

CorVel supports the following First Fill formulary for immediate treatment of injuries. The specific therapeutic classes and drug groups allowed are listed.

First Fill Plan Rules:

1. Generic medications promoted exclusively.
2. Brand medications trigger prior authorization.
3. First Fill medications are filled one time within 30 days of injury.
4. Medication limited to 7–14 day supply.

Contact: Pharmacy@CorVel.com | 800.563.8348

GROUP	GPI CLASS	Drug Group Allowed
ANTI-INFECTIVE AGENTS		
	01	PENICILLINS
	02	CEPHALOSPORINS
	03	MACROLIDE ANTIBIOTICS
	04	TETRACYCLINES
	05	FLUOROQUINOLONES
	07	AMINOGLYCOSIDES
	08	SULFONAMIDES
	09	ANTIMYCOBACTERIAL AGENTS
	11	ANTIFUNGALS
	12	ANTIVIRAL
	13	ANTIMALARIAL
	14	AMEBICIDES
	15	ANTHELMINTIC
	16	MISC. ANTI-INFECTIVES
ENDOCRINE AND METABOLIC DRUGS		
	22	CORTICOSTEROIDS
CARDIOVASCULAR AGENTS		
	31	CARDIOTONICS
	32	ANTIANGINAL AGENTS
	33	BETA BLOCKERS
	34	CALCIUM BLOCKERS
	35	ANTIARRHYTHMIC
	36	ANTIHYPERTENSIVE
	37	DIURETICS
	38	PRESSORS

RESPIRATORY AGENTS		
	41	ANTI-HISTAMINES
	42	SYSTEMIC AND TOPICAL NASAL PRODUCTS
	44	ANTI-ASTHMATIC
GASTROINTESTINAL AGENTS		
	46	LAXATIVES
	47	ANTI-DIARRHEALS
	48	ANTACIDS
	49	ULCER DRUGS
	50	ANTI-EMETICS
	51	DIGESTIVE AIDS
GENITOURINARY AGENTS		
	53	URINARY ANTI-INFECTIVES
CENTRAL NERVOUS SYSTEM DRUGS		
	57	ANTI-ANXIETY AGENTS
	60	HYPNOTICS
ANALGESICS AND ANESTHETICS		
	64	ANALGESICS - NonNarcotic
	65	ANALGESICS - Narcotic
	66	ANALGESICS - ANTI-INFLAMMATORY
	67	MIGRAINE PRODUCTS
NEUROMUSCULAR DRUGS		
	72	ANTI-CONVULSANT
	75	MUSCULOSKELETAL THERAPY AGENTS
TOPICAL PRODUCTS		
	86	OPHTHALMIC
	87	OTIC
	90	DERMATOLOGICAL
MISCELLANEOUS PRODUCTS		
	92	ANTISEPTICS & DISINFECTANTS
	97	MEDICAL DEVICES