

Plan for your best health

2026 Aetna Pharmacy Drug Guide 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 Previous versions are no longer in effect.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.....	21
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS.....	29
ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER.....	41
CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS.....	50
CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS.....	64
ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES.....	92
GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS.....	134
GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS.....	142
HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS.....	146
IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM.....	153
MEDICAL DEVICES.....	164
NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS.....	164
OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS.....	172
OTHER.....	178
RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS.....	179
TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS.....	187

Definitions

Allowed amount is the maximum amount on which the health insurance issuer bases its payment for a covered health care service. This may be called “eligible expense”, “payment allowance”, or “negotiated rate”. If your health care provider charges more than the allowed amount and is not part of the provider network, you may have to pay the difference.

Brand name drug means a drug that is marketed under a proprietary, trademark-protected name. A brand name drug is listed in this formulary in all CAPITAL letters.

Coinsurance means a percentage of the cost of a covered health care service, which you are responsible to pay. The cost of the covered health care service is generally deemed to be the allowed amount, which may differ from the retail price that you would pay for the same service without using insurance. Typically, a coinsurance does not apply until after you have met the deductible, unless the health insurance issuer has waived or lowered the deductible for the health care service in question.

Copayment means a fixed dollar amount that you pay for a covered health care benefit after you have paid the deductible, if a deductible applies to the health care benefit, unless the health insurance issuer has waived or lowered the deductible for the health care service in question.

Covered individual is an individual enrolled in, subscribed to, or insured under a health product, whether directly or as a dependent or beneficiary.

Deductible means the amount you pay for covered health care benefits before your health insurer begins to pay for all or part of the cost of the health care benefits under the terms of coverage. If your health product has a deductible, it may have either one deductible or separate deductibles for medical benefits and drug benefits. For some health care services, such as preventive services, your health insurance company might waive or lower the deductible to pay for costs of the health care service from the first dollar of coverage, but this tends not to happen for most other covered services.

Drug Tier means a group of prescription drugs that correspond to a specified cost sharing tier in your health insurance policy. The drug tier in which a prescription drug is placed determines your portion of the cost for the drug.

Enrollee is a person enrolled in a health plan who is entitled to receive services from the plan.

Exception request means a request for coverage of i) a nonformulary drug, ii) a drug being removed from the formulary, iii) a quantity of a drug above a quantity limit, or iv) a drug that is subject to a step therapy requirement. If you, your designee, or your attending or prescribing provider submits an exception request for coverage of a drug, the health insurance issuer must cover the drug when the drug is determined to be medically necessary to treat your condition.

Exigent circumstances means when you are suffering from a medical condition that may seriously jeopardize your life, health, or ability to regain maximum function, or when you are undergoing a current course of treatment using a non-formulary drug.

Formulary or prescription drug list means the complete list of drugs preferred for use and eligible for coverage under a health product, and includes all drugs covered under the outpatient or pharmacy drug benefit of the health product. Formulary is also known as a drug list or prescription drug list.

Generic drug means a drug that is the same as its brand name drug equivalent in dosage, strength, effect, how it is taken, quality, safety, and intended use. A generic drug is listed in this formulary in italicized lowercase letters.

Medically Necessary means health care benefits needed to diagnose, treat, or prevent a medical condition or its symptoms and that meet accepted standards of medicine. Health insurance usually does not cover health care benefits that are not medically necessary.

Non-formulary drug means a prescription drug that is not listed on this formulary, but may become eligible for coverage under an “exception request.”

Oral Anti-Cancer drugs are prescribed, orally administered medications used to kill or slow the growth of cancerous cells. They are no more restrictive than those applied to intravenously injected or administered cancer medications covered by the health product. There are no separate cost-sharing requirements or treatment limitations for prescribed, orally-administered cancer medications.

Out-of-pocket costs means your expenses for health care benefits that aren't reimbursed by your health insurance. Out-of-pocket costs include deductibles, copayments, and coinsurance for covered health care benefits, plus all costs for health care benefits that are not covered.

Prescribing provider means a health care provider authorized to write a prescription to treat your health condition.

Prescription means an oral, written, or electronic order from a prescribing provider for you that contains the name of the drug, the quantity of the drug, the date of issue, the name and contact information of the prescribing provider, the signature of the prescribing provider if the prescription is in writing, and if requested by you, the health condition or purpose for which the drug is being prescribed.

Prescription drug means a drug that is prescribed by your prescribing provider and requires a prescription under applicable law.

Prior Authorization means a health product's requirement that you or your prescribing provider obtain the health insurance issuer's authorization for a drug before the health product will cover the drug. The health insurance issuer must grant a prior authorization when it is medically necessary for you to obtain the drug.

Step therapy means a specific sequence in which prescription drugs for a particular medical condition must be tried. If a drug is subject to step therapy in this formulary, you may have to try one or more other drugs before your health insurance policy will cover that drug for your medical condition. If your prescribing provider submits a request for an exception to the step therapy requirement, your health insurer must grant the request when it is medically necessary for you to take the drug.

Subscriber means the person who is responsible for payment to a plan or whose employment or other status, except for family dependency, is the basis for eligibility for membership in the plan.

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 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. If a pharmacy's retail price for a prescription drug is less than your total cost share amount, you will not be required to pay more than the retail drug 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 may require special handling, storage, or administration. Specialty prescription drugs may also require monitoring from healthcare providers.

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. Drug coverage may vary by plan. Check your plan documents for coverage information.

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 to treat conditions 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."
- Visit your secure member website and sign in to your account to view your plan information.

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 (TTY: 711)**.
- **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**
 3. **Phone:** **1-800-237-2767 (TTY: 711)**

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 (TTY: 711)**. If you need the help of a telephone device for the hard of hearing, call **1-877-833-2779 (TTY: 711)**.
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**. 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)?

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

The length of approval for a prior authorization may be different depending on the type of drug, the way your provider prescribed your drug, or the time of year you get your coverage.

- Most prior authorization approvals will be valid for 6 months, the length of treatment as determined by your prescribing provider, or the renewal of your plan, whichever of these is the shortest amount of time
- For maintenance medications to treat a chronic condition or long-term condition, your prior authorization will be valid for either 12 months or the length of time determined by your prescribing provider
- Different prior authorization requirements might apply to benzodiazepines and Schedule II narcotic drugs. Please refer to the formulary or contact us with questions about 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.CoverMyMeds.com.
- Call the Aetna Pharmacy Precertification Unit: NonSpecialty **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 brandname 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.
- Change in drug or dosage form.
- Changes in tier placement of a drug that results in an increase in cost sharing.
- Any changes of utilization review restrictions, including any additions of these restrictions.

Does Aetna provide notice of these changes?

Yes, Aetna provides member and provider notifications 60 days in advance.

What is a medical benefit drug versus a drug covered under the Outpatient Prescription Drug Benefit?

A medical benefit drug is a drug that is generally not self-administered and requires administration by health care provider. The Outpatient Prescription Drug Benefit includes FDA-approved drugs that are self-administered, commonly oral or self-injectable drugs, not otherwise excluded from coverage.

Refer to your Summary of Benefits for differences and information about the prescription drugs covered under your Outpatient prescription drugs and medical benefit in your plan.

For a more detailed summary of your coverage or benefits plan you can log in to your secure member site on www.aetna.com or call the toll-free number on your member ID card.

Discrimination is Against the Law

Aetna complies with applicable California and Federal civil rights laws and does not discriminate on the basis of race, color, national origin, ethnic group, ancestry, religion, marital status, gender, gender identity, sexual orientation, age, disability, medical condition, genetic information, or sex (consistent with 45 CFR § 92.101(a)(2) and California 2 CCR § 14025). Aetna does not exclude people or treat them less favorably because of race, color, national origin, ethnic group, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, medical condition, genetic information, or disability.

Aetna:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language assistance services to people whose primary language is not English, which may include:
 - Qualified sign language interpreters
 - Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, call [1-800-872-3862](tel:1-800-872-3862) (TTY: [711](tel:711)) or the number on the back of your ID card.

If you believe that Aetna has failed to provide these services or discriminated in another way on the basis of race, color, national origin, ethnic group, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, medical condition, genetic information, or disability, by action or inaction, you can file a grievance with:

Civil Rights Coordinator

Attn: 1557 Coordinator

CVS Pharmacy, Inc.

1 CVS Drive, MC 2332, (HMO customers: P.O. Box 14032 Lexington, KY 40512-4032)

Woonsocket, RI 02895

Phone: [1-800-648-7817](tel:1-800-648-7817), TTY: [711](tel:711)

Email: CRCoordinator@aetna.com

You can file a grievance in person, by mail, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

Please visit <https://www.aetna.com/individuals-families/member-rights-resources/complaints-grievances-appeals.html#california> for information about how to file a complaint or grievance with the California Department of Insurance or California Department of Managed Health Care (for HMO enrollees).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
[1-800-368-1019](tel:1-800-368-1019), [800-537-7697](tel:800-537-7697) (TDD)

Complaint forms are available at <https://www.hhs.gov/ocr/complaints/index.html>.

This notice is available at Aetna's website: <https://www.aetna.com/>.

"Aetna" is the brand name used for products and services provided by one or more of the Aetna group of companies offering and administering health and dental plans and other products such as life, disability, and long-term care insurance. In California, this includes Aetna's wholly-owned subsidiaries Aetna Life Insurance Company, Aetna Health of California Inc., Aetna Better Health of California Inc., Aetna Dental of California Inc., and Health and Human Resource Center Inc., and its other affiliates licensed in California. Aetna's ultimate parent is CVS Health Corporation ("CVS Health").

Language accessibility statement

Interpreter services are available for free.

TTY: [711](tel:711)

To access language services at no cost to you, call **1-800-385-4104**.

Para acceder a los servicios de idiomas sin costo, llame al **1-800-385-4104**. (Spanish)

如欲使用免費語言服務，請致電 **1-800-385-4104**. (Chinese)

Nếu quý vị muốn sử dụng miễn phí các dịch vụ ngôn ngữ, hãy gọi tới số **1-800-385-4104**. (Vietnamese)

Para ma-access ang mga serbisyo sa wika nang wala kayong babayaran, tumawag sa **1-800-385-4104**. (Tagalog)

무료 언어 서비스를 이용하려면 1-800-385-4104 번으로 전화해 주십시오. (Korean)

Անվճար լեզվական ծառայություններից օգտվելու համար զանգահարեք **1-800-385-4104** հեռախոսահամարով: (Armenian)

(Persian-Farsi) برای دسترسی به خدمات زبان به طور رایگان، با شماره **1-800-385-4104** تماس بگیرید.

Для того чтобы бесплатно получить помощь переводчика, позвоните по телефону **1-800-385-4104**. (Russian)

言語サービスを無料でご利用いただくには、**1-800-385-4104** までお電話ください。 (Japanese)

للحصول على الخدمات اللغوية دون أي تكلفة، الرجاء الاتصال على الرقم **1-800-385-4104**. (Arabic)

ਤੁਹਾਡੇ ਲਈ ਬਿਨਾਂ ਕਿਸੇ ਕੀਮਤ ਵਾਲੀਆਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਦੀ ਵਰਤੋਂ ਕਰਨ ਲਈ, **1-800-385-4104** 'ਤੇ ਫ਼ੋਨ ਕਰੋ। (Punjabi)

ដើម្បីទទួលបានសេវាផ្នែកភាសាដោយមិនគិតថ្លៃពីអ្នកសូមទូរសព្ទលេខ **1-800-385-4104** ។ (Mon-Khmer, Cambodian)

Xav tau kev pab txhais lus tsis muaj nqi them rau koj, hu **1-800-385-4104**. (Hmong)

आपके लिए बिना किसी कीमत के भाषा सेवाओं का उपयोग करने के लिए, **1-800-385-4104** पर कॉल करें। (Hindi)

หากท่านต้องการเข้าถึงการบริการทางด้านภาษาโดยไม่มีค่าใช้จ่าย โปรดโทร **1-800-385-4104**. (Thai)

Notice of Language Assistance

HMO and DMO-based plans:

IMPORTANT: Can you read this letter? If not, we can have somebody help you read it. You may also be able to get this letter written in your language. For free help, please call right away at [1-877-287-0117](tel:1-877-287-0117). Planes basados en DMO y HMO –

IMPORTANTE: ¿Puede leer esta carta? En caso de no poder leerla, le brindamos nuestra ayuda. También puede obtener esta carta escrita en su idioma. Para obtener ayuda gratuita, por favor llame de inmediato al [1-877-287-0117](tel:1-877-287-0117).

Traditional Plans:

No Cost Language Services. You can get an interpreter. You can get documents read to you and some sent to you in your language. For help, call us at the number listed on your ID card or [1-877-287-0117](tel:1-877-287-0117). For more help call the CA Dept. of Insurance at [1-800-927-4357](tel:1-800-927-4357)
English

Servicios de idiomas sin costo. Puede obtener un intérprete. Le pueden leer documentos y que le envíen algunos en español. Para obtener ayuda, llámenos al número que figura en su tarjeta de identificación o al [1-877-287-0117](tel:1-877-287-0117). Para obtener más ayuda, llame al Departamento de Seguros de CA al [1-800-927-4357](tel:1-800-927-4357). Spanish

Non-discrimination notice

Aetna® complies with applicable Federal and Washington state civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation or gender identity. We do not exclude people or treat them less favorably because of race, color, national origin, age, disability, sex, sexual orientation or gender identity. We:

- Provide people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provide free language assistance services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, call us at [1-888-982-3862](tel:1-888-982-3862) (TTY: [711](tel:711)).

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation or gender identity you can file a grievance with:

Civil Rights Coordinator

[P.O. Box 14462, Lexington, KY 40512

(CA HMO customers: PO Box 24030 Fresno, CA 93779)]

[[1-800-648-7817](tel:1-800-648-7817), TTY: [711](tel:711)]

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

Email: [CRCoordinator@aetna.com]

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with:

- The U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at [<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>], or by mail or phone at:
U.S. Department of Health and Human Services
[200 Independence Avenue, SW Room 509F, HHH Building
Washington, D.C. 20201]
[1-800-368-1019, 800-537-7697 (TDD)]
Complaint forms are available at [<http://www.hhs.gov/ocr/office/file/index.html>]
- The Washington State Office of the Insurance Commissioner, electronically through the Office of the Insurance Commissioner Complaint portal available at [<https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status>], or by phone at 800-562-6900, 360-586-0241 (TDD). Complaint forms are available at [<https://fortress.wa.gov/oic/online services/cc/pub/complaintinformation.aspx>]

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).

TTY:711

To access language services at no cost to you, call 1-888-982-3862 .
Para acceder a los servicios de idiomas sin costo, llame al 1-888-982-3862 . (Spanish)
如欲使用免費語言服務，請致電 1-888-982-3862 . (Chinese)
Afin d'accéder aux services langagiers sans frais, composez le 1-888-982-3862 . (French)
Para ma-access ang mga serbisyo sa wika nang wala kayong babayaran, tumawag sa 1-888-982-3862 . (Tagalog)
T'áá ni nizaad k'ehjí bee níká a'doowoł doo bááh ílínígóó koji' hólne' 1-888-982-3862 . (Navajo)
Um auf für Sie kostenlose Sprachdienstleistungen zuzugreifen, rufen Sie 1-888-982-3862 an. (German)
Për shërbime përkthimi falas për ju, telefononi 1-888-982-3862 . (Albanian)
የቋንቋ አገልግሎቶችን ያለክፍያ ለማግኘት፣ በ 1-888-982-3862 ይደውሉ። (Amharic)

(Arabic). 1-888-982-3862 للحصول على الخدمات اللغوية دون أي تكلفة، الرجاء الاتصال على الرقم
Անվճար լեզվական ծառայություններից օգտվելու համար զանգահարեք 1-888-982-3862 հեռախոսահամարով: (Armenian)
Kugira uronke serivisi z'indimi atakiguzi, hamagara 1-888-982-3862 . (Bantu)
আপনাকে বিনামূল্যে ভাষা পরিষেবা পেতে হলে এই নম্বরে টেলিফোন করুন: 1-888-982-3862 । (Bengali)
Ngadto maakes ang mga serbisyo sa pinulongan alang libre, tawagan sa 1-888-982-3862 . (Bisayan-Visayan)
သင့်အတွက် အခကြေးငွေ မရှိဘဲ ဘာသာစကားဝန်ဆောင်မှုများကို ဝင်ရောက်အသုံးပြုရန် 1-888-982-3862 ကိုခေါ်ဆိုပါ။ (Burmese)
ngere aukke ghut alillis reel kapasal Falawasch au fafaingi tilifon ye 1-888-982-3862 (Carolinian (Kapasal Falawasch))
Per accedir a serveis lingüístics sense cap cost per vostè, telefoni al 1-888-982-3862 . (Catalan)
Para un hago' i setbision lengguahi ni dibatde para hagu, agang 1-888-982-3862 . (Chamorro)
ᏍᏏᏉᏗ ᏚᏐᏃᏗ ᏚᏐᏃᏗ ᏚᏐᏃᏗ ᏚᏐᏃᏗ ᏚᏐᏃᏗ ᏚᏐᏃᏗ ᏚᏐᏃᏗ 1-888-982-3862 . (Cherokee)
Anumpa tohsholi I toksvli ya peh pilla ho ish I paya hinla, I paya 1-888-982-3862 . (Choctaw)
Tajaajiiloota afaanii garuu bilisaa ati argaachuuf,bilbili 1-888-982-3862 . (Cushite-Oromo)
Voor gratis toegang tot taaldiensten, bell 1-888-982-3862 . (Dutch)
Pou jwenn sèvis lang gratis, rele 1-888-982-3862 . (French Creole-Haitian)
Για να επικοινωνήσετε χωρίς χρέωση με το κέντρο υποστήριξης πελατών στη γλώσσα σας, τηλεφωνήστε στον αριθμό 1-888-982-3862 . (Greek)
તમારે કોઇ જાતના ખર્ચ વિના ભાષાની સેવાઓની પહોંચ માટે, કોલ કરો 1-888-982-3862 . (Gujarati)
No ka wala'au 'ana me ka lawelawe 'ōlelo e kahea aku i kēia helu kelepona 1-888-982-3862 . Kāki 'ole 'ia kēia kōkua nei. (Hawaiian)
आपके लिए बिना किसी कीमत के भाषा सेवाओं का उपयोग करने के लिए, 1-888-982-3862 पर कॉल करें। (Hindi)
Xav tau kev pab txhais lus tsis muaj nqi them rau koj, hu 1-888-982-3862 . (Hmong)
Iji nwetaòhèrè na rụ gasị asụsụ n'efu, kpọọ 1-888-982-3862 . (Ibo)
Tapno maakesyo dagiti serbisio maipapan iti pagsasao nga awan ti bayadanyo, tawagan ti 1-888-982-3862 . (Ilocano)

Untuk mengakses layanan bahasa tanpa dikenakan biaya, hubungi 1-888-982-3862 . (Indonesian)
Per accedere ai servizi linguistici, senza alcun costo per lei, chiami il numero 1-888-982-3862 . (Italian)
言語サービスを無料でご利用いただくには、1-888-982-3862 までお電話ください。 (Japanese)
လကမၤန့ၢ် ကျိၣ်တၢ်မၤစၢၤတၢ်မၤ လၢတလိၣ်လၢၣ်ဘျၣ်လၢၣ်စ့ၤ လၢန့ၢ်အဂီၢ်, ကိၣ်: 1-888-982-3862 . (Karen)
무료 언어 서비스를 이용하려면 1-888-982-3862 번으로 전화해 주십시오. (Korean)
M̈ dyi wuḍu-dù kà kò dò bë dyi m̈uún nì Pídyi ní, nîí, dá nòbà nìà kɛ: 1-888-982-3862 . (Kru-Bassa)
بۆ دەسپێراگە یشتن بە خزمەتگوزاری زمان بەبێ تێچوون بۆ تۆ، پەيوەندی بکە بە ژمارەى 1-888-982-3862 (Kurdish)
ເພື່ອເຂົ້າໃຊ້ການບໍລິການພາສາໂດຍບໍ່ເສຍຄ່າຕໍ່ກັບທ່ານ, ໃຫ້ໂທຫາເບີ 1-888-982-3862 . (Laotian)
कोणत्याही शुल्काशिवाय भाषा सेवा प्राप्त करण्यासाठी, 1-888-982-3862 वर फोन करा. (Marathi)
Nan etal nan jikin jiban ikijen Kajin ilo an ejelok onen nan kwe, kirlök 1-888-982-3862 . (Marshallese)
Pwehn alehdi sawas en lokaia kan ni sohte pweipwei, koahlih 1-888-982-3862 . (Micronesian-Pohnpeian)
ដើម្បីទទួលបានសេវាផ្នែកភាសាដោយមិនគិតថ្លៃពីអ្នកសូមទូរសព្ទទូរស័ព្ទលេខ 1-888-982-3862 ។ (Mon-Khmer, Cambodian)
निःशुल्क भाषा सेवा प्राप्त गर्न 1-888-982-3862 मा टेलिफोन गर्नुहोस् । (Nepali)
Të kɔɔr yin wëër de thokic ke cîn wëu kɔr keek tënɔŋ yin. Ke cɔl kɔc ye kɔc kuɔny ne nɔmba 1-888-982-3862 . (Nilotic-Dinka)
For tilgang til kostnadsfri språktjenester, ring 1-888-982-3862 . (Norwegian)
Um Schprooch Services zu griege mitaus Koscht, ruff 1-888-982-3862 . (Pennsylvania Dutch)
برای دسترسی به خدمات زبان به طور رایگان، با شماره 1-888-982-3862 تماس بگیرید. (Persian-Farsi)
Aby uzyskać dostęp do bezpłatnych usług językowych proszę zadzwonić 1-888-982-3862 . (Polish)

Para acessar os serviços de idiomas sem custo para você, ligue para 1-888-982-3862 . (Portuguese)
ਤੁਹਾਡੇ ਲਈ ਬਿਨਾਂ ਕਿਸੇ ਕੀਮਤ ਵਾਲੀਆਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਦੀ ਵਰਤੋਂ ਕਰਨ ਲਈ, 1-888-982-3862 'ਤੇ ਫ਼ੋਨ ਕਰੋ। (Punjabi)
Pentru a accesa gratuit serviciile de limbă, apălați 1-888-982-3862 . (Romanian)
Для того чтобы бесплатно получить помощь переводчика, позвоните по телефону 1-888-982-3862 . (Russian)
Mo le mauaina o auaunaga tau gagana e aunoa ma se totogi, vala'au le 1-888-982-3862 . (Samoan)
Za besplatne prevodilačke usluge pozovite 1-888-982-3862 . (Serbo-Croatian)
Heeba a nasta jangirde djey wolde wola chede bo apelou lamba 1-888-982-3862 . (Sudanic-Fulfulde)
Kupata huduma za lugha bila malipo kwako, piga 1-888-982-3862 . (Swahili)
1-888-982-3862 :ܠܚܝܬܐ ܕܠܥܝܠܐ ܕܠܥܝܠܐ ܕܠܥܝܠܐ ܕܠܥܝܠܐ ܕܠܥܝܠܐ (Syriac Assyrian)
మీరు భాష సేవలను ఉచితంగా అందుకునేందుకు, 1-888-982-3862 కాల్ చేయండి. (Telugu)
หากท่านต้องการเข้าถึงการบริการทางด้านภาษาโดยไม่มีค่าใช้จ่าย โปรดโทร 1-888-982-3862 . (Thai)
Kapau 'oku ke fiema'u ta'etōtōngi 'a e ngaahi sēvesi kotoa pē he ngaahi lea kotoa, telefoni ki he 1-888-982-3862 . (Tongan)
Ren omw kopwe angei aninisin eman chon awewei (ese kamo), kopwe kori 1-888-982-3862 . (Trukese)
Sizin için ücretsiz dil hizmetlerine erişebilmek için, 1-888-982-3862 numarayı arayın. (Turkish)
Щоб отримати безкоштовний доступ до мовних послуг, задзвоніть за номером 1-888-982-3862 . (Ukrainian)
بلاقیمت زبان سے متعلقہ خدمات حاصل کرنے کے لیے، 1-888-982-3862 پر بات کریں۔ (Urdu)
Nếu quý vị muốn sử dụng miễn phí các dịch vụ ngôn ngữ, hãy gọi tới số 1-888-982-3862 . (Vietnamese)
צו צוטרייט שפראך באַדינונגען אין קיין פרייז צו איר, רופן 1-888-982-3862 . (Yiddish)
Lati wọnú awọn isẹ èdè l'ọfẹ fun ọ, pe 1-888-982-3862 . (Yoruba)

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.

Coverage Requirements such as Prior Authorization or Step Therapy may vary by state.

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.

Your plan may not cover certain drugs to treat conditions such as infertility, erectile dysfunction and weight loss. 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 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.

In accordance with state law or insurer policies, changes to drug coverage are not effective for commercial fully insured plans (including HMOs) in Arizona, Iowa, Louisiana, New York, Texas, and in most circumstances Connecticut and Vermont, and in some circumstances Washington and Tennessee, 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.

For fully insured plans (including HMOs) in Maryland, changes in prior authorization requirements for previously authorized immune globulin (human) and drugs used in the treatment of a mental disorder may not apply on reauthorization under certain conditions.

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.

