OSF MedAdvantage
Administered by Health Alliance™

OSF MedAdvantage

2021 Formulary

(List of Covered Drugs)

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

This formulary was updated on December 1, 2021. For more recent information or other questions, please contact OSF MedAdvantage Member Services at 1-877-933-8480 or, for TTY users, 711, 8 a.m. to 8 p.m., local time, 7 days a week. From April 1 – September 30 voicemail will be used on weekends and holidays, or visit HealthAllianceMedicare.org.

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we,” “us” or “our,” it means OSF MedAdvantage. When it refers to “plan” or “our plan,” it means OSF MedAdvantage.

This document includes a list of the drugs (formulary) for our plan which is current as of December 1, 2021. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network and/or copayments/coinsurance may change on January 1, 2022, and from time to time during the year.

ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call 1-877-933-2564 (TTY: 711).

ATENCIÓN: Si habla Español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame 1-877-933-2564 (TTY: 711).

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OSF MedAdvantage Part D HMO and POS Formulary 00021400 Version 18

What is the OSF MedAdvantage Formulary?

A formulary is a list of covered drugs selected by OSF MedAdvantage in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. OSF MedAdvantage will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a OSF MedAdvantage network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the Formulary (drug list) change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow Medicare rules in making these changes.

Changes that can affect you this year:

In the below cases, you will be affected by coverage changes during the year:

- **New generic drugs.** We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.
  - If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information on page iii entitled "How do I request an exception to the OSF MedAdvantage Formulary?"

- **Drugs removed from the market.** If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.

- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug that is not new to market to replace a brand name drug currently on the formulary or add new restrictions to the brand name drug or move it to a different cost-sharing tier. Or we may make changes based on new clinical guidelines. If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.
  - If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled "How do I request an exception to the OSF MedAdvantage Formulary?"

Changes that will not affect you if you are currently taking the drug.

Generally, if you are taking a drug on our 2021 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2021 coverage year except as described above. This means these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year.

The enclosed formulary is current as of December 1, 2021. To get updated information about the drugs covered by OSF MedAdvantage, please contact us. Our contact information appears on the front and back cover pages.If there are negative changes made to the printed drug list within the covered year, you may be notified by mailidentifying the changes. Drug lists located on our website are reviewed and updated on a monthly basis.

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "Cardiovascular Agents." If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the index that begins on page 122. The index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the index. Look in the index and find your drug. Next to your drug, you will 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.

What are generic drugs?

OSF MedAdvantage covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** OSF MedAdvantage requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from OSF MedAdvantage before you fill your prescriptions. If you don't get approval, OSF MedAdvantage may not cover the drug.

- **Quantity Limits:** For certain drugs, OSF MedAdvantage limits the amount of the drug that OSF MedAdvantage will cover. For example, OSF MedAdvantage provides 30 tablets per prescription for citalopram-hydrobromide. This may be in addition to a standard one-month or three-month supply.

- **Step Therapy:** In some cases, OSF MedAdvantage requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, OSF MedAdvantage may not cover Drug B unless you try Drug A first. If Drug A does not work for you, OSF MedAdvantage will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online a document that explains our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask OSF MedAdvantage to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the OSF MedAdvantage formulary?" on page iii for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that OSF MedAdvantage does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by OSF MedAdvantage. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by OSF MedAdvantage.

- You can ask OSF MedAdvantage to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the OSF MedAdvantage formulary?

You can ask OSF MedAdvantage to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.

- You can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the specialty tier. If approved, this would lower the amount you must pay for your drug.

- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, OSF MedAdvantage limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, OSF MedAdvantage will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug or additional utilization restrictions, would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary, or utilization restriction exception. **When you request a formulary or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What do I do before I can talk to my doctor about changing my drugs or requesting an exception?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover, or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

OSF MedAdvantage provides transition fills for members who have a level-of-care change from one treatment setting to another. Please visit our website at HealthAllianceMedicare.org for further details.

For more information

For more detailed information about your OSF MedAdvantage prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about OSF MedAdvantage, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit http://www.medicare.gov.

OSF MedAdvantage Formulary

The formulary that begins on page 1 provides coverage information about the drugs covered by OSF MedAdvantage. If you have trouble finding your drug in the list, turn to the index that begins on page 122.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., TRADJENTA) and generic drugs are listed in lower-case italics (e.g., *atorvastatin*).

The information in the Requirements/Limits column tells you if OSF MedAdvantage has any special requirements for coverage of your drug.

Drug Name	Drug Tier	Requirements/Limits
Opthalmic Agents		
Opthalmic Agents		
CYSTARAN SOLN 0.44%	5	PA, QL: 60 ML per 28 days

B/D This prescription drug has a Part B versus D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

CB This prescription drug has a capped benefit limit.

EA Each.

HI Home Infusion. This prescription drug may be covered under our medical benefit. For more information, call Member Services at 1-877-933-8480, seven days a week, 8 a.m. to 8 p.m. TTY/TDD users should call 711.

LA Limited Availability. This prescription may be available only at certain pharmacies. For more information, consult your Pharmacy Directory or call Member Services at 1-877-933-8480, seven days a week, 8 a.m. to 8 p.m. TTY/TDD users should call 711.

MO Mail-Order Drug. This prescription drug is available through a mail-order service.

PA Prior Authorization. OSF MedAdvantage requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from OSF MedAdvantage before you fill your prescriptions. If you don't get approval, OSF MedAdvantage may not cover the drug. We must follow Medicare rules in making these changes.

QL Quantity Limit. For certain drugs, OSF MedAdvantage limits the amount of the drug that OSF MedAdvantage will cover. For example, OSF MedAdvantage provides 30 tablets per prescription for citalopram hydrobromide. This may be in addition to a standard one-month or three-month supply.

ST Step Therapy. In some cases, OSF MedAdvantage requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, OSF MedAdvantage may not cover Drug B unless you try Drug A first. If Drug A does not work for you, OSF MedAdvantage will then cover Drug B.

Please Note: All drugs except Tier 5 Specialty are available by mail-order.

Brand name drugs are listed in parentheses after the generic. This does not mean the brand name is covered. Please refer to the actual listing for that drug to determine coverage.

Drug Name	Drug Tier	Requirements/Limits
Analgesics		
Nonsteroidal Anti-inflammatory Drugs		
celecoxib caps 100mg	2	
celecoxib caps 200mg	2	
celecoxib caps 400mg	2	
celecoxib caps 50mg	2	
diclofenac potassium tabs 50mg	2	
diclofenac sodium dr tbec 25mg	1	
diclofenac sodium dr tbec 50mg	1	
diclofenac sodium dr tbec 75mg	1	
diclofenac sodium er tb24 100mg	1	
diclofenac sodium/misoprostol tbec 50mg; 200mcg	2	
diclofenac sodium/misoprostol tbec 75mg; 200mcg	2	
diclofenac sodium gel 1%	2	
diclofenac sodium gel 3%	4	
diflunisal tabs 500mg	2	
ec-naproxen tbec 375mg	1	
ec-naproxen tbec 500mg	1	
etodolac er tb24 400mg	2	
etodolac er tb24 500mg	2	
etodolac er tb24 600mg	2	
etodolac caps 200mg	2	
etodolac caps 300mg	2	
etodolac tabs 400mg	2	
etodolac tabs 500mg	2	
fenoprofen calcium caps 400mg	1	
fenoprofen calcium tabs 600mg	1	
flurbiprofen tabs 100mg	1	
flurbiprofen tabs 50mg	1	
ibuprofen/famotidine tabs 26.6mg; 800mg	2	
ibuprofen susp 100mg/5ml	1	
ibuprofen tabs 400mg	1	
ibuprofen tabs 600mg	1	
ibuprofen tabs 800mg	1	
ibu tabs 400mg	1	
ibu tabs 600mg	1	
ibu tabs 800mg	1	
ketoprofen er cp24 200mg	2	
ketoprofen caps 25mg	2	
ketoprofen caps 50mg	2	
ketoprofen caps 75mg	2	
ketorolac tromethamine inj 15mg/ml	2	
ketorolac tromethamine inj 30mg/ml	2	
ketorolac tromethamine inj 30mg/ml	2	
meclofenamate sodium caps 100mg	1	
meclofenamate sodium caps 50mg	1	

Drug Name	Drug Tier	Requirements/Limits
mefenamic acid caps 250mg	2	
meloxicam tabs 15mg	1	
meloxicam tabs 7.5mg	1	
nabumetone tabs 500mg	1	
nabumetone tabs 750mg	1	
naproxen sodium tabs 275mg	1	
naproxen sodium tabs 550mg	1	
naproxen susp 125mg/5ml	1	
naproxen tabs 250mg	1	
naproxen tabs 375mg	1	
naproxen tabs 500mg	1	
naproxen tbec 375mg	1	
naproxen tbec 500mg	1	
oxaprozin tabs 600mg	2	
piroxicam caps 10mg	2	
piroxicam caps 20mg	2	
salsalate tabs 500mg	2	
salsalate tabs 750mg	2	
sulindac tabs 150mg	1	
sulindac tabs 200mg	1	
tolmetin sodium caps 400mg	1	
tolmetin sodium tabs 600mg	1	
Opioid Analgesics, Long-acting		
BELBUCA FILM 150MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 300MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 450MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 600MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 750MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 75MCG	4	QL (60 EA per 30 days)
BELBUCA FILM 900MCG	4	QL (60 EA per 30 days)
buprenorphine buccal film 150mcg	2	QL (60 EA per 30 days)
buprenorphine buccal film 300mcg	2	QL (60 EA per 30 days)
buprenorphine buccal film 450mcg	2	QL (60 EA per 30 days)
buprenorphine buccal film 600mcg	2	QL (60 EA per 30 days)
buprenorphine buccal film 750mcg	2	QL (60 EA per 30 days)
buprenorphine buccal film 75mcg	2	QL (60 EA per 30 days)
buprenorphine buccal film 900mcg	2	QL (60 EA per 30 days)
buprenorphine ptwk 10mcg/hr	2	
buprenorphine ptwk 15mcg/hr	2	
buprenorphine ptwk 20mcg/hr	2	
buprenorphine ptwk 5mcg/hr	2	
buprenorphine ptwk 7.5mcg/hr	2	
BUTRANS PTWK 7.5MCG/HR	3	
fentanyl pt72 100mcg/hr	2	QL (20 EA per 30 days)
fentanyl pt72 12mcg/hr	2	QL (10 EA per 30 days)
fentanyl pt72 25mcg/hr	2	QL (10 EA per 30 days)
fentanyl pt72 37.5mcg/hr	2	QL (10 EA per 30 days)
fentanyl pt72 50mcg/hr	2	QL (10 EA per 30 days)
fentanyl pt72 62.5mcg/hr	2	QL (10 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
fentanyl pt72 75mcg/hr	2	QL (10 EA per 30 days)
fentanyl pt72 87.5mcg/hr	2	QL (10 EA per 30 days)
levorphanol tartrate tabs 2mg	5	QL (180 EA per 30 days)
methadone hcl inj 10mg/ml	2	
methadone hcl soln 10mg/5ml	2	QL (1800 ML per 30 days)
methadone hcl soln 5mg/5ml	2	QL (1800 ML per 30 days)
methadone hcl tabs 10mg	2	QL (360 EA per 30 days)
methadone hcl tabs 5mg	2	QL (360 EA per 30 days)
methadone hydrochloride intensol conc 10mg/ml	2	QL (1800 ML per 30 days)
methadone hydrochloride conc 10mg/ml	2	QL (1800 ML per 30 days)
methadose sugar-free conc 10mg/ml	2	QL (1800 ML per 30 days)
methadose conc 10mg/ml	2	QL (1800 ML per 30 days)
morphine sulfate er cp24 100mg	2	QL (60 EA per 30 days)
morphine sulfate er cp24 10mg	2	QL (60 EA per 30 days)
morphine sulfate er cp24 20mg	2	QL (60 EA per 30 days)
morphine sulfate er cp24 30mg	2	QL (60 EA per 30 days)
morphine sulfate er cp24 40mg	2	QL (60 EA per 30 days)
morphine sulfate er cp24 50mg	2	QL (60 EA per 30 days)
morphine sulfate er cp24 60mg	2	QL (60 EA per 30 days)
morphine sulfate er cp24 80mg	2	QL (60 EA per 30 days)
morphine sulfate er tbcr 100mg	2	QL (120 EA per 30 days)
morphine sulfate er tbcr 15mg	2	QL (120 EA per 30 days)
morphine sulfate er tbcr 200mg	2	QL (120 EA per 30 days)
morphine sulfate er tbcr 30mg	2	QL (120 EA per 30 days)
morphine sulfate er tbcr 60mg	2	QL (120 EA per 30 days)
morphine sulfate inj 10mg/0.7ml	2	
NUCYNTA ER TB12 100MG	3	
NUCYNTA ER TB12 150MG	3	
NUCYNTA ER TB12 200MG	3	
NUCYNTA ER TB12 250MG	3	
NUCYNTA ER TB12 50MG	3	
oxycodone hcl er t12a 10mg	2	QL (60 EA per 30 days)
oxycodone hcl er t12a 15mg	2	QL (60 EA per 30 days)
oxycodone hcl er t12a 20mg	2	QL (60 EA per 30 days)
oxycodone hcl er t12a 30mg	2	QL (60 EA per 30 days)
oxycodone hcl er t12a 40mg	2	QL (60 EA per 30 days)
oxycodone hcl er t12a 60mg	2	QL (60 EA per 30 days)
oxycodone hcl er t12a 80mg	2	QL (60 EA per 30 days)
OXYCONTIN T12A 10MG	4	QL (60 EA per 30 days)
OXYCONTIN T12A 15MG	4	QL (60 EA per 30 days)
OXYCONTIN T12A 20MG	4	QL (60 EA per 30 days)
OXYCONTIN T12A 30MG	4	QL (60 EA per 30 days)
OXYCONTIN T12A 40MG	4	QL (60 EA per 30 days)
OXYCONTIN T12A 60MG	4	QL (60 EA per 30 days)
OXYCONTIN T12A 80MG	4	QL (60 EA per 30 days)
oxymorphone hydrochloride er tb12 10mg	2	QL (60 EA per 30 days)
oxymorphone hydrochloride er tb12 15mg	2	QL (60 EA per 30 days)
oxymorphone hydrochloride er tb12 20mg	2	QL (60 EA per 30 days)
oxymorphone hydrochloride er tb12 30mg	2	QL (120 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
oxymorphone hydrochloride er tb12 40mg	2	QL (120 EA per 30 days)
oxymorphone hydrochloride er tb12 5mg	2	QL (60 EA per 30 days)
oxymorphone hydrochloride er tb12 7.5mg	2	QL (60 EA per 30 days)
oxymorphone hydrochlorideer tb12 40mg	2	QL (120 EA per 30 days)
tramadol hcl er cp24 100mg	2	QL (60 EA per 30 days) ST
tramadol hcl er cp24 200mg	2	QL (60 EA per 30 days) ST
tramadol hcl er cp24 300mg	2	QL (60 EA per 30 days) ST
tramadol hcl er tb24 100mg	2	QL (30 EA per 30 days) ST
tramadol hcl er tb24 100mg	2	QL (30 EA per 30 days) ST
tramadol hcl er tb24 200mg	2	QL (30 EA per 30 days) ST
tramadol hcl er tb24 200mg	2	QL (30 EA per 30 days) ST
tramadol hcl er tb24 300mg	2	QL (30 EA per 30 days) ST
tramadol hcl er tb24 300mg	2	QL (30 EA per 30 days) ST
Opioid Analgesics, Short-acting		
acetaminophen/caffeine/dihydrocodeine bitartrate tabs 325mg; 30mg; 16mg	2	QL (300 EA per 30 days)
acetaminophen/caffeine/dihydrocodeine tabs 325mg; 30mg; 16mg	2	QL (300 EA per 30 days)
acetaminophen/codeine phosphate tabs 300mg; 15mg	2	QL (360 EA per 30 days)
acetaminophen/codeine phosphate tabs 300mg; 30mg	2	QL (360 EA per 30 days)
acetaminophen/codeine phosphate tabs 300mg; 60mg	2	QL (180 EA per 30 days)
acetaminophen/codeine soln 120mg/5ml; 12mg/5ml	2	QL (4500 ML per 30 days)
acetaminophen/codeine tabs 300mg; 15mg	2	QL (360 EA per 30 days)
acetaminophen/codeine tabs 300mg; 30mg	2	QL (360 EA per 30 days)
acetaminophen/codeine tabs 300mg; 60mg	2	QL (180 EA per 30 days)
ascomp/codeine caps 325mg; 50mg; 40mg; 30mg	2	
butalbital/acetaminophen/caffeine/codeine caps 300mg; 50mg; 40mg; 30mg	2	
butalbital/acetaminophen/caffeine/codeine caps 325mg; 50mg; 40mg; 30mg	2	
butalbital/aspirin/caffeine/codeine caps 325mg; 50mg; 40mg; 30mg	2	
butorphanol tartrate inj 1mg/ml	2	
butorphanol tartrate inj 2mg/ml	2	
butorphanol tartrate soln 10mg/ml	2	QL (5 ML per 28 days)
codeine sulfate tabs 15mg	1	QL (180 EA per 30 days)
codeine sulfate tabs 30mg	1	QL (180 EA per 30 days)
codeine sulfate tabs 60mg	1	QL (180 EA per 30 days)
duramorph inj 0.5mg/ml	2	
duramorph inj 1mg/ml	2	
endocet tabs 325mg; 10mg	2	QL (240 EA per 30 days)
endocet tabs 325mg; 2.5mg	2	QL (240 EA per 30 days)
endocet tabs 325mg; 5mg	2	QL (240 EA per 30 days)
endocet tabs 325mg; 7.5mg	2	QL (240 EA per 30 days)
fentanyl citrate oral transmucosal lpop 1200mcg	5	QL (120 EA per 30 days) PA
fentanyl citrate oral transmucosal lpop 1600mcg	5	QL (120 EA per 30 days) PA
fentanyl citrate oral transmucosal lpop 200mcg	4	QL (120 EA per 30 days) PA
fentanyl citrate oral transmucosal lpop 400mcg	5	QL (120 EA per 30 days) PA
fentanyl citrate oral transmucosal lpop 600mcg	5	QL (120 EA per 30 days) PA

Drug Name	Drug Tier	Requirements/Limits
fentanyl citrate oral transmucosal lpop 800mcg	5	QL (120 EA per 30 days) PA
hydrocodone bitartrate/acetaminophen soln 325mg/15ml; 10mg/15ml	2	QL (2700 ML per 30 days)
hydrocodone bitartrate/acetaminophen soln 325mg/15ml; 7.5mg/15ml	2	QL (2700 ML per 30 days)
hydrocodone bitartrate/acetaminophen tabs 300mg; 10mg	2	QL (240 EA per 30 days)
hydrocodone bitartrate/acetaminophen tabs 300mg; 5mg	2	QL (240 EA per 30 days)
hydrocodone bitartrate/acetaminophen tabs 300mg; 7.5mg	2	QL (240 EA per 30 days)
hydrocodone bitartrate/acetaminophen tabs 325mg; 10mg	2	QL (240 EA per 30 days)
hydrocodone bitartrate/acetaminophen tabs 325mg; 5mg	2	QL (240 EA per 30 days)
hydrocodone/acetaminophen tabs 325mg; 7.5mg	2	QL (240 EA per 30 days)
hydrocodone/ibuprofen tabs 10mg; 200mg	2	QL (150 EA per 30 days)
hydrocodone/ibuprofen tabs 5mg; 200mg	2	QL (150 EA per 30 days)
hydrocodone/ibuprofen tabs 7.5mg; 200mg	2	QL (150 EA per 30 days)
hydromorphone hcl inj 10mg/ml	2	
hydromorphone hcl inj 1mg/ml	2	
hydromorphone hcl inj 4mg/ml	2	
hydromorphone hcl inj 50mg/5ml	2	
hydromorphone hcl liqd 1mg/ml	2	QL (1200 ML per 30 days)
hydromorphone hcl tabs 2mg	2	QL (180 EA per 30 days)
hydromorphone hcl tabs 4mg	2	QL (180 EA per 30 days)
hydromorphone hcl tabs 8mg	2	QL (120 EA per 30 days)
hydromorphone hydrochloride inj 2mg/ml	2	
LAZANDA SOLN 100MCG/ACT	5	PA
LAZANDA SOLN 300MCG/ACT	5	PA
LAZANDA SOLN 400MCG/ACT	5	PA
lorcet hd tabs 325mg; 10mg	2	QL (240 EA per 30 days)
lorcet plus tabs 325mg; 7.5mg	2	QL (240 EA per 30 days)
lorcet tabs 325mg; 5mg	2	QL (240 EA per 30 days)
morphine sulfate inj 0.5mg/ml	2	
morphine sulfate inj 10mg/ml	2	
morphine sulfate inj 10mg/ml	2	B/D
morphine sulfate inj 1mg/ml	2	
morphine sulfate inj 2mg/ml	2	
morphine sulfate inj 2mg/ml	2	
morphine sulfate inj 4mg/ml	2	
morphine sulfate inj 4mg/ml	2	
morphine sulfate inj 4mg/ml	2	
morphine sulfate inj 4mg/ml	2	B/D
morphine sulfate inj 5mg/ml	2	B/D
morphine sulfate inj 8mg/ml	2	
morphine sulfate inj 8mg/ml	2	
morphine sulfate inj 8mg/ml	2	B/D
morphine sulfate soln 100mg/5ml	2	QL (200 ML per 30 days)
morphine sulfate soln 10mg/5ml	2	QL (700 ML per 30 days)
morphine sulfate soln 20mg/5ml	2	QL (300 ML per 30 days)
morphine sulfate tabs 15mg	2	QL (180 EA per 30 days)
morphine sulfate tabs 30mg	2	QL (180 EA per 30 days)
nalbuphine hcl inj 10mg/ml	1	

Drug Name	Drug Tier	Requirements/Limits
nalbuphine hcl inj 20mg/ml	1	
oxycodone hcl caps 5mg	2	QL (180 EA per 30 days)
oxycodone hydrochloride caps 5mg	2	QL (180 EA per 30 days)
oxycodone hydrochloride conc 100mg/5ml	2	QL (180 ML per 30 days)
oxycodone hydrochloride soln 5mg/5ml	2	QL (1300 ML per 30 days)
oxycodone hydrochloride tabs 10mg	2	QL (180 EA per 30 days)
oxycodone hydrochloride tabs 15mg	2	QL (180 EA per 30 days)
oxycodone hydrochloride tabs 20mg	2	QL (180 EA per 30 days)
oxycodone hydrochloride tabs 30mg	2	QL (180 EA per 30 days)
oxycodone hydrochloride tabs 5mg	2	QL (180 EA per 30 days)
oxycodone/acetaminophen tabs 325mg; 10mg	2	QL (240 EA per 30 days)
oxycodone/acetaminophen tabs 325mg; 2.5mg	2	QL (240 EA per 30 days)
oxycodone/acetaminophen tabs 325mg; 5mg	2	QL (240 EA per 30 days)
oxycodone/acetaminophen tabs 325mg; 7.5mg	2	QL (240 EA per 30 days)
oxycodone/aspirin tabs 325mg; 4.835mg	2	QL (240 EA per 30 days)
oxycodone/ibuprofen tabs 400mg; 5mg	2	QL (30 EA per 30 days)
oxymorphone hydrochloride tabs 10mg	2	QL (180 EA per 30 days)
oxymorphone hydrochloride tabs 5mg	2	QL (180 EA per 30 days)
tramadol hcl tabs 50mg	2	QL (240 EA per 30 days)
tramadol hydrochloride/acetaminophen tabs 325mg; 37.5mg	2	QL (240 EA per 30 days)
tramadol hydrochloride tabs 100mg	2	QL (120 EA per 30 days)
vicodin hp tabs 300mg; 10mg	2	QL (240 EA per 30 days)
Anesthetics		
Local Anesthetics		
glydo prsy 2%	1	QL (30 ML per 30 days)
lidocaine hcl jelly gel 2%	1	QL (30 ML per 30 days)
lidocaine hcl jelly prsy 2%	1	QL (30 ML per 30 days)
lidocaine hcl/dextrose soln 7.5%; 5%	2	
lidocaine hcl inj 0.5%	1	
lidocaine hcl inj 0.5%	1	
lidocaine hcl inj 1%	1	
lidocaine hcl inj 1.5%	1	
lidocaine hcl inj 2%	1	
lidocaine hcl inj 4%	1	
lidocaine hcl prsy 2%	1	QL (30 ML per 30 days)
lidocaine hcl soln 4%	1	QL (250 ML per 30 days)
lidocaine hydrochloride inj 1%	1	
lidocaine hydrochloride inj 2%	1	
lidocaine/prilocaine crea 2.5%; 2.5%	2	QL (30 GM per 30 days)
lidocaine oint 5%	2	QL (150 GM per 30 days)
lidocaine ptch 5%	2	PA
PLIAGLIS CREA 7%; 7%	4	QL (30 GM per 30 days)
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
acamprosate calcium dr tbec 333mg	2	
disulfiram tabs 250mg	2	
disulfiram tabs 500mg	2	
VIVITROL INJ 380MG	5	
Opioid Dependence		

Drug Name	Drug Tier	Requirements/Limits
buprenorphine hcl/naloxone hcl subl 2mg; 0.5mg	2	QL (90 EA per 30 days)
buprenorphine hcl/naloxone hcl subl 8mg; 2mg	2	QL (90 EA per 30 days)
buprenorphine hcl inj 0.3mg/ml	4	
buprenorphine hcl inj 0.3mg/ml	4	
buprenorphine hcl subl 2mg	2	QL (90 EA per 30 days)
buprenorphine hcl subl 8mg	2	QL (90 EA per 30 days)
buprenorphine hydrochloride/naloxone hydrochloride film 12mg; 3mg	2	QL (90 EA per 30 days)
buprenorphine hydrochloride/naloxone hydrochloride film 2mg; 0.5mg	2	QL (90 EA per 30 days)
buprenorphine hydrochloride/naloxone hydrochloride film 4mg; 1mg	2	QL (90 EA per 30 days)
buprenorphine hydrochloride/naloxone hydrochloride film 8mg; 2mg	2	QL (90 EA per 30 days)
buprenorphine hydrochloride/naloxone hydrochloride subl 2mg; 0.5mg	2	QL (90 EA per 30 days)
LUCEMYRA TABS 0.18MG	4	
naltrexone hcl tabs 50mg	1	
Opioid Reversal Agents		
naloxone hcl inj 0.4mg/ml	1	
naloxone hcl inj 2mg/2ml	1	
naloxone hcl inj 4mg/10ml	1	
naloxone hydrochloride inj 0.4mg/ml	1	
NARCAN LIQD 4MG/0.1ML	3	
Smoking Cessation Agents		
bupropion hydrochloride er (sr) tb12 150mg	2	
CHANTIX CONTINUING MONTH PAK TABS 1MG	3	
CHANTIX STARTING MONTH PAK TABS 0	3	
CHANTIX TABS 0.5MG	3	
CHANTIX TABS 1MG	3	
NICOTROL INHALER INHA 10MG	4	QL (480 EA per 30 days)
NICOTROL NS SOLN 10MG/ML	4	QL (720 ML per 365 days)
varenicline tartrate tabs 0.5mg	2	
varenicline tartrate tabs 1mg	2	
Antibacterials		
Aminoglycosides		
amikacin sulfate inj 1gm/4ml	2	
amikacin sulfate inj 500mg/2ml	2	
gentak oint 0.3%	1	
gentamicin sulfate pediatric inj 10mg/ml	1	
gentamicin sulfate/0.9% sodium chloride inj 1.2mg/ml; 0.9%	1	
gentamicin sulfate/0.9% sodium chloride inj 1.6mg/ml; 0.9%	1	
gentamicin sulfate/0.9% sodium chloride inj 1mg/ml; 0.9%	1	
gentamicin sulfate/0.9% sodium chloride inj 2mg/ml; 0.9%	1	
gentamicin sulfate crea 0.1%	1	
gentamicin sulfate inj 10mg/ml	1	
gentamicin sulfate inj 40mg/ml	1	
gentamicin sulfate oint 0.1%	1	
gentamicin sulfate soln 0.3%	1	

Drug Name	Drug Tier	Requirements/Limits
isotonic gentamicin inj 0.8mg/ml; 0.9%	1	
neomycin sulfate tabs 500mg	2	
neomycin/polymyxin b sulfates soln 40mg/ml; 200000unit/ml	2	
paromomycin sulfate caps 250mg	1	
streptomycin sulfate inj 1gm	1	
tobramycin sulfate inj 1.2gm/30ml	2	
tobramycin sulfate inj 10mg/ml	2	
tobramycin sulfate inj 40mg/ml	2	
tobramycin sulfate inj 80mg/2ml	2	
tobramycin sulfate soln 0.3%	1	
tobramycin soln 0.3%	1	
ZEMDRI INJ 500MG/10ML	5	
Antibacterials, Other		
AEMCOLO TBEC 194MG	3	QL (12 EA per 30 days)
baciim inj 50000unit	1	
bacitracin inj 50000unit	1	
bacitracin oint 500unit/gm	2	
BACTROBAN NASAL OINT 2%	4	
chloramphenicol sodium succinate inj 1gm	1	
CLEOCIN SUPP 100MG	4	
clindacin etz pledgets swab 1%	2	
clindacin-p swab 1%	2	
clindamycin hcl caps 300mg	1	
clindamycin hcl caps 75mg	1	
clindamycin hydrochloride caps 150mg	1	
clindamycin palmitate hcl solr 75mg/5ml	1	
clindamycin phosphate/dextrose inj 300mg/50ml; 5%	2	
clindamycin phosphate/dextrose inj 600mg/50ml; 5%	2	
clindamycin phosphate/dextrose inj 900mg/50ml; 5%	2	
clindamycin phosphate crea 2%	2	
clindamycin phosphate foam 1%	2	
clindamycin phosphate gel 1%	2	
clindamycin phosphate inj 150mg/ml	1	
clindamycin phosphate inj 300mg/2ml	1	
clindamycin phosphate inj 600mg/4ml	1	
clindamycin phosphate inj 900mg/6ml	1	
clindamycin phosphate inj 9gm/60ml	1	
clindamycin phosphate lotn 1%	2	
clindamycin phosphate soln 1%	2	
clindamycin phosphate swab 1%	2	
colistimethate sodium inj 150mg	2	
DALVANCE INJ 500MG	5	
daptomycin inj 350mg	5	
daptomycin inj 500mg	5	
fosfomycin tromethamine pack 3gm	2	
KIMYRSA INJ 1200MG	5	
lincomycin hcl inj 300mg/ml	2	
linezolid inj 600mg/300ml	5	
linezolid susr 100mg/5ml	5	

Drug Name	Drug Tier	Requirements/Limits
linezolid tabs 600mg	4	QL (56 EA per 28 days)
mafenide acetate pack 5%	4	
methenamine hippurate tabs 1gm	2	
metronidazole in nacl 0.79% inj 500mg/100ml; 0.79%	1	
metronidazole vaginal gel 0.75%	2	
metronidazole caps 375mg	1	
metronidazole inj 5mg/ml; 0.79%	1	
metronidazole tabs 250mg	1	
metronidazole tabs 500mg	1	
MONUROL PACK 5.631GM	4	
mupirocin crea 2%	1	
mupirocin oint 2%	1	
nitrofurantoin macrocrystals caps 100mg	2	
nitrofurantoin macrocrystals caps 25mg	2	
nitrofurantoin macrocrystals caps 50mg	2	
nitrofurantoin monohydrate/macrocrystals caps 100mg	2	
nitrofurantoin monohydrate caps 100mg	2	
NUVESSA GEL 1.3%	4	
ORBACTIV INJ 400MG	5	
polymyxin b sulfate inj 500000unit	2	
silver sulfadiazine crea 1%	1	
SIVEXTRO INJ 200MG	5	QL (6 EA per 30 days)
SIVEXTRO TABS 200MG	5	QL (6 EA per 30 days)
ssd crea 1%	1	
SULFAMYLON CREA 85MG/GM	4	
SYNERCID INJ 350MG; 150MG	5	
tigecycline inj 50mg	5	
trimethoprim tabs 100mg	1	
vancomycin hcl inj 0.9%; 1gm/200ml	4	
vancomycin hcl inj 10gm	4	
vancomycin hydrochloride/dextrose inj 5%; 1gm/200ml	4	
vancomycin hydrochloride/dextrose inj 5%; 500mg/100ml	4	
vancomycin hydrochloride/dextrose inj 5%; 750mg/150ml	4	
vancomycin hydrochloride caps 125mg	4	
vancomycin hydrochloride caps 250mg	5	
vancomycin hydrochloride inj 1000mg/200ml	4	
VANCOMYCIN HYDROCHLORIDE INJ 1250MG/250ML	4	
VANCOMYCIN HYDROCHLORIDE INJ 1750MG/350ML	4	
vancomycin hydrochloride inj 1gm	4	
vancomycin hydrochloride inj 250mg	2	
vancomycin hydrochloride inj 500mg	4	
vancomycin hydrochloride inj 5gm	4	
VANCOMYCIN HYDROCHLORIDE INJ 750MG/150ML	4	
vancomycin hydrochloride inj 750mg	4	
vancomycin inj 0.9%; 500mg/100ml	4	
vancomycin inj 0.9%; 750mg/150ml	4	
vandazole gel 0.75%	2	
XIFAXAN TABS 200MG	5	PA
XIFAXAN TABS 550MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
Beta-lactam, Cephalosporins		
AVYCAZ INJ 0.5GM; 2GM	5	
cefaclor er tb12 500mg	2	
cefaclor caps 250mg	2	
cefaclor caps 500mg	2	
cefaclor susr 125mg/5ml	2	
cefaclor susr 250mg/5ml	2	
cefaclor susr 375mg/5ml	2	
cefadroxil caps 500mg	2	
cefadroxil susr 250mg/5ml	2	
cefadroxil susr 500mg/5ml	2	
cefadroxil tabs 1gm	2	
cefazolin sodium/dextrose inj 1gm; 4%	2	
cefazolin sodium/dextrose inj 2gm; 3%	2	
cefazolin sodium inj 100gm	2	
cefazolin sodium inj 10gm	2	
cefazolin sodium inj 1gm/50ml; 4%	2	
cefazolin sodium inj 1gm	2	
cefazolin sodium inj 1gm	2	
cefazolin sodium inj 300gm	2	
cefazolin sodium inj 500mg	2	
cefdinir caps 300mg	2	
cefdinir susr 125mg/5ml	2	
cefdinir susr 250mg/5ml	2	
CEFEPIME HYDROCHLORIDE INJ 100GM	3	
CEFEPIME/DEXTROSE INJ 1GM/50ML; 5%	3	
CEFEPIME/DEXTROSE INJ 2GM/50ML; 5%	3	
CEFEPIME INJ 1GM/50ML	3	
CEFEPIME INJ 1GM	3	
CEFEPIME INJ 2GM/100ML	3	
CEFEPIME INJ 2GM	3	
cefixime caps 400mg	4	
cefixime susr 100mg/5ml	2	
cefixime susr 200mg/5ml	2	
cefotaxime sodium inj 1gm	1	
cefotaxime sodium inj 2gm	1	
cefotaxime sodium inj 500mg	1	
cefotetan/dextrose inj 1gm; 3.58%	1	
cefotetan/dextrose inj 2gm; 2.08%	1	
cefotetan inj 1gm	1	
cefotetan inj 2gm	1	
cefoxitin sodium inj 10gm	1	
cefoxitin sodium inj 1gm	1	
cefoxitin sodium inj 1gm; 4%	1	
cefoxitin sodium inj 2gm	1	
cefoxitin sodium inj 2gm; 2.2%	1	
cefpodoxime proxetil susr 100mg/5ml	2	
cefpodoxime proxetil susr 50mg/5ml	2	
cefpodoxime proxetil tabs 100mg	2	

Drug Name	Drug Tier	Requirements/Limits
cefpodoxime proxetil tabs 200mg	2	
cefprozil susr 125mg/5ml	2	
cefprozil susr 250mg/5ml	2	
cefprozil tabs 250mg	2	
cefprozil tabs 500mg	2	
ceftazidime/dextrose inj 1gm/50ml; 5%	1	
ceftazidime/dextrose inj 2gm/50ml; 5%	1	
ceftazidime inj 1gm	1	
ceftazidime inj 2gm	1	
ceftazidime inj 6gm	1	
ceftriaxone in iso-osmotic dextrose inj 20mg/ml; 0	4	
ceftriaxone sodium inj 10gm	4	
ceftriaxone sodium inj 1gm	4	
ceftriaxone sodium inj 1gm	4	
ceftriaxone sodium inj 250mg	4	
ceftriaxone sodium inj 2gm	4	
ceftriaxone sodium inj 2gm	4	
ceftriaxone sodium inj 500mg	4	
ceftriaxone/dextrose inj 1gm; 3.74%	4	
ceftriaxone/dextrose inj 2gm; 2.22%	4	
cefuroxime axetil tabs 250mg	2	
cefuroxime axetil tabs 500mg	2	
cefuroxime sodium inj 1.5gm	2	
cefuroxime sodium inj 7.5gm	2	
cefuroxime sodium inj 750mg	2	
cephalexin caps 250mg	1	
cephalexin caps 500mg	1	
cephalexin caps 750mg	1	
cephalexin susr 125mg/5ml	1	
cephalexin susr 250mg/5ml	1	
cephalexin tabs 250mg	1	
cephalexin tabs 500mg	1	
FETROJA INJ 1GM	5	
SUPRAX CHEW 100MG	4	
SUPRAX CHEW 200MG	4	
SUPRAX SUSR 500MG/5ML	4	
tazicef inj 1gm	1	
tazicef inj 1gm	1	
tazicef inj 1gm	1	
tazicef inj 2gm	1	
tazicef inj 6gm	1	
TEFLARO INJ 400MG	5	
TEFLARO INJ 600MG	5	
ZERBAXA INJ 1GM; 0.5GM	5	
Beta-lactam, Penicillins		
amoxicillin/clavulanate potassium er tb12 1000mg; 62.5mg	2	
amoxicillin/clavulanate potassium chew 200mg; 28.5mg	2	
amoxicillin/clavulanate potassium chew 400mg; 57mg	2	

Drug Name	Drug Tier	Requirements/Limits
amoxicillin/clavulanate potassium susr 200mg/5ml; 28.5mg/5ml	2	
amoxicillin/clavulanate potassium susr 250mg/5ml; 62.5mg/5ml	2	
amoxicillin/clavulanate potassium susr 400mg/5ml; 57mg/5ml	2	
amoxicillin/clavulanate potassium susr 600mg/5ml; 42.9mg/5ml	2	
amoxicillin/clavulanate potassium tabs 250mg; 125mg	2	
amoxicillin/clavulanate potassium tabs 500mg; 125mg	2	
amoxicillin/clavulanate potassium tabs 875mg; 125mg	2	
amoxicillin caps 250mg	1	
amoxicillin caps 500mg	1	
amoxicillin chew 125mg	1	
amoxicillin chew 250mg	1	
amoxicillin susr 125mg/5ml	1	
amoxicillin susr 200mg/5ml	1	
amoxicillin susr 250mg/5ml	1	
amoxicillin susr 400mg/5ml	1	
amoxicillin tabs 500mg	1	
amoxicillin tabs 875mg	1	
ampicillin sodium inj 10gm	1	
ampicillin sodium inj 125mg	1	
ampicillin sodium inj 1gm	1	
ampicillin sodium inj 1gm	1	
ampicillin sodium inj 250mg	1	
ampicillin sodium inj 2gm	1	
ampicillin sodium inj 2gm	1	
ampicillin sodium inj 500mg	1	
ampicillin-sulbactam inj 10gm; 5gm	1	
ampicillin-sulbactam inj 1gm; 0.5gm	1	
ampicillin-sulbactam inj 1gm; 0.5gm	1	
ampicillin-sulbactam inj 2gm; 1gm	1	
ampicillin caps 500mg	1	
BICILLIN C-R INJ 300000UNIT/ML; 300000UNIT/ML	3	
BICILLIN C-R INJ 900000UNIT/2ML; 300000UNIT/2ML	3	
BICILLIN L-A INJ 1200000UNIT/2ML	3	
BICILLIN L-A INJ 2400000UNIT/4ML	3	
BICILLIN L-A INJ 600000UNIT/ML	3	
dicloxacillin sodium caps 250mg	1	
dicloxacillin sodium caps 500mg	1	
nafcillin sodium inj 10gm	5	
nafcillin sodium inj 1gm	2	
nafcillin sodium inj 1gm	2	
nafcillin sodium inj 2gm	5	
nafcillin sodium inj 2gm	2	
NAFCILLIN INJ 5%; 1GM/50ML	5	
NAFCILLIN INJ 5%; 2GM/100ML	5	
oxacillin sodium inj 1.5gm/50ml; 1gm/50ml	2	
oxacillin sodium inj 10gm	2	

Drug Name	Drug Tier	Requirements/Limits
oxacillin sodium inj 1gm	2	
oxacillin sodium inj 2gm	2	
oxacillin sodium inj 300mg/50ml; 2gm/50ml	2	
penicillin g potassium in iso-osmotic dextrose inj 0; 20000unit/ml	1	
penicillin g potassium in iso-osmotic dextrose inj 0; 40000unit/ml	1	
penicillin g potassium in iso-osmotic dextrose inj 0; 60000unit/ml	1	
penicillin g potassium inj 20000000unit	1	
penicillin g potassium inj 5000000unit	1	
penicillin g procaine inj 600000unit/ml	1	
penicillin v potassium solr 125mg/5ml	1	
penicillin v potassium solr 250mg/5ml	1	
penicillin v potassium tabs 250mg	1	
penicillin v potassium tabs 500mg	1	
piperacillin sodium/tazobactam sodium inj 12gm; 1.5gm	2	
piperacillin sodium/tazobactam sodium inj 12gm; 1.5gm	2	
piperacillin sodium/tazobactam sodium inj 2gm; 0.25gm	2	
piperacillin sodium/tazobactam sodium inj 36gm; 4.5gm	2	
piperacillin sodium/tazobactam sodium inj 3gm; 0.375gm	2	
piperacillin sodium/tazobactam sodium inj 4gm; 0.5gm	2	
Carbapenems		
aztreonam inj 1gm	2	
aztreonam inj 2gm	5	
ertapenem sodium inj 1gm	4	
ertapenem inj 1gm	4	
imipenem/cilastatin inj 250mg; 250mg	1	
imipenem/cilastatin inj 500mg; 500mg	1	
MEROPENEM/SODIUM CHLORIDE INJ 1GM/50ML; 0.9%	5	
meropenem/sodium chloride inj 500mg; 0.9%	2	
meropenem inj 1gm	2	
meropenem inj 500mg	2	
Macrolides		
azithromycin inj 500mg	1	
azithromycin pack 1gm	2	
azithromycin susr 100mg/5ml	2	
azithromycin susr 200mg/5ml	2	
azithromycin tabs 250mg	2	
azithromycin tabs 250mg	2	
azithromycin tabs 500mg	2	
azithromycin tabs 500mg	2	
azithromycin tabs 600mg	2	
clarithromycin er tb24 500mg	2	
clarithromycin susr 125mg/5ml	2	
clarithromycin susr 250mg/5ml	2	
clarithromycin tabs 250mg	2	
clarithromycin tabs 500mg	2	

Drug Name	Drug Tier	Requirements/Limits
DIFICID SUSR 40MG/ML	5	ST
DIFICID TABS 200MG	5	ST
e.e.s. 400 tabs 400mg	2	
ery pads 2%	1	
ERYTHROCIN LACTOBIONATE INJ 500MG	3	
erythrocin stearate tabs 250mg	2	
erythromycin base tabs 250mg	2	
erythromycin base tabs 500mg	2	
erythromycin dr tbec 250mg	2	
erythromycin dr tbec 333mg	2	
erythromycin dr tbec 500mg	2	
erythromycin ethylsuccinate susr 200mg/5ml	2	
erythromycin ethylsuccinate susr 400mg/5ml	2	
erythromycin ethylsuccinate tabs 400mg	2	
erythromycin cpep 250mg	2	
erythromycin gel 2%	1	
erythromycin oint 5mg/gm	1	
erythromycin pads 2%	1	
erythromycin soln 2%	2	
Quinolones		
BAXDELA INJ 300MG	5	
BAXDELA TABS 450MG	5	
ciprofloxacin hcl tabs 100mg	1	
ciprofloxacin hcl tabs 750mg	1	
ciprofloxacin hydrochloride soln 0.3%	1	
ciprofloxacin hydrochloride tabs 250mg	1	
ciprofloxacin hydrochloride tabs 500mg	1	
ciprofloxacin i.v.-in d5w inj 200mg/100ml; 5%	1	
ciprofloxacin i.v.-in d5w inj 400mg/200ml; 5%	1	
ciprofloxacin inj 400mg/40ml	1	
ciprofloxacin soln 0.2%	2	
gatifloxacin soln 0.5%	2	
levofloxacin in d5w inj 5%; 250mg/50ml	2	
levofloxacin in d5w inj 5%; 250mg/50ml	2	
levofloxacin in d5w inj 5%; 250mg/50ml	2	
levofloxacin in d5w inj 5%; 500mg/100ml	2	
levofloxacin in d5w inj 5%; 750mg/150ml	2	
levofloxacin inj 25mg/ml	2	
levofloxacin soln 0.5%	2	
levofloxacin soln 25mg/ml	2	
levofloxacin tabs 250mg	2	
levofloxacin tabs 500mg	2	
levofloxacin tabs 750mg	2	
moxifloxacin hydrochloride/sodium hydrochloride inj 400mg/250ml; 0.8%	2	
moxifloxacin hydrochloride inj 400mg/250ml	2	
moxifloxacin hydrochloride soln 0.5%	2	
moxifloxacin hydrochloride soln 0.5%	2	
ofloxacin soln 0.3%	1	

Drug Name	Drug Tier	Requirements/Limits
ofloxacin soln 0.3%	1	
ofloxacin tabs 300mg	1	
ofloxacin tabs 400mg	1	
Sulfonamides		
AVC CREA 15%	4	
sodium sulfacetamide lotn 10%	2	
sulfacetamide sodium lotn 10%	2	
sulfacetamide sodium oint 10%	2	
sulfacetamide sodium soln 10%	1	
sulfadiazine tabs 500mg	1	
sulfamethoxazole/trimethoprim ds tabs 800mg; 160mg	1	
sulfamethoxazole/trimethoprim inj 400mg/5ml; 80mg/5ml	1	
sulfamethoxazole/trimethoprim susp 200mg/5ml; 40mg/5ml	1	
sulfamethoxazole/trimethoprim tabs 400mg; 80mg	1	
Tetracyclines		
demeclocycline hcl tabs 150mg	2	
demeclocycline hcl tabs 300mg	2	
demeclocycline hydrochloride tabs 300mg	2	
doxy 100 inj 100mg	2	
doxycycline hyclate dr tbec 150mg	2	
doxycycline hyclate dr tbec 75mg	2	
doxycycline hyclate caps 100mg	2	
doxycycline hyclate caps 50mg	2	
doxycycline hyclate inj 100mg	2	
doxycycline hyclate tabs 100mg	2	
doxycycline hyclate tabs 20mg	2	
doxycycline monohydrate caps 100mg	2	
doxycycline monohydrate caps 150mg	2	
doxycycline monohydrate caps 50mg	2	
doxycycline monohydrate caps 75mg	2	
doxycycline monohydrate tabs 100mg	2	
doxycycline monohydrate tabs 150mg	2	
doxycycline monohydrate tabs 50mg	2	
doxycycline monohydrate tabs 75mg	2	
doxycycline susr 25mg/5ml	2	
MINOCIN INJ 100MG	5	
minocycline hcl caps 75mg	1	
minocycline hcl tabs 100mg	1	
minocycline hcl tabs 50mg	1	
minocycline hcl tabs 75mg	1	
minocycline hydrochloride er tb24 135mg	1	
minocycline hydrochloride er tb24 45mg	1	
minocycline hydrochloride er tb24 90mg	1	
minocycline hydrochloride caps 100mg	1	
minocycline hydrochloride caps 50mg	1	
minocycline hydrochloride caps 75mg	1	
mondoxyne nl caps 100mg	2	
mondoxyne nl caps 50mg	2	
mondoxyne nl caps 75mg	2	

