



National Preferred Formulary (NPF) Guide (3624)

Includes generic and brand-name medications

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List of Abbreviations

1: Generic

2: Preferred

3: Non-Preferred

ACA: Affordable Care Act.

MS: Mandatory Specialty. Drug must be purchased at a participating network specialty pharmacy for coverage.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

S: Specialty

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

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
<i>amphotericin b</i>	1	
ANCOBON	3	
BREXAFEMME	3	ST; QL (4 per fill)
<i>clotrimazole</i>	1	
CRESEMBA	2	PA
DIFLUCAN	3	
<i>fluconazole oral suspension for reconstitution</i>	1	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	1	
<i>fluconazole oral tablet 150 mg</i>	1	QL (2 per fill)
<i>flucytosine</i>	1	
<i>griseofulvin microsize</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>itraconazole oral capsule</i>	1	QL (30 per fill)
<i>itraconazole oral solution</i>	1	QL (300 per fill)
<i>ketoconazole</i>	1	
NOXAFIL ORAL SUSP,DELAYED RELEASE FOR RECON	2	PA
NOXAFIL ORAL SUSPENSION	3	PA
<i>nystatin</i>	1	
ORAVIG	3	
<i>posaconazole</i>	1	PA
SPORANOX ORAL CAPSULE	3	QL (30 per fill)
SPORANOX ORAL SOLUTION	3	QL (300 per fill)
<i>terbinafine hcl</i>	1	
VFEND	3	PA
VIVJOA	3	PA; QL (18 per fill); S
<i>voriconazole</i>	1	PA
ANTIVIRALS		
<i>abacavir</i>	1	
<i>abacavir-lamivudine</i>	1	
<i>acyclovir</i>	1	
<i>adefovir</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>amantadine hcl</i>	1	
APTIVUS	2	
<i>atazanavir</i>	1	
BARACLUDE	2	
BEYFORTUS	2	ACA
BIKTARVY	2	
CIMDUO	2	
<i>darunavir</i>	1	
DESCOVY	2	ACA
DOVATO	2	
EDURANT	2	
<i>efavirenz</i>	1	
<i>efavirenz-emtricitabin-tenofov</i>	1	
<i>efavirenz-lamivu-tenofov disop</i>	1	
<i>emtricitabine</i>	1	
<i>emtricitabine-tenofov (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	1	
<i>emtricitabine-tenofov (tdf) oral tablet 200-300 mg</i>	1	ACA
EMTRIVA ORAL CAPSULE	3	
EMTRIVA ORAL SOLUTION	2	
<i>entecavir</i>	1	
EPCLUSA	2	PA; S; MS; QL
EPIVIR	3	
<i>etravirine</i>	1	
EVOTAZ	3	
<i>famciclovir oral tablet 125 mg, 500 mg</i>	1	QL (21 per fill)
<i>famciclovir oral tablet 250 mg</i>	1	QL (60 per fill)
FLUMADINE	3	
<i>fosamprenavir</i>	1	
FUZEON	2	QL (60 per fill)
GENVOYA	2	
HARVONI	2	PA; S; MS; QL
INTELENCE ORAL TABLET 100 MG, 200 MG	3	
INTELENCE ORAL TABLET 25 MG	2	

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Drug Name	Drug Tier	Requirements / Limits
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	2	
KALETRA	3	
LAGEVRIO (EUA)	2	QL
<i>lamivudine</i>	1	
<i>lamivudine-zidovudine</i>	1	
LIVTENCITY	3	PA; QL
<i>lopinavir-ritonavir</i>	1	
<i>maraviroc</i>	1	
<i>nevirapine</i>	1	
NORVIR ORAL POWDER IN PACKET	2	
NORVIR ORAL TABLET	3	
ODEFSEY	2	
<i>oseltamivir oral capsule 30 mg</i>	1	QL (20 per fill)
<i>oseltamivir oral capsule 45 mg, 75 mg</i>	1	QL (10 per fill)
<i>oseltamivir oral suspension for reconstitution</i>	1	QL (180 per fill)
PAXLOVID	2	QL
PREVYMIS	2	QL
PREZISTA ORAL SUSPENSION	2	
PREZISTA ORAL TABLET 150 MG, 75 MG	2	
PREZISTA ORAL TABLET 600 MG, 800 MG	3	
RELENZA DISKHALER	3	QL (20 per fill)
RETROVIR	3	
REYATAZ ORAL CAPSULE	3	
REYATAZ ORAL POWDER IN PACKET	2	
<i>rimantadine</i>	1	
<i>ritonavir</i>	1	
SELZENTRY ORAL SOLUTION	2	
SELZENTRY ORAL TABLET	3	
SUNLENCA	3	PA; S
SYMFI	2	
SYMFI LO	2	
SYMTUZA	2	

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Drug Name	Drug Tier	Requirements / Limits
TAMIFLU ORAL CAPSULE 30 MG	3	QL (20 per fill)
TAMIFLU ORAL CAPSULE 45 MG, 75 MG	3	QL (10 per fill)
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION	3	QL (180 per fill)
TEMBEXA	3	
<i>tenofovir disoproxil fumarate</i>	1	
TIVICAY	2	
TIVICAY PD	2	
TRIUMEQ	2	
TRIUMEQ PD	2	
TYBOST	3	
<i>valacyclovir</i>	1	QL (30 per fill)
VALCYTE	3	
<i>valganciclovir</i>	1	
VEMLIDY	2	
VIRACEPT	2	
VIREAD ORAL POWDER	2	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	3	
VOSEVI	2	PA; S; MS; QL
XOFLUZA	3	QL (1 per fill)
ZEPATIER	2	PA; S; MS; QL
ZIAGEN	3	
<i>zidovudine</i>	1	
CEPHALOSPORINS		
<i>cefaclor</i>	1	
<i>cefadroxil</i>	1	
<i>cefdinir</i>	1	
<i>cefixime</i>	1	
<i>cefpodoxime</i>	1	
<i>cefprozil</i>	1	
<i>cefuroxime axetil</i>	1	
<i>cephalexin</i>	1	
ERYTHROMYCINS & OTHER MACROLIDES		

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Drug Name	Drug Tier	Requirements / Limits
<i>azithromycin</i>	1	
<i>clarithromycin</i>	1	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION	3	QL (1 per fill)
DIFICID ORAL TABLET	3	QL (20 per fill)
<i>e.e.s. 400</i>	1	
E.E.S. GRANULES	3	
ERYPED 200	3	
ERYPED 400	3	
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	1	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	3	
<i>erythrocin (as stearate)</i>	1	
<i>erythromycin</i>	1	
<i>erythromycin ethylsuccinate</i>	1	
ZITHROMAX	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	
MISCELLANEOUS ANTIINFECTIVES		
AEMCOLO	3	QL (12 per fill)
<i>albendazole</i>	1	QL
ALINIA	2	QL
ARAKODA	3	QL
ARIKAYCE	2	PA; S
<i>atovaquone</i>	1	
<i>atovaquone-proguanil</i>	1	QL
BENZNIDAZOLE	2	QL
BETHKIS	3	PA; QL (224 per fill); S; MS
BILTRICIDE	3	
CAYSTON	2	QL (84 per fill); S; MS
<i>chloroquine phosphate</i>	1	
CLEOCIN HCL	3	
CLEOCIN PEDIATRIC	3	
<i>clindamycin hcl</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin pediatric</i>	1	
COARTEM	2	QL
CYCLOSERINE	1	
<i>dapsone</i>	1	
DARAPRIM	3	PA; S
EMVERM	2	QL
<i>ethambutol</i>	1	
FLAGYL	3	
<i>gentamicin</i>	1	
HUMATIN	3	S; MS
<i>hydroxychloroquine</i>	1	
IMPAVIDO	2	QL
<i>isoniazid</i>	1	
<i>ivermectin</i>	1	PA; QL
KITABIS PAK	2	PA; QL (280 per fill); S; MS
KRINTAFEL	3	QL
<i>linezolid</i>	1	PA
MALARONE	3	QL
MALARONE PEDIATRIC	3	QL
<i>mefloquine</i>	1	QL
MEPRON	3	
<i>metronidazole</i>	1	
MYCOBUTIN	3	
NEBUPENT	3	QL
<i>neomycin</i>	1	
<i>nitazoxanide</i>	1	QL
<i>paromomycin</i>	1	
PASER	3	
<i>pentamidine</i>	1	QL
<i>praziquantel</i>	1	
PRETOMANID	3	PA
PRIFTIN	2	
<i>primaquine</i>	1	QL
<i>pyrazinamide</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>pyrimethamine</i>	1	PA
QUALAQUIN	3	QL
<i>quinine sulfate</i>	1	QL
<i>rifabutin</i>	1	
<i>rifampin</i>	1	
SIRTURO	2	PA
STROMEKTOL	3	PA; QL
<i>tinidazole</i>	1	QL
TOBI PODHALER	2	PA; QL (224 per fill); S; MS
<i>tobramycin</i>	1	PA; QL (224 per fill); S; MS
<i>tobramycin in 0.225 % nacl</i>	1	PA; QL (280 per fill); S; MS
<i>tobramycin sulfate</i>	1	
TOBRAMYCIN WITH NEBULIZER	3	PA; QL (280 per fill); S; MS
TRECTOR	3	
XENLETA	3	
XIFAXAN ORAL TABLET 200 MG	2	QL (9 per fill)
XIFAXAN ORAL TABLET 550 MG	2	QL (60 per fill)
ZYVOX	3	PA
PENICILLINS		
<i>amoxicillin</i>	1	
<i>amoxicillin-pot clavulanate</i>	1	
<i>ampicillin</i>	1	
AUGMENTIN	2	
AUGMENTIN ES-600	3	
AUGMENTIN XR	3	
<i>dicloxacillin</i>	1	
MOXATAG	3	
<i>penicillin v potassium</i>	1	
QUINOLONES		
BAXDELA	2	QL (28 per fill)
CIPRO	3	
<i>ciprofloxacin</i>	1	
<i>ciprofloxacin hcl</i>	1	
FACTIVE	3	

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Drug Name	Drug Tier	Requirements / Limits
<i>levofloxacin</i>	1	
<i>moxifloxacin</i>	1	
<i>ofloxacin</i>	1	
SULFA'S & RELATED AGENTS		
BACTRIM	3	
BACTRIM DS	3	
<i>sulfadiazine</i>	1	
<i>sulfamethoxazole-trimethoprim</i>	1	
<i>sulfatrim</i>	1	
TETRACYCLINES		
ACTICLATE	3	ST
<i>avidoxy</i>	1	
AVIDOXY DK	3	ST
<i>demeclocycline</i>	1	
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	1	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec)</i>	1	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral capsule 150 mg</i>	1	ST
<i>doxycycline monohydrate oral capsule, ir - delay rel, biphase</i>	1	ST
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet</i>	1	
<i>minocycline oral capsule</i>	1	
<i>minocycline oral tablet</i>	1	
<i>minocycline oral tablet extended release 24 hr</i>	1	ST
<i>mondoxyne nl</i>	1	
MONODOX	3	ST
MORGIDOX 1X 50	3	ST
MORGIDOX 1X100	3	ST

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Drug Name	Drug Tier	Requirements / Limits
NUZYRA	3	QL (30 per fill)
SEYSARA	3	ST
TARGADOX	3	ST
<i>tetracycline oral capsule</i>	1	
<i>tetracycline oral tablet</i>	1	ST
VIBRAMYCIN	3	ST
URINARY TRACT AGENTS		
<i>fosfomycin tromethamine</i>	1	
FURADANTIN	3	
MACROBID	3	
MACRODANTIN	3	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohyd/m-cryst</i>	1	
PRIMSOL	3	
<i>trimethoprim</i>	1	
VANCOMYCIN		
VANCOCIN ORAL CAPSULE 125 MG	3	QL (40 per fill)
VANCOCIN ORAL CAPSULE 250 MG	3	QL (80 per fill)
<i>vancomycin intravenous recon soln 1,000 mg, 1.25 gram, 1.5 gram, 10 gram, 5 gram, 500 mg, 750 mg</i>	1	
VANCOMYCIN INTRAVENOUS RECON SOLN 1.75 GRAM, 2 GRAM	3	
<i>vancomycin oral capsule 125 mg</i>	1	QL (40 per fill)
<i>vancomycin oral capsule 250 mg</i>	1	QL (80 per fill)
<i>vancomycin oral recon soln 25 mg/ml</i>	1	QL (300 per fill)
<i>vancomycin oral recon soln 50 mg/ml</i>	1	QL (450 per fill)
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>leucovorin calcium</i>	1	
MESNEX	2	
VISTOGARD	2	PA; QL (20 per fill); S

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Drug Name	Drug Tier	Requirements / Limits
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone oral tablet 250 mg</i>	1	PA; QL (120 per fill); S; MS
<i>abiraterone oral tablet 500 mg</i>	1	PA; QL (60 per fill); S; MS
ALECENSA	2	PA; QL (240 per fill); S; MS
ALKERAN	3	
ALUNBRIG ORAL TABLET 180 MG, 90 MG	2	PA; QL (30 per fill); S
ALUNBRIG ORAL TABLET 30 MG	2	PA; QL (60 per fill); S
ALUNBRIG ORAL TABLETS,DOSE PACK	2	PA; QL (30 per fill); S
<i>anastrozole</i>	1	ACA
AROMASIN	3	
ASTAGRAF XL	3	PA
AUGTYRO	3	PA; S; MS
AYVAKIT	3	PA; QL (30 per fill); S
AZASAN	3	
<i>azathioprine</i>	1	
BALVERSA	2	PA; S; QL
<i>bexarotene oral</i>	1	PA; S; MS; QL
<i>bexarotene topical</i>	1	PA; S; MS
<i>bicalutamide</i>	1	
BOSULIF ORAL CAPSULE 100 MG	2	PA; QL (90 per fill); S; MS
BOSULIF ORAL CAPSULE 50 MG	2	PA; QL (30 per fill); S; MS
BOSULIF ORAL TABLET 100 MG	2	PA; QL (90 per fill); S; MS
BOSULIF ORAL TABLET 400 MG, 500 MG	2	PA; QL (30 per fill); S; MS
BRUKINSA	2	PA; S
CABOMETYX	2	PA; QL (30 per fill); S; MS
CALQUENCE (ACALABRUTINIB MAL)	2	PA; QL (60 per fill); S
<i>capecitabine oral tablet 150 mg</i>	1	PA; QL (56 per fill); S; MS
<i>capecitabine oral tablet 500 mg</i>	1	PA; QL (140 per fill); S; MS
CAPRELSA ORAL TABLET 100 MG	2	PA; QL (60 per fill); S
CAPRELSA ORAL TABLET 300 MG	2	PA; QL (30 per fill); S
CASODEX	3	
CELLCEPT	3	
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1)	2	PA; QL (56 per fill); S; MS

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Drug Name	Drug Tier	Requirements / Limits
COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)	2	PA; QL (112 per fill); S; MS
COMETRIQ ORAL CAPSULE 60 MG/DAY (20 MG X 3/DAY)	2	PA; QL (84 per fill); S; MS
COPIKTRA	3	PA; QL (56 per fill); S
COTELLIC	2	PA; QL (63 per fill); S; MS
<i>cyclophosphamide oral capsule</i>	1	
CYCLOPHOSPHAMIDE ORAL TABLET	3	
<i>cyclosporine</i>	1	
<i>cyclosporine modified</i>	1	
<i>cytarabine (pf)</i>	1	
<i>dasatinib oral tablet 100 mg, 140 mg, 50 mg, 80 mg</i>	1	PA; ST; QL (30 per fill); S; MS
<i>dasatinib oral tablet 20 mg</i>	1	PA; ST; QL (90 per fill); S; MS
<i>dasatinib oral tablet 70 mg</i>	1	PA; ST; QL (60 per fill); S; MS
DAURISMO ORAL TABLET 100 MG	3	PA; QL (30 per fill); S; MS
DAURISMO ORAL TABLET 25 MG	3	PA; QL (60 per fill); S; MS
DROXIA	2	
ENSPRYNG	2	PA; S; MS
ERIVEDGE	2	PA; QL (30 per fill); S; MS
ERLEADA ORAL TABLET 240 MG	2	PA; QL (30 per fill); S; MS
ERLEADA ORAL TABLET 60 MG	2	PA; QL (120 per fill); S; MS
<i>erlotinib oral tablet 100 mg, 150 mg</i>	1	PA; QL (30 per fill); S; MS
<i>erlotinib oral tablet 25 mg</i>	1	PA; QL (60 per fill); S; MS
<i>etoposide</i>	1	
EULEXIN	3	
<i>everolimus (antineoplastic)</i>	1	PA; QL (30 per fill); S; MS
<i>everolimus (immunosuppressive)</i>	1	
<i>exemestane</i>	1	ACA
FARESTON	3	
FEMARA	3	
GAVRETO	2	PA; QL (120 per fill); S
<i>gefitinib</i>	1	PA; QL (30 per fill); S; MS
<i>gengraf</i>	1	
GILOTRIF	2	PA; QL (30 per fill); S; MS

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Drug Name	Drug Tier	Requirements / Limits
GLEOSTINE	2	
HYCAMTIN	2	PA; S; MS
HYDREA	3	
<i>hydroxyurea</i>	1	
ICLUSIG	2	PA; QL (30 per fill); S
IDHIFA	2	PA; QL (30 per fill); S; MS
<i>imatinib oral tablet 100 mg</i>	1	PA; QL (180 per fill); S; MS
<i>imatinib oral tablet 400 mg</i>	1	PA; QL (60 per fill); S; MS
IMBRUVICA ORAL CAPSULE 140 MG	2	PA; QL (120 per fill); S
IMBRUVICA ORAL CAPSULE 70 MG	2	PA; QL (30 per fill); S
IMBRUVICA ORAL SUSPENSION	2	PA; QL (324 per fill); S
IMBRUVICA ORAL TABLET	2	PA; QL (30 per fill); S
IMURAN	3	
INLYTA ORAL TABLET 1 MG	2	PA; QL (180 per fill); S; MS
INLYTA ORAL TABLET 5 MG	2	PA; QL (120 per fill); S; MS
IRESSA	3	PA; QL (30 per fill); S; MS
IWILFIN	2	PA; S; QL
JAKAFI	2	ST; QL (60 per fill); S; MS
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	2	PA; QL (21 per fill); S; MS
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	2	PA; QL (42 per fill); S; MS
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	2	PA; QL (63 per fill); S; MS
KOSELUGO	3	PA; S
<i>lanreotide</i>	1	PA; S; QL
<i>lapatinib</i>	1	PA; QL (180 per fill); S; MS
LAZCLUZE	3	PA; S
<i>lenalidomide</i>	1	PA; QL (30 per fill); S; MS
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 4 MG	2	PA; QL (30 per fill); S; MS
LENVIMA ORAL CAPSULE 12 MG/DAY (4 MG X 3), 18 MG/DAY (10 MG X 1-4 MG X 2), 24 MG/DAY(10 MG X 2-4 MG X 1)	2	PA; QL (90 per fill); S; MS
LENVIMA ORAL CAPSULE 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2)	2	PA; QL (60 per fill); S; MS

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Drug Name	Drug Tier	Requirements / Limits
<i>letrozole</i>	1	
LEUKERAN	2	
<i>leuprolide</i>	1	PA; S; MS
LONSURF	2	PA; S; MS
LORBRENA ORAL TABLET 100 MG	2	PA; QL (30 per fill); S; MS
LORBRENA ORAL TABLET 25 MG	2	PA; QL (90 per fill); S; MS
LUMAKRAS	3	PA; S; MS; QL
LUPKYNIS	2	PA; QL (180 per fill); S
LYNPARZA	2	PA; QL (120 per fill); S; MS
LYSODREN	2	S
LYTGOBI	2	PA; S
MATULANE	2	S
<i>megestrol</i>	1	
MEKINIST ORAL RECON SOLN	2	PA; QL (1080 per fill); S; MS
MEKINIST ORAL TABLET 0.5 MG	2	PA; QL (90 per fill); S; MS
MEKINIST ORAL TABLET 2 MG	2	PA; QL (30 per fill); S; MS
<i>mercaptopurine</i>	1	
<i>methotrexate sodium</i>	1	
<i>methotrexate sodium (pf)</i>	1	
MYCAPSSA	3	PA; S; QL
<i>mycophenolate mofetil</i>	1	
<i>mycophenolate sodium</i>	1	
MYFORTIC	3	
MYHIBBIN	2	
MYLERAN	2	
NEORAL	3	
NERLYNX	2	PA; S; MS
NEXAVAR	3	PA; QL (120 per fill); S; MS
NILANDRON	3	PA
<i>nilutamide</i>	1	PA
NINLARO	2	PA; QL (3 per fill); S; MS
NUBEQA	2	PA; QL (120 per fill); S; MS
<i>octreotide acetate</i>	1	PA; S; MS
ODOMZO	2	PA; QL (30 per fill); S; MS

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Drug Name	Drug Tier	Requirements / Limits
OGSIVEO	3	PA; S; QL
OJEMDA	2	PA; S
ORGOVYX	3	PA; QL (30 per fill); S
ORSERDU ORAL TABLET 345 MG	2	PA; QL (30 per fill); S
ORSERDU ORAL TABLET 86 MG	2	PA; QL (90 per fill); S
<i>pazopanib</i>	1	PA; QL (120 per fill); S; MS
PEMAZYRE	2	PA; QL (28 per fill); S
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1)	2	PA; S; MS
PIQRAY ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	2	PA; S; MS; QL
POMALYST	2	PA; S; MS
PROGRAF ORAL CAPSULE	3	
PROGRAF ORAL GRANULES IN PACKET	2	
PURIXAN	2	S
RETEVMO ORAL CAPSULE 40 MG	3	PA; QL (180 per fill); S; MS
RETEVMO ORAL CAPSULE 80 MG	3	PA; QL (120 per fill); S; MS
RETEVMO ORAL TABLET	3	PA; S; MS
REVLIMID	2	PA; QL (30 per fill); S; MS
REZUROCK	3	PA; QL (30 per fill)
ROZLYTREK ORAL CAPSULE 100 MG	2	PA; QL (30 per fill); S; MS
ROZLYTREK ORAL CAPSULE 200 MG	2	PA; QL (90 per fill); S; MS
ROZLYTREK ORAL PELLETS IN PACKET	2	PA; QL (42 per fill); S; MS
RYDAPT	2	PA; QL (224 per fill); S; MS
SANDIMMUNE	3	
SANDOSTATIN	3	PA; S; MS
SCEMBLIX ORAL TABLET 100 MG	2	PA; QL (120 per fill); S
SCEMBLIX ORAL TABLET 20 MG	2	PA; QL (600 per fill); S
SCEMBLIX ORAL TABLET 40 MG	2	PA; QL (300 per fill); S
SIGNIFOR	2	PA; S
<i>sirolimus</i>	1	
SOLTAMOX	3	ACA
SOMATULINE DEPOT	2	PA; S; MS; QL
<i>sorafenib</i>	1	PA; QL (120 per fill); S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SPRYCEL ORAL TABLET 100 MG, 140 MG, 50 MG, 80 MG	2	PA; QL (30 per fill); S; MS
SPRYCEL ORAL TABLET 20 MG	2	PA; QL (90 per fill); S; MS
SPRYCEL ORAL TABLET 70 MG	2	PA; QL (60 per fill); S; MS
STIVARGA	2	PA; QL (84 per fill); S; MS
<i>sunitinib malate oral capsule 12.5 mg</i>	1	PA; QL (90 per fill); S; MS
<i>sunitinib malate oral capsule 25 mg, 37.5 mg, 50 mg</i>	1	PA; QL (30 per fill); S; MS
SUTENT ORAL CAPSULE 12.5 MG	3	PA; QL (90 per fill); S; MS
SUTENT ORAL CAPSULE 25 MG, 37.5 MG, 50 MG	3	PA; QL (30 per fill); S; MS
TABLOID	3	
TABRECTA	2	PA; S; MS; QL
<i>tacrolimus</i>	1	
TAFINLAR ORAL CAPSULE	2	PA; QL (120 per fill); S; MS
TAFINLAR ORAL TABLET FOR SUSPENSION	2	PA; QL (840 per fill); S; MS
TAGRISSO	2	PA; QL (30 per fill); S; MS
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG	2	PA; S; MS; QL
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	2	PA; QL (30 per fill); S; MS
<i>tamoxifen</i>	1	ACA
TARCEVA	3	PA; QL (30 per fill); S; MS
TARGRETIN	3	PA; S; MS
TASIGNA ORAL CAPSULE 150 MG, 200 MG	2	PA; QL (112 per fill); S; MS
TASIGNA ORAL CAPSULE 50 MG	2	PA; QL (120 per fill); S; MS
TAZVERIK	3	PA; S
<i>temozolomide</i>	1	PA; S; MS
THALOMID	2	PA; QL (30 per fill); S; MS
TIBSOVO	2	PA; S; QL
<i>toremifene</i>	1	
<i>torpenz</i>	1	PA; QL (30 per fill); S
<i>tretinoin (antineoplastic)</i>	1	
TREXALL	3	
TUKYSA ORAL TABLET 150 MG	3	PA; QL (120 per fill); S
TUKYSA ORAL TABLET 50 MG	3	PA; QL (300 per fill); S

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
TURALIO	3	PA; QL (120 per fill); S
TYKERB	3	PA; QL (180 per fill); S; MS
VENCLEXTA ORAL TABLET 10 MG	2	PA; QL (56 per fill); S
VENCLEXTA ORAL TABLET 100 MG	2	PA; QL (180 per fill); S
VENCLEXTA ORAL TABLET 50 MG	2	PA; QL (28 per fill); S
VENCLEXTA STARTING PACK	2	PA; QL (42 per fill); S
VERZENIO	2	PA; QL (60 per fill); S; MS
VIJOICE	2	PA; S; QL
VITRAKVI ORAL CAPSULE 100 MG	2	PA; QL (60 per fill); S; MS
VITRAKVI ORAL CAPSULE 25 MG	2	PA; QL (180 per fill); S; MS
VITRAKVI ORAL SOLUTION	2	PA; QL (300 per fill); S; MS
VIZIMPRO	2	PA; QL (30 per fill); S; MS
VONJO	2	PA; QL (120 per fill); S
VORANIGO	3	PA; S
VOTRIENT	3	PA; QL (120 per fill); S; MS
WELIREG	3	PA; S
XALKORI ORAL CAPSULE	2	PA; QL (60 per fill); S; MS
XALKORI ORAL PELLET	2	PA; QL (120 per fill); S; MS
XELODA ORAL TABLET 150 MG	3	PA; QL (56 per fill); S; MS
XELODA ORAL TABLET 500 MG	3	PA; QL (140 per fill); S; MS
XERMELO	2	PA; QL (84 per fill); S
XOSPATA	2	PA; QL (90 per fill); S
XTANDI ORAL CAPSULE	2	PA; QL (120 per fill); S; MS
XTANDI ORAL TABLET 40 MG	2	PA; QL (120 per fill); S; MS
XTANDI ORAL TABLET 80 MG	2	PA; QL (60 per fill); S; MS
ZELBORAF	2	PA; QL (240 per fill); S; MS
ZOLINZA	2	PA; QL (120 per fill); S; MS
ZORTRESS	3	
ZYDELIG	2	PA; QL (60 per fill); S; MS
ZYKADIA	2	PA; QL (90 per fill); S; MS

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

APTIOM	3	
BRIVIACT	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>carbamazepine</i>	1	
CARBATROL	3	
CELONTIN	3	
<i>clobazam</i>	1	PA
<i>clonazepam</i>	1	
DEPAKOTE	3	ST
DEPAKOTE ER	3	ST
DEPAKOTE SPRINKLES	3	ST
DIACOMIT	2	PA; S
<i>diazepam</i>	1	
DILANTIN	2	
DILANTIN EXTENDED	3	
DILANTIN INFATABS	3	
DILANTIN-125	3	
<i>divalproex</i>	1	
ELEPSIA XR	3	ST
EPIDIOLEX	2	PA; S; MS
<i>epitol</i>	1	
EQUETRO	3	
<i>ethosuximide</i>	1	
<i>felbamate</i>	1	
FELBATOL	3	
FYCOMPA	2	
<i>gabapentin oral capsule</i>	1	
<i>gabapentin oral solution</i>	1	
<i>gabapentin oral tablet</i>	1	
<i>gabapentin oral tablet extended release 24 hr</i>	1	ST
GRALISE	3	ST
<i>lacosamide</i>	1	
LAMICTAL XR STARTER (BLUE)	3	ST
LAMICTAL XR STARTER (GREEN)	3	ST
LAMICTAL XR STARTER (ORANGE)	3	ST
<i>lamotrigine</i>	1	
<i>levetiracetam</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>methsuximide</i>	1	
MYSOLINE	3	
NAYZILAM	2	PA; QL (2 per fill)
<i>oxcarbazepine</i>	1	
OXTELLAR XR	3	ST
<i>phenobarbital</i>	1	
PHENYTEK	3	
<i>phenytoin</i>	1	
<i>phenytoin sodium extended</i>	1	
<i>pregabalin oral capsule</i>	1	
<i>pregabalin oral solution</i>	1	
<i>pregabalin oral tablet extended release 24 hr</i>	1	PA
<i>primidone</i>	1	
QUDEXY XR	3	ST
<i>roovepra</i>	1	
<i>rufinamide</i>	1	PA
SPRITAM	3	ST
<i>subvenite</i>	1	
<i>subvenite starter (blue) kit</i>	1	
<i>subvenite starter (green) kit</i>	1	
<i>subvenite starter (orange) kit</i>	1	
SYMPAZAN	3	PA
TEGRETOL	3	
TEGRETOL XR	3	
<i>tiagabine</i>	1	
<i>topiramate oral capsule, sprinkle</i>	1	
<i>topiramate oral capsule, extended release 24hr</i>	1	ST
<i>topiramate oral capsule, sprinkle, er 24hr</i>	1	ST
<i>topiramate oral tablet</i>	1	
TROKENDI XR	3	ST
<i>valproic acid</i>	1	
<i>valproic acid (as sodium salt)</i>	1	
VALTOCO	2	PA; QL (2 per fill)
<i>vigabatrin oral powder in packet</i>	1	PA; QL (150 per fill); S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>vigabatrin oral tablet</i>	1	PA; QL (180 per fill); S; MS
<i>vigadrone oral powder in packet</i>	1	PA; QL (150 per fill); S
<i>vigadrone oral tablet</i>	1	PA; QL (180 per fill); S
<i>vigpoder</i>	1	PA; QL (150 per fill); S
XCOPRI	3	QL (30 per fill)
XCOPRI MAINTENANCE PACK	3	QL (56 per fill)
XCOPRI TITRATION PACK	3	QL (28 per fill)
ZARONTIN	3	
<i>zonisamide</i>	1	
ZTALMY	2	PA; S
ANTIPARKINSONISM AGENTS		
<i>apomorphine</i>	1	S; QL
AZILECT	3	ST
<i>benztropine</i>	1	
<i>bromocriptine</i>	1	
<i>carbidopa</i>	1	
<i>carbidopa-levodopa</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
<i>entacapone</i>	1	
INBRIJA	2	PA; QL (300 per fill); S
LODOSYN	3	
MIRAPEX ER	3	
NEUPRO	3	
NOURIANZ	3	PA; QL (30 per fill); S; MS
PARLODEL	3	
<i>pramipexole</i>	1	
<i>rasagiline</i>	1	
<i>ropinirole</i>	1	
RYTARY	3	
<i>selegiline hcl</i>	1	
SINEMET	3	
TASMAR	3	
<i>tolcapone</i>	1	
<i>trihexyphenidyl</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR	2	PA; QL
AJOVY AUTOINJECTOR	2	PA; QL
AJOVY SYRINGE	2	PA; QL
<i>almotriptan malate oral tablet 12.5 mg</i>	1	QL (12 per fill)
<i>almotriptan malate oral tablet 6.25 mg</i>	1	QL (6 per fill)
<i>dihydroergotamine injection</i>	1	
<i>dihydroergotamine nasal</i>	1	ST; QL (8 per fill)
<i>eletriptan</i>	1	QL (6 per fill)
EMGALITY PEN	2	PA; QL
EMGALITY SYRINGE	2	PA; QL
ERGOMAR	3	
<i>ergotamine-caffeine</i>	1	
FROVA	3	ST; QL (9 per fill)
<i>frovatriptan</i>	1	QL (9 per fill)
<i>migergot</i>	1	
MIGRANAL	3	ST; QL (8 per fill)
<i>naratriptan</i>	1	QL (9 per fill)
NURTEC ODT	2	PA; QL (16 per fill)
QULIPTA	2	PA; QL
REYVOW	3	PA; QL (8 per fill)
<i>rizatriptan</i>	1	QL (18 per fill)
<i>sumatriptan</i>	1	QL (6 per fill)
<i>sumatriptan succinate oral</i>	1	QL (9 per fill)
<i>sumatriptan succinate subcutaneous</i>	1	QL (1 per fill)
<i>sumatriptan-naproxen</i>	1	PA; QL (9 per fill)
TOSYMRA	3	ST; QL (6 per fill)
TRUDHESA	3	ST; QL (4 per fill)
UBRELVY	2	PA; QL (10 per fill)
ZEMBRACE SYMTOUCH	3	ST; QL (2 per fill)
<i>zolmitriptan nasal</i>	1	ST; QL (6 per fill)
<i>zolmitriptan oral</i>	1	QL (6 per fill)
ZOMIG	3	ST; QL (6 per fill)
MISCELLANEOUS NEUROLOGICAL THERAPY		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ADLARITY	3	ST
ARICEPT	3	ST
AUSTEDO ORAL TABLET 12 MG, 9 MG	2	PA; QL (120 per fill); S; MS
AUSTEDO ORAL TABLET 6 MG	2	PA; QL (60 per fill); S; MS
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG	2	PA; QL (90 per fill); S; MS
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 18 MG, 30 MG, 36 MG, 42 MG, 48 MG	2	PA; QL (30 per fill); S; MS
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 24 MG	2	PA; QL (60 per fill); S; MS
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 6 MG	2	PA; QL (210 per fill); S; MS
AUSTEDO XR TITRATION KT(WK1-4)	2	PA; QL (28 per fill); S; MS
<i>dalfampridine</i>	1	PA; QL (60 per fill); S; MS
<i>dichlorphenamide</i>	1	PA; S; MS
<i>donepezil oral tablet 10 mg, 5 mg</i>	1	
<i>donepezil oral tablet 23 mg</i>	1	ST
<i>donepezil oral tablet, disintegrating</i>	1	
EVRYSDI	3	PA; S; MS; QL
EXELON PATCH	3	ST
FIRDAPSE	2	PA; S
<i>galantamine</i>	1	
HORIZANT	3	ST
INGREZZA	3	PA; QL (30 per fill); S
INGREZZA INITIATION PK(TARDIV)	3	PA; QL (28 per fill); S
INGREZZA SPRINKLE	3	PA; QL (30 per fill); S
<i>memantine oral capsule, sprinkle, er 24hr</i>	1	
<i>memantine oral solution</i>	1	
<i>memantine oral tablet</i>	1	
MEMANTINE ORAL TABLETS, DOSE PACK	3	
NAMENDA TITRATION PAK	3	
NAMENDA XR	3	
NAMZARIC	2	ST
NUEDEXTA	2	PA
<i>ormalvi</i>	1	PA; S

