

2022



Health Insurance Exchange

ABRIDGED FORMULARY



**CHRISTUS Health Plan
Louisiana On-Exchange
covers members in the
following counties:**

Caddo
Bossier
Red River
Vernon
Rapides
Grant
Calcasieu

CHRISTUS Health Plan

2022 Formulary

Revised: October 27, 2021

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

Note to members:

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

This document includes a list of the drugs (formulary) for our plan, which is current as of formulary revision date.

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

What is the CHRISTUS Health Plan Formulary?

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

Can the Formulary (drug list) change?

Generally, if you are taking a drug on our 2021 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2021 coverage year except when a new, less expensive generic drug becomes available or when new adverse information about the safety or effectiveness of a drug is released. Other types of formulary changes, such as removing a drug from our formulary, will not affect members who are currently taking the drug. It will remain available at the same cost sharing for those members taking it for the remainder of the coverage year. We feel it is important that you have continued access for the remainder of the coverage year to the formulary drugs that were available when you chose our plan, except for cases in which you can save additional money or we can ensure your safety.

If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug, we must notify affected members of the change at least 60 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 60-day supply of the drug. If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug. The enclosed formulary is current as of June 25, 2021. To get updated information about the drugs covered by CHRISTUS Health Plan, please contact our Member Services at 1-844-282-3025 or for TTY users, 711 or visit christushealthplan.org.

How do I use the Formulary?

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

By Medical Condition:

The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, CARDIOVASCULAR, HYPERTENSION/LIPIDS. If you know, what your drug is used for, look for the category name in the list that begins on page 8. Then look under the category name for your drug.

By Alphabetical Listing:

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 97. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

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

Are there any restrictions on my coverage?

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

- **Prior Authorization:** CHRISTUS Health Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from CHRISTUS Health Plan before you fill your prescriptions. If you do not get approval, CHRISTUS Health Plan may not cover the drug.
- **Quantity Limits:** For certain drugs, CHRISTUS Health Plan limits the amount of the drug that CHRISTUS Health Plan will cover. For example, CHRISTUS Health Plan provides 30 per 30 days per prescription for AFINITOR.
- **Step Therapy:** In some cases, CHRISTUS Health Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, CHRISTUS Health Plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, CHRISTUS Health Plan will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 9. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site. We have posted on line documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask CHRISTUS Health Plan to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section in your Evidence of Coverage “Prescription Drugs/Medications.”

What if my drug is not on the Formulary?

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

If you learn that CHRISTUS Health Plan does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by CHRISTUS Health Plan. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by CHRISTUS Health Plan.
- You can ask CHRISTUS Health Plan to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the mandatory CHRISTUS Health Plan Formulary?

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

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, CHRISTUS Health Plan limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, CHRISTUS Health Plan will only approve your request for an exception if the alternative drugs included on the plan’s formulary, or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

For requests for benefits that do not involve exceptions, the Plan will provide notice of its decision within 24 hours after receiving an expedited request or 72 hours after receiving a standard request. For requests for benefits that involve exceptions, the adjudication timeframes do not begin until the member’s prescriber submits his or her supporting statement to the Plan for review. For payment requests, including payment

requests that involve exceptions, CHRISTUS Health Plan will provide written notice of its decision (and make payment when appropriate) within 14 calendar days after receiving a request.

If CHRISTUS Health Plan coverage determination is unfavorable, the decision will contain the information needed to file a request for appeal/ redetermination with the Plan.

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

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

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

For more information

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

If you have questions about CHRISTUS Health Plan, please contact our Member Services at 1-844-282-3025 or for TTY users, 711 or visit christushealthplan.org.

CHRISTUS Health Plan Formulary

The formulary that begins on page 9 provides coverage information about some of the drugs covered by CHRISTUS Health Plan. If you have trouble finding your drug in the list, turn to the Index that begins on page 97.

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

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

Below is a list of abbreviations and that may appear on the following pages in the Requirements/Limits column that tells you if there are any special requirements for coverage of your drug.

List of Abbreviations

- 1:** Preferred Generic
- 2:** Non-Preferred Generic
- 3:** Preferred Brand
- 4:** Non-Preferred Brand
- 5:** Specialty

ACA: Affordable Care Act.

LA: Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

OTC: Over the Counter. An OTC drug is a non-prescription drug.

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

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

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

Legend:

Copay Amount by Drug Tier: You will pay either a copay or coinsurance amount for drugs in tiers 1 through 4. You will pay a coinsurance for tier 5. The amount you pay per prescription for drugs in tiers 1 through 5 may vary each time you fill a prescription. The copay and coinsurance amounts depend on the plan and metal level you selected. The chart below shows the range of copays or coinsurance you may pay. For your specific copay and coinsurance amounts please refer to your Summary of Benefits or visit our website at www.christushealthplan.org

Tier Number	Tier Name	Copay for a one-month supply filled at a network pharmacy with standard cost-sharing
0	ACA Drugs*	\$0
1	(Preventive) Preferred Generic Drugs	\$0 or 30-50% after deductible
2	Non-Preferred Generic Drugs	\$4-\$30 or 30-50% after deductible
3	Preferred Brand Drugs	\$35-\$100 after deductible or 30-50% after deductible
4	Non-Preferred Drugs	\$75-\$95 after deductible or 30-50% after deductible
5	Specialty Drugs	30-50% after deductible

Under \$100 - \$
\$100 - \$250 - \$\$
\$251 - \$500 - \$\$\$
\$501 - \$1000 - \$\$\$\$
Over \$1000 - \$\$\$\$\$

*Preventive drugs (e.g. statins, aspirin, folic acid, fluoride, iron supplements, smoking cessation products and FDA-approved contraceptives for women) are available at a zero-dollar cost share if prescribed under certain medical criteria by your doctor.

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List of Abbreviations

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

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

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ANCOBON	4	
<i>clotrimazole mucous membrane</i>	2	
CRESEMBA ORAL	3	PA
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION	4	
DIFLUCAN ORAL TABLET 100 MG, 200 MG, 50 MG	4	
DIFLUCAN ORAL TABLET 150 MG	4	QL
<i>fluconazole oral suspension for reconstitution</i>	2	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	2	
<i>fluconazole oral tablet 150 mg</i>	2	QL
<i>flucytosine</i>	2	
<i>griseofulvin microsize</i>	2	
<i>griseofulvin ultramicrosize</i>	2	
<i>itraconazole oral capsule</i>	2	QL
<i>itraconazole oral solution</i>	2	
<i>ketoconazole oral</i>	2	
NOXAFIL ORAL SUSPENSION	3	PA
<i>nystatin oral</i>	2	

Drug Name	Drug Tier	Requirements / Limits
ORAVIG	4	
<i>posaconazole oral tablet, delayed release (dr/ec)</i>	3	PA
SPORANOX ORAL SOLUTION	4	
SPORANOX PULSEPAK	4	QL
<i>terbinafine hcl oral</i>	2	
VFEND	4	PA
<i>voriconazole oral</i>	2	PA
ANTIVIRALS		
<i>abacavir</i>	2	
<i>abacavir-lamivudine</i>	2	
<i>abacavir-lamivudine-zidovudine</i>	2	
<i>acyclovir oral capsule</i>	2	
<i>acyclovir oral suspension 200 mg/5 ml</i>	2	
<i>acyclovir oral tablet</i>	2	
<i>adefovir</i>	2	
<i>amantadine hcl</i>	2	
APTIVUS	3	
<i>atazanavir</i>	2	
BARACLUDE ORAL SOLUTION	3	
BIKTARVY	3	
CIMDUO	3	
COMBIVIR	4	
DESCOVY	3	

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

Drug Name	Drug Tier	Requirements / Limits
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	2	
DOVATO	3	
EDURANT	3	
<i>efavirenz</i>	2	
<i>efavirenz-emtricitabin-tenofov</i>	2	
<i>efavirenz-lamivu-tenofov disop</i>	2	
<i>emtricitabine</i>	2	
<i>emtricitabine-tenofov (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	2	
<i>emtricitabine-tenofov (tdf) oral tablet 200-300 mg</i>	1	ACA
EMTRIVA ORAL CAPSULE	4	
EMTRIVA ORAL SOLUTION	3	
<i>entecavir</i>	2	
EPCLUSA ORAL TABLET 200-50 MG	5	PA; QL
EPCLUSA ORAL TABLET 400-100 MG	5	PA; \$\$\$\$\$; QL
EPIVIR	4	
EPIVIR HBV ORAL SOLUTION	3	
EPIVIR HBV ORAL TABLET	4	
EPZICOM	4	
<i>etravirine</i>	2	

Drug Name	Drug Tier	Requirements / Limits
EVOTAZ	4	
<i>famciclovir</i>	2	QL
FLUMADINE ORAL TABLET	4	
<i>fosamprenavir</i>	2	
FUZEON SUBCUTANEOUS RECON SOLN	5	\$\$\$\$
GENVOYA	3	
HARVONI ORAL PELLETS IN PACKET	5	PA; QL
HARVONI ORAL TABLET 45-200 MG	5	PA; QL
HARVONI ORAL TABLET 90-400 MG	5	PA; \$\$\$\$\$; QL
HEPSERA	4	
INTELENCE ORAL TABLET 25 MG	3	
INVIRASE ORAL TABLET	3	
ISENTRESS	3	
ISENTRESS HD	3	
JULUCA	3	
KALETRA ORAL SOLUTION	4	QL
<i>lamivudine</i>	2	
<i>lamivudine-zidovudine</i>	2	
LEXIVA ORAL SUSPENSION	3	
LEXIVA ORAL TABLET	4	
<i>lopinavir-ritonavir oral solution</i>	2	QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>lopinavir-ritonavir oral tablet</i>	2	
<i>nevirapine</i>	2	
NORVIR ORAL POWDER IN PACKET	3	
NORVIR ORAL SOLUTION	3	
NORVIR ORAL TABLET	4	
ODEFSEY	3	
<i>oseltamivir</i>	2	QL
PREVYMIS ORAL	3	QL
PREZISTA ORAL SUSPENSION	3	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	3	
RELENZA DISKHALER	4	QL
RETROVIR ORAL CAPSULE	4	
RETROVIR ORAL SYRUP	4	
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG	4	
REYATAZ ORAL POWDER IN PACKET	3	
<i>ribavirin inhalation</i>	2	
<i>rimantadine</i>	2	
<i>ritonavir</i>	2	
SELZENTRY	3	

Drug Name	Drug Tier	Requirements / Limits
<i>stavudine oral capsule 15 mg, 20 mg, 40 mg</i>	2	
SUSTIVA	4	
SYMFI	3	
SYMFI LO	3	
SYMTUZA	3	
TAMIFLU	4	QL
TEMIXYS	3	
<i>tenofovir disoproxil fumarate</i>	2	
TIVICAY	3	
TIVICAY PD	3	
TRIUMEQ	3	
TRIZIVIR	4	
TYBOST	4	
<i>valacyclovir</i>	2	QL
VALCYTE	4	
<i>valganciclovir</i>	2	
VEMLIDY	3	
VIEKIRA PAK	5	PA; \$\$\$\$\$; QL
VIRACEPT ORAL TABLET	3	
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HR 400 MG	4	
VIRAZOLE	4	\$\$\$\$
VIREAD ORAL POWDER	3	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	3	

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

Drug Name	Drug Tier	Requirements / Limits
VIREAD ORAL TABLET 300 MG	4	
VOSEVI	5	PA; \$\$\$\$; QL
XOFLUZA	4	QL
ZEPATIER	5	PA; \$\$\$\$; QL
ZIAGEN	4	
<i>zidovudine</i>	2	
ZOVIRAX ORAL SUSPENSION	4	
CEPHALOSPORINS		
<i>cefaclor oral capsule</i>	2	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	2	
<i>cefaclor oral tablet extended release 12 hr</i>	2	
<i>cefadroxil oral capsule</i>	2	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	2	
<i>cefadroxil oral tablet</i>	2	
<i>cefdinir</i>	2	
<i>cefditoren pivoxil</i>	2	
<i>cefixime</i>	2	
<i>cefpodoxime</i>	2	
<i>cefprozil</i>	2	
<i>cefuroxime axetil oral tablet</i>	2	
<i>cephalexin</i>	2	

Drug Name	Drug Tier	Requirements / Limits
KEFLEX ORAL CAPSULE 750 MG	4	
SUPRAX ORAL CAPSULE	4	
SUPRAX ORAL SUSPENSION FOR RECONSTITUTION	4	
SUPRAX ORAL TABLET,CHEWABLE	4	
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin oral</i>	2	QL
<i>clarithromycin</i>	2	
DIFICID	4	QL
<i>e.e.s. 400 oral tablet</i>	2	
E.E.S. GRANULES	4	
ERYPED 200	4	
ERYPED 400	4	
<i>ery-tab oral tablet,delayed release (dr/ec) 250 mg, 333 mg</i>	2	
ERY-TAB ORAL TABLET,DELAYED RELEASE (DR/EC) 500 MG	4	
<i>erythrocin (as stearate) oral tablet 250 mg</i>	2	
<i>erythromycin ethylsuccinate oral suspension for reconstitution</i>	2	
<i>erythromycin ethylsuccinate oral tablet</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin oral</i>	2	
ZITHROMAX ORAL PACKET	4	QL
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION	4	QL
ZITHROMAX ORAL TABLET 250 MG, 500 MG	4	QL
ZITHROMAX TRI-PAK	4	QL
ZITHROMAX Z-PAK	4	QL
MISCELLANEOUS ANTIINFECTIVES		
AEMCOLO	4	QL
<i>albendazole</i>	2	QL
ALBENZA	4	QL
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	3	QL
ARAKODA	4	QL
ARIKAYCE	5	PA; LA
<i>atovaquone</i>	2	
<i>atovaquone-proguanil</i>	1	QL
BENZNIDAZOLE	3	QL
BETHKIS	5	PA; \$\$\$\$\$; QL
BILTRICIDE	4	
CAYSTON	5	\$\$\$\$; LA; QL
<i>chloroquine phosphate</i>	1	QL
CLEOCIN HCL	4	

Drug Name	Drug Tier	Requirements / Limits
CLEOCIN PEDIATRIC	4	
<i>clindamycin hcl</i>	2	
<i>clindamycin pediatric</i>	2	
COARTEM	3	QL
CYCLOSERINE	4	
<i>dapsone oral</i>	2	
DARAPRIM	5	PA
EMVERM	3	QL
<i>ethambutol</i>	2	
FLAGYL ORAL CAPSULE	4	
HUMATIN	5	
HYDROXYCHLOROQUINE ORAL TABLET 100 MG, 300 MG, 400 MG	4	
<i>hydroxychloroquine oral tablet 200 mg</i>	2	QL
IMPAVIDO	3	QL
<i>isoniazid oral</i>	2	
<i>ivermectin oral</i>	2	QL
KITABIS PAK	5	PA; \$\$\$\$\$; QL
KRINTAFEL	4	QL
<i>linezolid</i>	2	PA
MALARONE	4	QL
MALARONE PEDIATRIC	4	QL
<i>mefloquine</i>	1	QL
MEPRON	4	
<i>metronidazole oral</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
MYAMBUTOL ORAL TABLET 400 MG	4	
MYCOBUTIN	4	
NEBUPENT	4	QL
<i>neomycin</i>	2	
<i>nitazoxanide</i>	2	QL
<i>paromomycin</i>	2	
PASER	4	
<i>pentamidine inhalation</i>	2	QL
<i>praziquantel</i>	2	
PRETOMANID	4	PA
PRIFTIN	3	
<i>primaquine</i>	1	QL
<i>pyrazinamide</i>	2	
<i>pyrimethamine</i>	5	PA
QUALAQUIN	4	QL
<i>quinine sulfate</i>	2	QL
<i>rifabutin</i>	2	
<i>rifampin oral</i>	2	
SIRTURO	3	PA; LA
SIVEXTRO ORAL	4	PA
SOLOSEC	3	QL
STROMEKTOL	4	QL
<i>tinidazole</i>	2	QL
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; \$\$\$\$; QL
<i>tobramycin in 0.225 % nacl</i>	5	PA; \$\$\$\$; QL
<i>tobramycin inhalation</i>	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
TOBRAMYCIN WITH NEBULIZER	5	PA; \$\$\$\$; QL
TRECTOR	4	
XENLETA ORAL	4	
XIFAXAN	3	QL
ZYVOX ORAL	4	PA
PENICILLINS		
<i>amoxicillin oral capsule</i>	2	
<i>amoxicillin oral suspension for reconstitution</i>	2	
<i>amoxicillin oral tablet</i>	2	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	2	
<i>amoxicillin-pot clavulanate</i>	2	
<i>ampicillin oral capsule 500 mg</i>	2	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	3	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 250-62.5 MG/5 ML	4	
AUGMENTIN XR	4	
<i>dicloxacillin</i>	2	
MOXATAG	4	
<i>penicillin v potassium</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
QUINOLONES		
BAXDELA ORAL	3	QL
CIPRO ORAL SUSPENSION,MIC ROCAPSULE RECON	4	
CIPRO ORAL TABLET 250 MG, 500 MG	4	
<i>ciprofloxacin</i>	2	
<i>ciprofloxacin hcl oral</i>	2	
FACTIVE	4	
<i>levofloxacin oral</i>	2	
<i>moxifloxacin oral</i>	2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	2	
SULFA'S & RELATED AGENTS		
BACTRIM	4	
BACTRIM DS	4	
<i>sulfadiazine</i>	2	
<i>sulfamethoxazole- trimethoprim oral</i>	2	
<i>sulfatrim</i>	2	
TETRACYCLINES		
ACTICLATE	4	ST
<i>avidoxy</i>	2	
AVIDOXY DK	4	ST
<i>coremino</i>	2	ST
<i>demeclocycline</i>	2	
<i>doxycycline hyclate oral capsule</i>	2	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	2	ST
<i>doxycycline hyclate oral tablet,delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 50 mg, 75 mg</i>	2	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i>	2	
<i>doxycycline monohydrate oral capsule 150 mg</i>	2	ST
<i>doxycycline monohydrate oral suspension for reconstitution</i>	2	
<i>doxycycline monohydrate oral tablet</i>	2	
<i>minocycline oral capsule</i>	2	
<i>minocycline oral tablet</i>	2	
<i>minocycline oral tablet extended release 24 hr</i>	2	ST
MINOLIRA ER	4	ST
<i>mondoxyne nl oral capsule 100 mg, 75 mg</i>	2	
MONODOX	4	ST
MORGIDOX 1X 50	4	ST
MORGIDOX 2X100	4	ST
<i>morgidox oral capsule 100 mg</i>	2	
NUZYRA ORAL	4	QL

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

Drug Name	Drug Tier	Requirements / Limits
ORACEA	4	ST
SEYSARA	4	PA
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	4	ST
TARGADOX	4	ST
tetracycline	2	
VIBRAMYCIN ORAL CAPSULE 100 MG	4	ST
VIBRAMYCIN ORAL SUSPENSION FOR RECONSTITUTION	4	ST
VIBRAMYCIN ORAL SYRUP	4	ST
URINARY TRACT AGENTS		
fosfomycin tromethamine	2	
FURADANTIN	4	
HIPREX	4	
MACROBID	4	
MACRODANTIN	4	
methenamine hippurate	2	
methenamine mandelate	2	
MONUROL	4	
nitrofurantoin	2	
nitrofurantoin macrocrystal	2	

Drug Name	Drug Tier	Requirements / Limits
nitrofurantoin monohyd/m-cryst	2	
PRIMSOL	4	
trimethoprim	2	
VANCOMYCIN		
VANCOCIN	4	QL
vancomycin oral capsule	2	QL
vancomycin oral recon soln	2	QL
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
leucovorin calcium oral	2	
MESNEX ORAL	3	
VISTOGARD	5	PA
XGEVA	5	PA; \$\$\$\$
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
abiraterone	5	PA; QL
AFINITOR	5	PA; \$\$\$\$\$; QL
AFINITOR DISPERZ ORAL TABLET FOR SUSPENSION 2 MG, 3 MG	5	PA; \$\$\$\$\$
AFINITOR DISPERZ ORAL TABLET FOR SUSPENSION 5 MG	5	PA; \$\$\$\$\$; QL
ALECENSA	5	PA; \$\$\$\$\$; QL