Drug Name	Drug Tier	Requirements/Limits
morgidox 1x100mg caps 100mg	2	
morgidox 2x100mg caps 100mg	2	
NUZYRA INJ 100MG	5	
NUZYRA TABS 150MG	5	QL (30 EA per 30 days)
okebo caps 75mg	2	
tetracycline hydrochloride caps 250mg	2	
tetracycline hydrochloride caps 500mg	2	
VIBRAMYCIN SYRP 50MG/5ML	4	
XERAVA INJ 100MG	5	
XERAVA INJ 50MG	5	
Anticonvulsants		
Anticonvulsants, Other		
APTIOM TABS 200MG	5	ST
APTIOM TABS 400MG	5	ST
APTIOM TABS 600MG	5	ST
APTIOM TABS 800MG	5	ST
BRIVIACT INJ 50MG/5ML	5	ST
BRIVIACT SOLN 10MG/ML	5	ST
BRIVIACT TABS 100MG	5	ST
BRIVIACT TABS 10MG	5	ST
BRIVIACT TABS 25MG	5	ST
BRIVIACT TABS 50MG	5	ST
BRIVIACT TABS 75MG	5	ST
ELEPSIA XR TB24 1000MG	5	ST
ELEPSIA XR TB24 1500MG	5	ST
EPIDIOLEX SOLN 100MG/ML	5	PA
felbamate susp 600mg/5ml	5	
felbamate tabs 400mg	2	
felbamate tabs 600mg	2	
FINTEPLA SOLN 2.2MG/ML	5	PA
FYCOMPA SUSP 0.5MG/ML	5	
FYCOMPA TABS 10MG	5	
FYCOMPA TABS 12MG	5	
FYCOMPA TABS 2MG	4	
FYCOMPA TABS 4MG	5	
FYCOMPA TABS 6MG	5	
FYCOMPA TABS 8MG	4	
lamotrigine er tb24 100mg	2	
lamotrigine er tb24 200mg	2	
lamotrigine er tb24 250mg	2	
lamotrigine er tb24 25mg	2	
lamotrigine er tb24 300mg	2	
lamotrigine er tb24 50mg	2	
lamotrigine titration kit 0	2	
lamotrigine chew 25mg	1	
lamotrigine chew 5mg	1	
lamotrigine tabs 100mg	1	
lamotrigine tabs 150mg	1	
lamotrigine tabs 200mg	1	

Drug Name	Drug Tier	Requirements/Limits
lamotrigine tabs 25mg	1	
levetiracetam er tb24 500mg	1	
levetiracetam er tb24 750mg	1	
levetiracetam/sodium chloride inj 1000mg/100ml; 750mg/100ml	2	
levetiracetam/sodium chloride inj 1500mg/100ml; 540mg/100ml	2	
levetiracetam/sodium chloride inj 500mg/100ml; 820mg/100ml	2	
levetiracetam inj 1000mg/100ml; 750mg/100ml	2	
levetiracetam inj 1500mg/100ml; 540mg/100ml	2	
levetiracetam inj 500mg/100ml; 820mg/100ml	2	
levetiracetam inj 500mg/5ml	1	
levetiracetam soln 100mg/ml	1	
levetiracetam tabs 1000mg	1	
levetiracetam tabs 250mg	1	
levetiracetam tabs 500mg	1	
levetiracetam tabs 750mg	1	
NAYZILAM SOLN 5MG/0.1ML	5	
roweepra xr tb24 500mg	1	
roweepra xr tb24 750mg	1	
roweepra tabs 1000mg	1	
roweepra tabs 500mg	1	
roweepra tabs 750mg	1	
SPRITAM TB3D 1000MG	4	ST
SPRITAM TB3D 250MG	4	ST
SPRITAM TB3D 500MG	4	ST
SPRITAM TB3D 750MG	4	ST
subvenite tabs 100mg	1	
subvenite tabs 150mg	1	
subvenite tabs 200mg	1	
subvenite tabs 25mg	1	
topiramate er cs24 100mg	2	
topiramate er cs24 150mg	2	
topiramate er cs24 200mg	2	
topiramate er cs24 25mg	2	
topiramate er cs24 50mg	2	
topiramate cpsp 15mg	2	
topiramate cpsp 25mg	2	
topiramate tabs 100mg	2	
topiramate tabs 200mg	2	
topiramate tabs 25mg	2	
topiramate tabs 50mg	2	
TROKENDI XR CP24 100MG	4	
TROKENDI XR CP24 200MG	5	
TROKENDI XR CP24 25MG	4	
TROKENDI XR CP24 50MG	4	
XCOPRI TABS 100MG	4	
XCOPRI TABS 150MG	4	

Drug Name	Drug Tier	Requirements/Limits
XCOPRI TABS 200MG	5	
XCOPRI TABS 50MG	4	
XCOPRI TBPK 0	5	
XCOPRI TBPK 0	4	
XCOPRI TBPK 0	5	
XCOPRI TBPK 0	5	
XCOPRI TBPK 0	5	
XCOPRI TBPK 0	5	
Calcium Channel Modifying Agents		
CELONTIN CAPS 300MG	3	
ethosuximide caps 250mg	2	
ethosuximide soln 250mg/5ml	2	
pregabalin caps 100mg	2	
pregabalin caps 150mg	2	
pregabalin caps 200mg	2	
pregabalin caps 225mg	2	
pregabalin caps 25mg	2	
pregabalin caps 300mg	2	
pregabalin caps 50mg	2	
pregabalin caps 75mg	2	
pregabalin soln 20mg/ml	2	
zonisamide caps 100mg	1	
zonisamide caps 25mg	1	
zonisamide caps 50mg	1	
Gamma-aminobutyric Acid (GABA) Augmenting Agents		
clobazam susp 2.5mg/ml	4	
clobazam tabs 10mg	4	
clobazam tabs 20mg	4	
clonazepam odt tbdp 0.125mg	2	
clonazepam odt tbdp 0.25mg	2	
clonazepam odt tbdp 0.5mg	2	
clonazepam odt tbdp 1mg	2	
clonazepam odt tbdp 2mg	2	
clonazepam tabs 0.5mg	2	
clonazepam tabs 1mg	2	
clonazepam tabs 2mg	2	
DIACOMIT CAPS 250MG	5	PA
DIACOMIT CAPS 500MG	5	PA
DIACOMIT PACK 250MG	5	PA
DIACOMIT PACK 500MG	5	PA
diastat acudial gel 10mg	2	
diastat acudial gel 20mg	2	
diastat pediatric gel 2.5mg	2	
diazepam rectal gel gel 10mg	2	
diazepam rectal gel gel 2.5mg	2	
diazepam rectal gel gel 20mg	2	
divalproex sodium dr tbec 125mg	1	
divalproex sodium dr tbec 250mg	1	
divalproex sodium dr tbec 500mg	1	

Drug Name	Drug Tier	Requirements/Limits
divalproex sodium er tb24 250mg	2	
divalproex sodium er tb24 500mg	2	
divalproex sodium csdr 125mg	1	
gabapentin caps 100mg	1	
gabapentin caps 300mg	1	
gabapentin caps 400mg	1	
gabapentin soln 250mg/5ml	1	
gabapentin tabs 600mg	1	
gabapentin tabs 800mg	1	
phenobarbital sodium inj 130mg/ml	2	
phenobarbital sodium inj 65mg/ml	2	
phenobarbital elix 20mg/5ml	2	
phenobarbital tabs 100mg	2	
phenobarbital tabs 15mg	2	
phenobarbital tabs 16.2mg	2	
phenobarbital tabs 30mg	2	
phenobarbital tabs 32.4mg	2	
phenobarbital tabs 60mg	2	
phenobarbital tabs 64.8mg	2	
phenobarbital tabs 97.2mg	2	
primidone tabs 250mg	1	
primidone tabs 50mg	1	
SYMPAZAN FILM 10MG	5	
SYMPAZAN FILM 20MG	5	
SYMPAZAN FILM 5MG	4	
tiagabine hydrochloride tabs 12mg	2	
tiagabine hydrochloride tabs 16mg	2	
tiagabine hydrochloride tabs 2mg	2	
tiagabine hydrochloride tabs 4mg	2	
valproate sodium inj 100mg/ml	1	
valproic acid caps 250mg	1	
valproic acid soln 250mg/5ml	1	
VALTOCO LIQD 10MG/0.1ML	5	
VALTOCO LIQD 5MG/0.1ML	5	
VALTOCO LQPK 10MG/0.1ML	5	
VALTOCO LQPK 7.5MG/0.1ML	5	
vigabatrin pack 500mg	5	
vigabatrin tabs 500mg	5	
vigadrone pack 500mg	5	
Sodium Channel Agents		
BANZEL SUSP 40MG/ML	5	
BANZEL TABS 200MG	5	
BANZEL TABS 400MG	5	
carbamazepine er cp12 100mg	2	
carbamazepine er cp12 200mg	2	
carbamazepine er cp12 300mg	2	
carbamazepine er tb12 100mg	2	
carbamazepine er tb12 200mg	2	
carbamazepine er tb12 400mg	2	

Drug Name	Drug Tier	Requirements/Limits
carbamazepine chew 100mg	1	
carbamazepine susp 100mg/5ml	1	
carbamazepine tabs 200mg	1	
DILANTIN INFATABS CHEW 50MG	4	
DILANTIN-125 SUSP 125MG/5ML	4	
DILANTIN CAPS 100MG	4	
DILANTIN CAPS 30MG	4	
epitol tabs 200mg	1	
fosphenytoin sodium inj 100mg pe/2ml	1	
fosphenytoin sodium inj 500mg pe/10ml	1	
oxcarbazepine susp 300mg/5ml	2	
oxcarbazepine tabs 150mg	2	
oxcarbazepine tabs 300mg	2	
oxcarbazepine tabs 600mg	2	
OXTELLAR XR TB24 150MG	4	
OXTELLAR XR TB24 300MG	4	
OXTELLAR XR TB24 600MG	4	
PEGANONE TABS 250MG	4	
phenytoin infatabs chew 50mg	1	
phenytoin sodium extended caps 100mg	2	
phenytoin sodium extended caps 200mg	2	
phenytoin sodium extended caps 300mg	2	
phenytoin sodium inj 50mg/ml	1	
phenytoin chew 50mg	1	
phenytoin susp 125mg/5ml	1	
rufinamide susp 40mg/ml	5	
rufinamide tabs 200mg	5	
rufinamide tabs 400mg	5	
VIMPAT INJ 200MG/20ML	3	
VIMPAT SOLN 10MG/ML	3	
VIMPAT TABS 100MG	5	
VIMPAT TABS 150MG	5	
VIMPAT TABS 200MG	5	
VIMPAT TABS 50MG	3	
Antidementia Agents		
Cholinesterase Inhibitors		
donepezil hcl tabs 10mg	1	
donepezil hcl tabs 23mg	2	
donepezil hcl tbdp 10mg	1	
donepezil hcl tbdp 5mg	1	
donepezil hydrochloride odt tbdp 10mg	1	
donepezil hydrochloride odt tbdp 5mg	1	
donepezil hydrochloride tabs 10mg	1	
donepezil hydrochloride tabs 5mg	1	
galantamine hydrobromide er cp24 16mg	2	
galantamine hydrobromide er cp24 24mg	2	
galantamine hydrobromide er cp24 8mg	2	
galantamine hydrobromide soln 4mg/ml	2	
galantamine hydrobromide tabs 12mg	2	

Drug Name	Drug Tier	Requirements/Limits
galantamine hydrobromide tabs 4mg	2	
galantamine hydrobromide tabs 8mg	2	
rivastigmine tartrate caps 1.5mg	2	
rivastigmine tartrate caps 3mg	2	
rivastigmine tartrate caps 4.5mg	2	
rivastigmine tartrate caps 6mg	2	
rivastigmine transdermal system pt24 13.3mg/24hr	4	
rivastigmine transdermal system pt24 4.6mg/24hr	4	
rivastigmine transdermal system pt24 9.5mg/24hr	4	
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
memantine hcl titration pak tabs 0	1	
memantine hydrochloride er cp24 14mg	2	
memantine hydrochloride er cp24 21mg	2	
memantine hydrochloride er cp24 28mg	2	
memantine hydrochloride er cp24 7mg	2	
memantine hydrochloride soln 2mg/ml	2	
memantine hydrochloride tabs 10mg	1	
memantine hydrochloride tabs 5mg	1	
NAMENDA XR TITRATION PACK CP24 0	4	
Antidepressants		
Antidepressants, Other		
APLENZIN TB24 174MG	5	
APLENZIN TB24 348MG	5	
APLENZIN TB24 522MG	5	
bupropion hcl tabs 100mg	1	
bupropion hydrochloride er (sr) tb12 100mg	1	
bupropion hydrochloride er (sr) tb12 150mg	1	
bupropion hydrochloride er (sr) tb12 200mg	1	
bupropion hydrochloride er (xl) tb24 150mg	2	
bupropion hydrochloride er (xl) tb24 300mg	2	
BUPROPION HYDROCHLORIDE ER (XL) TB24 450MG	4	
bupropion hydrochloride tabs 75mg	1	
FORFIVO XL TB24 450MG	4	
maprotiline hcl tabs 25mg	2	
maprotiline hcl tabs 50mg	2	
maprotiline hcl tabs 75mg	2	
mirtazapine odt tbdp 15mg	1	
mirtazapine odt tbdp 30mg	1	
mirtazapine odt tbdp 45mg	1	
mirtazapine tabs 15mg	1	
mirtazapine tabs 30mg	1	
mirtazapine tabs 45mg	1	
mirtazapine tabs 7.5mg	1	
olanzapine/fluoxetine caps 25mg; 12mg	2	
olanzapine/fluoxetine caps 25mg; 3mg	2	
olanzapine/fluoxetine caps 25mg; 6mg	2	
olanzapine/fluoxetine caps 50mg; 12mg	2	
olanzapine/fluoxetine caps 50mg; 6mg	2	
SPRAVATO 56MG DOSE SOPK 0	5	PA

Drug Name	Drug Tier	Requirements/Limits
SPRAVATO 84MG DOSE SOPK 0	5	PA
Monoamine Oxidase Inhibitors		
EMSAM PT24 12MG/24HR	5	QL (30 EA per 30 days)
EMSAM PT24 6MG/24HR	5	QL (30 EA per 30 days)
EMSAM PT24 9MG/24HR	5	QL (30 EA per 30 days)
MARPLAN TABS 10MG	4	
phenelzine sulfate tabs 15mg	2	
tranylcypromine sulfate tabs 10mg	2	
SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor		
citalopram hydrobromide soln 10mg/5ml	1	
citalopram hydrobromide tabs 10mg	1	
citalopram hydrobromide tabs 20mg	1	
citalopram hydrobromide tabs 40mg	1	
desvenlafaxine er tb24 100mg	2	
desvenlafaxine er tb24 100mg	2	QL (30 EA per 30 days)
desvenlafaxine er tb24 25mg	2	QL (30 EA per 30 days)
desvenlafaxine er tb24 50mg	2	
desvenlafaxine er tb24 50mg	2	QL (30 EA per 30 days)
DRIZALMA SPRINKLE CSDR 20MG	4	
DRIZALMA SPRINKLE CSDR 30MG	4	
DRIZALMA SPRINKLE CSDR 40MG	4	
DRIZALMA SPRINKLE CSDR 60MG	4	
duloxetine hcl cpep 40mg	2	
duloxetine hydrochloride cpep 20mg	2	
duloxetine hydrochloride cpep 30mg	2	
duloxetine hydrochloride cpep 40mg	2	
duloxetine hydrochloride cpep 60mg	2	
escitalopram oxalate soln 5mg/5ml	4	
escitalopram oxalate tabs 10mg	1	
escitalopram oxalate tabs 20mg	1	
escitalopram oxalate tabs 5mg	1	
FETZIMA TITRATION PACK C4PK 0	4	ST
FETZIMA CP24 120MG	4	ST
FETZIMA CP24 20MG	4	ST
FETZIMA CP24 40MG	4	ST
FETZIMA CP24 80MG	4	ST
fluoxetine dr cpdr 90mg	1	
fluoxetine hcl caps 20mg	1	
fluoxetine hydrochloride caps 10mg	1	
fluoxetine hydrochloride caps 40mg	1	
fluoxetine hydrochloride soln 20mg/5ml	1	
fluoxetine hydrochloride tabs 60mg	4	
fluvoxamine maleate er cp24 100mg	4	ST
fluvoxamine maleate er cp24 150mg	4	ST
fluvoxamine maleate tabs 100mg	1	
fluvoxamine maleate tabs 25mg	1	
fluvoxamine maleate tabs 50mg	1	
nefazodone hcl tabs 100mg	2	

Drug Name	Drug Tier	Requirements/Limits
nefazodone hcl tabs 150mg	2	
nefazodone hydrochloride tabs 200mg	2	
nefazodone hydrochloride tabs 250mg	2	
nefazodone hydrochloride tabs 50mg	2	
paroxetine hcl er tb24 12.5mg	2	
paroxetine hcl er tb24 25mg	2	
paroxetine hcl er tb24 37.5mg	2	
paroxetine hcl tabs 30mg	1	
paroxetine hcl tabs 40mg	1	
paroxetine hydrochloride susp 10mg/5ml	1	
paroxetine hydrochloride tabs 10mg	1	
paroxetine hydrochloride tabs 20mg	1	
paroxetine caps 7.5mg	2	
PAXIL SUSP 10MG/5ML	4	
PEXEVA TABS 10MG	4	ST
PEXEVA TABS 20MG	4	ST
PEXEVA TABS 30MG	4	ST
PEXEVA TABS 40MG	4	ST
sertraline hcl tabs 25mg	1	
sertraline hcl tabs 50mg	1	
sertraline hydrochloride conc 20mg/ml	1	
sertraline hydrochloride tabs 100mg	1	
trazodone hydrochloride tabs 100mg	1	
trazodone hydrochloride tabs 150mg	1	
trazodone hydrochloride tabs 300mg	2	
trazodone hydrochloride tabs 50mg	1	
TRINTELLIX TABS 10MG	4	ST
TRINTELLIX TABS 20MG	4	ST
TRINTELLIX TABS 5MG	4	ST
venlafaxine hcl er cp24 150mg	1	
venlafaxine hcl er cp24 37.5mg	1	
venlafaxine hcl tabs 100mg	1	
venlafaxine hcl tabs 25mg	1	
venlafaxine hcl tabs 37.5mg	1	
venlafaxine hcl tabs 50mg	1	
venlafaxine hcl tabs 75mg	1	
venlafaxine hydrochloride er cp24 75mg	1	
venlafaxine hydrochloride er tb24 150mg	1	
venlafaxine hydrochloride er tb24 75mg	1	
VIIBRYD STARTER PACK KIT 0	4	QL (60 EA per 365 days) ST
VIIBRYD TABS 10MG	4	QL (30 EA per 30 days) ST
VIIBRYD TABS 20MG	4	QL (30 EA per 30 days) ST
VIIBRYD TABS 40MG	4	QL (30 EA per 30 days) ST
Tricyclics		
amitriptyline hcl tabs 100mg	4	PA
amitriptyline hcl tabs 150mg	4	PA
amitriptyline hcl tabs 25mg	4	PA
amitriptyline hcl tabs 75mg	4	PA
amitriptyline hydrochloride tabs 10mg	4	PA

Drug Name	Drug Tier	Requirements/Limits
amitriptyline hydrochloride tabs 50mg	4	PA
amoxapine tabs 100mg	1	
amoxapine tabs 150mg	1	
amoxapine tabs 25mg	1	
amoxapine tabs 50mg	1	
chlordiazepoxide/amitriptyline tabs 12.5mg; 5mg	4	PA
chlordiazepoxide/amitriptyline tabs 25mg; 10mg	4	PA
clomipramine hcl caps 25mg	4	PA
clomipramine hcl caps 50mg	4	PA
clomipramine hcl caps 75mg	4	PA
desipramine hcl tabs 100mg	2	
desipramine hcl tabs 10mg	2	
desipramine hcl tabs 150mg	2	
desipramine hcl tabs 25mg	2	
desipramine hcl tabs 50mg	2	
desipramine hcl tabs 75mg	2	
doxepin hcl caps 100mg	4	PA
doxepin hcl caps 10mg	4	PA
doxepin hcl caps 150mg	4	PA
doxepin hcl caps 50mg	4	PA
doxepin hcl caps 75mg	4	PA
doxepin hcl conc 10mg/ml	4	PA
doxepin hydrochloride caps 25mg	4	PA
imipramine hcl tabs 25mg	4	PA
imipramine hcl tabs 50mg	4	PA
imipramine hydrochloride tabs 10mg	4	PA
imipramine pamoate caps 100mg	4	PA
imipramine pamoate caps 125mg	4	PA
imipramine pamoate caps 150mg	4	PA
imipramine pamoate caps 75mg	4	PA
nortriptyline hcl caps 25mg	2	
nortriptyline hcl caps 75mg	2	
nortriptyline hcl soln 10mg/5ml	2	
nortriptyline hydrochloride caps 10mg	2	
nortriptyline hydrochloride caps 50mg	2	
perphenazine/amitriptyline tabs 10mg; 2mg	4	PA
perphenazine/amitriptyline tabs 10mg; 4mg	4	PA
perphenazine/amitriptyline tabs 25mg; 2mg	4	PA
perphenazine/amitriptyline tabs 25mg; 4mg	4	PA
perphenazine/amitriptyline tabs 50mg; 4mg	4	PA
protriptyline hcl tabs 10mg	2	
protriptyline hcl tabs 5mg	2	
trimipramine maleate caps 100mg	2	
trimipramine maleate caps 25mg	2	
trimipramine maleate caps 50mg	2	
Antiemetics		
Antiemetics, Other		
compro supp 25mg	2	
dimenhydrinate inj 50mg/ml	1	

Drug Name	Drug Tier	Requirements/Limits
droperidol inj 2.5mg/ml	1	
meclizine hcl tabs 12.5mg	2	
meclizine hydrochloride tabs 25mg	2	
phenadoz supp 12.5mg	2	
phenadoz supp 25mg	2	
prochlorperazine edisylate inj 10mg/2ml	2	
prochlorperazine maleate tabs 10mg	2	
prochlorperazine maleate tabs 5mg	2	
prochlorperazine supp 25mg	2	
promethazine hcl supp 12.5mg	2	
promethazine hcl supp 25mg	2	
promethazine hcl tabs 12.5mg	4	PA
promethazine hydrochloride tabs 25mg	4	PA
promethazine hydrochloride tabs 50mg	4	PA
promethegan supp 12.5mg	2	
promethegan supp 25mg	2	
promethegan supp 50mg	2	
scopolamine pt72 1mg/3days	2	
Emetogenic Therapy Adjuncts		
aprepitant caps 0	4	PA
aprepitant caps 125mg	4	PA
aprepitant caps 40mg	4	PA
aprepitant caps 80mg	4	PA
CESAMET CAPS 1MG	5	PA
CINVANTI INJ 130MG/18ML	4	PA
dronabinol caps 10mg	2	B/D
dronabinol caps 2.5mg	2	B/D
dronabinol caps 5mg	2	B/D
EMEND INJ 150MG	4	PA
EMEND SUSR 125MG/5ML	4	PA
fosaprepitant dimeglumine inj 150mg	2	PA
granisetron hcl inj 1mg/ml	2	
granisetron hcl inj 1mg/ml	2	
granisetron hcl tabs 1mg	2	B/D
granisetron hydrochloride inj 1mg/ml	2	
granisetron hydrochloride inj 1mg/ml	2	
ondansetron hcl soln 4mg/5ml	2	B/D
ondansetron hcl tabs 24mg	2	B/D
ondansetron hydrochloride inj 40mg/20ml	2	
ondansetron hydrochloride inj 4mg/2ml	2	
ondansetron hydrochloride inj 4mg/2ml	2	
ondansetron hydrochloride tabs 4mg	2	B/D
ondansetron hydrochloride tabs 8mg	2	B/D
ondansetron odt tbdp 4mg	2	B/D
ondansetron odt tbdp 8mg	2	B/D
palonosetron hydrochloride inj 0.25mg/2ml	4	
palonosetron hydrochloride inj 0.25mg/5ml	4	
SANCUSO PTCH 3.1MG/24HR	5	
Antifungals		

Drug Name	Drug Tier	Requirements/Limits
Antifungals		
ABELCET INJ 5MG/ML	4	PA
AMBISOME INJ 50MG	5	PA
amphotericin b inj 50mg	2	B/D
caspofungin acetate inj 50mg	5	
caspofungin acetate inj 70mg	5	
ciclodan soln 8%	2	
ciclopirox nail lacquer soln 8%	2	
ciclopirox olamine crea 0.77%	2	
ciclopirox gel 0.77%	2	
ciclopirox sham 1%	2	
ciclopirox susp 0.77%	2	
clotrimazole/betamethasone dipropionate crea 0.05%; 1%	2	
clotrimazole/betamethasone dipropionate lotn 0.05%; 1%	2	
clotrimazole crea 1%	2	
clotrimazole soln 1%	2	
clotrimazole troc 10mg	2	
CRESEMBA CAPS 186MG	5	PA
CRESEMBA INJ 372MG	5	PA
econazole nitrate crea 1%	2	
ERAXIS INJ 100MG	5	
ERAXIS INJ 50MG	4	
fluconazole in dextrose inj 56mg/ml; 200mg/100ml	1	
fluconazole in nacl inj 200mg/100ml; 0.9%	2	
fluconazole in sodium chloride inj 200mg/100ml; 0.9%	2	
fluconazole in sodium chloride inj 400mg/200ml; 0.9%	2	
fluconazole susr 10mg/ml	2	
fluconazole susr 40mg/ml	2	
fluconazole tabs 100mg	2	
fluconazole tabs 150mg	2	
fluconazole tabs 200mg	2	
fluconazole tabs 50mg	2	
flucytosine caps 250mg	5	
flucytosine caps 500mg	5	
griseofulvin microsize susp 125mg/5ml	2	
griseofulvin microsize tabs 500mg	2	
griseofulvin ultramicrosize tabs 125mg	2	
griseofulvin ultramicrosize tabs 250mg	2	
itraconazole caps 100mg	2	
itraconazole soln 10mg/ml	5	
ketoconazole crea 2%	2	
ketoconazole sham 2%	2	
ketoconazole tabs 200mg	2	
MENTAX CREA 1%	4	ST
micafungin inj 100mg	5	
micafungin inj 50mg	5	
miconazole 3 supp 200mg	1	
NAFTIFINE HCL CREA 1%	3	ST
NAFTIFINE HYDROCHLORIDE CREA 2%	3	ST

Drug Name	Drug Tier	Requirements/Limits
NAFTIFINE HYDROCHLORIDE GEL 1%	3	ST
NAFTIN GEL 2%	4	ST
NATACYN SUSP 5%	3	
NOXAFIL INJ 300MG/16.7ML	5	
nyamyc powd 100000unit/gm	2	
nystatin/triamcinolone acetonide crea 100000unit/gm; 1mg/gm	2	
nystatin/triamcinolone oint 100000unit/gm; 0.1%	2	
nystatin crea 100000unit/gm	2	
nystatin oint 100000unit/gm	2	
nystatin powd 100000unit/gm	2	
nystatin susp 100000unit/ml	2	
nystatin tabs 500000unit	2	
nystop powd 100000unit/gm	2	
ORAVIG TABS 50MG	4	
posaconazole dr tbec 100mg	5	
terbinafine hcl tabs 250mg	2	
terconazole crea 0.4%	2	
terconazole crea 0.8%	2	
terconazole supp 80mg	2	
voriconazole inj 200mg	5	
voriconazole susr 40mg/ml	5	
voriconazole tabs 200mg	5	
voriconazole tabs 50mg	4	
Antigout Agents		
Antigout Agents		
allopurinol tabs 100mg	1	
allopurinol tabs 300mg	1	
colchicine tabs 0.6mg	2	
febuxostat tabs 40mg	2	
febuxostat tabs 80mg	2	
KRYSTEXXA INJ 8MG/ML	5	PA
probenecid/colchicine tabs 0.5mg; 500mg	1	
probenecid tabs 500mg	1	
Antimigraine Agents		
Ergot Alkaloids		
dihydroergotamine mesylate soln 4mg/ml	5	QL (8 ML per 23 days)
ERGOMAR SUBL 2MG	4	
ERGOTAMINE TARTRATE/CAFFEINE TABS 100MG; 1MG	3	
MIGERGOT SUPP 100MG; 2MG	5	
Prophylactic		
AIMOVIG INJ 140MG/ML	4	QL (2 ML per 30 days) PA
AIMOVIG INJ 70MG/ML	4	QL (2 ML per 30 days) PA
AJOVY INJ 225MG/1.5ML	4	PA
AJOVY INJ 225MG/1.5ML	4	PA
EMGALITY INJ 100MG/ML	4	QL (3 ML per 30 days) PA
EMGALITY INJ 120MG/ML	4	QL (1 ML per 30 days) PA
EMGALITY INJ 120MG/ML	4	QL (1 ML per 30 days) PA

Drug Name	Drug Tier	Requirements/Limits
NURTEC TBDP 75MG	5	QL (18 EA per 30 days) PA
VYEPTI INJ 100MG/ML	5	PA
Serotonin (5-HT) Receptor Agonist		
naratriptan hcl tabs 1mg	2	QL (18 EA per 30 days)
naratriptan hcl tabs 2.5mg	2	QL (18 EA per 30 days)
REYVOW TABS 100MG	4	QL (8 EA per 30 days) PA
REYVOW TABS 50MG	4	QL (4 EA per 30 days) PA
rizatriptan benzoate odt tbdp 10mg	2	QL (18 EA per 30 days)
rizatriptan benzoate odt tbdp 5mg	2	QL (18 EA per 30 days)
rizatriptan benzoate tabs 10mg	2	QL (18 EA per 30 days)
rizatriptan benzoate tabs 5mg	2	QL (18 EA per 30 days)
sumatriptan succinate refill inj 4mg/0.5ml	2	QL (4 ML per 30 days)
sumatriptan succinate refill inj 6mg/0.5ml	2	QL (4 ML per 30 days)
sumatriptan succinate inj 4mg/0.5ml	2	QL (4 ML per 30 days)
sumatriptan succinate inj 6mg/0.5ml	2	QL (6 ML per 30 days)
sumatriptan succinate inj 6mg/0.5ml	2	QL (4 ML per 30 days)
sumatriptan succinate inj 6mg/0.5ml	2	QL (4 ML per 30 days)
sumatriptan succinate inj 6mg/0.5ml	2	QL (4 ML per 30 days)
sumatriptan succinate tabs 100mg	2	QL (9 EA per 30 days)
sumatriptan succinate tabs 25mg	2	QL (9 EA per 30 days)
sumatriptan succinate tabs 50mg	2	QL (9 EA per 30 days)
sumatriptan soln 20mg/act	2	QL (12 EA per 30 days)
sumatriptan soln 5mg/act	2	QL (18 EA per 30 days)
zolmitriptan odt tbdp 2.5mg	2	QL (9 EA per 30 days)
zolmitriptan odt tbdp 5mg	2	QL (9 EA per 30 days)
zolmitriptan tabs 2.5mg	2	QL (9 EA per 30 days)
zolmitriptan tabs 5mg	2	QL (9 EA per 30 days)
Antimyasthenic Agents		
Parasympathomimetics		
guanidine hcl tabs 125mg	1	
pyridostigmine bromide er tbcr 180mg	4	
pyridostigmine bromide soln 60mg/5ml	5	
pyridostigmine bromide tabs 60mg	2	
REGONOL INJ 10MG/2ML	3	
Antimycobacterials		
Antimycobacterials, Other		
dapsone tabs 100mg	2	
dapsone tabs 25mg	2	
PRETOMANID TABS 200MG	4	QL (30 EA per 30 days) PA
rifabutin caps 150mg	2	
Antituberculars		
CAPASTAT SULFATE INJ 1GM	4	
cycloserine caps 250mg	2	
ethambutol hydrochloride tabs 100mg	2	
ethambutol hydrochloride tabs 400mg	2	
isoniazid inj 100mg/ml	1	
isoniazid syrp 50mg/5ml	1	
isoniazid tabs 100mg	1	
isoniazid tabs 300mg	1	

Drug Name	Drug Tier	Requirements/Limits
PASER PACK 4GM	4	
PRIFTIN TABS 150MG	4	
pyrazinamide tabs 500mg	1	
rifampin caps 150mg	2	
rifampin caps 300mg	2	
rifampin inj 600mg	2	
RIFATER TABS 50MG; 300MG; 120MG	4	
SIRTURO TABS 100MG	5	PA
SIRTURO TABS 20MG	5	PA
TRECATOR TABS 250MG	4	
Antineoplastics		
Alkylating Agents		
BENDEKA INJ 100MG/4ML	5	PA
BICNU INJ 100MG	5	
busulfan inj 6mg/ml	5	
BUSULFEX INJ 6MG/ML	5	
carboplatin inj 150mg/15ml	1	
carboplatin inj 450mg/45ml	1	
carboplatin inj 50mg/5ml	1	
carboplatin inj 600mg/60ml	1	
carmustine inj 100mg	5	
cisplatin inj 100mg/100ml	1	
cisplatin inj 200mg/200ml	1	
cisplatin inj 50mg/50ml	1	
CYCLOPHOSPHAMIDE CAPS 25MG	3	B/D
CYCLOPHOSPHAMIDE CAPS 50MG	3	B/D
CYCLOPHOSPHAMIDE INJ 1GM/5ML	5	
cyclophosphamide inj 1gm	5	
cyclophosphamide inj 2gm	5	
CYCLOPHOSPHAMIDE INJ 500MG/2.5ML	5	
cyclophosphamide inj 500mg	5	
CYCLOPHOSPHAMIDE TABS 25MG	3	B/D
CYCLOPHOSPHAMIDE TABS 50MG	3	B/D
dacarbazine inj 100mg	1	
dacarbazine inj 200mg	1	
EVOMELA INJ 50MG	5	PA
GLEOSTINE CAPS 100MG	4	
GLEOSTINE CAPS 10MG	4	
GLEOSTINE CAPS 40MG	4	
ifosfamide inj 1gm/20ml	1	
ifosfamide inj 3gm/60ml	1	
KISQALI FEMARA 200 DOSE TBPK 2.5MG; 200MG	5	PA
KISQALI FEMARA 400 DOSE TBPK 2.5MG; 200MG	5	PA
KISQALI FEMARA 600 DOSE TBPK 2.5MG; 200MG	5	PA
LEUKERAN TABS 2MG	5	
MATULANE CAPS 50MG	5	PA
melphalan hydrochloride inj 50mg	5	PA
oxaliplatin inj 100mg/20ml	5	
oxaliplatin inj 100mg	5	

Drug Name	Drug Tier	Requirements/Limits
oxaliplatin inj 50mg/10ml	5	
oxaliplatin inj 50mg	5	
paraplatin inj 1000mg/100ml	1	
paraplatin inj 450mg/45ml	1	
paraplatin inj 50mg/5ml	1	
paraplatin inj 50mg/5ml	1	
paraplatin inj 50mg/5ml	1	
PEPAXTO INJ 20MG	5	PA
TEMODAR INJ 100MG	5	PA
thiotepa inj 100mg	5	PA
thiotepa inj 15mg	5	PA
TREANDA INJ 100MG	5	PA
TREANDA INJ 25MG	5	PA
VALCHLOR GEL 0.016%	5	PA
YONDELIS INJ 1MG	5	PA
ZANOSAR INJ 1GM	5	
ZEPZELCA INJ 4MG	5	PA
Antiandrogens		
abiraterone acetate tabs 250mg	5	PA
abiraterone acetate tabs 500mg	5	PA
bicalutamide tabs 50mg	1	
ERLEADA TABS 60MG	5	PA
flutamide caps 125mg	2	
nilutamide tabs 150mg	5	
NUBEQA TABS 300MG	5	PA
XTANDI CAPS 40MG	5	PA
XTANDI TABS 40MG	5	PA
XTANDI TABS 80MG	5	PA
YONSA TABS 125MG	5	PA
ZYTIGA TABS 500MG	5	PA
Antiangiogenic Agents		
FOTIVDA CAPS 0.89MG	5	PA
FOTIVDA CAPS 1.34MG	5	PA
POMALYST CAPS 1MG	5	QL (21 EA per 28 days) PA
POMALYST CAPS 2MG	5	QL (21 EA per 28 days) PA
POMALYST CAPS 3MG	5	QL (21 EA per 28 days) PA
POMALYST CAPS 4MG	5	QL (21 EA per 28 days) PA
QINLOCK TABS 50MG	5	PA
REVLIMID CAPS 10MG	5	PA
REVLIMID CAPS 15MG	5	PA
REVLIMID CAPS 2.5MG	5	PA
REVLIMID CAPS 20MG	5	PA
REVLIMID CAPS 25MG	5	PA
REVLIMID CAPS 5MG	5	PA
TABRECTA TABS 150MG	5	PA
TABRECTA TABS 200MG	5	PA
THALOMID CAPS 100MG	5	PA
THALOMID CAPS 150MG	5	PA
THALOMID CAPS 200MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
THALOMID CAPS 50MG	5	PA
Antiestrogens/Modifiers		
EMCYT CAPS 140MG	5	
FASLODEX INJ 250MG/5ML	5	
fulvestrant inj 250mg/5ml	5	
SOLTAMOX SOLN 10MG/5ML	5	
tamoxifen citrate tabs 10mg	1	
tamoxifen citrate tabs 20mg	1	
toremifene citrate tabs 60mg	5	PA
Antimetabolites		
adrucil inj 2.5gm/50ml	2	B/D
adrucil inj 500mg/10ml	2	B/D
adrucil inj 5gm/100ml	2	B/D
ALIMTA INJ 100MG	5	
ALIMTA INJ 500MG	5	
ARRANON INJ 5MG/ML	5	
cladribine inj 10mg/10ml	5	B/D
clofarabine inj 1mg/ml	5	
cytarabine aqueous inj 20mg/ml	1	B/D
cytarabine aqueous inj 20mg/ml	1	B/D
cytarabine inj 100mg/ml	1	B/D
cytarabine inj 100mg/ml	1	B/D
cytarabine inj 20mg/ml	1	B/D
cytarabine inj 20mg/ml	1	B/D
DROXIA CAPS 200MG	4	
DROXIA CAPS 300MG	4	
DROXIA CAPS 400MG	4	
floxuridine inj 0.5gm	5	B/D
FLUOROPLEX CREA 1%	5	
FLUOROURACIL CREA 0.5%	5	
fluorouracil crea 5%	2	
fluorouracil inj 1gm/20ml	2	B/D
fluorouracil inj 2.5gm/50ml	2	B/D
fluorouracil inj 500mg/10ml	2	B/D
fluorouracil inj 5gm/100ml	2	B/D
fluorouracil soln 2%	2	
fluorouracil soln 5%	2	
FOLOTYN INJ 20MG/ML	5	
FOLOTYN INJ 40MG/2ML	5	
gemcitabine hydrochloride inj 1gm/10ml	5	
gemcitabine hydrochloride inj 1gm/26.3ml	5	
gemcitabine hydrochloride inj 1gm/26.3ml	5	
gemcitabine hydrochloride inj 200mg/2ml	5	
gemcitabine hydrochloride inj 200mg/5.26ml	5	
gemcitabine hydrochloride inj 200mg/5.26ml	5	
gemcitabine hydrochloride inj 200mg/5.26ml	5	
gemcitabine hydrochloride inj 2gm/20ml	5	
gemcitabine hydrochloride inj 2gm/52.6ml	5	
gemcitabine hydrochloride inj 2gm/52.6ml	5	

Drug Name	Drug Tier	Requirements/Limits
hydroxyurea caps 500mg	1	
INFUGEM INJ 1200MG/120ML; 0.9%	5	PA
INFUGEM INJ 1300MG/130ML; 0.9%	5	PA
INFUGEM INJ 1400MG/140ML; 0.9%	5	PA
INFUGEM INJ 1500MG/150ML; 0.9%	5	PA
INFUGEM INJ 1600MG/160ML; 0.9%	5	PA
INFUGEM INJ 1700MG/170ML; 0.9%	5	PA
INFUGEM INJ 1800MG/180ML; 0.9%	5	PA
INFUGEM INJ 1900MG/190ML; 0.9%	5	PA
INFUGEM INJ 2000MG/200ML; 0.9%	5	PA
INFUGEM INJ 2200MG/220ML; 0.9%	5	PA
LONSURF TABS 6.14MG; 15MG	5	PA
LONSURF TABS 8.19MG; 20MG	5	PA
mercaptopurine tabs 50mg	2	
PURIXAN SUSP 2000MG/100ML	5	
SIKLOS TABS 1000MG	4	
SIKLOS TABS 100MG	4	
TABLOID TABS 40MG	4	PA
VYXEOS INJ 100MG; 44MG	5	PA
Antineoplastics, Other		
ABRAXANE INJ 900MG; 100MG	5	
adriamycin inj 10mg	1	B/D
adriamycin inj 2mg/ml	1	B/D
adriamycin inj 50mg	1	B/D
ARSENIC TRIOXIDE INJ 10MG/10ML	3	
arsenic trioxide inj 12mg/6ml	5	
azacitidine inj 100mg	5	
BELEODAQ INJ 500MG	5	PA
bleomycin sulfate inj 15unit	1	B/D
bleomycin sulfate inj 15unit	1	B/D
bleomycin sulfate inj 30unit	1	B/D
bleomycin sulfate inj 30unit	1	B/D
BORTEZOMIB INJ 3.5MG	5	PA
BRAFTOVI CAPS 50MG	5	PA
BRAFTOVI CAPS 75MG	5	PA
COPIKTRA CAPS 15MG	5	PA
COPIKTRA CAPS 25MG	5	PA
COTELLIC TABS 20MG	5	PA
dactinomycin inj 0.5mg	5	PA
daunorubicin hydrochloride inj 20mg/4ml	1	
daunorubicin hydrochloride inj 20mg/4ml	1	
daunorubicin hydrochloride inj 50mg/10ml	1	
DAURISMO TABS 100MG	5	PA
DAURISMO TABS 25MG	5	PA
decitabine inj 50mg	5	
dexrazoxane inj 250mg	5	
dexrazoxane inj 500mg	5	
docetaxel inj 160mg/16ml	5	
docetaxel inj 160mg/8ml	5	

Drug Name	Drug Tier	Requirements/Limits
docetaxel inj 200mg/10ml	5	
docetaxel inj 20mg/2ml	5	
docetaxel inj 20mg/ml	5	
docetaxel inj 20mg/ml	5	
docetaxel inj 80mg/4ml	5	
docetaxel inj 80mg/8ml	5	
doxorubicin hcl inj 2mg/ml	1	B/D
doxorubicin hcl inj 50mg	1	B/D
doxorubicin hydrochloride liposomal inj 2mg/ml	5	
doxorubicin hydrochloride inj 10mg	1	B/D
ELZONRIS INJ 1000MCG/ML	5	PA
epirubicin hcl inj 200mg/100ml	2	
epirubicin hcl inj 50mg/25ml	2	
ERWINASE INJ 10000UNIT	5	
ERWINAZE INJ 10000UNIT	5	
FARYDAK CAPS 10MG	5	PA
FARYDAK CAPS 15MG	5	PA
FARYDAK CAPS 20MG	5	PA
fludarabine phosphate inj 50mg/2ml	5	
fludarabine phosphate inj 50mg	1	
GAVRETO CAPS 100MG	5	PA
HALAVEN INJ 1MG/2ML	5	
IBRANCE CAPS 100MG	5	PA
IBRANCE CAPS 125MG	5	PA
IBRANCE CAPS 75MG	5	PA
IBRANCE TABS 100MG	5	PA
IBRANCE TABS 125MG	5	PA
IBRANCE TABS 75MG	5	PA
idarubicin hcl inj 10mg/10ml	5	
idarubicin hcl inj 20mg/20ml	5	
idarubicin hcl inj 5mg/5ml	5	
idarubicin hydrochloride inj 10mg/10ml	5	
idarubicin hydrochloride inj 20mg/20ml	5	
idarubicin hydrochloride inj 5mg/5ml	5	
INREBIC CAPS 100MG	5	PA
ISTODAX (OVERFILL) INJ 10MG	5	
IXEMPRA KIT INJ 15MG	5	
IXEMPRA KIT INJ 45MG	5	
JEVTANA INJ 60MG/1.5ML	5	
KISQALI TBPK 200MG	5	PA
KISQALI TBPK 200MG	5	PA
KISQALI TBPK 200MG	5	PA
leucovorin calcium inj 100mg	1	
leucovorin calcium inj 200mg	1	
leucovorin calcium inj 350mg	1	
leucovorin calcium inj 500mg	1	
leucovorin calcium inj 50mg	1	
leucovorin calcium tabs 10mg	1	
leucovorin calcium tabs 15mg	1	

Drug Name	Drug Tier	Requirements/Limits
leucovorin calcium tabs 25mg	1	
leucovorin calcium tabs 5mg	1	
levoleucovorin inj 50mg	5	
LORBRENA TABS 100MG	5	PA
LORBRENA TABS 25MG	5	PA
LUMAKRAS TABS 120MG	5	PA
LYNPARZA CAPS 50MG	5	PA
LYNPARZA TABS 100MG	5	PA
LYNPARZA TABS 150MG	5	PA
MARQIBO INJ 5MG/31ML	5	PA
MEKTOVI TABS 15MG	5	PA
mitomycin inj 20mg	5	
mitomycin inj 40mg	5	
mitomycin inj 5mg	5	
mitoxantrone hcl inj 2mg/ml	2	
mitoxantrone hcl inj 2mg/ml	2	
mitoxantrone hcl inj 2mg/ml	2	
mutamycin inj 20mg	5	
mutamycin inj 40mg	5	
mutamycin inj 5mg	5	
NERLYNX TABS 40MG	5	PA
NINLARO CAPS 2.3MG	5	PA
NINLARO CAPS 3MG	5	PA
NINLARO CAPS 4MG	5	PA
ONCASPAR INJ 750UNIT/ML	5	
ONUREG TABS 200MG	5	
ONUREG TABS 300MG	5	
paclitaxel inj 100mg/16.67ml	1	
paclitaxel inj 100mg/16.7ml	1	
paclitaxel inj 150mg/25ml	1	
paclitaxel inj 300mg/50ml	1	
paclitaxel inj 30mg/5ml	1	
PEMAZYRE TABS 13.5MG	5	PA
PEMAZYRE TABS 4.5MG	5	PA
PEMAZYRE TABS 9MG	5	PA
PHESGO INJ 2000UNIT/ML; 60MG/ML; 60MG/ML	5	PA
PHESGO INJ 2000UNIT/ML; 80MG/ML; 40MG/ML	5	PA
PIQRAY 200MG DAILY DOSE TBPK 200MG	5	PA
PIQRAY 250MG DAILY DOSE TBPK 0	5	PA
PIQRAY 300MG DAILY DOSE TBPK 150MG	5	PA
PROLEUKIN INJ 22000000UNIT	5	
RETEVMO CAPS 40MG	5	PA
RETEVMO CAPS 80MG	5	PA
ROMIDEPSIN INJ 10MG	5	
ROMIDEPSIN INJ 27.5MG/5.5ML	5	
ROZLYTREK CAPS 100MG	5	PA
ROZLYTREK CAPS 200MG	5	PA
RYDAPT CAPS 25MG	5	PA
RYLAZE INJ 10MG/0.5ML	5	

