

Prescription drug list.

This “drug list” is a summary of the most commonly prescribed drugs that your insurance plan covers. **PRO TIP:** If you log in to your member account, you can use our drug search tool to view all the drugs your plan covers (i.e. the complete “formulary”), and see the costs of different medications.

Drug costs

Your formulary is divided into tiers. In most cases, drugs on lower tiers will cost you less. Additionally, there are preventive medications, that vary by age and gender (e.g., contraception for women or fluoride tablets for children), that may be available to you at no-out-of-pocket cost.

Some maintenance medications that you use regularly for chronic conditions such as asthma or diabetes may have additional coverage that makes them less expensive for you. However, coverage varies by plan and the cost-sharing amounts you pay for different drug tiers or categories of medications are shown on your Member Payment Summary (MPS) or our online search tool.

You can also call Pharmacy Services to find out how much a drug costs, whether it is covered by your insurance, and whether preauthorization or other steps are required for coverage. Select Health members call **800-538-5038**.

The formulary is regularly updated

The contents of the formulary are reviewed each month by our team of doctors and pharmacists. This team reviews and evaluates the clinical efficacy, safety, and cost effectiveness of all medications and may remove drugs from, or add drugs to, this list. Please note that the inclusion of a drug in the formulary does not guarantee that a healthcare provider will prescribe that drug for you.

Noncovered drug exceptions

For drugs that are not covered, you, your physician, or your pharmacy may request coverage based on medical necessity. Requests are granted on a case-by-case basis. Use the Drug Coverage Exception Form found on our website.

LEGEND

(PA) Preauthorization

Coverage of drugs is based on medical necessity. For certain drugs, you will need preauthorization from us; otherwise, you will be responsible to pay the drug’s full retail price.

(ST) Step Therapy

Drugs that require step therapy are covered only after you have tried an alternative therapy and it didn’t work (i.e., the drug didn’t alleviate your symptoms or caused adverse reactions). Step therapy most often applies to brand-name drugs.

(QL) Quantity Limits

Quantity limitations apply to certain drugs (e.g., opioids). Preauthorization is required if the medication exceeds the plan limits.

(AGE) Age limit

A minimum or maximum age limit requirement must be met for coverage.

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This information is available for free in other languages and alternate formats by contacting:

Scripius: **800-442-3127** / Select Health: **800-538-5038**

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電

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RxCore Utah Standardized

Drug Name	Drug Tier	Requirements / Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS (CONTINUED)		
ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS		
<i>clonidine hcl er</i>	1	QL
<i>guanfacine hcl er</i>	1	
ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR		
<i>atomoxetine hcl</i>	1	QL
AMPHETAMINE MIXTURES		
<i>amphetamine-dextroamphet er</i>	1	QL
<i>amphetamine-dextroamphetamine</i>	1	QL
AMPHETAMINES		
<i>dextroamphetamine sulfate (2.5 mg tab, 7.5 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)</i>	2	QL
<i>dextroamphetamine sulfate (5 mg tab, 10 mg tab)</i>	1	QL
<i>dextroamphetamine sulfate er</i>	1	QL
<i>lisdexamfetamine dimesylate (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap, 50 mg cap, 60 mg cap, 70 mg cap)</i>	1	QL
ANALEPTICS		
<i>caffeine citrate</i>	1	QL
STIMULANTS - MISC.		
<i>armodafinil</i>	1	QL
<i>dexmethylphenidate hcl</i>	1	QL
<i>dexmethylphenidate hcl er</i>	1	QL
<i>methylphenidate hcl (2.5 mg chew tab, 5 mg chew tab, 5 mg tab, 5 mg/5ml solution, 10 mg chew tab, 10 mg tab, 10 mg/5ml solution, 20 mg tab)</i>	1	QL
METHYLPHENIDATE HCL ER (10 MG TAB ER, 18 MG TAB ER, 18 MG TAB ER 24H, 20 MG TAB ER, 27 MG TAB ER, 27 MG TAB ER 24H, 36 MG TAB ER, 36 MG TAB ER 24H, 54 MG TAB ER, 54 MG TAB ER 24H)	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl er (cd)</i>	1	QL
<i>methylphenidate hcl er (la)</i>	1	QL
<i>methylphenidate hcl er (osm) (18 mg tab er, 27 mg tab er, 36 mg tab er, 54 mg tab er)</i>	1	QL
<i>modafinil</i>	1	QL
AMINOGLYCOSIDES (CONTINUED)		
<i>neomycin sulfate</i>	1	
TOBRAMYCIN 300 MG/5ML NEBU SOLN	4	QL, SUM7 (Specialty Pharmacy Lock)
<i>tobramycin 300 mg/5ml nebu soln</i>	4	QL
ANALGESICS - ANTI-INFLAMMATORY (CONTINUED)		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
AMJEVITA (10 MG/0.2ML SOLN PRSYR, 20 MG/0.2ML SOLN PRSYR, 40 MG/0.4ML SOLN A-INJ, 40 MG/0.4ML SOLN PRSYR, 80 MG/0.8ML SOLN A-INJ)	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
HADLIMA	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
HADLIMA PUSHTOUCH	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS		
RINVOQ (15 MG TAB ER 24H, 30 MG TAB ER 24H)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
RINVOQ 45 MG TAB ER 24H	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
RINVOQ LQ	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTIRHEUMATIC ANTIMETABOLITES		
OTREXUP (10 MG/0.4ML SOLN A-INJ, 12.5 MG/0.4ML SOLN A-INJ, 15 MG/0.4ML SOLN A-INJ, 17.5 MG/0.4ML SOLN A-INJ, 22.5 MG/0.4ML SOLN A-INJ, 25 MG/0.4ML SOLN A-INJ)	4	PA, QL

Drug Name	Drug Tier	Requirements / Limits
OTREXUP 20 MG/0.4ML SOLN A-INJ	2	QL
RASUVO	2	ST, QL
CYCLOOXYGENASE 2 (COX-2) INHIBITORS		
<i>celecoxib</i>	1	
INTERLEUKIN-6 RECEPTOR INHIBITORS		
TYENNE (162 MG/0.9ML SOLN A-INJ, 162 MG/0.9ML SOLN PRSYR)	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS		
<i>diclofenac-misoprostol</i>	2	
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>diclofenac potassium 50 mg tab</i>	1	
<i>diclofenac sodium (25 mg tab dr, 50 mg tab dr, 75 mg tab dr)</i>	1	
<i>diclofenac sodium er</i>	1	
<i>etodolac</i>	1	
<i>etodolac er</i>	1	
FENOPROFEN CALCIUM 600 MG TAB	1	
<i>flurbiprofen (50 mg tab, 100 mg tab)</i>	1	
<i>ibu</i>	1	
<i>ibuprofen (100 mg/5ml suspension, 200 mg/10ml suspension, 400 mg tab, 600 mg tab, 800 mg tab)</i>	1	
<i>indomethacin (25 mg cap, 50 mg cap)</i>	1	
<i>indomethacin 25 mg/5ml suspension</i>	1	AGE
<i>indomethacin er</i>	1	
<i>ketorolac tromethamine 10 mg tab</i>	1	QL
<i>mefenamic acid</i>	1	QL
<i>meloxicam (7.5 mg tab, 15 mg tab)</i>	1	
<i>nabumetone</i>	1	
<i>naproxen (250 mg tab, 375 mg tab, 500 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>naproxen 125 mg/5ml suspension</i>	1	AGE
<i>naproxen sodium (275 mg tab, 550 mg tab)</i>	1	
<i>oxaprozin 600 mg tab</i>	1	
<i>piroxicam</i>	1	
<i>sulindac</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA (20 MG TAB, 30 MG TAB)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
OTEZLA (4 X 10 & 51 X20 MG TAB THPK, 10 & 20 & 30 MG TAB THPK)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
OTEZLA XR	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
OTEZLA/OTEZLA XR INITIATION PK	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>leflunomide</i>	1	
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL (25 MG/0.5ML SOLN PRSYR, 25 MG/0.5ML SOLUTION, 50 MG/ML SOLN PRSYR)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ENBREL MINI	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ENBREL SURECLICK	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANALGESICS - NONNARCOTIC (CONTINUED)		
ANALGESICS-SEDATIVES		
<i>bac (butalbital-acetamin-caff)</i>	1	QL
<i>butalbital-acetaminophen (50-300 mg tab, 50-325 mg tab)</i>	1	QL
<i>butalbital-apap-caffeine 50-325-40 mg tab</i>	1	QL
<i>butalbital-aspirin-caffeine</i>	1	QL
SALICYLATES		
<i>adult aspirin regimen</i>	1	AGE, QL

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Drug Name	Drug Tier	Requirements / Limits
<i>aspirin (81 mg chew tab, 81 mg tab dr, 325 mg tab, 325 mg tab dr)</i>	1	AGE, QL
<i>aspirin 81</i>	1	AGE, QL
<i>aspirin adult low dose</i>	1	AGE, QL
<i>aspirin adult low strength</i>	1	AGE, QL
<i>aspirin childrens</i>	1	AGE, QL
<i>aspirin ec adult low dose</i>	1	AGE, QL
<i>aspirin ec low dose</i>	1	AGE, QL
<i>aspirin ec low strength</i>	1	AGE, QL
<i>aspirin low dose</i>	1	AGE, QL
<i>aspirin regimen</i>	1	AGE, QL
<i>bayer advanced aspirin reg st</i>	1	AGE, QL
<i>bayer aspirin</i>	1	AGE, QL
<i>bayer aspirin ec low dose</i>	1	AGE, QL
<i>bayer low dose</i>	1	AGE, QL
<i>childrens aspirin</i>	1	AGE, QL
<i>cvs aspirin</i>	1	AGE, QL
<i>cvs aspirin adult low dose</i>	1	AGE, QL
<i>cvs aspirin adult low strength</i>	1	AGE, QL
<i>cvs aspirin ec</i>	1	AGE, QL
<i>cvs aspirin low dose</i>	1	AGE, QL
<i>cvs aspirin low strength</i>	1	AGE, QL
<i>cvs genuine aspirin</i>	1	AGE, QL
<i>diflunisal</i>	1	
<i>ecotrin</i>	1	AGE, QL
<i>ecotrin arthrtis pain</i>	1	AGE, QL
<i>ecotrin low strength</i>	1	AGE, QL
<i>eq aspirin</i>	1	AGE, QL
<i>eq aspirin adult low dose</i>	1	AGE, QL

Drug Name	Drug Tier	Requirements / Limits
<i>eq aspirin low dose</i>	1	AGE, QL
<i>eql aspirin ec</i>	1	AGE, QL
<i>eql aspirin low dose</i>	1	AGE, QL
<i>ft aspirin</i>	1	AGE, QL
<i>ft aspirin low dose</i>	1	AGE, QL
<i>ft enteric coated aspirin</i>	1	AGE, QL
<i>genuine aspirin</i>	1	AGE, QL
<i>gnp adult aspirin low strength</i>	1	AGE, QL
<i>gnp aspirin</i>	1	AGE, QL
<i>gnp aspirin low dose</i>	1	AGE, QL
<i>goodsense aspirin</i>	1	AGE, QL
<i>goodsense aspirin adults</i>	1	AGE, QL
<i>goodsense aspirin low dose</i>	1	AGE, QL
<i>h-e-b aspirin</i>	1	AGE, QL
<i>hm adult aspirin</i>	1	AGE, QL
<i>hm aspirin</i>	1	AGE, QL
<i>hm aspirin ec</i>	1	AGE, QL
<i>hm aspirin ec low dose</i>	1	AGE, QL
<i>kls aspirin low dose</i>	1	AGE, QL
<i>kp aspirin</i>	1	AGE, QL
<i>medi-first aspirin</i>	1	AGE, QL
<i>medique aspirin</i>	1	AGE, QL
<i>meijer aspirin ec</i>	1	AGE, QL
<i>mm aspirin</i>	1	AGE, QL
<i>px aspirin</i>	1	AGE, QL
<i>px enteric aspirin</i>	1	AGE, QL
<i>qc aspirin</i>	1	AGE, QL
<i>qc aspirin low dose</i>	1	AGE, QL

Drug Name	Drug Tier	Requirements / Limits
<i>qc childrens aspirin</i>	1	AGE, QL
<i>qc enteric aspirin</i>	1	AGE, QL
<i>ra aspirin</i>	1	AGE, QL
<i>ra aspirin adult low dose</i>	1	AGE, QL
<i>ra aspirin adult low strength</i>	1	AGE, QL
<i>ra aspirin childrens</i>	1	AGE, QL
<i>ra aspirin ec</i>	1	AGE, QL
<i>ra aspirin ec adult low st</i>	1	AGE, QL
<i>ra pain relief aspirin</i>	1	AGE, QL
<i>salsalate</i>	1	
<i>sb aspirin</i>	1	AGE, QL
<i>sb aspirin ec</i>	1	AGE, QL
<i>sb childrens aspirin</i>	1	AGE, QL
<i>sb low dose asa ec</i>	1	AGE, QL
<i>sm aspirin</i>	1	AGE, QL
<i>sm aspirin adult low strength</i>	1	AGE, QL
<i>sm aspirin ec</i>	1	AGE, QL
<i>sm aspirin ec low strength</i>	1	AGE, QL
<i>sm aspirin low dose</i>	1	AGE, QL
<i>sm childrens aspirin</i>	1	AGE, QL
<i>st joseph aspirin</i>	1	AGE, QL
<i>st joseph low dose</i>	1	AGE, QL

ANALGESICS - OPIOID (CONTINUED)

CODEINE COMBINATIONS

ACETAMINOPHEN-CODEINE (120-12 MG/5ML SOLUTION, 300-30 MG/12.5ML SOLUTION)	1	
<i>acetaminophen-codeine (300-15 mg tab, 300-30 mg tab, 300-60 mg tab)</i>	1	QL
<i>ascomp-codeine</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>butalbital-apap-caff-cod 50-300-40-30 mg cap</i>	2	QL
<i>butalbital-apap-caff-cod 50-325-40-30 mg cap</i>	1	QL
<i>butalbital-asa-caff-codeine</i>	2	QL
HYDROCODONE COMBINATIONS		
<i>hydrocodone-acetaminophen (2.5-108 mg/5ml solution, 5-217 mg/10ml solution, 7.5-325 mg/15ml solution, 10-325 mg/15ml solution)</i>	1	
HYDROCODONE-ACETAMINOPHEN (2.5-325 MG TAB, 5-325 MG TAB, 7.5-325 MG TAB, 10-325 MG TAB)	1	QL
HYDROCODONE-IBUPROFEN (7.5-200 MG TAB, 10-200 MG TAB)	1	QL
OPIOID AGONISTS		
<i>codeine sulfate (15 mg tab, 30 mg tab, 60 mg tab)</i>	1	QL
DISKETS	1	QL
<i>fentanyl (25 mcg/hr patch 72hr, 50 mcg/hr patch 72hr, 75 mcg/hr patch 72hr, 100 mcg/hr patch 72hr)</i>	1	QL
<i>fentanyl 12 mcg/hr patch 72hr</i>	1	
FENTANYL CITRATE (200 MCG LOZ HANDLE, 400 MCG TAB, 600 MCG TAB, 800 MCG LOZ HANDLE, 800 MCG TAB, 1600 MCG LOZ HANDLE)	1	QL
HYDROMORPHONE HCL (1 MG/ML LIQUID, 2 MG TAB, 3 MG SUPPOS, 4 MG TAB, 8 MG TAB)	1	QL
<i>hydromorphone hcl er</i>	2	QL
MEPERIDINE HCL (50 MG TAB, 50 MG/5ML SOLUTION)	1	QL
<i>methadone hcl (5 mg tab, 10 mg tab, 40 mg tab sol)</i>	1	QL
METHADONE HCL (5 MG/5ML SOLUTION, 10 MG/5ML SOLUTION, 10 MG/ML CONC)	1	
<i>methadone hcl intensol</i>	1	
<i>methadose 40 mg tab sol</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>morphine sulfate (10 mg/5ml solution, 20 mg/5ml solution)</i>	1	
<i>morphine sulfate (15 mg tab, 30 mg tab)</i>	1	QL
MORPHINE SULFATE (CONCENTRATE) (100 MG/5ML SOLUTION)	1	
MORPHINE SULFATE ER (10 MG CAP ER 24H, 20 MG CAP ER 24H, 30 MG CAP ER 24H, 50 MG CAP ER 24H, 60 MG CAP ER 24H, 80 MG CAP ER 24H, 100 MG CAP ER 24H)	2	QL
<i>morphine sulfate er (15 mg tab er, 30 mg tab er, 60 mg tab er, 100 mg tab er, 200 mg tab er)</i>	1	QL
MORPHINE SULFATE ER BEADS	2	QL
<i>oxycodone hcl (5 mg cap, 5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)</i>	1	QL
<i>oxycodone hcl 100 mg/5ml conc</i>	1	PA
<i>oxycodone hcl 5 mg/5ml solution</i>	1	
<i>oxymorphone hcl</i>	2	QL
OXYMORPHONE HCL ER	3	QL
<i>tramadol hcl (50 mg tab, 100 mg tab)</i>	1	QL
TRAMADOL HCL (ER BIPHASIC)	1	QL
<i>tramadol hcl er (100 mg tab er 24h, 200 mg tab er 24h, 300 mg tab er 24h)</i>	1	QL
OPIOID COMBINATIONS		
<i>endocet</i>	1	QL
<i>oxycodone-acetaminophen (2.5-300 mg tab, 2.5-325 mg tab, 5-300 mg tab, 5-325 mg tab, 5-325 mg/5ml solution, 7.5-300 mg tab, 7.5-325 mg tab, 10-300 mg tab, 10-300 mg/5ml solution, 10-325 mg tab)</i>	1	QL
OPIOID PARTIAL AGONISTS		
BELBUCA	2	QL
BRIXADI	4	QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
BRIXADI (WEEKLY)	4	QL, SUM7 (Specialty Pharmacy Lock)
<i>buprenorphine</i>	2	QL
<i>buprenorphine hcl (2 mg sl tab, 8 mg sl tab)</i>	1	QL
<i>buprenorphine hcl-naloxone hcl</i>	1	QL
PENTAZOCINE-NALOXONE HCL	2	QL
SUBLOCADE	4	QL, SUM7 (Specialty Pharmacy Lock)
TRAMADOL COMBINATIONS		
<i>tramadol-acetaminophen</i>	1	QL
ANDROGENS-ANABOLIC (CONTINUED)		
ANDROGENS		
<i>danazol (50 mg cap, 100 mg cap)</i>	1	
<i>danazol 200 mg cap</i>	3	
<i>depo-testosterone</i>	1	QL
METHITEST	3	
<i>methyltestosterone</i>	1	
<i>testosterone (1.62 % gel, 20.25 mg/1.25gm (1.62%) gel, 20.25 mg/act (1.62%) gel, 25 mg/2.5gm (1%) gel, 40.5 mg/2.5gm (1.62%) gel, 50 mg/5gm (1%) gel)</i>	2	QL
TESTOSTERONE CYPIONATE (200 MG/ML SOLUTION)	1	QL
TESTOSTERONE ENANTHATE	1	QL
ANORECTAL AND RELATED PRODUCTS (CONTINUED)		
INTRARECTAL STEROIDS		
<i>budesonide (2 mg foam, 2 mg/act foam)</i>	1	ST, QL, SUM7 (Specialty Pharmacy Lock)
<i>hydrocortisone 100 mg/60ml enema</i>	2	
RECTAL ANESTHETIC/STEROIDS		
HYDROCORT-PRAMOXINE (PERIANAL)	1	

Drug Name	Drug Tier	Requirements / Limits
HYDROCORTISONE ACE-PRAMOXINE 1-1 % CREAM	1	
<i>lidocaine-hydrocort (perianal)</i>	1	
PROCTOFOAM HC	3	
RECTAL STEROIDS		
<i>hydrocortisone (perianal) 2.5 % cream</i>	1	
HYDROCORTISONE ACETATE 25 MG SUPPOS	1	
HYDROCORTISONE ACETATE 30 MG SUPPOS	2	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
ANTHELMINTICS (CONTINUED)		
<i>albendazole</i>	1	PA
<i>ivermectin 3 mg tab</i>	2	
<i>praziquantel</i>	2	
ANTI-INFECTIVE AGENTS - MISC. (CONTINUED)		
AEMCOLO	3	QL
FIRST-METRONIDAZOLE	3	
<i>metronidazole (125 mg tab, 250 mg tab, 500 mg tab)</i>	1	
METRONIDAZOLE BENZO+SYRSPEND	3	
<i>pentamidine isethionate</i>	2	
<i>tinidazole</i>	1	
<i>trimethoprim</i>	1	
XIFAXAN	3	PA
ANTI-INFECTIVE MISC. - COMBINATIONS		
<i>sulfamethoxazole-trimethoprim (200-40 mg/5ml suspension, 400-80 mg tab, 800-160 mg tab, 800-160 mg/20ml suspension)</i>	1	
<i>sulfatrim pediatric</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ANTIPROTOZOAL AGENTS		
<i>atovaquone</i>	2	
LAMPIT	3	PA, AGE
<i>nitazoxanide</i>	4	QL
GLYCOPEPTIDES		
<i>vancomycin hcl (125 mg cap, 250 mg cap)</i>	2	QL
<i>vancomycin hcl (25 mg/ml recon soln, 50 mg/ml recon soln, 250 mg/5ml recon soln)</i>	2	QL
LEPROSTATICS		
<i>dapsone (25 mg tab, 100 mg tab)</i>	1	
LINCOSAMIDES		
<i>clindamycin hcl</i>	1	
<i>clindamycin palmitate hcl</i>	1	
MONOBACTAMS		
CAYSTON	4	PA, QL
OXAZOLIDINONES		
<i>linezolid 100 mg/5ml recon susp</i>	1	QL
<i>linezolid 600 mg tab</i>	1	QL
URINARY ANTI-INFECTIVES		
<i>methenamine hippurate</i>	1	
NITROFURANTOIN (25 MG/5ML SUSPENSION, 50 MG/10ML SUSPENSION, 50 MG/5ML SUSPENSION)	2	AGE
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
ANTIANGINAL AGENTS (CONTINUED)		
ANTIANGINALS-OTHER		
<i>ranolazine er</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
NITRATES		
<i>isosorbide dinitrate (5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab)</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>isosorbide mononitrate er</i>	1	
NITRO-DUR (0.1 MG/HR PATCH 24HR, 0.2 MG/HR PATCH 24HR, 0.4 MG/HR PATCH 24HR, 0.6 MG/HR PATCH 24HR)	1	
<i>nitroglycerin (0.1 mg/hr patch 24hr, 0.2 mg/hr patch 24hr, 0.3 mg sl tab, 0.4 mg sl tab, 0.4 mg/hr patch 24hr, 0.4 mg/spray solution, 0.6 mg sl tab, 0.6 mg/hr patch 24hr)</i>	1	
ANTIANSXIETY AGENTS (CONTINUED)		
ANTIANSXIETY AGENTS - MISC.		
<i>bupirone hcl</i>	1	
<i>hydroxyzine hcl (10 mg tab, 10 mg/5ml syrup, 25 mg tab, 50 mg tab)</i>	1	
HYDROXYZINE PAMOATE (25 MG CAP, 50 MG CAP, 100 MG CAP)	1	
<i>meprobamate</i>	2	
BENZODIAZEPINES		
<i>alprazolam</i>	1	
<i>alprazolam er</i>	1	QL
<i>alprazolam xr</i>	1	QL
<i>chlordiazepoxide hcl</i>	1	
<i>clorazepate dipotassium (3.75 mg tab, 7.5 mg tab)</i>	1	QL
<i>clorazepate dipotassium 15 mg tab</i>	1	QL
<i>diazepam (2 mg tab, 5 mg tab, 5 mg/5ml solution, 5 mg/ml conc, 10 mg tab)</i>	1	
<i>diazepam intensol</i>	1	
<i>lorazepam (0.5 mg tab, 1 mg tab, 2 mg tab, 2 mg/ml conc)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>lorazepam intenzol</i>	1	
<i>oxazepam</i>	1	QL
ANTIARRHYTHMICS (CONTINUED)		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide phosphate</i>	2	
<i>quinidine gluconate er</i>	1	
QUINIDINE SULFATE	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine hcl</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate</i>	1	
<i>propafenone hcl</i>	1	
<i>propafenone hcl er</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone hcl (100 mg tab, 200 mg tab, 400 mg tab)</i>	1	
<i>dofetilide</i>	1	
MULTAQ	2	
<i>pacerone</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS (CONTINUED)		
ADRENERGIC COMBINATIONS		
AIRSUPRA	2	QL
ANORO ELLIPTA	2	QL
BREZTRI AEROSPHERE	2	AGE, QL
COMBIVENT RESPIMAT	2	QL
<i>fluticasone-salmeterol (100-50 mcg/act aer pow ba, 250-50 mcg/act aer pow ba, 500-50 mcg/act aer pow ba)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
FLUTICASONE-SALMETEROL (45-21 MCG/ACT AEROSOL, 115-21 MCG/ACT AEROSOL, 230-21 MCG/ACT AEROSOL)	3	PA, QL
FLUTICASONE-SALMETEROL (55-14 MCG/ACT AER POW BA, 113-14 MCG/ACT AER POW BA, 232-14 MCG/ACT AER POW BA)	1	QL
<i>ipratropium-albuterol</i>	1	
STIOLTO RESPIMAT	2	QL
SYMBICORT	1	QL
TRELEGY ELLIPTA	2	AGE, QL
<i>wixela inhub</i>	1	QL
ANTI-IGE MONOCLONAL ANTIBODIES		
XOLAIR (75 MG/0.5ML SOLN A-INJ, 75 MG/0.5ML SOLN PRSYR, 150 MG RECON SOLN, 150 MG/ML SOLN A-INJ, 150 MG/ML SOLN PRSYR, 300 MG/2ML SOLN A-INJ, 300 MG/2ML SOLN PRSYR)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium 20 mg/2ml nebu soln</i>	2	
BETA ADRENERGICS		
<i>albuterol sulfate (2 mg tab, 2 mg/5ml syrup, 4 mg tab, 8 mg/20ml syrup)</i>	1	
<i>albuterol sulfate hfa</i>	1	QL
<i>arformoterol tartrate</i>	2	QL
<i>formoterol fumarate</i>	3	QL
LEVALBUTEROL TARTRATE	1	QL
SEREVENT DISKUS	2	
STRIVERDI RESPIMAT	2	
<i>terbutaline sulfate (2.5 mg tab, 5 mg tab)</i>	2	QL
VENTOLIN HFA	2	QL
BRONCHODILATORS - ANTICHOLINERGICS		
<i>ipratropium bromide 0.02 % solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
SPIRIVA HANDIHALER	2	QL
SPIRIVA RESPIMAT	2	QL
INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)		
FASENRA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
FASENRA PEN	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
LEUKOTRIENE RECEPTOR ANTAGONISTS		
<i>montelukast sodium</i>	1	QL
<i>zafirlukast</i>	1	QL
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast</i>	1	QL
STEROID INHALANTS		
ARNUITY ELLIPTA	2	QL
ASMANEX (120 METERED DOSES)	2	QL
ASMANEX (14 METERED DOSES)	2	QL
ASMANEX (30 METERED DOSES)	2	QL
ASMANEX (60 METERED DOSES)	2	QL
ASMANEX HFA	2	QL
<i>budesonide (0.25 mg/2ml suspension, 0.5 mg/2ml suspension)</i>	2	QL
<i>budesonide 1 mg/2ml suspension</i>	1	QL
FLUTICASONE PROPIONATE DISKUS	2	QL
FLUTICASONE PROPIONATE HFA (44 MCG/ACT AEROSOL, 110 MCG/ACT AEROSOL, 220 MCG/ACT AEROSOL)	2	QL
THYMIC STROMAL LYMPHOPOIETIN (TSLP) ANTAGONISTS		
TEZSPIRE 210 MG/1.91ML SOLN A-INJ	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
XANTHINES		
<i>theophylline er (100 mg tab er 12h, 200 mg tab er 12h, 300 mg tab er 12h, 400 mg tab er 24h, 450 mg tab er 12h, 600 mg tab er 24h)</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
ANTICOAGULANTS (CONTINUED)		
COUMARIN ANTICOAGULANTS		
<i>jantoven</i>	1	
<i>warfarin sodium</i>	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS (0.15 MG CAP SPRINK, 0.5 MG TAB SOL)	2	AGE, QL
ELIQUIS (1.5 MG PACK)	2	AGE, QL
ELIQUIS (2 MG PACK)	2	AGE, QL
ELIQUIS (2.5 MG TAB, 5 MG TAB)	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL
XARELTO (2.5 MG TAB, 10 MG TAB, 20 MG TAB)	2	QL
XARELTO 1 MG/ML RECON SUSP	2	AGE, QL
XARELTO 15 MG TAB	2	QL
XARELTO STARTER PACK	2	QL
HEPARINS AND HEPARINOID-LIKE AGENTS		
<i>heparin sodium (porcine) (5000 unit/ml solution, 10000 unit/ml solution, 20000 unit/ml solution)</i>	2	
<i>heparin sodium (porcine) +rfid</i>	1	
<i>heparin sodium (porcine) 1000 unit/ml solution</i>	1	
<i>heparin sodium (porcine) pf 1000 unit/ml solution</i>	1	
<i>heparin sodium (porcine) pf 5000 unit/0.5ml solution</i>	2	
LOW MOLECULAR WEIGHT HEPARINS		
<i>enoxaparin sodium</i>	2	
SYNTHETIC HEPARINOID-LIKE AGENTS		
<i>fondaparinux sodium</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
THROMBIN INHIBITORS - SELECTIVE DIRECT & REVERSIBLE		
<i>dabigatran etexilate mesylate</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
ANTICONVULSANTS (CONTINUED)		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10 mg tab</i>	1	QL
<i>clobazam 2.5 mg/ml suspension</i>	1	QL
<i>clobazam 20 mg tab</i>	1	QL
<i>clonazepam (0.125 mg tab disp, 0.25 mg tab disp, 0.5 mg tab, 0.5 mg tab disp, 1 mg tab, 1 mg tab disp, 2 mg tab disp)</i>	1	QL
<i>clonazepam 2 mg tab</i>	1	QL
<i>diazepam (2.5 mg gel, 10 mg gel, 20 mg gel)</i>	1	QL
LIBERVANT	3	QL
NAYZILAM	3	QL
ANTICONVULSANTS - MISC.		
<i>carbamazepine (100 mg chew tab, 100 mg/5ml suspension, 200 mg chew tab, 200 mg tab, 200 mg/10ml suspension)</i>	1	QL
<i>carbamazepine er (100 mg cap er 12h, 100 mg tab er 12h, 200 mg cap er 12h, 200 mg tab er 12h, 300 mg cap er 12h, 400 mg tab er 12h)</i>	1	QL
<i>epitol</i>	1	QL
<i>gabapentin (250 mg/5ml solution, 300 mg cap, 300 mg/6ml solution, 400 mg cap, 600 mg tab, 800 mg tab)</i>	1	QL
<i>gabapentin 100 mg cap</i>	1	QL
<i>lacosamide (10 mg/ml solution, 50 mg tab, 50 mg/5ml solution, 100 mg tab, 100 mg/10ml solution, 150 mg tab, 200 mg tab)</i>	1	QL
<i>lamotrigine (21 x 25 mg & 7 x 50 mg kit, 25 & 50 & 100 mg kit, 42 x 50 mg & 14x100 mg kit)</i>	1	
<i>lamotrigine (25 mg chew tab, 150 mg tab)</i>	1	QL
<i>lamotrigine (25 mg tab disp, 200 mg tab)</i>	1	QL
<i>lamotrigine (5 mg chew tab, 50 mg tab disp)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>lamotrigine 100 mg tab</i>	1	QL
<i>lamotrigine 100 mg tab disp</i>	1	QL
<i>lamotrigine 200 mg tab disp</i>	1	QL
<i>lamotrigine 25 mg tab</i>	1	QL
<i>lamotrigine er (100 mg tab er 24h, 200 mg tab er 24h, 250 mg tab er 24h, 300 mg tab er 24h)</i>	1	QL
<i>lamotrigine er (25 mg tab er 24h, 50 mg tab er 24h)</i>	1	QL
<i>levetiracetam (100 mg/ml solution, 500 mg/5ml solution)</i>	1	QL
<i>levetiracetam (500 mg tab, 750 mg tab, 1000 mg tab)</i>	1	QL
<i>levetiracetam 250 mg tab</i>	1	QL
<i>levetiracetam er</i>	1	QL
<i>oxcarbazepine (150 mg tab, 300 mg/5ml suspension)</i>	1	QL
<i>oxcarbazepine 300 mg tab</i>	1	QL
<i>oxcarbazepine 600 mg tab</i>	1	QL
<i>pregabalin (25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap, 200 mg cap, 225 mg cap, 300 mg cap)</i>	1	QL
<i>pregabalin 20 mg/ml solution</i>	1	
<i>primidone 250 mg tab</i>	1	QL
<i>primidone 50 mg tab</i>	1	QL
<i>roweepira</i>	1	QL
<i>rufinamide 200 mg tab</i>	2	QL
<i>rufinamide 40 mg/ml suspension</i>	2	QL
<i>rufinamide 400 mg tab</i>	2	QL
TEGRETOL-XR	3	ST, QL
TOPAMAX SPRINKLE 15 MG CAP SPRINK	3	ST, QL
TOPAMAX SPRINKLE 25 MG CAP SPRINK	3	ST, QL