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Drug Name	Drug Tier	Requirements / Limits
RADICAVA ORS STARTER KIT SUSP	2	S; MS
<i>rivastigmine</i>	1	
<i>rivastigmine tartrate</i>	1	
<i>tetrabenazine oral tablet 12.5 mg</i>	1	PA; QL (120 per fill); S; MS
<i>tetrabenazine oral tablet 25 mg</i>	1	PA; QL (60 per fill); S; MS
TYSABRI	2	PA; QL (15 per fill); S; MS
ZEPOSIA	2	PA; QL (30 per fill); S; MS
ZEPOSIA STARTER KIT (28-DAY)	2	PA; QL (28 per fill); S; MS
ZEPOSIA STARTER PACK (7-DAY)	2	PA; QL (7 per fill); S; MS
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
<i>baclofen oral suspension</i>	1	
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	1	
BACLOFEN ORAL TABLET 15 MG	1	
<i>carisoprodol</i>	1	
<i>carisoprodol-aspirin</i>	1	
<i>carisoprodol-aspirin-codeine</i>	1	QL
<i>chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg</i>	1	PA
<i>chlorzoxazone oral tablet 500 mg</i>	1	
<i>cyclobenzaprine oral capsule, extended release 24hr</i>	1	PA
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1	
<i>cyclobenzaprine oral tablet 7.5 mg</i>	1	PA
DANTRIUM	3	
<i>dantrolene</i>	1	
FEXMID	3	PA
LORZONE	3	PA
<i>meprobamate</i>	1	
<i>metaxalone</i>	1	
<i>methocarbamol</i>	1	
NORGESIC	3	PA
NORGESIC FORTE	3	PA
<i>orphenadrine citrate</i>	1	
<i>orphenadrine-asa-caffeine</i>	1	PA
<i>orphengesic forte</i>	1	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>pyridostigmine bromide oral syrup</i>	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	3	
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	
<i>pyridostigmine bromide oral tablet extended release</i>	1	
SOMA	3	
<i>tanlor</i>	1	
<i>tizanidine oral capsule</i>	1	PA
<i>tizanidine oral tablet</i>	1	
<i>vanadom</i>	1	
ZANAFLEX	3	
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod</i>	1	QL
<i>acetaminophen-codeine</i>	1	QL
<i>ascomp with codeine</i>	1	QL
BELBUCA	2	ST; QL (60 per fill)
BRIXADI	2	S; MS
<i>buprenorphine</i>	1	ST
<i>buprenorphine hcl</i>	1	
<i>butalbital-acetaminop-caf-cod</i>	1	QL
<i>butalbital-acetaminophen</i>	1	
<i>butalbital-acetaminophen-caff</i>	1	
<i>butalbital-aspirin-caffeine</i>	1	
<i>codeine sulfata</i>	1	QL
<i>codeine-butalbital-asa-caff</i>	1	QL
DILAUDID	3	QL
<i>diskets</i>	1	QL
<i>endocet</i>	1	QL
ESGIC	3	PA
<i>fentanyl</i>	1	ST; QL
<i>fentanyl citrate</i>	1	ST; QL
FIORICET	3	PA
FIORICET WITH CODEINE	3	QL
<i>hydrocodone bitartrate</i>	1	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocodone-acetaminophen</i>	1	QL
<i>hydrocodone-ibuprofen</i>	1	QL
<i>hydromorphone oral liquid</i>	1	QL
<i>hydromorphone oral tablet</i>	1	QL
<i>hydromorphone oral tablet extended release 24 hr</i>	1	ST; QL
<i>hydromorphone rectal</i>	1	QL
HYSINGLA ER	2	ST; QL
<i>levorphanol tartrate</i>	1	PA; QL
<i>meperidine</i>	1	QL
<i>methadone</i>	1	QL
<i>methadose</i>	1	QL
<i>morphine concentrate</i>	1	QL
<i>morphine oral capsule, er multiphase 24 hr</i>	1	ST; QL
<i>morphine oral capsule, extend. release pellets</i>	1	ST; QL
<i>morphine oral solution</i>	1	QL
<i>morphine oral tablet</i>	1	QL
<i>morphine oral tablet extended release</i>	1	ST; QL
<i>morphine rectal</i>	1	QL
MS CONTIN	3	ST; QL
NALOCET	3	PA; QL
<i>oxycodone</i>	1	QL
<i>oxycodone-acetaminophen oral solution 10-300 mg/5 ml</i>	1	PA; QL
<i>oxycodone-acetaminophen oral solution 5-325 mg/5 ml</i>	1	QL
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 2.5-300 mg, 5-300 mg, 7.5-300 mg</i>	1	PA; QL
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1	QL
OXYCONTIN	2	ST; QL
<i>oxymorphone oral tablet</i>	1	QL
<i>oxymorphone oral tablet extended release 12 hr</i>	1	ST; QL
<i>prolate</i>	1	PA; QL
ROXICODONE	3	QL
SUBLOCADE	2	S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>tencon</i>	1	
TREZIX	3	QL
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen</i>	1	ACA
ANAPROX DS	3	ST
ARTHROTEC 50	3	ST
ARTHROTEC 75	3	ST
<i>aspirin</i>	1	ACA
<i>aspirin childrens</i>	1	ACA
<i>bayer low dose aspirin</i>	1	ACA
<i>buprenorphine-naloxone</i>	1	
<i>butorphanol</i>	1	QL (5 per fill)
CAMBIA	3	ST; QL (9 per fill)
<i>celecoxib</i>	1	
DAYPRO	3	ST
<i>diclofenac potassium oral capsule</i>	1	
<i>diclofenac potassium oral powder in packet</i>	1	ST; QL (9 per fill)
<i>diclofenac potassium oral tablet 25 mg</i>	1	ST
<i>diclofenac potassium oral tablet 50 mg</i>	1	
<i>diclofenac sodium oral</i>	1	
<i>diclofenac sodium topical drops</i>	1	QL
<i>diclofenac sodium topical solution in metered-dose pump</i>	1	ST; QL
<i>diclofenac-misoprostol</i>	1	
<i>diflunisal</i>	1	
DISALCID	3	
DUEXIS	3	ST
EC-NAPROSYN	3	ST
<i>ecotrin low strength</i>	1	ACA
<i>etodolac</i>	1	
FELDENE	3	ST
<i>fenoprofen</i>	1	ST
FLECTOR	2	ST; QL (60 per fill)
<i>flurbiprofen</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>ibu</i>	1	
<i>ibuprofen</i>	1	
<i>ibuprofen-famotidine</i>	1	ST
<i>indomethacin oral capsule</i>	1	
<i>indomethacin oral capsule, extended release</i>	1	
<i>indomethacin oral suspension</i>	1	ST
<i>indomethacin rectal</i>	1	
<i>ketoprofen oral capsule 25 mg</i>	1	PA
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	1	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr</i>	1	ST
<i>ketorolac</i>	1	QL (20 per fill)
<i>kiprofen</i>	1	PA
KLOXXADO	2	QL (2 per fill)
LICART	2	ST; QL (30 per fill)
LODINE	3	ST
<i>lofena</i>	1	ST
<i>lofexidine</i>	1	PA; QL (224 per fill)
LOTREXONE	3	
<i>meclofenamate</i>	1	
<i>mefenamic acid</i>	1	
<i>meloxicam</i>	1	QL (30 per fill)
<i>meloxicam submicronized</i>	1	ST; QL (30 per fill)
<i>nabumetone</i>	1	
NALFON	3	ST
<i>naloxone injection</i>	1	
<i>naloxone nasal</i>	1	QL (2 per fill)
NALTREX	3	
<i>naltrexone</i>	1	
NAPRELAN CR	3	ST
NAPROSYN	3	ST
<i>naproxen oral suspension</i>	1	ST
<i>naproxen oral tablet</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec)</i>	1	
<i>naproxen sodium oral tablet</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>naproxen sodium oral tablet, er multiphase 24 hr</i>	1	ST
<i>naproxen-esomeprazole</i>	1	ST
NARCAN	3	QL (2 per fill)
OPVEE	3	
<i>oxaprozin</i>	1	
<i>pentazocine-naloxone</i>	1	QL
<i>piroxicam</i>	1	
REXTOVY	2	QL (2 per fill)
<i>salsalate</i>	1	
SPRIX	3	ST; QL (5 per fill); S
<i>st joseph aspirin</i>	1	ACA
<i>st. joseph aspirin</i>	1	ACA
<i>sulindac</i>	1	
TOLECTIN 600	3	ST
<i>tolmetin</i>	1	ST
<i>tramadol oral tablet</i>	1	QL (240 per fill)
<i>tramadol oral tablet extended release 24 hr</i>	1	ST; QL (30 per fill)
<i>tramadol oral tablet, er multiphase 24 hr</i>	1	ST; QL (30 per fill)
<i>tramadol-acetaminophen</i>	1	QL (240 per fill)
VIVITROL	2	S; MS
ZUBSOLV	2	
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY ASIMTUFII	2	
ABILIFY MAINTENA	2	
ABILIFY MYCITE MAINTENANCE KIT	3	QL (30 per fill)
ABILIFY MYCITE STARTER KIT	3	QL (30 per fill)
ADDYI	3	PA
ADZENYS XR-ODT	3	ST
<i>alprazolam</i>	1	
<i>alprazolam intensol</i>	1	
<i>amitriptyline</i>	1	
<i>amitriptyline-chlordiazepoxide</i>	1	
<i>amoxapine</i>	1	
<i>amphetamine sulfate</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ANAFRANIL	3	
<i>aripiprazole oral solution</i>	1	
<i>aripiprazole oral tablet</i>	1	QL (30 per fill)
<i>aripiprazole oral tablet, disintegrating</i>	1	QL (60 per fill)
ARISTADA	2	
ARISTADA INITIO	2	
<i>armodafinil</i>	1	PA; QL (30 per fill)
<i>asenapine maleate</i>	1	QL (60 per fill)
ATIVAN	3	
<i>atomoxetine</i>	1	
AUVELITY	3	ST; QL (60 per fill)
AZSTARYS	2	ST
BELSOMRA	3	ST; QL (30 per fill)
<i>bupropion hcl oral tablet</i>	1	
<i>bupropion hcl oral tablet extended release 24 hr</i>	1	QL (30 per fill)
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	1	QL (60 per fill)
<i>bupirone</i>	1	
CAPLYTA	3	QL (30 per fill)
<i>chlordiazepoxide hcl</i>	1	
<i>chlorpromazine</i>	1	
<i>citalopram oral solution</i>	1	
<i>citalopram oral tablet</i>	1	QL (30 per fill)
<i>clomipramine</i>	1	
<i>clonidine hcl</i>	1	
<i>clorazepate dipotassium</i>	1	
<i>clozapine</i>	1	
CLOZARIL	3	
COTEMPLA XR-ODT	3	ST
DAYTRANA	3	ST
DAYVIGO	3	ST; QL (30 per fill)
<i>desipramine</i>	1	
DESOXYN	3	
DESVENLAFAXINE	3	ST; QL (30 per fill)
<i>desvenlafaxine succinate</i>	1	ST; QL (30 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
DEXEDRINE SPANSULE	3	ST
<i>dexmethylphenidate</i>	1	
<i>dextroamphetamine sulfate</i>	1	
<i>dextroamphetamine-amphetamine</i>	1	
<i>diazepam</i>	1	
<i>diazepam intensol</i>	1	
<i>doxepin oral capsule</i>	1	
<i>doxepin oral concentrate</i>	1	
<i>doxepin oral tablet</i>	1	ST; QL (30 per fill)
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 60 mg</i>	1	QL (60 per fill)
<i>duloxetine oral capsule, delayed release(dr/ec) 30 mg</i>	1	QL (30 per fill)
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	1	ST; QL (30 per fill)
EDLUAR	3	ST; QL (30 per fill)
EMSAM	3	
<i>ergoloid</i>	1	
<i>escitalopram oxalate oral solution</i>	1	ST
<i>escitalopram oxalate oral tablet</i>	1	QL (30 per fill)
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	QL (30 per fill)
FANAPT ORAL TABLET	3	QL (60 per fill)
FANAPT ORAL TABLETS, DOSE PACK	3	QL (8 per fill)
FETZIMA ORAL CAPSULE, EXT REL 24HR DOSE PACK	2	ST; QL (28 per fill)
FETZIMA ORAL CAPSULE, EXTENDED RELEASE 24 HR	2	ST; QL (30 per fill)
<i>fluoxetine hcl 10 mg tablet</i>	1	ST; QL (30 per fill)
<i>fluoxetine oral capsule 10 mg</i>	1	QL (30 per fill)
<i>fluoxetine oral capsule 20 mg</i>	1	
<i>fluoxetine oral capsule 40 mg</i>	1	QL (60 per fill)
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	1	ST; QL (4 per fill)
<i>fluoxetine oral solution</i>	1	
<i>fluoxetine oral tablet 10 mg</i>	1	ST; QL (30 per fill)
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	1	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>fluphenazine decanoate</i>	1	
<i>fluphenazine hcl</i>	1	
<i>flurazepam</i>	1	
<i>fluvoxamine oral capsule,extended release 24hr</i>	1	ST; QL (60 per fill)
<i>fluvoxamine oral tablet 100 mg</i>	1	QL (90 per fill)
<i>fluvoxamine oral tablet 25 mg</i>	1	QL (30 per fill)
<i>fluvoxamine oral tablet 50 mg</i>	1	QL (60 per fill)
GEODON	3	QL (60 per fill)
<i>guanfacine</i>	1	
HALCION	3	
HALDOL DECANOATE	3	
<i>haloperidol</i>	1	
<i>haloperidol decanoate</i>	1	
<i>haloperidol lactate</i>	1	
HETLIOZ	3	PA; QL (30 per fill); S; MS
HETLIOZ LQ	3	PA; QL (158 per fill); S; MS
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 3 MG, 9 MG	3	QL (30 per fill)
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 6 MG	3	QL (60 per fill)
INVEGA SUSTENNA	3	
INVEGA TRINZA	3	
JORNAY PM	3	ST
<i>lisdexamfetamine oral capsule</i>	1	
<i>lisdexamfetamine oral tablet,chewable</i>	1	ST
<i>lithium carbonate</i>	1	
<i>lithium citrate</i>	1	
LITHOBID	3	
<i>lorazepam</i>	1	
<i>lorazepam intensol</i>	1	
<i>loxapine succinate</i>	1	
LUMRYZ	2	PA; QL (30 per fill); S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg</i>	1	QL (30 per fill)
<i>lurasidone oral tablet 80 mg</i>	1	QL (60 per fill)
LYBALVI	3	QL (30 per fill)
MARPLAN	3	
METADATE CD	3	ST
<i>methamphetamine</i>	1	
METHYLIN	3	
<i>methylphenidate</i>	1	ST
<i>methylphenidate hcl oral cap,er sprinkle,biphasic 40-60</i>	1	ST
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	1	
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	1	
<i>methylphenidate hcl oral solution</i>	1	
<i>methylphenidate hcl oral tablet</i>	1	
<i>methylphenidate hcl oral tablet extended release</i>	1	
<i>methylphenidate hcl oral tablet extended release 24hr</i>	1	
<i>methylphenidate hcl oral tablet,chewable</i>	1	
MIDAZOLAM ORAL SYRUP 10 MG/5 ML (2 MG/ML)	3	
<i>midazolam oral syrup 2 mg/ml</i>	1	
<i>mirtazapine</i>	1	
MKO (MIDAZOLAM-KETAMINE-ONDAN)	3	
<i>modafinil oral tablet 100 mg</i>	1	PA; QL (30 per fill)
<i>modafinil oral tablet 200 mg</i>	1	PA; QL (60 per fill)
<i>molindone</i>	1	
MYDAYIS	3	ST
NARDIL	3	
<i>nefazodone</i>	1	
<i>nortriptyline</i>	1	
NUPLAZID	3	PA; QL (30 per fill); S; MS
<i>olanzapine</i>	1	QL (30 per fill)
<i>olanzapine-fluoxetine</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>oxazepam</i>	1	
<i>paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 9 mg</i>	1	QL (30 per fill)
<i>paliperidone oral tablet extended release 24hr 6 mg</i>	1	QL (60 per fill)
PAMELOR	3	
PARNATE	3	
<i>paroxetine hcl oral suspension</i>	1	ST
<i>paroxetine hcl oral tablet 10 mg, 40 mg</i>	1	QL (30 per fill)
<i>paroxetine hcl oral tablet 20 mg, 30 mg</i>	1	QL (60 per fill)
<i>paroxetine hcl oral tablet extended release 24 hr</i>	1	ST; QL (60 per fill)
<i>paroxetine mesylate(menop.sym)</i>	1	ST; QL (30 per fill)
PAXIL CR	3	ST; QL (60 per fill)
PAXIL ORAL SUSPENSION	3	ST
PAXIL ORAL TABLET 10 MG, 40 MG	3	ST; QL (30 per fill)
PAXIL ORAL TABLET 20 MG, 30 MG	3	ST; QL (60 per fill)
<i>perphenazine</i>	1	
<i>perphenazine-amitriptyline</i>	1	
<i>phenelzine</i>	1	
<i>pimozide</i>	1	
<i>procentra</i>	1	
<i>protriptyline</i>	1	
QELBREE	3	ST
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1	QL (90 per fill)
<i>quetiapine oral tablet 300 mg, 400 mg</i>	1	QL (60 per fill)
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg</i>	1	QL (30 per fill)
<i>quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg</i>	1	QL (60 per fill)
QUVIVIQ	3	ST; QL (30 per fill)
<i>ramelteon</i>	1	QL (30 per fill)
REMERON	3	
REMERON SOLTAB	3	
RESTORIL	3	
REXULTI	3	QL (30 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
RISPERDAL CONSTA	2	
RISPERDAL ORAL SOLUTION	3	
RISPERDAL ORAL TABLET	3	QL (60 per fill)
<i>risperidone microspheres</i>	1	
<i>risperidone oral solution</i>	1	
<i>risperidone oral tablet</i>	1	QL (60 per fill)
<i>risperidone oral tablet, disintegrating</i>	1	QL (60 per fill)
RYKINDO	2	
SECUADO	3	QL (30 per fill)
<i>sertraline oral concentrate</i>	1	
<i>sertraline oral tablet 100 mg, 50 mg</i>	1	QL (60 per fill)
<i>sertraline oral tablet 25 mg</i>	1	QL (45 per fill)
SILENOR	3	ST; QL (30 per fill)
SODIUM OXYBATE	2	PA; QL (540 per fill); S
SUNOSI	2	PA; QL (30 per fill)
SYMBYAX	3	
<i>tasimelteon</i>	1	PA; QL (30 per fill); S; MS
<i>temazepam</i>	1	
<i>thioridazine</i>	1	
<i>thiothixene</i>	1	
<i>tranylcypromine</i>	1	
<i>trazodone</i>	1	
<i>triazolam</i>	1	
<i>trifluoperazine</i>	1	
<i>trimipramine</i>	1	
TRINTELLIX	3	ST; QL (30 per fill)
UZEDY	2	
<i>venlafaxine oral capsule, extended release 24hr 150 mg, 37.5 mg</i>	1	QL (30 per fill)
<i>venlafaxine oral capsule, extended release 24hr 75 mg</i>	1	QL (90 per fill)
<i>venlafaxine oral tablet</i>	1	QL (90 per fill)
<i>venlafaxine oral tablet extended release 24hr</i>	1	PA; QL (30 per fill)
VERSACLOZ	3	
<i>vilazodone</i>	1	ST; QL (30 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
VRAYLAR	3	QL (30 per fill)
VYLEESI	3	PA; QL (8 per fill); S
VYVANSE ORAL CAPSULE	3	ST
VYVANSE ORAL TABLET,CHEWABLE	2	ST
WAKIX ORAL TABLET 17.8 MG	3	PA; QL (60 per fill); S; MS
WAKIX ORAL TABLET 4.45 MG	3	PA; QL (30 per fill); S; MS
XYWAV	2	PA; QL (540 per fill); S
<i>zaleplon oral capsule 10 mg</i>	1	QL (60 per fill)
<i>zaleplon oral capsule 5 mg</i>	1	QL (30 per fill)
<i>zenzedi oral tablet 10 mg, 5 mg</i>	1	
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	
<i>ziprasidone hcl</i>	1	QL (60 per fill)
<i>zolpidem</i>	1	QL (30 per fill)
ZURZUVAE	2	S; QL
ZYPREXA	3	QL (30 per fill)
ZYPREXA RELPREVV	3	
ZYPREXA ZYDIS	3	QL (30 per fill)

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone</i>	1	
BETAPACE	3	ST
BETAPACE AF	3	ST
<i>disopyramide phosphate</i>	1	
<i>dofetilide</i>	1	
<i>flecainide</i>	1	
<i>lidocaine (pf)</i>	1	
<i>mexiletine</i>	1	
MULTAQ	2	
<i>pacerone</i>	1	
<i>propafenone</i>	1	
<i>quinidine gluconate</i>	1	
<i>quinidine sulfate</i>	1	
<i>sotalol</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>sotalol af</i>	1	
SOTYLIZE	2	
ANTIHYPERTENSIVE THERAPY		
ACCUPRIL	3	
ACCURETIC	3	
<i>acebutolol</i>	1	
ALDACTONE	3	
<i>aliskiren</i>	1	
ALTACE	3	
<i>amiloride</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<i>amlodipine</i>	1	
<i>amlodipine-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	1	
<i>amlodipine-valsartan</i>	1	
<i>amlodipine-valsartan-hctiazid</i>	1	
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
<i>benazepril</i>	1	
<i>benazepril-hydrochlorothiazide</i>	1	
<i>betaxolol</i>	1	
<i>bisoprolol fumarate</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	
<i>bumetanide</i>	1	
<i>candesartan</i>	1	
<i>candesartan-hydrochlorothiazid</i>	1	
<i>captopril</i>	1	
<i>captopril-hydrochlorothiazide</i>	1	
CARDIZEM	3	
CARDIZEM CD	3	
CARDIZEM LA	3	
CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG	3	ST; QL (30 per fill)
CARDURA ORAL TABLET 8 MG	3	ST; QL (60 per fill)
CARDURA XL	3	ST; QL (30 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>cartia xt</i>	1	
<i>carvedilol</i>	1	
<i>carvedilol phosphate</i>	1	
CATAPRES-TTS-1	3	QL
CATAPRES-TTS-2	3	QL
CATAPRES-TTS-3	3	QL
<i>chlorthalidone</i>	1	
<i>clonidine</i>	1	QL
<i>clonidine hcl</i>	1	
CONSENSI	3	PA
COREG CR	3	ST
DEMSER	3	PA
DIBENZYLINE	3	PA
<i>diltiazem</i>	1	
<i>dilt-xr</i>	1	
DIURIL	3	
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg</i>	1	QL (30 per fill)
<i>doxazosin oral tablet 8 mg</i>	1	QL (60 per fill)
DYRENIUM	3	
EDECRIN	3	ST
<i>enalapril maleate</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
<i>eplerenone</i>	1	
<i>eprosartan</i>	1	
<i>ethacrynic acid</i>	1	
<i>felodipine</i>	1	
<i>fosinopril</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
<i>furosemide</i>	1	
<i>guanfacine</i>	1	
<i>hydralazine</i>	1	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
INSPRA	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>irbesartan</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>isosorbide-hydralazine</i>	1	
<i>isradipine</i>	1	
KERENDIA	2	PA; QL (30 per fill)
<i>labetalol</i>	1	
LASIX	3	ST
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
LOPRESSOR	3	ST
<i>losartan</i>	1	
<i>losartan-hydrochlorothiazide</i>	1	
LOTENSIN	3	
LOTENSIN HCT	3	
<i>matzim la</i>	1	
<i>methyldopa</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	1	
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
<i>metoprolol ta-hydrochlorothiaz</i>	1	
<i>metoprolol tartrate</i>	1	
<i>metyrosine</i>	1	PA
<i>minoxidil</i>	1	
<i>moexipril</i>	1	
<i>nadolol</i>	1	
<i>nebivolol</i>	1	
<i>nicardipine</i>	1	
<i>nifedipine</i>	1	
<i>nimodipine</i>	1	
<i>nisoldipine</i>	1	
NYMALIZE	3	
<i>olmesartan</i>	1	
<i>olmesartan-amlodipin-hcthiazyd</i>	1	
<i>olmesartan-hydrochlorothiazide</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ORENITRAM	3	PA; QL (90 per fill); S; MS
ORENITRAM MONTH 1 TITRATION KT	3	PA; QL (168 per fill); S; MS
ORENITRAM MONTH 2 TITRATION KT	3	PA; QL (336 per fill); S; MS
ORENITRAM MONTH 3 TITRATION KT	3	PA; QL (252 per fill); S; MS
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine</i>	1	PA
<i>pindolol</i>	1	
<i>prazosin</i>	1	
PRESTALIA	3	ST
PROCARDIA XL	3	ST
<i>propranolol</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
<i>quinapril</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	
<i>ramipril</i>	1	
<i>spironolactone</i>	1	
<i>spironolacton-hydrochlorothiaz</i>	1	
SULAR	3	ST
<i>telmisartan</i>	1	
<i>telmisartan-amlodipine</i>	1	
<i>telmisartan-hydrochlorothiazid</i>	1	
TENORETIC 100	3	ST
TENORETIC 50	3	ST
TENORMIN	3	ST
<i>terazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1	QL (30 per fill)
<i>terazosin oral capsule 10 mg</i>	1	QL (60 per fill)
<i>tiadylt er</i>	1	
TIAZAC	3	
<i>timolol maleate</i>	1	
<i>torseamide</i>	1	
<i>trandolapril</i>	1	
<i>trandolapril-verapamil</i>	1	
<i>triamterene</i>	1	
<i>triamterene-hydrochlorothiazid</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
UPTRAVI ORAL TABLET	2	PA; QL (60 per fill); S; MS
UPTRAVI ORAL TABLETS,DOSE PACK	2	PA; S; MS; QL
<i>valsartan</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
VASERETIC	3	
VASOTEC	3	
<i>verapamil</i>	1	
VERELAN PM	3	ST
ZESTORETIC	3	
ZESTRIL	3	
CARDIAC GLYCOSIDES		
<i>digoxin</i>	1	
LANOXIN	3	
COAGULATION THERAPY		
AMICAR	3	
<i>aminocaproic acid</i>	1	
ARIXTRA	3	S
<i>aspirin-dipyridamole</i>	1	
BRILINTA	2	
CABLIVI	2	PA; S
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
<i>dabigatran etexilate</i>	1	
<i>dipyridamole</i>	1	
DOPTELET (15 TAB PACK)	2	PA; QL (15 per fill); S; MS
EFFIENT	3	
ELIQUIS	2	
ELIQUIS DVT-PE TREAT 30D START	2	
<i>enoxaparin</i>	1	S
<i>fondaparinux</i>	1	S
FRAGMIN	2	S
HEMLIBRA	2	PA; S; MS
<i>hep flush-10 (pf)</i>	1	
<i>heparin (porcine)</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>heparin (porcine) in 5 % dex</i>	1	
<i>heparin lock flush (porcine)</i>	1	
<i>heparin lockflush(porcine)(pf)</i>	1	
<i>heparin, porcine (pf) injection solution</i>	1	
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	1	
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	3	
<i>heparin, porcine (pf) intravenous</i>	1	
HEPARIN, PORCINE (PF) SUBCUTANEOUS	3	
<i>jantoven</i>	1	
<i>pentoxifylline</i>	1	
<i>phytonadione (vitamin k1)</i>	1	QL (10 per fill)
<i>prasugrel</i>	1	
PROMACTA	2	PA; S; MS
TAVALISSE	2	PA; QL (60 per fill); S
<i>warfarin</i>	1	
XARELTO	2	
XARELTO DVT-PE TREAT 30D START	2	
ZONTIVITY	3	PA
LIPID/CHOLESTEROL LOWERING AGENTS		
<i>amlodipine-atorvastatin</i>	1	QL (30 per fill)
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	QL (30 per fill); ACA
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	QL (30 per fill)
CADUET	3	ST; QL (30 per fill)
<i>cholestyramine (with sugar)</i>	1	
<i>cholestyramine light</i>	1	
<i>colesevelam</i>	1	
COLESTID	3	ST
<i>colestipol</i>	1	
<i>ezetimibe</i>	1	
<i>ezetimibe-simvastatin</i>	1	QL (30 per fill)
<i>fenofibrate micronized</i>	1	
<i>fenofibrate nanocrystallized</i>	1	
<i>fenofibrate oral tablet 120 mg</i>	1	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	
<i>fenofibrate oral tablet 40 mg</i>	1	ST
<i>fenofibric acid</i>	1	
<i>fenofibric acid (choline)</i>	1	
FENOGLIDE	3	ST
FIBRICOR	3	ST
FLOLIPID	3	ST; QL (150 per fill); ACA
<i>fluvastatin oral capsule 20 mg</i>	1	QL (30 per fill); ACA
<i>fluvastatin oral capsule 40 mg</i>	1	QL (60 per fill); ACA
<i>fluvastatin oral tablet extended release 24 hr</i>	1	QL (30 per fill); ACA
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	1	PA
JUXTAPID	2	PA; S; MS
LESCOL XL	3	ST; QL (30 per fill)
LIVALO	3	ST; QL (30 per fill); ACA
LOPID	3	
<i>lovastatin oral tablet 10 mg</i>	1	QL (30 per fill); ACA
<i>lovastatin oral tablet 20 mg, 40 mg</i>	1	QL (60 per fill); ACA
NEXLETOL	2	PA
NEXLIZET	2	PA
<i>niacin oral tablet</i>	1	PA
<i>niacin oral tablet extended release 24 hr</i>	1	
NIACOR	3	PA
<i>omega-3 acid ethyl esters</i>	1	PA
<i>pitavastatin calcium</i>	1	QL (30 per fill); ACA
<i>pravastatin</i>	1	QL (30 per fill); ACA
<i>prevalite</i>	1	
QUESTRAN	3	ST
QUESTRAN LIGHT	3	ST
REPATHA PUSHTRONEX	2	PA
REPATHA SURECLICK	2	PA
REPATHA SYRINGE	2	PA
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	1	QL (30 per fill); ACA
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	QL (30 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ROSZET	3	ST; QL (30 per fill)
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	QL (30 per fill); ACA
<i>simvastatin oral tablet 80 mg</i>	1	QL (30 per fill)
TRILIPIX	3	ST
VASCEPA	2	PA
ZYPITAMAG	3	ST; QL (30 per fill); ACA
MISCELLANEOUS CARDIOVASCULAR AGENTS		
CAMZYOS	2	PA; QL (30 per fill); S; MS
ENTRESTO	2	QL (60 per fill)
ENTRESTO SPRINKLE	2	QL (240 per fill)
<i>ivabradine</i>	1	PA
<i>ranolazine</i>	1	
VERQUVO	2	QL (30 per fill)
VYNDAMAX	2	PA; S; MS
VYNDAQEL	2	PA; S; MS
NITRATES		
GONITRO	3	
ISORDIL	3	
ISORDIL TITRADOSE	3	
<i>isosorbide dinitrate</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>nitro-bid</i>	1	
NITRO-DUR	3	
<i>nitroglycerin</i>	1	
NITROLINGUAL	3	
NITROMIST	3	
NITROSTAT	3	
<i>nitro-time</i>	1	
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
<i>acitretin</i>	1	
ANALPRAM-HC	3	ST
<i>calcipotriene</i>	1	QL
<i>calcipotriene-betamethasone topical ointment</i>	1	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>calcipotriene-betamethasone topical suspension</i>	1	QL
<i>calcitriol</i>	1	
ENSTILAR	2	ST; QL
EPIFOAM	3	ST
<i>hydrocortisone-pramoxine</i>	1	ST
OVACE	3	
OVACE PLUS	3	
OVACE PLUS SHAMPOO	3	
OVACE PLUS WASH	3	
PLEXION NS	3	
PRAMOSONE	3	ST
<i>selenium sulfide</i>	1	
SKYRIZI	2	PA; S; MS; QL
SOTYKTU	2	PA; S; MS; QL
SPEVIGO	3	PA; S; MS
STELARA	2	PA; S; MS; QL
<i>sulfacetamide sodium</i>	1	
TACLONEX	3	QL
TALTZ AUTOINJECTOR	2	PA; S; MS; QL
TALTZ AUTOINJECTOR (2 PACK)	2	PA; S; MS; QL
TALTZ AUTOINJECTOR (3 PACK)	2	PA; S; MS; QL
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 20 MG/0.25 ML, 40 MG/0.5 ML	2	PA; S; MS
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 80 MG/ML	2	PA; S; MS; QL
TERSI FOAM	3	
TREMFYA	2	PA; S; MS; QL
VECTICAL	3	
VTAMA	3	PA; QL
WYNZORA	3	ST; QL
ZORYVE TOPICAL CREAM	3	PA; QL
ZORYVE TOPICAL FOAM	3	ST; QL
BURN THERAPY		
SILVADENE	3	
<i>silver sulfadiazine</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>ssd</i>	1	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY	2	PA; S; MS; QL
AMELUZ	3	
<i>ammonium lactate</i>	1	
CANTHARIDIN IN ACETONE	3	
CIBINQO	2	PA; S; MS; QL
CORTANE-B	3	
<i>diclofenac sodium</i>	1	PA; QL
<i>doxepin</i>	1	ST; QL
DUPIXENT PEN	2	PA; S; MS; QL
DUPIXENT SYRINGE	2	PA; S; MS; QL
EFUDEX	3	
EUCRISA	2	ST; QL
FLUOROPLEX	3	
<i>fluorouracil</i>	1	
HYFTOR	3	PA; S
IODOFLEX	3	
IODOSORB	3	
LEVULAN	3	
<i>methoxsalen</i>	1	
<i>methyl salicylate</i>	1	
OPZELURA	3	PA; QL
PANRETIN	3	PA
<i>pimecrolimus</i>	1	ST; QL
<i>podofilox topical gel</i>	1	ST; QL (7 per fill)
<i>podofilox topical solution</i>	1	
<i>pradoxin</i>	1	ST; QL
REGRANEX	2	QL (15 per fill)
<i>tacrolimus</i>	1	ST; QL
TOLAK	3	
VALCHLOR	2	PA; S; MS
<i>wintergreen oil</i>	1	
ZONALON	3	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
THERAPY FOR ACNE		
ABSORICA	3	ST
<i>accutane</i>	1	
ACZONE	3	ST
<i>adapalene topical cream</i>	1	
<i>adapalene topical gel</i>	1	
<i>adapalene topical gel with pump</i>	1	
ADAPALENE TOPICAL LOTION	3	ST
<i>adapalene topical solution</i>	1	
<i>adapalene topical swab</i>	1	ST
<i>adapalene-benzoyl peroxide</i>	1	
AKLIEF	3	ST
ALTRENO	3	
<i>amnesteem</i>	1	
AMZEEQ	3	ST
ARAZLO	3	PA
<i>avar</i>	1	
AVAR LS	3	ST
<i>azelaic acid</i>	1	
AZELEX	3	ST
BENZAMYCIN	3	ST
<i>benzepro</i>	1	
BENZEPRO (MICROSPHERES)	3	ST
<i>benzoyl peroxide</i>	1	
<i>bp 10-1</i>	1	ST
<i>brimonidine</i>	1	PA
<i>claravis</i>	1	
CLEOCIN T	3	ST; QL
<i>clindacin</i>	1	QL
CLINDACIN ETZ TOPICAL KIT	3	ST
<i>clindacin etz topical swab</i>	1	
<i>clindacin p</i>	1	
CLINDACIN PAC	3	ST
<i>clindamycin phosphate topical foam</i>	1	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate topical gel</i>	1	QL
<i>clindamycin phosphate topical gel, once daily</i>	1	ST; QL
<i>clindamycin phosphate topical lotion</i>	1	QL
<i>clindamycin phosphate topical solution</i>	1	QL
<i>clindamycin phosphate topical swab</i>	1	
<i>clindamycin-benzoyl peroxide</i>	1	
<i>clindamycin-tretinoin</i>	1	
<i>dapsone</i>	1	
DIFFERIN	3	ST
EPIDUO FORTE	3	ST
EPSOLAY	3	ST
<i>ery pads</i>	1	
<i>erygel</i>	1	
<i>erythromycin with ethanol</i>	1	
<i>erythromycin-benzoyl peroxide</i>	1	
EVOCLIN	3	ST; QL
FINACEA	2	ST
<i>isotretinoin</i>	1	
<i>ivermectin</i>	1	QL
METROCREAM	3	ST
METROGEL	3	ST
<i>metronidazole</i>	1	
MIRVASO	2	PA
<i>neuac</i>	1	
NEUAC KIT	3	ST
ONEXTON	3	ST
PACNEX	3	ST
PLEXION	3	ST
PLEXION CLEANSING CLOTHS	3	ST
PR BENZOYL PEROXIDE	3	ST
<i>refissa</i>	1	
RENOVA	3	
RETIN-A	3	
RETIN-A MICRO PUMP	3	

