



Avera Traditional Formulary - 2025

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Avera Health Plans

2025 Avera Traditional Formulary

PLEASE READ: THIS DOCUMENT HAS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN.

Please refer to your Certificate of Coverage, Master Contract, Plan Document or other plan materials to determine if your drug is covered. The Drug Formulary does not guarantee coverage and is subject to change. The Drug Formulary is subject to change without notice. Members must use participating pharmacies to fill their prescription drugs.

What is the Avera Health Plans Drug Formulary?

The Drug Formulary is a list of covered prescription drugs, which are approved for use for specific treatments and dispensed through participating pharmacies. Avera Health Plans works with a team of health care providers to choose drugs that provide quality treatment. Avera Health Plans covers drugs on the Drug Formulary that are:

- Medically necessary
- Approved by the United States Food and Drug Administration (FDA)
- Filled at a participating pharmacy

For more information on how to fill your prescriptions and determine if your drug is covered, please review your Certificate of Coverage, Master Contract, Plan Document or other plan materials.

Can the Drug Formulary change?

The Drug Formulary may change from time to time as described in the Certificate of Coverage, Master Contract, Plan Document or other plan materials. The enclosed Drug Formulary is the most current Drug Formulary covered by Avera Health Plans. To get updated information about the drugs covered by Avera Health Plans, please visit us online at AveraHealthPlans.com or call our Service Center at 605-322-4545 or toll-free at 1-888-322-2115, 8 a.m. to 5 p.m. CT, Monday through Friday.

How do I use the Drug Formulary?

There are two ways to find your drug on the drug list:

1. Drug Therapeutic Classification

The Drug Formulary starts on page 7. The drugs on this Drug Formulary are grouped by the type of therapeutic class the drugs fall into.

2. Alphabetical Listing

If you are not sure what category to look under, look for your drug in the Index that starts near the end of the formulary document after the drug therapeutic classes have been presented. The Index is an alphabetical list of all the drugs in this document. Both brand-name drugs and generic drugs are in the Index.

- Look in the Index and find your drug
- Next to your drug, see the page number where you can find coverage information
- Turn to the page listed in the Index and find the name of your drug in the first column of the list

For more information about your Avera Health Plans prescription drug coverage, please look at your Certificate of Coverage, Master Contract, Plan Document or other plan materials. If you have questions about this Drug Formulary, please call our Service Center at 605-322-4545 or toll-free at 1-888-322-2115, 8 a.m. to 5 p.m. CT, Monday through Friday. You may also visit us online at AveraHealthPlans.com

Avera Health Plans Drug Formulary

The Drug Formulary that starts on page 7 gives you information about the drugs covered by Avera Health Plans. A generic drug is a drug that has the same active ingredients as its brand-name counterpart, and has been approved by the FDA as being interchangeable with the brand-name drug as approved by your provider. Upon release of a generic drug to the market, the generic drug will **generally** be added to the formulary and the associated brand drug will be considered non-preferred or not covered. However, some generic drugs do not cost less than brand-name drugs and may not be added to your formulary.

The first column of the chart lists the drug name. Brand-name drugs are capitalized. Generic drugs are generally in lowercase.

The second column (labeled Drug Tier) will list what tier the drug is placed on in the Drug Formulary. Refer to your Summary of Benefits and Coverage to find the associated co-pay for that drug tier.

The information in the Requirements & Limits column tells you if Avera Health Plans has any special requirements for coverage of your drug. These requirements and limits may include:

- **Preauthorization (PA):** Avera Health Plans needs your healthcare provider to get preauthorization for certain drugs. This means that approval from Avera Health Plans must be obtained before you fill your drug. If you don't get approval, Avera Health Plans will not cover the cost of the drug. Additional information can be found online at AveraHealthPlans.com.
- **Quantity Limits (QL):** For certain drugs, Avera Health Plans limits the amount of the drug that it will cover. For example, Avera Health Plans only covers 18 tablets of *sumatriptan* 50mg per 30 days.
- **Step Therapy (ST):** Avera Health Plans utilizes step therapy to provide the most cost-effective and safest drugs available for a specific medical condition. Step therapy programs require your healthcare provider to prescribe a step-one drug before a step-two drug will be covered. If the step-one drugs do not work for you, Avera Health Plans will cover the step-two drugs. Visit us online at AveraHealthPlans.com to review a list of Step Therapy Programs.
- **Age Limits (AL):** Certain drugs approved by the FDA or other prescribing guidelines are not appropriate based on age. In some instances Avera Health Plans may restrict use of certain FDA approved drugs to people within a certain age range.
- **Provider Restriction (PR):** For certain drugs, Avera Health Plans limits the prescribing to certain provider specialties.

What if my drug is not on the Drug Formulary?

If your drug is not on this Drug Formulary, you have two choices:

- Your healthcare provider can prescribe a drug that is similar that is covered on the Drug Formulary. Similar drugs that are preferred and covered on the Drug Formulary may be easier to obtain and lower cost to you.
- You can request a formulary exception if you believe the drug you take should be covered because other treatment options on the Drug Formulary do not work for you. To request a formulary exception, you or your healthcare provider must provide written documentation to include the following:
 - Why no other prescription on the Drug Formulary will work as well as the requested drug,
 - A list of other drugs that have been tried and how you responded to these drugs
 - Medical documentation to support the medical necessity

How likely is it that I will get the formulary exception?

We will review the information and when a decision has been made, you and your healthcare provider will receive a letter that states the decision. If a formulary exception is approved, the non-preferred co-pay (for the applicable drug type) will be applied. The prescription must be a covered benefit on your plan. Formulary exceptions do not include reductions on prescription co-pays.

What do the tiers mean on the Drug Formulary?

Tier	Type of Drugs Included
Tier 0	Preventive drugs (covered at no cost to you)
Tier 1	Generic drugs (may include some brands)
Tier 2	Preferred brand drugs
Tier 3	Non-preferred brand drugs

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Avera Traditional

Drug Name	Drug Tier	Requirements / Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS		
<i>clonidine hcl er</i>	1	QL
<i>guanfacine hcl er</i>	1	AL
ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR		
<i>atomoxetine hcl</i>	1	QL
AMPHETAMINE MIXTURES		
<i>amphet-dextroamphet 3-bead er</i>	1	
<i>amphetamine-dextroamphet er</i>	1	
<i>amphetamine-dextroamphetamine</i>	1	
AMPHETAMINES		
ADZENYS XR-ODT	3	AL
<i>amphetamine sulfate</i>	1	
<i>dextroamphetamine sulfate (2.5 mg tab, 5 mg tab, 5 mg/5ml solution, 7.5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)</i>	1	
<i>dextroamphetamine sulfate er</i>	1	
DYANAVEL XR 2.5 MG/ML SUSP	3	QL
<i>lisdexamfetamine dimesylate</i>	1	QL
<i>procentra</i>	1	
<i>zenzedi</i>	1	
ANALEPTICS		
<i>caffeine citrate</i>	1	
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI	3	PA, QL
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX	3	PA

Drug Name	Drug Tier	Requirements / Limits
STIMULANTS - MISC.		
<i>armodafinil (150 mg tab, 200 mg tab, 250 mg tab)</i>	1	QL
<i>armodafinil 50 mg tab</i>	1	
<i>dexmethylphenidate hcl</i>	1	
<i>dexmethylphenidate hcl er</i>	1	
<i>methylphenidate</i>	1	
<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	
<i>methylphenidate hcl er (10 mg tab er, 18 mg tab er, 20 mg tab er, 27 mg tab er, 36 mg tab er, 54 mg tab er)</i>	1	
<i>methylphenidate hcl er (cd)</i>	1	
<i>methylphenidate hcl er (la)</i>	1	
<i>methylphenidate hcl er (osm) (18 mg tab er, 27 mg tab er, 36 mg tab er, 54 mg tab er)</i>	1	
<i>methylphenidate hcl er (osm) 72 mg tab er</i>	1	QL
<i>methylphenidate hcl er (xr)</i>	1	
<i>modafinil</i>	1	QL
QUILLICHEW ER	3	
QUILLIVANT XR	3	
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
ALLERGENIC EXTRACTS		
GRASTEK	3	QL, AL, PR (ALLERGISTS)
PALFORZIA (1 MG DAILY DOSE)	3	AL
PALFORZIA (12 MG DAILY DOSE)	3	AL
PALFORZIA (120 MG DAILY DOSE)	3	AL
PALFORZIA (160 MG DAILY DOSE)	3	AL
PALFORZIA (20 MG DAILY DOSE)	3	AL

Drug Name	Drug Tier	Requirements / Limits
PALFORZIA (200 MG DAILY DOSE)	3	AL
PALFORZIA (240 MG DAILY DOSE)	3	AL
PALFORZIA (3 MG DAILY DOSE)	3	AL
PALFORZIA (300 MG MAINTENANCE)	3	AL
PALFORZIA (300 MG TITRATION)	3	AL
PALFORZIA (40 MG DAILY DOSE)	3	AL
PALFORZIA (6 MG DAILY DOSE)	3	AL
PALFORZIA (80 MG DAILY DOSE)	3	AL
PALFORZIA INITIAL DOSE 1-3YRS	3	AL
PALFORZIA INITIAL DOSE 4-17YRS	3	AL
PALFORZIA INITIAL ESCALATION	3	AL
RAGWITEK	3	QL, AL, PR (ALLERGISTS)
MIXED ALLERGENIC EXTRACTS		
ODACTRA	3	QL, AL, PR (ALLERGISTS)
ORALAIR	3	QL, AL, PR (ALLERGISTS)
ORALAIR ADULT STARTER PACK	3	QL, AL, PR (ALLERGISTS)
AMINOGLYCOSIDES		
ARIKAYCE	3	QL
KITABIS PAK	3	QL
<i>neomycin sulfate</i>	1	
TOBI PODHALER	3	QL
<i>tobramycin (300 mg/4ml nebu soln, 300 mg/5ml nebu soln)</i>	1	QL
TOBRAMYCIN 300 MG/5ML NEBU SOLN	3	QL
ANALGESICS - ANTI-INFLAMMATORY		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
ADALIMUMAB-ADAZ (20 MG/0.2ML SOLN PRSYR, 80 MG/0.8ML SOLN A-INJ)	2	PA, QL

Drug Name	Drug Tier	Requirements / Limits
ADALIMUMAB-ADAZ (40 MG/0.4ML SOLN A-INJ, 40 MG/0.4ML SOLN PRSYR)	2	PA, QL
ADALIMUMAB-ADAZ 10 MG/0.1ML SOLN PRSYR	2	PA, QL
AMJEVITA (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)	2	PA, QL
AMJEVITA 10 MG/0.2ML SOLN PRSYR	2	PA, QL
SIMPONI	3	PA, QL
ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS		
OLUMIANT	3	PA, QL
RINVOQ	2	PA, QL
RINVOQ LQ	2	PA, QL
XELJANZ (1 MG/ML SOLUTION, 5 MG TAB, 10 MG TAB)	3	PA, QL
XELJANZ XR	3	PA, QL
ANTIRHEUMATIC ANTIMETABOLITES		
OTREXUP	3	
RASUVO	3	
CYCLOOXYGENASE 2 (COX-2) INHIBITORS		
<i>celecoxib</i>	1	
GOLD COMPOUNDS		
AURANOFIN	2	
RIDAURA	2	
INTERLEUKIN-1 BLOCKERS		
ARCALYST	3	PA, QL
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		
KINERET	3	PA, QL
INTERLEUKIN-6 RECEPTOR INHIBITORS		
KEVZARA	2	PA

Drug Name	Drug Tier	Requirements / Limits
TYENNE (162 MG/0.9ML SOLN A-INJ, 162 MG/0.9ML SOLN PRSYR)	2	PA, QL
NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS		
<i>diclofenac-misoprostol</i>	1	
<i>naproxen-esomeprazole mg</i>	1	QL
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>diclofenac potassium (25 mg cap, 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>ec-naproxen</i>	1	
<i>etodolac</i>	1	
<i>etodolac er</i>	1	
<i>flurbiprofen 100 mg tab</i>	1	
<i>ibu</i>	1	
<i>ibuprofen (400 mg tab, 600 mg tab, 800 mg tab)</i>	1	
<i>indomethacin (25 mg cap, 25 mg/5ml suspension, 50 mg cap)</i>	1	
<i>indomethacin er</i>	1	
<i>ketorolac tromethamine 10 mg tab</i>	1	
<i>mefenamic acid</i>	1	
<i>meloxicam (7.5 mg tab, 15 mg tab)</i>	1	
<i>nabumetone</i>	1	
<i>naproxen (125 mg/5ml suspension, 250 mg tab, 375 mg tab, 375 mg tab dr, 500 mg tab, 500 mg tab dr)</i>	1	
<i>naproxen dr</i>	1	
<i>naproxen sodium (275 mg tab, 550 mg tab)</i>	1	
<i>naproxen sodium er</i>	1	
<i>oxaprozin 600 mg tab</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>piroxicam</i>	1	
<i>relafen</i>	1	
SPRIX	3	QL
<i>sulindac</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA (10 & 20 & 30 MG TAB THPK, 30 MG TAB)	2	PA, QL
OTEZLA (4 X 10 & 51 X20 MG TAB THPK, 20 MG TAB)	2	PA, QL
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>leflunomide</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA (50 MG/0.4ML SOLN PRSYR, 87.5 MG/0.7ML SOLN PRSYR, 125 MG/ML SOLN PRSYR)	2	PA, QL
ORENCIA CLICKJECT	2	PA, QL
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL (25 MG/0.5ML SOLN PRSYR, 25 MG/0.5ML SOLUTION, 50 MG/ML SOLN PRSYR)	2	PA, QL
ENBREL MINI	2	PA, QL
ENBREL SURECLICK	2	PA, QL
ANALGESICS - NONNARCOTIC		
ANALGESICS-SEDATIVES		
ALLZITAL	3	QL
<i>bac (butalbital-acetamin-caff)</i>	1	QL
<i>bupap</i>	1	QL
<i>butalbital-acetaminophen (50-300 mg tab, 50-325 mg tab)</i>	1	QL
<i>butalbital-apap-caffeine (50-300-40 mg cap, 50-325-40 mg cap, 50-325-40 mg tab)</i>	1	QL
<i>butalbital-aspirin-caffeine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>esgic 50-325-40 mg cap</i>	1	QL
SALICYLATES		
<i>diflunisal</i>	1	
<i>salsalate</i>	1	
ANALGESICS - OPIOID		
CODEINE COMBINATIONS		
<i>acetaminophen-codeine (120-12 mg/5ml solution, 300-15 mg tab, 300-30 mg tab, 300-30 mg/12.5ml solution, 300-60 mg tab)</i>	1	QL, AL
<i>ascomp-codeine</i>	1	QL, AL
<i>butalbital-apap-caff-cod</i>	1	QL
<i>butalbital-asa-caff-codeine</i>	1	QL, AL
HYDROCODONE COMBINATIONS		
<i>hydrocodone-acetaminophen (2.5-108 mg/5ml solution, 5-217 mg/10ml solution, 5-300 mg tab, 5-325 mg tab, 7.5-300 mg tab, 7.5-325 mg tab, 7.5-325 mg/15ml solution, 10-300 mg tab, 10-325 mg tab)</i>	1	QL
<i>hydrocodone-ibuprofen 7.5-200 mg tab</i>	1	QL
OPIOID AGONISTS		
<i>codeine sulfate 30 mg tab</i>	1	QL, AL
<i>fentanyl</i>	1	QL
<i>fentanyl citrate (200 mcg loz handle, 400 mcg loz handle, 600 mcg loz handle, 800 mcg loz handle, 1200 mcg loz handle, 1600 mcg loz handle)</i>	1	QL
<i>hydromorphone hcl (1 mg/ml liquid, 2 mg tab, 4 mg tab, 8 mg tab)</i>	1	QL
<i>hydromorphone hcl er</i>	1	QL
<i>levorphanol tartrate 2 mg tab</i>	1	QL
<i>meperidine hcl 50 mg tab</i>	1	QL
<i>methadone hcl (5 mg tab, 5 mg/5ml solution, 10 mg tab, 10 mg/5ml solution, 10 mg/ml conc, 40 mg tab sol)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>methadone hcl intensol</i>	1	QL
<i>methadose 40 mg tab sol</i>	1	QL
<i>morphine sulfate (10 mg/5ml solution, 15 mg tab, 20 mg/5ml solution, 30 mg tab)</i>	1	QL
<i>morphine sulfate (concentrate)</i>	1	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
NUCYNTA	3	QL
NUCYNTA ER	3	ST, QL
<i>oxycodone hcl (5 mg cap, 5 mg tab, 5 mg/5ml solution, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab, 100 mg/5ml conc)</i>	1	QL
OXYCONTIN	2	QL
<i>oxymorphone hcl</i>	1	QL
<i>tramadol hcl (50 mg tab, 100 mg tab)</i>	1	QL, AL
<i>tramadol hcl er (100 mg tab er 24h, 200 mg tab er 24h, 300 mg tab er 24h)</i>	1	QL, AL
XTAMPZA ER	3	ST
OPIOID COMBINATIONS		
<i>endocet</i>	1	QL
<i>oxycodone-acetaminophen (2.5-325 mg tab, 5-325 mg tab, 7.5-325 mg tab, 10-325 mg tab)</i>	1	QL
OPIOID PARTIAL AGONISTS		
BELBUCA	3	QL
BRIXADI	3	
BRIXADI (WEEKLY)	3	
<i>buprenorphine</i>	1	QL
<i>buprenorphine hcl (2 mg sl tab, 8 mg sl tab)</i>	1	
<i>buprenorphine hcl-naloxone hcl</i>	1	
<i>butorphanol tartrate 10 mg/ml solution</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>pentazocine-naloxone hcl</i>	1	QL
SUBLOCADE	3	
ZUBSOLV	3	
TRAMADOL COMBINATIONS		
<i>tramadol-acetaminophen</i>	1	QL, AL
ANDROGENS-ANABOLIC		
ANDROGENS		
ANDRODERM	2	QL
<i>danazol</i>	1	
<i>depo-testosterone</i>	1	
JATENZO	3	
KYZATREX	3	
<i>methylestosterone</i>	1	
<i>testosterone (1.62 % gel, 12.5 mg/act (1%) gel, 20.25 mg/1.25gm (1.62%) gel, 20.25 mg/act (1.62%) gel, 25 mg/2.5gm (1%) gel, 30 mg/act solution, 40.5 mg/2.5gm (1.62%) gel, 50 mg/5gm (1%) gel)</i>	1	QL
<i>testosterone cypionate</i>	1	
TLANDO	3	
UNDECATREX	3	
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide (2 mg foam, 2 mg/act foam)</i>	1	
<i>hydrocortisone 100 mg/60ml enema</i>	1	
NITRATE VASODILATING AGENTS		
<i>nitroglycerin 0.4 % ointment</i>	1	
RECTAL ANESTHETIC/STEROIDS		
<i>hydrocort-pramoxine (perianal)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PROCORT	3	
RECTAL STEROIDS		
<i>anucort-hc</i>	1	
<i>anusol-hc 25 mg suppos</i>	1	
<i>hemmorex-hc</i>	1	
<i>hydrocortisone (perianal) 2.5 % cream</i>	1	
<i>hydrocortisone acetate (25 mg suppos, 30 mg suppos)</i>	1	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
ANTHELMINTICS		
<i>albendazole</i>	1	
BENZNIDAZOLE	3	
EMVERM	3	
<i>ivermectin 3 mg tab</i>	1	QL
<i>praziquantel</i>	1	
ANTI-INFECTIVE AGENTS - MISC.		
AEMCOLO	3	
IMPAVIDO	3	QL
LIKMEZ	3	AL
<i>metronidazole (250 mg tab, 375 mg cap, 500 mg tab)</i>	1	
<i>tinidazole</i>	1	
<i>trimethoprim</i>	1	
XIFAXAN	2	
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	

Drug Name	Drug Tier	Requirements / Limits
<i>sulfatrim pediatric</i>	1	
ANTIPROTOZOAL AGENTS		
ALINIA 100 MG/5ML RECON SUSP	2	
<i>atovaquone</i>	1	
LAMPIT	3	
<i>nitazoxanide</i>	1	
GLYCOPEPTIDES		
<i>vancomycin hcl (1 gm recon soln, 5 gm recon soln, 10 gm recon soln, 25 mg/ml recon soln, 50 mg/ml recon soln, 125 mg cap, 250 mg cap, 250 mg/5ml recon soln, 500 mg recon soln, 750 mg recon soln)</i>	1	
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	3	PR (Pulmonology or Infectious Disease)
OXAZOLIDINONES		
<i>linezolid (100 mg/5ml recon susp, 600 mg tab)</i>	1	QL
SIVEXTRO 200 MG TAB	2	QL
URINARY ANTI-INFECTIVES		
<i>fosfomycin tromethamine</i>	1	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin (25 mg/5ml suspension, 50 mg/10ml suspension)</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>nitrofurantoin monohyd macro</i>	1	
URINARY ANTISEPTIC-ANTISPASMODIC &/OR ANALGESICS		
<i>mb caps</i>	1	
<i>me/naphos/mb/hyo1</i>	1	
<i>phosphasal</i>	1	
<i>urelle</i>	1	
<i>uribel 118 mg cap</i>	1	
<i>urimar-t 120 mg cap</i>	1	
<i>urin ds</i>	1	
<i>urneva</i>	1	
<i>uro-458</i>	1	
<i>uro-mp</i>	1	
<i>uro-sp</i>	1	
<i>ustell</i>	1	
<i>utira-c</i>	1	
<i>vilamit mb</i>	1	
<i>vilevev mb</i>	1	
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
ASPRUZY SPRINKLE	3	QL
<i>ranolazine er</i>	1	QL
NITRATES		
<i>isosorbide dinitrate</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>isosorbide mononitrate er</i>	1	
<i>minitran</i>	1	
NITRO-DUR (0.3 MG/HR PATCH 24HR, 0.8 MG/HR PATCH 24HR)	3	

Drug Name	Drug Tier	Requirements / Limits
<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	
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
<i>buspirone hcl</i>	1	
<i>hydroxyzine hcl (10 mg tab, 10 mg/5ml syrup, 25 mg tab, 50 mg tab)</i>	1	
<i>hydroxyzine pamoate (25 mg cap, 50 mg cap)</i>	1	
<i>meprobamate</i>	1	
BENZODIAZEPINES		
<i>alprazolam</i>	1	
<i>alprazolam er</i>	1	
<i>alprazolam xr</i>	1	
<i>chlordiazepoxide hcl</i>	1	
<i>clorazepate dipotassium</i>	1	
<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	
<i>lorazepam intensol</i>	1	
<i>oxazepam</i>	1	
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide phosphate</i>	1	
NORPACE CR	3	
<i>quinidine gluconate er</i>	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
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	3	QL
<i>pacerone</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
5-LIPOXYGENASE INHIBITORS		
<i>zileuton er</i>	1	QL
ZYFLO	3	QL
ADRENERGIC COMBINATIONS		
ANORO ELLIPTA	2	QL
BEVESPI AEROSPHERE	3	QL
BREO ELLIPTA 50-25 MCG/INH AER POW BA	2	QL
<i>breynga</i>	1	QL
BREZTRI AEROSPHERE	2	QL
<i>budesonide-formoterol fumarate</i>	1	QL
COMBIVENT RESPIMAT	2	QL
DULERA	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
<i>ipratropium-albuterol</i>	1	
STIOLTO RESPIMAT	2	QL
TRELEGY ELLIPTA	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>wixela inhub</i>	1	QL
ANTI-IGE MONOCLONAL ANTIBODIES		
XOLAIR (75 MG/0.5ML SOLN A-INJ, 150 MG/ML SOLN A-INJ, 300 MG/2ML SOLN A-INJ)	3	PA, QL
XOLAIR (75 MG/0.5ML SOLN PRSYR, 150 MG/ML SOLN PRSYR, 300 MG/2ML SOLN PRSYR)	3	PA, QL
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium 20 mg/2ml nebu soln</i>	1	
BETA ADRENERGICS		
<i>albuterol sulfate (0.63 mg/3ml nebu soln, 1.25 mg/3ml nebu soln, 2 mg tab, 2 mg/5ml syrup, (2.5 mg/3ml) 0.083% nebu soln, 2.5 mg/0.5ml nebu soln, 4 mg tab, (5 mg/ml) 0.5% nebu soln, 8 mg/20ml syrup)</i>	1	
<i>albuterol sulfate hfa</i>	1	QL
<i>arformoterol tartrate</i>	1	QL
<i>formoterol fumarate</i>	1	QL
<i>levalbuterol hcl (0.31 mg/3ml nebu soln, 0.63 mg/3ml nebu soln, 1.25 mg/0.5ml nebu soln, 1.25 mg/3ml nebu soln)</i>	1	
PROAIR RESPICLICK	2	QL
SEREVENT DISKUS	2	QL
STRIVERDI RESPIMAT	3	QL
<i>terbutaline sulfate (2.5 mg tab, 5 mg tab)</i>	1	
VENTOLIN HFA	2	QL
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT HFA	2	QL
INCRUSE ELLIPTA	2	QL
<i>ipratropium bromide 0.02 % solution</i>	1	
SPIRIVA RESPIMAT	2	QL
<i>tiotropium bromide</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
TUDORZA PRESSAIR	3	QL
INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)		
FASENRA 10 MG/0.5ML SOLN PRSYR	3	PA
FASENRA PEN	3	PA
NUCALA (100 MG/ML SOLN A-INJ, 100 MG/ML SOLN PRSYR)	3	PA
NUCALA 40 MG/0.4ML SOLN PRSYR	3	PA, QL
LEUKOTRIENE RECEPTOR ANTAGONISTS		
<i>montelukast sodium (4 mg chew tab, 5 mg chew tab)</i>	1	
<i>montelukast sodium 10 mg tab</i>	1	QL
<i>montelukast sodium 4 mg packet</i>	1	QL, AL
<i>zafirlukast</i>	1	QL
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
<i>roflumilast 250 mcg tab</i>	1	QL
<i>roflumilast 500 mcg tab</i>	1	QL
STEROID INHALANTS		
ARNUITY ELLIPTA (100 MCG/ACT AER POW BA, 200 MCG/ACT AER POW BA)	2	QL
ARNUITY ELLIPTA 50 MCG/ACT AER POW BA	2	QL, AL
ASMANEX (120 METERED DOSES)	2	
ASMANEX (14 METERED DOSES)	2	
ASMANEX (30 METERED DOSES)	2	
ASMANEX (60 METERED DOSES)	2	
ASMANEX HFA	2	QL
<i>budesonide (0.25 mg/2ml suspension, 0.5 mg/2ml suspension, 1 mg/2ml suspension)</i>	1	QL
PULMICORT FLEXHALER	2	QL
QVAR REDHALER	2	QL

