 5 MG/0.4ML, 7.5 MG/0.6ML (<i>fondaparinux sodium</i>)	NPB	
<i>dabigatran etexilate mesylate oral capsule 110 mg, 150 mg, 75 mg</i>	G	N8 (Listing does not include certain NDCs)

Prescription Drug Name	Drug Tier	Drug Notes
ELIQUIS (1.5 MG PACK) ORAL TABLET SOLUBLE 3 X 0.5 MG (<i>apixaban</i>)	PB	
ELIQUIS (2 MG PACK) ORAL TABLET SOLUBLE 4 X 0.5 MG (<i>apixaban</i>)	PB	
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG (<i>apixaban</i>)	PB	
ELIQUIS ORAL CAPSULE SPRINKLE 0.15 MG (<i>apixaban</i>)	PB	
ELIQUIS ORAL TABLET 2.5 MG, 5 MG (<i>apixaban</i>)	PB	
ELIQUIS ORAL TABLET SOLUBLE 0.5 MG (<i>apixaban</i>)	PB	
<i>enoxaparin sodium injection solution 300 mg/3ml</i>	G	
<i>enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml</i>	G	
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	G	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML, 95000 UNIT/3.8ML (<i>dalteparin sodium</i>)	NPB	
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML (<i>dalteparin sodium</i>)	NPB	
<i>heparin sod (porcine) in d5w intravenous solution 100 unit/ml, 25000-5 ut/500ml-%</i>	NF	
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>	G	
<i>heparin sodium (porcine) pf injection solution 5000 unit/0.5ml</i>	G	
<i>hepmed combination kit 100&0.9&2.5-2.5 ut/ml&%</i>	NF	
<i>warfarin sodium</i> (Jantoven Oral Tablet 1 Mg, 10 Mg, 2 Mg, 2.5 Mg, 3 Mg, 4 Mg, 5 Mg, 6 Mg, 7.5 Mg)	G	
LOVENOX INJECTION SOLUTION 300 MG/3ML (<i>enoxaparin sodium</i>)	NPB	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/0.8ML, 150 MG/ML, 30 MG/0.3ML, 40 MG/0.4ML, 60 MG/0.6ML, 80 MG/0.8ML (<i>enoxaparin sodium</i>)	NPB	
PRADAXA ORAL CAPSULE 110 MG, 150 MG, 75 MG (<i>dabigatran etexilate mesylate</i>)	NF	
PRADAXA ORAL PACKET 110 MG, 150 MG, 20 MG, 30 MG, 40 MG, 50 MG (<i>dabigatran etexilate mesylate</i>)	NF	
SAVAYSA ORAL TABLET 15 MG, 30 MG, 60 MG (<i>edoxaban tosylate</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	G	
XARELTO ORAL SUSPENSION RECONSTITUTED 1 MG/ML (<i>rivaroxaban</i>)	PB	
XARELTO ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG (<i>rivaroxaban</i>)	PB	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG (<i>rivaroxaban</i>)	PB	
BLEEDING DISORDERS AGENTS		
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT (<i>antihemophilic factor-vwf</i>)	NPSP	
CABLIVI INJECTION KIT 11 MG (<i>caplacizumab-yhdp</i>)	NF	
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED 250 UNIT, 500 UNIT (<i>coagulation factor x (human)</i>)	NPSP	
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2500 UNIT, 500 UNIT (<i>antiinhibitor coagulant cmplx</i>)	NF	
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED , 2 GM (<i>fibrinogen concentrate (human)</i>)	NPSP	
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT (<i>antihemophilic factor-vwf</i>)	NPSP	
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG, 8 MG (<i>coagulation factor viia recomb</i>)	PSP	
SEVENFACT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG (<i>coagulation factor viia-jncw</i>)	PSP	
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED 1300 UNIT, 650 UNIT (<i>von willebrand factor (recomb)</i>)	NF	
WILATE INTRAVENOUS KIT 1000-1000 UNIT, 500-500 UNIT (<i>antihemophilic factor-vwf</i>)	PSP	
HEMATOPOIETIC GROWTH FACTORS		
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML (<i>darbepoetin alfa</i>)	PSP	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML, 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML (<i>darbepoetin alfa</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML (<i>epoetin alfa</i>)	NF	
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-jmdb</i>)	PSP	
FYLNETRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-pbbk</i>)	NF	
GRANIX SUBCUTANEOUS SOLUTION 300 MCG/ML (<i>tbo-filgrastim</i>)	NF	
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>tbo-filgrastim</i>)	NF	
LEUKINE INJECTION SOLUTION RECONSTITUTED 250 MCG (<i>sargramostim</i>)	NF	
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 120 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML, 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML (<i>methoxy peg-epoetin beta</i>)	NF	
NEULASTA ONPRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim</i>)	NF	
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim</i>)	NF	
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML (<i>filgrastim</i>)	NF	
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim</i>)	NF	
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML (<i>filgrastim-aafi</i>)	PSP	
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim-aafi</i>)	PSP	
NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-apgf</i>)	PSP	
PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML (<i>epoetin alfa</i>)	PSP	
<i>releuko subcutaneous solution prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml</i>	NF	
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML (<i>epoetin alfa-epbx</i>)	PSP	
ROLVEDON SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 13.2 MG/0.6ML (<i>eflapeggrastim-xnst</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
STIMUFEND SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-fpgk</i>)	NF	
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6 MG/0.6ML (<i>pegfilgrastim-cbqv</i>)	NF	
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-cbqv</i>)	NF	
XOLREMDI ORAL CAPSULE 100 MG (<i>mavorixafor</i>)	NF	
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim-sndz</i>)	NF	
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-bmez</i>)	NF	
HEMOPHILIA A AGENTS		
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>antihemophil factor (rahf-pfm)</i>)	PSP	
<i>adynovate intravenous solution reconstituted 1000 unit, 1500 unit, 2000 unit, 250 unit, 3000 unit, 500 unit, 750 unit</i>	PSP	
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 500 UNIT (<i>antihemophil fact single chain</i>)	PSP	
ALTUVIIIO INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>antihem fact fc-vwf-xten-ehl</i>)	PSP	
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT, 5000 UNIT, 6000 UNIT, 750 UNIT (<i>antihem fact (bdd-rfviiiifc)</i>)	PSP	
ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>antihemoph fact rcmb gpeg-exei</i>)	PSP	
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 12 MG/0.4ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML (<i>emicizumab-kxwh</i>)	NPSP	
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT (<i>antihemophilic factor</i>)	NPSP	
JIVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>ahf (bdd-rfviii peg-aucl)</i>)	PSP	
KOATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 250 UNIT, 500 UNIT (<i>antihemophilic factor</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT (<i>antihemophilic factor</i>)	NPSP	
KOGENATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (<i>antihem factor recomb (rfviii)</i>)	PSP	
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (<i>antihemophil factor (rahf-pfm)</i>)	PSP	
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (<i>antihemophil fact bd truncated</i>)	PSP	
NUWIQ INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>antihem fact (bdd-rfviii,sim)</i>)	PSP	
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>antihem fact (bdd-rfviii,sim)</i>)	PSP	
obizur intravenous solution reconstituted 500 unit	NPSP	
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED 1241-1800 UNIT, 1801-2400 UNIT, 220-400 UNIT, 401-800 UNIT, 801-1240 UNIT (<i>antihem factor recomb (rfviii)</i>)	NPSP	
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT (<i>antihem fact (bdd-rfviii,mor)</i>)	PSP	
XYNTHA SOLOFUSE INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (<i>antihem fact (bdd-rfviii,mor)</i>)	PSP	
HEMOPHILIA B AGENTS		
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT (<i>coagulation factor ix</i>)	NPSP	
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>coagulation factor ix (rfixfc)</i>)	NF	
BENEFIX INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (<i>coagulation factor ix (recomb)</i>)	PSP	
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3500 UNIT, 500 UNIT (<i>coagulation factor ix (rix-fp)</i>)	NPSP	
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 3000 UNIT, 500 UNIT (<i>coagulation factor ix (recomb)</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT (<i>factor ix complex</i>)	NPSP	
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT (<i>coagulation factor ix glycopeg</i>)	PSP	
<i>rixubis intravenous solution reconstituted 1000 unit, 2000 unit, 250 unit, 3000 unit, 500 unit</i>	NF	
MISCELLANEOUS		
AGRYLIN ORAL CAPSULE 0.5 MG (<i>anagrelide hcl</i>)	NPB	
<i>aminocaproic acid oral tablet 1000 mg, 500 mg</i>	G	
<i>anagrelide hcl oral capsule 0.5 mg, 1 mg</i>	G	
<i>cilostazol oral tablet 100 mg, 50 mg</i>	G	
<i>pentoxifylline er oral tablet extended release 400 mg</i>	G	
PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG (<i>mitapivat sulfate</i>)	NF	
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK 5 MG, 7 X 20 MG & 7 X 5 MG, 7 X 50 MG & 7 X 20 MG (<i>mitapivat sulfate</i>)	NF	
TAVNEOS ORAL CAPSULE 10 MG (<i>avacopan</i>)	NPSP	
<i>tranexamic acid oral tablet 650 mg</i>	G	
PAROXYSMAL NOCTURNAL HEMOGLOBINURIA (PNH) AGENTS		
EMPAVELI SUBCUTANEOUS SOLUTION 1080 MG/20ML (<i>pegcetacoplan</i>)	PSP	
FABHALTA ORAL CAPSULE 200 MG (<i>iptacopan hcl</i>)	NPSP	
VOYDEYA ORAL TABLET 100 MG (<i>danicopan</i>)	NF	
VOYDEYA ORAL TABLET THERAPY PACK 50 & 100 MG (<i>danicopan</i>)	NF	
PLATELET AGGREGATION INHIBITORS - BLOOD THINNERS		
<i>aspirin-dipyridamole er oral capsule extended release 12 hour 25-200 mg</i>	G	
BRILINTA ORAL TABLET 60 MG, 90 MG (<i>ticagrelor</i>)	PB	
<i>clopidogrel bisulfate oral tablet 300 mg, 75 mg</i>	G	
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>	G	
EFFIENT ORAL TABLET 10 MG, 5 MG (<i>prasugrel hcl</i>)	NPB	
PLAVIX ORAL TABLET 75 MG (<i>clopidogrel bisulfate</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>prasugrel hcl oral tablet 10 mg, 5 mg</i>	G	
YOSPRALA ORAL TABLET DELAYED RELEASE 325-40 MG, 81-40 MG (<i>aspirin-omeprazole</i>)	NF	
ZONTIVITY ORAL TABLET 2.08 MG (<i>vorapaxar sulfate</i>)	NF	
SICKLE CELL DISEASE		
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG (<i>hydroxyurea</i>)	NPB	
ENDARI ORAL PACKET 5 GM (<i>glutamine (sickle cell)</i>)	PSP	
SIKLOS ORAL TABLET 100 MG, 1000 MG (<i>hydroxyurea</i>)	PB	
THROMBOCYTOPENIA AGENTS - DRUGS TO TREAT PLATELET DISORDERS		
ALVAIZ ORAL TABLET 18 MG, 36 MG, 54 MG, 9 MG (<i>eltrombopag choline</i>)	PSP	
DOPTLET ORAL TABLET 20 MG (<i>avatrombopag maleate</i>)	PSP	
DOPTLET SPRINKLE ORAL CAPSULE SPRINKLE 10 MG (<i>avatrombopag maleate</i>)	PSP	
MULPLETA ORAL TABLET 3 MG (<i>lusutrombopag</i>)	NF	
NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED 125 MCG, 250 MCG, 500 MCG (<i>romiplostim</i>)	NF	
PROMACTA ORAL PACKET 12.5 MG, 25 MG (<i>eltrombopag olamine</i>)	NF	
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG (<i>eltrombopag olamine</i>)	NF	
TAVALISSE ORAL TABLET 100 MG, 150 MG (<i>fostamatinib disodium</i>)	NF	
IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM		
ALLERGENIC EXTRACTS		
GRASTEK SUBLINGUAL TABLET SUBLINGUAL 2800 BAU (<i>timothy grass pollen allergen</i>)	PB	
ODACTRA SUBLINGUAL TABLET SUBLINGUAL 12 SQ-HDM (<i>dust mite mixed allergen ext</i>)	PB	
ORALAIR SUBLINGUAL TABLET SUBLINGUAL 300 IR (<i>grass mix pollens allergen ext</i>)	PB	
PALFORZIA (12 MG DAILY DOSE) ORAL 2 X 1 MG & 10 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (120 MG DAILY DOSE) ORAL 20 MG & 100 MG (<i>peanut powder-dnfp</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
PALFORZIA (160 MG DAILY DOSE) ORAL 3 X 20 MG & 100 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (20 MG DAILY DOSE) ORAL 20 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (200 MG DAILY DOSE) ORAL 2 X 100 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (240 MG DAILY DOSE) ORAL 2 X 20 MG & 2 X 100 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (3 MG DAILY DOSE) ORAL 3 X 1 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (300 MG MAINTENANCE) ORAL PACKET 300 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (300 MG TITRATION) ORAL PACKET 300 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (40 MG DAILY DOSE) ORAL 2 X 20 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (6 MG DAILY DOSE) ORAL 6 X 1 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA (80 MG DAILY DOSE) ORAL 4 X 20 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA INITIAL DOSE 4-17YRS ORAL 0.5 & 1 & 1.5 & 3 & 6 MG (<i>peanut powder-dnfp</i>)	NF	
PALFORZIA INITIAL ESCALATION ORAL 0.5 & 1 & 1.5 & 3 & 6 MG (<i>peanut powder-dnfp</i>)	NF	
RAGWITEK SUBLINGUAL TABLET SUBLINGUAL 12 AMB A 1-U (<i>short ragweed pollen ext</i>)	PB	
AUTOIMMUNE AGENTS (PHYSICIAN-ADMINISTERED)		
AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>infliximab-axxq</i>)	PSP	
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED 300 MG (<i>vedolizumab</i>)	NPSP	
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (<i>tildrakizumab-asmn</i>)	PSP	
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>infliximab-dyyb</i>)	NF	
<i>infliximab intravenous solution reconstituted 100 mg</i>	NF	
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED 250 MG (<i>abatacept</i>)	NF	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>infliximab</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>infliximab-abda</i>)	NF	
SIMPONI ARIA INTRAVENOUS SOLUTION 50 MG/4ML (<i>golimumab</i>)	PSP	
AUTOIMMUNE AGENTS (SELF-ADMINISTERED)		
ABRILADA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML (<i>adalimumab-afzb</i>)	NF	
ABRILADA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML (<i>adalimumab-afzb</i>)	NF	
ABRILADA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-afzb</i>)	NF	
<i>adalimumab-aacf (2 pen) subcutaneous auto-injector kit 40 mg/0.8ml</i>	NF	
<i>adalimumab-aacf (2 syringe) subcutaneous prefilled syringe kit 40 mg/0.8ml</i>	NF	
<i>adalimumab-aacf(cd/uc/hs strt) subcutaneous auto-injector kit 40 mg/0.8ml</i>	NF	
<i>adalimumab-aacf(ps/uv starter) subcutaneous auto-injector kit 40 mg/0.8ml</i>	NF	
<i>adalimumab-aaty (1 pen) subcutaneous auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml</i>	NF	
<i>adalimumab-aaty (2 pen) subcutaneous auto-injector kit 40 mg/0.4ml</i>	NF	
<i>adalimumab-aaty (2 syringe) subcutaneous prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml</i>	NF	
<i>adalimumab-aaty cd/uc/hs start subcutaneous auto-injector kit 80 mg/0.8ml</i>	NF	
<i>adalimumab-adaz subcutaneous solution auto-injector 40 mg/0.4ml, 80 mg/0.8ml</i>	PSP	
<i>adalimumab-adaz subcutaneous solution prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml</i>	PSP	
<i>adalimumab-adbm (2 pen) subcutaneous auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml</i>	NF	
<i>adalimumab-adbm (2 syringe) subcutaneous prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.4ml, 40 mg/0.8ml</i>	NF	
<i>adalimumab-adbm(cd/uc/hs strt) subcutaneous auto-injector kit 40 mg/0.4ml</i>	NF	
<i>adalimumab-adbm(ps/uv starter) subcutaneous auto-injector kit 40 mg/0.4ml</i>	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>adalimumab-fkjp (2 pen) subcutaneous auto-injector kit 40 mg/0.8ml</i>	PSP	
<i>adalimumab-fkjp (2 syringe) subcutaneous prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml</i>	PSP	
<i>adalimumab-ryvk (1 pen) subcutaneous auto-injector kit 80 mg/0.8ml</i>	NF	
<i>adalimumab-ryvk (2 pen) subcutaneous auto-injector kit 40 mg/0.4ml</i>	NF	
<i>adalimumab-ryvk (2 syringe) subcutaneous prefilled syringe kit 40 mg/0.4ml</i>	NF	
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML (<i>adalimumab-atto</i>)	NF	
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-atto</i>)	NF	
AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.2ML (<i>adalimumab-atto</i>)	NF	
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML, 20 MG/0.4ML (<i>adalimumab-atto</i>)	NF	
BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR 160 MG/ML, 320 MG/2ML (<i>bimekizumab-bkzx</i>)	PSP	
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML, 320 MG/2ML (<i>bimekizumab-bkzx</i>)	PSP	
CIMZIA (1 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML (<i>certolizumab pegol</i>)	PSP	
CIMZIA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML (<i>certolizumab pegol</i>)	PSP	
CIMZIA-STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML (<i>certolizumab pegol</i>)	PSP	
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML (<i>secukinumab</i>)	PSP	
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML (<i>secukinumab</i>)	PSP	
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML (<i>secukinumab</i>)	PSP	
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML (<i>secukinumab</i>)	PSP	
COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML (<i>secukinumab</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-adbm</i>)	NF	
CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-adbm</i>)	NF	
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-adbm</i>)	NF	
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-adbm</i>)	NF	
DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML, 300 MG/2ML (<i>dupilumab</i>)	PSP	
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML (<i>dupilumab</i>)	PSP	
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML (<i>etanercept</i>)	PSP	
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML (<i>etanercept</i>)	PSP	
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML (<i>etanercept</i>)	PSP	
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML (<i>etanercept</i>)	PSP	
ENTYVIO PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 108 MG/0.68ML (<i>vedolizumab</i>)	PSP	
HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-bwwd</i>)	NF	
HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-bwwd</i>)	NF	
HULIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML (<i>adalimumab-fkjp</i>)	NF	
HULIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab-fkjp</i>)	NF	
HUMIRA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML (<i>adalimumab</i>)	NF	
HUMIRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML (<i>adalimumab</i>)	NF	
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
HUMIRA-PSORIASIS/UVEIT STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML (<i>adalimumab</i>)	NF	
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML (<i>adalimumab-adaz</i>)	PSP	N8 (Listing does not include certain NDCs)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML, 40 MG/0.4ML (<i>adalimumab-adaz</i>)	PSP	N8 (Listing does not include certain NDCs)
HYRIMOZ-PLAQUE PSORIASIS START SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML & 40MG/0.4ML (<i>adalimumab-adaz</i>)	PSP	N8 (Listing does not include certain NDCs)
IMULDOSA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-srlf</i>)	NF	
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML, 200 MG/1.14ML (<i>sarilumab</i>)	PSP	
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/1.14ML, 200 MG/1.14ML (<i>sarilumab</i>)	PSP	
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML (<i>anakinra</i>)	NF	
LEQSELVI ORAL TABLET 8 MG (<i>deuruxolitinib phosphate</i>)	NF	
LITFULO ORAL CAPSULE 50 MG (<i>ritlecitinib tosylate</i>)	PSP	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML (<i>mepolizumab</i>)	PSP	
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 40 MG/0.4ML (<i>mepolizumab</i>)	PSP	
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED 100 MG (<i>mepolizumab</i>)	NF	
OLUMIANT ORAL TABLET 1 MG, 2 MG, 4 MG (<i>baricitinib</i>)	PSP	
OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML & 200 MG/2ML (<i>mirikizumab-mrkz</i>)	NF	
OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML & 200 MG/2ML (<i>mirikizumab-mrkz</i>)	NF	
OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML (<i>mirikizumab-mrkz</i>)	NF	
OMVOH SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (<i>mirikizumab-mrkz</i>)	NF	
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MG/ML (<i>abatacept</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML, 50 MG/0.4ML, 87.5 MG/0.7ML (<i>abatacept</i>)	PSP	
OTEZLA ORAL TABLET 20 MG, 30 MG (<i>apremilast</i>)	PSP	
OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG, 4 X 10 & 51 X20 MG (<i>apremilast</i>)	PSP	
OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 75 MG (<i>apremilast</i>)	PSP	
OTEZLA/OTEZLA XR INITIATION PK ORAL TABLET THERAPY PACK 10&20&30&(ER)75 MG (<i>apremilast</i>)	PSP	
OTULFI SUBCUTANEOUS SOLUTION 45 MG/0.5ML (<i>ustekinumab-aaaz</i>)	NF	
OTULFI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-aaaz</i>)	NF	
PYZCHIVA SUBCUTANEOUS SOLUTION 45 MG/0.5ML (<i>ustekinumab-ttwe</i>)	PSP	
PYZCHIVA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-ttwe</i>)	PSP	
PYZCHIVA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-ttwe</i>)	PSP	
RINVOQ LQ ORAL SOLUTION 1 MG/ML (<i>upadacitinib</i>)	PSP	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 30 MG, 45 MG (<i>upadacitinib</i>)	PSP	
SELARSDI SUBCUTANEOUS SOLUTION 45 MG/0.5ML (<i>ustekinumab-aekn</i>)	NF	
SELARSDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-aekn</i>)	NF	
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 210 MG/1.5ML (<i>brodalumab</i>)	NF	
SIMLANDI (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 80 MG/0.8ML (<i>adalimumab-ryvk</i>)	NF	
SIMLANDI (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML (<i>adalimumab-ryvk</i>)	NF	
SIMLANDI (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML, 40 MG/0.4ML (<i>adalimumab-ryvk</i>)	NF	
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML, 50 MG/0.5ML (<i>golimumab</i>)	NF	
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 50 MG/0.5ML (<i>golimumab</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML (<i>risankizumab-rzaa</i>)	PSP	
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML, 360 MG/2.4ML (<i>risankizumab-rzaa</i>)	PSP	
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML (<i>risankizumab-rzaa</i>)	PSP	
SOTYKTU ORAL TABLET 6 MG (<i>deucravacitinib</i>)	PSP	
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML (<i>ustekinumab</i>)	PSP	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab</i>)	PSP	
STEQEYMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-stba</i>)	NF	
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/ML (<i>ixekizumab</i>)	NF	
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.25ML, 40 MG/0.5ML, 80 MG/ML (<i>ixekizumab</i>)	NF	
TREMFYA ONE-PRESS SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 MG/ML (<i>guselkumab</i>)	PSP	
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML, 200 MG/2ML (<i>guselkumab</i>)	PSP	
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 200 MG/2ML (<i>guselkumab</i>)	PSP	
TREMFYA-CD/UC INDUCTION SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML (<i>guselkumab</i>)	PSP	
TYENNE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 162 MG/0.9ML (<i>tocilizumab-aazg</i>)	NF	
TYENNE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 162 MG/0.9ML (<i>tocilizumab-aazg</i>)	NF	
<i>ustekinumab subcutaneous solution 45 mg/0.5ml</i>	NF	
<i>ustekinumab subcutaneous solution prefilled syringe 45 mg/0.5ml, 90 mg/ml</i>	NF	
<i>ustekinumab-aekn subcutaneous solution prefilled syringe 45 mg/0.5ml, 90 mg/ml</i>	NF	
<i>ustekinumab-ttwe subcutaneous solution prefilled syringe 45 mg/0.5ml, 90 mg/ml</i>	NF	
VELSIPITY ORAL TABLET 2 MG (<i>etrasimod arginine</i>)	PSP	
WEZLANA SUBCUTANEOUS SOLUTION 45 MG/0.5ML (<i>ustekinumab-auub</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
WEZLANA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-auub</i>)	NF	
XELJANZ ORAL SOLUTION 1 MG/ML (<i>tofacitinib citrate</i>)	PSP	
XELJANZ ORAL TABLET 10 MG, 5 MG (<i>tofacitinib citrate</i>)	PSP	
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG, 22 MG (<i>tofacitinib citrate</i>)	PSP	
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 300 MG/2ML, 75 MG/0.5ML (<i>omalizumab</i>)	PSP	
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML, 75 MG/0.5ML (<i>omalizumab</i>)	PSP	
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG (<i>omalizumab</i>)	PSP	
YESINTEK SUBCUTANEOUS SOLUTION 45 MG/0.5ML (<i>ustekinumab-kfce</i>)	PSP	
YESINTEK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-kfce</i>)	PSP	
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 80 MG/0.8ML (<i>adalimumab-aaty</i>)	NF	
YUFLYMA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML (<i>adalimumab-aaty</i>)	NF	
YUFLYMA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML, 40 MG/0.4ML (<i>adalimumab-aaty</i>)	NF	
YUFLYMA-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML (<i>adalimumab-aaty</i>)	NF	
YUSIMRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML (<i>adalimumab-aqvh</i>)	NF	
ZYMFENTRA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 120 MG/ML (<i>infliximab-dyyb</i>)	NF	
ZYMFENTRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 120 MG/ML (<i>infliximab-dyyb</i>)	NF	
ZYMFENTRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 120 MG/ML (<i>infliximab-dyyb</i>)	NF	
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS) - DRUGS TO TREAT RHEUMATOID ARTHRITIS		
ARAVA ORAL TABLET 10 MG, 20 MG (<i>leflunomide</i>)	NPB	
<i>hydroxychloroquine sulfate oral tablet 200 mg</i>	G	N8 (Listing does not include certain NDCs)

Prescription Drug Name	Drug Tier	Drug Notes
<i>leflunomide oral tablet 10 mg, 20 mg</i>	G	
<i>methotrexate sodium oral tablet 2.5 mg</i>	G	N8 (Listing does not include certain NDCs)
PLAQUENIL ORAL TABLET 200 MG (<i>hydroxychloroquine sulfate</i>)	NPB	
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML (<i>methotrexate (anti-rheumatic)</i>)	PSP	
SOVUNA ORAL TABLET 200 MG (<i>hydroxychloroquine sulfate</i>)	NF	
HEREDITARY ANGIOEDEMA		
ANDEMBRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.2ML (<i>garadacimab-gxii</i>)	NPSP	
BERINERT INTRAVENOUS KIT 500 UNIT (<i>c1 esterase inhibitor (human)</i>)	NF	
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT (<i>c1 esterase inhibitor (human)</i>)	NF	
FIRAZYR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/3ML (<i>icatibant acetate</i>)	NF	
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT, 3000 UNIT (<i>c1 esterase inhibitor (human)</i>)	NPSP	
<i>icatibant acetate subcutaneous solution prefilled syringe 30 mg/3ml</i>	G	
ORLADEYO ORAL CAPSULE 110 MG, 150 MG (<i>berotralstat hcl</i>)	PSP	
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED 2100 UNIT (<i>c1 esterase inhibitor (recomb)</i>)	PSP	
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2ML (<i>lanadelumab-flyo</i>)	PSP	
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML (<i>lanadelumab-flyo</i>)	PSP	
IMMUNOGLOBULIN		
ALYGLO INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 5 GM/50ML (<i>immune globulin (human)-stwk</i>)	NF	
ASCENIV INTRAVENOUS SOLUTION 5 GM/50ML (<i>immune globulin (human)-slra</i>)	NF	
BIVIGAM INTRAVENOUS SOLUTION 10 GM/100ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
CUTAQUIG SUBCUTANEOUS SOLUTION 1 GM/6ML, 1.65 GM/10ML, 2 GM/12ML, 3.3 GM/20ML, 4 GM/24ML, 8 GM/48ML (<i>immune globulin (human)-hipp</i>)	PSP	
CUVITRU SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML, 8 GM/40ML (<i>immune globulin (human)</i>)	NF	
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 GM/200ML, 20 GM/400ML, 5 GM/100ML (<i>immune globulin (human)</i>)	NPSP	
GAMMAGARD INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED 10 GM, 5 GM (<i>immune globulin (human)</i>)	NPSP	
GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	
HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML (<i>immune globulin (human)</i>)	NPSP	
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML (<i>immune globulin (human)</i>)	NPSP	
HYQVIA SUBCUTANEOUS KIT 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML (<i>immune globulin-hyaluronidase</i>)	NF	
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 30 GM/300ML, 5 GM/100ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NF	
PANZYGA INTRAVENOUS SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML (<i>immune globulin (human)-ifas</i>)	NF	
PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 40 GM/400ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	