Drug Name	Drug Tier	Requirements / Limits
<i>topiramate (25 mg cap sprinkle, 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab)</i>	1	QL
<i>topiramate 15 mg cap sprinkle</i>	1	QL
<i>topiramate 25 mg/ml solution</i>	3	AGE, QL
<i>zonisamide 100 mg cap</i>	1	QL
<i>zonisamide 25 mg cap</i>	1	QL
<i>zonisamide 50 mg cap</i>	1	QL
CARBAMATES		
<i>felbamate 400 mg tab</i>	1	QL
<i>felbamate 600 mg tab</i>	1	QL
<i>felbamate 600 mg/5ml suspension</i>	1	QL
XCOPRI (14 X 150 MG & 14 X200 MG TAB THPK, 14 X 50 MG & 14 X100 MG TAB THPK, 25 MG TAB, 50 MG TAB, 100 MG TAB)	3	QL
XCOPRI (150 MG TAB, 200 MG TAB)	3	QL
XCOPRI (250 MG DAILY DOSE)	3	QL
XCOPRI (350 MG DAILY DOSE)	3	QL
XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK	3	QL
GABA MODULATORS		
TIAGABINE HCL (12 MG TAB, 16 MG TAB)	1	QL
<i>tiagabine hcl 2 mg tab</i>	1	QL
<i>tiagabine hcl 4 mg tab</i>	1	QL
HYDANTOINS		
DILANTIN (30 MG CAP, 100 MG CAP, 125 MG/5ML SUSPENSION)	3	ST, QL
DILANTIN-125	3	ST, QL
<i>phenytek</i>	1	QL
<i>phenytoin (50 mg chew tab, 100 mg/4ml suspension, 125 mg/5ml suspension)</i>	1	QL
<i>phenytoin infatabs</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>phenytoin sodium extended (100 mg cap, 200 mg cap, 300 mg cap)</i>	1	QL
SUCCINIMIDES		
<i>ethosuximide (250 mg cap, 250 mg/5ml solution)</i>	1	QL
<i>methsuximide</i>	1	QL
VALPROIC ACID		
<i>divalproex sodium (125 mg cap dr, 125 mg tab dr)</i>	1	QL
<i>divalproex sodium (250 mg tab dr, 500 mg tab dr)</i>	1	QL
<i>divalproex sodium er</i>	1	QL
<i>valproic acid (250 mg cap, 250 mg/5ml solution, 500 mg/10ml solution)</i>	1	QL
ANTIDEPRESSANTS (CONTINUED)		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine</i>	1	
ANTIDEPRESSANTS - MISC.		
<i>bupropion hcl</i>	1	
<i>bupropion hcl er (sr)</i>	1	
<i>bupropion hcl er (xl) (150 mg tab er 24h, 300 mg tab er 24h)</i>	1	
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
PHENELZINE SULFATE	1	
<i>tranylcypromine sulfate</i>	2	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram hydrobromide (10 mg tab, 10 mg/5ml solution, 20 mg tab, 20 mg/10ml solution, 40 mg tab)</i>	1	
<i>escitalopram oxalate (5 mg tab, 5 mg/5ml solution, 10 mg tab, 10 mg/10ml solution, 20 mg tab)</i>	1	
<i>fluoxetine hcl (10 mg cap, 10 mg tab, 20 mg cap, 20 mg tab, 20 mg/5ml solution, 40 mg cap, 60 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
FLUOXETINE HCL 60 MG TAB	1	
FLUOXETINE HCL 90 MG CAP DR	1	ST, QL
<i>fluvoxamine maleate</i>	1	
<i>fluvoxamine maleate er</i>	3	ST, QL
<i>paroxetine hcl (10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab)</i>	1	
PAROXETINE HCL 10 MG/5ML SUSPENSION	1	
<i>paroxetine hcl er</i>	1	
<i>sertraline hcl (25 mg tab, 50 mg tab, 100 mg tab)</i>	1	
<i>sertraline hcl 20 mg/ml conc</i>	1	QL
SEROTONIN MODULATORS		
NEFAZODONE HCL (100 MG TAB, 150 MG TAB, 200 MG TAB, 250 MG TAB)	1	
<i>trazodone hcl (50 mg tab, 100 mg tab, 150 mg tab)</i>	1	
<i>vilazodone hcl</i>	1	
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate er</i>	1	
<i>duloxetine hcl (20 mg cp dr part, 30 mg cp dr part, 60 mg cp dr part)</i>	1	
<i>venlafaxine hcl</i>	1	
<i>venlafaxine hcl er</i>	1	
TRICYCLIC AGENTS		
<i>amitriptyline hcl</i>	1	
<i>amoxapine</i>	1	
<i>clomipramine hcl</i>	1	
<i>desipramine hcl</i>	1	
<i>doxepin hcl (10 mg cap, 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap)</i>	1	
<i>imipramine hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>nortriptyline hcl (10 mg cap, 10 mg/5ml solution, 25 mg cap, 50 mg cap, 75 mg cap)</i>	1	
<i>protriptyline hcl</i>	2	
<i>trimipramine maleate</i>	1	
ANTIDIABETICS (CONTINUED)		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose</i>	1	
MIGLITOL	1	
BIGUANIDES		
<i>metformin hcl (500 mg tab, 500 mg/5ml solution, 850 mg tab, 1000 mg tab)</i>	1	
<i>metformin hcl 750 mg tab</i>	1	
<i>metformin hcl er</i>	1	
DIABETIC OTHER		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
<i>diazoxide</i>	3	
<i>glucagon emergency 1 mg recon soln</i>	1	
GVOKE HYPOPEN 1-PACK	2	
GVOKE HYPOPEN 2-PACK	2	
GVOKE KIT	2	
GVOKE PFS	2	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
ALOGLIPTIN BENZOATE	1	QL
<i>saxagliptin hcl</i>	1	QL
DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS		
ALOGLIPTIN-METFORMIN HCL	1	QL
<i>saxagliptin-metformin er</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
DPP-4 INHIBITOR-THIAZOLIDINEDIONE COMBINATIONS		
ALOGLIPTIN-PIOGLITAZONE (12.5-30 MG TAB, 25-15 MG TAB, 25-30 MG TAB, 25-45 MG TAB)	1	QL
HUMAN INSULIN		
FIASP	2	QL
FIASP FLEXTOUCH	2	QL
FIASP PENFILL	2	QL
FIASP PUMPCART	2	QL
HUMALOG	2	
HUMALOG JUNIOR KWIKPEN	2	
HUMALOG KWIKPEN 100 UNIT/ML SOLN PEN	2	
HUMALOG MIX 50/50 KWIKPEN	2	
HUMALOG MIX 75/25 KWIKPEN	2	
HUMALOG TEMPO PEN	2	
HUMULIN R U-500 (CONCENTRATED)	2	PA, QL
HUMULIN R U-500 KWIKPEN	2	PA, QL
INSULIN ASP PROT & ASP FLEXPEN	2	QL
INSULIN ASPART	2	QL
INSULIN ASPART FLEXPEN	2	QL
INSULIN ASPART PENFILL	2	QL
INSULIN ASPART PROT & ASPART	2	QL
INSULIN LISPRO	2	
INSULIN LISPRO (1 UNIT DIAL)	2	
INSULIN LISPRO JUNIOR KWIKPEN	2	
INSULIN LISPRO PROT & LISPRO	2	
LANTUS	2	QL
LANTUS SOLOSTAR	2	QL
NOVOLIN 70/30	1	QL

Drug Name	Drug Tier	Requirements / Limits
NOVOLIN N	1	QL
NOVOLOG	2	QL
NOVOLOG 70/30 FLEXPEN RELION	2	QL
NOVOLOG FLEXPEN	2	QL
NOVOLOG FLEXPEN RELION	2	QL
NOVOLOG MIX 70/30	2	QL
NOVOLOG MIX 70/30 FLEXPEN	2	QL
NOVOLOG MIX 70/30 RELION	2	QL
NOVOLOG PENFILL	2	QL
TOUJEO MAX SOLOSTAR	2	QL
TOUJEO SOLOSTAR	2	QL
INCRETIN MIMETIC AGENTS (GIP & GLP-1 RECEPTOR AGONISTS)		
MOUNJARO	2	PA, QL
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
TRULICITY	2	PA, QL
INSULIN-INCRETIN MIMETIC COMBINATIONS		
SOLIQUA	2	ST, QL
MEGLITINIDE ANALOGUES		
<i>nateglinide</i>	1	
<i>repaglinide</i>	1	
SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS		
QTERN	2	QL
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
BRENZAVVY	2	QL
FARXIGA	2	QL
SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB		
XIGDUO XR	2	QL

Drug Name	Drug Tier	Requirements / Limits
SULFONYLUREA-BIGUANIDE COMBINATIONS		
<i>glipizide-metformin hcl</i>	1	
<i>glyburide-metformin</i>	1	
SULFONYLUREAS		
<i>glimepiride (1 mg tab, 2 mg tab, 4 mg tab)</i>	1	
<i>glipizide (5 mg tab, 10 mg tab)</i>	1	
<i>glipizide er</i>	1	
<i>glipizide xl</i>	1	
<i>glyburide</i>	1	
GLYBURIDE MICRONIZED	1	
THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS		
<i>pioglitazone hcl-metformin hcl</i>	1	QL
THIAZOLIDINEDIONES		
<i>pioglitazone hcl</i>	1	QL
ANTIDIARRHEAL/PROBIOTIC AGENTS (CONTINUED)		
ANTIPERISTALTIC AGENTS		
<i>diphenoxylate-atropine (2.5-0.025 mg tab, 2.5-0.025 mg/5ml liquid)</i>	1	
ANTIDOTES AND SPECIFIC ANTAGONISTS (CONTINUED)		
ANTIDOTES - CHELATING AGENTS		
CHEMET	3	
<i>deferiprone</i>	1	
VISTOGARD	4	QL
OPIOID ANTAGONISTS		
<i>naloxone hcl (0.4 mg/ml soln cart, 0.4 mg/ml soln prsyr, 2 mg/2ml soln prsyr)</i>	1	
<i>naltrexone hcl</i>	1	
ANTIEMETICS (CONTINUED)		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron hcl 1 mg tab</i>	2	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>ondansetron (4 mg tab disp, 8 mg tab disp)</i>	1	QL
<i>ondansetron hcl (4 mg tab, 8 mg tab)</i>	1	QL
<i>ondansetron hcl 4 mg/5ml solution</i>	1	
ANTIEMETICS - ANTICHOLINERGIC		
ANTIVERT 50 MG TAB	3	
<i>meclizine hcl (12.5 mg tab, 25 mg tab, 50 mg tab)</i>	1	
<i>trimethobenzamide hcl</i>	1	
ANTIEMETICS - MISCELLANEOUS		
<i>dronabinol</i>	2	PA, QL
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant</i>	1	QL
EMEND 125 MG/5ML RECON SUSP	3	QL
ANTIFUNGALS (CONTINUED)		
<i>griseofulvin microsize 125 mg/5ml suspension</i>	1	
<i>griseofulvin microsize 500 mg tab</i>	2	
<i>griseofulvin ultramicrosize (125 mg tab, 250 mg tab)</i>	2	
<i>nystatin 500000 unit tab</i>	1	
<i>terbinafine hcl 250 mg tab</i>	1	QL
IMIDAZOLES		
<i>ketoconazole 200 mg tab</i>	1	
TRIAZOLES		
CRESEMBA 186 MG CAP	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
CRESEMBA 74.5 MG CAP	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>fluconazole (10 mg/ml recon susp, 40 mg/ml recon susp, 50 mg tab, 100 mg tab, 200 mg tab)</i>	1	
<i>fluconazole 150 mg tab</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>itraconazole 10 mg/ml solution</i>	1	
<i>itraconazole 100 mg cap</i>	1	QL
<i>posaconazole 100 mg tab dr</i>	4	
<i>posaconazole 40 mg/ml suspension</i>	4	PA, QL
<i>voriconazole 200 mg tab</i>	4	QL
<i>voriconazole 40 mg/ml recon susp</i>	4	QL
<i>voriconazole 50 mg tab</i>	4	QL
ANTIHISTAMINES (CONTINUED)		
ANTIHISTAMINES - ETHANOLAMINES		
CARBINOXAMINE MALEATE (4 MG TAB, 4 MG/5ML SOLUTION)	1	QL
ANTIHISTAMINES - NON-SEDATING		
DESLOMATADINE (2.5 MG TAB DISP, 5 MG TAB DISP)	1	QL
<i>levocetirizine dihydrochloride 2.5 mg/5ml solution</i>	1	
ANTIHISTAMINES - PHENOTHIAZINES		
<i>promethazine hcl (12.5 mg suppos, 25 mg suppos)</i>	1	
<i>promethazine hcl (6.25 mg/5ml solution, 12.5 mg tab, 12.5 mg/10ml solution, 25 mg tab, 50 mg tab)</i>	1	
<i>promethegan (12.5 mg suppos, 25 mg suppos)</i>	1	
ANTIHISTAMINES - PIPERIDINES		
<i>cyproheptadine hcl (2 mg/5ml syrup, 4 mg tab)</i>	1	QL
ANTIHYPERTENSIVES (CONTINUED)		
ACL INHIB-INTestinal CHOLESTEROL ABSORPTION INHIB COMB		
NEXLIZET	2	QL
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL	2	QL
ANTIHYPERTENSIVES - MISC.		
<i>icosapent ethyl</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>omega-3-acid ethyl esters</i>	1	QL
BILE ACID SEQUESTRANTS		
<i>cholestyramine 4 gm packet</i>	2	QL
<i>cholestyramine 4 gm/dose powder</i>	1	QL
<i>cholestyramine light (4 gm packet, 4 gm/dose powder)</i>	2	QL
<i>colesevelam hcl</i>	2	QL
<i>colestipol hcl (5 gm granules, 5 gm packet)</i>	1	
<i>colestipol hcl 1 gm tab</i>	1	QL
<i>prevalite (4 gm packet, 4 gm/dose powder)</i>	2	QL
FIBRIC ACID DERIVATIVES		
<i>fenofibrate (48 mg tab, 54 mg tab, 67 mg cap, 134 mg cap, 145 mg tab, 160 mg tab, 200 mg cap)</i>	1	QL
<i>fenofibrate micronized (43 mg cap, 67 mg cap, 134 mg cap, 200 mg cap)</i>	1	QL
<i>fenofibric acid (45 mg cap dr, 135 mg cap dr)</i>	1	QL
<i>gemfibrozil</i>	1	QL
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium (10 mg tab, 20 mg tab)</i>	1	QL
<i>atorvastatin calcium (40 mg tab, 80 mg tab)</i>	1	QL
<i>fluvastatin sodium</i>	1	ST, QL
<i>fluvastatin sodium er</i>	1	ST, AGE, QL
<i>lovastatin</i>	1	QL
<i>pitavastatin calcium</i>	1	ST, QL
<i>pravastatin sodium</i>	1	QL
<i>rosuvastatin calcium (20 mg tab, 40 mg tab)</i>	1	
<i>rosuvastatin calcium (5 mg tab, 10 mg tab)</i>	1	QL
<i>simvastatin (10 mg tab, 20 mg tab, 40 mg tab)</i>	1	QL
<i>simvastatin (5 mg tab, 80 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB		
<i>ezetimibe-simvastatin</i>	1	QL
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe</i>	1	QL
NICOTINIC ACID DERIVATIVES		
NIACIN (ANTIHYPERLIPIDEMIC)	1	QL
<i>niacin er (antihyperlipidemic)</i>	1	QL
PCSK9 INHIBITORS		
REPATHA	2	QL
REPATHA PUSHTRONEX SYSTEM	2	QL
REPATHA SURECLICK	2	QL
ANTIHYPERTENSIVES (CONTINUED)		
ACE INHIBITOR & CALCIUM CHANNEL BLOCKER COMBINATIONS		
<i>amlodipine besy-benazepril hcl</i>	1	
TRANDOLAPRIL-VERAPAMIL HCL ER	1	QL
ACE INHIBITORS		
<i>benazepril hcl</i>	1	
<i>captopril</i>	1	
<i>enalapril maleate (2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab)</i>	1	
<i>enalapril maleate 1 mg/ml solution</i>	2	AGE, QL
<i>fosinopril sodium</i>	1	
<i>lisinopril</i>	1	
<i>moexipril hcl</i>	1	
PERINDOPRIL ERBUMINE (2 MG TAB, 8 MG TAB)	1	
<i>perindopril erbumine 4 mg tab</i>	1	
<i>quinapril hcl</i>	1	
<i>ramipril</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>trandolapril</i>	1	
ACE INHIBITORS & THIAZIDE/THIAZIDE-LIKE		
<i>benazepril-hydrochlorothiazide</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
<i>fosinopril sodium-hctz</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
QUINAPRIL-HYDROCHLOROTHIAZIDE (10-12.5 MG TAB, 20-12.5 MG TAB, 20-25 MG TAB)	1	
AGENTS FOR PHEOCHROMOCYTOMA		
<i>phenoxybenzamine hcl</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES		
<i>amlodipine-valsartan-hctz</i>	1	QL
<i>olmesartan-amlodipine-hctz</i>	1	
ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB		
<i>amlodipine besylate-valsartan</i>	1	
<i>amlodipine-olmesartan</i>	1	
TELMISARTAN-AMLODIPINE	1	QL
ANGIOTENSIN II RECEPTOR ANTAG & THIAZIDE/THIAZIDE-LIKE		
<i>candesartan cilexetil-hctz</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>losartan potassium-hctz</i>	1	
<i>olmesartan medoxomil-hctz</i>	1	
<i>telmisartan-hctz</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil</i>	1	
<i>irbesartan</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>losartan potassium</i>	1	
<i>olmesartan medoxomil</i>	1	
<i>telmisartan</i>	1	
<i>valsartan (40 mg tab, 80 mg tab, 160 mg tab, 320 mg tab)</i>	1	
ANTIADRENERGICS - CENTRALLY ACTING		
<i>clonidine</i>	1	
<i>clonidine hcl (0.1 mg tab, 0.2 mg tab, 0.3 mg tab)</i>	1	
<i>guanfacine hcl</i>	1	
<i>methyldopa 250 mg tab</i>	1	
METHYLDOPA 500 MG TAB	1	
ANTIADRENERGICS - PERIPHERALLY ACTING		
<i>doxazosin mesylate</i>	1	
<i>prazosin hcl</i>	1	
<i>terazosin hcl</i>	1	
BETA BLOCKER & DIURETIC COMBINATIONS		
<i>atenolol-chlorthalidone</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	
<i>metoprolol-hydrochlorothiazide</i>	1	
DIRECT RENIN INHIBITORS		
<i>aliskiren fumarate</i>	2	QL
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone</i>	1	
VASODILATORS		
<i>hydralazine hcl (10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab)</i>	1	
<i>minoxidil</i>	1	
ANTIMALARIALS (CONTINUED)		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone-proguanil hcl</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
CHLOROQUINE PHOSPHATE (250 MG TAB, 500 MG TAB)	1	
<i>hydroxychloroquine sulfate</i>	1	
<i>mefloquine hcl</i>	1	
<i>primaquine phosphate</i>	1	
<i>pyrimethamine</i>	4	PA, QL
<i>quinine sulfate</i>	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS (CONTINUED)		
PYRIDOSTIGMINE BROMIDE 30 MG TAB	2	
<i>pyridostigmine bromide 60 mg tab</i>	1	
<i>pyridostigmine bromide 60 mg/5ml solution</i>	3	AGE
<i>pyridostigmine bromide er 180 mg tab er</i>	2	QL
ANTIMYCOBACTERIAL AGENTS (CONTINUED)		
<i>ethambutol hcl</i>	1	
<i>isoniazid (100 mg tab, 300 mg tab)</i>	1	
<i>pyrazinamide</i>	1	
<i>rifabutin</i>	3	
<i>rifampin (150 mg cap, 300 mg cap)</i>	1	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES (CONTINUED)		
ANDROGEN BIOSYNTHESIS INHIBITORS		
<i>abiraterone acetate 250 mg tab</i>	1	QL, SUM7 (Specialty Pharmacy Lock)
<i>abirtega</i>	1	QL, SUM7 (Specialty Pharmacy Lock)
ANTIADRENALS		
LYSODREN	3	QL
ANTIANDROGENS		
<i>bicalutamide</i>	1	QL
NUBEQA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
XTANDI	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTIESTROGENS		
<i>tamoxifen citrate</i>	1	QL
<i>toremifene citrate</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTIMETABOLITES		
<i>capecitabine</i>	1	QL
<i>mercaptopurine 2000 mg/100ml suspension</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>mercaptopurine 50 mg tab</i>	1	
METHOTREXATE SODIUM (1 GM RECON SOLN, 50 MG/2ML SOLUTION, 250 MG/10ML SOLUTION)	1	
<i>methotrexate sodium (pf) (1 gm/40ml solution, 50 mg/2ml solution, 250 mg/10ml solution)</i>	1	
<i>methotrexate sodium 2.5 mg tab</i>	1	
TABLOID	3	QL
ANTINEOPLASTIC - AKT INHIBITORS		
TRUQAP (160 MG TAB THPK, 200 MG TAB THPK)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
TRUQAP 200 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - ALK INHIBITORS		
ALECENSA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
LORBRENA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
XALKORI (20 MG CAP SPRINK, 50 MG CAP SPRINK, 150 MG CAP SPRINK)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
XALKORI (200 MG CAP, 250 MG CAP)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 10 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
VENCLEXTA 100 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
VENCLEXTA 50 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
VENCLEXTA STARTING PACK	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - BCR-ABL KINASE INHIBITORS		
<i>dasatinib (20 mg tab, 50 mg tab, 70 mg tab, 80 mg tab, 100 mg tab)</i>	4	QL, SUM7 (Specialty Pharmacy Lock)
<i>dasatinib 140 mg tab</i>	4	QL, SUM7 (Specialty Pharmacy Lock)
ICLUSIG	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>imatinib mesylate</i>	1	QL
<i>nilotinib hcl</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
SCEMBLIX (20 MG TAB, 40 MG TAB)	4	PA, QL
SCEMBLIX 100 MG TAB	4	PA, QL
ANTINEOPLASTIC - BRAF KINASE INHIBITORS		
TAFINLAR (50 MG CAP, 75 MG CAP)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ZELBORAF	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - BTK INHIBITORS		
BRUKINSA 160 MG TAB	4	PA, QL
BRUKINSA 80 MG CAP	4	PA, QL
CALQUENCE 100 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
IMBRUVICA (140 MG CAP, 420 MG TAB)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
IMBRUVICA 70 MG CAP	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
JAYPIRCA 100 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
JAYPIRCA 50 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib hcl</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>gefitinib</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
TAGRISSO	4	PA, QL, SUM7 (Specialty Pharmacy Site of Care Lock)
ANTINEOPLASTIC - FGFR KINASE INHIBITORS		
LYTGOBI (12 MG DAILY DOSE)	4	PA, QL
LYTGOBI (16 MG DAILY DOSE)	4	PA, QL
LYTGOBI (20 MG DAILY DOSE)	4	PA, QL
ANTINEOPLASTIC - GAMMA SECRETASE INHIBITORS		
OGSIVEO	4	PA, QL
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
ERIVEDGE	4	PA, QL
ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS		
FARYDAK	4	PA, QL
ZOLINZA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - IMMUNOMODULATORS		
<i>pomalidomide</i>	4	PA, QL
ANTINEOPLASTIC - KRAS INHIBITORS		
KRAZATI	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
LUMAKRAS	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - MEK INHIBITORS		
COTELLIC	4	PA, QL

Drug Name	Drug Tier	Requirements / Limits
MEKINIST 0.5 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
MEKINIST 2 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - MET INHIBITORS		
TEPMETKO	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS		
TAZVERIK	4	PA, QL
ANTINEOPLASTIC - MTOR KINASE INHIBITORS		
<i>everolimus (2 mg tab sol, 3 mg tab sol, 5 mg tab sol)</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>everolimus (2.5 mg tab, 7.5 mg tab, 10 mg tab)</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>everolimus 5 mg tab</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>torpenz (2.5 mg tab, 7.5 mg tab, 10 mg tab)</i>	1	PA, QL
<i>torpenz 5 mg tab</i>	4	PA, QL
ANTINEOPLASTIC - MULTIKINASE INHIBITORS		
CABOMETYX	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
COMETRIQ (100 MG DAILY DOSE)	4	PA, QL
COMETRIQ (140 MG DAILY DOSE)	4	PA, QL
COMETRIQ (60 MG DAILY DOSE)	4	PA, QL
<i>lapatinib ditosylate</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>pazopanib hcl 200 mg tab</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>sorafenib tosylate</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
STIVARGA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
<i>sunitinib malate</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
VANFLYTA	4	PA, QL
XOSPATA	4	PA, QL
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT	4	PA, QL
ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS		
ROZLYTREK (100 MG CAP, 200 MG CAP)	4	QL
ANTINEOPLASTIC COMBINATIONS		
INQOVI	4	PA, QL
LONSURF 15-6.14 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
LONSURF 20-8.19 MG TAB	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTINEOPLASTICS MISC.		
<i>hydroxyurea</i>	1	
MATULANE	3	
AROMATASE INHIBITORS		
<i>anastrozole</i>	1	QL
<i>exemestane</i>	1	QL
<i>letrozole</i>	1	QL
CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS		
IBRANCE	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
KISQALI (200 MG DOSE)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
KISQALI (400 MG DOSE)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
KISQALI (600 MG DOSE)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
VERZENIO	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
FOLIC ACID ANTAGONISTS RESCUE AGENTS		
<i>leucovorin calcium (5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab)</i>	1	QL
IMIDAZOTETRAZINES		
<i>temozolomide</i>	3	QL
ISOCITRATE DEHYDROGENASE 1 & 2 (IDH1 & IDH2) INHIBITORS		
VORANIGO	4	PA, QL
ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS		
REZLIDHIA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
JANUS ASSOCIATED KINASE (JAK) INHIBITORS		
JAKAFI	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
LHRH ANALOGS		
ELIGARD (22.5 MG KIT, 30 MG KIT, 45 MG KIT)	4	QL, SUM7 (Specialty Pharmacy Lock)
ELIGARD 7.5 MG KIT	4	SUM7 (Specialty Pharmacy Lock)
<i>leuprolide acetate</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
LEUPROLIDE ACETATE (3 MONTH)	4	QL
LUPRON DEPOT (3-MONTH)	4	QL, SUM7 (Specialty Pharmacy Lock)
LUPRON DEPOT (4-MONTH)	4	QL, SUM7 (Specialty Pharmacy Lock)
LUPRON DEPOT (6-MONTH)	4	QL, SUM7 (Specialty Pharmacy Lock)
LUTRATE DEPOT	4	QL, SUM7 (Specialty Pharmacy Lock)
ZOLADEX	4	QL, SUM7 (Specialty Pharmacy Lock)

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Drug Name	Drug Tier	Requirements / Limits
MITOTIC INHIBITORS		
ETOPOSIDE 50 MG CAP	1	
NITROGEN MUSTARDS AND RELATED ANALOGUES		
CYCLOPHOSPHAMIDE (25 MG CAP, 25 MG TAB, 50 MG CAP, 50 MG TAB)	1	
LEUKERAN	3	
NITROSOUREAS		
<i>lomustine</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS		
ZYDELIG	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS		
LYNPARZA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
TALZENNA	4	QL, SUM7 (Specialty Pharmacy Lock)
PROGESTINS-ANTINEOPLASTIC		
<i>megestrol acetate (20 mg tab, 40 mg tab, 40 mg/ml suspension, 400 mg/10ml suspension, 800 mg/20ml suspension)</i>	1	
RETINOIDS		
<i>tretinoin 10 mg cap</i>	4	QL
SELECTIVE ESTROGEN RECEPTOR DEGRADERS		
ORSERDU	4	PA, QL
SELECTIVE RETINOID X RECEPTOR AGONISTS		
<i>bexarotene 75 mg cap</i>	4	QL, SUM7 (Specialty Pharmacy Lock)
TOPOISOMERASE I INHIBITORS		
HYCAMTIN (0.25 MG CAP, 1 MG CAP)	4	QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
URINARY TRACT PROTECTIVE AGENTS		
<i>mesna 400 mg tab</i>	4	QL, SUM7 (Specialty Pharmacy Lock)
ANTIPARKINSON AND RELATED THERAPY AGENTS (CONTINUED)		
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	1	QL
<i>trihexyphenidyl hcl (2 mg tab, 5 mg tab)</i>	1	QL
TRIHEXYPHENIDYL HCL 0.4 MG/ML SOLUTION	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine hcl (100 mg cap, 100 mg tab)</i>	1	QL
<i>amantadine hcl (50 mg/5ml solution, 100 mg/10ml solution)</i>	1	
<i>bromocriptine mesylate</i>	2	QL
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline mesylate</i>	1	QL
<i>selegiline hcl</i>	1	QL
DECARBOXYLASE INHIBITORS		
<i>carbidopa</i>	2	
LEVODOPA COMBINATIONS		
<i>carbidopa-levodopa</i>	1	QL
<i>carbidopa-levodopa er (25-100 mg tab er, 50-200 mg tab er)</i>	1	QL
<i>carbidopa-levodopa-entacapone</i>	1	
NONERGOLINE DOPAMINE RECEPTOR AGONISTS		
<i>apomorphine hcl</i>	1	PA, QL
<i>pramipexole dihydrochloride</i>	1	QL
<i>pramipexole dihydrochloride er</i>	1	QL
<i>ropinirole hcl</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>ropinirole hcl er</i>	1	QL
PERIPHERAL COMT INHIBITORS		
<i>entacapone</i>	1	
ONGENTYS	3	QL
ANTIPSYCHOTICS/ANTIMANIC AGENTS (CONTINUED)		
ANTIMANIC AGENTS		
<i>lithium</i>	1	
<i>lithium carbonate (150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap)</i>	1	
<i>lithium carbonate er</i>	1	
ANTIPSYCHOTICS - MISC.		
<i>lurasidone hcl</i>	1	
<i>ziprasidone hcl</i>	1	
BENZISOXAZOLES		
ERZOFRI	4	QL, SUM7 (Specialty Pharmacy Lock)
FANAPT	4	PA, QL
FANAPT TITRATION PACK A	4	PA, QL
FANAPT TITRATION PACK B	4	PA, QL
FANAPT TITRATION PACK C	4	PA, QL
INVEGA HAFYERA 1092 MG/3.5ML SUSP PRSYR	4	QL, SUM7 (Specialty Pharmacy Lock)
INVEGA HAFYERA 1560 MG/5ML SUSP PRSYR	4	QL, SUM7 (Specialty Pharmacy Lock)
INVEGA SUSTENNA	4	QL, SUM7 (Specialty Pharmacy Lock)
INVEGA TRINZA	4	QL, SUM7 (Specialty Pharmacy Lock)
<i>paliperidone er</i>	1	QL
<i>risperidone (0.25 mg tab disp, 0.5 mg tab disp, 1 mg tab disp, 1 mg/ml solution, 2 mg tab disp, 3 mg tab disp, 4 mg tab disp)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>risperidone (0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab, 3 mg tab, 4 mg tab)</i>	1	
<i>risperidone microspheres er</i>	1	QL, SUM7 (Specialty Pharmacy Lock)
UZEDY (150 MG/0.42ML SUSP PRSYR, 200 MG/0.56ML SUSP PRSYR, 250 MG/0.7ML SUSP PRSYR)	4	QL, SUM7 (Specialty Pharmacy Lock)
UZEDY (50 MG/0.14ML SUSP PRSYR, 75 MG/0.21ML SUSP PRSYR, 125 MG/0.35ML SUSP PRSYR)	4	QL, SUM7 (Specialty Pharmacy Lock)
UZEDY 100 MG/0.28ML SUSP PRSYR	4	QL, SUM7 (Specialty Pharmacy Lock)
BUTYROPHENONES		
<i>haloperidol</i>	1	
<i>haloperidol lactate 2 mg/ml conc</i>	1	
DIBENZO-OXEPINO PYRROLES		
<i>asenapine maleate</i>	2	QL
DIBENZODIAZEPINES		
<i>clozapine (25 mg tab disp, 100 mg tab disp, 150 mg tab disp, 200 mg tab disp)</i>	1	QL
<i>clozapine (25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab)</i>	1	QL
<i>clozapine 12.5 mg tab disp</i>	1	
DIBENZOTHIAZEPINES		
<i>quetiapine fumarate (25 mg tab, 50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab, 300 mg tab, 400 mg tab)</i>	1	
<i>quetiapine fumarate er</i>	1	
DIBENZOXAZEPINES		
<i>loxapine succinate</i>	1	
DIHYDROINDOLONES		
MOLINDONE HCL	1	QL

