



For Colorado Plans Student Formulary – January 2023

Wellfleet Rx is a pharmacy solution provided by Wellfleet Group, LLC (Wellfleet). This document represents the efforts of the Wellfleet Rx Pharmacy and Therapeutics (P&T) and Value Assessment Committees, in collaboration with Express Scripts (ESI), to provide physicians and pharmacists with a method to evaluate the safety, efficacy and cost-effectiveness of commercially available drug products. This is accomplished through the auspices of the P&T Committees with input from internal departments at Wellfleet and its Student Health Advisory Board. These committees meet quarterly and more often as warranted to ensure clinical relevancy of the Formulary. To accommodate changes to this document, updates are made accessible as necessary. The P&T Committees use the following criteria in the evaluation of drug selection for the Student Formulary:

- Drug safety profile
- Drug efficacy
- Comparison of relevant therapeutic benefits to current formulary agents of similar use, and to minimize therapeutic duplication where possible
- Cost-effectiveness relative to comparable therapies

How to Use the Formulary

The Formulary is a list of medications available to Wellfleet Rx members under their pharmacy benefit. All drugs are listed by their generic names or most common proprietary (branded) name. Any drugs not found in this formulary listing or any formulary updates published by Wellfleet Rx are considered non-formulary drugs and require prior authorization.

All drugs are listed in each category in alphabetical order by generic or brand name. If the generic drug is FDA approved, it will appear *italicized* in the formulary listing. Covered brand drugs appear in CAPITALIZED font.

Some drugs on the formulary have certain process requirements or limitations for coverage. These are denoted by:

Symbol	Name	Description
AGE	Age Edit	Drug may not be recommended for some patients based on age.
Och	Oral Chemo Drug	Refer to your plan document for oral chemotherapy drug benefits.
PA	Prior Authorization	Requires your doctor to request prior authorization to support use of this drug.
QL	Quantity Limit	Coverage may be limited to specific quantities per prescription and/or time period.
SP	Specialty	Subject to Specialty tier Copay. Pharmaceutical, biotech or biological drugs that are used in the management of chronic, orphan or rare diseases and has a monthly cost $\geq \$670$ for a 30-day supply. These injectable or non-injectable medications may possess more than one of the following attributes: <ul style="list-style-type: none">• Requires specialized storage, distribution, and/or handling• Frequent dosing adjustments and clinical monitoring to decrease potential for drug toxicity and improve clinical outcomes• Involves additional patient education, adherence, and/or support• May include generic or biosimilar products• Limited or exclusive drug distribution restrictions
ST	Step Therapy	Coverage may depend on previous use of another drug.
ACA	ACA Preventative Medications	ACA Preventative Medications. These products will have \$0 cost-share for specific populations.
Opioid	Opioid Medications	These medications have additional limitations and rules. See below under 'Opioid Medications' for more information.
MSD	Medical Service Drug	Often administered by a physician in their office and covered under the medical benefit.

PO Box 15369, Springfield, MA 01115

Copyright © 2019 Wellfleet Group, LLC. All rights reserved.

www.wellfleetrx.com

i

Wellfleet is the marketing name used to refer to the insurance and administrative operations of Wellfleet Insurance Company, Wellfleet New York Insurance Company, and Wellfleet Group, LLC. All insurance products are administered or managed by Wellfleet Group, LLC. Product availability is based on regulatory approval and may differ among companies. The Wellfleet Rx Student Formulary is proprietary to Wellfleet Group, LLC and protected by applicable copyright, trademark, and trade secrets laws. Information contained therein may not be published, distributed, or reproduced, in part or whole, without express written consent of Wellfleet Group, LLC.



Benefit Coverage and Limitations

This printed Formulary does not provide information regarding the specific coverage and limitations an individual member may have. Many members have specific benefit inclusions, exclusions, copays, or a lack of coverage, which are not reflected in the Formulary. For example, drugs for the treatment of infertility may not be covered. Refer to your benefit summary for more information regarding your specific coverage.

The Formulary applies only to outpatient drugs provided to members and does not apply to medications used in inpatient settings. If a member has any specific questions regarding their coverage, they should contact Wellfleet or Wellfleet Rx at the phone numbers listed on their ID card.

Excluded Agents

As new drugs become available, they will be considered for coverage under the Student Formulary. The plan administrator has the right to decide what drugs are covered and to what extent, as well as the right to modify coverage including the exclusion of any prescription drugs. Please note that prescribing guidelines such as Prior Authorization, Step Therapy, Quantity Limit, etc., may still apply to Formulary Therapeutic Alternatives.

Non-Formulary and Step Therapy Exception Requests

A member (or their appointed representative, prescribing physician, or authorized prescriber) may request a standard/non-urgent or expedited/urgent preservice/prior and current authorization for a drug that is subjected to utilization management tools such as step therapy. To initiate an exception request, contact 877-640-7938. Prior authorization guidelines will be made available to the member, member's authorization representative, prescribing physician and other authorized prescriber upon request.

Depending upon a member's specific benefit, the following topics may apply:

1. Generic Substitution

When available, FDA approved generic drug used in most situations, regardless of the brand name indicated. Members usually have lower copays and or co-insurance when they use generic drugs. This policy is not meant to preclude or supplant any state statutes that may exist. All drugs that are or become available generically are subject to review by the P&T Committee. Wellfleet Rx approves such multi- source drugs for addition to the MAC list based on the following criteria:

- A multi- source drug product manufactured by at least one (1) nationally marketed company.
- At least one (1) of the generic manufacturer's products must have an "A" rating or the generic product has been determined to be unassociated with efficacy, safety or bioequivalency concerns by the P&T Committee.
- Drug product will be approved for generic substitution by the P&T Committee.

If a member requests a brand name drug instead of an approved generic, the member, based on their coverage, is typically required to pay the difference in cost between the brand and the generic. Doctors can request prior authorization if they determine that there is a medical need for the brand name drug.

2. Three Tier Benefit

The Formulary may be applied to a three-tier benefit design, where the member shares the cost of prescription drug therapy at three levels of copayment. In most instances, generically available drugs will be covered under the first or lowest copay tier, branded drugs listed on the Formulary will be covered under the second copay tier, and branded drugs not on the Formulary will be covered under the third or highest copay tier. In order to see applicable copays for your plan, navigate to your school landing page located at WellfleetStudent.com and view your summary of benefits.

3. Medication Request Process

Depending upon plan benefit design, a medication request process may apply as follows:

A. Formulary Drugs

Drugs that are listed in the Formulary with associated Prior Authorization (PA) require evaluation, per P&T Committee Prior Authorization guidelines prior to dispensing at a network pharmacy. Each request will be reviewed on an individual patient need basis. If the request does not meet the guidelines established by the P&T Committee, the request will not be approved, and alternative therapy may be recommended.

B. Non-Formulary Drugs

Any drug not found in the Formulary listing, or any Formulary updates published by Wellfleet Rx, shall be considered a Non-Formulary drug. Coverage for non-formulary agents may be applied for in advance. When a member gives a prescription order for a non-formulary drug to a pharmacist, the pharmacist will evaluate the patient's drug history and contact the physician to determine if there is a reasonable medical need for a non-formulary drug. Each request will be reviewed on an individual patient need basis. Approval will be given if a documented medical need exists. The following basic guidelines are used:

- The use of formulary drugs is contraindicated in the patient.
- The patient has failed an appropriate trial of formulary or related agents.
- The choices available in the formulary are not suited for the present patient care need, and the drug selected is required for patient safety.
- The use of a formulary drug may provoke an underlying condition, which would be detrimental to patient care.

If the request does not meet the guidelines established by the P&T Committees, the request will not be approved, and alternative therapy may be recommended.

C. Obtaining Coverage

Coverage, questions or information regarding the medication request or formulary process may be obtained by:

- Faxing 877-251-5896 with a completed Prior Authorization Request Form.
- Contacting Wellfleet Rx at 877-640-7938 and providing all necessary information requested.

PO Box 15369, Springfield, MA 01115

Copyright © 2019 Wellfleet Group, LLC. All rights reserved.

www.wellfleetrx.com

iii

Wellfleet Rx will provide an authorization number, specific for the medical need, for all approved requests. Non-approved requests may be appealed. The prescriber must provide information to support the appeal on the basis of medical necessity. Prior Authorization is generally not available for drugs that are specifically excluded by benefit design.

4. General Exclusions

- A. Over the Counter (OTC) medications or their equivalents, unless otherwise specified in the Formulary listing.
- B. Nicotine Smoking Cessation products (i.e., transdermal nicotine, nicotine gum, nicotine inhaler), except as required by ACA.
- C. Drugs specifically listed as not covered.
- D. Any drug products used for cosmetic purposes.
- E. Experimental drug products or any drug product used in an experimental manner.
- F. Replacement of lost or stolen medication.
- G. Non-self-administered injectable drug products unless otherwise specified in the Formulary listing.
- H. Foreign sourced drugs or drugs not approved by the United States Food & Drug Administration.
- I. New drug entities will be excluded for up to 180 days after they become available on the market until a formulary decision is made. Depending on the formulary decision, the new drug entity may be excluded or have additional requirements under the formulary thereafter.

Any drugs not listed in this print formulary are considered excluded from the drug benefit and are not covered. The P&T and Formulary Committees recognize that not all medical needs can be met with this document and encourage inquiries about alternative therapies.

5. Opioid Medications

1. Opioid Overutilization Prevention – Opioid medications for treatment of pain will be available to Wellfleet members under the following restrictions which are reflective of current State and Federal guidance for prescribing of these agents.
 - a. Maximum Days' Supply for Opioid Prescriptions
 - i. Prescriber Type
 1. General Prescribers – 5-day supply
 2. Dentists – 3-day supply
 3. Oncologists – No limit
 - b. Cumulative Morphine Milligram Equivalents (MME) Limit (all prescriptions in last 120 days included) – Cumulative MME are utilized for calculating the total daily dose of opioids. Monitoring of MME allows clinicians to appropriately adjust prescribed opioid medications and are often used to reduce risk of overdose.
 - i. 90 MME total (and above) will encounter a soft rejection at the pharmacy which can be overridden by a pharmacist (except in the state of Pennsylvania).
 - ii. 120 MME total (and above) will encounter a hard rejection which requires prior authorization to be obtained by the prescriber.
 - c. More than a 5-day supply across all opioid prescriptions within a 60-day period will require prior authorization.
 - d. Quantity limits will be placed on opioid medications at the individual medication level.

6. Pharmacist and Physician Communication

The Formulary is a tool to promote cost- effective prescription drug use. The P&T and Formulary Committees have made every attempt to create a document that meets all therapeutic needs; however, the art of medicine makes this formidable a task.

7. Mail-order Option

If your plan covers medications through mail order, prescriptions can be obtained through the mail via Express Scripts Pharmacy. Refer to your plan document to determine if your plan covers medications through mail order. To have a current prescription filled with Express Scripts Pharmacy, you may contact your physician and have them send a new prescription to Express Scripts Pharmacy. You may also contact Express Scripts Pharmacy at 877-640-7940 if you would prefer Express Scripts Pharmacy to contact your physician for a new prescription. Online access to patient information and prescription ordering is also available through express-scripts.com.

8. Patient Protection and Affordable Care Act Preventive Drug List

The Patient Protection and Affordable Care Act (PPACA) requires that certain health plans cover essential health benefits (EHB) without charging a copayment, coinsurance, or deductible. EHBs include a variety of preventative services and medications and are outlined by US Preventive Services Task Force (USPSTF) recommendations with an A or B rating. Based on the recommendations of USPSTF and the Centers for Disease Control and Prevention (CDC), Wellfleet Rx has identified preventative medications to be covered under the pharmacy benefit and updates this list of medications and coverage criteria as needed. USPSTF and CDC recommendation updates can occur at any time, and health plans have specified timelines to implement these recommendations in compliance with federal law. So long as the member meets the criteria for preventive treatment, these medications will be available to members at \$0 dollars as required by PPACA. If these medications are not used for preventive purposes, they will be assigned the tier as indicated within the formulary table in the pages that follow.

Drug or Vaccine	Edit	Comments
EHB Aspirin Drug List		
Aspirin	N/A	Generics only
EHB Fluoride Drug List		
Fluoride	• Age 6 months to 6 years	Generics only
EHB Folic Acid Drug List		
Folic acid 0.4 mg, 0.8 mg, 1mg	N/A	Generics only
EHB Contraceptives Drug List		
Oral and ring hormonal contraceptives	• Step therapy (if applicable)	Generics and single-source brands (SSB)
Transdermal contraceptives	N/A	Generics only (Xulane by Mylan)

PO Box 15369, Springfield, MA 01115

Copyright © 2019 Wellfleet Group, LLC. All rights reserved.

www.wellfleetrx.com

V

Other contraceptive forms	<ul style="list-style-type: none"> Nexplanon: Limited to 1 per year Depo-Provera: Limited to 1 per 90 days 	Covered products include the following: <ul style="list-style-type: none"> Depo-Provera Liletta Mirena Nexplanon ParaGard Skyla Phexxi
EHB Barrier Contraceptives Drug List		
Barrier contraceptives	<ul style="list-style-type: none"> Female condoms: 30 per 30 days 	<ul style="list-style-type: none"> Cervical cap Diaphragms Nooxynol 9 Female condoms
EHB Breast Cancer Prevention Drug List		
<ul style="list-style-type: none"> Raloxifene Tamoxifen Soltamox Anastrazole Exemestane 	<ul style="list-style-type: none"> Anastrazole: Age \geq 35 years; limited to 1 per day Exemestane: Age \geq 35 years; limited to 1 per day Raloxifene: Limited to 1 per day 	Brands and generics
EHB Bowel Preparation Drug List		
<p>FDA-approved bowel preparations, <i>including but not limited to the following:</i></p> <ul style="list-style-type: none"> Bisacodyl Clenpiq PEG 3350 plus electrolytes (e.g., Colyte, Golytely, MoviPrep, Nulytely) Magnesium citrate Magnesium hydroxide OsmoPrep Plenvu Prepopik Sodium phosphate Suclear Suprep Sutab 	<ul style="list-style-type: none"> Age 45-75 years Quantity limit of 2 per year 	Brands and generics

EHB HIV Pre-Exposure Prophylaxis (PrEP) Drug List

- | | | |
|--|---|--|
| <ul style="list-style-type: none"> • Truvada (emtricitabine, FTC/ tenofovir disoproxil fumarate, TDF) • Apretude (cabotegravir) extended-release injectable suspension | <ul style="list-style-type: none"> • Generic Truvada: Quantity limit of 1 tablet per day • Apretude: Quantity limit of 1 injection every 8 weeks • No concurrent use of HIV medications for the treatment of HIV | |
|--|---|--|

EHB Statin Drug List

<p>Low-moderate intensity statins</p> <ul style="list-style-type: none"> • Altoprev (lovastatin ER) 20-60 mg • Crestor (rosuvastatin) 5-10 mg • Ezallor Sprinkle (rosuvastatin) 5-10mg • Flolipid (simvastatin suspension) 20mg/5mL, 40mg/5mL • Lescol (fluvastatin) 20-40 mg, 40 mg twice daily • Lescol XL (fluvastatin) 80 mg • Lipitor (atorvastatin) 10-20 mg • Livalo (pitavastatin calcium) 1-4 mg • Mevacor (lovastatin) 20-40 mg • Pravachol (pravastatin) 10-80 mg • Zocor (simvastatin) 10-40 mg • Zypitamag (pitavastatin magnesium) 1-4 mg 	<ul style="list-style-type: none"> • Age 40-75 years • No concurrent use of secondary prevention medications* • Quantity limited to statin dosages at low- to moderate-intensity • Prior Authorization (Ezallor Sprinkle and Flolipid) • Step Therapy (Altoprev, Ezallor Sprinkle, Lescol, Lescol XL, and Zypitamag) <p><i>*Secondary prevention medications include:</i></p> <ul style="list-style-type: none"> • aspirin/dipyridamole (Aggrenox) • clopidogrel (Plavix) • dipyridamole • nitroglycerin – oral, sublingual, transdermal, translingual • prasugrel (Effient) • Praluent • Repatha • ticagrelor (Brilinta) • ticlopidine • vorapaxar (Zontivity) 	Generics and Livalo
---	--	---------------------

EHB Smoking Cessation Table

bupropion (Zyban)	<ul style="list-style-type: none"> • Age \geq 18 years • Quantity limit 	Generic only
Varenicline (Chantix)	<ul style="list-style-type: none"> • Age \geq 18 years • Quantity limit 	Brand and generic

PO Box 15369, Springfield, MA 01115

Copyright © 2019 Wellfleet Group, LLC. All rights reserved.

www.wellfleetrx.com

vii



For Colorado Plans
Student Formulary – January 2023

nicotine inhaler	<ul style="list-style-type: none">• Age ≥ 18 years• Quantity limit• Step Therapy: trial of nicotine transdermal patch required	OTC
nicotine spray	<ul style="list-style-type: none">• Age ≥ 18 years• Quantity limit• Step Therapy: trial of nicotine transdermal patch required	OTC
nicotine gum or lozenge	<ul style="list-style-type: none">• Age ≥ 18 years• Quantity limit	OTC
nicotine transdermal patches	<ul style="list-style-type: none">• Age ≥ 18 years• Quantity limit	OTC
EHB Vaccines – Influenza Table		
Influenza vaccines	<ul style="list-style-type: none">• 1 dose per 180 days	Flublok, Fluzone High Dose, Fluzone Intradermal, and Fluad will continue to have adult age edits
EHB Vaccines – Other Table		
COVID-19 (J&J/Janssen [Ad26]) (Moderna [mRNA]) (Pfizer [mRNA])	N/A	N/A
Diphtheria, tetanus, pertussis [DTaP] (Infanrix, Daptacel)	N/A	N/A
Diphtheria, tetanus, pertussis [DTaP]/Polio (Quadracel, Kinrix)	N/A	N/A
Diphtheria, tetanus, pertussis [DTaP]/Hepatitis B/Polio (Pediarix)	N/A	N/A
Diphtheria, tetanus, pertussis [DTaP]/Polio/ <i>Haemophilus influenzae</i> type B/ Hepatitis B (Vaxelis)	N/A	N/A
Diphtheria, tetanus, pertussis [DTaP]/Polio/ <i>Haemophilus influenzae</i> type B (Pentacel)	N/A	N/A
Human papillomavirus (Gardasil, Gardasil 9)	<ul style="list-style-type: none">• Age 9-45 years• 3 doses per 365 days	N/A

PO Box 15369, Springfield, MA 01115

Copyright © 2019 Wellfleet Group, LLC. All rights reserved.

www.wellfleetrx.com

viii

Wellfleet is the marketing name used to refer to the insurance and administrative operations of Wellfleet Insurance Company, Wellfleet New York Insurance Company, and Wellfleet Group, LLC. All insurance products are administered or managed by Wellfleet Group, LLC. Product availability is based on regulatory approval and may differ among companies. The Wellfleet Rx Student Formulary is proprietary to Wellfleet Group, LLC and protected by applicable copyright, trademark, and trade secrets laws. Information contained therein may not be published, distributed, or reproduced, in part or whole, without express written consent of Wellfleet Group, LLC.

Hepatitis A (Vaqta, Havrix)	<ul style="list-style-type: none"> • 2 doses per 365 days 	N/A
Hepatitis B (Engerix-B, Recombivax HB, Heplisav-B)	<ul style="list-style-type: none"> • 3 doses per 365 days (Engerix-B Adult; Recombivax HB) • 2 doses per 365 days (Heplisav-B) 	N/A
Hepatitis B/Hepatitis A combo (TwinRix)	<ul style="list-style-type: none"> • Age ≥18 years • 4 doses per 365 days 	N/A
<i>Haemophilus influenzae</i> type B (ActHIB, Hiberix, PedvaxHIB)	N/A	N/A
Measles, mumps, rubella (M-M-R II, Priorix)	<ul style="list-style-type: none"> • 2 doses per 365 days 	N/A
Measles, mumps, rubella, varicella [MMRV](ProQuad)	N/A	N/A
Meningococcal serogroup B [MenB (Bexsero, Trumenba)]	<ul style="list-style-type: none"> • Age 10-25 years • 2 doses per 365 days (Bexsero) • 3 doses per 365 days (Trumenba) 	N/A
Meningococcal quadrivalent conjugate [MenACWY (Menactra, Menveo, MenQuadfi)]	<ul style="list-style-type: none"> • Age 11-23 years, unless required upon freshman admission • 1 dose per 365 days 	N/A
Pneumococcal polysaccharide (Pneumovax 23)	<ul style="list-style-type: none"> • 1 dose per 365 days • Age ≥ 19 years, if immunocompromised 	N/A
Pneumococcal conjugate (Prevnar 13, Prevnar 20, Vaxneuvance)	<ul style="list-style-type: none"> • Prevnar 20, Vaxneuvance: • Age ≥ 65 years • Age ≥ 19 years, if immunocompromised 	N/A
Poliovirus (Ipol)	N/A	N/A
Rotavirus (Rotarix, Rotateq)	N/A	N/A
Tetanus, diphtheria, pertussis [Tdap (Adacel, Boostrix)]	<ul style="list-style-type: none"> • 1 dose per 365 days 	N/A
Tetanus, diphtheria [Td (Tenivac, TdVax)]	<ul style="list-style-type: none"> • 1 dose per 365 days 	N/A
Varicella (Varivax)	<ul style="list-style-type: none"> • 2 doses per 365 days 	N/A
Zoster vaccine, recombinant (Shingrix)	<ul style="list-style-type: none"> • Age ≥ 50 years • Age ≥ 19 years, if immunocompromised • 2 doses per 365 days 	N/A

Drug list created 1/1/2019. Updated 1/1/2023. Next planned update 7/1/2023.



Zero Cost Drugs

In addition to the ACA Preventive Care medications listed under the \$0 Tier in the formulary, the drugs listed in the table below are covered at no cost to you. We encourage you to share this list with your prescriber if you are receiving a medication in one of the categories below to determine if a zero-cost option may be appropriate for your treatment.

\$0 Copay Drugs	
Antibiotics	
Amoxicillin Capsules (250mg, 500mg)	Amoxicillin Tablets (875mg)
Azithromycin Tablets (250mg, 500mg)	Cephalexin Capsules (250mg, 500mg)
Sulfamethoxazole-Trimethoprim Tablets (400-80mg, 800-160mg)	
Antianxiety/Antidepressants	
Citalopram Hbr Tablets (10mg, 20mg, 40mg)	Fluoxetine HCl Capsules (10mg, 20mg, 40mg)
Sertraline HCl Tablets (25mg, 50mg, 100mg)	
Acne	
Clindamycin— Benzoyl Peroxide Gel (1.2-5%)	Benzoyl Peroxide Wash External Liquid (5%, 10%)
Clindamycin Phosphate External Gel (1%)	Clindamycin Phosphate External Solution (1%)
Clindamycin Phosphate External Swab (1%)	Erythromycin External Solution (2%)
Sulfacetamide Sodium External Lotion (10%)	Sulfacetamide Sodium-Sulfur External Emulsion (10-5%)
Schizophrenia/Bipolar Disorder	
Lithium Carbonate (150mg, 300mg, and 600mg Capsule, 300mg Tablet)	
Olanzapine Tablets (2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg)	
Quetiapine Fumarate Tablets (25mg, 50mg, 100mg, 200mg, 300mg)	
Risperidone Tablets (0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg)	
Narcotic Antagonists (Limited to one \$0 fill per year)	
Naloxone Injection Auto-Injector	Naloxone Injection Solution
Naloxone Injection Syringe	Narcan Nasal Spray (brand name)
Diabetes	
Freestyle Libre 14 Day Reader (brand name)	Freestyle Libre 14 Day Sensor (brand name)
Freestyle Libre 2 Reader (brand name)	Freestyle Libre 2 Sensor (brand name)

Table of Contents

ANTI - INFECTIVES	2
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS	19
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH.....	27
CARDIOVASCULAR, HYPERTENSION & LIPIDS.....	55
DERMATOLOGICALS/TOPICAL THERAPY	71
DIAGNOSTICS & MISCELLANEOUS AGENTS	82
EAR, NOSE & THROAT MEDICATIONS.....	86
ENDOCRINE/DIABETES	87
GASTROENTEROLOGY	99
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY	108
MUSCULOSKELETAL & RHEUMATOLOGY.....	117
OBSTETRICS & GYNECOLOGY.....	120
OPHTHALMOLOGY	131
RESPIRATORY, ALLERGY, COUGH & COLD	138
UROLOGICALS.....	146
VITAMINS, HEMATINICS & ELECTROLYTES	148
Index	153

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ABELCET INTRAVENOUS SUSPENSION 5 MG/ML	2	MSD
<i>amphotericin b injection recon soln 50 mg</i>	1	MSD
<i>amphotericin b liposome intravenous suspension for reconstitution 50 mg</i>	1	MSD
CANCIDAS INTRAVENOUS RECON SOLN 50 MG, 70 MG	2	MSD
<i>caspofungin intravenous recon soln 50 mg, 70 mg</i>	1	MSD
<i>clotrimazole mucous membrane troche 10 mg</i>	1	
CRESEMBIA INTRAVENOUS RECON SOLN 372 MG	2	MSD
CRESEMBIA ORAL CAPSULE 186 MG	2	
ERAXIS(WATER DILUENT) INTRAVENOUS RECON SOLN 100 MG, 50 MG	2	MSD
<i>fluconazole in nacl (iso-osm) intravenous piggyback 100 mg/50 ml, 200 mg/100 ml, 400 mg/200 ml</i>	1	
<i>fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml</i>	1	
<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	1	
<i>flucytosine oral capsule 250 mg, 500 mg</i>	1	
<i>griseofulvin microsize oral suspension 125 mg/5 ml</i>	1	
<i>griseofulvin microsize oral tablet 500 mg</i>	2	
<i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>	2	
<i>itraconazole oral capsule 100 mg</i>	1	QL
<i>itraconazole oral solution 10 mg/ml</i>	1	QL
<i>ketoconazole oral tablet 200 mg</i>	1	
<i>micafungin intravenous recon soln 100 mg, 50 mg</i>	1	MSD
MYCAMINE INTRAVENOUS RECON SOLN 100 MG, 50 MG	3	MSD
NOXAFIL INTRAVENOUS SOLUTION 300 MG/16.7 ML	2	MSD
NOXAFIL ORAL SUSPENSION 200 MG/5 ML (40 MG/ML)	2	

Drug Name	Drug Tier	Requirements / Limits
nystatin oral suspension 100,000 unit/ml	1	
nystatin oral tablet 500,000 unit	1	
posaconazole oral tablet,delayed release (dr/ec) 100 mg	1	
terbinafine hcl oral tablet 250 mg	1	
VFEND ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML (40 MG/ML)	3	
VFEND ORAL TABLET 200 MG, 50 MG	3	
voriconazole intravenous recon soln 200 mg	1	MSD
voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)	1	
voriconazole oral tablet 200 mg, 50 mg	2	
ANTIVIRALS		
abacavir oral solution 20 mg/ml	1	QL
abacavir oral tablet 300 mg	1	QL
abacavir-lamivudine oral tablet 600-300 mg	1	QL
acyclovir oral capsule 200 mg	1	
acyclovir oral suspension 200 mg/5 ml	1	
acyclovir oral tablet 400 mg, 800 mg	1	
acyclovir sodium intravenous solution 50 mg/ml	1	MSD
adefovir oral tablet 10 mg	2	Specialty; QL
amantadine hcl oral capsule 100 mg	1	
amantadine hcl oral solution 50 mg/5 ml	1	
amantadine hcl oral tablet 100 mg	1	
APRETUDE INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 600 MG/3 ML (200 MG/ML)	3	MSD; ACA
APTIVUS ORAL CAPSULE 250 MG	2	QL
atazanavir oral capsule 150 mg, 200 mg, 300 mg	1	QL
BARACLUDE ORAL SOLUTION 0.05 MG/ML	2	Specialty; QL
BIKTARVY ORAL TABLET 30-120-15 MG, 50- 200-25 MG	2	QL
CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 400 MG/2 ML- 600 MG/2 ML, 600 MG/3 ML- 900 MG/3 ML	3	MSD; QL
CASIRIVIMAB-IMDEVIMAB INTRAVENOUS SOLUTION 120 MG/ML- 120 MG/ML	3	MSD

Drug Name	Drug Tier	Requirements / Limits
<i>cidofovir intravenous solution 75 mg/ml</i>	1	MSD
CIMDUO ORAL TABLET 300-300 MG	2	QL
COMBIVIR ORAL TABLET 150-300 MG	3	QL
DESCOVY ORAL TABLET 200-25 MG	2	ACA; QL
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	1	QL
DOVATO ORAL TABLET 50-300 MG	2	QL
EDURANT ORAL TABLET 25 MG	2	QL
<i>efavirenz oral capsule 200 mg, 50 mg</i>	1	
<i>efavirenz oral tablet 600 mg</i>	1	
<i>efavirenz-lamivu-tenofovir disop oral tablet 400- 300-300 mg, 600-300-300 mg</i>	1	QL
<i>emtricitabine oral capsule 200 mg</i>	1	ACA; QL
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	1	QL
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	1	ACA; QL
EMTRIVA ORAL SOLUTION 10 MG/ML	2	QL
<i>entecavir oral tablet 0.5 mg, 1 mg</i>	1	Specialty; QL
EPCLUSIA ORAL PELLETS IN PACKET 150- 37.5 MG, 200-50 MG	2	PA; Specialty; QL
EPCLUSIA ORAL TABLET 200-50 MG	2	Specialty; QL
EPIVIR HBV ORAL SOLUTION 25 MG/5 ML (5 MG/ML)	2	QL
EPIVIR HBV ORAL TABLET 100 MG	3	QL
EPIVIR ORAL SOLUTION 10 MG/ML	3	QL
EPIVIR ORAL TABLET 150 MG, 300 MG	3	QL
EPZICOM ORAL TABLET 600-300 MG	3	QL
<i>etravirine oral tablet 100 mg, 200 mg</i>	1	QL
EVUSHIELD (EUA) INTRAMUSCULAR SOLUTION 150 MG/1.5 ML- 150 MG/1.5 ML	3	MSD
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	1	
<i>fosamprenavir oral tablet 700 mg</i>	1	QL
<i>foscarnet intravenous solution 24 mg/ml</i>	1	MSD
FOSCAVIR INTRAVENOUS SOLUTION 24 MG/ML	3	MSD
FUZEON SUBCUTANEOUS RECON SOLN 90 MG	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
GANCICLOVIR INTRAVENOUS SOLUTION 500 MG/250 ML (2 MG/ML)	3	MSD
<i>ganciclovir sodium intravenous recon soln 500 mg</i>	1	MSD
<i>ganciclovir sodium intravenous solution 50 mg/ml</i>	1	MSD
GENVOYA ORAL TABLET 150-150-200-10 MG	2	QL
HARVONI ORAL PELLETS IN PACKET 33.75-150 MG, 45-200 MG	2	PA; Specialty; QL
HARVONI ORAL TABLET 45-200 MG	2	PA; Specialty; QL
INVIRASE ORAL TABLET 500 MG	2	QL
ISENTRESS HD ORAL TABLET 600 MG	2	QL
ISENTRESS ORAL POWDER IN PACKET 100 MG	2	QL
ISENTRESS ORAL TABLET 400 MG	2	QL
ISENTRESS ORAL TABLET,CHEWABLE 100 MG, 25 MG	2	QL
JULUCA ORAL TABLET 50-25 MG	3	
LAGEVRIO (EUA) ORAL CAPSULE 200 MG	3	ACA; QL; Age Limit (Min 18 Years and Max 999 Years)
<i>lamivudine oral solution 10 mg/ml</i>	1	QL
<i>lamivudine oral tablet 100 mg, 150 mg, 300 mg</i>	1	QL
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	1	QL
LEDIPASVIR-SOFOSBUVIR ORAL TABLET 90-400 MG	2	PA; Specialty; QL
LEXIVA ORAL SUSPENSION 50 MG/ML	3	QL
LEXIVA ORAL TABLET 700 MG	3	QL
<i>lopinavir-ritonavir oral solution 400-100 mg/5 ml</i>	1	QL
<i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i>	1	QL
<i>maraviroc oral tablet 150 mg, 300 mg</i>	1	QL
MAVYRET ORAL PELLETS IN PACKET 50-20 MG	2	PA; Specialty; QL
MAVYRET ORAL TABLET 100-40 MG	2	PA; Specialty; QL
<i>nevirapine oral suspension 50 mg/5 ml</i>	1	QL
<i>nevirapine oral tablet 200 mg</i>	1	QL
<i>nevirapine oral tablet extended release 24 hr 100 mg, 400 mg</i>	1	QL
NORVIR ORAL POWDER IN PACKET 100 MG	3	QL

Drug Name	Drug Tier	Requirements / Limits
NORVIR ORAL SOLUTION 80 MG/ML	3	QL
NORVIR ORAL TABLET 100 MG	3	QL
ODEFSEY ORAL TABLET 200-25-25 MG	2	QL
<i>oseltamivir oral capsule 30 mg, 45 mg, 75 mg</i>	1	QL
<i>oseltamivir oral suspension for reconstitution 6 mg/ml</i>	1	QL
PAXLOVID (EUA) ORAL TABLETS,DOSE PACK 150-100 MG, 300 MG (150 MG X 2)-100 MG	3	ACA; QL; Age Limit (Min 12 Years and Max 999 Years)
PREVYMIS INTRAVENOUS SOLUTION 240 MG/12 ML, 480 MG/24 ML	3	MSD; QL
PREVYMIS ORAL TABLET 240 MG, 480 MG	3	QL
PREZCOBIX ORAL TABLET 800-150 MG-MG	3	QL
PREZISTA ORAL SUSPENSION 100 MG/ML	2	QL
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	2	QL
RAPIVAB (PF) INTRAVENOUS SOLUTION 200 MG/20 ML (10 MG/ML)	2	MSD
REGEN-COV (EUA) INTRAVENOUS SOLUTION 120 MG/ML- 120 MG/ML, 60 MG- 60 MG/ ML	3	MSD
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	2	QL
RETROVIR INTRAVENOUS SOLUTION 10 MG/ML	2	MSD
RETROVIR ORAL CAPSULE 100 MG	3	QL
RETROVIR ORAL SYRUP 10 MG/ML	3	QL
REYATAZ ORAL POWDER IN PACKET 50 MG	3	QL
<i>ribavirin inhalation recon soln 6 gram</i>	1	
<i>rimantadine oral tablet 100 mg</i>	1	
<i>ritonavir oral tablet 100 mg</i>	1	QL
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	2	PA; QL
SELZENTRY ORAL SOLUTION 20 MG/ML	2	QL
SELZENTRY ORAL TABLET 25 MG, 75 MG	2	QL
SOFOSBUVIR-VELPATASVIR ORAL TABLET 400-100 MG	2	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
SOVALDI ORAL PELLETS IN PACKET 150 MG	3	Specialty; QL
SOVALDI ORAL PELLETS IN PACKET 200 MG	2	Specialty; QL
SOVALDI ORAL TABLET 200 MG, 400 MG	2	Specialty; QL
<i>stavudine oral capsule 15 mg, 20 mg, 40 mg</i>	1	QL
SUSTIVA ORAL CAPSULE 200 MG, 50 MG	3	
SYMFI LO ORAL TABLET 400-300-300 MG	3	QL
SYMFI ORAL TABLET 600-300-300 MG	3	QL
SYMTUZA ORAL TABLET 800-150-200-10 MG	3	QL
SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5 ML	2	PA; MSD; Specialty; QL
TAMIFLU ORAL CAPSULE 30 MG, 45 MG, 75 MG	3	QL
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION 6 MG/ML	3	QL
TEMIXYS ORAL TABLET 300-300 MG	3	QL
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	1	ACA; QL
TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG	2	QL
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	2	QL
TRIUMEQ ORAL TABLET 600-50-300 MG	2	QL
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	2	
TRIZIVIR ORAL TABLET 300-150-300 MG	3	QL
TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33 ML (150 MG/ML)	3	MSD
TYBOST ORAL TABLET 150 MG	3	PA; QL
<i>valacyclovir oral tablet 1 gram, 500 mg</i>	1	
<i>valganciclovir oral recon soln 50 mg/ml</i>	1	
<i>valganciclovir oral tablet 450 mg</i>	1	
VEKLURY INTRAVENOUS RECON SOLN 100 MG	3	MSD
VEMLIDY ORAL TABLET 25 MG	2	Specialty; QL
VIEKIRA PAK ORAL TABLETS,DOSE PACK 12.5 MG-75 MG -50 MG/250 MG	3	Specialty; QL
VIRACEPT ORAL TABLET 250 MG, 625 MG	2	

Drug Name	Drug Tier	Requirements / Limits
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	3	QL
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	3	QL
VOSEVI ORAL TABLET 400-100-100 MG	3	PA; Specialty
XOFLUZA ORAL TABLET 40 MG, 80 MG	3	QL
ZIAGEN ORAL SOLUTION 20 MG/ML	3	QL
ZIAGEN ORAL TABLET 300 MG	3	QL
<i>zidovudine oral capsule 100 mg</i>	1	QL
<i>zidovudine oral syrup 10 mg/ml</i>	1	QL
<i>zidovudine oral tablet 300 mg</i>	1	QL
CEPHALOSPORINS		
AVYCAZ INTRAVENOUS RECON SOLN 2.5 GRAM	2	MSD
<i>cefaclor oral capsule 250 mg, 500 mg</i>	1	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	1	
<i>cefaclor oral tablet extended release 12 hr 500 mg</i>	1	
<i>cefadroxil oral capsule 500 mg</i>	1	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	1	
<i>cefadroxil oral tablet 1 gram</i>	1	
<i>cefazolin in 0.9% sod chloride intravenous piggyback 3 gram/100 ml</i>	1	
<i>cefazolin in 0.9% sod chloride intravenous solution 2 gram/100 ml</i>	1	
<i>cefazolin in dextrose (iso-os) intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	MSD
CEFAZOLIN IN DEXTROSE (ISO-OS) INTRAVENOUS PIGGYBACK 2 GRAM/100 ML	1	MSD
<i>cefazolin in dextrose 5 % intravenous solution 2 gram/100 ml</i>	1	
CEFAZOLIN IN STERILE WATER INTRAVENOUS SYRINGE 1 GRAM/10 ML, 2 GRAM/20 ML	1	MSD
<i>cefazolin injection recon soln 1 gram, 10 gram, 100 gram, 20 gram, 300 g, 500 mg</i>	1	MSD
CEFAZOLIN INJECTION RECON SOLN 2 GRAM	1	MSD

Drug Name	Drug Tier	Requirements / Limits
<i>cefazolin intravenous recon soln 1 gram</i>	1	MSD
<i>cefdinir oral capsule 300 mg</i>	1	
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cefditoren pivoxil oral tablet 200 mg, 400 mg</i>	1	
CEFEPIME IN DEXTROSE 5 % INTRAVENOUS PIGGYBACK 1 GRAM/50 ML, 2 GRAM/50 ML	3	MSD
<i>cefepime in dextrose,iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/100 ml</i>	2	MSD
<i>cefepime injection recon soln 1 gram, 2 gram</i>	1	MSD
CEFEPIME INTRAVENOUS RECON SOLN 100 GRAM	1	MSD
<i>cefixime oral capsule 400 mg</i>	1	
<i>cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	1	
CEFOTAN INJECTION RECON SOLN 1 GRAM, 2 GRAM	3	MSD
<i>cefotaxime injection recon soln 1 gram</i>	1	
CEFOTETAN IN DEXTROSE, ISO-OSM INTRAVENOUS PIGGYBACK 1 GRAM/50 ML, 2 GRAM/50 ML	1	MSD
<i>cefotetan injection recon soln 1 gram, 2 gram</i>	1	
<i>cefotetan intravenous recon soln 10 gram</i>	1	MSD
<i>cefoxitin in dextrose, iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	MSD
<i>cefoxitin intravenous recon soln 1 gram, 10 gram, 2 gram</i>	1	MSD
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml</i>	1	
<i>cefpodoxime oral tablet 100 mg, 200 mg</i>	1	
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	1	
CEFTAZIDIME IN D5W INTRAVENOUS PIGGYBACK 1 GRAM/50 ML, 2 GRAM/50 ML	2	MSD
<i>ceftazidime injection recon soln 1 gram</i>	1	
<i>ceftazidime injection recon soln 2 gram, 6 gram</i>	1	MSD
<i>ceftriaxone in dextrose,iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	MSD

Drug Name	Drug Tier	Requirements / Limits
<i>ceftriaxone injection recon soln 1 gram, 10 gram, 2 gram, 250 mg, 500 mg</i>	1	MSD
CEFTRIAXONE INJECTION RECON SOLN 100 GRAM	1	MSD
<i>ceftriaxone intravenous recon soln 1 gram, 2 gram</i>	1	MSD
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	1	
<i>cefuroxime sodium injection recon soln 750 mg</i>	1	MSD
<i>cefuroxime sodium intravenous recon soln 1.5 gram, 7.5 gram</i>	1	MSD
<i>cephalexin oral capsule 250 mg, 500 mg</i>	1	\$0 Copay
<i>cephalexin oral capsule 750 mg</i>	1	
<i>cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cephalexin oral tablet 250 mg, 500 mg</i>	1	
FETROJA INTRAVENOUS RECON SOLN 1 GRAM	3	MSD
<i>tazicef injection recon soln 1 gram</i>	1	MSD
TEFLARO INTRAVENOUS RECON SOLN 400 MG, 600 MG	2	MSD
ZERBAXA INTRAVENOUS RECON SOLN 1.5 GRAM	2	MSD

ERYTHROMYCINS & OTHER MACROLIDES

<i>azithromycin intravenous recon soln 500 mg</i>	1	MSD
<i>azithromycin oral packet 1 gram</i>	1	
<i>azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	1	
<i>azithromycin oral tablet 250 mg, 500 mg</i>	1	\$0 Copay
<i>azithromycin oral tablet 600 mg</i>	1	
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	1	
<i>clarithromycin oral tablet extended release 24 hr 500 mg</i>	1	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	3	ST
DIFICID ORAL TABLET 200 MG	3	ST; QL
<i>e.e.s. 400 oral tablet 400 mg</i>	1	
<i>ery-tab oral tablet,delayed release (dr/ec) 250 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>erythrocin (as stearate) oral tablet 250 mg</i>	1	
ERYTHROCIN INTRAVENOUS RECON SOLN 500 MG	2	MSD
<i>erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml, 400 mg/5 ml</i>	1	
<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	1	
<i>erythromycin lactobionate intravenous recon soln 500 mg</i>	1	MSD
<i>erythromycin oral capsule, delayed release (dr/ec) 250 mg</i>	1	
<i>erythromycin oral tablet 250 mg, 500 mg</i>	2	
<i>erythromycin oral tablet, delayed release (dr/ec) 250 mg</i>	1	
MISCELLANEOUS ANTIINFECTIVES		
AEMCOLO ORAL TABLET, DELAYED RELEASE (DR/EC) 194 MG	3	PA
<i>albendazole oral tablet 200 mg</i>	1	
ALINIA ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	2	
ALINIA ORAL TABLET 500 MG	3	
<i>amikacin injection solution 1,000 mg/4 ml, 500 mg/2 ml</i>	1	MSD
ARAKODA ORAL TABLET 100 MG	3	
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION 590 MG/8.4 ML	2	PA; Specialty; QL
<i>atovaquone oral suspension 750 mg/5 ml</i>	1	
<i>atovaquone-proguanil oral tablet 250-100 mg, 62.5-25 mg</i>	1	
<i>aztreonam injection recon soln 1 gram, 2 gram</i>	1	MSD
<i>bacitracin intramuscular recon soln 50,000 unit</i>	1	
BENZNIDAZOLE ORAL TABLET 100 MG, 12.5 MG	1	
BETHKIS INHALATION SOLUTION FOR NEBULIZATION 300 MG/4 ML	3	PA; Specialty
BILTRICIDE ORAL TABLET 600 MG	3	
CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	2	PA; Specialty; QL
<i>chloramphenicol sod succinate intravenous recon soln 1 gram</i>	1	MSD

Drug Name	Drug Tier	Requirements / Limits
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	1	ST
CLEOCIN INJECTION SOLUTION 150 MG/ML	3	MSD
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	1	
CLINDAMYCIN IN 0.9 % SOD CHLOR INTRAVENOUS PIGGYBACK 300 MG/50 ML, 600 MG/50 ML, 900 MG/50 ML	3	MSD
<i>clindamycin in 5 % dextrose intravenous piggyback 300 mg/50 ml, 600 mg/50 ml, 900 mg/50 ml</i>	1	MSD
<i>clindamycin pediatric oral recon soln 75 mg/5 ml</i>	1	
<i>clindamycin phosphate injection solution 150 mg/ml</i>	1	MSD
COARTEM ORAL TABLET 20-120 MG	2	
<i>colistin (colistimethate na) injection recon soln 150 mg</i>	1	
CYCLOSERINE ORAL CAPSULE 250 MG	1	
DALVANCE INTRAVENOUS SOLUTION 500 MG	2	MSD
<i>dapsone oral tablet 100 mg, 25 mg</i>	1	Och
DAPTOMYCIN INTRAVENOUS RECON SOLN 350 MG	1	MSD
DARAPRIM ORAL TABLET 25 MG	3	PA; Specialty
EMVERM ORAL TABLET,CHEWABLE 100 MG	2	PA; QL
<i>ertapenem injection recon soln 1 gram</i>	1	MSD
<i>ethambutol oral tablet 100 mg, 400 mg</i>	1	
<i>gentamicin in nacl (iso-osm) intravenous piggyback 100 mg/100 ml, 60 mg/50 ml, 70 mg/50 ml, 80 mg/100 ml, 80 mg/50 ml, 90 mg/100 ml</i>	1	MSD
GENTAMICIN IN NACL (ISO-OSM) INTRAVENOUS PIGGYBACK 100 MG/50 ML, 120 MG/100 ML	1	MSD
<i>gentamicin injection solution 20 mg/2 ml, 40 mg/ml</i>	1	MSD
<i>gentamicin sulfate (ped) (pf) injection solution 20 mg/2 ml</i>	1	MSD
<i>gentamicin sulfate (pf) intravenous solution 100 mg/10 ml</i>	1	
GENTAMICIN SULFATE (PF) INTRAVENOUS SOLUTION 60 MG/6 ML	1	MSD