Drug Name	Drug Tier	Requirements / Limits
THYMIC STROMAL LYMPHOPOIETIN (TSLP) ANTAGONISTS		
TEZSPIRE	3	PA
XANTHINES		
<i>elixophyllin</i>	1	
THEO-24	3	
<i>theophylline</i>	1	
<i>theophylline er (300 mg tab er 12h, 400 mg tab er 24h, 450 mg tab er 12h, 600 mg tab er 24h)</i>	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
<i>jantoven</i>	1	
<i>warfarin sodium</i>	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS (2.5 MG TAB, 5 MG TAB)	2	
ELIQUIS DVT/PE STARTER PACK	2	
XARELTO (2.5 MG TAB, 10 MG TAB, 15 MG TAB, 20 MG TAB)	2	
XARELTO 1 MG/ML RECON SUSP	2	QL, AL
XARELTO STARTER PACK	2	
LOW MOLECULAR WEIGHT HEPARINS		
<i>enoxaparin sodium (30 mg/0.3ml soln prsyr, 40 mg/0.4ml soln prsyr, 60 mg/0.6ml soln prsyr, 80 mg/0.8ml soln prsyr, 100 mg/ml soln prsyr, 120 mg/0.8ml soln prsyr, 150 mg/ml soln prsyr)</i>	1	QL
FRAGMIN	3	
SYNTHETIC HEPARINOID-LIKE AGENTS		
<i>fondaparinux sodium</i>	1	
THROMBIN INHIBITORS - SELECTIVE DIRECT & REVERSIBLE		
<i>dabigatran etexilate mesylate</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA (0.5 MG/ML SUSPENSION, 2 MG TAB, 4 MG TAB, 6 MG TAB, 8 MG TAB, 10 MG TAB, 12 MG TAB)	3	QL, AL
<i>perampanel</i>	1	QL, AL
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam (2.5 mg/ml suspension, 10 mg tab, 20 mg tab)</i>	1	
<i>clonazepam</i>	1	
<i>diazepam (10 mg gel, 20 mg gel)</i>	1	
LIBERVANT	3	AL
NAYZILAM	3	
SYMPAZAN	3	
VALTOCO 10 MG DOSE	3	
VALTOCO 15 MG DOSE	3	
VALTOCO 20 MG DOSE	3	
VALTOCO 5 MG DOSE	3	
ANTICONVULSANTS - MISC.		
BRIVIACT (10 MG TAB, 10 MG/ML SOLUTION, 25 MG TAB, 50 MG TAB, 75 MG TAB, 100 MG TAB)	3	
<i>carbamazepine (100 mg chew tab, 100 mg/5ml suspension, 200 mg tab, 200 mg/10ml suspension)</i>	1	
<i>carbamazepine er</i>	1	
CARBATROL	3	
DIACOMIT	3	PA
EPIDIOLEX	3	PA
<i>epitol</i>	1	
<i>eslicarbazepine acetate</i>	1	QL
FINTEPLA	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
<i>gabapentin (100 mg cap, 250 mg/5ml solution, 300 mg cap, 300 mg/6ml solution, 400 mg cap, 600 mg tab, 800 mg tab)</i>	1	
<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
LAMICTAL	3	
LAMICTAL ODT (21 X 25 MG & 7 X 50 MG KIT, 25 & 50 & 100 MG KIT, 42 X 50 MG & 14X100 MG KIT)	3	QL
LAMICTAL ODT (25 MG TAB DISP, 50 MG TAB DISP, 100 MG TAB DISP, 200 MG TAB DISP)	3	
LAMICTAL STARTER	3	QL
LAMICTAL XR (21 X 25 MG & 7 X 50 MG KIT, 25 & 50 & 100 MG KIT, 50 & 100 & 200 MG KIT)	3	QL
LAMICTAL XR (25 MG TAB ER 24H, 50 MG TAB ER 24H, 100 MG TAB ER 24H, 200 MG TAB ER 24H, 250 MG TAB ER 24H, 300 MG TAB ER 24H)	3	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	QL
<i>lamotrigine (5 mg chew tab, 25 mg chew tab, 25 mg tab, 25 mg tab disp, 50 mg tab disp, 100 mg tab, 100 mg tab disp, 150 mg tab, 200 mg tab, 200 mg tab disp)</i>	1	
<i>lamotrigine er</i>	1	QL
<i>lamotrigine starter kit-blue</i>	1	QL
<i>lamotrigine starter kit-green</i>	1	QL
<i>lamotrigine starter kit-orange</i>	1	QL
<i>levetiracetam (100 mg/ml solution, 250 mg tab, 500 mg tab, 500 mg/5ml solution, 750 mg tab, 1000 mg tab)</i>	1	
<i>levetiracetam er</i>	1	QL
<i>oxcarbazepine (150 mg tab, 300 mg tab, 300 mg/5ml suspension, 600 mg tab)</i>	1	
<i>oxcarbazepine er</i>	1	
OXTELLAR XR	3	

Drug Name	Drug Tier	Requirements / Limits
<i>pregabalin (20 mg/ml solution, 225 mg cap)</i>	1	QL
<i>pregabalin (25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap, 200 mg cap, 300 mg cap)</i>	1	
<i>primidone (50 mg tab, 250 mg tab)</i>	1	
<i>roweepra</i>	1	
<i>rufinamide (200 mg tab, 400 mg tab)</i>	1	QL
<i>rufinamide 40 mg/ml suspension</i>	1	QL, AL
SPRITAM	3	
<i>subvenite</i>	1	
<i>subvenite starter kit-blue</i>	1	QL
<i>subvenite starter kit-green</i>	1	QL
<i>subvenite starter kit-orange</i>	1	QL
TEGRETOL (100 MG/5ML SUSPENSION, 200 MG TAB)	3	
TEGRETOL-XR	3	
TOPAMAX	3	
TOPAMAX SPRINKLE	3	
<i>topiramate (15 mg cap sprink, 25 mg cap sprink, 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab)</i>	1	
<i>topiramate 25 mg/ml solution</i>	1	QL, AL
<i>topiramate er</i>	1	QL
<i>zonisamide</i>	1	
ZTALMY	3	PA, QL
CARBAMATES		
<i>felbamate (400 mg tab, 600 mg tab, 600 mg/5ml suspension)</i>	1	
XCOPRI	3	QL
XCOPRI (250 MG DAILY DOSE)	3	QL
XCOPRI (350 MG DAILY DOSE)	3	QL
GABA MODULATORS		
<i>tiagabine hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>vigabatrin</i>	1	
<i>vigadrone</i>	1	
<i>vigpoder</i>	1	
HYDANTOINS		
DILANTIN (30 MG CAP, 100 MG CAP, 125 MG/5ML SUSPENSION)	3	
DILANTIN INFATABS	3	
DILANTIN-125	3	
<i>phenytek</i>	1	
<i>phenytoin (50 mg chew tab, 100 mg/4ml suspension, 125 mg/5ml suspension)</i>	1	
<i>phenytoin infatabs</i>	1	
<i>phenytoin sodium extended (100 mg cap, 200 mg cap, 300 mg cap)</i>	1	
SUCCINIMIDES		
<i>ethosuximide (250 mg cap, 250 mg/5ml solution)</i>	1	
<i>methsuximide</i>	1	
VALPROIC ACID		
DEPAKOTE	3	
DEPAKOTE ER	3	
DEPAKOTE SPRINKLES	3	
<i>divalproex sodium</i>	1	
<i>divalproex sodium er</i>	1	
<i>valproic acid (250 mg cap, 250 mg/5ml solution, 500 mg/10ml solution)</i>	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine (15 mg tab disp, 30 mg tab disp, 45 mg tab disp)</i>	1	QL
<i>mirtazapine (7.5 mg tab, 15 mg tab, 30 mg tab, 45 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ANTIDEPRESSANTS - MISC.		
APLENZIN	3	QL
<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)		
EMSAM	3	QL
MARPLAN	3	
<i>tranylcypromine sulfate</i>	1	
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, 20 mg cap, 20 mg/5ml solution, 40 mg cap)</i>	1	
<i>fluvoxamine maleate</i>	1	
<i>fluvoxamine maleate er</i>	1	QL
<i>paroxetine hcl (10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab)</i>	1	
<i>paroxetine hcl er</i>	1	
<i>sertraline hcl (20 mg/ml conc, 25 mg tab, 50 mg tab, 100 mg tab)</i>	1	
SEROTONIN MODULATORS		
<i>trazodone hcl</i>	1	
TRINTELLIX	2	QL
<i>vilazodone hcl</i>	1	QL
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
DESVENLAFAXINE ER	3	QL

Drug Name	Drug Tier	Requirements / Limits
<i>desvenlafaxine succinate er (50 mg tab er 24h, 100 mg tab er 24h)</i>	1	
<i>desvenlafaxine succinate er 25 mg tab er 24h</i>	1	QL
<i>duloxetine hcl (20 mg cp dr part, 30 mg cp dr part, 60 mg cp dr part)</i>	1	
FETZIMA	3	QL
FETZIMA TITRATION	3	QL
<i>venlafaxine hcl</i>	1	
<i>venlafaxine hcl er (37.5 mg cap er 24h, 75 mg cap er 24h, 150 mg cap er 24h)</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, 10 mg/ml conc, 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap)</i>	1	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
<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>	1	
<i>trimipramine maleate</i>	1	
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose</i>	1	
ANTIDIABETIC - AMYLIN ANALOGS		
SYMLINPEN 120	3	QL
SYMLINPEN 60	3	QL

Drug Name	Drug Tier	Requirements / Limits
BIGUANIDES		
<i>metformin hcl (500 mg tab, 500 mg/5ml solution, 1000 mg tab)</i>	1	
<i>metformin hcl 850 mg tab</i>	1	AL
<i>metformin hcl er</i>	1	
DIABETIC OTHER		
BAQSIMI ONE PACK	3	
BAQSIMI TWO PACK	3	
<i>diazoxide</i>	1	
<i>glucagon emergency 1 mg recon soln</i>	1	
GVOKE HYPOPEN 1-PACK	3	
GVOKE HYPOPEN 2-PACK	3	
GVOKE KIT	3	
GVOKE PFS 1 MG/0.2ML SOLN PRSYR	3	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
<i>saxagliptin hcl</i>	1	QL
DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS		
<i>saxagliptin-metformin er</i>	1	QL
DOPAMINE RECEPTOR AGONISTS - ERGOT DERIVATIVES		
CYCLOSET	3	
HUMAN INSULIN		
FIASP	2	
FIASP FLEXTOUCH	2	
FIASP PENFILL	2	
FIASP PUMPCART	2	
HUMULIN R U-500 (CONCENTRATED)	2	
HUMULIN R U-500 KWIKPEN	2	
LANTUS	2	

Drug Name	Drug Tier	Requirements / Limits
LANTUS SOLOSTAR	2	
NOVOLOG	2	
NOVOLOG FLEXPEN	2	
NOVOLOG MIX 70/30	2	
NOVOLOG MIX 70/30 FLEXPEN	2	
NOVOLOG PENFILL	2	
TOUJEO MAX SOLOSTAR	2	
TOUJEO SOLOSTAR	2	
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
XULTOPHY	2	ST, QL
MEGLITINIDE ANALOGUES		
<i>nateglinide</i>	1	
<i>repaglinide</i>	1	
PROGESTERONE RECEPTOR ANTAGONISTS		
<i>mifepristone 300 mg tab</i>	1	PA, AL
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	
SULFONYLUREA-THIAZOLIDINEDIONE COMBINATIONS		
<i>pioglitazone hcl-glimepiride</i>	1	QL
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	
THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS		
<i>pioglitazone hcl-metformin hcl</i>	1	
THIAZOLIDINEDIONES		
<i>pioglitazone hcl</i>	1	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS		
MYTESI	3	PA, QL
ANTIDIARRHEAL/PROBIOTIC COMBINATIONS		
RESTORA RX	3	
ANTIPERISTALTIC AGENTS		
<i>diphenoxylate-atropine 2.5-0.025 mg tab</i>	1	
MOTOFEN	3	
<i>opium</i>	1	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
CHEMET	3	

Drug Name	Drug Tier	Requirements / Limits
<i>deferasirox (125 mg tab sol, 250 mg tab sol, 500 mg tab sol)</i>	1	PA
<i>deferasirox (90 mg packet, 180 mg packet, 360 mg packet)</i>	1	PA
<i>deferasirox (90 mg tab, 180 mg tab, 360 mg tab)</i>	1	PA
<i>deferasirox granules</i>	1	PA
<i>deferiprone</i>	1	PA
FERRIPROX 100 MG/ML SOLUTION	3	PA
FERRIPROX TWICE-A-DAY	3	PA
PENTETATE CALCIUM TRISODIUM	3	
PENTETATE ZINC TRISODIUM	3	
VISTOGARD	3	QL
OPIOID ANTAGONISTS		
KLOXXADO	3	
<i>naloxone hcl 4 mg/0.1ml liquid</i>	1	
<i>naltrexone hcl</i>	1	
OPVEE	3	
REXTOVY	3	
ZIMHI	3	
ZURNAI	2	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron hcl 1 mg tab</i>	1	
<i>ondansetron (4 mg tab disp, 8 mg tab disp)</i>	1	
<i>ondansetron hcl (4 mg tab, 8 mg tab)</i>	1	
<i>ondansetron hcl 4 mg/5ml solution</i>	1	
SANCUSO	3	QL
ANTIEMETIC COMBINATIONS		
AKYNZEO 300-0.5 MG CAP	3	

Drug Name	Drug Tier	Requirements / Limits
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine hcl 25 mg tab</i>	1	
<i>scopolamine</i>	1	QL
<i>trimethobenzamide hcl</i>	1	
ANTIEMETICS - MISCELLANEOUS		
<i>dronabinol</i>	1	
SYNDROS	3	
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant (40 mg cap, 80 mg cap, 125 mg cap)</i>	1	
<i>aprepitant 80 & 125 mg cap</i>	1	
EMEND 125 MG/5ML RECON SUSP	2	
ANTIFUNGALS		
<i>flucytosine</i>	1	
<i>griseofulvin microsize (125 mg/5ml suspension, 500 mg tab)</i>	1	
<i>griseofulvin ultramicrosize (125 mg tab, 250 mg tab)</i>	1	
<i>nystatin 500000 unit tab</i>	1	
<i>terbinafine hcl 250 mg tab</i>	1	
IMIDAZOLES		
<i>ketoconazole 200 mg tab</i>	1	
TRIAZOLES		
CRESEMBA (74.5 MG CAP, 186 MG CAP)	3	QL, PR (Oncology or Infectious Disease)
<i>fluconazole (10 mg/ml recon susp, 40 mg/ml recon susp, 50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab)</i>	1	
<i>itraconazole (10 mg/ml solution, 100 mg cap)</i>	1	
NOXAFIL 300 MG PACKET	2	AL, PR (Oncology or Infectious Disease)

Drug Name	Drug Tier	Requirements / Limits
<i>posaconazole (40 mg/ml suspension, 100 mg tab dr)</i>	1	PR (Oncology or Infectious Disease)
<i>voriconazole (40 mg/ml recon susp, 50 mg tab, 200 mg tab)</i>	1	QL, PR (Oncology or Infectious Disease)
ANTIHISTAMINES		
ANTIHISTAMINES - ETHANOLAMINES		
<i>carbinoxamine maleate 4 mg tab</i>	1	
<i>clemastine fumarate 0.67 mg/5ml syrup</i>	1	
ANTIHISTAMINES - PHENOTHIAZINES		
<i>promethazine hcl (6.25 mg/5ml solution, 12.5 mg suppos, 12.5 mg tab, 12.5 mg/10ml solution, 25 mg suppos, 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	
ANTIHYPERLIPIDEMICS		
ACL INHIB-INTESTINAL CHOLESTEROL ABSORPTION INHIB COMB		
NEXLIZET	2	PA, QL
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL	2	PA, QL
ANTIHYPERLIPIDEMICS - MISC.		
<i>icosapent ethyl</i>	1	QL
<i>omega-3-acid ethyl esters</i>	1	QL
BILE ACID SEQUESTRANTS		
<i>cholestyramine (4 gm packet, 4 gm/dose powder)</i>	1	
<i>cholestyramine light (4 gm packet, 4 gm/dose powder)</i>	1	
<i>colesevelam hcl</i>	1	
<i>colestipol hcl (1 gm tab, 5 gm granules, 5 gm packet)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>prevalite (4 gm packet, 4 gm/dose powder)</i>	1	
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	
<i>fenofibrate micronized (43 mg cap, 67 mg cap, 130 mg cap, 134 mg cap, 200 mg cap)</i>	1	
<i>fenofibric acid (45 mg cap dr, 135 mg cap dr)</i>	1	
<i>gemfibrozil</i>	1	
HMG COA REDUCTASE INHIBITORS		
ALTOPREV	3	QL
ATORVALIQ	3	AL
<i>atorvastatin calcium</i>	1	AL
FLOLIPID	3	
<i>fluvastatin sodium</i>	1	AL
<i>fluvastatin sodium er</i>	1	AL
<i>lovastatin</i>	1	AL
<i>pitavastatin calcium</i>	1	QL, AL
<i>pravastatin sodium</i>	1	AL
<i>rosuvastatin calcium</i>	1	AL
<i>simvastatin</i>	1	AL
INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB		
<i>ezetimibe-simvastatin</i>	1	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe</i>	1	
NICOTINIC ACID DERIVATIVES		
<i>niacin er (antihyperlipidemic)</i>	1	QL
PCSK9 INHIBITORS		
REPATHA	2	PA, QL

Drug Name	Drug Tier	Requirements / Limits
REPATHA PUSHTRONEX SYSTEM	2	PA, QL
REPATHA SURECLICK	2	PA, QL
ANTIHYPERTENSIVES		
ACE INHIBITOR & CALCIUM CHANNEL BLOCKER COMBINATIONS		
<i>amlodipine besy-benazepril hcl</i>	1	
PRESTALIA	3	
ACE INHIBITORS		
<i>benazepril hcl</i>	1	
<i>captopril</i>	1	
<i>enalapril maleate (1 mg/ml solution, 2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab)</i>	1	
<i>fosinopril sodium</i>	1	
<i>lisinopril</i>	1	
<i>moexipril hcl</i>	1	
<i>perindopril erbumine 4 mg tab</i>	1	
QBRELIS	3	
<i>quinapril hcl</i>	1	
<i>ramipril</i>	1	
<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	
<i>quinapril-hydrochlorothiazide</i>	1	
AGENTS FOR PHEOCHROMOCYTOMA		
<i>metirosine</i>	1	
<i>phenoxybenzamine hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES		
<i>amlodipine-valsartan-hctz</i>	1	
<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	
ANGIOTENSIN II RECEPTOR ANTAG & THIAZIDE/THIAZIDE-LIKE		
<i>candesartan cilexetil-hctz</i>	1	
EDARBYCLOR	3	
<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	
EDARBI	3	
<i>irbesartan</i>	1	
<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	
<i>valsartan 4 mg/ml solution</i>	1	QL, AL
ANTIADRENERGICS - CENTRALLY ACTING		
<i>clonidine</i>	1	QL
<i>clonidine hcl</i>	1	
<i>guanfacine hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>methyldopa 250 mg tab</i>	1	
ANTIADRENERGICS - PERIPHERALLY ACTING		
<i>doxazosin mesylate</i>	1	
<i>prazosin hcl</i>	1	
<i>terazosin hcl</i>	1	
ANTIHYPERTENSIVES - MISC.		
VECAMYL	2	
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>	1	QL
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone</i>	1	QL
VASODILATORS		
<i>hydralazine hcl (10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab)</i>	1	
<i>minoxidil</i>	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone-proguanil hcl</i>	1	
COARTEM	2	QL
<i>chloroquine phosphate</i>	1	
<i>hydroxychloroquine sulfate 200 mg tab</i>	1	
<i>mefloquine hcl</i>	1	
<i>primaquine phosphate</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>pyrimethamine</i>	1	
<i>quinine sulfate</i>	1	QL
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE	3	PA
<i>pyridostigmine bromide 60 mg tab</i>	1	QL
<i>pyridostigmine bromide 60 mg/5ml solution</i>	1	
<i>pyridostigmine bromide er 180 mg tab er</i>	1	
ANTIMYCOBACTERIAL AGENTS		
<i>ethambutol hcl</i>	1	
<i>isoniazid (50 mg/5ml syrup, 100 mg tab, 300 mg tab)</i>	1	
PRETOMANID	3	PR (Pulmonology or Infectious Disease)
PRIFTIN	3	
<i>pyrazinamide</i>	1	
<i>rifabutin</i>	1	
<i>rifampin (150 mg cap, 300 mg cap)</i>	1	
SIRTURO	3	
TRECATOR	3	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
MYLERAN	3	
ANDROGEN BIOSYNTHESIS INHIBITORS		
<i>abiraterone acetate 250 mg tab</i>	1	PA, QL
<i>abiraterone acetate 500 mg tab</i>	1	PA, QL
<i>abirtega</i>	1	PA, QL
YONSA	3	PA, QL
ANTIADRENALS		
LYSODREN	2	

Drug Name	Drug Tier	Requirements / Limits
ANTIANDROGENS		
<i>bicalutamide</i>	1	QL
ERLEADA	3	PA, QL
<i>nilutamide</i>	1	
NUBEQA	3	PA, QL
XTANDI	3	PA, QL
ANTIESTROGENS		
SOLTAMOX	3	
<i>tamoxifen citrate</i>	1	AL
<i>toremifene citrate</i>	1	PA
ANTIMETABOLITES		
<i>capecitabine</i>	1	
JYLAMVO	3	
<i>mercaptopurine (50 mg tab, 2000 mg/100ml suspension)</i>	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	
ONUREG	3	PA
TABLOID	3	PA
TREXALL	2	
XATMEP	3	
ANTINEOPLASTIC - AKT INHIBITORS		
TRUQAP (160 MG TAB THPK, 200 MG TAB THPK)	3	PA, QL
TRUQAP (160 MG TAB, 200 MG TAB)	3	PA, QL
ANTINEOPLASTIC - ALK INHIBITORS		
ALECENSA	2	PA, QL
ALUNBRIG (30 MG TAB, 90 MG TAB, 180 MG TAB)	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
ALUNBRIG 90 & 180 MG TAB THPK	3	PA, QL
LORBRENA	3	PA, QL
XALKORI (20 MG CAP SPRINK, 50 MG CAP SPRINK, 150 MG CAP SPRINK)	3	PA, QL, AL
XALKORI (200 MG CAP, 250 MG CAP)	3	PA, QL
ZYKADIA	3	PA, QL
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA	3	PA, QL
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA	3	PA, QL
VENCLEXTA STARTING PACK	3	PA, QL
ANTINEOPLASTIC - BCR-ABL KINASE INHIBITORS		
BOSULIF (100 MG TAB, 400 MG TAB, 500 MG TAB)	3	PA, QL
BOSULIF (50 MG CAP, 100 MG CAP)	3	PA, QL
<i>dasatinib</i>	1	PA
ICLUSIG (15 MG TAB, 30 MG TAB, 45 MG TAB)	3	PA, QL
ICLUSIG 10 MG TAB	3	PA, QL
<i>imatinib mesylate</i>	1	PA, QL
NILOTINIB D-TARTRATE	3	PA, QL
<i>nilotinib hcl</i>	1	PA, QL
SCEMBLIX	3	PA, QL
ANTINEOPLASTIC - BRAF KINASE INHIBITORS		
BRAFTOVI 75 MG CAP	3	PA, QL
OJEMDA (25 MG/ML RECON SUSP, 100 MG TAB)	3	
TAFINLAR (50 MG CAP, 75 MG CAP)	3	PA, QL
TAFINLAR 10 MG TAB SOL	3	PA
ZELBORAF	3	PA, QL
ANTINEOPLASTIC - BTK INHIBITORS		
BRUKINSA 160 MG TAB	3	PA