Prescription Drug Name	Drug Tier	Drug Notes
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE 1500 UNIT/2ML (<i>rho d immune globulin</i>)	NPSP	
WINRHO SDF INJECTION SOLUTION 1500 UNIT/1.3ML, 15000 UNIT/13ML, 2500 UNIT/2.2ML (<i>rho d immune globulin</i>)	NPSP	
XEMBIFY SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML (<i>immune globulin (human)-klhw</i>)	PSP	
IMMUNOMODULATORS		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5ML (<i>interferon gamma-1b</i>)	NPSP	
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED 220 MG (<i>rilonacept</i>)	NF	
JOENJA ORAL TABLET 70 MG (<i>leniolisib phosphate</i>)	NF	
IMMUNOSUPPRESSANTS		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 5 MG (<i>tacrolimus</i>)	NPSP	
<i>azathioprine</i> (Azasan Oral Tablet 100 Mg, 75 Mg)	G	
<i>azathioprine oral tablet 50 mg</i>	G	
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML (<i>belimumab</i>)	NPSP	
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML (<i>belimumab</i>)	NPSP	
CELLCEPT ORAL CAPSULE 250 MG (<i>mycophenolate mofetil</i>)	NPSP	
CELLCEPT ORAL SUSPENSION RECONSTITUTED 200 MG/ML (<i>mycophenolate mofetil</i>)	NPSP	
CELLCEPT ORAL TABLET 500 MG (<i>mycophenolate mofetil</i>)	NPSP	
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	G	
<i>cyclosporine modified oral solution 100 mg/ml</i>	G	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	G	
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.75 MG, 1 MG, 4 MG (<i>tacrolimus</i>)	NPSP	
<i>cyclosporine modified</i> (Gengraf Oral Capsule 100 Mg, 25 Mg)	G	
<i>cyclosporine modified</i> (Gengraf Oral Solution 100 Mg/ML)	G	
IMURAN ORAL TABLET 50 MG (<i>azathioprine</i>)	NPB	
LUPKYNIS ORAL CAPSULE 7.9 MG (<i>voclosporin</i>)	NF	
<i>mycophenolate mofetil oral capsule 250 mg</i>	G	
<i>mycophenolate mofetil oral suspension reconstituted 200 mg/ml</i>	G	
<i>mycophenolate mofetil oral tablet 500 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>mycophenolate sodium oral tablet delayed release 180 mg, 360 mg</i>	G	
MYFORTIC ORAL TABLET DELAYED RELEASE 180 MG, 360 MG (<i>mycophenolate sodium</i>)	NPSP	
MYHIBBIN ORAL SUSPENSION 200 MG/ML (<i>mycophenolate mofetil</i>)	NF	
PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG (<i>tacrolimus</i>)	NPSP	
PROGRAF ORAL PACKET 0.2 MG, 1 MG (<i>tacrolimus</i>)	NPSP	
REZUROCK ORAL TABLET 200 MG (<i>belumosudil mesylate</i>)	NF	
<i>sirolimus oral solution 1 mg/ml</i>	G	
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	G	
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG, 1 MG (<i>everolimus</i>)	NPSP	
MISCELLANEOUS		
BEYFORTUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 100 MG/ML, 50 MG/0.5ML (<i>nirsevimab-alip</i>)	NPB	
ILARIS SUBCUTANEOUS SOLUTION 150 MG/ML (<i>canakinumab</i>)	NPSP	
SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5ML (<i>palivizumab</i>)	NF	
MEDICAL DEVICES		
THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS		
<i>d-xylose powder</i>	NPB	
GLEOLAN ORAL SOLUTION RECONSTITUTED 1.5 GM (<i>aminolevulinic acid hcl</i>)	NPB	
NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS		
ELECTROLYTES		
<i>potassium bicarbonate</i> (Effer-K Oral Tablet Effervescent 25 Meq)	G	
<i>potassium chloride</i> (Klor-Con 10 Oral Tablet Extended Release 10 Meq)	G	N8 (Listing does not include certain NDCs)
<i>potassium chloride crys er</i> (Klor-Con M10 Oral Tablet Extended Release 10 Meq)	G	
<i>potassium chloride crys er</i> (Klor-Con M15 Oral Tablet Extended Release 15 Meq)	G	
<i>potassium chloride crys er</i> (Klor-Con M20 Oral Tablet Extended Release 20 Meq)	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>potassium chloride</i> (Klor-Con Oral Packet 20 Meq)	G	
KLOR-CON ORAL TABLET EXTENDED RELEASE 8 MEQ (<i>potassium chloride</i>)	NPB	
<i>potassium bicarbonate</i> (Klor-Con/Ef Oral Tablet Effervescent 25 Meq)	G	
K-PHOS ORAL TABLET 500 MG (<i>potassium phosphate monobasic</i>)	NPB	
<i>k phos mono-sod phos di & mono</i> (Phospha 250 Neutral Oral Tablet 155-852-130 Mg)	G	
<i>phosphorous oral tablet 155-852-130 mg</i>	G	
<i>k phos mono-sod phos di & mono</i> (Phospho-Trin 250 Neutral Oral Tablet 155-852-130 Mg)	G	
POKONZA ORAL PACKET 10 MEQ (<i>potassium chloride</i>)	NF	
<i>potassium chloride crys er oral tablet extended release 20 meq</i>	G	
<i>potassium chloride er oral capsule extended release 10 meq, 8 meq</i>	G	
<i>potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq</i>	G	
<i>potassium chloride oral packet 20 meq</i>	G	
<i>potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)</i>	G	
<i>sodium fluoride oral solution 1.1 (0.5 f) mg/ml</i>	CE	
<i>sodium fluoride oral tablet 1.1 (0.5 f) mg</i>	CE	
<i>sodium fluoride oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg</i>	CE	
SOLUVITA ORAL SOLUTION 0.5 MG/ML (<i>sodium fluoride</i>)	CE	
MISCELLANEOUS		
<i>selenious acid intravenous solution 60 mcg/ml</i>	NF	
PRENATAL VITAMINS		
ATABEX EC ORAL TABLET DELAYED RELEASE 29-1 MG (<i>prenatal vit-dss-fe cbn-fa</i>)	NF	
ATABEX OB ORAL TABLET 29-1 MG (<i>prenatal vit w/ fe bisg-fa</i>)	NF	
<i>azesco oral tablet 13-1 mg</i>	NF	
CITRANATAL 90 DHA ORAL 90-1 & 300 MG (<i>prenat w/o a-fecbgl-dss-fa-dha</i>)	NF	
CITRANATAL ASSURE ORAL 35-1 & 300 MG (<i>prenat w/o a-fecbgl-dss-fa-dha</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>c-nate dha oral capsule 28-1-200 mg</i>	NF	
<i>complete natal dha oral 29-1-200 & 200 mg</i>	NF	
<i>completenate oral tablet chewable 29-1 mg</i>	NF	
CO-NATAL FA ORAL TABLET (<i>prenatal vit-fe fumarate-fa</i>)	NF	
CONCEPT DHA ORAL CAPSULE 53.5-38-1 MG (<i>prenat-fefum-fepo-fa-omega 3</i>)	NF	
CONCEPT OB ORAL CAPSULE 130-92.4-1 MG (<i>prenat w/o a vit-fefum-fepo-fa</i>)	NF	
DERMACINRX PRETRATE ORAL TABLET 1 MG (<i>prenatal multivit-min-fe-fa</i>)	NF	
ENBRACE HR ORAL CAPSULE (<i>prenat vit-fe gly cys-fa-omega</i>)	NF	
FOLIVANE-OB ORAL CAPSULE 85-1 MG (<i>prenat w/o a vit-fefum-fepo-fa</i>)	NF	
INATAL GT ORAL TABLET (<i>prenatal vit-dss-fe cbn-fa</i>)	G	
<i>jenliva prenatal/postnatal oral capsule 1 mg</i>	NF	
<i>kosher prenatal plus iron oral tablet 30-1 mg</i>	NF	
MATERNACEL ORAL TABLET 20-1 MG (<i>prenatal vit w/ fe bisg-fa</i>)	NF	
<i>m-natal plus oral tablet 27-1 mg</i>	NF	
<i>natal pnv oral tablet 6-0.5 mg</i>	NF	
NEEVO DHA ORAL CAPSULE 27-1.13 MG (<i>prenat w/oa-fefum-methf-omegas</i>)	NF	
<i>neonatal complete oral tablet 27-1 mg</i>	NF	
NEONATAL PLUS ORAL TABLET 27-1 MG (<i>prenatal vit-fe fumarate-fa</i>)	NF	
<i>neo-vital rx oral tablet 1 mg</i>	NF	
NESTABS DHA ORAL 32-1 MG (<i>prenat-w/oa-fe bisgly-fa-omega</i>)	NF	
NESTABS ONE ORAL CAPSULE 38-1-225 MG (<i>prenat-fe-methylfol-dha w/o a</i>)	NF	
NESTABS ORAL TABLET 32-1 MG (<i>prenat-fe bisgly-fa-w/o vit a</i>)	NF	
NIVA-PLUS ORAL TABLET 27-1 MG (<i>prenatal vit-fe fumarate-fa</i>)	NF	
OB COMPLETE ONE ORAL CAPSULE 50-1-476 MG (<i>prenat-fecbn-feaspgl-fa-fish</i>)	NF	
OB COMPLETE ORAL TABLET 50-1.25 MG (<i>prenatal vit-iron carbonyl-fa</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
OB COMPLETE PETITE ORAL CAPSULE 35-5-1-200 MG (<i>prenat-fecbn-feaspgl-fa-omega</i>)	NF	
OB COMPLETE PREMIER ORAL TABLET 30-20-1 MG (<i>prenatal-fe cbn-fe asp gly-fa</i>)	NF	
OB COMPLETE/DHA ORAL CAPSULE 30-10-1-200 MG (<i>prenat-fecbn-feaspgl-fa-omega</i>)	NF	
<i>one vite womens plus oral tablet 27-1 mg</i>	NF	
<i>pnv prenatal plus multivit+dha oral 27-1 & 312 mg</i>	NF	
<i>pnv tabs 20-1 oral tablet 20-1 mg</i>	NF	
<i>pnv-dha oral capsule 27-0.6-0.4-300 mg</i>	G	
<i>pnv-dha+docusate oral capsule 27-1.25-300 mg</i>	NF	
<i>pnv-omega oral capsule 28-0.6-0.4-340 mg</i>	NF	
<i>pnv-select oral tablet 27-0.6-0.4 mg</i>	G	
<i>pregen dha oral capsule 28-1-35 mg</i>	NF	
<i>pregenna oral tablet 20-1 mg</i>	NF	
PREMESISRX ORAL TABLET 1 MG (<i>prenatal ca-b6-b12-fa-ginger</i>)	NF	
<i>prena 1 true oral 30-1.4 & 300 mg</i>	NF	
<i>prenal oral tablet chewable 1.4 mg</i>	NF	
<i>prenal pearl oral capsule extended release 30-1.4-200 mg</i>	NF	
<i>prenatal 19 oral tablet 29-1 mg</i>	NF	
<i>prenatal 19 oral tablet chewable</i>	G	
<i>prenatal 19 oral tablet chewable 29-1 mg</i>	NF	
<i>prenatal oral tablet 27-1 mg</i>	NF	
<i>prenatal plus oral tablet 27-1 mg</i>	NF	
PRENATAL-U ORAL CAPSULE 106.5-1 MG (<i>prenatal w/o a vit-fe fum-fa</i>)	NF	
PRENATE AM ORAL TABLET 1 MG (<i>prenatal ca-b6-b12-fa-ginger</i>)	NF	
PRENATE DHA ORAL CAPSULE 18-0.6-0.4-300 MG (<i>prenat-feasp-meth-fa-dha w/o a</i>)	NF	
PRENATE ELITE ORAL TABLET 20-0.6-0.4 MG (<i>prenatal-feaspgly-methylfol-fa</i>)	NF	
PRENATE ENHANCE ORAL CAPSULE 28-0.6-0.4-400 MG (<i>prenat w/o a-fe-methfol-fa-dha</i>)	NF	
PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG (<i>prenat-feasp-meth-fa-dha w/o a</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
PRENATE MINI ORAL CAPSULE 18-0.6-0.4-350 MG (<i>prenat-fecbn-feasp-meth-fa-dha</i>)	NF	
PRENATE ORAL TABLET CHEWABLE 0.6-0.4 MG (<i>prenat mv-min-methylfolate-fa</i>)	NF	
PRENATE PIXIE ORAL CAPSULE 10-0.6-0.4-200 MG (<i>prenat-feasp-meth-fa-dha w/o a</i>)	NF	
PRENATE RESTORE ORAL CAPSULE 27-0.6-0.4-400 MG (<i>prenat w/o a-fe-methfol-fa-dha</i>)	NF	
PRENATOL-M ORAL TABLET 27-1.2 MG (<i>prenatal vit-fe fumarate-fa</i>)	NF	
PRENATRIX ORAL TABLET 27-1 MG (<i>prenatal vit-fe fumarate-fa</i>)	NF	
PRENATRYL ORAL TABLET 27-1 MG (<i>prenatal vit-fe fumarate-fa</i>)	NF	
PROVIDA OB ORAL CAPSULE 20-20-1.25 MG (<i>prenat w/o a vit-fefum-fepo-fa</i>)	NF	
<i>relnate dha oral capsule 28-1-200 mg</i>	NF	
SELECT-OB ORAL TABLET CHEWABLE 29-0.6-0.4 MG (<i>prenat vit-fepoly-methylfol-fa</i>)	NF	
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG (<i>prenatal vit-fe psac cmplx-fa</i>)	NF	
SELECT-OB+DHA ORAL 29-1 & 250 MG (<i>prenatal vit-fepoly-fa-dha</i>)	NF	
<i>se-natal 19 oral tablet 29-1 mg</i>	NF	
<i>se-natal 19 oral tablet chewable 29-1 mg</i>	NF	
TARON-C DHA ORAL CAPSULE 35-1 MG (<i>prenat-fefum-fepo-fa-omega 3</i>)	NF	
<i>thrivite rx oral tablet 29-1 mg</i>	NF	
<i>trinatal rx 1 oral tablet 60-1 mg</i>	NF	
TRINATE ORAL TABLET (<i>prenatal vit-fe fumarate-fa</i>)	G	
<i>tristart dha oral capsule 31-0.6-0.4-200 mg</i>	NF	
VINATE DHA RF ORAL CAPSULE 27-1.13 MG (<i>prenat w/oa-fefum-methf-omegas</i>)	NF	
VITAFOL FE+ ORAL CAPSULE 90-0.6-0.4-200 MG (<i>prenat-fe poly-methfol-fa-dha</i>)	NF	
VITAFOL GUMMIES ORAL TABLET CHEWABLE 3.33-0.333-34.8 MG (<i>prenatal vit-fe phos-fa-omega</i>)	NF	
VITAFOL ULTRA ORAL CAPSULE 29-0.6-0.4-200 MG (<i>prenat-fe poly-methfol-fa-dha</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
VITAFOL-OB ORAL TABLET (<i>prenatal vit-fe fumarate-fa</i>)	NF	
VITAFOL-OB+DHA ORAL 65-1 & 250 MG (<i>prenatal mv-min-fe fum-fa-dha</i>)	NF	
VITAFOL-ONE ORAL CAPSULE 29-1-200 MG (<i>prenatal vit-fepoly-fa-dha</i>)	NF	
<i>vitalara oral tablet 20-1 mg</i>	NF	
VITATHELY WITH GINGER ORAL TABLET 27-1 MG (<i>prenatal vit-fe fumarate-fa</i>)	NF	
VIVA DHA ORAL CAPSULE 28-1-200 MG (<i>prenatal vit-fe fum-fa-omega</i>)	NF	
<i>wescap-pn dha oral capsule 27-0.6-0.4-300 mg</i>	NF	
<i>wesnata dha complete oral 29-1-200 & 200 mg</i>	NF	
<i>wesnate dha oral capsule 28-1-200 mg</i>	NF	
<i>westab plus oral tablet 27-1 mg</i>	NF	
<i>westgel dha oral capsule 31-0.6-0.4-200 mg</i>	NF	
<i>zalvit oral tablet 13-1 mg</i>	NF	
<i>ziphex oral tablet 13-1 mg</i>	NF	
VITAMINS - VITAMINS AND SUPPLEMENTS		
ACCRUFER ORAL CAPSULE 30 MG (<i>ferric maltol</i>)	NF	
<i>active fe oral tablet 75-1.25 mg</i>	NPB	
<i>activite oral tablet 1 mg</i>	NF	
<i>folic acid-vit b6-vit b12</i> (Airavite Oral Tablet 2.5-25-1 Mg)	G	
<i>altrixa oral tablet</i>	NF	
AMLADEX ORAL TABLET (<i>multiple vitamin</i>)	NF	
ASTAMED MYO ORAL CAPSULE (<i>astaxanthin-tocotrienol-zn-d3</i>)	NF	
<i>biocel oral tablet</i>	G	
<i>bp vit 3 oral capsule 1 mg</i>	NPB	
<i>b-plex oral tablet</i>	G	
<i>b-plex plus oral tablet</i>	G	
CALCIFOL ORAL WAFER 1342-1.6 MG (<i>ca carb-fa-d-b6-b12-boron-mg</i>)	NPB	
CENFOL ORAL TABLET 2.3-24.5-2 MG (<i>folic acid-vit b6-vit b12</i>)	NPB	
CORVITE 150 ORAL TABLET (<i>iron combinations</i>)	NPB	
<i>corvite fe oral tablet</i>	NPB	
<i>cvs folic acid oral tablet 800 mcg</i>	CE	

Prescription Drug Name	Drug Tier	Drug Notes
<i>cyanocobalamin injection solution 1000 mcg/ml</i>	G	
DAVIMET-FLUORIDE ORAL TABLET CHEWABLE 0.75 MG (<i>pediatric multivitamins-fl</i>)	NF	
<i>dayavite oral tablet</i>	NF	
<i>b complex-c-folic acid</i> (Dexifol Oral Tablet 5 Mg)	NF	
DRISDOL ORAL CAPSULE 1.25 MG (50000 UT) (<i>ergocalciferol</i>)	NPB	
ELFOLATE PLUS ORAL TABLET 3-35-2 MG (<i>l-methylfolate-b6-b12</i>)	NF	
<i>ergocalciferol oral capsule 1.25 mg (50000 ut)</i>	G	
FA-8 ORAL CAPSULE 0.8 MG (<i>folic acid</i>)	CE	
<i>ferottrinsic oral capsule</i>	G	
FLORIVA ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG (<i>ped multiple vit-minerals-fl</i>)	NF	
<i>folagent dha oral capsule</i>	NF	
<i>folamax oral tablet</i>	NF	
<i>folamed dha oral capsule</i>	NF	
<i>folaprime oral tablet</i>	NF	
<i>folate oral tablet 400 mcg</i>	CE	
<i>folbee oral tablet 2.5-25-1 mg</i>	G	
<i>folbee plus oral tablet</i>	G	
FOLGARD OS ORAL TABLET 500-1.1 MG (<i>multiple vit-min-calcium-fa</i>)	NF	
<i>folic acid injection solution 5 mg/ml</i>	G	
<i>folic acid oral capsule 0.8 mg</i>	CE	
<i>folic acid oral tablet 400 mcg</i>	CE	
FOLI-D ORAL TABLET 1-2000 MG-UNIT (<i>folic acid-cholecalciferol</i>)	NF	
<i>folite oral tablet</i>	NF	
<i>foltrin oral capsule</i>	G	
FOLVITE-D ORAL TABLET 1-3775 MG-UNIT (<i>folic acid-cholecalciferol</i>)	NF	
FOSTEUM ORAL CAPSULE 27-20-200 MG-MG-UNIT (<i>genistein-zn chelate-vit d</i>)	NF	
FOSTEUM PLUS ORAL CAPSULE (<i>dietary management product</i>)	NF	
<i>ft folic acid oral tablet 400 mcg</i>	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
FUSION PLUS ORAL CAPSULE (<i>iron-fa-b cmp-c-biot-probiotic</i>)	NPB	
<i>gnp folic acid oral tablet 400 mcg</i>	CE	
HEMOCYTE PLUS ORAL CAPSULE 106-1 MG (<i>fe fum-fa-b cmp-c-zn-mg-mn-cu</i>)	NPB	
<i>hylavite oral tablet</i>	NF	
<i>hylazinc oral tablet</i>	NF	
ICAR-C PLUS ORAL TABLET 100-250-0.025-1 MG (<i>iron-vit c-vit b12-folic acid</i>)	NF	
<i>keyfolic oral tablet</i>	NF	
<i>fefum-fepo-fa-b cmp-c-zn-mn-cu</i> (K-Tan Plus Oral Capsule 162-115.2-1 Mg)	G	
LDL CARE ORAL POWDER (<i>dietary management product</i>)	NF	
<i>multiple vitamins-minerals</i> (Lysiplex Plus Oral Tablet)	G	
<i>medi tab oral tablet</i>	NF	
<i>mincora oral tablet</i>	NF	
MULTIGEN FOLIC ORAL TABLET 70-150-2-1 MG (<i>fe asp gly-succ-c-thre-b12-fa</i>)	NPB	
MULTIGEN ORAL TABLET 70 MG (<i>fe-succ-c-thre-b12-des stomach</i>)	NPB	
MULTIGEN PLUS ORAL TABLET (<i>feasp-fefum -suc-c-thre-b12-fa</i>)	NPB	
<i>multipro oral capsule</i>	NF	
<i>multivitamin w/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>multi-vitamin/fluoride oral solution 0.5 mg/ml</i>	G	
<i>multi-vitamin/fluoride/iron oral solution 0.25-10 mg/ml</i>	G	
NASCOBAL NASAL SOLUTION 500 MCG/0.1ML (<i>cyanocobalamin</i>)	NPB	
<i>neoke bhb oral powder</i>	NF	
<i>neovite oral tablet</i>	NF	
NICADAN ORAL TABLET (<i>multiple vitamins-minerals</i>)	NF	
NICAPRIN ORAL TABLET (<i>dietary management product</i>)	NF	
NICAZEL FORTE ORAL TABLET (<i>multiple vitamins-minerals</i>)	NF	
NICAZEL ORAL TABLET (<i>multiple vitamins-minerals</i>)	NF	
NICOMIDE ORAL TABLET 750-27-2-0.5 MG (<i>niacinamide-zn-cu-methfo-se-cr</i>)	NF	
<i>nicotinamide oral tablet 750-27-2-0.5 mg</i>	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month

01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>folic acid-vit b6-vit b12</i> (Nufol Oral Tablet 2.5-25-1 Mg)	G	
<i>multiple vitamins-minerals</i> (Nutrifac Zx Oral Tablet)	G	
<i>onevite oral tablet</i>	NF	
<i>ortho df oral capsule 1-3775 mg-unit</i>	NF	
<i>phytonadione injection solution 1 mg/0.5ml, 10 mg/ml</i>	G	
<i>phytonadione oral tablet 5 mg</i>	G	
<i>poly-iron 150 forte oral capsule 150-25-1 mg-mcg-mg</i>	G	
<i>polysaccharide iron forte oral capsule 150-25-1 mg-mcg-mg</i>	G	
POLY-VI-FLOR ORAL SUSPENSION 0.25 MG/ML (<i>pediatric multivitamins-fl</i>)	NF	
POLY-VI-FLOR ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG (<i>pediatric multivitamins-fl</i>)	NF	
POLY-VI-FLOR/IRON ORAL SUSPENSION 0.25-7 MG/ML (<i>ped multivitamins-fl-iron</i>)	NF	
POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE 0.5-10 MG (<i>ped multivitamins-fl-iron</i>)	NF	
<i>pro-critic oral packet</i>	NPB	
<i>profola oral tablet</i>	NF	
<i>pyridoxine hcl injection solution 100 mg/ml</i>	G	
QUFLORA FE ORAL TABLET CHEWABLE 0.25 MG (<i>multi vit-min-fluoride-fe-fa</i>)	NF	
QUFLORA FE PEDIATRIC ORAL LIQUID 0.25-9.5 MG/ML (<i>ped multivitamins-fl-iron</i>)	NF	
QUFLORA PEDIATRIC ORAL SOLUTION 0.25 MG/ML, 0.5 MG/ML (<i>pediatric multivitamins-fl</i>)	NF	
QUFLORA PEDIATRIC ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG (<i>pediatric multivitamins-fl</i>)	NF	
REMEDIENT ORAL CAPSULE (<i>multiple vitamins-minerals</i>)	NF	
RENATABS WITH IRON ORAL 1 & 100 MG (<i>b complex-c-biotin-e-fa-fe cbn</i>)	NF	
<i>reno caps oral capsule 1 mg</i>	G	
RHEUMATE ORAL CAPSULE (<i>dietary management product</i>)	NF	
STROVITE FORTE ORAL SYRUP (<i>multiple vitamins-minerals</i>)	NF	
<i>support oral liquid</i>	NF	
TALIVA ORAL CAPSULE 1 MG (<i>fa-b6-b12-omega 3-phytosterols</i>)	NF	
TOBAKIENT ORAL CAPSULE (<i>dietary management product</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
TRI-VI-FLOR ORAL SUSPENSION 0.25 MG/ML (<i>pediatric multivitamins-fl</i>)	NF	
<i>tri-vi-floro oral suspension 0.25 mg/ml, 0.5 mg/ml</i>	NF	
<i>tri-vite/fluoride oral solution 0.25 mg/ml, 0.5 mg/ml</i>	G	
<i>tronvite oral tablet 1 mg</i>	NF	
UDAMIN SP ORAL TABLET (<i>multiple vitamins-minerals</i>)	NF	
VASCULERA ORAL TABLET (<i>dietary management product</i>)	NF	
<i>vb6 p5p oral powder</i>	NF	
<i>v-c forte oral capsule</i>	G	
<i>multiple vitamins-minerals (Vic-Forte Oral Capsule)</i>	G	
<i>multiple vitamins-minerals (Vita S Forte Oral Tablet)</i>	G	
<i>multiple vitamins-minerals (Vitacel Oral Tablet)</i>	G	
VITAMEZ ORAL CAPSULE 1 MG (<i>fa-b6-b12-omega 3-phytosterols</i>)	NPB	
<i>vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)</i>	G	
<i>vitamin k1 injection solution 1 mg/0.5ml, 10 mg/ml</i>	G	
VITAROCA PLUS ORAL TABLET (<i>multiple vitamins-minerals</i>)	NF	
<i>vitasure oral tablet 1 mg</i>	NF	
<i>wellfolia oral tablet</i>	NF	
<i>xyzbac oral tablet</i>	NF	
<i>yl folic acid oral tablet 400 mcg</i>	CE	
OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS		
ANTIALLERGICS - DRUGS TO TREAT ALLERGIES		
ALOCRILOPHthalmic SOLUTION 2 % (<i>nedocromil sodium</i>)	NPB	
<i>azelastine hcl ophthalmic solution 0.05 %</i>	G	
BEPREVE OPHthalmic SOLUTION 1.5 % (<i>bepotastine besilate</i>)	NF	
<i>cromolyn sodium ophthalmic solution 4 %</i>	G	
<i>epinastine hcl ophthalmic solution 0.05 %</i>	G	
<i>olopatadine hcl ophthalmic solution 0.1 %, 0.2 %</i>	G	
ZERVIAte OPHthalmic SOLUTION 0.24 % (<i>cetirizine hcl</i>)	NF	
ANTIGLAUCOMA BETA-BLOCKERS - DRUGS TO TREAT GLAUCOMA		
<i>betaxolol hcl ophthalmic solution 0.5 %</i>	G	
BETIMOL OPHthalmic SOLUTION 0.5 % (<i>timolol hemihydrate</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
BETOPTIC-S OPHTHALMIC SUSPENSION 0.25 % (<i>betaxolol hcl</i>)	PB	
<i>carteolol hcl ophthalmic solution 1 %</i>	G	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	G	
<i>timolol hemihydrate ophthalmic solution 0.5 %</i>	NF	
<i>timolol maleate (once-daily) ophthalmic solution 0.5 %</i>	G	
<i>timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %</i>	G	
<i>timolol maleate ophthalmic solution 0.25 %, 0.5 %</i>	G	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %, 0.5 % (<i>timolol maleate</i>)	NF	
ANTIGLAUCOMA COMBINATION AGENTS - DRUGS TO TREAT GLAUCOMA		
COMBIGAN OPHTHALMIC SOLUTION 0.2-0.5 % (<i>brimonidine tartrate-timolol</i>)	NF	
COSOPT OPHTHALMIC SOLUTION 2-0.5 % (<i>dorzolamide hcl-timolol mal</i>)	NPB	
<i>dorzolamide hcl-timolol mal ophthalmic solution 2-0.5 %</i>	G	
<i>dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %</i>	G	
ROCKLATAN OPHTHALMIC SOLUTION 0.02-0.005 % (<i>netarsudil-latanoprost</i>)	NF	
SIMBRINZA OPHTHALMIC SUSPENSION 1-0.2 % (<i>brinzolamide-brimonidine</i>)	PB	
ANTI-INFECTIVE/ANTI-INFLAMMATORY - DRUGS TO TREAT INFECTIONS AND INFLAMMATION		
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %</i>	G	
<i>double pm ophthalmic solution reconstituted 1-0.5 %</i>	NF	
MAXITROL OPHTHALMIC OINTMENT 3.5-10000-0.1 (<i>neomycin-polymyxin-dexameth</i>)	NPB	
<i>neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1</i>	G	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	G	
<i>neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1</i>	G	
<i>bacitracin-polymyx-neo-hc</i> (Neo-Polycin Hc Ophthalmic Ointment 1 %)	G	
<i>prednisolone-gatifloxacin ophthalmic suspension 1-0.5 %</i>	NF	
<i>sulfacetamide-prednisolone ophthalmic solution 10-0.23 %</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 % (<i>tobramycin-dexamethasone</i>)	PB	
TOBRADEX ST OPHTHALMIC SUSPENSION 0.3-0.05 % (<i>tobramycin-dexamethasone</i>)	NF	
<i>tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %</i>	G	
<i>triple pmb ophthalmic solution reconstituted 1-0.5-0.09 %</i>	NF	
<i>triple pmk ophthalmic solution reconstituted 1-0.5-0.5 %</i>	NF	
ZYLET OPHTHALMIC SUSPENSION 0.5-0.3 % (<i>loteprednol-tobramycin</i>)	NF	
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS		
AZASITE OPHTHALMIC SOLUTION 1 % (<i>azithromycin</i>)	NF	
<i>bacitracin ophthalmic ointment 500 unit/gm</i>	G	
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	G	
BESIVANCE OPHTHALMIC SUSPENSION 0.6 % (<i>besifloxacin hcl</i>)	PB	
CILOXAN OPHTHALMIC OINTMENT 0.3 % (<i>ciprofloxacin hcl</i>)	NF	
<i>ciprofloxacin hcl ophthalmic solution 0.3 %</i>	G	
<i>erythromycin ophthalmic ointment 5 mg/gm</i>	G	N8 (Listing does not include certain NDCs)
<i>gatifloxacin ophthalmic solution 0.5 %</i>	G	
<i>gentamicin sulfate ophthalmic solution 0.3 %</i>	G	
KLARITY-A OPHTHALMIC SOLUTION 1 % (<i>azithromycin</i>)	NF	
MITOSOL OPHTHALMIC KIT 0.2 MG (<i>mitomycin</i>)	NPB	
<i>moxifloxacin hcl ophthalmic solution 0.5 %</i>	G	
NATACYN OPHTHALMIC SUSPENSION 5 % (<i>natamycin</i>)	NPB	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 3.5-400-10000 , 5-400-10000</i>	G	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	G	
<i>neomycin-bacitracin zn-polymyx (Neo-Polycin Ophthalmic Ointment 3.5-400-10000)</i>	G	
<i>ofloxacin ophthalmic solution 0.3 %</i>	G	
<i>bacitracin-polymyxin b (Polycin Ophthalmic Ointment 500-10000 Unit/Gm)</i>	G	
<i>polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%</i>	G	
<i>sulfacetamide sodium ophthalmic ointment 10 %</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>sulfacetamide sodium ophthalmic solution 10 %</i>	G	
<i>tobramycin ophthalmic solution 0.3 %</i>	G	
TOBREX OPHTHALMIC OINTMENT 0.3 % (<i>tobramycin</i>)	NPB	
<i>trifluridine ophthalmic solution 1 %</i>	G	
VIGAMOX OPHTHALMIC SOLUTION 0.5 % (<i>moxifloxacin hcl</i>)	NPB	
XDEMVIY OPHTHALMIC SOLUTION 0.25 % (<i>lotilaner</i>)	PB	
ZIRGAN OPHTHALMIC GEL 0.15 % (<i>ganciclovir</i>)	NF	
ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION		
ACULAR OPHTHALMIC SOLUTION 0.5 % (<i>ketorolac tromethamine</i>)	NPB	
ACUVAIL OPHTHALMIC SOLUTION 0.45 % (<i>ketorolac tromethamine</i>)	NF	
ALREX OPHTHALMIC SUSPENSION 0.2 % (<i>loteprednol etabonate</i>)	NF	
<i>bromfenac sodium (once-daily) ophthalmic solution 0.09 %</i>	G	
BROMSITE OPHTHALMIC SOLUTION 0.075 % (<i>bromfenac sodium</i>)	NF	
<i>dexamethasone sodium phosphate ophthalmic solution 0.1 %</i>	G	
DEXTENZA OPHTHALMIC INSERT 0.4 MG (<i>dexamethasone</i>)	NF	
DEXYCU INTRAOCULAR SUSPENSION 9 % (<i>dexamethasone</i>)	NF	
<i>diclofenac sodium ophthalmic solution 0.1 %</i>	G	
<i>difluprednate ophthalmic emulsion 0.05 %</i>	G	
DUREZOL OPHTHALMIC EMULSION 0.05 % (<i>difluprednate</i>)	NPB	
EYSUVIS OPHTHALMIC SUSPENSION 0.25 % (<i>loteprednol etabonate</i>)	NPB	
FLAREX OPHTHALMIC SUSPENSION 0.1 % (<i>fluorometholone acetate</i>)	NF	
<i>fluorometholone ophthalmic suspension 0.1 %</i>	G	
<i>flurbiprofen sodium ophthalmic solution 0.03 %</i>	G	
FML FORTE OPHTHALMIC SUSPENSION 0.25 % (<i>fluorometholone</i>)	NF	
FML LIQUIFILM OPHTHALMIC SUSPENSION 0.1 % (<i>fluorometholone</i>)	NF	
ILEVRO OPHTHALMIC SUSPENSION 0.3 % (<i>nepafenac</i>)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
INVELTYS OPHTHALMIC SUSPENSION 1 % (<i>loteprednol etabonate</i>)	NF	
<i>ketorolac tromethamine ophthalmic solution 0.4 %, 0.5 %</i>	G	
KLARITY-L OPHTHALMIC EMULSION 0.2 %, 0.5 % (<i>loteprednol etabonate</i>)	NF	
LOTEMAX OPHTHALMIC GEL 0.5 % (<i>loteprednol etabonate</i>)	NF	
LOTEMAX OPHTHALMIC OINTMENT 0.5 % (<i>loteprednol etabonate</i>)	NF	
LOTEMAX OPHTHALMIC SUSPENSION 0.5 % (<i>loteprednol etabonate</i>)	NF	
LOTEMAX SM OPHTHALMIC GEL 0.38 % (<i>loteprednol etabonate</i>)	NF	
<i>loteprednol etabonate ophthalmic suspension 0.5 %</i>	G	
MAXIDEX OPHTHALMIC SUSPENSION 0.1 % (<i>dexamethasone</i>)	NF	
NEVANAC OPHTHALMIC SUSPENSION 0.1 % (<i>nepafenac</i>)	NF	
OZURDEX INTRAVITREAL IMPLANT 0.7 MG (<i>dexamethasone</i>)	NPSP	
PRED FORTE OPHTHALMIC SUSPENSION 1 % (<i>prednisolone acetate</i>)	NF	
PRED MILD OPHTHALMIC SUSPENSION 0.12 % (<i>prednisolone acetate</i>)	NF	
<i>prednisolone acetate ophthalmic suspension 1 %</i>	G	
<i>prednisolone acetate p-f ophthalmic suspension 1 %</i>	NPB	
<i>prednisolone sodium phosphate ophthalmic solution 1 %</i>	NPB	
PROLENSA OPHTHALMIC SOLUTION 0.07 % (<i>bromfenac sodium</i>)	NPB	
CARBONIC ANHYDRASE INHIBITORS - DRUGS TO TREAT GLAUCOMA		
AZOPT OPHTHALMIC SUSPENSION 1 % (<i>brinzolamide</i>)	NPB	
<i>brinzolamide ophthalmic suspension 1 %</i>	G	
<i>dorzolamide hcl ophthalmic solution 2 %</i>	NPB	N8 (Listing does not include certain NDCs)
DRY EYE DISEASE		
CEQUA OPHTHALMIC SOLUTION 0.09 % (<i>cyclosporine</i>)	NF	
<i>cyclosporine ophthalmic emulsion 0.05 %</i>	NF	
MIEBO OPHTHALMIC SOLUTION 1.338 GM/ML (<i>perfluorohexyloctane</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 % (cyclosporine)	PB	
RESTASIS OPHTHALMIC EMULSION 0.05 % (cyclosporine)	PB	
TRYPTYR OPHTHALMIC SOLUTION 0.003 % (acoltremon)	NF	
VEVYE OPHTHALMIC SOLUTION 0.1 % (cyclosporine)	PB	
XIIDRA OPHTHALMIC SOLUTION 5 % (lifitegrast)	NF	
MISCELLANEOUS		
AKTEN OPHTHALMIC GEL 3.5 % (lidocaine hcl)	NPB	
tetracaine hcl (Altacaine Ophthalmic Solution 0.5 %)	G	
phenylephrine hcl (Altafrin Ophthalmic Solution 10 %, 2.5 %)	G	
atropine sulfate ophthalmic solution 1 %	NPB	
cyclopentolate hcl ophthalmic solution 1 %	G	
CYSTADROPS OPHTHALMIC SOLUTION 0.37 % (cysteamine hcl)	NF	
CYSTARAN OPHTHALMIC SOLUTION 0.44 % (cysteamine hcl)	NPSP	
MYDCOMBI OPHTHALMIC SOLUTION CARTRIDGE 1-2.5 % (tropicamide-phenylephrine)	NF	
OXERVATE OPHTHALMIC SOLUTION 0.002 % (cenegermin-bkbj)	NPSP	
phenylephrine hcl ophthalmic solution 10 %, 2.5 %	G	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	G	
proparacaine hcl ophthalmic solution 0.5 %	G	
QLOSI OPHTHALMIC SOLUTION 0.4 % (pilocarpine hcl)	NF	
tropicamide ophthalmic solution 0.5 %, 1 %	G	
TYRVAYA NASAL SOLUTION 0.03 MG/ACT (varenicline tartrate)	NF	
UPNEEQ OPHTHALMIC SOLUTION 0.1 % (oxymetazoline hcl)	NF	
VERKAZIA OPHTHALMIC EMULSION 0.1 % (cyclosporine)	NF	
VIZZ OPHTHALMIC SOLUTION 1.44 % (aceclidine hcl)	NF	
VUITY OPHTHALMIC SOLUTION 1.25 % (pilocarpine hcl)	NF	
PROSTAGLANDINS - DRUGS TO TREAT GLAUCOMA		
bimatoprost ophthalmic solution 0.03 %	G	
IYUZEH OPHTHALMIC SOLUTION 0.005 % (latanoprost)	NF	
latanoprost ophthalmic solution 0.005 %	NF	
LUMIGAN OPHTHALMIC SOLUTION 0.01 % (bimatoprost)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
TRAVATAN Z OPHTHALMIC SOLUTION 0.004 % (<i>travoprost</i>)	NF	
<i>travoprost (bak free) ophthalmic solution 0.004 %</i>	G	N8 (Listing does not include certain NDCs)
VYZULTA OPHTHALMIC SOLUTION 0.024 % (<i>latanoprostene bunod</i>)	NF	
XALATAN OPHTHALMIC SOLUTION 0.005 % (<i>latanoprost</i>)	NPB	
XELPROS OPHTHALMIC EMULSION 0.005 % (<i>latanoprost</i>)	NF	
ZIOPTAN OPHTHALMIC SOLUTION 0.0015 % (<i>tafluprost</i>)	NPB	
RETINAL DISORDERS		
BYOOVIZ INTRAVITREAL SOLUTION 0.5 MG/0.05ML (<i>ranibizumab-nuna</i>)	PSP	
CIMERLI INTRAVITREAL SOLUTION 0.3 MG/0.05ML, 0.5 MG/0.05ML (<i>ranibizumab-eqrn</i>)	NPSP	
EYLEA INTRAVITREAL SOLUTION 2 MG/0.05ML (<i>afibercept</i>)	NF	
EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE 2 MG/0.05ML (<i>afibercept</i>)	NF	
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE 0.3 MG/0.05ML, 0.5 MG/0.05ML (<i>ranibizumab</i>)	NF	
RHO KINASE INHIBITORS - DRUGS TO TREAT EYE CONDITIONS		
RHOPRESSA OPHTHALMIC SOLUTION 0.02 % (<i>netarsudil dimesylate</i>)	NF	
SYMPATHOMIMETICS - DRUGS TO TREAT GLAUCOMA		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 % (<i>brimonidine tartrate</i>)	PB	
<i>apraclonidine hcl ophthalmic solution 0.5 %</i>	G	
<i>brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %</i>	G	
IOPIDINE OPHTHALMIC SOLUTION 1 % (<i>apraclonidine hcl</i>)	NPB	
OTHER		
IRRIGATION SOLUTIONS		
<i>water for irrigation, sterile</i> (Argyle Sterile Water Irrigation Solution)	G	
<i>lactated ringers irrigation solution</i>	G	
<i>irrigation solns physiological</i> (Physiolyte Irrigation Solution)	G	
<i>irrigation solns physiological</i> (Physiosol Irrigation Irrigation Solution)	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month