Drug Name	Drug Tier	Requirements / Limits
GENTAMICIN-SODIUM CITRATE INTRA-CATHETER SOLUTION 320 MCG/ML-4 %	1	MSD
HYDROXYCHLOROQUINE ORAL TABLET 100 MG, 300 MG, 400 MG	1	
<i>hydroxychloroquine oral tablet 200 mg</i>	1	ST
<i>imipenem-cilastatin intravenous recon soln 250 mg, 500 mg</i>	1	MSD
IMPAVIDO ORAL CAPSULE 50 MG	2	PA; Specialty; QL
INVANZ INJECTION RECON SOLN 1 GRAM	2	MSD
<i>isoniazid injection solution 100 mg/ml</i>	1	MSD
<i>isoniazid oral solution 50 mg/5 ml</i>	1	
<i>isoniazid oral tablet 100 mg, 300 mg</i>	1	
<i>ivermectin oral tablet 3 mg</i>	1	
KITABIS PAK INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	2	PA; Specialty
KRINTAFEL ORAL TABLET 150 MG	2	QL
LAMPIT ORAL TABLET 120 MG, 30 MG	3	
<i>lincomycin injection solution 300 mg/ml</i>	1	MSD
<i>linezolid in dextrose 5% intravenous piggyback 600 mg/300 ml</i>	1	MSD
<i>linezolid oral suspension for reconstitution 100 mg/5 ml</i>	1	
<i>linezolid oral tablet 600 mg</i>	1	
<i>linezolid-0.9% sodium chloride intravenous parenteral solution 600 mg/300 ml</i>	1	MSD
<i>mefloquine oral tablet 250 mg</i>	1	
<i>meropenem intravenous recon soln 1 gram, 500 mg</i>	1	MSD
MEROPENEM-0.9% SODIUM CHLORIDE INTRAVENOUS PIGGYBACK 1 GRAM/50 ML, 500 MG/50 ML	1	MSD
<i>metro i.v. intravenous piggyback 500 mg/100 ml</i>	2	MSD
<i>metronidazole in nacl (iso-os) intravenous piggyback 500 mg/100 ml</i>	1	MSD
<i>metronidazole oral capsule 375 mg</i>	1	
<i>metronidazole oral tablet 250 mg, 500 mg</i>	1	
NEBUPENT INHALATION RECON SOLN 300 MG	3	
<i>neomycin oral tablet 500 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>nitazoxanide oral tablet 500 mg</i>	1	
ORBACTIV INTRAVENOUS RECON SOLN 400 MG	2	
<i>paromomycin oral capsule 250 mg</i>	1	
PASER ORAL GRANULES DR FOR SUSP IN PACKET 4 GRAM	3	
PENTAM INJECTION RECON SOLN 300 MG	3	MSD
<i>pentamidine inhalation recon soln 300 mg</i>	1	
<i>pentamidine injection recon soln 300 mg</i>	1	MSD
<i>polymyxin b sulfate injection recon soln 500,000 unit</i>	1	MSD
<i>praziquantel oral tablet 600 mg</i>	1	
PRETOMANID ORAL TABLET 200 MG	3	QL
PRIFTIN ORAL TABLET 150 MG	2	
<i>primaquine oral tablet 26.3 mg</i>	2	
<i>pyrazinamide oral tablet 500 mg</i>	1	
<i>pyrimethamine oral tablet 25 mg</i>	1	PA; Specialty
<i>quinine sulfate oral capsule 324 mg</i>	1	
RECARBRIOD INTRAVENOUS RECON SOLN 1.25 GRAM	3	MSD
<i>rifabutin oral capsule 150 mg</i>	1	
<i>rifampin intravenous recon soln 600 mg</i>	1	MSD
<i>rifampin oral capsule 150 mg, 300 mg</i>	1	
SIRTURO ORAL TABLET 100 MG, 20 MG	2	PA; QL
SIVEXTRO INTRAVENOUS RECON SOLN 200 MG	3	MSD
SIVEXTRO ORAL TABLET 200 MG	3	
SOLOSEC ORAL GRANULES DEL RELEASE IN PACKET 2 GRAM	2	ST; QL
STREPTOMYCIN INTRAMUSCULAR RECON SOLN 1 GRAM	1	MSD
<i>tinidazole oral tablet 250 mg, 500 mg</i>	1	
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE 28 MG	2	PA; Specialty
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml</i>	1	PA; Specialty
<i>tobramycin in 0.9 % nacl intravenous piggyback 60 mg/50 ml</i>	1	MSD

Drug Name	Drug Tier	Requirements / Limits
tobramycin inhalation solution for nebulization 300 mg/4 ml	1	PA; Specialty
tobramycin sulfate injection recon soln 1.2 gram	1	
tobramycin sulfate injection solution 10 mg/ml, 40 mg/ml	1	MSD
TOBRAMYCIN WITH NEBULIZER INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	1	PA; Specialty
TRECATOR ORAL TABLET 250 MG	3	
VABOMERE INTRAVENOUS RECON SOLN 2 GRAM	3	
XENLETA INTRAVENOUS SOLUTION 150 MG/15 ML	3	PA; MSD
XENLETA ORAL TABLET 600 MG	3	PA; QL
ZEMDRI INTRAVENOUS SOLUTION 50 MG/ML	3	MSD
PENICILLINS		
amoxicillin oral capsule 250 mg, 500 mg	1	\$0 Copay
amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml	1	
amoxicillin oral tablet 500 mg	1	
amoxicillin oral tablet 875 mg	1	\$0 Copay
amoxicillin oral tablet, chewable 125 mg, 250 mg	1	
amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml	1	
amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	1	
amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg	1	
amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg	1	
ampicillin oral capsule 500 mg	1	
ampicillin sodium injection recon soln 1 gram, 10 gram, 125 mg, 2 gram, 250 mg, 500 mg	1	MSD
ampicillin sodium intravenous recon soln 1 gram, 2 gram	1	MSD
ampicillin-sulbactam injection recon soln 1.5 gram, 15 gram, 3 gram	1	MSD

Drug Name	Drug Tier	Requirements / Limits
<i>ampicillin-sulbactam intravenous recon soln 1.5 gram, 3 gram</i>	1	MSD
BICILLIN C-R INTRAMUSCULAR SYRINGE 1,200,000 UNIT/ 2 ML(600K/600K), 1,200,000 UNIT/ 2 ML(900K/300K)	2	MSD
BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML	2	
BICILLIN L-A INTRAMUSCULAR SYRINGE 2,400,000 UNIT/4 ML, 600,000 UNIT/ML	2	MSD
<i>dicloxacillin oral capsule 250 mg, 500 mg</i>	1	
<i>nafcillin in dextrose iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/100 ml</i>	1	MSD
<i>nafcillin injection recon soln 1 gram, 10 gram, 2 gram</i>	1	MSD
<i>oxacillin in dextrose(iso-osm) intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	MSD
<i>oxacillin injection recon soln 1 gram, 10 gram, 2 gram</i>	1	
PENICILLIN G POT IN DEXTROSE INTRAVENOUS PIGGYBACK 1 MILLION UNIT/50 ML, 2 MILLION UNIT/50 ML, 3 MILLION UNIT/50 ML	1	MSD
<i>penicillin g potassium injection recon soln 20 million unit</i>	1	MSD
<i>penicillin g potassium injection recon soln 5 million unit</i>	1	
<i>penicillin g procaine intramuscular syringe 1.2 million unit/2 ml, 600,000 unit/ml</i>	1	MSD
<i>penicillin g sodium injection recon soln 5 million unit</i>	1	MSD
<i>penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	1	
<i>pfizerpen-g injection recon soln 20 million unit, 5 million unit</i>	1	MSD
<i>piperacillin-tazobactam intravenous recon soln 13.5 gram, 2.25 gram, 3.375 gram, 4.5 gram, 40.5 gram</i>	1	MSD
ZOSYN IN DEXTROSE (ISO-OSM) INTRAVENOUS PIGGYBACK 2.25 GRAM/50 ML, 3.375 GRAM/50 ML, 4.5 GRAM/100 ML	2	MSD
QUINOLONES		

Drug Name	Drug Tier	Requirements / Limits
AVELOX IN NACL (ISO-OSMOTIC) INTRAVENOUS PIGGYBACK 400 MG/250 ML	2	MSD
BAXDELA INTRAVENOUS RECON SOLN 300 MG	2	PA; MSD
BAXDELA ORAL TABLET 450 MG	2	PA
ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg	1	
ciprofloxacin in 5 % dextrose intravenous piggyback 200 mg/100 ml, 400 mg/200 ml	1	MSD
ciprofloxacin oral suspension,microcapsule recon 250 mg/5 ml, 500 mg/5 ml	1	
FACTIVE ORAL TABLET 320 MG	3	
levofloxacin in d5w intravenous piggyback 250 mg/50 ml, 500 mg/100 ml, 750 mg/150 ml	1	MSD
levofloxacin intravenous solution 25 mg/ml	1	MSD
levofloxacin oral solution 250 mg/10 ml	1	
levofloxacin oral tablet 250 mg, 500 mg, 750 mg	1	
moxifloxacin oral tablet 400 mg	1	
MOXIFLOXACIN-SOD.ACE,SUL-WATER INTRAVENOUS PIGGYBACK 400 MG/250 ML	1	MSD
moxifloxacin-sod.chloride(iso) intravenous piggyback 400 mg/250 ml	1	
ofloxacin oral tablet 300 mg, 400 mg	1	
SULFA'S & RELATED AGENTS		
sulfadiazine oral tablet 500 mg	1	
sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5 ml	1	MSD
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml	1	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg	1	\$0 Copay
sulfatrim oral suspension 200-40 mg/5 ml	1	
TETRACYCLINES		
avidoxy oral tablet 100 mg	2	QL
demeclocycline oral tablet 150 mg, 300 mg	1	
doxy-100 intravenous recon soln 100 mg	1	MSD
doxycycline hyclate oral capsule 100 mg, 50 mg	1	QL
doxycycline hyclate oral tablet 100 mg	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline hyclate oral tablet 20 mg</i>	1	
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	1	QL
<i>doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml</i>	1	
<i>doxycycline monohydrate oral tablet 100 mg, 50 mg</i>	1	QL
MINOCIN INTRAVENOUS RECON SOLN 100 MG	2	MSD
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>minocycline oral tablet 100 mg, 50 mg, 75 mg</i>	2	
<i>monodoxine nl oral capsule 100 mg</i>	1	QL
<i>monodoxine nl oral capsule 75 mg</i>	1	ST; QL
NUZYRA INTRAVENOUS RECON SOLN 100 MG	3	MSD
NUZYRA ORAL TABLET 150 MG	3	PA; QL
<i>tetracycline oral capsule 250 mg, 500 mg</i>	1	
XERAVA INTRAVENOUS RECON SOLN 100 MG, 50 MG	3	MSD
URINARY TRACT AGENTS		
<i>fosfomycin tromethamine oral packet 3 gram</i>	1	QL
<i>methenamine hippurate oral tablet 1 gram</i>	1	
<i>methenamine mandelate oral tablet 0.5 g, 1 gram</i>	1	
MONUROL ORAL PACKET 3 GRAM	3	QL
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg</i>	1	
<i>nitrofurantoin monohyd/m-cryst oral capsule 100 mg</i>	1	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	1	
<i>trimethoprim oral tablet 100 mg</i>	1	
VANCOMYCIN		
VANCOCIN ORAL CAPSULE 125 MG, 250 MG	3	QL
VANCOMYCIN HCL IN WATER INTRAVENOUS SOLUTION 100 MG/ML	1	MSD
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS PIGGYBACK 1 GRAM/200 ML, 500 MG/100 ML, 750 MG/150 ML	1	MSD

Drug Name	Drug Tier	Requirements / Limits
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS SOLUTION 1 GRAM/250 ML, 1.25 GRAM/250 ML, 1.5 GRAM/250 ML, 1.75 GRAM/250 ML, 2 GRAM/500 ML	1	MSD
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS SOLUTION 750 MG/150 ML	1	
VANCOMYCIN IN DEXTROSE 5 % INTRAVENOUS PIGGYBACK 1 GRAM/200 ML, 500 MG/100 ML	1	MSD
VANCOMYCIN IN DEXTROSE 5 % INTRAVENOUS PIGGYBACK 750 MG/150 ML	1	
VANCOMYCIN IN DEXTROSE 5 % INTRAVENOUS SOLUTION 1.25 GRAM/250 ML, 1.5 GRAM/250 ML	1	MSD
VANCOMYCIN INJECTION RECON SOLN 100 GRAM	1	MSD
<i>vancomycin intravenous recon soln 1,000 mg, 10 gram, 5 gram, 500 mg, 750 mg</i>	1	MSD
VANCOMYCIN INTRAVENOUS RECON SOLN 1.25 GRAM	1	MSD
<i>vancomycin intravenous recon soln 1.5 gram</i>	1	
<i>vancomycin oral capsule 125 mg, 250 mg</i>	1	QL
<i>vancomycin oral recon soln 50 mg/ml</i>	1	QL
VANCOMYCIN-WATER INJECT (PEG) INTRAVENOUS PIGGYBACK 1.25 GRAM/250 ML, 1.75 GRAM/350 ML, 2 GRAM/400 ML, 500 MG/100 ML, 750 MG/150 ML	1	MSD
VIBATIV INTRAVENOUS RECON SOLN 750 MG	2	

ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS

ADJUNCTIVE AGENTS

<i>dexrazoxane hcl intravenous recon soln 250 mg, 500 mg</i>	1	MSD
ELITEK INTRAVENOUS RECON SOLN 1.5 MG, 7.5 MG	2	MSD
ETHYOL INTRAVENOUS RECON SOLN 500 MG	3	
KEPIVANCE INTRAVENOUS RECON SOLN 6.25 MG	2	MSD; Specialty
KHAPZORY INTRAVENOUS RECON SOLN 175 MG, 300 MG	3	Specialty

Drug Name	Drug Tier	Requirements / Limits
<i>leucovorin calcium injection recon soln 100 mg, 200 mg, 350 mg, 50 mg, 500 mg</i>	1	MSD
<i>leucovorin calcium injection solution 10 mg/ml</i>	1	MSD
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	1	
<i>levoleucovorin calcium intravenous recon soln 50 mg</i>	1	MSD; Specialty
<i>levoleucovorin calcium intravenous solution 10 mg/ml</i>	1	MSD; Specialty
<i>mesna intravenous solution 100 mg/ml</i>	1	MSD
MESNEX ORAL TABLET 400 MG	3	
TOTECT INTRAVENOUS RECON SOLN 500 MG	3	
VISTOGARD ORAL GRANULES IN PACKET 10 GRAM	2	Specialty; QL
VORAXAZE INTRAVENOUS RECON SOLN 1,000 UNIT	2	MSD; Specialty
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML)	2	PA; MSD; Specialty; QL
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone oral tablet 250 mg, 500 mg</i>	2	Specialty; Och; QL
ADAKVEO INTRAVENOUS SOLUTION 10 MG/ML	2	PA; MSD; Specialty
AFINITOR DISPERZ ORAL TABLET FOR SUSPENSION 2 MG, 3 MG, 5 MG	2	PA; Specialty; Och
AFINITOR ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG	2	PA; Specialty; Och; QL
ALKERAN ORAL TABLET 2 MG	3	Specialty; Och
<i>anastrozole oral tablet 1 mg</i>	1	Och; ACA
ASTAGRAF XL ORAL CAPSULE,EXTENDED RELEASE 24HR 0.5 MG, 1 MG, 5 MG	3	Specialty
AYVAKIT ORAL TABLET 100 MG, 200 MG, 300 MG	2	PA; Specialty; Och; QL
AYVAKIT ORAL TABLET 25 MG, 50 MG	2	PA; Specialty; Och; QL
<i>azathioprine oral tablet 100 mg, 50 mg</i>	1	
<i>azathioprine sodium injection recon soln 100 mg</i>	1	MSD
BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG	3	PA; Specialty; Och; QL
<i>bexarotene oral capsule 75 mg</i>	2	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
<i>bexarotene topical gel 1 %</i>	1	PA; Specialty; QL
<i>bicalutamide oral tablet 50 mg</i>	1	Och
BOSULIF ORAL TABLET 100 MG, 500 MG	2	PA; Specialty; Och; QL
BOSULIF ORAL TABLET 400 MG	2	PA; Specialty; Och; QL
BRAFTOVI ORAL CAPSULE 50 MG, 75 MG	3	PA; Specialty; QL
BRUKINSA ORAL CAPSULE 80 MG	2	PA; Specialty; Och
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	2	PA; Specialty; Och; QL
<i>capecitabine oral tablet 150 mg, 500 mg</i>	2	Specialty; Och; QL
CAPRELSA ORAL TABLET 100 MG, 300 MG	2	PA; Specialty; Och; QL
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1), 140 MG/DAY(80 MG X1-20 MG X3), 60 MG/DAY (20 MG X 3/DAY)	2	PA; Specialty; Och; QL
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	3	PA; Specialty; Och; QL
COTELLIC ORAL TABLET 20 MG	2	PA; Specialty; Och; QL
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	2	Och
CYCLOPHOSPHAMIDE ORAL TABLET 25 MG, 50 MG	1	Och
<i>cyclosporine intravenous solution 250 mg/5 ml</i>	1	MSD; Specialty
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	1	Specialty
<i>cyclosporine modified oral solution 100 mg/ml</i>	1	Specialty
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	1	Specialty
DAURISMO ORAL TABLET 100 MG, 25 MG	3	PA; Specialty; QL
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	2	ST
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	2	PA; MSD; Specialty; QL
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	2	PA; MSD; Specialty; QL
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	2	PA; MSD; Specialty; QL
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	2	PA; MSD; Specialty; QL
EMCYT ORAL CAPSULE 140 MG	2	Specialty
ENSPRYNG SUBCUTANEOUS SYRINGE 120 MG/ML	2	PA; Specialty
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HR 0.75 MG, 1 MG, 4 MG	3	Specialty

Drug Name	Drug Tier	Requirements / Limits
ERIVEDGE ORAL CAPSULE 150 MG	2	PA; Specialty; QL
ERLEADA ORAL TABLET 60 MG	2	PA; Specialty; Och; QL
<i>erlotinib oral tablet 100 mg, 150 mg, 25 mg</i>	2	PA; Specialty; Och; QL
<i>etoposide oral capsule 50 mg</i>	1	Och
<i>everolimus (antineoplastic) oral tablet 10 mg</i>	1	PA; Specialty; Och; QL
<i>everolimus (antineoplastic) oral tablet 2.5 mg, 5 mg, 7.5 mg</i>	2	PA; Specialty; Och; QL
<i>everolimus (antineoplastic) oral tablet for suspension 2 mg, 3 mg, 5 mg</i>	1	PA; Specialty; Och
<i>everolimus (immunosuppressive) oral tablet 0.25 mg, 0.5 mg, 0.75 mg</i>	2	Specialty
<i>everolimus (immunosuppressive) oral tablet 1 mg</i>	1	Specialty
<i>exemestane oral tablet 25 mg</i>	1	Och; ACA
EXKIVITY ORAL CAPSULE 40 MG	3	PA; Specialty; Och; QL
FARESTON ORAL TABLET 60 MG	3	PA; Specialty; Och; QL
FARYDAK ORAL CAPSULE 10 MG, 15 MG, 20 MG	3	PA; Specialty; QL
FENSOLVI SUBCUTANEOUS SYRINGE 45 MG	3	PA; MSD; Specialty; QL
<i>flutamide oral capsule 125 mg</i>	1	Och
GAMIFANT INTRAVENOUS SOLUTION 5 MG/ML	2	PA; MSD; Specialty
GAVRETO ORAL CAPSULE 100 MG	3	PA; Specialty; Och; QL
<i>gengraf oral capsule 100 mg, 25 mg</i>	1	Specialty
<i>gengraf oral solution 100 mg/ml</i>	1	Specialty
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	2	PA; Specialty; Och; QL
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	2	PA; Specialty; Och
HYCAMTIN ORAL CAPSULE 0.25 MG	2	Specialty
HYCAMTIN ORAL CAPSULE 1 MG	2	Specialty
<i>hydroxyurea oral capsule 500 mg</i>	1	Och
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	2	PA; Specialty; Och
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	2	PA; Specialty; Och
ICLUSIG ORAL TABLET 10 MG	2	PA; Specialty; Och
ICLUSIG ORAL TABLET 15 MG, 45 MG	2	PA; Specialty; Och; QL

Drug Name	Drug Tier	Requirements / Limits
ICLUSIG ORAL TABLET 30 MG	2	PA; Specialty; Och
IDHIFA ORAL TABLET 100 MG, 50 MG	3	PA; Specialty; QL
<i>imatinib oral tablet 100 mg, 400 mg</i>	2	Specialty; Och; QL
IMBRUVICA ORAL CAPSULE 140 MG, 70 MG	2	PA; Specialty; Och; QL
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG, 560 MG	2	PA; Specialty; Och; QL
IMURAN ORAL TABLET 50 MG	3	
INLYTA ORAL TABLET 1 MG, 5 MG	2	PA; Specialty; Och; QL
INQOVI ORAL TABLET 35-100 MG	2	PA; Specialty; Och; QL
IODOOPEN INTRAVENOUS SOLUTION 100 MCG/ML	1	MSD
IRESSA ORAL TABLET 250 MG	2	PA; Specialty; Och; QL
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	2	PA; Specialty; QL
KISQALI FEMARA CO-PACK ORAL TABLET 200 MG/DAY(200 MG X 1)-2.5 MG	3	PA; Specialty
KISQALI FEMARA CO-PACK ORAL TABLET 400 MG/DAY(200 MG X 2)-2.5 MG, 600 MG/DAY(200 MG X 3)-2.5 MG	3	PA; Specialty; QL
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1), 400 MG/DAY (200 MG X 2), 600 MG/DAY (200 MG X 3)	3	PA; Specialty; Och; QL
KOSELUGO ORAL CAPSULE 10 MG, 25 MG	2	PA; Specialty; Och; QL
<i>lapatinib oral tablet 250 mg</i>	2	PA; Specialty; Och; QL
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 12 MG/DAY (4 MG X 3), 14 MG/DAY(10 MG X 1-4 MG X 1), 18 MG/DAY (10 MG X 1-4 MG X2), 20 MG/DAY (10 MG X 2), 24 MG/DAY(10 MG X 2-4 MG X 1), 4 MG, 8 MG/DAY (4 MG X 2)	2	PA; Specialty; Och; QL
<i>letrozole oral tablet 2.5 mg</i>	1	Och
LEUKERAN ORAL TABLET 2 MG	2	Specialty; Och
<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	1	PA; MSD; Specialty; QL
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	2	PA; Specialty; Och; QL
LORBRENA ORAL TABLET 100 MG, 25 MG	2	PA; Specialty; Och; QL
LUMAKRAS ORAL TABLET 120 MG	3	PA; Specialty; Och; QL
LUPKYNIS ORAL CAPSULE 7.9 MG	3	PA; Specialty
LYNPARZA ORAL TABLET 100 MG, 150 MG	2	PA; Specialty; Och; QL

Drug Name	Drug Tier	Requirements / Limits
LYSODREN ORAL TABLET 500 MG	2	Specialty; Och
MATULANE ORAL CAPSULE 50 MG	2	Specialty; Och
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i>	1	
<i>megestrol oral tablet 20 mg, 40 mg</i>	1	
MEKINIST ORAL TABLET 0.5 MG, 2 MG	2	PA; Specialty; Och; QL
MEKTOVI ORAL TABLET 15 MG	3	PA; Specialty; Och; QL
<i>melphalan oral tablet 2 mg</i>	1	Och
<i>mercaptopurine oral tablet 50 mg</i>	1	Och
<i>methotrexate sodium (pf) injection recon soln 1 gram</i>	1	MSD
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	1	MSD
<i>methotrexate sodium injection solution 25 mg/ml</i>	1	MSD
<i>methotrexate sodium oral tablet 2.5 mg</i>	1	Och
MYCAPSSA ORAL CAPSULE,DELAYED RELEASE(DR/EC) 20 MG	3	Specialty
<i>mycophenolate mofetil (hcl) intravenous recon soln 500 mg</i>	1	MSD; Specialty
<i>mycophenolate mofetil oral capsule 250 mg</i>	1	
<i>mycophenolate mofetil oral suspension for reconstitution 200 mg/ml</i>	1	
<i>mycophenolate mofetil oral tablet 500 mg</i>	1	
<i>mycophenolate sodium oral tablet,delayed release (dr/ec) 180 mg, 360 mg</i>	1	
MYFORTIC ORAL TABLET,DELAYED RELEASE (DR/EC) 180 MG, 360 MG	3	
MYLERAN ORAL TABLET 2 MG	2	Specialty; Och
NEORAL ORAL CAPSULE 100 MG, 25 MG	3	Specialty
NEORAL ORAL SOLUTION 100 MG/ML	3	Specialty
NERLYNX ORAL TABLET 40 MG	3	PA; Specialty; Och; QL
NEXAVAR ORAL TABLET 200 MG	2	PA; Specialty; Och; QL
<i>nilutamide oral tablet 150 mg</i>	2	Specialty; Och; QL
NUBEQA ORAL TABLET 300 MG	2	PA; Specialty; Och; QL
NULOJIX INTRAVENOUS RECON SOLN 250 MG	2	MSD; Specialty
<i>octreotide acetate injection solution 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	1	PA; MSD; Specialty

Drug Name	Drug Tier	Requirements / Limits
octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml), 500 mcg/ml (1 ml)	1	PA; MSD; Specialty
ODOMZO ORAL CAPSULE 200 MG	3	PA; Specialty; QL
ONUREG ORAL TABLET 200 MG, 300 MG	2	PA; Specialty; Och; QL
PACLITAXEL PROTEIN-BOUND INTRAVENOUS SUSPENSION FOR RECONSTITUTION 100 MG	1	PA; Specialty
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	3	PA; Specialty; Och; QL
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1), 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	3	PA; Specialty; Och; QL
PURIXAN ORAL SUSPENSION 20 MG/ML	2	ST; Specialty; Och
QINLOCK ORAL TABLET 50 MG	3	PA; Specialty; Och; QL
RAPAMUNE ORAL SOLUTION 1 MG/ML	3	
RETEVMO ORAL CAPSULE 40 MG, 80 MG	3	PA; Specialty; Och; QL
ROZLYTREK ORAL CAPSULE 100 MG, 200 MG	2	PA; Specialty; Och; QL
RUBRACA ORAL TABLET 200 MG, 300 MG	2	PA; Specialty; Och; QL
RUBRACA ORAL TABLET 250 MG	3	Specialty; Och; QL
RYDAPT ORAL CAPSULE 25 MG	3	PA; Specialty; Och; QL
SANDIMMUNE ORAL SOLUTION 100 MG/ML	2	Specialty
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	3	PA; MSD; Specialty
SCEMBLIX ORAL TABLET 20 MG, 40 MG	3	PA; Specialty; Och; QL
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	2	PA; Specialty; QL
SIMULECT INTRAVENOUS RECON SOLN 10 MG, 20 MG	2	MSD; Specialty
<i>sirolimus oral solution 1 mg/ml</i>	1	Specialty
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	Specialty
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML	2	MSD; Specialty
<i>sorafenib oral tablet 200 mg</i>	1	PA; Specialty; Och; QL
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	2	PA; Specialty; Och; QL
STIVARGA ORAL TABLET 40 MG	2	PA; Specialty; Och; QL

Drug Name	Drug Tier	Requirements / Limits
sunitinib oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg	1	PA; Specialty; Och; QL
SYNRIBO SUBCUTANEOUS RECON SOLN 3.5 MG	2	PA; MSD; Specialty; QL
TABLOID ORAL TABLET 40 MG	2	Specialty; Och
TABRECTA ORAL TABLET 150 MG, 200 MG	3	PA; Specialty; Och; QL
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg	1	Specialty
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	2	PA; Specialty; QL
TAGRISSO ORAL TABLET 40 MG, 80 MG	2	PA; Specialty; Och; QL
TALZENNA ORAL CAPSULE 0.25 MG, 1 MG	2	PA; Specialty; Och; QL
tamoxifen oral tablet 10 mg, 20 mg	1	Och; ACA
TARCEVA ORAL TABLET 100 MG, 150 MG, 25 MG	3	PA; Specialty; Och; QL
TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG	2	PA; Specialty; Och; QL
TAZVERIK ORAL TABLET 200 MG	2	PA; Specialty; QL
TEMODAR ORAL CAPSULE 250 MG	3	PA; Specialty; Och
temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg	1	PA; Specialty; Och
TEPMETKO ORAL TABLET 225 MG	3	PA; Specialty; Och
THALOMID ORAL CAPSULE 100 MG, 150 MG, 200 MG, 50 MG	2	PA; Specialty; Och; QL
TIBSOVO ORAL TABLET 250 MG	3	PA; Specialty; QL
toremifene oral tablet 60 mg	1	PA; Specialty; Och; QL
tretinoïn (antineoplastic) oral capsule 10 mg	2	Specialty; Och
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	3	Och
TRIPTODUR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 22.5 MG	2	PA; MSD; Specialty; QL
TRUSELTIQ ORAL CAPSULE 100 MG/DAY (100 MG X 1), 125 MG/DAY(100 MG X1-25MG X1), 50 MG/DAY (25 MG X 2), 75 MG/DAY (25 MG X 3)	3	PA; Specialty; Och
TUKYSA ORAL TABLET 150 MG, 50 MG	3	PA; Specialty; Och; QL
TURALIO ORAL CAPSULE 200 MG	3	PA; Specialty; Och; QL
TYKERB ORAL TABLET 250 MG	3	PA; Specialty; Och; QL
UPLIZNA INTRAVENOUS SOLUTION 10 MG/ML	2	PA; MSD; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG	2	PA; Specialty; QL
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG- 100 MG	2	PA; Specialty; QL
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	2	PA; Specialty; Och; QL
VIJOICE ORAL TABLET 125 MG, 250 MG/DAY (200 MG X1-50 MG X1), 50 MG	3	PA; Specialty; QL
VITRAKVI ORAL CAPSULE 100 MG, 25 MG	3	PA; Specialty; Och; QL
VITRAKVI ORAL SOLUTION 20 MG/ML	3	PA; Specialty; Och; QL
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	2	PA; Specialty; Och; QL
VONJO ORAL CAPSULE 100 MG	3	PA; Specialty; Och; QL
VOTRIENT ORAL TABLET 200 MG	2	PA; Specialty; Och; QL
WELIREG ORAL TABLET 40 MG	3	PA; Specialty; QL
XALKORI ORAL CAPSULE 200 MG, 250 MG	2	PA; Specialty; Och; QL
XERMELO ORAL TABLET 250 MG	2	PA; Specialty; QL
XOSPATA ORAL TABLET 40 MG	3	PA; Specialty; Och; QL
XTANDI ORAL CAPSULE 40 MG	2	PA; Specialty; Och; QL
XTANDI ORAL TABLET 40 MG, 80 MG	2	PA; QL
YONSA ORAL TABLET 125 MG	2	PA; Specialty; Och
ZEJULA ORAL CAPSULE 100 MG	3	PA; Specialty; Och; QL
ZELBORA ORAL TABLET 240 MG	2	PA; Specialty; QL
ZOLINZA ORAL CAPSULE 100 MG	2	Specialty
ZYDELIG ORAL TABLET 100 MG, 150 MG	2	PA; Specialty; Och; QL
ZYKADIA ORAL TABLET 150 MG	2	PA; Specialty; Och; QL

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

BRIVIACT ORAL SOLUTION 10 MG/ML	3	ST; QL
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG	3	ST; QL
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg</i>	1	ST
<i>carbamazepine oral capsule, er multiphase 12 hr 300 mg</i>	1	
<i>carbamazepine oral suspension 100 mg/5 ml</i>	1	
<i>carbamazepine oral tablet 200 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	1	
<i>carbamazepine oral tablet, chewable 100 mg</i>	1	
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	3	ST
CELONTIN ORAL CAPSULE 300 MG	2	
CEREBYX INJECTION SOLUTION 100 MG PE/2 ML, 500 MG PE/10 ML	3	MSD
<i>clobazam oral suspension 2.5 mg/ml</i>	1	ST; QL
<i>clobazam oral tablet 10 mg, 20 mg</i>	1	QL
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	2	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR 250 MG, 500 MG	3	
DEPAKOTE ORAL TABLET, DELAYED RELEASE (DR/EC) 125 MG, 250 MG, 500 MG	3	
DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE 125 MG	3	
DIACOMIT ORAL CAPSULE 250 MG, 500 MG	3	PA; Specialty; QL
DIACOMIT ORAL POWDER IN PACKET 250 MG, 500 MG	3	PA; Specialty; QL
DIASTAT ACUDIAL RECTAL KIT 12.5-15-17.5-20 MG, 5-7.5-10 MG	3	QL
DIASTAT RECTAL KIT 2.5 MG	3	QL
<i>diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg</i>	1	QL
DILANTIN EXTENDED ORAL CAPSULE 100 MG	3	
DILANTIN INFATABS ORAL TABLET, CHEWABLE 50 MG	3	
DILANTIN ORAL CAPSULE 30 MG	2	
DILANTIN-125 ORAL SUSPENSION 125 MG/5 ML	3	
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	1	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>divalproex oral tablet,delayed release (dr/ec) 125 mg, 250 mg, 500 mg</i>	1	
EPIDIOLEX ORAL SOLUTION 100 MG/ML	2	PA; Specialty
<i>epitol oral tablet 200 mg</i>	1	
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	3	ST
<i>ethosuximide oral capsule 250 mg</i>	1	
<i>ethosuximide oral solution 250 mg/5 ml</i>	1	
<i>felbamate oral suspension 600 mg/5 ml</i>	1	ST; QL
<i>felbamate oral tablet 400 mg, 600 mg</i>	1	ST; QL
FINTEPLA ORAL SOLUTION 2.2 MG/ML	3	PA; Specialty; QL
<i>fosphenytoin injection solution 100 mg pe/2 ml, 500 mg pe/10 ml</i>	1	MSD
FYCOMPA ORAL SUSPENSION 0.5 MG/ML	2	ST; QL
FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	2	ST; QL
<i> gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	1	QL
<i> gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	1	QL
<i> gabapentin oral tablet 600 mg, 800 mg</i>	1	QL
<i> lacosamide intravenous solution 200 mg/20 ml</i>	1	MSD; QL
<i> lacosamide oral solution 10 mg/ml</i>	1	QL
<i> lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	1	QL
<i> lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	1	
<i> lamotrigine oral tablet disintegrating, dose pk 25 mg (21)-50 mg (7), 25 mg(14)-50 mg (14)-100 mg (7), 50 mg (42) -100 mg (14)</i>	1	ST
<i> lamotrigine oral tablet extended release 24hr 100 mg</i>	1	ST
<i> lamotrigine oral tablet extended release 24hr 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	1	ST; QL
<i> lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg</i>	1	
<i> lamotrigine oral tablet,disintegrating 100 mg, 200 mg, 25 mg, 50 mg</i>	1	ST; QL
<i> lamotrigine oral tablets,dose pack 25 mg (35), 25 mg (42) -100 mg (7), 25 mg (84) -100 mg (14)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>levetiracetam in nacl (iso-os) intravenous piggyback 1,000 mg/100 ml, 1,500 mg/100 ml, 500 mg/100 ml</i>	1	MSD
LEVETIRACETAM IN NACL (ISO-OS) INTRAVENOUS PIGGYBACK 250 MG/50 ML	1	MSD
<i>levetiracetam intravenous solution 500 mg/5 ml</i>	1	MSD
<i>levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)</i>	1	
<i>levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg</i>	1	
<i>levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg</i>	1	
NAYZILAM NASAL SPRAY,NON-AEROSOL 5 MG/SPRAY (0.1 ML)	3	QL
ONFI ORAL SUSPENSION 2.5 MG/ML	3	ST; QL
ONFI ORAL TABLET 10 MG, 20 MG	3	QL
<i>oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)</i>	1	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 300 MG, 600 MG	3	ST; QL
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	1	
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	1	
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	3	
<i>phenytoin oral suspension 100 mg/4 ml, 125 mg/5 ml</i>	1	
<i>phenytoin oral tablet, chewable 50 mg</i>	1	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	1	
<i>phenytoin sodium intravenous solution 50 mg/ml</i>	1	MSD
<i>phenytoin sodium intravenous syringe 50 mg/ml</i>	1	MSD
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	1	QL
<i>pregabalin oral solution 20 mg/ml</i>	1	
<i>pregabalin oral tablet extended release 24 hr 165 mg, 330 mg, 82.5 mg</i>	1	QL
<i>primidone oral tablet 250 mg, 50 mg</i>	1	
<i>roweepra oral tablet 1,000 mg, 500 mg, 750 mg</i>	3	

Drug Name	Drug Tier	Requirements / Limits
rufinamide oral suspension 40 mg/ml	1	ST; QL
rufinamide oral tablet 200 mg, 400 mg	1	ST; QL
SABRIL ORAL TABLET 500 MG	2	ST; Specialty; QL
SPRITAM ORAL TABLET FOR SUSPENSION 1,000 MG, 250 MG, 500 MG, 750 MG	3	ST; QL
subvenite oral tablet 100 mg, 150 mg, 200 mg, 25 mg	1	
subvenite starter (blue) kit oral tablets,dose pack 25 mg (35)	1	
subvenite starter (green) kit oral tablets,dose pack 25 mg (84) -100 mg (14)	1	
subvenite starter (orange) kit oral tablets,dose pack 25 mg (42) -100 mg (7)	1	
SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG	3	PA; QL
tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg	1	ST; QL
topiramate oral capsule, sprinkle 15 mg, 25 mg	1	
topiramate oral capsule,sprinkle,er 24hr 100 mg, 150 mg, 200 mg, 25 mg, 50 mg	1	ST; QL
topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	1	
valproate sodium intravenous solution 500 mg/5 ml (100 mg/ml)	1	MSD
valproic acid (as sodium salt) oral solution 250 mg/5 ml	1	
valproic acid oral capsule 250 mg	1	
VALTOCO NASAL SPRAY,NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)	2	QL
vigabatrin oral powder in packet 500 mg	1	ST; Specialty; QL
vigadronе oral powder in packet 500 mg	1	ST; Specialty; QL
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	3	ST; QL
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	3	ST; QL
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 12.5 MG (14)- 25 MG (14), 150 MG (14)- 200 MG (14), 50 MG (14)- 100 MG (14)	3	ST; QL
ZARONTIN ORAL CAPSULE 250 MG	3	

Drug Name	Drug Tier	Requirements / Limits
ZARONTIN ORAL SOLUTION 250 MG/5 ML	3	
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	1	
ZTALMY ORAL SUSPENSION 50 MG/ML	3	PA; ST; Specialty; QL
ANTIPARKINSONISM AGENTS		
<i>apomorphine subcutaneous cartridge 10 mg/ml</i>	1	PA; Specialty; QL
<i>benztropine injection solution 1 mg/ml</i>	1	
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>bromocriptine oral capsule 5 mg</i>	1	
<i>bromocriptine oral tablet 2.5 mg</i>	1	
<i>carbidopa oral tablet 25 mg</i>	1	
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	1	
<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	1	
<i>carbidopa-levodopa oral tablet,disintegrating 10-100 mg, 25-100 mg, 25-250 mg</i>	1	
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	1	
COMTAN ORAL TABLET 200 MG	3	
<i>entacapone oral tablet 200 mg</i>	1	
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE 42 MG	3	PA; Specialty; QL
KYNMOBI SUBLINGUAL FILM 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	3	PA; Specialty; QL
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR	3	ST; QL
NOURIANZ ORAL TABLET 20 MG, 40 MG	3	PA; QL
<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	1	
<i>pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg</i>	1	ST; QL
<i>rasagiline oral tablet 0.5 mg, 1 mg</i>	1	QL
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>	1	ST; QL
RYTARY ORAL CAPSULE, EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG	3	ST; QL
<i>selegiline hcl oral capsule 5 mg</i>	1	
<i>selegiline hcl oral tablet 5 mg</i>	1	
TASMAR ORAL TABLET 100 MG	3	ST; QL
<i>tolcapone oral tablet 100 mg</i>	1	ST; QL
<i>trihexyphenidyl oral elixir 0.4 mg/ml</i>	1	
<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	1	
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-Injector 140 MG/ML	2	PA; QL
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-Injector 70 MG/ML	2	PA
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-Injector 225 MG/1.5 ML	2	PA; QL
AJOVY SYRINGE SUBCUTANEOUS SYRINGE 225 MG/1.5 ML	2	PA; QL
<i>almotriptan malate oral tablet 12.5 mg, 6.25 mg</i>	2	ST; QL
<i>dihydroergotamine injection solution 1 mg/ml</i>	2	MSD; QL
<i>dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)</i>	2	QL
<i>eletriptan oral tablet 20 mg, 40 mg</i>	2	ST; QL
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML	2	PA; QL
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML, 300 MG/3 ML (100 MG/ML X 3)	2	PA; QL
ERGOMAR SUBLINGUAL TABLET 2 MG	3	QL
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	1	QL
<i>frovatriptan oral tablet 2.5 mg</i>	2	ST; QL
<i>migergot rectal suppository 2-100 mg</i>	2	QL
<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	1	QL
NURTEC ODT ORAL TABLET,DISINTEGRATING 75 MG	2	PA; QL
<i>rizatriptan oral tablet 10 mg, 5 mg</i>	1	QL
<i>rizatriptan oral tablet,disintegrating 10 mg, 5 mg</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
sumatriptan nasal spray,non-aerosol 20 mg/actuation, 5 mg/actuation	1	QL
sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg	1	QL
sumatriptan succinate subcutaneous cartridge 4 mg/0.5 ml, 6 mg/0.5 ml	1	QL
sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml, 6 mg/0.5 ml	1	QL
sumatriptan succinate subcutaneous solution 6 mg/0.5 ml	1	QL
sumatriptan-naproxen oral tablet 85-500 mg	2	ST; QL
UBRELVY ORAL TABLET 100 MG, 50 MG	2	PA; QL
zolmitriptan oral tablet 2.5 mg, 5 mg	2	ST; QL
zolmitriptan oral tablet,disintegrating 2.5 mg, 5 mg	2	ST; QL

MISCELLANEOUS NEUROLOGICAL THERAPY

AMONDYS-45 INTRAVENOUS SOLUTION 50 MG/ML	3	MSD
AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG	2	PA; Specialty; QL
dalfampridine oral tablet extended release 12 hr 10 mg	2	PA; Specialty; QL
donepezil oral tablet 10 mg, 23 mg, 5 mg	1	
donepezil oral tablet,disintegrating 10 mg, 5 mg	1	
EVRYSDI ORAL RECON SOLN 0.75 MG/ML	3	PA; Specialty
galantamine oral capsule,ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg	1	QL
galantamine oral solution 4 mg/ml	1	QL
galantamine oral tablet 12 mg, 4 mg, 8 mg	1	QL
memantine oral capsule,sprinkle,er 24hr 14 mg, 21 mg, 28 mg, 7 mg	1	QL
memantine oral solution 2 mg/ml	1	QL
memantine oral tablet 10 mg, 5 mg	1	QL
NUEDEXTA ORAL CAPSULE 20-10 MG	2	PA; QL
NULIBRY INTRAVENOUS RECON SOLN 9.5 MG	3	MSD
RADICAVA INTRAVENOUS SOLUTION 30 MG/100 ML	2	MSD; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
RADICAVA ORS STARTER KIT SUSP ORAL SUSPENSION 105 MG/5 ML	2	Specialty
RAZADYNE ER ORAL CAPSULE,EXT REL. PELLETS 24 HR 16 MG, 24 MG, 8 MG	3	QL
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	1	
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour</i>	1	QL
TEGSEDI SUBCUTANEOUS SYRINGE 284 MG/1.5 ML	3	PA; Specialty; QL
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	1	PA; Specialty; QL
TYSABRI INTRAVENOUS SOLUTION 300 MG/15 ML	2	PA; MSD; Specialty; QL
ZEPOSIA ORAL CAPSULE 0.92 MG	2	PA; Specialty; QL
ZEPOSIA STARTER KIT ORAL CAPSULE,DOSE PACK 0.23-0.46-0.92 MG	2	PA; Specialty; QL
ZEPOSIA STARTER PACK ORAL CAPSULE,DOSE PACK 0.23 MG (4)- 0.46 MG (3)	2	PA; Specialty; QL
ZOLGENSMA INTRAVENOUS KIT 2 X 10EXP13 VG/ML	3	PA; MSD; Specialty; QL

MUSCLE RELAXANTS & ANTISPASMODIC THERAPY

<i>atracurium intravenous solution 10 mg/ml</i>	1	MSD
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	1	
<i>carisoprodol oral tablet 250 mg, 350 mg</i>	1	ST; QL
<i>chlorzoxazone oral tablet 500 mg</i>	1	
<i>cisatracurium intravenous solution 2 mg/ml</i>	1	MSD
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1	
<i>cyclobenzaprine oral tablet 7.5 mg</i>	1	ST
DANTRIUM ORAL CAPSULE 25 MG	3	
<i>dantrolene oral capsule 100 mg, 25 mg, 50 mg</i>	1	
<i>meprobamate oral tablet 200 mg, 400 mg</i>	1	
<i>metaxalone oral tablet 400 mg, 800 mg</i>	1	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	1	
<i>neostigmine methylsulfate intravenous syringe 3 mg/3 ml (1 mg/ml)</i>	1	MSD
NIMBEX INTRAVENOUS SOLUTION 2 MG/ML	3	MSD

Drug Name	Drug Tier	Requirements / Limits
NORGESIC FORTE ORAL TABLET 50-770-60 MG	3	QL
<i>orphenadrine citrate injection solution 30 mg/ml</i>	1	MSD
<i>orphenadrine citrate oral tablet extended release 100 mg</i>	1	
<i>orphenadrine-asa-caffeine oral tablet 50-770-60 mg</i>	2	QL
<i>pyridostigmine bromide oral syrup 60 mg/5 ml</i>	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	1	
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	
<i>pyridostigmine bromide oral tablet extended release 180 mg</i>	1	
<i>regonol injection solution 5 mg/ml</i>	2	MSD
<i>tizanidine oral capsule 2 mg, 4 mg, 6 mg</i>	1	
<i>tizanidine oral tablet 2 mg, 4 mg</i>	1	
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod oral capsule 320.5-30-16 mg</i>	1	ST; Opioid; QL
<i>acetaminophen-codeine oral solution 120-12 mg/5 ml</i>	1	ST; Opioid; QL
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>	1	ST; Opioid; QL
ALLZITAL ORAL TABLET 25-325 MG	3	ST
<i>ascomp with codeine oral capsule 30-50-325-40 mg</i>	1	ST; Opioid; QL
<i>buprenorphine hcl injection solution 0.3 mg/ml</i>	1	ST; Opioid
<i>buprenorphine hcl injection syringe 0.3 mg/ml</i>	1	ST; MSD; Opioid
<i>buprenorphine hcl sublingual tablet 2 mg, 8 mg</i>	1	Opioid; QL
<i>buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour</i>	1	ST; Opioid; QL
<i>butalbital compound w/codeine oral capsule 30-50-325-40 mg</i>	1	ST; Opioid; QL
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg</i>	2	ST; Opioid; QL
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1	ST; Opioid; QL
<i>butalbital-acetaminophen oral capsule 50-300 mg</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>butalbital-acetaminophen oral tablet 25-325 mg</i>	1	ST
<i>butalbital-acetaminophen oral tablet 50-300 mg</i>	2	ST; QL
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	1	QL
<i>butalbital-acetaminophen-caff oral capsule 50-300-40 mg</i>	2	QL
<i>butalbital-acetaminophen-caff oral capsule 50-325-40 mg</i>	1	QL
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	1	QL
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1	QL
<i>butalbital-aspirin-caffeine oral tablet 50-325-40 mg</i>	1	QL
<i>codeine sulfate oral tablet 15 mg, 30 mg, 60 mg</i>	1	ST; Opioid; QL
<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	1	ST; Opioid; QL
DILAUDID (PF) INJECTION SYRINGE 0.2 MG/ML	1	ST; MSD; Opioid
DILAUDID (PF) INJECTION SYRINGE 0.5 MG/0.5 ML, 1 MG/ML, 2 MG/ML, 4 MG/ML	3	ST; MSD; Opioid
<i>diskets oral tablet,soluble 40 mg</i>	2	ST; Opioid; QL
<i>duramorph (pf) injection solution 0.5 mg/ml, 1 mg/ml</i>	3	ST; MSD; Opioid
<i>endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1	ST; Opioid; QL
FENTANYL (PF)-BUPIVACAINE-NACL INJECTION SOLUTION 2 MCG/ML- 0.0625 %, 2 MCG/ML- 0.1 %, 2 MCG/ML- 0.125 %	1	ST; MSD; Opioid
FENTANYL CITRATE (PF) INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN 1,500 MCG/30 ML (50 MCG/ML)	1	ST; MSD; Opioid
<i>fentanyl citrate (pf) intravenous pt controlled analgesia syring 1,000 mcg/20 ml (50 mcg/ml)</i>	1	ST; MSD; Opioid
FENTANYL CITRATE (PF) INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 1,500 MCG/30 ML (50 MCG/ML)	1	ST; MSD; Opioid
FENTANYL CITRATE (PF) INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 2,500 MCG/50 ML (50 MCG/ML)	3	ST; Opioid
FENTANYL CITRATE (PF) INTRAVENOUS SYRINGE 250 MCG/5 ML (50 MCG/ML)	1	ST; MSD; Opioid

