



2025 MEDICAID DRUG FORMULARY

Effective July 1st, 2025

**PLEASE READ: THIS DOCUMENT HAS INFORMATION ABOUT THE
PRESCRIPTION DRUGS WE COVER.**

Please refer to your “Member Handbook or other plan materials” to determine if your drug is covered. This Drug Formulary does not guarantee coverage and is subject to change without notice. Formulary Coverage is dependent on state and federal requirements. Members must use participating pharmacies to fill their prescription drugs.

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs are generic drugs
- Tier 2 drugs are brand name drugs
- All tiers have no copay

For the most recent information or other questions, please contact Neighborhood Member Services at 1-800-459-6019 (TTY 711). This formulary is for members enrolled in ACCESS or TRUST health plans effective on July 1st, 2025.

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Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
amphetamine-dextroamphetamine cap er 24hr 5 mg (generic of ADDERALL XR)	Tier 1	
amphetamine-dextroamphetamine cap er 24hr 10 mg (generic of ADDERALL XR)	Tier 1	
amphetamine-dextroamphetamine cap er 24hr 15 mg (generic of ADDERALL XR)	Tier 1	
amphetamine-dextroamphetamine cap er 24hr 20 mg (generic of ADDERALL XR)	Tier 1	
amphetamine-dextroamphetamine cap er 24hr 25 mg (generic of ADDERALL XR)	Tier 1	
amphetamine-dextroamphetamine cap er 24hr 30 mg (generic of ADDERALL XR)	Tier 1	
amphetamine-dextroamphetamine tab 5 mg (generic of ADDERALL)	Tier 1	
amphetamine-dextroamphetamine tab 7.5 mg (generic of ADDERALL)	Tier 1	
amphetamine-dextroamphetamine tab 10 mg (generic of ADDERALL)	Tier 1	
amphetamine-dextroamphetamine tab 12.5 mg (generic of ADDERALL)	Tier 1	
amphetamine-dextroamphetamine tab 15 mg (generic of ADDERALL)	Tier 1	
amphetamine-dextroamphetamine tab 20 mg (generic of ADDERALL)	Tier 1	
amphetamine-dextroamphetamine tab 30 mg (generic of ADDERALL)	Tier 1	
dextroamphetamine sulfate cap er 24hr 5 mg	Tier 1	
dextroamphetamine sulfate cap er 24hr 10 mg (generic of DEXEDRINE)	Tier 1	
dextroamphetamine sulfate cap er 24hr 15 mg (generic of DEXEDRINE)	Tier 1	
dextroamphetamine sulfate tab 5 mg	Tier 1	
dextroamphetamine sulfate tab 10 mg	Tier 1	
lisdexamfetamine dimesylate cap 10 mg	Tier 1	QL (1 cap every 1 day)
lisdexamfetamine dimesylate cap 20 mg	Tier 1	QL (1 cap every 1 day)
lisdexamfetamine dimesylate cap 30 mg	Tier 1	QL (1 cap every 1 day)
lisdexamfetamine dimesylate cap 40 mg	Tier 1	QL (1 cap every 1 day)
lisdexamfetamine dimesylate cap 50 mg	Tier 1	QL (1 cap every 1 day)
lisdexamfetamine dimesylate cap 60 mg	Tier 1	QL (1 cap every 1 day)
lisdexamfetamine dimesylate cap 70 mg	Tier 1	QL (1 cap every 1 day)
lisdexamfetamine dimesylate chew tab 10 mg	Tier 1	ST, PA, QL (1 tab every 1 day); PA for new starts

Drug Name	Drug Tier	Requirements/Limits
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	Tier 1	ST, PA, QL (1 tab every 1 day); PA for new starts
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	Tier 1	ST, PA, QL (1 tab every 1 day); PA for new starts
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	Tier 1	ST, PA, QL (1 tab every 1 day); PA for new starts
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	Tier 1	ST, PA, QL (1 tab every 1 day); PA for new starts
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	Tier 1	ST, PA, QL (1 tab every 1 day); PA for new starts
VYVANSE CHW 10MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
VYVANSE CHW 20MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
VYVANSE CHW 30MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
VYVANSE CHW 40MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
VYVANSE CHW 50MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
VYVANSE CHW 60MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts

ANOREXIANTS NON-AMPHETAMINE

<i>phendimetrazine tartrate tab 35 mg</i>	Tier 1
<i>phentermine hcl cap 15 mg</i>	Tier 1
<i>phentermine hcl cap 30 mg</i>	Tier 1
<i>phentermine hcl cap 37.5 mg</i>	Tier 1
<i>phentermine hcl tab 37.5 mg</i> (generic of ADIPEX-P)	Tier 1

ANTI-OBESITY AGENTS

ALLI CAP 60MG	Tier 2	OTC
IMCIVREE INJ 10MG/ML	Tier 2	PA, QL (10 mL every 30 days)
WEGOVY INJ 0.5MG	Tier 2	PA, QL (4 pens every 28 days)
WEGOVY INJ 0.25MG	Tier 2	PA, QL (4 pens every 28 days)
WEGOVY INJ 1.7MG	Tier 2	PA, QL (4 pens every 28 days)
WEGOVY INJ 1MG	Tier 2	PA, QL (4 pens every 28 days)
WEGOVY INJ 2.4MG	Tier 2	PA, QL (4 pens every 28 days)

Drug Name	Drug Tier	Requirements/Limits
ZEPBOUND INJ 2.5/0.5	Tier 2	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 5/0.5ML	Tier 2	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 7.5/0.5	Tier 2	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 10/0.5ML	Tier 2	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 12.5/0.5	Tier 2	PA, QL (4 pens every 28 days)
ZEPBOUND INJ 15/0.5ML	Tier 2	PA, QL (4 pens every 28 days)

ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS

atomoxetine hcl cap 10 mg (base equiv) (generic of STRATTERA)	Tier 1	QL (1 cap every 1 day)
atomoxetine hcl cap 18 mg (base equiv) (generic of STRATTERA)	Tier 1	QL (1 cap every 1 day)
atomoxetine hcl cap 25 mg (base equiv) (generic of STRATTERA)	Tier 1	QL (1 cap every 1 day)
atomoxetine hcl cap 40 mg (base equiv)	Tier 1	QL (1 cap every 1 day)
atomoxetine hcl cap 60 mg (base equiv) (generic of STRATTERA)	Tier 1	QL (1 cap every 1 day)
atomoxetine hcl cap 80 mg (base equiv)	Tier 1	QL (1 cap every 1 day)
atomoxetine hcl cap 100 mg (base equiv)	Tier 1	QL (1 cap every 1 day)
clonidine hcl tab er 12hr 0.1 mg	Tier 1	QL (4 tabs every 1 day)
guanfacine hcl tab er 24hr 1 mg (base equiv) (generic of INTUNIV)	Tier 1	QL (2 tabs every 1 day)
guanfacine hcl tab er 24hr 2 mg (base equiv) (generic of INTUNIV)	Tier 1	
guanfacine hcl tab er 24hr 3 mg (base equiv) (generic of INTUNIV)	Tier 1	
guanfacine hcl tab er 24hr 4 mg (base equiv) (generic of INTUNIV)	Tier 1	
QELBREE CAP 100MG ER	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts
QELBREE CAP 150MG ER	Tier 2	ST, PA, QL (2 caps every 1 day); PA for new starts
QELBREE CAP 200MG ER	Tier 2	ST, PA, QL (3 caps every 1 day); PA for new starts

DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)

SUNOSI TAB 75MG	Tier 2	PA, QL (1 tab every 1 day)
SUNOSI TAB 150MG	Tier 2	PA, QL (1 tab every 1 day)

HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS

WAKIX TAB 4.45MG	Tier 2	PA, QL (2 tabs every 1 day)
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Drug Name	Drug Tier	Requirements/Limits
WAKIX TAB 17.8MG	Tier 2	PA, QL (2 tabs every 1 day)
STIMULANTS - MISC.		
armodafinil tab 50 mg (generic of NUVIGIL)	Tier 1	QL (1 tab every 1 day)
armodafinil tab 150 mg (generic of NUVIGIL)	Tier 1	QL (1 tab every 1 day)
armodafinil tab 200 mg (generic of NUVIGIL)	Tier 1	QL (1 tab every 1 day)
armodafinil tab 250 mg (generic of NUVIGIL)	Tier 1	QL (1 tab every 1 day)
AZSTARYS CAP 26.1-5.2	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts
AZSTARYS CAP 39.2-7.8	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts
AZSTARYS CAP 52.3-10.	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts
dexamethylphenidate hcl cap er 24 hr 5 mg (generic of FOCALIN XR)	Tier 1	QL (1 cap every 1 day)
dexamethylphenidate hcl cap er 24 hr 10 mg (generic of FOCALIN XR)	Tier 1	QL (1 cap every 1 day)
dexamethylphenidate hcl cap er 24 hr 15 mg (generic of FOCALIN XR)	Tier 1	QL (1 cap every 1 day)
dexamethylphenidate hcl cap er 24 hr 20 mg (generic of FOCALIN XR)	Tier 1	QL (1 cap every 1 day)
dexamethylphenidate hcl cap er 24 hr 25 mg (generic of FOCALIN XR)	Tier 1	QL (1 cap every 1 day)
dexamethylphenidate hcl cap er 24 hr 30 mg (generic of FOCALIN XR)	Tier 1	QL (1 cap every 1 day)
dexamethylphenidate hcl cap er 24 hr 35 mg (generic of FOCALIN XR)	Tier 1	QL (1 cap every 1 day)
dexamethylphenidate hcl cap er 24 hr 40 mg (generic of FOCALIN XR)	Tier 1	QL (1 cap every 1 day)
dexamethylphenidate hcl tab 2.5 mg (generic of FOCALIN)	Tier 1	
dexamethylphenidate hcl tab 5 mg (generic of FOCALIN)	Tier 1	
dexamethylphenidate hcl tab 10 mg (generic of FOCALIN)	Tier 1	
methylphenidate hcl cap er 10 mg (cd) (generic of METADATE CD)	Tier 1	QL (1 cap every 1 day)
methylphenidate hcl cap er 20 mg (cd) (generic of METADATE CD)	Tier 1	QL (1 cap every 1 day)
methylphenidate hcl cap er 24hr 10 mg (la) (generic of RITALIN LA)	Tier 1	QL (2 caps every 1 day)
methylphenidate hcl cap er 24hr 20 mg (la) (generic of RITALIN LA)	Tier 1	QL (2 caps every 1 day)
methylphenidate hcl cap er 24hr 30 mg (la) (generic of RITALIN LA)	Tier 1	QL (2 caps every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl cap er 24hr 40 mg (la) (generic of RITALIN LA)</i>	Tier 1	QL (2 caps every 1 day)
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	Tier 1	QL (2 caps every 1 day)
<i>methylphenidate hcl cap er 30 mg (cd) (generic of METADATE CD)</i>	Tier 1	QL (1 cap every 1 day)
<i>methylphenidate hcl cap er 40 mg (cd) (generic of METADATE CD)</i>	Tier 1	QL (1 cap every 1 day)
<i>methylphenidate hcl cap er 50 mg (cd) (generic of METADATE CD)</i>	Tier 1	QL (1 cap every 1 day)
<i>methylphenidate hcl cap er 60 mg (cd) (generic of METADATE CD)</i>	Tier 1	QL (1 cap every 1 day)
<i>methylphenidate hcl chew tab 2.5 mg</i>	Tier 1	QL (3 tabs every 1 day), AGE (Max 17)
<i>methylphenidate hcl chew tab 5 mg</i>	Tier 1	QL (3 tabs every 1 day), AGE (Max 17)
<i>methylphenidate hcl chew tab 10 mg</i>	Tier 1	QL (3 tabs every 1 day), AGE (Max 17)
<i>methylphenidate hcl soln 5 mg/5ml (generic of METHYLIN)</i>	Tier 1	QL (30 mL every 1 day), AGE (Max 17)
<i>methylphenidate hcl soln 10 mg/5ml (generic of METHYLIN)</i>	Tier 1	QL (30 mL every 1 day), AGE (Max 17)
<i>methylphenidate hcl tab 5 mg (generic of RITALIN)</i>	Tier 1	
<i>methylphenidate hcl tab 10 mg (generic of RITALIN)</i>	Tier 1	
<i>methylphenidate hcl tab 20 mg (generic of RITALIN)</i>	Tier 1	
<i>methylphenidate hcl tab er 10 mg</i>	Tier 1	
<i>methylphenidate hcl tab er 20 mg</i>	Tier 1	
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg (generic of CONCERTA)</i>	Tier 1	
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	Tier 1	
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg (generic of CONCERTA)</i>	Tier 1	
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	Tier 1	
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg (generic of CONCERTA)</i>	Tier 1	
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	Tier 1	
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg (generic of CONCERTA)</i>	Tier 1	
<i>methylphenidate td patch 10 mg/9hr (generic of DAYTRANA)</i>	Tier 1	ST, PA, QL (1 patch every 1 day); PA for new starts

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate td patch 15 mg/9hr (generic of DAYTRANA)</i>	Tier 1	ST, PA, QL (1 patch every 1 day); PA for new starts
<i>methylphenidate td patch 20 mg/9hr (generic of DAYTRANA)</i>	Tier 1	ST, PA, QL (1 patch every 1 day); PA for new starts
<i>methylphenidate td patch 30 mg/9hr (generic of DAYTRANA)</i>	Tier 1	ST, PA, QL (1 patch every 1 day); PA for new starts
<i>modafinil tab 100 mg (generic of PROVIGIL)</i>	Tier 1	QL (2 tabs every 1 day)
<i>modafinil tab 200 mg (generic of PROVIGIL)</i>	Tier 1	QL (2 tabs every 1 day)
QUILLICHEW CHW 20MG ER	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
QUILLICHEW CHW 30MG ER	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
QUILLICHEW CHW 40MG ER	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts

ALLERGENIC EXTRACTS/BIOLOGICALS MISC

ALLERGENIC EXTRACTS

PALFORZIA CAP ESCALAT	Tier 2	PA, QL (13 caps every 1 day)
PALFORZIA CAP LEVEL 1	Tier 2	PA, QL (3 caps every 1 day)
PALFORZIA CAP LEVEL 2	Tier 2	PA, QL (6 caps every 1 day)
PALFORZIA CAP LEVEL 3	Tier 2	PA, QL (3 caps every 1 day)
PALFORZIA CAP LEVEL 4	Tier 2	PA, QL (1 cap every 1 day)
PALFORZIA CAP LEVEL 5	Tier 2	PA, QL (2 caps every 1 day)
PALFORZIA CAP LEVEL 6	Tier 2	PA, QL (4 caps every 1 day)
PALFORZIA CAP LEVEL 7	Tier 2	PA, QL (2 caps every 1 day)
PALFORZIA CAP LEVEL 8	Tier 2	PA, QL (4 caps every 1 day)
PALFORZIA CAP LEVEL 9	Tier 2	PA, QL (2 caps every 1 day)
PALFORZIA CAP LEVEL 10	Tier 2	PA, QL (4 caps every 1 day)
PALFORZIA POW LEVEL 11	Tier 2	PA, QL (1 packet every 1 day)

ALTERNATIVE MEDICINES

ALTERNATIVE MEDICINE - M'S

<i>melatonin cap 5 mg</i>	Tier 1	OTC
<i>melatonin liquid 1 mg/ml</i>	Tier 1	OTC
<i>melatonin sl tab 5 mg</i>	Tier 1	OTC
<i>melatonin tab 1 mg</i>	Tier 1	OTC
<i>melatonin tab 3 mg</i>	Tier 1	OTC
<i>melatonin tab 5 mg</i>	Tier 1	OTC
MELATONIN TAB 300MCG	Tier 2	OTC

ALTERNATIVE MEDICINE COMBINATIONS

<i>melatonin-pyridoxine tab 5-1 mg</i>	Tier 1	OTC
<i>melatonin-pyridoxine tab er 3-10 mg</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
AMEBICIDES		
AMEBICIDES		
SOLOSEC GRA 2GM	Tier 2	ST, PA
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
ARIKAYCE SUS	Tier 2	PA
<i>neomycin sulfate tab 500 mg</i>	Tier 1	
<i>tobramycin nebu soln 300 mg/5ml (generic of KITABIS PAK)</i>	Tier 1	PA, QL (10 mL every 1 day)
ANALGESICS - ANTI-INFLAMMATORY		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
ADALIMU-ADAZ INJ 40/0.4ML	Tier 2	ST, PA, QL (1.6 mL every 28 days)
ADALIMU-ADAZ INJ 80/0.8ML	Tier 2	ST, PA, QL (1.6 mL every 28 days)
ADALIMU-FKJP KIT 20/0.4ML	Tier 2	ST, PA, QL (2 syringes every 28 days)
ADALIMU-FKJP KIT 40/0.8ML	Tier 2	ST, PA, QL (4 pens every 28 days)
ADALIMU-FKJP KIT 40/0.8ML	Tier 2	ST, PA, QL (4 syringes every 28 days)
HADLIMA INJ 40/0.4ML	Tier 2	ST, PA, QL (1.6 mL every 28 days)
HADLIMA INJ 40/0.8ML	Tier 2	ST, PA, QL (3.2 mL every 28 days)
HADLIMA PUSH INJ 40/0.4ML	Tier 2	ST, PA, QL (1.6 mL every 28 days)
HADLIMA PUSH INJ 40/0.8ML	Tier 2	ST, PA, QL (3.2 mL every 28 days)
SIMPONI INJ 50/0.5ML	Tier 2	PA, QL (1 syringe every 28 days)
SIMPONI INJ 100MG/ML	Tier 2	PA, QL (1 injection every 28 days)
SIMPONI INJ 100MG/ML	Tier 2	PA, QL (1 syringe every 28 days)
ANTIRHEUMATIC - ENZYME INHIBITORS		
RINVOQ LQ SOL 1MG/ML	Tier 2	PA, QL (12 mL every 1 day)
RINVOQ TAB 15MG ER	Tier 2	PA, QL (1 tab every 1 day)
RINVOQ TAB 30MG ER	Tier 2	PA, QL (1 tab every 1 day)
RINVOQ TAB 45MG ER	Tier 2	PA, QL (84 tabs every year)
XELJANZ SOL 1MG/ML	Tier 2	PA, QL (10 mL every 1 day)
XELJANZ TAB 5MG	Tier 2	PA, QL (2 tabs every 1 day)
XELJANZ TAB 10MG	Tier 2	PA, QL (2 tabs every 1 day)
XELJANZ XR TAB 11MG	Tier 2	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
XELJANZ XR TAB 22MG	Tier 2	PA, QL (1 tab every 1 day)
INTERLEUKIN-6 RECEPTOR INHIBITORS		
KEVZARA INJ 150/1.14	Tier 2	PA, QL (2 syringes every 28 days)
KEVZARA INJ 200/1.14	Tier 2	PA, QL (2 syringes every 28 days)
TYENNE INJ 162/0.9	Tier 2	PA, QL (4 pens every 28 days)
TYENNE INJ 162MG	Tier 2	PA, QL (4 syringes every 28 days)
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
celecoxib cap 50 mg (generic of CELEBREX)	Tier 1	
celecoxib cap 100 mg (generic of CELEBREX)	Tier 1	
celecoxib cap 200 mg (generic of CELEBREX)	Tier 1	
celecoxib cap 400 mg (generic of CELEBREX)	Tier 1	QL (1 cap every 1 day)
diclofenac potassium tab 50 mg	Tier 1	
diclofenac sodium tab delayed release 50 mg	Tier 1	
diclofenac sodium tab delayed release 75 mg	Tier 1	
diclofenac sodium tab er 24hr 100 mg	Tier 1	
etodolac cap 200 mg	Tier 1	
etodolac cap 300 mg	Tier 1	
etodolac tab 400 mg (generic of LODINE)	Tier 1	
etodolac tab 500 mg	Tier 1	
etodolac tab er 24hr 400 mg	Tier 1	
etodolac tab er 24hr 500 mg	Tier 1	
etodolac tab er 24hr 600 mg	Tier 1	
flurbiprofen tab 50 mg	Tier 1	
flurbiprofen tab 100 mg	Tier 1	
ibuprofen susp 40 mg/ml	Tier 1	OTC
ibuprofen susp 100 mg/5ml	Tier 1	
ibuprofen susp 100 mg/5ml	Tier 1	OTC
ibuprofen tab 200 mg	Tier 1	OTC
ibuprofen tab 400 mg	Tier 1	
ibuprofen tab 600 mg	Tier 1	
ibuprofen tab 800 mg	Tier 1	
indomethacin cap 25 mg	Tier 1	
indomethacin cap 50 mg	Tier 1	
indomethacin cap er 75 mg	Tier 1	
ketorolac tromethamine tab 10 mg	Tier 1	QL (20 tabs every 30 days)
meloxicam tab 7.5 mg	Tier 1	
meloxicam tab 15 mg	Tier 1	
nabumetone tab 500 mg	Tier 1	
nabumetone tab 750 mg	Tier 1	
naproxen sodium tab 220 mg	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
naproxen sodium tab 275 mg	Tier 1	
naproxen sodium tab 550 mg (generic of ANAPROX DS)	Tier 1	
naproxen susp 125 mg/5ml	Tier 1	
naproxen tab 250 mg	Tier 1	
naproxen tab 375 mg	Tier 1	
naproxen tab 500 mg (generic of NAPROSYN)	Tier 1	
naproxen tab ec 375 mg (generic of EC-NAPROSYN)	Tier 1	
naproxen tab ec 500 mg (generic of EC-NAPROSYN)	Tier 1	
sulindac tab 150 mg	Tier 1	
sulindac tab 200 mg	Tier 1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA TAB 10/20	Tier 2	PA, QL (55 tabs every 28 days)
OTEZLA TAB 10/20/30	Tier 2	PA, QL (55 tabs every 28 days)
OTEZLA TAB 20MG	Tier 2	PA, QL (2 tabs every 1 day)
OTEZLA TAB 30MG	Tier 2	PA, QL (2 tabs every 1 day)
PYRIMIDINE SYNTHESIS INHIBITORS		
leflunomide tab 10 mg (generic of ARAVA)	Tier 1	
leflunomide tab 20 mg (generic of ARAVA)	Tier 1	
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL INJ 25/0.5ML	Tier 2	PA, QL (Quantity limit based on diagnosis)
ENBREL INJ 25MG	Tier 2	PA, QL (Quantity limit based on diagnosis)
ENBREL INJ 50MG/ML	Tier 2	PA, QL (Quantity limit based on diagnosis)
ENBREL MINI INJ 50MG/ML	Tier 2	PA, QL (Quantity limit based on diagnosis)
ENBREL SRCLK INJ 50MG/ML	Tier 2	PA, QL (Quantity limit based on diagnosis)
ANALGESICS - NONNARCOTIC		
ANALGESIC COMBINATIONS		
aspirin-acetaminophen-caffeine tab 250-250-65 mg	Tier 1	OTC
butalbital-acetaminophen tab 50-325 mg	Tier 1	
butalbital-acetaminophen-caffeine tab 50-325-40 mg	Tier 1	
ANALGESICS OTHER		
acetaminophen chew tab 160 mg	Tier 1	OTC
acetaminophen elixir 160 mg/5ml	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
acetaminophen liquid 160 mg/5ml	Tier 1	OTC
acetaminophen soln 160 mg/5ml	Tier 1	OTC
acetaminophen suppos 120 mg	Tier 1	OTC
acetaminophen susp 160 mg/5ml	Tier 1	OTC
acetaminophen tab 325 mg	Tier 1	OTC
acetaminophen tab 500 mg	Tier 1	OTC
acetaminophen tab er 650 mg	Tier 1	OTC
SALICYLATES		
aspirin chew tab 81 mg	Tier 1	OTC
aspirin effer tab 500 mg	Tier 1	OTC
aspirin tab 325 mg	Tier 1	OTC
aspirin tab delayed release 81 mg	Tier 1	OTC; Available for 90 day fill
aspirin tab delayed release 325 mg	Tier 1	OTC
ANALGESICS - OPIOID		
OPIOID AGONISTS		
CODEINE SULF TAB 15MG	Tier 2	PA, QL (6 tabs every 1 day; Max 7 day supply), AGE (Min 18)
CODEINE SULF TAB 60MG	Tier 2	PA, QL (6 tabs every 1 day; Max 7 day supply), AGE (Min 18)
codeine sulfate tab 30 mg	Tier 1	PA, QL (6 tabs every 1 day; Max 7 day supply), AGE (Min 18)
fentanyl td patch 72hr 12 mcg/hr	Tier 1	PA, QL (10 patches every 30 days)
fentanyl td patch 72hr 25 mcg/hr	Tier 1	PA, QL (10 patches every 30 days)
fentanyl td patch 72hr 50 mcg/hr	Tier 1	PA
fentanyl td patch 72hr 75 mcg/hr	Tier 1	PA
fentanyl td patch 72hr 100 mcg/hr	Tier 1	PA
hydromorphone hcl liqd 1 mg/ml (generic of DILAUDID)	Tier 1	PA, QL (16 mL every 1 day)
hydromorphone hcl tab 2 mg (generic of DILAUDID)	Tier 1	PA, QL (6 tabs every 1 day)
hydromorphone hcl tab 4 mg (generic of DILAUDID)	Tier 1	PA, QL (4 tabs every 1 day)
hydromorphone hcl tab 8 mg (generic of DILAUDID)	Tier 1	PA, QL (2 tabs every 1 day)
meperidine hcl tab 50 mg	Tier 1	PA, QL (6 tabs every 1 day; Max 3 day supply)
methadone hcl soln 5 mg/5ml	Tier 1	PA, QL (15 mL every 1 day)
methadone hcl soln 10 mg/5ml	Tier 1	PA, QL (7.5 mL every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>methadone hcl tab 5 mg</i>	Tier 1	PA, QL (3 tabs every 1 day)
<i>methadone hcl tab 10 mg</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>morphine sulfate oral soln 20 mg/5ml</i>	Tier 1	PA, QL (22.5 mL every 1 day)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	Tier 1	PA, QL (4.5 mL every 1 day)
<i>morphine sulfate tab 15 mg</i>	Tier 1	PA, QL (6 tabs every 1 day)
<i>morphine sulfate tab 30 mg</i>	Tier 1	PA, QL (3 tabs every 1 day)
<i>morphine sulfate tab er 15 mg (generic of MS CONTIN)</i>	Tier 1	PA, QL (3 tabs every 1 day)
<i>morphine sulfate tab er 30 mg (generic of MS CONTIN)</i>	Tier 1	PA, QL (3 tabs every 1 day)
<i>morphine sulfate tab er 60 mg (generic of MS CONTIN)</i>	Tier 1	PA
<i>morphine sulfate tab er 100 mg</i>	Tier 1	PA
<i>morphine sulfate tab er 200 mg</i>	Tier 1	PA
<i>oxycodone hcl cap 5 mg</i>	Tier 1	PA, QL (6 caps every 1 day)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	Tier 1	PA, QL (3 mL every 1 day)
<i>oxycodone hcl soln 5 mg/5ml</i>	Tier 1	QL (30 mL every 1 day)
<i>oxycodone hcl tab 5 mg</i>	Tier 1	PA, QL (6 tabs every 1 day)
<i>oxycodone hcl tab 10 mg</i>	Tier 1	PA, QL (6 tabs every 1 day)
<i>oxycodone hcl tab 15 mg (generic of ROXICODONE)</i>	Tier 1	PA, QL (4 tabs every 1 day)
<i>oxycodone hcl tab 20 mg</i>	Tier 1	PA, QL (3 tabs every 1 day)
<i>oxycodone hcl tab 30 mg (generic of ROXICODONE)</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>tramadol hcl tab 50 mg</i>	Tier 1	PA, QL (6 tabs every 1 day), AGE (Min 18)
<i>tramadol hcl tab er 24hr 100 mg</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>tramadol hcl tab er 24hr 200 mg</i>	Tier 1	PA
<i>tramadol hcl tab er 24hr 300 mg</i>	Tier 1	PA
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	Tier 1	PA
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	Tier 1	PA

OPIOID COMBINATIONS

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	Tier 1	PA, QL (90 mL every 1 day)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	Tier 1	PA, QL (13 tabs every 1 day), AGE (Min 12)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	Tier 1	PA, QL (12 tabs every 1 day), AGE (Min 12)

Drug Name	Drug Tier	Requirements/Limits
acetaminophen w/ codeine tab 300-60 mg	Tier 1	PA, QL (6 tabs every 1 day), AGE (Min 12)
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	Tier 1	PA
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	Tier 1	PA, QL (90 mL every 1 day)
hydrocodone-acetaminophen tab 5-325 mg	Tier 1	PA, QL (8 tabs every 1 day)
hydrocodone-acetaminophen tab 7.5-325 mg	Tier 1	PA, QL (6 tabs every 1 day)
hydrocodone-acetaminophen tab 10-325 mg	Tier 1	PA, QL (6 tabs every 1 day)
hydrocodone-ibuprofen tab 7.5-200 mg	Tier 1	PA, QL (5 tabs every 1 day; Max 10 day supply)
oxycodone w/ acetaminophen tab 5-325 mg (generic of PERCOSET)	Tier 1	PA, QL (12 tabs every 1 day)
oxycodone w/ acetaminophen tab 7.5-325 mg (generic of PERCOSET)	Tier 1	PA, QL (8 tabs every 1 day)
oxycodone w/ acetaminophen tab 10-325 mg (generic of PERCOSET)	Tier 1	PA, QL (6 tabs every 1 day)
tramadol-acetaminophen tab 37.5-325 mg	Tier 1	PA, QL (8 tabs every 1 day; Max 5 day supply), AGE (Min 18)

OPIOID PARTIAL AGONISTS

BRIXADI SOL 8/0.16ML	Tier 2	PA
BRIXADI SOL 16/0.32	Tier 2	PA
BRIXADI SOL 24/0.48	Tier 2	PA
BRIXADI SOL 32/0.64	Tier 2	PA
BRIXADI SOL 64/0.18	Tier 2	PA
BRIXADI SOL 96/0.27	Tier 2	PA
BRIXADI SOL 128/0.36	Tier 2	PA
buprenorphine hcl sl tab 2 mg (base equiv)	Tier 1	QL (12 tabs every 1 day)
buprenorphine hcl sl tab 8 mg (base equiv)	Tier 1	QL (3 tabs every 1 day)
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (generic of SUBOXONE)	Tier 1	QL (3 films every 1 day)
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) (generic of SUBOXONE)	Tier 1	QL (3 films every 1 day)
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) (generic of SUBOXONE)	Tier 1	QL (3 films every 1 day)
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv) (generic of SUBOXONE)	Tier 1	QL (2 films every 1 day)
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	Tier 1	QL (3 tabs every 1 day)
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	Tier 1	QL (3 tabs every 1 day)
buprenorphine td patch weekly 5 mcg/hr (generic of BUTRANS)	Tier 1	QL (4 patches every 28 days)

Drug Name	Drug Tier	Requirements/Limits
buprenorphine td patch weekly 7.5 mcg/hr (generic of BUTRANS)	Tier 1	QL (4 patches every 28 days)
buprenorphine td patch weekly 10 mcg/hr (generic of BUTRANS)	Tier 1	QL (4 patches every 28 days)
buprenorphine td patch weekly 15 mcg/hr (generic of BUTRANS)	Tier 1	QL (4 patches every 28 days)
buprenorphine td patch weekly 20 mcg/hr (generic of BUTRANS)	Tier 1	QL (4 patches every 28 days)
butorphanol tartrate nasal soln 10 mg/ml	Tier 1	PA
pentazocine w/ naloxone hcl tab 50-0.5 mg	Tier 1	PA, QL (4 tabs every 1 day)
SUBLOCADE INJ 100/0.5	Tier 2	PA
SUBLOCADE INJ 300/1.5	Tier 2	PA

ANDROGENS-ANABOLIC

ANDROGENS

danazol cap 100 mg	Tier 1
danazol cap 200 mg	Tier 1
TESTOPEL MIS PELLETS	Tier 2 PA, QL (12 pellets every 180 days)
testosterone cypionate im inj in oil 100 mg/ml	Tier 1
testosterone cypionate im inj in oil 200 mg/ml	Tier 1
testosterone enanthate im inj in oil 200 mg/ml	Tier 1
testosterone td gel 12.5 mg/act (1%)	Tier 1 PA, QL (5 gm every 1 day)
testosterone td gel 50 mg/5gm (1%)	Tier 1 PA, QL (10 gm every 1 day)

ANORECTAL AND RELATED PRODUCTS

INTRARECTAL STEROIDS

budesonide rectal foam 2 mg/act (generic of UCERIS)	Tier 1	PA
hydrocortisone enema 100 mg/60ml (generic of CORTENEMA)	Tier 1	

RECTAL STEROIDS

hydrocortisone perianal cream 1%	Tier 1	
hydrocortisone perianal cream 2.5% (generic of ANUSOL-HC)	Tier 1	

ANTACIDS

ANTACID COMBINATIONS

alum & mag hydroxide-simethicone susp 200-200-20 mg/5ml	Tier 1	OTC
alum & mag hydroxide-simethicone susp 400-400-40 mg/5ml	Tier 1	OTC

ANTACIDS - ALUMINUM SALTS

ALUM HYDROX SUS 320/5ML	Tier 2	OTC
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ANTACIDS - BICARBONATE

sodium bicarbonate tab 650 mg	Tier 1	OTC
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Drug Name	Drug Tier	Requirements/Limits
ANTACIDS - CALCIUM SALTS		
CALCIUM CARB TAB 648MG	Tier 2	OTC
calcium carbonate (antacid) chew tab 400 mg	Tier 1	OTC
calcium carbonate (antacid) chew tab 500 mg	Tier 1	OTC
calcium carbonate (antacid) chew tab 750 mg	Tier 1	OTC
ANTACIDS - MAGNESIUM SALTS		
magnesium oxide tab 250 mg	Tier 1	OTC
magnesium oxide tab 400 mg	Tier 1	OTC
ANTHELMINTICS		
ANTHELMINTICS		
albendazole tab 200 mg	Tier 1	QL (4 tabs every fill)
BENZNIDAZOLE TAB 12.5MG	Tier 2	
BENZNIDAZOLE TAB 100MG	Tier 2	
ivermectin tab 3 mg (generic of STROMECTOL)	Tier 1	
praziquantel tab 600 mg	Tier 1	QL (8 tabs every fill)
pyrantel pamoate susp 144 mg/ml (50 mg/ml base equiv)	Tier 1	OTC
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
FIRST-METRON SUS 50MG/ML	Tier 2	
metronidazole tab 250 mg	Tier 1	
metronidazole tab 500 mg	Tier 1	
tinidazole tab 250 mg	Tier 1	
tinidazole tab 500 mg	Tier 1	
trimethoprim tab 100 mg	Tier 1	
XIFAXAN TAB 200MG	Tier 2	PA, QL (Quantity limit based on diagnosis)
XIFAXAN TAB 550MG	Tier 2	PA, QL (Quantity limit based on diagnosis)
ANTI-INFECTIVE MISC. - COMBINATIONS		
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	Tier 1	
sulfamethoxazole-trimethoprim tab 400-80 mg (generic of BACTRIM)	Tier 1	
sulfamethoxazole-trimethoprim tab 800-160 mg (generic of BACTRIM DS)	Tier 1	
GLYCOPEPTIDES		
vancomycin hcl for iv soln 1 gm (base equivalent)	Tier 1	
vancomycin hcl for iv soln 10 gm (base equivalent)	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent) (generic of FIRVANQ)</i>	Tier 1	
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent) (generic of FIRVANQ)</i>	Tier 1	
LEPROSTATICs		
<i>dapsone tab 25 mg</i>	Tier 1	
<i>dapsone tab 100 mg</i>	Tier 1	
LINCOSAMIDES		
<i>clindamycin hcl cap 150 mg (generic of CLEOCIN)</i>	Tier 1	
<i>clindamycin hcl cap 300 mg (generic of CLEOCIN)</i>	Tier 1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (generic of CLEOCIN PEDIATRIC GRANULE)</i>	Tier 1	AGE (Max 11)
OXAZOLIDINONES		
<i>linezolid for susp 100 mg/5ml (generic of ZYVOX)</i>	Tier 1	
<i>linezolid tab 600 mg (generic of ZYVOX)</i>	Tier 1	
URINARY ANTI-INFECTIVES		
<i>methenamine hippurate tab 1 gm (generic of HIPREX)</i>	Tier 1	
<i>nitrofurantoin macrocrystalline cap 25 mg (generic of MACRODANTIN)</i>	Tier 1	
<i>nitrofurantoin macrocrystalline cap 50 mg (generic of MACRODANTIN)</i>	Tier 1	
<i>nitrofurantoin macrocrystalline cap 100 mg (generic of MACRODANTIN)</i>	Tier 1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg (generic of MACROBID)</i>	Tier 1	
<i>nitrofurantoin susp 25 mg/5ml</i>	Tier 1	
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
<i>ranolazine tab er 12hr 500 mg</i>	Tier 1	
<i>ranolazine tab er 12hr 1000 mg</i>	Tier 1	
NITRATES		
<i>isosorbide dinitrate tab 10 mg</i>	Tier 1	
<i>isosorbide dinitrate tab 20 mg</i>	Tier 1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	Tier 1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	Tier 1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	Tier 1	
<i>nitroglycerin sl tab 0.3 mg (generic of NITROSTAT)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>nitroglycerin sl tab 0.4 mg (generic of NITROSTAT)</i>	Tier 1	
<i>nitroglycerin sl tab 0.6 mg (generic of NITROSTAT)</i>	Tier 1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	Tier 1	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	Tier 1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	Tier 1	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	Tier 1	

ANTIANXIETY AGENTS

ANTIANXIETY AGENTS - MISC.

<i>buspirone hcl tab 5 mg</i>	Tier 1
<i>buspirone hcl tab 7.5 mg</i>	Tier 1
<i>buspirone hcl tab 10 mg</i>	Tier 1
<i>buspirone hcl tab 15 mg</i>	Tier 1
<i>buspirone hcl tab 30 mg</i>	Tier 1
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	Tier 1
<i>hydroxyzine hcl tab 10 mg</i>	Tier 1
<i>hydroxyzine hcl tab 25 mg</i>	Tier 1
<i>hydroxyzine hcl tab 50 mg</i>	Tier 1
<i>hydroxyzine pamoate cap 25 mg</i>	Tier 1
<i>hydroxyzine pamoate cap 50 mg</i>	Tier 1
<i>hydroxyzine pamoate cap 100 mg</i>	Tier 1

BENZODIAZEPINES

<i>alprazolam tab 0.5 mg (generic of XANAX)</i>	Tier 1
<i>alprazolam tab 0.25 mg (generic of XANAX)</i>	Tier 1
<i>alprazolam tab 1 mg (generic of XANAX)</i>	Tier 1
<i>alprazolam tab 2 mg (generic of XANAX)</i>	Tier 1
<i>chlordiazepoxide hcl cap 5 mg</i>	Tier 1
<i>chlordiazepoxide hcl cap 10 mg</i>	Tier 1
<i>chlordiazepoxide hcl cap 25 mg</i>	Tier 1
<i>diazepam conc 5 mg/ml</i>	Tier 1
<i>diazepam oral soln 1 mg/ml</i>	Tier 1
<i>diazepam tab 2 mg (generic of VALIUM)</i>	Tier 1
<i>diazepam tab 5 mg (generic of VALIUM)</i>	Tier 1
<i>diazepam tab 10 mg (generic of VALIUM)</i>	Tier 1
<i>lorazepam tab 0.5 mg (generic of ATIVAN)</i>	Tier 1
<i>lorazepam tab 1 mg (generic of ATIVAN)</i>	Tier 1
<i>lorazepam tab 2 mg (generic of ATIVAN)</i>	Tier 1
<i>oxazepam cap 10 mg</i>	Tier 1
<i>oxazepam cap 15 mg</i>	Tier 1
<i>oxazepam cap 30 mg</i>	Tier 1

Drug Name	Drug Tier	Requirements/Limits
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine hcl cap 150 mg</i>	Tier 1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate tab 50 mg</i>	Tier 1	
<i>flecainide acetate tab 100 mg</i>	Tier 1	
<i>flecainide acetate tab 150 mg</i>	Tier 1	
<i>propafenone hcl tab 150 mg</i>	Tier 1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone hcl tab 200 mg</i>	Tier 1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	Tier 1	
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
<i>FASENRA INJ 10MG/0.5</i>	Tier 2	PA, QL (1 syringe every 56 days)
<i>FASENRA INJ 30MG/ML</i>	Tier 2	PA, QL (1 syringe every 56 days)
<i>FASENRA PEN INJ 30MG/ML</i>	Tier 2	PA, QL (1 pen every 56 days)
<i>NUCALA INJ 40MG/0.4</i>	Tier 2	PA, QL (1 syringe every 28 days)
<i>NUCALA INJ 100MG</i>	Tier 2	PA, QL (3 vials every 28 days)
<i>NUCALA INJ 100MG/ML</i>	Tier 2	PA, QL (3 auto-injectors every 28 days)
<i>NUCALA INJ 100MG/ML</i>	Tier 2	PA, QL (3 syringes every 28 days)
<i>XOLAIR INJ 75/0.5</i>	Tier 2	PA, QL (2 pens every 28 days)
<i>XOLAIR INJ 75/0.5</i>	Tier 2	PA, QL (2 syringes every 28 days)
<i>XOLAIR INJ 150MG/ML</i>	Tier 2	PA, QL (8 pens every 28 days)
<i>XOLAIR INJ 150MG/ML</i>	Tier 2	PA, QL (8 syringes every 28 days)
<i>XOLAIR INJ 300/2ML</i>	Tier 2	PA, QL (4 pens every 28 days)
<i>XOLAIR INJ 300/2ML</i>	Tier 2	PA, QL (4 syringes every 28 days)
<i>XOLAIR SOL 150MG</i>	Tier 2	PA, QL (8 vials every 28 days)

Drug Name	Drug Tier	Requirements/Limits
BRONCHODILATORS - ANTICHOLINERGICS		
INCRUSE ELPT INH 62.5MCG	Tier 2	QL (1 inhaler every 30 days)
<i>ipratropium bromide inhal soln 0.02%</i>	Tier 1	
SPIRIVA AER 1.25MCG	Tier 2	QL (1 inhaler every 30 days)
SPIRIVA SPR 2.5MCG	Tier 2	QL (1 inhaler every 30 days)
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv) (generic of SPIRIVA HANIDHALER)</i>	Tier 1	QL (1 cap every 1 day)
LEUKOTRIENE MODULATORS		
<i>montelukast sodium chew tab 4 mg (base equiv) (generic of SINGULAIR)</i>	Tier 1	
<i>montelukast sodium chew tab 5 mg (base equiv) (generic of SINGULAIR)</i>	Tier 1	
<i>montelukast sodium oral granules packet 4 mg (base equiv) (generic of SINGULAIR)</i>	Tier 1	AGE (Max 1)
<i>montelukast sodium tab 10 mg (base equiv) (generic of SINGULAIR)</i>	Tier 1	
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast tab 250 mcg (generic of DALIRESP)</i>	Tier 1	
<i>roflumilast tab 500 mcg (generic of DALIRESP)</i>	Tier 1	
STEROID INHALANTS		
ARNUITY ELPT INH 50MCG	Tier 2	QL (1 inhaler every 30 days)
ARNUITY ELPT INH 100MCG	Tier 2	QL (1 inhaler every 30 days)
ARNUITY ELPT INH 200MCG	Tier 2	QL (1 inhaler every 30 days)
ASMANEX 14 AER 220MCG	Tier 2	QL (1 inhaler every 30 days)
ASMANEX 30 AER 110MCG	Tier 2	QL (1 inhaler every 30 days)
ASMANEX 30 AER 220MCG	Tier 2	QL (1 inhaler every 30 days)
ASMANEX 60 AER 220MCG	Tier 2	QL (1 inhaler every 30 days)
ASMANEX 120 AER 220MCG	Tier 2	QL (1 inhaler every 30 days)
ASMANEX HFA AER 50MCG	Tier 2	QL (1 inhaler every 30 days)
ASMANEX HFA AER 100 MCG	Tier 2	QL (1 inhaler every 30 days)

Drug Name	Drug Tier	Requirements/Limits
ASMANEX HFA AER 200 MCG	Tier 2	QL (1 inhaler every 30 days)
<i>budesonide inhalation susp 0.5 mg/2ml (generic of PULMICORT)</i>	Tier 1	QL (4 mL every 1 day)
<i>budesonide inhalation susp 0.25 mg/2ml (generic of PULMICORT)</i>	Tier 1	QL (4 mL every 1 day)
<i>budesonide inhalation susp 1 mg/2ml (generic of PULMICORT)</i>	Tier 1	QL (4 mL every 1 day)
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	Tier 1	QL (1 inhaler every 30 days)
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	Tier 1	QL (1 inhaler every 30 days)
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	Tier 1	QL (2 inhalers every 30 days)
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	Tier 1	QL (1 inhaler every 30 days)
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	Tier 1	QL (1 inhaler every 30 days)
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	Tier 1	QL (1 inhaler every 30 days)
PULMICORT INH 90MCG	Tier 2	QL (1 inhaler every 30 days)
PULMICORT INH 180MCG	Tier 2	QL (2 inhalers every 30 days)
QVAR REDIHA AER 80MCG	Tier 2	QL (1 inhaler every 30 days)
QVAR REDIHAL AER 40MCG	Tier 2	QL (1 inhaler every 30 days)