In certain states, including Maine, step therapy programs do not apply to fully insured members utilizing prescription drugs for the treatment of metastatic cancer and conditions associated with 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/50ML, 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	
JOURNAVX ORAL TABLET 50 MG (<i>suzetrigine</i>)	NPB	
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	

Prescription Drug Name	Drug Tier	Drug Notes
<i>etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg</i>	G	
<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, 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 (<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
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
TOLECTIN DS ORAL CAPSULE 400 MG (<i>tolmetin sodium</i>)	NF	
<i>tolmetin sodium oral capsule 400 mg</i>	NF	
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	
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	

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	
DISKETTS ORAL TABLET SOLUBLE 40 MG (<i>methadone 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 bitartrate er oral capsule extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg</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	
<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-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
07/01/2026

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 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, 5-325 MG, 7.5-325 MG (<i>oxycodone-acetaminophen</i>)	NF	
PROLATE ORAL SOLUTION 10-300 MG/5ML (<i>oxycodone-acetaminophen</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
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 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 childrens oral tablet chewable 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	
<i>aspirin low dose oral tablet chewable 81 mg</i>	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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, 6 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		
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	
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	
tolsura oral capsule 65 mg	NF	
VFEND ORAL SUSPENSION RECONSTITUTED 40 MG/ML (voriconazole)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
VIVJOA ORAL CAPSULE THERAPY PACK 150 MG (oteseconazole)	NPSP	
voriconazole oral suspension reconstituted 40 mg/ml	G	
voriconazole oral tablet 200 mg, 50 mg	G	
ANTIMALARIALS - DRUGS TO TREAT MALARIA		
ARAKODA ORAL TABLET 100 MG (tafenoquine succinate)	NF	
atovaquone-proguanil hcl oral tablet 250-100 mg, 62.5-25 mg	G	
chloroquine phosphate oral tablet 250 mg, 500 mg	G	
COARTEM ORAL TABLET 20-120 MG (artemether-lumefantrine)	NPB	
hydroxychloroquine sulfate oral tablet 100 mg, 300 mg, 400 mg	NF	
KRINTAFEL ORAL TABLET 150 MG (tafenoquine succinate)	NF	
MALARONE ORAL TABLET 250-100 MG, 62.5-25 MG (atovaquone-proguanil hcl)	NPB	
mefloquine hcl oral tablet 250 mg	G	
primaquine phosphate oral tablet 26.3 (15 base) mg	NPB	
quinine sulfate oral capsule 324 mg	G	
SOVUNA ORAL TABLET 300 MG (hydroxychloroquine sulfate)	NF	
ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION		
abacavir sulfate oral solution 20 mg/ml	G	
abacavir sulfate oral tablet 300 mg	G	
APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 600 MG/3ML (cabotegravir)	PSP	
APTIVUS ORAL CAPSULE 250 MG (tipranavir)	NF	
atazanavir sulfate oral capsule 150 mg, 200 mg, 300 mg	G	
EDURANT ORAL TABLET 25 MG (rilpivirine hcl)	NF	
efavirenz oral tablet 600 mg	G	
EMTRIVA ORAL CAPSULE 200 MG (emtricitabine)	NPSP	
EMTRIVA ORAL SOLUTION 10 MG/ML (emtricitabine)	NPSP	
fosamprenavir calcium oral tablet 700 mg	G	
INTELENCE ORAL TABLET 100 MG, 200 MG, 25 MG (etravirine)	NF	
ISENTRESS HD ORAL TABLET 600 MG (raltegravir potassium)	PSP	
ISENTRESS ORAL PACKET 100 MG (raltegravir potassium)	PSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
<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	
VIRACEPT ORAL TABLET 250 MG, 625 MG (<i>nelfinavir mesylate</i>)	NF	
VIREAD ORAL POWDER 40 MG/GM (<i>tenofovir disoproxil fumarate</i>)	NPSP	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG, 300 MG (<i>tenofovir disoproxil fumarate</i>)	NPSP	
YEZTUGO ORAL TABLET 300 MG (<i>lenacapavir sodium</i>)	PSP	
YEZTUGO SUBCUTANEOUS SOLUTION 463.5 MG/1.5ML (<i>lenacapavir sodium</i>)	PSP	
<i>zidovudine oral capsule 100 mg</i>	G	
<i>zidovudine oral syrup 50 mg/5ml</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>zidovudine oral tablet 300 mg</i>	G	
ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION		
<i>abacavir sulfate-lamivudine oral tablet 600-300 mg</i>	G	
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG (<i>bictegravir-emtricitab-tenofovir</i>)	PSP	
CIMDUO ORAL TABLET 300-300 MG (<i>lamivudine-tenofovir</i>)	PSP	
COMPLERA ORAL TABLET 200-25-300 MG (<i>emtricitab-rilpivir-tenofovir</i>)	NF	
DELSTRIGO ORAL TABLET 100-300-300 MG (<i>doravirin-lamivudin-tenofov df</i>)	NF	
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG (<i>emtricitabine-tenofovir af</i>)	PSP	
DOVATO ORAL TABLET 50-300 MG (<i>dolutegravir-lamivudine</i>)	PSP	
<i>emtricitabine-tenofovir df oral tablet 200-300 mg</i>	CE	
EVOTAZ ORAL TABLET 300-150 MG (<i>atazanavir-cobicistat</i>)	NPSP	
GENVOYA ORAL TABLET 150-150-200-10 MG (<i>elviteg-cobic-emtricit-tenofaf</i>)	PSP	
JULUCA ORAL TABLET 50-25 MG (<i>dolutegravir-rilpivirine</i>)	NPSP	
KALETRA ORAL SOLUTION 400-100 MG/5ML (<i>lopinavir-ritonavir</i>)	NPSP	
KALETRA ORAL TABLET 100-25 MG, 200-50 MG (<i>lopinavir-ritonavir</i>)	NF	
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	G	
ODEFSEY ORAL TABLET 200-25-25 MG (<i>emtricitab-rilpivir-tenofov af</i>)	PSP	
PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG (<i>darunavir-cobicistat</i>)	NPSP	
STRIBILD ORAL TABLET 150-150-200-300 MG (<i>elviteg-cobic-emtricit-tenofdf</i>)	NF	
SYMFI ORAL TABLET 600-300-300 MG (<i>efavirenz-lamivudine-tenofovir</i>)	NPSP	
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>triumeq pd oral tablet soluble 60-5-30 mg</i>	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT (<i>zanamivir</i>)	PB	
<i>rimantadine hcl oral tablet 100 mg</i>	G	
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	
<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>cefдинir oral capsule 300 mg</i>	G	
<i>cefдинir 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	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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>)	NPB	
DIFICID ORAL TABLET 200 MG (<i>fidaxomicin</i>)	NPB	
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</i> (Ery-Tab Oral Tablet Delayed Release 250 Mg, 333 Mg, 500 Mg)	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 200 MG/5ML (<i>azithromycin</i>)	NPB	
ZITHROMAX ORAL TABLET 250 MG, 500 MG (<i>azithromycin</i>)	NPB	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	N8 (Listing does not include certain NDCs)
DARAPRIM ORAL TABLET 25 MG (<i>pyrimethamine</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	
MACRODANTIN ORAL CAPSULE 100 MG, 25 MG, 50 MG (<i>nitrofurantoin macrocrystal</i>)	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)

Prescription Drug Name	Drug Tier	Drug Notes
NEBUPENT INHALATION SOLUTION RECONSTITUTED 300 MG (<i>pentamidine isethionate</i>)	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 (<i>sulopenem etzadrox-probenecid</i>)	NPB	
<i>pyrimethamine oral tablet 25 mg</i>	G	
SIVEXTRO ORAL TABLET 200 MG (<i>tedizolid phosphate</i>)	NPB	
SOLOSEC ORAL PACKET 2 GM (<i>secnidazole</i>)	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	
URIMAR-T ORAL CAPSULE 120 MG (<i>meth-hyo-m bl-na phosph sal</i>)	NF	
VANCOCIN ORAL CAPSULE 125 MG, 250 MG (<i>vancomycin hcl</i>)	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 (<i>vancomycin hcl</i>)	NF	
XIFAXAN ORAL TABLET 200 MG (<i>rifaximin</i>)	NPB	
XIFAXAN ORAL TABLET 550 MG (<i>rifaximin</i>)	PB	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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</i>	NF	
<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, 50 mg, 75 mg</i>	G	
<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	

Prescription Drug Name	Drug Tier	Drug Notes
<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</i> (Mondoxyne NI Oral Capsule 100 Mg)	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</i> (Targadox Oral Tablet 50 Mg)	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		
<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	
<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	

Prescription Drug Name	Drug Tier	Drug Notes
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG (methotrexate sodium)	NPB	
ANTINEOPLASTIC, BCL-2 INHIBITORS		
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG (venetoclax)	NPSP	
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG (venetoclax)	NPSP	
BIOLOGIC RESPONSE MODIFIERS		
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 500 MCG/ML (ropeginterferon alfa-2b-njft)	PSP	
DAURISMO ORAL TABLET 100 MG, 25 MG (glasdegib maleate)	NF	
ERIVEDGE ORAL CAPSULE 150 MG (vismodegib)	PSP	
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG (pomalidomide)	NPSP	
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG (lenalidomide)	NF	
THALOMID ORAL CAPSULE 100 MG, 50 MG (thalidomide)	PSP	
HORMONAL ANTINEOPLASTIC AGENTS		
abiraterone acetate micronized oral tablet 125 mg	PSP	
abiraterone acetate oral tablet 250 mg	G	
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG (niraparib- abiraterone acetate)	NF	
anastrozole oral tablet 1 mg	CE	
ARIMIDEX ORAL TABLET 1 MG (anastrozole)	NPB	
AROMASIN ORAL TABLET 25 MG (exemestane)	NPB	
bicalutamide oral tablet 50 mg	G	
ELIGARD SUBCUTANEOUS KIT 22.5 MG (leuprolide acetate (3 month))	PSP	
ELIGARD SUBCUTANEOUS KIT 30 MG (leuprolide acetate (4 month))	PSP	
ELIGARD SUBCUTANEOUS KIT 45 MG (leuprolide acetate (6 month))	PSP	
ELIGARD SUBCUTANEOUS KIT 7.5 MG (leuprolide acetate)	PSP	
ERLEADA ORAL TABLET 240 MG, 60 MG (apalutamide)	PSP	
EULEXIN ORAL CAPSULE 125 MG (flutamide)	NF	
exemestane oral tablet 25 mg	CE	
FEMARA ORAL TABLET 2.5 MG (letrozole)	NPB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
LUTRATE DEPOT INTRAMUSCULAR INJECTABLE 22.5 MG (<i>leuprolide acetate (3 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	
VABRINTY SUBCUTANEOUS KIT 22.5 MG (<i>leuprolide acetate (3 month)</i>)	NF	
VABRINTY SUBCUTANEOUS KIT 30 MG (<i>leuprolide acetate (4 month)</i>)	NF	
VABRINTY SUBCUTANEOUS KIT 45 MG (<i>leuprolide acetate (6 month)</i>)	NF	
VABRINTY SUBCUTANEOUS KIT 7.5 MG (<i>leuprolide acetate</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
07/01/2026

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 (<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	
JAKAFI XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG, 22 MG, 33 MG, 44 MG, 55 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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK 200 MG (<i>ribociclib succinate</i>)	PSP	
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	

Prescription Drug Name	Drug Tier	Drug Notes
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG (<i>momelotinib dihydrochloride</i>)	NPSP	
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG (<i>pemigatinib</i>)	NF	
PHYRAGO ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG (<i>dasatinib</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	
ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG (<i>vimseltinib</i>)	NF	
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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
KOMZIFTI ORAL CAPSULE 200 MG (<i>ziftomenib</i>)	NF	
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	

Prescription Drug Name	Drug Tier	Drug Notes
OGSIVEO ORAL TABLET 100 MG, 150 MG (<i>nirogacestat hydrobromide</i>)	NF	
REVUFORJ ORAL TABLET 110 MG, 160 MG, 25 MG (<i>revumenib citrate</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	
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	
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, 80 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	

Prescription Drug Name	Drug Tier	Drug Notes
PROTECTIVE AGENTS		
LEDERLE LEUCOVORIN ORAL TABLET 5 MG (<i>leucovorin calcium</i>)	G	
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg</i>	G	
MESNEX ORAL TABLET 400 MG (<i>mesna</i>)	NPB	
TOPOISOMERASE INHIBITORS		
<i>etoposide oral capsule 50 mg</i>	G	
HYCANTIN ORAL CAPSULE 0.25 MG, 1 MG (<i>topotecan hcl</i>)	NPSP	
ONIVYDE INTRAVENOUS SUSPENSION 43 MG/10ML (<i>irinotecan hcl liposome</i>)	NPSP	
CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS		
ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>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</i>	G	
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	G	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	G	
<i>fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg</i>	G	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	G	N8 (Listing does not include certain NDCs)
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG (<i>amlodipine besy-benazepril hcl</i>)	NPB	
PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7-5 MG (<i>perindopril arg-amlodipine</i>)	NF	
<i>quinapril-hydrochlorothiazide oral tablet 20-12.5 mg, 20-25 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>trandolapril-verapamil hcl er oral tablet extended release 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg</i>	NPB	
ZESTORETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG (<i>lisinopril-hydrochlorothiazide</i>)	NF	
ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	G	
<i>enalapril maleate oral solution 1 mg/ml</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
EPANED ORAL SOLUTION 1 MG/ML (<i>enalapril maleate</i>)	NF	
<i>fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>moexipril hcl oral tablet 15 mg, 7.5 mg</i>	G	N8 (Listing does not include certain NDCs)
<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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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, 40-25 mg</i>	NF	
<i>olmesartan medoxomil-hctz oral tablet 40-12.5 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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	G	N8 (Listing does not include certain NDCs)
<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	

Prescription Drug Name	Drug Tier	Drug Notes
<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	
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)

Prescription Drug Name	Drug Tier	Drug Notes
<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)
<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 (<i>fenofibrate</i>)	NF	
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL		
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
<i>metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	G	
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 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, 12.5 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	
<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, 34 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
07/01/2026

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	
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	
INZIRQO ORAL SUSPENSION RECONSTITUTED 10 MG/ML (<i>hydrochlorothiazide</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
KEVEYIS ORAL TABLET 50 MG (<i>dichlorphenamide</i>)	NPSP	
<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 40 MG (<i>toremide</i>)	NF	
<i>spironolactone-hctz oral tablet 25-25 mg</i>	G	
THALITONE ORAL TABLET 15 MG (<i>chlorthalidone</i>)	NF	
<i>toremide 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 INJECTION SOLUTION 1 MG/ML (<i>epinephrine</i>)	NF	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
<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)
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	
<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	
TRYNGOLZA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML (<i>olezarsen sodium</i>)	NF	
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	
NITRATES - DRUGS TO TREAT HEART CONDITIONS		
<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>	G	
<i>nitroglycerin</i> (Nitro-Bid Transdermal Ointment 2 %)	G	

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

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

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, 80 MCG (<i>treprostinil</i>)	PSP	
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 112 X 32MCG & 112 X 64MCG, 112 X 48MCG & 112 X 64MCG, 16 MCG, 32 MCG, 48 MCG, 64 MCG, 80 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	

Prescription Drug Name	Drug Tier	Drug Notes
AMYOTROPHIC LATERAL SCLEROSIS (ALS) - DRUGS TO TREAT ALS		
RADICAVA ORS ORAL SUSPENSION 105 MG/5ML (<i>edaravone</i>)	PSP	
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	N8 (Listing does not include certain NDCs)
<i>lorazepam injection solution 2 mg/ml</i>	G	N8 (Listing does not include certain NDCs)
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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 2 MG (<i>alprazolam</i>)	NF	
ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS		
<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	
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)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK 28 MG/DEVICE (<i>esketamine hcl</i>)	PB	
<i>tranylcypromine sulfate oral tablet 10 mg</i>	G	
<i>trazodone hcl oral tablet 100 mg, 150 mg, 50 mg</i>	G	
<i>trazodone hcl oral tablet 300 mg</i>	G	N8 (Listing does not include certain NDCs)
<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	
<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	

Prescription Drug Name	Drug Tier	Drug Notes
<i>bromocriptine mesylate oral capsule 5 mg</i>	G	
<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	
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	
ONAPGO SUBCUTANEOUS SOLUTION CARTRIDGE 98 MG/20ML (<i>apomorphine hcl</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	

Prescription Drug Name	Drug Tier	Drug Notes
<i>selegiline hcl oral capsule 5 mg</i>	G	
<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 ASIMTUFI 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 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>lumateperone tosylate</i>)	NPB	
<i>chlorpromazine hcl injection solution 25 mg/ml, 50 mg/2ml</i>	NPB	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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</i> (<i>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, 2 mg, 20 mg, 5 mg</i>	G	
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML, 1560 MG/5ML (<i>paliperidone palmitate</i>)	PB	
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 (<i>paliperidone palmitate</i>)	PB	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

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

Prescription Drug Name	Drug Tier	Drug Notes
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 0.5 MG, 0.75 MG, 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	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG (<i>olanzapine</i>)	NPB	
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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
<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	N8 (Listing does not include certain NDCs)
<i>divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg</i>	G	
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	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
<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	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg</i>	G	
<i>levetiracetam oral solution 500 mg/5ml</i>	G	
<i>levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg</i>	G	
<i>levetiracetam oral tablet disintegrating soluble 250 mg, 500 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	
<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 20 mg/5ml</i>	G	N8 (Listing does not include certain NDCs)
<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	
SABRIL ORAL PACKET 500 MG (<i>vigabatrin</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
<i>vigabatrin oral packet 500 mg</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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 er(diffus) oral tablet extended release 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</i> (Zenzedi Oral Tablet 10 Mg, 15 Mg, 2.5 Mg, 20 Mg, 30 Mg, 5 Mg, 7.5 Mg)	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

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	
TONMYA SUBLINGUAL TABLET SUBLINGUAL 2.8 MG (<i>cyclobenzaprine hcl (fibromy)</i>)	NF	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg</i>	G	
<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 (ergotamine tartrate)	NPB	
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	NF	
MIGERGOT RECTAL SUPPOSITORY 2-100 MG (ergotamine-caffeine)	NF	
TRUDHESA NASAL AEROSOL SOLUTION 0.725 MG/ACT (dihydroergotamine mesylate hfa)	NF	
MIGRAINE - MISCELLANEOUS - DRUGS TO TREAT SEVERE HEADACHES		
NURTEC ORAL TABLET DISPERSIBLE 75 MG (rimegepant sulfate)	PB	
QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG (atogepant)	PB	
UBRELVY ORAL TABLET 100 MG, 50 MG (ubrogepant)	PB	
ZAVZPRET NASAL SOLUTION 10 MG/ACT (zavegepant hcl)	NF	
MIGRAINE - MONOCLONAL ANTIBODIES - DRUGS TO TREAT SEVERE HEADACHES		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML (erenumab-aooe)	NF	
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 225 MG/1.5ML (fremanezumab-vfrm)	PB	
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 225 MG/1.5ML (fremanezumab-vfrm)	PB	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (galcanezumab-gnlm)	PB	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML (galcanezumab-gnlm)	PB	

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 subcutaneous solution 6 mg/0.5ml</i>	G	
<i>sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml</i>	G	
<i>sumatriptan-naproxen sodium oral tablet 85-500 mg</i>	NF	
SYMBRAVO ORAL TABLET 20-10 MG (<i>meloxicam-rizatriptan</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 (Zomig Oral Tablet 2.5 Mg, 5 Mg)</i>	NF	
MISCELLANEOUS		
DAYBUE ORAL SOLUTION 200 MG/ML (<i>trofinetide</i>)	NPSP	
DAYBUE STIX ORAL PACKET 5000 MG, 6000 MG, 8000 MG (<i>trofinetide</i>)	NPSP	
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML (<i>satralizumab-mwge</i>)	PSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
EVRYSDI ORAL SOLUTION RECONSTITUTED 0.75 MG/ML (<i>risdiplam</i>)	NPSP	
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>zilucoplan 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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML (<i>interferon beta-1a</i>)	PSP	
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>)	NPSP	
<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 (Glatopa Subcutaneous Solution Prefilled Syringe 20 Mg/ML, 40 Mg/ML)</i>	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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML (<i>peginterferon beta-1a</i>)	NPSP	
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	
TYRUKO INTRAVENOUS CONCENTRATE 300 MG/15ML (<i>natalizumab-sztn</i>)	PSP	
TYSABRI INTRAVENOUS CONCENTRATE 300 MG/15ML (<i>natalizumab</i>)	NF	
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	

Prescription Drug Name	Drug Tier	Drug Notes
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG 0.92MG(21) (<i>ozanimod hcl</i>)	PSP	
MUSCULOSKELETAL THERAPY AGENTS		
AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR 15 MG, 30 MG (<i>cyclobenzaprine hcl</i>)	NF	
<i>baclofen oral solution 5 mg/5ml</i>	NPB	
<i>baclofen oral suspension 25 mg/5ml</i>	NF	
<i>baclofen oral tablet 10 mg, 20 mg</i>	G	N8 (Listing does not include certain NDCs)
<i>baclofen oral tablet 5 mg</i>	G	
<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, 8 mg</i>	G	
<i>tizanidine hcl oral tablet 2 mg, 4 mg</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
ZANAFLEX ORAL CAPSULE 8 MG (<i>tizanidine hcl</i>)	NPB	
ZANAFLEX ORAL TABLET 4 MG (<i>tizanidine hcl</i>)	NPB	
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>	G	N8 (Listing does not include certain NDCs)
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	N8 (Listing does not include certain NDCs)
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	
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 (pmdd) 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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

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, 21 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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
NICODERM CQ TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR, 7 MG/24HR (<i>nicotine</i>)	CE	
NICORELIEF MOUTH/THROAT GUM 2 MG (<i>nicotine polacrilex</i>)	CE	
NICORETTE MINI MOUTH/THROAT LOZENGE 2 MG, 4 MG (<i>nicotine polacrilex</i>)	CE	
NICORETTE MOUTH/THROAT GUM 2 MG, 4 MG (<i>nicotine polacrilex</i>)	CE	
NICORETTE MOUTH/THROAT LOZENGE 2 MG, 4 MG (<i>nicotine polacrilex</i>)	CE	
NICORETTE STARTER KIT MOUTH/THROAT GUM 2 MG, 4 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</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 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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
AZMIRO INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 200 MG/ML (<i>testosterone cypionate</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 %, 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%)</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/0.5ML, 50 MG/0.5ML, 75 MG/0.5ML (<i>testosterone enanthate</i>)	NPB	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
<i>sitaglipt base-metform hcl er oral tablet extended release 24 hour 100-1000 mg, 50-1000 mg, 50-500 mg</i>	NF	
<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-linaglip-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	
<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>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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
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 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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
MERILOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin aspart-szjj</i>)	NF	
MERILOG SUBCUTANEOUS SOLUTION 100 UNIT/ML (<i>insulin aspart-szjj</i>)	NF	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	N8 (Listing does not include certain NDCs)
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR COMBINATIONS		
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 base-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 oral tablet 10 mg, 5 mg</i>	NF	
FARXIGA ORAL TABLET 10 MG, 5 MG (<i>dapagliflozin</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, 15 mg, 5 mg</i>	G	
<i>glipizide oral tablet 2.5 mg</i>	NF	
<i>glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg</i>	G	N8 (Listing does not include certain NDCs)
ANTIOBESITY		
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)
FOUNDAYO ORAL TABLET 0.8 MG, 14.5 MG, 17.2 MG, 2.5 MG, 5.5 MG, 9 MG (<i>orforglipron-weight management</i>)	NPB	
<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>)	NPB	
WEGOVY HD SUBCUTANEOUS SOLUTION AUTO-INJECTOR 7.2 MG/0.75ML (<i>semaglutide-weight management</i>)	PB	
WEGOVY ORAL TABLET 1.5 MG, 25 MG, 4 MG, 9 MG (<i>semaglutide-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 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/0.6ML, 12.5 MG/0.6ML, 15 MG/0.6ML, 2.5 MG/0.6ML, 5 MG/0.6ML, 7.5 MG/0.6ML (<i>tirzepatide-weight management</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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
CALCIUM REGULATORS, BISPSPHONATES - 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		
BILPREVDA SUBCUTANEOUS SOLUTION 120 MG/1.7ML (<i>denosumab-nxxp</i>)	NF	
BOMYNTRA SUBCUTANEOUS SOLUTION 120 MG/1.7ML (<i>denosumab-bnht</i>)	NF	
BOMYNTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/1.7ML (<i>denosumab-bnht</i>)	NF	
<i>calcitonin (salmon) nasal solution 200 unit/act</i>	G	
JUBBONTI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML (<i>denosumab-bbdz</i>)	NF	
MIACALCIN INJECTION SOLUTION 200 UNIT/ML (<i>calcitonin (salmon)</i>)	NF	
OSENVELT SUBCUTANEOUS SOLUTION 120 MG/1.7ML (<i>denosumab-bmwo</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
OSPOMYV SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML (<i>denosumab-dssb</i>)	PSP	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML (<i>denosumab</i>)	NF	
STOBOCLO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML (<i>denosumab-bmwo</i>)	PSP	
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7ML (<i>denosumab</i>)	NF	
CALCIUM REGULATORS, PARATHYROID HORMONES		
BONSITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 560 MCG/2.24ML (<i>teriparatide</i>)	PSP	
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 560 MCG/2.24ML (<i>teriparatide</i>)	NF	
<i>teriparatide subcutaneous solution pen-injector 560 mcg/2.24ml</i>	PSP	
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	
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	
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT 45 MG (<i>leuprolide acetate (6 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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
CONTRACEPTIVES - PRODUCTS FOR BIRTH CONTROL		
<i>levonorgestrel-ethinyl estrad (Afirmelle Oral Tablet 0.1-20 Mg-Mcg)</i>	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 (Altavera Oral Tablet 0.15-30 Mg-Mcg)</i>	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 (Amethyst Oral Tablet 90-20 Mcg)</i>	CE	
ANNOVERA VAGINAL RING 0.013-0.15 MG/24HR (<i>segesterone-ethinyl estradiol</i>)	CE	
<i>desogestrel-ethinyl estradiol (Apri Oral Tablet 0.15-30 Mg-Mcg)</i>	CE	
ARANELLE ORAL TABLET 0.5/1/0.5-35 MG-MCG (<i>norethin-eth estrad triphasic</i>)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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 Oral Tablet 0.3-30 Mg-Mcg)	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	
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</i>	CE	
<i>levonorgestrel-ethinyl estrad</i> (Dolishale Oral Tablet 90-20 Mcg)	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</i> (Elinest Oral Tablet 0.3-30 Mg-Mcg)	CE	
ELLA ORAL TABLET 30 MG (<i>ulipristal acetate</i>)	CE	
<i>etonogestrel-ethinyl estradiol</i> (Eluryng Vaginal Ring 0.12-0.015 Mg/24Hr)	CE	
<i>norethindrone</i> (Emzahh Oral Tablet 0.35 Mg)	CE	
<i>etonogestrel-ethinyl estradiol</i> (Enilloring Vaginal Ring 0.12-0.015 Mg/24Hr)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>desogestrel-ethinyl estradiol</i> (Enskyce Oral Tablet 0.15-30 Mg-Mcg)	CE	
<i>norethindrone</i> (Errin Oral Tablet 0.35 Mg)	CE	
<i>norgestimate-eth estradiol</i> (Estarylla Oral Tablet 0.25-35 Mg-Mcg)	CE	
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr</i>	CE	
<i>levonorgestrel-ethinyl estrad</i> (Falmina Oral Tablet 0.1-20 Mg-Mcg)	CE	
FC2 FEMALE CONDOM (<i>condoms - female</i>)	CE	
<i>norethin ace-eth estrad-fe</i> (Feirza 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
<i>norethin ace-eth estrad-fe</i> (Feirza 1/20 Oral Tablet 1-20 Mg-Mcg)	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</i> (Finzala Oral Tablet Chewable 1-20 Mg-Mcg(24))	CE	
<i>norethin ace-eth estrad-fe</i> (Gemmily Oral Capsule 1-20 Mg-Mcg(24))	CE	
<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>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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
<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>levonorgestrel-ethinyl estrad</i> (Lessina Oral Tablet 0.1-20 Mg-Mcg)	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month