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

Drug Name	Drug Tier	Requirements / Limits
ALKERAN	4	
ALUNBRIG	5	PA; \$\$\$\$; QL
<i>anastrozole</i>	2	ACA
AROMASIN	4	
ASTAGRAF XL	4	ST
AYVAKIT	5	PA; LA; QL
AZASAN	4	
<i>azathioprine oral tablet 50 mg</i>	2	
BALVERSA	5	PA; LA
BEVACIZUMAB INTRAVITREAL SYRINGE 1.25 MG/0.05 ML	4	
<i>bexarotene</i>	5	PA
<i>bicalutamide</i>	2	
BOSULIF	5	PA; \$\$\$\$; QL
BRAFTOVI	5	PA; LA; QL
BRUKINSA	5	PA; LA
CABOMETYX	5	PA; \$\$\$\$; LA; QL
<i>capecitabine</i>	5	PA; \$\$\$
CAPRELSA	5	PA; LA; QL
CASODEX	4	
CELLCEPT	4	
COMETRIQ	5	PA
COPIKTRA	5	PA; LA; QL
COTELLIC	5	PA; \$\$\$\$; LA; QL
<i>cyclophosphamide oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
CYCLOPHOSPHAMIDE ORAL TABLET	4	
<i>cyclosporine modified</i>	2	
<i>cyclosporine oral capsule</i>	2	
DAURISMO	5	PA; QL
DROXIA	3	
ELIGARD	5	PA; \$\$\$
ELIGARD (3 MONTH)	5	PA; \$\$\$
ELIGARD (4 MONTH)	5	PA; \$\$\$
ELIGARD (6 MONTH)	5	PA; \$\$\$
EMCYT	3	
ENSPRYNG	5	PA
ERIVEDGE	5	PA; \$\$\$\$; QL
ERLEADA	5	PA; \$\$\$\$; QL
<i>erlotinib</i>	5	PA; QL
<i>etoposide oral</i>	2	
<i>everolimus (antineoplastic) oral tablet 2.5 mg</i>	5	PA; QL
<i>everolimus (antineoplastic) oral tablet 5 mg, 7.5 mg</i>	5	PA
<i>everolimus (immunosuppressive)</i>	2	
<i>exemestane</i>	2	ACA
FARESTON	4	
FARYDAK	5	PA; \$\$\$\$; QL

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

Drug Name	Drug Tier	Requirements / Limits
FEMARA	4	
<i>flutamide</i>	2	
GAVRETO	5	PA; LA; QL
<i>gengraf</i>	2	
GILOTRIF	5	PA; \$\$\$\$; QL
GLEOSTINE	3	
GLIADEL WAFER	4	
HYCAMTIN ORAL	5	PA; \$\$\$\$
HYDREA	4	
<i>hydroxyurea</i>	2	
IBRANCE ORAL CAPSULE	5	PA; \$\$\$\$; QL
IBRANCE ORAL TABLET	5	PA; QL
ICLUSIG	5	PA; QL
IDHIFA	5	PA; \$\$\$\$; LA; QL
<i>imatinib</i>	5	PA; \$\$\$\$; QL
IMBRUVICA	5	PA; QL
IMURAN	4	
INLYTA	5	PA; \$\$\$\$; QL
IRESSA	5	PA; \$\$\$\$; QL
JAKAFI	5	PA; \$\$\$\$; QL
JELMYTO	5	PA
KOSELUGO	5	PA
<i>lapatinib</i>	5	PA; QL
LENVIMA	5	PA; \$\$\$\$
<i>letrozole</i>	2	
LEUKERAN	3	

Drug Name	Drug Tier	Requirements / Limits
<i>leuprolide subcutaneous kit</i>	5	PA; \$\$\$\$
LONSURF	5	PA; \$\$\$\$
LORBRENA	5	PA; QL
LUPRON DEPOT	5	PA; \$\$\$
LUPRON DEPOT (3 MONTH)	5	PA; \$\$\$
LUPRON DEPOT (4 MONTH)	5	PA; \$\$\$
LUPRON DEPOT (6 MONTH)	5	PA; \$\$\$
LUPRON DEPOT-PED	5	PA; \$\$\$\$
LUPRON DEPOT-PED (3 MONTH)	5	PA; \$\$\$\$
LYNPARZA	5	PA; \$\$\$\$; QL
LYSODREN	5	
MATULANE	5	
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i>	2	
<i>megestrol oral tablet</i>	2	
MEKINIST	5	PA; \$\$\$\$; QL
MEKTOVI	5	PA; LA; QL
<i>melphalan</i>	2	
<i>mercaptopurine</i>	2	
<i>methotrexate sodium (pf)</i>	2	
<i>mycophenolate mofetil</i>	2	
<i>mycophenolate sodium</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
MYFORTIC	4	
MYLERAN	3	
NEORAL	4	
NERLYNX	5	PA; \$\$\$\$\$; LA
NEXAVAR	5	PA; \$\$\$\$\$; LA; QL
NILANDRON	4	PA
<i>nilutamide</i>	2	PA
NINLARO	5	PA; \$\$\$\$\$; QL
NUBEQA	5	PA; LA; QL
<i>octreotide acetate</i>	5	PA; \$\$\$\$\$
ODOMZO	5	PA; \$\$\$\$\$; LA; QL
PEMAZYRE	5	PA; LA; QL
PROGRAF ORAL CAPSULE	4	
PROGRAF ORAL GRANULES IN PACKET	3	
PURIXAN	5	
RAPAMUNE	4	
RETEVMO	5	PA; LA; QL
REZUROCK	4	PA; QL
ROZLYTREK	5	PA; LA; QL
RUBRACA	5	PA; \$\$\$\$\$; LA; QL
RYDAPT	5	PA; \$\$\$\$\$
SANDIMMUNE ORAL CAPSULE	4	
SANDIMMUNE ORAL SOLUTION	3	

Drug Name	Drug Tier	Requirements / Limits
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	5	PA; \$\$\$\$\$
SIGNIFOR	5	PA; \$\$\$\$\$
<i>sirolimus</i>	2	
SOLTAMOX	4	ACA
SOMATULINE DEPOT	5	PA; \$\$\$\$\$
SPRYCEL	5	PA; \$\$\$\$\$; QL
STIVARGA	5	PA; \$\$\$\$\$; QL
<i>sunitinib</i>	2	
SUPPRELIN LA	5	PA; \$\$\$\$
SUTENT	5	PA; \$\$\$\$\$; QL
SYNRIBO	5	PA
TABLOID	4	
TABRECTA	5	PA
<i>tacrolimus oral</i>	2	
TAFINLAR	5	PA; \$\$\$\$\$; QL
TAGRISO	5	PA; \$\$\$\$\$; LA; QL
TALZENNA	5	PA; QL
<i>tamoxifen</i>	2	ACA
TARCEVA	5	PA; \$\$\$\$\$; QL
TARGRETIN TOPICAL	5	PA
TASIGNA	5	PA; \$\$\$\$\$; QL
TAZVERIK	5	PA; LA

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

Drug Name	Drug Tier	Requirements / Limits
TEMODAR ORAL CAPSULE 100 MG, 140 MG, 180 MG, 250 MG	5	PA; \$\$\$\$\$
<i>temozolomide</i>	5	PA; \$\$\$\$\$
THALOMID	5	PA; \$\$\$\$\$; QL
TIBSOVO	5	PA
<i>toremifene</i>	2	
<i>tretinoin (antineoplastic)</i>	2	
TREXALL	4	
TUKYSA	5	PA; LA; QL
TURALIO	5	PA; LA; QL
TYKERB	5	PA; \$\$\$\$\$; LA; QL
VANTAS	5	PA; \$\$\$\$\$
VENCLEXTA	5	PA; LA
VENCLEXTA STARTING PACK	5	PA; QL
VERZENIO	5	PA; \$\$\$\$\$; LA; QL
VITRAKVI	5	PA; LA; QL
VIZIMPRO	5	PA; QL
VOTRIENT	5	PA; \$\$\$\$\$; QL
WELIREG	5	PA
XALKORI	5	PA; \$\$\$\$\$; QL
XELODA	5	PA; \$\$\$\$\$
XERMELO	5	PA; LA; QL
XOSPATA	5	PA; LA
XTANDI ORAL CAPSULE	5	PA; \$\$\$\$\$; QL
XTANDI ORAL TABLET	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
YONSA	5	PA; \$\$\$\$\$; QL
ZEJULA	5	PA; LA; QL
ZELBORAF	5	PA; \$\$\$\$\$; QL
ZOLINZA	5	PA; \$\$\$\$\$
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG	4	
ZORTRESS ORAL TABLET 1 MG	3	
ZYDELIG	5	PA; \$\$\$\$\$; QL
ZYKADIA ORAL TABLET	5	PA; QL
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH		
ANTICONVULSANTS		
BANZEL	4	PA
BRIVIACT ORAL	4	
<i>carbamazepine oral capsule, er multiphase 12 hr</i>	2	
<i>carbamazepine oral suspension 100 mg/5 ml, 200 mg/10 ml</i>	2	
<i>carbamazepine oral tablet</i>	2	
<i>carbamazepine oral tablet extended release 12 hr</i>	2	
<i>carbamazepine oral tablet, chewable</i>	2	
CARBATROL	4	
CELONTIN ORAL CAPSULE 300 MG	3	
<i>clobazam</i>	2	PA

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

Drug Name	Drug Tier	Requirements / Limits
<i>clonazepam</i>	2	
DEPAKOTE	4	ST
DEPAKOTE ER	4	ST
DEPAKOTE SPRINKLES	4	ST
DIACOMIT	5	PA
DIASTAT	4	
DIASTAT ACUDIAL	4	
<i>diazepam rectal</i>	2	
DILANTIN	3	
DILANTIN EXTENDED	4	
DILANTIN INFATABS	4	
DILANTIN-125	4	
<i>divalproex</i>	2	
EPIDIOLEX	5	PA; LA
<i>epitol</i>	2	
EQUETRO	4	
<i>ethosuximide</i>	2	
<i>felbamate</i>	2	
FELBATOL	4	
FYCOMPA	3	
<i>gabapentin oral capsule</i>	2	
<i>gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	2	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	2	
GABITRIL	4	

Drug Name	Drug Tier	Requirements / Limits
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR	4	ST
KLONOPIN	4	
LAMICTAL XR STARTER (BLUE)	4	ST
LAMICTAL XR STARTER (GREEN)	4	ST
LAMICTAL XR STARTER (ORANGE)	4	ST
<i>lamotrigine</i>	2	
<i>levetiracetam oral</i>	2	
MYSOLINE	4	
NAYZILAM	3	PA; QL
ONFI	4	PA
<i>oxcarbazepine</i>	2	
OXTELLAR XR	4	ST
<i>phenobarbital</i>	2	
PHENYTEK	4	
<i>phenytoin oral suspension</i>	2	
<i>phenytoin oral tablet, chewable</i>	2	
<i>phenytoin sodium extended</i>	2	
<i>pregabalin oral capsule</i>	2	
<i>pregabalin oral solution</i>	2	
<i>pregabalin oral tablet extended release 24 hr</i>	2	ST
<i>primidone</i>	2	
QUDEXY XR	3	ST

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

Drug Name	Drug Tier	Requirements / Limits
<i>roweepra</i>	2	
<i>rufinamide</i>	2	PA
SABRIL	5	PA; \$\$\$\$\$; LA
SPRITAM	4	ST
<i>subvenite</i>	2	
<i>subvenite starter (blue) kit</i>	2	
<i>subvenite starter (green) kit</i>	2	
<i>subvenite starter (orange) kit</i>	2	
SYMPAZAN	4	PA
TEGRETOL ORAL SUSPENSION	4	
TEGRETOL ORAL TABLET	4	
TEGRETOL XR	4	
<i>tiagabine</i>	2	
<i>topiramate oral capsule, sprinkle</i>	2	
<i>topiramate oral capsule, sprinkle, er 24hr</i>	2	ST
<i>topiramate oral tablet</i>	2	
TROKENDI XR	4	ST
<i>valproic acid</i>	2	
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)</i>	2	
VALTOCO	4	QL
<i>vigabatrin oral powder in packet</i>	5	PA; \$\$\$\$\$; LA

Drug Name	Drug Tier	Requirements / Limits
<i>vigabatrin oral tablet</i>	5	PA; LA
<i>vigadrone</i>	5	PA; \$\$\$\$\$
VIMPAT ORAL SOLUTION	3	
VIMPAT ORAL TABLET	3	
XCOPRI	4	QL
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	4	QL
XCOPRI TITRATION PACK	4	QL
ZARONTIN	4	
<i>zonisamide</i>	2	
ANTIPARKINSONISM AGENTS		
AZILECT	4	ST
<i>benztropine oral</i>	2	
<i>bromocriptine</i>	2	
<i>carbidopa</i>	2	
<i>carbidopa-levodopa</i>	2	
<i>carbidopa-levodopa-entacapone</i>	2	
COMTAN	4	
DUOPA	5	\$\$\$
<i>entacapone</i>	2	
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; QL

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

Drug Name	Drug Tier	Requirements / Limits
KYNMOBI SUBLINGUAL FILM 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	3	PA; QL
LODOSYN	4	
MIRAPEX ER	4	
NEUPRO	4	
NOURIANZ	5	PA; LA; QL
OSMOLEX ER	5	PA; QL
PARLODEL	4	
<i>pramipexole</i>	2	
<i>rasagiline</i>	2	
<i>ropinirole</i>	2	
RYTARY	4	
<i>selegiline hcl</i>	2	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	4	
STALEVO 100	4	
STALEVO 125	4	
STALEVO 150	4	
STALEVO 200	4	
STALEVO 50	4	
STALEVO 75	4	
TASMAR ORAL TABLET 100 MG	4	
<i>tolcapone</i>	2	
<i>trihexyphenidyl</i>	2	
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR	3	PA; QL
AJOVY AUTOINJECTOR	3	PA; QL

Drug Name	Drug Tier	Requirements / Limits
AJOVY SYRINGE	3	PA; QL
<i>almotriptan malate</i>	2	QL
AMERGE	4	ST; QL
CAFERGOT	4	
D.H.E.45	4	
<i>dihydroergotamine injection</i>	2	
<i>dihydroergotamine nasal</i>	2	ST; QL
<i>eletriptan</i>	2	QL
EMGALITY PEN	3	PA; QL
EMGALITY SYRINGE	3	PA; QL
ERGOMAR	4	
<i>ergotamine-caffeine</i>	2	
FROVA	4	ST; QL
<i>frovatriptan</i>	2	QL
<i>migergot</i>	2	
MIGRANAL	4	ST; QL
<i>naratriptan</i>	2	QL
NURTEC ODT	4	PA; QL
REYVOW	4	PA; QL
<i>rizatriptan</i>	2	QL
<i>sumatriptan</i>	2	QL
<i>sumatriptan succinate oral</i>	2	QL
<i>sumatriptan succinate subcutaneous cartridge</i>	2	QL
<i>sumatriptan succinate subcutaneous pen injector</i>	2	QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>sumatriptan succinate subcutaneous solution</i>	2	QL
<i>sumatriptan-naproxen</i>	2	ST; QL
TOSYMRA	4	ST; QL
UBRELVY	4	PA; QL
ZEMBRACE SYMTOUCH	4	ST; QL
<i>zolmitriptan oral</i>	2	QL
ZOMIG NASAL	3	ST; QL
MISCELLANEOUS NEUROLOGICAL THERAPY		
ARICEPT	4	ST
AUSTEDO	5	PA; \$\$\$\$; LA; QL
<i>dalfampridine</i>	5	PA; QL
<i>donepezil oral tablet 10 mg, 5 mg</i>	2	
<i>donepezil oral tablet 23 mg</i>	2	ST
<i>donepezil oral tablet, disintegrating</i>	2	
EVRYSDI	5	PA; LA; QL
EXELON PATCH	4	ST
<i>galantamine</i>	2	
HORIZANT	4	ST
INGREZZA ORAL CAPSULE 60 MG	5	PA; LA; QL
KEVEYIS	5	PA
<i>memantine oral capsule, sprinkle, er 24hr</i>	2	
<i>memantine oral solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>memantine oral tablet</i>	2	
MEMANTINE ORAL TABLETS, DOSE PACK	4	
NAMENDA ORAL TABLET	4	ST
NAMENDA TITRATION PAK	4	
NAMENDA XR ORAL CAP, SPRINKLE, ER 24HR DOSE PACK	4	
NAMZARIC	3	ST
NUEDEXTA	3	PA
RAZADYNE ER	4	ST
<i>rivastigmine</i>	2	
<i>rivastigmine tartrate</i>	2	
RUZURGI	5	PA
TEGSEDI	5	PA; LA
<i>tetrabenazine</i>	5	PA; \$\$\$\$; QL
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
<i>baclofen oral</i>	2	
<i>carisoprodol</i>	2	
<i>carisoprodol-aspirin</i>	2	
<i>carisoprodol-aspirin-codeine</i>	2	
<i>chlorzoxazone</i>	2	
<i>cyclobenzaprine</i>	2	
DANTRIUM ORAL CAPSULE 25 MG, 50 MG	4	
<i>dantrolene oral</i>	2	
FEXMID	4	ST

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

Drug Name	Drug Tier	Requirements / Limits
LORZONE	4	ST
meprobamate	2	
metaxalone	2	
methocarbamol oral	2	
NORGESIC FORTE	4	
orphenadrine citrate oral	2	
orphenadrine-asa-caffeine	2	
orphengesic forte	2	
pyridostigmine bromide oral syrup	2	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	4	
pyridostigmine bromide oral tablet 60 mg	2	
pyridostigmine bromide oral tablet extended release	2	
SKELAXIN	4	
SOMA	4	
tizanidine	2	
vanadom	2	
ZANAFLEX	4	
NARCOTIC ANALGESICS		
acetaminophen-caff-dihydrocod oral capsule	2	
acetaminophen-caff-dihydrocod oral tablet	2	ST
acetaminophen-codeine oral solution 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml	2	

Drug Name	Drug Tier	Requirements / Limits
acetaminophen-codeine oral tablet	2	
ACTIQ	4	PA; QL
ascomp with codeine	2	
BELBUCA BUCCAL FILM 150 MCG, 450 MCG, 750 MCG, 900 MCG	3	PA; QL
BELBUCA BUCCAL FILM 300 MCG, 600 MCG, 75 MCG	3	ST; QL
buprenorphine	2	ST
buprenorphine hcl sublingual	2	
butalbital compound w/codeine	2	
butalbital-acetaminop-caf-cod	2	
butalbital-acetaminophen	2	
butalbital-acetaminophen-caff	2	
butalbital-aspirin-caffeine	2	
codeine sulfate	2	
codeine-bitalbital-asa-caff	2	ST
DILAUDID	4	
diskets	2	PA
DSUVIA	4	
dvorah	2	ST
endocet	2	
ESGIC	4	ST
fentanyl	2	PA; ST; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>fentanyl citrate buccal lozenge on a handle</i>	2	PA; QL
FIORICET	4	ST
FIORICET WITH CODEINE	4	ST
<i>hydrocodone bitartrate</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15 ml(15 ml)</i>	2	ST
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	2	
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	2	
<i>hydrocodone-ibuprofen</i>	2	
<i>hydromorphone oral liquid</i>	2	
<i>hydromorphone oral tablet</i>	2	
<i>hydromorphone oral tablet extended release 24 hr</i>	2	PA; QL
<i>hydromorphone rectal</i>	2	
HYSINGLA ER	3	ST; QL
<i>levorphanol tartrate oral tablet 2 mg</i>	2	
<i>levorphanol tartrate oral tablet 3 mg</i>	2	PA
LORTAB ELIXIR	4	

Drug Name	Drug Tier	Requirements / Limits
<i>meperidine oral solution</i>	2	
<i>meperidine oral tablet 50 mg</i>	2	
<i>methadone oral concentrate</i>	2	PA
<i>methadone oral solution</i>	2	PA
<i>methadone oral tablet</i>	2	PA
<i>methadone oral tablet,soluble</i>	2	PA
<i>methadose oral concentrate</i>	2	PA
<i>methadose oral tablet,soluble</i>	2	PA
<i>morphine concentrate oral solution</i>	2	
<i>morphine oral capsule, er multiphase 24 hr</i>	2	PA; QL
<i>morphine oral capsule,extend.release pellets</i>	2	PA; QL
<i>morphine oral solution</i>	2	
<i>morphine oral tablet</i>	2	
<i>morphine oral tablet extended release</i>	2	PA; QL
<i>morphine rectal</i>	2	
MS CONTIN	4	PA; QL
NALOCET	4	
OXAYDO	4	
<i>oxycodone oral capsule</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>oxycodone oral concentrate</i>	2	
<i>oxycodone oral solution</i>	2	
<i>oxycodone oral tablet</i>	2	
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 2.5-300 mg</i>	2	ST
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-325 mg</i>	2	
OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR	3	ST; QL
<i>oxymorphone oral tablet</i>	2	
<i>oxymorphone oral tablet extended release 12 hr</i>	2	PA; ST; QL
<i>prolate oral tablet</i>	2	ST
ROXICODONE	4	
<i>tencon</i>	2	
TREZIX	4	
<i>vtol lq</i>	2	
<i>zebutal</i>	2	
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen</i>	1	ACA; OTC
ANAPROX DS	4	
ARTHROTEC 50	4	ST
ARTHROTEC 75	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>aspirin low dose</i>	1	ACA; OTC
<i>aspirin oral tablet</i>	1	ACA; OTC
<i>aspirin oral tablet,chewable</i>	1	ACA; OTC
<i>aspirin oral tablet,delayed release (dr/ec) 325 mg, 81 mg</i>	1	ACA; OTC
<i>aspir-trin</i>	1	ACA; OTC
<i>bayer aspirin</i>	1	ACA; OTC
<i>buprenorphine-naloxone sublingual tablet</i>	2	QL
<i>butorphanol injection</i>	2	
<i>butorphanol nasal</i>	2	QL
CAMBIA	4	ST; QL
<i>cataflam</i>	2	
<i>celecoxib</i>	2	ST
<i>children's aspirin</i>	1	ACA; OTC
<i>choline,magnesium salicylate</i>	2	
CONZIP	4	ST; QL
DAYPRO	4	ST
<i>diclofenac potassium oral tablet 50 mg</i>	2	
<i>diclofenac sodium oral</i>	2	
<i>diclofenac sodium topical drops</i>	2	QL
<i>diclofenac sodium topical gel 1 %</i>	2	ST; QL
<i>diclofenac-misoprostol</i>	2	
<i>diflunisal</i>	2	
DISALCID	4	