Drug Name	Drug Tier	Requirements/Limits
SYLATRON INJ 200MCG	5	
SYLATRON INJ 300MCG	5	
SYLATRON INJ 600MCG	5	
SYNRIBO INJ 3.5MG	5	
TALZENNA CAPS 0.25MG	5	PA
TALZENNA CAPS 1MG	5	PA
TAZVERIK TABS 200MG	5	PA
TICE BCG INJ 50MG	4	
TRISENOX INJ 12MG/6ML	5	
TRUSELTIQ CPPK 0	5	PA
TRUSELTIQ CPPK 100MG	5	PA
TRUSELTIQ CPPK 25MG	5	PA
TRUSELTIQ CPPK 25MG	5	PA
TUKYSA TABS 150MG	5	PA
TUKYSA TABS 50MG	5	PA
valrubicin inj 40mg/ml	5	
VALSTAR INJ 40MG/ML	5	
VELCADE INJ 3.5MG	5	PA
VERZENIO TABS 100MG	5	PA
VERZENIO TABS 150MG	5	PA
VERZENIO TABS 200MG	5	PA
VERZENIO TABS 50MG	5	PA
vinblastine sulfate inj 1mg/ml	1	B/D
vincasar pfs inj 1mg/ml	1	B/D
vincristine sulfate inj 1mg/ml	1	B/D
vinorelbine tartrate inj 10mg/ml	1	
vinorelbine tartrate inj 50mg/5ml	1	
VITRAKVI CAPS 100MG	5	PA
VITRAKVI CAPS 25MG	5	PA
VITRAKVI SOLN 20MG/ML	5	PA
XPOVIO 100 MG ONCE WEEKLY TBPK 20MG	5	PA
XPOVIO 40 MG ONCE WEEKLY TBPK 20MG	5	PA
XPOVIO 40 MG TWICE WEEKLY TBPK 20MG	5	PA
XPOVIO 60 MG ONCE WEEKLY TBPK 20MG	5	PA
XPOVIO 60 MG TWICE WEEKLY TBPK 20MG	5	PA
XPOVIO 80 MG ONCE WEEKLY TBPK 20MG	5	PA
XPOVIO 80 MG TWICE WEEKLY TBPK 20MG	5	PA
XPOVIO TBPK 40MG	5	PA
XPOVIO TBPK 40MG	5	PA
XPOVIO TBPK 40MG	5	PA
XPOVIO TBPK 50MG	5	PA
XPOVIO TBPK 60MG	5	PA
ZALTRAP INJ 100MG/4ML	5	
ZALTRAP INJ 200MG/8ML	5	
ZOLINZA CAPS 100MG	5	PA
Aromatase Inhibitors, 3rd Generation		
anastrozole tabs 1mg	1	
exemestane tabs 25mg	2	
letrozole tabs 2.5mg	2	

Drug Name	Drug Tier	Requirements/Limits
Enzyme Inhibitors		
BALVERSA TABS 3MG	5	PA
BALVERSA TABS 4MG	5	PA
BALVERSA TABS 5MG	5	PA
ETOPOPHOS INJ 100MG	5	
etoposide inj 100mg/5ml	1	
etoposide inj 1gm/50ml	1	
etoposide inj 500mg/25ml	1	
irinotecan hydrochloride inj 100mg/5ml	1	
irinotecan hydrochloride inj 100mg/5ml	1	
irinotecan hydrochloride inj 100mg/5ml	1	
irinotecan hydrochloride inj 40mg/2ml	1	
irinotecan hydrochloride inj 40mg/2ml	1	
KYPROLIS INJ 10MG	5	
KYPROLIS INJ 30MG	5	
KYPROLIS INJ 60MG	5	
toposar inj 100mg/5ml	1	
toposar inj 1gm/50ml	1	
toposar inj 500mg/25ml	1	
topotecan hcl inj 4mg/4ml	5	
topotecan hydrochloride inj 4mg/4ml	5	
ZYDELIG TABS 100MG	5	PA
ZYDELIG TABS 150MG	5	PA
Molecular Target Inhibitors		
AFINITOR DISPERZ TBSO 2MG	5	PA
AFINITOR DISPERZ TBSO 3MG	5	PA
AFINITOR DISPERZ TBSO 5MG	5	PA
AFINITOR TABS 10MG	5	PA
ALECENSA CAPS 150MG	5	PA
ALIQOPA INJ 60MG	5	PA
ALUNBRIG TABS 180MG	5	PA
ALUNBRIG TABS 30MG	5	PA
ALUNBRIG TABS 90MG	5	PA
ALUNBRIG TBPK 0	5	PA
AYVAKIT TABS 100MG	5	PA
AYVAKIT TABS 200MG	5	PA
AYVAKIT TABS 25MG	5	PA
AYVAKIT TABS 300MG	5	PA
AYVAKIT TABS 50MG	5	PA
BOSULIF TABS 100MG	5	PA
BOSULIF TABS 400MG	5	PA
BOSULIF TABS 500MG	5	PA
BRUKINSA CAPS 80MG	5	PA
CABOMETYX TABS 20MG	5	PA
CABOMETYX TABS 40MG	5	PA
CABOMETYX TABS 60MG	5	PA
CALQUENCE CAPS 100MG	5	PA
CAPRELSA TABS 100MG	5	PA
CAPRELSA TABS 300MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
COMETRIQ KIT 0	5	PA
COMETRIQ KIT 0	5	PA
COMETRIQ KIT 20MG	5	PA
ERIVEDGE CAPS 150MG	5	PA
erlotinib hydrochloride tabs 100mg	5	PA
erlotinib hydrochloride tabs 150mg	5	PA
erlotinib hydrochloride tabs 25mg	5	PA
everolimus tabs 10mg	5	PA
everolimus tabs 2.5mg	5	PA
everolimus tabs 5mg	5	PA
everolimus tabs 7.5mg	5	PA
everolimus tbso 2mg	5	PA
everolimus tbso 3mg	5	PA
everolimus tbso 5mg	5	PA
EXKIVITY CAPS 40MG	5	PA
GILOTRIF TABS 20MG	5	PA
GILOTRIF TABS 30MG	5	PA
GILOTRIF TABS 40MG	5	PA
ICLUSIG TABS 10MG	5	PA
ICLUSIG TABS 15MG	5	PA
ICLUSIG TABS 30MG	5	PA
ICLUSIG TABS 45MG	5	PA
IDHIFA TABS 100MG	5	PA
IDHIFA TABS 50MG	5	PA
imatinib mesylate tabs 100mg	5	PA
imatinib mesylate tabs 400mg	5	PA
IMBRUVICA CAPS 140MG	5	PA
IMBRUVICA CAPS 70MG	5	PA
IMBRUVICA TABS 140MG	5	PA
IMBRUVICA TABS 280MG	5	PA
IMBRUVICA TABS 420MG	5	PA
IMBRUVICA TABS 560MG	5	PA
INLYTA TABS 1MG	5	PA
INLYTA TABS 5MG	5	PA
INQOVI TABS 100MG; 35MG	5	PA
IRESSA TABS 250MG	5	PA
JAKAFI TABS 10MG	5	QL (60 EA per 30 days) PA
JAKAFI TABS 15MG	5	QL (60 EA per 30 days) PA
JAKAFI TABS 20MG	5	QL (60 EA per 30 days) PA
JAKAFI TABS 25MG	5	QL (60 EA per 30 days) PA
JAKAFI TABS 5MG	5	QL (60 EA per 30 days) PA
KOSELUGO CAPS 10MG	5	PA
KOSELUGO CAPS 25MG	5	PA
lapatinib ditosylate tabs 250mg	5	PA
LENVIMA 10 MG DAILY DOSE CPPK 10MG	5	PA
LENVIMA 12MG DAILY DOSE CPPK 4MG	5	PA
LENVIMA 14 MG DAILY DOSE CPPK 0	5	PA
LENVIMA 18 MG DAILY DOSE CPPK 0	5	PA
LENVIMA 20 MG DAILY DOSE CPPK 10MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
LENVIMA 24 MG DAILY DOSE CPPK 0	5	PA
LENVIMA 4 MG DAILY DOSE CPPK 4MG	5	PA
LENVIMA 8 MG DAILY DOSE CPPK 4MG	5	PA
MEKINIST TABS 0.5MG	5	PA
MEKINIST TABS 2MG	5	PA
NEXAVAR TABS 200MG	5	PA
ODOMZO CAPS 200MG	5	PA
RUBRACA TABS 200MG	5	PA
RUBRACA TABS 250MG	5	PA
RUBRACA TABS 300MG	5	PA
SPRYCEL TABS 100MG	5	PA
SPRYCEL TABS 140MG	5	PA
SPRYCEL TABS 20MG	5	PA
SPRYCEL TABS 50MG	5	PA
SPRYCEL TABS 70MG	5	PA
SPRYCEL TABS 80MG	5	PA
STIVARGA TABS 40MG	5	PA
sunitinib malate caps 12.5mg	5	PA
sunitinib malate caps 25mg	5	PA
sunitinib malate caps 37.5mg	5	PA
sunitinib malate caps 50mg	5	PA
SUTENT CAPS 12.5MG	5	PA
SUTENT CAPS 25MG	5	PA
SUTENT CAPS 37.5MG	5	PA
SUTENT CAPS 50MG	5	PA
TAFINLAR CAPS 50MG	5	PA
TAFINLAR CAPS 75MG	5	PA
TAGRISSO TABS 40MG	5	PA
TAGRISSO TABS 80MG	5	PA
TASIGNA CAPS 150MG	5	PA
TASIGNA CAPS 200MG	5	PA
TASIGNA CAPS 50MG	5	PA
temsirolimus inj 25mg/ml	5	
TEPMETKO TABS 225MG	5	PA
TIBSOVO TABS 250MG	5	PA
TORISEL INJ 25MG/ML	5	
TURALIO CAPS 200MG	5	PA
TYKERB TABS 250MG	5	PA
UKONIQ TABS 200MG	5	PA
VENCLEXTA STARTING PACK TBPK 0	5	PA
VENCLEXTA TABS 100MG	5	PA
VENCLEXTA TABS 10MG	3	PA
VENCLEXTA TABS 50MG	3	PA
VIZIMPRO TABS 15MG	5	PA
VIZIMPRO TABS 30MG	5	PA
VIZIMPRO TABS 45MG	5	PA
VOTRIENT TABS 200MG	5	PA
WELIREG TABS 40MG	5	PA
XALKORI CAPS 200MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
XALKORI CAPS 250MG	5	PA
XOSPATA TABS 40MG	5	PA
ZEJULA CAPS 100MG	5	PA
ZELBORAF TABS 240MG	5	PA
ZYKADIA CAPS 150MG	5	PA
ZYKADIA TABS 150MG	5	PA
Monoclonal Antibody/Antibody-Drug Conjugate		
ADCETRIS INJ 50MG	4	
ARZERRA INJ 1000MG/50ML	5	
ARZERRA INJ 1000MG/50ML	5	
ARZERRA INJ 100MG/5ML	5	
ARZERRA INJ 100MG/5ML	5	
AVASTIN INJ 100MG/4ML	5	
AVASTIN INJ 400MG/16ML	5	
BAVENCIO INJ 200MG/10ML	5	PA
BESPONSA INJ 0.9MG	5	PA
BLINCYTO INJ 35MCG	5	PA
CYRAMZA INJ 100MG/10ML	5	PA
CYRAMZA INJ 500MG/50ML	5	PA
DANYELZA INJ 40MG/10ML	5	PA
DARZALEX FASPRO INJ 1800MG/15ML; 30000UNIT/15ML	5	PA
DARZALEX INJ 100MG/5ML	5	PA
DARZALEX INJ 400MG/20ML	5	PA
EMPLICITI INJ 300MG	5	PA
EMPLICITI INJ 400MG	5	PA
ENHERTU INJ 100MG	5	PA
ERBITUX INJ 100MG/50ML	5	PA
ERBITUX INJ 200MG/100ML	5	PA
GAZYVA INJ 1000MG/40ML	5	PA
HERCEPTIN HYLECTA INJ 10000UNIT/5ML; 600MG/5ML	5	PA
HERCEPTIN INJ 150MG	5	PA
HERCEPTIN INJ 440MG	5	PA
HERZUMA INJ 150MG	5	PA
HERZUMA INJ 420MG	5	PA
IMFINZI INJ 120MG/2.4ML	5	PA
IMFINZI INJ 500MG/10ML	5	PA
JEMPERLI INJ 500MG/10ML	5	PA
KADCYLA INJ 100MG	5	
KADCYLA INJ 160MG	5	
KANJINTI INJ 150MG	5	PA
KANJINTI INJ 420MG	5	PA
KEYTRUDA INJ 100MG/4ML	5	PA
LARTRUVO INJ 190MG/19ML	5	PA
LARTRUVO INJ 500MG/50ML	5	PA
LIBTAYO INJ 350MG/7ML	5	PA
LUMOXITI INJ 1MG	5	PA
MARGENZA INJ 250MG/10ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
MONJUVI INJ 200MG	5	PA
MVASI INJ 100MG/4ML	5	PA
MVASI INJ 400MG/16ML	5	PA
MYLOTARG INJ 4.5MG	5	PA
OGIVRI INJ 1.1%; 420MG	5	PA
OGIVRI INJ 150MG	5	PA
ONTRUZANT INJ 150MG	5	PA
ONTRUZANT INJ 420MG	5	PA
OPDIVO INJ 100MG/10ML	5	PA
OPDIVO INJ 120MG/12ML	5	PA
OPDIVO INJ 240MG/24ML	5	PA
OPDIVO INJ 40MG/4ML	5	PA
PADCEV INJ 20MG	5	PA
PADCEV INJ 30MG	5	PA
PERJETA INJ 420MG/14ML	5	PA
POLIVY INJ 140MG	5	PA
POLIVY INJ 30MG	5	PA
PORTRAZZA INJ 800MG/50ML	5	PA
RIABNI INJ 100MG/10ML	5	PA
RIABNI INJ 500MG/50ML	5	PA
RITUXAN HYCELA INJ 23400UNT/11.7ML; 1400MG/11.7ML	5	PA
RITUXAN HYCELA INJ 26800UNT/13.4ML; 1600MG/13.4ML	5	PA
RITUXAN INJ 100MG/10ML	5	PA
RITUXAN INJ 500MG/50ML	5	PA
RYBREVANT INJ 350MG/7ML	5	PA
SARCLISA INJ 100MG/5ML	5	PA
SARCLISA INJ 500MG/25ML	5	PA
TECENTRIQ INJ 1200MG/20ML	5	PA
TECENTRIQ INJ 840MG/14ML	5	PA
TIVDAK INJ 40MG	5	PA
TRAZIMERA INJ 150MG	5	PA
TRAZIMERA INJ 420MG	5	PA
TRODELVY INJ 180MG	5	PA
TRUXIMA INJ 100MG/10ML	5	PA
TRUXIMA INJ 500MG/50ML	5	PA
VECTIBIX INJ 100MG/5ML	5	PA
VECTIBIX INJ 400MG/20ML	5	PA
YERVOY INJ 200MG/40ML	5	PA
YERVOY INJ 50MG/10ML	5	PA
ZYNLONTA INJ 10MG	5	PA
Retinoids		
bexarotene caps 75mg	5	PA
PANRETIN GEL 0.1%	5	
TARGRETIN GEL 1%	5	PA
tretinoin caps 10mg	5	PA
Treatment Adjuncts		
ELITEK INJ 1.5MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
ELITEK INJ 7.5MG	5	PA
mesna inj 100mg/ml	1	
MESNEX TABS 400MG	5	
Antiparasitics		
Anthelmintics		
albendazole tabs 200mg	5	
ivermectin tabs 3mg	2	
praziquantel tabs 600mg	2	
Antiprotozoals		
ALINIA SUSR 100MG/5ML	5	
ALINIA TABS 500MG	5	
atovaquone/proguanil hcl tabs 250mg; 100mg	2	
atovaquone/proguanil hcl tabs 62.5mg; 25mg	2	
atovaquone susp 750mg/5ml	5	
chloroquine phosphate tabs 250mg	1	
chloroquine phosphate tabs 500mg	1	
COARTEM TABS 20MG; 120MG	4	
DARAPRIM TABS 25MG	5	
hydroxychloroquine sulfate tabs 100mg	1	
hydroxychloroquine sulfate tabs 200mg	1	
hydroxychloroquine sulfate tabs 300mg	1	
hydroxychloroquine sulfate tabs 400mg	1	
KRINTAFEL TABS 150MG	3	
mefloquine hcl tabs 250mg	1	
nitazoxanide tabs 500mg	5	
pentamidine isethionate inj 300mg	2	
pentamidine isethionate solr 300mg	2	B/D
PRIMAQUINE PHOSPHATE TABS 26.3MG	3	
pyrimethamine tabs 25mg	5	
quinine sulfate caps 324mg	2	PA
tinidazole tabs 250mg	2	
tinidazole tabs 500mg	2	
Antiparkinson Agents		
Anticholinergics		
benztropine mesylate tabs 0.5mg	1	
benztropine mesylate tabs 1mg	1	
benztropine mesylate tabs 2mg	1	
trihexyphenidyl hydrochloride tabs 2mg	2	
trihexyphenidyl hydrochloride tabs 5mg	2	
Antiparkinson Agents, Other		
entacapone tabs 200mg	2	
ONGENTYS CAPS 25MG	4	ST
ONGENTYS CAPS 50MG	4	ST
tolcapone tabs 100mg	5	
Dopamine Agonists		
APOKYN INJ 30MG/3ML	5	PA
bromocriptine mesylate caps 5mg	2	
bromocriptine mesylate tabs 2.5mg	2	
NEUPRO PT24 1MG/24HR	3	

Drug Name	Drug Tier	Requirements/Limits
NEUPRO PT24 2MG/24HR	3	
NEUPRO PT24 3MG/24HR	3	
NEUPRO PT24 4MG/24HR	3	
NEUPRO PT24 6MG/24HR	3	
NEUPRO PT24 8MG/24HR	3	
pramipexole dihydrochloride er tb24 0.375mg	2	
pramipexole dihydrochloride er tb24 0.75mg	2	
pramipexole dihydrochloride er tb24 1.5mg	2	
pramipexole dihydrochloride er tb24 2.25mg	2	
pramipexole dihydrochloride er tb24 3.75mg	2	
pramipexole dihydrochloride er tb24 3mg	2	
pramipexole dihydrochloride er tb24 4.5mg	2	
pramipexole dihydrochloride tabs 0.125mg	1	
pramipexole dihydrochloride tabs 0.25mg	1	
pramipexole dihydrochloride tabs 0.5mg	1	
pramipexole dihydrochloride tabs 0.75mg	1	
pramipexole dihydrochloride tabs 1.5mg	1	
pramipexole dihydrochloride tabs 1mg	1	
ropinirole hcl tabs 0.5mg	1	
ropinirole hcl tabs 1mg	1	
ropinirole hcl tabs 2mg	1	
ropinirole hcl tabs 4mg	1	
ropinirole hcl tabs 5mg	1	
ropinirole hydrochloride tabs 0.25mg	1	
ropinirole hydrochloride tabs 3mg	1	
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
carbidopa/levodopa er tbcr 25mg; 100mg	1	
carbidopa/levodopa er tbcr 50mg; 200mg	1	
carbidopa/levodopa odt tbdp 10mg; 100mg	1	
carbidopa/levodopa odt tbdp 25mg; 100mg	1	
carbidopa/levodopa odt tbdp 25mg; 250mg	1	
carbidopa/levodopa/entacapone tabs 12.5mg; 200mg; 50mg	4	
carbidopa/levodopa/entacapone tabs 18.75mg; 200mg; 75mg	4	
carbidopa/levodopa/entacapone tabs 25mg; 200mg; 100mg	4	
carbidopa/levodopa/entacapone tabs 31.25mg; 200mg; 125mg	4	
carbidopa/levodopa/entacapone tabs 37.5mg; 200mg; 150mg	4	
carbidopa/levodopa/entacapone tabs 50mg; 200mg; 200mg	4	
carbidopa/levodopa tabs 10mg; 100mg	1	
carbidopa/levodopa tabs 25mg; 100mg	1	
carbidopa/levodopa tabs 25mg; 250mg	1	
carbidopa tabs 25mg	2	
RYTARY CPCR 23.75MG; 95MG	4	
RYTARY CPCR 36.25MG; 145MG	4	
RYTARY CPCR 48.75MG; 195MG	4	
RYTARY CPCR 61.25MG; 245MG	4	
Monoamine Oxidase B (MAO-B) Inhibitors		
rasagiline mesylate tabs 0.5mg	2	

Drug Name	Drug Tier	Requirements/Limits
rasagiline mesylate tabs 1mg	2	
selegiline hcl caps 5mg	2	
selegiline hcl tabs 5mg	2	
ZELAPAR TBDP 1.25MG	5	
Antipsychotics		
1st Generation/Typical		
chlorpromazine hcl inj 25mg/ml	2	
chlorpromazine hcl inj 50mg/2ml	2	
chlorpromazine hcl tabs 100mg	2	
chlorpromazine hcl tabs 10mg	2	
chlorpromazine hcl tabs 200mg	2	
chlorpromazine hcl tabs 25mg	2	
chlorpromazine hcl tabs 50mg	2	
chlorpromazine hydrochloride conc 100mg/ml	2	
chlorpromazine hydrochloride conc 30mg/ml	2	
fluphenazine decanoate inj 25mg/ml	2	
fluphenazine hcl conc 5mg/ml	2	
fluphenazine hcl inj 2.5mg/ml	2	
fluphenazine hcl tabs 10mg	2	
fluphenazine hcl tabs 1mg	2	
fluphenazine hcl tabs 2.5mg	2	
fluphenazine hcl tabs 5mg	2	
fluphenazine hydrochloride elix 2.5mg/5ml	2	
haloperidol decanoate inj 100mg/ml	2	
haloperidol decanoate inj 100mg/ml	2	
haloperidol decanoate inj 50mg/ml	2	
haloperidol decanoate inj 50mg/ml	2	
haloperidol lactate inj 5mg/ml	2	
haloperidol conc 2mg/ml	2	
haloperidol tabs 0.5mg	2	
haloperidol tabs 10mg	2	
haloperidol tabs 1mg	2	
haloperidol tabs 20mg	2	
haloperidol tabs 2mg	2	
haloperidol tabs 5mg	2	
loxapine succinate caps 25mg	1	
loxapine succinate caps 50mg	1	
loxapine succinate caps 5mg	1	
loxapine caps 10mg	1	
loxapine caps 25mg	1	
loxapine caps 50mg	1	
loxapine caps 5mg	1	
MOLINDONE HYDROCHLORIDE TABS 10MG	3	
MOLINDONE HYDROCHLORIDE TABS 25MG	3	
MOLINDONE HYDROCHLORIDE TABS 5MG	3	
perphenazine tabs 16mg	2	
perphenazine tabs 2mg	2	
perphenazine tabs 4mg	2	
perphenazine tabs 8mg	2	

Drug Name	Drug Tier	Requirements/Limits
pimozide tabs 1mg	2	
pimozide tabs 2mg	2	
thioridazine hcl tabs 100mg	2	
thioridazine hcl tabs 10mg	2	
thioridazine hcl tabs 25mg	2	
thioridazine hcl tabs 50mg	2	
thiothixene caps 10mg	1	
thiothixene caps 1mg	1	
thiothixene caps 2mg	1	
thiothixene caps 5mg	1	
trifluoperazine hcl tabs 10mg	1	
trifluoperazine hcl tabs 2mg	1	
trifluoperazine hcl tabs 5mg	1	
trifluoperazine hydrochloride tabs 1mg	1	
2nd Generation/Atypical		
ABILIFY MAINTENA INJ 300MG	5	ST
ABILIFY MAINTENA INJ 300MG	5	ST
ABILIFY MAINTENA INJ 400MG	5	ST
ABILIFY MAINTENA INJ 400MG	5	ST
ABILIFY MYCITE MAINTENANCE KIT TABS 10MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE MAINTENANCE KIT TABS 15MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE MAINTENANCE KIT TABS 20MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE MAINTENANCE KIT TABS 2MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE MAINTENANCE KIT TABS 30MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE MAINTENANCE KIT TABS 5MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE STARTER KIT TABS 10MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE STARTER KIT TABS 15MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE STARTER KIT TABS 20MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE STARTER KIT TABS 2MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE STARTER KIT TABS 30MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE STARTER KIT TABS 5MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE TABS 10MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE TABS 15MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE TABS 20MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE TABS 2MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE TABS 30MG	5	QL (30 EA per 30 days) ST
ABILIFY MYCITE TABS 5MG	5	QL (30 EA per 30 days) ST
aripiprazole odt tbdp 10mg	5	
aripiprazole odt tbdp 15mg	5	
aripiprazole soln 1mg/ml	2	
aripiprazole tabs 10mg	2	
aripiprazole tabs 15mg	2	
aripiprazole tabs 20mg	2	
aripiprazole tabs 2mg	2	
aripiprazole tabs 30mg	2	
aripiprazole tabs 5mg	2	
ARISTADA INITIO INJ 675MG/2.4ML	5	ST
ARISTADA INJ 1064MG/3.9ML	5	ST
ARISTADA INJ 441MG/1.6ML	5	ST

Drug Name	Drug Tier	Requirements/Limits
ARISTADA INJ 662MG/2.4ML	5	ST
ARISTADA INJ 882MG/3.2ML	5	ST
ASENAPINE MALEATE SL SUBL 10MG	4	
ASENAPINE MALEATE SL SUBL 2.5MG	4	
ASENAPINE MALEATE SL SUBL 5MG	4	
CAPLYTA CAPS 42MG	5	QL (30 EA per 30 days) ST
FANAPT TITRATION PACK TABS 0	4	ST
FANAPT TABS 10MG	5	ST
FANAPT TABS 12MG	5	ST
FANAPT TABS 1MG	4	ST
FANAPT TABS 2MG	4	ST
FANAPT TABS 4MG	4	ST
FANAPT TABS 6MG	5	ST
FANAPT TABS 8MG	5	ST
GEODON INJ 20MG	4	ST
INVEGA HAFYERA INJ 1092MG/3.5ML	5	ST
INVEGA HAFYERA INJ 1560MG/5ML	5	ST
INVEGA SUSTENNA INJ 117MG/0.75ML	5	ST
INVEGA SUSTENNA INJ 156MG/ML	5	ST
INVEGA SUSTENNA INJ 234MG/1.5ML	5	ST
INVEGA SUSTENNA INJ 39MG/0.25ML	4	ST
INVEGA SUSTENNA INJ 78MG/0.5ML	5	ST
INVEGA TRINZA INJ 273MG/0.875ML	5	ST
INVEGA TRINZA INJ 410MG/1.315ML	5	ST
INVEGA TRINZA INJ 546MG/1.75ML	5	ST
INVEGA TRINZA INJ 819MG/2.625ML	5	ST
LATUDA TABS 120MG	5	ST
LATUDA TABS 20MG	5	ST
LATUDA TABS 40MG	5	ST
LATUDA TABS 60MG	5	ST
LATUDA TABS 80MG	5	ST
LYBALVI TABS 10MG; 10MG	5	QL (30 EA per 30 days) ST
LYBALVI TABS 15MG; 10MG	5	QL (30 EA per 30 days) ST
LYBALVI TABS 20MG; 10MG	5	QL (30 EA per 30 days) ST
LYBALVI TABS 5MG; 10MG	5	QL (30 EA per 30 days) ST
NUPLAZID CAPS 34MG	5	QL (30 EA per 30 days) PA
NUPLAZID TABS 10MG	5	QL (90 EA per 30 days) PA
NUPLAZID TABS 17MG	5	QL (60 EA per 30 days) PA
olanzapine odt tbdp 10mg	2	
olanzapine odt tbdp 15mg	2	
olanzapine odt tbdp 20mg	2	
olanzapine odt tbdp 5mg	2	
OLANZAPINE INJ 10MG	3	
olanzapine tabs 10mg	2	
olanzapine tabs 15mg	2	
olanzapine tabs 2.5mg	2	
olanzapine tabs 20mg	2	
olanzapine tabs 5mg	2	
olanzapine tabs 7.5mg	2	

Drug Name	Drug Tier	Requirements/Limits
paliperidone er tb24 1.5mg	4	ST
paliperidone er tb24 3mg	4	ST
paliperidone er tb24 6mg	4	ST
paliperidone er tb24 9mg	5	ST
PERSERIS INJ 120MG	5	ST
PERSERIS INJ 90MG	5	ST
quetiapine fumarate er tb24 150mg	2	
quetiapine fumarate er tb24 200mg	2	
quetiapine fumarate er tb24 300mg	2	
quetiapine fumarate er tb24 400mg	2	
quetiapine fumarate er tb24 50mg	2	
quetiapine fumarate tabs 100mg	1	
quetiapine fumarate tabs 200mg	1	
quetiapine fumarate tabs 25mg	1	
quetiapine fumarate tabs 300mg	1	
quetiapine fumarate tabs 400mg	1	
quetiapine fumarate tabs 50mg	1	
REXULTI TABS 0.25MG	5	ST
REXULTI TABS 0.5MG	5	ST
REXULTI TABS 1MG	5	ST
REXULTI TABS 2MG	5	ST
REXULTI TABS 3MG	5	ST
REXULTI TABS 4MG	5	ST
RISPERDAL CONSTA INJ 12.5MG	4	ST
RISPERDAL CONSTA INJ 25MG	4	ST
RISPERDAL CONSTA INJ 37.5MG	5	ST
RISPERDAL CONSTA INJ 50MG	5	ST
risperidone odt tbdp 0.25mg	2	
risperidone odt tbdp 0.5mg	2	
risperidone odt tbdp 1mg	2	
risperidone odt tbdp 2mg	2	
risperidone odt tbdp 3mg	2	
risperidone odt tbdp 4mg	2	
risperidone soln 1mg/ml	2	
risperidone tabs 0.25mg	2	
risperidone tabs 0.5mg	2	
risperidone tabs 1mg	2	
risperidone tabs 2mg	2	
risperidone tabs 3mg	2	
risperidone tabs 4mg	2	
SAPHRIS SUBL 10MG	4	ST
SAPHRIS SUBL 2.5MG	4	ST
SAPHRIS SUBL 5MG	4	ST
SECUADO PT24 3.8MG/24HR	4	ST
SECUADO PT24 5.7MG/24HR	4	ST
SECUADO PT24 7.6MG/24HR	4	ST
VRAYLAR CAPS 1.5MG	5	QL (30 EA per 30 days) ST
VRAYLAR CAPS 3MG	5	QL (30 EA per 30 days) ST
VRAYLAR CAPS 4.5MG	5	QL (30 EA per 30 days) ST

Drug Name	Drug Tier	Requirements/Limits
VRAYLAR CAPS 6MG	5	QL (30 EA per 30 days) ST
VRAYLAR CPPK 0	4	QL (14 EA per 365 days) ST
ziprasidone hcl caps 20mg	2	
ziprasidone hcl caps 40mg	2	
ziprasidone hcl caps 60mg	2	
ziprasidone hcl caps 80mg	2	
ziprasidone mesylate inj 20mg	2	ST
ZYPREXA RELPREVV INJ 210MG	4	ST
ZYPREXA RELPREVV INJ 300MG	5	ST
ZYPREXA RELPREVV INJ 405MG	5	ST
Treatment-Resistant		
clozapine odt tbdp 100mg	4	
clozapine odt tbdp 12.5mg	4	
clozapine odt tbdp 150mg	4	
clozapine odt tbdp 200mg	4	
clozapine odt tbdp 25mg	4	
clozapine tabs 100mg	2	
clozapine tabs 200mg	2	
clozapine tabs 25mg	2	
clozapine tabs 50mg	2	
VERSACLOZ SUSP 50MG/ML	5	
Antispasticity Agents		
Antispasticity Agents		
baclofen inj 20000mcg/20ml	5	B/D
baclofen inj 40mg/20ml	5	B/D
baclofen inj 500mcg/ml	5	B/D
baclofen inj 50mcg/ml	4	B/D
baclofen tabs 10mg	2	
baclofen tabs 20mg	2	
baclofen tabs 5mg	2	
BOTOX INJ 100UNIT	4	PA
BOTOX INJ 200UNIT	4	PA
dantrolene sodium caps 100mg	1	
dantrolene sodium caps 25mg	1	
dantrolene sodium caps 50mg	1	
DYSPORT INJ 300UNIT	4	PA
DYSPORT INJ 500UNIT	4	PA
GABLOFEN INJ 10000MCG/20ML	4	B/D
GABLOFEN INJ 10000MCG/20ML	4	B/D
GABLOFEN INJ 20000MCG/20ML	4	B/D
GABLOFEN INJ 20000MCG/20ML	4	B/D
GABLOFEN INJ 40000MCG/20ML	5	B/D
GABLOFEN INJ 40000MCG/20ML	4	B/D
GABLOFEN INJ 50MCG/ML	4	B/D
LIORESAL INTRATHECAL INJ 0.05MG/ML	3	B/D
LIORESAL INTRATHECAL INJ 10MG/20ML	3	B/D
LIORESAL INTRATHECAL INJ 10MG/5ML	5	B/D
LIORESAL INTRATHECAL INJ 40MG/20ML	5	B/D
MYOBLOC INJ 10000UNIT/2ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
MYOBLOC INJ 2500UNIT/0.5ML	5	PA
MYOBLOC INJ 5000UNIT/ML	5	PA
tizanidine hcl caps 2mg	2	
tizanidine hcl caps 4mg	2	
tizanidine hcl caps 6mg	2	
tizanidine hcl tabs 2mg	1	
tizanidine hydrochloride caps 2mg	2	
tizanidine hydrochloride caps 4mg	2	
tizanidine hydrochloride caps 6mg	2	
tizanidine hydrochloride tabs 2mg	1	
tizanidine hydrochloride tabs 4mg	1	
XEOMIN INJ 100UNIT	4	PA
XEOMIN INJ 200UNIT	5	PA
XEOMIN INJ 50UNIT	4	PA
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
cidofovir inj 75mg/ml	5	
ganciclovir inj 500mg/10ml	1	B/D
ganciclovir inj 500mg	1	B/D
PREVYMIS INJ 240MG/12ML	5	
PREVYMIS INJ 480MG/24ML	5	
PREVYMIS TABS 240MG	5	
PREVYMIS TABS 480MG	5	
valganciclovir hydrochlorde solr 50mg/ml	5	
valganciclovir tabs 450mg	5	
ZIRGAN GEL 0.15%	4	
Anti-hepatitis B (HBV) Agents		
adefovir dipivoxil tabs 10mg	5	
BARACLUDE SOLN 0.05MG/ML	5	
entecavir tabs 0.5mg	4	
entecavir tabs 1mg	4	
EPIVIR HBV SOLN 5MG/ML	4	
INTRON A INJ 10MU/ML	5	
INTRON A INJ 10MU	5	
INTRON A INJ 18MU	5	
INTRON A INJ 50MU	5	
INTRON A INJ 6000000UNIT/ML	5	
lamivudine tabs 100mg	2	
VEMLIDY TABS 25MG	5	
Anti-hepatitis C (HCV) Agents		
EPCLUSA TABS 200MG; 50MG	5	PA
EPCLUSA TABS 400MG; 100MG	5	PA
HARVONI PACK 33.75MG; 150MG	5	PA
HARVONI PACK 45MG; 200MG	5	PA
HARVONI TABS 45MG; 200MG	5	PA
HARVONI TABS 90MG; 400MG	5	PA
LEDIPASVIR/SOFOSBUVIR TABS 90MG; 400MG	5	PA
MAVYRET TABS 100MG; 40MG	5	PA
SOFOSBUVIR/VELPATASVIR TABS 400MG; 100MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
SOVALDI PACK 150MG	5	PA
SOVALDI PACK 200MG	5	PA
SOVALDI TABS 200MG	5	PA
SOVALDI TABS 400MG	5	PA
ZEPATIER TABS 50MG; 100MG	5	PA
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY TABS 50MG; 200MG; 25MG	5	
CABENUVA INJ 400MG/2ML; 600MG/2ML	5	
CABENUVA INJ 600MG/3ML; 900MG/3ML	5	
DELSTRIGO TABS 100MG; 300MG; 300MG	5	
DOVATO TABS 50MG; 300MG	5	
GENVOYA TABS 150MG; 150MG; 200MG; 10MG	5	
ISENTRESS HD TABS 600MG	5	
ISENTRESS CHEW 100MG	5	
ISENTRESS CHEW 25MG	4	
ISENTRESS PACK 100MG	5	
ISENTRESS TABS 400MG	5	
JULUCA TABS 50MG; 25MG	5	
STRIBILD TABS 150MG; 150MG; 200MG; 300MG	5	
TIVICAY PD TBSO 5MG	4	
TIVICAY TABS 10MG	4	
TIVICAY TABS 25MG	5	
TIVICAY TABS 50MG	5	
TRIUMEQ TABS 600MG; 50MG; 300MG	5	
VOCABRIA TABS 30MG	5	
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
ATRIPLA TABS 600MG; 200MG; 300MG	5	
COMPLERA TABS 200MG; 25MG; 300MG	5	
EDURANT TABS 25MG	5	
efavirenz/emtricitabine/tenofovir disoproxil fumarate tabs 600mg; 200mg; 300mg	5	
efavirenz/lamivudine/tenofovir disoproxil fumarate tabs 400mg; 300mg; 300mg	5	
efavirenz/lamivudine/tenofovir disoproxil fumarate tabs 600mg; 300mg; 300mg	5	
efavirenz caps 200mg	5	
efavirenz caps 50mg	4	
efavirenz tabs 600mg	5	
etravirine tabs 100mg	5	
etravirine tabs 200mg	5	
INTELENCE TABS 100MG	5	
INTELENCE TABS 200MG	5	
INTELENCE TABS 25MG	4	
nevirapine er tb24 100mg	2	
nevirapine er tb24 400mg	2	
nevirapine susp 50mg/5ml	2	
nevirapine tabs 200mg	2	
ODEFSEY TABS 200MG; 25MG; 25MG	5	

Drug Name	Drug Tier	Requirements/Limits
PIFELTRO TABS 100MG	5	
RESCRIPTOR TABS 200MG	4	
SYMFI LO TABS 400MG; 300MG; 300MG	5	
SYMFI TABS 600MG; 300MG; 300MG	5	
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
abacavir sulfate/lamivudine/zidovudine tabs 300mg; 150mg; 300mg	5	
abacavir sulfate/lamivudine tabs 600mg; 300mg	4	
abacavir sulfate tabs 300mg	2	
abacavir soln 20mg/ml	2	
abacavir tabs 300mg	2	
CIMDUO TABS 300MG; 300MG	5	
DESCOVY TABS 200MG; 25MG	5	
didanosine cpdr 200mg	2	
didanosine cpdr 250mg	2	
didanosine cpdr 400mg	2	
emtricitabine/tenofovir disoproxil fumarate tabs 100mg; 150mg	5	
emtricitabine/tenofovir disoproxil fumarate tabs 133mg; 200mg	5	
emtricitabine/tenofovir disoproxil fumarate tabs 200mg; 300mg	5	
emtricitabine/tenofovir disoproxil tabs 167mg; 250mg	5	
emtricitabine caps 200mg	2	
EMTRIVA CAPS 200MG	4	
EMTRIVA SOLN 10MG/ML	4	
lamivudine/zidovudine tabs 150mg; 300mg	4	
lamivudine soln 10mg/ml	2	
lamivudine tabs 150mg	2	
lamivudine tabs 300mg	2	
RETROVIR IV INFUSION INJ 10MG/ML	4	
stavudine caps 15mg	1	
stavudine caps 20mg	1	
stavudine caps 30mg	1	
stavudine caps 30mg	1	
stavudine caps 40mg	1	
TEMIXYS TABS 300MG; 300MG	5	
tenofovir disoproxil fumarate tabs 300mg	4	
TRUVADA TABS 100MG; 150MG	5	
TRUVADA TABS 133MG; 200MG	5	
TRUVADA TABS 167MG; 250MG	5	
TRUVADA TABS 200MG; 300MG	5	
VIDEX EC CPDR 125MG	4	
VIDEX PEDIATRIC SOLR 2GM	4	
VIDEX PEDIATRIC SOLR 4GM	4	
VIREAD POWD 40MG/GM	5	
VIREAD TABS 150MG	5	
VIREAD TABS 200MG	5	

Drug Name	Drug Tier	Requirements/Limits
VIREAD TABS 250MG	5	
zidovudine caps 100mg	1	
zidovudine syrp 50mg/5ml	1	
zidovudine tabs 300mg	1	
Anti-HIV Agents, Other		
FUZEON INJ 90MG	5	
RUKOBIA TB12 600MG	5	
SELZENTRY SOLN 20MG/ML	5	
SELZENTRY TABS 150MG	5	
SELZENTRY TABS 25MG	4	
SELZENTRY TABS 300MG	5	
SELZENTRY TABS 75MG	5	
TROGARZO INJ 200MG/1.33ML	5	
TYBOST TABS 150MG	3	
Anti-HIV Agents, Protease Inhibitors (PI)		
APTIVUS CAPS 250MG	5	
APTIVUS SOLN 100MG/ML	5	
atazanavir sulfate caps 150mg	4	
atazanavir sulfate caps 200mg	4	
atazanavir sulfate caps 300mg	4	
atazanavir caps 150mg	4	
atazanavir caps 200mg	4	
CRIXIVAN CAPS 200MG	4	
CRIXIVAN CAPS 400MG	4	
EVOTAZ TABS 300MG; 150MG	5	
fosamprenavir calcium tabs 700mg	5	
INVIRASE CAPS 200MG	5	
INVIRASE TABS 500MG	5	
KALETRA TABS 100MG; 25MG	4	
KALETRA TABS 200MG; 50MG	5	
LEXIVA SUSP 50MG/ML	4	
lopinavir/ritonavir soln 400mg/5ml; 100mg/5ml	5	
lopinavir/ritonavir tabs 100mg; 25mg	4	
lopinavir/ritonavir tabs 200mg; 50mg	5	
NORVIR PACK 100MG	3	
NORVIR SOLN 80MG/ML	3	
PREZCOBIX TABS 150MG; 800MG	5	
PREZISTA SUSP 100MG/ML	5	
PREZISTA TABS 150MG	4	
PREZISTA TABS 600MG	5	
PREZISTA TABS 75MG	4	
PREZISTA TABS 800MG	5	
REYATAZ PACK 50MG	5	
ritonavir tabs 100mg	2	
SYMTUZA TABS 150MG; 800MG; 200MG; 10MG	5	
VIRACEPT TABS 250MG	5	
VIRACEPT TABS 625MG	5	
Anti-influenza Agents		
amantadine hcl caps 100mg	2	

Drug Name	Drug Tier	Requirements/Limits
amantadine hcl soln 50mg/5ml	2	
amantadine hcl tabs 100mg	2	
oseltamivir phosphate caps 30mg	2	QL (168 EA per 365 days)
oseltamivir phosphate caps 45mg	2	QL (84 EA per 365 days)
oseltamivir phosphate caps 75mg	2	QL (110 EA per 365 days)
oseltamivir phosphate susr 6mg/ml	2	QL (1080 ML per 365 days)
RELENZA DISKHALER AEPB 5MG/BLISTER	3	
rimantadine hydrochloride tabs 100mg	1	
XOFLUZA TBPK 20MG	4	QL (4 EA per 365 days)
XOFLUZA TBPK 40MG	4	QL (4 EA per 365 days)
XOFLUZA TBPK 40MG	4	QL (4 EA per 365 days)
XOFLUZA TBPK 80MG	4	QL (2 EA per 365 days)
Antiherpetic Agents		
acyclovir sodium inj 50mg/ml	2	B/D
acyclovir caps 200mg	2	
acyclovir crea 5%	2	
ACYCLOVIR OINT 5%	3	
acyclovir susp 200mg/5ml	2	
acyclovir tabs 400mg	2	
acyclovir tabs 800mg	2	
famciclovir tabs 125mg	2	
famciclovir tabs 250mg	2	
famciclovir tabs 500mg	2	
trifluridine soln 1%	2	
valacyclovir hcl tabs 1gm	2	
valacyclovir hydrochloride tabs 500mg	2	
Anxiolytics		
Anxiolytics, Other		
buspirone hcl tabs 15mg	2	
buspirone hcl tabs 30mg	2	
buspirone hydrochloride tabs 10mg	2	
buspirone hydrochloride tabs 5mg	2	
buspirone hydrochloride tabs 7.5mg	2	
meprobamate tabs 200mg	4	PA
meprobamate tabs 400mg	4	PA
Benzodiazepines		
alprazolam er tb24 0.5mg	2	QL (120 EA per 30 days)
alprazolam er tb24 1mg	2	QL (120 EA per 30 days)
alprazolam er tb24 2mg	2	QL (90 EA per 30 days)
alprazolam er tb24 3mg	2	QL (90 EA per 30 days)
alprazolam odt tbdp 0.25mg	2	QL (120 EA per 30 days)
alprazolam odt tbdp 0.5mg	2	QL (120 EA per 30 days)
alprazolam odt tbdp 1mg	2	QL (120 EA per 30 days)
alprazolam odt tbdp 2mg	2	QL (150 EA per 30 days)
alprazolam xr tb24 0.5mg	2	QL (120 EA per 30 days)
alprazolam xr tb24 1mg	2	QL (120 EA per 30 days)
alprazolam xr tb24 2mg	2	QL (90 EA per 30 days)
alprazolam xr tb24 3mg	2	QL (90 EA per 30 days)
alprazolam tabs 0.25mg	2	QL (120 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
alprazolam tabs 0.5mg	2	QL (120 EA per 30 days)
alprazolam tabs 1mg	2	QL (120 EA per 30 days)
alprazolam tabs 2mg	2	QL (150 EA per 30 days)
chlordiazepoxide hcl caps 10mg	2	QL (120 EA per 30 days)
chlordiazepoxide hcl caps 5mg	2	QL (120 EA per 30 days)
chlordiazepoxide hydrochloride caps 25mg	2	QL (120 EA per 30 days)
clorazepate dipotassium tabs 15mg	2	QL (180 EA per 30 days)
clorazepate dipotassium tabs 3.75mg	2	QL (720 EA per 30 days)
clorazepate dipotassium tabs 7.5mg	2	QL (360 EA per 30 days)
diazepam conc 5mg/ml	2	
diazepam inj 5mg/ml	2	
diazepam soln 5mg/5ml	2	
diazepam tabs 10mg	2	QL (120 EA per 30 days)
diazepam tabs 2mg	2	QL (120 EA per 30 days)
diazepam tabs 5mg	2	QL (120 EA per 30 days)
estazolam tabs 1mg	2	QL (30 EA per 30 days)
estazolam tabs 2mg	2	QL (30 EA per 30 days)
lorazepam inj 2mg/ml	2	
lorazepam inj 2mg/ml	2	
lorazepam inj 4mg/ml	2	
lorazepam tabs 0.5mg	2	QL (120 EA per 30 days)
lorazepam tabs 1mg	2	QL (90 EA per 30 days)
lorazepam tabs 2mg	2	QL (150 EA per 30 days)
midazolam hcl inj 10mg/10ml	2	
midazolam hcl inj 10mg/2ml	2	
midazolam hcl inj 2mg/2ml	2	
midazolam hcl inj 50mg/10ml	2	
midazolam hcl inj 5mg/5ml	2	
midazolam hcl inj 5mg/ml	2	
midazolam hcl inj 5mg/ml	2	
midazolam hcl inj 5mg/ml	2	
midazolam hcl inj 5mg/ml	2	
midazolam hcl syrp 2mg/ml	2	
midazolam hydrochloride inj 10mg/10ml	2	
midazolam hydrochloride inj 10mg/2ml	2	
midazolam hydrochloride inj 10mg/2ml	2	
midazolam hydrochloride inj 25mg/5ml	2	
midazolam hydrochloride inj 2mg/2ml	2	
midazolam hydrochloride inj 50mg/10ml	2	
midazolam hydrochloride inj 5mg/5ml	2	
midazolam hydrochloride inj 5mg/ml	2	
midazolam hydrochloride inj 5mg/ml	2	
oxazepam caps 10mg	2	QL (120 EA per 30 days)
oxazepam caps 15mg	2	QL (120 EA per 30 days)
oxazepam caps 30mg	2	QL (120 EA per 30 days)
temazepam caps 15mg	2	QL (30 EA per 30 days)
temazepam caps 22.5mg	2	QL (30 EA per 30 days)
temazepam caps 30mg	2	QL (30 EA per 30 days)
temazepam caps 7.5mg	2	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
triazolam tabs 0.125mg	2	QL (30 EA per 30 days)
triazolam tabs 0.25mg	2	QL (30 EA per 30 days)
Bipolar Agents		
Mood Stabilizers		
EQUETRO CP12 100MG	4	
EQUETRO CP12 200MG	4	
EQUETRO CP12 300MG	4	
lithium carbonate er tbcr 300mg	1	
lithium carbonate er tbcr 450mg	1	
lithium carbonate caps 150mg	1	
lithium carbonate caps 300mg	1	
lithium carbonate caps 600mg	1	
lithium carbonate tabs 300mg	1	
lithium soln 8meq/5ml	1	
Blood Glucose Regulators		
Antidiabetic Agents		
acarbose tabs 100mg	1	
acarbose tabs 25mg	1	
acarbose tabs 50mg	1	
ALOGLIPTIN/METFORMIN HCL TABS 12.5MG; 1000MG	4	QL (60 EA per 30 days) ST
ALOGLIPTIN/METFORMIN HCL TABS 12.5MG; 500MG	4	QL (60 EA per 30 days) ST
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 15MG	4	QL (30 EA per 30 days) ST
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 30MG	4	QL (30 EA per 30 days) ST
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 45MG	4	QL (30 EA per 30 days) ST
ALOGLIPTIN/PIOGLITAZONE TABS 25MG; 15MG	4	QL (30 EA per 30 days) ST
ALOGLIPTIN/PIOGLITAZONE TABS 25MG; 30MG	4	QL (30 EA per 30 days) ST
ALOGLIPTIN/PIOGLITAZONE TABS 25MG; 45MG	4	QL (30 EA per 30 days) ST
ALOGLIPTIN TABS 12.5MG	4	QL (30 EA per 30 days) ST
ALOGLIPTIN TABS 25MG	4	QL (30 EA per 30 days) ST
ALOGLIPTIN TABS 6.25MG	4	QL (30 EA per 30 days) ST
AVANDIA TABS 2MG	4	
AVANDIA TABS 4MG	4	
BYDUREON BCISE INJ 2MG/0.85ML	4	ST
BYDUREON PEN INJ 2MG	4	ST
BYDUREON INJ 2MG	4	ST
CYCLOSET TABS 0.8MG	3	
glimepiride tabs 1mg	1	
glimepiride tabs 2mg	1	
glimepiride tabs 4mg	1	
glipizide er tb24 10mg	1	
glipizide er tb24 2.5mg	1	
glipizide er tb24 5mg	1	
glipizide xl tb24 10mg	1	
glipizide xl tb24 2.5mg	1	
glipizide xl tb24 5mg	1	
glipizide/metformin hydrochloride tabs 2.5mg; 250mg	2	
glipizide/metformin hydrochloride tabs 2.5mg; 500mg	2	
glipizide/metformin hydrochloride tabs 5mg; 500mg	2	
glipizide tabs 10mg	1	