01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>ringers irrigation irrigation solution</i>	G	
<i>sterile water for irrigation irrigation solution</i>	G	
RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS		
ALPHA-1 ANTITRYPSIN DEFICIENCY AGENTS - DRUGS FOR REPLACEMENT, MODIFICATION, TREATMENT		
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG (<i>alpha1-proteinase inhibitor</i>)	PSP	
GLASSIA INTRAVENOUS SOLUTION 1000 MG/50ML, 4 GM/200ML, 5 GM/250ML (<i>alpha1-proteinase inhibitor</i>)	PSP	
PROLASTIN-C INTRAVENOUS SOLUTION 1000 MG/20ML (<i>alpha1-proteinase inhibitor</i>)	NF	
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 4000 MG, 5000 MG (<i>alpha1-proteinase inhibitor</i>)	PSP	
ANAPHYLAXIS TREATMENT AGENTS		
ADRENALIN INJECTION SOLUTION 1 MG/ML, 30 MG/30ML (<i>epinephrine</i>)	NF	
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML, 0.15 MG/0.15ML, 0.3 MG/0.3ML (<i>epinephrine</i>)	PB	
<i>epinephrine injection solution auto-injector 0.15 mg/0.15ml</i>	G	
<i>epinephrine injection solution auto-injector 0.15 mg/0.3ml, 0.3 mg/0.3ml</i>	G	N8 (Listing does not include certain NDCs)
<i>epinephrine injection solution prefilled syringe 0.3 mg/0.3ml</i>	G	N8 (Listing does not include certain NDCs)
<i>epinephrine professional injection kit 1 mg/ml</i>	NF	
EPINEPHRINESNAP-EMS INJECTION KIT 1 MG/ML (<i>epinephrine</i>)	NF	
EPINEPHRINESNAP-V INJECTION KIT 1 MG/ML (<i>epinephrine</i>)	NF	
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (<i>epinephrine</i>)	NF	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML (<i>epinephrine</i>)	NF	
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD		
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT (<i>umeclidinium-vilanterol</i>)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT (<i>glycopyrrolate-formoterol</i>)	NF	
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT (<i>ipratropium-albuterol</i>)	NPB	
<i>ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml</i>	G	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT (<i>tiotropium bromide-olodaterol</i>)	PB	
<i>umeclidinium-vilanterol inhalation aerosol powder breath activated 62.5-25 mcg/act</i>	NF	
ANTICHOLINERGIC/BETA AGONIST/STEROID COMBINATIONS - DRUGS TO TREAT ASTHMA AND COPD		
BREZTRI AEROSPHERE INHALATION AEROSOL 160-9-4.8 MCG/ACT (<i>budeson-glycopyrrol-formoterol</i>)	PB	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT (<i>fluticasone-umeclidin-vilant</i>)	PB	
ANTICHOLINERGICS		
ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT (<i>ipratropium bromide hfa</i>)	NPB	
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT (<i>umeclidinium bromide</i>)	NF	
<i>ipratropium bromide inhalation solution 0.02 %</i>	G	N8 (Listing does not include certain NDCs)
<i>ipratropium bromide nasal solution 0.03 %, 0.06 %</i>	G	
SPIRIVA HANDIHALER INHALATION CAPSULE 18 MCG (<i>tiotropium bromide</i>)	PB	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT (<i>tiotropium bromide</i>)	PB	
<i>tiotropium bromide inhalation capsule 18 mcg</i>	NF	
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT (<i>aclidinium bromide</i>)	NF	
YUPELRI INHALATION SOLUTION 175 MCG/3ML (<i>revefenacin</i>)	PB	
ANTIHIISTAMINE COMBINATIONS		
<i>azelastine-fluticasone nasal suspension 137-50 mcg/act</i>	G	
DYMISTA NASAL SUSPENSION 137-50 MCG/ACT (<i>azelastine-fluticasone</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
RYALTRIS NASAL SUSPENSION 665-25 MCG/ACT (olopatadine-mometasone)	NF	
ANTIHIISTAMINES - DRUGS TO TREAT ALLERGIES		
azelastine hcl nasal solution 137 mcg/spray	G	
carbinoxamine maleate oral solution 4 mg/5ml	G	
carbinoxamine maleate oral tablet 4 mg	G	
carbinoxamine maleate oral tablet 6 mg	G	N8 (Listing does not include certain NDCs)
cetirizine hcl oral solution 1 mg/ml	G	
CLARINEX ORAL TABLET 5 MG (desloratadine)	NPB	
clemastine fumarate oral tablet 2.68 mg	G	
cyproheptadine hcl oral syrup 2 mg/5ml	G	
cyproheptadine hcl oral tablet 4 mg	G	N8 (Listing does not include certain NDCs)
desloratadine oral tablet 5 mg	G	
desloratadine oral tablet dispersible 2.5 mg, 5 mg	G	
diphenhydramine hcl oral elixir 12.5 mg/5ml	G	
hydroxyzine hcl oral syrup 10 mg/5ml	G	
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	G	N8 (Listing does not include certain NDCs)
hydroxyzine pamoate oral capsule 100 mg	G	
hydroxyzine pamoate oral capsule 25 mg, 50 mg	G	N8 (Listing does not include certain NDCs)
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE 4 MG/5ML (carbinoxamine maleate)	NPB	
levocetirizine dihydrochloride oral solution 2.5 mg/5ml	G	
levocetirizine dihydrochloride oral tablet 5 mg	G	
olopatadine hcl nasal solution 0.6 %	G	
RYCLORA ORAL SOLUTION 2 MG/5ML (dexchlorpheniramine maleate)	NF	
carbinoxamine maleate (Ryvent Oral Tablet 6 Mg)	G	
BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD		
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	G	N8 (Listing does not include certain NDCs)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, (5 mg/ml) 0.5%, 0.63 mg/3ml, 1.25 mg/3ml	G	N8 (Listing does not include certain NDCs)
albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>albuterol sulfate oral syrup 2 mg/5ml</i>	G	
<i>albuterol sulfate oral tablet 2 mg</i>	G	
<i>albuterol sulfate oral tablet 4 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>arformoterol tartrate inhalation nebulization solution 15 mcg/2ml</i>	G	
BROVANA INHALATION NEBULIZATION SOLUTION 15 MCG/2ML (<i>arformoterol tartrate</i>)	NPB	
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml</i>	G	
<i>levalbuterol tartrate inhalation aerosol 45 mcg/act</i>	NPB	
PERFORMIST INHALATION NEBULIZATION SOLUTION 20 MCG/2ML (<i>formoterol fumarate</i>)	NPB	
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT (<i>albuterol sulfate</i>)	NF	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT (<i>salmeterol xinafoate</i>)	PB	
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT (<i>olodaterol hcl</i>)	PB	
<i>terbutaline sulfate oral tablet 2.5 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
VENTOLIN HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT (<i>albuterol sulfate</i>)	NF	
XOPENEX HFA INHALATION AEROSOL 45 MCG/ACT (<i>levalbuterol tartrate</i>)	NF	
COLD/COUGH		
ADRENALIN NASAL SOLUTION 0.1 % (<i>epinephrine hcl (nasal)</i>)	NPB	
<i>benzonatate oral capsule 100 mg, 200 mg</i>	G	
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR 2.5-120 MG (<i>desloratadine-pseudoephedrine</i>)	NPB	
HYCODAN ORAL SOLUTION 5-1.5 MG/5ML (<i>hydrocodone bit-homatrop mbr</i>)	NF	
HYCODAN ORAL TABLET 5-1.5 MG (<i>hydrocodone bit-homatrop mbr</i>)	NF	
<i>hydrocod poli-chlorphe poli er oral suspension extended release 10-8 mg/5ml</i>	G	
<i>hydrocodone bit-homatrop mbr oral solution 5-1.5 mg/5ml</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>hydrocodone bit-homatrop mbr oral tablet 5-1.5 mg</i>	G	
<i>hydromet oral solution 5-1.5 mg/5ml</i>	G	
<i>promethazine-codeine oral solution 6.25-10 mg/5ml</i>	G	
<i>promethazine-codeine oral syrup 6.25-10 mg/5ml</i>	G	
<i>promethazine-dm oral syrup 6.25-15 mg/5ml</i>	G	
<i>pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR 54.3-8 MG (<i>chlorpheniramine-codeine</i>)	NF	
CYSTIC FIBROSIS		
ALYFTREK ORAL TABLET 10-50-125 MG, 4-20-50 MG (<i>vanzacaft-tezacaft-deutivacaft</i>)	NF	
BETHKIS INHALATION NEBULIZATION SOLUTION 300 MG/4ML (<i>tobramycin</i>)	NF	
BRONCHITOL INHALATION CAPSULE 40 MG (<i>mannitol (cystic fibrosis)</i>)	NF	
BRONCHITOL TOLERANCE TEST INHALATION CAPSULE 40 MG (<i>mannitol (cystic fibrosis)</i>)	NF	
CAYSTON INHALATION SOLUTION RECONSTITUTED 75 MG (<i>aztreonam lysine</i>)	NF	
KALYDECO ORAL PACKET 13.4 MG, 25 MG, 5.8 MG (<i>ivacaftor</i>)	NPSP	
KALYDECO ORAL PACKET 50 MG, 75 MG (<i>ivacaftor</i>)	NPB	
KITABIS PAK (W/ NEBULIZER) INHALATION NEBULIZATION SOLUTION 300 MG/5ML (<i>tobramycin</i>)	NF	
ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG, 75-94 MG (<i>lumacaftor-ivacaftor</i>)	NPSP	
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG (<i>lumacaftor-ivacaftor</i>)	NPB	
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML (<i>dornase alfa</i>)	NPSP	
SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG, 50-75 & 75 MG (<i>tezacaftor-ivacaftor</i>)	NPSP	
TOBI INHALATION NEBULIZATION SOLUTION 300 MG/5ML (<i>tobramycin</i>)	NF	
TOBI PODHALER INHALATION CAPSULE 28 MG (<i>tobramycin</i>)	NF	
<i>tobramycin inhalation nebulization solution 300 mg/5ml</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG, 50-25-37.5 & 75 MG (<i>elexacaftor-tezacaftor-ivacafti</i>)	NPSP	
TRIKAFTA ORAL THERAPY PACK 100-50-75 & 75 MG, 80-40-60 & 59.5 MG (<i>elexacaftor-tezacaftor-ivacafti</i>)	NPSP	
LEUKOTRIENE MODIFIERS		
<i>zileuton er oral tablet extended release 12 hour 600 mg</i>	NF	
LEUKOTRIENE RECEPTOR ANTAGONISTS - DRUGS TO TREAT ASTHMA AND ALLERGIES		
<i>montelukast sodium oral packet 4 mg</i>	G	
<i>montelukast sodium oral tablet 10 mg</i>	G	
<i>montelukast sodium oral tablet chewable 4 mg, 5 mg</i>	G	
SINGULAIR ORAL PACKET 4 MG (<i>montelukast sodium</i>)	NF	
SINGULAIR ORAL TABLET 10 MG (<i>montelukast sodium</i>)	NF	
SINGULAIR ORAL TABLET CHEWABLE 4 MG, 5 MG (<i>montelukast sodium</i>)	NF	
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	G	
MAST CELL STABILIZERS - DRUGS TO TREAT ALLERGIES		
<i>cromolyn sodium inhalation nebulization solution 20 mg/2ml</i>	G	
MISCELLANEOUS		
<i>acetylcysteine inhalation solution 10 %, 20 %</i>	G	
DALIRESP ORAL TABLET 250 MCG, 500 MCG (<i>roflumilast</i>)	NF	
HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 % (<i>sodium chloride</i>)	NPB	
OHTUVAYRE INHALATION SUSPENSION 3 MG/2.5ML (<i>ensifentrine</i>)	NF	
<i>sodium chloride inhalation nebulization solution 0.9 %</i>	G	N8 (Listing does not include certain NDCs)
<i>sodium chloride inhalation nebulization solution 10 %, 3 %, 7 %</i>	G	
NASAL STEROIDS - DRUGS TO TREAT ALLERGIES		
<i>flunisolide nasal solution 25 mcg/act (0.025%)</i>	G	
<i>fluticasone propionate nasal suspension 50 mcg/act</i>	G	
<i>mometasone furoate nasal suspension 50 mcg/act</i>	G	
OMNARIS NASAL SUSPENSION 50 MCG/ACT (<i>ciclesonide</i>)	NF	
QNASL CHILDRENS NASAL AEROSOL SOLUTION 40 MCG/ACT (<i>beclomethasone diprop (nasal)</i>)	NF	
QNASL NASAL AEROSOL SOLUTION 80 MCG/ACT (<i>beclomethasone diprop (nasal)</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month

01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
SINUVA NASAL IMPLANT 1350 MCG (<i>mometasone furoate</i>)	NF	
XHANCE NASAL EXHALER SUSPENSION 93 MCG/ACT (<i>fluticasone propionate</i>)	PB	
PULMONARY FIBROSIS AGENTS		
ESBRIET ORAL TABLET 267 MG, 801 MG (<i>pirfenidone</i>)	NF	
OFEV ORAL CAPSULE 100 MG, 150 MG (<i>nintedanib esylate</i>)	PSP	
<i>pirfenidone oral tablet 534 mg</i>	NF	
SEVERE ASTHMA AGENTS		
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML (<i>benralizumab</i>)	PSP	
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 210 MG/1.91ML (<i>tezepelumab-ekko</i>)	PSP	
STEROID INHALANTS - DRUGS TO TREAT ASTHMA		
ALVESCO INHALATION AEROSOL SOLUTION 160 MCG/ACT, 80 MCG/ACT (<i>ciclesonide</i>)	NF	
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT (<i>fluticasone furoate</i>)	NF	
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT (<i>mometasone furoate</i>)	NF	
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT (<i>mometasone furoate</i>)	NF	
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT, 220 MCG/ACT (<i>mometasone furoate</i>)	NF	
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT (<i>mometasone furoate</i>)	NF	
ASMANEX HFA INHALATION AEROSOL 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT (<i>mometasone furoate</i>)	PB	
<i>budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml</i>	G	
<i>fluticasone propionate diskus inhalation aerosol powder breath activated 100 mcg/act, 250 mcg/act, 50 mcg/act</i>	NF	
<i>fluticasone propionate hfa inhalation aerosol 110 mcg/act, 220 mcg/act, 44 mcg/act</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 180 MCG/ACT, 90 MCG/ACT (<i>budesonide</i>)	PB	
QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT, 80 MCG/ACT (<i>beclomethasone diprop hfa</i>)	NF	
STEROID/BETA-AGONIST COMBINATIONS - DRUGS TO TREAT ASTHMA AND COPD		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT (<i>fluticasone-salmeterol</i>)	NF	
ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT (<i>fluticasone-salmeterol</i>)	NF	
AIRSUPRA INHALATION AEROSOL 90-80 MCG/ACT (<i>albuterol-budesonide</i>)	PB	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT (<i>fluticasone furoate-vilanterol</i>)	PB	N8 (Listing does not include certain NDCs)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 50-25 MCG/INH (<i>fluticasone furoate-vilanterol</i>)	PB	
<i>budesonide-formoterol fumarate</i> (Breyna Inhalation Aerosol 160-4.5 Mcg/Act, 80-4.5 Mcg/Act)	G	
<i>budesonide-formoterol fumarate inhalation aerosol 160-4.5 mcg/act, 80-4.5 mcg/act</i>	G	
DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400-12 MCG/ACT (<i>aclidinium bromformoterol fum</i>)	NF	
DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT, 50-5 MCG/ACT (<i>mometasone furo-formoterol fum</i>)	NF	
<i>fluticasone furoate-vilanterol inhalation aerosol powder breath activated 100-25 mcg/act, 200-25 mcg/act</i>	NF	
<i>fluticasone-salmeterol inhalation aerosol 115-21 mcg/act, 230-21 mcg/act, 45-21 mcg/act</i>	NF	
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</i>	G	N8 (Listing does not include certain NDCs)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	NF	
SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT (<i>budesonide-formoterol fumarate</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>fluticasone-salmeterol</i> (Wixela Inhub Inhalation Aerosol Powder Breath Activated 100-50 Mcg/Act, 250-50 Mcg/Act, 500-50 Mcg/Act)	G	
XANTHINES - DRUGS TO TREAT COPD		
<i>theophylline</i> (Elixophyllin Oral Elixir 80 Mg/15Ml)	NPB	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG, 400 MG (<i>theophylline</i>)	NF	
<i>theophylline er oral tablet extended release 12 hour 300 mg, 450 mg</i>	G	
<i>theophylline er oral tablet extended release 24 hour 400 mg, 600 mg</i>	G	
<i>theophylline oral elixir 80 mg/15ml</i>	G	
TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS		
DERMATOLOGY, ACNE		
ABSORICA LD ORAL CAPSULE 16 MG, 24 MG, 32 MG, 8 MG (<i>isotretinoin micronized</i>)	NF	
ABSORICA ORAL CAPSULE 10 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG (<i>isotretinoin</i>)	NPB	
ACANYA EXTERNAL GEL 1.2-2.5 % (<i>clindamycin phos-benzoyl perox</i>)	NF	
ACZONE EXTERNAL GEL 7.5 % (<i>dapsone</i>)	NF	
<i>adainzoxia external gel 0.3-2.5-4 %</i>	NF	
<i>adapalene external cream 0.1 %</i>	G	
<i>adapalene external gel 0.1 %</i>	G	
<i>adapalene external gel 0.3 %</i>	G	N8 (Listing does not include certain NDCs)
<i>adapalene external pad 0.1 %</i>	NF	
<i>adapalene external solution 0.1 %</i>	NF	
<i>adapalene-benzoyl peroxide external gel 0.1-2.5 %</i>	G	
AKLIEF EXTERNAL CREAM 0.005 % (<i>trifarotene</i>)	PB	
ALTRENO EXTERNAL LOTION 0.05 % (<i>tretinoin</i>)	NF	
<i>isotretinoin</i> (Amnesteem Oral Capsule 10 Mg, 20 Mg, 40 Mg)	G	
AMZEEQ EXTERNAL FOAM 4 % (<i>minocycline hcl micronized</i>)	NF	
<i>aphoria external gel 0.3-2.5-4 %</i>	NF	
ARAZLO EXTERNAL LOTION 0.045 % (<i>tazarotene</i>)	NF	
AZELEX EXTERNAL CREAM 20 % (<i>azelaic acid</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
BENZEPRO EXTERNAL FOAM 5.2 %, 9.7 % (<i>benzoyl peroxide</i>)	NF	
BENZEPRO EXTERNAL FOAM 5.3 % (<i>benzoyl peroxide</i>)	G	
BENZEPRO EXTERNAL LIQUID 6.8 % (<i>benzoyl peroxide</i>)	NF	
<i>benzoyl perox-hydrocortisone external lotion 5-0.5 %</i>	G	
<i>benzoyl peroxide external foam 9.8 %</i>	G	
<i>benzoyl peroxide-erythromycin external gel 5-3 %</i>	G	
CABTREO EXTERNAL GEL 0.15-3.1-1.2 % (<i>adapalene-benzoyl per-clindamy</i>)	NF	
<i>isotretinoin</i> (Claravis Oral Capsule 10 Mg, 20 Mg, 30 Mg, 40 Mg)	G	
<i>clindamycin phosphate</i> (Clindacin Etz External Swab 1 %)	G	
<i>clindamycin phosphate</i> (Clindacin-P External Swab 1 %)	G	
<i>clindamycin phos (once-daily) external gel 1 %</i>	NF	
<i>clindamycin phos (twice-daily) external gel 1 %</i>	NF	
<i>clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %</i>	G	
<i>clindamycin phosphate external foam 1 %</i>	G	
<i>clindamycin phosphate external lotion 1 %</i>	G	
<i>clindamycin phosphate external solution 1 %</i>	G	
<i>clindamycin phosphate external swab 1 %</i>	G	
<i>clindamycin-tretinoin external gel 1.2-0.025 %</i>	G	
<i>dapsone external gel 5 %</i>	G	N8 (Listing does not include certain NDCs)
DIFFERIN EXTERNAL LOTION 0.1 % (<i>adapalene</i>)	NF	
EPIDUO FORTE EXTERNAL GEL 0.3-2.5 % (<i>adapalene-benzoyl peroxide</i>)	PB	
<i>ery external pad 2 %</i>	G	
<i>erythromycin external gel 2 %</i>	G	
<i>erythromycin external solution 2 %</i>	G	
FABIOR EXTERNAL FOAM 0.1 % (<i>tazarotene</i>)	NF	
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	G	
<i>isotretinoin oral capsule 25 mg, 35 mg</i>	NF	
<i>clindamycin-benzoyl per (refr)</i> (Neuac External Gel 1.2-5 %)	G	
ONEXTON EXTERNAL GEL 1.2-3.75 % (<i>clindamycin phos-benzoyl perox</i>)	NPB	
PR BENZOYL PEROXIDE EXTERNAL LIQUID 6.9 % (<i>benzoyl peroxide</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
<i>resorcinol-sulfur external lotion 2-5 %</i>	G	
RETIN-A MICRO EXTERNAL GEL 0.04 %, 0.1 % (<i>tretinoin microsphere</i>)	NF	
RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.06 %, 0.08 %, 0.1 % (<i>tretinoin microsphere</i>)	NF	
<i>sulfacetamide sodium (acne) external lotion 10 %</i>	G	
<i>sulfamez wash external emulsion 10-1 %</i>	G	
<i>tazarotene external foam 0.1 %</i>	NF	
<i>tretinoin external cream 0.025 %, 0.05 %, 0.1 %</i>	G	
<i>tretinoin external gel 0.01 %, 0.025 %, 0.05 %</i>	G	
<i>tretinoin microsphere external gel 0.04 %, 0.1 %</i>	G	
<i>tretinoin microsphere pump external gel 0.04 %</i>	G	
TWYNEO EXTERNAL CREAM 0.1-3 % (<i>tretinoin-benzoyl peroxide</i>)	PB	
WINLEVI EXTERNAL CREAM 1 % (<i>clascoterone</i>)	NPB	
<i>isotretinoin (Zenatane Oral Capsule 10 Mg, 20 Mg, 30 Mg, 40 Mg)</i>	G	
ZIANA EXTERNAL GEL 1.2-0.025 % (<i>clindamycin-tretinoin</i>)	NF	
DERMATOLOGY, ACTINIC KERATOSIS		
<i>fluorouracil external cream 0.5 %</i>	NF	
<i>fluorouracil external cream 5 %</i>	G	
<i>fluorouracil external solution 2 %, 5 %</i>	G	
<i>imiquimod external cream 5 %</i>	G	
<i>imiquimod pump external cream 3.75 %</i>	G	
KLISYRI (250 MG) EXTERNAL OINTMENT 1 % (<i>tirbanibulin</i>)	NF	
KLISYRI (350 MG) EXTERNAL OINTMENT 1 % (<i>tirbanibulin</i>)	NF	
TOLAK EXTERNAL CREAM 4 % (<i>fluorouracil</i>)	NF	
ZYCLARA EXTERNAL CREAM 3.75 % (<i>imiquimod</i>)	NPB	
ZYCLARA PUMP EXTERNAL CREAM 2.5 %, 3.75 % (<i>imiquimod</i>)	NPB	
DERMATOLOGY, ANTIBIOTICS		
<i>gentamicin sulfate external cream 0.1 %</i>	G	
<i>gentamicin sulfate external ointment 0.1 %</i>	G	
<i>mupirocin calcium external cream 2 %</i>	NF	
<i>mupirocin external ointment 2 %</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
NEO-SYNALAR EXTERNAL CREAM 0.5-0.025 % (<i>neomycin-fluocinolone</i>)	NF	
SILVADENE EXTERNAL CREAM 1 % (<i>silver sulfadiazine</i>)	NPB	
<i>silver sulfadiazine external cream 1 %</i>	G	
<i>silver sulfadiazine</i> (Ssd External Cream 1 %)	G	
SULFAMYLON EXTERNAL CREAM 85 MG/GM (<i>mafenide acetate</i>)	NPB	
DERMATOLOGY, ANTIFUNGALS		
<i>ciclopirox</i> (Ciclodan External Solution 8 %)	G	
<i>ciclopirox external gel 0.77 %</i>	G	
<i>ciclopirox external shampoo 1 %</i>	G	
<i>ciclopirox external solution 8 %</i>	G	
<i>ciclopirox olamine external cream 0.77 %</i>	G	
<i>ciclopirox olamine external suspension 0.77 %</i>	G	
<i>clotrimazole external cream 1 %</i>	G	
<i>clotrimazole external solution 1 %</i>	G	
<i>clotrimazole-betamethasone external cream 1-0.05 %</i>	G	
<i>clotrimazole-betamethasone external lotion 1-0.05 %</i>	G	
<i>econazole nitrate external cream 1 %</i>	G	
ECOZA EXTERNAL FOAM 1 % (<i>econazole nitrate</i>)	NPB	
ERTACZO EXTERNAL CREAM 2 % (<i>sertaconazole nitrate</i>)	NPB	
EXELDERM EXTERNAL CREAM 1 % (<i>sulconazole nitrate</i>)	NPB	
EXELDERM EXTERNAL SOLUTION 1 % (<i>sulconazole nitrate</i>)	NPB	
<i>fungimez external solution</i>	NF	
JUBLIA EXTERNAL SOLUTION 10 % (<i>efinaconazole</i>)	NPB	
<i>ketoconazole external cream 2 %</i>	G	
<i>ketoconazole external foam 2 %</i>	NF	
<i>ketoconazole</i> (Ketodan External Foam 2 %)	NF	
<i>luliconazole external cream 1 %</i>	NF	
<i>miconazole-zinc oxide-petrolat external ointment 0.25-15-81.35 %</i>	G	
<i>naftifine hcl external cream 1 %, 2 %</i>	G	
NAFTIN EXTERNAL GEL 2 % (<i>naftifine hcl</i>)	NPB	
<i>nystatin</i> (Nyamyc External Powder 100000 Unit/Gm)	G	
<i>nystatin external cream 100000 unit/gm</i>	G	
<i>nystatin external ointment 100000 unit/gm</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>nystatin external powder 100000 unit/gm</i>	G	
<i>nystatin-triamcinolone external cream 100000-0.1 unit/gm-%</i>	G	
<i>nystatin-triamcinolone external ointment 100000-0.1 unit/gm-%</i>	G	
<i>nystatin (Nystop External Powder 100000 Unit/Gm)</i>	G	
<i>oxiconazole nitrate external cream 1 %</i>	NF	
OXISTAT EXTERNAL LOTION 1 % (<i>oxiconazole nitrate</i>)	NPB	
<i>sulconazole nitrate external solution 1 %</i>	NPB	
<i>tavaborole external solution 5 %</i>	NF	
VUSION EXTERNAL OINTMENT 0.25-15-81.35 % (<i>miconazole-zinc oxide-petrolat</i>)	NPB	
DERMATOLOGY, ANTIPRURITIC		
<i>doxepin hcl external cream 5 %</i>	NF	
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	G	
<i>calcipotriene external cream 0.005 %</i>	NF	
<i>calcipotriene external foam 0.005 %</i>	NF	
<i>calcipotriene external ointment 0.005 %</i>	G	
<i>calcipotriene external solution 0.005 %</i>	G	
<i>calcipotriene-betameth diprop external ointment 0.005-0.064 %</i>	NF	
<i>calcipotriene-betameth diprop external suspension 0.005-0.064 %</i>	NF	
<i>calcipotriene (Calcitrene External Ointment 0.005 %)</i>	G	
<i>calcitriol external ointment 3 mcg/gm</i>	NF	
ENSTILAR EXTERNAL FOAM 0.005-0.064 % (<i>calcipotriene-betameth diprop</i>)	PB	
<i>methoxsalen rapid oral capsule 10 mg</i>	NPB	
SORILUX EXTERNAL FOAM 0.005 % (<i>calcipotriene</i>)	NF	
SPEVIGO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML (<i>spesolimab-sbzo</i>)	NPSP	
TACLONEX EXTERNAL SUSPENSION 0.005-0.064 % (<i>calcipotriene-betameth diprop</i>)	NPB	
<i>tazarotene external cream 0.1 %</i>	G	
TAZORAC EXTERNAL CREAM 0.05 %, 0.1 % (<i>tazarotene</i>)	NF	
TAZORAC EXTERNAL GEL 0.05 %, 0.1 % (<i>tazarotene</i>)	NF	
VECTICAL EXTERNAL OINTMENT 3 MCG/GM (<i>calcitriol</i>)	NF	
VTAMA EXTERNAL CREAM 1 % (<i>tapinarof</i>)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
WYNZORA EXTERNAL CREAM 0.005-0.064 % (<i>calcipotriene-betameth diprop</i>)	NF	
ZORYVE EXTERNAL CREAM 0.3 % (<i>roflumilast</i>)	PB	
DERMATOLOGY, ANTISEBORRHEICS		
<i>glycolic acid solution 70 %</i>	NPB	
<i>ketoconazole external shampoo 2 %</i>	G	
<i>selenium sulfide external lotion 2.5 %</i>	G	
ZORYVE EXTERNAL FOAM 0.3 % (<i>roflumilast</i>)	PB	
DERMATOLOGY, ATOPIC DERMATITIS		
ADBRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML (<i>tralokinumab-ldrm</i>)	NPSP	
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML (<i>tralokinumab-ldrm</i>)	NPSP	
CIBINQO ORAL TABLET 100 MG, 200 MG, 50 MG (<i>abrocitinib</i>)	PSP	
EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR 250 MG/2ML (<i>lebrikizumab-lbkz</i>)	PSP	
EBGLYSS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 250 MG/2ML (<i>lebrikizumab-lbkz</i>)	PSP	
ELIDEL EXTERNAL CREAM 1 % (<i>pimecrolimus</i>)	NF	
EUCRISA EXTERNAL OINTMENT 2 % (<i>crisaborole</i>)	PB	
OPZELURA EXTERNAL CREAM 1.5 % (<i>ruxolitinib phosphate</i>)	PB	
<i>pimecrolimus external cream 1 %</i>	G	
<i>tacrolimus external ointment 0.03 %, 0.1 %</i>	G	
ZORYVE EXTERNAL CREAM 0.05 %, 0.15 % (<i>roflumilast</i>)	PB	
DERMATOLOGY, CORTICOSTEROIDS		
ADVANCED ALLERGY COLLECTION EXTERNAL KIT 2.5 % (<i>hydrocortisone</i>)	NF	
ALA SCALP EXTERNAL LOTION 2 % (<i>hydrocortisone</i>)	NF	
<i>ala-cort external cream 1 %</i>	G	
<i>alclometasone dipropionate external cream 0.05 %</i>	G	
<i>alclometasone dipropionate external ointment 0.05 %</i>	G	
<i>amcinonide external cream 0.1 %</i>	NF	
<i>amcinonide external ointment 0.1 %</i>	NF	
<i>betamethasone dipropionate aug external cream 0.05 %</i>	G	
<i>betamethasone dipropionate aug external gel 0.05 %</i>	G	
<i>betamethasone dipropionate aug external lotion 0.05 %</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>betamethasone dipropionate aug external ointment 0.05 %</i>	G	
<i>betamethasone dipropionate external cream 0.05 %</i>	G	
<i>betamethasone dipropionate external lotion 0.05 %</i>	G	
<i>betamethasone dipropionate external ointment 0.05 %</i>	NF	
<i>betamethasone valerate external cream 0.1 %</i>	G	
<i>betamethasone valerate external foam 0.12 %</i>	G	
<i>betamethasone valerate external lotion 0.1 %</i>	G	
<i>betamethasone valerate external ointment 0.1 %</i>	G	
BRYHALI EXTERNAL LOTION 0.01 % (<i>halobetasol propionate</i>)	PB	
<i>clobetasol propionate e external cream 0.05 %</i>	G	
<i>clobetasol propionate emulsion external foam 0.05 %</i>	NF	
<i>clobetasol propionate external cream 0.05 %</i>	G	
<i>clobetasol propionate external foam 0.05 %</i>	G	
<i>clobetasol propionate external gel 0.05 %</i>	G	
<i>clobetasol propionate external liquid 0.05 %</i>	NF	
<i>clobetasol propionate external lotion 0.05 %</i>	G	
<i>clobetasol propionate external ointment 0.05 %</i>	G	
<i>clobetasol propionate external shampoo 0.05 %</i>	G	
<i>clobetasol propionate external solution 0.05 %</i>	G	
CLOBEX EXTERNAL LOTION 0.05 % (<i>clobetasol propionate</i>)	NPB	
CLOBEX EXTERNAL SHAMPOO 0.05 % (<i>clobetasol propionate</i>)	NPB	
CLOBEX SPRAY EXTERNAL LIQUID 0.05 % (<i>clobetasol propionate</i>)	NF	
<i>clocortolone pivalate external cream 0.1 %</i>	NF	
<i>clobetasol propionate</i> (Clodan External Shampoo 0.05 %)	G	
CLODERM EXTERNAL CREAM 0.1 % (<i>clocortolone pivalate</i>)	NPB	
CORDRAN EXTERNAL TAPE 4 MCG/SQCM (<i>flurandrenolide</i>)	NF	
DERMA-SMOOTH/FS BODY EXTERNAL OIL 0.01 % (<i>fluocinolone acetone</i>)	NPB	
DERMA-SMOOTH/FS SCALP EXTERNAL OIL 0.01 % (<i>fluocinolone acetone</i>)	NPB	
<i>desonide external cream 0.05 %</i>	G	
<i>desonide external gel 0.05 %</i>	NF	
<i>desonide external lotion 0.05 %</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>desonide external ointment 0.05 %</i>	G	
<i>desoximetasone external cream 0.05 %, 0.25 %</i>	G	
<i>desoximetasone external gel 0.05 %</i>	G	
<i>desoximetasone external liquid 0.25 %</i>	G	
<i>desoximetasone external ointment 0.05 %</i>	NF	
<i>desoximetasone external ointment 0.25 %</i>	G	
<i>diflorasone diacetate external cream 0.05 %</i>	NF	
<i>diflorasone diacetate external ointment 0.05 %</i>	NF	
DIPROLENE EXTERNAL OINTMENT 0.05 % (<i>betamethasone dipropionate aug</i>)	NPB	
DUOBRII EXTERNAL LOTION 0.01-0.045 % (<i>halobetasol prop-tazarotene</i>)	NF	
<i>fluocinolone acetonide body external oil 0.01 %</i>	G	
<i>fluocinolone acetonide external cream 0.01 %, 0.025 %</i>	G	
<i>fluocinolone acetonide external ointment 0.025 %</i>	G	
<i>fluocinolone acetonide external solution 0.01 %</i>	G	
<i>fluocinolone acetonide scalp external oil 0.01 %</i>	G	
<i>fluocinonide emulsified base external cream 0.05 %</i>	G	
<i>fluocinonide external cream 0.05 %</i>	G	
<i>fluocinonide external cream 0.1 %</i>	NF	
<i>fluocinonide external gel 0.05 %</i>	G	
<i>fluocinonide external ointment 0.05 %</i>	G	
<i>fluocinonide external solution 0.05 %</i>	G	
<i>flurandrenolide external lotion 0.05 %</i>	NF	
<i>fluticasone propionate external cream 0.05 %</i>	G	
<i>fluticasone propionate external lotion 0.05 %</i>	G	
<i>fluticasone propionate external ointment 0.005 %</i>	G	
<i>halcinonide external cream 0.1 %</i>	NF	
<i>halobetasol propionate external cream 0.05 %</i>	G	
<i>halobetasol propionate external foam 0.05 %</i>	NF	
<i>halobetasol propionate external ointment 0.05 %</i>	G	
HALOG EXTERNAL CREAM 0.1 % (<i>halcinonide</i>)	NF	
<i>hydrocortisone butyrate external cream 0.1 %</i>	NF	
<i>hydrocortisone butyrate external lotion 0.1 %</i>	NF	
<i>hydrocortisone butyrate external ointment 0.1 %</i>	G	
<i>hydrocortisone butyrate external solution 0.1 %</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>hydrocortisone external cream 2.5 %</i>	G	
<i>hydrocortisone external lotion 2 %</i>	NF	
<i>hydrocortisone external lotion 2.5 %</i>	G	
<i>hydrocortisone external ointment 1 %, 2.5 %</i>	G	
<i>hydrocortisone valerate external cream 0.2 %</i>	G	
<i>hydrocortisone valerate external ointment 0.2 %</i>	G	
IMPOYZ EXTERNAL CREAM 0.025 % (<i>clobetasol propionate</i>)	NF	
<i>halobetasol propionate</i> (Lexette External Foam 0.05 %)	NF	
MEDPURA HYDROCORTISONE EXTERNAL CREAM 1 % (<i>hydrocortisone</i>)	G	
<i>mometasone furoate external cream 0.1 %</i>	G	
<i>mometasone furoate external ointment 0.1 %</i>	G	
<i>mometasone furoate external solution 0.1 %</i>	G	
SERNIVO EXTERNAL EMULSION 0.05 % (<i>betamethasone dipropionate</i>)	NPB	
TEXACORT EXTERNAL SOLUTION 2.5 % (<i>hydrocortisone</i>)	G	
TOPICORT EXTERNAL OINTMENT 0.25 % (<i>desoximetasone</i>)	NPB	
<i>clobetasol propionate emulsion</i> (Tovet External Foam 0.05 %)	NF	
<i>triamcinolone acetonide external aerosol solution 0.147 mg/gm</i>	NF	
<i>triamcinolone acetonide external cream 0.025 %, 0.1 %, 0.5 %</i>	G	
<i>triamcinolone acetonide external lotion 0.025 %, 0.1 %</i>	G	
<i>triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %</i>	G	
<i>triamcinolone acetonide external ointment 0.05 %</i>	NF	
<i>triamcinolone in absorbbase external ointment 0.05 %</i>	NF	
<i>triamcinolone acetonide</i> (Triderm External Cream 0.5 %)	G	
ULTRAVATE EXTERNAL LOTION 0.05 % (<i>halobetasol propionate</i>)	NF	
DERMATOLOGY, LOCAL ANESTHETICS		
<i>lidocaine hcl</i> (Glydo External Prefilled Syringe 2 %)	G	
<i>l.e.t. (racepinephrine) external gel 4-0.05-0.5 %</i>	NF	
<i>l.e.t. external gel 4-0.05-0.5 %</i>	NF	
LDO PLUS EXTERNAL GEL 4 % (<i>lidocaine hcl</i>)	NF	
<i>lidocaine external patch 5 %</i>	G	
<i>lidocaine hcl external solution 4 %</i>	G	
<i>lidocaine hcl urethral/mucosal external prefilled syringe 2 %</i>	G	
<i>lidocaine-prilocaine external cream 2.5-2.5 %</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
01/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
LIDODERM EXTERNAL PATCH 5 % (<i>lidocaine</i>)	NPB	
LMR PLUS EXTERNAL KIT 5 & 0.5-0.5 % (<i>lidocaine-camphor-menthol</i>)	NF	
<i>paingo kft external kit 2.5-2.5-10-30 %</i>	NF	
<i>prepiv supply combination kit 2.5-2.5 & 0.9 %</i>	NF	
QUTENZA (2 PATCH) EXTERNAL KIT 8 % (<i>capsaicin-cleansing gel</i>)	NPSP	
QUTENZA (4 PATCH) EXTERNAL KIT 8 % (<i>capsaicin-cleansing gel</i>)	NPSP	
QUTENZA EXTERNAL KIT 8 % (<i>capsaicin-cleansing gel</i>)	NPSP	
VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT 2 % (<i>lidocaine hcl-blood collection</i>)	NF	
<i>wpr plus wound healing system external therapy pack 4 & 10-30 %</i>	NF	
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
ACUICYN EXTERNAL SOLUTION (<i>eyelid cleansers</i>)	NF	
<i>acyclovir external cream 5 %</i>	NF	
<i>acyclovir external ointment 5 %</i>	G	
AMELUZ EXTERNAL GEL 10 % (<i>aminolevulinic acid hcl</i>)	NF	
<i>ammonium lactate external cream 12 %</i>	G	
<i>ammonium lactate external lotion 12 %</i>	G	
AVENOVA EXTERNAL SOLUTION 0.01 % (<i>eyelid cleansers</i>)	NF	
CONDYLOX EXTERNAL GEL 0.5 % (<i>podofilox</i>)	NPB	
DENAVIR EXTERNAL CREAM 1 % (<i>penciclovir</i>)	NPB	
HYFTOR EXTERNAL GEL 0.2 % (<i>sirolimus</i>)	NF	
<i>iodine tincture external tincture 2 %</i>	NPB	
NEMLUVIO SUBCUTANEOUS AUTO-INJECTOR 30 MG (<i>nemolizumab-ilto</i>)	PSP	
NUSURGEPAK SURGICAL PREP/CARE EXTERNAL KIT 4 & 2 & 5 % (OINT) (<i>chlorhex-mupir-dimeth-silicone</i>)	NF	
<i>podofilox external solution 0.5 %</i>	G	
RECTIV RECTAL OINTMENT 0.4 % (<i>nitroglycerin</i>)	NPB	
<i>salimez external cream 6 %</i>	NPB	
<i>salimez forte external cream 10 %</i>	NPB	
SANTYL EXTERNAL OINTMENT 250 UNIT/GM (<i>collagenase</i>)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
SOFDRA EXTERNAL GEL 12.45 % (<i>sofpironium bromide</i>)	NPB	
TARGRETIN EXTERNAL GEL 1 % (<i>bexarotene</i>)	NF	
VALCHLOR EXTERNAL GEL 0.016 % (<i>mechlorethamine hcl (topical)</i>)	NPSP	
VEREGEN EXTERNAL OINTMENT 15 % (<i>sinecatechins</i>)	NF	
XERAC AC EXTERNAL SOLUTION 6.25 % (<i>aluminum chloride in alcohol</i>)	NPB	
YCANTH EXTERNAL SOLUTION 0.7 % (<i>cantharidin</i>)	NF	
DERMATOLOGY, ROSACEA		
<i>azelaic acid external gel 15 %</i>	G	
<i>doxycycline oral capsule delayed release 40 mg</i>	NF	
EPSOLAY EXTERNAL CREAM 5 % (<i>benzoyl peroxide</i>)	NF	
FINACEA EXTERNAL FOAM 15 % (<i>azelaic acid</i>)	PB	
FINACEA EXTERNAL GEL 15 % (<i>azelaic acid</i>)	NF	
<i>ivermectin external cream 1 %</i>	G	
<i>metronidazole external cream 0.75 %</i>	G	
<i>metronidazole external gel 0.75 %, 1 %</i>	G	
<i>metronidazole external lotion 0.75 %</i>	G	
MIRVASO EXTERNAL GEL 0.33 % (<i>brimonidine tartrate</i>)	NF	
NORITATE EXTERNAL CREAM 1 % (<i>metronidazole</i>)	NF	
ORACEA ORAL CAPSULE DELAYED RELEASE 40 MG (<i>doxycycline</i>)	PB	
RHOFADE EXTERNAL CREAM 1 % (<i>oxymetazoline hcl</i>)	NF	
SOOLANTRA EXTERNAL CREAM 1 % (<i>ivermectin</i>)	NF	
ZILXI EXTERNAL FOAM 1.5 % (<i>minocycline hcl micronized</i>)	NF	
DERMATOLOGY, SCABICIDES AND PEDICULICIDES		
CROTAN EXTERNAL LOTION 10 % (<i>crotamiton</i>)	G	
<i>malathion external lotion 0.5 %</i>	G	
OVIDE EXTERNAL LOTION 0.5 % (<i>malathion</i>)	NPB	
<i>permethrin external cream 5 %</i>	G	
<i>spinosad external suspension 0.9 %</i>	G	
<i>sulfurated lime external solution</i>	NPB	
DERMATOLOGY, WOUND CARE AGENTS		
<i>acetic acid irrigation solution 0.25 %</i>	G	
<i>sodium chloride (gu irrigant)</i> (Argyle Sterile Saline Irrigation Solution 0.9 %)	G	

