



# Preferred Value - 3 Tier Formulary Guide (3295)

Includes generic and brand-name medications

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For you.



## Dear Member,

The prescription drug benefit is one of the most important and frequently utilized elements of health plan coverage. To help you identify which medications are covered under your plan, we are pleased to provide the **Preferred Value 3-Tier Formulary Guide**. This booklet provides you with easy to understand information about your prescription drug coverage including descriptions of prescription drug safety and cost-saving programs.

The **Preferred Value 3-Tier Formulary Guide** lists commonly prescribed medications and their tier classifications. The medications listed have been approved by the Food and Drug Administration as safe and effective and were selected in consultation with a team of health care professionals because they meet our criteria for safety, quality and value. We continually review and update our formulary.

**The drugs listed in the formulary and program descriptions may not apply to all plans.**

This booklet includes the Formulary Guide and prescription drug benefit information. Please refer to this booklet when you see your healthcare practitioner or are prescribed a medication.

The drugs listed in the formulary and program descriptions may not apply to all plans. Please see your plan documents for a complete description of your pharmacy benefit.

If you have questions or need additional information, please visit our website [UniveraHealthcare.com](https://www.UniveraHealthcare.com) or contact the **Pharmacy Help Desk at 1-800-499-1275**.



## What is a formulary?

A formulary is a list of brand name and generic drugs that are covered under your prescription drug benefit.

### How is the formulary developed?

Drugs listed on the formulary were selected by our independent Pharmacy and Therapeutics (P&T) Committee which is made up of practicing health care providers and clinical pharmacists. The P&T Committee reviews each drug based upon scientific evidence, findings by federal government agencies, professional medical associations and journals to help ensure that the medications covered meet criteria for safety, effectiveness and value.

### How do I use the formulary?

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

#### Medical condition

Drugs are listed in alphabetical order according to drug categories. For example, drugs used to treat heart conditions are listed under the category "Cardiovascular." Drugs are listed in alphabetical order by condition.

#### Alphabetical Listing

If you are not sure what category to look under, look for your drug in the Index that follows the formulary. The Index provides an alphabetical listing of all of the drugs included in the formulary and the page where they can be found in the formulary.

### Preferred Value 3-Tier Drug Benefit

Your Preferred Value 3-tier prescription drug benefit allows you to make informed choices and encourages value when choosing your prescription medications. Your copayment will vary depending on the tier in which your prescription drug is placed.

- **Tier One** drugs are typically generics and have the lowest copayment amount.
- **Tier Two** drugs are brand drugs that have unique, significant clinical advantages and offer overall greater value over the other products in the same drug class.
- **Tier Three** drugs are all other brand drugs, including new brand drugs and drugs that have generic equivalents. Tier Three drugs have the highest copayment amount.

The Preferred Value 3-Tier Formulary Guide lists commonly used medications and their tier designations. Because there are thousands of medications included in your pharmacy benefit, we list only the most commonly prescribed.

*Your plan may not cover all medications listed in this booklet. Please see your plan documents for a complete description of your pharmacy benefit, or call the Pharmacy Help Desk at 1-800-499-1275.*

### Can the formulary change?

Our P&T Committee regularly reviews the drugs on our formulary to be sure they meet the criteria for safety, effectiveness and value. The list is subject to change. Drugs may be added, removed, or change tier designation at any time.

### Generics Are Real Medicine

#### Generic drugs: safe, effective, affordable!

To help keep your prescription drug costs down, choose a generic drug over a brand. Generics are as safe and effective as their brand name counterparts – they just cost a lot less.

In fact, you'll save money when you choose a generic because generics have the lowest copay. That means you'll always pay the lowest out-of-pocket amount for a generic.

Generic drugs treat your illness or condition with the same effectiveness and safety as their brand name equivalents because they have to meet the same rigorous FDA requirements as brand name drugs.

Experience has shown that more than 90% of members who start on a generic will stay on a generic. So the next time you need your brand prescription filled, ask your doctor or pharmacist if a generic is right for you.

### Where can I purchase my prescription medications?

You have access to more than 65,000 participating pharmacies in our nationwide Pharmacy Network, including national chains and most independents. Just show your Member Card at any participating pharmacy; it identifies you as having prescription drug coverage. A list of participating pharmacies in your area is available on our website [UniveraHealthcare.com](http://UniveraHealthcare.com).

## Mail Service Pharmacy

Get your prescriptions delivered right to your door! When you use Express Scripts Home Delivery Pharmacy<sup>SM</sup> or Wegmans<sup>®</sup> Home Delivery Pharmacy, you get the convenience of home delivery and the ease of ordering new prescriptions and refills either by phone or via our website, [UniveraHealthcare.com](https://www.univerahealthcare.com). Some benefits offer copay savings for ordering prescriptions through Express Scripts Home Delivery Pharmacy<sup>SM</sup> or Wegmans<sup>®</sup> Home Delivery Pharmacy.

Using a home delivery pharmacy is ideal for those who take prescription medication on a continuing basis. For more information on how to use Express Scripts Home Delivery Pharmacy<sup>SM</sup> or Wegmans<sup>®</sup> Home Delivery Pharmacy, please visit our website at [UniveraHealthcare.com](https://www.univerahealthcare.com) or contact the Pharmacy Help Desk.

## Specialty pharmacy

Specialty pharmacies focus on you and your individual health care needs. Because they work exclusively with specialty medications, they are experts in handling and administering these complex medications. Nationally recognized specialty pharmacy Accredo Health participates in our network. Accredo offers outstanding customer service and is dedicated to providing quality care to our members. With a single, toll-free phone call they take care of all the details – they will contact your doctor for your prescription and arrange delivery to your home. There are several local/regional specialty pharmacies also participating in our specialty pharmacy network. A complete listing of participating specialty pharmacies is available on our website [UniveraHealthcare.com](https://www.univerahealthcare.com).

## Are there any restrictions on coverage?

Some covered drugs may have additional requirements or limits for coverage. If a drug has requirements or limits, it will be noted in the formulary.

If your healthcare practitioner determines that you need a medication that has a requirement or limit, we have an exception process in place. Your healthcare practitioner must submit a request to the Health Plan supporting your need.

### Coverage requirements or limits may include:

#### Prior Authorization

Prior authorization helps ensure that a prescribed drug is safe and appropriate for your medical condition. Certain medications require that your doctor gets approval **before** the medication is covered. Our clinical pharmacists and physicians review medication requests to make sure that the choice of drug or dose

is appropriately prescribed based on Food and Drug Administration (FDA) and manufacturer guidelines, medical literature, safety, use and benefit design.

#### Step Therapy

In some cases you may be required to first try one or more drugs to treat your medical condition before another drug for that condition will be covered. The medication treatment moves along a series of “steps.” For example, if **Drug A** and **Drug B** both treat your medical condition, we may not cover **Drug B** unless you try **Drug A** first. If **Drug A** does not work, we will then cover **Drug B**.

#### Specialty Drug Benefit

Specialty medications are designed for conditions like multiple sclerosis, rheumatoid arthritis, hepatitis C, and others that are difficult to treat with traditional medications. These medications are self-administered: either taken orally or by injection.

Your prescription drug benefit may require that you purchase certain specialty medications at a specialty pharmacy that participates in the Specialty Pharmacy Network in order to receive coverage. If a participating specialty pharmacy is not used you may be responsible for the full cost of the prescription. A complete listing of participating specialty pharmacies can be found on our website, [UniveraHealthcare.com](https://www.univerahealthcare.com).

#### Quantity Limits

For certain drugs, we limit the amount of the drug that we will cover. The amount of drug we cover is based on FDA approved dosing and usage guidelines.

#### Generic Advantage Program

The Generic Advantage program promotes the use of generic medications. If you fill your prescription with a brand name medication when there is a generic equivalent available, you will pay the difference between the pharmacy’s charge for the more costly brand name medication and our price for the less expensive generic. Check your benefits summary to find out if the Generic Advantage program applies to your plan.

#### Key:

**UPPERCASE** – Brand name medication

**lowercase** – generic medication

**PA** = Prior Authorization required

**QL** = Quantity Limit applies

**ST** = Step Therapy required

**MS** = Drug must be purchased at a participating network specialty pharmacy for coverage

**CURRENT AS OF 1/1/2025**

<b>Product Description</b>	<b>Tier</b>	<b>Limits/Restrictions/Notes</b>
<b>ALTERNATIVE THERAPY - VITAMINS AND MINERALS</b>		
<b>ALTERNATIVE THERAPY - UNCLASSIFIED - VITAMINS AND MINERALS</b>		
ACTIVE Q ORAL SUSPENSION	3	PA
ARGUMENT AT	3	PA
CHILDREN'S DIARESQ	3	PA
CYTO-Q MAX	1	PA
CYTO-Q T-F	3	PA
DIARESQ	3	PA
D-MANNOSE	3	PA
ENTERADE ADVANCED ONCOLOGY	3	PA
GRIPE WATER (GINGER, FENNEL)	3	PA
LIQSORB ORAL LIQUID	3	PA
LITTLE REMEDIES GRIPE WATER	3	PA
MANNXTRA	3	PA
OVASITOL	3	PA
PREGNITUDE	3	PA
QH LIQUID	3	PA
Q-UP	3	PA
RE:IMMUNE	3	PA
UTYMAX	3	PA
<b>ANALGESIC, ANTI-INFLAMMATORY OR ANTIPYRETIC</b>		
<b>ANTI-INFLAMMATORY - ANTIMITOTICS</b>		
LODOCO	3	PA; QL
<b>ANALGESIC, ANTI-INFLAMMATORY OR ANTIPYRETIC - DRUGS FOR PAIN AND FEVER</b>		
<b>ANALGESIC OPIOID AGONISTS - ARTHRITIS AND PAIN DRUGS</b>		
codeine sulfate	1	
diskets	1	PA
fentanyl patch	1	PA
fentanyl citrate buccal lozenge on a handle 200 mcg, 600 mcg	1	PA; QL
FENTANYL CITRATE BUCCAL TABLET, EFFERVESCENT 200 MCG, 400 MCG, 600 MCG, 800 MCG	3	PA; QL
hydrocodone bitartrate	1	PA
hydromorphone oral liquid	1	
hydromorphone oral tablet	1	
hydromorphone oral tablet extended release 24 hr	1	PA
hydromorphone rectal	1	
HYSINGLA ER	3	PA
levorphanol tartrate	1	PA
meperidine oral solution	1	
meperidine oral tablet 50 mg	1	
methadone intensol	1	PA
methadone oral concentrate	1	PA
methadone oral solution	1	PA
methadone oral tablet	1	PA
methadone oral tablet, soluble	1	PA
morphine concentrate oral solution	1	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
morphine oral capsule, er multiphase 24 hr	1	PA
morphine oral capsule,extend.release pellets	1	PA
morphine oral solution	1	
MORPHINE ORAL TABLET	2	
morphine oral tablet extended release	1	PA
morphine rectal	1	
NUCYNTA	2	
NUCYNTA ER	2	PA
oxycodone oral capsule	1	
oxycodone oral concentrate	1	
oxycodone oral solution	1	
oxycodone oral tablet	1	
OXYCODONE ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 10 MG, 20 MG, 40 MG, 80 MG	3	PA
oxymorphone oral tablet	1	
oxymorphone oral tablet extended release 12 hr	1	PA
TRAMADOL ORAL TABLET 25 MG	3	QL
tramadol oral tablet 50 mg	1	
tramadol oral tablet extended release 24 hr	1	PA
tramadol oral tablet, er multiphase 24 hr	1	PA
XTAMPZA ER	2	PA
<b>ANALGESIC OPIOID CODEINE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
acetaminophen-codeine oral solution 120-12 mg/5 ml	1	
acetaminophen-codeine oral tablet	1	
ascomp with codeine	1	
butalbital-acetaminop-caf-cod	1	QL
codeine-butalbital-asa-caff	1	
<b>ANALGESIC OPIOID DIHYDROCODEINE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
acetaminophen-caff-dihydrocod 320.5-30-16 mg	1	
<b>ANALGESIC OPIOID DIHYDROCODEINE, NON-SALICYLATE ANALGESIC,XANTHINE - ARTHRITIS AND PAIN DRUGS</b>		
acetaminophen-caff-dihydrocod 320.5-30-16 mg	1	
<b>ANALGESIC OPIOID HYDROCODONE AND NON-SALICYLATE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
hydrocodone-acetaminophen oral solution	1	
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	1	
<b>ANALGESIC OPIOID HYDROCODONE AND NSAID COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
hydrocodone-ibuprofen	1	
<b>ANALGESIC OPIOID HYDROCODONE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
hydrocodone-acetaminophen oral solution	1	
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	1	
hydrocodone-ibuprofen	1	
<b>ANALGESIC OPIOID OXYCODONE AND NON-SALICYLATE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
endocet	1	
oxycodone-acetaminophen oral solution 10-300 mg/5 ml	1	ST

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
oxycodone-acetaminophen oral solution 5-325 mg/5 ml	1	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	
<b>ANALGESIC OPIOID OXYCODONE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
endocet	1	
oxycodone-acetaminophen oral solution 10-300 mg/5 ml	1	ST
oxycodone-acetaminophen oral solution 5-325 mg/5 ml	1	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	
<b>ANALGESIC OPIOID PARTIAL-MIXED AGONISTS - ARTHRITIS AND PAIN DRUGS</b>		
butorphanol nasal	1	QL
pentazocine-naloxone	1	
<b>ANALGESIC OPIOID TRAMADOL AND NON-SALICYLATE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
tramadol-acetaminophen	1	
<b>ANALGESIC OPIOID TRAMADOL COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
tramadol-acetaminophen	1	
<b>ANALGESIC OR ANTIPYRETIC NON-OPIOID/SEDATIVE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
butalbital-acetaminophen oral tablet 50-300 mg	1	QL
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-acetaminophen-caff	1	
<b>ANTI-INFLAMMATORY - COMPLEMENT (C5) RECEPTOR INHIBITORS - ARTHRITIS AND PAIN DRUGS</b>		
TAVNEOS	3	PA; QL; S
<b>ANTI-INFLAMMATORY - INTERLEUKIN-1 RECEPTOR ANTAGONIST - ARTHRITIS AND PAIN DRUGS</b>		
ARCALYST	3	PA; QL; S
<b>ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITING AGENTS, NON-SELECTIVE - ARTHRITIS AND PAIN DRUGS</b>		
ENBREL MINI	2	PA; QL; MS; S
ENBREL SUBCUTANEOUS SOLUTION	2	PA; QL; MS; S
ENBREL SUBCUTANEOUS SYRINGE	2	PA; QL; MS; S
ENBREL SURECLICK	2	PA; QL; MS; S
<b>ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITING AGENTS, TNF-ALPHA SELECTIVE - ARTHRITIS AND PAIN DRUGS</b>		
CIMZIA STARTER KIT	3	PA; QL; MS; S
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	3	PA; QL; MS; S
CYLTEZO(CF)	2	PA; QL; MS; S
CYLTEZO(CF) PEN CROHN'S-UC-HS	2	PA; QL; MS; S
CYLTEZO(CF) PEN PSORIASIS-UV	2	PA; QL; MS; S
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	2	MS; S
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	2	PA; QL; MS; S
HADLIMA	2	PA; QL; MS; S
HADLIMA PUSH TOUCH	2	PA; QL; MS; S
HADLIMA(CF)	2	PA; QL; MS; S
HADLIMA(CF) PUSH TOUCH	2	PA; QL; MS; S
HUMIRA PEN (ABBVIE)	2	PA; QL; MS; S
HUMIRA SYRINGE KIT (ABBVIE)	2	PA; QL; MS; S

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
HUMIRA(CF) (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN CROHNS-UC-HS (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN PEDIATRIC UC (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ABBVIE)	2	PA; QL; MS; S
SIMLANDI(CF) AUTOINJECTOR	2	PA; QL; MS; S
YUFLYMA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML	3	QL; S
<b>DMARD - ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITING AGENTS - ARTHRITIS AND PAIN DRUGS</b>		
CIMZIA STARTER KIT	3	PA; QL; MS; S
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	3	PA; QL; MS; S
CYLTEZO(CF)	2	PA; QL; MS; S
CYLTEZO(CF) PEN CROHN'S-UC-HS	2	PA; QL; MS; S
CYLTEZO(CF) PEN PSORIASIS-UV	2	PA; QL; MS; S
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	2	MS; S
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	2	PA; QL; MS; S
ENBREL MINI	2	PA; QL; MS; S
ENBREL SUBCUTANEOUS SOLUTION	2	PA; QL; MS; S
ENBREL SUBCUTANEOUS SYRINGE	2	PA; QL; MS; S
ENBREL SURECLICK	2	PA; QL; MS; S
HADLIMA	2	PA; QL; MS; S
HADLIMA PUSHTOUCH	2	PA; QL; MS; S
HADLIMA(CF)	2	PA; QL; MS; S
HADLIMA(CF) PUSHTOUCH	2	PA; QL; MS; S
HUMIRA PEN (ABBVIE)	2	PA; QL; MS; S
HUMIRA SYRINGE KIT (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN CROHNS-UC-HS (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN PEDIATRIC UC (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ABBVIE)	2	PA; QL; MS; S
SIMLANDI(CF) AUTOINJECTOR	2	PA; QL; MS; S
YUFLYMA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML	3	QL; S
<b>DMARD - ANTIMALARIALS - ARTHRITIS AND PAIN DRUGS</b>		
hydroxychloroquine oral tablet 100 mg, 300 mg, 400 mg	1	QL
hydroxychloroquine oral tablet 200 mg	1	
<b>DMARD - ANTIMETABOLITES - ARTHRITIS AND PAIN DRUGS</b>		
JYLAMVO	3	PA; QL
methotrexate sodium	1	
methotrexate sodium (pf) injection solution	1	
XATMEP	3	PA
<b>DMARD - ANTINFLAMMATORY, SELECT. COSTIMULATION MODULATOR,T-CELL INHIB. - ARTHRITIS AND PAIN DRUGS</b>		
ORENCIA	3	PA; QL; MS; S
ORENCIA CLICKJECT	3	PA; QL; MS; S
<b>DMARD - IMMUNOSUPPRESSIVES - ARTHRITIS AND PAIN DRUGS</b>		
azathioprine oral tablet 50 mg	1	S
cyclophosphamide oral capsule	1	
CYCLOPHOSPHAMIDE ORAL TABLET	3	

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Product Description	Tier	Limits/Restrictions/Notes
cyclosporine modified	1	S
cyclosporine oral capsule	1	S
gengraf	1	S
mycophenolate mofetil	1	S
<b>DMARD - INTERLEUKIN-6 (IL-6) RECEPTOR INHIBITORS, MONOCLONAL ANTIBODY - ARTHRITIS AND PAIN DRUGS</b>		
ACTEMRA ACTPEN	2	PA; QL; MS; S
ACTEMRA SUBCUTANEOUS	2	PA; QL; MS; S
<b>DMARD - JANUS KINASE (JAK) INHIBITORS - ARTHRITIS AND PAIN DRUGS</b>		
OLUMIANT	3	PA; QL; MS; S
RINVOQ	2	PA; QL; MS; S
RINVOQ LQ	2	PA; MS; S
XELJANZ ORAL SOLUTION	2	PA; QL; MS; S
XELJANZ ORAL TABLET 5 MG	2	PA; QL; MS; S
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG	2	PA; QL; MS; S
<b>DMARD - OTHER - ARTHRITIS AND PAIN DRUGS</b>		
minocycline oral capsule	1	
minocycline oral tablet	1	
penicillamine oral tablet (generic for depen)	1	
sulfasalazine	1	
<b>DMARD - PHOSPHODIESTERASE-4 (PDE4) INHIBITORS - ARTHRITIS AND PAIN DRUGS</b>		
OTEZLA	2	PA; QL; MS; S
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47)	2	PA; QL; MS; S
<b>DMARD - PYRIMIDINE SYNTHESIS INHIBITORS - ARTHRITIS AND PAIN DRUGS</b>		
leflunomide	1	
<b>IMMUNOMODULATOR - RHO KINASE INHIBITOR - ARTHRITIS AND PAIN DRUGS</b>		
REZUROCK	3	PA; QL; MS; S
<b>IMMUNOMODULATOR B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITOR MCAB - ARTHRITIS AND PAIN DRUGS</b>		
BENLYSTA SUBCUTANEOUS	3	MS; S
<b>NSAID ANALGESIC, CYCLOOXYGENASE-2 (COX-2) SELECTIVE INHIBITORS - ARTHRITIS AND PAIN DRUGS</b>		
celecoxib	1	QL
<b>NSAID ANALGESICS (COX NON-SPECIFIC) - OTHER - ARTHRITIS AND PAIN DRUGS</b>		
ketorolac oral	1	QL
nabumetone	1	QL
sulindac	1	
<b>NSAID ANALGESICS (COX NON-SPECIFIC) - OXICAM DERIVATIVES - ARTHRITIS AND PAIN DRUGS</b>		
meloxicam oral tablet	1	
piroxicam	1	
<b>NSAID ANALGESICS (COX NON-SPECIFIC) - PHENYLACETIC ACID DERIVATIVES - ARTHRITIS AND PAIN DRUGS</b>		
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium oral	1	
DICLOFENAC SUBMICRONIZED	3	PA; QL

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
<b>NSAID ANALGESICS (COX NON-SPECIFIC) - PROPIONIC ACID DERIVATIVES - ARTHRITIS AND PAIN DRUGS</b>		
ec-naproxen oral tablet, delayed release (dr/ec) 375 mg	1	
flurbiprofen oral tablet 100 mg	1	
ibu	1	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ketoprofen oral capsule 50 mg, 75 mg	1	
naproxen oral tablet	1	
naproxen oral tablet, delayed release (dr/ec) 375 mg	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
oxaprozin oral tablet	1	QL
<b>NSAID ANALGESICS, (COX NON-SPECIFIC) - INDOLE ACETIC ACID DERIVATIVES - ARTHRITIS AND PAIN DRUGS</b>		
etodolac	1	
indomethacin oral capsule	1	
indomethacin oral capsule, extended release	1	
<b>SALICYLATE ANALGESIC AND SEDATIVE COMBINATIONS - ARTHRITIS AND PAIN DRUGS</b>		
butalbital-aspirin-caffeine oral capsule	1	QL
<b>SALICYLATE ANALGESICS - ARTHRITIS AND PAIN DRUGS</b>		
ASPIRIN CHILDRENS	1	QL; Covered in full age 59 and under*
ASPIRIN ORAL TABLET, CHEWABLE	1	QL; Covered in full age 59 and under*
aspirin oral tablet, delayed release (dr/ec) 81 mg	1	QL; Covered in full age 59 and under*
bayer low dose aspirin	1	QL; Covered in full age 59 and under*
CHILDREN'S ASPIRIN	1	QL; Covered in full age 59 and under*
diflunisal	1	
ecotrin low strength	1	QL; Covered in full age 59 and under*
salsalate	1	
<b>ANESTHETICS - DRUGS FOR PAIN AND FEVER</b>		
<b>LOCAL ANESTHETIC - AMIDES - DRUGS FOR SEDATION</b>		
lidocaine (pf) injection solution 10 mg/ml (1%), 20 mg/ml (2%), 5 mg/ml (0.5%)	1	
lidocaine hcl laryngotracheal	1	
<b>ANORECTAL PREPARATIONS - RECTAL PREPARATIONS</b>		
<b>ANAL FISSURE PAIN/TREATMENT AGENTS - NITRATES - RECTAL PREPARATIONS</b>		
nitroglycerin rectal	1	QL
RECTIV	3	QL
<b>ANORECTAL - GLUCOCORTICOID - RECTAL PREPARATIONS</b>		
hemmorex-hc rectal suppository 30 mg	1	
hydrocortisone topical cream with perineal applicator	1	
procto-med hc	1	
proctosol hc topical	1	
proctozone-hc	1	
<b>ANORECTAL - HEMORRHOIDAL RECTAL GLUCOCORTICOID-LOCAL ANESTHETIC COMB - RECTAL PREPARATIONS</b>		
lidocaine hcl-hydrocortison ac rectal cream	1	
lidocaine hcl-hydrocortison ac rectal gel	1	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
<b>ANTIDOTES AND OTHER REVERSAL AGENTS - DRUGS FOR OVERDOSE OR POISONING</b>		
<b>ANTIDOTE - ACETAMINOPHEN POISONING - DRUGS FOR OVERDOSE OR POISONING</b>		
acetylcysteine	1	
<b>CHELATING AGENTS - COPPER - DRUGS FOR OVERDOSE OR POISONING</b>		
penicillamine oral tablet (generic for depen)	1	
trientine oral capsule 250 mg	1	PA
TRIENTINE ORAL CAPSULE 500 MG	3	PA; QL
<b>CHELATING AGENTS - IRON - DRUGS FOR OVERDOSE OR POISONING</b>		
deferasirox oral tablet	1	MS; S
deferasirox oral tablet, dispersible	1	MS; S
<b>CHELATING AGENTS - LEAD POISONING - DRUGS FOR OVERDOSE OR POISONING</b>		
CHEMET	3	
<b>MU-OPIOID RECEPTOR ANTAGONISTS, PERIPHERALLY-ACTING - DRUGS FOR OVERDOSE OR POISONING</b>		
alvimopan	1	
MOVANTIK	2	QL
<b>OPIOID REVERSAL AGENTS - OPIOID ANTAGONISTS - DRUGS FOR OVERDOSE OR POISONING</b>		
KLOXXADO	2	
naloxone injection solution	1	
naloxone injection syringe	1	
naloxone nasal	3	
OPVEE	2	
REXTOVY	2	
ZIMHI	2	
<b>ANTI-INFECTIVE AGENTS</b>		
<b>ANTIRETROVIRAL - CAPSID INHIBITORS</b>		
SUNLENCA 4- 300 MG TABLET	3	QL
SUNLENCA 5- 300 MG TABLET	3	QL
<b>ANTI-INFECTIVE AGENTS - DRUGS FOR INFECTIONS</b>		
<b>AMEBICIDES - DRUGS FOR PARASITES</b>		
paromomycin	1	
<b>AMINOGLYCOSIDE ANTIBIOTIC - ANTIBIOTICS</b>		
ARIKAYCE	3	PA; QL; S
gentamicin injection	1	
neomycin	1	
tobramycin sulfate injection solution	1	
<b>AMINOMETHYLCYCLINE ANTIBIOTICS - ANTIBIOTICS</b>		
NUZYRA ORAL	3	PA; QL
<b>AMINOPENICILLIN ANTIBIOTIC - ANTIBIOTICS</b>		
amoxicillin oral capsule	1	
amoxicillin oral suspension for reconstitution	1	
amoxicillin oral tablet	1	
amoxicillin oral tablet,chewable 125 mg, 250 mg	1	
ampicillin oral capsule 500 mg	1	
<b>AMINOPENICILLIN ANTIBIOTIC - BETA-LACTAMASE INHIBITOR COMBINATIONS - ANTIBIOTICS</b>		
amoxicillin-pot clavulanate	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTHELMINTIC AGENTS - BENZIMIDAZOLE DERIVATIVES - DRUGS FOR PARASITES</b>		
albendazole	1	
<b>ANTHELMINTIC AGENTS - MACROCYCLIC LACTONES - DRUGS FOR PARASITES</b>		
ivermectin oral	1	PA; QL
<b>ANTHELMINTIC AGENTS OTHER - DRUGS FOR PARASITES</b>		
praziquantel	1	
<b>ANTIBACTERIAL FOLATE ANTAGONIST - OTHER COMBINATIONS - ANTIBIOTICS</b>		
sulfamethoxazole-trimethoprim oral	1	
sulfatrim	1	
<b>ANTIBACTERIAL FOLATE ANTAGONIST OTHERS - ANTIBIOTICS</b>		
trimethoprim	1	
<b>ANTIBACTERIAL NITROFURAN DERIVATIVES - ANTIBIOTICS</b>		
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
nitrofurantoin oral suspension 25 mg/5 ml	1	
<b>ANTIBACTERIAL OTHER - ANTIBIOTICS</b>		
fosfomycin tromethamine	1	
<b>ANTIFUNGAL - ALLYLAMINES - DRUGS FOR FUNGUS</b>		
terbinafine hcl oral	1	
<b>ANTIFUNGAL - AMPHOTERIC POLYENE MACROLIDES - DRUGS FOR FUNGUS</b>		
amphotericin b	1	
nystatin oral tablet	1	
<b>ANTIFUNGAL - FLUORINATED PYRIMIDINE-TYPE AGENTS - DRUGS FOR FUNGUS</b>		
flucytosine	1	
<b>ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITOR, TRITERPENOID - ANTIBIOTICS</b>		
BREXAFEMME	3	PA; QL
<b>ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS - ANTIBIOTICS</b>		
BREXAFEMME	3	PA; QL
<b>ANTIFUNGAL - IMIDAZOLES - DRUGS FOR FUNGUS</b>		
ketoconazole oral	1	
<b>ANTIFUNGAL - TETRAZOLES - DRUGS FOR FUNGUS</b>		
VIVJOA	3	PA; QL; S
<b>ANTIFUNGAL - TRIAZOLES - DRUGS FOR FUNGUS</b>		
CRESEMBA ORAL	3	
fluconazole	1	
itraconazole	1	
voriconazole oral suspension for reconstitution	1	
voriconazole oral tablet 200 mg	1	QL
voriconazole oral tablet 50 mg	1	
<b>ANTIFUNGAL OTHER - DRUGS FOR FUNGUS</b>		
griseofulvin microsize	1	
griseofulvin ultramicrosize	1	
<b>ANTI-INFECTIVE IMMUNOLOGIC ADJUVANTS - INTERFERONS - DRUGS FOR INFECTIONS</b>		
ACTIMMUNE	3	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTILEPROTIC - IMMUNOMODULATORS - ANTIBIOTICS</b>		
THALOMID ORAL CAPSULE 100 MG, 50 MG	3	QL; MS; S
<b>ANTILEPROTIC - SULFONE AGENTS - ANTIBIOTICS</b>		
dapsone oral	1	
<b>ANTIMALARIAL COMBINATIONS - DRUGS FOR PARASITES</b>		
atovaquone-proguanil	1	
<b>ANTIMALARIALS - DRUGS FOR PARASITES</b>		
chloroquine phosphate	1	
hydroxychloroquine oral tablet 100 mg, 300 mg, 400 mg	1	QL
hydroxychloroquine oral tablet 200 mg	1	
KRINTAFEL	3	
mefloquine	1	
PRIMAQUINE 26.3 MG TABLET (SANOFI)	3	
primaquine oral tablet 26.3 mg (15 mg base)	1	
pyrimethamine	1	PA; MS; S
quinine sulfate	1	PA
<b>ANTIPROTOZOAL AGENTS - NITROFURAN DERIVATIVES - DRUGS FOR PARASITES</b>		
LAMPIT	3	
<b>ANTIPROTOZOAL AGENTS - NITROIMIDAZOLE DERIVATIVES - DRUGS FOR PARASITES</b>		
BENZNIDAZOLE	3	QL
<b>ANTIPROTOZOAL AGENTS - OTHER - DRUGS FOR PARASITES</b>		
atovaquone	1	
IMPAVIDO	3	PA; QL
<b>ANTIPROTOZOAL AGENTS (ANTIPARASITIC) - 5-NITROTHIAZOLYL DERIVATIVES - DRUGS FOR PARASITES</b>		
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	3	QL
nitazoxanide	1	QL
<b>ANTIPROTOZOAL-ANTIBACTERIAL 1ST GENERATION 2-METHYL-5-NITROIMIDAZOLE - DRUGS FOR INFECTIONS</b>		
metronidazole oral tablet	1	
<b>ANTIPROTOZOAL-ANTIBACTERIAL 2ND GENERATION 2-METHYL-5-NITROIMIDAZOLE - DRUGS FOR INFECTIONS</b>		
tinidazole	1	
<b>ANTIRETROVIRAL - CCR5 CO-RECEPTOR ANTAGONIST - DRUGS FOR VIRAL INFECTIONS</b>		
maraviroc	1	QL; S
SELZENTRY ORAL SOLUTION	2	S
<b>ANTIRETROVIRAL - CD4 ATTACHMENT INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
RUKOBIA	3	S
<b>ANTIRETROVIRAL - HIV-1 FUSION INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
FUZEON SUBCUTANEOUS RECON SOLN	3	S
<b>ANTIRETROVIRAL - HIV-1 INTEGRASE STRAND TRANSFER INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
ISENTRESS HD	2	S
ISENTRESS ORAL POWDER IN PACKET	2	S
ISENTRESS ORAL TABLET	2	QL; S
ISENTRESS ORAL TABLET,CHEWABLE	2	QL; S
TIVICAY ORAL TABLET 50 MG	3	S

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Product Description	Tier	Limits/Restrictions/Notes
TIVICAY PD	3	S
<b>ANTIRETROVIRAL - INTEGRASE INHIBITOR AND NNRTI COMBINATIONS - DRUGS FOR VIRAL INFECTIONS</b>		
JULUCA	2	S
<b>ANTIRETROVIRAL - INTEGRASE INHIBITOR AND NRTI COMBINATIONS - DRUGS FOR VIRAL INFECTIONS</b>		
DOVATO	2	S
<b>ANTIRETROVIRAL - NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIB (NNRTI) - DRUGS FOR VIRAL INFECTIONS</b>		
EDURANT	3	S
efavirenz oral tablet	1	S
etravirine	1	S
INTELENCE ORAL TABLET 25 MG	2	S
nevirapine	1	S
PIFELTRO	3	QL; S
<b>ANTIRETROVIRAL - NUCLEOSIDE AND NUCLEOTIDE ANALOG RTIS COMBINATIONS - DRUGS FOR VIRAL INFECTIONS</b>		
CIMDUO	3	QL; S
DESCOVY	2	S; Covered in full for PrEP only*
emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	S
emtricitabine-tenofovir (tdf) oral tablet 200-300 mg	1	S; Covered in full for PrEP only*
<b>ANTIRETROVIRAL - NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI) - DRUGS FOR VIRAL INFECTIONS</b>		
abacavir	1	S
emtricitabine	1	S
EMTRIVA ORAL SOLUTION	3	S
lamivudine oral solution	1	S
lamivudine oral tablet 150 mg, 300 mg	1	S
zidovudine	1	S
<b>ANTIRETROVIRAL - NUCLEOTIDE ANALOG REVERSE TRANSCRIPTASE INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
tenofovir disoproxil fumarate	1	S
VIREAD ORAL POWDER	3	S
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	3	S
<b>ANTIRETROVIRAL COMBINATIONS - PROTEASE INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
lopinavir-ritonavir	1	S
<b>ANTIRETROVIRAL- NUCLEOSIDE AND NUCLEOTIDE ANALOGS,PROTEASE INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
SYM TUZA	3	QL; S
<b>ANTIRETROVIRAL-INTEGRASE INHIBITOR,NUCLEOSIDE AND NUCLEOTIDE RTIS COMB - DRUGS FOR VIRAL INFECTIONS</b>		
BIKTARVY	2	QL; S
GENVOYA	2	S
STRIBILD	3	QL; S
<b>ANTIRETROVIRAL-NUCLEOSIDE ANALOGS AND INTEGRASE INHIBITOR COMBINATIONS - DRUGS FOR VIRAL INFECTIONS</b>		
TRIUMEQ	2	S
TRIUMEQ PD	2	QL; S
<b>ANTIRETROVIRAL-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI) COMB - DRUGS FOR VIRAL INFECTIONS</b>		
abacavir-lamivudine	1	S

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Product Description	Tier	Limits/Restrictions/Notes
lamivudine-zidovudine	1	S
<b>ANTIRETROVIRAL-NUCLEOSIDE, NUCLEOTIDE ANALOGS AND NON-NUCLEOSIDE RTI - DRUGS FOR VIRAL INFECTIONS</b>		
COMPLERA	3	S
DELSTRIGO	3	QL; S
efavirenz-emtricitabin-tenofov	1	QL; S
efavirenz-lamivu-tenofov disop	1	QL; S
ODEFSEY	3	S
<b>ANTITUBERCULAR - D-ALANINE ANALOGS - ANTIBIOTICS</b>		
cycloserine	1	
<b>ANTITUBERCULAR - ISONICOTINIC ACID DERIVATIVES - ANTIBIOTICS</b>		
isoniazid oral	1	
<b>ANTITUBERCULAR - NIACINAMIDE DERIVATIVES - ANTIBIOTICS</b>		
pyrazinamide	1	
<b>ANTITUBERCULAR - RIFAMYCIN AND DERIVATIVES - ANTIBIOTICS</b>		
rifabutin	1	
rifampin oral	1	
<b>ANTITUBERCULAR AGENTS OTHER - ANTIBIOTICS</b>		
ethambutol	1	
<b>CEPHALOSPORIN ANTIBIOTICS - 1ST GENERATION - ANTIBIOTICS</b>		
cefadroxil oral capsule	1	
cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml	1	
cefadroxil oral tablet	1	
cephalexin	1	
<b>CEPHALOSPORIN ANTIBIOTICS - 2ND GENERATION - ANTIBIOTICS</b>		
cefaclor oral capsule	1	
cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml	1	
cefaclor oral tablet extended release 12 hr	1	
cefprozil	1	
cefuroxime axetil oral tablet	1	
<b>CEPHALOSPORIN ANTIBIOTICS - 3RD GENERATION - ANTIBIOTICS</b>		
cefdinir	1	
cefixime	1	
cefpodoxime	1	
<b>CMV ANTIVIRAL AGENT - NUCLEOSIDE ANALOGS - DRUGS FOR VIRAL INFECTIONS</b>		
valganciclovir	1	
<b>CMV ANTIVIRAL AGENT - PROTEIN KINASE INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
LIVTENCITY	3	QL; S
<b>CMV ANTIVIRAL AGENT - TERMINASE COMPLEX INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
PREVYMIS ORAL	3	
<b>FLUOROQUINOLONE ANTIBIOTICS - ANTIBIOTICS</b>		
BAXDELA ORAL	3	QL
ciprofloxacin	1	
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	1	
levofloxacin oral	1	
moxifloxacin oral	1	

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Product Description	Tier	Limits/Restrictions/Notes
ofloxacin oral tablet 300 mg, 400 mg	1	
<b>GLYCOPEPTIDE ANTIBIOTICS - ANTIBIOTICS</b>		
vancomycin intravenous recon soln 1.75 gram, 2 gram	1	
vancomycin oral	1	
<b>HEPATITIS B TREATMENT- NUCLEOSIDE ANALOGS (ANTIVIRAL) - DRUGS FOR VIRAL INFECTIONS</b>		
entecavir	1	QL
lamivudine oral tablet 100 mg	1	
<b>HEPATITIS B TREATMENT- NUCLEOTIDE ANALOGS (ANTIVIRAL) - DRUGS FOR VIRAL INFECTIONS</b>		
adefovir	1	
tenofovir disoproxil fumarate	1	S
VIREAD ORAL POWDER	3	S
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	3	S
<b>HEPATITIS C - INTERFERONS - DRUGS FOR VIRAL INFECTIONS</b>		
PEGASYS	3	PA; QL; MS; S
<b>HEPATITIS C - NS5A INHIBITOR AND NS3/4A PROTEASE INHIBITOR COMBINATION - DRUGS FOR VIRAL INFECTIONS</b>		
MAVYRET ORAL PELLETS IN PACKET	2	PA; QL; MS; S
MAVYRET ORAL TABLET	2	PA; MS; S
<b>HEPATITIS C - NS5A, NS3/4A PROTEASE, NUCLEO.NS5B POLYMERASE INHIB COMB - DRUGS FOR VIRAL INFECTIONS</b>		
VOSEVI	3	PA; MS; S
<b>HEPATITIS C - NS5B POLYMERASE AND NS5A INHIBITOR COMBINATIONS - DRUGS FOR VIRAL INFECTIONS</b>		
EPCLUSA	2	PA; QL; MS; S
HARVONI	2	PA; QL; MS; S
LEDIPASVIR-SOFOSBUVIR	2	PA; QL; MS; S
SOFOSBUVIR-VELPATASVIR	2	PA; QL; MS; S
<b>HEPATITIS C - NUCLEOS(T)IDE ANALOG NS5B POLYMERASE INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
SOVALDI	3	PA; QL; MS; S
<b>HEPATITIS C - NUCLEOSIDE ANALOGS - DRUGS FOR VIRAL INFECTIONS</b>		
ribavirin oral capsule	1	PA; MS; S
ribavirin oral tablet 200 mg	1	PA; MS; S
<b>HERPES ANTIVIRAL AGENT - PURINE ANALOGS - DRUGS FOR VIRAL INFECTIONS</b>		
acyclovir oral capsule	1	
acyclovir oral suspension 200 mg/5 ml	1	
acyclovir oral tablet	1	
valacyclovir	1	
<b>HERPES ANTIVIRAL AGENT - THYMIDINE ANALOGS - DRUGS FOR VIRAL INFECTIONS</b>		
famciclovir oral tablet 125 mg, 250 mg	1	
famciclovir oral tablet 500 mg	1	QL
<b>INFLUENZA ANTIVIRAL AGENTS - NEURAMINIDASE INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
oseltamivir	1	QL
<b>INFLUENZA ANTIVIRAL AGENTS - PA ENDONUCLEASE INHIBITOR - DRUGS FOR VIRAL INFECTIONS</b>		
XOFLUZA ORAL TABLET 40 MG, 80 MG	3	QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>INFLUENZA-A ANTIVIRAL AGENTS - DRUGS FOR VIRAL INFECTIONS</b>		
rimantadine	1	
<b>LINCOSAMIDE ANTIBIOTICS - ANTIBIOTICS</b>		
clindamycin hcl	1	
clindamycin pediatric	1	
<b>MACROLIDE ANTIBIOTICS - ANTIBIOTICS</b>		
azithromycin oral	1	
clarithromycin	1	
DIFICID	3	
ery-tab	1	
erythrocin (as stearate) oral tablet 250 mg	1	
erythromycin oral	1	
<b>MISC ANTI-INFECTIVE - DRUGS FOR INFECTIONS</b>		
methenamine hippurate	1	
methenamine mandelate	1	
pentamidine inhalation	1	
<b>MISC ANTI-INFECTIVE COMBINATIONS - DRUGS FOR INFECTIONS</b>		
methen-sod phos-meth blue-hyos	1	
urimar-t oral tablet	1	
urogesic-blue	1	
uro-mp	1	
uryl	1	
<b>OXAZOLIDINONE ANTIBIOTICS - ANTIBIOTICS</b>		
linezolid oral suspension for reconstitution	1	
linezolid oral tablet	1	QL
SIVEXTRO ORAL	3	PA; QL
<b>PENICILLIN ANTIBIOTIC - NATURAL - ANTIBIOTICS</b>		
penicillin v potassium	1	
<b>PENICILLIN ANTIBIOTIC - PENICILLINASE-RESISTANT - ANTIBIOTICS</b>		
dicloxacillin	1	
<b>PLEUROMUTILIN ANTIBIOTICS - ANTIBIOTICS</b>		
XENLETA ORAL	3	PA; QL
<b>PROTEASE INHIBITORS (NON-PEPTIDIC) ANTIRETROVIRAL - DRUGS FOR VIRAL INFECTIONS</b>		
APTIVUS	3	S
darunavir	1	S
PREZISTA ORAL SUSPENSION	3	S
<b>PROTEASE INHIBITORS (PEPTIDIC) ANTIRETROVIRAL - DRUGS FOR VIRAL INFECTIONS</b>		
atazanavir	1	S
fosamprenavir	1	S
REYATAZ ORAL POWDER IN PACKET	3	S
ritonavir	1	S
VIRACEPT ORAL TABLET	3	S
<b>RIFAMYCINS AND RELATED DERIVATIVE ANTIBIOTICS - ANTIBIOTICS</b>		
rifabutin	1	
rifampin oral	1	
XIFAXAN ORAL TABLET 200 MG	2	
XIFAXAN ORAL TABLET 550 MG	2	QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>SARS-COV-2 ANTIVIRAL AGENT - MAIN PROTEASE (MPRO) INHIBITORS - DRUGS FOR INFECTIONS</b>		
PAXLOVID	2	QL
<b>SARS-COV-2 ANTIVIRAL AGENT - RNA POLYMERASE INHIBITORS - DRUGS FOR VIRAL INFECTIONS</b>		
LAGEVRIO (EUA)	2	QL
<b>SULFONAMIDE ANTIBIOTIC - ANTIBIOTICS</b>		
sulfadiazine	1	
<b>TETRACYCLINE ANTIBIOTICS - ANTIBIOTICS</b>		
avidoxy	1	
demeclocycline	1	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet 100 mg, 50 mg	1	
doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg	1	
doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg	1	
doxycycline monohydrate oral suspension for reconstitution	1	
doxycycline monohydrate oral tablet	1	
minocycline oral capsule	1	
minocycline oral tablet	1	
mondoxyne nl	1	
morgidox oral capsule 50 mg	1	
NUZYRA ORAL	3	PA; QL
tetracycline oral capsule	1	
<b>ANTINEOPLASTICS</b>		
<b>ANTINEOPLASTIC - AKT (PROTEIN KINASE B (PKB)) INHIBITOR</b>		
TRUQAP	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - GAMMA-SECRETASE INHIBITOR (GSI)</b>		
OGSIVEO	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - JANUS KINASE (JAK), ACVR1/ALK2 INHIBITORS</b>		
OJJAARA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - ORNITHINE DECARBOXYLASE (ODC) INHIBITORS</b>		
IWILFIN	3	PA; QL; S
<b>ANTINEOPLASTIC - PARP INHIBITOR AND ANTIANDROGEN COMBINATIONS</b>		
AKEEGA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC-ISOCITRATE DEHYDROGENASE-1 AND -2 (IDH1 AND IDH2) INHIB</b>		
VORANIGO	3	PA; QL; MS; S
<b>ANTINEOPLASTICS - DRUGS FOR CANCER</b>		
<b>ANTINEOPLASTIC-EPIDERM.GROWTH FACTOR-EGFR (ERBB1),HER-2 (ERBB2)R.INHIB - DRUGS FOR CANCER</b>		
lapatinib	1	PA; QL; MS; S
<b>ANTINEOPLASTIC - CYP17 (17 ALPHA-HYDROXYLASE/C17,20-LYASE) INHIBITOR - DRUGS FOR CANCER</b>		
abiraterone oral tablet 250 mg	1	QL; MS; S
YONSA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - 1ST GENERATION EGFR TYROSINE KINASE INHIBITOR - DRUGS FOR CANCER</b>		
erlotinib	1	PA; QL; MS; S
gefitinib	1	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTINEOPLASTIC - 2ND GENERATION EGFR TYROSINE KINASE INHIBITOR - DRUGS FOR CANCER</b>		
GILOTRIF	3	PA; QL; MS; S
NERLYNX	3	PA; MS; S
VIZIMPRO	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - 3RD GENERATION EGFR TYROSINE KINASE INHIBITOR - DRUGS FOR CANCER</b>		
LAZCLUZE	3	PA; QL; MS; S
TAGRISSO	3	PA; MS; S
<b>ANTINEOPLASTIC - ALKYLATING AGENT - ALKYL SULFONATES - DRUGS FOR CANCER</b>		
MYLERAN	2	
<b>ANTINEOPLASTIC - ALKYLATING AGENT - METHYLHYDRAZINES - DRUGS FOR CANCER</b>		
MATULANE	3	S
<b>ANTINEOPLASTIC - ALKYLATING AGENT - NITROGEN MUSTARDS - DRUGS FOR CANCER</b>		
cyclophosphamide oral capsule	1	
CYCLOPHOSPHAMIDE ORAL TABLET	3	
LEUKERAN	3	
<b>ANTINEOPLASTIC - ALKYLATING AGENT - NITROSOUREAS - DRUGS FOR CANCER</b>		
GLEOSTINE	3	
<b>ANTINEOPLASTIC - ALKYLATING AGENT - TRIAZENES - DRUGS FOR CANCER</b>		
temozolomide	1	MS; S
<b>ANTINEOPLASTIC - ANAPLASTIC LYMPHOMA KINASE (ALK) INHIBITORS - DRUGS FOR CANCER</b>		
ALECENSA	3	PA; MS; S
ALUNBRIG	3	PA; QL; S
LORBRENA	3	PA; QL; MS; S
XALKORI	3	PA; QL; MS; S
ZYKADIA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - ANTIADRENALS - DRUGS FOR CANCER</b>		
LYSODREN	3	S
<b>ANTINEOPLASTIC - ANTIANDROGENS - DRUGS FOR CANCER</b>		
abiraterone oral tablet 250 mg	1	QL; MS; S
bicalutamide	1	
ERLEADA	3	PA; QL; MS; S
nilutamide	1	
NUBEQA	2	PA; QL; MS; S
XTANDI	2	PA; QL; MS; S
YONSA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - ANTIMETABOLITE - FOLIC ACID ANALOGS - DRUGS FOR CANCER</b>		
JYLAMVO	3	PA; QL
methotrexate sodium	1	
methotrexate sodium (pf)	1	
XATMEP	3	PA
<b>ANTINEOPLASTIC - ANTIMETABOLITE - PURINE ANALOGS - DRUGS FOR CANCER</b>		
mercaptopurine	1	