07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
<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>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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml</i>	CE	
<i>norethindrone (Meleya Oral Tablet 0.35 Mg)</i>	CE	
<i>norethin ace-eth estrad-fe (Mibelas 24 Fe Oral Tablet Chewable 1-20 Mg-Mcg(24))</i>	CE	
<i>norethindrone acet-ethinyl est (Microgestin 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)</i>	CE	
<i>norethindrone acet-ethinyl est (Microgestin 1/20 Oral Tablet 1-20 Mg-Mcg)</i>	CE	
<i>norethin ace-eth estrad-fe (Microgestin Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)</i>	CE	
<i>norethin ace-eth estrad-fe (Microgestin Fe 1/20 Oral Tablet 1-20 Mg-Mcg)</i>	CE	
<i>norgestimate-eth estradiol (Mili Oral Tablet 0.25-35 Mg-Mcg)</i>	CE	
<i>levonorgest-eth estradiol-iron (Minzoya Oral Tablet 0.1-20 Mg-Mcg(21))</i>	CE	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 21 MCG/DAY (<i>levonorgestrel</i>)	CE	
<i>norgestimate-eth estradiol (Mono-Linyah Oral Tablet 0.25-35 Mg-Mcg)</i>	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 (Necon 0.5/35 (28) Oral Tablet 0.5-35 Mg-Mcg)</i>	CE	
<i>norethindrone-eth estradiol (Necon 1/35 (28) Oral Tablet 1-35 Mg-Mcg)</i>	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 (Nikki Oral Tablet 3-0.02 Mg)</i>	CE	
<i>norethindrone (Nora-Be Oral Tablet 0.35 Mg)</i>	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 chewable 1-20 mg-mcg(24)</i>	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg</i>	CE	
<i>norethindrone oral tablet 0.35 mg</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 (Norlyda Oral Tablet 0.35 Mg)</i>	CE	
<i>norethindrone (Norlyroc Oral Tablet 0.35 Mg)</i>	CE	
<i>norethindrone-eth estradiol (Nortrel 0.5/35 (28) Oral Tablet 0.5-35 Mg-Mcg)</i>	CE	
<i>norethindrone-eth estradiol (Nortrel 1/35 (21) Oral Tablet 1-35 Mg-Mcg)</i>	CE	
<i>norethindrone-eth estradiol (Nortrel 1/35 (28) Oral Tablet 1-35 Mg-Mcg)</i>	CE	
<i>norethin-eth estrad triphasic (Nortrel 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)</i>	CE	
NUVARING VAGINAL RING 0.12-0.015 MG/24HR (<i>etonogestrel-ethinyl estradiol</i>)	NF	
<i>norethindrone-eth estradiol (Nylia 1/35 Oral Tablet 1-35 Mg-Mcg)</i>	CE	
<i>norethin-eth estrad triphasic (Nylia 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)</i>	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 (Orquidea Oral Tablet 0.35 Mg)</i>	CE	
<i>levonorgestrel-ethinyl estrad (Orsythia Oral Tablet 0.1-20 Mg-Mcg)</i>	CE	
PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE (<i>copper</i>)	CE	
<i>norethindrone-eth estradiol (Philith Oral Tablet 0.4-35 Mg-Mcg)</i>	CE	
<i>desogestrel-ethinyl estradiol (Pimtrea Oral Tablet 0.15-0.02/0.01 Mg (21/5))</i>	CE	
<i>norethin-eth estrad triphasic (Pirmella 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)</i>	CE	
PLAN B ONE-STEP ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
<i>levonorgestrel-ethinyl estrad (Portia-28 Oral Tablet 0.15-30 Mg-Mcg)</i>	CE	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
SHEWISE ORAL TABLET 1.5 MG (<i>levonorgestrel</i>)	CE	
<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	

Prescription Drug Name	Drug Tier	Drug Notes
<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	
<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 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	
VALTYA 1/50 ORAL TABLET 1-50 MG-MCG (<i>ethynodiol diac-eth estradiol</i>)	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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>viorele oral tablet 0.15-0.02/0.01 mg (21/5)</i>	CE	
<i>desogestrel-ethinyl estradiol (Volnea Oral Tablet 0.15-0.02/0.01 Mg (21/5))</i>	CE	
<i>norethindrone-eth estradiol (Vyfemla Oral Tablet 0.4-35 Mg-Mcg)</i>	CE	
<i>norgestimate-eth estradiol (Vylibra Oral Tablet 0.25-35 Mg-Mcg)</i>	CE	
<i>norethindrone-eth estradiol (Wera Oral Tablet 0.5-35 Mg-Mcg)</i>	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	
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 (Wymzya Fe Oral Tablet Chewable 0.4-35 Mg-Mcg)</i>	CE	
<i>norethindron-ethinyl estrad-fe (Xarah Fe Oral Tablet 1-20/1-30/1-35 Mg-Mcg)</i>	CE	
<i>norethin-eth estradiol-fe (Xelria Fe Oral Tablet Chewable 0.4-35 Mg-Mcg)</i>	CE	
<i>norelgestromin-eth estradiol (Xulane Transdermal Patch Weekly 150-35 Mcg/24Hr)</i>	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 (Zafemy Transdermal Patch Weekly 150-35 Mcg/24Hr)</i>	CE	
<i>ethynodiol diac-eth estradiol (Zovia 1/35 (28) Oral Tablet 1-35 Mg-Mcg)</i>	CE	

Prescription Drug Name	Drug Tier	Drug Notes
<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		
ACCU-CHEK AVIVA PLUS IN VITRO STRIP (<i>glucose blood</i>)	PB	
ACCU-CHEK FASTCLIX LANCET KIT (<i>lancets misc.</i>)	PB	
ACCU-CHEK FASTCLIX LANCETS (<i>lancets</i>)	PB	
ACCU-CHEK GUIDE TEST IN VITRO STRIP (<i>glucose blood</i>)	PB	
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	
ACCUTREND GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
ADVANCE INTUITION TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ADVANCE MICRO-DRAW TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ADVOCATE REDI-CODE IN VITRO STRIP (<i>glucose blood</i>)	NF	
ADVOCATE REDI-CODE+ TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ADVOCATE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
AGAMATRIX AMP TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
AGAMATRIX JAZZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
AGAMATRIX PRESTO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE 3 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE 4 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE II CHECK IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE II IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE PLATINUM IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE PRISM MULTI TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
ASSURE PRO 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
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML (<i>insulin syringe/needle u-500</i>)	PB	
BD PEN NEEDLE MICRO ULTRAFINE 32G X 6 MM (<i>insulin pen needle</i>)	PB	
BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM (<i>insulin pen needle</i>)	PB	
BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM (<i>insulin pen needle</i>)	PB	
BD PEN NEEDLE NANO ULTRAFINE 32G X 4 MM (<i>insulin pen needle</i>)	PB	
BD PEN NEEDLE ORIG ULTRAFINE 29G X 12.7MM (<i>insulin pen needle</i>)	PB	
BD PEN NEEDLE SHORT ULTRAFINE 31G X 8 MM (<i>insulin pen needle</i>)	PB	
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.3 ML (<i>insulin syringe-needle u-100</i>)	PB	
<i>blood glucose test in vitro strip</i>	NF	
CARESENS N GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CARESENS S GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CARETOUCH TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHOICE MICRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHOICE NO CODING IN VITRO STRIP (<i>glucose blood</i>)	NF	
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP (<i>glucose blood</i>)	NF	
CONTOUR NEXT 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	

Prescription Drug Name	Drug Tier	Drug Notes
CVS ADVANCED GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
D-CARE BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</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	
DIATHRIVE GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
DUO-CARE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>easy plus ii glucose test in vitro strip</i>	NF	
EASY STEP TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>easy talk blood glucose test in vitro strip</i>	NF	
<i>easy trak blood glucose test in vitro strip</i>	NF	
EASYGLUCO IN VITRO STRIP (<i>glucose blood</i>)	NF	
EASYMAX 15 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EASYMAX TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EASYPRO BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EASYPRO PLUS IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>element compact test in vitro strip</i>	NF	
ELEMENT TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EMBECTA AUTOSHIELD DUO 30G X 5 MM (<i>insulin pen needle</i>)	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 (<i>insulin syringe-needle u-100</i>)	PB	
EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML (<i>insulin syringe/needle u-500</i>)	PB	
EMBECTA PEN NEEDLE NANO 32G X 4 MM (<i>insulin pen needle</i>)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
EMBECTA PEN NEEDLE ULTRAFINE 29G X 12.7MM , 31G X 5 MM , 31G X 8 MM , 32G X 6 MM (<i>insulin pen needle</i>)	PB	
EMBRACE BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EMBRACE EVO BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EMBRACE PRO GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EMBRACE TALK GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
EMBRACE WAVE BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
ENLITE GLUCOSE SENSOR (<i>continuous glucose sensor</i>)	NF	
<i>eq blood glucose test in vitro strip</i>	NF	
EVERSENSE 365 SENSOR/HOLDER (<i>continuous glucose sensor</i>)	NF	
EVERSENSE 365 SMART TRANSMIT (<i>continuous glucose transmitter</i>)	NF	
EVERSENSE SENSOR/HOLDER (<i>continuous glucose sensor</i>)	NF	
EVERSENSE SMART TRANSMITTER (<i>continuous glucose transmitter</i>)	NF	
EVOLUTION AUTOCODE IN VITRO STRIP (<i>glucose blood</i>)	NF	
FIFTY50 GLUCOSE TEST 2.0 IN VITRO STRIP (<i>glucose blood</i>)	NF	
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 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA GD20 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA GD50 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA TN'G ADVANCE PRO IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA TN'G/TN'G VOICE IN VITRO STRIP (<i>glucose blood</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
FORA V10 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORA V30A BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORACARE GD40 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORACARE PREMIUM V10 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FORACARE TEST N GO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FREESTYLE INSULINX TEST IN VITRO STRIP (<i>glucose blood</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 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 LITE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
FREESTYLE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>ge100 blood glucose test in vitro strip</i>	NF	
GENULTIMATE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
<i>ght test in vitro strip</i>	NF	
GLUCO PERFECT 3 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD EXPRESSION TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD SHINE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD VITAL TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCARD X-SENSOR IN VITRO STRIP (<i>glucose blood</i>)	NF	
GLUCOCOM TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
GLUCONAVII BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>glucose meter test in vitro strip</i>	NF	
<i>gnp easy touch glucose test in vitro strip</i>	NF	
GUARDIAN 4 GLUCOSE SENSOR (<i>continuous glucose sensor</i>)	NF	
GUARDIAN 4 TRANSMITTER (<i>continuous glucose transmitter</i>)	NF	
GUARDIAN SENSOR (3) (<i>continuous glucose sensor</i>)	NF	
<i>guardian sensor 3</i>	NF	
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</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	
INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
INFINITY VOICE IN VITRO STRIP (<i>glucose blood</i>)	NF	
KETO-DIASTIX IN VITRO STRIP (<i>urine glucose-ketones test</i>)	NPB	
KETOSTIX IN VITRO STRIP (<i>acetone (urine) test</i>)	NPB	
MEIJER TRUETEST TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
MEIJER TRUETRACK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
MICRODOT TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
MINIMED INSTINCT GLUC SENSOR (<i>continuous glucose sensor</i>)	NF	
MYGLUCOHEALTH TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
NEUTEK 2TEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
NOVA MAX GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month

07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
ON CALL EXPRESS BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</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 ULTRA BLUE TEST 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 IN VITRO STRIP (<i>glucose blood</i>)	NF	
OPTIUMEZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
PHARMACIST CHOICE AUTOCODE IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>pharmacist choice no coding in vitro strip</i>	NF	
POCKETCHEM EZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST (<i>glucose blood</i>)	NF	
<i>pro voice v8/v9 glucose in vitro strip</i>	NF	
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP (<i>glucose blood</i>)	NF	
PTS PANELS EGLU TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
QUICKTEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
QUINTET AC BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
QUINTET BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
REFUAH PLUS BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
RELION CONFIRM/MICRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
RELION TRUE METRIX TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	PB	
RIGHTEST GS100 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
RIGHTEST GS300 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
RIGHTEST GS550 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NF	
SIMPLERA SENSOR (<i>continuous glucose sensor</i>)	NF	
SIMPLERA SYNC SENSOR (<i>continuous glucose sensor</i>)	NF	
SIMPLERA SYSTEM (<i>continuous glucose sensor</i>)	NF	
SMARTEST BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
SOLUS V2 TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
SUPREME TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>true focus blood glucose strip in vitro strip</i>	NF	
TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	PB	
TRUETEST TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
TRUETRACK TEST IN VITRO STRIP (<i>glucose blood</i>)	NF	
TWIIST REFILL KIT KIT (<i>insulin disposable pump</i>)	PB	
TWIIST REFILL KIT/INFUSION SET KIT (<i>insulin disposable pump</i>)	PB	
TWIIST STARTER KIT KIT (<i>insulin disposable pump</i>)	PB	
UNISTRIPI1 GENERIC IN VITRO STRIP (<i>glucose blood</i>)	NF	
<i>verasens blood glucose test in vitro strip</i>	NF	
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 TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NF	
ENDOMETRIOSIS		
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	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>cetrorelix acetate</i>)	NF	
<i>chorionic gonadotropin intramuscular solution reconstituted 10000 unit</i>	NF	
FOLLISTIM AQ SUBCUTANEOUS SOLUTION 300 UNT/0.36ML, 600 UNT/0.72ML, 900 UNT/1.08ML (<i>follitropin beta</i>)	PSP	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>ganirelix acetate</i> (Fyremadel Subcutaneous Solution Prefilled Syringe 250 Mcg/0.5ml)	NF	
<i>ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous</i>	NF	
<i>ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous</i>	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>)	PSP	
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	

Prescription Drug Name	Drug Tier	Drug Notes
EMFLAZA ORAL TABLET 18 MG, 30 MG, 36 MG, 6 MG (deflazacort)	NF	
<i>fludrocortisone acetate oral tablet 0.1 mg</i>	G	
HEMADY ORAL TABLET 20 MG (dexamethasone)	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	
KHINDIVI ORAL SOLUTION 1 MG/ML (<i>hydrocortisone</i>)	NF	
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	
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, 5 mg/5ml</i>	G	
PREDNISONONE 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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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 MINISUBCUTANEOUS 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 FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 5 MG/1.5ML (<i>somatropin</i>)	PSP	
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/2ML (<i>somatropin</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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		
AQNEURSA ORAL PACKET 1 GM (<i>levacetylleucine</i>)	NF	
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		
ELFABRIO INTRAVENOUS SOLUTION 20 MG/10ML, 5 MG/2.5ML (<i>pegunigalsidase alfa-iwxj</i>)	PSP	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
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	
LYNKUET ORAL CAPSULE 60 MG (<i>elinzanetant</i>)	NPB	
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-medroxyprogest 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-medroxyprogest 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> (Yuvaferm Vaginal Tablet 10 Mcg)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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>)	NPB	
SAMSCA ORAL TABLET 15 MG, 30 MG (<i>tolvaptan (hyponatremia)</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	
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 200 & 50 MG, 50 MG (<i>alpelisib</i>)	NF	
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 25 MG, 75 MG (<i>diazoxide choline</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	
RENVELA ORAL PACKET 0.8 GM, 2.4 GM (<i>sevelamer carbonate</i>)	NF	
RENVELA 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	

Prescription Drug Name	Drug Tier	Drug Notes
<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</i> (Kionex Combination Suspension 15 Gm/60ML)	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</i> (Sps (Sodium Polystyrene Sulf) Combination Suspension 15 Gm/60ML)	G	
SPS (SODIUM POLYSTYRENE SULF) RECTAL SUSPENSION 30 GM/120ML (<i>sodium polystyrene sulfonate</i>)	G	
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		
ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG (<i>thyroid</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
CYTOMEL ORAL TABLET 25 MCG, 5 MCG, 50 MCG (<i>liothyronine 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	
NP THYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG (<i>thyroid</i>)	NF	
<i>propylthiouracil oral tablet 50 mg</i>	G	
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG (<i>thyroid</i>)	NF	
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	
UREA CYCLE DISORDER - DRUGS TO TREAT UREA CYCLE DISORDER		
BUPHENYL ORAL POWDER 3 GM/TSP (<i>sodium phenylbutyrate</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
<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	
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)
GLYCATE 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	

Prescription Drug Name	Drug Tier	Drug Notes
NULEV ORAL TABLET DISPERSIBLE 0.125 MG (<i>hyoscyamine sulfate</i>)	NPB	
<i>oscimin oral tablet 0.125 mg</i>	NPB	
<i>oscimin sublingual tablet sublingual 0.125 mg</i>	NPB	
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	
<i>gutstor oral capsule</i>	NF	
LACTEROL ORAL CAPSULE (<i>probiotic product</i>)	NF	
<i>lactovive oral capsule</i>	NF	
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>novora oral capsule</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 mg</i>	G	
<i>aprepitant oral capsule therapy pack 80 & 125 mg</i>	G	
BONJESTA ORAL TABLET EXTENDED RELEASE 20-20 MG (<i>doxylamine-pyridoxine</i>)	NPB	
<i>prochlorperazine</i> (Compro Rectal Suppository 25 Mg)	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	

Prescription Drug Name	Drug Tier	Drug Notes
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 THERAPY PACK 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>meclizine hcl oral tablet chewable 25 mg</i>	NF	
<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	
NEREUS ORAL CAPSULE 85 MG (<i>tradipitant</i>)	NF	
<i>ondansetron hcl +rfid injection solution prefilled syringe 4 mg/2ml</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	
POSFREA INTRAVENOUS SOLUTION 0.25 MG/5ML (<i>palonosetron hcl</i>)	NF	
<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</i> (Promethegan Rectal Suppository 12.5 Mg, 25 Mg)	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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
<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	
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	
CORTENEMA RECTAL ENEMA 100 MG/60ML (<i>hydrocortisone</i>)	NPB	
CORTIFOAM EXTERNAL FOAM 10 % (<i>hydrocortisone acetate</i>)	PB	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
<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>)	NF	
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION		
AMITIZA ORAL CAPSULE 24 MCG, 8 MCG (<i>lubiprostone</i>)	NF	
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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
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>sucrafate</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>)	NF	
LIVMARLI ORAL SOLUTION 19 MG/ML, 9.5 MG/ML (<i>maralixibat chloride</i>)	NPSP	
LIVMARLI ORAL TABLET 10 MG, 15 MG, 20 MG, 30 MG (<i>maralixibat chloride</i>)	NF	
<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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
<i>lansoprazole oral capsule delayed release 15 mg</i>	G	
<i>lansoprazole oral capsule delayed release 30 mg</i>	G	N8 (Listing does not include certain NDCs)
<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	

Prescription Drug Name	Drug Tier	Drug Notes
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</i> (Procto-Med Hc External Cream 2.5 %)	G	
<i>hydrocortisone</i> (Proctozone-Hc External Cream 2.5 %)	G	
RECTAL, MISCELLANEOUS		
BARRIGEL RECTAL GEL 20 MG/ML (<i>hyaluronic acid (rectal)</i>)	NF	
ULCER THERAPY COMBINATIONS		
<i>amoxicill-clarithro-lansopraz oral therapy pack 500 & 500 & 30 mg</i>	G	
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	

Prescription Drug Name	Drug Tier	Drug Notes
<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	
<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)
TEZRULY ORAL SOLUTION 1 MG/ML (<i>terazosin hcl</i>)	NF	
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	
PHEXX 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)

Prescription Drug Name	Drug Tier	Drug Notes
<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)
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	
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 1500-1002 mg/15ml, 3000-2004 mg/30ml, 500-334 mg/5ml</i>	G	
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>	NF	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
<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>trospium chloride er oral capsule extended release 24 hour 60 mg</i>	G	
<i>trospium 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	

Prescription Drug Name	Drug Tier	Drug Notes
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)
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 UNIT/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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
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 4 MG/0.4ML (<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	

Prescription Drug Name	Drug Tier	Drug Notes
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim-aafi</i>)	PSP	
NYPOZI INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim-txid</i>)	NF	
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>eflapregastim-xnst</i>)	NF	
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	
ALTUVIIIIO INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>antihem fact fc-vwf-xten-ehl</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
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-rfviiiic)</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	
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT (<i>antihemophilic factor</i>)	NPSP	
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	
<i>obizur intravenous solution reconstituted 500 unit</i>	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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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>)	NPB	
<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	
<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 sulfite</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	
XROMI ORAL SOLUTION 100 MG/ML (<i>hydroxyurea</i>)	NF	
THROMBOCYTOPENIA AGENTS - DRUGS TO TREAT PLATELET DISORDERS		
ALVAIZ ORAL TABLET 18 MG, 36 MG, 54 MG, 9 MG (<i>eltrombopag choline</i>)	PSP	
DOPTELET ORAL TABLET 20 MG (<i>avatrombopag maleate</i>)	PSP	
DOPTELET 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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
RAGWITEK SUBLINGUAL TABLET SUBLINGUAL 12 AMB A 1-U (<i>short ragweed pollen ext</i>)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
<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-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 (<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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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 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	
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 (<i>abatacept</i>)	PSP	
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML, 87.5 MG/0.7ML (<i>abatacept</i>)	NPSP	
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-aauz</i>)	NF	
OTULFI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab-aauz</i>)	NF	
PYZCHIVA SUBCUTANEOUS SOLUTION 45 MG/0.5ML (<i>ustekinumab-ttwe</i>)	NF	
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>)	NF	
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	

Prescription Drug Name	Drug Tier	Drug Notes
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 50 MG/0.5ML (<i>golimumab</i>)	NF	
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>)	NF	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab</i>)	NF	
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-aauz 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 45 mg/0.5ml</i>	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
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>)	NPSP	
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-aqv</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	

Prescription Drug Name	Drug Tier	Drug Notes
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS) - DRUGS TO TREAT RHEUMATOID ARTHRITIS		
ARAVA ORAL TABLET 10 MG, 20 MG (<i>leflunomide</i>)	NPB	
<i>auranofin oral capsule 3 mg</i>	NF	
<i>hydroxychloroquine sulfate oral tablet 200 mg</i>	G	N8 (Listing does not include certain NDCs)
<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	
ORLADEYO ORAL PACKET 108 MG, 132 MG, 72 MG, 96 MG (<i>berotralstat hcl</i>)	PSP	
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED 2100 UNIT (<i>c1 esterase inhibitor (recomb)</i>)	PSP	
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML (<i>lanadelumab-flyo</i>)	PSP	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
HYPERRHO MINI-DOSE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 250 UNIT (<i>rho d immune globulin</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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE 1500 UNIT/2ML (<i>rho d immune globulin</i>)	NPSP	
WINRHO SDF INJECTION SOLUTION 1500 UNIT/1.3ML, 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 (Azasan Oral Tablet 100 Mg, 75 Mg)</i>	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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
<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	
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		
EFFER-K ORAL TABLET EFFERVESCENT 25 MEQ (<i>potassium bicarbonate</i>)	G	

Prescription Drug Name	Drug Tier	Drug Notes
<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	
<i>potassium chloride</i> (Klor-Con Oral Packet 20 Meq)	G	
<i>potassium chloride</i> (Klor-Con Oral Tablet Extended Release 8 Meq)	NPB	
K-PHOS ORAL TABLET 500 MG (<i>potassium phosphate monobasic</i>)	NPB	
PHOSPHA 250 NEUTRAL ORAL TABLET 155-852-130 MG (<i>k phos mono-sod phos di & mono</i>)	NPB	
<i>phosphorous oral tablet 155-852-130 mg</i>	G	
PHOSPHO-TRIN 250 NEUTRAL ORAL TABLET 155-852-130 MG (<i>k phos mono-sod phos di & mono</i>)	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 0.5 mg/ml, 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	
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	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
CITRANATAL ASSURE ORAL 35-1 & 300 MG (<i>prenat w/o a-fecbgl-dss-fa-dha</i>)	NF	
<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	
<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-feasppl-fa-fish</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
OB COMPLETE ORAL TABLET 50-1.25 MG (<i>prenatal vit-iron carbonyl-fa</i>)	NF	
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 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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

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	
<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	
VITAFOL-OB ORAL TABLET (<i>prenatal vit-fe fumarate-fa</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
vitalara oral tablet 20-1 mg	NF	
VITATHELY WITH GINGER ORAL TABLET 27-1 MG (<i>prenatal vit-fe fumarate-fa</i>)	NF	
wescap-pn dha oral capsule 27-0.6-0.4-300 mg	NF	
wesnate dha oral capsule 28-1-200 mg	NF	
westab plus oral tablet 27-1 mg	NF	
westgel dha oral capsule 31-0.6-0.4-200 mg	NF	
zalvit oral tablet 13-1 mg	NF	
ziphex oral tablet 13-1 mg	NF	
VITAMINS - VITAMINS AND SUPPLEMENTS		
ACCRUFER ORAL CAPSULE 30 MG (<i>ferric maltol</i>)	NF	
active fe oral tablet 75-1.25 mg	NPB	
activite oral tablet 1 mg	NF	
AMLADEX ORAL TABLET (<i>multiple vitamin</i>)	NF	
ASTAMED MYO ORAL CAPSULE (<i>astaxanthin-tocotrienol-zn-d3</i>)	NF	
bp vit 3 oral capsule 1 mg	NPB	
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	
corvite fe oral tablet	NPB	
cvs folic acid oral tablet 800 mcg	CE	
cyanocobalamin injection solution 1000 mcg/ml	G	
DAVIMET-FLUORIDE ORAL TABLET CHEWABLE 0.75 MG (<i>pediatric multivitamins-fl</i>)	NF	
dayavite oral tablet	NF	
DEXIFOL ORAL TABLET 5 MG (<i>b complex-c-folic acid</i>)	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	

Prescription Drug Name	Drug Tier	Drug Notes
<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	
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	
<i>folite oral tablet</i>	NF	
FOLVITE-D ORAL TABLET 1-3775 MG-UNIT (<i>folic acid-cholecalciferol</i>)	NF	
FOSTEUM PLUS ORAL CAPSULE (<i>dietary management product</i>)	NF	
<i>ft folic acid oral tablet 400 mcg</i>	CE	
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	
LDL CARE ORAL POWDER (<i>dietary management product</i>)	NF	
LYSIPLEX PLUS ORAL TABLET (<i>multiple vitamins-minerals</i>)	NF	
<i>medi tab oral tablet</i>	NF	
MULTIGEN FOLIC ORAL TABLET 70-150-2-1 MG (<i>fe asp gly-succ-c-thre-b12-fa</i>)	NPB	

Prescription Drug Name	Drug Tier	Drug Notes
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 suspension 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	
<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	
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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
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>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>vasure 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		
ALOCRIAL OPHTHALMIC 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	
ZERVIAE OPHTHALMIC SOLUTION 0.24 % (<i>cetirizine hcl</i>)	NF	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<i>prednisolone-gatifloxacin ophthalmic suspension 1-0.5 %</i>	NF	
<i>sulfacetamide-prednisolone ophthalmic solution 10-0.23 %</i>	G	
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-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	
<i>levofloxacin ophthalmic solution 0.5 %</i>	G	
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 5-400-10000</i>	G	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	G	
<i>ofloxacin ophthalmic solution 0.3 %</i>	G	
<i>polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%</i>	G	
<i>sulfacetamide sodium ophthalmic solution 10 %</i>	G	
<i>tobramycin ophthalmic solution 0.3 %</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
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	
XDEMVY 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	
INVELTYS OPHTHALMIC SUSPENSION 1 % (<i>loteprednol etabonate</i>)	NF	
<i>ketorolac tromethamine ophthalmic solution 0.4 %, 0.5 %</i>	G	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
KLARITY-L OPHTHALMIC EMULSION 0.2 %, 0.5 % (loteprednol etabonate)	NF	
LOTEMAX OPHTHALMIC GEL 0.5 % (loteprednol etabonate)	NF	
LOTEMAX OPHTHALMIC OINTMENT 0.5 % (loteprednol etabonate)	NF	
LOTEMAX OPHTHALMIC SUSPENSION 0.5 % (loteprednol etabonate)	NF	
LOTEMAX SM OPHTHALMIC GEL 0.38 % (loteprednol etabonate)	NF	
loteprednol etabonate ophthalmic suspension 0.5 %	G	
MAXIDEX OPHTHALMIC SUSPENSION 0.1 % (dexamethasone)	NF	
NEVANAC OPHTHALMIC SUSPENSION 0.1 % (nepafenac)	NF	
OZURDEX INTRAVITREAL IMPLANT 0.7 MG (dexamethasone)	NPSP	
PRED FORTE OPHTHALMIC SUSPENSION 1 % (prednisolone acetate)	NF	
PRED MILD OPHTHALMIC SUSPENSION 0.12 % (prednisolone acetate)	NF	
prednisolone acetate ophthalmic suspension 1 %	G	
prednisolone acetate p-f ophthalmic suspension 1 %	NPB	
prednisolone sodium phosphate ophthalmic solution 1 %	NPB	
PROLENSA OPHTHALMIC SOLUTION 0.07 % (bromfenac sodium)	NPB	
CARBONIC ANHYDRASE INHIBITORS - DRUGS TO TREAT GLAUCOMA		
AZOPT OPHTHALMIC SUSPENSION 1 % (brinzolamide)	NPB	
brinzolamide ophthalmic suspension 1 %	G	
DRY EYE DISEASE		
CEQUA OPHTHALMIC SOLUTION 0.09 % (cyclosporine)	NF	
cyclosporine (pf) ophthalmic emulsion 0.05 %	NF	
MIEBO OPHTHALMIC SOLUTION 1.338 GM/ML (perfluorohexyloctane)	NF	
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	