Drug Name	Drug Tier	Requirements / Limits
FENTANYL CITRATE (PF)-0.9% NACL INJECTION PREFILLED PUMP RESERVOIR 10 MCG/ML	1	ST; MSD; Opioid
<i>fentanyl citrate (pf)-0.9%nacl injection pt controlled analgesia syring 1,250 mcg/25 ml</i>	1	ST; Opioid
<i>fentanyl citrate (pf)-0.9%nacl intravenous pt controlled analgesia syring 2,500 mcg/50 ml (50 mcg/ml)</i>	1	ST; MSD; Opioid
FENTANYL CITRATE (PF)-0.9% NACL INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 500 MCG/50 ML (10 MCG/ML)	1	ST; MSD; Opioid
<i>fentanyl citrate (pf)-0.9%nacl intravenous syringe 10 mcg/ml</i>	1	ST; MSD; Opioid
FENTANYL CITRATE (PF)-0.9% NACL INTRAVENOUS SYRINGE 20 MCG/2 ML (10 MCG/ML), 50 MCG/5 ML (10 MCG/ML)	1	ST; MSD; Opioid
<i>fentanyl citrate buccal lozenge on a handle 1,200 mcg, 1,600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg</i>	1	PA; ST; Opioid; QL
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hour, 50 mcg/hr, 62.5 mcg/hour, 75 mcg/hr, 87.5 mcg/hour</i>	1	PA; ST; Opioid; QL
FENTANYL-ROPIVACAINE-NACL (PF) INJECTION PREFILLED PUMP RESERVOIR 2 MCG/ML-0.1 %	1	ST; Opioid
FENTANYL-ROPIVACAINE-NACL (PF) INJECTION SOLUTION 2-0.2 MCG/ML-%	1	ST; MSD; Opioid
<i>hydrocodone bitartrate oral tablet,oral only,ext.rel.24 hr 100 mg, 120 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg</i>	1	ST; Opioid; QL
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	1	ST; Opioid; QL
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	1	ST; Opioid; QL
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg</i>	1	ST; Opioid
<i>hydrocodone-ibuprofen oral tablet 7.5-200 mg</i>	1	ST
HYDROMORPHONE (PF) IN WATER INJECTION SYRINGE 1 MG/ML, 2 MG/2 ML (1 MG/ML)	1	ST; MSD; Opioid

Drug Name	Drug Tier	Requirements / Limits
HYDROMORPHONE (PF) IN WATER INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 10 MG/50 ML (0.2 MG/ML)	3	ST; MSD; Opioid
HYDROMORPHONE (PF) IN WATER INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 30 MG/30 ML (1 MG/ML), 6 MG/30 ML (0.2 MG/ML)	1	ST; MSD; Opioid
HYDROMORPHONE (PF) INJECTION SOLUTION 1 MG/ML, 4 MG/ML	1	ST; MSD; Opioid
<i>hydromorphone (pf) injection solution 10 mg/ml</i>	1	ST; MSD; Opioid
<i>hydromorphone (pf) injection solution 2 mg/ml</i>	1	ST; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN 30 MG/30 ML (1 MG/ML)	1	ST; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN 6 MG/30 ML (0.2 MG/ML)	2	ST; Opioid
<i>hydromorphone (pf)-0.9 % nacl intravenous prefilled pump reservoir 10 mg/50 ml (0.2 mg/ml)</i>	1	ST; MSD; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PREFILLED PUMP RESERVOIR 50 MG/50 ML (1 MG/ML)	1	ST; Opioid
<i>hydromorphone (pf)-0.9 % nacl intravenous pt controlled analgesia syring 10 mg/50 ml (0.2 mg/ml), 15 mg/30 ml (0.5 mg/ml)</i>	1	ST; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 30 MG/30 ML (1 MG/ML), 50 MG/50 ML (1 MG/ML)	1	ST; MSD; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 55 MG/55 ML (1 MG/ML)	1	ST; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 6 MG/30 ML (0.2 MG/ML)	2	ST; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS SOLUTION 0.2 MG/ML, 0.5 MG/ML	1	ST; MSD; Opioid

Drug Name	Drug Tier	Requirements / Limits
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS SOLUTION 1 MG/ML	1	ST; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS SYRINGE 1 MG/5 ML (0.2 MG/ML), 2 MG/ML	1	ST; MSD; Opioid
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS SYRINGE 1 MG/ML	2	ST; Opioid
<i>hydromorphone injection solution 1 mg/ml, 2 mg/ml</i>	1	ST; MSD; Opioid
HYDROMORPHONE INJECTION SYRINGE 0.5 MG/0.5 ML	1	ST; MSD; Opioid
<i>hydromorphone injection syringe 1 mg/ml, 2 mg/ml, 4 mg/ml</i>	1	ST; MSD; Opioid
<i>hydromorphone oral liquid 1 mg/ml</i>	1	ST; Opioid
<i>hydromorphone oral tablet 2 mg, 4 mg, 8 mg</i>	1	ST; Opioid
<i>hydromorphone oral tablet extended release 24 hr 12 mg, 16 mg, 32 mg, 8 mg</i>	2	PA; ST; Opioid; QL
<i>hydromorphone rectal suppository 3 mg</i>	1	ST; Opioid
HYDROMORPHONE(PF)-NACL,ISO-OSM INTRAVENOUS PT CONTROLLED ANALGESIA SYRINGE 10 MG/50 ML (0.2 MG/ML)	1	ST; MSD; Opioid
INFUMORPH P/F INJECTION SOLUTION 10 MG/ML, 25 MG/ML	3	ST; MSD; Opioid
<i>levorphanol tartrate oral tablet 2 mg</i>	1	ST; Opioid
<i>meperidine oral tablet 50 mg</i>	2	ST; Opioid; QL
<i>methadone oral concentrate 10 mg/ml</i>	1	ST; Opioid; QL
<i>methadone oral solution 10 mg/5 ml, 5 mg/5 ml</i>	1	ST; Opioid; QL
<i>methadone oral tablet 10 mg, 5 mg</i>	1	ST; Opioid; QL
<i>methadone oral tablet,soluble 40 mg</i>	1	ST; Opioid; QL
<i>methadose oral concentrate 10 mg/ml</i>	2	ST; Opioid; QL
<i>methadose oral tablet,soluble 40 mg</i>	1	ST; Opioid; QL
MITIGO (PF) INJECTION SOLUTION 10 MG/ML, 25 MG/ML	1	ST; MSD; Opioid
MORPHINE (PF) IN 0.9 % SOD CHL INJECTION SYRINGE 1 MG/ML	2	ST; Opioid
MORPHINE (PF) IN 0.9 % SOD CHL INJECTION SYRINGE 2 MG/2 ML (1 MG/ML)	2	ST; MSD; Opioid

Drug Name	Drug Tier	Requirements / Limits
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PATIENT CONTROL ANALGESIA SOLN 30 MG/30 ML (1 MG/ML)	2	ST; Opioid
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PREFILLED PUMP RESERVOIR 100 MG/100 ML (1 MG/ML), 50 MG/50 ML (1 MG/ML)	2	ST; MSD; Opioid
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PT CONTROLLED ANALGESIA SYRINGE 150 MG/30 ML (5 MG/ML)	1	ST; MSD; Opioid
<i>morphine (pf) in 0.9 % sod chl intravenous pt controlled analgesia syring 30 mg/30 ml (1 mg/ml), 50 mg/50 ml (1 mg/ml)</i>	1	ST; MSD; Opioid
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PT CONTROLLED ANALGESIA SYRINGE 55 MG/55 ML (1 MG/ML)	1	ST; Opioid
<i>morphine (pf) in 0.9 % sod chl intravenous solution 1 mg/ml</i>	1	ST; Opioid
<i>morphine (pf) in 0.9 % sod chl intravenous syringe 1 mg/ml, 2 mg/2 ml (1 mg/ml)</i>	1	ST; MSD; Opioid
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS SYRINGE 2 MG/ML, 4 MG/ML	2	ST; MSD; Opioid
<i>morphine (pf) in 0.9 % sod chl intravenous syringe 5 mg/5 ml (1 mg/ml)</i>	1	ST; Opioid
<i>morphine (pf) injection solution 0.5 mg/ml, 1 mg/ml</i>	1	ST; MSD; Opioid
<i>morphine (pf) intravenous patient control.analgesia soln 30 mg/30 ml (1 mg/ml)</i>	1	ST; MSD; Opioid
MORPHINE (PF) INTRAVENOUS SYRINGE 1 MG/2 ML	1	ST; MSD; Opioid
<i>morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)</i>	1	ST; Opioid
MORPHINE IN 0.9 % SODIUM CHLOR INJECTION PT CONTROLLED ANALGESIA SYRINGE 55 MG/55 ML (1 MG/ML)	1	ST; MSD; Opioid
<i>morphine in 0.9 % sodium chlor intravenous prefilled pump reservoir 100 mg/100 ml (1 mg/ml), 50 mg/50 ml (1 mg/ml)</i>	1	ST; Opioid

Drug Name	Drug Tier	Requirements / Limits
<i>morphine in 0.9 % sodium chlor intravenous pt controlled analgesia syring 30 mg/30 ml (1 mg/ml), 50 mg/50 ml (1 mg/ml)</i>	1	ST; Opioid
MORPHINE IN 0.9 % SODIUM CHLOR INTRAVENOUS SOLUTION 1 MG/ML	1	ST; MSD; Opioid
MORPHINE IN 0.9 % SODIUM CHLOR INTRAVENOUS SOLUTION 5 MG/ML	1	ST; Opioid
MORPHINE INJECTION SOLUTION 10 MG/ML	2	ST; Opioid
MORPHINE INJECTION SOLUTION 2 MG/ML, 4 MG/ML	1	ST; MSD; Opioid
MORPHINE INJECTION SOLUTION 5 MG/ML	2	ST; MSD; Opioid
<i>morphine injection solution 8 mg/ml</i>	1	ST; Opioid
MORPHINE INJECTION SYRINGE 2 MG/ML	1	ST; Opioid
<i>morphine injection syringe 4 mg/ml, 8 mg/ml</i>	1	ST; MSD; Opioid
MORPHINE INTRAMUSCULAR PEN INJECTOR 10 MG/0.7 ML	1	ST; MSD; Opioid
<i>morphine intravenous pt controlled analgesia syring 30 mg/30 ml (1 mg/ml)</i>	1	ST; MSD; Opioid
<i>morphine intravenous solution 10 mg/ml, 50 mg/ml</i>	1	ST; MSD; Opioid
<i>morphine intravenous solution 4 mg/ml</i>	1	ST; Opioid
MORPHINE INTRAVENOUS SOLUTION 8 MG/ML	1	ST; Opioid
<i>morphine intravenous syringe 10 mg/ml, 2 mg/ml, 4 mg/ml</i>	1	ST; MSD; Opioid
MORPHINE INTRAVENOUS SYRINGE 8 MG/ML	1	ST; MSD; Opioid
<i>morphine oral capsule,extend.release pellets 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	2	ST; Opioid; QL
<i>morphine oral solution 10 mg/5 ml, 20 mg/5 ml (4 mg/ml)</i>	1	ST; Opioid
<i>morphine oral tablet 15 mg, 30 mg</i>	1	ST; Opioid
<i>morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	1	ST; Opioid; QL
<i>morphine rectal suppository 10 mg, 20 mg, 30 mg, 5 mg</i>	1	ST; Opioid
MS CONTIN ORAL TABLET EXTENDED RELEASE 100 MG, 15 MG, 200 MG, 30 MG, 60 MG	3	ST; Opioid; QL
<i>oxycodone oral capsule 5 mg</i>	1	ST; Opioid

Drug Name	Drug Tier	Requirements / Limits
oxycodone oral concentrate 20 mg/ml	2	ST; Opioid
oxycodone oral solution 5 mg/5 ml	1	ST; Opioid
oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	ST; Opioid
OXYCODONE ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 10 MG, 20 MG, 40 MG, 80 MG	1	ST; Opioid; QL
oxycodone-acetaminophen oral solution 5-325 mg/5 ml	1	ST; QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	ST; Opioid; QL
oxycodone-acetaminophen oral tablet 5-300 mg	1	ST; Opioid
OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	2	ST; Opioid; QL
oxymorphone oral tablet 10 mg, 5 mg	1	ST; Opioid
oxymorphone oral tablet extended release 12 hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg	1	ST; Opioid; QL
PROLATE ORAL SOLUTION 10-300 MG/5 ML	3	ST; Opioid
ROXYBOND ORAL TABLET, ORAL ONLY 15 MG, 30 MG, 5 MG	2	ST; Opioid
SUBLIMAZE SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 100 MG/0.5 ML, 300 MG/1.5 ML	2	Specialty; Opioid; QL
tencon oral tablet 50-325 mg	1	
zebutal oral capsule 50-325-40 mg	1	

NON-NARCOTIC ANALGESICS

adult aspirin regimen oral tablet,delayed release (dr/ec) 81 mg	1	ACA
aspirin oral tablet 325 mg	1	ACA
aspirin oral tablet,chewable 81 mg	1	ACA
aspirin oral tablet,delayed release (dr/ec) 325 mg, 81 mg	1	ACA
aspir-trin oral tablet,delayed release (dr/ec) 325 mg	1	ACA
bayer aspirin oral tablet 325 mg	1	ACA
bayer aspirin oral tablet,delayed release (dr/ec) 325 mg	1	ACA
bayer low dose aspirin oral tablet,delayed release (dr/ec) 81 mg	1	ACA

Drug Name	Drug Tier	Requirements / Limits
buprenorphine-naloxone sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg	1	QL
buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg	1	QL
butorphanol injection solution 1 mg/ml, 2 mg/ml	1	ST; MSD
butorphanol nasal spray,non-aerosol 10 mg/ml	1	ST
CALDOLOR INTRAVENOUS PIGGYBACK 800 MG/200 ML (4 MG/ML)	2	MSD
CALDOLOR INTRAVENOUS RECON SOLN 800 MG/8 ML (100 MG/ML)	2	MSD
cataflam oral tablet 50 mg	3	
celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg	1	QL
children's aspirin oral tablet,chewable 81 mg	1	ACA
choline,magnesium salicylate oral liquid 500 mg/5 ml	1	
DICLOFENAC EPOLAMINE TRANSDERMAL PATCH 12 HOUR 1.3 %	1	
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium oral tablet extended release 24 hr 100 mg	1	
diclofenac sodium oral tablet,delayed release (dr/ec) 25 mg, 50 mg, 75 mg	1	
diclofenac sodium topical drops 1.5 %	1	QL
diclofenac sodium topical gel 1 %	1	QL
diclofenac-misoprostol oral tablet,ir,delayed rel,biphasic 50-200 mg-mcg, 75-200 mg-mcg	1	
DICLOFONO TOPICAL GEL IN PACKET 1.6 %	3	ST
diflunisal oral tablet 500 mg	1	
DISALCID ORAL TABLET 500 MG, 750 MG	3	
ecotrin oral tablet,delayed release (dr/ec) 325 mg	1	ACA
etodolac oral capsule 200 mg, 300 mg	1	
etodolac oral tablet 400 mg, 500 mg	1	
etodolac oral tablet extended release 24 hr 400 mg, 500 mg, 600 mg	1	
EUFLEXXA INTRA-ARTICULAR SYRINGE 10 MG/ML(MW 2.4 -3.6 MILLION)	2	PA; MSD; Specialty; QL
fenoprofen oral tablet 600 mg	2	
flurbiprofen oral tablet 100 mg	1	

Drug Name	Drug Tier	Requirements / Limits
FROTEK TOPICAL CREAM IN PACKET 10 %	3	ST
<i>ibu</i> oral tablet 400 mg, 600 mg, 800 mg	1	
<i>ibuprofen</i> oral tablet 400 mg, 600 mg, 800 mg	1	
<i>ibuprofen-famotidine</i> oral tablet 800-26.6 mg	1	
INDOCIN RECTAL SUPPOSITORY 50 MG	3	QL
<i>indomethacin</i> oral capsule 25 mg, 50 mg	1	
<i>indomethacin</i> oral capsule, extended release 75 mg	1	
<i>ketoprofen</i> oral capsule 25 mg, 50 mg, 75 mg	2	
<i>ketoprofen</i> oral capsule, ext rel. pellets 24 hr 200 mg	2	
<i>ketorolac</i> injection cartridge 15 mg/ml	1	MSD
<i>ketorolac</i> injection solution 15 mg/ml, 30 mg/ml, 30 mg/ml (1 ml)	1	MSD
<i>ketorolac</i> injection syringe 15 mg/ml, 30 mg/ml	1	MSD
<i>ketorolac</i> intramuscular solution 60 mg/2 ml	1	MSD
<i>ketorolac</i> intramuscular syringe 60 mg/2 ml	1	MSD
<i>ketorolac</i> oral tablet 10 mg	1	QL
KLOXXADO NASAL SPRAY, NON-AEROSOL 8 MG/ACTUATION	3	
LICART TRANSDERMAL PATCH 24 HOUR 1.3 %	3	ST; QL
LIFEMS NALOXONE INJECTION SYRINGE KIT 2 MG/2 ML	2	MSD
LODINE ORAL TABLET 400 MG	3	
LUCEMYRA ORAL TABLET 0.18 MG	2	QL
<i>meclofenamate</i> oral capsule 100 mg, 50 mg	1	
<i>mefenamic acid</i> oral capsule 250 mg	2	
<i>meloxicam</i> oral tablet 15 mg, 7.5 mg	1	
MONOVISC INTRA-ARTICULAR SYRINGE 88 MG/4 ML	2	PA; MSD; QL
<i>nabumetone</i> oral tablet 500 mg, 750 mg	1	
<i>nalbuphine</i> injection solution 10 mg/ml, 20 mg/ml	1	ST; MSD
NALMEFENE INJECTION SOLUTION 1 MG/ML	2	
<i>naloxone</i> injection solution 0.4 mg/ml	1	MSD; ACA
<i>naloxone</i> injection syringe 0.4 mg/ml	1	MSD; \$0 Copay
<i>naloxone</i> injection syringe 1 mg/ml	1	MSD; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>naloxone nasal spray,non-aerosol 4 mg/actuation</i>	1	ACA
<i>naltrexone oral tablet 50 mg</i>	1	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	1	
<i>naproxen oral tablet,delayed release (dr/ec) 375 mg, 500 mg</i>	1	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	1	
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG	3	ST; Opioid; QL
NUCYNTA ORAL TABLET 100 MG, 50 MG, 75 MG	3	ST; Opioid; QL
OLINVYK INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN 30 MG/30 ML (1 MG/ML)	3	ST; MSD
OLINVYK INTRAVENOUS SOLUTION 1 MG/ML	3	ST; MSD
ORTHOVISC INTRA-ARTICULAR SYRINGE 30 MG/2 ML	2	PA; MSD; QL
<i>oxaprozin oral tablet 600 mg</i>	1	
<i>pentazocine-naloxone oral tablet 50-0.5 mg</i>	1	ST
<i>piroxicam oral capsule 10 mg, 20 mg</i>	1	
RELAFEN ORAL TABLET 500 MG, 750 MG	3	
<i>salsalate oral tablet 500 mg, 750 mg</i>	1	
<i>st joseph aspirin oral tablet,chewable 81 mg</i>	1	ACA
<i>st. joseph aspirin oral tablet,delayed release (dr/ec) 81 mg</i>	1	ACA
<i>sulindac oral tablet 150 mg, 200 mg</i>	1	
<i>tolmetin oral tablet 200 mg</i>	1	
TORONOVA II SUIK KIT 30 MG/ML	3	MSD
TORONOVA SUIK KIT 30 MG/ML	3	MSD
<i>tramadol oral tablet 50 mg</i>	1	ST; QL
<i>tramadol oral tablet extended release 24 hr 100 mg, 200 mg, 300 mg</i>	1	ST; QL
<i>tramadol oral tablet, er multiphase 24 hr 100 mg, 200 mg, 300 mg</i>	1	ST; QL
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	1	ST; QL
VISCO-3 INTRA-ARTICULAR SYRINGE 10 MG/ML	3	PA; MSD

Drug Name	Drug Tier	Requirements / Limits
VIVITROL INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 380 MG	2	MSD; Specialty
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG	2	QL
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 300 MG, 400 MG	2	MSD; Specialty; QL
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 300 MG, 400 MG	2	MSD; Specialty; QL
ADZENYS XR-ODT ORAL TABLET,DISINTEG ER BIPHASE 24H 12.5 MG, 15.7 MG, 18.8 MG, 3.1 MG, 6.3 MG, 9.4 MG	3	ST
<i>alprazolam intensol oral concentrate 1 mg/ml</i>	2	
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg, 3 mg</i>	1	
<i>alprazolam oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	2	
<i>amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>amitriptyline-chlordiazepoxide oral tablet 12.5-5 mg, 25-10 mg</i>	1	
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	1	
<i>amphetamine sulfate oral tablet 10 mg, 5 mg</i>	1	PA; QL
<i>aripiprazole oral solution 1 mg/ml</i>	1	ST; QL
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	1	QL
<i>aripiprazole oral tablet,disintegrating 10 mg, 15 mg</i>	1	ST; QL
ARISTADA INITIO INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 675 MG/2.4 ML	2	MSD

Drug Name	Drug Tier	Requirements / Limits
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 1,064 MG/3.9 ML, 441 MG/1.6 ML, 662 MG/2.4 ML, 882 MG/3.2 ML	2	Specialty
armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg	1	QL
asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg	1	ST; QL
atomoxetine oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg	1	QL
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	3	ST; QL
bupropion hcl oral tablet 100 mg, 75 mg	1	
bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg	1	QL
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	2	ST; QL
bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg	1	QL
buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	1	
BYFAVO INTRAVENOUS RECON SOLN 20 MG	3	MSD
chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg	1	
chlorpromazine injection solution 25 mg/ml	1	MSD
chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml	1	
chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg	1	
citalopram oral solution 10 mg/5 ml	1	
citalopram oral tablet 10 mg, 20 mg, 40 mg	1	\$0 Copay
clomipramine oral capsule 25 mg, 50 mg, 75 mg	2	
clonidine hcl oral tablet extended release 12 hr 0.1 mg	1	QL
clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg	1	
clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg	1	QL
clozapine oral tablet,disintegrating 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
CLOZARIL ORAL TABLET 200 MG, 50 MG	3	QL
<i>desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	2	
<i>desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg</i>	1	QL
<i>dexmethylphenidate oral capsule,er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	1	QL
<i>dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	QL
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg, 5 mg</i>	1	QL
<i>dextroamphetamine sulfate oral solution 5 mg/5 ml</i>	1	QL
<i>dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	1	QL
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	1	QL
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	1	QL
<i>diazepam injection solution 5 mg/ml</i>	1	
<i>diazepam injection syringe 5 mg/ml</i>	1	MSD
<i>diazepam intensol oral concentrate 5 mg/ml</i>	1	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	1	
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	1	
<i>doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>doxepin oral concentrate 10 mg/ml</i>	1	
<i>duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	
<i>duloxetine oral capsule,delayed release(dr/ec) 40 mg</i>	2	
EDLUAR SUBLINGUAL TABLET 10 MG, 5 MG	3	
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	3	ST; QL
<i>ergoloid oral tablet 1 mg</i>	1	
<i>escitalopram oxalate oral solution 5 mg/5 ml</i>	1	
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>estazolam oral tablet 1 mg, 2 mg</i>	1	
<i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>	1	QL
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	3	ST; QL
FANAPT ORAL TABLETS,DOSE PACK 1MG(2)-2MG(2)- 4MG(2)-6MG(2)	3	ST; QL
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26)	3	ST; QL
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	3	ST; QL
<i>flumazenil intravenous solution 0.1 mg/ml</i>	1	MSD
<i>fluoxetine oral capsule 10 mg, 20 mg, 40 mg</i>	1	\$0 Copay
<i>fluoxetine oral capsule,delayed release(dr/ec) 90 mg</i>	1	
<i>fluoxetine oral solution 20 mg/5 ml (4 mg/ml)</i>	1	
<i>fluoxetine oral tablet 10 mg</i>	1	
<i>fluoxetine oral tablet 20 mg</i>	2	
<i>fluphenazine decanoate injection solution 25 mg/ml</i>	1	MSD
<i>fluphenazine hcl injection solution 2.5 mg/ml</i>	1	MSD
<i>fluphenazine hcl oral concentrate 5 mg/ml</i>	1	
<i>fluphenazine hcl oral elixir 2.5 mg/5 ml</i>	1	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	1	
<i>flurazepam oral capsule 15 mg, 30 mg</i>	1	
<i>fluvoxamine oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg</i>	1	QL
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml</i>	1	MSD
<i>haloperidol lactate injection solution 5 mg/ml</i>	1	MSD
<i>haloperidol lactate intramuscular syringe 5 mg/ml</i>	1	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	1	
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>	1	
HETLIOZ LQ ORAL SUSPENSION 4 MG/ML	3	PA
HETLIOZ ORAL CAPSULE 20 MG	3	PA
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg</i>	2	
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,092 MG/3.5 ML, 1,560 MG/5 ML	3	MSD; Specialty
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML, 156 MG/ML, 234 MG/1.5 ML, 39 MG/0.25 ML, 78 MG/0.5 ML	3	MSD; Specialty
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML, 410 MG/1.32 ML, 546 MG/1.75 ML, 819 MG/2.63 ML	3	MSD; Specialty
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG	2	ST; QL
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>	1	\$0 Copay
<i>lithium carbonate oral tablet 300 mg</i>	1	\$0 Copay
<i>lithium carbonate oral tablet extended release 300 mg, 450 mg</i>	1	
<i>lorazepam injection solution 2 mg/ml, 4 mg/ml</i>	1	MSD
<i>lorazepam injection syringe 2 mg/ml</i>	1	MSD
<i>lorazepam intensol oral concentrate 2 mg/ml</i>	1	
<i>lorazepam oral concentrate 2 mg/ml</i>	1	
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>	1	
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	3	PA; QL
MARPLAN ORAL TABLET 10 MG	3	ST
<i>methamphetamine oral tablet 5 mg</i>	1	QL
<i>methylphenidate hcl oral capsule, er biphasic 30-70 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	1	QL
<i>methylphenidate hcl oral capsule,er biphasic 50-50 10 mg, 20 mg, 30 mg, 40 mg, 60 mg</i>	1	QL
<i>methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml</i>	1	QL
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	1	QL
<i>methylphenidate hcl oral tablet extended release 10 mg</i>	1	
<i>methylphenidate hcl oral tablet extended release 20 mg</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg	1	QL
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 72 MG	1	QL
methylphenidate hcl oral tablet, chewable 10 mg, 2.5 mg, 5 mg	2	QL
MIDAZOLAM (PF) IN 0.9 % NACL INTRAVENOUS PREFILLED PUMP RESERVOIR 100 MG/100 ML (1 MG/ML)	1	
MIDAZOLAM (PF) IN 0.9 % NACL INTRAVENOUS SYRINGE 2 MG/2 ML (1 MG/ML), 5 MG/5 ML (1 MG/ML)	1	
MIDAZOLAM IN 0.9 % SOD CHLORID INTRAVENOUS SOLUTION 1 MG/ML	1	MSD
MIDAZOLAM IN 0.9 % SOD CHLORID INTRAVENOUS SYRINGE 2 MG/2 ML (1 MG/ML), 5 MG/5 ML (1 MG/ML)	1	MSD
MIDAZOLAM IN NAACL, ISO-Osmo(PF) INTRAVENOUS SOLUTION 1 MG/ML	1	MSD
MIDAZOLAM INTRAVENOUS SYRINGE 150 MG/30 ML (5 MG/ML)	1	MSD
midazolam oral syrup 2 mg/ml	1	
mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg	1	
mirtazapine oral tablet, disintegrating 15 mg, 30 mg, 45 mg	1	
MKO (MIDAZOLAM-KETAMINE-ONDAN) SUBLINGUAL TROCHE 3-25-2 MG	1	
modafinil oral tablet 100 mg, 200 mg	1	QL
molindone oral tablet 10 mg, 25 mg	1	QL
molindone oral tablet 5 mg	1	
MYDAYIS ORAL CAPSULE, ER TRIPHASIC 24 HR 12.5 MG, 25 MG, 37.5 MG, 50 MG	2	QL
nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	1	
nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg	1	
nortriptyline oral solution 10 mg/5 ml	1	
NUPLAZID ORAL CAPSULE 34 MG	3	PA; Specialty; QL
NUPLAZID ORAL TABLET 10 MG	3	PA; Specialty; QL
olanzapine intramuscular recon soln 10 mg	1	MSD; QL

Drug Name	Drug Tier	Requirements / Limits
olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	1	\$0 Copay; QL
olanzapine oral tablet,disintegrating 10 mg, 15 mg, 20 mg, 5 mg	1	QL
olanzapine-fluoxetine oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg	1	QL
oxazepam oral capsule 10 mg, 15 mg, 30 mg	1	
paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 6 mg, 9 mg	2	ST; QL
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	1	
paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg	2	
paroxetine mesylate(menop.sym) oral capsule 7.5 mg	1	ST; QL
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	1	
perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	1	
PERSERIS ABDOMINAL SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 120 MG, 90 MG	3	Specialty
PEXEVA ORAL TABLET 10 MG, 20 MG, 30 MG	3	ST
phenelzine oral tablet 15 mg	1	
pimozide oral tablet 1 mg, 2 mg	1	
protriptyline oral tablet 10 mg, 5 mg	2	
QUAZEPAM ORAL TABLET 15 MG	2	
quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 50 mg	1	\$0 Copay; QL
quetiapine oral tablet 400 mg	1	QL
quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg	1	QL
ramelteon oral tablet 8 mg	1	ST; QL
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 12.5 MG/2 ML, 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML	2	MSD; Specialty
risperidone oral solution 1 mg/ml	1	QL
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	1	\$0 Copay; QL

Drug Name	Drug Tier	Requirements / Limits
<i>risperidone oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	QL
SAPHRIS SUBLINGUAL TABLET 10 MG, 2.5 MG, 5 MG	3	ST; QL
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR	3	ST; QL
<i>sertraline oral concentrate 20 mg/ml</i>	1	
<i>sertraline oral tablet 100 mg, 25 mg, 50 mg</i>	1	\$0 Copay
SILENOR ORAL TABLET 3 MG, 6 MG	3	ST; QL
SUNOSI ORAL TABLET 150 MG, 75 MG	2	PA; QL
<i>temazepam oral capsule 15 mg, 30 mg</i>	1	
<i>temazepam oral capsule 22.5 mg, 7.5 mg</i>	2	
<i>thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1	
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>tranylcypromine oral tablet 10 mg</i>	2	
<i>trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>	1	
<i>triazolam oral tablet 0.125 mg, 0.25 mg</i>	1	
<i>trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>trimipramine oral capsule 100 mg, 25 mg, 50 mg</i>	1	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	3	ST; QL
<i>venlafaxine oral capsule,extended release 24hr 150 mg, 37.5 mg, 75 mg</i>	1	
<i>venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	
<i>venlafaxine oral tablet extended release 24hr 150 mg, 225 mg, 37.5 mg, 75 mg</i>	2	
VIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG	3	ST; QL
VIIBRYD ORAL TABLETS,DOSE PACK 10 MG (7)- 20 MG (23)	3	ST; QL
<i>vilazodone oral tablet 10 mg, 20 mg, 40 mg</i>	1	ST; QL
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	3	ST; QL
VRAYLAR ORAL CAPSULE,DOSE PACK 1.5 MG (1)- 3 MG (6)	3	ST; QL

Drug Name	Drug Tier	Requirements / Limits
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG	2	QL
VYVANSE ORAL TABLET,CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG	2	QL
WAKIX ORAL TABLET 17.8 MG, 4.45 MG	3	PA; Specialty; QL
XYREM ORAL SOLUTION 500 MG/ML	3	PA; Specialty; QL
XYWAV ORAL SOLUTION 0.5 GRAM/ML	3	PA; Specialty
<i>zaleplon oral capsule 10 mg, 5 mg</i>	1	QL
<i>zenzedi oral tablet 10 mg, 5 mg</i>	1	QL
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	1	QL
<i>ziprasidone mesylate intramuscular recon soln 20 mg/ml (final conc.)</i>	1	MSD
<i>zolpidem oral tablet 10 mg, 5 mg</i>	1	QL
<i>zolpidem oral tablet,ext release multiphase 12.5 mg, 6.25 mg</i>	1	QL
<i>zolpidem sublingual tablet 1.75 mg, 3.5 mg</i>	1	ST; QL
ZOLPIMIST ORAL SPRAY,NON-AEROSOL 5 MG/SPRAY (0.1 ML)	3	ST
ZULRESSO INTRAVENOUS SOLUTION 5 MG/ML	3	MSD
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 210 MG, 300 MG, 405 MG	3	MSD; Specialty

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone oral tablet 100 mg, 200 mg, 400 mg</i>	1	
<i>bretylium tosylate injection solution 50 mg/ml</i>	1	MSD
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>	1	
<i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>	1	
<i>flecainide oral tablet 100 mg, 150 mg, 50 mg</i>	1	
<i>mexiletine oral capsule 150 mg, 200 mg, 250 mg</i>	1	
MULTAQ ORAL TABLET 400 MG	3	ST
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 100 MG, 150 MG	3	ST
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	1	
<i>procainamide injection solution 100 mg/ml, 500 mg/ml</i>	1	MSD

Drug Name	Drug Tier	Requirements / Limits
<i>propafenone oral capsule, extended release 12 hr 225 mg, 325 mg, 425 mg</i>	1	
<i>propafenone oral tablet 150 mg, 225 mg, 300 mg</i>	1	
<i>quinidine gluconate oral tablet extended release 324 mg</i>	1	
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	1	
<i>sorine oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1	
<i>sotalol af oral tablet 120 mg, 160 mg, 80 mg</i>	1	
SOTALOL INTRAVENOUS SOLUTION 150 MG/10 ML (15 MG/ML)	2	MSD
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1	
SOTYLIZE ORAL SOLUTION 5 MG/ML	2	ST; QL
ANTIHYPERTENSIVE THERAPY		
<i>acebutolol oral capsule 200 mg, 400 mg</i>	1	
<i>aliskiren oral tablet 150 mg, 300 mg</i>	1	ST; QL
<i>amiloride oral tablet 5 mg</i>	1	
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	1	
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>amlodipine-benazepril oral capsule 10-20 mg, 10- 40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1	
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10- 40 mg, 5-20 mg, 5-40 mg</i>	1	ST
<i>amlodipine-valsartan oral tablet 10-160 mg, 10- 320 mg, 5-160 mg, 5-320 mg</i>	1	ST
<i>amlodipine-valsartan-hcthiazid oral tablet 10-160- 12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg</i>	1	ST
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50- 25 mg</i>	1	
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1	
<i>betaxolol oral tablet 10 mg, 20 mg</i>	1	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	1	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
BREVIBLOC IN NACL (ISO-OSM) INTRAVENOUS PARENTERAL SOLUTION 2,000 MG/100 ML, 2,500 MG/250 ML (10 MG/ML)	3	MSD
BREVIBLOC INTRAVENOUS SOLUTION 100 MG/10 ML (10 MG/ML)	3	MSD
<i>bumetanide injection solution 0.25 mg/ml</i>	1	MSD
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1	
<i>candesartan-hydrochlorothiazid oral tablet 16- 12.5 mg, 32-12.5 mg, 32-25 mg</i>	1	
<i>captotril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	1	
<i>captotril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	1	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR 4 MG, 8 MG	3	ST
<i>cartia xt oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg</i>	1	
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>carvedilol phosphate oral capsule, er multiphase 24 hr 10 mg, 20 mg, 40 mg, 80 mg</i>	1	
<i>chlorothiazide sodium intravenous recon soln 500 mg</i>	1	MSD
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	1	
<i>clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr</i>	1	QL
DEM SER ORAL CAPSULE 250 MG	3	
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	1	
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1	
<i>diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1	
dilt-xr oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg	1	
DIOVAN HCT ORAL TABLET 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG	3	
DIOVAN ORAL TABLET 160 MG, 320 MG, 40 MG, 80 MG	3	
DIURIL IV INTRAVENOUS RECON SOLN 500 MG	3	MSD
doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg	1	
DYRENIUM ORAL CAPSULE 100 MG, 50 MG	3	ST
EDARBI ORAL TABLET 40 MG, 80 MG	2	ST
EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG	2	ST
EDECIN ORAL TABLET 25 MG	3	
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	1	
enalaprilat intravenous solution 1.25 mg/ml	1	MSD
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	1	
eplerenone oral tablet 25 mg, 50 mg	1	
epoprostenol (glycine) intravenous recon soln 0.5 mg, 1.5 mg	1	PA
epoprostenol intravenous recon soln 0.5 mg, 1.5 mg	1	PA; Specialty
eprosartan oral tablet 600 mg	1	ST
esmolol in nacl (iso-osm) intravenous parenteral solution 2,000 mg/100 ml, 2,500 mg/250 ml (10 mg/ml)	1	MSD
ESMOLOL IN STERILE WATER INTRAVENOUS PARENTERAL SOLUTION 2,000 MG/100 ML (20 MG/ML), 2,500 MG/250 ML (10 MG/ML)	1	MSD
esmolol intravenous solution 100 mg/10 ml (10 mg/ml)	1	MSD
ethacrynat sodium intravenous recon soln 50 mg	1	MSD
ethacrynic acid oral tablet 25 mg	1	
felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg	1	

Drug Name	Drug Tier	Requirements / Limits
FLOLAN INTRAVENOUS RECON SOLN 0.5 MG, 1.5 MG	3	PA; Specialty
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1	
FUROSEMIDE IN 0.9 % NACL INTRAVENOUS PIGGYBACK 100 MG/100 ML (1 MG/ML)	2	MSD
<i>furosemide injection solution 10 mg/ml</i>	1	MSD
<i>furosemide injection syringe 10 mg/ml</i>	1	MSD
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	1	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>guanfacine oral tablet 1 mg, 2 mg</i>	1	
<i>hydralazine injection solution 20 mg/ml</i>	1	MSD
<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1	
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	1	
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	1	
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	1	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	1	
<i>labetalol intravenous solution 5 mg/ml</i>	1	MSD
<i>labetalol intravenous syringe 20 mg/4 ml (5 mg/ml)</i>	1	MSD
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1	
LASIX ORAL TABLET 20 MG, 40 MG, 80 MG	3	
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	
<i>matzim la oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>methyldopa oral tablet 250 mg, 500 mg</i>	1	
<i>methyldopa-hydrochlorothiazide oral tablet 250-15 mg, 250-25 mg</i>	1	
<i>methyldopate intravenous solution 250 mg/5 ml</i>	1	MSD
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1	
<i>metoprolol tartrate intravenous solution 5 mg/5 ml</i>	1	MSD
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	
<i>metyrosine oral capsule 250 mg</i>	1	
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	1	
<i>moexipril oral tablet 15 mg, 7.5 mg</i>	1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	QL
<i>nicardipine oral capsule 20 mg, 30 mg</i>	1	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	1	
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1	
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1	
<i>nimodipine oral capsule 30 mg</i>	1	
<i>nisoldipine oral tablet extended release 24 hr 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg</i>	1	
NYMALIZE ORAL SOLUTION 60 MG/10 ML	3	PA
NYMALIZE ORAL SYRINGE 30 MG/5 ML, 60 MG/10 ML	3	PA; QL
<i>olmesartan oral tablet 20 mg, 40 mg, 5 mg</i>	1	
<i>olmesartanamlodipin-hcthiazid oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</i>	1	ST
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	1	
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG	3	PA; Specialty
<i>papaverine injection solution 30 mg/ml</i>	1	MSD

Drug Name	Drug Tier	Requirements / Limits
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	1	
<i>phenoxybenzamine oral capsule 10 mg</i>	1	PA; Specialty; QL
<i>phentolamine injection recon soln 5 mg</i>	1	MSD
<i>pindolol oral tablet 10 mg, 5 mg</i>	1	
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1	
PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7-5 MG	3	ST
<i>propranolol intravenous solution 1 mg/ml</i>	1	MSD
<i>propranolol oral capsule, extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1	
<i>propranolol-hydrochlorothiazid oral tablet 40-25 mg, 80-25 mg</i>	1	
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	1	
REMODULIN INJECTION SOLUTION 1 MG/ML, 10 MG/ML, 2.5 MG/ML, 5 MG/ML	3	PA; Specialty
SODIUM EDECRIN INTRAVENOUS RECON SOLN 50 MG	3	MSD
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	1	
<i>taztia xt oral capsule, extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
TEKTURNA HCT ORAL TABLET 150-12.5 MG, 150-25 MG, 300-12.5 MG, 300-25 MG	2	ST; QL
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1	
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	1	
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>tiadylt er oral capsule, extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1	
<i>torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	1	
<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	1	
<i>trandolapril-verapamil oral tablet, ir - er, biphasic 24hr 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg</i>	1	
<i>treprostinil sodium injection solution 1 mg/ml, 10 mg/ml, 2.5 mg/ml, 5 mg/ml</i>	1	PA; Specialty
<i>triamterene oral capsule 100 mg, 50 mg</i>	1	ST
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	1	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1	
UPTRAVI INTRAVENOUS RECON SOLN 1,800 MCG	2	PA; MSD; Specialty; QL
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	2	PA; Specialty; QL
UPTRAVI ORAL TABLETS,DOSE PACK 200 MCG (140)- 800 MCG (60)	2	PA; Specialty; QL
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	1	
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1	
<i>veletri intravenous recon soln 0.5 mg, 1.5 mg</i>	3	PA; Specialty
<i>verapamil oral capsule, 24 hr er pellet ct 100 mg, 200 mg, 300 mg</i>	1	
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 120 mg, 180 mg, 240 mg</i>	1	
CARDIAC GLYCOSIDES		
<i>digitek oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1	
<i>digox oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1	
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	2	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
LANOXIN ORAL TABLET 62.5 MCG (0.0625 MG)	3	
COAGULATION THERAPY		
ADVATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 4,000 (+/-) UNIT, 500 (+/-) UNIT	2	Specialty
ADYNOVATE INTRAVENOUS SOLUTION 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT, 750 (+/-) UNIT	2	Specialty
AFSTYLA INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT RANGE, 1,500 (+/-) UNIT RANGE, 2,000 (+/-) UNIT RANGE, 2,500 (+/-) UNIT RANGE, 250 (+/-) UNIT RANGE, 3,000 (+/-) UNIT RANGE, 500 (+/-) UNIT RANGE	2	Specialty
ALPHANATE INTRAVENOUS RECON SOLN 1,000 (400 VWF) UNIT/10 ML, 1,500 (600 VWF) UNIT/10 ML, 2,000 (800 VWF) UNIT/10 ML, 250 (100 VWF) UNIT/5 ML, 500 (200 VWF) UNIT/5 ML	2	Specialty
ALPHANINE SD INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 500 (+/-) UNIT	2	Specialty
ALPROLIX INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 500 UNIT	2	Specialty
<i>aminocaproic acid intravenous solution 250 mg/ml</i>	1	
<i>aminocaproic acid oral solution 250 mg/ml (25 %)</i>	1	
<i>aminocaproic acid oral tablet 1,000 mg, 500 mg</i>	1	
ANDEXXA INTRAVENOUS RECON SOLN 200 MG	3	PA; MSD; Specialty
<i>argatroban in 0.9 % sod chlor intravenous solution 1 mg/ml</i>	1	MSD; Specialty
ARGATROBAN IN NACL (ISO-OS) INTRAVENOUS SOLUTION 50 MG/50 ML (1 MG/ML)	3	Specialty
ARGATROBAN INTRAVENOUS SOLUTION 100 MG/ML	3	Specialty
ARIIXTRA SUBCUTANEOUS SYRINGE 10 MG/0.8 ML, 2.5 MG/0.5 ML, 5 MG/0.4 ML, 7.5 MG/0.6 ML	3	Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg	1	
ASPIRIN-OMEPRAZOLE ORAL TABLET,IR,DELAYED REL,BIPHASIC 81-40 MG	2	QL
BENEFIX INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT	2	Specialty
bivalirudin intravenous recon soln 250 mg	2	PA; MSD; Specialty
BIVALIRUDIN INTRAVENOUS SOLUTION 250 MG/50 ML (5 MG/ML)	2	PA; MSD; Specialty
BRILINTA ORAL TABLET 60 MG, 90 MG	2	QL
CABLIVI INJECTION KIT 11 MG	3	PA; MSD; Specialty; QL
CEPROTIN (BLUE BAR) INTRAVENOUS RECON SOLN 500 UNIT	2	Specialty
CEPROTIN (GREEN BAR) INTRAVENOUS RECON SOLN 1,000 UNIT	2	Specialty
cilostazol oral tablet 100 mg, 50 mg	1	
clopidogrel oral tablet 300 mg	1	QL
clopidogrel oral tablet 75 mg	1	
COAGADEX INTRAVENOUS RECON SOLN 250 (+/-) UNIT RANGE, 500 (+/-) UNIT RANGE	2	Specialty
CORIFACT INTRAVENOUS RECON SOLN 1,000-1,600 UNIT	2	Specialty
DEFITELIO INTRAVENOUS SOLUTION 80 MG/ML	2	MSD
dipyridamole oral tablet 25 mg, 50 mg, 75 mg	1	
DOPTELET (15 TAB PACK) ORAL TABLET 20 MG	2	PA; Specialty; QL
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 5 MG (74 TABS)	2	QL
ELIQUIS ORAL TABLET 2.5 MG, 5 MG	2	QL
ELOCTATE INTRAVENOUS RECON SOLN 1,000 UNIT, 1,500 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 5,000 UNIT, 500 UNIT, 6,000 UNIT, 750 UNIT	2	Specialty
enoxaparin subcutaneous solution 300 mg/3 ml	1	Specialty; QL
enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml	1	Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
ESPEROCT INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	2	MSD; Specialty
FEIBA NF INTRAVENOUS RECON SOLN 1,750-3,250 UNIT, 350-650 UNIT, 700-1,300 UNIT	2	Specialty
FIBRYGA INTRAVENOUS RECON SOLN 1 GRAM (700 MG- 1,300 MG)	2	MSD
<i>fondaparinux subcutaneous syringe 10 mg/0.8 ml, 2.5 mg/0.5 ml, 5 mg/0.4 ml, 7.5 mg/0.6 ml</i>	1	Specialty; QL
FRAGMIN SUBCUTANEOUS SOLUTION 25,000 ANTI-XA UNIT/ML	2	Specialty; QL
FRAGMIN SUBCUTANEOUS SYRINGE 10,000 ANTI-XA UNIT/ML, 12,500 ANTI-XA UNIT/0.5 ML, 15,000 ANTI-XA UNIT/0.6 ML, 18,000 ANTI-XA UNIT/0.72 ML, 2,500 ANTI-XA UNIT/0.2 ML, 5,000 ANTI-XA UNIT/0.2 ML, 7,500 ANTI-XA UNIT/0.3 ML	2	Specialty; QL
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7 ML, 150 MG/ML, 30 MG/ML, 60 MG/0.4 ML	3	PA; Specialty
HEMOFIL M HIGH INTRAVENOUS RECON SOLN 801-1,500 UNIT	2	Specialty
HEMOFIL M LOW INTRAVENOUS RECON SOLN 220-400 UNIT	2	Specialty
HEMOFIL M MID INTRAVENOUS RECON SOLN 401-800 UNIT	2	Specialty
HEMOFIL M SUPER HIGH INTRAVENOUS RECON SOLN 1,501-2,000 UNIT	2	Specialty
<i>hep flush-10 (pf) intravenous solution 10 unit/ml</i>	1	MSD
HEPARIN (PORCINE) IN 0.9% NACL INTRAVENOUS PARENTERAL SOLUTION 2,500 UNIT/500 ML (5 UNIT/ML)	1	
HEPARIN (PORCINE) IN 0.9% NACL INTRAVENOUS PARENTERAL SOLUTION 30,000 UNIT/1,000 ML, 5,000 UNIT/1,000 ML, 5,000 UNIT/500 ML (10 UNIT/ML)	1	MSD
<i>heparin (porcine) in 5 % dex intravenous parenteral solution 20,000 unit/500 ml (40 unit/ml), 25,000 unit/250 ml(100 unit/ml), 25,000 unit/500 ml (50 unit/ml)</i>	1	MSD
<i>heparin (porcine) in nacl (pf) intravenous parenteral solution 1,000 unit/500 ml, 2,000 unit/1,000 ml</i>	1	MSD