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Product Description	Tier	Limits/Restrictions/Notes
TABLOID	3	
<b>ANTINEOPLASTIC - ANTIMETABOLITE - PYRIMIDINE ANALOGS - DRUGS FOR CANCER</b>		
capecitabine	1	MS; S
cytarabine (pf)	1	
ONUREG	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - ANTIMETABOLITE - UREA DERIVATIVES - DRUGS FOR CANCER</b>		
hydroxyurea	1	
<b>ANTINEOPLASTIC - ANTIMETABOLITES - PYRIMIDINE ANALOG COMBINATIONS - DRUGS FOR CANCER</b>		
LONSURF	3	PA; MS; S
<b>ANTINEOPLASTIC - AROMATASE INHIBITORS - DRUGS FOR CANCER</b>		
anastrozole	1	Covered in full*
exemestane	1	Covered in full*
letrozole	1	
<b>ANTINEOPLASTIC - B-CELL LYMPHOMA-2 (BCL-2) INHIBITORS - DRUGS FOR CANCER</b>		
VENCLEXTA	3	PA; QL; S
VENCLEXTA STARTING PACK	3	PA; QL; S
<b>ANTINEOPLASTIC - BRAF KINASE INHIBITORS - DRUGS FOR CANCER</b>		
BRAFTOVI	3	PA; QL; MS; S
OJEMDA	3	PA; QL; MS; S
TAFINLAR	3	PA; QL; MS; S
ZELBORAF	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - BRUTON'S TYROSINE KINASE (BTK) INHIBITOR - DRUGS FOR CANCER</b>		
BRUKINSA	3	PA; QL; MS; S
CALQUENCE (ACALABRUTINIB MAL)	3	PA; QL; S
IMBRUVICA ORAL CAPSULE	3	PA; QL; S
IMBRUVICA ORAL SUSPENSION	3	PA; QL; MS; S
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	3	PA; QL; S
JAYPIRCA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - CYCLIN-DEPENDENT KINASE (CDK) 4/6 INHIBITORS - DRUGS FOR CANCER</b>		
IBRANCE	3	PA; QL; MS; S
KISQALI	2	PA; QL; MS; S
VERZENIO	2	PA; QL; MS; S
<b>ANTINEOPLASTIC - EPIDERMAL GROWTH FACTOR RECEPTOR-2 (HER2) INHIBITOR - DRUGS FOR CANCER</b>		
TUKYSA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - EPIPODOPHYLLOTOXINS - DRUGS FOR CANCER</b>		
etoposide oral	1	
<b>ANTINEOPLASTIC - EXPORTIN-1 (XPO1) INHIBITORS - DRUGS FOR CANCER</b>		
XPOVIO	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - EZH2 HISTONE METHYLTRANSFERASE (HMT) INHIBITOR - DRUGS FOR CANCER</b>		
TAZVERIK	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - FIBROBLAST GROWTH FACTOR RECEPTOR (FGFR) KINASE INHIB - DRUGS FOR CANCER</b>		
BALVERSA	3	PA; QL; S

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Product Description	Tier	Limits/Restrictions/Notes
LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3), 16 MG/DAY (4 MG X 4), 20 MG/DAY (4 MG X 5)	3	PA; QL; MS; S
PEMAZYRE	3	PA; QL; S
<b>ANTINEOPLASTIC - FMS-LIKE TYROSINE KINASE 3 (FLT3) INHIBITORS - DRUGS FOR CANCER</b>		
VANFLYTA	3	PA; QL; MS; S
XOSPATA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITOR - DRUGS FOR CANCER</b>		
DAURISMO	3	PA; QL; MS; S
ERIVEDGE	3	PA; QL; MS; S
ODOMZO	3	PA; MS; S
<b>ANTINEOPLASTIC - HISTONE DEACETYLASE (HDAC) INHIBITORS - DRUGS FOR CANCER</b>		
ZOLINZA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - HYPOXIA INDUCIBLE FACTOR (HIF) INHIBITORS - DRUGS FOR CANCER</b>		
WELIREG	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - INTERFERONS - DRUGS FOR CANCER</b>		
BESREMI	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - JANUS KINASE (JAK) INHIBITORS - DRUGS FOR CANCER</b>		
JAKAFI	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - JANUS KINASE(JAK),FMS-LIKE TYROSINE KINASE(FLT) INHIB - DRUGS FOR CANCER</b>		
INREBIC	3	PA; QL; MS; S
VONJO	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - KIRSTEN RAT SARCOMA (KRAS) PROTEIN INHIBITOR - DRUGS FOR CANCER</b>		
KRAZATI	3	PA; QL; MS; S
LUMAKRAS ORAL TABLET 120 MG, 320 MG	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - LHRH (GNRH) AGONIST ANALOG PITUITARY SUPPRESSANTS - DRUGS FOR CANCER</b>		
leuprolide subcutaneous kit	1	PA; MS; S
<b>ANTINEOPLASTIC - LHRH (GNRH) ANTAGONIST PITUITARY SUPPRESSANTS - DRUGS FOR CANCER</b>		
ORGOVYX	3	PA; QL; S
<b>ANTINEOPLASTIC - MAST CELL STABILIZERS - DRUGS FOR CANCER</b>		
cromolyn oral	1	
<b>ANTINEOPLASTIC - MEK1 AND MEK2 KINASE INHIBITORS - DRUGS FOR CANCER</b>		
COTELLIC	3	PA; QL; MS; S
KOSELUGO	3	PA; QL; MS; S
MEKINIST	3	PA; QL; MS; S
MEKTOVI	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - MTOR KINASE INHIBITORS - DRUGS FOR CANCER</b>		
everolimus (antineoplastic)	1	PA; QL; MS; S
<b>ANTINEOPLASTIC - MULTIKINASE INHIBITORS - DRUGS FOR CANCER</b>		
CABOMETYX	3	PA; QL; MS; S
COMETRIQ	3	PA; QL; MS; S
ICLUSIG	3	PA; QL; S
sorafenib	1	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
STIVARGA	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - MUTANT ISOCITRATE DEHYDROGENASE 1 (MIDH1) INHIBITORS - DRUGS FOR CANCER</b>		
REZLIDHIA	3	PA; QL; S
TIBSOVO	3	PA; QL; S
<b>ANTINEOPLASTIC - MUTANT ISOCITRATE DEHYDROGENASE 2 (MIDH2) INHIBITORS - DRUGS FOR CANCER</b>		
IDHIFA	3	PA; MS; S
<b>ANTINEOPLASTIC - PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS - DRUGS FOR CANCER</b>		
COPIKTRA	3	PA; QL; S
ZYDELIG	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - PI3K-ALPHA INHIBITORS - DRUGS FOR CANCER</b>		
PIQRAY	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - PI3K-DELTA AND GAMMA INHIBITORS - DRUGS FOR CANCER</b>		
COPIKTRA	3	PA; QL; S
<b>ANTINEOPLASTIC - PI3K-DELTA INHIBITORS - DRUGS FOR CANCER</b>		
ZYDELIG	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS - DRUGS FOR CANCER</b>		
LYNPARZA	3	PA; MS; S
RUBRACA ORAL TABLET 250 MG, 300 MG	3	PA; QL; MS; S
TALZENNA	3	PA; QL; MS; S
ZEJULA ORAL TABLET	2	PA; QL; MS; S
<b>ANTINEOPLASTIC - PROGESTINS - DRUGS FOR CANCER</b>		
megestrol oral tablet	1	
<b>ANTINEOPLASTIC - PROTEASOME ENZYME INHIBITORS - DRUGS FOR CANCER</b>		
NINLARO	3	PA; MS; S
<b>ANTINEOPLASTIC - PROTEIN-TYROSINE KINASE INHIBITORS - DRUGS FOR CANCER</b>		
AUGTYRO ORAL CAPSULE 40 MG	3	PA; QL; MS; S
AYVAKIT	3	PA; QL; S
BOSULIF	3	PA; QL; MS; S
BRUKINSA	3	PA; QL; MS; S
CALQUENCE (ACALABRUTINIB MAL)	3	PA; QL; S
CAPRELSA	3	PA; QL; S
dasatinib	1	PA; QL; MS; S
FOTIVDA	3	PA; QL; S
FRUZAQLA	3	PA; QL; MS; S
imatinib	1	QL; MS; S
IMBRUVICA ORAL CAPSULE	3	PA; QL; S
IMBRUVICA ORAL SUSPENSION	3	PA; QL; MS; S
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	3	PA; QL; S
INLYTA	3	PA; QL; MS; S
JAYPIRCA	3	PA; QL; MS; S
LENVIMA	3	PA; QL; MS; S
OFEV	2	PA; QL; MS; S
pazopanib	1	PA; QL; MS; S
QINLOCK	3	PA; QL; S

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Product Description	Tier	Limits/Restrictions/Notes
ROZLYTREK	3	PA; QL; MS; S
RYDAPT	3	PA; QL; MS; S
SCEMBLIX	3	PA; QL; S
SPRYCEL	3	PA; QL; MS; S
sunitinib malate	1	PA; QL; MS; S
TABRECTA	3	PA; QL; MS; S
TASIGNA	3	PA; QL; MS; S
TEPMETKO	3	PA; QL; S
TURALIO ORAL CAPSULE 125 MG	3	PA; QL; S
<b>ANTINEOPLASTIC - RETINOIDS - DRUGS FOR CANCER</b>		
tretinoin (antineoplastic)	1	
<b>ANTINEOPLASTIC - SELECTIVE ESTROGEN RECEPTOR DEGRADERS (SERDS) - DRUGS FOR CANCER</b>		
ORSERDU	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS) - DRUGS FOR CANCER</b>		
SOLTAMOX	3	PA; QL; Covered in full*
tamoxifen	1	Covered in full*
toremifene	1	
<b>ANTINEOPLASTIC - SELECTIVE INHIBITORS OF NUCLEAR EXPORT (SINE) - DRUGS FOR CANCER</b>		
XPOVIO	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - SELECTIVE RET KINASE INHIBITOR - DRUGS FOR CANCER</b>		
GAVRETO	3	PA; QL; S
RETEVMO ORAL TABLET	3	PA; QL; MS; S
<b>ANTINEOPLASTIC - SELECTIVE RETINOID X RECEPTOR AGONISTS - DRUGS FOR CANCER</b>		
bexarotene oral	1	PA; QL; MS; S
<b>ANTINEOPLASTIC - THALIDOMIDE ANALOGS - DRUGS FOR CANCER</b>		
lenalidomide	1	QL; MS; S
POMALYST	3	PA; QL; MS; S
REVLIMID	2	QL; MS; S
THALOMID ORAL CAPSULE 100 MG, 50 MG	3	QL; MS; S
<b>ANTINEOPLASTIC - TOPOISOMERASE I INHIBITORS - DRUGS FOR CANCER</b>		
HYCAMTIN ORAL	2	QL; MS; S
<b>ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE (TRK) INHIBITOR - DRUGS FOR CANCER</b>		
VITRAKVI	3	PA; QL; MS; S
<b>ANTINEOPLASTIC-PYRIMIDINE ANALOG AND CYTIDINE DEAMINASE INHIBITOR COMB - DRUGS FOR CANCER</b>		
INQOVI	3	PA; QL; MS; S
<b>METHOTREXATE RESCUE AGENTS - DRUGS FOR CANCER</b>		
leucovorin calcium oral	1	
<b>METHOTREXATE RESCUE AGENTS - FOLIC ACID ANTAGONIST TYPE - DRUGS FOR CANCER</b>		
leucovorin calcium oral	1	
<b>URINARY TRACT PROTECTIVE AGENTS USED IN CONJUNCTION WITH CHEMOTHERAPY - DRUGS FOR CANCER</b>		
MESNEX ORAL	3	

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTISEPTICS AND DISINFECTANTS - ANTISEPTICS AND DISINFECTANTS</b>		
<b>ANTISEPTIC - ALCOHOLS - ANTISEPTICS AND DISINFECTANTS</b>		
ALCOHOL 70% PREP PADS	3	
ALCOHOL 70% SWABS MEDIUM	3	
ALCOHOL 70% WIPES	3	
alcohol pads	1	
ALCOHOL PREP PADS TOPICAL PADS, MEDICATED	1	
alcohol swabs topical pads, medicated	1	
ALCOHOL WIPES TOPICAL PADS, MEDICATED	1	
BD ALCOHOL SWABS	3	
CARETOUCH ALCOHOL PREP PAD	3	
CURITY ALCOHOL SWABS	3	
CVS ALCOHOL 70% PREP PADS	3	
EASY COMFORT ALCOHOL PAD	3	
EASY TOUCH ALCOHOL PREP PADS	3	
GNP ALCOHOL SWAB STERILE, TWO PLY	3	
HM ALCOHOL 70% PREP PADS	3	
INCONTROL ALCOHOL PADS	3	
ISOPROPYL ALCOHOL TOPICAL SPRAY, NON-AEROSOL	3	
PHARM CHOICE ALCOHOL PREP PADS	3	
PRO COMFORT ALCOHOL PADS	3	
PURE COMFORT ALCOHOL PADS	3	
RA ISOPROPYL ALCOHOL 70% WIPES	3	
RELION ALCOHOL 70% SWABS	3	
SAPS ALCOHOL 70% PREP PADS	3	
SM ALCOHOL 70% PREP PADS	3	
SURE COMFORT ALCOHOL PREP PADS	3	
SURE-PREP ALCOHOL PREP PADS	3	
SWI ALCOHOL 70% PREP PADS	3	
TRUE COMFORT ALCOHOL PADS	3	
TRUE COMFORT PRO ALCOHOL PADS	3	
ULTILET ALCOHOL SWAB	3	
WEBCOL	3	
<b>DISINFECTANTS - OTHER - ANTISEPTICS AND DISINFECTANTS</b>		
ALCOH-GLOVE	3	
ALCOH-WIPE	3	
<b>BIOLOGICALS</b>		
<b>VACCINE VIRAL - RESPIRATORY SYNCYTIAL VIRUS (RSV)</b>		
ABRYSV0 (PF)	3	QL
AREXVY (PF)	3	QL
MRESVIA (PF)	3	QL
<b>BIOLOGICALS - BIOLOGICAL AGENTS</b>		
<b>ALLERGENIC EXTRACTS - GRASS POLLEN - BIOLOGICAL AGENTS</b>		
GRASTEK	3	QL
ORALAIR SUBLINGUAL	3	QL; S
<b>ALLERGENIC EXTRACTS - MITE EXTRACTS - BIOLOGICAL AGENTS</b>		
ODACTRA	3	QL
<b>ALLERGENIC EXTRACTS - WEED POLLEN - BIOLOGICAL AGENTS</b>		
RAGWITEK	3	QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>HEPATITIS A AND HEPATITIS B VACCINE COMBINATIONS - VACCINES</b>		
TWINRIX (PF)	3	
<b>HEPATITIS A VACCINE - SINGLE AGENTS - VACCINES</b>		
HAVRIX (PF)	3	
VAQTA (PF)	3	
<b>HEPATITIS B VACCINE COMBINATIONS - VACCINES</b>		
PEDIARIX (PF)	3	
VAXELIS (PF)	3	
<b>HEPATITIS B VACCINES - SINGLE AGENTS - VACCINES</b>		
ENGERIX-B (PF)	3	
ENGERIX-B PEDIATRIC (PF)	3	
HEPLISAV-B (PF)	3	
RECOMBIVAX HB (PF)	3	
<b>IMMUNE GLOBULIN - GAMMA GLOBULIN (IGG), HUMAN - BIOLOGICAL AGENTS</b>		
GAMMAGARD LIQUID	3	PA; MS; S
GAMMAGARD S-D (IGA < 1 MCG/ML)	3	PA; MS; S
GAMUNEX-C	3	PA; MS; S
HIZENTRA	3	PA; MS; S
PRIVIGEN	3	PA; MS; S
<b>LIVE VACCINE AND LIVE VIRUS FORMULATIONS - VACCINES</b>		
FLUMIST TRIVALENT 2024-2025	3	QL
M-M-R II (PF)	3	
PRIORIX (PF)	3	
PROQUAD (PF)	3	
ROTARIX ORAL SUSPENSION	3	
ROTATEQ VACCINE	3	
VARIVAX (PF)	3	
<b>PEANUT DESENSITIZATION AGENTS - BIOLOGICAL AGENTS</b>		
PALFORZIA (LEVEL 1)	3	PA; QL; S
PALFORZIA (LEVEL 2)	3	PA; QL; S
PALFORZIA (LEVEL 3)	3	PA; QL; S
PALFORZIA (LEVEL 4)	3	PA; QL; S
PALFORZIA (LEVEL 5)	3	PA; QL; S
PALFORZIA (LEVEL 6)	3	PA; QL; S
PALFORZIA (LEVEL 7)	3	PA; QL; S
PALFORZIA (LEVEL 8)	3	PA; QL; S
PALFORZIA (LEVEL 9)	3	PA; QL; S
PALFORZIA (LEVEL 10)	3	PA; QL; S
PALFORZIA (LEVEL 11 UP-DOSE)	3	PA; QL; S
PALFORZIA INITIAL DOSE	3	PA; QL; S
PALFORZIA LEVEL 11 MAINTENANCE	3	PA; QL; S
<b>TOXOID VACCINE COMBINATIONS - VACCINES</b>		
ADACEL(TDAP ADOLESN/ADULT)(PF)	3	
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE	3	
DAPTACEL (DTAP PEDIATRIC) (PF)	3	
INFANRIX (DTAP) (PF)	3	
KINRIX (PF)	3	
PEDIARIX (PF)	3	

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Product Description	Tier	Limits/Restrictions/Notes
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-48MCG-62DU -10 MCG/0.5ML	3	
QUADRACEL (PF)	3	
TDVAX	3	
TENIVAC (PF)	3	
VAXELIS (PF)	3	
<b>VACCINE BACTERIAL - GRAM NEGATIVE BACILLI (NON-ENTERIC) - VACCINES</b>		
ACTHIB (PF)	3	
PEDVAX HIB (PF)	3	
<b>VACCINE BACTERIAL - GRAM NEGATIVE COCCI - VACCINES</b>		
MENQUADFI (PF)	3	
MENVEO A-C-Y-W-135-DIP (PF)	3	
PENBRAYA (PF)	3	
<b>VACCINE BACTERIAL - GRAM POSITIVE COCCI - VACCINES</b>		
PNEUMOVAX-23 INJECTION SYRINGE	3	
PREVNAR 20 (PF)	3	
VAXNEUVANCE (PF)	3	
<b>VACCINE BACTERIAL - MENINGOCOCCAL GROUP B VACCINES - VACCINES</b>		
BEXSERO	3	
TRUMENBA	3	
<b>VACCINE MIXED COMBINATIONS (BACTERIAL AND VIRAL) - VACCINES</b>		
VAXELIS (PF)	3	
<b>VACCINE VIRAL - COVID-19 (SARS-COV-2) - VACCINES</b>		
COMIRNATY 2024-25 (12Y UP)(PF)	3	
MODERNA COVID 24-25(6M-11Y)PF	3	
NOVAVAX COVID 2024-25(PF)(EUA)	3	
PFIZER COVID 2024-25(5Y-11Y)PF	3	
PFIZER COVID 2024-25(6MO-4Y)PF	3	
SPIKEVAX 2024-2025(12Y UP)(PF)	3	
<b>VACCINE VIRAL - HUMAN PAPILOMAVIRUS (HPV) VACCINES - VACCINES</b>		
GARDASIL 9 (PF)	3	
<b>VACCINE VIRAL - INFLUENZA A AND B - VACCINES</b>		
AFLURIA TRIV 2024-2025	3	QL
AFLURIA TRIV 2024-2025 (PF)	3	QL
FLUAD TRIV 2024-25(65Y UP)(PF)	3	QL
FLUARIX TRIV 2024-2025 (PF)	3	QL
FLUBLOK TRIV 2024-2025 (PF)	3	QL
FLUCELVAX TRIV 2024-2025	3	QL
FLUCELVAX TRIV 2024-2025 (PF)	3	QL
FLULAVAL TRIV 2024-2025 (PF)	3	QL
FLUMIST TRIVALENT 2024-2025	3	QL
FLUZONE HIGH-DOSE TRIV 24-25	3	QL
FLUZONE TRIV 2024-2025	3	QL
FLUZONE TRIV 2024-2025 (PF)	3	QL
<b>VACCINE VIRAL - MEASLES - VACCINES</b>		
M-M-R II (PF)	3	
PRIORIX (PF)	3	
PROQUAD (PF)	3	

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Product Description	Tier	Limits/Restrictions/Notes
<b>VACCINE VIRAL - MUMPS AND RELATED - VACCINES</b>		
M-M-R II (PF)	3	
PRIORIX (PF)	3	
PROQUAD (PF)	3	
<b>VACCINE VIRAL - POLIOMYELITIS - VACCINES</b>		
IPOL	3	
<b>VACCINE VIRAL - ROTAVIRUS - VACCINES</b>		
ROTARIX ORAL SUSPENSION	3	
ROTATEQ VACCINE	3	
<b>VACCINE VIRAL - RUBELLA - VACCINES</b>		
M-M-R II (PF)	3	
PRIORIX (PF)	3	
PROQUAD (PF)	3	
<b>VACCINE VIRAL - VARICELLA - VACCINES</b>		
PROQUAD (PF)	3	
SHINGRIX (PF)	3	
VARIVAX (PF)	3	
<b>VACCINE VIRAL COMBINATIONS - VACCINES</b>		
M-M-R II (PF)	3	
PRIORIX (PF)	3	
PROQUAD (PF)	3	
<b>CARDIOVASCULAR THERAPY AGENTS</b>		
<b>ENDOTHELIN-ANGIOTENSIN RECEPTOR ANTAGONIST</b>		
FILSPARI	3	PA; QL; S
<b>PAH-ENDOTHELIN RECEPTOR ANTAGONIST-SELECTIVE CGMP PDES INHIBITOR COMB</b>		
OPSYNVI	3	PA; QL; MS; S
<b>PULMONARY ANTIHYPERTENSIVE AGENT - ACTIVIN RECEPTOR IIA-FC (ACTRIIA)</b>		
WINREVAIR	3	PA; QL; MS; S
<b>CARDIOVASCULAR THERAPY AGENTS - DRUGS FOR THE HEART</b>		
<b>ACE INHIBITOR AND CALCIUM CHANNEL BLOCKER COMBINATIONS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
amlodipine-benazepril	1	
trandolapril-verapamil	1	QL
<b>ACE INHIBITOR AND DIURETIC COMBINATIONS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
benazepril-hydrochlorothiazide	1	
captopril-hydrochlorothiazide	1	
enalapril-hydrochlorothiazide	1	
fosinopril-hydrochlorothiazide	1	
lisinopril-hydrochlorothiazide	1	
quinapril-hydrochlorothiazide	1	
<b>ACE INHIBITORS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
benazepril	1	
captopril	1	
enalapril maleate oral solution	1	PA; QL
enalapril maleate oral tablet	1	
fosinopril	1	
lisinopril	1	

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Product Description	Tier	Limits/Restrictions/Notes
moexipril	1	
perindopril erbumine	1	
QBRELIS	3	PA; QL
quinapril	1	
ramipril	1	
trandolapril	1	
<b>ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
eplerenone	1	
KERENDIA	2	PA; QL
spironolactone oral tablet	1	
<b>ALPHA-BETA BLOCKERS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
carvedilol	1	
carvedilol phosphate	1	QL
labetalol oral	1	
<b>ANGIOTENSIN II RECEPTOR BLOCKER (ARB)-CALCIUM CHANNEL BLOCKER COMB. - DRUGS FOR HIGH BLOOD PRESSURE</b>		
amlodipine-olmesartan	1	QL
amlodipine-valsartan	1	QL
<b>ANGIOTENSIN II RECEPTOR BLOCKER (ARB)-CALCIUM CHANNEL BLOCKER-DIURETIC - DRUGS FOR HIGH BLOOD PRESSURE</b>		
amlodipine-valsartan-hcthiazid	1	QL
olmesartan-amlodipin-hcthiazid	1	QL
<b>ANGIOTENSIN II RECEPTOR BLOCKER (ARB)-DIURETIC COMBINATIONS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
candesartan-hydrochlorothiazid	1	
irbesartan-hydrochlorothiazide	1	
losartan-hydrochlorothiazide	1	
olmesartan-hydrochlorothiazide	1	
telmisartan-hydrochlorothiazid	1	
valsartan-hydrochlorothiazide	1	
<b>ANGIOTENSIN II RECEPTOR BLOCKER-NEPRILYSIN INHIBITOR COMB. (ARNI) - DRUGS FOR HIGH BLOOD PRESSURE</b>		
ENTRESTO	2	QL
ENTRESTO SPRINKLE	2	QL
<b>ANGIOTENSIN II RECEPTOR BLOCKERS (ARBS) - DRUGS FOR HIGH BLOOD PRESSURE</b>		
candesartan	1	
eprosartan	1	
irbesartan	1	
losartan	1	
olmesartan	1	
telmisartan	1	
valsartan oral tablet	1	
<b>ANTIANGINAL - CORONARY VASODILATORS (NITRATES) - DRUGS FOR ANGINA</b>		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
isosorbide mononitrate	1	
nitroglycerin sublingual	1	
nitroglycerin transdermal patch 24 hour	1	
nitroglycerin translingual	1	QL

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Product Description	Tier	Limits/Restrictions/Notes
nitro-time	1	
<b>ANTIANGINAL AND ANTI-ISCHEMIC AGENTS - DRUGS FOR ANGINA</b>		
VERQUVO	3	PA; QL
<b>ANTIANGINAL AND ANTI-ISCHEMIC AGENTS, NON-HEMODYNAMIC - DRUGS FOR ANGINA</b>		
ranolazine	1	QL
<b>ANTIARRHYTHMIC - CLASS IA - DRUGS FOR ABNORMAL HEART RHYTHMS</b>		
disopyramide phosphate oral capsule	1	
quinidine gluconate oral	1	
quinidine sulfate oral tablet	1	
<b>ANTIARRHYTHMIC - CLASS IB - DRUGS FOR ABNORMAL HEART RHYTHMS</b>		
mexiletine	1	
<b>ANTIARRHYTHMIC - CLASS IC - DRUGS FOR ABNORMAL HEART RHYTHMS</b>		
flecainide	1	
propafenone	1	
<b>ANTIARRHYTHMIC - CLASS II - DRUGS FOR ABNORMAL HEART RHYTHMS</b>		
sotalol af	1	
sotalol oral	1	
SOTYLIZE	3	PA
<b>ANTIARRHYTHMIC - CLASS III - DRUGS FOR ABNORMAL HEART RHYTHMS</b>		
amiodarone oral	1	
dofetilide	1	
MULTAQ	2	QL
pacerone oral tablet 100 mg, 200 mg, 400 mg	1	
<b>ANTIARRHYTHMIC - CLASS IV - DRUGS FOR ABNORMAL HEART RHYTHMS</b>		
verapamil oral tablet	1	
<b>ANTIHYPERTENSIVE - ATP-CITRATE LYASE (ACLY) INHIBITOR - DRUGS FOR CHOLESTEROL</b>		
NEXLETOL	3	PA; QL
<b>ANTIHYPERTENSIVE - BILE ACID SEQUESTRANTS - DRUGS FOR CHOLESTEROL</b>		
cholestyramine (with sugar)	1	
cholestyramine light	1	
colesevelam	1	
colestipol	1	
prevalite	1	
<b>ANTIHYPERTENSIVE - FIBRIC ACID DERIVATIVES - DRUGS FOR CHOLESTEROL</b>		
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	1	
fenofibrate nanocrystallized	1	QL
fenofibrate oral tablet 160 mg	1	QL
fenofibrate oral tablet 54 mg	1	
fenofibric acid (choline)	1	QL
gemfibrozil	1	
<b>ANTIHYPERTENSIVE - HMG COA REDUCTASE INHIBITORS (STATINS) - DRUGS FOR CHOLESTEROL</b>		
atorvastatin oral tablet 10 mg, 20 mg	1	Covered in full age 40-75*
atorvastatin oral tablet 40 mg, 80 mg	1	

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Product Description	Tier	Limits/Restrictions/Notes
lovastatin oral tablet 10 mg, 20 mg	1	Covered in full age 40-75*
lovastatin oral tablet 40 mg	1	QL; Covered in full age 40-75*
pravastatin	1	Covered in full age 40-75*
rosuvastatin oral tablet 10 mg, 5 mg	1	QL; Covered in full age 40-75*
rosuvastatin oral tablet 20 mg, 40 mg	1	QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	QL; Covered in full age 40-75*
simvastatin oral tablet 80 mg	1	QL
<b>ANTIHYPERLIPIDEMIC - NICOTINIC ACID DERIVATIVES - DRUGS FOR CHOLESTEROL</b>		
niacin oral tablet extended release 24 hr	1	QL
<b>ANTIHYPERLIPIDEMIC - OMEGA-3 FATTY ACID TYPE - DRUGS FOR CHOLESTEROL</b>		
icosapent ethyl	1	QL
omega-3 acid ethyl esters	1	QL
VASCEPA	2	QL
<b>ANTIHYPERLIPIDEMIC - PCSK9 INHIBITOR, MONOCLONAL ANTIBODY (MAB) - DRUGS FOR CHOLESTEROL</b>		
REPATHA PUSHTRONEX	2	QL
REPATHA SURECLICK	2	QL
REPATHA SYRINGE	2	QL
<b>ANTIHYPERLIPIDEMIC - PCSK9 INHIBITORS - DRUGS FOR CHOLESTEROL</b>		
REPATHA PUSHTRONEX	2	QL
REPATHA SURECLICK	2	QL
REPATHA SYRINGE	2	QL
<b>ANTIHYPERLIPIDEMIC - SELECTIVE CHOLESTEROL ABSORPTION INHIBITOR - DRUGS FOR CHOLESTEROL</b>		
ezetimibe	1	
<b>ANTIHYPERLIPIDEMIC- ATP-CITRATE LYASE AND CHOLESTEROL ABSORPTION INHIB - DRUGS FOR CHOLESTEROL</b>		
NEXLIZET	3	PA; QL
<b>ANTIHYPERLIPIDEMIC-HMG COA REDUCT INHIB AND CHOLESTEROL ABSORP INHIBIT - DRUGS FOR CHOLESTEROL</b>		
EZETIMIBE-ROSUVASTATIN	2	
ezetimibe-simvastatin	1	
ROSZET	2	
<b>ANTIHYPERLIPIDEMIC-MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP)INHIB - DRUGS FOR CHOLESTEROL</b>		
JUXTAPID	3	PA; QL; MS; S
<b>BETA BLOCKERS CARDIAC SELECTIVE - DRUGS FOR HIGH BLOOD PRESSURE</b>		
atenolol	1	
betaxolol oral	1	
bisoprolol fumarate	1	
KAPSPARGO SPRINKLE	3	
metoprolol succinate	1	
metoprolol tartrate oral	1	
nebivolol	1	QL
<b>BETA BLOCKERS CARDIAC SELECTIVE, INTRINSIC SYMPATHOMIMETIC ACTIVITY - DRUGS FOR HIGH BLOOD PRESSURE</b>		
acebutolol	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>BETA BLOCKERS NON-CARDIAC SELECT., INTRINSIC SYMPATHOMIMETIC ACTIVITY - DRUGS FOR HIGH BLOOD PRESSURE</b>		
pindolol	1	
<b>BETA BLOCKERS NON-CARDIAC SELECTIVE - DRUGS FOR HIGH BLOOD PRESSURE</b>		
nadolol	1	
propranolol oral	1	
sotalol af	1	
sotalol oral	1	
SOTYLIZE	3	PA
timolol maleate oral	1	
<b>BRADYKININ B2 RECEPTOR ANTAGONISTS - DRUGS FOR THE HEART</b>		
icatibant	1	PA; QL; S
sajazir	1	PA; QL; MS; S
<b>CALCIUM CHANNEL BLOCKERS - BENZOTHIAZEPINES - DRUGS FOR HIGH BLOOD PRESSURE</b>		
cartia xt oral capsule,extended release 24hr 120 mg, 240 mg, 300 mg	1	
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 180 MG	1	
diltiazem hcl oral capsule,ext.rel 24h degradable	1	
diltiazem hcl oral capsule,extended release 12 hr	1	
diltiazem hcl oral capsule,extended release 24 hr	1	
diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg	1	
diltiazem hcl oral tablet	1	
diltiazem hcl oral tablet extended release 24 hr	1	
dilt-xr	1	
tiadyt er	1	
<b>CALCIUM CHANNEL BLOCKERS - DIHYDROPYRIDINES - CEREBROVASCULAR SPECIFIC - DRUGS FOR HIGH BLOOD PRESSURE</b>		
nimodipine oral capsule	1	
<b>CALCIUM CHANNEL BLOCKERS - DIHYDROPYRIDINES - DRUGS FOR HIGH BLOOD PRESSURE</b>		
amlodipine	1	
felodipine	1	
isradipine	1	
nifedipine	1	
<b>CALCIUM CHANNEL BLOCKERS - PHENYLALKYLAMINES - DRUGS FOR HIGH BLOOD PRESSURE</b>		
verapamil oral	1	
<b>CARDIAC MYOSIN INHIBITOR - DRUGS FOR THE HEART</b>		
CAMZYOS	3	PA; QL; MS; S
<b>CARDIAC SELECTIVE BETA BLOCKER-THIAZIDE DIURETIC AND RELATED COMB. - DRUGS FOR HIGH BLOOD PRESSURE</b>		
atenolol-chlorthalidone	1	
bisoprolol-hydrochlorothiazide	1	
metoprolol ta-hydrochlorothiaz	1	
<b>CARDIOVASCULAR SYMPATHOMIMETIC - ANAPHYLAXIS THERAPY SINGLE AGENTS - DRUGS FOR SERIOUS ALLERGIC REACTION</b>		
AUVI-Q	3	QL
epinephrine injection auto-injector	1	QL
epinephrine injection solution	1	
NEFFY	3	QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>CARDIOVASCULAR SYMPATHOMIMETICS - DRUGS FOR SERIOUS ALLERGIC REACTION</b>		
droxidopa oral capsule 100 mg	1	PA; QL; MS; S
droxidopa oral capsule 200 mg, 300 mg	1	PA; MS; S
epinephrine injection solution	1	
midodrine	1	
<b>CENTRAL ALPHA-2 AGONISTS-THIAZIDE DIURETIC AND RELATED COMB. - DRUGS FOR HIGH BLOOD PRESSURE</b>		
methyldopa-hydrochlorothiazide	1	
<b>CENTRAL ALPHA-2 RECEPTOR AGONISTS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
clonidine	1	QL
clonidine hcl oral tablet	1	
guanfacine oral tablet	1	
methyldopa	1	
<b>DIGITALIS GLYCOSIDES - DRUGS FOR THE HEART</b>		
digoxin oral solution	1	
digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)	1	
<b>DIRECT ACTING VASODILATORS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
hydralazine oral	1	
minoxidil oral	1	
<b>DIURETIC - ALDOSTERONE RECEPTOR ANTAGONIST, NON-SELECTIVE - DRUGS FOR HIGH BLOOD PRESSURE</b>		
spironolactone oral tablet	1	
<b>DIURETIC - ALDOSTERONE RECEPTOR ANTAGONIST, SELECTIVE - DRUGS FOR HIGH BLOOD PRESSURE</b>		
eplerenone	1	
<b>DIURETIC - CARBONIC ANHYDRASE INHIBITORS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
acetazolamide	1	
dichlorphenamide	1	PA; MS; S
methazolamide	1	
<b>DIURETIC - LOOP - DRUGS FOR HIGH BLOOD PRESSURE</b>		
bumetanide oral	1	
ethacrynic acid	1	
furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)	1	
furosemide oral tablet	1	
torseamide oral	1	
<b>DIURETIC - POTASSIUM SPARING - DRUGS FOR HIGH BLOOD PRESSURE</b>		
amiloride	1	
<b>DIURETIC - POTASSIUM SPARING-THIAZIDE AND RELATED COMBINATIONS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
amiloride-hydrochlorothiazide	1	
spironolacton-hydrochlorothiaz	1	
triamterene-hydrochlorothiazid	1	
<b>DIURETIC - SELECTIVE ARGININE VASOPRESSIN V2 RECEPTOR ANTAGONISTS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
tolvaptan	1	QL; MS; S
<b>DIURETIC - THIAZIDES AND RELATED - DRUGS FOR HIGH BLOOD PRESSURE</b>		
chlorthalidone oral tablet 25 mg, 50 mg	1	
hydrochlorothiazide	1	

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Product Description	Tier	Limits/Restrictions/Notes
indapamide	1	
metolazone	1	
<b>HYPERPOLARIZATION-ACTIVATED CYCLIC NUCLEOTIDE-GATED CHANNEL INHIBITORS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
CORLANOR ORAL SOLUTION	3	QL; S
ivabradine	1	QL
<b>NON-CARDIAC SELECTIVE BETA BLOCKER-THIAZIDE DIURETIC AND RELATED COMB. - DRUGS FOR HIGH BLOOD PRESSURE</b>		
propranolol-hydrochlorothiazid	1	
<b>PAH AGENTS - SELECTIVE PROSTACYCLIN RECEPTOR (IP) AGONISTS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
UPTRAVI ORAL	3	PA; QL; MS; S
<b>PERIPHERAL ALPHA-1 RECEPTOR BLOCKERS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
doxazosin	1	
phenoxybenzamine	1	
prazosin	1	
terazosin	1	
<b>PLASMA KALLIKREIN INHIBITOR AGENTS, RECOMBINANT MONOCLONAL ANTIBODY - DRUGS FOR THE HEART</b>		
TAKHZYRO	2	PA; QL; MS; S
<b>PLASMA KALLIKREIN INHIBITOR AGENTS, SMALL MOLECULE - DRUGS FOR THE HEART</b>		
ORLADEYO	3	PA; QL; S
<b>PULMONARY ANTIHYPERTENSIVE AGENTS - PROSTACYCLIN-TYPE - DRUGS FOR HIGH BLOOD PRESSURE</b>		
ORENITRAM	3	PA; MS; S
ORENITRAM MONTH 1 TITRATION KT	3	PA; MS; S
ORENITRAM MONTH 2 TITRATION KT	3	PA; MS; S
ORENITRAM MONTH 3 TITRATION KT	3	PA; MS; S
TYVASO	3	PA; QL; MS; S
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16(112)-32(112) -48(28) MCG, 32 MCG, 48 MCG, 64 MCG	3	PA; QL; MS; S
TYVASO INSTITUTIONAL START KIT	3	PA; QL; MS; S
TYVASO REFILL KIT	3	PA; QL; MS; S
TYVASO STARTER KIT	3	PA; QL; MS; S
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 20 MCG/ML	3	PA; QL; MS; S
<b>PULMONARY ANTIHYPERTENSIVE AGENTS-SOLUBLE GUANYLATE CYCLASE STIMULATOR - DRUGS FOR HIGH BLOOD PRESSURE</b>		
ADEMPAS	3	PA; QL; MS; S
<b>PULMONARY ARTERIAL HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
ambrisentan	1	PA; QL; MS; S
bosentan	1	PA; QL; MS; S
OPSUMIT	3	PA; QL; MS; S
<b>PULMONARY ARTERIAL HYPERTENSION - SELECTIVE CGMP-PDE5 INHIBITORS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
alyq	1	PA; QL; S
LIQREV	3	PA; QL; MS; S
sildenafil (pulm.hypertension) oral	1	PA; QL; MS; S
tadalafil (pulm. hypertension)	1	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>RENIN INHIBITOR, DIRECT - DRUGS FOR HIGH BLOOD PRESSURE</b>		
aliskiren	1	QL
<b>VASODILATOR COMBINATIONS - DRUGS FOR HIGH BLOOD PRESSURE</b>		
isosorbide-hydralazine	1	QL
<b>CENTRAL NERVOUS SYSTEM AGENTS - DRUGS FOR THE NERVOUS SYSTEM</b>		
<b>AGENTS TO TREAT EPISODIC CLUSTER HEADACHES - DRUGS FOR MIGRAINE HEADACHES</b>		
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3)	2	PA; QL
<b>ANTI-ANXIETY AGENT - ANTIHISTAMINE TYPE - DRUGS FOR ANXIETY</b>		
hydroxyzine hcl oral solution 10 mg/5 ml	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate	1	
<b>ANTI-ANXIETY AGENT - BENZODIAZEPINES - DRUGS FOR ANXIETY</b>		
alprazolam intensol	1	
alprazolam oral tablet	1	
alprazolam oral tablet extended release 24 hr	1	
chlordiazepoxide hcl	1	
clonazepam	1	
clorazepate dipotassium	1	
diazepam intensol	1	
diazepam oral	1	
lorazepam intensol	1	
lorazepam oral concentrate	1	
lorazepam oral tablet	1	
LOREEV XR	3	PA; QL
oxazepam	1	
<b>ANTI-ANXIETY AGENT - NON-BENZODIAZEPINE - DRUGS FOR ANXIETY</b>		
buspirone	1	
<b>ANTICONVULSANT - BARBITURATES AND DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
phenobarbital	1	
PRIMIDONE ORAL TABLET 125 MG	3	
primidone oral tablet 250 mg, 50 mg	1	
<b>ANTICONVULSANT - BENZODIAZEPINES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
clobazam oral suspension	1	
clobazam oral tablet	1	QL
clonazepam	1	
diazepam rectal	1	QL
LIBERVANT	3	QL
NAYZILAM	3	QL
VALTOCO	3	QL
<b>ANTICONVULSANT - CANNABINOID TYPE - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
EPIDIOLEX	3	PA; QL; MS; S
<b>ANTICONVULSANT - CARBAMATES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
felbamate	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTICONVULSANT - CARBOXYLIC ACID DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
divalproex	1	
valproic acid	1	
valproic acid (as sodium salt)	1	
<b>ANTICONVULSANT - FUNCTIONALIZED AMINO ACID - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
lacosamide oral	1	QL
MOTPOLY XR	3	PA; QL
<b>ANTICONVULSANT - GABA ANALOGS - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
gabapentin oral capsule	1	
gabapentin oral solution	1	
gabapentin oral tablet 600 mg, 800 mg	1	
pregabalin oral capsule	1	
pregabalin oral solution	1	QL
<b>ANTICONVULSANT - GABA RE-UPTAKE INHIBITOR, NIPECOTIC ACID DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
tiagabine	1	
<b>ANTICONVULSANT - GABA TRANSAMINASE (GABA-T) INHIBITOR - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
vigabatrin	1	PA; QL; MS; S
vigadrone	1	PA; QL; S
VIGAFYDE	3	QL; S
<b>ANTICONVULSANT - HYDANTOINS - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
phenytoin oral suspension 125 mg/5 ml	1	
phenytoin oral tablet, chewable	1	
phenytoin sodium extended	1	
<b>ANTICONVULSANT - IMINOSTILBENE DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
carbamazepine oral capsule, er multiphase 12 hr	1	
carbamazepine oral suspension	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet extended release 12 hr	1	
carbamazepine oral tablet, chewable 100 mg	1	
epitol	1	
oxcarbazepine oral suspension	1	
oxcarbazepine oral tablet	1	
<b>ANTICONVULSANT - MONOSACCHARIDE DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
EPRONTIA	3	QL
topiramate oral capsule, sprinkle	1	
topiramate oral capsule, sprinkle, er 24hr	1	QL
topiramate oral tablet	1	
<b>ANTICONVULSANT - NEUROACTIVE STEROID GABA-A RECEPTOR MODULATOR - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
ZTALMY	3	PA; QL; S
<b>ANTICONVULSANT - PHENYLTRIAZINE DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
lamotrigine oral tablet	1	