Prescription Drug Name	Drug Tier	Drug Notes
XIIDRA OPHTHALMIC SOLUTION 5 % (<i>lifitegrast</i>)	NF	
MISCELLANEOUS		
AKTEN OPHTHALMIC GEL 3.5 % (<i>lidocaine hcl</i>)	NPB	
<i>atropine sulfate ophthalmic solution 1 %</i>	NPB	
<i>cyclopentolate hcl ophthalmic solution 1 %</i>	G	
CYSTADROPS OPHTHALMIC SOLUTION 0.37 % (<i>cysteamine hcl</i>)	NF	
CYSTARAN OPHTHALMIC SOLUTION 0.44 % (<i>cysteamine hcl</i>)	NPSP	
MYDCOMBI OPHTHALMIC SOLUTION CARTRIDGE 1-2.5 % (<i>tropicamide-phenylephrine</i>)	NF	
OXERVATE OPHTHALMIC SOLUTION 0.002 % (<i>cenegermin-bkbj</i>)	NPSP	
<i>phenylephrine hcl ophthalmic solution 10 %</i>	G	
<i>phenylephrine hcl ophthalmic solution 2.5 %</i>	G	N8 (Listing does not include certain NDCs)
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	G	
<i>proparacaine hcl ophthalmic solution 0.5 %</i>	G	
QLOSI OPHTHALMIC SOLUTION 0.4 % (<i>pilocarpine hcl</i>)	NF	
<i>tropicamide ophthalmic solution 0.5 %, 1 %</i>	G	
TYRVAYA NASAL SOLUTION 0.03 MG/ACT (<i>varenicline tartrate</i>)	NF	
UPNEEQ OPHTHALMIC SOLUTION 0.1 % (<i>oxymetazoline hcl</i>)	NF	
VERKAZIA OPHTHALMIC EMULSION 0.1 % (<i>cyclosporine</i>)	NF	
VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED 15 MG (<i>verteporfin</i>)	NPSP	
VIZZ OPHTHALMIC SOLUTION 1.44 % (<i>aceclidine hcl</i>)	NF	
VUITY OPHTHALMIC SOLUTION 1.25 % (<i>pilocarpine hcl</i>)	NF	
PROSTAGLANDINS - DRUGS TO TREAT GLAUCOMA		
<i>bimatoprost ophthalmic solution 0.03 %</i>	G	
IYUZEH OPHTHALMIC SOLUTION 0.005 % (<i>latanoprost</i>)	NF	
<i>latanoprost ophthalmic solution 0.005 %</i>	NF	
LUMIGAN OPHTHALMIC SOLUTION 0.01 % (<i>bimatoprost</i>)	NF	
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)

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
VYZULTA OPHTHALMIC SOLUTION 0.024 % (latanoprostene bunod)	NF	
XALATAN OPHTHALMIC SOLUTION 0.005 % (latanoprost)	NPB	
XELPROS OPHTHALMIC EMULSION 0.005 % (latanoprost)	NF	
ZIOPTAN OPHTHALMIC SOLUTION 0.0015 % (tafluprost)	NPB	
RETINAL DISORDERS		
BYOOVIZ INTRAVITREAL SOLUTION 0.5 MG/0.05ML (ranibizumab-nuna)	PSP	
CIMERLI INTRAVITREAL SOLUTION 0.3 MG/0.05ML, 0.5 MG/0.05ML (ranibizumab-eqrn)	NPSP	
EYLEA INTRAVITREAL SOLUTION 2 MG/0.05ML (aflibercept)	NF	
EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE 2 MG/0.05ML (aflibercept)	NF	
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE 0.3 MG/0.05ML, 0.5 MG/0.05ML (ranibizumab)	NF	
RHO KINASE INHIBITORS - DRUGS TO TREAT EYE CONDITIONS		
RHOPRESSA OPHTHALMIC SOLUTION 0.02 % (netarsudil dimesylate)	NF	
SYMPATHOMIMETICS - DRUGS TO TREAT GLAUCOMA		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 % (brimonidine tartrate)	PB	
apraclonidine hcl ophthalmic solution 0.5 %	G	
brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %	G	
IOPIDINE OPHTHALMIC SOLUTION 1 % (apraclonidine hcl)	NPB	
OTHER		
IRRIGATION SOLUTIONS		
ARGYLE STERILE WATER IRRIGATION SOLUTION (water for irrigation, sterile)	G	
lactated ringers irrigation solution	G	
PHYSIOLYTE IRRIGATION SOLUTION (irrigation solns physiological)	G	
ringers irrigation irrigation solution	G	
sterile water for irrigation irrigation solution	G	

Prescription Drug Name	Drug Tier	Drug Notes
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		
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</i>	NF	
<i>epinephrine injection solution auto-injector 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>	NF	
<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	
NEFFY NASAL SOLUTION 1 MG/0.1ML, 2 MG/0.1ML (<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	
BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT (<i>glycopyrrolate-formoterol</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT (<i>ipratropium-albuterol</i>)	NF	
<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 NEBULIZATION SOLUTION 175 MCG/3ML (<i>revefenacin</i>)	PB	
ANTI-HISTAMINE COMBINATIONS		
<i>azelastine-fluticasone nasal suspension 137-50 mcg/act</i>	G	
DYMISTA NASAL SUSPENSION 137-50 MCG/ACT (<i>azelastine-fluticasone</i>)	NF	
RYALTRIS NASAL SUSPENSION 665-25 MCG/ACT (<i>olopatadine-mometasone</i>)	NF	

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

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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	
<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	
<i>hydrocod poli-chlorophe 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	
<i>hydrocodone bit-homatrop mbr oral tablet 5-1.5 mg</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)

Prescription Drug Name	Drug Tier	Drug Notes
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>)	NPSP	
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	
TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG, 50-25-37.5 & 75 MG (<i>elexacaftor-tezacaftor-ivacaft</i>)	NPSP	
TRIKAFTA ORAL THERAPY PACK 100-50-75 & 75 MG, 80-40-60 & 59.5 MG (<i>elexacaftor-tezacaftor-ivacaft</i>)	NPSP	
LEUKOTRIENE MODIFIERS		
<i>zileuton er oral tablet extended release 12 hour 600 mg</i>	NF	

Prescription Drug Name	Drug Tier	Drug Notes
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	
BRINSUPRI ORAL TABLET 10 MG, 25 MG (<i>brensocatib</i>)	NF	
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	
SINUVA NASAL IMPLANT 1350 MCG (<i>mometasone furoate</i>)	NF	
XHANCE NASAL EXHALER SUSPENSION 93 MCG/ACT (<i>fluticasone propionate</i>)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
PULMONARY FIBROSIS AGENTS		
ESBRIET ORAL TABLET 267 MG, 801 MG (<i>pirfenidone</i>)	NF	
JASCAYD ORAL TABLET 18 MG, 9 MG (<i>nerandomilast</i>)	NF	
OFEV ORAL CAPSULE 100 MG, 150 MG (<i>nintedanib esylate</i>)	PSP	
<i>pirfenidone oral tablet 534 mg</i>	G	
SEVERE ASTHMA AGENTS		
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML (<i>benralizumab</i>)	PSP	
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML (<i>benralizumab</i>)	PSP	
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 210 MG/1.91ML (<i>tezepehumab-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>beclomethasone diprop hfa inhalation aerosol solution 40 mcg/act, 80 mcg/act</i>	G	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

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 100 mg, 200 mg</i>	G	N8 (Listing does not include certain NDCs)
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
AZELEX EXTERNAL CREAM 20 % (<i>azelaic acid</i>)	NF	
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 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)
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	
<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	
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 % (<i>tretinoin microsphere</i>)	NF	
<i>sulfacetamide sodium (acne) external lotion 10 %</i>	G	

Prescription Drug Name	Drug Tier	Drug Notes
<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>)	NF	
WINLEVI EXTERNAL CREAM 1 % (<i>clascoterone</i>)	NPB	
<i>isotretinoin</i> (Zenatane Oral Capsule 10 Mg, 20 Mg, 30 Mg, 40 Mg)	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>)	NPB	
KLISYRI (350 MG) EXTERNAL OINTMENT 1 % (<i>tirbanibulin</i>)	NPB	
TOLAK EXTERNAL CREAM 4 % (<i>fluorouracil</i>)	NF	
ZYCLARA PUMP EXTERNAL CREAM 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	
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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
<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>)	NF	
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	
JUBLIA EXTERNAL SOLUTION 10 % (<i>efinaconazole</i>)	NPB	
<i>ketconazole external cream 2 %</i>	G	
<i>ketconazole external foam 2 %</i>	NF	
<i>ketconazole</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 external cream 100000 unit/gm</i>	G	
<i>nystatin external ointment 100000 unit/gm</i>	G	
<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</i> (Nystop External Powder 100000 Unit/Gm)	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	

Prescription Drug Name	Drug Tier	Drug Notes
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	
<i>cipotrex external kit 0.005 %</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	
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>ketconazole external shampoo 2 %</i>	G	
<i>selenium sulfide external lotion 2.5 %</i>	G	
ZORYVE EXTERNAL FOAM 0.3 % (<i>roflumilast</i>)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
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	
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	
<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	

Prescription Drug Name	Drug Tier	Drug Notes
BRYHALI EXTERNAL LOTION 0.01 % (<i>halobetasol propionate</i>)	PB	
<i>clobetasol prop emollient base external cream 0.05 %</i>	G	
<i>clobetasol propionate e external cream 0.05 %</i>	G	
<i>clobetasol propionate emulsion external foam 0.05 %</i>	NF	
<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	
CORDRAN EXTERNAL TAPE 4 MCG/SQCM (<i>flurandrenolide</i>)	NF	
DERMA-SMOOTH/FS BODY EXTERNAL OIL 0.01 % (<i>fluocinolone acetonide</i>)	NPB	
DERMA-SMOOTH/FS SCALP EXTERNAL OIL 0.01 % (<i>fluocinolone acetonide</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	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
HALOG EXTERNAL SOLUTION 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	
<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	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
LEXETTE EXTERNAL FOAM 0.05 % (<i>halobetasol propionate</i>)	NF	
MEDPURA HYDROCORTISONE EXTERNAL CREAM 1 % (<i>hydrocortisone</i>)	G	
MICORT HC EXTERNAL CREAM 2.5 % (<i>hydrocortisone acetate</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 absorbase 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 gel 2 %</i>	G	
<i>lidocaine hcl urethral/mucosal external prefilled syringe 2 %</i>	G	
<i>lidocaine-prilocaine external cream 2.5-2.5 %</i>	G	
<i>lidocanna external patch 4 %</i>	G	
LIDODERM EXTERNAL PATCH 5 % (<i>lidocaine</i>)	NPB	
LMR PLUS EXTERNAL KIT 5 & 0.5-0.5 % (<i>lidocaine-camphor-menthol</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
PLIAGLIS EXTERNAL CREAM 7-7 % (<i>lidocaine-tetracaine</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	
ZTLIDO EXTERNAL PATCH 1.8 % (<i>lidocaine</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	
<i>podofilox external solution 0.5 %</i>	G	
RECTIV RECTAL OINTMENT 0.4 % (<i>nitroglycerin</i>)	NPB	
SANTYL EXTERNAL OINTMENT 250 UNIT/GM (<i>collagenase</i>)	NPB	
SOFDRA EXTERNAL GEL 12.45 % (<i>sofpironium bromide</i>)	NPB	
TARGRETIN EXTERNAL GEL 1 % (<i>bexarotene</i>)	NF	
<i>urea external cream 41 %</i>	G	N8 (Listing does not include certain NDCs)
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	

Prescription Drug Name	Drug Tier	Drug Notes
YCANTH EXTERNAL SOLUTION 0.7 % (<i>cantharidin</i>)	NPB	
ZELSUVMI EXTERNAL GEL 10.3 % (<i>berdazimer sodium</i>)	NF	
DERMATOLOGY, ROSACEA		
<i>azelaic acid external gel 15 %</i>	G	
<i>doxycycline oral capsule delayed release 40 mg</i>	NF	
EMROSI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 40 MG (<i>minocycline hcl micronized</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	N8 (Listing does not include certain NDCs)
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	
AZADROX EXTERNAL GEL (<i>silver</i>)	NF	
BASADROX EXTERNAL GEL (<i>silver</i>)	NF	
FILSUEVZ EXTERNAL GEL 10 % (<i>birch triterpenes</i>)	NF	
KERASTAT EXTERNAL CREAM (<i>keratin</i>)	NF	
KERASTAT EXTERNAL GEL 5 % (<i>keratin</i>)	NF	

2026 Pharmacy Drug Guide - Aetna Standard Plan

The formulary is updated the first week of each month
07/01/2026

Prescription Drug Name	Drug Tier	Drug Notes
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	
<i>nystatin mouth/throat suspension 100000 unit/ml</i>	G	
<i>triamcinolone acetanide</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 acetanide 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	
CORTISPORIN-TC OTIC SUSPENSION 3.3-3-10-0.5 MG/ML (<i>neomycin-colist-hc-thonzonium</i>)	NPB	
<i>fluocinolone acetanide otic oil 0.01 %</i>	G	
<i>hydrocortisone-acetic acid otic solution 1-2 %</i>	G	
<i>neomycin-polymyxin-hc otic solution 1 %, 3.5-10000-1</i>	G	
<i>neomycin-polymyxin-hc otic suspension 3.5-10000-1</i>	G	
<i>ofloxacin otic solution 0.3 %</i>	G	
OTOVEL OTIC SOLUTION 0.3-0.025 % (<i>ciprofloxacin-fluocinolone</i>)	NF	

Index

<i>abacavir sulfate</i>	31	<i>adalimumab-aacf (2 syringe)</i>	154	AGRYLIN.....	151
<i>abacavir sulfate-lamivudine</i>	33	<i>adalimumab-aacf(cd/uc/hs strt)</i> 154		AIMOVIG.....	83
ABILIFY.....	71	<i>adalimumab-aacf(ps/uv starter)</i> 154		AIRSUPRA.....	186
ABILIFY ASIMTUFII.....	71	<i>adalimumab-aaty (1 pen)</i> 154		AJOVY.....	83
ABILIFY MAINTENA.....	71	<i>adalimumab-aaty (2 pen)</i> 154		AKEEGA.....	42
<i>abiraterone acetate</i>	42	<i>adalimumab-aaty (2 syringe)</i> 154		AKLIEF.....	187
<i>abiraterone acetate micronized</i> ..	42	<i>adalimumab-aaty cd/uc/hs start</i> 155		AKTEN.....	177
ABRILADA (1 PEN).....	154	<i>adalimumab-adaz</i>	155	AKYNZEO.....	135
ABRILADA (2 PEN).....	154	<i>adalimumab-adbm (2 pen)</i> 155		ALA SCALP.....	192
ABRILADA (2 SYRINGE).....	154	<i>adalimumab-adbm (2 syringe)</i> .. 155		<i>ala-cort</i>	192
ABSORICA.....	187	<i>adalimumab-fkjp (2 pen)</i> 155		<i>albendazole</i>	29
ABSORICA LD.....	187	<i>adalimumab-fkjp (2 syringe)</i> 155		<i>albuterol sulfate</i>	181, 182
<i>acamprosate calcium</i>	64	<i>adalimumab-ryvk (1 pen)</i> 155		<i>albuterol sulfate hfa</i>	181
ACANYA.....	187	<i>adalimumab-ryvk (2 pen)</i> 155		<i>alclometasone dipropionate</i>	192
<i>acarbose</i>	94	<i>adalimumab-ryvk (2 syringe)</i> 155		ALDACTONE.....	51
ACCRUFER.....	169	<i>adapalene</i>	187	ALECENSA.....	44
ACCU-CHEK AVIVA PLUS..	115	<i>adapalene-benzoyl peroxide</i> 187		<i>alendronate sodium</i>	102
ACCU-CHEK FASTCLIX		ADBRY.....	192	<i>alfuzosin hcl er</i>	142
LANCET.....	115	ADCIRCA.....	63	<i>aliskiren fumarate</i>	60
ACCU-CHEK FASTCLIX		ADDERALL.....	79	ALKINDI SPRINKLE.....	123
LANCETS.....	115	ADDERALL XR.....	79	<i>allopurinol</i>	21
ACCU-CHEK GUIDE TEST..	115	<i>adefovir dipivoxil</i>	37	ALLZITAL.....	22
ACCU-CHEK SAFE-T PRO		ADEMPAS.....	63	<i>almotriptan malate</i>	84
LANCETS.....	115	ADMELOG.....	96	ALOCRIL.....	172
ACCU-CHEK SMARTVIEW..	115	ADRENALIN.....	61, 182	<i>alogliptin benzoate</i>	95
ACCU-CHEK SOFTCLIX		ADVAIR DISKUS.....	186	<i>alogliptin-metformin hcl</i>	94
LANCET DEV.....	115	ADVAIR HFA.....	186	<i>alogliptin-pioglitazone</i>	94
ACCU-CHEK SOFTCLIX		ADVANCE INTUITION TEST		ALORA.....	127
LANCETS.....	115	.....	115	<i>alosetron hcl</i>	138
ACCUTREND GLUCOSE.....	115	ADVANCE MICRO-DRAW		ALPHAGAN P.....	178
<i>acebutolol hcl</i>	57	TEST.....	115	ALPHANATE.....	147
<i>acetaminophen-codeine</i>	24	ADVANCED ALLERGY		ALPHANINE SD.....	151
<i>acetazolamide</i>	60	COLLECTION.....	192	<i>alprazolam</i>	65
<i>acetazolamide er</i>	60	ADVATE.....	149	<i>alprazolam er</i>	65
<i>acetic acid</i>	197, 198	ADVOCATE REDI-CODE.....	115	ALPRAZOLAM INTENSOL.....	65
<i>acetylcysteine</i>	184	ADVOCATE REDI-CODE+		<i>alprazolam xr</i>	65
ACIPHEX.....	141	TEST.....	115	ALPROLIX.....	151
<i>acitretin</i>	191	ADVOCATE TEST.....	115	ALREX.....	175
ACTHAR.....	129	<i>adynovate</i>	149	Altavera.....	104
ACTHAR GEL.....	129	ADZENYS XR-ODT.....	79	ALTRENO.....	187
ACTIMMUNE.....	163	AFINITOR.....	44	ALTUVIIIO.....	149
<i>active fe</i>	169	AFINITOR DISPERZ.....	44	ALUNBRIG.....	44
<i>activite</i>	169	Afirmelle.....	104	ALVAIZ.....	152
ACTOS.....	99	AFREZZA.....	96	ALVESCO.....	185
ACUICYN.....	196	AFSTYLA.....	149	<i>alyacen 1/35</i>	104
ACULAR.....	175	AFTERA.....	104	<i>alyacen 7/7/7</i>	104
ACUVAIL.....	175	AFTERPILL.....	104	ALYFTREK.....	183
<i>acyclovir</i>	34, 196	AGAMATRIX AMP TEST.....	115	ALYGLO.....	162
ACZONE.....	187	AGAMATRIX JAZZ TEST.....	115	Alyq.....	63
<i>adainzoxia</i>	187	AGAMATRIX PRESTO TEST.....	115	<i>amantadine hcl</i>	69
<i>adalimumab-aacf (2 pen)</i>	154	AGAMREE.....	123	<i>ambrisentan</i>	63

<i>amcinonide</i>	192	APLENZIN.....	66	<i>aspirin-dipyridamole er</i>	152
AMELUZ.....	196	APOKYN.....	69	ASSURE 3 TEST.....	115
Amethyst.....	104	<i>apraclonidine hcl</i>	178	ASSURE 4 TEST.....	115
<i>amiloride hcl</i>	60	<i>aprepitant</i>	135	ASSURE II.....	115
<i>amiloride-hydrochlorothiazide</i> ...	60	APRETUDE.....	31	ASSURE II CHECK.....	115
<i>aminocaproic acid</i>	151	Apri.....	104	ASSURE PLATINUM.....	115
<i>amiodarone hcl</i>	53	APRISO.....	137	ASSURE PRISM MULTI	
AMITIZA.....	138	APTENSIO XR.....	80	TEST.....	115
<i>amitriptyline hcl</i>	66	APTIOM.....	74	ASSURE PRO TEST.....	115
AMJEVITA.....	155	APTIVUS.....	31	ASTAGRAF XL.....	163
AMJEVITA-PED 10KG TO		AQNEURSA.....	126	ASTAMED MYO.....	169
<15KG.....	155	ARAKODA.....	31	ATABEX EC.....	165
AMJEVITA-PED 15KG TO		ARALAST NP.....	179	ATACAND.....	52
<30KG.....	155	ARANELLE.....	104	ATACAND HCT.....	51
AMLADEX.....	169	ARANESP (ALBUMIN FREE)		<i>atazanavir sulfate</i>	31
AMLODIPINE		.....	148	<i>atenolol</i>	57
BES+SYRSPEND SF.....	58	ARAVA.....	161	ATENOLOL+SYRSPEND SF...	57
<i>amlodipine besy-benazepril hcl</i> ..	50	ARAZLO.....	187	<i>atenolol-chlorthalidone</i>	56
<i>amlodipine besylate</i>	58	ARCALYST.....	163	ATIVAN.....	65
<i>amlodipine besylate-valsartan</i> ...	51	<i>arformoterol tartrate</i>	182	<i>atomoxetine hcl</i>	80
<i>amlodipine-atorvastatin</i>	58	ARGYLE STERILE WATER..	178	ATORVALIQ.....	55
<i>amlodipine-olmesartan</i>	51	ARIKAYCE.....	30	<i>atorvastatin calcium</i>	55
<i>ammonium lactate</i>	196	ARIMIDEX.....	42	<i>atovaquone</i>	38
Amnesteem.....	187	<i>aripiprazole</i>	71	<i>atovaquone-proguanil hcl</i>	31
<i>amoxapine</i>	66	ARISTADA.....	71	<i>atropine sulfate</i>	177
<i>amoxicill-clarithro-lansopraz</i> ...	142	ARISTADA INITIO.....	71	ATROVENT HFA.....	180
<i>amoxicillin</i>	39, 40	ARIXTRA.....	146	ATTRUBY.....	61
<i>amoxicillin-pot clavulanate</i>	40	<i>armodafinil</i>	89	AUBAGIO.....	85
<i>amoxicillin-pot clavulanate er</i> ...	40	ARMOUR THYROID.....	131	Aubra Eq.....	105
<i>amphetamine sulfate</i>	79	ARNUITY ELLIPTA.....	185	AUGTYRO.....	44
<i>amphetamine-dextroamphet er</i> ...	79	AROMASIN.....	42	<i>auranofin</i>	161
<i>amphetamine-</i>		ARTHROTEC.....	24	Aurovela 1.5/30.....	105
<i>dextroamphetamine</i>	79	ASCENIV.....	162	Aurovela 1/20.....	105
<i>ampicillin</i>	40	Ascomp-Codeine.....	24	Aurovela 24 Fe.....	105
<i>ampicillin sodium</i>	40	Ashlyna.....	105	Aurovela Fe 1.5/30.....	105
AMPYRA.....	85	ASMANEX (120 METERED		Aurovela Fe 1/20.....	105
AMRIX.....	88	DOSES).....	185	AURYXIA.....	130
AMZEEQ.....	187	ASMANEX (14 METERED		AUSTEDO.....	85
ANAFRANIL.....	65	DOSES).....	185	AUSTEDO XR.....	85
<i>anagrelide hcl</i>	151	ASMANEX (30 METERED		AUSTEDO XR PATIENT	
<i>anastrozole</i>	42	DOSES).....	185	TITRATION.....	85
ANDEMBRY.....	161	ASMANEX (60 METERED		AUVELITY.....	66
ANDROGEL PUMP.....	93	DOSES).....	185	AUVI-Q.....	179
ANGELIQ.....	127	ASMANEX HFA.....	185	AVENOVA.....	196
ANNOVERA.....	104	<i>aspirin</i>	28	AVERI.....	105
ANORO ELLIPTA.....	179	<i>aspirin adult low dose</i>	27	Aviane.....	105
ANUSOL-HC.....	142	<i>aspirin adult low strength</i>	27	<i>avidoxy</i>	40
ANZEMET.....	135	<i>aspirin childrens</i>	27	AVONEX PEN.....	85
<i>apap-caff-dihydrocodeine</i>	24	<i>aspirin ec adult low dose</i>	27	AVONEX PREFILLED.....	86
<i>aphoria</i>	187	<i>aspirin ec low strength</i>	27	AVSOLA.....	154
APIDRA.....	96	<i>aspirin low dose</i>	27, 28	Ayuna.....	105
APIDRA SOLOSTAR.....	96	<i>aspirin regimen</i>	28	AYVAKIT.....	44