Drug Name	Drug Tier	Requirements / Limits
heparin (porcine) injection cartridge 5,000 unit/ml (1 ml)	1	MSD
heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml	1	MSD
heparin (porcine) injection syringe 5,000 unit/ml	1	
heparin flush(porcine)-0.9nacl intravenous kit 100 unit/ml	1	MSD
heparin lock flush (porcine) intravenous solution 10 unit/ml	1	
heparin lock flush (porcine) intravenous solution 100 unit/ml	1	MSD
heparin lockflush(porcine)(pf) intravenous syringe 10 unit/ml, 100 unit/ml	1	MSD
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	2	MSD
heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml	1	MSD
heparin, porcine (pf) injection solution 1,000 unit/ml	1	MSD
heparin, porcine (pf) injection solution 5,000 unit/0.5 ml	1	
heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml	1	MSD
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	1	MSD
heparin, porcine (pf) intravenous solution 100 unit/ml (1 ml)	1	
heparin, porcine (pf) intravenous syringe 1 unit/ml, 100 unit/ml	1	MSD
HEPARIN, PORCINE (PF) SUBCUTANEOUS SYRINGE 5,000 UNIT/0.5 ML	1	
HUMATE-P INTRAVENOUS RECON SOLN 1,000-2,400 UNIT, 250-600 UNIT, 500-1,200 UNIT	2	Specialty
IDELVION INTRAVENOUS RECON SOLN 3,500 (+/-) UNIT	3	Specialty
IXINITY INTRAVENOUS RECON SOLN 1,000 UNIT, 1,500 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT	2	Specialty

Drug Name	Drug Tier	Requirements / Limits
jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	1	
JIVI INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	2	Specialty
KCENTRA INTRAVENOUS RECON SOLN 1,000 UNIT (800-1240 UNIT), 500 UNIT (400-620 UNIT)	2	Specialty
KOATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 250 (+/-) UNIT, 500 (+/-) UNIT	3	Specialty
KOGENATE FS INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	2	Specialty
KOVALTRY INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	2	Specialty
LOVENOX SUBCUTANEOUS SOLUTION 300 MG/3 ML	3	Specialty; QL
MEPHYTON ORAL TABLET 5 MG	3	
NOVOEIGHT INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	2	Specialty
NOVOSEVEN RT INTRAVENOUS RECON SOLN 1 MG (1,000 MCG), 2 MG (2,000 MCG)	2	MSD; Specialty
NOVOSEVEN RT INTRAVENOUS RECON SOLN 5 MG (5,000 MCG), 8 MG (8,000 MCG)	2	Specialty
NPLATE SUBCUTANEOUS RECON SOLN 125 MCG	2	PA; Specialty
NPLATE SUBCUTANEOUS RECON SOLN 250 MCG, 500 MCG	2	PA; Specialty; QL
OBIZUR INTRAVENOUS RECON SOLN 500 (+/-) UNIT RANGE	2	Specialty
pentoxyfylline oral tablet extended release 400 mg	1	
PHYTONADIONE (VITAMIN K1) INJECTION SOLUTION 1 MG/0.5 ML	1	MSD
phytonadione (vitamin k1) injection solution 10 mg/ml	1	MSD
PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE 1 MG/0.5 ML	1	MSD
phytonadione (vitamin k1) oral tablet 5 mg	1	
prasugrel oral tablet 10 mg, 5 mg	1	QL

Drug Name	Drug Tier	Requirements / Limits
PRAXBIND INTRAVENOUS SOLUTION 2.5 GRAM/50 ML	2	MSD; Specialty
PROFILNINE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 500 (+/-) UNIT	2	Specialty
PROMACTA ORAL POWDER IN PACKET 12.5 MG, 25 MG	2	PA; Specialty; QL
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG	2	PA; Specialty; QL
<i>protamine intravenous solution 10 mg/ml</i>	1	MSD
REBINYN INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 500 (+/-) UNIT	3	MSD; Specialty
RIASTAP INTRAVENOUS RECON SOLN 1 GRAM (900MG-1,300MG)	2	MSD
RIXUBIS INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT	3	Specialty
SEVENFACT INTRAVENOUS RECON SOLN 1 MG (1,000 MCG), 5 MG (5,000 MCG)	3	Specialty
TRANEXAMIC ACID IN NACL,ISO-OS INTRAVENOUS PIGGYBACK 1,000 MG/100 ML (10 MG/ML)	1	MSD
<i>tranexamic acid intravenous solution 1,000 mg/10 ml (100 mg/ml)</i>	1	MSD
TRETEN INTRAVENOUS RECON SOLN 2,500 UNIT	2	Specialty
<i>vitamin k injection solution 1 mg/0.5 ml</i>	1	MSD
<i>vitamin k1 injection solution 10 mg/ml</i>	1	MSD
VONVENDI INTRAVENOUS RECON SOLN 1,300 (+/-) UNIT RANGE, 650 (+/-) UNIT RANGE	2	Specialty
<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	
WILATE INTRAVENOUS RECON SOLN 1,000-1,000 UNIT, 500-500 UNIT	2	Specialty
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9)	2	QL
XARELTO ORAL SUSPENSION FOR RECONSTITUTION 1 MG/ML	2	QL
XARELTO ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG	2	QL

Drug Name	Drug Tier	Requirements / Limits
ZONTIVITY ORAL TABLET 2.08 MG	3	QL
LIPID/CHOLESTEROL LOWERING AGENTS		
amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg	1	ST; QL
atorvastatin oral tablet 10 mg, 20 mg	1	ACA; QL
atorvastatin oral tablet 40 mg, 80 mg	1	QL
cholestyramine (with sugar) oral powder 4 gram	1	
cholestyramine (with sugar) oral powder in packet 4 gram	1	
cholestyramine light oral powder 4 gram	1	
cholestyramine light oral powder in packet 4 gram	1	
colesevelam oral tablet 625 mg	1	
colestipol oral granules 5 gram	1	
colestipol oral packet 5 gram	1	
colestipol oral tablet 1 gram	1	
ezetimibe oral tablet 10 mg	1	QL
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg	1	QL
ezetimibe-simvastatin oral tablet 10-80 mg	1	ST; QL
fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg	1	
fenofibrate nanocrystallized oral tablet 145 mg, 48 mg	1	
FENOFIBRATE ORAL CAPSULE 150 MG, 50 MG	1	ST
fenofibrate oral tablet 120 mg, 40 mg	2	
fenofibrate oral tablet 160 mg, 54 mg	1	
fenofibric acid (choline) oral capsule, delayed release(dr/ec) 135 mg, 45 mg	1	
fenofibric acid oral tablet 105 mg	2	
fenofibric acid oral tablet 35 mg	1	
fluvastatin oral capsule 20 mg, 40 mg	2	ST; ACA; QL
fluvastatin oral tablet extended release 24 hr 80 mg	2	ST; ACA; QL
gemfibrozil oral tablet 600 mg	1	
icosapent ethyl oral capsule 0.5 gram, 1 gram	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
JUXTAPIID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 5 MG, 60 MG	2	PA; Specialty; QL
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	1	ACA; QL
NEXLETOL ORAL TABLET 180 MG	2	PA
NEXLIZET ORAL TABLET 180-10 MG	2	PA; QL
<i>niacin oral tablet 500 mg</i>	1	
<i>niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg</i>	1	
<i>omega-3 acid ethyl esters oral capsule 1 gram</i>	1	QL
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1	ACA; QL
<i>prevalite oral powder 4 gram</i>	1	
<i>prevalite oral powder in packet 4 gram</i>	1	
QUESTRAN LIGHT ORAL POWDER 4 GRAM	3	
QUESTRAN ORAL POWDER 4 GRAM	3	
QUESTRAN ORAL POWDER IN PACKET 4 GRAM	3	
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR 420 MG/3.5 ML	2	PA; QL
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	2	PA; QL
REPATHA SYRINGE SUBCUTANEOUS SYRINGE 140 MG/ML	2	PA; QL
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	1	ACA; QL
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	QL
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	ACA; QL
<i>simvastatin oral tablet 80 mg</i>	1	ST; QL
VASCEPA ORAL CAPSULE 0.5 GRAM	2	ST; QL
MISCELLANEOUS CARDIOVASCULAR AGENTS		
CORLANOR ORAL SOLUTION 5 MG/5 ML	2	QL
CORLANOR ORAL TABLET 5 MG, 7.5 MG	2	ST; QL
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	2	
GIAPREZA INTRAVENOUS SOLUTION 2.5 MG/ML	3	MSD
NIPRIDE RTU INTRAVENOUS SOLUTION 20 MG/100 ML (0.2 MG/ML), 50 MG/100 ML (0.5 MG/ML)	3	MSD

Drug Name	Drug Tier	Requirements / Limits
<i>ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg</i>	1	QL
VECAMYL ORAL TABLET 2.5 MG	3	PA
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG	3	PA
VYNDAMAX ORAL CAPSULE 61 MG	3	PA; Specialty; QL
VYNDAQEL ORAL CAPSULE 20 MG	3	PA; Specialty; QL
NITRATES		
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	1	
<i>isosorbide dinitrate oral tablet 40 mg</i>	2	
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	1	
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	1	
<i>nitro-bid transdermal ointment 2 %</i>	2	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.3 MG/HR, 0.4 MG/HR, 0.6 MG/HR, 0.8 MG/HR	3	
<i>nitroglycerin in 5 % dextrose intravenous solution 100 mg/250 ml (400 mcg/ml), 200 mg/500 ml (400 mcg/ml), 25 mg/250 ml (100 mcg/ml), 50 mg/250 ml (200 mcg/ml), 50 mg/500 ml (100 mcg/ml)</i>	1	MSD
<i>nitroglycerin intravenous solution 50 mg/10 ml (5 mg/ml)</i>	1	MSD
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i>	1	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	1	
<i>nitroglycerin translingual spray,non-aerosol 400 mcg/spray</i>	1	
NITROLINGUAL TRANSLINGUAL SPRAY,NON-AEROSOL 400 MCG/SPRAY	3	
NITROMIST TRANSLINGUAL AEROSOL,SPRAY 400 MCG/SPRAY	3	
<i>nitro-time oral capsule, extended release 2.5 mg, 6.5 mg, 9 mg</i>	1	
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	1	
<i>calcipotriene scalp solution 0.005 %</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>calcipotriene topical cream 0.005 %</i>	1	ST
<i>calcipotriene topical ointment 0.005 %</i>	1	ST
<i>calcipotriene-betamethasone topical ointment 0.005-0.064 %</i>	1	ST
<i>calcitriol topical ointment 3 mcg/gram</i>	1	ST
<i>drithocreme hp topical cream 1 %</i>	2	ST
<i>hydrocortisone-pramoxine topical cream 2.5-1 %</i>	1	
ILUMYA SUBCUTANEOUS SYRINGE 100 MG/ML	2	PA; Specialty; QL
<i>selenium sulfide topical lotion 2.5 %</i>	1	
<i>selenium sulfide topical shampoo 2.25 %</i>	2	
SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML	2	PA; Specialty; QL
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	2	PA; Specialty; QL
SKYRIZI SUBCUTANEOUS SYRINGE KIT 150MG/1.66ML(75 MG/0.83 ML X2)	2	PA; Specialty; QL
SORILUX TOPICAL FOAM 0.005 %	3	ST
STELARA INTRAVENOUS SOLUTION 130 MG/26 ML	2	PA; MSD; Specialty
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	2	PA; Specialty; QL
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	2	PA; Specialty; QL
<i>sulfacetamide sodium topical cleanser 10 %</i>	1	
<i>sulfacetamide sodium topical cleanser, gel 10 %</i>	1	
TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	2	PA; Specialty; QL
TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	2	PA; Specialty; QL
TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	2	PA; Specialty; QL
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 80 MG/ML	2	PA; Specialty; QL
TREMFYA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	2	PA; Specialty; QL
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML	2	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
ZITHRANOL TOPICAL SHAMPOO 1 %	3	
BURN THERAPY		
silver sulfadiazine topical cream 1 %	1	
ssd topical cream 1 %	1	
KERATOLYTICS		
salicylic acid topical cream 6 %	1	
salicylic acid topical cream,extended release 6 %	1	
salicylic acid topical film forming liquid w/appl 27.5 %	1	
salicylic acid topical film-forming soln er w/ appl 28.5 %	1	
salicylic acid topical foam 6 %	1	
salicylic acid topical gel 6 %	1	
salicylic acid topical liquid 26 %	1	
salicylic acid topical lotion 6 %	1	
salicylic acid topical lotion,extended release 6 %	1	
salicylic acid topical shampoo 6 %	1	
salicylic acid-ceramides no.1 topical kit,cleanser and cream er 6 %	2	
SALIMEZ FORTE TOPICAL CREAM 10 %	3	
salimez topical cream 6 %	2	
salvax topical foam 6 %	1	
ULTRASAL-ER TOPICAL FILM-FORMING SOLN ER W/ APPL 28.5 %	3	
MISCELLANEOUS DERMATOLOGICALS		
AMELUZ TOPICAL GEL 10 %	3	MSD
ATRAPRO HYDROGEL TOPICAL GEL	3	
avo cream topical emulsion	1	
cem-urea topical gel 45 %	1	
CERACADE TOPICAL EMULSION	3	
CERAMAX TOPICAL CREAM	3	
CERAMAX TOPICAL LOTION	3	
DEXERYL TOPICAL CREAM	3	
diclofenac sodium topical gel 3 %	1	ST; QL
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML, 300 MG/2 ML	2	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 100 MG/0.67 ML, 200 MG/1.14 ML, 300 MG/2 ML	2	PA; Specialty; QL
<i>emulsion sb topical emulsion</i>	1	
EUCRISA TOPICAL OINTMENT 2 %	3	ST
FLUOROURACIL TOPICAL CREAM 0.5 %	1	PA
<i>fluorouracil topical cream 5 %</i>	1	
<i>fluorouracil topical solution 2 %, 5 %</i>	1	
HALUCORT TOPICAL GEL	3	
IODOFLEX TOPICAL PADS, MEDICATED 0.9 %	3	
IODOSORB TOPICAL GEL 0.9 %	3	
LEVICYN ANTIPRURITIC SG TOPICAL SPRAY GEL	3	
LEVICYN ANTIPRURITIC TOPICAL GEL	3	
LEVULAN TOPICAL SOLUTION 20 %	3	MSD
<i>luxamend topical cream</i>	3	
<i>mb hydrogel topical kit,cream and gel 96.53-3-0.4 -0.066 %</i>	1	
<i>methoxsalen oral capsule,liqd-filled,rapid rel 10 mg</i>	1	
<i>methyl salicylate oil</i>	1	
<i>methyl salicylate topical liquid</i>	1	
PANRETIN TOPICAL GEL 0.1 %	3	Specialty
<i>pimecrolimus topical cream 1 %</i>	1	ST
<i>podofilox topical solution 0.5 %</i>	1	MSD
<i>pruclair topical cream</i>	1	
QBREXZA TOPICAL TOWELETTE 2.4 %	3	PA; QL
REGRANEX TOPICAL GEL 0.01 %	2	
SCENESSE SUBCUTANEOUS IMPLANT 16 MG	3	PA; MSD; Specialty; QL
SEBUDERM TOPICAL GEL	3	
<i>silver nitrate applicators topical stick 75-25 %</i>	1	MSD
<i>silver nitrate topical solution 0.5 %, 25 %, 50 %</i>	1	
<i>silver nitrate topical solution 10 %</i>	1	MSD
<i>sonafine topical emulsion</i>	1	
<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
umecta topical foam 40 %	1	
urea nail stick topical solution 50 %	1	
urea topical cream 39 %, 40 %, 45 %, 47 %, 50 %	1	
urea topical foam 35 %	1	
urea topical gel 45 %	1	
VALCHLOR TOPICAL GEL 0.016 %	2	PA; Specialty
wintergreen oil oil	1	
THERAPY FOR ACNE		
accutane oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	QL
adapalene topical cream 0.1 %	1	
adapalene topical gel 0.3 %	1	
adapalene topical gel with pump 0.3 %	1	
ADAPALENE TOPICAL LOTION 0.1 %	1	
adapalene topical solution 0.1 %	2	
amnesteem oral capsule 10 mg, 20 mg, 40 mg	2	QL
AVAR-E LS TOPICAL CREAM 10-2 %	3	
azelaic acid topical gel 15 %	1	ST
benzepro topical towelette 6 %	1	
benzoyl peroxide topical cleanser 7 %	1	
benzoyl peroxide topical foam 9.8 %	1	
bp 10-1 topical cleanser 10-1 %	1	
claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg	2	QL
cleansing wash topical cleanser 10-4-10 %	1	
clindamycin phosphate topical foam 1 %	2	
clindamycin phosphate topical gel 1 %	1	\$0 Copay
clindamycin phosphate topical gel, once daily 1 %	1	
clindamycin phosphate topical lotion 1 %	1	
clindamycin phosphate topical solution 1 %	1	\$0 Copay; QL
clindamycin phosphate topical swab 1 %	1	\$0 Copay
clindamycin-benzoyl peroxide topical gel 1.2 %(1 % base) -5 %	1	\$0 Copay
clindamycin-benzoyl peroxide topical gel 1-5 %	1	
clindamycin-tretinoin topical gel 1.2-0.025 %	2	
dapsone topical gel 5 %	1	
ery pads topical swab 2 %	1	
erythromycin with ethanol topical gel 2 %	1	

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin with ethanol topical solution 2 %</i>	1	\$0 Copay; QL
<i>erythromycin-benzoyl peroxide topical gel 3-5 %</i>	1	
<i>isotretinoin oral capsule 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg</i>	1	QL
<i>metronidazole topical cream 0.75 %</i>	1	
<i>metronidazole topical gel 0.75 %</i>	1	
<i>metronidazole topical gel 1 %</i>	2	
<i>metronidazole topical gel with pump 1 %</i>	2	
<i>metronidazole topical lotion 0.75 %</i>	2	
MIRVASO TOPICAL GEL WITH PUMP 0.33 %	2	
<i>myorisan oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	2	QL
NEUAC KIT TOPICAL COMBO PACK, CREAM AND GEL 1.2-5 %	3	
<i>neuac topical gel 1.2 %(1 % base) -5 %</i>	1	\$0 Copay
PR BENZOYL PEROXIDE TOPICAL CLEANSER 7 %	2	
<i>rosadan topical cream 0.75 %</i>	1	
<i>rosula cleansing cloths topical pads, medicated 10-5 %</i>	1	
<i>sss 10-5 topical cream 10-5 % (w/w)</i>	1	
<i>sss 10-5 topical foam 10-5 %</i>	1	
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 9-4 %, 9-4.5 %, 9.8-4.8 %</i>	1	
<i>sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w)</i>	1	\$0 Copay; QL
<i>sulfacetamide sodium-sulfur topical cream 10-2 %, 10-5 % (w/w), 9.8-4.8 %</i>	1	
<i>sulfacetamide sodium-sulfur topical lotion 10-5 % (w/v), 10-5 % (w/w), 9.8-4.8 %</i>	1	
<i>sulfacetamide sodium-sulfur topical pads, medicated 10-4 %</i>	2	
<i>sulfacetamide sodium-sulfur topical pads, medicated 9.8-4.8 %</i>	1	
<i>sulfacetamide sodium-sulfur topical suspension 10-5 %, 8-4 %</i>	1	
<i>sulfacetamide sod-sulfur-urea topical cleanser 10-5-10 %</i>	1	\$0 Copay; QL
<i>sulfacetamide-sulfur-cleansr23 topical kit 9-4.5 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
sulfacleanse 8-4 topical suspension 8-4 %	1	
tazarotene topical cream 0.1 %	1	
tazarotene topical gel 0.05 %, 0.1 %	1	
TAZORAC TOPICAL CREAM 0.05 %	2	ST
TAZORAC TOPICAL GEL 0.05 %, 0.1 %	2	ST
tretinooin microspheres topical gel 0.04 %, 0.1 %	2	ST; QL
tretinooin topical cream 0.025 %, 0.05 %, 0.1 %	1	
tretinooin topical gel 0.01 %	1	
tretinooin topical gel 0.025 %, 0.05 %	2	
VANOXIDE-HC TOPICAL SUSPENSION 5-0.5 %	3	
zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg	2	QL

TOPICAL ANESTHETICS

COCAINE NASAL SOLUTION 4 %	1	
ethyl chloride topical aerosol,spray 100 %	3	
glydo mucous membrane jelly in applicator 2 %	1	
GOPRELTO NASAL SOLUTION 4 %	3	
lidocaine (pf) injection solution 10 mg/ml (1 %), 15 mg/ml (1.5 %), 20 mg/ml (2 %), 40 mg/ml (4 %)	1	MSD
LIDOCAINE (PF) INJECTION SYRINGE 200 MG/10 ML (2 %), 60 MG/3 ML (2 %)	1	MSD
lidocaine (pf) injection syringe 50 mg/5 ml (1 %)	1	MSD
lidocaine hcl laryngotracheal solution 4 %	1	
lidocaine hcl mucous membrane jelly 2 %	1	
lidocaine hcl mucous membrane jelly in applicator 2 %	1	
lidocaine hcl mucous membrane solution 4 % (40 mg/ml)	1	
lidocaine hcl topical cream 3 %	1	
lidocaine hcl-hydrocortison ac topical cream 3-0.5 %	1	
lidocaine topical adhesive patch,medicated 5 %	1	
lidocaine topical ointment 5 %	1	QL
lidocaine viscous mucous membrane solution 2 %	1	
lidocaine-prilocaine topical cream 2.5-2.5 %	1	
lidocort topical cream 3-0.5 %	3	
lta pre-attached laryngotracheal solution 4 %	2	

Drug Name	Drug Tier	Requirements / Limits
NUMBRINO NASAL SOLUTION 4 %	1	
XYLOCAINE-MPF INJECTION SOLUTION 20 MG/ML (2 %)	2	MSD
TOPICAL ANTIBACTERIALS		
corti-sav topical cream 1-1 %	1	
gentamicin topical cream 0.1 %	1	QL
gentamicin topical ointment 0.1 %	1	
hydrocortisone-iodoquinol topical cream 1-1 %	1	
hydrocortisone-iodoquinol-aloe topical cream in packet 1.9-1 %	1	
lugols topical solution 5-10 %	1	
mafenide acetate topical packet 50 gram	1	
mupirocin topical ointment 2 %	1	
NEO-SYNALAR KIT TOPICAL CREAM 0.5 % (0.35 % BASE)-0.025 %	3	ST
NEO-SYNALAR TOPICAL CREAM 0.5 % (0.35 % BASE)-0.025 %	3	ST
QUINJA TOPICAL GEL 1.25-1 %	3	
strong iodine topical solution 5-10 %	1	
sulfacetamide sodium (acne) topical suspension 10 %	1	\$0 Copay
SULFAMYLYON TOPICAL CREAM 85 MG/G	2	
SULFAMYLYON TOPICAL PACKET 50 GRAM	2	
XEPI TOPICAL CREAM 1 %	3	
TOPICAL ANTIFUNGALS		
ALA-QUIN TOPICAL CREAM 3-0.5 %	3	
ciclopirox topical cream 0.77 %	1	QL
ciclopirox topical gel 0.77 %	2	QL
ciclopirox topical shampoo 1 %	2	
ciclopirox topical solution 8 %	1	QL
ciclopirox topical suspension 0.77 %	1	QL
clotrimazole-betamethasone topical cream 1-0.05 %	1	
clotrimazole-betamethasone topical lotion 1-0.05 %	1	
econazole topical cream 1 %	2	QL
ERTACZO TOPICAL CREAM 2 %	3	ST

Drug Name	Drug Tier	Requirements / Limits
KERYDIN TOPICAL SOLUTION WITH APPLICATOR 5 %	3	PA; QL
<i>ketoconazole topical cream 2 %</i>	1	QL
<i>ketoconazole topical foam 2 %</i>	2	
<i>ketoconazole topical shampoo 2 %</i>	1	
<i>ketodan kit topical combo pack 2 %</i>	2	
<i>ketodan topical foam 2 %</i>	2	
LULICONAZOLE TOPICAL CREAM 1 %	3	
<i>naftifine topical cream 1 %</i>	2	
<i>naftifine topical cream 2 %</i>	2	QL
<i>nyamyc topical powder 100,000 unit/gram</i>	1	
<i>nystatin topical cream 100,000 unit/gram</i>	1	
<i>nystatin topical ointment 100,000 unit/gram</i>	1	
<i>nystatin topical powder 100,000 unit/gram</i>	1	
<i>nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%</i>	1	
<i>nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%</i>	1	
<i>nystop topical powder 100,000 unit/gram</i>	1	
<i>oxiconazole topical cream 1 %</i>	2	QL
OXISTAT TOPICAL LOTION 1 %	3	
SULCONAZOLE TOPICAL CREAM 1 %	2	
<i>tavaborole topical solution with applicator 5 %</i>	1	PA; QL
TOPICAL ANTIVIRALS		
<i>acyclovir topical ointment 5 %</i>	2	
TOPICAL CORTICOSTEROIDS		
ADVANCED ALLERGY COLLECT KIT TOPICAL KIT 2.5 %	1	
<i>alclometasone topical cream 0.05 %</i>	1	
<i>alclometasone topical ointment 0.05 %</i>	1	
<i>amcinonide topical cream 0.1 %</i>	2	ST
<i>betamethasone dipropionate topical cream 0.05 %</i>	1	
<i>betamethasone dipropionate topical lotion 0.05 %</i>	1	
<i>betamethasone dipropionate topical ointment 0.05 %</i>	1	
<i>betamethasone valerate topical cream 0.1 %</i>	1	
<i>betamethasone valerate topical foam 0.12 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>betamethasone valerate topical lotion 0.1 %</i>	1	
<i>betamethasone valerate topical ointment 0.1 %</i>	1	
<i>betamethasone, augmented topical cream 0.05 %</i>	1	
<i>betamethasone, augmented topical gel 0.05 %</i>	1	
<i>betamethasone, augmented topical lotion 0.05 %</i>	1	
<i>betamethasone, augmented topical ointment 0.05 %</i>	1	
<i>clobetasol scalp solution 0.05 %</i>	1	
<i>clobetasol topical cream 0.05 %</i>	1	
<i>clobetasol topical foam 0.05 %</i>	1	
<i>clobetasol topical gel 0.05 %</i>	1	
<i>clobetasol topical lotion 0.05 %</i>	1	
<i>clobetasol topical ointment 0.05 %</i>	1	
<i>clobetasol topical shampoo 0.05 %</i>	1	
<i>clobetasol topical spray,non-aerosol 0.05 %</i>	1	
<i>clobetasol-emollient topical cream 0.05 %</i>	1	
<i>clobetasol-emollient topical foam 0.05 %</i>	1	
<i>desonide topical cream 0.05 %</i>	2	
<i>desonide topical lotion 0.05 %</i>	2	
<i>desonide topical ointment 0.05 %</i>	2	
<i>desoximetasone topical cream 0.05 %</i>	2	
<i>desoximetasone topical cream 0.25 %</i>	1	
<i>desoximetasone topical gel 0.05 %</i>	2	
<i>desoximetasone topical ointment 0.05 %</i>	2	
<i>desoximetasone topical ointment 0.25 %</i>	1	
DUOBRII TOPICAL LOTION 0.01-0.045 %	3	ST
<i>fluocinolone and shower cap scalp oil 0.01 %</i>	1	
<i>fluocinolone topical cream 0.01 %, 0.025 %</i>	1	
<i>fluocinolone topical oil 0.01 %</i>	1	
<i>fluocinolone topical ointment 0.025 %</i>	1	
<i>fluocinolone topical solution 0.01 %</i>	1	
<i>fluocinonide topical cream 0.05 %, 0.1 %</i>	1	
<i>fluocinonide topical gel 0.05 %</i>	1	
<i>fluocinonide topical ointment 0.05 %</i>	1	
<i>fluocinonide topical solution 0.05 %</i>	1	
<i>fluocinonide-e topical cream 0.05 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
flurandrenolide topical cream 0.05 %	2	
flurandrenolide topical lotion 0.05 %	1	
flurandrenolide topical ointment 0.05 %	1	
fluticasone propionate topical cream 0.05 %	1	
fluticasone propionate topical lotion 0.05 %	1	
fluticasone propionate topical ointment 0.005 %	1	
halcinonide topical cream 0.1 %	2	ST
halobetasol propionate topical cream 0.05 %	1	
halobetasol propionate topical ointment 0.05 %	1	
hydrocortisone butyrate topical cream 0.1 %	2	
hydrocortisone butyrate topical lotion 0.1 %	1	
hydrocortisone butyrate topical ointment 0.1 %	1	
hydrocortisone butyrate topical solution 0.1 %	1	
hydrocortisone butyr-emollient topical cream 0.1 %	2	
hydrocortisone topical cream 2.5 %	1	
hydrocortisone topical lotion 2.5 %	1	
hydrocortisone topical ointment 2.5 %	1	
hydrocortisone valerate topical cream 0.2 %	1	
hydrocortisone valerate topical ointment 0.2 %	2	
mometasone topical cream 0.1 %	1	
mometasone topical ointment 0.1 %	1	
mometasone topical solution 0.1 %	1	
NUCORT TOPICAL LOTION 2 %	3	
prednicarbate topical cream 0.1 %	1	
prednicarbate topical ointment 0.1 %	1	
triamcinolone acetonide topical aerosol 0.147 mg/gram	2	
triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide topical lotion 0.025 %, 0.1 %	1	
triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %	1	
triderm topical cream 0.1 %, 0.5 %	1	
TOPICAL ENZYMES		

Drug Name	Drug Tier	Requirements / Limits
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	2	
TOPICAL SCABICIDES / PEDICULICIDES		
<i>crotan topical lotion 10 %</i>	3	ST
EURAX TOPICAL CREAM 10 %	3	ST
EURAX TOPICAL LOTION 10 %	3	ST
<i>lindane topical shampoo 1 %</i>	1	
<i>malathion topical lotion 0.5 %</i>	1	
<i>permethrin topical cream 5 %</i>	1	
SKLICE TOPICAL LOTION 0.5 %	3	
<i>spinosad topical suspension 0.9 %</i>	1	
ULESFIA TOPICAL LOTION 5 %	3	ST
DIAGNOSTICS & MISCELLANEOUS AGENTS		
ANTIDOTES		
ATROOPEN INTRAMUSCULAR PEN INJECTOR 0.5 MG/0.7 ML, 1 MG/0.7 ML	3	MSD
DUODOTE INTRAMUSCULAR PEN INJECTOR 600-2.1 MG/2ML-MG/0.7ML	3	MSD
IRRIGATING SOLUTIONS		
<i>lactated ringers irrigation solution</i>	3	
<i>neomycin-polymyxin b gu irrigation solution 40 mg-200,000 unit/ml</i>	1	
PHYSIOLYTE IRRIGATION SOLUTION 140-5-3-98 MEQ/L	3	
PHYSIOSOL IRRIGATION IRRIGATION SOLUTION 140-5-3-98 MEQ/L	3	
<i>ringer's irrigation solution</i>	1	
SORBITOL IRRIGATION SOLUTION 3 %	1	
SORBITOL-MANNITOL TRANSURETHRAL SOLUTION 2.7-0.54 GRAM/100 ML	1	
<i>tis-u-sol pentalyte irrigation irrigation solution 800-40-20-8.75- 6.25 mg/100 ml</i>	3	
MISCELLANEOUS AGENTS		
<i>acamprosate oral tablet,delayed release (dr/ec) 333 mg</i>	1	
<i>acetic acid irrigation solution 0.25 %</i>	1	
AGRYLIN ORAL CAPSULE 0.5 MG	3	

Drug Name	Drug Tier	Requirements / Limits
AMMONUL INTRAVENOUS SOLUTION 10-10 %	2	MSD
AMPHADASE INJECTION SOLUTION 150 UNIT/ML	3	MSD
<i>anagrelide oral capsule 0.5 mg, 1 mg</i>	1	Specialty
<i>aqua care sodium chloride irrigation solution 0.9 %</i>	1	
<i>aqua care sterile water irrigation solution</i>	1	
ARALAST NP INTRAVENOUS RECON SOLN 1,000 MG, 500 MG	2	Specialty
<i>caffeine citrate oral solution 60 mg/3 ml (20 mg/ml)</i>	1	
<i>carglumic acid oral tablet, dispersible 200 mg</i>	1	Specialty
CARNITOR ORAL SOLUTION 100 MG/ML	3	
CARNITOR ORAL TABLET 330 MG	3	
<i>cevimeline oral capsule 30 mg</i>	1	
CHEMET ORAL CAPSULE 100 MG	2	
<i>deferasirox oral granules in packet 180 mg, 360 mg, 90 mg</i>	1	PA; Specialty
<i>deferasirox oral tablet 180 mg, 360 mg, 90 mg</i>	1	PA; Specialty
<i>deferasirox oral tablet, dispersible 125 mg, 250 mg, 500 mg</i>	1	PA; Specialty
<i>deferiprone oral tablet 1,000 mg, 500 mg</i>	1	PA; Specialty
<i>disulfiram oral tablet 250 mg, 500 mg</i>	1	
<i>droxidopa oral capsule 100 mg, 200 mg, 300 mg</i>	1	PA; QL
ENDARI ORAL POWDER IN PACKET 5 GRAM	3	PA; Specialty
EVOXAC ORAL CAPSULE 30 MG	3	
EXJADE ORAL TABLET, DISPERSIBLE 125 MG, 250 MG, 500 MG	3	PA; Specialty
FERRIPROX (2 TIMES A DAY) ORAL TABLET 1,000 MG	2	PA; Specialty
FERRIPROX ORAL SOLUTION 100 MG/ML	2	PA; Specialty
FERRIPROX ORAL TABLET 1,000 MG	2	PA; Specialty
FERRIPROX ORAL TABLET 500 MG	3	PA; Specialty
GIVLAARI SUBCUTANEOUS SOLUTION 189 MG/ML	3	PA; MSD; Specialty; QL
HYLENEX INJECTION SOLUTION 150 UNIT/ML	3	MSD

Drug Name	Drug Tier	Requirements / Limits
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	2	PA; Specialty
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i>	1	
<i>levocarnitine oral solution 100 mg/ml</i>	1	
<i>levocarnitine oral tablet 330 mg</i>	1	
LITHOSTAT ORAL TABLET 250 MG	3	
<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>nitisinone oral capsule 10 mg, 2 mg, 5 mg</i>	2	PA; Specialty
NITYR ORAL TABLET 10 MG, 2 MG, 5 MG	2	PA; Specialty
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG	2	PA; Specialty
ORFADIN ORAL SUSPENSION 4 MG/ML	2	PA; Specialty
<i>pilocarpine hcl oral tablet 5 mg</i>	1	
PROLASTIN-C INTRAVENOUS RECON SOLN 1,000 MG	2	Specialty
PROLASTIN-C INTRAVENOUS SOLUTION 1,000 MG (+/-)/20 ML	2	MSD; Specialty
PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG	3	PA; Specialty; QL
PYRUKYND ORAL TABLETS,DOSE PACK 20 MG (7)- 5 MG (7), 50 MG (7)- 20 MG (7)	3	PA; Specialty; QL
RADIOGARDASE ORAL CAPSULE 0.5 GRAM	2	MSD
RAVICTI ORAL LIQUID 1.1 GRAM/ML	2	PA; Specialty; QL
REVCovi INTRAMUSCULAR SOLUTION 2.4 MG/1.5 ML (1.6 MG/ML)	2	PA; MSD; Specialty
RILUTEK ORAL TABLET 50 MG	3	
<i>riluzole oral tablet 50 mg</i>	1	
<i>risedronate oral tablet 30 mg</i>	1	ST; QL
<i>sodium benzoate-sod phenylacet intravenous solution 10-10 %</i>	1	MSD
<i>sodium chlor 0.9% bacteriostat injection solution 0.9 %</i>	1	MSD
<i>sodium chloride 0.9 % (flush) injection syringe</i>	1	MSD
<i>sodium chloride 0.9 % injection solution</i>	1	MSD
<i>sodium chloride 0.9 % intravenous parenteral solution</i>	1	MSD
<i>sodium chloride 0.9 % intravenous piggyback</i>	1	MSD
<i>sodium chloride injection syringe 0.9 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
sodium chloride irrigation solution 0.9 %	1	
sodium phenylbutyrate oral tablet 500 mg	2	PA; Specialty; QL
SOLIRIS INTRAVENOUS SOLUTION 300 MG/30 ML	2	PA; MSD; Specialty; QL
TAVNEOS ORAL CAPSULE 10 MG	3	PA; Specialty; QL
THIOLA EC ORAL TABLET,DELAYED RELEASE (DR/EC) 100 MG, 300 MG	3	Specialty
TIGLUTIK ORAL SUSPENSION 50 MG/10 ML	3	PA; Specialty; QL
tiopronin oral tablet 100 mg	1	Specialty
trientine oral capsule 250 mg	1	Specialty; QL
ULTOMIRIS INTRAVENOUS SOLUTION 100 MG/ML	2	PA; MSD; Specialty; QL
water for irrigation, sterile irrigation solution	1	
XURIDEN ORAL GRANULES IN PACKET 2 GRAM	2	PA; Specialty; QL
ZEMAIRA INTRAVENOUS RECON SOLN 1,000 MG	2	MSD; Specialty
ZOKINVY ORAL CAPSULE 50 MG, 75 MG	3	PA; Specialty
zoledronic acid-mannitol-water intravenous piggyback 5 mg/100 ml	1	MSD; Specialty

SMOKING DETERRENTS

bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg	1	ACA; QL
NICODERM CQ TRANSDERMAL PATCH 24 HOUR 14 MG/24 HR, 21 MG/24 HR, 7 MG/24 HR	3	ACA; QL
NICORETTE Buccal GUM 2 MG	3	ACA; QL
nicorette buccal gum 4 mg	3	ACA; QL
NICORETTE Buccal LOZENGE 2 MG, 4 MG	3	ACA; QL
NICORETTE Buccal MINI LOZENGE 2 MG, 4 MG	3	ACA; QL
nicotine (polacrilex) buccal gum 2 mg, 4 mg	1	ACA; QL
nicotine (polacrilex) buccal lozenge 2 mg, 4 mg	1	ACA; QL
nicotine (polacrilex) buccal mini lozenge 2 mg, 4 mg	1	ACA; QL
nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr	1	ACA; QL
nicotine transdermal patch, td daily, sequential 21-14-7 mg/24 hr	3	ACA; QL

Drug Name	Drug Tier	Requirements / Limits
NICOTROL INHALATION CARTRIDGE 10 MG	3	ACA; QL
NICOTROL NS NASAL SPRAY, NON-AEROSOL 10 MG/ML	3	ACA; QL
<i>quit 2 buccal gum 2 mg</i>	1	ACA; QL
<i>quit 2 buccal lozenge 2 mg</i>	1	ACA; QL
<i>quit 4 buccal gum 4 mg</i>	1	ACA; QL
<i>quit 4 buccal lozenge 4 mg</i>	1	ACA; QL
<i>stop smoking aid buccal lozenge 2 mg, 4 mg</i>	1	ACA; QL
<i>varenicline oral tablet 0.5 mg, 1 mg</i>	1	ACA; QL
<i>varenicline oral tablets, dose pack 0.5 mg (11)- 1 mg (42)</i>	1	ACA; QL

EAR, NOSE & THROAT MEDICATIONS

MISCELLANEOUS AGENTS

<i>azelastine nasal aerosol, spray 137 mcg (0.1 %)</i>	1	QL
<i>azelastine nasal spray, non-aerosol 205.5 mcg (0.15 %)</i>	1	QL
<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i>	1	QL
DEBACTEROL MUCOUS MEMBRANE SOLUTION 30-50 %	3	
DEBACTEROL MUCOUS MEMBRANE SWAB 30-50 %	3	
<i>ipratropium bromide nasal spray, non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)</i>	1	
<i>olopatadine nasal spray, non-aerosol 0.6 %</i>	2	QL
<i>oralone dental paste 0.1 %</i>	1	
<i>paroex oral rinse mucous membrane mouthwash 0.12 %</i>	1	QL
<i>periogard mucous membrane mouthwash 0.12 %</i>	1	
<i>pilocarpine hcl oral tablet 7.5 mg</i>	1	
<i>triamcinolone acetonide dental paste 0.1 %</i>	1	

MISCELLANEOUS OTIC PREPARATIONS

<i>acetic acid otic (ear) solution 2 %</i>	1	
<i>ciprofloxacin hcl otic (ear) dropperette 0.2 %</i>	1	
<i>fluocinolone acetonide oil otic (ear) drops 0.01 %</i>	1	
<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	1	
<i>ofloxacin otic (ear) drops 0.3 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
OTIPRIO INTRATYMPANIC SUSPENSION 6 % (6 MG/0.1 ML)	3	
OTIC STEROID / ANTIBIOTIC		
CIPRO HC OTIC (EAR) DROPS,SUSPENSION 0.2-1 %	3	
<i>ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %</i>	1	
CIPROFLOXACIN-FLUOCINOLONE OTIC (EAR) SOLUTION 0.3-0.025 % (0.25 ML)	1	
<i>neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%</i>	1	
<i>neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%</i>	1	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
<i>betamethasone acet,sod phos injection suspension 6 mg/ml</i>	1	MSD
BETAMETHASONE SOD PHOSPH-WATER INJECTION SOLUTION 6 MG/ML	1	MSD
<i>dexamethasone intensol oral drops 1 mg/ml</i>	2	
<i>dexamethasone oral elixir 0.5 mg/5 ml</i>	1	
<i>dexamethasone oral solution 0.5 mg/5 ml</i>	1	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	1	
<i>fludrocortisone oral tablet 0.1 mg</i>	1	
<i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>	1	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1	
<i>methylprednisolone oral tablets,dose pack 4 mg</i>	1	
<i>millipred dp oral tablets,dose pack 5 mg (21 tabs), 5 mg (48 tabs)</i>	2	
<i>millipred oral tablet 5 mg</i>	2	ST
ORAPRED ODT ORAL TABLET,DISINTEGRATING 10 MG, 15 MG, 30 MG	3	
<i>prednisolone oral solution 15 mg/5 ml</i>	1	
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 20 mg/5 ml (4 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>prednisolone sodium phosphate oral tablet,disintegrating 10 mg, 15 mg, 30 mg</i>	1	
<i>prednisone intensol oral concentrate 5 mg/ml</i>	2	
<i>prednisone oral solution 5 mg/5 ml</i>	1	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	1	
<i>prednisone oral tablets,dose pack 10 mg, 5 mg</i>	1	
PRO-C-DURE 5 INJECTION KIT 40 MG/ML	3	MSD
PRO-C-DURE 6 INJECTION KIT 40 MG/ML	3	MSD
<i>triamcinol ac (pf) in 0.9%nacl injection suspension 40 mg/ml</i>	1	MSD
<i>triamcinolone acetonide injection suspension 40 mg/ml</i>	1	MSD
ANTITHYROID AGENTS		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	
<i>propylthiouracil oral tablet 50 mg</i>	1	
SSKI ORAL SOLUTION 1 GRAM/ML	1	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
CONTOUR TEST STRIPS STRIP	3	PA; QL
ONETOUCH ULTRA TEST STRIP	2	QL
ONETOUCH VERIO TEST STRIPS STRIP	2	QL
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
ACE AEROSOL CLOUD ENHANCER SPACER	1	QL
AEROCHAMBER MINI SPACER	1	QL
AEROCHAMBER PLUS FLOW-VU SPACER	1	QL
AEROCHAMBER PLUS Z STAT SPACER	1	QL
AEROTRACH PLUS SPACER	1	QL
AEROVENT PLUS SPACER	1	QL
BD VERITOR SYSTEM SARS-COV-2 KIT	3	ACA; QL
BINAXNOW COVID-19 AG CARD KIT	3	ACA; QL
BREATHERITE MDI SPACER SPACER	1	QL
COMPACT SPACE CHAMBER SPACER	1	QL
COVID19 TEST ADM.BY PHARMACIST	3	ACA; QL
COVID-19 TEST SPECIMEN COLLECT	3	ACA; QL
CUE COVID-19 HOME TEST KIT	3	ACA; QL
EASIVENT HOLDING CHAMBER SPACER	1	QL

Drug Name	Drug Tier	Requirements / Limits
EVERLYWELL COVID19 HOM COLLECT	3	ACA; QL
FLEXICHAMBER SPACER	1	QL
ID NOW COVID-19 TEST KIT KIT	3	ACA; QL
INSPIRACHAMBER SPACER	1	QL
LITEAIRE MDI CHAMBER SPACER	1	QL
LUCIRA CHECK-IT COVID HOME TST KIT	3	ACA; QL
MICROCHAMBER SPACER	1	QL
MICROSPACER SPACER	1	QL
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	2	ST; QL
OPTICHAMBER DIAMOND VHC SPACER	1	QL
PIXEL COVID19 HOME COLLECT KIT	3	ACA; QL
POCKET CHAMBER SPACER	1	QL
PRIMEAIRE SPACER	1	QL
PROCHAMBER SPACER	1	QL
QUICKVUE SARS ANTIGEN KIT	3	ACA; QL
RITEFLO AEROCHAMBER SPACER	1	QL
SOFIA SARS ANTIGEN FIA KIT	3	ACA; QL
SOFIA2 FLU-SARS ANTIGEN FIA KIT	3	ACA; QL
SPACE CHAMBER SPACER	1	QL
VERITOR SARS-COV-2 AND FLU A-B KIT	3	ACA; QL
VORTEX HOLDING CHAMBER SPACER	1	QL
GLUCOSE ELEVATING AGENTS		
BAQSIMI NASAL SPRAY, NON-AEROSOL 3 MG/ACTUATION	2	
<i>diazoxide oral suspension 50 mg/ml</i>	1	
GLUCAGEN HYPOKIT INJECTION RECON SOLN 1 MG	2	
GLUCAGON (HCL) EMERGENCY KIT INJECTION RECON SOLN 1 MG	1	
<i>glucagon emergency kit (human) injection recon soln 1 mg</i>	1	
GVOKE HYPOOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	2	