Drug Name	Drug Tier	Requirements/Limits
glipizide tabs 5mg	1	
INVOKAMET XR TB24 150MG; 1000MG	3	QL (60 EA per 30 days) ST
INVOKAMET XR TB24 150MG; 500MG	3	QL (60 EA per 30 days) ST
INVOKAMET XR TB24 50MG; 1000MG	3	QL (60 EA per 30 days) ST
INVOKAMET XR TB24 50MG; 500MG	3	QL (60 EA per 30 days) ST
INVOKAMET TABS 150MG; 1000MG	3	QL (60 EA per 30 days) ST
INVOKAMET TABS 150MG; 500MG	3	QL (60 EA per 30 days) ST
INVOKAMET TABS 50MG; 1000MG	3	QL (60 EA per 30 days) ST
INVOKAMET TABS 50MG; 500MG	3	QL (60 EA per 30 days) ST
INVOKANA TABS 100MG	3	QL (30 EA per 30 days) ST
INVOKANA TABS 300MG	3	QL (30 EA per 30 days) ST
JANUMET XR TB24 1000MG; 100MG	3	ST
JANUMET XR TB24 1000MG; 50MG	3	ST
JANUMET XR TB24 500MG; 50MG	3	ST
JANUMET TABS 1000MG; 50MG	3	ST
JANUMET TABS 500MG; 50MG	3	ST
JANUVIA TABS 100MG	3	ST
JANUVIA TABS 25MG	3	ST
JANUVIA TABS 50MG	3	ST
JARDIANCE TABS 10MG	3	ST
JARDIANCE TABS 25MG	3	ST
JENTADUETO XR TB24 2.5MG; 1000MG	3	QL (60 EA per 30 days) ST
JENTADUETO XR TB24 5MG; 1000MG	3	QL (30 EA per 30 days) ST
JENTADUETO TABS 2.5MG; 1000MG	3	QL (60 EA per 30 days) ST
JENTADUETO TABS 2.5MG; 500MG	3	QL (60 EA per 30 days) ST
JENTADUETO TABS 2.5MG; 850MG	3	QL (60 EA per 30 days) ST
KAZANO TABS 12.5MG; 1000MG	4	QL (60 EA per 30 days) ST
KAZANO TABS 12.5MG; 500MG	4	QL (60 EA per 30 days) ST
metformin hydrochloride er tb24 500mg	1	
metformin hydrochloride er tb24 750mg	1	
metformin hydrochloride soln 500mg/5ml	1	
metformin hydrochloride tabs 1000mg	1	
metformin hydrochloride tabs 500mg	1	
metformin hydrochloride tabs 850mg	1	
miglitol tabs 100mg	2	
miglitol tabs 25mg	2	
miglitol tabs 50mg	2	
nateglinide tabs 120mg	2	
nateglinide tabs 60mg	2	
NESINA TABS 12.5MG	4	QL (30 EA per 30 days) ST
NESINA TABS 25MG	4	QL (30 EA per 30 days) ST
NESINA TABS 6.25MG	4	QL (30 EA per 30 days) ST
OSENI TABS 12.5MG; 15MG	4	QL (30 EA per 30 days) ST
OSENI TABS 12.5MG; 30MG	4	QL (30 EA per 30 days) ST
OSENI TABS 12.5MG; 45MG	4	QL (30 EA per 30 days) ST
OSENI TABS 25MG; 15MG	4	QL (30 EA per 30 days) ST
OSENI TABS 25MG; 30MG	4	QL (30 EA per 30 days) ST
OSENI TABS 25MG; 45MG	4	QL (30 EA per 30 days) ST
OZEMPIC INJ 2MG/1.5ML	3	ST

Drug Name	Drug Tier	Requirements/Limits
OZEMPIC INJ 2MG/1.5ML	3	ST
OZEMPIC INJ 4MG/3ML	3	ST
pioglitazone hcl-glimepiride tabs 2mg; 30mg	2	
pioglitazone hcl-glimepiride tabs 4mg; 30mg	2	
pioglitazone hcl/metformin hcl tabs 500mg; 15mg	2	
pioglitazone hcl/metformin hcl tabs 850mg; 15mg	2	
pioglitazone hcl tabs 45mg	2	
pioglitazone hydrochloride tabs 15mg	2	
pioglitazone hydrochloride tabs 30mg	2	
repaglinide tabs 0.5mg	2	
repaglinide tabs 1mg	2	
repaglinide tabs 2mg	2	
RIOMET ER SRER 500MG/5ML	3	
RIOMET SOLN 500MG/5ML	3	
RYBELSUS TABS 14MG	3	ST
RYBELSUS TABS 3MG	3	ST
RYBELSUS TABS 7MG	3	ST
SYMLINPEN 120 INJ 2700MCG/2.7ML	4	PA
SYMLINPEN 60 INJ 1500MCG/1.5ML	4	PA
SYNJARDY XR TB24 10MG; 1000MG	3	ST
SYNJARDY XR TB24 12.5MG; 1000MG	3	ST
SYNJARDY XR TB24 25MG; 1000MG	3	ST
SYNJARDY XR TB24 5MG; 1000MG	3	ST
SYNJARDY TABS 12.5MG; 1000MG	3	ST
SYNJARDY TABS 12.5MG; 500MG	3	ST
SYNJARDY TABS 5MG; 1000MG	3	ST
SYNJARDY TABS 5MG; 500MG	3	ST
tolazamide tabs 250mg	1	
tolazamide tabs 500mg	1	
tolbutamide tabs 500mg	1	
TRADJENTA TABS 5MG	3	QL (30 EA per 30 days) ST
TRULICITY INJ 0.75MG/0.5ML	3	ST
TRULICITY INJ 1.5MG/0.5ML	3	ST
TRULICITY INJ 3MG/0.5ML	3	ST
TRULICITY INJ 4.5MG/0.5ML	3	ST
VICTOZA INJ 18MG/3ML	3	ST
Glycemic Agents		
diazoxide susp 50mg/ml	5	
GLUCAGEN HYPOKIT INJ 1MG	3	
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR INJ 1MG/ML	3	
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR INJ 1MG	3	
GLUCAGON EMERGENCY KIT INJ 1MG	3	
PROGLYCEM SUSP 50MG/ML	5	
Insulins		
HUMALOG JUNIOR KWIKPEN INJ 100UNIT/ML	3	QL (60 ML per 30 days); Select Insulin

Drug Name	Drug Tier	Requirements/Limits
HUMALOG KWIKPEN INJ 100UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMALOG KWIKPEN INJ 200UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMALOG MIX 50/50 KWIKPEN INJ 50UNIT/ML; 50UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMALOG MIX 50/50 INJ 50UNIT/ML; 50UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMALOG MIX 75/25 KWIKPEN INJ 25UNIT/ML; 75UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMALOG MIX 75/25 INJ 25UNIT/ML; 75UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMALOG INJ 100UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMALOG INJ 100UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMULIN 70/30 KWIKPEN INJ 30UNIT/ML; 70UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
humulin 70/30 inj 30unit/ml; 70unit/ml	1	QL (60 ML per 30 days); Select Insulin
HUMULIN N KWIKPEN INJ 100UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
humulin n inj 100unit/ml	1	QL (60 ML per 30 days); Select Insulin
HUMULIN R U-500 (CONCENTRATED) INJ 500UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
HUMULIN R U-500 KWIKPEN INJ 500UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
humulin r inj 100unit/ml	1	QL (60 ML per 30 days); Select Insulin
LANTUS SOLOSTAR INJ 100UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
LANTUS INJ 100UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
LEVEMIR FLEXTOUCH INJ 100UNIT/ML	3	QL (90 ML per 30 days); Select Insulin
LEVEMIR INJ 100UNIT/ML	3	QL (60 ML per 30 days); Select Insulin
TOUJEO MAX SOLOSTAR INJ 300UNIT/ML	3	QL (27 ML per 30 days); Select Insulin
TOUJEO SOLOSTAR INJ 300UNIT/ML	3	QL (27 ML per 30 days); Select Insulin
TRESIBA FLEXTOUCH INJ 100UNIT/ML	4	QL (54 ML per 30 days)
TRESIBA FLEXTOUCH INJ 200UNIT/ML	4	QL (54 ML per 30 days)
TRESIBA INJ 100UNIT/ML	4	QL (54 ML per 30 days)
XULTOPHY 100/3.6 INJ 100UNIT/ML; 3.6MG/ML	4	ST
Blood Products and Modifiers		
Anticoagulants		
BEVYXXA CAPS 40MG	4	

Drug Name	Drug Tier	Requirements/Limits
BEVYXXA CAPS 80MG	4	
COUMADIN TABS 10MG	3	
COUMADIN TABS 1MG	3	
COUMADIN TABS 2.5MG	3	
COUMADIN TABS 2MG	3	
COUMADIN TABS 3MG	3	
COUMADIN TABS 4MG	3	
COUMADIN TABS 5MG	3	
COUMADIN TABS 6MG	3	
COUMADIN TABS 7.5MG	3	
ELIQUIS STARTER PACK TBPK 5MG	3	QL (148 EA per 365 days)
ELIQUIS TABS 2.5MG	3	QL (60 EA per 30 days)
ELIQUIS TABS 5MG	3	QL (90 EA per 30 days)
enoxaparin sodium inj 100mg/ml	4	QL (30 ML per 90 days)
enoxaparin sodium inj 120mg/0.8ml	4	QL (30 ML per 90 days)
enoxaparin sodium inj 150mg/ml	4	QL (30 ML per 90 days)
enoxaparin sodium inj 300mg/3ml	4	QL (30 ML per 90 days)
enoxaparin sodium inj 30mg/0.3ml	4	QL (30 ML per 90 days)
enoxaparin sodium inj 40mg/0.4ml	4	QL (30 ML per 90 days)
enoxaparin sodium inj 60mg/0.6ml	4	QL (30 ML per 90 days)
enoxaparin sodium inj 80mg/0.8ml	4	QL (30 ML per 90 days)
fondaparinux sodium inj 10mg/0.8ml	5	
fondaparinux sodium inj 2.5mg/0.5ml	4	
fondaparinux sodium inj 5mg/0.4ml	5	
fondaparinux sodium inj 7.5mg/0.6ml	5	
FRAGMIN INJ 10000UNIT/ML	5	
FRAGMIN INJ 12500UNIT/0.5ML	5	
FRAGMIN INJ 15000UNIT/0.6ML	5	
FRAGMIN INJ 18000UNT/0.72ML	5	
FRAGMIN INJ 2500UNIT/0.2ML	4	
FRAGMIN INJ 5000UNIT/0.2ML	4	
FRAGMIN INJ 7500UNIT/0.3ML	5	
FRAGMIN INJ 95000UNIT/3.8ML	5	
heparin sodium/d5w inj 5%; 100unit/ml	2	
heparin sodium/d5w inj 5%; 25000unit/500ml	2	
heparin sodium/d5w inj 5%; 40unit/ml	2	
heparin sodium/dextrose inj 5%; 25000unit/250ml	2	
heparin sodium/dextrose inj 5%; 25000unit/500ml	2	
heparin sodium/nacl 0.45% inj 25000unit/250ml; 0.45%	1	
heparin sodium/sodium chloride 0.9% premix inj 1000unit/500ml; 0.9%	2	
heparin sodium/sodium chloride 0.9% premix inj 1000unit/500ml; 0.9%	2	
heparin sodium/sodium chloride 0.9% premix inj 1000unit/500ml; 0.9%	2	
heparin sodium/sodium chloride 0.9% premix inj 1000unit/500ml; 0.9%	2	
heparin sodium/sodium chloride inj 25000unit/250ml; 0.45%	1	
heparin sodium/sodium chloride inj 25000unit/500ml; 0.45%	2	

Drug Name	Drug Tier	Requirements/Limits
heparin sodium/sodium chloride inj 25000unit/500ml; 0.45%	2	
heparin sodium inj 10000unit/ml	2	
heparin sodium inj 1000unit/ml	2	
heparin sodium inj 20000unit/ml	2	
heparin sodium inj 5000unit/ml	2	
jantoven tabs 10mg	1	
jantoven tabs 1mg	1	
jantoven tabs 2.5mg	1	
jantoven tabs 2mg	1	
jantoven tabs 3mg	1	
jantoven tabs 4mg	1	
jantoven tabs 5mg	1	
jantoven tabs 6mg	1	
jantoven tabs 7.5mg	1	
PRADAXA CAPS 110MG	4	
PRADAXA CAPS 150MG	4	
PRADAXA CAPS 75MG	4	
warfarin sodium tabs 10mg	1	
warfarin sodium tabs 1mg	1	
warfarin sodium tabs 2.5mg	1	
warfarin sodium tabs 2mg	1	
warfarin sodium tabs 3mg	1	
warfarin sodium tabs 4mg	1	
warfarin sodium tabs 5mg	1	
warfarin sodium tabs 6mg	1	
warfarin sodium tabs 7.5mg	1	
XARELTO STARTER PACK TBPK 0	3	
XARELTO TABS 10MG	3	
XARELTO TABS 15MG	3	
XARELTO TABS 2.5MG	3	
XARELTO TABS 20MG	3	
Blood Products and Modifiers, Other		
anagrelide hydrochloride caps 0.5mg	2	
anagrelide hydrochloride caps 1mg	2	
ARANESP ALBUMIN FREE INJ 100MCG/0.5ML	5	PA
ARANESP ALBUMIN FREE INJ 100MCG/ML	5	PA
ARANESP ALBUMIN FREE INJ 10MCG/0.4ML	4	PA
ARANESP ALBUMIN FREE INJ 150MCG/0.3ML	5	PA
ARANESP ALBUMIN FREE INJ 200MCG/0.4ML	5	PA
ARANESP ALBUMIN FREE INJ 200MCG/ML	5	PA
ARANESP ALBUMIN FREE INJ 25MCG/0.42ML	4	PA
ARANESP ALBUMIN FREE INJ 25MCG/ML	4	PA
ARANESP ALBUMIN FREE INJ 300MCG/0.6ML	5	PA
ARANESP ALBUMIN FREE INJ 300MCG/ML	5	PA
ARANESP ALBUMIN FREE INJ 40MCG/0.4ML	4	PA
ARANESP ALBUMIN FREE INJ 40MCG/ML	4	PA
ARANESP ALBUMIN FREE INJ 500MCG/ML	5	PA
ARANESP ALBUMIN FREE INJ 60MCG/0.3ML	4	PA
ARANESP ALBUMIN FREE INJ 60MCG/ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
DOPTELET TABS 20MG	5	PA
DOPTELET TABS 20MG	5	PA
DOPTELET TABS 20MG	5	PA
EPOGEN INJ 10000UNIT/ML	4	PA
EPOGEN INJ 20000UNIT/ML	5	PA
EPOGEN INJ 2000UNIT/ML	4	PA
EPOGEN INJ 3000UNIT/ML	4	PA
EPOGEN INJ 4000UNIT/ML	4	PA
GRANIX INJ 300MCG/0.5ML	5	
GRANIX INJ 300MCG/ML	5	
GRANIX INJ 480MCG/0.8ML	5	
GRANIX INJ 480MCG/1.6ML	5	
LEUKINE INJ 250MCG	5	PA
MOZOBIL INJ 24MG/1.2ML	5	PA
MULPLETA TABS 3MG	5	PA
NEULASTA ONPRO KIT INJ 6MG/0.6ML	5	
NEULASTA INJ 6MG/0.6ML	5	
NEUPOGEN INJ 300MCG/0.5ML	5	
NEUPOGEN INJ 300MCG/ML	5	
NEUPOGEN INJ 480MCG/0.8ML	5	
NEUPOGEN INJ 480MCG/1.6ML	5	
NIVESTYM INJ 300MCG/0.5ML	5	
NIVESTYM INJ 300MCG/ML	5	
NIVESTYM INJ 480MCG/0.8ML	5	
NIVESTYM INJ 480MCG/1.6ML	5	
NPLATE INJ 125MCG	5	PA
NPLATE INJ 250MCG	5	PA
NPLATE INJ 500MCG	5	PA
NYVEPRIA INJ 6MG/0.6ML	5	
PROCRIT INJ 10000UNIT/ML	4	PA
PROCRIT INJ 20000UNIT/ML	5	PA
PROCRIT INJ 2000UNIT/ML	4	PA
PROCRIT INJ 3000UNIT/ML	4	PA
PROCRIT INJ 40000UNIT/ML	5	PA
PROCRIT INJ 4000UNIT/ML	4	PA
PROMACTA PACK 12.5MG	5	PA
PROMACTA PACK 25MG	5	PA
PROMACTA TABS 12.5MG	5	PA
PROMACTA TABS 25MG	5	PA
PROMACTA TABS 50MG	5	PA
PROMACTA TABS 75MG	5	PA
REBLOZYL INJ 25MG	5	PA
REBLOZYL INJ 75MG	5	PA
UDENYCA INJ 6MG/0.6ML	5	
ZIEXTENZO INJ 6MG/0.6ML	5	
Hemostasis Agents		
aminocaproic acid inj 250mg/ml	1	
aminocaproic acid tabs 1000mg	2	
aminocaproic acid tabs 500mg	2	

Drug Name	Drug Tier	Requirements/Limits
tranexamic acid inj 1000mg/10ml	2	
tranexamic acid tabs 650mg	2	
Platelet Modifying Agents		
aspirin/dipyridamole cp12 25mg; 200mg	2	
BRILINTA TABS 60MG	3	
BRILINTA TABS 90MG	3	
CABLIVI INJ 11MG	5	PA
cilostazol tabs 100mg	1	
cilostazol tabs 50mg	1	
clopidogrel tabs 300mg	1	
clopidogrel tabs 75mg	1	
prasugrel tabs 10mg	2	
prasugrel tabs 5mg	2	
Cardiovascular Agents		
Alpha-adrenergic Agonists		
clonidine hcl ptwk 0.1mg/24hr	2	
clonidine hcl ptwk 0.2mg/24hr	2	
clonidine hcl ptwk 0.3mg/24hr	2	
clonidine hydrochloride tabs 0.1mg	1	
clonidine hydrochloride tabs 0.2mg	1	
clonidine hydrochloride tabs 0.3mg	1	
droxidopa caps 100mg	5	
droxidopa caps 200mg	5	
droxidopa caps 300mg	5	
midodrine hcl tabs 10mg	2	
midodrine hcl tabs 2.5mg	2	
midodrine hcl tabs 5mg	2	
Alpha-adrenergic Blocking Agents		
phenoxybenzamine hydrochloride caps 10mg	5	
phentolamine mesylate inj 5mg	1	
prazosin hcl caps 1mg	2	
prazosin hcl caps 5mg	2	
prazosin hydrochloride caps 2mg	2	
Angiotensin II Receptor Antagonists		
candesartan cilexetil/hydrochlorothiazide tabs 16mg; 12.5mg	2	
candesartan cilexetil/hydrochlorothiazide tabs 32mg; 12.5mg	2	
candesartan cilexetil/hydrochlorothiazide tabs 32mg; 25mg	2	
candesartan cilexetil tabs 16mg	2	
candesartan cilexetil tabs 32mg	2	
candesartan cilexetil tabs 4mg	2	
candesartan cilexetil tabs 8mg	2	
eprosartan mesylate tabs 600mg	2	
irbesartan/hydrochlorothiazide tabs 12.5mg; 150mg	1	
irbesartan/hydrochlorothiazide tabs 12.5mg; 300mg	1	
irbesartan tabs 150mg	1	
irbesartan tabs 300mg	1	
irbesartan tabs 75mg	1	
losartan potassium/hydrochlorothiazide tabs 12.5mg; 100mg	1	
losartan potassium/hydrochlorothiazide tabs 12.5mg; 50mg	1	

Drug Name	Drug Tier	Requirements/Limits
losartan potassium/hydrochlorothiazide tabs 25mg; 100mg	1	
losartan potassium tabs 100mg	1	
losartan potassium tabs 25mg	1	
losartan potassium tabs 50mg	1	
olmesartan medoxomil/hydrochlorothiazide tabs 12.5mg; 20mg	2	
olmesartan medoxomil/hydrochlorothiazide tabs 12.5mg; 40mg	2	
olmesartan medoxomil/hydrochlorothiazide tabs 25mg; 40mg	2	
olmesartan medoxomil tabs 20mg	2	
olmesartan medoxomil tabs 40mg	2	
olmesartan medoxomil tabs 5mg	2	
telmisartan/hydrochlorothiazide tabs 12.5mg; 40mg	2	
telmisartan/hydrochlorothiazide tabs 12.5mg; 80mg	2	
telmisartan/hydrochlorothiazide tabs 25mg; 80mg	2	
telmisartan tabs 20mg	2	
telmisartan tabs 40mg	2	
telmisartan tabs 80mg	2	
valsartan/hydrochlorothiazide tabs 12.5mg; 160mg	1	
valsartan/hydrochlorothiazide tabs 12.5mg; 320mg	1	
valsartan/hydrochlorothiazide tabs 12.5mg; 80mg	1	
valsartan/hydrochlorothiazide tabs 25mg; 160mg	1	
valsartan/hydrochlorothiazide tabs 25mg; 320mg	1	
valsartan tabs 160mg	2	
valsartan tabs 320mg	2	
valsartan tabs 40mg	2	
valsartan tabs 80mg	2	
Angiotensin-converting Enzyme (ACE) Inhibitors		
benazepril hcl/hydrochlorothiazide tabs 20mg; 12.5mg	1	
benazepril hcl/hydrochlorothiazide tabs 20mg; 25mg	1	
benazepril hcl/hydrochlorothiazide tabs 5mg; 6.25mg	1	
benazepril hcl tabs 10mg	1	
benazepril hcl tabs 40mg	1	
benazepril hcl tabs 5mg	1	
benazepril hydrochloride/hydrochlorothiazide tabs 10mg; 12.5mg	1	
benazepril hydrochloride tabs 20mg	1	
captopril/hydrochlorothiazide tabs 25mg; 15mg	1	
captopril/hydrochlorothiazide tabs 25mg; 25mg	1	
captopril/hydrochlorothiazide tabs 50mg; 15mg	1	
captopril/hydrochlorothiazide tabs 50mg; 25mg	1	
captopril tabs 100mg	2	
captopril tabs 12.5mg	2	
captopril tabs 25mg	2	
captopril tabs 50mg	2	
enalapril maleate/hydrochlorothiazide tabs 10mg; 25mg	1	
enalapril maleate/hydrochlorothiazide tabs 5mg; 12.5mg	1	
enalapril maleate soln 1mg/ml	4	
enalapril maleate tabs 10mg	1	

Drug Name	Drug Tier	Requirements/Limits
enalapril maleate tabs 2.5mg	1	
enalapril maleate tabs 20mg	1	
enalapril maleate tabs 5mg	1	
enalaprilat inj 1.25mg/ml	1	
EPANED SOLN 1MG/ML	4	
fosinopril sodium/hydrochlorothiazide tabs 10mg; 12.5mg	2	
fosinopril sodium/hydrochlorothiazide tabs 20mg; 12.5mg	2	
fosinopril sodium tabs 10mg	1	
fosinopril sodium tabs 20mg	1	
fosinopril sodium tabs 40mg	1	
lisinopril/hydrochlorothiazide tabs 12.5mg; 10mg	1	
lisinopril/hydrochlorothiazide tabs 12.5mg; 20mg	1	
lisinopril/hydrochlorothiazide tabs 25mg; 20mg	1	
lisinopril tabs 10mg	1	
lisinopril tabs 2.5mg	1	
lisinopril tabs 20mg	1	
lisinopril tabs 30mg	1	
lisinopril tabs 40mg	1	
lisinopril tabs 5mg	1	
moexipril hcl tabs 15mg	1	
moexipril hcl tabs 7.5mg	1	
perindopril erbumine tabs 2mg	1	
perindopril erbumine tabs 4mg	1	
perindopril erbumine tabs 8mg	1	
quinapril hcl tabs 20mg	1	
quinapril hcl tabs 40mg	1	
quinapril hydrochloride tabs 10mg	1	
quinapril hydrochloride tabs 5mg	1	
quinapril/hydrochlorothiazide tabs 12.5mg; 10mg	1	
quinapril/hydrochlorothiazide tabs 12.5mg; 20mg	1	
quinapril/hydrochlorothiazide tabs 25mg; 20mg	1	
ramipril caps 1.25mg	1	
ramipril caps 10mg	1	
ramipril caps 2.5mg	1	
ramipril caps 5mg	1	
trandolapril/verapamil hcl er tbcr 1mg; 240mg	2	
trandolapril/verapamil hcl er tbcr 2mg; 180mg	2	
trandolapril/verapamil hcl er tbcr 2mg; 240mg	2	
trandolapril/verapamil hcl er tbcr 4mg; 240mg	2	
trandolapril tabs 1mg	1	
trandolapril tabs 2mg	1	
trandolapril tabs 4mg	1	
Antiarrhythmics		
amiodarone hcl inj 50mg/ml	1	
amiodarone hcl inj 50mg/ml	1	
amiodarone hcl inj 900mg/18ml	1	
amiodarone hcl tabs 400mg	2	
amiodarone hydrochloride inj 150mg/3ml	1	
amiodarone hydrochloride inj 450mg/9ml	1	

Drug Name	Drug Tier	Requirements/Limits
amiodarone hydrochloride inj 900mg/18ml	1	
amiodarone hydrochloride tabs 100mg	2	
amiodarone hydrochloride tabs 200mg	1	
digitek tabs 0.25mg	2	
digox tabs 250mcg	2	
dofetilide caps 125mcg	2	
dofetilide caps 250mcg	2	
dofetilide caps 500mcg	2	
flecainide acetate tabs 100mg	2	
flecainide acetate tabs 150mg	2	
flecainide acetate tabs 50mg	2	
LANOXIN TABS 250MCG	4	
lidocaine hcl in d5w inj 5%; 4mg/ml	2	
lidocaine hcl in d5w inj 5%; 8mg/ml	2	
lidocaine hcl/dextrose inj 5%; 4mg/ml	2	
lidocaine hcl/dextrose inj 5%; 8mg/ml	2	
lidocaine hcl inj 100mg/5ml	1	
lidocaine hcl inj 50mg/5ml	1	
mexiletine hcl caps 150mg	2	
mexiletine hcl caps 200mg	2	
mexiletine hcl caps 250mg	2	
MULTAQ TABS 400MG	4	
NEXTERONE INJ 150MG/100ML; 42.1MG/ML	3	
NEXTERONE INJ 360MG/200ML; 41.4MG/ML	5	
pacerone tabs 200mg	2	
procainamide hcl inj 100mg/ml	1	
procainamide hcl inj 500mg/ml	1	
procainamide hydrochloride inj 100mg/ml	1	
procainamide hydrochloride inj 500mg/ml	1	
propafenone hcl tabs 150mg	2	
propafenone hcl tabs 225mg	2	
propafenone hcl tabs 300mg	2	
propafenone hydrochloride er cp12 225mg	2	
propafenone hydrochloride er cp12 325mg	2	
propafenone hydrochloride er cp12 425mg	2	
quinidine gluconate cr tbcr 324mg	2	
quinidine gluconate er tbcr 324mg	2	
quinidine sulfate tabs 200mg	1	
quinidine sulfate tabs 300mg	1	
sorine tabs 120mg	1	
sorine tabs 160mg	1	
sorine tabs 240mg	1	
sorine tabs 80mg	1	
sotalol hcl (af) tabs 80mg	1	
sotalol hcl af tabs 160mg	1	
sotalol hcl tabs 120mg	1	
sotalol hcl tabs 160mg	1	
sotalol hcl tabs 240mg	1	
sotalol hcl tabs 80mg	1	

Drug Name	Drug Tier	Requirements/Limits
sotalol hydrochloride (af) tabs 120mg	1	
sotalol hydrochloride (af) tabs 160mg	1	
sotalol hydrochloride (af) tabs 80mg	1	
sotalol hydrochloride af tabs 160mg	1	
sotalol hydrochloride tabs 120mg	1	
sotalol hydrochloride tabs 160mg	1	
sotalol hydrochloride tabs 160mg	1	
sotalol hydrochloride tabs 80mg	1	
sotalol hydrochloride tabs 80mg	1	
SOTYLIZE SOLN 5MG/ML	4	
Beta-adrenergic Blocking Agents		
acebutolol hcl caps 400mg	1	
acebutolol hydrochloride caps 200mg	1	
acebutolol hydrochloride caps 400mg	1	
atenolol/chlorthalidone tabs 100mg; 25mg	1	
atenolol/chlorthalidone tabs 50mg; 25mg	1	
atenolol tabs 100mg	1	
atenolol tabs 25mg	1	
atenolol tabs 50mg	1	
betaxolol hcl tabs 10mg	1	
betaxolol hcl tabs 20mg	1	
bisoprolol fumarate/hydrochlorothiazide tabs 10mg; 6.25mg	1	
bisoprolol fumarate/hydrochlorothiazide tabs 2.5mg; 6.25mg	1	
bisoprolol fumarate/hydrochlorothiazide tabs 5mg; 6.25mg	1	
bisoprolol fumarate tabs 10mg	1	
bisoprolol fumarate tabs 5mg	1	
BYSTOLIC TABS 10MG	3	
BYSTOLIC TABS 2.5MG	3	
BYSTOLIC TABS 20MG	3	
BYSTOLIC TABS 5MG	3	
carvedilol phosphate cp24 10mg	2	
carvedilol phosphate cp24 20mg	2	
carvedilol phosphate cp24 40mg	2	
carvedilol phosphate cp24 80mg	2	
carvedilol tabs 12.5mg	1	
carvedilol tabs 25mg	1	
carvedilol tabs 3.125mg	1	
carvedilol tabs 6.25mg	1	
esmolol hcl inj 100mg/10ml	1	
esmolol hydrochloride/sodium chloride inj 2000mg/100ml; 4.1mg/ml	2	
esmolol hydrochloride/sodium chloride inj 2500mg/250ml; 5.9mg/ml	2	
HEMANGEOL SOLN 4.28MG/ML	4	
KAPSPARGO SPRINKLE CS24 100MG	4	
KAPSPARGO SPRINKLE CS24 200MG	4	
KAPSPARGO SPRINKLE CS24 25MG	4	
KAPSPARGO SPRINKLE CS24 50MG	4	
labetalol hydrochloride inj 5mg/ml	1	

Drug Name	Drug Tier	Requirements/Limits
labetalol hydrochloride inj 5mg/ml	1	
labetalol hydrochloride tabs 100mg	1	
labetalol hydrochloride tabs 200mg	1	
labetalol hydrochloride tabs 300mg	1	
metoprolol succinate er tb24 100mg	1	
metoprolol succinate er tb24 200mg	1	
metoprolol succinate er tb24 25mg	1	
metoprolol succinate er tb24 50mg	1	
metoprolol tartrate inj 5mg/5ml	1	
metoprolol tartrate inj 5mg/5ml	1	
metoprolol tartrate tabs 100mg	1	
metoprolol tartrate tabs 25mg	1	
metoprolol tartrate tabs 37.5mg	1	
metoprolol tartrate tabs 50mg	1	
metoprolol tartrate tabs 75mg	1	
metoprolol/hydrochlorothiazide tabs 25mg; 100mg	1	
metoprolol/hydrochlorothiazide tabs 25mg; 50mg	1	
metoprolol/hydrochlorothiazide tabs 50mg; 100mg	1	
nadolol/bendroflumethiazide tabs 5mg; 40mg	2	
nadolol tabs 20mg	2	
nadolol tabs 40mg	2	
nadolol tabs 80mg	2	
nebivolol hydrochloride tabs 10mg	2	
nebivolol hydrochloride tabs 2.5mg	2	
nebivolol hydrochloride tabs 2.5mg	2	
nebivolol hydrochloride tabs 20mg	2	
nebivolol hydrochloride tabs 5mg	2	
nebivolol hydrochloride tabs 5mg	2	
nebivolol tabs 10mg	2	
nebivolol tabs 20mg	2	
nebivolol tabs 5mg	2	
pindolol tabs 10mg	2	
pindolol tabs 5mg	2	
propranolol hcl er cp24 120mg	2	
propranolol hcl er cp24 160mg	2	
propranolol hcl inj 1mg/ml	1	
propranolol hcl soln 20mg/5ml	1	
propranolol hcl soln 40mg/5ml	1	
propranolol hcl tabs 40mg	1	
propranolol hydrochloride er cp24 60mg	2	
propranolol hydrochloride er cp24 80mg	2	
propranolol hydrochloride tabs 10mg	1	
propranolol hydrochloride tabs 20mg	1	
propranolol hydrochloride tabs 60mg	1	
propranolol hydrochloride tabs 80mg	1	
propranolol/hydrochlorothiazide tabs 25mg; 40mg	1	
propranolol/hydrochlorothiazide tabs 25mg; 80mg	1	
timolol maleate tabs 10mg	1	
timolol maleate tabs 20mg	1	

Drug Name	Drug Tier	Requirements/Limits
timolol maleate tabs 5mg	1	
Calcium Channel Blocking Agents, Dihydropyridines		
amlodipine besylate tabs 10mg	1	
amlodipine besylate tabs 2.5mg	1	
amlodipine besylate tabs 5mg	1	
CARDENE IV INJ 4.8%; 20MG/200ML	3	
felodipine er tb24 10mg	2	
felodipine er tb24 2.5mg	2	
felodipine er tb24 5mg	2	
isradipine caps 2.5mg	2	
isradipine caps 5mg	2	
nicardipine hcl caps 20mg	2	
nicardipine hcl caps 30mg	2	
NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE INJ 40MG/200ML; 0.9%	3	
nicardipine hydrochloride inj 2.5mg/ml	2	
NICARDIPINE HYDROCHLORIDE INJ 20MG/200ML; 0.9%	3	
nifedipine er tb24 30mg	1	
nifedipine er tb24 30mg	1	
nifedipine er tb24 60mg	1	
nifedipine er tb24 60mg	1	
nifedipine er tb24 90mg	1	
nifedipine er tb24 90mg	1	
nimodipine caps 30mg	4	
NYMALIZE SOLN 60MG/20ML	5	
NYMALIZE SOLN 6MG/ML	5	
Calcium Channel Blocking Agents, Nondihydropyridines		
cartia xt cp24 120mg	2	
cartia xt cp24 180mg	2	
cartia xt cp24 240mg	2	
cartia xt cp24 300mg	2	
dilt-xr cp24 120mg	1	
dilt-xr cp24 180mg	1	
dilt-xr cp24 240mg	1	
diltiazem hcl cd cp24 360mg	2	
diltiazem hcl er cp12 120mg	1	
diltiazem hcl er cp12 60mg	1	
diltiazem hcl er cp12 90mg	1	
diltiazem hcl er cp24 120mg	2	
diltiazem hcl er cp24 180mg	2	
diltiazem hcl er cp24 240mg	2	
diltiazem hcl er cp24 420mg	2	
diltiazem hcl er tb24 180mg	2	
diltiazem hcl er tb24 240mg	2	
diltiazem hcl er tb24 300mg	2	
diltiazem hcl er tb24 360mg	2	
diltiazem hcl er tb24 420mg	2	
diltiazem hcl inj 100mg	1	

Drug Name	Drug Tier	Requirements/Limits
diltiazem hcl inj 125mg/25ml	1	
diltiazem hcl inj 50mg/10ml	1	
diltiazem hcl tabs 120mg	1	
diltiazem hcl tabs 30mg	1	
diltiazem hcl tabs 60mg	1	
diltiazem hcl tabs 90mg	1	
diltiazem hydrochloride er cp24 120mg	2	
diltiazem hydrochloride er cp24 120mg	2	
diltiazem hydrochloride er cp24 180mg	2	
diltiazem hydrochloride er cp24 180mg	2	
diltiazem hydrochloride er cp24 240mg	2	
diltiazem hydrochloride er cp24 240mg	2	
diltiazem hydrochloride er cp24 300mg	2	
diltiazem hydrochloride er cp24 300mg	2	
diltiazem hydrochloride er cp24 360mg	2	
diltiazem hydrochloride er cp24 360mg	2	
diltiazem hydrochloride er cp24 360mg	2	
diltiazem hydrochloride inj 25mg/5ml	1	
matzim la tb24 180mg	2	
matzim la tb24 240mg	2	
matzim la tb24 300mg	2	
matzim la tb24 360mg	2	
matzim la tb24 420mg	2	
taztia xt cp24 120mg	2	
taztia xt cp24 180mg	2	
taztia xt cp24 240mg	2	
taztia xt cp24 300mg	2	
taztia xt cp24 360mg	2	
tiadylt er cp24 120mg	2	
tiadylt er cp24 180mg	2	
tiadylt er cp24 240mg	2	
tiadylt er cp24 300mg	2	
tiadylt er cp24 360mg	2	
tiadylt er cp24 420mg	2	
verapamil hcl er cp24 100mg	1	
verapamil hcl er cp24 120mg	1	
verapamil hcl er cp24 180mg	1	
verapamil hcl er cp24 240mg	1	
verapamil hcl er cp24 300mg	1	
verapamil hcl er tbcr 120mg	1	
verapamil hcl er tbcr 180mg	1	
verapamil hcl er tbcr 240mg	1	
verapamil hcl sr cp24 120mg	1	
verapamil hcl sr cp24 180mg	1	
verapamil hcl sr cp24 240mg	1	
verapamil hcl sr cp24 360mg	1	
verapamil hcl tabs 40mg	1	
verapamil hcl tabs 80mg	1	
verapamil hydrochloride er cp24 200mg	1	

Drug Name	Drug Tier	Requirements/Limits
verapamil hydrochloride inj 2.5mg/ml	1	
verapamil hydrochloride inj 2.5mg/ml	1	
verapamil hydrochloride tabs 120mg	1	
Cardiovascular Agents, Other		
acetazolamide sodium inj 500mg	5	
aliskiren tabs 150mg	4	
aliskiren tabs 300mg	4	
amlodipine besylate/benazepril hcl caps 10mg; 40mg	1	
amlodipine besylate/benazepril hydrochloride caps 10mg; 20mg	1	
amlodipine besylate/benazepril hydrochloride caps 10mg; 40mg	1	
amlodipine besylate/benazepril hydrochloride caps 2.5mg; 10mg	1	
amlodipine besylate/benazepril hydrochloride caps 5mg; 10mg	1	
amlodipine besylate/benazepril hydrochloride caps 5mg; 20mg	1	
amlodipine besylate/benazepril hydrochloride caps 5mg; 40mg	1	
amlodipine besylate/valsartan tabs 10mg; 160mg	2	
amlodipine besylate/valsartan tabs 10mg; 320mg	2	
amlodipine besylate/valsartan tabs 5mg; 160mg	2	
amlodipine besylate/valsartan tabs 5mg; 320mg	2	
atropine sulfate inj 0.25mg/5ml	1	
CORLANOR SOLN 5MG/5ML	4	
CORLANOR TABS 5MG	4	
CORLANOR TABS 7.5MG	4	
DEMSER CAPS 250MG	5	
digitek tabs 0.125mg	1	
DIGOXIN SOLN 0.05MG/ML	3	
digoxin tabs 125mcg	1	
digoxin tabs 250mcg	2	
digox tabs 125mcg	1	
dobutamine hcl/d5w inj 5%; 1mg/ml	1	B/D
dobutamine hcl/d5w inj 5%; 1mg/ml	1	B/D
dobutamine hcl inj 250mg/20ml	1	B/D
dobutamine hydrochloride/dextrose 5% inj 5%; 2mg/ml	1	B/D
dobutamine hydrochloride/dextrose 5% inj 5%; 2mg/ml	1	B/D
dobutamine hydrochloride/dextrose 5% inj 5%; 4mg/ml	1	B/D
dobutamine hydrochloride/dextrose 5% inj 5%; 4mg/ml	1	B/D
dobutamine/dextrose 5% inj 5%; 2mg/ml	1	B/D
dopamine hydrochloride/dextrose inj 5%; 0.8mg/ml	1	B/D
dopamine hydrochloride/dextrose inj 5%; 0.8mg/ml	1	B/D
dopamine hydrochloride/dextrose inj 5%; 1.6mg/ml	1	B/D
dopamine hydrochloride/dextrose inj 5%; 1.6mg/ml	1	B/D
dopamine hydrochloride inj 40mg/ml	1	B/D
dopamine/d5w inj 5%; 3.2mg/ml	1	B/D
ENTRESTO TABS 24MG; 26MG	3	

Drug Name	Drug Tier	Requirements/Limits
ENTRESTO TABS 49MG; 51MG	3	
ENTRESTO TABS 97MG; 103MG	3	
LANOXIN PEDIATRIC INJ 0.1MG/ML	3	
LANOXIN TABS 125MCG	3	
metyrosine caps 250mg	5	
milrinone in dextrose inj 5%; 40mg/200ml	1	B/D
milrinone lactate in dextrose inj 5%; 20mg/100ml	1	B/D
milrinone lactate in dextrose inj 5%; 20mg/100ml	1	B/D
milrinone lactate in dextrose inj 5%; 40mg/200ml	1	B/D
milrinone lactate in dextrose inj 5%; 40mg/200ml	1	B/D
norepinephrine bitartrate inj 1mg/ml	2	
NORTHERA CAPS 100MG	5	
NORTHERA CAPS 200MG	5	
NORTHERA CAPS 300MG	5	
pentoxifylline er tbcr 400mg	1	
PRALUENT INJ 150MG/ML	3	QL (2 ML per 28 days) PA
PRALUENT INJ 75MG/ML	3	QL (2 ML per 28 days) PA
ranolazine er tb12 1000mg	2	
ranolazine er tb12 500mg	2	
REPATHA PUSHTRONEX SYSTEM INJ 420MG/3.5ML	3	QL (3.5 ML per 28 days) PA
REPATHA SURECLICK INJ 140MG/ML	3	QL (3 ML per 28 days) PA
REPATHA INJ 140MG/ML	3	QL (3 ML per 28 days) PA
TAKHZYRO INJ 300MG/2ML	5	PA
VYNDAMAX CAPS 61MG	5	PA
VYNDAQEL CAPS 20MG	5	PA
Diuretics, Loop		
bumetanide inj 0.25mg/ml	2	
bumetanide tabs 0.5mg	2	
bumetanide tabs 1mg	2	
bumetanide tabs 2mg	2	
ethacrynate sodium inj 50mg	5	
ethacrynic acid tabs 25mg	4	
furosemide inj 10mg/ml	1	
furosemide inj 10mg/ml	1	
furosemide soln 10mg/ml	1	
furosemide soln 8mg/ml	1	
furosemide tabs 20mg	1	
furosemide tabs 40mg	1	
furosemide tabs 80mg	1	
torsemide tabs 100mg	1	
torsemide tabs 10mg	1	
torsemide tabs 20mg	1	
torsemide tabs 5mg	1	
Diuretics, Potassium-sparing		
amiloride hcl tabs 5mg	1	
amiloride/hydrochlorothiazide tabs 5mg; 50mg	1	
eplerenone tabs 25mg	2	
eplerenone tabs 50mg	2	
spironolactone/hydrochlorothiazide tabs 25mg; 25mg	1	

Drug Name	Drug Tier	Requirements/Limits
spironolactone tabs 100mg	1	
spironolactone tabs 25mg	1	
spironolactone tabs 50mg	1	
triamterene/hydrochlorothiazide caps 25mg; 37.5mg	1	
triamterene/hydrochlorothiazide tabs 25mg; 37.5mg	1	
triamterene/hydrochlorothiazide tabs 50mg; 75mg	1	
triamterene caps 100mg	2	
triamterene caps 50mg	2	
Diuretics, Thiazide		
chlorothiazide sodium inj 500mg	1	
chlorothiazide tabs 250mg	1	
chlorothiazide tabs 500mg	1	
chlorthalidone tabs 25mg	1	
chlorthalidone tabs 50mg	1	
DIURIL SUSP 250MG/5ML	4	
hydrochlorothiazide caps 12.5mg	1	
hydrochlorothiazide tabs 12.5mg	1	
hydrochlorothiazide tabs 25mg	1	
hydrochlorothiazide tabs 50mg	1	
indapamide tabs 1.25mg	1	
indapamide tabs 2.5mg	1	
metolazone tabs 10mg	2	
metolazone tabs 2.5mg	2	
metolazone tabs 5mg	2	
Dyslipidemics, Fibric Acid Derivatives		
fenofibrate micronized caps 134mg	2	
fenofibrate micronized caps 200mg	2	
fenofibrate micronized caps 67mg	2	
fenofibrate caps 134mg	2	
fenofibrate caps 150mg	2	
fenofibrate caps 200mg	2	
fenofibrate caps 43mg	2	
fenofibrate caps 50mg	2	
fenofibrate caps 67mg	2	
fenofibrate tabs 120mg	2	
fenofibrate tabs 145mg	2	
fenofibrate tabs 160mg	2	
fenofibrate tabs 40mg	2	
fenofibrate tabs 48mg	2	
fenofibrate tabs 54mg	2	
fenofibric acid dr cpdr 135mg	2	
fenofibric acid dr cpdr 45mg	2	
fenofibric acid tabs 105mg	2	
fenofibric acid tabs 35mg	2	
gemfibrozil tabs 600mg	2	
Dyslipidemics, HMG CoA Reductase Inhibitors		
atorvastatin calcium tabs 10mg	1	
atorvastatin calcium tabs 20mg	1	
atorvastatin calcium tabs 40mg	1	

Drug Name	Drug Tier	Requirements/Limits
atorvastatin calcium tabs 80mg	1	
fluvastatin sodium er tb24 80mg	2	
lovastatin tabs 10mg	1	
lovastatin tabs 20mg	1	
lovastatin tabs 40mg	1	
pravastatin sodium tabs 10mg	1	
pravastatin sodium tabs 20mg	1	
pravastatin sodium tabs 40mg	1	
pravastatin sodium tabs 80mg	1	
rosuvastatin calcium tabs 10mg	2	
rosuvastatin calcium tabs 20mg	2	
rosuvastatin calcium tabs 40mg	2	
rosuvastatin calcium tabs 5mg	2	
simvastatin tabs 10mg	1	
simvastatin tabs 20mg	1	
simvastatin tabs 40mg	1	
simvastatin tabs 5mg	1	
simvastatin tabs 80mg	1	
Dyslipidemics, Other		
cholestyramine light pack 4gm	2	
cholestyramine light powd 4gm/dose	2	
cholestyramine pack 4gm	2	
cholestyramine powd 4gm/dose	2	
colesevelam hydrochloride pack 3.75gm	2	
colestipol hcl gran 5gm	2	
colestipol hcl pack 5gm	2	
colestipol hcl tabs 1gm	2	
ezetimibe tabs 10mg	2	
icosapent ethyl caps 1gm	2	PA
JUXTAPID CAPS 10MG	5	PA
JUXTAPID CAPS 20MG	5	PA
JUXTAPID CAPS 30MG	5	PA
JUXTAPID CAPS 40MG	5	PA
JUXTAPID CAPS 5MG	5	PA
JUXTAPID CAPS 60MG	5	PA
NEXLETOL TABS 180MG	3	PA
niacin er tbcr 1000mg	2	
niacin er tbcr 500mg	2	
niacin er tbcr 750mg	2	
niacin tabs 500mg	2	
niacor tabs 500mg	2	
omega-3-acid ethyl esters caps 375mg; 465mg; 1gm	2	
prevalite pack 4gm	2	
prevalite powd 4gm/dose	2	
VASCEPA CAPS 0.5GM	4	PA
VASCEPA CAPS 1GM	4	PA
Vasodilators, Direct-acting Arterial/Venous		
BIDIL TABS 37.5MG; 20MG	4	
isosorbide dinitrate sa tbcr 40mg	1	