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Drug Name	Drug Tier	Requirements / Limits
RHOFADE	3	PA
<i>rosadan topical cream</i>	1	
<i>rosadan topical gel</i>	1	
ROSADAN TOPICAL KIT, CLEANSER AND GEL	3	ST
ROSADAN TOPICAL KIT,CLEANSER AND CREAM	3	ST
ROSULA	3	ST
<i>rosula cleansing cloths</i>	1	
SOOLANTRA	3	ST; QL
<i>sss 10-5</i>	1	
<i>sulfacetamide sodium-sulfur</i>	1	
<i>sulfacleanse 8-4</i>	1	ST
SUMADAN	3	ST
SUMADAN XLT	3	ST
SUMAXIN	3	ST
SUMAXIN CP	3	ST
SUMAXIN TS	3	ST
<i>tazarotene</i>	1	PA
<i>tretinoin</i>	1	
<i>tretinoin (emollient)</i>	1	
<i>tretinoin microspheres</i>	1	
TWYNEO	3	ST
VANOXIDE-HC	3	ST
<i>zenatane</i>	1	
ZIANA	3	ST
TOPICAL ANESTHETICS		
<i>dermacinrx lidocan</i>	1	ST
<i>lidocaine (pf)</i>	1	
<i>lidocaine hcl</i>	1	
<i>lidocaine hcl-hydrocortison ac</i>	1	
<i>lidocaine topical adhesive patch,medicated</i>	1	ST
<i>lidocaine topical ointment</i>	1	QL
<i>lidocaine viscous</i>	1	
<i>lidocaine-prilocaine topical cream</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine-prilocaine topical kit</i>	1	
<i>lidocan iii</i>	1	ST
<i>lidocan iv</i>	1	ST
<i>lidocan v</i>	1	ST
<i>lidocort</i>	1	
NYNUTEY	3	
<i>tridacaine ii</i>	1	PA
ZTLIDO	2	ST
TOPICAL ANTIBACTERIALS		
ALTABAX	3	ST; QL (30 per fill)
CENTANY	3	ST; QL (30 per fill)
CENTANY AT	3	ST; QL (1 per fill)
<i>gentamicin</i>	1	QL (60 per fill)
KLARON	3	ST
<i>lugols</i>	1	
<i>mafenide acetate</i>	1	
<i>mupirocin</i>	1	QL (44 per fill)
<i>mupirocin calcium</i>	1	ST; QL (30 per fill)
NEO-SYNALAR	3	
NEO-SYNALAR KIT	3	
<i>strong iodine</i>	1	
<i>sulfacetamide sodium (acne)</i>	1	
SULFAMYLON	2	
XEPI	3	ST; QL (30 per fill)
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK	3	
CICLODAN KIT TOPICAL SOLUTION	3	ST
<i>ciclodan topical cream</i>	1	QL
<i>ciclodan topical solution</i>	1	
<i>ciclopirox topical cream</i>	1	QL
<i>ciclopirox topical gel</i>	1	QL
<i>ciclopirox topical shampoo</i>	1	QL
<i>ciclopirox topical solution</i>	1	
<i>ciclopirox topical suspension</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>ciclopirox-ure-camph-menth-euc</i>	1	
<i>clotrimazole</i>	1	QL
<i>clotrimazole-betamethasone</i>	1	QL
<i>econazole</i>	1	QL
EXELDERM	3	QL
EXTINA	3	ST; QL
JUBLIA	3	ST
<i>ketoconazole topical cream</i>	1	QL
<i>ketoconazole topical foam</i>	1	ST; QL
<i>ketoconazole topical shampoo</i>	1	QL
<i>ketodan</i>	1	ST; QL
<i>ketodan kit</i>	1	ST
<i>klayesta</i>	1	QL (180 per fill)
LOPROX (AS OLAMINE)	3	QL
LOPROX KIT	3	QL
<i>naftifine</i>	1	QL
NAFTIN	3	QL
<i>nyamyc</i>	1	QL (180 per fill)
<i>nystatin topical cream</i>	1	QL
<i>nystatin topical ointment</i>	1	QL
<i>nystatin topical powder</i>	1	QL (180 per fill)
<i>nystatin-triamcinolone</i>	1	QL
<i>nystop</i>	1	QL (180 per fill)
<i>oxiconazole</i>	1	QL
<i>tavaborole</i>	1	ST
TOPICAL ANTIVIRALS		
<i>acyclovir topical cream</i>	1	PA; QL (5 per fill)
<i>acyclovir topical ointment</i>	1	PA; QL (30 per fill)
DENAVIR	3	
<i>penciclovir</i>	1	
ZOVIRAX	3	PA; QL (5 per fill)
TOPICAL CORTICOSTEROIDS		
<i>ala-cort</i>	1	
ALA-SCALP	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>alclometasone</i>	1	
<i>amcinonide</i>	1	ST
<i>apexicon e</i>	1	ST
<i>beser</i>	1	ST
<i>betamethasone dipropionate</i>	1	
<i>betamethasone valerate topical cream</i>	1	
<i>betamethasone valerate topical foam</i>	1	ST
<i>betamethasone valerate topical lotion</i>	1	
<i>betamethasone valerate topical ointment</i>	1	
<i>betamethasone, augmented</i>	1	
BRYHALI	3	ST
CAPEX	3	ST
<i>clobetasol scalp</i>	1	QL
<i>clobetasol topical cream</i>	1	QL
<i>clobetasol topical foam</i>	1	ST; QL
<i>clobetasol topical gel</i>	1	QL
<i>clobetasol topical lotion</i>	1	ST; QL
<i>clobetasol topical ointment</i>	1	QL
<i>clobetasol topical shampoo</i>	1	ST; QL
<i>clobetasol topical spray,non-aerosol</i>	1	ST; QL
<i>clobetasol-emollient topical cream</i>	1	QL
<i>clobetasol-emollient topical foam</i>	1	ST; QL
CLOBEX	3	ST; QL
<i>clocortolone pivalate</i>	1	
<i>clodan</i>	1	ST; QL
CLODAN KIT	3	ST; QL
CORDRAN	3	ST; QL
CORDRAN TAPE LARGE ROLL	3	ST
DERMA-SMOOTH/FS BODY OIL	3	ST
DERMA-SMOOTH/FS SCALP OIL	3	ST
<i>desonide topical cream</i>	1	
<i>desonide topical gel</i>	1	ST
<i>desonide topical lotion</i>	1	ST
<i>desonide topical ointment</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>desoximetasone</i>	1	ST
<i>diflorasone</i>	1	ST; QL
DIPROLENE (AUGMENTED)	3	ST
DUOBRII	3	ST; QL
<i>fluocinolone</i>	1	
<i>fluocinolone and shower cap</i>	1	
<i>fluocinonide topical cream 0.05 %</i>	1	QL
<i>fluocinonide topical cream 0.1 %</i>	1	ST; QL
<i>fluocinonide topical gel</i>	1	QL
<i>fluocinonide topical ointment</i>	1	QL
<i>fluocinonide topical solution</i>	1	QL
<i>fluocinonide-e</i>	1	QL
<i>flurandrenolide</i>	1	ST; QL
<i>fluticasone propionate topical cream</i>	1	
<i>fluticasone propionate topical lotion</i>	1	ST
<i>fluticasone propionate topical ointment</i>	1	
<i>halcinonide</i>	1	ST
<i>halobetasol propionate topical cream</i>	1	
<i>halobetasol propionate topical foam</i>	1	ST
<i>halobetasol propionate topical ointment</i>	1	
HALOG	3	ST
<i>hydrocortisone</i>	1	
<i>hydrocortisone butyrate topical cream</i>	1	QL
<i>hydrocortisone butyrate topical lotion</i>	1	ST; QL
<i>hydrocortisone butyrate topical ointment</i>	1	ST; QL
<i>hydrocortisone butyrate topical solution</i>	1	ST; QL
<i>hydrocortisone valerate</i>	1	
KENALOG	3	ST; QL
<i>mometasone</i>	1	
NUCORT	3	ST
OLUX	3	ST; QL
PANDEL	3	ST
<i>prednicarbate</i>	1	
PROCTOCORT	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>scalacort</i>	1	
SCALACORT DK	3	ST
SYNALAR	3	ST
SYNALAR CREAM KIT	3	ST
SYNALAR OINTMENT KIT	3	ST
SYNALAR TS	3	ST
TEXACORT	3	ST
TOPICORT	3	ST
<i>tovet emollient</i>	1	ST; QL
<i>triamcinolone acetonide topical aerosol</i>	1	ST; QL
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
<i>triderm topical cream 0.1 %</i>	1	
<i>triderm topical cream 0.5 %</i>	1	ST
TOPICAL ENZYMES		
SANTYL	2	QL (180 per fill)
TOPICAL SCABICIDES / PEDICULICIDES		
<i>crotan</i>	1	
ELIMITE	3	
EURAX	3	
<i>malathion</i>	1	
OVIDE	3	
<i>permethrin</i>	1	
<i>spinosad</i>	1	
ULESFIA	3	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
ANOREXIANTS		
ADIPEX-P	3	PA; QL (30 per fill)
<i>benzphetamine</i>	1	PA; QL (90 per fill)
CONTRA VE	3	PA; QL (120 per fill)
<i>diethylpropion oral tablet</i>	1	PA; QL (90 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>diethylpropion oral tablet extended release</i>	1	PA; QL (30 per fill)
IMCIVREE	3	PA; S; QL
LOMAIRA	3	PA; QL (90 per fill)
ORLISTAT	3	PA; QL (90 per fill)
<i>phendimetrazine tartrate oral capsule, extended release</i>	1	PA; QL (30 per fill)
<i>phendimetrazine tartrate oral tablet</i>	1	PA; QL (180 per fill)
<i>phentermine</i>	1	PA; QL (30 per fill)
QSYMIA	3	PA; QL (30 per fill)
SAXENDA	3	PA; QL (5 per fill)
WEGOVIY	2	PA; QL
XENICAL	3	PA; QL (90 per fill)
ZEPBOUND	2	PA; QL
IRRIGATING SOLUTIONS		
<i>lactated ringers</i>	1	
<i>neomycin-polymyxin b gu</i>	1	
PHYSIOLYTE	3	
PHYSIOSOL IRRIGATION	3	
<i>ringer's</i>	1	
SORBITOL	3	
SORBITOL-MANNITOL	3	
<i>tis-u-sol pentalyte</i>	1	
MISCELLANEOUS AGENTS		
<i>acamprosate</i>	1	
<i>acetic acid</i>	1	
AGRYLIN	3	
<i>anagrelide</i>	1	
BUPHENYL	3	PA; S
<i>caffeine citrate</i>	1	
CARBAGLU	2	S; MS
<i>carglumic acid</i>	1	S
CARNITOR	3	
CARNITOR (SUGAR-FREE)	3	
<i>cevimeline</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
CHEMET	2	PA
<i>curity sterile water</i>	1	
<i>deferasirox</i>	1	PA; S; MS
<i>deferiprone</i>	1	PA; S; MS
<i>disulfiram</i>	1	
<i>droxidopa</i>	1	PA; S; MS
EMPAVELI	2	PA; S
ENDARI	3	PA; S; MS
EVOXAC	3	
EXSERVAN	3	PA; S
FABHALTA	2	PA; S
FERRIPROX (2 TIMES A DAY)	2	PA; S
FERRIPROX ORAL SOLUTION	2	PA; S
FERRIPROX ORAL TABLET	3	PA; S
<i>finasteride</i>	1	
<i>glutamine (sickle cell)</i>	1	PA; S; MS
INCRELEX	2	PA; S; MS
JOENJA	3	PA; QL (60 per fill); S
<i>levocarnitine</i>	1	
<i>levocarnitine (with sugar)</i>	1	
LITFULO	3	PA; S; MS; QL
LITHOSTAT	3	
METOPIRONE	3	
<i>midodrine</i>	1	
<i>nitisinone</i>	1	PA; S; MS
NITYR	2	PA; S; MS
OLPRUVA	3	PA; S
ORFADIN	3	PA; S
PHEBURANE	2	PA; S; MS
<i>pilocarpine hcl</i>	1	
PROPECIA	3	
PYRUKYND	3	PA; S; QL
RADIOGARDASE	3	
REVCOVI	2	PA; S