AZADROX.....	197	BD VEO INSULIN SYR		Blisovi Fe 1.5/30.....	105
Azasan.....	163	ULTRAFINE.....	116	Blisovi Fe 1/20.....	105
AZASITE.....	174	<i>beclomethasone diprop hfa</i>	185	<i>blood glucose test</i>	116
<i>azathioprine</i>	163	BELBUCA.....	27	BLUJEPa.....	38
<i>azelaic acid</i>	197	BELSOMRA.....	82	BOMYNTRA.....	102
<i>azelastine hcl</i>	172, 181	<i>benazepril hcl</i>	50	BONJESTA.....	135
<i>azelastine-fluticasone</i>	180	<i>benazepril-hydrochlorothiazide</i> ..	50	BONSITY.....	103
AZELEX.....	188	BENEFIX.....	151	<i>bosentan</i>	63
<i>azesco</i>	165	BENICAR.....	52	BOSULIF.....	44
<i>azithromycin</i>	36	BENICAR HCT.....	52	BOTOX.....	82
AZMIRO.....	93	BENLYSTA.....	163	<i>bp vit 3</i>	169
AZOPT.....	176	BENZEPRO.....	188	BRAFTOVI.....	44
AZOR.....	52	<i>benznidazole</i>	29	BRENZAVVY.....	100
AZSTARYS.....	80	<i>benzonatate</i>	182	BREO ELLIPTA.....	186
AZULFIDINE.....	137	<i>benzoyl peroxide-erythromycin</i> ..	188	Breyna.....	186
AZULFIDINE EN-TABS.....	137	<i>benztropine mesylate</i>	69	BREZTRI AEROSPHERE.....	180
Azurette.....	105	BEPREVE.....	172	<i>briellyn</i>	105
Bac (Butalbital-Acetamin-Caff). 22		BERINERT.....	161	BRILINTa.....	152
<i>bacitracin-polymyxin b</i>	174	BESIVANCE.....	174	<i>brimonidine tartrate</i>	178
<i>bacitra-neomycin-polymyxin-hc</i> 173		BESREMI.....	42	BRINSUPRI.....	184
<i>baclofen</i>	88	<i>betaine</i>	129	<i>brinzolamide</i>	176
BACTRIM.....	38	<i>betamethasone dipropionate</i>	192	BRIVIACT.....	74
BACTRIM DS.....	38	<i>betamethasone dipropionate</i>		<i>bromfenac sodium (once-daily)</i> 175	
BAFIERTAM.....	86	<i>aug</i>	192	<i>bromocriptine mesylate</i>	70
<i>balsalazide disodium</i>	137	<i>betamethasone valerate</i>	192	BROMSITE.....	175
BALVERSA.....	44	BETAPACE.....	53	BRONCHITOL.....	183
Balziva.....	105	BETAPACE AF.....	53	BRONCHITOL TOLERANCE	
BANZEL.....	74	BETASERON.....	86	TEST.....	183
BAQSIMI ONE PACK.....	124	<i>betaxolol hcl</i>	57, 173	BRUKINSA.....	44
BAQSIMI TWO PACK.....	125	<i>bethanechol chloride</i>	144	BRYHALI.....	193
BARACLUDE.....	37	BETHKIS.....	183	<i>budesonide</i>	137, 185
BARRIGEL.....	142	BETIMOL.....	173	<i>budesonide er</i>	137
BASADROX.....	197	BETOPTIC-S.....	173	<i>budesonide-formoterol fumarate</i>	
BASAGLAR KWIKPEN.....	96	BEVESPI AEROSPHERE.....	179	.....	186
BAXDELA.....	36	<i>bexagliflozin</i>	100	<i>bumetanide</i>	60
BAYER ASPIRIN EC LOW		<i>bexarotene</i>	48	BUPHENYL.....	132, 133
DOSE.....	28	BEYAZ.....	105	<i>buprenorphine</i>	27
BAYER LOW DOSE.....	28	BEYFORTUS.....	164	<i>buprenorphine hcl</i>	90
BD INSULIN SYRINGE U-500		<i>bicalutamide</i>	42	<i>buprenorphine hcl-naloxone hcl</i> ..	89
.....	116	BIDIL.....	61	<i>bupropion hcl</i>	67
BD PEN NEEDLE MICRO		BIJUVA.....	127	<i>bupropion hcl er (smoking det)</i> ...91	
ULTRAFINE.....	116	BIKTARVY.....	33	<i>bupropion hcl er (sr)</i>	66
BD PEN NEEDLE MINI		BILPREVDA.....	102	<i>bupropion hcl er (xl)</i>	66
ULTRAFINE.....	116	<i>bimatoprost</i>	177	<i>bupirone hcl</i>	65
BD PEN NEEDLE NANO 2ND		<i>bi-mix</i>	143	<i>butalbital-acetaminophen</i>	22
GEN.....	116	BIMZELX.....	155	<i>butalbital-apap-caff-cod</i>	24
BD PEN NEEDLE NANO		BINOSTO.....	102	<i>butalbital-apap-caffeine</i>	22
ULTRAFINE.....	116	BIORPHEN.....	61	<i>butalbital-asa-caff-codeine</i>	24
BD PEN NEEDLE ORIG		<i>bisoprolol fumarate</i>	57	<i>butalbital-aspirin-caffeine</i>	22
ULTRAFINE.....	116	<i>bisoprolol-hydrochlorothiazide</i> ..	56	<i>butorphanol tartrate</i>	24
BD PEN NEEDLE SHORT		BIVIGAM.....	162	BUTRANS.....	27
ULTRAFINE.....	116	Blisovi 24 Fe.....	105	BYLVAY.....	139

BYLVAY (PELLETS).....	139	Cartia Xt.....	58	<i>cimetidine</i>	137
BYNFEZIA PEN.....	92	<i>carvedilol</i>	57	<i>cimetidine hcl</i>	137
BYOOVIZ.....	178	<i>carvedilol phosphate er</i>	57	CIMZIA (1 SYRINGE).....	155
BYSTOLIC.....	57	CATAPRES-TTS-1.....	61	CIMZIA (2 SYRINGE).....	155
<i>cabergoline</i>	129	CATAPRES-TTS-2.....	61	CIMZIA-STARTER.....	155
CABLIVI.....	147	CATAPRES-TTS-3.....	62	<i>cinacalcet hcl</i>	102
CABOMETYX.....	44	CAYA.....	105	CINRYZE.....	161
CABTREO.....	188	CAYSTON.....	183	<i>cipotrex</i>	191
CALCIFOL.....	169	<i>cefaclor</i>	35	CIPRO.....	37
<i>calcipotriene</i>	191	<i>cefaclor er</i>	35	CIPRO HC.....	198
<i>calcipotriene-betameth diprop</i> ..	191	<i>cefadroxil</i>	35	<i>ciprofloxacin hcl</i>	37, 174, 198
<i>calcitonin (salmon)</i>	102	<i>cefдинir</i>	35	<i>ciprofloxacin-dexamethasone</i> ...	198
Calcitrene.....	191	<i>cefixime</i>	35	<i>ciprofloxacin-fluocinolone pf</i> ...	198
<i>calcitriol</i>	133, 191	<i>cefpodoxime proxetil</i>	35	<i>citalopram hydrobromide</i>	67
<i>calcium acetate (phos binder)</i> ...	130	<i>cefprozil</i>	35	CITRANATAL 90 DHA.....	165
CALQUENCE.....	44	<i>cefuroxime axetil</i>	35	CITRANATAL ASSURE.....	166
CAMBIA.....	22	CELEBREX.....	21	Claravis.....	188
Camila.....	105	<i>celecoxib</i>	21	CLARINEX.....	181
Camrese.....	105	CELLCEPT.....	163	CLARINEX-D 12 HOUR.....	182
Camrese Lo.....	105	CELONTIN.....	74	<i>clarithromycin</i>	36
CAMZYOS.....	61	CENFOL.....	169	<i>clarithromycin er</i>	36
<i>candesartan cilexetil</i>	52	<i>cephalexin</i>	35, 36	<i>clemastine fumarate</i>	181
<i>candesartan cilexetil-hctz</i>	52	CEQUA.....	176	CLENPIQ.....	138
<i>capecitabine</i>	41	CERDELGA.....	126	CLEOCIN.....	38, 145
CAPLYTA.....	71	CEREZYME.....	126	CLEVER CHEK AUTO-CODE	
CAPRELSA.....	44	<i>cetirizine hcl</i>	181	TEST.....	116
<i>captopril</i>	50	CETROTIDE.....	122	CLEVER CHEK AUTO-CODE	
CARAFATE.....	139	<i>cevimeline hcl</i>	198	VOICE.....	116
CARBAGLU.....	133	Charlotte 24 Fe.....	105	CLEVER CHEK TEST.....	116
<i>carbamazepine</i>	74	Chateal Eq.....	106	CLEVER CHOICE AUTO-	
<i>carbamazepine er</i>	74	CHEMET.....	103	CODE TEST.....	116
<i>carbidopa</i>	70	<i>childrens aspirin</i>	28	CLEVER CHOICE MICRO	
<i>carbidopa-levodopa</i>	70	<i>chlordiazepoxide hcl</i>	65	TEST.....	116
<i>carbidopa-levodopa er</i>	70	<i>chlordiazepoxide-amitriptyline</i> ...	90	CLEVER CHOICE NO	
<i>carbidopa-levodopa-entacapone</i>	70	<i>chlorhexidine gluconate</i>	198	CODING.....	116
<i>carbinoxamine maleate</i>	181	<i>chloroquine phosphate</i>	31	CLEVER CHOICE TALK	
CARDIZEM.....	58	<i>chlorpromazine hcl</i>	71	SYSTEM.....	116
CARDIZEM CD.....	58	<i>chlorthalidone</i>	60	CLIMARA.....	127
CARDIZEM LA.....	58	<i>chlorzoxazone</i>	88	CLIMARA PRO.....	127
CARDURA.....	142	CHOLBAM.....	139	Clindacin Etz.....	188
CARDURA XL.....	142	<i>cholestyramine</i>	54	Clindacin-P.....	188
CARESENS N GLUCOSE		<i>cholestyramine light</i>	54	<i>clindamycin hcl</i>	38
TEST.....	116	<i>chorionic gonadotropin</i>	122	<i>clindamycin palmitate hcl</i>	38
CARESENS S GLUCOSE		CIALIS.....	143	<i>clindamycin phos (once-daily)</i> ..	188
TEST.....	116	CIBINQO.....	192	<i>clindamycin phos (twice-daily)</i> ..	188
CARETOUCH TEST.....	116	Ciclodan.....	189	<i>clindamycin phos-benzoyl perox</i>	
<i>carglumic acid</i>	133	<i>ciclopirox</i>	190	.....	188
<i>carisoprodol</i>	88	<i>ciclopirox olamine</i>	190	<i>clindamycin phosphate</i>	145, 188
CARNITOR.....	103	<i>cilostazol</i>	151	<i>clindamycin-tretinoin</i>	188
CARNITOR SF.....	103	CILOXAN.....	174	CLINDESSE.....	145
CAROSPIR.....	51	CIMDUO.....	33	<i>clobazam</i>	74
<i>carteolol hcl</i>	173	CIMERLI.....	178	<i>clobetasol prop emollient base</i> ..	193

<i>clobetasol propionate</i>	193	CONZIP	24	<i>cyclobenzaprine hcl er</i>	88
<i>clobetasol propionate e</i>	193	COOL BLOOD GLUCOSE		<i>cyclopentolate hcl</i>	177
<i>clobetasol propionate emulsion</i>	193	TEST STRIPS	116	<i>cyclophosphamide</i>	41
CLOBEX	193	COPAXONE	86	<i>cycloserine</i>	34
CLOBEX SPRAY	193	COPIKTRA	44	CYCLOSET	95
<i>clocortolone pivalate</i>	193	CORDRAN	193	<i>cyclosporine</i>	163
Clodan	193	COREG	57	<i>cyclosporine (pf)</i>	176
<i>clomipramine hcl</i>	65	COREG CR	57	<i>cyclosporine modified</i>	163
<i>clonazepam</i>	75	CORLANOR	61	CYLTEZO (2 PEN)	156
<i>clonidine</i>	62	CORTENEMA	137	CYLTEZO (2 SYRINGE)	156
<i>clonidine hcl</i>	62	CORTIFOAM	137	<i>cyproheptadine hcl</i>	181
<i>clonidine hcl er</i>	80	CORTISPORIN-TC	198	Cyred Eq	106
<i>clopidogrel bisulfate</i>	152	CORTROPHIN	129	CYSTADANE	129
<i>clorazepate dipotassium</i>	75	CORTROPHIN GEL	129	CYSTADROPS	177
<i>clotrimazole</i>	190, 198	CORVITE 150	169	CYSTAGON	129
<i>clotrimazole-betamethasone</i>	190	<i>corvite fe</i>	169	CYSTARAN	177
<i>clozapine</i>	71, 72	COSENTYX	156	CYTOMEL	132
<i>c-nate dha</i>	166	COSENTYX (300 MG DOSE)	156	CYTOTEC	139
COAGADEX	147	COSENTYX SENSOREADY		<i>dabigatran etexilate mesylate</i> ...	146
COARTEM	31	(300 MG)	156	<i>dalfampridine er</i>	86
COBENFY	72	COSENTYX SENSOREADY		DALIRESP	184
COBENFY STARTER PACK	72	PEN	156	<i>danazol</i>	122
<i>codeine sulfate</i>	24	COSENTYX UNOREADY	156	DANTRIUM	88
<i>colchicine</i>	21	COSOPT	173	<i>dantrolene sodium</i>	88
<i>colchicine-probenecid</i>	21	COTELIC	45	DANZITEN	45
<i>colesevelam hcl</i>	54	COTEMPLA XR-ODT	80	<i>dapagliflozin</i>	100
<i>colestipol hcl</i>	54	COXANTO	22	<i>dapsone</i>	38, 188
COMBIGAN	173	COZAAR	53	DARAPRIM	38
COMBIPATCH	127	CRENESSITY	129	<i>darifenacin hydrobromide er</i> ...	145
COMBIVENT RESPIMAT	180	CREON	140	Dasetta 1/35 (28)	106
COMBOGESIC	24	CRESEMBA	30	Dasetta 7/7/7	106
COMETRIQ (100 MG DAILY		CRESTOR	55	DAURISMO	42
DOSE)	44	CREXONT	70	DAVIMET-FLUORIDE	169
COMETRIQ (140 MG DAILY		CRINONE	131	DAXXIFY	82
DOSE)	44	<i>cromolyn sodium</i>	139, 172, 184	<i>dayavite</i>	169
COMETRIQ (60 MG DAILY		CROTAN	197	DAYBUE	84
DOSE)	44	Cryselle	106	DAYBUE STIX	84
COMPLERA	33	Cryselle-28	106	Daysee	106
<i>complete natal dha</i>	166	CUPRIMINE	104	DAYTRANA	80
<i>completenate</i>	166	CUTAQUIG	162	DAYVIGO	82
Compro	135	CUVITRU	162	D-CARE BLOOD GLUCOSE	117
CO-NATAL FA	166	CUVPOSA	134	DDAVP	133
CONCEPT DHA	166	CUVRIOR	104	Deblitane	106
CONCEPT OB	166	CVS ADVANCED GLUCOSE		<i>deferasirox</i>	104
CONCERTA	80	TEST	117	<i>deferroxamine mesylate</i>	104
<i>condoms</i>	106	<i>cvs aspirin low dose</i>	28	DELESTROGEN	127
CONDYLOX	196	<i>cvs aspirin low strength</i>	28	DELSTRIGO	33
CONJUPRI	58	<i>cvs folic acid</i>	169	Delyla	106
<i>constulose</i>	138	<i>cvs nicotine</i>	91	<i>demeclocycline hcl</i>	40
CONTOUR NEXT TEST	116	<i>cvs nicotine polacrilex</i>	91	DENAVIR	196
CONTOUR TEST	116	<i>cyanocobalamin</i>	169	DEPAKOTE	75
CONTRACE	101	<i>cyclobenzaprine hcl</i>	88	DEPAKOTE ER	75

DEPAKOTE SPRINKLES	75	Diazepam Intensol.....	75	<i>double pm</i>	173
DEPEN TITRATABS	104	DICLEGIS	135	DOVATO	33
DEPO-ESTRADIOL	127	<i>diclofenac epolamine</i>	22	<i>doxazosin mesylate</i>	142
DEPO-PROVERA	106	<i>diclofenac potassium</i>	22	<i>doxepin hcl</i>	67, 82, 191
DEPO-SUBQ PROVERA 104. 106		<i>diclofenac potassium(migraine)</i> .	22	<i>doxercalciferol</i>	134
Depo-Testosterone	93	<i>diclofenac sodium</i>	22, 175	<i>doxycycline</i>	197
DERMACINRX PRETRATE..	166	<i>diclofenac sodium er</i>	22	<i>doxycycline hyclate</i>	40
DERMA-SMOOTH/FS		<i>diclofenac-misoprostol</i>	24	<i>doxycycline monohydrate</i>	40
BODY	193	<i>dicloxacillin sodium</i>	40	<i>doxylamine-pyridoxine</i>	135
DERMA-SMOOTH/FS		<i>dicyclomine hcl</i>	134	DRISDOL	169
SCALP	193	<i>diethylpropion hcl er</i>	101	<i>dronabinol</i>	135
DESCOVY	33	DIFICID	36	<i>drospiren-eth estrad-levomefol</i> .	106
DESFERAL	104	<i>diflorasone diacetate</i>	193	<i>drospirenone-ethinyl estradiol</i> ..	106
<i>desipramine hcl</i>	67	<i>diflunisal</i>	28	DROXIA	152
<i>desloratadine</i>	181	<i>difluprednate</i>	175	DSUVIA	25
<i>desmopressin ace spray refrig.</i> ..	133	Digox	60	DUAKLIR PRESSAIR	186
<i>desmopressin acetate</i>	133	<i>digoxin</i>	60	DUAVEE	127
<i>desmopressin acetate spray</i>	133	<i>dihydroergotamine mesylate</i>	83	DULERA	186
<i>desogestrel-ethinyl estradiol</i>	106	DILANTIN	75	<i>duloxetine hcl</i>	67
<i>desonide</i>	193	DILANTIN INFATABS	75	DUOBRII	194
<i>desoximetasone</i>	193	DILANTIN-125	75	DUO-CARE TEST	117
<i>desvenlafaxine er</i>	67	DILAUDID	24, 25	DUOPA	70
<i>desvenlafaxine succinate er</i>	67	<i>diltiazem hcl</i>	59	DUPIXENT	156
<i>dexamethasone</i>	123	<i>diltiazem hcl er</i>	59	DUREZOL	175
<i>dexamethasone (la)</i>	123	<i>diltiazem hcl er beads</i>	58	DUROLANE	29
DEXAMETHASONE		<i>diltiazem hcl er coated beads</i>	59	<i>dutasteride</i>	142
INTENSOL	123	<i>dilt-xr</i>	59	<i>dutasteride-tamsulosin hcl</i>	142
<i>dexamethasone sodium</i>		<i>dimethyl fumarate</i>	86	DUVYZAT	88
<i>phosphate</i>	175	<i>dimethyl fumarate starter pack</i> ..	86	<i>d-xylose</i>	164
DEXCOM G6 RECEIVER	117	DIOVAN	53	DYANAVEL XR	80
DEXCOM G6 SENSOR	117	DIOVAN HCT	52	DYMISTA	180
DEXCOM G6 TRANSMITTER		DIPENTUM	137	DYRENIUM	60
.....	117	<i>diphenhydramine hcl</i>	181	DYSPORT	82
DEXCOM G7 15 DAY		<i>diphenoxylate-atropine</i>	135	E.E.S. 400	36
SENSOR	117	DIPROLENE	194	E.E.S. GRANULES	36
DEXCOM G7 RECEIVER	117	<i>dipyridamole</i>	152	<i>easy plus ii glucose test</i>	117
DEXCOM G7 SENSOR	117	DISKETS	25	EASY STEP TEST	117
DEXIFOL	169	<i>disopyramide phosphate</i>	53	<i>easy talk blood glucose test</i>	117
DEXILANT	141	<i>disulfiram</i>	64	<i>easy trak blood glucose test</i>	117
<i>dexlansoprazole</i>	141	<i>divalproex sodium</i>	75	EASYGLUCO	117
<i>dexmethylphenidate hcl</i>	80	<i>divalproex sodium er</i>	75	EASYMAX 15 TEST	117
<i>dexmethylphenidate hcl er</i>	80	DIVIGEL	127	EASYMAX TEST	117
DEXONTO 0.4%	123	DOCIVYX	49	EASYPRO BLOOD	
DEXTENZA	175	<i>dofetilide</i>	53	GLUCOSE TEST	117
<i>dextroamphetamine sulfate</i>	80	Dolishale	106	EASYPRO PLUS	117
<i>dextroamphetamine sulfate er</i>	80	<i>donepezil hcl</i>	66	EBGLYSS	192
DEXYCU	175	DOPTELET	152	<i>econazole nitrate</i>	190
DHIVY	70	DOPTELET SPRINKLE	152	ECONTRA ONE-STEP	106
DIACOMIT	75	DORYX MPC	40	ECOTRIN LOW STRENGTH ..	28
DIATHRIVE GLUCOSE TEST		<i>dorzolamide hcl-timolol mal</i>	173	ECOZA	190
.....	117	<i>dorzolamide hcl-timolol mal pf</i> .	173	<i>ec-rx estradiol</i>	127
<i>diazepam</i>	75	Dotti	127	<i>ec-rx progesterone</i>	131

<i>ec-rx testosterone</i>	93	EMEND BIPACK.....	135	EPSOLAY.....	197
EDARBI.....	53	EMEND TRIPACK.....	136	<i>eq aspirin low dose</i>	28
EDARBYCLOR.....	52	EMFLAZA.....	123, 124	<i>eq blood glucose test</i>	118
EDLUAR.....	82	EMGALITY.....	83, 84	<i>eq nicotine</i>	91
EDURANT.....	31	EMGALITY (300 MG DOSE)...	83	<i>eq nicotine polacrilex</i>	91
<i>efavirenz</i>	31	EMPAVELI.....	151	<i>eq nicotine step 3</i>	91
EFFER-K.....	164	EMROSI.....	197	<i>eq aspirin low dose</i>	28
EFFEXOR XR.....	67	EMSAM.....	67	EQUETRO.....	72
EFFIENT.....	152	<i>emtricitabine-tenofovir df</i>	33	<i>ergocalciferol</i>	170
EGRIFTA WR.....	129	EMTRIVA.....	31	ERGOMAR.....	83
ELELYSO.....	126	EMVERM.....	30	<i>ergotamine-caffeine</i>	83
<i>element compact test</i>	117	Emzahh.....	106	ERIVEDGE.....	42
ELEMENT TEST.....	117	<i>enalapril maleate</i>	50, 51	ERLEADA.....	42
ELEPSIA XR.....	75	<i>enalapril-hydrochlorothiazide</i> ...	50	<i>erlotinib hcl</i>	45
ELESTRIN.....	127	ENBRACE HR.....	166	Errin.....	107
<i>eletriptan hydrobromide</i>	84	ENBREL.....	156	ERTACZO.....	190
ELFABRIO.....	126	ENBREL MINI.....	156	<i>ery</i>	188
ELFOLATE PLUS.....	169	ENBREL SURECLICK.....	156	ERYPED 400.....	36
ELIGARD.....	42	ENCARE.....	143	Ery-Tab.....	36
Elinest.....	106	ENDARI.....	152	<i>erythromycin</i>	36, 174, 188
ELIQUIS.....	146	Endocet.....	25	<i>erythromycin base</i>	36
ELIQUIS (1.5 MG PACK).....	146	ENDOMETRIN.....	131	<i>erythromycin ethylsuccinate</i>	36
ELIQUIS (2 MG PACK).....	146	Enilloring.....	106	ERZOFRI.....	72
ELIQUIS DVT/PE STARTER		ENLITE GLUCOSE SENSOR.....	118	ESBRIET.....	185
PACK.....	146	<i>enoxaparin sodium</i>	146	<i>escitalopram oxalate</i>	67
Elixophyllin.....	187	Enskyce.....	107	<i>esomeprazole magnesium</i>	141
ELLA.....	106	ENSPRYNG.....	84	ESPEROCT.....	150
ELMIRON.....	144	ENSTILAR.....	191	Estarylla.....	107
ELOCTATE.....	150	<i>entacapone</i>	70	<i>estazolam</i>	82
Eluryng.....	106	ENTADFI.....	142	<i>estradiol</i>	127
ELYXYB.....	21	<i>entecavir</i>	37	<i>estradiol valerate</i>	127
EMBECTA AUTOSHIELD		ENTRESTO.....	61	<i>estradiol-norethindrone acet</i> ...	128
DUO.....	117	ENTYVIO.....	154	ESTRING.....	128
EMBECTA INSULIN SYR		ENTYVIO PEN.....	156	ESTROGEL.....	128
ULTRAFINE.....	117	<i>enulose</i>	138	<i>eszopiclone</i>	82
EMBECTA INSULIN		ENVARUSUS XR.....	164	<i>ethacrynic acid</i>	60
SYRINGE U-500.....	117	EOHILIA.....	139	<i>ethambutol hcl</i>	34
EMBECTA PEN NEEDLE		EPANED.....	51	<i>ethosuximide</i>	75
NANO.....	117	EPCLUSA.....	37	<i>etodolac</i>	23
EMBECTA PEN NEEDLE		EPIDIOLEX.....	75	<i>etodolac er</i>	23
ULTRAFINE.....	118	EPIDUO FORTE.....	188	<i>etonogestrel-ethinyl estradiol</i> ...	107
EMBRACE BLOOD		<i>epinastine hcl</i>	172	<i>etoposide</i>	50
GLUCOSE TEST.....	118	<i>epinephrine</i>	179	EUCRISA.....	192
EMBRACE EVO BLOOD		<i>epinephrine professional</i>	179	EUFLEXXA.....	29
GLUCOSE TEST.....	118	EPINEPHRINESNAP-EMS....	179	EULEXIN.....	42
EMBRACE PRO GLUCOSE		EPINEPHRINESNAP-V.....	179	EVAMIST.....	128
TEST.....	118	EPIPEN 2-PAK.....	179	EVEKEO.....	80
EMBRACE TALK GLUCOSE		EPIPEN JR 2-PAK.....	179	EVENITY.....	129
TEST.....	118	<i>epplerenone</i>	51	EVERSENSE 365	
EMBRACE WAVE BLOOD		EPOGEN.....	148	SENSOR/HOLDER.....	118
GLUCOSE.....	118	<i>epoprostenol sodium</i>	63	EVERSENSE 365 SMART	
EMEND.....	136	EPRONTIA.....	75	TRANSMIT.....	118

EVERSENSE			
SENSOR/HOLDER.....	118	Fexmid.....	88
EVERSENSE SMART		FIASP.....	96
TRANSMITTER.....	118	FIASP FLEXTOUCH.....	96
EVOLUTION AUTOCODE....	118	FIASP PENFILL.....	96
EVOTAZ.....	33	FIASP PUMPCART.....	96
EVOXAC.....	198	FIBRYGA.....	147
EVRYSDI.....	85	FIFTY50 GLUCOSE TEST 2.0	118
EXELDERM.....	190	FILSPARI.....	144
<i>exemestane</i>	42	FILSUVEZ.....	197
EXFORGE.....	52	FINACEA.....	197
EXFORGE HCT.....	52	<i>finasteride</i>	143
EXJADE.....	104	FINTEPLA.....	76
EYLEA.....	178	Finzala.....	107
EYSUVIS.....	175	FIORICET.....	22
EZALLOR SPRINKLE.....	55	FIRAZYR.....	161
<i>ezetimibe</i>	54	FIRDAPSE.....	85
<i>ezetimibe-simvastatin</i>	56	FIRMAGON.....	43
FA-8.....	170	FIRMAGON (240 MG DOSE)...	43
FABHALTA.....	152	FIRVANQ.....	38
Falmina.....	107	FLAREX.....	175
<i>famciclovir</i>	34	<i>flavoxate hcl</i>	145
<i>famotidine</i>	137	FLEBOGAMMA DIF.....	162
FANAPT.....	72	<i>flecainide acetate</i>	53
FANAPT TITRATION PACK		FLEQSUVY.....	88
A.....	72	FLOLAN.....	63
FANAPT TITRATION PACK		<i>flolipid</i>	55
C.....	72	FLORIVA.....	170
FARXIGA.....	100	<i>fluconazole</i>	30
FASENRA.....	185	<i>flucytosine</i>	30
FASENRA PEN.....	185	<i>fludrocortisone acetate</i>	124
FC2 FEMALE CONDOM.....	107	<i>flunisolide</i>	184
<i>febuxostat</i>	21	<i>fluocinolone acetonide</i>	194, 198
FEIBA.....	147	<i>fluocinolone acetonide body</i>	194
Feirza 1.5/30.....	107	<i>fluocinolone acetonide scalp</i>	194
Feirza 1/20.....	107	<i>fluocinonide</i>	194
<i>felbamate</i>	75	<i>fluocinonide emulsified base</i>	194
<i>felodipine er</i>	59	<i>fluorometholone</i>	175
FEMARA.....	42	<i>fluorouracil</i>	189
FEMCAP.....	107	<i>fluoxetine hcl</i>	67
FEMLYV.....	107	<i>fluoxetine hcl (pmdd)</i>	90
FEMRING.....	128	<i>fluphenazine decanoate</i>	72
<i>fenofibrate</i>	55	<i>fluphenazine hcl</i>	72
<i>fenofibrate micronized</i>	54, 55	<i>flurandrenolide</i>	194
<i>fenofibric acid</i>	55	<i>flurazepam hcl</i>	82
<i>fenoprofen calcium</i>	23	<i>flurbiprofen</i>	23
<i>fentanyl</i>	25	<i>flurbiprofen sodium</i>	175
<i>ferotransic</i>	170	<i>fluticasone furoate-vilanterol</i> ...	186
FERRIPROX.....	104	<i>fluticasone propionate</i>	184, 194
FERRIPROX TWICE-A-DAY	104	<i>fluticasone propionate diskus</i> ...	185
FETZIMA.....	67	<i>fluticasone propionate hfa</i>	185
FETZIMA TITRATION.....	67	<i>fluticasone-salmeterol</i>	186
		<i>fluvastatin sodium</i>	55
		<i>fluvastatin sodium er</i>	55
		<i>fluvoxamine maleate</i>	65
		<i>fluvoxamine maleate er</i>	65
		FML FORTE.....	175
		FML LIQUIFILM.....	175
		FOCALIN XR.....	80
		<i>folagent dha</i>	170
		<i>folamax</i>	170
		<i>folamed dha</i>	170
		<i>folaprima</i>	170
		<i>folate</i>	170
		<i>folbee</i>	170
		FOLGARD OS.....	170
		<i>folic acid</i>	170
		<i>folite</i>	170
		FOLIVANE-OB.....	166
		FOLLISTIM AQ.....	122
		FOLVITE-D.....	170
		<i>fondaparinux sodium</i>	146
		FORA 6 CONNECT.....	118
		FORA 6 CONNECT/GTEL	
		TEST.....	118
		FORA D40/G31 BLOOD	
		GLUCOSE.....	118
		FORA G20 BLOOD	
		GLUCOSE TEST.....	118
		FORA GD20 TEST.....	118
		FORA GD50 BLOOD	
		GLUCOSE TEST.....	118
		FORA GTEL BLOOD	
		GLUCOSE TEST.....	118
		FORA TN'G ADVANCE PRO	118
		FORA TN'G/TN'G VOICE.....	118
		FORA V10 BLOOD	
		GLUCOSE TEST.....	119
		FORA V30A BLOOD	
		GLUCOSE TEST.....	119
		FORACARE GD40 TEST.....	119
		FORACARE PREMIUM V10	
		TEST.....	119
		FORACARE TEST N GO	
		TEST.....	119
		FORTEO.....	103
		FOSAMAX.....	102
		FOSAMAX PLUS D.....	102
		<i>fosamprenavir calcium</i>	31
		<i>fosinopril sodium</i>	51
		<i>fosinopril sodium-hctz</i>	50
		FOSRENOL.....	130
		FOSTEUM PLUS.....	170
		FOTIVDA.....	45
		FOUNDAYO.....	101