Drug Name	Drug Tier	Requirements / Limits
PHENOTHIAZINES		
<i>chlorpromazine hcl (10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab)</i>	1	
<i>fluphenazine hcl (1 mg tab, 2.5 mg tab, 5 mg tab, 10 mg tab)</i>	1	
<i>perphenazine</i>	1	
<i>prochlorperazine</i>	1	
<i>prochlorperazine maleate</i>	1	
<i>thioridazine hcl</i>	1	
<i>trifluoperazine hcl</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY ASIMTUFII 720 MG/2.4ML PRSYR	4	QL, SUM7 (Specialty Pharmacy Lock)
ABILIFY ASIMTUFII 960 MG/3.2ML PRSYR	4	QL, SUM7 (Specialty Pharmacy Lock)
ABILIFY MAINTENA	4	QL, SUM7 (Specialty Pharmacy Lock)
<i>aripiprazole (1 mg/ml solution, 10 mg tab disp, 15 mg tab disp)</i>	1	QL
<i>aripiprazole (2 mg tab, 5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)</i>	1	
THIENBENZODIAZEPINES		
<i>olanzapine (2.5 mg tab, 5 mg tab, 5 mg tab disp, 7.5 mg tab, 10 mg tab, 10 mg tab disp, 15 mg tab, 15 mg tab disp, 20 mg tab, 20 mg tab disp)</i>	1	
<i>olanzapine 10 mg recon soln</i>	1	QL, SUM7 (Specialty Pharmacy Lock)
ZYPREXA RELPREVV	4	QL, SUM7 (Specialty Pharmacy Lock)
THIOXANTHENES		
<i>thiothixene</i>	1	
ANTIVIRALS (CONTINUED)		
ANTIRETROVIRAL COMBINATIONS		
<i>abacavir sulfate-lamivudine</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
BIKTARVY	4	QL
CIMDUO	4	QL
DELSTRIGO	4	QL
DESCOVY	4	QL
DOVATO	4	QL
<i>efavirenz-emtricitab-tenofo df</i>	1	QL
EFAVIRENZ-LAMIVUDINE-TENOFOVIR (400-300-300 MG TAB, 600-300-300 MG TAB)	1	QL
<i>emtricitab-rilpivir-tenofov df</i>	4	QL
<i>emtricitabine-tenofov df</i>	1	QL
EVOTAZ	4	QL
GENVOYA	4	QL
JULUCA	4	QL
<i>lamivudine-zidovudine</i>	1	QL
<i>lopinavir-ritonavir (100-25 mg tab, 200-50 mg tab, 400-100 mg/5ml solution)</i>	1	QL
ODEFSEY	4	QL
PREZCOBIX	4	QL
STRIBILD	4	QL
SYMTUZA	4	QL
TRIUMEQ	4	QL
TRIUMEQ PD	4	QL
TRIZIVIR	1	QL
ANTIRETROVIRALS - CAPSID INHIBITORS		
SUNLENCA (4 X 300 MG TAB THPK, 5 X 300 MG TAB THPK)	4	QL
ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)		
<i>maraviroc</i>	1	QL
ANTIRETROVIRALS - GP120-DIRECTED ATTACHMENT INHIBITOR		
RUKOBIA	4	PA, QL

Drug Name	Drug Tier	Requirements / Limits
ANTIRETROVIRALS - INTEGRASE INHIBITORS		
ISENTRESS (25 MG CHEW TAB, 100 MG CHEW TAB, 400 MG TAB)	4	QL
ISENTRESS HD	4	QL
TIVICAY 50 MG TAB	4	QL
ANTIRETROVIRALS - PROTEASE INHIBITORS		
APTIVUS	4	QL
<i>atazanavir sulfate</i>	1	QL
<i>darunavir</i>	1	QL
<i>fosamprenavir calcium</i>	1	QL
PREZISTA (75 MG TAB, 100 MG/ML SUSPENSION, 150 MG TAB)	4	QL
REYATAZ 50 MG PACKET	4	QL
<i>ritonavir</i>	1	QL
VIRACEPT	4	QL
ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES		
<i>efavirenz 600 mg tab</i>	1	QL
<i>etravirine</i>	1	QL
INTELENCE 25 MG TAB	4	QL
<i>nevirapine (50 mg/5ml suspension, 200 mg tab)</i>	1	QL
<i>nevirapine er 400 mg tab er 24h</i>	1	QL
PIFELTRO	4	QL
<i>rilpivirine hcl</i>	4	QL
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES		
<i>abacavir sulfate 20 mg/ml solution</i>	1	QL
<i>abacavir sulfate 300 mg tab</i>	1	QL
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES		
<i>emtricitabine</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
EMTRIVA 10 MG/ML SOLUTION	4	QL
<i>lamivudine (10 mg/ml solution, 300 mg/30ml solution)</i>	1	QL
<i>lamivudine (150 mg tab, 300 mg tab)</i>	1	QL
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES		
<i>zidovudine (50 mg/5ml syrup, 100 mg cap, 300 mg tab)</i>	1	QL
ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES		
<i>tenofovir disoproxil fumarate</i>	1	QL
VIREAD (150 MG TAB, 200 MG TAB, 250 MG TAB)	4	QL
ANTIRETROVIRALS ADJUVANTS		
TYBOST	4	QL
ANTIVIRAL COMBINATIONS		
PAXLOVID (150/100)	4	QL
PAXLOVID (300/100 & 150/100)	4	QL
PAXLOVID (300/100)	4	QL
CMV AGENTS		
PREVYMIS (240 MG TAB, 480 MG TAB)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>valganciclovir hcl 450 mg tab</i>	4	QL
<i>valganciclovir hcl 50 mg/ml recon soln</i>	4	QL
HEPATITIS B AGENTS		
<i>adefovir dipivoxil</i>	4	QL
<i>entecavir</i>	1	QL
<i>lamivudine 100 mg tab</i>	1	QL
HEPATITIS C AGENT - COMBINATIONS		
HARVONI 33.75-150 MG PACKET	3	ST, QL, SUM7 (Specialty Pharmacy Site of Care Lock)
HARVONI 45-200 MG PACKET	3	ST, QL, SUM7 (Specialty Pharmacy Lock)

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Drug Name	Drug Tier	Requirements / Limits
LEDIPASVIR-SOFOSBUVIR	3	ST, QL, SUM7 (Specialty Pharmacy Site of Care Lock)
MAVYRET 100-40 MG TAB	2	QL, SUM7 (Specialty Pharmacy Site of Care Lock)
MAVYRET 50-20 MG PACKET	2	QL, SUM7 (Specialty Pharmacy Site of Care Lock)
SOFOSBUVIR-VELPATASVIR	2	QL, SUM7 (Specialty Pharmacy Site of Care Lock)
VOSEVI	3	QL, SUM7 (Specialty Pharmacy Site of Care Lock)
HEPATITIS C AGENTS		
PEGASYS	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
RIBAVIRIN 200 MG CAP	2	QL
RIBAVIRIN 200 MG TAB	2	QL
HERPES AGENTS - PURINE ANALOGUES		
<i>acyclovir (200 mg cap, 200 mg/5ml suspension, 400 mg tab, 800 mg tab, 800 mg/20ml suspension)</i>	1	
<i>valacyclovir hcl</i>	1	
HERPES AGENTS - THYMIDINE ANALOGUES		
<i>famciclovir</i>	1	
INFLUENZA AGENTS		
RIMANTADINE HCL	1	
MISC. ANTIVIRALS		
LAGEVRIO	4	AGE, QL
NEURAMINIDASE INHIBITORS		
<i>oseltamivir phosphate (6 mg/ml recon susp, 30 mg cap, 45 mg cap, 75 mg cap)</i>	1	QL
BETA BLOCKERS (CONTINUED)		
ALPHA-BETA BLOCKERS		
<i>carvedilol</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>carvedilol phosphate er</i>	1	QL
<i>labetalol hcl (100 mg tab, 200 mg tab, 300 mg tab)</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol hcl</i>	1	
<i>atenolol</i>	1	
<i>betaxolol hcl (10 mg tab, 20 mg tab)</i>	1	
<i>bisoprolol fumarate (5 mg tab, 10 mg tab)</i>	1	
<i>metoprolol succinate er</i>	1	
<i>metoprolol tartrate (25 mg tab, 37.5 mg tab, 50 mg tab, 75 mg tab, 100 mg tab)</i>	1	
<i>nebivolol hcl</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol</i>	1	
<i>pindolol</i>	1	
<i>propranolol hcl (10 mg tab, 20 mg tab, 20 mg/5ml solution, 40 mg tab, 40 mg/5ml solution, 60 mg tab, 80 mg tab)</i>	1	
<i>propranolol hcl er</i>	1	
<i>sotalol hcl (80 mg tab, 120 mg tab, 160 mg tab, 240 mg tab)</i>	1	
<i>sotalol hcl (af)</i>	1	
SOTYLIZE	3	AGE, QL
<i>timolol maleate (5 mg tab, 10 mg tab, 20 mg tab)</i>	1	
CALCIUM CHANNEL BLOCKERS (CONTINUED)		
<i>amlodipine besylate</i>	1	
<i>cartia xt</i>	1	
<i>dilt-xr</i>	1	
<i>diltiazem hcl (30 mg tab, 60 mg tab, 90 mg tab, 120 mg tab)</i>	1	
<i>diltiazem hcl er</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>diltiazem hcl er beads (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 420 mg cap er 24h)</i>	1	
<i>diltiazem hcl er coated beads (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h)</i>	1	
<i>felodipine er</i>	1	
<i>isradipine</i>	1	
<i>matzim la</i>	1	
<i>nicardipine hcl (20 mg cap, 30 mg cap)</i>	1	
<i>nifedipine</i>	1	
<i>nifedipine er</i>	1	
<i>nifedipine er osmotic release</i>	1	
<i>nimodipine 30 mg cap</i>	2	
NIMODIPINE 60 MG/20ML SOLUTION	3	
<i>taztia xt (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h)</i>	1	
<i>tiadylt er (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 420 mg cap er 24h)</i>	1	
<i>verapamil hcl (40 mg tab, 80 mg tab, 120 mg tab)</i>	1	
<i>verapamil hcl er (100 mg cap er 24h, 120 mg cap er 24h, 120 mg tab er, 180 mg cap er 24h, 180 mg tab er, 200 mg cap er 24h, 240 mg cap er 24h, 240 mg tab er, 300 mg cap er 24h)</i>	1	
CARDIOTONICS (CONTINUED)		
CARDIAC GLYCOSIDES		
<i>digoxin (62.5 mcg tab, 125 mcg tab, 250 mcg tab)</i>	1	
<i>digoxin 0.05 mg/ml solution</i>	2	
DIGOXIN 0.05 MG/ML SOLUTION	2	
CARDIOVASCULAR AGENTS - MISC. (CONTINUED)		
NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB		
ENTRESTO (6-6 MG CAP SPRINK, 15-16 MG CAP SPRINK)	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>sacubitril-valsartan</i>	1	QL
PROSTAGLANDIN VASODILATORS		
<i>epoprostenol sodium</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
ORENITRAM 0.125 MG TAB ER	4	PA, QL
ORENITRAM 0.25 MG TAB ER	4	PA, QL
ORENITRAM 1 MG TAB ER	4	PA, QL
ORENITRAM 2.5 MG TAB ER	4	PA, QL
ORENITRAM 5 MG TAB ER	4	PA, QL
ORENITRAM MONTH 1	4	PA, QL
ORENITRAM MONTH 2	4	PA, QL
ORENITRAM MONTH 3	4	PA, QL
TYVASO	4	PA, QL
TYVASO DPI INSTITUTIONAL KIT (16 MCG POWDER, 32 MCG POWDER, 48 MCG POWDER, 64 MCG POWDER)	4	PA, QL
TYVASO DPI MAINTENANCE KIT (16 MCG POWDER, 32 MCG POWDER, 48 MCG POWDER, 64 MCG POWDER)	4	PA, QL
TYVASO DPI TITRATION KIT 16 & 32 & 48 MCG POWDER	4	PA, QL
TYVASO REFILL	4	PA, QL
TYVASO STARTER	4	PA, QL
PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
ADEMPAS	4	PA, QL
PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR		
WINREVAIR	4	PA, QL
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan</i>	4	PA, QL
<i>bosentan (62.5 mg tab, 125 mg tab)</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
<i>alyq</i>	2	PA, QL
<i>sildenafil citrate 10 mg/ml recon susp</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>sildenafil citrate 20 mg tab</i>	1	PA, QL
<i>tadalafil (pah)</i>	2	PA, QL
TADLIQ	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS		
<i>tadalafil (2.5 mg tab, 10 mg tab, 20 mg tab)</i>	2	PA, QL
<i>tadalafil 5 mg tab</i>	2	ST, QL
SINUS NODE INHIBITORS		
<i>ivabradine hcl</i>	2	ST, QL
CEPHALOSPORINS (CONTINUED)		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil (1 gm tab, 250 mg/5ml recon susp, 500 mg cap, 500 mg/5ml recon susp)</i>	1	
<i>cephalexin (125 mg/5ml recon susp, 250 mg cap, 250 mg tab, 250 mg/5ml recon susp, 500 mg cap, 500 mg tab)</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR (250 MG CAP, 250 MG/5ML RECON SUSP, 500 MG CAP)	1	
CEFACLOR ER	1	
<i>cefprozil (125 mg/5ml recon susp, 250 mg tab, 250 mg/5ml recon susp, 500 mg tab)</i>	1	
<i>cefuroxime axetil</i>	1	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir (125 mg/5ml recon susp, 250 mg/5ml recon susp, 300 mg cap)</i>	1	
<i>cefixime (100 mg/5ml recon susp, 200 mg/5ml recon susp)</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>cefpodoxime proxetil (50 mg/5ml recon susp, 100 mg tab, 100 mg/5ml recon susp, 200 mg tab)</i>	1	
CONTRACEPTIVES (CONTINUED)		
BIPHASIC CONTRACEPTIVES - ORAL		
<i>azurette</i>	1	QL
<i>desogestrel-ethinyl estradiol 0.15-0.02/0.01 mg (21/5) tab</i>	1	QL
<i>kariva</i>	1	QL
LO LOESTRIN FE	3	
<i>pimtrea</i>	1	QL
<i>simliya</i>	1	QL
<i>viorele</i>	1	QL
<i>volnea</i>	1	QL
COMBINATION CONTRACEPTIVES - ORAL		
<i>afirmelle</i>	1	QL
<i>altavera</i>	1	QL
<i>alyacen 1/35</i>	1	QL
<i>apri</i>	1	QL
<i>aubra</i>	1	QL
<i>aubra eq</i>	1	QL
<i>aurovela 1.5/30</i>	1	QL
<i>aurovela 1/20</i>	1	QL
<i>aurovela 24 fe</i>	1	QL
<i>aurovela fe 1.5/30</i>	1	QL
<i>aurovela fe 1/20</i>	1	QL
AVERI	3	QL
<i>aviane</i>	1	QL
<i>ayuna</i>	1	QL
<i>balziva</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>blisovi 24 fe</i>	1	QL
<i>blisovi fe 1.5/30</i>	1	QL
<i>blisovi fe 1/20</i>	1	QL
<i>briellyn</i>	1	QL
<i>charlotte 24 fe</i>	1	QL
<i>chateal</i>	1	QL
<i>chateal eq</i>	1	QL
<i>cryselle</i>	1	QL
<i>cryselle-28</i>	1	QL
<i>cyclafem 1/35</i>	1	QL
<i>cyred</i>	1	QL
<i>cyred eq</i>	1	QL
<i>dasetta 1/35</i>	1	QL
<i>delyla</i>	1	QL
<i>drospiren-eth estrad-levomefol</i>	1	QL
<i>drospirenone-ethinyl estradiol</i>	1	QL
<i>elinest</i>	1	QL
<i>emoquette</i>	1	QL
<i>enskyce</i>	1	QL
<i>estarylla</i>	1	QL
<i>ethynodiol diac-eth estradiol</i>	1	QL
<i>falmina</i>	1	QL
<i>feirza 1.5/30</i>	1	QL
<i>feirza 1/20</i>	1	QL
FEMLYV	3	QL
<i>femynor</i>	1	QL
<i>finzala</i>	1	QL
<i>galbriela</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>gemmily</i>	1	QL
<i>hailey 1.5/30</i>	1	QL
<i>hailey 24 fe</i>	1	QL
<i>hailey fe 1.5/30</i>	1	QL
<i>hailey fe 1/20</i>	1	QL
<i>isibloom</i>	1	QL
<i>jasmiel</i>	1	QL
<i>joyeaux</i>	1	QL
<i>juleber</i>	1	QL
<i>junel 1.5/30</i>	1	QL
<i>junel 1/20</i>	1	QL
<i>junel fe 1.5/30</i>	1	QL
<i>junel fe 1/20</i>	1	QL
<i>junel fe 24</i>	1	QL
<i>kaitlib fe</i>	1	QL
<i>kalliga</i>	1	QL
<i>kelnor 1/35</i>	1	QL
<i>kelnor 1/50</i>	1	QL
<i>kurvelo</i>	1	QL
<i>larin 1.5/30</i>	1	QL
<i>larin 1/20</i>	1	QL
<i>larin 24 fe</i>	1	QL
<i>larin fe 1.5/30</i>	1	QL
<i>larin fe 1/20</i>	1	QL
<i>larissia</i>	1	QL
<i>layolis fe</i>	1	QL
<i>lessina</i>	1	QL
<i>levonorgest-eth estradiol-iron</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>levonorgestrel-ethinyl estrad (0.1-20 tab, 0.15-30 tab)</i>	1	QL
<i>levora 0.15/30 (28)</i>	1	QL
<i>lillow</i>	1	QL
<i>lo-zumandimine</i>	1	QL
<i>loestrin 1.5/30 (21)</i>	1	QL
<i>loestrin 1/20 (21)</i>	1	QL
<i>loestrin fe 1.5/30</i>	1	QL
<i>loestrin fe 1/20</i>	1	QL
<i>loryna</i>	1	QL
<i>low-ogestrel</i>	1	QL
<i>luizza 1.5/30</i>	1	QL
<i>luizza 1/20</i>	1	QL
<i>lutra</i>	1	QL
<i>marlissa</i>	1	QL
<i>merzee</i>	1	QL
<i>mibelas 24 fe</i>	1	QL
<i>microgestin 1.5/30</i>	1	QL
<i>microgestin 1/20</i>	1	QL
<i>microgestin 24 fe</i>	1	QL
<i>microgestin fe 1.5/30</i>	1	QL
<i>microgestin fe 1/20</i>	1	QL
<i>mili</i>	1	QL
<i>minzoya</i>	1	QL
<i>mono-linyah</i>	1	QL
<i>necon 0.5/35 (28)</i>	1	QL
<i>nikki</i>	1	QL
<i>norethin ace-eth estrad-fe</i>	1	QL
<i>norethin-eth estradiol-fe</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>norethindrone acet-ethinyl est</i>	1	QL
<i>norgestimate-eth estradiol</i>	1	QL
<i>nortrel 0.5/35 (28)</i>	1	QL
<i>nortrel 1/35 (21)</i>	1	QL
<i>nortrel 1/35 (28)</i>	1	QL
<i>nylia 1/35</i>	1	QL
<i>nymyo</i>	1	QL
<i>ocella</i>	1	QL
<i>orsythia</i>	1	QL
<i>philith</i>	1	QL
<i>pirmella 1/35</i>	1	QL
<i>portia-28</i>	1	QL
<i>previfem</i>	1	QL
<i>reclipsen</i>	1	QL
<i>sprintec 28</i>	1	QL
<i>sronyx</i>	1	QL
<i>syeda</i>	1	QL
<i>tarina 24 fe</i>	1	QL
<i>tarina fe 1/20</i>	1	QL
<i>tarina fe 1/20 eq</i>	1	QL
<i>taysofy</i>	1	QL
<i>turqoz</i>	1	QL
TYBLUME	3	QL
<i>tydemy</i>	1	QL
<i>valtya 1/35</i>	1	QL
<i>valtya 1/50</i>	1	QL
<i>vestura</i>	1	QL
<i>vienna</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>vyfemla</i>	1	QL
<i>vylibra</i>	1	QL
<i>wera</i>	1	QL
<i>wymzya fe</i>	1	QL
<i>xelria fe</i>	1	QL
<i>zovia 1/35 (28)</i>	1	QL
<i>zumandimine</i>	1	QL
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<i>norelgestromin-eth estradiol</i>	1	QL
TWIRLA	3	QL
<i>xulane</i>	1	QL
<i>zafemy</i>	1	QL
COMBINATION CONTRACEPTIVES - VAGINAL		
<i>eluryng</i>	1	QL
<i>enilloring</i>	1	QL
<i>etonogestrel-ethinyl estradiol</i>	1	QL
<i>haloette</i>	1	QL
CONTINUOUS CONTRACEPTIVES - ORAL		
<i>amethyst</i>	1	QL
<i>dolishale</i>	1	QL
<i>levonorgestrel-ethinyl estrad 90-20 mcg tab</i>	1	QL
EMERGENCY CONTRACEPTIVES		
<i>aftera</i>	1	QL
<i>afterpill</i>	1	QL
<i>curae</i>	1	QL
<i>econtra ez</i>	1	QL
<i>econtra one-step</i>	1	QL
ELLA	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>her style</i>	1	QL
<i>levonorgestrel</i>	1	QL
<i>my choice</i>	1	QL
<i>my way</i>	1	QL
<i>new day</i>	1	QL
<i>opcicon one-step</i>	1	QL
<i>option 2</i>	1	QL
<i>plan b one-step</i>	1	QL
<i>react</i>	1	QL
<i>shewise</i>	1	QL
<i>take action</i>	1	QL
EXTENDED-CYCLE CONTRACEPTIVES - ORAL		
<i>amethia</i>	1	QL
<i>ashlyna</i>	1	QL
<i>camrese</i>	1	QL
<i>camrese lo</i>	1	QL
<i>daysee</i>	1	QL
<i>fayosim</i>	1	QL
<i>iclevia</i>	1	QL
<i>introvale</i>	1	QL
<i>jaimiess</i>	1	QL
<i>jolessa</i>	1	QL
<i>levonorgest-eth est & eth est</i>	1	QL
<i>levonorgest-eth estrad 91-day</i>	1	QL
<i>lojaimiess</i>	1	QL
<i>rivelsa</i>	1	QL
<i>rosyrah</i>	1	QL
<i>setlakin</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>simpesse</i>	1	QL
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA 150 MG/ML SUSP PRSYR	3	
DEPO-SUBQ PROVERA 104	3	QL
<i>medroxyprogesterone acetate (150 mg/ml susp prsy, 150 mg/ml suspension)</i>	1	QL
PROGESTIN CONTRACEPTIVES - ORAL		
<i>camila</i>	1	QL
<i>deblitane</i>	1	QL
<i>emzahh</i>	1	QL
<i>errin</i>	1	QL
<i>heather</i>	1	QL
<i>incassia</i>	1	QL
<i>jencycla</i>	1	QL
<i>lyleq</i>	1	QL
<i>lyza</i>	1	QL
<i>meleya</i>	1	QL
<i>nora-be</i>	1	QL
<i>norethindrone</i>	1	QL
<i>norlyda</i>	1	QL
<i>norlyroc</i>	1	QL
<i>orquidea</i>	1	QL
<i>sharobel</i>	1	QL
SLYND	3	QL
<i>tulana</i>	1	QL
TRIPHASIC CONTRACEPTIVES - ORAL		
<i>alyacen 7/7/7</i>	1	QL
ARANELLE	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>cyclafem 7/7/7</i>	1	QL
<i>dasetta 7/7/7</i>	1	QL
<i>enpresse-28</i>	1	QL
<i>leena</i>	1	QL
<i>levonest</i>	1	QL
<i>levonorg-eth estrad triphasic</i>	1	QL
<i>norethindron-ethinyl estrad-fe</i>	1	QL
<i>norgestim-eth estrad triphasic</i>	1	QL
<i>nortrel 7/7/7</i>	1	QL
<i>nylia 7/7/7</i>	1	QL
<i>pirmella 7/7/7</i>	1	QL
<i>tilia fe</i>	1	QL
<i>tri femynor</i>	1	QL
<i>tri-estarylla</i>	1	QL
<i>tri-legest fe</i>	1	QL
<i>tri-linyah</i>	1	QL
<i>tri-lo-estarylla</i>	1	QL
<i>tri-lo-marzia</i>	1	QL
<i>tri-lo-mili</i>	1	QL
<i>tri-lo-sprintec</i>	1	QL
<i>tri-mili</i>	1	QL
<i>tri-nymyo</i>	1	QL
<i>tri-sprintec</i>	1	QL
<i>tri-vylibra</i>	1	QL
<i>tri-vylibra lo</i>	1	QL
<i>trivora (28)</i>	1	QL
<i>xarah fe</i>	1	QL
CORTICOSTEROIDS (CONTINUED)		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3 mg cp dr part</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>budesonide er</i>	4	ST, QL, SUM7 (Specialty Pharmacy Lock)
CORTISONE ACETATE	1	
<i>dexamethasone (0.5 mg tab, 0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tab, 1 mg tab, 1.5 mg tab, 2 mg tab, 4 mg tab, 6 mg tab)</i>	1	
EOHILIA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>hydrocortisone (5 mg tab, 10 mg tab, 20 mg tab)</i>	1	
<i>hydrocortisone sod suc (pf)</i>	1	
<i>methylprednisolone</i>	1	
<i>prednisolone 15 mg/5ml solution</i>	1	
<i>prednisolone sodium phosphate (5 mg/5ml solution, 6.7 (5 base) mg/5ml solution, 10 mg tab disp, 10 mg/5ml solution, 15 mg tab disp, 15 mg/5ml solution, 20 mg/5ml solution, 25 mg/5ml solution, 30 mg tab disp)</i>	1	
PREDNISONE (1 MG TAB, 2.5 MG TAB, 5 MG TAB, 5 MG/5ML SOLUTION, 10 MG TAB, 20 MG TAB, 50 MG TAB)	1	
SOLU-CORTEF (250 MG RECON SOLN, 500 MG RECON SOLN, 1000 MG RECON SOLN)	3	
MINERALOCORTICOIDS		
<i>fludrocortisone acetate</i>	1	
COUGH/COLD/ALLERGY (CONTINUED)		
ANTITUSSIVE - NONNARCOTIC		
<i>benzonatate (100 mg cap, 200 mg cap)</i>	1	
ANTITUSSIVE - OPIOID		
<i>hydrocodone bit-homatrop mbr (5-1.5 mg tab, 5-1.5 mg/5ml solution)</i>	1	
<i>hydromet</i>	1	
ANTITUSSIVE-EXPECTORANT		
<i>g tussin ac</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>guaiaatussin ac</i>	1	
<i>guaifenesin ac</i>	1	
<i>guaifenesin-codeine</i>	1	
<i>maxi-tuss ac</i>	1	
DECONGESTANT & ANTIHISTAMINE		
PROMETHAZINE VC	2	
PROMETHAZINE-PHENYLEPHRINE	2	
MISC. RESPIRATORY INHALANTS		
HYPERSAL	3	
NEBUSAL 3 % NEBU SOLN	3	
NEBUSAL 6 % NEBU SOLN	3	
PULMOSAL	1	
SODIUM CHLORIDE (0.9 % NEBU SOLN, 3 % NEBU SOLN, 7 % NEBU SOLN, 10 % NEBU SOLN)	1	
MUCOLYTICS		
<i>acetylcysteine (10 % solution, 20 % solution)</i>	1	
NON-NARC ANTITUSSIVE-ANTIHISTAMINE		
<i>promethazine-dm</i>	1	
NON-NARC ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE		
<i>pseudoeph-bromphen-dm</i>	1	QL
OPIOID ANTITUSSIVE-ANTIHISTAMINE		
HYDROCOD POLI-CHLORPHE POLI ER	1	QL
<i>promethazine-codeine</i>	1	
DERMATOLOGICALS (CONTINUED)		
ACNE ANTIBIOTICS		
<i>clindacin</i>	2	ST
<i>clindamycin phos (twice-daily)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate (1 % lotion, 1 % solution, 1 % swab)</i>	1	
<i>clindamycin phosphate 1 % foam</i>	2	ST
<i>dapsone 5 % gel</i>	2	ST
ERYTHROMYCIN (2 % GEL, 2 % SOLUTION)	1	
<i>sulfacetamide sodium (acne)</i>	2	
ACNE COMBINATIONS		
<i>benzoyl peroxide-erythromycin</i>	1	
BP 10-1	1	
<i>clindamycin phos-benzoyl perox 1.2-2.5 % gel</i>	2	ST
<i>clindamycin phos-benzoyl perox 1.2-5 % gel</i>	1	
SSS 10-5 10-5 % CREAM	2	
SULFACETAMIDE SODIUM-SULFUR (10-5 % LIQUID, 10-5 % LOTION)	1	
SULFACETAMIDE SODIUM-SULFUR (8-4 % SUSPENSION, 9-4.25 % SUSPENSION, 9.8-4.8 % CREAM, 10-5 % CREAM, 10-5 % SUSPENSION)	2	
SULFACETAMIDE-SULFUR IN UREA	1	
SULFAMEZ WASH	1	
ACNE PRODUCTS		
<i>acutane</i>	2	
<i>adapalene 0.1 % cream</i>	2	ST
<i>adapalene 0.3 % gel</i>	1	ST
<i>amnesteem</i>	2	
<i>claravis</i>	2	
<i>isotretinoin (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap)</i>	2	
<i>myorisan</i>	2	
<i>tretinoin (0.025 % cream, 0.05 % cream, 0.05 % gel, 0.1 % cream)</i>	2	AGE

Drug Name	Drug Tier	Requirements / Limits
<i>tretinoin microsphere 0.04 % gel</i>	2	ST, AGE
TRETINOIN MICROSPHERE PUMP 0.04 % GEL	2	ST, AGE
<i>zenatane</i>	2	
ANTIBIOTICS - TOPICAL		
<i>gentamicin sulfate (0.1 % cream, 0.1 % ointment)</i>	1	
<i>mupirocin</i>	1	
ANTIFUNGALS - TOPICAL		
<i>ciclodan</i>	1	QL
<i>ciclopirox (0.77 % gel, 1 % shampoo)</i>	1	
<i>ciclopirox 8 % solution</i>	1	QL
<i>ciclopirox olamine (0.77 % cream, 0.77 % suspension)</i>	1	
<i>klayesta</i>	1	QL
NAFTIFINE HCL (1 % CREAM, 2 % CREAM)	2	
<i>nyamyc</i>	1	QL
<i>nystatin (100000 unit/gm cream, 100000 unit/gm ointment)</i>	1	
<i>nystatin 100000 unit/gm powder</i>	1	QL
<i>nystop</i>	1	QL
ANTIFUNGALS - TOPICAL COMBINATIONS		
CLOTRIMAZOLE-BETAMETHASONE (1-0.05 % CREAM, 1-0.05 % LOTION)	1	
<i>nystatin-triamcinolone</i>	1	
ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL		
FLUOROURACIL (2 % SOLUTION, 5 % CREAM, 5 % SOLUTION)	1	
FLUOROURACIL 0.5 % CREAM	1	PA, QL
ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL NSAID'S		
<i>diclofenac sodium 3 % gel</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
ANTIPSORIATICS		
CALCIPOTRIENE (0.005 % CREAM, 0.005 % OINTMENT, 0.005 % SOLUTION)	2	
<i>calcitrene</i>	2	
CALCITRIOL 3 MCG/GM OINTMENT	2	ST, QL
<i>tazarotene (0.05 % gel, 0.1 % cream, 0.1 % gel)</i>	2	ST, AGE
VTAMA	3	ST, QL
ANTIPSORIATICS - SYSTEMIC		
<i>acitretin</i>	3	QL
BIMZELX	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
COSENTYX (300 MG DOSE)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
COSENTYX (75 MG/0.5ML SOLN PRSYR, 150 MG/ML SOLN PRSYR)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
COSENTYX SENSOREADY (300 MG)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
COSENTYX SENSOREADY PEN	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
COSENTYX UNOREADY	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
PYZCHIVA (45 MG/0.5ML SOLN PRSYR, 90 MG/ML SOLN PRSYR)	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
SELARSDI (45 MG/0.5ML SOLN PRSYR, 90 MG/ML SOLN PRSYR)	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
SELARSDI 45 MG/0.5ML SOLUTION	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
SKYRIZI 150 MG/ML SOLN PRSYR	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
SKYRIZI PEN	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ANTISEBORRHEIC PRODUCTS		
<i>selenium sulfide (2.25 % shampoo, 2.5 % lotion)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
SELENIUM SULFIDE 2.3 % SHAMPOO	2	
<i>sodium sulfacetamide wash</i>	1	
<i>sulfacetamide sodium 10 % liquid</i>	1	
ANTIVIRALS - TOPICAL		
<i>acyclovir 5 % ointment</i>	1	
ASTRINGENTS		
XERAC AC	3	
ATOPIC DERMATITIS - JANUS KINASE (JAK) INHIBITORS		
CIBINQO	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES		
ADBRY 150 MG/ML SOLN PRSYR	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ADBRY 300 MG/2ML SOLN A-INJ	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
EBGLYSS	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
BURN PRODUCTS		
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
CORTICOSTEROIDS - TOPICAL		
<i>ala-cort</i>	1	
<i>alclometasone dipropionate (0.05 % cream, 0.05 % ointment)</i>	1	
AMCINONIDE 0.1 % OINTMENT	1	
<i>betamethasone dipropionate (0.05 % cream, 0.05 % lotion, 0.05 % ointment)</i>	1	
<i>betamethasone dipropionate aug (0.05 % cream, 0.05 % gel, 0.05 % lotion, 0.05 % ointment)</i>	1	
<i>betamethasone valerate (0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.12 % foam)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>clobetasol prop emollient base</i>	1	
<i>clobetasol propionate (0.025 % cream, 0.05 % cream, 0.05 % foam, 0.05 % gel, 0.05 % ointment, 0.05 % shampoo, 0.05 % solution)</i>	1	
<i>clobetasol propionate 0.05 % liquid</i>	1	QL
<i>clobetasol propionate e</i>	1	
<i>clobetasol propionate emulsion</i>	2	
<i>desonide (0.05 % cream, 0.05 % lotion, 0.05 % ointment)</i>	1	
DESONIDE 0.05 % GEL	1	QL
<i>desoximetasone (0.05 % gel, 0.25 % cream)</i>	1	
<i>desoximetasone 0.05 % cream</i>	2	
<i>desrx</i>	3	
<i>fluocinolone acetonide (0.01 % cream, 0.01 % solution, 0.025 % cream, 0.025 % ointment)</i>	1	
<i>fluocinolone acetonide body</i>	1	
<i>fluocinolone acetonide scalp</i>	1	
<i>fluocinonide (0.05 % cream, 0.05 % gel, 0.05 % ointment, 0.05 % solution)</i>	1	
<i>fluocinonide 0.1 % cream</i>	1	ST, QL
<i>fluocinonide emulsified base</i>	1	
FLUTICASONE PROPIONATE (0.005 % OINTMENT, 0.05 % CREAM, 0.05 % LOTION)	1	
<i>halobetasol propionate (0.05 % cream, 0.05 % ointment)</i>	1	
<i>hydrocortisone (1 % cream, 1 % ointment, 2 % lotion, 2.5 % cream, 2.5 % lotion, 2.5 % ointment)</i>	1	
HYDROCORTISONE BUTYRATE (0.1 % CREAM, 0.1 % OINTMENT, 0.1 % SOLUTION)	1	
<i>hydrocortisone valerate</i>	1	
<i>mometasone furoate (0.1 % cream, 0.1 % ointment, 0.1 % solution)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>tovet 0.05 % foam</i>	2	
<i>triamcinolone acetonide (0.025 % cream, 0.025 % lotion, 0.025 % ointment, 0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.5 % cream, 0.5 % ointment)</i>	1	
TRIAMCINOLONE ACETONIDE 0.147 MG/GM AERO SOLN	2	ST, QL
<i>triamcinolone acetonide 0.147 mg/gm aero soln</i>	2	QL
<i>triderm</i>	2	
EMOLLIENTS		
<i>ammonium lactate 12 % cream</i>	1	
ENZYMES - TOPICAL		
SANTYL	3	
IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL		
<i>clotrimazole (1 % cream, 1 % solution)</i>	1	
<i>econazole nitrate 1 % cream</i>	1	
<i>ketoconazole (2 % cream, 2 % shampoo)</i>	1	
<i>ketoconazole 2 % foam</i>	3	ST
IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL		
<i>imiquimod 5 % cream</i>	1	
INTERLEUKIN-31 RECEPTOR ANTAGONISTS - SYSTEMIC		
NEMLUVIO	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS		
KERALYT 6 % SHAMPOO	2	
SALICYLIC ACID 6 % SHAMPOO	2	
LOCAL ANESTHETICS - TOPICAL		
<i>glydo</i>	1	
<i>lidocaine 5 % ointment</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine hcl 4 % solution</i>	1	
<i>lidocaine hcl urethral/mucosal 2 % prsyr</i>	1	
PREMIUM LIDOCAINE	1	
MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL		
<i>pimecrolimus</i>	3	ST, QL
<i>tacrolimus (0.03 % ointment, 0.1 % ointment)</i>	2	QL
MISC. TOPICAL		
DRYSOL	3	
QBREXZA	3	QL
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA	2	QL
ROSACEA AGENTS		
<i>azelaic acid</i>	1	
<i>ivermectin 1 % cream</i>	2	ST, QL
<i>metronidazole (0.75 % gel, 1 % gel)</i>	2	QL
<i>metronidazole 0.75 % cream</i>	1	
<i>metronidazole 0.75 % lotion</i>	2	
SCABICIDES & PEDICULICIDES		
<i>malathion</i>	2	
PERMETHRIN	1	
SPINOSAD	1	QL
TOPICAL ANESTHETIC COMBINATIONS		
<i>lidocaine-prilocaine 2.5-2.5 % cream</i>	1	
TOPICAL SELECTIVE RETINOID X RECEPTOR AGONISTS		
<i>bexarotene 1 % gel</i>	1	QL
TOPICAL STEROID COMBINATIONS		
<i>calcipotriene-betameth diprop</i>	3	ST