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
REZDIFFRA	2	PA; S; MS; QL
RILUTEK	3	PA
<i>riluzole</i>	1	PA
<i>risedronate</i>	1	QL (30 per fill)
SALAGEN (PILOCARPINE)	3	
<i>sodium chloride</i>	1	
<i>sodium phenylbutyrate</i>	1	PA
SOHONOS ORAL CAPSULE 1 MG, 1.5 MG	3	PA; QL (112 per fill); S
SOHONOS ORAL CAPSULE 10 MG	3	PA; QL (56 per fill); S
SOHONOS ORAL CAPSULE 2.5 MG	3	PA; QL (140 per fill); S
SOHONOS ORAL CAPSULE 5 MG	3	PA; QL (84 per fill); S
SYPRINE	3	PA
TEGLUTIK	3	PA; S
THIOLA EC	3	PA; S
TIGLUTIK	3	PA; S
<i>tiopronin oral tablet</i>	1	PA; S; MS
<i>tiopronin oral tablet, delayed release (dr/ec)</i>	1	PA; S
<i>trientine</i>	1	PA
VOYDEYA	2	PA; S
<i>water for irrigation, sterile</i>	1	
XURIDEN	2	S; QL
ZOKINVY	3	PA; QL (120 per fill); S
SMOKING DETERRENTS		
<i>bupropion hcl (smoking deter)</i>	1	ACA
CHANTIX	3	ACA
CHANTIX CONTINUING MONTH BOX	3	ACA
CHANTIX STARTING MONTH BOX	3	ACA
NICODERM CQ	2	ACA
NICORETTE BUCCAL GUM 2 MG	2	ACA
<i>nicorette buccal gum 4 mg</i>	1	ACA
NICORETTE BUCCAL LOZENGE	2	ACA
NICORETTE BUCCAL MINI LOZENGE	2	ACA
<i>nicotine</i>	1	ACA
<i>nicotine (polacrilex)</i>	1	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
NICOTROL NS	3	ACA
<i>quit 2</i>	1	ACA
<i>quit 4</i>	1	ACA
<i>stop smoking aid</i>	1	ACA
<i>varenicline</i>	1	ACA
EAR, NOSE & THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
<i>azelastine nasal spray,non-aerosol 137 mcg (0.1 %)</i>	1	QL (60 per fill)
<i>azelastine nasal spray,non-aerosol 205.5 mcg (0.15 %)</i>	1	
<i>chlorhexidine gluconate</i>	1	
CLINPRO 5000	3	
<i>denta 5000 plus</i>	1	
<i>denta 5000 plus sensitive</i>	1	
<i>dentagel</i>	1	
<i>fluoride (sodium)</i>	1	
FLUORIDEX DAILY DEFENSE	3	
FLUORIDEX SENSITIVITY RELIEF	3	
FLUORIMAX 5000	3	
FLUORIMAX 5000 SENSITIVE	3	
<i>fraiche 5000</i>	1	
FRAICHE 5000 PREVI	3	
FRAICHE 5000 SENSITIVE	3	
GELCLAIR	3	
<i>ipratropium bromide</i>	1	QL (30 per fill)
JUST RIGHT 5000	3	
<i>kourzeq</i>	1	
MUGARD	3	S
<i>olopatadine</i>	1	QL (31 per fill)
<i>oralone</i>	1	
ORAMAGICRX	3	
<i>paroex oral rinse</i>	1	
PATANASE	3	QL (31 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
PERIDEX	3	
<i>periogard</i>	1	
<i>pilocarpine hcl</i>	1	
PREVIDENT	3	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 ENAMEL PROTECT	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	3	
PREVIDENT 5000 SENSITIVE	3	
PREVIDENT KIDS	3	
PROTHELIAL	3	S
SALAGEN (PILOCARPINE)	3	
<i>sf</i>	1	
<i>sf 5000 plus</i>	1	
<i>sodium fluoride 5000 plus</i>	1	
<i>sodium fluoride-pot nitrate</i>	1	
<i>triamcinolone acetamide</i>	1	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid</i>	1	
<i>ciprofloxacin hcl</i>	1	
DERMOTIC OIL	3	
<i>flac otic oil</i>	1	
<i>fluocinolone acetamide oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
<i>ofloxacin</i>	1	
OTIC STEROID / ANTIBIOTIC		
<i>ciprofloxacin-dexamethasone</i>	1	
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc</i>	1	
OTOVEL	3	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
ACTHAR	3	PA; S; MS
ACTHAR SELFJECT	3	PA; S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
CORTEF	3	
<i>cortisone</i>	1	
<i>deflazacort oral suspension</i>	1	PA; S
<i>deflazacort oral tablet</i>	1	PA; S; MS
DEPO-MEDROL	3	
<i>dexabliss</i>	1	PA
<i>dexamethasone intensol</i>	1	
<i>dexamethasone oral elixir</i>	1	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>dexamethasone oral tablets,dose pack</i>	1	PA
<i>fludrocortisone</i>	1	
<i>hydrocortisone</i>	1	
MEDROL	3	
MEDROL (PAK)	3	
<i>methylprednisolone</i>	1	
<i>methylprednisolone acetate</i>	1	
<i>millipred</i>	1	
<i>millipred dp</i>	1	
ORAPRED ODT	3	
<i>prednisolone</i>	1	
<i>prednisolone sodium phosphate</i>	1	
<i>prednisone</i>	1	
<i>prednisone intensol</i>	1	
RAYOS	3	PA
TAPERDEX	3	PA
TARPEYO	3	PA; S; QL
ZCORT	3	PA
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>potassium iodide</i>	1	
<i>propylthiouracil</i>	1	
SSKI	3	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE INSULINX	2	
FREESTYLE INSULINX TEST STRIPS	2	
FREESTYLE LITE STRIPS	2	
FREESTYLE PRECISION NEO STRIPS	2	
FREESTYLE TEST	2	
ONETOUCH ULTRA TEST	2	
ONETOUCH VERIO TEST STRIPS	2	
PRECISION XTRA TEST	2	
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
ACE AEROSOL CLOUD ENHANCER	2	
AEROCHAMBER MECHANICAL VENT	2	
AEROCHAMBER MINI	2	
AEROCHAMBER PLUS FLOW-VU	2	
AEROCHAMBER PLUS Z STAT	2	
AEROTRACH PLUS	2	
AEROVENT PLUS	2	
BREATHERITE MDI SPACER	2	
COMPACT SPACE CHAMBER	2	
EASIVENT HOLDING CHAMBER	2	
FLEXICHAMBER	2	
LITEAIRE MDI CHAMBER	2	
MICROCHAMBER	2	
MICROSPACER	2	
OPTICHAMBER DIAMOND VHC	2	
POCKET CHAMBER	2	
PRIMEAIRE	2	
PROCHAMBER	2	
RITEFLO AEROCHAMBER	2	
SPACE CHAMBER	2	
VORTEX HOLDING CHAMBER	2	
GLUCOSE ELEVATING AGENTS		
BAQSIMI	2	QL (2 per fill)
<i>diazoxide</i>	1	
<i>glucagon emergency kit (human)</i>	1	QL (2 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
GVOKE	2	QL (2 per fill)
GVOKE HYPOPEN 2-PACK	2	QL (2 per fill)
GVOKE PFS 2-PACK SYRINGE	2	QL (2 per fill)
PROGLYCEM	3	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
ACCU-CHEK GUIDE L1-L2 CTRL SOL	3	
ACCU-CHEK SMARTVIEW CONTRL SOL	3	
ACCUTREND GLUCOSE CONTROL	3	
ADVOCATE REDI-CODE PLUS CTRL L	3	
AGAMATRIX CONTROL HIGH	3	
ASSURE 4 CONTROL SOLUTION	3	
ASSURE DOSE NORMAL CONTROL	3	
ASSURE PRISM CONTROL 1-2 SOLN	3	
AT HOME A1C	3	
AUTOJECT 2 INJECTION DEVICE	2	
AUTOPEN 1 TO 21 UNITS	2	
AUTOSOFT 30	2	
AUTOSOFT 90	2	
AUTOSOFT XC INFUSION SET 23"	2	
BD INTEGRA NEEDLE	2	
BD MICROTAINER LANCET	2	
BD SPECIALTY USE NEEDLES	2	
BD ULTRA-FINE NANO PEN NEEDLE	2	
BLOOD GLUCOSE CONTROL, NORMAL	3	
BREEZE 2 CONTROL SOLUTION,HIGH	3	
CARESENS CONTROL A AND B	3	
CARETOUCH CONTROL SOLN L2-L3	3	
CEQR SIMPLICITY	2	
CLEVER CHOICE LEVEL 2 CONTROL	3	
CONTOUR CONTROL SOLUTION, NML	3	
CONTOUR NEXT LEV 2 CONTROL SOL	3	
DEXCOM G6 RECEIVER	2	QL
DEXCOM G6 SENSOR	2	QL
DEXCOM G6 TRANSMITTER	2	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
DEXCOM G7 RECEIVER	2	QL
DEXCOM G7 SENSOR	2	QL
DIATRUE CONTROL SOLN NORMAL	3	
EASY PLUS II HIGH CONTROL	3	
EASY STEP HIGH CONTROL SOLN	3	
EASY TALK HIGH CONTROL	3	
EASY TALK PLUS II LOW CONTROL	3	
EASY TOUCH BLU CTRL SOLN-L1,L3	3	
EASY TRAK II CTRL SOLN-NORMAL	3	
EASY TRAK LOW CONTROL	3	
EASYMAX 15 LEVEL 2	3	
EASYMAX NORMAL CONTROL	3	
ELEMENT COMPACT NORMAL CONTROL	3	
ELEMENT NORMAL CONTROL	3	
EMBRACE EVO LEVEL 1	3	
EMBRACE GLUCOSE CONTROL LOW	3	
EMBRACE TALK CONTROL-LOW (L1)	3	
EVOLUTION NORMAL CONTROL	3	
FORA 6 CONNECT MULTIFUNCTN MTR	3	
FORA GTEL MULTI-FUNCTN MONITOR	3	
FORA KETONE CONTROL SOLN-L1	3	
FORA NORMAL CONTROL	3	
FORA TN'G ADV MOBILE MULTI MTR	3	
FORA TN'G ADVANCE MULTI-FN MTR	3	
FORA TN'G ADVANCE PRO MONITOR	3	
FORACARE GDH LOW CONTROL	3	
FREESTYLE CONTROL	2	
FREESTYLE FREEDOM	2	
FREESTYLE FREEDOM LITE	2	
FREESTYLE INSULINX	2	
FREESTYLE LIBRE 14 DAY READER	2	
FREESTYLE LIBRE 14 DAY SENSOR	2	QL
FREESTYLE LIBRE 2 READER	2	
FREESTYLE LIBRE 2 SENSOR	2	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LIBRE 3 READER	2	QL
FREESTYLE LIBRE 3 SENSOR	2	QL
FREESTYLE LITE METER	2	
GE100 CONTROL SOLUTION NORMAL	3	
GENTEEL VACUUM LANCING DEVICE	3	
GLUCOCARD 01 NORMAL CONTROL	3	
GLUCOCOM CONTROL NORMAL	3	
GLUCOSE CONTROL	3	
GOJJI GLUCOSE CNTRL SOL-NORMAL	3	
GOJJI KETONE CONTROL SOLN-L1	3	
GOJJI MULTI-FUNCTIONAL METER	3	
HEALTHPRO HIGH-LOW CONTROL	3	
ILET INFUSION KIT-INSET 23"	2	
ILET INFUSION-CONTACT DTCH 23"	2	
INFINITY CONTROL SOLUTION NORM	3	
INPEN (FOR HUMALOG) PINK	3	
INPEN (NOVOLOG OR FIASP) BLUE	3	
INPEN (NOVOLOG OR FIASP) PINK	3	
LANCETS	2	
LANCING DEVICE	2	
MEDISENSE	2	
MEDISENSE GLUCOSE KETONE	2	
MEDTRONIC EXT INFUSION SET 23"	2	
MINIMED MIO ADVANCE INF SET23"	2	
MINIMED QUICK SET 43"	2	
MINIMED SILHOUETTE 23"	2	
MINIMED SURE T 32"	2	
MYGLUCOHEALTH CONTROL SOLUTION	3	
NOVA MAX PLUS GLUC-KETON METER	3	
NOVAMAX PLUS GLU-KET	3	
NOVOPEN ECHO	3	
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	2	QL
OMNIPOD 5 G6-G7 PODS (GEN 5)	2	QL
OMNIPOD CLASSIC PODS (GEN 3)	2	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
OMNIPOD DASH INTRO KIT (GEN 4)	2	QL
OMNIPOD DASH PODS (GEN 4)	2	QL
OMNIPOD GO PODS 10 UNITS/DAY	2	QL
ON CALL EXPRESS CONTROL	3	
ON CALL PLUS CONTROL	3	
ON CALL VIVID CONTROL	3	
ONETOUCH ULTRA CONTROL	2	
ONETOUCH ULTRA2 METER	2	
ONETOUCH VERIO FLEX METER	2	
ONETOUCH VERIO MID CONTROL	2	
ONETOUCH VERIO REFLECT METER	2	
PIP GLUCOSE CONTROL SOLN L1-L2	3	
PRECISION XTRA KETONE-GLUCOSE	2	
PRECISION XTRA MONITOR	2	
PRODIGY CONTROL SOLUTION, LOW	3	
PRODIGY CONTROL SOLUTION,HIGH	3	
REFUAH PLUS GLUCOSE CONTROL	3	
RIGHTEST CONTROL SOLUTION HIGH	3	
SMARTEST CONTROL	3	
SOLUS V2 CONTROL SOLUTION,HIGH	3	
T:FLEX	2	
T:SLIM X2	2	
TANDEM MOBI AUTOSOFT 30 KT 23"	3	
TANDEM MOBI AUTOSOFT XC KIT 5"	3	
TANDEM MOBI CARTRIDGE	2	
TANDEM MOBI TRUSTEEL KIT 23"	3	
TELCARE CONTROL	3	
TRUE METRIX LEVEL 1	3	
TRUSTEEL INFUSION SET 23"	2	
UNISTRIP LOW CONTROL	3	
VARISOFT INFUSION SET 23"	2	
V-GO 20	2	
V-GO 30	2	
V-GO 40	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
VIVAGUARD INO CTRL SOLN-L1,2,3	3	
WAVESENSE CONTROL SOLUTION	3	
INSULIN THERAPY		
BASAGLAR KWIKPEN U-100 INSULIN	3	
BASAGLAR TEMPO PEN(U-100)INSLN	3	
HUMALOG JUNIOR KWIKPEN U-100	2	
HUMALOG KWIKPEN INSULIN	2	
HUMALOG MIX 50-50 KWIKPEN	2	
HUMALOG MIX 75-25 KWIKPEN	2	
HUMALOG MIX 75-25(U-100)INSULN	2	
HUMALOG TEMPO PEN(U-100)INSULN	2	
HUMALOG U-100 INSULIN	2	
HUMULIN 70/30 U-100 INSULIN	2	
HUMULIN 70/30 U-100 KWIKPEN	2	
HUMULIN N NPH INSULIN KWIKPEN	2	
HUMULIN N NPH U-100 INSULIN	2	
HUMULIN R REGULAR U-100 INSULN	2	
HUMULIN R U-500 (CONC) INSULIN	2	
HUMULIN R U-500 (CONC) KWIKPEN	2	
INSULIN LISPRO	2	
INSULIN LISPRO PROTAMIN-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	
SEMGLEE(INSULIN GLARGINE-YFGN)	2	
SEMGLEE(INSULIN GLARG-YFGN)PEN	2	
SOLIQUA 100/33	2	QL (15 per fill)
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	
MISCELLANEOUS HORMONES		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>cabergoline</i>	1	QL
<i>calcitonin (salmon)</i>	1	
<i>calcitriol</i>	1	
CERDELGA	2	PA; QL (56 per fill); S; MS
<i>cetorelix</i>	1	S
CETROTIDE	2	S; MS
<i>cinacalcet</i>	1	ST
<i>clomid</i>	1	
<i>clomiphene citrate</i>	1	
<i>danazol</i>	1	
DDAVP	3	
DEPO-TESTOSTERONE	3	
<i>desmopressin injection</i>	1	S; MS
<i>desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)</i>	1	
DESMOPRESSIN NASAL SPRAY,NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	2	
<i>desmopressin oral</i>	1	
<i>doxercalciferol</i>	1	ST
<i>fyremadel</i>	1	S; MS
GALAFOLD	3	PA; QL (15 per fill); S; MS
<i>ganirelix</i>	1	ST; S; MS
GONAL-F	2	ST; S; MS
GONAL-F RFF	2	ST; S; MS
GONAL-F RFF REDI-JECT	2	ST; S; MS
JATENZO ORAL CAPSULE 158 MG, 198 MG	3	QL (120 per fill)
JATENZO ORAL CAPSULE 237 MG	3	QL (60 per fill)
<i>javygtor</i>	1	PA; S; MS
JYNARQUE ORAL TABLET	3	PA; QL (120 per fill); S
JYNARQUE ORAL TABLETS, SEQUENTIAL	3	PA; QL (56 per fill); S
MENOPUR	2	S; MS
METHITEST	2	
<i>methyltestosterone</i>	1	
MIACALCIN	3	
<i>mifepristone</i>	1	PA; S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>miglustat</i>	1	PA; QL (90 per fill); S; MS
MYALEPT	2	PA; S; MS
NOCDURNA (MEN)	3	PA; QL (30 per fill)
NOCDURNA (WOMEN)	3	PA; QL (30 per fill)
NOVAREL	2	QL (6 per fill); S; MS
OPFOLDA	3	PA; QL (8 per fill); S; MS
ORILISSA	2	ST; QL
OVIDREL	2	S; MS
PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML	2	PA; QL (30 per fill); S; MS
PALYNZIQ SUBCUTANEOUS SYRINGE 2.5 MG/0.5 ML	2	PA; QL (8 per fill); S; MS
PALYNZIQ SUBCUTANEOUS SYRINGE 20 MG/ML	2	PA; QL (60 per fill); S; MS
<i>paricalcitol</i>	1	ST
PREGNYL	3	ST; QL (3 per fill); S
RAYALDEE	3	ST
ROCALTROL	3	ST
<i>sapropterin</i>	1	PA; S; MS
SOMAVERT	2	S; MS
STRENSIQ	2	PA; S
SYNAREL	2	PA
<i>testosterone cypionate</i>	1	
<i>testosterone enanthate</i>	1	
<i>testosterone transdermal gel</i>	1	QL (60 per fill)
<i>testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation</i>	1	QL (120 per fill)
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)</i>	1	QL (300 per fill)
<i>testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)</i>	1	QL (150 per fill)
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram)</i>	1	QL (75 per fill)
<i>testosterone transdermal gel in packet 1 % (50 mg/5 gram)</i>	1	QL (300 per fill)
<i>testosterone transdermal gel in packet 1.62 % (20.25 mg/1.25 gram)</i>	1	QL (30 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>testosterone transdermal gel in packet 1.62 % (40.5 mg/2.5 gram)</i>	1	QL (60 per fill)
<i>testosterone transdermal solution in metered pump w/app</i>	1	QL (180 per fill)
<i>tolvaptan oral tablet 15 mg</i>	1	PA; QL (30 per fill); S; MS
<i>tolvaptan oral tablet 30 mg</i>	1	PA; QL (60 per fill); S; MS
VOGELXO TRANSDERMAL GEL	3	QL (60 per fill)
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP	3	QL (300 per fill)
VOGELXO TRANSDERMAL GEL IN PACKET	3	QL (60 per fill)
VOXZOGO	3	PA; S; MS
XYOSTED	2	QL
ZEMPLAR	3	ST
NON-INSULIN HYPOGLYCEMIC AGENTS		
<i>acarbose</i>	1	
ACTOPLUS MET	3	ST; QL (90 per fill)
ACTOS	3	ST; QL (30 per fill)
BYDUREON BCISE	2	PA; QL
BYETTA	2	PA; QL
CYCLOSET	3	
DUETACT	3	ST; QL (30 per fill)
FARXIGA	2	ST; QL (30 per fill)
<i>glimepiride</i>	1	
<i>glipizide</i>	1	
<i>glipizide-metformin</i>	1	
GLUCOTROL XL	3	
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
<i>glyburide-metformin</i>	1	
GLYXAMBI	2	ST; QL (30 per fill)
JANUMET	2	ST; QL (60 per fill)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG	2	ST; QL (30 per fill)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 50-1,000 MG, 50-500 MG	2	ST; QL (60 per fill)
JANUVIA	2	ST; QL (30 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
JARDIANCE	2	ST; QL (30 per fill)
<i>metformin oral solution</i>	1	ST
<i>metformin oral tablet</i>	1	
<i>metformin oral tablet extended release 24 hr 500 mg</i>	1	QL (120 per fill)
<i>metformin oral tablet extended release 24 hr 750 mg</i>	1	QL (60 per fill)
<i>metformin oral tablet extended release 24hr 1,000 mg</i>	1	PA; QL (60 per fill)
<i>metformin oral tablet extended release 24hr 500 mg</i>	1	PA; QL (30 per fill)
<i>metformin oral tablet,er gast.retention 24 hr 1,000 mg</i>	1	PA; QL (60 per fill)
<i>metformin oral tablet,er gast.retention 24 hr 500 mg</i>	1	PA; QL (120 per fill)
<i>miglitol</i>	1	
MOUNJARO	2	PA; QL
<i>nateglinide</i>	1	
OSENI	3	ST; QL (30 per fill)
OZEMPIC	2	PA; QL
<i>pioglitazone</i>	1	QL (30 per fill)
<i>pioglitazone-glimepiride</i>	1	QL (30 per fill)
<i>pioglitazone-metformin</i>	1	QL (90 per fill)
PRECOSE	3	
<i>repaglinide</i>	1	
RIOMET	3	ST
RYBELSUS	2	PA; QL
<i>saxagliptin</i>	1	ST; QL (30 per fill)
<i>saxagliptin-metformin oral tablet, er multiphase 24 hr 2.5-1,000 mg</i>	1	ST; QL (60 per fill)
<i>saxagliptin-metformin oral tablet, er multiphase 24 hr 5-1,000 mg, 5-500 mg</i>	1	ST; QL (30 per fill)
SEGLUROMET	2	ST; QL (60 per fill)
STEGLATRO	2	ST; QL (30 per fill)
SYMLINPEN 120	2	ST; QL (21.6 per fill)
SYMLINPEN 60	2	ST; QL (9 per fill)
SYNJARDY	2	ST; QL (60 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 25-1,000 MG	2	ST; QL (30 per fill)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-1,000 MG, 5-1,000 MG	2	ST; QL (60 per fill)
TRIJARDY XR	2	ST
TRULICITY	2	PA; QL
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG, 5- 500 MG	2	ST; QL (30 per fill)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG, 5-1,000 MG	2	ST; QL (60 per fill)
THYROID HORMONES		
<i>adthyza</i>	1	
ARMOUR THYROID	2	
ERMEZA	3	ST
<i>euthyrox</i>	1	
<i>levo-t</i>	1	
<i>levothyroxine</i>	1	
<i>levoxyl</i>	1	
<i>liothyronine</i>	1	
<i>niva thyroid</i>	1	
<i>np thyroid</i>	1	
<i>thyroid (pork)</i>	1	
<i>unithroid</i>	1	
GASTROENTEROLOGY		
ANTIDIARRHEALS & ANTISPASMODICS		
<i>anaspaz</i>	1	
<i>belladonna alkaloids-opium</i>	1	QL
<i>chlordiazepoxide-clidinium</i>	1	
<i>dicyclomine</i>	1	
<i>diphenoxylate-atropine</i>	1	
DONNATAL	3	
<i>ed-spaz</i>	1	
GLYCATE	3	
<i>glycopyrrolate</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>hyoscyamine sulfate</i>	1	
<i>hyosyne</i>	1	
LEVBIID	3	
LEVSIN	3	
LEVSIN/SL	3	
LOMOTIL	3	
<i>loperamide</i>	1	
<i>methscopolamine</i>	1	
MOTOFEN	3	
NULEV	3	
<i>opium tincture</i>	1	
<i>oscimin</i>	1	
<i>oscimin sl</i>	1	
<i>phenobarb-hyoscy-atropine-scop</i>	1	
<i>phenohydro</i>	1	
ROBINUL	3	
ROBINUL FORTE	3	
SYMAX DUOTAB	3	
<i>symax fastabs</i>	1	
<i>symax-sl</i>	1	
<i>symax-sr</i>	1	
MISCELLANEOUS AGENTS		
AURYXIA	3	
<i>lanthanum</i>	1	QL (90 per fill)
LOKELMA	2	QL (30 per fill)
RENVELA ORAL POWDER IN PACKET 0.8 GRAM	3	QL (180 per fill)
RENVELA ORAL POWDER IN PACKET 2.4 GRAM	3	QL (90 per fill)
RENVELA ORAL TABLET	3	QL (270 per fill)
<i>sevelamer carbonate oral powder in packet 0.8 gram</i>	1	QL (180 per fill)
<i>sevelamer carbonate oral powder in packet 2.4 gram</i>	1	QL (90 per fill)
<i>sevelamer carbonate oral tablet</i>	1	QL (270 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>sevelamer hcl oral tablet 400 mg</i>	1	QL (450 per fill)
<i>sevelamer hcl oral tablet 800 mg</i>	1	QL (270 per fill)
<i>sodium polystyrene sulfonate</i>	1	
<i>sps (with sorbitol)</i>	1	
VELPHORO	2	QL (120 per fill)
VELTASSA	2	QL (30 per fill)
MISCELLANEOUS GASTROINTESTINAL AGENTS		
<i>alosetron</i>	1	
ANA-LEX KIT	3	
ANALPRAM-HC RECTAL CREAM 1-1 %	3	
ANALPRAM-HC RECTAL CREAM 2.5-1 %	3	ST
<i>anucort-hc</i>	1	
<i>aprepitant oral capsule 125 mg, 40 mg</i>	1	QL (1 per fill)
<i>aprepitant oral capsule 80 mg</i>	1	QL (2 per fill)
<i>aprepitant oral capsule, dose pack</i>	1	QL (3 per fill)
APRISO	3	
AZULFIDINE	3	
AZULFIDINE EN-TABS	3	
<i>balsalazide</i>	1	
<i>betaine</i>	1	PA; S
<i>budesonide</i>	1	
BYLVAY ORAL CAPSULE 1,200 MCG	3	PA; QL (60 per fill); S; MS
BYLVAY ORAL CAPSULE 400 MCG	3	PA; QL (150 per fill); S; MS
BYLVAY ORAL PELLETT 200 MCG	3	PA; QL (120 per fill); S; MS
BYLVAY ORAL PELLETT 600 MCG	3	PA; QL (30 per fill); S; MS
CHENODAL	2	PA; S
CHOLBAM ORAL CAPSULE 250 MG	2	PA; S
CHOLBAM ORAL CAPSULE 50 MG	2	PA; QL (120 per fill); S
<i>citrate of magnesia</i>	1	ACA
<i>citroma</i>	1	ACA
<i>clearlax</i>	1	ACA
COLAZAL	3	
COMPAZINE	3	
<i>compro</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>constulose</i>	1	
CORTENEMA	3	
CREON	2	
<i>cromolyn</i>	1	
DICLEGIS	3	QL
<i>doxylamine-pyridoxine (vit b6)</i>	1	QL
<i>dronabinol</i>	1	PA
<i>dulcolax (magnesium hydroxide)</i>	1	ACA
<i>enulose</i>	1	
GASTROCROM	3	
GATTEX 30-VIAL	3	S; MS
<i>gavilax</i>	1	ACA
<i>gavilyte-c</i>	1	ACA
<i>gavilyte-g</i>	1	ACA
<i>gavilyte-n</i>	1	ACA
<i>generlac</i>	1	
<i>gentle laxative (bisacodyl)</i>	1	ACA
<i>gentle laxative (mag hydrox)</i>	1	ACA
<i>gentlelax</i>	1	ACA
GOLYTELY	3	
<i>granisetron hcl</i>	1	QL (6 per fill)
<i>hemmorex-hc</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone acetate</i>	1	
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	1	ST
<i>hydrocort-pramoxine 2.5-1% crm</i>	1	ST
KRISTALOSE	3	
<i>lactulose oral packet</i>	1	PA
<i>lactulose oral solution</i>	1	
<i>laxative (bisacodyl)</i>	1	ACA
<i>laxative peg 3350</i>	1	ACA
<i>lidocaine hcl-hydrocortison ac rectal cream</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL	3	
<i>lidocaine hcl-hydrocortison ac rectal kit</i>	1	
<i>lidocaine-hydrocortisone-aloe</i>	1	
LINZESS	2	QL (30 per fill)
LIVMARLI	3	PA; S
<i>lubiprostone</i>	1	QL (60 per fill)
<i>magnesium citrate</i>	1	ACA
MARINOL	3	PA
<i>meclizine</i>	1	
<i>mesalamine</i>	1	
<i>mesalamine with cleansing wipe</i>	1	
<i>metoclopramide hcl</i>	1	
<i>milk of magnesia</i>	1	ACA
<i>milk of magnesia concentrated</i>	1	ACA
MOVANTIK	2	QL (30 per fill)
<i>natura-lax</i>	1	ACA
<i>nitroglycerin</i>	1	
OCALIVA	2	PA; QL (30 per fill); S; MS
OMVOH	2	PA; S; MS
OMVOH PEN	2	PA; S; MS; QL
<i>ondansetron</i>	1	QL (9 per fill)
<i>ondansetron hcl oral solution</i>	1	QL (100 per fill)
<i>ondansetron hcl oral tablet</i>	1	QL (9 per fill)
<i>onelax magnesium citrate</i>	1	ACA
<i>oral saline laxative</i>	1	ACA
PANCREAZE	2	
<i>peg 3350-electrolytes</i>	1	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	1	ACA
<i>peg-electrolyte soln</i>	1	ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	2	
PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG	3	
<i>phosphate laxative</i>	1	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>polyethylene glycol 3350</i>	1	ACA
<i>powderlax</i>	1	ACA
<i>prochlorperazine</i>	1	
<i>prochlorperazine maleate</i>	1	
PROCORT	3	
PROCTOCORT	3	ST
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
<i>purelax</i>	1	ACA
RECTIV	2	
REGLAN	3	
RELISTOR	2	ST
ROWASA	3	
SANCUSO	3	QL (1 per fill)
<i>scopolamine base</i>	1	
SFROWASA	3	
SKYRIZI	2	PA; S; MS; QL
<i>smoothlax</i>	1	ACA
<i>sodium,potassium,mag sulfates</i>	1	ACA
SUCRAID	2	S
<i>sulfasalazine</i>	1	
SYMPROIC	2	
SYNDROS	3	PA
<i>trimethobenzamide</i>	1	
TRULANCE	2	
UCERIS ORAL	3	
UCERIS RECTAL	2	
URSO FORTE	3	
<i>ursodiol</i>	1	
VARUBI	2	QL (2 per fill)
VIBERZI	2	
VIKACE	2	
VOWST	3	S

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>women's gentle laxative(bisac)</i>	1	ACA
ZENPEP	2	
ZYMFENTRA	2	PA; ST; S; MS; QL
ULCER THERAPY		
<i>amoxicil-clarithromy-lansopraz</i>	1	QL (112 per fill)
<i>bismuth subcit k-metronidz-tcn</i>	1	
<i>cimetidine</i>	1	
<i>cimetidine hcl</i>	1	
CYTOTEC	3	
<i>dexlansoprazole oral capsule,biphase delayed releas 30 mg</i>	1	ST; QL (30 per fill)
<i>dexlansoprazole oral capsule,biphase delayed releas 60 mg</i>	1	ST
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec)</i>	1	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	1	ST; QL (30 per fill)
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	1	ST
<i>famotidine</i>	1	
<i>lansoprazole oral capsule,delayed release(dr/ec) 15 mg</i>	1	QL (30 per fill)
<i>lansoprazole oral capsule,delayed release(dr/ec) 30 mg</i>	1	
<i>lansoprazole oral tablet,disintegrat, delay rel 15 mg</i>	1	ST; QL (30 per fill)
<i>lansoprazole oral tablet,disintegrat, delay rel 30 mg</i>	1	ST
<i>misoprostol</i>	1	
<i>nizatidine</i>	1	
OMECLAMOX-PAK	3	QL (80 per fill)
<i>omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg</i>	1	QL (30 per fill)
<i>omeprazole oral capsule,delayed release(dr/ec) 40 mg</i>	1	
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i>	1	PA; QL (30 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	1	PA
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i>	1	PA; QL (30 per fill)
<i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i>	1	PA
<i>pantoprazole oral granules dr for susp in packet</i>	1	ST
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1	QL (30 per fill)
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	1	
PEPCID	3	
<i>rabeprazole</i>	1	
<i>sucralfate</i>	1	
TALICIA	2	QL (168 per fill)
VOQUEZNA	3	ST
VOQUEZNA DUAL PAK	3	
VOQUEZNA TRIPLE PAK	3	

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

ANTIVIRALS

<i>ribavirin</i>	1	ST; S; MS
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BIOTECHNOLOGY DRUGS

ARCALYST	3	PA; S; QL
FULPHILA	2	PA; S; MS; QL
LEUKINE	2	S; MS
MOZOBIL	3	S; MS
NIVESTYM	2	PA; S; MS
<i>plerixafor</i>	1	S; MS
PROCRIT	2	PA; S; MS
RETACRIT	2	PA; S; MS
XOLREMDI	3	PA; S
ZIEXTENZO	2	PA; S; MS; QL

GROWTH HORMONES

EGRIFTA SV	2	PA; S; MS
GENOTROPIN	2	PA; S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
GENOTROPIN MINIQUICK	2	PA; S; MS
NGENLA	2	PA; S; MS
OMNITROPE	2	PA; S; MS
SEROSTIM	2	PA; S; MS
INTERFERONS		
ACTIMMUNE	2	S; MS
ALFERON N	2	
PEGASYS	2	S; MS; QL
MULTIPLE SCLEROSIS AGENTS		
AVONEX	2	PA; S; MS; QL
BAFIERTAM	2	PA; QL (120 per fill); S; MS
BETASERON	2	PA; S; MS; QL
<i>dimethyl fumarate</i>	1	PA; QL (60 per fill); S; MS
<i>fingolimod</i>	1	PA; QL (30 per fill); S; MS
<i>glatiramer</i>	1	PA; S; MS; QL
<i>glatopa</i>	1	PA; S; MS; QL
KESIMPTA PEN	2	PA; S; MS; QL
MAVENCLAD (10 TABLET PACK)	3	PA; S; MS; QL
MAVENCLAD (4 TABLET PACK)	3	PA; S; MS; QL
MAVENCLAD (5 TABLET PACK)	3	PA; S; MS; QL
MAVENCLAD (6 TABLET PACK)	3	PA; S; MS; QL
MAVENCLAD (7 TABLET PACK)	3	PA; S; MS; QL
MAVENCLAD (8 TABLET PACK)	3	PA; S; MS; QL
MAVENCLAD (9 TABLET PACK)	3	PA; S; MS; QL
MAYZENT	2	PA; QL (30 per fill); S; MS
MAYZENT STARTER(FOR 1MG MAINT)	2	PA; QL (7 per fill); S; MS
MAYZENT STARTER(FOR 2MG MAINT)	2	PA; QL (12 per fill); S; MS
PLEGRIDY	2	PA; S; MS; QL
PONVORY	2	PA; S; MS; QL
PONVORY 14-DAY STARTER PACK	2	PA; S; MS; QL
REBIF (WITH ALBUMIN)	2	PA; S; MS; QL
REBIF REBIDOSE	2	PA; S; MS; QL
REBIF TITRATION PACK	2	PA; S; MS; QL
<i>teriflunomide</i>	1	PA; QL (30 per fill); S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
VUMERITY	2	PA; QL (120 per fill); S; MS
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO (PF)	2	ACA
ACAM2000 (NATIONAL STOCKPILE)	2	
ACTHIB (PF)	2	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	2	ACA
AFLURIA TRIV 2024-2025	2	ACA
AFLURIA TRIV 2024-2025 (PF)	2	ACA
AREXVY (PF)	2	ACA
BEXSERO	2	ACA
BIOTHRAX	2	ACA
BOOSTRIX TDAP	2	ACA
CAPVAXIVE	2	ACA
COMIRNATY 2024-25 (12Y UP)(PF)	2	ACA
DAPTACEL (DTAP PEDIATRIC) (PF)	2	ACA
DENGVAXIA (PF)	2	ACA
ENGERIX-B (PF)	2	ACA
ENGERIX-B PEDIATRIC (PF)	2	ACA
FLUAD TRIV 2024-25(65Y UP)(PF)	2	ACA
FLUARIX TRIV 2024-2025 (PF)	2	ACA
FLUBLOK TRIV 2024-2025 (PF)	2	ACA
FLUCELVAX TRIV 2024-2025	2	ACA
FLUCELVAX TRIV 2024-2025 (PF)	2	ACA
FLULAVAL TRIV 2024-2025 (PF)	2	ACA
FLUMIST TRIVALENT 2024-2025	2	ACA
FLUZONE HIGH-DOSE TRIV 24-25	2	ACA
FLUZONE TRIV 2024-2025	2	ACA
FLUZONE TRIV 2024-2025 (PF)	2	ACA
GAMMAGARD LIQUID	2	PA; S; MS
GAMMAGARD S-D (IGA < 1 MCG/ML)	2	PA; S; MS
GAMUNEX-C	2	PA; S; MS
GARDASIL 9 (PF)	2	ACA
GRASTEK	2	PA
HAVRIX (PF)	2	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
HEPLISAV-B (PF)	2	ACA
HIBERIX (PF)	2	ACA
HIZENTRA	3	PA; S; MS
IMOVAX RABIES VACCINE (PF)	2	ACA
INFANRIX (DTAP) (PF)	2	ACA
IPOL	2	ACA
IXCHIQ (PF)	2	
IXIARO (PF)	2	ACA
JYNNEOS (PF)	2	
KINRIX (PF)	2	ACA
MENQUADFI (PF)	2	ACA
MENVEO A-C-Y-W-135-DIP (PF)	2	ACA
M-M-R II (PF)	2	ACA
MODERNA COVID 24-25(6M-11Y)PF	2	ACA
MRESVIA (PF)	2	ACA
NOVAVAX COVID 2024-25(PF)(EUA)	2	ACA
ODACTRA	2	PA
ORALAIR	2	PA; S
PEDIARIX (PF)	2	ACA
PEDVAX HIB (PF)	2	ACA
PENBRAYA (PF)	2	ACA
PENTACEL (PF)	2	ACA
PFIZER COVID 2024-25(5Y-11Y)PF	2	ACA
PFIZER COVID 2024-25(6MO-4Y)PF	2	ACA
PNEUMOVAX-23	2	ACA
PREHEVBRIO (PF)	2	ACA
PREVNAR 20 (PF)	2	ACA
PRIORIX (PF)	2	ACA
PRIVIGEN	3	PA; S; MS
PROQUAD (PF)	2	ACA
QUADRACEL (PF)	2	ACA
RABAVERT (PF)	2	ACA
RAGWITEK	2	PA
RECOMBIVAX HB (PF)	2	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ROTARIX	2	ACA
ROTATEQ VACCINE	2	ACA
SHINGRIX (PF)	2	ACA
SPIKEVAX 2024-2025(12Y UP)(PF)	2	ACA
STAMARIL (PF)	2	ACA
TDVAX	2	ACA
TENIVAC (PF)	2	ACA
TICOVAC	2	ACA
TRUMENBA	2	ACA
TWINRIX (PF)	2	ACA
TYPHIM VI	2	ACA
VAQTA (PF)	2	ACA
VARIVAX (PF)	2	ACA
VAXCHORA VACCINE	2	ACA
VAXELIS (PF)	2	ACA
VAXNEUVANCE (PF)	2	ACA
VIVOTIF	2	ACA
YF-VAX (PF)	2	ACA

IMMUNOLOGY

INTERLEUKINS

imiquimod

1

MUSCULOSKELETAL & RHEUMATOLOGY

GOUT THERAPY

allopurinol

1

colchicine oral capsule

1

ST

colchicine oral tablet

1

febuxostat

1

ST

GLOPERBA

3

MITIGARE

2

ST

probenecid

1

probenecid-colchicine

1

ZYLOPRIM

3

OSTEOPOROSIS THERAPY

ACTONEL

3

ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>alendronate oral solution</i>	1	QL
<i>alendronate oral tablet 10 mg, 5 mg</i>	1	QL (30 per fill)
<i>alendronate oral tablet 35 mg, 70 mg</i>	1	QL
ATELVIA	3	ST; QL
BINOSTO	3	ST; QL
EVISTA	3	
FORTEO	2	PA; S; MS; QL
FOSAMAX	3	ST; QL
FOSAMAX PLUS D	3	ST; QL
<i>ibandronate</i>	1	QL
<i>raloxifene</i>	1	ACA
<i>risedronate oral tablet 150 mg, 35 mg</i>	1	QL
<i>risedronate oral tablet 5 mg</i>	1	QL (30 per fill)
<i>risedronate oral tablet, delayed release (dr/ec)</i>	1	QL
<i>risedronate sodium 35 mg tab f/c, once-a-week</i>	1	QL
<i>risedronate sodium 35 mg tablet f/c, once-a-week</i>	1	QL
<i>teriparatide subcutaneous pen injector 20 mcg/dose (600mcg/2.4ml)</i>	1	PA; S; MS; QL
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	3	PA; S; QL
TYMLOS	2	PA; QL (1 per fill); S; MS
OTHER RHEUMATOLOGICALS		
ACTEMRA	2	PA; S; MS; QL
ACTEMRA ACTPEN	2	PA; S; MS; QL
ADALIMUMAB-ADAZ	2	PA; S; MS; QL
ADALIMUMAB-ADBIM	2	PA; S; MS; QL
ADALIMUMAB-ADBIM(CF) PEN CROHNS	2	PA; S; MS; QL
ADALIMUMAB-ADBIM(CF) PEN PS-UV	2	PA; S; MS; QL
ADALIMUMAB-RYVK	2	PA; S; QL
ARAVA	3	QL (30 per fill)
BENLYSTA INTRAVENOUS	2	PA; S; MS
BENLYSTA SUBCUTANEOUS	2	PA; S; MS; QL
CYLTEZO(CF)	2	PA; S; MS; QL
CYLTEZO(CF) PEN	2	PA; S; MS; QL
CYLTEZO(CF) PEN CROHN'S-UC-HS	2	PA; S; MS; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
CYLTEZO(CF) PEN PSORIASIS-UV	2	PA; S; MS; QL
DEPEN TITRATABS	3	PA
ENBREL	2	PA; S; MS; QL
ENBREL MINI	2	PA; S; MS; QL
ENBREL SURECLICK	2	PA; S; MS; QL
HUMIRA (ONLY NDCS STARTING WITH 00074)	2	PA; S; MS; QL
HUMIRA PEN (ONLY NDCS STARTING WITH 00074)	2	PA; S; MS; QL
HUMIRA(CF) (ONLY NDCS STARTING WITH 00074)	2	PA; S; MS; QL
HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074)	2	PA; S; MS; QL
HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074)	2	PA; S; MS; QL
HUMIRA(CF) PEN PEDIATRIC UC (ONLY NDCS STARTING WITH 00074)	2	PA; S; MS; QL
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ONLY NDCS STARTING WITH 00074)	2	PA; S; MS; QL
HYRIMOZ PEN CROHN'S-UC STARTER	2	PA; S; MS; QL
HYRIMOZ PEN PSORIASIS STARTER	2	PA; S; MS; QL
HYRIMOZ(CF)	2	PA; S; MS; QL
HYRIMOZ(CF) PEDI CROHN STARTER	2	PA; S; MS; QL
HYRIMOZ(CF) PEN	2	PA; S; MS; QL
<i>leflunomide</i>	1	QL (30 per fill)
OTEZLA ORAL TABLET 20 MG	2	PA; S; MS
OTEZLA ORAL TABLET 30 MG	2	PA; S; MS; QL
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51)	2	PA; S; MS
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	2	PA; S; MS; QL
<i>penicillamine</i>	1	PA
RASUVO (PF)	2	ST
RIDAURA	2	
RINVOQ	2	PA; S; MS; QL
RINVOQ LQ	2	PA; S; MS; QL
SAVELLA ORAL TABLET	2	ST; QL (60 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SAVELLA ORAL TABLETS,DOSE PACK	2	ST; QL (55 per fill)
SIMLANDI(CF) AUTOINJECTOR	2	PA; S; MS; QL
SIMPONI	2	PA; S; MS; QL
TYENNE	2	PA; S
TYENNE AUTOINJECTOR	2	PA; S
XELJANZ ORAL SOLUTION	2	PA; QL (480 per fill); S; MS
XELJANZ ORAL TABLET	2	PA; QL (60 per fill); S; MS
XELJANZ XR	2	PA; QL (30 per fill); S; MS