Drug Name	Drug Tier	Requirements / Limits
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 0.5 MG/0.1 ML, 1 MG/0.2 ML	2	
GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML	2	
PROGLYCEM ORAL SUSPENSION 50 MG/ML	3	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQUIPMENT		
ACCU-CHEK COMBO SYSTEM KIT	3	
AUTOSOFT 30 INFUSION SET	3	
AUTOSOFT 90 INFUSION SET	3	
AUTOSOFT XC INFUSION SET 23" INFUSION SET	3	
BD ULTRA-FINE NANO PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	2	
CEQUR SIMPLICITY DEVICE 2 UNIT	3	
DEXCOM G6 RECEIVER	2	PA
DEXCOM G6 SENSOR DEVICE	2	PA
DEXCOM G6 TRANSMITTER DEVICE	2	PA
EVERSENSE SENSOR-HOLDER SUBCUTANEOUS DEVICE	3	
FREESTYLE LIBRE 14 DAY READER	2	PA; \$0 Copay
FREESTYLE LIBRE 14 DAY SENSOR KIT	2	PA; \$0 Copay
FREESTYLE LIBRE 2 READER	2	PA; \$0 Copay
FREESTYLE LIBRE 2 SENSOR KIT	2	PA; \$0 Copay
FREESTYLE LIBRE 3 SENSOR DEVICE	2	PA
GOJJI KETONE CONTROL SOLN-L1 SOLUTION	3	
INPEN (FOR HUMALOG) PINK SUBCUTANEOUS INSULIN PEN	3	
INPEN (NOVOLOG OR FIASP) PINK SUBCUTANEOUS INSULIN PEN	3	
LANCING DEVICE	3	
MINIMED 770G INSULIN PUMP	3	PA
MINIMED MIO ADVANCE INF SET23" INFUSION SET	3	PA
MINIMED QUICK SET 43" INFUSION SET	3	PA
MINIMED SILHOUETTE 23" INFUSION SET	3	PA
MINIMED SURE T 32" INFUSION SET	3	PA

Drug Name	Drug Tier	Requirements / Limits
NOVOPEN ECHO SUBCUTANEOUS INSULIN PEN	3	
OMNIPOD 5 G6 INTRO KIT (GEN 5) SUBCUTANEOUS CARTRIDGE	3	
OMNIPOD 5 G6 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	3	
OMNIPOD CLASSIC PDM KIT(GEN 3)	3	
OMNIPOD CLASSIC PODS (GEN 3) SUBCUTANEOUS CARTRIDGE	3	
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE	3	
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	3	
ONETOUCH SOLUTIONS STARTER KIT	2	
ONETOUCH ULTRA CONTROL SOLUTION	2	
ONETOUCH ULTRA2 METER	2	
ONETOUCH ULTRAMINI KIT	2	
ONETOUCH VERIO FLEX METER	2	
ONETOUCH VERIO IQ METER	2	
ONETOUCH VERIO METER	2	
SAFE-CLIP NEEDLE STORAGE DEV DEVICE	3	
T:FLEX SUBCUTANEOUS CARTRIDGE	3	PA
T:SLIM X2 BASAL-IQ INSULIN PMP	3	PA
T:SLIM X2 CONTROL-IQ	3	PA
T:SLIM X2 SUBCUTANEOUS CARTRIDGE	3	PA
TRUSTEEL INFUSION SET 23" INFUSION SET	3	
VARISOFT INFUSION SET 23" INFUSION SET	3	
V-GO 20 DEVICE	3	PA
V-GO 30 DEVICE	3	PA
V-GO 40 DEVICE	3	PA
INSULIN THERAPY		
AFREZZA INHALATION CARTRIDGE WITH INHALER 12 UNIT, 8 UNIT, 8 UNIT (90)/ 12 UNIT (90)	3	PA
AFREZZA INHALATION CARTRIDGE WITH INHALER 4 UNIT, 4 UNIT (90)/ 8 UNIT (90), 4 UNIT/8 UNIT/ 12 UNIT (60)	3	PA; QL

Drug Name	Drug Tier	Requirements / Limits
APIDRA SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	ST
APIDRA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	ST
BASAGLAR KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	QL
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	2	QL
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML, 200 UNIT/ML (3 ML)	2	QL
HUMALOG MIX 50-50 INSULN U-100 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (50-50)	2	QL
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	2	QL
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	2	QL
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	2	QL
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	2	QL
HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	QL
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	2	QL
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	QL
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	2	QL
HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION 100 UNIT/ML	2	QL

Drug Name	Drug Tier	Requirements / Limits
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	2	QL
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	2	QL
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	QL
LEVEMIR FLEXTOUCH U-100 INSULN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL
LEVEMIR U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	QL
MYXREDLIN INTRAVENOUS SOLUTION 100 UNIT/100 ML (1 UNIT/ML)	3	MSD
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN 100 UNIT-33 MCG/ML	2	ST; QL
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	2	QL
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	2	QL
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL
TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	2	QL
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	QL
XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN 100 UNIT-3.6 MG /ML (3 ML)	2	ST; QL
MISCELLANEOUS HORMONES		
ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5 ML	2	MSD; Specialty
ANDRODERM TRANSDERMAL PATCH 24 HOUR 2 MG/24 HOUR, 4 MG/24 HR	2	PA; QL
BRINEURA INTRAVENTRICULAR KIT 300 MG/10 ML (150MG/5ML X2)	3	MSD; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
<i>cabergoline oral tablet 0.5 mg</i>	1	
<i>calcitonin (salmon) injection solution 200 unit/ml</i>	1	MSD
<i>calcitonin (salmon) nasal spray,non-aerosol 200 unit/actuation</i>	1	
<i>calcitriol intravenous solution 1 mcg/ml</i>	1	MSD
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	1	
<i>calcitriol oral solution 1 mcg/ml</i>	1	
CERDELGA ORAL CAPSULE 84 MG	2	PA; Specialty; QL
CEREZYME INTRAVENOUS RECON SOLN 400 UNIT	2	PA; MSD; Specialty
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	2	Specialty
<i>cinacalcet oral tablet 30 mg, 60 mg, 90 mg</i>	1	PA; Specialty
<i>clomid oral tablet 50 mg</i>	1	
<i>clomiphene citrate oral tablet 50 mg</i>	1	
CRYSVITA SUBCUTANEOUS SOLUTION 10 MG/ML, 20 MG/ML, 30 MG/ML	3	PA; Specialty; QL
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	1	
<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)	1	
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	1	
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	1	
ELAPRASE INTRAVENOUS SOLUTION 6 MG/3 ML	2	MSD; Specialty
FABRAZYME INTRAVENOUS RECON SOLN 35 MG, 5 MG	2	MSD; Specialty
GALAFOLD ORAL CAPSULE 123 MG	3	PA; Specialty; QL
GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR 300/0.5 UNIT/ML, 450/0.75 UNIT/ML, 900/1.5 UNIT/ML	2	Specialty
GONAL-F RFF SUBCUTANEOUS RECON SOLN 75 UNIT	2	Specialty
GONAL-F SUBCUTANEOUS RECON SOLN 1,050 UNIT, 450 UNIT	2	Specialty
ISTURISA ORAL TABLET 1 MG, 10 MG, 5 MG	3	PA; Specialty; QL
JATENZO ORAL CAPSULE 158 MG, 198 MG, 237 MG	3	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>javygtor oral powder in packet 100 mg</i>	1	PA; Specialty
<i>javygtor oral tablet,soluble 100 mg</i>	1	PA
JYNARQUE ORAL TABLET 15 MG, 30 MG	3	PA; Specialty; QL
JYNARQUE ORAL TABLETS, SEQUENTIAL 15 MG (AM)/ 15 MG (PM), 30 MG (AM)/ 15 MG (PM)	3	PA; Specialty
JYNARQUE ORAL TABLETS, SEQUENTIAL 45 MG (AM)/ 15 MG (PM), 60 MG (AM)/ 30 MG (PM), 90 MG (AM)/ 30 MG (PM)	3	PA; Specialty; QL
KANUMA INTRAVENOUS SOLUTION 2 MG/ML	2	PA; MSD; Specialty
KUVAN ORAL POWDER IN PACKET 100 MG, 500 MG	3	PA; Specialty
KUVAN ORAL TABLET,SOLUBLE 100 MG	3	PA; Specialty
LUMIZYME INTRAVENOUS RECON SOLN 50 MG	2	PA; MSD; Specialty
MENOPUR SUBCUTANEOUS RECON SOLN 75 UNIT	2	Specialty
MEPSEVII INTRAVENOUS SOLUTION 2 MG/ML	3	MSD; Specialty
<i>methyltestosterone oral capsule 10 mg</i>	1	ST
MIACALCIN INJECTION SOLUTION 200 UNIT/ML	2	MSD
<i>miglustat oral capsule 100 mg</i>	2	PA; Specialty; QL
MYALEPT SUBCUTANEOUS RECON SOLN 5 MG/ML (FINAL CONC.)	2	Specialty; QL
NAGLAZYME INTRAVENOUS SOLUTION 5 MG/5 ML	2	MSD; Specialty
NATPARA SUBCUTANEOUS CARTRIDGE 100 MCG/DOSE, 25 MCG/DOSE, 50 MCG/DOSE, 75 MCG/DOSE	2	PA; Specialty; QL
NOCDURNA (MEN) SUBLINGUAL TABLET,DISINTEGRATING 55.3 MCG	2	ST; QL
NOCDURNA (WOMEN) SUBLINGUAL TABLET,DISINTEGRATING 27.7 MCG	2	ST; QL
NOVAREL INTRAMUSCULAR RECON SOLN 10,000 UNIT, 5,000 UNIT	2	MSD
ORILISSA ORAL TABLET 150 MG, 200 MG	2	PA; QL
OVIDREL SUBCUTANEOUS SYRINGE 250 MCG/0.5 ML	2	
<i>oxandrolone oral tablet 10 mg, 2.5 mg</i>	1	PA

Drug Name	Drug Tier	Requirements / Limits
PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 2.5 MG/0.5 ML, 20 MG/ML	3	PA; Specialty; QL
<i>pamidronate intravenous solution 30 mg/10 ml (3 mg/ml), 60 mg/10 ml (6 mg/ml), 90 mg/10 ml (9 mg/ml)</i>	1	MSD
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	1	
PARSABIV INTRAVENOUS SOLUTION 5 MG/ML	3	PA; MSD; Specialty; QL
<i>sapropterin oral powder in packet 100 mg, 500 mg</i>	1	PA; Specialty
<i>sapropterin oral tablet, soluble 100 mg</i>	2	PA; Specialty
SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	2	Specialty
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45 ML, 28 MG/0.7 ML, 40 MG/ML, 80 MG/0.8 ML	2	PA; Specialty
SYNAREL NASAL SPRAY, NON-AEROSOL 2 MG/ML	2	PA; Specialty; QL
TEPEZZA INTRAVENOUS RECON SOLN 500 MG	2	PA; MSD; Specialty; QL
TESTONE CIK INTRAMUSCULAR KIT 200 MG/ML	3	PA; MSD
TESTOPEL IMPLANT PELLET 75 MG	3	PA; MSD
<i>testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml</i>	1	PA; MSD; QL
<i>testosterone enanthate intramuscular oil 200 mg/ml</i>	1	PA; MSD
TESTOSTERONE IMPLANT PELLET 100 MG, 50 MG	1	PA; MSD
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)</i>	2	PA
<i>testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)</i>	1	PA; QL
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram)</i>	2	PA; QL
<i>testosterone transdermal gel in packet 1 % (50 mg/5 gram)</i>	2	PA
<i>testosterone transdermal gel in packet 1.62 % (20.25 mg/1.25 gram), 1.62 % (40.5 mg/2.5 gram)</i>	1	PA; QL
<i>testosterone transdermal solution in metered pump w/app 30 mg/actuation (1.5 ml)</i>	2	PA
TLANDO ORAL CAPSULE 112.5 MG	3	PA

Drug Name	Drug Tier	Requirements / Limits
tolvaptan oral tablet 15 mg, 30 mg	1	PA; Specialty; QL
VIMIZIM INTRAVENOUS SOLUTION 5 MG/5 ML (1 MG/ML)	2	PA; MSD; Specialty
VOXZOGO SUBCUTANEOUS RECON SOLN 0.4 MG, 0.56 MG, 1.2 MG	3	PA; Specialty; QL
VPRIV INTRAVENOUS RECON SOLN 400 UNIT	3	PA; MSD; Specialty
ZAVESCA ORAL CAPSULE 100 MG	3	PA; Specialty; QL
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	3	
zoledronic acid intravenous recon soln 4 mg	2	MSD; Specialty
zoledronic acid intravenous solution 4 mg/5 ml	2	MSD; Specialty
zoledronic acid-mannitol-water intravenous piggyback 4 mg/100 ml	2	PA; MSD; Specialty
ZOLEDRONIC AC-MANNITOL-0.9NACL INTRAVENOUS PIGGYBACK 4 MG/100 ML	2	Specialty

NON-INSULIN HYPOGLYCEMIC AGENTS

acarbose oral tablet 100 mg, 25 mg, 50 mg	1	
FARXIGA ORAL TABLET 10 MG, 5 MG	2	ST; QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glipizide oral tablet 10 mg, 5 mg	1	
glipizide oral tablet extended release 24hr 10 mg, 2.5 mg, 5 mg	1	
glipizide-metformin oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg	1	
glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg	1	
glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg	1	
glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg	1	
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	2	ST; QL
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	2	ST; QL
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	2	ST; QL
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	2	ST; QL
JARDIANCE ORAL TABLET 10 MG, 25 MG	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	
<i>metformin oral tablet extended release 24 hr 500 mg, 750 mg</i>	1	
<i>miglitol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>nateglinide oral tablet 120 mg, 60 mg</i>	1	
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG(2 MG/1.5 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	2	ST; QL
<i>pioglitazone oral tablet 15 mg, 30 mg, 45 mg</i>	1	
<i>pioglitazone-glimepiride oral tablet 30-2 mg, 30-4 mg</i>	1	ST
<i>pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg</i>	1	ST
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>repaglinide-metformin oral tablet 1-500 mg, 2-500 mg</i>	1	
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	2	ST; QL
SEGLUROMET ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 7.5-1,000 MG, 7.5-500 MG	2	ST; QL
STEGLATRO ORAL TABLET 15 MG, 5 MG	2	ST; QL
STEGLUJAN ORAL TABLET 15-100 MG, 5-100 MG	2	ST; QL
SYMLINPEN 120 SUBCUTANEOUS PEN INJECTOR 2,700 MCG/2.7 ML	2	
SYMLINPEN 60 SUBCUTANEOUS PEN INJECTOR 1,500 MCG/1.5 ML	2	
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	2	ST; QL
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 12.5-1,000 MG, 25-1,000 MG, 5-1,000 MG	2	ST; QL
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 12.5-2.5-1,000 MG, 25-5-1,000 MG, 5-2.5-1,000 MG	3	ST; QL
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	2	ST; QL
VICTOZA 2-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
VICTOZA 3-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	2	ST; QL
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG, 2.5- 1,000 MG, 5-1,000 MG, 5-500 MG	2	ST; QL
THYROID HORMONES		
ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG	2	
<i>euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	2	
<i>levo-t oral tablet 300 mcg</i>	3	
<i>levothyroxine intravenous recon soln 100 mcg, 200 mcg, 500 mcg</i>	1	MSD
LEVOTHYROXINE INTRAVENOUS SOLUTION 100 MCG/ML, 20 MCG/ML, 40 MCG/ML	1	MSD
<i>levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	2	
<i>liothyronine intravenous solution 10 mcg/ml</i>	1	MSD
<i>liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg</i>	1	
<i>np thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	2	
SYNTHROID ORAL TABLET 300 MCG	3	
<i>unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	2	
<i>unithroid oral tablet 300 mcg</i>	3	

GASTROENTEROLOGY

Drug Name	Drug Tier	Requirements / Limits
ANTIDIARRHEALS & ANTISPASMODICS		
ATROPINE IN 0.9 % SOD CHLORIDE INTRAVENOUS SYRINGE 0.25 MG/5 ML (0.05 MG/ML), 1 MG/2.5 ML (0.4 MG/ML), 1.2 MG/3 ML (0.4 MG/ML)	1	MSD
<i>atropine injection solution 0.4 mg/ml, 1 mg/ml</i>	1	MSD
<i>atropine injection syringe 0.05 mg/ml, 0.1 mg/ml</i>	1	MSD
ATROPINE INTRAVENOUS SOLUTION 0.4 MG/ML, 1 MG/ML	1	
<i>atropine intravenous syringe 0.8 mg/2 ml (0.4 mg/ml)</i>	1	MSD
<i>belladonna alkaloids-opium rectal suppository 16.2-30 mg, 16.2-60 mg</i>	1	ST
<i>chlordiazepoxide-clidinium oral capsule 5-2.5 mg</i>	1	
<i>dicyclomine intramuscular solution 10 mg/ml</i>	1	MSD
<i>dicyclomine oral capsule 10 mg</i>	1	
<i>dicyclomine oral solution 10 mg/5 ml</i>	1	
<i>dicyclomine oral tablet 20 mg</i>	1	
<i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml</i>	1	ST
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	1	ST
<i>ed-spaz oral tablet,disintegrating 0.125 mg</i>	1	
GLYCOPYRROLATE (PF) IN WATER INJECTION SYRINGE 0.2 MG/ML	1	MSD
<i>glycopyrrolate (pf) in water intravenous syringe 0.4 mg/2 ml (0.2 mg/ml)</i>	1	
GLYCOPYRROLATE (PF) IN WATER INTRAVENOUS SYRINGE 0.6 MG/3 ML (0.2 MG/ML)	1	MSD
<i>glycopyrrolate (pf) in water intravenous syringe 1 mg/5 ml (0.2 mg/ml)</i>	1	MSD
<i>glycopyrrolate (pf) injection syringe 0.6 mg/3 ml (0.2 mg/ml)</i>	1	MSD
GLYCOPYRROLATE INTRAVENOUS SYRINGE 0.6 MG/3 ML (0.2 MG/ML), 1 MG/5 ML (0.2 MG/ML)	1	MSD
<i>glycopyrrolate oral solution 1 mg/5 ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	1	
GLYRX-PF INJECTION SOLUTION 0.2 MG/ML	3	MSD

Drug Name	Drug Tier	Requirements / Limits
GLYRX-PF INJECTION SYRINGE 0.6 MG/3 ML (0.2 MG/ML), 1 MG/5 ML (0.2 MG/ML)	3	MSD
HYOSCYAMINE SULFATE INJECTION SOLUTION 0.5 MG/ML	1	MSD
<i>hyoscyamine sulfate oral drops 0.125 mg/ml</i>	1	
<i>hyoscyamine sulfate oral elixir 0.125 mg/5 ml</i>	1	
<i>hyoscyamine sulfate oral tablet 0.125 mg</i>	1	
<i>hyoscyamine sulfate oral tablet extended release 12 hr 0.375 mg</i>	1	
<i>hyoscyamine sulfate oral tablet,disintegrating 0.125 mg</i>	1	
<i>hyoscyamine sulfate sublingual tablet 0.125 mg</i>	1	
<i>hyosyne oral drops 0.125 mg/ml</i>	1	
<i>hyosyne oral elixir 0.125 mg/5 ml</i>	1	
<i>methscopolamine oral tablet 2.5 mg, 5 mg</i>	1	
<i>opium tincture oral tincture 10 mg/ml (morphine)</i>	1	ST
<i>oscimin oral tablet 0.125 mg</i>	1	
<i>oscimin sl sublingual tablet 0.125 mg</i>	1	
<i>phenobarb-hyoscy-atropine-scop oral elixir 16.2-0.1037 -0.0194 mg/5 ml</i>	1	
SYMAX DUOTAB ORAL TABLET,EXT RELEASE MULTIPHASE 0.125 MG-0.25 MG (0.375 MG)	3	
MISCELLANEOUS GASTROINTESTINAL AGENTS		
AKYNZEO (FOSNETUPITANT) INTRAVENOUS RECON SOLN 235-0.25 MG	3	MSD
AKYNZEO (FOSNETUPITANT) INTRAVENOUS SOLUTION 235 MG-0.25 MG /20 ML	3	MSD
<i>alosetron oral tablet 0.5 mg, 1 mg</i>	1	
<i>alvimopan oral capsule 12 mg</i>	1	
AMITIZA ORAL CAPSULE 24 MCG, 8 MCG	2	QL
ANA-LEX KIT RECTAL KIT 2-2 %	1	
<i>anucort-hc rectal suppository 25 mg</i>	1	
ANZEMET ORAL TABLET 50 MG	3	ST; QL
<i>aprepitant oral capsule 125 mg, 40 mg, 80 mg</i>	1	QL
<i>aprepitant oral capsule,dose pack 125 mg (1)- 80 mg (2)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
AURYXIA ORAL TABLET 210 MG IRON	3	QL
AZULFIDINE EN-TABS ORAL TABLET,DELAYED RELEASE (DR/EC) 500 MG	2	
AZULFIDINE ORAL TABLET 500 MG	3	
<i>balsalazide oral capsule 750 mg</i>	1	
BARHEMSYS INTRAVENOUS SOLUTION 10 MG/4 ML (2.5 MG/ML), 5 MG/2 ML (2.5 MG/ML)	3	MSD
<i>betaine oral powder 1 gram/scoop</i>	1	Specialty
<i>budesonide oral capsule,delayed,extend.release 3 mg</i>	1	
<i>budesonide oral tablet,delayed and ext.release 9 mg</i>	1	
BYLVAY ORAL CAPSULE 1,200 MCG, 400 MCG	3	PA; Specialty; QL
BYLVAY ORAL PELLET 200 MCG, 600 MCG	3	PA; Specialty; QL
<i>calcium acetate(phosphat bind) oral capsule 667 mg</i>	1	
<i>calcium acetate(phosphat bind) oral tablet 667 mg</i>	1	
CANASA RECTAL SUPPOSITORY 1,000 MG	3	
CHENODAL ORAL TABLET 250 MG	2	PA; Specialty; QL
CHOLBAM ORAL CAPSULE 250 MG, 50 MG	2	PA; Specialty
CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS)	3	PA; Specialty; QL
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	3	PA; Specialty; QL
CINVANTI INTRAVENOUS EMULSION 7.2 MG/ML	3	MSD
CLENPIQ ORAL SOLUTION 10 MG-3.5 GRAM -12 GRAM/160 ML	2	ACA
<i>compro rectal suppository 25 mg</i>	1	
<i>constulose oral solution 10 gram/15 ml</i>	1	
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT	2	
<i>cromolyn oral concentrate 100 mg/5 ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DELZICOL ORAL CAPSULE (WITH DEL REL TABLETS) 400 MG	3	
<i>dimenhydrinate injection solution 50 mg/ml</i>	1	MSD
DIPENTUM ORAL CAPSULE 250 MG	3	ST
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	1	ST; QL
<i>droperidol injection solution 2.5 mg/ml</i>	1	MSD
ENTEREG ORAL CAPSULE 12 MG	3	
ENTYVIO INTRAVENOUS RECON SOLN 300 MG	2	PA; MSD; Specialty; QL
<i>enulose oral solution 10 gram/15 ml</i>	1	
<i>fosaprepitant intravenous recon soln 150 mg</i>	1	MSD
GATTEX 30-VIAL SUBCUTANEOUS KIT 5 MG	3	PA; Specialty; QL
<i>gavilyte-c oral recon soln 240-22.72-6.72 -5.84 gram</i>	1	ACA
<i>gavilyte-g oral recon soln 236-22.74-6.74 -5.86 gram</i>	1	ACA
<i>generlac oral solution 10 gram/15 ml</i>	1	
GOLYTELY ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM	3	
<i>granisetron (pf) intravenous solution 1 mg/ml (1 ml)</i>	1	
<i>granisetron (pf) intravenous solution 100 mcg/ml</i>	1	MSD
<i>granisetron hcl intravenous solution 1 mg/ml, 1 mg/ml (1 ml)</i>	1	MSD
<i>granisetron hcl oral tablet 1 mg</i>	1	ST; QL
<i>hydrocortisone acetate rectal suppository 25 mg, 30 mg</i>	1	
<i>hydrocortisone rectal enema 100 mg/60 ml</i>	1	
<i>hydrocortisone topical cream with perineal applicator 1 %, 2.5 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream 1-1 %, 2.5-1 %, 2.5-1 % (4g)</i>	1	
<i>lactulose oral packet 10 gram</i>	2	
<i>lactulose oral solution 10 gram/15 ml</i>	1	
<i>lanthanum oral tablet, chewable 1,000 mg, 500 mg, 750 mg</i>	1	
<i>lidocaine hcl-hydrocortison ac rectal cream 3-0.5 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL 3 %-2.5 % (7 GRAM)	1	
<i>lidocaine hcl-hydrocortison ac rectal kit 2 %-2 % (7 gram), 3-0.5 %, 3-1 % (7 gram)</i>	1	
<i>lidocaine-hydrocortisone-aloe rectal gel 2.8-0.55 %</i>	1	
<i>lidocaine-hydrocortisone-aloe rectal kit 3-2.5 % (7 gram)</i>	1	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	2	
LIVMARLI ORAL SOLUTION 9.5 MG/ML	3	PA; Specialty; QL
LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	2	PA; QL
LUBIPROSTONE ORAL CAPSULE 24 MCG, 8 MCG	1	QL
<i>mesalamine oral capsule (with del rel tablets) 400 mg</i>	1	
<i>mesalamine oral capsule, extended release 500 mg</i>	1	
<i>mesalamine oral capsule,extended release 24hr 0.375 gram</i>	1	
<i>mesalamine oral tablet,delayed release (dr/ec) 1.2 gram</i>	1	
<i>mesalamine rectal enema 4 gram/60 ml</i>	1	
<i>mesalamine rectal suppository 1,000 mg</i>	1	
<i>mesalamine with cleansing wipe rectal enema kit 4 gram/60 ml</i>	2	
<i>metoclopramide hcl injection solution 5 mg/ml</i>	1	MSD
<i>metoclopramide hcl injection syringe 5 mg/ml</i>	1	MSD
<i>metoclopramide hcl oral solution 5 mg/5 ml</i>	1	
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	1	
MOTEGRITY ORAL TABLET 1 MG, 2 MG	2	
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	2	QL
OCALIVA ORAL TABLET 10 MG, 5 MG	2	PA; Specialty; QL
<i>ondansetron hcl (pf) injection solution 4 mg/2 ml</i>	1	MSD
<i>ondansetron hcl (pf) injection syringe 4 mg/2 ml</i>	1	MSD
<i>ondansetron hcl intravenous solution 2 mg/ml</i>	1	MSD
<i>ondansetron hcl oral solution 4 mg/5 ml</i>	1	QL
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	
<i>ondansetron oral tablet,disintegrating 4 mg, 8 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PALONOSETRON INTRAVENOUS SOLUTION 0.25 MG/2 ML	3	MSD
<i>palonosetron intravenous solution 0.25 mg/5 ml</i>	1	MSD
<i>palonosetron intravenous syringe 0.25 mg/5 ml</i>	1	MSD
PANCREAZE ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,500-35,500- 61,500 UNIT, 16,800-56,800- 98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700- 83,900 UNIT, 37,000- 97,300- 149,900 UNIT, 4,200-14,200- 24,600 UNIT	3	ST
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram</i>	1	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet 100-7.5-2.691 gram</i>	1	ACA
<i>peg-electrolyte soln oral recon soln 420 gram</i>	1	ACA
<i>peg-prep oral kit 5-210 mg-gram</i>	1	ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	2	
PERTZYE ORAL CAPSULE,DELAYED RELEASE(DR/EC) 16,000-57,500- 60,500 UNIT, 24,000-86,250- 90,750 UNIT, 4,000-14,375- 15,125 UNIT, 8,000-28,750- 30,250 UNIT	3	ST
PHOSLYRA ORAL SOLUTION 667 MG (169 MG CALCIUM)/5 ML	2	
PLENUV ORAL POWDER IN PACKET, SEQUENTIAL 140-9-5.2 GRAM	3	ACA
<i>prochlorperazine edisylate injection solution 10 mg/2 ml (5 mg/ml), 5 mg/ml</i>	1	MSD
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	1	
<i>prochlorperazine rectal suppository 25 mg</i>	1	
<i>procto-med hc topical cream with perineal applicator 2.5 %</i>	1	
<i>procto-pak topical cream with perineal applicator 1 %</i>	1	
<i>proctosol hc topical cream with perineal applicator 2.5 %</i>	1	
<i>proctozone-hc topical cream with perineal applicator 2.5 %</i>	1	
RECTIV RECTAL OINTMENT 0.4 % (W/W)	2	
RELISTOR ORAL TABLET 150 MG	2	PA; QL

Drug Name	Drug Tier	Requirements / Limits
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6 ML	2	PA; QL
RELISTOR SUBCUTANEOUS SYRINGE 12 MG/0.6 ML, 8 MG/0.4 ML	2	PA; QL
RENFLEXIS INTRAVENOUS RECON SOLN 100 MG	2	PA; MSD
SANCUSO TRANSDERMAL PATCH WEEKLY 3.1 MG/24 HOUR	3	ST; QL
<i>scopolamine base transdermal patch 3 day 1 mg over 3 days</i>	1	
<i>sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram</i>	1	
<i>sevelamer carbonate oral tablet 800 mg</i>	1	
SKYRIZI INTRAVENOUS SOLUTION 60 MG/ML	2	PA; MSD; Specialty; QL
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 360 MG/2.4 ML (150 MG/ML)	2	PA; Specialty; QL
<i>sodium polystyrene sulfonate oral powder</i>	1	
<i>sodium,potassium,mag sulfates oral recon soln 17.5-3.13-1.6 gram</i>	1	ACA
<i>sps (with sorbitol) oral suspension 15-20 gram/60 ml</i>	1	
<i>sps (with sorbitol) rectal enema 30-40 gram/120 ml</i>	2	
SUCRAID ORAL SOLUTION 8,500 UNIT/ML	2	Specialty; QL
<i>sulfasalazine oral tablet 500 mg</i>	1	
<i>sulfasalazine oral tablet,delayed release (dr/ec) 500 mg</i>	1	
SUPREP BOWEL PREP KIT ORAL RECON SOLN 17.5-3.13-1.6 GRAM	2	
SYMPROIC ORAL TABLET 0.2 MG	2	QL
SYNDROS ORAL SOLUTION 5 MG/ML	3	ST; QL
<i>trimethobenzamide oral capsule 300 mg</i>	1	
TRULANCE ORAL TABLET 3 MG	2	QL
UCERIS RECTAL FOAM 2 MG/ACTUATION	2	
<i>ursodiol oral capsule 200 mg, 300 mg, 400 mg</i>	1	
<i>ursodiol oral tablet 250 mg, 500 mg</i>	1	
VARUBI ORAL TABLET 90 MG	2	QL

Drug Name	Drug Tier	Requirements / Limits
VELPHORO ORAL TABLET,CHEWABLE 500 MG	2	
VIBERZI ORAL TABLET 100 MG, 75 MG	3	PA; QL
VIOKACE ORAL TABLET 10,440-39,150-39,150 UNIT, 20,880-78,300- 78,300 UNIT	2	
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000- 24,000 UNIT	2	
ULCER THERAPY		
<i>amoxicil-clarithromy-lansopraz oral combo pack 500-500-30 mg</i>	1	QL
CARAFATE ORAL TABLET 1 GRAM	3	
<i>cimetidine hcl oral solution 300 mg/5 ml</i>	1	
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	1	
CYTOTEC ORAL TABLET 100 MCG, 200 MCG	3	
DEXLANSOPRAZOLE ORAL CAPSULE,BIPHASE DELAYED RELEAS 30 MG, 60 MG	3	QL
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg, 40 mg</i>	1	QL
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg, 40 mg</i>	1	QL
<i>esomeprazole sodium intravenous recon soln 20 mg</i>	1	MSD
<i>famotidine (pf) intravenous solution 20 mg/2 ml</i>	1	MSD
<i>famotidine intravenous solution 10 mg/ml</i>	1	MSD
<i>famotidine oral suspension 40 mg/5 ml (8 mg/ml)</i>	1	
<i>famotidine oral tablet 40 mg</i>	1	
<i>lansoprazole oral capsule,delayed release(dr/ec) 30 mg</i>	1	
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	1	
<i>nizatidine oral capsule 150 mg, 300 mg</i>	1	
<i>omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg, 40 mg</i>	1	
<i>pantoprazole intravenous recon soln 40 mg</i>	1	MSD
<i>pantoprazole oral granules dr for susp in packet 40 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
pantoprazole oral tablet,delayed release (dr/ec) 20 mg	1	
pantoprazole oral tablet,delayed release (dr/ec) 40 mg	2	
rabeprazole oral tablet,delayed release (dr/ec) 20 mg	1	QL
sucralfate oral suspension 100 mg/ml	1	
sucralfate oral tablet 1 gram	1	
VOQUEZNA DUAL PAK ORAL COMBO PACK 20 MG (28)- 500 MG (84)	3	PA
VOQUEZNA TRIPLE PAK ORAL COMBO PACK 20-500-500 MG	3	PA

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

BIOTECHNOLOGY DRUGS

FULPHILA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	2	PA; Specialty
LEUKINE INJECTION RECON SOLN 250 MCG	2	PA; Specialty
NEULASTA ONPRO SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	3	PA; Specialty
NEULASTA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	3	PA; Specialty
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	2	PA; Specialty
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	2	PA; Specialty
PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	2	PA; Specialty; QL
REBLOZYL SUBCUTANEOUS RECON SOLN 25 MG, 75 MG	3	PA; Specialty
RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	2	PA; Specialty; QL
RETACRIT INJECTION SOLUTION 20,000 UNIT/2 ML, 20,000 UNIT/ML	2	PA; Specialty
ZARXIO INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	2	PA; Specialty
ZIEXTENZO SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	2	PA

Drug Name	Drug Tier	Requirements / Limits
GROWTH HORMONES		
EGRIFTA SV SUBCUTANEOUS RECON SOLN 2 MG	2	PA; Specialty; QL
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	2	PA; Specialty
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML)	2	PA; Specialty
NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 30 MG/3 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	2	PA; Specialty
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	2	PA; Specialty
INTERFERONS		
AUBAGIO ORAL TABLET 14 MG, 7 MG	2	PA; Specialty; QL
AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML	2	PA; Specialty; QL
AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML	2	PA; Specialty; QL
BETASERON SUBCUTANEOUS KIT 0.3 MG	2	PA; Specialty; QL
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 120 mg, 120 mg (14)- 240 mg (46), 240 mg</i>	1	PA; Specialty; QL
<i>glatiramer subcutaneous syringe 20 mg/ml, 40 mg/ml</i>	2	PA; Specialty; QL
<i>glatopa subcutaneous syringe 20 mg/ml, 40 mg/ml</i>	2	PA; Specialty; QL
KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR 20 MG/0.4 ML	3	PA; Specialty; QL
LEMTRADA INTRAVENOUS SOLUTION 12 MG/1.2 ML	2	PA; MSD; Specialty; QL
<i>lenalidomide oral capsule 10 mg, 15 mg, 25 mg, 5 mg</i>	1	PA; Specialty; QL
<i>lenalidomide oral capsule 2.5 mg, 20 mg</i>	1	PA; QL
OCREVUS INTRAVENOUS SOLUTION 30 MG/ML	2	PA; MSD; Specialty; QL
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	3	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	3	PA; Specialty; QL
PLEGRIDY INTRAMUSCULAR SYRINGE 125 MCG/0.5 ML	2	PA; Specialty; QL
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	2	PA; Specialty; QL
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	2	PA; Specialty; QL
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	2	PA; Specialty; QL
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML	2	PA; Specialty; QL
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML, 8.8MCG/0.2ML-22 MCG/0.5ML (6)	2	PA; Specialty; QL
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6)	2	PA; Specialty; QL
<i>ribavirin oral capsule 200 mg</i>	1	
<i>ribavirin oral tablet 200 mg</i>	1	
INTERLEUKINS		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	2	PA; Specialty
ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	3	Specialty
BESREMI SUBCUTANEOUS SYRINGE 500 MCG/ML	3	PA; Specialty; QL
ILARIS (PF) SUBCUTANEOUS SOLUTION 150 MG/ML	2	PA; Specialty; QL
<i>imiquimod topical cream in packet 5 %</i>	1	QL
INTRON A INJECTION RECON SOLN 10 MILLION UNIT (1 ML)	2	PA; MSD; Specialty
KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	3	PA; Specialty; QL
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	2	MSD; ACA
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	3	MSD; ACA; QL

Drug Name	Drug Tier	Requirements / Limits
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	3	MSD; ACA; QL
AFLURIA QD 2022-23(3YR UP)(PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
AFLURIA QUAD 2022-2023(6MO UP) INTRAMUSCULAR SUSPENSION 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
ATGAM INTRAVENOUS SOLUTION 50 MG/ML	2	MSD; Specialty
BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	3	MSD; ACA; QL; Age Limit (Min 10 Years and Max 25 Years)
BIVIGAM INTRAVENOUS SOLUTION 10 %	2	PA; MSD; Specialty
BOOSTRIX TDAP INTRAMUSCULAR SUSPENSION 2.5-8-5 LF-MCG-LF/0.5ML	3	MSD; ACA
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	3	MSD; ACA; QL
BOTOX INJECTION RECON SOLN 100 UNIT, 200 UNIT	2	PA; MSD; Specialty
COMIRNATY TRIS VACCINE(PF) INTRAMUSCULAR SUSPENSION 30 MCG/0.3 ML	3	MSD; ACA
CUVITRU SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %), 8 GRAM/40 ML (20 %)	3	PA; Specialty
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML	2	MSD; ACA
DYSPORT INTRAMUSCULAR RECON SOLN 300 UNIT, 500 UNIT	3	PA; MSD; Specialty
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	3	MSD; ACA; QL; Age Limit (Min 18 Years and Max 999 Years)
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	3	MSD; ACA; QL; Age Limit (Min 18 Years and Max 999 Years)
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	3	MSD; ACA
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 5 %	3	PA; MSD; Specialty
FLUAD QUAD 2022-23(65Y UP)(PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL

Drug Name	Drug Tier	Requirements / Limits
FLUARIX QUAD 2022-2023 (PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
FLUBLOK QUAD 2022-2023 (PF) INTRAMUSCULAR SYRINGE 180 MCG (45 MCG X 4)/0.5 ML	3	MSD; ACA; QL
FLUCELVAX QUAD 2022-2023 (PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
FLUCELVAX QUAD 2022-2023 INTRAMUSCULAR SUSPENSION 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
FLULALVAL QUAD 2022-2023 (PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
FLUMIST QUAD 2022-2023 NASAL NASAL SPRAY SYRINGE 10EXP6.5-7.5 FF UNIT/0.2 ML	3	ACA
FLUZONE HIGHDOSE QUAD 22-23 PF INTRAMUSCULAR SYRINGE 240 MCG/0.7 ML	3	MSD; ACA; QL
FLUZONE QUAD 2022-2023 (PF) INTRAMUSCULAR SUSPENSION 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
FLUZONE QUAD 2022-2023 (PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
FLUZONE QUAD 2022-2023 INTRAMUSCULAR SUSPENSION 60 MCG (15 MCG X 4)/0.5 ML	3	MSD; ACA; QL
GAMASTAN INTRAMUSCULAR SOLUTION 15-18 % RANGE	2	PA; MSD; Specialty
GAMASTAN S/D INTRAMUSCULAR SOLUTION 15-18 % RANGE	2	PA; Specialty
GAMMAGARD LIQUID INJECTION SOLUTION 10 %	2	PA; MSD; Specialty
GAMMAGARD S-D (IGA < 1 MCG/ML) INTRAVENOUS RECON SOLN 10 GRAM, 5 GRAM	2	PA; MSD; Specialty
GAMMAPLEX (WITH SORBITOL) INTRAVENOUS SOLUTION 5 %	3	PA; MSD; Specialty
GAMMAPLEX INTRAVENOUS SOLUTION 10 %	3	PA; MSD; Specialty

Drug Name	Drug Tier	Requirements / Limits
GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 40 GRAM/400 ML (10 %), 5 GRAM/50 ML (10 %)	2	PA; MSD; Specialty
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	3	MSD; ACA; QL; Age Limit (Min 9 Years and Max 45 Years)
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	3	MSD; ACA; QL; Age Limit (Min 9 Years and Max 45 Years)
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML	3	MSD; ACA; QL; Age Limit (Min 18 Years and Max 999 Years)
HAVRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT/0.5 ML	3	MSD; ACA
HEPAGAM B INJECTION SOLUTION >312 UNIT/ML	2	
HEPAGAM B INJECTION SOLUTION GREATR THAN 312 UNIT/ML (5 ML)	2	MSD
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	3	MSD; ACA; QL; Age Limit (Min 18 Years and Max 999 Years)
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	2	MSD; ACA
HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML	2	MSD
HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML (5 ML)	2	
HYPERHEP B NEONATAL INTRAMUSCULAR SYRINGE 110 UNIT/0.5 ML	2	MSD
HYPERRAB (PF) INTRAMUSCULAR SOLUTION 300 UNIT/ML	2	MSD
HYPERTET (PF) INTRAMUSCULAR SYRINGE 250 UNIT/ML	2	MSD
HYQVIA SUBCUTANEOUS SOLUTION 10 GRAM /100 ML (10 %), 2.5 GRAM /25 ML (10 %), 20 GRAM /200 ML (10 %), 30 GRAM /300 ML (10 %), 5 GRAM /50 ML (10 %)	3	PA; Specialty
IMOGLAM RABIES-HT (PF) INTRAMUSCULAR SOLUTION 150 UNIT/ML	2	MSD
IMOVA X RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN 2.5 UNIT	3	MSD; ACA
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	2	MSD; ACA

Drug Name	Drug Tier	Requirements / Limits
IPOP INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	2	MSD; ACA
IXIARO (PF) INTRAMUSCULAR SYRINGE 6 MCG/0.5 ML	3	MSD; ACA
JANSSEN COVID-19 VACCINE (EUA) INTRAMUSCULAR SUSPENSION 0.5 ML	3	MSD; ACA; QL
KEDRAB (PF) INTRAMUSCULAR SOLUTION 150 UNIT/ML	2	MSD
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	2	MSD; ACA
MENACTRA (PF) INTRAMUSCULAR SOLUTION 4 MCG/0.5 ML	3	MSD; ACA; QL; Age Limit (Min 11 Years and Max 23 Years)
MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML	3	MSD; ACA; QL; Age Limit (Min 11 Years and Max 23 Years)
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	3	MSD; ACA; QL; Age Limit (Min 11 Years and Max 23 Years)
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	3	ACA; QL
MODERNA COVID BIVAL(18Y UP)-PF INTRAMUSCULAR SUSPENSION 50 MCG/0.5 ML	3	ACA
MODERNA COVID(6M-5Y) VACC(EUA) INTRAMUSCULAR SUSPENSION 25 MCG/0.25 ML	3	MSD; ACA
MODERNA COVID-19 (6-11YR)(EUA) INTRAMUSCULAR SUSPENSION 50 MCG/0.5 ML	3	ACA
MODERNA COVID-19 VACCINE (EUA) INTRAMUSCULAR SUSPENSION 100 MCG/0.5 ML	3	MSD; ACA
MYOBLOC INTRAMUSCULAR SOLUTION 10,000 UNIT/2 ML, 2,500 UNIT/0.5 ML, 5,000 UNIT/ML	2	PA; MSD; Specialty
NABI-HB INTRAMUSCULAR SOLUTION GREATER THAN 1,560 UNIT/5 ML, GREATR THAN 312 UNIT/ML	2	
NOVAVAX COVID-19 VACC,ADJ(EUA) INTRAMUSCULAR SUSPENSION 5 MCG/0.5 ML	3	MSD; ACA
PANZYGA INTRAVENOUS SOLUTION 10 %	3	PA; MSD; Specialty
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	2	MSD; ACA

Drug Name	Drug Tier	Requirements / Limits
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	2	MSD; ACA
PENTACEL (PF) INTRAMUSCULAR KIT 15 LF UNIT-20 MCG-5 LF/0.5 ML	2	MSD; ACA
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-48MCG-62DU -10 MCG/0.5ML	2	ACA
PENTACEL ACTHIB COMPONENT (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	2	MSD; ACA
PFIZER COVID BIVAL(12Y UP)(PF) INTRAMUSCULAR SUSPENSION 30 MCG/0.3 ML	3	ACA
PFIZER COVID-19 TRIS VACCN(PF) INTRAMUSCULAR SUSPENSION 30 MCG/0.3 ML	3	MSD; ACA; Age Limit (Min 12 Years and Max 999 Years)
PFIZER COVID-19 TRIS VACCN(PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 10 MCG/0.2 ML	3	MSD; ACA; Age Limit (Min 5 Years and Max 11 Years)
PFIZER COVID-19 TRIS VACCN(PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 3 MCG/0.2 ML	3	MSD; ACA
PFIZER COVID-19 VACCINE (EUA) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 30 MCG/0.3 ML	3	MSD; ACA
PREVNAR 13 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	3	MSD; ACA
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	3	ACA; QL
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	3	ACA
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	2	MSD; ACA
QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML	2	MSD; ACA
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 2.5 UNIT	3	MSD; ACA
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML	3	MSD; ACA; QL; Age Limit (Min 18 Years and Max 999 Years)

Drug Name	Drug Tier	Requirements / Limits
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 5 MCG/0.5 ML	3	MSD; ACA
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML	3	MSD; ACA; QL; Age Limit (Min 18 Years and Max 999 Years)
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 5 MCG/0.5 ML	3	MSD; ACA
ROTARIX ORAL SUSPENSION FOR RECONSTITUTION 10EXP6 CCID50/ML	2	ACA
ROTATEQ VACCINE ORAL SOLUTION 2 ML	2	ACA
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	3	MSD; ACA; QL; Age Limit (Min 19 Years and Max 999 Years)
SPIKEVAX (PF) INTRAMUSCULAR SUSPENSION 100 MCG/0.5 ML	3	MSD; ACA
STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,000 UNIT/0.5 ML	3	ACA
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF UNIT/0.5 ML	3	MSD; ACA; QL
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	3	MSD; ACA; QL
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	3	MSD; ACA; QL
TETANUS,DIPHTHERIA TOX PED(PF) INTRAMUSCULAR SUSPENSION 5-25 LF UNIT/0.5 ML	2	MSD
THYMOGLOBULIN INTRAVENOUS RECON SOLN 25 MG	2	MSD; Specialty
TICOVAC INTRAMUSCULAR SYRINGE 2.4 MCG/0.5 ML	3	MSD
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	3	MSD; ACA; QL; Age Limit (Min 10 Years and Max 25 Years)
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	3	MSD; ACA; QL
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5 ML	3	MSD; ACA
TYPHIM VI INTRAMUSCULAR SYRINGE 25 MCG/0.5 ML	3	MSD; ACA
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML	3	MSD; ACA
VAQTA (PF) INTRAMUSCULAR SUSPENSION 50 UNIT/ML	3	MSD; ACA; QL; Age Limit (Min 18 Years and Max 999 Years)