Drug Name	Drug Tier	Requirements / Limits
WOUND DRESSINGS		
FILSUVEZ	4	PA, QL
DIAGNOSTIC PRODUCTS (CONTINUED)		
DIAGNOSTIC TESTS		
ACCU-CHEK AVIVA PLUS STRIP	3	PA, QL
ACCU-CHEK GUIDE TEST	3	PA, QL
ACCU-CHEK SMARTVIEW	3	PA, QL
ACCUTREND GLUCOSE	3	PA, QL
ADVANCE INTUITION TEST	3	PA, QL
ADVANCE MICRO-DRAW TEST	3	PA, QL
ADVOCATE REDI-CODE STRIP	3	PA, QL
ADVOCATE REDI-CODE+ TEST	3	PA, QL
ADVOCATE TEST	3	PA, QL
AGAMATRIX AMP TEST	3	PA, QL
AGAMATRIX JAZZ TEST	3	PA, QL
AGAMATRIX KEYNOTE TEST	3	PA, QL
AGAMATRIX PRESTO TEST	3	PA, QL
ASSURE 3 TEST	3	PA, QL
ASSURE 4 TEST	3	PA, QL
ASSURE II	3	PA, QL
ASSURE II CHECK	3	PA, QL
ASSURE PLATINUM	3	PA, QL
ASSURE PRISM MULTI TEST	3	PA, QL
ASSURE PRO TEST	3	PA, QL
ASSURE TITANIUM	3	PA, QL
BIOSCANNER GLUCOSE TEST	3	PA, QL
BIOTEL CARE TEST STRIPS	3	PA, QL
BLOOD GLUCOSE TEST	1	PA, QL

Drug Name	Drug Tier	Requirements / Limits
BLOOD GLUCOSE TEST STRIPS 333	1	PA, QL
BLULINK GLUCOSE TEST	3	PA, QL
CAREONE BLOOD GLUCOSE TEST	3	PA, QL
CARESENS N GLUCOSE TEST	3	PA, QL
CARESENS S GLUCOSE TEST	3	PA, QL
CARETOUCH TEST	3	PA, QL
CLEVER CHEK AUTO-CODE TEST	3	PA, QL
CLEVER CHEK AUTO-CODE VOICE STRIP	3	PA, QL
CLEVER CHEK TEST	3	PA, QL
CLEVER CHOICE AUTO-CODE TEST	3	PA, QL
CLEVER CHOICE MICRO TEST	3	PA, QL
CLEVER CHOICE NO CODING	3	PA, QL
CLEVER CHOICE TALK SYSTEM STRIP	3	PA, QL
CONTOUR NEXT TEST	3	PA, QL
CONTOUR PLUS TEST	3	PA, QL
CONTOUR TEST	3	PA, QL
COOL BLOOD GLUCOSE TEST STRIPS	3	PA, QL
CVS ADVANCED GLUCOSE TEST	3	PA, QL
CVS GLUCOSE METER TEST STRIPS	3	PA, QL
CVS TRUE METRIX GLUCOSE TEST	3	PA, QL
D-CARE BLOOD GLUCOSE	3	PA, QL
DIATHRIVE BLOOD GLUCOSE TEST	3	PA, QL
DIATHRIVE GLUCOSE TEST	3	PA, QL
DIATHRIVE+ GLUCOSE TEST	3	PA, QL
DIATRUE PLUS TEST	3	PA, QL
DUO-CARE TEST	3	PA, QL
EASY MAX BLOOD GLUCOSE TEST	3	PA, QL
EASY PLUS II GLUCOSE TEST	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
EASY STEP TEST	3	PA, QL
EASY TALK BLOOD GLUCOSE TEST	3	PA, QL
EASY TALK PLUS II TEST STRIPS	3	PA, QL
EASY TOUCH HEALTHPRO GLUCOSE STRIP	3	PA, QL
EASY TOUCH TEST	3	PA, QL
EASY TRAK BLOOD GLUCOSE TEST	3	PA, QL
EASY TRAK II GLUCOSE TEST	3	PA, QL
EASYGLUCO STRIP	3	PA, QL
EASYMAX 15 TEST	3	PA, QL
EASYMAX TEST	3	PA, QL
EASYPRO BLOOD GLUCOSE TEST	3	PA, QL
EASYPRO PLUS STRIP	3	PA, QL
ELEMENT COMPACT TEST	3	PA, QL
ELEMENT TEST	3	PA, QL
EMBRACE BLOOD GLUCOSE TEST	3	PA, QL
EMBRACE EVO BLOOD GLUCOSE TEST	3	PA, QL
EMBRACE PRO GLUCOSE TEST	3	PA, QL
EMBRACE TALK GLUCOSE TEST	3	PA, QL
EMBRACE WAVE BLOOD GLUCOSE STRIP	3	PA, QL
EQ BLOOD GLUCOSE TEST	3	PA, QL
EVOLUTION AUTOCODE STRIP	3	PA, QL
FIFTY50 GLUCOSE TEST 2.0	3	PA, QL
FONDCIRCLE BLOOD GLUCOSE TEST	3	PA, QL
FORA 6 CONNECT STRIP	3	PA, QL
FORA 6 CONNECT/GTEL TEST	3	PA, QL
FORA BLOOD GLUCOSE TEST	3	PA, QL
FORA D15G BLOOD GLUCOSE TEST	3	PA, QL
FORA D20 BLOOD GLUCOSE TEST	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
FORA D40/G31 BLOOD GLUCOSE	3	PA, QL
FORA G20 BLOOD GLUCOSE TEST	3	PA, QL
FORA G30/PREM V10 GLUCOSE TEST	3	PA, QL
FORA GD20 TEST	3	PA, QL
FORA GD50 BLOOD GLUCOSE TEST	3	PA, QL
FORA GTEL BLOOD GLUCOSE TEST	3	PA, QL
FORA TN'G ADVANCE PRO STRIP	3	PA, QL
FORA TN'G/TN'G VOICE	3	PA, QL
FORA V10 BLOOD GLUCOSE TEST	3	PA, QL
FORA V12 BLOOD GLUCOSE TEST	3	PA, QL
FORA V20 BLOOD GLUCOSE TEST	3	PA, QL
FORA V30A BLOOD GLUCOSE TEST	3	PA, QL
FORACARE GD40 TEST	3	PA, QL
FORACARE PREMIUM V10 TEST	3	PA, QL
FORACARE TEST N GO TEST	3	PA, QL
FORTISCARE G1 TEST STRIP	3	PA, QL
FORTISCARE TEST	3	PA, QL
FREESTYLE INSULINX TEST	2	QL
FREESTYLE LITE TEST	2	QL
FREESTYLE PRECISION NEO TEST	2	QL
FREESTYLE TEST	2	QL
GE100 BLOOD GLUCOSE TEST	3	PA, QL
GENULTIMATE TEST	3	PA, QL
GHT TEST	3	PA, QL
GLUCO PERFECT 3 TEST	3	PA, QL
GLUCOCARD 01 SENSOR PLUS	3	PA, QL
GLUCOCARD EXPRESSION TEST	3	PA, QL
GLUCOCARD SHINE TEST	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
GLUCOCARD VITAL TEST	3	PA, QL
GLUCOCARD X-SENSOR	3	PA, QL
GLUCOCOM TEST	3	PA, QL
GLUCONAVII BLOOD GLUCOSE TEST	3	PA, QL
GLUCOSE METER TEST	3	PA, QL
GNP EASY TOUCH GLUCOSE TEST	3	PA, QL
GNP TRUE METRIX GLUCOSE STRIPS	3	PA, QL
GNP TRUETRACK SMART SYSTEM	3	PA, QL
GNP TRUETRACK TEST STRIPS	3	PA, QL
GOJJI BLOOD GLUCOSE TEST	3	PA, QL
GOJJI BLOOD TEST STRIP/LANCETS	3	PA, QL
GOODSENSE BLOOD GLUCOSE STRIP	3	PA, QL
HW EMBRACE PRO GLUCOSE TEST	3	PA, QL
HW EMBRACE TALK GLUCOSE TEST	3	PA, QL
IGLUCOSE TEST STRIPS	3	PA, QL
IHEALTH BLOOD GLUCOSE TEST STR	3	PA, QL
IN TOUCH BLOOD GLUCOSE TEST	3	PA, QL
INFINITY BLOOD GLUCOSE TEST	3	PA, QL
INFINITY VOICE STRIP	3	PA, QL
KROGER BLOOD GLUCOSE TEST	3	PA, QL
KROGER HEALTHPRO GLUCOSE TEST	3	PA, QL
KROGER PREMIUM GLUCOSE TEST	3	PA, QL
LIBERTY NEXT GENERATION TEST	3	PA, QL
LIBERTY TEST	3	PA, QL
MEIJER BLOOD GLUCOSE TEST	3	PA, QL
MEIJER ESSENTIAL GLUCOSE TEST	3	PA, QL
MEIJER TRUETEST TEST	3	PA, QL
MEIJER TRUETRACK TEST	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
MICRODOT TEST	3	PA, QL
MM BLULINK GLUCOSE TEST	3	PA, QL
MM EASY TOUCH GLUCOSE	3	PA, QL
MYGLUCOHEALTH TEST	3	PA, QL
NEUTEK 2TEK TEST	3	PA, QL
NOVA MAX GLUCOSE TEST	3	PA, QL
ON CALL EXPRESS BLOOD GLUCOSE	3	PA, QL
ONE DROP TEST	3	PA, QL
ONETOUCH ULTRA	3	PA, QL
ONETOUCH ULTRA BLUE TEST	3	PA, QL
ONETOUCH ULTRA TEST	3	PA, QL
ONETOUCH VERIO STRIP	3	PA, QL
OPTIUMEZ TEST	3	PA, QL
PHARMACIST CHOICE AUTOCODE	3	PA, QL
PHARMACIST CHOICE NO CODING	3	PA, QL
PIP BLOOD GLUCOSE TEST STRIP	3	PA, QL
POCKETCHEM EZ TEST	3	PA, QL
PRECISION XTRA BLOOD GLUCOSE	3	PA, QL
PRECISION XTRA KETONE	2	QL
PREMIUM BLOOD GLUCOSE TEST	3	PA, QL
PRO VOICE V8/V9 GLUCOSE	3	PA, QL
PRODIGY NO CODING BLOOD GLUC STRIP	3	PA, QL
PTS PANELS GLUCOSE TEST	3	PA, QL
PTS PANELSEGLU TEST	3	PA, QL
QUICK TOUCH BLOOD GLUCOSE TEST	3	PA, QL
QUICKTEK TEST	3	PA, QL
QUINTET AC BLOOD GLUCOSE TEST	3	PA, QL
QUINTET BLOOD GLUCOSE TEST	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
REFUAH PLUS BLOOD GLUCOSE TEST	3	PA, QL
RELION BLOOD GLUCOSE TEST	3	PA, QL
RELION CONFIRM/MICRO TEST	3	PA, QL
RELION GLUCOSE TEST STRIPS	3	PA, QL
RELION PREMIER TEST	3	PA, QL
RELION PRIME TEST	3	PA, QL
RELION TRUE METRIX TEST STRIPS	3	PA, QL
RELION ULTIMA TEST	3	PA, QL
REXALL BLOOD GLUCOSE TEST	3	PA, QL
RIGHTEST GS100 BLOOD GLUCOSE	3	PA, QL
RIGHTEST GS300 BLOOD GLUCOSE	3	PA, QL
RIGHTEST GS550 BLOOD GLUCOSE	3	PA, QL
RIGHTEST GT333 BLOOD GLUCOSE STRIP	3	PA, QL
RIGHTEST GT333 GLUCOSE TEST	3	PA, QL
SMART SENSE PREMIUM TEST	3	PA, QL
SMART SENSE VALUE TEST	3	PA, QL
SMARTTEST BLOOD GLUCOSE TEST	3	PA, QL
SOLUS V2 TEST	3	PA, QL
SUPREME TEST	3	PA, QL
TGT BLOOD GLUCOSE TEST	3	PA, QL
TRUE FOCUS BLOOD GLUCOSE STRIP	3	PA, QL
TRUE METRIX BLOOD GLUCOSE TEST	3	PA, QL
TRUE METRIX PRO BLOOD GLUCOSE	3	PA, QL
TRUETEST TEST	3	PA, QL
TRUETRACK TEST	3	PA, QL
UNISTRIP1 GENERIC	3	PA, QL
VERASENS BLOOD GLUCOSE TEST	3	PA, QL
VIVAGUARD INO TEST STRIPS	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
DIGESTIVE AIDS (CONTINUED)		
DIGESTIVE ENZYMES		
CREON	2	QL
ZENPEP	2	QL
DIURETICS (CONTINUED)		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide</i>	1	
<i>acetazolamide er</i>	1	
<i>dichlorphenamide</i>	4	PA, AGE, QL
<i>methazolamide</i>	2	
DIURETIC COMBINATIONS		
AMILORIDE-HYDROCHLOROTHIAZIDE	1	
<i>spironolactone-hctz</i>	1	
<i>triamterene-hctz</i>	1	
LOOP DIURETICS		
<i>bumetanide (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	1	
<i>ethacrynic acid</i>	2	PA, QL
<i>furosemide (10 mg/ml solution, 20 mg tab, 40 mg tab, 80 mg tab)</i>	1	
FUROSEMIDE (8 MG/ML SOLUTION, 10 MG/ML SOLUTION)	1	
<i>torseamide</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride hcl</i>	1	
<i>spironolactone (25 mg tab, 50 mg tab, 100 mg tab)</i>	1	
<i>triamterene</i>	2	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DIURIL	2	AGE, QL
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
<i>metolazone</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC. (CONTINUED)		
BISPHOSPHONATES		
<i>alendronate sodium (35 mg tab, 70 mg tab)</i>	1	QL
<i>alendronate sodium (5 mg tab, 10 mg tab)</i>	1	QL
<i>ibandronate sodium 150 mg tab</i>	1	QL
<i>risedronate sodium (35 mg tab, 150 mg tab)</i>	1	QL
<i>risedronate sodium (5 mg tab, 30 mg tab)</i>	1	ST, QL
CALCIMIMETIC AGENTS		
<i>cinacalcet hcl (30 mg tab, 60 mg tab)</i>	1	QL
<i>cinacalcet hcl 90 mg tab</i>	3	QL
CALCITONINS		
<i>calcitonin (salmon) 200 unit/act solution</i>	1	
CARNITINE REPLENISHER - AGENTS		
<i>levocarnitine (1 gm/10ml solution, 330 mg tab)</i>	2	
<i>levocarnitine sf</i>	2	
CKD AGENT-SODIUM/HYDROGEN EXCHANGER 3 (NHE3) INHIBITOR		
XPHOZAH	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
DOPAMINE RECEPTOR AGONISTS		
<i>cabergoline</i>	1	QL
GAA DEFICIENCY TREATMENT - AGENTS		
OPFOLDA	2	PA, QL
GROWTH HORMONES		
GENOTROPIN	4	PA, QL, SUM7 (Specialty Pharmacy Site of Care Lock)

Drug Name	Drug Tier	Requirements / Limits
GENOTROPIN MINIQUICK	4	PA, QL, SUM7 (Specialty Pharmacy Site of Care Lock)
ZOMACTON (5 MG RECON SOLN, 10 MG RECON SOLN)	4	PA, QL, SUM7 (Specialty Pharmacy Site of Care Lock)
ZOMACTON (FOR ZOMA-JET 10)	4	PA, QL, SUM7 (Specialty Pharmacy Site of Care Lock)
HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS		
<i>nitisinone</i>	4	PA, QL
HOMOCYSTINURIA TREATMENT - AGENTS		
<i>betaine</i>	1	PA, QL
CYSTADANE	4	PA, QL
HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS		
<i>calcitriol (0.25 mcg cap, 0.5 mcg cap)</i>	1	
<i>calcitriol 1 mcg/ml solution</i>	1	QL
CALCITRIOL 1 MCG/ML SOLUTION	1	QL
<i>paricalcitol (1 mcg cap, 2 mcg cap, 4 mcg cap)</i>	1	
HYPOPHOSPHATASIA (HPP) AGENTS		
STRENSIQ 18 MG/0.45ML SOLUTION	4	PA, QL
STRENSIQ 28 MG/0.7ML SOLUTION	4	PA, QL
STRENSIQ 40 MG/ML SOLUTION	4	PA, QL
STRENSIQ 80 MG/0.8ML SOLUTION	4	PA, QL
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPRON DEPOT-PED (1-MONTH)	4	QL, SUM7 (Specialty Pharmacy Lock)
LUPRON DEPOT-PED (3-MONTH)	4	QL, SUM7 (Specialty Pharmacy Lock)
OVULATION STIMULANTS-GONADOTROPINS		
CHORIONIC GONADOTROPIN	2	PA
NOVAREL	3	PA

Drug Name	Drug Tier	Requirements / Limits
PREGNYL	3	PA
PARATHYROID HORMONE AND DERIVATIVES		
TYMLOS	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
PHENYLKETONURIA TREATMENT - AGENTS		
<i>javygtor</i>	4	PA, QL
<i>sapropterin dihydrochloride (100 mg packet, 500 mg packet)</i>	4	PA, QL
<i>sapropterin dihydrochloride 100 mg tab</i>	4	PA, QL
<i>zelvysia</i>	4	PA, QL
RANK LIGAND (RANKL) INHIBITORS		
BILDYOS	4	QL
JUBBONTI	4	QL
SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)		
OSPHENA	3	QL
<i>raloxifene hcl</i>	1	QL
SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS		
<i>tolvaptan (15 mg tab, 30 mg tab)</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>tolvaptan (hyponatremia) 15 mg tab</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>tolvaptan (hyponatremia) 30 mg tab</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
SOMATOSTATIC AGENTS		
BYNFEZIA PEN	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>octreotide acetate (10 mg kit, 20 mg kit, 30 mg kit)</i>	4	QL, SUM7 (Specialty Pharmacy Lock)
OCTREOTIDE ACETATE (100 MCG/ML SOLN PRSYR, 500 MCG/ML SOLN PRSYR)	2	QL, SUM7 (Specialty Pharmacy Lock)
<i>octreotide acetate 100 mcg/ml solution</i>	2	QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
<i>octreotide acetate 1000 mcg/ml solution</i>	2	QL, SUM7 (Specialty Pharmacy Lock)
<i>octreotide acetate 200 mcg/ml solution</i>	2	QL, SUM7 (Specialty Pharmacy Lock)
OCTREOTIDE ACETATE 50 MCG/ML SOLN PRSYR	2	QL, SUM7 (Specialty Pharmacy Lock)
<i>octreotide acetate 50 mcg/ml solution</i>	2	QL, SUM7 (Specialty Pharmacy Lock)
<i>octreotide acetate 500 mcg/ml solution</i>	2	QL, SUM7 (Specialty Pharmacy Lock)
SANDOSTATIN	4	PA, SUM7 (Specialty Pharmacy Lock)
UREA CYCLE DISORDER - AGENTS		
OLPRUVA (2 GM DOSE)	4	PA, QL
OLPRUVA (3 GM DOSE)	4	PA, QL
OLPRUVA (4 GM DOSE)	4	PA, QL
OLPRUVA (5 GM DOSE)	4	PA, QL
OLPRUVA (6 GM DOSE)	4	PA, QL
OLPRUVA (6.67 GM DOSE)	4	PA, QL
PHEBURANE	4	PA, QL
VASOPRESSIN		
<i>desmopressin ace spray refrig</i>	1	QL
<i>desmopressin acetate (0.1 mg tab, 0.2 mg tab)</i>	1	QL
DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION	1	QL, SUM7 (Specialty Pharmacy Lock)
<i>desmopressin acetate 4 mcg/ml solution</i>	1	QL, SUM7 (Specialty Pharmacy Lock)
<i>desmopressin acetate pf</i>	1	QL, SUM7 (Specialty Pharmacy Lock)
<i>desmopressin acetate spray</i>	1	QL
ESTROGENS (CONTINUED)		
ESTROGEN & ANDROGEN		
<i>est estrogens-methyltest</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>est estrogens-methyltest ds</i>	1	QL
<i>est estrogens-methyltest hs</i>	1	QL
ESTROGEN & PROGESTIN		
<i>abigale</i>	1	QL
<i>abigale lo</i>	1	QL
<i>amabelz</i>	1	QL
<i>estradiol-norethindrone acet</i>	1	QL
<i>fyavolv</i>	1	
<i>jinteli</i>	1	
<i>mimvey</i>	1	QL
<i>norethindrone-eth estradiol</i>	1	
PREMPHASE	3	QL
PREMPRO	3	QL
ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB		
DUAVEE	2	QL
DEPO-ESTRADIOL	3	
<i>dotti</i>	1	QL
<i>estradiol (0.025 mg/24hr patch tw, 0.0375 mg/24hr patch tw, 0.05 mg/24hr patch tw, 0.075 mg/24hr patch tw, 0.1 mg/24hr patch tw)</i>	1	QL
<i>estradiol (0.025 mg/24hr patch wk, 0.0375 mg/24hr patch wk, 0.05 mg/24hr patch wk, 0.06 mg/24hr patch wk, 0.075 mg/24hr patch wk, 0.1 mg/24hr patch wk)</i>	1	
<i>estradiol (0.25 mg/0.25gm gel, 0.5 mg/0.5gm gel, 0.75 mg/0.75gm gel, 1 mg/gm gel)</i>	2	
<i>estradiol (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	1	QL
<i>estradiol 0.75 mg/1.25 gm (0.06%) gel</i>	1	QL
<i>estradiol valerate</i>	1	
EVAMIST	3	QL

Drug Name	Drug Tier	Requirements / Limits
<i>lyllana</i>	1	QL
MENEST	3	QL
PREMARIN (0.3 MG TAB, 0.45 MG TAB, 0.625 MG TAB, 0.9 MG TAB, 1.25 MG TAB)	2	
FLUOROQUINOLONES (CONTINUED)		
<i>ciprofloxacin hcl (250 mg tab, 500 mg tab, 750 mg tab)</i>	1	
<i>levofloxacin (25 mg/ml solution, 250 mg tab, 500 mg tab, 750 mg tab)</i>	1	
<i>moxifloxacin hcl 400 mg tab</i>	1	
OFLOXACIN (300 MG TAB, 400 MG TAB)	1	
GASTROINTESTINAL AGENTS - MISC. (CONTINUED)		
GALLSTONE SOLUBILIZING AGENTS		
<i>ursodiol (250 mg tab, 300 mg cap, 500 mg tab)</i>	2	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium 100 mg/5ml conc</i>	2	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone</i>	2	AGE, QL
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl (5 mg tab, 5 mg/5ml solution, 10 mg tab, 10 mg/10ml solution)</i>	1	
HEPATOTROPICS - THYROID HORMONE RECEPTOR-BETA AGONISTS		
REZDIFFRA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
LINZESS	2	QL
IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS		
<i>alosetron hcl</i>	1	ST, QL
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>mesalamine (1.2 gm tab dr, 400 mg cap dr, 800 mg tab dr)</i>	2	QL
<i>mesalamine 1000 mg suppos</i>	1	QL
<i>mesalamine 4 gm enema</i>	2	
<i>mesalamine er 0.375 gm cap er 24h</i>	2	QL
<i>mesalamine er 500 mg cap er</i>	2	QL
<i>sulfasalazine</i>	1	
INTEGRIN RECEPTOR ANTAGONISTS		
ENTYVIO PEN	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
INTERLEUKIN ANTAGONISTS		
SKYRIZI (180 MG/1.2ML SOLN CART, 360 MG/2.4ML SOLN CART)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
INTESTINAL ACIDIFIERS		
<i>enulose</i>	1	
<i>generlac</i>	1	
<i>lactulose encephalopathy</i>	1	
LIVE FECAL MICROBIOTA (HUMAN)		
VOWST	4	ST, QL
PHOSPHATE BINDER AGENTS		
<i>calcium acetate (phos binder)</i>	1	
<i>calcium acetate 667 mg tab</i>	1	
<i>lanthanum carbonate (500 mg chew tab, 750 mg chew tab)</i>	4	PA, QL
<i>lanthanum carbonate 1000 mg chew tab</i>	4	PA, QL
<i>sevelamer carbonate (0.8 gm packet, 2.4 gm packet)</i>	4	ST
<i>sevelamer carbonate 800 mg tab</i>	1	
<i>sevelamer hcl</i>	4	ST
TUMOR NECROSIS FACTOR ALPHA BLOCKERS		
CIMZIA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
CIMZIA (1 SYRINGE)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
CIMZIA (2 SYRINGE)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
CIMZIA-STARTER	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
GENITOURINARY AGENTS - MISCELLANEOUS (CONTINUED)		
5-ALPHA REDUCTASE INHIBITORS		
<i>dutasteride</i>	1	QL
<i>finasteride 5 mg tab</i>	1	QL
ALPHA 1-ADRENOCEPTOR ANTAGONISTS		
<i>alfuzosin hcl er</i>	1	QL
<i>silodosin</i>	1	QL
<i>tamsulosin hcl</i>	1	QL
ANTI-INFECTIVE GENITOURINARY IRRIGANTS		
NEOMYCIN-POLYMYXIN B GU	1	
CITRATES		
<i>pot & sod cit-cit ac</i>	1	
<i>potassium citrate er</i>	1	
POTASSIUM CITRATE-CITRIC ACID	1	
<i>sod citrate-citric acid</i>	1	
SODIUM CITRATE-CITRIC ACID	1	
TRICITRATES	1	
CYSTINOSIS AGENTS		
CYSTAGON	2	
GENITOURINARY IRRIGANTS		
<i>acetic acid 0.25 % solution</i>	1	
ARGYLE STERILE SALINE	1	

Drug Name	Drug Tier	Requirements / Limits
CURITY STERILE SALINE	1	
RENACIDIN	3	
SODIUM CHLORIDE 0.9 % SOLUTION	1	
PROSTATIC HYPERTROPHY AGENT COMBINATIONS		
<i>dutasteride-tamsulosin hcl</i>	1	QL
URINARY ANALGESICS		
<i>phenazo 200 mg tab</i>	1	
PHENAZOPYRIDINE HCL (100 MG TAB, 200 MG TAB)	1	
URINARY STONE AGENTS		
<i>tiopronin 100 mg tab</i>	1	QL
GOUT AGENTS (CONTINUED)		
GOUT AGENT COMBINATIONS		
<i>colchicine-probenecid</i>	1	
<i>allopurinol (100 mg tab, 300 mg tab)</i>	1	
<i>colchicine 0.6 mg tab</i>	1	QL
<i>febuxostat</i>	1	QL
URICOSURICS		
<i>probenecid</i>	1	
HEMATOLOGICAL AGENTS - MISC. (CONTINUED)		
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant acetate</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
<i>sajazir</i>	4	PA
DIRECT-ACTING P2Y12 INHIBITORS		
<i>ticagrelor</i>	1	QL
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline er</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PHOSPHODIESTERASE III INHIBITORS		
<i>cilostazol</i>	1	
PLATELET AGGREGATION INHIBITOR COMBINATIONS		
<i>aspirin-dipyridamole er</i>	2	
PLATELET AGGREGATION INHIBITORS		
<i>dipyridamole (25 mg tab, 50 mg tab, 75 mg tab)</i>	2	
QUINAZOLINE AGENTS		
<i>anagrelide hcl</i>	2	
THIENOPYRIDINE DERIVATIVES		
<i>clopidogrel bisulfate</i>	1	QL
<i>prasugrel hcl</i>	1	QL
HEMATOPOIETIC AGENTS (CONTINUED)		
AGENTS FOR GAUCHER DISEASE		
<i>miglustat</i>	4	PA, QL
<i>yargesa</i>	4	PA, QL
COBALAMINS		
<i>cyanocobalamin (1000 mcg/ml solution, 2000 mcg/ml solution)</i>	1	QL
<i>cyanocobalamin 500 mcg/0.1ml solution</i>	1	QL
FOLIC ACID/FOLATES		
<i>cvs folic acid</i>	1	
<i>folate</i>	1	
<i>folic acid (1 mg tab, 400 mcg tab, 800 mcg tab)</i>	1	
<i>ft folic acid</i>	1	
<i>gnp folic acid</i>	1	
<i>hm folic acid</i>	1	
<i>kp folic acid 800 mcg tab</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>px folic acid</i>	1	
<i>qc folic acid</i>	1	
<i>ra folic acid</i>	1	
<i>sm folic acid</i>	1	
<i>true folic acid 400 mcg tab</i>	1	
<i>yl folic acid</i>	1	
IRON		
<i>bprotected pedia iron</i>	1	AGE, QL
<i>fe-vite iron</i>	1	AGE, QL
<i>fer-in-sol</i>	1	AGE
<i>ferrous sulfate (75 (15 fe) mg/ml solution, 220 (44 fe) mg/5ml solution, 300 (60 fe) mg/5ml solution, 300 mg/6.8ml solution)</i>	1	AGE, QL
<i>iron (ferrous sulfate) 75 (15 fe) mg/ml solution</i>	1	AGE, QL
<i>iron infant & toddler</i>	1	AGE, QL
<i>iron infant/toddler</i>	1	AGE, QL
<i>iron supplement</i>	1	AGE, QL
<i>iron supplement childrens</i>	1	AGE, QL
<i>one vite ferrous sulfate</i>	1	AGE, QL
<i>pc pediatric iron drops</i>	1	AGE, QL
IRON COMBINATIONS		
MULTIGEN	3	QL
HEMOSTATICS (CONTINUED)		
HEMOSTATICS - SYSTEMIC		
<i>aminocaproic acid (500 mg tab, 1000 mg tab)</i>	2	QL
<i>aminocaproic acid 0.25 gm/ml solution</i>	2	QL
<i>tranexamic acid 650 mg tab</i>	1	QL
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS (CONTINUED)		
BARBITURATE HYPNOTICS		
<i>phenobarbital (15 mg tab, 16.2 mg tab, 20 mg/5ml elixir, 30 mg tab, 30 mg/7.5ml elixir, 32.4 mg tab, 60 mg tab, 60 mg/15ml elixir, 64.8 mg)</i>	1	