Prescription Drug Name	Drug Tier	Drug Notes
AZADROX EXTERNAL GEL (<i>silver</i>)	NF	
BASADROX EXTERNAL GEL (<i>silver</i>)	NF	
<i>sodium chloride (gu irrigant)</i> (Curity Sterile Saline Irrigation Solution 0.9 %)	G	
FILSUVEZ EXTERNAL GEL 10 % (<i>birch triterpenes</i>)	NF	
KERASTAT EXTERNAL CREAM (<i>keratin</i>)	NF	
KERASTAT EXTERNAL GEL 5 % (<i>keratin</i>)	NF	
L-MESITRAN SOFT WOUND EXTERNAL GEL (<i>wound dressings</i>)	NF	
VYJUVEK EXTERNAL GEL 5000000000 PFU/2.5ML (<i>beremagene geperpavec-svdt</i>)	NF	
MOUTH/THROAT/DENTAL AGENTS		
<i>cevimeline hcl oral capsule 30 mg</i>	G	
<i>chlorhexidine gluconate mouth/throat solution 0.12 %</i>	G	N8 (Listing does not include certain NDCs)
<i>clotrimazole mouth/throat troche 10 mg</i>	G	
EVOXAC ORAL CAPSULE 30 MG (<i>cevimeline hcl</i>)	NPB	
<i>lidocaine hcl mouth/throat solution 4 %</i>	G	
<i>lidocaine viscous hcl mouth/throat solution 2 %</i>	G	N8 (Listing does not include certain NDCs)
<i>nystatin mouth/throat suspension 100000 unit/ml</i>	G	
<i>triamcinolone acetonide</i> (Oralene Mouth/Throat Paste 0.1 %)	G	
ORAVIG BUCCAL TABLET 50 MG (<i>miconazole</i>)	NPB	
<i>chlorhexidine gluconate</i> (Periogard Mouth/Throat Solution 0.12 %)	G	
<i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>	G	
SALAGEN ORAL TABLET 5 MG, 7.5 MG (<i>pilocarpine hcl</i>)	NPB	
<i>triamcinolone acetonide mouth/throat paste 0.1 %</i>	G	
OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR		
<i>acetic acid otic solution 2 %</i>	G	N8 (Listing does not include certain NDCs)
CIPRO HC OTIC SUSPENSION 0.2-1 % (<i>ciprofloxacin-hydrocortisone</i>)	NF	
<i>ciprofloxacin hcl otic solution 0.2 %</i>	G	
<i>ciprofloxacin-dexamethasone otic suspension 0.3-0.1 %</i>	G	
<i>ciprofloxacin-fluocinolone pf otic solution 0.3-0.025 %</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
CORTISPORIN-TC OTIC SUSPENSION 3.3-3-10-0.5 MG/ML (neomycin-colist-hc-thonzonium)	NPB	
fluocinolone acetonide otic oil 0.01 %	G	
hydrocortisone-acetic acid otic solution 1-2 %	G	
neomycin-polymyxin-hc otic solution 1 %, 3.5-10000-1	G	
neomycin-polymyxin-hc otic suspension 3.5-10000-1	G	
ofloxacin otic solution 0.3 %	G	
OTOVEL OTIC SOLUTION 0.3-0.025 % (ciprofloxacin-fluocinolone)	NF	

Index

12-PANEL POC		<i>acetazolamide er</i>	52	ADLARITY	58
TOXICOLOGY SYSTEM.....	106	<i>acetic acid</i>	221, 222	ADMELOG.....	88
<i>1st tier unifine pentips</i>	106	<i>acetylcysteine</i>	208	ADRENALIN.....	53, 203, 206
<i>1st tier unifine pentips plus</i>	106	ACIPHEX.....	163	ADTHYZA.....	154
<i>abacavir sulfate</i>	23	<i>acitretin</i>	215	ADVAIR DISKUS.....	210
<i>abacavir sulfate-lamivudine</i>	25	ACTHAR.....	151	ADVAIR HFA.....	210
ABILIFY.....	63	ACTHAR GEL.....	151	ADVANCE INTUITION	
ABILIFY ASIMTUFII.....	63	<i>acti-lance 28g</i>	107	METER.....	107
ABILIFY MAINTENA.....	63	<i>acti-lance lite lancets 28g</i>	107	ADVANCE INTUITION	
ABILIFY MYCITE		<i>acti-lance special lancets 17g</i> ..	107	MONITOR.....	107
MAINTENANCE KIT.....	63	<i>acti-lance universal 23g</i>	107	ADVANCE INTUITION TEST	
ABILIFY MYCITE STARTER		ACTIMMUNE.....	186	.....	107
KIT.....	63	<i>active fe</i>	192	ADVANCE MICRO-DRAW	
<i>abiraterone acetate</i>	34	<i>activite</i>	192	METER.....	107
ABRILADA (1 PEN).....	177	ACTOS.....	91	ADVANCE MICRO-DRAW	
ABRILADA (2 PEN).....	177	ACUICYN.....	220	TEST.....	107
ABRILADA (2 SYRINGE).....	177	ACULAR.....	199	ADVANCED ALLERGY	
ABSORICA.....	211	ACUVAIL.....	199	COLLECTION.....	216
ABSORICA LD.....	211	<i>acyclovir</i>	26, 220	<i>advanced mobile lancet</i>	107
<i>acamprosate calcium</i>	56	ACZONE.....	211	ADVATE.....	172
ACANYA.....	211	<i>adainzoxia</i>	211	ADVOCATE BLOOD	
<i>acarbose</i>	86	<i>adalimumab-aacf (2 pen)</i>	177	GLUCOSE MONITOR.....	108
ACCRUFER.....	192	<i>adalimumab-aacf (2 syringe)</i>	177	ADVOCATE BLOOD	
ACCU-CHEK AVIVA PLUS		<i>adalimumab-aacf(cd/uc/hs strt)</i>	177	GLUCOSE SYSTEM.....	108
.....	106, 107	<i>adalimumab-aacf(ps/uv starter)</i>	177	ADVOCATE INSULIN PEN	
ACCU-CHEK FASTCLIX		<i>adalimumab-aaty (1 pen)</i>	177	NEEDLE.....	108
LANCET.....	107	<i>adalimumab-aaty (2 pen)</i>	177	ADVOCATE INSULIN PEN	
ACCU-CHEK FASTCLIX		<i>adalimumab-aaty (2 syringe)</i>	177	NEEDLES.....	108
LANCETS.....	107	<i>adalimumab-aaty cd/uc/hs start</i>	177	ADVOCATE INSULIN	
ACCU-CHEK GUIDE.....	107	<i>adalimumab-adaz</i>	177	SYRINGE.....	108
ACCU-CHEK GUIDE ME.....	107	<i>adalimumab-adbm (2 pen)</i>	177	ADVOCATE LANCETS.....	108
ACCU-CHEK GUIDE TEST...	107	<i>adalimumab-adbm (2 syringe)</i> ..	177	ADVOCATE LANCETS 30G..	108
ACCU-CHEK LINKASSIST...	107	<i>adalimumab-adbm(cd/uc/hs</i>		ADVOCATE LANCING	
ACCU-CHEK PLASTIC		<i>strt)</i>	177	DEVICE.....	108
CARTRIDGE.....	107	<i>adalimumab-adbm(ps/uv</i>		ADVOCATE RAPID-SAFE	
ACCU-CHEK SAFE-T PRO		<i>starter)</i>	177	LANCING.....	108
LANCETS.....	107	<i>adalimumab-fkjp (2 pen)</i>	178	ADVOCATE REDI-CODE.....	108
ACCU-CHEK SMARTVIEW..	107	<i>adalimumab-fkjp (2 syringe)</i>	178	ADVOCATE REDI-CODE+	108
ACCU-CHEK SOFTCLIX		<i>adalimumab-ryvk (1 pen)</i>	178	ADVOCATE REDI-CODE+	
LANCET DEV.....	107	<i>adalimumab-ryvk (2 pen)</i>	178	TEST.....	108
ACCU-CHEK SOFTCLIX		<i>adalimumab-ryvk (2 syringe)</i>	178	ADVOCATE SAFETY	
LANCETS.....	107	<i>adapalene</i>	211	LANCETS.....	108
ACCU-CHEK ULTRAFLEX		<i>adapalene-benzoyl peroxide</i>	211	ADVOCATE SAFETY	
INF SET.....	107	ADBRY.....	216	LANCETS 26G.....	108
ACCU-CHEK ULTRAFLEX-1		ADCIRCA.....	55	ADVOCATE TEST.....	108
INF SET.....	107	ADDERALL.....	71	<i>adynovate</i>	172
ACCURETIC.....	42	ADDERALL XR.....	71	ADZENYS XR-ODT.....	71
ACCUTREND GLUCOSE.....	107	<i>adefovir dipivoxil</i>	29	AFINITOR.....	36
<i>acebutolol hcl</i>	49	ADEMPAS.....	55	AFINITOR DISPERZ.....	36
<i>acetaminophen-codeine</i>	16	ADIPEX-P.....	93	Afirmelle.....	96
<i>acetazolamide</i>	52	<i>adjustable lancing device</i>	107	AFREZZA.....	88

AFSTYLA.....	172	ALPHANINE SD.....	173	<i>amoxicillin-pot clavulanate er</i>	32
AFTERA.....	96	<i>alprazolam</i>	57	<i>amphetamine sulfate</i>	71
AFTERPILL.....	96	<i>alprazolam er</i>	57	<i>amphetamine-dextroamphet er</i> ...	71
AGAMATRIX AMP TEST.....	108	ALPRAZOLAM INTENSOL.....	57	<i>amphetamine-</i>	
AGAMATRIX CONTROL		<i>alprazolam xr</i>	57	<i>dextroamphetamine</i>	71
LEVEL 2.....	108	ALPROLIX.....	173	<i>ampicillin</i>	32
AGAMATRIX CONTROL		ALREX.....	199	<i>ampicillin sodium</i>	32
LEVEL 4.....	108	Altacaine.....	201	AMPYRA.....	77
AGAMATRIX JAZZ TEST.....	108	Altafrin.....	201	AMRIX.....	80
AGAMATRIX JAZZ		Altavera.....	96	AMZEEQ.....	211
WIRELESS 2.....	108	ALTOPREV.....	47	ANAFRANIL.....	57
AGAMATRIX PRESTO.....	108	ALTRENO.....	211	<i>anagrelide hcl</i>	174
AGAMATRIX PRESTO TEST	109	<i>altrixa</i>	192	<i>anastrozole</i>	34
AGAMATRIX ULTRA-THIN		ALTUVIIIIO.....	172	ANDEMBRY.....	184
LANCETS.....	109	ALUNBRIG.....	36	ANDROGEL PUMP.....	85
AGAMREE.....	146	ALVAIZ.....	175	ANGELIQ.....	149
AGRYLIN.....	174	ALVESCO.....	209	ANNOVERA.....	96
AIMOVIG.....	75	<i>alyacen 1/35</i>	96	ANORO ELLIPTA.....	203
<i>aimsco twist lancets 32g</i>	109	<i>alyacen 7/7/7</i>	96	ANUSOL-HC.....	164
AIMSCO TWIST LANCETS		ALYFTREK.....	207	ANZEMET.....	158
33G.....	109	ALYGLO.....	184	<i>apap-caff-dihydrocodeine</i>	16
Airavite.....	192	Alyq.....	55	<i>aphoria</i>	211
AIRSUPRA.....	210	<i>amantadine hcl</i>	61	APIDRA.....	88
AJOVY.....	75	<i>ambrisentan</i>	55	APIDRA SOLOSTAR.....	88
AKEEGA.....	34	<i>amcinonide</i>	216	APLENZIN.....	58
AKLIEF.....	211	AMELUZ.....	220	APOKYN.....	61
AKTEN.....	201	Amethyst.....	96	<i>apraclonidine hcl</i>	202
AKYNZEO.....	158	<i>amiloride hcl</i>	52	<i>aprepitant</i>	158
ALA SCALP.....	216	<i>amiloride-hydrochlorothiazide</i> ...	52	Apri.....	96
<i>ala-cort</i>	216	<i>aminocaproic acid</i>	174	APRISO.....	160
<i>albendazole</i>	21	<i>amiodarone hcl</i>	45	APTENSIO XR.....	72
<i>albuterol sulfate</i>	205, 206	AMITIZA.....	160	APTIOM.....	66
<i>albuterol sulfate hfa</i>	205	<i>amitriptyline hcl</i>	58	APTIVUS.....	23
<i>alclometasone dipropionate</i>	216	AMJEVITA.....	178	<i>aq insulin syringe</i>	109
ALDACTONE.....	43	AMJEVITA-PED 10KG TO		<i>aqinject pen needle</i>	109
ALECENSA.....	36	<15KG.....	178	AQUALANCE LANCETS 30G	
<i>alendronate sodium</i>	94	AMJEVITA-PED 15KG TO		.....	109
<i>alfuzosin hcl er</i>	165	<30KG.....	178	ARAKODA.....	23
ALIMTA.....	33	AMLADEX.....	192	ARALAST NP.....	203
<i>aliskiren fumarate</i>	52	AMLODIPINE		Aranelle.....	96
ALKINDI SPRINKLE.....	146	BES+SYRSPEND SF.....	50	ARANESP (ALBUMIN FREE)	
<i>allopurinol</i>	13	<i>amlodipine besy-benazepril hcl</i> ..	42	.....	170
ALLZITAL.....	14	<i>amlodipine besylate</i>	50	ARAVA.....	183
<i>almotriptan malate</i>	76	<i>amlodipine besylate-valsartan</i> ...	43	ARAZLO.....	211
ALOCRIAL.....	196	<i>amlodipine atorvastatin</i>	50	ARCALYST.....	186
<i>alogliptin benzoate</i>	87	<i>amlodipine-olmesartan</i>	43	<i>arformoterol tartrate</i>	206
<i>alogliptin-metformin hcl</i>	86	<i>ammonium lactate</i>	220	Argyle Sterile Saline.....	221
<i>alogliptin-pioglitazone</i>	86	Amnesteem.....	211	Argyle Sterile Water.....	202
ALORA.....	149	<i>amoxapine</i>	58	ARIKAYCE.....	22
<i>alosetron hcl</i>	161	<i>amoxicill-clarithro-lansopraz</i> ...	165	ARIMIDEX.....	34
ALPHAGAN P.....	202	<i>amoxicillin</i>	32	<i>aripiprazole</i>	63
ALPHANATE.....	170	<i>amoxicillin-pot clavulanate</i>	32	ARISTADA.....	63

ARISTADA INITIO	63	ASSURE PLATINUM METER	109	AUTOLET LANCING DEVICE	110
ARIXTRA	168	ASSURE PRISM MULTI TEST	109	AUTOLET LITE CLINISAFE	110
<i>armodafinil</i>	81	ASSURE PRO BLOOD GLUCOSE METER	109	AUTOLET LITE STARTER PACK	110
ARMOUR THYROID	154	ASSURE PRO TEST	109	AUTOLET MINI	110
ARNUITY ELLIPTA	209	ASTAGRAF XL	186	AUTOLET PLATFORMS	110
AROMASIN	34	ASTAMED MYO	192	AUTOLET PLUS	110
ARTHROTEC	16	ATABEX EC	188	AUTOSOFT 30 INFUSION SET	110
ASCENIV	184	ATABEX OB	188	AUTOSOFT 90 INFUSION SET	110
Ascomp-Codeine	16	ATACAND	44	AUTOSOFT XC INFUSION SET	110
Ashlyna	96	ATACAND HCT	43	AUVELITY	58
ASMANEX (120 METERED DOSES)	209	<i>atazanavir sulfate</i>	23	AUVI-Q	203
ASMANEX (14 METERED DOSES)	209	<i>atenolol</i>	49	AVENOVA	220
ASMANEX (30 METERED DOSES)	209	ATENOLOL+SYRSPEND SF ...	49	AVERI	96
ASMANEX (60 METERED DOSES)	209	<i>atenolol-chlorthalidone</i>	48	Aviane	96
ASMANEX HFA	209	ATIVAN	57	<i>avidoxy</i>	32
<i>aspirin</i>	20	<i>atomoxetine hcl</i>	72	AVONEX PEN	77
<i>aspirin adult low dose</i>	19	ATORVALIQ	47	AVONEX PREFILLED	77
<i>aspirin adult low strength</i>	19	<i>atorvastatin calcium</i>	47	AVSOLA	176
<i>aspirin ec adult low dose</i>	19	<i>atovaquone</i>	30	Ayuna	96
<i>aspirin ec low strength</i>	19	<i>atovaquone-proguanil hcl</i>	23	AYVAKIT	36
<i>aspirin low dose</i>	20	<i>atropine sulfate</i>	201	AZADROX	222
<i>aspirin regimen</i>	20	ATROVENT HFA	204	Azasan	186
<i>aspirin-dipyridamole er</i>	174	ATTRUBY	53	AZASITE	198
ASSURE 3 METER	109	AUBAGIO	77	<i>azathioprine</i>	186
ASSURE 3 TEST	109	Aubra Eq	96	<i>azelaic acid</i>	221
ASSURE 4 METER	109	AUGTYRO	36	<i>azelastine hcl</i>	196, 205
ASSURE 4 TEST	109	<i>aum insulin safety pen needle</i> ...	109	<i>azelastine-fluticasone</i>	204
<i>assure comfort lancets 28g</i>	109	<i>aum mini insulin pen needle</i>	110	AZELEX	211
ASSURE ID DUO PRO PEN NEEDLES	109	<i>aum pen needle</i>	110	<i>azesco</i>	188
ASSURE ID PRO PEN NEEDLES	109	AUM READYGARD DUO PEN NEEDLE	110	<i>azithromycin</i>	28
ASSURE ID SAFETY PEN NEEDLES	109	AUM SAFETY PEN NEEDLE	110	AZOPT	200
ASSURE II	109	<i>aurora lancet super thin 30g</i> ...	110	AZOR	43
ASSURE II CHECK	109	<i>aurora lancet thin 23g</i>	110	AZSTARYS	72
ASSURE LANCE LANCETS ..	109	<i>aurora pen needles</i>	110	AZULFIDINE	160
ASSURE LANCE LANCETS 21G	109	Aurovela 1.5/30	96	AZULFIDINE EN-TABS	160
ASSURE LANCE PLUS SAFETY 25G	109	Aurovela 1/20	96	Azurette	96
ASSURE LANCE PLUS SAFETY 30G	109	Aurovela 24 Fe	96	Bac (Butalbital-Acetamin-Caff). 14	
ASSURE LANCE SAFETY LANCET 28G	109	Aurovela Fe 1.5/30	96	<i>bacitracin</i>	198
ASSURE PLATINUM	109	Aurovela Fe 1/20	96	<i>bacitracin-polymyxin b</i>	198
		AURYXIA	153	<i>bacitra-neomycin-polymyxin-hc</i>	197
		AUSTEDO	77	<i>baclofen</i>	80
		AUSTEDO XR	77	BACTRIM	30
		AUSTEDO XR PATIENT TITRATION	77	BACTRIM DS	30
		AUTO-LANCET	110	BAFIERTAM	78
		AUTO-LANCET MINI	110	<i>balsalazide disodium</i>	160
		AUTOLET II CLINISAFE	110	BALVERSA	36
				Balziva	96

BANZEL.....	66	<i>benzonatate</i>	206	<i>blood glucose test strips 333</i>	111
BAQSIMI ONE PACK.....	147	<i>benzoyl perox-hydrocortisone</i> ...	212	BLUJEP.....	30
BAQSIMI TWO PACK.....	147	<i>benzoyl peroxide</i>	212	BLULINK CONTROL HIGH	
BARACLUDE.....	29	<i>benzoyl peroxide-erythromycin</i> ...	212	& LOW.....	111
BARRIGEL.....	164	<i>benztropine mesylate</i>	61	BONJESTA.....	158
BASADROX.....	222	BEPREVE.....	196	<i>bosentan</i>	55
BASAGLAR KWIKPEN.....	88	BERINERT.....	184	BOSULIF.....	36
BASAGLAR TEMPO PEN.....	88	BESIVANCE.....	198	BOTOX.....	74
BAXDELA.....	29	BESREMI.....	34	<i>bp vit 3</i>	192
BAYER ASPIRIN EC LOW		<i>betaine</i>	151	<i>b-plex</i>	192
DOSE.....	20	<i>betamethasone dipropionate</i>	217	<i>b-plex plus</i>	192
BAYER LOW DOSE.....	20	<i>betamethasone dipropionate</i>		BRAFTOVI.....	36
BD INSULIN SYRINGE.....	110	<i>aug</i>	216, 217	BRENZAVVY.....	92
BD INSULIN SYRINGE		<i>betamethasone valerate</i>	217	BREO ELLIPTA.....	210
MICROFINE.....	110	BETAPACE.....	45	BREXAFEMME.....	22
BD INSULIN SYRINGE U-500		BETAPACE AF.....	45	Breyna.....	210
.....	110	BETASERON.....	78	BREZTRI AEROSPHERE.....	204
BD INSULIN SYRINGE		<i>betaxolol hcl</i>	49, 196	<i>briellyn</i>	97
ULTRAFINE.....	110	<i>bethanechol chloride</i>	166	BRILINTA.....	174
BD LATITUDE DIABETES....	110	BETHKIS.....	207	<i>brimonidine tartrate</i>	202
BD LOGIC BLOOD		BETIMOL.....	196	<i>brinzolamide</i>	200
GLUCOSE MONITOR.....	111	BETOPTIC-S.....	197	BRIVIACT.....	66
BD MICROTAINER		BEVESPI AEROSPHERE.....	204	<i>bromfenac sodium (once-daily)</i>	199
LANCETS.....	111	<i>bexagliflozin</i>	92	<i>bromocriptine mesylate</i>	61, 62
BD PEN NEEDLE MICRO		<i>bexarotene</i>	40	BROMSITE.....	199
ULTRAFINE.....	111	BEYAZ.....	97	BRONCHITOL.....	207
BD PEN NEEDLE MINI		BEYFORTUS.....	187	BRONCHITOL TOLERANCE	
ULTRAFINE.....	111	<i>bicalutamide</i>	34	TEST.....	207
BD PEN NEEDLE NANO 2ND		BIDIL.....	53	BROVANA.....	206
GEN.....	111	BIJUVA.....	149	BRUKINSA.....	36
BD PEN NEEDLE NANO		BIKTARVY.....	25	BRYHALI.....	217
ULTRAFINE.....	111	<i>bimatoprost</i>	201	<i>budesonide</i>	160, 209
BD PEN NEEDLE ORIG		<i>bi-mix</i>	166	<i>budesonide er</i>	160
ULTRAFINE.....	111	BIMZELX.....	178	<i>budesonide-formoterol fumarate</i>	
BD PEN NEEDLE SHORT		BINOSTO.....	94	.....	210
ULTRAFINE.....	111	<i>biocel</i>	192	<i>bumetanide</i>	52
BD SAFETYGLIDE INSULIN		BIORPHEN.....	53	BUPHENYL.....	155
SYRINGE.....	111	BIOTEL CARE BLOOD		<i>buprenorphine</i>	19
BD VEO INSULIN SYR U/F		GLUCOSE.....	111	<i>buprenorphine hcl</i>	82
1/2UNIT.....	111	BIOTEL CARE BLOOD		<i>buprenorphine hcl-naloxone hcl</i>	81
BD VEO INSULIN SYR		GLUCOSE SYST.....	111	<i>bupropion hcl</i>	59
ULTRAFINE.....	111	BIOTEL CARE TEST STRIPS	111	<i>bupropion hcl er (smoking det)</i> ...	83
BELBUCA.....	19	<i>bisoprolol fumarate</i>	49	<i>bupropion hcl er (sr)</i>	58
BELSOMRA.....	74	<i>bisoprolol-hydrochlorothiazide</i> ..	48	<i>bupropion hcl er (xl)</i>	58
<i>benazepril hcl</i>	42	BIVIGAM.....	184	<i>buspirone hcl</i>	57
<i>benazepril-hydrochlorothiazide</i> ..	42	Blisovi 24 Fe.....	97	<i>butalbital-acetaminophen</i>	14
BENEFIX.....	173	Blisovi Fe 1.5/30.....	97	<i>butalbital-apap-caff-cod</i>	16
BENICAR.....	44	Blisovi Fe 1/20.....	97	<i>butalbital-apap-caffeine</i>	14
BENICAR HCT.....	43	<i>blood glucose monitor system</i> ...	111	<i>butalbital-asa-caff-codeine</i>	16
BENLYSTA.....	186	<i>blood glucose monitoring 333</i> ..	111	<i>butalbital-aspirin-caffeine</i>	14
BENZEPRO.....	212	<i>blood glucose system pak</i>	111	<i>butorphanol tartrate</i>	16
<i>benznidazole</i>	21	<i>blood glucose test</i>	111	BUTRANS.....	19