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES

CAYA CONTOURED	2	ACA
DUREX AVANTI BARE REAL FEEL	3	ACA
DUREX TROPICAL CONDOM	3	ACA
FC2 FEMALE CONDOM	2	ACA
FEMCAP	2	ACA
KYLEENA	2	S; ACA
LILETTA	3	S; MS; ACA
MIRENA	2	S; ACA
PARAGARD T 380A	2	S; ACA
SKYLA	2	S; ACA
TRUSTEX-RIA NON-LUB CONDOMS	2	ACA
WIDE-SEAL DIAPHRAGM	3	ACA

ESTROGENS & PROGESTINS

ACTIVELLA	3	
ANGELIQ	3	
<i>camila</i>	1	ACA
CLIMARA	3	QL
COMBIPATCH	2	
<i>covaryx</i>	1	
<i>covaryx h.s.</i>	1	
CRINONE	2	S; MS
<i>deblitane</i>	1	ACA
DELESTROGEN	3	
DEPO-ESTRADIOL	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
DEPO-PROVERA	3	ACA; QL
DEPO-SUBQ PROVERA 104	3	ACA; QL
<i>dotti</i>	1	QL
DUAVEE	2	
<i>eemt</i>	1	
<i>eemt hs</i>	1	
<i>emzahh</i>	1	ACA
<i>errin</i>	1	ACA
ESTRACE	3	
<i>estradiol oral</i>	1	
<i>estradiol transdermal gel in metered-dose pump</i>	1	QL (50 per fill)
<i>estradiol transdermal gel in packet</i>	1	QL (30 per fill)
<i>estradiol transdermal patch semiweekly</i>	1	QL
<i>estradiol transdermal patch weekly</i>	1	QL
<i>estradiol vaginal</i>	1	
<i>estradiol valerate</i>	1	
<i>estradiol-norethindrone acet</i>	1	
ESTRATEST F.S.	3	
<i>estrogens-methyltestosterone</i>	1	
EVAMIST	3	QL (17 per fill)
<i>fyavolv</i>	1	
<i>gallifrey</i>	1	
<i>heather</i>	1	ACA
<i>incassia</i>	1	ACA
<i>jencycla</i>	1	ACA
<i>jinteli</i>	1	
<i>lyleq</i>	1	ACA
<i>lyllana</i>	1	QL
<i>lyza</i>	1	ACA
<i>medroxyprogesterone intramuscular</i>	1	ACA; QL
<i>medroxyprogesterone oral</i>	1	
MENOSTAR	3	QL
<i>mimvey</i>	1	
<i>nora-be</i>	1	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>norethindrone (contraceptive)</i>	1	ACA
<i>norethindrone acetate</i>	1	
<i>norethindrone ac-eth estradiol</i>	1	
OPILL	2	ACA
PREMARIN	2	
<i>progesterone</i>	1	S; MS
<i>progesterone micronized</i>	1	
PROMETRIUM	3	
PROVERA	3	
<i>sharobel</i>	1	ACA
<i>tulana</i>	1	ACA
<i>yuvafem</i>	1	
MISCELLANEOUS OB/GYN		
ANNOVERA	3	ST; ACA; QL
CERVIDIL	3	
CLEOCIN	3	
<i>clindamycin phosphate</i>	1	
CLINDESSE	3	
<i>eluryng</i>	1	ACA
<i>enilloring</i>	1	ACA
<i>etonogestrel-ethinyl estradiol</i>	1	ACA
<i>fem ph</i>	1	
GYNAZOLE-1	3	
<i>haloette</i>	1	ACA
<i>metronidazole</i>	1	
<i>miconazole-3</i>	1	
MIFEPREX	3	
<i>mifepristone</i>	1	
MYFEMBREE	2	PA
NEXPLANON	2	S; MS; ACA
<i>norelgestromin-ethin.estradiol</i>	1	ACA
NUVESSA	3	
ORIAHNN	2	PA
PREPIDIL	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
RELAGARD	3	
<i>terconazole</i>	1	
<i>tranexamic acid</i>	1	
TRIMO-SAN JELLY	2	
<i>vandazole</i>	1	
VCF CONTRACEPTIVE FILM	2	ACA
VCF CONTRACEPTIVE GEL	2	ACA
VEOZAH	3	
XACIATO	2	
<i>xulane</i>	1	ACA
<i>zafemy</i>	1	ACA
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle</i>	1	ACA
<i>after pill</i>	1	QL (1 per fill); ACA
AFTERA	3	QL (1 per fill); ACA
<i>altavera (28)</i>	1	ACA
<i>alyacen 1/35 (28)</i>	1	ACA
<i>alyacen 7/7/7 (28)</i>	1	ACA
<i>amethia</i>	1	ACA
<i>amethyst (28)</i>	1	ACA
<i>apri</i>	1	ACA
<i>aranelle (28)</i>	1	ACA
<i>ashlyna</i>	1	ACA
<i>aubra</i>	1	ACA
<i>aubra eq</i>	1	ACA
<i>aurovela 1.5/30 (21)</i>	1	ACA
<i>aurovela 1/20 (21)</i>	1	ACA
<i>aurovela 24 fe</i>	1	ACA
<i>aurovela fe 1.5/30 (28)</i>	1	ACA
<i>aurovela fe 1-20 (28)</i>	1	ACA
<i>aviane</i>	1	ACA
<i>ayuna</i>	1	ACA
<i>azurette (28)</i>	1	ACA
<i>balziva (28)</i>	1	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
BEYAZ	3	ST; ACA
<i>blisovi 24 fe</i>	1	ACA
<i>blisovi fe 1.5/30 (28)</i>	1	ACA
<i>blisovi fe 1/20 (28)</i>	1	ACA
<i>briellyn</i>	1	ACA
<i>camrese</i>	1	ACA
<i>camrese lo</i>	1	ACA
<i>caziant (28)</i>	1	ACA
<i>charlotte 24 fe</i>	1	ACA
<i>chateal (28)</i>	1	ACA
<i>chateal eq (28)</i>	1	ACA
<i>cryselle (28)</i>	1	ACA
<i>curae</i>	1	QL (1 per fill); ACA
<i>cyred</i>	1	ACA
<i>cyred eq</i>	1	ACA
<i>dasetta 1/35 (28)</i>	1	ACA
<i>dasetta 7/7/7 (28)</i>	1	ACA
<i>daysee</i>	1	ACA
<i>desog-e.estradiol/e.estradiol</i>	1	ACA
<i>dolishale</i>	1	ACA
<i>drospirenone-e.estradiol-lm.fa</i>	1	ACA
<i>drospirenone-ethinyl estradiol</i>	1	ACA
<i>econtra ez</i>	1	QL (1 per fill); ACA
<i>econtra one-step</i>	1	QL (1 per fill); ACA
<i>elinest</i>	1	ACA
ELLA	2	QL (1 per fill); ACA
<i>enpresse</i>	1	ACA
<i>enskyce</i>	1	ACA
<i>estarylla</i>	1	ACA
<i>ethynodiol diac-eth estradiol</i>	1	ACA
<i>falmina (28)</i>	1	ACA
<i>finzala</i>	1	ACA
<i>gemmily</i>	1	ACA
<i>hailey</i>	1	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>hailey 24 fe</i>	1	ACA
<i>hailey fe 1.5/30 (28)</i>	1	ACA
<i>hailey fe 1/20 (28)</i>	1	ACA
<i>her style</i>	1	QL (1 per fill); ACA
<i>iclevia</i>	1	ACA
<i>isibloom</i>	1	ACA
<i>jaimiess</i>	1	ACA
<i>jasmiel (28)</i>	1	ACA
<i>jolessa</i>	1	ACA
<i>joyeaux</i>	1	ACA
<i>juleber</i>	1	ACA
<i>junel 1.5/30 (21)</i>	1	ACA
<i>junel 1/20 (21)</i>	1	ACA
<i>junel fe 1.5/30 (28)</i>	1	ACA
<i>junel fe 1/20 (28)</i>	1	ACA
<i>junel fe 24</i>	1	ACA
<i>kaitlib fe</i>	1	ACA
<i>kalliga</i>	1	ACA
<i>kariva (28)</i>	1	ACA
<i>kelnor 1/35 (28)</i>	1	ACA
<i>kelnor 1/50 (28)</i>	1	ACA
<i>kurvelo (28)</i>	1	ACA
<i>l norgest/e.estradiol-e.estradiol</i>	1	ACA
<i>larin 1.5/30 (21)</i>	1	ACA
<i>larin 1/20 (21)</i>	1	ACA
<i>larin 24 fe</i>	1	ACA
<i>larin fe 1.5/30 (28)</i>	1	ACA
<i>larin fe 1/20 (28)</i>	1	ACA
<i>layolis fe</i>	1	ACA
<i>leena 28</i>	1	ACA
<i>lessina</i>	1	ACA
<i>levonest (28)</i>	1	ACA
<i>levonorgest-eth.estradiol-iron</i>	1	ACA
<i>levonorgestrel</i>	1	QL (1 per fill); ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>levonorgestrel-ethinyl estrad</i>	1	ACA
<i>levonorg-eth estrad triphasic</i>	1	ACA
<i>levora-28</i>	1	ACA
<i>lojaimiess</i>	1	ACA
<i>loryna (28)</i>	1	ACA
<i>low-ogestrel (28)</i>	1	ACA
<i>lo-zumandimine (28)</i>	1	ACA
<i>lutra (28)</i>	1	ACA
<i>marlissa (28)</i>	1	ACA
<i>merzee</i>	1	ACA
<i>mibelas 24 fe</i>	1	ACA
<i>microgestin 1.5/30 (21)</i>	1	ACA
<i>microgestin 1/20 (21)</i>	1	ACA
<i>microgestin fe 1.5/30 (28)</i>	1	ACA
<i>microgestin fe 1/20 (28)</i>	1	ACA
<i>mili</i>	1	ACA
<i>mono-linyah</i>	1	ACA
<i>my choice</i>	1	QL (1 per fill); ACA
<i>my way</i>	1	QL (1 per fill); ACA
<i>necon 0.5/35 (28)</i>	1	ACA
<i>new day</i>	1	QL (1 per fill); ACA
<i>nikki (28)</i>	1	ACA
<i>noreth-ethinyl estradiol-iron</i>	1	ACA
<i>norethindrone ac-eth estradiol</i>	1	ACA
<i>norethindrone-e.estradiol-iron</i>	1	ACA
<i>norgestimate-ethinyl estradiol</i>	1	ACA
<i>nortrel 0.5/35 (28)</i>	1	ACA
<i>nortrel 1/35 (21)</i>	1	ACA
<i>nortrel 1/35 (28)</i>	1	ACA
<i>nortrel 7/7/7 (28)</i>	1	ACA
<i>nylia 1/35 (28)</i>	1	ACA
<i>nylia 7/7/7 (28)</i>	1	ACA
<i>ocella</i>	1	ACA
<i>opcicon one-step</i>	1	QL (1 per fill); ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>option-2</i>	1	QL (1 per fill); ACA
<i>philith</i>	1	ACA
<i>pimtreea (28)</i>	1	ACA
PLAN B ONE-STEP	2	QL (1 per fill); ACA
<i>portia 28</i>	1	ACA
<i>reclipsen (28)</i>	1	ACA
<i>rivelsa</i>	1	ACA
<i>setlakin</i>	1	ACA
<i>simliya (28)</i>	1	ACA
<i>simpesse</i>	1	ACA
<i>sprintec (28)</i>	1	ACA
<i>sronyx</i>	1	ACA
<i>syeda</i>	1	ACA
TAKE ACTION	3	QL (1 per fill); ACA
<i>tarina 24 fe</i>	1	ACA
<i>tarina fe 1/20 (28)</i>	1	ACA
<i>tilia fe</i>	1	ACA
<i>tri-estarylla</i>	1	ACA
<i>tri-legest fe</i>	1	ACA
<i>tri-linyah</i>	1	ACA
<i>tri-lo-estarylla</i>	1	ACA
<i>tri-lo-marzia</i>	1	ACA
<i>tri-lo-mili</i>	1	ACA
<i>tri-lo-sprintec</i>	1	ACA
<i>tri-mili</i>	1	ACA
<i>tri-sprintec (28)</i>	1	ACA
<i>trivora (28)</i>	1	ACA
<i>tri-vylibra</i>	1	ACA
<i>tri-vylibra lo</i>	1	ACA
<i>turqoz (28)</i>	1	ACA
<i>tydemy</i>	1	ACA
<i>velivet triphasic regimen (28)</i>	1	ACA
<i>vestura (28)</i>	1	ACA
<i>vienva</i>	1	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>viorele (28)</i>	1	ACA
<i>volnea (28)</i>	1	ACA
<i>vyfemla (28)</i>	1	ACA
<i>vylibra</i>	1	ACA
<i>wera (28)</i>	1	ACA
<i>wymzya fe</i>	1	ACA
YAZ (28)	3	ST; ACA
<i>zarah</i>	1	ACA
<i>zovia 1-35 (28)</i>	1	ACA
<i>zumandimine (28)</i>	1	ACA

OXYTOCICS

<i>methylergonovine</i>	1	QL (240 per fill)
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OPHTHALMOLOGY

ANTIBIOTICS

AZASITE	2	
<i>bacitracin</i>	1	
<i>bacitracin-polymyxin b</i>	1	
BETADINE OPHTHALMIC PREP	3	
<i>ciprofloxacin hcl</i>	1	
<i>erythromycin</i>	1	
<i>gatifloxacin</i>	1	
<i>gentamicin</i>	1	
<i>levofloxacin</i>	1	
<i>moxifloxacin</i>	1	
NATACYN	2	
<i>neomycin-bacitracin-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>neo-polycin</i>	1	
OCUFLOX	3	
<i>ofloxacin</i>	1	
<i>polycin</i>	1	
<i>polymyxin b sulf-trimethoprim</i>	1	
<i>povidone-iodine</i>	1	
<i>tobramycin</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
TOBRAMYCIN-VANCOMYCIN	3	
TOBEX	3	
VIGAMOX	3	
ANTIVIRALS		
<i>trifluridine</i>	1	
ZIRGAN	3	
BETA-BLOCKERS		
<i>betaxolol</i>	1	
BETOPTIC S	3	
<i>carteolol</i>	1	
<i>levobunolol</i>	1	
<i>timolol maleate</i>	1	
<i>timolol maleate (pf)</i>	1	
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE	2	S
CYCLOPLEGIC MYDRIATICS		
ATROPINE OPHTHALMIC (EYE) DROPS 0.01 %, 0.025 %, 0.05 %	3	
<i>atropine ophthalmic (eye) drops 1 %</i>	1	
<i>atropine ophthalmic (eye) ointment</i>	1	
CYCLOGYL	3	
<i>cyclopentolate</i>	1	
<i>cyclopen-tropic-phenyleph-watr</i>	1	
CYCLOPENT-TROPIC-PHEN-KETR-WAT	3	
<i>homatropaire</i>	1	
MYDRIACYL	3	
PHENYLEPH-TROPICAMIDE IN WATER	3	
<i>tropicamide</i>	1	
DIRECT ACTING MIOTICS		
<i>pilocarpine hcl</i>	1	
MISCELLANEOUS OPHTHALMOLOGICS		
AKTEN (PF)	3	
ALCAINE	3	
<i>altacaine</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>azelastine</i>	1	
<i>bepotastine besilate</i>	1	
<i>bimatoprost</i>	1	
CEQUA	3	PA; QL (60 per fill)
<i>cromolyn</i>	1	
<i>cyclosporine</i>	1	PA; QL (60 per fill)
CYCLOSPORINE IN KLARITY	3	
CYSTARAN	2	S
<i>epinastine</i>	1	
<i>fluorescein-proparacaine</i>	1	
KLARITY (CHONDROITIN) (PF)	3	
LATISSE	3	
MIEBO (PF)	2	PA; QL (12 per fill)
MYDRIATIC4(TROP-PROP-PE-KTRLC)	3	
<i>olopatadine</i>	1	
OXERVATE	2	PA; S; MS
PREDNISOLN SP-MOXIFLOX-BROMFEN	3	
PREDNISOLONE ACETATE-BROMFENAC	3	
PREDNISOLONE ACETATE-NEPAFENAC	3	
PREDNISOLONE-MOXIFLO-NEPAFENAC	3	
PREDNISOLONE-MOXIFLOX-BROMFEN	3	
<i>proparacaine</i>	1	
RESTASIS	3	PA; QL (60 per fill)
RESTASIS MULTIDOSE	2	PA; QL (6 per fill)
<i>tetracaine hcl</i>	1	
TETRACAINE HCL (PF)	3	
TYRVAYA	3	PA
VEVYE	3	PA; QL (2 per fill)
XDEMVI	2	QL (10 per fill); S
XIIDRA	2	PA; QL (60 per fill)
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR	3	ST
ACULAR LS	3	ST
<i>bromfenac</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>diclofenac sodium</i>	1	
<i>flurbiprofen sodium</i>	1	
ILEVRO	3	
<i>ketorolac</i>	1	
PROLENSA	3	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide</i>	1	
<i>methazolamide</i>	1	
OTHER GLAUCOMA DRUGS		
<i>bimatoprost</i>	1	ST
BRIMONIDINE-DORZOLAMIDE	3	
BRIMONIDINE-DORZOLAMIDE (PF)	3	
<i>brimonidine-timolol</i>	1	
<i>brinzolamide</i>	1	
COMBIGAN	3	
<i>dorzolamide</i>	1	
DORZOLAMIDE (PF)	3	
<i>dorzolamide-timolol</i>	1	
<i>dorzolamide-timolol (pf)</i>	1	
<i>latanoprost</i>	1	ST
LUMIGAN	3	ST
SIMBRINZA	3	
<i>tafluprost (pf)</i>	1	ST
TIMOLOL-BRIMONIDI-DORZOLAM(PF)	3	
<i>travoprost</i>	1	ST
VYZULTA	3	ST
STEROID-ANTIBIOTIC COMBINATIONS		
MAXITROL	3	
<i>neomycin-bacitracin-poly-hc</i>	1	
<i>neomycin-polymyxin b-dexameth</i>	1	
<i>neomycin-polymyxin-hc</i>	1	
<i>neo-polycin hc</i>	1	
PREDNISOLONE SOD PH-MOXIFLOX	3	
PREDNISOLONE-MOXIFLOXACIN HCL	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
TOBRADEX	3	
<i>tobramycin-dexamethasone</i>	1	
STEROIDS		
<i>dexamethasone sodium phosphate</i>	1	
<i>difluprednate</i>	1	
EYSUVIS	2	PA; QL (8.3 per fill)
<i>fluorometholone</i>	1	
FML LIQUIFILM	3	ST
INVELTYS	3	ST
LOTEMAX OPHTHALMIC (EYE) DROPS,GEL	3	ST
LOTEMAX OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
LOTEMAX OPHTHALMIC (EYE) OINTMENT	3	ST
LOTEMAX SM	3	ST
<i>loteprednol etabonate ophthalmic (eye) drops,gel</i>	1	
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %</i>	1	ST
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %</i>	1	
PRED FORTE	3	
<i>prednisolone acetate</i>	1	
PREDNISOLONE ACETATE (PF)	3	
<i>prednisolone sodium phosphate</i>	1	
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium</i>	1	
SYMPATHOMIMETICS		
ALPHAGAN P	3	
<i>apraclonidine</i>	1	
<i>brimonidine</i>	1	
IOPIDINE	3	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL	3	
<i>phenylephrine hcl</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS		
<i>adrenalin</i>	1	
AUVI-Q	2	QL (2 per fill)
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	1	ST
<i>cetirizine</i>	1	
CLARINEX	3	QL (30 per fill)
<i>clemastine oral syrup</i>	1	PA
<i>clemastine oral tablet</i>	1	
<i>cyproheptadine</i>	1	
<i>desloratadine</i>	1	QL (30 per fill)
<i>dexchlorpheniramine maleate</i>	1	PA
DIPHEN	3	
<i>epinephrine injection auto-injector</i>	1	QL (2 per fill)
<i>epinephrine injection syringe</i>	1	
EPIPEN	2	PA; QL (2 per fill)
EPIPEN JR	2	PA; QL (2 per fill)
<i>hydroxyzine hcl</i>	1	
<i>hydroxyzine pamoate</i>	1	
KARBINAL ER	3	ST
<i>levocetirizine oral solution</i>	1	
<i>levocetirizine oral tablet</i>	1	QL (30 per fill)
<i>promethazine</i>	1	
<i>promethgan</i>	1	
RYCLORA	3	
RYVENT	3	ST
VISTARIL	3	
COUGH & COLD THERAPY		
<i>benzonatate</i>	1	
BROMFED DM	3	
<i>brompheniramine-pseudoeph-dm</i>	1	
CLARINEX-D 12 HOUR	3	QL (60 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>codeine-guaifenesin</i>	1	
CODITUSSIN AC	3	
CODITUSSIN DAC	3	
<i>g tussin ac</i>	1	
HISTEX-AC	3	
HYCODAN (WITH HOMATROPINE)	3	
<i>hydrocodone-chlorpheniramine</i>	1	
<i>hydrocodone-homatropine</i>	1	
<i>hydromet</i>	1	
MAR-COF CG	3	
<i>maxi-tuss ac</i>	1	
MAXI-TUSS CD	3	
NINJACOF-XG	3	
POLY-TUSSIN AC	3	
<i>promethazine vc</i>	1	
<i>promethazine-codeine</i>	1	
<i>promethazine-dm</i>	1	
RESPA-AR	3	
TUXARIN ER	3	
PULMONARY AGENTS		
ACCOLATE	3	
<i>acetylcysteine</i>	1	
ADEMPAS	2	PA; QL (90 per fill); S; MS
ADRENALIN	3	
ADVAIR HFA 115-21 MCG INHALER DOSE COUNTER, 60 INH	2	ST; QL (8 per fill)
ADVAIR HFA 115-21 MCG INHALER DOSE COUNTER,120 INH	2	ST; QL (12 per fill)
ADVAIR HFA 230-21 MCG INHALER DOSE COUNTER, 60 INH	2	ST; QL (8 per fill)
ADVAIR HFA 230-21 MCG INHALER DOSE COUNTER,120 INH	2	ST; QL (12 per fill)
ADVAIR HFA 45-21 MCG INHALER DOSE COUNTER, 60 INH	2	ST; QL (8 per fill)
ADVAIR HFA 45-21 MCG INHALER DOSE COUNTER,120 INH	2	ST; QL (12 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
AIRDUO DIGIHALER	3	ST; QL (1 per fill)
AIRSUPRA	2	
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	QL (17 per fill)
<i>albuterol sulfate inhalation solution for nebulization</i>	1	
<i>albuterol sulfate oral</i>	1	
<i>alyq</i>	1	PA; QL (60 per fill); S
<i>ambrisentan</i>	1	PA; QL (30 per fill); S; MS
ANORO ELLIPTA 62.5-25 MCG INH	2	QL (14 per fill)
ANORO ELLIPTA 62.5-25 MCG INH	2	QL (60 per fill)
<i>arformoterol</i>	1	QL (120 per fill)
ARNUITY ELLIPTA 100 MCG INH	2	QL (1 per fill)
ARNUITY ELLIPTA 200 MCG INH	2	QL (1 per fill)
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION	2	QL (1 per fill)
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 50 MCG/ACTUATION	2	QL (30 per fill)
ASMANEX HFA	2	QL (13 per fill)
ASMANEX TWISTHALER	2	QL (1 per fill)
ATROVENT HFA	3	QL (26 per fill)
<i>azelastine-fluticasone</i>	1	ST; QL (23 per fill)
<i>bosentan</i>	1	PA; QL (60 per fill); S; MS
BREO ELLIPTA 100-25 MCG INHALR	2	ST; QL (28 per fill)
BREO ELLIPTA 100-25 MCG INHALR	2	ST; QL (60 per fill)
BREO ELLIPTA 200-25 MCG INHALR	2	ST; QL (28 per fill)
BREO ELLIPTA 200-25 MCG INHALR	2	ST; QL (60 per fill)
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE	2	ST; QL (60 per fill)
<i>breyana</i>	1	ST; QL (11 per fill)
BREZTRI AEROSPHERE	2	QL (5.9 per fill)
BROVANA	3	QL (120 per fill)
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml</i>	1	QL (120 per fill)
<i>budesonide inhalation suspension for nebulization 1 mg/2 ml</i>	1	QL (60 per fill)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>budesonide-formoterol</i>	1	ST; QL (11 per fill)
CINRYZE	2	PA; S; MS; QL
COMBIVENT RESPIMAT	2	QL (8 per fill)
<i>cromolyn</i>	1	
DULERA 100 MCG-5 MCG INHALER	2	ST; QL (1 per fill)
DULERA 200 MCG-5 MCG INHALER	2	ST; QL (13 per fill)
DULERA 200 MCG-5 MCG INHALER	2	ST; QL (9 per fill)
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION	2	ST; QL (1 per fill)
DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION	2	ST; QL (13 per fill)
DYMISTA	3	ST; QL (23 per fill)
ELIXOPHYLLIN	3	
<i>epinephrine hcl</i>	1	
FASENRA PEN	2	PA; S; MS; QL
<i>flunisolide</i>	1	ST; QL (50 per fill)
<i>fluticasone propionate</i>	1	QL (16 per fill)
<i>fluticasone propion-salmeterol</i>	1	ST; QL (1 per fill)
<i>formoterol fumarate</i>	1	QL (120 per fill)
HAEGARDA	3	PA; S; MS; QL
HYPER-SAL	3	
<i>icatibant</i>	1	PA; S; QL
<i>ipratropium bromide</i>	1	
<i>ipratropium-albuterol</i>	1	QL (540 per fill)
KALYDECO	2	PA; QL (56 per fill); S; MS
<i>levalbuterol hcl</i>	1	
<i>mometasone</i>	1	ST; QL (17 per fill)
<i>montelukast</i>	1	
<i>nebusal inhalation solution for nebulization 3 %</i>	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	3	
NUCALA SUBCUTANEOUS AUTO-INJECTOR	2	PA; S; MS; QL
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	2	PA; S; MS; QL
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	2	PA; S; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
OFEV	2	PA; QL (60 per fill); S; MS
OPSUMIT	2	PA; QL (30 per fill); S; MS
OPSYNVI	2	PA; QL (30 per fill); S; MS
ORKAMBI ORAL GRANULES IN PACKET	2	PA; QL (56 per fill); S; MS
ORKAMBI ORAL TABLET	2	PA; QL (112 per fill); S; MS
ORLADEYO	3	PA; S; QL
<i>pirfenidone oral capsule</i>	1	PA; QL (270 per fill); S; MS
<i>pirfenidone oral tablet 267 mg</i>	1	PA; QL (270 per fill); S; MS
<i>pirfenidone oral tablet 801 mg</i>	1	PA; QL (90 per fill); S; MS
<i>pulmosal</i>	1	
PULMOZYME	2	S; MS
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION	2	QL (11 per fill)
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 80 MCG/ACTUATION	2	QL (22 per fill)
REVATIO	3	PA; QL (90 per fill); S; MS
<i>roflumilast oral tablet 250 mcg</i>	1	PA; QL (30 per fill)
<i>roflumilast oral tablet 500 mcg</i>	1	PA
RUCONEST	2	PA; S; MS; QL
RYALTRIS	3	ST; QL (29 per fill)
<i>sajazir</i>	1	PA; S; MS; QL
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution</i>	1	PA; QL (112 per fill); S; MS
<i>sildenafil (pulm.hypertension) oral tablet</i>	1	PA; QL (90 per fill); S; MS
<i>sodium chloride</i>	1	
SPIRIVA RESPIMAT	2	QL (4 per fill)
SPIRIVA WITH HANDIHALER	2	QL (30 per fill)
STIOLTO RESPIMAT	2	QL (4 per fill)
STRIVERDI RESPIMAT	2	QL (4 per fill)
SYMBICORT 160-4.5 MCG INHALER	3	ST; QL (11 per fill)
SYMBICORT 160-4.5 MCG INHALER	3	ST; QL (6 per fill)
SYMBICORT 80-4.5 MCG INHALER	3	ST; QL (11 per fill)
SYMBICORT 80-4.5 MCG INHALER	3	ST; QL (7 per fill)
SYMDEKO	2	PA; QL (56 per fill); S; MS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>tadalafil (pulm. hypertension)</i>	1	PA; QL (60 per fill); S; MS
TAKHZYRO	2	PA; S; MS; QL
<i>terbutaline</i>	1	
TEZSPIRE	2	PA; S; MS; QL
THEO-24	3	
<i>theophylline</i>	1	
<i>tiotropium bromide</i>	1	
TRACLEER ORAL TABLET	3	PA; QL (60 per fill); S; MS
TRACLEER ORAL TABLET FOR SUSPENSION	2	PA; QL (120 per fill); S; MS
TRELEGY ELLIPTA 100-62.5-25	2	QL (28 per fill)
TRELEGY ELLIPTA 100-62.5-25	2	QL (60 per fill)
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 200-62.5-25 MCG	2	QL (28 per fill)
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL	2	PA; QL (56 per fill); S; MS
TRIKAFTA ORAL TABLETS, SEQUENTIAL	2	PA; QL (84 per fill); S; MS
TYVASO	2	PA; S; MS
TYVASO DPI	2	PA; S; MS
TYVASO REFILL KIT	2	PA; S; MS
TYVASO STARTER KIT	2	PA; S; MS
VENTAVIS	3	PA; S; MS
WINREVAIR	2	PA; S; MS
<i>wixela inhub</i>	1	ST; QL (1 per fill)
XHANCE	2	ST; QL (32 per fill)
XOLAIR	2	PA; S; MS; QL
YUPELRI	2	QL (30 per fill)
<i>zafirlukast</i>	1	
<i>zileuton</i>	1	PA
ZYFLO	3	PA