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<i>tab, 97.2 mg tab, 100 mg tab)</i>		
Drug Name	Drug Tier	Requirements / Limits
BENZODIAZEPINE HYPNOTICS		
<i>estazolam</i>	1	QL
FLURAZEPAM HCL (15 MG CAP, 30 MG CAP)	1	ST, QL
<i>temazepam (15 mg cap, 30 mg cap)</i>	1	QL
<i>triazolam</i>	1	QL
NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS		
<i>eszopiclone</i>	1	QL
<i>zaleplon</i>	1	QL
<i>zolpidem tartrate (5 mg tab, 10 mg tab)</i>	1	QL
<i>zolpidem tartrate er</i>	1	QL
SELECTIVE MELATONIN RECEPTOR AGONISTS		
<i>ramelteon</i>	1	QL
LAXATIVES (CONTINUED)		
BOWEL EVACUANT COMBINATIONS		
CLENPIQ 10-3.5-12 MG-GM -GM/175ML SOLUTION	2	
GAVILYTE-C	3	
<i>gavilyte-g</i>	1	
<i>na sulfate-k sulfate-mg sulf</i>	1	
<i>peg 3350-kcl-na bicarb-nacl</i>	1	
<i>peg-3350/electrolytes</i>	1	
<i>peg-3350/electrolytes/ascorbat</i>	1	
<i>peg-kcl-nacl-nasulf-na asc-c</i>	1	
PEG-PREP	3	
LAXATIVES - MISCELLANEOUS		
<i>constulose</i>	1	
<i>lactulose (10 gm/15ml solution, 20 gm/30ml solution)</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
MACROLIDES (CONTINUED)		
AZITHROMYCIN		
<i>azithromycin (100 mg/5ml recon susp, 200 mg/5ml recon susp)</i>	1	
<i>azithromycin (250 mg tab, 500 mg tab)</i>	1	QL
CLARITHROMYCIN		
CLARITHROMYCIN (125 MG/5ML RECON SUSP, 250 MG TAB, 250 MG/5ML RECON SUSP, 500 MG TAB)	1	
<i>clarithromycin er</i>	1	
ERYTHROMYCINS		
<i>e.e.s. 400</i>	2	
<i>erythromycin (250 mg tab dr, 333 mg tab dr, 500 mg tab dr)</i>	2	
<i>erythromycin base (250 mg cp dr part, 250 mg tab, 250 mg tab dr, 333 mg tab dr, 500 mg tab, 500 mg tab dr)</i>	2	
<i>erythromycin ethylsuccinate (200 mg/5ml recon susp, 400 mg/5ml recon susp)</i>	2	AGE
<i>erythromycin ethylsuccinate 400 mg tab</i>	2	
FIDAXOMICIN		
<i>fidaxomicin</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
MEDICAL DEVICES AND SUPPLIES (CONTINUED)		
CERVICAL CAPS		
FEMCAP	2	
CONDOMS - FEMALE		
FC2 FEMALE CONDOM	2	QL
CONDOMS - MALE		
AIMSCO LUBRICATED	2	QL

Drug Name	Drug Tier	Requirements / Limits
CONDOMS	1	QL
DUREX EXTRA SENSITIVE THIN	2	QL
DUREX REALFEEL	2	QL
DUREX TROPICAL	2	QL
FANTASY LUBRICATED	2	QL
FANTASY LUBRICATED/SPERMICIDE	2	QL
K-Y ME & YOU EXTRA LUBRICATED	2	QL
K-Y ME & YOU INTENSE	2	QL
KAMELEON LUBRICATED	2	QL
KIMONO	2	QL
KIMONO COLORS	2	QL
KIMONO MAXX-LARGE FLARE	2	QL
KIMONO MICRO THIN	2	QL
KIMONO MICRO THIN PLUS	2	QL
KIMONO PLUS	2	QL
KIMONO PS	2	QL
KIMONO PS PLUS	2	QL
KIMONO SENSATION	2	QL
KIMONO SENSATION PLUS	2	QL
KIMONO SPECIAL	2	QL
MAXX	2	QL
MAXX PLUS	2	QL
PREMIUM CONDOMS LUBRICATED	2	QL
REALITY LATEX CONDOMS	2	QL
REALITY LATEX/ULTRA TEXTURED	2	QL
REALITY LATEX/ULTRA THIN	2	QL
TROJAN BARESKIN	2	QL
TROJAN ENZ	2	QL

Drug Name	Drug Tier	Requirements / Limits
TROJAN MAGNUM	2	QL
TROJAN ULTRA RIBBED LUBRICATED	2	QL
TROJAN ULTRA THIN	2	QL
TROJAN ULTRA THIN/SPERMICIDAL	2	QL
TROJAN-ENZ LUBRICATED	2	QL
TROJAN-ENZ/SPERMICIDAL	2	QL
TRUE COVER	2	QL
TRUSTEX COLOR CONDOMS + LUBE	2	QL
TRUSTEX LUB/RIBBED/STUDED	2	QL
TRUSTEX LUB/SPERMICIDE EX ST	2	QL
TRUSTEX LUB/SPERMICIDE XL	2	QL
TRUSTEX LUBRICATED	2	QL
TRUSTEX LUBRICATED EX LARGE	2	QL
TRUSTEX LUBRICATED EXTRA ST	2	QL
TRUSTEX LUBRICATED/SPERMICIDE	2	QL
TRUSTEX NATURAL CONDOMS + LUBE	2	QL
TRUSTEX NON-LUBRICATED	2	QL
TRUSTEX RIA LUB/SPERMICIDE	2	QL
TRUSTEX RIA LUBRICATED	2	QL
TRUSTEX RIA NON-LUBRICATED	2	QL
TRUSTEX-NONOXYNOL-9/RIB/STUD	2	QL
DIAPHRAGMS		
OMNIFLEX DIAPHRAGM	2	QL
GLUCOSE MONITOR & KETONE MONITOR COMBINATIONS		
PRECISION XTRA-GLUCOSE/KETONE	2	QL
GLUCOSE MONITORING TEST SUPPLIES		
1ST TIER UNILET COMFORTOUCH	1	QL
ACCU-CHEK FASTCLIX LANCETS	1	QL

Drug Name	Drug Tier	Requirements / Limits
ACCU-CHEK SAFE-T PRO LANCETS	1	QL
ACCU-CHEK SOFTCLIX LANCETS	1	QL
ACTI-LANCE 28G	1	QL
ACTI-LANCE LITE LANCETS 28G	1	QL
ACTI-LANCE SPECIAL LANCETS 17G	1	QL
ACTI-LANCE UNIVERSAL 23G	1	QL
ADVANCED MOBILE LANCET	1	QL
ADVANTAGE SAFETY LANCETS 28G	1	QL
ADVOCATE LANCETS	1	QL
ADVOCATE LANCETS 30G	1	QL
ADVOCATE SAFETY LANCETS	1	QL
ADVOCATE SAFETY LANCETS 21G	1	QL
ADVOCATE SAFETY LANCETS 23G	1	QL
ADVOCATE SAFETY LANCETS 26G	1	QL
ADVOCATE SAFETY LANCETS 28G	1	QL
AGAMATRIX ULTRA-THIN LANCETS	1	QL
AIMSCO TWIST LANCETS 32G	1	QL
AIMSCO TWIST LANCETS 33G	1	QL
AQUALANCE LANCETS 30G	1	QL
ASSURE COMFORT LANCETS 28G	1	QL
ASSURE HAEMOLANCE PLUS HIGH	1	QL
ASSURE HAEMOLANCE PLUS LOW	1	QL
ASSURE HAEMOLANCE PLUS MICRO	1	QL
ASSURE HAEMOLANCE PLUS NORMAL	1	QL
ASSURE HAEMOLANCE PLUS PED	1	QL
ASSURE LANCE LANCETS	1	QL
ASSURE LANCE LANCETS 21G	1	QL
ASSURE LANCE PLUS SAFETY 25G	1	QL

Drug Name	Drug Tier	Requirements / Limits
ASSURE LANCE PLUS SAFETY 30G	1	QL
ASSURE LANCE SAFETY LANCET 28G	1	QL
AURORA LANCET SUPER THIN 30G	1	QL
AURORA LANCET THIN 23G	1	QL
BD MICROTAINER LANCETS	1	QL
CAREONE LANCET SUPER THIN 30G	1	QL
CAREONE LANCET THIN 23G	1	QL
CARESENS LANCETS	1	QL
CARESENS LANCETS 30G	1	QL
CARETOUCH SAFETY LANCETS	1	QL
CARETOUCH SAFETY LANCETS 26G	1	QL
CARETOUCH TWIST LANCETS 28G	1	QL
CARETOUCH TWIST LANCETS 30G	1	QL
CARETOUCH TWIST LANCETS 33G	1	QL
CARETOUCH TWIST MC LANCETS 30G	1	QL
CHOSEN LANCETS 30G	1	QL
CHOSEN SAFETY LANCETS 28G	1	QL
CLEANLET LANCETS 28G	1	QL
CLEVER CHEK LANCETS	1	QL
CLEVER CHOICE COMFORT EZ MISC	1	QL
CLEVER CHOICE LANCETS 21G	1	QL
CLEVER CHOICE LANCETS 23G	1	QL
CLEVER CHOICE LANCETS 28G	1	QL
COAGUCHEK LANCETS	1	QL
COMFORT ASSURED LANCETS 28G	1	QL
COMFORT ASSURED LANCETS 33G	1	QL
COMFORT LANCETS	1	QL
COMFORT TOUCH LANCETS 31G	1	QL

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Drug Name	Drug Tier	Requirements / Limits
COMFORT TOUCH PLUS LANCETS 28G	1	QL
COMFORT TOUCH PLUS LANCETS 30G	1	QL
COMFORT TOUCH TWIST LANCET 30G	1	QL
CVS LANCETS 21G	1	QL
CVS LANCETS MICRO THIN 33G	1	QL
CVS LANCETS ORIGINAL	1	QL
CVS LANCETS THIN 26G	1	QL
CVS LANCETS ULTRA THIN 30G	1	QL
CVS LANCETS ULTRA-THIN 30G	1	QL
CVS ULTRA THIN LANCETS	1	QL
DEXCOM G6 RECEIVER	2	ST, AGE, QL
DEXCOM G6 SENSOR	2	ST, AGE, QL
DEXCOM G6 TRANSMITTER	2	ST, AGE, QL
DEXCOM G7 15 DAY SENSOR	2	ST, AGE, QL
DEXCOM G7 RECEIVER	2	ST, AGE, QL
DEXCOM G7 SENSOR	2	ST, AGE, QL
DIATHRIVE LANCET ULTRA THIN 30	1	QL
DIATHRIVE LANCETS	1	QL
DROPLET LANCETS ULTRA THIN 30G	1	QL
DROPLET PERSONAL LANCETS 30G	1	QL
DROPSAFE ACTI-LANCE 23G	1	QL
DROPSAFE MEDLANCE LANCET 30G	1	QL
DRUG MART LANCETS THIN 26G	1	QL
DRUG MART ON-THE-GO LANCET 30G	1	QL
DRUG MART UNILET LANCETS 28G	1	QL
DRUG MART UNILET LANCETS 30G	1	QL
DRUG MART UNILET LANCETS 33G	1	QL
E-Z JECT LANCET MICRO-THIN 33G	1	QL

Drug Name	Drug Tier	Requirements / Limits
E-Z JECT LANCET SUPER THIN 30G	1	QL
E-Z JECT LANCETS	1	QL
E-Z JECT LANCETS 21G	1	QL
E-Z JECT LANCETS THIN 26G	1	QL
EASY COMFORT LANCETS	1	QL
EASY COMFORT LANCETS TWIST TOP	1	QL
EASY TOUCH LANCETS 21G	1	QL
EASY TOUCH LANCETS 23G	1	QL
EASY TOUCH LANCETS 26G	1	QL
EASY TOUCH LANCETS 28G	1	QL
EASY TOUCH LANCETS 28G/TWIST	1	QL
EASY TOUCH LANCETS 30G	1	QL
EASY TOUCH LANCETS 30G/TWIST	1	QL
EASY TOUCH LANCETS 32G	1	QL
EASY TOUCH LANCETS 32G/TWIST	1	QL
EASY TOUCH LANCETS 33G/TWIST	1	QL
EASY TOUCH SAFETY LANCETS 21G	1	QL
EASY TOUCH SAFETY LANCETS 23G	1	QL
EASY TOUCH SAFETY LANCETS 26G	1	QL
EASY TOUCH SAFETY LANCETS 28G	1	QL
EMBRACE LANCETS ULTRA THIN 30G	1	QL
EMBRACE PRESSURE ACTIVATED 21G	1	QL
EMBRACE PRESSURE ACTIVATED 28G	1	QL
ENLITE GLUCOSE SENSOR	3	PA, QL
EQL COLOR LANCETS 21G	1	QL
EQL COLOR LANCETS MICRO 33G	1	QL
EQL SUPER THIN LANCETS 30G	1	QL
EQL THIN LANCETS 26G	1	QL

Drug Name	Drug Tier	Requirements / Limits
EZ-LETS LANCETS 21G	1	QL
EZ-LETS LANCETS 26G	1	QL
EZ-LETS LANCETS 28G	1	QL
EZ-LETS LANCETS 30G	1	QL
FIFTY50 SAFETY SEAL LANCETS	1	QL
FIFTY50 UNILET LANCETS 33G	1	QL
FINE 30	1	QL
FINGERSTIX LANCETS	1	QL
FONDCIRCLE SINGLE USE LANCETS	1	QL
FORA LANCETS	1	QL
FREDS PHARMACY UNILET LANC 28G	1	QL
FREDS PHARMACY UNILET LANC 30G	1	QL
FREESTYLE FREEDOM LITE	2	QL
FREESTYLE LANCETS	1	QL
FREESTYLE LIBRE 14 DAY READER	2	ST, AGE, QL
FREESTYLE LIBRE 14 DAY SENSOR	2	ST, AGE, QL
FREESTYLE LIBRE 2 PLUS SENSOR	2	ST, AGE, QL
FREESTYLE LIBRE 2 READER	2	ST, AGE, QL
FREESTYLE LIBRE 2 SENSOR	2	ST, AGE, QL
FREESTYLE LIBRE 3 PLUS SENSOR	2	ST, QL
FREESTYLE LIBRE 3 READER	2	ST, AGE, QL
FREESTYLE LIBRE 3 SENSOR	2	ST, AGE, QL
FREESTYLE LIBRE READER	2	ST, AGE, QL
FREESTYLE LITE W/DEVICE KIT	2	QL
FREESTYLE PRECISION NEO SYSTEM	2	QL
FREESTYLE UNISTICK II LANCETS	1	QL
GENTEEL BUTTERFLY TOUCH LANCET	1	QL
GENTLE-LET GP LANCETS	1	QL

Drug Name	Drug Tier	Requirements / Limits
GENTLE-LET LANCETS	1	QL
GLOBAL INJECT EASE LANCETS 28G	1	QL
GLOBAL INJECT EASE LANCETS 30G	1	QL
GLUCOCOM LANCETS 28G	1	QL
GLUCOCOM LANCETS 30G	1	QL
GLUCOCOM LANCETS 33G	1	QL
GNP LANCETS 21G	1	QL
GNP LANCETS THIN 26G	1	QL
GNP STERILE LANCETS 28G	1	QL
GNP STERILE LANCETS 30G	1	QL
GNP STERILE LANCETS 33G	1	QL
GOJJI STERILE LANCETS	1	QL
GOODSENSE COLOR LANCETS 33G	1	QL
GOODSENSE LANCETS 26G UNIV	1	QL
GOODSENSE LANCETS 30G	1	QL
GOODSENSE LANCETS 30G UNIV	1	QL
GOODSENSE LANCETS 33G	1	QL
GOODSENSE LANCETS 33G UNIV	1	QL
GUARDIAN 4 GLUCOSE SENSOR	3	PA, AGE, QL
GUARDIAN 4 TRANSMITTER	3	PA, AGE, QL
GUARDIAN CONNECT TRANSMITTER	3	PA, AGE, QL
GUARDIAN LINK 3 TRANSMITTER	3	PA, AGE, QL
GUARDIAN REAL-TIME REPLACE PED	3	PA, AGE, QL
GUARDIAN SENSOR (3)	3	PA, AGE, QL
GUARDIAN SENSOR 3	3	PA, AGE, QL
H-E-B INCONTROL LANCETS 28G	1	QL
H-E-B INCONTROL LANCETS 30G	1	QL
H-E-B INCONTROL LANCETS 33G	1	QL

Drug Name	Drug Tier	Requirements / Limits
HAEMOLANCE	1	QL
HAEMOLANCE LOW FLOW LANCETS	1	QL
HAEMOLANCE PLUS	1	QL
HAEMOLANCE PLUS HIGH FLOW	1	QL
HAEMOLANCE PLUS LOW FLOW	1	QL
HAEMOLANCE PLUS MAX FLOW	1	QL
HAEMOLANCE PLUS PEDIATRIC FLOW	1	QL
HEALTHY ACCENTS UNILET LANCETS	1	QL
HY-VEE LANCETS	1	QL
HY-VEE THIN LANCETS	1	QL
IN TOUCH STERILE LANCETS 30G	1	QL
KINNEY LANCETS	1	QL
KINNEY THIN LANCETS	1	QL
KROGER HEALTHPRO LANCET 26G	1	QL
KROGER LANCETS	1	QL
KROGER LANCETS 21G	1	QL
KROGER LANCETS MICRO THIN 33G	1	QL
KROGER LANCETS SUPER THIN	1	QL
KROGER LANCETS THIN	1	QL
KROGER LANCETS THIN 26G	1	QL
KROGER LANCETS ULTRATHIN 30G	1	QL
LANCETS	1	QL
LANCETS 28G THIN	1	QL
LANCETS 30G	1	QL
LANCETS 33G	1	QL
LANCETS MICRO THIN 33G	1	QL
LANCETS SUPER THIN	1	QL
LANCETS SUPER THIN 28G	1	QL

Drug Name	Drug Tier	Requirements / Limits
LANCETS THIN	1	QL
LANCETS ULTRA THIN	1	QL
LANCETS ULTRA THIN 30G	1	QL
LIBERTY MEDICAL LANCETS	1	QL
LITE TOUCH LANCETS	1	QL
LITETOUCH LANCETS	1	QL
LIVE BETTER LANCET SUPER THIN	1	QL
LIVE BETTER LANCET ULTRA THIN	1	QL
LONGS LANCETS STANDARD	1	QL
LONGS LANCETS THIN	1	QL
LONGS LANCETS ULTRA THIN	1	QL
MEDICHOICE SAFETY LANCET	1	QL
MEDICHOICE SAFETY LANCET EXTRA	1	QL
MEDICHOICE SAFETY LANCET NORM	1	QL
MEDLANCE EXTRA 21G	1	QL
MEDLANCE LITE 25G	1	QL
MEDLANCE PLUS EXTRA 21G	1	QL
MEDLANCE PLUS LANCETS	1	QL
MEDLANCE PLUS LITE 25G	1	QL
MEDLANCE PLUS SPECIAL 0.8MM	1	QL
MEDLANCE PLUS SUPERLITE 30G	1	QL
MEDLANCE PLUS UNIVERSAL 21G	1	QL
MEDLANCE UNIVERSAL 21G	1	QL
MEIJER LANCETS	1	QL
MEIJER LANCETS THIN	1	QL
MEIJER LANCETS UNIVERSAL 21G	1	QL
MEIJER LANCETS UNIVERSAL 30G	1	QL
MEIJER LANCETS UNIVERSAL 33G	1	QL

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Drug Name	Drug Tier	Requirements / Limits
MEIJER SUPER THIN LANCETS	1	QL
MICROLET LANCETS	1	QL
MICROLET NEXT LANCETS	1	QL
MINILINK REAL-TIME TRANSMITTER	3	PA, AGE, QL
MINIMED 630G GUARDIAN PRESS	3	PA, AGE, QL
MINIMED INSTINCT GLUC SENSOR	3	PA
MM TWIST LANCETS	1	QL
MOBILE LANCETS 30G	1	QL
MONOLET LANCETS	1	QL
MONOLET OPD LANCETS	1	QL
MONOLETTOR SAFETY LANCETS	1	QL
MPD SAFETY LANCET 21G	1	QL
MPD SAFETY LANCET 23G	1	QL
MPD SAFETY LANCET 28G	1	QL
MPD SAFETY LANCET 30G	1	QL
MYGLUCOHEALTH LANCETS 30G	1	QL
NOVA SAFETY LANCETS 23G	1	QL
NOVA SAFETY LANCETS 28G	1	QL
NOVA SUREFLEX LANCETS	1	QL
ONETOUCH DELICA PLUS LANCET30G	1	QL
ONETOUCH DELICA PLUS LANCET33G	1	QL
ONETOUCH DELICA SAFETY LANCING	1	QL
ONETOUCH ULTRASOFT 2 LANCETS	1	QL
ONETOUCH ULTRASOFT LANCETS	1	QL
PARADIGM REAL-TIME TRANSMITTER	3	PA, AGE, QL
PC LANCETS SUPER THIN 30G	1	QL
PERFECT LANCETS 28G	1	QL
PERFECT LANCETS 30G	1	QL

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Drug Name	Drug Tier	Requirements / Limits
PERFECT POINT SAFETY LANCETS	1	QL
PHARMACIST CHOICE LANCETS	1	QL
PHARMACY COUNTER LANCETS	1	QL
PIP LANCETS 28G	1	QL
PIP LANCETS 30G	1	QL
PRECISION THINS GP LANCETS	1	QL
PREFERRED PLUS LANCETS COLORED	1	QL
PREFERRED PLUS LANCETS THIN	1	QL
PRO COMFORT LANCETS 30G	1	QL
PRO COMFORT LANCETS 31G	1	QL
PRO COMFORT SAFETY LANCETS 30G	1	QL
PRODIGY LANCETS 28G	1	QL
PRODIGY SAFETY LANCETS 26G	1	QL
PRODIGY TWIST TOP LANCETS 28G	1	QL
PSS SELECT GP LANCETS	1	QL
PSS SELECT SAFETY LANCETS	1	QL
PURE COMFORT LANCETS 30G	1	QL
PURE COMFORT SAFETY LANCET 30G	1	QL
PX LANCETS MICROTHIN 33G	1	QL
PX LANCETS ULTRA THIN	1	QL
PX LANCETS ULTRA THIN 28G	1	QL
QC LANCETS SUPER THIN 30G	1	QL
QC LANCETS ULTRA THIN	1	QL
QC UNILET LANCETS 28G	1	QL
QC UNILET LANCETS MICRO THIN	1	QL
RA E-ZJECT LANCETS 28G	1	QL
RA E-ZJECT LANCETS THIN 26G	1	QL
RA E-ZJECT LANCETS THIN 28G	1	QL

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Drug Name	Drug Tier	Requirements / Limits
RA E-ZJECT LANCETS ULTRA THIN	1	QL
READYLANCE SAFETY LANCETS	1	QL
REALITY LANCETS	1	QL
REALITY TRIGGER LANCETS	1	QL
RELION LANCET DEVICES 30G	1	QL
RELION LANCETS	1	QL
RELION LANCETS MICRO-THIN 33G	1	QL
RELION LANCETS THIN 26G	1	QL
RELION LANCETS ULTRA-THIN 30G	1	QL
RELION ULTRA THIN LANCETS 30G	1	QL
RELION ULTRA THIN PLUS LANCETS	1	QL
REXALL LANCETS ULTRA THIN 30G	1	QL
RIGHTEST GL300 LANCETS	1	QL
SAFE-T-LANCE	1	QL
SAFE-T-LANCE PLUS	1	QL
SAFETY LANCET 30G/PRESSURE ACT	1	QL
SAFETY LANCETS	1	QL
SAFETY LANCETS 21G	1	QL
SAFETY LANCETS 23G	1	QL
SAFETY LANCETS 28G	1	QL
SAPS HEALTH PLUS LANCETS	1	QL
SAPS HEALTH TWIST TOP LANCETS	1	QL
SAPS TWIST TOP LANCETS	1	QL
SAPSCARE TWIST TOP LANCETS	1	QL
SB LANCETS THIN	1	QL
SB LANCETS ULTRA THIN	1	QL
SENSILANCE SAFETY LANCETS 21G	1	QL
SENSILANCE SAFETY LANCETS 26G	1	QL

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Drug Name	Drug Tier	Requirements / Limits
SENSILANCE SAFETY LANCETS 28G	1	QL
SHOPKO ON-THE-GO LANCETS 30G	1	QL
SHOPKO UNILET LANCETS 28G	1	QL
SHOPKO UNILET LANCETS 30G	1	QL
SINGLE-LET	1	QL
SM LANCETS 33G	1	QL
SMART SENSE COLOR LANCETS 33G	1	QL
SMART SENSE STANDARD LANCETS	1	QL
SMART SENSE SUPER THIN LANCETS	1	QL
SMART SENSE THIN LANCETS 26G	1	QL
SMARTTEST LANCETS 28G	1	QL
SOLUS V2 LANCETS 28G	1	QL
SOLUS V2 TWIST LANCETS 30G	1	QL
STERILANCE TL	1	QL
SUPER THIN LANCETS	1	QL
SURE COMFORT LANCETS 18G	1	QL
SURE COMFORT LANCETS 21G	1	QL
SURE COMFORT LANCETS 23G	1	QL
SURE COMFORT LANCETS 28G	1	QL
SURE COMFORT LANCETS 30G	1	QL
SURELITE LANCETS	1	QL
TECHLITE AST LANCETS	1	QL
TECHLITE LANCETS	1	QL
TECHLITE LANCETS 26G	1	QL
TECHLITE LANCETS 30G	1	QL
TGT LANCET MICRO THIN 33G	1	QL
TGT LANCET THIN 26G	1	QL
TGT LANCET ULTRA THIN 30G	1	QL

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Drug Name	Drug Tier	Requirements / Limits
THINLETS GP LANCETS	1	QL
TODAYS HEALTH THIN LANCETS 28G	1	QL
TODAYS HEALTH THIN LANCETS 30G	1	QL
TOPCARE LANCETS MICRO-THIN 33G	1	QL
TRAVEL LANCETS	1	QL
TRAVEL LANCETS ADVANCED 28G	1	QL
TRUE COMFORT SAFETY LANCETS	1	QL
TRUE COMFORT TWIST TOP LANCETS	1	QL
TRUEPLUS LANCETS 26G	1	QL
TRUEPLUS LANCETS 28G	1	QL
TRUEPLUS LANCETS 30G	1	QL
TRUEPLUS LANCETS 33G	1	QL
TRUEPLUS SAFETY LANCETS 28G	1	QL
TWIST TOP LANCETS 30G	1	QL
ULTILET CLASSIC LANCETS	1	QL
ULTILET LANCETS	1	QL
ULTILET SAFETY LANCETS	1	QL
ULTILET SAFETY LANCETS 23G	1	QL
ULTRA THIN LANCETS 31G	1	QL
ULTRA-CARE LANCETS 30G	1	QL
ULTRA-THIN II AUTO LANCET	1	QL
ULTRA-THIN II LANCETS	1	QL
UNILET COMFORTOUCH LANCET	1	QL
UNILET EXCELITE	1	QL
UNILET EXCELITE II	1	QL
UNILET G.P. LANCET	1	QL
UNILET G.P. SUPERLITE LANCET	1	QL
UNILET GP 28 ULTRA THIN	1	QL

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Drug Name	Drug Tier	Requirements / Limits
UNILET LANCET	1	QL
UNILET MICRO-THIN 33G	1	QL
UNILET SUPER-THIN 30G	1	QL
UNILET SUPERLITE LANCET	1	QL
UNILET ULTRA-THIN 28G	1	QL
UNISTIK 1	1	QL
UNISTIK 2	1	QL
UNISTIK 2 COMFORT	1	QL
UNISTIK 2 EXTRA	1	QL
UNISTIK 2 NEONATAL	1	QL
UNISTIK 2 NORMAL	1	QL
UNISTIK 2 SUPER	1	QL
UNISTIK 3	1	QL
UNISTIK 3 COMFORT	1	QL
UNISTIK 3 EXTRA	1	QL
UNISTIK 3 GENTLE	1	QL
UNISTIK 3 NEONATAL	1	QL
UNISTIK 3 NORMAL	1	QL
UNISTIK CZT COMFORT	1	QL
UNISTIK CZT NORMAL	1	QL
UNISTIK NORMAL	1	QL
UNISTIK PRO SAFETY LANCET	1	QL
UNISTIK SAFETY LANCETS 28G	1	QL
UNISTIK SAFETY LANCETS 30G	1	QL
UNISTIK TOUCH SAFETY LANC 21G	1	QL
UNISTIK TOUCH SAFETY LANC 23G	1	QL
UNISTIK TOUCH SAFETY LANC 28G	1	QL
UNISTIK TOUCH SAFETY LANC 30G	1	QL

Drug Name	Drug Tier	Requirements / Limits
UNIVERSAL 1 LANCETS THIN 26G	1	QL
UNIVERSAL 1 LANCETS THIN 33G	1	QL
UNIVERSAL 1 LANCETS ULTRA THIN	1	QL
VALUE PLUS LANCET STANDARD 21G	1	QL
VALUE PLUS LANCETS SUPER THIN	1	QL
VALUE PLUS LANCETS THIN 26G	1	QL
VALUMARK LANCET SUPER THIN 30G	1	QL
VALUMARK LANCET ULTRA THIN 28G	1	QL
VERIFINE SAFE LANCET MINI 21G	1	QL
VERIFINE SAFE LANCET MINI 23G	1	QL
VERIFINE SAFE LANCET MINI 28G	1	QL
VERIFINE SAFE LANCET MINI 30G	1	QL
VERIFINE UNIVERSAL LANCETS 28G	1	QL
VERIFINE UNIVERSAL LANCETS 30G	1	QL
VERIFINE UNIVERSAL LANCETS 33G	1	QL
VIDA MIA UNILET LANCETS 28G	1	QL
VIDA MIA UNILET LANCETS 30G	1	QL
VIVAGUARD LANCETS	1	QL
VIVAGUARD LANCETS 30G	1	QL
VIVAGUARD SAFETY LANCETS 28G	1	QL
WALGREENS ADV TRAVEL LANCETS	1	QL
WALGREENS LANCETS	1	QL
WALGREENS LANCETS MICRO THIN	1	QL
WALGREENS LANCETS SUPER THIN	1	QL
WALGREENS THIN LANCETS	1	QL
WALGREENS ULTRA THIN LANCETS	1	QL
ZEVRX TWIST TOP LANCETS 30G	1	QL
INSULIN ADMINISTRATION SUPPLIES		
ACCU-CHEK LINKASSIST	4	PA, QL

Drug Name	Drug Tier	Requirements / Limits
OMNIPOD 5 DEXG7G6 INTRO GEN 5	2	PA, QL
OMNIPOD 5 DEXG7G6 PODS GEN 5	2	PA, QL
OMNIPOD 5 G7 INTRO (GEN 5)	2	PA, QL
OMNIPOD 5 G7 PODS (GEN 5)	2	PA, QL
OMNIPOD 5 LIBRE2 G6 INTRO GEN5	2	PA, QL
OMNIPOD 5 LIBRE2 PLUS G6 PODS	2	PA, QL
OMNIPOD CLASSIC PDM (GEN 3)	2	
OMNIPOD CLASSIC PODS (GEN 3)	2	PA, QL
OMNIPOD DASH INTRO (GEN 4)	2	PA, QL
OMNIPOD DASH PDM (GEN 4)	2	
OMNIPOD DASH PODS (GEN 4)	2	PA, QL
NEEDLES & SYRINGES		
1ST TIER UNIFINE PENTIPS	3	QL
1ST TIER UNIFINE PENTIPS PLUS	3	QL
ABOUTTIME PEN NEEDLE	3	QL
ADVOCATE INSULIN PEN NEEDLE	3	QL
ADVOCATE INSULIN PEN NEEDLES	3	QL
ADVOCATE INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
ADVOCATE INSULIN SYRINGE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	3	QL
AQ INSULIN SYRINGE	3	QL
AQINJECT PEN NEEDLE	3	QL
ASSURE ID DUO PRO PEN NEEDLES	3	QL
ASSURE ID INSULIN SAFETY SYR	3	QL
ASSURE ID PRO PEN NEEDLES	3	QL
ASSURE ID SAFETY PEN NEEDLES	3	QL
AUM INSULIN SAFETY PEN NEEDLE	3	QL