Drug Name	Drug Tier	Requirements / Limits
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML	3	MSD; ACA
VAQTA (PF) INTRAMUSCULAR SYRINGE 50 UNIT/ML	3	MSD; ACA; QL; Age Limit (Min 18 Years and Max 999 Years)
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	3	ACA; QL
VARIZIG INTRAMUSCULAR SOLUTION 125 UNIT/1.2 ML	2	MSD
VAXELIS (PF) INTRAMUSCULAR SUSPENSION 15 UNIT-5 UNIT- 10 MCG/0.5 ML	2	MSD; ACA
VAXELIS (PF) INTRAMUSCULAR SYRINGE 15 UNIT-5 UNIT- 10 MCG/0.5 ML	2	MSD; ACA
VAXNEUVANCE INTRAMUSCULAR SYRINGE 0.5 ML	3	MSD; Age Limit (Min 19 Years and Max 999 Years)
VIVOTIF ORAL CAPSULE,DELAYED RELEASE(DR/EC) 2 BILLION UNIT	3	ACA
XEMBIFY SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	2	PA; Specialty
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10 EXP4.74 UNIT/0.5 ML	3	ACA

MUSCULOSKELETAL & RHEUMATOLOGY

GOUT THERAPY

allopurinol oral tablet 100 mg, 300 mg	1	
allopurinol sodium intravenous recon soln 500 mg	1	MSD
aloprim intravenous recon soln 500 mg	2	MSD
COLCHICINE ORAL CAPSULE 0.6 MG	1	QL
colchicine oral tablet 0.6 mg	1	QL
febuxostat oral tablet 40 mg, 80 mg	1	ST; QL
KRYSTEXXA INTRAVENOUS SOLUTION 8 MG/ML	2	PA; MSD; Specialty; QL
MITIGARE ORAL CAPSULE 0.6 MG	2	QL
probenecid oral tablet 500 mg	1	
probenecid-colchicine oral tablet 500-0.5 mg	1	
ZYLOPRIM ORAL TABLET 100 MG	3	

OSTEOPOROSIS THERAPY

Drug Name	Drug Tier	Requirements / Limits
alendronate oral solution 70 mg/75 ml	1	QL
alendronate oral tablet 10 mg, 5 mg	1	
alendronate oral tablet 35 mg, 70 mg	1	QL
EVISTA ORAL TABLET 60 MG	3	QL
FORTEO SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (600MCG/2.4ML)	2	Specialty; QL
FOSAMAX PLUS D ORAL TABLET 70 MG- 2,800 UNIT, 70 MG- 5,600 UNIT	3	
ibandronate intravenous solution 3 mg/3 ml	1	MSD
ibandronate intravenous syringe 3 mg/3 ml	1	MSD
ibandronate oral tablet 150 mg	1	QL
raloxifene oral tablet 60 mg	1	ACA; QL
risedronate oral tablet 150 mg, 35 mg, 5 mg	1	ST; QL
risedronate oral tablet,delayed release (dr/ec) 35 mg	1	ST; QL
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	2	PA; Specialty; QL

OTHER RHEUMATOLOGICALS

ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	2	PA; Specialty; QL
ACTEMRA INTRAVENOUS SOLUTION 200 MG/10 ML (20 MG/ML), 400 MG/20 ML (20 MG/ML), 80 MG/4 ML (20 MG/ML)	2	PA; MSD; Specialty; QL
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	2	PA; Specialty
ARAVA ORAL TABLET 10 MG, 20 MG	3	
BENLYSTA INTRAVENOUS RECON SOLN 120 MG, 400 MG	2	MSD; Specialty; QL
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	3	PA; Specialty; QL
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	3	PA; Specialty; QL
DEPEN TITRATABS ORAL TABLET 250 MG	3	PA; Specialty; QL
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	2	PA; Specialty; QL
ENBREL SUBCUTANEOUS RECON SOLN 25 MG (1 ML)	2	PA; Specialty
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	2	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	2	PA; Specialty; QL
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	2	PA; Specialty; QL
HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	2	PA; Specialty; QL
HUMIRA PEN PSOR-UVEITS-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	2	PA; Specialty; QL
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	2	PA; Specialty; QL
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML, 80 MG/0.8 ML-40 MG/0.4 ML	2	PA; Specialty; QL
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	2	PA; Specialty; QL
HUMIRA(CF) PEN PEDIATRIC UC SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	2	PA; Specialty; QL
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	2	PA; Specialty; QL
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	2	PA; Specialty; QL
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	2	PA; Specialty; QL
KEVZARA SUBCUTANEOUS PEN INJECTOR 150 MG/1.14 ML, 200 MG/1.14 ML	3	PA; Specialty; QL
KEVZARA SUBCUTANEOUS SYRINGE 150 MG/1.14 ML, 200 MG/1.14 ML	3	PA; Specialty; QL
<i>leflunomide oral tablet 10 mg, 20 mg</i>	1	
OLUMIANT ORAL TABLET 1 MG, 2 MG, 4 MG	3	PA; Specialty; QL
ORENCIA (WITH MALTOSE) INTRAVENOUS RECON SOLN 250 MG	2	PA; Specialty; QL
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	3	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML, 50 MG/0.4 ML, 87.5 MG/0.7 ML	3	PA; Specialty; QL
OTEZLA ORAL TABLET 30 MG	2	PA; Specialty; QL
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	2	PA; Specialty; QL
<i>penicillamine oral capsule 250 mg</i>	2	PA; Specialty
<i>penicillamine oral tablet 250 mg</i>	2	PA; Specialty
RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.2 ML, 12.5 MG/0.25 ML, 15 MG/0.3 ML, 17.5 MG/0.35 ML, 20 MG/0.4 ML, 22.5 MG/0.45 ML, 25 MG/0.5 ML, 30 MG/0.6 ML, 7.5 MG/0.15 ML	2	ST; QL
RIDAURA ORAL CAPSULE 3 MG	2	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG	2	PA; Specialty; QL
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	2	
SAVELLA ORAL TABLETS,DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	2	
SIMPONI ARIA INTRAVENOUS SOLUTION 12.5 MG/ML	3	PA; MSD; Specialty; QL
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 50 MG/0.5 ML	3	PA; Specialty; QL
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML, 50 MG/0.5 ML	3	PA; Specialty; QL
XELJANZ ORAL SOLUTION 1 MG/ML	2	PA; Specialty
XELJANZ ORAL TABLET 10 MG, 5 MG	2	PA; Specialty; QL
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG	2	PA; Specialty; QL

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES

CAYA CONTOURED VAGINAL DIAPHRAGM 65-80 MM	3	ACA
FC2 FEMALE CONDOM	3	ACA
FEMCAP VAGINAL DEVICE 22 MM	3	ACA
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 17.5 MCG/24 HRS (5 YRS) 19.5 MG	3	MSD; ACA
LILETTA INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/24 HRS (6 YRS) 52 MG	3	MSD; ACA

Drug Name	Drug Tier	Requirements / Limits
MIRENA INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/24 HOURS (8 YRS) 52 MG	3	MSD; ACA
PARAGARD T 380A INTRAUTERINE INTRAUTERINE DEVICE 380 SQUARE MM	3	ACA
SKYLA INTRAUTERINE INTRAUTERINE DEVICE 14 MCG/24 HRS (3 YRS) 13.5 MG	3	MSD; ACA
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 60 MM	3	ACA
ESTROGENS & PROGESTINS		
<i>amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	1	
ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG	3	
AYGESTIN ORAL TABLET 5 MG	3	
BIJUVA ORAL CAPSULE 1-100 MG	3	ST
<i>camila oral tablet 0.35 mg</i>	1	ACA
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	2	QL
<i>covaryx h.s. oral tablet 0.625-1.25 mg</i>	1	
<i>covaryx oral tablet 1.25-2.5 mg</i>	1	
<i>deblitane oral tablet 0.35 mg</i>	1	ACA
DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML	2	MSD
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	3	ST; MSD; ACA
DEPO-PROVERA INTRAMUSCULAR SYRINGE 150 MG/ML	3	ST; MSD; ACA
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	3	ACA
DIVIGEL TRANSDERMAL GEL IN PACKET 0.25 MG/0.25 GRAM (0.1 %), 0.5 MG/0.5 GRAM (0.1 %), 0.75 MG/0.75 GRAM (0.1%), 1 MG/GRAM (0.1 %), 1.25 MG/1.25 GRAM (0.1 %)	2	
<i>dotti transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL
DUAVEE ORAL TABLET 0.45-20 MG	2	
<i>eemt hs oral tablet 0.625-1.25 mg</i>	1	
<i>eemt oral tablet 1.25-2.5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>errin oral tablet 0.35 mg</i>	1	ACA
<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL
<i>estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL
<i>estradiol vaginal cream 0.01 % (0.1 mg/gram)</i>	1	
<i>estradiol vaginal tablet 10 mcg</i>	1	
<i>estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml</i>	1	MSD
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	1	
ESTRING VAGINAL RING 2 MG (7.5 MCG /24 HOUR)	2	QL
<i>estrogens-methyltestosterone oral tablet 0.625-1.25 mg, 1.25-2.5 mg</i>	1	
<i>fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	
<i>heather oral tablet 0.35 mg</i>	1	ACA
<i>hydroxyprogesterone(pf)(preg presv) intramuscular oil 250 mg/ml (1 ml)</i>	1	PA; MSD; Specialty; QL
<i>hydroxyprogesterone cap(ppres) intramuscular oil 250 mg/ml</i>	1	PA; MSD; Specialty; QL
<i>hydroxyprogesterone caproate intramuscular oil 250 mg/ml</i>	1	PA; MSD; Specialty
IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG	3	QL
IMVEXXY STARTER PACK VAGINAL INSERT, DOSE PACK 10 MCG, 4 MCG	3	QL
<i>incassia oral tablet 0.35 mg</i>	1	ACA
<i>jencycla oral tablet 0.35 mg</i>	1	ACA
<i>jinteli oral tablet 1-5 mg-mcg</i>	1	
<i>lyleq oral tablet 0.35 mg</i>	1	ACA
<i>lyllana transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL
<i>lyza oral tablet 0.35 mg</i>	1	ACA
MAKENA (PF) SUBCUTANEOUS AUTO-INJECTOR 275 MG/1.1 ML	2	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
<i>medroxyprogesterone intramuscular suspension 150 mg/ml</i>	1	MSD; ACA
<i>medroxyprogesterone intramuscular syringe 150 mg/ml</i>	1	ACA
<i>medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG, 2.5 MG	3	
<i>mimvey oral tablet 1-0.5 mg</i>	1	
<i>nora-be oral tablet 0.35 mg</i>	1	ACA
<i>norethindrone (contraceptive) oral tablet 0.35 mg</i>	1	ACA
<i>norethindrone acetate oral tablet 5 mg</i>	1	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	
PREMARIN INJECTION RECON SOLN 25 MG	2	MSD
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	2	
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	2	
PREMPHASE ORAL TABLET 0.625 MG (14)/ 0.625MG-5MG(14)	2	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	2	
<i>progesterone intramuscular oil 50 mg/ml</i>	1	MSD
<i>progesterone micronized oral capsule 100 mg, 200 mg</i>	1	
PROMETRIUM ORAL CAPSULE 100 MG, 200 MG	3	
PROVERA ORAL TABLET 10 MG, 2.5 MG, 5 MG	3	
<i>sharobel oral tablet 0.35 mg</i>	1	ACA
<i>tulana oral tablet 0.35 mg</i>	1	ACA
<i>yuvafem vaginal tablet 10 mcg</i>	1	
MISCELLANEOUS OB/GYN		
ANNOVERA VAGINAL RING 0.15-0.013 MG/24 HOUR	3	ACA
CERVIDIL VAGINAL INSERT, EXTENDED RELEASE 10 MG	2	MSD
CLEOCIN VAGINAL CREAM 2 %	3	

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate vaginal cream 2 %</i>	1	
<i>eluryng vaginal ring 0.12-0.015 mg/24 hr</i>	1	ACA; QL
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr</i>	1	ACA; QL
GYNAZOLE-1 VAGINAL CREAM 2 %	3	
<i>isoxsuprine oral tablet 10 mg, 20 mg</i>	1	
<i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	1	
<i>miconazole-3 vaginal suppository 200 mg</i>	1	
MIFEPREX ORAL TABLET 200 MG	3	
<i>mifepristone oral tablet 200 mg</i>	1	
NEXPLANON SUBDERMAL IMPLANT 68 MG	3	MSD; ACA
ORIAHNN ORAL CAPSULE, SEQUENTIAL 300-1-0.5MG(AM) /300 MG(PM)	3	PA; QL
OSPHENA ORAL TABLET 60 MG	3	QL
PHEXXI VAGINAL GEL 1.8-1-0.4 %	3	ACA
PREPIDIL VAGINAL GEL 0.5 MG/3 G	3	MSD
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	1	
<i>terconazole vaginal suppository 80 mg</i>	2	
TODAY CONTRACEPTIVE SPONGE VAGINAL CONTRACEPTIVE SPONGE 1,000 MG	3	ACA
<i>tranexamic acid oral tablet 650 mg</i>	1	
TRIMO-SAN JELLY VAGINAL GEL 0.025-0.01 %	3	
TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24 HR	3	ACA
VCF CONTRACEPTIVE FILM VAGINAL FILM 28 %	3	ACA
VCF CONTRACEPTIVE GEL VAGINAL GEL 4 %	1	ACA
<i>xulane transdermal patch weekly 150-35 mcg/24 hr</i>	1	ACA; QL
<i>zafemy transdermal patch weekly 150-35 mcg/24 hr</i>	1	ACA; QL
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle oral tablet 0.1-20 mg-mcg</i>	1	ACA
<i>after pill oral tablet 1.5 mg</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
AFTERA ORAL TABLET 1.5 MG	1	ST; ACA
altavera (28) oral tablet 0.15-0.03 mg	1	ACA
alyacen 1/35 (28) oral tablet 1-35 mg-mcg	1	ACA
alyacen 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	1	ACA
amethia oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA
amethyst (28) oral tablet 90-20 mcg (28)	1	ACA
apri oral tablet 0.15-0.03 mg	1	ACA
aranelle (28) oral tablet 0.5/1/0.5-35 mg-mcg	1	ACA
ashlyna oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA
aubra eq oral tablet 0.1-20 mg-mcg	1	ACA
aubra oral tablet 0.1-20 mg-mcg	1	ACA
aurovela 1.5/30 (21) oral tablet 1.5-30 mg-mcg	1	ACA
aurovela 1/20 (21) oral tablet 1-20 mg-mcg	1	ACA
aurovela 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA
aurovela fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA
aurovela fe 1-20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA
aviane oral tablet 0.1-20 mg-mcg	1	ACA
ayuna oral tablet 0.15-0.03 mg	1	ACA
azurette (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA
balziva (28) oral tablet 0.4-35 mg-mcg	1	ACA
blisovi 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA
blisovi fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA
blisovi fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA
briellyn oral tablet 0.4-35 mg-mcg	1	ACA
camrese lo oral tablets,dose pack,3 month 0.10 mg-20 mcg (84)/10 mcg (7)	1	ACA
camrese oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA
caziant (28) oral tablet 0.1/.125/.15-25 mg-mcg	1	ACA

Drug Name	Drug Tier	Requirements / Limits
charlotte 24 fe oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)	1	ACA
chateal (28) oral tablet 0.15-0.03 mg	1	ACA
chateal eq (28) oral tablet 0.15-0.03 mg	1	ACA
cryselle (28) oral tablet 0.3-30 mg-mcg	1	ACA
cyred eq oral tablet 0.15-0.03 mg	1	ACA
cyred oral tablet 0.15-0.03 mg	1	ACA
dasetta 1/35 (28) oral tablet 1-35 mg-mcg	1	ACA
dasetta 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	1	ACA
daysee oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA
desog-e.estradiol/e.estriadiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA
desogestrel-ethinyl estradiol oral tablet 0.15-0.03 mg	1	ACA
dolishale oral tablet 90-20 mcg (28)	1	ACA
drospirenone-e.estriadiol-lm.fa oral tablet 3-0.02-0.451 mg (24) (4), 3-0.03-0.451 mg (21) (7)	1	ACA
drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg	1	ACA
econtra ez oral tablet 1.5 mg	1	ACA
econtra one-step oral tablet 1.5 mg	1	ACA
elinest oral tablet 0.3-30 mg-mcg	1	ACA
ELLA ORAL TABLET 30 MG	3	ACA
enpresse oral tablet 50-30 (6)/75-40 (5)/125-30(10)	1	ACA
enskyce oral tablet 0.15-0.03 mg	1	ACA
estarrylla oral tablet 0.25-35 mg-mcg	1	ACA
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg	1	ACA
falmina (28) oral tablet 0.1-20 mg-mcg	1	ACA
femynor oral tablet 0.25-35 mg-mcg	1	ACA
finzala oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)	1	ACA
gummily oral capsule 1 mg-20 mcg (24)/75 mg (4)	1	ACA
hailey 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA

Drug Name	Drug Tier	Requirements / Limits
hailey fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA
hailey fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA
hailey oral tablet 1.5-30 mg-mcg	1	ACA
iclevia oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	1	ACA
isibloom oral tablet 0.15-0.03 mg	1	ACA
jaimiess oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA
jasmiel (28) oral tablet 3-0.02 mg	1	ACA
jolessa oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	1	ACA
juleber oral tablet 0.15-0.03 mg	1	ACA
junel 1.5/30 (21) oral tablet 1.5-30 mg-mcg	1	ACA
junel 1/20 (21) oral tablet 1-20 mg-mcg	1	ACA
junel fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA
junel fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA
junel fe 24 oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA
kaitlib fe oral tablet,chewable 0.8mg-25mcg(24) and 75 mg (4)	1	ACA
kalliga oral tablet 0.15-0.03 mg	1	ACA
kariva (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA
kelnor 1/35 (28) oral tablet 1-35 mg-mcg	1	ACA
kelnor 1-50 (28) oral tablet 1-50 mg-mcg	1	ACA
kurvelo (28) oral tablet 0.15-0.03 mg	1	ACA
l norgest/e.estradiol-e.estrad oral tablets,dose pack,3 month 0.10 mg-20 mcg (84)/10 mcg (7), 0.15 mg-20 mcg/ 0.15 mg-25 mcg, 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA
larin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	1	ACA
larin 1/20 (21) oral tablet 1-20 mg-mcg	1	ACA
larin 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA
larin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA

Drug Name	Drug Tier	Requirements / Limits
larin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA
layolis fe oral tablet, chewable 0.8mg-25mcg(24) and 75 mg (4)	1	ACA
leena 28 oral tablet 0.5/1/0.5-35 mg-mcg	1	ACA
lessina oral tablet 0.1-20 mg-mcg	1	ACA
levonest (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)	1	ACA
levonorgestrel oral tablet 1.5 mg	1	ACA
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg, 90-20 mcg (28)	1	ACA
levonorgestrel-ethinyl estrad oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)	1	ACA
levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)	1	ACA
levora-28 oral tablet 0.15-0.03 mg	1	ACA
LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG (24)/10 MCG (2)	2	ACA
lojaimiess oral tablets, dose pack, 3 month 0.10 mg-20 mcg (84)/10 mcg (7)	1	ACA
loryna (28) oral tablet 3-0.02 mg	1	ACA
low-ogestrel (28) oral tablet 0.3-30 mg-mcg	1	ACA
lo-zumandimine (28) oral tablet 3-0.02 mg	1	ACA
lutera (28) oral tablet 0.1-20 mg-mcg	1	ACA
marlissa (28) oral tablet 0.15-0.03 mg	1	ACA
merzee oral capsule 1 mg-20 mcg (24)/75 mg (4)	1	ACA
mibelas 24 fe oral tablet, chewable 1 mg-20 mcg(24)/75 mg (4)	1	ACA
microgestin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	1	ACA
microgestin 1/20 (21) oral tablet 1-20 mg-mcg	1	ACA
MICROGESTIN 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	1	ACA
microgestin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA
microgestin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA
mini oral tablet 0.25-35 mg-mcg	1	ACA
mono-linyah oral tablet 0.25-35 mg-mcg	1	ACA
my choice oral tablet 1.5 mg	1	ACA

Drug Name	Drug Tier	Requirements / Limits
my way oral tablet 1.5 mg	1	ACA
NATAZIA ORAL TABLET 3 MG/2 MG-2 MG/ 2 MG-3 MG/1 MG	3	ACA
necon 0.5/35 (28) oral tablet 0.5-35 mg-mcg	1	ACA
new day oral tablet 1.5 mg	1	ACA
NEXTSTELLIS ORAL TABLET 3 MG- 14.2 MG (28)	3	ACA
nikki (28) oral tablet 3-0.02 mg	1	ACA
noreth-ethinyl estradiol-iron oral tablet, chewable 0.4mg-35mcg(21) and 75 mg (7), 0.8mg-25mcg(24) and 75 mg (4)	1	ACA
norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	1	ACA
norethindrone-e.estradiol-iron oral capsule 1 mg-20 mcg (24)/75 mg (4)	1	ACA
norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1-20(5)/1-30(7) /1mg-35mcg (9), 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA
norethindrone-e.estradiol-iron oral tablet, chewable 1 mg-20 mcg(24) /75 mg (4)	1	ACA
norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg (28), 0.25-35 mg-mcg	1	ACA
nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg	1	ACA
nortrel 1/35 (21) oral tablet 1-35 mg-mcg (21)	1	ACA
nortrel 1/35 (28) oral tablet 1-35 mg-mcg	1	ACA
nortrel 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	1	ACA
nylia 1/35 (28) oral tablet 1-35 mg-mcg	1	ACA
nylia 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	1	ACA
nymyo oral tablet 0.25-35 mg-mcg	1	ACA
ocella oral tablet 3-0.03 mg	1	ACA
opcicon one-step oral tablet 1.5 mg	1	ACA
option-2 oral tablet 1.5 mg	1	ACA
philith oral tablet 0.4-35 mg-mcg	1	ACA
pimtrea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA
pirmella oral tablet 0.5/0.75/1 mg- 35 mcg, 1-35 mg-mcg	1	ACA

Drug Name	Drug Tier	Requirements / Limits
portia 28 oral tablet 0.15-0.03 mg	1	ACA
reclipsen (28) oral tablet 0.15-0.03 mg	1	ACA
rivelsa oral tablets,dose pack,3 month 0.15 mg-20 mcg/ 0.15 mg-25 mcg	1	ACA
setlakin oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	1	ACA
simliya (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA
simpesse oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA
SLYND ORAL TABLET 4 MG (28)	3	ACA
sprintec (28) oral tablet 0.25-35 mg-mcg	1	ACA
sronyx oral tablet 0.1-20 mg-mcg	1	ACA
syeda oral tablet 3-0.03 mg	1	ACA
TAKE ACTION ORAL TABLET 1.5 MG	1	ST; ACA
tarina 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA
tarina fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA
taysofy oral capsule 1 mg-20 mcg (24)/75 mg (4)	1	ACA
TAYTULLA ORAL CAPSULE 1 MG-20 MCG (24)/75 MG (4)	2	ST; ACA
tilia fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	1	ACA
tri femynor oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA
tri-estarrylla oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA
tri-legest fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	1	ACA
tri-linyah oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA
tri-lo-estarrylla oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA
tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA
tri-lo-mili oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA
tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA
tri-mili oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>tri-nimy whole oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	1	ACA
<i>tri-sprintec (28) oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	1	ACA
<i>trivora (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	1	ACA
<i>tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	1	ACA
<i>tri-vylibra oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	1	ACA
TYBLUME ORAL TABLET,CHEWABLE 0.1 MG- 20 MCG	1	ACA
<i>tydemy oral tablet 3-0.03-0.451 mg (21) (7)</i>	1	ACA
<i>velivet triphasic regimen (28) oral tablet 0.1/.125/.15-25 mg-mcg</i>	1	ACA
<i>vestura (28) oral tablet 3-0.02 mg</i>	1	ACA
<i>vienna oral tablet 0.1-20 mg-mcg</i>	1	ACA
<i>viorele (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA
<i>volnea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA
<i>vyfemla (28) oral tablet 0.4-35 mg-mcg</i>	1	ACA
<i>vylibra oral tablet 0.25-35 mg-mcg</i>	1	ACA
<i>wera (28) oral tablet 0.5-35 mg-mcg</i>	1	ACA
<i>wymzya fe oral tablet,chewable 0.4mg-35mcg(21) and 75 mg (7)</i>	1	ACA
<i>zarah oral tablet 3-0.03 mg</i>	1	ACA
<i>zovia 1-35 (28) oral tablet 1-35 mg-mcg</i>	1	ACA
<i>zumandimine (28) oral tablet 3-0.03 mg</i>	1	ACA

OXYTOCICS

<i>methergine oral tablet 0.2 mg</i>	3	
<i>methylergonovine oral tablet 0.2 mg</i>	1	

OPHTHALMOLOGY

ANTIBIOTICS		
<i>ak-poly-bac ophthalmic (eye) ointment 500-10,000 unit/gram</i>	1	
<i>AZASITE OPHTHALMIC (EYE) DROPS 1 %</i>	2	
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	1	

Drug Name	Drug Tier	Requirements / Limits
bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram	1	
BESIVANCE OPHTHALMIC (EYE) DROPS,SUSPENSION 0.6 %	3	ST
BETADINE OPHTHALMIC PREP OPHTHALMIC (EYE) SOLUTION 5 %	3	
ciprofloxacin hcl ophthalmic (eye) drops 0.3 %	1	
erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)	1	
gatifloxacin ophthalmic (eye) drops 0.5 %	1	
gentak ophthalmic (eye) ointment 0.3 % (3 mg/gram)	1	
gentamicin ophthalmic (eye) drops 0.3 %	1	
levofloxacin ophthalmic (eye) drops 0.5 %	1	
moxifloxacin ophthalmic (eye) drops 0.5 %	1	
moxifloxacin ophthalmic (eye) drops, viscous 0.5 %	1	ST
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 %	2	
neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g	1	
neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml	1	
neo-polycin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g	1	
ofloxacin ophthalmic (eye) drops 0.3 %	1	
polycin ophthalmic (eye) ointment 500-10,000 unit/gram	1	
polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml	1	
tobramycin ophthalmic (eye) drops 0.3 %	1	
TOBREX OPHTHALMIC (EYE) OINTMENT 0.3 %	3	
ZYMAXID OPHTHALMIC (EYE) DROPS 0.5 %	3	
ANTIVIRALS		
trifluridine ophthalmic (eye) drops 1 %	1	
ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %	3	
BETA-BLOCKERS		
betaxolol ophthalmic (eye) drops 0.5 %	1	

Drug Name	Drug Tier	Requirements / Limits
BETIMOL OPHTHALMIC (EYE) DROPS 0.25 %, 0.5 %	3	
BETOPTIC S OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 %	3	ST
<i>carteolol ophthalmic (eye) drops 1 %</i>	1	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	
<i>timolol maleate (pf) ophthalmic (eye) dropperette 0.25 %</i>	1	QL
<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %</i>	1	
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS 0.125 %	2	
CYCLOPLEGIC MYDRIATICS		
<i>atropine ophthalmic (eye) drops 1 %</i>	1	
ATROPINE OPHTHALMIC (EYE) DROPS, EMULSION 0.01 %	1	
<i>atropine ophthalmic (eye) ointment 1 %</i>	1	
CYCLOGYL OPHTHALMIC (EYE) DROPS 0.5 %, 1 %, 2 %	3	
<i>cyclopentolate ophthalmic (eye) drops 0.5 %, 1 %, 2 %</i>	1	
CYCLOPEN-TROPIC-PHENYLEPH-WATR OPHTHALMIC (EYE) DROPS 1-1-2.5 %	1	
CYCLOPENT-TROPIC-PHEN-KETR-WAT OPHTHALMIC (EYE) DROPS 1 %-1 %-10 %-0.5 %, 1 %-1 %-2.5 %-0.5 %	1	
CYCLOP-TROP-PROPA-PHEN-KET-WAT OPHTHALMIC (EYE) DROPS 1 %-1 %-0.1 %-2.5 %-0.4 %	1	
<i>homatropaire ophthalmic (eye) drops 5 %</i>	1	
PAREMYD OPHTHALMIC (EYE) DROPS 1-0.25 %	3	
PHENYLEPH-TROPICAMIDE IN WATER OPHTHALMIC (EYE) DROPS 2.5-1 %	1	
<i>tropicamide ophthalmic (eye) drops 0.5 %, 1 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DIRECT ACTING MIOTICS		
pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %	1	
MISCELLANEOUS OPHTHALMOLOGICS		
AKTEN (PF) OPHTHALMIC (EYE) GEL 3.5 %	3	
ALOCRIL OPHTHALMIC (EYE) DROPS 2 %	3	ST
ALOMIDE OPHTHALMIC (EYE) DROPS 0.1 %	3	ST
altacaine ophthalmic (eye) drops 0.5 %	1	
ALTAFLUOR BENOX OPHTHALMIC (EYE) DROPS 0.25-0.4 %	2	
azelastine ophthalmic (eye) drops 0.05 %	1	
bepotastine besilate ophthalmic (eye) drops 1.5 %	1	
CEQUA OPHTHALMIC (EYE) DROPPERETTE 0.09 %	3	PA; QL
cromolyn ophthalmic (eye) drops 4 %	1	
CYCLOSPORINE IN KLARITY OPHTHALMIC (EYE) DROPS 0.1-0.25 %	1	
CYSTADROPS OPHTHALMIC (EYE) DROPS 0.37 %	3	PA; Specialty; QL
CYSTARAN OPHTHALMIC (EYE) DROPS 0.44 %	2	PA; Specialty; QL
epinastine ophthalmic (eye) drops 0.05 %	2	
fluorescein-proparacaine ophthalmic (eye) drops 0.25-0.5 %	1	
MITOMYCIN (PF) IN WATER OPHTHALMIC (EYE) SYRINGE 0.2 MG/ML, 0.4 MG/ML	1	MSD; Specialty
OXERVATE OPHTHALMIC (EYE) DROPS 0.002 %	3	PA; Specialty; QL
PREDNISOL ACE-GATIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.5-0.075 %	1	
PREDNISOLN SP-MOXIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS 1-0.5-0.075 %	1	
PREDNISOLONE ACETATE-NEPAFENAC OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.1 %	1	
PREDNISOLONE-MOXIFLO-NEPAFENAC OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.5-0.1 %	1	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLONE-MOXIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.5-0.075 %	1	
<i>proparacaine ophthalmic (eye) drops 0.5 %</i>	1	
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS 0.05 %	2	PA; QL
RESTASIS OPHTHALMIC (EYE) DROPPERETTE 0.05 %	2	PA; QL
TETRACAIN HCL (PF) OPHTHALMIC (EYE) DROPS 0.5 %	1	
<i>tetracaine hcl ophthalmic (eye) drops 0.5 %</i>	1	
VISUDYNE INTRAVENOUS RECON SOLN 15 MG	2	MSD; Specialty
VITRASE INJECTION SOLUTION 200 UNIT/ML	3	MSD
IIDRA OPHTHALMIC (EYE) DROPPERETTE 5 %	2	PA
ZERVIATE OPHTHALMIC (EYE) DROPPERETTE 0.24 %	2	
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR LS OPHTHALMIC (EYE) DROPS 0.4 %	3	
ACULAR OPHTHALMIC (EYE) DROPS 0.5 %	3	
<i>bromfenac ophthalmic (eye) drops 0.09 %</i>	1	
BROMSITE OPHTHALMIC (EYE) DROPS 0.075 %	3	ST
<i>diclofenac sodium ophthalmic (eye) drops 0.1 %</i>	1	
<i>flurbiprofen sodium ophthalmic (eye) drops 0.03 %</i>	1	
ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3 %	2	
<i>ketorolac ophthalmic (eye) drops 0.4 %, 0.5 %</i>	1	
PROLENSA OPHTHALMIC (EYE) DROPS 0.07 %	3	ST
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide oral capsule, extended release 500 mg</i>	1	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	1	
<i>acetazolamide sodium injection recon soln 500 mg</i>	1	MSD
<i>methazolamide oral tablet 25 mg, 50 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
OTHER GLAUCOMA DRUGS		
<i>bimatoprost ophthalmic (eye) drops 0.03 %</i>	1	QL
BRIMONIDINE-DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS 0.15-2 %	1	
<i>brimonidine-timolol ophthalmic (eye) drops 0.2-0.5 %</i>	1	
<i>brinzolamide ophthalmic (eye) drops,suspension 1 %</i>	1	ST
COSOPT (PF) OPHTHALMIC (EYE) DROPPERETTE 2-0.5 %	3	ST; QL
DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS 2 %	1	
<i>dorzolamide ophthalmic (eye) drops 2 %</i>	1	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette 2-0.5 %</i>	1	ST; QL
DORZOLAMIDE-TIMOLOL (PF) OPHTHALMIC (EYE) DROPS 2-0.5 %	1	ST
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml</i>	1	
LATANOPROST (PF) OPHTHALMIC (EYE) DROPS 0.005 %	1	
<i>latanoprost ophthalmic (eye) drops 0.005 %</i>	1	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	2	ST; QL
MITOSOL OPHTHALMIC (EYE) KIT 0.2 MG	3	MSD
RHOPRESSA OPHTHALMIC (EYE) DROPS 0.02 %	2	ST; QL
ROCKLATAN OPHTHALMIC (EYE) DROPS 0.02-0.005 %	3	ST; QL
SIMBRINZA OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.2 %	3	ST
TIMOL-BRIMON-DORZO-LATANOP(PF) OPHTHALMIC (EYE) DROPS 0.5 %-0.15 %- 2 %-0.005 %	1	
TIMOLOL-BRIMONIDI-DORZOLAM(PF) OPHTHALMIC (EYE) DROPS 0.5-0.15-2 %	1	
TIMOLOL-DORZOLAMID-LATANOP(PF) OPHTHALMIC (EYE) DROPS 0.5-2-0.005 %	1	
TIMOLOL-LATANOPROST(PF) OPHTHALMIC (EYE) DROPS 0.5-0.005 %	1	
<i>travoprost ophthalmic (eye) drops 0.004 %</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
TRUSOPT OPHTHALMIC (EYE) DROPS 2 %	3	
VYZULTA OPHTHALMIC (EYE) DROPS 0.024 %	3	ST; QL
ZIOPTAN (PF) OPHTHALMIC (EYE) DROPPERETTE 0.0015 %	2	QL
STEROID-ANTIBIOTIC COMBINATIONS		
MAXITROL OPHTHALMIC (EYE) OINTMENT 3.5 MG/G-10,000 UNIT/G-0.1 %	3	
<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	1	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml</i>	1	
<i>neo-polycin hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	1	
PRED-G OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3-1 %	3	
PREDNISOLONE SOD PH-MOXIFLOX OPHTHALMIC (EYE) DROPS 1-0.5 %	1	
PREDNISOLONE-MOXIFLOXACIN HCL OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.5 %	1	
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	2	
TOBRADEX ST OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3-0.05 %	2	
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %</i>	1	
ZYLET OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3-0.5 %	2	
STEROIDS		
ALREX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.2 %	3	
<i>dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %</i>	1	
<i>difluprednate ophthalmic (eye) drops 0.05 %</i>	1	
<i>fluorometholone ophthalmic (eye) drops,suspension 0.1 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
INVELTYS OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %	2	ST; QL
LOTEMAX OPHTHALMIC (EYE) OINTMENT 0.5 %	2	
LOTEMAX SM OPHTHALMIC (EYE) DROPS,GEL 0.38 %	2	
<i>loteprednol etabonate ophthalmic (eye) drops,gel 0.5 %</i>	1	
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %</i>	1	
PREDNISOLONE ACETATE (PF) OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %	1	
<i>prednisolone acetate ophthalmic (eye) drops,suspension 1 %</i>	1	
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	1	
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)</i>	1	
SULFONAMIDES		
<i>sulacetamide sodium ophthalmic (eye) drops 10 %</i>	1	
<i>sulacetamide sodium ophthalmic (eye) ointment 10 %</i>	1	
SYMPATHOMIMETICS		
<i>apraclonidine ophthalmic (eye) drops 0.5 %</i>	1	
<i>brimonidine ophthalmic (eye) drops 0.15 %, 0.2 %</i>	1	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL OPHTHALMIC (EYE) DROPS 0.2-1 %	3	
<i>phenylephrine hcl ophthalmic (eye) drops 10 %, 2.5 %</i>	1	
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTIHISTAMINE & ANTIALLERGENIC AGENTS		
<i>adrenalin injection solution 1 mg/ml, 1 mg/ml (1 ml)</i>	2	MSD
ADYPHREN AMP II INJECTION KIT 1 MG/ML	3	
ADYPHREN II INJECTION KIT 1 MG/ML	3	

Drug Name	Drug Tier	Requirements / Limits
AUVI-Q INJECTION AUTO-INJECTOR 0.1 MG/0.1 ML	2	QL
<i>carbinoxamine maleate oral liquid 4 mg/5 ml</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>clemastine oral syrup 0.5 mg/5 ml</i>	1	
<i>clemastine oral tablet 2.68 mg</i>	1	
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	1	
<i>cyproheptadine oral tablet 4 mg</i>	1	
<i>desloratadine oral tablet 5 mg</i>	1	QL
<i>desloratadine oral tablet,disintegrating 2.5 mg, 5 mg</i>	1	QL
<i>dexchlorpheniramine maleate oral solution 2 mg/5 ml</i>	2	
<i>diphenhydramine hcl injection solution 50 mg/ml</i>	1	MSD
<i>diphenhydramine hcl injection syringe 50 mg/ml</i>	1	MSD
EPINEPHRINE HCL (PF) INJECTION SOLUTION 1 MG/ML (1 ML)	1	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	1	QL
<i>epinephrine injection solution 1 mg/ml</i>	1	MSD; QL
<i>epinephrine injection syringe 0.1 mg/ml</i>	1	MSD; QL
EPINEPHRINE INTRAVENOUS SOLUTION 0.1 MG/ML	1	MSD
<i>hydroxyzine hcl intramuscular solution 25 mg/ml, 50 mg/ml</i>	1	MSD
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1	
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1	
<i>hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg</i>	1	
<i>promethazine injection solution 25 mg/ml, 50 mg/ml</i>	1	MSD
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1	
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	1	
<i>promethegan rectal suppository 12.5 mg, 25 mg, 50 mg</i>	1	
QUZYTTIR INTRAVENOUS SOLUTION 10 MG/ML	2	MSD

Drug Name	Drug Tier	Requirements / Limits
SYMJEPI INJECTION SYRINGE 0.15 MG/0.3 ML, 0.3 MG/0.3 ML	3	QL
COUGH & COLD THERAPY		
<i>benzonatate oral capsule 100 mg, 150 mg, 200 mg</i>	1	
BROMFED DM ORAL SYRUP 2-30-10 MG/5 ML	2	
<i>brompheniramine-pseudoeph-dm oral syrup 2-30-10 mg/5 ml</i>	1	
HYCODAN (WITH HOMATROPINE) ORAL SYRUP 5-1.5 MG/5 ML	3	QL; Age Limit (Min 12 Years and Max 999 Years)
<i>hydrocodone-chlorpheniramine oral suspension,extended rel 12 hr 10-8 mg/5 ml</i>	1	QL; Age Limit (Min 12 Years and Max 999 Years)
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i>	1	QL; Age Limit (Min 12 Years and Max 999 Years)
<i>hydrocodone-homatropine oral tablet 5-1.5 mg</i>	1	QL; Age Limit (Min 12 Years and Max 999 Years)
<i>hydromet oral syrup 5-1.5 mg/5 ml</i>	1	QL; Age Limit (Min 12 Years and Max 999 Years)
OBREDON ORAL SOLUTION 2.5-200 MG/5 ML	3	QL; Age Limit (Min 12 Years and Max 999 Years)
<i>promethazine-codeine oral syrup 6.25-10 mg/5 ml</i>	1	QL; Age Limit (Min 12 Years and Max 999 Years)
<i>promethazine-dm oral syrup 6.25-15 mg/5 ml</i>	1	
<i>promethazine-phenyleph-codeine oral syrup 6.25-5-10 mg/5 ml</i>	1	QL; Age Limit (Min 12 Years and Max 999 Years)
<i>promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml</i>	1	
RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR 8-90-0.24 MG	2	
TUZISTRA XR ORAL SUSPENSION,EXTENDED REL 12 HR 14.7-2.8 MG/5 ML	3	QL; Age Limit (Min 12 Years and Max 999 Years)
PULMONARY AGENTS		
ACCOLATE ORAL TABLET 10 MG, 20 MG	3	
<i>acetylcysteine solution 100 mg/ml (10 %)</i>	1	
<i>acetylcysteine solution 200 mg/ml (20 %)</i>	1	MSD
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	2	PA; Specialty
ADRENALIN NASAL SOLUTION 1 MG/ML	3	

Drug Name	Drug Tier	Requirements / Limits
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	2	QL
<i>albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation</i>	1	
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	1	
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	1	
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	1	
<i>albuterol sulfate oral tablet extended release 12 hr 4 mg, 8 mg</i>	1	
<i>alyq oral tablet 20 mg</i>	1	PA; QL
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	2	PA; Specialty; QL
<i>aminophylline intravenous solution 250 mg/10 ml</i>	1	MSD
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	2	QL
<i>arformoterol inhalation solution for nebulization 15 mcg/2 ml</i>	1	QL
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	2	QL
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	2	QL
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	2	QL
ATROVENT HFA INHALATION HFA AEROSOL INHALER 17 MCG/ACTUATION	2	QL
<i>azelastine-fluticasone nasal spray,non-aerosol 137-50 mcg/spray</i>	1	ST; QL
BEVESPI AEROSPHERE INHALATION HFA AEROSOL INHALER 9-4.8 MCG	2	QL
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	2	PA; Specialty; QL
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	2	QL
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
CINRYZE INTRAVENOUS RECON SOLN 500 UNIT (5 ML)	2	PA; Specialty; QL
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	2	
<i>cromolyn inhalation solution for nebulization 20 mg/2 ml</i>	1	
DALIRESP ORAL TABLET 250 MCG, 500 MCG	2	QL
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 50-5 MCG/ACTUATION	2	QL
<i>epinephrine hcl nasal solution 1 mg/ml</i>	1	
ESBRIET ORAL CAPSULE 267 MG	2	PA; Specialty; QL
ESBRIET ORAL TABLET 267 MG, 801 MG	2	PA; Specialty; QL
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	2	PA; Specialty
FASENRA SUBCUTANEOUS SYRINGE 30 MG/ML	2	PA; Specialty
FLOVENT DISKUS INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 250 MCG/ACTUATION, 50 MCG/ACTUATION	2	QL
FLOVENT HFA INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION, 220 MCG/ACTUATION, 44 MCG/ACTUATION	2	QL
<i>flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)</i>	1	QL
<i>fluticasone propionate nasal spray,suspension 50 mcg/actuation</i>	1	QL
FLUTICASONE PROPION-SALMETEROL INHALATION AEROSOL POWDR BREATH ACTIVATED 113-14 MCG/ACTUATION, 232-14 MCG/ACTUATION, 55-14 MCG/ACTUATION	1	ST
<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1	QL
<i>formoterol fumarate inhalation solution for nebulization 20 mcg/2 ml</i>	1	QL
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT, 3,000 UNIT	3	PA; Specialty
<i>icatibant subcutaneous syringe 30 mg/3 ml</i>	2	PA; Specialty; QL

Drug Name	Drug Tier	Requirements / Limits
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE 62.5 MCG/ACTUATION	2	QL
<i>ipratropium bromide inhalation solution 0.02 %</i>	1	
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	1	
KALYDECO ORAL GRANULES IN PACKET 25 MG, 50 MG, 75 MG	2	PA; Specialty
KALYDECO ORAL TABLET 150 MG	2	PA; Specialty
<i>levabuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	1	
LONHALA MAGNAIR REFILL INHALATION SOLUTION FOR NEBULIZATION 25 MCG/ML	3	ST; QL
LONHALA MAGNAIR STARTER INHALATION SOLUTION FOR NEBULIZATION 25 MCG/ML	3	ST; QL
<i>metaproterenol oral syrup 10 mg/5 ml</i>	1	
<i>mometasone nasal spray,non-aerosol 50 mcg/actuation</i>	2	QL
<i>montelukast oral granules in packet 4 mg</i>	1	
<i>montelukast oral tablet 10 mg</i>	1	
<i>montelukast oral tablet,chewable 4 mg, 5 mg</i>	1	
NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	2	PA; Specialty; QL
NUCALA SUBCUTANEOUS RECON SOLN 100 MG	2	PA; Specialty; QL
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML, 40 MG/0.4 ML	2	PA; Specialty; QL
OFEV ORAL CAPSULE 100 MG, 150 MG	2	PA; Specialty; QL
OPSUMIT ORAL TABLET 10 MG	2	PA; Specialty; QL
ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG	2	PA; Specialty; QL
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	2	PA; Specialty; QL
ORLADEYO ORAL CAPSULE 110 MG, 150 MG	3	PA; Specialty
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	1	PA; Specialty; QL
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION, 90 MCG/ACTUATION	2	QL

Drug Name	Drug Tier	Requirements / Limits
PULMOZYME INHALATION SOLUTION 1 MG/ML	2	PA; Specialty; QL
QNASC NASAL HFA AEROSOL INHALER 40 MCG/ACTUATION, 80 MCG/ACTUATION	2	QL
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION, 80 MCG/ACTUATION	2	QL
REVATIO ORAL SUSPENSION FOR RECONSTITUTION 10 MG/ML	3	PA; Specialty; QL
RUCONEST INTRAVENOUS RECON SOLN 2,100 UNIT	2	PA; Specialty; QL
sajazir subcutaneous syringe 30 mg/3 ml	1	PA; QL
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	2	QL
<i>sildenafil (pulm.hypertension) intravenous solution 10 mg/12.5 ml</i>	1	PA; MSD; QL
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution 10 mg/ml</i>	1	PA; Specialty; QL
<i>sildenafil (pulm.hypertension) oral tablet 20 mg</i>	1	PA; QL
SINUVA SINUS IMPLANT 1,350 MCG	3	PA; QL
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	2	QL
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE 18 MCG	2	QL
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	2	QL
STRIVERDI RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	3	QL
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	2	QL
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N)	3	PA; Specialty; QL
<i>tadalafil (pulm. hypertension) oral tablet 20 mg</i>	1	PA; QL
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2 ML (150 MG/ML)	3	PA; Specialty; QL
TAKHZYRO SUBCUTANEOUS SYRINGE 300 MG/2 ML (150 MG/ML)	3	PA; Specialty; QL
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	1	
<i>terbutaline subcutaneous solution 1 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
theophylline oral elixir 80 mg/15 ml	1	
theophylline oral solution 80 mg/15 ml	1	
theophylline oral tablet extended release 12 hr 300 mg, 450 mg	1	
theophylline oral tablet extended release 24 hr 400 mg, 600 mg	1	
TICANASE NASAL KIT,SPRAY SUSPENSION AND SPRAY 50 MCG- 0.9 %	3	ST
TRACLEER ORAL TABLET 125 MG, 62.5 MG	3	PA; Specialty; QL
TRACLEER ORAL TABLET FOR SUSPENSION 32 MG	2	PA; Specialty; QL
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	2	QL
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	2	PA; Specialty; QL
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16 MCG (112)- 32 MCG (84), 16(112)-32(112) -48(28) MCG, 32 MCG, 32-48 MCG, 48 MCG, 64 MCG	2	PA; Specialty
TYVASO INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	2	PA; Specialty
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	2	PA; Specialty
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	2	PA; Specialty
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 10 MCG/ML, 20 MCG/ML	3	PA; Specialty
wixela inhuh inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	1	QL
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	2	PA; Specialty; QL
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML, 75 MG/0.5 ML	2	PA; Specialty; QL
XOPENEX CONCENTRATE INHALATION SOLUTION FOR NEBULIZATION 1.25 MG/0.5 ML	3	