Drug Name	Drug Tier	Requirements / Limits
BRUKINSA 80 MG CAP	3	PA
CALQUENCE 100 MG TAB	3	PA
IMBRUVICA (280 MG TAB, 420 MG TAB)	3	PA, QL
IMBRUVICA (70 MG CAP, 70 MG/ML SUSPENSION)	3	PA, QL
IMBRUVICA 140 MG CAP	3	PA, QL
IMBRUVICA 140 MG TAB	3	PA, QL
JAYPIRCA	3	PA, QL
ANTINEOPLASTIC - CSF1R KINASE INHIBITORS		
ROMVIMZA	3	PA, QL
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib hcl</i>	1	PA, QL
<i>gefitinib</i>	1	PA, QL
GILOTRIF	3	PA, QL
LAZCLUZE	3	PA
TAGRISSE	3	PA, QL
VIZIMPRO	3	PA, QL
ANTINEOPLASTIC - FGFR KINASE INHIBITORS		
BALVERSA	3	PA
LYTGOBI (12 MG DAILY DOSE)	3	PA, QL
LYTGOBI (16 MG DAILY DOSE)	3	PA, QL
LYTGOBI (20 MG DAILY DOSE)	3	PA, QL
PEMAZYRE	3	PA
ANTINEOPLASTIC - GAMMA SECRETASE INHIBITORS		
OGSIVEO	3	PA
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO	3	PA
ERIVEDGE	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
ODOMZO	3	PA, QL
ANTINEOPLASTIC - HIF-2-ALPHA INHIBITORS		
WELIREG	3	PA, QL
ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS		
ZOLINZA	3	PA, QL
ANTINEOPLASTIC - HORMONAL AND RELATED AGENT COMBINATIONS		
AKEEGA	3	PA, QL
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST	3	PA, QL
ANTINEOPLASTIC - KRAS INHIBITORS		
KRAZATI	3	PA, QL
LUMAKRAS	3	PA
ANTINEOPLASTIC - MEK INHIBITORS		
COTELLIC	3	PA, QL
GOMEKLI	3	PA
KOSELUGO	3	PA
MEKINIST 0.05 MG/ML RECON SOLN	3	PA
MEKINIST 0.5 MG TAB	3	PA, QL
MEKINIST 2 MG TAB	3	PA, QL
MEKTOVI	3	PA, QL
ANTINEOPLASTIC - MENIN INHIBITORS		
REVUFORJ (110 MG TAB, 160 MG TAB)	3	PA
REVUFORJ 25 MG TAB	3	PA
ANTINEOPLASTIC - MET INHIBITORS		
TABRECTA	3	PA
TEPMETKO	3	PA, QL
ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS		
TAZVERIK	3	PA

Drug Name	Drug Tier	Requirements / Limits
ANTINEOPLASTIC - MTOR KINASE INHIBITORS		
<i>everolimus (2 mg tab sol, 3 mg tab sol, 5 mg tab sol)</i>	1	PA, QL
<i>everolimus (2.5 mg tab, 5 mg tab, 7.5 mg tab, 10 mg tab)</i>	1	PA, QL
<i>torpenz</i>	1	PA, QL
ANTINEOPLASTIC - MULTIKINASE INHIBITORS		
CABOMETYX	3	PA
CAPRELSA	2	PA, QL
COMETRIQ (100 MG DAILY DOSE)	3	PA, QL
COMETRIQ (140 MG DAILY DOSE)	3	PA, QL
COMETRIQ (60 MG DAILY DOSE)	3	PA, QL
ENSACOVE	3	PA
<i>lapatinib ditosylate</i>	1	PA, QL
NERLYNX	3	PA
<i>pazopanib hcl</i>	1	PA, QL
QINLOCK	3	PA
RYDAPT	3	PA
<i>sorafenib tosylate</i>	1	PA, QL
STIVARGA	3	PA, QL
<i>sunitinib malate</i>	1	PA
TURALIO 125 MG CAP	3	PA, QL
VANFLYTA	3	PA, QL
XOSPATA	3	PA
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT	3	PA, QL
ANTINEOPLASTIC - PROTEASOME INHIBITORS		
NINLARO	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
ANTINEOPLASTIC - RET INHIBITORS		
GAVRETO	3	PA, QL
RETEVMO (40 MG CAP, 80 MG CAP)	3	PA, QL
RETEVMO (40 MG TAB, 80 MG TAB, 120 MG TAB, 160 MG TAB)	3	PA, QL
ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS		
AUGTYRO	3	PA
IBTROZI	3	PA, QL
ROZLYTREK (100 MG CAP, 200 MG CAP)	3	PA, QL
ROZLYTREK 50 MG PACKET	3	PA, QL, AL
VITRAKVI (20 MG/ML SOLUTION, 25 MG CAP, 100 MG CAP)	3	PA
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK	3	PA
XPOVIO (40 MG ONCE WEEKLY) 10 MG TAB THPK	3	PA
XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK	3	PA
XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK	3	PA
XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK	3	PA
XPOVIO (60 MG TWICE WEEKLY)	3	PA
XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK	3	PA
XPOVIO (80 MG TWICE WEEKLY)	3	PA
ANTINEOPLASTIC COMBINATIONS		
AVMAPKI FAKZYNJA CO-PACK	3	PA
INQOVI	3	PA
LONSURF	3	PA, QL
ANTINEOPLASTICS MISC.		
ACTIMMUNE	3	PA
BESREMI	3	PA

Drug Name	Drug Tier	Requirements / Limits
<i>hydroxyurea</i>	1	
MATULANE	2	PA
AROMATASE INHIBITORS		
<i>anastrozole</i>	1	AL
<i>exemestane</i>	1	AL
<i>letrozole</i>	1	
CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS		
IBRANCE	2	PA, QL
KISQALI (200 MG DOSE)	3	PA, QL
KISQALI (400 MG DOSE)	3	PA, QL
KISQALI (600 MG DOSE)	3	PA, QL
VERZENIO	3	PA
ESTROGENS-ANTINEOPLASTIC		
EMCYT	2	PA
FOLIC ACID ANTAGONISTS RESCUE AGENTS		
<i>leucovorin calcium (5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab)</i>	1	
GONADOTROPIN RELEASING HORMONE (GNRH) ANTAGONISTS		
ORGOVYX	3	PA
IMIDAZOTETRAZINES		
<i>temozolomide</i>	1	PA
ISOCITRATE DEHYDROGENASE 1 & 2 (IDH1 & IDH2) INHIBITORS		
VORANIGO	3	PA
ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS		
REZLIDHIA	3	PA, QL
TIBSOVO	3	PA
ISOCITRATE DEHYDROGENASE-2 (IDH2) INHIBITORS		
IDHIFA	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
JANUS ASSOCIATED KINASE (JAK) INHIBITORS		
INREBIC	3	PA, QL
JAKAFI	3	PA, QL
OJJAARA	3	PA, QL
VONJO	3	PA, QL
LHRH ANALOGS		
<i>leuprolide acetate</i>	1	PA
NITROGEN MUSTARDS AND RELATED ANALOGUES		
<i>cyclophosphamide (25 mg cap, 50 mg cap)</i>	1	
LEUKERAN	2	
NITROSOUREAS		
GLEOSTINE	3	
ORNITHINE DECARBOXYLASE (ODC) INHIBITORS		
IWILFIN	3	PA
PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS		
COPIKTRA	3	PA, QL
ITOVEBI	3	PA, QL
PIQRAY (200 MG DAILY DOSE)	3	PA
PIQRAY (250 MG DAILY DOSE)	3	PA
PIQRAY (300 MG DAILY DOSE)	3	PA
ZYDELIG	3	PA, QL
POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS		
LYNPARZA	3	PA, QL
RUBRACA	3	PA, QL
TALZENNA	3	PA, QL
ZEJULA (100 MG TAB, 200 MG TAB, 300 MG TAB)	3	PA, QL
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	

Drug Name	Drug Tier	Requirements / Limits
RETINOIDS		
<i>tretinoin 10 mg cap</i>	1	
SELECTIVE ESTROGEN RECEPTOR DEGRADERS		
ORSERDU	3	PA, QL
SELECTIVE RETINOID X RECEPTOR AGONISTS		
<i>bexarotene 75 mg cap</i>	1	PA
TOPOISOMERASE I INHIBITORS		
HYCAMTIN (0.25 MG CAP, 1 MG CAP)	3	PA
URINARY TRACT PROTECTIVE AGENTS		
<i>mesna 400 mg tab</i>	1	
VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS		
FRUZAQLA	3	PA, QL
INLYTA	3	PA, QL
LENVIMA (10 MG DAILY DOSE)	3	PA, QL
LENVIMA (12 MG DAILY DOSE)	3	PA, QL
LENVIMA (14 MG DAILY DOSE)	3	PA, QL
LENVIMA (18 MG DAILY DOSE)	3	PA, QL
LENVIMA (20 MG DAILY DOSE)	3	PA, QL
LENVIMA (24 MG DAILY DOSE)	3	PA, QL
LENVIMA (4 MG DAILY DOSE)	3	PA, QL
LENVIMA (8 MG DAILY DOSE)	3	PA, QL
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ADENOSINE RECEPTOR ANTAGONIST		
NOURIANZ	3	QL
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>trihexyphenidyl hcl (2 mg tab, 5 mg tab)</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine hcl (50 mg/5ml solution, 100 mg cap, 100 mg tab)</i>	1	
<i>bromocriptine mesylate</i>	1	
INBRIJA	3	QL
OSMOLEX ER 129 MG TAB ER 24H	3	QL
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline mesylate</i>	1	QL
<i>selegiline hcl</i>	1	
XADAGO	3	QL
ZELAPAR	3	
CENTRAL/PERIPHERAL COMT INHIBITORS		
<i>tolcapone</i>	1	QL
DECARBOXYLASE INHIBITORS		
<i>carbidopa</i>	1	
LEVODOPA COMBINATIONS		
<i>carbidopa-levodopa (10-100 mg tab, 25-100 mg tab, 25-250 mg tab)</i>	1	
<i>carbidopa-levodopa er</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
CREXONT	3	
DHIVY	3	
RYTARY	3	
NONERGOLINE DOPAMINE RECEPTOR AGONISTS		
NEUPRO	3	
<i>pramipexole dihydrochloride</i>	1	
<i>pramipexole dihydrochloride er</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>ropinirole hcl</i>	1	
<i>ropinirole hcl er</i>	1	QL
PERIPHERAL COMT INHIBITORS		
<i>entacapone</i>	1	
ONGENTYS	3	QL
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>lithium</i>	1	AL
<i>lithium carbonate</i>	1	AL
<i>lithium carbonate er (300 mg tab er, 450 mg tab er)</i>	1	AL
LITHOBID	3	AL
ANTIPSYCHOTICS - MISC.		
EQUETRO	3	AL
<i>lurasidone hcl</i>	1	QL
NUPLAZID	3	QL, AL
VRAYLAR (1.5 MG CAP, 3 MG CAP, 4.5 MG CAP, 6 MG CAP)	3	ST, QL, AL
<i>ziprasidone hcl</i>	1	QL, AL
BENZISOXAZOLES		
<i>paliperidone er</i>	1	QL, AL
<i>risperidone (0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab, 3 mg tab)</i>	1	AL
<i>risperidone (0.5 mg tab disp, 1 mg tab disp, 1 mg/ml solution, 2 mg tab disp, 3 mg tab disp, 4 mg tab, 4 mg tab disp)</i>	1	QL, AL
BUTYROPHENONES		
<i>haloperidol</i>	1	AL
<i>haloperidol lactate 2 mg/ml conc</i>	1	AL

Drug Name	Drug Tier	Requirements / Limits
DIBENZO-OXEPINO PYRROLES		
<i>asenapine maleate</i>	1	QL, AL
DIBENZODIAZEPINES		
<i>clozapine (25 mg tab, 25 mg tab disp, 50 mg tab, 100 mg tab, 100 mg tab disp, 150 mg tab disp, 200 mg tab, 200 mg tab disp)</i>	1	QL, AL
DIBENZOTHIAZEPINES		
<i>quetiapine fumarate (25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab, 300 mg tab, 400 mg tab)</i>	1	AL
<i>quetiapine fumarate er</i>	1	QL, AL
DIBENZOXAZEPINES		
<i>loxapine succinate</i>	1	AL
PHENOTHIAZINES		
<i>chlorpromazine hcl (10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab)</i>	1	AL
<i>compro</i>	1	AL
<i>fluphenazine hcl (1 mg tab, 2.5 mg tab, 5 mg tab, 10 mg tab)</i>	1	AL
<i>perphenazine</i>	1	AL
<i>prochlorperazine</i>	1	AL
<i>prochlorperazine maleate</i>	1	AL
<i>thioridazine hcl</i>	1	AL
<i>trifluoperazine hcl</i>	1	AL
QUINOLINONE DERIVATIVES		
<i>aripiprazole (1 mg/ml solution, 2 mg tab, 10 mg tab disp, 15 mg tab disp)</i>	1	QL, AL
<i>aripiprazole (5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)</i>	1	AL
REXULTI	3	ST, QL, AL
THIENBENZODIAZEPINES		
<i>olanzapine (2.5 mg tab, 5 mg tab, 7.5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab)</i>	1	AL

Drug Name	Drug Tier	Requirements / Limits
<i>olanzapine (5 mg tab disp, 10 mg tab disp, 15 mg tab disp, 20 mg tab disp)</i>	1	QL, AL
THIOXANTHENES		
<i>thiothixene</i>	1	AL
ANTIVIRALS		
ANTIRETROVIRAL COMBINATIONS		
<i>abacavir sulfate-lamivudine</i>	1	
BIKTARVY	3	
CIMDUO	3	
DELSTRIGO	3	
DESCOVY	3	
DOVATO	3	
<i>efavirenz-emtricitab-tenofo df</i>	1	
<i>efavirenz-lamivudine-tenofovir 600-300-300 mg tab</i>	1	
<i>emtricitab-rilpivir-tenofov df</i>	1	
<i>emtricitabine-tenofovir df (100-150 mg tab, 133-200 mg tab, 167-250 mg tab)</i>	1	
<i>emtricitabine-tenofovir df 200-300 mg tab</i>	0	
EVOTAZ	2	
GENVOYA	3	
JULUCA	2	
<i>lamivudine-zidovudine</i>	1	
<i>lopinavir-ritonavir (100-25 mg tab, 200-50 mg tab, 400-100 mg/5ml solution)</i>	1	
ODEFSEY	2	
PREZCOBIX 675-150 MG TAB	2	
PREZCOBIX 800-150 MG TAB	2	
STRIBILD	2	

Drug Name	Drug Tier	Requirements / Limits
SYMTUZA	3	
TRIUMEQ	3	
TRIUMEQ PD	3	AL
ANTIRETROVIRALS - CAPSID INHIBITORS		
SUNLENCA (4 X 300 MG TAB THPK, 5 X 300 MG TAB THPK)	3	
SUNLENCA 300 MG TAB	3	
YEZTUGO 300 MG TAB	3	
ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)		
<i>maraviroc</i>	1	
SELZENTRY 20 MG/ML SOLUTION	3	
ANTIRETROVIRALS - FUSION INHIBITORS		
FUZEON	3	
ANTIRETROVIRALS - GP120-DIRECTED ATTACHMENT INHIBITOR		
RUKOBIA	3	
ANTIRETROVIRALS - INTEGRASE INHIBITORS		
ISENTRESS	2	
ISENTRESS HD	2	
TIVICAY 50 MG TAB	2	
TIVICAY PD	2	
VOCABRIA	3	
ANTIRETROVIRALS - PROTEASE INHIBITORS		
APTIVUS	3	
<i>atazanavir sulfate</i>	1	
<i>darunavir</i>	1	
<i>fosamprenavir calcium</i>	1	
NORVIR 100 MG PACKET	3	
PREZISTA (75 MG TAB, 150 MG TAB)	2	

Drug Name	Drug Tier	Requirements / Limits
PREZISTA 100 MG/ML SUSPENSION	2	
REYATAZ 50 MG PACKET	2	
<i>ritonavir</i>	1	
VIRACEPT	3	
ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES		
EDURANT	3	
EDURANT PED	3	QL, AL
<i>efavirenz 600 mg tab</i>	1	
<i>etravirine</i>	1	
INTELENCE 25 MG TAB	3	
<i>nevirapine 200 mg tab</i>	1	
<i>nevirapine er 400 mg tab er 24h</i>	1	
PIFELTRO	3	
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES		
<i>abacavir sulfate (20 mg/ml solution, 300 mg tab)</i>	1	
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES		
<i>emtricitabine</i>	1	
EMTRIVA 10 MG/ML SOLUTION	3	
<i>lamivudine (10 mg/ml solution, 300 mg/30ml solution)</i>	1	
<i>lamivudine (150 mg tab, 300 mg tab)</i>	1	
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES		
<i>zidovudine (50 mg/5ml syrup, 100 mg cap, 300 mg tab)</i>	1	
ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES		
<i>tenofovir disoproxil fumarate</i>	1	
VIREAD (40 MG/GM POWDER, 150 MG TAB, 200 MG TAB, 250 MG TAB)	2	
ANTIRETROVIRALS ADJUVANTS		
TYBOST	3	

Drug Name	Drug Tier	Requirements / Limits
ANTIVIRAL COMBINATIONS		
PAXLOVID	3	
PAXLOVID (150/100)	3	
PAXLOVID (300/100)	3	
CMV AGENTS		
LIVTENCITY	3	QL, PR (infectious Disease Spec.)
PREVYMIS (20 MG PACKET, 120 MG PACKET)	3	QL, AL
PREVYMIS (240 MG TAB, 480 MG TAB)	3	QL
<i>valganciclovir hcl 450 mg tab</i>	1	
<i>valganciclovir hcl 50 mg/ml recon soln</i>	1	
HEPATITIS B AGENTS		
<i>adefovir dipivoxil</i>	1	
BARACLUDE 0.05 MG/ML SOLUTION	3	
<i>entecavir</i>	1	
<i>lamivudine 100 mg tab</i>	1	
VEMLIDY	2	
HEPATITIS C AGENT - COMBINATIONS		
EPCLUSA	2	PA, QL
HARVONI (33.75-150 MG PACKET, 45-200 MG PACKET)	2	PA, QL
HARVONI (45-200 MG TAB, 90-400 MG TAB)	2	PA, QL
MAVYRET 100-40 MG TAB	2	PA, QL
MAVYRET 50-20 MG PACKET	2	PA, QL
SOFOSBUVIR-VELPATASVIR	2	PA, QL
VOSEVI	2	PA, QL
HEPATITIS C AGENTS		
PEGASYS 180 MCG/0.5ML SOLN PRSYR	3	QL
PEGASYS 180 MCG/ML SOLUTION	2	QL

Drug Name	Drug Tier	Requirements / Limits
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	
SITAVIG	3	
<i>valacyclovir hcl</i>	1	
HERPES AGENTS - THYMIDINE ANALOGUES		
<i>famciclovir</i>	1	
MISC. ANTIVIRALS		
TEMBEXA (10 MG/ML SUSPENSION, 100 MG TAB)	3	
TPOXX 200 MG CAP	3	
NEURAMINIDASE INHIBITORS		
<i>oseltamivir phosphate (6 mg/ml recon susp, 30 mg cap, 45 mg cap, 75 mg cap)</i>	1	QL
RELENZA DISKHALER	3	QL
PA ENDONUCLEASE INHIBITORS		
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol</i>	1	
<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	

Drug Name	Drug Tier	Requirements / Limits
<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	QL
BETA BLOCKERS NON-SELECTIVE		
HEMANGEOL	3	
<i>nadolol</i>	1	
<i>pindolol</i>	1	
<i>propranolol hcl (10 mg tab, 20 mg tab, 40 mg tab, 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	
<i>timolol maleate (5 mg tab, 10 mg tab, 20 mg tab)</i>	1	
CALCIUM CHANNEL BLOCKERS		
<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	
<i>diltiazem hcl er beads</i>	1	
<i>diltiazem hcl er coated beads</i>	1	
<i>felodipine er</i>	1	
<i>isradipine</i>	1	
KATERZIA	3	AL
<i>matzim la</i>	1	
<i>nicardipine hcl (20 mg cap, 30 mg cap)</i>	1	
<i>nifedipine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>nifedipine er</i>	1	
<i>nifedipine er osmotic release</i>	1	
<i>nimodipine 30 mg cap</i>	1	
<i>nisoldipine er (8.5 mg tab er 24h, 17 mg tab er 24h, 34 mg tab er 24h)</i>	1	
NORLIQVA	3	QL, AL
NYMALIZE	3	
<i>taztia xt</i>	1	
<i>tiadylt er</i>	1	
<i>verapamil hcl (40 mg tab, 80 mg tab, 120 mg tab)</i>	1	
<i>verapamil hcl er (120 mg cap er 24h, 120 mg tab er, 180 mg cap er 24h, 180 mg tab er, 240 mg cap er 24h, 240 mg tab er)</i>	1	
CARDIOTONICS		
CARDIAC GLYCOSIDES		
<i>digox 250 mcg tab</i>	1	
<i>digoxin (0.05 mg/ml solution, 62.5 mcg tab, 125 mcg tab, 250 mcg tab)</i>	1	
LANOXIN (62.5 MCG TAB, 125 MCG TAB, 250 MCG TAB)	3	
CARDIOVASCULAR AGENTS - MISC.		
CALCIUM CHANNEL BLOCKER & HMG COA REDUCTASE INHIBIT COMB		
<i>amlodipine-atorvastatin</i>	1	
CARDIAC MYOSIN INHIBITORS		
CAMZYOS	3	QL
NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB		
ENTRESTO (6-6 MG CAP SPRINK, 15-16 MG CAP SPRINK)	2	AL
<i>sacubitril-valsartan</i>	1	
NITRATE & VASODILATOR COMBINATIONS		
<i>isosorb dinitrate-hydralazine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PROSTAGLANDIN - IMPOTENCE AGENTS		
CAVERJECT	3	QL
CAVERJECT IMPULSE	3	QL
EDEX	3	QL
PROSTAGLANDIN VASODILATORS		
ORENITRAM	2	PA, QL
ORENITRAM MONTH 1	2	PA, QL
ORENITRAM MONTH 2	2	PA, QL
ORENITRAM MONTH 3	2	PA, QL
TYVASO DPI INSTITUTIONAL KIT	3	PA, QL
TYVASO DPI MAINTENANCE KIT (16 MCG POWDER, 32 MCG POWDER, 48 MCG POWDER, 64 MCG POWDER)	3	PA, QL
TYVASO DPI TITRATION KIT 16 & 32 & 48 MCG POWDER	3	PA, QL
VENTAVIS	2	PA
PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
ADEMPAS	3	PA, QL
PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR		
WINREVAIR	3	PA
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan</i>	1	PA, QL
<i>bosentan (62.5 mg tab, 125 mg tab)</i>	1	PA, QL
<i>bosentan 32 mg tab sol</i>	1	PA, QL
OPSUMIT	2	PA, QL
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
<i>alyq</i>	1	PA, QL
LIQREV	3	PR (Pulmonology or Cardiology)
<i>sildenafil citrate 10 mg/ml recon susp</i>	1	AL, PR (Pulmonology or Cardiology)