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

Drug Name	Drug Tier	Requirements / Limits
DUEXIS	4	ST
EC-NAPROSYN	4	ST
<i>ecotrin</i>	1	ACA; OTC
<i>ecotrin low strength</i>	1	ACA; OTC
<i>etodolac</i>	2	
FELDENE	4	ST
<i>fenoprofen oral tablet</i>	2	ST
FLECTOR	3	ST; QL
<i>flurbiprofen oral tablet 100 mg</i>	2	
<i>ibu</i>	2	
<i>ibuprofen oral suspension</i>	2	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	2	
<i>ibuprofen-famotidine</i>	2	ST
INDOCIN RECTAL	4	
<i>indomethacin oral</i>	2	
<i>ketoprofen oral capsule 25 mg</i>	2	ST
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	2	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr 200 mg</i>	2	ST
<i>ketorolac oral</i>	2	QL
KLOXXADO	3	QL
LICART	3	ST; QL
LODINE ORAL TABLET	4	ST
<i>meclofenamate</i>	2	
<i>mefenamic acid</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>meloxicam oral tablet 15 mg</i>	2	
<i>meloxicam oral tablet 7.5 mg</i>	2	QL
MOBIC ORAL TABLET 15 MG	4	ST
MOBIC ORAL TABLET 7.5 MG	4	ST; QL
<i>nabumetone</i>	2	
NALFON ORAL TABLET	4	ST
<i>naloxone injection solution</i>	2	
<i>naloxone injection syringe</i>	2	
<i>naltrexone</i>	2	
NAPRELAN CR	4	ST
NAPROSYN ORAL SUSPENSION	4	ST
NAPROSYN ORAL TABLET 500 MG	4	ST
<i>naproxen oral suspension</i>	2	ST
<i>naproxen oral tablet</i>	2	
<i>naproxen oral tablet, delayed release (dr/ec)</i>	2	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	
<i>naproxen sodium oral tablet, er multiphase 24 hr 375 mg</i>	2	
<i>naproxen sodium oral tablet, er multiphase 24 hr 500 mg</i>	2	ST

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

Drug Name	Drug Tier	Requirements / Limits
NAPROXEN SODIUM ORAL TABLET, ER MULTIPHASE 24 HR 750 MG	4	ST
<i>naproxen-esomeprazole</i>	2	ST
NARCAN	3	QL
<i>oxaprozin</i>	2	
<i>pentazocine-naloxone</i>	2	
<i>piroxicam</i>	2	
RELAFEN	4	ST
<i>salsalate</i>	2	
SPRIX	5	ST; QL
<i>st joseph aspirin</i>	1	ACA; OTC
<i>st. joseph aspirin</i>	1	ACA; OTC
<i>sulindac</i>	2	
<i>tolmetin oral capsule</i>	2	ST
<i>tolmetin oral tablet 200 mg</i>	2	
<i>tolmetin oral tablet 600 mg</i>	2	ST
TRAMADOL ORAL CAPSULE,ER BIPHASE 24 HR 17-83	4	ST; QL
TRAMADOL ORAL CAPSULE,ER BIPHASE 24 HR 25-75 100 MG, 200 MG	4	ST; QL
TRAMADOL ORAL TABLET 100 MG	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>tramadol oral tablet 50 mg</i>	2	QL
<i>tramadol oral tablet extended release 24 hr</i>	2	PA; QL
<i>tramadol oral tablet, er multiphase 24 hr</i>	2	ST; QL
<i>tramadol-acetaminophen</i>	2	QL
ULTRACET	4	QL
ULTRAM	4	QL
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY MYCITE	4	QL
ABILIFY MYCITE MAINTENANCE KIT	4	QL
ABILIFY MYCITE STARTER KIT	4	QL
ADASUVE	4	
ADDYI	4	PA
ADHANSIA XR	4	PA
ADZENYS XR-ODT	4	ST
<i>alprazolam</i>	2	
<i>alprazolam intensol</i>	2	
<i>amitriptyline</i>	2	
<i>amitriptyline-chlordiazepoxide</i>	2	
<i>amoxapine</i>	2	
<i>amphetamine sulfate</i>	2	PA
ANAFRANIL	4	
ALENZIN	4	ST; QL
APTENSIO XR	4	PA; ST
<i>aripiprazole oral solution</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>aripiprazole oral tablet</i>	2	QL
<i>aripiprazole oral tablet, disintegrating</i>	2	QL
<i>armodafinil</i>	2	ST; QL
<i>asenapine maleate</i>	2	QL
ATIVAN ORAL	4	
<i>atomoxetine</i>	2	PA
BELSOMRA	4	ST; QL
<i>bupropion hcl oral tablet</i>	2	
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	2	QL
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	4	ST; QL
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	2	QL
<i>buspirone</i>	2	
<i>chlordiazepoxide hcl</i>	2	
<i>chlorpromazine oral</i>	2	
<i>citalopram oral solution</i>	1	
<i>citalopram oral tablet</i>	1	QL
<i>clomipramine</i>	2	
<i>clonidine hcl oral tablet extended release 12 hr</i>	2	PA
<i>clorazepate dipotassium</i>	2	
<i>clozapine</i>	2	

Drug Name	Drug Tier	Requirements / Limits
CLOZARIL	4	
COTEMPLA XR-ODT	4	ST
DAYTRANA	3	PA; ST
DAYVIGO	4	ST
<i>desipramine</i>	2	
DESOXYN	4	ST
DESVENLAFAXIN E ORAL TABLET EXTENDED RELEASE 24 HR	4	ST; QL
<i>desvenlafaxine succinate</i>	2	ST; QL
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG, 5 MG	4	ST
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 15 MG	4	PA; ST
<i>dexmethylphenidate</i>	2	PA
<i>dextroamphetamine oral capsule, extended release</i>	2	PA
<i>dextroamphetamine oral solution</i>	2	PA
<i>dextroamphetamine oral tablet 10 mg, 5 mg</i>	2	PA
<i>dextroamphetamine oral tablet 15 mg, 20 mg, 30 mg</i>	2	
<i>dextroamphetamine-amphetamine</i>	2	PA
<i>diazepam intensol</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	2	
<i>diazepam oral tablet</i>	2	
<i>doxepin oral capsule</i>	2	
<i>doxepin oral concentrate</i>	2	
<i>doxepin oral tablet</i>	2	ST; QL
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	2	QL
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	2	ST; QL
DYANA VEL XR	3	PA; ST
EDLUAR	4	ST; QL
EMSAM	4	
<i>ergoloid</i>	2	
<i>escitalopram oxalate oral solution</i>	1	
<i>escitalopram oxalate oral tablet</i>	1	QL
<i>estazolam</i>	2	
<i>eszopiclone</i>	2	QL
EVEKEO	4	PA
EVEKEO ODT	4	PA
FANAPT	4	QL
FETZIMA	3	ST; QL
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	QL
<i>fluoxetine oral capsule 20 mg</i>	1	
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>fluoxetine oral solution</i>	1	
<i>fluoxetine oral tablet 10 mg</i>	1	PA; QL
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	1	PA
<i>fluphenazine hcl oral</i>	2	
<i>flurazepam</i>	2	
<i>fluvoxamine oral capsule, extended release 24hr</i>	1	PA; QL
<i>fluvoxamine oral tablet</i>	1	QL
FORFIVO XL	4	ST; QL
GEODON ORAL	4	QL
<i>guanfacine oral tablet extended release 24 hr</i>	2	PA
HALCION ORAL TABLET 0.25 MG	4	
<i>haloperidol</i>	2	
<i>haloperidol lactate oral</i>	2	
HETLIOZ	5	PA; \$\$\$\$\$; QL
HETLIOZ LQ	5	PA; QL
<i>imipramine hcl</i>	2	
<i>imipramine pamoate</i>	2	
INVEGA	4	QL
JORNAY PM	4	ST
KAPVAY	4	PA
KETAMINE SUBLINGUAL	4	
LATUDA	3	QL
<i>lithium carbonate</i>	2	
LITHOBID	4	

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

Drug Name	Drug Tier	Requirements / Limits
<i>lorazepam intensol</i>	2	
<i>lorazepam oral concentrate</i>	2	
<i>lorazepam oral tablet</i>	2	
<i>loxapine succinate</i>	2	
<i>maprotiline</i>	2	
MARPLAN	4	
<i>methamphetamine</i>	2	PA
METHYLIN ORAL SOLUTION	4	PA
<i>methylphenidate hcl oral cap,er sprinkle,biphasic 40-60</i>	2	PA
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	2	PA
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	2	PA
<i>methylphenidate hcl oral solution</i>	2	PA
<i>methylphenidate hcl oral tablet</i>	2	PA
<i>methylphenidate hcl oral tablet extended release</i>	2	PA
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	2	PA
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 72 MG	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl oral tablet,chewable</i>	2	PA
<i>midazolam oral syrup 2 mg/ml</i>	2	
<i>mirtazapine</i>	2	
MKO (MIDAZOLAM-KETAMINE-ONDAN)	4	
<i>modafinil</i>	2	ST; QL
<i>molindone</i>	2	
MYDAYIS	3	ST
NARDIL	4	
<i>nefazodone</i>	2	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	4	
<i>nortriptyline</i>	2	
NUPLAZID ORAL CAPSULE	5	PA; \$\$\$\$; QL
NUPLAZID ORAL TABLET 10 MG	5	PA; \$\$\$\$; QL
<i>olanzapine oral</i>	2	QL
<i>olanzapine-fluoxetine</i>	2	
<i>oxazepam</i>	2	
<i>paliperidone</i>	2	QL
PAMELOR	4	
PARNATE	4	
<i>paroxetine hcl oral tablet</i>	1	QL
<i>paroxetine hcl oral tablet extended release 24 hr</i>	1	PA; QL
<i>paroxetine mesylate(menop.sym)</i>	2	PA; QL

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

Drug Name	Drug Tier	Requirements / Limits
PAXIL CR	4	ST; QL
PAXIL ORAL SUSPENSION	4	ST
PAXIL ORAL TABLET	4	ST; QL
<i>perphenazine</i>	2	
<i>perphenazine-amitriptyline</i>	2	
<i>phenelzine</i>	2	
<i>pimozide</i>	2	
<i>procentra</i>	2	PA
<i>protriptyline</i>	2	
QUAZEPAM	4	
<i>quetiapine</i>	2	QL
QUILLICHEW ER	3	ST
QUILLIVANT XR	3	PA; ST
<i>ramelteon</i>	2	QL
RELEXXII	4	PA
REMERON ORAL TABLET 15 MG, 30 MG	4	
REMERON SOLTAB	4	
RESTORIL	4	
REXULTI	4	QL
RISPERDAL ORAL SOLUTION	4	
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	4	QL
<i>risperidone oral solution</i>	2	
<i>risperidone oral tablet</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>risperidone oral tablet, disintegrating</i>	2	QL
RITALIN	4	PA
RITALIN LA	4	PA; ST
<i>seconal sodium</i>	2	QL
SECUADO	4	QL
<i>sertraline oral concentrate</i>	1	
<i>sertraline oral tablet</i>	1	QL
SILENOR	4	ST; QL
SUNOSI	3	ST; QL
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	4	
<i>temazepam</i>	2	
<i>thioridazine</i>	2	
<i>thiothixene</i>	2	
TRANXENE T-TAB	4	
<i>tranylcypromine</i>	2	
<i>trazodone</i>	2	
<i>triazolam</i>	2	
<i>trifluoperazine</i>	2	
<i>trimipramine</i>	2	
TRINTELLIX	4	ST; QL
<i>venlafaxine oral capsule, extended release 24hr</i>	2	QL
<i>venlafaxine oral tablet</i>	2	QL
<i>venlafaxine oral tablet extended release 24hr</i>	2	ST; QL
VERSACLOZ	4	
VRAYLAR	4	QL

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

Drug Name	Drug Tier	Requirements / Limits
VYLEESI	5	PA; QL
VYVANSE ORAL CAPSULE	3	PA; ST
VYVANSE ORAL TABLET,CHEWABLE	3	ST
WAKIX	5	ST; LA; QL
XYREM	5	LA; QL
XYWAV	5	LA; QL
<i>zaleplon</i>	2	QL
<i>zenzedi oral tablet 10 mg, 5 mg</i>	2	PA
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	4	PA
<i>ziprasidone hcl</i>	2	QL
<i>zolpidem</i>	2	QL
ZOLPIMIST	4	ST; QL
ZYPREXA ORAL	4	QL
ZYPREXA ZYDIS	4	QL

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone oral</i>	2	
BETAPACE	4	ST; ACA
BETAPACE AF	4	ST; ACA
<i>disopyramide phosphate oral capsule</i>	2	
<i>dofetilide</i>	2	
<i>flecainide</i>	2	
<i>mexiletine</i>	2	
MULTAQ	4	
NORPACE	4	

Drug Name	Drug Tier	Requirements / Limits
NORPACE CR	4	
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	2	
<i>propafenone</i>	2	
<i>quinidine gluconate oral</i>	2	
<i>quinidine sulfate oral tablet</i>	2	
RYTHMOL SR	4	
<i>sorine</i>	2	ACA
<i>sotalol af</i>	2	ACA
<i>sotalol oral</i>	2	ACA
SOTYLIZE	3	ACA

ANTIHYPERTENSIVE THERAPY

ACCUPRIL	4	ACA
ACCURETIC	4	ACA
<i>acebutolol</i>	1	ACA
ADALAT CC	4	ST; ACA
ALDACTAZIDE	4	ACA
ALDACTONE	4	ACA
<i>aliskiren</i>	2	ACA
ALTACE	4	ACA
<i>amiloride</i>	2	ACA
<i>amiloride-hydrochlorothiazide</i>	2	ACA
<i>amlodipine</i>	1	ACA
<i>amlodipine-benazepril</i>	1	ACA
<i>amlodipine-olmesartan</i>	1	ACA
<i>amlodipine-valsartan</i>	1	ACA
<i>amlodipine-valsartan-hcthiazid</i>	1	ACA

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

Drug Name	Drug Tier	Requirements / Limits
<i>atenolol</i>	1	ACA
<i>atenolol-chlorthalidone</i>	1	ACA
<i>benazepril</i>	1	ACA
<i>benazepril-hydrochlorothiazide</i>	1	ACA
<i>betaxolol oral</i>	1	ACA
BIDIL	4	
<i>bisoprolol fumarate</i>	1	ACA
<i>bisoprolol-hydrochlorothiazide</i>	1	ACA
<i>bumetanide oral</i>	2	ACA
CALAN SR	4	ACA
<i>candesartan</i>	1	ACA
<i>candesartan-hydrochlorothiazid</i>	1	ACA
<i>captopril</i>	1	ACA
<i>captopril-hydrochlorothiazide</i>	1	ACA
CARDIZEM CD	4	ACA
CARDIZEM LA	4	ACA
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	4	ACA
CARDURA	4	ST; ACA; QL
CARDURA XL	4	ST; QL
CAROSPIR	4	PA; ACA
<i>cartia xt</i>	1	ACA
<i>carvedilol</i>	2	ACA
<i>carvedilol phosphate</i>	2	ACA
CATAPRES-TTS-1	4	ACA; QL
CATAPRES-TTS-2	4	ACA; QL
CATAPRES-TTS-3	4	ACA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	ACA
<i>clonidine</i>	2	ACA; QL
<i>clonidine hcl oral tablet</i>	2	ACA
CONSENSI	4	ACA
COREG CR	4	ST; ACA
CORGARD	4	ST; ACA
DEMSEER	4	PA; ACA
DIBENZYLINE	4	PA; ACA
<i>diltiazem hcl oral capsule,ext.rel 24h degradable</i>	1	ACA
<i>diltiazem hcl oral capsule,extended release 12 hr</i>	1	ACA
<i>diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	ACA
<i>diltiazem hcl oral capsule,extended release 24hr</i>	1	ACA
<i>diltiazem hcl oral tablet</i>	1	ACA
<i>diltiazem hcl oral tablet extended release 24 hr</i>	1	ACA
<i>dilt-xr</i>	1	ACA
DIURIL	4	ACA
<i>doxazosin</i>	2	ACA; QL
DYRENIUM	4	ACA
EDARBI	4	ST; ACA
EDECRIN	4	ACA
<i>enalapril maleate oral solution</i>	1	

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

Drug Name	Drug Tier	Requirements / Limits
<i>enalapril maleate oral tablet</i>	1	ACA
<i>enalapril-hydrochlorothiazide</i>	1	ACA
<i>eplerenone</i>	2	ACA
<i>eprosartan</i>	1	ACA
<i>ethacrynic acid</i>	2	ACA
<i>felodipine</i>	1	ACA
<i>fosinopril</i>	1	ACA
<i>fosinopril-hydrochlorothiazide</i>	1	ACA
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	2	ACA
<i>furosemide oral tablet</i>	2	ACA
<i>guanfacine oral tablet</i>	2	ACA
HEMANGEOL	5	
<i>hydralazine oral</i>	2	ACA
<i>hydrochlorothiazide</i>	1	ACA
<i>indapamide</i>	1	ACA
INSPIRA	4	ACA
<i>irbesartan</i>	1	ACA
<i>irbesartan-hydrochlorothiazide</i>	1	ACA
<i>isradipine</i>	1	ACA
<i>labetalol oral</i>	2	ACA
LASIX	4	ACA
<i>lisinopril</i>	1	ACA
<i>lisinopril-hydrochlorothiazide</i>	1	ACA
LOPRESSOR ORAL	4	ST; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>losartan</i>	1	ACA
<i>losartan-hydrochlorothiazide</i>	1	ACA
LOTENSIN HCT	4	ACA
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	4	ACA
<i>matzim la</i>	1	ACA
MAXZIDE	4	ACA
MAXZIDE-25MG	4	ACA
<i>methyldopa</i>	2	ACA
<i>methyldopa-hydrochlorothiazide</i>	2	ACA
<i>metolazone</i>	1	ACA
<i>metoprolol succinate</i>	1	ACA
<i>metoprolol ta-hydrochlorothiaz</i>	1	ACA
<i>metoprolol tartrate oral</i>	1	ACA
<i>metyrosine</i>	2	PA; ACA
MINIPRESS	4	ACA
<i>minoxidil oral</i>	2	ACA
<i>moexipril</i>	1	ACA
<i>nadolol</i>	1	ACA
<i>nadolol-bendroflumethiazide oral tablet 80-5 mg</i>	1	ACA
<i>nebivolol</i>	1	
<i>nicardipine oral</i>	1	ACA
<i>nifedipine</i>	1	ACA
<i>nimodipine</i>	2	ACA
<i>nisoldipine</i>	1	ACA
NYMALIZE ORAL SOLUTION 60 MG/10 ML	4	

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

Drug Name	Drug Tier	Requirements / Limits
NYMALIZE ORAL SYRINGE	4	ACA
<i>olmesartan</i>	1	ACA
<i>olmesartan-amlodipin-hcthiiazid</i>	1	ACA
<i>olmesartan-hydrochlorothiazide</i>	1	ACA
ORENITRAM	5	PA; \$\$\$\$\$
<i>perindopril erbumine</i>	1	ACA
<i>phenoxybenzamine</i>	2	PA; ACA
<i>pindolol</i>	1	ACA
<i>prazosin</i>	2	ACA
PRESTALIA	4	ST; ACA
PRINIVIL ORAL TABLET 20 MG	4	ACA
PROCARDIA XL	4	ST; ACA
<i>propranolol oral</i>	1	ACA
<i>propranolol-hydrochlorothiazid</i>	1	ACA
<i>quinapril</i>	1	ACA
<i>quinapril-hydrochlorothiazide</i>	1	ACA
<i>ramipril</i>	1	ACA
<i>spironolactone</i>	2	ACA
<i>spironolacton-hydrochlorothiaz</i>	2	ACA
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	4	ST; ACA
<i>taztia xt</i>	1	ACA
TEKTURNA HCT	3	ACA
<i>telmisartan</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>telmisartan-amlodipine</i>	1	ACA
<i>telmisartan-hydrochlorothiazid</i>	1	ACA
TENORETIC 100	4	ST; ACA
TENORETIC 50	4	ST; ACA
TENORMIN	4	ST; ACA
<i>terazosin</i>	2	ACA; QL
<i>tiadylt er</i>	1	ACA
TIAZAC	4	ACA
<i>timolol maleate oral</i>	1	ACA
<i>torseamide oral</i>	2	ACA
<i>trandolapril</i>	1	ACA
<i>trandolapril-verapamil</i>	1	ACA
<i>triamterene</i>	2	ACA
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	2	ACA
<i>triamterene-hydrochlorothiazid oral tablet</i>	2	ACA
UPTRAVI ORAL	5	PA; \$\$\$\$\$; LA
<i>valsartan</i>	1	ACA
<i>valsartan-hydrochlorothiazide</i>	1	ACA
VASERETIC	4	ACA
VASOTEC	4	ACA
<i>verapamil oral</i>	1	ACA
VERELAN	4	ACA
VERELAN PM	4	ACA
ZESTORETIC	4	ACA
ZESTRIL	4	ACA