BYLVAY.....	162	CARESENS LANCETS 30G ...	112	<i>cefactor</i>	27
BYLVAY (PELLETS).....	162	CARESENS N FELIZ.....	112	<i>cefactor er</i>	27
BYNFEZIA PEN.....	84	CARESENS N FELIZ BT.....	112	<i>cefadroxil</i>	27
BYOOVIZ.....	202	CARESENS N GLUCOSE		<i>cefdinir</i>	27
BYSTOLIC.....	49	SYSTEM.....	112	<i>cefixime</i>	27
<i>cabergoline</i>	151	CARESENS N GLUCOSE		<i>cefpodoxime proxetil</i>	27
CABLIVI.....	170	TEST.....	112	<i>cefprozil</i>	28
CABOMETYX.....	36	CARESENS N VOICE		<i>cefuroxime axetil</i>	28
CABTREO.....	212	SYSTEM.....	112	CELEBREX.....	13
CALCIFOL.....	192	CARESENS S FIT BLOOD		<i>celecoxib</i>	13
<i>calcipotriene</i>	215	GLUC MON.....	112	CELLCEPT.....	186
<i>calcipotriene-betameth diprop</i> ..	215	CARESENS S FIT BT BLOOD		CELONTIN.....	67
<i>calcitonin (salmon)</i>	94	GLUC.....	112	CENFOL.....	192
Calcitrene.....	215	CARESENS S GLUCOSE		<i>cephalexin</i>	28
<i>calcitriol</i>	156, 215	TEST.....	112	CEQUA.....	200
<i>calcium acetate (phos binder)</i> ...	153	CARETOUCH CONTROL		CERDELGA.....	149
CALQUENCE.....	36	SOL LEVEL 2.....	112	CEREZYME.....	149
CAMBIA.....	14	CARETOUCH INSULIN		<i>cetirizine hcl</i>	205
Camila.....	97	SYRINGE.....	112	CETROTIDE.....	145
Camrese.....	97	CARETOUCH		<i>cevimeline hcl</i>	222
Camrese Lo.....	97	LANCING/EJECTOR.....	112	Charlotte 24 Fe.....	97
CAMZYOS.....	53	CARETOUCH MONITOR		Chateal Eq.....	97
<i>candesartan cilexetil</i>	44	SYSTEM.....	112	CHEMET.....	95
<i>candesartan cilexetil-hctz</i>	43	CARETOUCH PEN NEEDLES		CHEMSTRIP K.....	113
<i>capecitabine</i>	33	.....	112	CHEMSTRIP UGK.....	113
CAPLYTA.....	63	CARETOUCH SAFETY		<i>childrens aspirin</i>	20
CAPRELSA.....	36	LANCETS.....	112	<i>chlordiazepoxide hcl</i>	57
<i>captopril</i>	42	CARETOUCH SAFETY		<i>chlordiazepoxide-amitriptyline</i> ...	82
CARAFATE.....	162	LANCETS 26G.....	112	<i>chlorhexidine gluconate</i>	222
CARBAGLU.....	155	CARETOUCH TEST.....	112	<i>chloroquine phosphate</i>	23
<i>carbamazepine</i>	66	CARETOUCH TWIST		<i>chlorpromazine hcl</i>	63, 64
<i>carbamazepine er</i>	66	LANCETS 28G.....	112	<i>chlorthalidone</i>	52
<i>carbidopa</i>	62	CARETOUCH TWIST		<i>chlorzoxazone</i>	80
<i>carbidopa-levodopa</i>	62	LANCETS 30G.....	113	CHOLBAM.....	162
<i>carbidopa-levodopa er</i>	62	CARETOUCH TWIST		<i>cholestyramine</i>	46
<i>carbidopa-levodopa-entacapone</i>	62	LANCETS 33G.....	113	<i>cholestyramine light</i>	46
<i>carbinoxamine maleate</i>	205	CARETOUCH TWIST MC		<i>chorionic gonadotropin</i>	145
CARDIOCOM LANCING		LANCETS 30G.....	113	CIALIS.....	166
DEVICE.....	111	<i>carglumic acid</i>	155	CIBINQO.....	216
CARDIZEM.....	50	<i>carisoprodol</i>	80	Ciclodan.....	214
CARDIZEM CD.....	50	CARNITOR.....	94, 95	<i>ciclopirox</i>	214
CARDIZEM LA.....	50	CARNITOR SF.....	95	<i>ciclopirox olamine</i>	214
CARDURA.....	165	CAROSPIR.....	43	<i>cilostazol</i>	174
CARDURA XL.....	165	<i>carteolol hcl</i>	197	CILOXAN.....	198
CAREFINE PEN NEEDLES... 111		Cartia Xt.....	50	CIMDUO.....	25
<i>careone advanced lancing dev</i> ..	111	<i>carvedilol</i>	49	CIMERLI.....	202
<i>careone insulin syringe</i>	112	<i>carvedilol phosphate er</i>	49	<i>cimetidine</i>	159
CAREONE LANCET SUPER		CATAPRES-TTS-1.....	53	<i>cimetidine hcl</i>	159
THIN 30G.....	112	CATAPRES-TTS-2.....	53	CIMZIA (1 SYRINGE).....	178
<i>careone lancet thin 23g</i>	112	CATAPRES-TTS-3.....	53	CIMZIA (2 SYRINGE).....	178
<i>careone unifine pentips plus</i>	112	CAYA.....	97	CIMZIA-STARTER.....	178
CARESENS LANCETS.....	112	CAYSTON.....	207	<i>cinacalcet hcl</i>	93

CINRYZE.....	184	Clindacin-P.....	212	<i>comfort assured lancets 33g.....</i>	114
CIPRO.....	29	<i>clindamycin hcl.....</i>	30	COMFORT EZ INSULIN	
CIPRO HC.....	222	<i>clindamycin palmitate hcl.....</i>	30	SYRINGE.....	114
<i>ciprofloxacin hcl.....</i>	29, 198, 222	<i>clindamycin phos (once-daily) ..</i>	212	COMFORT EZ MICRO PEN	
<i>ciprofloxacin-dexamethasone ...</i>	222	<i>clindamycin phos (twice-daily) .</i>	212	NEEDLES.....	114
<i>ciprofloxacin-fluocinolone pf.....</i>	222	<i>clindamycin phos-benzoyl perox</i>		COMFORT EZ PEN	
<i>citalopram hydrobromide.....</i>	59	.....	212	NEEDLES.....	114
CITRANATAL 90 DHA.....	188	<i>clindamycin phosphate.....</i>	168, 212	COMFORT EZ PRO PEN	
CITRANATAL ASSURE.....	188	<i>clindamycin-tretinoin.....</i>	212	NEEDLES.....	114
Claravis.....	212	CLINDESSE.....	168	COMFORT EZ SHORT PEN	
CLARINEX.....	205	<i>clobazam.....</i>	67	NEEDLES.....	114
CLARINEX-D 12 HOUR.....	206	<i>clobetasol propionate.....</i>	217	COMFORT TOUCH INSULIN	
<i>clarithromycin.....</i>	28	<i>clobetasol propionate e.....</i>	217	PEN NEED.....	114
<i>clarithromycin er.....</i>	28	<i>clobetasol propionate emulsion</i>	217	COMFORT TOUCH	
CLEANLET LANCETS 28G...	113	CLOBEX.....	217	LANCETS 31G.....	114
<i>clemastine fumarate.....</i>	205	CLOBEX SPRAY.....	217	COMFORT TOUCH PLUS	
CLENPIQ.....	161	<i>clocortolone pivalate.....</i>	217	LANCETS 28G.....	114
CLEOCIN.....	30, 168	Clodan.....	217	COMFORT TOUCH PLUS	
CLEVER CHEK AUTO-CODE		CLODERM.....	217	LANCETS 30G.....	114
SYSTEM.....	113	<i>clomipramine hcl.....</i>	57	COMPLERA.....	25
CLEVER CHEK AUTO-CODE		<i>clonazepam.....</i>	67	<i>complete natal dha.....</i>	189
TEST.....	113	<i>clonidine.....</i>	54	<i>completenate.....</i>	189
CLEVER CHEK AUTO-CODE		<i>clonidine hcl.....</i>	53	Compro.....	158
VOICE.....	113	<i>clonidine hcl er.....</i>	72	CO-NATAL FA.....	189
CLEVER CHEK LANCETS....	113	<i>clopidogrel bisulfate.....</i>	174	CONCEPT DHA.....	189
CLEVER CHEK SYSTEM.....	113	<i>clorazepate dipotassium.....</i>	67	CONCEPT OB.....	189
CLEVER CHEK TEST.....	113	<i>clotrimazole.....</i>	214, 222	CONCERTA.....	72
CLEVER CHOICE AUTO-		<i>clotrimazole-betamethasone.....</i>	214	<i>condoms.....</i>	97
CODE SYSTEM.....	113	<i>clozapine.....</i>	64	CONDYLOX.....	220
CLEVER CHOICE AUTO-		<i>c-nate dha.....</i>	189	CONJUPRI.....	50
CODE TEST.....	113	COAGADEX.....	170	<i>constulose.....</i>	161
CLEVER CHOICE COMFORT		COAGUCHEK LANCETS.....	114	CONTOUR MONITOR.....	114
EZ.....	113	COARTEM.....	23	CONTOUR NEXT EZ.....	114
CLEVER CHOICE LANCETS		COBENFY.....	64	CONTOUR NEXT GEN	
21G.....	113	COBENFY STARTER PACK...	64	MONITOR.....	114
CLEVER CHOICE LANCETS		<i>codeine sulfate.....</i>	16	CONTOUR NEXT LINK.....	114
23G.....	113	COLAZAL.....	160	CONTOUR NEXT MONITOR	114
CLEVER CHOICE LANCETS		<i>colchicine.....</i>	13	CONTOUR NEXT ONE.....	114
28G.....	113	<i>colchicine-probenecid.....</i>	13	CONTOUR NEXT TEST.....	115
CLEVER CHOICE MICRO		<i>colesevelam hcl.....</i>	46	CONTOUR PLUS BLUE.....	115
SYSTEM.....	113	<i>colestipol hcl.....</i>	46	CONTOUR PLUS TEST.....	115
CLEVER CHOICE MICRO		COMBIGAN.....	197	CONTOUR TEST.....	115
TEST.....	113	COMBIPATCH.....	150	CONTRAVE.....	93
CLEVER CHOICE MINI		COMBIVENT RESPIMAT.....	204	CONZIP.....	16
SYSTEM.....	113	COMBOGESIC.....	16	COOL BLOOD GLUCOSE	
CLEVER CHOICE NO		COMETRIQ (100 MG DAILY		TEST STRIPS.....	115
CODING.....	113	DOSE).....	36	COOL MONITOR.....	115
CLEVER CHOICE TALK		COMETRIQ (140 MG DAILY		COOL MONITOR KIT.....	115
SYSTEM.....	113, 114	DOSE).....	36	COPAXONE.....	78
CLIMARA.....	150	COMETRIQ (60 MG DAILY		COPIKTRA.....	36
CLIMARA PRO.....	149	DOSE).....	36	CORDRAN.....	217
Clindacin Etz.....	212	<i>comfort assured lancets 28g.....</i>	114	COREG.....	49

COREG CR.....	49	<i>cyclobenzaprine hcl er</i>	80	Delyla.....	97
CORLANOR.....	53	<i>cyclopentolate hcl</i>	201	DELZICOL.....	160
CORTENEMA.....	160	<i>cyclophosphamide</i>	33	<i>demeclocycline hcl</i>	32
CORTIFOAM.....	160	<i>cycloserine</i>	26	DEMSEER.....	54
CORTISPORIN-TC.....	223	CYCLOSET.....	87	DENAVIR.....	220
CORTROPHIN.....	151	<i>cyclosporine</i>	186, 200	DEPAKOTE.....	67
CORTROPHIN GEL.....	151	<i>cyclosporine modified</i>	186	DEPAKOTE ER.....	67
CORVITE 150.....	192	CYLTEZO (2 PEN).....	179	DEPAKOTE SPRINKLES.....	67
<i>corvite fe</i>	192	CYLTEZO (2 SYRINGE).....	179	DEPEN TITRATABS.....	95
COSENTYX.....	178	CYLTEZO-CD/UC/HS		DEPO-ESTRADIOL.....	150
COSENTYX (300 MG DOSE).....	178	STARTER.....	179	DEPO-PROVERA.....	97
COSENTYX SENSOREADY		CYLTEZO-PSORIASIS/UV		DEPO-SUBQ PROVERA 104... 97	
(300 MG).....	178	STARTER.....	179	Depo-Testosterone.....	85
COSENTYX SENSOREADY		<i>ciproheptadine hcl</i>	205	DERMACINRX PRETRATE..	189
PEN.....	178	Cyred Eq.....	97	DERMA-SMOOTH/FS	
COSENTYX UNOREADY.....	178	CYSTADANE.....	151	BODY.....	217
COSOPT.....	197	CYSTADROPS.....	201	DERMA-SMOOTH/FS	
COTELLIC.....	37	CYSTAGON.....	152	SCALP.....	217
COTEMPLA XR-ODT.....	72	CYSTARAN.....	201	DESCOVY.....	25
COXANTO.....	14	CYTOMEL.....	154	DESFERAL.....	95
COZAAR.....	44	CYTOTEC.....	162	<i>desipramine hcl</i>	59
CRENESSITY.....	151	<i>cytra k crystals</i>	166	<i>desloratadine</i>	205
CREON.....	163	<i>dabigatran etexilate mesylate</i> ... 168		<i>desmopressin ace spray refrig</i> .. 156	
CRESEMBA.....	22	<i>dalfampridine er</i>	78	<i>desmopressin acetate</i>	156
CRESTOR.....	47	DALIRESP.....	208	<i>desmopressin acetate spray</i>	156
CREXONT.....	62	<i>danazol</i>	145	<i>desogestrel-ethinyl estradiol</i>	98
CRINONE.....	154	DANTRIUM.....	80	<i>desonide</i>	217, 218
<i>cromolyn sodium</i>	162, 196, 208	<i>dantrolene sodium</i>	80	<i>desoximetasone</i>	218
CROTAN.....	221	DANZITEN.....	37	<i>desvenlafaxine er</i>	59
Cryelle-28.....	97	<i>dapagliflozin pro-metformin er</i> ...92		<i>desvenlafaxine succinate er</i>	59
CUPRIMINE.....	95	<i>dapagliflozin propanediol</i>	92	<i>dexamethasone</i>	146
Curity Sterile Saline.....	222	<i>dapsone</i>	30, 212	<i>dexamethasone (la)</i>	146
CUTAQUIG.....	185	DARAPRIM.....	30	DEXAMETHASONE	
CUVITRU.....	185	<i>darifenacin hydrobromide er</i> ... 167		INTENSOL.....	146
CUVPOSA.....	157	Dasetta 1/35 (28).....	97	<i>dexamethasone sodium</i>	
CUVRIOR.....	95	Dasetta 7/7/7.....	97	<i>phosphate</i>	199
CVS ADVANCED GLUCOSE		DAURISMO.....	34	DEXCOM G6 RECEIVER.....	115
TEST.....	115	DAVIMET-FLUORIDE.....	193	DEXCOM G6 SENSOR.....	115
<i>cvs aspirin low dose</i>	20	DAXXIFY.....	74	DEXCOM G6 TRANSMITTER	
<i>cvs aspirin low strength</i>	20	<i>dayavite</i>	193	.....	115
<i>cvs folic acid</i>	192	DAYBUE.....	76	DEXCOM G7 15 DAY	
<i>cvs glucose meter test strips</i>	115	Daysee.....	97	SENSOR.....	115
CVS KETONE CARE.....	115	DAYTRANA.....	72	DEXCOM G7 RECEIVER.....	115
<i>cvs lancets original</i>	115	DAYVIGO.....	74	DEXCOM G7 SENSOR.....	115
<i>cvs lancets thin 26g</i>	115	D-CARE BLOOD GLUCOSE.....	115	Dexifol.....	193
<i>cvs lancing device</i>	115	D-CARE GLUCOMETER.....	115	DEXILANT.....	163
<i>cvs nicotine</i>	83	DDAVP.....	156	<i>dexlansoprazole</i>	163
<i>cvs nicotine polacrilex</i>	83	Deblitane.....	97	<i>dexmethylphenidate hcl</i>	72
<i>cvs true metrix glucose test</i>	115	<i>deferasirox</i>	95	<i>dexmethylphenidate hcl er</i>	72
<i>cvs ultra thin lancets</i>	115	<i>deferroxamine mesylate</i>	95	DEXONTO 0.4%.....	146
<i>cyanocobalamin</i>	193	DELESTROGEN.....	150	DEXTENZA.....	199
<i>cyclobenzaprine hcl</i>	80	DELSTRIGO.....	25	<i>dextroamphetamine sulfate</i>	72

<i>dextroamphetamine sulfate er</i>	72	DIOVAN.....	44	DRUG MART ON-THE-GO	
DEXYCU.....	199	DIOVAN HCT.....	44	LANCET 30G.....	116
DHIVY.....	62	DIPENTUM.....	160	<i>drug mart unifine pentips</i>	116
DIACOMIT.....	67	<i>diphenhydramine hcl</i>	205	<i>drug mart unifine pentips plus</i> ..	116
DIASTIX.....	115	<i>diphenoxylate-atropine</i>	157	DRUG MART UNILET	
DIATHRIVE BLOOD		DIPROLENE.....	218	LANCETS 28G.....	116
GLUCOSE METER.....	115	<i>dipyridamole</i>	174	DRUG MART UNILET	
DIATHRIVE BLOOD		<i>disopyramide phosphate</i>	45	LANCETS 30G.....	116
GLUCOSE TEST.....	115	<i>disulfiram</i>	56	DRUG MART UNILET	
DIATHRIVE GLUCOSE TEST		DIURIL.....	52	LANCETS 33G.....	116
.....	115	<i>divalproex sodium</i>	67	DSUVIA.....	17
DIATHRIVE LANCET		<i>divalproex sodium er</i>	67	DUAKLIR PRESSAIR.....	210
ULTRA THIN 30.....	116	DIVIGEL.....	150	DUAVEE.....	150
DIATHRIVE LANCETS.....	116	DOCIVYX.....	41	DULERA.....	210
DIATHRIVE LANCING		<i>dofetilide</i>	45	<i>duloxetine hcl</i>	59
DEVICE.....	116	Dolishale.....	98	DUOBRII.....	218
DIATHRIVE PEN NEEDLE....	116	<i>donepezil hcl</i>	58	DUO-CARE TEST.....	116
DIATHRIVE+ GLUCOSE		DOPTelet.....	175	DUOPA.....	62
MONITOR.....	116	DOPTelet SPRINKLE.....	175	DUPIXENT.....	179
DIATHRIVE+ GLUCOSE		DORYX MPC.....	32	DUREZOL.....	199
TEST.....	116	<i>dorzolamide hcl</i>	200	DUROLANE.....	21
<i>diazepam</i>	67	<i>dorzolamide hcl-timolol mal</i>	197	<i>dutasteride</i>	165
Diazepam Intensol.....	67	<i>dorzolamide hcl-timolol mal pf</i> ..	197	<i>dutasteride-tamsulosin hcl</i>	165
DICLEGIS.....	158	Dotti.....	150	DUVYZAT.....	80
<i>diclofenac epolamine</i>	14	<i>double pm</i>	197	<i>d-xylose</i>	187
<i>diclofenac potassium</i>	14	DOVATO.....	25	DYANAVEL XR.....	72
<i>diclofenac potassium(migraine)</i> ..	14	<i>doxazosin mesylate</i>	165	DYMISTA.....	204
<i>diclofenac sodium</i>	14, 199	<i>doxepin hcl</i>	59, 74, 215	DYRENIUM.....	52
<i>diclofenac sodium er</i>	14	<i>doxercalciferol</i>	156	DYSPORT.....	74
<i>diclofenac-misoprostol</i>	16	<i>doxycycline</i>	221	E.E.S. 400.....	28
<i>dicloxacillin sodium</i>	32	<i>doxycycline hyclate</i>	32	E.E.S. GRANULES.....	28
<i>dicyclomine hcl</i>	157	<i>doxycycline monohydrate</i>	33	<i>easy comfort insulin syringe</i>	116
<i>diethylpropion hcl er</i>	93	<i>doxylamine-pyridoxine</i>	158	<i>easy comfort lancets</i>	116
DIFFERIN.....	212	DRISDOL.....	193	<i>easy comfort lancets twist top</i> ...	116
DIFICID.....	28	<i>dronabinol</i>	158	<i>easy comfort pen needles</i>	117
<i>diflorasone diacetate</i>	218	DROPLET GENTEEL		<i>easy glide pen needles</i>	117
<i>diflunisal</i>	20	LANCING DEVICE.....	116	EASY MAX BLOOD	
<i>difluprednate</i>	199	DROPLET INSULIN		GLUCOSE TEST.....	117
Digox.....	52	SYRINGE.....	116	EASY MAX T1 GLUCOSE	
<i>digoxin</i>	52	DROPLET LANCETS ULTRA		SYSTEM.....	117
<i>dihydroergotamine mesylate</i>	75	THIN 30G.....	116	<i>easy mini eject lancing device</i> ..	117
DILANTIN.....	67	DROPLET LANCING		<i>easy mini lancing device</i>	117
DILANTIN INFATABS.....	67	DEVICE.....	116	<i>easy plus ii glucose system</i>	117
DILANTIN-125.....	67	DROPLET MICRON.....	116	<i>easy plus ii glucose test</i>	117
DILAUDID.....	16, 17	DROPLET PERSONAL		EASY STEP GLUCOSE	
<i>diltiazem hcl</i>	51	LANCETS 30G.....	116	MONITOR.....	117
<i>diltiazem hcl er</i>	51	<i>dropsafe safety pen needles</i>	116	EASY STEP TEST.....	117
<i>diltiazem hcl er beads</i>	50	DROPSAFE SAFETY		<i>easy talk blood glucose system</i> ..	117
<i>diltiazem hcl er coated beads</i>	51	SYRINGE/NEEDLE.....	116	<i>easy talk blood glucose test</i>	117
<i>dilt-xr</i>	51	<i>drospiren-eth estrad-levomefol</i> ...98		<i>easy talk plus ii test strips</i>	117
<i>dimethyl fumarate</i>	78	<i>drospirenone-ethinyl estradiol</i> ...98		EASY TOUCH FLIPLOCK	
<i>dimethyl fumarate starter pack</i> ...	78	DROXIA.....	175	INSULIN SY.....	117

EASY TOUCH GLUCOSE SYSTEM.....	117	EASYMAX 15 TEST	118	ELLA.....	98
EASY TOUCH HEALTHPRO GLUCOSE.....	117	EASYMAX CONTROL NORMAL/HIGH.....	118	ELMIRON.....	166
EASY TOUCH INSULIN SAFETY SYR.....	117	EASYMAX NG BLOOD GLUCOSE.....	118	ELOCTATE.....	172
EASY TOUCH INSULIN SYRINGE.....	117	EASYMAX TEST	118	Eluryng.....	98
EASY TOUCH LANCETS 21G.....	117	EASYMAX V BLOOD GLUCOSE.....	118	ELYXYB.....	13
EASY TOUCH LANCETS 23G.....	117	EASYPRO BLOOD GLUCOSE MONITOR.....	119	EMBECTA AUTOSHIELD DUO.....	119
EASY TOUCH LANCETS 26G.....	117	EASYPRO BLOOD GLUCOSE TEST	119	EMBECTA INS SYR U/F 1/2 UNIT.....	119
EASY TOUCH LANCETS 28G.....	117	EASYPRO PLUS.....	119	EMBECTA INSULIN SYR ULTRAFINE.....	119
EASY TOUCH LANCETS 28G/TWIST.....	117	EBGLYSS.....	216	EMBECTA INSULIN SYRINGE U-500.....	119
EASY TOUCH LANCETS 30G.....	118	<i>econazole nitrate</i>	214	EMBECTA PEN NEEDLE NANO.....	119
EASY TOUCH LANCETS 30G/TWIST.....	118	ECONTRA ONE-STEP	98	EMBECTA PEN NEEDLE NANO 2 GEN.....	119
EASY TOUCH LANCETS 32G.....	118	ECOTRIN LOW STRENGTH...	20	EMBECTA PEN NEEDLE ULTRAFINE.....	119
EASY TOUCH LANCETS 32G/TWIST.....	118	ECOZA.....	214	EMBRACE BLOOD GLUCOSE MONITOR.....	119
EASY TOUCH LANCETS 33G/TWIST.....	118	<i>ec-rx estradiol</i>	150	EMBRACE BLOOD GLUCOSE TEST	119
EASY TOUCH LANCING DEVICE.....	118	<i>ec-rx progesterone</i>	154	EMBRACE EVO BLOOD GLUCOSE TEST	119
EASY TOUCH PEN NEEDLES.....	118	<i>ec-rx testosterone</i>	85	EMBRACE EVO GLUCOSE MONITOR.....	119
EASY TOUCH SAFETY LANCETS 21G.....	118	EDARBI.....	44	EMBRACE EVO GLUCOSE MONITORING.....	120
EASY TOUCH SAFETY LANCETS 23G.....	118	EDARBYCLOR.....	44	EMBRACE LANCETS ULTRA THIN 30G.....	120
EASY TOUCH SAFETY LANCETS 26G.....	118	EDLUAR.....	74	EMBRACE PEN NEEDLES...	120
EASY TOUCH SAFETY LANCETS 28G.....	118	EDURANT	23	EMBRACE PRESSURE ACTIVATED 21G.....	120
EASY TOUCH SAFETY PEN NEEDLES.....	118	<i>efavirenz</i>	23	EMBRACE PRESSURE ACTIVATED 28G.....	120
EASY TOUCH SHEATHLOCK SYRINGE.....	118	Effer-K.....	187	EMBRACE PRO GLUCOSE METER.....	120
EASY TOUCH TEST	118	EFFEXOR XR.....	59	EMBRACE PRO GLUCOSE TEST	120
<i>easy trak blood glucose system</i>	118	EFFIENT.....	174	EMBRACE TALK BLOOD GLUCOSE.....	120
<i>easy trak blood glucose test</i>	118	EGRIFTA WR.....	152	EMBRACE TALK GLUCOSE TEST	120
<i>easy trak ii blood glucose sys</i> ...	118	ELELYSO.....	149	EMBRACE TALK MONITORING SYSTEM.....	120
<i>easy trak ii glucose test</i>	118	ELEMENT AUTOCODE SYSTEM.....	119	EMBRACE WAVE BLOOD GLUCOSE.....	120
EASYGLUCO.....	118	<i>element compact glucose system</i>	119	EMBRACE WAVE GLUCOSE METER.....	120
EASYMAX 15 LEVEL 2-3 CONTROL.....	118	<i>element compact test</i>	119	EMEND.....	158
		<i>element compact v glucose sys</i> ..	119	EMEND BIPACK.....	158
		ELEMENT PLUS.....	119		
		ELEMENT TEST	119		
		ELEPSIA XR.....	67		
		ELESTRIN.....	150		
		<i>eletriptan hydrobromide</i>	76		
		ELFOLATE PLUS.....	193		
		ELIDEL.....	216		
		ELIGARD	34, 35		
		Elinest.....	98		
		ELIQUIS.....	169		
		ELIQUIS (1.5 MG PACK).....	169		
		ELIQUIS (2 MG PACK).....	169		
		ELIQUIS DVT/PE STARTER PACK.....	169		
		Elixophyllin.....	211		

EMEND TRIPACK.....	158	EPSOLAY	221	EVERSENSE 365 SMART	
EMFLAZA	146	<i>eq aspirin low dose</i>	20	TRANSMIT	120
EMGALITY	75, 76	<i>eq blood glucose test</i>	120	EVERSENSE	
EMGALITY (300 MG DOSE)...	75	<i>eq nicotine</i>	83	SENSOR/HOLDER.....	120
EMPAVELI	174	<i>eq nicotine polacrilex</i>	83	EVERSENSE SMART	
EMSAM	59	<i>eq nicotine step 3</i>	83	TRANSMITTER.....	120
<i>emtricitabine-tenofovir df</i>	25	<i>eq aspirin low dose</i>	20	EVOLUTION AUTOCODE	120
EMTRIVA	23	EQUETRO	64	EVOTAZ.....	25
EMVERM	22	<i>ergocalciferol</i>	193	EVOXAC	222
Emzahh	98	ERGOMAR	75	EVRYSDI.....	76, 77
<i>enalapril maleate</i>	42	<i>ergotamine-cafeine</i>	75	EXELDERM.....	214
<i>enalapril-hydrochlorothiazide</i>	42	ERIVEDGE	34	<i>exemestane</i>	35
ENBRACE HR	189	ERLEADA	35	<i>exenatide</i>	87
ENBREL	179	<i>erlotinib hcl</i>	37	EXFORGE	44
ENBREL MINI	179	ERMEZA	154	EXFORGE HCT	44
ENBREL SURECLICK	179	Errin	98	EXJADE	95
ENCARE	165	ERTACZO	214	EYLEA	202
ENDARI	175	<i>ery</i>	212	EYSUVIS	199
Endocet	17	ERYPED 400	28	EZALLOR SPRINKLE	47
ENDOMETRIN	154	Ery-Tab	28	<i>ezetimibe</i>	46
Enilloring	98	<i>erythromycin</i>	28, 198, 212	<i>ezetimibe-simvastatin</i>	48
ENLITE GLUCOSE SENSOR.	120	<i>erythromycin base</i>	28	EZ-LETS LANCETS 21G	120
ENLITE SERTER	120	<i>erythromycin ethylsuccinate</i>	28	EZ-LETS LANCETS 26G	120
<i>enoxaparin sodium</i>	169	ERZOFRI	64	EZ-LETS LANCETS 28G	121
Enpresse-28	98	ESBRIET	209	EZ-LETS LANCETS 30G	121
Enskyce	98	<i>escitalopram oxalate</i>	59	FA-8	193
ENSPRYNG	76	<i>esomeprazole magnesium</i>	163	FABHALTA	174
ENSTILAR	215	ESPEROCT	172	FABIOR	212
<i>entacapone</i>	62	Estarylla	98	Falmina	98
ENTADFI	165	<i>estazolam</i>	74	<i>famciclovir</i>	26
<i>entecavir</i>	29	<i>estradiol</i>	150	<i>famotidine</i>	159
ENTRESTO	53	<i>estradiol valerate</i>	150	FANAPT	64
ENTYVIO	176	<i>estradiol-norethindrone acet</i>	150	FANAPT TITRATION PACK	
ENTYVIO PEN	179	ESTRING	150	A	64
<i>enulose</i>	161	ESTROGEL	150	FANAPT TITRATION PACK	
ENVARUSUS XR	186	<i>eszopiclone</i>	74	C	64
EOHILIA	162	<i>ethacrynic acid</i>	52	FARXIGA	92
EPANED	42	<i>ethambutol hcl</i>	26	FASENRA PEN	209
EPCLUSA	29	<i>ethosuximide</i>	67, 68	FC2 FEMALE CONDOM	98
EPIDIOLEX	67	<i>ethynodiol diac-eth estradiol</i>	98	<i>febuxostat</i>	13
EPIDUO FORTE	212	<i>etodolac</i>	15	FEIBA	170
<i>epinastine hcl</i>	196	<i>etodolac er</i>	14	Feirza 1.5/30	98
<i>epinephrine</i>	203	<i>etonogestrel-ethinyl estradiol</i>	98	Feirza 1/20	98
<i>epinephrine professional</i>	203	<i>etoposide</i>	41	<i>felbamate</i>	68
EPINEPHRINESNAP-EMS	203	EUCRISA	216	<i>felodipine er</i>	51
EPINEPHRINESNAP-V	203	EUFLEXXA	21	FEMARA	35
EPIPEN 2-PAK	203	EULEXIN	35	FEMCAP	98
EPIPEN JR 2-PAK	203	EVAMIST	150	FEMLYV	98
<i>eplerenone</i>	43	EVEKEO	72	FEMRING	150
EPOGEN	171	EVENITY	152	<i>fenofibrate</i>	46
<i>epoprostenol sodium</i>	55	EVERSENSE 365		<i>fenofibrate micronized</i>	46
EPRONTIA	67	SENSOR/HOLDER	120	<i>fenofibric acid</i>	47

<i>fenoprofen calcium</i>	15	<i>fluocinonide</i>	218	FORA GD20 BLOOD	
<i>fentanyl</i>	17	<i>fluocinonide emulsified base</i>	218	GLUCOSE SYSTEM.....	121
<i>ferottrinsic</i>	193	<i>fluorometholone</i>	199	FORA GD20 TEST.....	121
FERRIPROX.....	95	<i>fluorouracil</i>	213	FORA GD50 BLOOD	
FERRIPROX TWICE-A-DAY ..	95	<i>fluoxetine hcl</i>	59	GLUCOSE SYSTEM.....	121
FETZIMA.....	59	<i>fluoxetine hcl (pmdd)</i>	82	FORA GD50 BLOOD	
FETZIMA TITRATION.....	59	<i>fluphenazine decanoate</i>	64	GLUCOSE TEST.....	121
Fexmid.....	80	<i>fluphenazine hcl</i>	64	FORA GTEL BLOOD	
FIASP.....	88	<i>flurandrenolide</i>	218	GLUCOSE SYSTEM.....	121
FIASP FLEXTOUCH.....	88	<i>flurazepam hcl</i>	74	FORA GTEL BLOOD	
FIASP PENFILL.....	88	<i>flurbiprofen</i>	15	GLUCOSE TEST.....	121
FIASP PUMPCART.....	88	<i>flurbiprofen sodium</i>	199	FORA GTEL BLOOD	
FIBRYGA.....	170	<i>fluticasone furoate-vilanterol</i> ..	210	KETONE TEST.....	121
FIFTY50 GLUCOSE METER		<i>fluticasone propionate</i>	208, 218	FORA LANCETS.....	121
2.0.....	121	<i>fluticasone propionate diskus</i> ..	209	FORA LANCING DEVICE....	122
FIFTY50 GLUCOSE TEST 2.0	121	<i>fluticasone propionate hfa</i>	209	FORA PREMIUM V10 BLE	
FIFTY50 PEN NEEDLES.....	121	<i>fluticasone-salmeterol</i>	210	SYSTEM.....	122
FIFTY50 SAFETY SEAL		<i>fluvastatin sodium</i>	47	FORA TEST N' GO	
LANCETS.....	121	<i>fluvastatin sodium er</i>	47	MONITOR.....	122
FIFTY50 SUPERIOR		<i>fluvoxamine maleate</i>	57	FORA TN'G ADVANCE PRO	122
COMFORT SYR.....	121	<i>fluvoxamine maleate er</i>	57	FORA TN'G VOICE.....	122
FIFTY50 UNILET LANCETS		FML FORTE.....	199	FORA TN'G/TN'G VOICE.....	122
33G.....	121	FML LIQUIFILM.....	199	FORA V10 BLOOD	
FILSPARI.....	166	FOCALIN XR.....	72	GLUCOSE TEST.....	122
FILSUVEZ.....	222	<i>folagent dha</i>	193	FORA V12 BLOOD	
FINACEA.....	221	<i>folamax</i>	193	GLUCOSE SYSTEM.....	122
<i>finasteride</i>	165	<i>folamed dha</i>	193	FORA V30A BLOOD	
FINGERSTIX LANCETS.....	121	<i>folaprine</i>	193	GLUCOSE TEST.....	122
FINTEPLA.....	68	<i>folate</i>	193	FORACARE GD40 MONITOR	
Finzala.....	98	<i>folbee</i>	193	.....	122
FIORICET.....	14	<i>folbee plus</i>	193	FORACARE GD40 TEST.....	122
FIRAZYR.....	184	FOLGARD OS.....	193	FORACARE PREMIUM V10.	122
FIRDAPSE.....	77	<i>folic acid</i>	193	FORACARE PREMIUM V10	
FIRMAGON.....	35	FOLI-D.....	193	TEST.....	122
FIRMAGON (240 MG DOSE)...	35	<i>folite</i>	193	FORACARE TEST N GO	
FIRST-METRONIDAZOLE.....	30	FOLIVANE-OB.....	189	MONITOR.....	122
FIRVANQ.....	30	FOLLISTIM AQ.....	145	FORACARE TEST N GO	
FLAREX.....	199	<i>foltrin</i>	193	TEST.....	122
<i>flavoxate hcl</i>	167	FOLVITE-D.....	193	FORTEO.....	94
FLEBOGAMMA DIF.....	185	<i>fondaparinux sodium</i>	169	FOSAMAX.....	94
<i>flecainide acetate</i>	45	FORA 6 CONNECT.....	121	FOSAMAX PLUS D.....	94
FLEQSUVY.....	80	FORA 6 CONNECT/GTEL		<i>fosamprenavir calcium</i>	23
FLOLAN.....	55	TEST.....	121	<i>fosinopril sodium</i>	42
<i>flolipid</i>	47	FORA D40/G31 BLOOD		<i>fosinopril sodium-hctz</i>	42
FLORIVA.....	193	GLUCOSE.....	121	FOSRENOL.....	153
<i>fluconazole</i>	22	FORA G20 BLOOD		FOSTEUM.....	193
<i>flucytosine</i>	22	GLUCOSE SYSTEM.....	121	FOSTEUM PLUS.....	193
<i>fludrocortisone acetate</i>	146	FORA G20 BLOOD		FOTIVDA.....	37
<i>flunisolide</i>	208	GLUCOSE TEST.....	121	FRAGMIN.....	169
<i>fluocinolone acetonide</i>	218, 223	FORA G30A BLOOD		FREESTYLE FREEDOM LITE	
<i>fluocinolone acetonide body</i>	218	GLUCOSE SYSTEM.....	121	.....	122
<i>fluocinolone acetonide scalp</i>	218				