Drug Name	Drug Tier	Requirements/Limits
isosorbide dinitrate tabs 10mg	1	
isosorbide dinitrate tabs 20mg	1	
isosorbide dinitrate tabs 30mg	1	
isosorbide dinitrate tabs 40mg	5	
isosorbide dinitrate tabs 5mg	1	
isosorbide mononitrate er tb24 120mg	1	
isosorbide mononitrate er tb24 30mg	1	
isosorbide mononitrate er tb24 60mg	1	
isosorbide mononitrate tabs 10mg	1	
isosorbide mononitrate tabs 20mg	1	
minitran pt24 0.1mg/hr	1	
minitran pt24 0.2mg/hr	1	
minitran pt24 0.4mg/hr	1	
minitran pt24 0.6mg/hr	1	
NITRO-BID OINT 2%	3	
NITRO-DUR PT24 0.3MG/HR	4	
NITRO-DUR PT24 0.8MG/HR	4	
nitroglycerin in 5% dextrose inj 5%; 200mcg/ml	2	
nitroglycerin in 5% dextrose inj 5%; 400mcg/ml	2	
nitroglycerin in 5% dextrose inj 5%; 400mcg/ml	2	
nitroglycerin in dextrose 5% inj 5%; 100mcg/ml	2	
nitroglycerin in dextrose 5% inj 5%; 200mcg/ml	2	
nitroglycerin in dextrose 5% inj 5%; 400mcg/ml	2	
nitroglycerin lingual soln 0.4mg/spray	2	
nitroglycerin transdermal pt24 0.1mg/hr	1	
nitroglycerin transdermal pt24 0.2mg/hr	1	
nitroglycerin transdermal pt24 0.4mg/hr	1	
nitroglycerin transdermal pt24 0.6mg/hr	1	
nitroglycerin inj 5mg/ml	2	
nitroglycerin subl 0.3mg	2	
nitroglycerin subl 0.4mg	2	
nitroglycerin subl 0.6mg	2	
NITROSTAT SUBL 0.3MG	3	
NITROSTAT SUBL 0.4MG	3	
NITROSTAT SUBL 0.6MG	3	
Vasodilators, Direct-acting Arterial		
hydralazine hcl inj 20mg/ml	1	
hydralazine hcl tabs 10mg	1	
hydralazine hydrochloride tabs 100mg	1	
hydralazine hydrochloride tabs 25mg	1	
hydralazine hydrochloride tabs 50mg	1	
minoxidil tabs 10mg	1	
minoxidil tabs 2.5mg	1	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
amphetamine/dextroamphetamine cp24 1.25mg; 1.25mg; 1.25mg; 1.25mg	2	QL (120 EA per 30 days)
amphetamine/dextroamphetamine cp24 2.5mg; 2.5mg; 2.5mg; 2.5mg	2	QL (120 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
amphetamine/dextroamphetamine cp24 3.75mg; 3.75mg; 3.75mg; 3.75mg	2	QL (120 EA per 30 days)
amphetamine/dextroamphetamine cp24 5mg; 5mg; 5mg; 5mg	2	QL (120 EA per 30 days)
amphetamine/dextroamphetamine cp24 6.25mg; 6.25mg; 6.25mg; 6.25mg	2	QL (120 EA per 30 days)
amphetamine/dextroamphetamine cp24 7.5mg; 7.5mg; 7.5mg; 7.5mg	2	QL (120 EA per 30 days)
amphetamine/dextroamphetamine tabs 1.25mg; 1.25mg; 1.25mg; 1.25mg	2	QL (60 EA per 30 days)
amphetamine/dextroamphetamine tabs 1.875mg; 1.875mg; 1.875mg; 1.875mg	2	QL (60 EA per 30 days)
amphetamine/dextroamphetamine tabs 2.5mg; 2.5mg; 2.5mg; 2.5mg	2	QL (60 EA per 30 days)
amphetamine/dextroamphetamine tabs 3.125mg; 3.125mg; 3.125mg; 3.125mg	2	QL (60 EA per 30 days)
amphetamine/dextroamphetamine tabs 3.75mg; 3.75mg; 3.75mg; 3.75mg	2	QL (60 EA per 30 days)
amphetamine/dextroamphetamine tabs 5mg; 5mg; 5mg; 5mg	2	QL (60 EA per 30 days)
amphetamine/dextroamphetamine tabs 7.5mg; 7.5mg; 7.5mg; 7.5mg	2	QL (60 EA per 30 days)
dextroamphetamine sulfate er cp24 10mg	2	QL (180 EA per 30 days)
dextroamphetamine sulfate er cp24 15mg	2	QL (180 EA per 30 days)
dextroamphetamine sulfate er cp24 5mg	2	QL (180 EA per 30 days)
DEXTROAMPHETAMINE SULFATE SOLN 5MG/5ML	3	
dextroamphetamine sulfate tabs 10mg	2	QL (180 EA per 30 days)
dextroamphetamine sulfate tabs 5mg	2	QL (180 EA per 30 days)
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
atomoxetine hydrochloride caps 100mg	2	
atomoxetine hydrochloride caps 10mg	2	
atomoxetine hydrochloride caps 18mg	2	
atomoxetine hydrochloride caps 25mg	2	
atomoxetine hydrochloride caps 40mg	2	
atomoxetine hydrochloride caps 60mg	2	
atomoxetine hydrochloride caps 80mg	2	
atomoxetine caps 100mg	2	
atomoxetine caps 10mg	2	
atomoxetine caps 18mg	2	
atomoxetine caps 25mg	2	
atomoxetine caps 40mg	2	
atomoxetine caps 60mg	2	
atomoxetine caps 80mg	2	
clonidine hydrochloride er tb12 0.1mg	2	
clonidine hydrochloride tb12 0.1mg	2	
dexmethylphenidate hcl er cp24 10mg	2	QL (30 EA per 30 days)
dexmethylphenidate hcl er cp24 15mg	2	QL (30 EA per 30 days)
dexmethylphenidate hcl er cp24 20mg	2	QL (30 EA per 30 days)
dexmethylphenidate hcl er cp24 25mg	2	QL (30 EA per 30 days)
dexmethylphenidate hcl er cp24 30mg	2	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
dexmethylphenidate hcl er cp24 35mg	2	QL (30 EA per 30 days)
dexmethylphenidate hcl er cp24 40mg	2	QL (30 EA per 30 days)
dexmethylphenidate hcl er cp24 5mg	2	QL (30 EA per 30 days)
dexmethylphenidate hcl tabs 10mg	2	QL (60 EA per 30 days)
dexmethylphenidate hcl tabs 5mg	2	QL (60 EA per 30 days)
dexmethylphenidate hydrochloride cp24 25mg	2	QL (30 EA per 30 days)
dexmethylphenidate hydrochloride tabs 2.5mg	2	QL (60 EA per 30 days)
metadate er tbcr 20mg	2	QL (90 EA per 30 days)
methylphenidate hydrochloride cd cpcr 10mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride cd cpcr 20mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride cd cpcr 30mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride cd cpcr 50mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride cd cpcr 60mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cp24 10mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cp24 20mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cp24 30mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cp24 40mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cpcr 10mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cpcr 20mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cpcr 30mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cpcr 40mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cpcr 50mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er cpcr 60mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er tb24 18mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er tb24 27mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er tb24 36mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er tb24 54mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er tbcr 10mg	2	QL (90 EA per 30 days)
methylphenidate hydrochloride er tbcr 18mg	2	QL (90 EA per 30 days)
methylphenidate hydrochloride er tbcr 20mg	2	QL (90 EA per 30 days)
methylphenidate hydrochloride er tbcr 27mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er tbcr 36mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er tbcr 54mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride er tbcr 72mg	2	QL (30 EA per 30 days)
methylphenidate hydrochloride chew 10mg	2	QL (180 EA per 30 days)
methylphenidate hydrochloride chew 2.5mg	2	QL (90 EA per 30 days)
methylphenidate hydrochloride chew 5mg	2	QL (90 EA per 30 days)
methylphenidate hydrochloride soln 10mg/5ml	2	QL (900 ML per 30 days)
methylphenidate hydrochloride soln 5mg/5ml	2	QL (900 ML per 30 days)
methylphenidate hydrochloride tabs 10mg	2	QL (90 EA per 30 days)
methylphenidate hydrochloride tabs 20mg	2	QL (90 EA per 30 days)
methylphenidate hydrochloride tabs 5mg	2	QL (90 EA per 30 days)
relexxii tbcr 72mg	2	QL (30 EA per 30 days)
Central Nervous System, Other		
butalbital/acetaminophen/caffeine caps 300mg; 50mg; 40mg	2	
butalbital/acetaminophen/caffeine caps 325mg; 50mg; 40mg	2	
butalbital/acetaminophen/caffeine tabs 325mg; 50mg; 40mg	2	
butalbital/aspirin/caffeine caps 325mg; 50mg; 40mg	2	
caffeine citrate inj 60mg/3ml	2	

Drug Name	Drug Tier	Requirements/Limits
caffeine citrate soln 20mg/ml	2	
EXSERVAN FILM 50MG	5	
GRALISE STARTER MISC 0	4	ST
GRALISE MISC 0; 0	4	ST
GRALISE TABS 300MG	4	ST
GRALISE TABS 600MG	4	ST
HORIZANT TBCR 300MG	4	
HORIZANT TBCR 600MG	4	
INGREZZA CAPS 40MG	5	PA
INGREZZA CAPS 60MG	5	PA
INGREZZA CAPS 80MG	5	PA
INGREZZA CPPK 0	5	PA
NUEDEXTA CAPS 20MG; 10MG	3	PA
riluzole tabs 50mg	4	
tetrabenazine tabs 12.5mg	5	PA
tetrabenazine tabs 25mg	5	PA
Fibromyalgia Agents		
SAVELLA TITRATION PACK MISC 0	3	
SAVELLA TABS 100MG	3	
SAVELLA TABS 12.5MG	3	
SAVELLA TABS 25MG	3	
SAVELLA TABS 50MG	3	
Multiple Sclerosis Agents		
AUBAGIO TABS 14MG	5	
AUBAGIO TABS 7MG	5	
AVONEX PEN INJ 30MCG/0.5ML	5	
AVONEX INJ 30MCG/0.5ML	5	
AVONEX INJ 30MCG/VIAL	5	
BAFIERTAM CPDR 95MG	5	QL (120 EA per 30 days)
BETASERON INJ 0.3MG	5	
dalfampridine er tb12 10mg	5	PA
dimethyl fumarate starterpack misc 0	5	
dimethyl fumarate cpdr 120mg	5	QL (60 EA per 30 days)
dimethyl fumarate cpdr 240mg	5	QL (60 EA per 30 days)
EXTAVIA INJ 0.3MG	5	
GILENYA CAPS 0.25MG	5	
GILENYA CAPS 0.5MG	5	
glatiramer acetate inj 20mg/ml	5	
glatiramer acetate inj 40mg/ml	5	
glatopa inj 20mg/ml	5	
glatopa inj 40mg/ml	5	
MAVENCLAD TBPK 10MG	5	PA
MAVENCLAD TBPK 10MG	5	PA
MAVENCLAD TBPK 10MG	5	PA
MAVENCLAD TBPK 10MG	5	PA
MAVENCLAD TBPK 10MG	5	PA
MAVENCLAD TBPK 10MG	5	PA
MAVENCLAD TBPK 10MG	5	PA
MAYZENT STARTER PACK TBPK 0.25MG	5	

Drug Name	Drug Tier	Requirements/Limits
MAYZENT TABS 0.25MG	5	
MAYZENT TABS 2MG	5	
PLEGRIDY STARTER PACK INJ 0	5	
PLEGRIDY STARTER PACK INJ 0	5	
PLEGRIDY INJ 125MCG/0.5ML	5	
PLEGRIDY INJ 125MCG/0.5ML	5	
PLEGRIDY INJ 125MCG/0.5ML	5	
REBIF REBIDOSE TITRATION PACK INJ 0	5	
REBIF REBIDOSE INJ 22MCG/0.5ML	5	
REBIF REBIDOSE INJ 44MCG/0.5ML	5	
REBIF TITRATION PACK INJ 0	5	
REBIF INJ 22MCG/0.5ML	5	
REBIF INJ 44MCG/0.5ML	5	
TECFIDERA STARTER PACK MISC 0	5	
TECFIDERA CPDR 120MG	5	QL (60 EA per 30 days)
TECFIDERA CPDR 240MG	5	QL (60 EA per 30 days)
TYSABRI INJ 300MG/15ML	5	PA
VUMERITY CPDR 231MG	5	
VUMERITY CPDR 231MG	5	
ZEPOSIA 7-DAY STARTER PACK CPPK 0	5	
ZEPOSIA STARTER KIT CPPK 0	5	
ZEPOSIA CAPS 0.92MG	5	
Dental and Oral Agents		
Dental and Oral Agents		
cevimeline hydrochloride caps 30mg	2	
chlorhexidine gluconate soln 0.12%	1	
KEPIVANCE INJ 6.25MG	5	PA
lidocaine hcl viscous soln 2%	1	
lidocaine hcl soln 4%	1	
lidocaine viscous soln 2%	1	
oralone dental paste pste 0.1%	2	
paroex soln 0.12%	1	
periogard soln 0.12%	1	
pilocarpine hydrochloride tabs 5mg	2	
pilocarpine hydrochloride tabs 7.5mg	2	
triamcinolone acetonide dental paste pste 0.1%	2	
Dermatological Agents		
Acne and Rosacea Agents		
accutane caps 10mg	4	PA
accutane caps 20mg	4	PA
accutane caps 30mg	4	PA
accutane caps 40mg	4	PA
acitretin caps 10mg	4	
acitretin caps 17.5mg	4	
acitretin caps 25mg	4	
adapalene pump gel 0.3%	2	
adapalene crea 0.1%	2	
adapalene gel 0.1%	2	
adapalene gel 0.3%	2	

Drug Name	Drug Tier	Requirements/Limits
amnesteem caps 10mg	4	PA
amnesteem caps 20mg	4	PA
amnesteem caps 40mg	4	PA
avita crea 0.025%	2	PA
avita gel 0.025%	2	PA
azelaic acid gel 15%	2	
AZELEX CREA 20%	4	PA
claravis caps 10mg	4	PA
claravis caps 20mg	4	PA
claravis caps 30mg	4	PA
claravis caps 40mg	4	PA
FINACEA FOAM 15%	4	
isotretinoin caps 10mg	4	PA
isotretinoin caps 20mg	4	PA
isotretinoin caps 25mg	4	PA
isotretinoin caps 30mg	4	PA
isotretinoin caps 35mg	4	PA
isotretinoin caps 40mg	4	PA
metronidazole crea 0.75%	2	
metronidazole gel 0.75%	2	
metronidazole gel 1%	2	
metronidazole lotn 0.75%	2	
myorisan caps 10mg	4	PA
myorisan caps 20mg	4	PA
myorisan caps 30mg	4	PA
myorisan caps 40mg	4	PA
rosadan crea 0.75%	2	
rosadan gel 0.75%	2	
tazarotene crea 0.1%	4	PA
TAZORAC CREA 0.05%	4	PA
TAZORAC GEL 0.05%	4	PA
TAZORAC GEL 0.1%	4	PA
tretinoin microsphere pump gel 0.04%	4	PA
tretinoin microsphere pump gel 0.1%	4	PA
tretinoin microsphere gel 0.04%	4	PA
tretinoin microsphere gel 0.1%	4	PA
tretinoin crea 0.025%	2	PA
tretinoin crea 0.05%	2	PA
tretinoin crea 0.1%	2	PA
tretinoin gel 0.01%	2	PA
tretinoin gel 0.025%	2	PA
tretinoin gel 0.05%	2	PA
zenatane caps 10mg	4	PA
zenatane caps 20mg	4	PA
zenatane caps 30mg	4	PA
zenatane caps 40mg	4	PA
Dermatitis and Pruitus Agents		
ammonium lactate lotn 12%	1	
desoximetasone crea 0.05%	4	

Drug Name	Drug Tier	Requirements/Limits
desoximetasone crea 0.25%	2	
DOXEPIN HYDROCHLORIDE CREA 5%	3	QL (90 GM per 30 days)
fluocinonide crea 0.05%	4	
fluocinonide crea 0.1%	4	
fluocinonide gel 0.05%	2	
fluocinonide oint 0.05%	2	
fluocinonide soln 0.05%	2	
pimecrolimus crea 1%	2	
selenium sulfide lotn 2.5%	1	
tacrolimus oint 0.03%	2	
tacrolimus oint 0.1%	2	
Dermatological Agents, Other		
calcipotriene crea 0.005%	4	
calcipotriene oint 0.005%	4	
calcipotriene soln 0.005%	2	
calcitriol oint 3mcg/gm	2	
IMIQUIMOD PUMP CREA 3.75%	5	
imiquimod crea 3.75%	5	
imiquimod crea 5%	2	
methoxsalen caps 10mg	5	
podofilox soln 0.5%	1	
REGRANEX GEL 0.01%	5	PA
SANTYL OINT 250UNIT/GM	4	
VEREGEN OINT 15%	5	
Pediculicides/Scabicides		
crotan lotn 10%	2	
ivermectin crea 1%	4	
ivermectin lotn 0.5%	2	
lindane sham 1%	2	
malathion lotn 0.5%	1	
permethrin crea 5%	2	
SKLICE LOTN 0.5%	4	
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		
AMINOSYN INJ 148MEQ/L; 1280MG/100ML; 980MG/100ML; 1280MG/100ML; 300MG/100ML; 720MG/100ML; 940MG/100ML; 720MG/100ML; 400MG/100ML; 440MG/100ML; 860MG/100ML; 420MG/100ML; 520MG/100ML; 160MG/100ML; 44MG/100ML; 800MG/100ML	3	B/D
CARBAGLU TABS 200MG	5	PA
CLINIMIX 4.25%/DEXTROSE 10% INJ 37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 10GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX 4.25%/DEXTROSE 5% INJ 37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 5GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	B/D
CLINIMIX 5%/DEXTROSE 15% INJ 42MEQ/1000ML; 1035MG/100ML; 575MG/100ML; 20MEQ/1000ML; 15GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	B/D
CLINIMIX 5%/DEXTROSE 20% INJ 42MEQ/L; 1035MG/100ML; 575MG/100ML; 20MEQ/L; 20GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	B/D
CLINIMIX 6/5 INJ 1242MG/100ML; 690MG/100ML; 5GM/100ML; 618MG/100ML; 288MG/100ML; 360MG/100ML; 438MG/100ML; 348MG/100ML; 240MG/100ML; 336MG/100ML; 408MG/100ML; 300MG/100ML; 252MG/100ML; 108MG/100ML; 24MG/100ML; 348MG/100ML	3	B/D
CLINIMIX 8/10 INJ 1656MG/100ML; 920MG/100ML; 10GM/100ML; 824MG/100ML; 384MG/100ML; 480MG/100ML; 584MG/100ML; 464MG/100ML; 320MG/100ML; 448MG/100ML; 544MG/100ML; 400MG/100ML; 336MG/100ML; 144MG/100ML; 32MG/100ML; 464MG/100ML	3	B/D
CLINIMIX 8/14 INJ 1656MG/100ML; 920MG/100ML; 14GM/100ML; 824MG/100ML; 384MG/100ML; 480MG/100ML; 584MG/100ML; 464MG/100ML; 320MG/100ML; 448MG/100ML; 544MG/100ML; 400MG/100ML; 336MG/100ML; 144MG/100ML; 32MG/100ML; 464MG/100ML	3	B/D
CLINIMIX E 2.75%/DEXTROSE 5% INJ 570MG/100ML; 316MG/100ML; 33MG/100ML; 5GM/100ML; 515MG/100ML; 132MG/100ML; 165MG/100ML; 201MG/100ML; 159MG/100ML; 51MG/100ML; 110MG/100ML; 454MG/100ML; 154MG/100ML; 261MG/100ML; 187MG/100ML; 138MG/100ML; 217MG/100ML; 112MG/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX E 4.25%/DEXTROSE 10% INJ 880MG/100ML; 489MG/100ML; 33MG/100ML; 10GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	B/D
CLINIMIX E 4.25%/DEXTROSE 5% INJ 880MG/100ML; 489MG/100ML; 33MG/100ML; 5GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	B/D
CLINIMIX E 5%/DEXTROSE 15% INJ 1035MG/100ML; 575MG/100ML; 33MG/100ML; 15GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	B/D
CLINIMIX E 5%/DEXTROSE 20% INJ 1035MG/100ML; 575MG/100ML; 33MG/100ML; 20GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	B/D
CLINIMIX E 8/10 INJ 83MEQ/L; 1656MG/100ML; 920MG/100ML; 33MG/100ML; 10GM/100ML; 824MG/100ML; 384MG/100ML; 480MG/100ML; 584MG/100ML; 464MG/100ML; 51MG/100ML; 320MG/100ML; 448MG/100ML; 261MG/100ML; 544MG/100ML; 400MG/100ML; 205MG/100ML; 336MG/100ML; 144MG/100ML; 32MG/100ML; 464MG/100ML	3	B/D
CLINIMIX E 8/14 INJ 83MEQ/L; 1656MG/100ML; 920MG/100ML; 33MG/100ML; 14GM/100ML; 824MG/100ML; 384MG/100ML; 480MG/100ML; 584MG/100ML; 464MG/100ML; 51MG/100ML; 320MG/100ML; 448MG/100ML; 261MG/100ML; 544MG/100ML; 400MG/100ML; 205MG/100ML; 336MG/100ML; 144MG/100ML; 32MG/100ML; 464MG/100ML	3	B/D
CRYSVITA INJ 10MG/ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
CRYSVITA INJ 20MG/ML	5	PA
CRYSVITA INJ 30MG/ML	5	PA
dextrose 10%/nacl 0.45% inj 10%; 0.45%	1	
dextrose 5% /electrolyte #48 viaflex inj 24meq/l; 5%; 23meq/l; 3meq/l; 3meq/l; 20meq/l; 25meq/l	1	
dextrose 10%/nacl 0.2% inj 10%; 0.2%	1	
dextrose 10% inj 10%	1	
dextrose 2.5%/nacl 0.45% inj 2.5%; 0.45%	1	
dextrose 20% inj 20%	1	
dextrose 25% inj 250mg/ml	1	
dextrose 40% inj 40%	1	
dextrose 5%/lactated ringers inj 2.7meq/l; 109meq/l; 5%; 28meq/l; 4meq/l; 130meq/l	1	
dextrose 5%/nacl 0.2% inj 5%; 0.2%	1	
dextrose 5%/nacl 0.225% inj 5%; 0.225%	1	
dextrose 5%/nacl 0.3% inj 5%; 0.3%	1	
dextrose 5%/nacl 0.33% inj 5%; 0.33%	1	
dextrose 5%/nacl 0.45% inj 5%; 0.45%	1	
dextrose 5%/nacl 0.9% inj 5%; 0.9%	1	
dextrose 5% inj 5%	1	
dextrose 50% inj 50%	1	
dextrose 50% inj 50%	1	
dextrose/sodium chloride inj 5%; 0.225%	1	
dextrose inj 20%	1	
IONOSOL-MB/DEXTROSE 5% INJ 22MEQ/L; 5%; 23MEQ/L; 3MEQ/L; 3MEQ/L; 20MEQ/L; 25MEQ/L	3	
ISOLYTE-P/DEXTROSE 5% INJ 23MEQ/L; 23MEQ/L; 5%; 3MEQ/L; 3MEQ/L; 20MEQ/L; 25MEQ/L	3	
ISOLYTE-S INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	
kcl 0.075%/d5w/nacl 0.45% inj 5%; 10meq/l; 0.45%	1	
kcl 0.15%/d5w/nacl 0.2% inj 5%; 20meq/l; 0.2%	1	
kcl 0.15%/d5w/nacl 0.225% inj 5%; 20meq/l; 0.225%	1	
kcl 0.15%/d5w/nacl 0.45% inj 5%; 20meq/l; 0.45%	1	
kcl 0.15%/d5w/nacl 0.9% inj 5%; 20meq/l; 0.9%	1	
kcl 0.3%/d5w/nacl 0.45% inj 5%; 40meq/l; 0.45%	1	
kcl 0.3%/d5w/nacl 0.9% inj 5%; 40meq/l; 0.9%	1	
klor-con 10 tbcr 10meq	1	
klor-con 8 tbcr 8meq	1	
klor-con m10 tbcr 10meq	1	
klor-con m15 tbcr 15meq	2	
klor-con m20 tbcr 20meq	1	
klor-con sprinkle cpcr 10meq	1	
klor-con sprinkle cpcr 8meq	1	
klor-con pack 20meq	2	
magnesium sulfate in d5w inj 5%; 1gm/100ml	1	
magnesium sulfate/dextrose inj 5%; 1gm/100ml	2	
magnesium sulfate inj 20gm/500ml	1	
magnesium sulfate inj 2gm/50ml	1	

Drug Name	Drug Tier	Requirements/Limits
magnesium sulfate inj 40gm/1000ml	1	
magnesium sulfate inj 4gm/100ml	1	
magnesium sulfate inj 4gm/50ml	1	
NORMOSOL-M IN D5W INJ 16MEQ/L; 40MEQ/L; 5%; 3MEQ/L; 13MEQ/L; 40MEQ/L	3	
NORMOSOL-M/D5W INJ 16MEQ/L; 40MEQ/L; 5%; 3MEQ/L; 13MEQ/L; 40MEQ/L	3	
normosol-r in d5w inj 27meq/l; 98meq/l; 5%; 23meq/l; 3meq/l; 5meq/l; 140meq/l	1	
NORMOSOL-R INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	
PLASMA-LYTE A INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	
PLASMA-LYTE-148 INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	
potassium chloride cr tbcr 10meq	1	
potassium chloride cr tbcr 10meq	1	
potassium chloride er cpcr 10meq	1	
potassium chloride er cpcr 8meq	1	
potassium chloride er tbcr 10meq	1	
potassium chloride er tbcr 10meq	1	
potassium chloride er tbcr 15meq	2	
potassium chloride er tbcr 20meq	1	
potassium chloride er tbcr 20meq	1	
potassium chloride er tbcr 8meq	1	
potassium chloride proamp inj 2meq/ml	1	
potassium chloride sr tbcr 8meq	1	
potassium chloride/dextrose/lactated ringers inj 3meq/l; 149meq/l; 5%; 28meq/l; 24meq/l; 130meq/l	1	
potassium chloride/dextrose/sodium chloride inj 5%; 30meq/l; 0.45%	1	
potassium chloride/dextrose inj 5%; 20meq/l	1	
potassium chloride/dextrose inj 5%; 40meq/l	1	
potassium chloride/sodium chloride inj 20meq/l; 0.45%	1	
potassium chloride/sodium chloride inj 20meq/l; 0.9%	1	
potassium chloride/sodium chloride inj 40meq/l; 0.9%	1	
potassium chloride inj 10meq/100ml	1	
potassium chloride inj 10meq/50ml	1	
potassium chloride inj 20meq/100ml	1	
potassium chloride inj 20meq/50ml	1	
potassium chloride inj 2meq/ml	1	
potassium chloride inj 2meq/ml	1	
potassium chloride inj 40meq/100ml	1	
potassium chloride pack 20meq	2	
potassium chloride soln 10%	2	
potassium chloride soln 20%	2	
potassium citrate er tbcr 1080mg	1	
potassium citrate er tbcr 15meq	1	
potassium citrate er tbcr 540mg	1	

Drug Name	Drug Tier	Requirements/Limits
PROCALAMINE INJ 47MEQ/L; 210MG/100ML; 290MG/100ML; 3MEQ/L; 41MEQ/L; 20MG/100ML; 3GM/100ML; 420MG/100ML; 85MG/100ML; 210MG/100ML; 270MG/100ML; 220MG/100ML; 5MEQ/L; 160MG/100ML; 170MG/100ML; 7MMOLE/L; 24.5MEQ/L; 340MG/100ML; 180MG/100ML; 35MEQ/L; 120MG/100ML; 46MG/100ML; 200MG/100ML	3	B/D
ringers injection inj 4.5meq/l; 156meq/l; 4meq/l; 147meq/l	1	
sodium chloride 0.45% inj 0.45%	2	
sodium chloride inj 0.45%	2	
sodium chloride inj 0.9%	2	
sodium chloride inj 3%	2	
sodium chloride inj 5%	2	
sodium fluoride tabs 1mg	2	
TROPHAMINE INJ 54.4MEQ/L; 0.32GM/100ML; 0.73GM/100ML; 0.19GM/100ML; 0.014GM/100ML; 0.22GM/100ML; 0.29GM/100ML; 0.49GM/100ML; 0.3GM/100ML; 0.84GM/100ML; 0.49GM/100ML; 0.2GM/100ML; 0.29GM/100ML; 0.41GM/100ML; 0.23GM/100ML; 0.015GM/100ML; 0.25GM/100ML; 0.12GM/100ML; 0.14GM/100ML; 0.47GM/100ML	3	B/D
Electrolyte/Mineral/Metal Modifiers		
CHEMET CAPS 100MG	5	
clovique caps 250mg	5	
deferasirox tbso 125mg	5	PA
deferasirox tbso 250mg	5	PA
deferasirox tbso 500mg	5	PA
deferiprone tabs 500mg	5	
FERRIPROX TWICE-A-DAY TABS 1000MG	5	
FERRIPROX SOLN 100MG/ML	5	
FERRIPROX TABS 1000MG	5	
FERRIPROX TABS 500MG	5	
JYNARQUE TABS 15MG	5	QL (120 EA per 30 days) PA
JYNARQUE TABS 30MG	5	QL (120 EA per 30 days) PA
JYNARQUE TBPK 0	5	QL (56 EA per 28 days) PA
JYNARQUE TBPK 0	5	QL (56 EA per 28 days) PA
JYNARQUE TBPK 0	5	QL (56 EA per 28 days) PA
JYNARQUE TBPK 0	5	QL (56 EA per 28 days) PA
JYNARQUE TBPK 15MG	5	QL (56 EA per 28 days) PA
kionex susp 15gm/60ml	1	
penicillamine caps 250mg	5	
penicillamine tabs 250mg	5	
SAMSCA TABS 15MG	5	PA
SAMSCA TABS 30MG	5	PA
sodium polystyrene sulfonate powd 0	1	
sodium polystyrene sulfonate susp 15gm/60ml	1	
sodium polystyrene sulfonate susp 30gm/120ml	2	
sps susp 15gm/60ml	1	
TOLVAPTAN TABS 15MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
tolvaptan tabs 30mg	5	PA
trientine hydrochloride caps 250mg	5	
VELTASSA PACK 16.8GM	4	
VELTASSA PACK 25.2GM	4	
VELTASSA PACK 8.4GM	4	
Phosphate Binders		
calcium acetate caps 667mg	2	
calcium acetate tabs 667mg	2	
FOSRENOL PACK 1000MG	5	
FOSRENOL PACK 750MG	5	
lanthanum carbonate chew 1000mg	5	
lanthanum carbonate chew 500mg	5	
lanthanum carbonate chew 750mg	5	
PHOSLYRA SOLN 667MG/5ML	4	
sevelamer carbonate pack 0.8gm	5	
sevelamer carbonate pack 2.4gm	5	
sevelamer carbonate tabs 800mg	4	
sevelamer hydrochloride tabs 400mg	4	
sevelamer hydrochloride tabs 800mg	5	
Vitamins		
hemenatal ob + dha misc 30mcg; 10mg; 400unit; 0.8mg; 12mcg; 200mg; 2.5mg; 1mg; 6mg; 0.5mg; 17mg; 203mg; 28mg; 250mcg; 50mg; 1.6mg; 65mcg; 1.5mg; 10unit; 4.5mg	2	
hemenatal ob tabs 30mcg; 10mg; 400unit; 0.8mg; 12mcg; 1mg; 6mg; 17mg; 28mg; 250mcg; 50mg; 1.6mg; 65mcg; 1.5mg; 10unit; 4.5mg	2	
pnv-total caps 100mg; 0; 800unit; 1mg; 0.02mg; 320mg; 0; 5mg; 400mg; 1.2mg; 35mg; 0; 0; 10mg; 25mg; 3.4mg; 2mg; 30unit; 25mg	2	
prenatal 19 tabs 100mg; 1000unit; 200mg; 7mg; 400unit; 12mcg; 25mg; 29mg; 1mg; 15mg; 20mg; 3mg; 3mg; 30unit; 20mg	2	
prenatal tabs 120mg; 0; 200mg; 10mcg; 2mg; 12mcg; 27mg; 1mg; 20mg; 10mg; 1200mcg; 3mg; 1.84mg; 10mg; 25mg	2	
vinate ii tabs 120mg; 3000unit; 200mg; 400unit; 2mg; 12mcg; 29mg; 1mg; 25mg; 20mg; 25mg; 4mg; 1.8mg; 30unit; 25mg	2	
virt-c dha caps 25mg; 300mcg; 5mg; 2mg; 12.5mcg; 156mg; 39mg; 53.5mg; 310mg; 1mg; 5mg; 1.8mg; 200mg; 38mg; 25mg; 3mg; 2mg; 10mg	2	
vp-heme ob + dha misc 30mcg; 10mg; 400unit; 0.8mg; 12mcg; 200mg; 2.5mg; 1mg; 6mg; 0.5mg; 17mg; 203mg; 28mg; 250mcg; 50mg; 1.6mg; 65mcg; 1.5mg; 10unit; 4.5mg	2	
vp-heme ob tabs 30mcg; 10mg; 400unit; 0.8mg; 12mcg; 1mg; 6mg; 17mg; 28mg; 250mcg; 50mg; 1.6mg; 65mcg; 1.5mg; 10unit; 4.5mg	2	
vp-heme one caps 25mg; 30mcg; 10mg; 400unit; 12mcg; 200mg; 1mg; 6mg; 17mg; 22mg; 175mcg; 50mg; 10unit; 15mg	2	

Drug Name	Drug Tier	Requirements/Limits
vp-pnv-dha caps 80mg; 50mg; 400unit; 1mg; 12mcg; 200mg; 15.8mg; 28mg; 1mg; 30mg; 20mg; 16mg; 2500unit; 2.2mg; 6mg; 30unit; 20mg	2	
Gastrointestinal Agents		
Anti-Constipation Agents		
AMITIZA CAPS 24MCG	3	QL (60 EA per 30 days)
AMITIZA CAPS 8MCG	3	QL (60 EA per 30 days)
constulose soln 10gm/15ml	2	
enulose soln 10gm/15ml	2	
gavilyte-c solr 240gm; 2.98gm; 6.72gm; 5.84gm; 22.72gm	2	
gavilyte-g solr 236gm; 2.97gm; 6.74gm; 5.86gm; 22.74gm	2	
gavilyte-n/flavor pack solr 420gm; 1.48gm; 5.72gm; 11.2gm	2	
generlac soln 10gm/15ml	2	
GOLYTELY SOLR 227.1GM; 2.82GM; 6.36GM; 5.53GM; 21.5GM	4	
KRISTALOSE PACK 10GM	3	
KRISTALOSE PACK 20GM	3	
lactulose soln 10gm/15ml	2	
lactulose soln 10gm/15ml	2	
LINZESS CAPS 145MCG	3	
LINZESS CAPS 290MCG	3	
LINZESS CAPS 72MCG	3	
LUBIPROSTONE CAPS 24MCG	3	QL (60 EA per 30 days)
LUBIPROSTONE CAPS 8MCG	3	QL (60 EA per 30 days)
MOVIPREP SOLR 4.7GM; 100GM; 1.015GM; 5.9GM; 2.691GM; 7.5GM	4	
OSMOPREP TABS 0.398GM; 1.102GM	4	
peg 3350/electrolytes solr 240gm; 2.98gm; 6.72gm; 5.84gm; 22.72gm	2	
peg-3350/electrolytes solr 236gm; 2.97gm; 6.74gm; 5.86gm; 22.74gm	2	
peg-3350/nacl/na bicarbonate/kcl solr 420gm; 1.48gm; 5.72gm; 11.2gm	2	
PREPOPIK PACK 12GM; 3.5GM; 10MG	4	
SUPREP BOWEL PREP KIT SOLN 1.6GM/177ML; 3.13GM/177ML; 17.5GM/177ML	4	
trilyte solr 420gm; 1.48gm; 5.72gm; 11.2gm	2	
Anti-Diarrheal Agents		
alosetron hydrochloride tabs 0.5mg	5	
alosetron hydrochloride tabs 1mg	5	
VIBERZI TABS 100MG	5	PA
VIBERZI TABS 75MG	5	PA
Antispasmodics, Gastrointestinal		
CUVPOSA SOLN 1MG/5ML	4	
dicyclomine hcl soln 10mg/5ml	2	
dicyclomine hydrochloride caps 10mg	2	
dicyclomine hydrochloride tabs 20mg	2	
GLYCATE TABS 1.5MG	4	
glycopyrrolate inj 0.2mg/ml	2	

Drug Name	Drug Tier	Requirements/Limits
glycopyrrolate inj 0.2mg/ml	2	
glycopyrrolate inj 0.4mg/2ml	2	
glycopyrrolate inj 0.4mg/2ml	2	
glycopyrrolate inj 1mg/5ml	2	
glycopyrrolate inj 4mg/20ml	2	
GLYCOPYRROLATE TABS 1.5MG	4	
glycopyrrolate tabs 1mg	2	
glycopyrrolate tabs 2mg	2	
methscopolamine bromide tabs 2.5mg	2	
methscopolamine bromide tabs 5mg	2	
propantheline bromide tabs 15mg	2	
Gastrointestinal Agents, Other		
CHENODAL TABS 250MG	5	PA
CHOLBAM CAPS 250MG	5	PA
CHOLBAM CAPS 50MG	5	PA
cromolyn sodium conc 100mg/5ml	1	
diphenoxylate hydrochloride/atropine sulfate tabs 0.025mg; 2.5mg	1	
diphenoxylate/atropine liqd 0.025mg/5ml; 2.5mg/5ml	1	
diphenoxylate/atropine tabs 0.025mg; 2.5mg	1	
GATTEX INJ 5MG	5	PA
loperamide hcl caps 2mg	2	
metoclopramide hcl inj 5mg/ml	2	
metoclopramide hcl soln 5mg/5ml	2	
metoclopramide hcl tabs 5mg	2	
metoclopramide hydrochloride tabs 10mg	2	
metoclopramide odt tbdp 10mg	2	
metoclopramide odt tbdp 5mg	2	
MOVANTIK TABS 12.5MG	4	QL (30 EA per 30 days)
MOVANTIK TABS 25MG	4	QL (30 EA per 30 days)
OCALIVA TABS 10MG	5	QL (30 EA per 30 days) PA
OCALIVA TABS 5MG	5	QL (30 EA per 30 days) PA
paregoric tinc 2mg/5ml	2	
peg-3350/electrolytes/ascorbate solr 4.7gm; 100gm; 1.015gm; 5.9gm; 2.691gm; 7.5gm	2	
peg-3350/sodium sulf/naclpotassium cl/na ascorbate/ascorbic solr 4.7gm; 100gm; 1.015gm; 5.9gm; 2.691gm; 7.5gm	2	
RECTIV OINT 0.4%	4	
RELISTOR INJ 12MG/0.6ML	5	PA
RELISTOR INJ 12MG/0.6ML	5	PA
RELISTOR INJ 8MG/0.4ML	5	PA
RELISTOR TABS 150MG	5	QL (90 EA per 30 days) PA
SYMPROIC TABS 0.2MG	4	QL (30 EA per 30 days)
ursodiol caps 300mg	2	
ursodiol tabs 250mg	2	
ursodiol tabs 500mg	2	
Histamine2 (H2) Receptor Antagonists		
cimetidine hcl soln 300mg/5ml	2	
cimetidine hydrochloride soln 300mg/5ml	2	

Drug Name	Drug Tier	Requirements/Limits
cimetidine tabs 200mg	2	
cimetidine tabs 300mg	2	
cimetidine tabs 400mg	2	
cimetidine tabs 800mg	2	
famotidine premixed inj 0.4mg/ml; 0.9%	2	
famotidine inj 200mg/20ml	2	
famotidine inj 20mg/2ml	2	
famotidine inj 40mg/4ml	2	
famotidine susr 40mg/5ml	2	
famotidine tabs 20mg	2	
famotidine tabs 40mg	2	
nizatidine caps 150mg	2	
nizatidine caps 300mg	2	
nizatidine soln 15mg/ml	2	
ranitidine hcl inj 150mg/6ml	2	
ranitidine hcl inj 50mg/2ml	2	
ranitidine hcl syrp 75mg/5ml	2	
ranitidine hcl tabs 300mg	2	
ranitidine hydrochloride caps 150mg	2	
ranitidine hydrochloride caps 300mg	2	
ranitidine hydrochloride inj 1000mg/40ml	2	
ranitidine hydrochloride inj 150mg/6ml	2	
ranitidine hydrochloride inj 50mg/2ml	2	
ranitidine hydrochloride tabs 150mg	2	
Protectants		
misoprostol tabs 100mcg	1	
misoprostol tabs 200mcg	1	
sucralfate susp 1gm/10ml	2	
sucralfate tabs 1gm	2	
Proton Pump Inhibitors		
esomeprazole magnesium cpdr 20mg	2	
esomeprazole magnesium cpdr 40mg	2	
lansoprazole cpdr 15mg	2	
lansoprazole cpdr 30mg	2	
omeprazole dr cpdr 10mg	2	
omeprazole dr cpdr 40mg	2	
omeprazole cpdr 20mg	2	
omeprazole cpdr 40mg	2	
pantoprazole sodium inj 40mg	2	
pantoprazole sodium tbec 20mg	2	
pantoprazole sodium tbec 40mg	2	
rabeprazole sodium tbec 20mg	2	
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
ALDURAZYME INJ 2.9MG/5ML	5	PA
CERDELGA CAPS 84MG	5	PA
CEREZYME INJ 400UNIT	5	PA

Drug Name	Drug Tier	Requirements/Limits
CREON CPEP 120000UNIT; 24000UNIT; 76000UNIT	3	
CREON CPEP 15000UNIT; 3000UNIT; 9500UNIT	3	
CREON CPEP 180000UNIT; 36000UNIT; 114000UNIT	3	
CREON CPEP 30000UNIT; 6000UNIT; 19000UNIT	3	
CREON CPEP 60000UNIT; 12000UNIT; 38000UNIT	3	
CYSTADANE POWD 0	5	
CYSTAGON CAPS 150MG	4	PA
CYSTAGON CAPS 50MG	4	PA
ELAPRASE INJ 6MG/3ML	5	PA
ELELYSO INJ 200UNIT	5	PA
EXONDYS 51 INJ 100MG/2ML	5	PA
EXONDYS 51 INJ 500MG/10ML	5	PA
FABRAZYME INJ 35MG	5	PA
FABRAZYME INJ 5MG	5	PA
GALAFOLD CAPS 123MG	5	PA
KANUMA INJ 20MG/10ML	5	PA
KUVAN PACK 100MG	5	PA
KUVAN PACK 500MG	5	PA
KUVAN TABS 100MG	5	PA
LUMIZYME INJ 50MG	5	PA
miglustat caps 100mg	5	PA
NAGLAZYME INJ 1MG/ML	5	PA
nitisinone caps 10mg	5	PA
nitisinone caps 2mg	5	PA
nitisinone caps 5mg	5	PA
ORFADIN CAPS 20MG	5	PA
ORFADIN SUSP 4MG/ML	5	PA
PANCREAZE CPEP 149900UNIT; 37000UNIT; 97300UNIT	3	
PANCREAZE CPEP 15200UNIT; 2600UNIT; 8800UNIT	3	
PANCREAZE CPEP 24600UNIT; 4200UNIT; 14200UNIT	3	
PANCREAZE CPEP 61500UNIT; 10500UNIT; 35500UNIT	3	
PANCREAZE CPEP 83900UNIT; 21000UNIT; 54700UNIT	3	
PANCREAZE CPEP 98400UNIT; 16800UNIT; 56800UNIT	3	
PROCYSBI CPDR 25MG	5	PA
PROCYSBI CPDR 75MG	5	PA
PROCYSBI PACK 300MG	5	PA
PROCYSBI PACK 75MG	5	PA
RAVICTI LIQD 1.1GM/ML	5	PA
sapropterin dihydrochloride pack 100mg	5	PA
sapropterin dihydrochloride pack 500mg	5	PA
sapropterin dihydrochloride tabs 100mg	5	PA
sodium phenylbutyrate tabs 500mg	5	
STRENSIQ INJ 18MG/0.45ML	5	PA
STRENSIQ INJ 28MG/0.7ML	5	PA
STRENSIQ INJ 40MG/ML	5	PA
STRENSIQ INJ 80MG/0.8ML	5	PA
SUCRAID SOLN 8500UNIT/ML	5	PA
VIMIZIM INJ 5MG/5ML	5	PA
VPRIV INJ 400UNIT	5	PA

Drug Name	Drug Tier	Requirements/Limits
XIAFLEX INJ 0.9MG	5	PA
XURIDEN PACK 2GM	5	QL (120 EA per 30 days) PA
ZENPEP CPEP 105000UNIT; 25000UNIT; 79000UNIT	3	
ZENPEP CPEP 14000UNIT; 3000UNIT; 10000UNIT	3	
ZENPEP CPEP 168000UNIT; 40000UNIT; 126000UNIT	3	
ZENPEP CPEP 24000UNIT; 5000UNIT; 17000UNIT	3	
ZENPEP CPEP 42000UNIT; 10000UNIT; 32000UNIT	3	
ZENPEP CPEP 63000UNIT; 15000UNIT; 47000UNIT	3	
ZENPEP CPEP 84000UNIT; 20000UNIT; 63000UNIT	3	
Genitourinary Agents		
Antispasmodics, Urinary		
DARIFENACIN HYDROBROMIDE ER TB24 15MG	3	
DARIFENACIN HYDROBROMIDE ER TB24 7.5MG	3	
flavoxate hcl tabs 100mg	1	
MYRBETRIQ SRER 8MG/ML	3	
MYRBETRIQ TB24 25MG	3	
MYRBETRIQ TB24 50MG	3	
oxybutynin chloride er tb24 10mg	2	
oxybutynin chloride er tb24 15mg	2	
oxybutynin chloride er tb24 5mg	2	
oxybutynin chloride syrp 5mg/5ml	2	
oxybutynin chloride tabs 5mg	2	
solifenacin succinate tabs 10mg	2	
solifenacin succinate tabs 5mg	2	
tolterodine tartrate er cp24 2mg	2	
tolterodine tartrate er cp24 4mg	2	
tolterodine tartrate tabs 1mg	2	
tolterodine tartrate tabs 2mg	2	
TOVIAZ TB24 4MG	3	
TOVIAZ TB24 8MG	3	
trospium chloride er cp24 60mg	2	
trospium chloride tabs 20mg	2	
Benign Prostatic Hypertrophy Agents		
alfuzosin hcl er tb24 10mg	2	
doxazosin mesylate tabs 1mg	1	
doxazosin mesylate tabs 2mg	1	
doxazosin mesylate tabs 4mg	1	
doxazosin mesylate tabs 8mg	1	
doxazosin tabs 2mg	1	
dutasteride caps 0.5mg	2	
finasteride tabs 5mg	1	
silodosin caps 4mg	2	
silodosin caps 8mg	2	
tadalafil tabs 5mg	2	PA
tamsulosin hydrochloride caps 0.4mg	1	
terazosin hcl caps 10mg	1	
terazosin hcl caps 1mg	1	
terazosin hcl caps 5mg	1	
terazosin hydrochloride caps 2mg	1	