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Drug Name	Drug Tier	Requirements / Limits
ZIAC	4	ST; ACA
CARDIAC GLYCOSIDES		
<i>digitek</i>	2	
<i>digox</i>	2	
<i>digoxin oral</i>	2	
LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG), 62.5 MCG (0.0625 MG)	4	
COAGULATION THERAPY		
ADVATE	5	PA; \$\$\$\$\$
ADYNOVATE	5	PA; \$\$\$\$\$
AFSTYLA	5	PA; \$\$\$\$\$
ALPROLIX	5	PA; \$\$\$\$\$
AMICAR	4	
<i>aminocaproic acid oral</i>	2	
ARIXTRA	5	\$\$\$\$\$
<i>aspirin-dipyridamole</i>	1	
BENEFIX	5	PA; \$\$\$\$\$
BRILINTA	3	ACA
CABLIVI INJECTION KIT	5	PA; LA
CEPROTIN (BLUE BAR)	5	
CEPROTIN (GREEN BAR)	5	
<i>cilostazol</i>	2	
<i>clopidogrel</i>	1	ACA
COAGADEX	5	PA
<i>dipyridamole oral</i>	1	
DOPTELET (15 TAB PACK)	5	PA; \$\$\$\$\$; LA; QL

Drug Name	Drug Tier	Requirements / Limits
EFFIENT	4	ACA
ELIQUIS	3	PA
ELIQUIS DVT-PE TREAT 30D START	3	PA
ELOCTATE	5	PA; \$\$\$\$\$
<i>enoxaparin</i>	5	\$\$\$\$\$
ESPEROCT	5	PA
<i>fondaparinux</i>	5	\$\$\$\$\$
FRAGMIN SUBCUTANEOUS SOLUTION	5	\$\$\$\$\$
FRAGMIN SUBCUTANEOUS SYRINGE	5	\$\$\$\$\$
HEMLIBRA	5	PA; \$\$\$\$\$
<i>hep flush-10 (pf)</i>	2	
HEPARIN (PORCINE) IN 0.9% NACL INTRAVENOUS PARENTERAL SOLUTION 2,500 UNIT/500 ML (5 UNIT/ML), 30,000 UNIT/1,000 ML, 5,000 UNIT/1,000 ML, 5,000 UNIT/500 ML (10 UNIT/ML)	4	
<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>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>heparin (porcine) in nacl (pf)</i>	2	
<i>heparin (porcine) injection cartridge</i>	2	
<i>heparin (porcine) injection solution</i>	2	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	2	
<i>heparin flush(porcine)-0.9nacl</i>	2	
<i>heparin lock flush (porcine) intravenous solution 100 unit/ml</i>	2	
<i>heparin lockflush(porcine)(pf)</i>	2	
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	4	
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	2	
<i>heparin, porcine (pf) injection solution 1,000 unit/ml</i>	2	
HEPARIN, PORCINE (PF) INJECTION SOLUTION 5,000 UNIT/0.5 ML	3	

Drug Name	Drug Tier	Requirements / Limits
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	2	
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	4	
<i>heparin, porcine (pf) intravenous solution 100 unit/ml (1 ml)</i>	2	
<i>heparin, porcine (pf) intravenous syringe 1 unit/ml, 100 unit/ml</i>	2	
HEPARIN, PORCINE (PF) SUBCUTANEOUS	4	
IDELVION	5	PA; \$\$\$\$\$
IXINITY	5	PA; \$\$\$\$\$
<i>jantoven</i>	1	
JIVI	5	PA; \$\$\$\$\$
KOGENATE FS	5	PA; \$\$\$\$\$
KOVALTRY	5	PA; \$\$\$\$\$
MEPHYTON	4	QL
NOVOEIGHT	5	PA; \$\$\$\$\$
<i>pentoxifylline</i>	2	
<i>phytonadione (vitamin k1) injection solution</i>	2	
PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE	3	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	2	QL
<i>prasugrel</i>	1	ACA

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Drug Name	Drug Tier	Requirements / Limits
PROMACTA ORAL POWDER IN PACKET	5	PA; LA
PROMACTA ORAL TABLET	5	PA; \$\$\$\$\$; LA
REBINYN	5	PA; \$\$\$\$\$
RIXUBIS	5	PA; \$\$\$\$\$
SEVENFACT	5	PA
TAVALISSE	5	PA; LA; QL
<i>vitamin k</i>	2	
<i>vitamin k1 injection</i>	2	
<i>warfarin</i>	1	
WILATE INTRAVENOUS RECON SOLN 1,000-1,000 UNIT, 500-500 UNIT	5	PA; \$\$\$\$\$
XARELTO	3	PA
XARELTO DVT-PE TREAT 30D START	3	PA
ZONTIVITY	4	PA; ACA
LIPID/CHOLESTEROL LOWERING AGENTS		
<i>amlodipine-atorvastatin</i>	1	QL
ANTARA ORAL CAPSULE 30 MG, 90 MG	4	ST
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	QL
CADUET	4	ST; QL
<i>cholestyramine (with sugar)</i>	1	
<i>cholestyramine light</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>colesevelam</i>	1	ACA
COLESTID FLAVORED ORAL PACKET	4	ST
COLESTID ORAL GRANULES	4	PA; ST
COLESTID ORAL PACKET	4	PA
COLESTID ORAL TABLET	4	ST
<i>colestipol</i>	1	
<i>ezetimibe</i>	1	ST
<i>ezetimibe-simvastatin</i>	1	QL
<i>fenofibrate micronized</i>	1	
<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	1	
FENOFIBRATE ORAL CAPSULE	4	ST
<i>fenofibrate oral tablet 120 mg, 40 mg</i>	1	ST
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	
<i>fenofibric acid</i>	1	
<i>fenofibric acid (choline)</i>	1	
FENOGLIDE	4	ST
FIBRICOR	4	ST
FLOLIPID	4	ST; QL
<i>fluvastatin</i>	1	ACA; QL
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	1	PA
JUXTAPID	5	PA; \$\$\$\$\$; LA

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Drug Name	Drug Tier	Requirements / Limits
LESCOL XL	4	ST; QL
LIPOFEN	3	
LIVALO	3	ST; QL
LOPID	4	
<i>lovastatin</i>	1	ACA; QL
LOVAZA	4	PA
NEXLETOL	3	PA
NEXLIZET	3	PA
<i>niacin oral tablet 500 mg</i>	1	
<i>niacin oral tablet extended release 24 hr</i>	1	
NIASPAN EXTENDED-RELEASE	4	
<i>omega-3 acid ethyl esters</i>	2	PA
<i>pravastatin</i>	1	ACA; QL
<i>prevalite</i>	1	
QUESTRAN	4	ST
QUESTRAN LIGHT	4	ST
REPATHA PUSHTRONEX	3	PA; \$\$\$; QL
REPATHA SURECLICK	3	PA; \$\$\$\$; QL
REPATHA SYRINGE	3	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

Drug Name	Drug Tier	Requirements / Limits
<i>simvastatin oral tablet 80 mg</i>	1	QL
TRILIPIX	4	ST
VASCEPA	3	PA
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	4	ST; QL
MISCELLANEOUS CARDIOVASCULAR AGENTS		
ENTRESTO	3	QL
<i>ranolazine</i>	2	ACA
VECAMYL	4	
VERQUVO	3	QL
VYNDAMAX	5	PA
VYNDAQEL	5	PA
NITRATES		
GONITRO	4	ACA
ISORDIL	4	ACA
ISORDIL TITRADOSE ORAL TABLET 5 MG	4	ACA
<i>isosorbide dinitrate oral tablet</i>	2	ACA
<i>isosorbide mononitrate</i>	2	ACA
MINITRAN	4	ACA
<i>nitro-bid</i>	2	ACA
NITRO-DUR	4	ACA
<i>nitroglycerin sublingual</i>	2	ACA
<i>nitroglycerin transdermal patch 24 hour</i>	2	ACA
<i>nitroglycerin translingual</i>	2	ACA

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Drug Name	Drug Tier	Requirements / Limits
NITROLINGUAL	4	ACA
NITROMIST	4	ACA
NITROSTAT	4	ACA
<i>nitro-time</i>	2	ACA
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
<i>acitretin</i>	2	
ANALPRAM-HC TOPICAL	4	ST
<i>calcipotriene scalp</i>	2	QL
<i>calcipotriene topical cream</i>	2	QL
<i>calcipotriene topical ointment</i>	2	QL
<i>calcipotriene-betamethasone</i>	2	QL
<i>calcitriol topical</i>	2	
DOVONEX TOPICAL	4	QL
ENSTILAR	3	QL
EPIFOAM	4	ST
<i>hydrocortisone-pramoxine topical cream 2.5-1 %</i>	2	ST
OVACE	4	
OVACE PLUS	4	
OVACE PLUS SHAMPOO	4	
OVACE PLUS WASH	4	
PRAMOSONE	4	ST
<i>selenium sulfide topical lotion</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>selenium sulfide topical shampoo 2.25 %, 2.3 %</i>	2	
SELRX	4	
SKYRIZI SUBCUTANEOUS PEN INJECTOR	5	PA; QL
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; QL
SKYRIZI SUBCUTANEOUS SYRINGE KIT	5	PA; QL
SORIATANE ORAL CAPSULE 10 MG, 25 MG	4	
STELARA SUBCUTANEOUS	5	PA; \$\$\$\$\$; QL
<i>sulfacetamide sodium topical</i>	2	
TACLONEX	4	QL
TALTZ AUTOINJECTOR	5	PA; \$\$\$\$\$; QL
TALTZ AUTOINJECTOR (2 PACK)	5	PA; \$\$\$\$\$; QL
TALTZ AUTOINJECTOR (3 PACK)	5	PA; \$\$\$\$\$; QL
TALTZ SYRINGE	5	PA; \$\$\$\$\$; QL
TERSI FOAM	4	
TREMFYA SUBCUTANEOUS AUTO-INJECTOR	5	PA; QL
TREMFYA SUBCUTANEOUS SYRINGE	5	PA; \$\$\$\$\$; QL

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Drug Name	Drug Tier	Requirements / Limits
VECTICAL	4	
BURN THERAPY		
SILVADENE	4	
<i>silver sulfadiazine</i>	2	
<i>ssd</i>	2	
KERATOLYTICS		
INOVA 4-1	4	ST
INOVA 8-2	4	ST
MISCELLANEOUS DERMATOLOGICALS		
AMELUZ	4	
<i>ammonium lactate</i>	2	
CANTHARIDIN IN ACETONE	4	
CONDYLOX TOPICAL GEL	4	QL
CORTANE-B	4	
<i>diclofenac sodium topical gel 3 %</i>	2	PA; QL
<i>doxepin topical</i>	2	PA; QL
DUPIXENT PEN	5	PA; QL
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	5	PA; QL
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 300 MG/2 ML	5	PA; \$\$\$\$\$; QL
EFUDEX TOPICAL CREAM	4	
EUCRISA	4	ST; QL
FLUOROPLEX	4	

Drug Name	Drug Tier	Requirements / Limits
<i>fluorouracil topical cream 5 %</i>	2	
<i>fluorouracil topical solution</i>	2	
<i>iodine-sodium iodide topical tincture 2 %</i>	2	
IODOFLEX	4	
IODOSORB	4	
LEVULAN	4	
<i>methoxsalen</i>	2	
<i>methyl salicylate</i>	2	
<i>methyl salicylate topical liquid</i>	2	
PANRETIN	4	
PICATO	3	
<i>pimecrolimus</i>	2	QL
<i>podofilox</i>	2	
PROTOPIC	4	ST; QL
<i>prudoxin</i>	2	PA; QL
QBREXZA	4	PA
REGRANEX	3	QL
<i>tacrolimus topical</i>	2	ST; QL
TOLAK	4	
VALCHLOR	5	PA; \$\$\$\$\$
VEREGEN	4	PA; QL
<i>wintergreen oil</i>	2	
ZONALON	4	ST; QL
THERAPY FOR ACNE		
ABSORICA	4	
ABSORICA LD	4	
<i>acutane oral capsule 20 mg, 30 mg, 40 mg</i>	2	
ACZONE	4	ST

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Drug Name	Drug Tier	Requirements / Limits
<i>adapalene topical cream</i>	2	
<i>adapalene topical gel 0.3 %</i>	2	
<i>adapalene topical gel with pump</i>	2	
ADAPALENE TOPICAL LOTION	4	ST
<i>adapalene topical solution</i>	2	
<i>adapalene topical swab</i>	2	ST
<i>adapalene-benzoyl peroxide</i>	2	
AKLIEF	4	ST
ALTRENO	4	PA
<i>amnesteem</i>	2	
AMZEEQ	3	ST
ARAZLO	4	PA
AVAR LS	4	ST
<i>avar topical cleanser</i>	2	
AVAR TOPICAL PADS, MEDICATED	4	ST
AVAR-E GREEN	4	ST
AVAR-E LS	4	ST
<i>avita topical cream</i>	2	PA
AVITA TOPICAL GEL	4	PA
<i>azelaic acid</i>	2	
AZELEX	4	ST
BENZACLIN	4	ST
BENZACLIN PUMP	4	ST
BENZAMYCIN	4	ST

Drug Name	Drug Tier	Requirements / Limits
BENZEPRO (MICROSPHERES)	4	ST
<i>benzepro topical towelette</i>	2	
<i>benzoyl peroxide topical cleanser 7 %</i>	2	
<i>benzoyl peroxide topical foam 9.8 %</i>	2	
<i>bp 10-1</i>	2	ST
<i>claravis</i>	2	
CLEOCIN T TOPICAL LOTION	4	ST; QL
CLINDACIN ETZ TOPICAL KIT	4	ST
<i>clindacin p</i>	2	
CLINDACIN PAC	4	ST
<i>clindamycin phosphate topical foam</i>	2	QL
<i>clindamycin phosphate topical gel</i>	2	QL
<i>clindamycin phosphate topical gel, once daily</i>	2	QL
<i>clindamycin phosphate topical lotion</i>	2	QL
<i>clindamycin phosphate topical solution</i>	2	QL
<i>clindamycin phosphate topical swab</i>	2	
<i>clindamycin-benzoyl peroxide</i>	2	
<i>clindamycin-tretinoin</i>	2	PA

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

Drug Name	Drug Tier	Requirements / Limits
<i>dapsone topical</i>	2	
DIFFERIN TOPICAL CREAM	4	ST
DIFFERIN TOPICAL GEL WITH PUMP	4	ST
DIFFERIN TOPICAL LOTION	4	ST
ENZOCLEAR	4	ST
<i>ery pads</i>	2	
<i>erygel</i>	2	
<i>erythromycin with ethanol topical gel</i>	2	
<i>erythromycin with ethanol topical solution</i>	2	
<i>erythromycin-benzoyl peroxide</i>	2	
EVOCLIN	4	ST; QL
FABIOR	4	PA
FINACEA TOPICAL FOAM	3	ST
FINACEA TOPICAL GEL	4	ST
INOVA	4	ST
<i>isotretinoin</i>	2	
<i>ivermectin topical cream</i>	2	QL
METROCREAM	4	ST
METROGEL TOPICAL GEL 1 %	4	ST
<i>metronidazole topical</i>	2	
MIRVASO TOPICAL GEL WITH PUMP	3	PA
<i>myorisan</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>neuac</i>	2	
NEUAC KIT	4	ST
NORITATE	4	ST
ONEXTON TOPICAL GEL WITH PUMP	3	ST
PACNEX	4	ST
PLEXION	4	ST
PLEXION CLEANSING CLOTHS	4	ST
PR BENZOYL PEROXIDE	4	ST
RETIN-A	4	PA
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.06 %, 0.08 %	4	PA
RHOFADE	4	PA
<i>rosadan topical cream</i>	2	
<i>rosadan topical gel</i>	2	
ROSADAN TOPICAL KIT, CLEANSER AND GEL	4	ST
ROSADAN TOPICAL KIT, CLEANSER AND CREAM	4	ST
ROSANIL	4	ST
ROSULA	4	ST
<i>rosula cleansing cloths</i>	2	
SOOLANTRA	4	ST; QL
<i>sss 10-5</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium-sulfur</i>	2	
<i>sulfacetamide-sulfur-cleansr23</i>	2	
<i>sulfacleanse 8-4</i>	2	ST
SUMADAN	4	ST
SUMADAN XLT	4	ST
SUMAXIN	4	ST
SUMAXIN CP	4	ST
SUMAXIN TS	4	ST
<i>tazarotene topical cream</i>	2	PA
TAZORAC TOPICAL CREAM 0.05 %	3	PA
TAZORAC TOPICAL GEL	3	PA
<i>tretinoin</i>	2	PA
<i>tretinoin microspheres</i>	2	PA
VANOXIDE-HC	4	ST
<i>zenatane</i>	2	
ZIANA	4	PA; ST
TOPICAL ANESTHETICS		
COCAINE NASAL	4	
<i>glydo</i>	2	QL
GOPRELTO	4	
<i>lidocaine hcl laryngotracheal</i>	2	
<i>lidocaine hcl mucous membrane jelly</i>	2	QL
<i>lidocaine hcl mucous membrane jelly in applicator</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	2	
<i>lidocaine hcl-hydrocortison ac topical</i>	2	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	2	ST
<i>lidocaine topical ointment</i>	2	QL
<i>lidocaine viscous</i>	2	
<i>lidocaine-prilocaine topical cream</i>	2	QL
<i>lidocaine-prilocaine topical kit</i>	2	
<i>lidocort</i>	2	
<i>lta pre-attached</i>	2	
NUMBRINO	4	
SYNERA	4	
ZTLIDO	3	PA
TOPICAL ANTIBACTERIALS		
ALTABAX	4	ST; QL
CENTANY	4	ST; QL
CENTANY AT	4	ST; QL
<i>gentamicin topical</i>	2	QL
KLARON	4	ST
<i>lugols topical</i>	2	
<i>mafenide acetate</i>	2	
<i>mupirocin</i>	2	QL
<i>mupirocin calcium</i>	2	ST; QL
NEO-SYNALAR	4	
NEO-SYNALAR KIT	4	
<i>strong iodine topical</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium (acne)</i>	2	
SULFAMYLON TOPICAL CREAM	3	
SULFAMYLON TOPICAL PACKET	4	
XEPI	4	ST; QL
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK	4	
CICLODAN KIT TOPICAL SOLUTION	4	ST
<i>ciclodan topical cream</i>	2	QL
<i>ciclodan topical solution</i>	2	
<i>ciclopirox topical cream</i>	2	QL
<i>ciclopirox topical gel</i>	2	QL
<i>ciclopirox topical shampoo</i>	2	QL
<i>ciclopirox topical solution</i>	2	
<i>ciclopirox topical suspension</i>	2	QL
<i>ciclopirox-ure-camph-menth-euc</i>	2	
<i>clotrimazole topical</i>	2	QL
<i>clotrimazole-betamethasone</i>	2	QL
<i>econazole</i>	2	QL
ERTACZO	4	QL
EXELDERM	4	QL
EXTINA	4	QL

Drug Name	Drug Tier	Requirements / Limits
JUBLIA	4	ST
<i>ketconazole topical</i>	2	QL
<i>ketodan</i>	2	QL
<i>ketodan kit</i>	2	
LOPROX (AS OLAMINE)	4	QL
LOPROX KIT	4	QL
LOPROX TOPICAL SHAMPOO	4	QL
LUZU	4	QL
MENTAX	4	QL
MICONAZOLE NITRATE-ZINC OX-PET	4	QL
<i>naftifine</i>	2	QL
NAFTIN TOPICAL GEL	4	QL
<i>nyamyc</i>	2	QL
<i>nystatin topical</i>	2	QL
<i>nystatin-triamcinolone</i>	2	QL
<i>nystop</i>	2	QL
<i>oxiconazole</i>	2	QL
OXISTAT	4	QL
<i>tavaborole</i>	2	ST
VUSION	4	QL
TOPICAL ANTIVIRALS		
<i>acyclovir topical</i>	2	PA; QL
DENAVIR	4	
XERESE	4	
ZOVIRAX TOPICAL CREAM	4	PA; QL
TOPICAL CORTICOSTEROIDS		