Drug Name	Drug Tier	Requirements / Limits
AUM MINI INSULIN PEN NEEDLE	3	QL
AUM PEN NEEDLE	3	QL
AUM READYGARD DUO PEN NEEDLE	3	QL
AUM SAFETY PEN NEEDLE	3	QL
AURORA PEN NEEDLES	3	QL
AURORA UNIFINE PENTIPS	3	QL
AUTOPEN	1	
BARDIA BULB IRRIGATION SYRINGE	3	
BARDIA PISTON IRRIGATION SYR	3	
BD ALLERGY SYRINGE	3	
BD AUTOSHIELD DUO	3	QL
BD BLUNT FILL NEEDLE	3	
BD BLUNT FILL NEEDLE W/FILTER	3	
BD CONTROL SYRING LUER-LOK	3	
BD DISP NEEDLE	3	
BD DISP NEEDLES	3	
BD ECLIPSE LUER-LOK NEEDLE	3	
BD ECLIPSE NEEDLE	3	
BD ECLIPSE SHIELDED NEEDLE	3	
BD ECLIPSE SYRINGE	3	
BD ECLIPSE SYRINGE/NEEDLE	3	
BD FILTER NEEDLE	3	
BD HYPODERMIC NEEDLE	3	
BD INSULIN SYR ULTRAFINE II	3	QL
BD INSULIN SYRINGE (27G X 1/2" 1 ML MISC, 27.5G X 5/8" 2 ML MISC, U-100 1 ML MISC)	3	QL
BD INSULIN SYRINGE (X 1/2" 0.3 ML MISC, X 1/2" 0.5 ML MISC, X 1/2" 1 ML MISC)	1	QL
BD INSULIN SYRINGE HALF-UNIT	3	QL

Drug Name	Drug Tier	Requirements / Limits
BD INSULIN SYRINGE MICROFINE	3	QL
BD INSULIN SYRINGE U-500	3	QL
BD INSULIN SYRINGE U/F	3	QL
BD INSULIN SYRINGE U/F 1/2UNIT	3	QL
BD INSULIN SYRINGE ULTRAFINE (30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
BD INSULIN SYRINGE ULTRAFINE (X 1/2" 0.3 ML MISC, X 1/2" 0.5 ML MISC)	1	QL
BD INTEGRA NEEDLE	3	
BD INTEGRA SYRINGE	3	
BD LUER-LOCK SYRINGE	3	
BD LUER-LOK SYRINGE	3	
BD NOKOR ADMIX NEEDLE	3	
BD PEN	3	
BD PEN MINI	3	
BD PEN NEEDLE MICRO ULTRAFINE	3	QL
BD PEN NEEDLE MINI ULTRAFINE	3	QL
BD PEN NEEDLE NANO 2ND GEN	3	QL
BD PEN NEEDLE NANO ULTRAFINE	3	QL
BD PEN NEEDLE ORIG ULTRAFINE	3	QL
BD PEN NEEDLE SHORT ULTRAFINE	3	QL
BD PLASTIPAK SYRINGE	3	
BD PRECISIONGLIDE NEEDLE	3	
BD SAFETYGLIDE ALLERGY SYRINGE	3	
BD SAFETYGLIDE INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 30G X 5/16" 0.5 ML MISC)	1	QL
BD SAFETYGLIDE INSULIN SYRINGE (X 5/16" 0.3 ML MISC, X 15/64" 0.3 ML MISC, X 15/64" 0.5 ML MISC, X 15/64" 1 ML MISC)	3	QL

Drug Name	Drug Tier	Requirements / Limits
BD SAFETYGLIDE NEEDLE	3	
BD SAFETYGLIDE SHIELDED NEEDLE	3	
BD SAFETYGLIDE SYRINGE/NEEDLE	3	
BD SYRINGE	3	
BD SYRINGE BLUNT CANNULA 17G	3	
BD SYRINGE DISPOSABLE	3	
BD SYRINGE DUAL CANNULA	3	
BD SYRINGE LUER SLIP TIP	3	
BD SYRINGE LUER-LOK	3	
BD SYRINGE SLIP TIP	3	
BD SYRINGE/NEEDLE	3	
BD TB SYRINGE	3	
BD VEO INSULIN SYR U/F 1/2UNIT	3	QL
BD VEO INSULIN SYR ULTRAFINE	3	QL
CAREFINE PEN NEEDLES	3	QL
CAREONE INSULIN SYRINGE	3	QL
CAREONE UNIFINE PENTIPS	3	QL
CAREONE UNIFINE PENTIPS PLUS	3	QL
CAREPOINT POLY HUB NEEDLE	3	
CAREPOINT PRECISION POLY HUB	3	
CAREPOINT SAFETY 1ST NEEDLE	3	
CAREPOINT SAFETY1ST SYR/NEEDLE	3	
CAREPOINT SYRINGE CATHETER TIP	3	
CAREPOINT SYRINGE LUER LOCK	3	
CAREPOINT SYRINGE LUER SLIP	3	
CAREPOINT TUBERCLN SYR/LUER SL	3	
CARETOUCH CATHETER TIP SYRINGE	3	
CARETOUCH HYPODERMIC NEEDLE	3	

Drug Name	Drug Tier	Requirements / Limits
CARETOUCH INSULIN SYRINGE (28G X 5/16" 1 ML MISC, 29G X 5/16" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
CARETOUCH INSULIN SYRINGE (X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
CARETOUCH LUER LOCK	3	
CARETOUCH LUER LOCK SYR/NEEDLE	3	
CARETOUCH LUER SLIP	3	
CARETOUCH PEN NEEDLES	3	QL
CLEVER CHOICE COMFORT EZ (29G X 12MM MISC, 33G X 4 MM MISC)	3	QL
CLICKFINE PEN NEEDLES	3	QL
COMFORT ASSIST INSULIN SYRINGE	3	QL
COMFORT EZ INSULIN SYRINGE (27G X 1/2" 1 ML MISC, 28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 15/64" 0.3 ML MISC, 31G X 15/64" 0.5 ML MISC, 31G X 15/64" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
COMFORT EZ INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
COMFORT EZ MICRO PEN NEEDLES	3	QL
COMFORT EZ PEN NEEDLES	3	QL
COMFORT EZ PRO PEN NEEDLES	3	QL
COMFORT EZ SHORT PEN NEEDLES	3	QL
COMFORT TOUCH INSULIN PEN NEED	3	QL
CRONO SYRINGE	3	
DEFLUX METAL NEEDLE	3	
DIATHRIVE PEN NEEDLE	3	QL
DROPLET INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL

Drug Name	Drug Tier	Requirements / Limits
DROPLET INSULIN SYRINGE (30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 30G X 15/64" 0.3 ML MISC, 30G X 15/64" 0.5 ML MISC, 30G X 15/64" 1 ML MISC, 31G X 15/64" 0.3 ML MISC, 31G X 15/64" 0.5 ML MISC, 31G X 15/64" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
DROPLET MICRON	3	QL
DROPLET PEN NEEDLES	3	QL
DROPSAFE AUTOPROTECT DUO	3	QL
DROPSAFE SAFETY PEN NEEDLES	3	QL
DROPSAFE SAFETY SYRINGE/NEEDLE	3	QL
DROPSAFE SICURA	3	
DRUG MART UNIFINE PENTIPS	3	QL
DRUG MART UNIFINE PENTIPS PLUS	3	QL
EASY COMFORT INSULIN SYRINGE (29G X 5/16" 0.5 ML MISC, 29G X 5/16" 1 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 1/2" 0.3 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC, 32G X 5/16" 0.5 ML MISC, 32G X 5/16" 1 ML MISC)	3	QL
EASY COMFORT INSULIN SYRINGE (X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
EASY COMFORT PEN NEEDLES	3	QL
EASY GLIDE CATH TIP SYRINGE	3	
EASY GLIDE LUER LOCK SYRINGE	3	
EASY GLIDE PEN NEEDLES	3	QL
EASY GLIDE SLIP LOCK SYRINGE	3	
EASY TOUCH ALLERGY SYRINGE	3	
EASY TOUCH FLIPLOCK INSULIN SY (29G X 1/2" 1 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
EASY TOUCH FLIPLOCK INSULIN SY (30G X 1/2" 1 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
EASY TOUCH FLIPLOCK NEEDLES	3	

Drug Name	Drug Tier	Requirements / Limits
EASY TOUCH FLIPLOCK SAFETY SYR	3	
EASY TOUCH FLURINGE	3	
EASY TOUCH FLURINGE FLIPLOCK	3	
EASY TOUCH FLURINGE SHEATHLOCK	3	
EASY TOUCH HYPODERMIC NEEDLE	3	
EASY TOUCH INSULIN BARRELS	3	QL
EASY TOUCH INSULIN SAFETY SYR (29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC)	1	QL
EASY TOUCH INSULIN SAFETY SYR 30G X 1/2" 1 ML MISC	3	QL
EASY TOUCH INSULIN SYRINGE (27G X 1/2" 0.5 ML MISC, 27G X 1/2" 1 ML MISC, 27G X 5/8" 1 ML MISC, 28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
EASY TOUCH INSULIN SYRINGE (29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
EASY TOUCH PEN NEEDLES	3	QL
EASY TOUCH SAFETY PEN NEEDLES	3	QL
EASY TOUCH SAFETY SYRINGE	3	
EASY TOUCH SHEATHLOCK SYRINGE (21G X 1" 3 ML MISC, 21G X 1-1/2" 10 ML MISC, 21G X 1-1/2" 3 ML MISC, 21G X 1-1/2" 5 ML MISC, 22G X 1" 3 ML MISC, 22G X 1-1/2" 10 ML MISC, 22G X 1-1/2" 3 ML MISC, 22G X 1-1/2" 5 ML MISC, 23G X 1" 3 ML MISC, 25G X 1" 10 ML MISC, 25G X 1" 3 ML MISC, 25G X 1" 5 ML MISC, 25G X 5/8" 3 ML MISC)	3	
EASY TOUCH SHEATHLOCK SYRINGE (29G X 1/2" 1 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
EASY TOUCH SHEATHLOCK SYRINGE (30G X 1/2" 1 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
EASY TOUCH SYRINGE BARREL	3	

Drug Name	Drug Tier	Requirements / Limits
EASY TOUCH TB FLIPLOCK SYRINGE	3	
EASY TOUCH TB SHEATHLOCK SYR	3	
EASYPOINT NEEDLE	3	
EASYPOINT NEEDLE/SYRINGE	3	
EMBECTA AUTOSHIELD DUO	3	QL
EMBECTA INS SYR U/F 1/2 UNIT	3	QL
EMBECTA INSULIN SYRINGE	3	QL
EMBECTA INSULIN SYRINGE U-100	3	QL
EMBECTA INSULIN SYRINGE U-500	3	QL
EMBECTA INSULIN SYRINGE U/F	3	QL
EMBECTA PEN NEEDLE NANO	3	QL
EMBECTA PEN NEEDLE NANO 2 GEN	3	QL
EMBECTA PEN NEEDLE U/F	3	QL
EMBECTA PEN NEEDLE ULTRAFINE	3	QL
EMBRACE PEN NEEDLES	3	QL
EQL INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
EQL INSULIN SYRINGE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	3	QL
EXEL COMFORT POINT INSULIN SYR (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
EXEL COMFORT POINT INSULIN SYR (X 1/2" 0.5 ML MISC, X 1/2" 1 ML MISC)	3	QL
EXEL COMFORT POINT PEN NEEDLE	3	QL
FIFTY50 PEN NEEDLES	3	QL
FIFTY50 SUPERIOR COMFORT SYR	3	QL
FLOW-EZE VENTED NEEDLE	3	
FREDS PHARMACY UNIFINE PENTIP+	3	QL

Drug Name	Drug Tier	Requirements / Limits
FREDS PHARMACY UNIFINE PENTIPS	3	QL
GLOBAL EASE INJECT PEN NEEDLES	3	QL
GLOBAL EASY GLIDE INSULIN SYR	3	QL
GLOBAL EASY GLIDE PEN NEEDLES	3	QL
GLOBAL INJECT EASE INSULIN SYR (28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
GLOBAL INJECT EASE INSULIN SYR (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
GLOBAL INSULIN SYRINGES 30G X 1/2" 0.3 ML MISC	3	QL
GLOBAL INSULIN SYRINGES 30G X 5/16" 0.3 ML MISC	1	QL
GLUCOPRO INSULIN SYRINGE (30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
GLUCOPRO INSULIN SYRINGE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
GNP CLICKFINE PEN NEEDLES	3	QL
GNP INSULIN SYRINGE (28G X 1/2" 0.5 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
GNP INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
GNP INSULIN SYRINGES	1	QL
GNP INSULIN SYRINGES 28GX1/2"	3	QL
GNP INSULIN SYRINGES 29GX1/2"	1	QL
GNP INSULIN SYRINGES 30GX5/16"	1	QL
GNP INSULIN SYRINGES 31GX5/16"	3	QL

Drug Name	Drug Tier	Requirements / Limits
GNP PEN NEEDLES	3	QL
GNP ULTICARE PEN NEEDLES	3	QL
GNP ULTIGUARD SAFEPAK NEEDLE	3	QL
GNP ULTRA COM INSULIN SYRINGE	3	QL
GOODSENSE CLICKFINE PEN NEEDLE	3	QL
GOODSENSE PEN NEEDLE PENFINE	3	QL
H-E-B INCONTROL PEN NEEDLES	3	QL
H-E-B INCONTROL UNIFINE PENTIP	3	QL
HEALTHWISE INSULIN SYR/NEEDLE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	3	QL
HEALTHWISE INSULIN SYR/NEEDLE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
HEALTHWISE MICRON PEN NEEDLES	3	QL
HEALTHWISE MINI PEN NEEDLES	3	QL
HEALTHWISE PEN NEEDLES	3	QL
HEALTHWISE SHORT PEN NEEDLES	3	QL
HEALTHWISE UNIFINE PENTIPS	3	QL
HEALTHY ACCENTS UNIFINE PENTIP	3	QL
HM ULTICARE INSULIN SYRINGE	3	QL
HM ULTICARE MINI PEN NEEDLES	3	QL
HM ULTICARE SHORT PEN NEEDLES	3	QL
HUBER NEEDLE (20G X 1" MISC, 20G X 1-1/2" MISC, 22G X 1" MISC, 22G X 1-1/2" MISC)	1	
HYPODERMIC NEEDLE (18G X 1" MISC, 18G X 1-1/2" MISC, 20G X 1" MISC, 20G X 1-1/2" MISC, 21G X 1" MISC, 21G X 1-1/2" MISC, 22G X 1" MISC, 22G X 1-1/2" MISC, 23G X 1" MISC, 23G X 1-1/2" MISC, 25G X 1-1/2" MISC, 25G X 5/8" MISC, 26G X 1/2" MISC, 27G X 1-1/2" MISC, 27G X 1/2" MISC)	1	
INCONTROL ULTICARE PEN NEEDLES	3	QL
INPEN 100-BLUE-LILLY-HUMALOG	2	QL

Drug Name	Drug Tier	Requirements / Limits
INPEN 100-BLUE-NOVOLOG-FIASP	2	QL
INPEN 100-GREY-LILLY-HUMALOG	2	QL
INPEN 100-GREY-NOVOLOG-FIASP	2	QL
INPEN 100-PINK-LILLY-HUMALOG	2	QL
INPEN 100-PINK-NOVOLOG-FIASP	2	QL
INSULIN SYRINGE	1	QL
INSULIN SYRINGE-NEEDLE U-100	1	QL
INSULIN SYRINGE/NEEDLE	1	QL
INSUPEN PEN NEEDLES	3	QL
INSUPEN SENSITIVE	3	QL
INSUPEN ULTRAFIN	3	QL
INSUPEN32G EXTR3ME	3	QL
KINRAY INSULIN SYRINGE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	3	QL
KINRAY INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	QL
KMART VALU INSULIN SYRINGE 29G	3	QL
KMART VALU INSULIN SYRINGE 30G	3	QL
KROGER INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
KROGER INSULIN SYRINGE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	3	QL
KROGER PEN NEEDLES	3	QL
LEADER INSULIN SYRINGE (28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
LEADER INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
LEADER UNIFINE PENTIPS	3	QL

Drug Name	Drug Tier	Requirements / Limits
LEADER UNIFINE PENTIPS PLUS	3	QL
LITETOUCH INSULIN SYRINGE (28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
LITETOUCH INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
LITETOUCH PEN NEEDLES	3	QL
LONGS INSULIN SYRINGE	3	QL
LUER LOCK SAFETY SYRINGES	3	
MAGELLAN INSULIN SAFETY SYR	3	QL
MAGELLAN SYRINGE-SAFETY NEEDLE	3	
MAGELLAN TUBERCULIN SYRINGE	3	
MARATHON MEDICAL PENTIPS	3	QL
MAXI-COMFORT INSULIN SYRINGE	3	QL
MAXI-COMFORT SAFETY PEN NEEDLE	3	QL
MAXICOMFORT II PEN NEEDLE	3	QL
MAXICOMFORT SYR 27G X 1/2"	3	QL
MEDIC INSULIN SYRINGE	1	QL
MEDICINE SHOPPE PEN NEEDLES	3	QL
MEIJER PEN NEEDLES	3	QL
MICRODOT PEN NEEDLE	3	QL
MM INSULIN SYRINGE/NEEDLE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	3	QL
MM INSULIN SYRINGE/NEEDLE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
MM PEN NEEDLES	3	QL
MONOJECT BLUNTIP CANNULA	3	
MONOJECT BLUNTIP SYR/CANNULA	3	
MONOJECT CONTROL SYRINGE	3	

Drug Name	Drug Tier	Requirements / Limits
MONOJECT FILTER NEEDLE	3	
MONOJECT HYPODERMIC NEEDLE	3	
MONOJECT INSULIN SYRINGE	3	QL
MONOJECT INTRODUCER NEEDLE	3	
MONOJECT LIFESHIELD SYRINGE	3	
MONOJECT MAGELLAN SAFETY ND	3	
MONOJECT MAGELLAN SYRINGE	3	
MONOJECT MEDICATION TRANSF ND	3	
MONOJECT PHARMACY TRAY	3	
MONOJECT PISTON SYRINGE	3	
MONOJECT SOFTPACK/CATH TIP	3	
MONOJECT SOFTPACK/LLOCK	3	
MONOJECT SOFTPACK/LTIP	3	
MONOJECT SOFTPACK/RG LOCK	3	
MONOJECT SOFTPACK/RG LUER	3	
MONOJECT SYRINGE	3	
MONOJECT SYRINGE CATH TIP	3	
MONOJECT SYRINGE ECC LUER	3	
MONOJECT SYRINGE ECCENTRIC TIP	3	
MONOJECT SYRINGE LUER LOCK	3	
MONOJECT SYRINGE LUER-LOCK TIP	3	
MONOJECT SYRINGE PHARMACY TRAY	3	
MONOJECT SYRINGE REG LUER	3	
MONOJECT SYRINGE REGULAR TIP	3	
MONOJECT SYRINGE TOOMEY TYPE	3	
MONOJECT TB SAFETY SYRINGE	3	
MONOJECT TB SYRINGE	3	
MONOJECT ULTRA COMFORT SYRINGE (28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC)	3	QL

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Drug Name	Drug Tier	Requirements / Limits
MONOJECT ULTRA COMFORT SYRINGE (X 1/2" 0.3 ML MISC, X 1/2" 0.5 ML MISC, X 1/2" 1 ML MISC)	1	QL
MS INSULIN SYRINGE	3	QL
MULTI-DRAW NEEDLE (20G X 1-1/2" MISC, 21G X 1-1/2" MISC, 22G X 1-1/2" MISC)	1	
NOKOR VENTED NEEDLE	3	
NORM-JECT LUER LOCK SYRINGE	3	
NORM-JECT LUER SLIP SYRINGE	3	
NOVOFINE AUTOCOVER PEN NEEDLE	3	QL
NOVOFINE PEN NEEDLE	3	QL
NOVOFINE PLUS PEN NEEDLE	3	QL
NOVOPEN ECHO	2	QL
NOVOTWIST PEN NEEDLE	3	QL
PC UNIFINE PENTIPS	3	QL
PEN NEEDLE/5-BEVEL TIP	1	QL
PEN NEEDLES	1	QL
PEN NEEDLES 5/16"	1	QL
PENTIPS	3	QL
PENTIPS GENERIC PEN NEEDLES	3	QL
PERFECT POINT SAFETY NEEDLE	3	
PIP PEN NEEDLES 31G X 5MM	3	QL
PIP PEN NEEDLES 32G X 4MM	3	QL
POLY HUB NEEDLE	3	
PRECISION SURE-DOSE SYRINGE	1	QL
PREFERRED PLUS INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
PREFERRED PLUS INSULIN SYRINGE (X 1/2" 0.5 ML MISC, X 1/2" 1 ML MISC)	3	QL
PREFERRED PLUS UNIFINE PENTIPS	3	QL

Drug Name	Drug Tier	Requirements / Limits
PREVENT DROPSAFE PEN NEEDLES	3	QL
PREVENT SAFETY PEN NEEDLES	3	QL
PRO COMFORT INSULIN SYRINGE (30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
PRO COMFORT INSULIN SYRINGE (X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
PRO COMFORT PEN NEEDLES	3	QL
PRODIGY INSULIN SYRINGE	3	QL
PURE COMFORT PEN NEEDLE	3	QL
PURE COMFORT SAFETY PEN NEEDLE	3	QL
PX EXTRA SHORT PEN NEEDLES	3	QL
PX INSULIN SYRINGE	3	QL
PX MINI PEN NEEDLES	3	QL
PX PEN NEEDLE	3	QL
PX SHORTLENGTH PEN NEEDLES	3	QL
QC PEN NEEDLES	3	QL
QC UNIFINE PENTIPS	3	QL
QUICK TOUCH INSULIN PEN NEEDLE	3	QL
RA INSULIN SYRINGE	1	QL
RA PEN NEEDLES	3	QL
RAYA SURE PEN NEEDLE	3	QL
REALITY INSULIN SYRINGE (X 1/2" 0.5 ML MISC, X 1/2" 1 ML MISC)	3	QL
REALITY INSULIN SYRINGE (X 1/2" 0.5 ML MISC, X 1/2" 1 ML MISC)	1	QL
RELION INSULIN SYRINGE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC, X 15/64" 0.3 ML MISC, X 15/64" 0.5 ML MISC, X 15/64" 1 ML MISC)	3	QL
RELION INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	1	QL
RELION MINI PEN NEEDLES	3	QL

Drug Name	Drug Tier	Requirements / Limits
RELION PEN NEEDLES	3	QL
RELION SHORT PEN NEEDLES	3	QL
SAFETY INSULIN SYRINGES (29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC)	1	QL
SAFETY INSULIN SYRINGES 30G X 1/2" 1 ML MISC	3	QL
SAFETY PEN NEEDLES	1	QL
SB INSULIN SYRINGE (29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
SB INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL
SECURESAFE HYPODERMIC NEEDLE	3	
SECURESAFE INSULIN SYRINGE	1	QL
SECURESAFE SAFETY PEN NEEDLES	3	QL
SECURESAFE SYRINGE/NEEDLE	3	
SHOPKO UNIFINE PENTIPS	3	QL
SHOPKO UNIFINE PENTIPS PLUS	3	QL
SURE COMFORT INSULIN SYRINGE (28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 1/4" 0.3 ML MISC, 31G X 1/4" 0.5 ML MISC, 31G X 1/4" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
SURE COMFORT INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
SURE COMFORT PEN NEEDLES	3	QL
SYRINGE (SYRINGE 20G X 1" 3 ML MISC, SYRINGE 20G X 1-1/2" 3 ML MISC, SYRINGE 21G X 1" 3 ML MISC, SYRINGE 21G X 1-1/2" 3 ML MISC, SYRINGE 22G X 1" 3 ML MISC, SYRINGE 22G X 1-1/2" 3 ML MISC, SYRINGE 23G X 1" 3 ML MISC, SYRINGE 25G X 1" 3 ML MISC, SYRINGE 25G X 1-1/2" 3 ML MISC, SYRINGE 25G X 5/8" 3 ML MISC)	1	

Drug Name	Drug Tier	Requirements / Limits
SYRINGE 2-3 ML	1	
SYRINGE 30-35 ML	1	
SYRINGE 50-60 ML	1	
SYRINGE DISPOSABLE	1	
SYRINGE ECCENTRIC TIP	1	
SYRINGE LUER LOCK	1	
SYRINGE LUER SLIP	1	
SYRINGE/HYPODERMIC SAFETY	1	
TECHLITE INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC)	1	QL
TECHLITE INSULIN SYRINGE (30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 15/64" 0.3 ML MISC, 31G X 15/64" 0.5 ML MISC, 31G X 15/64" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
TECHLITE PEN NEEDLES	3	QL
TECHLITE PLUS PEN NEEDLES	3	QL
TODAYS HEALTH MINI PEN NEEDLES	3	QL
TODAYS HEALTH PEN NEEDLES	3	QL
TODAYS HEALTH SHORT PEN NEEDLE	3	QL
TOOMEY SYRINGE	1	
TOPCARE CLICKFINE PEN NEEDLES	3	QL
TOPCARE ULTRA COMFORT INS SYR (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
TOPCARE ULTRA COMFORT INS SYR (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	3	QL
TRUE COMFORT INSULIN SYRINGE (30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC, 32G X 5/16" 1 ML MISC)	3	QL

Drug Name	Drug Tier	Requirements / Limits
TRUE COMFORT INSULIN SYRINGE (X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
TRUE COMFORT PEN NEEDLES	3	QL
TRUE COMFORT PRO INSULIN SYR (30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC, 32G X 5/16" 0.5 ML MISC, 32G X 5/16" 1 ML MISC)	3	QL
TRUE COMFORT PRO INSULIN SYR (X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
TRUE COMFORT PRO PEN NEEDLES	3	QL
TRUE COMFORT SAFETY PEN NEEDLE	3	QL
TRUEPLUS 5-BEVEL PEN NEEDLES	3	QL
TRUEPLUS INSULIN SYRINGE (28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
TRUEPLUS INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
TRUEPLUS PEN NEEDLES	3	QL
ULTICARE INSULIN SAFETY SYR	3	QL
ULTICARE INSULIN SYR 1/2 UNIT	3	QL
ULTICARE INSULIN SYRINGE (28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 1/4" 0.3 ML MISC, 31G X 1/4" 0.5 ML MISC, 31G X 1/4" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
ULTICARE INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
ULTICARE MICRO PEN NEEDLES	3	QL
ULTICARE MINI PEN NEEDLES	3	QL
ULTICARE PEN NEEDLES	3	QL

Drug Name	Drug Tier	Requirements / Limits
ULTICARE SHORT PEN NEEDLES	3	QL
ULTICARE SYRINGE	3	
ULTICARE TUBERCULIN SAFETY SYR	3	
ULTIGUARD SAFEPACK PEN NEEDLE	3	QL
ULTIGUARD SAFEPACK SYR/NEEDLE	3	QL
ULTILET PEN NEEDLE	3	QL
ULTRA COMFORT INSULIN SYRINGE	1	QL
ULTRA FLO INSULIN PEN NEEDLES	3	QL
ULTRA FLO INSULIN SYR 1/2 UNIT (30G X 1/2" 0.3 ML MISC, 31G X 5/16" 0.3 ML MISC)	3	QL
ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 5/16" 0.3 ML MISC	1	QL
ULTRA FLO INSULIN SYRINGE (29G X 1/2" 0.3 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.3 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
ULTRA FLO INSULIN SYRINGE (30G X 1/2" 0.3 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
ULTRA THIN PEN NEEDLES	3	QL
ULTRA-THIN II INS SYR SHORT (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	3	QL
ULTRA-THIN II INS SYR SHORT (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
ULTRA-THIN II INSULIN SYRINGE	1	QL
ULTRA-THIN II MINI PEN NEEDLE	3	QL
ULTRA-THIN II PEN NEEDLE SHORT	3	QL
ULTRA-THIN II PEN NEEDLES	3	QL
ULTRACARE INSULIN SYRINGE (30G X 1/2" 0.5 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
ULTRACARE INSULIN SYRINGE (X 5/16" 0.3 ML MISC, X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL

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Drug Name	Drug Tier	Requirements / Limits
ULTRACARE PEN NEEDLES	3	QL
UNIFINE OTC PEN NEEDLES	3	QL
UNIFINE PEN NEEDLES	3	QL
UNIFINE PENTIPS	3	QL
UNIFINE PENTIPS PLUS	3	QL
UNIFINE PROTECT PEN NEEDLE	3	QL
UNIFINE SAFECONTROL PEN NEEDLE	3	QL
UNIFINE ULTRA PEN NEEDLE	3	QL
VALUE HEALTH INSULIN SYRINGE	1	QL
VALUMARK PEN NEEDLES	3	QL
VANISHPOINT INSULIN SYRINGE (29G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
VANISHPOINT INSULIN SYRINGE (29G X 5/16" 1 ML MISC, 30G X 1/2" 0.5 ML MISC, 30G X 3/16" 0.5 ML MISC, 30G X 3/16" 1 ML MISC)	3	QL
VANISHPOINT SAFETY SYRINGE	3	
VANISHPOINT SYRINGE	3	
VANISHPOINT TUBERCULIN SYRINGE	3	
VERIFINE INSULIN PEN NEEDLE	3	QL
VERIFINE INSULIN SYRINGE (28G X 1/2" 1 ML MISC, 30G X 1/2" 1 ML MISC, 31G X 5/16" 0.3 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	3	QL
VERIFINE INSULIN SYRINGE (29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC, 30G X 5/16" 1 ML MISC)	1	QL
VERIFINE PLUS PEN NEEDLE	3	QL
VERISAFE SAFE STERILE SYRINGE	3	
VERISAFE SAFETY STERILE NEEDLE	3	
VIDA MIA UNIFINE PENTIPS	3	QL
VP INSULIN SYRINGE	1	QL

Drug Name	Drug Tier	Requirements / Limits
WEGMANS UNIFINE PENTIPS PLUS	3	QL
YALE DISP NEEDLES	3	
ZEVX INSULIN SYRINGE (X 1/2" 0.5 ML MISC, X 1/2" 1 ML MISC)	3	QL
ZEVX INSULIN SYRINGE (X 5/16" 0.5 ML MISC, X 5/16" 1 ML MISC)	1	QL
ZEVX PEN NEEDLES	3	QL
SPACER/AEROSOL-HOLDING CHAMBERS & SUPPLIES		
AEROCHAMBER HOLDING CHAMBER	1	QL
AEROCHAMBER MINI CHAMBER	1	QL
AEROCHAMBER MV	1	QL
AEROCHAMBER PLS FLOVU MTHPIECE	1	QL
AEROCHAMBER PLUS FLO-VU	1	QL
AEROCHAMBER PLUS FLO-VU INTERM	1	QL
AEROCHAMBER PLUS FLO-VU LARGE	1	QL
AEROCHAMBER PLUS FLO-VU MEDIUM	1	QL
AEROCHAMBER PLUS FLO-VU SMALL	1	QL
AEROCHAMBER PLUS FLO-VU W/MASK	1	QL
AEROCHAMBER PLUS FLOW VU	1	QL
AEROCHAMBER W/FLOWSIGNAL	1	QL
AEROCHAMBER Z-STAT PLUS	1	QL
AEROCHAMBER Z-STAT PLUS CHAMBR	1	QL
AEROCHAMBER Z-STAT PLUS/LARGE	1	QL
AEROCHAMBER Z-STAT PLUS/MEDIUM	1	QL
AEROCHAMBER Z-STAT PLUS/SMALL	1	QL
AEROCHAMBER2GO ANTI-STATIC	1	QL
AEROVENT PLUS	1	QL
BREATHE EASE LARGE	1	QL
BREATHE EASE MEDIUM	1	QL

Drug Name	Drug Tier	Requirements / Limits
BREATHE EASE SMALL	1	QL
BREATHERITE VALVED MDI CHAMBER	1	QL
CLEVER CHOICE HOLDING CHAMBER	1	QL
COMPACT SPACE CHAMBER	1	QL
COMPACT SPACE CHAMBER/LG MASK	1	QL
COMPACT SPACE CHAMBER/MED MASK	1	QL
COMPACT SPACE CHAMBER/SM MASK	1	QL
EASIVENT	1	QL
EASIVENT MASK LARGE	1	QL
EASIVENT MASK MEDIUM	1	QL
EASIVENT MASK SMALL	1	QL
EQ SPACE CHAMBER ANTI-STATIC	1	QL
EQ SPACE CHAMBER ANTI-STATIC L	1	QL
EQ SPACE CHAMBER ANTI-STATIC M	1	QL
EQ SPACE CHAMBER ANTI-STATIC S	1	QL
FLEXICHAMBER	1	QL
FLEXICHAMBER ADULT MASK/SMALL	3	QL
FLEXICHAMBER CHILD MASK/LARGE	3	QL
FLEXICHAMBER CHILD MASK/SMALL	3	QL
INSPIREASE	1	QL
INSPIREASE RESERVOIR BAGS	3	QL
MICROCHAMBER	1	QL
MICROSPACER	1	QL
OPTICHAMBER DIAMOND	1	QL
OPTICHAMBER DIAMOND-LG MASK	1	QL
OPTICHAMBER DIAMOND-MD MASK	1	QL
OPTICHAMBER DIAMOND-SM MASK	1	QL
POCKET CHAMBER	1	QL