Drug Name	Drug Tier	Requirements / Limits
<i>sildenafil citrate 20 mg tab</i>	1	QL, PR (Pulmonology or Cardiology)
<i>tadalafil (pah)</i>	1	PA, QL
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI (200 MCG TAB, 400 MCG TAB, 600 MCG TAB, 800 MCG TAB, 1000 MCG TAB, 1200 MCG TAB, 1400 MCG TAB, 1600 MCG TAB)	3	PA, QL
UPTRAVI 200 & 800 MCG TAB THPK	3	PA, QL
SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS		
<i>avanafil</i>	1	QL
<i>sildenafil citrate (25 mg tab, 50 mg tab, 100 mg tab)</i>	1	QL
<i>tadalafil</i>	1	QL
<i>vardenafil hcl</i>	1	QL
SINUS NODE INHIBITORS		
CORLANOR 5 MG/5ML SOLUTION	3	AL
<i>ivabradine hcl</i>	1	QL
TRANSTHYRETIN STABILIZERS		
VYNDAMAX	3	PA
VYNDAQEL	3	PA
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO	3	QL
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil (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/5ml recon susp, 500 mg cap, 750 mg cap)</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
<i>cefprozil (125 mg/5ml recon susp, 250 mg tab, 250 mg/5ml recon susp, 500 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<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, 400 mg cap)</i>	1	
<i>cefpodoxime proxetil (100 mg tab, 200 mg tab)</i>	1	
CONTRACEPTIVES		
BIPHASIC CONTRACEPTIVES - ORAL		
<i>azurette</i>	0	
<i>desogestrel-ethinyl estradiol 0.15-0.02/0.01 mg (21/5) tab</i>	0	
<i>kariva</i>	0	
LO LOESTRIN FE	0	
<i>pimtrea</i>	0	
<i>simliya</i>	0	
<i>viorele</i>	0	
<i>volnea</i>	0	
COMBINATION CONTRACEPTIVES - ORAL		
<i>afirmelle</i>	0	
<i>altavera</i>	0	
<i>alyacen 1/35</i>	0	
<i>apri</i>	0	
<i>aubra</i>	0	
<i>aubra eq</i>	0	
<i>aurovela 1.5/30</i>	0	
<i>aurovela 1/20</i>	0	
<i>aurovela 24 fe</i>	0	
<i>aurovela fe 1.5/30</i>	0	

Drug Name	Drug Tier	Requirements / Limits
<i>aurovela fe 1/20</i>	0	
AVERI	0	
<i>aviane</i>	0	
<i>ayuna</i>	0	
<i>balziva</i>	0	
<i>blisovi 24 fe</i>	0	
<i>blisovi fe 1.5/30</i>	0	
<i>blisovi fe 1/20</i>	0	
<i>briellyn</i>	0	
<i>charlotte 24 fe</i>	0	
<i>chateal</i>	0	
<i>chateal eq</i>	0	
<i>cryselle-28</i>	0	
<i>cyclafem 1/35</i>	0	
<i>cyred</i>	0	
<i>cyred eq</i>	0	
<i>dasetta 1/35</i>	0	
<i>delyla</i>	0	
<i>desogestrel-ethinyl estradiol 0.15-30 mg-mcg tab</i>	0	
<i>drospiren-eth estrad-levomefol</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0	
<i>elinest</i>	0	
<i>emoquette</i>	0	
<i>enskyce</i>	0	
<i>estarylla</i>	0	
<i>ethynodiol diac-eth estradiol</i>	0	
<i>falmina</i>	0	
<i>feirza 1.5/30</i>	0	

Drug Name	Drug Tier	Requirements / Limits
<i>feirza 1/20</i>	0	
FEMLYV	3	
<i>finzala</i>	0	
<i>galbriela</i>	0	
<i>gemmily</i>	0	
<i>hailey 1.5/30</i>	0	
<i>hailey 24 fe</i>	0	
<i>hailey fe 1.5/30</i>	0	
<i>hailey fe 1/20</i>	0	
<i>isibloom</i>	0	
<i>jasmiel</i>	0	
<i>joyeaux</i>	0	
<i>juleber</i>	0	
<i>junel 1.5/30</i>	0	
<i>junel 1/20</i>	0	
<i>junel fe 1.5/30</i>	0	
<i>junel fe 1/20</i>	0	
<i>junel fe 24</i>	0	
<i>kaitlib fe</i>	0	
<i>kalliga</i>	0	
<i>kelnor 1/35</i>	0	
<i>kelnor 1/50</i>	0	
<i>kurvelo</i>	0	
<i>larin 1.5/30</i>	0	
<i>larin 1/20</i>	0	
<i>larin 24 fe</i>	0	
<i>larin fe 1.5/30</i>	0	
<i>larin fe 1/20</i>	0	

Drug Name	Drug Tier	Requirements / Limits
<i>layolis fe</i>	0	
<i>lessina</i>	0	
<i>levonorgest-eth estradiol-iron</i>	0	
<i>levonorgestrel-ethinyl estrad (0.1-20 tab, 0.15-30 tab)</i>	0	
<i>levora 0.15/30 (28)</i>	0	
<i>lo-zumandimine</i>	0	
<i>loestrin 1.5/30 (21)</i>	0	
<i>loestrin 1/20 (21)</i>	0	
<i>loestrin fe 1.5/30</i>	0	
<i>loestrin fe 1/20</i>	0	
<i>loryna</i>	0	
<i>low-ogestrel</i>	0	
<i>luizza 1.5/30</i>	0	
<i>luizza 1/20</i>	0	
<i>lutra</i>	0	
<i>marlissa</i>	0	
<i>merzee</i>	0	
<i>mibelas 24 fe</i>	0	
<i>microgestin 1.5/30</i>	0	
<i>microgestin 1/20</i>	0	
<i>microgestin 24 fe</i>	0	
<i>microgestin fe 1.5/30</i>	0	
<i>microgestin fe 1/20</i>	0	
<i>mili</i>	0	
<i>minzoya</i>	0	
<i>mono-linyah</i>	0	
<i>necon 0.5/35 (28)</i>	0	
NEXTSTELLIS	0	

Drug Name	Drug Tier	Requirements / Limits
<i>nikki</i>	0	
<i>norethin ace-eth estrad-fe</i>	0	
<i>norethin-eth estradiol-fe</i>	0	
<i>norethindrone acet-ethinyl est</i>	0	
<i>norgestimate-eth estradiol</i>	0	
<i>nortrel 0.5/35 (28)</i>	0	
<i>nortrel 1/35 (21)</i>	0	
<i>nortrel 1/35 (28)</i>	0	
<i>nylia 1/35</i>	0	
<i>nymyo</i>	0	
<i>ocella</i>	0	
<i>philith</i>	0	
<i>portia-28</i>	0	
<i>reclipsen</i>	0	
<i>sprintec 28</i>	0	
<i>sronyx</i>	0	
<i>syeda</i>	0	
<i>tarina 24 fe</i>	0	
<i>tarina fe 1/20</i>	0	
<i>tarina fe 1/20 eq</i>	0	
<i>taysofy</i>	0	
<i>turqoz</i>	0	
TYBLUME	0	
<i>tydemy</i>	0	
<i>valtya 1/50</i>	0	
<i>vestura</i>	0	
<i>vienva</i>	0	
<i>vyfemla</i>	0	

Drug Name	Drug Tier	Requirements / Limits
<i>vylibra</i>	0	
<i>wera</i>	0	
<i>wymzya fe</i>	0	
<i>xelria fe</i>	0	
<i>zovia 1/35 (28)</i>	0	
<i>zovia 1/35e (28)</i>	0	
<i>zumandimine</i>	0	
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<i>norelgestromin-eth estradiol</i>	0	
TWIRLA	0	
<i>xulane</i>	0	
<i>zafemy</i>	0	
COMBINATION CONTRACEPTIVES - VAGINAL		
ANNOVERA	0	QL
<i>eluryng</i>	0	QL
<i>enilloring</i>	0	QL
<i>etonogestrel-ethinyl estradiol</i>	0	QL
<i>haloette</i>	0	QL
CONTINUOUS CONTRACEPTIVES - ORAL		
<i>amethyst</i>	0	
<i>dolishale</i>	0	
<i>levonorgestrel-ethinyl estrad 90-20 mcg tab</i>	0	
EMERGENCY CONTRACEPTIVES		
ELLA	0	QL
EXTENDED-CYCLE CONTRACEPTIVES - ORAL		
<i>ashlyna</i>	0	
<i>camrese</i>	0	

Drug Name	Drug Tier	Requirements / Limits
<i>camrese lo</i>	0	
<i>daysee</i>	0	
<i>iclevia</i>	0	
<i>introvale</i>	0	
<i>jaimiess</i>	0	
<i>jolessa</i>	0	
<i>levonorgest-eth est & eth est</i>	0	
<i>levonorgest-eth estrad 91-day</i>	0	
<i>lojaimiess</i>	0	
<i>rivelsa</i>	0	
<i>rosyrah</i>	0	
<i>setlakin</i>	0	
<i>simpesse</i>	0	
FOUR PHASE CONTRACEPTIVES - ORAL		
NATAZIA	0	
PROGESTIN CONTRACEPTIVES - ORAL		
<i>camila</i>	0	
<i>deblitane</i>	0	
<i>emzahh</i>	0	
<i>errin</i>	0	
<i>heather</i>	0	
<i>incassia</i>	0	
<i>jencycla</i>	0	
<i>lyleq</i>	0	
<i>lyza</i>	0	
<i>meleya</i>	0	
<i>nora-be</i>	0	
<i>norethindrone</i>	0	

Drug Name	Drug Tier	Requirements / Limits
<i>norlyroc</i>	0	
<i>orquidea</i>	0	
<i>sharobel</i>	0	
SLYND	0	
TRIPHASIC CONTRACEPTIVES - ORAL		
<i>alyacen 7/7/7</i>	0	
<i>aranelle</i>	0	
<i>cyclafem 7/7/7</i>	0	
<i>dasetta 7/7/7</i>	0	
<i>enpresse-28</i>	0	
<i>leena</i>	0	
<i>levonest</i>	0	
<i>levonorg-eth estrad triphasic</i>	0	
<i>norethindron-ethinyl estrad-fe</i>	0	
<i>norgestim-eth estrad triphasic</i>	0	
<i>nortrel 7/7/7</i>	0	
<i>nylia 7/7/7</i>	0	
<i>tilia fe</i>	0	
<i>tri-estarylla</i>	0	
<i>tri-legest fe</i>	0	
<i>tri-linyah</i>	0	
<i>tri-lo-estarylla</i>	0	
<i>tri-lo-marzia</i>	0	
<i>tri-lo-mili</i>	0	
<i>tri-lo-sprintec</i>	0	
<i>tri-mili</i>	0	
<i>tri-nymyo</i>	0	
<i>tri-previfem</i>	0	

Drug Name	Drug Tier	Requirements / Limits
<i>tri-sprintec</i>	0	
<i>tri-vylibra</i>	0	
<i>tri-vylibra lo</i>	0	
<i>trivora (28)</i>	0	
VELIVET	0	
<i>xarah fe</i>	0	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
ALKINDI SPRINKLE	3	AL
<i>budesonide 3 mg cp dr part</i>	1	
<i>budesonide er</i>	1	
<i>dexamethasone (0.5 mg tab, 0.5 mg/5ml elixir, 0.75 mg tab, 1 mg tab, 1.5 mg tab, 2 mg tab, 4 mg tab, 6 mg tab)</i>	1	
EOHILIA	3	PA, QL
<i>hydrocortisone (5 mg tab, 10 mg tab, 20 mg tab)</i>	1	
<i>hydrocortisone sod suc (pf)</i>	1	
MEDROL 2 MG TAB	3	
<i>methylprednisolone</i>	1	
<i>prednisolone (5 mg tab, 15 mg/5ml solution)</i>	1	
<i>prednisolone sodium phosphate (6.7 (5 base) mg/5ml solution, 10 mg/5ml solution, 15 mg/5ml solution, 20 mg/5ml solution, 25 mg/5ml solution)</i>	1	
<i>prednisone (1 mg tab, 2.5 mg tab, 5 mg (21) tab thpk, 5 mg (48) tab thpk, 5 mg tab, 10 mg (21) tab thpk, 10 mg (48) tab thpk, 10 mg tab, 20 mg tab, 50 mg tab)</i>	1	
RAYOS	3	
SOLU-CORTEF 250 MG RECON SOLN	2	
TARPEYO	3	PA
MINERALOCORTICIDS		
<i>fludrocortisone acetate</i>	1	

Drug Name	Drug Tier	Requirements / Limits
COUGH/COLD/ALLERGY		
ANTITUSSIVE - NONNARCOTIC		
<i>benzonatate</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	
IODINE EXPECTORANTS		
<i>potassium iodide (expectorant)</i>	1	
MISC. RESPIRATORY INHALANTS		
HYPERSAL 3.5 % NEBU SOLN	3	
<i>nebusal 3 % nebu soln</i>	1	
<i>pulmosal</i>	1	
<i>sodium chloride (0.9 % nebu soln, 3 % nebu soln, 7 % nebu soln, 10 % nebu soln)</i>	1	
MUCOLYTICS		
<i>acetylcysteine (10 % solution, 20 % solution)</i>	1	
NON-NARC ANTITUSSIVE-ANTIHISTAMINE		
<i>promethazine-dm</i>	1	
OPIOID ANTITUSSIVE-ANTIHISTAMINE		
<i>promethazine-codeine</i>	1	AL
DERMATOLOGICALS		
ACNE ANTIBIOTICS		
AMZEEQ	3	
<i>clindacin</i>	1	
<i>clindacin etz 1 % swab</i>	1	
<i>clindacin-p</i>	1	
<i>clindamycin phos (once-daily)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phos (twice-daily)</i>	1	
<i>clindamycin phosphate (1 % foam, 1 % lotion, 1 % solution, 1 % swab)</i>	1	
<i>dapsone (5 % gel, 7.5 % gel)</i>	1	
<i>erythromycin (2 % gel, 2 % solution)</i>	1	
<i>sulfacetamide sodium (acne)</i>	1	
ACNE COMBINATIONS		
<i>adapalene-benzoyl peroxide (0.1-2.5 % gel, 0.3-2.5 % gel)</i>	1	QL
<i>avar cleanser</i>	1	
<i>avar-e emollient</i>	1	
<i>avar-e green</i>	1	
<i>benzoyl perox-hydrocortisone</i>	1	
<i>benzoyl peroxide-erythromycin</i>	1	
<i>bp 10-1</i>	1	
<i>clindamycin phos-benzoyl perox</i>	1	
<i>clindamycin-tretinoin</i>	1	QL
<i>neuac 1.2-5 % gel</i>	1	
PLEXION CLEANSING CLOTH	3	
<i>sss 10-5 10-5 % cream</i>	1	
<i>sulfacetamide sod-sulfur wash (9-4 % liquid, 9-4.5 % liquid)</i>	1	
<i>sulfacetamide sodium-sulfur (8-4 % suspension, 9-4 % liquid, 9-4.5 % liquid, 9.8-4.8 % cream, 9.8-4.8 % liquid, 9.8-4.8 % lotion, 10-2 % cream, 10-2 % liquid, 10-5 % cream, 10-5 % liquid, 10-5 % lotion, 10-5 % suspension)</i>	1	
SULFACETAMIDE SODIUM-SULFUR 9.8-4.8 % PAD	3	
<i>sulfacleanse 8/4</i>	1	
<i>sulfamez wash</i>	1	
<i>vanoxide-hc</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ACNE PRODUCTS		
ABSORICA LD	3	
<i>accutane</i>	1	
<i>adapalene (0.1 % cream, 0.1 % gel, 0.3 % gel)</i>	1	
AKLIEF	3	
ALTRENO	3	
<i>amnesteam</i>	1	
AZELEX	3	
BENZEPRO (5.2 % FOAM, 5.3 % FOAM, 9.7 % FOAM)	3	
<i>benzebro foaming cloths</i>	1	
<i>claravis</i>	1	
FABIOR	3	
<i>isotretinoin</i>	1	
RETIN-A MICRO PUMP 0.06 % GEL	3	
TAZAROTENE 0.1 % FOAM	3	
<i>tretinoin (0.01 % gel, 0.025 % cream, 0.025 % gel, 0.05 % cream, 0.05 % gel, 0.1 % cream)</i>	1	
<i>tretinoin microsphere</i>	1	
<i>tretinoin microsphere pump 0.08 % gel</i>	1	
WINLEVI	3	
<i>zenatane</i>	1	
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN	3	QL
ALOPECIA AGENTS - JANUS KINUS (JAK) INHIBITORS		
LITFULO	3	PA
ANTI-INFLAMMATORY AGENTS - TOPICAL		
<i>diclofenac sodium 1.5 % solution</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
ANTIBIOTIC STEROID COMBINATIONS - TOPICAL		
NEO-SYNALAR 0.5-0.025 % CREAM	3	
ANTIBIOTICS - TOPICAL		
<i>gentamicin sulfate (0.1 % cream, 0.1 % ointment)</i>	1	
<i>mupirocin</i>	1	
ANTIFUNGALS - TOPICAL		
<i>ciclodan</i>	1	
<i>ciclopirox (0.77 % gel, 1 % shampoo, 8 % solution)</i>	1	
<i>ciclopirox olamine (0.77 % cream, 0.77 % suspension)</i>	1	
<i>klayesta</i>	1	
<i>naftifine hcl (2 % cream, 2 % gel)</i>	1	
<i>nyamyc</i>	1	
<i>nystatin (100000 unit/gm cream, 100000 unit/gm ointment, 100000 unit/gm powder)</i>	1	
<i>nystop</i>	1	
ANTIFUNGALS - TOPICAL COMBINATIONS		
<i>clotrimazole-betamethasone (1-0.05 % cream, 1-0.05 % lotion)</i>	1	
<i>corti-sav</i>	1	
<i>hydrocortisone-iodoquinol</i>	1	
<i>iodoquimez-hc</i>	1	
<i>iodoquinol-hc-aloe polysacch</i>	1	
<i>iodoquinol-hydrocortisone-aloe</i>	1	
<i>nystatin-triamcinolone</i>	1	
ANTINEOPLASTIC ALKYLATING AGENTS - TOPICAL		
VALCHLOR	2	
ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL		
<i>fluorouracil (5 % cream, 5 % solution)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL NSAID'S		
<i>diclofenac sodium 3 % gel</i>	1	QL
ANTINEOPLASTIC RETINOIDS - TOPICAL		
PANRETIN	3	
ANTIPRURITICS - TOPICAL		
<i>doxepin hcl 5 % cream</i>	1	
ANTIPSORIATICS		
<i>calcipotriene (0.005 % cream, 0.005 % ointment, 0.005 % solution)</i>	1	QL
<i>calcitrene</i>	1	QL
<i>tazarotene (0.05 % cream, 0.05 % gel, 0.1 % cream, 0.1 % gel)</i>	1	
VTAMA	3	PA, QL
ZITHRANOL	3	
ANTIPSORIATICS - SYSTEMIC		
<i>acitretin</i>	1	QL
BIMZELX (160 MG/ML SOLN A-INJ, 160 MG/ML SOLN PRSYR)	3	PA, QL
BIMZELX (320 MG/2ML SOLN A-INJ, 320 MG/2ML SOLN PRSYR)	3	PA, QL
COSENTYX (300 MG DOSE)	2	PA, QL
COSENTYX (75 MG/0.5ML SOLN PRSYR, 150 MG/ML SOLN PRSYR)	2	PA, QL
COSENTYX SENSOREADY (300 MG)	2	PA, QL
COSENTYX SENSOREADY PEN	2	PA, QL
COSENTYX UNOREADY	2	PA, QL
PYZCHIVA (45 MG/0.5ML SOLN PRSYR, 90 MG/ML SOLN PRSYR)	2	PA, QL
PYZCHIVA 45 MG/0.5ML SOLUTION	2	PA, QL
SELARSDI (45 MG/0.5ML SOLN PRSYR, 90 MG/ML SOLN PRSYR)	2	PA, QL

Drug Name	Drug Tier	Requirements / Limits
SILIQ	3	PA
SKYRIZI 150 MG/ML SOLN PRSYR	2	PA, QL
SKYRIZI PEN	2	PA, QL
SOTYKTU	3	PA, QL
SPEVIGO 150 MG/ML SOLN PRSYR	3	PA
SPEVIGO 300 MG/2ML SOLN PRSYR	3	PA, QL
TALTZ (20 MG/0.25ML SOLN PRSYR, 40 MG/0.5ML SOLN PRSYR, 80 MG/ML SOLN PRSYR)	2	PA, QL
TALTZ 80 MG/ML SOLN A-INJ	2	PA, QL
TREMFYA 100 MG/ML SOLN PRSYR	3	PA, QL
TREMFYA ONE-PRESS	3	PA, QL
TREMFYA PEN 100 MG/ML SOLN A-INJ	3	PA, QL
ANTISEBORRHEIC PRODUCTS		
OVACE PLUS (9.8 % LOTION, 10 % CREAM)	3	
<i>plexion ns</i>	1	
<i>selenium sulfide</i>	1	
<i>sodium sulfacetamide</i>	1	
<i>sodium sulfacetamide wash</i>	1	
<i>sulfacetamide sodium (10 % (cleans) gel, 10 % liquid)</i>	1	
<i>sulfacetamide sodium (cleans)</i>	1	
ANTIVIRAL TOPICAL COMBINATIONS		
XERESE	3	QL
ANTIVIRALS - TOPICAL		
<i>acyclovir (5 % cream, 5 % ointment)</i>	1	
<i>penciclovir</i>	1	
ZELSUVMI	3	PA, QL
ATOPIC DERMATITIS - JANUS KINASE (JAK) INHIBITORS		
OPZELURA	3	PA, QL, AL

Drug Name	Drug Tier	Requirements / Limits
ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES		
ADBRY 150 MG/ML SOLN PRSYR	3	PA, QL
ADBRY 300 MG/2ML SOLN A-INJ	3	PA, QL
DUPIXENT (200 MG/1.14ML SOLN A-INJ, 200 MG/1.14ML SOLN PRSYR, 300 MG/2ML SOLN A-INJ, 300 MG/2ML SOLN PRSYR)	2	PA, QL
EBGLYSS	2	PA, QL
BURN PRODUCTS		
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
SULFAMYLON 85 MG/GM CREAM	3	
CAUTERIZING AGENTS		
<i>silver nitrate 0.5 % solution</i>	1	
CORTICOSTEROIDS - TOPICAL		
ALA SCALP	3	
<i>alclometasone dipropionate</i>	1	
<i>betamethasone dipropionate (0.05 % cream, 0.05 % lotion, 0.05 % ointment)</i>	1	
<i>betamethasone dipropionate aug (0.05 % cream, 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	
BRYHALI	3	
<i>clobetasol prop emollient base</i>	1	
<i>clobetasol propionate (0.05 % cream, 0.05 % foam, 0.05 % gel, 0.05 % liquid, 0.05 % lotion, 0.05 % ointment, 0.05 % shampoo, 0.05 % solution)</i>	1	
<i>clobetasol propionate e</i>	1	
<i>clobetasol propionate emulsion</i>	1	
<i>clocortolone pivalate</i>	1	
<i>clodan 0.05 % shampoo</i>	1	

Drug Name	Drug Tier	Requirements / Limits
CORDRAN 4 MCG/SQCM TAPE	3	
<i>desonide (0.05 % cream, 0.05 % lotion, 0.05 % ointment)</i>	1	
<i>desoximetasone (0.05 % cream, 0.05 % ointment, 0.25 % cream, 0.25 % liquid, 0.25 % ointment)</i>	1	
<i>diflorasone diacetate 0.05 % ointment</i>	1	
<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, 0.1 % cream)</i>	1	
<i>fluocinonide emulsified base</i>	1	
<i>fluticasone propionate (0.005 % ointment, 0.05 % cream)</i>	1	
<i>halcinonide 0.1 % cream</i>	1	
<i>halobetasol propionate (0.05 % cream, 0.05 % ointment)</i>	1	
HALOG 0.1 % OINTMENT	3	
<i>hydrocortisone (2.5 % cream, 2.5 % lotion, 2.5 % ointment)</i>	1	
<i>hydrocortisone butyrate (0.1 % lotion, 0.1 % ointment)</i>	1	
<i>hydrocortisone valerate</i>	1	
<i>mometasone furoate (0.1 % cream, 0.1 % ointment, 0.1 % solution)</i>	1	
NUCORT	3	
PANDEL	2	
SERNIVO	3	
TEXACORT	3	
<i>tovet 0.05 % foam</i>	1	
<i>triamcinolone acetonide (0.025 % cream, 0.025 % lotion, 0.025 % ointment, 0.05 % ointment, 0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.5 % cream, 0.5 % ointment)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>triamcinolone in absorbase</i>	1	
<i>triderm 0.5 % cream</i>	1	
ULTRAVATE	3	
EMOLLIENTS		
<i>ammonium lactate 12 % lotion</i>	1	
ENZYMES - TOPICAL		
SANTYL	3	
IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL		
<i>econazole nitrate 1 % cream</i>	1	
ECOZA	3	ST, QL, AL
ERTACZO	3	ST
JUBLIA	3	ST, QL
<i>ketconazole (2 % cream, 2 % foam, 2 % shampoo)</i>	1	
<i>ketodan 2 % foam</i>	1	
<i>oxiconazole nitrate</i>	1	
OXISTAT 1 % LOTION	3	ST
IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL		
<i>imiquimod 3.75 % cream</i>	1	QL, AL
<i>imiquimod 5 % cream</i>	1	
<i>imiquimod pump</i>	1	QL, AL
ZYCLARA PUMP 2.5 % CREAM	2	QL, AL
INTERLEUKIN-31 RECEPTOR ANTAGONISTS - SYSTEMIC		
NEMLUVIO	3	PA, QL
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS		
BENSAL HP	3	
<i>keralyt 6 % shampoo</i>	1	
PODOCON-25	3	