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Product Description	Tier	Limits/Restrictions/Notes
lamotrigine oral tablet disintegrating, dose pk	1	
lamotrigine oral tablet extended release 24hr	1	
lamotrigine oral tablet, chewable dispersible	1	
lamotrigine oral tablet, disintegrating	1	QL
lamotrigine oral tablets, dose pack 25 mg (35)	1	
lamotrigine oral tablets, dose pack 25 mg (42) -100 mg (7), 25 mg (84) -100 mg (14)	1	QL
subvenite	1	
subvenite starter (blue) kit	1	
subvenite starter (green) kit	1	QL
subvenite starter (orange) kit	1	QL
<b>ANTICONVULSANT - PYRROLIDINE DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
levetiracetam oral tablet extended release 24 hr	1	QL
roweepra oral tablet 500 mg	1	
<b>ANTICONVULSANT - SUCCINIMIDES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
ethosuximide	1	
<b>ANTICONVULSANT - SULFONAMIDE DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
zonisamide	1	
<b>ANTICONVULSANT - TRIAZOLE DERIVATIVES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
rufinamide oral suspension	1	
<b>ANTICONVULSANT OTHERS - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
DIACOMIT	3	PA; QL; S
FINTEPLA	3	PA; QL; S
<b>ANTIDEPRESSANT - ALPHA-2 RECEPTOR ANTAGONISTS (NASSA) - DRUGS FOR DEPRESSION</b>		
mirtazapine	1	
<b>ANTIDEPRESSANT - MAO INHIBITOR NONSELECTIVE AND IRREVERSIBLE-TYPES A,B - DRUGS FOR DEPRESSION</b>		
phenelzine	1	
tranylcypromine	1	
<b>ANTIDEPRESSANT - NDMA RECEPTOR ANTAGONIST AND NDRI COMBINATIONS - DRUGS FOR DEPRESSION</b>		
AUVELITY	3	PA; QL
<b>ANTIDEPRESSANT - NEUROACTIVE STEROID GABA-A RECEPTOR MODULATOR - DRUGS FOR DEPRESSION</b>		
ZURZUVAE	3	PA; QL; S
<b>ANTIDEPRESSANT - SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS) - DRUGS FOR DEPRESSION</b>		
citalopram oral solution	1	
citalopram oral tablet	1	QL
escitalopram oxalate	1	
fluoxetine oral capsule	1	
fluoxetine oral capsule, delayed release(dr/ec)	1	QL
fluoxetine oral solution	1	
fluoxetine oral tablet	1	

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Product Description	Tier	Limits/Restrictions/Notes
fluvoxamine oral capsule,extended release 24hr	1	QL
fluvoxamine oral tablet	1	
paroxetine hcl oral tablet	1	
paroxetine hcl oral tablet extended release 24 hr	1	QL
sertraline oral concentrate	1	
sertraline oral tablet	1	
<b>ANTIDEPRESSANT - SEROTONIN-2 ANTAGONIST-REUPTAKE INHIBITORS (SARIS) - DRUGS FOR DEPRESSION</b>		
nefazodone oral tablet 100 mg, 50 mg	1	QL
nefazodone oral tablet 150 mg, 200 mg, 250 mg	1	
trazodone	1	
<b>ANTIDEPRESSANT - SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS) - DRUGS FOR DEPRESSION</b>		
desvenlafaxine succinate	1	QL
duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg	1	QL
venlafaxine oral capsule,extended release 24hr	1	QL
venlafaxine oral tablet	1	
<b>ANTIDEPRESSANT - SSRI AND 5HT1A PARTIAL AGONIST - DRUGS FOR DEPRESSION</b>		
vilazodone	1	QL
<b>ANTIDEPRESSANT - TRICYCLIC AND ANTIPSYCHOTIC, PHENOTHIAZINE COMB - DRUGS FOR DEPRESSION</b>		
perphenazine-amitriptyline	1	
<b>ANTIDEPRESSANT - TRICYCLIC-BENZODIAZEPINE COMBINATIONS - DRUGS FOR DEPRESSION</b>		
amitriptyline-chlordiazepoxide	1	
<b>ANTIDEPRESSANT-NOREPINEPHRINE AND DOPAMINE REUPTAKE INHIBITORS (NDRIS) - DRUGS FOR DEPRESSION</b>		
bupropion hcl oral tablet	1	
bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg	1	QL
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	3	QL
bupropion hcl oral tablet sustained-release 12 hr	1	QL
<b>ANTIDEPRESSANT-TRICYCLICS AND RELATED (NON-SELECT REUPTAKE INHIBITORS) - DRUGS FOR DEPRESSION</b>		
amitriptyline	1	
amoxapine	1	
clomipramine	1	PA
desipramine	1	
doxepin oral capsule	1	
doxepin oral concentrate	1	
imipramine hcl	1	
nortriptyline	1	
protriptyline	1	
trimipramine	1	
<b>ANTIPARKINSON - DOPAMINERGIC-PERIPH COMT-DOPA-DECARBOXYLASE INHIB COMB - DRUGS FOR PARKINSON</b>		
carbidopa-levodopa-entacapone	1	
<b>ANTIPARKINSON - DOPAMINERG-PERIPHERAL DOPA-DECARBOXYLASE INHIBIT COMB - DRUGS FOR PARKINSON</b>		
carbidopa-levodopa	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTIPARKINSON ADJUVANT - CENTRAL/PERIPHERAL COMT INHIBITORS - DRUGS FOR PARKINSON</b>		
tolcapone	1	
<b>ANTIPARKINSON ADJUVANT - PERIPHERAL COMT INHIBITORS - DRUGS FOR PARKINSON</b>		
entacapone	1	
<b>ANTIPARKINSON THERAPY - ANTICHOLINERGIC AGENTS - DRUGS FOR PARKINSON</b>		
benztropine oral	1	
trihexyphenidyl	1	
<b>ANTIPARKINSON THERAPY - DOPAMINE PRECURSORS - DRUGS FOR PARKINSON</b>		
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE	3	PA; QL; S
<b>ANTIPARKINSON THERAPY - ERGOT ALKALOIDS AND DERIVATIVES - DRUGS FOR PARKINSON</b>		
bromocriptine	1	
<b>ANTIPARKINSON THERAPY - MONOAMINE OXIDASE INHIBITOR(MAO-B) - DRUGS FOR PARKINSON</b>		
rasagiline	1	QL
selegiline hcl	1	
<b>ANTIPARKINSON THERAPY - NON-ERGOT DOPAMINE AGONIST AGENTS - DRUGS FOR PARKINSON</b>		
amantadine hcl	1	
GOCOVRI	3	PA; QL; S
OSMOLEX ER ORAL TABLET, IR - ER, BIPHASIC 24HR 129 MG	3	PA; QL; S
pramipexole oral tablet	1	
ropinirole oral tablet	1	
ropinirole oral tablet extended release 24 hr	1	QL
<b>ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG-BENZISOTHIAZOLONES - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
lurasidone	1	QL
ziprasidone hcl	1	
<b>ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG-BENZISOXAZOLE DERIV - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
INVEGA HAFYERA	3	
INVEGA SUSTENNA	3	
INVEGA TRINZA	3	
paliperidone	1	QL
risperidone microspheres	1	
risperidone oral solution	1	
risperidone oral tablet	1	
RYKINDO	3	QL
UZEDY	3	QL
<b>ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG-DIBENZODIAZEPINE DER - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
clozapine oral tablet	1	
<b>ANTIPSYCHOTIC - BUTYROPHENONE DERIVATIVES - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
HALDOL DECANOATE	3	
haloperidol	1	
haloperidol decanoate	1	
haloperidol lactate oral	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTIPSYCHOTIC - DIBENZOXAZEPINE DERIVATIVES - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
loxapine succinate	1	
<b>ANTIPSYCHOTIC - DIHYDROINDOLONES - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
molindone	1	
<b>ANTIPSYCHOTIC - DIPHENYLBUTYLPIPERIDINE DERIVATIVES - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
pimozide	1	
<b>ANTIPSYCHOTIC - PHENOTHIAZINES, ALIPHATIC - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
chlorpromazine	1	
<b>ANTIPSYCHOTIC - PHENOTHIAZINES, PIPERAZINE - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
fluphenazine decanoate	1	
fluphenazine hcl	1	
perphenazine	1	
prochlorperazine maleate	1	
trifluoperazine	1	
<b>ANTIPSYCHOTIC - PHENOTHIAZINES, PIPERIDINE - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
thioridazine	1	
<b>ANTIPSYCHOTIC - THIOXANTHENES - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
thiothixene	1	
<b>ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG-DIBENZOTHIAZEPINE DER - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 50 mg	1	
QUETIAPINE ORAL TABLET 150 MG	3	
quetiapine oral tablet 400 mg	1	QL
quetiapine oral tablet extended release 24 hr	1	QL
<b>ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG-THIENOBENZODIAZEPINES - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
LYBALVI	3	PA; QL
olanzapine oral	1	
ZYPREXA RELPREVV	3	
<b>ANTIPSYCHOTIC-ATYP SELECTIVE SEROTONIN 5-HT2A INVERSE AGONISTS (SSIA) - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
NUPLAZID	3	PA; QL; MS; S
<b>ANTIPSYCHOTIC-ATYPICAL,D2 RECEPTOR PARTIAL AGONIST-5HT SEROTONIN MIXED - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
ABILIFY ASIMTUFI	3	QL
ABILIFY MAINTENA	3	
aripiprazole oral solution	1	QL
aripiprazole oral tablet	1	QL
ARISTADA INITIO	3	QL
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 1,064 MG/3.9 ML	3	QL
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 441 MG/1.6 ML, 662 MG/2.4 ML, 882 MG/3.2 ML	3	
<b>ANTIPSYCHOTICS,ATYPICAL,DOPAMINE,SEROTONIN ANTAG AND OPIOID ANTAG COMB - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
LYBALVI	3	PA; QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>ATTENTION DEFICIT-HYPERACT. DISORDER (ADHD)- ALPHA-2 RECEPTOR AGONIST - DRUGS FOR ATTENTION DEFICIT DISORDER</b>		
clonidine hcl oral tablet extended release 12 hr	1	QL
guanfacine oral tablet extended release 24 hr	1	QL
<b>ATTENTION DEFICIT-HYPERACTIVITY (ADHD) THERAPY, STIMULANT-TYPE - DRUGS FOR ATTENTION DEFICIT DISORDER</b>		
ADDERALL XR	3	QL
ADZENYS XR-ODT	3	PA; QL
CONCERTA	3	QL
COTEMPLA XR-ODT	3	PA
dexmethylphenidate oral capsule,er biphasic 50-50	1	QL
dexmethylphenidate oral tablet	1	
dextroamphetamine sulfate oral capsule, extended release	1	
dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	
dextroamphetamine-amphetamine oral capsule,extended release 24hr	1	QL
dextroamphetamine-amphetamine oral tablet	1	
DYANAVEL XR ORAL SUSPEN, IR - ER, BIPHASIC 24HR	3	PA; QL
lisdexamfetamine	1	QL
methylphenidate hcl oral capsule, er biphasic 30-70	1	QL
methylphenidate hcl oral capsule,er biphasic 50-50	1	QL
methylphenidate hcl oral solution	1	
methylphenidate hcl oral tablet	1	
methylphenidate hcl oral tablet extended release	1	
methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg	1	QL
methylphenidate hcl oral tablet,chewable	1	
QUILLICHEW ER	3	PA; QL
QUILLIVANT XR	3	PA; QL
<b>ATTENTION DEFICIT-HYPERACTIVITY DISORDER (ADHD) THERAPY, NRI-TYPE - DRUGS FOR ATTENTION DEFICIT DISORDER</b>		
atomoxetine	1	
QELBREE	3	PA; QL
<b>BENZODIAZEPINES - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
alprazolam intensol	1	
alprazolam oral tablet	1	
alprazolam oral tablet extended release 24 hr	1	
amitriptyline-chlordiazepoxide	1	
chlordiazepoxide hcl	1	
clobazam oral suspension	1	
clobazam oral tablet	1	QL
clonazepam	1	
clorazepate dipotassium	1	
diazepam intensol	1	
diazepam oral	1	
diazepam rectal	1	QL
estazolam	1	
flurazepam	1	
LIBERVANT	3	QL
lorazepam intensol	1	

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Product Description	Tier	Limits/Restrictions/Notes
lorazepam oral concentrate	1	
lorazepam oral tablet	1	
LOREEV XR	3	PA; QL
midazolam oral syrup 2 mg/ml	1	
NAYZILAM	3	QL
oxazepam	1	
temazepam	1	
triazolam	1	
VALTOCO	3	QL
<b>BIPOLAR THERAPY AGENTS - ANTICONVULSANT TYPE - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
carbamazepine oral capsule, er multiphase 12 hr	1	
carbamazepine oral suspension	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet extended release 12 hr	1	
carbamazepine oral tablet,chewable 100 mg	1	
divalproex	1	
epitol	1	
lamotrigine oral tablet disintegrating, dose pk	1	
lamotrigine oral tablet,disintegrating	1	QL
lamotrigine oral tablets,dose pack 25 mg (35)	1	
lamotrigine oral tablets,dose pack 25 mg (42) -100 mg (7), 25 mg (84) -100 mg (14)	1	QL
subvenite starter (blue) kit	1	
subvenite starter (green) kit	1	QL
subvenite starter (orange) kit	1	QL
valproic acid	1	
valproic acid (as sodium salt)	1	
<b>BIPOLAR THERAPY AGENTS - ATYPICAL ANTIPSYCHOTICS - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
aripiprazole oral solution	1	QL
aripiprazole oral tablet	1	QL
LYBALVI	3	PA; QL
olanzapine oral	1	
quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 50 mg	1	
QUETIAPINE ORAL TABLET 150 MG	3	
quetiapine oral tablet 400 mg	1	QL
quetiapine oral tablet extended release 24 hr	1	QL
risperidone oral solution	1	
risperidone oral tablet	1	
ziprasidone hcl	1	
<b>BIPOLAR THERAPY AGENTS - LITHIUM - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
lithium carbonate	1	
lithium citrate	1	
<b>CANNABIS AND CANNABINOIDS - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
dronabinol	1	
SYNDROS	2	PA

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Product Description	Tier	Limits/Restrictions/Notes
<b>CNS STIMULANT - AMPHETAMINE COMBINATIONS - DRUGS FOR ATTENTION DEFICIT DISORDER</b>		
ADDERALL XR	3	QL
ADZENYS XR-ODT	3	PA; QL
dextroamphetamine-amphetamine oral capsule,extended release 24hr	1	QL
dextroamphetamine-amphetamine oral tablet	1	
DYANAVEL XR ORAL SUSPEN, IR - ER, BIPHASIC 24HR	3	PA; QL
<b>CNS STIMULANT - AMPHETAMINES - DRUGS FOR ATTENTION DEFICIT DISORDER</b>		
dextroamphetamine sulfate oral capsule, extended release	1	
dextroamphetamine sulfate oral solution	1	
dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	
<b>CNS STIMULANT - ANALEPTICS, METHYLXANTHINE-TYPE - DRUGS FOR THE NERVOUS SYSTEM</b>		
caffeine citrate oral	1	
<b>FIBROMYALGIA AGENTS - GABA ANALOGS - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
pregabalin oral capsule	1	
pregabalin oral solution	1	QL
<b>FIBROMYALGIA AGENTS - SEROTONIN-NOREPINEPHRINE REUPTAKE-INHIB (SNRIS) - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg	1	QL
<b>HSDD AGENTS-MIXED SEROTONIN AGONIST/ANTAGONISTS - DRUGS FOR THE NERVOUS SYSTEM</b>		
ADDYI	3	PA
<b>HSDD AGENTS-NON-SELECTIVE MELANOCORTIN RECEPTOR AGONIST - DRUGS FOR THE NERVOUS SYSTEM</b>		
VYLEESI	3	PA; QL; S
<b>HYPNOTICS - MELATONIN M1/M2 RECEPTOR AGONISTS - DRUGS FOR INSOMNIA</b>		
HETLIOZ LQ	3	PA; QL; MS; S
ramelteon	1	QL
tasimelteon	1	PA; QL; MS; S
<b>MIGRAINE THERAPY - CARBOXYLIC ACID DERIVATIVES - DRUGS FOR MIGRAINE HEADACHES</b>		
divalproex oral tablet extended release 24 hr	1	
<b>MIGRAINE THERAPY - CGRP LIGAND BLOCKER, MONOCLONAL ANTIBODY - DRUGS FOR MIGRAINE HEADACHES</b>		
AJOVY AUTOINJECTOR	2	PA; QL
AJOVY SYRINGE	2	PA; QL
EMGALITY PEN	2	PA; QL
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	2	PA; QL
<b>MIGRAINE THERAPY - CGRP RECEPTOR BLOCKERS (GEPANTS AND MAB) - DRUGS FOR MIGRAINE HEADACHES</b>		
AIMOVIG AUTOINJECTOR	2	PA; QL
NURTEC ODT	2	PA; QL
QULIPTA	2	PA
UBRELVY	2	PA; QL
<b>MIGRAINE THERAPY - ERGOT ALKALOIDS AND DERIVATIVES - DRUGS FOR MIGRAINE HEADACHES</b>		
DIHYDROERGOTAMINE NASAL	3	PA; QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>MIGRAINE THERAPY - ERGOT COMBINATIONS - DRUGS FOR MIGRAINE HEADACHES</b>		
ergotamine-caffeine	1	
<b>MIGRAINE THERAPY - SELECTIVE SEROTONIN AGONISTS 5-HT(1) - DRUGS FOR MIGRAINE HEADACHES</b>		
almotriptan malate	1	QL
eletriptan	1	QL
frovatriptan	1	QL
naratriptan	1	QL
rizatriptan	1	QL
sumatriptan	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous cartridge	1	QL
sumatriptan succinate subcutaneous pen injector	1	QL
sumatriptan succinate subcutaneous solution	1	QL
zolmitriptan oral	1	QL
<b>MIGRAINE THERAPY - SEROTONIN AGONIST 5-HT(1) AND NSAID COMB. - DRUGS FOR MIGRAINE HEADACHES</b>		
sumatriptan-naproxen	1	QL
<b>MOVEMENT DISORDER DRUG THERAPY - DRUGS FOR THE NERVOUS SYSTEM</b>		
AUSTEDO	3	PA; QL; MS; S
AUSTEDO XR	3	PA; QL; MS; S
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	3	PA; QL; MS; S
INGREZZA	3	PA; QL; S
INGREZZA INITIATION PK(TARDIV)	3	PA; QL; S
INGREZZA SPRINKLE	3	PA; QL; S
tetrabenazine	1	PA; QL; MS; S
<b>MOVEMENT DISORDER THERAPY - HUNTINGTON'S DISEASE - DRUGS FOR THE NERVOUS SYSTEM</b>		
AUSTEDO	3	PA; QL; MS; S
AUSTEDO XR	3	PA; QL; MS; S
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	3	PA; QL; MS; S
INGREZZA	3	PA; QL; S
INGREZZA SPRINKLE	3	PA; QL; S
tetrabenazine	1	PA; QL; MS; S
<b>MOVEMENT DISORDER THERAPY - RESTLESS LEGS SYNDROME - DRUGS FOR THE NERVOUS SYSTEM</b>		
HORIZANT	3	PA; QL
<b>MOVEMENT DISORDER THERAPY - TARDIVE DYSKINESIA - DRUGS FOR THE NERVOUS SYSTEM</b>		
AUSTEDO	3	PA; QL; MS; S
AUSTEDO XR	3	PA; QL; MS; S
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	3	PA; QL; MS; S
INGREZZA	3	PA; QL; S
INGREZZA INITIATION PK(TARDIV)	3	PA; QL; S
INGREZZA SPRINKLE	3	PA; QL; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>NARCOLEPSY AND CATAPLEXY THERAPY AGENTS - SEDATIVE-TYPE - DRUGS FOR SLEEP DISORDER</b>		
LUMRYZ	3	PA; QL; MS; S
SODIUM OXYBATE	3	PA; QL; S
XYREM	3	PA; QL; S
XYWAV	3	PA; QL; S
<b>NARCOLEPSY THERAPY AGENTS - DOPAMINE AND NE REUPTAKE INHIBITOR (DNRI) - DRUGS FOR SLEEP DISORDER</b>		
SUNOSI	3	PA; QL
<b>NARCOLEPSY THERAPY AGENTS - NON-SYMPATHOMIMETIC - DRUGS FOR SLEEP DISORDER</b>		
armodafinil	1	QL
modafinil	1	QL
<b>NARCOLEPSY THERAPY AGENTS - STIMULANT-TYPE, PIPERADINE DERIVATIVE - DRUGS FOR SLEEP DISORDER</b>		
methylphenidate hcl oral solution	1	
methylphenidate hcl oral tablet	1	
methylphenidate hcl oral tablet, chewable	1	
<b>NARCOLEPSY THERAPY AGENTS- STIMULANT-TYPE, SYMPATHOMIMETIC, AMPHETAMINES - DRUGS FOR SLEEP DISORDER</b>		
dextroamphetamine sulfate oral capsule, extended release	1	
dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	
dextroamphetamine-amphetamine oral tablet	1	
<b>POSTHERPETIC NEURALGIA AGENTS - DRUGS FOR SEIZURES /PERSONALITY DISORDER/NERVE PAIN</b>		
gabapentin oral tablet extended release 24 hr	1	PA; QL
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR	3	PA; QL
<b>PSEUDOBULBAR AFFECT (PBA) AGENTS, NMDA ANTAGONISTS TYPE - DRUGS FOR SEVERE MENTAL DISORDERS</b>		
NUDEXTA	3	PA; QL
<b>SEDATIVE-HYPNOTIC - BARBITURATES - DRUGS FOR INSOMNIA</b>		
phenobarbital	1	
<b>SEDATIVE-HYPNOTIC - BENZODIAZEPINES - DRUGS FOR INSOMNIA</b>		
estazolam	1	
flurazepam	1	
midazolam oral syrup 2 mg/ml	1	
temazepam	1	
triazolam	1	
<b>SEDATIVE-HYPNOTIC - GABA-RECEPTOR MODULATORS - DRUGS FOR INSOMNIA</b>		
eszopiclone	1	QL
zaleplon	1	QL
zolpidem oral tablet	1	QL
zolpidem oral tablet, ext release multiphase	1	QL
zolpidem sublingual	1	QL
<b>CHEMICAL DEPENDENCY, AGENTS TO TREAT - DRUGS FOR ADDICTION</b>		
<b>AGENTS FOR OPIOID WITHDRAWAL, OPIOID-TYPE - DRUGS FOR OPIOID ADDICTION</b>		
BRIXADI	3	MS; S
buprenorphine hcl sublingual	1	
buprenorphine-naloxone	1	

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Product Description	Tier	Limits/Restrictions/Notes
SUBLOCADE	3	MS; S
ZUBSOLV	2	
<b>ALCOHOL ABSTINENCE THERAPY - GLUTAMATE AND GABA SYSTEM TYPE - DRUGS FOR ALCOHOL ADDICTION</b>		
acamprosate	1	QL
<b>ALCOHOL ABSTINENCE THERAPY - OPIOID RECEPTOR ANTAGONIST-TYPE - DRUGS FOR ALCOHOL ADDICTION</b>		
naltrexone	1	
VIVITROL	3	S
<b>ALCOHOL DETERRENTS - DRUGS FOR ALCOHOL ADDICTION</b>		
disulfiram	1	
<b>SMOKING DETERRENTS - NE AND DOPAMINE REUPTAKE INHIBITOR (NDRI)-TYPE - DRUGS FOR SMOKING ADDICTION</b>		
bupropion hcl (smoking deter)	1	Covered in full age 18+*
<b>SMOKING DETERRENTS - NICOTINE-TYPE - DRUGS FOR SMOKING ADDICTION</b>		
NICODERM CQ	3	QL; Covered in full age 18+*
NICORETTE	3	QL; Covered in full age 18+*
NICOTINE	1	QL; Covered in full age 18+*
NICOTINE (POLACRILEX) BUCCAL GUM	1	QL; Covered in full age 18+*
nicotine (polacrilex) buccal lozenge	1	QL; Covered in full age 18+*
nicotine (polacrilex) buccal mini lozenge	1	QL; Covered in full age 18+*
NICOTROL NS	3	QL; Covered in full age 18+*
QUIT 2 BUCCAL GUM	1	QL; Covered in full age 18+*
quit 2 buccal lozenge	1	QL; Covered in full age 18+*
QUIT 4 BUCCAL GUM	1	QL; Covered in full age 18+*
quit 4 buccal lozenge	1	QL; Covered in full age 18+*
STOP SMOKING AID	1	QL; Covered in full age 18+*
<b>SMOKING DETERRENTS - NICOTINIC RECEPTOR PARTIAL AGONIST, ALPHA4BETA2 - DRUGS FOR SMOKING ADDICTION</b>		
varenicline	1	QL; Covered in full age 18+*
<b>CHEMICALS-PHARMACEUTICAL ADJUVANTS</b>		
<b>CHEMICALS - SOLVENTS</b>		
CVS ISOPROPYL ALCOHOL 91% (OTC)	3	
cvs isopropyl rub alcohol 70% (otc)	3	
CVS ISOPROPYL RUB ALCOHOL 70% (OTC)	3	
DY-O-DERM	1	
FT ISOPROPYL ALCOHOL 91% (OTC)	3	
ft isopropyl rub alcohol 70% (otc)	3	
FT ISOPROPYL RUB ALCOHOL 70% (OTC)	3	
GNP ISOPROPYL ALCOHOL 91% (OTC)	3	
GS ISOPROPYL ALCOHOL 70% (OTC)	3	
INSTACLEAN	3	
ISOPROPANOL 70% LIQUID STERILE (RX)	3	
ISOPROPANOL 70% SOLUTION STERILE (RX)	3	
isopropyl alcohol solution 70 %, 91 %, 99 %	1	
isopropyl rubbing alcohol 70% (otc)	3	
ISOPROPYL RUBBING ALCOHOL 70% (OTC)	3	
ISOPROPYL RUBBING ALCOHOL 91% (OTC)	3	
SM ISOPROPYL ALCOHOL 91% (OTC)	3	

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Product Description	Tier	Limits/Restrictions/Notes
<b>PHARMACEUTICAL ADJUVANT - INHALATION VEHICLES</b>		
nebulal inhalation solution for nebulization 3 %	1	
sodium chloride inhalation	1	
<b>PHARMACEUTICAL ADJUVANT - ORAL THICKENING AGENTS</b>		
DIAFOODS THICK-IT #2	2	
DIAFOODS THICK-IT ORAL POWDER	1	
DIAFOODS THICK-IT ORAL POWDER IN PACKET	2	
GELMIX	3	
INSTANT FOOD THICKENER	2	
RESOURCE THICKENUP ORAL PACKET	2	
RESOURCE THICKENUP ORAL POWDER	1	
SIMPLYTHICK	2	
THICK AND EASY	3	
THICK NOW	2	
THICKEN UP CLEAR ORAL POWDER IN PACKET	2	
THICK-IT #2 ORAL POWDER	1	
THICK-IT #2 ORAL POWDER IN PACKET	2	
<b>COGNITIVE DISORDER THERAPY</b>		
<b>RETT SYNDROME AGENTS - GLYPROMATE (GPE) ANALOGS</b>		
DAYBUE	3	PA; QL; S
<b>COGNITIVE DISORDER THERAPY - DRUGS FOR THE NERVOUS SYSTEM</b>		
<b>ALZHEIMER'S DISEASE THERAPY - CHOLINESTERASE INHIBITORS - DRUGS FOR ALZHEIMER'S DISEASE</b>		
ADLARITY	3	ST; QL
donepezil	1	
galantamine	1	
rivastigmine	1	
rivastigmine tartrate	1	
<b>ALZHEIMER'S DISEASE THERAPY - NMDA RECEPTOR ANTAGONISTS - DRUGS FOR ALZHEIMER'S DISEASE</b>		
memantine oral capsule,sprinkle,er 24hr	1	QL
memantine oral solution	1	
memantine oral tablet	1	
memantine oral tablets,dose pack	1	
<b>COGNITIVE DISORDER THERAPY - CEREBRAL VASODILATORS - DRUGS FOR ALZHEIMER'S DISEASE</b>		
ergoloid	1	
<b>CONTRACEPTIVES - DRUGS FOR WOMEN</b>		
<b>CONTRACEPTIVE - VAGINAL PH MODULATOR - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
PHEXXI	3	Covered in full*
<b>CONTRACEPTIVE IMPLANT - PROGESTIN - BIRTH CONTROL PILLS</b>		
NEXPLANON	3	MS; S; Covered in full*
<b>CONTRACEPTIVE INJECTABLE - PROGESTIN - BIRTH CONTROL PILLS</b>		
medroxyprogesterone intramuscular	1	Covered in full*
<b>CONTRACEPTIVE INTRAUTERINE - PROGESTERONE IUD - BIRTH CONTROL PILLS</b>		
KYLEENA	3	S; Covered in full*
MIRENA	3	S; Covered in full*

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Product Description	Tier	Limits/Restrictions/Notes
<b>CONTRACEPTIVE ORAL - BIPHASIC - BIRTH CONTROL PILLS</b>		
amethia	1	Covered in full*
ashlyna	1	Covered in full*
azurette (28)	1	Covered in full*
camrese	1	Covered in full*
camrese lo	1	Covered in full*
daysee	1	Covered in full*
desog-e.estradiol/e.estradiol	1	Covered in full*
jaimiess	1	Covered in full*
kariva (28)	1	Covered in full*
l norgest/e.estradiol-e.estradiol oral tablets,dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7), 0.15 mg-30 mcg (84)/10 mcg (7)	1	Covered in full*
LO LOESTRIN FE	2	Covered in full*
lojaimiess	1	Covered in full*
pimtrea (28)	1	Covered in full*
simliya (28)	1	Covered in full*
simpesse	1	Covered in full*
viorele (28)	1	Covered in full*
volnea (28)	1	Covered in full*
<b>CONTRACEPTIVE ORAL - MONOPHASIC - BIRTH CONTROL PILLS</b>		
afirmelle	1	Covered in full*
altavera (28)	1	Covered in full*
alyacen 1/35 (28)	1	Covered in full*
amethyst (28)	1	Covered in full*
apri	1	Covered in full*
aubra	1	Covered in full*
aubra eq	1	Covered in full*
aurovela 1.5/30 (21)	1	Covered in full*
aurovela 1/20 (21)	1	Covered in full*
aurovela 24 fe	1	Covered in full*
aurovela fe 1.5/30 (28)	1	Covered in full*
aurovela fe 1-20 (28)	1	Covered in full*
aviane	1	Covered in full*
ayuna	1	Covered in full*
balziva (28)	1	Covered in full*
blisovi 24 fe	1	Covered in full*
blisovi fe 1.5/30 (28)	1	Covered in full*
blisovi fe 1/20 (28)	1	Covered in full*
briellyn	1	Covered in full*
charlotte 24 fe	1	Covered in full*
chateal (28)	1	Covered in full*
chateal eq (28)	1	Covered in full*
cryselle (28)	1	Covered in full*
cyred	1	Covered in full*
cyred eq	1	Covered in full*
dasetta 1/35 (28)	1	Covered in full*
dolishale	1	Covered in full*
drospirenone-e.estradiol-lm.fa	1	Covered in full*
drospirenone-ethinyl estradiol	1	Covered in full*

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Product Description	Tier	Limits/Restrictions/Notes
elinest	1	Covered in full*
enskyce	1	Covered in full*
estarylla	1	Covered in full*
ethynodiol diac-eth estradiol	1	Covered in full*
falmina (28)	1	Covered in full*
FEMLYV	3	Covered in full*
finzala	1	Covered in full*
gemmily	1	Covered in full*
hailey	1	Covered in full*
hailey 24 fe	1	Covered in full*
hailey fe 1.5/30 (28)	1	Covered in full*
hailey fe 1/20 (28)	1	Covered in full*
iclevia	1	Covered in full*
isibloom	1	Covered in full*
jasmiel (28)	1	Covered in full*
jolessa	1	Covered in full*
joyeaux	1	Covered in full*
juleber	1	Covered in full*
junel 1.5/30 (21)	1	Covered in full*
junel 1/20 (21)	1	Covered in full*
junel fe 1.5/30 (28)	1	Covered in full*
junel fe 1/20 (28)	1	Covered in full*
junel fe 24	1	Covered in full*
kaitlib fe	1	Covered in full*
kalliga	1	Covered in full*
kelnor 1/35 (28)	1	Covered in full*
kelnor 1/50 (28)	1	Covered in full*
kurvelo (28)	1	Covered in full*
larin 1.5/30 (21)	1	Covered in full*
larin 1/20 (21)	1	Covered in full*
larin 24 fe	1	Covered in full*
larin fe 1.5/30 (28)	1	Covered in full*
larin fe 1/20 (28)	1	Covered in full*
layolis fe	1	Covered in full*
lessina	1	Covered in full*
levonorgest-eth.estradiol-iron	1	Covered in full*
levonorgestrel-ethinyl estrad	1	Covered in full*
levora-28	1	Covered in full*
loryna (28)	1	Covered in full*
low-ogestrel (28)	1	Covered in full*
lo-zumandimine (28)	1	Covered in full*
lutera (28)	1	Covered in full*
marlissa (28)	1	Covered in full*
merzee	1	Covered in full*
mibelas 24 fe	1	Covered in full*
microgestin 1.5/30 (21)	1	Covered in full*
microgestin 1/20 (21)	1	Covered in full*
microgestin fe 1.5/30 (28)	1	Covered in full*
microgestin fe 1/20 (28)	1	Covered in full*

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Product Description	Tier	Limits/Restrictions/Notes
mili	1	Covered in full*
mono-linyah	1	Covered in full*
necon 0.5/35 (28)	1	Covered in full*
NEXTSTELLIS	3	Covered in full*
nikki (28)	1	Covered in full*
noreth-ethinyl estradiol-iron	1	Covered in full*
norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	1	Covered in full*
norethindrone-e.estradiol-iron oral capsule	1	Covered in full*
norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)	1	Covered in full*
norethindrone-e.estradiol-iron oral tablet,chewable	1	Covered in full*
norgestimate-ethinyl estradiol oral tablet 0.25-35 mg-mcg	1	Covered in full*
nortrel 0.5/35 (28)	1	Covered in full*
nortrel 1/35 (21)	1	Covered in full*
nortrel 1/35 (28)	1	Covered in full*
nylia 1/35 (28)	1	Covered in full*
ocella	1	Covered in full*
philith	1	Covered in full*
portia 28	1	Covered in full*
reclipsen (28)	1	Covered in full*
setlakin	1	Covered in full*
sprintec (28)	1	Covered in full*
sronyx	1	Covered in full*
syeda	1	Covered in full*
tarina 24 fe	1	Covered in full*
tarina fe 1/20 (28)	1	Covered in full*
tarina fe 1-20 eq (28)	1	Covered in full*
turqoz (28)	1	Covered in full*
TYBLUME	3	Covered in full*
tydemy	1	Covered in full*
vestura (28)	1	Covered in full*
vienva	1	Covered in full*
vyfemla (28)	1	Covered in full*
vylibra	1	Covered in full*
wera (28)	1	Covered in full*
wymzya fe	1	Covered in full*
zarah	1	Covered in full*
zovia 1-35 (28)	1	Covered in full*
zumandimine (28)	1	Covered in full*
<b>CONTRACEPTIVE ORAL - PROGESTIN - BIRTH CONTROL PILLS</b>		
camila	1	Covered in full*
deblitane	1	Covered in full*
emzahh	1	Covered in full*
errin	1	Covered in full*
heather	1	Covered in full*
incassia	1	Covered in full*
jencycla	1	Covered in full*
lyleq	1	Covered in full*
lyza	1	Covered in full*

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Product Description	Tier	Limits/Restrictions/Notes
nora-be	1	Covered in full*
norethindrone (contraceptive)	1	Covered in full*
OPILL	3	Covered in full*
sharobel	1	Covered in full*
SLYND	3	Covered in full*
tulana	1	Covered in full*
<b>CONTRACEPTIVE ORAL - QUADRAPHASIC - BIRTH CONTROL PILLS</b>		
l norgest/e.estradiol-e.estradiol oral tablets,dose pack,3 month 0.15 mg-20 mcg/ 0.15 mg-25 mcg	1	Covered in full*
NATAZIA	3	Covered in full*
rivelsa	1	Covered in full*
<b>CONTRACEPTIVE ORAL - TRIPHASIC - BIRTH CONTROL PILLS</b>		
alyacen 7/7/7 (28)	1	Covered in full*
aranelle (28)	1	Covered in full*
caziant (28)	1	Covered in full*
dasetta 7/7/7 (28)	1	Covered in full*
enpresse	1	Covered in full*
leena 28	1	Covered in full*
levonest (28)	1	Covered in full*
levonorg-eth estrad triphasic	1	Covered in full*
norethindrone-e.estradiol-iron oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	1	Covered in full*
norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg (28)	1	Covered in full*
nortrel 7/7/7 (28)	1	Covered in full*
nylia 7/7/7 (28)	1	Covered in full*
tilia fe	1	Covered in full*
tri-estarylla	1	Covered in full*
tri-legest fe	1	Covered in full*
tri-linyah	1	Covered in full*
tri-lo-estarylla	1	Covered in full*
TRI-LO-MARZIA	1	Covered in full*
tri-lo-mili	1	Covered in full*
tri-lo-sprintec	1	Covered in full*
tri-mili	1	Covered in full*
tri-sprintec (28)	1	Covered in full*
trivora (28)	1	Covered in full*
tri-vylibra	1	Covered in full*
tri-vylibra lo	1	Covered in full*
velivet triphasic regimen (28)	1	Covered in full*
<b>CONTRACEPTIVE TRANSDERMAL COMBINATIONS - ESTROGEN AND PROGESTIN COMB. - BIRTH CONTROL PILLS</b>		
norelgestromin-ethin.estradiol	1	Covered in full*
TWIRLA	3	Covered in full*
xulane	1	Covered in full*
zafemy	1	Covered in full*
<b>CONTRACEPTIVES - INTRAVAGINAL, SYSTEMIC - ESTROGEN AND PROGESTIN COMB. - BIRTH CONTROL PILLS</b>		
ANNOVERA	3	Covered in full*
eluryng	1	Covered in full*
enilloring	1	Covered in full*

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Product Description	Tier	Limits/Restrictions/Notes
etonogestrel-ethinyl estradiol	1	Covered in full*
haloette	1	Covered in full*
<b>EMERGENCY CONTRACEPTIVES - BIRTH CONTROL PILLS</b>		
after pill	1	Covered in full*
AFTERA	3	Covered in full*
curae	1	Covered in full*
econtra ez	1	Covered in full*
econtra one-step	1	Covered in full*
ELLA	3	Covered in full*
her style	1	Covered in full*
levonorgestrel	1	Covered in full*
my choice	1	Covered in full*
my way	1	Covered in full*
new day	1	Covered in full*
opcicon one-step	1	Covered in full*
option-2	1	Covered in full*
PLAN B ONE-STEP	3	Covered in full*
TAKE ACTION	3	Covered in full*
<b>EMERGENCY CONTRACEPTIVES - PROGESTERONE AGONIST/ANTAGONIST TYPE - BIRTH CONTROL PILLS</b>		
ELLA	3	Covered in full*
<b>EMERGENCY CONTRACEPTIVES - PROGESTIN TYPE - BIRTH CONTROL PILLS</b>		
after pill	1	Covered in full*
AFTERA	3	Covered in full*
curae	1	Covered in full*
econtra ez	1	Covered in full*
econtra one-step	1	Covered in full*
her style	1	Covered in full*
levonorgestrel	1	Covered in full*
my choice	1	Covered in full*
my way	1	Covered in full*
new day	1	Covered in full*
opcicon one-step	1	Covered in full*
option-2	1	Covered in full*
PLAN B ONE-STEP	3	Covered in full*
TAKE ACTION	3	Covered in full*
<b>SPERMICIDES - BIRTH CONTROL PILLS</b>		
VAGINAL CONTRACEPTIVE FILM	3	Covered in full*
VCF CONTRACEPTIVE GEL	3	Covered in full*
<b>DERMATOLOGICAL</b>		
<b>HAIR GROWTH AGENTS - KINASE INHIBITOR</b>		
LITFULO	3	PA; QL; MS; S
OLUMIANT	3	PA; QL; MS; S
<b>DERMATOLOGICAL - DRUGS FOR THE SKIN</b>		
<b>ACNE THERAPY SYSTEMIC - RETINOIDS AND DERIVATIVES - DRUGS FOR THE SKIN</b>		
acutane oral capsule 20 mg, 30 mg, 40 mg	1	
amneestem	1	
claravis	1	