FRAGMIN.....	146	Gemmily	107	<i>gnp nicotine mini</i>	91
FREESTYLE INSULINX		GEMTESA.....	145	<i>gnp nicotine polacrilex</i>	91
TEST.....	119	<i>generlac</i>	138	GOCOVRI.....	70
FREESTYLE LIBRE 14 DAY		Gengraf.....	164	GOLYTELY	138
SENSOR.....	119	GENOTROPIN.....	125	GOMEKLI.....	45
FREESTYLE LIBRE 2 PLUS		GENOTROPIN MINQUICK..	125	GONAL-F.....	123
SENSOR.....	119	<i>gentamicin sulfate</i>	174, 189	GONAL-F RFF REDIRECT....	123
FREESTYLE LIBRE 2		GENULTIMATE TEST	119	<i>goodsense aspirin low dose</i>	28
SENSOR.....	119	GENVISC 850.....	29	<i>goodsense nicotine</i>	91
FREESTYLE LIBRE 3 PLUS		GENVOYA.....	33	GRALISE.....	90
SENSOR.....	119	GEODON.....	72	<i>granisetron hcl</i>	136
FREESTYLE LIBRE 3		<i>ght test</i>	119	GRANIX.....	148
READER.....	119	GIAPREZA.....	62	GRASTEK.....	153
FREESTYLE LIBRE 3		GILENYA.....	86	<i>griseofulvin microsize</i>	30
SENSOR.....	119	GILOTTRIF.....	45	<i>griseofulvin ultramicrosize</i>	30
FREESTYLE LITE TEST.....	119	GIMOTI.....	139	<i>guanfacine hcl</i>	62
FREESTYLE PRECISION		GLASSIA.....	179	<i>guanfacine hcl er</i>	80
NEO TEST.....	119	<i>glatiramer acetate</i>	86	GUARDIAN 4 GLUCOSE	
FREESTYLE TEST.....	119	Glatopa.....	86	SENSOR.....	120
<i>frovatriptan succinate</i>	84	GLEEVEC.....	45	GUARDIAN 4	
FRUZAQLA.....	45	GLEOLAN.....	164	TRANSMITTER.....	120
<i>ft aspirin</i>	28	GLEOSTINE.....	41	GUARDIAN SENSOR (3).....	120
<i>ft aspirin low dose</i>	28	<i>glimepiride</i>	100	<i>guardian sensor 3</i>	120
<i>ft folic acid</i>	170	<i>glipizide</i>	101	<i>gutstor</i>	135
<i>ft nicotine</i>	91	<i>glipizide er</i>	101	GVOKE HYPOPEN 1-PACK..	125
<i>ft nicotine mini</i>	91	<i>glipizide-metformin hcl</i>	94	GVOKE HYPOPEN 2-PACK..	125
FULPHILA.....	148	GLOPERBA.....	21	GVOKE PFS.....	125
FUROSCIX.....	60	<i>glucagon emergency</i>	125	GYNAZOLE-1	145
<i>furosemide</i>	60	GLUCO PERFECT 3 TEST	119	HABITROL.....	91
FUSION PLUS.....	170	GLUCOCARD 01 SENSOR		HADLIMA.....	156
Fyavolv.....	128	PLUS.....	119	HADLIMA PUSHTOUCH.....	156
FYCOMPA.....	76	GLUCOCARD EXPRESSION		HAEGARDA.....	161
FYLNETRA.....	148	TEST.....	119	Hailey 1.5/30.....	107
Fyremadel.....	123	GLUCOCARD SHINE TEST..	119	Hailey 24 Fe.....	107
<i>gabapentin</i>	76	GLUCOCARD VITAL TEST..	119	Hailey Fe 1.5/30.....	107
GALAFOLD.....	126	GLUCOCARD X-SENSOR....	119	Hailey Fe 1/20.....	107
<i>galantamine hydrobromide</i>	66	GLUCOCOM TEST.....	119	<i>halcinonide</i>	194
<i>galantamine hydrobromide er</i>	66	GLUCONAVII BLOOD		HALCION.....	82
GAMMAGARD.....	162	GLUCOSE TEST.....	120	<i>halobetasol propionate</i>	194
GAMMAGARD S/D LESS		<i>glucose meter test</i>	120	HALOG.....	194
IGA.....	162	<i>glyburide</i>	101	<i>haloperidol</i>	72
GAMMAKED.....	162	<i>glyburide-metformin</i>	94	<i>haloperidol decanoate</i>	72
GAMMAPLEX.....	162	GLYCATE.....	134	<i>haloperidol lactate</i>	72
GAMUNEX-C.....	162	<i>glycolic acid</i>	191	HARVONI.....	37
<i>ganirelix acetate</i>	123	<i>glycopyrrolate</i>	134	Heather.....	107
<i>gatifloxacin</i>	174	Glydo.....	195	<i>h-e-b aspirin</i>	28
GATTEX.....	139	GLYXAMBI.....	100	HEMADY	124
GAVRETO.....	45	<i>gnp adult aspirin low strength</i>	28	HEMANGEOL.....	57
<i>ge100 blood glucose test</i>	119	<i>gnp aspirin</i>	28	HEMLIBRA.....	150
GEL-ONE.....	29	<i>gnp easy touch glucose test</i>	120	HEMOCYTE PLUS.....	170
GELSYN-3.....	29	<i>gnp folic acid</i>	170	HEMOFIL M.....	150
<i>gemfibrozil</i>	55	<i>gnp nicotine</i>	91	<i>heparin sod (porcine) in d5w</i>	146

<i>heparin sodium (porcine)</i>	146	<i>hydromorphone hcl</i>	25	IMVEXXY MAINTENANCE	
<i>heparin sodium (porcine) pf</i>	146	<i>hydromorphone hcl er</i>	25	PACK.....	128
HER STYLE.....	107	<i>hydroxychloroquine sulfate</i>	31, 161	IMVEXXY STARTER PACK.....	128
HETLIOZ.....	82	<i>hydroxyurea</i>	48	IN TOUCH BLOOD	
HETLIOZ LQ.....	82	<i>hydroxyzine hcl</i>	181	GLUCOSE TEST.....	120
Hidex 6-Day.....	124	<i>hydroxyzine pamoate</i>	181	INBRIJA.....	70
HIZENTRA.....	162	HYFTOR.....	196	Incassia.....	107
HORIZANT.....	90	<i>hylavite</i>	170	INCRELEX.....	129
HULIO (2 PEN).....	156	<i>hylazine</i>	170	INCRUSE ELLIPTA.....	180
HULIO (2 SYRINGE).....	156	HYMOVIS.....	29	<i>indapamide</i>	60
HUMALOG.....	96, 97	<i>hyoscyamine sulfate</i>	134	INDERAL LA.....	57
HUMALOG KWIKPEN.....	96	<i>hyoscyamine sulfate er</i>	134	INDERAL XL.....	57
HUMALOG MIX 50/50		HYPERRHO MINI-DOSE.....	162	INDOCIN.....	23
KWIKPEN.....	97	HYPERSAL.....	184	Indocin.....	23
HUMALOG MIX 75/25.....	97	HYQVIA.....	162	<i>indomethacin</i>	23
HUMALOG MIX 75/25		HYRIMOZ.....	157	<i>indomethacin er</i>	23
KWIKPEN.....	97	HYRIMOZ-PLAQUE		INFINITY BLOOD GLUCOSE	
HUMATE-P.....	147	PSORIASIS START.....	157	TEST.....	120
HUMATIN.....	30	HYSINGLA ER.....	25	INFINITY VOICE.....	120
HUMATROPE.....	125	HYZAAR.....	52	INFLECTRA.....	154
HUMIRA (1 PEN).....	156	<i>ibandronate sodium</i>	102	<i>infliximab</i>	154
HUMIRA (2 PEN).....	157	IBRANCE.....	45	INGREZZA.....	85
HUMIRA (2 SYRINGE).....	157	IBSRELA.....	138	INLYTA.....	45
HUMIRA-PSORIASIS/UEVIT		IBTROZI.....	45	INNOPRAN XL.....	57
STARTER.....	157	Ibu.....	23	INPEFA.....	61
HUMULIN 70/30.....	97	<i>ibuprofen</i>	23	INQOVI.....	41
HUMULIN 70/30 KWIKPEN....	97	<i>ibuprofen-famotidine</i>	24	INREBIC.....	45
HUMULIN N.....	97	ICAR-C PLUS.....	170	<i>insulin degludec flextouch</i>	97
HUMULIN N KWIKPEN.....	97	<i>icatibant acetate</i>	161	<i>insulin glargine max solostar</i>	97
HUMULIN R.....	97	Iclevia.....	107	<i>insulin glargine solostar</i>	97
HUMULIN R U-500		ICLUSIG.....	45	<i>insulin glargine-yfgn</i>	97
KWIKPEN.....	97	<i>icosapent ethyl</i>	56	INTELENCE.....	31
HW EMBRACE PRO		IDELVION.....	151	INTRAROSA.....	129
GLUCOSE TEST.....	120	IDHIFA.....	48	Introvale.....	107
HW EMBRACE TALK		IFE-BIMIX 30/1.....	143	INTUNIV.....	80
GLUCOSE TEST.....	120	IGLUCOSE TEST STRIPS.....	120	INVEGA HAFYERA.....	72
HYALGAN.....	29	IHEALTH BLOOD GLUCOSE		INVEGA SUSTENNA.....	72
HYCAMTIN.....	50	TEST STR.....	120	INVEGA TRINZA.....	73
<i>hydralazine hcl</i>	62	ILARIS.....	164	INVELTYS.....	175
HYDREA.....	48	ILEVRO.....	175	INVOKAMET.....	100
<i>hydrochlorothiazide</i>	60	ILUMYA.....	154	INVOKAMET XR.....	100
<i>hydrocod poli-chlorphe poli er</i>	182	<i>imatinib mesylate</i>	45	INVOKANA.....	100
<i>hydrocodone bitartrate er</i>	25	IMBRUVICA.....	45	INZIRQO.....	60
<i>hydrocodone bit-homatrop mbr</i>	182	IMCIVREE.....	129	<i>iodine tincture</i>	196
<i>hydrocodone-acetaminophen</i>	25	<i>imipramine hcl</i>	67	IOPIDINE.....	178
<i>hydrocodone-ibuprofen</i>	25	<i>imipramine pamoate</i>	67	<i>ipratropium bromide</i>	180
<i>hydrocortisone</i>	124, 137, 194	<i>imiquimod</i>	189	<i>ipratropium-albuterol</i>	180
<i>hydrocortisone (perianal)</i>	142	<i>imiquimod pump</i>	189	IQIRVO.....	139
<i>hydrocortisone ace-pramoxine</i>	142	<i>imkeldi</i>	45	<i>irbesartan</i>	53
<i>hydrocortisone butyrate</i>	194	IMPOYZ.....	194	<i>irbesartan-hydrochlorothiazide</i>	52
<i>hydrocortisone valerate</i>	194	IMULDOSA.....	157	IRESSA.....	45
<i>hydrocortisone-acetic acid</i>	198	IMURAN.....	164	ISENTRESS.....	31, 32

ISENTRESS HD	31	Kaitlib Fe.....	108	<i>kosher prenatal plus iron</i>	166
Isibloom.....	107	KALETRA.....	33	KOVALTRY	150
<i>isoniazid</i>	34	Kalliga.....	108	<i>kp aspirin</i>	28
<i>isosorbide dinitrate</i>	62	KALYDECO.....	183	K-PHOS.....	165
<i>isosorbide mononitrate</i>	62	KAPSPARGO SPRINKLE.....	57	KRAZATI.....	48
<i>isosorbide mononitrate er</i>	62	KARBINAL ER.....	181	KRINTAFEL.....	31
<i>isotretinoin</i>	188	Kariva.....	108	Kristalose.....	138
<i>isradipine</i>	59	KATERZIA.....	59	KRYSTEXXA.....	21
ISTURISA.....	115	Kelnor 1/35.....	108	Kurvelo.....	108
ITOVEBI.....	45	KEPPRA.....	76	KUVAN.....	129
<i>itraconazole</i>	30	KEPPRA XR.....	76	KYLEENA.....	108
<i>ivermectin</i>	30, 197	KERASTAT	197	KYZATREX.....	93
IWILFIN.....	48	KERENDIA.....	51	<i>l.e.t.</i>	195
IXINITY.....	151	KESIMPTA.....	86	<i>l.e.t. (racepinephrine)</i>	195
IYUZEH.....	177	<i>ketoconazole</i>	30, 190, 191	<i>labetalol hcl</i>	57
JADENU	104	Ketodan.....	190	<i>lactated ringers</i>	178
JADENU SPRINKLE.....	104	KETO-DIASTIX.....	120	LACTEROL.....	135
Jaimiess.....	107	<i>ketoprofen</i>	23	<i>lactovive</i>	135
JAKAFI.....	45	<i>ketoprofen er</i>	23	<i>lactulose</i>	138
JAKAFI XR.....	45	<i>ketorolac tromethamine</i>	23, 175	LAMICTAL.....	76
JALYN.....	143	KETOSTIX.....	120	LAMICTAL ODT.....	76
JANUMET	95	KEVEYIS.....	61	LAMICTAL STARTER.....	76
JANUMET XR.....	95	KEVZARA.....	157	LAMICTAL XR.....	76
JANUVIA.....	95	<i>keyfolic</i>	170	<i>lamivudine</i>	32, 37
JARDIANCE.....	100	KHINDIVI.....	124	<i>lamivudine-zidovudine</i>	33
JASCAYD.....	185	KINERET	157	<i>lamotrigine</i>	76
Jasmiel.....	107	Kionex.....	131	<i>lamotrigine er</i>	76
JATENZO.....	93	KISQALI (200 MG DOSE).....	45	<i>lamotrigine starter kit-blue</i>	76
JAYPIRCA.....	45	KISQALI (400 MG DOSE).....	45	<i>lamotrigine starter kit-green</i>	76
Jencycla.....	108	KISQALI (600 MG DOSE).....	46	<i>lamotrigine starter kit-orange</i>	76
<i>jenliva prenatal/postnatal</i>	166	KITABIS PAK (W/ NEBULIZER).....	183	LAMPIT	38
JENTADUETO	95	KLARITY-A.....	174	LANOXIN.....	60
JENTADUETO XR.....	95	KLARITY-L.....	176	<i>lanreotide acetate</i>	92
Jinteli.....	128	KLISYRI (250 MG).....	189	<i>lansoprazole</i>	141
JIVI.....	150	KLISYRI (350 MG).....	189	<i>lanthanum carbonate</i>	130
JOENJA.....	163	KLONOPIN.....	76	LANTUS.....	97
Jolessa.....	108	Klor-Con.....	165	LANTUS SOLOSTAR.....	97
JORNAY PM.....	80	Klor-Con 10.....	165	Larin 1.5/30.....	108
JOURNAVX.....	22	Klor-Con M10.....	165	Larin 1/20.....	108
Joyeaux.....	108	Klor-Con M15.....	165	Larin 24 Fe.....	108
JUBBONTI.....	102	Klor-Con M20.....	165	Larin Fe 1.5/30.....	108
JUBLIA.....	190	KLOXXADO.....	90	Larin Fe 1/20.....	108
Juleber.....	108	<i>kls aspirin low dose</i>	28	<i>latanoprost</i>	177
JULUCA.....	33	KLS QUIT2.....	91	LATUDA.....	73
Junel 1.5/30.....	108	KLS QUIT4.....	91	LAZCLUZE.....	46
Junel 1/20.....	108	KOATE.....	150	LDL CARE.....	170
Junel Fe 1.5/30.....	108	KOATE-DVI.....	150	LDO PLUS.....	195
Junel Fe 1/20.....	108	KOMZIFTI.....	48	LEDERLE LEUCOVORIN.....	50
Junel Fe 24.....	108	KONVOMEPI.....	141	<i>ledipasvir-sofosbuvir</i>	37
JUXTAPID.....	56	KORLYM.....	129	<i>leflunomide</i>	161
JYLAMVO.....	41	KOSELUGO	46	LENVIMA (10 MG DAILY DOSE).....	46
JYNARQUE.....	129				

LENVIMA (12 MG DAILY DOSE).....	46	<i>lidocaine hcl urethral/mucosal</i>	195	LOTREL.....	50
LENVIMA (14 MG DAILY DOSE).....	46	<i>lidocaine viscous hcl</i>	198	<i>lovastatin</i>	55
LENVIMA (18 MG DAILY DOSE).....	46	<i>lidocaine-prilocaine</i>	195	LOVAZA.....	56
LENVIMA (20 MG DAILY DOSE).....	46	<i>lidocanna</i>	195	LOVENOX.....	147
LENVIMA (24 MG DAILY DOSE).....	46	LIDODERM.....	195	Low-Ogestrel.....	109
LENVIMA (4 MG DAILY DOSE).....	46	LIKMEZ.....	38	<i>loxapine succinate</i>	73
LENVIMA (8 MG DAILY DOSE).....	46	LILETTA (52 MG).....	109	Lo-Zumandimine.....	109
LEQSELVI.....	157	<i>linezolid</i>	38	<i>lubiprostone</i>	138
LESCOL XL.....	55	LINZESS.....	138	LUCEMYRA.....	90
Lessina.....	108	<i>liothyronine sodium</i>	132	LUCENTIS.....	178
LETAIRIS.....	63	LIPITOR.....	55	Luizza 1.5/30.....	109
<i>letrozole</i>	43	LIPOFEN.....	55	Luizza 1/20.....	109
<i>leucovorin calcium</i>	50	<i>liraglutide</i>	95	<i>luliconazole</i>	190
LEUKERAN.....	41	<i>lisdexamphetamine dimesylate</i> 80, 81		LUMAKRAS.....	48
LEUKINE.....	148	<i>lisinopril</i>	51	LUMIGAN.....	177
<i>leuprolide acetate</i>	43	<i>lisinopril-hydrochlorothiazide</i>	50	LUMRYZ.....	89
<i>levalbuterol hcl</i>	182	LITFULO.....	157	LUMRYZ STARTER PACK....	89
<i>levalbuterol tartrate</i>	182	<i>lithium carbonate</i>	85	LUNESTA.....	82
LEVBID.....	134	<i>lithium carbonate er</i>	85	LUPKYNIS.....	164
<i>levetiracetam</i>	77	LITHOBID.....	85	LUPRON DEPOT (1-MONTH).....	43
<i>levetiracetam er</i>	77	LITHOSTAT.....	144	LUPRON DEPOT (3-MONTH).....	43
<i>levobunolol hcl</i>	173	LIVALO.....	55	LUPRON DEPOT (4-MONTH).....	43
<i>levocarnitine</i>	103	LIVDELZI.....	139	LUPRON DEPOT (6-MONTH).....	43
<i>levocetirizine dihydrochloride</i> ..	181	LIVMARLI.....	139	LUPRON DEPOT-PED (1-MONTH).....	103
<i>levofloxacin</i>	37, 174	LIVTENCITY.....	34	LUPRON DEPOT-PED (3-MONTH).....	103
Levonest.....	109	L-MESITRAN SOFT WOUND.....	198	LUPRON DEPOT-PED (6-MONTH).....	103
<i>levonorgest-eth estrad 91-day</i> ..	109	LMR PLUS.....	195	LUTRATE DEPOT.....	43
<i>levonorgest-eth estradiol-iron</i> ..	109	LO LOESTRIN FE.....	109	LYBALVI.....	73
<i>levonorgestrel</i>	109	LODINE.....	23	Lyleq.....	109
<i>levonorgestrel-ethinyl estrad</i>	109	LODOCO.....	62	LYNKUET.....	128
<i>levonorg-eth estrad triphasic</i>	109	Loestrin 1.5/30 (21).....	109	LYNPARZA.....	48
Levora 0.15/30 (28).....	109	Loestrin 1/20 (21).....	109	LYRICA.....	77
<i>levorphanol tartrate</i>	25	Loestrin Fe 1.5/30.....	109	LYRICA CR.....	90
Levo-T.....	132	Loestrin Fe 1/20.....	109	LYSIPLEX PLUS.....	170
<i>levothyroxine sodium</i>	132	Lofena.....	23	LYSODREN.....	43
Levoxyl.....	132	Lojaimiess.....	109	LYTGOBI (12 MG DAILY DOSE).....	46
LEVSIN.....	134	LOKELMA.....	131	LYTGOBI (16 MG DAILY DOSE).....	46
LEVSIN/SL.....	134	Lomaira.....	101	LYTGOBI (20 MG DAILY DOSE).....	46
LEXAPRO.....	68	LOMOTIL.....	135	LYUMJEV.....	97
LEXETTE.....	195	LONSURF.....	41	LYUMJEV KWIKPEN.....	97
LIALDA.....	137	<i>loperamide hcl</i>	135	Lyza.....	109
LIBRAX.....	137	LOPRESSOR.....	57	MACROBID.....	38
LICART.....	23	<i>lorazepam</i>	65	MACRODANTIN.....	38
<i>lidocaine</i>	195	LORBRENA.....	46	MALARONE.....	31
<i>lidocaine hcl</i>	195, 198	LOREEV XR.....	65	<i>malathion</i>	197
		Loryna.....	109	<i>marlissa</i>	109
		<i>losartan potassium</i>	53		
		<i>losartan potassium-hctz</i>	52		
		LOTEMAX.....	176		
		LOTEMAX SM.....	176		
		<i>loteprednol etabonate</i>	176		

MARPLAN.....	68	<i>metformin hcl er</i>	94	MIDAZOLAM+SYRSPEND	
MATERNACEL.....	166	<i>metformin hcl er (mod)</i>	94	SF.....	82
MATULANE.....	41	<i>metformin hcl er (osm)</i>	94	<i>midodrine hcl</i>	62
Matzim La.....	59	<i>methadone hcl</i>	25	MIEBO.....	176
MAVENCLAD (10 TABS).....	86	Methadone Hcl Intensol.....	25	MIGERGOT.....	83
MAVENCLAD (4 TABS).....	86	<i>methadone hcl-sodium chloride</i> ..	25	<i>miglitol</i>	94
MAVENCLAD (5 TABS).....	86	METHADOSE.....	25	<i>mighustat</i>	126
MAVENCLAD (6 TABS).....	86	Methadose.....	25	Mili.....	110
MAVENCLAD (7 TABS).....	86	METHADOSE SUGAR-FREE..	26	Mimvey.....	128
MAVENCLAD (8 TABS).....	86	<i>methamphetamine hcl</i>	81	MINIMED INSTINCT GLUC	
MAVENCLAD (9 TABS).....	86	<i>methazolamide</i>	61	SENSOR.....	120
MAVYRET.....	37	<i>methenamine hippurate</i>	38	MINIVELLE.....	128
MAXALT.....	84	<i>methenamine mandelate</i>	38	<i>minocycline hcl</i>	41
MAXALT-MLT.....	84	Methergine.....	129	<i>minocycline hcl er</i>	40
MAXIDEX.....	176	<i>methimazole</i>	132	<i>minoxidil</i>	62
MAXITROL.....	173	<i>methitest</i>	93	Minzoya.....	110
MAYZENT.....	86	<i>methocarbamol</i>	88	MIPLYFFA.....	126
MAYZENT STARTER PACK..	86	<i>methotrexate sodium</i>	41, 161	MIRCERA.....	148
<i>mb caps</i>	38	<i>methotrexate sodium (pf)</i>	41	MIRENA (52 MG).....	110
<i>meclizine hcl</i>	136	<i>methoxsalen rapid</i>	191	<i>mirtazapine</i>	68
<i>meclofenamate sodium</i>	23	<i>methscopolamine bromide</i>	134	MIRVASO.....	197
<i>medi tab</i>	170	<i>methyl dopa</i>	62	<i>misoprostol</i>	139
MEDPURA		<i>methylergonovine maleate</i>	129	MITIGARE.....	21
HYDROCORTISONE.....	195	<i>methylphenidate hcl</i>	81	MITOSOL.....	174
MEDROL.....	124	<i>methylphenidate hcl er</i>	81	<i>mm aspirin</i>	28
<i>medroxyprogesterone acetate</i>		<i>methylphenidate hcl er (cd)</i>	81	<i>m-natal plus</i>	166
.....	109, 110, 131	<i>methylphenidate hcl er (la)</i>	81	<i>modafinil</i>	89
<i>mefenamic acid</i>	23	<i>methylphenidate hcl er (osm)</i>	81	<i>moexipril hcl</i>	51
<i>mefloquine hcl</i>	31	<i>methylphenidate hcl er(diffus)</i>	81	<i>mometasone furoate</i>	184, 195
<i>megestrol acetate</i>	43, 131	<i>methylprednisolone</i>	124	Mondoxyne NI.....	41
MEIJER TRUETEST TEST.....	120	<i>methyltestosterone</i>	93	Mono-Linyah.....	110
MEIJER TRUETRACK TEST.....	120	<i>metoclopramide hcl</i>	136	MONOVISC.....	29
MEKINIST.....	46	<i>metolazone</i>	61	<i>montelukast sodium</i>	184
MEKTOVI.....	46	<i>metoprolol succinate er</i>	57	<i>morphine sulfate</i>	26
Meleya.....	110	<i>metoprolol tartrate</i>	58	<i>morphine sulfate (concentrate)</i> ...	26
<i>meloxicam</i>	23	<i>metoprolol-hydrochlorothiazide</i> ..	57	<i>morphine sulfate er</i>	26
<i>memantine hcl</i>	66	<i>metronidazole</i>	38, 145, 197	<i>morphine sulfate er beads</i>	26
<i>memantine hcl er</i>	66	<i>mexiletine hcl</i>	53	MOTEGRITY.....	139
MENOPUR.....	123	MIACALCIN.....	102	MOTOFEN.....	135
MENOSTAR.....	128	Mibelas 24 Fe.....	110	MOTPOLY XR.....	77
<i>mepерidine hcl</i>	25	MICARDIS.....	53	MOUNJARO.....	95
<i>meprobamate</i>	65	MICARDIS HCT.....	52	MOVANTIK.....	139
<i>mercaptapurine</i>	41	<i>miconazole 3</i>	145	MOVIPREP.....	139
MERILOG.....	98	<i>miconazole-zinc oxide-petrolat</i> ..	190	<i>moxifloxacin hcl</i>	37, 174
MERILOG SOLOSTAR.....	98	MICORT HC.....	195	MS CONTIN.....	26
<i>mesalamine</i>	137, 138	MICRODOT TEST.....	120	MULPLETA.....	152
<i>mesalamine er</i>	137	Microgestin 1.5/30.....	110	MULTAQ.....	53
<i>mesalamine-cleanser</i>	138	Microgestin 1/20.....	110	MULTIGEN.....	171
MESNEX.....	50	Microgestin Fe 1.5/30.....	110	MULTIGEN FOLIC.....	170
MESTINON.....	89	Microgestin Fe 1/20.....	110	MULTIGEN PLUS.....	171
<i>metaxalone</i>	88	<i>midazolam hcl</i>	82	<i>multi pro</i>	171
<i>metformin hcl</i>	94			<i>multivitamin w/fluoride</i>	171