SYMPATHOMIMETICS

<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	Tier 1
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	Tier 1
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 1
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	Tier 1
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 1
<i>albuterol sulfate syrup 2 mg/5ml</i>	Tier 1
<i>albuterol sulfate tab 2 mg</i>	Tier 1
BEVESPI AER 9-4.8MCG	Tier 2
BREO ELLIPTA INH 50-25MCG	Tier 2
	ST, PA, QL (1 inhaler every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act (generic of SYMBICORT)</i>	Tier 1	
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act (generic of SYMBICORT)</i>	Tier 1	
<i>COMBIVENT AER 20-100</i>	Tier 2	
<i>DULERA AER 50-5MCG</i>	Tier 2	ST, PA
<i>DULERA AER 100-5MCG</i>	Tier 2	ST, PA
<i>DULERA AER 200-5MCG</i>	Tier 2	ST, PA
<i>fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act</i>	Tier 1	ST, PA, QL (1 inhaler every 30 days)
<i>fluticasone furoate-vilanterol aero powd ba 200-25 mcg/act</i>	Tier 1	ST, PA, QL (1 inhaler every 30 days)
<i>fluticasone-salmeterol aer powder ba 55-14 mcg/act</i>	Tier 1	QL (1 inhaler every 30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act (generic of ADVAIR DISKUS)</i>	Tier 1	
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	Tier 1	QL (1 inhaler every 30 days)
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	Tier 1	QL (1 inhaler every 30 days)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act (generic of ADVAIR DISKUS)</i>	Tier 1	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act (generic of ADVAIR DISKUS)</i>	Tier 1	
<i>fluticasone-salmeterol inhal aerosol 45-21 mcg/act</i>	Tier 1	ST, PA
<i>fluticasone-salmeterol inhal aerosol 115-21 mcg/act</i>	Tier 1	ST, PA
<i>fluticasone-salmeterol inhal aerosol 230-21 mcg/act</i>	Tier 1	ST, PA
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	Tier 1	
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	Tier 1	QL (90 mL every fill)
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 1	QL (90 mL every fill)
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 1	QL (90 mL every fill)
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	Tier 1	QL (1 inhaler every 30 days)
<i>SEREVENT DIS AER 50MCG</i>	Tier 2	
<i>STIOLTO AER 2.5-2.5</i>	Tier 2	
<i>STRIVERDI AER 2.5MCG</i>	Tier 2	
<i>terbutaline sulfate tab 2.5 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>terbutaline sulfate tab 5 mg</i>	Tier 1	
TRELEGY AER 100MCG	Tier 2	
TRELEGY AER 200MCG	Tier 2	
<i>umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act</i>	Tier 1	
XANTHINES		
<i>theophylline tab er 12hr 300 mg</i>	Tier 1	
<i>theophylline tab er 12hr 450 mg</i>	Tier 1	
<i>theophylline tab er 24hr 400 mg</i>	Tier 1	
<i>theophylline tab er 24hr 600 mg</i>	Tier 1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
<i>warfarin sodium tab 1 mg</i>	Tier 1	
<i>warfarin sodium tab 2 mg</i>	Tier 1	
<i>warfarin sodium tab 2.5 mg</i>	Tier 1	
<i>warfarin sodium tab 3 mg</i>	Tier 1	
<i>warfarin sodium tab 4 mg</i>	Tier 1	
<i>warfarin sodium tab 5 mg</i>	Tier 1	
<i>warfarin sodium tab 6 mg</i>	Tier 1	
<i>warfarin sodium tab 7.5 mg</i>	Tier 1	
<i>warfarin sodium tab 10 mg</i>	Tier 1	
DIRECT FACTOR XA INHIBITORS		
<i>ELIQUIS ST P TAB 5MG</i>	Tier 2	QL (75 tabs every 30 days)
<i>ELIQUIS TAB 2.5MG</i>	Tier 2	QL (2 tabs every 1 day)
<i>ELIQUIS TAB 5MG</i>	Tier 2	QL (75 tabs every 30 days)
<i>rivaroxaban tab 2.5 mg (generic of XARELTO)</i>	Tier 1	QL (2 tabs every 1 day)
<i>XARELTO STAR TAB 15/20MG</i>	Tier 2	QL (55 tabs every 30 days)
<i>XARELTO TAB 10MG</i>	Tier 2	QL (1 tab every 1 day)
<i>XARELTO TAB 15MG</i>	Tier 2	QL (2 tabs every 1 day)
<i>XARELTO TAB 20MG</i>	Tier 2	QL (1 tab every 1 day)
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml (generic of LOVENOX)</i>	Tier 1	
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml (generic of LOVENOX)</i>	Tier 1	
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml (generic of LOVENOX)</i>	Tier 1	
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml (generic of LOVENOX)</i>	Tier 1	
<i>enoxaparin sodium inj soln pref syr 100 mg/ml (generic of LOVENOX)</i>	Tier 1	
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml (generic of LOVENOX)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium inj soln pref syr 150 mg/ml (generic of LOVENOX)</i>	Tier 1	
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	Tier 1	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	Tier 1	
THROMBIN INHIBITORS		
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq) (generic of PRADAXA)</i>	Tier 1	QL (2 caps every 1 day)
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq) (generic of PRADAXA)</i>	Tier 1	QL (2 caps every 1 day)
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq) (generic of PRADAXA)</i>	Tier 1	QL (2 caps every 1 day)
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA TAB 2MG	Tier 2	ST, PA, QL (2 tabs every 1 day); PA for new starts
FYCOMPA TAB 4MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
FYCOMPA TAB 6MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
FYCOMPA TAB 8MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
FYCOMPA TAB 10MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
FYCOMPA TAB 12MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam suspension 2.5 mg/ml (generic of ONFI)</i>	Tier 1	
<i>clobazam tab 10 mg (generic of ONFI)</i>	Tier 1	
<i>clobazam tab 20 mg (generic of ONFI)</i>	Tier 1	
<i>clonazepam tab 0.5 mg (generic of KLOPINOPIN)</i>	Tier 1	
<i>clonazepam tab 1 mg (generic of KLOPINOPIN)</i>	Tier 1	
<i>clonazepam tab 2 mg (generic of KLOPINOPIN)</i>	Tier 1	
<i>diazepam rectal gel delivery system 2.5 mg</i>	Tier 1	QL (2 kits every fill)
<i>diazepam rectal gel delivery system 10 mg</i>	Tier 1	QL (2 kits every fill)
<i>diazepam rectal gel delivery system 20 mg</i>	Tier 1	QL (2 kits every fill)
NAYZILAM SPR 5MG	Tier 2	QL (5 boxes every 30 days)
VALTOCO SPR 5MG	Tier 2	QL (5 boxes every 30 days)
VALTOCO SPR 10MG	Tier 2	QL (5 boxes every 30 days)
VALTOCO SPR 15MG	Tier 2	QL (5 boxes every 30 days)
VALTOCO SPR 20MG	Tier 2	QL (5 boxes every 30 days)

Drug Name	Drug Tier	Requirements/Limits
ANTICONVULSANTS - MISC.		
<i>carbamazepine cap er 12hr 100 mg (generic of CARBATROL)</i>	Tier 1	
<i>carbamazepine cap er 12hr 200 mg (generic of CARBATROL)</i>	Tier 1	
<i>carbamazepine cap er 12hr 300 mg (generic of CARBATROL)</i>	Tier 1	
<i>carbamazepine chew tab 100 mg</i>	Tier 1	
<i>carbamazepine susp 100 mg/5ml (generic of TEGRITOL)</i>	Tier 1	
<i>carbamazepine tab 200 mg</i>	Tier 1	
<i>carbamazepine tab 200 mg (generic of TEGRITOL)</i>	Tier 1	
<i>carbamazepine tab er 12hr 100 mg (generic of TEGRITOL-XR)</i>	Tier 1	
<i>carbamazepine tab er 12hr 200 mg (generic of TEGRITOL-XR)</i>	Tier 1	
<i>carbamazepine tab er 12hr 400 mg (generic of TEGRITOL-XR)</i>	Tier 1	
DIACOMIT CAP 250MG	Tier 2	PA, QL (6 caps every 1 day)
DIACOMIT CAP 500MG	Tier 2	PA, QL (6 caps every 1 day)
DIACOMIT PAK 250MG	Tier 2	PA, QL (6 packets every 1 day)
DIACOMIT PAK 500MG	Tier 2	PA, QL (6 packets every 1 day)
EPIDIOLEX SOL 100MG/ML	Tier 2	PA, QL (20 mL every 1 day)
FINTEPLA SOL 2.2MG/ML	Tier 2	PA, QL (12 mL every 1 day)
<i>gabapentin cap 100 mg (generic of NEURONTIN)</i>	Tier 1	
<i>gabapentin cap 300 mg (generic of NEURONTIN)</i>	Tier 1	
<i>gabapentin cap 400 mg (generic of NEURONTIN)</i>	Tier 1	
<i>gabapentin oral soln 250 mg/5ml (generic of NEURONTIN)</i>	Tier 1	
<i>gabapentin tab 600 mg (generic of NEURONTIN)</i>	Tier 1	
<i>gabapentin tab 800 mg (generic of NEURONTIN)</i>	Tier 1	
<i>lacosamide oral solution 10 mg/ml (generic of VIMPAT)</i>	Tier 1	
<i>lacosamide tab 50 mg (generic of VIMPAT)</i>	Tier 1	QL (2 tabs every 1 day)
<i>lacosamide tab 100 mg (generic of VIMPAT)</i>	Tier 1	QL (2 tabs every 1 day)
<i>lacosamide tab 150 mg (generic of VIMPAT)</i>	Tier 1	QL (2 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>lacosamide tab 200 mg (generic of VIMPAT)</i>	Tier 1	QL (2 tabs every 1 day)
<i>lamotrigine tab 25 mg (generic of LAMICTAL)</i>	Tier 1	
<i>lamotrigine tab 100 mg (generic of LAMICTAL)</i>	Tier 1	
<i>lamotrigine tab 150 mg (generic of LAMICTAL)</i>	Tier 1	
<i>lamotrigine tab 200 mg (generic of LAMICTAL)</i>	Tier 1	
<i>lamotrigine tab chewable dispersible 5 mg (generic of LAMICTAL CHEWABLE DISPERS)</i>	Tier 1	
<i>lamotrigine tab chewable dispersible 25 mg (generic of LAMICTAL CHEWABLE DISPERS)</i>	Tier 1	
<i>lamotrigine tab er 24hr 25 mg (generic of LAMICTAL XR)</i>	Tier 1	
<i>lamotrigine tab er 24hr 50 mg (generic of LAMICTAL XR)</i>	Tier 1	
<i>lamotrigine tab er 24hr 100 mg (generic of LAMICTAL XR)</i>	Tier 1	
<i>lamotrigine tab er 24hr 200 mg (generic of LAMICTAL XR)</i>	Tier 1	
<i>lamotrigine tab er 24hr 250 mg (generic of LAMICTAL XR)</i>	Tier 1	
<i>lamotrigine tab er 24hr 300 mg (generic of LAMICTAL XR)</i>	Tier 1	
<i>levetiracetam oral soln 100 mg/ml (generic of KEPPRA)</i>	Tier 1	
<i>levetiracetam tab 250 mg (generic of KEPPRA)</i>	Tier 1	
<i>levetiracetam tab 500 mg (generic of KEPPRA)</i>	Tier 1	
<i>levetiracetam tab 750 mg (generic of KEPPRA)</i>	Tier 1	
<i>levetiracetam tab 1000 mg (generic of KEPPRA)</i>	Tier 1	
<i>levetiracetam tab er 24hr 500 mg (generic of KEPPRA XR)</i>	Tier 1	
<i>levetiracetam tab er 24hr 750 mg (generic of KEPPRA XR)</i>	Tier 1	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml) (generic of TRILEPTAL)</i>	Tier 1	
<i>oxcarbazepine tab 150 mg (generic of TRILEPTAL)</i>	Tier 1	
<i>oxcarbazepine tab 300 mg (generic of TRILEPTAL)</i>	Tier 1	
<i>oxcarbazepine tab 600 mg (generic of TRILEPTAL)</i>	Tier 1	
<i>pregabalin cap 25 mg (generic of LYRICA)</i>	Tier 1	QL (4 caps every 1 day)
<i>pregabalin cap 50 mg (generic of LYRICA)</i>	Tier 1	QL (4 caps every 1 day)
<i>pregabalin cap 75 mg (generic of LYRICA)</i>	Tier 1	QL (4 caps every 1 day)
<i>pregabalin cap 100 mg (generic of LYRICA)</i>	Tier 1	QL (4 caps every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>pregabalin cap 150 mg (generic of LYRICA)</i>	Tier 1	QL (4 caps every 1 day)
<i>pregabalin cap 200 mg (generic of LYRICA)</i>	Tier 1	QL (3 caps every 1 day)
<i>pregabalin cap 225 mg (generic of LYRICA)</i>	Tier 1	QL (2 caps every 1 day)
<i>pregabalin cap 300 mg (generic of LYRICA)</i>	Tier 1	QL (2 caps every 1 day)
<i>primidone tab 50 mg (generic of MYSOLINE)</i>	Tier 1	
<i>primidone tab 250 mg (generic of MYSOLINE)</i>	Tier 1	
<i>rufinamide susp 40 mg/ml (generic of BANZEL)</i>	Tier 1	
<i>rufinamide tab 200 mg (generic of BANZEL)</i>	Tier 1	
<i>rufinamide tab 400 mg (generic of BANZEL)</i>	Tier 1	
<i>topiramate sprinkle cap 15 mg (generic of TOPAMAX SPRINKLE)</i>	Tier 1	
<i>topiramate sprinkle cap 25 mg (generic of TOPAMAX SPRINKLE)</i>	Tier 1	
<i>topiramate tab 25 mg (generic of TOPAMAX)</i>	Tier 1	
<i>topiramate tab 50 mg (generic of TOPAMAX)</i>	Tier 1	
<i>topiramate tab 100 mg (generic of TOPAMAX)</i>	Tier 1	
<i>topiramate tab 200 mg (generic of TOPAMAX)</i>	Tier 1	
<i>zonisamide cap 25 mg (generic of ZONEGRAN)</i>	Tier 1	
<i>zonisamide cap 50 mg</i>	Tier 1	
<i>zonisamide cap 100 mg (generic of ZONEGRAN)</i>	Tier 1	
ZTALMY SUS 50MG/ML	Tier 2	PA, QL (1,100 mL every 30 days)

CARBAMATES

<i>felbamate susp 600 mg/5ml</i>	Tier 1	
<i>felbamate tab 400 mg (generic of FELBATOL)</i>	Tier 1	
<i>felbamate tab 600 mg (generic of FELBATOL)</i>	Tier 1	
<i>XCOPRI PAK 12.5-25</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>XCOPRI PAK 50-100MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>XCOPRI PAK 100-150</i>	Tier 2	PA, QL (2 tabs every 1 day)
<i>XCOPRI PAK 150-200 (350 MG DAILY DOSE)</i>	Tier 2	PA, QL (2 tabs every 1 day)
<i>XCOPRI PAK 150-200 (TITRATION)</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>XCOPRI TAB 25MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>XCOPRI TAB 50MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>XCOPRI TAB 100MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>XCOPRI TAB 150MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>XCOPRI TAB 200MG</i>	Tier 2	PA, QL (2 tabs every 1 day)

HYDANTOINS

<i>phenytoin chew tab 50 mg (generic of DILANTIN INFATABS)</i>	Tier 1	AGE (Max 12)
<i>phenytoin sodium extended cap 100 mg (generic of DILANTIN)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin susp 125 mg/5ml (generic of DILANTIN-125)</i>	Tier 1	
SUCCINIMIDES		
<i>ethosuximide cap 250 mg (generic of ZARONTIN)</i>	Tier 1	
<i>ethosuximide soln 250 mg/5ml (generic of ZARONTIN)</i>	Tier 1	
VALPROIC ACID		
<i>divalproex sodium tab delayed release 125 mg (generic of DEPAKOTE)</i>	Tier 1	
<i>divalproex sodium tab delayed release 250 mg (generic of DEPAKOTE)</i>	Tier 1	
<i>divalproex sodium tab delayed release 500 mg (generic of DEPAKOTE)</i>	Tier 1	
<i>divalproex sodium tab er 24 hr 250 mg (generic of DEPAKOTE ER)</i>	Tier 1	
<i>divalproex sodium tab er 24 hr 500 mg (generic of DEPAKOTE ER)</i>	Tier 1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	Tier 1	
<i>valproic acid cap 250 mg</i>	Tier 1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine orally disintegrating tab 15 mg (generic of REMERON SOLTAB)</i>	Tier 1	
<i>mirtazapine orally disintegrating tab 30 mg (generic of REMERON SOLTAB)</i>	Tier 1	
<i>mirtazapine orally disintegrating tab 45 mg (generic of REMERON SOLTAB)</i>	Tier 1	
<i>mirtazapine tab 7.5 mg</i>	Tier 1	
<i>mirtazapine tab 15 mg (generic of REMERON)</i>	Tier 1	
<i>mirtazapine tab 30 mg (generic of REMERON)</i>	Tier 1	
<i>mirtazapine tab 45 mg</i>	Tier 1	
ANTIDEPRESSANTS - MISC.		
<i>bupropion hcl tab 75 mg</i>	Tier 1	
<i>bupropion hcl tab 100 mg</i>	Tier 1	
<i>bupropion hcl tab er 12hr 100 mg (generic of WELLBUTRIN SR)</i>	Tier 1	
<i>bupropion hcl tab er 12hr 150 mg (generic of WELLBUTRIN SR)</i>	Tier 1	
<i>bupropion hcl tab er 12hr 200 mg (generic of WELLBUTRIN SR)</i>	Tier 1	
<i>bupropion hcl tab er 24hr 150 mg (generic of WELLBUTRIN XL)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
bupropion hcl tab er 24hr 300 mg (generic of WELLBUTRIN XL)	Tier 1	
GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID		
ZURZUVAE CAP 25MG	Tier 2	PA, QL (2 caps every 1 day); Max 28 caps every year
ZURZUVAE CAP 30MG	Tier 2	PA, QL (1 cap every 1 day); Max 14 caps every year
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
citalopram hydrobromide oral soln 10 mg/5ml	Tier 1	QL (30 mL every 1 day)
citalopram hydrobromide tab 10 mg (base equiv) (generic of CELEXA)	Tier 1	QL (6 tabs every 1 day)
citalopram hydrobromide tab 20 mg (base equiv) (generic of CELEXA)	Tier 1	QL (3 tabs every 1 day)
citalopram hydrobromide tab 40 mg (base equiv) (generic of CELEXA)	Tier 1	QL (1.5 tabs every 1 day)
escitalopram oxalate tab 5 mg (base equiv) (generic of LEXAPRO)	Tier 1	
escitalopram oxalate tab 10 mg (base equiv) (generic of LEXAPRO)	Tier 1	
escitalopram oxalate tab 20 mg (base equiv) (generic of LEXAPRO)	Tier 1	
fluoxetine hcl cap 10 mg (generic of PROZAC)	Tier 1	
fluoxetine hcl cap 20 mg (generic of PROZAC)	Tier 1	
fluoxetine hcl cap 40 mg (generic of PROZAC)	Tier 1	
fluoxetine hcl solution 20 mg/5ml	Tier 1	
fluoxetine hcl tab 10 mg	Tier 1	
fluoxetine hcl tab 20 mg	Tier 1	
fluvoxamine maleate tab 25 mg	Tier 1	
fluvoxamine maleate tab 50 mg	Tier 1	
fluvoxamine maleate tab 100 mg	Tier 1	
paroxetine hcl tab 10 mg (generic of PAXIL)	Tier 1	
paroxetine hcl tab 20 mg (generic of PAXIL)	Tier 1	
paroxetine hcl tab 30 mg (generic of PAXIL)	Tier 1	
paroxetine hcl tab 40 mg (generic of PAXIL)	Tier 1	
sertraline hcl oral concentrate for solution 20 mg/ml (generic of ZOLOFT)	Tier 1	
sertraline hcl tab 25 mg (generic of ZOLOFT)	Tier 1	
sertraline hcl tab 50 mg (generic of ZOLOFT)	Tier 1	
sertraline hcl tab 100 mg (generic of ZOLOFT)	Tier 1	
SEROTONIN MODULATORS		
nefazodone hcl tab 50 mg	Tier 1	
nefazodone hcl tab 100 mg	Tier 1	
nefazodone hcl tab 150 mg	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>nefazodone hcl tab 200 mg</i>	Tier 1	
<i>nefazodone hcl tab 250 mg</i>	Tier 1	
<i>trazodone hcl tab 50 mg</i>	Tier 1	
<i>trazodone hcl tab 100 mg</i>	Tier 1	
<i>trazodone hcl tab 150 mg</i>	Tier 1	
TRINTELLIX TAB 5MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
TRINTELLIX TAB 10MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
TRINTELLIX TAB 20MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
<i>vilazodone hcl tab 10 mg (generic of VIIBRYD)</i>	Tier 1	QL (1 tab every 1 day)
<i>vilazodone hcl tab 20 mg (generic of VIIBRYD)</i>	Tier 1	QL (1 tab every 1 day)
<i>vilazodone hcl tab 40 mg (generic of VIIBRYD)</i>	Tier 1	QL (1 tab every 1 day)

SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)

<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv) (generic of PRISTIQ)</i>	Tier 1	QL (1 tab every 1 day)
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv) (generic of PRISTIQ)</i>	Tier 1	QL (1 tab every 1 day)
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv) (generic of PRISTIQ)</i>	Tier 1	QL (1 tab every 1 day)
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq) (generic of CYMBALTA)</i>	Tier 1	QL (2 caps every 1 day)
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq) (generic of CYMBALTA)</i>	Tier 1	QL (2 caps every 1 day)
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq) (generic of CYMBALTA)</i>	Tier 1	QL (2 caps every 1 day)
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (generic of EFFEXOR XR)</i>	Tier 1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent) (generic of EFFEXOR XR)</i>	Tier 1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent) (generic of EFFEXOR XR)</i>	Tier 1	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	Tier 1	

TRICYCLIC AGENTS

<i>amitriptyline hcl tab 10 mg</i>	Tier 1	
<i>amitriptyline hcl tab 25 mg</i>	Tier 1	
<i>amitriptyline hcl tab 50 mg</i>	Tier 1	
<i>amitriptyline hcl tab 75 mg</i>	Tier 1	
<i>amitriptyline hcl tab 100 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>amitriptyline hcl tab 150 mg</i>	Tier 1	
<i>clomipramine hcl cap 25 mg</i> (generic of ANAFRANIL)	Tier 1	
<i>clomipramine hcl cap 50 mg</i> (generic of ANAFRANIL)	Tier 1	
<i>clomipramine hcl cap 75 mg</i> (generic of ANAFRANIL)	Tier 1	
<i>desipramine hcl tab 10 mg</i> (generic of NORPRAMIN)	Tier 1	
<i>desipramine hcl tab 25 mg</i> (generic of NORPRAMIN)	Tier 1	
<i>desipramine hcl tab 50 mg</i>	Tier 1	
<i>desipramine hcl tab 75 mg</i>	Tier 1	
<i>desipramine hcl tab 100 mg</i>	Tier 1	
<i>doxepin hcl cap 10 mg</i>	Tier 1	
<i>doxepin hcl cap 25 mg</i>	Tier 1	
<i>doxepin hcl cap 50 mg</i>	Tier 1	
<i>doxepin hcl cap 75 mg</i>	Tier 1	
<i>doxepin hcl cap 100 mg</i>	Tier 1	
<i>doxepin hcl cap 150 mg</i>	Tier 1	
<i>doxepin hcl conc 10 mg/ml</i>	Tier 1	
<i>imipramine hcl tab 10 mg</i>	Tier 1	
<i>imipramine hcl tab 25 mg</i>	Tier 1	
<i>imipramine hcl tab 50 mg</i>	Tier 1	
<i>nortriptyline hcl cap 10 mg</i> (generic of PAMELOR)	Tier 1	
<i>nortriptyline hcl cap 25 mg</i> (generic of PAMELOR)	Tier 1	
<i>nortriptyline hcl cap 50 mg</i> (generic of PAMELOR)	Tier 1	
<i>nortriptyline hcl cap 75 mg</i> (generic of PAMELOR)	Tier 1	

ANTIDIABETICS

ALPHA-GLUCOSIDASE INHIBITORS

<i>acarbose tab 25 mg</i>	Tier 1	
<i>acarbose tab 50 mg</i>	Tier 1	
<i>acarbose tab 100 mg</i>	Tier 1	

ANTIDIABETIC COMBINATIONS

<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	Tier 1	ST, PA
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	Tier 1	ST, PA
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	Tier 1	ST, PA
<i>alogliptin-pioglitazone tab 25-15 mg</i>	Tier 1	ST, PA
<i>alogliptin-pioglitazone tab 25-30 mg</i>	Tier 1	ST, PA
<i>alogliptin-pioglitazone tab 25-45 mg</i>	Tier 1	ST, PA

Drug Name	Drug Tier	Requirements/Limits
dapagliflozin prop-metformin hcl tab er 24hr 5-1000 mg	Tier 1	ST, PA, QL (2 tabs every 1 day)
dapagliflozin prop-metformin hcl tab er 24hr 10-1000 mg	Tier 1	ST, PA, QL (1 tab every 1 day)
glipizide-metformin hcl tab 2.5-250 mg	Tier 1	
glipizide-metformin hcl tab 2.5-500 mg	Tier 1	
glipizide-metformin hcl tab 5-500 mg	Tier 1	
glyburide-metformin tab 1.25-250 mg	Tier 1	
glyburide-metformin tab 2.5-500 mg	Tier 1	
glyburide-metformin tab 5-500 mg	Tier 1	
TRIJARDY XR TAB 5-2.5-1000MG	Tier 2	ST, PA, QL (2 tabs every 1 day)
TRIJARDY XR TAB 10-5-1000 MG	Tier 2	ST, PA, QL (1 tab every 1 day)
TRIJARDY XR TAB 12.5-2.5-1000MG	Tier 2	ST, PA, QL (2 tabs every 1 day)
TRIJARDY XR TAB 25-5-1000 MG	Tier 2	ST, PA, QL (1 tab every 1 day)

BIGUANIDES

metformin hcl tab 500 mg	Tier 1
metformin hcl tab 850 mg	Tier 1
metformin hcl tab 1000 mg	Tier 1
metformin hcl tab er 24hr 500 mg	Tier 1
metformin hcl tab er 24hr 750 mg	Tier 1

DIABETIC OTHER

BAQSIMI ONE POW 3MG/DOSE	Tier 2
BAQSIMI TWO POW 3MG/DOSE	Tier 2
glucagon (rdna) for inj kit 1 mg	Tier 1
GLUCAGON EMR SOL 1MG	Tier 2
GLUCOSE CHEW TAB 4 GM	Tier 2
GLUCOSE-VITAMIN C CHEW TAB 4-6 GM-MG	Tier 2
GVOKE HYPO 1 INJ 0.5/.1ML	Tier 2
GVOKE HYPO 1 INJ 1/0.2ML	Tier 2
GVOKE HYPO 2 INJ 0.5/.1ML	Tier 2
GVOKE HYPO 2 INJ 1/0.2ML	Tier 2
GVOKE KIT SOL 1/0.2ML	Tier 2
GVOKE PFS INJ 1/0.2ML	Tier 2

Dipeptidyl Peptidase-4 (DPP-4) Inhibitors

alogliptin benzoate tab 6.25 mg (base equiv)	Tier 1	ST, PA
alogliptin benzoate tab 12.5 mg (base equiv)	Tier 1	ST, PA
alogliptin benzoate tab 25 mg (base equiv)	Tier 1	ST, PA

Drug Name	Drug Tier	Requirements/Limits
INCRETIN MIMETIC AGENTS		
MOUNJARO INJ 2.5/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
MOUNJARO INJ 5MG/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
MOUNJARO INJ 7.5/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
MOUNJARO INJ 10MG/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
MOUNJARO INJ 12.5/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
MOUNJARO INJ 15MG/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
OZEMPIC INJ 2MG/3ML	Tier 2	ST, PA, QL (1 pen every 28 days)
OZEMPIC INJ 4MG/3ML	Tier 2	ST, PA, QL (1 pen every 28 days)
OZEMPIC INJ 8MG/3ML	Tier 2	ST, PA, QL (1 pen every 28 days)
RYBELSUS TAB 1.5MG	Tier 2	ST, PA, QL (30 tabs every 180 days)
RYBELSUS TAB 3MG	Tier 2	ST, PA, QL (30 tabs every 180 days)
RYBELSUS TAB 4MG	Tier 2	ST, PA, QL (1 tab every 1 day)
RYBELSUS TAB 7MG	Tier 2	ST, PA, QL (1 tab every 1 day)
RYBELSUS TAB 9MG	Tier 2	ST, PA, QL (1 tab every 1 day)
RYBELSUS TAB 14MG	Tier 2	ST, PA, QL (1 tab every 1 day)
TRULICITY INJ 0.75/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
TRULICITY INJ 1.5/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
TRULICITY INJ 3/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
TRULICITY INJ 4.5/0.5	Tier 2	ST, PA, QL (4 pens every 28 days)
INSULIN		
GLARGIN YFGN INJ 100U/ML	Tier 2	QL (2 mL every 1 day)
GLARGIN YFGN SOL 100U/ML	Tier 2	QL (2 mL every 1 day)
HUMULIN INJ 70/30	Tier 2	QL (1 mL every 1 day), OTC
HUMULIN N INJ U-100	Tier 2	QL (1 mL every 1 day), OTC

Drug Name	Drug Tier	Requirements/Limits
HUMULIN R INJ U-100	Tier 2	QL (1 mL every 1 day), OTC
HUMULIN R INJ U-500	Tier 2	PA, QL (20 mL every 30 days)
HUMULIN R INJ U-500	Tier 2	PA, QL (8 pens every 30 days)
INS ASP PROT INJ FLEXPEN	Tier 2	
INSULIN ASPA INJ 70/30	Tier 2	
INSULIN ASPA INJ 100/ML	Tier 2	
INSULIN ASPA INJ FLEXPEN	Tier 2	
INSULIN ASPA INJ PENFILL	Tier 2	
INSULIN GLAR INJ 300/ML	Tier 2	ST, PA, QL (1 mL every 1 day)
INSULIN LISP INJ 100/ML	Tier 2	
INSULIN LISP INJ JUNIOR	Tier 2	
INSULIN LISP INJ PROTAMIN	Tier 2	
LANTUS INJ 100/ML	Tier 2	QL (2 mL every 1 day)
LANTUS SOLOS INJ 100/ML	Tier 2	QL (2 mL every 1 day)
NOVOLIN70/30 INJ RELION	Tier 2	QL (1 mL every 1 day), OTC
NOVOLIN INJ 70/30	Tier 2	QL (1 mL every 1 day), OTC
NOVOLIN N INJ RELION	Tier 2	QL (1 mL every 1 day), OTC
NOVOLIN N INJ U-100	Tier 2	QL (1 mL every 1 day), OTC
NOVOLIN R INJ RELION	Tier 2	QL (1 mL every 1 day), OTC
NOVOLIN R INJ U-100	Tier 2	QL (1 mL every 1 day), OTC
REZVOGLAR INJ 100UT/ML	Tier 2	QL (2 mL every 1 day)

INSULIN SENSITIZING AGENTS

<i>pioglitazone hcl tab 15 mg (base equiv) (generic of ACTOS)</i>	Tier 1
<i>pioglitazone hcl tab 30 mg (base equiv) (generic of ACTOS)</i>	Tier 1
<i>pioglitazone hcl tab 45 mg (base equiv) (generic of ACTOS)</i>	Tier 1

SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS

<i>dapagliflozin propanediol tab 5 mg (base equivalent)</i>	Tier 1	ST, PA, QL (1 tab every 1 day)
<i>dapagliflozin propanediol tab 10 mg (base equivalent)</i>	Tier 1	ST, PA, QL (1 tab every 1 day)
JARDIANCE TAB 10MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
JARDIANCE TAB 25MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
STEGLATRO TAB 5MG	Tier 2	ST, PA, QL (1 tab every 1 day)
STEGLATRO TAB 15MG	Tier 2	ST, PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
SULFONYLUREAS		
glimepiride tab 1 mg	Tier 1	
glimepiride tab 2 mg	Tier 1	
glimepiride tab 4 mg	Tier 1	
glipizide tab 5 mg	Tier 1	
glipizide tab 10 mg	Tier 1	
glipizide tab er 24hr 2.5 mg	Tier 1	
glipizide tab er 24hr 5 mg (generic of GLUCOTROL XL)	Tier 1	
glipizide tab er 24hr 10 mg (generic of GLUCOTROL XL)	Tier 1	
glyburide micronized tab 1.5 mg	Tier 1	
glyburide micronized tab 3 mg	Tier 1	
glyburide micronized tab 6 mg	Tier 1	
glyburide tab 1.25 mg	Tier 1	
glyburide tab 2.5 mg	Tier 1	
glyburide tab 5 mg	Tier 1	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.		
bismuth subsalicylate chew tab 262 mg	Tier 1	OTC
bismuth subsalicylate susp 262 mg/15ml	Tier 1	OTC
bismuth subsalicylate susp 525 mg/15ml	Tier 1	OTC
ANTIPERISTALTIC AGENTS		
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	Tier 1	
diphenoxylate w/ atropine tab 2.5-0.025 mg (generic of LOMOTIL)	Tier 1	
loperamide hcl cap 2 mg	Tier 1	
loperamide hcl cap 2 mg	Tier 1	OTC
loperamide hcl tab 2 mg	Tier 1	OTC
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
CHEMET CAP 100MG	Tier 2	PA
deferasirox granules packet 90 mg (generic of JADENU SPRINKLE)	Tier 1	PA
deferasirox granules packet 180 mg (generic of JADENU SPRINKLE)	Tier 1	PA
deferasirox granules packet 360 mg (generic of JADENU SPRINKLE)	Tier 1	PA
deferasirox tab 90 mg (generic of JADENU)	Tier 1	PA
deferasirox tab 180 mg (generic of JADENU)	Tier 1	PA
deferasirox tab 360 mg (generic of JADENU)	Tier 1	PA

Drug Name	Drug Tier	Requirements/Limits
deferasirox tab for oral susp 125 mg (generic of EXJADE)	Tier 1	PA
deferasirox tab for oral susp 250 mg (generic of EXJADE)	Tier 1	PA
deferasirox tab for oral susp 500 mg (generic of EXJADE)	Tier 1	PA
deferiprone tab 500 mg	Tier 1	PA
FERPRX 2-DAY TAB 1000MG	Tier 2	PA
FERRIPROX SOL 100MG/ML	Tier 2	PA

OPIOID ANTAGONISTS

KLOXXADO SPR 8MG	Tier 2	QL (1 kit every fill)
naloxone hcl inj 0.4 mg/ml	Tier 1	
naloxone hcl nasal spray 4 mg/0.1ml	Tier 1	QL (1 kit every fill)
naloxone hcl nasal spray 4 mg/0.1ml	Tier 1	QL (1 kit every fill), OTC
naloxone hcl soln cartridge 0.4 mg/ml	Tier 1	
naloxone hcl soln prefilled syringe 2 mg/2ml	Tier 1	
naltrexone hcl tab 50 mg	Tier 1	
REXTOVY SPR 4/0.25ML	Tier 2	QL (1 kit every fill)
VIVITROL INJ 380MG	Tier 2	
ZIMHI SOL	Tier 2	

ANTIEMETICS

5-HT3 RECEPTOR ANTAGONISTS

ANZEMET TAB 50MG	Tier 2	PA
gransetron hcl tab 1 mg	Tier 1	ST, PA
ondansetron hcl oral soln 4 mg/5ml	Tier 1	QL (50 mL every 30 days)
ondansetron hcl tab 4 mg	Tier 1	
ondansetron hcl tab 8 mg	Tier 1	
ondansetron hcl tab 24 mg	Tier 1	QL (6 tabs every 30 days; Max 2 fills every 30 days)
ondansetron orally disintegrating tab 4 mg	Tier 1	
ondansetron orally disintegrating tab 8 mg	Tier 1	
SANCUSO DIS 3.1MG	Tier 2	PA

ANTIEMETICS - ANTICHOLINERGIC

dimenhydrinate tab 50 mg	Tier 1	OTC
meclizine hcl chew tab 25 mg	Tier 1	OTC
meclizine hcl tab 12.5 mg	Tier 1	
meclizine hcl tab 12.5 mg	Tier 1	OTC
meclizine hcl tab 25 mg	Tier 1	
meclizine hcl tab 25 mg	Tier 1	OTC
scopolamine td patch 72hr 1 mg/3days	Tier 1	PA
trimethobenzamide hcl cap 300 mg	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
ANTIEMETICS - MISCELLANEOUS		
AKYNZEO CAP 300-0.5	Tier 2	PA, QL (2 caps every 21 days)
<i>doxylamine-pyridoxine tab delayed release 10-10 mg (generic of DICLEGIS)</i>	Tier 1	PA, QL (4 tabs every 1 day)
<i>dronabinol cap 2.5 mg (generic of MARINOL)</i>	Tier 1	QL (4 caps every 1 day)
<i>dronabinol cap 5 mg</i>	Tier 1	QL (4 caps every 1 day)
<i>dronabinol cap 10 mg</i>	Tier 1	QL (4 caps every 1 day)
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant capsule 40 mg</i>	Tier 1	PA
<i>aprepitant capsule 80 mg (generic of EMEND BIPACK)</i>	Tier 1	PA
<i>aprepitant capsule 125 mg</i>	Tier 1	PA
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	Tier 1	PA
<i>EMEND SUS 125MG</i>	Tier 2	PA, QL (3 kits every 1 day)
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq)</i>	Tier 1	PA
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq) (generic of EMEND)</i>	Tier 1	PA
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
BREXAFEMME TAB 150MG	Tier 2	PA, QL (4 tabs every 1 day)
ANTIFUNGALS		
<i>griseofulvin microsize susp 125 mg/5ml</i>	Tier 1	
<i>nystatin tab 500000 unit</i>	Tier 1	
<i>terbinafine hcl tab 250 mg</i>	Tier 1	
IMIDAZOLE-RELATED ANTIFUNGALS		
CRESEMBA CAP 74.5MG	Tier 2	PA, QL (5 caps every 1 day)
CRESEMBA CAP 186MG	Tier 2	PA, QL (2 caps every 1 day)
CRESEMBA INJ 372MG	Tier 2	PA
<i>fluconazole for susp 10 mg/ml</i>	Tier 1	
<i>fluconazole for susp 40 mg/ml (generic of DIFLUCAN)</i>	Tier 1	
<i>fluconazole tab 50 mg</i>	Tier 1	
<i>fluconazole tab 100 mg (generic of DIFLUCAN)</i>	Tier 1	
<i>fluconazole tab 150 mg (generic of DIFLUCAN)</i>	Tier 1	
<i>fluconazole tab 200 mg</i>	Tier 1	
<i>itraconazole cap 100 mg (generic of SPORANOX)</i>	Tier 1	
<i>itraconazole oral soln 10 mg/ml</i>	Tier 1	
<i>ketoconazole tab 200 mg</i>	Tier 1	PA
VIVJOA CAP 150MG	Tier 2	PA, QL (18 caps every 365 days)

Drug Name	Drug Tier	Requirements/Limits
voriconazole tab 50 mg (generic of VFEND)	Tier 1	PA
voriconazole tab 200 mg	Tier 1	PA

ANTIHISTAMINES

ANTIHISTAMINES - ALKYLAMINES

chlorpheniramine maleate tab 4 mg	Tier 1	OTC
chlorpheniramine maleate tab er 12 mg	Tier 1	OTC

ANTIHISTAMINES - ETHANOLAMINES

diphenhydramine hcl cap 25 mg	Tier 1	OTC
diphenhydramine hcl cap 50 mg	Tier 1	OTC
diphenhydramine hcl elixir 12.5 mg/5ml	Tier 1	
diphenhydramine hcl liquid 12.5 mg/5ml	Tier 1	OTC
diphenhydramine hcl tab 25 mg	Tier 1	OTC

ANTIHISTAMINES - NON-SEDATING

cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	Tier 1	
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	Tier 1	OTC
cetirizine hcl tab 5 mg	Tier 1	OTC
cetirizine hcl tab 10 mg	Tier 1	OTC; Available for 90 day fill
desloratadine tab 5 mg (generic of CLARINEX)	Tier 1	
fexofenadine hcl susp 30 mg/5ml (6 mg/ml)	Tier 1	OTC
fexofenadine hcl tab 180 mg	Tier 1	OTC
levocetirizine dihydrochloride tab 5 mg	Tier 1	
levocetirizine dihydrochloride tab 5 mg	Tier 1	OTC
loratadine oral soln 5 mg/5ml	Tier 1	OTC
loratadine tab 10 mg	Tier 1	OTC; Available for 90 day fill

ANTIHISTAMINES - PHENOTHIAZINES

promethazine hcl oral soln 6.25 mg/5ml	Tier 1	
promethazine hcl suppos 12.5 mg	Tier 1	
promethazine hcl suppos 25 mg	Tier 1	
promethazine hcl tab 12.5 mg	Tier 1	
promethazine hcl tab 25 mg	Tier 1	
promethazine hcl tab 50 mg	Tier 1	

ANTIHISTAMINES - PIPERIDINES

cyproheptadine hcl syrup 2 mg/5ml	Tier 1	
cyproheptadine hcl tab 4 mg	Tier 1	

ANTIHYPOLIPIDEMICS

BILE ACID SEQUESTRANTS

cholestyramine light powder 4 gm/dose (generic of QUESTRAN LIGHT)	Tier 1	
cholestyramine light powder packets 4 gm	Tier 1	
cholestyramine powder 4 gm/dose (generic of QUESTRAN)	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>cholestyramine powder packets 4 gm (generic of QUESTRAN)</i>	Tier 1	
<i>colesevelam hcl tab 625 mg (generic of WELCHOL)</i>	Tier 1	
<i>colestipol hcl granule packets 5 gm</i>	Tier 1	
<i>colestipol hcl granules 5 gm (generic of COLESTID)</i>	Tier 1	
<i>colestipol hcl tab 1 gm (generic of COLESTID)</i>	Tier 1	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate micronized cap 67 mg</i>	Tier 1	
<i>fenofibrate micronized cap 134 mg</i>	Tier 1	
<i>fenofibrate micronized cap 200 mg</i>	Tier 1	
<i>fenofibrate tab 54 mg</i>	Tier 1	
<i>fenofibrate tab 145 mg (generic of TRICOR)</i>	Tier 1	
<i>fenofibrate tab 160 mg</i>	Tier 1	
<i>gemfibrozil tab 600 mg (generic of LOPID)</i>	Tier 1	
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium tab 10 mg (base equivalent) (generic of LIPITOR)</i>	Tier 1	Available for 90 day fill
<i>atorvastatin calcium tab 20 mg (base equivalent) (generic of LIPITOR)</i>	Tier 1	Available for 90 day fill
<i>atorvastatin calcium tab 40 mg (base equivalent) (generic of LIPITOR)</i>	Tier 1	Available for 90 day fill
<i>atorvastatin calcium tab 80 mg (base equivalent) (generic of LIPITOR)</i>	Tier 1	Available for 90 day fill
<i>lovastatin tab 10 mg</i>	Tier 1	Available for 90 day fill
<i>lovastatin tab 20 mg</i>	Tier 1	Available for 90 day fill
<i>lovastatin tab 40 mg</i>	Tier 1	Available for 90 day fill
<i>pravastatin sodium tab 10 mg</i>	Tier 1	Available for 90 day fill
<i>pravastatin sodium tab 20 mg</i>	Tier 1	Available for 90 day fill
<i>pravastatin sodium tab 40 mg</i>	Tier 1	Available for 90 day fill
<i>pravastatin sodium tab 80 mg</i>	Tier 1	Available for 90 day fill
<i>rosuvastatin calcium tab 5 mg (generic of CRESTOR)</i>	Tier 1	
<i>rosuvastatin calcium tab 10 mg (generic of CRESTOR)</i>	Tier 1	
<i>rosuvastatin calcium tab 20 mg (generic of CRESTOR)</i>	Tier 1	
<i>rosuvastatin calcium tab 40 mg (generic of CRESTOR)</i>	Tier 1	
<i>simvastatin tab 5 mg</i>	Tier 1	Available for 90 day fill
<i>simvastatin tab 10 mg (generic of ZOCOR)</i>	Tier 1	Available for 90 day fill
<i>simvastatin tab 20 mg (generic of ZOCOR)</i>	Tier 1	Available for 90 day fill

Drug Name	Drug Tier	Requirements/Limits
<i>simvastatin tab 40 mg (generic of ZOCOR)</i>	Tier 1	QL (1 tab every 1 day); Available for 90 day fill
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe tab 10 mg (generic of ZETIA)</i>	Tier 1	
MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS		
<i>JUXTAPID CAP 5MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>JUXTAPID CAP 10MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>JUXTAPID CAP 20MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>JUXTAPID CAP 30MG</i>	Tier 2	PA, QL (1 cap every 1 day)
NICOTINIC ACID DERIVATIVES		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	Tier 1	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	Tier 1	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	Tier 1	
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
<i>REPATHA INJ 140MG/ML</i>	Tier 2	PA, QL (2 syringes every 28 days)
<i>REPATHA PUSH INJ 420/3.5</i>	Tier 2	PA, QL (1 cartridge every 28 days)
<i>REPATHA SURE INJ 140MG/ML</i>	Tier 2	PA, QL (2 pens every 28 days)
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril hcl tab 5 mg</i>	Tier 1	Available for 90 day fill
<i>benazepril hcl tab 10 mg (generic of LOTENSIN)</i>	Tier 1	Available for 90 day fill
<i>benazepril hcl tab 20 mg (generic of LOTENSIN)</i>	Tier 1	Available for 90 day fill
<i>benazepril hcl tab 40 mg (generic of LOTENSIN)</i>	Tier 1	Available for 90 day fill
<i>enalapril maleate oral soln 1 mg/ml (generic of EPANED)</i>	Tier 1	AGE (Max 9)
<i>enalapril maleate tab 2.5 mg (generic of VASOTEC)</i>	Tier 1	Available for 90 day fill
<i>enalapril maleate tab 5 mg (generic of VASOTEC)</i>	Tier 1	Available for 90 day fill
<i>enalapril maleate tab 10 mg (generic of VASOTEC)</i>	Tier 1	Available for 90 day fill
<i>enalapril maleate tab 20 mg (generic of VASOTEC)</i>	Tier 1	Available for 90 day fill
<i>fosinopril sodium tab 10 mg</i>	Tier 1	
<i>fosinopril sodium tab 20 mg</i>	Tier 1	
<i>fosinopril sodium tab 40 mg</i>	Tier 1	
<i>lisinopril tab 2.5 mg (generic of ZESTRIL)</i>	Tier 1	Available for 90 day fill
<i>lisinopril tab 5 mg (generic of ZESTRIL)</i>	Tier 1	Available for 90 day fill