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Product Description	Tier	Limits/Restrictions/Notes
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
isotretinoin oral capsule 25 mg, 35 mg	1	PA
zenatane	1	
<b>ACNE THERAPY TOPICAL - ANDROGEN RECEPTOR INHIBITORS - DRUGS FOR THE SKIN</b>		
WINLEVI	3	PA; QL
<b>ACNE THERAPY TOPICAL - ANTI-INFECTIVE - DRUGS FOR THE SKIN</b>		
clindacin	1	
clindacin etz topical swab	1	
clindacin p	1	
clindamycin phosphate topical gel	1	
clindamycin phosphate topical lotion	1	
clindamycin phosphate topical solution	1	
clindamycin phosphate topical swab	1	
dapsone topical gel	1	QL
ery pads	1	
erythromycin with ethanol topical gel	1	
erythromycin with ethanol topical solution	1	
sulfacetamide sodium (acne)	1	
<b>ACNE THERAPY TOPICAL - ANTI-INFECTIVE-KERATOLYTIC COMBINATIONS - DRUGS FOR THE SKIN</b>		
clindamycin-benzoyl peroxide topical gel 1.2%(1% base) -5%	1	
clindamycin-benzoyl peroxide topical gel 1-5%	1	QL
clindamycin-benzoyl peroxide topical gel with pump 1-5%	1	QL
erythromycin-benzoyl peroxide	1	
neucac	1	
<b>ACNE THERAPY TOPICAL - KERATOLYTIC - DRUGS FOR THE SKIN</b>		
pr benzoyl peroxide	1	
<b>ACNE THERAPY TOPICAL - RETINOID COMBINATIONS OTHER - DRUGS FOR THE SKIN</b>		
adapalene-benzoyl peroxide topical gel with pump 0.1-2.5%	1	QL
<b>ACNE THERAPY TOPICAL - RETINOIDS AND DERIVATIVES - DRUGS FOR THE SKIN</b>		
adapalene topical cream	1	
adapalene topical gel 0.3%	1	
adapalene topical gel with pump	1	
tretinoin	1	
<b>ANTIPSORIATIC - VITAMIN D ANALOG - GLUCOCORTICOID COMBINATIONS - DRUGS FOR THE SKIN</b>		
calcipotriene-betamethasone	1	QL
ENSTILAR	3	PA; QL
WYNZORA	3	PA; QL
<b>ANTIPSORIATIC AGENTS - INTERLEUKIN 12 AND IL-23 INHIBITORS, MC ANTIBODY - DRUGS FOR THE SKIN</b>		
STELARA SUBCUTANEOUS	2	PA; QL; MS; S
<b>ANTIPSORIATIC AGENTS - INTERLEUKIN-23 (IL-23) ANTAGONIST, MC ANTIBODY - DRUGS FOR THE SKIN</b>		
SKYRIZI SUBCUTANEOUS PEN INJECTOR	2	PA; QL; MS; S
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	2	PA; QL; MS; S
TREMFYA SUBCUTANEOUS AUTO-INJECTOR	2	PA; QL; MS; S
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML	2	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTIPSORIATIC AGENTS - INTERLEUKIN-36 (IL-36) RECEPTOR ANTAGONIST, MC - DRUGS FOR THE SKIN</b>		
SPEVIGO SUBCUTANEOUS	3	PA; QL; MS; S
<b>ANTIPSORIATIC AGENTS - TYROSINE KINASE 2 (TYK2) INHIBITOR - DRUGS FOR THE SKIN</b>		
SOTYKTU	2	PA; MS; S
<b>ANTIPSORIATIC AGENTS-INTERLEUKIN-17 (IL-17) ANTAGONIST, MC ANTIBODY - DRUGS FOR THE SKIN</b>		
COSENTYX (2 SYRINGES)	2	PA; QL; MS; S
COSENTYX PEN	2	PA; QL; MS; S
COSENTYX PEN (2 PENS)	2	PA; QL; MS; S
COSENTYX SUBCUTANEOUS	2	PA; QL; MS; S
COSENTYX UNOREADY PEN	2	PA; QL; MS; S
<b>DERMATITIS - JANUS KINASE (JAK) INHIBITORS - DRUGS FOR THE SKIN</b>		
OPZELURA	3	PA; QL
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG	2	PA; QL; MS; S
<b>DERMATITIS AGENTS,SYSTEMIC-IL-4 RECEPTOR ALPHA ANTAGONIST (IL-4RA) MAB - DRUGS FOR THE SKIN</b>		
DUPIXENT PEN	2	PA; QL; MS; S
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	2	PA; QL; MS; S
<b>DERMATITIS OR ECZEMA AGENTS, TOPICAL - PHOSPHODIESTERASE-4 INHIBITORS - DRUGS FOR THE SKIN</b>		
EUCRISA 2% OINTMENT	2	ST; QL
ZORYVE TOPICAL CREAM 0.15 %	3	QL
<b>DERMATOLOGICAL - ANTIBACTERIAL AMINOGLYCOSIDES - DRUGS FOR THE SKIN</b>		
gentamicin topical	1	
<b>DERMATOLOGICAL - ANTIBACTERIAL OTHER - DRUGS FOR THE SKIN</b>		
mupirocin	1	
<b>DERMATOLOGICAL - ANTIFUNGAL AMPHOTERIC POLYENE MACROLIDES - DRUGS FOR THE SKIN</b>		
nyamyc	1	
nystatin topical	1	
nystop	1	
<b>DERMATOLOGICAL - ANTIFUNGAL HYDROXYPYRIDINONE - DRUGS FOR THE SKIN</b>		
ciclodan topical cream	1	
ciclodan topical solution	1	QL
ciclopirox topical cream	1	
ciclopirox topical gel	1	
ciclopirox topical shampoo	1	
ciclopirox topical solution	1	QL
ciclopirox topical suspension	1	
<b>DERMATOLOGICAL - ANTIFUNGAL IMIDAZOLE AND RELATED AGENTS - DRUGS FOR THE SKIN</b>		
econazole	1	
ketoconazole topical cream	1	
ketoconazole topical shampoo	1	
<b>DERMATOLOGICAL - ANTIFUNGAL OXABOROLE - DRUGS FOR THE SKIN</b>		
tavaborole	1	PA; QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>DERMATOLOGICAL - ANTIFUNGAL-GLUCOCORTICOID COMBINATIONS - DRUGS FOR THE SKIN</b>		
clotrimazole-betamethasone	1	
nystatin-triamcinolone	1	
<b>DERMATOLOGICAL - ANTINEOPLASTIC ALKYLATING AGENTS - DRUGS FOR THE SKIN</b>		
VALCHLOR	3	PA; QL; MS; S
<b>DERMATOLOGICAL - ANTINEOPLASTIC ANTIMETABOLITES - DRUGS FOR THE SKIN</b>		
CARAC	3	PA
FLUOROURACIL TOPICAL CREAM 0.5 %	3	PA
fluorouracil topical cream 5 %	1	
fluorouracil topical solution	1	
TOLAK	3	
<b>DERMATOLOGICAL - ANTINEOPLASTIC OR PREMALIG. LESIONS - ANTIMICROTUBULE - DRUGS FOR THE SKIN</b>		
KLISYRI	3	PA; QL
<b>DERMATOLOGICAL - ANTINEOPLASTIC OR PREMALIGNANT LESIONS - NSAID'S - DRUGS FOR THE SKIN</b>		
diclofenac sodium topical gel 3 %	1	PA; QL
<b>DERMATOLOGICAL - ANTINEOPLASTIC SELECTIVE RETINOID X RECEPTOR AGONIST - DRUGS FOR THE SKIN</b>		
bexarotene topical	1	PA; QL; MS; S
<b>DERMATOLOGICAL - ANTIPERSPIRANTS - DRUGS FOR THE SKIN</b>		
DRYSOL	3	
DRYSOL DAB-O-MATIC	3	
<b>DERMATOLOGICAL - ANTIPSORIATIC AGENTS SYSTEMIC, PHOTSENSITIZING - DRUGS FOR THE SKIN</b>		
methoxsalen	1	
<b>DERMATOLOGICAL - ANTIPSORIATIC AGENTS SYSTEMIC, VITAMIN A DERIVATIVES - DRUGS FOR THE SKIN</b>		
acitretin	1	QL
<b>DERMATOLOGICAL - ANTIPSORIATIC AGENTS TOPICAL - DRUGS FOR THE SKIN</b>		
calcipotriene scalp	1	QL
calcipotriene topical cream	1	QL
calcipotriene topical ointment	1	QL
calcitriol topical	1	QL
tazarotene topical cream 0.1 %	1	
<b>DERMATOLOGICAL - ANTIPSORIATICS SYSTEMIC, PHOSPHODIESTERASE 4 INHIB. - DRUGS FOR THE SKIN</b>		
OTEZLA	2	PA; QL; MS; S
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47)	2	PA; QL; MS; S
<b>DERMATOLOGICAL - ANTISEBORRHEIC - DRUGS FOR THE SKIN</b>		
selenium sulfide topical lotion	1	
selenium sulfide topical shampoo 2.25 %	1	
<b>DERMATOLOGICAL - ANTIVIRAL, HERPES - DRUGS FOR THE SKIN</b>		
acyclovir topical ointment	1	QL
<b>DERMATOLOGICAL - BURN PRODUCTS ANTI-INFECTIVE - DRUGS FOR THE SKIN</b>		
mafenide acetate	1	
silver sulfadiazine	1	

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Product Description	Tier	Limits/Restrictions/Notes
ssd	1	
<b>DERMATOLOGICAL - CALCINEURIN INHIBITORS - DRUGS FOR THE SKIN</b>		
pimecrolimus	1	QL
tacrolimus topical	1	QL
<b>DERMATOLOGICAL - DEPIGMENTING COMBINATIONS - DRUGS FOR THE SKIN</b>		
TRI-LUMA	3	PA
<b>DERMATOLOGICAL - ENZYMES - DRUGS FOR THE SKIN</b>		
SANTYL	3	QL
<b>DERMATOLOGICAL - GLUCOCORTICOID - DRUGS FOR THE SKIN</b>		
ala-cort topical cream 1 %	1	
alclometasone	1	
betamethasone dipropionate	1	
betamethasone valerate	1	
betamethasone, augmented	1	
clobetasol scalp	1	
clobetasol topical cream	1	
clobetasol topical gel	1	
clobetasol topical lotion	1	
clobetasol topical ointment	1	
clobetasol topical shampoo	1	
clobetasol topical spray,non-aerosol	1	
clobetasol-emollient topical cream	1	
clodan	1	
desonide topical cream	1	
desonide topical lotion	1	
desonide topical ointment	1	
desoximetasone topical cream	1	
desoximetasone topical gel	1	
desoximetasone topical ointment	1	
fluocinolone	1	
fluocinolone and shower cap	1	
fluocinonide	1	
fluocinonide-e	1	
flurandrenolide	1	
fluticasone propionate topical	1	
halobetasol propionate topical cream	1	
halobetasol propionate topical ointment	1	
hydrocortisone butyrate topical ointment	1	
hydrocortisone butyrate topical solution	1	
hydrocortisone topical cream 1 %, 2.5 %	1	
hydrocortisone topical cream with perineal applicator	1	
hydrocortisone topical lotion 2.5 %	1	
hydrocortisone topical ointment 1 %, 2.5 %	1	
hydrocortisone valerate	1	
mometasone topical	1	
prednicarbate	1	
procto-med hc	1	
proctosol hc topical	1	

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Product Description	Tier	Limits/Restrictions/Notes
proctozone-hc	1	
scalacort	1	
triamcinolone acetonide topical cream	1	
triamcinolone acetonide topical lotion	1	
triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %	1	
triderm topical cream	1	
<b>DERMATOLOGICAL - IMMUNOMODULATOR - CATECHINS - GENITAL WART/HPV TX - DRUGS FOR THE SKIN</b>		
VEREGEN	3	
<b>DERMATOLOGICAL - IMMUNOMODULATOR - IMIDAZOQUINOLINAMINES - DRUGS FOR THE SKIN</b>		
imiquimod topical cream in packet 5 %	1	
<b>DERMATOLOGICAL - IMMUNOMODULATOR - INTERFERONS - DRUGS FOR THE SKIN</b>		
ALFERON N	3	
<b>DERMATOLOGICAL - KERATOLYTIC-ANTIMITOTIC SINGLE AGENTS - DRUGS FOR THE SKIN</b>		
podofilox topical solution	1	
<b>DERMATOLOGICAL - LOCAL ANESTHETIC COMBINATIONS - DRUGS FOR THE SKIN</b>		
lidocaine-prilocaine topical cream	1	
<b>DERMATOLOGICAL - MAMMALIAN TARGET OF RAPAMYCIN (MTOR) INHIBITORS - DRUGS FOR THE SKIN</b>		
HYFTOR	3	PA; QL; S
<b>DERMATOLOGICAL - NSAID SINGLE AGENTS - DRUGS FOR THE SKIN</b>		
diclofenac sodium topical drops	1	
<b>DERMATOLOGICAL - RETINOIDS (VITAMIN A DERIVATIVES) - TOPICAL COSMETIC - DRUGS FOR THE SKIN</b>		
tazarotene topical cream 0.1 %	1	
tretinoin (emollient)	3	PA
<b>DERMATOLOGICAL - ROSACEA THERAPY, TOPICAL - DRUGS FOR THE SKIN</b>		
brimonidine topical	1	PA
metronidazole topical	1	
rosadan topical cream	1	
rosadan topical gel	1	
<b>DERMATOLOGICAL - TOPICAL LOCAL ANESTHETIC AMIDES - DRUGS FOR THE SKIN</b>		
glydo	1	
lidocaine hcl mucous membrane jelly in applicator	1	
lidocaine topical adhesive patch,medicated 5 %	1	
lido-k	1	
lidopin topical cream 3 %	1	
<b>SCABICIDE AND PEDICULICIDE SINGLE AGENTS - DRUGS FOR THE SKIN</b>		
malathion	1	
permethrin	1	
SPINOSAD	3	
<b>WOUND CARE - GROWTH FACTOR AGENTS - DRUGS FOR THE SKIN</b>		
REGRANEX	3	QL
<b>WOUND CARE COMBINATIONS OTHER - DRUGS FOR THE SKIN</b>		
FILSUEVZ	3	PA; QL; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>DIAGNOSTIC AGENTS</b>		
<b>DIAGNOSTIC - BLOOD TEST OTHERS</b>		
FORA GTEL KETONE TEST STRIP	3	
NOVAMAX PLUS KETONE	3	
PRECISION XTRA B-KETONE	2	
<b>DIAGNOSTIC - MULTIPLE URINE TESTS</b>		
CHEK-STIX CONTROL	3	
CHEMSTRIP 10 MD	3	
CHEMSTRIP 10/SG	3	
CHEMSTRIP 2 GP	3	
CHEMSTRIP 50B	3	
CHEMSTRIP 7	3	
CHEMSTRIP 9	3	
COMBISTIX REAGENT	3	
HEMA-COMBISTIX	3	
LABSTIX REAGENT	3	
MULTISTIX	3	
MULTISTIX 10 SG	3	
MULTISTIX 5	3	
MULTISTIX 7	3	
MULTISTIX 8 SG	3	
MULTISTIX 9	3	
MULTISTIX 9 SG	3	
URISTIX 4	3	
URISTIX REAGENT	3	
<b>DRUGS TO TREAT ERECTILE DYSFUNCTION - DRUGS FOR THE URINARY SYSTEM</b>		
<b>ERECTILE DYSFUNCTION (ED) DRUGS-SEL.CGMP PHOSPHODIESTERASE TYPES INHIB - DRUGS FOR ERECTILE DYSFUNCTION</b>		
sildenafil	1	QL
tadalafil	1	QL
vardefafil	1	QL
<b>ELECTROLYTE BALANCE-NUTRITIONAL PRODUCTS - DRUGS FOR NUTRITION</b>		
<b>AMINO ACID - CARNITINE DERIVATIVES - DRUGS FOR NUTRITION</b>		
ACTICARNITINE SF	3	PA
CYTO CARN	3	PA
LEVOCARNITINE ORAL SOLUTION 1 GRAM/10 ML	3	PA
levocarnitine oral tablet	1	
NEOKE ALCAR	3	PA
<b>AMINO ACID - TYROSINE - DRUGS FOR NUTRITION</b>		
TYROSINE ORAL PACKET	3	PA
<b>AMINO ACID-AMINO ACID COMBINATIONS, ORAL - DRUGS FOR NUTRITION</b>		
COMPLETE AMINO ACID MIX	1	PA
NEOKE BCAA4	3	PA
NUTRASENTIALS	3	PA
<b>AMINO ACIDS, SINGLE INGREDIENT, ORAL (NON-INJECTABLE) - DRUGS FOR NUTRITION</b>		
ARGININE (L-ARGININE) ORAL POWDER	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
ARGININE (L-ARGININE) ORAL POWDER IN PACKET 500 MG	3	PA
CITRULLINE 1000	3	PA
CYTOLLINE	1	PA
glutamine (sickle cell)	1	PA; QL; MS; S
GLUTASOLVE	3	PA
GLYCINE ORAL POWDER	3	PA
GLYCINE ORAL POWDER IN PACKET	3	PA
ISOLEUCINE 1000	3	PA
ISOLEUCINE AMINO ACID SUPPLMNT	3	PA
L-CYSTINE	3	PA
LEUCINE	3	PA
METHIONINE	3	PA
PHENYLALANINE	3	PA
PURE L-CITRULLINE ORAL POWDER	1	PA
TYROSINE ORAL POWDER	3	PA
VALINE	3	PA
VALINE 1000	3	PA
VALINE AMINO ACID SUPPLEMENT	3	PA
<b>B-COMPLEX VITAMIN COMBINATIONS - DRUGS FOR NUTRITION</b>		
B COMPLEX 1 (WITH FOLIC ACID)	1	Covered in full age 11+*
B COMPLEX-VITAMIN C-FOLIC ACID ORAL TABLET	1	Covered in full age 11+*
BALANCE B-50 (WITH FOLIC ACID)	1	Covered in full age 11+*
BALANCED B-100 ORAL TABLET	1	Covered in full age 11+*
B-COMPLEX WITH VITAMIN C ORAL TABLET 400-500 MCG-MG	1	Covered in full age 11+*
DIALYVITE 800 ORAL TABLET	1	Covered in full age 11+*
FULL SPECTRUM B-VITAMIN C	1	Covered in full age 11+*
KOBEE	1	Covered in full age 11+*
RENA-VITE	1	Covered in full age 11+*
STRESS FORMULA WITH IRON	1	Covered in full age 11+*
STRESS FORMULA WITH IRON(SULF)	1	Covered in full age 11+*
SUPER B MAXI COMPLEX	1	Covered in full age 11+*
SUPER QUINTS	1	Covered in full age 11+*
<b>DIETARY PRODUCT - DIETARY SUPPLEMENTS - DRUGS FOR NUTRITION</b>		
ARGINAID	3	PA
BABY'S ONLY ORG LACTORELIEF	3	PA
BABY'S ONLY ORGANIC DAIRY	3	PA
BABY'S ONLY ORGANIC DAIRY WHEY	3	PA
BABY'S ONLY ORGANIC SOY	3	PA
BENECALORIE	1	PA
BOOST	1	PA
BOOST BREEZE NUTRITIONAL	3	PA
BOOST HIGH PROTEIN ENERGY ORAL LIQUID VANILLA	3	PA
BOOST HIGH PROTEIN ENERGY DRNK VANILLA	3	PA
boost high protein oral liquid 0.06 gram- 1 kcal/ml	3	PA
BOOST KID ESSENTIALS	3	PA
BOOST KID ESSENTIALS W-FIBER	3	PA
BOOST PLUS	3	PA
BOOST VHC	3	PA
BOOST WOMEN	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
BREAKFAST ESSENTIALS	3	PA
BRIGHT BEGINNINGS SOY	1	PA
COMPLEAT PEDIATRIC	3	PA
COMPLEAT PEDIATRIC REDUCED CAL	1	PA
CYTOTINE	3	PA
DRY EYE OMEGA BENEFITS ORAL LIQUID	3	PA
DUOCAL	3	PA
EGG-PRO	3	PA
ENFAGROW TODDLER NEXT STEP	3	PA
ENFAGROW TODLR NXT STP NON-GMO	3	PA
ENSURE ACTIVE HEART HEALTH	1	PA
ENSURE ACTIVE HIGH PROTEIN	1	PA
ENSURE ACTIVE LIGHT	1	PA
ENSURE ACTIVE MUSCLE HEALTH	3	PA
ENSURE ACTIVE PROTEIN-MUSCLE	1	PA
ENSURE CLEAR	1	PA
ENSURE COMPACT	1	PA
ENSURE COMPLETE	3	PA
ENSURE ENLIVE	3	PA
ENSURE HARVEST	3	PA
ENSURE HIGH PROTEIN ORAL LIQUID	1	PA
ENSURE MAX PROTEIN	1	PA
ENSURE MUSCLE HEALTH	3	PA
ENSURE ORAL LIQUID	1	PA
ENSURE ORAL POWDER	3	PA
ENSURE ORIGINAL ORAL LIQUID	1	PA
ENSURE ORIGINAL ORAL LIQUID 0.04-1.05 GRAM-KCAL/ML	3	PA
ENSURE ORIGINAL ORAL POWDER	3	PA
ENSURE PLUS	3	PA
ENSURE PLUS HIGH PROTEIN	3	PA
ENSURE PUDDING	3	PA
EO28 SPLASH ORAL LIQUID	3	PA
HI-CAL	3	PA
HIGH-PROTEIN NUTRITIONAL SHAKE	1	PA
ISOSOURCE 1.5 CAL	3	PA
ISOSOURCE HN	1	PA
JEVITY 1 CAL	3	PA
JEVITY 1.2 CAL	3	PA
JEVITY 1.5 CAL	3	PA
K-PAX IMMUNE BOOSTER	3	PA
MONOGEN ORAL POWDER	3	PA
NUTRA PRO HIGH PROTEIN	3	PA
NUTRAFIT	1	PA
NUTRAFIT PLUS	1	PA
NUTRITIONAL DRINK	1	PA
NUTRITIONAL DRINK PLUS	1	PA
NUTRITIONAL SHAKE ORAL LIQUID	1	PA
NUTRITIONAL SHAKE ORAL LIQUID 0.04-0.93 GRAM-KCAL/ML, 0.04-1.05 GRAM-KCAL/ML	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
NUTRITIONAL SHAKE PLUS	3	PA
ORGANIC PEDIASMART	3	PA
PEDIASURE	3	PA
PEDIASURE ENTERAL	3	PA
PEDIASURE ENTERAL W/FIBER 1.0	3	PA
PEDIASURE GROW-GAIN	3	PA
PEDIASURE GROW-GAIN ORGANIC	3	PA
PEDIASURE GROW-GAIN WITH FIBER	3	PA
PEDIASURE HARVEST	3	PA
PEDIASURE REDUCED CALORIE	3	PA
PEDIASURE SHAKE MIX	3	PA
PEDIASURE SIDEKICKS	3	PA
PEDIASURE SIDEKICKS CLEAR	3	PA
PEDIASURE WITH FIBER	3	PA
PROCEED PLUS	3	PA
SIMILAC GO AND GROW NON-GMO	3	PA
SIMILAC GO AND GROW ORAL POWDER 4-8-16 GRAM/150 KCAL	3	PA
SIMILAC GO AND GROW SENSITIVE	3	PA
SIMILAC GO-GROW SENSTV NON-GMO	3	PA
TWOCAL HN	3	PA
ULTRAMINO	3	PA
<b>DIETARY PRODUCT - INFANT FORMULAS - DRUGS FOR NUTRITION</b>		
ADVANTAGE WITH IRON	3	PA
ADVANTAGE WITH IRON NON-GMO	3	PA
ALFAMINO INFANT	3	PA
BCAD 1	3	PA
CALCILO XD	3	PA
CYCLINEX-1	3	PA
ELECARE INFANT FORMULA	3	PA
ENFAMIL 24	3	PA
ENFAMIL A.R.	3	PA
ENFAMIL ENSPIRE GENTLEASE	3	PA
ENFAMIL ENSPIRE INFANT FORMULA	3	PA
ENFAMIL GENTLEASE	3	PA
ENFAMIL HUMAN MILK FORTIFIER ORAL LIQUID IN PACKET	3	PA
ENFAMIL HUMAN MILK FORTIFIER ORAL POWDER IN PACKET	3	PA
ENFAMIL INFANT	3	PA
ENFAMIL NEURO ENFACARE NON-GMO	3	PA
ENFAMIL NEURO GENTLEASE NONGMO ORAL LIQUID	3	PA
ENFAMIL NEURO GENTLEASE NONGMO ORAL POWDER	3	PA
ENFAMIL NEURO SENSITIVE NONGMO	3	PA
ENFAMIL NEUROPRO NON-GMO ORAL LIQUID 2.1-5.3-11.3 GRAM/100 KCAL	3	PA
ENFAMIL NEUROPRO NON-GMO ORAL POWDER 2.1-5.3-11.3 GRAM/100 KCAL	3	PA
ENFAMIL PREMATURE 20	3	PA
ENFAMIL PREMATURE 24	3	PA
ENFAMIL PREMATURE 30	3	PA
ENFAMIL PROSOBEE	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
ENFAMIL PROSOBEE LIPIL	3	PA
ENFAMIL REGULINE ORAL POWDER	3	PA
ENFAPORT	3	PA
FORTINI INFANT	3	PA
GA-1 ANAMIX EARLY YEARS	3	PA
GENTLE INFANT FORMULA	3	PA
GERBER EXTENSIVE HA	3	PA
GERBER GOOD START GENTLE NOGMO	3	PA
GERBER GOOD START GENTLEPRO	3	PA
GERBER GOOD START SOY	3	PA
GERBER GOOD START SOY NO-GMO ORAL POWDER	3	PA
GERBER GOOD STR SOOTHPRO NOGMO	3	PA
GERBER GS GNTLPR NOGMO(B.LACT)	3	PA
GLUTAREX-1	3	PA
HCU ANAMIX EARLY YEARS	3	PA
HCY 1 POWDER	3	PA
HOMINEX-1	3	PA
INFANT FORMULA WITH IRON	3	PA
ISOMIL ADVANCE	3	PA
ISOMIL DF	3	PA
ISOMIL/IRON	3	PA
IVA ANAMIX EARLY YEARS	3	PA
IVA ANAMIX NEXT	3	PA
I-VALEX-1	3	PA
KETONEX-1	3	PA
MMA-PA ANAMIX EARLY YEARS	3	PA
MMA-PA ANAMIX NEXT	3	PA
MSUD ANALOG	3	PA
MSUD ANAMIX EARLY YEARS	3	PA
NEOCATE INFANT DHA-ARA	3	PA
NEOCATE SYNEO INFANT	3	PA
NUTRAMIGEN DHA-ARA	3	PA
NUTRAMIGEN TODDLER ENFLORA-LGG	3	PA
NUTRAMIGEN WITH ENFLORA LGG	3	PA
OA 1 POWDER	3	PA
PFD TODDLER	3	PA
PHENEX-1	3	PA
PREGESTIMIL	3	PA
PREMIUM INFANT FORMULA	3	PA
PRODUCT 3232A	3	PA
PRO-PHREE	3	PA
PROPIMEX-1	3	PA
PURAMINO DHA-ARA	3	PA
PURE BLISS NON-GMO	3	PA
RCF SOY PROTEIN FORMULA BASE	3	PA
SENSITIVITY WITH IRON	3	PA
SIMILAC ADVANCE	3	PA
SIMILAC ADVANCE LAMEHADRIDIN	3	PA
SIMILAC ADVANCE NON-GMO	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
SIMILAC ADVANCE ORGANIC ORAL LIQUID	3	PA
SIMILAC ADVANCE ORGANIC ORAL POWDER	1	PA
SIMILAC ADVANCE WITH IRON	3	PA
similac alimentum	1	PA
SIMILAC EXPERT CARE	3	PA
SIMILAC EXPERT CARE ALIMENTUM	3	PA
SIMILAC FOR SPIT-UP	3	PA
SIMILAC GO AND GROW ORAL POWDER 3 GRAM-5.4 GRAM/100 KCAL	3	PA
SIMILAC GO AND GROW SOY	3	PA
SIMILAC HUMAN MILK FORTIFIER ORAL LIQUID IN PACKET 0.349-6.85 GRAM-KCAL/5 ML, 0.5 GRAM- 7 KCAL/5 ML	3	PA
SIMILAC HUMAN MILK FORTIFIER ORAL POWDER IN PACKET	3	PA
SIMILAC LOW-IRON	3	PA
SIMILAC NEASURE	3	PA
SIMILAC ORGANIC A2 MILK NO-GMO	3	PA
SIMILAC PM	3	PA
SIMILAC PRO-ADVANCE NON-GMO	3	PA
SIMILAC PRO-SENSITIVE NON-GMO	3	PA
SIMILAC PRO-TOTAL CMFT NON-GMO ORAL POWDER	3	PA
SIMILAC SENSITIVE FUSS AND GAS ORAL CONCENTRATE	1	PA
SIMILAC SENSITIVE FUSS AND GAS ORAL LIQUID	3	PA
SIMILAC SENSITIVE FUSS AND GAS ORAL POWDER	3	PA
SIMILAC SENSITIVE FUSS-GAS	3	PA
SIMILAC SENSITIVE ISOMIL SOY	3	PA
SIMILAC SOY ISOMIL	3	PA
SIMILAC SPECIAL CARE 24	3	PA
SIMILAC SPECIAL CARE 30	3	PA
SIMILAC SUPPLEMENTATION	3	PA
SIMILAC TOTAL COMFORT	3	PA
SIMILAC TOTAL COMFORT NON-GMO	3	PA
SIMILAC WITH IRON	3	PA
SOD ANAMIX EARLY YEARS	3	PA
TODDLER BEGINNINGS	3	PA
TYR ANAMIX EARLY YEARS	3	PA
TYREX-1	3	PA
TYROS 1	3	PA
WND 1	3	PA
XLEU ANALOG	3	PA
XLYS- XTRP ANALOG	3	PA
XMET ANALOG	3	PA
XMTVI ANALOG	3	PA
XPHE, XTyr ANALOG	3	PA
XPTM ANALOG	3	PA
<b>DILUENTS - STERILE WATER FOR INJECTION - DRUGS FOR NUTRITION</b>		
water for injection, sterile injection	1	
<b>ELECTROLYTE DEPLETERS - ION EXCHANGE RESIN - DRUGS FOR NUTRITION</b>		
kionex (with sorbitol)	1	
LOKELMA	2	QL

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Product Description	Tier	Limits/Restrictions/Notes
sodium polystyrene sulfonate oral powder	1	
sps (with sorbitol)	1	
VELTASSA	2	
<b>IRRIGATION SOLUTIONS - DRUGS FOR NUTRITION</b>		
water for irrigation, sterile	1	
<b>MINERALS AND ELECTROLYTES - BICARBONATE PRODUCING OR CONTAINING AGENTS - DRUGS FOR NUTRITION</b>		
sodium bicarbonate intravenous solution	1	
<b>MINERALS AND ELECTROLYTES - IRON - DRUGS FOR NUTRITION</b>		
ACCRUFER	3	PA; QL
<b>MINERALS AND ELECTROLYTES - POTASSIUM, ORAL - DRUGS FOR NUTRITION</b>		
klor-con 10	1	
klor-con 8	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
potassium chloride oral capsule, extended release	1	
potassium chloride oral liquid	1	
potassium chloride oral packet	1	
potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq	1	
potassium chloride oral tablet extended release 15 meq	3	
potassium chloride oral tablet, er particles/crystals	1	
<b>MULTIVITAMIN AND MINERAL COMBINATIONS - DRUGS FOR NUTRITION</b>		
CITRANATAL MEDLEY	3	
folivane-ob	1	
K-PAX	3	PA
pnv-omega	1	
taron-c dha	1	
wescap-c dha	1	
zatean-pn plus	1	
<b>MULTIVITAMINS - DRUGS FOR NUTRITION</b>		
pnv-dha	1	
prenatal-u	1	
wescap-pn dha	1	
zatean-pn dha	1	
<b>NUTRITIONAL PRODUCT - CARBOHYDRATES, ORAL - DRUGS FOR NUTRITION</b>		
ENFAMIL GLUCOSE	3	
ENSURE PRE-SURGERY	1	PA
PREOP	3	PA
SOL CARB	3	PA
<b>NUTRITIONAL PRODUCT - CHYLOTHORAX OR LCHAD SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
ENFAPORT	3	PA
<b>NUTRITIONAL PRODUCT - GLUTARIC ACIDURIA TYPE 1 SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
GA EXPRESS 15	3	PA
GA GEL	3	PA
GA POWDER	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
GA-1 ANAMIX EARLY YEARS	3	PA
GLUTARADE AMINO ACID BLEND	3	PA
GLUTARADE GA-1	3	PA
GLUTARADE JUNIOR	3	PA
GLUTAREX-1	3	PA
GLUTAREX-2	3	PA
XLYS- XTRP ANALOG	3	PA
XLYS, XTRP MAXAMAID	3	PA
XLYS, XTRP MAXAMUM	3	PA
<b>NUTRITIONAL PRODUCT - GLYCOGEN STORAGE DISEASE SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
GLYCOSADE	3	PA
<b>NUTRITIONAL PRODUCT - ISOVALERIC ACIDEMIA SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
IVA ANAMIX EARLY YEARS	3	PA
IVA ANAMIX NEXT	3	PA
IVA MAXAMUM	3	PA
I-VALEX-1	3	PA
I-VALEX-2	3	PA
LMD POWDER	3	PA
XLEU ANALOG	3	PA
XLEU MAXAMAID	3	PA
<b>NUTRITIONAL PRODUCT - KETOGENIC FORMULATION - DRUGS FOR NUTRITION</b>		
CYTO RALA	3	PA
KETOCAL 2.5:1	3	PA
KETOCAL 3:1	3	PA
KETOCAL 4:1	3	PA
KETOCAL 4:1 (MILK-SOY)	3	PA
KETOVIE	3	PA
KETOVIE 3:1	3	PA
KETOVIE PEPTIDE 4:1	3	PA
KETOVIE PLANT-BASED 4:1	3	PA
KETOVOLVE	3	PA
NEOKE BCAA4	3	PA
<b>NUTRITIONAL PRODUCT - LIPID OTHERS - DRUGS FOR NUTRITION</b>		
DOJOLVI	3	PA; QL; MS; S
<b>NUTRITIONAL PRODUCT - MEDICAL CONDITION SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
CHOLEXTRA T-F	3	PA
glutamine (sickle cell)	1	PA; QL; MS; S
<b>NUTRITIONAL PRODUCT - METHIONINE-FREE SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
HCU ANAMIX EARLY YEARS	3	PA
HCU ANAMIX NEXT	3	PA
HCU COOLER	3	PA
HCU EXPRESS15 PLUS	3	PA
HCU EXPRESS20 PLUS	3	PA
HCU GEL POWDER	3	PA
HCU LOPHLEX	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
HCU MAXAMUM	3	PA
HCY 1 POWDER	3	PA
HCY 2	3	PA
HOMACTIN AA PLUS 20 PE	3	PA
HOMINEX-1	3	PA
HOMINEX-2	3	PA
METHIONAID	3	PA
XMET ANALOG	3	PA
XMET MAXAMAID	3	PA
<b>NUTRITIONAL PRODUCT - MSUD SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
ACERFLEX	3	PA
BCAD 1	3	PA
BCAD 2	3	PA
COMPLEX ESSENTIAL	3	PA
COMPLEX JUNIOR MSD	3	PA
COMPLEX MSUD AMINO ACID BLEND	3	PA
ISOLEUCINE 1000	3	PA
ISOLEUCINE AMINO ACID SUPPLMNT	3	PA
KETONEX-1	3	PA
KETONEX-2	3	PA
METHIONINE	3	PA
MSUD AID	3	PA
MSUD ANALOG	3	PA
MSUD ANAMIX EARLY YEARS	3	PA
MSUD COOLER	3	PA
MSUD EXPRESS COOLER	3	PA
MSUD EXPRESS15 PLUS	3	PA
MSUD EXPRESS20 PLUS	3	PA
MSUD GEL POWDER	3	PA
MSUD LOPHLEX	3	PA
MSUD MAXAMAID	3	PA
MSUD MAXAMUM	3	PA
VILACTIN AA PLUS 20 PE	3	PA
<b>NUTRITIONAL PRODUCT - NUTRITIONAL THERAPY - DRUGS FOR NUTRITION</b>		
ALFAMINO JUNIOR	3	PA
BCAD 1	3	PA
BOOST GLUCOSE CONTROL ORAL LIQUID 0.07-0.8 GRAM-KCAL/ML	3	PA
BOOST MAX	3	PA
COMPLEAT	3	PA
COMPLEAT ORGANIC BLEND CHICKEN	3	PA
COMPLEAT ORGANIC BLENDS PLANT	3	PA
COMPLEAT PED ORG BLEND CHICKEN	3	PA
COMPLEAT PED ORG BLENDS PLANT	3	PA
COMPLEAT PEDIATRIC PEPTIDE 1.5	3	PA
COMPLEAT PEPTIDE 1.5	3	PA
DIABETISOURCE AC	3	PA
ELECARE JR	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
ENCALA	3	PA
ENSURE CLEAR THERAPEUTIC	3	PA
ENSURE PLANT-BASED PROTEIN	1	PA
ENSURE SURGERY	1	PA
ENU NUTRITION SHAKE	3	PA
ENU PRO3 PLUS	3	PA
EO28 SPLASH ORAL LIQUID 0.025-1 GRAM-KCAL/ML	3	PA
EQUACARE JR	3	PA
ESSENTIAL CARE JR	3	PA
FIBERSOURCE HN	3	PA
FRUITIVITS	3	PA
GLUCERNA 1 CAL	3	PA
GLUCERNA 1.2 CAL	3	PA
GLUCERNA 1.5 CAL	3	PA
GLUCERNA ADVANCE	3	PA
GLUCERNA HUNGER SMART	3	PA
GLUCERNA SHAKE	3	PA
GLUCERNA SNACK SHAKE	3	PA
GLUCERNA THERAPEUTIC NUTRITION	3	PA
GLUCO BURST DIABETIC DRINK	3	PA
GLUCOSE SUPPORT 1.2 CAL	3	PA
GLUTAREX-1	3	PA
GLUTAREX-2	3	PA
IMPACT ADVANCED RECOVERY	3	PA
IMPACT PEPTIDE 1.5 CAL	3	PA
MONOGEN ORAL POWDER 12.9 GRAM-444 KCAL/100 GRAM	3	PA
NEOCATE JUNIOR	3	PA
NEOCATE JUNIOR WITH PREBIOTICS	3	PA
NEOCATE NUTRA	3	PA
NEOCATE SPLASH	3	PA
NEPRO CARB STEADY	3	PA
NOVASOURCE RENAL 2 CAL	3	PA
NUTREN 1.0 WITH FIBER	3	PA
NUTREN 1.5	1	PA
NUTREN 2.0	1	PA
NUTREN JUNIOR	1	PA
NUTREN JUNIOR FIBER	1	PA
OSMOLITE 1 CAL	3	PA
OSMOLITE 1.2 CAL	3	PA
OSMOLITE 1.5 CAL	3	PA
OXEPA	3	PA
PEDIASURE PEPTIDE 1.0 CAL	1	PA
PEDIASURE PEPTIDE 1.5 CAL	3	PA
PEDIATRIC PEPTIDE 1.0	1	PA
PEDIATRIC PEPTIDE FORMULA 1.5	1	PA
PEDIATRIC STANDARD FORMULA 1.2	1	PA
PEPTAMEN	3	PA
PEPTAMEN 1.5	3	PA
PEPTAMEN 1.5 CAL WITH PREBIO1	1	PA

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Product Description	Tier	Limits/Restrictions/Notes
PEPTAMEN AF	3	PA
PEPTAMEN INTENSE VHP	3	PA
PEPTAMEN JUNIOR	3	PA
PEPTAMEN JUNIOR 1.5	3	PA
PEPTAMEN JUNIOR FIBER	1	PA
PEPTAMEN JUNIOR HP	3	PA
PEPTAMEN JUNIOR PHGG	3	PA
PEPTAMEN W-PREBIO1	3	PA
PEPTIDE 1.0	3	PA
PEPTIDE FORMULA 1.5	3	PA
PERATIVE	3	PA
PFD 2	3	PA
PIVOT 1.5 CAL	1	PA
POLYCAL	3	PA
PORTAGEN	3	PA
PROMOTE	3	PA
PROMOTE WITH FIBER	3	PA
PROVIMIN	3	PA
PULMOCARE	3	PA
PURAMINO JR	3	PA
RENA STEP	3	PA
RENAL SUPPORT 1.8	3	PA
RENAMENT	3	PA
S.O.S. 25	3	PA
STANDARD 1.4	1	PA
STANDARD FORMULA 1.0	3	PA
SUPLENA CARB STEADY	3	PA
TOLEREX	3	PA
TYR COOLER ORAL SUSPENSION	3	PA
ULTRIENT 1.5	3	PA
VITAL 1.0 CAL	3	PA
VITAL 1.5 CAL	3	PA
VITAL AF 1.2 CAL	3	PA
VITAL HIGH PROTEIN	3	PA
VITAL PEPTIDE 1.5 CAL	3	PA
VIVONEX PEDIATRIC	3	PA
VIVONEX PLUS	3	PA
VIVONEX RTF	1	PA
VIVONEX T.E.N.	3	PA
XMET XCYS MAXAMAID	3	PA
XTRACAL PLUS	3	PA
<b>NUTRITIONAL PRODUCT - PHENYLKETONURIA (PKU) SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
EAA SUPPLEMENT	3	PA
GLYACTIN 20PE BETTERMILK LITE	3	PA
GLYACTIN BETTERMILK 15-15	3	PA
GLYACTIN BUILD 10-10	3	PA
GLYACTIN BUILD 20-20	3	PA
GLYACTIN BURST 10-10	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
GLYTACTIN BURST 20-20	3	PA
GLYTACTIN RESTORE 10 PE	3	PA
GLYTACTIN RESTORE 10 PE LITE	3	PA
GLYTACTIN RESTORE 5 PE	3	PA
GLYTACTIN RTD 10 PE	3	PA
GLYTACTIN RTD 15 PE	3	PA
GLYTACTIN RTD LITE 15	3	PA
GLYTACTIN SWIRL 15 PE	3	PA
LANAFLEX	3	PA
LOPHLEX	3	PA
PERIFLEX ADVANCE	3	PA
PERIFLEX INFANT	3	PA
PERIFLEX JUNIOR	3	PA
PERIFLEX LQ PKU	3	PA
PHENEX-1	3	PA
PHENEX-2	3	PA
PHENYLADE 40	3	PA
PHENYLADE 60	3	PA
PHENYLADE AMINO ACIDS	3	PA
PHENYLADE ESSENTIAL	3	PA
PHENYLADE GMP	3	PA
PHENYLADE GMP MIX-IN	3	PA
PHENYLADE GMP READY	3	PA
PHENYLADE GMP ULTRA ORAL POWDER IN PACKET 60 GRAM-295 KCAL/100 GRAM, 60 GRAM-321 KCAL/100 GRAM	3	PA
PHENYLADE MTE AMINO ACIDS	3	PA
PHENYLADE PHEBLOC ORAL POWDER IN PACKET	3	PA
PHENYL-FREE 1	3	PA
PHENYL-FREE 2 PKU	3	PA
PHENYL-FREE 2HP PKU	3	PA
PHLEXY-10 DRINK MIX POWDER	3	PA
PKU AIR20	3	PA
PKU COOLER 10	3	PA
PKU COOLER 15	3	PA
PKU COOLER 20	3	PA
PKU EXPRESS15 PLUS	3	PA
PKU EXPRESS20 PLUS	3	PA
PKU GEL POWDER	3	PA
PKU LOPHLEX	3	PA
PKU PERIFLEX EARLY YEARS	3	PA
PKU PERIFLEX JUNIOR PLUS	3	PA
PKU SPHERE15	3	PA
PKU SPHERE20	3	PA
XPHE MAXAMAID	3	PA
XPHE MAXAMUM	3	PA
<b>NUTRITIONAL PRODUCT - PROPIONIC ACIDEMIA SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
MMA-PA ANAMIX EARLY YEARS	3	PA
MMA-PA ANAMIX NEXT	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
MMA-PA COOLER15	3	PA
MMA-PA EXPRESS15	3	PA
MMA-PA GEL	3	PA
MMA-PA MAXAMUM	1	PA
OA 1 POWDER	3	PA
OA2 POWDER	3	PA
PROPIMEX-1	3	PA
PROPIMEX-2	3	PA
XMTVI ANALOG	3	PA
XMTVI MAXAMAID	1	PA
<b>NUTRITIONAL PRODUCT - PROTEIN REPLACEMENTS - DRUGS FOR NUTRITION</b>		
BENEPROTEIN ORAL POWDER	3	PA
BENEPROTEIN ORAL POWDER IN PACKET	1	PA
DECUB-AMINE	3	PA
ENSURE HIGH PROTEIN ORAL POWDER	1	PA
G-PREPROTEIN	3	PA
IMMULIFE	1	PA
JUVEN	3	PA
JUVEN (WITH COLLAGEN)	3	PA
LIQUACEL	3	PA
LIQUID PROTEIN FORTIFIER	3	PA
LPS NEUTRAL FLAVOR	3	PA
NUTRITIONAL DRINK MIX	1	PA
PRE PROTEIN 20	3	PA
PRE-PROTEIN	1	PA
PROCEL	3	PA
PROCEL SINGLES	1	PA
PROMOD PROTEIN	3	PA
PROSOURCE NO CARB	1	PA
PROSOURCE ORAL LIQUID	3	PA
PROSOURCE ORAL PACKET	3	PA
PROSOURCE ORAL POWDER	1	PA
PROSOURCE PLUS	3	PA
PROSOURCE TF	3	PA
PROSOURCE TF 20	3	PA
PROSOURCE ZAC	3	PA
PRO-STAT AWC	1	PA
PRO-STAT MAX ORAL LIQUID	3	PA
PRO-STAT RENAL CARE	3	PA
PRO-STAT SUGAR FREE	3	PA
PROSYNMINIC	3	PA
PROTEIN ORAL POWDER	1	PA
PROTEINEX	3	PA
PROTEINEX-18	3	PA
UNJURY ORAL POWDER	3	PA
WHEY PROTEIN	3	PA
WHEY PROTEIN CONCENTRATE	3	PA

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Product Description	Tier	Limits/Restrictions/Notes
<b>NUTRITIONAL PRODUCT - SULFITE OXIDASE DEFICIENCY SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
SOD ANAMIX EARLY YEARS	3	PA
XMET XCYS MAXAMAID	3	PA
<b>NUTRITIONAL PRODUCT - TYROSINEMIA SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
TYLACTIN BUILD 20 PE	3	PA
TYLACTIN RESTORE 10 PE	3	PA
TYLACTIN RESTORE 5 PE	3	PA
TYLACTIN RTD 15 PE	3	PA
TYR ANAMIX EARLY YEARS	3	PA
TYR ANAMIX NEXT	3	PA
TYR EXPRESS15 PLUS	3	PA
TYR EXPRESS20 PLUS	3	PA
TYR GEL POWDER	3	PA
TYR LOPHLEX	3	PA
TYR LOPHLEX GMP MIX-IN	3	PA
TYREX-1	3	PA
TYREX-2	3	PA
TYROS 1	3	PA
TYROS 2	3	PA
XPHE, XTRP MAXAMAID	3	PA
XPHE, XTYP ANALOG	3	PA
XPTM ANALOG	3	PA
<b>NUTRITIONAL PRODUCT - UREA CYCLE DISORDER SPECIFIC FORMULATION - DRUGS FOR NUTRITION</b>		
CYCLINEX-1	3	PA
CYCLINEX-2	3	PA
ESSENTIAL AMINO ACID MIX	1	PA
UCD ANAMIX JUNIOR	3	PA
WND 1	3	PA
WND 2	3	PA
<b>PEDIATRIC VITAMINS WITH FLUORIDE COMBINATIONS - DRUGS FOR NUTRITION</b>		
FLORIVA	3	Covered in full age 16 and under*
FLORIVA (FLUORIDE-VITAMIN D3)	3	Covered in full age 16 and under*
FLORIVA PLUS	3	Covered in full age 16 and under*
multi-vitamin with fluoride	3	Covered in full age 16 and under*
mvc-fluoride	3	Covered in full age 16 and under*
QUFLORA	3	Covered in full age 16 and under*
QUFLORA PEDIATRIC	3	Covered in full age 16 and under*
QUFLORA PEDIATRIC DROPS	3	Covered in full age 16 and under*
tri-vitamin with fluoride	3	Covered in full age 16 and under*
tri-vite with fluoride	3	Covered in full age 16 and under*
vitamins a,c,d and fluoride	3	Covered in full age 16 and under*
<b>PRENATAL VITAMINS AND MINERALS - DRUGS FOR NUTRITION</b>		
bal-care dha	1	
CLASSIC PRENATAL	1	Covered in full age 11+*
c-nate dha	1	
complete natal dha	1	

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Product Description	Tier	Limits/Restrictions/Notes
m-natal plus	1	
mynatal	1	
mynatal plus	1	
mynatal-z	1	
newgen	1	
ONE DAILY PRENATAL	1	Covered in full age 11+*
pnv-select	1	
pr natal 400	1	
pr natal 400 ec	1	
pr natal 430	1	
pr natal 430 ec	1	
prenatabs fa	1	
prenatabs rx	1	
PRENATAL COMPLETE	1	Covered in full age 11+*
PRENATAL MULTI-DHA (ALGAL OIL)	1	Covered in full age 11+*
PRENATAL MULTIVITAMINS	1	Covered in full age 11+*
PRENATAL ONE DAILY	1	Covered in full age 11+*
PRENATAL ORAL TABLET 28 MG IRON- 800 MCG	1	Covered in full age 11+*
prenatal plus	1	
prenatal plus (calcium carb)	1	
PRENATAL TABLET	1	Covered in full age 11+*
PRENATAL VIT NO.179-IRON-FOLIC	1	Covered in full age 11+*
PRENATAL VITAMIN ORAL TABLET 27 MG IRON- 0.8 MG	1	Covered in full age 11+*
prenatal vitamin plus low iron	1	
PRENATAL VIT-IRON FUM-FOLIC AC	1	Covered in full age 11+*
se-natal 19 chewable	1	
se-natal-19	1	
trinatal rx 1	1	
trinate	1	
wesnatal dha complete	1	
wesnate dha	1	
westab plus	1	
<b>VITAMINS - B PREPARATION COMBINATIONS - DRUGS FOR NUTRITION</b>		
zingiber	1	
<b>VITAMINS - B-12, CYANOCOBALAMIN AND DERIVATIVES - DRUGS FOR NUTRITION</b>		
cyanocobalamin (vitamin b-12) injection	1	
dodex	1	
<b>VITAMINS - B-6, PYRIDOXINE AND DERIVATIVES - DRUGS FOR NUTRITION</b>		
pyridoxine (vitamin b6) injection	1	
<b>VITAMINS - D DERIVATIVES - DRUGS FOR NUTRITION</b>		
calcitriol oral	1	
ergocaliferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)	1	
<b>VITAMINS - FOLIC ACID AND DERIVATIVES - DRUGS FOR NUTRITION</b>		
folic acid injection	1	
folic acid oral tablet 1 mg	1	
FOLIC ACID ORAL TABLET 400 MCG, 800 MCG	1	QL; Covered in full age 11+*