Drug Name	Drug Tier	Requirements / Limits
POCKET SPACER	1	QL
PROCHAMBER VHC	1	QL
RITEFLO	1	QL
VORTEX HOLD CHMBR/MASK/CHILD	1	QL
VORTEX HOLD CHMBR/MASK/TODDLER	1	QL
VORTEX VALVE CHAMBER-PEDI MASK	1	QL
VORTEX VALVED HOLDING CHAMBER	1	QL
MIGRAINE PRODUCTS (CONTINUED)		
CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)		
NURTEC	2	PA, QL
UBRELVY	2	PA, QL
CGRP RECEPTOR ANTAGONISTS - MONOCLONAL ANTIBODIES		
AJOVY	2	QL
EMGALITY	2	QL
EMGALITY (300 MG DOSE)	2	QL
ERGOT COMBINATIONS		
ERGOTAMINE-CAFFEINE	1	PA, QL
<i>dihydroergotamine mesylate 1 mg/ml solution</i>	4	QL
<i>dihydroergotamine mesylate 4 mg/ml solution</i>	4	PA, QL
ERGOMAR	3	PA
SELECTIVE SEROTONIN AGONISTS 5-HT(1)		
<i>almotriptan malate</i>	2	ST, QL
<i>eletriptan hydrobromide</i>	1	QL
<i>frovatriptan succinate</i>	1	ST, QL
<i>naratriptan hcl</i>	1	QL
<i>rizatriptan benzoate</i>	1	
<i>sumatriptan</i>	2	ST, QL

Drug Name	Drug Tier	Requirements / Limits
<i>sumatriptan succinate (25 mg tab, 50 mg tab, 100 mg tab)</i>	1	
<i>sumatriptan succinate (6 mg/0.5ml soln a-inj, 6 mg/0.5ml solution)</i>	2	ST, QL
<i>sumatriptan succinate 4 mg/0.5ml soln a-inj</i>	3	ST, QL
SUMATRIPTAN SUCCINATE REFILL 4 MG/0.5ML SOLN CART	2	ST, QL
SUMATRIPTAN SUCCINATE REFILL 6 MG/0.5ML SOLN CART	3	ST, QL
ZOLMITRIPTAN (2.5 MG SOLUTION, 5 MG SOLUTION)	2	ST, QL
<i>zolmitriptan (2.5 mg tab, 2.5 mg tab disp, 5 mg tab, 5 mg tab disp)</i>	1	QL
SELECTIVE SEROTONIN AGONISTS 5-HT(1F)		
REYVOW	3	PA, QL
MINERALS & ELECTROLYTES (CONTINUED)		
FLUORIDE		
SODIUM FLUORIDE (0.55 (0.25 F) MG CHEW TAB, 1.1 (0.5 F) MG CHEW TAB, 1.1 (0.5 F) MG TAB, 2.2 (1 F) MG CHEW TAB, 2.2 (1 F) MG TAB)	1	AGE, QL
SODIUM FLUORIDE 1.1 (0.5 F) MG/ML SOLUTION	1	AGE, QL
PHOSPHATE		
PHOSPHA 250 NEUTRAL	1	
PHOSPHO-TRIN 250 NEUTRAL	1	
PHOSPHOROUS	1	
<i>virt-phos 250 neutral</i>	1	
WES-PHOS 250 NEUTRAL	1	
POTASSIUM		
EFFER-K 25 MEQ EFFER TAB	1	
<i>k-prime</i>	1	
K-TAB 8 MEQ TAB ER	1	

Drug Name	Drug Tier	Requirements / Limits
<i>klor-con 10</i>	1	
<i>klor-con 20 meq packet</i>	2	
<i>klor-con 8 meq tab er</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con/ef</i>	1	
<i>potassium chloride (10 % solution, 20 meq packet, 20 meq/15ml (10%) solution, 40 meq/15ml (20%) solution)</i>	2	
<i>potassium chloride crys er</i>	1	
<i>potassium chloride er (8 cap er, 8 tab er, 10 cap er, 10 tab er, 20 tab er)</i>	1	
POTASSIUM CHLORIDE ER 15 MEQ TAB ER	3	
SODIUM		
AQUASTAT	3	
AQUASTAT SFR	3	
BD POSIFLUSH	3	
BD POSIFLUSH SAFESCRUB	3	
MONOJECT FLUSH SYRINGE	3	
MONOJECT SODIUM CHLORIDE FLUSH	3	
NORMAL SALINE FLUSH	1	
SALINE FLUSH	1	
<i>sodium chloride (0.45 % solution, 2.5 meq/ml solution, 3 % solution, 4 meq/ml solution, 5 % solution)</i>	1	
<i>sodium chloride (pf)</i>	1	
<i>sodium chloride flush</i>	1	
MISCELLANEOUS THERAPEUTIC CLASSES (CONTINUED)		
ANTILEPTOTICS		
THALOMID (50 MG CAP, 100 MG CAP)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
CHELATING AGENTS		
SYPRINE	4	PA, QL
<i>trientine hcl (250 mg cap, 500 mg cap)</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
CYCLOSPORINE ANALOGS		
<i>cyclosporine (25 mg cap, 100 mg cap)</i>	1	
<i>cyclosporine modified (25 mg cap, 50 mg cap, 100 mg cap, 100 mg/ml solution)</i>	1	
<i>gengraf (25 mg cap, 100 mg cap, 100 mg/ml solution)</i>	1	
IMMUNOMODULATORS FOR MYELOYDYSPLASTIC SYNDROMES		
<i>lenalidomide</i>	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS		
<i>mycophenolate mofetil (200 mg/ml recon susp, 250 mg cap, 500 mg tab)</i>	1	
<i>mycophenolate sodium</i>	1	QL
<i>mycophenolic acid</i>	1	QL
MACROLIDE IMMUNOSUPPRESSANTS		
ENVARSUS XR	3	ST
<i>everolimus (0.25 mg tab, 0.5 mg tab, 0.75 mg tab, 1 mg tab)</i>	4	QL, SUM7 (Specialty Pharmacy Lock)
<i>sirolimus (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	2	
<i>sirolimus 1 mg/ml solution</i>	4	
<i>tacrolimus (0.5 mg cap, 1 mg cap, 5 mg cap)</i>	1	
POTASSIUM REMOVING AGENTS		
<i>kionex</i>	1	
LOKELMA	2	QL
<i>sodium polystyrene sulfonate powder</i>	3	
<i>sodium polystyrene sulfonate 15 gm/60ml suspension</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>sps (sodium polystyrene sulf) 15 gm/60ml suspension</i>	1	
VELTASSA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
PURINE ANALOGS		
<i>azasan</i>	1	
<i>azathioprine</i>	1	
ROCK INHIBITORS		
REZUROCK	4	PA, AGE, QL
MOUTH/THROAT/DENTAL AGENTS (CONTINUED)		
ANESTHETICS TOPICAL ORAL		
<i>lidocaine viscous hcl</i>	1	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole 10 mg troche</i>	1	
<i>nystatin 100000 unit/ml suspension</i>	1	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate 0.12 % solution</i>	1	
<i>periogard</i>	1	
FLUORIDE DENTAL PRODUCTS		
<i>dentagel</i>	1	
FRAICHE 5000 DENTAL	1	
<i>just right 5000 1.1 % gel</i>	1	
SF	1	
SODIUM FLUORIDE 1.1 % GEL	1	
SODIUM FLUORIDE 5000 PPM 1.1 % GEL	1	
SALIVA STIMULANTS		
<i>cevimeline hcl</i>	2	
<i>pilocarpine hcl (5 mg tab, 7.5 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
STEROIDS - MOUTH/THROAT/DENTAL		
<i>kourzeq</i>	1	
<i>oralone</i>	1	
<i>triamcinolone acetonide 0.1 % paste</i>	1	
MULTIVITAMINS (CONTINUED)		
PED MULTI VITAMINS W/FL & FE		
MULTI-VITAMIN/FLUORIDE/IRON	1	
POLY-VI-FLOR/IRON (POLY-VI-FLOR/IRON 0.25-7 MG/ML SUSPENSION, POLY-VI-FLOR/IRON 0.5-10 MG CHEW TAB)	3	
QUFLORA FE PEDIATRIC	3	
PED MV W/ FLUORIDE		
FLORAFOL PEDIATRIC (0.5 MG CHEW TAB, 1 MG CHEW TAB)	3	
FLORAFOL PEDIATRIC 0.25 MG/ML SUSPENSION	1	
FLORIVA PLUS	1	
FLOTREX	3	
MULTI-VIT-FLOR	3	
MULTI-VITAMIN/FLUORIDE	1	
MULTIVITAMIN W/FLUORIDE	1	
MULTIVITAMIN/FLUORIDE (MULTIVITAMIN/FLUORIDE 0.25 MG CHEW TAB, MULTIVITAMIN/FLUORIDE 0.25 MG/ML SUSPENSION, MULTIVITAMIN/FLUORIDE 0.5 MG CHEW TAB, MULTIVITAMIN/FLUORIDE 1 MG CHEW TAB)	1	
POLY-VI-FLOR (0.25 MG CHEW TAB, 0.5 MG CHEW TAB, 1 MG CHEW TAB)	3	
POLY-VI-FLOR 0.25 MG/ML SUSPENSION	1	
QUFLORA PEDIATRIC (0.25 MG CHEW TAB, 0.5 MG CHEW TAB, 1 MG CHEW TAB)	3	
QUFLORA PEDIATRIC (0.25 MG/ML SUSPENSION, 0.5 MG/ML SUSPENSION)	1	

Drug Name	Drug Tier	Requirements / Limits
TRI-VI-FLOR 0.25 MG/ML SUSPENSION	1	
TRI-VITAMIN WITH FLUORIDE	1	
PED VITAMINS ACD & FA W/ FLUORIDE		
TRI-VI-FLORO	3	
PED VITAMINS ACD W/ FLUORIDE		
TRI-VITE/FLUORIDE	3	
PRENATAL MV & MIN W/FE-FA		
ATABEX EC	3	
ATABEX OB	3	
CO-NATAL FA	3	
COMPLETENATE	1	
CONCEPT OB	3	
DERMACINRX PRETRATE	3	
FOLIVANE-OB	3	
INATAL GT	3	
JENLIVA PRENATAL/POSTNATAL	3	
KOSHER PRENATAL PLUS IRON	3	
M-NATAL PLUS	1	
MATERVIA	3	
MATRONEX	1	
NATALCHEW	1	
NATALVIT	3	
NEO-VITAL RX	3	
NEONATAL COMPLETE 27-1 MG TAB	1	
NEONATAL PLUS	3	
NESTABS	3	
NIVA-PLUS	3	
OB COMPLETE ONE	3	

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Drug Name	Drug Tier	Requirements / Limits
OB COMPLETE PETITE	3	
OB COMPLETE PREMIER	3	
OB COMPLETE/DHA	3	
ONE VITE WOMENS PLUS	1	
ONENATAL RX	3	
PNV 27-CA/FE/FA	1	
PNV PRENATAL PLUS MULTIVIT+DHA	3	
PNV-OMEGA	3	
PNV-SELECT	3	
PRENATAL 19 (29-1 MG CHEW TAB, 29-1 MG TAB, CHEW TAB)	1	
PRENATAL 27-1 MG TAB	1	
PRENATAL PLUS	1	
PRENATAL PLUS VITAMIN/MINERAL	1	
PRENATAL VITAMIN PLUS LOW IRON	1	
PRENATAL-U	3	
PRENATRIX	3	
PRENATRYL	3	
PRENATVITE COMPLETE	3	
PRENATVITE PLUS	3	
PREPLUS	1	
PROVIDA OB	3	
RELEVIA	3	
SE-NATAL 19	1	
SELECT-OB	3	
THRIVITE RX	3	
TRICARE	3	
TRINATAL RX 1	1	
TRINATE	3	

Drug Name	Drug Tier	Requirements / Limits
VINATE II	3	
VITAFOL GUMMIES	3	
VITAFOL-OB	3	
VITATHELY WITH GINGER	3	
WESTAB PLUS	1	
PRENATAL MV & MIN W/FE-FA-CA-OMEGA 3 FISH OIL		
COMPLETE NATAL DHA	1	
WESNATAL DHA COMPLETE	1	
PRENATAL MV & MIN W/FE-FA-DHA		
NESTABS ONE	3	
PRENA 1 TRUE	3	
PRENAISSANCE PLUS	3	
PRENATE ENHANCE	3	
PRENATE PIXIE	3	
PRENATE RESTORE	3	
SELECT-OB+DHA	3	
TRISTART DHA	3	
VITAFOL FE+	3	
VITAFOL-OB+DHA	3	
VITAMEDMD ONE RX/QUATREFOLIC	3	
VITATRUE	3	
WESTGEL DHA	3	
PRENATAL MV & MINERALS W/FA WITHOUT IRON		
PRENATE	3	
PRENATAL VITAMINS		
PREMESISRX	3	
PRENATE AM	3	
MUSCULOSKELETAL THERAPY AGENTS (CONTINUED)		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen (5 mg tab, 10 mg tab, 20 mg tab)</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>carisoprodol 350 mg tab</i>	1	QL
<i>chlorzoxazone 500 mg tab</i>	1	
<i>cyclobenzaprine hcl (5 mg tab, 10 mg tab)</i>	1	
<i>metaxalone 800 mg tab</i>	2	
<i>methocarbamol (500 mg tab, 750 mg tab)</i>	1	
<i>orphenadrine citrate er</i>	1	
<i>tizanidine hcl (2 mg cap, 2 mg tab, 4 mg cap, 4 mg tab, 6 mg cap)</i>	1	QL
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium (25 mg cap, 50 mg cap, 100 mg cap)</i>	1	
MUSCLE RELAXANT COMBINATIONS		
ORPHENADRINE-ASPIRIN-CAFFEINE	3	ST, QL
NASAL AGENTS - SYSTEMIC AND TOPICAL (CONTINUED)		
ANTIHISTAMINE-STEROID		
<i>azelastine-fluticasone</i>	2	ST, QL
DYMISTA	2	QL
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide (0.03 % solution, 0.06 % solution)</i>	1	
NASAL ANTIHISTAMINES		
<i>azelastine hcl (0.1 % solution, 0.15 % solution, 137 mcg/spray solution)</i>	1	QL
<i>olopatadine hcl 0.6 % solution</i>	1	ST
NASAL STEROIDS		
<i>flunisolide</i>	1	QL
<i>fluticasone propionate 50 mcg/act suspension</i>	1	QL
<i>mometasone furoate 50 mcg/act suspension</i>	1	QL
XHANCE	2	PA, QL

Drug Name	Drug Tier	Requirements / Limits
NEUROMUSCULAR AGENTS (CONTINUED)		
BENZATHIAZOLES		
<i>riluzole</i>	1	
OPHTHALMIC AGENTS (CONTINUED)		
ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB		
SIMBRINZA	3	QL
BETA-BLOCKERS - OPTHALMIC		
BETAXOLOL HCL 0.5 % SOLUTION	2	
CARTEOLOL HCL	1	
LEVOBUNOLOL HCL	1	
<i>timolol maleate (0.25 % gel f soln, 0.5 % gel f soln)</i>	2	
<i>timolol maleate (0.25 % solution, 0.5 % solution)</i>	1	
<i>timolol maleate (once-daily)</i>	2	
<i>timolol maleate ocudose</i>	1	
<i>timolol maleate pf</i>	1	
BETA-BLOCKERS - OPTHALMIC COMBINATIONS		
COMBIGAN	1	QL
<i>dorzolamide hcl-timolol mal (22.3-6.8 mg/ml solution)</i>	1	QL
CHOLINERGIC AGONISTS		
TYRVAYA	3	ST, QL
CYCLOPLEGIC MYDRIATICS		
ALTAFRIN	1	
<i>atropine sulfate (0.01 % solution, 0.025 % solution, 0.05 % solution, 1 % solution)</i>	1	
ATROPINE SULFATE 1 % SOLUTION	1	
<i>cyclopentolate hcl 1 % solution</i>	1	
<i>phenylephrine hcl (2.5 % solution, 10 % solution)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MIOTICS - CHOLINESTERASE INHIBITORS		
PHOSPHOLINE IODIDE	3	
MIOTICS - DIRECT ACTING		
<i>pilocarpine hcl (1 % solution, 2 % solution, 4 % solution)</i>	1	
OPHTHALMIC ANTI-INFECTIVE COMBINATIONS		
BACITRACIN-POLYMYXIN B	1	
<i>neo-polycin</i>	1	
<i>neomycin-bacitracin zn-polymyx (5-400-10000 ointment)</i>	1	
NEOMYCIN-POLYMYXIN-GRAMICIDIN	1	
<i>polycin</i>	1	
<i>polymyxin b-trimethoprim</i>	1	
OPHTHALMIC ANTIALLERGIC		
<i>azelastine hcl 0.05 % solution</i>	1	
CROMOLYN SODIUM 4 % SOLUTION	1	
<i>epinastine hcl</i>	1	ST
OPHTHALMIC ANTIBIOTICS		
BACITRACIN 500 UNIT/GM OINTMENT	2	
<i>ciprofloxacin hcl 0.3 % solution</i>	1	
ERYTHROMYCIN 5 MG/GM OINTMENT	1	AGE
<i>gatifloxacin</i>	1	QL
<i>gentamicin sulfate 0.3 % solution</i>	1	
LEVOFLOXACIN 0.5 % SOLUTION	1	
MOXIFLOXACIN HCL (0.5 % SOLUTION, 1 MG/ML SOLUTION, 5 MG/ML SOLUTION)	1	
MOXIFLOXACIN HCL (2X DAY)	1	
<i>ofloxacin 0.3 % solution</i>	1	
<i>tobramycin 0.3 % solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
OPHTHALMIC ANTIVIRALS		
TRIFLURIDINE	2	
OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS		
<i>brinzolamide</i>	2	QL
DORZOLAMIDE HCL	1	
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine (pf)</i>	2	
KLARITY-C DROPS	4	QL, SUM7 (Specialty Pharmacy Lock)
VERKAZIA	4	QL, SUM7 (Specialty Pharmacy Lock)
OPHTHALMIC LOCAL ANESTHETICS		
ALTACAINE	2	
<i>proparacaine hcl</i>	1	
TETRACAINE HCL 0.5 % SOLUTION	2	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE	4	PA, QL
OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS		
<i>bromfenac sodium (once-daily)</i>	2	
<i>diclofenac sodium 0.1 % solution</i>	1	
FLURBIPROFEN SODIUM	1	
<i>ketorolac tromethamine (0.4 % solution, 0.5 % solution)</i>	1	
OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS		
ALPHAGAN P 0.1 % SOLUTION	2	QL
APRACLONIDINE HCL	1	
<i>brimonidine tartrate 0.2 % solution</i>	1	
OPHTHALMIC STEROID COMBINATIONS		
BACITRA-NEOMYCIN-POLYMYXIN-HC	1	

Drug Name	Drug Tier	Requirements / Limits
BLEPHAMIDE	3	
<i>neo-polycin hc</i>	1	
<i>neomycin-polymyxin-dexameth (0.1 % suspension, 3.5-10000-0.1 ointment, 3.5-10000-0.1 suspension)</i>	1	
NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 SUSPENSION	1	
SULFACETAMIDE-PREDNISOLONE	1	
<i>tobramycin-dexamethasone</i>	1	
OPHTHALMIC STEROIDS		
DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION	1	
<i>difluprednate</i>	2	QL
<i>fluorometholone</i>	1	
<i>loteprednol etabonate (0.5 % gel, 0.5 % suspension)</i>	2	QL
<i>prednisolone acetate</i>	1	QL
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION	1	
OPHTHALMIC SULFONAMIDES		
<i>sulfacetamide sodium (10 % ointment, 10 % solution)</i>	1	
OPHTHALMICS - BLEPHAROPTOSIS AGENTS		
UPNEEQ	3	PA, QL
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.03 % solution</i>	2	QL
LATANOPROST	1	QL
LUMIGAN	2	QL
<i>tafluprost (pf)</i>	1	ST, QL
<i>travoprost (bak free)</i>	2	ST, QL
OTIC AGENTS (CONTINUED)		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2 % solution</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
OTIC STEROID-ANTI-INFECTIVE COMBINATIONS		
<i>ciprofloxacin-dexamethasone</i>	2	
CIPROFLOXACIN-FLUOCINOLONE PF	1	
<i>neomycin-polymyxin-hc</i>	1	
OTIC STEROIDS		
<i>flac</i>	1	
<i>fluocinolone acetonide 0.01 % oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
OXYTOCICS (CONTINUED)		
ABORTIFACIENTS/CERVICAL RIPENING - PROSTAGLANDINS		
CERVIDIL	3	QL
<i>methylergonovine maleate 0.2 mg tab</i>	1	PA, QL
PENICILLINS (CONTINUED)		
AMINOPENICILLINS		
<i>amoxicillin (125 mg chew tab, 125 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg cap, 250 mg chew tab, 250 mg/5ml recon susp, 400 mg/5ml recon susp, 500 mg cap, 500 mg tab, 875 mg tab)</i>	1	
<i>ampicillin</i>	1	
NATURAL PENICILLINS		
PENICILLIN G POT IN DEXTROSE (40000 UNIT/ML SOLUTION, 60000 UNIT/ML SOLUTION)	1	QL
PENICILLIN V POTASSIUM (125 MG/5ML RECON SOLN, 250 MG TAB, 250 MG/5ML RECON SOLN, 500 MG TAB)	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin-pot clavulanate (200-28.5 mg/5ml recon susp, 250-125 mg tab, 250-62.5 mg/5ml recon susp, 400-57 mg chew tab, 400-57 mg/5ml recon susp, 500-125 mg tab, 600-42.9 mg/5ml recon susp, 875-125 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>amoxicillin-pot clavulanate er</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium</i>	1	
PROGESTINS (CONTINUED)		
EC-RX PROGESTERONE	3	QL
<i>gallifrey</i>	1	QL
<i>medroxyprogesterone acetate (2.5 mg tab, 5 mg tab)</i>	1	QL
<i>medroxyprogesterone acetate 10 mg tab</i>	1	
MEGESTROL ACETATE 625 MG/5ML SUSPENSION	2	
<i>norethindrone acetate</i>	1	QL
<i>progesterone (100 mg cap, 200 mg cap)</i>	1	
<i>progesterone 50 mg/ml oil</i>	1	QL
PROGESTERONE MICRONIZED	1	QL
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. (CONTINUED)		
ALCOHOL DETERRENTS		
<i>acamprosate calcium</i>	1	
<i>disulfiram</i>	1	
BENZODIAZEPINES & TRICYCLIC AGENTS		
CHLORDIAZEPOXIDE-AMITRIPTYLINE	1	
CHOLINOMIMETICS - ACHE INHIBITORS		
<i>donepezil hcl</i>	1	
<i>galantamine hydrobromide (4 mg tab, 8 mg tab, 12 mg tab)</i>	1	
<i>galantamine hydrobromide er</i>	1	
<i>rivastigmine</i>	1	
<i>rivastigmine tartrate</i>	1	
FIBROMYALGIA AGENT - SNRIS		
SAVELLA	2	ST, QL

Drug Name	Drug Tier	Requirements / Limits
SAVELLA TITRATION PACK	2	ST, QL
MOVEMENT DISORDER DRUG THERAPY		
<i>tetrabenazine</i>	4	PA, QL
MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS		
<i>teriflunomide</i>	1	QL, SUM7 (Specialty Pharmacy Lock)
MULTIPLE SCLEROSIS AGENTS		
<i>glatiramer acetate</i>	4	QL, SUM7 (Specialty Pharmacy Lock)
<i>glatopa</i>	4	QL, SUM7 (Specialty Pharmacy Lock)
MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES		
<i>cladribine (10 tabs)</i>	4	PA, QL
<i>cladribine (4 tabs)</i>	4	PA, QL
<i>cladribine (5 tabs)</i>	4	PA, QL
<i>cladribine (6 tabs)</i>	4	PA, QL
<i>cladribine (7 tabs)</i>	4	PA, QL
<i>cladribine (8 tabs)</i>	4	PA, QL
<i>cladribine (9 tabs)</i>	4	PA, QL
MULTIPLE SCLEROSIS AGENTS - INTERFERONS		
AVONEX PEN	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
AVONEX PREFILLED	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
BETASERON	4	PA, QL
EXTAVIA	4	PA, QL
PLEGRIDY	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
PLEGRIDY STARTER PACK	4	PA, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES		
KESIMPTA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS		
<i>dimethyl fumarate</i>	1	QL
<i>dimethyl fumarate starter pack</i>	1	QL
VUMERITY	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS		
<i>dalfampridine er</i>	1	QL
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS		
<i>memantine hcl (2 mg/ml solution, 10 mg/5ml solution)</i>	1	
<i>memantine hcl (5 mg tab, 28 x 5 mg & 21 x 10 mg tab)</i>	1	QL
<i>memantine hcl 10 mg tab</i>	1	QL
<i>memantine hcl er</i>	1	QL
PHENOTHIAZINES & TRICYCLIC AGENTS		
PERPHENAZINE-AMITRIPTYLINE	1	
ERGOLOID MESYLATES	2	
<i>pimozide 1 mg tab</i>	1	
<i>pimozide 2 mg tab</i>	3	
SMOKING DETERRENTS		
<i>bupropion hcl er (smoking det)</i>	1	AGE
CHANTIX STARTING MONTH PAK	3	AGE
<i>cvs nicotine</i>	1	AGE
<i>cvs nicotine polacrilex</i>	1	AGE
<i>eq nicotine</i>	1	AGE
<i>eq nicotine polacrilex</i>	1	AGE

Drug Name	Drug Tier	Requirements / Limits
<i>eq nicotine step 3</i>	1	AGE
<i>eql nicotine polacrilex</i>	1	AGE
<i>ft nicotine</i>	1	AGE
<i>ft nicotine mini</i>	1	AGE
<i>gnp nicotine</i>	1	AGE
<i>gnp nicotine mini</i>	1	AGE
<i>gnp nicotine polacrilex</i>	1	AGE
<i>goodsense nicotine</i>	1	AGE
<i>goodsense nicotine policrilex</i>	1	AGE
<i>habitrol</i>	1	AGE
<i>hm nicotine</i>	1	AGE
<i>hm nicotine polacrilex</i>	1	AGE
<i>kls quit2</i>	1	AGE
<i>kls quit4</i>	1	AGE
<i>nicoderm cq 21 mg/24hr patch 24hr</i>	1	AGE
<i>nicorette</i>	1	AGE
<i>nicorette mini</i>	1	AGE
<i>nicorette starter kit</i>	1	AGE
<i>nicotine (7 mg/24hr patch 24hr, 14 mg/24hr patch 24hr, 21 mg/24hr patch 24hr)</i>	1	AGE
NICOTINE 21-14-7 MG/24HR KIT	1	AGE
<i>nicotine mini</i>	1	AGE
<i>nicotine polacrilex</i>	1	AGE
<i>nicotine polacrilex mini</i>	1	AGE
<i>nicotine step 1</i>	1	AGE
<i>nicotine step 2</i>	1	AGE
<i>nicotine step 3</i>	1	AGE
NICOTROL	3	AGE
NICOTROL NS	3	AGE

Drug Name	Drug Tier	Requirements / Limits
<i>px stop smoking aid</i>	1	AGE
<i>qc nicotine transdermal system</i>	1	AGE
<i>ra mini nicotine</i>	1	AGE
<i>ra nicotine</i>	1	AGE
<i>ra nicotine gum</i>	1	AGE
<i>ra nicotine polacrilex</i>	1	AGE
<i>sm nicotine</i>	1	AGE
<i>sm nicotine polacrilex</i>	1	AGE
<i>thrive</i>	1	AGE
<i>varenicline tartrate</i>	3	AGE
<i>varenicline tartrate (starter)</i>	3	AGE
<i>varenicline tartrate(continue)</i>	3	AGE
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS		
<i>fingolimod hcl</i>	1	QL
ZEPOSIA	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ZEPOSIA 7-DAY STARTER PACK	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
ZEPOSIA STARTER KIT 0.23MG & 0.46MG & 0.92MG CAP THPK	4	PA, QL
ZEPOSIA STARTER KIT 0.23MG & 0.46MG 0.92MG(21) CAP THPK	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
THIENBENZODIAZEPINES & SSRIS		
<i>olanzapine-fluoxetine hcl</i>	2	
RESPIRATORY AGENTS - MISC. (CONTINUED)		
CYSTIC FIBROSIS AGENT - COMBINATIONS		
ORKAMBI	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
TRIKAFTA (50-25-37.5 & 75 MG TAB THPK, 100-50-75 & 150 MG TAB THPK)	4	PA, AGE, QL, SUM7 (Specialty Pharmacy Lock)

Drug Name	Drug Tier	Requirements / Limits
TRIKAFTA (80-40-60 & 59.5 MG THER PACK, 100-50-75 & 75 MG THER PACK)	4	PA, QL, SUM7 (Specialty Pharmacy Lock)
HYDROLYTIC ENZYMES		
PULMOZYME	4	QL, SUM7 (Specialty Pharmacy Lock)
PULMONARY FIBROSIS AGENTS		
<i>pirfenidone (267 mg cap, 267 mg tab, 534 mg tab, 801 mg tab)</i>	1	PA, QL, SUM7 (Specialty Pharmacy Lock)
PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS		
OFEV	4	PA, QL
SULFONAMIDES (CONTINUED)		
<i>sulfadiazine</i>	2	
TETRACYCLINES (CONTINUED)		
<i>avidoxy</i>	1	
<i>demeclocycline hcl</i>	1	
<i>doxycycline hyclate (50 mg cap, 100 mg cap, 100 mg tab)</i>	1	
<i>doxycycline hyclate 20 mg tab</i>	1	QL
<i>doxycycline monohydrate (25 mg/5ml recon susp, 50 mg cap, 50 mg tab, 75 mg tab, 100 mg cap, 100 mg tab)</i>	1	
<i>minocycline hcl (50 mg cap, 75 mg cap, 100 mg cap)</i>	1	
<i>mondoxyne nl</i>	1	
<i>tetracycline hcl (250 mg cap, 500 mg cap)</i>	1	
VIBRAMYCIN 100 MG CAP	1	
THYROID AGENTS (CONTINUED)		
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>propylthiouracil</i>	1	

Drug Name	Drug Tier	Requirements / Limits
THYROID HORMONES		
ADTHYZA	3	
ARMOUR THYROID	3	
<i>euthyrox</i>	1	
EVEXITHROID (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB, 180 MG TAB)	3	
<i>levo-t</i>	1	
LEVOTHYROXINE SODIUM (13 MCG CAP, 25 MCG CAP, 50 MCG CAP, 75 MCG CAP, 88 MCG CAP, 100 MCG CAP, 112 MCG CAP, 125 MCG CAP, 137 MCG CAP, 150 MCG CAP, 175 MCG CAP, 200 MCG CAP)	3	ST, QL
<i>levothyroxine sodium (25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 300 mcg tab)</i>	1	
<i>levoxyl</i>	1	
<i>liomny</i>	1	
<i>liothyronine sodium (5 mcg tab, 25 mcg tab, 50 mcg tab)</i>	1	
NIVA THYROID	3	
NP THYROID	3	
RENTHYROID (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB)	3	
THYROID	3	
<i>unithroid</i>	1	
TOXOIDS (CONTINUED)		
TOXOID COMBINATIONS		
ADACEL	2	
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSP PRSYR	2	
PEDIARIX	2	AGE
VAXELIS	2	AGE, QL
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS (CONTINUED)		
ANTISPASMODICS		
<i>dicyclomine hcl (10 mg cap, 10 mg/5ml solution, 20 mg tab)</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
BELLADONNA ALKALOIDS		
<i>hyoscyamine sulfate (0.125 mg sl tab, 0.125 mg tab, 0.125 mg tab disp, 0.125 mg/5ml elixir, 0.125 mg/ml solution)</i>	1	
<i>hyoscyamine sulfate er</i>	1	
HYOSCYAMINE SULFATE SL	1	
HYOSYNE	1	
NULEV	1	
OSCIMIN	1	
H-2 ANTAGONISTS		
<i>cimetidine</i>	1	
<i>famotidine (20 mg tab, 40 mg tab)</i>	1	
<i>famotidine 40 mg/5ml recon susp</i>	1	AGE
<i>nizatidine (150 mg cap, 300 mg cap)</i>	1	
MISC. ANTI-ULCER		
<i>sucralfate 1 gm tab</i>	1	
<i>sucralfate 1 gm/10ml suspension</i>	2	
PROTON PUMP INHIBITORS		
<i>acid reducer 20.6 (20 base) mg cap dr</i>	1	
<i>cvs omeprazole magnesium</i>	1	
<i>eq omeprazole magnesium</i>	1	
<i>esomeprazole magnesium (20 mg cap dr, 40 mg cap dr)</i>	1	QL
FIRST-LANSOPRAZOLE	2	AGE
FIRST-OMEPRAZOLE	2	AGE, QL
FIRST-PANTOPRAZOLE	1	AGE
<i>gnp omeprazole 20.6 (20 base) mg cap dr</i>	1	
<i>kp omeprazole magnesium</i>	1	
<i>lansoprazole (15 mg cap dr, 30 mg cap dr)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>lansoprazole (15 mg tab dr disp, 30 mg tab dr disp)</i>	2	ST, AGE, QL
<i>omeprazole (10 mg cap dr, 20 mg cap dr, 40 mg cap dr)</i>	1	QL
<i>omeprazole magnesium 20.6 (20 base) mg cap dr</i>	1	
OMEPRAZOLE+SYRSPEND SF ALKA	2	AGE, QL
<i>pantoprazole sodium (20 mg tab dr, 40 mg tab dr)</i>	1	QL
<i>pantoprazole sodium 40 mg packet</i>	1	ST
<i>qc omeprazole magnesium</i>	1	
<i>rabeprazole sodium 20 mg tab dr</i>	1	QL
QUATERNARY ANTICHOLINERGICS		
<i>glycopyrrolate (1 mg tab, 2 mg tab)</i>	1	
<i>glycopyrrolate 1 mg/5ml solution</i>	1	QL
<i>methscopolamine bromide</i>	1	
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol</i>	1	
URINARY ANTISPASMODICS (CONTINUED)		
URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide er</i>	1	QL
<i>fesoterodine fumarate er</i>	2	QL
<i>oxybutynin chloride 5 mg tab</i>	1	QL
<i>oxybutynin chloride 5 mg/5ml solution</i>	1	QL
<i>oxybutynin chloride er</i>	1	QL
<i>solifenacin succinate</i>	1	QL
<i>tolterodine tartrate</i>	1	QL
<i>tolterodine tartrate er</i>	1	QL
<i>trospium chloride</i>	1	QL
<i>trospium chloride er</i>	2	QL
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
<i>mirabegron er</i>	3	ST, QL