FREESTYLE INSULINX		GAMMAGARD S/D LESS		GENVOYA.....	25
TEST.....	122	IGA.....	185	GEODON.....	64
FREESTYLE LANCETS.....	122	GAMMAKED.....	185	<i>ght blood glucose monitor</i>	124
FREESTYLE LIBRE 14 DAY		GAMMAPLEX.....	185	<i>ght test</i>	124
READER.....	122	GAMUNEX-C.....	185	GIAPREZA.....	54
FREESTYLE LIBRE 14 DAY		<i>ganirelix acetate</i>	145	GILENYA.....	78
SENSOR.....	122	<i>gatifloxacin</i>	198	GILOTRIF.....	37
FREESTYLE LIBRE 2 PLUS		GATTEX.....	162	GIMOTI.....	162
SENSOR.....	122	GAVRETO.....	37	GLASSIA.....	203
FREESTYLE LIBRE 2		<i>ge100 blood glucose system</i>	123	<i>glatiramer acetate</i>	78
READER.....	122	<i>ge100 blood glucose test</i>	123	Glatopa.....	78
FREESTYLE LIBRE 2		GEL-ONE.....	21	GLEEVEC.....	37
SENSOR.....	123	GELSYN-3.....	21	GLEOLAN.....	187
FREESTYLE LIBRE 3 PLUS		<i>gemfibrozil</i>	47	GLEOSTINE.....	33
SENSOR.....	123	Gemmily.....	98	<i>glimepiride</i>	92
FREESTYLE LIBRE 3		GEMTESA.....	167	<i>glipizide</i>	93
READER.....	123	<i>generlac</i>	161	<i>glipizide er</i>	93
FREESTYLE LIBRE 3		Gengraf.....	186	<i>glipizide-metformin hcl</i>	86
SENSOR.....	123	GENOTROPIN.....	148	<i>global ease inject pen needles</i> ..	124
FREESTYLE LIBRE READER		GENOTROPIN MINQUICK..	148	<i>global easy glide insulin syr</i>	124
.....	123	<i>gentamicin sulfate</i>	198, 213	<i>global easy glide pen needles</i> ...	124
FREESTYLE LITE.....	123	GENTEEL BUTTERFLY		<i>global inject ease insulin syr</i>	124
FREESTYLE LITE TEST.....	123	TOUCH LANCET.....	123	<i>global inject ease lancets 28g</i> ...	124
FREESTYLE PRECISION		GENTEEL CONTACT TIPS		<i>global inject ease lancets 30g</i> ...	124
NEO SYSTEM.....	123	(BLUE).....	123	<i>global insulin syringes</i>	124
FREESTYLE PRECISION		GENTEEL CONTACT TIPS		<i>global lancing device</i>	124
NEO TEST.....	123	(CLEAR).....	123	GLOPERBA.....	13
FREESTYLE TEST.....	123	GENTEEL CONTACT TIPS		<i>glucagon emergency</i>	147
FREESTYLE UNISTICK II		(GREEN).....	123	GLUCO PERFECT 3 METER..	124
LANCETS.....	123	GENTEEL CONTACT TIPS		GLUCO PERFECT 3 TEST.....	124
<i>frovatriptan succinate</i>	76	(ORANGE).....	123	GLUCOCARD 01 BLOOD	
FRUZAQLA.....	37	GENTEEL CONTACT TIPS		GLUCOSE.....	124
<i>ft aspirin</i>	20	(RAINBOW).....	123	GLUCOCARD 01 SENSOR	
<i>ft aspirin low dose</i>	20	GENTEEL CONTACT TIPS		PLUS.....	124
<i>ft folic acid</i>	193	(VIOLET).....	123	GLUCOCARD 01-MINI	
<i>ft nicotine</i>	83	GENTEEL CONTACT TIPS		GLUCOSE.....	124
<i>ft nicotine mini</i>	83	(YELLOW).....	123	GLUCOCARD EXPRESSION	
FULPHILA.....	171	GENTEEL LANCING KIT		MONITOR.....	124
<i>fungimez</i>	214	(BLUE).....	123	GLUCOCARD EXPRESSION	
FUROSCIX.....	52	GENTEEL NOZZLES.....	123	TEST.....	124
<i>furosemide</i>	52	GENTEEL PLUS LANCING		GLUCOCARD SHINE	
FUSION PLUS.....	194	(BLACK).....	123	CONNEX.....	124
FUZEON.....	23	GENTEEL PLUS LANCING		GLUCOCARD SHINE	
Fyavolv.....	150	(PURPLE).....	123	EXPRESS.....	124
FYCOMPA.....	68	GENTEEL PLUS LANCING		GLUCOCARD SHINE TEST..	124
FYLNETHA.....	171	(WHITE).....	123	GLUCOCARD SHINE XL.....	124
Fyremadel.....	145	GENTEEL PLUS LANCING		GLUCOCARD VITAL	
<i>gabapentin</i>	68	DEV(BLUE).....	123	MONITOR.....	125
GALAFOLD.....	149	GENTEEL PLUS LANCING		GLUCOCARD VITAL TEST..	125
<i>galantamine hydrobromide</i>	58	DEV(PINK).....	123	GLUCOCARD X-METER.....	125
<i>galantamine hydrobromide er</i>	58	GENULTIMATE TEST.....	123	GLUCOCARD X-SENSOR.....	125
GAMMAGARD.....	185	GENVISC 850.....	21		

GLUCOCOM BLOOD	GNP TRUETRACK TEST	HAEMOLANCE PLUS MAX
GLUCOSE MONITOR..... 125	STRIPS..... 126	FLOW..... 126
GLUCOCOM LANCETS 28G.125	<i>gnp ulticare pen needles</i> 126	HAEMOLANCE PLUS
GLUCOCOM LANCETS 30G.125	GNP ULTIGUARD	PEDIATRIC FLOW..... 126
GLUCOCOM LANCETS 33G.125	SAFEPAK NEEDLE..... 126	Hailey 1.5/30.....99
GLUCOCOM MONITOR..... 125	<i>gnp ultra com insulin syringe</i> ... 126	Hailey 24 Fe.....99
GLUCOCOM TEST..... 125	GOCOVRI..... 62	Hailey Fe 1.5/30.....99
GLUCONAVII BLOOD	GOJJI LANCING	Hailey Fe 1/20.....99
GLUCOSE SYS.....125	DEVICE/CLEAR CAP.....126	<i>halcinonide</i> 218
GLUCONAVII BLOOD	GOJJI STERILE LANCETS.... 126	HALCION..... 74
GLUCOSE TEST..... 125	GOLYTELY..... 161	<i>halobetasol propionate</i> 218
GLUCOPRO INSULIN	GOMEKLI.....37	Haloette.....99
SYRINGE..... 125	GONAL-F.....145	HALOG..... 218
GLUCOPRO SYR RES 3ML	GONAL-F RFF REDIJECT.... 145	<i>haloperidol</i>.....62, 64
22GX3/8"..... 125	<i>goodsense aspirin low dose</i> 20	<i>haloperidol decanoate</i> 64
<i>glucose meter test</i>.....125	<i>goodsense nicotine</i>.....83	<i>haloperidol lactate</i>.....64
<i>glyburide</i> 93	GRALISE..... 82	HARVONI.....29
<i>glyburide micronized</i> 93	<i>granisetron hcl</i>.....158	<i>healthwise insulin syr/needle</i> ... 126
<i>glyburide-metformin</i> 86	GRANIX.....171	<i>healthwise micron pen needles</i> . 127
GLYCATÉ..... 157	GRASTEK.....175	<i>healthwise short pen needles</i> 127
<i>glycolic acid</i>.....216	<i>griseofulvin microsize</i>.....22	Heather.....99
<i>glycopyrrolate</i>.....157	<i>griseofulvin ultramicrosize</i> 22	<i>h-e-b aspirin</i>.....20
Glydo..... 219	<i>guanfacine hcl</i>.....54	<i>h-e-b incontrol adv lancing</i>.....127
GLYXAMBI.....92	<i>guanfacine hcl er</i> 72	<i>h-e-b incontrol lancets 28g</i> 127
<i>gnp adult aspirin low strength</i> 20	GUARDIAN 4 GLUCOSE	<i>h-e-b incontrol lancets 30g</i> 127
<i>gnp aspirin</i>.....20	SENSOR..... 126	<i>h-e-b incontrol lancets 33g</i> 127
GNP EASY TOUCH CONT	GUARDIAN 4	<i>h-e-b incontrol pen needles</i>.....127
HIGH/LOW..... 125	TRANSMITTER..... 126	H-E-B INCONTROL UNIFINE
GNP EASY TOUCH	GUARDIAN LINK 3	PENTIP..... 127
GLUCOSE METER..... 125	TRANSMITTER..... 126	HEMADY..... 146
<i>gnp easy touch glucose test</i>.....125	GUARDIAN REAL-TIME	HEMANGEOL..... 49
<i>gnp folic acid</i> 194	CHARGER..... 126	HEMLIBRA..... 172
<i>gnp insulin syringe</i>.....125	GUARDIAN REAL-TIME	HEMOCYTE PLUS..... 194
<i>gnp insulin syringes</i> 125	TEST PLUG..... 126	HEMOFIL M..... 172
<i>gnp insulin syringes 28gx1/2"</i> ...125	GUARDIAN SENSOR (3)..... 126	<i>heparin sod (porcine) in d5w</i>....169
<i>gnp insulin syringes 29gx1/2"</i> ...125	<i>guardian sensor 3</i> 126	<i>heparin sodium (porcine)</i>.....169
<i>gnp insulin syringes 30gx5/16"</i> .125	GVOKE HYPOPEN 1-PACK.. 147	<i>heparin sodium (porcine) pf</i> 169
<i>gnp insulin syringes 31gx5/16"</i> .125	GVOKE HYPOPEN 2-PACK.. 147	<i>hepmed</i> 169
<i>gnp nicotine</i> 83	GVOKE PFS.....147	HER STYLE.....99
<i>gnp nicotine mini</i> 83	GYNAZOLE-1..... 168	HETLIOZ.....74
<i>gnp nicotine polacrilex</i> 83	HABITROL..... 83	HETLIOZ LQ..... 74
<i>gnp sterile lancets 28g</i> 125	HADLIMA.....179	Hidex 6-Day.....146
<i>gnp sterile lancets 30g</i> 125	HADLIMA PUSH TOUCH.....179	HIZENTRA..... 185
<i>gnp sterile lancets 33g</i> 126	HAEGARDA..... 184	HM EMBRACE TALK
GNP TRUE METRIX AIR	HAEMOLANCE..... 126	SYSTEM.....127
METER..... 126	HAEMOLANCE LOW FLOW	HM ULTICARE INSULIN
GNP TRUE METRIX	LANCETS..... 126	SYRINGE..... 127
GLUCOSE METER..... 126	HAEMOLANCE PLUS.....126	HM ULTICARE MINI PEN
GNP TRUE METRIX	HAEMOLANCE PLUS HIGH	NEEDLES.....127
GLUCOSE STRIPS..... 126	FLOW..... 126	HM ULTICARE SHORT PEN
GNP TRUETRACK SMART	HAEMOLANCE PLUS LOW	NEEDLES.....127
SYSTEM.....126	FLOW..... 126	HORIZANT.....82

HULIO (2 PEN).....	179	<i>hydromorphone hcl er</i>	17	IMULDOSA.....	180
HULIO (2 SYRINGE).....	179	<i>hydroxychloroquine sulfate</i>	23, 183	IMURAN.....	186
HUMALOG.....	88, 89	<i>hydroxyurea</i>	40	IMVEXXY MAINTENANCE	
HUMALOG KWIKPEN.....	88	<i>hydroxyzine hcl</i>	205	PACK.....	151
HUMALOG MIX 50/50		<i>hydroxyzine pamoate</i>	205	IMVEXXY STARTER PACK.....	151
KWIKPEN.....	88	HYFTOR.....	220	IN TOUCH.....	127
HUMALOG MIX 75/25.....	89	<i>hylavite</i>	194	IN TOUCH BLOOD	
HUMALOG MIX 75/25		<i>hylazine</i>	194	GLUCOSE TEST.....	127
KWIKPEN.....	88	HYMOVIS.....	21	IN TOUCH LANCING	
HUMALOG TEMPO PEN.....	89	<i>hyoscyamine sulfate</i>	157	DEVICE.....	127
HUMATE-P.....	170	<i>hyoscyamine sulfate er</i>	157	IN TOUCH STERILE	
HUMATIN.....	22	HYPERSAL.....	208	LANCETS 30G.....	127
HUMATROPE.....	148	HYQVIA.....	185	INATAL GT.....	189
HUMIRA (1 PEN).....	179	HYRIMOZ.....	180	INBRIJA.....	62
HUMIRA (2 PEN).....	179	HYRIMOZ-PLAQUE		Incassia.....	99
HUMIRA (2 SYRINGE).....	179	PSORIASIS START.....	180	INCONTROL ULTICARE	
HUMIRA-PSORIASIS/UEVIT		HYSINGLA ER.....	17	PEN NEEDLES.....	128
STARTER.....	180	HY-VEE LANCETS.....	127	INCRELEX.....	152
HUMULIN 70/30.....	89	<i>hy-vee thin lancets</i>	127	INCRUSE ELLIPTA.....	204
HUMULIN 70/30 KWIKPEN....	89	HYZAAR.....	44	<i>indapamide</i>	52
HUMULIN N.....	89	<i>ibandronate sodium</i>	94	INDERAL LA.....	49
HUMULIN N KWIKPEN.....	89	IBRANCE.....	37	INDERAL XL.....	49
HUMULIN R.....	89	IBSRELA.....	161	INDOCIN.....	15
HUMULIN R U-500		IBTROZI.....	37	Indocin.....	15
KWIKPEN.....	89	Ibu.....	15	<i>indomethacin</i>	15
HW EMBRACE PRO		<i>ibuprofen</i>	15	<i>indomethacin er</i>	15
GLUCOSE METER.....	127	<i>ibuprofen-famotidine</i>	16	INFINITY BLOOD GLUCOSE	
HW EMBRACE PRO		ICAR-C PLUS.....	194	SYSTEM.....	128
GLUCOSE TEST.....	127	<i>icatibant acetate</i>	184	INFINITY BLOOD GLUCOSE	
HW EMBRACE TALK		Iclevia.....	99	TEST.....	128
BLOOD GLUCOSE.....	127	ICLUSIG.....	37	INFINITY VOICE.....	128
HW EMBRACE TALK		<i>icosapent ethyl</i>	48	INFLECTRA.....	176
GLUCOSE TEST.....	127	IDELVION.....	173	<i>infliximab</i>	176
HYALGAN.....	21	IDHIFA.....	40	INGREZZA.....	77
HYCAMTIN.....	41	IFE-BIMIX 30/1.....	166	INLYTA.....	37
HYCODAN.....	206	IGLUCOSE MONITORING		INNOPRAN XL.....	49
<i>hydralazine hcl</i>	54	SYSTEM.....	127	INPEFA.....	53
HYDREA.....	40	IGLUCOSE TEST STRIPS.....	127	INQOVI.....	33
<i>hydrochlorothiazide</i>	52	IHEALTH BLOOD GLUCOSE		INREBIC.....	37
<i>hydrocod poli-chlorphe poli er</i>	206	TEST STR.....	127	INSRA.....	43
<i>hydrocodone bit-homatrop mbr</i>		ILARIS.....	187	<i>insulin degludec</i>	89
.....	206, 207	ILEVRO.....	199	<i>insulin degludec flextouch</i>	89
<i>hydrocodone-acetaminophen</i>	17	ILUMYA.....	176	<i>insulin glargine max solostar</i>	89
<i>hydrocodone-ibuprofen</i>	17	<i>imatinib mesylate</i>	37	<i>insulin glargine solostar</i>	89
<i>hydrocortisone</i>	146, 160, 219	IMBRUVICA.....	37	<i>insulin glargine-yfgn</i>	89
<i>hydrocortisone (perianal)</i>	164	IMCIVREE.....	152	<i>insulin syringe</i>	128
<i>hydrocortisone ace-pramoxine</i>	164	<i>imipramine hcl</i>	59	<i>insulin syringe-needle u-100</i>	128
<i>hydrocortisone butyrate</i>	218	<i>imipramine pamoate</i>	59	<i>insupen pen needles</i>	128
<i>hydrocortisone valerate</i>	219	<i>imiquimod</i>	213	INTELENCE.....	23
<i>hydrocortisone-acetic acid</i>	223	<i>imiquimod pump</i>	213	INTRAROSA.....	152
<i>hydromet</i>	207	<i>imkeldi</i>	37	Introvale.....	99
<i>hydromorphone hcl</i>	17	IMPOYZ.....	219	INTUNIV.....	72

INVEGA HAFYERA.....	65	Jolessa.....	99	KLISYRI (350 MG).....	213
INVEGA SUSTENNA.....	65	JORNAY PM.....	72	KLONOPIN.....	68
INVEGA TRINZA.....	65	Joyeaux.....	99	Klor-Con.....	188
INVELTYS.....	200	JUBLIA.....	214	KLOR-CON.....	188
INVOKAMET.....	92	Juleber.....	99	Klor-Con 10.....	187
INVOKAMET XR.....	92	JULUCA.....	25	Klor-Con M10.....	187
INVOKANA.....	92	Junel 1.5/30.....	99	Klor-Con M15.....	187
<i>iodine tincture</i>	220	Junel 1/20.....	99	Klor-Con M20.....	187
IOPIDINE.....	202	Junel Fe 1.5/30.....	99	Klor-Con/Ef.....	188
<i>ipratropium bromide</i>	204	Junel Fe 1/20.....	99	KLOXXADO.....	82
<i>ipratropium-albuterol</i>	204	Junel Fe 24.....	99	<i>kls aspirin low dose</i>	20
IQIRVO.....	162	JUXTAPID.....	48	KLS QUIT2.....	83
<i>irbesartan</i>	45	JYLAMVO.....	33	KLS QUIT4.....	83
<i>irbesartan-hydrochlorothiazide</i> ..	44	JYNARQUE.....	152	KOATE.....	172
IRESSA.....	37	Kaitlib Fe.....	99	KOATE-DVI.....	173
ISENTRESS.....	24	KALETRA.....	25	KOGENATE FS.....	173
ISENTRESS HD.....	24	Kalliga.....	100	KONVOMEF.....	163
Isibloom.....	99	KALYDECO.....	207	KORLYM.....	152
<i>isoniazid</i>	26	KAPSPARGO SPRINKLE.....	49	KOSELUGO.....	38
ISORDIL TITRADOSE.....	54	KARBINAL ER.....	205	<i>kosher prenatal plus iron</i>	189
<i>isosorbide dinitrate</i>	54	Kariva.....	100	KOVALTRY.....	173
<i>isosorbide mononitrate</i>	54	KATERZIA.....	51	<i>kp aspirin</i>	20
<i>isosorbide mononitrate er</i>	54	Kelnor 1/35.....	100	K-PHOS.....	188
<i>isotretinoin</i>	212	KEPPRA.....	68	KRAZATI.....	40
<i>isradipine</i>	51	KEPPRA XR.....	68	KRINTAFEL.....	23
ISTURISA.....	106	KERASTAT.....	222	Kristalose.....	161
ITOVEBI.....	37	KERENDIA.....	43	KROGER AUTOLET	
<i>itraconazole</i>	22	KESIMPTA.....	78	LANCING DEVICE.....	128
<i>ivermectin</i>	22, 221	<i>ketoconazole</i>	22, 214, 216	KROGER HEALTHPRO	
IWILFIN.....	40	Ketodan.....	214	LANCET 26G.....	128
IXINITY.....	173	KETO-DIASTIX.....	128	<i>kroger lancets</i>	128
IYUZEH.....	201	<i>ketone test</i>	128	<i>kroger lancets super thin</i>	128
JADENU.....	95	<i>ketoprofen</i>	15	<i>kroger lancets thin</i>	128
JADENU SPRINKLE.....	95	<i>ketoprofen er</i>	15	<i>kroger pen needles</i>	128
Jaimiess.....	99	<i>ketorolac tromethamine</i>	15, 200	KRYSTEXXA.....	13
JAKAFI.....	37	KETOSTIX.....	128	K-Tan Plus.....	194
JALYN.....	165	KEVEYIS.....	52	Kurvelo.....	100
Jantoven.....	169	KEVZARA.....	180	KUVAN.....	152
JANUMET.....	86	<i>keyfolic</i>	194	KYLEENA.....	100
JANUMET XR.....	86	KINERET.....	180	KYZATREX.....	85
JANUVIA.....	87	<i>kinney lancets</i>	128	<i>l.e.t.</i>	219
JARDIANCE.....	92	<i>kinney thin lancets</i>	128	<i>l.e.t. (racepinephrine)</i>	219
Jasmiel.....	99	<i>kinray insulin syringe</i>	128	<i>labetalol hcl</i>	49
JATENZO.....	85	Kionex.....	153	<i>lactated ringers</i>	202
JAYPIRCA.....	37	KISQALI (200 MG DOSE).....	37	LACTEROL.....	157
Jencycla.....	99	KISQALI (400 MG DOSE).....	37	<i>lactovive</i>	157
<i>jenliva prenatal/postnatal</i>	189	KISQALI (600 MG DOSE).....	37	<i>lactulose</i>	161
JENTADUETO.....	86	KITABIS PAK (W/ NEBULIZER).....	207	LAMICTAL.....	68
JENTADUETO XR.....	86	KLARITY-A.....	198	LAMICTAL ODT.....	68
Jinteli.....	151	KLARITY-L.....	200	LAMICTAL STARTER.....	68
JIVI.....	172	KLISYRI (250 MG).....	213	LAMICTAL XR.....	68
JOENJA.....	186			<i>lamivudine</i>	24, 29

<i>lamivudine-zidovudine</i>	25	LENVIMA (4 MG DAILY DOSE).....	38	<i>lithium carbonate</i>	77
<i>lamotrigine</i>	68	LENVIMA (8 MG DAILY DOSE).....	38	<i>lithium carbonate er</i>	77
<i>lamotrigine er</i>	68	LEQSEVI.....	180	LITHOBID.....	77
<i>lamotrigine starter kit-blue</i>	69	LESCOL XL.....	47	LITHOSTAT.....	166
<i>lamotrigine starter kit-green</i>	69	Lessina.....	100	LIVALO.....	47
<i>lamotrigine starter kit-orange</i>	69	LETAIRIS.....	55	LIVDELZI.....	162
LAMPIT.....	30	<i>letrozole</i>	35	<i>live better lancet super thin</i>	129
<i>lancet device</i>	128	<i>leucovorin calcium</i>	41	LIVMARLI.....	162
<i>lancet device with ejector</i>	128	LEUKERAN.....	33	LIVTENCITY.....	26
<i>lancets</i>	128	LEUKINE.....	171	L-MESITRAN SOFT WOUND.....	222
<i>lancets 30g</i>	128	<i>leuprolide acetate</i>	35	LMR PLUS.....	220
<i>lancets 33g</i>	128	<i>levabuterol hcl</i>	206	LO LOESTRIN FE.....	100
<i>lancets micro thin 33g</i>	128	<i>levabuterol tartrate</i>	206	LODINE.....	15
<i>lancets super thin 28g</i>	128	LEVBID.....	157	LODOCO.....	54
<i>lancets thin</i>	129	<i>levetiracetam</i>	69	Loestrin 1.5/30 (21).....	101
LANCETS ULTRA THIN.....	129	<i>levetiracetam er</i>	69	Loestrin 1/20 (21).....	101
<i>lancing device</i>	129	<i>levobunolol hcl</i>	197	Loestrin Fe 1.5/30.....	101
LANOXIN.....	52	<i>levocarnitine</i>	95	Loestrin Fe 1/20.....	101
<i>lanreotide acetate</i>	84	<i>levocetirizine dihydrochloride</i> ..	205	Lofena.....	15
<i>lansoprazole</i>	164	<i>levofloxacin</i>	29	Lojaimiess.....	101
<i>lanthanum carbonate</i>	153	Levonest.....	100	LOKELMA.....	153
LANTUS.....	89	<i>levonorgest-eth estrad 91-day</i> ..	100	Lomaira.....	93
LANTUS SOLOSTAR.....	89	<i>levonorgest-eth estradiol-iron</i> ..	100	LOMOTIL.....	158
LANZO.....	129	<i>levonorgestrel</i>	100	LONSURF.....	33
Larin 1.5/30.....	100	<i>levonorgestrel-ethinyl estrad</i>	100	<i>loperamide hcl</i>	158
Larin 1/20.....	100	<i>levonorg-eth estrad triphasic</i>	100	LOPRESSOR.....	49
Larin 24 Fe.....	100	Levora 0.15/30 (28).....	100	<i>lorazepam</i>	57
Larin Fe 1.5/30.....	100	<i>levorphanol tartrate</i>	17	LORBRENA.....	38
Larin Fe 1/20.....	100	Levo-T.....	154	LOREEV XR.....	57
<i>latanoprost</i>	201	<i>levothyroxine sodium</i>	154	Loryna.....	101
LATUDA.....	65	Levoxyl.....	154	<i>losartan potassium</i>	45
LAZCLUZE.....	38	LEVSIN.....	157	<i>losartan potassium-hctz</i>	44
LDL CARE.....	194	LEVSIN/SL.....	157	LOTEMAX.....	200
LDO PLUS.....	219	LEXAPRO.....	60	LOTEMAX SM.....	200
LEADER UNIFINE PENTIPS.....	129	Lexette.....	219	<i>loteprednol etabonate</i>	200
LEADER UNIFINE PENTIPS PLUS.....	129	LIALDA.....	160	LOTREL.....	42
<i>ledipasvir-sofosbuvir</i>	29	LIBERTY MEDICAL.....		LOTRONEX.....	161
Leena.....	100	LANCETS.....	129		
<i>leflunomide</i>	184	LIBRAX.....	159		
LENVIMA (10 MG DAILY DOSE).....	38	LICART.....	15		
LENVIMA (12 MG DAILY DOSE).....	38	<i>lidocaine</i>	219		
LENVIMA (14 MG DAILY DOSE).....	38	<i>lidocaine hcl</i>	219, 222		
LENVIMA (18 MG DAILY DOSE).....	38	<i>lidocaine hcl urethral/mucosal</i>	219		
LENVIMA (20 MG DAILY DOSE).....	38	<i>lidocaine viscous hcl</i>	222		
LENVIMA (24 MG DAILY DOSE).....	38	<i>lidocaine-prilocaine</i>	219		
		LIDODERM.....	220		
		LIKMEZ.....	30		
		LILETTA (52 MG).....	100		
		<i>linezolid</i>	30		
		LINZESS.....	161		

<i>lovastatin</i>	47	<i>marlissa</i>	101	<i>megestrol acetate</i>	35, 154
LOVAZA.....	48	MARPLAN.....	60	MEIJER LANCETS.....	130
LOVENOX.....	169	MATERNACEL.....	189	MEIJER LANCETS	
Low-Ogestrel.....	101	MATULANE.....	33	UNIVERSAL 21G.....	130
<i>loxapine succinate</i>	65	Matzim La.....	51	MEIJER LANCETS	
Lo-Zumandimine.....	101	MAVENCLAD (10 TABS).....	78	UNIVERSAL 30G.....	130
<i>lubiprostone</i>	161	MAVENCLAD (4 TABS).....	78	MEIJER LANCETS	
LUCEMYRA.....	82	MAVENCLAD (5 TABS).....	78	UNIVERSAL 33G.....	130
LUCENTIS.....	202	MAVENCLAD (6 TABS).....	78	<i>meijer pen needles</i>	130
Luizza 1.5/30.....	101	MAVENCLAD (7 TABS).....	78	MEIJER TRUE2GO BLOOD	
Luizza 1/20.....	101	MAVENCLAD (8 TABS).....	78	GLUCOSE.....	130
<i>luliconazole</i>	214	MAVENCLAD (9 TABS).....	78	MEIJER TRUERESULT	
LUMAKRAS.....	40	MAVYRET.....	29	GLUCOSE SYS.....	130
LUMIGAN.....	201	MAXALT.....	76	MEIJER TRUETEST TEST.....	130
LUMRYZ.....	81	MAXALT-MLT.....	76	MEIJER TRUETRACK	
LUMRYZ STARTER PACK.....	81	MAXICOMFORT II PEN		GLUCOSE SYS.....	130
LUNESTA.....	74	NEEDLE.....	129	MEIJER TRUETRACK TEST.....	130
LUPKYNIS.....	186	MAXI-COMFORT INSULIN		MEKINIST.....	38
LUPRON DEPOT (1-MONTH).....	35	SYRINGE.....	129	MEKTOVI.....	38
LUPRON DEPOT (3-MONTH).....	35	MAXI-COMFORT SAFETY		Meleya.....	101
LUPRON DEPOT (4-MONTH).....	35	PEN NEEDLE.....	129	<i>meloxicam</i>	15
LUPRON DEPOT (6-MONTH).....	35	MAXICOMFORT SYR 27G X		<i>memantine hcl</i>	58
LUPRON DEPOT-PED (1-		1/2".....	129	<i>memantine hcl er</i>	58
MONTH).....	95	MAXIDEX.....	200	MENOPUR.....	145
LUPRON DEPOT-PED (3-		MAXITROL.....	197	MENOSTAR.....	151
MONTH).....	95	MAYZENT.....	78	<i>meperidine hcl</i>	17
Lutera.....	101	MAYZENT STARTER PACK..	78	<i>meprobamate</i>	57
LYBALVI.....	65	<i>mb caps</i>	31	<i>mercaptopurine</i>	34
Lyleq.....	101	<i>meclizine hcl</i>	158	<i>mesalamine</i>	160
LYNPARZA.....	40	<i>meclofenamate sodium</i>	15	<i>mesalamine er</i>	160
LYRICA.....	69	<i>medi tab</i>	194	<i>mesalamine-cleanser</i>	160
LYRICA CR.....	82	<i>medic insulin syringe</i>	129	MESNEX.....	41
Lysiplex Plus.....	194	<i>medichoice safety lancet</i>	129	MESTINON.....	81
LYSODREN.....	35	<i>medichoice safety lancet extra</i> ..	129	<i>metaxalone</i>	80
LYTGOBI (12 MG DAILY		<i>medichoice safety lancet norm</i> ..	129	<i>metformin hcl</i>	86
DOSE).....	38	<i>medicine shoppe pen needles</i>	129	<i>metformin hcl er</i>	86
LYTGOBI (16 MG DAILY		MEDLANCE PLUS EXTRA		<i>metformin hcl er (mod)</i>	86
DOSE).....	38	21G.....	129	<i>metformin hcl er (osm)</i>	86
LYTGOBI (20 MG DAILY		MEDLANCE PLUS LITE 25G	130	<i>methadone hcl</i>	17
DOSE).....	38	MEDLANCE PLUS SPECIAL		Methadone Hcl Intensol.....	17
LYUMJEV.....	89	0.8MM.....	130	<i>methadone hcl-sodium chloride</i> ..	17
LYUMJEV KWIKPEN.....	89	MEDLANCE PLUS		METHADOSE.....	17
LYUMJEV TEMPO PEN.....	89	SUPERLITE 30G.....	130	Methadose.....	17
Lyza.....	101	MEDLANCE PLUS		METHADOSE SUGAR-FREE..	18
MACROBID.....	30	UNIVERSAL 21G.....	130	<i>methamphetamine hcl</i>	73
MACRODANTIN.....	31	MEDPURA		<i>methazolamide</i>	53
MAGELLAN INSULIN		HYDROCORTISONE.....	219	<i>methenamine hippurate</i>	31
SAFETY SYR.....	129	MEDROL.....	146	<i>methenamine mandelate</i>	31
MALARONE.....	23	<i>medroxyprogesterone acetate</i>		Methergine.....	152
<i>malathion</i>	221	.....	101, 154	<i>methimazole</i>	154
MARATHON MEDICAL		<i>mefenamic acid</i>	15	<i>methitest</i>	85
PENTIPS.....	129	<i>mefloquine hcl</i>	23	<i>methocarbamol</i>	80