UROLOGICALS

ANTICHOLINERGICS & ANTISPASMODICS

<i>darifenacin</i>	1	
<i>fesoterodine</i>	1	
<i>flavoxate</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
GEMTESA	3	
<i>mirabegron</i>	1	
MYRBETRIQ	2	
<i>oxybutynin chloride</i>	1	
OXYTROL	3	ST; QL
<i>solifenacin</i>	1	
<i>tolterodine</i>	1	
<i>tropium</i>	1	
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
<i>alfuzosin</i>	1	
<i>dutasteride</i>	1	ST
<i>dutasteride-tamsulosin</i>	1	ST
<i>finasteride</i>	1	
FLOMAX	3	ST
PROSCAR	3	ST
<i>silodosin</i>	1	
<i>tadalafil oral tablet 2.5 mg</i>	1	ST; QL (30 per fill)
<i>tadalafil oral tablet 5 mg</i>	1	ST; QL (8 per fill)
<i>tamsulosin</i>	1	
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride</i>	1	
MISCELLANEOUS UROLOGICALS		
CAVERJECT	2	PA; QL (12 per fill)
CAVERJECT IMPULSE	2	PA; QL (12 per fill)
CYSTAGON	2	S
EDEX	3	PA; QL (6 per fill)
ELMIRON	2	
IFE-BIMIX 30/1	3	
K-PHOS NO 2	3	
K-PHOS ORIGINAL	2	
<i>methen-sod phos-meth blue-hyos</i>	1	
ORACIT	3	
<i>potassium citrate</i>	1	
RENACIDIN	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>sildenafil</i>	1	ST; QL (8 per fill)
<i>sodium citrate-citric acid</i>	1	
STENDRA	3	ST; QL (8 per fill)
<i>tadalafil</i>	1	ST; QL (8 per fill)
TRI-MIX (PAPAVRN-PHNTLMN-PGE1)	3	
URELLE	3	
<i>uretron d-s</i>	1	
URIBEL TABS	3	
<i>urimar-t</i>	1	
<i>uro-458</i>	1	
UROCIT-K 10	3	
UROCIT-K 15	3	
<i>urogesic-blue</i>	1	
<i>uro-mp</i>	1	
UROQID-ACID NO.2	3	
<i>uro-sp</i>	1	
<i>uryl</i>	1	
<i>vardenafil</i>	1	ST; QL (8 per fill)
URINARY ANESTHETICS		
<i>phenazopyridine</i>	1	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
<i>calcium acetate(phosphat bind)</i>	1	QL (360 per fill)
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	3	
<i>effe-k oral tablet, effervescent 25 meq</i>	1	
GALZIN	3	
<i>klor-con</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con/ef</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
K-TAB	3	
<i>lugols</i>	1	
<i>potassium chloride</i>	1	
<i>sodium chloride</i>	1	
<i>strong iodine</i>	1	
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
DOJOLVI	3	PA; S; MS
VITAMINS & HEMATINICS		
ACCRUFER	3	
<i>b complex 1 (with folic acid)</i>	1	
<i>b complex-vitamin c-folic acid</i>	1	
<i>balanced b-100</i>	1	
<i>bal-care dha</i>	1	
BAL-CARE DHA ESSENTIAL	3	
<i>b-complex with vitamin c</i>	1	
<i>classic prenatal</i>	1	
<i>c-nate dha</i>	1	
<i>complete natal dha</i>	1	
CONCEPT DHA	3	
CONCEPT OB	3	
<i>cyanocobalamin (vitamin b-12) injection</i>	1	
<i>cyanocobalamin (vitamin b-12) nasal</i>	1	ST; QL (4 per fill)
<i>dialyvite 800</i>	1	
<i>dodex</i>	1	
DUET DHA WITH OMEGA-3	3	
<i>elite-ob</i>	1	
ENBRACE HR	3	
<i>ergocalciferol (vitamin d2)</i>	1	
FLORIVA (FLUORIDE-VITAMIN D3)	3	ACA
<i>fluoride (sodium)</i>	1	ACA
<i>folic acid injection</i>	1	
<i>folic acid oral tablet 1 mg</i>	1	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	1	ACA
<i>folivane-ob</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>foltabs 800</i>	1	
<i>full spectrum b-vitamin c</i>	1	
<i>kobee</i>	1	
KOSHER PRENATAL PLUS IRON	3	
<i>ludent fluoride</i>	1	ACA
MARNATAL-F	3	
<i>m-natal plus</i>	1	
<i>multi-vitamin with fluoride</i>	1	ACA
<i>mvc-fluoride</i>	1	ACA
<i>mynatal</i>	1	
<i>mynatal plus</i>	1	
<i>mynatal-z</i>	1	
NASCOBAL	2	ST; QL (4 per fill)
NATACHEW (FE BIS-GLYCINATE)	3	
NEEVODHA (WITH ALGAL OIL)	3	
NEONATAL COMPLETE	3	
NEONATAL FE	3	
NEONATAL PLUS VITAMIN	3	
NEONATAL-DHA	3	
NESTABS	3	
NESTABS ABC	3	
NESTABS DHA	3	
NESTABS ONE	3	
<i>newgen</i>	1	
OB COMPLETE	3	
OB COMPLETE ONE	3	
OB COMPLETE PETITE	3	
OB COMPLETE PREMIER	3	
OB COMPLETE WITH DHA	3	
<i>one daily prenatal</i>	1	
<i>pnv-dha</i>	1	
<i>pnv-omega</i>	1	
<i>pnv-select</i>	1	
<i>pr natal 400</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>pr natal 400 ec</i>	1	
<i>pr natal 430</i>	1	
<i>pr natal 430 ec</i>	1	
PRENATA	3	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
<i>prenatal</i>	1	
<i>prenatal complete</i>	1	
<i>prenatal multi-dha (algal oil)</i>	1	
<i>prenatal multivitamins</i>	1	
<i>prenatal one daily</i>	1	
<i>prenatal plus</i>	1	
<i>prenatal plus (calcium carb)</i>	1	
PRENATAL PLUS DHA	3	
PRENATAL PLUS VITAMIN-MINERAL	3	
<i>prenatal vit no.179-iron-folic</i>	1	
<i>prenatal vitamin</i>	1	
<i>prenatal vitamin with minerals</i>	1	
<i>prenatal-u</i>	1	
PRENATE AM	3	
PRENATE CHEWABLE	3	
PRENATE DHA (FERR ASP GLYCIN)	3	
PRENATE ELITE (IRON ASP GLYC)	3	
PRENATE ENHANCE	3	
PRENATE ESSENTIAL(IRON-ASP-GL)	3	
PRENATE MINI (FERR ASP GLYCIN)	3	
PRENATE PIXIE	3	
PRENATE RESTORE	3	
PRENATE STAR	3	
PRIMACARE	3	
PROVIDA OB	3	
<i>rena-vite</i>	1	
R-NATAL OB	3	
SELECT-OB	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SELECT-OB (FOLIC ACID)	3	
SELECT-OB + DHA	3	
<i>se-natal 19 chewable</i>	1	
<i>se-natal-19</i>	1	
<i>soluvita</i>	1	ACA
<i>soluvita a,c,d with fluoride</i>	1	ACA
<i>stress formula with iron</i>	1	
<i>stress formula with iron(sulf)</i>	1	
<i>super b maxi complex</i>	1	
<i>super quints</i>	1	
<i>taron-c dha</i>	1	
THRIVITE RX	3	
TRICARE	3	
<i>trinatal rx 1</i>	1	
<i>trinate</i>	1	
TRISTART DHA	3	
<i>tri-vitamin with fluoride</i>	1	ACA
VITAFOL FE PLUS	3	
VITAFOL GUMMIES	3	
VITAFOL ULTRA	3	
VITAFOL-OB	3	
VITAFOL-OB+DHA	3	
VITAFOL-ONE	3	
VITAMEDMD ONE RX	3	
<i>vitamin b complex-folic acid</i>	1	
<i>vitamins a,c,d and fluoride</i>	1	ACA
VITATRUE	3	
<i>wescap-c dha</i>	1	
<i>wescap-pn dha</i>	1	
<i>wesnatal dha complete</i>	1	
<i>wesnate dha</i>	1	
<i>westab plus</i>	1	
<i>westgel dha</i>	1	
<i>zatean-pn dha</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>zatean-pn plus</i>	1	
<i>zingiber</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

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CORTEF.....	59	<i>danazol</i>	66	DESMOPRESSIN	66
CORTENEMA	73	DANTRIUM	23	<i>desog-e.estradiol/e.estradiol</i>	88
<i>cortisone</i>	59	<i>dantrolene</i>	23	<i>desonide</i>	51
CORTISPORIN-TC	58	<i>dapsone</i>	7, 47	<i>desoximetasone</i>	52

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DESOXYN.....	29	DILAUDID	24	DULERA.....	100
DESVENLAFAXINE	29	<i>diltiazem</i>	37	<i>duloxetine</i>	30
<i>desvenlafaxine succinate</i>	29	<i>dilt-xr</i>	37	DUOBRII	52
<i>dexabliss</i>	59	<i>dimethyl fumarate</i>	78	DUPIXENT PEN.....	45
<i>dexamethasone</i>	59	DIPHEN	97	DUPIXENT SYRINGE.....	45
<i>dexamethasone intensol</i>	59	<i>diphenoxylate-atropine</i>	70	DUREX AVANTI BARE	
<i>dexamethasone sodium</i>		DIPROLENE		REAL FEEL	84
<i>phosphate</i>	96	(AUGMENTED).....	52	DUREX TROPICAL	
<i>dexchlorpheniramine maleate</i>		<i>dipyridamole</i>	40	CONDOM	84
.....	97	DISALCID	26	<i>dutasteride</i>	103
DEXCOM G6 RECEIVER..	61	<i>diskets</i>	24	<i>dutasteride-tamsulosin</i>	103
DEXCOM G6 SENSOR	61	<i>disopyramide phosphate</i>	35	DYMISTA.....	100
DEXCOM G6		<i>disulfiram</i>	55	DYRENIUM.....	37
TRANSMITTER.....	61	DIURIL	37	E	
DEXCOM G7 RECEIVER..	62	<i>divalproex</i>	18	<i>e.e.s. 400</i>	6
DEXCOM G7 SENSOR	62	<i>dodex</i>	105	E.E.S. GRANULES.....	6
DEXEDRINE SPANSULE..	30	<i>dofetilide</i>	35	EASIVENT HOLDING	
<i>dexlansoprazole</i>	76	DOJOLVI.....	105	CHAMBER	60
<i>dexmethylphenidate</i>	30	<i>dolishale</i>	88	EASY PLUS II HIGH	
<i>dextroamphetamine sulfate</i> ..	30	<i>donepezil</i>	22	CONTROL	62
<i>dextroamphetamine-</i>		DONNATAL.....	70	EASY STEP HIGH	
<i>amphetamine</i>	30	DOPTELET (15 TAB PACK)		CONTROL SOLN.....	62
DIACOMIT	18	.....	40	EASY TALK HIGH	
<i>dialyvite 800</i>	105	<i>dorzolamide</i>	95	CONTROL	62
DIATRUE CONTROL SOLN		DORZOLAMIDE (PF).....	95	EASY TALK PLUS II LOW	
NORMAL.....	62	<i>dorzolamide-timolol</i>	95	CONTROL	62
<i>diazepam</i>	18, 30	<i>dorzolamide-timolol (pf)</i>	95	EASY TOUCH BLU CTRL	
<i>diazepam intensol</i>	30	<i>dotti</i>	85	SOLN-L1,L3	62
<i>diazoxide</i>	60	DOVATO	3	EASY TRAK II CTRL SOLN-	
DIBENZYLIN	37	<i>doxazosin</i>	37	NORMAL.....	62
<i>dichlorphenamide</i>	22	<i>doxepin</i>	30, 45	EASY TRAK LOW	
DICLEGIS.....	73	<i>doxercalciferol</i>	66	CONTROL	62
<i>diclofenac potassium</i>	26	<i>doxycycline hyclate</i>	9	EASYMAX 15 LEVEL 2....	62
<i>diclofenac sodium</i>	26, 45, 95	<i>doxycycline monohydrate</i>	9	EASYMAX NORMAL	
<i>diclofenac-misoprostol</i>	26	<i>doxylamine-pyridoxine (vit b6)</i>		CONTROL	62
<i>dicloxacillin</i>	8	.....	73	EC-NAPROSYN	26
<i>dicyclomine</i>	70	<i>dronabinol</i>	73	<i>econazole</i>	50
<i>diethylpropion</i>	53, 54	<i>drospirenone-e.estradiol-lm.fa</i>		<i>econtra ez</i>	88
DIFFERIN.....	47	.....	88	<i>econtra one-step</i>	88
DIFICID	6	<i>drospirenone-ethinyl estradiol</i>		<i>ecotrin low strength</i>	26
<i>diflorasone</i>	52	.....	88	EDECRIN.....	37
DIFLUCAN.....	2	DROXIA	12	EDEX	103
<i>diflunisal</i>	26	<i>droxidopa</i>	55	EDLUAR.....	30
<i>difluprednate</i>	96	DUAVEE.....	85	<i>ed-spaz</i>	70
<i>digoxin</i>	40	DUET DHA WITH OMEGA-3		EDURANT	3
<i>dihydroergotamine</i>	21	.....	105	<i>eemt</i>	85
DILANTIN.....	18	DUETACT	68	<i>eemt hs</i>	85
DILANTIN EXTENDED	18	DUEXIS	26	<i>efavirenz</i>	3
DILANTIN INFATABS	18	<i>dulcolax (magnesium</i>		<i>efavirenz-emtricitabin-tenofov3</i>	
DILANTIN-125	18	<i>hydroxide)</i>	73		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

<i>efavirenz-lamivu-tenofov disop</i>	<i>enoxaparin</i>	<i>estazolam</i>
.....3	40	30
<i>effer-k</i>	<i>enpresse</i>	ESTRACE.....
104	88	85
EFFER-K.....	<i>enskyce</i>	<i>estradiol</i>
104	88	85
EFFIENT.....	ENSPRYNG.....	<i>estradiol valerate</i>
40	12	85
EFUDEX.....	ENSTILAR.....	<i>estradiol-norethindrone acet</i>
45	44	85
EGRIFTA SV.....	<i>entacapone</i>	ESTRATEST F.S.
77	20	85
ELEMENT COMPACT	<i>entecavir</i>	<i>estrogens-methyltestosterone</i>
NORMAL CONTROL.....	3	85
62	ENTRESTO.....	<i>eszopiclone</i>
ELEMENT NORMAL	43	30
CONTROL.....	ENTRESTO SPRINKLE	<i>ethacrynic acid</i>
62	43	37
ELEPSIA XR.....	<i>enulose</i>	<i>ethambutol</i>
18	73	7
<i>eletriptan</i>	EPCLUSA.....	<i>ethosuximide</i>
21	3	18
ELIMITE.....	EPIDIOLEX.....	<i>ethynodiol diac-eth estradiol</i>
53	18	88
<i>elimest</i>	EPIDUO FORTE.....	<i>etodolac</i>
88	47	26
ELIQUIS.....	EPIFOAM.....	<i>etonogestrel-ethinyl estradiol</i>
40	44	.....
ELIQUIS DVT-PE TREAT	<i>epinastine</i>	86
30D START.....	<i>epinephrine</i>	<i>etoposide</i>
40	97	12
<i>elite-ob</i>	<i>epinephrine hcl</i>	<i>etravirine</i>
105	100	3
ELIXOPHYLLIN.....	EPIPEN.....	EUCRISA.....
100	97	45
ELLA.....	EPIPEN JR.....	EULEXIN.....
88	97	12
ELMIRON.....	<i>epitol</i>	EURAX.....
103	18	53
<i>eluryng</i>	EPIVIR.....	<i>euthyrox</i>
86	3	70
EMBRACE EVO LEVEL 1.	<i>eplerenone</i>	EVAMIST.....
62	37	85
EMBRACE GLUCOSE	<i>eprosartan</i>	<i>everolimus (antineoplastic)</i> ..
CONTROL LOW.....	37	12
62	EPSOLAY.....	<i>everolimus</i>
EMBRACE TALK	EQUETRO.....	(immunosuppressive).....
CONTROL-LOW (L1)	18	12
62	<i>ergocalciferol (vitamin d2)</i> ..	EVISTA.....
EMGALITY PEN.....	105	82
21	<i>ergoloid</i>	EVOCLIN.....
EMGALITY SYRINGE.....	30	47
21	ERGOMAR.....	EVOLUTION NORMAL
EMPAVELI.....	21	CONTROL.....
55	<i>ergotamine-caffeine</i>	62
EMSAM.....	21	EVOTAZ.....
30	ERIVEDGE.....	3
<i>emtricitabine</i>	12	EVOXAC.....
3	ERLEADA.....	55
<i>emtricitabine-tenofov (tdf)</i> ...	<i>erlotinib</i>	EVRYSDI.....
3	12	22
EMTRIVA.....	ERMEZA.....	EXELDERM.....
3	70	50
EMVERM.....	<i>errin</i>	EXELON PATCH.....
7	85	22
<i>emzahn</i>	<i>ery pads</i>	<i>exemestane</i>
85	47	12
<i>enalapril maleate</i>	<i>erygel</i>	EXSERVAN.....
37	47	55
<i>enalapril-hydrochlorothiazide</i>	ERYPED 200.....	EXTINA.....
.....	6	50
37	ERYPED 400.....	EYSUVIS.....
ENBRACE HR.....	6	96
105	<i>ery-tab</i>	<i>ezetimibe</i>
ENBREL.....	6	41
83	ERY-TAB.....	<i>ezetimibe-simvastatin</i>
ENBREL MINI.....	6	41
83	<i>erythrocin (as stearate)</i>	F
ENBREL SURECLICK.....	6, 92	FABHALTA.....
83	<i>erythromycin</i>	55
ENDARI.....	<i>erythromycin ethylsuccinate</i> ...6	FACTIVE.....
55	<i>erythromycin with ethanol</i>....47	8
<i>endocet</i>	<i>erythromycin-benzoyl peroxide</i>	<i>falmina (28)</i>
24	.....	88
ENDERIX-B (PF).....	47	<i>famciclovir</i>
79	<i>escitalopram oxalate</i>	3
ENDERIX-B PEDIATRIC	30	<i>famotidine</i>
(PF).....	24	76
79	ESGIC.....	FANAPT.....
<i>enilloring</i>	24	30
86	<i>esomeprazole magnesium</i>	FARESTON.....
	76	12
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	88	68
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		100

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<i>febuxostat</i> 81	FLUCELVAX TRIV 2024-2025 (PF) 79	<i>foltabs 800</i> 106
<i>felbamate</i> 18	<i>fluconazole</i> 2	<i>fondaparinux</i> 40
FELBATOL 18	<i>flucytosine</i> 2	FORA 6 CONNECT MULTIFUNCTN MTR... 62
FELDENE 26	<i>fludrocortisone</i> 59	FORA GTEL MULTI- FUNCTN MONITOR 62
<i>felodipine</i> 37	FLULAVAL TRIV 2024-2025 (PF) 79	FORA KETONE CONTROL SOLN-L1 62
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<i>fenofibrate nanocrystallized</i> . 41	<i>fluocinolone and shower cap</i> 52	<i>formoterol fumarate</i> 100
<i>fenofibric acid</i> 42	<i>fluocinonide</i> 52	FORTEO 82
<i>fenofibric acid (choline)</i> 42	<i>fluocinonide-e</i> 52	FOSAMAX 82
FENOGLIDE 42	<i>fluorescein-proparacaine</i> 94	FOSAMAX PLUS D 82
<i>fenopropfen</i> 26	<i>fluoride (sodium)</i> 57, 105	<i>fosamprenavir</i> 3
<i>fentanyl</i> 24	FLUORIDEX DAILY DEFENSE 57	<i>fosfomycin tromethamine</i> 10
<i>fentanyl citrate</i> 24	FLUORIDEX SENSITIVITY RELIEF 57	<i>fosinopril</i> 37
FERRIPROX 55	FLUORIMAX 5000 57	<i>fosinopril-hydrochlorothiazide</i> 37
FERRIPROX (2 TIMES A DAY) 55	FLUORIMAX 5000 SENSITIVE 57	FRAGMIN 40
<i>fesoterodine</i> 102	<i>fluorometholone</i> 96	<i>fraiche 5000</i> 57
FETZIMA 30	FLUROPLEX 45	FRAICHE 5000 PREVI 57
FEXMID 23	<i>fluorouracil</i> 45	FRAICHE 5000 SENSITIVE 57
FIBRICOR 42	<i>fluoetine</i> 30	FREESTYLE CONTROL ... 62
FINACEA 47	<i>fluphenazine decanoate</i> 31	FREESTYLE FREEDOM ... 62
<i>finasteride</i> 55, 103	<i>fluphenazine hcl</i> 31	FREESTYLE FREEDOM LITE 62
<i>finingolimid</i> 78	<i>flurandrenolide</i> 52	FREESTYLE INSULINX ... 60,
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<i>flac otic oil</i> 58	<i>fluticasone propion-salmeterol</i> 100	FREESTYLE LIBRE 2 READER 62
FLAGYL 7	<i>fluvastatin</i> 42	FREESTYLE LIBRE 2 SENSOR 62
<i>flavoxate</i> 102	<i>fluvoxamine</i> 31	
<i>flecainide</i> 35	FLUZONE HIGH-DOSE TRIV 24-25 79	
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FLEXICHAMBER 60	FLUZONE TRIV 2024-2025 (PF) 79	
FLOLIPID 42	FML LIQUIFILM 96	
FLOMAX 103	<i>folic acid</i> 105	
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READER.....	GVOKE HYPOPEN 2-PACK	61
FREESTYLE LIBRE 3	<i>gentamicin</i>	61
SENSOR.....	GENTEEL VACUUM	GVOKE PFS 2-PACK	
FREESTYLE LITE METER	LANCING DEVICE	SYRINGE.....	61
FREESTYLE LITE STRIPS	<i>gentle laxative (bisacodyl)</i>	GYNAZOLE-1	86
FREESTYLE PRECISION	<i>gentle laxative (mag hydrox)</i> 73	H	
NEO STRIPS.....	<i>gentlelax</i>	HAEGARDA.....	100
FREESTYLE TEST	GENVOYA	<i>hailey</i>	88
FROVA	GEODON	<i>hailey 24 fe</i>	89
<i>frovatriptan</i>	GILOTRIF.....	<i>hailey fe 1.5/30 (28)</i>	89
<i>full spectrum b-vitamin c</i>	<i>glatiramer</i>	<i>hailey fe 1/20 (28)</i>	89
FULPHILA.....	<i>glatopa</i>	<i>halcinonide</i>	52
FURADANTIN.....	GLEOSTINE	HALCION	31
<i>furosemide</i>	<i>glimepiride</i>	HALDOL DECANOATE ...	31
FUZEON	<i>glipizide</i>	<i>halobetasol propionate</i>	52
<i>fyavolv</i>	<i>glipizide-metformin</i>	<i>haloette</i>	86
FYCOMPA	GLOPERBA.....	HALOG	52
<i>fyremadel</i>	<i>glucagon emergency kit</i>	<i>haloperidol</i>	31
G	(<i>human</i>)	<i>haloperidol decanoate</i>	31
<i>g tussin ac</i>	GLUCOCARD 01 NORMAL	<i>haloperidol lactate</i>	31
<i>gabapentin</i>	CONTROL	HARVONI.....	3
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<i>gallifrey</i>	GLUCOSE CONTROL.....	CONTROL	63
GALZIN.....	GLUCOTROL XL	<i>heather</i>	85
GAMMAGARD LIQUID ...	<i>glutamine (sickle cell)</i>	HEMLIBRA	40
GAMMAGARD S-D (IGA < 1	<i>glyburide</i>	<i>hemmorex-hc</i>	73
MCG/ML)	<i>glyburide micronized</i>	<i>hep flush-10 (pf)</i>	40
GAMUNEX-C	<i>glyburide-metformin</i>	<i>heparin (porcine)</i>	40
<i>ganirelix</i>	GLYCATE	<i>heparin (porcine) in 5 % dex</i>	41
GARDASIL 9 (PF).....	<i>glycopyrrolate</i>	<i>heparin lock flush (porcine)</i> .	41
GASTROCROM.....	GLYXAMBI	<i>heparin lockflush(porcine)(pf)</i>	41
<i>gatifloxacin</i>	GOJJI GLUCOSE CNTRL	.....	41
GATTEX 30-VIAL	SOL-NORMAL.....	<i>heparin, porcine (pf)</i>	41
<i>gavilax</i>	GOJJI KETONE CONTROL	HEPARIN, PORCINE (PF)..	41
<i>gavilyte-c</i>	SOLN-L1	HEPLISAV-B (PF).....	80
<i>gavilyte-g</i>	GOJJI MULTI-FUNCTIONAL	<i>her style</i>	89
<i>gavilyte-n</i>	METER	HETLIOZ	31
GAVRETO.....	GOLYTELY.....	HETLIOZ LQ.....	31
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GELCLAIR	GONITRO	<i>homatropaire</i>	93
<i>gemfibrozil</i>	GRALISE	HORIZANT.....	22
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GEMTESA	GRASTEK.....	KWIKPEN U-100	65
<i>generlac</i>	<i>griseofulvin microsize</i>	HUMALOG KWIKPEN	
<i>engraf</i>	<i>griseofulvin ultramicrosize</i>	INSULIN	65
GENOTROPIN	<i>guanfacine</i>		

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HUMALOG TEMPO PEN(U- 100)INSULN..... 65	<i>hydrochlorothiazide</i> 37	IMBRUVICA 13
HUMALOG U-100 INSULIN 65	<i>hydrocodone bitartrate</i> 24	IMCIVREE..... 54
HUMATIN 7	<i>hydrocodone-acetaminophen</i> 25	<i>imipramine hcl</i> 31
HUMIRA (ONLY NDCS STARTING WITH 00074) 83	<i>hydrocodone-</i> <i>chlorpheniramine</i> 98	<i>imipramine pamoate</i> 31
HUMIRA PEN (ONLY NDCS STARTING WITH 00074) 83	<i>hydrocodone-homatropine</i> ... 98	<i>imiqumod</i> 81
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HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074)..... 83	<i>hydrocortisone</i> 52, 59, 73	IMPAVIDO 7
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<i>isoniazid</i>	7	<i>kelnor 1/35 (28)</i>	89	LAMICTAL XR STARTER	
ISORDIL.....	43	<i>kelnor 1/50 (28)</i>	89	(ORANGE).....	18
ISORDIL TITRADOSE.....	43	KENALOG.....	52	<i>lamivudine</i>	4
<i>isosorbide dinitrate</i>	43	KERENDIA.....	38	<i>lamivudine-zidovudine</i>	4
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<i>tramadol</i>	28	<i>trinatal rx 1</i>	108	<i>unithroid</i>	70
<i>tramadol-acetaminophen</i>	28	<i>trinate</i>	108	UPTRAVI.....	40
<i>trandolapril</i>	39	TRINTELLIX.....	34	URELLE.....	104
<i>trandolapril-verapamil</i>	39	<i>tri-sprintec (28)</i>	91	<i>uretron d-s</i>	104
<i>tranexamic acid</i>	87	TRISTART DHA	108	URIBEL TABS	104
<i>tranylcypropromine</i>	34	TRIUMEQ.....	5	<i>urimar-t</i>	104
<i>travoprost</i>	95	TRIUMEQ PD.....	5	<i>uro-458</i>	104
<i>trazodone</i>	34	<i>tri-vitamin with fluoride</i>	108	UROCIT-K 10	104
TRECTOR.....	8	<i>trivora (28)</i>	91	UROCIT-K 15	104
TRELEGY ELLIPTA	102	<i>tri-vylibra</i>	91	<i>urogesic-blue</i>	104
TREMFYA.....	44	<i>tri-vylibra lo</i>	91	<i>uro-mp</i>	104
TRESIBA FLEXTOUCH U- 100.....	65	TROKENDI XR.....	19	UROQID-ACID NO.2.....	104
TRESIBA FLEXTOUCH U- 200.....	65	<i>tropicamide</i>	93	<i>uro-sp</i>	104
TRESIBA U-100 INSULIN .	65	<i>trospium</i>	103	URSO FORTE.....	75
<i>tretinoin</i>	48	TRUDHESA.....	21	<i>ursodiol</i>	75
<i>tretinoin (antineoplastic)</i>	16	TRUE METRIX LEVEL 1..	64	<i>uryl</i>	104
<i>tretinoin (emollient)</i>	48	TRULANCE.....	75	UZEDY.....	34
<i>tretinoin microspheres</i>	48	TRULICITY	70	V	
TREXALL.....	16	TRUMENBA.....	81	<i>valacyclovir</i>	5
TREZIX.....	26	TRUSTEEL INFUSION SET 23	64	VALCHLOR	45
<i>triamcinolone acetonide</i> .	53, 58	TRUSTEX-RIA NON-LUB CONDOMS	84	VALCYTE	5
<i>triamterene</i>	39	TUKYSA.....	16	<i>valganciclovir</i>	5
<i>triamterene-hydrochlorothiazid</i>	39	<i>tulana</i>	86	<i>valproic acid</i>	19
<i>triazolam</i>	34	TURALIO	17	<i>valproic acid (as sodium salt)</i>	19
TRICARE.....	108	<i>turqoz (28)</i>	91	<i>valsartan</i>	40
<i>tridacaine ii</i>	49	TUXARIN ER.....	98	<i>valsartan-hydrochlorothiazide</i>	40
<i>triderm</i>	53	TWINRIX (PF).....	81	VALTOCO	19
<i>trientine</i>	56	TWYNEO.....	48	<i>vanadom</i>	24
<i>tri-estarylla</i>	91	TYBOST	5	VANCOGIN	10
<i>trifluoperazine</i>	34	<i>tydemy</i>	91	<i>vancomycin</i>	10
<i>trifluridine</i>	93	TYENNE.....	84	VANCOMYCIN.....	10
<i>trihexyphenidyl</i>	20	TYENNE AUTOINJECTOR	84	<i>vandazole</i>	87
TRIJARDY XR.....	70	TYKERB	17	VANOXIDE-HC	48
TRIKAFTA	102	TYMLOS.....	82	VAQTA (PF)	81
<i>tri-legest fe</i>	91	TYPHIM VI	81	<i>vardenafil</i>	104
<i>tri-linyah</i>	91	TYRVAYA	94	<i>varenicline</i>	57
TRILIPIX	43	TYSABRI.....	23	VARISOFT INFUSION SET 23	64
<i>tri-lo-estarylla</i>	91	TYVASO.....	102	VARIVAX (PF).....	81
<i>tri-lo-marzia</i>	91	TYVASO DPI	102	VARUBI.....	75
<i>tri-lo-mili</i>	91	TYVASO REFILL KIT.....	102	VASCEPA.....	43
<i>tri-lo-sprintec</i>	91	TYVASO STARTER KIT .	102	VASERETIC	40
<i>trimethobenzamide</i>	75	U		VASOTEC.....	40
<i>trimethoprim</i>	10	UBRELVY	21	VAXCHORA VACCINE.....	81
<i>tri-mili</i>	91	UCERIS.....	75	VAXELIS (PF).....	81
<i>trimipramine</i>	34				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

VAXNEUVANCE (PF).....	81	<i>vitamin b complex-folic acid</i>	108	<i>westgel dha</i>	108
VCF CONTRACEPTIVE		.....	108	WIDE-SEAL DIAPHRAGM	
FILM	87	<i>vitamins a,c,d and fluoride</i> .	108	.....	84
VCF CONTRACEPTIVE GEL		VITATRUE	108	WINREVAIR	102
.....	87	VITRAKVI.....	17	<i>wintergreen oil</i>	45
VECTICAL	44	VIVAGUARD INO CTRL		<i>wixela inhub</i>	102
<i>velivet triphasic regimen (28)</i>		SOLN-L1,2,3.....	65	<i>women's gentle laxative(bisac)</i>	
.....	91	VIVITROL	28	.....	76
VELPHORO.....	72	VIVJOA.....	2	<i>wymzya fe</i>	92
VELTASSA	72	VIVOTIF	81	WYNZORA.....	44
VEMLIDY	5	VIZIMPRO.....	17	X	
VENCLEXTA.....	17	VOGELXO.....	68	XACIATO	87
VENCLEXTA STARTING		<i>volnea (28)</i>	92	XALKORI	17
PACK	17	VONJO	17	XARELTO	41
<i>venlafaxine</i>	34	VOQUEZNA.....	77	XARELTO DVT-PE TREAT	
VENTAVIS	102	VOQUEZNA DUAL PAK...77		30D START.....	41
VEOZAH	87	VOQUEZNA TRIPLE PAK 77		XCOPRI	20
<i>verapamil</i>	40	VORANIGO.....	17	XCOPRI MAINTENANCE	
VERELAN PM	40	<i>voriconazole</i>	2	PACK	20
VERQUVO	43	VORTEX HOLDING		XCOPRI TITRATION PACK	
VERSACLOZ	34	CHAMBER	60	.....	20
VERZENIO.....	17	VOSEVI	5	XDEMVY	94
<i>vestura (28)</i>	91	VOTRIENT	17	XELJANZ.....	84
VEVYE	94	VOWST.....	75	XELJANZ XR.....	84
VFEND.....	2	VOXZOGO	68	XELODA.....	17
V-GO 20.....	64	VOYDEYA	56	XENICAL.....	54
V-GO 30.....	64	VRAYLAR.....	35	XENLETA.....	8
V-GO 40.....	64	VTAMA	44	XEPI	49
VIBERZI.....	75	VUMERITY	79	XERMELLO.....	17
VIBRAMYCIN	10	<i>vyfemla (28)</i>	92	XHANCE	102
<i>vienva</i>	91	VYLEESI	35	XIFAXAN	8
<i>vigabatrin</i>	19, 20	<i>vylibra</i>	92	XIGDUO XR.....	70
<i>vigadrone</i>	20	VYNDAMAX	43	XIIDRA	94
VIGAMOX.....	93	VYNDAQEL.....	43	XOFLUZA	5
<i>vigpoder</i>	20	VYVANSE.....	35	XOLAIR	102
VIJOICE.....	17	VYZULTA	95	XOLREMDI.....	77
<i>vilazodone</i>	34	W		XOSPATA.....	17
VIOKACE.....	75	WAKIX	35	XTANDI.....	17
<i>viorele (28)</i>	92	<i>warfarin</i>	41	<i>xulane</i>	87
VIRACEPT	5	<i>water for irrigation, sterile</i> ...56		XURIDEN	56
VIREAD.....	5	WAVESENSE CONTROL		XYOSTED	68
VISTARIL.....	97	SOLUTION	65	XYWAV	35
VISTOGARD.....	10	WEGOVI	54	Y	
VITAFOL FE PLUS	108	WELIREG	17	YAZ (28)	92
VITAFOL GUMMIES.....	108	<i>wera (28)</i>	92	YF-VAX (PF).....	81
VITAFOL ULTRA	108	<i>wescap-c dha</i>	108	YUPELRI	102
VITAFOL-OB.....	108	<i>wescap-pn dha</i>	108	<i>yuvafem</i>	86
VITAFOL-OB+DHA	108	<i>wesnatal dha complete</i>	108	Z	
VITAFOL-ONE	108	<i>wesnate dha</i>	108	<i>zafemy</i>	87
VITAMEDMD ONE RX ...	108	<i>westab plus</i>	108	<i>zafirlukast</i>	102

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

<i>zaleplon</i>	35	ZESTORETIC	40	ZORTRESS	17
ZANAFLEX	24	ZESTRIL	40	ZORYVE	44
<i>zarah</i>	92	ZIAGEN	5	<i>zovia 1-35 (28)</i>	92
ZARONTIN	20	ZIANA	48	ZOVIRAX	50
<i>zatean-pn dha</i>	108	<i>zidovudine</i>	5	ZTALMY	20
<i>zatean-pn plus</i>	109	ZIEXTENZO	77	ZTLIDO	49
ZCORT	59	<i>zileuton</i>	102	ZUBSOLV	28
ZELBORAF	17	<i>zingiber</i>	109	<i>zumandimine (28)</i>	92
ZEMBRACE SYMTOUCH	21	<i>ziprasidone hcl</i>	35	ZURZUVAE	35
ZEMPLAR	68	ZIRGAN	93	ZYDELIG	17
<i>zenatane</i>	48	ZITHROMAX	6	ZYFLO	102
ZENPEP	76	ZITHROMAX TRI-PAK	6	ZYKADIA	17
<i>zenzedi</i>	35	ZITHROMAX Z-PAK	6	ZYLOPRIM	81
ZENZEDI	35	ZOKINVY	56	ZYMFENTRA	76
ZEPATIER	5	ZOLINZA	17	ZYPITAMAG	43
ZEPBOUND	54	<i>zolmitriptan</i>	21	ZYPREXA	35
ZEPOSIA	23	<i>zolpidem</i>	35	ZYPREXA RELPREVV	35
ZEPOSIA STARTER KIT (28- DAY)	23	ZOMIG	21	ZYPREXA ZYDIS	35
ZEPOSIA STARTER PACK (7-DAY)	23	ZONALON	45	ZYVOX	8
		<i>zonisamide</i>	20		
		ZONTIVITY	41		

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2024 Preferred Drug List Exclusions

The excluded medications shown below are not covered on the preferred drug list. If you're currently using one of the excluded medications, please ask your doctor to consider writing you a new prescription for one of the following preferred alternatives. Additional covered alternatives may be available. Costs for covered alternatives may vary. Not all the drugs listed are covered by all prescription plans; check your benefit materials for the specific drugs covered and the copayments for your plan. For specific questions about your coverage, please call the number on your member ID card. If there is a clinical reason, identified by your doctor, that requires you to continue taking your current medication, your doctor can request a coverage review.