Drug Name	Drug Tier	Requirements/Limits
<i>lisinopril tab 10 mg (generic of ZESTRIL)</i>	Tier 1	Available for 90 day fill
<i>lisinopril tab 20 mg (generic of ZESTRIL)</i>	Tier 1	Available for 90 day fill
<i>lisinopril tab 30 mg (generic of ZESTRIL)</i>	Tier 1	Available for 90 day fill
<i>lisinopril tab 40 mg (generic of ZESTRIL)</i>	Tier 1	Available for 90 day fill
<i>moexipril hcl tab 7.5 mg</i>	Tier 1	
<i>moexipril hcl tab 15 mg</i>	Tier 1	
<i>quinapril hcl tab 5 mg (generic of ACCUPRIL)</i>	Tier 1	
<i>quinapril hcl tab 10 mg (generic of ACCUPRIL)</i>	Tier 1	
<i>quinapril hcl tab 20 mg (generic of ACCUPRIL)</i>	Tier 1	
<i>quinapril hcl tab 40 mg (generic of ACCUPRIL)</i>	Tier 1	
<i>ramipril cap 1.25 mg</i>	Tier 1	
<i>ramipril cap 2.5 mg (generic of ALTACE)</i>	Tier 1	
<i>ramipril cap 5 mg</i>	Tier 1	
<i>ramipril cap 10 mg (generic of ALTACE)</i>	Tier 1	
<i>trandolapril tab 1 mg</i>	Tier 1	
<i>trandolapril tab 2 mg</i>	Tier 1	
<i>trandolapril tab 4 mg</i>	Tier 1	

ANGIOTENSIN II RECEPTOR ANTAGONISTS

<i>irbesartan tab 75 mg</i>	Tier 1
<i>irbesartan tab 150 mg (generic of AVAPRO)</i>	Tier 1
<i>irbesartan tab 300 mg (generic of AVAPRO)</i>	Tier 1
<i>losartan potassium tab 25 mg (generic of COZAAR)</i>	Tier 1
<i>losartan potassium tab 50 mg (generic of COZAAR)</i>	Tier 1
<i>losartan potassium tab 100 mg (generic of COZAAR)</i>	Tier 1
<i>olmesartan medoxomil tab 5 mg (generic of BENICAR)</i>	Tier 1
<i>olmesartan medoxomil tab 20 mg (generic of BENICAR)</i>	Tier 1
<i>olmesartan medoxomil tab 40 mg (generic of BENICAR)</i>	Tier 1
<i>telmisartan tab 20 mg</i>	Tier 1
<i>telmisartan tab 40 mg (generic of MICARDIS)</i>	Tier 1
<i>telmisartan tab 80 mg (generic of MICARDIS)</i>	Tier 1
<i>valsartan tab 40 mg (generic of DIOVAN)</i>	Tier 1
<i>valsartan tab 80 mg (generic of DIOVAN)</i>	Tier 1
<i>valsartan tab 160 mg (generic of DIOVAN)</i>	Tier 1
<i>valsartan tab 320 mg (generic of DIOVAN)</i>	Tier 1

ANTIADRENERGIC ANTIHYPERTENSIVES

<i>clonidine hcl tab 0.1 mg</i>	Tier 1
<i>clonidine hcl tab 0.2 mg</i>	Tier 1
<i>clonidine hcl tab 0.3 mg</i>	Tier 1

Drug Name	Drug Tier	Requirements/Limits
<i>doxazosin mesylate tab 1 mg (generic of CARDURA)</i>	Tier 1	
<i>doxazosin mesylate tab 2 mg (generic of CARDURA)</i>	Tier 1	
<i>doxazosin mesylate tab 4 mg (generic of CARDURA)</i>	Tier 1	
<i>doxazosin mesylate tab 8 mg (generic of CARDURA)</i>	Tier 1	
<i>guanfacine hcl tab 1 mg</i>	Tier 1	
<i>guanfacine hcl tab 2 mg</i>	Tier 1	
<i>methyldopa tab 250 mg</i>	Tier 1	
<i>methyldopa tab 500 mg</i>	Tier 1	
<i>prazosin hcl cap 1 mg</i>	Tier 1	
<i>prazosin hcl cap 2 mg</i>	Tier 1	
<i>prazosin hcl cap 5 mg</i>	Tier 1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	Tier 1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	Tier 1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	Tier 1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	Tier 1	

ANTIHYPERTENSIVE COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg (generic of LOTREL)</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg (generic of LOTREL)</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg (generic of LOTREL)</i>	Tier 1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg (generic of LOTREL)</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg (generic of AMLODIPINE/OLMESARTAN MED)</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg (generic of AMLODIPINE/OLMESARTAN MED)</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg (generic of AMLODIPINE/OLMESARTAN MED)</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg (generic of AMLODIPINE/OLMESARTAN MED)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-valsartan tab 5-160 mg (generic of EXFORGE)</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 5-320 mg (generic of EXFORGE)</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 10-160 mg (generic of EXFORGE)</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 10-320 mg (generic of EXFORGE)</i>	Tier 1	
<i>atenolol & chlorthalidone tab 50-25 mg (generic of TENORETIC 50)</i>	Tier 1	
<i>atenolol & chlorthalidone tab 100-25 mg (generic of TENORETIC 100)</i>	Tier 1	
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	Tier 1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg (generic of LOTENSIN HCT)</i>	Tier 1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg (generic of LOTENSIN HCT)</i>	Tier 1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg (generic of LOTENSIN HCT)</i>	Tier 1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	Tier 1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	Tier 1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	Tier 1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	Tier 1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg (generic of VASERETIC)</i>	Tier 1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg (generic of AVALIDE)</i>	Tier 1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg (generic of AVALIDE)</i>	Tier 1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg (generic of ZESTORETIC)</i>	Tier 1	Available for 90 day fill
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg (generic of ZESTORETIC)</i>	Tier 1	Available for 90 day fill
<i>lisinopril & hydrochlorothiazide tab 20-25 mg (generic of ZESTORETIC)</i>	Tier 1	Available for 90 day fill
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg (generic of HYZAAR)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg (generic of HYZAAR)</i>	Tier 1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg (generic of HYZAAR)</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg (generic of BENICAR HCT)</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg (generic of BENICAR HCT)</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg (generic of BENICAR HCT)</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg (generic of TRIBENZOR)</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg (generic of TRIBENZOR)</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg (generic of TRIBENZOR)</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg (generic of TRIBENZOR)</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg (generic of TRIBENZOR)</i>	Tier 1	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg (generic of ACCURETIC)</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg (generic of DIOVAN HCT)</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg (generic of DIOVAN HCT)</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg (generic of DIOVAN HCT)</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg (generic of DIOVAN HCT)</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg (generic of DIOVAN HCT)</i>	Tier 1	
ENDOTHELIN RECEPTOR ANTAGONISTS		
TRYVIO TAB 12.5MG	Tier 2	PA, QL (1 tab every 1 day)
VASODILATORS		
<i>hydralazine hcl tab 10 mg</i>	Tier 1	
<i>hydralazine hcl tab 25 mg</i>	Tier 1	
<i>hydralazine hcl tab 50 mg</i>	Tier 1	
<i>hydralazine hcl tab 100 mg</i>	Tier 1	
<i>minoxidil tab 2.5 mg</i>	Tier 1	
<i>minoxidil tab 10 mg</i>	Tier 1	
ANTIMALARIALS		
ANTIMALARIALS		
<i>chloroquine phosphate tab 250 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>chloroquine phosphate tab 500 mg</i>	Tier 1	
<i>hydroxychloroquine sulfate tab 200 mg</i> (generic of PLAQUENIL)	Tier 1	
<i>pyrimethamine tab 25 mg</i> (generic of DARAPRIM)	Tier 1	PA, QL (3 tabs every 1 day)

ANTIMYASTHENIC/CHOLINERGIC AGENTS

ANTIMYASTHENIC/CHOLINERGIC AGENTS

FIRDAPSE TAB 10MG	Tier 2	PA, QL (10 tabs every 1 day)
<i>pyridostigmine bromide tab 60 mg</i> (generic of MESTINON)	Tier 1	

ANTIMYCOPATHOGENIC AGENTS

ANTIMYCOPATHOGENIC AGENTS

<i>ethambutol hcl tab 400 mg</i>	Tier 1	
<i>isoniazid syrup 50 mg/5ml</i>	Tier 1	
<i>isoniazid tab 100 mg</i>	Tier 1	
<i>isoniazid tab 300 mg</i>	Tier 1	
PRIFTIN TAB 150MG	Tier 2	
<i>pyrazinamide tab 500 mg</i>	Tier 1	
<i>rifampin cap 150 mg</i>	Tier 1	
<i>rifampin cap 300 mg</i>	Tier 1	

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ALKYLATING AGENTS

<i>cyclophosphamide cap 25 mg</i>	Tier 1	PA
<i>cyclophosphamide cap 50 mg</i>	Tier 1	PA
<i>temozolamide cap 5 mg</i>	Tier 1	PA
<i>temozolamide cap 20 mg</i>	Tier 1	PA
<i>temozolamide cap 100 mg</i>	Tier 1	PA
<i>temozolamide cap 140 mg</i>	Tier 1	PA
<i>temozolamide cap 180 mg</i>	Tier 1	PA
<i>temozolamide cap 250 mg</i>	Tier 1	PA

ANTIMETABOLITES

<i>capecitabine tab 150 mg</i> (generic of XELODA)	Tier 1	PA, QL (4 tabs every 1 day)
<i>capecitabine tab 500 mg</i> (generic of XELODA)	Tier 1	PA, QL (10 tabs every 1 day)
<i>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</i> (generic of PURIXAN)	Tier 1	AGE (Max 12)
<i>mercaptopurine tab 50 mg</i>	Tier 1	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	Tier 1	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	Tier 1	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
ONUREG TAB 200MG	Tier 2	PA, QL (14 tabs every 28 days)
ONUREG TAB 300MG	Tier 2	PA, QL (14 tabs every 28 days)

ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS

FRUZAQLA CAP 1MG	Tier 2	PA, QL (84 caps every 28 days)
FRUZAQLA CAP 5MG	Tier 2	PA, QL (21 caps every 28 days)
INLYTA TAB 1MG	Tier 2	PA, QL (8 tabs every 1 day)
INLYTA TAB 5MG	Tier 2	PA, QL (4 tabs every 1 day)
LENVIMA CAP 4MG	Tier 2	PA, QL (1 cap every 1 day)
LENVIMA CAP 8 MG	Tier 2	PA, QL (2 caps every 1 day)
LENVIMA CAP 10 MG	Tier 2	PA, QL (1 cap every 1 day)
LENVIMA CAP 12MG	Tier 2	PA, QL (3 caps every 1 day)
LENVIMA CAP 14 MG	Tier 2	PA, QL (2 caps every 1 day)
LENVIMA CAP 18 MG	Tier 2	PA, QL (3 caps every 1 day)
LENVIMA CAP 20 MG	Tier 2	PA, QL (2 caps every 1 day)
LENVIMA CAP 24 MG	Tier 2	PA, QL (3 caps every 1 day)

ANTINEOPLASTIC - ANTI-HER2 AGENTS

TUKYSA TAB 50MG	Tier 2	PA, QL (4 tabs every 1 day)
TUKYSA TAB 150MG	Tier 2	PA, QL (4 tabs every 1 day)

ANTINEOPLASTIC - BCL-2 INHIBITORS

VENCLEXTA TAB 10MG	Tier 2	PA, QL (4 tabs every 1 day)
VENCLEXTA TAB 50MG	Tier 2	PA, QL (4 tabs every 1 day)
VENCLEXTA TAB 100MG	Tier 2	PA, QL (6 tabs every 1 day)
VENCLEXTA TAB START PK	Tier 2	PA, QL (42 tabs every 28 days)

ANTINEOPLASTIC - EGFR INHIBITORS

erlotinib hcl tab 25 mg (base equivalent)	Tier 1	PA, QL (2 tabs every 1 day)
erlotinib hcl tab 100 mg (base equivalent) (generic of TARCEVA)	Tier 1	PA, QL (1 tab every 1 day)
erlotinib hcl tab 150 mg (base equivalent)	Tier 1	PA, QL (1 tab every 1 day)
gefitinib tab 250 mg (generic of IRESSA)	Tier 1	PA, QL (1 tab every 1 day)
GILOTRIF TAB 20MG	Tier 2	PA, QL (1 tab every 1 day)
GILOTRIF TAB 30MG	Tier 2	PA, QL (1 tab every 1 day)
GILOTRIF TAB 40MG	Tier 2	PA, QL (1 tab every 1 day)
LAZCLUZE TAB 80MG	Tier 2	PA, QL (2 tabs every 1 day)
LAZCLUZE TAB 240MG	Tier 2	PA, QL (1 tab every 1 day)
TAGRISSO TAB 40MG	Tier 2	PA, QL (1 tab every 1 day)
TAGRISSO TAB 80MG	Tier 2	PA, QL (1 tab every 1 day)
VIZIMPRO TAB 15MG	Tier 2	PA, QL (1 tab every 1 day)
VIZIMPRO TAB 30MG	Tier 2	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
VIZIMPRO TAB 45MG	Tier 2	PA, QL (1 tab every 1 day)
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO TAB 25MG	Tier 2	PA, QL (2 tabs every 1 day)
DAURISMO TAB 100MG	Tier 2	PA, QL (1 tab every 1 day)
ERIVEDGE CAP 150MG	Tier 2	PA, QL (1 cap every 1 day)
ODOMZO CAP 200MG	Tier 2	PA, QL (1 cap every 1 day)
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate tab 250 mg (generic of ZYTIGA)</i>	Tier 1	PA, QL (4 tabs every 1 day)
<i>abiraterone acetate tab 500 mg (generic of ZYTIGA)</i>	Tier 1	PA
AKEEGA TAB 50/500MG	Tier 2	PA, QL (2 tabs every 1 day)
AKEEGA TAB 100/500	Tier 2	PA, QL (2 tabs every 1 day)
<i>anastrozole tab 1 mg (generic of ARIMIDEX)</i>	Tier 1	
<i>bicalutamide tab 50 mg (generic of CASODEX)</i>	Tier 1	PA
ELIGARD INJ 7.5MG	Tier 2	PA
ELIGARD INJ 22.5MG	Tier 2	PA, QL (1 kit every 90 days)
ELIGARD INJ 30MG	Tier 2	PA, QL (1 kit every 120 days)
ELIGARD INJ 45MG	Tier 2	PA, QL (1 kit every 180 days)
ERLEADA TAB 60MG	Tier 2	PA, QL (4 tabs every 1 day)
ERLEADA TAB 240MG	Tier 2	PA, QL (1 tab every 1 day)
<i>exemestane tab 25 mg (generic of AROMASIN)</i>	Tier 1	
<i>letrozole tab 2.5 mg (generic of FEMARA)</i>	Tier 1	
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	Tier 1	
LUPRON DEPOT INJ 3.75MG	Tier 2	
LUPRON DEPOT INJ 7.5MG	Tier 2	
LUPRON DEPOT INJ 11.25MG	Tier 2	QL (1 kit every 84 days)
LUPRON DEPOT INJ 22.5MG	Tier 2	QL (1 kit every 84 days)
LUPRON DEPOT INJ 30MG	Tier 2	QL (1 kit every 112 days)
LUPRON DEPOT INJ 45MG	Tier 2	QL (1 kit every 168 days)
LYSODREN TAB 500MG	Tier 2	PA
<i>megestrol acetate susp 40 mg/ml</i>	Tier 1	
<i>megestrol acetate tab 20 mg</i>	Tier 1	
<i>megestrol acetate tab 40 mg</i>	Tier 1	
<i>nilutamide tab 150 mg (generic of NILANDRON)</i>	Tier 1	PA
NUBEQA TAB 300MG	Tier 2	PA, QL (4 tabs every 1 day)
ORGOVYX TAB 120MG	Tier 2	PA, QL (2 tabs every 1 day)
ORSERDU TAB 86MG	Tier 2	PA, QL (3 tabs every 1 day)
ORSERDU TAB 345MG	Tier 2	PA, QL (1 tab every 1 day)
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	Tier 1	
<i>toremifene citrate tab 60 mg (base equivalent) (generic of FARESTON)</i>	Tier 1	PA, QL (1 tab every 1 day)
XTANDI CAP 40MG	Tier 2	PA, QL (4 caps every 1 day)
XTANDI TAB 40MG	Tier 2	PA, QL (4 tabs every 1 day)
XTANDI TAB 80MG	Tier 2	PA, QL (2 tabs every 1 day)
YONSA TAB 125MG	Tier 2	PA, QL (4 tabs every 1 day)
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG TAB 40MG	Tier 2	PA, QL (3 tabs every 1 day)
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST CAP 1MG	Tier 2	PA, QL (1 cap every 1 day)
POMALYST CAP 2MG	Tier 2	PA, QL (1 cap every 1 day)
POMALYST CAP 3MG	Tier 2	PA, QL (1 cap every 1 day)
POMALYST CAP 4MG	Tier 2	PA, QL (1 cap every 1 day)
ANTINEOPLASTIC - MENIN INHIBITORS		
REVUFORJ TAB 110MG	Tier 2	PA, QL (4 tabs every 1 day)
REVUFORJ TAB 160MG	Tier 2	PA, QL (2 tabs every 1 day)
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT TAB 25MG	Tier 2	PA, QL (1 tab every 1 day)
AYVAKIT TAB 50MG	Tier 2	PA, QL (1 tab every 1 day)
AYVAKIT TAB 100MG	Tier 2	PA, QL (1 tab every 1 day)
AYVAKIT TAB 200MG	Tier 2	PA, QL (1 tab every 1 day)
AYVAKIT TAB 300MG	Tier 2	PA, QL (1 tab every 1 day)
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO PAK 40MG	Tier 2	PA, QL (4 tabs every 28 days)
XPOVIO PAK 40MG TWICE WEEKLY	Tier 2	PA, QL (8 tabs every 28 days)
XPOVIO PAK 50MG	Tier 2	PA, QL (8 tabs every 28 days)
XPOVIO PAK 60MG	Tier 2	PA, QL (24 tabs every 28 days)
XPOVIO PAK 60MG	Tier 2	PA, QL (4 tabs every 28 days)
XPOVIO PAK 80MG	Tier 2	PA, QL (32 tabs every 28 days)
XPOVIO PAK 80MG ONCE WEEKLY	Tier 2	PA, QL (8 tabs every 28 days)
ANTINEOPLASTIC COMBINATIONS		
INQOVI TAB 35-100MG	Tier 2	PA, QL (5 tabs every 28 days)
LONSURF TAB 15-6.14	Tier 2	PA, QL (100 tabs every 28 days)

Drug Name	Drug Tier	Requirements/Limits
LONSURF TAB 20-8.19	Tier 2	PA, QL (80 tabs every 28 days)
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA CAP 150MG	Tier 2	PA, QL (8 caps every 1 day)
ALUNBRIG PAK	Tier 2	PA, QL (1 tab every 1 day)
ALUNBRIG TAB 30MG	Tier 2	PA, QL (4 tabs every 1 day)
ALUNBRIG TAB 90MG	Tier 2	PA, QL (1 tab every 1 day)
ALUNBRIG TAB 180MG	Tier 2	PA, QL (1 tab every 1 day)
AUGTYRO CAP 40MG	Tier 2	PA, QL (8 caps every 1 day)
AUGTYRO CAP 160MG	Tier 2	PA, QL (2 caps every 1 day)
BALVERSA TAB 3MG	Tier 2	PA, QL (3 tabs every 1 day)
BALVERSA TAB 4MG	Tier 2	PA, QL (2 tabs every 1 day)
BALVERSA TAB 5MG	Tier 2	PA, QL (1 tab every 1 day)
BOSULIF CAP 50MG	Tier 2	PA, QL (1 cap every 1 day)
BOSULIF CAP 100MG	Tier 2	PA, QL (3 caps every 1 day)
BOSULIF TAB 100MG	Tier 2	PA, QL (3 tabs every 1 day)
BOSULIF TAB 400MG	Tier 2	PA, QL (1 tab every 1 day)
BOSULIF TAB 500MG	Tier 2	PA, QL (1 tab every 1 day)
BRAFTOVI CAP 75MG	Tier 2	PA, QL (6 caps every 1 day)
BRUKINSA CAP 80MG	Tier 2	PA, QL (4 caps every 1 day)
CABOMETYX TAB 20MG	Tier 2	PA, QL (1 tab every 1 day)
CABOMETYX TAB 40MG	Tier 2	PA, QL (1 tab every 1 day)
CABOMETYX TAB 60MG	Tier 2	PA, QL (1 tab every 1 day)
CALQUENCE TAB 100MG	Tier 2	PA, QL (2 tabs every 1 day)
CAPRELSA TAB 100MG	Tier 2	PA, QL (2 tabs every 1 day)
CAPRELSA TAB 300MG	Tier 2	PA, QL (1 tab every 1 day)
COMETRIQ KIT 60MG	Tier 2	PA, QL (3 caps every 1 day)
COMETRIQ KIT 100MG	Tier 2	PA, QL (2 caps every 1 day)
COMETRIQ KIT 140MG	Tier 2	PA, QL (4 caps every 1 day)
COPIKTRA CAP 15MG	Tier 2	PA, QL (2 caps every 1 day)
COPIKTRA CAP 25MG	Tier 2	PA, QL (2 caps every 1 day)
COTELLIC TAB 20MG	Tier 2	PA, QL (63 tabs every 28 days)
<i>dasatinib tab 20 mg (generic of SPRYCEL)</i>	Tier 1	PA, QL (3 tabs every 1 day)
<i>dasatinib tab 50 mg (generic of SPRYCEL)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>dasatinib tab 70 mg (generic of SPRYCEL)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>dasatinib tab 80 mg (generic of SPRYCEL)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>dasatinib tab 100 mg (generic of SPRYCEL)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>dasatinib tab 140 mg (generic of SPRYCEL)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>everolimus tab 2.5 mg (generic of AFINITOR)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>everolimus tab 5 mg (generic of AFINITOR)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>everolimus tab 7.5 mg (generic of AFINITOR)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>everolimus tab 10 mg (generic of AFINITOR)</i>	Tier 1	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
everolimus tab for oral susp 2 mg (generic of AFINITOR DISPERZ)	Tier 1	PA, QL (2 tabs every 1 day)
everolimus tab for oral susp 3 mg (generic of AFINITOR DISPERZ)	Tier 1	PA, QL (3 tabs every 1 day)
everolimus tab for oral susp 5 mg (generic of AFINITOR DISPERZ)	Tier 1	PA, QL (2 tabs every 1 day)
FOTIVDA CAP 0.89MG	Tier 2	PA
FOTIVDA CAP 1.34MG	Tier 2	PA
GAVRETO CAP 100MG	Tier 2	PA, QL (4 caps every 1 day)
GOMEKLI CAP 1MG	Tier 2	PA, QL (42 caps every 28 days)
GOMEKLI CAP 2MG	Tier 2	PA, QL (84 caps every 28 days)
GOMEKLI TAB 1MG	Tier 2	PA, QL (168 tabs every 28 days)
IBRANCE CAP 75MG	Tier 2	PA, QL (21 caps every 28 days)
IBRANCE CAP 100MG	Tier 2	PA, QL (21 caps every 28 days)
IBRANCE CAP 125MG	Tier 2	PA, QL (21 caps every 28 days)
IBRANCE TAB 75MG	Tier 2	PA, QL (21 tabs every 28 days)
IBRANCE TAB 100MG	Tier 2	PA, QL (21 tabs every 28 days)
IBRANCE TAB 125MG	Tier 2	PA, QL (21 tabs every 28 days)
ICLUSIG TAB 10MG	Tier 2	PA, QL (1 tab every 1 day)
ICLUSIG TAB 15MG	Tier 2	PA, QL (1 tab every 1 day)
ICLUSIG TAB 30MG	Tier 2	PA, QL (1 tab every 1 day)
ICLUSIG TAB 45MG	Tier 2	PA, QL (1 tab every 1 day)
IDHIFA TAB 50MG	Tier 2	PA, QL (1 tab every 1 day)
IDHIFA TAB 100MG	Tier 2	PA, QL (1 tab every 1 day)
imatinib mesylate tab 100 mg (base equivalent) (generic of GLEEVEC)	Tier 1	PA, QL (3 tabs every 1 day)
imatinib mesylate tab 400 mg (base equivalent) (generic of GLEEVEC)	Tier 1	PA, QL (2 tabs every 1 day)
IMBRUVICA CAP 70MG	Tier 2	PA, QL (1 cap every 1 day)
IMBRUVICA CAP 140MG	Tier 2	PA, QL (3 caps every 1 day)
IMBRUVICA SUS 70MG/ML	Tier 2	PA, QL (6 mL every 1 day)
IMBRUVICA TAB 140MG	Tier 2	PA, QL (1 tab every 1 day)
IMBRUVICA TAB 280MG	Tier 2	PA, QL (1 tab every 1 day)
IMBRUVICA TAB 420MG	Tier 2	PA, QL (1 tab every 1 day)
INREBIC CAP 100MG	Tier 2	PA, QL (4 caps every 1 day)

Drug Name	Drug Tier	Requirements/Limits
ITOVEBI TAB 3MG	Tier 2	PA, QL (2 tabs every 1 day)
ITOVEBI TAB 9MG	Tier 2	PA, QL (1 tab every 1 day)
JAKAFI TAB 5MG	Tier 2	PA, QL (2 tabs every 1 day)
JAKAFI TAB 10MG	Tier 2	PA, QL (2 tabs every 1 day)
JAKAFI TAB 15MG	Tier 2	PA, QL (2 tabs every 1 day)
JAKAFI TAB 20MG	Tier 2	PA, QL (2 tabs every 1 day)
JAKAFI TAB 25MG	Tier 2	PA, QL (2 tabs every 1 day)
JAYPIRCA TAB 50MG	Tier 2	PA, QL (1 tab every 1 day)
JAYPIRCA TAB 100MG	Tier 2	PA, QL (2 tabs every 1 day)
KISQALI TAB 200DOSE	Tier 2	PA, QL (21 tabs every 28 days)
KISQALI TAB 400DOSE	Tier 2	PA, QL (42 tabs every 28 days)
KISQALI TAB 600DOSE	Tier 2	PA, QL (63 tabs every 28 days)
KOSELUGO CAP 10MG	Tier 2	PA, QL (8 caps every 1 day)
KOSELUGO CAP 25MG	Tier 2	PA, QL (4 caps every 1 day)
KRAZATI TAB 200MG	Tier 2	PA, QL (6 tabs every 1 day)
<i>lapatinib ditosylate tab 250 mg (base equiv)</i> (generic of TYKERB)	Tier 1	PA, QL (6 tabs every 1 day)
LORBRENA TAB 25MG	Tier 2	PA, QL (3 tabs every 1 day)
LORBRENA TAB 100MG	Tier 2	PA, QL (1 tab every 1 day)
LUMAKRAS TAB 120MG	Tier 2	PA, QL (8 tabs every 1 day)
LUMAKRAS TAB 240MG	Tier 2	PA, QL (4 tabs every 1 day)
LUMAKRAS TAB 320MG	Tier 2	PA, QL (3 tabs every 1 day)
LYNPARZA TAB 100MG	Tier 2	PA, QL (4 tabs every 1 day)
LYNPARZA TAB 150MG	Tier 2	PA, QL (4 tabs every 1 day)
LYTGOBI TAB 4MG (12 MG DAILY DOSE)	Tier 2	PA, QL (3 tabs every 1 day)
LYTGOBI TAB 4MG (16 MG DAILY DOSE)	Tier 2	PA, QL (4 tabs every 1 day)
LYTGOBI TAB 4MG (20 MG DAILY DOSE)	Tier 2	PA, QL (5 tabs every 1 day)
MEKINIST SOL 0.05/ML	Tier 2	PA, QL (40 mL every 1 day)
MEKINIST TAB 0.5MG	Tier 2	PA, QL (3 tabs every 1 day)
MEKINIST TAB 2MG	Tier 2	PA, QL (1 tab every 1 day)
MEKTOVI TAB 15MG	Tier 2	PA, QL (6 tabs every 1 day)
NERLYNX TAB 40MG	Tier 2	PA, QL (6 tabs every 1 day)
<i>nilotinib hcl cap 50 mg (base equivalent)</i>	Tier 1	PA, QL (4 caps every 1 day)
<i>nilotinib hcl cap 150 mg (base equivalent)</i> (generic of TASIGNA)	Tier 1	PA, QL (4 caps every 1 day)
<i>nilotinib hcl cap 200 mg (base equivalent)</i> (generic of TASIGNA)	Tier 1	PA, QL (4 caps every 1 day)
NINLARO CAP 2.3MG	Tier 2	PA, QL (3 caps every 28 days)
NINLARO CAP 3MG	Tier 2	PA, QL (3 caps every 28 days)

Drug Name	Drug Tier	Requirements/Limits
NINLARO CAP 4MG	Tier 2	PA, QL (3 caps every 28 days)
OGSIVEO TAB 50MG	Tier 2	PA, QL (6 tabs every 1 day)
OGSIVEO TAB 100MG	Tier 2	PA, QL (2 tabs every 1 day)
OGSIVEO TAB 150MG	Tier 2	PA, QL (2 tabs every 1 day)
OJEMDA SUS 25MG/ML	Tier 2	PA, QL (96 mL every 28 days)
OJEMDA TAB 100MG	Tier 2	PA, QL (24 tabs every 28 days)
OJJAARA TAB 100MG	Tier 2	PA, QL (1 tab every 1 day)
OJJAARA TAB 150MG	Tier 2	PA, QL (1 tab every 1 day)
OJJAARA TAB 200MG	Tier 2	PA, QL (1 tab every 1 day)
pazopanib hcl tab 200 mg (base equiv) (generic of VOTRIENT)	Tier 1	PA, QL (4 tabs every 1 day)
PEMAZYRE TAB 4.5MG	Tier 2	PA, QL (1 tab every 1 day)
PEMAZYRE TAB 9MG	Tier 2	PA, QL (1 tab every 1 day)
PEMAZYRE TAB 13.5MG	Tier 2	PA, QL (1 tab every 1 day)
PIQRAY 200MG TAB DOSE	Tier 2	PA, QL (1 tab every 1 day)
PIQRAY 250MG TAB DOSE	Tier 2	PA, QL (2 tabs every 1 day)
PIQRAY 300MG TAB DOSE	Tier 2	PA, QL (2 tabs every 1 day)
QINLOCK TAB 50MG	Tier 2	PA, QL (3 tabs every 1 day)
RETEVMO TAB 40MG	Tier 2	PA, QL (3 tabs every 1 day)
RETEVMO TAB 80MG	Tier 2	PA, QL (2 tabs every 1 day)
RETEVMO TAB 120MG	Tier 2	PA, QL (2 tabs every 1 day)
RETEVMO TAB 160MG	Tier 2	PA, QL (2 tabs every 1 day)
REZLIDHIA CAP 150MG	Tier 2	PA, QL (2 caps every 1 day)
ROMVIMZA CAP 14MG	Tier 2	PA, QL (8 caps every 28 days)
ROMVIMZA CAP 20MG	Tier 2	PA, QL (8 caps every 28 days)
ROMVIMZA CAP 30MG	Tier 2	PA, QL (8 caps every 28 days)
ROZLYTREK CAP 100MG	Tier 2	PA, QL (1 cap every 1 day)
ROZLYTREK CAP 200MG	Tier 2	PA, QL (3 caps every 1 day)
ROZLYTREK PAK 50MG	Tier 2	PA, QL (1 packet every 1 day)
RUBRACA TAB 200MG	Tier 2	PA, QL (4 tabs every 1 day)
RUBRACA TAB 250MG	Tier 2	PA, QL (4 tabs every 1 day)
RUBRACA TAB 300MG	Tier 2	PA, QL (4 tabs every 1 day)
RYDAPT CAP 25MG	Tier 2	PA, QL (8 caps every 1 day)
SCEMBLIX TAB 20MG	Tier 2	PA, QL (2 tabs every 1 day)
SCEMBLIX TAB 40MG	Tier 2	PA, QL (2 tabs every 1 day)
SCEMBLIX TAB 100MG	Tier 2	PA, QL (4 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
sorafenib tosylate tab 200 mg (base equivalent) (generic of NEXAVAR)	Tier 1	PA, QL (4 tabs every 1 day)
STIVARGA TAB 40MG	Tier 2	PA, QL (3 tabs every 1 day)
sunitinib malate cap 12.5 mg (base equivalent) (generic of SUTENT)	Tier 1	PA, QL (1 cap every 1 day)
sunitinib malate cap 25 mg (base equivalent) (generic of SUTENT)	Tier 1	PA, QL (1 cap every 1 day)
sunitinib malate cap 37.5 mg (base equivalent) (generic of SUTENT)	Tier 1	PA, QL (1 cap every 1 day)
sunitinib malate cap 50 mg (base equivalent) (generic of SUTENT)	Tier 1	PA, QL (1 cap every 1 day)
TABRECTA TAB 150MG	Tier 2	PA, QL (4 tabs every 1 day)
TABRECTA TAB 200MG	Tier 2	PA, QL (4 tabs every 1 day)
TAFINLAR CAP 50MG	Tier 2	PA, QL (4 caps every 1 day)
TAFINLAR CAP 75MG	Tier 2	PA, QL (4 caps every 1 day)
TAFINLAR TAB 10MG	Tier 2	PA, QL (30 tabs every 1 day)
TALZENNA CAP 0.1MG	Tier 2	PA, QL (1 cap every 1 day)
TALZENNA CAP 0.25MG	Tier 2	PA, QL (3 caps every 1 day)
TALZENNA CAP 0.35MG	Tier 2	PA, QL (1 cap every 1 day)
TALZENNA CAP 1MG	Tier 2	PA, QL (1 cap every 1 day)
TAZVERIK TAB 200MG	Tier 2	PA, QL (8 tabs every 1 day)
TEPMETKO TAB 225MG	Tier 2	PA, QL (2 tabs every 1 day)
TIBSOVO TAB 250MG	Tier 2	PA, QL (2 tabs every 1 day)
TRUQAP PAK 160MG	Tier 2	PA, QL (64 tabs every 28 days)
TRUQAP PAK 200MG	Tier 2	PA, QL (64 tabs every 28 days)
TRUQAP TAB 200MG	Tier 2	PA, QL (64 tabs every 28 days)
TURALIO CAP 125MG	Tier 2	PA, QL (4 caps every 1 day)
VANFLYTA TAB 17.7MG	Tier 2	PA, QL (2 tabs every 1 day)
VANFLYTA TAB 26.5MG	Tier 2	PA, QL (2 tabs every 1 day)
VERZENIO TAB 50MG	Tier 2	PA, QL (2 tabs every 1 day)
VERZENIO TAB 100MG	Tier 2	PA, QL (2 tabs every 1 day)
VERZENIO TAB 150MG	Tier 2	PA, QL (2 tabs every 1 day)
VERZENIO TAB 200MG	Tier 2	PA, QL (2 tabs every 1 day)
VITRAKVI CAP 25MG	Tier 2	PA, QL (6 caps every 1 day)
VITRAKVI CAP 100MG	Tier 2	PA, QL (2 caps every 1 day)
VITRAKVI SOL 20MG/ML	Tier 2	PA, QL (10 mL every 1 day)
VONJO CAP 100MG	Tier 2	PA, QL (4 caps every 1 day)
VORANIGO TAB 10MG	Tier 2	PA, QL (2 tabs every 1 day)
VORANIGO TAB 40MG	Tier 2	PA, QL (1 tab every 1 day)
XALKORI CAP 20MG	Tier 2	PA, QL (4 caps every 1 day)

Drug Name	Drug Tier	Requirements/Limits
XALKORI CAP 50MG	Tier 2	PA, QL (4 caps every 1 day)
XALKORI CAP 150MG	Tier 2	PA, QL (4 caps every 1 day)
XALKORI CAP 200MG	Tier 2	PA, QL (4 caps every 1 day)
XALKORI CAP 250MG	Tier 2	PA, QL (4 caps every 1 day)
XOSPATA TAB 40MG	Tier 2	PA, QL (3 tabs every 1 day)
ZEJULA TAB 100MG	Tier 2	PA, QL (1 tab every 1 day)
ZEJULA TAB 200MG	Tier 2	PA, QL (1 tab every 1 day)
ZEJULA TAB 300MG	Tier 2	PA, QL (1 tab every 1 day)
ZELBORAF TAB 240MG	Tier 2	PA, QL (8 tabs every 1 day)
ZOLINZA CAP 100MG	Tier 2	PA, QL (4 caps every 1 day)
ZYDELIG TAB 100MG	Tier 2	PA, QL (2 tabs every 1 day)
ZYDELIG TAB 150MG	Tier 2	PA, QL (2 tabs every 1 day)
ZYKADIA TAB 150MG	Tier 2	PA, QL (3 tabs every 1 day)

ANTINEOPLASTICS MISC.

BESREMI SOL 500MCG	Tier 2	PA, QL (1 injection every 2 weeks)
<i>bexarotene cap 75 mg (generic of TARGRETIN)</i>	Tier 1	PA
<i>hydroxyurea cap 500 mg (generic of HYDREA)</i>	Tier 1	
MATULANE CAP 50MG	Tier 2	PA
<i>tretinoin cap 10 mg</i>	Tier 1	PA

CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS

IWILFIN TAB 192MG	Tier 2	PA, QL (8 tabs every 1 day)
<i>leucovorin calcium tab 5 mg</i>	Tier 1	PA
<i>leucovorin calcium tab 10 mg</i>	Tier 1	PA
<i>leucovorin calcium tab 15 mg</i>	Tier 1	PA
<i>leucovorin calcium tab 25 mg</i>	Tier 1	PA
<i>mesna inj 100 mg/ml (generic of MESNEX)</i>	Tier 1	PA
<i>mesna tab 400 mg (generic of MESNEX)</i>	Tier 1	PA

MITOTIC INHIBITORS

<i>etoposide cap 50 mg</i>	Tier 1	PA
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TOPOISOMERASE I INHIBITORS

HYCAMTIN CAP 0.25MG	Tier 2	PA
HYCAMTIN CAP 1MG	Tier 2	PA

ANTIPARKINSON AND RELATED THERAPY AGENTS

ANTIPARKINSON ADJUNCTIVE THERAPY

NOURIANZ TAB 20MG	Tier 2	PA, QL (1 tab every 1 day)
NOURIANZ TAB 40MG	Tier 2	PA, QL (1 tab every 1 day)

ANTIPARKINSON ANTICHOLINERGICS

<i>benztropine mesylate tab 0.5 mg</i>	Tier 1	
<i>benztropine mesylate tab 1 mg</i>	Tier 1	
<i>benztropine mesylate tab 2 mg</i>	Tier 1	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>trihexyphenidyl hcl tab 2 mg</i>	Tier 1	
<i>trihexyphenidyl hcl tab 5 mg</i>	Tier 1	
ANTIPARKINSON COMT INHIBITORS		
<i>entacapone tab 200 mg</i>	Tier 1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine hcl cap 100 mg</i>	Tier 1	
<i>amantadine hcl soln 50 mg/5ml</i>	Tier 1	
<i>amantadine hcl tab 100 mg</i>	Tier 1	
<i>bromocriptine mesylate cap 5 mg (base equivalent) (generic of PARLODEL)</i>	Tier 1	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent) (generic of PARLODEL)</i>	Tier 1	
<i>carbidopa & levodopa tab 10-100 mg (generic of SINEMET)</i>	Tier 1	
<i>carbidopa & levodopa tab 25-100 mg (generic of SINEMET)</i>	Tier 1	
<i>carbidopa & levodopa tab 25-250 mg</i>	Tier 1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	Tier 1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	Tier 1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	Tier 1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	Tier 1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	Tier 1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	Tier 1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 1 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 1 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 2 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 3 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 4 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 5 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	Tier 1	QL (1 tab every 1 day)
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	Tier 1	QL (1 tab every 1 day)
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	Tier 1	QL (1 tab every 1 day)
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	Tier 1	QL (1 tab every 1 day)
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	Tier 1	QL (1 tab every 1 day)

ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS

<i>selegiline hcl tab 5 mg</i>	Tier 1
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ANTIPSYCHOTICS/ANTIMANIC AGENTS

ANTIMANIC AGENTS

<i>lithium carbonate cap 150 mg</i>	Tier 1
<i>lithium carbonate cap 300 mg</i>	Tier 1
<i>lithium carbonate cap 600 mg</i>	Tier 1
<i>lithium carbonate tab 300 mg</i>	Tier 1
<i>lithium carbonate tab er 300 mg (generic of LITHOBID)</i>	Tier 1
<i>lithium carbonate tab er 450 mg</i>	Tier 1
<i>lithium oral solution 8 meq/5ml</i>	Tier 1

ANTIPSYCHOTICS - MISC.