Drug Name	Drug Tier	Requirements / Limits
XOPENEX INHALATION SOLUTION FOR NEBULIZATION 0.31 MG/3 ML, 0.63 MG/3 ML, 1.25 MG/3 ML	3	
YUPELRI INHALATION SOLUTION FOR NEBULIZATION 175 MCG/3 ML	2	QL
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	2	
<i>zileuton oral tablet, er multiphase 12 hr 600 mg</i>	2	
ZYFLO ORAL TABLET 600 MG	3	ST
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
<i>darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg</i>	1	ST
<i>fesoterodine oral tablet extended release 24 hr 4 mg, 8 mg</i>	1	ST
<i>flavoxate oral tablet 100 mg</i>	1	
GELNIQUE TRANSDERMAL GEL IN PACKET 10 % (100 MG/GRAM)	2	ST
MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON 8 MG/ML	2	ST
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG	2	ST
<i>oxybutynin chloride oral syrup 5 mg/5 ml</i>	1	
<i>oxybutynin chloride oral tablet 5 mg</i>	1	
<i>oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg</i>	1	
<i>solifenacin oral tablet 10 mg, 5 mg</i>	1	ST
<i>tolterodine oral capsule,extended release 24hr 2 mg, 4 mg</i>	1	ST
<i>tolterodine oral tablet 1 mg, 2 mg</i>	1	ST
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HR 4 MG, 8 MG	2	ST
<i>trospium oral capsule,extended release 24hr 60 mg</i>	1	ST
<i>trospium oral tablet 20 mg</i>	1	ST
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
<i>alfuzosin oral tablet extended release 24 hr 10 mg</i>	1	
<i>dutasteride oral capsule 0.5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg	1	ST
finasteride oral tablet 5 mg	1	
JALYN ORAL CAPSULE, ER MULTIPHASE 24 HR 0.5-0.4 MG	3	ST
silodosin oral capsule 4 mg, 8 mg	1	
tamsulosin oral capsule 0.4 mg	1	
CHOLINERGIC STIMULANTS		
bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	1	
MISCELLANEOUS UROLOGICALS		
alprostadiol injection solution 500 mcg/ml	1	MSD
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	2	PA; Specialty
ELMIRON ORAL CAPSULE 100 MG	2	
hyophen oral tablet 81.6-0.12-10.8 mg	1	
K-PHOS ORIGINAL ORAL TABLET,SOLUBLE 500 MG	2	
methen-sod phos-meth blue-hyos oral tablet 81.6-40.8-0.12 mg	1	
OXLUMO SUBCUTANEOUS SOLUTION 94.5 MG/0.5 ML	3	PA; MSD; Specialty
phosphasal oral tablet 81.6-10.8-40.8 mg	1	
potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)	1	
RENACIDIN IRRIGATION SOLUTION 1980.6 MG-59.4 MG-980.4MG/30ML	2	
urimar-t oral tablet 120-0.12-10.8 mg	1	
uro-458 oral tablet 81-10.8-40.8 mg	1	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE 10 MEQ (1,080 MG)	3	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE 15 MEQ	3	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG)	3	
urogesic-blue oral tablet 81.6-40.8-0.12 mg	1	
uro-mp oral capsule 118-10-40.8-36 mg	1	
uryl oral tablet 81.6-40.8-0.12 mg	2	
ustell oral capsule 120-0.12 mg	1	

Drug Name	Drug Tier	Requirements / Limits
URINARY ANESTHETICS		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	1	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
CALCIUM GLUC IN NACL, ISO-OSM INTRAVENOUS SOLUTION 1 GRAM/50 ML, 2 GRAM/100 ML	1	MSD
CALCIUM GLUCONATE IN WATER INTRAVENOUS SYRINGE 1 GRAM/10 ML (100 MG/ML)	1	MSD
<i>effer-k oral tablet, effervescent 25 meq</i>	1	
GALZIN ORAL CAPSULE 25 MG (ZINC), 50 MG (ZINC)	3	
<i>klor-con m10 oral tablet,er particles/crystals 10 meq</i>	1	
<i>klor-con m15 oral tablet,er particles/crystals 15 meq</i>	1	
<i>klor-con m20 oral tablet,er particles/crystals 20 meq</i>	1	
<i>lugols oral solution 5 %</i>	3	MSD
POTABA ORAL CAPSULE 500 MG	3	
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>	1	
<i>potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml</i>	1	
<i>potassium chloride oral packet 20 meq</i>	1	
<i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i>	1	
<i>potassium chloride oral tablet,er particles/crystals 10 meq, 15 meq, 20 meq</i>	1	
<i>sodium chloride 0.45 % intravenous parenteral solution 0.45 %</i>	1	MSD
<i>sodium chloride 3 % hypertonic intravenous parenteral solution 3 %</i>	1	MSD
<i>sodium chloride 5 % hypertonic intravenous parenteral solution 5 %</i>	1	MSD
<i>sodium chloride intravenous parenteral solution 2.5 meq/ml, 4 meq/ml</i>	1	MSD
<i>strong iodine oral solution 5 %</i>	1	MSD
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		

Drug Name	Drug Tier	Requirements / Limits
DOJOLVI ORAL LIQUID 8.3 KCAL/ML	2	PA
VITAMINS & HEMATINICS		
AZESCO ORAL TABLET 13 MG IRON- 1 MG	3	
<i>bal-care dha oral combo pack,tablet and cap,dr 27-1-430 mg</i>	1	
CITRANATAL B-CALM (FE GLUC) ORAL TABLETS, SEQUENTIAL 20 MG IRON-1 MG - 25 MG/25 MG	3	
<i>c-nate dha oral capsule 28 mg iron-1 mg -200 mg</i>	1	
<i>complete natal dha oral combo pack 29-1-250-200 mg</i>	2	
<i>completenate oral tablet,chewable 29 mg iron- 1 mg</i>	1	
CONCEPT DHA ORAL CAPSULE 35-1-200 MG	3	
DUET DHA BALANCED ORAL COMBO PACK 25 MG IRON-1 MG -267 MG-233 MG	3	
DUET DHA WITH OMEGA-3 ORAL COMBO PACK 25 MG IRON-1 MG -400 MG	3	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	
FERAHHEME INTRAVENOUS SOLUTION 510 MG/17 ML (30 MG/ML)	3	MSD
<i>ferrous sulfate oral liquid 300 mg (60 mg iron)/5 ml</i>	1	
<i>ferumoxytol intravenous solution 510 mg/17 ml (30 mg/ml)</i>	1	
<i>fluoride (sodium) oral drops 0.5 mg (1.1 mg sod.fluorid)/ml</i>	1	ACA; Age Limit (Max 6 Years)
<i>fluoride (sodium) oral tablet,chewable 0.25 mg(0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)</i>	1	ACA; Age Limit (Max 6 Years)
<i>folic acid oral tablet 1 mg, 400 mcg, 800 mcg</i>	1	ACA
<i>folivane-ob oral capsule 85-1 mg</i>	1	
INFED INJECTION SOLUTION 50 MG/ML	3	MSD
<i>kpn oral tablet</i>	1	
<i>m-natal plus oral tablet 27 mg iron- 1 mg</i>	1	ACA
MONOFERRIC INTRAVENOUS SOLUTION 100 MG IRON/ML	3	MSD
<i>mynatal oral capsule 65 mg iron- 1 mg</i>	1	
<i>mynatal plus oral tablet 65 mg iron- 1 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
mynatal-z oral tablet 65 mg iron- 1 mg	1	
NATACHEW (FE BIS-GLYCINATE) ORAL TABLET,CHEWABLE 28 MG IRON -1 MG	3	
NESTABS ABC ORAL COMBO PACK 32 MG IRON-1 MG -120 MG-180 MG	3	
NESTABS DHA ORAL COMBO PACK 32 MG IRON- 1,000 MCG-230MG	3	
NESTABS ORAL TABLET 32-1,000 MG-MCG	3	
newgen oral tablet 32-1,000 mg-mcg	1	
OB COMPLETE ONE ORAL CAPSULE 40-10-1-300 MG	3	
OB COMPLETE PETITE ORAL CAPSULE 35 MG IRON-5 MG IRON-1 MG	3	
OB COMPLETE PREMIER ORAL TABLET 30-20-1 MG	3	
OB COMPLETE WITH DHA ORAL CAPSULE 30 MG IRON-10 MG IRON-1 MG	3	
pnv-dha oral capsule 27 mg iron-1 mg -300 mg	1	
pnv-omega oral capsule 28-1-300 mg	1	
pnv-select oral tablet 27-1 mg	1	
pr natal 400 ec oral combo pack,tablet and cap,dr 29-1-400 mg	1	
pr natal 400 oral combo pack 29-1-400 mg	1	
pr natal 430 ec oral combo pack,tablet and cap,dr 29-1-430 mg	1	
pr natal 430 oral combo pack 29 mg iron-1 mg -430 mg	1	
PREGENNA ORAL TABLET 20 MG IRON- 1 MG	3	
prena1 chew oral tablet,chew,ir - dr,biphase 1.4 mg	1	
prena1 pearl oral capsule,ir - delay rel,biphase 30-1.4-200 mg	1	
prena1 true oral combo pack 30 mg iron- 1.4 mg-300 mg	1	
PRENATA ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG	3	
prenatabs fa oral tablet 29-1 mg	1	
prenatabs rx oral tablet 29 mg iron- 1 mg	1	
prenatal 19 oral tablet 29 mg iron- 1 mg	1	

Drug Name	Drug Tier	Requirements / Limits
PRENATAL ORAL TABLET 28-800 MG-MCG	3	
<i>prenatal plus (calcium carb) oral tablet 27 mg iron- 1 mg</i>	1	\$0 Copay; ACA
PRENATAL PLUS DHA ORAL COMBO PACK 27 MG IRON-1 MG -312 MG-250 MG	3	
<i>prenatal plus oral tablet 29 mg iron- 1 mg</i>	1	
PRENATAL PLUS VITAMIN-MINERAL ORAL TABLET 27 MG IRON- 1 MG	3	
<i>prenatal vitamin oral tablet 27 mg iron- 0.8 mg</i>	1	
<i>prenatal vitamin plus low iron oral tablet 27 mg iron- 1 mg</i>	1	ACA
<i>prenatal vitamin with minerals oral tablet 28 mg iron- 800 mcg</i>	1	
<i>prenatal-u oral capsule 106.5-1 mg</i>	1	
PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE 18 MG IRON-1 MG -300 MG	3	
PRENATE ELITE (IRON ASP GLYC) ORAL TABLET 20 MG IRON- 1 MG	3	
PRENATE ENHANCE ORAL CAPSULE 28 MG IRON- 1 MG-400 MG	3	
PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE 18-1-350 MG	3	
PRENATE PIXIE ORAL CAPSULE 10 MG IRON- 1 MG-200 MG	3	
PRENATE RESTORE ORAL CAPSULE 27 MG IRON- 1 MG-400 MG	3	
PRENATE STAR ORAL TABLET 20 MG IRON- 1 MG	3	
PRIMACARE ORAL CAPSULE 30-1-300 MG	3	
PROVIDA OB ORAL CAPSULE 40 MG IRON- 1.25 MG	3	
SELECT-OB + DHA ORAL COMBO PACK 29 MG IRON-1 MG -250 MG	3	
<i>se-natal 19 chewable oral tablet, chewable 29 mg iron- 1 mg</i>	1	
<i>se-natal-19 oral tablet 29 mg iron- 1 mg</i>	3	
<i>taron-c dha oral capsule 35-1-200 mg</i>	1	
TRICARE ORAL TABLET 27 MG IRON- 1 MG	3	
TRIFERIC HEMODIALYSIS POWDER IN PACKET 272 MG IRON	3	MSD

Drug Name	Drug Tier	Requirements / Limits
TRIFERIC HEMODIALYSIS SOLUTION 27.2 MG IRON/5 ML	2	MSD
<i>trinatal rx 1 oral tablet 60 mg iron-1 mg</i>	2	
<i>trinate oral tablet 28 mg iron- 1 mg</i>	1	
TRINAZ ORAL TABLET 12-1 MG	3	
TRISTART DHA ORAL CAPSULE 31 MG IRON- 1 MG-200 MG	3	
VENOFER INTRAVENOUS SOLUTION 100 MG IRON/5 ML, 200 MG IRON/10 ML, 50 MG IRON/2.5 ML	3	MSD
<i>virt-nate dha oral capsule 28 mg iron-1 mg -200 mg</i>	1	
<i>virt-pn dha oral capsule 27 mg iron-1 mg -300 mg</i>	1	
VITAFOL FE PLUS ORAL CAPSULE 90 MG IRON- 1 MG-200 MG	3	
VITAFOL ULTRA ORAL CAPSULE 29 MG IRON- 1 MG-200 MG	3	
VITAFOL-OB ORAL TABLET 65-1 MG	3	
VITAFOL-ONE ORAL CAPSULE 29 MG IRON- 1 MG-200 MG	3	
VITAMED MD ONE RX ORAL CAPSULE 30 MG IRON-1MG -200 MG	3	
VITAMEDMD REDICHEW RX ORAL TABLET,CHEW,IR - DR,BIPHASE 1.4 MG	3	
VITAPEARL ORAL CAPSULE,IR - DELAY REL,BIPHASE 30-1.4-200 MG	3	
VITATRUE ORAL COMBO PACK 30 MG IRON- 1.4 MG-300 MG	3	
<i>westab plus oral tablet 27 mg iron- 1 mg</i>	1	ACA
ZALVIT ORAL TABLET 13 MG IRON- 1 MG	3	
<i>zatean-pn dha oral capsule 27 mg iron-1 mg -300 mg</i>	1	
<i>zatean-pn plus oral capsule 28-1-300 mg</i>	1	
<i>zingiber oral tablet 1.2 mg-40 mg- 124.1 mg-100 mg</i>	1	
ZIPHEX ORAL TABLET 13 MG IRON- 1 MG	3	

Index

A	
abacavir	4
abacavir-lamivudine	4
ABELCET	3
ABILIFY MAINTENA.....	49
abiraterone	22
acamprosate	86
acarbose	102
ACCOLATE.....	146
ACCU-CHEK COMBO SYSTEM	94
accutane	78
ACE AEROSOL CLOUD ENHANCER	92
acebutolol	59
acetaminophen-caff- dihydrocod.....	38
acetaminophen-codeine	38
acetazolamide	141
acetazolamide sodium	141
acetic acid	86, 91
acetylcysteine	147
acitretin.....	75
ACTEMRA	123, 124
ACTEMRA ACTPEN.....	123
ACTHIB (PF).....	115
ACTIMMUNE	115
ACULAR	141
ACULAR LS.....	141
acyclovir	4, 83
acyclovir sodium	4
ADACEL(TDAP ADOLESN/ADULT)(PF)	116
ADAKVEO	22
adapalene	78, 79
ADAPALENE	79
adefovir.....	4
ADEMPAS	147
adrenalin	145
ADRENALIN.....	147
adult aspirin regimen	46
ADVAIR HFA	147
ADVANCED ALLERGY COLLECT KIT	83
ADVATE	66
ADYNOVATE.....	66
ADYPHREN AMP II.....	145
ADYPHREN II	145
ADZENYS XR-ODT	49
AEMCOLO	12
AEROCHAMBER MINI	92
AEROCHAMBER PLUS FLOW-VU.....	92
AEROCHAMBER PLUS Z STAT	92
AEROTRACH PLUS.....	92
AEROVENT PLUS.....	93
AFINITOR	22
AFINITOR DISPERZ	22
afirmelle.....	130
AFLURIA QD 2022-23(3YR UP)(PF)	116
AFLURIA QUAD 2022- 2023(6MO UP).....	116
AFREZZA	96
AFSTYLA	66
after pill	130
AFTERA	130
AGRYLIN	86
AIMOVIG AUTOINJECTOR	35
AJOVY AUTOINJECTOR..	35
AJOVY SYRINGE.....	35
ak-poly-bac	137
AKTEN (PF)	140
AKYNZEO (FOSNETUPITANT)	106
ALA-QUIN	82
albendazole	12
albuterol sulfate	147
alclometasone	83
ALDURAZYME	98
alendronate	123
alfuzosin	153
ALINIA	12
aliskiren	59
ALKERAN	22
allopurinol	123
allopurinol sodium.....	123
ALLZITAL.....	38
almotriptan malate	35
ALOCRIL.....	140
ALOMIDE.....	140
aloprim.....	123
alosetron	106
ALPHANATE	66
ALPHANINE SD	66
alprazolam	50
alprazolam intensol.....	49
ALPROLIX	66
alprostadiol	153
ALREX.....	143
altacaine	140
ALTAFLUOR BENOX.....	140
altavera (28).....	130
alvimopan	106
alyacen 1/35 (28)	130
alyacen 7/7/7 (28)	130
alyq	147
amabelz.....	126
amantadine hcl.....	4
ambrisentan.....	147
amcinonide	83
AMELUZ	77
amethia	130
amethyst (28)	130
amikacin	12
amiloride	59
amiloride-hydrochlorothiazide	59
aminocaproic acid.....	66
aminophylline	147
amiodarone	58
AMITIZA	106
amitriptyline	50
amitriptyline-chlordiazepoxide	50
amlodipine	59
amlodipine-atorvastatin	72
amlodipine-benazepril	59
amlodipine-olmesartan	59
amlodipine-valsartan	59
amlodipine-valsartan-hcthiazid	59
AMMONUL	87
amnesteem	79
AMONDYS-45.....	36
amoxapine.....	50
amoxicil-clarithromy-lansopraz	112
amoxicillin	16, 17
amoxicillin-pot clavulanate ..	17
AMPHADASE	87
amphetamine sulfate	50
amphotericin b	3
amphotericin b liposome	3

ampicillin.....	17	aspir-trin	46	aztreonam	13
ampicillin sodium.....	17	ASTAGRAF XL.....	22	AZULFIDINE	106
ampicillin-sulbactam	17	atazanavir.....	4	AZULFIDINE EN-TABS ..	106
anagrelide	87	atenolol	59	azurette (28).....	131
ANA-LEX KIT	106	atenolol-chlorthalidone.....	59	B	
anastrozole.....	22	ATGAM	116	bacitracin	13, 137
ANDEXXA	66	atomoxetine	50	bacitracin-polymyxin b.....	137
ANDRODERM	98	atorvastatin	72	baclofen	37
ANGELIQ	126	atovaquone.....	13	bal-care dha	155
ANNOVERA	129	atovaquone-proguanil.....	13	balsalazide	106
ANORO ELLIPTA	147	atracurium.....	37	BALVERSA	22
anucort-hc.....	106	ATRAPRO HYDROGEL	77	balziva (28).....	131
ANZEMET	106	ATROOPEN.....	86	BAQSIMI	94
APIDRA SOLOSTAR U-100 INSULIN	96	atropine	104, 139	BARACLUDE.....	4
APIDRA U-100 INSULIN..	96	ATROPINE	104, 139	BARHEMSYS.....	106
apomorphine	34	ATROPINE IN 0.9 % SOD CHLORIDE.....	104	BASAGLAR KWIKPEN U- 100 INSULIN	96
apraclonidine	144	ATROVENT HFA	147	BAXDELA	18
aprepitant.....	106	AUBAGIO.....	114	bayer aspirin	46
APRETUDE	4	aubra	130	bayer low dose aspirin	46
apri.....	130	aubra eq	130	BD ULTRA-FINE NANO PEN NEEDLE	94
APTIVUS	4	aurovela 1.5/30 (21)	131	BD VERITOR SYSTEM SARS-COV-2	93
aqua care sodium chloride....	87	aurovela 1/20 (21)	131	belladonna alkaloids-opium	104
aqua care sterile water	87	aurovela 24 fe	131	BELSOMRA	50
ARAKODA	12	aurovela fe 1.5/30 (28)	131	benazepril	59
ARALAST NP	87	aurovela fe 1-20 (28)	131	benazepril-hydrochlorothiazide	59
aranelle (28).....	130	AURYXIA.....	106	BENEFIX	67
ARAVA.....	124	AUSTEDO	36	BENLYSTA	124
ARCALYST	115	AUTOSOFT 30	94	benzepro	79
arformoterol.....	147	AUTOSOFT 90	94	BENZNIDAZOLE	13
ARGATROBAN	67	AUTOSOFT XC INFUSION SET 23	94	benzonataate	146
argatroban in 0.9 % sod chlor	67	AUVI-Q	145	benzoyl peroxide	79
ARGATROBAN IN NACL (ISO-OS)	67	AVAR-E LS	79	benztropine	34
ARIKAYCE	13	AVELOX IN NACL (ISO- OSMOTIC).....	18	bepotastine besilate	140
aripiprazole.....	50	aviane.....	131	BESIVANCE	137
ARISTADA.....	50	avidoxy	19	BESREMI	115
ARISTADA INITIO	50	avo cream	77	BETADINE OPHTHALMIC PREP.....	137
ARIXTRA	67	AVONEX	114	betaine.....	106
armodafinil	50	AVYCAZ	9	betamethasone acet,sod phos	91
ARMOUR THYROID	103	AYGESTIN	126	betamethasone dipropionate	.83
ARNUITY ELLIPTA.....	147	ayuna	131	BETAMETHASONE SOD PHOSPH-WATER	91
ascomp with codeine	38	AYVAKIT	22	betamethasone valerate.....	83
asenapine maleate.....	50	AZASITE	137	betamethasone, augmented..	83, 84
ashlyna.....	130	azathioprine	22	BETASERON.....	114
ASMANEX HFA	147	azathioprine sodium	22	betaxolol	59, 138
ASMANEX TWISTHALER	147	azelaic acid	79	bethanechol chloride.....	153
aspirin.....	46	azelastine	90, 140		
aspirin-dipyridamole	67	azelastine-fluticasone	147		
ASPIRIN-OMEPRAZOLE ..	67	AZESCO	155		
		azithromycin.....	11, 12		

BETHKIS	13
BETIMOL	138
BETOPTIC S.....	138
BEVESPI AEROSPHERE.	148
bexarotene	22
BEXSERO.....	116
bicalutamide	22
BICILLIN C-R	17
BICILLIN L-A	17
BIJUVA.....	126
BIKTARVY	4
BILTRICIDE.....	13
bimatoprost.....	141
BINAXNOW COVID-19 AG CARD	93
bisoprolol fumarate	59
bisoprolol-hydrochlorothiazide	59
bivalirudin	67
BIVALIRUDIN.....	67
BIVIGAM	116
blisovi 24 fe.....	131
blisovi fe 1.5/30 (28)	131
blisovi fe 1/20 (28)	131
BOOSTRIX TDAP	116
bosentan.....	148
BOSULIF	22
BOTOX	116
bp 10-1.....	79
BRAFTOVI.....	22
BREATHERITE MDI SPACER.....	93
BREO ELLIPTA	148
bretylium tosylate.....	58
BREVIBLOC	60
BREVIBLOC IN NACL (ISO- OSM).....	60
briellyn	131
BRILINTA	67
brimonidine	144
BRIMONIDINE- DORZOLAMIDE (PF) ..	142
brimonidine-timolol	142
BRINEURA	98
brinzolamide	142
BRIVIACT	29
BROMFED DM	146
bromfenac	141
bromocriptine	34
brompheniramine-pseudoeph- dm.....	146
BROMSITE.....	141
BRUKINSA.....	22
budesonide.....	106, 107, 148
bumetanide	60
buprenorphine	39
buprenorphine hcl.....	38
buprenorphine-naloxone	46
bupropion hcl.....	50
BUPROPION HCL	50
bupropion hcl (smoking deter)	89
buspirone	51
butalbital compound w/codeine	39
butalbital-acetaminop-caf-cod	39
butalbital-acetaminophen	39
butalbital-acetaminophen-caff	39
butalbital-aspirin-caffeine	39
butorphanol.....	46
BYFAVO.....	51
BYLVAY	107
C	
CABENUVA.....	5
cabergoline	98
CABLIVI.....	67
CABOMETYX.....	22
caffeine citrate	87
calcipotriene	75
calcipotriene-betamethasone	75
calcitonin (salmon)	98
calcitriol.....	75, 98
calcium acetate(phosphat bind)	107
CALCIUM GLUC IN NACL, ISO-OSM.....	154
CALCIUM GLUCONATE IN WATER.....	154
CALDOLOR	46
camila	126
camrese	131
camrese lo.....	131
CANASA.....	107
CANCIDAS.....	3
candesartan	60
candesartan-hydrochlorothiazid	60
capecitabine	22
CAPRELSA.....	22
captopril	60
captopril-hydrochlorothiazide	60
CARAFATE	112
carbamazepine	29
CARBATROL.....	30
carbidopa	34
carbidopa-levodopa	34
carbidopa-levodopa- entacapone	34
carbinoxamine maleate	145
CARDURA XL	60
carglumic acid	87
carisoprodol	37
CARNITOR.....	87
carteolol	138
cartia xt	60
carvedilol	60
carvedilol phosphate	60
CASIRIVIMAB- IMDEVIMAB.....	5
caspofungin.....	3
cataflam	46
CAYA CONTOURED	126
CAYSTON	13
caziant (28)	131
cefaclor	9
cefadroxil	9
cefazolin	10
CEFAZOLIN	10
cefazolin in 0.9% sod chloride	9
cefazolin in dextrose (iso-os)..	9
CEFAZOLIN IN DEXTROSE (ISO-OS).....	10
cefazolin in dextrose 5 %	10
CEFAZOLIN IN STERILE WATER	10
cefdinir	10
cefditoren pivoxil	10
cefepime	10
CEFEPIME	10
CEFEPIME IN DEXTROSE 5 %	10
cefepime in dextrose,iso-osm	10
cefixime	10
CEFOTAN	10
cefotaxime	10
cefotetan	10
CEFOTETAN IN DEXTROSE, ISO-OSM...10	10
cefoxitin	11
cefoxitin in dextrose, iso-osm	10
cefpodoxime	11

cefprozil	11	CIMZIA	107	COARTEM.....	13
ceftazidime	11	CIMZIA POWDER FOR		COCAINE	81
CEFTAZIDIME IN D5W	11	RECONST	107	codeine sulfate	39
ceftriaxone	11	cinacalcet	98	codeine-butalbital-asa-caff	39
CEFTRIAXONE	11	CINRYZE.....	148	colchicine.....	123
ceftriaxone in dextrose,iso-os		CINVANTI.....	107	COLCHICINE	123
.....	11	CIPRO HC.....	91	colesevelam	72
cefuroxime axetil.....	11	ciprofloxacin.....	18	colestipol.....	72
cefuroxime sodium.....	11	ciprofloxacin hcl....	18, 91, 138	colistin (colistimethate na)	13
celecoxib.....	46	ciprofloxacin in 5 % dextrose		COMBIPATCH.....	126
CELONTIN.....	30	.....	18	COMBIVENT RESPIMAT	148
cem-urea	77	ciprofloxacin-dexamethasone		COMBIVIR	5
cephalexin.....	11	.....	91	COMETRIQ	23
CEPROTIN (BLUE BAR) ...	67	CIPROFLOXACIN-		COMIRNATY TRIS	
CEPROTIN (GREEN BAR)	67	FLUOCINOLONE	91	VACCINE(PF)	116
CEQUA	140	cisatracurium	37	COMPACT SPACE	
CEQUR SIMPLICITY	94	citalopram	51	CHAMBER	93
CERACADE	77	CITRANATAL B-CALM (FE		complete natal dha	155
CERAMAX.....	77	GLUC)	155	completenate	155
CERDELGA.....	98	claravis.....	79	compro	107
CEREBYX	30	clarithromycin	12	COMTAN	34
CEREZYME	98	cleansing wash.....	79	CONCEPT DHA	155
CERVIDIL	129	clemastine	145	constulose	107
CETROTIDE.....	98	CLENPIQ	107	CONTOUR TEST STRIPS ..	92
cevimeline	87	CLEOCIN.....	13, 129	COPIKTRA	23
charlotte 24 fe.....	131	clindamycin hcl	13	CORIFACT	67
chateal (28)	131	CLINDAMYCIN IN 0.9 %		CORLANOR	74
chateal eq (28)	131	SOD CHLOR	13	corti-sav	81
CHEMET	87	clindamycin in 5 % dextrose	13	COSOPT (PF).....	142
CHENODAL.....	107	clindamycin pediatric	13	COTELLIC	23
children's aspirin.....	46	clindamycin phosphate ..	13, 79,		
chloramphenicol sod succinate		129	covaryx	126	
.....	13	clindamycin-benzoyl peroxide		covaryx h.s.....	126
chlordiazepoxide hcl	51	.....	79	COVID19 TEST ADM.BY	
chlordiazepoxide-clidinium	104	clindamycin-tretinoin	79	PHARMACIST	93
chlorhexidine gluconate	90	clobazam.....	30	COVID-19 TEST SPECIMEN	
chloroquine phosphate.....	13	clobetasol	84	COLLECT	93
chlorothiazide sodium	60	clobetasol-emollient	84	CREON.....	107
chlorpromazine.....	51	clomid	98	CRESEMBIA.....	3
chlorthalidone	60	clomiphene citrate	98	cromolyn	107, 140, 148
chlorzoxazone.....	37	clomipramine	51	crotan	86
CHOLBAM	107	clonazepam	30	cryselle (28)	131
cholestyramine (with sugar) .	72	clonidine	60	CRYSVITA	98
cholestyramine light	72	clonidine hcl	51, 60	CUE COVID-19 HOME TEST	
choline,magnesium salicylate		clopидogrel	67	.....	93
.....	46	clorazepate dipotassium	51	CUVITRU	116
ciclopirox.....	82	clotrimazole	3	cyclobenzaprine	37
cidofovir	5	clotrimazole-betamethasone.	82	CYCLOGYL	139
cilostazol.....	67	clozapine.....	51	CYCLOMYDRIL.....	144
CIMDUO.....	5	CLOZARIL	51	cyclopentolate	139
cimetidine	112	c-nate dha	155	CYCLOPEN-TROPIC-	
cimetidine hcl	112	COAGADEX.....	67	PHENYLEPH-WATR....	139

CYCLOPENT-TROPIC-
 PHEN-KETR-WAT 139
 cyclophosphamide 23
 CYCLOPHOSPHAMIDE 23
 CYCLOP-TROP-PROPA-
 PHEN-KET-WAT 139
 CYCLOSERINE 13
 cyclosporine 23
 CYCLOSPORINE IN
 KLARITY 140
 cyclosporine modified 23
 cyproheptadine 145
 cyred 131
 cyred eq 131
 CYSTADROPS 140
 CYSTAGON 153
 CYSTARAN 140
 CYTOTEC 112
D
 dalfampridine 36
 DALIRESP 148
 DALVANCE 13
 danazol 98
 DANTRIUM 37
 dantrolene 37
 dapsoe 13, 79
 DAPTACEL (DTAP
 PEDIATRIC) (PF) 116
 DAPTOMYCIN 13
 DARAPRIM 13
 darifenacin 152
 dasetta 1/35 (28) 131
 dasetta 7/7/7 (28) 131
 DAURISMO 23
 daysee 131
 DEBACTEROL 90
 debilitane 127
 deferasirox 87
 deferiprone 87
 DEFITELIO 67
 DELZICOL 107
 demeclocycline 19
 DEMSER 60
 DEPAKOTE 30
 DEPAKOTE ER 30
 DEPAKOTE SPRINKLES .. 30
 DEPEN TITRATABS 124
 DEPO-ESTRADIOL 127
 DEPO-PROVERA 127
 DEPO-SUBQ PROVERA 104
 127
 DESCovy 5

desipramine 51
 desloratadine 145
 desmopressin 98, 99
 DESMOPRESSIN 98
 desog-e.estriadiol/e.estriadiol
 132
 desogestrel-ethynodiol
 132
 desonide 84
 desoximetasone 84
 desvenlafaxine succinate 51
 dexamethasone 91
 dexamethasone intensol 91
 dexamethasone sodium
 phosphate 143
 dexchlorpheniramine maleate
 145
 DEXCOM G6 RECEIVER .. 94
 DEXCOM G6 SENSOR 94
 DEXCOM G6
 TRANSMITTER 94
 DEXERYL 77
 DEXLANSOPRAZOLE 112
 dexmethylphenidate 51
 dexrazoxane hcl 21
 dextroamphetamine sulfate... 51
 dextroamphetamine-
 amphetamine 52
 DIACOMIT 30
 DIASTAT 30
 DIASTAT ACUDIAL 30
 diazepam 30, 52
 diazepam intensol 52
 diazoxide 94
 DICLOFENAC EPOLAMINE
 46
 diclofenac potassium 46
 diclofenac sodium.... 46, 47, 77,
 141
 diclofenac-misoprostol 47
 DICLOFONO 47
 dicloxacillin 17
 dicyclomine 105
 didanosine 5
 DIFICID 12
 diflunisal 47
 difluprednate 143
 digitek 66
 digox 66
 digoxin 66
 dihydroergotamine 35
 DILANTIN 30
 DILANTIN EXTENDED 30
 DILANTIN INFATABS 30
 DILANTIN-125 30
 DILAUDID (PF) 39
 diltiazem 60, 61
 dilt-xr 61
 dimenhydrinate 107
 dimethyl fumarate 114
 DIOVAN 61
 DIOVAN HCT 61
 DIPENTUM 107
 diphenhydramine hcl 145
 diphenoxylate-atropine 105
 dipyridamole 67
 DISALCID 47
 diskets 39
 disopyramide phosphate 58
 disulfiram 87
 DIURIL IV 61
 divalproex 30
 DIVIGEL 127
 dofetilide 58
 DOJOLVI 155
 dolishale 132
 donepezil 36
 DOPTELET (15 TAB PACK)
 67
 dorzolamide 142
 DORZOLAMIDE (PF) 142
 dorzolamide-timolol 142
 dorzolamide-timolol (pf) ... 142
 DORZOLAMIDE-TIMOLOL
 (PF) 142
 dotti 127
 DOVATO 5
 doxazosin 61
 doxepin 52
 doxercalciferol 99
 doxy-100 19
 doxycycline hyolate 19
 doxycycline monohydrate ... 19
 drithocreme hp 75
 dronabinol 107
 droperidol 107
 drospirenone-e.estriadiol-lm.fa
 132
 drospirenone-ethynodiol
 132
 DROXIA 23
 droxidopa 87
 DUAVEE 127
 DUET DHA BALANCED . 155

DUET DHA WITH OMEGA-3	52
.....	155
DULERA	148
duloxetine	52
DUOBRII	84
DUODOTE	86
DUPIXENT PEN	77
DUPIXENT SYRINGE	77
duramorph (pf)	39
dutasteride	153
dutasteride-tamsulosin	153
DYRENIUM	61
DYSPORT	116
E	
e.e.s. 400	12
EASIVENT HOLDING	
CHAMBER	93
econazole	82
econtra ez	132
econtra one-step	132
ecotrin	47
EDARBI	61
EDARBYCLOR	61
EDECRIN	61
EDLUAR	52
ed-spaz	105
EDURANT	5
eemt	127
eemt hs	127
efavirenz	5
efavirenz-lamivu-tenofov disop	5
.....	5
effer-k	154
EGRIFTA SV	114
ELAPRASE	99
eletriptan	35
ELIGARD	23
ELIGARD (3 MONTH)	23
ELIGARD (4 MONTH)	23
ELIGARD (6 MONTH)	23
elinest	132
ELIQUIS	68
ELIQUIS DVT-PE TREAT	
30D START	68
ELITEK	21
ELLA	132
ELMIRON	153
ELOCTATE	68
eluryng	129
EMCYT	23
EMGALITY PEN	35
EMGALITY SYRINGE	35
EMSAM	52
emtricitabine	5
emtricitabine-tenofovir (tdf)	5
EMTRIVA	5
emulsion sb	77
EMVERM	14
enalapril maleate	61
enalaprilat	61
enalapril-hydrochlorothiazide	61
.....	61
ENBREL	124
ENBREL MINI	124
ENBREL SURECLICK	124
ENDARI	87
endocet	39
ENGERIX-B (PF)	116
ENGERIX-B PEDIATRIC	
(PF)	116
enoxaparin	68
enpresso	132
enskyce	132
ENSPRYNG	23
entacapone	34
entecavir	5
ENTEREG	107
ENTRESTO	74
ENTYVIO	107
enulose	107
ENVARSUS XR	23
EPCLUSA	5
EPIDIOLEX	30
epinastine	140
epinephrine	145
EPINEPHRINE	145
epinephrine hcl	148
EPINEPHRINE HCL (PF)	145
epitol	31
EPIVIR	5
EPIVIR HBV	5
eplerenone	61
epoprostenol	61
epoprostenol (glycine)	61
eprosartan	61
EPZICOM	5
EQUETRO	31
ERAXIS(WATER DILUENT)	
.....	3
ergocalciferol (vitamin d2)	155
ergoloid	52
ERGOMAR	35
ergotamine-caffeine	35
ERIVEDGE	23
ERLEADA	23
erlotinib	23
errin	127
ERTACZO	82
ertapenem	14
ery pads	79
ery-tab	12
ERYTHROCIN	12
erythrocin (as stearate)	12
erythromycin	12, 138
erythromycin ethylsuccinate	12
erythromycin lactobionate	12
erythromycin with ethanol	79
erythromycin-benzoyl peroxide	79
.....	79
ESBRIET	148
escitalopram oxalate	52
esmolol	61
esmolol in nacl (iso-osm)	61
ESMOLOL IN STERILE	
WATER	61
esomeprazole magnesium	112
esomeprazole sodium	112
ESPEROCT	68
estarryla	132
estazolam	52
estradiol	127
estradiol valerate	127
estradiol-norethindrone acet	127
.....	127
ESTRING	127
estrogens-methyltestosterone	127
.....	127
eszopiclone	52
ethacrynat sodium	62
ethacrylic acid	62
ethambutol	14
ethosuximide	31
ethyl chloride	81
ethynodiol diac-eth estradiol	132
.....	132
ETHYOL	21
etodolac	47
etonogestrel-ethinyl estradiol	129
.....	129
etoposide	23
etravirine	5
EUCRISA	77
EUFLEXXA	47
EURAX	86
euthyrox	103

EVERLYWELL COVID19	
HOM COLLECT.....	93
everolimus (antineoplastic) ..	23
everolimus (immunosuppressive)	24
EVERSENSE SENSOR-	
HOLDER.....	94
EVISTA.....	123
EVOXAC	87
EVRYSDI.....	36
EVUSHIELD (EUA).....	5
exemestane	24
EXJADE.....	87
EXKIVITY	24
ezetimibe	72
ezetimibe-simvastatin.....	72
F	
FABRAZYME	99
FACTIVE	18
falmina (28).....	132
famciclovir	6
famotidine.....	112
famotidine (pf).....	112
FANAPT	52
FARESTON	24
FARXIGA	102
FARYDAK.....	24
FASENRA.....	148
FASENRA PEN	148
FC2 FEMALE CONDOM .	126
febuxostat	123
FEIBA NF	68
felbamate	31
felodipine.....	62
FEMCAP	126
femynor	132
fenofibrate	73
FENOFIBRATE.....	73
fenofibrate micronized	73
fenofibrate nanocrystallized.	73
fenofibric acid	73
fenofibric acid (choline)	73
fenoprofen	47
FENSOLVI.....	24
fentanyl.....	40
FENTANYL (PF)-	
BUPIVACAINE-NACL..	39
fentanyl citrate.....	40
fentanyl citrate (pf).....	40
FENTANYL CITRATE (PF)	
.....	40
fentanyl citrate (pf)-0.9%nacl	
.....	40
FENTANYL CITRATE (PF)-	
0.9%NACL.....	40
FENTANYL-	
ROPIVACAINE-NACL	
(PF).....	40
FERAHEME	156
FERRIPROX	87
FERRIPROX (2 TIMES A	
DAY)	87
ferrous sulfate	156
ferumoxytol	156
fesoterodine	152
FETROJA	11
FETZIMA.....	52
FIBRYGA	68
finasteride	153
FINTEPLA	31
finzala	132
flavoxate	152
FLEBOGAMMA DIF	117
flecainide	58
FLEXICHAMBER	93
FLOLAN	62
FLOVENT DISKUS	148
FLOVENT HFA.....	148
FLUAD QUAD 2022-23(65Y	
UP)(PF)	117
FLUARIX QUAD 2022-2023	
(PF).....	117
FLUBLOK QUAD 2022-2023	
(PF).....	117
FLUCELVAX QUAD 2022-	
2023	117
FLUCELVAX QUAD 2022-	
2023 (PF).....	117
fluconazole	3
fluconazole in nacl (iso-osm).3	
flucytosine	3
fludrocortisone.....	91
FLULAVAL QUAD 2022-	
2023 (PF).....	117
flumazenil	52
FLUMIST QUAD 2022-2023	
.....	117
flunisolide	148
fluocinolone	84
fluocinolone acetonide oil ...	91
fluocinolone and shower cap	84
fluocinonide	84
fluocinonide-e.....	84
fluorescein-proparacaine	140
fluoride (sodium)	156
fluorometholone	144
fluorouracil	77
FLUOROURACIL	77
fluoxetine	52, 53
fluphenazine decanoate	53
fluphenazine hcl.....	53
flurandrenolide	84, 85
flurazepam	53
flurbiprofen	47
flurbiprofen sodium	141
flutamide	24
fluticasone propionate ..	85, 148
fluticasone propion-salmeterol	
.....	149
FLUTICASONE PROPION-	
SALMETEROL.....	148
fluvastatin	73
fluvoxamine	53
FLUZONE HIGHDOSE	
QUAD 22-23 PF.....	117
FLUZONE QUAD 2022-2023	
.....	117
FLUZONE QUAD 2022-2023	
(PF).....	117
folic acid	156
folivane-ob.....	156
fondaparinux	68
formoterol fumarate	149
FORTEO	123
FOSAMAX PLUS D	123
fosamprenavir	6
fosaprepitant	108
foscarnet	6
FOSCAVIR	6
fosfomycin tromethamine....	20
fosinopril	62
fosinopril-hydrochlorothiazide	
.....	62
fosphenytoin	31
FRAGMIN	68
FREESTYLE LIBRE 14 DAY	
READER	94
FREESTYLE LIBRE 14 DAY	
SENSOR.....	94
FREESTYLE LIBRE 2	
READER	94
FREESTYLE LIBRE 2	
SENSOR.....	94
FREESTYLE LIBRE 3	
SENSOR.....	94

FROTEK	47
frovatriptan	36
FULPHILA.....	113
furosemide	62
FUROSEMIDE IN 0.9 % NACL.....	62
FUZEON	6
fyavolv.....	127
FYCOMPA	31
G	
gabapentin	31
GALAFOLD	99
galantamine	36
GALZIN	154
GAMASTAN	117
GAMASTAN S/D.....	117
GAMIFANT	24
GAMMAGARD LIQUID..	117
GAMMAGARD S-D (IGA < 1 MCG/ML)	118
GAMMAPLEX	118
GAMMAPLEX (WITH SORBITOL).....	118
GAMUNEX-C	118
GANCICLOVIR	6
ganciclovir sodium	6
GARDASIL 9 (PF).....	118
gatifloxacin.....	138
GATTEX 30-VIAL	108
gavilyte-c	108
gavilyte-g.....	108
GAVRETO.....	24
GELNIQUE.....	152
gemfibrozil	73
gemma...ly.....	132
generlac	108
genograf.....	24
GENOTROPIN	114
GENOTROPIN MINIQUICK	114
gentak	138
gentamicin	14, 81, 138
gentamicin in nacl (iso-osm)	14
GENTAMICIN IN NACL (ISO-OSM).....	14
gentamicin sulfate (ped) (pf)	14
gentamicin sulfate (pf)	14
GENTAMICIN SULFATE (PF).....	14
GENTAMICIN-SODIUM CITRATE	14
GENVOYA	6
GIAPREZA	74
GILOTrif.....	24
GIVLAARI.....	87
glatiramer.....	114
glatopa	114
GLEOSTINE	24
glimepiride.....	102
glipizide	102
glipizide-metformin.....	102
GLUCAGEN HYPOKIT	94
GLUCAGON (HCL) EMERGENCY KIT	94
glucagon emergency kit (human)	94
glyburide.....	102
glyburide micronized.....	102
glyburide-metformin	102
glycopyrrolate.....	105
GLYCOPYRROLATE.....	105
glycopyrrolate (pf).....	105
glycopyrrolate (pf) in water	105
GLYCOPYRROLATE (PF) IN WATER.....	105
glydo.....	81
GLYRX-PF	105
GLYXAMBI	102
GOJJI KETONE CONTROL SOLN-L1.....	95
GOLYTELY.....	108
GONAL-F	99
GONAL-F RFF	99
GONAL-F RFF REDI-JECT	99
GOPRELTO	81
granisetron (pf).....	108
granisetron hcl	108
griseofulvin microsize	3
griseofulvin ultramicrosize....	3
guanfacine	53, 62
GVOKE	94
GVOKE HYPOOPEN 2-PACK	94
GVOKE PFS 2-PACK SYRINGE.....	94
GYNAZOLE-1	129
H	
HAEGARDA.....	149
hailey	132
hailey 24 fe	132
hailey fe 1.5/30 (28)	132
hailey fe 1/20 (28)	132
halcinonide	85
halobetasol propionate.....	85
haloperidol	53
haloperidol decanoate	53
haloperidol lactate	53
HALUCORT	77
HARVONI.....	6
HAVRIX (PF)	118
heather	128
HEMLIBRA	68
HEMOFIL M HIGH	68
HEMOFIL M LOW	68
HEMOFIL M MID	68
HEMOFIL M SUPER HIGH	68
hep flush-10 (pf)	68
HEPAGAM B	118
heparin (porcine)	69
HEPARIN (PORCINE) IN 0.9% NACL	69
heparin (porcine) in 5 % dex	69
heparin (porcine) in nacl (pf)	69
heparin flush(porcine)-0.9nacl	69
heparin lock flush (porcine)	69
heparin lockflush(porcine)(pf)	69
heparin(porcine) in 0.45% nacl	69
HEPARIN(PORCINE) IN	
0.45% NACL	69
heparin, porcine (pf)	69, 70
HEPARIN, PORCINE (PF)	69, 70
HEPLISAV-B (PF).....	118
HETLIOZ	53
HETLIOZ LQ	53
HIBERIX (PF).....	118
homatropaire	139
HUMALOG JUNIOR KWIKPEN U-100	96
HUMALOG KWIKPEN INSULIN	96
HUMALOG MIX 50-50 INSULN U-100	96
HUMALOG MIX 50-50 KWIKPEN	96
HUMALOG MIX 75-25 KWIKPEN	96
HUMALOG MIX 75-25(U- 100)INSULN	96
HUMALOG U-100 INSULIN	97
HUMATE-P	70
HUMIRA	124