Drug Name	Drug Tier	Requirements/Limits
Genitourinary Agents, Other		
acetic acid 0.25% soln 0.25%	2	
bethanechol chloride tabs 10mg	2	
bethanechol chloride tabs 25mg	2	
bethanechol chloride tabs 50mg	2	
bethanechol chloride tabs 5mg	2	
ELMIRON CAPS 100MG	4	
LITHOSTAT TABS 250MG	4	
RENACIDIN SOLN 6.602GM/100ML; 0.198GM/100ML; 3.177GM/100ML	4	
RIMSO-50 INJ 50%	4	
THIOLA EC TBEC 100MG	4	
THIOLA EC TBEC 300MG	4	
THIOLA TABS 100MG	5	
tiopronin tabs 100mg	5	
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
ala-cort crea 1%	1	
ala-cort crea 2.5%	1	
alclometasone dipropionate crea 0.05%	1	
alclometasone dipropionate oint 0.05%	1	
amcinonide oint 0.1%	1	
augmented betamethasone dipropionate crea 0.05%	2	
augmented betamethasone dipropionate gel 0.05%	2	
augmented betamethasone dipropionate lotn 0.05%	2	
augmented betamethasone dipropionate oint 0.05%	2	
betamethasone dipropionate crea 0.05%	2	
betamethasone dipropionate lotn 0.05%	2	
betamethasone dipropionate oint 0.05%	2	
betamethasone sodium phosphate/betamethasone acetate inj 3mg/ml; 3mg/ml	1	
betamethasone valerate crea 0.1%	2	
betamethasone valerate lotn 0.1%	2	
betamethasone valerate oint 0.1%	2	
clobetasol propionate emollient foam 0.05%	4	
clobetasol propionate crea 0.05%	2	
clobetasol propionate foam 0.05%	4	
clobetasol propionate foam 0.05%	4	
clobetasol propionate gel 0.05%	2	
clobetasol propionate oint 0.05%	2	
clobetasol propionate soln 0.05%	2	
CORDRAN TAPE 4MCG/SQCM	4	
CORTIFOAM FOAM 10%	3	
cortisone acetate tabs 25mg	1	
desonide crea 0.05%	2	
desonide lotn 0.05%	2	
desonide oint 0.05%	2	
DEXAMETHASONE INTENSOL CONC 1MG/ML	3	
dexamethasone sodium phosphate inj 100mg/10ml	2	

Drug Name	Drug Tier	Requirements/Limits
dexamethasone sodium phosphate inj 10mg/ml	2	
dexamethasone sodium phosphate inj 10mg/ml	2	
dexamethasone sodium phosphate inj 120mg/30ml	2	
dexamethasone sodium phosphate inj 20mg/5ml	2	
dexamethasone sodium phosphate inj 4mg/ml	2	
dexamethasone elix 0.5mg/5ml	2	
dexamethasone soln 0.5mg/5ml	2	
dexamethasone tabs 0.5mg	2	
dexamethasone tabs 0.75mg	2	
dexamethasone tabs 1.5mg	2	
dexamethasone tabs 1mg	2	
dexamethasone tabs 2mg	2	
dexamethasone tabs 4mg	2	
dexamethasone tabs 6mg	2	
fludrocortisone acetate tabs 0.1mg	1	
fluocinolone acetonide body oil 0.01%	2	
fluocinolone acetonide scalp oil 0.01%	2	
fluocinolone acetonide crea 0.01%	2	
fluocinolone acetonide crea 0.025%	2	
fluocinolone acetonide oint 0.025%	2	
fluocinolone acetonide soln 0.01%	2	
flurandrenolide crea 0.05%	2	
flurandrenolide lotn 0.05%	4	
flurandrenolide oint 0.05%	2	
fluticasone propionate crea 0.05%	1	
fluticasone propionate oint 0.005%	1	
halobetasol propionate crea 0.05%	2	
halobetasol propionate oint 0.05%	2	
hydrocortisone butyrate (lipid) crea 0.1%	1	
hydrocortisone butyrate (lipophilic) crea 0.1%	1	
hydrocortisone butyrate crea 0.1%	1	
hydrocortisone butyrate lotn 0.1%	2	
hydrocortisone butyrate oint 0.1%	1	
hydrocortisone butyrate soln 0.1%	1	
hydrocortisone crea 1%	1	
hydrocortisone crea 2.5%	1	
hydrocortisone crea 2.5%	1	
hydrocortisone crea 1%	1	
hydrocortisone lotn 2.5%	1	
hydrocortisone oint 1%	1	
hydrocortisone oint 2.5%	1	
hydrocortisone tabs 10mg	1	
hydrocortisone tabs 20mg	1	
hydrocortisone tabs 5mg	1	
methylprednisolone acetate inj 40mg/ml	2	
methylprednisolone acetate inj 50mg/ml	2	
methylprednisolone acetate inj 80mg/ml	2	
methylprednisolone dose pack tbpk 4mg	2	
methylprednisolone sodium succinate inj 1000mg	2	

Drug Name	Drug Tier	Requirements/Limits
methylprednisolone sodium succinate inj 1000mg	2	
methylprednisolone sodium succinate inj 500mg	2	
methylprednisolone sodiumsuccinate inj 125mg	2	
methylprednisolone sodiumsuccinate inj 40mg	2	
methylprednisolone tabs 16mg	2	
methylprednisolone tabs 32mg	2	
methylprednisolone tabs 4mg	2	
methylprednisolone tabs 8mg	2	
mometasone furoate crea 0.1%	1	
mometasone furoate oint 0.1%	1	
mometasone furoate soln 0.1%	2	
nolix crea 0.05%	2	
nolix lotn 0.05%	4	
prednicarbate crea 0.1%	2	
prednicarbate oint 0.1%	2	
prednisolone sodium phosphate odt tbdp 10mg	2	
prednisolone sodium phosphate odt tbdp 15mg	2	
prednisolone sodium phosphate odt tbdp 30mg	2	
prednisolone sodium phosphate soln 10mg/5ml	2	
prednisolone sodium phosphate soln 15mg/5ml	2	
prednisolone sodium phosphate soln 20mg/5ml	2	
prednisolone sodium phosphate soln 25mg/5ml	2	
prednisolone sodium phosphate soln 5mg/5ml	2	
prednisolone soln 15mg/5ml	2	
PREDNISONE INTENSOL CONC 5MG/ML	3	
prednisone soln 5mg/5ml	1	
prednisone tabs 10mg	1	
prednisone tabs 1mg	1	
prednisone tabs 2.5mg	1	
prednisone tabs 20mg	1	
prednisone tabs 50mg	1	
prednisone tabs 5mg	1	
prednisone tbpk 10mg	1	
prednisone tbpk 10mg	1	
prednisone tbpk 5mg	1	
prednisone tbpk 5mg	1	
procto-med hc crea 2.5%	1	
procto-pak crea 1%	1	
proctosol hc crea 2.5%	1	
proctozone-hc crea 2.5%	1	
tovet foam 0.05%	4	
triamcinolone acetonide aers 0.147mg/gm	1	
triamcinolone acetonide crea 0.025%	1	
triamcinolone acetonide crea 0.1%	1	
triamcinolone acetonide crea 0.5%	1	
triamcinolone acetonide lotn 0.025%	1	
triamcinolone acetonide lotn 0.1%	1	
triamcinolone acetonide oint 0.025%	1	
triamcinolone acetonide oint 0.1%	1	

Drug Name	Drug Tier	Requirements/Limits
triamcinolone acetonide oint 0.5%	1	
triderm crea 0.1%	1	
triderm crea 0.5%	1	
UCERIS FOAM 2MG/ACT	3	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
chorionic gonadotropin inj 10000unit	4	PA
desmopressin acetate inj 4mcg/ml	2	
desmopressin acetate inj 4mcg/ml	2	
desmopressin acetate soln 0.01%	2	
desmopressin acetate soln 0.01%	2	
DESMOPRESSIN ACETATE SOLN 1.5MG/ML	5	
desmopressin acetate tabs 0.1mg	2	
desmopressin acetate tabs 0.2mg	2	
INCRELEX INJ 40MG/4ML	5	PA
NORDITROPIN FLEXPRO INJ 10MG/1.5ML	5	PA
NORDITROPIN FLEXPRO INJ 15MG/1.5ML	5	PA
NORDITROPIN FLEXPRO INJ 30MG/3ML	5	PA
NORDITROPIN FLEXPRO INJ 5MG/1.5ML	5	PA
novarel inj 10000unit	4	PA
NOVAREL INJ 5000UNIT	4	PA
OMNITROPE INJ 10MG/1.5ML	5	PA
OMNITROPE INJ 5.8MG	5	PA
OMNITROPE INJ 5MG/1.5ML	5	PA
pregnyl w/diluent benzyl alcohol/nacl inj 10000unit	4	PA
SEROSTIM INJ 4MG	5	PA
SEROSTIM INJ 5MG	5	PA
SEROSTIM INJ 6MG	5	PA
STIMATE SOLN 1.5MG/ML	5	
vasostrict inj 20unit/ml	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
KORLYM TABS 300MG	5	PA
mifepristone tabs 200mg	2	
PROSTIN E2 SUPP 20MG	4	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Anabolic Steroids		
ANADROL-50 TABS 50MG	4	PA
oxandrolone tabs 10mg	5	QL (60 EA per 30 days) PA
OXANDROLONE TABS 2.5MG	3	QL (240 EA per 30 days) PA
Androgens		
danazol caps 100mg	2	PA
danazol caps 200mg	2	PA
danazol caps 50mg	2	PA
testosterone cypionate inj 100mg/ml	2	
testosterone cypionate inj 200mg/ml	2	

Drug Name	Drug Tier	Requirements/Limits
testosterone cypionate inj 200mg/ml	2	
testosterone cypionate inj 200mg/ml	2	
testosterone enanthate inj 200mg/ml	2	
testosterone pump gel 1%	2	PA
testosterone pump gel 1.62%	2	PA
testosterone gel 1.62%	2	PA
testosterone gel 10mg/act	2	PA
testosterone gel 20.25mg/1.25gm	2	PA
testosterone gel 25mg/2.5gm	2	PA
testosterone gel 40.5mg/2.5gm	2	PA
testosterone gel 50mg/5gm	2	PA
Estrogens		
amabelz tabs 1mg; 0.5mg	2	
aurovela 24 fe tabs 20mcg; 75mg; 1mg	2	
blisovi 24 fe tabs 20mcg; 75mg; 1mg	2	
DEPO-ESTRADIOL INJ 5MG/ML	4	
dotti pttw 0.025mg/24hr	2	
dotti pttw 0.0375mg/24hr	2	
dotti pttw 0.05mg/24hr	2	
dotti pttw 0.075mg/24hr	2	
dotti pttw 0.1mg/24hr	2	
estarylla tabs 35mcg; 0.25mg	2	
estradiol valerate inj 20mg/ml	1	
estradiol valerate inj 40mg/ml	1	
estradiol/norethindrone acetate tabs 1mg; 0.5mg	2	
estradiol crea 0.1mg/gm	2	
estradiol pttw 0.025mg/24hr	2	
estradiol pttw 0.0375mg/24hr	2	
estradiol pttw 0.05mg/24hr	2	
estradiol pttw 0.075mg/24hr	2	
estradiol pttw 0.1mg/24hr	2	
estradiol ptwk 0.025mg/24hr	2	
estradiol ptwk 0.05mg/24hr	2	
estradiol ptwk 0.06mg/24hr	2	
estradiol ptwk 0.075mg/24hr	2	
estradiol ptwk 0.1mg/24hr	2	
estradiol ptwk 37.5mcg/24hr	2	
estradiol tabs 0.5mg	2	
estradiol tabs 1mg	2	
estradiol tabs 2mg	2	
ESTRADIOL TABS 10MCG	3	
ESTRING RING 2MG	3	
FEMRING RING 0.05MG/24HR	4	
FEMRING RING 0.1MG/24HR	4	
femynor tabs 35mcg; 0.25mg	2	
fyavolv tabs 2.5mcg; 0.5mg	2	
fyavolv tabs 5mcg; 1mg	2	
hailey 24 fe tabs 20mcg; 75mg; 1mg	2	
IMVEXXY MAINTENANCE PACK INST 10MCG	4	

Drug Name	Drug Tier	Requirements/Limits
IMVEXXY MAINTENANCE PACK INST 4MCG	4	
IMVEXXY STARTER PACK INST 10MCG	4	
IMVEXXY STARTER PACK INST 4MCG	4	
jevantique lo tabs 2.5mcg; 0.5mg	2	
jinteli tabs 5mcg; 1mg	2	
junel fe 24 tabs 20mcg; 75mg; 1mg	2	
larin 24 fe tabs 20mcg; 75mg; 1mg	2	
lopreeza tabs 1mg; 0.5mg	2	
lyllana pttw 0.025mg/24hr	2	
lyllana pttw 0.0375mg/24hr	2	
lyllana pttw 0.05mg/24hr	2	
lyllana pttw 0.075mg/24hr	2	
lyllana pttw 0.1mg/24hr	2	
microgestin 24 fe tabs 20mcg; 75mg; 1mg	2	
mili tabs 35mcg; 0.25mg	2	
mimvey tabs 1mg; 0.5mg	2	
mono-linyah tabs 35mcg; 0.25mg	2	
mononessa tabs 35mcg; 0.25mg	2	
norethindrone acetate/ethinyl estradiol/ferrous fumarate tabs 20mcg; 75mg; 1mg	2	
norethindrone acetate/ethinyl estradiol tabs 2.5mcg; 0.5mg	2	
norethindrone acetate/ethinyl estradiol tabs 5mcg; 1mg	2	
norgestimate/ethinyl estradiol tabs 35mcg; 0.25mg	2	
nymyo tabs 35mcg; 0.25mg	2	
PREMARIN CREA 0.625MG/GM	3	
PREMARIN INJ 25MG	4	
PREMPRO TABS 0.3MG; 1.5MG	4	
PREMPRO TABS 0.45MG; 1.5MG	4	
PREMPRO TABS 0.625MG; 2.5MG	4	
PREMPRO TABS 0.625MG; 5MG	4	
previfem tabs 35mcg; 0.25mg	2	
sprintec 28 tabs 35mcg; 0.25mg	2	
tarina 24 fe tabs 20mcg; 75mg; 1mg	2	
vylibra tabs 35mcg; 0.25mg	2	
xulane ptwk 35mcg/24hr; 150mcg/24hr	2	
YUVAFEM TABS 10MCG	3	
zafemy ptwk 35mcg/24hr; 150mcg/24hr	2	
Progestins		
camila tabs 0.35mg	2	
CRINONE GEL 4%	4	PA
CRINONE GEL 8%	4	PA
deblitane tabs 0.35mg	2	
DEPO-PROVERA INJ 400MG/ML	4	
DEPO-SUBQ PROVERA 104 INJ 104MG/0.65ML	3	
errin tabs 0.35mg	2	
heather tabs 0.35mg	2	
hydroxyprogesterone caproate inj 1.25gm/5ml	5	
incassia tabs 0.35mg	2	
jencycla tabs 0.35mg	2	

Drug Name	Drug Tier	Requirements/Limits
jolivette tabs 0.35mg	2	
lyleq tabs 0.35mg	2	
lyza tabs 0.35mg	2	
medroxyprogesterone acetate inj 150mg/ml	1	
medroxyprogesterone acetate inj 150mg/ml	1	
medroxyprogesterone acetate tabs 10mg	1	
medroxyprogesterone acetate tabs 2.5mg	1	
medroxyprogesterone acetate tabs 5mg	1	
megestrol acetate susp 40mg/ml	2	PA
megestrol acetate susp 625mg/5ml	2	PA
megestrol acetate tabs 20mg	2	PA
megestrol acetate tabs 40mg	2	PA
nora-be tabs 0.35mg	2	
norethindrone acetate tabs 5mg	1	
norethindrone tabs 0.35mg	2	
norlyda tabs 0.35mg	2	
norlyroc tabs 0.35mg	2	
progesterone caps 100mg	1	
progesterone caps 200mg	1	
progesterone inj 50mg/ml	1	
sharobel tabs 0.35mg	2	
tulana tabs 0.35mg	2	
Selective Estrogen Receptor Modifying Agents		
OSPHENA TABS 60MG	4	QL (30 EA per 30 days) PA
raloxifene hydrochloride tabs 60mg	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
ARMOUR THYROID TABS 120MG	4	
ARMOUR THYROID TABS 15MG	4	
ARMOUR THYROID TABS 180MG	4	
ARMOUR THYROID TABS 240MG	4	
ARMOUR THYROID TABS 300MG	4	
ARMOUR THYROID TABS 30MG	4	
ARMOUR THYROID TABS 60MG	4	
ARMOUR THYROID TABS 90MG	4	
euthyrox tabs 100mcg	1	
euthyrox tabs 112mcg	1	
euthyrox tabs 125mcg	1	
euthyrox tabs 137mcg	1	
euthyrox tabs 150mcg	1	
euthyrox tabs 175mcg	1	
euthyrox tabs 200mcg	1	
euthyrox tabs 25mcg	1	
euthyrox tabs 50mcg	1	
euthyrox tabs 75mcg	1	
euthyrox tabs 88mcg	1	
levo-t tabs 100mcg	1	
levo-t tabs 112mcg	1	
levo-t tabs 125mcg	1	

Drug Name	Drug Tier	Requirements/Limits
levo-t tabs 137mcg	1	
levo-t tabs 150mcg	1	
levo-t tabs 175mcg	1	
levo-t tabs 200mcg	1	
levo-t tabs 25mcg	1	
levo-t tabs 300mcg	1	
levo-t tabs 50mcg	1	
levo-t tabs 75mcg	1	
levo-t tabs 88mcg	1	
levothyroxine sodium caps 100mcg	4	
levothyroxine sodium caps 112mcg	4	
levothyroxine sodium caps 125mcg	4	
levothyroxine sodium caps 137mcg	4	
levothyroxine sodium caps 13mcg	4	
levothyroxine sodium caps 150mcg	4	
levothyroxine sodium caps 175mcg	4	
levothyroxine sodium caps 200mcg	4	
levothyroxine sodium caps 25mcg	4	
levothyroxine sodium caps 75mcg	4	
levothyroxine sodium caps 88mcg	4	
levothyroxine sodium inj 100mcg/5ml	5	
levothyroxine sodium inj 100mcg	5	
levothyroxine sodium inj 200mcg/5ml	5	
levothyroxine sodium inj 200mcg	5	
levothyroxine sodium inj 500mcg/5ml	5	
levothyroxine sodium inj 500mcg	5	
levothyroxine sodium tabs 100mcg	1	
levothyroxine sodium tabs 112mcg	1	
levothyroxine sodium tabs 125mcg	1	
levothyroxine sodium tabs 137mcg	1	
levothyroxine sodium tabs 150mcg	1	
levothyroxine sodium tabs 175mcg	1	
levothyroxine sodium tabs 200mcg	1	
levothyroxine sodium tabs 25mcg	1	
levothyroxine sodium tabs 300mcg	1	
levothyroxine sodium tabs 50mcg	1	
levothyroxine sodium tabs 75mcg	1	
levothyroxine sodium tabs 88mcg	1	
levothyroxine/liothyronine tabs 120mg	2	
levothyroxine/liothyronine tabs 15mg	2	
levothyroxine/liothyronine tabs 30mg	2	
levothyroxine/liothyronine tabs 60mg	2	
levothyroxine/liothyronine tabs 90mg	2	
levoxyl tabs 100mcg	2	
levoxyl tabs 112mcg	2	
levoxyl tabs 125mcg	2	
levoxyl tabs 137mcg	2	
levoxyl tabs 150mcg	2	
levoxyl tabs 175mcg	2	

Drug Name	Drug Tier	Requirements/Limits
levoxyl tabs 200mcg	2	
levoxyl tabs 25mcg	2	
levoxyl tabs 50mcg	2	
levoxyl tabs 75mcg	2	
levoxyl tabs 88mcg	2	
liothyronine sodium inj 10mcg/ml	2	
liothyronine sodium tabs 25mcg	2	
liothyronine sodium tabs 50mcg	2	
liothyronine sodium tabs 5mcg	2	
np thyroid 120 tabs 120mg	2	
np thyroid 15 tabs 15mg	2	
np thyroid 30 tabs 30mg	2	
np thyroid 60 tabs 60mg	2	
np thyroid 90 tabs 90mg	2	
SYNTHROID TABS 100MCG	3	
SYNTHROID TABS 112MCG	3	
SYNTHROID TABS 125MCG	3	
SYNTHROID TABS 137MCG	3	
SYNTHROID TABS 150MCG	3	
SYNTHROID TABS 175MCG	3	
SYNTHROID TABS 200MCG	3	
SYNTHROID TABS 25MCG	3	
SYNTHROID TABS 300MCG	3	
SYNTHROID TABS 50MCG	3	
SYNTHROID TABS 75MCG	3	
SYNTHROID TABS 88MCG	3	
THYROLAR-1/2 TABS 30MG	3	
THYROLAR-1/4 TABS 15MG	3	
THYROLAR-1 TABS 60MG	3	
THYROLAR-2 TABS 120MG	3	
THYROLAR-3 TABS 0; 180MG	3	
TIROSINT CAPS 100MCG	4	
TIROSINT CAPS 112MCG	4	
TIROSINT CAPS 125MCG	4	
TIROSINT CAPS 137MCG	4	
TIROSINT CAPS 13MCG	4	
TIROSINT CAPS 150MCG	4	
TIROSINT CAPS 175MCG	4	
TIROSINT CAPS 200MCG	4	
TIROSINT CAPS 25MCG	4	
TIROSINT CAPS 50MCG	4	
TIROSINT CAPS 75MCG	4	
TIROSINT CAPS 88MCG	4	
unithroid tabs 100mcg	2	
unithroid tabs 112mcg	2	
unithroid tabs 125mcg	2	
unithroid tabs 137mcg	2	
unithroid tabs 150mcg	2	
unithroid tabs 175mcg	2	

Drug Name	Drug Tier	Requirements/Limits
unithroid tabs 200mcg	2	
unithroid tabs 25mcg	2	
unithroid tabs 300mcg	2	
unithroid tabs 50mcg	2	
unithroid tabs 75mcg	2	
unithroid tabs 88mcg	2	
Hormonal Agents, Suppressant (Adrenal)		
Hormonal Agents, Suppressant (Adrenal)		
ISTURISA TABS 10MG	5	PA
ISTURISA TABS 1MG	5	PA
ISTURISA TABS 5MG	5	PA
LYSODREN TABS 500MG	5	
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
BYNFEZIA PEN INJ 2500MCG/ML	5	PA
cabergoline tabs 0.5mg	2	
ELIGARD INJ 22.5MG	4	PA
ELIGARD INJ 30MG	4	PA
ELIGARD INJ 45MG	4	PA
ELIGARD INJ 7.5MG	4	PA
FIRMAGON INJ 120MG/VIAL	5	
FIRMAGON INJ 80MG	4	
leuprolide acetate inj 1mg/0.2ml	5	PA
LUPRON DEPOT (1-MONTH) INJ 3.75MG	5	PA
LUPRON DEPOT (1-MONTH) INJ 7.5MG	5	PA
LUPRON DEPOT (3-MONTH) INJ 11.25MG	5	PA
LUPRON DEPOT (3-MONTH) INJ 22.5MG	5	PA
LUPRON DEPOT (4-MONTH) INJ 30MG	4	PA
LUPRON DEPOT (6-MONTH) INJ 45MG	5	PA
LUPRON DEPOT-PED (1-MONTH) INJ 11.25MG	5	PA
LUPRON DEPOT-PED (1-MONTH) INJ 15MG	5	PA
LUPRON DEPOT-PED (1-MONTH) INJ 7.5MG	5	PA
LUPRON DEPOT-PED (3-MONTH) INJ 11.25MG	5	PA
LUPRON DEPOT-PED (3-MONTH) INJ 30MG	5	PA
octreotide acetate inj 1000mcg/ml	5	PA
octreotide acetate inj 100mcg/ml	4	PA
octreotide acetate inj 200mcg/ml	4	PA
octreotide acetate inj 500mcg/ml	5	PA
octreotide acetate inj 50mcg/ml	4	PA
ORGOVYX TABS 120MG	5	PA
SANDOSTATIN LAR DEPOT INJ 10MG	5	PA
SANDOSTATIN LAR DEPOT INJ 20MG	5	PA
SANDOSTATIN LAR DEPOT INJ 30MG	5	PA
SIGNIFOR LAR INJ 10MG	5	PA
SIGNIFOR LAR INJ 20MG	5	PA
SIGNIFOR LAR INJ 30MG	5	PA
SIGNIFOR LAR INJ 40MG	5	PA
SIGNIFOR LAR INJ 60MG	5	PA
SIGNIFOR INJ 0.3MG/ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
SIGNIFOR INJ 0.6MG/ML	5	PA
SIGNIFOR INJ 0.9MG/ML	5	PA
SOMATULINE DEPOT INJ 120MG/0.5ML	5	PA
SOMATULINE DEPOT INJ 60MG/0.2ML	5	PA
SOMATULINE DEPOT INJ 90MG/0.3ML	5	PA
SOMAVERT INJ 10MG	5	PA
SOMAVERT INJ 15MG	5	PA
SOMAVERT INJ 20MG	5	PA
SOMAVERT INJ 25MG	5	PA
SOMAVERT INJ 30MG	5	PA
SYNAREL SOLN 2MG/ML	5	
TRELSTAR MIXJECT INJ 11.25MG	5	PA
TRELSTAR MIXJECT INJ 22.5MG	5	PA
TRELSTAR MIXJECT INJ 3.75MG	5	PA
ZOLADEX INJ 10.8MG	5	PA
ZOLADEX INJ 3.6MG	4	PA
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
methimazole tabs 10mg	1	
methimazole tabs 5mg	1	
propylthiouracil tabs 50mg	1	
Hormonal Agents, Suppressant (Thyroid)		
levothyroxine sodium caps 50mcg	4	
Immunological Agents		
Angioedema Agents		
BERINERT INJ 500UNIT	5	PA
CINRYZE INJ 500UNIT	5	PA
HAEGARDA INJ 2000UNIT	5	PA
HAEGARDA INJ 3000UNIT	5	PA
icatibant acetate inj 30mg/3ml	5	PA
RUCONEST INJ 2100UNIT	5	PA
sajazir inj 30mg/3ml	5	PA
Immunoglobulins		
ASCENIV INJ 5GM/50ML	5	B/D
ATGAM INJ 50MG/ML	5	
BIVIGAM INJ 10%	5	B/D
BIVIGAM INJ 5GM/50ML	5	B/D
CUVITRU INJ 10GM/50ML	5	PA
CUVITRU INJ 1GM/5ML	5	PA
CUVITRU INJ 2GM/10ML	5	PA
CUVITRU INJ 4GM/20ML	5	PA
CUVITRU INJ 8GM/40ML	5	PA
CYTOGAM INJ 50MG/ML	5	
FLEBOGAMMA DIF INJ 0.5GM/10ML	5	B/D
FLEBOGAMMA DIF INJ 10GM/100ML	5	B/D
FLEBOGAMMA DIF INJ 10GM/100ML	5	B/D
FLEBOGAMMA DIF INJ 10GM/200ML	5	B/D
FLEBOGAMMA DIF INJ 2.5GM/50ML	5	B/D
FLEBOGAMMA DIF INJ 20GM/200ML	5	B/D

Drug Name	Drug Tier	Requirements/Limits
FLEBOGAMMA DIF INJ 20GM/400ML	5	B/D
FLEBOGAMMA DIF INJ 5GM/100ML	5	B/D
FLEBOGAMMA DIF INJ 5GM/50ML	5	B/D
GAMASTAN INJ 0	4	
GAMASTAN INJ 0	4	
GAMASTAN INJ 0	4	
GAMMAGARD LIQUID INJ 10GM/100ML	5	B/D
GAMMAGARD LIQUID INJ 1GM/10ML	5	B/D
GAMMAGARD LIQUID INJ 2.5GM/25ML	5	B/D
GAMMAGARD LIQUID INJ 20GM/200ML	5	B/D
GAMMAGARD LIQUID INJ 30GM/300ML	5	B/D
GAMMAGARD LIQUID INJ 5GM/50ML	5	B/D
GAMMAGARD S/D IGA LESS THAN 1MCG/ML INJ 10GM	5	B/D
GAMMAGARD S/D IGA LESS THAN 1MCG/ML INJ 5GM	5	B/D
GAMMAKED INJ 10GM/100ML	5	B/D
GAMMAKED INJ 1GM/10ML	5	B/D
GAMMAKED INJ 20GM/200ML	5	B/D
GAMMAKED INJ 5GM/50ML	5	B/D
GAMMAPLEX INJ 10GM/100ML	5	B/D
GAMMAPLEX INJ 10GM/200ML	5	B/D
GAMMAPLEX INJ 20GM/200ML	5	B/D
GAMMAPLEX INJ 20GM/400ML	5	B/D
GAMMAPLEX INJ 5GM/100ML	5	B/D
GAMMAPLEX INJ 5GM/50ML	5	B/D
GAMUNEX-C INJ 10GM/100ML	5	B/D
GAMUNEX-C INJ 10GM/100ML	5	B/D
GAMUNEX-C INJ 1GM/10ML	5	B/D
GAMUNEX-C INJ 2.5GM/25ML	5	B/D
GAMUNEX-C INJ 20GM/200ML	5	B/D
GAMUNEX-C INJ 40GM/400ML	5	B/D
GAMUNEX-C INJ 5GM/50ML	5	B/D
HEPAGAM B INJ 0	5	B/D
HIZENTRA INJ 10GM/50ML	5	PA
HIZENTRA INJ 1GM/5ML	5	PA
HIZENTRA INJ 1GM/5ML	5	PA
HIZENTRA INJ 2GM/10ML	5	PA
HIZENTRA INJ 2GM/10ML	5	PA
HIZENTRA INJ 4GM/20ML	5	PA
HIZENTRA INJ 4GM/20ML	5	PA
HYPERHEP B INJ 110UNIT/0.5ML	5	B/D
HYPERHEP B INJ 220UNIT/ML	5	B/D
HYPERHEP B INJ 220UNIT/ML	5	B/D
HYPERHEP B INJ 220UNIT/ML	5	B/D
HYPERRAB S/D INJ 1500UNIT/10ML	3	B/D
HYPERRAB S/D INJ 300UNIT/2ML	3	B/D
HYPERRAB INJ 1500UNIT/5ML	3	B/D
HYPERRAB INJ 300UNIT/ML	3	B/D
HYPERRAB INJ 900UNIT/3ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
HYPERRHO S/D MINI-DOSE INJ 250UNIT	4	
HYPERRHO S/D INJ 1500UNIT	4	
HYQVIA INJ 10GM/100ML; 800UNIT/5ML	5	B/D
HYQVIA INJ 2.5GM/25ML; 200UNT/1.25ML	5	B/D
HYQVIA INJ 20GM/200ML; 1600UNIT/10ML	5	B/D
HYQVIA INJ 30GM/300ML; 2400UNIT/15ML	5	B/D
HYQVIA INJ 5GM/50ML; 400UNIT/2.5ML	5	B/D
IMOGAM RABIES-HT INJ 300UNIT/2ML	3	B/D
KEDRAB INJ 1500UNIT/10ML	3	B/D
KEDRAB INJ 300UNIT/2ML	3	B/D
MICRHOGAM ULTRA-FILTERED PLUS INJ 250UNIT	4	
NABI-HB INJ 312UNIT/ML	5	B/D
OCTAGAM INJ 10GM/100ML	5	B/D
OCTAGAM INJ 10GM/200ML	5	B/D
OCTAGAM INJ 1GM/20ML	5	B/D
OCTAGAM INJ 2.5GM/50ML	5	B/D
OCTAGAM INJ 20GM/200ML	5	B/D
OCTAGAM INJ 25GM/500ML	5	B/D
OCTAGAM INJ 2GM/20ML	5	B/D
OCTAGAM INJ 30GM/300ML	5	B/D
OCTAGAM INJ 5GM/100ML	5	B/D
OCTAGAM INJ 5GM/50ML	5	B/D
PANZYGA INJ 10GM/100ML	5	B/D
PANZYGA INJ 1GM/10ML	5	B/D
PANZYGA INJ 2.5GM/25ML	5	B/D
PANZYGA INJ 20GM/200ML	5	B/D
PANZYGA INJ 30GM/300ML	5	B/D
PANZYGA INJ 5GM/50ML	5	B/D
PRIVIGEN INJ 10GM/100ML	5	B/D
PRIVIGEN INJ 20GM/200ML	5	B/D
PRIVIGEN INJ 40GM/400ML	5	B/D
PRIVIGEN INJ 5GM/50ML	5	B/D
RHOGAM ULTRA-FILTERED PLUS INJ 1500UNIT	4	
RHOPHYLAC INJ 1500UNIT/2ML	4	
SYNAGIS INJ 100MG/ML	5	PA
SYNAGIS INJ 50MG/0.5ML	5	PA
THYMOGLOBULIN INJ 25MG	5	
WINRHO SDF INJ 15000UNIT/13ML	4	
WINRHO SDF INJ 1500UNIT/1.3ML	4	
WINRHO SDF INJ 2500UNIT/2.2ML	4	
WINRHO SDF INJ 5000UNIT/4.4ML	4	
XEMBIFY INJ 10GM/50ML	5	B/D
XEMBIFY INJ 1GM/5ML	5	B/D
XEMBIFY INJ 2GM/10ML	5	B/D
XEMBIFY INJ 4GM/20ML	5	B/D
Immunological Agents, Other		
ACTEMRA ACTPEN INJ 162MG/0.9ML	5	PA
ACTEMRA INJ 162MG/0.9ML	5	PA
ACTEMRA INJ 200MG/10ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
ACTEMRA INJ 400MG/20ML	5	PA
ACTEMRA INJ 80MG/4ML	5	PA
ACTIMMUNE INJ 2000000UNIT/0.5ML	5	
ARCALYST INJ 220MG	5	PA
BENLYSTA INJ 200MG/ML	5	
BENLYSTA INJ 200MG/ML	5	
COSENTYX INJ 75MG/0.5ML	5	PA
DUPIXENT INJ 200MG/1.14ML	5	QL (4.56 ML per 28 days) PA
DUPIXENT INJ 200MG/1.14ML	5	QL (4.56 ML per 28 days) PA
DUPIXENT INJ 300MG/2ML	5	QL (8 ML per 28 days) PA
DUPIXENT INJ 300MG/2ML	5	QL (8 ML per 28 days) PA
ILARIS INJ 150MG/ML	5	PA
leflunomide tabs 10mg	2	
leflunomide tabs 20mg	2	
LEMTRADA INJ 12MG/1.2ML	5	PA
OTEZLA TABS 30MG	5	PA
OTEZLA TBPK 0	5	PA
RIDAURA CAPS 3MG	5	
RINVOQ TB24 15MG	5	PA
SIMULECT INJ 10MG	5	
SIMULECT INJ 20MG	5	
SKYRIZI PEN INJ 150MG/ML	5	PA
SKYRIZI INJ 150MG/ML	5	PA
SOLIRIS INJ 300MG/30ML	5	PA
STELARA INJ 45MG/0.5ML	5	PA
STELARA INJ 45MG/0.5ML	5	PA
STELARA INJ 90MG/ML	5	PA
SYLVANT INJ 100MG	5	PA
SYLVANT INJ 400MG	5	PA
TALTZ INJ 80MG/ML	5	PA
TALTZ INJ 80MG/ML	5	PA
ULTOMIRIS INJ 1100MG/11ML	5	PA
ULTOMIRIS INJ 300MG/30ML	5	PA
ULTOMIRIS INJ 300MG/3ML	5	PA
XELJANZ XR TB24 11MG	5	PA
XELJANZ XR TB24 22MG	5	PA
XELJANZ SOLN 1MG/ML	5	PA
XELJANZ TABS 10MG	5	PA
XELJANZ TABS 5MG	5	PA
Immunostimulants		
PEGASYS PROCLICK INJ 180MCG/0.5ML	5	
PEGASYS INJ 180MCG/0.5ML	5	
PEGASYS INJ 180MCG/ML	5	
PEGINTRON INJ 50MCG/0.5ML	5	
REBETOL SOLN 40MG/ML	5	
ribasphere caps 200mg	2	
ribavirin tabs 200mg	2	
Immunosuppressants		
ASTAGRAF XL CP24 0.5MG	4	B/D

Drug Name	Drug Tier	Requirements/Limits
ASTAGRAF XL CP24 1MG	4	B/D
ASTAGRAF XL CP24 5MG	5	B/D
AVSOLA INJ 100MG	5	PA
AZASAN TABS 100MG	3	B/D
AZASAN TABS 75MG	3	B/D
azathioprine inj 100mg	4	B/D
azathioprine tabs 50mg	1	B/D
BENLYSTA INJ 120MG	5	
BENLYSTA INJ 400MG	5	
CIMZIA STARTER KIT INJ 200MG/ML	5	PA
CIMZIA INJ 200MG/ML	5	PA
CIMZIA INJ 200MG	5	PA
cyclosporine modified caps 100mg	2	B/D
cyclosporine modified caps 25mg	2	B/D
cyclosporine modified caps 50mg	2	B/D
cyclosporine modified soln 100mg/ml	2	B/D
cyclosporine caps 100mg	2	B/D
cyclosporine caps 25mg	2	B/D
cyclosporine inj 50mg/ml	2	
ENBREL MINI INJ 50MG/ML	5	PA
ENBREL SURECLICK INJ 50MG/ML	5	PA
ENBREL INJ 25MG/0.5ML	5	PA
ENBREL INJ 25MG/0.5ML	5	PA
ENBREL INJ 25MG	5	PA
ENBREL INJ 50MG/ML	5	PA
everolimus tabs 0.25mg	5	B/D
everolimus tabs 0.5mg	5	B/D
everolimus tabs 0.75mg	5	B/D
gengraf caps 100mg	2	B/D
gengraf caps 25mg	2	B/D
gengraf soln 100mg/ml	2	B/D
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJ 0	5	PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJ 40MG/0.8ML	5	PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJ 80MG/0.8ML	5	PA
HUMIRA PEN-CD/UC/HS STARTER INJ 40MG/0.8ML	5	PA
HUMIRA PEN-CD/UC/HS STARTER INJ 80MG/0.8ML	5	PA
HUMIRA PEN-PEDIATRIC UC STARTER PACK INJ 80MG/0.8ML	5	PA
HUMIRA PEN-PS/UV STARTER INJ 0	5	PA
HUMIRA PEN-PS/UV STARTER INJ 40MG/0.8ML	5	PA
HUMIRA PEN INJ 40MG/0.4ML	5	PA
HUMIRA PEN INJ 40MG/0.8ML	5	PA
HUMIRA PEN INJ 80MG/0.8ML	5	PA
HUMIRA INJ 10MG/0.1ML	5	PA
HUMIRA INJ 10MG/0.2ML	5	PA
HUMIRA INJ 20MG/0.2ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
HUMIRA INJ 20MG/0.4ML	5	PA
HUMIRA INJ 40MG/0.4ML	5	PA
HUMIRA INJ 40MG/0.8ML	5	PA
INFLECTRA INJ 100MG	5	PA
KINERET INJ 100MG/0.67ML	5	PA
LUPKYNIS CAPS 7.9MG	5	QL (180 EA per 30 days) PA
methotrexate sodium inj 1gm/40ml	1	
methotrexate sodium inj 1gm	1	
methotrexate sodium inj 250mg/10ml	1	
methotrexate sodium inj 250mg/10ml	1	
methotrexate sodium inj 50mg/2ml	1	
methotrexate inj 50mg/2ml	1	
methotrexate tabs 2.5mg	1	
mycophenolate mofetil caps 250mg	2	B/D
MYCOPHENOLATE MOFETIL INJ 500MG	3	B/D
mycophenolate mofetil susr 200mg/ml	2	B/D
mycophenolate mofetil tabs 500mg	2	B/D
mycophenolic acid dr tbec 180mg	2	B/D
mycophenolic acid dr tbec 360mg	2	B/D
NULOJIX INJ 250MG	5	
ORENCIA CLICKJECT INJ 125MG/ML	5	PA
ORENCIA INJ 125MG/ML	5	PA
ORENCIA INJ 250MG	5	PA
ORENCIA INJ 50MG/0.4ML	5	PA
ORENCIA INJ 87.5MG/0.7ML	5	PA
PROGRAF PACK 0.2MG	4	B/D
PROGRAF PACK 1MG	5	B/D
REMICADE INJ 100MG	5	PA
RENFLEXIS INJ 100MG	5	PA
sirolimus soln 1mg/ml	5	B/D
sirolimus tabs 0.5mg	2	B/D
sirolimus tabs 1mg	2	B/D
sirolimus tabs 2mg	2	B/D
tacrolimus caps 0.5mg	2	B/D
tacrolimus caps 1mg	2	B/D
tacrolimus caps 5mg	2	B/D
XATMEP SOLN 2.5MG/ML	4	
ZORTRESS TABS 0.25MG	5	B/D
ZORTRESS TABS 0.5MG	5	B/D
ZORTRESS TABS 0.75MG	5	B/D
ZORTRESS TABS 1MG	5	B/D
Vaccines		
ACTHIB INJ 0	4	
ADACEL INJ 2LF/0.5ML; 15.5MCG/0.5ML; 5LF/0.5ML	3	
ADACEL INJ 2LF/0.5ML; 15.5MCG/0.5ML; 5LF/0.5ML	3	
BCG VACCINE INJ 0	4	
BEXSERO INJ 0	4	
BOOSTRIX INJ 2.5LF/0.5ML; 18.5MCG/0.5ML; 5LF/0.5ML	3	

Drug Name	Drug Tier	Requirements/Limits
BOOSTRIX INJ 2.5LF/0.5ML; 18.5MCG/0.5ML; 5LF/0.5ML	3	
DAPTACEL INJ 15LF/0.5ML; 23MCG/0.5ML; 5LF/0.5ML	3	
DIPHTHERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC INJ 25LFU/0.5ML; 5LFU/0.5ML	4	
ENGERIX-B INJ 10MCG/0.5ML	4	B/D
ENGERIX-B INJ 20MCG/ML	4	B/D
GARDASIL 9 INJ 0	4	
GARDASIL 9 INJ 0	4	
HAVRIX INJ 1440ELU/ML	4	
HAVRIX INJ 720ELU/0.5ML	4	
HIBERIX INJ 10MCG	4	
IMOVAX RABIES (H.D.C.V.) INJ 2.5UNIT/ML	4	B/D
INFANRIX INJ 25LFU/0.5ML; 58MCG/0.5ML; 10LFU/0.5ML	3	
IPOL INACTIVATED IPV INJ 0	4	
IXIARO INJ 0	4	
KINRIX INJ 25LFU/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	4	
M-M-R II INJ 0; 0; 0	4	
MENACTRA INJ 0	4	
MENQUADFI INJ 0	4	
MENVEO INJ 0	4	
PEDIARIX INJ 25LFU/0.5ML; 10MCG/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	4	
PEDVAX HIB INJ 7.5MCG/0.5ML	4	
PENTACEL INJ 15LFU/0.5ML; 0; 48MCG/0.5ML; 0; 5LFU/0.5ML	4	
PROQUAD INJ 0; 0; 0; 0	4	
QUADRACEL INJ 15LFU/0.5ML; 48MCG/0.5ML; 0; 5LFU/0.5ML	4	
RABAVERT INJ 0	4	B/D
RECOMBIVAX HB INJ 10MCG/ML	4	B/D
RECOMBIVAX HB INJ 10MCG/ML	4	B/D
RECOMBIVAX HB INJ 40MCG/ML	4	B/D
RECOMBIVAX HB INJ 5MCG/0.5ML	4	B/D
ROTARIX SUSR 0	4	
ROTATEQ SOLN 0	4	
SHINGRIX INJ 50MCG/0.5ML	3	
STAMARIL INJ 0	4	
TDVAX INJ 2LF/0.5ML; 2LF/0.5ML	3	
TENIVAC INJ 2LFU; 5LFU	3	
TRUMENBA INJ 0	4	
TWINRIX INJ 720ELU/ML; 20MCG/ML	4	
TYPHIM VI INJ 25MCG/0.5ML	4	
TYPHIM VI INJ 25MCG/0.5ML	4	
VAQTA INJ 25UNIT/0.5ML	4	
VAQTA INJ 25UNIT/0.5ML	4	
VAQTA INJ 50UNIT/ML	4	

Drug Name	Drug Tier	Requirements/Limits
VAQTA INJ 50UNIT/ML	4	
VARIVAX INJ 1350PFU/0.5ML	4	
VARIZIG INJ 125UNIT/1.2ML	5	
VAXELIS INJ 0; 0; 0; 0; 0; 0	4	
VAXELIS INJ 0; 0; 0; 0; 0; 0	4	
YF-VAX INJ 0	4	
ZOSTAVAX INJ 19400UNT/0.65ML	4	
Inflammatory Bowel Disease Agents		
Aminosalicylates		
balsalazide disodium caps 750mg	2	
DIPENTUM CAPS 250MG	5	
mesalamine dr cpdr 400mg	4	
mesalamine dr tbec 1.2gm	2	
mesalamine dr tbec 800mg	2	
mesalamine er cp24 0.375gm	2	
mesalamine enem 4gm	4	
mesalamine kit 4gm	4	
sulfasalazine tabs 500mg	1	
sulfasalazine tbec 500mg	1	
Glucocorticoids		
budesonide er tb24 9mg	5	
budesonide cpep 3mg	4	
colocort enem 100mg/60ml	1	
hydrocortisone enem 100mg/60ml	1	
ORTIKOS CP24 6MG	5	
ORTIKOS CP24 9MG	5	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
alendronate sodium soln 70mg/75ml	1	
alendronate sodium tabs 10mg	1	
alendronate sodium tabs 35mg	1	
alendronate sodium tabs 40mg	1	
alendronate sodium tabs 5mg	1	
alendronate sodium tabs 70mg	1	
calcitonin salmon inj 200unit/ml	5	
calcitonin salmon soln 200unit/act	2	
calcitonin-salmon soln 200unit/act	2	
calcitriol caps 0.25mcg	1	
calcitriol caps 0.5mcg	1	
calcitriol inj 1mcg/ml	1	
calcitriol soln 1mcg/ml	1	
cinacalcet hydrochloride tabs 30mg	4	
cinacalcet hydrochloride tabs 60mg	5	
cinacalcet hydrochloride tabs 90mg	5	
doxercalciferol caps 0.5mcg	2	PA
doxercalciferol caps 1mcg	4	PA
doxercalciferol caps 2.5mcg	4	PA
doxercalciferol inj 4mcg/2ml	2	PA
FORTEO INJ 620MCG/2.48ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
HECTOROL INJ 2MCG/ML	4	PA
ibandronate sodium tabs 150mg	2	
MIACALCIN INJ 200UNIT/ML	5	
NATPARA INJ 100MCG	5	PA
NATPARA INJ 25MCG	5	PA
NATPARA INJ 50MCG	5	PA
NATPARA INJ 75MCG	5	PA
pamidronate disodium inj 30mg/10ml	1	
pamidronate disodium inj 6mg/ml	1	
pamidronate disodium inj 90mg/10ml	1	
PARICALCITOL CAPS 1MCG	3	
PARICALCITOL CAPS 2MCG	3	
PARICALCITOL CAPS 4MCG	3	
paricalcitol inj 2mcg/ml	4	
paricalcitol inj 5mcg/ml	4	
PROLIA INJ 60MG/ML	4	
risedronate sodium dr tbec 35mg	2	
risedronate sodium tabs 150mg	2	
risedronate sodium tabs 30mg	2	
risedronate sodium tabs 35mg	2	
risedronate sodium tabs 35mg	2	
risedronate sodium tabs 35mg	2	
risedronate sodium tabs 5mg	2	
TERIPARATIDE INJ 620MCG/2.48ML	5	PA
XGEVA INJ 120MG/1.7ML	5	PA
zoledronic acid inj 4mg/100ml	4	
zoledronic acid inj 4mg/5ml	4	
zoledronic acid inj 5mg/100ml	4	
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
acetylcysteine inj 200mg/ml	2	
ALCOHOL PREP PADS PADS 70%	3	
AMINOSYN II INJ 107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 405MG/100ML; 750MG/100ML	3	B/D
AMINOSYN II INJ 61.1MEQ/L; 844MG/100ML; 865MG/100ML; 595MG/100ML; 627MG/100ML; 425MG/100ML; 255MG/100ML; 561MG/100ML; 850MG/100ML; 893MG/100ML; 146MG/100ML; 253MG/100ML; 614MG/100ML; 450MG/100ML; 33.3MEQ/L; 340MG/100ML; 170MG/100ML; 230MG/100ML; 425MG/100ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
AMINOSYN II INJ 71.8MEQ/L; 993MG/100ML; 1018MG/100ML; 700MG/100ML; 738MG/100ML; 500MG/100ML; 300MG/100ML; 660MG/100ML; 1000MG/100ML; 1050MG/100ML; 172MG/100ML; 298MG/100ML; 722MG/100ML; 530MG/100ML; 38MEQ/L; 400MG/100ML; 200MG/100ML; 270MG/100ML; 500MG/100ML	3	B/D
AMINOSYN-HBC INJ 7.1MEQ/100ML; 660MG/100ML; 507MG/100ML; 660MG/100ML; 154MG/100ML; 789MG/100ML; 1576MG/100ML; 265MG/100ML; 206MG/100ML; 1.12GM/100ML; 228MG/100ML; 448MG/100ML; 221MG/100ML; 272MG/100ML; 88MG/100ML; 33MG/100ML; 789MG/100ML	3	B/D
AMINOSYN-PF 7% INJ 32.5MEQ/L; 490MG/100ML; 861MG/100ML; 370MG/100ML; 576MG/100ML; 270MG/100ML; 220MG/100ML; 534MG/100ML; 831MG/100ML; 475MG/100ML; 125MG/100ML; 10.69GM/L; 300MG/100ML; 570MG/100ML; 70GM/L; 347MG/100ML; 50MG/100ML; 360MG/100ML; 125MG/100ML; 44MG/100ML; 452MG/100ML	3	B/D
AMINOSYN-PF INJ 46MEQ/L; 698MG/100ML; 1227MG/100ML; 527MG/100ML; 820MG/100ML; 385MG/100ML; 312MG/100ML; 760MG/100ML; 1200MG/100ML; 677MG/100ML; 180MG/100ML; 427MG/100ML; 812MG/100ML; 495MG/100ML; 3.4MEQ/L; 70MG/100ML; 512MG/100ML; 180MG/100ML; 44MG/100ML; 673MG/100ML	3	B/D
AMINOSYN-RF INJ 113MEQ/L; 600MG/100ML; 429MG/100ML; 462MG/100ML; 726MG/100ML; 535MG/100ML; 726MG/100ML; 726MG/100ML; 330MG/100ML; 165MG/100ML; 528MG/100ML	3	B/D
AMINOSYN INJ 90MEQ/L; 1100MG/100ML; 850MG/100ML; 35MEQ/L; 1100MG/100ML; 260MG/100ML; 620MG/100ML; 810MG/100ML; 624MG/100ML; 340MG/100ML; 380MG/100ML; 750MG/100ML; 370MG/100ML; 460MG/100ML; 150MG/100ML; 44MG/100ML; 680MG/100ML	3	B/D
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16" MISC	3	
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2" MISC	3	
BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM MISC	3	
BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM MISC	3	
BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM MISC	3	