<i>lurasidone hcl tab 20 mg (generic of LATUDA)</i>	Tier 1	QL (1 tab every 1 day)
<i>lurasidone hcl tab 40 mg (generic of LATUDA)</i>	Tier 1	QL (1 tab every 1 day)
<i>lurasidone hcl tab 60 mg (generic of LATUDA)</i>	Tier 1	QL (1 tab every 1 day)
<i>lurasidone hcl tab 80 mg (generic of LATUDA)</i>	Tier 1	QL (2 tabs every 1 day)
<i>lurasidone hcl tab 120 mg (generic of LATUDA)</i>	Tier 1	QL (1 tab every 1 day)
<i>NUPLAZID CAP 34MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>NUPLAZID TAB 10MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>VRAYLAR CAP 1.5MG</i>	Tier 2	ST, PA, QL (2 caps every 1 day); PA for new starts
<i>VRAYLAR CAP 3MG</i>	Tier 2	ST, PA, QL (2 caps every 1 day); PA for new starts
<i>VRAYLAR CAP 4.5MG</i>	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts
<i>VRAYLAR CAP 6MG</i>	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts
<i>ziprasidone hcl cap 20 mg (generic of GEODON)</i>	Tier 1	
<i>ziprasidone hcl cap 40 mg (generic of GEODON)</i>	Tier 1	
<i>ziprasidone hcl cap 60 mg (generic of GEODON)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>ziprasidone hcl cap 80 mg (generic of GEODON)</i>	Tier 1	
BENZISOXAZOLES		
INVEGA HAFYE INJ 1092MG	Tier 2	PA, QL (1 syringe every 180 days)
INVEGA HAFYE INJ 1560MG	Tier 2	PA, QL (1 syringe every 180 days)
INVEGA SUST INJ 39/0.25	Tier 2	PA
INVEGA SUST INJ 78/0.5ML	Tier 2	PA
INVEGA SUST INJ 117/0.75	Tier 2	PA
INVEGA SUST INJ 156MG/ML	Tier 2	PA
INVEGA SUST INJ 234/1.5	Tier 2	PA
INVEGA TRINZ INJ 273MG	Tier 2	PA, QL (Max 90 Day Supply)
INVEGA TRINZ INJ 410MG	Tier 2	PA, QL (Max 90 Day Supply)
INVEGA TRINZ INJ 546MG	Tier 2	PA, QL (Max 90 Day Supply)
INVEGA TRINZ INJ 819MG	Tier 2	PA, QL (Max 90 Day Supply)
<i>paliperidone tab er 24hr 1.5 mg</i>	Tier 1	
<i>paliperidone tab er 24hr 3 mg</i>	Tier 1	
<i>paliperidone tab er 24hr 6 mg</i>	Tier 1	
<i>paliperidone tab er 24hr 9 mg</i>	Tier 1	
<i>risperidone microspheres for im extended rel susp 12.5 mg (generic of RISPERDAL CONSTA)</i>	Tier 1	PA
<i>risperidone microspheres for im extended rel susp 25 mg (generic of RISPERDAL CONSTA)</i>	Tier 1	PA
<i>risperidone microspheres for im extended rel susp 37.5 mg (generic of RISPERDAL CONSTA)</i>	Tier 1	PA
<i>risperidone microspheres for im extended rel susp 50 mg (generic of RISPERDAL CONSTA)</i>	Tier 1	PA
<i>risperidone soln 1 mg/ml (generic of RISPERDAL)</i>	Tier 1	
<i>risperidone tab 0.5 mg (generic of RISPERDAL)</i>	Tier 1	
<i>risperidone tab 0.25 mg</i>	Tier 1	
<i>risperidone tab 1 mg (generic of RISPERDAL)</i>	Tier 1	
<i>risperidone tab 2 mg (generic of RISPERDAL)</i>	Tier 1	
<i>risperidone tab 3 mg (generic of RISPERDAL)</i>	Tier 1	
<i>risperidone tab 4 mg (generic of RISPERDAL)</i>	Tier 1	
BUTYROPHENONES		
<i>haloperidol decanoate im soln 50 mg/ml</i>	Tier 1	
<i>haloperidol decanoate im soln 100 mg/ml (generic of HALDOL DECANOATE 100)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>haloperidol lactate oral conc 2 mg/ml</i>	Tier 1	
<i>haloperidol tab 0.5 mg</i>	Tier 1	
<i>haloperidol tab 1 mg</i>	Tier 1	
<i>haloperidol tab 2 mg</i>	Tier 1	
<i>haloperidol tab 5 mg</i>	Tier 1	
<i>haloperidol tab 10 mg</i>	Tier 1	
<i>haloperidol tab 20 mg</i>	Tier 1	
DIBENZAPINES		
<i>asenapine maleate sl tab 2.5 mg (base equiv) (generic of SAPHRIS)</i>	Tier 1	
<i>asenapine maleate sl tab 5 mg (base equiv) (generic of SAPHRIS)</i>	Tier 1	
<i>asenapine maleate sl tab 10 mg (base equiv) (generic of SAPHRIS)</i>	Tier 1	
<i>clozapine tab 25 mg (generic of CLOZARIL)</i>	Tier 1	
<i>clozapine tab 50 mg</i>	Tier 1	
<i>clozapine tab 100 mg (generic of CLOZARIL)</i>	Tier 1	
<i>clozapine tab 200 mg</i>	Tier 1	
<i>loxapine succinate cap 5 mg</i>	Tier 1	
<i>loxapine succinate cap 10 mg</i>	Tier 1	
<i>loxapine succinate cap 25 mg</i>	Tier 1	
<i>loxapine succinate cap 50 mg</i>	Tier 1	
<i>olanzapine for im inj 10 mg (generic of ZYPREXA)</i>	Tier 1	
<i>olanzapine orally disintegrating tab 5 mg</i>	Tier 1	
<i>olanzapine orally disintegrating tab 10 mg</i>	Tier 1	
<i>olanzapine orally disintegrating tab 15 mg</i>	Tier 1	
<i>olanzapine orally disintegrating tab 20 mg</i>	Tier 1	
<i>olanzapine tab 2.5 mg (generic of ZYPREXA)</i>	Tier 1	
<i>olanzapine tab 5 mg (generic of ZYPREXA)</i>	Tier 1	
<i>olanzapine tab 7.5 mg</i>	Tier 1	
<i>olanzapine tab 10 mg</i>	Tier 1	
<i>olanzapine tab 15 mg</i>	Tier 1	
<i>olanzapine tab 20 mg (generic of ZYPREXA)</i>	Tier 1	
<i>quetiapine fumarate tab 25 mg (generic of SEROQUEL)</i>	Tier 1	
<i>quetiapine fumarate tab 50 mg (generic of SEROQUEL)</i>	Tier 1	
<i>quetiapine fumarate tab 100 mg (generic of SEROQUEL)</i>	Tier 1	
<i>quetiapine fumarate tab 200 mg (generic of SEROQUEL)</i>	Tier 1	
<i>quetiapine fumarate tab 300 mg (generic of SEROQUEL)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
quetiapine fumarate tab 400 mg (generic of SEROQUEL)	Tier 1	
quetiapine fumarate tab er 24hr 50 mg (generic of SEROQUEL XR)	Tier 1	
quetiapine fumarate tab er 24hr 150 mg (generic of SEROQUEL XR)	Tier 1	
quetiapine fumarate tab er 24hr 200 mg (generic of SEROQUEL XR)	Tier 1	
quetiapine fumarate tab er 24hr 300 mg (generic of SEROQUEL XR)	Tier 1	
quetiapine fumarate tab er 24hr 400 mg (generic of SEROQUEL XR)	Tier 1	
MUSCARINIC AGENTS		
COBENFY CAP 50-20MG	Tier 2	PA, QL (2 caps every 1 day)
COBENFY CAP 100-20MG	Tier 2	PA, QL (2 caps every 1 day)
COBENFY CAP 125-30MG	Tier 2	PA, QL (2 caps every 1 day)
COBENFY STRT CAP PACK	Tier 2	PA, QL (2 caps every 1 day)
PHENOTHIAZINES		
chlorpromazine hcl tab 10 mg	Tier 1	
chlorpromazine hcl tab 25 mg	Tier 1	
chlorpromazine hcl tab 50 mg	Tier 1	
chlorpromazine hcl tab 100 mg	Tier 1	
chlorpromazine hcl tab 200 mg	Tier 1	
fluphenazine decanoate inj 25 mg/ml	Tier 1	
perphenazine tab 2 mg	Tier 1	
perphenazine tab 4 mg	Tier 1	
perphenazine tab 8 mg	Tier 1	
perphenazine tab 16 mg	Tier 1	
prochlorperazine maleate tab 5 mg (base equivalent)	Tier 1	
prochlorperazine maleate tab 10 mg (base equivalent)	Tier 1	
prochlorperazine suppos 25 mg	Tier 1	QL (12 sup every fill)
thioridazine hcl tab 25 mg	Tier 1	
thioridazine hcl tab 50 mg	Tier 1	
thioridazine hcl tab 100 mg	Tier 1	
trifluoperazine hcl tab 1 mg (base equivalent)	Tier 1	
trifluoperazine hcl tab 2 mg (base equivalent)	Tier 1	
trifluoperazine hcl tab 5 mg (base equivalent)	Tier 1	
trifluoperazine hcl tab 10 mg (base equivalent)	Tier 1	
QUINOLINONE DERIVATIVES		
ABILIFY ASIM INJ 720MG	Tier 2	PA
ABILIFY ASIM INJ 960MG	Tier 2	PA
ABILIFY MAIN INJ 300MG	Tier 2	PA

Drug Name	Drug Tier	Requirements/Limits
ABILIFY MAIN INJ 400MG	Tier 2	PA
ariPIPRAZOLE tab 2 mg (generic of ABILIFY)	Tier 1	
ariPIPRAZOLE tab 5 mg (generic of ABILIFY)	Tier 1	
ariPIPRAZOLE tab 10 mg (generic of ABILIFY)	Tier 1	
ariPIPRAZOLE tab 15 mg (generic of ABILIFY)	Tier 1	
ariPIPRAZOLE tab 20 mg (generic of ABILIFY)	Tier 1	
ariPIPRAZOLE tab 30 mg (generic of ABILIFY)	Tier 1	
ARISTADA INJ 441MG/1.	Tier 2	PA
ARISTADA INJ 662MG/2	Tier 2	PA
ARISTADA INJ 882MG/3	Tier 2	PA
ARISTADA INJ 1064MG	Tier 2	PA
ARISTADA INJ INITIO	Tier 2	PA
REXULTI TAB 0.5MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
REXULTI TAB 0.25MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
REXULTI TAB 1MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
REXULTI TAB 2MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
REXULTI TAB 3MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts
REXULTI TAB 4MG	Tier 2	ST, PA, QL (1 tab every 1 day); PA for new starts

THIOXANTHENES

thiothixene cap 5 mg	Tier 1
thiothixene cap 10 mg	Tier 1

ANTISEPTICS & DISINFECTANTS

IODINE ANTISEPTICS

BETADINE SPR 5%	Tier 2	OTC
BETADINE SRG SOL 7.5%	Tier 2	OTC
FIRST AID OIN 10%	Tier 2	OTC
povidone-iodine soln 10%	Tier 1	OTC

ANTIVIRALS

ANTIRETROVIRALS

abacavir sulfate soln 20 mg/ml (base equiv) (generic of ZIAGEN)	Tier 1	QL (30 mL every 1 day)
abacavir sulfate tab 300 mg (base equiv)	Tier 1	QL (2 tabs every 1 day)
abacavir sulfate-lamivudine tab 600-300 mg	Tier 1	QL (1 tab every 1 day)
APRETUDE SUS 600MG ER	Tier 2	QL (1 injection every 28 days)
APTIVUS CAP 250MG	Tier 2	QL (4 caps every 1 day)
atazanavir sulfate cap 150 mg (base equiv)	Tier 1	QL (1 cap every 1 day)

Drug Name	Drug Tier	Requirements/Limits
atazanavir sulfate cap 200 mg (base equiv) (generic of REYATAZ)	Tier 1	QL (2 caps every 1 day)
atazanavir sulfate cap 300 mg (base equiv) (generic of REYATAZ)	Tier 1	QL (1 cap every 1 day)
BIKTARVY TAB	Tier 2	QL (1 tab every 1 day)
CABENUVA SUS 400-600	Tier 2	QL (Max 60 Day Supply)
CABENUVA SUS 600-900	Tier 2	QL (Max 60 Day Supply)
CIMDUO TAB 300-300	Tier 2	QL (1 tab every 1 day)
COMPLERA TAB	Tier 2	QL (1 tab every 1 day)
darunavir tab 600 mg (generic of PREZISTA)	Tier 1	QL (2 tabs every 1 day)
darunavir tab 800 mg (generic of PREZISTA)	Tier 1	QL (1 tab every 1 day)
DELSTRIGO TAB	Tier 2	QL (1 tab every 1 day)
DESCOVY TAB 120-15MG	Tier 2	QL (1 tab every 1 day)
DESCOVY TAB 200/25MG	Tier 2	ST, PA, QL (1 tab every 1 day)
DOVATO TAB 50-300MG	Tier 2	QL (1 tab every 1 day)
EDURANT TAB 25MG	Tier 2	QL (2 tabs every 1 day)
efavirenz tab 600 mg	Tier 1	QL (1 tab every 1 day)
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	Tier 1	QL (1 tab every 1 day)
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	Tier 1	QL (1 tab every 1 day)
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (generic of SYMFI)	Tier 1	QL (1 tab every 1 day)
emtricitabine caps 200 mg (generic of EMTRIVA)	Tier 1	QL (1 cap every 1 day)
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg (generic of TRUVADA)	Tier 1	QL (1 tab every 1 day)
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg (generic of TRUVADA)	Tier 1	QL (1 tab every 1 day)
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg (generic of TRUVADA)	Tier 1	QL (1 tab every 1 day)
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (generic of TRUVADA)	Tier 1	QL (1 tab every 1 day)
EMTRIVA SOL 10MG/ML	Tier 2	QL (680 mL every 28 days)
etravirine tab 100 mg (generic of INTELENCE)	Tier 1	QL (4 tabs every 1 day)
etravirine tab 200 mg (generic of INTELENCE)	Tier 1	QL (2 tabs every 1 day)
EVOTAZ TAB 300-150	Tier 2	QL (1 tab every 1 day)
fosamprenavir calcium tab 700 mg (base equiv)	Tier 1	QL (4 tabs every 1 day)
FUZEON INJ 90MG	Tier 2	QL (2 vials every 1 day)
GENVOYA TAB	Tier 2	QL (1 tab every 1 day)
INTELENCE TAB 25MG	Tier 2	QL (4 tabs every 1 day)
ISENTRESS CHW 25MG	Tier 2	QL (6 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
ISENTRESS CHW 100MG	Tier 2	QL (6 tabs every 1 day)
ISENTRESS HD TAB 600MG	Tier 2	QL (2 tabs every 1 day)
ISENTRESS POW 100MG	Tier 2	QL (2 packets every 1 day)
ISENTRESS TAB 400MG	Tier 2	QL (4 tabs every 1 day)
JULUCA TAB 50-25MG	Tier 2	QL (1 tab every 1 day)
<i>lamivudine oral soln 10 mg/ml (generic of EPIVIR)</i>	Tier 1	QL (30 mL every 1 day)
<i>lamivudine tab 150 mg (generic of EPIVIR)</i>	Tier 1	QL (2 tabs every 1 day)
<i>lamivudine tab 300 mg (generic of EPIVIR)</i>	Tier 1	QL (1 tab every 1 day)
<i>lamivudine-zidovudine tab 150-300 mg</i>	Tier 1	QL (2 tabs every 1 day)
<i>lopinavir-ritonavir tab 100-25 mg (generic of KALETRA)</i>	Tier 1	QL (10 tabs every 1 day)
<i>lopinavir-ritonavir tab 200-50 mg (generic of KALETRA)</i>	Tier 1	QL (4 tabs every 1 day)
<i>maraviroc tab 150 mg (generic of SELZENTRY)</i>	Tier 1	QL (2 tabs every 1 day)
<i>maraviroc tab 300 mg (generic of SELZENTRY)</i>	Tier 1	QL (4 tabs every 1 day)
<i>nevirapine susp 50 mg/5ml</i>	Tier 1	QL (40 mL every 1 day)
<i>nevirapine tab 200 mg</i>	Tier 1	QL (2 tabs every 1 day)
<i>nevirapine tab er 24hr 400 mg</i>	Tier 1	QL (1 tab every 1 day)
ODEFSEY TAB	Tier 2	QL (1 tab every 1 day)
PIFELTRO TAB 100MG	Tier 2	QL (2 tabs every 1 day)
PREZCOBIX TAB 800-150	Tier 2	QL (1 tab every 1 day)
PREZISTA SUS 100MG/ML	Tier 2	QL (400 mL every 30 days)
PREZISTA TAB 75MG	Tier 2	QL (10 tabs every 1 day)
PREZISTA TAB 150MG	Tier 2	QL (6 tabs every 1 day)
<i>ritonavir tab 100 mg (generic of NORVIR)</i>	Tier 1	QL (12 tabs every 1 day)
STRIBILD TAB	Tier 2	QL (1 tab every 1 day)
SUNLENCA INJ	Tier 2	PA, QL (2 vials every 180 days)
SUNLENCA TAB 300MG (4 PACK)	Tier 2	PA, QL (4 tabs every 365 days)
SUNLENCA TAB 300MG (5 PACK)	Tier 2	PA, QL (5 tabs every 365 days)
SYMTUZA TAB	Tier 2	QL (1 tab every 1 day)
<i>tenofovir disoproxil fumarate tab 300 mg (generic of VIREAD)</i>	Tier 1	QL (1 tab every 1 day)
TIVICAY PD TAB 5MG	Tier 2	QL (12 tabs every 1 day)
TIVICAY TAB 50MG	Tier 2	QL (2 tabs every 1 day)
TRIUMEQ PD TAB	Tier 2	QL (6 tabs every 1 day)
TRIUMEQ TAB	Tier 2	QL (1 tab every 1 day)
TYBOST TAB 150MG	Tier 2	QL (1 tab every 1 day)
VIRACEPT TAB 250MG	Tier 2	QL (10 tabs every 1 day)
VIRACEPT TAB 625MG	Tier 2	QL (4 tabs every 1 day)
<i>zidovudine cap 100 mg (generic of RETROVIR)</i>	Tier 1	QL (6 caps every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>zidovudine syrup 10 mg/ml (generic of RETROVIR)</i>	Tier 1	QL (60 mL every 1 day)
<i>zidovudine tab 300 mg</i>	Tier 1	QL (2 tabs every 1 day)
ANTIVIRAL COMBINATIONS		
PAXLOVID TAB 150-100	Tier 2	
PAXLOVID TAB 300-100	Tier 2	
CMV AGENTS		
LIVTENCITY TAB 200MG	Tier 2	PA, QL (4 tabs every 1 day)
PREVYMIS INJ 240/12	Tier 2	PA, QL (1 vial every 1 day)
PREVYMIS INJ 480/24	Tier 2	PA, QL (1 vial every 1 day)
PREVYMIS PAK 20MG	Tier 2	PA, QL (4 packets every 1 day)
PREVYMIS PAK 120MG	Tier 2	PA, QL (4 packets every 1 day)
PREVYMIS TAB 240MG	Tier 2	PA, QL (1 tab every 1 day)
PREVYMIS TAB 480MG	Tier 2	PA, QL (1 tab every 1 day)
<i>valganciclovir hcl for soln 50 mg/ml (base equiv) (generic of VALCYTE)</i>	Tier 1	AGE (Max 12)
<i>valganciclovir hcl tab 450 mg (base equivalent) (generic of VALCYTE)</i>	Tier 1	QL (4 tabs every 1 day)
HEPATITIS AGENTS		
<i>adefovir dipivoxil tab 10 mg</i>	Tier 1	
BARACLUDE SOL	Tier 2	QL (21 mL every 1 day)
<i>entecavir tab 0.5 mg (generic of BARACLUDE)</i>	Tier 1	QL (1 tab every 1 day)
<i>entecavir tab 1 mg (generic of BARACLUDE)</i>	Tier 1	QL (1 tab every 1 day)
<i>lamivudine tab 100 mg (hbv)</i>	Tier 1	
MAVYRET PAK 50-20MG	Tier 2	QL (6 packets every 1 day), AGE (Min 3, Max 17)
MAVYRET TAB 100-40MG	Tier 2	QL (3 tabs every 1 day)
PEGASYS INJ	Tier 2	PA, QL (1 syringe every 7 days)
PEGASYS INJ 180MCG/M	Tier 2	PA, QL (1 vial every 7 days)
<i>ribavirin cap 200 mg</i>	Tier 1	
<i>ribavirin tab 200 mg</i>	Tier 1	
VOSEVI TAB	Tier 2	ST, PA, QL (1 tab every 1 day)
HERPES AGENTS		
<i>acyclovir cap 200 mg</i>	Tier 1	
<i>acyclovir susp 200 mg/5ml</i>	Tier 1	AGE (Max 9)
<i>acyclovir tab 400 mg</i>	Tier 1	
<i>acyclovir tab 800 mg</i>	Tier 1	
<i>famciclovir tab 125 mg</i>	Tier 1	
<i>famciclovir tab 250 mg</i>	Tier 1	
<i>famciclovir tab 500 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>valacyclovir hcl tab 1 gm (generic of VALTREX)</i>	Tier 1	
<i>valacyclovir hcl tab 500 mg (generic of VALTREX)</i>	Tier 1	
INFLUENZA AGENTS		
<i>oseltamivir phosphate cap 30 mg (base equiv) (generic of TAMIFLU)</i>	Tier 1	
<i>oseltamivir phosphate cap 45 mg (base equiv) (generic of TAMIFLU)</i>	Tier 1	
<i>oseltamivir phosphate cap 75 mg (base equiv) (generic of TAMIFLU)</i>	Tier 1	
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv) (generic of TAMIFLU)</i>	Tier 1	
<i>RELENZA MIS DISKHALE</i>	Tier 2	QL (1 inhaler every 90 days)
<i>rimantadine hydrochloride tab 100 mg</i>	Tier 1	
MISC. ANTIVIRALS		
<i>LAGEVRIA CAP 200MG</i>	Tier 2	
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol tab 3.125 mg (generic of COREG)</i>	Tier 1	
<i>carvedilol tab 6.25 mg (generic of COREG)</i>	Tier 1	
<i>carvedilol tab 12.5 mg (generic of COREG)</i>	Tier 1	
<i>carvedilol tab 25 mg (generic of COREG)</i>	Tier 1	
<i>labetalol hcl tab 100 mg</i>	Tier 1	
<i>labetalol hcl tab 200 mg</i>	Tier 1	
<i>labetalol hcl tab 300 mg</i>	Tier 1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol hcl cap 200 mg</i>	Tier 1	
<i>acebutolol hcl cap 400 mg</i>	Tier 1	
<i>atenolol tab 25 mg (generic of TENORMIN)</i>	Tier 1	Available for 90 day fill
<i>atenolol tab 50 mg (generic of TENORMIN)</i>	Tier 1	Available for 90 day fill
<i>atenolol tab 100 mg (generic of TENORMIN)</i>	Tier 1	Available for 90 day fill
<i>bisoprolol fumarate tab 5 mg</i>	Tier 1	
<i>bisoprolol fumarate tab 10 mg</i>	Tier 1	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv) (generic of TOPROL XL)</i>	Tier 1	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv) (generic of TOPROL XL)</i>	Tier 1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv) (generic of TOPROL XL)</i>	Tier 1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv) (generic of TOPROL XL)</i>	Tier 1	
<i>metoprolol tartrate tab 25 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol tartrate tab 50 mg (generic of LOPRESSOR)</i>	Tier 1	
<i>metoprolol tartrate tab 100 mg (generic of LOPPRESSOR)</i>	Tier 1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol tab 20 mg</i>	Tier 1	
<i>nadolol tab 40 mg</i>	Tier 1	
<i>nadolol tab 80 mg</i>	Tier 1	
<i>propranolol hcl cap er 24hr 60 mg (generic of INDERAL LA)</i>	Tier 1	
<i>propranolol hcl cap er 24hr 80 mg (generic of INDERAL LA)</i>	Tier 1	
<i>propranolol hcl cap er 24hr 120 mg (generic of INDERAL LA)</i>	Tier 1	
<i>propranolol hcl cap er 24hr 160 mg (generic of INDERAL LA)</i>	Tier 1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	Tier 1	
<i>propranolol hcl oral soln 40 mg/5ml</i>	Tier 1	
<i>propranolol hcl tab 10 mg</i>	Tier 1	
<i>propranolol hcl tab 20 mg</i>	Tier 1	
<i>propranolol hcl tab 40 mg</i>	Tier 1	
<i>propranolol hcl tab 60 mg</i>	Tier 1	
<i>propranolol hcl tab 80 mg</i>	Tier 1	
<i>sotalol hcl tab 80 mg (generic of BETAPACE)</i>	Tier 1	
<i>sotalol hcl tab 120 mg (generic of BETAPACE)</i>	Tier 1	
<i>sotalol hcl tab 160 mg (generic of BETAPACE)</i>	Tier 1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine besylate tab 2.5 mg (base equivalent) (generic of NORVASC)</i>	Tier 1	Available for 90 day fill
<i>amlodipine besylate tab 5 mg (base equivalent) (generic of NORVASC)</i>	Tier 1	Available for 90 day fill
<i>amlodipine besylate tab 10 mg (base equivalent) (generic of NORVASC)</i>	Tier 1	Available for 90 day fill
<i>diltiazem hcl cap er 24hr 120 mg</i>	Tier 1	
<i>diltiazem hcl cap er 24hr 180 mg</i>	Tier 1	
<i>diltiazem hcl cap er 24hr 240 mg</i>	Tier 1	
<i>diltiazem hcl coated beads cap er 24hr 120 mg (generic of CARDIZEM CD)</i>	Tier 1	
<i>diltiazem hcl coated beads cap er 24hr 180 mg (generic of CARDIZEM CD)</i>	Tier 1	
<i>diltiazem hcl coated beads cap er 24hr 240 mg (generic of CARDIZEM CD)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl coated beads cap er 24hr 300 mg (generic of CARDIZEM CD)</i>	Tier 1	
<i>diltiazem hcl coated beads cap er 24hr 360 mg (generic of CARDIZEM CD)</i>	Tier 1	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg (generic of TIAZAC)</i>	Tier 1	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg (generic of TIAZAC)</i>	Tier 1	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg (generic of TIAZAC)</i>	Tier 1	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg (generic of TIAZAC)</i>	Tier 1	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg (generic of TIAZAC)</i>	Tier 1	
<i>diltiazem hcl tab 30 mg (generic of CARDIZEM)</i>	Tier 1	
<i>diltiazem hcl tab 60 mg (generic of CARDIZEM)</i>	Tier 1	
<i>diltiazem hcl tab 90 mg</i>	Tier 1	
<i>diltiazem hcl tab 120 mg (generic of CARDIZEM)</i>	Tier 1	
<i>diltiazem hcl tab er 24hr 360 mg (generic of CARDIZEM LA)</i>	Tier 1	
<i>felodipine tab er 24hr 2.5 mg</i>	Tier 1	
<i>felodipine tab er 24hr 5 mg</i>	Tier 1	
<i>felodipine tab er 24hr 10 mg</i>	Tier 1	
<i>KATERZIA SUS 1MG/ML</i>	Tier 2	AGE (Max 9)
<i>nifedipine cap 10 mg</i>	Tier 1	
<i>nifedipine cap 20 mg</i>	Tier 1	
<i>nifedipine tab er 24hr 30 mg</i>	Tier 1	
<i>nifedipine tab er 24hr 60 mg</i>	Tier 1	
<i>nifedipine tab er 24hr 90 mg</i>	Tier 1	
<i>nifedipine tab er 24hr osmotic release 30 mg (generic of PROCARDIA XL)</i>	Tier 1	
<i>nifedipine tab er 24hr osmotic release 60 mg (generic of PROCARDIA XL)</i>	Tier 1	
<i>nifedipine tab er 24hr osmotic release 90 mg (generic of PROCARDIA XL)</i>	Tier 1	
<i>nimodipine cap 30 mg</i>	Tier 1	
<i>NORLIQVA SOL 1MG/ML</i>	Tier 2	AGE (Max 9)
<i>verapamil hcl cap er 24hr 120 mg (generic of VERELAN)</i>	Tier 1	
<i>verapamil hcl cap er 24hr 180 mg (generic of VERELAN)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
verapamil hcl cap er 24hr 200 mg	Tier 1	
verapamil hcl cap er 24hr 240 mg (generic of VERELAN)	Tier 1	
verapamil hcl cap er 24hr 300 mg	Tier 1	
verapamil hcl cap er 24hr 360 mg	Tier 1	
verapamil hcl tab 40 mg	Tier 1	
verapamil hcl tab 80 mg	Tier 1	
verapamil hcl tab 120 mg	Tier 1	
verapamil hcl tab er 120 mg	Tier 1	
verapamil hcl tab er 180 mg	Tier 1	
verapamil hcl tab er 240 mg	Tier 1	

CARDIOTONICS

CARDIAC GLYCOSIDES

digoxin oral soln 0.05 mg/ml	Tier 1	
digoxin tab 125 mcg (0.125 mg) (generic of LANOXIN)	Tier 1	
digoxin tab 250 mcg (0.25 mg) (generic of LANOXIN)	Tier 1	

CARDIOVASCULAR AGENTS - MISC.

CARDIAC MYOSIN INHIBITORS

CAMZYOS CAP 2.5MG	Tier 2	PA, QL (1 cap every 1 day)
CAMZYOS CAP 5MG	Tier 2	PA, QL (1 cap every 1 day)
CAMZYOS CAP 10MG	Tier 2	PA, QL (1 cap every 1 day)
CAMZYOS CAP 15MG	Tier 2	PA, QL (1 cap every 1 day)

CARDIOVASCULAR AGENTS MISC. - COMBINATIONS

ENTRESTO TAB 24-26MG	Tier 2	ST, PA; PA for new starts
ENTRESTO TAB 49-51MG	Tier 2	ST, PA; PA for new starts
ENTRESTO TAB 97-103MG	Tier 2	ST, PA; PA for new starts

PROSTAGLANDIN VASODILATORS

epoprostenol sodium for inj 0.5 mg (generic of VELETRI)	Tier 1	PA
epoprostenol sodium for inj 1.5 mg (generic of VELETRI)	Tier 1	PA
ORENITRAM TAB 0.25MG	Tier 2	PA
ORENITRAM TAB 0.125MG	Tier 2	PA
ORENITRAM TAB 1MG	Tier 2	PA
ORENITRAM TAB 2.5MG	Tier 2	PA
ORENITRAM TAB 5MG	Tier 2	PA
ORENITRAM TAB MONTH 1	Tier 2	PA
ORENITRAM TAB MONTH 2	Tier 2	PA
ORENITRAM TAB MONTH 3	Tier 2	PA
REMODULIN INJ 1MG/ML	Tier 2	PA
REMODULIN INJ 2.5MG/ML	Tier 2	PA

Drug Name	Drug Tier	Requirements/Limits
REMODULIN INJ 5MG/ML	Tier 2	PA
REMODULIN INJ 10MG/ML	Tier 2	PA
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	Tier 1	PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	Tier 1	PA
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	Tier 1	PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	Tier 1	PA
TYVASO DPI POW 16-32-48	Tier 2	PA, QL (9 inhalations every 1 day)
TYVASO DPI POW 16MCG	Tier 2	PA, QL (4 inhalations every 1 day)
TYVASO DPI POW 32MCG	Tier 2	PA, QL (4 inhalations every 1 day)
TYVASO DPI POW 48MCG	Tier 2	PA, QL (4 inhalations every 1 day)
TYVASO DPI POW 64MCG	Tier 2	PA, QL (4 inhalations every 1 day)
TYVASO RF KT SOL 0.6MG/ML	Tier 2	PA, QL (81.2 mL every 28 days)
TYVASO SOL 0.6MG/ML	Tier 2	PA, QL (81.2 mL every 28 days)
TYVASO ST KT SOL 0.6MG/ML	Tier 2	PA, QL (81.2 mL every 28 days)
VENTAVIS SOL 10MCG/ML	Tier 2	PA, QL (9 mL every 1 day)
VENTAVIS SOL 20MCG/ML	Tier 2	PA, QL (9 mL every 1 day)

PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR

WINREVAIR INJ 45MG	Tier 2	PA, QL (1 kit every 21 days)
WINREVAIR INJ 60MG	Tier 2	PA, QL (1 kit every 21 days)

PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS

<i>ambrisentan tab 5 mg (generic of LETAIRIS)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>ambrisentan tab 10 mg (generic of LETAIRIS)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>bosentan tab 62.5 mg (generic of TRACLEER)</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>bosentan tab 125 mg (generic of TRACLEER)</i>	Tier 1	PA, QL (2 tabs every 1 day)
OPSUMIT TAB 10MG	Tier 2	PA, QL (1 tab every 1 day)
TRACLEER TAB 32MG	Tier 2	PA, QL (4 tabs every 1 day)

PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS

<i>sildenafil citrate for suspension 10 mg/ml</i>	Tier 1	QL (6 mL every 1 day), AGE (Max 12)
<i>sildenafil citrate tab 20 mg (generic of REVATIO)</i>	Tier 1	PA, QL (12 tabs every 1 day)
<i>tadalafil tab 20 mg (pah) (generic of ADCIRCA)</i>	Tier 1	PA, QL (2 tabs every 1 day)

PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST

UPTRAVI PACK TAB 200/800	Tier 2	PA, QL (200 tabs every 30 days)
UPTRAVI TAB 200MCG	Tier 2	PA, QL (2 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
UPTRAVI TAB 400MCG	Tier 2	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 600MCG	Tier 2	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 800MCG	Tier 2	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1000MCG	Tier 2	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1200MCG	Tier 2	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1400MCG	Tier 2	PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1600MCG	Tier 2	PA, QL (2 tabs every 1 day)

PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR

ADEMPAS TAB 0.5MG	Tier 2	PA, QL (3 tabs every 1 day)
ADEMPAS TAB 1.5MG	Tier 2	PA, QL (3 tabs every 1 day)
ADEMPAS TAB 1MG	Tier 2	PA, QL (3 tabs every 1 day)
ADEMPAS TAB 2.5MG	Tier 2	PA, QL (3 tabs every 1 day)
ADEMPAS TAB 2MG	Tier 2	PA, QL (3 tabs every 1 day)

SINUS NODE INHIBITORS

ivabradine hcl tab 5 mg (base equiv) (generic of CORLANOR)	Tier 1	ST, PA, QL (2 tabs every 1 day); PA for new starts
ivabradine hcl tab 7.5 mg (base equiv) (generic of CORLANOR)	Tier 1	ST, PA, QL (2 tabs every 1 day); PA for new starts

TRANSTHYRETIN STABILIZERS

VYNDAMAX CAP 61MG	Tier 2	PA, QL (1 cap every 1 day)
VYNDAQEL CAP 20MG	Tier 2	PA, QL (4 caps every 1 day)

VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)

VERQUVO TAB 2.5MG	Tier 2	QL (1 tab every 1 day)
VERQUVO TAB 5MG	Tier 2	PA, QL (1 tab every 1 day)
VERQUVO TAB 10MG	Tier 2	PA, QL (1 tab every 1 day)

CEPHALOSPORINS

CEPHALOSPORINS - 1ST GENERATION

cefadroxil cap 500 mg	Tier 1
cefadroxil for susp 250 mg/5ml	Tier 1
cefadroxil for susp 500 mg/5ml	Tier 1
cefadroxil tab 1 gm	Tier 1
cephalexin cap 250 mg	Tier 1
cephalexin cap 500 mg	Tier 1
cephalexin for susp 125 mg/5ml	Tier 1
cephalexin for susp 250 mg/5ml	Tier 1

CEPHALOSPORINS - 2ND GENERATION

cefprozil for susp 125 mg/5ml	Tier 1
cefprozil for susp 250 mg/5ml	Tier 1
cefprozil tab 250 mg	Tier 1
cefprozil tab 500 mg	Tier 1
cefuroxime axetil tab 250 mg	Tier 1
cefuroxime axetil tab 500 mg	Tier 1

Drug Name	Drug Tier	Requirements/Limits
CEPHALOSPORINS - 3RD GENERATION		
cefdinir cap 300 mg	Tier 1	
cefdinir for susp 125 mg/5ml	Tier 1	
cefdinir for susp 250 mg/5ml	Tier 1	
cefixime cap 400 mg	Tier 1	
cefpodoxime proxetil tab 100 mg	Tier 1	
cefpodoxime proxetil tab 200 mg	Tier 1	
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	Tier 1	Available for 365 day fill
desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	Tier 1	Available for 365 day fill
desogestrel & ethynodiol estradiol tab 0.15 mg-30 mcg	Tier 1	Available for 365 day fill
drospirenone-ethynodiol estradiol tab 3-0.03 mg (generic of YASMIN 28)	Tier 1	Available for 365 day fill
ethynodiol diacetate & ethynodiol estradiol tab 1 mg-35 mcg	Tier 1	Available for 365 day fill
ethynodiol diacetate & ethynodiol estradiol tab 1 mg-50 mcg	Tier 1	Available for 365 day fill
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	Tier 1	Available for 365 day fill
levonorgestrel & ethynodiol estradiol (91-day) tab 0.15-0.03 mg	Tier 1	Available for 365 day fill
levonorgestrel & ethynodiol estradiol tab 0.1 mg-20 mcg	Tier 1	Available for 365 day fill
levonorgestrel & ethynodiol estradiol tab 0.15 mg-30 mcg	Tier 1	Available for 365 day fill
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	Tier 1	Available for 365 day fill
norethindrone & ethynodiol estradiol tab 0.5 mg-35 mcg	Tier 1	Available for 365 day fill
norethindrone & ethynodiol estradiol tab 1 mg-35 mcg	Tier 1	Available for 365 day fill
norethindrone ace & ethynodiol estradiol tab 1 mg-20 mcg	Tier 1	Available for 365 day fill
norethindrone ace & ethynodiol estradiol tab 1.5 mg-30 mcg	Tier 1	Available for 365 day fill
norethindrone ace & ethynodiol estradiol-fe tab 1 mg-20 mcg	Tier 1	Available for 365 day fill
norethindrone ace & ethynodiol estradiol-fe tab 1.5 mg-30 mcg	Tier 1	Available for 365 day fill

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	Tier 1	Available for 365 day fill
<i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	Tier 1	Available for 365 day fill
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	Tier 1	Available for 365 day fill
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	Tier 1	Available for 365 day fill
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	Tier 1	Available for 365 day fill
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	Tier 1	Available for 365 day fill
TYBLUME CHW 0.1-0.02	Tier 2	Available for 365 day fill
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<i>norelgesterom-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	Tier 1	Available for 365 day fill
COMBINATION CONTRACEPTIVES - VAGINAL		
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (generic of NUVARING)</i>	Tier 1	Available for 365 day fill
EMERGENCY CONTRACEPTIVES		
ELLA TAB 30MG	Tier 2	Available for 365 day fill
levonorgestrel tab 1.5 mg	Tier 1	OTC; Available for 365 day fill
PROGESTIN CONTRACEPTIVES - INJECTABLE		
<i>medroxyprogesterone acetate im susp 150 mg/ml (generic of DEPO-PROVERA CONTRACEPTIV)</i>	Tier 1	QL (1 syringe every 84 days); Available for 365 day fill
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (generic of DEPO-PROVERA CONTRACEPTIV)</i>	Tier 1	QL (1 syringe every 84 days); Available for 365 day fill
PROGESTIN CONTRACEPTIVES - ORAL		
<i>norethindrone tab 0.35 mg</i>	Tier 1	Available for 365 day fill
OPILL TAB 0.075MG	Tier 2	OTC; Available for 365 day fill
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>AGAMREE SUS 40MG/ML</i>	Tier 2	PA, QL (7.5 mL every 1 day)
<i>budesonide delayed release particles cap 3 mg</i>	Tier 1	
<i>budesonide tab er 24hr 9 mg (generic of UCERIS)</i>	Tier 1	
<i>deflazacort susp 22.75 mg/ml (generic of EMFLAZA)</i>	Tier 1	PA, QL (52 mL every 30 days)
<i>deflazacort tab 6 mg (generic of EMFLAZA)</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>deflazacort tab 18 mg (generic of EMFLAZA)</i>	Tier 1	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
deflazacort tab 30 mg (generic of EMFLAZA)	Tier 1	PA, QL (1 tab every 1 day)
deflazacort tab 36 mg (generic of EMFLAZA)	Tier 1	PA, QL (1 tab every 1 day)
DEXAMETHASON CON 1MG/ML	Tier 2	
dexamethasone elixir 0.5 mg/5ml	Tier 1	
dexamethasone sod phosphate preservative free inj 10 mg/ml	Tier 1	
dexamethasone sodium phosphate inj 4 mg/ml	Tier 1	
dexamethasone sodium phosphate inj 10 mg/ml	Tier 1	
dexamethasone sodium phosphate inj soln pref syr 4 mg/ml	Tier 1	
dexamethasone soln 0.5 mg/5ml	Tier 1	
dexamethasone tab 0.5 mg	Tier 1	
dexamethasone tab 0.75 mg	Tier 1	
dexamethasone tab 1 mg	Tier 1	
dexamethasone tab 1.5 mg	Tier 1	
dexamethasone tab 2 mg	Tier 1	
dexamethasone tab 4 mg	Tier 1	
dexamethasone tab 6 mg	Tier 1	
EOHILIA SUS 2MG/10ML	Tier 2	PA, QL (20 mL every 1 day)
hydrocortisone tab 5 mg (generic of CORTEF)	Tier 1	
hydrocortisone tab 10 mg (generic of CORTEF)	Tier 1	
hydrocortisone tab 20 mg	Tier 1	
methylprednisolone tab 4 mg (generic of MEDROL)	Tier 1	
methylprednisolone tab 8 mg (generic of MEDROL)	Tier 1	
methylprednisolone tab 16 mg (generic of MEDROL)	Tier 1	
methylprednisolone tab 32 mg	Tier 1	
methylprednisolone tab therapy pack 4 mg (21) (generic of MEDROL DOSEPAK)	Tier 1	
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	Tier 1	
prednisolone soln 15 mg/5ml	Tier 1	
PREDNISONE CON 5MG/ML	Tier 2	
prednisone oral soln 5 mg/5ml	Tier 1	
prednisone tab 1 mg	Tier 1	
prednisone tab 2.5 mg	Tier 1	
prednisone tab 5 mg	Tier 1	
prednisone tab 10 mg	Tier 1	
prednisone tab 20 mg	Tier 1	
prednisone tab 50 mg	Tier 1	
prednisone tab therapy pack 5 mg (21)	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>prednisone tab therapy pack 10 mg (21)</i>	Tier 1	
TARPEYO CAP 4MG	Tier 2	PA, QL (4 caps every 1 day)
MINERALOCORTICOIDS		
<i>fludrocortisone acetate tab 0.1 mg</i>	Tier 1	
COUGH/COLD/ALLERGY		
ANTITUSSIVES		
<i>benzonatate cap 100 mg</i>	Tier 1	
<i>benzonatate cap 200 mg</i>	Tier 1	
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (generic of HYCODAN)</i>	Tier 1	PA
COUGH/COLD/ALLERGY COMBINATIONS		
<i>brompheniramine & pseudoephedrine elixir 1-15 mg/5ml</i>	Tier 1	OTC
<i>cetirizine-pseudoephedrine tab er 12hr 5-120 mg</i>	Tier 1	OTC
<i>dextromethorphan-guaifenesin liquid 5-100 mg/5ml</i>	Tier 1	OTC
<i>dextromethorphan-guaifenesin liquid 10-100 mg/5ml</i>	Tier 1	OTC
<i>dextromethorphan-guaifenesin liquid 10-200 mg/5ml</i>	Tier 1	OTC
<i>dextromethorphan-guaifenesin syrup 10-100 mg/5ml</i>	Tier 1	OTC
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	Tier 1	AGE (Min 12), OTC
<i>loratadine & pseudoephedrine tab er 12hr 5-120 mg</i>	Tier 1	OTC
<i>loratadine & pseudoephedrine tab er 24hr 10-240 mg</i>	Tier 1	OTC
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	Tier 1	AGE (Min 12)
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	Tier 1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	Tier 1	
EXPECTORANTS		
<i>guaifenesin liquid 100 mg/5ml</i>	Tier 1	OTC
<i>guaifenesin tab 200 mg</i>	Tier 1	OTC
<i>potassium iodide oral soln 1 gm/ml</i>	Tier 1	
MISC. RESPIRATORY INHALANTS		
<i>sodium chloride soln nebu 0.9%</i>	Tier 1	
<i>sodium chloride soln nebu 3%</i>	Tier 1	
<i>sodium chloride soln nebu 7%</i>	Tier 1	
MUCOLYTICS		
<i>acetylcysteine inhal soln 10%</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>acetylcysteine inhal soln 20%</i>	Tier 1	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>adapalene gel 0.1%</i>	Tier 1	OTC
<i>benzoyl peroxide gel 5%</i>	Tier 1	QL (1 fill every 30 days; 60 gm per fill), OTC
<i>benzoyl peroxide gel 10%</i>	Tier 1	QL (1 fill every 30 days; 60 gm per fill), OTC
<i>benzoyl peroxide liq 4%</i>	Tier 1	QL (170.1 gm every 30 days), OTC
<i>benzoyl peroxide liq 5%</i>	Tier 1	QL (240 gm every fill), OTC
<i>benzoyl peroxide liq 10%</i>	Tier 1	QL (1 fill every 30 days; 240 mL per fill), OTC
<i>benzoyl peroxide lotion 5%</i>	Tier 1	OTC
<i>benzoyl peroxide lotion 10%</i>	Tier 1	OTC
<i>benzoyl peroxide-erythromycin gel 5-3% (generic of BENZAMYCIN)</i>	Tier 1	QL (23.3 gm every 30 days)
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	Tier 1	QL (45 gm every 30 days)
<i>clindamycin phosphate gel 1% (once-daily) (generic of CLINDAGEL)</i>	Tier 1	QL (30 gm every 30 days)
<i>clindamycin phosphate gel 1% (twice-daily)</i>	Tier 1	QL (30 gm every 30 days)
<i>clindamycin phosphate lotion 1% (generic of CLEOCIN-T)</i>	Tier 1	QL (60 mL every 30 days)
<i>clindamycin phosphate soln 1%</i>	Tier 1	QL (60 mL every 30 days)
<i>clindamycin phosphate swab 1%</i>	Tier 1	QL (60 swabs every 30 days)
<i>erythromycin gel 2% (generic of ERYGEL)</i>	Tier 1	QL (30 gm every 30 days)
<i>erythromycin soln 2%</i>	Tier 1	QL (60 mL every 30 days)
<i>isotretinoin cap 10 mg</i>	Tier 1	PA
<i>isotretinoin cap 10 mg (generic of ABSORICA)</i>	Tier 1	PA
<i>isotretinoin cap 20 mg</i>	Tier 1	PA
<i>isotretinoin cap 20 mg (generic of ABSORICA)</i>	Tier 1	PA
<i>isotretinoin cap 30 mg</i>	Tier 1	PA
<i>isotretinoin cap 30 mg (generic of ABSORICA)</i>	Tier 1	PA
<i>isotretinoin cap 40 mg</i>	Tier 1	PA
<i>isotretinoin cap 40 mg (generic of ABSORICA)</i>	Tier 1	PA
<i>tretinoin cream 0.1% (generic of RETIN-A)</i>	Tier 1	QL (20 gm every 30 days), AGE (Max 40)
<i>tretinoin cream 0.05% (generic of RETIN-A)</i>	Tier 1	QL (20 gm every 30 days), AGE (Max 40)
<i>tretinoin cream 0.025% (generic of RETIN-A)</i>	Tier 1	QL (20 gm every 30 days), AGE (Max 40)

Drug Name	Drug Tier	Requirements/Limits
<i>tretinoin gel 0.01% (generic of RETIN-A)</i>	Tier 1	QL (15 gm every 30 days), AGE (Max 40)
<i>tretinoin gel 0.025% (generic of RETIN-A)</i>	Tier 1	QL (15 gm every 30 days), AGE (Max 40)
ANTI-INFLAMMATORY AGENTS - TOPICAL		
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	Tier 1	QL (100 gm every 30 days), OTC
ANTIBIOTICS - TOPICAL		
<i>bacitracin oint 500 unit/gm</i>	Tier 1	OTC
<i>bacitracin zinc oint 500 unit/gm</i>	Tier 1	OTC
<i>bacitracin-polymyxin b oint</i>	Tier 1	OTC
<i>gentamicin sulfate cream 0.1%</i>	Tier 1	
<i>gentamicin sulfate oint 0.1%</i>	Tier 1	
<i>mupirocin oint 2%</i>	Tier 1	
<i>neomycin-bacitracin-polymyxin oint</i>	Tier 1	OTC
<i>neomycin-bacitracin-polymyxin-pramoxine oint 1%</i>	Tier 1	OTC
ANTIFUNGALS - TOPICAL		
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	Tier 1	QL (30 gm every fill)
<i>ciclopirox shampoo 1%</i>	Tier 1	QL (120 mL every 30 days)
<i>ciclopirox solution 8%</i>	Tier 1	
<i>clotrimazole cream 1%</i>	Tier 1	
<i>clotrimazole cream 1%</i>	Tier 1	OTC
<i>clotrimazole soln 1%</i>	Tier 1	
<i>clotrimazole soln 1%</i>	Tier 1	OTC
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	Tier 1	QL (45 gm every 15 days), AGE (Min 18)
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	Tier 1	AGE (Min 18)
<i>ketoconazole cream 2%</i>	Tier 1	QL (60 gm every 20 days)
<i>ketoconazole shampoo 2%</i>	Tier 1	
<i>miconazole nitrate cream 2%</i>	Tier 1	OTC
<i>nystatin cream 100000 unit/gm</i>	Tier 1	
<i>nystatin oint 100000 unit/gm</i>	Tier 1	
<i>nystatin topical powder 100000 unit/gm</i>	Tier 1	QL (60 gm every fill)
<i>terbinafine hcl cream 1%</i>	Tier 1	OTC
<i>tolnaftate cream 1%</i>	Tier 1	OTC
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>fluorouracil cream 5%</i>	Tier 1	QL (40 gm every 15 days)
<i>fluorouracil soln 2%</i>	Tier 1	
<i>fluorouracil soln 5%</i>	Tier 1	
<i>VALCHLOR GEL 0.016%</i>	Tier 2	PA, QL (120 gm every 30 days)

Drug Name	Drug Tier	Requirements/Limits
ANTIPSORIATICS		
<i>acitretin cap 10 mg</i>	Tier 1	PA
<i>acitretin cap 17.5 mg</i>	Tier 1	PA
<i>acitretin cap 25 mg</i>	Tier 1	PA
BIMZELX INJ 160MG/ML	Tier 2	PA, QL (2 pens every 56 days)
BIMZELX INJ 160MG/ML	Tier 2	PA, QL (2 syringes every 56 days)
BIMZELX INJ 320MG/2	Tier 2	PA, QL (1 pen every 56 days)
BIMZELX INJ 320MG/2	Tier 2	PA, QL (1 syringe every 56 days)
<i>calcipotriene cream 0.005%</i>	Tier 1	QL (60 gm every 30 days)
<i>calcipotriene oint 0.005%</i>	Tier 1	QL (60 gm every fill)
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	Tier 1	QL (60 mL every fill)
COSENTYX INJ 75MG/0.5	Tier 2	PA, QL (1 syringe every 28 days)
COSENTYX INJ 300DOSE	Tier 2	PA, QL (2 syringes every 28 days)
COSENTYX PEN INJ 300DOSE	Tier 2	PA, QL (2 pens every 28 days)
COSENTYX UNO INJ 300/2ML	Tier 2	PA, QL (1 pen every 28 days)
ILUMYA INJ 100MG/ML	Tier 2	PA, QL (1 syringe every 84 days)
<i>methoxsalen rapid cap 10 mg</i>	Tier 1	PA
OTULFI INJ 45/0.5ML	Tier 2	ST, PA, QL (1 syringe every 42 days)
OTULFI INJ 90MG/ML	Tier 2	ST, PA, QL (1 syringe every 42 days)
SELARSDI INJ 45/0.5ML	Tier 2	ST, PA, QL (1 syringe every 42 days)
SELARSDI INJ 90MG/ML	Tier 2	ST, PA, QL (1 syringe every 42 days)
SKYRIZI INJ 150MG/ML	Tier 2	PA, QL (1 syringe every 84 days)
SKYRIZI PEN INJ 150MG/ML	Tier 2	PA, QL (1 pen every 84 days)
SPEVIGO INJ 150/1ML	Tier 2	PA, QL (2 syringes every 28 days)
SPEVIGO INJ 450/7.5	Tier 2	PA, QL (4 vials every 14 days)
STEQEYMA INJ 45/0.5ML	Tier 2	ST, PA, QL (1 syringe every 42 days)