<i>multi-vitamin/fluoride</i>	171	NEFFY	179	NICORETTE MINI	92
<i>multi-vitamin/fluoride/iron</i>	171	NEMLUVIO	196	NICORETTE STARTER KIT ...	92
<i>mupirocin</i>	189	<i>neoke bhb</i>	171	<i>nicotinamide</i>	171
<i>mupirocin calcium</i>	189	<i>neomycin sulfate</i>	30	<i>nicotine</i>	92
MY CHOICE	110	<i>neomycin-bacitracin zn-</i>		<i>nicotine mini</i>	92
MY WAY	110	<i>polymyx</i>	174	<i>nicotine polacrilex</i>	92
MYALEPT	129	<i>neomycin-polymyxin-dexameth</i> ..	173	<i>nicotine polacrilex mini</i>	92
MYCAPSSA	93	<i>neomycin-polymyxin-gramicidin</i>		<i>nicotine step 1</i>	92
<i>mycophenolate mofetil</i>	164	.....	174	<i>nicotine step 2</i>	92
<i>mycophenolate sodium</i>	164	<i>neomycin-polymyxin-hc</i>	173, 198	<i>nicotine step 3</i>	92
MYDAYIS	81	<i>neonatal complete</i>	166	NICOTROL NS	92
MYDCOMBI	177	NEONATAL PLUS	166	<i>nifedipine</i>	59
MYFEMBREE	133	NEO-SYNALAR	189	<i>nifedipine er</i>	59
MYFORTIC	164	<i>neo-vital rx</i>	166	<i>nifedipine er osmotic release</i>	59
MYGLUCOHEALTH TEST ...	120	<i>neovite</i>	171	Nikki	110
MYHIBBIN	164	NEREUS	136	<i>nilutamide</i>	43
MYLERAN	41	NERLYNX	46	<i>nimodipine</i>	59
MYRBETRIQ	145	NESTABS	166	NINLARO	49
MYTESI	135	NESTABS DHA	166	NIPRIDE RTU	62
MYXREDLIN	98	NESTABS ONE	166	<i>nisoldipine er</i>	59
<i>na sulfate-k sulfate-mg sulf</i>	139	Neuac	188	Nitro-Bid	62
<i>nabumetone</i>	23	NEULASTA	148	NITRO-DUR	63
<i>nadolol</i>	58	NEULASTA ONPRO	148	<i>nitrofurantoin</i>	39
<i>nafticillin sodium</i>	40	NEUPOGEN	148	<i>nitrofurantoin macrocrystal</i>	39
<i>naftifine hcl</i>	190	NEUPRO	70	<i>nitrofurantoin monohyd macro</i> ...	39
NAFTIN	190	NEURONTIN	77	<i>nitroglycerin</i>	63
<i>nalmefene hcl</i>	90	NEUTEK 2TEK TEST	120	NITROLINGUAL	63
<i>nalocet</i>	26	NEVANAC	176	NITYR	125
<i>naloxone hcl</i>	90	<i>nevirapine</i>	32	<i>niva thyroid</i>	132
<i>naltrexone hcl</i>	90	<i>nevirapine er</i>	32	NIVA-PLUS	166
NAMZARIC	66	NEW DAY	110	NIVESTYM	148, 149
NAPRELAN	23	NEXAVAR	46	<i>nizatidine</i>	137
<i>naproxen</i>	23	NEXICLON XR	62	Nora-Be	110
<i>naproxen sodium</i>	23	NEXIUM	141	NORDIPEN 5 INJECTION	
<i>naproxen sodium er</i>	23	NEXLETOL	54	DEVICE	125
<i>naproxen-esomeprazole mg</i>	24	NEXLIZET	54	NORDITROPIN FLEXPOR ...	125
<i>naratriptan hcl</i>	84	NEXPLANON	110	<i>norelgestromin-eth estradiol</i>	110
NARCAN	90	NEXTERONE	53	<i>norethin ace-eth estrad-fe</i>	110
NARDIL	68	NEXTSTELLIS	110	<i>norethindrone</i>	111
NASCOBAL	171	NGENLA	125	<i>norethindrone acetate</i>	131
NATACYN	174	<i>niacin (antihyperlipidemic)</i>	56	<i>norethindrone acet-ethinyl est</i> ..	111
<i>natal pnv</i>	166	<i>niacin er (antihyperlipidemic)</i>	56	<i>norethindrone-eth estradiol</i>	128
NATAZIA	110	NIACOR	56	<i>norgesic forte</i>	88
<i>nateglinide</i>	99	NICADAN	171	<i>norgestimate-eth estradiol</i>	111
NATESTO	93	NICAPRIN	171	<i>norgestim-eth estrad triphasic</i> ..	111
NAYZILAM	77	<i>nicardipine hcl</i>	59	NORITATE	197
<i>nebivolol hcl</i>	58	NICAZEL	171	NORLIQVA	59
NEBUPENT	39	NICAZEL FORTE	171	Norlyda	111
Necon 0.5/35 (28)	110	NICODERM CQ	92	Norlyroc	111
Necon 1/35 (28)	110	NICOMIDE	171	NORPACE	53
NEEVO DHA	166	NICORELIEF	92	NORPACE CR	53
<i>nefazodone hcl</i>	68	NICORETTE	92	NORPRAMIN	68

NORTHERA.....	62	NUPLAZID.....	73	OMNIPOD 5 DEXG7G6	
Nortrel 0.5/35 (28).....	111	NURTEC.....	83	INTRO GEN 5.....	120
Nortrel 1/35 (21).....	111	NUTROPIN AQ NUSPIN 10...	125	OMNIPOD 5 DEXG7G6 PODS	
Nortrel 1/35 (28).....	111	NUVARING.....	111	GEN 5.....	120
Nortrel 7/7/7.....	111	NUVESSA.....	146	OMNIPOD DASH INTRO	
<i>nortriptyline hcl</i>	68	NUVIGIL.....	89	(GEN 4).....	120
NORVASC.....	59	NUWIQ.....	150	OMNIPOD DASH PDM (GEN	
NORVIR.....	32	NUZYRA.....	41	4).....	120
NOURIANZ.....	70	Nylia 1/35.....	111	OMNIPOD DASH PODS	
NOVA MAX GLUCOSE TEST		Nylia 7/7/7.....	111	(GEN 4).....	120
.....	120	NYMALIZE.....	59	OMNITROPE.....	126
NOVAREL.....	123	NYPOZI.....	149	OMVOH (300 MG DOSE).....	157
NOVOEIGHT.....	150	<i>nystatin</i>	30, 190, 198	ON CALL EXPRESS BLOOD	
NOVOLIN 70/30.....	98	<i>nystatin-triamcinolone</i>	190	GLUCOSE.....	121
NOVOLIN 70/30 FLEXPEN.....	98	Nystop.....	190	ONAPGO.....	70
NOVOLIN 70/30 FLEXPEN		NYVEPRIA.....	149	<i>ondansetron</i>	136
RELION.....	98	OB COMPLETE.....	167	<i>ondansetron hcl</i>	136
NOVOLIN 70/30 RELION.....	98	OB COMPLETE ONE.....	166	<i>ondansetron hcl +rfid</i>	136
NOVOLIN N.....	98	OB COMPLETE PETITE.....	167	<i>one drop test</i>	121
NOVOLIN N FLEXPEN.....	98	OB COMPLETE PREMIER....	167	<i>one vite womens plus</i>	167
NOVOLIN N FLEXPEN		OB COMPLETE/DHA.....	167	ONETOUCH DELICA PLUS	
RELION.....	98	<i>obizur</i>	150	LANCET30G.....	121
NOVOLIN N RELION.....	98	OCTAGAM.....	163	ONETOUCH DELICA PLUS	
NOVOLIN R.....	98	<i>octreotide acetate</i>	93	LANCET33G.....	121
NOVOLIN R FLEXPEN.....	98	ODACTRA.....	153	ONETOUCH DELICA PLUS	
NOVOLIN R FLEXPEN		ODEFSEY.....	33	LANCING.....	121
RELION.....	98	ODOMZO.....	48	ONETOUCH ULTRA BLUE	
NOVOLIN R RELION.....	98	OFEV.....	185	TEST.....	121
NOVOLOG.....	99	<i>ofloxacin</i>	37, 174, 198	ONETOUCH ULTRA TEST...	121
NOVOLOG 70/30 FLEXPEN		OGSIVEO.....	49	ONETOUCH ULTRASOFT 2	
RELION.....	98	OHTUVAYRE.....	184	LANCETS.....	121
NOVOLOG FLEXPEN.....	98	OJEMDA.....	46	ONETOUCH VERIO.....	121
NOVOLOG FLEXPEN		OJJAARA.....	47	<i>onevite</i>	171
RELION.....	98	<i>olanzapine</i>	73	ONEXTON.....	188
NOVOLOG MIX 70/30.....	99	<i>olanzapine-fluoxetine hcl</i>	90	ONFI.....	77
NOVOLOG MIX 70/30		<i>olmesartan medoxomil</i>	53	ONGENTYS.....	70
FLEXPEN.....	99	<i>olmesartan medoxomil-hctz</i>	52	ONIVYDE.....	50
NOVOLOG MIX 70/30		<i>olmesartan-amlodipine-hctz</i>	52	ONUREG.....	41
RELION.....	99	<i>olopatadine hcl</i>	172, 181	ONYDA XR.....	81
NOVOLOG PENFILL.....	99	OLPRUVA (2 GM DOSE).....	133	ONZETRA XSAIL.....	84
NOVOLOG RELION.....	99	OLPRUVA (3 GM DOSE).....	133	OPCICON ONE-STEP.....	111
<i>novora</i>	135	OLPRUVA (4 GM DOSE).....	133	OPFOLDA.....	126
NOVOSEVEN RT.....	147	OLPRUVA (5 GM DOSE).....	133	OPILL.....	111
NOXAFIL.....	30	OLPRUVA (6 GM DOSE).....	133	OPIPZA.....	73
NP THYROID.....	132	OLPRUVA (6.67 GM DOSE)..	133	OPSUMIT.....	63
NPLATE.....	152	OLUMIANT.....	157	OPSYNVI.....	63
NUBEQA.....	43	<i>omega-3-acid ethyl esters</i>	56	OPTION 2.....	111
NUCALA.....	157	<i>omeprazole</i>	141	OPTIONS GYNOL II	
NUCYNTA.....	26	<i>omeprazole-sodium bicarbonate</i>		CONTRACEPTIVE.....	143
NUCYNTA ER.....	26	.....	141	OPTIUMEZ TEST.....	121
NUEDEXTA.....	90	OMNARIS.....	184	OPVEE.....	90
NULEV.....	135	OMNIFLEX DIAPHRAGM.....	111	OPZELURA.....	192

ORACEA.....	197	<i>oxymorphone hcl</i>	26	PAXLOVID (300/100 &	
ORACIT.....	144	<i>oxymorphone hcl er</i>	26	150/100).....	34
ORALAIR.....	153	OXYTROL.....	145	PAXLOVID (300/100).....	34
Oralone.....	198	OZEMPIC (0.25 OR 0.5		<i>peg-3350/electrolytes/ascorbat</i>	139
ORAPRED ODT.....	124	MG/DOSE).....	95	PEGASYS.....	37
ORAVIG.....	198	OZEMPIC (1 MG/DOSE).....	95	<i>peg-kcl-nacl-nasulf-na asc-c</i>	139
ORENCIA.....	154, 158	OZEMPIC (2 MG/DOSE).....	96	PEG-PREP.....	139
ORENCIA CLICKJECT.....	157	OZOBAX DS.....	88	PEMAZYRE.....	47
ORENITRAM.....	63	OZURDEX.....	176	<i>penicillamine</i>	104
ORENITRAM MONTH 1.....	63	Pacerone.....	53	<i>penicillin v potassium</i>	40
ORENITRAM MONTH 2.....	63	PALFORZIA (12 MG DAILY		PENTASA.....	138
ORENITRAM MONTH 3.....	63	DOSE).....	153	<i>pentazocine-naloxone hcl</i>	27
ORFADIN.....	125	PALFORZIA (120 MG DAILY		<i>pentoxifylline er</i>	151
ORGOVYX.....	43	DOSE).....	153	PERCOCET.....	26
ORIAHNN.....	133	PALFORZIA (160 MG DAILY		PERFOROMIST.....	182
ORILISSA.....	122	DOSE).....	153	<i>perindopril erbumine</i>	51
ORKAMBI.....	183	PALFORZIA (20 MG DAILY		Periogard.....	198
ORLADEYO.....	161	DOSE).....	153	<i>permethrin</i>	197
ORLYNVAH.....	39	PALFORZIA (200 MG DAILY		<i>perphenazine</i>	73
<i>orphenadrine citrate er</i>	88	DOSE).....	153	<i>perphenazine-amitriptyline</i>	90
<i>orphenadrine-aspirin-caffeine</i>	88	PALFORZIA (240 MG DAILY		PERSERIS.....	73
ORPHENGESIC FORTE.....	88	DOSE).....	153	PERTZYE.....	140
Orquidea.....	111	PALFORZIA (3 MG DAILY		Pfizerpen.....	40
ORSERDU.....	43	DOSE).....	153	PHARMACIST CHOICE	
Orsythia.....	111	PALFORZIA (300 MG		AUTOCODE.....	121
<i>ortho df</i>	171	MAINTENANCE).....	153	<i>pharmacist choice no coding</i>	121
ORTHOVISC.....	29	PALFORZIA (300 MG		PHEBURANE.....	133
<i>oscimin</i>	135	TITRATION).....	153	<i>phendimetrazine tartrate er</i>	101
<i>oseltamivir phosphate</i>	34	PALFORZIA (40 MG DAILY		<i>phenelzine sulfate</i>	68
OSENVELT.....	102	DOSE).....	153	<i>phenobarbital</i>	77
OSPHENA.....	129	PALFORZIA (6 MG DAILY		<i>phenoxybenzamine hcl</i>	62
OSPOMYV.....	103	DOSE).....	153	<i>phenylephrine hcl</i>	177
OTEZLA.....	158	PALFORZIA (80 MG DAILY		<i>phenytoin</i>	77
OTEZLA XR.....	158	DOSE).....	153	<i>phenytoin sodium extended</i>	77
OTEZLA/OTEZLA XR		PALFORZIA INITIAL DOSE		PHEXX.....	143
INITIATION PK.....	158	4-17YRS.....	153	Philith.....	111
OTOVEL.....	198	<i>paliperidone er</i>	73	PHOSPHA 250 NEUTRAL.....	165
OTULFI.....	158	PALYNZIQ.....	130	<i>phosphorous</i>	165
OVIDE.....	197	PAMELOR.....	68	PHOSPHO-TRIN 250	
OVIDREL.....	123	PANCREAZE.....	140	NEUTRAL.....	165
<i>oxaprozin</i>	23	<i>pantoprazole sodium</i>	141	PHYRAGO.....	47
<i>oxazepam</i>	65	PANZYGA.....	163	PHYSIOLYTE.....	178
<i>oxcarbazepine</i>	77	PARAGARD		<i>phytonadione</i>	171
OXERVATE.....	177	INTRAUTERINE COPPER.....	111	PIFELTRO.....	32
<i>oxiconazole nitrate</i>	190	<i>paricalcitol</i>	134	<i>pilocarpine hcl</i>	177, 198
OXISTAT.....	190	PARNATE.....	68	<i>pimecrolimus</i>	192
OXTELLAR XR.....	77	<i>paroxetine hcl</i>	68	<i>pimozide</i>	90
<i>oxybutynin chloride</i>	145	<i>paroxetine hcl er</i>	68	Pimtreea.....	111
<i>oxybutynin chloride er</i>	145	<i>paroxetine mesylate</i>	90	<i>pindolol</i>	58
<i>oxycodone hcl</i>	26	PAXIL.....	68	<i>pioglitazone hcl</i>	99
<i>oxycodone-acetaminophen</i>	26	PAXIL CR.....	68	<i>pioglitazone hcl-glimepiride</i>	99
OXYCONTIN.....	26	PAXLOVID (150/100).....	34	<i>pioglitazone hcl-metformin hcl</i> ...	99

PIQRAY (200 MG DAILY DOSE).....	47	PRED FORTE.....	176	PRIVIGEN.....	163
PIQRAY (250 MG DAILY DOSE).....	47	PRED MILD.....	176	<i>pro voice v8/v9 glucose</i>	121
PIQRAY (300 MG DAILY DOSE).....	47	<i>prednisolone</i>	124	PROAIR RESPICLICK.....	182
<i>pirfenidone</i>	185	<i>prednisolone acetate</i>	176	<i>probenecid</i>	21
Pirmella 7/7/7.....	111	<i>prednisolone acetate p-f</i>	176	<i>prochlorperazine</i>	136
<i>piroxicam</i>	24	<i>prednisolone sodium phosphate</i>	124, 176	<i>prochlorperazine edisylate</i>	136
PLAN B ONE-STEP.....	111	<i>prednisolone-gatifloxacin</i>	174	<i>prochlorperazine maleate</i>	136
PLAQUENIL.....	161	<i>prednisone</i>	124	PROCORT.....	142
PLAVIX.....	152	PREDNISON INTENSOL.....	124	PROCRT.....	149
PLEGRIDY.....	87	<i>pregabalin</i>	77	<i>pro-critic</i>	171
PLEGRIDY STARTER PACK..	87	<i>pregen dha</i>	167	PROCTOFOAM HC.....	142
PLENITY.....	101	<i>pregenna</i>	167	Procto-Med Hc.....	142
PLENITY WELCOME KIT.....	101	PREGNYL.....	123	Proctozone-Hc.....	142
PLENVU.....	139	PREMARIN.....	128	PROCYSBI.....	144
PLIAGLIS.....	196	PREMESISRX.....	167	PRODIGY NO CODING BLOOD GLUC.....	121
<i>pnv prenatal plus multivit+dha</i>	167	PREMPHASE.....	128	PROFILNINE.....	151
<i>pnv tabs 20-1</i>	167	PREMPRO.....	128	<i>profola</i>	171
<i>pnv-dha</i>	167	<i>prena 1 true</i>	167	<i>progesterone</i>	131
<i>pnv-dha+docusate</i>	167	<i>prenal</i>	167	PROGLYCEM.....	125
<i>pnv-omega</i>	167	<i>prenal pearl</i>	167	PROGRAF.....	164
<i>pnv-select</i>	167	<i>prenatal</i>	167	PROLASTIN-C.....	179
POCKETCHEM EZ TEST.....	121	<i>prenatal 19</i>	167	PROLATE.....	26, 27
<i>podofilox</i>	196	<i>prenatal plus</i>	167	PROLENSA.....	176
POGO AUTOMATIC TEST CARTRIDGES.....	121	PRENATAL-U.....	167	PROLIA.....	103
POKONZA.....	165	PRENATE.....	168	PROMACTA.....	152
<i>polymyxin b-trimethoprim</i>	174	PRENATE AM.....	167	<i>promethazine hcl</i>	136
POLY-VI-FLOR.....	171	PRENATE DHA.....	167	<i>promethazine-codeine</i>	182
POLY-VI-FLOR/IRON.....	171	PRENATE ELITE.....	167	<i>promethazine-dm</i>	182
POMALYST.....	42	PRENATE ENHANCE.....	167	Promethegan.....	136
PONVORY.....	87	PRENATE ESSENTIAL.....	167	PROMETHEGAN.....	136
PONVORY STARTER PACK..	87	PRENATE MINI.....	168	PROMETRIUM.....	131
Portia-28.....	111	PRENATE PIXIE.....	168	<i>propafenone hcl</i>	54
<i>posaconazole</i>	30	PRENATE RESTORE.....	168	<i>propafenone hcl er</i>	53
POSFREA.....	136	PRENATOL-M.....	168	<i>proparacaine hcl</i>	177
<i>pot & sod cit-cit ac</i>	144	PRENATRIX.....	168	<i>propranolol hcl</i>	58
<i>potassium chloride</i>	165	PRENATRYL.....	168	<i>propranolol hcl er</i>	58
<i>potassium chloride crys er</i>	165	PRESTALIA.....	50	<i>propylthiouracil</i>	132
<i>potassium chloride er</i>	165	<i>pretomanid</i>	34	PROSCAR.....	143
<i>potassium citrate er</i>	144	PREVACID.....	141	PROTONIX.....	141, 142
PR BENZOYL PEROXIDE.....	188	PREVACID SOLUTAB.....	141	<i>protriptyline hcl</i>	68
PRADAXA.....	147	Prevalite.....	54	PROVERA.....	131
PRALUENT.....	56	PREVIDOLRX ANALGESIC..	24	PROVIDA OB.....	168
<i>pramipexole dihydrochloride</i>	70	PREVYMIS.....	34	PROVIGIL.....	89
<i>pramipexole dihydrochloride er</i> ..	70	PREZCOBIX.....	33	<i>pseudoeph-bromphen-dm</i>	182
<i>prasugrel hcl</i>	152	PREZISTA.....	32	PTS PANELS EGLU TEST.....	121
<i>pravastatin sodium</i>	55	PRIALT.....	22	PULMICORT FLEXHALER..	186
<i>praziquantel</i>	30	PRIFTIN.....	34	PULMOZYME.....	183
<i>prazosin hcl</i>	51	PRIOSEC.....	141	PURIXAN.....	41
		<i>primaquine phosphate</i>	31	PYLERA.....	142
		<i>primidone</i>	77	<i>pyrazinamide</i>	34
		PRISTIQ.....	68	<i>pyridostigmine bromide</i>	89

<i>pyridostigmine bromide er</i>	89	RAYALDEE.....	134	REZVOGLAR KWIKPEN.....	99
<i>pyridoxine hcl</i>	171	REBIF.....	87	RHEUMATE.....	172
<i>pyrimethamine</i>	39	REBIF REBIDOSE.....	87	RHOFADE.....	197
PYRUKYND.....	151	REBIF REBIDOSE TITRATION PACK.....	87	RHOPHYLAC.....	163
PYRUKYND TAPER PACK...151		REBIF TITRATION PACK.....	87	RHOPRESSA.....	178
PYZCHIVA.....	158	REBINYN.....	151	<i>ribavirin</i>	37
QBRELIS.....	51	RECLAST.....	102	<i>rifabutin</i>	34
<i>qc aspirin low dose</i>	28	Reclipsen.....	112	<i>rifampin</i>	34
<i>qc childrens aspirin</i>	28	RECOMBINATE.....	150	RIFAMPIN+SYRSPEND SF	34
<i>qc nicotine transdermal system</i> ...92		RECORLEV.....	115	RIGHTEST GS100 BLOOD GLUCOSE.....	121
QELBREE.....	81	RECTIV.....	196	RIGHTEST GS300 BLOOD GLUCOSE.....	121
QINLOCK.....	47	REFUAH PLUS BLOOD GLUCOSE TEST.....	121	RIGHTEST GS550 BLOOD GLUCOSE.....	122
QLOSI.....	177	RELENZA DISKHALER.....	35	<i>riluzole</i>	65
QNASL.....	184	<i>releuko</i>	149	<i>rimantadine hcl</i>	35
QNASL CHILDRENS.....	184	RELEXXII.....	81	<i>ringers irrigation</i>	178
QSYMIA.....	101	RELION CONFIRM/MICRO TEST.....	121	RINVOQ.....	158
<i>quad-mix</i>	143	RELION TRUE METRIX TEST STRIPS.....	121	RINVOQ LQ.....	158
<i>quazepam</i>	82	RELISTOR.....	140	RIOMET.....	94
<i>quetiapine fumarate</i>	73	<i>relnate dha</i>	168	<i>risedronate sodium</i>	102
<i>quetiapine fumarate er</i>	73	RELSTONE.....	140	RISPERDAL CONSTA.....	73
QUICKTEK TEST.....	121	REMEDIENT.....	171	<i>risperidone</i>	73
QUILLICHEW ER.....	81	REMERON.....	68	<i>ritonavir</i>	32
QUILLIVANT XR.....	81	REMERON SOLTAB.....	68	<i>rivastigmine</i>	66
<i>quinapril hcl</i>	51	REMICADE.....	154	<i>rivastigmine tartrate</i>	66
<i>quinapril-hydrochlorothiazide</i> ...50		REMODULIN.....	63	Rivelsa.....	112
<i>quinidine gluconate er</i>	54	RENACIDIN.....	144	RIVFLOZA.....	144
<i>quinidine sulfate</i>	54	RENATABS WITH IRON.....	171	<i>rixubis</i>	151
<i>quinine sulfate</i>	31	RENFLEXIS.....	154	<i>rizatriptan benzoate</i>	84
QUINTET AC BLOOD GLUCOSE TEST.....	121	<i>reno caps</i>	172	ROCALTROL.....	134
QUINTET BLOOD GLUCOSE TEST.....	121	RENTHYROID.....	132	ROCKLATAN.....	173
QULIPTA.....	83	REVELA.....	130	ROLVEDON.....	149
QUTENZA.....	196	<i>repaglinide</i>	100	ROMVIMZA.....	47
QUTENZA (2 PATCH).....	196	REPATHA.....	56	<i>ropinirole hcl</i>	70
QUTENZA (4 PATCH).....	196	REPATHA SURECLICK.....	56	<i>ropinirole hcl er</i>	70
QUVIVIQ.....	82	RESTASIS.....	176	<i>rosuvastatin calcium</i>	55
QVAR REDIHALER.....	186	RESTASIS MULTIDOSE.....	176	Roweepra.....	77
<i>rabeprazole sodium</i>	142	RETACRIT.....	149	ROXICODONE.....	27
RADICAVA ORS.....	65	RETEVMO.....	47	ROXYBOND.....	27
RADICAVA ORS STARTER KIT.....	65	RETIN-A MICRO PUMP.....	188	ROZEREM.....	82
RAGWITEK.....	153	REVATIO.....	63	ROZLYTREK.....	47
RALDESY.....	68	REVLIMID.....	42	RUBRACA.....	49
<i>raloxifene hcl</i>	130	REVUFORJ.....	49	RUCONEST.....	161
<i>ramelteon</i>	82	REXTOVY.....	90	<i>rufinamide</i>	77
<i>ramipril</i>	51	REXULTI.....	73	RUKOBIA.....	32
<i>ranolazine er</i>	62	REYATAZ.....	32	RYALTRIS.....	180
RAPIVAB.....	34	REZDIFFRA.....	130	RYBELSUS.....	96
<i>rasagiline mesylate</i>	70	REZLIDHIA.....	49	RYCLORA.....	181
RASUVO.....	161	REZUROCK.....	164	RYDAPT.....	47
RAVICTI.....	133			RYKINDO.....	73