<i>methotrexate sodium</i>	34, 184	MINIMED RESERVOIR		MOTTEGRITY	162
<i>methotrexate sodium (pf)</i>	34	1.8ML	130	MOTOFEN	158
<i>methoxsalen rapid</i>	215	MINIMED RESERVOIR 3ML	130	MOTPOLY XR	69
<i>methscopolamine bromide</i>	157	MINIVELLE	151	MOUNJARO	87
<i>methyldopa</i>	54	<i>minocycline hcl</i>	33	MOVANTIK	162
<i>methylergonovine maleate</i>	152	<i>minocycline hcl er</i>	33	MOVIPREP	161
<i>methylphenidate hcl</i>	73	<i>minoxidil</i>	54	<i>moxifloxacin hcl</i>	29, 198
<i>methylphenidate hcl er</i>	73	Minzoya	102	MS CONTIN	18
<i>methylphenidate hcl er (cd)</i>	73	MIPLYFFA	149	MULPLETA	175
<i>methylphenidate hcl er (la)</i>	73	MIRCERA	171	MULTAQ	45
<i>methylphenidate hcl er (osm)</i>	73	MIRENA (52 MG)	102	MULTIGEN	194
<i>methylprednisolone</i>	146	<i>mirtazapine</i>	60	MULTIGEN FOLIC	194
<i>methyltestosterone</i>	85	MIRVASO	221	MULTIGEN PLUS	194
<i>metoclopramide hcl</i>	158, 159	<i>misoprostol</i>	162	MULTI-LANCET DEVICE 2..	131
<i>metolazone</i>	53	MITIGARE	13	<i>multipro</i>	194
<i>metoprolol succinate er</i>	49	MITOSOL	198	<i>multivitamin w/fluoride</i>	194
<i>metoprolol tartrate</i>	50	<i>mm aspirin</i>	20	<i>multi-vitamin/fluoride</i>	194
<i>metoprolol-hydrochlorothiazide</i>	48	MM BLOOD GLUCOSE		<i>multi-vitamin/fluoride/iron</i>	194
<i>metronidazole</i>	31, 168, 221	SYSTEM	130	<i>mupirocin</i>	213
<i>mexiletine hcl</i>	45	MM BLOOD GLUCOSE		<i>mupirocin calcium</i>	213
MIACALCIN	94	SYSTEM REFILL	130	MY CHOICE	102
Mibelas 24 Fe	101	MM BLULINK GLUCOSE		MY WAY	102
MICARDIS	45	MONIT SYS	130	MYALEPT	152
MICARDIS HCT	44	MM BLULINK GLUCOSE		MYCAPSSA	84
<i>miconazole 3</i>	168	TEST	130	<i>mycophenolate mofetil</i>	186
<i>miconazole-zinc oxide-petrolat</i>	214	MM EASY TOUCH		<i>mycophenolate sodium</i>	187
MICRODOT BLOOD		GLUCOSE	131	MYDAYIS	73
GLUCOSE SYSTEM	130	MM EASY TOUCH		MYDCOMBI	201
MICRODOT TEST	130	GLUCOSE METER	131	MYFEMBREE	156
Microgestin 1.5/30	101	<i>mm insulin syringe/needle</i>	131	MYFORTIC	187
Microgestin 1/20	101	MM PEN NEEDLES	131	MYGLUCOHEALTH BLOOD	
Microgestin Fe 1.5/30	101	MM TWIST LANCETS	131	GLUCOSE	131
Microgestin Fe 1/20	101	<i>m-natal plus</i>	189	MYGLUCOHEALTH	
MICROLET LANCETS	130	<i>modafinil</i>	81	LANCETS 30G	131
MICROLET NEXT LANCING		<i>moexipril hcl</i>	43	MYGLUCOHEALTH TEST ...	131
DEVICE	130	<i>mometasone furoate</i>	208, 219	MYHIBBIN	187
<i>midazolam hcl</i>	74	Mondoxyne NI	33	MYLERAN	33
MIDAZOLAM+SYRSPEND		MONOJECT INSULIN		MYRBETRIQ	167
SF	74	SYRINGE	131	MYTESI	158
<i>midodrine hcl</i>	54	MONOJECT ULTRA		MYXREDLIN	90
MIEBO	200	COMFORT SYRINGE	131	<i>na sulfate-k sulfate-mg sulf</i>	161
MIGERGOT	75	MONOLET LANCETS	131	<i>nabumetone</i>	15
<i>miglitol</i>	86	MONOLET OPD LANCETS ...	131	<i>nadolol</i>	50
<i>miglustat</i>	149	MONOLETTOR SAFETY		<i>nafcillin sodium</i>	32
Mili	101	LANCETS	131	<i>naftifine hcl</i>	214
Mimvey	151	Mono-Linyah	102	NAFTIN	214
<i>mincora</i>	194	MONOVISC	21	<i>nalmefene hcl</i>	82
<i>mini lancing device</i>	130	<i>montelukast sodium</i>	208	<i>nalocet</i>	18
MINIMED INSTINCT GLUC		<i>morphine sulfate</i>	18	<i>naloxone hcl</i>	82
SENSOR	130	<i>morphine sulfate (concentrate)</i> ...	18	<i>naltrexone hcl</i>	82
MINIMED PUMP		<i>morphine sulfate er</i>	18	NAMENDA TITRATION PAK ..	58
RESERVOIR 3ML	130	<i>morphine sulfate er beads</i>	18	NAMZARIC	58

NAPRELAN.....	15	NEXAVAR.....	38	NORDITROPIN FLEXPPO....	148
<i>naproxen</i>	15	NEXICLON XR.....	54	<i>norelgestromin-eth estradiol</i>	102
<i>naproxen sodium</i>	15	NEXIUM.....	164	<i>norethin ace-eth estrad-fe</i>	102
<i>naproxen sodium er</i>	15	NEXLETOL.....	46	<i>norethindrone</i>	102
<i>naproxen-esomeprazole mg</i>	16	NEXLIZET.....	46	<i>norethindrone acetate</i>	154
<i>naratriptan hcl</i>	76	NEXPLANON.....	102	<i>norethindrone acet-ethinyl est..</i>	102
NARCAN.....	82	NEXTERONE.....	45	<i>norethindrone-eth estradiol</i>	151
NARDIL.....	60	NEXTSTELLIS.....	102	<i>norethin-eth estradiol-fe</i>	102
NASCOBAL.....	194	NGENLA.....	148	<i>norgesic forte</i>	80
NATACYN.....	198	<i>niacin (antihyperlipidemic)</i>	48	<i>norgestimate-eth estradiol</i>	102
<i>natal pnv</i>	189	<i>niacin er (antihyperlipidemic)</i>	48	<i>norgestim-eth estrad triphasic..</i>	102
NATAZIA.....	102	NIACOR.....	48	NORITATE.....	221
<i>nateglinide</i>	91	NICADAN.....	194	NORLIQVA.....	51
NATESTO.....	85	NICAPRIN.....	194	Norlyda.....	102
NAYZILAM.....	69	<i>nicardipine hcl</i>	51	Norlyroc.....	102
<i>nebivolol hcl</i>	50	NICAZEL.....	194	NORPACE.....	45
NEBUPENT.....	31	NICAZEL FORTE.....	194	NORPACE CR.....	45
Necon 0.5/35 (28).....	102	NICOMIDE.....	194	NORPRAMIN.....	60
Necon 1/35 (28).....	102	NICORELIEF.....	84	NORTHERA.....	54
NEEVO DHA.....	189	<i>nicotinamide</i>	194	Nortrel 0.5/35 (28).....	102
<i>nefazodone hcl</i>	60	<i>nicotine</i>	84	Nortrel 1/35 (21).....	103
NEMLUVIO.....	220	<i>nicotine mini</i>	84	Nortrel 1/35 (28).....	103
<i>neoke bhb</i>	194	<i>nicotine polacrilex</i>	84	Nortrel 7/7/7.....	103
<i>neomycin sulfate</i>	22	<i>nicotine polacrilex mini</i>	84	<i>nortriptyline hcl</i>	60
<i>neomycin-bacitracin zn-</i>		<i>nicotine step 1</i>	84	NORVASC.....	51
<i>polymyx</i>	198	<i>nicotine step 2</i>	84	NORVIR.....	24
<i>neomycin-polymyxin-dexameth</i> ..	197	<i>nicotine step 3</i>	84	NOURIANZ.....	62
<i>neomycin-polymyxin-gramicidin</i>		NICOTROL NS.....	84	NOVA MAX BLOOD	
.....	198	<i>nifedipine</i>	51	GLUCOSE SYSTEM.....	131
<i>neomycin-polymyxin-hc</i>	197, 223	<i>nifedipine er</i>	51	NOVA MAX GLUCOSE TEST	
<i>neonatal complete</i>	189	<i>nifedipine er osmotic release</i>	51	.....	131
NEONATAL PLUS.....	189	Nikki.....	102	NOVA MAX PLUS KETONE	
Neo-Polycin.....	198	<i>nilutamide</i>	35	TEST.....	131
Neo-Polycin Hc.....	197	<i>nimodipine</i>	51	NOVA SAFETY LANCETS	
NEO-SYNALAR.....	214	NINLARO.....	41	23G.....	131
<i>neo-vital rx</i>	189	NIPRIDE RTU.....	54	NOVA SAFETY LANCETS	
<i>neovite</i>	194	<i>nisoldipine er</i>	51	28G.....	132
NERLYNX.....	38	NITRO-BID.....	54	NOVA SUREFLEX LANCETS	
NESTABS.....	189	NITRO-DUR.....	55	.....	132
NESTABS DHA.....	189	<i>nitrofurantoin</i>	31	NOVA SUREFLEX LANCING	
NESTABS ONE.....	189	<i>nitrofurantoin macrocrystal</i>	31	DEVICE.....	132
Neuac.....	212	<i>nitrofurantoin monohyd macro</i> ...31		NOVAREL.....	146
NEULASTA.....	171	<i>nitroglycerin</i>	55	NOVOEIGHT.....	173
NEULASTA ONPRO.....	171	NITROLINGUAL.....	55	NOVOFINE PEN NEEDLE.....	132
NEUPOGEN.....	171	NITYR.....	148	NOVOFINE PLUS PEN	
NEUPRO.....	62	<i>niva thyroid</i>	154	NEEDLE.....	132
NEURONTIN.....	69	NIVA-PLUS.....	189	NOVOLIN 70/30.....	90
NEUTEK 2TEK TEST.....	131	NIVESTYM.....	171	NOVOLIN 70/30 FLEXPEN.....	90
NEVANAC.....	200	<i>nizatidine</i>	159	NOVOLIN 70/30 FLEXPEN	
<i>nevirapine</i>	24	Nora-Be.....	102	RELION.....	90
<i>nevirapine er</i>	24	NORDIPEN 5 INJECTION		NOVOLIN 70/30 RELION.....	90
NEW DAY.....	102	DEVICE.....	148	NOVOLIN N.....	90

NOVOLIN N FLEXPEN.....	90	Nystop.....	215	OMVOH.....	180
NOVOLIN N FLEXPEN		NYVEPRIA.....	171	OMVOH (300 MG DOSE).....	180
RELION.....	90	OB COMPLETE.....	189	ON CALL EXPRESS BLOOD	
NOVOLIN N RELION.....	90	OB COMPLETE ONE.....	189	GLUCOSE.....	132
NOVOLIN R.....	90	OB COMPLETE PETITE.....	190	ON CALL EXPRESS	
NOVOLIN R FLEXPEN.....	90	OB COMPLETE PREMIER....	190	MONITORING SYS.....	132
NOVOLIN R FLEXPEN		OB COMPLETE/DHA.....	190	<i>ondansetron</i>	159
RELION.....	90	<i>obizur</i>	173	<i>ondansetron hcl</i>	159
NOVOLIN R RELION.....	90	OALIVA.....	162	<i>one drop blood glucose monitor</i>	
NOVOLOG.....	90	OCTAGAM.....	185	.....	132
NOVOLOG 70/30 FLEXPEN		<i>octreotide acetate</i>	84	<i>one drop test</i>	132
RELION.....	90	ODACTRA.....	175	<i>one vite womens plus</i>	190
NOVOLOG FLEXPEN.....	90	ODEFSEY.....	25	ONETOUCH DELICA PLUS	
NOVOLOG FLEXPEN		ODOMZO.....	40	LANCET30G.....	132
RELION.....	90	OFEV.....	209	ONETOUCH DELICA PLUS	
NOVOLOG MIX 70/30.....	91	<i>ofloxacin</i>	29, 198, 223	LANCET33G.....	132
NOVOLOG MIX 70/30		OGSIVEO.....	40	ONETOUCH DELICA PLUS	
FLEXPEN.....	90	OHTUVAYRE.....	208	LANCING.....	132
NOVOLOG MIX 70/30		OJEMDA.....	38	ONETOUCH DELICA	
RELION.....	91	OJJAARA.....	38	SAFETY LANCING.....	132
NOVOLOG PENFILL.....	91	<i>olanzapine</i>	65	ONETOUCH ULTRA.....	132
NOVOLOG RELION.....	91	<i>olanzapine-fluoxetine hcl</i>	82	ONETOUCH ULTRA 2.....	132
NOVOSEVEN RT.....	170	<i>olmesartan medoxomil</i>	45	ONETOUCH ULTRA BLUE	
NOXAFIL.....	22	<i>olmesartan medoxomil-hctz</i>	44	TEST.....	132
NP THYROID.....	155	<i>olmesartan-amlodipine-hctz</i>	44	ONETOUCH ULTRA TEST....	132
NPLATE.....	175	<i>olopatadine hcl</i>	196, 205	ONETOUCH ULTRASOFT 2	
NUBEQA.....	35	OLPRUVA (2 GM DOSE).....	155	LANCETS.....	132
NUCALA.....	180	OLPRUVA (3 GM DOSE).....	155	ONETOUCH VERIO.....	132
NUCYNTA.....	18	OLPRUVA (4 GM DOSE).....	155	ONETOUCH VERIO FLEX	
NUCYNTA ER.....	18	OLPRUVA (5 GM DOSE).....	155	SYSTEM.....	132
NUEDEXTA.....	82	OLPRUVA (6 GM DOSE).....	156	ONETOUCH VERIO	
Nufol.....	195	OLPRUVA (6.67 GM DOSE)..	156	REFLECT.....	132
Nulev.....	157	OLUMIANT.....	180	<i>onevite</i>	195
NUPLAZID.....	65	OMECLAMOX-PAK.....	165	ONEXTON.....	212
NURTEC.....	75	<i>omega-3-acid ethyl esters</i>	48	ONFI.....	69
NUSURGEPAK SURGICAL		<i>omeprazole</i>	164	ONGENTYS.....	62
PREP/CARE.....	220	<i>omeprazole-sodium bicarbonate</i>		ONGLYZA.....	87
Nutrifac Zx.....	195	.....	164	ONIVYDE.....	42
NUTROPIN AQ NUSPIN 10... 148		OMNARIS.....	208	ONUREG.....	34
NUTROPIN AQ NUSPIN 20... 148		OMNIFLEX DIAPHRAGM....	103	ONYDA XR.....	73
NUTROPIN AQ NUSPIN 5..... 148		OMNIPOD 5 DEXG7G6		ONZETRA XSAIL.....	76
NUVARING.....	103	INTRO GEN 5.....	132	OPCICON ONE-STEP.....	103
NUVESSA.....	168	OMNIPOD 5 DEXG7G6 PODS		OPFOLDA.....	149
NUVIGIL.....	81	GEN 5.....	132	OPILL.....	103
NUWIQ.....	173	OMNIPOD DASH INTRO		OPIPZA.....	65
NUZYRA.....	33	(GEN 4).....	132	OPSUMIT.....	55
Nyamyc.....	214	OMNIPOD DASH PDM (GEN		OPSYNVI.....	55
Nylia 1/35.....	103	4).....	132	OPTION 2.....	103
Nylia 7/7/7.....	103	OMNIPOD DASH PODS		OPTIONS GYNOL II	
NYMALIZE.....	51	(GEN 4).....	132	CONTRACEPTIVE.....	165
<i>nystatin</i>	22, 214, 215, 222	OMNIPOD POD PALS.....	132	OPTIUMEZ TEST.....	132
<i>nystatin-triamcinolone</i>	215	OMNITROPE.....	148	OPVEE.....	82

OPZELURA.....	216	<i>oxymorphone hcl</i>	18	<i>paroxetine hcl er</i>	60
ORACEA.....	221	<i>oxymorphone hcl er</i>	18	<i>paroxetine mesylate</i>	82
ORACIT.....	166	OXYTROL.....	168	PAXIL.....	60
ORALAIR.....	175	OZEMPIC (0.25 OR 0.5		PAXIL CR.....	60
Oralone.....	222	MG/DOSE).....	87	PAXLOVID (150/100).....	26
ORAPRED ODT.....	147	OZEMPIC (1 MG/DOSE).....	87	PAXLOVID (300/100 &	
ORAVIG.....	222	OZEMPIC (2 MG/DOSE).....	87	150/100).....	26
ORENCIA.....	176, 181	OZOBAX DS.....	80	PAXLOVID (300/100).....	26
ORENCIA CLICKJECT.....	180	OZURDEX.....	200	<i>pc unifine pentips</i>	133
ORENITRAM.....	55	Pacerone.....	45	<i>peg-3350/electrolytes/ascorbat</i>	161
ORENITRAM MONTH 1.....	55	<i>paingo kft</i>	220	PEGASYS.....	29, 30
ORENITRAM MONTH 2.....	55	PALFORZIA (12 MG DAILY		<i>peg-kcl-nacl-nasulf-na asc-c</i>	161
ORENITRAM MONTH 3.....	55	DOSE).....	175	PEG-PREP.....	161
ORFADIN.....	148	PALFORZIA (120 MG DAILY		PEMAZYRE.....	39
ORGOVYX.....	35	DOSE).....	175	<i>pen needle/5-bevel tip</i>	133
ORIAHNN.....	156	PALFORZIA (160 MG DAILY		<i>pen needles</i>	133
ORILISSA.....	145	DOSE).....	176	<i>penicillamine</i>	95
ORKAMBI.....	207	PALFORZIA (20 MG DAILY		<i>penicillin v potassium</i>	32
ORLADEYO.....	184	DOSE).....	176	PENNSAID.....	16
ORLYNVAH.....	31	PALFORZIA (200 MG DAILY		PENTASA.....	160
<i>orphenadrine citrate er</i>	80	DOSE).....	176	<i>pentazocine-naloxone hcl</i>	19
<i>orphenadrine-aspirin-caffeine</i>	80	PALFORZIA (240 MG DAILY		PENTIPS.....	133
ORPHENGESIC FORTE.....	80	DOSE).....	176	PENTIPS GENERIC PEN	
Orquidea.....	103	PALFORZIA (3 MG DAILY		NEEDLES.....	133
ORSERDU.....	35	DOSE).....	176	<i>pentoxifylline er</i>	174
Orsythia.....	103	PALFORZIA (300 MG		PERCOCET.....	18
<i>ortho df</i>	195	MAINTENANCE).....	176	PERFECT LANCETS 28G.....	133
ORTHOVISC.....	21	PALFORZIA (300 MG		PERFECT LANCETS 30G.....	133
<i>oscimin</i>	157	TITRATION).....	176	PERFOROMIST.....	206
<i>oseltamivir phosphate</i>	26	PALFORZIA (40 MG DAILY		<i>perindopril erbumine</i>	43
OSENVELT.....	94	DOSE).....	176	Periogard.....	222
OSPHENA.....	152	PALFORZIA (6 MG DAILY		<i>permethrin</i>	221
OTEZLA.....	181	DOSE).....	176	<i>perphenazine</i>	65
OTEZLA XR.....	181	PALFORZIA (80 MG DAILY		<i>perphenazine-amitriptyline</i>	82
OTEZLA/OTEZLA XR		DOSE).....	176	PERSERIS.....	65
INITIATION PK.....	181	PALFORZIA INITIAL DOSE		PERTZYE.....	163
OTOVEL.....	223	4-17YRS.....	176	Pfizerpen.....	32
OTULFI.....	181	PALFORZIA INITIAL		<i>ph strips</i>	133
OVIDE.....	221	ESCALATION.....	176	PHARMACIST CHOICE	
OVIDREL.....	146	<i>paliperidone er</i>	65	AUTOCODE.....	133
<i>oxaprozin</i>	15	PALYNZIQ.....	152	PHARMACIST CHOICE	
<i>oxazepam</i>	57	PAMELOR.....	60	AUTOCODE SYS.....	133
<i>oxcarbazepine</i>	69	PANCREAZE.....	163	PHARMACIST CHOICE	
OXERVATE.....	201	<i>pantoprazole sodium</i>	164	LANCETS.....	133
<i>oxiconazole nitrate</i>	215	PANZYGA.....	185	PHARMACIST CHOICE MINI	
OXISTAT.....	215	PARADIGM SILHOUETTE		SYSTEM.....	133
OXTELLAR XR.....	69	COMBO 23".....	133	<i>pharmacist choice no coding</i>	133
<i>oxybutynin chloride</i>	167, 168	PARAGARD		PHEBURANE.....	156
<i>oxybutynin chloride er</i>	167	INTRAUTERINE COPPER.....	103	<i>phendimetrazine tartrate er</i>	93
<i>oxycodone hcl</i>	18	<i>paricalcitol</i>	156	<i>phenelzine sulfate</i>	60
<i>oxycodone-acetaminophen</i>	18	PARNATE.....	60	<i>phenobarbital</i>	69
OXYCONTIN.....	18	<i>paroxetine hcl</i>	60	<i>phenoxybenzamine hcl</i>	54

<i>phenylephrine hcl</i>	201	POGO AUTOMATIC BLOOD	<i>prena 1 true</i>	190
<i>phenytoin</i>	69	GLUCOSE.....	<i>prenal</i>	190
<i>phenytoin sodium extended</i>	69	POGO AUTOMATIC TEST	<i>prenal pearl</i>	190
PHEXXI.....	166	CARTRIDGES.....	<i>prenatal</i>	190
Philith.....	103	POKONZA.....	<i>prenatal 19</i>	190
Phospha 250 Neutral.....	188	Polycin.....	<i>prenatal plus</i>	190
<i>phosphorous</i>	188	<i>poly-iron 150 forte</i>	PRENATAL-U.....	190
Phospho-Trin 250 Neutral.....	188	<i>polymyxin b-trimethoprim</i>	PRENATE.....	191
Physiolyte.....	202	<i>polysaccharide iron forte</i>	PRENATE AM.....	190
Physiosol Irrigation.....	202	POLY-VI-FLOR.....	PRENATE DHA.....	190
<i>phytonadione</i>	195	POLY-VI-FLOR/IRON.....	PRENATE ELITE.....	190
PIFELTRO.....	24	POMALYST.....	PRENATE ENHANCE.....	190
<i>pilocarpine hcl</i>	201, 222	PONVORY.....	PRENATE ESSENTIAL.....	190
<i>pimecrolimus</i>	216	PONVORY STARTER PACK..	PRENATE MINI.....	191
<i>pimozide</i>	82	Portia-28.....	PRENATE PIXIE.....	191
Pimtrea.....	103	<i>posaconazole</i>	PRENATE RESTORE.....	191
<i>pindolol</i>	50	<i>pot & sod cit-cit ac</i>	PRENATOL-M.....	191
<i>pioglitazone hcl</i>	91	<i>potassium chloride</i>	PRENATRIX.....	191
<i>pioglitazone hcl-glimepiride</i>	91	<i>potassium chloride crys er</i>	PRENATRYL.....	191
<i>pioglitazone hcl-metformin hcl</i> ...	91	<i>potassium chloride er</i>	<i>prepiv supply</i>	220
PIP BLOOD GLUCOSE		<i>potassium citrate er</i>	PRESTALIA.....	42
MONITORING.....	133	<i>potassium citrate-citric acid</i>	<i>pretomanid</i>	26
PIP BLOOD GLUCOSE TEST		PR BENZOYL PEROXIDE....	PREVACID.....	164
STRIP.....	133	PRADAXA.....	PREVACID SOLUTAB.....	164
<i>pip lancets 28g</i>	133	PRALUENT.....	Prevalite.....	46
<i>pip lancets 30g</i>	133	<i>pramipexole dihydrochloride</i>	PREVENT DROPSAFE PEN	
PIQRAY (200 MG DAILY		<i>pramipexole dihydrochloride er.</i>	NEEDLES.....	134
DOSE).....	39	<i>prasugrel hcl</i>	PREVENT SAFETY PEN	
PIQRAY (250 MG DAILY		<i>pravastatin sodium</i>	NEEDLES.....	134
DOSE).....	39	<i>praziquantel</i>	PREVIDOLRX ANALGESIC...	16
PIQRAY (300 MG DAILY		<i>prazosin hcl</i>	PREVYMIS.....	27
DOSE).....	39	PRECISION SURE-DOSE	PREZCOBIX.....	25
<i>pirfenidone</i>	209	SYRINGE.....	PREZISTA.....	24
Pirmella 7/7/7.....	103	PRED FORTE.....	PRIALT.....	14
<i>piroxicam</i>	16	PRED MILD.....	PRIFTIN.....	26
PLAQUENIL.....	184	<i>prednisolone</i>	PRIOSEC.....	164
PLAVIX.....	174	<i>prednisolone acetate</i>	<i>primaquine phosphate</i>	23
PLEGRIDY.....	78, 79	<i>prednisolone acetate p-f</i>	<i>primidone</i>	69
PLEGRIDY STARTER PACK..	79	<i>prednisolone sodium phosphate</i>	PRISTIQ.....	60
PLENITY.....	93	.....	PRIVIGEN.....	185
PLENITY WELCOME KIT.....	93	<i>prednisolone-gatifloxacin</i>	PRO COMFORT INSULIN	
PLENVU.....	161	<i>prednisone</i>	SYRINGE.....	134
<i>pnv prenatal plus multivit+dha</i>	190	PREDNISONE INTENSOL....	<i>pro comfort lancets 30g</i>	134
<i>pnv tabs 20-1</i>	190	<i>preferred plus unifine pentips</i> ...	<i>pro comfort lancets 31g</i>	134
<i>pnv-dha</i>	190	<i>pregabalin</i>	<i>pro comfort pen needles</i>	134
<i>pnv-dha+docusate</i>	190	<i>pregen dha</i>	<i>pro comfort safety lancets 30g</i> ..	134
<i>pnv-omega</i>	190	<i>pregenna</i>	<i>pro voice v8/v9 glucose</i>	134
<i>pnv-select</i>	190	PREGNYL.....	<i>pro voice v9 glucose system</i>	134
POCKETCHEM EZ SYSTEM.....	133	PREMARIN.....	PROAIR RESPICLICK.....	206
POCKETCHEM EZ TEST.....	133	PREMESISRX.....	<i>probenecid</i>	13
<i>podofilox</i>	220	PREMPHASE.....	<i>prochlorperazine</i>	159
		PREMPRO.....	<i>prochlorperazine edisylate</i>	159

<i>prochlorperazine maleate</i>	159	PROVIGIL	81	<i>quinidine gluconate er</i>	45
PROCORT	164	<i>pseudoeph-bromphen-dm</i>	207	<i>quinidine sulfate</i>	45
PROCRT	171	PTS PANELS EGLU TEST	134	<i>quinine sulfate</i>	23
<i>pro-critic</i>	195	PULMICORT FLEXHALER ...	210	QUINTET AC BLOOD	
PROCTOFOAM HC	164	PULMOZYME	207	GLUCOSE	135
Procto-Med Hc	164	<i>pure comfort lancets 30g</i>	134	QUINTET AC BLOOD	
Proctozone-Hc	164	<i>pure comfort safety pen needle</i> .	134	GLUCOSE TEST	135
PROCYSBI	167	PURIXAN	34	QUINTET BLOOD GLUCOSE	
PRODIGY AUTOCODE		<i>px insulin syringe</i>	134	SYSTEM	135
BLOOD GLUCOSE	134	<i>px lancets microthin 33g</i>	134	QUINTET BLOOD GLUCOSE	
PRODIGY INSULIN		<i>px lancets ultra thin 28g</i>	134	TEST	135
SYRINGE	134	<i>px mini pen needles</i>	134	QULIPTA	75
PRODIGY LANCETS 28G	134	PYLERA	165	QUTENZA	220
PRODIGY LANCING		<i>pyrazinamide</i>	26	QUTENZA (2 PATCH)	220
DEVICE	134	<i>pyridostigmine bromide</i>	81	QUTENZA (4 PATCH)	220
PRODIGY NO CODING		<i>pyridostigmine bromide er</i>	81	QUVIVIQ	74
BLOOD GLUC	134	<i>pyridoxine hcl</i>	195	QVAR REDHALER	210
PRODIGY POCKET BLOOD		<i>pyrimethamine</i>	31	<i>rabeprazole sodium</i>	164
GLUCOSE	134	PYRUKYND	174	RADICAVA ORS	56
PRODIGY SAFETY		PYRUKYND TAPER PACK ...	174	RADICAVA ORS STARTER	
LANCETS 26G	134	PYZCHIVA	181	KIT	57
PRODIGY TWIST TOP		QBRELIS	43	RAGWITEK	176
LANCETS 28G	134	<i>qc advanced lancing device</i>	135	RALDESY	60
PRODIGY VOICE BLOOD		<i>qc aspirin low dose</i>	20	<i>raloxifene hcl</i>	152
GLUCOSE	134	<i>qc childrens aspirin</i>	20	<i>ramelteon</i>	74
PROFILNINE	174	<i>qc lancets super thin 30g</i>	135	<i>ramipril</i>	43
<i>profola</i>	195	<i>qc lancets ultra thin</i>	135	<i>ranolazine er</i>	54
<i>progesterone</i>	154	<i>qc nicotine transdermal system</i> ...	84	RAPAFLO	165
PROGLYCEM	147	<i>qc pen needles</i>	135	RAPIVAB	27
PROGRAF	187	<i>qc unifine pentips</i>	135	<i>rasagiline mesylate</i>	62
PROLASTIN-C	203	<i>qc unilet lancets 28g</i>	135	RASUVO	184
PROLATE	19	<i>qc unilet lancets micro thin</i>	135	RAVICTI	156
PROLENSA	200	QELBREE	73	<i>raya sure pen needle</i>	135
PROLIA	94	QINLOCK	39	RAYALDEE	156
PROMACTA	175	QLOSI	201	RAYOS	147
<i>promethazine hcl</i>	159	QNASL	208	REACT	103
<i>promethazine-codeine</i>	207	QNASL CHILDRENS	208	READYLANCE SAFETY	
<i>promethazine-dm</i>	207	QSYMIA	93	LANCETS	135
Promethegan	159	<i>quad-mix</i>	166	<i>reality insulin syringe</i>	135
PROMETHEGAN	159	<i>quazepam</i>	74	<i>reality lancets</i>	135
PROMETRIUM	154	<i>quetiapine fumarate</i>	65	<i>reality trigger lancets</i>	135
<i>propafenone hcl</i>	45	<i>quetiapine fumarate er</i>	65	REBIF	79
<i>propafenone hcl er</i>	45	QUFLORA FE	195	REBIF REBIDOSE	79
<i>proparacaine hcl</i>	201	QUFLORA FE PEDIATRIC ...	195	REBIF REBIDOSE	
<i>propranolol hcl</i>	50	QUFLORA PEDIATRIC	195	TITRATION PACK	79
<i>propranolol hcl er</i>	50	QUICKTEK	135	REBIF TITRATION PACK	79
<i>propylthiouracil</i>	155	QUICKTEK TEST	135	REBINYN	174
PROSCAR	165	QUICKTEK/METER	135	RECLAST	94
PROTONIX	164	QUILLICHEW ER	73	Reclipsen	103
<i>protriptyline hcl</i>	60	QUILLIVANT XR	73	RECOMBINATE	173
PROVERA	154	<i>quinapril hcl</i>	43	RECORLEV	106
PROVIDA OB	191	<i>quinapril-hydrochlorothiazide</i> ...	42	RECTIV	220

REFUAH PLUS BLOOD	REMICADE..... 176	RIGHTEST GS550 BLOOD
GLUCOSE TEST..... 135	REMODULIN..... 55	GLUCOSE..... 137
REFUAH PLUS	RENACIDIN..... 167	RIGHTEST GT333 BLOOD
MONITORING SYSTEM..... 135	RENATABS WITH IRON..... 195	GLUCOSE..... 137
RELENZA DISKHALER..... 27	RENFLEXIS..... 177	RIGHTEST GT333 GLUCOSE
<i>releuko</i> 171	<i>reno caps</i> 195	TEST..... 137
RELEXXII..... 73	RENTHYROID..... 155	<i>riluzole</i> 57
RELION ALL-IN-ONE..... 135	REVELA..... 153	<i>rimantadine hcl</i> 27
RELION BLOOD GLUCOSE	<i>repaglinide</i> 91	<i>ringers irrigation</i> 203
TEST..... 135	REPATHA..... 48	RINVOQ..... 181
RELION CONFIRM	REPATHA SURECLICK..... 48	RINVOQ LQ..... 181
GLUCOSE MONITOR..... 135	<i>resorcinol-sulfur</i> 213	RIOMET..... 86
RELION CONFIRM/MICRO	RESTASIS..... 201	<i>risedronate sodium</i> 94
TEST..... 135	RESTASIS MULTIDOSE..... 201	RISPERDAL CONSTA..... 65
RELION GLUCOSE TEST	RETACRIT..... 171	<i>risperidone</i> 65, 66
STRIPS..... 135	RETEVMO..... 39	<i>ritonavir</i> 24
RELION INSULIN SYRINGE 136	RETIN-A MICRO..... 213	<i>rivastigmine</i> 58
RELION KETONE TEST..... 136	RETIN-A MICRO PUMP..... 213	<i>rivastigmine tartrate</i> 58
RELION LANCET DEVICES	REVATIO..... 55	Rivelsa..... 103
30G..... 136	REVLIMID..... 34	RIVFLOZA..... 167
RELION LANCETS MICRO-	REXTOVY..... 82	<i>rixubis</i> 174
THIN 33G..... 136	REXULTI..... 65	<i>rizatriptan benzoate</i> 76
RELION LANCETS THIN 26G	REYATAZ..... 24	ROCALTROL..... 156
..... 136	REYVOW..... 75	ROCKLATAN..... 197
RELION LANCETS ULTRA-	REZDIFFRA..... 152	ROLVEDON..... 171
THIN 30G..... 136	REZLIDHIA..... 40	<i>ropinirole hcl</i> 62
RELION LANCING DEVICE. 136	REZUROCK..... 187	<i>ropinirole hcl er</i> 62
RELION MICRO..... 136	REZVOGLAR KWIKPEN..... 91	<i>rosuvastatin calcium</i> 47
RELION PEN NEEDLES..... 136	RHEUMATE..... 195	Roweepra..... 69
RELION PREMIER BLU	RHOFADE..... 221	ROXICODONE..... 19
MONITOR..... 136	RHOPHYLAC..... 186	ROXYBOND..... 19
RELION PREMIER	RHOPRESSA..... 202	ROZEREM..... 74
COMPACT SYSTEM..... 136	<i>ribavirin</i> 30	ROZLYTREK..... 39
RELION PREMIER VOICE	<i>rifabutin</i> 26	RUBRACA..... 40
MONITOR..... 136	<i>rifampin</i> 26	RUCONEST..... 184
RELION PRIME MONITOR... 136	RIFAMPIN+SYRSPEND SF 26	<i>rufinamide</i> 69
RELION PRIME TEST..... 136	RIGHTEST ALTERNATE	RUKOBIA..... 24
RELION TRUE MET AIR	SITE ADAPT..... 136	RYALTRIS..... 205
GLUC METER..... 136	RIGHTEST GD500 LANCING	RYBELSUS..... 87
RELION TRUE METRIX	DEVICE..... 136	RYCLORA..... 205
TEST STRIPS..... 136	RIGHTEST GL300 LANCETS 136	RYDAPT..... 39
RELION ULTIMA GLUCOSE	RIGHTEST GM100 BLOOD	RYKINDO..... 66
SYSTEM..... 136	GLUCOSE..... 136	RYTARY..... 62
RELION ULTIMA TEST..... 136	RIGHTEST GM300 BLOOD	Ryvent..... 205
RELION ULTRA THIN	GLUCOSE..... 137	SABRIL..... 70
LANCETS 30G..... 136	RIGHTEST GM550 BLOOD	<i>safety lancet 30g/pressure act...</i> 137
RELISTOR..... 162	GLUCOSE..... 137	SAFETY LANCETS..... 137
<i>relnate dha</i> 191	RIGHTEST GS100 BLOOD	SAFETY LANCETS 21G..... 137
RELSTONE..... 162	GLUCOSE..... 137	SAFETY LANCETS 23G..... 137
REMEDIENT..... 195	RIGHTEST GS300 BLOOD	<i>safety lancets 28g</i> 137
REMERON..... 60	GLUCOSE..... 137	<i>safety pen needles</i> 137
REMERON SOLTAB..... 60		SAFYRAL..... 103