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

Drug Name	Drug Tier	Requirements / Limits
<i>ala-cort topical cream 1 %</i>	2	
ALA-SCALP	4	ST
<i>alclometasone</i>	2	
<i>amcinonide topical cream</i>	2	ST
<i>amcinonide topical lotion</i>	2	ST
<i>apexicon e</i>	2	ST
<i>beser</i>	2	ST
<i>betamethasone dipropionate</i>	2	
<i>betamethasone valerate topical cream</i>	2	
<i>betamethasone valerate topical foam</i>	2	ST
<i>betamethasone valerate topical lotion</i>	2	
<i>betamethasone valerate topical ointment</i>	2	
<i>betamethasone, augmented</i>	2	
BRYHALI	4	ST
CAPEX	4	ST
<i>clobetasol scalp</i>	2	QL
<i>clobetasol topical cream</i>	2	QL
<i>clobetasol topical foam</i>	2	ST; QL
<i>clobetasol topical gel</i>	2	QL
<i>clobetasol topical lotion</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>clobetasol topical ointment</i>	2	QL
<i>clobetasol topical shampoo</i>	2	ST; QL
<i>clobetasol topical spray,non-aerosol</i>	2	ST; QL
<i>clobetasol-emollient topical cream</i>	2	QL
<i>clobetasol-emollient topical foam</i>	2	ST; QL
CLOBEX TOPICAL SHAMPOO	4	ST; QL
CLOBEX TOPICAL SPRAY, NON-AEROSOL	4	ST; QL
<i>clodan</i>	2	ST; QL
CLODAN KIT	4	ST
CLODERM	4	ST
CORDRAN TAPE LARGE ROLL	4	ST
CORDRAN TOPICAL CREAM	4	ST; QL
CORDRAN TOPICAL LOTION	4	ST; QL
CORDRAN TOPICAL OINTMENT	4	ST; QL
DERMA-SMOOTHIE/FS BODY OIL	4	ST
DERMA-SMOOTHIE/FS SCALP OIL	4	ST
DESONATE	4	ST
<i>desonide topical cream</i>	2	
<i>desonide topical gel</i>	2	ST

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

Drug Name	Drug Tier	Requirements / Limits
<i>desonide topical lotion</i>	2	ST
<i>desonide topical ointment</i>	2	
DESOWEN TOPICAL LOTION	4	ST
<i>desoximetasone</i>	2	ST
<i>desrx</i>	2	ST
<i>diflorasone</i>	2	ST; QL
DIPROLENE (AUGMENTED) TOPICAL OINTMENT	4	ST
DUOBRII	4	ST; QL
<i>fluocinolone</i>	2	
<i>fluocinolone and shower cap</i>	2	
<i>fluocinonide topical cream 0.05 %</i>	2	QL
<i>fluocinonide topical cream 0.1 %</i>	2	ST; QL
<i>fluocinonide topical gel</i>	2	QL
<i>fluocinonide topical ointment</i>	2	QL
<i>fluocinonide topical solution</i>	2	QL
<i>fluocinonide-e</i>	2	QL
<i>flurandrenolide</i>	2	ST; QL
<i>fluticasone propionate topical cream</i>	2	
<i>fluticasone propionate topical lotion</i>	2	ST

Drug Name	Drug Tier	Requirements / Limits
<i>fluticasone propionate topical ointment</i>	2	
<i>halcinonide</i>	2	ST
<i>halobetasol propionate topical cream</i>	2	
HALOBETASOL PROPIONATE TOPICAL FOAM	4	ST
<i>halobetasol propionate topical ointment</i>	2	
HALOG	4	ST
<i>hydrocortisone butyrate topical cream</i>	2	QL
<i>hydrocortisone butyrate topical lotion</i>	2	ST; QL
<i>hydrocortisone butyrate topical ointment</i>	2	ST
<i>hydrocortisone butyrate topical solution</i>	2	ST; QL
<i>hydrocortisone butyr-emollient</i>	2	QL
<i>hydrocortisone topical cream 1 %, 2.5 %</i>	2	
<i>hydrocortisone topical lotion 2.5 %</i>	2	
<i>hydrocortisone topical ointment 1 %, 2.5 %</i>	2	
<i>hydrocortisone valerate</i>	2	
IMPOYZ	4	ST; QL

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

Drug Name	Drug Tier	Requirements / Limits
KENALOG TOPICAL	4	ST; QL
LEXETTE	4	ST
LUXIQ	4	ST
<i>mometasone topical</i>	2	
<i>nolix</i>	2	ST; QL
NUCORT	4	ST
OLUX	4	ST; QL
OLUX-E	4	ST; QL
PANDEL	4	ST
<i>prednicarbate</i>	2	
PROCTOCORT TOPICAL	4	ST
PSORCON	4	ST; QL
<i>scalacort</i>	2	
SCALACORT DK	4	ST
SERNIVO	4	ST
SYNALAR	4	ST
SYNALAR CREAM KIT	4	ST
SYNALAR OINTMENT KIT	4	ST
SYNALAR TS	4	ST
TEMOVATE TOPICAL OINTMENT	4	ST; QL
TEXACORT	4	ST
TOPICORT TOPICAL CREAM	4	ST
TOPICORT TOPICAL GEL	4	ST
TOPICORT TOPICAL OINTMENT	4	ST
<i>tovet emollient</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>triamcinolone acetonide topical aerosol</i>	2	ST; QL
<i>triamcinolone acetonide topical cream</i>	2	
<i>triamcinolone acetonide topical lotion</i>	2	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	2	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	2	ST
<i>trianex</i>	2	ST
<i>triderm topical cream 0.1 %</i>	2	
<i>triderm topical cream 0.5 %</i>	2	ST
TRIDESILON	4	ST
<i>tritocin</i>	2	ST
ULTRAVATE TOPICAL LOTION	4	ST
TOPICAL ENZYMES		
SANTYL	3	QL
TOPICAL SCABICIDES / PEDICULICIDES		
<i>crotan</i>	2	
ELIMITE	4	
EURAX	4	
<i>ivermectin topical lotion</i>	2	
<i>lindane topical shampoo</i>	2	
<i>malathion</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
OVIDE	4	
<i>permethrin</i>	2	
<i>spinosad</i>	2	
ULESFIA	4	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
IRRIGATING SOLUTIONS		
<i>lactated ringers irrigation</i>	2	
<i>neomycin-polymyxin b gu</i>	2	
PHYSIOLYTE	4	
PHYSIOSOL IRRIGATION	4	
<i>ringer's irrigation</i>	2	
SORBITOL IRRIGATION SOLUTION 3 %	4	
SORBITOL-MANNITOL	4	
<i>tis-u-sol pentalyte</i>	2	
MISCELLANEOUS AGENTS		
<i>acamprosate</i>	2	
<i>acetic acid irrigation</i>	2	
AGRYLIN	4	
<i>anagrelide</i>	2	
<i>aqua care sodium chloride</i>	2	
<i>aqua care sterile water</i>	2	
BUPHENYL	4	
<i>caffeine citrate oral</i>	2	
CARBAGLU	5	\$\$\$\$\$; LA
CARNITOR (SUGAR-FREE)	4	

Drug Name	Drug Tier	Requirements / Limits
CARNITOR ORAL	4	
<i>cevimeline</i>	2	
CHEMET	3	PA
<i>deferasirox</i>	5	PA
<i>deferiprone</i>	5	PA
<i>disulfiram</i>	2	
<i>droxidopa</i>	5	PA
EMPAVELI	5	PA
EVOXAC	4	
EXEM	4	
FERRIPROX	5	PA
GLASSIA	5	PA; \$\$\$\$\$; LA
GLEOLAN	4	
INCRELEX	5	PA; \$\$\$\$\$; LA
INFASURF	4	
<i>levocarnitine (with sugar)</i>	2	
<i>levocarnitine oral solution 100 mg/ml</i>	2	
<i>levocarnitine oral tablet</i>	2	
LITHOSTAT	4	
METOPIRONE	4	
<i>midodrine</i>	2	
<i>nitisinone</i>	5	PA; LA
NITYR	5	PA; LA
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG	5	PA; LA
ORFADIN ORAL CAPSULE 20 MG	5	PA; \$\$\$\$\$; LA
ORFADIN ORAL SUSPENSION	5	PA; LA

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

Drug Name	Drug Tier	Requirements / Limits
<i>pilocarpine hcl oral tablet 5 mg</i>	2	
RADIOGARDASE	4	
RAVICTI	5	\$\$\$\$\$
RILUTEK	4	PA
<i>riluzole</i>	2	PA
<i>risedronate oral tablet 30 mg</i>	1	QL
SALAGEN (PILOCARPINE) ORAL TABLET 5 MG	4	
<i>sodium chloride 0.9 %</i>	2	
<i>sodium chloride 0.9 % (flush) injection syringe</i>	2	
<i>sodium chloride injection</i>	2	
<i>sodium chloride irrigation</i>	2	
<i>sodium phenylbutyrate</i>	2	
SURVANTA	4	
SYPRINE	4	PA
THIOLA	5	
THIOLA EC	5	
TIGLUTIK	4	PA
<i>tiopronin</i>	2	
<i>trientine</i>	2	PA
<i>water for irrigation, sterile</i>	2	
XURIDEN	5	
ZOKINVY	5	PA; QL
SMOKING DETERRENTS		

Drug Name	Drug Tier	Requirements / Limits
<i>bupropion hcl (smoking deter)</i>	1	ACA
<i>nicorette buccal gum 4 mg</i>	1	ACA; OTC
<i>nicotine</i>	1	ACA; OTC
<i>nicotine (polacrilex)</i>	1	ACA; OTC
NICOTROL	4	ACA
NICOTROL NS	4	ACA
<i>quit 2</i>	1	ACA; OTC
<i>quit 4</i>	1	ACA; OTC
<i>stop smoking aid</i>	1	ACA; OTC
EAR, NOSE & THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
ARESTIN	5	
<i>azelastine nasal aerosol,spray</i>	2	QL
<i>azelastine nasal spray,non-aerosol</i>	2	
<i>chlorhexidine gluconate mucous membrane</i>	2	
CLINPRO 5000	4	
<i>denta 5000 plus</i>	1	
<i>dentagel</i>	1	
EPISIL	4	
<i>fluoride (sodium) dental</i>	1	
FLUORIDEX DAILY DEFENSE	4	
FLUORIDEX SENSITIVITY RELIEF	4	
GELCLAIR	4	
GELX	4	

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Drug Name	Drug Tier	Requirements / Limits
<i>ipratropium bromide nasal</i>	2	QL
MUGARD	4	
<i>olopatadine nasal</i>	2	QL
<i>oralone</i>	2	
ORAMAGICRX	4	
<i>paroex oral rinse</i>	2	
PATANASE	4	QL
PERIDEX	4	
<i>periogard</i>	2	
<i>pilocarpine hcl oral tablet 7.5 mg</i>	2	
PREVIDENT	4	
PREVIDENT 5000 BOOSTER PLUS	4	
PREVIDENT 5000 DRY MOUTH	4	
PREVIDENT 5000 ENAMEL PROTECT	4	
PREVIDENT 5000 ORTHO DEFENSE	4	
PREVIDENT 5000 PLUS	4	
PREVIDENT 5000 SENSITIVE	4	
PROTHELIAL	5	
SALAGEN (PILOCARPINE) ORAL TABLET 7.5 MG	4	
<i>sf</i>	1	
<i>sf 5000 plus</i>	1	
<i>sodium fluoride 5000 dry mouth</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>sodium fluoride 5000 plus</i>	1	
<i>sodium fluoride-pot nitrate</i>	1	
<i>triamcinolone acetonide dental</i>	2	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid otic (ear)</i>	2	
<i>ciprofloxacin hcl otic (ear)</i>	2	
DERMOTIC OIL	4	
<i>flac otic oil</i>	2	
<i>fluocinolone acetonide oil</i>	2	
<i>hydrocortisone-acetic acid</i>	2	
<i>ofloxacin otic (ear)</i>	2	
OTIPRIO	4	QL
OTIC STEROID / ANTIBIOTIC		
CIPRO HC	4	
CIPRODEX	4	
<i>ciprofloxacin-dexamethasone</i>	2	
CORTISPORIN-TC	4	
<i>neomycin-polymyxin-hc otic (ear)</i>	2	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
ACTHAR	5	PA; \$\$\$\$\$
CORTEF	4	
<i>decadron oral tablet 0.5 mg</i>	2	
<i>dexabliss</i>	2	PA

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

Drug Name	Drug Tier	Requirements / Limits
<i>dexamethasone intensol</i>	2	
<i>dexamethasone oral elixir</i>	2	
<i>dexamethasone oral solution</i>	2	
<i>dexamethasone oral tablet</i>	2	
<i>dexamethasone oral tablets,dose pack</i>	2	ST
DXEVO	4	PA
<i>fludrocortisone</i>	2	
<i>hidex</i>	2	PA
<i>hydrocortisone oral</i>	2	
MEDROL	4	
MEDROL (PAK)	4	
<i>methylprednisolone</i>	2	
<i>millipred dp</i>	2	
<i>millipred oral tablet</i>	2	
ORAPRED ODT	4	
<i>prednisolone oral solution</i>	2	
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/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>	2	
<i>prednisolone sodium phosphate oral tablet,disintegrating</i>	2	
<i>prednisone</i>	2	
<i>prednisone intensol</i>	2	
RAYOS	4	ST

Drug Name	Drug Tier	Requirements / Limits
TAPERDEX ORAL TABLETS,DOSE PACK 1.5 MG (21 TABS), 1.5 MG (49 TABS)	4	ST
TAPERDEX ORAL TABLETS,DOSE PACK 1.5 MG (27 TABS)	4	PA
TRIESENCE (PF)	4	
ZCORT	4	ST
ANTITHYROID AGENTS		
<i>methimazole oral tablet 10 mg, 5 mg</i>	2	
<i>propylthiouracil</i>	2	
SSKI	4	
TAPAZOLE	4	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
FREESTYLE INSULINX STRIP	3	ACA; OTC
FREESTYLE INSULINX TEST STRIPS	3	ACA; OTC
FREESTYLE LITE STRIPS	3	ST; ACA; OTC
FREESTYLE TEST	3	ACA; OTC
ONETOUCH ULTRA TEST	3	ACA; OTC
ONETOUCH VERIO TEST STRIPS	3	ACA; OTC
PRECISION XTRA TEST	3	ACA; OTC
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		

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

Drug Name	Drug Tier	Requirements / Limits
GLUCAGEN DIAGNOSTIC KIT	3	
GLUCAGON HCL	4	
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.5 ML 29 GAUGE X 1/2"	4	
TRIJARDY XR	3	ST; ACA
GLUCOSE ELEVATING AGENTS		
BAQSIMI	3	ACA; QL
<i>diazoxide</i>	2	ACA
GLUCAGEN HYPOKIT	3	ACA; QL
GLUCAGON (HCL) EMERGENCY KIT	3	ACA; QL
<i>glucagon emergency kit (human)</i>	2	QL
GVOKE HYPOPEN 2-PACK	3	ACA; QL
GVOKE PFS 2-PACK SYRINGE	3	ACA; QL
PROGLYCEM	4	ACA
ZEGALOGUE AUTOINJECTOR	3	QL
ZEGALOGUE SYRINGE	3	QL
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
ACCU-CHEK GUIDE L1-L2 CTRL SOL	4	ACA; OTC
ACCU-CHEK SMARTVIEW CONTRL SOL	4	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
ACCU-TREND GLUCOSE CONTROL	4	ACA; OTC
ADVOCATE LOW CONTROL	4	ACA; OTC
ADVOCATE REDI-CODE+ CTRL LOW	4	ACA; OTC
AGAMATRIX CONTROL HIGH	4	ACA; OTC
ASSURE 4 CONTROL SOLUTION	4	ACA; OTC
ASSURE DOSE NORMAL CONTROL	4	ACA; OTC
ASSURE PRISM CONTROL 1-2 SOLN	4	ACA; OTC
AT HOME A1C	4	ACA; OTC
AUTOJECT 2 INJECTION DEVICE	3	ACA; OTC
AUTOPEN 1 TO 21 UNITS	3	ACA; OTC
AUTOSOFT 30	3	ACA
AUTOSOFT 90	3	ACA
AUTOSOFT XC INFUSION SET 23"	3	ACA
BD INTEGRA NEEDLE	3	
BD MICROTAINER LANCET 30 GAUGE	3	OTC
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	3	

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

Drug Name	Drug Tier	Requirements / Limits
BD ULTRA FINE LANCETS	3	OTC
BD ULTRA-FINE NANO PEN NEEDLE	3	OTC
BLOOD GLUCOSE CONTROL, NORMAL	4	ACA; OTC
BREEZE 2 CONTROL SOLUTION,HIGH	4	ACA; OTC
CARESENS CONTROL A NORMAL	4	ACA; OTC
CEQR SIMPLICITY	4	ACA
CLEVER CHOICE LEVEL 2 CONTROL	4	ACA; OTC
CONTOUR CONTROL SOLUTION, NML	4	ACA; OTC
CONTOUR NEXT LEV 2 CONTROL SOL	4	ACA; OTC
COOL CONTROL A SOLUTION	4	ACA; OTC
DEXCOM G4 RECEIVER	3	PA; ACA
DEXCOM G4 TRANSMITTER	3	PA; ACA; QL
DEXCOM G5 RECEIVER	3	PA; ACA
DEXCOM G5-G4 SENSOR	3	PA; ACA; QL
DEXCOM G6 RECEIVER	3	PA; ACA
DEXCOM G6 SENSOR	3	PA; ACA; QL

Drug Name	Drug Tier	Requirements / Limits
DEXCOM G6 TRANSMITTER	3	PA; ACA; QL
DEXCOM RECEIVER	3	PA; ACA
DIATRUE CONTROL SOLN NORMAL	4	ACA; OTC
EASY PLUS II HIGH CONTROL	4	ACA; OTC
EASY STEP HIGH CONTROL SOLN	4	ACA; OTC
EASY TALK HIGH CONTROL	4	ACA; OTC
EASY TOUCH BLU CTRL SOLN-L1,L3	4	OTC
EASY TRAK II CTRL SOLN-NORMAL	4	ACA; OTC
EASY TRAK LOW CONTROL	4	ACA; OTC
EASYGLUCO PLUS NORMAL CONTROL	4	ACA; OTC
EASYMAX 15 LEVEL 2	4	ACA; OTC
EASYMAX NORMAL CONTROL	4	ACA; OTC
ECLIPSE NEEDLE NEEDLE 27 GAUGE X 1/2"	4	
ELEMENT COMPACT NORMAL CONTROL	4	ACA; OTC
ELEMENT NORMAL CONTROL	4	ACA; OTC

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

Drug Name	Drug Tier	Requirements / Limits
EMBRACE EVO LEVEL 1	4	ACA; OTC
EMBRACE GLUCOSE CONTROL LOW	4	ACA; OTC
EMBRACE TALK CONTROL-LOW (L1)	4	ACA; OTC
ENLITE SYSTEM	4	PA; ACA
EVERSENSE SENSOR-HOLDER	4	PA; ACA
EVOLUTION NORMAL CONTROL	4	ACA; OTC
FORA GTEL MULTI-FUNCTN MONITOR	4	ACA; OTC
FORA KETONE CONTROL SOLN-L1	4	OTC
FORA NORMAL CONTROL	4	ACA; OTC
FORA TN'G ADVANCE PRO MONITOR	4	OTC
FORACARE GDH LOW CONTROL	4	ACA; OTC
FORTISCARE NORMAL	4	ACA; OTC
FREESTYLE CONTROL	3	ACA; OTC
FREESTYLE FREEDOM	3	ACA; OTC
FREESTYLE FREEDOM LITE	3	ACA; OTC
FREESTYLE INSULINX	3	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LIBRE 14 DAY READER	3	PA; ACA
FREESTYLE LIBRE 14 DAY SENSOR	3	PA; ACA; QL
FREESTYLE LIBRE 2 READER	3	PA
FREESTYLE LIBRE 2 SENSOR	3	PA
FREESTYLE LITE METER	3	ACA; OTC
GE100 CONTROL SOLUTION NORMAL	4	ACA; OTC
GENTEEL VACUUM LANCING DEVICE	4	ACA; OTC
GLUCOCARD 01 NORMAL CONTROL	4	ACA; OTC
GLUCOCOM CONTROL NORMAL	4	ACA; OTC
GLUCOSE CONTROL	4	ACA; OTC
GOJJI GLUCOSE CNTRL SOL-NORMAL	4	ACA; OTC
GOJJI KETONE CONTROL SOLN-L1	4	ACA; OTC
GOJJI MULTI-FUNCTIONAL METER KIT	4	ACA; OTC
HEALTHPRO HIGH-LOW CONTROL	4	ACA; OTC