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Product Description	Tier	Limits/Restrictions/Notes
<b>VITAMINS - K, PHYTONADIONE AND DERIVATIVES - DRUGS FOR NUTRITION</b>		
phytonadione (vitamin k1) oral tablet 5 mg	1	
<b>ENDOCRINE - HORMONES</b>		
<b>ABORTIFACIENTS- PROGESTERONE RECEPTOR ANTAGONIST - DRUGS FOR WOMEN</b>		
mifepristone oral tablet 200 mg	1	
<b>ADRENAL STEROID INHIBITORS - HORMONES</b>		
ISTURISA ORAL TABLET 1 MG, 5 MG	3	PA; QL; S
RECORLEV	3	PA; QL; S
<b>ADRENOCORTICOTROPHIC HORMONES - HORMONES</b>		
ACTHAR	3	PA; QL; MS; S
ACTHAR SELFJECT	3	PA; QL; MS; S
CORTROPHIN GEL	3	PA; QL; MS; S
<b>AGENTS TO TREAT HYPOGLYCEMIA (HYPERGLYCEMICS) - DRUGS FOR DIABETES</b>		
BAQSIMI	2	QL
dex4 glucose bits	1	
DEX4 GLUCOSE ORAL GEL IN PACKET	3	
DEX4 GLUCOSE ORAL LIQUID	3	
dex4 glucose oral tablet,chewable	1	
dex4 glucose pouch pack	1	
dex4 glucose quick dissolve	1	
DEXTROSE ORAL LIQUID	3	
GLUCAGON (HCL) EMERGENCY KIT	2	QL
glucagon emergency kit (human)	1	QL
gluco burst	1	
GLUCO SHOT	3	
glucose bits	1	
glucose gel	1	
glucose oral tablet,chewable 4 gram	1	
GLUTOSE-15	3	
GLUTOSE-45	3	
GLUTOSE-5	1	
GVOKE	2	QL
GVOKE HYOPEN 1-PACK	2	QL
GVOKE HYOPEN 2-PACK	2	QL
GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	2	QL
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	2	QL
INSTA-GLUCOSE (WITH DEXTRIN)	3	
PROGLYCEM	3	
RELION GLUCOSE	1	
TRUEPLUS GLUCOSE	3	
<b>AMYLOIDOSIS AGENTS- TRANSTHYRETIN (TTR) STABILIZER - HORMONES</b>		
VYNDAMAX	3	PA; QL; MS; S
VYNDAQEL	3	PA; QL; MS; S
<b>AMYLOIDOSIS AGENTS-TTR SUPPRESSION, ANTISENSE OLIGONUCLEOTIDE-BASED - HORMONES</b>		
WAINUA	3	PA; QL; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANDROGEN - SINGLE AGENTS - DRUGS FOR MEN</b>		
methitest	1	
methyltestosterone oral capsule	1	
NATESTO	3	QL
testosterone 50 mg/5 gram pkt inner	3	
TESTOSTERONE 50 MG/5 GRAM PKT (UPSHER-SMITH)	3	
testosterone cypionate	1	
testosterone enanthate	1	
testosterone transdermal gel	1	
testosterone transdermal gel in metered-dose pump	1	
testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram), 1.62 % (20.25 mg/1.25 gram), 1.62 % (40.5 mg/2.5 gram)	1	
testosterone transdermal solution in metered pump w/app	1	
XYOSTED	3	QL
<b>ANTIDIURETIC AND VASOPRESSOR HORMONES - HORMONES</b>		
desmopressin injection	1	MS; S
desmopressin nasal spray with pump	1	
desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)	1	
desmopressin oral	1	
<b>ANTIHYPERGLYCEMIC - ALPHA-GLUCOSIDASE INHIBITORS - DRUGS FOR DIABETES</b>		
acarbose	1	
miglitol	1	
<b>ANTIHYPERGLYCEMIC - AMYLIN ANALOG-TYPE - DRUGS FOR DIABETES</b>		
SYMLINPEN 120	3	
SYMLINPEN 60	3	
<b>ANTIHYPERGLYCEMIC - DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS - DRUGS FOR DIABETES</b>		
JANUVIA ORAL TABLET 25 MG	2	QL
saxagliptin	1	QL
TRADJENTA	2	QL
<b>ANTIHYPERGLYCEMIC - DUAL GIP AND GLP-1 RECEPTOR AGONISTS - DRUGS FOR DIABETES</b>		
MOUNJARO	2	PA; QL
<b>ANTIHYPERGLYCEMIC - GLUCAGON-LIKE PEPTIDE-1 (GLP-1) RECEPTOR AGONISTS - DRUGS FOR DIABETES</b>		
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	2	PA; QL
RYBELSUS	2	PA; QL
TRULICITY	2	PA; QL
VICTOZA 2-PAK	3	PA; QL
VICTOZA 3-PAK	3	PA; QL
<b>ANTIHYPERGLYCEMIC - GLUCOCORTICOID (CORTISOL) RECEPTOR BLOCKER (GR-II) - DRUGS FOR DIABETES</b>		
mifepristone oral tablet 300 mg	1	PA; QL; MS; S
<b>ANTIHYPERGLYCEMIC - MEGLITINIDE ANALOGS - DRUGS FOR DIABETES</b>		
nateglinide	1	
repaglinide	1	
<b>ANTIHYPERGLYCEMIC - SGLT-2 INHIBITOR AND BIGUANIDE COMBINATIONS - DRUGS FOR DIABETES</b>		
SYNJARDY	2	

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Product Description	Tier	Limits/Restrictions/Notes
SYNJARDY XR	2	QL
XIGDUO XR	2	QL
<b>ANTIHYPERGLYCEMIC - SGLT-2 INHIBITOR AND DPP-4 INHIBITOR COMBINATIONS - DRUGS FOR DIABETES</b>		
GLYXAMBI	2	QL
<b>ANTIHYPERGLYCEMIC - SODIUM GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITORS - DRUGS FOR DIABETES</b>		
FARXIGA	2	QL
JARDIANCE	2	QL
<b>ANTIHYPERGLYCEMIC - SULFONYLUREA AND BIGUANIDE COMBINATIONS - DRUGS FOR DIABETES</b>		
glipizide-metformin	1	
glyburide-metformin	1	
<b>ANTIHYPERGLYCEMIC - SULFONYLUREA DERIVATIVES - DRUGS FOR DIABETES</b>		
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glipizide oral tablet 10 mg, 5 mg	1	
GLIPIZIDE ORAL TABLET 2.5 MG	3	
glipizide oral tablet extended release 24hr	1	
glyburide	1	
glyburide micronized	1	
<b>ANTIHYPERGLYCEMIC - THIAZOLIDINEDIONE AND BIGUANIDE COMBINATIONS - DRUGS FOR DIABETES</b>		
pioglitazone-metformin	1	
<b>ANTIHYPERGLYCEMIC - THIAZOLIDINEDIONE AND SULFONYLUREA COMBINATIONS - DRUGS FOR DIABETES</b>		
pioglitazone-glimepiride	1	QL
<b>ANTIHYPERGLYCEMIC-DIPEPTIDYL PEPTIDASE-4(DPP-4)INHIBITOR AND BIGUANIDE - DRUGS FOR DIABETES</b>		
JENTADUETO	2	QL
JENTADUETO XR	2	QL
saxagliptin-metformin	1	QL
<b>ANTIHYPERGLYCEMIC-INSULIN, LONG ACTING AND GLP-1 RECEPTOR AGONIST COMB - DRUGS FOR DIABETES</b>		
SOLIQUA 100/33	2	QL
XULTOPHY 100/3.6	2	QL
<b>ANTIHYPERGLYCEMIC-SGLT-2 INHIBITOR, DPP-4 INHIBITOR AND BIGUANIDE COMB - DRUGS FOR DIABETES</b>		
TRIJARDY XR	2	
<b>ANTITHYROID AGENTS, THIONAMIDES - IMIDAZOLE DERIVATIVES - DRUGS FOR THYROID</b>		
methimazole oral tablet 10 mg, 5 mg	1	
<b>ANTITHYROID AGENTS, THIONAMIDES - THIOURACIL DERIVATIVES - DRUGS FOR THYROID</b>		
propylthiouracil	1	
<b>BONE FORMATION STIMULATING AGENTS - NATRIURETIC PEPTIDE - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
VOXZOGO	3	PA; QL; MS; S
<b>BONE FORMATION STIMULATING AGENTS - PARATHYROID HORMONE REL PEPTIDES - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
TYMLOS	2	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>BONE FORMATION STIMULATING AGENTS - PARATHYROID HORMONE-TYPE - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (600MCG/2.4ML)	1	PA; QL; MS; S
<b>BONE RESORPTION INHIBITORS - BISPHOSPHONATES - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
alendronate oral solution	1	
alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg	1	QL
ibandronate oral	1	QL
risedronate	1	QL
<b>CALCIMIMETIC, PARATHYROID CALCIUM RECEPTOR SENSITIVITY ENHANCER - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
cinacalcet	1	
<b>CALCITONINS - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
calcitonin (salmon) nasal	1	
<b>ESTROGEN AND SELECTIVE ESTROGEN RECEPTOR MODULATOR (SERM) COMBINATIONS - DRUGS FOR WOMEN</b>		
DUAVEE	2	
<b>ESTROGEN-ANDROGEN - DRUGS FOR WOMEN</b>		
eemt	1	
eemt hs	1	
estrogens-methyltestosterone	1	
<b>ESTROGEN-PROGESTIN - DRUGS FOR WOMEN</b>		
CLIMARA PRO	2	
estradiol-norethindrone acet	1	
fyavolv	1	
jinteli	1	
mimvey	1	
norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	1	
PREMPHASE	2	
PREMPRO	2	
<b>ESTROGENS - DRUGS FOR WOMEN</b>		
dotti	1	
estradiol oral	1	
estradiol transdermal patch semiweekly	1	
estradiol transdermal patch weekly	1	QL
estradiol valerate	1	
lyllana	1	
PREMARIN ORAL	2	
<b>FERTILITY ENHANCER - LUTEAL PHASE SUPPORTING, PROGESTERONE-TYPE - DRUGS FOR WOMEN</b>		
CRINONE VAGINAL GEL 8 %	3	S
ENDOMETRIN	2	PA; S
<b>FERTILITY ENHANCER - OVULATION STIMULANT - SYNTHETIC (NON-FSH) - DRUGS FOR WOMEN</b>		
clomid	1	
clomiphene citrate	1	
<b>FOLLICLE-STIMULATING AND LUTEINIZING HORMONES - DRUGS FOR WOMEN</b>		
MENOPUR	3	PA; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>FOLLICLE-STIMULATING HORMONE (FSH) - DRUGS FOR WOMEN</b>		
FOLLISTIM AQ	3	PA; QL; MS; S
GONAL-F	2	PA; QL; MS; S
GONAL-F RFF	2	PA; QL; MS; S
GONAL-F RFF REDI-JECT	2	PA; QL; MS; S
<b>GLUCOCORTICOID - DRUGS FOR INFLAMMATION</b>		
AGAMREE	3	PA; QL; S
ALKINDI SPRINKLE	3	PA; QL
cortisone	1	
deflazacort oral suspension	1	PA; QL; S
deflazacort oral tablet	1	PA; QL; MS; S
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
hydrocortisone oral	1	
hydrocortisone sod succinate	1	
methylprednisolone	1	
methylprednisolone acetate	1	
prednisolone oral solution	1	
prednisolone sodium phosphate oral	1	
prednisone	1	
prednisone intensol	1	
RAYOS	3	PA; QL
TARPEYO	3	PA; QL; S
<b>GONADOTROPIN INHIBITOR PITUITARY SUPPRESSANTS - DRUGS FOR WOMEN</b>		
danazol	1	
<b>GROWTH HORMONE RECEPTOR ANTAGONISTS - DRUGS FOR GROWTH</b>		
SOMAVERT	3	PA; QL; MS; S
<b>GROWTH HORMONE RELEASING HORMONES (GHRH) - DRUGS FOR GROWTH</b>		
EGRIFTA SV	3	PA; QL; MS; S
<b>GROWTH HORMONES - DRUGS FOR GROWTH</b>		
GENOTROPIN	3	PA; MS; S
GENOTROPIN MINIQUICK	3	PA; MS; S
HUMATROPE INJECTION CARTRIDGE	3	PA; MS; S
NGENLA	3	PA; QL; MS; S
NORDITROPIN FLEXP	3	PA; MS; S
NUTROPIN AQ NUSPIN	3	PA; MS; S
OMNITROPE	2	PA; MS; S
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	3	PA; QL; MS; S
SKYTROFA	3	PA; QL; MS; S
SOGROYA	3	PA; QL; MS; S
ZOMACTON SUBCUTANEOUS RECON SOLN 10 MG	3	PA; MS; S
ZOMACTON SUBCUTANEOUS RECON SOLN 5 MG	3	PA; QL; MS; S
<b>HUMAN CHORIONIC GONADOTROPIN (HCG) - DRUGS FOR WOMEN</b>		
NOVAREL INTRAMUSCULAR RECON SOLN 5,000 UNIT	2	PA; QL; MS; S
OVIDREL	3	PA; MS; S
PREGNYL	2	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>HUMAN INSULINS - FIXED COMBINATIONS - DRUGS FOR DIABETES</b>		
HUMULIN 70/30 U-100 INSULIN	2	
HUMULIN 70/30 U-100 KWIKPEN	2	
<b>HUMAN INSULINS - INTERMEDIATE ACTING - DRUGS FOR DIABETES</b>		
HUMULIN N NPH INSULIN KWIKPEN	2	
HUMULIN N NPH U-100 INSULIN	2	
<b>HUMAN INSULINS - SHORT ACTING - DRUGS FOR DIABETES</b>		
HUMULIN R REGULAR U-100 INSULIN	2	
HUMULIN R U-500 (CONC) INSULIN	2	
HUMULIN R U-500 (CONC) KWIKPEN	2	
<b>INSULIN ANALOGS - FIXED COMBINATIONS - DRUGS FOR DIABETES</b>		
HUMALOG MIX 50-50 KWIKPEN	2	
HUMALOG MIX 75-25 KWIKPEN	2	
HUMALOG MIX 75-25(U-100)INSULN	2	
INSULIN LISPRO PROTAMIN-LISPRO	2	
<b>INSULIN ANALOGS - LONG ACTING - DRUGS FOR DIABETES</b>		
BASAGLAR KWIKPEN U-100 INSULIN	3	
BASAGLAR TEMPO PEN(U-100)INSULIN	3	
INSULIN DEGLUDEC	2	
INSULIN GLARGINE U-300 CONC	2	
INSULIN GLARGINE-YFGN	2	
LANTUS SOLOSTAR U-100 INSULIN	2	
LANTUS U-100 INSULIN	2	
TOUJEO MAX U-300 SOLOSTAR	2	
TOUJEO SOLOSTAR U-300 INSULIN	2	
TRESIBA FLEXTOUCH U-100	2	
TRESIBA FLEXTOUCH U-200	2	
TRESIBA U-100 INSULIN	2	
<b>INSULIN ANALOGS - RAPID ACTING - DRUGS FOR DIABETES</b>		
HUMALOG JUNIOR KWIKPEN U-100	2	
HUMALOG KWIKPEN INSULIN	2	
HUMALOG TEMPO PEN(U-100)INSULN	2	
HUMALOG U-100 INSULIN	2	
INSULIN LISPRO	2	
LYUMJEV KWIKPEN U-100 INSULIN	2	
LYUMJEV KWIKPEN U-200 INSULIN	2	
LYUMJEV TEMPO PEN(U-100)INSULN	2	
LYUMJEV U-100 INSULIN	2	
<b>INSULIN RESPONSE ENHANCERS - BIGUANIDES - DRUGS FOR DIABETES</b>		
metformin oral tablet 1,000 mg, 500 mg, 850 mg	1	
metformin oral tablet extended release (generic version of glucophage xr)	1	
<b>INSULIN RESPONSE ENHANCERS - THIAZOLIDINEDIONES (PPAR-GAMMA AGONISTS) - DRUGS FOR DIABETES</b>		
pioglitazone	1	
<b>INSULIN-LIKE GROWTH FACTOR-1 (IGF-1) - HORMONES</b>		
INCRELEX	3	PA; MS; S
<b>LEPTIN HORMONE ANALOGS - HORMONES</b>		
MYALEPT	3	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>LHRH (GNRH) AGONIST ANALOG PITUITARY SUPPRESSANTS - DRUGS FOR WOMEN</b>		
SYNAREL	3	PA; QL
<b>LHRH (GNRH) ANTAGONIST, ESTROGEN AND PROGESTIN COMBINATIONS - DRUGS FOR WOMAN</b>		
MYFEMBREE	3	PA; QL
ORIAHNN	3	PA; QL
<b>LHRH (GNRH) ANTAGONISTS - DRUGS FOR WOMEN</b>		
cetrorelix	1	PA; S
fyremadel	1	PA; MS; S
ganirelix acet 250 mcg/0.5 ml suv (organon)	3	PA; MS; S
ganirelix subcutaneous syringe 250 mcg/0.5 ml	1	PA; MS; S
ORLISSA	3	PA; QL
<b>MINERALOCORTICIDS - DRUGS FOR INFLAMMATION</b>		
fludrocortisone	1	
<b>OXYTOCIC - ERGOT ALKALOIDS - DRUGS FOR WOMEN</b>		
methylergonovine oral	1	QL
<b>PARATHYROID HORMONES AND ANALOGS - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
YORVIPATH	3	PA; QL; S
<b>PROGESTINS - DRUGS FOR WOMEN</b>		
GALLIFREY	1	
medroxyprogesterone oral	1	
norethindrone acetate	1	
progesterone	1	MS; S
progesterone micronized	1	
<b>PROLACTIN INHIBITOR - ERGOT DERIVATIVE DOPAMINE RECEPTOR AGONISTS - DRUGS FOR WOMEN</b>		
cabergoline	1	
<b>RANK LIGAND (RANKL) INHIBITOR, MC ANTIBODY - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
PROLIA	3	PA; QL; MS; S
<b>SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS) - DRUGS FOR MENOPAUSE AND BONE LOSS</b>		
raloxifene	1	Covered in full*
<b>SOMATOSTATIC AGENTS - DRUGS FOR GROWTH</b>		
lanreotide subcutaneous syringe 120 mg/0.5 ml	1	QL; MS; S
octreotide acetate	1	MS; S
octreotide,microspheres	1	PA; QL; MS; S
SIGNIFOR	3	PA; S
<b>THYROID HORMONES - ANIMAL SOURCE (PORCINE) - DRUGS FOR THYROID</b>		
adthyza oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	1	
ADTHYZA ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG	3	
ARMOUR THYROID	3	
niva thyroid	1	
np thyroid	1	
thyroid (pork)	1	
<b>THYROID HORMONES - SYNTHETIC T3 (TRIIODOTHYRONINE) - DRUGS FOR THYROID</b>		
liothyronine oral	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>THYROID HORMONES - SYNTHETIC T4 (THYROXINE) - DRUGS FOR THYROID</b>		
euthyrox	1	
levo-t	1	
levothyroxine oral tablet	1	
levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	
<b>SYNTHROID</b>		
unithroid	1	
<b>GASTROINTESTINAL THERAPY AGENTS</b>		
<b>FECAL MICROBIOTA TRANSPLANTATION (FMT)</b>		
VOWST	3	PA; QL; S
<b>GASTROINTESTINAL THERAPY AGENTS - DRUGS FOR THE STOMACH</b>		
<b>ANTIDIARRHEAL - ANTIPERISTALTIC AGENTS - DRUGS FOR DIARRHEA</b>		
loperamide oral capsule	1	
opium tincture	1	
<b>ANTIDIARRHEAL - GASTROINTESTINAL CHLORIDE CHANNEL INHIBITORS - DRUGS FOR DIARRHEA</b>		
MYTESI	3	PA; QL; S
<b>ANTIDIARRHEAL - TRYPTOPHAN HYDROXYLASE INHIBITOR - DRUGS FOR DIARRHEA</b>		
XERMELO	3	PA; QL; S
<b>ANTIDIARRHEAL ANTIPERISTALTIC-ANTICHOLINERGIC COMBINATIONS - DRUGS FOR DIARRHEA</b>		
diphenoxylate-atropine	1	
<b>ANTIDIARRHEAL OPIOID AGENTS - DRUGS FOR DIARRHEA</b>		
opium tincture	1	
<b>ANTIEMETIC - ANTICHOLINERGICS - DRUGS FOR VOMITING AND NAUSEA</b>		
scopolamine base	1	
<b>ANTIEMETIC - ANTIHISTAMINES - DRUGS FOR VOMITING AND NAUSEA</b>		
meclizine oral tablet 12.5 mg, 25 mg	1	
<b>ANTIEMETIC - CANNABINOID TYPE - DRUGS FOR VOMITING AND NAUSEA</b>		
dronabinol	1	
SYNDROS	2	PA
<b>ANTIEMETIC - DOPAMINE (D2)/5-HT3 ANTAGONISTS - DRUGS FOR VOMITING AND NAUSEA</b>		
trimethobenzamide oral	1	
<b>ANTIEMETIC - PHENOTHIAZINES - DRUGS FOR VOMITING AND NAUSEA</b>		
compro	1	
prochlorperazine	1	
prochlorperazine maleate	1	
promethazine oral	1	
promethazine rectal suppository 12.5 mg, 25 mg	1	
promethegan	1	
<b>ANTIEMETIC - SELECTIVE SEROTONIN 5-HT3 ANTAGONISTS - DRUGS FOR VOMITING AND NAUSEA</b>		
granisetron hcl oral	1	QL
ondansetron hcl oral solution	1	
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron oral tablet, disintegrating 4 mg, 8 mg	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>ANTIEMETIC - SUBSTANCE P-NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS - DRUGS FOR VOMITING AND NAUSEA</b>		
aprepitant	1	QL
<b>BILE ACIDS - DRUGS FOR THE STOMACH</b>		
CHOLBAM	3	PA; QL; S
<b>CHRONIC IDIOPATHIC CONST. AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS - DRUGS FOR CONSTIPATION</b>		
LINZESS	2	QL
TRULANCE	2	QL
<b>COLONIC ACIDIFIER (AMMONIA INHIBITOR) - DRUGS FOR THE STOMACH</b>		
enulose	1	
generlac	1	
lactulose oral solution 10 gram/15 ml	1	
<b>DIGESTIVE ENZYME MIXTURES - DRUGS FOR THE STOMACH</b>		
CREON	2	
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	2	
<b>DIGESTIVE ENZYMES - DRUGS FOR THE STOMACH</b>		
SUCRAID	3	PA; S
<b>GALLSTONE SOLUBILIZING (LITHOLYSIS) AGENTS - DRUGS FOR THE STOMACH</b>		
RELTONE	3	PA; QL
ursodiol oral capsule 200 mg, 400 mg	1	PA; QL
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
<b>GASTRIC ACID SECRETION REDUCER - HISTAMINE H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID</b>		
cimetidine hcl oral	1	
cimetidine oral tablet 300 mg, 400 mg, 800 mg	1	
famotidine oral suspension for reconstitution	1	
famotidine oral tablet 20 mg, 40 mg	1	
nizatidine oral capsule	1	
<b>GASTRIC ACID SECRETION REDUCER - PROTON PUMP INHIBITORS (PPIS) - DRUGS FOR ULCERS AND STOMACH ACID</b>		
esomeprazole magnesium oral capsule,delayered release(dr/ec)	1	QL
lansoprazole oral capsule,delayered release(dr/ec)	1	QL
omeprazole oral capsule,delayered release(dr/ec)	1	QL
pantoprazole oral tablet,delayered release (dr/ec)	1	QL
rabeprazole oral tablet,delayered release (dr/ec)	1	QL
<b>GASTRIC MUCOSA - CYTOPROTECTIVE PROSTAGLANDIN ANALOGS - DRUGS FOR ULCERS AND STOMACH ACID</b>		
misoprostol	1	
<b>GASTROINTESTINAL PROKINETIC AGENTS - D2 ANTAGONIST/5-HT4 AGONISTS - DRUGS FOR THE STOMACH</b>		
GIMOTI	3	PA; QL; S
metoclopramide hcl oral solution	1	
metoclopramide hcl oral tablet	1	
<b>GI ANTISPASMODIC - BELLADONNA ALKALOIDS - DRUGS FOR STOMACH CRAMPS</b>		
ed-spaz	1	

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Product Description	Tier	Limits/Restrictions/Notes
hyoscyamine sulfate oral	1	
hyoscyamine sulfate sublingual	1	
hyosyne	1	
methscopolamine	1	
oscimin	1	
oscimin sl	1	
symax fastabs	1	
symax-sl	1	
<b>GI ANTISPASMODIC - QUATERNARY AMMONIUM COMPOUNDS - DRUGS FOR STOMACH CRAMPS</b>		
DARTISLA	3	PA; QL
GLYCATE	3	PA
glycopyrrolate oral tablet 1 mg, 2 mg	1	
glycopyrrolate oral tablet 1.5 mg	1	PA
<b>GI ANTISPASMODIC - SYNTHETIC TERTIARY AMINES - DRUGS FOR STOMACH CRAMPS</b>		
dicyclomine oral capsule	1	
dicyclomine oral solution	1	
dicyclomine oral tablet	1	
<b>H. PYLORI THERAPY - PROTON PUMP INHIBITOR AND ANTIBIOTICS COMBINATIONS - DRUGS FOR ULCERS AND STOMACH ACID</b>		
amoxicil-clarithromy-lansopraz	1	
<b>IBS AGENT - GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATOR AGENTS - DRUGS FOR IRRITABLE BOWEL SYNDROME</b>		
lubiprostone	1	QL
<b>IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS - DRUGS FOR IRRITABLE BOWEL SYNDROME</b>		
LINZESS	2	QL
TRULANCE	2	QL
<b>INFLAMMATORY BOWEL AGENT - INTERLEUKIN-12 AND IL-23 INHIBITORS, MC AB - DRUGS FOR INFLAMMATORY BOWEL DISEASE</b>		
STELARA SUBCUTANEOUS SOLUTION	2	PA; QL; MS; S
STELARA SUBCUTANEOUS SYRINGE 90 MG/ML	2	PA; QL; MS; S
<b>INFLAMMATORY BOWEL AGENT - INTERLEUKIN-23 (IL-23) INHIBITOR, MC AB - DRUGS FOR INFLAMMATORY BOWEL DISEASE</b>		
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR	2	PA; QL; MS; S
TREMFYA SUBCUTANEOUS SYRINGE 200 MG/2 ML	2	PA; MS; S
<b>INFLAMMATORY BOWEL AGENT - AMINOSALICYLATES AND RELATED AGENTS - DRUGS FOR INFLAMMATORY BOWEL DISEASE</b>		
balsalazide	1	
mesalamine	1	
PENTASA	2	
sulfasalazine	1	
<b>INFLAMMATORY BOWEL AGENT - GLUCOCORTICOIDS - DRUGS FOR INFLAMMATORY BOWEL DISEASE</b>		
budesonide oral capsule, delayed, extend. release	1	
budesonide oral tablet, delayed and ext. release	1	QL
budesonide rectal	1	PA; QL
hydrocortisone rectal	1	
<b>INFLAMMATORY BOWEL AGENT - JANUS KINASE (JAK) INHIBITORS - DRUGS FOR INFLAMMATORY BOWEL DISEASE</b>		
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 45 MG	2	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
XELJANZ ORAL TABLET	2	PA; QL; MS; S
XELJANZ XR	2	PA; QL; MS; S
<b>INFLAMMATORY BOWEL AGENT - SPHINGOSINE 1-PHOSPHATE RECEPTOR MODULATOR - DRUGS FOR IRRITABLE BOWEL SYNDROME</b>		
ZEPOSIA	2	PA; QL; MS; S
ZEPOSIA STARTER KIT (28-DAY)	2	PA; QL; MS; S
ZEPOSIA STARTER PACK (7-DAY)	2	PA; QL; MS; S
<b>INFLAMMATORY BOWEL AGENT - TUMOR NECROSIS FACTOR ALPHA BLOCKERS - DRUGS FOR INFLAMMATORY BOWEL DISEASE</b>		
CIMZIA STARTER KIT	3	PA; QL; MS; S
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	3	PA; QL; MS; S
CYLTEZO(CF) PEN CROHN'S-UC-HS	2	PA; QL; MS; S
CYLTEZO(CF) PEN PSORIASIS-UV	2	PA; QL; MS; S
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	2	MS; S
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	2	PA; QL; MS; S
CYLTEZO(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.4 ML, 40 MG/0.4 ML, 40 MG/0.8 ML	2	PA; QL; MS; S
HADLIMA	2	PA; QL; MS; S
HADLIMA PUSHTOUCH	2	PA; QL; MS; S
HADLIMA(CF)	2	PA; QL; MS; S
HADLIMA(CF) PUSHTOUCH	2	PA; QL; MS; S
HUMIRA PEN (ABBVIE)	2	PA; QL; MS; S
HUMIRA SYRINGE KIT (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN CROHNS-UC-HS (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN PEDIATRIC UC (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ABBVIE)	2	PA; QL; MS; S
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	2	PA; QL; MS; S
SIMLANDI(CF) AUTOINJECTOR	2	PA; QL; MS; S
YUFLYMA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML	3	QL; S
<b>IRRITABLE BOWEL SYNDROME (IBS) AGENTS - DRUGS FOR IRRITABLE BOWEL SYNDROME</b>		
lubiprostone	1	QL
<b>LAXATIVE - SALINE AND OSMOTIC - DRUGS TO PREVENT CONSTIPATION</b>		
CITRATE OF MAGNESIA	1	Covered in full age 50-75 (limit 2 Rx per year)*
CITROMA	1	Covered in full age 50-75 (limit 2 Rx per year)*
CLEARLAX ORAL POWDER	1	Covered in full age 50-75 (limit 2 Rx per year)*
constulose	1	
GAVILAX ORAL POWDER	1	Covered in full age 50-75 (limit 2 Rx per year)*
GENTLELAX	1	Covered in full age 50-75 (limit 2 Rx per year)*
KRISTALOSE ORAL PACKET 10 GRAM	3	PA; QL
KRISTALOSE ORAL PACKET 20 GRAM	3	PA
lactulose oral packet	1	PA; QL
lactulose oral solution	1	
LAXATIVE PEG 3350	1	Covered in full age 50-75 (limit 2 Rx per year)*
MAGNESIUM CITRATE ORAL SOLUTION	1	Covered in full age 50-75 (limit 2 Rx per year)*
MAGNESIUM HYDROXIDE ORAL SUSPENSION 400 MG/5 ML	1	Covered in full age 50-75 (limit 2 Rx per year)*
MILK OF MAGNESIA	1	Covered in full age 50-75 (limit 2 Rx per year)*
MILK OF MAGNESIA CONCENTRATED	1	Covered in full age 50-75 (limit 2 Rx per year)*
polyethylene glycol 3350 oral powder	1	Covered in full age 50-75 (limit 2 Rx per year)*

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Product Description	Tier	Limits/Restrictions/Notes
POWDERLAX ORAL POWDER	1	Covered in full age 50-75 (limit 2 Rx per year)*
PURELAX ORAL POWDER	1	Covered in full age 50-75 (limit 2 Rx per year)*
SMOOTHLAX ORAL POWDER	1	Covered in full age 50-75 (limit 2 Rx per year)*
<b>LAXATIVE - SALINE/OSMOTIC MIXTURES - DRUGS TO PREVENT CONSTIPATION</b>		
gavilyte-c	1	Covered in full age 50-75 (limit 2 Rx per year)*
gavilyte-g	1	Covered in full age 50-75 (limit 2 Rx per year)*
gavilyte-n	1	Covered in full age 50-75 (limit 2 Rx per year)*
ORAL SALINE LAXATIVE	1	Covered in full age 50-75 (limit 2 Rx per year)*
peg 3350-electrolytes	1	Covered in full age 50-75 (limit 2 Rx per year)*
peg3350-sod sul-nacl-kcl-asb-c	1	QL; Covered in full age 50-75 (limit 2 Rx per year)*
peg-electrolyte soln	1	Covered in full age 50-75 (limit 2 Rx per year)*
PHOSPHATE LAXATIVE	1	Covered in full age 50-75 (limit 2 Rx per year)*
sodium,potassium,mag sulfates	1	Covered in full age 50-75 (limit 2 Rx per year)*
<b>LAXATIVE - STIMULANT - DRUGS TO PREVENT CONSTIPATION</b>		
BISACODYL ORAL	1	Covered in full age 50-75 (limit 2 Rx per year)*
GENTLE LAXATIVE (BISACODYL) ORAL	1	Covered in full age 50-75 (limit 2 Rx per year)*
LAXATIVE (BISACODYL) ORAL TABLET,DELAYED RELEASE (DR/EC)	1	Covered in full age 50-75 (limit 2 Rx per year)*
WOMEN'S GENTLE LAXATIVE(BISAC)	1	Covered in full age 50-75 (limit 2 Rx per year)*
<b>LAXATIVE - STIMULANT AND SALINE/OSMOTIC COMBINATIONS - DRUGS TO PREVENT CONSTIPATION</b>		
CLENPIQ ORAL SOLUTION 10 MG-3.5 GRAM- 12 GRAM/175 ML	2	Covered in full age 50-75 (limit 2 Rx per year)*
<b>PEPTIC ULCER - GASTRIC LUMEN ADHERENT CYTOPROTECTIVES - DRUGS FOR ULCERS AND STOMACH ACID</b>		
sucralfate oral tablet	1	
<b>SHORT BOWEL SYNDROME (SBS) - GLUCAGON-LIKE PEPTIDE-2 (GLP-2) ANALOG - DRUGS FOR THE STOMACH</b>		
GATTEX 30-VIAL	3	PA; QL; MS; S
GATTEX ONE-VIAL	3	PA; QL; MS; S
<b>SHORT BOWEL SYNDROME (SBS) AGENTS - DRUGS FOR THE STOMACH</b>		
octreotide acetate	1	MS; S
octreotide,microspheres	1	PA; QL; MS; S
<b>GENITOURINARY THERAPY - DRUGS FOR THE URINARY SYSTEM</b>		
<b>BPH AGENT- 5-ALPHA-REDUCTASE AND PHOSPHODIESTERASE-5 (PDE5) INHIBITORS - DRUGS FOR THE PROSTATE</b>		
ENTADFI	3	QL
<b>CYSTINOSIS THERAPY (CYSTINE DEPLETING AGENTS) - DRUGS FOR THE URINARY SYSTEM</b>		
CYSTAGON	3	S
PROCYSBI	3	PA; QL; MS; S
<b>INTERSTITIAL CYSTITIS AGENTS - DRUGS FOR THE URINARY SYSTEM</b>		
ELMIRON	3	
<b>KIDNEY STONE AGENTS - DRUGS FOR THE URINARY SYSTEM</b>		
tiopronin	1	PA; QL; MS; S
<b>OVERACTIVE BLADDER AGENTS - BETA -3 ADRENERGIC RECEPTOR AGONIST - DRUGS FOR THE BLADDER</b>		
GEMTESA	2	QL
mirabegron	1	QL
MYRBETRIQ	2	QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>OXALOSIS AGENT - OXALATE INHIBITOR, SMALL INTERFERING RNA DIRECTED - DRUGS FOR THE URINARY SYSTEM</b>		
RIVFLOZA	3	PA; QL; S
<b>PHOSPHATE BINDERS - CALCIUM-BASED - DRUGS FOR THE URINARY SYSTEM</b>		
calcium acetate(phosphat bind)	1	
<b>PHOSPHATE BINDERS - DRUGS FOR THE URINARY SYSTEM</b>		
calcium acetate(phosphat bind)	1	
sevelamer carbonate oral powder in packet	2	
sevelamer carbonate oral tablet	1	
<b>POLYCYSTIC KIDNEY DISEASE - VASOPRESSIN V2 RECEPTOR ANTAGONISTS - DRUGS FOR THE URINARY SYSTEM</b>		
JYNARQUE	3	PA; QL; S
<b>PROSTATIC HYPERTROPHY AGENT - ALPHA-1-ADRENOCEPTOR ANTAGONISTS - DRUGS FOR THE PROSTATE</b>		
alfuzosin	1	QL
silodosin	1	QL
tamsulosin	1	QL
<b>PROSTATIC HYPERTROPHY AGENT - TYPE II 5-ALPHA REDUCTASE INHIBITORS - DRUGS FOR THE PROSTATE</b>		
finasteride oral tablet 5 mg	1	
<b>PROSTATIC HYPERTROPHY AGENT-SEL.CGMP PHOSPHODIESTERASE TYPES INHIBITOR - DRUGS FOR THE PROSTATE</b>		
tadalafil oral tablet 2.5 mg, 5 mg	1	QL
<b>PROSTATIC HYPERTROPHY AGENT-TYPE I AND II 5-ALPHA REDUCTASE INHIBITORS - DRUGS FOR THE PROSTATE</b>		
dutasteride	1	QL
<b>URINARY ACIDIFIER - PHOSPHATES - DRUGS FOR INFECTIONS</b>		
K-PHOS NO 2	3	
K-PHOS ORIGINAL	3	
<b>URINARY ALKALINIZER - CITRATES - DRUGS FOR INFECTIONS</b>		
potassium citrate oral tablet extended release	1	
<b>URINARY ANALGESICS - DRUGS FOR INFECTIONS</b>		
phenazopyridine oral tablet 100 mg, 200 mg	1	
<b>URINARY ANTIBACTERIAL - METHENAMINE AND SALTS - DRUGS FOR INFECTIONS</b>		
methenamine hippurate	1	
methenamine mandelate	1	
<b>URINARY ANTIBACTERIAL - NITROFURAN DERIVATIVES - DRUGS FOR INFECTIONS</b>		
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
nitrofurantoin oral suspension 25 mg/5 ml	1	
<b>URINARY ANTIBACTERIALS OTHER - DRUGS FOR INFECTIONS</b>		
fosfomycin tromethamine	1	
<b>URINARY ANTI-INFECTIVE METHENAMINE-ANTISPAS-ANALG COMBINATIONS - DRUGS FOR INFECTIONS</b>		
urimar-t oral tablet	1	
uro-mp	1	
<b>URINARY ANTI-INFECTIVE METHENAMINE-ANTISPASMODIC COMBINATIONS - DRUGS FOR INFECTIONS</b>		
methen-sod phos-meth blue-hyos	1	