Drug Name	Drug Tier	Requirements/Limits
CLINISOL SF 15% INJ 151MEQ/L; 2170MG/100ML; 1470MG/100ML; 434MG/100ML; 749MG/100ML; 1040MG/100ML; 894MG/100ML; 749MG/100ML; 1040MG/100ML; 1180MG/100ML; 749MG/100ML; 1040MG/100ML; 894MG/100ML; 592MG/100ML; 749MG/100ML; 250MG/100ML; 39MG/100ML; 960MG/100ML	3	B/D
CLINOLIPID INJ 1.2GM/100ML; 2.25GM/100ML; 16GM/100ML; 4GM/100ML	3	B/D
COSELA INJ 300MG	5	PA
CURITY ALL PURPOSE SPONGES 2"X2" PADS	3	
CURITY GAUZE PADS 2"X2" PADS	3	
deferoxamine mesylate inj 2gm	2	PA
deferoxamine mesylate inj 500mg	2	PA
DROPLET PEN NEEDLES 29GX10MM MISC	3	
EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16" MISC	3	
EASY COMFORT INSULIN SYRINGES/0.5ML/32GX5/16" MISC	3	
ELLA TABS 30MG	3	
EQL INSULIN SYRINGE/0.3ML/31G X 5/16" MISC	3	
fomepizole inj 1gm/ml	5	
FREAMINE HBC 6.9% INJ 57MEQ/L; 40MG/100ML; 58MG/100ML; 3MEQ/L; 20MG/100ML; 330MG/100ML; 160MG/100ML; 760MG/100ML; 1370MG/100ML; 410MG/100ML; 250MG/100ML; 320MG/100ML; 630MG/100ML; 330MG/100ML; 10MEQ/L; 200MG/100ML; 90MG/100ML; 80MG/100ML	3	B/D
FREAMINE III INJ 89MEQ/L; 710MG/100ML; 950MG/100ML; 3MEQ/L; 24MG/100ML; 1400MG/100ML; 280MG/100ML; 690MG/100ML; 910MG/100ML; 730MG/100ML; 530MG/100ML; 560MG/100ML; 10MMOLE/L; 120MG/100ML; 1120MG/100ML; 590MG/100ML; 10MEQ/L; 400MG/100ML; 150MG/100ML; 660MG/100ML	3	B/D
GLOBAL ALCOHOL PREP EASE PADS PADS 70%	3	
GRASTEK SUBL 2800BAU	4	
HEPATAMINE INJ 62MEQ/L; 770MG/100ML; 600MG/100ML; 3MEQ/L; 20MG/100ML; 900MG/100ML; 240MG/100ML; 900MG/100ML; 1100MG/100ML; 610MG/100ML; 100MG/100ML; 100MG/100ML; 115MG/100ML; 800MG/100ML; 500MG/100ML; 450MG/100ML; 66MG/100ML; 840MG/100ML	3	B/D
INTRALIPID INJ 20GM/100ML	3	B/D
INTRALIPID INJ 30GM/100ML	3	B/D
KALBITOR INJ 10MG/ML	5	PA
KEVEYIS TABS 50MG	5	PA
LACTATED RINGERS IRRIGATION SOLN 3MEQ/L; 109MEQ/L; 28MEQ/L; 4MEQ/L; 130MEQ/L	3	

Drug Name	Drug Tier	Requirements/Limits
levocarnitine soln 1gm/10ml	1	
levocarnitine tabs 330mg	1	
methergine tabs 0.2mg	2	
methylergonovine maleate inj 0.2mg/ml	1	
methylergonovine maleate tabs 0.2mg	2	
MYALEPT INJ 11.3MG	5	PA
NEPHRAMINE INJ 44MEQ/L; 20MG/100ML; 250MG/100ML; 560MG/100ML; 880MG/100ML; 640MG/100ML; 880MG/100ML; 880MG/100ML; 6MEQ/L; 400MG/100ML; 200MG/100ML; 640MG/100ML	3	B/D
NUTRILIPID INJ 20GM/100ML	3	B/D
ORALAIR ADULT SAMPLE KIT SUBL 0; 0; 0; 0; 0	4	
ORALAIR ADULT STARTER PACK SUBL 0; 0; 0; 0; 0	4	
ORALAIR CHILDREN/ADOLESCENTS STARTER PACK SUBL 0; 0; 0; 0; 0	4	
ORALAIR SUBL 0; 0; 0; 0; 0	4	
ORLADEYO CAPS 110MG	5	PA
ORLADEYO CAPS 150MG	5	PA
PLENAMINE INJ 147.4MEQ/L; 2.17GM/100ML; 1.47GM/100ML; 434MG/100ML; 749MG/100ML; 1.04GM/100ML; 894MG/100ML; 749MG/100ML; 1.04GM/100ML; 1.18GM/100ML; 749MG/100ML; 1.04GM/100ML; 894MG/100ML; 592MG/100ML; 749MG/100ML; 250MG/100ML; 39MG/100ML; 960MG/100ML	3	B/D
PREMASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
PREMASOL INJ 56MEQ/L; 320MG/100ML; 730MG/100ML; 190MG/100ML; 3MEQ/L; 20MG/100ML; 300MG/100ML; 220MG/100ML; 290MG/100ML; 490MG/100ML; 840MG/100ML; 490MG/100ML; 200MG/100ML; 290MG/100ML; 410MG/100ML; 230MG/100ML; 5MEQ/L; 15MG/100ML; 250MG/100ML; 120MG/100ML; 140MG/100ML; 470MG/100ML	3	B/D
PROSOL INJ 140MEQ/100ML; 2.76GM/100ML; 1.96GM/100ML; 600MG/100ML; 1.02GM/100ML; 2.06GM/100ML; 1.18GM/100ML; 1.08GM/100ML; 1.08GM/100ML; 1.35GM/100ML; 760MG/100ML; 1GM/100ML; 1.34GM/100ML; 1.02GM/100ML; 980MG/100ML; 320MG/100ML; 50MG/100ML; 1.44GM/100ML	3	B/D
PROTOPAM CHLORIDE INJ 1GM	4	
RAGWITEK SUBL 12AMB A 1-U	4	
ringers irrigation soln 4.5meq/l; 156meq/l; 4meq/l; 147meq/l	1	
sodium chloride 0.9% soln 0.9%	2	

Drug Name	Drug Tier	Requirements/Limits
sodium phenylacetate/sodium benzoate inj 10%; 10%	5	
sterile water for irrigation soln 0	1	
sterile water for irrigation soln 0	1	
sterile water for irrigation soln 0	1	
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" MISC	3	
SYNTHAMIN 17 INJ 82MMOL/L; 2.07GM/100ML; 1.15GM/100ML; 40MMOL/L; 1.03GM/100ML; 480MG/100ML; 600MG/100ML; 730MG/100ML; 580MG/100ML; 400MG/100ML; 560MG/100ML; 680MG/100ML; 500MG/100ML; 420MG/100ML; 180MG/100ML; 40MG/100ML; 580MG/100ML	3	B/D
tis-u-sol soln 4.5meq/l; 156meq/l; 4meq/l; 147meq/l	1	
TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2" MISC	3	
TRAVASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 500MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
TROPHAMINE INJ 97MEQ/L; 0.54GM/100ML; 1.2GM/100ML; 0.32GM/100ML; 0; 0; 0.5GM/100ML; 0.36GM/100ML; 0.48GM/100ML; 0.82GM/100ML; 1.4GM/100ML; 1.2GM/100ML; 0.34GM/100ML; 0.48GM/100ML; 0.68GM/100ML; 0.38GM/100ML; 5MEQ/L; 0.025GM/100ML; 0.42GM/100ML; 0.2GM/100ML; 0.24GM/100ML; 0.78GM/100ML	3	B/D
VISTOGARD PACK 10GM	5	
Ophthalmic Agents		
Ophthalmic Agents, Other		
ak-poly-bac oint 500unit/gm; 10000unit/gm	2	
atropine sulfate soln 1%	1	
bacitracin/polymyxin b oint 500unit/gm; 10000unit/gm	2	
cyclopentolate hcl soln 1%	1	
cyclopentolate hcl soln 2%	1	
cyclopentolate hydrochloride soln 1%	1	
CYSTADROPS SOLN 0.37%	5	QL (20 ML per 28 days) PA
CYSTARAN SOLN 0.44%	5	QL (60 ML per 28 days) PA
dorzolamide hcl/timolol maleate soln 22.3mg/ml; 6.8mg/ml	1	
dorzolamide hydrochloride/timolol maleate pf soln 2%; 0.5%	1	
neo-polycin oint 400unit/gm; 3.5mg/gm; 10000unit/gm	2	
neomycin/bacitracin/polymyxin oint 400unit/gm; 5mg/gm; 10000unit/gm	2	
neomycin/polymyxin/bacitracin oint 400unit/gm; 3.5mg/gm; 10000unit/gm	2	
neomycin/polymyxin/gramicidin soln 0.025mg/ml; 1.75mg/ml; 10000unit/ml	1	
polycin oint 500unit/gm; 10000unit/gm	2	

Drug Name	Drug Tier	Requirements/Limits
polymyxin b sulfate/trimethoprim sulfate soln 10000unit/ml; 0.1%	1	
proparacaine hcl soln 0.5%	1	
RESTASIS MULTIDOSE EMUL 0.05%	4	
RESTASIS EMUL 0.05%	4	
RHOPRESSA SOLN 0.02%	4	
SIMBRINZA SUSP 0.2%; 1%	3	
trimethoprim sulfate/polymyxin b sulfate soln 10000unit/ml; 0.1%	1	
XIIDRA SOLN 5%	3	
Ophthalmic Anti-allergy Agents		
ALOCRIL SOLN 2%	4	
azelastine hcl soln 0.05%	2	
cromolyn sodium soln 4%	1	
epinastine hcl soln 0.05%	2	
olopatadine hcl soln 0.1%	2	
olopatadine hydrochloride soln 0.2%	2	
PAZEO SOLN 0.7%	4	
phenylephrine hcl soln 10%	1	
Ophthalmic Anti-inflammatories		
bromfenac soln 0.09%	2	
BROMSITE SOLN 0.075%	4	
dexamethasone sodium phosphate soln 0.1%	1	
diclofenac sodium soln 0.1%	2	
fluorometholone susp 0.1%	2	
flurbiprofen sodium soln 0.03%	1	
ILEVRO SUSP 0.3%	4	
ketorolac tromethamine soln 0.4%	1	
ketorolac tromethamine soln 0.5%	1	
loteprednol etabonate susp 0.5%	2	
neo-polycin hc oint 400unit/gm; 1%; 3.5mg/gm; 10000unit/gm	2	
neomycin/polymyxin/bacitracin/hydrocortisone oint 400unit/gm; 1%; 0.5%; 10000unit/gm	2	
neomycin/polymyxin/dexamethasone oint 0.1%; 3.5mg/gm; 10000unit/gm	1	
neomycin/polymyxin/dexamethasone susp 0.1%; 3.5mg/ml; 10000unit/ml	1	
neomycin/polymyxin/hydrocortisone susp 1%; 3.5mg/ml; 10000unit/ml	2	
prednisolone acetate susp 1%	1	
prednisolone sodium phosphate soln 1%	1	
sulfacetamide sodium/prednisolone sodium phosphate soln 0.23%; 10%	1	
tobramycin/dexamethasone susp 0.1%; 0.3%	2	
Ophthalmic Beta-Adrenergic Blocking Agents		
betaxolol hcl soln 0.5%	1	
carteolol hcl soln 1%	1	
levobunolol hcl soln 0.5%	1	
timolol maleate ophthalmic gel forming solg 0.25%	2	

Drug Name	Drug Tier	Requirements/Limits
timolol maleate ophthalmic gel forming solg 0.5%	2	
timolol maleate soln 0.25%	1	
timolol maleate soln 0.5%	1	
timolol maleate soln 0.5%	2	Once Daily
Ophthalmic Intraocular Pressure Lowering Agents, Other		
acetazolamide er cp12 500mg	2	
acetazolamide tabs 125mg	2	
acetazolamide tabs 250mg	2	
apraclonidine soln 0.5%	1	
AZOPT SUSP 1%	4	
brimonidine tartrate soln 0.15%	2	
brimonidine tartrate soln 0.2%	2	
brinzolamide susp 1%	2	
dorzolamide hcl soln 2%	1	
methazolamide tabs 25mg	2	
methazolamide tabs 50mg	2	
PHOSPHOLINE IODIDE SOLR 0.125%	4	
pilocarpine hcl soln 1%	2	
pilocarpine hcl soln 2%	2	
pilocarpine hcl soln 4%	2	
Ophthalmic Prostaglandin and Prostamide Analogs		
COMBIGAN SOLN 0.2%; 0.5%	3	
latanoprost soln 0.005%	1	
travoprost soln 0.004%	2	
XELPROS EMUL 0.005%	4	
ZIOPTAN SOLN 0.015MG/ML	4	
Otic Agents		
Otic Agents		
acetic acid soln 2%	2	
ciprofloxacin/dexamethasone susp 0.3%; 0.1%	2	
flac oil 0.01%	2	
fluocinolone acetonide ear drops oil 0.01%	2	
fluocinolone acetonide oil 0.01%	2	
hydrocortisone/acetic acid soln 2%; 1%	2	
neomycin/polymyxin/hc soln 1%; 3.5mg/ml; 10000unit/ml	2	
neomycin/polymyxin/hydrocortisone soln 1%; 3.5mg/ml; 10000unit/ml	2	
neomycin/polymyxin/hydrocortisone susp 1%; 3.5mg/ml; 10000unit/ml	1	
Respiratory Tract/Pulmonary Agents		
Anti-inflammatories, Inhaled Corticosteroids		
ASMANEX HFA AERO 100MCG/ACT	3	
ASMANEX HFA AERO 200MCG/ACT	3	
ASMANEX HFA AERO 50MCG/ACT	3	
ASMANEX TWISTHALER 120 METERED DOSES AEPB 220MCG/INH	3	
ASMANEX TWISTHALER 14 METERED DOSES AEPB 220MCG/INH	3	

Drug Name	Drug Tier	Requirements/Limits
ASMANEX TWISTHALER 30 METERED DOSES AEPB 110MCG/INH	3	
ASMANEX TWISTHALER 30 METERED DOSES AEPB 220MCG/INH	3	
ASMANEX TWISTHALER 60 METERED DOSES AEPB 220MCG/INH	3	
ASMANEX TWISTHALER 7 METERED DOSES AEPB 110MCG/INH	3	
budesonide susp 0.25mg/2ml	2	B/D
budesonide susp 0.5mg/2ml	2	B/D
budesonide susp 1mg/2ml	2	B/D
flunisolide soln 0.025%	1	
fluticasone propionate/salmeterol aepb 232mcg/act; 14mcg/act	2	
fluticasone propionate susp 50mcg/act	2	
PULMICORT FLEXHALER AEPB 180MCG/ACT	3	
PULMICORT FLEXHALER AEPB 90MCG/ACT	3	
QVAR REDIHALER AERB 40MCG/ACT	3	
QVAR REDIHALER AERB 80MCG/ACT	3	
Antihistamines		
azelastine hcl soln 0.15%	2	
azelastine hydrochloride soln 0.1%	2	
cetirizine hydrochloride soln 1mg/ml	2	
cyproheptadine hcl syrp 2mg/5ml	2	
cyproheptadine hydrochloride tabs 4mg	2	
desloratadine tabs 5mg	2	
di-phen elix 12.5mg/5ml	2	PA
diphen elix 12.5mg/5ml	2	PA
diphenhydramine hcl elix 12.5mg/5ml	2	PA
diphenhydramine hcl inj 50mg/ml	2	
diphenhydramine hydrochloride inj 50mg/ml	2	
hydroxyzine hcl tabs 50mg	4	PA
hydroxyzine hydrochloride tabs 10mg	4	PA
hydroxyzine hydrochloride tabs 25mg	4	PA
hydroxyzine pamoate caps 100mg	4	PA
hydroxyzine pamoate caps 25mg	4	PA
hydroxyzine pamoate caps 50mg	4	PA
levocetirizine dihydrochloride tabs 5mg	2	
Antileukotrienes		
montelukast sodium chew 4mg	1	
montelukast sodium chew 5mg	1	
montelukast sodium pack 4mg	1	
montelukast sodium tabs 10mg	1	
zafirlukast tabs 10mg	2	
zafirlukast tabs 20mg	2	
Bronchodilators, Anticholinergic		
ATROVENT HFA AERS 17MCG/ACT	3	
COMBIVENT RESPIMAT AERS 100MCG/ACT; 20MCG/ACT	3	

Drug Name	Drug Tier	Requirements/Limits
ipratropium bromide/albuterol sulfate soln 2.5mg/3ml; 0.5mg/3ml	1	B/D
ipratropium bromide soln 0.02%	1	B/D
ipratropium bromide soln 0.03%	1	
ipratropium bromide soln 0.06%	1	
LONHALA MAGNAIR REFILL KIT SOLN 25MCG/ML	4	
LONHALA MAGNAIR STARTER KIT SOLN 25MCG/ML	4	
SEEBRI NEOHALER CAPS 15.6MCG	4	
SPIRIVA HANDIHALER CAPS 18MCG	3	
SPIRIVA RESPIMAT AERS 1.25MCG/ACT	3	
SPIRIVA RESPIMAT AERS 2.5MCG/ACT	3	
TUDORZA PRESSAIR AEPB 400MCG/ACT	3	
TUDORZA PRESSAIR AEPB 400MCG/ACT	3	
Bronchodilators, Sympathomimetic		
albuterol sulfate er tb12 4mg	2	
albuterol sulfate er tb12 8mg	2	
albuterol sulfate hfa aers 108mcg/act	2	
albuterol sulfate hfa aers 108mcg/act	2	
albuterol sulfate nebu 0.083%	2	B/D
albuterol sulfate nebu 0.63mg/3ml	2	B/D
albuterol sulfate nebu 1.25mg/3ml	2	B/D
albuterol sulfate nebu 2.5mg/0.5ml	2	B/D
albuterol sulfate syrp 2mg/5ml	1	
albuterol sulfate tabs 2mg	2	
albuterol sulfate tabs 4mg	2	
ARCAPTA NEOHALER CAPS 75MCG	4	
arformoterol tartrate nebu 15mcg/2ml	4	B/D
BEVESPI AEROSPHERE AERO 4.8MCG/ACT; 9MCG/ACT	4	
BROVANA NEBU 15MCG/2ML	4	B/D
epinephrine inj 0.15mg/0.15ml	2	
epinephrine inj 0.15mg/0.3ml	2	
epinephrine inj 0.3mg/0.3ml	2	
epinephrine inj 0.3mg/0.3ml	2	
isoproterenol hydrochloride inj 0.2mg/ml	2	
ISUPREL INJ 0.2MG/ML	3	
levalbuterol hcl nebu 0.31mg/3ml	4	B/D
levalbuterol hcl nebu 0.63mg/3ml	4	B/D
levalbuterol hcl nebu 1.25mg/3ml	4	B/D
levalbuterol tartrate hfa aero 45mcg/act	2	
metaproterenol sulfate syrp 10mg/5ml	1	
PROAIR DIGIHALER AEPB 108MCG/ACT	3	
proair hfa aers 108mcg/act	2	
PROAIR RESPICLICK AEPB 108MCG/ACT	3	
SEREVENT DISKUS AEPB 50MCG/DOSE	3	
STRIVERDI RESPIMAT AERS 2.5MCG/ACT	3	
terbutaline sulfate inj 1mg/ml	5	
terbutaline sulfate tabs 2.5mg	1	
terbutaline sulfate tabs 5mg	1	

Drug Name	Drug Tier	Requirements/Limits
UTIBRON NEOHALER CAPS 15.6MCG; 27.5MCG	4	
ventolin hfa aers 108mcg/act	2	
Cystic Fibrosis Agents		
CAYSTON SOLR 75MG	5	PA
KALYDECO PACK 25MG	5	PA
KALYDECO PACK 50MG	5	PA
KALYDECO PACK 75MG	5	PA
KALYDECO TABS 150MG	5	PA
KITABIS PAK NEBU 300MG/5ML	5	PA
ORKAMBI PACK 125MG; 100MG	5	PA
ORKAMBI PACK 188MG; 150MG	5	PA
ORKAMBI TABS 125MG; 100MG	5	PA
ORKAMBI TABS 125MG; 200MG	5	PA
PULMOZYME SOLN 2.5MG/2.5ML	5	PA
SYMDEKO TBPK 150MG; 100MG	5	PA
SYMDEKO TBPK 75MG; 50MG	5	PA
TOBI PODHALER CAPS 28MG	5	PA
tobramycin nebu 300mg/5ml	5	PA
TRIKAFTA TBPK 100MG; 0; 50MG	5	PA
TRIKAFTA TBPK 50MG; 0; 25MG	5	PA
Mast Cell Stabilizers		
cromolyn sodium nebu 20mg/2ml	1	B/D
Phosphodiesterase Inhibitors, Airways Disease		
aminophylline inj 25mg/ml	1	
DALIRESP TABS 250MCG	4	ST
DALIRESP TABS 500MCG	4	ST
elixophyllin elix 80mg/15ml	1	
THEO-24 CP24 100MG	3	
THEO-24 CP24 200MG	3	
THEO-24 CP24 300MG	3	
THEO-24 CP24 400MG	3	
theophylline er tb12 300mg	1	
theophylline er tb12 450mg	1	
theophylline er tb24 400mg	1	
theophylline er tb24 600mg	1	
theophylline/d5w inj 5%; 0.8mg/ml	1	
theophylline soln 80mg/15ml	1	
Pulmonary Antihypertensives		
ADEMPAS TABS 0.5MG	5	PA
ADEMPAS TABS 1.5MG	5	PA
ADEMPAS TABS 1MG	5	PA
ADEMPAS TABS 2.5MG	5	PA
ADEMPAS TABS 2MG	5	PA
alyq tabs 20mg	5	PA
ambrisentan tabs 10mg	5	PA
ambrisentan tabs 5mg	5	PA
epoprostenol sodium inj 0.5mg	5	PA
epoprostenol sodium inj 1.5mg	5	PA
OPSUMIT TABS 10MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
ORENITRAM TBCR 0.125MG	3	PA
ORENITRAM TBCR 0.25MG	5	PA
ORENITRAM TBCR 1MG	5	PA
ORENITRAM TBCR 2.5MG	5	PA
ORENITRAM TBCR 5MG	5	PA
REMODULIN INJ 100MG/20ML	5	PA
REMODULIN INJ 200MG/20ML	5	PA
REMODULIN INJ 20MG/20ML	5	PA
REMODULIN INJ 50MG/20ML	5	PA
sildenafil citrate susr 10mg/ml	5	PA
SILDENAFIL CITRATE TABS 20MG	3	PA
sildenafil inj 10mg/12.5ml	5	PA
tadalafil tabs 20mg	5	PA
treprostinil inj 100mg/20ml	5	PA
treprostinil inj 200mg/20ml	5	PA
treprostinil inj 20mg/20ml	5	PA
treprostinil inj 50mg/20ml	5	PA
TYVASO REFILL SOLN 0.6MG/ML	5	PA
TYVASO STARTER SOLN 0.6MG/ML	5	PA
TYVASO SOLN 0.6MG/ML	5	PA
UPTRAVI INJ 1800MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TABS 1000MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TABS 1200MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TABS 1400MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TABS 1600MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TABS 200MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TABS 400MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TABS 600MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TABS 800MCG	5	QL (60 EA per 30 days) PA
UPTRAVI TBPK 0	5	QL (400 EA per 365 days) PA
VENTAVIS SOLN 10MCG/ML	5	PA
VENTAVIS SOLN 20MCG/ML	5	PA
Pulmonary Fibrosis Agents		
ESBRIET CAPS 267MG	5	PA
ESBRIET TABS 267MG	5	PA
ESBRIET TABS 801MG	5	PA
OFEV CAPS 100MG	5	QL (60 EA per 30 days) PA
OFEV CAPS 150MG	5	QL (60 EA per 30 days) PA
Respiratory Tract Agents, Other		
acetylcysteine soln 10%	2	B/D
acetylcysteine soln 20%	2	B/D
ANORO ELLIPTA AEPB 62.5MCG/INH; 25MCG/INH	3	
ARALAST NP INJ 1000MG	5	PA
ARALAST NP INJ 500MG	5	PA
DULERA AERO 5MCG/ACT; 100MCG/ACT	3	
DULERA AERO 5MCG/ACT; 200MCG/ACT	3	
DULERA AERO 5MCG/ACT; 50MCG/ACT	3	
fluticasone propionate/salmeterol diskus aepb 100mcg/dose; 50mcg/dose	2	

Drug Name	Drug Tier	Requirements/Limits
fluticasone propionate/salmeterol diskus aepb 250mcg/dose; 50mcg/dose	2	
fluticasone propionate/salmeterol diskus aepb 500mcg/dose; 50mcg/dose	2	
fluticasone propionate/salmeterol aepb 113mcg/act; 14mcg/act	2	
fluticasone propionate/salmeterol aepb 55mcg/act; 14mcg/act	2	
GLASSIA INJ 1000MG/50ML	5	PA
NUCALA INJ 100MG/ML	5	PA
NUCALA INJ 100MG/ML	5	PA
NUCALA INJ 100MG	5	PA
PROLASTIN-C INJ 1000MG/20ML	5	PA
PROLASTIN-C INJ 1000MG	5	PA
ribavirin solr 6gm	5	PA
STIOLTO RESPIMAT AERS 2.5MCG/ACT; 2.5MCG/ACT	3	
SYMBICORT AERO 160MCG/ACT; 4.5MCG/ACT	3	
SYMBICORT AERO 80MCG/ACT; 4.5MCG/ACT	3	
TRELEGY ELLIPTA AEPB 100MCG/INH; 62.5MCG/INH; 25MCG/INH	3	
TRELEGY ELLIPTA AEPB 200MCG/INH; 62.5MCG/INH; 25MCG/INH	3	
wixela inhub aepb 100mcg/dose; 50mcg/dose	2	
wixela inhub aepb 250mcg/dose; 50mcg/dose	2	
wixela inhub aepb 500mcg/dose; 50mcg/dose	2	
XOLAIR INJ 150MG/ML	5	PA
XOLAIR INJ 150MG	5	PA
XOLAIR INJ 75MG/0.5ML	5	PA
ZEMAIRA INJ 1000MG	5	PA
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
cyclobenzaprine hydrochloride tabs 10mg	2	PA
cyclobenzaprine hydrochloride tabs 5mg	2	PA
cyclobenzaprine hydrochloride tabs 7.5mg	2	PA
methocarbamol tabs 500mg	2	
methocarbamol tabs 750mg	2	
Sleep Disorder Agents		
Sleep Promoting Agents		
BELSOMRA TABS 10MG	3	
BELSOMRA TABS 15MG	3	
BELSOMRA TABS 20MG	3	
BELSOMRA TABS 5MG	3	
DAYVIGO TABS 10MG	3	
DAYVIGO TABS 5MG	3	
doxepin hydrochloride tabs 3mg	2	
doxepin hydrochloride tabs 6mg	2	
flurazepam hcl caps 15mg	2	QL (30 EA per 30 days)
flurazepam hcl caps 30mg	2	QL (30 EA per 30 days)
HETLIOZ LQ SUSP 4MG/ML	5	PA
HETLIOZ CAPS 20MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
NEMBUTAL SODIUM INJ 50MG/ML	4	
pentobarbital sodium inj 50mg/ml	4	
ramelteon tabs 8mg	4	QL (30 EA per 30 days)
zolpidem tartrate tabs 10mg	2	
zolpidem tartrate tabs 5mg	2	
Wakefulness Promoting Agents		
armodafinil tabs 150mg	2	PA
armodafinil tabs 200mg	2	PA
armodafinil tabs 250mg	2	PA
armodafinil tabs 50mg	2	PA
MODAFINIL TABS 100MG	3	PA
MODAFINIL TABS 200MG	3	PA
SUNOSI TABS 150MG	4	QL (30 EA per 30 days) PA
SUNOSI TABS 75MG	4	QL (30 EA per 30 days) PA
XYREM SOLN 500MG/ML	5	PA

Index

Drug Name	Page #
abacavir	50
abacavir sulfate	50
abacavir sulfate/lamivudine	50
abacavir sulfate/lamivudine/zidovudine	50
ABELCET	26
ABILIFY MAINTENA	44
ABILIFY MYCITE	44
ABILIFY MYCITE MAINTENANCE KIT	44
ABILIFY MYCITE STARTER KIT	44
abiraterone acetate	30
ABRAXANE	32
acamprosate calcium dr	6
acarbose	54
accutane	77
acebutolol hcl	65
acebutolol hydrochloride	65
acetaminophen/caffeine/dihydrocodeine	4
acetaminophen/caffeine/dihydrocodeine bitartrate	4
acetaminophen/codeine	4
acetaminophen/codeine phosphate	4
acetazolamide	115
acetazolamide er	115
acetazolamide sodium	69
acetic acid	115
acetic acid 0.25%	91
acetylcysteine	109
acetylcysteine	119
acitretin	77
ACTEMRA	103
ACTEMRA ACTPEN	103
ACTHIB	106
ACTIMMUNE	104
acyclovir	52
acyclovir sodium	52
ADACEL	106
adapalene	77
adapalene pump	77
ADCETRIS	39
adefovir dipivoxil	48
ADEMPAS	118
adriamycin	32
adrucil	31
AEMCOLO	8
AFINITOR	36
AFINITOR DISPERZ	36
AIMOVIG	27
AJOVY	27
ak-poly-bac	113
ala-cort	91
albendazole	41
albuterol sulfate	117
albuterol sulfate er	117
albuterol sulfate hfa	117
alclometasone dipropionate	91
ALCOHOL PREP PADS	109
ALDURAZYME	88
ALECENSA	36
alendronate sodium	108
alfuzosin hcl er	90
ALIMTA	31
ALINIA	41
ALIQOPA	36
aliskiren	69
allopurinol	27
ALOCRIL	114
ALOGLIPTIN	54
ALOGLIPTIN/METFORMIN HCL	54
ALOGLIPTIN/PIOGLITAZONE	54
alosetron hydrochloride	86
alprazolam	52
alprazolam er	52
alprazolam odt	52
alprazolam xr	52
ALUNBRIG	36
alyq	118
amabelz	95
amantadine hcl	51
AMBISOME	26
ambrisentan	118
amcinonide	91
amikacin sulfate	7
amiloride hcl	70
amiloride/hydrochlorothiazide	70
aminocaproic acid	60
aminophylline	118
AMINOSYN	79
AMINOSYN	110
AMINOSYN II	109
AMINOSYN-HBC	110
AMINOSYN-PF	110
AMINOSYN-PF 7%	110
AMINOSYN-RF	110
amiodarone hcl	63
amiodarone hydrochloride	63
AMITIZA	86

Drug Name	Page #
amitriptyline hcl	23
amitriptyline hydrochloride	23
amlodipine besylate	67
amlodipine besylate/benazepril hcl	69
amlodipine besylate/benazepril hydrochloride	69
amlodipine besylate/valsartan	69
ammonium lactate	78
amnesteem	78
amoxapine	24
amoxicillin	12
amoxicillin/clavulanate potassium	11
amoxicillin/clavulanate potassium er	11
amphetamine/dextroamphetamine	73
amphotericin b	26
ampicillin	12
ampicillin sodium	12
ampicillin-sulbactam	12
ANADROL-50	94
anagrelide hydrochloride	59
anastrozole	35
ANORO ELLIPTA	119
APLENZIN	21
APOKYN	41
apraclonidine	115
aprepitant	25
APTIOM	16
APTIVUS	51
ARALAST NP	119
ARANESP ALBUMIN FREE	59
ARCALYST	104
ARCAPTA NEOHALER	117
arformoterol tartrate	117
aripiprazole	44
aripiprazole odt	44
ARISTADA	44
ARISTADA INITIO	44
armodafinil	121
ARMOUR THYROID	97
ARRANON	31
ARSENIC TRIOXIDE	32
ARZERRA	39
ASCENIV	101
ascomp/codeine	4
ASENAPINE MALEATE SL	45
ASMANEX HFA	115
ASMANEX TWISTHALER 120 METERED DOSES	115
ASMANEX TWISTHALER 14 METERED DOSES	115
ASMANEX TWISTHALER 30 METERED DOSES	116
ASMANEX TWISTHALER 60 METERED DOSES	116
ASMANEX TWISTHALER 7 METERED DOSES	116
aspirin/dipyridamole	61
ASTAGRAF XL	104
atazanavir	51
atazanavir sulfate	51
atenolol	65
atenolol/chlorthalidone	65
ATGAM	101
atomoxetine	74
atomoxetine hydrochloride	74
atorvastatin calcium	71
atovaquone	41
atovaquone/proguanil hcl	41
ATRIPLA	49
atropine sulfate	69
atropine sulfate	113
ATROVENT HFA	116
AUBAGIO	76
augmented betamethasone dipropionate	91
aurovela 24 fe	95
AVANDIA	54
AVASTIN	39
AVC	15
avita	78
AVONEX	76
AVONEX PEN	76
AVSOLA	105
AVYCAZ	10
AYVAKIT	36
azacitidine	32
AZASAN	105
azathioprine	105
azelaic acid	78
azelastine hcl	114
azelastine hcl	116
azelastine hydrochloride	116
AZELEX	78
azithromycin	13
AZOPT	115
aztreonam	13
baciim	8
bacitracin	8
bacitracin/polymyxin b	113
baclofen	47
BACTROBAN NASAL	8

Drug Name	Page #
BAFIERTAM	76
balsalazide disodium	108
BALVERSA	36
BANZEL	19
BARACLUDE	48
BAVENCIO	39
BAXDELA	14
BCG VACCINE	106
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	110
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16"	110
BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM	110
BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM	110
BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM	110
BELBUCA	2
BELEODAQ	32
BELSOMRA	120
benazepril hcl	62
benazepril hcl/hydrochlorothiazide	62
benazepril hydrochloride	62
benazepril hydrochloride/hydrochlorothiazide	62
BENDEKA	29
BENLYSTA	104
BENLYSTA	105
benztropine mesylate	41
BERINERT	101
BESPONSA	39
betamethasone dipropionate	91
betamethasone sodium phosphate/betamethasone acetate	91
betamethasone valerate	91
BETASERON	76
betaxolol hcl	65
betaxolol hcl	114
bethanechol chloride	91
BEVESPI AEROSPHERE	117
BEVYXXA	57
bexarotene	40
BEXSERO	106
bicalutamide	30
BICILLIN C-R	12
BICILLIN L-A	12
BICNU	29
BIDIL	72
BIKTARVY	49
bisoprolol fumarate	65
bisoprolol fumarate/hydrochlorothiazide	65
BIVIGAM	101
bleomycin sulfate	32
BLINCYTO	39
blisovi 24 fe	95
BOOSTRIX	106
BORTEZOMIB	32
BOSULIF	36
BOTOX	47
BRAFTOVI	32
BRILINTA	61
brimonidine tartrate	115
brinzolamide	115
BRIVIACT	16
bromfenac	114
bromocriptine mesylate	41
BROMSITE	114
BROVANA	117
BRUKINSA	36
budesonide	108
budesonide	116
budesonide er	108
bumetanide	70
buprenorphine	2
buprenorphine buccal	2
buprenorphine hcl	7
buprenorphine hcl/naloxone hcl	7
buprenorphine hydrochloride/naloxone hydrochloride	7
bupropion hcl	21
bupropion hydrochloride	21
bupropion hydrochloride er (sr)	7
bupropion hydrochloride er (sr)	21
bupropion hydrochloride er (xl)	21
buspirone hcl	52
buspirone hydrochloride	52
busulfan	29
BUSULFEX	29
butalbital/acetaminophen/caffeine	75
butalbital/acetaminophen/caffeine/codeine	4
butalbital/aspirin/caffeine	75
butalbital/aspirin/caffeine/codeine	4
butorphanol tartrate	4
BUTRANS	2
BYDUREON	54
BYDUREON BCISE	54
BYDUREON PEN	54
BYNFEZIA PEN	100
BYSTOLIC	65

Drug Name	Page #
CABENUVA	49
cabergoline	100
CABLIVI	61
CABOMETYX	36
caffeine citrate	75
calcipotriene	79
calcitonin salmon	108
calcitonin-salmon	108
calcitriol	79
calcitriol	108
calcium acetate	85
CALQUENCE	36
camila	96
candesartan cilexetil	61
candesartan cilexetil/hydrochlorothiazide	61
CAPASTAT SULFATE	28
CAPLYTA	45
CAPRELSA	36
captopril	62
captopril/hydrochlorothiazide	62
CARBAGLU	79
carbamazepine	20
carbamazepine er	19
carbidopa	42
carbidopa/levodopa	42
carbidopa/levodopa er	42
carbidopa/levodopa odt	42
carbidopa/levodopa/entacapone	42
carboplatin	29
CARDENE IV	67
carmustine	29
carteolol hcl	114
cartia xt	67
carvedilol	65
carvedilol phosphate	65
caspofungin acetate	26
CAYSTON	118
cefaclor	10
cefaclor er	10
cefadroxil	10
cefazolin sodium	10
cefazolin sodium/dextrose	10
cefdinir	10
CEFEPIME	10
CEFEPIME HYDROCHLORIDE	10
CEFEPIME/DEXTROSE	10
cefixime	10
cefotaxime sodium	10
cefotetan	10
cefotetan/dextrose	10
cefoxitin sodium	10
cefpodoxime proxetil	10
cefprozil	11
ceftazidime	11
ceftazidime/dextrose	11
ceftriaxone in iso-osmotic dextrose	11
ceftriaxone sodium	11
ceftriaxone/dextrose	11
cefuroxime axetil	11
cefuroxime sodium	11
celecoxib	1
CELONTIN	18
cephalexin	11
CERDELGA	88
CEREZYME	88
CESAMET	25
cetirizine hydrochloride	116
cevimeline hydrochloride	77
CHANTIX	7
CHANTIX CONTINUING MONTH PAK	7
CHANTIX STARTING MONTH PAK	7
CHEMET	84
CHENODAL	87
chloramphenicol sodium succinate	8
chlordiazepoxide hcl	53
chlordiazepoxide hydrochloride	53
chlordiazepoxide/amitriptyline	24
chlorhexidine gluconate	77
chloroquine phosphate	41
chlorothiazide	71
chlorothiazide sodium	71
chlorpromazine hcl	43
chlorpromazine hydrochloride	43
chlorthalidone	71
CHOLBAM	87
cholestyramine	72
cholestyramine light	72
chorionic gonadotropin	94
ciclodan	26
ciclopirox	26
ciclopirox nail lacquer	26
ciclopirox olamine	26
cidofovir	48
cilostazol	61
CIMDUO	50
cimetidine	88
cimetidine hcl	87
cimetidine hydrochloride	87
CIMZIA	105
CIMZIA STARTER KIT	105

Drug Name	Page #
cinacalcet hydrochloride	108
CINRYZE	101
CINVANTI	25
ciprofloxacin	14
ciprofloxacin hcl	14
ciprofloxacin hydrochloride	14
ciprofloxacin i.v.-in d5w	14
ciprofloxacin/dexamethasone	115
cisplatin	29
citalopram hydrobromide	22
cladribine	31
claravis	78
clarithromycin	13
clarithromycin er	13
CLEOCIN	8
clindacin etz pledgets	8
clindacin-p	8
clindamycin hcl	8
clindamycin hydrochloride	8
clindamycin palmitate hcl	8
clindamycin phosphate	8
clindamycin phosphate/dextrose	8
CLINIMIX 4.25%/DEXTROSE 10%	79
CLINIMIX 4.25%/DEXTROSE 5%	80
CLINIMIX 5%/DEXTROSE 15%	80
CLINIMIX 5%/DEXTROSE 20%	80
CLINIMIX 6/5	80
CLINIMIX 8/10	80
CLINIMIX 8/14	80
CLINIMIX E 2.75%/DEXTROSE 5%	80
CLINIMIX E 4.25%/DEXTROSE 10%	81
CLINIMIX E 4.25%/DEXTROSE 5%	81
CLINIMIX E 5%/DEXTROSE 15%	81
CLINIMIX E 5%/DEXTROSE 20%	81
CLINIMIX E 8/10	81
CLINIMIX E 8/14	81
CLINISOL SF 15%	111
CLINOLIPID	111
clobazam	18
clobetasol propionate	91
clobetasol propionate emollient	91
clofarabine	31
clomipramine hcl	24
clonazepam	18
clonazepam odt	18
clonidine hcl	61
clonidine hydrochloride	61
clonidine hydrochloride	74
clonidine hydrochloride er	74
clopidogrel	61
clorazepate dipotassium	53
clotrimazole	26
clotrimazole/betamethasone dipropionate	26
clovique	84
clozapine	47
clozapine odt	47
COARTEM	41
codeine sulfate	4
colchicine	27
colesevelam hydrochloride	72
colestipol hcl	72
colistimethate sodium	8
colocort	108
COMBIGAN	115
COMBIVENT RESPIMAT	116
COMETRIQ	37
COMPLERA	49
compro	24
constulose	86
COPIKTRA	32
CORDRAN	91
CORLANOR	69
CORTIFOAM	91
cortisone acetate	91
COSELA	111
COSENTYX	104
COTELLIC	32
COUMADIN	58
CREON	89
CRESEMBA	26
CRINONE	96
CRIXIVAN	51
cromolyn sodium	87
cromolyn sodium	114
cromolyn sodium	118
crotan	79
CRYSVITA	81
CURITY ALL PURPOSE SPONGES 2"X2"	111
CURITY GAUZE PADS 2"X2"	111
CUVITRU	101
CUVPOSA	86
cyclobenzaprine hydrochloride	120
cyclopentolate hcl	113
cyclopentolate hydrochloride	113
CYCLOPHOSPHAMIDE	29
cycloserine	28
CYCLOSET	54
cyclosporine	105
cyclosporine modified	105

Drug Name	Page #
cyproheptadine hcl	116
cyproheptadine hydrochloride	116
CYRAMZA	39
CYSTADANE	89
CYSTADROPS	113
CYSTAGON	89
CYSTARAN	113
cytarabine	31
cytarabine aqueous	31
CYTOGAM	101
dacarbazine	29
dactinomycin	32
dalfampridine er	76
DALIRESP	118
DALVANCE	8
danazol	94
dantrolene sodium	47
DANYELZA	39
dapsone	28
DAPTACEL	107
daptomycin	8
DARAPRIM	41
DARIFENACIN HYDROBROMIDE ER	90
DARZALEX	39
DARZALEX FASPRO	39
daunorubicin hydrochloride	32
DAURISMO	32
DAYVIGO	120
deblitane	96
decitabine	32
deferasirox	84
deferiprone	84
deferoxamine mesylate	111
DELSTRIGO	49
demeclocycline hcl	15
demeclocycline hydrochloride	15
DEMSER	69
DEPO-ESTRADIOL	95
DEPO-PROVERA	96
DEPO-SUBQ PROVERA 104	96
DESCOVY	50
desipramine hcl	24
desloratadine	116
desmopressin acetate	94
desonide	91
desoximetasone	78
desvenlafaxine er	22
dexamethasone	92
DEXAMETHASONE INTENSOL	91
dexamethasone sodium phosphate	91
dexamethasone sodium phosphate	114
dexmethylphenidate hcl	75
dexmethylphenidate hcl er	74
dexmethylphenidate hydrochloride	75
dexrazoxane	32
DEXTROAMPHETAMINE SULFATE	74
dextroamphetamine sulfate er	74
dextrose	82
dextrose 10%/nacl 0.45%	82
dextrose 5% /electrolyte #48 viaflex	82
dextrose 10%	82
dextrose 10%/nacl 0.2%	82
dextrose 2.5%/nacl 0.45%	82
dextrose 20%	82
dextrose 25%	82
dextrose 40%	82
dextrose 5%	82
dextrose 5%/lactated ringers	82
dextrose 5%/nacl 0.2%	82
dextrose 5%/nacl 0.225%	82
dextrose 5%/nacl 0.3%	82
dextrose 5%/nacl 0.33%	82
dextrose 5%/nacl 0.45%	82
dextrose 5%/nacl 0.9%	82
dextrose 50%	82
dextrose/sodium chloride	82
DIACOMIT	18
diastat acudial	18
diastat pediatric	18
diazepam	53
diazepam rectal gel	18
diazoxide	56
diclofenac potassium	1
diclofenac sodium	1
diclofenac sodium	114
diclofenac sodium dr	1
diclofenac sodium er	1
diclofenac sodium/misoprostol	1
dicloxacillin sodium	12
dicyclomine hcl	86
dicyclomine hydrochloride	86
didanosine	50
DIFICID	14
diflunisal	1
digitek	64
digitek	69
digox	64
digox	69
DIGOXIN	69
dihydroergotamine mesylate	27