Drug Name	Drug Tier	Requirements / Limits
<i>podofilox 0.5 % gel</i>	1	
<i>salicylic acid (6 % foam, 6 % gel, 6 % shampoo)</i>	1	
SALICYLIC ACID 3 % OINTMENT	3	
<i>salicylic acid er</i>	1	
<i>salicylic acid wart remover</i>	1	
<i>salynta</i>	1	
KERATOLYTIC/ANTIMITOTIC/VESICANT COMBINATIONS		
PYROGALLIC ACID	3	
LOCAL ANESTHETICS - TOPICAL		
ASTERO	3	
<i>glydo</i>	1	
LDO PLUS	3	
<i>lidocaine 5 % ointment</i>	1	
<i>lidocaine 5 % patch</i>	1	QL
<i>lidocaine hcl (3 % cream, 4 % solution)</i>	1	
<i>lidocaine hcl urethral/mucosal 2 % prsyr</i>	1	
<i>lidocan</i>	1	QL
<i>lidopin 3 % cream</i>	1	
<i>premium lidocaine</i>	1	
<i>tridacaine ii</i>	1	QL
<i>tridacaine iii</i>	1	QL
MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL		
HYFTOR	3	PA, QL
<i>pimecrolimus</i>	1	
<i>tacrolimus (0.03 % ointment, 0.1 % ointment)</i>	1	
MICROTUBULE INHIBITORS - TOPICAL		
KLISYRI (250 MG)	3	QL
KLISYRI (350 MG)	3	QL

Drug Name	Drug Tier	Requirements / Limits
MISC. TOPICAL		
DRYSOL	3	
QBREXZA	3	
OXABOROLE-RELATED ANTIFUNGALS - TOPICAL		
<i>tavaborole</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA	3	
ZORYVE	3	QL, AL, PR (Dermatologist)
PHOTODYNAMIC THERAPY AGENTS - TOPICAL		
AMELUZ	3	
LEVULAN KERASTICK	3	
ROSACEA AGENTS		
<i>azelaic acid</i>	1	
<i>brimonidine tartrate 0.33 % gel</i>	1	QL, PR (Dermatologist)
<i>doxycycline</i>	1	
FINACEA 15 % FOAM	3	
<i>ivermectin 1 % cream</i>	1	
<i>metronidazole (0.75 % cream, 0.75 % gel, 0.75 % lotion, 1 % gel)</i>	1	
NORITATE	3	
RHOFADE	3	QL, PR (Dermatologist)
<i>rosadan (0.75 % cream, 0.75 % gel)</i>	1	
ZILXI	3	PR (Dermatologist)
SCABICIDES & PEDICULICIDES		
CROTAN	3	
<i>malathion</i>	1	
<i>permethrin</i>	1	
PRURADIK	3	

Drug Name	Drug Tier	Requirements / Limits
SKIN CLEANSERS		
HYCLODEX	3	
HYPOCYN 0.012 % SOLUTION	3	
STEROID-LOCAL ANESTHETIC COMBINATIONS		
CORTANE-B	2	
EPIFOAM	3	
PRAMOSONE (1-1 % OINTMENT, 1-2.5 % OINTMENT)	3	
TOPICAL ANESTHETIC COMBINATIONS		
CETACAINE 2-2-14 % AEROSOL	3	
<i>lidocaine-prilocaine 2.5-2.5 % cream</i>	1	
TOPICAL SELECTIVE RETINOID X RECEPTOR AGONISTS		
<i>bexarotene 1 % gel</i>	1	
TOPICAL STEROID COMBINATIONS		
<i>calcipotriene-betameth diprop 0.005-0.064 % ointment</i>	1	
DUOBRII	3	
ENSTILAR	3	
WOUND CARE - GROWTH FACTOR AGENTS		
REGRANEX	2	
WOUND CARE COMBINATIONS		
B & C	3	
BALSAM PERU-CASTOR OIL	3	
BPCO	3	
VENELEX	3	
WOUND DRESSINGS		
FILSUVEZ	3	PA, QL
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON (24000-76000 CP DR PART, 36000-114000 CP DR PART)	2	

Drug Name	Drug Tier	Requirements / Limits
CREON (3000-9500 CP DR PART, 6000-19000 CP DR PART, 12000-38000 CP DR PART)	2	
PANCREAZE	3	
PERTZYE	3	
SUCRAID	3	PA
VIOKACE	3	
ZENPEP	3	
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide</i>	1	
<i>acetazolamide er</i>	1	
<i>dichlorphenamide</i>	1	PA, QL
<i>methazolamide</i>	1	
<i>ormalvi</i>	1	PA, QL
DIURETIC COMBINATIONS		
<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>	1	
FUROSCIX	3	QL
<i>furosemide (10 mg/ml solution, 20 mg tab, 40 mg tab, 80 mg tab)</i>	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>spironolactone 25 mg/5ml suspension</i>	1	AL

Drug Name	Drug Tier	Requirements / Limits
<i>triamterene</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone</i>	1	
DIURIL	3	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
<i>metolazone</i>	1	
THALITONE	3	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ATP-SENSITIVE POTASSIUM CHANNEL ACTIVATORS		
VYKAT XR	3	PA
BISPHOSPHONATES		
<i>alendronate sodium (10 mg tab, 35 mg tab, 70 mg tab)</i>	1	QL
<i>alendronate sodium 70 mg/75ml solution</i>	1	
BINOSTO	3	
FOSAMAX PLUS D	3	
<i>ibandronate sodium 150 mg tab</i>	1	QL
<i>risedronate sodium</i>	1	QL
CALCIMIMETIC AGENTS		
<i>cinacalcet hcl</i>	1	
CALCITONINS		
<i>calcitonin (salmon)</i>	1	
CARNITINE REPLENISHER - AGENTS		
<i>levocarnitine (1 gm/10ml solution, 330 mg tab)</i>	1	
<i>levocarnitine sf</i>	1	
CORTICOTROPIN		
ACTHAR GEL 40 UNIT/0.5ML PEN	3	

Drug Name	Drug Tier	Requirements / Limits
ACTHAR GEL 80 UNIT/ML PEN	3	
CORTROPHIN GEL	3	PA
CORTICOTROPIN-RELEASING FACTOR (CRF) RECEPTOR TYPE 1 ANTAG		
CRENESSITY (25 MG CAP, 50 MG CAP, 50 MG/ML SOLUTION, 100 MG CAP)	3	PA, QL
CORTISOL SYNTHESIS INHIBITORS		
ISTURISA (1 MG TAB, 5 MG TAB)	3	PA
DOPAMINE RECEPTOR AGONISTS		
<i>cabergoline</i>	1	
FABRY DISEASE - AGENTS		
GALAFOLD	3	PA, QL
GAA DEFICIENCY TREATMENT - AGENTS		
OPFOLDA	3	PA
GNRH/LHRH ANTAGONISTS		
ORILISSA	3	QL
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT	3	PA, QL
GROWTH HORMONES		
GENOTROPIN	3	PA
GENOTROPIN MINIQUEL	3	PA
HUMATROPE	3	PA
NGENLA	3	PA
NORDITROPIN FLEXP	3	PA
NUTROPIN AQ NUSPIN 10	3	PA
NUTROPIN AQ NUSPIN 20	3	PA
NUTROPIN AQ NUSPIN 5	3	PA
OMNITROPE (5 MG/1.5ML SOLN CART, 10 MG/1.5ML SOLN CART)	3	PA

Drug Name	Drug Tier	Requirements / Limits
OMNITROPE 5.8 MG RECON SOLN	3	PA
SAIZEN 5 MG RECON SOLN	3	PA
SEROSTIM	3	PA
SKYTROFA (3 MG CARTRIDGE, 3.6 MG CARTRIDGE, 4.3 MG CARTRIDGE, 5.2 MG CARTRIDGE, 6.3 MG CARTRIDGE, 7.6 MG CARTRIDGE, 9.1 MG CARTRIDGE, 11 MG CARTRIDGE, 13.3 MG CARTRIDGE)	3	PA, QL
SOGROYA	3	PA
ZOMACTON	3	PA
ZOMACTON (FOR ZOMA-JET 10)	3	PA
HEREDITARY OROTIC ACIDURIA TREATMENT - AGENTS		
XURIDEN	3	PA
HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS		
<i>nitisinone</i>	1	PA
NITYR	3	PA
ORFADIN 4 MG/ML SUSPENSION	3	PA
HOMOCYSTINURIA TREATMENT - AGENTS		
<i>betaine</i>	1	
HYPERAMMONEMIA TREATMENT - AGENTS		
<i>carglumic acid</i>	1	PA
HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS		
<i>calcitriol (0.25 mcg cap, 0.5 mcg cap, 1 mcg/ml solution)</i>	1	
<i>doxercalciferol (0.5 mcg cap, 1 mcg cap, 2.5 mcg cap)</i>	1	
<i>paricalcitol (1 mcg cap, 2 mcg cap, 4 mcg cap)</i>	1	
RAYALDEE	3	
HYPOPARATHYROID TREATMENT - PARATHYROID HORMONE ANALOGS		
YORVIPATH	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
HYPOPHOSPHATASIA (HPP) AGENTS		
STRENSIQ	3	PA
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX	2	PA
NATRIURETIC PEPTIDES		
VOXZOGO	3	PA
NEUROKININ 3 (NK3) RECEPTOR ANTAGONISTS		
VEOZAH	3	QL
NON-STEROIDAL MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA	3	QL
PARATHYROID HORMONE AND DERIVATIVES		
TERIPARATIDE	3	PA, QL
<i>teriparatide</i>	1	PA, QL
TYMLOS	3	PA
PHENYLKETONURIA TREATMENT - AGENTS		
<i>javygtor (100 mg packet, 500 mg packet)</i>	1	PA
<i>javygtor 100 mg tab</i>	1	PA
PALYNZIQ	3	PA
<i>sapropterin dihydrochloride (100 mg packet, 500 mg packet)</i>	1	PA
<i>sapropterin dihydrochloride 100 mg tab</i>	1	PA
<i>zelvysia</i>	1	PA
SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)		
OSPHENA	3	QL
<i>raloxifene hcl</i>	1	AL
SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS		
<i>tolvaptan (15 mg tab thpk, 30 & 15 mg tab thpk, 45 & 15 mg tab thpk, 60 & 30 mg tab thpk, 90 & 30 mg tab thpk)</i>	1	PA, QL

Drug Name	Drug Tier	Requirements / Limits
<i>tolvaptan (15 mg tab, 30 mg tab)</i>	1	PA, QL
SOMATOSTATIC AGENTS		
MYCAPSSA	3	PA, QL
<i>octreotide acetate (50 mcg/ml solution, 100 mcg/ml solution, 200 mcg/ml solution, 500 mcg/ml solution, 1000 mcg/ml solution)</i>	1	
SIGNIFOR	3	PA
UREA CYCLE DISORDER - AGENTS		
OLPRUVA (2 GM DOSE)	3	PA
OLPRUVA (3 GM DOSE)	3	PA
OLPRUVA (4 GM DOSE)	3	PA
OLPRUVA (5 GM DOSE)	3	PA
OLPRUVA (6 GM DOSE)	3	PA
OLPRUVA (6.67 GM DOSE)	3	PA
PHEBURANE	3	
RAVICTI	3	PA, QL
<i>sodium phenylbutyrate 3 gm/tsp powder</i>	1	
<i>sodium phenylbutyrate 500 mg tab</i>	1	
VASOPRESSIN		
<i>desmopressin ace spray refrig</i>	1	
<i>desmopressin acetate (0.1 mg tab, 0.2 mg tab)</i>	1	
DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION	3	
<i>desmopressin acetate spray</i>	1	
STIMATE	3	
ESTROGENS		
ESTROGEN & ANDROGEN		
<i>covaryx</i>	1	
<i>covaryx hs</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>eemt</i>	1	
<i>eemt hs</i>	1	
<i>est estrogens-methyltest</i>	1	
<i>est estrogens-methyltest ds</i>	1	
<i>est estrogens-methyltest hs</i>	1	
<i>estratest f.s.</i>	1	
<i>estratest h.s.</i>	1	
ESTROGEN & PROGESTIN		
<i>abigale</i>	1	
<i>abigale lo</i>	1	
<i>amabelz</i>	1	
ANGELIQ	2	
BIJUVA	3	
CLIMARA PRO	2	QL
COMBIPATCH	3	QL
<i>estradiol-norethindrone acet</i>	1	
<i>fyavolv</i>	0	
<i>jinteli</i>	0	
<i>mimvey</i>	1	
<i>norethindrone-eth estradiol</i>	0	
PREMPHASE	2	
PREMPRO	2	
ESTROGEN-PROGESTIN-GNRH ANTAGONIST		
MYFEMBREE	3	
ORIAHNN	3	
ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB		
DUAVEE	3	QL, AL
ALORA (0.025 MG/24HR PATCH TW, 0.075 MG/24HR PATCH TW, 0.1 MG/24HR PATCH TW)	3	QL

Drug Name	Drug Tier	Requirements / Limits
DEPO-ESTRADIOL	3	
<i>dotti (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
ELESTRIN	3	QL
<i>estradiol (0.025 mg/24hr patch tw, 0.025 mg/24hr patch wk, 0.0375 mg/24hr patch tw, 0.0375 mg/24hr patch wk, 0.05 mg/24hr patch tw, 0.05 mg/24hr patch wk, 0.06 mg/24hr patch wk, 0.075 mg/24hr patch tw, 0.075 mg/24hr patch wk, 0.1 mg/24hr patch tw, 0.1 mg/24hr patch wk, 0.25 mg/0.25gm gel, 0.5 mg/0.5gm gel, 0.75 mg/0.75gm gel, 0.75 mg/1.25 gm (0.06%) gel, 1 mg/gm gel, 1.25 mg/1.25gm gel)</i>	1	QL
<i>estradiol (0.5 mg tab, 1 mg tab, 2 mg tab)</i>	1	
<i>estradiol valerate</i>	1	
EVAMIST	3	QL
<i>lyllana (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
MENOSTAR	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		
BAXDELA 450 MG TAB	3	
CIPRO (250 MG/5ML (5%) RECON SUSP, 500 MG/5ML (10%) RECON SUSP)	3	
<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	
<i>ofloxacin 400 mg tab</i>	1	
GASTROINTESTINAL AGENTS - MISC.		
5-HT4 RECEPTOR AGONISTS		
<i>prucalopride succinate</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
BILE ACID SYNTHESIS DISORDER AGENTS		
CHOLBAM	3	PA
CIC AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
TRULANCE	3	ST, QL
FARNESOID X RECEPTOR (FXR) AGONISTS		
OICALIVA	3	ST, QL
GALLSTONE SOLUBILIZING AGENTS		
<i>ursodiol (250 mg tab, 300 mg cap, 500 mg tab)</i>	1	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium 100 mg/5ml conc</i>	1	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone</i>	1	QL, AL
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl (5 mg tab, 5 mg/5ml solution, 10 mg tab, 10 mg/10ml solution)</i>	1	
GLUCAGON-LIKE PEPTIDE-2 (GLP-2) ANALOGS		
GATTEX	3	PA
HEPATOTROPICS - THYROID HORMONE RECEPTOR-BETA AGONISTS		
REZDIFFRA	3	PA, QL
IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
LINZESS	2	QL, AL
IBS AGENT - MU-OPIOID RECEPTOR AGONISTS		
VIBERZI	2	QL
IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS		
<i>alosetron hcl</i>	1	AL
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
BYLVAY	3	PA

Drug Name	Drug Tier	Requirements / Limits
BYLVAY (PELLETS)	3	PA
LIVMARLI (10 MG TAB, 15 MG TAB, 20 MG TAB, 30 MG TAB)	3	PA, QL
LIVMARLI (9.5 MG/ML SOLUTION, 19 MG/ML SOLUTION)	3	QL
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium</i>	1	
DIPENTUM	3	
<i>mesalamine (1.2 gm tab dr, 400 mg cap dr, 800 mg tab dr)</i>	1	QL
<i>mesalamine (4 gm enema, 1000 mg suppos)</i>	1	
<i>mesalamine er</i>	1	QL
<i>mesalamine-cleanser</i>	1	
PENTASA 250 MG CAP ER	2	QL
SFROWASA	3	
<i>sulfasalazine</i>	1	
INTEGRIN RECEPTOR ANTAGONISTS		
ENTYVIO PEN	3	PA, QL
INTERLEUKIN ANTAGONISTS		
OMVOH (300 MG DOSE) 100 MG/ML & 200 MG/2ML SOLN A-INJ	3	PA, QL
OMVOH (300 MG DOSE) 100 MG/ML & 200 MG/2ML SOLN PRSYR	3	PA, QL
OMVOH 100 MG/ML SOLN A-INJ	3	PA, QL
OMVOH 100 MG/ML SOLN PRSYR	3	PA, QL
SKYRIZI (180 MG/1.2ML SOLN CART, 360 MG/2.4ML SOLN CART)	2	PA, QL
TREMFYA 200 MG/2ML SOLN PRSYR	3	PA, QL
TREMFYA PEN 200 MG/2ML SOLN A-INJ	3	PA, QL
TREMFYA-CD/UC INDUCTION	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
INTESTINAL ACIDIFIERS		
<i>enulose</i>	1	
<i>generlac</i>	1	
<i>lactulose encephalopathy</i>	1	
LIVE FECAL MICROBIOTA (HUMAN)		
VOWST	3	PA
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
<i>alvimopan</i>	1	
MOVANTIK	2	QL
RELISTOR (12 MG/0.6ML SOLN PRSYR, 12 MG/0.6ML SOLUTION)	3	
RELISTOR 150 MG TAB	3	QL
RELISTOR 8 MG/0.4ML SOLN PRSYR	3	
SYMPROIC	3	
PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR AGONISTS		
IQIRVO	3	PA, QL
LIVDELZI	3	PA, QL
PHOSPHATE BINDER AGENTS		
AURYXIA	3	
<i>calcium acetate (phos binder)</i>	1	
<i>calcium acetate 667 mg tab</i>	1	
FOSRENOL (750 MG PACKET, 1000 MG PACKET)	2	
<i>lanthanum carbonate</i>	1	
<i>sevelamer carbonate</i>	1	
<i>sevelamer hcl</i>	1	
VELPHORO	3	QL
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS (GI)		
VELSIPITY	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO	3	PA, QL
TUMOR NECROSIS FACTOR ALPHA BLOCKERS		
CIMZIA	2	PA, QL
CIMZIA (2 SYRINGE)	2	PA, QL
CIMZIA-STARTER	2	PA, QL
ZYMFENTRA (1 PEN)	3	PA, QL
ZYMFENTRA (2 PEN)	3	PA, QL
ZYMFENTRA (2 SYRINGE)	3	PA, QL
GENITOURINARY AGENTS - MISCELLANEOUS		
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
CARDURA XL	3	
<i>silodosin</i>	1	QL
<i>tamsulosin hcl</i>	1	
CITRATES		
ORACIT	3	
ORAL CITRATE	3	
<i>pot & sod cit-cit ac</i>	1	
<i>potassium citrate er</i>	1	
<i>potassium citrate-citric acid</i>	1	
<i>sod citrate-citric acid</i>	1	
<i>tricitrates</i>	1	
CYSTINOSIS AGENTS		
CYSTAGON	3	

Drug Name	Drug Tier	Requirements / Limits
PROCYSBI	3	PA
IGAN AGENTS - ENDOTHELIN & ANGIOTENSIN II RECEPTOR ANTAG		
FILSPARI	3	PA, QL
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON	2	
PHOSPHATES		
K-PHOS NO 2	3	
PROSTATIC HYPERTROPHY AGENT COMBINATIONS		
<i>dutasteride-tamsulosin hcl</i>	1	
SMALL INTERFERING RIBONUCLEIC ACID AGENTS (SIRNA)		
RIVFLOZA (128 MG/0.8ML SOLN PRSYR, 160 MG/ML SOLN PRSYR)	3	PA
RIVFLOZA 80 MG/0.5ML SOLUTION	3	PA
URINARY ANALGESICS		
<i>phenazo 200 mg tab</i>	1	
<i>phenazopyridine hcl (100 mg tab, 200 mg tab)</i>	1	
URINARY STONE AGENTS		
LITHOSTAT	3	
<i>tiopronin (100 mg tab dr, 300 mg tab dr)</i>	1	
<i>tiopronin 100 mg tab</i>	1	
<i>venxxiva</i>	1	
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine-probenecid</i>	1	
<i>allopurinol (100 mg tab, 300 mg tab)</i>	1	
<i>colchicine</i>	1	QL
<i>febuxostat</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
GLOPERBA	3	
URICOSURICS		
<i>probenecid</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES		
ALHEMO	3	PA
HYMPAVZI	3	PA, QL
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant acetate</i>	1	PA, QL
<i>sajazir</i>	1	PA, QL
COMPLEMENT C5 INHIBITORS		
ZILBRYSQ	3	PA, QL
COMPLEMENT C5A RECEPTOR INHIBITORS		
TAVNEOS	3	PA
COMPLEMENT FACTOR B INHIBITORS		
FABHALTA	3	PA, QL
COMPLEMENT FACTOR D INHIBITORS		
VOYDEYA	3	PA, QL
DIRECT-ACTING P2Y12 INHIBITORS		
<i>ticagrelor</i>	1	QL
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline er</i>	1	
PHOSPHODIESTERASE III INHIBITORS		
<i>cilostazol</i>	1	
PLASMA KALLIKREIN INHIBITORS		
ORLADEYO	3	PA

Drug Name	Drug Tier	Requirements / Limits
PLASMA KALLIKREIN INHIBITORS - MONOCLONAL ANTIBODIES		
TAKHZYRO (150 MG/ML SOLN PRSYR, 300 MG/2ML SOLN PRSYR)	3	PA, QL
TAKHZYRO 300 MG/2ML SOLUTION	3	PA, QL
PLATELET AGGREGATION INHIBITOR COMBINATIONS		
<i>aspirin-dipyridamole er</i>	1	
PLATELET AGGREGATION INHIBITORS		
<i>dipyridamole (25 mg tab, 50 mg tab, 75 mg tab)</i>	1	
PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS		
ZONTIVITY	3	QL
PYRUVATE KINASE ACTIVATORS		
PYRUKYND	3	PA, QL
PYRUKYND TAPER PACK	3	PA, QL
QUINAZOLINE AGENTS		
<i>anagrelide hcl</i>	1	
SPLEEN TYROSINE KINASE (SYK) INHIBITORS		
TAVALISSE	3	PA
THIENOPYRIDINE DERIVATIVES		
<i>clopidogrel bisulfate</i>	1	
<i>prasugrel hcl</i>	1	QL
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA	3	PA, QL
<i>miglustat</i>	1	PA, QL
<i>yargesa</i>	1	PA, QL
COBALAMINS		
<i>cyanocobalamin 1000 mcg/ml solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>dodex</i>	1	
CXCR4 RECEPTOR ANTAGONIST		
XOLREMDI	3	PA, QL
CYTOTOXIC AGENTS		
DROXIA	3	
XROMI	3	AL
FOLIC ACID/FOLATES		
<i>folic acid 1 mg tab</i>	1	
HYPOXIA-INDUCIBLE FACTOR PROLYL HYDROXYLASE INHIBITORS		
JESDUVROQ	3	PA
THROMBOPOIETIN (TPO) RECEPTOR AGONISTS		
ALVAIZ	3	PA, QL
DOPTLET	3	PA
<i>eltrombopag olamine (12.5 mg packet, 25 mg packet)</i>	1	PA
<i>eltrombopag olamine (12.5 mg tab, 25 mg tab, 50 mg tab, 75 mg tab)</i>	1	PA, QL
MULPLETA	3	PA
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>aminocaproic acid (0.25 gm/ml solution, 500 mg tab, 1000 mg tab)</i>	1	
<i>tranexamic acid 650 mg tab</i>	1	QL
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
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 tab, 97.2 mg tab, 100 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
BENZODIAZEPINE HYPNOTICS		
<i>estazolam</i>	1	
<i>temazepam</i>	1	QL
<i>triazolam</i>	1	
HYPNOTICS - TRICYCLIC AGENTS		
<i>doxepin hcl (3 mg tab, 6 mg tab)</i>	1	QL
NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS		
EDLUAR	3	QL
<i>eszopiclone</i>	1	QL
<i>zaleplon</i>	1	QL
<i>zolpidem tartrate (5 mg tab, 10 mg tab)</i>	1	
<i>zolpidem tartrate er</i>	1	
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA	3	QL
DAYVIGO	3	QL
SELECTIVE MELATONIN RECEPTOR AGONISTS		
HETLIOZ LQ	3	PA, QL
<i>ramelteon</i>	1	QL
<i>tasimelteon</i>	1	PA, QL
LAXATIVES		
BOWEL EVACUANT COMBINATIONS		
CLENPIQ 10-3.5-12 MG-GM -GM/175ML SOLUTION	3	AL
<i>gavilyte-g</i>	1	AL
<i>gavilyte-n with flavor pack</i>	1	AL
<i>na sulfate-k sulfate-mg sulf</i>	1	AL
<i>peg 3350-kcl-na bicarb-nacl</i>	1	AL
<i>peg-3350/electrolytes</i>	1	AL