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Product Description	Tier	Limits/Restrictions/Notes
urogesic-blue	1	
uryl	1	
<b>URINARY ANTISPASMODIC - ANTICHOL., M(3) MUSCARINIC SELECTIVE (BLADDER) - DRUGS FOR THE BLADDER</b>		
darifenacin	1	QL
solifenacin	1	QL
VESICARE LS	3	PA; QL
<b>URINARY ANTISPASMODIC - ANTICHOLINERGICS, NON-SELECTIVE - DRUGS FOR THE BLADDER</b>		
ed-spaz	1	
hyoscyamine sulfate oral	1	
hyoscyamine sulfate sublingual	1	
hyosyne	1	
oscimin	1	
oscimin sl	1	
symax fastabs	1	
symax-sl	1	
<b>URINARY ANTISPASMODIC - SMOOTH MUSCLE RELAXANTS - DRUGS FOR THE BLADDER</b>		
fesoterodine	1	QL
flavoxate	1	
oxybutynin chloride oral syrup	1	
OXYBUTYNIN CHLORIDE ORAL TABLET 2.5 MG	3	
oxybutynin chloride oral tablet 5 mg	1	
oxybutynin chloride oral tablet extended release 24hr	1	
tolterodine	1	QL
trospium	1	QL
<b>URINARY RETENTION THERAPY - PARASYMPATHOMIMETIC AGENTS - DRUGS FOR THE BLADDER</b>		
bethanechol chloride	1	
<b>GOUT AND HYPERURICEMIA THERAPY - DRUGS FOR PAIN AND FEVER</b>		
<b>GOUT ACUTE THERAPY - ANTIMITOTICS - GOUT DRUGS</b>		
colchicine oral tablet	1	QL
<b>GOUT AND HYPERURICEMIA - ANTIMITOTIC-URICOSURIC COMBINATIONS - GOUT DRUGS</b>		
probenecid-colchicine	1	
<b>HYPERURICEMIA THERAPY - URICOSURICS - GOUT DRUGS</b>		
probenecid	1	
<b>HYPERURICEMIA THERAPY - XANTHINE OXIDASE INHIBITORS - GOUT DRUGS</b>		
allopurinol oral tablet 100 mg, 300 mg	1	
febuxostat	1	QL
<b>HEMATOLOGICAL AGENTS</b>		
<b>PNH - COMPLEMENT FACTOR B INHIBITORS</b>		
FABHALTA	3	PA; QL; MS; S
<b>PNH - COMPLEMENT FACTOR D INHIBITORS</b>		
VOYDEYA	3	PA; QL; MS; S
<b>HEMATOLOGICAL AGENTS - DRUGS FOR THE BLOOD</b>		
<b>AGENTS TO TREAT ATTP- ANTI VON WILLEBRAND FACTOR (VWF) A1 DOMAIN - DRUGS FOR THE BLOOD</b>		
CABLIVI INJECTION KIT	3	PA; QL; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>AGENTS TO TREAT PAROXYSMAL NOCTURNAL HEMOGLOBINURIA (PNH) - DRUGS FOR THE BLOOD</b>		
EMPAVELI	3	PA; S
FABHALTA	3	PA; QL; MS; S
VOYDEYA	3	PA; QL; MS; S
<b>ANTICOAGULANTS - COUMARIN - DRUGS TO PREVENT BLOOD CLOTS</b>		
jantoven	1	
warfarin	1	
<b>BLOOD CELL AND PLATELET DISORDER TX-SPLEEN TYROSINE KINASE INHIBITORS - DRUGS FOR THE BLOOD</b>		
TAVALLISSE	3	PA; QL; S
<b>C1 ESTERASE INHIBITOR AGENTS - DRUGS FOR THE BLOOD</b>		
BERINERT INTRAVENOUS KIT	3	PA; QL; MS; S
CINRYZE	3	PA; QL; MS; S
HAEGARDA	2	PA; MS; S
RUCONEST	3	PA; QL; MS; S
<b>CXCR4 CHEMOKINE RECEPTOR ANTAGONISTS - DRUGS FOR THE BLOOD</b>		
plerixafor	1	QL; MS; S
XOLREMDI	3	PA; QL; S
<b>DIRECT FACTOR XA INHIBITORS - DRUGS TO PREVENT BLOOD CLOTS</b>		
ELIQUIS	2	QL
ELIQUIS DVT-PE TREAT 30D START	2	QL
XARELTO	2	QL
XARELTO DVT-PE TREAT 30D START	2	
<b>ERYTHROPOIETINS - DRUGS FOR THE BLOOD</b>		
ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	2	MS; S
ARANESP (IN POLYSORBATE) INJECTION SYRINGE	2	MS; S
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	3	MS; S
PROCRIT	3	MS; S
RETACRIT	3	MS; S
<b>GRANULOCYTE COLONY-STIMULATING FACTOR (G-CSF) - DRUGS FOR THE BLOOD</b>		
FULPHILA	3	PA; MS; S
FYLNETRA	3	PA; S
GRANIX	3	PA; MS; S
NEULASTA	3	MS; S
NEULASTA ONPRO	3	MS; S
NEUPOGEN	3	PA; MS; S
NIVESTYM	3	PA; MS; S
NYVEPRIA	3	PA; MS; S
RELEUKO SUBCUTANEOUS	3	PA; MS; S
STIMUFEND	3	PA; MS; S
UDENYCA	2	MS; S
UDENYCA AUTOINJECTOR	2	MS; S
UDENYCA ONBODY	2	MS; S
ZARXIO	2	MS; S
ZIEXTENZO	3	PA; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>GRANULOCYTE-MACROPHAGE COLONY-STIMULATING FACTOR (GM-CSF) - DRUGS FOR THE BLOOD</b>		
LEUKINE INJECTION RECON SOLN	3	QL; MS; S
<b>HEMATORHEOLOGIC AGENTS - DRUGS FOR THE BLOOD</b>		
pentoxifylline	1	
<b>HEMOPHILIA TREATMENT AGENTS - MONOCLONAL ANTIBODY - DRUGS FOR THE BLOOD</b>		
HEMLIBRA	3	PA; MS; S
<b>HEMOSTATIC SYSTEMIC - ANTIFIBRINOLYTIC AGENTS - DRUGS TO PREVENT BLEEDING</b>		
aminocaproic acid oral	1	
tranexamic acid oral	1	QL
<b>HEPARIN FLUSH FORMULATIONS - DRUGS TO PREVENT BLOOD CLOTS</b>		
hep flush-10 (pf)	1	
<b>HEPARINS - DRUGS TO PREVENT BLOOD CLOTS</b>		
hep flush-10 (pf)	1	
<b>INDIRECT FACTOR XA INHIBITORS - DRUGS TO PREVENT BLOOD CLOTS</b>		
fondaparinux	1	S
<b>LOW MOLECULAR WEIGHT HEPARINS - DRUGS TO PREVENT BLOOD CLOTS</b>		
enoxaparin	1	S
<b>PLASMA PROTEINS WHICH FACILITATE ANTICOAGULATION - DRUGS FOR THE BLOOD</b>		
RYPLAZIM	3	PA; QL; S
<b>PLATELET AGGREGATION INHIB - CYCLOPENTYL-TRIAZOLO-PYRIMIDINES (CPTPS) - DRUGS FOR THE BLOOD</b>		
BRILINTA ORAL TABLET 60 MG	2	
BRILINTA ORAL TABLET 90 MG	2	QL
<b>PLATELET AGGREGATION INHIBITOR COMBINATIONS - DRUGS FOR THE BLOOD</b>		
aspirin-dipyridamole	1	
<b>PLATELET AGGREGATION INHIBITORS - PHOSPHODIESTERASE III INHIBITORS - DRUGS FOR THE BLOOD</b>		
cilostazol	1	
<b>PLATELET AGGREGATION INHIBITORS - QUINAZOLINE AGENTS - DRUGS FOR THE BLOOD</b>		
anagrelide	1	
<b>PLATELET AGGREGATION INHIBITORS - SALICYLATES - DRUGS FOR THE BLOOD</b>		
ASPIRIN CHILDRENS	1	QL; Covered in full age 59 and under*
ASPIRIN ORAL TABLET,CHEWABLE	1	QL; Covered in full age 59 and under*
aspirin oral tablet,delayed release (dr/ec) 81 mg	1	QL; Covered in full age 59 and under*
bayer low dose aspirin	1	QL; Covered in full age 59 and under*
CHILDREN'S ASPIRIN	1	QL; Covered in full age 59 and under*
ecotrin low strength	1	QL; Covered in full age 59 and under*
<b>PLATELET AGGREGATION INHIBITORS - THIENOPYRIDINE AGENTS - DRUGS FOR THE BLOOD</b>		
clopidogrel oral tablet 300 mg	1	
clopidogrel oral tablet 75 mg	1	QL
prasugrel	1	QL
<b>PLATELET AGGREGATION INHIB-PDESTERASE AND ADENOSINE DEAMINASE INHIBITR - DRUGS FOR THE BLOOD</b>		
dipyridamole oral	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>PNH - COMPLEMENT (C3) INHIBITORS - DRUGS FOR THE BLOOD</b>		
EMPAVELI	3	PA; S
<b>PYRUVATE KINASE (PK) ACTIVATORS - DRUGS FOR THE BLOOD</b>		
PYRUKYND 5 MG TABLET	3	PA; QL
PYRUKYND 5 MG TAPER PACK	3	PA; QL
PYRUKYND ORAL TABLET 20 MG, 50 MG	3	PA; QL; S
PYRUKYND ORAL TABLETS,DOSE PACK	3	PA; QL; S
<b>SICKLE CELL ANEMIA AGENTS, OTHERS - DRUGS FOR THE BLOOD</b>		
glutamine (sickle cell)	1	PA; QL; MS; S
SIKLOS	3	PA
<b>THROMBIN INHIBITOR - SELECTIVE DIRECT AND REVERSIBLE - DRUGS TO PREVENT BLOOD CLOTS</b>		
dabigatran etexilate	1	QL
<b>THROMBOPOIETIN RECEPTOR AGONISTS - DRUGS FOR THE BLOOD</b>		
ALVAIZ	3	PA; QL; MS; S
DOPTELET (10 TAB PACK)	3	PA; QL; MS; S
DOPTELET (15 TAB PACK)	3	PA; QL; MS; S
DOPTELET (30 TAB PACK)	3	PA; QL; MS; S
MULPLETA	3	PA; QL; MS; S
PROMACTA	3	PA; QL; MS; S
<b>HEPATOBIILIARY SYSTEM TREATMENT AGENTS</b>		
<b>NON-ALCOHOLIC STEATOHEPATITIS (NASH) AGENTS - THR-BETA AGONIST</b>		
REZDIFFRA	3	PA; QL; MS; S
<b>PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR (PPAR) AGONIST</b>		
IQIRVO	3	PA; QL; MS; S
LIVDELZI	3	PA; QL; S
<b>HEPATOBIILIARY SYSTEM TREATMENT AGENTS - DRUGS FOR THE LIVER</b>		
<b>FARNESOID X RECEPTOR (FXR) AGONIST, BILE ACID ANALOG - DRUGS FOR THE LIVER</b>		
OALIVA	3	PA; QL; MS; S
<b>ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITOR - DRUGS FOR THE LIVER</b>		
BYLVAY	3	PA; QL; MS; S
LIVMARLI	3	PA; QL; S
<b>IMMUNOSUPPRESSIVE AGENTS - DRUGS FOR ORGAN TRANSPLANTS</b>		
<b>IMMUNOSUPPRESSIVE - CALCINEURIN INHIBITORS - DRUGS FOR ORGAN TRANSPLANTS</b>		
ASTAGRAF XL	3	PA; QL; S
cyclosporine modified	1	S
cyclosporine oral capsule	1	S
ENVARUSUS XR	3	PA; QL; S
gengraf	1	S
LUPKYNIS	3	PA; QL; S
tacrolimus oral capsule	1	S
<b>IMMUNOSUPPRESSIVE - INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS - DRUGS FOR ORGAN TRANSPLANTS</b>		
mycophenolate mofetil	1	S
mycophenolate sodium	1	S
<b>IMMUNOSUPPRESSIVE - INTERLEUKIN-6 (IL-6) RECEPTOR INHIBITORS - DRUGS FOR ORGAN TRANSPLANTS</b>		
ENSPRYNG	3	PA; QL; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>IMMUNOSUPPRESSIVE - MAMMALIAN TARGET OF RAPAMYCIN (MTOR) INHIBITORS - DRUGS FOR ORGAN TRANSPLANTS</b>		
sirolimus	1	S
<b>IMMUNOSUPPRESSIVE - PURINE ANALOGS - DRUGS FOR ORGAN TRANSPLANTS</b>		
azathioprine oral tablet 50 mg	1	S
<b>LOCOMOTOR SYSTEM</b>		
<b>DUCHENNE MUSCULAR DYSTROPHY - HISTONE DEACETYLASE (HDAC) INHIBITOR</b>		
DUVYZAT	3	PA; QL; S
<b>FIBRODYSPLASIA OSSIFICANS PROGRESSIVA-RETINOIC ACID RECEPTOR AGONISTS</b>		
SOHONOS	3	PA; QL; S
<b>FRIEDREICH ATAXIA-NUCLEAR FACTOR ERYTHROID-REL.FACTOR2(NRF2) ACTIVATOR</b>		
SKYCLARYS	3	PA; QL; S
<b>LOCOMOTOR SYSTEM - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</b>		
<b>AGENTS TO TREAT PERIODIC PARALYSIS - CARBONIC ANHYDRASE INHIBITORS - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</b>		
dichlorphenamide	1	PA; MS; S
ormalvi	1	PA; QL; S
<b>ALS AGENTS - ANTIOXIDANTS/ANTI-INFLAMMATORIES - DRUGS FOR NERVES AND MUSCLES</b>		
RADICAVA ORS	3	PA; QL; MS; S
RADICAVA ORS STARTER KIT SUSP	3	PA; QL; MS; S
<b>AMYOTROPHIC LATERAL SCLEROSIS (ALS) AGENTS - BENZATHIAZOLES - DRUGS FOR NERVES AND MUSCLES</b>		
riluzole	1	
<b>ANTIMYASTHENIC AGENT - REVERSIBLE CHOLINESTERASE INHIBITORS - DRUGS FOR NERVES AND MUSCLES</b>		
pyridostigmine bromide oral tablet 60 mg	1	
pyridostigmine bromide oral tablet extended release	1	
<b>ANTIMYASTHENIC AGENTS OTHER - DRUGS FOR NERVES AND MUSCLES</b>		
FIRDAPSE	3	PA; QL; S
ZILBRYSQ	3	PA; QL; S
<b>SKELETAL MUSCLE RELAXANT - ANALGESIC SALICYLATE COMBINATIONS - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</b>		
carisoprodol-aspirin	1	
<b>SKELETAL MUSCLE RELAXANT - CENTRAL MUSCLE RELAXANTS - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</b>		
BACLOFEN ORAL SOLUTION	3	PA; QL
baclofen oral suspension	1	PA; QL
baclofen oral tablet 10 mg, 20 mg	1	
BACLOFEN ORAL TABLET 5 MG	3	
carisoprodol oral tablet 350 mg	1	
chlorzoxazone oral tablet 500 mg	1	QL
cyclobenzaprine oral tablet 10 mg, 5 mg	1	
LYVISPAH	3	PA; QL
metaxalone oral tablet 800 mg	1	QL
methocarbamol oral tablet 500 mg, 750 mg	1	
orphenadrine citrate oral	1	
OZOBAX	3	PA; QL

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Product Description	Tier	Limits/Restrictions/Notes
OZOBAX DS	3	PA; QL
tizanidine oral tablet	1	
<b>SKELETAL MUSCLE RELAXANT - DIRECT MUSCLE RELAXANTS - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</b>		
dantrolene oral	1	
<b>SKELETAL MUSCLE RELAXANT - OPIOID ANALGESIC COMBINATIONS - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</b>		
carisoprodol-aspirin-codeine	1	
<b>SKELETAL MUSCLE RELAXANT, SALICYLATE, AND OPIOID ANALGESIC COMB. - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES</b>		
carisoprodol-aspirin-codeine	1	
<b>SPINAL MUSCULAR ATROPHY - MOTOR NEURON 2 (SMN2) SPLICING MODIFIER - DRUGS FOR NERVES AND MUSCLES</b>		
EVRYSDI	3	PA; QL; MS; S
<b>MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT (DME) - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
<b>MEDICAL SUPPLIES AND DME - BLOOD COLLECTION NEEDLES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
MONOJECT BLOOD COLLECTION	3	
MULTI-DRAW NEEDLE	3	
<b>MEDICAL SUPPLIES AND DME - BLOOD GLUCOSE TESTS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
FREESTYLE INSULINX STRIP	2	QL
FREESTYLE INSULINX TEST STRIPS	2	QL
FREESTYLE LITE STRIPS	2	QL
FREESTYLE PRECISION NEO STRIPS	2	QL
FREESTYLE TEST	2	QL
ONETOUCH ULTRA TEST	2	QL
ONETOUCH VERIO TEST STRIPS	2	QL
PRECISION PCX PLUS TEST	2	QL
PRECISION PCX TEST	2	QL
PRECISION POINT OF CARE TEST	2	QL
PRECISION Q-I-D TEST	2	QL
PRECISION XTRA TEST	2	QL
<b>MEDICAL SUPPLIES AND DME - CERVICAL CAPS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
FEMCAP	3	Covered in full*
<b>MEDICAL SUPPLIES AND DME - DIAPHRAGMS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
CAYA CONTOURED	3	Covered in full*
WIDE-SEAL DIAPHRAGM 60	3	Covered in full*
WIDE-SEAL DIAPHRAGM 65	3	Covered in full*
WIDE-SEAL DIAPHRAGM 70	3	Covered in full*
WIDE-SEAL DIAPHRAGM 75	3	Covered in full*
WIDE-SEAL DIAPHRAGM 80	3	Covered in full*
WIDE-SEAL DIAPHRAGM 85	3	Covered in full*
WIDE-SEAL DIAPHRAGM 90	3	Covered in full*
WIDE-SEAL DIAPHRAGM 95	3	Covered in full*
<b>MEDICAL SUPPLIES AND DME - ENTERAL SYRINGES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
MONOJECT ENFIT STERILE SYRINGE SYRINGE 1 ML, 35 ML, 6 ML, 60 ML	3	
MONOJECT ENFIT SYRINGE	3	

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Product Description	Tier	Limits/Restrictions/Notes
PISTON SYRINGE WITH ENFIT	3	
<b>MEDICAL SUPPLIES AND DME - EQUIPMENT CLEANING AGENTS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
ALCOH-GLOVE	3	
ALCOH-WIPE	3	
<b>MEDICAL SUPPLIES AND DME - FEMALE CONDOMS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
FC2 FEMALE CONDOM	3	Covered in full*
<b>MEDICAL SUPPLIES AND DME - GLUCOSE MONITORING TEST SUPPLIES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
2-IN-1 LANCET DEVICE	3	
2TEK CONTROL (HIGH-NORMAL)	3	
ACCU-CHEK AVIVA CONTROL SOLN	3	
ACCU-CHEK FASTCLIX LANCET DRUM	3	
ACCU-CHEK FASTCLIX LANCING DEV	3	
ACCU-CHEK GUIDE L1-L2 CTRL SOL	3	
ACCU-CHEK SAFE-T-PRO	3	
ACCU-CHEK SAFE-T-PRO PLUS	3	
ACCU-CHEK SMARTVIEW CONTRL SOL	3	
ACCU-CHEK SOFT DEV LANCETS	3	
ACCU-CHEK SOFTCLIX LANCETS	3	
ACCUTREND GLUCOSE CONTROL	3	
ACTI-LANCE LANCETS	1	
ADJUSTABLE LANCING DEVICE	3	
ADVANCED LANCING DEVICE	3	
ADVANCED TRAVEL LANCETS 28 GAUGE	3	
ADVOCATE LANCET	3	
ADVOCATE LANCING DEVICE	3	
ADVOCATE REDI-CODE PLUS CTRL L	3	
ADVOCATE REDI-CODE+ CTRL HIGH	3	
AGAMATRIX CONTROL HIGH	3	
AGAMATRIX CONTROL NORM-HI	3	
ALKALINE BATTERIES	3	
ALTERNATE SITE LANCET	3	
ALTERNATE SITE LANCING DEVICE	3	
AQUA LANCE LANCING DEVICE	3	
ASSURE 4 CONTROL SOLUTION	3	
ASSURE DOSE NORMAL CONTROL	3	
ASSURE DOSE NORM-HI CONTROL	3	
ASSURE LANCE	3	
ASSURE LANCE PLUS	3	
ASSURE PRISM CONTROL 1-2 SOLN	3	
AUTO-LANCET MINI	3	
AUTOLET IMPRESSION LANC DEV	3	
AUTOLET LANCING DEVICE	3	
BD MICROTAINER LANCET	3	
BLOOD GLUCOSE CONTRL HI,NORMAL	3	
BLOOD GLUCOSE CONTROL, NORMAL	3	
BREEZE 2 CONTROL SOLUTION, LOW	3	
BREEZE 2 CONTROL SOLUTION, NML	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
BREEZE 2 CONTROL SOLUTION,HIGH	3	
BULLSEYE MINI SAFETY LANCETS	3	
CAREONE LANCING DEVICE	3	
CAREONE ULTRA THIN LANCET	3	
CARESENS CONTROL A AND B	3	
CARETOUCH CONTROL SOLN L2-L3	3	
CARETOUCH LANCING DEVICE	3	
CARETOUCH TWIST LANCET	3	
CHEMSTRIP BG LOG BOOK	3	
CHOSEN LANCING DEVICE	3	
CLEVER CHEK LANCETS	3	
CLEVER CHOICE LEVEL 1 CONTROL	3	
CLEVER CHOICE LEVEL 2 CONTROL	3	
CLEVER CHOICE LEVEL 3 CONTROL	3	
COAGUCHEK LANCETS	3	
COLOR LANCETS	3	
COMFORT EZ LANCETS 23 GAUGE, 28 GAUGE	3	
CONTOUR CONTROL SOLUTION, HIGH	3	
CONTOUR CONTROL SOLUTION, LOW	3	
CONTOUR CONTROL SOLUTION, NML	3	
CONTOUR NEXT LEV 1 CONTROL SOL	3	
CONTOUR NEXT LEV 2 CONTROL SOL	3	
DEXCOM G6 RECEIVER	2	PA; QL
DEXCOM G6 SENSOR	2	PA; QL
DEXCOM G6 TRANSMITTER	2	PA; QL
DEXCOM G7 RECEIVER	2	PA; QL
DEXCOM G7 SENSOR	2	PA; QL
DIATRUE CONTROL SOLN NORMAL	3	
DIATRUE CONTROL SOLUTION HIGH	3	
DIATRUE CONTROL SOLUTION LOW	3	
DROPLET LANCETS	3	
DROPLET LANCING DEVICE	3	
EASY COMFORT LANCETS	3	
EASY MINI EJECT LANCING DEVICE	3	
EASY PLUS II HIGH CONTROL	3	
EASY PLUS II LOW CONTROL	3	
EASY STEP HIGH CONTROL SOLN	3	
EASY STEP LOW CONTROL SOLUTION	3	
EASY STEP NORMAL CONTROL SOLN	3	
EASY TALK HIGH CONTROL	3	
EASY TALK LOW CONTROL	3	
EASY TALK PLUS II HIGH CONTROL	3	
EASY TALK PLUS II LOW CONTROL	3	
EASY TOUCH BLU CTRL SOLN-L1,L3	3	
EASY TOUCH HIGH-LOW CONTROL	3	
EASY TOUCH LANCETS	3	
EASY TOUCH LANCING DEVICE	3	
EASY TOUCH SAFETY LANCETS	3	
EASY TOUCH TWIST LANCETS	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
EASY TRAK HIGH CONTROL	3	
EASY TRAK II CTRL SOLN-NORMAL	3	
EASY TRAK LOW CONTROL	3	
EASY TWIST AND CAP LANCETS	3	
EASYMAX 15 LEVEL 2	3	
EASYMAX NORMAL CONTROL	3	
ELEMENT COMPACT HIGH CONTROL	3	
ELEMENT COMPACT NORMAL CONTROL	3	
ELEMENT HIGH CONTROL	3	
ELEMENT LOW CONTROL	3	
ELEMENT NORMAL CONTROL	3	
EMBRACE EVO LEVEL 1	3	
EMBRACE GLUCOSE CONTROL HIGH	3	
EMBRACE GLUCOSE CONTROL LOW	3	
EMBRACE LANCETS	3	
EMBRACE PRO	3	
EMBRACE TALK CONTROL-HIGH (L2)	3	
EMBRACE TALK CONTROL-LOW (L1)	3	
EVENCARE G3 CONTROL	3	
EVOLUTION NORMAL CONTROL	3	
E-Z JECT LANCETS	1	
E-Z JECT THIN LANCETS	1	
EZ SMART LANCETS	3	
FINGERSTIX LANCETS	3	
FORA HIGH CONTROL	3	
FORA LANCING DEVICE	3	
FORA LOW CONTROL	3	
FORA NORMAL CONTROL	3	
FORACARE GDH HIGH CONTROL	3	
FORACARE GDH LOW CONTROL	3	
FORACARE GDH NORMAL CONTROL	3	
FORACARE LANCETS	3	
FREESTYLE CONTROL	3	
FREESTYLE FLASH SYSTEM	2	
FREESTYLE FREEDOM	2	
FREESTYLE FREEDOM LITE	2	
FREESTYLE INSULINX	2	
FREESTYLE LANCETS	3	
FREESTYLE LIBRE 14 DAY READER	2	PA; QL
FREESTYLE LIBRE 14 DAY SENSOR	2	PA; QL
FREESTYLE LIBRE 2 READER	2	PA; QL
FREESTYLE LIBRE 2 SENSOR	2	PA; QL
FREESTYLE LIBRE 3 READER	2	PA; QL
FREESTYLE LIBRE 3 SENSOR	2	PA; QL
FREESTYLE LITE METER	2	
FREESTYLE PRECISION NEO METER	2	
FREESTYLE SYSTEM KIT	2	
FREESTYLE UNISTIK 2	3	
GE100 CONTROL SOLUTION NORMAL	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
GENTEEL VACUUM LANCING DEVICE	3	
GLUCOCARD 01 HI-NORMAL CONTROL	3	
GLUCOCARD 01 NORMAL CONTROL	3	
GLUCOCARD EXPRESSION SOLUTION	3	
GLUCOCARD SHINE	3	
GLUCOCOM AUTOLINK	3	
GLUCOCOM CONTROL HIGH	3	
GLUCOCOM CONTROL NORMAL	3	
GLUCOCOM LANCETS	3	
GLUCOSE CONTROL	3	
GLUCOSE KETONE CONTROL SOLN	3	
GOJJI GLUCOSE CNTRL SOL-NORMAL	3	
HEALTHPRO HIGH-LOW CONTROL	3	
HYPOLANCE AST LANCING	3	
INCONTROL LANCING DEVICE	3	
INCONTROL SUPER THIN LANCETS	3	
INCONTROL ULTRA THIN LANCETS	3	
INFINITY CONTROL SOLUTION HIGH	3	
INFINITY CONTROL SOLUTION LOW	3	
INFINITY CONTROL SOLUTION NORM	3	
INJECT EASE LANCETS	3	
INSUL-CAP	3	
INSUL-EZE	3	
INVACARE LANCETS	3	
LANCETS	3	
LANCETS, SUPER THIN	3	
LANCETS, THIN , 28 GAUGE	3	
LANCETS, ULTRA THIN	3	
LANCING DEVICE	3	
LANCING DEVICE WITH LANCETS	3	
LANCING SYSTEM	3	
LANZO LANCING DEVICE	3	
MEDISENSE	3	
MEDISENSE GLUCOSE KETONE	3	
MEDISENSE MID CONTROL	3	
MEDISENSE THIN LANCETS	3	
MEDLANCE PLUS LANCETS	3	
MEDLANCE PLUS SPECIAL BLADE	3	
MEDPOINT NORMAL CONTROL	3	
MICRO THIN LANCETS	3	
MICRODOT HIGH-LOW CONTROL	3	
MICRODOT NORMAL CONTROL	3	
MICROLET 2 LANCING DEVICE	3	
MICROLET LANCET	3	
MICROLET NEXT LANCING DEVICE	3	
MINI LANCING DEVICE	3	
MONOLET LANCETS	3	
MONOLET THIN LANCETS	3	
MULTI-LANCET DEVICE 2	3	

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Product Description	Tier	Limits/Restrictions/Notes
MYGLUCOHEALTH CONTROL SOLUTION	3	
MYGLUCOHEALTH LANCETS	3	
NOVA SAFETY LANCETS	3	
NOVA SUREFLEX LANCETS	3	
NOVAMAX PLUS GLU-KET	3	
ON CALL EXPRESS CONTROL	3	
ON CALL LANCET	3	
ON CALL LANCING DEVICE	3	
ONETOUCH DELICA PLUS LANC DEV	3	
ONETOUCH DELICA PLUS LANCET	3	
ONETOUCH DELICA SAFETY LANCET	3	
ONETOUCH ULTRA CONTROL	3	
ONETOUCH ULTRA2 METER	2	
ONETOUCH ULTRASOFT 2 LANCET	3	
ONETOUCH VERIO FLEX METER	2	
ONETOUCH VERIO HIGH CONTROL	3	
ONETOUCH VERIO MID CONTROL	3	
ONETOUCH VERIO REFLECT METER	2	
ON-THE-GO LANCETS	3	
OVAL TAPE	3	
PIP GLUCOSE CONTROL SOLN L1-L2	3	
PIP LANCET	3	
PRECISION XTRA MONITOR	2	
PRESSURE ACTIVATED LANCETS	3	
PRO COMFORT LANCET	3	
PRODIGY CONTROL SOLUTION, LOW	3	
PRODIGY CONTROL SOLUTION,HIGH	3	
PRODIGY LANCETS	3	
PRODIGY LANCING DEVICE	3	
PRODIGY TWIST TOP LANCET	3	
PUSH BUTTON SAFETY LANCETS 28 GAUGE	3	
REFUAH PLUS GLUCOSE CONTROL	3	
RELIAMED LANCET 28 GAUGE, 30 GAUGE	3	
RELIAMED MINI LANCING DEVICE	3	
RELIAMED SAFETY SEAL LANCETS	3	
RIGHTEST CONTROL SOLUTION HIGH	3	
RIGHTEST CONTROL SOLUTION NORM	3	
RIGHTEST GD500 LANCING DEVICE	3	
RIGHTEST GL300 LANCETS	3	
SAFETY LANCETS 21 GAUGE, 28 GAUGE	3	
SAFETY SEAL LANCETS	3	
SAFETY-LET LANCETS	3	
SIL-SERTER	3	
SINGLE-LET	3	
SMART SENSE LANCETS	3	
SMARTDIABETES VANTAGE	3	
SMARTEST CONTROL	3	
SMARTEST LANCET	3	
SOLUS V2 CONTROL SOLUTION, LOW	3	

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Product Description	Tier	Limits/Restrictions/Notes
SOLUS V2 CONTROL SOLUTION,HIGH	3	
SOLUS V2 LANCETS	3	
SOLUS V2 LANCING DEVICE	3	
STERILANCE TL	3	
SUPER THIN LANCETS 28 GAUGE, 30 GAUGE	3	
SURE COMFORT LANCETS	3	
SURE COMFORT LANCING PEN	3	
SUREFLEX DEVICE WITH LANCETS	3	
SURE-LANCE	3	
SURE-LANCE ULTRA THIN	3	
SURE-PEN LANCING DEVICE	3	
SURE-TEST EASYPLUS MINI SOLUTION	3	
SURE-TOUCH LANCET	3	
TECHLITE LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE	3	
TELCARE CONTROL	3	
TELCARE LANCETS	3	
THIN LANCETS	3	
TOPCARE UNIVERSAL1 LANCET	3	
TRUE COMFORT LANCET	3	
TRUE METRIX LEVEL 1	3	
TRUE METRIX LEVEL 2	3	
TRUE METRIX LEVEL 3	3	
TRUEDRAW LANCING DEVICE	3	
TRUEPLUS LANCETS	3	
TWIST LANCETS	3	
ULTI-LANCE	3	
ULTILET BASIC LANCETS	3	
ULTILET CLASSIC LANCETS	3	
ULTILET LANCETS	3	
ULTILET SAFETY LANCETS	3	
ULTRA THIN II LANCETS	3	
ULTRA THIN LANCETS	3	
ULTRA THIN PLUS LANCETS	3	
ULTRA TLC LANCETS	3	
ULTRA-CARE LANCETS	3	
ULTRALANCE LANCETS	3	
ULTRA-THIN II LANCETS	3	
ULTRATRAK HIGH-LOW CONTROL	3	
ULTRATRAK NORMAL CONTROL	3	
ULTRATRAK ULTIMATE SOLUTION	3	
UNILET COMFORTOUCH LANCET	3	
UNILET GP LANCET	3	
UNILET LANCET	3	
UNILET LANCETS	3	
UNILET SUPER THIN LANCETS	3	
UNISTIK 2 DEVICE	3	
UNISTIK 2 NORMAL LANCET	3	
UNISTIK 3 COMFORT LANCET	3	
UNISTIK 3 EXTRA LANCET	3	

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Product Description	Tier	Limits/Restrictions/Notes
UNISTIK 3 GENTLE	3	
UNISTIK 3 NORMAL LANCET	3	
UNISTIK COMFORT LANCETS	3	
UNISTIK CZT LANCET	3	
UNISTIK EXTRA LANCETS	3	
UNISTIK NORMAL LANCETS	3	
UNISTIK PRO LANCET	3	
UNISTIK SAFETY	3	
UNISTIK TOUCH LANCETS	3	
UNISTRIP LOW CONTROL	3	
UNIVERSAL 1 LANCETS	3	
VIVAGUARD INO CTRL SOLN-L1,2,3	3	
VIVAGUARD INO CTRL SOLN-L1,L3	3	
VIVAGUARD INO CTRL SOLN-L2	3	
VIVAGUARD LANCET	3	
VIVAGUARD LANCING DEVICE	3	
VIVAGUARD SAFETY LANCET	3	
WAVESENSE CONTROL SOLUTION	3	
<b>MEDICAL SUPPLIES AND DME - INSULIN NEEDLES-SYRINGES AND ADMIN SUPPLIES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
1ST TIER UNIFINE PENTIPS	3	
1ST TIER UNIFINE PENTIPS PLUS	3	
ADVOCATE PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 5/32"	3	
ADVOCATE SYRINGES SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	3	
ASSURE ID PEN NEEDLE NEEDLE 30 GAUGE X 5/16"	3	
AUTOJECT 2 INJECTION DEVICE	3	
AUTOPEN 1 TO 21 UNITS	3	
AUTOPEN 2 TO 42 UNITS	3	
BD AUTOSHIELD DUO PEN NEEDLE	2	
BD ECLIPSE LUER-LOK SYRINGE 1 ML 30 GAUGE X 1/2"	3	
BD INSULIN SYRINGE (HALF UNIT)	3	
BD INSULIN SYRINGE U-500	3	
BD INSULIN SYRINGE ULTRA-FINE	3	
BD LO-DOSE MICRO-FINE IV	3	
BD NANO 2ND GEN PEN NEEDLE	2	
BD SAFETYGLIDE INSULIN SYRINGE	3	
BD SAFETYGLIDE SYRINGE SYRINGE 1 ML 27 GAUGE X 5/8"	3	
BD ULTRA-FINE MICRO PEN NEEDLE	2	
BD ULTRA-FINE MINI PEN NEEDLE	2	
BD ULTRA-FINE NANO PEN NEEDLE	2	
BD ULTRA-FINE ORIG PEN NEEDLE	2	
BD ULTRA-FINE SHORT PEN NEEDLE	2	
BD VEO INSULIN SYR (HALF UNIT)	3	
BD VEO INSULIN SYRINGE UF	3	
CAREFINE PEN NEEDLE	3	
CARETOUCH INSULIN SYRINGE	3	
CARETOUCH PEN NEEDLE	3	

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Product Description	Tier	Limits/Restrictions/Notes
CLICKFINE PEN NEEDLE	3	
COMFORT EZ INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 31 GAUGE X 15/64"	3	
COMFORT EZ PEN NEEDLES	3	
DROPLET INSULIN SYR(HALF UNIT)	3	
DROPLET INSULIN SYRINGE	3	
DROPLET PEN NEEDLE	3	
DROPSAFE INSULIN SYRINGE	3	
DROPSAFE PEN NEEDLE	3	
EASY COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.3 ML 31 X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1 ML 32 GAUGE X 5/16", 1/2 ML 32 GAUGE X 5/16"	3	
EASY COMFORT PEN NEEDLES	3	
EASY GLIDE INSULIN SYRINGE	3	
EASY GLIDE PEN NEEDLE	3	
EASY TOUCH FLIPLOCK INSULIN	3	
EASY TOUCH INSULIN SAFETY SYR	3	
EASY TOUCH INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 1 ML 27 GAUGE X 1/2", 1 ML 27 GAUGE X 5/8", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 5/16, 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2"	3	
EASY TOUCH LUER LOCK INSULIN	3	
EASY TOUCH NEEDLE	3	
EASY TOUCH PEN NEEDLE	3	
EASY TOUCH SHEATHLOCK INSULIN	3	
EASY TOUCH UNI-SLIP SYRINGE 1 ML	3	
EXEL INSULIN	3	
FREESTYLE PRECISION	3	
HEALTHWISE INSULIN SYRINGE	3	
HEALTHWISE PEN NEEDLE	3	
INCONTROL PEN NEEDLE	3	
INPEN (FOR HUMALOG) BLUE	3	QL
INPEN (FOR HUMALOG) GREY	3	QL
INPEN (FOR HUMALOG) PINK	3	QL
INPEN (NOVOLOG OR FIASP) BLUE	3	QL
INPEN (NOVOLOG OR FIASP) GREY	3	QL
INPEN (NOVOLOG OR FIASP) PINK	3	QL
INSULIN SYR/NDL U100 HALF MARK	3	
INSULIN SYRINGE MICROFINE SYRINGE 1 ML 27 GAUGE X 5/8"	3	
INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	3	

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Product Description	Tier	Limits/Restrictions/Notes
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.3 ML 29 GAUGE, 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30, 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 7/16", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 30 GAUGE X 7/16", 1 ML 31 GAUGE X 1/4", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 29, 1/2 ML 31 GAUGE X 1/4", 1/2 ML 31 GAUGE X 15/64"	3	
insulin syringe-needle u-100 syringe 1 ml 30 gauge x 3/8"	1	
INSUPEN PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	3	
MAGELLAN INSULIN SAFETY SYRNG SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	3	
MAGELLAN SYRINGE SYRINGE 0.3 ML 30 X 5/16", 0.5 ML 30 GAUGE X 5/16"	3	
MAXICOMFORT II PEN NEEDLE	3	
MAXICOMFORT INSULIN SYRINGE	3	
MAXI-COMFORT INSULIN SYRINGE	3	
MAXICOMFORT SAFETY PEN NEEDLE	3	
MINI ULTRA-THIN II	3	
MONOJECT INSULIN SAFETY SYRING	3	
MONOJECT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML, 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	3	
MONOJECT SYRINGE SYRINGE 1/2 ML 28 GAUGE	3	
MONOJECT ULTRA COMFORT INSULIN	3	
NOVOFINE 32	3	
NOVOFINE PLUS	3	
NOVOPEN ECHO	3	
PARADIGM RESERVOIR	3	
PEN NEEDLE	3	
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 3/16", 30 GAUGE X 5/16", 31 GAUGE X 1/3", 31 GAUGE X 1/4", 31 GAUGE X 1/6", 31 GAUGE X 15/64", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32", 33 GAUGE X 5/32"	3	
PEN NEEDLE, DIABETIC, SAFETY	3	
PENTIPS PEN NEEDLE	3	
PRO COMFORT INSULIN SYRINGE	3	
PRO COMFORT PEN NEEDLE	3	
PRODIGY INSULIN SYRINGE	3	
SAFESNAP INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2"	3	
SAFETY PEN NEEDLE	3	
SECURESAFE INSULIN SYRINGE	3	
SURE COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 1/4", 1/2 ML 31 GAUGE X 1/4"	3	
SURE COMFORT PEN NEEDLE	3	
SURE-FINE PEN NEEDLES	3	
SURE-JECT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	3	

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Product Description	Tier	Limits/Restrictions/Notes
TECHLITE INSULIN SYRINGE SYRINGE 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16	3	
TECHLITE INSULN SYR(HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 15/64", 0.5 ML 31 GAUGE X 5/16"	3	
TECHLITE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32"	3	
TERUMO INSULIN SYRINGE SYRINGE 0.3 ML 30 X 3/8", 1 ML 27 GAUGE X 1/2", 1/2 ML 27 GAUGE X 1/2", 1/2 ML 30 X 3/8"	3	
thinpro insulin syringe syringe 0.3 ml 29 gauge x 1/2", 0.5 ml 29 gauge x 1/2", 1 ml 29 gauge x 1/2"	1	
THINPRO INSULIN SYRINGE SYRINGE 0.3 ML 31 X 3/8", 0.5 ML 31 X 3/8", 1 ML 31 X 3/8"	3	
TOPCARE CLICKFINE	3	
TOPCARE ULTRA COMFORT SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	3	
TRUE COMFORT INSULIN SYRINGE	3	
TRUE COMFORT PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/32"	3	
TRUE COMFORT PRO INS SYRINGE	3	
TRUEPLUS INSULIN	3	
TRUEPLUS PEN NEEDLE	3	
ULTICARE INSULIN SYRINGE	3	
ULTICARE INSULN SYR(HALF UNIT)	3	
ULTICARE PEN NEEDLE	3	
ULTICARE SYR 0.3 ML 30GX1/2" (WITH SYRINGE CONTAINER)	3	
ULTICARE SYR 0.5 ML 30GX1/2" (WITH SYRINGE CONTAINER)	3	
ulticare syringe 0.3 ml 30 gauge x 1/2", 0.5 ml 30 gauge x 1/2", 1 ml 30 gauge x 1/2"	1	
ULTICARE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16	3	
ULTICARE SYRINGE 1 ML 30GX1/2" (WITH SYRINGE CONTAINER)	3	
ULTIGUARD SAFEPACK-INSULIN SYR	3	
ULTIGUARD SAFEPACK-PEN NEEDLE	3	
ULTILET INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE, 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1/2 ML 29	3	
ULTILET PEN NEEDLE	3	
ULTRA CMFT INS SYR (HALF UNIT)	3	
ULTRA COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30, 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 29	3	
ULTRA FLO INSUL SYR(HALF UNIT)	3	
ULTRA FLO INSULIN SYRINGE	3	
ULTRA THIN PEN NEEDLE	3	
ULTRACARE INSULIN SYRINGE	3	
ULTRACARE PEN NEEDLE	3	
ULTRA-THIN II (SHORT) INS SYR	3	
ULTRA-THIN II (SHORT) PEN NDL	3	
ULTRA-THIN II INS PEN NEEDLES	3	
ULTRA-THIN II INSULIN SYRINGE	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
UNIFINE PENTIPS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32", 33 GAUGE X 5/32"	3	
UNIFINE PENTIPS PLUS	3	
VANISHPOINT INSULIN SYRINGE	3	
VANISHPOINT SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	3	
VERIFINE INSULIN SYRINGE	3	
<b>MEDICAL SUPPLIES AND DME - IV SETS-TUBING - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
IV ADMINISTRATION SET	3	
SCALP VEIN SET	3	
<b>MEDICAL SUPPLIES AND DME - MALE CONDOMS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
AIMSCO LATEX CONDOM	3	Covered in full*
DUREX AVANTI BARE REAL FEEL	3	Covered in full*
FANTASY CONDOM	3	Covered in full*
KIMONO MICROTHIN AQUA LUBE CON	3	Covered in full*
KIMONO MICROTHIN CONDOMS	3	Covered in full*
KIMONO MICROTHIN LARGE CONDOMS	3	Covered in full*
KIMONO TEXTURED CONDOMS	3	Covered in full*
TRUSTEX LATEX CONDOM	3	Covered in full*
TRUSTEX LUBRICATED CONDOMS	3	Covered in full*
TRUSTEX NON-LUB CONDOMS	3	Covered in full*
TRUSTEX-RIA LUB/SPERMICIDE	3	Covered in full*
TRUSTEX-RIA NON-LUB CONDOMS	3	Covered in full*
<b>MEDICAL SUPPLIES AND DME - MISCELLANEOUS OTHER - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
T:FLEX	3	
TANDEM MOBI CARTRIDGE	3	
TEMPO SMART BUTTON	3	QL
<b>MEDICAL SUPPLIES AND DME - NEEDLES AND SYRINGES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
ALLERGIST TRAY 1/2 ML 27GX3/8"	3	
ALLERGIST TRAY INTRADERMAL BEV SYRINGE 1 ML 26 GAUGE X 1/2"	3	
ALLERGY SYRINGE	3	
BD ALLERGY SYRINGE	3	
BD BLUNT PLASTIC CANNULA SYRINGE	3	
BD BULK SYRINGE SLIP TIP SYRINGE 1 ML	3	
BD ECLIPSE	3	
BD ECLIPSE LUER-LOK NEEDLE 21 GAUGE X 1 1/2", 25 GAUGE X 1 1/2", 30 X 1/2 "	3	
BD ECLIPSE LUER-LOK SYRINGE 1 ML 27 X 1/2", 3 ML 23 GAUGE X 1 1/2", 3 ML 25 X 5/8"	3	
BD FILTER NEEDLE 5-MICRON NOKO	3	
BD FILTER NEEDLE-5 MICRON	3	
BD INTEGRA NEEDLE	3	
BD INTEGRA SYRINGE SYRINGE 3 ML 21 GAUGE X 1 1/2", 3 ML 23 GAUGE X 1", 3 ML 25 GAUGE X 1", 3 ML 25 GAUGE X 5/8"	3	
BD INTERLINK BLUNT PLASTIC CAN	3	
BD INTERLINK SYRINGE	3	
BD INTRADERMAL BEVEL NEEDLES	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
BD LUER-LOK BULK SYRINGE	3	
BD LUER-LOK SYRINGE SYRINGE 1 ML, 1 ML 20 GAUGE X 1", 10 ML 20 X 1 1/2", 10 ML 20 X 1", 10 ML 21 GAUGE X 1", 10 ML 21 X 1 1/2", 20 ML, 3 ML, 3 ML 18 X 1 1/2", 3 ML 20 GAUGE X 1 1/2", 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 1 1/2", 3 ML 25 X 5/8", 5 ML, 5 ML 20 X 1 1/2", 5 ML 20 X 1", 5 ML 21 GAUGE X 1 1/2", 5 ML 21 GAUGE X 1", 50 ML	3	
BD LUER-LOK TIP CONTROL SYRING	3	
BD NOKOR ADMIX NEEDLE	3	
BD PRECISIONGLIDE NEEDLE	3	
BD PRECISIONGLIDE NON-STERILE NEEDLE 18 GAUGE X 1 1/2", 19 GAUGE X 1 1/2", 20 GAUGE X 1 1/2", 21 GAUGE X 1 1/2", 23 GAUGE X 1", 25 GAUGE X 1", 25 GAUGE X 5/8"	3	
BD QUINCKE SPINAL NEEDLE	3	
BD REGULAR BEVEL NEEDLES NEEDLE 18 GAUGE X 1 1/2", 18 GAUGE X 1", 19 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 23 GAUGE X 3/4", 25 GAUGE X 1 1/2", 25 GAUGE X 5/8", 26 GAUGE X 1/2", 27 GAUGE X 1/2"	3	
BD SAFETYGLIDE ALLERGIST TRAY	3	
BD SAFETYGLIDE NEEDLE NEEDLE 18 GAUGE X 1 1/2", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 23 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8", 27 GAUGE X 5/8"	3	
BD SAFETYGLIDE SHIELDING REG	3	
BD SAFETYGLIDE SYRINGE SYRINGE 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 5/8"	3	
BD SAFETYGLIDE TB REG BEVEL	3	
BD SLIP TIP SYRINGE	3	
B-D SLIP TIP SYRINGE	3	
BD SPECIALTY USE NEEDLES	3	
BD SYRINGE	3	
BD SYRINGE CATH TIP NONSTERILE	3	
BD SYRINGE CATHETER TIP	3	
BD SYRINGE LUER-LOK NONSTERILE	3	
BD SYRINGE LUER-LOK STERILE	3	
BD SYRINGE SLIP TIP NONSTERILE SYRINGE 50 ML	3	
BD SYRINGE-DUAL CANNULA	3	
BD TUBERCULIN SLIP-TIP SYRINGE 1 ML	3	
BD TUBERCULIN SYRINGE	3	
BLUNT NEEDLE, DISPOSABLE NEEDLE 18 X 1 1/2", 22 X 1 1/2"	3	
CAREPOINT LUER LOCK SYRINGE	3	
CAREPOINT LUER LOCK SYR-NEEDLE	3	
CAREPOINT LUER SLIP SYRINGE	3	
CAREPOINT LUER SLIP SYRING-NDL	3	
CAREPOINT SAFETY LL SYR-NEEDLE	3	
CARETOUCH LUER LOCK SYRINGE	3	
CARETOUCH LUER LOCK SYR-NEEDLE	3	
CARETOUCH LUER SLIP SYRINGE	3	
DAVOL IRRIGATION SYRINGE	3	
DAVOL PISTON IRRIGATION	3	
DOVER BULB SYRINGE	3	
EASY GLIDE CATHETER TIP SYRING	3	
EASY GLIDE LUER LOCK SYRINGE	3	
EASY GLIDE LUER SLIP TB SYRING	3	
EASY TOUCH FLIPLock NEEDLE	3	

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Product Description	Tier	Limits/Restrictions/Notes
EASY TOUCH FLIPLOCK SYRINGE	3	
EASY TOUCH FLURINGE	3	
EASY TOUCH FLURINGE FLIPLOCK	3	
EASY TOUCH FLURINGE SHEATHLOCK	3	
EASY TOUCH HYPODERMIC NEEDLE	3	
EASY TOUCH LUER LOCK SYRINGE	3	
EASY TOUCH SHEATHLOCK SYRG-NDL	3	
EASY TOUCH SHEATHLOCK SYRINGE SYRINGE 10 ML, 3 ML	3	
EASY TOUCH SYRINGE	3	
EASY TOUCH TUBERCULIN FLIPLOCK	3	
EASY TOUCH TUBERCULIN SHEATHLK	3	
EASY TOUCH UNI-SLIP SYRINGE 10 ML, 3 ML, 5 ML	3	
EASYPOINT NEEDLE	3	
ECLIPSE NEEDLE NEEDLE 23 GAUGE X 1", 25 GAUGE X 5/8"	3	
ECLIPSE SYRINGE	3	
EXCEL SYRINGE	3	
EXEL HYPODERMIC NEEDLES NEEDLE 18 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 20 X 3/4", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 22 GAUGE X 1 1/2", 22 GAUGE X 1", 22 GAUGE X 3/4", 23 GAUGE X 3/4", 25 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 3/4", 25 GAUGE X 5/8", 26 GAUGE X 1 1/2", 26 GAUGE X 1/2", 26 GAUGE X 3/8", 26 GAUGE X 5/8", 27 GAUGE X 1/2", 30 GAUGE X 1/2"	3	
EXEL SYRINGE SYRINGE 10 ML, 3 ML 27 GAUGE X 1 1/4", 30 ML, 50 ML	3	
FILTER NEEDLES NEEDLE 18 GAUGE X 1 1/2"	3	
FLOW-EZE VENTED NEEDLE	3	
huber safety needles (disp.)	1	
HYPODERMIC NEEDLES NEEDLE 21 GAUGE X 1", 23 GAUGE X 1 1/2", 26 GAUGE X 5/8"	3	
INTEGRA PRECISIONGLIDE NEEDLE	3	
INTEGRA SYRINGE	3	
INTERLINK SYRINGE AND CANNULA	3	
LIFESHIELD BLUNT CANNULA	3	
LUER LOCK SYRINGE SYRINGE 30 ML	3	
LUER SLIP TIP SYRINGE TRAY	3	
LUER-LOK TIP	3	
MAGELLAN SAFETY SYRINGE	3	
MAGELLAN SYRINGE SYRINGE 1 ML 27 GAUGE X 1/2"	3	
MAGELLAN TUBERCULIN SAFETY SYR	3	
MONOJECT 14OCC PISTON SYRINGE	3	
MONOJECT 3CC SYR 25GX1"	3	
MONOJECT BLUNT CANNULAS NEEDLE 15 GAUGE X 1 1/2"	3	
MONOJECT CONTROL SYRINGE LUER	3	
MONOJECT DISPOSABLE SYRINGE	3	
MONOJECT ECCENTRIC NON-STERILE SYRINGE 35 ML	3	
MONOJECT FILTER ASPIRATOR	3	
MONOJECT FILTER NEEDLE	3	
MONOJECT HYPODERMIC NEEDLES NEEDLE 14 GAUGE X 1 1/2", 18 GAUGE X 1 1/2", 18 GAUGE X 1", 19 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 22 GAUGE X 1 1/2", 22 GAUGE X 1", 23 GAUGE X 1", 25 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8", 26 GAUGE X 1 1/2", 27 GAUGE X 1 1/2", 27 GAUGE X 1/2", 30 GAUGE X 3/4"	3	