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

Drug Name	Drug Tier	Requirements / Limits
INFINITY CONTROL SOLUTION NORM	4	ACA; OTC
INFINITY VOICE CTRL SOLN-LVL 2	4	ACA; OTC
INPEN (FOR HUMALOG)	4	ACA
INPEN (FOR NOVOLOG OR FIASP)	4	ACA
LANCETS 33 GAUGE	3	OTC
LANCING DEVICE	3	ACA; OTC
MEDISENSE	3	ACA; OTC
MEDISENSE GLUCOSE KETONE	3	ACA; OTC
MINIMED MIO ADVANCE INF SET23"	3	ACA
MINIMED QUICK SET 43"	3	ACA
MINIMED SILHOUETTE 23"	3	ACA
MINIMED SURE T 32"	3	ACA
MYGLUCOHEALTH CONTROL SOLUTION	4	ACA; OTC
NOVA MAX GLUCOSE CONTROL	4	ACA; OTC
NOVAMAX PLUS GLU-KET	4	ACA; OTC
NOVOPEN ECHO	4	ACA
OMNIPOD DASH 5 PACK POD	3	ACA

Drug Name	Drug Tier	Requirements / Limits
ON CALL EXPRESS CONTROL	4	ACA; OTC
ON CALL PLUS CONTROL	4	ACA; OTC
ON CALL VIVID CONTROL	4	ACA; OTC
ONETOUCH ULTRA CONTROL	3	ACA; OTC
ONETOUCH ULTRA2 METER	3	ACA; OTC
ONETOUCH ULTRAMINI	3	ACA; OTC
ONETOUCH VERIO FLEX METER	3	ACA; OTC
ONETOUCH VERIO IQ METER	3	ACA; OTC
ONETOUCH VERIO METER	3	ACA; OTC
ONETOUCH VERIO REFLECT METER	3	ACA; OTC
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2"	4	OTC
PRECISION XTRA KETONE-GLUCOSE	3	ACA; OTC
PRECISION XTRA MONITOR	3	ACA; OTC
PRODIGY CONTROL SOLUTION, LOW	4	ACA; OTC
PRODIGY CONTROL SOLUTION,HIGH	4	ACA; OTC

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

Drug Name	Drug Tier	Requirements / Limits
REFUAH PLUS GLUCOSE CONTROL	4	ACA; OTC
RIGHTEST CONTROL SOLUTION HIGH	4	ACA; OTC
SAFE-CLIP BY MAIL	3	ACA; OTC
SMARTEST CONTROL	4	ACA; OTC
SOLUS V2 CONTROL SOLUTION,HIGH	4	ACA; OTC
T:FLEX	3	ACA
T:SLIM X2	3	ACA
TELCARE CONTROL	4	ACA; OTC
TRUE METRIX LEVEL 1	4	ACA; OTC
TRUECONTROL LEVEL 0	4	ACA; OTC
TRUSTEEL INFUSION SET 23"	3	ACA
UNISTRIP LOW CONTROL	4	ACA; OTC
VARISOFT INFUSION SET 23"	3	ACA
VERASENS CONTROL SOLN-LEVEL 1	4	ACA; OTC
V-GO 20	3	ACA
V-GO 30	3	ACA
V-GO 40	3	ACA
VIVAGUARD INO CTRL SOLN-L1,2,3	4	ACA; OTC
WAVESENSE CONTROL SOLUTION	4	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
INSULIN THERAPY		
BASAGLAR KWIKPEN U-100 INSULIN	4	ACA
HUMALOG JUNIOR KWIKPEN U-100	3	ACA
HUMALOG KWIKPEN INSULIN	3	ACA
HUMALOG MIX 50-50 INSULN U-100	3	ACA
HUMALOG MIX 50-50 KWIKPEN	3	ACA
HUMALOG MIX 75-25 KWIKPEN	3	ACA
HUMALOG MIX 75-25(U-100)INSULN	3	ACA
HUMALOG U-100 INSULIN	3	ACA
HUMULIN 70/30 U-100 INSULIN	3	ACA
HUMULIN 70/30 U-100 KWIKPEN	3	ACA
HUMULIN N NPH INSULIN KWIKPEN	3	ACA
HUMULIN N NPH U-100 INSULIN	3	ACA
HUMULIN R REGULAR U-100 INSULN	3	ACA
HUMULIN R U-500 (CONC) INSULIN	3	ACA
HUMULIN R U-500 (CONC) KWIKPEN	3	ACA

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

Drug Name	Drug Tier	Requirements / Limits
LEVEMIR FLEXTouch U-100 INSULIN	3	ACA
LEVEMIR U-100 INSULIN	3	ACA
LYUMJEV KWIKPEN U-100 INSULIN	3	ACA
LYUMJEV KWIKPEN U-200 INSULIN	3	ACA
LYUMJEV U-100 INSULIN	3	ACA
SEMGLEE PEN U-100 INSULIN	3	ACA
SEMGLEE U-100 INSULIN	3	ACA
SOLIQUA 100/33	3	ACA; QL
TOUJEO MAX U-300 SOLOSTAR	3	ACA
TOUJEO SOLOSTAR U-300 INSULIN	3	ACA
TRESIBA FLEXTouch U-100	3	ACA
TRESIBA FLEXTouch U-200	3	ACA
TRESIBA U-100 INSULIN	3	ACA
XULTOPHY 100/3.6	3	ACA; QL
MISCELLANEOUS HORMONES		
ANDRODERM	3	PA; QL
<i>cabergoline</i>	2	QL
<i>calcitonin (salmon)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>calcitriol intravenous solution 1 mcg/ml</i>	2	
<i>calcitriol oral</i>	2	
CERDELGA	5	PA; \$\$\$\$\$
<i>cinacalcet</i>	2	ST
<i>danazol</i>	2	
DDAVP NASAL SOLUTION	3	
DDAVP ORAL	4	
DEPO-TESTOSTERONE	4	PA
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	2	
<i>desmopressin oral</i>	2	
<i>doxercalciferol oral</i>	2	
FORTESTA	4	PA; ST; QL
GALAFOLD	5	PA; \$\$\$\$\$; LA; QL
JATENZO	4	QL
JYNARQUE	5	PA; LA; QL
KUVAN	5	PA; \$\$\$\$\$
METHITEST	3	
<i>methyltestosterone oral capsule</i>	2	
MIACALCIN INJECTION	4	
<i>miglustat</i>	5	PA; \$\$\$\$\$; LA
MYALEPT	5	PA; \$\$\$\$\$; LA
NATESTO	3	PA; ST; QL
NATPARA	5	PA; \$\$\$\$\$; LA

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

Drug Name	Drug Tier	Requirements / Limits
NOC DURNA (MEN)	4	PA; QL
NOC DURNA (WOMEN)	4	PA; QL
ORILISSA	3	PA; QL
oxandrolone	2	
PALYNZIQ	5	PA; \$\$\$\$\$; LA; QL
paricalcitol intravenous	2	
paricalcitol oral	2	
RAYALDEE	4	
ROCALTROL	4	
SAMSCA	5	PA; \$\$\$\$\$; QL
sapropterin	5	PA
SOMAVERT	5	\$\$\$\$\$
STRENSIQ	5	PA; LA
SYNAREL	3	PA
TESTOPEL	5	PA
testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml	2	PA
testosterone enanthate	2	PA
TESTOSTERONE IMPLANT	4	PA
testosterone transdermal gel	2	PA; QL
testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation	2	PA; ST; QL

Drug Name	Drug Tier	Requirements / Limits
testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %), 20.25 mg/1.25 gram (1.62 %)	2	PA; QL
testosterone transdermal gel in packet	2	PA; QL
testosterone transdermal solution in metered pump w/app	2	PA; QL
tolvaptan oral tablet 30 mg	5	PA; LA; QL
VOGELXO	4	PA; ST; QL
XYOSTED	4	PA; QL
ZEMPLAR INTRAVENOUS	4	
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	4	
NON-INSULIN HYPOGLYCEMIC AGENTS		
acarbose	1	ACA
ACTOPLUS MET	4	ST; ACA; QL
ACTOS	4	ST; ACA; QL
AMARYL	4	ACA
BYDUREON BCISE	3	PA; ST; ACA; QL
BYETTA	3	PA; ST; ACA; QL
CYCLOSET	4	ACA
DUETACT	4	ST; ACA; QL
FARXIGA	3	ST; ACA; QL
glimepiride	1	ACA
glipizide	1	ACA

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

Drug Name	Drug Tier	Requirements / Limits
<i>glipizide-metformin</i>	1	ACA
GLUCOTROL ORAL TABLET 10 MG	4	ACA
GLUCOTROL XL	4	ACA
<i>glyburide</i>	1	ACA
<i>glyburide micronized</i>	1	ACA
<i>glyburide-metformin</i>	1	ACA
GLYNASE	4	ACA
GLYXAMBI	3	ST; ACA; QL
JANUMET	3	ACA; QL
JANUMET XR	3	ACA; QL
JANUVIA	3	ACA; QL
JARDIANCE	3	ST; ACA; QL
<i>metformin oral solution</i>	1	ST; ACA
<i>metformin oral tablet</i>	1	ACA
<i>metformin oral tablet extended release 24 hr</i>	1	ACA; QL
<i>metformin oral tablet extended release 24hr</i>	1	PA; ACA; QL
<i>metformin oral tablet,er gast.retention 24 hr</i>	1	PA; ACA; QL
<i>miglitol</i>	1	ACA
<i>nateglinide</i>	1	ACA
OSENI	4	ACA; QL

Drug Name	Drug Tier	Requirements / Limits
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG(2 MG/1.5 ML), 1 MG/DOSE (2 MG/1.5 ML)	3	PA; ST; ACA; QL
OZEMPIC SUBCUTANEOUS PEN INJECTOR 1 MG/DOSE (4 MG/3 ML)	3	PA; QL
<i>pioglitazone</i>	1	ACA; QL
<i>pioglitazone-glimepiride</i>	1	ACA; QL
<i>pioglitazone-metformin</i>	1	ACA; QL
PRECOSE	4	ACA
<i>repaglinide</i>	1	ACA
<i>repaglinide-metformin</i>	1	ACA; QL
RIOMET	4	ST; ACA
RIOMET ER	4	ST; ACA
RYBELSUS	3	PA; ST; ACA; QL
SEGLUROMET	3	ST; ACA; QL
STEGLATRO	3	ST; ACA; QL
STEGLUJAN	3	ST; ACA; QL
SYMLINPEN 120	3	PA; ST; ACA; QL
SYMLINPEN 60	3	PA; ST; ACA; QL
SYNJARDY	3	ST; ACA; QL
SYNJARDY XR	3	ST; ACA; QL
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML	3	PA; ST; QL

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

Drug Name	Drug Tier	Requirements / Limits
TRULICITY SUBCUTANEOUS PEN INJECTOR 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	3	PA; ST; ACA; QL
XIGDUO XR	3	ST; ACA; QL
THYROID HORMONES		
ARMOUR THYROID	3	
<i>euthyrox</i>	2	
<i>levo-t</i>	2	
<i>levothyroxine oral tablet</i>	2	
<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 oral</i>	2	
<i>np thyroid</i>	2	
<i>unithroid</i>	2	
<i>westhroid</i>	2	
GASTROENTEROLOGY		
ANTIDIARRHEALS & ANTISPASMODICS		
<i>anaspaz</i>	2	
<i>belladonna alkaloids-opium</i>	2	
<i>chlordiazepoxide-clidinium</i>	2	
CUVPOSA	4	
<i>dicyclomine oral capsule</i>	2	
<i>dicyclomine oral solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>dicyclomine oral tablet</i>	2	
<i>diphenoxylate-atropine</i>	2	
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	4	
DONNATAL ORAL TABLET	4	
<i>ed-spaz</i>	2	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	2	
<i>hyoscyamine sulfate oral</i>	2	
<i>hyoscyamine sulfate sublingual</i>	2	
<i>hyosyne</i>	2	
LEVBID	4	
LEVSIN ORAL	4	
LEVSIN/SL	4	
LOMOTIL	4	
<i>loperamide oral capsule</i>	2	
<i>methscopolamine</i>	2	
MOTOFEN	4	
NULEV	4	
<i>opium tincture</i>	2	
<i>oscimin oral tablet</i>	2	
<i>oscimin sl</i>	2	
<i>oscimin sr</i>	2	
<i>phenobarb-hyoscy-atropine-scop oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>phenobarb-hyoscy-atropine-scop oral tablet</i>	2	
<i>phenohydro oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	2	
<i>phenohydro oral tablet</i>	2	
SYMAX DUOTAB	4	
<i>symax fastabs</i>	2	
<i>symax-sl</i>	2	
<i>symax-sr</i>	2	
MISCELLANEOUS GASTROINTESTINAL AGENTS		
AKYNZEO (NETUPITANT)	4	QL
<i>alophen (bisacodyl)</i>	2	ACA; OTC
<i>alosetron</i>	2	
<i>alvimopan</i>	2	
ANA-LEX KIT	4	
ANALPRAM-HC RECTAL CREAM 1-1 %	4	
ANALPRAM-HC RECTAL CREAM 2.5-1 %	4	ST
ANALPRAM-HC SINGLES	4	
<i>anucort-hc</i>	2	
<i>aprepitant</i>	2	QL
APRISO	4	ST
AURYXIA	4	
AZULFIDINE	4	ST
AZULFIDINE EN-TABS	4	ST
<i>balsalazide</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>bisacodyl oral</i>	2	ACA; OTC
<i>bisa-lax (bisacodyl)</i>	2	ACA; OTC
BONJESTA	4	QL
<i>budesonide oral</i>	2	
<i>calcium acetate(phosphat bind)</i>	2	QL
CHENODAL	5	PA; LA
CHOLBAM ORAL CAPSULE 250 MG	5	PA
CHOLBAM ORAL CAPSULE 50 MG	5	PA; QL
<i>citrate of magnesia</i>	2	ACA; OTC
<i>citroma</i>	2	ACA; OTC
<i>clearlax oral powder</i>	2	ACA; OTC
COLAZAL	4	ST
COMPAZINE	4	
<i>compro</i>	2	
<i>constulose</i>	2	
CORTENEMA	4	
CREON	3	
<i>cromolyn oral</i>	2	
CYSTADANE	5	
DICLEGIS	4	QL
DIPENTUM	4	ST
<i>doxylamine-pyridoxine (vit b6)</i>	2	QL
<i>dronabinol</i>	2	PA
<i>dulcolax (magnesium hydroxide) oral suspension</i>	2	ACA; OTC
ENTEREG	4	
ENTOCORT EC	4	

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

Drug Name	Drug Tier	Requirements / Limits
<i>enulose</i>	2	
GASTROCROM	4	
GATTEX 30-VIAL	5	\$\$\$\$\$
<i>gavilyte-c</i>	1	ACA
<i>gavilyte-g</i>	1	ACA
<i>gavilyte-n</i>	1	ACA
<i>generlac</i>	2	
<i>gentle laxative (bisacodyl) oral</i>	2	ACA; OTC
GOLYTELY ORAL RECON SOLN	4	
<i>granisetron hcl oral</i>	2	QL
<i>hemmorex-hc</i>	2	
<i>hydrocortisone acetate rectal</i>	2	
<i>hydrocortisone rectal</i>	2	
<i>hydrocortisone topical cream with perineal applicator</i>	2	
<i>hydrocortisone-pramoxine rectal</i>	2	
KRISTALOSE	4	
<i>lactulose oral packet</i>	2	
<i>lactulose oral solution 10 gram/15 ml, 20 gram/30 ml</i>	2	
<i>lanthanum</i>	2	QL
<i>laxative (bisacodyl) oral</i>	2	ACA; OTC
<i>laxative peg 3350</i>	2	ACA; OTC
<i>lidocaine hcl-hydrocortison ac rectal cream</i>	2	

Drug Name	Drug Tier	Requirements / Limits
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL	4	
<i>lidocaine hcl-hydrocortison ac rectal kit</i>	2	
<i>lidocaine-hydrocortisone-aloe</i>	2	
LINZESS	3	QL
LOKELMA	3	QL
<i>magnesium citrate oral solution</i>	2	ACA; OTC
MARINOL	4	PA
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	2	
<i>mesalamine</i>	2	
<i>mesalamine with cleansing wipe</i>	2	
<i>metoclopramide hcl oral</i>	2	
<i>milk of magnesia</i>	2	ACA; OTC
<i>milk of magnesia concentrated</i>	2	ACA; OTC
MOTEGRITY	4	QL
MOVANTIK	3	QL
<i>natura-lax</i>	2	ACA; OTC
NULYTELY LEMON-LIME	4	
OALIVA	5	PA; \$\$\$\$\$; LA; QL
<i>ondansetron</i>	2	QL
<i>ondansetron hcl oral solution</i>	2	QL
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	2	QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>oral saline laxative</i> <i>oral liquid</i>	2	ACA; OTC
ORTIKOS	4	
PANCREAZE ORAL CAPSULE,DELAY ED 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, 4,200- 14,200- 24,600 UNIT	3	ST
PANCREAZE ORAL CAPSULE,DELAY ED RELEASE(DR/EC) 37,000-97,300- 149,900 UNIT	3	
<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</i>	1	ACA
<i>peg-electrolyte soln</i>	1	ACA
<i>peg-prep</i>	1	ACA
PENTASA	3	
PHOSLYRA	3	QL
<i>phosphate laxative</i>	2	ACA; OTC
<i>powderlax oral powder</i>	2	ACA; OTC
<i>prochlorperazine</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>prochlorperazine maleate</i>	2	
PROCORT	4	
PROCTOCORT RECTAL	4	ST
<i>procto-med hc</i>	2	
<i>procto-pak</i>	2	
<i>proctosol hc topical</i>	2	
<i>proctozone-hc</i>	2	
RECTIV	3	
REGLAN ORAL	4	
RELISTOR ORAL	3	ST
RELISTOR SUBCUTANEOUS SOLUTION	3	ST
RELISTOR SUBCUTANEOUS SYRINGE	3	ST
RENVELA	4	QL
ROWASA RECTAL ENEMA KIT	4	
SANCUSO	4	QL
<i>scopolamine base</i>	2	
<i>sevelamer carbonate</i>	2	QL
<i>sevelamer hcl</i>	2	QL
SFROWASA	4	
<i>sodium polystyrene sulfonate oral powder</i>	2	
SOLESTA	5	
<i>sps (with sorbitol)</i>	2	
SUCRAID	5	
<i>sulfasalazine</i>	2	
SYMPROIC	3	
SYNDROS	4	PA

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

Drug Name	Drug Tier	Requirements / Limits
<i>trimethobenzamide oral</i>	2	
TRULANCE	3	
UCERIS ORAL	4	
UCERIS RECTAL	3	
URSO 250	4	
URSO FORTE	4	
<i>ursodiol</i>	2	
VARUBI ORAL	3	QL
VELPHORO	3	QL
VIBERZI	3	
VIOKACE	3	
<i>women's gentle laxative(bisac)</i>	2	ACA; OTC
<i>women's laxative (bisacodyl) oral tablet</i>	2	ACA; OTC
ZELNORM	4	
ZENPEP ORAL CAPSULE,DELAY ED 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	3	
ZOFRAN ORAL TABLET 4 MG	4	QL
ZUPLENZ	4	QL

Drug Name	Drug Tier	Requirements / Limits
ULCER THERAPY		
<i>amoxicil-clarithromy-lansopraz</i>	2	QL
CARAFATE	4	
<i>cimetidine</i>	2	
<i>cimetidine hcl oral</i>	2	
CYTOTEC	4	
DEXILANT	4	ST; QL
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg</i>	2	QL
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg</i>	2	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	2	ST; QL
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	2	ST
<i>famotidine oral suspension</i>	2	
<i>famotidine oral tablet 20 mg, 40 mg</i>	2	
<i>lansoprazole oral capsule,delayed release(dr/ec) 15 mg</i>	2	QL
<i>lansoprazole oral capsule,delayed release(dr/ec) 30 mg</i>	2	
<i>lansoprazole oral tablet,disintegrat, delay rel 15 mg</i>	2	ST; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>lansoprazole oral tablet,disintegrat, delay rel 30 mg</i>	2	ST
<i>misoprostol</i>	2	
<i>nizatidine</i>	2	
OMECLAMOX-PAK	4	QL
<i>omeprazole oral capsule,delayed release(dr/ec) 10 mg</i>	2	QL
<i>omeprazole oral capsule,delayed release(dr/ec) 20 mg, 40 mg</i>	2	
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i>	2	ST; QL
<i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	2	ST
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i>	2	ST; QL
<i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i>	2	ST
<i>pantoprazole oral granules dr for susp in packet</i>	2	ST
<i>pantoprazole oral tablet,delayed release (dr/ec) 20 mg</i>	2	QL
<i>pantoprazole oral tablet,delayed release (dr/ec) 40 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
PEPCID ORAL TABLET	4	
<i>rabeprazole oral tablet,delayed release (dr/ec)</i>	2	
<i>sucralfate</i>	2	
TALICIA	3	QL