Drug Name	Drug Tier	Requirements/Limits
STEQEYMA INJ 90MG/ML	Tier 2	ST, PA, QL (1 syringe every 42 days)
tazarotene cream 0.1% (generic of TAZORAC)	Tier 1	PA, QL (60 gm every 30 days; 30 gm per fill)
TREMFYA INJ 100MG/ML	Tier 2	PA, QL (1 pen every 56 days)
TREMFYA INJ 100MG/ML	Tier 2	PA, QL (1 syringe every 56 days)
VTAMA CRE 1%	Tier 2	PA, QL (60 gm every 30 days)
YESINTEK INJ 45/0.5ML	Tier 2	ST, PA, QL (1 syringe every 42 days)
YESINTEK INJ 45/0.5ML	Tier 2	ST, PA, QL (1 vial every 42 days)
YESINTEK INJ 90MG/ML	Tier 2	ST, PA, QL (1 syringe every 42 days)
ANTISEBORRHEIC PRODUCTS		
selenium sulfide lotion 2.5%	Tier 1	
ANTIVIRALS - TOPICAL		
acyclovir oint 5% (generic of ZOVIRAX)	Tier 1	QL (15 gm every fill)
docosanol cream 10%	Tier 1	OTC
BURN PRODUCTS		
silver sulfadiazine cream 1% (generic of SILVADENE)	Tier 1	
CORTICOSTEROIDS - TOPICAL		
betamethasone dipropionate augmented cream 0.05%	Tier 1	
betamethasone dipropionate augmented gel 0.05%	Tier 1	
betamethasone dipropionate augmented lotion 0.05%	Tier 1	
betamethasone dipropionate augmented oint 0.05% (generic of DIPROLENE)	Tier 1	
betamethasone dipropionate cream 0.05%	Tier 1	
betamethasone dipropionate lotion 0.05%	Tier 1	
betamethasone dipropionate oint 0.05%	Tier 1	
betamethasone valerate cream 0.1% (base equivalent)	Tier 1	
betamethasone valerate lotion 0.1% (base equivalent)	Tier 1	
betamethasone valerate oint 0.1% (base equivalent)	Tier 1	
clobetasol propionate cream 0.05%	Tier 1	QL (60 gm every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>clobetasol propionate emollient base cream 0.05%</i>	Tier 1	QL (60 gm every 30 days)
<i>clobetasol propionate oint 0.05%</i>	Tier 1	QL (60 gm every 30 days)
<i>clobetasol propionate soln 0.05%</i>	Tier 1	QL (100 mL every 30 days)
<i>desonide cream 0.05% (generic of DESOWEN)</i>	Tier 1	QL (60 gm every 30 days)
<i>desonide oint 0.05%</i>	Tier 1	QL (15 gm every fill)
<i>fluocinolone acetonide cream 0.01%</i>	Tier 1	
<i>fluocinolone acetonide cream 0.025% (generic of SYNALAR)</i>	Tier 1	
<i>fluocinolone acetonide oint 0.025% (generic of SYNALAR)</i>	Tier 1	
<i>fluocinolone acetonide soln 0.01%</i>	Tier 1	
<i>fluocinonide cream 0.05%</i>	Tier 1	
<i>fluocinonide emulsified base cream 0.05%</i>	Tier 1	
<i>fluocinonide gel 0.05%</i>	Tier 1	
<i>fluocinonide oint 0.05%</i>	Tier 1	
<i>fluocinonide soln 0.05%</i>	Tier 1	
<i>fluticasone propionate cream 0.05%</i>	Tier 1	
<i>fluticasone propionate oint 0.005%</i>	Tier 1	
<i>hydrocortisone acetate oint 1%</i>	Tier 1	OTC
<i>hydrocortisone cream 0.5%</i>	Tier 1	OTC
<i>hydrocortisone cream 1%</i>	Tier 1	
<i>hydrocortisone cream 1%</i>	Tier 1	OTC
<i>hydrocortisone cream 2.5%</i>	Tier 1	
<i>hydrocortisone lotion 1%</i>	Tier 1	OTC
<i>hydrocortisone oint 0.5%</i>	Tier 1	OTC
<i>hydrocortisone oint 1%</i>	Tier 1	
<i>hydrocortisone oint 1%</i>	Tier 1	OTC
<i>hydrocortisone oint 2.5%</i>	Tier 1	
<i>mometasone furoate cream 0.1%</i>	Tier 1	
<i>mometasone furoate oint 0.1%</i>	Tier 1	
<i>triamcinolone acetonide cream 0.1%</i>	Tier 1	
<i>triamcinolone acetonide cream 0.5%</i>	Tier 1	
<i>triamcinolone acetonide cream 0.025%</i>	Tier 1	
<i>triamcinolone acetonide lotion 0.1%</i>	Tier 1	
<i>triamcinolone acetonide lotion 0.025%</i>	Tier 1	
<i>triamcinolone acetonide oint 0.1%</i>	Tier 1	
<i>triamcinolone acetonide oint 0.5%</i>	Tier 1	
<i>triamcinolone acetonide oint 0.025%</i>	Tier 1	
DIAPER RASH PRODUCTS		
<i>diaper rash products - ointment</i>	Tier 1	OTC
ECZEMA AGENTS		
<i>ADBRY INJ 150MG/ML</i>	Tier 2	PA, QL (4 syringes every 28 days)

Drug Name	Drug Tier	Requirements/Limits
ADBRY INJ 300/2ML	Tier 2	PA, QL (2 pens every 28 days)
CIBINQO TAB 50MG	Tier 2	PA, QL (1 tab every 1 day)
CIBINQO TAB 100MG	Tier 2	PA, QL (1 tab every 1 day)
CIBINQO TAB 200MG	Tier 2	PA, QL (1 tab every 1 day)
DUPIXENT INJ 200/1.14	Tier 2	PA, QL (2 syringes every 28 days)
DUPIXENT INJ 200MG	Tier 2	PA, QL (2 syringes every 28 days)
DUPIXENT INJ 300/2ML	Tier 2	PA, QL (2 pens every 28 days)
DUPIXENT INJ 300/2ML	Tier 2	PA, QL (2 syringes every 28 days)
EBGLYSS INJ 250/2ML	Tier 2	PA, QL (1 pen every 28 days)
EBGLYSS INJ 250/2ML	Tier 2	PA, QL (1 syringe every 28 days)
OPZELURA CRE 1.5%	Tier 2	PA, QL (60 gm every 30 days)

EMOLLIENTS

AQUA GLYCOL LOT HND/BDY	Tier 2	OTC
AQUA LACTEN LOT	Tier 2	OTC
AQUAMED LOT	Tier 2	OTC
CAM LOT	Tier 2	OTC
CERAVE DAILY LOT MOIST	Tier 2	OTC
CETAPHIL ADV LOT RELIEF	Tier 2	OTC
CETAPHIL DAY LOT ADVANCE	Tier 2	OTC
CETAPHIL FAC LOT SPF 15	Tier 2	OTC
CETAPHIL LOT MOISTURE	Tier 2	OTC
CETAPHIL LOT RESTORAD	Tier 2	OTC
<i>colloidal oatmeal packet</i>	Tier 1	OTC
CORN HUSKERS LOT	Tier 2	OTC
<i>emollient - lotion</i>	Tier 1	OTC
<i>emollient - ointment</i>	Tier 1	OTC
EUCERIN INT LOT REPAIR	Tier 2	OTC
EUCERIN LOT BABY	Tier 2	OTC
EUCERIN ORG LOT HEALING	Tier 2	OTC
EUCERIN ORIG LOT HEALING	Tier 2	OTC
EUCERIN PRO LOT REPAIR	Tier 2	OTC
LAC-HYDRIN LOT FIVE	Tier 2	OTC
<i>lactic acid (ammonium lactate) cream 12%</i>	Tier 1	
<i>lactic acid (ammonium lactate) cream 12%</i>	Tier 1	OTC
<i>lactic acid (ammonium lactate) lotion 12%</i>	Tier 1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
LUBRIDERM LOT ADVANCED	Tier 2	OTC
LUBRIDERM LOT FRG/FREE	Tier 2	OTC
LUBRISOFT LOT UNSCENTE	Tier 2	OTC
NUTRADERM LOT	Tier 2	OTC
NUTRADERM LOT ADVANCED	Tier 2	OTC
VANICREAM LOT	Tier 2	OTC
<i>vitamins a & d oint</i>	Tier 1	OTC
WIBI LOT	Tier 2	OTC
GLABELLAR LINES (FROWN LINES) AGENTS		
DAXXIFY INJ 100U	Tier 2	PA, QL (1 fill every 140 days); For cervical dystonia only
IMMUNOMODULATING AGENTS - SYSTEMIC		
NEMLUVIO INJ 30MG	Tier 2	PA, QL (1 pen every 56 days)
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod cream 5%</i>	Tier 1	QL (Max 60 Day Supply)
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus cream 1% (generic of ELIDEL)</i>	Tier 1	QL (120 gm every 30 days; 30 gm per fill)
<i>tacrolimus oint 0.1%</i>	Tier 1	QL (120 gm every 30 days; 30 gm per fill), AGE (Min 16)
<i>tacrolimus oint 0.03%</i>	Tier 1	QL (120 gm every 30 days; 30 gm per fill)
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS		
<i>podofilox soln 0.5%</i>	Tier 1	
<i>salicylic acid gel 17%</i>	Tier 1	OTC
<i>salicylic acid liquid 17%</i>	Tier 1	OTC
LINIMENTS		
<i>camphor-menthol-methyl salicylate cream 4-10-30%</i>	Tier 1	OTC
<i>menthol-methyl salicylate cream</i>	Tier 1	OTC
<i>trolamine salicylate cream 10%</i>	Tier 1	OTC
LOCAL ANESTHETICS - TOPICAL		
<i>capsaicin cream 0.1%</i>	Tier 1	OTC
<i>capsaicin cream 0.025%</i>	Tier 1	OTC
<i>capsaicin cream 0.075%</i>	Tier 1	OTC
<i>lidocaine hcl gel 2%</i>	Tier 1	OTC
<i>lidocaine hcl soln 4%</i>	Tier 1	
<i>lidocaine hcl urethral/mucosal gel 2%</i>	Tier 1	
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine oint 5%</i>	Tier 1	QL (38 gm every 30 days)
<i>lidocaine patch 4%</i>	Tier 1	QL (2 patches every 1 day), OTC
<i>lidocaine patch 5% (generic of LIDODERM)</i>	Tier 1	QL (2 patches every 1 day)
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	Tier 1	
<i>pramoxine hcl lotion 1%</i>	Tier 1	OTC

MISC. TOPICAL

ACUWASH LIQ	Tier 2	OTC
AG SHAMPOO & LIQ BODY CL	Tier 2	OTC
AG TONER LIQ	Tier 2	OTC
AQUA GLYCOL LIQ FACIAL	Tier 2	OTC
CALAMINE LOT 8-8%	Tier 2	OTC
CETAPHIL LIQ CLEANSER	Tier 2	OTC
CETAPHIL LIQ FOAM WSH	Tier 2	OTC
CETAPHIL LIQ OIL SKIN	Tier 2	OTC
CETAPHIL LIQ RESTORAD	Tier 2	OTC
<i>dimethicone cream 5%</i>	Tier 1	OTC
DRYSOL SOL 20%	Tier 2	
GNP CALAMINE LOT 8-8%	Tier 2	OTC
<i>lanolin cream</i>	Tier 1	OTC
PURPOSE GENT LIQ WASH	Tier 2	OTC
QC CALAMINE LOT 8-8%	Tier 2	OTC
REHYLA HAIR MIS BODY	Tier 2	OTC
REHYLA WASH LIQ	Tier 2	OTC
RISAMINE OIN	Tier 2	OTC
<i>skin protectants misc - cream</i>	Tier 1	OTC
<i>witch hazel (hamamelis virginiana) cleansing pads</i>	Tier 1	OTC
<i>zinc oxide oint 20%</i>	Tier 1	OTC

PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL

EUCRISA OIN 2%	Tier 2	ST, PA, QL (60 gm every 30 days)
ZORYVE CRE 0.3%	Tier 2	PA, QL (60 gm every 30 days)
ZORYVE CRE 0.15%	Tier 2	PA, QL (60 gm every 30 days)
ZORYVE MIS 0.3%	Tier 2	PA, QL (60 gm every 30 days)

ROSACEA AGENTS

<i>azelaic acid gel 15% (generic of FINACEA)</i>	Tier 1	QL (50 gm every 30 days)
<i>metronidazole cream 0.75% (generic of METROCREAM)</i>	Tier 1	
<i>metronidazole gel 0.75%</i>	Tier 1	ST, PA

Drug Name	Drug Tier	Requirements/Limits
SCABICIDES & PEDICULICIDES		
<i>ivermectin lotion 0.5%</i>	Tier 1	OTC; Age Restriction
<i>malathion lotion 0.5%</i>	Tier 1	Age Restriction
<i>permethrin cream 5% (generic of ELIMITE)</i>	Tier 1	
<i>permethrin creme rinse 1%</i>	Tier 1	OTC
<i>pyreth-piperonyl butox sham-permeth aero-nit remover gel kit</i>	Tier 1	OTC
<i>pyrethrins-piperonyl butoxide shampoo 0.33-4%</i>	Tier 1	OTC
<i>spinosad susp 0.9%</i>	Tier 1	Age Restriction
WOUND CARE PRODUCTS		
<i>FILSUVEZ GEL 10%</i>	Tier 2	PA, QL (1 tube every 1 day)
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC DRUGS		
<i>GLUCAGON INJ 1MG</i>	Tier 2	
DIAGNOSTIC TESTS		
<i>ACCU-CHEK TES AVIVA PL</i>	Tier 2	QL (50 test strips every 50 days), OTC
<i>ACCU-CHEK TES GUIDE</i>	Tier 2	QL (50 test strips every 50 days), OTC
<i>ACCU-CHEK TES SMART</i>	Tier 2	QL (50 test strips every 50 days), OTC
<i>BINAXNOW COV KIT HOME TES</i>	Tier 2	QL (6 kits every month), OTC
<i>CHEMSTRIP K TES</i>	Tier 2	QL (100 strips every 30 days), OTC
<i>CHEMSTRIP TES UGK</i>	Tier 2	QL (100 strips every 30 days), OTC
<i>CVS KETONE TES CARE</i>	Tier 2	QL (100 strips every 30 days), OTC
<i>FLOWFLEX KIT TEST</i>	Tier 2	QL (6 kits every month), OTC
<i>IHEALTH 2-PK KIT COVID-19</i>	Tier 2	QL (6 kits every month), OTC
<i>INTELISWAB KIT COVID-19</i>	Tier 2	QL (6 kits every month), OTC
<i>KETO-DIASTIX TES</i>	Tier 2	QL (100 strips every 30 days), OTC
<i>KETONE TES</i>	Tier 2	QL (100 strips every 30 days), OTC
<i>KETONE TEST TES</i>	Tier 2	QL (100 strips every 30 days), OTC
<i>KETOSTIX TES STRIP</i>	Tier 2	QL (100 strips every 30 days), OTC

Drug Name	Drug Tier	Requirements/Limits
QUICKVUE HOM KIT COVID-19	Tier 2	QL (6 kits every month), OTC
RELION TES KETONE	Tier 2	QL (100 strips every 30 days), OTC

DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS

NUTRITIONAL SUPPLEMENTS

ENSURE CLEAR LIQ MIX FRUT	Tier 2	QL (711 mL every 1 day), OTC
ENSURE HP LIQ VANILLA	Tier 2	QL (711 mL every 1 day), OTC
ENSURE LIQ BUT PECN	Tier 2	QL (711 mL every 1 day), OTC
ENSURE LIQ CHOCOLAT	Tier 2	QL (711 mL every 1 day), OTC
ENSURE LIQ COFF LAT	Tier 2	QL (711 mL every 1 day), OTC
ENSURE LIQ DK CHOC	Tier 2	QL (711 mL every 1 day), OTC
ENSURE LIQ STRWBERY	Tier 2	QL (711 mL every 1 day), OTC
ENSURE LIQ VANILLA	Tier 2	QL (711 mL every 1 day), OTC
ENSURE NUTRI LIQ CHOCOLAT	Tier 2	QL (711 mL every 1 day), OTC
ENSURE ORIGN LIQ CHOCOLAT	Tier 2	QL (711 mL every 1 day), OTC
ENSURE ORIGN LIQ STRAWBER	Tier 2	QL (711 mL every 1 day), OTC
ENSURE ORIGN LIQ VANILLA	Tier 2	QL (711 mL every 1 day), OTC
ENSURE PLUS LIQ CHOCOLAT	Tier 2	QL (711 mL every 1 day), OTC
ENSURE PLUS LIQ DRK CHOC	Tier 2	QL (711 mL every 1 day), OTC
ENSURE PLUS LIQ STRAWBER	Tier 2	QL (711 mL every 1 day), OTC
ENSURE PLUS LIQ VANILLA	Tier 2	QL (711 mL every 1 day), OTC
PEDIASUR G&G LIQ BANANA	Tier 2	QL (711 mL every 1 day), OTC
PEDIASUR G&G LIQ CHOCOLAT	Tier 2	QL (711 mL every 1 day), OTC
PEDIASUR G&G LIQ STRAWBER	Tier 2	QL (711 mL every 1 day), OTC

Drug Name	Drug Tier	Requirements/Limits
PEDIASUR G&G LIQ VANILLA	Tier 2	QL (711 mL every 1 day), OTC
PEDIASUR G&G LIQ W/FIBER	Tier 2	QL (711 mL every 1 day), OTC
PEDIASURE LIQ STRWBERY	Tier 2	QL (711 mL every 1 day), OTC
PEDIASURE LIQ VANILLA	Tier 2	QL (711 mL every 1 day), OTC
PEDIASURE LIQ W/FIBER	Tier 2	QL (711 mL every 1 day), OTC

DIGESTIVE AIDS

DIGESTIVE ENZYMES

CREON CAP 3000UNIT	Tier 2
CREON CAP 6000UNIT	Tier 2
CREON CAP 12000UNT	Tier 2
CREON CAP 24000UNT	Tier 2
CREON CAP 36000UNT	Tier 2
<i>lactase tab 3000 unit</i>	Tier 1 OTC
ZENPEP CAP 3000UNIT	Tier 2
ZENPEP CAP 15000UNT	Tier 2

DIURETICS

CARBONIC ANHYDRASE INHIBITORS

acetazolamide cap er 12hr 500 mg	Tier 1
acetazolamide tab 125 mg	Tier 1
acetazolamide tab 250 mg	Tier 1
dichlorphenamide tab 50 mg (generic of KEVEYIS)	Tier 1 PA, QL (4 tabs every 1 day)

DIURETIC COMBINATIONS

amiloride & hydrochlorothiazide tab 5-50 mg	Tier 1
spironolactone & hydrochlorothiazide tab 25-25 mg	Tier 1
triamterene & hydrochlorothiazide cap 37.5-25 mg	Tier 1
triamterene & hydrochlorothiazide tab 37.5-25 mg	Tier 1
triamterene & hydrochlorothiazide tab 75-50 mg	Tier 1

LOOP DIURETICS

bumetanide tab 0.5 mg (generic of BUMEX)	Tier 1
bumetanide tab 1 mg	Tier 1
bumetanide tab 2 mg	Tier 1
furosemide oral soln 10 mg/ml	Tier 1
furosemide tab 20 mg (generic of LASIX)	Tier 1 Available for 90 day fill

Drug Name	Drug Tier	Requirements/Limits
furosemide tab 40 mg (generic of LASIX)	Tier 1	
furosemide tab 80 mg (generic of LASIX)	Tier 1	
torsemide tab 5 mg	Tier 1	
torsemide tab 10 mg	Tier 1	
torsemide tab 20 mg	Tier 1	
torsemide tab 100 mg	Tier 1	

POTASSIUM SPARING DIURETICS

amiloride hcl tab 5 mg	Tier 1	
spironolactone tab 25 mg (generic of ALDACTONE)	Tier 1	
spironolactone tab 50 mg (generic of ALDACTONE)	Tier 1	
spironolactone tab 100 mg (generic of ALDACTONE)	Tier 1	

THIAZIDES AND THIAZIDE-LIKE DIURETICS

chlorthalidone tab 25 mg	Tier 1	Available for 90 day fill
chlorthalidone tab 50 mg	Tier 1	Available for 90 day fill
hydrochlorothiazide cap 12.5 mg	Tier 1	
hydrochlorothiazide tab 12.5 mg	Tier 1	
hydrochlorothiazide tab 25 mg	Tier 1	Available for 90 day fill
hydrochlorothiazide tab 50 mg	Tier 1	Available for 90 day fill
indapamide tab 1.25 mg	Tier 1	
indapamide tab 2.5 mg	Tier 1	
metolazone tab 2.5 mg	Tier 1	
metolazone tab 5 mg	Tier 1	
metolazone tab 10 mg	Tier 1	

ENDOCRINE AND METABOLIC AGENTS - MISC.

ADRENAL STEROID INHIBITORS

ISTURISA TAB 1MG	Tier 2	PA, QL (8 tabs every 1 day)
ISTURISA TAB 5MG	Tier 2	PA, QL (2 tabs every 1 day)
RECORLEV TAB 150MG	Tier 2	PA, QL (8 tabs every 1 day)

BONE DENSITY REGULATORS

alendronate sodium tab 10 mg	Tier 1	
alendronate sodium tab 35 mg	Tier 1	
alendronate sodium tab 70 mg (generic of FOSAMAX)	Tier 1	
ibandronate sodium tab 150 mg (base equivalent)	Tier 1	
PROLIA INJ 60MG/ML	Tier 2	PA, QL (1 syringe every 180 days)
TERIPARATIDE INJ 620/2.48	Tier 2	PA, QL (1 pen every 28 days)
XGEVA INJ	Tier 2	PA

Drug Name	Drug Tier	Requirements/Limits
CORTICOTROPIN		
ACTHAR INJ 80UNIT	Tier 2	PA
ACTHAR INJ GEL	Tier 2	PA
CORTROPHIN INJ 80UNT/ML	Tier 2	PA
GNRH/LHRH ANTAGONISTS		
ORILISSA TAB 150MG	Tier 2	PA, QL (1 tab every 1 day)
ORILISSA TAB 200MG	Tier 2	PA, QL (2 tabs every 1 day)
GROWTH HORMONES		
NORDITROPIN INJ 5/1.5ML	Tier 2	PA
NORDITROPIN INJ 10/1.5ML	Tier 2	PA
NORDITROPIN INJ 15/1.5ML	Tier 2	PA
NORDITROPIN INJ 30/3ML	Tier 2	PA
NUTROPIN AQ INJ 10MG/2ML	Tier 2	PA
NUTROPIN AQ INJ 20MG/2ML	Tier 2	PA
NUTROPIN AQ INJ NUSPIN 5	Tier 2	PA
SEROSTIM INJ 4MG	Tier 2	PA
SEROSTIM INJ 5MG	Tier 2	PA
SEROSTIM INJ 6MG	Tier 2	PA
SKYTROFA INJ 3.6MG	Tier 2	PA
SKYTROFA INJ 3MG	Tier 2	PA
SKYTROFA INJ 4.3MG	Tier 2	PA
SKYTROFA INJ 5.2MG	Tier 2	PA
SKYTROFA INJ 6.3MG	Tier 2	PA
SKYTROFA INJ 7.6MG	Tier 2	PA
SKYTROFA INJ 9.1MG	Tier 2	PA
SKYTROFA INJ 11MG	Tier 2	PA
SKYTROFA INJ 13.3MG	Tier 2	PA
SOGROYA INJ 5MG/1.5	Tier 2	PA
SOGROYA INJ 10MG/1.5	Tier 2	PA
SOGROYA INJ 15MG/1.5	Tier 2	PA
HORMONE RECEPTOR MODULATORS		
OSPHENA TAB 60MG	Tier 2	ST, PA
raloxifene hcl tab 60 mg (generic of EVISTA)	Tier 1	
INSULIN-LIKE GROWTH FACTOR RECEPTOR INHIBITORS		
TEPEZZA INJ 500MG	Tier 2	PA, QL (5 vials every 21 days)
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPR DEP-PED INJ 3M 11.25MG	Tier 2	
LUPR DEP-PED INJ 3M 30MG	Tier 2	
LUPR DEP-PED INJ 7.5MG	Tier 2	
LUPR DEP-PED INJ 11.25MG	Tier 2	
LUPR DEP-PED INJ 15MG	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
METABOLIC MODIFIERS		
<i>calcitriol cap 0.5 mcg (generic of ROCALTROL)</i>	Tier 1	
<i>calcitriol cap 0.25 mcg (generic of ROCALTROL)</i>	Tier 1	
<i>calcitriol oral soln 1 mcg/ml (generic of ROCALTROL)</i>	Tier 1	
<i>carglumic acid soluble tab 200 mg (generic of CARBAGLU)</i>	Tier 1	PA, QL (150 tabs every 1 day)
<i>cinacalcet hcl tab 30 mg (base equiv) (generic of SENSIPIAR)</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>cinacalcet hcl tab 60 mg (base equiv) (generic of SENSIPIAR)</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>cinacalcet hcl tab 90 mg (base equiv) (generic of SENSIPIAR)</i>	Tier 1	PA, QL (4 tabs every 1 day)
CRYSVITA INJ 10MG/ML	Tier 2	PA, QL (2 vials every 28 days)
CRYSVITA INJ 20MG/ML	Tier 2	PA, QL (18 vials every 28 days)
CRYSVITA INJ 30MG/ML	Tier 2	PA, QL (12 vials every 28 days)
GALAFOLD CAP 123MG	Tier 2	PA, QL (14 caps every 28 days)
KANUMA INJ 20/10ML	Tier 2	PA
<i>levocarnitine oral soln 1 gm/10ml (10%) (generic of CARNITOR)</i>	Tier 1	
<i>levocarnitine tab 330 mg (generic of CARNITOR)</i>	Tier 1	
LUMIZYME INJ 50MG	Tier 2	PA
MYALEPT INJ 11.3MG	Tier 2	PA, QL (1 vial every 1 day)
NEXVIAZYME INJ 100MG	Tier 2	PA
<i>nitisinone cap 2 mg (generic of ORFADIN)</i>	Tier 1	PA
<i>nitisinone cap 5 mg (generic of ORFADIN)</i>	Tier 1	PA
<i>nitisinone cap 10 mg (generic of ORFADIN)</i>	Tier 1	PA
<i>nitisinone cap 20 mg (generic of ORFADIN)</i>	Tier 1	PA
NITYR TAB 2MG	Tier 2	PA
NITYR TAB 5MG	Tier 2	PA
NITYR TAB 10MG	Tier 2	PA
OLPRUVA PAK 2GM	Tier 2	PA, QL (1 kit every 30 days)
OLPRUVA PAK 3GM	Tier 2	PA, QL (1 kit every 30 days)
OLPRUVA PAK 4 GM	Tier 2	PA, QL (1 kit every 30 days)
OLPRUVA PAK 5GM	Tier 2	PA, QL (1 kit every 30 days)
OLPRUVA PAK 6.67GM	Tier 2	PA, QL (1 kit every 30 days)
OLPRUVA PAK 6GM	Tier 2	PA, QL (1 kit every 30 days)

Drug Name	Drug Tier	Requirements/Limits
OPFOLDA CAP 65MG	Tier 2	PA, QL (9 caps every 1 day)
ORFADIN SUS 4MG/ML	Tier 2	PA
PALYNZIQ INJ 2.5/0.5	Tier 2	PA, QL (8 syringes every 28 days)
PALYNZIQ INJ 10/0.5ML	Tier 2	PA, QL (1 syringe every 1 day)
PALYNZIQ INJ 20MG/ML	Tier 2	PA, QL (2 syringes every 1 day)
PHEBURANE MIS 483/GM	Tier 2	PA, QL (8 bottles every 30 days)
RAVICTI LIQ 1.1GM/ML	Tier 2	PA, QL (525 mL every 30 days)
<i>sapropterin dihydrochloride powder packet 100 mg (generic of KUVAN)</i>	Tier 1	PA, QL (20 packets every 1 day)
<i>sapropterin dihydrochloride powder packet 500 mg (generic of KUVAN)</i>	Tier 1	PA, QL (4 packets every 1 day)
<i>sapropterin dihydrochloride tab 100 mg (generic of KUVAN)</i>	Tier 1	PA, QL (20 tabs every 1 day)
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful (generic of BUPHENYL)</i>	Tier 1	PA, QL (798 gm every 30 days)
<i>sodium phenylbutyrate tab 500 mg (generic of BUPHENYL)</i>	Tier 1	PA, QL (40 tabs every 1 day)
STRENSIQ INJ 18/0.45	Tier 2	PA
STRENSIQ INJ 28/0.7ML	Tier 2	PA
STRENSIQ INJ 40MG/ML	Tier 2	PA
STRENSIQ INJ 80/0.8ML	Tier 2	PA
XPHOZAH TAB 20MG	Tier 2	PA, QL (2 tabs every 1 day)
XPHOZAH TAB 30MG	Tier 2	PA, QL (2 tabs every 1 day)
YORVIPATH INJ 168/0.56	Tier 2	PA, QL (2 pens every 28 days)
YORVIPATH INJ 294/0.98	Tier 2	PA, QL (2 pens every 28 days)
YORVIPATH INJ 420/1.4	Tier 2	PA, QL (2 pens every 28 days)

MINERALOCORTICOID RECEPTOR ANTAGONISTS

KERENDIA TAB 10MG	Tier 2	PA, QL (1 tab every 1 day)
KERENDIA TAB 20MG	Tier 2	PA, QL (1 tab every 1 day)

NATRIURETIC PEPTIDES

VOXZOGO INJ 0.4MG	Tier 2	PA, QL (1 vial every 1 day)
VOXZOGO INJ 0.56MG	Tier 2	PA, QL (1 vial every 1 day)
VOXZOGO INJ 1.2MG	Tier 2	PA, QL (1 vial every 1 day)

POSTERIOR PITUITARY HORMONES

<i>desmopressin acetate nasal spray soln 0.01%</i>	Tier 1
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Drug Name	Drug Tier	Requirements/Limits
<i>desmopressin acetate tab 0.1 mg (generic of DDAVP)</i>	Tier 1	
<i>desmopressin acetate tab 0.2 mg (generic of DDAVP)</i>	Tier 1	
PROGESTERONE RECEPTOR ANTAGONISTS		
<i>mifepristone tab 200 mg (generic of MIFEPREX)</i>	Tier 1	
PROLACTIN INHIBITORS		
<i>cabergoline tab 0.5 mg</i>	Tier 1	
SOMATOSTATIC AGENTS		
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml) (generic of SANDOSTATIN)</i>	Tier 1	PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml) (generic of SANDOSTATIN)</i>	Tier 1	PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	Tier 1	PA, QL (7.5 mL every 1 day)
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml) (generic of SANDOSTATIN)</i>	Tier 1	PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	Tier 1	PA, QL (1.5 mL every 1 day)
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	Tier 1	PA, QL (3 syringes every 1 day)
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	Tier 1	PA, QL (3 syringes every 1 day)
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	Tier 1	PA, QL (3 syringes every 1 day)
VASOPRESSIN RECEPTOR ANTAGONISTS		
<i>tolvaptan tab therapy pack 15 mg (generic of JYNARQUE)</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>tolvaptan tab therapy pack 30 & 15 mg</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>tolvaptan tab therapy pack 45 & 15 mg</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>tolvaptan tab therapy pack 60 & 30 mg</i>	Tier 1	PA, QL (2 tabs every 1 day)
<i>tolvaptan tab therapy pack 90 & 30 mg</i>	Tier 1	PA, QL (2 tabs every 1 day)
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>estradiol & norethindrone acetate tab 1-0.5 mg (generic of ACTIVELLA)</i>	Tier 1	
<i>MYFEMBREE TAB</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>ORIAHNN CAP</i>	Tier 2	PA, QL (2 caps every 1 day)
<i>PREMPHASE TAB</i>	Tier 2	
<i>PREMPRO TAB</i>	Tier 2	
<i>PREMPRO TAB 0.3-1.5</i>	Tier 2	
<i>PREMPRO TAB 0.45-1.5</i>	Tier 2	
<i>PREMPRO TAB 0.625-5</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
ESTROGENS		
<i>estradiol tab 0.5 mg (generic of ESTRACE)</i>	Tier 1	
<i>estradiol tab 1 mg (generic of ESTRACE)</i>	Tier 1	
<i>estradiol tab 2 mg (generic of ESTRACE)</i>	Tier 1	
<i>estradiol td patch weekly 0.1 mg/24hr (generic of CLIMARA)</i>	Tier 1	
<i>estradiol td patch weekly 0.05 mg/24hr (generic of CLIMARA)</i>	Tier 1	
<i>estradiol td patch weekly 0.06 mg/24hr (generic of CLIMARA)</i>	Tier 1	
<i>estradiol td patch weekly 0.025 mg/24hr (generic of CLIMARA)</i>	Tier 1	
<i>estradiol td patch weekly 0.075 mg/24hr (generic of CLIMARA)</i>	Tier 1	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr) (generic of CLIMARA)</i>	Tier 1	
PREMARIN TAB 0.3MG	Tier 2	
PREMARIN TAB 0.9MG	Tier 2	
PREMARIN TAB 0.45MG	Tier 2	
PREMARIN TAB 0.625MG	Tier 2	
PREMARIN TAB 1.25MG	Tier 2	
FLUOROQUINOLONES		
FLUOROQUINOLONES		
<i>ciprofloxacin hcl tab 250 mg (base equiv) (generic of CIPRO)</i>	Tier 1	
<i>ciprofloxacin hcl tab 500 mg (base equiv) (generic of CIPRO)</i>	Tier 1	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	Tier 1	
<i>levofloxacin oral soln 25 mg/ml</i>	Tier 1	
<i>levofloxacin tab 250 mg</i>	Tier 1	
<i>levofloxacin tab 500 mg</i>	Tier 1	
<i>levofloxacin tab 750 mg</i>	Tier 1	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	Tier 1	
GASTROINTESTINAL AGENTS - MISC.		
5-HT4 RECEPTOR AGONISTS		
<i>prucalopride succinate tab 1 mg (base equivalent) (generic of MOTEGRITY)</i>	Tier 1	PA, QL (1 tab every 1 day)
<i>prucalopride succinate tab 2 mg (base equivalent) (generic of MOTEGRITY)</i>	Tier 1	PA, QL (1 tab every 1 day)
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE TAB 3MG	Tier 2	PA, QL (1 tab every 1 day)
ANTIFLATULENTS		
<i>simethicone chew tab 80 mg</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>simethicone susp 40 mg/0.6ml</i>	Tier 1	OTC
BILE ACID SYNTHESIS DISORDER AGENTS		
CHOLBAM CAP 50MG	Tier 2	PA
CHOLBAM CAP 250MG	Tier 2	PA
GALLSTONE SOLUBILIZING AGENTS		
<i>chenodiol tab 250 mg</i>	Tier 1	PA
CTEXLI TAB 250MG	Tier 2	PA
<i>ursodiol cap 300 mg</i>	Tier 1	
<i>ursodiol tab 250 mg</i>	Tier 1	
<i>ursodiol tab 500 mg (generic of URSO FORTE)</i>	Tier 1	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone cap 8 mcg (generic of AMITIZA)</i>	Tier 1	PA, QL (2 caps every 1 day)
<i>lubiprostone cap 24 mcg (generic of AMITIZA)</i>	Tier 1	PA, QL (2 caps every 1 day)
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	Tier 1	
<i>metoclopramide hcl tab 5 mg (base equivalent) (generic of REGLAN)</i>	Tier 1	
<i>metoclopramide hcl tab 10 mg (base equivalent) (generic of REGLAN)</i>	Tier 1	
HEPATOTROPICS		
REZDIFFRA TAB 60MG	Tier 2	PA, QL (1 tab every 1 day)
REZDIFFRA TAB 80MG	Tier 2	PA, QL (1 tab every 1 day)
REZDIFFRA TAB 100MG	Tier 2	PA, QL (1 tab every 1 day)
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
BYLVAY CAP 200MCG	Tier 2	PA, QL (12 caps every 1 day)
BYLVAY CAP 400MCG	Tier 2	PA, QL (18 caps every 1 day)
BYLVAY CAP 600MCG	Tier 2	PA, QL (4 caps every 1 day)
BYLVAY CAP 1200MCG	Tier 2	PA, QL (6 caps every 1 day)
LIVMARLI SOL 9.5MG/ML	Tier 2	PA, QL (3 mL every 1 day)
LIVMARLI SOL 19MG/ML	Tier 2	PA, QL (2 mL every 1 day)
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium cap 750 mg (generic of COLAZAL)</i>	Tier 1	
ENTYVIO INJ 300MG	Tier 2	PA, QL (1 vial every 56 days)
ENTYVIO PEN INJ 108/0.68	Tier 2	PA, QL (2 pens every 28 days)
<i>mesalamine cap er 24hr 0.375 gm (generic of APRISO)</i>	Tier 1	
<i>mesalamine enema 4 gm</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
OMVOH INJ 100MG/ML	Tier 2	PA, QL (2 pens every 28 days)
OMVOH INJ 100MG/ML	Tier 2	PA, QL (2 syringes every 28 days)
PENTASA CAP 250MG CR	Tier 2	
PENTASA CAP 500MG CR	Tier 2	
SKYRIZI INJ 180/1.2	Tier 2	PA, QL (1.2 mL every 56 days)
SKYRIZI INJ 360/2.4	Tier 2	PA, QL (1 syringe every 56 days)
sulfasalazine tab 500 mg (generic of AZULFIDINE)	Tier 1	
sulfasalazine tab delayed release 500 mg (generic of AZULFIDINE EN-TABS)	Tier 1	
TREMFYA CROH INJ 200/2ML	Tier 2	PA, QL (1 pen every 28 days)
TREMFYA INJ 200/2ML	Tier 2	PA, QL (1 pen every 28 days)
TREMFYA INJ 200/2ML	Tier 2	PA, QL (1 syringe every 28 days)
VELSIPITY TAB 2MG	Tier 2	PA, QL (1 tab every 1 day)
ZYMFENTRA INJ 120MG/ML	Tier 2	PA, QL (1 box of 2 pens every 28 days)
ZYMFENTRA INJ 120MG/ML	Tier 2	PA, QL (1 box of 2 syringes every 28 days)
ZYMFENTRA INJ 120MG/ML	Tier 2	PA, QL (2 pens every 28 days)

INTESTINAL ACIDIFIERS

lactulose (encephalopathy) solution 10 gm/15ml	Tier 1
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IRRITABLE BOWEL SYNDROME (IBS) AGENTS

IBSRELA TAB 50MG	Tier 2	PA, QL (2 tabs every 1 day)
LINZESS CAP 72MCG	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts
LINZESS CAP 145MCG	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts
LINZESS CAP 290MCG	Tier 2	ST, PA, QL (1 cap every 1 day); PA for new starts

LIVE FECAL MICROBIOTA

VOWST CAP	Tier 2	PA, QL (12 caps every 30 days)
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PERIPHERAL OPIOID RECEPTOR ANTAGONISTS

MOVANTIK TAB 12.5MG	Tier 2	PA, QL (1 tab every 1 day)
MOVANTIK TAB 25MG	Tier 2	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
RELISTOR INJ 8/0.4ML	Tier 2	PA, QL (1 syringe every 1 day)
RELISTOR INJ 12/0.6ML	Tier 2	PA, QL (1 injection every 1 day)
RELISTOR INJ 12/0.6ML	Tier 2	PA, QL (1 syringe every 1 day)
RELISTOR TAB 150MG	Tier 2	PA, QL (3 tabs every 1 day)
SYMPROIC TAB 0.2MG	Tier 2	PA, QL (1 tab every 1 day)

PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR(PPAR) AGONISTS

IQIRVO TAB 80MG	Tier 2	PA, QL (1 tab every 1 day)
LIVDELZI CAP 10MG	Tier 2	PA, QL (1 cap every 1 day)

PHOSPHATE BINDER AGENTS

calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	Tier 1	
calcium acetate (phosphate binder) tab 667 mg	Tier 1	
calcium acetate (phosphate binder) tab 667 mg	Tier 1	OTC
ferric citrate tab 1 gm (210 mg ferric iron)	Tier 1	PA, QL (12 tabs every 1 day)
lanthanum carbonate chew tab 500 mg (elemental) (generic of FOSRENOL)	Tier 1	ST, PA
lanthanum carbonate chew tab 750 mg (elemental) (generic of FOSRENOL)	Tier 1	ST, PA
lanthanum carbonate chew tab 1000 mg (elemental) (generic of FOSRENOL)	Tier 1	ST, PA
sevelamer carbonate packet 0.8 gm (generic of RENVELA)	Tier 1	ST, PA
sevelamer carbonate packet 2.4 gm (generic of RENVELA)	Tier 1	ST, PA
sevelamer carbonate tab 800 mg (generic of RENVELA)	Tier 1	
VELPHORO CHW 500MG	Tier 2	PA, QL (6 tabs every 1 day)

SHORT BOWEL SYNDROME (SBS) AGENTS

GATTEX KIT 5MG	Tier 2	PA, QL (1 kit every 30 days)
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TRYPTOPHAN HYDROXYLASE INHIBITORS

XERMELO TAB 250MG	Tier 2	PA, QL (3 tabs every 1 day)
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GENITOURINARY AGENTS - MISCELLANEOUS

ALKALINIZERS

potassium citrate & citric acid soln 1100-334 mg/5ml	Tier 1	
potassium citrate tab er 5 meq (540 mg)	Tier 1	
potassium citrate tab er 10 meq (1080 mg) (generic of UROCIT-K 10)	Tier 1	
sodium citrate & citric acid soln 500-334 mg/5ml	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
sodium citrate & citric acid soln 500-334 mg/5ml	Tier 1	OTC
CYSTINOSIS AGENTS		
CYSTAGON CAP 50MG	Tier 2	PA
CYSTAGON CAP 150MG	Tier 2	PA
HYPEROXALURIA AGENTS		
RIVFLOZA INJ 80/0.5ML	Tier 2	PA, QL (2 vials every 30 days)
RIVFLOZA INJ 128/0.8	Tier 2	PA, QL (1 syringe every 30 days)
RIVFLOZA INJ 160MG/ML	Tier 2	PA, QL (1 syringe every 30 days)
IGA NEPHROPATHY (IGAN) AGENTS		
FILSPARI TAB 200MG	Tier 2	PA, QL (1 tab every 1 day)
FILSPARI TAB 400MG	Tier 2	PA, QL (1 tab every 1 day)
PROSTATIC HYPERPLASIA AGENTS		
alfuzosin hcl tab er 24hr 10 mg (generic of UROXATRAL)	Tier 1	
dutasteride cap 0.5 mg (generic of AVODART)	Tier 1	
finasteride tab 5 mg (generic of PROSCAR)	Tier 1	
tamsulosin hcl cap 0.4 mg	Tier 1	
URINARY STONE AGENTS		
tiopronin tab delayed release 100 mg (generic of THIOLA EC)	Tier 1	PA
tiopronin tab delayed release 300 mg (generic of THIOLA EC)	Tier 1	PA
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
colchicine w/ probenecid tab 0.5-500 mg	Tier 1	
GOUT AGENTS		
allopurinol tab 100 mg	Tier 1	
allopurinol tab 300 mg	Tier 1	
colchicine tab 0.6 mg	Tier 1	
URICOSURICS		
probenecid tab 500 mg	Tier 1	
HEMATOLOGICAL AGENTS - MISC.		
ANTIHEMOPHILIC PRODUCTS		
ADVATE INJ 250UNIT	Tier 2	PA
ADVATE INJ 500UNIT	Tier 2	PA
ADVATE INJ 1000UNIT	Tier 2	PA
ADVATE INJ 1500UNIT	Tier 2	PA
ADVATE INJ 2000UNIT	Tier 2	PA
ADVATE INJ 3000UNIT	Tier 2	PA

Drug Name	Drug Tier	Requirements/Limits
ADVATE INJ 4000UNIT	Tier 2	PA
ADYNOVATE INJ 250UNIT	Tier 2	PA
ADYNOVATE INJ 500UNIT	Tier 2	PA
ADYNOVATE INJ 750UNIT	Tier 2	PA
ADYNOVATE INJ 1000UNIT	Tier 2	PA
ADYNOVATE INJ 1500UNIT	Tier 2	PA
ADYNOVATE INJ 2000UNIT	Tier 2	PA
ADYNOVATE INJ 3000UNIT	Tier 2	PA
AFSTYLA KIT 250UNIT	Tier 2	PA
AFSTYLA KIT 500UNIT	Tier 2	PA
AFSTYLA KIT 1000UNIT	Tier 2	PA
AFSTYLA KIT 1500UNIT	Tier 2	PA
AFSTYLA KIT 2000UNIT	Tier 2	PA
AFSTYLA KIT 2500UNIT	Tier 2	PA
AFSTYLA KIT 3000UNIT	Tier 2	PA
ALPHANATE INJ 250 UNIT	Tier 2	PA
ALPHANATE INJ 500 UNIT	Tier 2	PA
ALPHANATE INJ 1000UNIT	Tier 2	PA
ALPHANATE INJ 1500UNIT	Tier 2	PA
ALPHANATE INJ 2000UNIT	Tier 2	PA
ALPHANINE SD INJ 500UNIT	Tier 2	PA
ALPHANINE SD INJ 1000UNIT	Tier 2	PA
ALPHANINE SD INJ 1500UNIT	Tier 2	PA
ALPROLIX INJ 250UNIT	Tier 2	PA
ALPROLIX INJ 500UNIT	Tier 2	PA
ALPROLIX INJ 1000UNIT	Tier 2	PA
ALPROLIX INJ 2000UNIT	Tier 2	PA
ALPROLIX INJ 3000UNIT	Tier 2	PA
ALPROLIX INJ 4000UNIT	Tier 2	PA
ALTUVIPIO INJ 250 UNIT	Tier 2	PA
ALTUVIPIO INJ 250UNIT	Tier 2	PA
ALTUVIPIO INJ 500UNIT	Tier 2	PA
ALTUVIPIO INJ 1000UNIT	Tier 2	PA
ALTUVIPIO INJ 2000UNIT	Tier 2	PA
ALTUVIPIO INJ 3000UNIT	Tier 2	PA
ALTUVIPIO INJ 4000UNIT	Tier 2	PA
BENEFIX INJ 250UNIT	Tier 2	PA
BENEFIX INJ 500UNIT	Tier 2	PA
BENEFIX INJ 1000UNIT	Tier 2	PA
BENEFIX INJ 2000UNIT	Tier 2	PA
BENEFIX INJ 3000UNIT	Tier 2	PA
CORIFACT KIT	Tier 2	PA
ELOCTATE INJ 250UNIT	Tier 2	PA
ELOCTATE INJ 500UNIT	Tier 2	PA