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Product Description	Tier	Limits/Restrictions/Notes
MONOJECT HYPODERMIC POLYPROPYL NEEDLE 18 GAUGE X 1 1/2"	3	
MONOJECT LUER-LOCK TIP SYRINGE 12 ML	3	
MONOJECT MAGELLAN SYRINGE	3	
MONOJECT MEDICATION TRANSF NDL	3	
MONOJECT PHARMACY TRAY LUER	3	
MONOJECT PHARMACY TRAY REG TIP	3	
MONOJECT REG TIP NON-STERILE	3	
MONOJECT REGULAR LUER SYRINGE 3 ML, 35 ML, 6 ML	3	
MONOJECT SAFETY LUER LOCK TIP	3	
MONOJECT SAFETY SYRINGES SYRINGE , 12 ML, 12 ML 20 X 1 1/2", 3 ML 20 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 6 ML	3	
MONOJECT SMARTIP CANNULA	3	
MONOJECT SYRINGE LUER LOK SYRINGE 35 ML, 60 ML	3	
MONOJECT SYRINGE SYRINGE 12 ML 18 GAUGE X 1", 12 ML 20 X 1 1/2", 12 ML 21 GAUGE X 1 1/2", 12 ML 21 GAUGE X 1", 140 ML, 3 ML, 3 ML 20 GAUGE X 1 1/2", 3 ML 20 GAUGE X 1", 3 ML 20 X 3/4", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 GAUGE X 1", 3 ML 22 X 1 1/2", 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 1 1/4", 3 ML 25 X 5/8", 3 ML 27 GAUGE X 1 1/4", 6 ML, 6 ML 20 X 1 1/2", 6 ML 21 X 1 1/2", 6 ML 21 X 1", 6 ML 22 X 1 1/2"	3	
MONOJECT TB	3	
MONOJECT TB LUER LOK	3	
MONOJECT TB SAFETY SYRINGE	3	
MONOJECT TUBERCULIN SYRINGE	3	
NEEDLE (DISP) 16 G	3	
NEEDLE (DISP) 18 G	3	
NEEDLE (DISP) 19 G	3	
NEEDLE (DISP) 23 GAUGE	3	
NEEDLES, HUBER DISPOSABLE	3	
NOKOR NEEDLE	3	
NORM-JECT	3	
NORM-JECT TUBERKULIN	3	
POLY HUB NEEDLE	3	
SAFESNAP SYRINGE SYRINGE 1 ML 25 GAUGE X 5/8", 1 ML 27 GAUGE X 1/2", 10 ML, 10 ML 22 GAUGE X 1", 3 ML, 3 ML 25 GAUGE X 5/8", 5 ML, 5 ML 20 GAUGE X 1", 5 ML 22 GAUGE X 1"	3	
SAFETY NEEDLES	3	
SURGUARD2 SAFETY NEEDLE	3	
SURGUARD2 SAFETY SYRINGE 1 ML 25 GAUGE X 5/8", 1 ML 26 GAUGE X 3/8", 1 ML 27 GAUGE X 1/2", 10 ML 20 GAUGE X 1", 10 ML 21 GAUGE X 1 1/2", 3 ML 20 GAUGE X 1", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 GAUGE X 1", 3 ML 23 GAUGE X 1", 3 ML 25 GAUGE X 5/8", 5 ML 20 GAUGE X 1", 5 ML 21 GAUGE X 1 1/2"	3	
SYRINGE (DISPOSABLE)	3	
SYRINGE 3CC/20GX1"	3	
SYRINGE 3CC/21GX1"	3	
SYRINGE 3CC/21GX1-1/2"	3	
SYRINGE 3CC/22GX1"	3	
SYRINGE 3CC/22GX3/4"	3	
SYRINGE 3CC/25GX1"	3	
SYRINGE WITH NEEDLE SYRINGE 1 ML 25 GAUGE X 1", 3 ML 20 GAUGE X 1 1/2", 3 ML 22 X 1 1/2"	3	
TERUMO ALLERGY SYRINGE	3	

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Product Description	Tier	Limits/Restrictions/Notes
TERUMO HYPODERMIC NEEDLE/SYRIN SYRINGE 5 ML 21 GAUGE X 1 1/2"	3	
TERUMO SYRINGE SYRINGE 3 ML 23 X 1", 30 ML	3	
TOOMEY SYRINGE	3	
TUBERCULIN SYRINGE	3	
TUBERCULIN-ALLERGY SYRINGES	3	
ULTICARE LOW DEAD SPACE SYRINGE	3	
ULTICARE SAFETY SYRINGE	3	
ULTICARE SYRINGE 1 ML 25 GAUGE X 5/8"	3	
ULTICARE TB SAFETY SYRINGE	3	
VANISHPOINT SYRINGE SYRINGE 1 ML 25 GAUGE X 1", 10 ML 21 GAUGE X 1 1/2", 3 ML 20 GAUGE X 1", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 GAUGE X 1", 3 ML 22 X 1 1/2", 3 ML 23 GAUGE X 1 1/2", 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 5/8", 5 ML 21 GAUGE X 1 1/2", 5 ML 21 GAUGE X 1", 5 ML 22 GAUGE X 1 1/2"	3	
VANISHPOINT TUBERCULIN SYRINGE	3	
YALE DISPOSABLE NEEDLES	3	
<b>MEDICAL SUPPLIES AND DME - PARENTERAL THERAPY SUPPLIES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
BD Q-SYTE MDV ADAPTER	3	
BD Q-SYTE SPLIT-SEPT DEVICE	3	
DISPOSABLE POWER	3	
PHASEAL PROTECTOR	3	
SYRINGE FILTER 50-0.22 MM-MICRON	3	
<b>MEDICAL SUPPLIES AND DME - PEAK FLOW METERS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
ASTHMA CHECK METER	3	
MINI WRIGHT PEAK FLOW METER	3	
PEAK AIR PEAK FLOW METER	3	
PERSONAL BEST FULL RANGE	3	
<b>MEDICAL SUPPLIES AND DME - RESPIRATORY THERAPY SUPPLIES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
ACE AEROSOL CLOUD ENHANCER	3	QL
AEROCHAMBER MINI	3	QL
AEROCHAMBER MV	3	QL
AEROCHAMBER PLUS FLOW-VU	3	QL
AEROCHAMBER PLUS FLOW-VU,L MSK	3	QL
AEROCHAMBER PLUS FLOW-VU,M MSK	3	QL
AEROCHAMBER PLUS FLOW-VU,S MSK	3	QL
AEROCHAMBER PLUS Z STAT LG MSK	3	QL
AEROCHAMBER PLUS Z STAT MD MSK	3	QL
AEROCHAMBER PLUS Z STAT SM MSK	3	QL
AEROCHAMBER Z-STAT PLUS-FLW SG	3	QL
AEROTRACH PLUS	3	QL
AEROVENT PLUS	3	QL
BREATHERITE MDI SPACER	3	QL
BREATHERITE SPACER-MASK, NEO.	3	QL
BREATHERITE SPACER-MASK,ADULT	3	QL
BREATHERITE SPACER-MASK,CHILD	3	QL
BREATHERITE SPACER-MASK,INFANT	3	QL
BREATHERITE SPACER-MASK,S.CHLD	3	QL
BREATHERITE VALVED MDI CHAMBER	3	QL

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
BREATHERITE VALVED MDI SPACER	3	QL
COMPACT SPACE CHAMBER	3	QL
COMPACT SPACE CHAMBER-LRG MASK	3	QL
COMPACT SPACE CHAMBER-MED MASK	3	QL
COMPACT SPACE CHAMBER-SM MASK	3	QL
EASIVENT HOLDING CHAMBER	3	QL
EASIVENT MASK LARGE	3	QL
EASIVENT MASK MEDIUM	3	QL
EASIVENT MASK SMALL	3	QL
FLEXICHAMBER-LG CHILD MASK	3	QL
FLEXICHAMBER-SM ADULT MASK	3	QL
FLEXICHAMBER-SM CHILD MASK	3	QL
LITE TOUCH-MEDIUM MASK	3	QL
LITEAIRE MDI CHAMBER	3	QL
LITETOUCH-LARGE MASK	3	QL
LITETOUCH-SMALL MASK	3	QL
MICROCHAMBER	3	QL
MICROSPACER	3	QL
MOUTHPIECE	3	QL
ONE WAY VALVED MOUTHPIECE	3	QL
OPTICHAMBER ADULT MASK-LARGE	3	QL
OPTICHAMBER DIAMOND LG MASK	3	QL
OPTICHAMBER DIAMOND VHC	3	QL
OPTICHAMBER DIAMOND-MED MSK	3	QL
OPTICHAMBER DIAMOND-SML MASK	3	QL
PANDA MASK	3	QL
PEDIATRIC MEDIUM MASK	3	QL
PEDIATRIC PANDA MASK	3	QL
PEDIATRIC SMALL MASK	3	QL
POCKET CHAMBER	3	QL
PRIMEAIRE	3	QL
PROCARE SPACER WITH ADULT MASK	3	QL
PROCARE SPACER WITH CHILD MASK	3	QL
PROCHAMBER	3	QL
RITFLO AEROCHAMBER	3	QL
SIDESTREAM PEDIATRIC FACE MASK	3	QL
SILICONE MASK - INFANT	3	QL
SILICONE MASK - PEDIATRIC	3	QL
SPACE CHAMBER	3	QL
SPACE CHAMBER WITH LARGE MASK	3	QL
SPACE CHAMBER WITH MEDIUM MASK	3	QL
SPACE CHAMBER WITH SMALL MASK	3	QL
VORTEX ADULT MASK	3	QL
VORTEX HOLDING CHAMBER	3	QL
VORTEX VHC FROG MASK-CHILD	3	QL
VORTEX VHC LADYBUG MASK-TODDLR	3	QL
<b>MEDICAL SUPPLIES AND DME - SUBCUTANEOUS ADMINISTRATION SUPPLY - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
NERIA SUBCUTANEOUS INFUSION SET 6 MM X 110 CM	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
<b>MEDICAL SUPPLIES AND DME - SUBCUTANEOUS INSULIN DELIVERY DEVICES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
OMNIPOD 5 (G6/LIBRE 2 PLUS)	3	ST; QL
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	3	PA; QL
OMNIPOD 5 G6-G7 PODS (GEN 5)	3	PA; QL
OMNIPOD 5 INTRO(G6/LIBRE2PLUS)	3	ST; QL
OMNIPOD CLASSIC PODS (GEN 3)	3	PA; QL
OMNIPOD DASH INTRO KIT (GEN 4)	3	PA; QL
OMNIPOD DASH PODS (GEN 4)	3	PA; QL
V-GO 20	3	
V-GO 30	3	
V-GO 40	3	
<b>MEDICAL SUPPLIES AND DME - URINE GLUCOSE TESTS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
DIASTIX	3	
<b>MEDICAL SUPPLIES AND DME - URINE GLUCOSE-ACETONE COMBINATION TESTS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
KETO-DIASTIX	3	
<b>MEDICAL SUPPLIES AND DME - URINE KETONE TESTS - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
CHEK-STIX CONTROL	3	
KETONE CARE	3	
KETONE URINE TEST	3	
KETOSTIX	3	
TRUEPLUS KETONE	3	
<b>MEDICAL SUPPLIES AND DME-GLUCOSE MONITORING AND INSULIN ADMIN SUPPLIES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT</b>		
AUTOSOFT 30	3	
AUTOSOFT 90	3	
AUTOSOFT XC INFUSION SET 23"	3	
AUTOSOFT XC INFUSION SET 32"	3	
AUTOSOFT XC INFUSION SET 43"	3	
MINIMED MIO ADVANCE INF SET23"	3	
MINIMED MIO ADVANCE INF SET43"	3	
TANDEM MOBI AUTOSOFT 30 KT 23"	3	
TANDEM MOBI AUTOSOFT XC KIT 5"	3	
TANDEM MOBI AUTOSOFT XC KT 23"	3	
TANDEM MOBI TRUSTEEL KIT 23"	3	
TRUSTEEL INFUSION SET 23"	3	
TRUSTEEL INFUSION SET 32"	3	
VARISOFT INFUSION SET 23"	3	
VARISOFT INFUSION SET 32"	3	
VARISOFT INFUSION SET 43"	3	
<b>MEDICAL SUPPLY, FDB SUPERSET</b>		
<b>MEDICAL SUPPLY, FDB SUPERSET</b>		
1ST TIER UNIFINE PENTIPS	3	
1ST TIER UNIFINE PENTIPS PLUS	3	
2-IN-1 LANCET DEVICE	3	
2TEK CONTROL (HIGH-NORMAL)	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
ACCU-CHEK AVIVA CONTROL SOLN	3	
ACCU-CHEK FASTCLIX LANCET DRUM	3	
ACCU-CHEK FASTCLIX LANCING DEV	3	
ACCU-CHEK GUIDE L1-L2 CTRL SOL	3	
ACCU-CHEK SAFE-T-PRO	3	
ACCU-CHEK SAFE-T-PRO PLUS	3	
ACCU-CHEK SMARTVIEW CONTRL SOL	3	
ACCU-CHEK SOFT DEV LANCETS	3	
ACCU-CHEK SOFTCLIX LANCETS	3	
ACCUTREND GLUCOSE CONTROL	3	
ACE AEROSOL CLOUD ENHANCER	3	QL
ACTI-LANCE LANCETS	1	
ADJUSTABLE LANCING DEVICE	3	
ADVANCED LANCING DEVICE	3	
ADVANCED TRAVEL LANCETS 28 GAUGE	3	
ADVOCATE LANCET	3	
ADVOCATE LANCING DEVICE	3	
ADVOCATE PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 5/32"	3	
ADVOCATE REDI-CODE PLUS CTRL L	3	
ADVOCATE REDI-CODE+ CTRL HIGH	3	
ADVOCATE SYRINGES SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	3	
AEROCHAMBER MINI	3	QL
AEROCHAMBER MV	3	QL
AEROCHAMBER PLUS FLOW-VU	3	QL
AEROCHAMBER PLUS FLOW-VU,L MSK	3	QL
AEROCHAMBER PLUS FLOW-VU,M MSK	3	QL
AEROCHAMBER PLUS FLOW-VU,S MSK	3	QL
AEROCHAMBER PLUS Z STAT LG MSK	3	QL
AEROCHAMBER PLUS Z STAT MD MSK	3	QL
AEROCHAMBER PLUS Z STAT SM MSK	3	QL
AEROCHAMBER Z-STAT PLUS-FLW SG	3	QL
AEROTRACH PLUS	3	QL
AEROVENT PLUS	3	QL
AGAMATRIX CONTROL HIGH	3	
AGAMATRIX CONTROL NORM-HI	3	
AIMSCO LATEX CONDOM	3	Covered in full*
ALKALINE BATTERIES	3	
ALLERGIST TRAY 1/2 ML 27GX3/8"	3	
ALLERGIST TRAY INTRADERMAL BEV SYRINGE 1 ML 26 GAUGE X 1/2"	3	
ALLERGY SYRINGE	3	
ALTERNATE SITE LANCET	3	
ALTERNATE SITE LANCING DEVICE	3	
AQUA LANCE LANCING DEVICE	3	
ASSURE 4 CONTROL SOLUTION	3	
ASSURE DOSE NORMAL CONTROL	3	
ASSURE DOSE NORM-HI CONTROL	3	
ASSURE ID PEN NEEDLE NEEDLE 30 GAUGE X 5/16"	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
ASSURE LANCE	3	
ASSURE LANCE PLUS	3	
ASSURE PRISM CONTROL 1-2 SOLN	3	
ASTHMA CHECK METER	3	
AUTOJECT 2 INJECTION DEVICE	3	
AUTO-LANCET MINI	3	
AUTOLET IMPRESSION LANC DEV	3	
AUTOLET LANCING DEVICE	3	
AUTOPEN 1 TO 21 UNITS	3	
AUTOPEN 2 TO 42 UNITS	3	
AUTOSOFT 30	3	
AUTOSOFT 90	3	
AUTOSOFT XC INFUSION SET 23"	3	
AUTOSOFT XC INFUSION SET 32"	3	
AUTOSOFT XC INFUSION SET 43"	3	
BD ALLERGY SYRINGE	3	
BD AUTOSHIELD DUO PEN NEEDLE	2	
BD BLUNT PLASTIC CANNULA SYRINGE	3	
BD BULK SYRINGE SLIP TIP SYRINGE 1 ML	3	
BD ECLIPSE	3	
BD ECLIPSE LUER-LOK NEEDLE 21 GAUGE X 1 1/2", 25 GAUGE X 1 1/2", 30 X 1/2 "	3	
BD ECLIPSE LUER-LOK SYRINGE 1 ML 27 X 1/2", 1 ML 30 GAUGE X 1/2", 3 ML 23 GAUGE X 1 1/2", 3 ML 25 X 5/8"	3	
BD FILTER NEEDLE 5-MICRON NOKO	3	
BD FILTER NEEDLE-5 MICRON	3	
BD INSULIN SYRINGE (HALF UNIT)	3	
BD INSULIN SYRINGE U-500	3	
BD INSULIN SYRINGE ULTRA-FINE	3	
BD INTEGRA NEEDLE	3	
BD INTEGRA SYRINGE SYRINGE 3 ML 21 GAUGE X 1 1/2", 3 ML 23 GAUGE X 1", 3 ML 25 GAUGE X 1", 3 ML 25 GAUGE X 5/8"	3	
BD INTERLINK BLUNT PLASTIC CAN	3	
BD INTERLINK SYRINGE	3	
BD INTRADERMAL BEVEL NEEDLES	3	
BD LO-DOSE MICRO-FINE IV	3	
BD LUER-LOK BULK SYRINGE	3	
BD LUER-LOK SYRINGE SYRINGE 1 ML, 1 ML 20 GAUGE X 1", 10 ML 20 X 1 1/2", 10 ML 20 X 1", 10 ML 21 GAUGE X 1", 10 ML 21 X 1 1/2", 20 ML, 3 ML, 3 ML 18 X 1 1/2", 3 ML 20 GAUGE X 1 1/2", 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 1 1/2 ", 3 ML 25 X 5/8", 5 ML, 5 ML 20 X 1 1/2", 5 ML 20 X 1", 5 ML 21 GAUGE X 1 1/2", 5 ML 21 GAUGE X 1", 50 ML	3	
BD LUER-LOK TIP CONTROL SYRING	3	
BD MICROTAINER LANCET	3	
BD NANO 2ND GEN PEN NEEDLE	2	
BD NOKOR ADMIX NEEDLE	3	
BD PRECISIONGLIDE NEEDLE	3	
BD PRECISIONGLIDE NON-STERILE NEEDLE 18 GAUGE X 1 1/2", 19 GAUGE X 1 1/2", 20 GAUGE X 1 1/2", 21 GAUGE X 1 1/2", 23 GAUGE X 1", 25 GAUGE X 1", 25 GAUGE X 5/8"	3	
BD Q-SYTE MDV ADAPTER	3	
BD Q-SYTE SPLIT-SEPT DEVICE	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
BD QUINCKE SPINAL NEEDLE	3	
BD REGULAR BEVEL NEEDLES NEEDLE 18 GAUGE X 1 1/2", 18 GAUGE X 1", 19 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 23 GAUGE X 3/4", 25 GAUGE X 1 1/2", 25 GAUGE X 5/8", 26 GAUGE X 1/2", 27 GAUGE X 1/2"	3	
BD SAFETYGLIDE ALLERGIST TRAY	3	
BD SAFETYGLIDE INSULIN SYRINGE	3	
BD SAFETYGLIDE NEEDLE NEEDLE 18 GAUGE X 1 1/2", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 23 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8", 27 GAUGE X 5/8"	3	
BD SAFETYGLIDE SHIELDING REG	3	
BD SAFETYGLIDE SYRINGE SYRINGE 1 ML 27 GAUGE X 5/8", 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 5/8"	3	
BD SAFETYGLIDE TB REG BEVEL	3	
BD SLIP TIP SYRINGE	3	
B-D SLIP TIP SYRINGE	3	
BD SPECIALTY USE NEEDLES	3	
BD SYRINGE	3	
BD SYRINGE CATH TIP NONSTERILE	3	
BD SYRINGE CATHETER TIP	3	
BD SYRINGE LUER-LOK NONSTERILE	3	
BD SYRINGE LUER-LOK STERILE	3	
BD SYRINGE SLIP TIP NONSTERILE SYRINGE 50 ML	3	
BD SYRINGE-DUAL CANNULA	3	
BD TUBERCULIN SLIP-TIP SYRINGE 1 ML	3	
BD TUBERCULIN SYRINGE	3	
BD ULTRA-FINE MICRO PEN NEEDLE	2	
BD ULTRA-FINE MINI PEN NEEDLE	2	
BD ULTRA-FINE NANO PEN NEEDLE	2	
BD ULTRA-FINE ORIG PEN NEEDLE	2	
BD ULTRA-FINE SHORT PEN NEEDLE	2	
BD VEO INSULIN SYR (HALF UNIT)	3	
BD VEO INSULIN SYRINGE UF	3	
BLOOD GLUCOSE CONTRL HI,NORMAL	3	
BLOOD GLUCOSE CONTROL, NORMAL	3	
BLUNT NEEDLE, DISPOSABLE NEEDLE 18 X 1 1/2 ", 22 X 1 1/2 "	3	
BREATHERITE MDI SPACER	3	QL
BREATHERITE SPACER-MASK, NEO.	3	QL
BREATHERITE SPACER-MASK,ADULT	3	QL
BREATHERITE SPACER-MASK,CHILD	3	QL
BREATHERITE SPACER-MASK,INFANT	3	QL
BREATHERITE SPACER-MASK,S.CHLD	3	QL
BREATHERITE VALVED MDI CHAMBER	3	QL
BREATHERITE VALVED MDI SPACER	3	QL
BREEZE 2 CONTROL SOLUTION, LOW	3	
BREEZE 2 CONTROL SOLUTION, NML	3	
BREEZE 2 CONTROL SOLUTION,HIGH	3	
BULLSEYE MINI SAFETY LANCETS	3	
CAREFINE PEN NEEDLE	3	
CAREONE LANCING DEVICE	3	
CAREONE ULTRA THIN LANCET	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
CAREPOINT LUER LOCK SYRINGE	3	
CAREPOINT LUER LOCK SYR-NEEDLE	3	
CAREPOINT LUER SLIP SYRINGE	3	
CAREPOINT LUER SLIP SYRING-NDL	3	
CAREPOINT SAFETY LL SYR-NEEDLE	3	
CARESENS CONTROL A AND B	3	
CARETOUCH CONTROL SOLN L2-L3	3	
CARETOUCH INSULIN SYRINGE	3	
CARETOUCH LANCING DEVICE	3	
CARETOUCH LUER LOCK SYRINGE	3	
CARETOUCH LUER LOCK SYR-NEEDLE	3	
CARETOUCH LUER SLIP SYRINGE	3	
CARETOUCH PEN NEEDLE	3	
CARETOUCH TWIST LANCET	3	
CAYA CONTOURED	3	Covered in full*
CHEK-STIX CONTROL	3	
CHEMSTRIP 10 MD	3	
CHEMSTRIP 10/SG	3	
CHEMSTRIP 2 GP	3	
CHEMSTRIP 50B	3	
CHEMSTRIP 7	3	
CHEMSTRIP 9	3	
CHEMSTRIP BG LOG BOOK	3	
CHOSEN LANCING DEVICE	3	
CLEVER CHEK LANCETS	3	
CLEVER CHOICE LEVEL 1 CONTROL	3	
CLEVER CHOICE LEVEL 2 CONTROL	3	
CLEVER CHOICE LEVEL 3 CONTROL	3	
CLICKFINE PEN NEEDLE	3	
COAGUCHEK LANCETS	3	
COLOR LANCETS	3	
COMBISTIX REAGENT	3	
COMFORT EZ INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 31 GAUGE X 15/64"	3	
COMFORT EZ LANCETS 23 GAUGE, 28 GAUGE	3	
COMFORT EZ PEN NEEDLES	3	
COMPACT SPACE CHAMBER	3	QL
COMPACT SPACE CHAMBER-LRG MASK	3	QL
COMPACT SPACE CHAMBER-MED MASK	3	QL
COMPACT SPACE CHAMBER-SM MASK	3	QL
CONTOUR CONTROL SOLUTION, HIGH	3	
CONTOUR CONTROL SOLUTION, LOW	3	
CONTOUR CONTROL SOLUTION, NML	3	
CONTOUR NEXT LEV 1 CONTROL SOL	3	
CONTOUR NEXT LEV 2 CONTROL SOL	3	
DAVOL IRRIGATION SYRINGE	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
DAVOL PISTON IRRIGATION	3	
DEXCOM G6 RECEIVER	2	PA; QL
DEXCOM G6 SENSOR	2	PA; QL
DEXCOM G6 TRANSMITTER	2	PA; QL
DEXCOM G7 RECEIVER	2	PA; QL
DEXCOM G7 SENSOR	2	PA; QL
DIASTIX	3	
DIATRUE CONTROL SOLN NORMAL	3	
DIATRUE CONTROL SOLUTION HIGH	3	
DIATRUE CONTROL SOLUTION LOW	3	
DISPOSABLE POWER	3	
DOVER BULB SYRINGE	3	
DROPLET INSULIN SYR(HALF UNIT)	3	
DROPLET INSULIN SYRINGE	3	
DROPLET LANCETS	3	
DROPLET LANCING DEVICE	3	
DROPLET PEN NEEDLE	3	
DROPSAFE INSULIN SYRINGE	3	
DROPSAFE PEN NEEDLE	3	
DUREX AVANTI BARE REAL FEEL	3	Covered in full*
EASIVENT HOLDING CHAMBER	3	QL
EASIVENT MASK LARGE	3	QL
EASIVENT MASK MEDIUM	3	QL
EASIVENT MASK SMALL	3	QL
EASY COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.3 ML 31 X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1 ML 32 GAUGE X 5/16", 1/2 ML 32 GAUGE X 5/16"	3	
EASY COMFORT LANCETS	3	
EASY COMFORT PEN NEEDLES	3	
EASY GLIDE CATHETER TIP SYRING	3	
EASY GLIDE INSULIN SYRINGE	3	
EASY GLIDE LUER LOCK SYRINGE	3	
EASY GLIDE LUER SLIP TB SYRING	3	
EASY GLIDE PEN NEEDLE	3	
EASY MINI EJECT LANCING DEVICE	3	
EASY PLUS II HIGH CONTROL	3	
EASY PLUS II LOW CONTROL	3	
EASY STEP HIGH CONTROL SOLN	3	
EASY STEP LOW CONTROL SOLUTION	3	
EASY STEP NORMAL CONTROL SOLN	3	
EASY TALK HIGH CONTROL	3	
EASY TALK LOW CONTROL	3	
EASY TALK PLUS II HIGH CONTROL	3	
EASY TALK PLUS II LOW CONTROL	3	
EASY TOUCH	3	
EASY TOUCH BLU CTRL SOLN-L1,L3	3	
EASY TOUCH FLIPLOCK INSULIN	3	
EASY TOUCH FLIPLOCK NEEDLE	3	
EASY TOUCH FLIPLOCK SYRINGE	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.



Product Description	Tier	Limits/Restrictions/Notes
EASY TOUCH FLURINGE	3	
EASY TOUCH FLURINGE FLIPLOCK	3	
EASY TOUCH FLURINGE SHEATHLOCK	3	
EASY TOUCH HIGH-LOW CONTROL	3	
EASY TOUCH HYPODERMIC NEEDLE	3	
EASY TOUCH INSULIN SAFETY SYR	3	
EASY TOUCH INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 1 ML 27 GAUGE X 1/2", 1 ML 27 GAUGE X 5/8", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 5/16, 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2"	3	
EASY TOUCH LANCETS	3	
EASY TOUCH LANCING DEVICE	3	
EASY TOUCH LUER LOCK INSULIN	3	
EASY TOUCH LUER LOCK SYRINGE	3	
EASY TOUCH PEN NEEDLE	3	
EASY TOUCH SAFETY LANCETS	3	
EASY TOUCH SHEATHLOCK INSULIN	3	
EASY TOUCH SHEATHLOCK SYRG-NDL	3	
EASY TOUCH SHEATHLOCK SYRINGE SYRINGE 10 ML, 3 ML	3	
EASY TOUCH TUBERCULIN FLIPLOCK	3	
EASY TOUCH TUBERCULIN SHEATHLK	3	
EASY TOUCH TWIST LANCETS	3	
EASY TOUCH UNI-SLIP	3	
EASY TRAK HIGH CONTROL	3	
EASY TRAK II CTRL SOLN-NORMAL	3	
EASY TRAK LOW CONTROL	3	
EASY TWIST AND CAP LANCETS	3	
EASYMAX 15 LEVEL 2	3	
EASYMAX NORMAL CONTROL	3	
EASYPOINT NEEDLE	3	
ECLIPSE NEEDLE NEEDLE 23 GAUGE X 1", 25 GAUGE X 5/8"	3	
ECLIPSE SYRINGE	3	
ELEMENT COMPACT HIGH CONTROL	3	
ELEMENT COMPACT NORMAL CONTROL	3	
ELEMENT HIGH CONTROL	3	
ELEMENT LOW CONTROL	3	
ELEMENT NORMAL CONTROL	3	
EMBRACE EVO LEVEL 1	3	
EMBRACE GLUCOSE CONTROL HIGH	3	
EMBRACE GLUCOSE CONTROL LOW	3	
EMBRACE LANCETS	3	
EMBRACE PRO	3	
EMBRACE TALK CONTROL-HIGH (L2)	3	
EMBRACE TALK CONTROL-LOW (L1)	3	
EVENCARE G3 CONTROL	3	
EVOLUTION NORMAL CONTROL	3	
EXCEL SYRINGE	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
EXEL HYPODERMIC NEEDLES NEEDLE 18 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 20 X 3/4", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 22 GAUGE X 1 1/2", 22 GAUGE X 1", 22 GAUGE X 3/4", 23 GAUGE X 3/4", 25 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 3/4", 25 GAUGE X 5/8", 26 GAUGE X 1 1/2", 26 GAUGE X 1/2", 26 GAUGE X 3/8", 26 GAUGE X 5/8", 27 GAUGE X 1/2", 30 GAUGE X 1/2"	3	
EXEL INSULIN	3	
EXEL SYRINGE SYRINGE 10 ML, 3 ML 27 GAUGE X 1 1/4", 30 ML, 50 ML	3	
E-Z JECT LANCETS	1	
E-Z JECT THIN LANCETS	1	
EZ SMART LANCETS	3	
FANTASY CONDOM	3	Covered in full*
FC2 FEMALE CONDOM	3	Covered in full*
FEMCAP	3	Covered in full*
FILTER NEEDLES NEEDLE 18 GAUGE X 1 1/2"	3	
FINGERSTIX LANCETS	3	
FLEXICHAMBER-LG CHILD MASK	3	QL
FLEXICHAMBER-SM ADULT MASK	3	QL
FLEXICHAMBER-SM CHILD MASK	3	QL
FLOW-EZE VENTED NEEDLE	3	
FORA GTEL KETONE TEST STRIP	3	
FORA HIGH CONTROL	3	
FORA LANCING DEVICE	3	
FORA LOW CONTROL	3	
FORA NORMAL CONTROL	3	
FORACARE GDH HIGH CONTROL	3	
FORACARE GDH LOW CONTROL	3	
FORACARE GDH NORMAL CONTROL	3	
FORACARE LANCETS	3	
FREESTYLE CONTROL	3	
FREESTYLE FLASH SYSTEM	2	
FREESTYLE FREEDOM	2	
FREESTYLE FREEDOM LITE	2	
FREESTYLE INSULINX	2	
FREESTYLE INSULINX STRIP	2	QL
FREESTYLE INSULINX TEST STRIPS	2	QL
FREESTYLE LANCETS	3	
FREESTYLE LIBRE 14 DAY READER	2	PA; QL
FREESTYLE LIBRE 14 DAY SENSOR	2	PA; QL
FREESTYLE LIBRE 2 READER	2	PA; QL
FREESTYLE LIBRE 2 SENSOR	2	PA; QL
FREESTYLE LIBRE 3 READER	2	PA; QL
FREESTYLE LIBRE 3 SENSOR	2	PA; QL
FREESTYLE LITE METER	2	
FREESTYLE LITE STRIPS	2	QL
FREESTYLE PRECISION	3	
FREESTYLE PRECISION NEO METER	2	
FREESTYLE PRECISION NEO STRIPS	2	QL
FREESTYLE SYSTEM KIT	2	
FREESTYLE TEST	2	QL

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Product Description	Tier	Limits/Restrictions/Notes
FREESTYLE UNISTIK 2	3	
GE100 CONTROL SOLUTION NORMAL	3	
GENTEEL VACUUM LANCING DEVICE	3	
GLUCOCARD 01 HI-NORMAL CONTROL	3	
GLUCOCARD 01 NORMAL CONTROL	3	
GLUCOCARD EXPRESSION SOLUTION	3	
GLUCOCARD SHINE	3	
GLUCOCOM AUTOLINK	3	
GLUCOCOM CONTROL HIGH	3	
GLUCOCOM CONTROL NORMAL	3	
GLUCOCOM LANCETS	3	
GLUCOSE CONTROL	3	
GLUCOSE KETONE CONTROL SOLN	3	
GOJJI GLUCOSE CNTRL SOL-NORMAL	3	
HEALTHPRO HIGH-LOW CONTROL	3	
HEALTHWISE INSULIN SYRINGE	3	
HEALTHWISE PEN NEEDLE	3	
HEMA-COMBISTIX	3	
huber safety needles (disp.)	1	
HYPODERMIC NEEDLES NEEDLE 21 GAUGE X 1", 23 GAUGE X 1 1/2", 26 GAUGE X 5/8"	3	
HYPOLANCE AST LANCING	3	
INCONTROL LANCING DEVICE	3	
INCONTROL PEN NEEDLE	3	
INCONTROL SUPER THIN LANCETS	3	
INCONTROL ULTRA THIN LANCETS	3	
INFINITY CONTROL SOLUTION HIGH	3	
INFINITY CONTROL SOLUTION LOW	3	
INFINITY CONTROL SOLUTION NORM	3	
INJECT EASE LANCETS	3	
INPEN (FOR HUMALOG) BLUE	3	QL
INPEN (FOR HUMALOG) GREY	3	QL
INPEN (FOR HUMALOG) PINK	3	QL
INPEN (NOVOLOG OR FIASP) BLUE	3	QL
INPEN (NOVOLOG OR FIASP) GREY	3	QL
INPEN (NOVOLOG OR FIASP) PINK	3	QL
INSUL-CAP	3	
INSUL-EZE	3	
INSULIN SYR/NDL U100 HALF MARK	3	
INSULIN SYRINGE MICROFINE SYRINGE 1 ML 27 GAUGE X 5/8"	3	
INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	3	
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.3 ML 29 GAUGE, 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30, 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 7/16", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 30 GAUGE X 7/16", 1 ML 31 GAUGE X 1/4", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 29, 1/2 ML 31 GAUGE X 1/4", 1/2 ML 31 GAUGE X 15/64"	3	

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Product Description	Tier	Limits/Restrictions/Notes
insulin syringe-needle u-100 syringe 1 ml 30 gauge x 3/8"	1	
INSUPEN PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	3	
INTEGRA PRECISIONGLIDE NEEDLE	3	
INTEGRA SYRINGE	3	
INTERLINK SYRINGE AND CANNULA	3	
INVACARE LANCETS	3	
IV ADMINISTRATION SET	3	
KETO-DIASTIX	3	
KETONE CARE	3	
KETONE URINE TEST	3	
KETOSTIX	3	
KIMONO MICROTHIN AQUA LUBE CON	3	Covered in full*
KIMONO MICROTHIN CONDOMS	3	Covered in full*
KIMONO MICROTHIN LARGE CONDOMS	3	Covered in full*
KIMONO TEXTURED CONDOMS	3	Covered in full*
LABSTIX REAGENT	3	
LANCETS	3	
LANCETS, SUPER THIN	3	
LANCETS, THIN , 28 GAUGE	3	
LANCETS, ULTRA THIN	3	
LANCING DEVICE	3	
LANCING DEVICE WITH LANCETS	3	
LANCING SYSTEM	3	
LANZO LANCING DEVICE	3	
LIFESHIELD BLUNT CANNULA	3	
LITE TOUCH-MEDIUM MASK	3	QL
LITEAIRE MDI CHAMBER	3	QL
LITETOUCH-LARGE MASK	3	QL
LITETOUCH-SMALL MASK	3	QL
LUER LOCK SYRINGE SYRINGE 30 ML	3	
LUER SLIP TIP SYRINGE TRAY	3	
LUER-LOK TIP	3	
MAGELLAN INSULIN SAFETY SYRNG SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	3	
MAGELLAN SAFETY SYRINGE	3	
MAGELLAN SYRINGE	3	
MAGELLAN TUBERCULIN SAFETY SYR	3	
MAXICOMFORT II PEN NEEDLE	3	
MAXICOMFORT INSULIN SYRINGE	3	
MAXI-COMFORT INSULIN SYRINGE	3	
MAXICOMFORT SAFETY PEN NEEDLE	3	
MEDISENSE	3	
MEDISENSE GLUCOSE KETONE	3	
MEDISENSE MID CONTROL	3	
MEDISENSE THIN LANCETS	3	
MEDLANCE PLUS LANCETS	3	
MEDLANCE PLUS SPECIAL BLADE	3	
MEDPOINT NORMAL CONTROL	3	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
MICRO THIN LANCETS	3	
MICROCHAMBER	3	QL
MICRODOT HIGH-LOW CONTROL	3	
MICRODOT NORMAL CONTROL	3	
MICROLET 2 LANCING DEVICE	3	
MICROLET LANCET	3	
MICROLET NEXT LANCING DEVICE	3	
MICROSPACER	3	QL
MINI LANCING DEVICE	3	
MINI ULTRA-THIN II	3	
MINI WRIGHT PEAK FLOW METER	3	
MINIMED MIO ADVANCE INF SET23"	3	
MINIMED MIO ADVANCE INF SET43"	3	
MONOJECT 140CC PISTON SYRINGE	3	
MONOJECT 3CC SYR 25GX1"	3	
MONOJECT BLOOD COLLECTION	3	
MONOJECT BLUNT CANNULAS NEEDLE 15 GAUGE X 1 1/2"	3	
MONOJECT CONTROL SYRINGE LUER	3	
MONOJECT DISPOSABLE SYRINGE	3	
MONOJECT ECCENTRIC NON-STERILE SYRINGE 35 ML	3	
MONOJECT ENFIT STERILE SYRINGE SYRINGE 1 ML, 35 ML, 6 ML, 60 ML	3	
MONOJECT ENFIT SYRINGE	3	
MONOJECT FILTER ASPIRATOR	3	
MONOJECT FILTER NEEDLE	3	
MONOJECT HYPODERMIC NEEDLES NEEDLE 14 GAUGE X 1 1/2", 18 GAUGE X 1 1/2", 18 GAUGE X 1", 19 GAUGE X 1 1/2", 19 GAUGE X 1", 20 GAUGE X 1 1/2", 20 GAUGE X 1", 21 GAUGE X 1 1/2", 21 GAUGE X 1", 22 GAUGE X 1 1/2", 22 GAUGE X 1", 23 GAUGE X 1", 25 GAUGE X 1 1/2", 25 GAUGE X 1", 25 GAUGE X 5/8", 26 GAUGE X 1 1/2", 27 GAUGE X 1 1/2", 27 GAUGE X 1/2", 30 GAUGE X 3/4"	3	
MONOJECT HYPODERMIC POLYPROPYL NEEDLE 18 GAUGE X 1 1/2"	3	
MONOJECT INSULIN SAFETY SYRING	3	
MONOJECT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML , 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	3	
MONOJECT LUER-LOCK TIP SYRINGE 12 ML	3	
MONOJECT MAGELLAN SYRINGE	3	
MONOJECT MEDICATION TRANSF NDL	3	
MONOJECT PHARMACY TRAY LUER	3	
MONOJECT PHARMACY TRAY REG TIP	3	
MONOJECT REG TIP NON-STERILE	3	
MONOJECT REGULAR LUER SYRINGE 3 ML, 35 ML, 6 ML	3	
MONOJECT SAFETY LUER LOCK TIP	3	
MONOJECT SAFETY SYRINGES SYRINGE , 12 ML, 12 ML 20 X 1 1/2", 3 ML 20 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 6 ML	3	
MONOJECT SMARTIP CANNULA	3	
MONOJECT SYRINGE	3	
MONOJECT SYRINGE LUER LOK SYRINGE 35 ML, 60 ML	3	
MONOJECT TB	3	
MONOJECT TB LUER LOK	3	
MONOJECT TB SAFETY SYRINGE	3	

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Product Description	Tier	Limits/Restrictions/Notes
MONOJECT TUBERCULIN SYRINGE	3	
MONOJECT ULTRA COMFORT INSULIN	3	
MONOLET LANCETS	3	
MONOLET THIN LANCETS	3	
MONTHPIECE	3	QL
MULTI-DRAW NEEDLE	3	
MULTI-LANCET DEVICE 2	3	
MULTISTIX	3	
MULTISTIX 10 SG	3	
MULTISTIX 5	3	
MULTISTIX 7	3	
MULTISTIX 8 SG	3	
MULTISTIX 9	3	
MULTISTIX 9 SG	3	
MYGLUCOHEALTH CONTROL SOLUTION	3	
MYGLUCOHEALTH LANCETS	3	
NEEDLE (DISP) 16 G	3	
NEEDLE (DISP) 18 G	3	
NEEDLE (DISP) 19 G	3	
NEEDLE (DISP) 23 GAUGE	3	
NEEDLES, HUBER DISPOSABLE	3	
NERIA SUBCUTANEOUS INFUSION SET 6 MM X 110 CM	3	
NOKOR NEEDLE	3	
NORM-JECT	3	
NORM-JECT TUBERKULIN	3	
NOVA SAFETY LANCETS	3	
NOVA SUREFLEX LANCETS	3	
NOVAMAX PLUS GLU-KET	3	
NOVAMAX PLUS KETONE	3	
NOVOFINE 32	3	
NOVOFINE PLUS	3	
NOVOPEN ECHO	3	
OMNIPOD 5 (G6/LIBRE 2 PLUS)	3	ST; QL
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	3	PA; QL
OMNIPOD 5 G6-G7 PODS (GEN 5)	3	PA; QL
OMNIPOD 5 INTRO(G6/LIBRE2PLUS)	3	ST; QL
OMNIPOD CLASSIC PODS (GEN 3)	3	PA; QL
OMNIPOD DASH INTRO KIT (GEN 4)	3	PA; QL
OMNIPOD DASH PODS (GEN 4)	3	PA; QL
ON CALL EXPRESS CONTROL	3	
ON CALL LANCET	3	
ON CALL LANCING DEVICE	3	
ONE WAY VALVED MOUTHPIECE	3	QL
ONETOUCH DELICA PLUS LANC DEV	3	
ONETOUCH DELICA PLUS LANCET	3	
ONETOUCH DELICA SAFETY LANCET	3	
ONETOUCH ULTRA CONTROL	3	
ONETOUCH ULTRA TEST	2	QL
ONETOUCH ULTRA2 METER	2	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
ONETOUCH ULTRASOFT 2 LANCET	3	
ONETOUCH VERIO FLEX METER	2	
ONETOUCH VERIO HIGH CONTROL	3	
ONETOUCH VERIO MID CONTROL	3	
ONETOUCH VERIO REFLECT METER	2	
ONETOUCH VERIO TEST STRIPS	2	QL
ON-THE-GO LANCETS	3	
OPTICHAMBER ADULT MASK-LARGE	3	QL
OPTICHAMBER DIAMOND LG MASK	3	QL
OPTICHAMBER DIAMOND VHC	3	QL
OPTICHAMBER DIAMOND-MED MSK	3	QL
OPTICHAMBER DIAMOND-SML MASK	3	QL
OVAL TAPE	3	
PANDA MASK	3	QL
PARADIGM RESERVOIR	3	
PEAK AIR PEAK FLOW METER	3	
PEDIATRIC MEDIUM MASK	3	QL
PEDIATRIC PANDA MASK	3	QL
PEDIATRIC SMALL MASK	3	QL
PEN NEEDLE	3	
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 3/16", 30 GAUGE X 5/16", 31 GAUGE X 1/3", 31 GAUGE X 1/4", 31 GAUGE X 1/6", 31 GAUGE X 15/64", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32", 33 GAUGE X 5/32"	3	
PEN NEEDLE, DIABETIC, SAFETY	3	
PENTIPS PEN NEEDLE	3	
PERSONAL BEST FULL RANGE	3	
PHASEAL PROTECTOR	3	
PIP GLUCOSE CONTROL SOLN L1-L2	3	
PIP LANCET	3	
PISTON SYRINGE WITH ENFIT	3	
POCKET CHAMBER	3	QL
POLY HUB NEEDLE	3	
PRECISION PCX PLUS TEST	2	QL
PRECISION PCX TEST	2	QL
PRECISION POINT OF CARE TEST	2	QL
PRECISION Q-I-D TEST	2	QL
PRECISION XTRA B-KETONE	2	
PRECISION XTRA MONITOR	2	
PRECISION XTRA TEST	2	QL
PRESSURE ACTIVATED LANCETS	3	
PRIMEAIRE	3	QL
PRO COMFORT INSULIN SYRINGE	3	
PRO COMFORT LANCET	3	
PRO COMFORT PEN NEEDLE	3	
PROCARE SPACER WITH ADULT MASK	3	QL
PROCARE SPACER WITH CHILD MASK	3	QL
PROCHAMBER	3	QL
PRODIGY CONTROL SOLUTION, LOW	3	
PRODIGY CONTROL SOLUTION,HIGH	3	