SALAGEN.....	222	SIGNIFOR.....	152	SMARTEST PRONTO	
<i>salimez</i>	220	SIGNIFOR LAR.....	152	STARTER.....	138
<i>salimez forte</i>	220	SIKLOS.....	175	SMARTEST PROTEGE.....	138
SAMSCA.....	152	<i>sildenafil citrate</i>	56	SMARTEST PROTEGE	
SANCUSO.....	159	SILENOR.....	74	STARTER.....	138
SANDOSTATIN.....	84	SILIQ.....	181	SOANZ.....	53
SANDOSTATIN LAR DEPOT.....	85	<i>silodosin</i>	165	<i>sod citrate-citric acid</i>	167
SANTYL.....	220	SILVADENE.....	214	<i>sodium chloride</i>	208
SAPHRIS.....	66	<i>silver sulfadiazine</i>	214	<i>sodium fluoride</i>	188
<i>saps health plus lancets</i>	137	SIMBRINZA.....	197	<i>sodium oxybate</i>	81
<i>saps health twist top lancets</i>	137	SIMLANDI (1 PEN).....	181	<i>sodium phenylbutyrate</i>	156
<i>saps twist top lancets</i>	137	SIMLANDI (2 PEN).....	181	<i>sodium polystyrene sulfonate</i>	153
<i>sapscare twist top lancets</i>	137	SIMLANDI (2 SYRINGE).....	181	SOFDRA.....	221
SAVAYSA.....	169	Simliya.....	104	<i>sofosbuvir-velpatasvir</i>	30
SAVELLA.....	74	Simpesse.....	104	SOGROYA.....	149
SAVELLA TITRATION PACK.....	74	SIMPLE DIAGNOSTICS		SOHONOS.....	80
SAXENDA.....	93	LANCING DEV.....	137	Solia.....	104
<i>sb childrens aspirin</i>	20	SIMPLERA SENSOR.....	137	<i>solifenacin succinate</i>	168
<i>sb insulin syringe</i>	137	SIMPLERA SYNC SENSOR.....	137	SOLIQUEA.....	88
<i>sb lancets thin</i>	137	SIMPLERA SYSTEM.....	138	SOLOSEC.....	31
<i>sb lancets ultra thin</i>	137	SIMPONI.....	181	SOLTAMOX.....	35
SCSEMBLIX.....	39	SIMPONI ARIA.....	177	SOLUS V2 BLOOD	
<i>scopolamine</i>	159	<i>simvastatin</i>	47	GLUCOSE SYSTEM.....	138
SECUADO.....	66	SINEMET.....	63	SOLUS V2 LANCETS 28G.....	138
SECURESAFE INSULIN		SINGLE-LET.....	138	SOLUS V2 LANCING	
SYRINGE.....	137	SINGULAIR.....	208	DEVICE.....	138
SECURESAFE SAFETY PEN		SINUVA.....	209	SOLUS V2 TEST.....	138
NEEDLES.....	137	<i>sirolimus</i>	187	SOLUS V2 TWIST LANCETS	
SEGLUROMET.....	92	SIRTURO.....	26	30G.....	138
SELARSDI.....	181	<i>sitagliptin</i>	87	SOLUVITA.....	188
<i>select-lite lancing device</i>	137	<i>sitagliptin base-metformin hcl</i>	87	SOMATULINE DEPOT.....	85
SELECT-OB.....	191	SITAVIG.....	27	SOMAVERT.....	85
SELECT-OB+DHA.....	191	SIVEXTRO.....	31	SOOLANTRA.....	221
<i>selegiline hcl</i>	62, 63	SKYCLARYS.....	77	SORILUX.....	215
<i>selenious acid</i>	188	SKYLA.....	104	<i>sotalol hcl</i>	45
<i>selenium sulfide</i>	216	SKYRIZI.....	182	<i>sotalol hcl (af)</i>	45
SELZENTRY.....	24	SKYRIZI PEN.....	182	SOTYKTU.....	182
SEMGLEE (YFGN).....	91	SKYTROFA.....	149	SOTYLIZE.....	45
<i>se-natal 19</i>	191	SLYND.....	104	SOVALDI.....	30
SENSIPAR.....	93	<i>sm nicotine</i>	84	SOVUNA.....	23, 184
SEREVENT DISKUS.....	206	<i>sm nicotine polacrilex</i>	84	SPEVIGO.....	215
SERNIVO.....	219	SMART DIABETES		<i>spinosad</i>	221
SEROQUEL XR.....	66	VANTAGE LANCING.....	138	SPIRIVA HANDIHALER.....	204
SEROSTIM.....	149	SMARTEST BLOOD		SPIRIVA RESPIMAT.....	204
<i>sertraline hcl</i>	60	GLUCOSE TEST.....	138	<i>spironolactone</i>	43
Setlakin.....	103	SMARTEST EJECT.....	138	<i>spironolactone-hctz</i>	53
<i>sevelamer carbonate</i>	153	SMARTEST EJECT		SPRAVATO (56 MG DOSE).....	60
<i>sevelamer hcl</i>	153	STARTER.....	138	SPRAVATO (84 MG DOSE).....	61
SEVENFACT.....	170	SMARTEST LANCETS 28G.....	138	Sprintec 28.....	104
SEYSARA.....	33	SMARTEST PERSONA		SPRITAM.....	70
SFROWASA.....	160	STARTER.....	138	SPRIX.....	16
Sharobel.....	103			SPRYCEL.....	39

Sps (Sodium Polystyrene Sulf). 153	support..... 195	<i>tamoxifen citrate</i> 35
SPS (SODIUM	SUPPRELIN LA.....95	<i>tamsulosin hcl</i> 165
POLYSTYRENE SULF)..... 153	SUPREME TEST..... 138	TANDEM MOBI AUTOSOFT
Sronyx..... 104	SUPREP BOWEL PREP KIT.. 161	30 KIT..... 139
Ssd.....214	<i>sure comfort insulin syringe</i> 138	TANDEM MOBI AUTOSOFT
ST JOSEPH LOW DOSE..... 20	<i>sure comfort lancets 18g</i> 138	XC KIT..... 139
STEGLATRO..... 92	<i>sure comfort lancets 21g</i> 138	TANDEM MOBI SYSTEM
STEGLUJAN..... 92	<i>sure comfort lancets 23g</i> 138	STARTER..... 139
STELARA..... 182	<i>sure comfort lancets 28g</i> 138	TANDEM MOBI TRUSTEEL
STENDRA..... 166	<i>sure comfort lancets 30g</i> 139	SUPP KIT..... 139
STEQEYMA..... 182	<i>sure comfort lancing pen</i> 139	TAPERDEX 12-DAY..... 147
STERILANCE TL..... 138	<i>sure comfort pen needles</i> 139	Taperdex 6-Day..... 147
<i>sterile water for irrigation</i> 203	<i>surebiotic probiotic support</i> 158	TAPERDEX 7-DAY..... 147
STIMUFEND..... 172	SURELITE LANCETS..... 139	TARCEVA..... 39
STIOLTO RESPIMAT..... 204	SUTAB..... 162	Targadox..... 33
STIVARGA..... 39	SUTENT..... 39	TARGRETIN..... 40, 221
STRENSIQ..... 152	Syeda..... 104	Tarina 24 Fe..... 104
STRIBILD..... 25	SYMBICORT..... 210	Tarina Fe 1/20 Eq..... 104
STRIVERDI RESPIMAT..... 206	SYMDEKO..... 207	TARON-C DHA..... 191
STROVITE FORTE..... 195	SYMFI..... 25	TARPEYO..... 167
SUBLOCADE..... 19	SYMPAZAN..... 70	TASCENSO ODT..... 79
SUBOXONE..... 81	SYMPROIC..... 162	TASIGNA..... 39
Subvenite..... 70	SYMTUZA..... 26	<i>tavaborole</i> 215
Subvenite Starter Kit-Blue..... 70	SYNAGIS..... 187	TAVALISSE..... 175
Subvenite Starter Kit-Green..... 70	SYNAREL..... 145	TAVNEOS..... 174
Subvenite Starter Kit-Orange..... 70	SYNDROS..... 159	Taysofy..... 104
SUCRAID..... 162	SYNJARDY..... 92	TAYTULLA..... 104
<i>sucalfate</i> 162	SYNJARDY XR..... 92	<i>tazarotene</i> 213, 215
SUFLAVE..... 161	SYNOJOYNT..... 21	TAZORAC..... 215
<i>sulconazole nitrate</i> 215	SYNTHROID..... 155	TAZVERIK..... 41
<i>sulfacetamide sodium</i> 198, 199	SYNVISC..... 21	TECFIDERA..... 79
<i>sulfacetamide sodium (acne)</i> 213	SYNVISC ONE..... 21	TECHLITE AST LANCETS... 139
<i>sulfacetamide-prednisolone</i> 197	SYPRINE..... 95	<i>techlite insulin syringe</i> 139
<i>sulfadiazine</i> 22	T/FLEX T/LOCK	TECHLITE LANCETS..... 139
<i>sulfamethoxazole-trimethoprim</i> .. 31	CARTRIDGE 4.8ML..... 139	TECHLITE PEN NEEDLES... 139
<i>sulfamez wash</i> 213	T/SLIM X2 3ML CARTRIDGE	TEGLUTIK..... 57
SULFAMYLON..... 214	 139	TEGRETOL..... 70
<i>sulfasalazine</i> 160	TABLOID..... 34	TEGRETOL-XR..... 70
Sulfatrim Pediatric..... 31	TABRECTA..... 39	TEKTURNA..... 52
<i>sulfurated lime</i> 221	TACLONEX..... 215	<i>telmisartan</i> 45
<i>sulindac</i> 16	<i>tacrolimus</i> 187, 216	<i>telmisartan-amlodipine</i> 44
<i>sumatriptan</i> 76	<i>tadalafil</i> 166	<i>telmisartan-hctz</i> 44
<i>sumatriptan succinate</i> 76	<i>tadalafil (pah)</i> 56	<i>temazepam</i> 74
<i>sumatriptan succinate refill</i> 76	TADLIQ..... 56	TEMBEXA..... 27
<i>sumatriptan-naproxen sodium</i> 76	TAFINLAR..... 39	TEMODAR..... 33
SUNLENCA..... 24	TAGRISSO..... 39	<i>temozolomide</i> 33
SUNOSI..... 81	TAKE ACTION..... 104	TEMPO REFILL..... 139
SUPARTZ FX..... 21	TAKHZYRO..... 184	TEMPO WELCOME..... 139
<i>super bi-mix</i> 166	TALICIA..... 165	TENCON..... 14
<i>super quad-mix</i> 166	TALIVA..... 195	<i>tenofovir disoproxil fumarate</i> 24
<i>super thin lancets</i> 138	TALTZ..... 182	TENORMIN..... 50
<i>super tri-mix</i> 166	TALZENNA..... 40	TEPMETKO..... 39

<i>terazosin hcl</i>	165	<i>today's health pen needles</i>	139	TREXALL.....	34
<i>terbinafine hcl</i>	22	<i>today's health short pen needle</i> ..	139	TREXIMET.....	76
<i>terbutaline sulfate</i>	206	<i>today's health thin lancets 28g.</i> ..	139	TREZIX.....	19
<i>terconazole</i>	168	<i>today's health thin lancets 30g.</i> ..	139	Tri Femynor.....	104
<i>teriparatide</i>	94	TOLAK.....	213	<i>triamcinolone acetonide</i>	219, 222
TESTIM.....	85	<i>tolcapone</i>	63	<i>triamcinolone in absorbase</i>	219
TESTOPEL.....	85	<i>tolsura</i>	23	<i>triamterene</i>	53
<i>testosterone</i>	85	<i>tolterodine tartrate</i>	168	<i>triamterene-hctz</i>	53
<i>testosterone cypionate</i>	85	<i>tolterodine tartrate er</i>	168	<i>triazolam</i>	75
<i>testosterone enanthate</i>	85	TOPICORT.....	219	<i>tricitrates</i>	167
<i>tetrabenazine</i>	77	<i>topiramate</i>	70	TRICOR.....	47
<i>tetracycline hcl</i>	33	<i>topiramate er</i>	70	Triderm.....	219
TEXACORT.....	219	TOPROL XL.....	50	<i>trientine hcl</i>	95
TEZSPIRE.....	209	<i>toremifene citrate</i>	35	Tri-Estarylla.....	104
THALITONE.....	53	<i>torse mide</i>	53	<i>trifluoperazine hcl</i>	66
THALOMID.....	34	TOSYMRA.....	76	<i>trifluridine</i>	199
THEO-24.....	211	TOUJEO MAX SOLOSTAR.....	91	<i>trihexyphenidyl hcl</i>	63
<i>theophylline</i>	211	TOUJEO SOLOSTAR.....	91	TRIJARDY XR.....	87
<i>theophylline er</i>	211	Tovet.....	219	TRIKAFTA.....	208
THIOLA.....	167	TOVIAZ.....	168	Tri-Legest Fe.....	104
THIOLA EC.....	167	TOXICOLOGY MED		TRILEPTAL.....	70
<i>thioridazine hcl</i>	66	COLLECTION SYS.....	139	Tri-Linyah.....	104
<i>thiothixene</i>	66	TPOXX.....	27	Tri-Lo-Estarylla.....	104
THRIVE.....	84	TRACLEER.....	56	Tri-Lo-Marzia.....	104
<i>thrivite rx</i>	191	TRADJENTA.....	87	Tri-Lo-Mili.....	104
THYQUIDITY.....	155	<i>tramadol hcl</i>	19	Tri-Lo-Sprintec.....	104
<i>thyroid</i>	155	<i>tramadol hcl (er biphasic)</i>	19	TRILURON.....	21
<i>tiagabine hcl</i>	70	<i>tramadol hcl er</i>	19	<i>trimethobenzamide hcl</i>	159
TIBSOVO.....	41	<i>tramadol-acetaminophen</i>	19	<i>trimethoprim</i>	31
TIKOSYN.....	46	<i>trandolapril</i>	43	Tri-Mili.....	105
Tilia Fe.....	104	<i>trandolapril-verapamil hcl er</i>	42	<i>trimipramine maleate</i>	61
<i>timolol hemihydrate</i>	197	<i>tranexamic acid</i>	174	<i>tri-mix</i>	166
<i>timolol maleate</i>	50, 197	TRANSDERM SCOP.....	159	<i>trinatal rx 1</i>	191
<i>timolol maleate (once-daily)</i>	197	<i>tranylcypromine sulfate</i>	61	TRINATE.....	191
TIMOPTIC OCUDOSE.....	197	TRAVATAN Z.....	202	Trinessa (28).....	105
<i>tinidazole</i>	22	TRAVEL LANCETS		TRINTELLIX.....	61
<i>tiotropium bromide</i>	204	ADVANCED 28G.....	139	<i>triple pmb</i>	198
TIROSINT.....	155	<i>travoprost (bak free)</i>	202	<i>triple pmk</i>	198
TIROSINT-SOL.....	155	<i>trazodone hcl</i>	61	TRIPTODUR.....	95
TIVICAY.....	24	TRELEGY ELLIPTA.....	204	Tri-Sprintec.....	105
TIVICAY PD.....	24	TRELSTAR MIXJECT.....	35	<i>tristart dha</i>	191
<i>tizanidine hcl</i>	80	TREMFYA.....	182	TRIUMEQ.....	26
TLANDO.....	85	TREMFYA ONE-PRESS.....	182	<i>triumeq pd</i>	26
TOBAKIENT.....	195	TREMFYA PEN.....	182	TRI-VI-FLOR.....	196
TOBI.....	207	TREMFYA-CD/UC		<i>tri-vi-floro</i>	196
TOBI PODHALER.....	207	INDUCTION.....	182	TRIVISC.....	21
TOBRADEX.....	198	<i>treprostinil</i>	56	<i>tri-vite/fluoride</i>	196
TOBRADEX ST.....	198	TRESIBA.....	91	Trivora (28).....	105
<i>tobramycin</i>	199, 207	TRESIBA FLEXTOUCH.....	91	Tri-Vylibra.....	105
<i>tobramycin-dexamethasone</i>	198	<i>tretinoin</i>	41, 213	Tri-Vylibra Lo.....	105
TOBREX.....	199	<i>tretinoin microsphere</i>	213	TROKENDI XR.....	70
TODAY SPONGE.....	166	<i>tretinoin microsphere pump</i>	213	<i>tronvite</i>	196

<i>tropicamide</i>	201	TWIST REFILL		<i>ultra comfort insulin syringe</i>	141
<i>trospium chloride</i>	168	KIT/INFUSION SET	141	ULTRA FLO INSULIN PEN	
<i>trospium chloride er</i>	168	TWIST STARTER KIT	141	NEEDLES.....	142
TRUDHESA.....	75	TWIRLA.....	105	ULTRA FLO INSULIN SYR	
<i>true comfort insulin syringe</i>	139	<i>twist top lancets 30g</i>	141	1/2 UNIT.....	142
<i>true comfort pen needles</i>	139	TWYNEO.....	213	ULTRA FLO INSULIN	
<i>true comfort pro insulin syr</i>	139	TYBLUME.....	105	SYRINGE.....	142
<i>true comfort pro pen needles</i>	140	TYBOST.....	24	<i>ultra thin lancets 31g</i>	142
<i>true comfort safety lancets</i>	140	Tydemy.....	105	ULTRA THIN PEN NEEDLES	142
<i>true comfort twist top lancets</i> ...	140	TYENNE.....	182	<i>ultracare insulin syringe</i>	142
TRUE FOCUS BLOOD		TYKERB.....	39	<i>ultra-care lancets 30g</i>	142
GLUCOSE METER.....	140	TYMLOS.....	94	<i>ultracare pen needles</i>	142
<i>true focus blood glucose strip</i> ...	140	TYRVAYA.....	201	ULTRA-THIN II AUTO	
TRUE METRIX AIR		TYSABRI.....	79	LANCET.....	142
GLUCOSE METER.....	140	TYVASO.....	56	ULTRA-THIN II INS SYR	
TRUE METRIX BLOOD		TYVASO DPI		SHORT.....	142
GLUCOSE TEST.....	140	INSTITUTIONAL KIT	56	ULTRA-THIN II INSULIN	
TRUE METRIX GO		TYVASO DPI		SYRINGE.....	142
GLUCOSE METER.....	140	MAINTENANCE KIT	56	ULTRA-THIN II LANCETS....	142
TRUE METRIX METER.....	140	TYVASO DPI TITRATION		ULTRA-THIN II MINI PEN	
TRUEPLUS 5-BEVEL PEN		KIT.....	56	NEEDLE.....	142
NEEDLES.....	140	TYVASO REFILL KIT	56	ULTRA-THIN II PEN	
TRUEPLUS INSULIN		TYVASO STARTER KIT	56	NEEDLE SHORT.....	142
SYRINGE.....	140	UBRELVY.....	75	ULTRA-THIN II PEN	
TRUEPLUS LANCETS 26G... 140		UCERIS.....	160	NEEDLES.....	142
TRUEPLUS LANCETS 28G... 140		UDAMIN SP.....	196	ULTRAVATE.....	219
TRUEPLUS LANCETS 30G... 140		UDENYCA.....	172	<i>umeclidinium-vilanterol</i>	204
TRUEPLUS LANCETS 33G... 140		ULORIC.....	13	UNIFINE PENTIPS.....	142
TRUEPLUS SAFETY		ULTICARE INSULIN		UNIFINE PENTIPS PLUS.....	142
LANCETS 28G.....	140	SAFETY SYR.....	141	UNIFINE PROTECT PEN	
TRUERESULT BLOOD		ULTICARE INSULIN		NEEDLE.....	142
GLUCOSE.....	140	SYRINGE.....	141	UNIFINE SAFECONTROL	
TRUETEST TEST.....	140	ULTICARE MICRO PEN		PEN NEEDLE.....	143
TRUETRACK BLOOD		NEEDLES.....	141	UNIFINE ULTRA PEN	
GLUCOSE.....	140	ULTICARE MINI PEN		NEEDLE.....	143
TRUETRACK SMART		NEEDLES.....	141	UNILET COMFORTOUCH	
SYSTEM.....	140	ULTICARE PEN NEEDLES... 141		LANCET.....	143
TRUETRACK TEST.....	141	ULTICARE SHORT PEN		UNILET EXCELITE.....	143
TRULANCE.....	161	NEEDLES.....	141	UNILET EXCELITE II.....	143
TRULICITY.....	87	ULTIGUARD SAFEPAK		UNILET G.P. LANCET.....	143
TRUQAP.....	39	PEN NEEDLE.....	141	UNILET G.P. SUPERLITE	
TRUSTEEL INFUSION SET... 141		ULTIGUARD SAFEPAK		LANCET.....	143
TRUVADA.....	26	SYR/NEEDLE.....	141	UNILET GP 28 ULTRA THIN	143
TRYPTYR.....	201	ULTI-LANCE AUTOMATIC.. 141		UNILET LANCET.....	143
TRYVIO.....	54	ULTILET CLASSIC		UNILET MICRO-THIN 33G... 143	
TUDORZA PRESSAIR.....	204	LANCETS.....	141	UNILET SUPERLITE	
TUKYSA.....	39	ULTILET LANCETS.....	141	LANCET.....	143
TURALIO.....	39	ULTILET PEN NEEDLE.....	141	UNILET SUPER-THIN 30G.... 143	
Turqoz.....	105	ULTILET SAFETY LANCETS		UNILET ULTRA-THIN 28G... 143	
TUXARIN ER.....	207	.....	141	UNISTIK 1.....	143
TWIST REFILL KIT.....	141	ULTILET SAFETY LANCETS		UNISTIK 2.....	143
		23G.....	141	UNISTIK 2 COMFORT.....	143

UNISTIK 2 EXTRA.....	143	VALTOCO 10 MG DOSE.....	70	VERIFINE INSULIN	
UNISTIK 2 NEONATAL.....	143	VALTOCO 15 MG DOSE.....	70	SYRINGE.....	144
UNISTIK 2 NORMAL.....	143	VALTOCO 20 MG DOSE.....	70	VERIFINE PLUS PEN	
UNISTIK 2 SUPER.....	143	VALTOCO 5 MG DOSE.....	70	NEEDLE.....	144
UNISTIK 3.....	143	VALTREX.....	27	VERIFINE SAFE LANCET	
UNISTIK 3 COMFORT.....	143	Valtya 1/50.....	105	MINI 21G.....	144
UNISTIK 3 EXTRA.....	143	VANCOCIN.....	31	VERIFINE SAFE LANCET	
UNISTIK 3 GENTLE.....	143	<i>vancomycin hcl</i>	31	MINI 23G.....	144
UNISTIK 3 NEONATAL.....	143	VANCOMYCIN+SYRSPEND		VERIFINE SAFE LANCET	
UNISTIK 3 NORMAL.....	143	SF.....	31	MINI 28G.....	144
UNISTIK CZT COMFORT.....	143	VANDAZOLE.....	168	VERIFINE SAFE LANCET	
UNISTIK CZT NORMAL.....	143	VANFLYTA.....	40	MINI 30G.....	144
UNISTIK NORMAL.....	143	VANISHPOINT INSULIN		VERIFINE UNIVERSAL	
UNISTIK PRO SAFETY		SYRINGE.....	144	LANCETS 28G.....	144
LANCET.....	143	VANRAFIA.....	167	VERIFINE UNIVERSAL	
UNISTIK SAFETY LANCETS		<i>varenicline tartrate</i>	84	LANCETS 30G.....	144
28G.....	143	<i>varenicline tartrate (starter)</i>	84	VERIFINE UNIVERSAL	
UNISTIK SAFETY LANCETS		VARISOFT INFUSION SET ..	144	LANCETS 33G.....	144
30G.....	143	VARUBI (180 MG DOSE).....	159	VERKAZIA.....	201
UNISTIK TOUCH SAFETY		VASCEPA.....	48	VERQUVO.....	53
LANC 21G.....	143	VASCULERA.....	196	VERSACLOZ.....	66
UNISTIK TOUCH SAFETY		VASOTEC.....	43	VERZENIO.....	40
LANC 23G.....	144	<i>vb6 p5p</i>	196	Vestura.....	105
UNISTIK TOUCH SAFETY		<i>v-c forte</i>	196	VEVYE.....	201
LANC 28G.....	144	VCF VAGINAL		VFEND.....	23
UNISTIK TOUCH SAFETY		CONTRACEPTIVE.....	166	V-GO 20.....	144
LANC 30G.....	144	VECAMYL.....	54	V-GO 30.....	144
UNISTRIP1 GENERIC.....	144	VECTICAL.....	215	V-GO 40.....	144
Unithroid.....	155	VELETRI.....	56	VIAGRA.....	166
UPNEEQ.....	201	VELIVET.....	105	VIBERZI.....	161
UPTRAVI.....	56	VELPHORO.....	153	Vic-Forte.....	196
UPTRAVI TITRATION.....	56	VELSIPITY.....	182	VICTOZA.....	88
Urimar-T.....	31	VELTASSA.....	154	Vienva.....	105
UROCIT-K 10.....	167	VEMLIDY.....	29	<i>vigabatrin</i>	71
UROCIT-K 15.....	167	VENCLEXTA.....	34	Vigadrone.....	71
UROXATRAL.....	165	VENCLEXTA STARTING		VIGAFYDE.....	71
URSO FORTE.....	163	PACK.....	34	VIGAMOX.....	199
<i>ursodiol</i>	163	VENIPUNCTURE PX1		VIIBRYD.....	61
URSODIOL+SYRSPEND SF..	163	PHLEBOTOMY.....	220	VIJOICE.....	152, 153
<i>ustekinumab</i>	182	<i>venlafaxine besylate er</i>	61	VIMOVO.....	16
<i>ustekinumab-aekn</i>	182	<i>venlafaxine hcl</i>	61	VIMPAT.....	71
<i>ustekinumab-ttwe</i>	182	<i>venlafaxine hcl er</i>	61	VINATE DHA RF.....	191
UZEDY.....	66	VENTOLIN HFA.....	206	VIOKACE.....	163
VAGIFEM.....	151	VEOZAH.....	152	<i>viorele</i>	105
<i>valacyclovir hcl</i>	27	<i>verapamil hcl</i>	52	VIRACEPT.....	24
VALCHLOR.....	221	<i>verapamil hcl er</i>	51	VIREAD.....	24, 25
VALCYTE.....	27	<i>verasens blood glucose meter</i> ...	144	VISCO-3.....	21
<i>valganciclovir hcl</i>	27	<i>verasens blood glucose system</i> ..	144	VISTOGARD.....	41
VALIUM.....	70	<i>verasens blood glucose test</i>	144	Vita S Forte.....	196
<i>valproic acid</i>	70	VEREGEN.....	221	Vitacel.....	196
<i>valsartan</i>	45	VERIFINE INSULIN PEN		VITAFOL FE+.....	191
<i>valsartan-hydrochlorothiazide</i> ...	44	NEEDLE.....	144	VITAFOL GUMMIES.....	191

VITAFOL ULTRA.....	191	VYLEESI.....	83	XANAX.....	57
VITAFOL-OB.....	192	Vylibra.....	105	XANAX XR.....	57
VITAFOL-OB+DHA.....	192	VYNDAMAX.....	54	Xarah Fe.....	106
VITAFOL-ONE.....	192	VYNDAQEL.....	54	XARELTO.....	170
<i>vitalara</i>	192	VYTORIN.....	48	XARELTO STARTER PACK.....	170
VITAMEZ.....	196	VYVANSE.....	73	XCOPRI.....	71
<i>vitamin d (ergocalciferol)</i>	196	VYVGART HYTRULO.....	81	XCOPRI (250 MG DAILY	
<i>vitamin k1</i>	196	VYZULTA.....	202	DOSE).....	71
VITAROCA PLUS.....	196	WAINUA.....	153	XCOPRI (350 MG DAILY	
<i>vitasure</i>	196	WAKIX.....	81	DOSE).....	71
VITATHELY WITH GINGER.....	192	<i>warfarin sodium</i>	170	XDEMVY.....	199
VITRAKVI.....	40	<i>wegmans unifine pentips plus</i> ...	145	XELJANZ.....	183
VIVA DHA.....	192	WEGOVY.....	93	XELJANZ XR.....	183
VIVAGUARD INO CONTROL		WELIREG.....	41	XELPROS.....	202
SOLUTION.....	144	WELLBUTRIN XL.....	61	Xelria Fe.....	106
VIVAGUARD INO GLUCOSE		<i>wellfolia</i>	196	XELSTRYM.....	73
METER.....	144	<i>wellpro 31</i>	158	XEMBIFY.....	186
VIVAGUARD INO SMART		Wera.....	105	XENAZINE.....	77
GLUC METER.....	145	<i>wescap-pn dha</i>	192	XENICAL.....	93
VIVAGUARD INO TEST		<i>wesnatal dha complete</i>	192	XEOMIN.....	74
STRIPS.....	145	<i>wesnate dha</i>	192	XERAC AC.....	221
VIVAGUARD LANCETS.....	145	<i>westab plus</i>	192	XERESE.....	27
VIVAGUARD LANCING		<i>westgel dha</i>	192	XERMELO.....	163
DEVICE.....	145	WEZLANA.....	182, 183	XGEVA.....	94
VIVELLE-DOT.....	151	WIDE-SEAL DIAPHRAGM 60		XHANCE.....	209
VIVITROL.....	82	.....	105	XIFAXAN.....	31
VIVJOA.....	23	WIDE-SEAL DIAPHRAGM 65		XIGDUO XR.....	92
VIZIMPRO.....	40	.....	105	XIIDRA.....	201
VIZZ.....	201	WIDE-SEAL DIAPHRAGM 70		XOFIGO.....	41
VOGELXO.....	85	.....	105	XOFLUZA (40 MG DOSE).....	27
VOGELXO PUMP.....	85	WIDE-SEAL DIAPHRAGM 75		XOFLUZA (80 MG DOSE).....	27
Volnea.....	105	.....	106	XOLAIR.....	183
VOLTAREN.....	16	WIDE-SEAL DIAPHRAGM 80		XOLREMDI.....	172
VONJO.....	40	.....	106	XOPENEX HFA.....	206
VONVENDI.....	170	WIDE-SEAL DIAPHRAGM 85		XOSPATA.....	40
VOQUEZNA.....	163	.....	106	XPHOZAH.....	153
VORANIGO.....	41	WIDE-SEAL DIAPHRAGM 90		XPOVIO (100 MG ONCE	
<i>voriconazole</i>	23	.....	106	WEEKLY).....	41
VOSEVI.....	30	WIDE-SEAL DIAPHRAGM 95		XPOVIO (40 MG ONCE	
VOTRIENT.....	40	.....	106	WEEKLY).....	41
VOWST.....	163	WILATE.....	170	XPOVIO (40 MG TWICE	
VOXZOGO.....	148	WINLEVI.....	213	WEEKLY).....	41
VOYDEYA.....	174	WINREVAIR.....	56	XPOVIO (60 MG ONCE	
VPRIV.....	149	WINRHO SDF.....	186	WEEKLY).....	41
VRAYLAR.....	66	Wixela Inhub.....	211	XPOVIO (60 MG TWICE	
VTAMA.....	215	<i>wpr plus wound healing system</i>	220	WEEKLY).....	41
VUITY.....	201	Wymzya Fe.....	106	XPOVIO (80 MG ONCE	
VUMERITY.....	79	WYNZORA.....	216	WEEKLY).....	41
VUSION.....	215	XACIATO.....	168	XPOVIO (80 MG TWICE	
VYALEV.....	63	XADAGO.....	63	WEEKLY).....	41
Vyfemla.....	105	XALATAN.....	202	XTAMPZA ER.....	19
VYJUVEK.....	222	XALKORI.....	40	XTANDI.....	35, 36

Xulane.....	106	ZEPOSIA STARTER KIT.....	79	ZYLET.....	198
XULTOPHY.....	88	ZERVIAE.....	196	ZYMFENTRA (1 PEN).....	183
XURIDEN.....	153	ZESTORETIC.....	42	ZYMFENTRA (2 PEN).....	183
XYNTHA.....	173	ZETIA.....	46	ZYMFENTRA (2 SYRINGE)..	183
XYNTHA SOLOFUSE.....	173	zevrx insulin syringe.....	145	ZYPITAMAG.....	47
XYOSTED.....	86	zevrx pen needles.....	145	ZYTIGA.....	36
XYREM.....	81	zevrx twist top lancets 30g.....	145		
XYWAV.....	81	ZIANA.....	213		
xyzbac.....	196	zidovudine.....	25		
YASMIN 28.....	106	ZIEXTENZO.....	172		
YAZ.....	106	ZILBRYSQ.....	77		
YCANTH.....	221	zileuton er.....	208		
YESINTEK.....	183	ZILXI.....	221		
YEZTUGO.....	25	ZIMHI.....	82		
yl folic acid.....	196	ZIOPTAN.....	202		
YONSA.....	36	ziphex.....	192		
YORVIPATH.....	94	ziprasidone hcl.....	66		
YOSPRALA.....	175	ZIPSOR.....	16		
YUFLYMA (1 PEN).....	183	ZIRGAN.....	199		
YUFLYMA (2 PEN).....	183	ZITHROMAX.....	28		
YUFLYMA (2 SYRINGE).....	183	ZITHROMAX TRI-PAK.....	29		
YUFLYMA-CD/UC/HS		ZITHROMAX Z-PAK.....	29		
STARTER.....	183	ZITUVIMET.....	87		
YUPELRI.....	204	ZITUVIMET XR.....	87		
YUSIMRY.....	183	ZITUVIO.....	87		
YUTREPIA.....	56	ZOCOR.....	47		
Yuvaferm.....	151	ZOKINVY.....	153		
Zafemy.....	106	ZOLADEX.....	36		
zafirlukast.....	208	zoledronic acid.....	94		
zaleplon.....	75	ZOLINZA.....	41		
zalvit.....	192	zolmitriptan.....	76		
ZANAFLEX.....	80	ZOLOFT.....	61		
ZARONTIN.....	71	zolpidem tartrate.....	75		
ZARXIO.....	172	zolpidem tartrate er.....	75		
ZAVESCA.....	149	ZOMACTON.....	149		
ZAVZPRET.....	75	ZOMIG.....	76		
ZEGALOGUE.....	148	Zomig.....	76		
ZEJULA.....	41	ZONEGRAN.....	71		
zelac.....	158	ZONISADE.....	71		
ZELAPAR.....	63	zonisamide.....	71		
ZELBORAF.....	40	ZONTIVITY.....	175		
ZEMAIRA.....	203	ZORTRESS.....	187		
ZEMBRACE SYMTOUCH.....	76	ZORYVE.....	216		
ZEMPLAR.....	156	Zovia 1/35 (28).....	106		
Zenatane.....	213	ZTALMY.....	71		
ZENPEP.....	163	ZUBSOLV.....	81		
Zenzedi.....	73	Zumandimine.....	106		
ZEPATIER.....	30	ZURZUVAE.....	61		
ZEPBOUND.....	93	ZYCLARA.....	213		
ZEPOSIA.....	79	ZYCLARA PUMP.....	213		
ZEPOSIA 7-DAY STARTER		ZYDELIG.....	40		
PACK.....	79	ZYKADIA.....	40		