HUMIRA PEN	124
HUMIRA PEN CROHNS-UC-HS START	124
HUMIRA PEN PSOR-UVEITS-ADOL HS	124
HUMIRA(CF)	125
HUMIRA(CF) PEDI-CROHNS STARTER.....	124
HUMIRA(CF) PEN.....	125
HUMIRA(CF) PEN CROHNS-UC-HS	124
HUMIRA(CF) PEN PEDIATRIC UC	124
HUMIRA(CF) PEN PSOR-UV-ADOL HS.....	125
HUMULIN 70/30 U-100 INSULIN	97
HUMULIN 70/30 U-100 KWIKPEN	97
HUMULIN N NPH INSULIN KWIKPEN	97
HUMULIN N NPH U-100 INSULIN	97
HUMULIN R REGULAR U-100 INSULN	97
HUMULIN R U-500 (CONC) INSULIN	97
HUMULIN R U-500 (CONC) KWIKPEN	97
HYCAMTIN	24
HYCODAN (WITH HOMATROPINE)	146
hydralazine	62
hydrochlorothiazide.....	62
hydrocodone bitartrate.....	41
hydrocodone-acetaminophen	41
hydrocodone-chlorpheniramine	146
hydrocodone-homatropine .	146
hydrocodone-ibuprofen	41
hydrocortisone	85, 91, 108
hydrocortisone acetate.....	108
hydrocortisone butyrate.....	85
hydrocortisone butyr-emollient	85
hydrocortisone valerate	85
hydrocortisone-acetic acid....	91
hydrocortisone-iodoquinol ...	82
hydrocortisone-iodoquinol-aloe	82
hydrocortisone-pramoxine ..	75,
108	
hydromet.....	146
hydromorphone	42
HYDROMORPHONE	42
hydromorphone (pf)	41
HYDROMORPHONE (PF) .	41
HYDROMORPHONE (PF) IN WATER.....	41
hydromorphone (pf)-0.9 % nacl	41
HYDROMORPHONE (PF)-0.9 % NaCL.....	41, 42
HYDROMORPHONE(PF)-NaCL,ISO-OSM.....	42
hydroxychloroquine.....	14
HYDROXYCHLOROQUINE	14
hydroxyprogesterone	128
hydroxyprogesterone caproate	128
hydroxyurea.....	24
hydroxyzine hcl	145
hydroxyzine pamoate	145
HYLENEX	88
hyophen	153
hyoscyamine sulfate	105
HYOSCYAMINE SULFATE	105
hyosyne.....	106
HYPERHEP B	118
HYPERHEP B NEONATAL	118
HYPERRAB (PF).....	118
HYPERTET (PF)	118
HYQVIA	119
I	
ibandronate	123
IBRANCE	24
ibu.....	47
ibuprofen	47
ibuprofen-famotidine.....	47
icatibant	149
iclevia	132
ICLUSIG	24
icosapent ethyl.....	73
ID NOW COVID-19 TEST KIT	93
IDELEVION	70
IDHIFA	24
ILARIS (PF)	115
ILEVRO	141
ILUMYA	75
imatinib.....	24
IMBRUVICA	24
imipenem-cilastatin	14
imipramine hcl.....	53
imipramine pamoate	53
imiquimod.....	115
IMOGLAM RABIES-HT (PF)	119
IMOVAZ RABIES VACCINE (PF)	119
IMPAVIDO	14
IMURAN	24
IMVEXXY MAINTENANCE PACK	128
IMVEXXY STARTER PACK	128
INBRIJA	34
incassia	128
INCRELEX	88
INCRUSE ELLIPTA	149
indapamide	62
INDOCIN	47
indomethacin	47
INFANRIX (DTAP) (PF)	119
INFED	156
INFUMORPH P/F	42
INLYTA	24
INPEN (FOR HUMALOG) PINK	95
INPEN (NOVOLOG OR FIASP) PINK	95
INQOVI	25
INSPIRACHAMBER	93
INTRON A	115
INVANZ	14
INVEGA HAFYERA	53
INVEGA SUSTENNA	53
INVEGA TRINZA	53
INVELTYS	144
INVIRASE	6
IODOFLEX	77
IODOPEN	25
IODOSORB	77
IPOL	119
ipratropium bromide.....	90, 149
ipratropium-albuterol.....	149
irbesartan	62
irbesartan-hydrochlorothiazide	62
IRESSA	25

ISENTRESS	6
ISENTRESS HD	6
isibloom.....	132
isoniazid	14
isosorbide dinitrate	74
isosorbide mononitrate	74
isotretinoin.....	79
isoxsuprine	129
isradipine	62
ISTURISA	99
itraconazole	3
ivermectin.....	14
IXIARO (PF).....	119
IXINITY	70
J	
jaimiess.....	132
JAKAFI	25
JALYN	153
JANSSEN COVID-19 VACCINE (EUA)	119
jantoven	70
JANUMET	102
JANUMET XR.....	102
JANUVIA.....	102
JARDIANCE.....	102
jasmiel (28).....	132
JATENZO	99
javygtor.....	99
jencycla.....	128
jinteli.....	128
JIVI.....	70
jolessa.....	133
juleber.....	133
JULUCA.....	6
junel 1.5/30 (21).....	133
junel 1/20 (21)	133
junel fe 1.5/30 (28)	133
junel fe 1/20 (28)	133
junel fe 24.....	133
JUXTAPID	73
JYNARQUE.....	99
K	
kaitlib fe.....	133
kalliga.....	133
KALYDECO	149
KANUMA	99
kariva (28)	133
KCENTRA	70
KEDRAB (PF)	119
kelnor 1/35 (28).....	133
kelnor 1-50 (28).....	133
KEPIVANCE	21
KERYDIN	82
KESIMPTA PEN	114
ketoconazole.....	3, 82
ketodan	83
ketodan kit	82
ketoprofen.....	47
ketorolac	47, 141
KEVZARA	125
KHAPZORY	21
KINERET	115
KINRIX (PF).....	119
KISQALI	25
KISQALI FEMARA CO- PACK	25
KITABIS PAK	14
klor-con m10	154
klor-con m15	154
klor-con m20	154
KLOXXADO	48
KOATE	70
KOGENATE FS	70
KOSELUGO	25
KOVALTRY	70
K-PHOS ORIGINAL	153
kpn.....	156
KRINTAFEL.....	14
KRYSTEXXA.....	123
kurvelo (28)	133
KUVAN.....	99
KYLEENA	126
KYNMOBI.....	34
L	
l norgest/e.estriadiol-e.estrad	133
labetalol	62
lacosamide	31
lactated ringers	86
lactulose	108
LAGEVRIO (EUA).....	6
lamivudine	6
lamivudine-zidovudine	6
lamotrigine.....	31
LAMPIT	14
LANCING DEVICE	95
LANOXIN.....	66
lansoprazole.....	112
lanthanum	108
LANTUS SOLOSTAR U-100 INSULIN	97
LANTUS U-100 INSULIN	97
lapatinib	25
larin 1.5/30 (21)	133
larin 1/20 (21)	133
larin 24 fe	133
larin fe 1.5/30 (28)	133
larin fe 1/20 (28)	133
LASIX	62
latanoprost	142
LATANOPROST (PF)	142
LATUDA	53
layolis fe	133
LEDIPASVIR-SOFOSBUVIR	6
leena 28.....	133
leflunomide	125
LEMTRADA	114
lenalidomide	114
LENVIMA	25
lessina	133
letrozole	25
leucovorin calcium	21
LEUKERAN	25
LEUKINE	113
leuprolide	25
levalbuterol hcl	149
LEVEMIR FLEXTOUCH U- 100 INSULN	97
LEVEMIR U-100 INSULIN	97
levetiracetam	32
levetiracetam in nacl (iso-os)	32
LEVETIRACETAM IN NACL (ISO-OS)	32
LEVICYN ANTIPRURITIC	78
LEVICYN ANTIPRURITIC SG	78
levobunolol	139
levocarnitine	88
levocarnitine (with sugar)	88
levofloxacin	18, 19, 138
levofloxacin in d5w	18
levoleucovorin calcium	21
levonest (28)	133
levonorgestrel	133
levonorgestrel-ethinyl estrad	133, 134
levonorg-eth estrad triphasic	134
levora-28	134
levorphanol tartrate	42
levo-t	103, 104
levothyroxine	104
LEVOTHYROXINE	104
levoxyl	104
LEVULAN	78

LEXIVA	6
LICART	48
lidocaine	81
lidocaine (pf)	81
LIDOCAINE (PF)	81
lidocaine hcl	81
lidocaine hcl-hydrocortison ac	81, 108
LIDOCAINE HCL-HYDROCORTISON AC	108
lidocaine viscous	81
lidocaine-hydrocortisone-aloe	108
lidocaine-prilocaine	81
lidocort	81
LIFEMS NALOXONE	48
LILETTA	126
lincomycin	14
lindane	86
linezolid	15
linezolid in dextrose 5%	14
linezolid-0.9% sodium chloride	15
LINZESS	108
liothyronine	104
lisinopril	62
lisinopril-hydrochlorothiazide	62
LITEAIRE MDI CHAMBER	93
lithium carbonate	54
LITHOSTAT	88
LIVMARLI	109
LO LOESTRIN FE	134
LODINE	48
lojaimiess	134
LOKELMA	109
LONHALA MAGNAIR REFILL	149
LONHALA MAGNAIR STARTER	149
LONSURF	25
lopinavir-ritonavir	6
lorazepam	54
lorazepam intensol	54
LORBRENA	25
loryna (28)	134
losartan	63
losartan-hydrochlorothiazide	63
LOTEMAX	144
LOTEMAX SM	144
loteprednol etabonate	144
lovastatin	73
LOVENOX	70
low-ogestrel (28)	134
loxapine succinate	54
lo-zumandimine (28)	134
lta pre-attached	81
LUBIPROSTONE	109
LUCEMYRA	48
LUCIRA CHECK-IT COVID HOME TST	93
lugols	82, 154
LULICONAZOLE	83
LUMAKRAS	25
LUMIGAN	142
LUMIZYME	99
LUPKYNIS	25
lutera (28)	134
luxamend	78
LYBALVI	54
lyleq	128
lyllana	128
LYNPARZA	25
LYSODREN	25
lyza	128
M	
mafenide acetate	82
MAKENA (PF)	128
malathion	86
maraviroc	6
marlissa (28)	134
MARPLAN	54
MATULANE	25
matzim la	63
MAVYRET	7
MAXITROL	143
mb hydrogel	78
meclofenamate	48
medroxyprogesterone	128
mefenamic acid	48
mefloquine	15
megestrol	25
MEKINIST	25
MEKTOVI	25
meloxicam	48
melphalan	26
memantine	36, 37
MENACTRA (PF)	119
MENEST	128
MENOPUR	99
MENQUADFI (PF)	119
MENVEO A-C-Y-W-135-DIP (PF)	119
meperidine	42
MEPHYTON	70
meprobamate	38
MEPSEVII	99
mercaptopurine	26
meropenem	15
MEROOPENEM-0.9% SODIUM CHLORIDE	15
merzee	134
mesalamine	109
mesalamine with cleansing wipe	109
mesna	21
MESNEX	21
metaproterenol	149
metaxalone	38
metformin	102
methadone	43
methadose	43
methamphetamine	54
methazolamide	141
methenamine hippurate	20
methenamine mandelate	20
methen-sod phos-meth blue-hyos	153
methergine	137
methimazole	92
methocarbamol	38
methotrexate sodium	26
methotrexate sodium (pf)	26
methoxsalen	78
methscopolamine	106
methyl salicylate	78
methyldopa	63
methyldopa-hydrochlorothiazide	63
methyldopate	63
methylergonovine	137
methylphenidate hcl	54
METHYLPHENIDATE HCL	54
methylprednisolone	91
methyltestosterone	99
metoclopramide hcl	109
metolazone	63
metoprolol succinate	63
metoprolol ta-hydrochlorothiaz	63
metoprolol tartrate	63
metro i.v.	15
metronidazole	15, 79, 129

metronidazole in nacl (iso-os)	15
metyrosine	63
mexiletine	58
MIACALCIN	100
mibelas 24 fe	134
micafungin	3
miconazole-3	129
MICROCHAMBER	93
microgestin 1.5/30 (21)	134
microgestin 1/20 (21)	134
MICROGESTIN 24 FE	134
microgestin fe 1.5/30 (28)	134
microgestin fe 1/20 (28)	134
MICROSPACER	93
midazolam	55
MIDAZOLAM	55
MIDAZOLAM (PF) IN 0.9 % NACL	54, 55
MIDAZOLAM IN 0.9 % SOD CHLORID	55
MIDAZOLAM IN NAACL,ISO-OSMO(PF)	55
midodrine	88
MIFEPREX	129
mifepristone	129
migergot	36
miglitol	102
miglustat	100
mili	134
millipred	92
millipred dp	92
mimvey	128
MINIMED 770G INSULIN PUMP	95
MINIMED MIO ADVANCE INF SET23	95
MINIMED QUICK SET 43	95
MINIMED SILHOUETTE 23	95
MINIMED SURE T 32	95
MINOCIN	19
minocycline	19
minoxidil	63
MIRENA	126
mirtazapine	55
MIRVASO	80
misoprostol	112
MITIGARE	123
MITIGO (PF)	43
MITOMYCIN (PF) IN WATER	140
MITOSOL	142
MKO (MIDAZOLAM-KETAMINE-ONDAN)	55
M-M-R II (PF)	119
m-natal plus	156
modafinil	55
MODERNA COVID BIVAL(18Y UP)-PF	119
MODERNA COVID(6M-5Y) VACC(EUA)	119
MODERNA COVID-19 (6-11YR)(EUA)	119
MODERNA COVID-19 VACCINE (EUA)	119
moexipril	63
molindone	55
mometasone	85, 149
mondoxyne nl	19
MONOFERRIC	156
mono-linyah	134
MONOVISC	48
montelukast	149
MONUROL	20
morphine	44, 45
MORPHINE	44, 45
morphine (pf)	44
MORPHINE (PF)	44
morphine (pf) in 0.9 % sod chl	43
MORPHINE (PF) IN 0.9 % SOD CHL	43
morphine concentrate	44
morphine in 0.9 % sodium chlor	44
MORPHINE IN 0.9 % SODIUM CHLOR	44
MOTEGRITY	109
MOUNJARO	93
MOVANTIK	109
moxifloxacin	19, 138
MOXIFLOXACIN-SOD.ACE,SUL-WATER.	19
moxifloxacin-sod.chloride(iso)	19
MS CONTIN	45
MULTAQ	58
mupirocin	82
my choice	134
my way	134
MYALEPT	100
MYCAMINE	3
MYCAPSSA	26
mycophenolate mofetil	26
mycophenolate mofetil (hcl)	26
mycophenolate sodium	26
MYDAYIS	55
MYFORTIC	26
MYLERAN	26
mynatal	156
mynatal plus	156
mynatal-z	156
MYOBLOC	120
myorisan	80
MYRBETRIQ	152
MYXREDLIN	97
N	
NABI-HB	120
nabumetone	48
nadolol	63
nafcillin	17
nafcillin in dextrose iso-osm	17
naftifine	83
NAGLAZYME	100
nalbuphine	48
NALMEFENE	48
naloxone	48
naltrexone	48
naproxen	48
naproxen sodium	48
naratriptan	36
NATACHEW (FE BIS-GLYCINATE)	156
NATACYN	138
NATAZIA	134
nateglinide	102
NATPARA	100
NAYZILAM	32
nebivolol	63
NEBUPENT	15
necon 0.5/35 (28)	134
nefazodone	55
neomycin	15
neomycin-bacitracin-poly-hc	143
neomycin-bacitracin-polymyxin	138
neomycin-polymyxin b gu	86
neomycin-polymyxin b-dexameth	143
neomycin-polymyxin-gramicidin	138
neomycin-polymyxin-hc	91, 143
neo-polycin	138

neo-polycin hc	143
NEORAL.....	26
neostigmine methylsulfate....	38
NEO-SYNALAR	82
NEO-SYNALAR KIT.....	82
NERLYNX.....	26
NESTABS	156
NESTABS ABC.....	156
NESTABS DHA	156
neuac.....	80
NEUAC KIT	80
NEULASTA.....	113
NEULASTA ONPRO	113
NEUPRO.....	34
nevirapine	7
new day	134
newgen	156
NEXAVAR	26
NEXLETOL	73
NEXLIZET.....	73
NEXPLANON	129
NEXTSTELLIS.....	134
niacin	73
nicardipine.....	63
NICODERM CQ.....	89
nicorette.....	89
NICORETTE.....	89
nicotine.....	90
nicotine (polacrilex)	89, 90
NICOTROL.....	90
NICOTROL NS.....	90
nifedipine.....	63
nikki (28)	134
nilutamide.....	26
NIMBEX	38
nimodipine.....	63
NIPRIDE RTU	74
nisoldipine	63
nitazoxanide	15
nitisinone	88
nitro-bid.....	74
NITRO-DUR.....	74
nitrofurantoin.....	20
nitrofurantoin macrocrystal ..	20
nitrofurantoin monohyd/m-	
cryst	20
nitroglycerin	75
nitroglycerin in 5 % dextrose	75
NITROLINGUAL.....	75
NITROMIST	75
nitro-time.....	75
NITYR.....	88
NIVESTYM	113
nizatidine	112
NOCDURNA (MEN).....	100
NOCDURNA (WOMEN) ..	100
nora-be.....	128
NORDITROPIN FLEXPRO	
.....	114
noreth-ethinyl estradiol-iron	
.....	135
norethindrone (contraceptive)	
.....	128
norethindrone acetate	128
norethindrone ac-eth estradiol	
.....	128, 135
norethindrone-e.estradiol-iron	
.....	135
NORGESIC FORTE	38
norgestimate-ethinyl estradiol	
.....	135
NORPACE CR	58
nortrel 0.5/35 (28).....	135
nortrel 1/35 (21).....	135
nortrel 1/35 (28).....	135
nortrel 7/7/7 (28)	135
nortriptyline	55
NORVIR.....	7
NOURIANZ	34
NOVAREL.....	100
NOVAVAX COVID-19	
VACC,ADJ(EUA).....	120
NOVOEIGHT	70
NOVOPEN ECHO	95
NOVOSEVEN RT	70
NOXAFILE.....	3, 4
np thyroid	104
NPLATE.....	71
NUBEQA	26
NUCALA	149
NUCORT.....	85
NUCYNTA	48
NUCYNTA ER	48
NUEDEXTA	37
NULIBRY	37
NULOJIX	26
NUMBRINO	81
NUPLAZID	55
NURTEC ODT	36
NUZYRA	19, 20
nyamyc	83
nylia 1/35 (28)	135
nylia 7/7/7 (28)	135
NYMALIZE	63
nymyo	135
nystatin	4, 83
nystatin-triamcinolone	83
nystop	83
O	
OB COMPLETE ONE	156
OB COMPLETE PETITE ..	156
OB COMPLETE PREMIER	
.....	156
OB COMPLETE WITH DHA	
.....	156
OBIZUR	71
OBREDON	146
OCALIVA	109
ocella.....	135
OCREVUS	114
octreotide acetate	26
ODEFSEY	7
ODOMZO.....	26
OFEV.....	149
ofloxacin	19, 91, 138
olanzapine	55
olanzapine-fluoxetine	55
OLINVYK	48
olmesartan.....	63
olmesartan-amlodipin-	
hcthiazid	63
olmesartan-	
hydrochlorothiazide	64
olopatadine	90
OLUMIANT	125
omega-3 acid ethyl esters	73
omeprazole	112
OMNIPOD 5 G6 INTRO KIT	
(GEN 5)	95
OMNIPOD 5 G6 PODS (GEN	
5)	95
OMNIPOD CLASSIC PDM	
KIT(GEN 3)	95
OMNIPOD CLASSIC PODS	
(GEN 3)	95
OMNIPOD DASH INTRO	
KIT (GEN 4)	95
OMNIPOD DASH PODS	
(GEN 4)	95
ondansetron.....	109
ondansetron hcl.....	109
ondansetron hcl (pf).....	109
ONETOUCH SOLUTIONS	
STARTER	95
ONETOUCH ULTRA	
CONTROL	95

ONETOUCH ULTRA TEST	140
.....	92
ONETOUCH ULTRA2	83
METER	95
ONETOUCH ULTRAMINI	95
ONETOUCH VERIO FLEX	153
METER	95
ONETOUCH VERIO IQ	153
METER	95
ONETOUCH VERIO METER	15
.....	95
ONETOUCH VERIO TEST	110
STRIPS	92
ONFI	45
ONUREG	110
opcicon one-step	135
opium tincture	106
OPSUMIT	49
OPTICHAMBER DIAMOND	149
VHC	93
option-2	135
oralone	90
ORAPRED ODT	92
ORBACTIV	15
ORENCIA	125
ORENCIA (WITH	125
MALTOSE)	125
ORENCIA CLICKJECT	125
ORENITRAM	64
ORFADIN	88
ORIAHNN	129
ORILISSA	100
ORKAMBI	150
ORLADEYO	150
orphenadrine citrate	38
orphenadrine-asa-caffeine	38
ORTHOVISC	48
oscimin	106
oscimin sl	106
oseltamivir	7
OSPHENA	129
OTEZLA	125
OTEZLA STARTER	125
OTIPRIO	91
OVIDREL	100
oxacillin	17
oxacillin in dextrose(iso-osm)	17
oxandrolone	100
oxaprozin	49
oxazepam	55
oxcarbazepine	32
OXERVATE	140
oxiconazole	83
OXISTAT	83
OXLUMO	153
OXTELLAR XR	32
oxybutynin chloride	152, 153
oxycodone	45
OXYCODONE	45
oxycodone-acetaminophen	45
OXYCONTIN	45
oxymorphone	45
OZEMPIC	102
P	
pacerone	58
PACLITAXEL PROTEIN-	26
BOUND	26
paliperidone	56
palonosetron	109
PALONOSETRON	109
PALYNZIQ	100
pamidronate	100
PANCREAZE	110
PANRETIN	78
pantoprazole	112, 113
PANZYGA	120
papaverine	64
PARAGARD T 380A	126
PAREMYD	139
paricalcitol	100
paroex oral rinse	90
paromomycin	15
paroxetine hcl	56
paroxetine	56
mesylate(menop.sym)	56
PARSABIV	100
PASER	15
PAXLOVID (EUA)	7
PEDIATRIX (PF)	120
PEDVAX HIB (PF)	120
peg 3350-electrolytes	110
peg3350-sod sul-nacl-kcl-asb-c	110
PEGASYS	115
peg-electrolyte soln	110
peg-prep	110
PEMAZYRE	27
penicillamine	125
PENICILLIN G POT IN	18
DEXTROSE	18
penicillin g potassium	18
penicillin g procaine	18
penicillin g sodium	18
penicillin v potassium	18
PENTACEL (PF)	120
PENTACEL ACTHIB	120
COMPONENT (PF)	120
PENTAM	15
pentamidine	15
PENTASA	110
pentazocine-naloxone	49
pentoxifylline	71
perindopril erbumine	64
periogard	90
permethrin	86
perphenazine	56
perphenazine-amitriptyline	56
PERSERIS	56
PERTZYE	110
PEXEVA	56
PFIZER COVID BIVAL(12Y	120
UP)(PF)	120
PFIZER COVID-19 TRIS	120
VACCN(PF)	120
PFIZER COVID-19	120
VACCINE (EUA)	120
pfizerpen-g	18
phenazopyridine	154
phenelzine	56
phenobarb-hyoscy-atropine-	106
scop	106
phenobarbital	32
phenoxybenzamine	64
phentolamine	64
phenylephrine hcl	144
PHENYLEPH-	
TROPICAMIDE IN	
WATER	139
PHENYTEK	32
phenytoin	32
phenytoin sodium	32
phenytoin sodium extended	32
PHEXXI	130
philith	135
PHOSLYRA	110
phosphasal	153
PHOSPHOLINE IODIDE	139
PHYSIOLYTE	86
PHYSISOL IRRIGATION	86
phytonadione (vitamin k1)	71
PHYTONADIONE	
(VITAMIN K1)	71
pilocarpine hcl	88, 90, 139
pimecrolimus	78
pimozide	56

pimtrea (28)	135
pindolol.....	64
pioglitazone	102
pioglitazone-glimepiride	102
pioglitazone-metformin.....	102
piperacillin-tazobactam	18
PIQRAY	27
pirfenidone	150
pirmella.....	135
piroxicam.....	49
PIXEL COVID19 HOME COLLECT KIT	93
PLEGRIDY	115
PLENVU	110
pnv-dha.....	156
pnv-omega.....	157
pnv-select	157
POCKET CHAMBER	93
podofilox	78
polycin.....	138
polymyxin b sulfate.....	15
polymyxin b sulf-trimethoprim	138
POMALYST	115
portia 28.....	135
posaconazole	4
POTABA	154
potassium chloride.....	155
potassium citrate.....	154
PR BENZOYL PEROXIDE.80	
pr natal 400.....	157
pr natal 400 ec	157
pr natal 430.....	157
pr natal 430 ec	157
pramipexole.....	34, 35
prasugrel	71
pravastatin	73
PRAXBIND	71
praziquantel	15
prazosin	64
PRED-G	143
prednicarbate	85
PREDNISOL ACE- GATIFLOX-BROMFEN	140
PREDNISOLN SP- MOXIFLOX-BROMFEN	140
prednisolone	92
prednisolone acetate	144
PREDNISOLONE ACETATE- NEPAFENAC	140
PREDNISOLONE SOD PH- MOXIFLOX	143
prednisolone sodium phosphate	92, 144
PREDNISOLONE- MOXIFLO-NEPAFENAC	140
PREDNISOLONE- MOXIFLOXACIN HCL	143
PREDNISOLONE- MOXIFLOX-BROMFEN	140
prednisone	92
prednisone intensol.....	92
pregabalin	32
PREGENNA.....	157
PREMARIN	128, 129
PREMPHASE	129
PREMPRO	129
prena1 chew.....	157
prena1 pearl	157
prena1 true.....	157
PRENATA.....	157
prenatabs fa.....	157
prenatabs rx	157
PRENATAL	157
prenatal 19	157
prenatal plus	157
prenatal plus (calcium carb)	157
PRENATAL PLUS DHA...157	
PRENATAL PLUS VITAMIN-MINERAL ...157	
prenatal vitamin	157
prenatal vitamin plus low iron	157
prenatal vitamin with minerals	157
prenatal-u.....	157
PRENATE DHA (FERR ASP GLYCIN).....	157
PRENATE ELITE (IRON ASP GLYC).....	158
PRENATE ENHANCE.....	158
PRENATE MINI (FERR ASP GLYCIN).....	158
PRENATE PIXIE.....	158
PRENATE RESTORE	158
PRENATE STAR.....	158
PREPIDIL	130
PRESTALIA	64
PRETOMANID	15
prevalite	73
PREVNAR 13 (PF)	120
PREVYMIS	7
PREZCOBIX	7
PREZISTA	7
PRIFTIN	15
PRIMACARE.....	158
primaquine	15
PRIMEAIRE.....	93
primidone.....	32
PRIORIX (PF)	120
probenecid	123
probenecid-colchicine.....	123
procainamide	58
PRO-C-DURE 5	92
PRO-C-DURE 6	92
PROCHAMBER.....	93
prochlorperazine	110
prochlorperazine edisylate..110	
prochlorperazine maleate....110	
PROCRT	113
procto-med hc	110
procto-pak	110
proctosol hc	110
proctozone-hc	110
PROFILNINE	71
progesterone	129
progesterone micronized ...129	
PROGLYCEM	94
PROLASTIN-C	88
PROLATE	45
PROLENSA	141
PROMACTA	71
promethazine	145, 146
promethazine-codeine.....	146
promethazine-dm	146
promethazine-phenyleph- codeine.....	146
promethazine-phenylephrine	146
promethegan	146
PROMETRIUM	129
propafenone	59
proparacaine	140
propranolol	64
propranolol-hydrochlorothiazid	64
propylthiouracil	92
PROQUAD (PF).....	121
protamine	71
protriptyline	56

PROVERA	129
PROVIDA OB.....	158
pruclair	78
PULMICORT FLEXHALER	150
PULMOZYME.....	150
PURIXAN	27
pyrazinamide	15
pyridostigmine bromide	38
PYRIDOSTIGMINE	
BROMIDE	38
pyrimethamine.....	15
PYRUKYND	88
Q	
QBREXZA	78
QINLOCK.....	27
QNDSL.....	150
QUADRACEL (PF)	121
QUAZEPAM.....	56
QUESTRAN.....	73
QUESTRAN LIGHT.....	73
quetiapine	56
QUICKVUE SARS ANTIGEN	93
quinapril	64
quinapril-hydrochlorothiazide	64
quinidine gluconate	59
quinidine sulfate	59
quinine sulfate	15
QUINJA	82
quit 2.....	90
quit 4.....	90
QUZYTTR.....	146
QVAR REDIHALER	150
R	
RABAVERT (PF)	121
rabeprazole	113
RADICAVA.....	37
RADICAVA ORS STARTER KIT SUSP.....	37
RADIOGARDASE	88
raloxifene.....	123
ramelteon	56
ramipril	64
ranolazine	74
RAPAMUNE	27
RAPIVAB (PF)	7
rasagiline	35
RASUVO (PF)	125
RAVICTI.....	88
RAZADYNE ER	37
REBIFF (WITH ALBUMIN)	115
REBIFF REBIDOSE	115
REBIFF TITRATION PACK	115
REBINYN	71
REBLOZYL.....	113
RECARBRIOS	16
reclipsen (28)	135
RECOMBIVAX HB (PF)	121
RECTIV.....	110
REGEN-COV (EUA)	7
regionol.....	38
REGRANEX	78
RELAFEN	49
RELENZA DISKHALER	7
RELISTOR	110
REMODULIN	64
RENACIDIN	154
RENFLEXIS	111
repaglinide	102
repaglinide-metformin.....	103
REPATHA PUSHTRONEX	73
REPATHA SURECLICK	74
REPATHA SYRINGE	74
RESPA-AR.....	146
RESTASIS.....	141
RESTASIS MULTIDOSE .	141
RETACRIT	113
RETEVMO.....	27
RETROVIR	7
REVATIO	150
REVCovi	88
REYATAZ	7
RHOPRESSA	142
RIASTAP	71
ribavirin	7, 115
RIDAURA.....	125
rifabutin	16
rifampin	16
RILUTEK.....	88
riluzole.....	88
rimantadine	8
ringer's	86
RINVOQ	125
risedronate	88, 123
RISPERDAL CONSTA	56
risperidone	56
RITEFLO AEROCHAMBER	93
ritonavir	8
rivastigmine	37
rivastigmine tartrate	37
rivelsa	135
RIXUBIS	71
rizatriptan.....	36
ROCKLATAN	142
ropinirole	35
rosadan.....	80
rosula cleansing cloths.....	80
rosuvastatin	74
ROTARIX	121
ROTATEQ VACCINE.....	121
roweepra	33
ROXYBOND	45
ROZLYTREK	27
RUBRACA	27
RUCONEST	150
rufinamide.....	33
RUKOBIA	8
RYBELSUS	103
RYDAPT	27
RYTARY	35
S	
SABRIL	33
SAFE-CLIP NEEDLE	
STORAGE DEV	95
sajazir.....	150
salicylic acid	76, 77
salicylic acid-ceramides no.177	177
salimez	77
SALIMEZ FORTE	77
salsalate	49
salvax	77
SANCUSO	111
SANDIMMUNE	27
SANDOSTATIN	27
SANTYL	85
SAPHRIS	56
sapropterin	100
SAVELLA	125
SCEMBLIX	27
SCENESSE	78
scopolamine base	111
SEBUDERM	78
SECUADO	57
SEGLUROMET	103
SELECT-OB + DHA	158
selegiline hcl	35
selenium sulfide	75
SELZENTRY	8
se-natal 19 chewable.....	158
se-natal-19	158
SEREVENT DISKUS	150

SEROSTIM	114
sertraline	57
setlakin	135
sevelamer carbonate	111
SEVENFACT	71
sharobel	129
SHINGRIX (PF).....	121
SIGNIFOR	27
sildenafil (pulm.hypertension)	150
SILENOR	57
silodosin	153
silver nitrate.....	78
silver nitrate applicators	78
silver sulfadiazine.....	76
SIMBRINZA	142
simliya (28)	135
simpesse	136
SIMPONI	126
SIMPONI ARIA.....	125
SIMULECT	27
simvastatin.....	74
SINUVA.....	150
sirolimus	27
SIRTURO.....	16
SIVEXTRO	16
SKLICE	86
SKYLA.....	126
SKYRIZI	75, 76, 111
SLYND.....	136
sodium benzoate-sod phenylacet.....	88
sodium chlor 0.9% bacteriostat	88
sodium chloride	89, 155
sodium chloride 0.45 %	155
sodium chloride 0.9 %	88, 89
sodium chloride 0.9 % (flush)	88
sodium chloride 3 % hypertonic	155
sodium chloride 5 % hypertonic	155
SODIUM EDECIN	64
sodium phenylbutyrate	89
sodium polystyrene sulfonate	111
sodium,potassium,mag sulfates	111
SOFIA SARS ANTIGEN FIA	93
SOFIA2 FLU-SARS ANTIGEN FIA.....	93
SOFOSBUVIR-VELPATASVIR.....	8
solifenacin	153
SOLIQUA 100/33	97
SOLIRIS	89
SOLOSEC	16
SOMATULINE DEPOT	27
SOMAVERT	100
sonafine	78
sorafenib	27
SORBITOL	86
SORBITOL-MANNITOL	86
SORILUX.....	76
sorine	59
sotalol	59
SOTALOL.....	59
sotalol af	59
SOTYLIZE	59
SOVALDI	8
SPACE CHAMBER.....	93
SPIKEVAX (PF)	121
spinosad	86
SPIRIVA RESPIMAT	150
SPIRIVA WITH HANDIHALER	150
spironolactone	64
spironolacton-hydrochlorothiaz	64
sprintec (28).....	136
SPRITAM	33
SPRYCEL	27
sps (with sorbitol)	111
sronyx	136
ssd.....	76
SSKI	92
sss 10-5	80
st joseph aspirin	49
st. joseph aspirin	49
STAMARIL (PF)	121
stavudine.....	8
STEGLATRO	103
STEGLUJAN	103
STELARA	76
STIOLTO RESPIMAT	150
STIVARGA	27
stop smoking aid.....	90
STRENSIQ	100
STREPTOMYCIN	16
STRIVERDI RESPIMAT	150
strong iodine	82, 155
SUBLOCADE	45
subvenite	33
subvenite starter (blue) kit	33
subvenite starter (green) kit	33
subvenite starter (orange) kit	33
SUCRAID	111
sucralfate	113
SULCONAZOLE	83
sulfacetamide sodium	76, 144
sulfacetamide sodium (acne)	82
sulfacetamide sodium-sulfur	80
sulfacetamide sod-sulfur-urea	80
sulfacetamide-prednisolone	144
sulfacetamide-sulfur-cleansr	23
sulfacleanse 8-4	80
sulfadiazine	19
sulfamethoxazole-trimethoprim	19
SULFAMYLYON	82
sulfasalazine	111
sulfatrim	19
sulindac	49
sumatriptan	36
sumatriptan succinate	36
sumatriptan-naproxen	36
sunitinib	27
SUNOSI	57
SUPREP BOWEL PREP KIT	111
SUSTIVA	8
syeda	136
SYMAX DUOTAB	106
SYMBICORT	151
SYMDEKO	151
SYMFI	8
SYMFI LO	8
SYMJEPI	146
SYMLINPEN 120	103
SYMLINPEN 60	103
SYMPAZAN	33
SYMPROIC	111
SYMTUZA	8
SYNAGIS	8
SYNAREL	100
SYNDROS	111
SYNJARDY	103
SYNJARDY XR	103
SYNRIBO	27
SYNTHROID	104

T**T**

FLEX.....	95
SLIM X2	96
SLIM X2 BASAL-IQ INSULIN PMP	95
SLIM X2 CONTROL-IQ.	95
TABLOID	27
TABRECTA.....	27
tacrolimus	28, 78
tadalafil (pulg. hypertension)	151
TAFINLAR	28
TAGRISSO	28
TAKE ACTION	136
TAKHZYRO	151
TALTZ AUTOINJECTOR ..	76
TALTZ AUTOINJECTOR (2 PACK).....	76
TALTZ AUTOINJECTOR (3 PACK).....	76
TALTZ SYRINGE.....	76
TALZENNA.....	28
TAMIFLU	8
tamoxifen.....	28
tamsulosin.....	153
TARCEVA	28
tarina 24 fe.....	136
tarina fe 1/20 (28).....	136
taron-c dha.....	158
TASIGNA	28
TASMAR	35
tavaborole	83
TAVNEOS	89
taysofy	136
TAYTULLA.....	136
tazarotene	80
tazicef	11
TAZORAC	80
taztia xt	64
TAZVERIK.....	28
TDVAX.....	121
TEFLARO	11
TEGSEDI	37
TEKTURNA HCT	64
telmisartan	64
telmisartan-amlodipine.....	65
telmisartan-hydrochlorothiazid	65
temazepam.....	57
TEMIXYS	8
TEMODAR	28

temozolomide	28
tencon	46
TENIVAC (PF)	121
tenofovir disoproxil fumarate .8	
TEPEZZA.....	100
TEPMETKO.....	28
terazosin.....	65
terbinafine hcl.....	4
terbutaline	151
terconazole.....	130
TESTONE CIK	101
TESTOPEL	101
testosterone	101
TESTOSTERONE.....	101
testosterone cypionate	101
testosterone enanthate.....	101
TETANUS,DIPHTHERIA TOX PED(PF)	121
tetrabenazine.....	37
tetracaine hcl.....	141
TETRACAINE HCL (PF)..	141
tetracycline	20
THALOMID.....	28
theophylline	151
THIOLA EC	89
thioridazine.....	57
thiothixene	57
THYMOGLOBULIN.....	121
tiadylt er.....	65
tiagabine	33
TIBSOVO.....	28
TICANASE	151
TICOVAC	122
TIGLUTIK	89
tilia fe.....	136
TIMOL-BRIMON-DORZO- LATANOP(PF)	142
timolol maleate	65, 139
timolol maleate (pf)	139
TIMOLOL-BRIMONIDI- DORZOLAM(PF)	142
TIMOLOL-DORZOLAMID- LATANOP(PF)	142
TIMOLOL- LATANOPROST(PF)	142
tinidazole	16
tiopronin	89
tis-u-sol pentalyte	86
TIVICAY.....	8
TIVICAY PD	8
tizanidine	38
TLANDO.....	101
TOBI PODHALER	16
TOBRADEX	143
TOBRADEX ST.....	143
tobramycin	16, 138
tobramycin in 0.225 % nacl..	16
tobramycin in 0.9 % nacl.....	16
tobramycin sulfate	16
TOBRAMYCIN WITH NEBULIZER	16
tobramycin-dexamethasone	143
TOBREX	138
TODAY CONTRACEPTIVE SPONGE.....	130
tolcapone.....	35
tolmetin.....	49
tolterodine	153
tolvaptan	101
topiramate	33
toremifene	28
TORONOVA II SUIK.....	49
TORONOVA SUIK	49
torsemide	65
TOTECT	21
TOUJEO MAX U-300 SOLOSTAR	97
TOUJEO SOLOSTAR U-300 INSULIN	97
TOVIAZ	153
TRACLEER	151
tramadol	49
tramadol-acetaminophen	49
trandolapril	65
trandolapril-verapamil	65
tranexamic acid.....	71, 130
TRANEXAMIC ACID IN NACL,ISO-OS	71
tranylcyprromine.....	57
travoprost	142
trazodone	57
TRECATOR	16
TRELEGY ELLIPTA.....	151
TREMFYA	76
treprostinil sodium.....	65
TRESIBA FLEXTOUCH U- 100	98
TRESIBA FLEXTOUCH U- 200	98
TRESIBA U-100 INSULIN	.98
tretinoin.....	80, 81
tretinoin (antineoplastic).....	28
tretinoin microspheres	80
TRETEN	72

TREXALL	28
tri femynor	136
triamcinol ac (pf) in 0.9%nacl	92
triamcinolone acetonide	85, 91, 92
triamterene	65
triamterene-hydrochlorothiazid	65
triazolam	57
TRICARE	158
triderm	85
trientine	89
tri-estarrylla	136
TRIFERIC	158
trifluoperazine	57
trifluridine	138
trihexyphenidyl	35
TRIJARDY XR	103
TRIKAFTA	151
tri-legest fe	136
tri-linyah	136
tri-lo-estarrylla	136
tri-lo-marzia	136
tri-lo-mili	136
tri-lo-sprintec	136
trimethobenzamide	111
trimethoprim	20
tri-mili	136
trimipramine	57
TRIMO-SAN JELLY	130
trinatal rx 1	158
trinate	158
TRINAZ	158
TRINTELLIX	57
tri-nymyo	136
TRIPTODUR	28
tri-sprintec (28)	136
TRISTART DHA	158
TRIUMEQ	8
TRIUMEQ PD	8
trivora (28)	136
tri-vylibra	137
tri-vylibra lo	136
TRIZIVIR	8
TROGARZO	8
tropicamide	139
trospium	153
TRULANCE	111
TRULICITY	103
TRUMENBA	122
TRUSELTIQ	28
TRUSOPT	143
TRUSTEEL INFUSION SET	23
TUKYSA	28
tulana	129
TURALIO	28
TUZISTRA XR	146
TWINRIX (PF)	122
TWIRLA	130
TYBLUME	137
TYBOST	8
tydemy	137
TYKERB	28
TYMLOS	123
TYPHIM VI	122
TYSABRI	37
TYVASO	151
TYVASO DPI	151
TYVASO REFILL KIT	151
TYVASO STARTER KIT	152
U	
UBRELVY	36
UCERIS	111
ULESFIA	86
ULTOMIRIS	89
ULTRASAL-ER	77
umecta	78
unithroid	104
UPLIZNA	28
UPTRAVI	65
urea	78
urea nail stick	78
urimar-t	154
uro-458	154
UROCIT-K 10	154
UROCIT-K 15	154
UROCIT-K 5	154
urogesic-blue	154
uro-mp	154
ursodiol	111
uryl	154
ustell	154
V	
VABOMERE	16
valacyclovir	9
VALCHLOR	78
valganciclovir	9
valproate sodium	33
valproic acid	33
valproic acid (as sodium salt)	33
valsartan	65
valsartan-hydrochlorothiazide	65
VALTOCO	33
VANCOCIN	20
vancomycin	21
VANCOMYCIN	20, 21
VANCOMYCIN HCL IN WATER	20
VANCOMYCIN IN 0.9 % SODIUM CHL	20
VANCOMYCIN IN DEXTROSE 5 %	20
VANCOMYCIN-WATER INJECT (PEG)	21
VANOXIDE-HC	81
VAQTA (PF)	122
varenicline	90
VARISOFT INFUSION SET	23
VARIVAX (PF)	122
VARIZIG	122
VARUBI	111
VASCEPA	74
VAXELIS (PF)	122
VAXNEUVANCE	122
VCF CONTRACEPTIVE FILM	130
VCF CONTRACEPTIVE GEL	130
VECAMYL	74
VEKLURY	9
veletri	65
velivet triphasic regimen (28)	137
VELPHORO	111
VEMLIDY	9
VENCLEXTA	28
VENCLEXTA STARTING PACK	28
venlafaxine	57
VENOFER	158
VENTAVIS	152
verapamil	65
VERITOR SARS-COV-2 AND FLU A-B	93
VERQUVO	74
VERZENIO	29
vestura (28)	137
VFEND	4
V-GO 20	96
V-GO 30	96
V-GO 40	96

VIBATIV	21
VIBERZI	111
VICTOZA 2-PAK	103
VICTOZA 3-PAK	103
VIEKIRA PAK	9
vienna	137
vigabatrin.....	33
vigadrone.....	33
VIIBRYD	57
VIJOICE.....	29
vilazodone	57
VIMIZIM	101
VIOKACE	112
viorele (28)	137
VIRACEPT	9
VIREAD	9
virt-nate dha.....	158
virt-pn dha	158
VISCO-3.....	49
VISTOGARD.....	22
VISUDYNE	141
VITAFOL FE PLUS	158
VITAFOL ULTRA	159
VITAFOL-OB	159
VITAFOL-ONE	159
VITAMED MD ONE RX ..	159
VITAMEDMD REDICHEW RX	159
vitamin k.....	72
vitamin k1.....	72
VITAPEARL.....	159
VITATRUE	159
VITRAKVI.....	29
VITRASE	141
VIVITROL	49
VIVOTIF.....	122
VIZIMPRO.....	29
volnea (28).....	137
VONJO	29
VONVENDI	72
VOQUEZNA DUAL PAK.	113
VOQUEZNA TRIPLE PAK	113
VORAXAZE	22
voriconazole	4
VORTEX HOLDING CHAMBER	93
VOSEVI	9
VOTRIENT	29
VOXZOGO	101
VPRIV	101
VRAYLAR.....	57
vyfemla (28)	137
vylibra.....	137
VYNDAMAX	74
VYNDAQEL.....	74
VYVANSE.....	57, 58
VYZULTA	143
W	
WAKIX	58
warfarin	72
water for irrigation, sterile....	89
WELIREG	29
wera (28).....	137
westab plus	159
WIDE-SEAL DIAPHRAGM	126
WILATE.....	72
wintergreen oil.....	78
wixela inhub	152
wymzya fe	137
X	
XALKORI.....	29
XARELTO	72
XARELTO DVT-PE TREAT 30D START	72
XCOPRI	33
XCOPRI MAINTENANCE PACK	33
XCOPRI TITRATION PACK	34
XELJANZ	126
XELJANZ XR.....	126
XEMBIFY	122
XENLETA.....	16
XEPI	82
XERAVA	20
XERMELO.....	29
XGEVA	22
XIGDUO XR.....	103
XXIDRA	141
XOFLUZA	9
XOLAIR	152
XOPENEX	152
XOPENEX CONCENTRATE	152
XOSPATA.....	29
XTANDI.....	29
xulane	130
XULTOPHY 100/3.6	98
XURIDEN	89
XYLOCAINE-MPF	81
XYREM.....	58
XYWAV.....	58
Y	
YF-VAX (PF).....	122
YONSA	29
YUPELRI	152
yuvafem	129
Z	
zafemy	130
zafirlukast	152
zaleplon.....	58
ZALVIT	159
zarah	137
ZARONTIN	34
ZARXIO	113
zatean-pn dha.....	159
zatean-pn plus	159
ZAVESCA.....	101
zebutal.....	46
ZEJULA	29
ZELBORAF	29
ZEMAIRA	89
ZEMDRI	16
ZEMPLAR	101
zenatane	81
ZENPEP	112
zenzedi	58
ZEPOSIA	37
ZEPOSIA STARTER KIT ..	37
ZEPOSIA STARTER PACK	37
ZERBAXA	11
ZERVIATE.....	141
ZIAGEN	9
zidovudine	9
ZIEXTENZO	113
zileuton	152
zingiber	159
ZIOPTAN (PF)	143
ZIPHEX	159
ziprasidone hcl.....	58
ziprasidone mesylate	58
ZIRGAN	138
ZITHRANOL	76
ZOKINVY	89
zoledronic acid.....	101
zoledronic acid-mannitol-water	89, 101
ZOLEDRONIC AC- MANNITOL-0.9NACL..	101
ZOLGENSMA	37
ZOLINZA	29
zolmitriptan.....	36
zolpidem	58

ZOLPIMIST	58	ZTALMY	34	ZYKADIA	29
zonisamide.....	34	ZUBSOLV.....	49	ZYLET	143
ZONTIVITY	72	ZULRESSO.....	58	ZYLOPRIM.....	123
ZOSYN IN DEXTROSE (ISO- OSM).....	18	zumandimine (28).....	137	ZYMAXID	138
zovia 1-35 (28)	137	ZYDELIG.....	29	ZYPREXA RELPREVV	58
		ZYFLO	152		