AGE - Age Limit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity
 Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ELOCTATE INJ 750UNIT	Tier 2	PA
ELOCTATE INJ 1000UNIT	Tier 2	PA
ELOCTATE INJ 1500UNIT	Tier 2	PA
ELOCTATE INJ 2000UNIT	Tier 2	PA
ELOCTATE INJ 3000UNIT	Tier 2	PA
ELOCTATE INJ 4000UNIT	Tier 2	PA
ELOCTATE INJ 5000UNIT	Tier 2	PA
ELOCTATE INJ 6000UNIT	Tier 2	PA
ESPEROCT INJ 500UNIT	Tier 2	PA
ESPEROCT INJ 1000UNIT	Tier 2	PA
ESPEROCT INJ 1500UNIT	Tier 2	PA
ESPEROCT INJ 2000UNIT	Tier 2	PA
ESPEROCT INJ 3000UNIT	Tier 2	PA
ESPEROCT INJ 4000IU	Tier 2	PA
HEMLIBRA INJ 30MG/ML	Tier 2	PA
HEMLIBRA INJ 60/0.4	Tier 2	PA
HEMLIBRA INJ 105/0.7	Tier 2	PA
HEMLIBRA INJ 150/ML	Tier 2	PA
HEMLIBRA INJ 300/2ML	Tier 2	PA
HEMLIBRA SOL 12/0.4ML	Tier 2	PA
HEMOFIL M INJ 250UNIT	Tier 2	PA
HEMOFIL M INJ 500UNIT	Tier 2	PA
HEMOFIL M INJ 1000UNIT	Tier 2	PA
HEMOFIL M INJ 1700UNIT	Tier 2	PA
HUMATE-P SOL 250-600	Tier 2	PA
HUMATE-P SOL 500-1200	Tier 2	PA
HUMATE-P SOL 2400UNIT	Tier 2	PA
HYMPAVZI INJ 150MG/ML	Tier 2	PA, QL (4 pens every 28 days)
IDELVION SOL 250UNIT	Tier 2	PA
IDELVION SOL 500UNIT	Tier 2	PA
IDELVION SOL 1000UNIT	Tier 2	PA
IDELVION SOL 2000UNIT	Tier 2	PA
IDELVION SOL 3500UNIT	Tier 2	PA
IXINITY INJ 500UNIT	Tier 2	PA
IXINITY INJ 1000UNIT	Tier 2	PA
IXINITY INJ 1500UNIT	Tier 2	PA
IXINITY INJ 3000UNIT	Tier 2	PA
JIVI INJ 500 UNIT	Tier 2	PA
JIVI INJ 1000UNIT	Tier 2	PA
JIVI INJ 2000UNIT	Tier 2	PA
JIVI INJ 3000UNIT	Tier 2	PA
JIVI INJ 4000UNIT	Tier 2	PA
KOATE INJ 250UNIT	Tier 2	PA

AGE - Age Limit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity
Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
KOATE INJ 500 UNIT	Tier 2	PA
KOATE INJ 1000UNIT	Tier 2	PA
KOATE-DVI INJ 1000UNIT	Tier 2	PA
KOGENATE FS INJ 250UNIT	Tier 2	PA
KOGENATE FS INJ 500UNIT	Tier 2	PA
KOGENATE FS INJ 1000UNIT	Tier 2	PA
KOGENATE FS INJ 2000UNIT	Tier 2	PA
KOGENATE FS INJ 3000UNIT	Tier 2	PA
KOVALTRY INJ 250UNIT	Tier 2	PA
KOVALTRY INJ 500UNIT	Tier 2	PA
KOVALTRY INJ 1000UNIT	Tier 2	PA
KOVALTRY INJ 2000UNIT	Tier 2	PA
KOVALTRY INJ 3000UNIT	Tier 2	PA
NOVOEIGHT INJ 250UNIT	Tier 2	PA
NOVOEIGHT INJ 500UNIT	Tier 2	PA
NOVOEIGHT INJ 1000UNIT	Tier 2	PA
NOVOEIGHT INJ 1500UNIT	Tier 2	PA
NOVOEIGHT INJ 2000UNIT	Tier 2	PA
NOVOEIGHT INJ 3000UNIT	Tier 2	PA
NUWIQ INJ 250UNIT	Tier 2	PA
NUWIQ INJ 500UNIT	Tier 2	PA
NUWIQ INJ 1000UNIT	Tier 2	PA
NUWIQ INJ 1500UNIT	Tier 2	PA
NUWIQ INJ 2000UNIT	Tier 2	PA
NUWIQ INJ 2500UNIT	Tier 2	PA
NUWIQ INJ 3000UNIT	Tier 2	PA
NUWIQ INJ 4000UNIT	Tier 2	PA
NUWIQ KIT 250UNIT	Tier 2	PA
NUWIQ KIT 500UNIT	Tier 2	PA
NUWIQ KIT 1000UNIT	Tier 2	PA
NUWIQ KIT 1500UNIT	Tier 2	PA
NUWIQ KIT 2000UNIT	Tier 2	PA
NUWIQ KIT 2500UNIT	Tier 2	PA
NUWIQ KIT 3000UNIT	Tier 2	PA
NUWIQ KIT 4000UNIT	Tier 2	PA
OBIZUR INJ 500 UNIT	Tier 2	PA
PROFILNINE INJ 500UNIT	Tier 2	PA
PROFILNINE INJ 1000UNIT	Tier 2	PA
PROFILNINE INJ 1500UNIT	Tier 2	PA
REBINYN INJ 3000UNIT	Tier 2	PA
REBINYN SOL 500UNIT	Tier 2	PA
REBINYN SOL 1000UNIT	Tier 2	PA
REBINYN SOL 2000UNIT	Tier 2	PA
RECOMBINATE INJ	Tier 2	PA

AGE - Age Limit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity
 Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
RECOMBINATE INJ 220-400	Tier 2	PA
RECOMBINATE INJ 401-800	Tier 2	PA
RECOMBINATE INJ 801-1240	Tier 2	PA
RIXUBIS INJ 250 UNIT	Tier 2	PA
RIXUBIS INJ 500UNIT	Tier 2	PA
RIXUBIS INJ 1000UNIT	Tier 2	PA
RIXUBIS INJ 2000UNIT	Tier 2	PA
RIXUBIS INJ 3000UNIT	Tier 2	PA
VONVENDI INJ 650UNIT	Tier 2	PA
VONVENDI INJ 1300UNIT	Tier 2	PA
WILATE INJ	Tier 2	PA
XYNTHA INJ 250UNIT	Tier 2	PA
XYNTHA INJ 500UNIT	Tier 2	PA
XYNTHA INJ 1000UNIT	Tier 2	PA
XYNTHA INJ 2000UNIT	Tier 2	PA
XYNTHA SOLOF INJ 500UNIT	Tier 2	PA
XYNTHA SOLOF INJ 1000UNIT	Tier 2	PA
XYNTHA SOLOF INJ 2000UNIT	Tier 2	PA
XYNTHA SOLOF INJ 3000UNIT	Tier 2	PA
XYNTHA SOLOF KIT 250UNIT	Tier 2	PA
BRADYKININ B2 RECEPTOR ANTAGONISTS		
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (generic of FIRAZYR)	Tier 1	PA, QL (3 syringes every 30 days)
COMPLEMENT INHIBITORS		
EMPAVELI INJ 1080MG	Tier 2	PA, QL (8 injections every 28 days)
FABHALTA CAP 200MG	Tier 2	PA, QL (2 caps every 1 day)
HAEGARDA INJ 2000UNIT	Tier 2	PA, QL (20 vials every 30 days)
HAEGARDA INJ 3000UNIT	Tier 2	PA, QL (20 vials every 30 days)
TAVNEOS CAP 10MG	Tier 2	PA, QL (6 caps every 1 day)
VOYDEYA TAB 50-100MG	Tier 2	PA, QL (6 tabs every 1 day)
VOYDEYA TAB 100MG	Tier 2	PA, QL (6 tabs every 1 day)
ZILBRYSQ INJ 16.6MG	Tier 2	PA, QL (1 syringe every 1 day)
ZILBRYSQ INJ 23MG	Tier 2	PA, QL (1 syringe every 1 day)
ZILBRYSQ INJ 32.4MG	Tier 2	PA, QL (1 syringe every 1 day)
HEMATOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE TAB 100MG	Tier 2	PA, QL (2 tabs every 1 day)
TAVALISSE TAB 150MG	Tier 2	PA, QL (2 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
HEMATORHEOLOGIC AGENTS		
pentoxifylline tab er 400 mg	Tier 1	
PLASMA KALLIKREIN INHIBITORS		
ORLADEYO CAP 110MG	Tier 2	PA, QL (1 cap every 1 day)
ORLADEYO CAP 150MG	Tier 2	PA, QL (1 cap every 1 day)
TAKHYRO INJ 150MG/ML	Tier 2	PA, QL (2 syringes every 28 days)
TAKHYRO INJ 300/2ML	Tier 2	PA, QL (2 syringes every 28 days)
TAKHYRO INJ 300/2ML	Tier 2	PA, QL (2 vials every 28 days)
PLATELET AGGREGATION INHIBITORS		
anagrelide hcl cap 0.5 mg (generic of AGRYLIN)	Tier 1	PA
anagrelide hcl cap 1 mg	Tier 1	PA
aspirin-dipyridamole cap er 12hr 25-200 mg	Tier 1	
CABLIVI KIT 11MG	Tier 2	PA
cilostazol tab 50 mg	Tier 1	
cilostazol tab 100 mg	Tier 1	
clopidogrel bisulfate tab 75 mg (base equiv) (generic of PLAVIX)	Tier 1	
dipyridamole tab 25 mg	Tier 1	
dipyridamole tab 50 mg	Tier 1	
dipyridamole tab 75 mg	Tier 1	
prasugrel hcl tab 5 mg (base equiv) (generic of EFFIENT)	Tier 1	
prasugrel hcl tab 10 mg (base equiv) (generic of EFFIENT)	Tier 1	
PYRUVATE KINASE ACTIVATORS		
PYRUKYND TAB 5MG	Tier 2	PA, QL (2 tabs every 1 day)
PYRUKYND TAB 5MG TP	Tier 2	PA, QL (1 tab every 1 day)
PYRUKYND TAB 20MG	Tier 2	PA, QL (2 tabs every 1 day)
PYRUKYND TAB 20MGX5MG	Tier 2	PA, QL (1 tab every 1 day)
PYRUKYND TAB 50MG	Tier 2	PA, QL (2 tabs every 1 day)
PYRUKYND TAB 50MGX20M	Tier 2	PA, QL (1 tab every 1 day)
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA CAP 84MG	Tier 2	PA, QL (2 caps every 1 day)
miglustat cap 100 mg (generic of ZAVESCA)	Tier 1	PA, QL (3 caps every 1 day)
AGENTS FOR SICKLE CELL DISEASE		
DROXIA CAP 200MG	Tier 2	
DROXIA CAP 300MG	Tier 2	
DROXIA CAP 400MG	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
glutamine (sickle cell) powd pack 5 gm (generic of ENDARI)	Tier 1	PA, QL (6 packets every 1 day)
SIKLOS TAB 100MG	Tier 2	PA, AGE (Max 17)
SIKLOS TAB 1000MG	Tier 2	PA, AGE (Max 17)
XROMI SOL 100MG/ML	Tier 2	PA, AGE (Max 17)
COBALAMINS		
cyanocobalamin inj 1000 mcg/ml	Tier 1	
cyanocobalamin tab 100 mcg	Tier 1	OTC
cyanocobalamin tab 250 mcg	Tier 1	OTC
cyanocobalamin tab 500 mcg	Tier 1	OTC
cyanocobalamin tab 1000 mcg	Tier 1	OTC
cyanocobalamin tab er 1000 mcg	Tier 1	OTC
hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)	Tier 1	
FOLIC ACID/FOLATES		
folic acid tab 1 mg	Tier 1	Available for 90 day fill
folic acid tab 1 mg	Tier 1	OTC; Available for 90 day fill
folic acid tab 400 mcg	Tier 1	OTC
folic acid tab 800 mcg	Tier 1	OTC
HEMATOPOIETIC GROWTH FACTORS		
ALVAIZ TAB 9MG	Tier 2	PA, QL (1 tab every 1 day)
ALVAIZ TAB 18MG	Tier 2	PA, QL (1 tab every 1 day)
ALVAIZ TAB 36MG	Tier 2	PA, QL (2 tabs every 1 day)
ALVAIZ TAB 54MG	Tier 2	PA, QL (2 tabs every 1 day)
ARANESP INJ 10MCG	Tier 2	PA
ARANESP INJ 25MCG	Tier 2	PA
ARANESP INJ 40MCG	Tier 2	PA
ARANESP INJ 60MCG	Tier 2	PA
ARANESP INJ 100MCG	Tier 2	PA
ARANESP INJ 150MCG	Tier 2	PA
ARANESP INJ 200MCG	Tier 2	PA
ARANESP INJ 300MCG	Tier 2	PA
ARANESP INJ 500MCG	Tier 2	PA
DOPTELET TAB 20MG	Tier 2	PA
eltrombopag olamine powder pack for susp 12.5 mg (base eq) (generic of PROMACTA)	Tier 1	PA, QL (1 packet every 1 day)
eltrombopag olamine powder pack for susp 25 mg (base equiv) (generic of PROMACTA)	Tier 1	PA, QL (3 packets every 1 day)
eltrombopag olamine tab 12.5 mg (base equiv) (generic of PROMACTA)	Tier 1	PA, QL (1 tab every 1 day)
eltrombopag olamine tab 25 mg (base equiv) (generic of PROMACTA)	Tier 1	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
eltrombopag olamine tab 50 mg (base equiv) (generic of PROMACTA)	Tier 1	PA, QL (3 tabs every 1 day)
eltrombopag olamine tab 75 mg (base equiv) (generic of PROMACTA)	Tier 1	PA, QL (2 tabs every 1 day)
EPOGEN INJ 2000/ML	Tier 2	PA
EPOGEN INJ 3000/ML	Tier 2	PA
EPOGEN INJ 4000/ML	Tier 2	PA
EPOGEN INJ 10000/ML	Tier 2	PA
EPOGEN INJ 20000/ML	Tier 2	PA
MIRCERA INJ 30MCG	Tier 2	PA
MIRCERA INJ 50MCG	Tier 2	PA
MIRCERA INJ 75MCG	Tier 2	PA
MIRCERA INJ 100MCG	Tier 2	PA
MIRCERA INJ 120MCG	Tier 2	PA
MIRCERA INJ 150MCG	Tier 2	PA
MIRCERA INJ 200MCG	Tier 2	PA
MULPLETA TAB 3MG	Tier 2	PA, QL (7 tabs every 14 days)
PROCRIT INJ 40000/ML	Tier 2	PA
RETACRIT INJ 2000UNIT	Tier 2	PA
RETACRIT INJ 3000UNIT	Tier 2	PA
RETACRIT INJ 4000UNIT	Tier 2	PA
RETACRIT INJ 10000UNT	Tier 2	PA
RETACRIT INJ 20000UNI	Tier 2	PA
RETACRIT INJ 40000UNT	Tier 2	PA
ZARXIO INJ 300/0.5	Tier 2	PA
ZARXIO INJ 480/0.8	Tier 2	PA

HEMATOPOIETIC MIXTURES

folic acid-vitamin b6-vitamin b12 tab 2.2-25-0.5 mg	Tier 1	
folic acid-vitamin b6-vitamin b12 tab 2.5-25-1 mg	Tier 1	
folic acid-vitamin b6-vitamin b12 tab 2.5-25-1 mg	Tier 1	OTC
iron polysacch complex-vit b12-fa cap 150- 0.025-1 mg	Tier 1	OTC

IRON

ACCRUFER CAP 30MG	Tier 2	PA, QL (2 caps every 1 day)
ferrous fumarate tab 324 mg (106 mg elemental fe)	Tier 1	OTC
ferrous gluconate tab 240 mg (27 mg elemental fe)	Tier 1	OTC
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
ferrous sulfate soln 220 mg/5ml (44 mg/5ml elemental fe)	Tier 1	OTC
ferrous sulfate tab 325 mg (65 mg elemental fe)	Tier 1	OTC
ferrous sulfate tab ec 324 mg (65 mg fe equivalent)	Tier 1	OTC
ferrous sulfate tab ec 325 mg (65 mg fe equivalent)	Tier 1	OTC; Available for 90 day fill
NOVAFERRUM DRO 15MG/ML	Tier 2	OTC
polysaccharide iron complex cap 150 mg (iron equivalent)	Tier 1	OTC
STEM CELL MOBILIZERS		
XOLREMDI CAP 100MG	Tier 2	PA, QL (4 caps every 1 day)
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
aminocaproic acid oral soln 0.25 gm/ml	Tier 1	
aminocaproic acid tab 500 mg	Tier 1	
aminocaproic acid tab 1000 mg	Tier 1	
tranexamic acid tab 650 mg	Tier 1	QL (6 tabs every 1 day)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
ANTIHISTAMINE HYPNOTICS		
diphenhydramine hcl (sleep) tab 25 mg	Tier 1	OTC
doxylamine succinate (sleep) tab 25 mg	Tier 1	OTC
BARBITURATE HYPNOTICS		
phenobarbital elixir 20 mg/5ml	Tier 1	
phenobarbital tab 15 mg	Tier 1	
phenobarbital tab 16.2 mg	Tier 1	
phenobarbital tab 30 mg	Tier 1	
phenobarbital tab 32.4 mg	Tier 1	
phenobarbital tab 60 mg	Tier 1	
phenobarbital tab 64.8 mg	Tier 1	
phenobarbital tab 97.2 mg	Tier 1	
phenobarbital tab 100 mg	Tier 1	
NON-BARBITURATE HYPNOTICS		
estazolam tab 1 mg	Tier 1	
estazolam tab 2 mg	Tier 1	
eszopiclone tab 1 mg (generic of LUNESTA)	Tier 1	QL (1 tab every 1 day)
eszopiclone tab 2 mg (generic of LUNESTA)	Tier 1	QL (1 tab every 1 day)
eszopiclone tab 3 mg (generic of LUNESTA)	Tier 1	QL (1 tab every 1 day)
temazepam cap 15 mg (generic of RESTORIL)	Tier 1	
temazepam cap 30 mg (generic of RESTORIL)	Tier 1	
zaleplon cap 5 mg	Tier 1	
zaleplon cap 10 mg	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>zolpidem tartrate tab 5 mg (generic of AMBIEN)</i>	Tier 1	
<i>zolpidem tartrate tab 10 mg (generic of AMBIEN)</i>	Tier 1	
<i>zolpidem tartrate tab er 6.25 mg (generic of AMBIEN CR)</i>	Tier 1	QL (1 tab every 1 day)
<i>zolpidem tartrate tab er 12.5 mg (generic of AMBIEN CR)</i>	Tier 1	QL (1 tab every 1 day)
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA TAB 5MG	Tier 2	PA, QL (1 tab every 1 day)
BELSOMRA TAB 10MG	Tier 2	PA, QL (1 tab every 1 day)
BELSOMRA TAB 15MG	Tier 2	PA, QL (1 tab every 1 day)
BELSOMRA TAB 20MG	Tier 2	PA, QL (1 tab every 1 day)
DAYVIGO TAB 5MG	Tier 2	PA, QL (1 tab every 1 day)
DAYVIGO TAB 10MG	Tier 2	PA, QL (1 tab every 1 day)
QUVIVIQ TAB 25MG	Tier 2	PA, QL (1 tab every 1 day)
QUVIVIQ TAB 50MG	Tier 2	PA, QL (1 tab every 1 day)
SELECTIVE MELATONIN RECEPTOR AGONISTS		
HETLIOZ LQ SUS 4MG/ML	Tier 2	PA, QL (5 mL every 1 day)
<i>ramelteon tab 8 mg (generic of ROZEREM)</i>	Tier 1	ST, PA, QL (1 tab every 1 day); PA for new starts
<i>tasimelteon capsule 20 mg (generic of HETLIOZ)</i>	Tier 1	PA, QL (1 cap every 1 day)
LAXATIVES		
BULK LAXATIVES		
<i>calcium polycarbophil tab 625 mg</i>	Tier 1	OTC
<i>methylcellulose powder laxative</i>	Tier 1	OTC
<i>methylcellulose tab 500 mg</i>	Tier 1	OTC
<i>psyllium powder 28.3%</i>	Tier 1	OTC
<i>psyllium powder 43%</i>	Tier 1	OTC
<i>psyllium powder 58.6%</i>	Tier 1	OTC
LAXATIVE COMBINATIONS		
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (generic of GOLYTELY)</i>	Tier 1	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	Tier 1	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	Tier 1	
<i>sennosides-docusate sodium tab 8.6-50 mg</i>	Tier 1	OTC
LAXATIVES - MISCELLANEOUS		
<i>glycerin suppos 2 gm</i>	Tier 1	OTC
<i>lactulose solution 10 gm/15ml</i>	Tier 1	
<i>polyethylene glycol 3350 oral powder 17 gm/scoop</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
LUBRICANT LAXATIVES		
mineral oil	Tier 1	OTC
SALINE LAXATIVES		
magnesium citrate soln	Tier 1	OTC
magnesium hydroxide susp 400 mg/5ml	Tier 1	OTC
STIMULANT LAXATIVES		
bisacodyl suppos 10 mg	Tier 1	OTC
bisacodyl tab delayed release 5 mg	Tier 1	OTC
sennosides syrup 8.8 mg/5ml	Tier 1	OTC
sennosides tab 8.6 mg	Tier 1	OTC
SURFACTANT LAXATIVES		
docusate calcium cap 240 mg	Tier 1	OTC
docusate sodium cap 100 mg	Tier 1	OTC
docusate sodium cap 250 mg	Tier 1	OTC
docusate sodium liquid 150 mg/15ml	Tier 1	OTC
PEDIA-LAX LIQ 50MG	Tier 2	OTC
MACROLIDES		
AZITHROMYCIN		
azithromycin for susp 100 mg/5ml (generic of ZITHROMAX)	Tier 1	
azithromycin for susp 200 mg/5ml (generic of ZITHROMAX)	Tier 1	
azithromycin tab 250 mg (generic of ZITHROMAX)	Tier 1	
azithromycin tab 500 mg (generic of ZITHROMAX)	Tier 1	
azithromycin tab 600 mg	Tier 1	
CLARITHROMYCIN		
clarithromycin for susp 125 mg/5ml	Tier 1	
clarithromycin for susp 250 mg/5ml	Tier 1	
clarithromycin tab 250 mg	Tier 1	
clarithromycin tab 500 mg	Tier 1	
FIDAXOMICIN		
DIFICID SUS	Tier 2	ST, PA, QL (136 mL every 10 days); Max 2 fills per year
DIFICID TAB 200MG	Tier 2	ST, PA, QL (20 tabs every 10 days); Max 2 fills per year
MEDICAL DEVICES AND SUPPLIES		
CONTRACEPTIVES		
CONDOMS LATEX LUBRICATED	Tier 2	OTC

Drug Name	Drug Tier	Requirements/Limits
DIABETIC SUPPLIES		
ACCU-CHEK KIT FASTCLIX	Tier 2	OTC
ACCU-CHEK KIT GUIDE	Tier 2	OTC
ACCU-CHEK KIT GUIDE ME	Tier 2	OTC
ACCU-CHEK KIT SOFTCLIX	Tier 2	OTC
ACCU-CHEK LIQ GUIDE	Tier 2	OTC
ACCU-CHEK LIQ SMART	Tier 2	OTC
ACCU-CHEK SOL	Tier 2	OTC
AUTOLET II KIT CLINISAF	Tier 2	OTC
AUTOLET LITE KIT	Tier 2	OTC
AUTOLET LITE KIT CLINISAF	Tier 2	OTC
AUTOLET LITE KIT STARTER	Tier 2	OTC
BD MICROTAIN MIS LANCETS	Tier 2	
DEXCOM G6 MIS RECEIVER	Tier 2	ST, PA, QL (1 receiver every year)
DEXCOM G6 MIS SENSOR	Tier 2	ST, PA, QL (3 boxes every 30 days)
DEXCOM G6 MIS TRANSMIT	Tier 2	ST, PA, QL (1 box every 90 days)
DEXCOM G7 MIS RECEIVER	Tier 2	ST, PA, QL (1 receiver every year)
DEXCOM G7 MIS SENSOR	Tier 2	ST, PA, QL (3 boxes every 30 days)
DIASCREEN 3 MIS	Tier 2	OTC
DIASCREEN 5 MIS	Tier 2	OTC
DIASCREEN 6 MIS	Tier 2	OTC
DIASCREEN 7 MIS	Tier 2	OTC
DIASCREEN 8 MIS	Tier 2	OTC
DIASCREEN 9 MIS	Tier 2	OTC
DIASCREEN 10 MIS	Tier 2	OTC
DIASCREEN MIS 1B	Tier 2	OTC
DIASCREEN MIS 1G	Tier 2	OTC
DIASCREEN MIS 1K	Tier 2	OTC
DIASCREEN MIS 2GK	Tier 2	OTC
DIASCREEN MIS 2GP	Tier 2	OTC
DIASCREEN MIS 4NL	Tier 2	OTC
DIASCREEN MIS 4OBL	Tier 2	OTC
DIASCREEN MIS 4PH	Tier 2	OTC
DIASCREEN MIS CONTROL	Tier 2	OTC
FREE LIBRE2 KIT PLUS/SEN	Tier 2	ST, PA, QL (2 boxes every 30 days)
FREE LIBRE3 KIT PLUS/SEN	Tier 2	ST, PA, QL (2 boxes every 30 days)

Drug Name	Drug Tier	Requirements/Limits
FREESTY LIBR KIT 2 SENSOR	Tier 2	ST, PA, QL (2 boxes every 28 days)
FREESTY LIBR KIT 3 SENSOR	Tier 2	ST, PA, QL (2 boxes every 28 days)
FREESTY LIBR KIT SENSOR	Tier 2	ST, PA, QL (2 boxes every 28 days)
FREESTY LIBR MIS 2 READER	Tier 2	ST, PA, QL (1 reader every year)
FREESTY LIBR MIS 3 READER	Tier 2	ST, PA, QL (1 reader every year)
FREESTY LIBR MIS READER	Tier 2	ST, PA, QL (1 reader every year)
FREESTYLE MIS READER	Tier 2	ST, PA, QL (1 reader every year)
GENTEEL LANC KIT BLUE	Tier 2	OTC
HYPOLANCE KIT LANCING	Tier 2	OTC
LANCETS	Tier 2	OTC
LANCING DEVICE	Tier 2	OTC
MULTI-LANCET KIT DEVICE	Tier 2	OTC
OMNIPOD 5 DX KIT INT G7G6	Tier 2	PA, QL (1 kit every 30 days)
OMNIPOD 5 DX MIS POD G7G6	Tier 2	PA, QL (15 boxes every 30 days)
OMNIPOD 5 LB KIT INTRO G6	Tier 2	PA, QL (1 kit every 30 days)
OMNIPOD 5 LB MIS PODS G6	Tier 2	PA, QL (15 boxes every 30 days)
OMNIPOD DASH KIT INTRO	Tier 2	PA, QL (1 kit every 30 days)
OMNIPOD DASH KIT PDM	Tier 2	PA, QL (1 kit every 30 days)
OMNIPOD DASH MIS PODS	Tier 2	PA, QL (15 boxes every 30 days)
OMNIPOD MIS POD PALS	Tier 2	PA, QL (15 boxes every 30 days), OTC
ONETOUCH DELICA LANCING DEV	Tier 2	OTC
RELION KIT LANCING	Tier 2	OTC
SELECT-LITE KIT DEV/LANC	Tier 2	OTC
TWIIST KIT REFILL	Tier 2	PA, QL (1 kit every 30 days)
TWIIST KIT STARTER	Tier 2	PA, QL (1 kit every 30 days)
GI-GU OSTOMY & IRRIGATION SUPPLIES		
SKIN TAC ADH MIS WIPE	Tier 2	ST, PA, OTC
MISC. DEVICES		
ALCOHOL SWABS - OTC	Tier 2	OTC
PARENTERAL THERAPY SUPPLIES		
CRONO SYR MIS 20ML	Tier 2	ST, PA, OTC
FILTER NEEDLES - OTC	Tier 2	ST, PA, OTC
FILTER NEEDLES - RX	Tier 2	ST, PA

Drug Name	Drug Tier	Requirements/Limits
HYPO NEEDLE MIS 32GX5/16	Tier 2	ST, PA, OTC
HYPODERMIC NEEDLES (DISPOSABLE) - OTC	Tier 2	ST, PA, OTC
INSULIN PEN NEEDLE - OTC	Tier 2	OTC
INSULIN PEN NEEDLE - RX	Tier 2	
INSULIN SYRINGE/NEEDLE - OTC	Tier 2	OTC
INSULIN SYRINGE/NEEDLE - RX	Tier 2	
INTRO NEEDLE MIS 18GX1.25	Tier 2	ST, PA
NEEDLE (DISP) 14 G	Tier 2	ST, PA
NEEDLE (DISP) 16 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 16 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 18 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 18 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 19 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 19 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 20 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 20 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 21 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 21 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 22 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 22 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 23 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 23 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 24 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 25 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 25 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 26 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 26 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 27 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 27 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 30 G - OTC	Tier 2	ST, PA, OTC
NEEDLE (DISP) 30 G - RX	Tier 2	ST, PA
NEEDLE (DISP) 31 G	Tier 2	ST, PA, OTC
NEEDLES MIS 28GX1/2"	Tier 2	ST, PA, OTC
NEEDLES MIS 29GX1/2"	Tier 2	ST, PA, OTC
SYRINGE (DISPOSABLE) - OTC	Tier 2	ST, PA
SYRINGE (DISPOSABLE) - RX	Tier 2	ST, PA, OTC
SYRINGE/NEEDLE (DISP) 1 ML - OTC	Tier 2	ST, PA, OTC
SYRINGE/NEEDLE (DISP) 1 ML - RX	Tier 2	ST, PA
SYRINGE/NEEDLE (DISP) 3 ML - OTC	Tier 2	ST, PA, OTC
SYRINGE/NEEDLE (DISP) 3 ML - RX	Tier 2	ST, PA
SYRINGE/NEEDLE (DISP) 5 ML - OTC	Tier 2	ST, PA, OTC
SYRINGE/NEEDLE (DISP) 6 ML - RX	Tier 2	ST, PA
SYRINGE/NEEDLE (DISP) 10 ML - OTC	Tier 2	ST, PA, OTC
SYRINGE/NEEDLE (DISP) 12 ML - OTC	Tier 2	ST, PA, OTC

AGE - Age Limit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
SYRINGE/NEEDLE (DISP) 12 ML - RX	Tier 2	ST, PA
TUBERCULIN/ALLERGY SYRINGES - OTC	Tier 2	ST, PA, OTC
TUBERCULIN/ALLERGY SYRINGES - RX	Tier 2	ST, PA
RESPIRATORY THERAPY SUPPLIES		
AIRZONE PEAK MIS FLOW MTR	Tier 2	OTC
ASSESS METER MIS FULL	Tier 2	OTC
ASSESS METER MIS LOW	Tier 2	OTC
MINI WRIGHT MIS PFM	Tier 2	OTC
MINI WRIGHT MIS PFM LOW	Tier 2	OTC
POCKET PEAK MIS METER	Tier 2	OTC
POCKETPEAK MIS MTR LOW	Tier 2	OTC
RESPIRATORY THERAPY SUPPLIES - MISC (MASK)	Tier 2	OTC
RESPIRATORY THERAPY SUPPLIES - MISC (MASK)- RX	Tier 2	
SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE - OTC	Tier 2	QL (2 spacers every 365 days), OTC
SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE - RX	Tier 2	QL (2 spacers every 365 days)
TRUZONE PEAK MIS FLOW MTR	Tier 2	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
AJOVY INJ 225/1.5	Tier 2	PA, QL (1 pen every 30 days)
AJOVY INJ 225/1.5	Tier 2	PA, QL (1 syringe every 30 days)
EMGALITY INJ 120MG/ML	Tier 2	PA, QL (1 pen every 30 days)
EMGALITY INJ 120MG/ML	Tier 2	PA, QL (1 syringe every 30 days)
QULIPTA TAB 10MG	Tier 2	PA, QL (1 tab every 1 day)
QULIPTA TAB 30MG	Tier 2	PA, QL (1 tab every 1 day)
QULIPTA TAB 60MG	Tier 2	PA, QL (1 tab every 1 day)
UBRELVY TAB 50MG	Tier 2	PA, QL (10 tabs every 30 days)
UBRELVY TAB 100MG	Tier 2	PA, QL (10 tabs every 30 days)
SEROTONIN AGONISTS		
<i>naratriptan hcl tab 1 mg (base equiv)</i>	Tier 1	QL (6 tabs every 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	Tier 1	QL (6 tabs every 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	Tier 1	QL (9 tabs every 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (generic of MAXALT-MLT)</i>	Tier 1	QL (9 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	Tier 1	QL (9 tabs every 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent) (generic of MAXALT)</i>	Tier 1	QL (9 tabs every 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	Tier 1	QL (6 inhalations every 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	Tier 1	QL (6 inhalations every 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	Tier 1	QL (5 injections every 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	Tier 1	QL (6 injections every 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml (generic of IMITREX STATDOSE SYSTEM)</i>	Tier 1	QL (6 injections every 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	Tier 1	QL (6 injections every 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml (generic of IMITREX STATDOSE REFILL)</i>	Tier 1	QL (6 injections every 30 days)
<i>sumatriptan succinate tab 25 mg (generic of IMITREX)</i>	Tier 1	QL (9 tabs every fill; Max 2 fills every 30 days)
<i>sumatriptan succinate tab 50 mg (generic of IMITREX)</i>	Tier 1	QL (9 tabs every fill; Max 2 fills every 30 days)
<i>sumatriptan succinate tab 100 mg (generic of IMITREX)</i>	Tier 1	QL (9 tabs every fill; Max 2 fills every 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	Tier 1	QL (6 tabs every 30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	Tier 1	QL (6 tabs every 30 days)
<i>zolmitriptan tab 2.5 mg</i>	Tier 1	QL (6 tabs every 30 days)
<i>zolmitriptan tab 5 mg</i>	Tier 1	QL (6 tabs every 30 days)

MINERALS & ELECTROLYTES

CALCIUM

<i>CA CITRATE TAB 250MG</i>	Tier 2	OTC
<i>CALCIUM CARB CHW 500MG</i>	Tier 2	OTC
<i>calcium carb-cholecalciferol tab 600 mg-20 mcg (800 unit)</i>	Tier 1	OTC
<i>calcium carbonate tab 1250 mg (500 mg elemental ca)</i>	Tier 1	OTC
<i>calcium carbonate tab 1500 mg (600 mg elemental ca)</i>	Tier 1	OTC
<i>calcium carbonate-cholecalciferol tab 500 mg-5 mcg(200 unit)</i>	Tier 1	OTC
<i>calcium carbonate-cholecalciferol tab 600 mg-5 mcg(200 unit)</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
calcium carbonate-vitamin d cap 600 mg-5 mcg (200 unit)	Tier 1	OTC
calcium carbonate-vitamin d tab 600 mg-5 mcg (200 unit)	Tier 1	OTC
CALCIUM CHW 500-10	Tier 2	OTC
calcium cit-vit d tab 200 mg-6.25 mcg(250 unit) (elem ca)	Tier 1	OTC
calcium cit-vit d tab 315 mg-6.25 mcg(250 unit) (elem ca)	Tier 1	OTC
calcium citrate tab 950 mg (200 mg elemental ca)	Tier 1	OTC
calcium tab 600 mg	Tier 1	OTC
oyster shell calcium tab 500 mg	Tier 1	OTC
ELECTROLYTE MIXTURES		
oral electrolyte solution	Tier 1	OTC
FLUORIDE		
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)	Tier 1	
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)	Tier 1	
sodium fluoride chew tab 1 mg f (from 2.2 mg naf)	Tier 1	Available for 90 day fill
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	Tier 1	
MAGNESIUM		
magnesium oxide tab 250 mg (mg supplement)	Tier 1	OTC
magnesium oxide tab 400 mg (240 mg elemental mg)	Tier 1	OTC
magnesium tab 250 mg	Tier 1	OTC
POTASSIUM		
potassium chloride microencapsulated crys er tab 10 meq	Tier 1	
potassium chloride microencapsulated crys er tab 20 meq	Tier 1	
potassium chloride oral soln 10% (20 meq/15ml)	Tier 1	
potassium chloride oral soln 20% (40 meq/15ml)	Tier 1	
potassium chloride powder packet 20 meq	Tier 1	
potassium chloride tab er 8 meq (600 mg)	Tier 1	
potassium chloride tab er 10 meq	Tier 1	
potassium chloride tab er 20 meq (1500 mg)	Tier 1	
ZINC		
zinc gluconate tab 30 mg	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>zinc gluconate tab 50 mg (elemental zn)</i>	Tier 1	OTC
<i>zinc sulfate cap 220 mg (50 mg elemental zn)</i>	Tier 1	OTC

MISCELLANEOUS THERAPEUTIC CLASSES

CHELATING AGENTS

<i>penicillamine tab 250 mg (generic of DEPEN TITRATABS)</i>	Tier 1	PA, QL (8 tabs every 1 day)
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IMMUNOMODULATORS

<i>JOENJA TAB 70MG</i>	Tier 2	PA, QL (2 tabs every 1 day)
<i>lenalidomide cap 5 mg</i>	Tier 1	PA, QL (1 cap every 1 day)
<i>lenalidomide cap 10 mg</i>	Tier 1	PA, QL (1 cap every 1 day)
<i>lenalidomide cap 15 mg</i>	Tier 1	PA, QL (1 cap every 1 day)
<i>lenalidomide cap 20 mg</i>	Tier 1	PA, QL (21 caps every 28 days)
<i>lenalidomide cap 25 mg</i>	Tier 1	PA, QL (21 caps every 28 days)
<i>lenalidomide caps 2.5 mg</i>	Tier 1	PA, QL (1 cap every 1 day)
<i>REVLIMID CAP 2.5MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>REVLIMID CAP 5MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>REVLIMID CAP 10MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>REVLIMID CAP 15MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>REVLIMID CAP 20MG</i>	Tier 2	PA, QL (21 caps every 28 days)
<i>REVLIMID CAP 25MG</i>	Tier 2	PA, QL (21 caps every 28 days)
<i>REZUROCK TAB 200MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>THALOMID CAP 50MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>THALOMID CAP 100MG</i>	Tier 2	PA, QL (4 caps every 1 day)

IMMUNOSUPPRESSIVE AGENTS

<i>azathioprine tab 50 mg (generic of IMURAN)</i>	Tier 1	
<i>cyclosporine cap 25 mg (generic of SANDIMMUNE)</i>	Tier 1	
<i>cyclosporine cap 100 mg (generic of SANDIMMUNE)</i>	Tier 1	PA
<i>cyclosporine modified cap 25 mg (generic of NEORAL)</i>	Tier 1	
<i>cyclosporine modified cap 50 mg</i>	Tier 1	
<i>cyclosporine modified cap 100 mg (generic of NEORAL)</i>	Tier 1	
<i>cyclosporine modified oral soln 100 mg/ml (generic of NEORAL)</i>	Tier 1	AGE (Max 17)
<i>ENSPRYNG INJ</i>	Tier 2	PA, QL (1 syringe every 28 days)
<i>LUPKYNIS CAP 7.9MG</i>	Tier 2	PA, QL (6 caps every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>mycophenolate mofetil cap 250 mg (generic of CELLCEPT)</i>	Tier 1	
<i>mycophenolate mofetil for oral susp 200 mg/ml (generic of CELLCEPT)</i>	Tier 1	AGE (Max 17)
<i>mycophenolate mofetil tab 500 mg (generic of CELLCEPT)</i>	Tier 1	
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv) (generic of MYFORTIC)</i>	Tier 1	
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv) (generic of MYFORTIC)</i>	Tier 1	
<i>sirolimus oral soln 1 mg/ml</i>	Tier 1	AGE (Max 17)
<i>sirolimus tab 0.5 mg</i>	Tier 1	
<i>sirolimus tab 1 mg</i>	Tier 1	
<i>sirolimus tab 2 mg</i>	Tier 1	
<i>tacrolimus cap 0.5 mg</i>	Tier 1	
<i>tacrolimus cap 0.5 mg (generic of PROGRAF)</i>	Tier 1	
<i>tacrolimus cap 1 mg</i>	Tier 1	
<i>tacrolimus cap 1 mg (generic of PROGRAF)</i>	Tier 1	
<i>tacrolimus cap 5 mg</i>	Tier 1	
<i>tacrolimus cap 5 mg (generic of PROGRAF)</i>	Tier 1	

PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS

VIJOICE GRA 50MG	Tier 2	PA, QL (1 packet every 1 day)
VIJOICE TAB 50MG	Tier 2	PA, QL (1 tab every 1 day)
VIJOICE TAB 125MG	Tier 2	PA, QL (1 tab every 1 day)
VIJOICE TAB 250MG	Tier 2	PA, QL (2 tabs every 1 day)

POTASSIUM REMOVING AGENTS

LOKELMA PAK 5GM	Tier 2	PA, QL (1 packet every 1 day)
LOKELMA PAK 10GM	Tier 2	PA, QL (1 packet every 1 day)
<i>sodium polystyrene sulfonate powder</i>	Tier 1	
<i>sodium polystyrene sulfonate rectal susp 30 gm/120ml</i>	Tier 1	
<i>sodium polystyrene sulfonate susp 15 gm/60ml</i>	Tier 1	
VELTASSA POW 1GM	Tier 2	PA, QL (4 packets every 1 day)
VELTASSA POW 8.4GM	Tier 2	PA, QL (1 packet every 1 day)
VELTASSA POW 16.8GM	Tier 2	PA, QL (1 packet every 1 day)

Drug Name	Drug Tier	Requirements/Limits
VELTASSA POW 25.2GM	Tier 2	PA, QL (1 packet every 1 day)
PROGERIA TREATMENT AGENTS		
ZOKINVY CAP 50MG	Tier 2	PA, QL (4 caps every 1 day)
ZOKINVY CAP 75MG	Tier 2	PA, QL (4 caps every 1 day)
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA INJ 120MG	Tier 2	PA
BENLYSTA INJ 200MG/ML	Tier 2	PA, QL (4 injections every 28 days)
BENLYSTA INJ 200MG/ML	Tier 2	PA, QL (4 syringes every 28 days)
BENLYSTA INJ 400MG	Tier 2	PA
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
benzocaine-menthol lozenge 6-10 mg	Tier 1	OTC
benzocaine-menthol lozenge 15-2.6 mg	Tier 1	OTC
benzocaine-menthol lozenge 15-3.6 mg	Tier 1	OTC
FIRST-MOUTHW SUS BLM	Tier 2	
lidocaine hcl viscous soln 2%	Tier 1	
ANTI-INFECTIVES - THROAT		
clotrimazole troche 10 mg	Tier 1	QL (5 lozenges every 1 day)
nystatin susp 100000 unit/ml (generic of NYSTATIN)	Tier 1	QL (473 mL every 14 days)
ANTISEPTICS - MOUTH/THROAT		
chlorhexidine gluconate soln 0.12% (generic of PERIDEX)	Tier 1	
DENTAL PRODUCTS		
sodium fluoride gel 1.1% (0.5% f)	Tier 1	
STEROIDS - MOUTH/THROAT/DENTAL		
triamcinolone acetonide dental paste 0.1%	Tier 1	
THROAT PRODUCTS - MISC.		
AQUORAL SPR	Tier 2	
pilocarpine hcl tab 5 mg (generic of SALAGEN)	Tier 1	
MULTIVITAMINS		
B-COMPLEX VITAMINS		
b-complex vitamin cap	Tier 1	OTC
b-complex vitamin tab	Tier 1	OTC
B-COMPLEX W/ C		
b-complex w/ c tab	Tier 1	OTC
B-COMPLEX W/ FOLIC ACID		
b-complex w/ c & folic acid cap 1 mg	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
MULTIPLE VITAMINS W/ IRON		
multiple vitamins w/ iron tab	Tier 1	OTC; Available for 90 day fill
MULTIPLE VITAMINS W/ MINERALS		
multiple vitamins w/ minerals chew tab	Tier 1	OTC
multiple vitamins w/ minerals tab	Tier 1	
multiple vitamins w/ minerals tab	Tier 1	OTC
MULTIVITAMINS		
multiple vitamin tab	Tier 1	OTC; Available for 90 day fill
PED MULTIPLE VITAMINS W/ MINERALS		
MVW COMPLETE DRO PEDIATRI	Tier 2	OTC
PEDIATRIC MULTIPLE VITAMIN W/ MINERALS CHEW TAB	Tier 2	OTC
PED MV W/ FLUORIDE		
pediatric vitamins acd w/ fluoride soln 0.25 mg/ml	Tier 1	
PED MV W/ IRON		
MULTI/IRON/ DRO INF/TODD	Tier 2	OTC
pediatric multiple vitamins w/ iron chew tab 15 mg	Tier 1	OTC; Available for 90 day fill
POLY-VI-SOL SOL IRON	Tier 2	OTC
POLY-VITE SOL IRON	Tier 2	OTC
PEDIATRIC MULTIPLE VITAMINS		
MULTIV INFAN DRO /TODDLER	Tier 2	OTC
pediatric multiple vitamin chew tab	Tier 1	OTC; Available for 90 day fill
POLY-VI-SOL SOL 50MG/ML	Tier 2	OTC
PEDIATRIC VITAMINS		
TRI-VI-SOL SOL A/C/D	Tier 2	OTC
VITAMI A-C-D DRO INF/TODD	Tier 2	OTC
PRENATAL VITAMINS		
CL PRENATAL TAB 28-0.8MG	Tier 2	OTC; Available for 90 day fill
COMPLETE NAT PAK DHA	Tier 2	
COMPLETENATE CHW	Tier 2	
CVS PRENATAL CHW GUMMY	Tier 2	OTC; Available for 90 day fill
CVS PRENATAL TAB 27-0.8MG	Tier 2	OTC; Available for 90 day fill
FOLIVANE-OB CAP	Tier 2	
GNP PRENATAL TAB 28-0.8MG	Tier 2	OTC; Available for 90 day fill