Drug Name	Drug Tier	Requirements / Limits
<i>peg-3350/electrolytes/ascorbat</i>	1	AL
<i>peg-kcl-nacl-nasulf-na asc-c</i>	1	AL
PEG-PREP	3	AL
PLENVU	3	AL
SUFLAVE	3	AL
SUTAB	3	AL
LAXATIVES - MISCELLANEOUS		
<i>constulose</i>	1	
<i>kristalose</i>	1	
<i>lactulose (10 gm packet, 10 gm/15ml solution, 20 gm packet, 20 gm/30ml solution)</i>	1	
MACROLIDES		
AZITHROMYCIN		
<i>azithromycin (100 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg tab, 500 mg tab, 600 mg tab)</i>	1	
CLARITHROMYCIN		
<i>clarithromycin (250 mg tab, 500 mg tab)</i>	1	
<i>clarithromycin er</i>	1	
ERYTHROMYCINS		
<i>e.e.s. 400</i>	1	
<i>ery-tab</i>	1	
<i>erythromycin (250 mg tab dr, 333 mg tab dr, 500 mg tab dr)</i>	1	
<i>erythromycin base (250 mg tab, 250 mg tab dr, 333 mg tab dr, 500 mg tab, 500 mg tab dr)</i>	1	
<i>erythromycin ethylsuccinate (200 mg/5ml recon susp, 400 mg tab, 400 mg/5ml recon susp)</i>	1	
FIDAXOMICIN		
DIFICID 40 MG/ML RECON SUSP	2	

Drug Name	Drug Tier	Requirements / Limits
<i>fidaxomicin</i>	1	
MEDICAL DEVICES AND SUPPLIES		
APPLICATORS,COTTON BALLS,ETC		
ALCOH-GLOVE CONTOURED WIPE	0	
GLUCOSE MONITORING TEST SUPPLIES		
BD MICROTAINER LANCETS	0	
DEXCOM G6 RECEIVER	2	
DEXCOM G6 SENSOR	2	
DEXCOM G6 TRANSMITTER	2	
DEXCOM G7 15 DAY SENSOR	2	
DEXCOM G7 RECEIVER	2	
DEXCOM G7 SENSOR	2	
FREESTYLE LIBRE 14 DAY READER	2	
FREESTYLE LIBRE 14 DAY SENSOR	2	
FREESTYLE LIBRE 2 PLUS SENSOR	2	
FREESTYLE LIBRE 2 READER	2	
FREESTYLE LIBRE 2 SENSOR	2	
FREESTYLE LIBRE 3 PLUS SENSOR	2	
FREESTYLE LIBRE 3 READER	2	
FREESTYLE LIBRE 3 SENSOR	2	
FREESTYLE LIBRE READER	2	
INSULIN ADMINISTRATION SUPPLIES		
MODD1 PATIENT WELCOME KIT	2	QL
MODD1 SUPPLY KIT	2	
OMNIPOD 5 DEXG7G6 PODS GEN 5	2	
OMNIPOD 5 G6 INTRO (GEN 5)	2	QL
OMNIPOD 5 G6 PODS (GEN 5)	2	
OMNIPOD 5 G7 INTRO (GEN 5)	2	QL

Drug Name	Drug Tier	Requirements / Limits
OMNIPOD 5 G7 PODS (GEN 5)	2	
OMNIPOD 5 LIBRE2 G6 INTRO G5	2	QL
OMNIPOD 5 LIBRE2 PLUS G6 PODS	2	
OMNIPOD CLASSIC PDM (GEN 3)	2	QL
OMNIPOD CLASSIC PODS (GEN 3)	2	
OMNIPOD DASH INTRO (GEN 4)	2	QL
OMNIPOD DASH PDM (GEN 4)	2	QL
OMNIPOD DASH PODS (GEN 4)	2	
OMNIPOD GO	2	QL
TWIIIST REFILL KIT/INFUSION SET	2	
TWIIIST STARTER KIT	2	QL
V-GO 20	2	QL
V-GO 30	2	QL
V-GO 40	2	QL
NEEDLES & SYRINGES		
AQ INSULIN SYRINGE	0	QL
AQINJECT PEN NEEDLE	0	
BD INSULIN SYRINGE U-500	0	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	0	QL
CEQUR SIMPLICITY 2U	0	
CEQUR SIMPLICITY INSERTER	0	
DROPSAFE SAFETY SYRINGE/NEEDLE	0	QL
EMBECTA INSULIN SYRINGE	0	QL
EMBECTA INSULIN SYRINGE U-500	0	
INPEN 100-BLUE-LILLY-HUMALOG	0	
INPEN 100-BLUE-NOVOLOG-FIASP	0	
INPEN 100-GREY-LILLY-HUMALOG	0	

Drug Name	Drug Tier	Requirements / Limits
INPEN 100-GREY-NOVOLOG-FIASP	0	
INPEN 100-PINK-LILLY-HUMALOG	0	
INPEN 100-PINK-NOVOLOG-FIASP	0	
INSULIN SYRINGE-NEEDLE U-100 (27G X 1/2" 0.5 ML MISC, 27G X 1/2" 1 ML MISC, 28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 29G X 1/2" 0.5 ML MISC, 29G X 1/2" 1 ML MISC, 30G X 1/2" 1 ML MISC, 30G X 5/16" 0.5 ML MISC, 31G X 5/16" 0.5 ML MISC, 31G X 5/16" 1 ML MISC)	0	QL
J-TIP KIT W/VIAL ADAPTERS	0	
MAGELLAN INSULIN SAFETY SYR	0	QL
MARATHON MEDICAL PENTIPS	0	
MONOJECT INSULIN SYRINGE (27G X 1/2" 1 ML MISC, 28G X 1/2" 0.5 ML MISC, 28G X 1/2" 1 ML MISC, 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)	0	QL
MONOJECT INSULIN SYRINGE U-100 1 ML MISC	0	
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)	0	QL
NORDIPEN 5 INJECTION DEVICE	0	
NOVOPEN ECHO	0	
OMNITROPE PEN 10 INJ DEVICE	0	
OMNITROPE PEN 5 INJ DEVICE	0	
PEN NEEDLES (30G X 5 MISC, 31G X 5 MISC, 31G X 8 MISC, 32G X 4 MISC)	0	
PENTIPS (29G X 12MM MISC, 31G X 5 MM MISC, 31G X 8 MM MISC, 32G X 4 MM MISC)	0	
PRO COMFORT PEN NEEDLES (X 4 MISC, X 5 MISC)	0	
SURE COMFORT PEN NEEDLES (31G X 6 MISC, 32G X 4 MISC)	0	
ULTICARE INSULIN SAFETY SYR	0	QL

Drug Name	Drug Tier	Requirements / Limits
PEAK FLOW METERS		
AEROGear ACTION ASTHMA KIT	3	
STRIVE DUAL ZONE PEAK FLOW MTR	3	
TRUZONE PEAK FLOW METER	3	
RESPIRATORY THERAPY SUPPLIES		
ACE AEROSOL CLOUD ENHANCER	2	
ACTIVITY POUCH	2	
ADULT MASK	2	
ADULT MASK LARGE	2	
AEROBIKA	2	
AEROECLIPSE EZ TWIST TUBING	2	
AEROTRACH PLUS	2	
AIRS PEDIATRIC AEROSOL MASK	2	
ALL FLOW 1000 PFT FILTER (DEVICE, MISC)	2	
ALL FLOW 2000 PFT FILTER	2	
ALL FLOW 3000 PFT FILTER DEVICE	2	
ALL FLOW 4000 PFT FILTER DEVICE	2	
ALL FLOW 5000 PFT FILTER DEVICE	2	
ALL FLOW 6000 PFT FILTER DEVICE	2	
ALL FLOW 7000 PFT FILTER	2	
BREATHE EASE NEB MASK/CHILD	2	
BREATHE EASE NEB MASK/INFANT	2	
CARETOUCH 2 CPAP HOSE HANGER	2	
CARETOUCH CPAP & BIPAP HOSE	2	
CARETOUCH CPAP MASK WIPES	2	
CARETOUCH CPAP PRE-WASH SOLN	2	
CARETOUCH CPAP TUBE BRUSH	2	
CARETOUCH UNIVERSL CPAP FILTER	2	

Drug Name	Drug Tier	Requirements / Limits
CO MONITOR	2	
CO MONITOR REPLACEMENT PIECES	2	
DISPOSABLE FULL RANGE	2	
DISPOSABLE LOW RANGE	2	
DISPOSABLE LOW RANGE/PEDIATRIC	2	
DISPOSABLE UNIVERSAL RANGE	2	
EBASE CONTROLLER KIT	2	
FILTER AIR PP	2	
FULL KIT NEBULIZER SET	2	
IN-CHECK DIAL FLOW TRAINER	2	
IN-CHECK INSPIRATORY FLOW MTR	2	
INNOSPIRE REPLACEMENT FILTER	2	
LITETOUCH MASK LARGE	2	
LITETOUCH MASK MEDIUM	2	
LITETOUCH MASK SMALL	2	
NEBULIZER AIR TUBE/PLUGS	2	
NEBULIZER MASK ADULT	2	
NEBULIZER MASK CHILD	2	
OMBRA TABLE TOP COMPRESSOR	2	
ONE FLOW SPIROMETER DEVICE	2	
PARI ALTERA NEBULIZER HANDSET	2	
PARI BABY CONVERSION KIT	2	
PARI ERAPID NEBULIZER HANDSET	2	
PARI EXPIRATORY FILTER SET	2	
PARI MANUAL INTERRUPTER	2	
PARI MASK SET	2	
PARI SOFT PLASTIC ADULT MASK	2	
PARI SOFT PLASTIC PED MASK	2	

Drug Name	Drug Tier	Requirements / Limits
PARI TREK S COMBO PACK	2	
PFLEX	2	
PILLOW MASK/ADULT	2	
PILLOW MASK/CHILD	2	
PILLOW MASK/PEDIATRIC	2	
QUAKE	2	
REPLACEMENT AIR FILTER	2	
REUSABLE COMFORTSEAL MASK-LRG	2	
REUSABLE COMFORTSEAL MASK-MED	2	
REUSABLE COMFORTSEAL MASK-SML	2	
SIDESTREAM ADULT FACE MASK	2	
SIDESTREAM PEDIATRIC FACE MASK	2	
SILICONE MASK/ADULT	2	
SILICONE MASK/INFANT	2	
SILICONE MASK/PEDIATRIC	2	
SPIRO PD	2	
THRESHOLD IMT	2	
THRESHOLD PEP	2	
VERSAPAP	2	
VERSAPAP W/UNIVERSAL TUBING	2	
WINDMILL TRAINER	2	
SPACER/AEROSOL-HOLDING CHAMBERS & SUPPLIES		
AEROCHAMBER HOLDING CHAMBER	2	
AEROCHAMBER MINI CHAMBER	2	
AEROCHAMBER MV	2	
AEROCHAMBER PLS FLOVU MTHPIECE	2	
AEROCHAMBER PLUS FLO-VU	2	
AEROCHAMBER PLUS FLO-VU INTERM	2	

Drug Name	Drug Tier	Requirements / Limits
AEROCHAMBER PLUS FLO-VU LARGE	2	
AEROCHAMBER PLUS FLO-VU MEDIUM	2	
AEROCHAMBER PLUS FLO-VU SMALL	2	
AEROCHAMBER PLUS FLO-VU W/MASK	2	
AEROCHAMBER PLUS FLOW VU	2	
AEROCHAMBER W/FLOWSIGNAL	2	
AEROCHAMBER Z-STAT PLUS	2	
AEROCHAMBER Z-STAT PLUS CHAMBR	2	
AEROCHAMBER Z-STAT PLUS/LARGE	2	
AEROCHAMBER Z-STAT PLUS/MEDIUM	2	
AEROCHAMBER Z-STAT PLUS/SMALL	2	
AEROCHAMBER2GO ANTI-STATIC	2	
AEROVENT PLUS	2	
BREATHE EASE LARGE	2	
BREATHE EASE MEDIUM	2	
BREATHE EASE SMALL	2	
BREATHERITE VALVED MDI CHAMBER	2	
CLEVER CHOICE HOLDING CHAMBER	2	
COMPACT SPACE CHAMBER	2	
COMPACT SPACE CHAMBER/LG MASK	2	
COMPACT SPACE CHAMBER/MED MASK	2	
COMPACT SPACE CHAMBER/SM MASK	2	
EASIVENT	2	
EASIVENT MASK LARGE	2	
EASIVENT MASK MEDIUM	2	
EASIVENT MASK SMALL	2	
EQ SPACE CHAMBER ANTI-STATIC	2	
EQ SPACE CHAMBER ANTI-STATIC L	2	

Drug Name	Drug Tier	Requirements / Limits
EQ SPACE CHAMBER ANTI-STATIC M	2	
EQ SPACE CHAMBER ANTI-STATIC S	2	
FLEXICHAMBER	2	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	
INSPIREASE	2	
MICROCHAMBER	2	
MICROSPACER	2	
OPTICHAMBER DIAMOND	2	
OPTICHAMBER DIAMOND-LG MASK	2	
OPTICHAMBER DIAMOND-MD MASK	2	
OPTICHAMBER DIAMOND-SM MASK	2	
POCKET CHAMBER	2	
POCKET SPACER	2	
PROCHAMBER VHC	2	
RITEFLO	2	
VORTEX HOLD CHMBR/MASK/CHILD	2	
VORTEX HOLD CHMBR/MASK/TODDLER	2	
VORTEX VALVE CHAMBER-PEDI MASK	2	
VORTEX VALVED HOLDING CHAMBER	2	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)		
NURTEC	2	PA, QL
QULIPTA	3	PA, QL
UBRELVY	2	PA, QL
ZAVZPRET	3	PA, QL
CGRP RECEPTOR ANTAGONISTS - MONOCLONAL ANTIBODIES		
AIMOVIG	2	PA

Drug Name	Drug Tier	Requirements / Limits
AJOVY	2	PA
EMGALITY (300 MG DOSE)	3	PA
EMGALITY 120 MG/ML SOLN A-INJ	2	PA
EMGALITY 120 MG/ML SOLN PRSYR	3	PA
<i>dihydroergotamine mesylate 1 mg/ml solution</i>	1	
<i>dihydroergotamine mesylate 4 mg/ml solution</i>	1	QL
ERGOMAR	3	
MIGRAINE PRODUCTS - NSAIDS		
<i>diclofenac potassium(migraine)</i>	1	QL
SELECTIVE SEROTONIN AGONISTS 5-HT(1)		
<i>almotriptan malate</i>	1	QL
<i>eletriptan hydrobromide</i>	1	QL
<i>frovatriptan succinate</i>	1	QL
<i>naratriptan hcl</i>	1	QL
ONZETRA XSAIL	3	
<i>rizatriptan benzoate</i>	1	QL
<i>sumatriptan</i>	1	QL
<i>sumatriptan succinate (4 mg/0.5ml soln a-inj, 6 mg/0.5ml soln a-inj, 6 mg/0.5ml solution, 25 mg tab, 50 mg tab, 100 mg tab)</i>	1	QL
ZEMBRACE SYMTOUCH	3	QL
<i>zolmitriptan (2.5 mg tab, 2.5 mg tab disp, 5 mg solution, 5 mg tab, 5 mg tab disp)</i>	1	QL
MINERALS & ELECTROLYTES		
BICARBONATES		
<i>sodium bicarbonate 8.4 % solution</i>	1	
FLUORIDE		
<i>nafrinse</i>	1	AL
<i>sodium fluoride (0.55 (0.25 f) mg chew tab, 1.1 (0.5 f) mg chew tab, 2.2 (1 f) mg chew tab)</i>	1	AL

Drug Name	Drug Tier	Requirements / Limits
FLUORIDE COMBINATIONS		
FLORIVA 0.25-400 MG-UNIT/ML LIQUID	3	
PHOSPHATE		
<i>phospha 250 neutral</i>	1	
<i>phospho-trin 250 neutral</i>	1	
<i>phospho-trin k500</i>	1	
<i>phosphorous</i>	1	
<i>virt-phos 250 neutral</i>	1	
<i>wes-phos 250 neutral</i>	1	
POTASSIUM		
<i>effer-k 25 meq effer tab</i>	1	
<i>k-prime</i>	1	
<i>klor-con</i>	1	
<i>klor-con 10</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>	1	
<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 COMBINATIONS		
EFFER-K (10 EFFER TAB, 20 EFFER TAB)	3	
ZINC		
GALZIN	3	
WILZIN	3	

Drug Name	Drug Tier	Requirements / Limits
MISCELLANEOUS THERAPEUTIC CLASSES		
ACTIVATED PHOSPHOINOSITIDE 3-KINASE DELTA SYNDROME AGENT		
JOENJA	3	PA, QL
ANTILEPTOTICS		
THALOMID (50 MG CAP, 100 MG CAP)	3	PA, QL
B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITORS		
BENLYSTA 200 MG/ML SOLN A-INJ	3	PA, QL
BENLYSTA 200 MG/ML SOLN PRSYR	3	PA, QL
CHELATING AGENTS		
<i>clovique</i>	1	
<i>penicillamine</i>	1	
<i>trientine hcl 250 mg cap</i>	1	
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	
LUPKYNIS	3	PA
NEORAL (25 MG CAP, 100 MG CAP, 100 MG/ML SOLUTION)	3	
SANDIMMUNE (25 MG CAP, 100 MG CAP)	3	
FARNESYLTRANSFERASE INHIBITORS		
ZOKINVY	3	PA
IMMUNOMODULATORS FOR MYELOYDYSPLASTIC SYNDROMES		
<i>lenalidomide</i>	1	QL
REVLIMID	2	QL
INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS		
<i>mycophenolate mofetil (200 mg/ml recon susp, 250 mg cap, 500 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mycophenolate sodium</i>	1	
<i>mycophenolic acid</i>	1	
MACROLIDE IMMUNOSUPPRESSANTS		
ASTAGRAF XL	3	
ENVARUSUS XR	3	
<i>everolimus (0.25 mg tab, 0.5 mg tab, 0.75 mg tab, 1 mg tab)</i>	1	
PROGRAF (0.2 MG PACKET, 1 MG PACKET)	3	AL
PROGRAF (0.5 MG CAP, 1 MG CAP, 5 MG CAP)	3	
RAPAMUNE 1 MG/ML SOLUTION	3	
<i>sirolimus (0.5 mg tab, 1 mg tab, 1 mg/ml solution, 2 mg tab)</i>	1	
<i>tacrolimus (0.5 mg cap, 1 mg cap, 5 mg cap)</i>	1	
MONOCLONAL ANTIBODIES		
ENSPRYNG	3	PA
PIK3CA-RELATED OVERGROWTH SPECTRUM AGENTS - PI3K INHIB		
VIJOICE (50 MG TAB THPK, 125 MG TAB THPK, 200 & 50 MG TAB THPK)	3	PA, QL
VIJOICE 50 MG PACKET	3	PA, QL
POTASSIUM REMOVING AGENTS		
<i>kionex</i>	1	
LOKELMA	3	
<i>sodium polystyrene sulfonate</i>	1	
<i>sps (sodium polystyrene sulf) 15 gm/60ml suspension</i>	1	
VELTASSA	3	
PURINE ANALOGS		
<i>azasan</i>	1	
<i>azathioprine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ROCK INHIBITORS		
REZUROCK	3	PA
MOUTH/THROAT/DENTAL AGENTS		
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	
ORAVIG	3	
ANTISEPTIC COMBINATIONS - MOUTH/THROAT		
DEBACTEROL	3	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate 0.12 % solution</i>	1	
<i>periogard</i>	1	
PROTECTANTS - MOUTH/THROAT		
ORAFATE	3	
ORAMAGICRX	3	
PROTHELIAL	3	
SALIVA STIMULANTS		
<i>cevimeline hcl</i>	1	
<i>pilocarpine hcl (5 mg tab, 7.5 mg tab)</i>	1	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>kourzeq</i>	1	
<i>oralone</i>	1	
<i>triamcinolone acetonide 0.1 % paste</i>	1	
MULTIVITAMINS		
PED MULTI VITAMINS W/FL & FE		
FLORAFOL FE PEDIATRIC	3	AL

Drug Name	Drug Tier	Requirements / Limits
POLY-VI-FLOR/IRON 0.5-10 MG CHEW TAB	3	
PED MV W/ FLUORIDE		
DAVIMET-FLUORIDE	3	
FLORAFOL PEDIATRIC (0.5 MG CHEW TAB, 1 MG CHEW TAB)	3	
FLOTREX (0.25 MG CHEW TAB, 0.5 MG CHEW TAB)	3	
MULTI-VIT-FLOR	3	
MULTIVITAMIN/FLUORIDE (MULTIVITAMIN/FLUORIDE 0.25 MG CHEW TAB, MULTIVITAMIN/FLUORIDE 0.5 MG CHEW TAB, MULTIVITAMIN/FLUORIDE 1 MG CHEW TAB)	3	
POLY-VI-FLOR (0.25 MG CHEW TAB, 0.5 MG CHEW TAB, 1 MG CHEW TAB)	3	
QUFLORA PEDIATRIC (0.25 MG CHEW TAB, 0.5 MG CHEW TAB, 1 MG CHEW TAB)	3	
PRENATAL MV & MIN W/FE-FA		
ATABEX EC	3	
ATABEX OB	3	
C-NATE DHA	3	
CITRANATAL B-CALM	3	
CO-NATAL FA	3	
CONCEPT DHA	3	
CONCEPT OB	3	
ENBRACE HR	3	
FOLIVANE-OB	3	
NATALVIT	3	
NEONATAL COMPLETE 29-1 MG TAB	3	
NESTABS	3	
NESTABS DHA	3	
OB COMPLETE ONE	3	

Drug Name	Drug Tier	Requirements / Limits
OB COMPLETE PETITE	3	
OB COMPLETE PREMIER	3	
OB COMPLETE/DHA	3	
PNV 27-CA/FE/FA	3	
PNV-OMEGA	3	
PRENA1 PEARL	3	
PRENATAL-U	3	
PRENATE ELITE	3	
PRETAB	3	
PRIMACARE	3	
PROVIDA OB	3	
RELNATE DHA	3	
SELECT-OB	3	
TARON-C DHA	3	
TRINATAL RX 1	3	
VINATE II	3	
VINATE ONE	3	
VIRT-C DHA	3	
VIRT-NATE DHA	3	
VIRT-PN PLUS	3	
VITAFOL-OB	3	
VITAPEARL	3	
VIVA DHA	3	
WESCAP-C DHA	3	
WESNATE DHA	3	
ZATEAN-PN PLUS	3	
PRENATAL MV & MIN W/FE-FA-CA-OMEGA 3 FISH OIL		
COMPLETE NATAL DHA	3	