Drug Name	Drug Tier	Requirements / Limits
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl</i>	1	
VACCINES (CONTINUED)		
BACTERIAL VACCINES		
ACTHIB	2	AGE
CAPVAXIVE	2	AGE
HIBERIX	2	AGE
MENQUADFI	2	
PENBRAYA	2	AGE
PENMENVY	2	
PREVNAR 20	1	
VAXNEUVANCE	2	
VIRAL VACCINE COMBINATIONS		
M-M-R II	2	
PRIORIX	1	
PROQUAD	2	AGE
VIRAL VACCINES		
ABRYSVO	2	QL
AFLURIA PRESERVATIVE FREE	2	
AREXVY	2	AGE, QL
AUDENZ	2	
COMIRNATY 30 MCG/0.3ML SUSP PRSYR	2	QL
COMIRNATY 5-11 YEARS	2	QL
DENGVAXIA	2	
ERVEBO	2	PA

Drug Name	Drug Tier	Requirements / Limits
FLUARIX	2	
FLUBLOK	2	
FLUCELVAX SUSPENSION	2	QL
FLUCELVAX 0.5 ML SUSP PRSYR	2	
FLULAVAL	2	
FLUMIST	2	
FLUZONE 0.5 ML SUSP PRSYR	2	
GARDASIL 9	2	AGE
HAVRIX 720 EL U/0.5ML SUSP PRSYR	2	
MNEXSPIKE	2	QL
MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSP PRSYR	2	QL
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSP PRSYR	2	QL
NUVAXOVID COVID-19 VACCINE	2	QL
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.3ML SUSPENSION	2	QL
PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.3ML SUSPENSION	2	QL
ROTATEQ	2	AGE
SHINGRIX (50 MCG/0.5ML RECON SUSP, 50 MCG/0.5ML SUSP PRSYR)	2	AGE, QL
SPIKEVAX 50 MCG/0.5ML SUSP PRSYR	2	QL
SPIKEVAX 50 MCG/0.5ML SUSPENSION	2	QL
SPIKEVAX 6M-11Y	2	QL
VAQTA (25 UNIT/0.5ML SUSP PRSYR, 25 UNIT/0.5ML SUSPENSION)	2	
VARIVAX	2	
VAGINAL AND RELATED PRODUCTS (CONTINUED)		
IMIDAZOLE-RELATED ANTIFUNGALS		
GYNAZOLE-1	3	

Drug Name	Drug Tier	Requirements / Limits
<i>terconazole (0.4 % cream, 0.8 % cream)</i>	1	
MISCELLANEOUS VAGINAL COMBINATIONS		
FEM PH	3	
MISCELLANEOUS VAGINAL PRODUCTS		
INTRAROSA	3	QL
SPERMICIDES		
ENCARE	2	QL
VCF VAGINAL CONTRACEPTIVE 28 % FILM	2	QL
VAGINAL ANTI-INFECTIVES		
CLEOCIN 100 MG SUPPOS	3	
<i>clindamycin phosphate 2 % cream</i>	2	
VAGINAL CONTRACEPTIVE PH MODULATOR - COMBINATIONS		
PHEXX	3	QL
PHEXXI	3	QL
VAGINAL ESTROGENS		
<i>estradiol 0.01 % cream</i>	1	QL
<i>estradiol 10 mcg tab</i>	2	QL
ESTRING	2	QL
IMVEXXY MAINTENANCE PACK	3	ST, QL
IMVEXXY STARTER PACK	3	ST, QL
PREMARIN 0.625 MG/GM CREAM	3	QL
<i>yuvafem</i>	2	QL
VAGINAL PROGESTINS		
FIRST-PROGESTERONE VGS	3	AGE
VASOPRESSORS (CONTINUED)		
ANAPHYLAXIS THERAPY AGENTS		
AUVI-Q (0.1 MG/0.1ML SOLN A-INJ, 0.15 MG/0.15ML SOLN A-INJ, 0.3 MG/0.3ML SOLN A-INJ)	2	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>epinephrine (0.15 mg/0.15ml soln a-inj, 0.15 mg/0.3ml soln a-inj, 0.3 mg/0.3ml soln a-inj)</i>	1	QL
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
<i>droxidopa (100 mg cap, 200 mg cap)</i>	3	PA, QL
<i>droxidopa 300 mg cap</i>	3	PA, QL
<i>midodrine hcl</i>	1	
VITAMINS (CONTINUED)		
VITAMIN D		
<i>ergocalciferol 1.25 mg (50000 ut) cap</i>	1	
<i>vitamin d (ergocalciferol) (1.25 mg (50000 ut) cap, 50000 unit cap)</i>	1	
VITAMIN K		
<i>phytonadione (1 mg/0.5ml solution, 10 mg/ml solution)</i>	1	QL
<i>phytonadione 5 mg tab</i>	2	QL
<i>vitamin k1</i>	1	QL

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FLURBIPROFEN SODIUM.....	143	FORA V10 BLOOD GLUCOSE TEST	74	FREESTYLE UNISTICK II LANCETS..	98
FLUTICASONE PROPIONATE.....	68	FORA V12 BLOOD GLUCOSE TEST	74	frovatriptan succinate.....	131
fluticasone propionate.....	140	FORA V20 BLOOD GLUCOSE TEST	74	ft aspirin.....	6
FLUTICASONE PROPIONATE DISKUS.....	16	FORA V30A BLOOD GLUCOSE TEST.....	74	ft aspirin low dose.....	6
FLUTICASONE PROPIONATE HFA16		FORACARE GD40 TEST.....	74	ft enteric coated aspirin.....	6
fluticasone-salmeterol.....	14	FORACARE PREMIUM V10 TEST..	74	ft folic acid.....	88
FLUTICASONE-SALMETEROL.....	15	FORACARE TEST N GO TEST.....	74	ft nicotine.....	149
fluvastatin sodium.....	29	formoterol fumarate.....	15	ft nicotine mini.....	149
fluvastatin sodium er.....	29	FORTISCARE G1 TEST STRIP.....	74	furosemide.....	78
fluvoxamine maleate.....	22	FORTISCARE TEST.....	74	FUROSEMIDE.....	78
fluvoxamine maleate er.....	22	fosamprenavir calcium.....	46	fyavolv.....	83
FLUZONE.....	156	fosinopril sodium.....	30	G	
folate.....	88	fosinopril sodium-hctz.....	31	g tussin ac.....	62
folic acid.....	88	FRAICHE 5000 DENTAL.....	135	gabapentin.....	18
FOLIVANE-OB.....	137	FREDS PHARMACY UNIFINE PENTIP+.....	116	galantamine hydrobromide.....	146
fondaparinux sodium.....	17	FREDS PHARMACY UNIFINE PENTIPS.....	117	galantamine hydrobromide er...	146
FONDCIRCLE BLOOD GLUCOSE TEST.....	73	FREDS PHARMACY UNILET LANC 28G.....	98	galbriela.....	54
FONDCIRCLE SINGLE USE LANCETS.....	98	FREDS PHARMACY UNILET LANC 30G.....	98	gallifrey.....	146
FORA 6 CONNECT.....	73	FREESTYLE FREEDOM LITE.....	98	GARDASIL 9.....	156
FORA 6 CONNECT/GTEL TEST...	73	FREESTYLE INSULINX TEST.....	74	gatifloxacin.....	142
FORA BLOOD GLUCOSE TEST...	73	FREESTYLE LANCETS.....	98	GAVILYTE-C.....	90
FORA D15G BLOOD GLUCOSE TEST.....	73	FREESTYLE LIBRE 14 DAY READER	98	gavilyte-g.....	90
FORA D20 BLOOD GLUCOSE TEST.....	73	FREESTYLE LIBRE 14 DAY SENSOR	98	GE100 BLOOD GLUCOSE TEST.....	74
FORA D40/G31 BLOOD GLUCOSE.....	74	FREESTYLE LIBRE 2 PLUS SENSOR	98	gefitinib.....	36
FORA G20 BLOOD GLUCOSE TEST.....	74	FREESTYLE LIBRE 2 READER.....	98	gemfibrozil.....	29
FORA G30/PREM V10 GLUCOSE TEST.....	74	FREESTYLE LIBRE 2 SENSOR.....	98	gemmily.....	55
FORA GD20 TEST.....	74	FREESTYLE LIBRE 3 PLUS SENSOR	98	generlac.....	85
FORA GD50 BLOOD GLUCOSE TEST.....	74	FREESTYLE LIBRE 3 READER.....	98	gengraf.....	134
		FREESTYLE LIBRE 3 SENSOR.....	98	GENOTROPIN.....	79
		FREESTYLE LIBRE READER.....	98	GENOTROPIN MINIQUICK.....	80
		FREESTYLE LITE.....	98	gentamicin sulfate.....	65,142
				GENTEEL BUTTERFLY TOUCH LANCET.....	98
				GENTLE-LET GP LANCETS.....	98
				GENTLE-LET LANCETS.....	99

genuine aspirin.....	6	glyburide-metformin.....	26	GOJJI STERILE LANCETS.....	99
GENULTIMATE TEST.....	74	glycopyrrolate.....	154	goodsense aspirin.....	6
GENVOYA.....	45	glydo.....	69	goodsense aspirin adults.....	6
GHT TEST.....	74	gnp adult aspirin low strength.....	6	goodsense aspirin low dose.....	6
glatiramer acetate.....	147	gnp aspirin.....	6	GOODSENSE BLOOD GLUCOSE.....	75
glatopa.....	147	gnp aspirin low dose.....	6	GOODSENSE CLICKFINE PEN	
glimepiride.....	26	GNP CLICKFINE PEN NEEDLES.....	117	NEEDLE.....	118
glipizide.....	26	GNP EASY TOUCH GLUCOSE TEST.....	75	GOODSENSE COLOR LANCETS 33G.....	99
glipizide er.....	26	gnp folic acid.....	88	GOODSENSE LANCETS 26G UNIV.....	99
glipizide xl.....	26	GNP INSULIN SYRINGE.....	117	GOODSENSE LANCETS 30G.....	99
glipizide-metformin hcl.....	26	GNP INSULIN SYRINGES.....	117	GOODSENSE LANCETS 30G UNIV.....	99
GLOBAL EASE INJECT PEN		GNP INSULIN SYRINGES		GOODSENSE LANCETS 33G.....	99
NEEDLES.....	117	28GX1/2".....	117	GOODSENSE LANCETS 33G UNIV.....	99
GLOBAL EASY GLIDE INSULIN		GNP INSULIN SYRINGES		goodsense nicotine.....	149
SYR.....	117	29GX1/2".....	117	goodsense nicotine polacrilex.....	149
GLOBAL EASY GLIDE PEN		GNP INSULIN SYRINGES		GOODSENSE PEN NEEDLE	
NEEDLES.....	117	30GX5/16".....	117	PENFINE.....	118
GLOBAL INJECT EASE INSULIN		GNP INSULIN SYRINGES		granisetron hcl.....	26
SYR.....	117	31GX5/16".....	117	griseofulvin microsize.....	27
GLOBAL INJECT EASE LANCETS		GNP LANCETS 21G.....	99	griseofulvin ultramicrosize.....	27
28G.....	99	GNP LANCETS THIN 26G.....	99	guaifatussin ac.....	63
GLOBAL INJECT EASE LANCETS		gnp nicotine.....	149	guaifenesin ac.....	63
30G.....	99	gnp nicotine mini.....	149	guaifenesin-codeine.....	63
GLOBAL INSULIN SYRINGES.....	117	gnp nicotine polacrilex.....	149	guanfacine hcl.....	32
glucagon emergency.....	23	gnp omeprazole.....	153	guanfacine hcl er.....	1
GLUCO PERFECT 3 TEST.....	74	GNP PEN NEEDLES.....	118	GUARDIAN 4 GLUCOSE SENSOR.....	99
GLUCOCARD 01 SENSOR PLUS.....	74	GNP STERILE LANCETS 28G.....	99	GUARDIAN 4 TRANSMITTER.....	99
GLUCOCARD EXPRESSION TEST.....	74	GNP STERILE LANCETS 30G.....	99	GUARDIAN CONNECT	
GLUCOCARD SHINE TEST.....	74	GNP STERILE LANCETS 33G.....	99	TRANSMITTER.....	99
GLUCOCARD VITAL TEST.....	75	GNP TRUE METRIX GLUCOSE		GUARDIAN LINK 3 TRANSMITTER.....	99
GLUCOCARD X-SENSOR.....	75	STRIPS.....	75	GUARDIAN REAL-TIME REPLACE	
GLUCOCOM LANCETS 28G.....	99	GNP TRUETRACK SMART SYSTEM.....	75	PED.....	99
GLUCOCOM LANCETS 30G.....	99	GNP TRUETRACK TEST STRIPS.....	75	GUARDIAN SENSOR (3).....	99
GLUCOCOM LANCETS 33G.....	99	GNP ULTICARE PEN NEEDLES.....	118	GUARDIAN SENSOR 3.....	99
GLUCOCOM TEST.....	75	GNP ULTIGUARD SAFEPACK		GVOKE HYPOPEN 1-PACK.....	23
GLUCONAVII BLOOD GLUCOSE		NEEDLE.....	118	GVOKE HYPOPEN 2-PACK.....	23
TEST.....	75	GNP ULTRA COM INSULIN		GVOKE KIT.....	23
GLUCOPRO INSULIN SYRINGE.....	117	SYRINGE.....	118	GVOKE PFS.....	23
GLUCOSE METER TEST.....	75	GOJJI BLOOD GLUCOSE TEST.....	75	GYNAZOLE-1.....	156
glyburide.....	26	GOJJI BLOOD TEST			
GLYBURIDE MICRONIZED.....	26	STRIP/LANCETS.....	75		

H			
h-e-b aspirin	6	HEALTHWISE PEN NEEDLES	118
H-E-B INCONTROL LANCETS 28G99		HEALTHWISE SHORT PEN	
H-E-B INCONTROL LANCETS 30G99		NEEDLES	118
H-E-B INCONTROL LANCETS 33G99		HEALTHWISE UNIFINE PENTIPS	118
H-E-B INCONTROL PEN		HEALTHY ACCENTS UNIFINE	
NEEDLES	118	PENTIP	118
H-E-B INCONTROL UNIFINE		HEALTHY ACCENTS UNILET	
PENTIP	118	LANCETS	100
habitrol	149	heather	60
HADLIMA	2	heparin sodium (porcine)	17
HADLIMA PUSH TOUCH	2	heparin sodium (porcine) +rfid	17
HAEMOLANCE	100	heparin sodium (porcine) pf	17
HAEMOLANCE LOW FLOW		her style	59
LANCETS	100	HIBERIX	155
HAEMOLANCE PLUS	100	hm adult aspirin	6
HAEMOLANCE PLUS HIGH		hm aspirin	6
FLOW	100	hm aspirin ec	6
HAEMOLANCE PLUS LOW		hm aspirin ec low dose	6
FLOW	100	hm folic acid	88
HAEMOLANCE PLUS MAX		hm nicotine	149
FLOW	100	hm nicotine polacrilex	149
HAEMOLANCE PLUS PEDIATRIC		HM ULTICARE INSULIN SYRINGE	118
FLOW	100	HM ULTICARE MINI PEN	
hailey 1.5/30	55	NEEDLES	118
hailey 24 fe	55	HM ULTICARE SHORT PEN	
hailey fe 1.5/30	55	NEEDLES	118
hailey fe 1/20	55	HUBER NEEDLE	118
halobetasol propionate	68	HUMALOG	24
haloette	58	HUMALOG JUNIOR KWIKPEN	24
haloperidol	43	HUMALOG KWIKPEN	24
haloperidol lactate	43	HUMALOG MIX 50/50 KWIKPEN	24
HARVONI	47	HUMALOG MIX 75/25 KWIKPEN	24
HAVRIX	156	HUMALOG TEMPO PEN	24
HEALTHWISE INSULIN		HUMULIN R U-500	
SYR/NEEDLE	118	(CONCENTRATED)	24
HEALTHWISE MICRON PEN		HUMULIN R U-500 KWIKPEN	24
NEEDLES	118	HW EMBRACE PRO GLUCOSE	
HEALTHWISE MINI PEN		TEST	75
NEEDLES	118	HW EMBRACE TALK GLUCOSE	
		TEST	75
		HY-VEE LANCETS	100
		HY-VEE THIN LANCETS	100
		HYCAMTIN	40
		hydralazine hcl	32
		hydrochlorothiazide	79
		HYDROCOD POLI-CHLORPHE POLI	
		ER	63
		hydrocodone bit-homatrop mbr	62
		hydrocodone-acetaminophen	8
		HYDROCODONE-ACETAMINOPHEN	8
		HYDROCODONE-IBUPROFEN	8
		HYDROCORT-PRAMOXINE	
		(PERIANAL)	10
		hydrocortisone	10,62,68
		hydrocortisone (perianal)	11
		HYDROCORTISONE ACE-	
		PRAMOXINE	11
		HYDROCORTISONE ACETATE	11
		HYDROCORTISONE BUTYRATE	68
		hydrocortisone sod suc (pf)	62
		hydrocortisone valerate	68
		hydrocortisone-acetic acid	145
		hydromet	62
		HYDROMORPHONE HCL	8
		hydromorphone hcl er	8
		hydroxychloroquine sulfate	33
		hydroxyurea	38
		hydroxyzine hcl	13
		HYDROXYZINE PAMOATE	13
		hyoscyamine sulfate	153
		hyoscyamine sulfate er	153
		HYOSCYAMINE SULFATE SL	153
		HYOSYNE	153
		HYPERSAL	63
		HYPODERMIC NEEDLE	118
		ibandronate sodium	79
		IBRANCE	38
		ibu	3
		ibuprofen	3
		icatibant acetate	87

iclevia	59	INSULIN ASP PROT & ASP	isotretinoin	64
ICLUSIG	35	FLEXPEN	isradipine	50
icosapent ethyl	28	INSULIN ASPART	itraconazole	28
IGLUCOSE TEST STRIPS	75	INSULIN ASPART FLEXPEN	ivabradine hcl	52
IHEALTH BLOOD GLUCOSE TEST STR	75	INSULIN ASPART PENFILL	ivermectin	11,70
imatinib mesylate	35	INSULIN ASPART PROT & ASPART 24		
IMBRUVICA	35	INSULIN LISPRO	J	
imipramine hcl	22	INSULIN LISPRO (1 UNIT DIAL)	jaimiess	59
imiquimod	69	INSULIN LISPRO JUNIOR	JAKAFI	39
IMVEXXY MAINTENANCE PACK	157	KWIKPEN	jantoven	17
IMVEXXY STARTER PACK	157	INSULIN LISPRO PROT & LISPRO	jasmiel	55
IN TOUCH BLOOD GLUCOSE TEST	75	INSULIN SYRINGE	javygtor	81
IN TOUCH STERILE LANCETS 30G	100	INSULIN SYRINGE-NEEDLE U-100	JAYPIRCA	35,36
INATAL GT	137	INSULIN SYRINGE/NEEDLE	jencycla	60
incassia	60	INSUPEN PEN NEEDLES	JENLIVA PRENATAL/POSTNATAL	137
INCONTROL ULTICARE PEN NEEDLES	118	INSUPEN SENSITIVE	jinteli	83
indapamide	79	INSUPEN ULTRAFIN	jolessa	59
indomethacin	3	INSUPEN32G EXTR3ME	joyeaux	55
indomethacin er	3	INTELENCE	JUBBONTI	81
INFINITY BLOOD GLUCOSE TEST	75	INTRAROSA	juleber	55
INFINITY VOICE	75	introvale	JULUCA	45
INPEN 100-BLUE-LILLY-HUMALOG	118	INVEGA HAFYERA	junel 1.5/30	55
INPEN 100-BLUE-NOVOLOG-FIASP	119	INVEGA SUSTENNA	junel 1/20	55
INPEN 100-GREY-LILLY-HUMALOG	119	INVEGA TRINZA	junel fe 1.5/30	55
INPEN 100-GREY-NOVOLOG-FIASP	119	ipratropium bromide	junel fe 1/20	55
INPEN 100-PINK-LILLY-HUMALOG	119	ipratropium-albuterol	junel fe 24	55
INPEN 100-PINK-NOVOLOG-FIASP	119	irbesartan	just right 5000	135
INQOVI	38	irbesartan-hydrochlorothiazide	K	
INSPIREASE	130	iron (ferrous sulfate)	k-prime	132
INSPIREASE RESERVOIR BAGS	130	iron infant & toddler	K-TAB	132
		iron infant/toddler	K-Y ME & YOU EXTRA LUBRICATED	92
		iron supplement	K-Y ME & YOU INTENSE	92
		iron supplement childrens	kaitlib fe	55
		ISENTRESS	kalliga	55
		ISENTRESS HD	KAMELEON LUBRICATED	92
		isibloom	kariva	53
		isoniazid	kelnor 1/35	55
		isosorbide dinitrate	kelnor 1/50	55
		isosorbide mononitrate	KERALYT	69
		isosorbide mononitrate er	KESIMPTA	148

ketoconazole	27,69	KROGER BLOOD GLUCOSE TEST	75	lansoprazole	153,154
ketorolac tromethamine	3,143	KROGER HEALTHPRO GLUCOSE TEST	75	lanthanum carbonate	85
KIMONO	92	KROGER HEALTHPRO LANCET 26G	100	LANTUS	24
KIMONO COLORS	92	KROGER INSULIN SYRINGE	119	LANTUS SOLOSTAR	24
KIMONO MAXX-LARGE FLARE	92	KROGER LANCETS	100	lapatinib ditosylate	37
KIMONO MICRO THIN	92	KROGER LANCETS 21G	100	larin 1.5/30	55
KIMONO MICRO THIN PLUS	92	KROGER LANCETS MICRO THIN 33G	100	larin 1/20	55
KIMONO PLUS	92	KROGER LANCETS SUPER THIN	100	larin 24 fe	55
KIMONO PS	92	KROGER LANCETS THIN	100	larin fe 1.5/30	55
KIMONO PS PLUS	92	KROGER LANCETS THIN 26G	100	larin fe 1/20	55
KIMONO SENSATION	92	KROGER LANCETS ULTRATHIN 30G	100	larissia	55
KIMONO SENSATION PLUS	92	KROGER PEN NEEDLES	119	LATANOPROST	144
KIMONO SPECIAL	92	KROGER PREMIUM GLUCOSE TEST	75	layolis fe	55
KINNEY LANCETS	100	kurvelo	55	LEADER INSULIN SYRINGE	119
KINNEY THIN LANCETS	100	L		LEADER UNIFINE PENTIPS	119
KINRAY INSULIN SYRINGE	119	labetalol hcl	49	LEADER UNIFINE PENTIPS PLUS	120
kionex	134	lacosamide	18	LEDIPASVIR-SOFOSBUVIR	48
KISQALI (200 MG DOSE)	38	lactulose	90	leena	61
KISQALI (400 MG DOSE)	38	lactulose encephalopathy	85	leflunomide	4
KISQALI (600 MG DOSE)	38	LAGEVRIO	48	lenalidomide	134
KLARITY-C DROPS	143	lamivudine	47	lessina	55
klayesta	65	lamivudine-zidovudine	45	letrozole	38
klor-con	133	lamotrigine	18,19	leucovorin calcium	39
klor-con 10	133	lamotrigine er	19	LEUKERAN	40
klor-con m10	133	LAMPIT	12	leuprolide acetate	39
klor-con m15	133	LANCETS	100	LEUPROLIDE ACETATE (3 MONTH)	39
klor-con m20	133	LANCETS 28G THIN	100	LEVALBUTEROL TARTRATE	15
klor-con/ef	133	LANCETS 30G	100	levetiracetam	19
klis aspirin low dose	6	LANCETS 33G	100	levetiracetam er	19
klis quit2	149	LANCETS MICRO THIN 33G	100	levo-t	152
klis quit4	149	LANCETS SUPER THIN	100	LEVOBUNOLOL HCL	141
KMART VALU INSULIN SYRINGE 29G	119	LANCETS SUPER THIN 28G	100	levocarnitine	79
KMART VALU INSULIN SYRINGE 30G	119	LANCETS THIN	101	levocarnitine sf	79
KOSHER PRENATAL PLUS IRON	137	LANCETS ULTRA THIN	101	levocetirizine dihydrochloride	28
kourzeq	136	LANCETS ULTRA THIN 30G	101	levofloxacin	84
kp aspirin	6			LEVOFLOXACIN	142
kp folic acid	88			levonest	61
kp omeprazole magnesium	153			levonorg-eth estrad triphasic	61
KRAZATI	36			levonorgest-eth est & eth est	59
				levonorgest-eth estrad 91-day	59
				levonorgest-eth estradiol-iron	55

levonorgestrel	59	loestrin fe 1/20	56	lyza	60
levonorgestrel-ethinyl estrad	56,58	lojaimiess	59		
levora 0.15/30 (28)	56	LOKELMA	134	M	
LEVOTHYROXINE SODIUM	152	lomustine	40	M-M-R II	155
levothyroxine sodium	152	LONGS INSULIN SYRINGE	120	M-NATAL PLUS	137
levoxyl	152	LONGS LANCETS STANDARD	101	MAGELLAN INSULIN SAFETY SYR	120
LIBERTY MEDICAL LANCETS	101	LONGS LANCETS THIN	101	MAGELLAN SYRINGE-SAFETY	
LIBERTY NEXT GENERATION		LONGS LANCETS ULTRA THIN	101	NEEDLE	120
TEST	75	LONSURF	38	MAGELLAN TUBERCULIN	
LIBERTY TEST	75	lopinavir-ritonavir	45	SYRINGE	120
LIBERVANT	18	lorazepam	13	malathion	70
lidocaine	69	lorazepam intensol	14	MARATHON MEDICAL PENTIPS	120
lidocaine hcl	70	LORBRENA	34	maraviroc	45
lidocaine hcl urethral/mucosal	70	loryna	56	marlissa	56
lidocaine viscous hcl	135	losartan potassium	32	MATERVIA	137
lidocaine-hydrocort (perianal)	11	losartan potassium-hctz	31	MATRONEX	137
lidocaine-prilocaine	70	loteprednol etabonate	144	MATULANE	38
lillow	56	lovastatin	29	matzim la	50
linezolid	12	low-ogestrel	56	MAVYRET	48
LINZESS	84	loxapine succinate	43	MAXI-COMFORT INSULIN	
liomny	152	lubiprostone	84	SYRINGE	120
liothyronine sodium	152	LUER LOCK SAFETY SYRINGES	120	MAXI-COMFORT SAFETY PEN	
lisdexamfetamine dimesylate	1	luizza 1.5/30	56	NEEDLE	120
lisinopril	30	luizza 1/20	56	maxi-tuss ac	63
lisinopril-hydrochlorothiazide	31	LUMAKRAS	36	MAXICOMFORT II PEN NEEDLE	120
LITE TOUCH LANCETS	101	LUMIGAN	144	MAXICOMFORT SYR 27G X 1/2"	120
LITETOUCH INSULIN SYRINGE	120	LUPRON DEPOT (3-MONTH)	39	MAXX	92
LITETOUCH LANCETS	101	LUPRON DEPOT (4-MONTH)	39	MAXX PLUS	92
LITETOUCH PEN NEEDLES	120	LUPRON DEPOT (6-MONTH)	39	meclizine hcl	27
lithium	42	LUPRON DEPOT-PED (1-MONTH)	80	medi-first aspirin	6
lithium carbonate	42	LUPRON DEPOT-PED (3-MONTH)	80	MEDIC INSULIN SYRINGE	120
lithium carbonate er	42	lurasidone hcl	42	MEDICHOICE SAFETY LANCET	101
LIVE BETTER LANCET SUPER		lutera	56	MEDICHOICE SAFETY LANCET	
THIN	101	LUTRATE DEPOT	39	EXTRA	101
LIVE BETTER LANCET ULTRA		lyleq	60	MEDICHOICE SAFETY LANCET	
THIN	101	lyllana	84	NORM	101
LO LOESTRIN FE	53	LYNPARZA	40	MEDICINE SHOPPE PEN NEEDLES	120
lo-zumandimine	56	LYSODREN	33	medique aspirin	6
loestrin 1.5/30 (21)	56	LYTGOBI (12 MG DAILY DOSE)	36	MEDLANCE EXTRA 21G	101
loestrin 1/20 (21)	56	LYTGOBI (16 MG DAILY DOSE)	36	MEDLANCE LITE 25G	101
loestrin fe 1.5/30	56	LYTGOBI (20 MG DAILY DOSE)	36	MEDLANCE PLUS EXTRA 21G	101

MEDLANCE PLUS LANCETS	101	merzee	56	MICROCHAMBER	130
MEDLANCE PLUS LITE 25G	101	mesalamine	85	MICRODOT PEN NEEDLE	120
MEDLANCE PLUS SPECIAL		mesalamine er	85	MICRODOT TEST	76
0.8MM	101	mesna	41	microgestin 1.5/30	56
MEDLANCE PLUS SUPERLITE		metaxalone	140	microgestin 1/20	56
30G	101	metformin hcl	23	microgestin 24 fe	56
MEDLANCE PLUS UNIVERSAL		metformin hcl er	23	microgestin fe 1.5/30	56
21G	101	methadone hcl	8	microgestin fe 1/20	56
MEDLANCE UNIVERSAL 21G	101	METHADONE HCL	8	MICROLET LANCETS	102
medroxyprogesterone		methadone hcl intensol	8	MICROLET NEXT LANCETS	102
acetate	60,146	methadose	8	MICROSPACER	130
mefenamic acid	3	methazolamide	78	midodrine hcl	158
mefloquine hcl	33	methenamine hippurate	12	MIGLITOL	23
megestrol acetate	40	methimazole	151	miglustat	88
MEGESTROL ACETATE	146	METHITEST	10	mili	56
meijer aspirin ec	6	methocarbamol	140	mimvey	83
MEIJER BLOOD GLUCOSE TEST	75	METHOTREXATE SODIUM	34	MINILINK REAL-TIME	
MEIJER ESSENTIAL GLUCOSE		methotrexate sodium	34	TRANSMITTER	102
TEST	75	methotrexate sodium (pf)	34	MINIMED 630G GUARDIAN	
MEIJER LANCETS	101	methscopolamine bromide	154	PRESS	102
MEIJER LANCETS THIN	101	methsuximide	21	MINIMED INSTINCT GLUC	
MEIJER LANCETS UNIVERSAL		methyl dopa	32	SENSOR	102
21G	101	METHYLDOPA	32	minocycline hcl	151
MEIJER LANCETS UNIVERSAL		methylergonovine maleate	145	minoxidil	32
30G	101	methylphenidate hcl	1	minzoya	56
MEIJER LANCETS UNIVERSAL		METHYLPHENIDATE HCL ER	1	mirabegron er	154
33G	101	methylphenidate hcl er (cd)	2	mirtazapine	21
MEIJER PEN NEEDLES	120	methylphenidate hcl er (la)	2	misoprostol	154
MEIJER SUPER THIN LANCETS	102	methylphenidate hcl er (osm)	2	mm aspirin	6
MEIJER TRUETEST TEST	75	methylprednisolone	62	MM BLULINK GLUCOSE TEST	76
MEIJER TRUETRACK TEST	75	methyltestosterone	10	MM EASY TOUCH GLUCOSE	76
MEKINIST	37	metoclopramide hcl	84	MM INSULIN SYRINGE/NEEDLE	120
meleya	60	metolazone	79	MM PEN NEEDLES	120
meloxicam	3	metoprolol succinate er	49	MM TWIST LANCETS	102
memantine hcl	148	metoprolol tartrate	49	MNEXSPIKE	156
memantine hcl er	148	metoprolol-hydrochlorothiazide	32	MOBILE LANCETS 30G	102
MENEST	84	metronidazole	11,70	modafinil	2
MENQUADFI	155	METRONIDAZOLE		MODERNA COVID-19 VAC 6M-	
MEPERIDINE HCL	8	BENZO+SYRSPEND	11	11Y	156
meprobamate	13	mexiletine hcl	14	moexipril hcl	30
mercaptapurine	34	mibelas 24 fe	56	MOLINDONE HCL	43

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ropinirole hcl	41	sb childrens aspirin	7	silodosin	86
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