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Product Description	Tier	Limits/Restrictions/Notes
PRODIGY INSULIN SYRINGE	3	
PRODIGY LANCETS	3	
PRODIGY LANCING DEVICE	3	
PRODIGY TWIST TOP LANCET	3	
PUSH BUTTON SAFETY LANCETS 28 GAUGE	3	
REFUAH PLUS GLUCOSE CONTROL	3	
RELIAMED LANCET 28 GAUGE, 30 GAUGE	3	
RELIAMED MINI LANCING DEVICE	3	
RELIAMED SAFETY SEAL LANCETS	3	
RIGHTEST CONTROL SOLUTION HIGH	3	
RIGHTEST CONTROL SOLUTION NORM	3	
RIGHTEST GD500 LANCING DEVICE	3	
RIGHTEST GL300 LANCETS	3	
RITFLO AEROCHAMBER	3	QL
SAFESNAP INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2"	3	
SAFESNAP SYRINGE SYRINGE 1 ML 25 GAUGE X 5/8", 1 ML 27 GAUGE X 1/2", 10 ML, 10 ML 22 GAUGE X 1", 3 ML, 3 ML 25 GAUGE X 5/8", 5 ML, 5 ML 20 GAUGE X 1", 5 ML 22 GAUGE X 1"	3	
SAFETY LANCETS 21 GAUGE, 28 GAUGE	3	
SAFETY NEEDLES	3	
SAFETY PEN NEEDLE	3	
SAFETY SEAL LANCETS	3	
SAFETY-LET LANCETS	3	
SCALP VEIN SET	3	
SECURESAFE INSULIN SYRINGE	3	
SIDESTREAM PEDIATRIC FACE MASK	3	QL
SILICONE MASK - INFANT	3	QL
SILICONE MASK - PEDIATRIC	3	QL
SIL-SERTER	3	
SINGLE-LET	3	
SMART SENSE LANCETS	3	
SMARTDIABETES VANTAGE	3	
SMARTEST CONTROL	3	
SMARTEST LANCET	3	
SOLUS V2 CONTROL SOLUTION, LOW	3	
SOLUS V2 CONTROL SOLUTION,HIGH	3	
SOLUS V2 LANCETS	3	
SOLUS V2 LANCING DEVICE	3	
SPACE CHAMBER	3	QL
SPACE CHAMBER WITH LARGE MASK	3	QL
SPACE CHAMBER WITH MEDIUM MASK	3	QL
SPACE CHAMBER WITH SMALL MASK	3	QL
STERILANCE TL	3	
SUPER THIN LANCETS 28 GAUGE, 30 GAUGE	3	
SURE COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 1/4", 1/2 ML 31 GAUGE X 1/4"	3	
SURE COMFORT LANCETS	3	
SURE COMFORT LANCING PEN	3	

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Product Description	Tier	Limits/Restrictions/Notes
SURE COMFORT PEN NEEDLE	3	
SURE-FINE PEN NEEDLES	3	
SUREFLEX DEVICE WITH LANCETS	3	
SURE-JECT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	3	
SURE-LANCE	3	
SURE-LANCE ULTRA THIN	3	
SURE-PEN LANCING DEVICE	3	
SURE-TEST EASYPLUS MINI SOLUTION	3	
SURE-TOUCH LANCET	3	
SURGUARD2 SAFETY NEEDLE	3	
SURGUARD2 SAFETY SYRINGE 1 ML 25 GAUGE X 5/8", 1 ML 26 GAUGE X 3/8", 1 ML 27 GAUGE X 1/2", 10 ML 20 GAUGE X 1", 10 ML 21 GAUGE X 1 1/2", 3 ML 20 GAUGE X 1", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 GAUGE X 1", 3 ML 23 GAUGE X 1", 3 ML 25 GAUGE X 5/8", 5 ML 20 GAUGE X 1", 5 ML 21 GAUGE X 1 1/2"	3	
SYRINGE (DISPOSABLE)	3	
SYRINGE 3CC/20GX1"	3	
SYRINGE 3CC/21GX1"	3	
SYRINGE 3CC/21GX1-1/2"	3	
SYRINGE 3CC/22GX1"	3	
SYRINGE 3CC/22GX3/4"	3	
SYRINGE 3CC/25GX1"	3	
SYRINGE FILTER 50-0.22 MM-MICRON	3	
SYRINGE WITH NEEDLE SYRINGE 1 ML 25 GAUGE X 1", 3 ML 20 GAUGE X 1 1/2", 3 ML 22 X 1 1/2"	3	
T:FLEX	3	
TANDEM MOBI AUTOSOFT 30 KT 23"	3	
TANDEM MOBI AUTOSOFT XC KIT 5"	3	
TANDEM MOBI AUTOSOFT XC KT 23"	3	
TANDEM MOBI CARTRIDGE	3	
TANDEM MOBI TRUSTEEL KIT 23"	3	
TECHLITE INSULIN SYRINGE SYRINGE 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16	3	
TECHLITE INSULN SYR(HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 15/64", 0.5 ML 31 GAUGE X 5/16"	3	
TECHLITE LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE	3	
TECHLITE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32"	3	
TELCARE CONTROL	3	
TELCARE LANCETS	3	
TEMPO SMART BUTTON	3	QL
TERUMO ALLERGY SYRINGE	3	
TERUMO HYPODERMIC NEEDLE/SYRIN SYRINGE 5 ML 21 GAUGE X 1 1/2"	3	
TERUMO INSULIN SYRINGE SYRINGE 0.3 ML 30 X 3/8", 1 ML 27 GAUGE X 1/2", 1/2 ML 27 GAUGE X 1/2", 1/2 ML 30 X 3/8"	3	
TERUMO SYRINGE SYRINGE 3 ML 23 X 1", 30 ML	3	
THIN LANCETS	3	
thinpro insulin syringe syringe 0.3 ml 29 gauge x 1/2", 0.5 ml 29 gauge x 1/2", 1 ml 29 gauge x 1/2"	1	

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Product Description	Tier	Limits/Restrictions/Notes
THINPRO INSULIN SYRINGE SYRINGE 0.3 ML 31 X 3/8", 0.5 ML 31 X 3/8", 1 ML 31 X 3/8"	3	
TOOMEY SYRINGE	3	
TOPCARE CLICKFINE	3	
TOPCARE ULTRA COMFORT SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	3	
TOPCARE UNIVERSAL1 LANCET	3	
TRUE COMFORT INSULIN SYRINGE	3	
TRUE COMFORT LANCET	3	
TRUE COMFORT PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/32"	3	
TRUE COMFORT PRO INS SYRINGE	3	
TRUE METRIX LEVEL 1	3	
TRUE METRIX LEVEL 2	3	
TRUE METRIX LEVEL 3	3	
TRUEDRAW LANCING DEVICE	3	
TRUEPLUS INSULIN	3	
TRUEPLUS KETONE	3	
TRUEPLUS LANCETS	3	
TRUEPLUS PEN NEEDLE	3	
TRUSTEEL INFUSION SET 23"	3	
TRUSTEEL INFUSION SET 32"	3	
TRUSTEX LATEX CONDOM	3	Covered in full*
TRUSTEX LUBRICATED CONDOMS	3	Covered in full*
TRUSTEX NON-LUB CONDOMS	3	Covered in full*
TRUSTEX-RIA LUB/SPERMICIDE	3	Covered in full*
TRUSTEX-RIA NON-LUB CONDOMS	3	Covered in full*
TUBERCULIN SYRINGE	3	
TUBERCULIN-ALLERGY SYRINGES	3	
TWIST LANCETS	3	
ULTICARE INSULIN SYRINGE	3	
ULTICARE INSULN SYR(HALF UNIT)	3	
ULTICARE LOW DEAD SPACE SYRINGE	3	
ULTICARE PEN NEEDLE	3	
ULTICARE SAFETY SYRINGE	3	
ULTICARE SYR 0.3 ML 30GX1/2" (WITH SYRINGE CONTAINER)	3	
ULTICARE SYR 0.5 ML 30GX1/2" (WITH SYRINGE CONTAINER)	3	
ulticare syringe 0.3 ml 30 gauge x 1/2", 0.5 ml 30 gauge x 1/2", 1 ml 30 gauge x 1/2"	1	
ULTICARE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 25 GAUGE X 5/8", 1 ML 31 GAUGE X 5/16	3	
ULTICARE SYRINGE 1 ML 30GX1/2" (WITH SYRINGE CONTAINER)	3	
ULTICARE TB SAFETY SYRINGE	3	
ULTIGUARD SAFEPACK-INSULIN SYR	3	
ULTIGUARD SAFEPACK-PEN NEEDLE	3	
ULTI-LANCE	3	
ULTILET BASIC LANCETS	3	
ULTILET CLASSIC LANCETS	3	
ULTILET INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE, 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1/2 ML 29	3	

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Product Description	Tier	Limits/Restrictions/Notes
ULTILET LANCETS	3	
ULTILET PEN NEEDLE	3	
ULTILET SAFETY LANCETS	3	
ULTRA CMFT INS SYR (HALF UNIT)	3	
ULTRA COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30, 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 29	3	
ULTRA FLO INSUL SYR(HALF UNIT)	3	
ULTRA FLO INSULIN SYRINGE	3	
ULTRA THIN II LANCETS	3	
ULTRA THIN LANCETS	3	
ULTRA THIN PEN NEEDLE	3	
ULTRA THIN PLUS LANCETS	3	
ULTRA TLC LANCETS	3	
ULTRACARE INSULIN SYRINGE	3	
ULTRA-CARE LANCETS	3	
ULTRACARE PEN NEEDLE	3	
ULTRALANCE LANCETS	3	
ULTRA-THIN II (SHORT) INS SYR	3	
ULTRA-THIN II (SHORT) PEN NDL	3	
ULTRA-THIN II INS PEN NEEDLES	3	
ULTRA-THIN II INSULIN SYRINGE	3	
ULTRA-THIN II LANCETS	3	
ULTRATRAK HIGH-LOW CONTROL	3	
ULTRATRAK NORMAL CONTROL	3	
ULTRATRAK ULTIMATE SOLUTION	3	
UNIFINE PENTIPS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32", 33 GAUGE X 5/32"	3	
UNIFINE PENTIPS PLUS	3	
UNILET COMFORTOUCH LANCET	3	
UNILET GP LANCET	3	
UNILET LANCET	3	
UNILET LANCETS	3	
UNILET SUPER THIN LANCETS	3	
UNISTIK 2 DEVICE	3	
UNISTIK 2 NORMAL LANCET	3	
UNISTIK 3 COMFORT LANCET	3	
UNISTIK 3 EXTRA LANCET	3	
UNISTIK 3 GENTLE	3	
UNISTIK 3 NORMAL LANCET	3	
UNISTIK COMFORT LANCETS	3	
UNISTIK CZT LANCET	3	
UNISTIK EXTRA LANCETS	3	
UNISTIK NORMAL LANCETS	3	
UNISTIK PRO LANCET	3	
UNISTIK SAFETY	3	
UNISTIK TOUCH LANCETS	3	

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Product Description	Tier	Limits/Restrictions/Notes
UNISTRIP LOW CONTROL	3	
UNIVERSAL 1 LANCETS	3	
URISTIX 4	3	
URISTIX REAGENT	3	
VANISHPOINT INSULIN SYRINGE	3	
VANISHPOINT SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 1 ML 25 GAUGE X 1", 1 ML 29 GAUGE X 1/2", 10 ML 21 GAUGE X 1 1/2", 3 ML 20 GAUGE X 1", 3 ML 21 GAUGE X 1 1/2", 3 ML 21 GAUGE X 1", 3 ML 22 GAUGE X 1", 3 ML 22 X 1 1/2", 3 ML 23 GAUGE X 1 1/2", 3 ML 23 X 1", 3 ML 25 GAUGE X 1", 3 ML 25 X 5/8", 5 ML 21 GAUGE X 1 1/2", 5 ML 21 GAUGE X 1", 5 ML 22 GAUGE X 1 1/2"	3	
VANISHPOINT TUBERCULIN SYRINGE	3	
VARISOFT INFUSION SET 23"	3	
VARISOFT INFUSION SET 32"	3	
VARISOFT INFUSION SET 43"	3	
VERIFINE INSULIN SYRINGE	3	
V-GO 20	3	
V-GO 30	3	
V-GO 40	3	
VIVAGUARD INO CTRL SOLN-L1,2,3	3	
VIVAGUARD INO CTRL SOLN-L1,L3	3	
VIVAGUARD INO CTRL SOLN-L2	3	
VIVAGUARD LANCET	3	
VIVAGUARD LANCING DEVICE	3	
VIVAGUARD SAFETY LANCET	3	
VORTEX ADULT MASK	3	QL
VORTEX HOLDING CHAMBER	3	QL
VORTEX VHC FROG MASK-CHILD	3	QL
VORTEX VHC LADYBUG MASK-TODDLR	3	QL
WAVESENSE CONTROL SOLUTION	3	
WIDE-SEAL DIAPHRAGM 60	3	Covered in full*
WIDE-SEAL DIAPHRAGM 65	3	Covered in full*
WIDE-SEAL DIAPHRAGM 70	3	Covered in full*
WIDE-SEAL DIAPHRAGM 75	3	Covered in full*
WIDE-SEAL DIAPHRAGM 80	3	Covered in full*
WIDE-SEAL DIAPHRAGM 85	3	Covered in full*
WIDE-SEAL DIAPHRAGM 90	3	Covered in full*
WIDE-SEAL DIAPHRAGM 95	3	Covered in full*
YALE DISPOSABLE NEEDLES	3	
<b>METABOLIC DISEASE ENZYME REPLACEMENT AGENTS - DRUGS FOR METABOLIC DISEASE</b>		
<b>METABOLIC DISEASE ENZYME REPLACEMENT, FABRY'S DISEASE - DRUGS FOR METABOLIC DISEASE</b>		
FABRAZYME	3	PA; MS; S
<b>METABOLIC DISEASE ENZYME REPLACEMENT, HYPOPHOSPHATASIA - DRUGS FOR METABOLIC DISEASE</b>		
STRENSIQ	3	PA; S
<b>METABOLIC DX ENZYME REPLACEMENT, SEVERE COMBINED IMMUNE DEFICIENCY - DRUGS FOR METABOLIC DISEASE</b>		
REVCIVI	3	PA; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>METABOLIC MODIFIERS</b>		
<b>METABOLIC MODIFIER - POMPE DISEASE - GCS INHIBITOR</b>		
OPFOLDA	3	QL; MS; S
<b>METABOLIC MODIFIERS - DRUGS THAT ALTER METABOLISM</b>		
<b>HYPERPARATHYROID TREATMENT AGENTS - VITAMIN D ANALOG-TYPE - DRUGS THAT ALTER METABOLISM</b>		
calcitriol oral	1	
paricalcitol oral	1	
<b>METABOLIC MODIFIER - CARNITINE REPLENISHER AGENTS - DRUGS THAT ALTER METABOLISM</b>		
levocarnitine (with sugar)	1	
levocarnitine oral solution 100 mg/ml	1	
levocarnitine oral tablet	1	
<b>METABOLIC MODIFIER - GAUCHER'S DISEASE, TYPE-1, SUBSTRATE REDUCTION TX - DRUGS THAT ALTER METABOLISM</b>		
CERDELGA	3	PA; QL; MS; S
miglustat	1	PA; QL; MS; S
yargesa	1	PA; QL; S
<b>METABOLIC MODIFIER - HEREDITARY OROTIC ACIDURIA TREATMENT AGENTS - DRUGS THAT ALTER METABOLISM</b>		
XURIDEN	3	PA; QL; S
<b>METABOLIC MODIFIER - HEREDITARY TYROSINEMIA TREATMENT AGENTS - DRUGS THAT ALTER METABOLISM</b>		
nitisinone	1	PA; MS; S
NITYR	3	PA; MS; S
<b>METABOLIC MODIFIER - HOMOCYSTEINURIA TREATMENT AGENTS - DRUGS THAT ALTER METABOLISM</b>		
betaine	1	MS; S
<b>METABOLIC MODIFIER - PHOSPHATIDYLINOSITOL-3-KINASE (PI3K) INHIBITORS - DRUGS THAT ALTER METABOLISM</b>		
JOENJA	3	PA; QL; S
VIJOICE ORAL GRANULES IN PACKET	3	PA; S
VIJOICE ORAL TABLET	3	PA; QL; S
<b>METABOLIC MODIFIER - UREA CYCLE DISORDER AGENTS-CONJUGATING AGENTS - DRUGS THAT ALTER METABOLISM</b>		
OLPRUVA	3	PA; QL; S
PHEBURANE	3	ST; MS; S
RAVICTI	3	PA; QL; MS; S
sodium phenylbutyrate	1	
<b>METABOLIC MODIFIER-CARBAMOYL PHOSPHATE SYNTHETASE 1 (CPS 1) ACTIVATOR - DRUGS THAT ALTER METABOLISM</b>		
carglumic acid	1	PA; MS; S
<b>PHARMACOECHANER - CYTOCHROME P450 INHIBITORS - DRUGS THAT ALTER METABOLISM</b>		
TYBOST	2	QL; S
<b>PHARMACOLOGICAL CHAPERONE TX - ALPHA-GALACTOSIDASE A ENZYME STABILIZER - DRUGS THAT ALTER METABOLISM</b>		
GALAFOLD	3	PA; QL; MS; S
<b>PHENYLKETONURIA(PKU) TX AGENTS - COFACTOR OF PHENYLALANINE HYDROXYLASE - DRUGS THAT ALTER METABOLISM</b>		
javygtor	1	PA; MS; S
sapropterin	1	PA; MS; S

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Product Description	Tier	Limits/Restrictions/Notes
<b>PHENYLKETONURIA(PKU) TX AGENTS - PHENYLALANINE AMMONIA LYASE - DRUGS THAT ALTER METABOLISM</b>		
PALYNZIQ	3	PA; QL; MS; S
<b>PROGERIA SYNDROME TREATMENT AGENTS - FARNYLTRANSFERASE INHIBITOR - DRUGS THAT ALTER METABOLISM</b>		
ZOKINVY	3	PA; QL; S
<b>MOUTH-THROAT-DENTAL - PREPARATIONS - DRUGS FOR THE MOUTH AND THROAT</b>		
<b>DENTAL PRODUCT - FLUORIDE PREPARATIONS - DRUGS FOR THE MOUTH AND THROAT</b>		
clinpro 5000	1	
denta 5000 plus	1	
denta 5000 plus sensitive	1	
dentagel	1	
FLORIVA (FLUORIDE-VITAMIN D3)	3	Covered in full age 16 and under*
fluoride (sodium) dental	1	
fluoride (sodium) oral drops	3	Covered in full age 16 and under*
fluoride (sodium) oral tablet,chewable	3	Covered in full age 16 and under*
ludent fluoride	3	Covered in full age 16 and under*
sf	1	
sf 5000 plus	1	
sodium fluoride 5000 dry mouth	1	
sodium fluoride 5000 plus	1	
sodium fluoride-pot nitrate	1	
<b>MOUTH AND THROAT - ANTIFUNGALS - DRUGS FOR THE MOUTH AND THROAT</b>		
clotrimazole mucous membrane	1	
nystatin oral suspension	1	
<b>MOUTH AND THROAT - ANTISEPTICS - DRUGS FOR THE MOUTH AND THROAT</b>		
chlorhexidine gluconate mucous membrane	1	
paroex oral rinse	1	
periogard	1	
<b>MOUTH AND THROAT - GLUCOCORTICOIDS - DRUGS FOR THE MOUTH AND THROAT</b>		
kourzeq	1	
triamcinolone acetonide dental	1	
<b>MOUTH AND THROAT - LOCAL ANESTHETIC AMIDES - DRUGS FOR THE MOUTH AND THROAT</b>		
lidocaine hcl mucous membrane solution	1	
lidocaine viscous	1	
<b>MOUTH AND THROAT - SALIVA STIMULANTS - DRUGS FOR THE MOUTH AND THROAT</b>		
cevimeline	1	
pilocarpine hcl oral	1	
<b>PERIODONTAL PRODUCT - TETRACYCLINE-TYPE, COLLAGENASE INHIBITORS - DRUGS FOR THE MOUTH AND THROAT</b>		
doxycycline hyclate oral tablet 20 mg	1	
<b>THERAPY FOR DROOLING- PRIMARY OR SECONDARY SIALORRHEA-ANTICHOLINERGIC - DRUGS FOR THE MOUTH AND THROAT</b>		
glycopyrrolate oral solution	1	PA; QL

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Product Description	Tier	Limits/Restrictions/Notes
<b>MULTIPLE SCLEROSIS AGENTS - DRUGS FOR THE NERVOUS SYSTEM</b>		
<b>LEUKOCYTE ADHESION INHIBITORS, ALPHA4-MEDIATED, IGG4K MC ANTIBODY - DRUGS FOR MULTIPLE SCLEROSIS</b>		
TYSABRI	3	PA; QL; MS; S
<b>MULTIPLE SCLEROSIS AGENT - CD20 SPECIFIC MONOCLONAL ANTIBODY - DRUGS FOR MULTIPLE SCLEROSIS</b>		
KESIMPTA PEN	2	QL; MS; S
<b>MULTIPLE SCLEROSIS AGENT - INTERFERONS - DRUGS FOR MULTIPLE SCLEROSIS</b>		
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	2	QL; MS; S
AVONEX INTRAMUSCULAR SYRINGE KIT	2	QL; MS; S
BETASERON SUBCUTANEOUS KIT	3	QL; MS; S
PLEGRIDY	2	QL; MS; S
REBIF (WITH ALBUMIN)	2	QL; MS; S
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML	2	QL; MS; S
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 8.8MCG/0.2ML-22 MCG/0.5ML (6)	2	MS; S
REBIF TITRATION PACK	2	MS; S
<b>MULTIPLE SCLEROSIS AGENT - OTHERS - DRUGS FOR MULTIPLE SCLEROSIS</b>		
COPAXONE SUBCUTANEOUS SYRINGE 40 MG/ML	2	QL; MS; S
dimethyl fumarate	1	QL; MS; S
glatiramer	1	QL; MS; S
glatopa	1	QL; MS; S
<b>MULTIPLE SCLEROSIS AGENT - POTASSIUM CHANNEL BLOCKER - DRUGS FOR MULTIPLE SCLEROSIS</b>		
dalfampridine	1	QL; MS; S
<b>MULTIPLE SCLEROSIS AGENT - PYRIMIDINE SYNTHESIS INHIBITORS - DRUGS FOR MULTIPLE SCLEROSIS</b>		
teriflunomide	1	QL; MS; S
<b>MULTIPLE SCLEROSIS AGENT - SPHINGOSINE 1-PHOSPHATE RECEPTOR MODULATOR - DRUGS FOR MULTIPLE SCLEROSIS</b>		
fingolimod	1	QL; MS; S
MAYZENT	2	QL; MS; S
MAYZENT STARTER(FOR 1MG MAINT)	2	QL; MS; S
MAYZENT STARTER(FOR 2MG MAINT)	2	QL; MS; S
ZEPOSIA	2	PA; QL; MS; S
ZEPOSIA STARTER KIT (28-DAY)	2	PA; QL; MS; S
ZEPOSIA STARTER PACK (7-DAY)	2	PA; QL; MS; S
<b>OPHTHALMIC AGENTS</b>		
<b>OPHTHALMIC ANTIPARASITICS</b>		
XDEMVY	3	PA; QL; S
<b>OPHTHALMIC AGENTS - DRUGS FOR THE EYE</b>		
<b>MIOTICS - DIRECT ACTING - DRUGS FOR GLAUCOMA</b>		
pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %	1	
<b>OPHTHALMIC - AGENTS FOR PRESBYOPIA - DRUGS FOR THE EYE</b>		
VUITY	3	QL
<b>OPHTHALMIC - ANTIBACTERIAL-GLUCOCORTICOID COMBINATIONS - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
neomycin-bacitracin-poly-hc	1	
neomycin-polymyxin b-dexameth	1	

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Product Description	Tier	Limits/Restrictions/Notes
neomycin-polymyxin-hc ophthalmic (eye)	1	
neo-polycin hc	1	
sulfacetamide-prednisolone	1	
tobramycin-dexamethasone	1	
<b>OPHTHALMIC - ANTICHOLINERGICS - DRUGS FOR THE EYE</b>		
atropine ophthalmic (eye) drops 1 %	1	
atropine ophthalmic (eye) ointment	1	
cyclopentolate ophthalmic (eye) drops 1 %	1	
tropicamide	1	
<b>OPHTHALMIC - ANTIHISTAMINES - DRUGS FOR ITCHY EYE</b>		
azelastine ophthalmic (eye)	1	
epinastine	1	
<b>OPHTHALMIC - ANTI-INFLAMMATORY, GLUCOCORTICOIDS - ANTI- INFECTIVE/ANTI-INFLAMMATORIES</b>		
dexamethasone sodium phosphate ophthalmic (eye)	1	
fluorometholone	1	
LOTEMAX OPHTHALMIC (EYE) OINTMENT	2	
LOTEMAX SM	2	
loteprednol etabonate ophthalmic (eye) drops,gel	1	
loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %	1	
prednisolone acetate	1	
prednisolone sodium phosphate ophthalmic (eye)	1	
<b>OPHTHALMIC - ANTI-INFLAMMATORY, IMMUNOMODULATORS - ANTI- INFECTIVE/ANTI-INFLAMMATORIES</b>		
cyclosporine ophthalmic (eye)	1	QL
VERKAZIA	3	PA; QL
<b>OPHTHALMIC - ANTI-INFLAMMATORY, LFA-1 ANTAGONISTS - ANTI- INFECTIVE/ANTI-INFLAMMATORIES</b>		
XIIDRA	2	QL
<b>OPHTHALMIC - ANTI-INFLAMMATORY, NSAIDS - ANTI- INFECTIVE/ANTI-INFLAMMATORIES</b>		
bromfenac ophthalmic (eye) drops 0.09 %	1	
diclofenac sodium ophthalmic (eye)	1	
flurbiprofen sodium	1	
ILEVRO	3	
ketorolac ophthalmic (eye)	1	
<b>OPHTHALMIC - BETA BLOCKERS-ADRENERGIC COMBINATIONS - DRUGS FOR GLAUCOMA</b>		
brimonidine-timolol	1	QL
<b>OPHTHALMIC - BETA BLOCKERS-CARBONIC ANHYDRASE INHIBITOR COMBINATIONS - DRUGS FOR GLAUCOMA</b>		
dorzolamide-timolol	1	
dorzolamide-timolol (pf) ophthalmic (eye) dropperette	1	QL
<b>OPHTHALMIC - CARBONIC ANHYDRASE INHIBITORS - DRUGS FOR GLAUCOMA</b>		
dorzolamide	1	
<b>OPHTHALMIC - CYSTINE DEPLETING AGENTS - DRUGS FOR THE EYE</b>		
CYSTADROPS	3	PA; QL; S
CYSTARAN	3	PA; QL; S
<b>OPHTHALMIC - DECONGESTANTS - DRUGS FOR ITCHY EYE</b>		
phenylephrine hcl ophthalmic (eye)	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>OPHTHALMIC - HUMAN NERVE GROWTH FACTOR (HNGF) - DRUGS FOR THE EYE</b>		
OXERVATE	3	PA; QL; MS; S
<b>OPHTHALMIC - INTRAOCULAR PRESSURE REDUCING AGENTS, BETA-BLOCKERS - DRUGS FOR GLAUCOMA</b>		
betaxolol ophthalmic (eye)	1	
carteolol	1	
levobunolol ophthalmic (eye) drops 0.5 %	1	
timolol maleate ophthalmic (eye) drops	1	
<b>OPHTHALMIC - LOCAL ANESTHETIC ESTERS - DRUGS FOR THE EYE</b>		
proparacaine	1	
<b>OPHTHALMIC - MAST CELL STABILIZERS - DRUGS FOR ITCHY EYE</b>		
cromolyn ophthalmic (eye)	1	
<b>OPHTHALMIC - RHO KINASE INHIBITOR AND PROSTAGLANDIN ANALOG COMBINATION - DRUGS FOR GLAUCOMA</b>		
ROCKLATAN	2	ST; QL
<b>OPHTHALMIC ANTIBACTERIAL MIXTURES - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
bacitracin-polymyxin b	1	
neomycin-bacitracin-polymyxin	1	
neomycin-polymyxin-gramicidin	1	
neo-polycin	1	
polycin	1	
polymyxin b sulf-trimethoprim	1	
<b>OPHTHALMIC ANTIBIOTIC - AMINOGLYCOSIDES - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
gentamicin ophthalmic (eye) drops	1	
tobramycin ophthalmic (eye)	1	
<b>OPHTHALMIC ANTIBIOTIC - DEHYDROPEPTIDASE INHIBITORS - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
bacitracin ophthalmic (eye)	1	
<b>OPHTHALMIC ANTIBIOTIC - FLUOROQUINOLONES - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
BESIVANCE	3	
ciprofloxacin hcl ophthalmic (eye)	1	
gatifloxacin	1	
levofloxacin ophthalmic (eye) drops 1.5 %	1	
moxifloxacin ophthalmic (eye)	1	QL
ofloxacin ophthalmic (eye)	1	
<b>OPHTHALMIC ANTIBIOTIC - MACROLIDES - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
erythromycin ophthalmic (eye)	1	
<b>OPHTHALMIC ANTIBIOTIC - SULFONAMIDES - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
sulfacetamide sodium ophthalmic (eye)	1	
<b>OPHTHALMIC ANTIVIRALS - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
trifluridine	1	
ZIRGAN	3	
<b>OPHTHALMIC-INTRAOCULAR PRESS. REDUCING, SEL. ALPHA ADRENERGIC AGONISTS - DRUGS FOR GLAUCOMA</b>		
apraclonidine	1	
brimonidine ophthalmic (eye)	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>OPHTHALMIC-INTRAOCULAR PRESSURE REDUCING AGENTS, PROSTAGLANDIN ANALOGS - DRUGS FOR GLAUCOMA</b>		
bimatoprost ophthalmic (eye)	1	
latanoprost	1	QL
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	2	
travoprost	1	
<b>OPHTHALMIC-INTRAOCULAR PRESSURE REDUCING AGENTS, RHO KINASE INHIBITORS - DRUGS FOR GLAUCOMA</b>		
RHOPRESSA	2	ST; QL
<b>OTIC (EAR) - DRUGS FOR THE EAR</b>		
<b>OTIC (EAR) - ANTI-INFECTIVE-GLUCOCORTICOID COMBINATIONS - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
CIPRO HC	3	
ciprofloxacin-dexamethasone	1	
neomycin-polymyxin-hc otic (ear)	1	
<b>OTIC (EAR) - ANTI-INFECTIVES OTHER - ANTIBIOTICS</b>		
acetic acid otic (ear)	1	
<b>OTIC (EAR) - FLUOROQUINOLONES - ANTIBIOTICS</b>		
ciprofloxacin hcl otic (ear)	1	QL
ofloxacin otic (ear)	1	
<b>OTIC (EAR) - GLUCOCORTICOIDS - ANTI-INFECTIVE/ANTI-INFLAMMATORIES</b>		
flac otic oil	1	
fluocinolone acetonide oil	1	
hydrocortisone-acetic acid	1	
<b>RESPIRATORY THERAPY AGENTS</b>		
<b>ASTHMA/COPD - PHOSPHODIESTERASE-3 AND -4 (PDE3 AND PDE4) INHIBITORS</b>		
OHTUVAYRE	3	PA; QL; S
<b>RESPIRATORY THERAPY AGENTS - DRUGS FOR THE LUNGS</b>		
<b>1ST GENERATION ANTIHISTAMINE-DECONGESTANT COMBINATIONS - DRUGS FOR COUGH AND COLD</b>		
promethazine vc	1	
promethazine-phenylephrine	1	
<b>ANTIHISTAMINE - 1ST GENERATION - ETHANOLAMINES - DRUGS FOR ALLERGIES</b>		
carbinoxamine maleate oral liquid	1	
clemastine oral tablet	1	
diphenhydramine hcl oral elixir	1	
<b>ANTIHISTAMINE - 1ST GENERATION - PHENOTHIAZINES - DRUGS FOR ALLERGIES</b>		
promethazine oral	1	
promethazine rectal suppository 12.5 mg, 25 mg	1	
promethegan	1	
<b>ANTIHISTAMINE - 1ST GENERATION - PIPERIDINES - DRUGS FOR ALLERGIES</b>		
cyproheptadine	1	
<b>ANTIHISTAMINES - 1ST GENERATION - DRUGS FOR ALLERGIES</b>		
carbinoxamine maleate oral liquid	1	
clemastine oral tablet	1	
cyproheptadine	1	
diphenhydramine hcl oral elixir	1	

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Product Description	Tier	Limits/Restrictions/Notes
promethazine oral	1	
promethazine rectal suppository 12.5 mg, 25 mg	1	
promethegan	1	
<b>ANTIHISTAMINES - 2ND GENERATION - DRUGS FOR ALLERGIES</b>		
cetirizine oral solution 1 mg/ml	1	
desloratadine oral tablet	1	
levocetirizine	1	
<b>ANTIHISTAMINES - 2ND GENERATION - PIPERAZINES - DRUGS FOR ALLERGIES</b>		
cetirizine oral solution 1 mg/ml	1	
levocetirizine	1	
<b>ANTIHISTAMINES - 2ND GENERATION - PIPERIDINES - DRUGS FOR ALLERGIES</b>		
desloratadine oral tablet	1	
<b>ANTITUSSIVES - NON-OPIOID - DRUGS FOR ALLERGIES</b>		
benzonatate	1	
<b>ASTHMA THERAPY - 5-LIPOXYGENASE INHIBITORS - DRUGS FOR ASTHMA/COPD</b>		
zileuton	1	QL
<b>ASTHMA THERAPY - ALPHA/BETA ADRENERGIC AGENTS - DRUGS FOR ASTHMA/COPD</b>		
epinephrine injection syringe 0.1 mg/ml	1	
<b>ASTHMA THERAPY - IMMUNOGLOBULIN E (IGE) INHIBITORS, MAB - DRUGS FOR ASTHMA/COPD</b>		
XOLAIR	3	PA; QL; MS; S
<b>ASTHMA THERAPY - INHALED CORTICOSTEROIDS (GLUCOCORTICIDS) - DRUGS FOR ASTHMA/COPD</b>		
ARNUIITY ELLIPTA	2	QL
ASMANEX HFA	2	QL
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	2	QL
budesonide inhalation	1	QL
FLUTICASONE PROPIONATE INHALATION	2	QL
QVAR REDHALER	2	QL
<b>ASTHMA THERAPY - INTERLEUKIN-4 (IL-4) RECEPTOR ALPHA ANTAGONISTS, MAB - DRUGS FOR ASTHMA/COPD</b>		
DUPIXENT PEN	2	PA; QL; MS; S
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	2	PA; QL; MS; S
<b>ASTHMA THERAPY - INTERLEUKIN-5 (IL-5) INHIBITORS, MAB - DRUGS FOR ASTHMA/COPD</b>		
NUCALA SUBCUTANEOUS AUTO-INJECTOR	2	PA; QL; MS; S
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	2	PA; QL; MS; S
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	2	PA; QL; S
<b>ASTHMA THERAPY - INTERLEUKIN-5 (IL-5) RECEPTOR ALPHA ANTAGONISTS, MAB - DRUGS FOR ASTHMA/COPD</b>		
FASENRA PEN	2	PA; QL; MS; S
<b>ASTHMA THERAPY - LEUKOTRIENE RECEPTOR ANTAGONISTS - DRUGS FOR ASTHMA/COPD</b>		
montelukast	1	QL
zafirlukast	1	

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Product Description	Tier	Limits/Restrictions/Notes
<b>ASTHMA THERAPY - MAST CELL STABILIZERS - DRUGS FOR ASTHMA/COPD</b>		
cromolyn inhalation	1	
<b>ASTHMA THERAPY - XANTHINES - DRUGS FOR ASTHMA/COPD</b>		
theophylline oral elixir	1	
theophylline oral solution	1	
theophylline oral tablet extended release 12 hr	1	
theophylline oral tablet extended release 24 hr	1	
<b>ASTHMA/COPD - PHOSPHODIESTERASE-4 (PDE4) INHIBITORS - DRUGS FOR ASTHMA/COPD</b>		
roflumilast	1	QL
<b>ASTHMA/COPD - ANTICHOLINERGIC AGENTS, INHALED LONG ACTING - DRUGS FOR ASTHMA/COPD</b>		
INCRUSE ELLIPTA	2	QL
SPIRIVA RESPIMAT	2	
tiotropium bromide	1	QL
<b>ASTHMA/COPD - ANTICHOLINERGIC AGENTS, INHALED SHORT ACTING - DRUGS FOR ASTHMA/COPD</b>		
ATROVENT HFA	2	
ipratropium bromide inhalation	1	
<b>ASTHMA/COPD - BETA 2-ADRENERGIC AGENTS, INHALED, ULTRA-LONG ACTING - DRUGS FOR ASTHMA/COPD</b>		
STRIVERDI RESPIMAT	2	QL
<b>ASTHMA/COPD THERAPY - BETA 2-ADRENERGIC AGENTS, INHALED, LONG ACTING - DRUGS FOR ASTHMA/COPD</b>		
arformoterol	1	QL
formoterol fumarate	1	QL
SEREVENT DISKUS	2	
<b>ASTHMA/COPD THERAPY - BETA 2-ADRENERGIC AGENTS, INHALED, SHORT ACTING - DRUGS FOR ASTHMA/COPD</b>		
ALBUTEROL HFA 90 MCG INHALER (ALTERNATIVE TO VENTOLIN)	3	QL
albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation	1	QL
albuterol sulfate inhalation solution for nebulization	1	
levalbuterol hcl	1	
LEVALBUTEROL TARTRATE	2	QL
PROAIR RESPICLICK	3	QL
<b>ASTHMA/COPD THERAPY - BETA ADRENERGIC AGENTS - DRUGS FOR ASTHMA/COPD</b>		
albuterol sulfate oral	1	
terbutaline	1	
<b>ASTHMA/COPD THERAPY - BETA ADRENERGIC-ANTICHOLINERGIC COMBINATIONS - DRUGS FOR ASTHMA/COPD</b>		
ANORO ELLIPTA	2	QL
BEVESPI AEROSPHERE	2	QL
COMBIVENT RESPIMAT	2	QL
ipratropium-albuterol	1	
STIOLTO RESPIMAT	2	QL
<b>ASTHMA/COPD THERAPY - BETA ADRENERGIC-GLUCOCORTICOID COMBINATIONS - DRUGS FOR ASTHMA/COPD</b>		
ADVAIR HFA	2	QL
AIRSUPRA	3	PA; QL
BREO ELLIPTA	2	QL

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Product Description	Tier	Limits/Restrictions/Notes
breyna	1	QL
budesonide-formoterol	1	QL
DULERA	2	QL
FLUTICASONE PROPION-SALMETEROL INHALATION AEROSOL POWDR BREATH ACTIVATED	2	QL
fluticasone propion-salmeterol inhalation blister with device	1	QL
wixela inhub	1	QL
<b>ASTHMA/COPD TX - BETA-ADRENERGIC-ANTICHOLINERGIC-GLUCOCORTICOID COMB, - DRUGS FOR CYSTIC FIBROSIS</b>		
BREZTRI AEROSPHERE INHALER	2	QL
TRELEGY ELLIPTA	2	QL
<b>CYSTIC FIBROSIS - INHALED AMINOGLYCOSIDES - DRUGS FOR CYSTIC FIBROSIS</b>		
KITABIS PAK	3	MS; S
tobramycin in 0.225 % nacl	1	MS; S
<b>CYSTIC FIBROSIS-TRANSMEMBRANE CONDUCTANCE REGULATOR (CFTR) POTENTIATOR - DRUGS FOR CYSTIC FIBROSIS</b>		
KALYDECO	3	PA; QL; MS; S
<b>CYSTIC FIB-TRANSMEMB CONDUCT. REG.(CFTR) POTENTIATOR AND CORRECTOR CMB - DRUGS FOR CYSTIC FIBROSIS</b>		
ORKAMBI	3	PA; QL; MS; S
SYMDEKO	3	PA; QL; MS; S
TRIKAFTA	3	PA; QL; MS; S
<b>MUCOLYTICS - DRUGS FOR THE LUNGS</b>		
acetylcysteine	1	
PULMOZYME	3	MS; S
<b>NASAL ANTICHOLINERGICS - ALLERGY</b>		
ipratropium bromide nasal	1	
<b>NASAL ANTIHISTAMINES - ALLERGY</b>		
azelastine nasal spray,non-aerosol 137 mcg (0.1 %)	1	
azelastine nasal spray,non-aerosol 205.5 mcg (0.15 %)	1	QL
olopatadine nasal	1	QL
<b>NASAL CORTICOSTEROIDS - ALLERGY</b>		
flunisolide	1	QL
fluticasone propionate nasal	1	
mometasone nasal	1	
QNASL	2	QL
XHANCE	3	QL
<b>NON-OPIOID ANTITUSSIVE-1ST GEN.ANTIHISTAMINE-DECONGESTANT COMBINATIONS - DRUGS FOR COUGH AND COLD</b>		
bromfed dm	1	
brompheniramine-pseudoeph-dm	1	
<b>NON-OPIOID ANTITUSSIVE-ANTIHISTAMINE COMBINATIONS - DRUGS FOR COUGH AND COLD</b>		
promethazine-dm	1	
<b>OPIOID ANTITUSSIVE-1ST GENERATION ANTIHISTAMINE COMBINATIONS - DRUGS FOR COUGH AND COLD</b>		
hydrocodone-chlorpheniramine	1	QL
promethazine-codeine	1	
<b>OPIOID ANTITUSSIVE-ANTICHOLINERGIC COMBINATIONS - DRUGS FOR COUGH AND COLD</b>		
hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml	1	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
hydromet	1	
<b>OPIOID ANTITUSSIVE-EXPECTORANT COMBINATIONS - DRUGS FOR COUGH AND COLD</b>		
codeine-guaifenesin	1	
g tussin ac	1	
<b>PULMONARY FIBROSIS TREATMENT AGENTS - ANTIFIBROTIC THERAPY - DRUGS FOR THE LUNGS</b>		
pirfenidone oral capsule	1	PA; QL; MS; S
pirfenidone oral tablet 267 mg, 801 mg	1	PA; QL; MS; S
<b>PULMONARY FIBROSIS TREATMENT AGENTS - MULTIKINASE INHIBITORS - DRUGS FOR THE LUNGS</b>		
OFEV	2	PA; QL; MS; S
<b>VAGINAL PRODUCTS - DRUGS FOR WOMEN</b>		
<b>VAGINAL ANTIBACTERIAL - LINCOSAMIDES - DRUGS FOR INFECTIONS</b>		
clindamycin phosphate vaginal	1	
<b>VAGINAL ANTIFUNGAL - TRIAZOLES - DRUGS FOR INFECTIONS</b>		
terconazole	1	
<b>VAGINAL ANTIPROTOZOAL-ANTIBACTERIAL - NITROIMIDAZOLE DERIVATIVES - DRUGS FOR INFECTIONS</b>		
metronidazole vaginal gel 0.75 % (37.5mg/5 gram)	1	
vandazole	1	
<b>VAGINAL ESTROGENS - DRUGS FOR WOMEN</b>		
estradiol vaginal	1	
PREMARIN VAGINAL	2	
yuvafem	1	
<b>VAGINAL PROGESTINS - DRUGS FOR WOMEN</b>		
CRINONE VAGINAL GEL 4 %	3	
<b>WEIGHT LOSS/GAIN AGENTS</b>		
<b>ANTI-OBESITY - DUAL GIP AND GLP-1 RECEPTOR AGONISTS</b>		
ZEPBOUND SUBCUTANEOUS PEN INJECTOR	3	PA; QL
<b>WEIGHT LOSS/GAIN AGENTS - DRUGS FOR EATING DISORDERS</b>		
<b>ANOREXIANT COMBINATIONS - DRUGS FOR EATING DISORDERS</b>		
QSYMIA	3	PA; QL
<b>ANOREXIANTS - DRUGS FOR EATING DISORDERS</b>		
benzphetamine	1	
diethylpropion	1	
phendimetrazine tartrate	1	
phentermine	1	
<b>ANTI-OBESITY - FAT ABSORPTION DECREASING AGENTS - DRUGS FOR EATING DISORDERS</b>		
ORLISTAT	3	PA; QL
XENICAL	3	PA; QL
<b>ANTI-OBESITY - GLUCAGON-LIKE PEPTIDE-1 (GLP-1) RECEPTOR AGONISTS - DRUGS FOR EATING DISORDERS</b>		
SAXENDA	3	PA; QL
WEGOVY	3	PA; QL
<b>ANTI-OBESITY - MELANOCORTIN 4 (MC4) RECEPTOR AGONIST - DRUGS FOR EATING DISORDERS</b>		
IMCIVREE	3	PA; QL; S

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

Product Description	Tier	Limits/Restrictions/Notes
<b>ANTI-OBESITY-OPIOID ANTAG/NOREPINEPHRINE AND DOPAMINE REUPTAKE INHIBIT - DRUGS FOR EATING DISORDERS</b>		
CONTRAVE	3	PA; QL
<b>APPETITE STIMULANTS - CANNABINOIDS - DRUGS FOR EATING DISORDERS</b>		
dronabinol	1	
SYNDROS	2	PA
<b>APPETITE STIMULANTS - PROGESTIN HORMONE TYPE - DRUGS FOR EATING DISORDERS</b>		
megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)	1	

\*For benefits that include Patient Protection and Affordable Care Act (PPACA) coverage. For all other benefits, the listed tier applies.

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