Drug Name	Drug Tier	Requirements / Limits
WESNATAL DHA COMPLETE	3	
PRENATAL MV & MIN W/FE-FA-DHA		
CITRANATAL 90 DHA	3	
CITRANATAL ASSURE	3	
CITRANATAL BLOOM DHA	3	
CITRANATAL HARMONY	3	
NESTABS ONE	3	
PNV-DHA+DOCUSATE	3	
PRENA 1 TRUE	3	
PRENAISSANCE	3	
PRENAISSANCE PLUS	3	
PRENATE DHA	3	
PRENATE ENHANCE	3	
PRENATE ESSENTIAL	3	
PRENATE MINI	3	
PRENATE PIXIE	3	
PRENATE RESTORE	3	
SELECT-OB+DHA	3	
VITAFOL ULTRA	3	
VITAFOL-OB+DHA	3	
VITAFOL-ONE	3	
VITAMEDMD ONE RX/QUATREFOLIC	3	
VITATRUE	3	
PRENATAL MV & MINERALS W/FA WITHOUT IRON		
PRENATE	3	
PRENATAL VITAMINS		
PRENA1	3	
VITAMEDMD REDICHEW RX	3	

Drug Name	Drug Tier	Requirements / Limits
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen (5 mg tab, 5 mg/5ml solution, 10 mg tab, 10 mg/5ml solution, 15 mg tab, 20 mg tab)</i>	1	
<i>baclofen 25 mg/5ml suspension</i>	1	QL
<i>carisoprodol</i>	1	QL
<i>chlorzoxazone (375 mg tab, 500 mg tab, 750 mg tab)</i>	1	
<i>cyclobenzaprine hcl</i>	1	
<i>cyclobenzaprine hcl er</i>	1	
<i>fexmid</i>	1	
<i>lorzone</i>	1	
<i>metaxalone (400 mg tab, 800 mg tab)</i>	1	
<i>methocarbamol (500 mg tab, 750 mg tab)</i>	1	
<i>orphenadrine citrate er</i>	1	
<i>tizanidine hcl</i>	1	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium (25 mg cap, 50 mg cap, 100 mg cap)</i>	1	
RETINOIC ACID RECEPTOR GAMMA SELECTIVE AGONISTS		
SOHONOS	3	PA, QL
NASAL AGENTS - SYSTEMIC AND TOPICAL		
ANTI HISTAMINE-STERIOD		
<i>azelastine-fluticasone</i>	1	QL, AL
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide (0.03 % solution, 0.06 % solution)</i>	1	QL
NASAL ANTIHISTAMINES		
<i>azelastine hcl (0.1 % solution, 137 mcg/spray solution)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>olopatadine hcl 0.6 % solution</i>	1	
NASAL STEROIDS		
<i>flunisolide</i>	1	
<i>fluticasone propionate 50 mcg/act suspension</i>	1	
<i>mometasone furoate 50 mcg/act suspension</i>	1	QL
OMNARIS	3	QL
QNASL	3	QL
QNASL CHILDRENS	3	QL
ZETONNA	3	QL, AL
NEUROMUSCULAR AGENTS		
ALS AGENTS - MISCELLANEOUS		
RADICAVA ORS	3	QL
RADICAVA ORS STARTER KIT	3	QL
BENZATHIAZOLES		
<i>riluzole</i>	1	
TEGLUTIK	3	
TIGLUTIK	3	
FRIEDRICH'S ATAXIA AGENTS - NRF2 PATHWAY ACTIVATORS		
SKYCLARYS	3	PA, QL
RETT SYNDROME AGENTS - GLYCINE-PROLINE-GLUTAMATE ANALOGS		
DAYBUE	3	PA
SPINAL MUSCULAR ATROPHY-SMN2 SPLICING MODIFIERS		
EVRYSDI 0.75 MG/ML RECON SOLN	3	PA, QL
EVRYSDI 5 MG TAB	3	PA, QL
OPHTHALMIC AGENTS		
ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB		
SIMBRINZA	3	

Drug Name	Drug Tier	Requirements / Limits
BETA-BLOCKERS - OPHTHALMIC		
BETIMOL 0.25 % SOLUTION	3	
BETOPTIC-S	3	
<i>timolol hemihydrate</i>	1	
<i>timolol maleate (0.25 % gel f soln, 0.25 % solution, 0.5 % gel f soln, 0.5 % solution)</i>	1	
<i>timolol maleate (once-daily)</i>	1	
<i>timolol maleate ocudose</i>	1	
<i>timolol maleate pf</i>	1	
BETA-BLOCKERS - OPHTHALMIC COMBINATIONS		
<i>brimonidine tartrate-timolol</i>	1	
<i>dorzolamide hcl-timolol mal</i>	1	
<i>dorzolamide hcl-timolol mal pf</i>	1	
CYCLOPLEGIC MYDRIATICS		
<i>altafrin</i>	1	
<i>atropine sulfate 1 % solution</i>	1	
<i>cyclopentolate hcl 1 % solution</i>	1	
<i>phenylephrine hcl (2.5 % solution, 10 % solution)</i>	1	
<i>tropicamide</i>	1	
LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG		
XIIDRA	2	QL
MIOTICS - DIRECT ACTING		
<i>pilocarpine hcl (1 % solution, 1.25 % solution, 2 % solution, 4 % solution)</i>	1	
QLOSI	3	
OPHTHALMIC ANTI-INFECTIVE COMBINATIONS		
<i>ak-poly-bac</i>	1	
<i>bacitracin-polymyxin b</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>neo-polycin</i>	1	
<i>neomycin-bacitracin zn-polymyx</i>	1	
<i>polycin</i>	1	
<i>polymyxin b-trimethoprim</i>	1	
OPHTHALMIC ANTIALLERGIC		
ALOCRIL	2	
ALOMIDE	2	
<i>azelastine hcl 0.05 % solution</i>	1	
<i>bepotastine besilate</i>	1	
<i>epinastine hcl</i>	1	
<i>olopatadine hcl (0.1 % solution, 0.2 % solution)</i>	1	
ZERVIAE	3	
OPHTHALMIC ANTIBIOTICS		
AZASITE	3	
BESIVANCE	3	
CILOXAN 0.3 % OINTMENT	3	
<i>ciprofloxacin hcl 0.3 % solution</i>	1	
<i>erythromycin 5 mg/gm ointment</i>	1	
<i>gatifloxacin</i>	1	
<i>gentamicin sulfate 0.3 % solution</i>	1	
KLARITY-A	3	
<i>moxifloxacin hcl 0.5 % solution</i>	1	
<i>ofloxacin 0.3 % solution</i>	1	
<i>tobramycin 0.3 % solution</i>	1	
TOBREX 0.3 % OINTMENT	3	
OPHTHALMIC ANTIFUNGAL		
NATACYN	3	
OPHTHALMIC ANTIVIRALS		
ZIRGAN	3	

Drug Name	Drug Tier	Requirements / Limits
OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS		
<i>brinzolamide</i>	1	
<i>dorzolamide hcl</i>	1	
OPHTHALMIC IMMUNOMODULATORS		
<i>cyclosporine 0.05 % emulsion</i>	1	QL
OPHTHALMIC LOCAL ANESTHETICS		
AKTEN	3	
<i>altacaine</i>	1	
<i>proparacaine hcl</i>	1	
<i>tetracaine hcl 0.5 % solution</i>	1	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE	3	PA, QL
OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS		
ACUVAIL	3	
<i>bromfenac sodium</i>	1	AL
<i>bromfenac sodium (once-daily)</i>	1	AL
<i>diclofenac sodium 0.1 % solution</i>	1	
ILEVRO	3	AL
<i>ketorolac tromethamine (0.4 % solution, 0.5 % solution)</i>	1	
NEVANAC	3	AL
OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS		
<i>brimonidine tartrate (0.1 % solution, 0.15 % solution, 0.2 % solution)</i>	1	
IOPIDINE	3	
OPHTHALMIC STEROID COMBINATIONS		
<i>bacitra-neomycin-polymyxin-hc</i>	1	
<i>neo-polycin hc</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>neomycin-polymyxin-dexameth (0.1 % suspension, 3.5-10000-0.1 ointment, 3.5-10000-0.1 suspension)</i>	1	
TOBRADEX 0.3-0.1 % OINTMENT	2	
TOBRADEX ST	3	
<i>tobramycin-dexamethasone</i>	1	
ZYLET	3	
OPHTHALMIC STEROIDS		
<i>difluprednate</i>	1	
FLAREX	2	
<i>fluorometholone</i>	1	
FML FORTE	2	
INVELTYS	3	
LOTEMAX 0.5 % OINTMENT	2	
LOTEMAX SM	2	
<i>loteprednol etabonate (0.2 % suspension, 0.5 % gel, 0.5 % suspension)</i>	1	
MAXIDEX	3	
PRED MILD	3	
<i>prednisolone acetate</i>	1	
PREDNISOLONE ACETATE P-F	3	
OPHTHALMIC SULFONAMIDES		
<i>sulfacetamide sodium 10 % solution</i>	1	
OPHTHALMIC SURGICAL AIDS		
GELFILM	3	
OPHTHALMICS - BLEPHAROPTOSIS AGENTS		
UPNEEQ	3	AL
OPHTHALMICS - CYSTINOSIS AGENTS		
CYSTARAN	3	

Drug Name	Drug Tier	Requirements / Limits
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost</i>	1	
<i>latanoprost</i>	1	
LUMIGAN	2	ST
<i>tafluprost (pf)</i>	1	
<i>travoprost (bak free)</i>	1	
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2 % solution</i>	1	
OTIC ANTI-INFECTIVES		
<i>ciprofloxacin hcl 0.2 % solution</i>	1	
OTIC STEROID-ANTI-INFECTIVE COMBINATIONS		
CIPRO HC	3	
<i>ciprofloxacin-dexamethasone</i>	1	
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc</i>	1	
OTOVEL	2	
OTIC STEROIDS		
<i>flac</i>	1	
<i>fluocinolone acetonide 0.01 % oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
OXYTOCICS		
CERVICAL RIPENING - PROSTAGLANDINS		
CERVIDIL	3	
PREPIDIL	3	
<i>methergine</i>	1	
<i>methylergonovine maleate 0.2 mg tab</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PENICILLINS		
AMINOPENICILLINS		
<i>amoxicillin (125 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg cap, 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		
<i>penicillin v potassium (250 mg tab, 500 mg tab)</i>	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/5ml recon susp, 500-125 mg tab, 600-42.9 mg/5ml recon susp, 875-125 mg tab)</i>	1	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium</i>	1	
PROGESTINS		
<i>gallifrey</i>	1	
<i>medroxyprogesterone acetate (2.5 mg tab, 5 mg tab, 10 mg tab)</i>	1	
<i>megestrol acetate 625 mg/5ml suspension</i>	1	
<i>norethindrone acetate</i>	1	
<i>progesterone (50 mg/ml oil, 100 mg cap, 200 mg cap)</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ALCOHOL DETERRENTS		
<i>acamprosate calcium</i>	1	
<i>disulfiram</i>	1	
ANTI-CATALECTIC AGENTS		
LUMRYZ	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
LUMRYZ STARTER PACK	3	PA, QL
SODIUM OXYBATE	2	PA, QL
XYREM	2	PA, QL
ANTIDEMENTIA AGENT COMBINATIONS		
<i>memantine hcl-donepezil hcl</i>	1	QL
NAMZARIC 7 & 14 & 21 & 28 -10 MG CP24 THPK	2	QL
NAMZARIC 7-10 MG CAP ER 24H	2	QL
ANTISENSE OLIGONUCLEOTIDE (ASO) INHIBITOR AGENTS		
TEGSEDI	3	PA
WAINUA	3	PA, QL
CHOLINOMIMETICS - ACHE INHIBITORS		
ADLARITY	3	QL
<i>donepezil hcl (5 mg tab, 5 mg tab disp, 10 mg tab, 10 mg tab disp)</i>	1	QL
<i>donepezil hcl 23 mg tab</i>	1	
<i>galantamine hydrobromide (4 mg tab, 8 mg tab, 12 mg tab)</i>	1	
<i>galantamine hydrobromide er</i>	1	QL
<i>rivastigmine</i>	1	QL
<i>rivastigmine tartrate</i>	1	QL
FIBROMYALGIA AGENT - SNRIS		
SAVELLA	2	QL
SAVELLA TITRATION PACK	2	QL
MELANOCORTIN RECEPTOR AGONISTS		
VYLEESI	3	QL
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO	3	PA
AUSTEDO XR	3	PA

Drug Name	Drug Tier	Requirements / Limits
AUSTEDO XR PATIENT TITRATION 12 & 18 & 24 & 30 MG TBER THPK	3	PA
INGREZZA (60 MG CAP SPRINK, 80 MG CAP SPRINK)	3	PA
INGREZZA (60 MG CAP, 80 MG CAP)	3	PA, QL
INGREZZA 40 & 80 MG CAP THPK	3	PA, QL
INGREZZA 40 MG CAP	3	PA, QL
INGREZZA 40 MG CAP SPRINK	3	PA
<i>tetrabenazine</i>	1	PA
MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS		
<i>teriflunomide</i>	1	PA, QL
MULTIPLE SCLEROSIS AGENTS		
<i>glatiramer acetate</i>	1	PA, QL
<i>glatopa</i>	1	PA, QL
MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES		
MAVENCLAD (10 TABS)	2	PA, QL
MAVENCLAD (4 TABS)	2	PA, QL
MAVENCLAD (5 TABS)	2	PA, QL
MAVENCLAD (6 TABS)	2	PA, QL
MAVENCLAD (7 TABS)	2	PA, QL
MAVENCLAD (8 TABS)	2	PA, QL
MAVENCLAD (9 TABS)	2	PA, QL
MULTIPLE SCLEROSIS AGENTS - INTERFERONS		
AVONEX PEN	2	PA, QL
AVONEX PREFILLED	2	PA, QL
BETASERON	3	PA, QL
EXTAVIA	3	PA, QL
PLEGRIDY	3	PA, QL

Drug Name	Drug Tier	Requirements / Limits
PLEGRIDY STARTER PACK	3	PA, QL
REBIF	2	PA, QL
REBIF REBIDOSE	2	PA, QL
REBIF REBIDOSE TITRATION PACK	3	PA, QL
REBIF TITRATION PACK	3	PA, QL
MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES		
KESIMPTA	3	PA
MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS		
BAFIERTAM	3	PA, QL
<i>dimethyl fumarate</i>	1	PA, QL
<i>dimethyl fumarate starter pack</i>	1	PA, QL
MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS		
<i>dalfampridine er</i>	1	PA, QL
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS		
<i>memantine hcl (2 mg/ml solution, 5 mg tab, 10 mg tab, 10 mg/5ml solution)</i>	1	
<i>memantine hcl 28 x 5 mg & 21 x 10 mg tab</i>	1	QL
<i>memantine hcl er</i>	1	QL
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
<i>gabapentin (once-daily)</i>	1	
<i>pregabalin er</i>	1	QL
PSEUDOBULBAR AFFECT AGENT COMBINATIONS		
NUEDEXTA	3	
AQNEURSA	3	PA, QL
RESTLESS LEG SYNDROME (RLS) AGENTS		
HORIZANT	3	
SEROTONIN 1A RECEPT AGONIST/SEROTONIN 2A RECEPT ANTAG		
ADDYI	3	QL, AL

Drug Name	Drug Tier	Requirements / Limits
SMOKING DETERRENTS		
<i>bupropion hcl er (smoking det)</i>	0	
NICOTROL	0	
NICOTROL NS	0	
<i>varenicline tartrate</i>	0	
<i>varenicline tartrate (starter)</i>	0	
<i>varenicline tartrate(continue)</i>	0	
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS		
<i>fingolimod hcl</i>	1	PA, QL
GILENYA 0.25 MG CAP	2	PA, QL
MAYZENT	3	PA, QL
MAYZENT STARTER PACK	3	PA, QL
PONVORY	3	PA, QL
PONVORY STARTER PACK	3	PA, QL
TASCENSO ODT	2	PA, QL
ZEPOSIA	2	PA, QL
ZEPOSIA 7-DAY STARTER PACK	2	PA, QL
ZEPOSIA STARTER KIT 0.23MG &0.46MG 0.92MG(21) CAP THPK	2	PA, QL
THIENBENZODIAZEPINES & SSRIS		
<i>olanzapine-fluoxetine hcl</i>	1	QL, AL
VASOMOTOR SYMPTOM AGENTS - SSRIS		
<i>paroxetine mesylate</i>	1	QL
RESPIRATORY AGENTS - MISC.		
CFTR POTENTIATORS		
KALYDECO (5.8 MG PACKET, 13.4 MG PACKET, 25 MG PACKET, 50 MG PACKET, 75 MG PACKET)	2	PA, QL
KALYDECO 150 MG TAB	2	PA, QL

Drug Name	Drug Tier	Requirements / Limits
CYSTIC FIBROSIS AGENT - COMBINATIONS		
ORKAMBI (100-125 MG TAB, 200-125 MG TAB)	2	PA, QL
ORKAMBI (75-94 MG PACKET, 100-125 MG PACKET, 150-188 MG PACKET)	2	PA, QL, AL
SYMDEKO	3	PA, QL
TRIKAFTA	3	PA
CYSTIC FIBROSIS AGENTS - MISCELLANEOUS		
BRONCHITOL	3	
BRONCHITOL TOLERANCE TEST	3	
HYDROLYTIC ENZYMES		
PULMOZYME	2	
PULMONARY FIBROSIS AGENTS		
<i>pirfenidone (267 mg cap, 267 mg tab, 801 mg tab)</i>	1	PA, QL
PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS		
OFEV	3	PA, QL
SULFONAMIDES		
<i>sulfadiazine</i>	1	
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA 150 MG TAB	3	PR (infectious Disease Spec.)
<i>avidoxy</i>	1	
<i>demeclocycline hcl</i>	1	
<i>doxycycline hyclate (20 mg tab, 50 mg cap, 75 mg tab, 75 mg tab dr, 100 mg cap, 100 mg tab, 150 mg tab, 150 mg tab dr, 200 mg tab dr)</i>	1	
<i>doxycycline monohydrate (25 mg/5ml recon susp, 50 mg cap, 50 mg tab, 75 mg cap, 75 mg tab, 100 mg cap, 100 mg tab, 150 mg cap, 150 mg tab)</i>	1	
<i>minocycline hcl (50 mg cap, 75 mg cap, 100 mg cap)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mondoxylene nl 100 mg cap</i>	1	
<i>morgidox 100 mg cap</i>	1	
<i>tetracycline hcl (250 mg cap, 500 mg cap)</i>	1	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>propylthiouracil</i>	1	
THYROID HORMONES		
ARMOUR THYROID	3	
CYTOMEL	3	
<i>euthyrox</i>	1	
<i>levo-t</i>	1	
<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	
RENTHYROID	3	
SYNTHROID	3	
THYQUIDITY	3	
TIROSINT	3	
TIROSINT-SOL	3	
<i>unithroid</i>	1	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL	0	

Drug Name	Drug Tier	Requirements / Limits
BOOSTRIX	0	
DAPTACEL	0	
INFANRIX	0	
KINRIX	0	
PEDIARIX	0	AL
PENTACEL	0	
QUADRACEL	0	
TDVAX	0	
TENIVAC	0	
TETANUS-DIPHTHERIA TOXOIDS TD	0	
VAXELIS	0	QL, AL

ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

ANTICHOLINERGIC COMBINATIONS

BELLADONNA ALKALOIDS-OPIMUM	3	
<i>chlordiazepoxide-clidinium</i>	1	
<i>pb-hyoscy-atropine-scopolamine (16.2 mg tab, 16.2 mg/5ml elixir)</i>	1	
<i>phenobarbital-belladonna alk (16.2 mg tab, 16.2 mg/5ml elixir)</i>	1	
<i>phenohydro (16.2 mg tab, 16.2 mg/5ml elixir)</i>	1	

ANTISPASMODICS

<i>dicyclomine hcl (10 mg cap, 10 mg/5ml solution, 20 mg tab)</i>	1	
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BELLADONNA ALKALOIDS

<i>ed-spaz</i>	1	
<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	
<i>hyoscyamine sulfate sl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>hyosyne</i>	1	
<i>nulev</i>	1	
<i>oscimin</i>	1	
<i>oscimin sr</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine (300 mg tab, 400 mg tab)</i>	1	
<i>cimetidine hcl</i>	1	AL
<i>famotidine 40 mg/5ml recon susp</i>	1	AL
MISC. ANTI-ULCER		
<i>sucralfate (1 gm tab, 1 gm/10ml suspension)</i>	1	
PROTON PUMP INHIBITORS		
<i>dexlansoprazole</i>	1	QL
<i>esomeprazole magnesium (2.5 mg packet, 5 mg packet, 10 mg packet, 20 mg packet, 40 mg packet)</i>	1	QL, AL
<i>esomeprazole magnesium (20 mg cap dr, 40 mg cap dr)</i>	1	QL
FIRST-LANSOPRAZOLE	2	AL
FIRST-OMEPRAZOLE	2	AL
FIRST-PANTOPRAZOLE	2	AL
<i>lansoprazole (15 mg cap dr, 30 mg cap dr)</i>	1	QL
<i>lansoprazole (15 mg tab dr disp, 30 mg tab dr disp)</i>	1	QL, AL
<i>omeprazole (10 mg cap dr, 20 mg cap dr, 40 mg cap dr)</i>	1	QL
OMEPRAZOLE+SYRSPEND SF ALKA	2	AL
<i>pantoprazole sodium (20 mg tab dr, 40 mg tab dr)</i>	1	QL
<i>pantoprazole sodium 40 mg packet</i>	1	QL, AL
<i>rabeprazole sodium 20 mg tab dr</i>	1	QL
QUATERNARY ANTICHOLINERGICS		
<i>glycopyrrolate (1 mg tab, 2 mg tab)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>methscopolamine bromide</i>	1	
ULCER ANTI-INFECTIVE W/ PROTON PUMP INHIBITORS		
<i>amoxicill-clarithro-lansopraz</i>	1	
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide er</i>	1	QL
<i>fesoterodine fumarate er</i>	1	QL
GELNIQUE	3	QL
<i>oxybutynin chloride 5 mg tab</i>	1	
<i>oxybutynin chloride 5 mg/5ml solution</i>	1	AL
<i>oxybutynin chloride er</i>	1	
<i>solifenacin succinate</i>	1	QL
<i>tolterodine tartrate</i>	1	
<i>tolterodine tartrate er</i>	1	
<i>trospium chloride</i>	1	
<i>trospium chloride er</i>	1	
VESICARE LS	3	AL
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
GEMTESA	3	QL
<i>mirabegron er</i>	1	QL
MYRBETRIQ (25 MG TAB ER 24H, 50 MG TAB ER 24H)	2	QL
MYRBETRIQ 8 MG/ML SRER	2	QL, AL
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
VACCINES		
BACTERIAL VACCINES		
ACTHIB	0	
BEXSERO	0	
CAPVAXIVE	0	
HIBERIX	0	
MENQUADFI	0	
MENVEO RECON SOLN	0	
MENVEO SOLUTION	0	
PEDVAX HIB	0	
PENBRAYA	0	AL
PENMENVY	0	AL
PNEUMOVAX 23	0	
PREVNAR 13	0	
PREVNAR 20	0	
TRUMENBA	0	
VAXNEUVANCE	0	
VIRAL VACCINE COMBINATIONS		
M-M-R II	0	
PRIORIX	0	
PROQUAD	0	
TWINRIX	0	
VIRAL VACCINES		
ABRYSSVO	0	QL
ACAM2000	0	
AFLURIA	0	
AFLURIA PRESERVATIVE FREE	0	
AFLURIA QUADRIVALENT (0.5 ML SUSP PRSYR, SUSPENSION)	0	

Drug Name	Drug Tier	Requirements / Limits
AREXVY	0	
AUDENZ	0	
COMIRNATY	0	
COMIRNATY 5-11 YEARS	0	
ENGERIX-B (10 MCG/0.5ML SUSP PRSYR, 20 MCG/ML SUSP PRSYR)	0	
ENGERIX-B 20 MCG/ML SUSPENSION	0	
FLUAD	0	
FLUAD QUADRIVALENT	0	
FLUARIX	0	
FLUARIX QUADRIVALENT	0	
FLUBLOK	0	
FLUBLOK QUADRIVALENT	0	
FLUCELVAX	0	
FLUCELVAX QUADRIVALENT	0	
FLULAVAL	0	
FLULAVAL QUADRIVALENT	0	
FLUMIST	0	
FLUMIST QUADRIVALENT	0	
FLUZONE	0	
FLUZONE HIGH-DOSE	0	
FLUZONE HIGH-DOSE QUADRIVALENT	0	
FLUZONE QUADRIVALENT (0.5 ML SUSP PRSYR, SUSPENSION)	0	
GARDASIL 9	0	
HAVRIX	0	
HEPLISAV-B	0	QL
IPOL	0	
JYNNEOS	0	