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

BIOTECHNOLOGY DRUGS

FULPHILA	5	PA; \$\$\$\$\$; QL
LEUKINE INJECTION RECON SOLN	5	\$\$\$\$\$
MACRILEN	5	QL
MOZOBIL	5	\$\$\$\$\$
NIVESTYM	5	PA
PROCRIT	5	PA; \$\$\$\$\$
RETACRIT	5	PA
ZARXIO	5	PA; \$\$\$\$\$
ZIEXTENZO	5	PA

GROWTH HORMONES

EGRIFTA SV	5	PA
GENOTROPIN	5	PA; \$\$\$\$\$
GENOTROPIN MINIQUICK	5	PA; \$\$\$\$\$
NORDITROPIN FLEXPOR	5	PA; \$\$\$\$\$
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	5	PA; \$\$\$\$\$

INTERFERONS

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

Drug Name	Drug Tier	Requirements / Limits
AUBAGIO	5	PA; \$\$\$\$\$; QL
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	5	PA; \$\$\$\$\$; QL
AVONEX INTRAMUSCULAR SYRINGE KIT	5	PA; \$\$\$\$\$; QL
BAFIERTAM	5	QL
BETASERON SUBCUTANEOUS KIT	5	\$\$\$\$\$; QL
COPAXONE SUBCUTANEOUS SYRINGE	5	\$\$\$\$\$; QL
<i>dimethyl fumarate</i>	5	PA; QL
GILENYA ORAL CAPSULE 0.5 MG	5	PA; \$\$\$\$\$; QL
<i>glatiramer</i>	5	\$\$\$\$\$; QL
<i>glatopa</i>	5	\$\$\$\$\$; QL
KESIMPTA PEN	5	QL
MAVENCLAD (10 TABLET PACK)	5	PA; LA; QL
MAVENCLAD (4 TABLET PACK)	5	PA; LA; QL
MAVENCLAD (5 TABLET PACK)	5	PA; LA; QL
MAVENCLAD (6 TABLET PACK)	5	PA; LA; QL
MAVENCLAD (7 TABLET PACK)	5	PA; LA; QL
MAVENCLAD (8 TABLET PACK)	5	PA; LA; QL
MAVENCLAD (9 TABLET PACK)	5	PA; LA; QL
MAYZENT	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
MAYZENT STARTER PACK	5	PA
PEGASYS	5	PA; \$\$\$\$\$; QL
PLEGRIDY INTRAMUSCULAR	5	PA; QL
PLEGRIDY SUBCUTANEOUS	5	PA; \$\$\$\$\$; QL
POMALYST	5	PA; \$\$\$\$\$; LA
PONVORY	5	QL
PONVORY 14-DAY STARTER PACK	5	QL
REBIF (WITH ALBUMIN)	5	PA; \$\$\$\$\$; QL
REBIF REBIDOSE	5	PA; \$\$\$\$\$; QL
REBIF TITRATION PACK	5	PA; \$\$\$\$\$; QL
REVLIMID	5	PA; \$\$\$\$\$; LA; QL
<i>ribavirin oral capsule</i>	5	PA; \$\$\$
<i>ribavirin oral tablet 200 mg</i>	5	PA; \$\$\$
VUMERITY	5	PA; QL
ZEPOSIA	5	PA; QL
ZEPOSIA STARTER KIT	5	PA; QL
ZEPOSIA STARTER PACK	5	PA; QL
INTERLEUKINS		
ACTIMMUNE	5	\$\$\$\$\$
ALDARA	4	
ALFERON N	3	

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

Drug Name	Drug Tier	Requirements / Limits
ARCALYST	5	PA; \$\$\$\$\$; QL
<i>imiquimod topical cream in packet</i>	2	
INTRON A INJECTION RECON SOLN	5	\$\$\$\$\$
PROLEUKIN	5	PA; \$\$\$\$\$
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ACTHIB (PF)	3	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	3	ACA
AFLURIA QD 2021-22(3YR UP)(PF)	3	ACA
AFLURIA QD 2021-22(6-35MO)(PF)	3	ACA
AFLURIA QUAD 2021-2022(6MO UP)	3	ACA
BCG VACCINE, LIVE (PF)	3	ACA
BEXSERO	3	ACA
BIOTHRAX	3	ACA
BOOSTRIX TDAP	3	ACA
BOTOX INJECTION RECON SOLN 100 UNIT	5	PA
DAPTACEL (DTAP PEDIATRIC) (PF)	3	ACA
ENGRIX-B (PF)	3	ACA
ENGRIX-B PEDIATRIC (PF)	3	ACA

Drug Name	Drug Tier	Requirements / Limits
FLUAD QUAD 2021-22(65Y UP)(PF)	3	ACA
FLUARIX QUAD 2021-2022 (PF)	3	ACA
FLUBLOK QUAD 2021-2022 (PF)	3	ACA
FLUCELVAX QUAD 2021-2022	3	ACA
FLUCELVAX QUAD 2021-2022 (PF)	3	ACA
FLULAVAL QUAD 2021-2022 (PF)	3	ACA
FLUZONE HIGHDOSE QUAD 21-22 PF	3	ACA
FLUZONE QUAD 2021-2022	3	ACA
FLUZONE QUAD 2021-2022 (PF)	3	ACA
GARDASIL 9 (PF)	3	ACA
HAVRIX (PF) INTRAMUSCULAR SYRINGE	3	ACA
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE	4	ACA
HIBERIX (PF)	3	ACA
IMOVAX RABIES VACCINE (PF)	3	ACA
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE	3	ACA
IPOL	3	ACA
IXIARO (PF)	3	ACA

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

Drug Name	Drug Tier	Requirements / Limits
JANSSEN COVID-19 VACCINE (EUA)	3	ACA
KINRIX (PF) INTRAMUSCULAR SYRINGE	4	ACA
MENACTRA (PF) INTRAMUSCULAR SOLUTION	3	ACA
MENQUADFI (PF)	4	ACA
MENVEO A-C-Y-W-135-DIP (PF)	4	ACA
M-M-R II (PF)	3	ACA
MODERNA COVID-19 VACCINE (EUA)	3	ACA
PEDIARIX (PF)	3	ACA
PEDVAX HIB (PF)	3	ACA
PENTACEL (PF)	3	ACA
PENTACEL ACTHIB COMPONENT (PF)	3	ACA
PFIZER COVID-19 VACCINE (EUA)	3	ACA
PNEUMOVAX-23	3	ACA
PREVNAR 13 (PF)	3	ACA
PREVNAR 20 (PF)	3	ACA
PROQUAD (PF)	3	ACA
QUADRACEL (PF)	3	ACA
RABAVERT (PF)	3	ACA
RECOMBIVAX HB (PF)	3	ACA
ROTARIX	4	ACA
ROTATEQ VACCINE	3	ACA
SHINGRIX (PF)	3	ACA

Drug Name	Drug Tier	Requirements / Limits
STAMARIL (PF)	3	ACA
TDVAX	3	ACA
TENIVAC (PF)	4	ACA
TETANUS,DIPHTHERIA TOX PED(PF)	3	ACA
TRUMENBA	3	ACA
TWINRIX (PF)	3	ACA
TYPHIM VI	3	ACA
VAQTA (PF)	4	ACA
VARIVAX (PF)	3	ACA
VARIZIG	3	ACA
VAXELIS (PF)	4	ACA
VAXNEUVANCE	4	
YF-VAX (PF)	3	ACA
ZOSTAVAX (PF)	4	ACA

MUSCULOSKELETAL & RHEUMATOLOGY

GOUT THERAPY

<i>allopurinol</i>	2	
<i>colchicine oral tablet</i>	2	
<i>febuxostat</i>	2	ST
GLOPERBA	4	
MITIGARE	3	
<i>probenecid</i>	2	
<i>probenecid-colchicine</i>	2	
ZYLOPRIM ORAL TABLET 100 MG	4	

OSTEOPOROSIS THERAPY

ACTONEL ORAL TABLET 150 MG, 35 MG	4	ST; QL
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>alendronate oral solution</i>	1	QL
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1	QL
ATELVIA	4	ST; QL
BINOSTO	4	ST; QL
BONIVA ORAL	4	ST; QL
EVISTA	4	
FORTEO SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	5	PA; \$\$\$\$; QL
FOSAMAX ORAL TABLET 70 MG	4	ST; QL
FOSAMAX PLUS D	4	ST; QL
<i>ibandronate oral</i>	1	QL
<i>raloxifene</i>	1	ACA
<i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i>	1	QL
<i>risedronate oral tablet, delayed release (dr/ec)</i>	1	QL
TERIPARATIDE	5	PA; QL
TYMLOS	5	PA; \$\$\$\$; QL
OTHER RHEUMATOLOGICALS		
ACTEMRA ACTPEN	5	PA; QL
ACTEMRA SUBCUTANEOUS	5	PA; \$\$\$\$; QL
ARAVA	4	QL
BENLYSTA SUBCUTANEOUS	5	PA; \$\$\$\$; QL

Drug Name	Drug Tier	Requirements / Limits
DEPEN TITRATABS	4	PA
ENBREL MINI	5	PA; \$\$\$\$; QL
ENBREL SUBCUTANEOUS RECON SOLN	5	PA; \$\$\$\$; QL
ENBREL SUBCUTANEOUS SOLUTION	5	PA; QL
ENBREL SUBCUTANEOUS SYRINGE	5	PA; \$\$\$\$; QL
ENBREL SURECLICK	5	PA; \$\$\$\$; QL
HUMIRA PEN	5	PA; \$\$\$\$; QL
HUMIRA PEN CROHNS-UC-HS START	5	PA; \$\$\$\$; QL
HUMIRA PEN PSOR-UEVITS-ADOL HS	5	PA; \$\$\$\$; QL
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	5	PA; \$\$\$\$; QL
HUMIRA(CF)	5	PA; \$\$\$\$; QL
HUMIRA(CF) PEDI CROHNS STARTER	5	PA; \$\$\$\$; QL
HUMIRA(CF) PEN CROHNS-UC-HS	5	PA; \$\$\$\$; QL
HUMIRA(CF) PEN PEDIATRIC UC	5	PA
HUMIRA(CF) PEN PSOR-UV-ADOL HS	5	PA; \$\$\$\$; QL

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Drug Name	Drug Tier	Requirements / Limits
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	5	PA; \$\$\$\$; QL
<i>leflunomide</i>	2	QL
OTEZLA	5	PA; \$\$\$\$; QL
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; \$\$\$\$; QL
<i>penicillamine</i>	2	PA
RASUVO (PF)	3	ST
RIDAURA	3	
RINVOQ	5	PA; QL
SAVELLA	3	ST; QL
SIMPONI ARIA	5	PA; \$\$\$\$
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; \$\$\$\$; QL
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; \$\$\$\$; QL
XELJANZ ORAL SOLUTION	5	PA; QL
XELJANZ ORAL TABLET 10 MG	5	PA; \$\$\$\$; QL
XELJANZ ORAL TABLET 5 MG	5	PA; \$\$\$\$; QL
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG	5	PA; \$\$\$\$; QL

Drug Name	Drug Tier	Requirements / Limits
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 22 MG	5	PA; QL
OBSTETRICS & GYNECOLOGY		
ESTROGENS & PROGESTINS		
ACTIVELLA ORAL TABLET 1-0.5 MG	4	
ALORA	4	QL
<i>amabelz</i>	2	
ANGELIQ	4	
AYGESTIN	4	
<i>camila</i>	2	ACA
CLIMARA	4	QL
COMBIPATCH	3	
<i>covaryx</i>	2	
<i>covaryx h.s.</i>	2	
<i>deblitane</i>	2	ACA
DELESTROGEN	4	
DEPO-ESTRADIOL	3	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	4	ACA; QL
DEPO-PROVERA INTRAMUSCULAR SYRINGE	4	ACA; QL
DEPO-SUBQ PROVERA 104	4	ACA; QL
<i>dotti</i>	2	QL
DUAVEE	3	
<i>eemt</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>eemt hs</i>	2	
<i>errin</i>	2	ACA
ESTRACE ORAL	4	
<i>estradiol oral</i>	2	
<i>estradiol transdermal</i>	2	QL
<i>estradiol vaginal</i>	2	
<i>estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml</i>	2	
<i>estradiol-norethindrone acet</i>	2	
<i>estrogens-methyltestosterone</i>	2	
FEMHRT LOW DOSE	4	
<i>fyavolv</i>	2	
<i>heather</i>	2	ACA
<i>incassia</i>	2	ACA
<i>jencycla</i>	2	ACA
<i>jinteli</i>	2	
<i>lyleq</i>	2	
<i>lyllana</i>	2	QL
<i>lyza</i>	2	ACA
<i>medroxyprogesterone intramuscular</i>	2	ACA; QL
<i>medroxyprogesterone oral</i>	2	
MENOSTAR	4	QL
<i>mimvey</i>	2	
<i>nora-be</i>	2	ACA
<i>norethindrone (contraceptive)</i>	2	ACA
<i>norethindrone acetate</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	2	
<i>norlyda</i>	2	ACA
PREFEST	4	
PREMARIN VAGINAL	3	
<i>progesterone</i>	5	
<i>progesterone micronized</i>	2	
PROMETRIUM	4	
PROVERA	4	
<i>sharobel</i>	2	ACA
<i>tulana</i>	2	ACA
<i>yuvaferm</i>	2	
MISCELLANEOUS OB/GYN		
CERVIDIL	4	
CLEOCIN VAGINAL	4	
<i>clindamycin phosphate vaginal</i>	2	
CLINDESSE	4	
<i>eluryng</i>	2	ACA
<i>etonogestrel-ethinyl estradiol</i>	2	ACA
<i>fem ph</i>	2	
GYNAZOLE-1	4	QL
<i>gynol ii</i>	2	ACA; OTC
INTRAROSA	4	
<i>isoxsuprine</i>	2	
LUPANETA PACK (1 MONTH)	5	PA; \$\$\$
LUPANETA PACK (3 MONTH)	5	PA; \$\$\$

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

Drug Name	Drug Tier	Requirements / Limits
LYSTEDA	4	
METROGEL VAGINAL	4	
<i>metronidazole vaginal</i>	2	
<i>miconazole-3 vaginal suppository</i>	2	
MYFEMBREE	3	PA
NEXPLANON	5	ACA
NUVESSA	4	
ORIAHNN	3	PA
OSPHENA	4	
PREPIDIL	4	
RELAGARD	4	
<i>terconazole</i>	2	
TODAY CONTRACEPTIVE SPONGE	3	ACA; OTC
<i>tranexamic acid oral</i>	2	
TRIMO-SAN JELLY	3	
<i>vandazole</i>	2	
VCF CONTRACEPTIVE FILM	3	ACA; OTC
VCF CONTRACEPTIVE GEL	3	ACA; OTC
<i>xulane</i>	2	ACA
<i>zafemy</i>	1	
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle</i>	2	ACA
AFTERA	4	ACA; OTC; QL
<i>altavera (28)</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>alyacen 1/35 (28)</i>	2	ACA
<i>alyacen 7/7/7 (28)</i>	2	ACA
<i>amethia</i>	2	ACA
<i>amethyst (28)</i>	2	ACA
<i>apri</i>	2	ACA
<i>aranelle (28)</i>	2	ACA
<i>ashlyna</i>	2	ACA
<i>aubra</i>	2	ACA
<i>aubra eq</i>	2	ACA
<i>aurovela 1.5/30 (21)</i>	2	ACA
<i>aurovela 1/20 (21)</i>	2	ACA
<i>aurovela 24 fe</i>	2	ACA
<i>aurovela fe 1.5/30 (28)</i>	2	ACA
<i>aurovela fe 1-20 (28)</i>	2	ACA
<i>aviane</i>	2	ACA
<i>ayuna</i>	2	ACA
<i>azurette (28)</i>	2	ACA
<i>balziva (28)</i>	2	ACA
BEYAZ	4	ACA
<i>blisovi 24 fe</i>	2	ACA
<i>blisovi fe 1.5/30 (28)</i>	2	ACA
<i>blisovi fe 1/20 (28)</i>	2	ACA
<i>briellyn</i>	2	ACA
<i>camrese</i>	2	ACA
<i>camrese lo</i>	2	ACA
<i>caziant (28)</i>	2	ACA
<i>charlotte 24 fe</i>	2	ACA
<i>chateal (28)</i>	2	ACA
<i>chateal eq (28)</i>	2	ACA
<i>cryselle (28)</i>	2	ACA
<i>cyclafem 1/35 (28)</i>	2	ACA