Drug Name	Page #
DILANTIN	20
DILANTIN INFATABS	20
DILANTIN-125	20
diltiazem hcl	67
diltiazem hcl cd	67
diltiazem hcl er	67
diltiazem hydrochloride	68
diltiazem hydrochloride er	68
dilt-xr	67
dimenhydrinate	24
dimethyl fumarate	76
dimethyl fumarate starterpack	76
DIPENTUM	108
diphen	116
di-phen	116
diphenhydramine hcl	116
diphenhydramine hydrochloride	116
diphenoxylate hydrochloride/atropine sulfate	87
diphenoxylate/atropine	87
DIPHTHERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC	107
disulfiram	6
DIURIL	71
divalproex sodium	19
divalproex sodium dr	18
divalproex sodium er	19
dobutamine hcl	69
dobutamine hcl/d5w	69
dobutamine hydrochloride/dextrose 5%	69
dobutamine/dextrose 5%	69
docetaxel	32
dofetilide	64
donepezil hcl	20
donepezil hydrochloride	20
donepezil hydrochloride odt	20
dopamine hydrochloride	69
dopamine hydrochloride/dextrose	69
dopamine/d5w	69
DOPTELET	60
dorzolamide hcl	115
dorzolamide hcl/timolol maleate	113
dorzolamide hydrochloride/timolol maleate pf	113
dotti	95
DOVATO	49
doxazosin	90
doxazosin mesylate	90
doxepin hcl	24
doxepin hydrochloride	24

Drug Name	Page #
DOXEPIN HYDROCHLORIDE	79
doxepin hydrochloride	120
doxercalciferol	108
doxorubicin hcl	33
doxorubicin hydrochloride	33
doxorubicin hydrochloride liposomal	33
doxy 100	15
doxycycline	15
doxycycline hyclate	15
doxycycline hyclate dr	15
doxycycline monohydrate	15
DRIZALMA SPRINKLE	22
dronabinol	25
droperidol	25
DROPLET PEN NEEDLES 29GX10MM	111
DROXIA	31
droxidopa	61
DULERA	119
duloxetine hcl	22
duloxetine hydrochloride	22
DUPIXENT	104
duramorph	4
dutasteride	90
DYSPORT	47
e.e.s. 400	14
EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16"	111
EASY COMFORT INSULIN SYRINGES/0.5ML/32GX5/16"	111
ec-naproxen	1
econazole nitrate	26
EDURANT	49
efavirenz	49
efavirenz/emtricitabine/tenofovir disoproxil fumarate	49
efavirenz/lamivudine/tenofovir disoproxil fumarate	49
ELAPRASE	89
ELELYSO	89
ELEPSIA XR	16
ELIGARD	100
ELIQUIS	58
ELIQUIS STARTER PACK	58
ELITEK	40
elixophyllin	118
ELLA	111
ELMIRON	91
ELZONRIS	33
EMCYT	31
EMEND	25

Drug Name	Page #
EMGALITY	27
EMPLICITI	39
EMSAM	22
emtricitabine	50
emtricitabine/tenofovir disoproxil	50
emtricitabine/tenofovir disoproxil fumarate	50
EMTRIVA	50
enalapril maleate	62
enalapril maleate/hydrochlorothiazide	62
enalaprilat	63
ENBREL	105
ENBREL MINI	105
ENBREL SURECLICK	105
endocet	4
ENGERIX-B	107
ENHERTU	39
enoxaparin sodium	58
entacapone	41
entecavir	48
ENTRESTO	69
enulose	86
EPANED	63
EPCLUSA	48
EPIDIOLEX	16
epinastine hcl	114
epinephrine	117
epirubicin hcl	33
epitol	20
EPIVIR HBV	48
eplerenone	70
EPOGEN	60
epoprostenol sodium	118
eprosartan mesylate	61
EQL INSULIN SYRINGE/0.3ML/31G X 5/16"	111
EQUETRO	54
ERAXIS	26
ERBITUX	39
ERGOMAR	27
ERGOTAMINE TARTRATE/CAFFEINE	27
ERIVEDGE	37
ERLEADA	30
erlotinib hydrochloride	37
errin	96
ertapenem	13
ertapenem sodium	13
ERWINASE	33
ERWINAZE	33
ery	14
ERYTHROCIN LACTOBIONATE	14
erythrocin stearate	14
erythromycin	14
erythromycin base	14
erythromycin dr	14
erythromycin ethylsuccinate	14
ESBRIET	119
escitalopram oxalate	22
esmolol hcl	65
esmolol hydrochloride/sodium chloride	65
esomeprazole magnesium	88
estarylla	95
estazolam	53
estradiol	95
estradiol valerate	95
estradiol/norethindrone acetate	95
ESTRING	95
ethacrynate sodium	70
ethacrynic acid	70
ethambutol hydrochloride	28
ethosuximide	18
etodolac	1
etodolac er	1
ETOPOPHOS	36
etoposide	36
etravirine	49
euthyrox	97
everolimus	37
everolimus	105
EVOMELA	29
EVOTAZ	51
exemestane	35
EXKIVITY	37
EXONDYS 51	89
EXSERVAN	76
EXTAVIA	76
ezetimibe	72
FABRAZYME	89
famciclovir	52
famotidine	88
famotidine premixed	88
FANAPT	45
FANAPT TITRATION PACK	45
FARYDAK	33
FASLODEX	31
febuxostat	27
felbamate	16
felodipine er	67
FEMRING	95
femynor	95
fenofibrate	71

Drug Name	Page #
fenofibrate micronized	71
fenofibric acid	71
fenofibric acid dr	71
fenoprofen calcium	1
fentanyl	2
fentanyl citrate oral transmucosal	4
FERRIPROX	84
FERRIPROX TWICE-A-DAY	84
FETROJA	11
FETZIMA	22
FETZIMA TITRATION PACK	22
FINACEA	78
finasteride	90
FINTEPLA	16
FIRMAGON	100
flac	115
flavoxate hcl	90
FLEBOGAMMA DIF	101
flecainide acetate	64
floxuridine	31
fluconazole	26
fluconazole in dextrose	26
fluconazole in nacl	26
fluconazole in sodium chloride	26
flucytosine	26
fludarabine phosphate	33
fludrocortisone acetate	92
flunisolide	116
fluocinolone acetonide	92
fluocinolone acetonide	115
fluocinolone acetonide body	92
fluocinolone acetonide ear drops	115
fluocinolone acetonide scalp	92
fluocinonide	79
fluorometholone	114
FLUOROPLEX	31
FLUOROURACIL	31
fluoxetine dr	22
fluoxetine hcl	22
fluoxetine hydrochloride	22
fluphenazine decanoate	43
fluphenazine hcl	43
fluphenazine hydrochloride	43
flurandrenolide	92
flurazepam hcl	120
flurbiprofen	1
flurbiprofen sodium	114
flutamide	30
fluticasone propionate	92
fluticasone propionate	116
fluticasone propionate/salmeterol	116
fluticasone propionate/salmeterol	120
fluticasone propionate/salmeterol diskus	119
fluvastatin sodium er	72
fluvoxamine maleate	22
fluvoxamine maleate er	22
FOLOTYN	31
fomepizole	111
fondaparinux sodium	58
FORFIVO XL	21
FORTEO	108
fosamprenavir calcium	51
fosaprepitant dimeglumine	25
fosfomycin tromethamine	8
fosinopril sodium	63
fosinopril sodium/hydrochlorothiazide	63
fosphenytoin sodium	20
FOSRENOL	85
FOTIVDA	30
FRAGMIN	58
FREAMINE HBC 6.9%	111
FREAMINE III	111
fulvestrant	31
furosemide	70
FUZEON	51
fyavolv	95
FYCOMPA	16
gabapentin	19
GABLOFEN	47
GALAFOLD	89
galantamine hydrobromide	20
galantamine hydrobromide er	20
GAMASTAN	102
GAMMAGARD LIQUID	102
GAMMAGARD S/D IGA LESS THAN 1MCG/ML	102
GAMMAKED	102
GAMMAPLEX	102
GAMUNEX-C	102
ganciclovir	48
GARDASIL 9	107
gatifloxacin	14
GATTEX	87
gavilyte-c	86
gavilyte-g	86
gavilyte-n/flavor pack	86
GAVRETO	33
GAZYVA	39
gemcitabine hydrochloride	31
gemfibrozil	71

Drug Name	Page #
generlac	86
gengraf	105
gentak	7
gentamicin sulfate	7
gentamicin sulfate pediatric	7
gentamicin sulfate/0.9% sodium chloride	7
GENVOYA	49
GEODON	45
GILENYA	76
GILOTRIF	37
GLASSIA	120
glatiramer acetate	76
glatopa	76
GLEOSTINE	29
glimepiride	54
glipizide	54
glipizide er	54
glipizide xl	54
glipizide/metformin hydrochloride	54
GLOBAL ALCOHOL PREP EASE PADS	111
GLUCAGEN HYPOKIT	56
GLUCAGON EMERGENCY KIT	56
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	56
GLYCATE	86
glycopyrrolate	86
glydo	6
GOLYTELY	86
GRALISE	76
GRALISE STARTER	76
granisetron hcl	25
granisetron hydrochloride	25
GRANIX	60
GRASTEK	111
griseofulvin microsize	26
griseofulvin ultramicrosize	26
guanidine hcl	28
HAEGARDA	101
hailey 24 fe	95
HALAVEN	33
halobetasol propionate	92
haloperidol	43
haloperidol decanoate	43
haloperidol lactate	43
HARVONI	48
HAVRIX	107
heather	96
HECTOROL	109
HEMANGEOL	65
hemenatal ob	85
hemenatal ob + dha	85
HEPAGAM B	102
heparin sodium	59
heparin sodium/d5w	58
heparin sodium/dextrose	58
heparin sodium/nacl 0.45%	58
heparin sodium/sodium chloride	58
heparin sodium/sodium chloride 0.9% premix	58
HEPATAMINE	111
HERCEPTIN	39
HERCEPTIN HYLECTA	39
HERZUMA	39
HETLIOZ	120
HETLIOZ LQ	120
HIBERIX	107
HIZENTRA	102
HORIZANT	76
HUMALOG	57
HUMALOG JUNIOR KWIKPEN	56
HUMALOG KWIKPEN	57
HUMALOG MIX 50/50	57
HUMALOG MIX 50/50 KWIKPEN	57
HUMALOG MIX 75/25	57
HUMALOG MIX 75/25 KWIKPEN	57
HUMIRA	105
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK	105
HUMIRA PEN	105
HUMIRA PEN-CD/UC/HS STARTER	105
HUMIRA PEN-PEDIATRIC UC STARTER PACK	105
HUMIRA PEN-PS/UV STARTER	105
humulin 70/30	57
HUMULIN 70/30 KWIKPEN	57
humulin n	57
HUMULIN N KWIKPEN	57
humulin r	57
HUMULIN R U-500 (CONCENTRATED)	57
HUMULIN R U-500 KWIKPEN	57
hydralazine hcl	73
hydralazine hydrochloride	73
hydrochlorothiazide	71
hydrocodone bitartrate/acetaminophen	5
hydrocodone/acetaminophen	5
hydrocodone/ibuprofen	5
hydrocortisone	92
hydrocortisone	108
hydrocortisone butyrate	92
hydrocortisone butyrate (lipid)	92

Drug Name	Page #
hydrocortisone butyrate (lipophilic)	92
hydrocortisone/acetic acid	115
hydromorphone hcl	5
hydromorphone hydrochloride	5
hydroxychloroquine sulfate	41
hydroxyprogesterone caproate	96
hydroxyurea	32
hydroxyzine hcl	116
hydroxyzine hydrochloride	116
hydroxyzine pamoate	116
HYPERHEP B	102
HYPERRAB	102
HYPERRAB S/D	102
HYPERRHO S/D	103
HYPERRHO S/D MINI-DOSE	103
HYQVIA	103
ibandronate sodium	109
IBRANCE	33
ibu	1
ibuprofen	1
ibuprofen/famotidine	1
icatibant acetate	101
ICLUSIG	37
icosapent ethyl	72
idarubicin hcl	33
idarubicin hydrochloride	33
IDHIFA	37
ifosfamide	29
ILARIS	104
ILEVRO	114
imatinib mesylate	37
IMBRUVICA	37
IMFINZI	39
imipenem/cilastatin	13
imipramine hcl	24
imipramine hydrochloride	24
imipramine pamoate	24
imiquimod	79
IMIQUIMOD PUMP	79
IMOGAM RABIES-HT	103
IMOVAX RABIES (H.D.C.V.)	107
IMVEXXY MAINTENANCE PACK	95
IMVEXXY STARTER PACK	96
incassia	96
INCRELEX	94
indapamide	71
INFANRIX	107
INFLECTRA	106
INFUGEM	32
INGREZZA	76
INLYTA	37
INQOVI	37
INREBIC	33
INTELENCE	49
INTRALIPID	111
INTRON A	48
INVEGA HAFYERA	45
INVEGA SUSTENNA	45
INVEGA TRINZA	45
INVIRASE	51
INVOKAMET	55
INVOKAMET XR	55
INVOKANA	55
IONOSOL-MB/DEXTROSE 5%	82
IPOL INACTIVATED IPV	107
ipratropium bromide	117
ipratropium bromide/albuterol sulfate	117
irbesartan	61
irbesartan/hydrochlorothiazide	61
IRESSA	37
irinotecan hydrochloride	36
ISENTRESS	49
ISENTRESS HD	49
ISOLYTE-P/DEXTROSE 5%	82
ISOLYTE-S	82
isoniazid	28
isoproterenol hydrochloride	117
isosorbide dinitrate	73
isosorbide dinitrate sa	72
isosorbide mononitrate	73
isosorbide mononitrate er	73
isotonic gentamicin	8
isotretinoin	78
isradipine	67
ISTODAX (OVERFILL)	33
ISTURISA	100
ISUPREL	117
itraconazole	26
ivermectin	41
ivermectin	79
IXEMPRA KIT	33
IXIARO	107
JAKAFI	37
jantoven	59
JANUMET	55
JANUMET XR	55
JANUVIA	55
JARDIANCE	55
JEMPERLI	39
jencycla	96

Drug Name	Page #
JENTADUETO	55
JENTADUETO XR	55
jevantique lo	96
JEVTANA	33
jinteli	96
jolivette	97
JULUCA	49
junel fe 24	96
JUXTAPID	72
JYNARQUE	84
KADCYLA	39
KALBITOR	111
KALETRA	51
KALYDECO	118
KANJINTI	39
KANUMA	89
KAPSPARGO SPRINKLE	65
KAZANO	55
kcl 0.075%/d5w/nacl 0.45%	82
kcl 0.15%/d5w/nacl 0.2%	82
kcl 0.15%/d5w/nacl 0.225%	82
kcl 0.15%/d5w/nacl 0.45%	82
kcl 0.15%/d5w/nacl 0.9%	82
kcl 0.3%/d5w/nacl 0.45%	82
kcl 0.3%/d5w/nacl 0.9%	82
KEDRAB	103
KEPIVANCE	77
ketoconazole	26
ketoprofen	1
ketoprofen er	1
ketorolac tromethamine	1
ketorolac tromethamine	114
KEVEYIS	111
KEYTRUDA	39
KIMYRSA	8
KINERET	106
KINRIX	107
kionex	84
KISQALI	33
KISQALI FEMARA 200 DOSE	29
KISQALI FEMARA 400 DOSE	29
KISQALI FEMARA 600 DOSE	29
KITABIS PAK	118
klor-con	82
klor-con 10	82
klor-con 8	82
klor-con m10	82
klor-con m15	82
klor-con m20	82
klor-con sprinkle	82
KORLYM	94
KOSELUGO	37
KRINTAFEL	41
KRISTALOSE	86
KRYSTEXXA	27
KUVAN	89
KYPROLIS	36
labetalol hydrochloride	65
LACTATED RINGERS IRRIGATION	111
lactulose	86
lamivudine	48
lamivudine	50
lamivudine/zidovudine	50
lamotrigine	16
lamotrigine er	16
lamotrigine titration	16
LANOXIN	64
LANOXIN	70
LANOXIN PEDIATRIC	70
lansoprazole	88
lanthanum carbonate	85
LANTUS	57
LANTUS SOLOSTAR	57
lapatinib ditosylate	37
larin 24 fe	96
LARTRUVO	39
latanoprost	115
LATUDA	45
LAZANDA	5
LEDIPASVIR/SOFOSBUVIR	48
leflunomide	104
LEMTRADA	104
LENVIMA 10 MG DAILY DOSE	37
LENVIMA 12MG DAILY DOSE	37
LENVIMA 14 MG DAILY DOSE	37
LENVIMA 18 MG DAILY DOSE	37
LENVIMA 20 MG DAILY DOSE	37
LENVIMA 24 MG DAILY DOSE	38
LENVIMA 4 MG DAILY DOSE	38
LENVIMA 8 MG DAILY DOSE	38
letrozole	35
leucovorin calcium	33
LEUKERAN	29
LEUKINE	60
leuprolide acetate	100
levalbuterol hcl	117
levalbuterol tartrate hfa	117
LEVEMIR	57
LEVEMIR FLEXTOUCH	57
levetiracetam	17

Drug Name	Page #
levetiracetam er	17
levetiracetam/sodium chloride	17
levobunolol hcl	114
levocarnitine	112
levocetirizine dihydrochloride	116
levofloxacin	14
levofloxacin in d5w	14
levoleucovorin	34
levorphanol tartrate	3
levo-t	97
levothyroxine sodium	98
levothyroxine sodium	101
levothyroxine/liothyronine	98
levoxyl	98
LEXIVA	51
LIBTAYO	39
lidocaine	6
lidocaine hcl	6
lidocaine hcl	64
lidocaine hcl	77
lidocaine hcl in d5w	64
lidocaine hcl jelly	6
lidocaine hcl viscous	77
lidocaine hcl/dextrose	6
lidocaine hcl/dextrose	64
lidocaine hydrochloride	6
lidocaine viscous	77
lidocaine/prilocaine	6
lincomycin hcl	8
lindane	79
linezolid	8
LINZESS	86
LIORESAL INTRATHECAL	47
liothyronine sodium	99
lisinopril	63
lisinopril/hydrochlorothiazide	63
lithium	54
lithium carbonate	54
lithium carbonate er	54
LITHOSTAT	91
LONHALA MAGNAIR REFILL KIT	117
LONHALA MAGNAIR STARTER KIT	117
LONSURF	32
loperamide hcl	87
lopinavir/ritonavir	51
lopreeza	96
lorazepam	53
LORBRENA	34
lorcet	5
lorcet hd	5
lorcet plus	5
losartan potassium	62
losartan potassium/hydrochlorothiazide	61
loteprednol etabonate	114
lovastatin	72
loxapine	43
loxapine succinate	43
LUBIPROSTONE	86
LUCEMYRA	7
LUMAKRAS	34
LUMIZYME	89
LUMOXITI	39
LUPKYNIS	106
LUPRON DEPOT (1-MONTH)	100
LUPRON DEPOT (3-MONTH)	100
LUPRON DEPOT (4-MONTH)	100
LUPRON DEPOT (6-MONTH)	100
LUPRON DEPOT-PED (1-MONTH)	100
LUPRON DEPOT-PED (3-MONTH)	100
LYBALVI	45
lyleq	97
lyllana	96
LYNPARZA	34
LYSODREN	100
lyza	97
mafenide acetate	9
magnesium sulfate	82
magnesium sulfate in d5w	82
magnesium sulfate/dextrose	82
malathion	79
maprotiline hcl	21
MARGENZA	39
MARPLAN	22
MARQIBO	34
MATULANE	29
matzim la	68
MAVENCLAD	76
MAVYRET	48
MAYZENT	77
MAYZENT STARTER PACK	76
meclizine hcl	25
meclizine hydrochloride	25
meclofenamate sodium	1
medroxyprogesterone acetate	97
mefenamic acid	2
mefloquine hcl	41
megestrol acetate	97
MEKINIST	38
MEKTOVI	34
meloxicam	2

Drug Name	Page #
melphalan hydrochloride	29
memantine hcl titration pak	21
memantine hydrochloride	21
memantine hydrochloride er	21
MENACTRA	107
MENQUADFI	107
MENTAX	26
MENVEO	107
meprobamate	52
mercaptopurine	32
meropenem	13
MEROPENEM/SODIUM CHLORIDE	13
mesalamine	108
mesalamine dr	108
mesalamine er	108
mesna	41
MESNEX	41
metadate er	75
metaproterenol sulfate	117
metformin hydrochloride	55
metformin hydrochloride er	55
methadone hcl	3
methadone hydrochloride	3
methadone hydrochloride intensol	3
methadose	3
methadose sugar-free	3
methazolamide	115
methenamine hippurate	9
methergine	112
methimazole	101
methocarbamol	120
methotrexate	106
methotrexate sodium	106
methoxsalen	79
methscopolamine bromide	87
methylergonovine maleate	112
methylphenidate hydrochloride	75
methylphenidate hydrochloride cd	75
methylphenidate hydrochloride er	75
methylprednisolone	93
methylprednisolone acetate	92
methylprednisolone dose pack	92
methylprednisolone sodium succinate	92
methylprednisolone sodiumsuccinate	93
metoclopramide hcl	87
metoclopramide hydrochloride	87
metoclopramide odt	87
metolazone	71
metoprolol succinate er	66
metoprolol tartrate	66
metoprolol/hydrochlorothiazide	66
metronidazole	9
metronidazole	78
metronidazole in nacl 0.79%	9
metronidazole vaginal	9
metyrosine	70
mexiletine hcl	64
MIACALCIN	109
micafungin	26
miconazole 3	26
MICRHOGAM ULTRA-FILTERED PLUS	103
microgestin 24 fe	96
midazolam hcl	53
midazolam hydrochloride	53
midodrine hcl	61
mifepristone	94
MIGERGOT	27
miglitol	55
miglustat	89
mili	96
milrinone in dextrose	70
milrinone lactate in dextrose	70
mimvey	96
minitran	73
MINOCIN	15
minocycline hcl	15
minocycline hydrochloride	15
minocycline hydrochloride er	15
minoxidil	73
mirtazapine	21
mirtazapine odt	21
misoprostol	88
mitomycin	34
mitoxantrone hcl	34
M-M-R II	107
MODAFINIL	121
moexipril hcl	63
MOLINDONE HYDROCHLORIDE	43
mometasone furoate	93
mondoxyne nl	15
MONJUVI	40
mono-linyah	96
mononessa	96
montelukast sodium	116
MONUROL	9
morgidox 1x100mg	16
morgidox 2x100mg	16
morphine sulfate	3
morphine sulfate	5
morphine sulfate er	3

Drug Name	Page #
MOVANTIK	87
MOVIPREP	86
moxifloxacin hydrochloride/sodium hydrochloride	14
moxifloxacin hydrochloride	14
MOZOBIL	60
MULPLETA	60
MULTAQ	64
mupirocin	9
mutamycin	34
MVASI	40
MYALEPT	112
mycophenolate mofetil	106
mycophenolic acid dr	106
MYLOTARG	40
MYOBLOC	47
myorisan	78
MYRBETRIQ	90
NABI-HB	103
nabumetone	2
nadolol	66
nadolol/bendroflumethiazide	66
NAFCILLIN	12
nafcillin sodium	12
NAFTIFINE HCL	26
NAFTIFINE HYDROCHLORIDE	26
NAFTIN	27
NAGLAZYME	89
nalbuphine hcl	5
naloxone hcl	7
naloxone hydrochloride	7
naltrexone hcl	7
NAMENDA XR TITRATION PACK	21
naproxen	2
naproxen sodium	2
naratriptan hcl	28
NARCAN	7
NATACYN	27
nateglinide	55
NATPARA	109
NAYZILAM	17
nebivolol	66
nebivolol hydrochloride	66
nefazodone hcl	22
nefazodone hydrochloride	23
NEMBUTAL SODIUM	121
neomycin sulfate	8
neomycin/bacitracin/polymyxin	113
neomycin/polymyxin b sulfates	8
neomycin/polymyxin/bacitracin	113
neomycin/polymyxin/bacitracin/hydrocortisone	114
neomycin/polymyxin/dexamethasone	114
neomycin/polymyxin/gramicidin	113
neomycin/polymyxin/hc	115
neomycin/polymyxin/hydrocortisone	114
neomycin/polymyxin/hydrocortisone	115
neo-polycin	113
neo-polycin hc	114
NEPHRAMINE	112
NERLYNX	34
NESINA	55
NEULASTA	60
NEULASTA ONPRO KIT	60
NEUPOGEN	60
NEUPRO	41
nevirapine	49
nevirapine er	49
NEXAVAR	38
NEXLETOL	72
NEXTERONE	64
niacin	72
niacin er	72
niacor	72
nicardipine hcl	67
nicardipine hydrochloride	67
NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE	67
NICOTROL INHALER	7
NICOTROL NS	7
nifedipine er	67
nilutamide	30
nimodipine	67
NINLARO	34
nitazoxanide	41
nitisinone	89
NITRO-BID	73
NITRO-DUR	73
nitrofurantoin macrocrystals	9
nitrofurantoin monohydrate	9
nitrofurantoin monohydrate/macrocrystals	9
nitroglycerin	73
nitroglycerin in 5% dextrose	73
nitroglycerin in dextrose 5%	73
nitroglycerin lingual	73
nitroglycerin transdermal	73
NITROSTAT	73
NIVESTYM	60
nizatidine	88

Drug Name	Page #
nolix	93
nora-be	97
NORDITROPIN FLEXPRO	94
norepinephrine bitartrate	70
norethindrone	97
norethindrone acetate	97
norethindrone acetate/ethinyl estradiol	96
norethindrone acetate/ethinyl estradiol/ferrous fumarate	96
norgestimate/ethinyl estradiol	96
norlyda	97
norlyroc	97
NORMOSOL-M IN D5W	83
NORMOSOL-M/D5W	83
NORMOSOL-R	83
normosol-r in d5w	83
NORTHERA	70
nortriptyline hcl	24
nortriptyline hydrochloride	24
NORVIR	51
novarel	94
NOXAFIL	27
np thyroid 120	99
np thyroid 15	99
np thyroid 30	99
np thyroid 60	99
np thyroid 90	99
NPLATE	60
NUBEQA	30
NUCALA	120
NUCYNTA ER	3
NUEDEXTA	76
NULOJIX	106
NUPLAZID	45
NURTEC	28
NUTRILIPID	112
NUVESSA	9
NUZYRA	16
nyamyc	27
NYMALIZE	67
nymyo	96
nystatin	27
nystatin/triamcinolone	27
nystatin/triamcinolone acetonide	27
nystop	27
NYVEPRIA	60
OCALIVA	87
OCTAGAM	103
octreotide acetate	100
ODEFSEY	49
ODOMZO	38
OFEV	119
ofloxacin	14
OGIVRI	40
okebo	16
OLANZAPINE	45
olanzapine odt	45
olanzapine/fluoxetine	21
olmesartan medoxomil	62
olmesartan medoxomil/hydrochlorothiazide	62
olopatadine hcl	114
olopatadine hydrochloride	114
omega-3-acid ethyl esters	72
omeprazole	88
omeprazole dr	88
OMNITROPE	94
ONCASPAR	34
ondansetron hcl	25
ondansetron hydrochloride	25
ondansetron odt	25
ONGENTYS	41
ONTRUZANT	40
ONUREG	34
OPDIVO	40
OPSUMIT	118
ORALAIR	112
ORALAIR ADULT SAMPLE KIT	112
ORALAIR ADULT STARTER PACK	112
ORALAIR CHILDREN/ADOLESCENTS STARTER PACK	112
oralone dental paste	77
ORAVIG	27
ORBACTIV	9
ORENCIA	106
ORENCIA CLICKJECT	106
ORENITRAM	119
ORFADIN	89
ORGOVYX	100
ORKAMBI	118
ORLADEYO	112
ORTIKOS	108
oseltamivir phosphate	52
OSENI	55
OSMOPREP	86
OSPHENA	97
OTEZLA	104
oxacillin sodium	12
oxaliplatin	29
oxandrolone	94
oxaprozin	2

Drug Name	Page #
oxazepam	53
oxcarbazepine	20
OXTELLAR XR	20
oxybutynin chloride	90
oxybutynin chloride er	90
oxycodone hcl	6
oxycodone hcl er	3
oxycodone hydrochloride	6
oxycodone/acetaminophen	6
oxycodone/aspirin	6
oxycodone/ibuprofen	6
OXYCONTIN	3
oxymorphone hydrochloride	6
oxymorphone hydrochloride er	3
oxymorphone hydrochlorideer	4
OZEMPIC	55
pacerone	64
paclitaxel	34
PADCEV	40
paliperidone er	46
palonosetron hydrochloride	25
pamidronate disodium	109
PANCREAZE	89
PANRETIN	40
pantoprazole sodium	88
PANZYGA	103
paraplatin	30
paregoric	87
PARICALCITOL	109
paroex	77
paromomycin sulfate	8
paroxetine	23
paroxetine hcl	23
paroxetine hcl er	23
paroxetine hydrochloride	23
PASER	29
PAXIL	23
PAZEO	114
PEDIARIX	107
PEDVAX HIB	107
peg 3350/electrolytes	86
peg-3350/electrolytes	86
peg-3350/electrolytes/ascorbate	87
peg-3350/nacl/na bicarbonate/kcl	86
peg-3350/sodium sulf/naclpotassium cl/na ascorbate/ascorbic	87
PEGANONE	20
PEGASYS	104
PEGASYS PROCLICK	104
PEGINTRON	104
PEMAZYRE	34
penicillamine	84
penicillin g potassium	13
penicillin g potassium in iso-osmotic dextrose	13
penicillin g procaine	13
penicillin v potassium	13
PENTACEL	107
pentamidine isethionate	41
pentobarbital sodium	121
pentoxifylline er	70
PEPAXTO	30
perindopril erbumine	63
periogard	77
PERJETA	40
permethrin	79
perphenazine	43
perphenazine/amitriptyline	24
PERSERIS	46
PEXEVA	23
phenadoz	25
phenelzine sulfate	22
phenobarbital	19
phenobarbital sodium	19
phenoxybenzamine hydrochloride	61
phentolamine mesylate	61
phenylephrine hcl	114
phenytoin	20
phenytoin infatabs	20
phenytoin sodium	20
phenytoin sodium extended	20
PHESGO	34
PHOSLYRA	85
PHOSPHOLINE IODIDE	115
PIFELTRO	50
pilocarpine hcl	115
pilocarpine hydrochloride	77
pimecrolimus	79
pimozide	44
pindolol	66
pioglitazone hcl	56
pioglitazone hcl/metformin hcl	56
pioglitazone hcl-glimepiride	56
pioglitazone hydrochloride	56
piperacillin sodium/tazobactam sodium	13
PIQRAY 200MG DAILY DOSE	34
PIQRAY 250MG DAILY DOSE	34
PIQRAY 300MG DAILY DOSE	34
piroxicam	2
PLASMA-LYTE A	83

Drug Name	Page #
PLASMA-LYTE-148	83
PLEGRIDY	77
PLEGRIDY STARTER PACK	77
PLENAMINE	112
PLIAGLIS	6
pnv-total	85
podofilox	79
POLIVY	40
polycin	113
polymyxin b sulfate	9
polymyxin b sulfate/trimethoprim sulfate	114
POMALYST	30
PORTRAZZA	40
posaconazole dr	27
potassium chloride	83
potassium chloride cr	83
potassium chloride er	83
potassium chloride proamp	83
potassium chloride sr	83
potassium chloride/dextrose	83
potassium chloride/dextrose/lactated ringers	83
potassium chloride/dextrose/sodium chloride	83
potassium chloride/sodium chloride	83
potassium citrate er	83
PRADAXA	59
PRALUENT	70
pramipexole dihydrochloride	42
pramipexole dihydrochloride er	42
prasugrel	61
pravastatin sodium	72
praziquantel	41
prazosin hcl	61
prazosin hydrochloride	61
prednicarbate	93
prednisolone	93
prednisolone acetate	114
prednisolone sodium phosphate	93
prednisolone sodium phosphate	114
prednisolone sodium phosphate odt	93
prednisone	93
PREDNISONE INTENSOL	93
pregabalin	18
pregnyl w/diluent benzyl alcohol/nacl	94
PREMARIN	96
PREMASOL	112
PREMPRO	96
prenatal	85
prenatal 19	85
PREPOPIK	86
PRETOMANID	28
prevalite	72
previfem	96
PREVYMIS	48
PREZCOBIX	51
PREZISTA	51
PRIFTIN	29
PRIMAQUINE PHOSPHATE	41
primidone	19
PRIVIGEN	103
PROAIR DIGIHALER	117
proair hfa	117
PROAIR RESPICLICK	117
probenecid	27
probenecid/colchicine	27
procainamide hcl	64
procainamide hydrochloride	64
PROCALAMINE	84
prochlorperazine	25
prochlorperazine edisylate	25
prochlorperazine maleate	25
PROCRIT	60
procto-med hc	93
procto-pak	93
proctosol hc	93
proctozone-hc	93
PROCYSBI	89
progesterone	97
PROGLYCEM	56
PROGRAF	106
PROLASTIN-C	120
PROLEUKIN	34
PROLIA	109
PROMACTA	60
promethazine hcl	25
promethazine hydrochloride	25
promethegan	25
propafenone hcl	64
propafenone hydrochloride er	64
propantheline bromide	87
proparacaine hcl	114
propranolol hcl	66
propranolol hcl er	66
propranolol hydrochloride	66
propranolol hydrochloride er	66
propranolol/hydrochlorothiazide	66
propylthiouracil	101
PROQUAD	107
PROSOL	112

Drug Name	Page #
PROSTIN E2	94
PROTOPAM CHLORIDE	112
protriptyline hcl	24
PULMICORT FLEXHALER	116
PULMOZYME	118
PURIXAN	32
pyrazinamide	29
pyridostigmine bromide	28
pyridostigmine bromide er	28
pyrimethamine	41
QINLOCK	30
QUADRACEL	107
quetiapine fumarate	46
quetiapine fumarate er	46
quinapril hcl	63
quinapril hydrochloride	63
quinapril/hydrochlorothiazide	63
quinidine gluconate cr	64
quinidine gluconate er	64
quinidine sulfate	64
quinine sulfate	41
QVAR REDIHALER	116
RABAVERT	107
rabeprazole sodium	88
RAGWITEK	112
raloxifene hydrochloride	97
ramelteon	121
ramipril	63
ranitidine hcl	88
ranitidine hydrochloride	88
ranolazine er	70
rasagiline mesylate	42
RAVICTI	89
REBETOL	104
REBIF	77
REBIF REBIDOSE	77
REBIF REBIDOSE TITRATION PACK	77
REBIF TITRATION PACK	77
REBLOZYL	60
RECOMBIVAX HB	107
RECTIV	87
REGONOL	28
REGRANEX	79
RELENZA DISKHALER	52
relexxii	75
RELISTOR	87
REMICADE	106
REMODULIN	119
RENACIDIN	91
RENFLEXIS	106

Drug Name	Page #
repaglinide	56
REPATHA	70
REPATHA PUSHTRONEX SYSTEM	70
REPATHA SURECLICK	70
RESCRIPTOR	50
RESTASIS	114
RESTASIS MULTIDOSE	114
RETEVMO	34
RETROVIR IV INFUSION	50
REVLIMID	30
REXULTI	46
REYATAZ	51
REYVOW	28
RHOGAM ULTRA-FILTERED PLUS	103
RHOPHYLAC	103
RHOPRESSA	114
RIABNI	40
ribasphere	104
ribavirin	104
ribavirin	120
RIDAURA	104
rifabutin	28
rifampin	29
RIFATER	29
riluzole	76
rimantadine hydrochloride	52
RIMSO-50	91
ringers injection	84
ringers irrigation	112
RINVOQ	104
RIOMET	56
RIOMET ER	56
risedronate sodium	109
risedronate sodium dr	109
RISPERDAL CONSTA	46
risperidone	46
risperidone odt	46
ritonavir	51
RITUXAN	40
RITUXAN HYCELA	40
rivastigmine tartrate	21
rivastigmine transdermal system	21
rizatriptan benzoate	28
rizatriptan benzoate odt	28
ROMIDEPSIN	34
ropinirole hcl	42
ropinirole hydrochloride	42
rosadan	78
rosuvastatin calcium	72
ROTARIX	107

Drug Name	Page #
ROTATEQ	107
roweepra	17
roweepra xr	17
ROZLYTREK	34
RUBRACA	38
RUCONEST	101
rufinamide	20
RUKOBIA	51
RYBELSUS	56
RYBREVANT	40
RYDAPT	34
RYLAZE	34
RYTARY	42
sajazir	101
salsalate	2
SAMSCA	84
SANCUSO	25
SANDOSTATIN LAR DEPOT	100
SANTYL	79
SAPHRIS	46
sapropterin dihydrochloride	89
SARCLISA	40
SAVELLA	76
SAVELLA TITRATION PACK	76
scopolamine	25
SECUADO	46
SEEBRI NEOHALER	117
selegiline hcl	43
selenium sulfide	79
SELZENTRY	51
SEREVENT DISKUS	117
SEROSTIM	94
sertraline hcl	23
sertraline hydrochloride	23
sevelamer carbonate	85
sevelamer hydrochloride	85
sharobel	97
SHINGRIX	107
SIGNIFOR	100
SIGNIFOR LAR	100
SIKLOS	32
sildenafil	119
sildenafil citrate	119
silodosin	90
silver sulfadiazine	9
SIMBRINZA	114
SIMULECT	104
simvastatin	72
sirolimus	106
SIRTURO	29

Drug Name	Page #
SIVEXTRO	9
SKLICE	79
SKYRIZI	104
SKYRIZI PEN	104
sodium chloride	84
sodium chloride 0.45%	84
sodium chloride 0.9%	112
sodium fluoride	84
sodium phenylacetate/sodium benzoate	113
sodium phenylbutyrate	89
sodium polystyrene sulfonate	84
sodium sulfacetamide	15
SOFOSBUVIR/VELPATASVIR	48
solifenacin succinate	90
SOLIRIS	104
SOLTAMOX	31
SOMATULINE DEPOT	101
SOMAVERT	101
sorine	64
sotalol hcl	64
sotalol hcl (af)	64
sotalol hcl af	64
sotalol hydrochloride	65
sotalol hydrochloride (af)	65
sotalol hydrochloride af	65
SOTYLIZE	65
SOVALDI	49
SPIRIVA HANDIHALER	117
SPIRIVA RESPIMAT	117
spironolactone	71
spironolactone/hydrochlorothiazide	70
SPRAVATO 56MG DOSE	21
SPRAVATO 84MG DOSE	22
sprintec 28	96
SPRITAM	17
SPRYCEL	38
sps	84
ssd	9
STAMARIL	107
stavudine	50
STELARA	104
sterile water for irrigation	113
STIMATE	94
STIOLTO RESPIMAT	120
STIVARGA	38
STRENSIQ	89
streptomycin sulfate	8
STRIBILD	49
STRIVERDI RESPIMAT	117
subvenite	17

Drug Name	Page #
SUCRAID	89
sucralfate	88
sulfacetamide sodium	15
sulfacetamide sodium/prednisolone sodium phosphate	114
sulfadiazine	15
sulfamethoxazole/trimethoprim	15
sulfamethoxazole/trimethoprim ds	15
SULFAMYLON	9
sulfasalazine	108
sulindac	2
sumatriptan	28
sumatriptan succinate	28
sumatriptan succinate refill	28
sunitinib malate	38
SUNOSI	121
SUPRAX	11
SUPREP BOWEL PREP KIT	86
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	113
SUTENT	38
SYLATRON	35
SYLVANT	104
SYMBICORT	120
SYMDEKO	118
SYMFI	50
SYMFI LO	50
SYMLINPEN 120	56
SYMLINPEN 60	56
SYMPAZAN	19
SYMPROIC	87
SYMTUZA	51
SYNAGIS	103
SYNAREL	101
SYNERCID	9
SYNJARDY	56
SYNJARDY XR	56
SYNRIBO	35
SYNTHAMIN 17	113
SYNTHROID	99
TABLOID	32
TABRECTA	30
tacrolimus	79
tacrolimus	106
tadalafil	90
tadalafil	119
TAFINLAR	38
TAGRISSO	38
TAKHZYRO	70
TALTZ	104
TALZENNA	35
tamoxifen citrate	31
tamsulosin hydrochloride	90
TARGRETIN	40
tarina 24 fe	96
TASIGNA	38
tazarotene	78
taricef	11
TAZORAC	78
taztia xt	68
TAZVERIK	35
TDVAX	107
TECENTRIQ	40
TECFIDERA	77
TECFIDERA STARTER PACK	77
TEFLARO	11
telmisartan	62
telmisartan/hydrochlorothiazide	62
temazepam	53
TEMIXYS	50
TEMODAR	30
temsirolimus	38
TENIVAC	107
tenofovir disoproxil fumarate	50
TEPMETKO	38
terazosin hcl	90
terazosin hydrochloride	90
terbinafine hcl	27
terbutaline sulfate	117
terconazole	27
TERIPARATIDE	109
testosterone	95
testosterone cypionate	94
testosterone enanthate	95
testosterone pump	95
tetrabenazine	76
tetracycline hydrochloride	16
THALOMID	30
THEO-24	118
theophylline	118
theophylline er	118
theophylline/d5w	118
THIOLA	91
THIOLA EC	91
thioridazine hcl	44
thiotepa	30
thiothixene	44
THYMOGLOBULIN	103
THYROLAR-1	99
THYROLAR-1/2	99

Drug Name	Page #
THYROLAR-1/4	99
THYROLAR-2	99
THYROLAR-3	99
tiadylt er	68
tiagabine hydrochloride	19
TIBSOVO	38
TICE BCG	35
tigecycline	9
timolol maleate	66
timolol maleate	115
timolol maleate ophthalmic gel forming	114
tinidazole	41
tiopronin	91
TIROSINT	99
tis-u-sol	113
TIVDAK	40
TIVICAY	49
TIVICAY PD	49
tizanidine hcl	48
tizanidine hydrochloride	48
TOBI PODHALER	118
tobramycin	8
tobramycin	118
tobramycin sulfate	8
tobramycin/dexamethasone	114
TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2"	113
tolazamide	56
tolbutamide	56
tolcapone	41
tolmetin sodium	2
tolterodine tartrate	90
tolterodine tartrate er	90
TOLVAPTAN	84
topiramate	17
topiramate er	17
toposar	36
topotecan hcl	36
topotecan hydrochloride	36
toremifene citrate	31
TORISEL	38
torsemide	70
TOUJEO MAX SOLOSTAR	57
TOUJEO SOLOSTAR	57
tovet	93
TOVIAZ	90
TRADJENTA	56
tramadol hcl	6
tramadol hcl er	4
tramadol hydrochloride	6
tramadol hydrochloride/acetaminophen	6
trandolapril	63
trandolapril/verapamil hcl er	63
tranexamic acid	61
tranylcypromine sulfate	22
TRAVASOL	113
travoprost	115
TRAZIMERA	40
trazodone hydrochloride	23
TREANDA	30
TRECATOR	29
TRELEGY ELLIPTA	120
TRELSTAR MIXJECT	101
treprostinil	119
TRESIBA	57
TRESIBA FLEXTOUCH	57
tretinoin	40
tretinoin	78
tretinoin microsphere	78
tretinoin microsphere pump	78
triamcinolone acetonide	93
triamcinolone acetonide dental paste	77
triamterene	71
triamterene/hydrochlorothiazide	71
triazolam	54
triderm	94
trientine hydrochloride	85
trifluoperazine hcl	44
trifluoperazine hydrochloride	44
trifluridine	52
trihexyphenidyl hydrochloride	41
TRIKAFTA	118
trilyte	86
trimethoprim	9
trimethoprim sulfate/polymyxin b sulfate	114
trimipramine maleate	24
TRINTELLIX	23
TRISENOX	35
TRIUMEQ	49
TRODELVY	40
TROGARZO	51
TROKENDI XR	17
TROPHAMINE	84
TROPHAMINE	113
trospium chloride	90
trospium chloride er	90
TRULICITY	56
TRUMENBA	107
TRUSELTIQ	35
TRUVADA	50

Drug Name	Page #
TRUXIMA	40
TUDORZA PRESSAIR	117
TUKYSA	35
tulana	97
TURALIO	38
TWINRIX	107
TYBOST	51
TYKERB	38
TYPHIM VI	107
TYSABRI	77
TYVASO	119
TYVASO REFILL	119
TYVASO STARTER	119
UCERIS	94
UDENYCA	60
UKONIQ	38
ULTOMIRIS	104
unithroid	99
UPTRAVI	119
ursodiol	87
UTIBRON NEOHALER	118
valacyclovir hcl	52
valacyclovir hydrochloride	52
VALCHLOR	30
valganciclovir	48
valganciclovir hydrochlorde	48
valproate sodium	19
valproic acid	19
valrubicin	35
valsartan	62
valsartan/hydrochlorothiazide	62
VALSTAR	35
VALTOCO	19
vancomycin	9
vancomycin hcl	9
vancomycin hydrochloride	9
vancomycin hydrochloride/dextrose	9
vandazole	9
VAQTA	107
varenicline tartrate	7
VARIVAX	108
VARIZIG	108
VASCEPA	72
vasostrict	94
VAXELIS	108
VECTIBIX	40
VELCADE	35
VELTASSA	85
VEMLIDY	48
VENCLEXTA	38
VENCLEXTA STARTING PACK	38
venlafaxine hcl	23
venlafaxine hcl er	23
venlafaxine hydrochloride er	23
VENTAVIS	119
ventolin hfa	118
verapamil hcl	68
verapamil hcl er	68
verapamil hcl sr	68
verapamil hydrochloride	69
verapamil hydrochloride er	68
VEREGEN	79
VERSACLOZ	47
VERZENIO	35
VIBERZI	86
VIBRAMYCIN	16
vicodin hp	6
VICTOZA	56
VIDEX EC	50
VIDEX PEDIATRIC	50
vigabatrin	19
vigadrone	19
VIIBRYD	23
VIIBRYD STARTER PACK	23
VIMIZIM	89
VIMPAT	20
vinate ii	85
vinblastine sulfate	35
vincasar pfs	35
vincristine sulfate	35
vinorelbine tartrate	35
VIRACEPT	51
VIREAD	50
virt-c dha	85
VISTOGARD	113
VITRAKVI	35
VIVITROL	6
VIZIMPRO	38
VOCABRIA	49
voriconazole	27
VOTRIENT	38
vp-heme ob	85
vp-heme ob + dha	85
vp-heme one	85
vp-pnv-dha	86
VPRIV	89
VRAYLAR	46
VUMERITY	77
VYEPTI	28
vylibra	96

Drug Name	Page #
VYNDAMAX	70
VYNDAQEL	70
VYXEOS	32
warfarin sodium	59
WELIREG	38
WINRHO SDF	103
wixela inhub	120
XALKORI	38
XARELTO	59
XARELTO STARTER PACK	59
XATMEP	106
XCOPRI	17
XELJANZ	104
XELJANZ XR	104
XELPROS	115
XEMBIFY	103
XEOMIN	48
XERAVA	16
XGEVA	109
XIAFLEX	90
XIFAXAN	9
XIIDRA	114
XOFLUZA	52
XOLAIR	120
XOSPATA	39
XPOVIO	35
XPOVIO 100 MG ONCE WEEKLY	35
XPOVIO 40 MG ONCE WEEKLY	35
XPOVIO 40 MG TWICE WEEKLY	35
XPOVIO 60 MG ONCE WEEKLY	35
XPOVIO 60 MG TWICE WEEKLY	35
XPOVIO 80 MG ONCE WEEKLY	35
XPOVIO 80 MG TWICE WEEKLY	35
XTANDI	30
xulane	96
XULTOPHY 100/3.6	57
XURIDEN	90
XYREM	121
YERVOY	40
YF-VAX	108
YONDELIS	30
YONSA	30
YUVAFEM	96
zafemy	96
zafirlukast	116
ZALTRAP	35
ZANOSAR	30
ZEJULA	39
ZELAPAR	43
ZELBORAF	39
ZEMAIRA	120
ZEMDRI	8
zenatane	78
ZENPEP	90
ZEPATIER	49
ZEPOSIA	77
ZEPOSIA 7-DAY STARTER PACK	77
ZEPOSIA STARTER KIT	77
ZEPZELCA	30
ZERBAXA	11
zidovudine	51
ZIEXTENZO	60
ZIOPTAN	115
ziprasidone hcl	47
ziprasidone mesylate	47
ZIRGAN	48
ZOLADEX	101
zoledronic acid	109
ZOLINZA	35
zolmitriptan	28
zolmitriptan odt	28
zolpidem tartrate	121
zonisamide	18
ZORTRESS	106
ZOSTAVAX	108
ZYDELIG	36
ZYKADIA	39
ZYNLONTA	40
ZYPREXA RELPREVV	47
ZYTIGA	30

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