Drug Class	Excluded Medications	Preferred Alternatives
ANTIINFECTIVES Antibiotic Agents (Oral)	FIRVANQ, VANCOMYCIN 25 MG/ML SOLUTION	vancomycin capsules, vancomycin 50 mg/ml oral solution
	LIKMEZ	metronidazole tablets
	SIVEXTRO	linezolid
Antibiotic Agents for Urinary Tract Infections	NITROFURANTOIN 50 MG/5 ML SUSPENSION	nitrofurantoin 25 mg/5 ml suspension
Antifungal Agents (Oral)	TOLSURA	itraconazole
Antivirals (Oral)	SITAVIG, XERESE	acyclovir oral or cream, famciclovir, penciclovir cream, valacyclovir
Chagas Disease Agents	LAMPIT	BENZNIDAZOLE
AUTONOMIC & CENTRAL NERVOUS SYSTEM Alpha-2 Adrenergic Agonists (for Opioid Withdrawal)	LUCEMYRA	clonidine
Alzheimer's Agents	ADUHELM, LEQEMBI	No alternatives recommended
Amyotrophic Lateral Sclerosis (ALS) Agents	QALSODY, RELYVRIO	No alternatives recommended
Anticonvulsants	EPRONTIA	topiramate sprinkle capsules
	FINTEPLA	DIACOMIT, EPIDIOLEX
	MOTPOLY XR	lacosamide
	PRIMIDONE 125 MG TABLETS	primidone 50 mg or 250 mg tablets
	ZONISADE	zonisamide
Antimigraine Agents	ONZETRA XSAIL	sumatriptan nasal spray, zolmitriptan nasal spray
	VYEPTI	AIMOVIG, AJOVY, EMGALITY
	ZAVZPRET	NURTEC ODT, UBRELVY
Antiparkinsonism Agents	APOKYN	Coverage may be approved for the treatment of Parkinson's Disease under certain conditions.
	DHIVY	carbidopa/levodopa
	GOCOVRI ER, OSMOLEX ER	amantadine capsules, amantadine oral solution, amantadine tablets
	ONGENTYS	entacapone
	XADAGO, ZELAPAR	rasagiline, selegiline
Antipsychotics (Injectable)	INVEGA HAFYERA	risperidone er, RISPERDAL CONSTA, RYKINDO ER, UZEDY ER
Antipsychotics (Oral)	QUETIAPINE 150 MG TABLETS	quetiapine 50 mg or 100 mg
Antispasmodic Agents	BACLOFEN 15 MG TABLETS, BACLOFEN SOLUTION, LYVISPAH, OZOBAX, OZOBAX DS	baclofen suspension, baclofen 5 mg, 10 mg or 20 mg tablets
Anxiolytic Agents	LOREEV XR	lorazepam tablets
Cataplexy Treatment	SODIUM OXYBATE (by Amneal), XYREM	LUMRYZ ER, SODIUM OXYBATE (by Hikma), XYWAV
Central Nervous System Stimulants	DYANAVEL XR, XELSTRYM	dextroamphetamine er, dextroamphetamine/amphetamine er, lisdexamfetamine
	METHYLPHENIDATE ER 45 MG, 63 MG & 72 MG, QUILLICHEW ER, QUILLIVANT XR, RELEXII ER	dexmethylphenidate er, methylphenidate cd, methylphenidate er, methylphenidate la, AZSTARYS

(continued)

Drug Class	Excluded Medications	Preferred Alternatives
AUTONOMIC & CENTRAL NERVOUS SYSTEM (continued) Duchenne Muscular Dystrophy (DMD) Agents	AGAMREE	prednisolone solution/syrup, prednisolone tablets, prednisone solution, prednisone tablets
	AMONDYS 45, EXONDYS 51, VILTEPSO, VYONDYS 53	No alternatives recommended
Friedreich's Ataxia Agents	SKYCLARYS	Coverage may be approved for the treatment of Friedreich's Ataxia under certain conditions.
Multiple Sclerosis Agents	BRIUMVI	KESIMPTA, OCREVUS
	EXTAVIA	AVONEX, BETASERON, PLEGRIDY, REBIF
	GILENYA, TASCENSO ODT	fingolimod, teriflunomide, BAFIERTAM, MAYZENT, PONVORY, VUMERITY
Narcotic Analgesics & Combinations	CONZIP, QDOLO, TRAMADOL 25 MG & 100 MG TABLETS, TRAMADOL ER CAPSULES, TRAMADOL SOLUTION	tramadol 50 mg tablets, tramadol er tablets
	NUCYNTA	hydrocodone/acetaminophen, morphine sulfate, oxycodone, tramadol, tramadol/acetaminophen
	NUCYNTA ER, OXYCODONE ER, XTAMPZA ER	hydrocodone bitartrate er, hydromorphone er, morphine sulfate er, oxymorphone hcl er, HYSINGLA ER, OXYCONTIN
	OXAYDO, ROXYBOND	oxycodone
	PRIMLEV, PROLATE SOLUTION	oxycodone/acetaminophen
	SEGLENTIS	tramadol tablets plus celecoxib
Narcotic Antagonists	ZIMHI	naloxone syringes
Rett Syndrome Agents	DAYBUE	No alternatives recommended
Sedative-Hypnotic Agents	DORAL, QUAZEPAM	estazolam, lorazepam
	ZOLPIDEM 7.5 MG CAPSULES	eszopiclone, zaleplon, zolpidem tablets
Selective Serotonin Reuptake Inhibitors (SSRIs) Antidepressants	CITALOPRAM CAPSULES, PEXEVA, SERTRALINE CAPSULES	citalopram tablets, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline tablets, vilazodone
Serotonin/Norepinephrine Reuptake Inhibitor Antidepressants	DRIZALMA SPRINKLE, VENLAFAXINE BESYLATE ER	desvenlafaxine er, duloxetine, venlafaxine hcl er, FETZIMA
Transmucosal Fentanyl Analgesics	FENTANYL CITRATE BUCCAL TABLETS, FENTORA	fentanyl citrate lozenges
Miscellaneous Antidepressants	APLENZIN, BUPROPION XL 450 MG, FORFIVO XL	bupropion xl 150 mg or 300 mg
	AUVELITY ER	bupropion, citalopram, duloxetine, paroxetine, sertraline, venlafaxine, FETZIMA
	SPRAVATO	olanzapine/fluoxetine, bupropion, desvenlafaxine er, duloxetine, escitalopram, mirtazapine, sertraline
CARDIOVASCULAR ACE Inhibitors	QBRELIS	lisinopril
Alpha-Adrenergic Agonists	CLONIDINE ER 0.17 MG, NEXICLON XR	clonidine patches, clonidine tablets
Angiotensin Receptor Blockers (ARBs) and Combinations	EDARBI	candesartan, irbesartan, losartan, olmesartan, telmisartan, valsartan
	EDARBYCLOR	candesartan/hydrochlorothiazide, irbesartan/hydrochlorothiazide, losartan/hydrochlorothiazide, olmesartan/hydrochlorothiazide, telmisartan/hydrochlorothiazide, valsartan/hydrochlorothiazide, chlorthalidone plus valsartan
	VALSARTAN SOLUTION	valsartan tablets
Anticoagulants	PRADAXA, SAVAYSA	dabigatran, ELIQUIS, XARELTO
Beta Blockers & Combinations	HEMANGEOL	propranolol solution
	INDERAL XL, INNOPRAN XL	propranolol er
	KAPSPARGO SPRINKLE	metoprolol succinate
Calcium Channel Blockers	CONJUPRI, LEVAMLODIPINE	amlodipine, felodipine er, nifedipine er, nisoldipine
	KATERZIA, NORLIQVA	amlodipine tablets

(continued)

Drug Class	Excluded Medications	Preferred Alternatives
CARDIOVASCULAR (continued) Diuretics	FUROSCIX, SOAANZ	bumetanide, furosemide, torsemide
	THALITONE	chlorthalidone
Fenofibrates	ANTARA, FENOFIBRATE CAPSULES (30 MG, 50 MG, 90 MG, 150 MG), LIPOFEN	fenofibrate capsules (43 mg, 67 mg, 130 mg, 134 mg, 200 mg), fenofibrate tablets, fenofibric acid
HMG & Cholesterol Inhibitor Combinations	ALTOPREV, ATORVALIQ, EZALLOR SPRINKLE	atorvastatin, fluvastatin er, lovastatin, pitavastatin, pravastatin, rosuvastatin, simvastatin tablets
	ROSUVASTATIN/EZETIMIBE	ezetimibe plus atorvastatin or rosuvastatin
PCSK9 & siRNA Inhibitors	LEQVIO, PRALUENT	REPATHA
Pulmonary Arterial Hypertension (PAH) Agents	LIQREV, TADLIQ	sildenafil oral suspension, sildenafil 20 mg tablets, tadalafil 20 mg tablets
Sodium Glucose Co-Transporter-1 and 2 Inhibitors	INPEFA	FARXIGA, JARDIANCE
Miscellaneous Cardiovascular Agents	ASPRUZYO SPRINKLE ER	ranolazine er
	CORLANOR	atenolol, bisoprolol, carvedilol, metoprolol succinate, metoprolol tartrate, propranolol
	LODOCO	colchicine
	NORPACE CR	amiodarone, quinidine sulfate, sotalol
DERMATOLOGICAL Agents for Hyperhidrosis	DRYSOL, QBREXZA	Over-the-Counter aluminum chloride containing products
Oral Agents for Acne	ABSORICA LD	isotretinoin capsules
	DORYX DR 80 MG, DORYX MPC, DOXYCYCLINE HYCLATE DR 80 MG	doxycycline hyclate, doxycycline monohydrate
	MINOCYCLINE BIPHASIC TABLETS, MINOCYCLINE ER CAPSULES, XIMINO	minocycline 24 hour er tablets
Rosacea Agents (Topical)	NORITATE	metronidazole
	ZILXI	azelaic acid, ivermectin, metronidazole, sodium sulfacetamide/sulfur, FINACEA FOAM
Topical Agents for Acne	CABTREO	adapalene, adapalene/benzoyl peroxide, benzoyl peroxide gel, clindamycin topical, clindamycin/benzoyl peroxide, tretinoin, tretinoin micro
	CLENIA PLUS, SULFACETAMIDE/SULFUR 8%-4% CLEANSER, SULFACETAMIDE/SULFUR 9%-4.25% SUSPENSION, ZMA CLEAR	sulfacetamide/sulfur 9%-4% cleanser, sulfacetamide/sulfur 8%-4% suspension
	FABIOR, TAZAROTENE FOAM	tazarotene cream, tretinoin
	WINLEVI	azelaic acid, clindamycin phosphate gel, clindamycin/tretinoin, dapsone, erythromycin gel, tretinoin
Topical Agents for Actinic Keratosis	CARAC, FLUOROURACIL 0.5% CREAM, KLISYRI, ZYCLARA	diclofenac 3% gel, fluorouracil 5% cream, fluorouracil 2% solution, imiquimod 5% cream
Topical Antifungals	ECOZA, ERTACZO, LULICONAZOLE, LUZU, OXISTAT LOTION, SULCONAZOLE, XOLEGEL	ciclopirox, clotrimazole, econazole, ketoconazole, naftifine, oxiconazole
	MICONAZOLE/ZINC OXIDE/PETROLATUM, VUSION	clotrimazole, ketoconazole, miconazole, nystatin
Topical Corticosteroids	IMPOYZ, LEXETTE, SERNIVO, ULTRAVATE, VERDES0 FOAM	generic topical corticosteroids
Vitamin D Analogs (Topical)	CALCIPOTRIENE FOAM, SORILUX	calcipotriene, calcitriol
Miscellaneous Topical Dermatological Agents	ALCORTIN A	generic topical corticosteroids plus mupirocin
	CONDYLOX, VEREGEN	imiquimod 5% cream, podofilox solution
	LIDOCAINE/TETRACAINE, PLIAGLIS	lidocaine cream, lidocaine/prilocaine cream
	TAZORAC 0.05% CREAM	tazarotene 0.1% cream
	TRI-LUMA	fluocinolone acetonide, hydroquinone, tretinoin

(continued)

Drug Class	Excluded Medications	Preferred Alternatives
DIABETES Biguanidine Agents	METFORMIN 625 MG TABLETS	metformin 500 mg or 850 mg tablets
Blood Glucose Meters & Test Strips	ASCENSIA (CONTOUR) ONETOUCH SOLUTIONS STARTER KIT ROCHE (ACCU-CHEK) TEMPO (WELCOME KIT, REFILL KIT, SMART BUTTON) TRIVIDIA (TRUETEST, TRUETRACK) ALL OTHER METERS & TEST STRIPS THAT ARE NOT LISTED AS PREFERRED	FREESTYLE KITS/METERS (FREESTYLE FREEDOM, FREESTYLE FREEDOM LITE, FREESTYLE INSULINX, FREESTYLE LITE) FREESTYLE TEST STRIPS (FREESTYLE, FREESTYLE INSULINX, FREESTYLE LITE, FREESTYLE PRECISION NEO) ONETOUCH KITS/METERS (ULTRA2, VERIO FLEX, VERIO REFLECT) ONETOUCH TEST STRIPS (ULTRA, VERIO) PRECISION XTRA METERS, TEST STRIPS
Diabetic Pen Needles & Syringes	PEN NEEDLES & SYRINGES BY: ARKRAY HOME AIDE DIAGNOSTICS HTL-STREFA NOVO NORDISK OWEN MUMFORD PRODIGY DIABETES CARE SIMPLE DIAGNOSTICS TRIVIDIA (NIPRO DIAGNOSTICS) ULTIMED ALL OTHER DIABETIC PEN NEEDLES & SYRINGES THAT ARE NOT LISTED AS PREFERRED	BD DIABETES PEN NEEDLES BD DIABETES SYRINGES
Diabetic Supply Kits	BIGFOOT UNITY PROGRAM KIT	DEXCOM G6: RECEIVER, SENSOR, TRANSMITTER DEXCOM G7: RECEIVER, SENSOR FREESTYLE LIBRE: READER, SENSOR
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors & Combinations	ALOGLIPTIN, NESINA, SITAGLIPTIN, TRADJENTA, ZITUVIO	saxagliptin, JANUVIA
	ALOGLIPTIN/METFORMIN, JENTADUETO, JENTADUETO XR, KAZANO	saxagliptin/metformin, JANUMET, JANUMET XR
	ALOGLIPTIN/PIOGLITAZONE	pioglitazone plus saxagliptin or JANUVIA
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors/Sodium Glucose Co-Transporter-2 (SGLT-2) Inhibitors Combinations	QTERN, STEGLUJAN	GLYXAMBI
Glucagon-Like Peptide-1 Agonists	VICTOZA	BYDUREON BCISE, BYETTA, OZEMPIC, TRULICITY
Glucose-Elevating Drugs	GLUCAGEN HYPOKIT, GLUCAGON EMERGENCY KIT (by Fresenius), ZEGALOGUE	glucagon emergency kit (by Amphastar), BAQSIMI, GVOKE
Insulin (Basal) and Glucagon-Like Peptide-1 (GLP-1) Agonist Combinations	XULTOPHY	SOLIQUA
Insulins	ADMELOG, AFREZZA, APIDRA, FIASP, INSULIN ASPART, NOVOLOG, RELION NOVOLOG	HUMALOG, HUMALOG TEMPO, INSULIN LISPRO, LYUMJEV, LYUMJEV TEMPO
	U-100: INSULIN DEGLUDEC, INSULIN GLARGINE, INSULIN GLARGINE-YFGN, LANTUS, LEVEMIR, REZVOGLAR U-200: INSULIN DEGLUDEC U-300: INSULIN GLARGINE	U-100: SEMGLEE (YFGN), TRESIBA U-200: TRESIBA U-300: TOUJEO
	INSULIN ASPART PROTAMINE, NOVOLOG MIX, RELION NOVOLOG MIX	HUMALOG MIX, INSULIN LISPRO PROTAMINE MIX
	NOVOLIN, NOVOLIN MIX, RELION NOVOLIN, RELION NOVOLIN MIX	HUMULIN, HUMULIN MIX
Sodium Glucose Co-Transporter-2 (SGLT-2) Inhibitors & Combinations	BRENZAVVY, DAPAGLIFLOZIN, INVOKANA	FARXIGA, JARDIANCE, STEGLATRO
	DAPAGLIFLOZIN/METFORMIN ER, INVOKAMET, INVOKAMET XR	SEGLUROMET, SYNJARDY, SYNJARDY XR, XIGDUO XR
Sulfonylurea Agents	GLIPIZIDE 2.5 MG TABLETS	glipizide 5 mg tablets
EAR/NOSE Nasal Steroids	BECONASE AQ, OMNARIS, QNASL, ZETONNA	flunisolide, fluticasone, mometasone, XHANCE
Otic Antibiotics & Combination Products	CETRAXAL	ciprofloxacin otic, ofloxacin otic
	CIPRO HC, CIPROFLOXACIN/FLUOCINOLONE OTIC	ciprofloxacin/dexamethasone otic

(continued)

Drug Class	Excluded Medications	Preferred Alternatives
ENDOCRINE Cushing's Agents	ISTURISA	ketoconazole tablets, mifepristone 300 mg, SIGNIFOR
	RECORLEV	ketoconazole tablets
Gonadotropin-Releasing Hormone (GnRH) Analogs (for Central Precocious Puberty)	LUPRON DEPOT-PED, SUPPRELIN LA	FENSOLVI, TRIPTODUR
Growth Hormones	HUMATROPE, NORDITROPIN FLEXPRO, NUTROPIN AQ NUSPIN, SAIZEN, SAIZENPREP, ZOMACTON	GENOTROPIN, OMNITROPE
	SKYTROFA, SOGROYA	GENOTROPIN, OMNITROPE, NGENLA
Somatostatin Analogs	LANREOTIDE, SANDOSTATIN LAR DEPOT	SOMATULINE DEPOT
	SIGNIFOR LAR	For Acromegaly: SOMATULINE DEPOT For Cushing's Disease: SIGNIFOR
Testosterone Products	AVEED	testosterone cypionate, testosterone enanthate, XYOSTED
	KYZATREX, NATESTO, TLANDO	testosterone gel, testosterone solution, ANDRODERM PATCHES
Thyroid Replacement Therapy	ADTHYZA 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	levothyroxine tablets, thyroid pork, ARMOUR THYROID
	LEVOTHYROXINE CAPSULES, THYQUIDITY, TIROSINT, TIROSINT-SOL	levothyroxine tablets
Miscellaneous Endocrine Agents	CORTROPHIN GEL	No alternatives recommended
GASTROINTESTINAL Antidiarrheal Agents	MYTESI	diphenoxylate/atropine, loperamide
Antiemetics (Oral)	AKYNZEO CAPSULES	granisetron, ondansetron, aprepitant, VARUBI TABLETS
	ANTIVERT, MECLIZINE 50 MG TABLETS	meclizine 25 mg tablets
	ANZEMET	granisetron, ondansetron
	BONJESTA	doxylamine/pyridoxine hcl
	EMEND POWDER PACKETS	aprepitant, VARUBI TABLETS
Bowel Evacuants	CLENPIQ, PLENVU, SUFLAVE, SUTAB	magnesium sulfate/potassium sulfate/sodium sulfate solution, peg 3350/ascorbic acid powder packets
Corticosteroids (Rectal Formulations)	CORTIFOAM	budesonide foam, hydrocortisone enema, UCERIS FOAM
Fecal Microbiota Agents	REBYOTA	Coverage may be approved for the prevention of recurrent Clostridioides difficile infection under certain conditions.
Gallstone Dissolution Agents	RELTONE	ursodiol
Gastroparesis Agents	GIMOTI	No alternatives recommended
Hemorrhoidal Preparations	HYDROCORTISONE/PRAMOXINE 25-18 MG SUPPOSITORIES	hydrocortisone ac suppositories, pramoxine/hydrocortisone cream
	PROCTOFOAM-HC	pramoxine/hydrocortisone cream
Inflammatory Bowel Agents	DIPENTUM	balsalazide disodium, mesalamine dr, mesalamine er, sulfasalazine, PENTASA 250 MG CAPSULES
Irritable Bowel Syndrome & Chronic Constipation Agents	IBSRELA, MOTEGRITY, ZELNORM	LINZESS, TRULANCE
Pancreatic Enzymes	PERTZYE	CREON, PANCREAZE, ZENPEP
Proton Pump Inhibitors	KONVOMEF, NEXIUM PACKETS, PRILOSEC SUSPENSION, RABEPRAZOLE DR SPRINKLE	dexlansoprazole, esomeprazole magnesium, lansoprazole, omeprazole, pantoprazole, rabeprazole
Miscellaneous Gastrointestinal Agents	DARTISLA ODT	glycopyrrolate tablets
HEMATOLOGICAL Antiplatelet Agents	ASPIRIN/OMEPRAZOLE DR, YOSPRALA DR	aspirin plus omeprazole, esomeprazole, lansoprazole, pantoprazole or rabeprazole
Erythropoiesis-Stimulating Agents	ARANESP, EPOGEN, MIRCERA	PROCRIT, RETACRIT
Factor Deficiency Agents & Related Products	IXINITY, RIXUBIS	BENEFIX
	NOVOSEVEN RT	SEVENFACT
	NUWIQ, RECOMBINATE	ADVATE, ADYNOVATE, AFSTYLA, ELOCTATE, ESPEROCT, JIVI, KOGENATE FS, KOVALTRY, NOVOEIGHT, XYNTHA, XYNTHA SOLOFUSE

(continued)

Drug Class	Excluded Medications	Preferred Alternatives
HEMATOLOGICAL Factor Deficiency Agents & Related Products <i>(continued)</i>	REBINYN	ALPROLIX, IDELVION
Granulocyte Colony Stimulating Factors	FYLNETRA, NEULASTA, NYVEPRIA, ROLVEDON, STIMUFEND, UDENYCA	FULPHILA, ZIEXTENZO
	GRANIX, NEUPOGEN, RELEUKO, ZARXIO	NIVESTYM
Hematopoietic & Thrombopoietic Agents	APHEXDA	plerixafor
Hypoxia-Inducible Factor Prolyl Hydroxylase Inhibitors	JESDUVROQ	PROCRIPT, RETACRIT
Iron Replacement Agents	MONOFERRIC	sodium ferric gluconate complex, VENOFER
Sickle Cell Disease Agents	OXBRYTA	hydroxyurea, DROXIA
	SIKLOS	DROXIA
Thrombocytopenia Agents	ALVAIZ	NPLATE, PROMACTA
	MULPLETA	DOPTELET
HEPATITIS Hepatitis C	LEDIPASVIR/SOFOSBUVIR, MAVYRET, SOFOSBUVIR/VELPATASVIR, SOVALDI	EPCLUSA, HARVONI, VOSEVI, ZEPATIER
HIV Antiretrovirals Note: Current patients established on therapy are allowed to continue therapy.	COMPLERA	ODEFSEY
	DELSTRIGO	efavirenz/emtricitabine/tenofovir disoproxil fumarate, efavirenz/lamivudine/tenofovir disoproxil fumarate, BIKTARVY, GENVOYA, ODEFSEY, SYMFI, SYMFI LO, SYMTUZA, TRIUMEQ
	PIFELTRO	efavirenz, EDURANT
	PREZCOBIX	atazanavir, lopinavir/ritonavir, ritonavir, PREZISTA
	RUKOBIA ER	Coverage may be approved for the treatment of human immunodeficiency virus-1 infection in heavily treatment-experienced patients with multidrug-resistant infection.
	STRIBILD	BIKTARVY, GENVOYA
MUSCULOSKELETAL & RHEUMATOLOGY Gout Therapy	ALLOPURINOL 200 MG TABLETS	allopurinol 100 mg tablets
Muscle Relaxants & Antispasmodic Agents	METHOCARBAMOL 1,000 MG TABLETS	methocarbamol 500 mg tablets
Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)	COXANTO, DICLOFENAC 35 MG CAPSULES, FENOPROFEN 200 MG CAPSULES, KETOROLAC NASAL SPRAY, OXAPROZIN 300 MG CAPSULES, RELAFEN DS, TIVORBEX, ZORVOLEX	generic oral nonsteroidal anti-inflammatory drugs
	ELYXYB	celecoxib
	MELOXICAM SUSPENSION	ibuprofen suspension, naproxen suspension
Topical Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)	DICLOFENAC EPOLAMINE PATCHES	FLECTOR PATCHES, LICART PATCHES
OBSTETRICAL & GYNECOLOGICAL Combination Patches	CLIMARA PRO	COMBIPATCH
Contraceptives	LO LOESTRIN FE, NATAZIA, NEXTSTELLIS, TWIRLA, TYBLUME	generic oral, patch and ring contraceptives
	PHEXXI	Barrier methods of contraception, such as condoms, diaphragms, spermicides or sponges.
	SLYND	generic progestin-only oral contraceptives
Estrogen & Estrogen Modifiers for Vaginal Symptoms	ESTRING, IMVEXXY, INTRAROSA, OSPHENA	estradiol cream, estradiol vaginal inserts, PREMARIN CREAM
	FEMRING	estradiol cream, estradiol patches, estradiol tablets, estradiol vaginal inserts, PREMARIN CREAM
Estrogen/Progestin Combinations (Oral)	BIJUVA, PREMPHASE, PREMPRO	estradiol/norethindrone acetate, ethinyl estradiol/norethindrone acetate
Estrogens (Oral)	MENEST, PREMARIN TABLETS	estradiol tablets
Human Chorionic Gonadotropin‡	CHORIONIC GONADOTROPIN 10,000 UNITS	NOVAREL, OVIDREL
Ovulatory Stimulants (Follitropins)	FOLLISTIM AQ	GONAL-F, GONAL-F RFF, GONAL-F RFF REDI-JECT

‡ Please note that product placement is subject to change throughout the year based upon changes in market dynamics.