Drug Name	Drug Tier	Requirements/Limits
MULTI PRENAT TAB	Tier 2	OTC; Available for 90 day fill
ONE A DAY CAP PRENATAL	Tier 2	OTC
PNV 27-CA/FE TAB /FA	Tier 2	
PRENAT MULTI CAP +DHA	Tier 2	OTC
PRENATAL 19 TAB	Tier 2	OTC
PRENATAL CAP FORMULA	Tier 2	OTC
PRENATAL MUL CAP +DHA	Tier 2	OTC
PRENATAL MV MIS + DHA	Tier 2	OTC
PRENATAL TAB	Tier 2	OTC; Available for 90 day fill
PRENATAL TAB 27-0.8MG	Tier 2	OTC; Available for 90 day fill
PRENATAL TAB 28-0.8MG	Tier 2	OTC; Available for 90 day fill
PRENATAL TAB COMPLETE	Tier 2	OTC; Available for 90 day fill
PRENATAL TAB MULTIVIT	Tier 2	OTC; Available for 90 day fill
PRENATAL VIT TAB MINERALS	Tier 2	OTC; Available for 90 day fill
PRENATAL+DHA MIS WOMENS	Tier 2	OTC
PRENATL MULT CAP + DHA	Tier 2	OTC
PRENTAT MULT CAP PLUS DHA	Tier 2	OTC
SE-NATAL 19 CHW	Tier 2	
SE-NATAL 19 TAB	Tier 2	
STUART ONE CAP	Tier 2	OTC
THRIVITE RX TAB 29-1MG	Tier 2	
TRINATAL RX TAB 1	Tier 2	
VINATE CARE CHW 40-1MG	Tier 2	OTC
WESNATAL DHA PAK COMPLETE	Tier 2	

MUSCULOSKELETAL THERAPY AGENTS

CENTRAL MUSCLE RELAXANTS

<i>baclofen oral soln 5 mg/5ml</i>	Tier 1	QL (40 mL every 1 day), AGE (Max 12)
<i>baclofen susp 25 mg/5ml (generic of FLEQUSUVY)</i>	Tier 1	QL (8 mL every 1 day), AGE (Max 12)
<i>baclofen tab 5 mg</i>	Tier 1	
<i>baclofen tab 10 mg</i>	Tier 1	
<i>baclofen tab 20 mg</i>	Tier 1	
<i>chlorzoxazone tab 500 mg</i>	Tier 1	
<i>cyclobenzaprine hcl tab 5 mg</i>	Tier 1	
<i>cyclobenzaprine hcl tab 10 mg</i>	Tier 1	
<i>methocarbamol tab 500 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>methocarbamol tab 750 mg</i>	Tier 1	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	Tier 1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	Tier 1	
(generic of ZANAFLEX)		
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium cap 25 mg (generic of DANTRIUM)</i>	Tier 1	
FIBRODYSPLASIA OSSIFICANS PROGRESSIVA (FOP) AGENTS		
<i>SOHONOS CAP 1.5MG</i>	Tier 2	PA, QL (2 caps every 1 day)
<i>SOHONOS CAP 1MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>SOHONOS CAP 2.5MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>SOHONOS CAP 5MG</i>	Tier 2	PA, QL (1 cap every 1 day)
<i>SOHONOS CAP 10MG</i>	Tier 2	PA, QL (2 caps every 1 day)
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENTS - MISC.		
<i>saline nasal spray 0.65%</i>	Tier 1	OTC
NASAL ANTIALLERGY		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	Tier 1	
<i>cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)</i>	Tier 1	OTC
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	Tier 1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	Tier 1	
NASAL STEROIDS		
<i>budesonide nasal susp 32 mcg/act</i>	Tier 1	OTC
<i>fluticasone propionate nasal susp 50 mcg/act</i>	Tier 1	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	Tier 1	OTC
<i>triamcinolone acetonide nasal aerosol suspension 55 mcg/act</i>	Tier 1	OTC
SYMPATHOMIMETIC DECONGESTANTS		
<i>oxymetazoline hcl nasal soln 0.05%</i>	Tier 1	OTC
<i>phenylephrine hcl nasal soln 1%</i>	Tier 1	OTC
<i>pseudoephedrine hcl tab 30 mg</i>	Tier 1	OTC
<i>pseudoephedrine hcl tab 60 mg</i>	Tier 1	OTC
NEUROMUSCULAR AGENTS		
ALS AGENTS		
<i>RADICAVA ORS SUS 105/5ML</i>	Tier 2	PA, QL (50 mL every 28 days)
<i>RADICAVA ORS SUS STARTER</i>	Tier 2	PA, QL (50 mL every 28 days)

Drug Name	Drug Tier	Requirements/Limits
riluzole tab 50 mg	Tier 1	
FRIEDRICH'S ATAXIA AGENTS		
SKYCLARYS CAP 50MG	Tier 2	PA, QL (3 caps every 1 day)
MUSCULAR DYSTROPHY AGENTS		
DUVYZAT SUS 8.86MG	Tier 2	PA, QL (12 mL every 1 day)
NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS		
BOTOX INJ 100UNIT	Tier 2	PA, QL (1 fill every 90 days)
BOTOX INJ 200UNIT	Tier 2	PA, QL (1 fill every 90 days)
DYSPORT INJ 300UNIT	Tier 2	PA, QL (1 fill every 90 days)
DYSPORT INJ 500UNIT	Tier 2	PA, QL (1 fill every 90 days)
MYOBLOC INJ 2500/0.5	Tier 2	PA, QL (1 fill every 90 days)
MYOBLOC INJ 5000/ML	Tier 2	PA, QL (1 fill every 90 days)
MYOBLOC INJ 10000/2	Tier 2	PA, QL (1 fill every 90 days)
XEOMIN INJ 50 UNIT	Tier 2	PA, QL (1 fill every 90 days)
XEOMIN INJ 100UNIT	Tier 2	PA, QL (1 fill every 90 days)
XEOMIN INJ 200UNIT	Tier 2	PA, QL (1 fill every 90 days)
RETT SYNDROME AGENTS		
DAYBUE SOL 200MG/ML	Tier 2	PA, QL (120 mL every 1 day)
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI SOL	Tier 2	PA, QL (200 mL every 30 days)
EVRYSDI TAB 5MG	Tier 2	PA, QL (1 tab every 1 day)
NUTRIENTS		
LIPIDS		
DOJOLVI LIQ 100%	Tier 2	PA
MISC. NUTRITIONAL SUBSTANCES		
omega-3 fatty acids - oral liquid	Tier 1	OTC
omega-3 fatty acids cap 300 mg	Tier 1	OTC
omega-3 fatty acids cap 500 mg	Tier 1	OTC
omega-3 fatty acids cap 600 mg	Tier 1	OTC
omega-3 fatty acids cap 1000 mg	Tier 1	OTC
omega-3 fatty acids cap 1200 mg	Tier 1	OTC
omega-3 fatty acids cap delayed release 1200 mg	Tier 1	OTC
PROTEINS		
levocarnitine tab 500 mg	Tier 1	OTC
OPHTHALMIC AGENTS		
ARTIFICIAL TEARS AND LUBRICANTS		
carboxymethylcellulose sodium ophth soln 0.5%	Tier 1	OTC
polyethylene glycol-propylene glycol ophth soln 0.4-0.3%	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>polyvinyl alcohol ophth soln 1.4%</i>	Tier 1	OTC
<i>propylene glycol-glycerin ophth soln 1-0.3%</i>	Tier 1	OTC
<i>white petrolatum-mineral oil ophth ointment</i>	Tier 1	OTC
BETA-BLOCKERS - OPHTHALMIC		
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5% (generic of COSOPT)</i>	Tier 1	
<i>levobunolol hcl ophth soln 0.5%</i>	Tier 1	
<i>timolol maleate ophth gel forming soln 0.5%</i>	Tier 1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	Tier 1	
<i>timolol maleate ophth soln 0.5%</i>	Tier 1	
<i>timolol maleate ophth soln 0.25%</i>	Tier 1	
CYCLOPLEGIC MYDRIATICS		
<i>ATROPINE SUL SOL 1% OP</i>	Tier 2	
<i>atropine sulfate ophth soln 1%</i>	Tier 1	
<i>cyclopentolate hcl ophth soln 1% (generic of CYCLOGYL)</i>	Tier 1	
<i>phenylephrine hcl ophth soln 2.5% (generic of PHENYLEPHRINE HYDROCHLORI)</i>	Tier 1	
<i>tropicamide ophth soln 1% (generic of MYDRIACYL)</i>	Tier 1	
MIOTICS		
<i>pilocarpine hcl ophth soln 1%</i>	Tier 1	
<i>pilocarpine hcl ophth soln 4%</i>	Tier 1	
OPHTHALMIC ADRENERGIC AGENTS		
<i>brimonidine tartrate ophth soln 0.2%</i>	Tier 1	
OPHTHALMIC ANTI-INFECTIVES		
<i>bacitracin-polymyxin b ophth oint</i>	Tier 1	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	Tier 1	
<i>erythromycin ophth oint 5 mg/gm</i>	Tier 1	QL (3.5 gm every 5 days)
<i>gentamicin sulfate ophth soln 0.3%</i>	Tier 1	QL (5 mL every 5 days)
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-1000unt op oin</i>	Tier 1	
<i>neomycin-polomy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	Tier 1	
<i>ofloxacin ophth soln 0.3% (generic of OCUFLOX)</i>	Tier 1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	Tier 1	
<i>sulfacetamide sodium ophth soln 10%</i>	Tier 1	
<i>tobramycin ophth soln 0.3%</i>	Tier 1	QL (5 mL every 5 days)
<i>trifluridine ophth soln 1%</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
XDEMVY DRO 0.25%	Tier 2	PA, QL (10 mL every 42 days)
OPHTHALMIC IMMUNOMODULATORS		
cyclosporine (ophth) emulsion 0.05% (generic of RESTASIS)	Tier 1	ST, PA
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE SOL 20MCG/ML	Tier 2	PA, QL (112 mL every year)
OPHTHALMIC STEROIDS		
dexamethasone sodium phosphate ophth soln 0.1%	Tier 1	QL (5 mL every fill)
fluorometholone ophth susp 0.1% (generic of FML LIQUIFILM)	Tier 1	
neomycin-polymyxin-dexamethasone ophth oint 0.1% (generic of MAXITROL)	Tier 1	
neomycin-polymyxin-dexamethasone ophth susp 0.1% (generic of MAXITROL)	Tier 1	
PRED SOD PHO SOL 1% OP	Tier 2	
prednisolone acetate ophth susp 1% (generic of PRED FORTE)	Tier 1	QL (5 mL every fill)
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	Tier 1	
OPHTHALMICS - MISC.		
azelastine hcl ophth soln 0.05%	Tier 1	
cromolyn sodium ophth soln 4%	Tier 1	
CYSTADROPS SOL 0.37%	Tier 2	PA, QL (20 mL every 28 days)
diclofenac sodium ophth soln 0.1%	Tier 1	
dorzolamide hcl ophth soln 2%	Tier 1	
flurbiprofen sodium ophth soln 0.03%	Tier 1	
ketorolac tromethamine ophth soln 0.4% (generic of ACULAR LS)	Tier 1	QL (5 mL every fill)
ketorolac tromethamine ophth soln 0.5% (generic of ACULAR)	Tier 1	QL (5 mL every fill)
ketotifen fumarate ophth soln 0.035%	Tier 1	OTC
olopatadine hcl ophth soln 0.1% (base equivalent)	Tier 1	QL (5 mL every 30 days), OTC
olopatadine hcl ophth soln 0.2% (base equivalent)	Tier 1	QL (5 mL every 30 days), OTC
sodium chloride hypertonic ophth oint 5%	Tier 1	OTC
sodium chloride hypertonic ophth soln 5%	Tier 1	OTC
PROSTAGLANDINS - OPHTHALMIC		
latanoprost ophth soln 0.005% (generic of XALATAN)	Tier 1	QL (3 mL every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>tafluprost preservative free (pf) ophth soln 0.0015% (generic of ZIOPTAN)</i>	Tier 1	ST, PA, QL (1 dose every 1 day)
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free) (generic of TRAVATAN Z)</i>	Tier 1	ST, PA, QL (3 mL every 30 days)

OTIC AGENTS

OTIC AGENTS - MISCELLANEOUS

<i>acetic acid otic soln 2%</i>	Tier 1
<i>carbamide peroxide 6.5% otic soln</i>	Tier 1 OTC

OTIC ANTI-INFECTIVES

<i>ofloxacin otic soln 0.3%</i>	Tier 1
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OTIC COMBINATIONS

<i>neomycin-polymyxin-hc otic soln 1%</i>	Tier 1
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	Tier 1

OTIC STEROIDS

<i>fluocinolone acetonide (otic) oil 0.01% (generic of DERMOTIC)</i>	Tier 1	QL (20 mL every fill)
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PASSIVE IMMUNIZING AND TREATMENT AGENTS

MONOCLONAL ANTIBODIES

<i>SYNAGIS INJ 50/0.5ML</i>	Tier 2	PA
<i>SYNAGIS INJ 100MG/ML</i>	Tier 2	PA

PENICILLINS

AMINOPENICILLINS

<i>amoxicillin (trihydrate) cap 250 mg</i>	Tier 1
<i>amoxicillin (trihydrate) cap 500 mg</i>	Tier 1
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	Tier 1
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	Tier 1
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	Tier 1
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	Tier 1
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	Tier 1
<i>amoxicillin (trihydrate) for susp 400 mg/5ml (generic of AMOXICILLIN)</i>	Tier 1
<i>amoxicillin (trihydrate) tab 875 mg</i>	Tier 1
<i>ampicillin cap 500 mg</i>	Tier 1

NATURAL PENICILLINS

<i>BICILLIN L-A INJ 2400000</i>	Tier 2	QL (3 injections every 21 days)
<i>penicillin v potassium for soln 125 mg/5ml</i>	Tier 1	
<i>penicillin v potassium for soln 250 mg/5ml</i>	Tier 1	
<i>penicillin v potassium tab 250 mg</i>	Tier 1	
<i>penicillin v potassium tab 500 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
PENICILLIN COMBINATIONS		
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	Tier 1	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	Tier 1	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (generic of AUGMENTIN ES-600)</i>	Tier 1	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	Tier 1	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	Tier 1	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	Tier 1	QL (40 tabs every 180 days)
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium cap 250 mg</i>	Tier 1	
<i>dicloxacillin sodium cap 500 mg</i>	Tier 1	
PHARMACEUTICAL ADJUVANTS		
INTERNAL VEHICLE INGREDIENTS/AGENTS		
<i>SIMPLYTHICK GEL EASY MIX</i>	Tier 2	OTC
<i>starch-maltodextrin oral thickening powder</i>	Tier 1	OTC
SEMI SOLID VEHICLES		
<i>PETROLATUM OIN WHITE</i>	Tier 2	
<i>white petrolatum topical gel</i>	Tier 1	OTC
PROGESTINS		
PROGESTINS		
<i>medroxyprogesterone acetate tab 2.5 mg (generic of PROVERA)</i>	Tier 1	
<i>medroxyprogesterone acetate tab 5 mg (generic of PROVERA)</i>	Tier 1	
<i>medroxyprogesterone acetate tab 10 mg (generic of PROVERA)</i>	Tier 1	
<i>norethindrone acetate tab 5 mg</i>	Tier 1	
<i>progesterone cap 100 mg (generic of PROMETRIUM)</i>	Tier 1	
<i>progesterone cap 200 mg (generic of PROMETRIUM)</i>	Tier 1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium tab delayed release 333 mg</i>	Tier 1	
<i>disulfiram tab 250 mg</i>	Tier 1	
<i>disulfiram tab 500 mg</i>	Tier 1	
ANTI-CATALEPTIC AGENTS		
<i>SOD OXYBATE SOL 500MG/ML</i>	Tier 2	PA, QL (18 mL every 1 day)
<i>XYWAV SOL 0.5GM/ML</i>	Tier 2	PA, QL (18 mL every 1 day)

Drug Name	Drug Tier	Requirements/Limits
ANTIDEMENTIA AGENTS		
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	Tier 1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	Tier 1	
<i>donepezil hydrochloride tab 5 mg (generic of ARICEPT)</i>	Tier 1	
<i>donepezil hydrochloride tab 10 mg (generic of ARICEPT)</i>	Tier 1	
<i>donepezil hydrochloride tab 23 mg (generic of ARICEPT)</i>	Tier 1	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	Tier 1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	Tier 1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	Tier 1	
<i>galantamine hydrobromide tab 4 mg</i>	Tier 1	
<i>galantamine hydrobromide tab 8 mg</i>	Tier 1	
<i>galantamine hydrobromide tab 12 mg</i>	Tier 1	
<i>memantine hcl tab 5 mg</i>	Tier 1	
<i>memantine hcl tab 10 mg</i>	Tier 1	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	Tier 1	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	Tier 1	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	Tier 1	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	Tier 1	
<i>rivastigmine td patch 24hr 4.6 mg/24hr (generic of EXELON)</i>	Tier 1	QL (1 patch every 1 day)
<i>rivastigmine td patch 24hr 9.5 mg/24hr (generic of EXELON)</i>	Tier 1	QL (1 patch every 1 day)
<i>rivastigmine td patch 24hr 13.3 mg/24hr (generic of EXELON)</i>	Tier 1	QL (1 patch every 1 day)
COMBINATION PSYCHOTHERAPEUTICS		
<i>LYBALVI TAB 5-10MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>LYBALVI TAB 10-10MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>LYBALVI TAB 15-10MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>LYBALVI TAB 20-10MG</i>	Tier 2	PA, QL (1 tab every 1 day)
MOVEMENT DISORDER DRUG THERAPY		
<i>AUSTEDO TAB 6MG</i>	Tier 2	PA, QL (2 tabs every 1 day)
<i>AUSTEDO TAB 9MG</i>	Tier 2	PA, QL (2 tabs every 1 day)
<i>AUSTEDO TAB 12MG</i>	Tier 2	PA, QL (4 tabs every 1 day)
<i>AUSTEDO XR TAB 6MG</i>	Tier 2	PA, QL (1 tab every 1 day)
<i>AUSTEDO XR TAB 12MG</i>	Tier 2	PA, QL (1 tab every 1 day)

Drug Name	Drug Tier	Requirements/Limits
AUSTEDO XR TAB 18MG	Tier 2	PA, QL (1 tab every 1 day)
AUSTEDO XR TAB 24MG	Tier 2	PA, QL (1 tab every 1 day)
AUSTEDO XR TAB 30MG ER	Tier 2	PA, QL (1 tab every 1 day)
AUSTEDO XR TAB 36MG ER	Tier 2	PA, QL (1 tab every 1 day)
AUSTEDO XR TAB 42MG ER	Tier 2	PA, QL (1 tab every 1 day)
AUSTEDO XR TAB 48MG ER	Tier 2	PA, QL (1 tab every 1 day)
AUSTEDO XR TAB TITR KIT	Tier 2	PA, QL (1 tab every 1 day)
<i>tetrabenazine tab 12.5 mg (generic of XENAZINE)</i>	Tier 1	PA, QL (8 tabs every 1 day)
<i>tetrabenazine tab 25 mg (generic of XENAZINE)</i>	Tier 1	PA, QL (4 tabs every 1 day)

MULTIPLE SCLEROSIS AGENTS

AVONEX PEN KIT 30MCG	Tier 2	QL (1 kit every 28 days)
AVONEX PREFL KIT 30MCG	Tier 2	QL (1 kit every 28 days)
<i>dalfampridine tab er 12hr 10 mg (generic of AMPYRA)</i>	Tier 1	QL (2 tabs every 1 day)
<i>dimethyl fumarate capsule delayed release 120 mg (generic of TEVFIDERA)</i>	Tier 1	QL (14 caps every 28 days)
<i>dimethyl fumarate capsule delayed release 240 mg (generic of TEVFIDERA)</i>	Tier 1	QL (2 caps every 1 day)
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (generic of TEVFIDERA STARTER PACK)</i>	Tier 1	QL (1 kit every 30 days)
<i>fingolimod hcl cap 0.5 mg (base equiv) (generic of GILENYA)</i>	Tier 1	QL (1 cap every 1 day)
<i>glatiramer acetate soln prefilled syringe 20 mg/ml (generic of COPAXONE)</i>	Tier 1	QL (1 injection every 1 day)
<i>glatiramer acetate soln prefilled syringe 40 mg/ml (generic of COPAXONE)</i>	Tier 1	QL (12 injections every 28 days)
KESIMPTA INJ 20/.4ML	Tier 2	PA, QL (1 pen every 28 days)
MAVENCLAD PAK 10MG(4)	Tier 2	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(5)	Tier 2	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(6)	Tier 2	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(7)	Tier 2	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(8)	Tier 2	PA, QL (20 tabs every 270 days)
MAVENCLAD PAK 10MG(9)	Tier 2	PA, QL (20 tabs every 270 days)

Drug Name	Drug Tier	Requirements/Limits
MAVENCLAD PAK 10MG(10)	Tier 2	PA, QL (20 tabs every 270 days)
MAYZENT PAK STARTER	Tier 2	QL (12 tabs every 30 days)
MAYZENT PAK STARTER	Tier 2	QL (7 tabs every 30 days)
MAYZENT TAB 0.25MG	Tier 2	QL (4 tabs every 1 day)
MAYZENT TAB 1MG	Tier 2	QL (1 tab every 1 day)
MAYZENT TAB 2MG	Tier 2	QL (1 tab every 1 day)
teriflunomide tab 7 mg (generic of AUBAGIO)	Tier 1	QL (1 tab every 1 day)
teriflunomide tab 14 mg (generic of AUBAGIO)	Tier 1	QL (1 tab every 1 day)
PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS		
fluoxetine hcl (pmdd) tab 10 mg	Tier 1	
PSEUDOLOBULAR AFFECT (PBA) AGENTS		
NUEDEXTA CAP 20-10MG	Tier 2	PA
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AQNEURSA POW 1GM	Tier 2	PA, QL (4 packets every 1 day)
MIPLYFFA CAP 47MG	Tier 2	PA, QL (3 caps every 1 day)
MIPLYFFA CAP 62MG	Tier 2	PA, QL (3 caps every 1 day)
MIPLYFFA CAP 93MG	Tier 2	PA, QL (3 caps every 1 day)
MIPLYFFA CAP 124MG	Tier 2	PA, QL (3 caps every 1 day)
pimozide tab 1 mg	Tier 1	
pimozide tab 2 mg	Tier 1	
SMOKING DETERRENTS		
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	Tier 1	
nicotine polacrilex gum 2 mg	Tier 1	OTC
nicotine polacrilex gum 4 mg	Tier 1	OTC
nicotine polacrilex lozenge 2 mg	Tier 1	OTC
nicotine polacrilex lozenge 4 mg	Tier 1	OTC
nicotine td patch 24hr 7 mg/24hr	Tier 1	OTC
nicotine td patch 24hr 14 mg/24hr	Tier 1	OTC
nicotine td patch 24hr 21 mg/24hr	Tier 1	OTC
NICOTROL INH	Tier 2	PA
NICOTROL NS SPR 10MG/ML	Tier 2	PA
varenicline tartrate tab 0.5 mg (base equiv)	Tier 1	ST, PA
varenicline tartrate tab 1 mg (base equiv)	Tier 1	ST, PA
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	Tier 1	ST, PA
TRANSTHYRETIN AMYLOIDOSIS AGENTS		
WAINUA INJ 45/0.8ML	Tier 2	PA, QL (1 pen every 28 days)

Drug Name	Drug Tier	Requirements/Limits
RESPIRATORY AGENTS - MISC.		
CYSTIC FIBROSIS AGENTS		
BRONCHITOL CAP 40MG	Tier 2	PA, QL (20 caps every 1 day)
BRONCHITOL CAP TOL TEST	Tier 2	PA, QL (20 caps every 1 day)
KALYDECO GRA 5.8MG	Tier 2	PA, QL (2 packets every 1 day)
KALYDECO GRA 13.4MG	Tier 2	PA, QL (2 packets every 1 day)
KALYDECO PAK 25MG	Tier 2	PA, QL (2 packets every 1 day)
KALYDECO PAK 50MG	Tier 2	PA, QL (2 packets every 1 day)
KALYDECO PAK 75MG	Tier 2	PA, QL (2 packets every 1 day)
KALYDECO TAB 150MG	Tier 2	PA, QL (2 tabs every 1 day)
ORKAMBI GRA 75-94MG	Tier 2	PA, QL (2 packets every 1 day)
ORKAMBI GRA 100-125	Tier 2	PA, QL (2 packets every 1 day)
ORKAMBI GRA 150-188	Tier 2	PA, QL (2 packets every 1 day)
ORKAMBI TAB 100-125	Tier 2	PA, QL (4 tabs every 1 day)
ORKAMBI TAB 200-125	Tier 2	PA, QL (4 tabs every 1 day)
PULMOZYME SOL 1MG/ML	Tier 2	QL (5 mL every 1 day)
SYMDEKO TAB 50-75MG	Tier 2	PA, QL (2 tabs every 1 day)
SYMDEKO TAB 100-150	Tier 2	PA, QL (2 tabs every 1 day)
TRIKAFTA PAK 59.5MG	Tier 2	PA, QL (2 packets every 1 day)
TRIKAFTA PAK 75MG	Tier 2	PA, QL (2 packets every 1 day)
TRIKAFTA TAB	Tier 2	PA, QL (3 tabs every 1 day)

PULMONARY FIBROSIS AGENTS

OFEV CAP 100MG	Tier 2	PA, QL (2 caps every 1 day)
OFEV CAP 150MG	Tier 2	PA, QL (2 caps every 1 day)
<i>pirfenidone cap 267 mg (generic of ESBRIET)</i>	Tier 1	PA, QL (6 caps every 1 day)
<i>pirfenidone tab 267 mg (generic of ESBRIET)</i>	Tier 1	PA, QL (6 tabs every 1 day)
<i>pirfenidone tab 801 mg (generic of ESBRIET)</i>	Tier 1	PA, QL (3 tabs every 1 day)

TETRACYCLINES

TETRACYCLINES

<i>doxycycline hyclate cap 100 mg</i>	Tier 1	QL (4 caps every 1 day)
<i>doxycycline hyclate tab 20 mg</i>	Tier 1	QL (4 tabs every 1 day)
<i>doxycycline hyclate tab 100 mg</i>	Tier 1	QL (4 tabs every 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline monohydrate cap 50 mg</i>	Tier 1	QL (4 caps every 1 day)
<i>doxycycline monohydrate cap 100 mg</i>	Tier 1	QL (4 caps every 1 day)
<i>doxycycline monohydrate tab 50 mg</i>	Tier 1	QL (4 tabs every 1 day)
<i>doxycycline monohydrate tab 100 mg</i>	Tier 1	QL (4 tabs every 1 day)
<i>minocycline hcl cap 50 mg</i>	Tier 1	
<i>minocycline hcl cap 75 mg</i>	Tier 1	
<i>minocycline hcl cap 100 mg</i>	Tier 1	
<i>minocycline hcl tab 75 mg</i>	Tier 1	
<i>tetracycline hcl cap 250 mg</i>	Tier 1	QL (56 caps every 180 days)
<i>tetracycline hcl cap 500 mg</i>	Tier 1	QL (56 caps every 180 days)

THYROID AGENTS

ANTITHYROID AGENTS

<i>methimazole tab 5 mg</i>	Tier 1
<i>methimazole tab 10 mg</i>	Tier 1
<i>propylthiouracil tab 50 mg</i>	Tier 1

THYROID HORMONES

<i>ADTHYZA TAB 15MG</i>	Tier 2
<i>ADTHYZA TAB 30MG</i>	Tier 2
<i>ADTHYZA TAB 60MG</i>	Tier 2
<i>ADTHYZA TAB 90MG</i>	Tier 2
<i>ADTHYZA TAB 120MG</i>	Tier 2
<i>ARMOUR THYRO TAB 15MG</i>	Tier 2
<i>ARMOUR THYRO TAB 30MG</i>	Tier 2
<i>ARMOUR THYRO TAB 60MG</i>	Tier 2
<i>ARMOUR THYRO TAB 90MG</i>	Tier 2
<i>ARMOUR THYRO TAB 120MG</i>	Tier 2
<i>levothyroxine sodium tab 25 mcg (generic of SYNTHROID)</i>	Tier 1
<i>levothyroxine sodium tab 50 mcg (generic of SYNTHROID)</i>	Tier 1
<i>levothyroxine sodium tab 75 mcg (generic of SYNTHROID)</i>	Tier 1
<i>levothyroxine sodium tab 88 mcg (generic of SYNTHROID)</i>	Tier 1
<i>levothyroxine sodium tab 100 mcg (generic of SYNTHROID)</i>	Tier 1
<i>levothyroxine sodium tab 112 mcg (generic of SYNTHROID)</i>	Tier 1
<i>levothyroxine sodium tab 125 mcg (generic of SYNTHROID)</i>	Tier 1
<i>levothyroxine sodium tab 137 mcg (generic of SYNTHROID)</i>	Tier 1

Drug Name	Drug Tier	Requirements/Limits
<i>levothyroxine sodium tab 150 mcg (generic of SYNTROID)</i>	Tier 1	
<i>levothyroxine sodium tab 175 mcg (generic of SYNTROID)</i>	Tier 1	
<i>levothyroxine sodium tab 200 mcg (generic of SYNTROID)</i>	Tier 1	
<i>levothyroxine sodium tab 300 mcg (generic of SYNTROID)</i>	Tier 1	
<i>liothyronine sodium tab 5 mcg (generic of CYTOMEL)</i>	Tier 1	
<i>liothyronine sodium tab 25 mcg (generic of CYTOMEL)</i>	Tier 1	
<i>liothyronine sodium tab 50 mcg (generic of CYTOMEL)</i>	Tier 1	
NIVA THYROID TAB 15MG	Tier 2	
NIVA THYROID TAB 30MG	Tier 2	
NIVA THYROID TAB 60MG	Tier 2	
NIVA THYROID TAB 90MG	Tier 2	
NIVA THYROID TAB 120MG	Tier 2	
NP THYROID TAB 15MG	Tier 2	
NP THYROID TAB 30MG	Tier 2	
NP THYROID TAB 60MG	Tier 2	
NP THYROID TAB 90MG	Tier 2	
NP THYROID TAB 120MG	Tier 2	
RENTHYROID TAB 15MG	Tier 2	
RENTHYROID TAB 30MG	Tier 2	
RENTHYROID TAB 60MG	Tier 2	
RENTHYROID TAB 90MG	Tier 2	
RENTHYROID TAB 120MG	Tier 2	
THYROID TAB 15MG	Tier 2	
THYROID TAB 30MG	Tier 2	
THYROID TAB 60MG	Tier 2	
THYROID TAB 90MG	Tier 2	
THYROID TAB 120MG	Tier 2	

TOXOIDS

TOXOID COMBINATIONS

ADACEL INJ	Tier 2
BOOSTRIX INJ	Tier 2
INFANRIX INJ	Tier 2
KINRIX INJ	Tier 2
QUADRACEL INJ	Tier 2
QUADRACEL INJ 0.5ML	Tier 2
TET/DIP TOX INJ 2-2 LF	Tier 2
VAXELIS INJ	Tier 2

Drug Name	Drug Tier	Requirements/Limits
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine hcl cap 10 mg</i>	Tier 1	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	Tier 1	
<i>dicyclomine hcl tab 20 mg</i>	Tier 1	
<i>glycopyrrolate tab 1 mg</i>	Tier 1	
<i>glycopyrrolate tab 2 mg</i>	Tier 1	
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	Tier 1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	Tier 1	
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	Tier 1	
<i>hyoscyamine sulfate tab 0.125 mg</i>	Tier 1	
<i>methscopolamine bromide tab 5 mg</i>	Tier 1	
H-2 ANTAGONISTS		
<i>cimetidine tab 200 mg</i>	Tier 1	
<i>cimetidine tab 200 mg</i>	Tier 1	OTC
<i>cimetidine tab 300 mg</i>	Tier 1	
<i>cimetidine tab 400 mg</i>	Tier 1	
<i>cimetidine tab 800 mg</i>	Tier 1	
<i>famotidine for susp 40 mg/5ml</i>	Tier 1	
<i>famotidine tab 10 mg</i>	Tier 1	OTC
<i>famotidine tab 20 mg</i>	Tier 1	OTC
<i>famotidine tab 20 mg (generic of PEPCID)</i>	Tier 1	
<i>famotidine tab 40 mg (generic of PEPCID)</i>	Tier 1	
MISC. ANTI-ULCER		
<i>sucralfate tab 1 gm (generic of CARAFATE)</i>	Tier 1	
PROTON PUMP INHIBITORS		
<i>FIRST-OMEPRA SUS 2MG/ML</i>	Tier 2	
<i>lansoprazole cap delayed release 15 mg</i>	Tier 1	
<i>lansoprazole cap delayed release 15 mg</i>	Tier 1	OTC
<i>lansoprazole cap delayed release 30 mg</i>	Tier 1	
(generic of PREVACID)		
<i>omeprazole cap delayed release 10 mg</i>	Tier 1	
<i>omeprazole cap delayed release 20 mg</i>	Tier 1	
<i>omeprazole cap delayed release 40 mg</i>	Tier 1	
<i>pantoprazole sodium ec tab 20 mg (base equiv) (generic of PROTONIX)</i>	Tier 1	
<i>pantoprazole sodium ec tab 40 mg (base equiv) (generic of PROTONIX)</i>	Tier 1	
<i>rabeprazole sodium ec tab 20 mg (generic of ACIPHEX)</i>	Tier 1	
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol tab 100 mcg (generic of CYTOTEC)</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>misoprostol tab 200 mcg (generic of CYTOTEC)</i>	Tier 1	
ULCER THERAPY COMBINATIONS		
KONVOMEPSUS 2-84/ML	Tier 2	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	Tier 1	QL (1 tab every 1 day)
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	Tier 1	QL (1 tab every 1 day)
<i>oxybutynin chloride solution 5 mg/5ml</i>	Tier 1	
<i>oxybutynin chloride tab 5 mg</i>	Tier 1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	Tier 1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	Tier 1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	Tier 1	
OXYTROL DIS 3.9MG/24	Tier 2	
OXYTROL/WOMN DIS 3.9MG/24	Tier 2	OTC
<i>solifenacina succinate tab 5 mg (generic of VESICARE)</i>	Tier 1	QL (1 tab every 1 day)
<i>solifenacina succinate tab 10 mg (generic of VESICARE)</i>	Tier 1	QL (1 tab every 1 day)
<i>tolterodine tartrate cap er 24hr 2 mg</i>	Tier 1	QL (1 cap every 1 day)
<i>tolterodine tartrate cap er 24hr 4 mg</i>	Tier 1	QL (1 cap every 1 day)
<i>tolterodine tartrate tab 1 mg</i>	Tier 1	QL (2 tabs every 1 day)
<i>tolterodine tartrate tab 2 mg (generic of DETROL)</i>	Tier 1	QL (2 tabs every 1 day)
<i>trospium chloride cap er 24hr 60 mg</i>	Tier 1	QL (1 cap every 1 day)
<i>trospium chloride tab 20 mg</i>	Tier 1	QL (2 tabs every 1 day)
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
<i>mirabegron tab er 24 hr 25 mg (generic of MYRBETRIQ)</i>	Tier 1	ST, PA, QL (1 tab every 1 day)
<i>mirabegron tab er 24 hr 50 mg (generic of MYRBETRIQ)</i>	Tier 1	ST, PA, QL (1 tab every 1 day)
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride tab 10 mg</i>	Tier 1	
<i>bethanechol chloride tab 25 mg</i>	Tier 1	
VACCINES		
BACTERIAL VACCINES		
<i>BEXSERO INJ</i>	Tier 2	
<i>CAPVAXIVE INJ 0.5ML</i>	Tier 2	QL (1 dose every fill)
<i>MENQUADFI INJ</i>	Tier 2	
<i>MENVEO INJ</i>	Tier 2	
<i>PEDVAX HIB INJ</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
PENBRAYA INJ	Tier 2	
PNEUMOVAX 23 INJ 25/0.5	Tier 2	
PREVNAR 13 INJ	Tier 2	
PREVNAR 20 INJ	Tier 2	
TRUMENBA INJ	Tier 2	
VIVOTIF CAP EC	Tier 2	QL (4 caps every year), AGE (Min 6)
VIRAL VACCINES		
ABRYSVO INJ	Tier 2	
ACAM2000 INJ	Tier 2	
AFLURIA INJ 2024-25	Tier 2	QL (1 dose every fill); Max 2 fills per year
AREXVY INJ 120MCG	Tier 2	
COMIRNATY INJ 30/0.3ML	Tier 2	QL (1 dose every fill)
ENGERIX-B INJ 10/0.5ML	Tier 2	
ENGERIX-B INJ 20MCG/ML	Tier 2	
FLUAD INJ	Tier 2	QL (1 dose every fill); Max 2 fills per year
FLUARIX INJ 2024-25	Tier 2	QL (1 dose every fill); Max 2 fills per year
FLUBLOK INJ	Tier 2	QL (1 dose every fill); Max 2 fills per year
FLUCELVAX INJ	Tier 2	QL (1 dose every fill); Max 2 fills per year
FLULAVAL INJ 2024-25	Tier 2	QL (1 dose every fill); Max 2 fills per year
FLUMIST NASA LIQ	Tier 2	QL (1 dose every fill); Max 2 fills per year
FLUZONE HD INJ	Tier 2	QL (1 dose every fill); Max 2 fills per year
FLUZONE INJ 2024-25	Tier 2	QL (1 dose every fill); Max 2 fills per year
GARDASIL 9 INJ	Tier 2	
HAVRIX INJ 720UNIT	Tier 2	
HAVRIX INJ 1440UNIT	Tier 2	
HEPLISAV-B INJ 20/0.5ML	Tier 2	
IPOP INJ INACTIVE	Tier 2	
JYNNEOS INJ	Tier 2	
M-M-R II INJ	Tier 2	
MODERNA COVID-19 INJ	Tier 2	QL (1 dose every fill)
MRESVIA INJ 50MCG	Tier 2	
NOVAVAX COVID-19 INJ	Tier 2	QL (1 dose every fill)
PFIZER COVID-19 INJ	Tier 2	QL (1 dose every fill)
PROQUAD INJ	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
SHINGRIX INJ 50/0.5ML	Tier 2	QL (2 injections in lifetime), AGE (Min 18)
SPIKEVAX INJ	Tier 2	QL (1 dose every fill)
TWINRIX INJ	Tier 2	AGE (Min 18)
VARIVAX INJ	Tier 2	

VAGINAL AND RELATED PRODUCTS

VAGINAL ANTI-INFECTIVES

<i>clindamycin phosphate vaginal cream 2% (generic of CLEOCIN)</i>	Tier 1	
<i>clotrimazole vaginal cream 1%</i>	Tier 1	OTC
<i>clotrimazole vaginal cream 2%</i>	Tier 1	OTC
<i>metronidazole vaginal gel 0.75%</i>	Tier 1	
<i>miconazole nitrate vaginal cream 2%</i>	Tier 1	OTC
<i>miconazole nitrate vaginal supp 200 mg & 2% cream 9 gm kit</i>	Tier 1	OTC
<i>terconazole vaginal cream 0.4%</i>	Tier 1	QL (45 gm every 30 days)
<i>terconazole vaginal cream 0.8%</i>	Tier 1	ST, PA
<i>terconazole vaginal suppos 80 mg</i>	Tier 1	ST, PA

VAGINAL ESTROGENS

<i>estradiol vaginal cream 0.1 mg/gm (generic of ESTRACE)</i>	Tier 1	
<i>estradiol vaginal tab 10 mcg (generic of VAGIFEM)</i>	Tier 1	

VASOPRESSORS

ANAPHYLAXIS THERAPY AGENTS

<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	Tier 1	QL (2 pens every 30 days)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (generic of EPIPEN 2-PAK)</i>	Tier 1	QL (2 pens every 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (generic of EPIPEN-JR 2-PAK)</i>	Tier 1	QL (2 pens every 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	Tier 1	QL (2 pens every 30 days)

NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS

<i>droxidopa cap 100 mg (generic of NORTHERA)</i>	Tier 1	PA, QL (6 caps every 1 day)
<i>droxidopa cap 200 mg (generic of NORTHERA)</i>	Tier 1	PA, QL (6 caps every 1 day)
<i>droxidopa cap 300 mg (generic of NORTHERA)</i>	Tier 1	PA, QL (6 caps every 1 day)

VASOPRESSORS

<i>EPINEPHRINE INJ 1MG/ML</i>	Tier 2	
<i>midodrine hcl tab 2.5 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
midodrine hcl tab 5 mg	Tier 1	
midodrine hcl tab 10 mg	Tier 1	

VITAMINS

OIL SOLUBLE VITAMINS

cholecalciferol cap 1.25 mg (50000 unit)	Tier 1	OTC
cholecalciferol cap 10 mcg (400 unit)	Tier 1	OTC; Available for 90 day fill
cholecalciferol cap 25 mcg (1000 unit)	Tier 1	OTC
cholecalciferol cap 50 mcg (2000 unit)	Tier 1	OTC
cholecalciferol cap 125 mcg (5000 unit)	Tier 1	OTC
cholecalciferol cap 250 mcg (10000 unit)	Tier 1	OTC
cholecalciferol chew tab 10 mcg (400 unit)	Tier 1	OTC
cholecalciferol chew tab 25 mcg (1000 unit)	Tier 1	OTC
cholecalciferol chew tab 50 mcg (2000 unit)	Tier 1	OTC
cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)	Tier 1	OTC
cholecalciferol tab 1.25 mg (50000 unit)	Tier 1	OTC
cholecalciferol tab 10 mcg (400 unit)	Tier 1	OTC; Available for 90 day fill
cholecalciferol tab 25 mcg (1000 unit)	Tier 1	OTC
cholecalciferol tab 50 mcg (2000 unit)	Tier 1	OTC
cholecalciferol tab 125 mcg (5000 unit)	Tier 1	OTC
ergocalciferol cap 1.25 mg (50000 unit) (generic of DRISDOL)	Tier 1	
ergocalciferol soln 200 mcg/ml (8000 unit/ml)	Tier 1	OTC
VIT A FISH CAP 7500UNIT	Tier 2	OTC
vitamin a cap 3 mg (10000 unit)	Tier 1	OTC
vitamin a cap 2400 mcg (8000 unit)	Tier 1	OTC
vitamin e cap 45 mg (100 unit)	Tier 1	OTC
vitamin e cap 90 mg (200 unit)	Tier 1	OTC
vitamin e cap 180 mg (400 unit)	Tier 1	OTC
vitamin e cap 268 mg (400 unit)	Tier 1	OTC
vitamin e cap 400 unit	Tier 1	OTC
vitamin e cap 450 mg (1000 unit)	Tier 1	OTC

WATER SOLUBLE VITAMINS

ascorbic acid chew tab 250 mg	Tier 1	OTC
ascorbic acid chew tab 500 mg	Tier 1	OTC
ascorbic acid liquid 500 mg/5ml	Tier 1	OTC
ascorbic acid tab 250 mg	Tier 1	OTC
ascorbic acid tab 500 mg	Tier 1	OTC
ascorbic acid tab 1000 mg	Tier 1	OTC
biotin cap 5 mg	Tier 1	OTC
biotin tab 5 mg	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>niacin tab 100 mg</i>	Tier 1	OTC
<i>niacin tab 250 mg</i>	Tier 1	OTC
<i>niacin tab 500 mg</i>	Tier 1	OTC
<i>pyridoxine hcl tab 25 mg</i>	Tier 1	OTC
<i>pyridoxine hcl tab 50 mg</i>	Tier 1	OTC
<i>pyridoxine hcl tab 100 mg</i>	Tier 1	OTC
<i>riboflavin tab 25 mg</i>	Tier 1	OTC
<i>riboflavin tab 100 mg</i>	Tier 1	OTC
<i>thiamine hcl tab 50 mg</i>	Tier 1	OTC
<i>thiamine hcl tab 100 mg</i>	Tier 1	OTC
<i>thiamine mononitrate tab 100 mg</i>	Tier 1	OTC; Available for 90 day fill
<i>thiamine mononitrate tab 250 mg</i>	Tier 1	OTC