Drug Name	Drug Tier	Requirements / Limits
MNEXSPIKE	0	
MODERNA COVID-19 VAC (BOOSTER)	0	
MODERNA COVID-19 VAC 6M-11Y	0	
MRESVIA	0	
NOVAVAX COVID-19 VACCINE	0	
NUVAXOVID COVID-19 VACCINE	0	
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.3ML SUSPENSION	0	
PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.3ML SUSPENSION	0	
PFIZER-BIONT COVID-19 VAC-TRIS	0	
PREHEVBRIO	0	
RECOMBIVAX HB	0	
ROTARIX SUSPENSION	0	
ROTATEQ	0	
SHINGRIX	0	QL, AL
SPIKEVAX	0	
SPIKEVAX 6M-11Y	0	
VAQTA	0	
VARIVAX	0	
VAGINAL AND RELATED PRODUCTS		
IMIDAZOLE-RELATED ANTIFUNGALS		
GYNAZOLE-1	3	
<i>terconazole 0.4 % cream</i>	1	
<i>terconazole 0.8 % cream</i>	1	
<i>terconazole 80 mg suppos</i>	1	
MISCELLANEOUS VAGINAL COMBINATIONS		
FEM PH	2	
MISCELLANEOUS VAGINAL PRODUCTS		
INTRAROSA	3	QL

Drug Name	Drug Tier	Requirements / Limits
VAGINAL ANTI-INFECTIVES		
CLEOCIN 100 MG SUPPOS	3	
<i>clindamycin phosphate 2 % cream</i>	1	
CLINDESSE	3	
NUVESSA	3	
VANDAZOLE	3	
VAGINAL CONTRACEPTIVE PH MODULATOR - COMBINATIONS		
PHEXXI	0	
VAGINAL ESTROGENS		
<i>estradiol (0.01 % cream, 10 mcg tab)</i>	1	
ESTRING	2	QL
FEMRING	3	QL
IMVEXXY MAINTENANCE PACK	3	
IMVEXXY STARTER PACK	3	
PREMARIN 0.625 MG/GM CREAM	2	
<i>yuvafem</i>	1	
VAGINAL PROGESTINS		
CRINONE	3	
ENDOMETRIN	3	
FIRST-PROGESTERONE VGS 200 MG SUPPOS	2	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
<i>epinephrine (0.15 mg/0.3ml soln a-inj, 0.3 mg/0.3ml soln a-inj)</i>	1	QL
NEFFY	3	QL
<i>midodrine hcl</i>	1	
VITAMINS		
VITAMIN D		
<i>ergocalciferol 1.25 mg (50000 ut) cap</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>vitamin d (ergocalciferol) (1.25 mg (50000 ut) cap, 50000 unit cap)</i>	1	
VITAMIN K		
<i>phytonadione 5 mg tab</i>	1	

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ENBREL SURECLICK	12	erythromycin ethylsuccinate	100	FABHALTA	96
endocet	14	escitalopram oxalate	28	FABIOR	73
ENDOMETRIN	137	esgic	13	falmina	63
ENGERIX-B	135	eslicarbazepine acetate	24	famciclovir	57
enilloring	67	esomeprazole magnesium	132	famotidine	132
enoxaparin sodium	23	est estrogens-methyltest	89	FARXIGA	31
enpresse-28	69	est estrogens-methyltest ds	89	FASENRA	22
ENSACOVE	45	est estrogens-methyltest hs	89	FASENRA PEN	22
enskyce	63	estaryl	63	febuxostat	95
ENSPRYNG	112	estazolam	99	feirza 1.5/30	63
ENSTILAR	82	estradiol	90,137	feirza 1/20	64
entacapone	51	estradiol valerate	90	felbamate	26
entecavir	56	estradiol-norethindrone acet	89	felodipine er	58
ENTRESTO	59	estrateg f.s.	89	FEM PH	136
ENTYVIO PEN	92	estrateg h.s.	89	FEMLYV	64
enulose	93			FEMRING	137
ENVARUS XR	112			fenofibrate	36
EOHILIA	70			fenofibrate micronized	36
				fenofibric acid	36

fentanyl.....	13	FLOTREX.....	114	fondaparinux sodium.....	23
fentanyl citrate.....	13	FLUAD.....	135	formoterol fumarate.....	21
FERRIPROX.....	33	FLUAD QUADRIVALENT.....	135	FOSAMAX PLUS D.....	84
FERRIPROX TWICE-A-DAY.....	33	FLUARIX.....	135	fosamprenavir calcium.....	54
fesoterodine fumarate er.....	133	FLUARIX QUADRIVALENT.....	135	fosfomycin tromethamine.....	17
FETZIMA.....	29	FLUBLOK.....	135	fosinopril sodium.....	37
FETZIMA TITRATION.....	29	FLUBLOK QUADRIVALENT.....	135	fosinopril sodium-hctz.....	37
fexmid.....	117	FLUCELVAX.....	135	FOSRENOL.....	93
FIASP.....	30	FLUCELVAX QUADRIVALENT.....	135	FRAGMIN.....	23
FIASP FLEXTOUCH.....	30	fluconazole.....	34	FREESTYLE LIBRE 14 DAY READER.....	101
FIASP PENFILL.....	30	flucytosine.....	34	FREESTYLE LIBRE 14 DAY SENSOR.....	101
FIASP PUMPCART.....	30	fludrocortisone acetate.....	70	FREESTYLE LIBRE 2 PLUS SENSOR.....	101
fidaxomicin.....	101	FLULAVAL.....	135	FREESTYLE LIBRE 2 READER.....	101
FILSPARI.....	95	FLULAVAL QUADRIVALENT.....	135	FREESTYLE LIBRE 2 SENSOR.....	101
FILSUVEZ.....	82	FLUMIST.....	135	FREESTYLE LIBRE 3 PLUS SENSOR.....	101
FILTER AIR PP.....	105	FLUMIST QUADRIVALENT.....	135	FREESTYLE LIBRE 3 READER.....	101
FINACEA.....	81	flunisolide.....	118	FREESTYLE LIBRE 3 SENSOR.....	101
finasteride.....	94	fluocinolone acetonide.....	78,123	FREESTYLE LIBRE READER.....	101
fingolimod hcl.....	128	fluocinolone acetonide body.....	78	frovatriptan succinate.....	109
FINTEPLA.....	24	fluocinolone acetonide scalp.....	78	FRUZAQLA.....	49
finzala.....	64	fluocinonide.....	78	FULL KIT NEBULIZER SET.....	105
FIRDAPSE.....	40	fluocinonide emulsified base.....	78	FUROSCIX.....	83
FIRST-LANSOPRAZOLE.....	132	fluorometholone.....	122	furosemide.....	83
FIRST-OMEPRAZOLE.....	132	fluorouracil.....	74	FUZEON.....	54
FIRST-PANTOPRAZOLE.....	132	fluoxetine hcl.....	28	fyavolv.....	89
FIRST-PROGESTERONE VGS.....	137	fluphenazine hcl.....	52	FYCOMPA.....	24
flac.....	123	flurbiprofen.....	11		
FLAREX.....	122	fluticasone propionate.....	78,118	G	
flavoxate hcl.....	133	fluticasone-salmeterol.....	20	gabapentin.....	25
flecainide acetate.....	20	fluvastatin sodium.....	36	gabapentin (once-daily).....	127
FLEXICHAMBER.....	108	fluvastatin sodium er.....	36	GALAFOLD.....	85
FLEXICHAMBER ADULT		fluvoxamine maleate.....	28	galantamine hydrobromide.....	125
MASK/SMALL.....	108	fluvoxamine maleate er.....	28	galantamine hydrobromide er.....	125
FLEXICHAMBER CHILD		FLUZONE.....	135	galbriela.....	64
MASK/LARGE.....	108	FLUZONE HIGH-DOSE.....	135	gallifrey.....	124
FLEXICHAMBER CHILD		FLUZONE HIGH-DOSE		GALZIN.....	110
MASK/SMALL.....	108	QUADRIVALENT.....	135	GARDASIL 9.....	135
FLOLIPID.....	36	FLUZONE QUADRIVALENT.....	135	gatifloxacin.....	120
FLORAFOL FE PEDIATRIC.....	113	FML FORTE.....	122	GATTEX.....	91
FLORAFOL PEDIATRIC.....	114	folic acid.....	98	gavilyte-g.....	99
FLORIVA.....	110	FOLIVANE-OB.....	114	gavilyte-n with flavor pack.....	99

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GELFILM.....	122	hailey 1.5/30.....	64	hydromorphone hcl er.....	13
GELNIQUE.....	133	hailey 24 fe.....	64	hydroxychloroquine sulfate.....	39
gemfibrozil.....	36	hailey fe 1.5/30.....	64	hydroxyurea.....	47
gemmily.....	64	hailey fe 1/20.....	64	hydroxyzine hcl.....	19
GEMTESA.....	133	halcinonide.....	78	hydroxyzine pamoate.....	19
generlac.....	93	halobetasol propionate.....	78	HYFTOR.....	80
gengraf.....	111	haloette.....	67	HYMPAVZI.....	96
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GILENYA.....	128	HAVRIX.....	135	HYPERSAL.....	71
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glatopa.....	126	hemmorex-hc.....	16	I	
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glimepiride.....	32	HETLIOZ LQ.....	99	IBRANCE.....	47
glipizide.....	32	HIBERIX.....	134	IBTROZI.....	46
glipizide er.....	32	HORIZANT.....	127	ibu.....	11
glipizide xl.....	32	HUMATROPE.....	85	ibuprofen.....	11
glipizide-metformin hcl.....	32	HUMULIN R U-500		icatibant acetate.....	96
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GRASTEK.....	8	hydrocodone-ibuprofen.....	13	imipramine pamoate.....	29
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griseofulvin ultramicrosize.....	34	hydrocortisone.....	15,70,78	imiquimod pump.....	79
guanfacine hcl.....	38	hydrocortisone (perianal).....	16	IMPAVIDO.....	16
guanfacine hcl er.....	7	hydrocortisone acetate.....	16	IMVEXXY MAINTENANCE PACK.....	137
GVOKE HYPOPEN 1-PACK.....	30	hydrocortisone butyrate.....	78	IMVEXXY STARTER PACK.....	137
GVOKE HYPOPEN 2-PACK.....	30	hydrocortisone sod suc (pf).....	70	IN-CHECK DIAL FLOW TRAINER.....	105
GVOKE KIT.....	30	hydrocortisone valerate.....	78	IN-CHECK INSPIRATORY FLOW	
GVOKE PFS.....	30	hydrocortisone-acetic acid.....	123	MTR.....	105
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incassia.....	68	irbesartan-hydrochlorothiazide..	38	JYLAMVO.....	41
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indomethacin.....	11	isoniazid.....	40	K-PHOS NO 2.....	95
indomethacin er.....	11	isosorb dinitrate-hydralazine...	59	k-prime.....	110
INFANRIX.....	131	isosorbide dinitrate.....	18	kaitlib fe.....	64
INGREZZA.....	126	isosorbide mononitrate.....	18	kalliga.....	64
INLYTA.....	49	isosorbide mononitrate er.....	18	KALYDECO.....	128
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HUMALOG.....	102	ITOVEBI.....	48	kelnor 1/50.....	64
INPEN 100-BLUE-NOVOLOG-		itraconazole.....	34	keralyt.....	79
FIASP.....	102	ivabradine hcl.....	61	KERENDIA.....	87
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HUMALOG.....	102	IWILFIN.....	48	ketoconazole.....	34,79
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HUMALOG.....	103	jaimiess.....	68	KINERET.....	10
INPEN 100-PINK-NOVOLOG-		JAKAFI.....	48	KINRIX.....	131
FIASP.....	103	jantoven.....	23	kionex.....	112
INQOVI.....	46	jasmiel.....	64	KISQALI (200 MG DOSE).....	47
INREBIC.....	48	JATENZO.....	15	KISQALI (400 MG DOSE).....	47
INSPIREASE.....	108	javygtor.....	87	KISQALI (600 MG DOSE).....	47
INSULIN SYRINGE-NEEDLE U-		JAYPIRCA.....	43	KITABIS PAK.....	9
100.....	103	jencycla.....	68	KLARITY-A.....	120
INTELENCE.....	55	JESDUVROQ.....	98	klayesta.....	74
INTRAROSA.....	136	jinteli.....	89	KLISYRI (250 MG).....	80
introvale.....	68	JOENJA.....	111	KLISYRI (350 MG).....	80
INVELTYS.....	122	jolessa.....	68	klor-con.....	110
iodoquimez-hc.....	74	joyeaux.....	64	klor-con 10.....	110
iodoquinol-hc-aloe polysacch...	74	JUBLIA.....	79	klor-con m10.....	110
iodoquinol-hydrocortisone-aloe	74	juleber.....	64	klor-con m15.....	110
IOPIDINE.....	121	JULUCA.....	53	klor-con m20.....	110
IPOL.....	135	junel 1.5/30.....	64	klor-con/ef.....	110
ipratropium bromide.....	21,117	junel 1/20.....	64	KLOXXADO.....	33
ipratropium-albuterol.....	20	junel fe 1.5/30.....	64	KOSELUGO.....	44
IQIRVO.....	93	junel fe 1/20.....	64	kourzeq.....	113
irbesartan.....	38	junel fe 24.....	64	KRAZATI.....	44

kristalose.....	100	LENVIMA (14 MG DAILY DOSE)...	49	liothyronine sodium.....	130
kurvelo.....	64	LENVIMA (18 MG DAILY DOSE)...	49	LIQREV.....	60
KYZATREX.....	15	LENVIMA (20 MG DAILY DOSE)...	49	lisdexamfetamine dimesylate.....	7
L		LENVIMA (24 MG DAILY DOSE)...	49	lisinopril.....	37
		LENVIMA (4 MG DAILY DOSE)...	49	lisinopril-hydrochlorothiazide.....	37
		LENVIMA (8 MG DAILY DOSE)...	49	LITETOUCH MASK LARGE.....	105
		lessina.....	65	LITETOUCH MASK MEDIUM.....	105
labetalol hcl.....	57	letrozole.....	47	LITETOUCH MASK SMALL.....	105
lacosamide.....	25	leucovorin calcium.....	47	LITFULO.....	73
lactulose.....	100	LEUKERAN.....	48	lithium.....	51
lactulose encephalopathy.....	93	leuprolide acetate.....	48	lithium carbonate.....	51
LAMICTAL.....	25	levabuterol hcl.....	21	lithium carbonate er.....	51
LAMICTAL ODT.....	25	levetiracetam.....	25	LITHOBID.....	51
LAMICTAL STARTER.....	25	levetiracetam er.....	25	LITHOSTAT.....	95
LAMICTAL XR.....	25	levo-t.....	130	LIVDELZI.....	93
lamivudine.....	55,56	levocarnitine.....	84	LIVMARLI.....	92
lamivudine-zidovudine.....	53	levocarnitine sf.....	84	LIVTENCITY.....	56
lamotrigine.....	25	levofloxacin.....	90	LO LOESTRIN FE.....	62
lamotrigine er.....	25	levonest.....	69	lo-zumandimine.....	65
lamotrigine starter kit-blue.....	25	levonorg-eth estrad triphasic.....	69	loestrin 1.5/30 (21).....	65
lamotrigine starter kit-green.....	25	levonorgest-eth est & eth est.....	68	loestrin 1/20 (21).....	65
lamotrigine starter kit-orange.....	25	levonorgest-eth estrad 91-day.....	68	loestrin fe 1.5/30.....	65
LAMPIT.....	17	levonorgest-eth estradiol-iron.....	65	loestrin fe 1/20.....	65
LANOXIN.....	59	levonorgestrel-ethinyl estrad.....	65,67	lojaimiess.....	68
lansoprazole.....	132	levora 0.15/30 (28).....	65	LOKELMA.....	112
lanthanum carbonate.....	93	levorphanol tartrate.....	13	LONSURF.....	46
LANTUS.....	30	levothyroxine sodium.....	130	lopinavir-ritonavir.....	53
LANTUS SOLOSTAR.....	31	levoxyl.....	130	lorazepam.....	19
lapatinib ditosylate.....	45	LEVULAN KERASTICK.....	81	lorazepam intensol.....	19
larin 1.5/30.....	64	LIBERVANT.....	24	LORBRENA.....	42
larin 1/20.....	64	lidocaine.....	80	loryna.....	65
larin 24 fe.....	64	lidocaine hcl.....	80	lorzone.....	117
larin fe 1.5/30.....	64	lidocaine hcl urethral/mucosal.....	80	losartan potassium.....	38
larin fe 1/20.....	64	lidocaine viscous hcl.....	113	losartan potassium-hctz.....	38
latanoprost.....	123	lidocaine-prilocaine.....	82	LOTEMAX.....	122
layolis fe.....	65	lidocan.....	80	LOTEMAX SM.....	122
LAZCLUZE.....	43	lidopin.....	80	loteprednol etabonate.....	122
LDO PLUS.....	80	LIKMEZ.....	16	lovastatin.....	36
leena.....	69	linezolid.....	17	low-ogestrel.....	65
leflunomide.....	12	LINZESS.....	91	loxapine succinate.....	52
lenalidomide.....	111	liomny.....	130	lubiprostone.....	91
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luizza 1/20.....	65	meclizine hcl.....	34	methylergonovine maleate.....	123
LUMAKRAS.....	44	MEDROL.....	70	methylphenidate.....	8
LUMIGAN.....	123	medroxyprogesterone acetate.....	124	methylphenidate hcl.....	8
LUMRYZ.....	124	mefenamic acid.....	11	methylphenidate hcl er.....	8
LUMRYZ STARTER PACK.....	125	mefloquine hcl.....	39	methylphenidate hcl er (cd).....	8
LUPKYNIS.....	111	megestrol acetate.....	48,124	methylphenidate hcl er (la).....	8
lurasidone hcl.....	51	MEKINIST.....	44	methylphenidate hcl er (osm).....	8
lutea.....	65	MEKTOVI.....	44	methylphenidate hcl er (xr).....	8
lyleq.....	68	meleya.....	68	methylprednisolone.....	70
lyllana.....	90	meloxicam.....	11	methyltestosterone.....	15
LYNPARZA.....	48	memantine hcl.....	127	metoclopramide hcl.....	91
LYSODREN.....	40	memantine hcl er.....	127	metolazone.....	84
LYTGOBI (12 MG DAILY DOSE).....	43	memantine hcl-donepezil hcl.....	125	metoprolol succinate er.....	57
LYTGOBI (16 MG DAILY DOSE).....	43	MENOSTAR.....	90	metoprolol tartrate.....	58
LYTGOBI (20 MG DAILY DOSE).....	43	MENQUADFI.....	134	metoprolol-hydrochlorothiazide.....	39
lyza.....	68	MENVEO.....	134	metronidazole.....	16,81
M		meperidine hcl.....	13	metyrosine.....	37
		meprobamate.....	19	mexiletine hcl.....	19
		mercaptopurine.....	41	mibelas 24 fe.....	65
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SYR.....	103	mesalamine er.....	92	microgestin 1/20.....	65
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maraviroc.....	54	metaxalone.....	117	microgestin fe 1/20.....	65
marlissa.....	65	metformin hcl.....	30	MICROSPACER.....	108
MARPLAN.....	28	metformin hcl er.....	30	midodrine hcl.....	137
MATULANE.....	47	methadone hcl.....	13	mifepristone.....	31
matzim la.....	58	methadone hcl intensol.....	14	miglustat.....	97
MAVENCLAD (10 TABS).....	126	methadose.....	14	mili.....	65
MAVENCLAD (4 TABS).....	126	methazolamide.....	83	mimvey.....	89
MAVENCLAD (5 TABS).....	126	methenamine hippurate.....	17	minitran.....	18
MAVENCLAD (6 TABS).....	126	methenamine mandelate.....	17	minocycline hcl.....	129
MAVENCLAD (7 TABS).....	126	methergine.....	123	minoxidil.....	39
MAVENCLAD (8 TABS).....	126	methimazole.....	130	minzoya.....	65
MAVENCLAD (9 TABS).....	126	methocarbamol.....	117	mirabegron er.....	133
MAVYRET.....	56	methotrexate sodium.....	41	mirtazapine.....	27
MAXIDEX.....	122	methotrexate sodium (pf).....	41	misoprostol.....	133
MAYZENT.....	128	methscopolamine bromide.....	133	MNEXSPIKE.....	136
MAYZENT STARTER PACK.....	128	methsuximide.....	27	modafinil.....	8
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MODERNA COVID-19 VAC (BOOSTER).....	136	naftifine hcl.....	74	nevirapine er.....	55
MODERNA COVID-19 VAC 6M-11Y.....	136	naloxone hcl.....	33	NEXLETOL.....	35
moexipril hcl.....	37	naltrexone hcl.....	33	NEXLIZET.....	35
mometasone furoate.....	78,118	NAMZARIC.....	125	NEXTSTELLIS.....	65
mondoxylene nl.....	130	naproxen.....	11	NGENLA.....	85
mono-lynyah.....	65	naproxen dr.....	11	niacin er (antihyperlipidemic).....	36
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MONOJECT ULTRA COMFORT SYRINGE.....	103	naproxen sodium er.....	11	NICOTROL.....	128
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morphine sulfate.....	14	NATACYN.....	120	nifedipine er.....	59
morphine sulfate (concentrate).....	14	NATALVIT.....	114	nifedipine er osmotic release.....	59
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MOVANTIK.....	93	neбиволol hcl.....	58	nilutamide.....	41
moxifloxacin hcl.....	90,120	NEBULIZER AIR TUBE/PLUGS.....	105	nimodipine.....	59
MRESVIA.....	136	NEBULIZER MASK ADULT.....	105	NINLARO.....	45
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MULTAQ.....	20	nebusal.....	71	nitazoxanide.....	17
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mupirocin.....	74	NEMLUVIO.....	79	nitrofurantoin.....	17
MYCAPSSA.....	88	neo-polycin.....	120	nitrofurantoin macrocrystal.....	17
mycophenolate mofetil.....	111	neo-polycin hc.....	121	nitrofurantoin monohyd macro.....	18
mycophenolate sodium.....	112	NEO-SYNALAR.....	74	nitroglycerin.....	15,19
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		NEORAL.....	111	norethin-eth estradiol-fe.....	66
		NERLYNX.....	45	norethindron-ethinyl estrad-fe.....	69
		NESTABS.....	114	norethindrone.....	68
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NORLIQVA	59	nystop	74	OMNIPOD 5 G6 INTRO (GEN 5) . .	101
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NUCALA	22	olanzapine-fluoxetine hcl	128	ondansetron hcl	33
NUCORT	78	olmesartan medoxomil	38	ONE FLOW SPIROMETER	105
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ORLISSA.....	85	PALFORZIA (300 MG TITRATION)..	9	peg-3350/electrolytes/ascorbat..	100
ORKAMBI.....	129	PALFORZIA (40 MG DAILY DOSE)..	9	peg-kcl-nacl-nasulf-na asc-c....	100
ORLADEYO.....	96	PALFORZIA (6 MG DAILY DOSE)...	9	PEG-PREP.....	100
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WINDMILL TRAINER	106	XULTOPHY	31	zolmitriptan	109
WINLEVI	73	XURIDEN	86	zolpidem tartrate	99
WINREVAIR	60	XYREM	125	zolpidem tartrate er	99
wixela inhub	21			ZOMACTON	86
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		yargesa	97	zonisamide	26
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XADAGO	50	YONSA	40	ZORYVE	81
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XARELTO	23			ZTALMY	26
XARELTO STARTER PACK	23	Z		ZUBSOLV	15
XATMEP	41	zafemy	67	zumandimine	67
XCOPRI	26	zafirlukast	22	ZURNAL	33
XCOPRI (250 MG DAILY DOSE) . .	26	zaleplon	99	ZYCLARA PUMP	79
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XELJANZ	10	ZAVZPRET	108	ZYFLO	20
XELJANZ XR	10	ZEJULA	48	ZYKADIA	42
xelria fe	67	ZELAPAR	50	ZYLET	122
XERESE	76	ZELBORAF	42	ZYMFENTRA (1 PEN)	94
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XIGDUO XR	31	ZEMBRACE SYMTOUCH	109		
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XOFLUZA (40 MG DOSE)	57	ZENPEP	83		
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XPOVIO (60 MG ONCE WEEKLY) .	46	zileuton er	20		
XPOVIO (60 MG TWICE WEEKLY) .	46	ZILXI	81		
XPOVIO (80 MG ONCE WEEKLY) .	46	ZIMHI	33		
XPOVIO (80 MG TWICE WEEKLY) .	46	ziprasidone hcl	51		
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