RYTARY.....	70	SIMLANDI (1 PEN).....	158	<i>sotalol hcl (af)</i>	54
Ryvent.....	181	SIMLANDI (2 PEN).....	158	SOTYKTU.....	159
SABRIL.....	77, 78	SIMLANDI (2 SYRINGE).....	158	SOTYLIZE.....	54
SAFYRAL.....	112	Simliya.....	112	SOVALDI.....	37
SALAGEN.....	198	Simpesse.....	112	SOVUNA.....	31, 161
SAMSCA.....	130	SIMPLERA SENSOR.....	122	SPEVIGO.....	191
SANCUSO.....	136	SIMPLERA SYNC SENSOR...122		<i>spinosad</i>	197
SANDOSTATIN.....	93	SIMPLERA SYSTEM.....	122	SPIRIVA HANDIHALER.....	180
SANDOSTATIN LAR DEPOT..93		SIMPONI.....	158, 159	SPIRIVA RESPIMAT.....	180
SANTYL.....	196	SIMPONI ARIA.....	154	<i>spironolactone</i>	51
SAPHRIS.....	73	<i>simvastatin</i>	55, 56	<i>spironolactone-hctz</i>	61
SAVAYSA.....	147	SINEMET.....	71	SPRAVATO (56 MG DOSE)....	68
SAVELLA.....	82	SINGULAIR.....	184	SPRAVATO (84 MG DOSE)....	69
SAVELLA TITRATION PACK 82		SINUVA.....	184	Sprintec 28.....	112
SAXENDA.....	101	<i>sirolimus</i>	164	SPRITAM.....	78
<i>sb childrens aspirin</i>	28	SIRTURO.....	34	SPRIX.....	24
SCSEMBLIX.....	47	<i>sitaglipt base-metform hcl er</i>	95	SPRYCEL.....	47
<i>scopolamine</i>	136	<i>sitagliptin</i>	95	Sps (Sodium Polystyrene Sulf).131	
SECUADO.....	74	<i>sitagliptin base-metformin hcl</i>	95	SPS (SODIUM	
SEGLUROMET.....	100	SIVEXTRO.....	39	POLYSTYRENE SULF).....	131
SELARSDI.....	158	SKYCLARYS.....	85	Sronyx.....	112
SELECT-OB.....	168	SKYLA.....	112	Ssd.....	189
SELECT-OB+DHA.....	168	SKYRIZI.....	159	ST JOSEPH LOW DOSE.....	28
<i>selegiline hcl</i>	71	SKYRIZI PEN.....	159	STEGLATRO.....	100
<i>selenious acid</i>	165	SKYTROFA.....	126	STEGLUJAN.....	100
<i>selenium sulfide</i>	191	SLYND.....	112	STELARA.....	159
SELZENTRY.....	32	<i>sm nicotine</i>	92	STENDRA.....	143
SEMGLEE (YFGN).....	99	<i>sm nicotine polacrilex</i>	92	STEQEYMA.....	159
<i>se-natal 19</i>	168	SMARTEST BLOOD		<i>sterile water for irrigation</i>	178
SENSIPAR.....	102	GLUCOSE TEST.....	122	STIMUFEND.....	149
SEREVENT DISKUS.....	182	SOAANZ.....	61	STIOLTO RESPIMAT.....	180
SERNIVO.....	195	<i>sod citrate-citric acid</i>	144	STIVARGA.....	47
SEROQUEL XR.....	74	<i>sodium chloride</i>	184	STOBOCLO.....	103
SEROSTIM.....	126	<i>sodium fluoride</i>	165	STRENSIQ.....	130
<i>sertraline hcl</i>	68	<i>sodium oxybate</i>	89	STRIBILD.....	33
Setlakin.....	112	<i>sodium phenylbutyrate</i>	133	STRIVERDI RESPIMAT.....	182
<i>sevelamer carbonate</i>	130	<i>sodium polystyrene sulfonate</i>	131	STROVITE FORTE.....	172
<i>sevelamer hcl</i>	131	SOFDRA.....	196	SUBLOCADE.....	27
SEVENFACT.....	147	<i>sofosbuvir-velpatasvir</i>	37	SUBOXONE.....	89
SEYSARA.....	41	SOGROYA.....	126	Subvenite.....	78
Sharobel.....	112	SOHONOS.....	88	Subvenite Starter Kit-Blue.....	78
SHEWISE.....	112	Solia.....	112	Subvenite Starter Kit-Green.....	78
SIGNIFOR.....	130	<i>solifenacin succinate</i>	145	Subvenite Starter Kit-Orange.....	78
SIGNIFOR LAR.....	130	SOLQUA.....	96	SUCRAID.....	140
SIKLOS.....	152	SOLOSEC.....	39	<i>sucralfate</i>	140
<i>sildenafil citrate</i>	64	SOLTAMOX.....	43	SUFLAVE.....	139
SILENOR.....	82	SOLUS V2 TEST.....	122	<i>sulconazole nitrate</i>	190
SILIQ.....	158	SOMATULINE DEPOT.....	93	<i>sulfacetamide sodium</i>	174
<i>silodosin</i>	143	SOMAVERT.....	93	<i>sulfacetamide sodium (acne)</i>	188
SILVADENE.....	189	SOOLANTRA.....	197	<i>sulfacetamide-prednisolone</i>	174
<i>silver sulfadiazine</i>	189	SORILUX.....	191	<i>sulfadiazine</i>	30
SIMBRINZA.....	173	<i>sotalol hcl</i>	54	<i>sulfamethoxazole-trimethoprim</i> ..	39

SULFAMYLON.....	189	<i>tamoxifen citrate</i>	43	THALOMID.....	42
<i>sulfasalazine</i>	138	<i>tamsulosin hcl</i>	143	THEO-24.....	187
Sulfatrim Pediatric.....	39	TAPERDEX 12-DAY.....	124	<i>theophylline</i>	187
<i>sulfurated lime</i>	197	Taperdex 6-Day.....	124	<i>theophylline er</i>	187
<i>sulindac</i>	24	TAPERDEX 7-DAY.....	124	THIOLA.....	144
<i>sumatriptan</i>	84	Targadox.....	41	THIOLA EC.....	144
<i>sumatriptan succinate</i>	84	TARGRETIN.....	49, 196	<i>thioridazine hcl</i>	74
<i>sumatriptan-naproxen sodium</i>	84	Tarina 24 Fe.....	112	<i>thiothixene</i>	74
SUNOSI.....	89	Tarina Fe 1/20 Eq.....	112	THRIVE.....	92
SUPARTZ FX.....	29	TARON-C DHA.....	168	<i>thrivite rx</i>	168
<i>super bi-mix</i>	143	TARPEYO.....	144	THYQUIDITY.....	132
<i>super quad-mix</i>	143	TASCENSO ODT.....	87	<i>thyroid</i>	132
<i>super tri-mix</i>	143	TASIGNA.....	47	<i>tiagabine hcl</i>	78
<i>support</i>	172	<i>tavaborole</i>	190	TIBSOVO.....	49
SUPPRELIN LA.....	103	TAVALISSE.....	153	TIKOSYN.....	54
SUPREME TEST.....	122	TAVNEOS.....	151	Tilia Fe.....	112
SUPREP BOWEL PREP KIT..	139	Taysofy.....	112	<i>timolol hemihydrate</i>	173
<i>surebiotic probiotic support</i>	135	TAYTULLA.....	112	<i>timolol maleate</i>	58, 173
SUTAB.....	139	<i>tazarotene</i>	189, 191	<i>timolol maleate (once-daily)</i>	173
SUTENT.....	47	TAZORAC.....	191	TIMOPTIC OCUDOSE.....	173
Syeda.....	112	TECFIDERA.....	87	<i>tinidazole</i>	30
SYMBICORT.....	186	TEGLUTIK.....	65	<i>tiotropium bromide</i>	180
SYMBRAVO.....	84	TEGRETOL.....	78	TIROSINT.....	132
SYMDEKO.....	183	TEGRETOL-XR.....	78	TIROSINT-SOL.....	132
SYMFI.....	33	TEKTURNA.....	60	TIVICAY.....	32
SYMPAZAN.....	78	<i>telmisartan</i>	53	TIVICAY PD.....	32
SYMPROIC.....	140	<i>telmisartan-amlodipine</i>	52	<i>tizanidine hcl</i>	88
SYMTUZA.....	33	<i>telmisartan-hctz</i>	52	TLANDO.....	94
SYNAREL.....	122	<i>temazepam</i>	83	TOBAKIENT.....	172
SYNDROS.....	137	TEMBEXA.....	35	TOBI.....	183
SYNJARDY.....	100	TEMODAR.....	41	TOBI PODHALER.....	183
SYNJARDY XR.....	100	<i>temozolomide</i>	41	TOBRADEX.....	174
SYNOJOYNT.....	29	TENCON.....	22	TOBRADEX ST.....	174
SYNTHROID.....	132	<i>tenofovir disoproxil fumarate</i>	32	<i>tobramycin</i>	174, 183
SYNVISC.....	29	TENORMIN.....	58	<i>tobramycin-dexamethasone</i>	174
SYNVISC ONE.....	29	TEPMETKO.....	47	TOBREX.....	175
SYPRINE.....	104	<i>terazosin hcl</i>	143	TODAY SPONGE.....	143
TABLOID.....	41	<i>terbinafine hcl</i>	30	TOLAK.....	189
TABRECTA.....	47	<i>terbutaline sulfate</i>	182	<i>tolcapone</i>	71
TACLONEX.....	191	<i>terconazole</i>	146	TOLECTIN DS.....	24
<i>tacrolimus</i>	164, 192	<i>teriparatide</i>	103	<i>tolmetin sodium</i>	24
<i>tadalafil</i>	143	TESTIM.....	93	<i>tolsura</i>	30
<i>tadalafil (pah)</i>	64	TESTOPEL.....	93	<i>tolterodine tartrate</i>	145
TADLIQ.....	64	<i>testosterone</i>	93, 94	<i>tolterodine tartrate er</i>	145
TAFINLAR.....	47	<i>testosterone cypionate</i>	93	TONMYA.....	82
TAGRISSO.....	47	<i>testosterone enanthate</i>	93	TOPICORT.....	195
TAKE ACTION.....	112	<i>tetrabenazine</i>	85	<i>topiramate</i>	78
TAKHZYRO.....	161	<i>tetracycline hcl</i>	41	<i>topiramate er</i>	78
TALICIA.....	142	TEXACORT.....	195	TOPROL XL.....	58
TALIVA.....	172	TEZRULY.....	143	<i>toremifene citrate</i>	43
TALTZ.....	159	TEZSPIRE.....	185	<i>torse mide</i>	61
TALZENNA.....	49	THALITONE.....	61	TOSYMRA.....	84

TOUJEO MAX SOLOSTAR.....	99	TRILEPTAL.....	78	TWIST REFILL KIT.....	122
TOUJEO SOLOSTAR.....	99	Tri-Linyah.....	113	TWIST REFILL KIT/INFUSION SET.....	122
Tovet.....	195	Tri-Lo-Estarylla.....	113	TWIST STARTER KIT.....	122
TOVIAZ.....	145	Tri-Lo-Marzia.....	113	TWIRLA.....	113
TPOXX.....	35	Tri-Lo-Mili.....	113	TWYNEO.....	189
TRACLEER.....	64	Tri-Lo-Sprintec.....	113	TYBLUME.....	113
TRADJENTA.....	95	TRILURON.....	29	Tydemy.....	113
<i>tramadol hcl</i>	27	<i>trimethobenzamide hcl</i>	137	TYENNE.....	159
<i>tramadol hcl (er biphasic)</i>	27	<i>trimethoprim</i>	39	TYKERB.....	48
<i>tramadol hcl er</i>	27	Tri-Mili.....	113	TYMLOS.....	103
<i>tramadol-acetaminophen</i>	27	<i>trimipramine maleate</i>	69	TYRUKO.....	87
<i>trandolapril</i>	51	<i>tri-mix</i>	144	TYRVAYA.....	177
<i>trandolapril-verapamil hcl er</i>	50	<i>trinatal rx 1</i>	168	TYSABRI.....	87
<i>tranexamic acid</i>	151	Trinessa (28).....	113	TYVASO.....	64
TRANSDERM SCOP.....	137	TRINTELLIX.....	69	TYVASO DPI	
<i>tranylcypromine sulfate</i>	69	<i>triple pmb</i>	174	INSTITUTIONAL KIT.....	64
TRAVATAN Z.....	177	<i>triple pmk</i>	174	TYVASO DPI	
<i>travoprost (bak free)</i>	177	TRIPTODUR.....	103	MAINTENANCE KIT.....	64
<i>trazodone hcl</i>	69	Tri-Sprintec.....	113	TYVASO DPI TITRATION KIT.....	64
TRELEGY ELLIPTA.....	180	<i>tristart dha</i>	168	TYVASO REFILL KIT.....	64
TRELSTAR MIXJECT.....	43	TRIUMEQ.....	33	TYVASO STARTER KIT.....	64
TREMFYA.....	159	<i>triumeq pd</i>	33	UBRELVY.....	83
TREMFYA ONE-PRESS.....	159	TRI-VI-FLOR.....	172	UCERIS.....	138
TREMFYA PEN.....	159	<i>tri-vi-floro</i>	172	UDAMIN SP.....	172
TREMFYA-CD/UC		TRIVISC.....	29	UDENYCA.....	149
INDUCTION.....	159	<i>tri-vite/fluoride</i>	172	ULORIC.....	21
<i>treprostinil</i>	64	Trivora (28).....	113	ULTRAVATE.....	195
TRESIBA.....	99	Tri-Vylibra.....	113	<i>umeclidinium-vilanterol</i>	180
TRESIBA FLEXTOUCH.....	99	Tri-Vylibra Lo.....	113	UNISTRIPI GENERIC.....	122
<i>tretinoin</i>	49, 189	TROKENDI XR.....	78	Unithroid.....	132
<i>tretinoin microsphere</i>	189	<i>tronvite</i>	172	UPNEEQ.....	177
<i>tretinoin microsphere pump</i>	189	<i>tropicamide</i>	177	UPTRAVI.....	64
TREXALL.....	42	<i>trospium chloride</i>	145	UPTRAVI TITRATION.....	64
TREXIMET.....	84	<i>trospium chloride er</i>	145	<i>urea</i>	196
TREZIX.....	27	TRUDHESA.....	83	URIMAR-T.....	39
Tri Femynor.....	112	<i>true focus blood glucose strip</i> ...	122	UROCIT-K 10.....	144
<i>triamcinolone acetonide</i> ...	195, 198	TRUE METRIX BLOOD GLUCOSE TEST.....	122	UROCIT-K 15.....	144
<i>triamcinolone in absorbase</i>	195	TRUETEST TEST.....	122	UROXATRAL.....	143
<i>triamterene</i>	61	TRUETRACK TEST.....	122	URSO FORTE.....	140
<i>triamterene-hctz</i>	61	TRULANCE.....	138	<i>ursodiol</i>	140
<i>triazolam</i>	83	TRULICITY.....	96	URSODIOL+SYRSPEND SF..	140
<i>tricitrates</i>	144	TRUQAP.....	47, 48	<i>ustekinumab</i>	159
TRICOR.....	55	TRUVADA.....	34	<i>ustekinumab-aauz</i>	159
Triderm.....	195	TRYNGOLZA.....	62	<i>ustekinumab-aeKn</i>	159
<i>trientine hcl</i>	104	TRYPTYR.....	176	<i>ustekinumab-ttwe</i>	159, 160
Tri-Estarylla.....	112	TRYVIO.....	62	UZEDY.....	74
<i>trifluoperazine hcl</i>	74	TUDORZA PRESSAIR.....	180	VABRINTY.....	43
<i>trifluridine</i>	175	TUKYSA.....	48	VAGIFEM.....	128
<i>trihexyphenidyl hcl</i>	71	TURALIO.....	48	<i>valacyclovir hcl</i>	35
TRIJARDY XR.....	95	Turqoz.....	113	VALCHLOR.....	196
TRIKAFTA.....	183	TUXARIN ER.....	183		
Tri-Legest Fe.....	113				

VALCYTE.....	35	VERKAZIA.....	177	VOLTAREN.....	24
<i>valganciclovir hcl</i>	35	VERQUVO.....	61	VONJO.....	48
VALIUM.....	78	VERSACLOZ.....	74	VONVENDI.....	147
<i>valproic acid</i>	78	VERZENIO.....	48	VOQUEZNA.....	140
<i>valsartan</i>	53	Vestura.....	113	VORANIGO.....	49
<i>valsartan-hydrochlorothiazide</i> ...	52	VEVYE.....	176	<i>voriconazole</i>	31
VALTOCO 10 MG DOSE.....	78	VFEND.....	30	VOSEVI.....	38
VALTOCO 15 MG DOSE.....	78	V-GO 20.....	122	VOTRIENT.....	48
VALTOCO 20 MG DOSE.....	78	V-GO 30.....	122	VOWST.....	140
VALTOCO 5 MG DOSE.....	78	V-GO 40.....	122	VOXZOGO.....	125
VALTREX.....	35	VIAGRA.....	144	VOYDEYA.....	152
Valtya 1/35.....	113	VIBERZI.....	138	VPRIV.....	126
VALTYA 1/50.....	113	VICTOZA.....	96	VRAYLAR.....	74
VANCOCIN.....	39	Vienna.....	113	VTAMA.....	191
<i>vancomycin hcl</i>	39	<i>vigabatrin</i>	78, 79	VUITY.....	177
VANCOMYCIN+SYRSPEND		Vigadrone.....	79	VUMERITY.....	87
SF.....	39	VIGAFYDE.....	79	VUSION.....	190
VANDAZOLE.....	146	VIGAMOX.....	175	VYALEV.....	71
VANFLYTA.....	48	VIIBRYD.....	69	Vyfemla.....	114
VANRAFIA.....	144	VIJOICE.....	130	VYJUVEK.....	198
<i>varenicline tartrate</i>	92	VIMPAT.....	79	VYKAT XR.....	130
<i>varenicline tartrate (starter)</i>	92	VINATE DHA RF.....	168	VYLEESI.....	91
VARUBI (180 MG DOSE).....	137	VIOKACE.....	140	Vylibra.....	114
VASCEPA.....	56	<i>vioarele</i>	114	VYNDAMAX.....	62
VASCULERA.....	172	VIRACEPT.....	32	VYTORIN.....	56
VASOTEC.....	51	VIREAD.....	32	VYVANSE.....	81
<i>vb6 p5p</i>	172	VISCO-3.....	29	VYVGART HYTRULO.....	89
<i>v-c forte</i>	172	VISTOGARD.....	49	VYZULTA.....	178
VCF VAGINAL		VISUDYNE.....	177	WAINUA.....	131
CONTRACEPTIVE.....	143	VITAFOL FE+.....	168	WAKIX.....	89
VECAMYL.....	62	VITAFOL GUMMIES.....	168	<i>warfarin sodium</i>	147
VECTICAL.....	191	VITAFOL ULTRA.....	168	WEGOVY.....	101
VELETRI.....	64	VITAFOL-OB.....	168	WEGOVY HD.....	101
VELIVET.....	113	VITAFOL-OB+DHA.....	169	WELIREG.....	49
VELPHORO.....	131	VITAFOL-ONE.....	169	WELLBUTRIN XL.....	69
VELSIPITY.....	160	<i>vitalara</i>	169	<i>wellfola</i>	172
VELTASSA.....	131	<i>vitamin d (ergocalciferol)</i>	172	<i>wellpro 31</i>	135
VEMLIDY.....	37	<i>vitamin k1</i>	172	Wera.....	114
VENCLEXTA.....	42	VITAROCA PLUS.....	172	<i>wescap-pn dha</i>	169
VENCLEXTA STARTING		<i>vitasure</i>	172	<i>wesnate dha</i>	169
PACK.....	42	VITATHELY WITH GINGER.....	169	<i>westab plus</i>	169
VENIPUNCTURE PX1		VITRAKVI.....	48	<i>westgel dha</i>	169
PHLEBOTOMY.....	196	VIVAGUARD INO TEST		WEZLANA.....	160
<i>venlafaxine besylate er</i>	69	STRIPS.....	122	WIDE-SEAL DIAPHRAGM 60	
<i>venlafaxine hcl</i>	69	VIVELLE-DOT.....	128	.....	114
<i>venlafaxine hcl er</i>	69	VIVITROL.....	90	WIDE-SEAL DIAPHRAGM 65	
VENTOLIN HFA.....	182	VIVJOA.....	31	.....	114
VEOZAH.....	130	VIZIMPRO.....	48	WIDE-SEAL DIAPHRAGM 70	
<i>verapamil hcl</i>	60	VIZZ.....	177	.....	114
<i>verapamil hcl er</i>	59	VOGELXO.....	94	WIDE-SEAL DIAPHRAGM 75	
<i>verasens blood glucose test</i>	122	VOGELXO PUMP.....	94	.....	114
VEREGEN.....	196	Volnea.....	114		

WIDE-SEAL DIAPHRAGM 80 114	XOSPATA..... 48	ZARXIO..... 149
WIDE-SEAL DIAPHRAGM 85 114	XPHOZAH..... 131	ZAVESCA..... 126
WIDE-SEAL DIAPHRAGM 90 114	XPOVIO (100 MG ONCE WEEKLY)..... 49	ZAVZPRET..... 83
WIDE-SEAL DIAPHRAGM 95 114	XPOVIO (40 MG ONCE WEEKLY)..... 49	ZEJULA..... 49
WILATE..... 148	XPOVIO (40 MG TWICE WEEKLY)..... 49	<i>zelac</i> 135
WINLEVI..... 189	XPOVIO (60 MG ONCE WEEKLY)..... 49	ZELAPAR..... 71
WINREVAIR..... 64	XPOVIO (60 MG TWICE WEEKLY)..... 49	ZELBORAF..... 48
WINRHO SDF..... 163	XPOVIO (80 MG ONCE WEEKLY)..... 49	ZELSUVMI..... 197
Wixela Inhub..... 187	XPOVIO (80 MG TWICE WEEKLY)..... 49	ZEMAIRA..... 179
Wymzya Fe..... 114	XROMI..... 152	ZEMBRACE SYMTOUCH..... 84
WYNZORA..... 191	XTAMPZA ER..... 27	ZEMPLAR..... 134
XACIATO..... 146	XTANDI..... 43, 44	Zenatane..... 189
XADAGO..... 71	Xulane..... 114	ZENPEP..... 141
XALATAN..... 178	XULTOPHY..... 96	Zenzedi..... 81
XALKORI..... 48	XURIDEN..... 130	ZEPATIER..... 38
XANAX..... 66	XYNTHA..... 150	ZEPBOUND..... 101, 102
XANAX XR..... 66	XYNTHA SOLOFUSE..... 150	ZEPBOUND KWIKPEN..... 101
Xarah Fe..... 114	XYOSTED..... 94	ZEPOSIA..... 87
XARELTO..... 147	XYREM..... 89	ZEPOSIA 7-DAY STARTER PACK..... 87
XARELTO STARTER PACK..... 147	XYWAV..... 89	ZEPOSIA STARTER KIT..... 88
XCOPRI..... 79	<i>xyzbac</i> 172	ZERViate..... 172
XCOPRI (250 MG DAILY DOSE)..... 79	YASMIN 28..... 114	ZESTORETIC..... 50
XCOPRI (350 MG DAILY DOSE)..... 79	YAZ..... 114	ZETIA..... 54
XDEMVY..... 175	YCANTH..... 197	ZIANA..... 189
XELJANZ..... 160	YESINTEK..... 160	<i>zidovudine</i> 32, 33
XELJANZ XR..... 160	YEZTUGO..... 32	ZIEXTENZO..... 149
XELPROS..... 178	<i>yl folic acid</i> 172	ZILBRYSQ..... 85
Xelria Fe..... 114	YONSA..... 44	<i>zileuton er</i> 183
XELSTRYM..... 81	YORVIPATH..... 103	ZILXI..... 197
XEMBIFY..... 163	YOSPRALA..... 152	ZIOPTAN..... 178
XENAZINE..... 85	YUFLYMA (1 PEN)..... 160	<i>ziphex</i> 169
XENICAL..... 101	YUFLYMA (2 PEN)..... 160	<i>ziprasidone hcl</i> 74
XEOMIN..... 82	YUFLYMA (2 SYRINGE)..... 160	ZIPSOR..... 24
XERAC AC..... 196	YUFLYMA-CD/UC/HS STARTER..... 160	ZIRGAN..... 175
XERESE..... 35	YUPELRI..... 180	ZITHROMAX..... 36
XERMELO..... 140	YUSIMRY..... 160	ZITHROMAX TRI-PAK..... 36
XGEVA..... 103	YUTREPIA..... 64	ZITHROMAX Z-PAK..... 36
XHANCE..... 184	Yuvaferm..... 128	ZITUVIMET..... 95
XIFAXAN..... 39	Zafemy..... 114	ZITUVIMET XR..... 95
XIGDUO XR..... 100	<i>zafirlukast</i> 184	ZITUVIO..... 95
XIIDRA..... 177	<i>zaleplon</i> 83	ZOCOR..... 56
XOFLUZA (40 MG DOSE)..... 35	<i>zalvit</i> 169	ZOKINVY..... 130
XOFLUZA (80 MG DOSE)..... 35	ZANAFLEX..... 89	ZOLADEX..... 44
XOLAIR..... 160	ZARONTIN..... 79	<i>zoledronic acid</i> 102
XOLREMDI..... 149		ZOLINZA..... 49
XOPENEX HFA..... 182		<i>zolmitriptan</i> 84
		ZOLOFT..... 69
		<i>zolpidem tartrate</i> 83
		<i>zolpidem tartrate er</i> 83
		ZOMACTON..... 126
		ZOMIG..... 84

Zomig.....	84
ZONEGRAN.....	79
ZONISADE.....	79
<i>zonisamide</i>	79
ZONTIVITY	152
ZORTRESS.....	164
ZORYVE.....	191, 192
Zovia 1/35 (28).....	114
ZTALMY	79
ZTLIDO.....	196
ZUBSOLV.....	90
Zumandimine.....	115
ZURZUVAE.....	69
ZYCLARA PUMP.....	189
ZYDELIG.....	48
ZYKADIA.....	48
ZYLET.....	174
ZYMFENTRA (1 PEN).....	160
ZYMFENTRA (2 PEN).....	160
ZYMFENTRA (2 SYRINGE)..	160
ZYPITAMAG.....	56
ZYPREXA ZYDIS.....	74
ZYTIGA.....	44