(continued)

Drug Class	Excluded Medications	Preferred Alternatives
OBSTETRICAL & GYNECOLOGICAL (continued) Prenatal Vitamins	CITRANATAL, NATAL PNV, PREGENNA, TRINAZ	generic prenatal vitamins
Topical Estrogen Agents	ELESTRIN, EVAMIST	estradiol gel, estradiol patches
Vaginal Progesteroes	CRINONE 4%	medroxyprogesterone, megestrol, norethindrone, progesterone
	ENDOMETRIN	CRINONE 8%
ONCOLOGY Acute Myeloid Leukemia (AML) Agents	ONUREG	Coverage may be approved for treatment of Acute Myeloid Leukemia under certain conditions.
	REZLIDHIA	TIBSOVO
	VANFLYTA	RYDAPT
B-Cell Lymphoma Agents	COLUMVI, EPKINLY	cyclophosphamide, cytarabine, dexamethasone, doxorubicin, prednisone, vincristine, KYMRIA, RUXIENCE, YESCARTA
Bendamustine Agents	VIVIMUSTA	bendamustine, BENDEKA
Bevacizumab-Containing Agents	ALYMSYS, AVASTIN, VEGZELMA	ZIRABEV
BRAF Inhibitors	BRAFTOVI	TAFINLAR, ZELBORAF
Bruton Tyrosine Kinase Inhibitors	JAYPIRCA	For Mantle Cell Lymphoma: BRUKINSA, CALQUENCE For Chronic Lymphocytic Leukemia, Small Lymphocytic Lymphoma: BRUKINSA, CALQUENCE, IMBRUVICA, VENCLEXTA
Cyclin-Dependent Kinase 4/6 Inhibitors	IBRANCE	KISQALI, VERZENIO
Docetaxel Agents	DOCIVYX	docetaxel
Interferons	BESREMI	hydroxyurea
Kinase Inhibitor of Vascular Endothelial Growth Factor Receptor	FRUZAQLA	LONSURF
Kinase Inhibitors	TRUQAP	anastrozole, exemestane, letrozole, tamoxifen, KISQALI, KISQALI FEMARA CO-PACK, VERZENIO
MEK Inhibitors	MEKTOVI	COTELLIC, MEKINIST
Multiple Myeloma Agents	XPOVIO	bortezomib, DARZALEX, KYPROLIS, POMALYST, REVLIMID, THALOMID
Myelodysplastic Syndrome Agents	INQOVI	decitabine
Myelofibrosis Agents	INREBIC, OJJAARA	JAKAFI
Non-Small Cell Lung Cancer Agents	AUGTYRO	ROZLYTREK
	KRAZATI	Coverage may be approved for the treatment of KRAS G12C-mutated non-small cell lung cancer.
	TEPMETKO	TABRECTA
PARP Inhibitors	RUBRACA, ZEJULA	LYNPARZA
Prostate Cancer Agents	AKEEGA	abiraterone plus LYNPARZA, TALZENNA plus XTANDI
	CAMCEVI, LEUPROLIDE DEPOT, TRELSTAR	ELIGARD, FIRMAGON, LUPRON DEPOT
	YONSA	abiraterone, XTANDI
Renal Cell Cancer Agents	FOTIVDA	CABOMETYX, INLYTA, LENVIMA
Rituximab-Containing Agents	RIABNI, RITUXAN, RITUXAN HYCELA, TRUXIMA	RUXIENCE
Trastuzumab-Containing Agents	HERCEPTIN, HERCEPTIN HYLECTA, HERZUMA, OGIVRI, ONTRUZANT	KANJINTI, TRAZIMERA
Tyrosine Kinase Inhibitors	QINLOCK	imatinib, pazopanib, sorafenib, sunitinib malate, SPRYCEL, STIVARGA, TASIGNA
OPHTHALMIC Antiglaucoma Agents (Beta-Adrenergic Blockers)	BETIMOL	timolol drops, betaxolol drops, carteolol drops, levobunolol drops
Antiglaucoma Agents (Ophthalmic Prostaglandins)	DURYSTA, IDOSE TR, IYUZEH, XELPROS	bimatoprost drops, latanoprost drops, tafluprost drops, travoprost drops

(continued)

Drug Class	Excluded Medications	Preferred Alternatives
OPHTHALMIC (continued) Antiglaucoma Agents (Other)	RHOPRESSA, ROCKLATAN	betaxolol drops, bimatoprost drops, dorzolamide/timolol drops, latanoprost drops, levobunolol drops, tafluprost drops, timolol drops, travoprost drops
Blepharoptosis Agents	UPNEEQ	No alternatives recommended
Ophthalmic Agents (Complement Protein C5 Inhibitors)	IZERVAY	Coverage may be approved for the treatment of Geographic Atrophy under certain conditions.
Ophthalmic Agents (Vascular Endothelial Growth Inhibitors)	EYLEA HD, VABYSMO	EYLEA
	LUCENTIS	BYOOVIZ, CIMERLI
	SUSVIMO	No alternatives recommended
Ophthalmic Agents (Other)	ATROPINE (PRESERVATIVE FREE) 1% EYE SINGLE USE DROPPERETTE	atropine 1% drops
	CYSTADROPS	CYSTARAN
	VERKAZIA	azelastine drops, bepotastine drops, cromolyn drops, epinastine drops, olopatadine drops
	VUITY	No alternatives recommended
Ophthalmic Anti-Allergic	ALOCRIIL, ALOMIDE, ALREX, ZERVIATE	azelastine drops, bepotastine drops, cromolyn drops, epinastine drops, olopatadine drops
Ophthalmic Anti-Inflammatory	FLAREX, FML FORTE, MAXIDEX, PRED MILD	dexamethasone drops, difluprednate drops, fluorometholone drops, loteprednol 0.5% drops, prednisolone drops
Ophthalmic Combinations	TOBRADEX ST, ZYLET	tobramycin/dexamethasone drops
Ophthalmic Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)	ACUVAIL, NEVANAC	bromfenac drops, diclofenac drops, ketorolac drops
Ophthalmic Quinolone Antibiotics	BESIVANCE, CILOXAN OINTMENT	ciprofloxacin drops, gatifloxacin drops, levofloxacin drops, moxifloxacin drops, ofloxacin drops
OSTEOARTHRITIS Hyaluronic Acid Derivatives	DUROLANE, GEL-ONE, GELSYN-3, GENVISC 850, HYALGAN, HYMOVIS, SUPARTZ FX, SYNOJOYNT, SYNVISC, SYNVISC-ONE, TRILURON, TRIVISC, VISCO-3	EUFLEXXA, MONOVISC, ORTHOVISC
RENAL Nephropathic Cystinosis Agents	PROCYSBI	CYSTAGON
Nephropathy Agents	FILSPARI	benazepril, candesartan, irbesartan, lisinopril, losartan, ramipril, valsartan
Nocturnal Polyuria Agents	NOCTIVA	desmopressin tablets
Overactive Bladder Agents	OXYBUTYNYN 2.5 MG, VESICARE LS	oxybutynin er, oxybutynin solution, oxybutynin 5 mg tablets, MYRBETRIQ ER
Phosphate Binders	FOSRENOL POWDER PACKETS, XPHOZAH	calcium acetate, lanthanum, sevelamer carbonate, sevelamer hcl, VELPHORO
Miscellaneous Urologicals	URIMAR-T CAPSULES, URNEVA	uro mp, uro sp
RESPIRATORY Epinephrine Auto-Injector Systems	EPINEPHRINE AUTO-INJECTOR (by A-S Medication, Amneal Pharma, Avkare)	epinephrine auto-injector (by Mylan, Teva), AUVI-Q, EPIPEN, EPIPEN JR
Idiopathic Pulmonary Fibrosis Agents	PIRFENIDONE 534 MG TABLETS	pirfenidone, OFEV
Immunological Agents for Asthma	CINQAIR	DUPIXENT, FASENRA, NUCALA, TEZSPIRE, XOLAIR
Long-Acting Beta Agonist Inhalers	SEREVENT DISKUS	STRIVERDI RESPIMAT
Long-Acting Muscarinic Antagonist Inhalers	INCRUSE ELLIPTA, TUDORZA PRESSAIR	tiotropium inhaler, SPIRIVA HANDHALER, SPIRIVA RESPIMAT
Long-Acting Muscarinic Antagonist/ Long-Acting Beta-Agonist Combination Inhalers	BEVESPI AEROSPHERE, DUAKLIR PRESSAIR	ANORO ELLIPTA, STIOLTO RESPIMAT
Pulmonary Anti-Inflammatory Inhalers	ALVESCO, ARMONAIR DIGIHALER, FLOVENT DISKUS, FLOVENT HFA, FLUTICASONE PROPIONATE DISKUS, FLUTICASONE PROPIONATE HFA, PULMICORT FLEXHALER	ARNUITY ELLIPTA, ASMANEX HFA, ASMANEX TWISTHALER, QVAR REDIHALER

(continued)

Drug Class	Excluded Medications	Preferred Alternatives
RESPIRATORY (continued) Pulmonary Anti-Inflammatory/ Beta-Agonist Combination Inhalers	AIRDUO RESPICLICK, FLUTICASONE/SALMETEROL DPI (by A-S Medication, Teva), FLUTICASONE/SALMETEROL HFA, FLUTICASONE/VILANTEROL	budesonide/formoterol, fluticasone/salmeterol dpi (by Hikma, Prasco, Proficient Rx), ADVAIR HFA, BREO ELLIPTA, DULERA
Short-Acting Beta ₂ -Agonist Inhalers	ALBUTEROL SULFATE HFA (by A-S Medication, Prasco), LEVALBUTEROL HFA, PROAIR DIGIHALER, PROAIR RESPICLICK, VENTOLIN HFA, XOPENEX HFA	albuterol sulfate hfa (by AHP, Cipla, Civica, Exelan, Lupin, Perrigo, Sandoz, Teva & West-Ward)
MISCELLANEOUS AGENTS Allergen Immunotherapy	PALFORZIA	Coverage may be approved for treatment of Peanut Allergy under certain conditions.
Benign Prostatic Hyperplasia Agents	ENTADFI	finasteride 5 mg plus tadalafil 5 mg
Botulinum Toxin Products	BOTOX	DYSPOORT, MYOBLOC Migraine - AIMOVIG, AJOVY, EMGALITY, QULIPTA Hyperhidrosis - Over-the-Counter aluminum chloride containing products
	DAXXIFY, XEOMIN	DYSPOORT, MYOBLOC
Enzyme Replacement Therapy - Fabry Disease	FABRAZYME	ELFABRIO
Eosinophilic Esophagitis Agents	EOHILIA	budesonide suspension made into a slurry or suspension and swallowed (not inhaled)
Gaucher Disease Agents	ELELYSO, VPRIV	CEREZYME
Glucocorticoids	ALKINDI SPRINKLE	hydrocortisone tablets
	HEMADY	dexamethasone tablets
Hereditary Angioedema	BERINERT	CINRYZE, RUCONEST
Immune Globulins	CUTAQUIG	SC: GAMMAGARD LIQUID, GAMUNEX-C, XEMBIFY
	GAMMAKED	IV: GAMMAGARD LIQUID, GAMMAGARD S-D, GAMUNEX-C SC: GAMMAGARD LIQUID, GAMUNEX-C, XEMBIFY
Immunosuppressant Agents	ENVARUSUS XR	tacrolimus
	JYLAMVO, XATMEP	methotrexate tablets
	OTREXUP	RASUVO
Inflammatory Conditions Agents	SOVUNA	hydroxychloroquine tablets
Infused TNF Antagonists	AVSOLA, INFlixIMAB, REMICADE, RENFLEXIS	INFLECTRA
Metabolic Agents	RAVICTI	sodium phenylbutyrate, PHEBURANE
	RIVFLOZA	Coverage may be approved for the treatment of Primary Hyperoxaluria Type 1 under certain conditions
Myasthenia Gravis Agents	RYSTIGGO	Coverage may be approved for the treatment of generalized myasthenia gravis.
	ZILBRYSQ	SOLIRIS
Neuromyelitis Optica Spectrum Disorder Agents	UPLIZNA	ENSPRYNG
Osteoporosis (Bone Modifiers)	EVENITY, PROLIA	alendronate, ibandronate, risedronate, zoledronic acid, FORTEO, TYMLOS
Polyneuropathy of Hereditary Transthyretin-Mediated Amyloidosis	AMVUTTRA, ONPATTRO, WAINUA	Coverage may be approved for treatment of Polyneuropathy of Hereditary Transthyretin-Mediated Amyloidosis (hATTR) under certain conditions.
Potassium Replacement Agents	POKONZA	potassium chloride
Vasculitis Agents	TAVNEOS	azathioprine, methotrexate, mycophenolate, RUXIENCE
Wilson's Disease Agents	CUVRIOR, TRIENTINE 500 MG CAPSULES	trientine 250 mg capsules

(continued)

Indication Based Management

Drug Class	Excluded Medications	Preferred Alternatives
Adalimumab Products for Inflammatory Conditions‡	ADALIMUMAB-AACF, IDACIO ADALIMUMAB-AATY, YUFLYMA ADALIMUMAB-FKJP, HULIO ABRILADA AMJEVITA HADLIMA HUMIRA (by Cordavis) HYRIMOZ (by Cordavis) YUSIMRY	ADALIMUMAB-ADAZ, HYRIMOZ (by Sandoz) ADALIMUMAB-ADB (by Boehringer Ingelheim & Qualient), CYLTEZO ADALIMUMAB-RYVK (by Qualient), SIMLANDI HUMIRA (by AbbVie)
Inflammatory Conditions‡ where VELSIPITY is indicated	VELSIPITY	See below for Ulcerative Colitis Preferred Alternatives
Drug Class	Other Medications	Preferred Alternatives
Inflammatory Conditions‡	All other Brand Name medications for Inflammatory Conditions may require a trial of one or more Preferred medications as part of the Formulary exceptions process.	Preferred: ADALIMUMAB-ADAZ, HYRIMOZ (by Sandoz) ADALIMUMAB-ADB (by Boehringer Ingelheim & Qualient), CYLTEZO ADALIMUMAB-RYVK (by Qualient), SIMLANDI HUMIRA (by AbbVie) ENBREL, OTEZLA, RINVOQ, SKYRIZI, SOTYKTU, STELARA SC, TALTZ, TREMFYA, XELJANZ, XELJANZ XR, ZYMFENTRA Preferred for Non-Radiographic Axial Spondyloarthritis (nr-axSpA) only: CIMZIA, TALTZ Preferred after use of one Preferred Medication: ACTEMRA SC, CIMZIA (for Crohn's Disease only), OMVOH SC, SIMPONI 100 MG

‡ Please note that formulary and product placement for treatment of Inflammatory and Atopic Conditions in the Inflammatory and Atopic Conditions Care Value (IACCV) Program are subject to change throughout the year based upon changes in market dynamics, new indications for existing products, biosimilar and new product launches.

Excluded Medications/Products at a Glance

ABILIFY [®] ABRILADA ABSORICA LD ACANYA [®] ACIPHEX [®] ACUVAIL ADALIMUMAB-AACF ADALIMUMAB-AATY ADALIMUMAB-FKJP ADCIRCA [®] ADDERALL [®] , ADDERALL XR [®] ADMELOG ADTHYZA 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG ADUHELM ADVAIR DISKUS [®] AFINITOR [®] , AFINITOR DISPERZ [®] AFREZZA AGAMREE AIRDUO RESPICLICK AKEEGA AKYNZEO CAPSULES ALBUTEROL SULFATE HFA (by A-S Medication, Prasco) ALCORTIN A ALINIA TABLETS [®] ALKINDI SPRINKLE ALLOPURINOL 200 MG TABLETS ALOCRIL ALOGLIPTIN ALOGLIPTIN/METFORMIN ALOGLIPTIN/PIOGLITAZONE ALOMIDE ALREX ALTOPREV ALVAIZ ALVESCO ALYMSYS AMBIEN [®] , AMBIEN CR [®] AMITIZA [®] AMJEVITA AMONDYS 45 AMPYRA [®]	AMRIX [®] AMVUTTRA ANDROGEL [®] ANTARA ANTIVERT ANUSOL-HC [®] ANZEMET APHEXDA APIDRA APLENZIN APOKYN APTENSIO XR [®] ARANESP ARIMIDEX [®] ARKRAY PEN NEEDLES & SYRINGES ARMONAIR DIGIHALER ASCENSIA (CONTOUR) ASPIRIN/OMEPRAZOLE DR ASPRUZYO SPRINKLE ER ATACAND [®] , ATACAND HCT [®] ATORVALIQ ATRALIN [®] ATRIPLA [®] ATROPINE PF 1% DROPPERETTE AUBAGIO [®] AUGTYRO AUVELITY ER AVALIDE [®] , AVAPRO [®] AVASTIN AVEED AVODART [®] AVSOLA AZOPT [®] AZOR [®] BACLOFEN 15 MG TABLETS, BACLOFEN SOLUTION BALCOLTRA [®] BANZEL [®] BARACLUDE TABLETS [®] BECONASE AQ BENICAR [®] , BENICAR HCT [®] BEPREVE [®] BERINERT	BESIVANCE BESREMI BETIMOL BEVESPI AEROSPHERE BIDIL [®] BIGFOOT UNITY PROGRAM KIT BIJUVA BONJESTA BOTOX BRAFTOVI BRENZAVVY BRIUMVI BROMSITE [®] BUPAP [®] BUPROPION XL 450 MG BUTRANS [®] BYSTOLIC [®] CABTREGO CALCIOTRIENE FOAM CAMCEVI CANASA [®] CARAC CARAFATE [®] CAROSPIR [®] CELEBREX [®] CELEXA [®] CETRALAX CHORIONIC GONADOTROPIN 10,000 UNITS CIALIS [®] CILOXAN OINTMENT CINQAIR CIPRO HC CIPROFLOXACIN/ FLUOCINOLONE OTIC CITALOPRAM CAPSULES CITRANATAL CLENIA PLUS CLENPIQ CLIMARA PRO CLINDAGEL [®] CLONIDINE ER 0.17 MG COLCRYX [®] COLUMVI	COMPLERA CONCERTA [®] CONDYLOX CONJUPRI CONZIP COPAXONE [®] COREG [®] CORLANOR CORTIFOAM CORTROPHIN GEL COSOPT [®] , COSOPT PF [®] COXANTO COZAAR [®] , HYZAAR [®] CRESTOR [®] CRINONE 4% CUPRIMINE [®] CUTAQUIG CUVPOSA [®] CUVRIOR CYMBALTA [®] CYSTADANE [®] CYSTADROPS CYTOMEL [®] DALIRESPO [®] DAPAGLIFLOZIN DAPAGLIFLOZIN/ METFORMIN ER DARTISLA ODT DAXXIFY DAYBUE DELSTRIGO DELZICOL [®] DETROL [®] , DETROL LA [®] DEXILANT [®] DHIVY DICLOFENAC 35 MG CAPSULES DICLOFENAC EPOLAMINE PATCHES DIOVAN [®] , DIOVAN HCT [®] DIPENTUM DIVIGEL [®] DOCIVYX DORAL DORYX DR 50 MG [®] & 200 MG [®]	DORYX DR 80 MG, DORYX MPC, DOXYCYCLINE HYCLATE DR 80 MG DRIZALMA SPRINKLE DRYSOL DUAKLIR PRESSAIR DUREZOL [®] DUROLANE DURYSTA DYANAVAL XR ECOZA EDARBI, EDARBYCLOR EFFEXOR XR [®] ELELYSO ELESTRIN ELIDEL [®] ELYXYB EMEND CAPSULES [®] , TRIFOLD PACK [®] EMEND POWDER PACKETS EMFLAZA [®] ENDOMETRIN ENTADFI ENVARBUS XR EOHILIA EPANED [®] EPINEPHRINE AUTO-INJECTOR (by A-S Medication, Amneal Pharma, Avkare) EPKINLY EPOGEN EPRONTIA ERTACZO ESBRIET [®] DHIVY ESTRACE CREAM [®] ESTRING ESTROGEL [®] EVAMIST EVEKEO [®] EVENTY EXFORGE [®] , EXFORGE HCT [®] EXJADE [®] EXONDYS 51 EXTAVIA	EYLEA HD EZALLOR SPRINKLE FABIOR FABRAZYME FEMRING FENOFIBRATE CAPSULES (30 MG, 50 MG, 90 MG, 150 MG) FENOPROFEN 200 MG CAPSULES FENTANYL CITRATE BUCCAL TABLETS FENTORA FERAHEME [®] FIASP FILSPARI FINTEPLA FIRAZYR [®] FIRVANQ FLAREX FLEQSUVVY [®] FLOVENT DISKUS, FLOVENT HFA FLUOROURACIL 0.5% CREAM FLUTICASON PROPRIONATE DISKUS, FLUTICASON PROPRIONATE HFA FLUTICASON/ SALMETEROL DPI (by A-S Medication, Teva) FLUTICASON/ SALMETEROL HFA FLUTICASON/VILANTEROL FML FORTE FOCALIN [®] , FOCALIN XR [®] FOLLISTIM AQ FORFIVO XL FOSRENOL CHEWABLE TABLETS [®] FOSRENOL POWDER PACKETS FOTIVDA FRUZAQLA FUROSCIX FYLNETRA
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Excluded Medications/Products at a Glance (continued)

GAMMAKED	LAMPIT	NORDITROPIN FLEXPRO	PROZAC [^]	SUFLAVE	VANCOMYCIN
GANIRELIX ACETATE [^]	LANREOTIDE	NORITATE	PULMICORT FLEXHALER	SULCONAZOLE	25 MG/ML SOLUTION
GEL-ONE	LANTUS	NORLIQVA	PULMICORT RESPULES [^]	SULFACETAMIDE/SULFUR	VANFLYTA
GELSYN-3	LATUDA [^]	NORPACE [^]	PYLERA [^]	8%-4% CLEANSER	VANOS [^]
GENVISC 850	LEDIPASVIR/SOFOSBUVIR	NORPACE CR	PYRIDIUM [^]	SULFACETAMIDE/SULFUR	VEGZELMA
GILENYA	LEQEEMI	NORTHERA [^]	QALSODY	9%-4.25% SUSPENSION	VELSIPITY
GIMOTI	LEQVIO	NORVASC [^]	QBRELIS	SUPARTZ FX	VELTIN [^]
GLEEVEC [^]	LETAIRIS [^]	NOVO NORDISK	QBREXZA	SUPPRELIN LA	VENLAFAXINE BESYLATE ER
GLIPIZIDE 2.5 MG TABLETS	LEUPROLIDE DEPOT	PEN NEEDLES	QDOLO	SUPREP [^]	VENTOLIN HFA
GLUCAGEN HYPOKIT	LEVALBUTEROL HFA	NOVOLIN, NOVOLIN MIX,	QINLOCK	SUSVIMO	VERDESO FOAM
GLUCAGON EMERGENCY KIT	LEVAMLODIPINE	RELION NOVOLIN,	QNASL	SUTAB	VEREGEN
(by Fresenius)	LEVEMIR	RELION NOVOLIN MIX	QTERN	SYNOJOYNT	VERKAZIA
GLUMETZA [^]	LEVOTHYROXINE CAPSULES	NOVOLOG, NOVOLOG MIX,	QUARTETTE [^]	SYNTHROID [^]	VESICARE [^]
GOCOVRI ER	LEXAPRO [^]	RELION NOVOLG,	QUAZEPAM	SYNVISC, SYNVISCO-ONE	VESICARE LS
GRANIX	LEXETTE	RELION NOVOLG MIX	QUETIAPINE 150 MG TABLETS	TADLIQ	VIAGRA [^]
HADLIMA	LIALDA [^]	NOVOSEVEN RT	QUILLICHEW ER	TARGRETIN CAPSULES [^]	VICTOZA
HEMADY	LIBRAX [^]	NOXAFIL TABLETS [^]	QUILLIVANT XR	TASCENSO ODT	VIIBRYD [^]
HEMANGEOL	LIDOCAINE/TETRACAINE	NUCYNTA, NUCYNTE ER	RABEPRAZOLE DR SPRINKLE	TAVNEOS	VILTEPSO
HERCEPTIN,	LIDODERM [^]	NUTROPIN AQ NUSPIN	RAPAFLO [^]	TAYTULLA [^]	VIMOVO [^]
HERCEPTIN HYLECTA	LIKMEZ	NUVARING [^]	RAVICTI	TAZAROTENE FOAM	VIMPAT [^]
HERZUMA	LIPITOR [^]	NUVIGIL [^]	REBINYN	TAZORAC 0.05% CREAM	VISCO-3
HOME AIDE DIAGNOSTICS	LIPOFEN	NUWIQ	REBYOTA	TAZORAC 0.1% CREAM [^] ,	VIVELLE-DOT [^]
PEN NEEDLES & SYRINGES	LIQREV	NYVEPRIA	RECOMBINATE	TAZORAC GEL [^]	VIVIMUSTA
HTL-STREFA	LO LOESTRIN FE	OGIVRI	RECORLEV	TECFIDERA [^]	VIVLODEX [^]
PEN NEEDLES & SYRINGES	LOCODIA [^]	OJJAARA	RELAFEN DS	TEKTURNA [^]	VPRIV
HULIO	LOCUID LIPOCREAM [^]	OMNARIS	RELEUKO	TEMPO (WELCOME KIT,	VUIITY
HUMATROPE	LODOCO	ONETOUCH SOLUTIONS	RELEXII ER	REFILL KIT, SMART BUTTON)	VUSSION
HUMIRA (by Cordavis)	LOESTRIN [^] , LOESTRIN FE [^]	STARTER KIT	RELPAK [^]	TEPMETKO	VYEPTI
HYALGAN	LOREEV XR	ONF [^]	RELSTONE	TESTIM [^]	VYONDYS 53
HYDROCORTISONE/	LOTRELA [^]	ONGENTYS	RELYVRIO	THALITONE	VYTORIN [^]
PRAMOXINE	LOTRONEX [^]	ONGLYZA [^]	REMICADE	THIOLA [^]	VYTORIN [^]
25-18 MG SUPPOSITORIES	LOVAZA [^]	ONPATTRO	RENAGEL [^]	THYQUIDITY	WAINUA
HYMNOVIS	LOVENOX [^]	ONTRUZANT	RENFLEXIS	TIKOSYN [^]	WELCHOL [^]
HYRIMOZ (by Cordavis)	LUCEMYRA	ONUREG	RETIN-A MICRO 0.04% & 0.1% [^]	TIMOPTIC OCULOSE [^]	WELLBUTRIN SR [^] ,
IBRANCE	LUCENTIS	ONZETRA XSAIL	REZLIDHIA	TIROSINT, TIROSINT-SOL	WELLBUTRIN XL [^]
IBSRELA	LULICONAZOLE	ORACEA [^]	REZVOGLAR	TIVORBEX	WINLEVI
IDACIO	LUNESTA [^]	OSMOLEX ER	RHOPRESSA, ROCKLATAN	TLANDO	XADAGO
IDOSE TR	LUPRON DEPOT-PED	OSPHERA	RIABNI	TOBI SOLUTION [^]	XALATAN [^]
IMITREX [^]	LUZU	OTREXUP	RITALIN [^] , RITALIN LA [^]	TOBRADEX ST	XANAX [^] , XANAX XR [^]
IMPOYZ	LYRICA [^] , LYRICA CR [^]	OWEN MUMFORD	RITUXAN, RITUXAN HYCELA	TOLSURA	XATMEP
IMVEXXY	LYVISPAP	PEN NEEDLES	RIVFLOZA	TOPAMAX [^]	XELPROS
INCRUSE ELLIPTA	MAVYRET	OXAPROZIN	RIXUBIS	TOPICORT SPRAY [^]	XELSTRYM
INDERAL LA [^]	MAXALT [^] , MAXALT MLT [^]	300 MG CAPSULES	ROCHE (ACCU-CHEK)	TOPROL XL [^]	XENAZINE [^]
INDERAL XL, INNOPRAN XL	MAXIDEX	OXYAD	ROLVEDON	TOVIAZ [^]	XEOMIN
INDOCIN SUPPOSITORIES [^] ,	MECLIZINE 50 MG TABLETS	OXBRYTA	ROSUVASTATIN/EZETIMIBE	TRADJENTA	XERESE
INDOCIN SUSPENSION [^]	MEKTOVI	OXISTAT CREAM [^]	ROXYBOND	TRAMADOL	XIMINO
INFLIXIMAB	MELOXICAM SUSPENSION	OXISTAT LOTION	ROZEREM [^]	25 MG & 100 MG TABLETS	XOLEGEL
INPEFA	MENEST	OXYBUTYNYN 2.5 MG	RUBRACA	TRAMADOL ER CAPSULES	XOPENEX HFA
INQOVI	MESTINON [^]	OXYCODONE ER	RUKOBIA ER	TRAMADOL SOLUTION	XPHOZAH
INREBIC	METFORMIN 625 MG TABLETS	OZOBAX, OZOBAX DS	RYSTIGGO	TRANSDERM-SCOP [^]	XPROVIO
INSULIN ASPART, INSULIN	METHOCARBAMOL	PALFORZIA	SABRIL [^]	TRAVATAN Z [^]	XTAMPZA ER
ASPART PROTAMINE	1,000 MG TABLETS	PENNSAID [^]	SAFYRAL [^]	TRELSTAR	XULTOPHY
INSULIN DEGLUDEC	METHYLPHENIDATE ER	PERCOCET [^]	SAIZEN, SAIZENPREP	TREXIMET [^]	XYREM
INSULIN GLARGINE U-100,	45 MG, 63 MG & 72 MG	PERFORMIST [^]	SAMSCA [^]	TRI-LUMA	YASMIN [^]
INSULIN GLARGINE U-300	MICARDIS [^] , MICARDIS HCT [^]	PERTZYM	SANDOSTATIN LAR DEPOT	TRIBENZOR [^]	YONSA
INSULIN GLARGINE-YFGN	MICONAZOLE/ZINC OXIDE/	PEXEVA	SAPHRIS [^]	TRICOR [^]	YOSPRALA DR
INTRAROSA	PETROLATUM	PIFELTRO	SAVAYSA	TRIENTINE 500 MG CAPSULES	YUFLYMA
INTUNIV [^]	MINASTRIN 24 FE [^]	PIRFENIDONE	SEASONIQUE [^]	TRILEPTAL [^]	YUSIMRY
INVEGA HAFYERA	MINIVELLE [^]	PIRENEPONE	SEGLENTIS	TRILURON	ZARXIO
INVOKAMET, INVOKAMET XR,	MINOCYCLINE	534 MG TABLETS	SENSIPAR [^]	TRINAZ	ZAVESCA [^]
INVOKANA	BIPHASIC TABLETS	PLAQUENIL [^]	SEREVENT DISKUS	TRIVIDIA	ZAVZPRET
ISTALOL [^]	MINOCYCLINE ER CAPSULES	PLAVIX [^]	SERNIVO	(NIPRO DIAGNOSTICS)	ZEGALOGUE
ISTURISA	MIRCERA	PLENUVU	SEROQUEL [^] , SEROQUEL XR [^]	PEN NEEDLES & SYRINGES	ZEGERID [^]
IXINITY	MIRCETTE [^]	PLIAGLIS	SERTRALINE CAPSULES	TRIVIDIA	ZEJULA
IYUZEH	MONOFERRIC	POKONZA	SIGNIFOR LAR	(TRUETEST, TRUETRACK)	ZELAPAR
IZERVAY	MOTEGRITY	PRADAXA	SIKLOS	TRIVISC	ZELNORM
JADENU [^] , JADENU SPRINKLE [^]	MOTPOLY XR	PRALUNT	SIMPLE DIAGNOSTICS	TRUQAP	ZERVIAE
JAYPIRCA	MOVIPREP [^]	PRED MILD	PEN NEEDLES & SYRINGES	TRUVADA [^]	ZETIA [^]
JENTADUETO,	MULPLETA	PREGENNA	SINGULAIR [^]	TRUXIMA	ZETONNA
JENTADUETO XR	MYTESI	PREMARIN TABLETS,	SITAGLIPTIN	TUDORZA PRESSAIR	ZILBRYSQ
JESDUVROQ	NALFON CAPSULES [^]	PREMPHASE, PREMPRO	SITAVIG	TWIRLA	ZILXI
JYLAMVO	NAMENDA XR [^]	PREVACID [^] ,	SIVEXTRO	TYBLUME	ZIMHI
KAPSPARGO SPRINKLE	NATAL PNV	PREVACID SOLUTAB [^]	SKYCLARYS	UDENYCA	ZIOPTAN [^]
KATERZIA	NATAZIA	PREZCOBIX	SKYTROFA	ULORIC [^]	ZIPSOR [^]
KAZANO	NATESTO	PRIOSEC SUSPENSION	SKYND	ULTIMED	ZITUVIO
KEPPRA [^] , KEPPRA XR [^]	NATROBA [^]	PRIMIDONE 125 MG TABLETS	SOAAZ	PEN NEEDLES & SYRINGES	ZMA CLEAR
KETOROLAC NASAL SPRAY	NESINA	PRIMLEV	SODIUM OXYBATE (by Amneal)	ULTRAVATE	ZOCOR [^]
KEVEYIS [^]	NEULASTA	PRISTIQ [^]	SOFOSBUVIR/VELPATASVIR	UPLIZNA	ZOLOFT [^]
KLISYRI	NEUROGEN	PROAIR DIGIHALER,	SOGROYA	UPNEEQ	ZOLPIDEM 7.5 MG CAPSULES
KLONOPIN [^]	NEURONTIN [^]	PROAIR RESPICLICK	SORILUX	URIMAR-T CAPSULES	ZOMACTON
KOMBIGLYZE XR [^]	NEVANAC	PROCTOFOAM-HC	SOVALDI	URNEVA	ZOMIG TABLETS [^]
KONVOMEP	NEXICLON XR	PROCYBSI	SOVUNA	UROXATRAL [^]	ZONEGRAN [^]
KORLYM [^]	NEXIUM CAPSULES [^]	PRODIGY DIABETES CARE	SPRAVATO	VABYSMO	ZONISADE
KRAZATI	NEXIUM PACKETS	PROLATE SOLUTION	STEGLUJAN	VAGIFEM [^]	ZORVOLEX
KUVAN [^]	NEXTSTELLIS	PROLIA	STIMUFEND	VALIUM [^]	ZOVIRAX OINTMENT [^]
KYZATREX	NITROFURANTOIN	PROTONIX [^]	STRATTERA [^]	VALSARTAN SOLUTION	ZYCLARA
LAMICTAL [^] , LAMICTAL ODT [^] ,	50 MG/5 ML SUSPENSION	PROVIGIL [^]	STRIBILD	VALTRESX [^]	ZYTIG [^]
LAMICTAL XR [^]	NOCTIVA		SUBOXONE [^]		

[^] Multisource brand exclusion – The generic equivalent of this brand-name medication is covered under your plan. FDA-approved generic medications meet strict standards and contain the same active ingredients as their corresponding brand-name medications, although they may have a different appearance. As new generic medications become available, additional multisource brand products may become excluded.