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<i>baclofen tab 10 mg</i>	126	BENEFIX INJ 1000UNIT	106
<i>baclofen tab 20 mg</i>	126	BENEFIX INJ 2000UNIT	106
<i>baclofen tab 5 mg</i>	126	BENEFIX INJ 250UNIT	106
BACTRIM		BENEFIX INJ 300UNIT	106
see <i>sulfamethoxazole-trimethoprim tab</i>		BENEFIX INJ 500UNIT	106
<i>400-80 mg</i>	27		
BACTRIM DS		BENICAR	
see <i>sulfamethoxazole-trimethoprim tab</i>		see <i>olmesartan medoxomil tab 20 mg</i> ..52	
<i>800-160 mg</i>	27	see <i>olmesartan medoxomil tab 40 mg</i> ..52	
<i>balsalazide disodium cap 750 mg</i>	102	see <i>olmesartan medoxomil tab 5 mg</i>52	
BALVERSA TAB 3MG	60	BENICAR HCT	
BALVERSA TAB 4MG	60	see <i>olmesartan medoxomil-</i>	
BALVERSA TAB 5MG	60	<i>hydrochlorothiazide tab 20-12.5 mg</i> ..55	
BANZEL		see <i>olmesartan medoxomil-</i>	
see <i>rufinamide susp 40 mg/ml</i>	38	<i>hydrochlorothiazide tab 40-12.5 mg</i> ..55	
see <i>rufinamide tab 200 mg</i>	38	see <i>olmesartan medoxomil-</i>	
see <i>rufinamide tab 400 mg</i>	38	<i>hydrochlorothiazide tab 40-25 mg</i>55	
BAQSIMI ONE POW 3MG/DOSE	43	BENLYSTA INJ 120MG.....	124
BAQSIMI TWO POW 3MG/DOSE	43	BENLYSTA INJ 200MG/ML	124
BARACLUDE		BENLYSTA INJ 400MG.....	124
see <i>entecavir tab 0.5 mg</i>	74	BENZAMYCIN	
see <i>entecavir tab 1 mg</i>	74	see <i>benzoyl peroxide-erythromycin gel</i>	
BARACLUDE SOL.....	74	<i>5-3%</i>	85
<i>b-complex vitamin cap</i>	124	BENZNIDAZOLE TAB 100MG	27
<i>b-complex vitamin tab</i>	124	BENZNIDAZOLE TAB 12.5MG.....	27
<i>b-complex w/ c & folic acid cap 1 mg</i>	124	<i>benzocaine-menthol lozenge 15-2.6 mg</i> .124	
<i>b-complex w/ c tab</i>	124	<i>benzocaine-menthol lozenge 15-3.6 mg</i> .124	
BD MICROTAIN MIS LANCETS	116	<i>benzocaine-menthol lozenge 6-10 mg</i> ...124	
BELSOMRA TAB 10MG.....	114	<i>benzonatate cap 100 mg</i>	84
BELSOMRA TAB 15MG	114	<i>benzonatate cap 200 mg</i>	84
BELSOMRA TAB 20MG	114	<i>benzoyl peroxide-erythromycin gel 5-3%</i> 85	
BELSOMRA TAB 5MG.....	114	<i>benzoyl peroxide gel 10%</i>	85
<i>benazepril & hydrochlorothiazide tab 10-</i>		<i>benzoyl peroxide gel 5%</i>	85
<i>12.5 mg</i>	54	<i>benzoyl peroxide liq 10%</i>	85
<i>benazepril & hydrochlorothiazide tab 20-</i>		<i>benzoyl peroxide liq 4%</i>	85
<i>12.5 mg</i>	54	<i>benzoyl peroxide liq 5%</i>	85
<i>benazepril & hydrochlorothiazide tab 20-25</i>		<i>benzoyl peroxide lotion 10%</i>	85
<i>mg</i>	54	<i>benzoyl peroxide lotion 5%</i>	85
<i>benazepril & hydrochlorothiazide tab 5-</i>		<i>benztropine mesylate tab 0.5 mg</i>	65
<i>6.25 mg</i>	54	<i>benztropine mesylate tab 1 mg</i>	65
<i>benazepril hcl tab 10 mg</i>	51	<i>benztropine mesylate tab 2 mg</i>	65
<i>benazepril hcl tab 20 mg</i>	51	BESREMI SOL 500MCG	65
<i>benazepril hcl tab 40 mg</i>	51	BETADINE SPR 5%	71
		BETADINE SRG SOL 7.5%	71

<i>betamethasone dipropionate augmented cream 0.05%</i>	88
<i>betamethasone dipropionate augmented gel 0.05%</i>	88
<i>betamethasone dipropionate augmented lotion 0.05%</i>	88
<i>betamethasone dipropionate augmented oint 0.05%</i>	88
<i>betamethasone dipropionate cream 0.05%</i>	88
<i>betamethasone dipropionate lotion 0.05%</i>	88
<i>betamethasone dipropionate oint 0.05%</i>	88
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	88
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	88
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	88
BETAPACE	
see <i>sotalol hcl tab 120 mg</i>	76
see <i>sotalol hcl tab 160 mg</i>	76
see <i>sotalol hcl tab 80 mg</i>	76
<i>bethanechol chloride tab 10 mg</i>	140
<i>bethanechol chloride tab 25 mg</i>	140
BEVESPI AER 9-4.8MCG	32
<i>bexarotene cap 75 mg</i>	65
BEXZERO INJ	140
<i>bicalutamide tab 50 mg</i>	58
BICILLIN L-A INJ 2400000	131
BIKTARVY TAB	72
BIMZELX INJ 160MG/ML	87
BIMZELX INJ 320MG/2	87
BINAXNOW COV KIT HOME TES	93
<i>biotin cap 5 mg</i>	143
<i>biotin tab 5 mg</i>	143
<i>bisacodyl suppos 10 mg</i>	115
<i>bisacodyl tab delayed release 5 mg</i>	115
<i>bismuth subsalicylate chew tab 262 mg</i> ..	46
<i>bismuth subsalicylate susp 262 mg/15ml</i> 46	
<i>bismuth subsalicylate susp 525 mg/15ml</i> 46	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	54
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	54
<i>bisoprolol fumarate tab 10 mg</i>	75
<i>bisoprolol fumarate tab 5 mg</i>	75
BOOSTRIX INJ	138
<i>bosentan tab 125 mg</i>	79
<i>bosentan tab 62.5 mg</i>	79
BOSULIF CAP 100MG	60
BOSULIF CAP 50MG	60
BOSULIF TAB 100MG	60
BOSULIF TAB 400MG	60
BOSULIF TAB 500MG	60
BOTOX INJ 100UNIT	128
BOTOX INJ 200UNIT	128
BRAFTOVI CAP 75MG	60
BREO ELLIPTA INH 50-25MCG	32
BREXA FEMME TAB 150MG	48
<i>brimonidine tartrate ophth soln 0.2%</i>	129
BRIXADI SOL 128/0.36	25
BRIXADI SOL 16/0.32	25
BRIXADI SOL 24/0.48	25
BRIXADI SOL 32/0.64	25
BRIXADI SOL 64/0.18	25
BRIXADI SOL 8/0.16ML	25
BRIXADI SOL 96/0.27	25
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	66
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	66
<i>brompheniramine & pseudoephedrine elixir 1-15 mg/5ml</i>	84
BRONCHITOL CAP 40MG	136
BRONCHITOL CAP TOL TEST	136
BRUKINSA CAP 80MG	60
<i>budesonide delayed release particles cap 3 mg</i>	82
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	33
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	33
<i>budesonide inhalation susp 0.25 mg/2ml</i> 32	
<i>budesonide inhalation susp 0.5 mg/2ml</i> ..32	

<i>budesonide inhalation susp 1 mg/2ml</i>	32	<i>bupropion hcl tab er 12hr 150 mg</i>	39
<i>budesonide nasal susp 32 mcg/act</i>	127	<i>bupropion hcl tab er 12hr 200 mg</i>	39
<i>budesonide rectal foam 2 mg/act</i>	26	<i>bupropion hcl tab er 24hr 150 mg</i>	39
<i>budesonide tab er 24hr 9 mg</i>	82	<i>bupropion hcl tab er 24hr 300 mg</i>	40
<i>bumetanide tab 0.5 mg</i>	95	<i>buspirone hcl tab 10 mg</i>	29
<i>bumetanide tab 1 mg</i>	95	<i>buspirone hcl tab 15 mg</i>	29
<i>bumetanide tab 2 mg</i>	95	<i>buspirone hcl tab 30 mg</i>	29
BUMEX		<i>buspirone hcl tab 5 mg</i>	29
see <i>bumetanide tab 0.5 mg</i>	95	<i>buspirone hcl tab 7.5 mg</i>	29
BUPHENYL		<i>butalbital-acetaminophen-caffeine tab 50-</i>	
see <i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	99	<i>325-40 mg</i>	22
see <i>sodium phenylbutyrate tab 500 mg</i>	99	<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	25
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	25	<i>butalbital-acetaminophen tab 50-325 mg</i>	22
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	25	<i>butorphanol tartrate nasal soln 10 mg/ml</i>	26
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	25	BUTTRANS	
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	25	see <i>buprenorphine td patch weekly 10 mcg/hr</i>	26
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	25	see <i>buprenorphine td patch weekly 15 mcg/hr</i>	26
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	25	see <i>buprenorphine td patch weekly 20 mcg/hr</i>	26
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	25	see <i>buprenorphine td patch weekly 5 mcg/hr</i>	25
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	25	see <i>buprenorphine td patch weekly 7.5 mcg/hr</i>	26
<i>buprenorphine td patch weekly 10 mcg/hr</i>	26	BYLVAY CAP 1200MCG	102
<i>buprenorphine td patch weekly 15 mcg/hr</i>	26	BYLVAY CAP 200MCG	102
<i>buprenorphine td patch weekly 20 mcg/hr</i>	26	BYLVAY CAP 400MCG	102
<i>buprenorphine td patch weekly 5 mcg/hr</i>	25	BYLVAY CAP 600MCG	102
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	135	C	
<i>bupropion hcl tab 100 mg</i>	39	<i>CABENUVA SUS 400-600</i>	72
<i>bupropion hcl tab 75 mg</i>	39	<i>CABENUVA SUS 600-900</i>	72
<i>bupropion hcl tab er 12hr 100 mg</i>	39	<i>cabergoline tab 0.5 mg</i>	100

calcitriol cap 0.5 mcg	98
calcitriol oral soln 1 mcg/ml.....	98
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	104
calcium acetate (phosphate binder) tab 667 mg.....	104
calcium carb-cholecalciferol tab 600 mg- 20 mcg (800 unit)	120
CALCIUM CARB CHW 500MG	120
calcium carbonate (antacid) chew tab 400 mg.....	27
calcium carbonate (antacid) chew tab 500 mg.....	27
calcium carbonate (antacid) chew tab 750 mg.....	27
calcium carbonate-cholecalciferol tab 500 mg-5 mcg(200 unit)	120
calcium carbonate-cholecalciferol tab 600 mg-5 mcg(200 unit)	120
calcium carbonate tab 1250 mg (500 mg elemental ca).....	120
calcium carbonate tab 1500 mg (600 mg elemental ca).....	120
calcium carbonate-vitamin d cap 600 mg-5 mcg (200 unit).....	121
calcium carbonate-vitamin d tab 600 mg-5 mcg (200 unit).....	121
CALCIUM CARB TAB 648MG.....	27
CALCIUM CHW 500-10	121
calcium citrate tab 950 mg (200 mg elemental ca).....	121
calcium cit-vit d tab 200 mg-6.25 mcg(250 unit) (elem ca)	121
calcium cit-vit d tab 315 mg-6.25 mcg(250 unit) (elem ca)	121
calcium polycarbophil tab 625 mg	114
calcium tab 600 mg	121
CALQUENCE TAB 100MG.....	60
CAM LOT	90
camphor-menthol-methyl salicylate cream 4-10-30%	91
CAMZYOS CAP 10MG	78
CAMZYOS CAP 15MG.....	78
CAMZYOS CAP 2.5MG.....	78

CAMZYOS CAP 5MG	78
capecitabine tab 150 mg	56
capecitabine tab 500 mg	56
CAPRELSA TAB 100MG	60
CAPRELSA TAB 300MG	60
capsaicin cream 0.025%	91
capsaicin cream 0.075%	91
capsaicin cream 0.1%	91
CAPVAXIVE INJ 0.5ML.....	140
CARAFATE see sucralfate tab 1 gm	139
CARBAGLU see caglumic acid soluble tab 200 mg	98
carbamazepine cap er 12hr 100 mg	36
carbamazepine cap er 12hr 200 mg	36
carbamazepine cap er 12hr 300 mg	36
carbamazepine chew tab 100 mg	36
carbamazepine susp 100 mg/5ml	36
carbamazepine tab 200 mg.....	36
carbamazepine tab er 12hr 100 mg.....	36
carbamazepine tab er 12hr 200 mg	36
carbamazepine tab er 12hr 400 mg	36
carbamide peroxide 6.5% otic soln	131
CARBATROL see carbamazepine cap er 12hr 100 mg	36
see carbamazepine cap er 12hr 200 mg	36
see carbamazepine cap er 12hr 300 mg	36
carbidopa & levodopa tab 10-100 mg	66
carbidopa & levodopa tab 25-100 mg.....	66
carbidopa & levodopa tab 25-250 mg	66
carbidopa & levodopa tab er 25-100 mg ..	66
carbidopa-levodopa-entacapone tabs 12.5- 50-200 mg	66
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	66
carbidopa-levodopa-entacapone tabs 25- 100-200 mg.....	66
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	66
carbidopa-levodopa-entacapone tabs 37.5- 150-200 mg.....	66

<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	66	<i>cefixime cap 400 mg</i>	81																																																																																						
<i>carboxymethylcellulose sodium ophth soln 0.5%</i>	128	<i>cefpodoxime proxetil tab 100 mg</i>	81																																																																																						
CARDIZEM		<i>cefpodoxime proxetil tab 200 mg</i>	81																																																																																						
<i>see diltiazem hcl tab 120 mg</i>	77	<i>cefprozil for susp 125 mg/5ml</i>	80																																																																																						
<i>see diltiazem hcl tab 30 mg</i>	77	<i>cefprozil for susp 250 mg/5ml</i>	80																																																																																						
<i>see diltiazem hcl tab 60 mg</i>	77	<i>cefprozil tab 250 mg</i>	80																																																																																						
CARDIZEM CD		<i>cefprozil tab 500 mg</i>	80																																																																																						
<i>see diltiazem hcl coated beads cap er 24hr 120 mg</i>	76	<i>cefuroxime axetil tab 250 mg</i>	80																																																																																						
<i>see diltiazem hcl coated beads cap er 24hr 180 mg</i>	76	<i>cefuroxime axetil tab 500 mg</i>	80																																																																																						
<i>see diltiazem hcl coated beads cap er 24hr 240 mg</i>	76																																																																																								
<i>see diltiazem hcl coated beads cap er 24hr 300 mg</i>	77																																																																																								
<i>see diltiazem hcl coated beads cap er 24hr 360 mg</i>	77																																																																																								
CARDIZEM LA																																																																																									
<i>see diltiazem hcl tab er 24hr 360 mg</i>	77																																																																																								
CARDURA																																																																																									
<i>see doxazosin mesylate tab 1 mg</i>	53	CELEBREX																																																																																							
<i>see doxazosin mesylate tab 2 mg</i>	53	<i>see doxazosin mesylate tab 4 mg</i>	53	<i>see celecoxib cap 100 mg</i>	21	<i>see doxazosin mesylate tab 8 mg</i>	53	<i>see celecoxib cap 200 mg</i>	21	<i>see celecoxib cap 400 mg</i>	21	<i>carglumic acid soluble tab 200 mg</i>	98	<i>see celecoxib cap 50 mg</i>	21			CARNITOR				<i>see levocarnitine oral soln 1 gm/10ml (10%)</i>	98	CELEXA		<i>see levocarnitine tab 330 mg</i>	98	<i>see citalopram hydrobromide tab 10 mg (base equiv)</i>	40	<i>see citalopram hydrobromide tab 20 mg (base equiv)</i>	40	<i>carvedilol tab 12.5 mg</i>	75	<i>see citalopram hydrobromide tab 40 mg (base equiv)</i>	40			<i>carvedilol tab 25 mg</i>	75	CELLCEPT		<i>carvedilol tab 3.125 mg</i>	75	<i>see mycophenolate mofetil cap 250 mg</i>	123	<i>see mycophenolate mofetil for oral susp 200 mg/ml</i>	123	<i>carvedilol tab 6.25 mg</i>	75	<i>see mycophenolate mofetil tab 500 mg</i>	123			CASODEX				<i>see bicalutamide tab 50 mg</i>	58	<i>cephalexin cap 250 mg</i>	80	<i>cefadroxil cap 500 mg</i>	80	<i>cephalexin cap 500 mg</i>	80	<i>cefadroxil for susp 250 mg/5ml</i>	80	<i>cephalexin for susp 125 mg/5ml</i>	80	<i>cefadroxil for susp 500 mg/5ml</i>	80	<i>cephalexin for susp 250 mg/5ml</i>	80	<i>cefadroxil tab 1 gm</i>	80	CERAVE DAILY LOT MOIST	90	<i>cefdinir cap 300 mg</i>	81	CERDELGA CAP 84MG	110	<i>cefdinir for susp 125 mg/5ml</i>	81	CETAPHIL ADV LOT RELIEF	90	<i>cefdinir for susp 250 mg/5ml</i>	81	CETAPHIL DAY LOT ADVANCE	90
<i>see doxazosin mesylate tab 4 mg</i>	53	<i>see celecoxib cap 100 mg</i>	21																																																																																						
<i>see doxazosin mesylate tab 8 mg</i>	53	<i>see celecoxib cap 200 mg</i>	21	<i>see celecoxib cap 400 mg</i>	21	<i>carglumic acid soluble tab 200 mg</i>	98	<i>see celecoxib cap 50 mg</i>	21			CARNITOR				<i>see levocarnitine oral soln 1 gm/10ml (10%)</i>	98	CELEXA		<i>see levocarnitine tab 330 mg</i>	98	<i>see citalopram hydrobromide tab 10 mg (base equiv)</i>	40	<i>see citalopram hydrobromide tab 20 mg (base equiv)</i>	40	<i>carvedilol tab 12.5 mg</i>	75	<i>see citalopram hydrobromide tab 40 mg (base equiv)</i>	40			<i>carvedilol tab 25 mg</i>	75	CELLCEPT		<i>carvedilol tab 3.125 mg</i>	75	<i>see mycophenolate mofetil cap 250 mg</i>	123	<i>see mycophenolate mofetil for oral susp 200 mg/ml</i>	123	<i>carvedilol tab 6.25 mg</i>	75	<i>see mycophenolate mofetil tab 500 mg</i>	123			CASODEX				<i>see bicalutamide tab 50 mg</i>	58	<i>cephalexin cap 250 mg</i>	80	<i>cefadroxil cap 500 mg</i>	80	<i>cephalexin cap 500 mg</i>	80	<i>cefadroxil for susp 250 mg/5ml</i>	80	<i>cephalexin for susp 125 mg/5ml</i>	80	<i>cefadroxil for susp 500 mg/5ml</i>	80	<i>cephalexin for susp 250 mg/5ml</i>	80	<i>cefadroxil tab 1 gm</i>	80	CERAVE DAILY LOT MOIST	90	<i>cefdinir cap 300 mg</i>	81	CERDELGA CAP 84MG	110	<i>cefdinir for susp 125 mg/5ml</i>	81	CETAPHIL ADV LOT RELIEF	90	<i>cefdinir for susp 250 mg/5ml</i>	81	CETAPHIL DAY LOT ADVANCE	90						
<i>see celecoxib cap 200 mg</i>	21	<i>see celecoxib cap 400 mg</i>	21																																																																																						
<i>carglumic acid soluble tab 200 mg</i>	98	<i>see celecoxib cap 50 mg</i>	21			CARNITOR				<i>see levocarnitine oral soln 1 gm/10ml (10%)</i>	98	CELEXA		<i>see levocarnitine tab 330 mg</i>	98	<i>see citalopram hydrobromide tab 10 mg (base equiv)</i>	40	<i>see citalopram hydrobromide tab 20 mg (base equiv)</i>	40	<i>carvedilol tab 12.5 mg</i>	75	<i>see citalopram hydrobromide tab 40 mg (base equiv)</i>	40			<i>carvedilol tab 25 mg</i>	75	CELLCEPT		<i>carvedilol tab 3.125 mg</i>	75	<i>see mycophenolate mofetil cap 250 mg</i>	123	<i>see mycophenolate mofetil for oral susp 200 mg/ml</i>	123	<i>carvedilol tab 6.25 mg</i>	75	<i>see mycophenolate mofetil tab 500 mg</i>	123			CASODEX				<i>see bicalutamide tab 50 mg</i>	58	<i>cephalexin cap 250 mg</i>	80	<i>cefadroxil cap 500 mg</i>	80	<i>cephalexin cap 500 mg</i>	80	<i>cefadroxil for susp 250 mg/5ml</i>	80	<i>cephalexin for susp 125 mg/5ml</i>	80	<i>cefadroxil for susp 500 mg/5ml</i>	80	<i>cephalexin for susp 250 mg/5ml</i>	80	<i>cefadroxil tab 1 gm</i>	80	CERAVE DAILY LOT MOIST	90	<i>cefdinir cap 300 mg</i>	81	CERDELGA CAP 84MG	110	<i>cefdinir for susp 125 mg/5ml</i>	81	CETAPHIL ADV LOT RELIEF	90	<i>cefdinir for susp 250 mg/5ml</i>	81	CETAPHIL DAY LOT ADVANCE	90												
<i>see celecoxib cap 50 mg</i>	21																																																																																								
CARNITOR																																																																																									
<i>see levocarnitine oral soln 1 gm/10ml (10%)</i>	98	CELEXA																																																																																							
<i>see levocarnitine tab 330 mg</i>	98	<i>see citalopram hydrobromide tab 10 mg (base equiv)</i>	40	<i>see citalopram hydrobromide tab 20 mg (base equiv)</i>	40	<i>carvedilol tab 12.5 mg</i>	75	<i>see citalopram hydrobromide tab 40 mg (base equiv)</i>	40			<i>carvedilol tab 25 mg</i>	75	CELLCEPT		<i>carvedilol tab 3.125 mg</i>	75	<i>see mycophenolate mofetil cap 250 mg</i>	123	<i>see mycophenolate mofetil for oral susp 200 mg/ml</i>	123	<i>carvedilol tab 6.25 mg</i>	75	<i>see mycophenolate mofetil tab 500 mg</i>	123			CASODEX				<i>see bicalutamide tab 50 mg</i>	58	<i>cephalexin cap 250 mg</i>	80	<i>cefadroxil cap 500 mg</i>	80	<i>cephalexin cap 500 mg</i>	80	<i>cefadroxil for susp 250 mg/5ml</i>	80	<i>cephalexin for susp 125 mg/5ml</i>	80	<i>cefadroxil for susp 500 mg/5ml</i>	80	<i>cephalexin for susp 250 mg/5ml</i>	80	<i>cefadroxil tab 1 gm</i>	80	CERAVE DAILY LOT MOIST	90	<i>cefdinir cap 300 mg</i>	81	CERDELGA CAP 84MG	110	<i>cefdinir for susp 125 mg/5ml</i>	81	CETAPHIL ADV LOT RELIEF	90	<i>cefdinir for susp 250 mg/5ml</i>	81	CETAPHIL DAY LOT ADVANCE	90																										
<i>see citalopram hydrobromide tab 10 mg (base equiv)</i>	40	<i>see citalopram hydrobromide tab 20 mg (base equiv)</i>	40																																																																																						
<i>carvedilol tab 12.5 mg</i>	75	<i>see citalopram hydrobromide tab 40 mg (base equiv)</i>	40			<i>carvedilol tab 25 mg</i>	75	CELLCEPT		<i>carvedilol tab 3.125 mg</i>	75	<i>see mycophenolate mofetil cap 250 mg</i>	123	<i>see mycophenolate mofetil for oral susp 200 mg/ml</i>	123	<i>carvedilol tab 6.25 mg</i>	75	<i>see mycophenolate mofetil tab 500 mg</i>	123			CASODEX				<i>see bicalutamide tab 50 mg</i>	58	<i>cephalexin cap 250 mg</i>	80	<i>cefadroxil cap 500 mg</i>	80	<i>cephalexin cap 500 mg</i>	80	<i>cefadroxil for susp 250 mg/5ml</i>	80	<i>cephalexin for susp 125 mg/5ml</i>	80	<i>cefadroxil for susp 500 mg/5ml</i>	80	<i>cephalexin for susp 250 mg/5ml</i>	80	<i>cefadroxil tab 1 gm</i>	80	CERAVE DAILY LOT MOIST	90	<i>cefdinir cap 300 mg</i>	81	CERDELGA CAP 84MG	110	<i>cefdinir for susp 125 mg/5ml</i>	81	CETAPHIL ADV LOT RELIEF	90	<i>cefdinir for susp 250 mg/5ml</i>	81	CETAPHIL DAY LOT ADVANCE	90																																
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<i>carvedilol tab 6.25 mg</i>	75	<i>see mycophenolate mofetil tab 500 mg</i>	123			CASODEX				<i>see bicalutamide tab 50 mg</i>	58	<i>cephalexin cap 250 mg</i>	80	<i>cefadroxil cap 500 mg</i>	80	<i>cephalexin cap 500 mg</i>	80	<i>cefadroxil for susp 250 mg/5ml</i>	80	<i>cephalexin for susp 125 mg/5ml</i>	80	<i>cefadroxil for susp 500 mg/5ml</i>	80	<i>cephalexin for susp 250 mg/5ml</i>	80	<i>cefadroxil tab 1 gm</i>	80	CERAVE DAILY LOT MOIST	90	<i>cefdinir cap 300 mg</i>	81	CERDELGA CAP 84MG	110	<i>cefdinir for susp 125 mg/5ml</i>	81	CETAPHIL ADV LOT RELIEF	90	<i>cefdinir for susp 250 mg/5ml</i>	81	CETAPHIL DAY LOT ADVANCE	90																																																
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<i>cholecalciferol cap 125 mcg (5000 unit)</i>	143	<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	101
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.....	143		
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<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	40	<i>clindamycin phosphate gel 1% (twice-daily)</i>	85																																																																																																		
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	40	<i>clindamycin phosphate lotion 1%</i>	85																																																																																																		
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	40	<i>clindamycin phosphate soln 1%</i>	85																																																																																																		
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<i>clarithromycin for susp 250 mg/5ml</i>	115	<i>clarithromycin tab 250 mg</i>	115	(<i>refrig</i>) <i>gel 1.2 (1)-5%</i>	85	<i>clarithromycin tab 500 mg</i>	115	<i>clobazam suspension 2.5 mg/ml</i>	35	CLEOCIN		<i>clobazam tab 10 mg</i>	35	see <i>clindamycin hcl cap 150 mg</i>	28	<i>clobazam tab 20 mg</i>	35	see <i>clindamycin hcl cap 300 mg</i>	28	<i>clobetasol propionate cream 0.05%</i>	88	see <i>clindamycin phosphate vaginal cream 2%</i>	142	<i>clobetasol propionate emollient base cream 0.05%</i>	89	CLEOCIN PEDIATRIC GRANULE		<i>clobetasol propionate oint 0.05%</i>	89	see <i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	28	<i>clobetasol propionate soln 0.05%</i>	89	CLEOCIN-T		<i>clomipramine hcl cap 25 mg</i>	42	see <i>clindamycin phosphate lotion 1%</i>	85	<i>clomipramine hcl cap 50 mg</i>	42	CLIMARA		<i>clomipramine hcl cap 75 mg</i>	42	see <i>estradiol td patch weekly 0.025 mg/24hr</i>	101	<i>clonazepam tab 0.5 mg</i>	35	see <i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	101	<i>clonazepam tab 1 mg</i>	35	see <i>estradiol td patch weekly 0.05 mg/24hr</i>	101	<i>clonazepam tab 2 mg</i>	35	see <i>estradiol td patch weekly 0.06 mg/24hr</i>	101	<i>clonidine hcl tab 0.1 mg</i>	52	see <i>estradiol td patch weekly 0.075 mg/24hr</i>	101	<i>clonidine hcl tab 0.2 mg</i>	52	see <i>estradiol td patch weekly 0.1 mg/24hr</i>	101	<i>clonidine hcl tab 0.3 mg</i>	52	CLINDAGEL		<i>clonidine hcl tab er 12hr 0.1 mg</i>	16	see <i>clindamycin phosphate gel 1% (once-daily)</i>	85	<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	110	<i>clindamycin hcl cap 150 mg</i>	28	<i>clotrimazole cream 1%</i>	86	<i>clindamycin hcl cap 300 mg</i>	28	<i>clotrimazole soln 1%</i>	86	<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	28	<i>clotrimazole troche 10 mg</i>	124	<i>clindamycin phosphate gel 1% (once-daily)</i>	85	<i>clotrimazole vaginal cream 1%</i>	142	CLOZARIL		<i>clotrimazole vaginal cream 2%</i>	142	see <i>clozapine tab 100 mg</i>	69	<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	86
<i>clarithromycin tab 250 mg</i>	115	(<i>refrig</i>) <i>gel 1.2 (1)-5%</i>	85																																																																																																		
<i>clarithromycin tab 500 mg</i>	115	<i>clobazam suspension 2.5 mg/ml</i>	35																																																																																																		
CLEOCIN		<i>clobazam tab 10 mg</i>	35																																																																																																		
see <i>clindamycin hcl cap 150 mg</i>	28	<i>clobazam tab 20 mg</i>	35																																																																																																		
see <i>clindamycin hcl cap 300 mg</i>	28	<i>clobetasol propionate cream 0.05%</i>	88																																																																																																		
see <i>clindamycin phosphate vaginal cream 2%</i>	142	<i>clobetasol propionate emollient base cream 0.05%</i>	89																																																																																																		
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CLINDAGEL		<i>clonidine hcl tab er 12hr 0.1 mg</i>	16																																																																																																		
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<i>clindamycin hcl cap 150 mg</i>	28	<i>clotrimazole cream 1%</i>	86																																																																																																		
<i>clindamycin hcl cap 300 mg</i>	28	<i>clotrimazole soln 1%</i>	86																																																																																																		
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CLOZARIL		<i>clotrimazole vaginal cream 2%</i>	142																																																																																																		
see <i>clozapine tab 100 mg</i>	69	<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	86																																																																																																		

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<i>imipramine hcl tab 25 mg</i>	42
<i>imipramine hcl tab 50 mg</i>	42
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INSULIN GLAR INJ 300/ML	45
INSULIN LISP INJ 100/ML	45
INSULIN LISP INJ JUNIOR	45
INSULIN LISP INJ PROTAMIN	45
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INSULIN SYRINGE/NEEDLE - RX	118	see <i>gefitinib tab 250 mg</i>	57
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INVEGA HAFYE INJ 1560MG	68	<i>isosorbide mononitrate tab er 24hr 30 mg</i>	28
INVEGA SUST INJ 117/0.75	68	<i>isosorbide mononitrate tab er 24hr 60 mg</i>	28
INVEGA SUST INJ 156MG/ML	68	<i>isotretinoin cap 10 mg</i>	85
INVEGA SUST INJ 234/1.5	68	<i>isotretinoin cap 20 mg</i>	85
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<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	33	<i>itraconazole oral soln 10 mg/ml</i>	48
<i>ipratropium bromide inhal soln 0.02%</i>	31	<i>ivabradine hcl tab 5 mg (base equiv)</i>	80
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	127	<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	80
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	127	<i>ivermectin lotion 0.5%</i>	93
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<i>see levetiracetam tab 250 mg</i>	37
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<i>see levetiracetam tab er 24hr 500 mg</i>	37
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KERENDIA TAB 20MG	99
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<i>ketoconazole tab 200 mg</i>	48
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<i>ketorolac tromethamine ophth soln 0.5%</i>	130
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<i>lacosamide tab 150 mg</i>	36
<i>lacosamide tab 200 mg</i>	37
<i>lacosamide tab 50 mg</i>	36
<i>lactase tab 3000 unit</i>	95
<i>lactic acid (ammonium lactate) cream 12%</i>	90
<i>lactic acid (ammonium lactate) lotion 12%</i>	90
<i>lactulose (encephalopathy) solution 10</i> <i>gm/15ml</i>	103
<i>lactulose solution 10 gm/15ml</i>	114
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<i>lamivudine oral soln 10 mg/ml</i>	73
<i>lamivudine tab 100 mg (hbv)</i>	74
<i>lamivudine tab 150 mg</i>	73
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<i>lamivudine-zidovudine tab 150-300 mg</i>	73
<i>lamotrigine tab 100 mg</i>	37
<i>lamotrigine tab 150 mg</i>	37
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<i>lamotrigine tab er 24hr 100 mg</i>	37
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<i>leucovorin calcium tab 25 mg</i>	65
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<i>levetiracetam tab 250 mg</i>	37
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<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	98
<i>levocarnitine tab 330 mg</i>	98
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<i>levocetirizine dihydrochloride tab 5 mg</i>	49
<i>levofloxacin oral soln 25 mg/ml</i>	101
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<i>levonorgestrel & ethynodiol dihydrogen ether (91-day) tab 0.15-0.03 mg</i>	81
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<i>lidocaine hcl gel 2%</i>	91
<i>lidocaine hcl soln 4%</i>	91
<i>lidocaine hcl urethral/mucosal gel 2%</i>	91
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<i>lidocaine hcl viscous soln 2%</i>	124
<i>lidocaine oint 5%</i>	92
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<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	15
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	15
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<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	54
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<i>lisinopril tab 40 mg</i>	52
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<i>lithium carbonate cap 150 mg</i>	67
<i>lithium carbonate cap 300 mg</i>	67
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<i>loratadine oral soln 5 mg/5ml</i>	49
<i>loratadine tab 10 mg</i>	49
<i>lorazepam tab 0.5 mg</i>	29
<i>lorazepam tab 1 mg</i>	29
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<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	54
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SOHONOS CAP 1MG	127
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SOHONOS CAP 5MG	127
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<i>solifenacin succinate tab</i> 5 mg	140
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<i>sotalol hcl tab</i> 120 mg	76
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<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	95
<i>spironolactone tab</i> 100 mg	96
<i>spironolactone tab</i> 25 mg	96
<i>spironolactone tab</i> 50 mg	96
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see <i>dasatinib tab</i> 140 mg	60
see <i>dasatinib tab</i> 20 mg	60
see <i>dasatinib tab</i> 50 mg	60
see <i>dasatinib tab</i> 70 mg	60
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see <i>buprenorphine hcl-naloxone hcl sl film</i> 4-1 mg (<i>base equiv</i>)	25

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<i>sulindac tab</i> 200 mg	22
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<i>sumatriptan nasal spray</i> 5 mg/act	120
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<i>sumatriptan succinate tab</i> 25 mg.....	120
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<i>sunitinib malate cap</i> 12.5 mg (base equivalent)	64
<i>sunitinib malate cap</i> 25 mg (base equivalent)	64
<i>sunitinib malate cap</i> 37.5 mg (base equivalent)	64
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SYMDEKO TAB 50-75MG

SYMFI

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SYMTUZA TAB.....

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SYNAGIS INJ 50/0.5ML

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see <i>fluocinolone acetonide oint 0.025%</i>	89

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see <i>levothyroxine sodium tab</i> 112 mcg	137
see <i>levothyroxine sodium tab</i> 125 mcg	137
see <i>levothyroxine sodium tab</i> 137 mcg	137
see <i>levothyroxine sodium tab</i> 150 mcg	138

see *levothyroxine sodium tab* 175 mcg

see *levothyroxine sodium tab* 200 mcg

see *levothyroxine sodium tab* 25 mcg

see *levothyroxine sodium tab* 300 mcg

see *levothyroxine sodium tab* 50 mcg

see *levothyroxine sodium tab* 75 mcg

see <i>levothyroxine sodium tab 88 mcg</i>	137
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TABRECTA TAB 150MG	64
TABRECTA TAB 200MG	64
<i>tacrolimus cap 0.5 mg</i>	123
<i>tacrolimus cap 1 mg</i>	123
<i>tacrolimus cap 5 mg</i>	123
<i>tacrolimus oint 0.03%</i>	91
<i>tacrolimus oint 0.1%</i>	91
<i>tadalafil tab 20 mg (pah)</i>	79
TAFINLAR CAP 50MG.....	64
TAFINLAR CAP 75MG.....	64
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<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	131
TAGRISSO TAB 40MG.....	57
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TAKHYRO INJ 150MG/ML.....	110
TAKHYRO INJ 300/2ML.....	110
TALZENNA CAP 0.1MG	64
TALZENNA CAP 0.25MG	64
TALZENNA CAP 0.35MG	64
TALZENNA CAP 1MG	64
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see <i>oseltamivir phosphate cap 30 mg (base equiv)</i>	75
see <i>oseltamivir phosphate cap 45 mg (base equiv)</i>	75
see <i>oseltamivir phosphate cap 75 mg (base equiv)</i>	75
see <i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	75
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	58
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	59
<i>tamsulosin hcl cap 0.4 mg</i>	105
TARCEVA	
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<i>tazarotene cream 0.1%</i>	88
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see <i>carbamazepine tab er 12hr 200 mg</i> ..	36
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<i>telmisartan tab 20 mg</i>	52
<i>telmisartan tab 40 mg</i>	52
<i>telmisartan tab 80 mg</i>	52
<i>temazepam cap 15 mg</i>	113
<i>temazepam cap 30 mg</i>	113

<i>temozolomide cap 100 mg</i>	56	<i>tetrabenazine tab 25 mg</i>	134
<i>temozolomide cap 140 mg</i>	56	<i>tetracycline hcl cap 250 mg</i>	137
<i>temozolomide cap 180 mg</i>	56	<i>tetracycline hcl cap 500 mg</i>	137
<i>temozolomide cap 20 mg</i>	56	THALOMID CAP 100MG	122
<i>temozolomide cap 250 mg</i>	56	THALOMID CAP 50MG	122
<i>temozolomide cap 5 mg</i>	56	<i>theophylline tab er 12hr 300 mg</i>	34
<i>tenofovir disoproxil fumarate tab 300 mg</i>	73	<i>theophylline tab er 12hr 450 mg</i>	34
TENORETIC 100		<i>theophylline tab er 24hr 400 mg</i>	34
<i>see atenolol & chlorthalidone tab 100-25</i>		<i>theophylline tab er 24hr 600 mg</i>	34
<i>mg</i>	54	<i>thiamine hcl tab 100 mg</i>	144
TENORETIC 50		<i>thiamine hcl tab 50 mg</i>	144
<i>see atenolol & chlorthalidone tab 50-25</i>		<i>thiamine mononitrate tab 100 mg</i>	144
<i>mg</i>	54	<i>thiamine mononitrate tab 250 mg</i>	144
TENORMIN		THIOLA EC	
<i>see atenolol tab 100 mg</i>	75	<i>see tiopronin tab delayed release 100 mg</i>	
<i>see atenolol tab 25 mg</i>	75	<i>.....</i>	105
<i>see atenolol tab 50 mg</i>	75	<i>see tiopronin tab delayed release 300 mg</i>	
TEPEZZA INJ 500MG	97	<i>.....</i>	105
TEPMETKO TAB 225MG	64	<i>thioridazine hcl tab 100 mg</i>	70
<i>terazosin hcl cap 10 mg (base equivalent)</i>	53	<i>thioridazine hcl tab 25 mg</i>	70
<i>terazosin hcl cap 1 mg (base equivalent)</i>	53	<i>thioridazine hcl tab 50 mg</i>	70
<i>terazosin hcl cap 2 mg (base equivalent)</i>	53	<i>thiothixene cap 10 mg</i>	71
<i>terazosin hcl cap 5 mg (base equivalent)</i>	53	<i>thiothixene cap 5 mg</i>	71
<i>terbinafine hcl cream 1%</i>	86	THRIVITE RX TAB 29-1MG	126
<i>terbinafine hcl tab 250 mg</i>	48	THYROID TAB 120MG	138
<i>terbutaline sulfate tab 2.5 mg</i>	33	THYROID TAB 15MG	138
<i>terbutaline sulfate tab 5 mg</i>	34	THYROID TAB 30MG	138
<i>terconazole vaginal cream 0.4%</i>	142	THYROID TAB 60MG	138
<i>terconazole vaginal cream 0.8%</i>	142	THYROID TAB 90MG	138
<i>terconazole vaginal suppos 80 mg</i>	142	TIAZAC	
<i>teriflunomide tab 14 mg</i>	135	<i>see diltiazem hcl extended release beads</i>	
<i>teriflunomide tab 7 mg</i>	135	<i>cap er 24hr 120 mg</i>	77
TERIPARATIDE INJ 620/2.48	96	<i>see diltiazem hcl extended release beads</i>	
TESTOPEL MIS PELLETS	26	<i>cap er 24hr 240 mg</i>	77
<i>testosterone cypionate im inj in oil 100</i>		<i>see diltiazem hcl extended release beads</i>	
<i>mg/ml</i>	26	<i>cap er 24hr 300 mg</i>	77
<i>testosterone cypionate im inj in oil 200</i>		<i>see diltiazem hcl extended release beads</i>	
<i>mg/ml</i>	26	<i>cap er 24hr 360 mg</i>	77
<i>testosterone enanthate im inj in oil 200</i>		<i>see diltiazem hcl extended release beads</i>	
<i>mg/ml</i>	26	<i>cap er 24hr 420 mg</i>	77
<i>testosterone td gel 12.5 mg/act (1%)</i>	26	TIBSOVO TAB 250MG	64
<i>testosterone td gel 50 mg/5gm (1%)</i>	26	<i>timolol maleate ophth gel forming soln</i>	
TET/DIP TOX INJ 2-2 LF	138	<i>0.25%</i>	129
tetrabenazine tab 12.5 mg	134		

<i>timolol maleate ophth gel forming soln</i>	
0.5%	129
<i>timolol maleate ophth soln 0.25%</i>	129
<i>timolol maleate ophth soln 0.5%</i>	129
<i>tinidazole tab 250 mg</i>	27
<i>tinidazole tab 500 mg</i>	27
<i>tiopronin tab delayed release 100 mg</i>	105
<i>tiopronin tab delayed release 300 mg</i>	105
<i>tiotropium bromide monohydrate inhal cap</i>	
18 mcg (base equiv).....	31
TIVICAY PD TAB 5MG	73
TIVICAY TAB 50MG	73
<i>tizanidine hcl tab 2 mg (base equivalent)</i> 127	
<i>tizanidine hcl tab 4 mg (base equivalent)</i> 127	
<i>tobramycin nebu soln 300 mg/5ml</i>	20
<i>tobramycin ophth soln 0.3%</i>	129
<i>tolnaftate cream 1%</i>	86
<i>tolterodine tartrate cap er 24hr 2 mg</i>	140
<i>tolterodine tartrate cap er 24hr 4 mg</i>	140
<i>tolterodine tartrate tab 1 mg</i>	140
<i>tolterodine tartrate tab 2 mg</i>	140
<i>tolvaptan tab therapy pack 15 mg</i>	100
<i>tolvaptan tab therapy pack 30 & 15 mg</i> ...100	
<i>tolvaptan tab therapy pack 45 & 15 mg</i> ...100	
<i>tolvaptan tab therapy pack 60 & 30 mg</i> ..100	
<i>tolvaptan tab therapy pack 90 & 30 mg</i> ..100	
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<i>topiramate sprinkle cap 15 mg</i>	38
<i>topiramate sprinkle cap 25 mg</i>	38
<i>topiramate tab 100 mg</i>	38
<i>topiramate tab 200 mg</i>	38
<i>topiramate tab 25 mg</i>	38
<i>topiramate tab 50 mg</i>	38
TOPROL XL	
see <i>metoprolol succinate tab er 24hr 100</i>	
<i>mg (tartrate equiv)</i>	75
see <i>metoprolol succinate tab er 24hr 200</i>	
<i>mg (tartrate equiv)</i>	75
see <i>metoprolol succinate tab er 24hr 25</i>	
<i>mg (tartrate equiv)</i>	75
see <i>metoprolol succinate tab er 24hr 50</i>	
<i>mg (tartrate equiv)</i>	75
toremifene citrate tab 60 mg (base	
<i>equivalent)</i>	59
torsemide tab 100 mg	96
torsemide tab 10 mg	96
torsemide tab 20 mg	96
torsemide tab 5 mg	96
TRACLEER	
see <i>bosentan tab 125 mg</i>	79
<i>see bosentan tab 62.5 mg</i>	79
TRACLEER TAB 32MG	79
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	
.....	25
<i>tramadol hcl tab 50 mg</i>	24
<i>tramadol hcl tab er 24hr 100 mg</i>	24
<i>tramadol hcl tab er 24hr 200 mg</i>	24
<i>tramadol hcl tab er 24hr 300 mg</i>	24
<i>tramadol hcl tab er 24hr biphasic release</i>	
<i>100 mg</i>	24
<i>tramadol hcl tab er 24hr biphasic release</i>	
<i>200 mg</i>	24
<i>tramadol hcl tab er 24hr biphasic release</i>	
<i>300 mg</i>	24
<i>trandolapril tab 1 mg</i>	52
<i>trandolapril tab 2 mg</i>	52
<i>trandolapril tab 4 mg</i>	52
<i>tranexamic acid tab 650 mg</i>	113
TRAVATAN Z	
<i>see travoprost ophth soln 0.004%</i>	
<i>(benzalkonium free) (bak free)</i>	131
<i>travoprost ophth soln 0.004%</i>	
<i>(benzalkonium free) (bak free)</i>	131
<i>trazodone hcl tab 100 mg</i>	41
<i>trazodone hcl tab 150 mg</i>	41
<i>trazodone hcl tab 50 mg</i>	41
TRELEGY AER 100MCG	34
TRELEGY AER 200MCG	34
TREMFYA CROH INJ 200/2ML	103
TREMFYA INJ 100MG/ML	88

TREMFYA INJ 200/2ML	103
treprostinil inj soln 100 mg/20ml (5 mg/ml)	79
treprostinil inj soln 200 mg/20ml (10 mg/ml)	79
treprostinil inj soln 20 mg/20ml (1 mg/ml)	79
treprostinil inj soln 50 mg/20ml (2.5 mg/ml)	79
tretinoin cap 10 mg	65
tretinoin cream 0.025%	85
tretinoin cream 0.05%	85
tretinoin cream 0.1%	85
tretinoin gel 0.01%	86
tretinoin gel 0.025%	86
triamicinolone acetonide cream 0.025%	89
triamicinolone acetonide cream 0.1%	89
triamicinolone acetonide cream 0.5%.....	89
triamicinolone acetonide dental paste 0.1%	124
triamicinolone acetonide lotion 0.025%....	89
triamicinolone acetonide lotion 0.1%	89
triamicinolone acetonide nasal aerosol suspension 55 mcg/act	127
triamicinolone acetonide oint 0.025%.....	89
triamicinolone acetonide oint 0.1%	89
triamicinolone acetonide oint 0.5%	89
triamterene & hydrochlorothiazide cap 37.5-25 mg	95
triamterene & hydrochlorothiazide tab 37.5- 25 mg	95
triamterene & hydrochlorothiazide tab 75- 50 mg	95
TRIBENZOR	
see olmesartan-amlodipine- hydrochlorothiazide tab 20-5-12.5 mg	55
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