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

Drug Name	Drug Tier	Requirements / Limits
<i>cyclafem 7/7/7 (28)</i>	2	ACA
<i>cyred</i>	2	ACA
<i>cyred eq</i>	2	ACA
<i>dasetta 1/35 (28)</i>	2	ACA
<i>dasetta 7/7/7 (28)</i>	2	ACA
<i>daysee</i>	2	ACA
<i>desog-e.estradiol/e.estradiol</i>	2	ACA
<i>desogestrel-ethinyl estradiol</i>	2	ACA
<i>dolishale</i>	1	
<i>drospirenone-e.estradiol-lm.fa</i>	2	ACA
<i>drospirenone-ethinyl estradiol</i>	2	ACA
<i>econtra ez</i>	2	ACA; OTC; QL
<i>econtra one-step</i>	2	ACA; OTC; QL
<i>elinest</i>	2	ACA
<i>ELLA</i>	4	ACA; QL
<i>emoquette</i>	2	ACA
<i>enpresse</i>	2	ACA
<i>enskyce</i>	2	ACA
<i>estarylla</i>	2	ACA
<i>ethynodiol diac-eth estradiol</i>	2	ACA
<i>falmina (28)</i>	2	ACA
<i>femynor</i>	2	ACA
<i>gemmily</i>	2	
<i>hailey</i>	2	ACA
<i>hailey 24 fe</i>	2	ACA
<i>hailey fe 1.5/30 (28)</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>hailey fe 1/20 (28)</i>	2	ACA
<i>iclevia</i>	2	
<i>isibloom</i>	2	ACA
<i>jaimiess</i>	2	ACA
<i>jasmiel (28)</i>	2	ACA
<i>jolessa</i>	2	ACA
<i>juleber</i>	2	ACA
<i>junel 1.5/30 (21)</i>	2	ACA
<i>junel 1/20 (21)</i>	2	ACA
<i>junel fe 1.5/30 (28)</i>	2	ACA
<i>junel fe 1/20 (28)</i>	2	ACA
<i>junel fe 24</i>	2	ACA
<i>kaitlib fe</i>	2	ACA
<i>kalliga</i>	2	ACA
<i>kariva (28)</i>	2	ACA
<i>kelnor 1/35 (28)</i>	2	ACA
<i>kelnor 1-50 (28)</i>	2	ACA
<i>kurvelo (28)</i>	2	ACA
<i>l norgest/e.estradiol-e.estradiol</i>	2	ACA
<i>larin 1.5/30 (21)</i>	2	ACA
<i>larin 1/20 (21)</i>	2	ACA
<i>larin 24 fe</i>	2	ACA
<i>larin fe 1.5/30 (28)</i>	2	ACA
<i>larin fe 1/20 (28)</i>	2	ACA
<i>larissia</i>	2	ACA
<i>layolis fe</i>	2	ACA
<i>leena 28</i>	2	ACA
<i>lessina</i>	2	ACA
<i>levonest (28)</i>	2	ACA
<i>levonorgestrel</i>	2	ACA; OTC; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>levonorgestrel-ethinyl estrad</i>	2	ACA
<i>levonorg-eth estrad triphasic</i>	2	ACA
<i>levora-28</i>	2	ACA
<i>lillow (28)</i>	2	ACA
<i>lojaimiess</i>	2	ACA
<i>loryna (28)</i>	2	ACA
<i>low-ogestrel (28)</i>	2	ACA
<i>lo-zumandimine (28)</i>	2	ACA
<i>lutra (28)</i>	2	ACA
<i>marlissa (28)</i>	2	ACA
<i>merzee</i>	2	
<i>mibelas 24 fe</i>	2	ACA
<i>microgestin 1.5/30 (21)</i>	2	ACA
<i>microgestin 1/20 (21)</i>	2	ACA
MICROGESTIN 24 FE	4	
<i>microgestin fe 1.5/30 (28)</i>	2	ACA
<i>microgestin fe 1/20 (28)</i>	2	ACA
<i>mili</i>	2	ACA
<i>mono-lynyah</i>	2	ACA
<i>my choice</i>	2	ACA; OTC; QL
<i>my way</i>	2	ACA; OTC; QL
<i>necon 0.5/35 (28)</i>	2	ACA
<i>new day</i>	2	ACA; OTC; QL
<i>nikki (28)</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>noreth-ethinyl estradiol-iron</i>	2	ACA
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	2	ACA
<i>norethindrone-e.estradiol-iron oral capsule</i>	2	ACA
<i>norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)</i>	2	ACA
<i>norethindrone-e.estradiol-iron oral tablet, chewable</i>	2	ACA
<i>norgestimate-ethinyl estradiol</i>	2	ACA
<i>nortrel 0.5/35 (28)</i>	2	ACA
<i>nortrel 1/35 (21)</i>	2	ACA
<i>nortrel 1/35 (28)</i>	2	ACA
<i>nortrel 7/7/7 (28)</i>	2	ACA
<i>nylia 7/7/7 (28)</i>	2	
<i>nymyo</i>	2	
<i>ocella</i>	2	ACA
<i>opcicon one-step</i>	2	ACA; OTC; QL
<i>option-2</i>	2	ACA; OTC; QL
<i>orsythia</i>	2	ACA
<i>philith</i>	2	ACA
<i>pimtrea (28)</i>	2	ACA
<i>pirmella</i>	2	ACA
PLAN B ONE-STEP	3	ACA; OTC; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>portia 28</i>	2	ACA
<i>previfem</i>	2	ACA
<i>reclipsen (28)</i>	2	ACA
<i>rivelsa</i>	2	ACA
<i>setlakin</i>	2	ACA
<i>simliya (28)</i>	2	ACA
<i>simpesse</i>	2	ACA
<i>sprintec (28)</i>	2	ACA
<i>sronyx</i>	2	ACA
<i>syeda</i>	2	ACA
TAKE ACTION	4	ACA; OTC; QL
<i>tarina 24 fe</i>	2	ACA
<i>tarina fe 1/20 (28)</i>	2	ACA
<i>tilia fe</i>	2	ACA
<i>tri femynor</i>	2	ACA
<i>tri-estarylla</i>	2	ACA
<i>tri-legest fe</i>	2	ACA
<i>tri-linyah</i>	2	ACA
<i>tri-lo-estarylla</i>	2	ACA
<i>tri-lo-marzia</i>	2	ACA
<i>tri-lo-mili</i>	2	ACA
<i>tri-lo-sprintec</i>	2	ACA
<i>tri-mili</i>	2	ACA
<i>tri-nymyo</i>	2	
<i>tri-previfem (28)</i>	2	ACA
<i>tri-sprintec (28)</i>	2	ACA
<i>trivora (28)</i>	2	ACA
<i>tri-vylibra</i>	2	ACA
<i>tri-vylibra lo</i>	2	ACA
<i>tydemy</i>	2	ACA
<i>velivet triphasic regimen (28)</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>vestura (28)</i>	1	
<i>vienva</i>	2	ACA
<i>viorele (28)</i>	2	ACA
<i>volnea (28)</i>	2	ACA
<i>vyfemla (28)</i>	2	ACA
<i>vylibra</i>	2	ACA
<i>wera (28)</i>	2	ACA
<i>wymzya fe</i>	2	ACA
YAZ (28)	4	ACA
<i>zarah</i>	2	ACA
<i>zovia 1/35e (28)</i>	2	ACA
<i>zumandimine (28)</i>	2	ACA
OXYTOCICS		
<i>methergine</i>	2	ST; QL
<i>methylergonovine oral</i>	2	ST; QL
OPHTHALMOLOGY		
ANTIBIOTICS		
<i>ak-poly-bac</i>	2	
AZASITE	3	
<i>bacitracin ophthalmic (eye)</i>	2	
<i>bacitracin-polymyxin b ophthalmic (eye)</i>	2	
BESIVANCE	4	
BETADINE OPHTHALMIC PREP	4	
CILOXAN OPHTHALMIC (EYE) DROPS	4	
<i>ciprofloxacin hcl ophthalmic (eye)</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin ophthalmic (eye)</i>	2	
<i>gatifloxacin</i>	2	
<i>gentak ophthalmic (eye) ointment</i>	2	
<i>gentamicin ophthalmic (eye) drops</i>	2	
<i>levofloxacin ophthalmic (eye)</i>	2	
MOXEZA	4	
MOXIFLOXACIN (PF)-BSS INTRAVITREAL SOLUTION	4	
<i>moxifloxacin ophthalmic (eye)</i>	2	
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SOLUTION 5 MG/ML	4	
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SYRINGE	4	
NATACYN	3	
<i>neomycin-bacitracin-polymyxin</i>	2	
<i>neomycin-polymyxin-gramicidin</i>	2	
<i>neo-polycin</i>	2	
OCUFLOX	4	
<i>ofloxacin ophthalmic (eye)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>polycin</i>	2	
<i>polymyxin b sulf-trimethoprim</i>	2	
POLYTRIM	4	
<i>tobramycin ophthalmic (eye)</i>	2	
TOBREX	4	
VIGAMOX	4	
ZYMAXID	4	
ANTIVIRALS		
<i>trifluridine</i>	2	
ZIRGAN	4	
BETA-BLOCKERS		
<i>betaxolol ophthalmic (eye)</i>	2	
BETOPTIC S	4	
<i>carteolol</i>	2	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	2	
<i>timolol maleate (pf)</i>	2	
<i>timolol maleate ophthalmic (eye)</i>	2	
TIMOPTIC	4	
TIMOPTIC-XE	4	
CYCLOPLEGIC MYDRIATICS		
<i>atropine ophthalmic (eye) drops</i>	2	
ATROPINE OPHTHALMIC (EYE) DROPS, EMULSION	4	
<i>atropine ophthalmic (eye) ointment</i>	2	
CYCLOGYL	4	

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

Drug Name	Drug Tier	Requirements / Limits
<i>cyclopentolate</i>	2	
CYCLOPEN-TROPIC-PHENYLEPH-WATR	4	
CYCLOPENT-TROPIC-PHEN-KETR-WAT	4	
CYCLOP-TROP-PROPA-PHEN-KET-WAT	4	
<i>homatropaire</i>	2	
ISOPTO ATROPINE	4	
MYDRIACYL	4	
PAREMYD	4	
PHENYLEPH-TROPICAMIDE IN WATER	4	
<i>tropicamide</i>	2	
DIRECT ACTING MIOTICS		
ISOPTO CARPINE	4	
MIOCHOL-E	4	
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	2	
MISCELLANEOUS OPHTHALMOLOGICS		
AKTEN (PF)	4	
ALCAINE	4	
ALOCRIAL	4	ST
ALOMIDE	4	ST
<i>altacaine</i>	2	
ALTAFLUOR BENOX	4	

Drug Name	Drug Tier	Requirements / Limits
<i>azelastine ophthalmic (eye)</i>	2	
BEOVU	5	PA
<i>bepotastine besilate</i>	2	
BEVACIZUMAB INTRAVITREAL SYRINGE 2.5 MG/0.1 ML, 3.25 MG/0.13 ML	4	
CEQUA	4	PA
<i>cromolyn ophthalmic (eye)</i>	2	
CYCLOSPORINE IN KLARITY	4	
CYSTARAN	5	
DEXAMET-MOXIFL-KETORO-NACL(PF)	4	
<i>epinastine</i>	2	
EYLEA INTRAVITREAL SOLUTION	5	PA; \$\$\$\$
EYLEA INTRAVITREAL SYRINGE	5	
FLUORESCIN-BENOXINATE	4	
<i>fluorescein-proparacaine</i>	2	
KLARITY-A (AZITHRO-CHONDR)(PF)	4	
KLARITY-B (BETAMETH-CHOND)(PF)	4	
KLARITY-L (LOTEPRED-CHOND)(PF)	4	

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

Drug Name	Drug Tier	Requirements / Limits
LACRISERT	4	PA; QL
LIDOCAINE-PHENYLEPHRIN-BSS(PF)	4	
<i>lidocaine-phenylephrn in water</i>	2	
LUCENTIS	5	PA; \$\$\$\$\$
MYDRIATIC4(TROP-PROP-PE-KTRLC)	4	
<i>olopatadine ophthalmic (eye)</i>	2	
OMIDRIA	4	
OXERVATE	5	PA
PHOTREXA CROSS-LINKING KIT	4	
PHOTREXA VISCOUS	4	
PREDNISOL ACE-GATIFLOX-BROMFEN	4	
PREDNISOLN SP-GATIFLOX-BROMFEN	4	
PREDNISOLN SP-MOXIFLOX-BROMFEN	4	
PREDNISOLONE ACETATE-NEPAFENAC	4	
PREDNISOLONE-MOXIFLO-NEPAFENAC	4	
PREDNISOLONE-MOXIFLOX-BROMFEN	4	
<i>proparacaine</i>	2	

Drug Name	Drug Tier	Requirements / Limits
RACEPINEPH-LIDOCAINE-BSS 7(PF)	4	
RESTASIS	3	PA; QL
RESTASIS MULTIDOSE	3	PA; QL
<i>tetracaine hcl</i>	2	
TETRACAINE HCL (PF) OPHTHALMIC (EYE)	4	
XIIDRA	3	PA; QL
ZERVIAE	3	ST
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR	4	
ACULAR LS	4	
<i>bromfenac</i>	2	
<i>diclofenac sodium ophthalmic (eye)</i>	2	
<i>flurbiprofen sodium</i>	2	
ILEVRO	4	
<i>ketorolac ophthalmic (eye)</i>	2	
PROLENSA	4	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide</i>	2	
<i>methazolamide</i>	2	
OTHER GLAUCOMA DRUGS		
<i>bimatoprost ophthalmic (eye)</i>	2	PA
BRIMONIDINE-DORZOLAMIDE (PF)	4	
<i>brinzolamide</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
COMBIGAN	3	
<i>dorzolamide</i>	2	
DORZOLAMIDE (PF)	4	
<i>dorzolamide-timolol</i>	2	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette</i>	2	
DORZOLAMIDE-TIMOLOL (PF) OPHTHALMIC (EYE) DROPS	4	
<i>latanoprost</i>	2	PA
LATANOPROST (PF)	4	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	3	PA; ST
<i>miostat</i>	2	
MITOSOL	4	
SIMBRINZA	4	
TIMOL-BRIMON-DORZO-LATANOP(PF)	4	
TIMOLOL-BRIMONIDI-DORZOLAM(PF)	4	
TIMOLOL-DORZOLAMID-LATANOP(PF)	4	
TIMOLOL-LATANOPROST(PF)	4	
<i>travoprost</i>	2	ST
TRUSOPT	4	
VYZULTA	4	ST

Drug Name	Drug Tier	Requirements / Limits
STEROID-ANTIBIOTIC COMBINATIONS		
DEXAMETH-MOXIFLOX(PF)-NACL,ISO	4	
MAXITROL	4	
<i>neomycin-bacitracin-poly-hc</i>	2	
<i>neomycin-polymyxin b-dexameth</i>	2	
<i>neomycin-polymyxin-hc ophthalmic (eye)</i>	2	
<i>neo-polycin hc</i>	2	
PRED-G	4	
PRED-G S.O.P.	4	
PREDNISOLONE ACET-GATIFLOXACIN	4	
PREDNISOLONE SOD PH-MOXIFLOX	4	
PREDNISOLONE-MOXIFLOXACIN HCL	4	
TOBRADEX OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
TOBRADEX OPHTHALMIC (EYE) OINTMENT	3	
<i>tobramycin-dexamethasone</i>	2	
TRIAMCINOLON-MOXIFLOX-WATR(PF)	4	

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Drug Name	Drug Tier	Requirements / Limits
ZYLET	3	
STEROIDS		
<i>dexamethasone sodium phosphate ophthalmic (eye)</i>	2	
DEXTENZA	4	
DEXYCU (PF)	4	
<i>difluprednate</i>	2	
DUREZOL	4	
EYSUVIS	4	PA; QL
<i>fluorometholone</i>	2	
FML LIQUIFILM	4	
ILUVIEN	5	\$\$\$\$\$
INVELTYS	3	
LOTEMAX OPTHALMIC (EYE) DROPS,GEL	3	
LOTEMAX OPTHALMIC (EYE) DROPS,SUSPENSION	4	
LOTEMAX OPTHALMIC (EYE) OINTMENT	3	
LOTEMAX SM	3	
<i>loteprednol etabonate</i>	2	
OZURDEX	5	\$\$\$\$\$
PRED FORTE	4	
<i>prednisolone acetate</i>	2	
PREDNISOLONE ACETATE (PF)	4	
<i>prednisolone sodium phosphate ophthalmic (eye)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
RETISERT	5	\$\$\$\$\$
YUTIQ	5	
STEROID-SULFONAMIDE COMBINATIONS		
BLEPHAMIDE	4	
BLEPHAMIDE S.O.P.	4	
<i>sulfacetamide-prednisolone</i>	2	
SULFONAMIDES		
BLEPH-10	4	
<i>sulfacetamide sodium ophthalmic (eye)</i>	2	
SYMPATHOMIMETICS		
ALPHAGAN P OPTHALMIC (EYE) DROPS 0.1 %	3	
ALPHAGAN P OPTHALMIC (EYE) DROPS 0.15 %	4	
<i>apraclonidine</i>	2	
<i>brimonidine</i>	2	
IOPIDINE OPTHALMIC (EYE) DROPPERETTE	4	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL	4	
<i>phenylephrine hcl ophthalmic (eye)</i>	2	

RESPIRATORY, ALLERGY, COUGH & COLD

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Drug Name	Drug Tier	Requirements / Limits
ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS		
<i>carbinoxamine maleate oral liquid</i>	2	
<i>carbinoxamine maleate oral tablet 4 mg</i>	2	
<i>carbinoxamine maleate oral tablet 6 mg</i>	2	ST
<i>cetirizine oral solution 1 mg/ml</i>	2	
CLARINEX ORAL TABLET	4	QL
<i>clemastine oral syrup</i>	2	
<i>clemastine oral tablet 2.68 mg</i>	2	
<i>cycloheptadine</i>	2	
<i>desloratadine</i>	2	QL
<i>dexchlorpheniramine maleate oral solution</i>	2	
DIPHEN ORAL ELIXIR	4	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	2	QL
EPIPEN 2-PAK	3	QL
EPIPEN JR 2-PAK	3	QL
<i>hydroxyzine hcl oral</i>	2	
<i>hydroxyzine pamoate</i>	2	
KARBINAL ER	4	ST
<i>levocetirizine oral solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>levocetirizine oral tablet</i>	2	QL
<i>promethazine oral</i>	2	
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	2	
<i>promethgan</i>	2	
RYCLORA	4	
RYVENT	4	ST
SYMJEPI	3	QL
VISTARIL	4	
COUGH & COLD THERAPY		
<i>benzonatate</i>	2	
BROMFED DM	4	
<i>brompheniramine-pseudoeph-dm</i>	2	
CAPCOF	4	
CLARINEX-D 12 HOUR	4	QL
<i>codeine-guaifenesin</i>	2	
CODITUSSIN AC	4	
CODITUSSIN DAC	4	
<i>g tussin ac</i>	2	
<i>guaiaatussin ac</i>	2	
HISTEX-AC	4	
HYCODAN (WITH HOMATROPINE)	4	
<i>hydrocodone-chlorpheniramine</i>	2	
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i>	2	
<i>hydrocodone-homatropine oral tablet</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>hydromet</i>	2	
MAR-COF CG	4	
<i>maxi-tuss ac</i>	2	
MAXI-TUSS CD	4	
<i>m-clear wc</i>	2	
M-END PE	4	
NINJACOF-XG	4	
OBREDON	4	ST
POLY-TUSSIN AC	4	
<i>promethazine-codeine</i>	2	
<i>promethazine-dm</i>	2	
<i>promethazine-phenyleph-codeine</i>	2	
<i>promethazine-phenylephrine</i>	2	
RESPA-AR	4	
TUSSICAPS ORAL CAPSULE,EXTENDED RELEASE 12 HR 10-8 MG	4	ST
TUXARIN ER	4	
TUZISTRA XR	4	ST
<i>virtussin ac</i>	2	
<i>virtussin dac</i>	2	
PULMONARY AGENTS		
ACCOLATE	4	
<i>acetylcysteine</i>	1	
ADEMPAS	5	PA; \$\$\$\$; LA
ADRENALIN NASAL	4	
ADVAIR DISKUS	4	ST; QL
ADVAIR HFA	3	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	QL
<i>albuterol sulfate inhalation solution for nebulization</i>	1	
<i>albuterol sulfate oral</i>	1	
ALVESCO	4	QL
<i>alyq</i>	5	PA; QL
<i>ambrisentan</i>	5	PA; LA
ANORO ELLIPTA	3	QL
<i>arformoterol</i>	1	QL
ARNUITY ELLIPTA	3	QL
ASMANEX HFA	3	QL
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ACTUATION (30), 220 MCG/ACTUATION (120), 220 MCG/ACTUATION (14), 220 MCG/ACTUATION (30), 220 MCG/ACTUATION (60)	3	QL
ATROVENT HFA	4	QL
<i>azelastine-fluticasone</i>	2	PA; ST; QL
BEVESPI AEROSPHERE	3	QL
<i>bosentan</i>	5	PA
BREO ELLIPTA	3	PA; QL

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

Drug Name	Drug Tier	Requirements / Limits
BREZTRI AEROSPHERE	3	QL
BROVANA	4	QL
<i>budesonide inhalation</i>	1	QL
COMBIVENT RESPIMAT	3	QL
<i>cromolyn inhalation</i>	1	
CUROSURF	4	
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION , 200-5 MCG/ACTUATION	3	PA; QL
DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION	3	ST; QL
DYMISTA	4	ST; QL
ELIXOPHYLLIN	4	
<i>epinephrine hcl</i>	2	
ESBRIET ORAL CAPSULE	5	PA; \$\$\$\$\$; QL
ESBRIET ORAL TABLET 267 MG	5	PA; \$\$\$\$\$; QL
ESBRIET ORAL TABLET 801 MG	5	PA; \$\$\$\$\$
FASENRA PEN	5	PA
FLOVENT DISKUS	3	QL
FLOVENT HFA	3	QL
<i>flunisolide</i>	2	ST; QL
<i>fluticasone propionate nasal</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>fluticasone propion-salmeterol inhalation blister with device</i>	1	ST; QL
<i>formoterol fumarate</i>	1	QL
HAEGARDA	5	PA; \$\$\$\$\$; LA
HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION 3.5 %	4	
<i>icatibant</i>	5	PA
INCRUSE ELLIPTA	3	QL
<i>ipratropium bromide inhalation</i>	1	
<i>ipratropium-albuterol</i>	1	QL
KALYDECO ORAL GRANULES IN PACKET 25 MG	5	PA; QL
KALYDECO ORAL GRANULES IN PACKET 50 MG, 75 MG	5	PA; \$\$\$\$\$; QL
KALYDECO ORAL TABLET	5	PA; \$\$\$\$\$; QL
<i>levalbuterol hcl</i>	1	
LONHALA MAGNAIR REFILL	4	QL
LONHALA MAGNAIR STARTER	4	QL
<i>metaproterenol oral syrup</i>	1	
<i>mometasone nasal</i>	2	ST; QL
<i>montelukast</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>nebusal inhalation solution for nebulization 3 %</i>	2	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	4	
NUCALA SUBCUTANEOUS AUTO-INJECTOR	5	PA; LA; QL
NUCALA SUBCUTANEOUS SYRINGE	5	PA; LA; QL
OFEV	5	PA; \$\$\$\$\$; QL
OPSUMIT	5	PA; \$\$\$\$\$; LA
ORKAMBI	5	PA; \$\$\$\$\$; QL
PERFOROMIST	3	QL
<i>pulmosal</i>	2	
PULMOZYME	5	\$\$\$\$
QVAR REDIHALER	3	QL
REVATIO ORAL	5	PA; ST; \$\$\$\$\$; QL
RUCONEST	5	PA; \$\$\$\$\$
<i>sajazir</i>	5	
SEREVENT DISKUS	3	QL
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution</i>	5	PA; QL
<i>sildenafil (pulm.hypertension) oral tablet</i>	5	PA; \$\$\$; QL

Drug Name	Drug Tier	Requirements / Limits
SINUVA	5	
<i>sodium chloride inhalation</i>	2	
SPIRIVA RESPIMAT	3	QL
SPIRIVA WITH HANDIHALER	3	QL
STIOLTO RESPIMAT	3	QL
SYMBICORT	3	PA; QL
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N)	5	PA; \$\$\$\$\$; QL
SYMDEKO ORAL TABLETS, SEQUENTIAL 50-75 MG (D)/ 75 MG (N)	5	PA; QL
<i>tadalafil (pulm. hypertension)</i>	5	PA; \$\$\$\$\$; QL
TAKHZYRO	5	PA; LA
<i>terbutaline oral</i>	1	
THEO-24	4	
<i>theophylline oral elixir</i>	1	
<i>theophylline oral solution</i>	1	
<i>theophylline oral tablet extended release 12 hr 300 mg, 450 mg</i>	1	
<i>theophylline oral tablet extended release 24 hr</i>	1	
TRACLEER	5	PA; \$\$\$\$\$; LA

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Drug Name	Drug Tier	Requirements / Limits
TRELEGY ELLIPTA	3	QL
TRIKAFTA	5	PA; QL
TYVASO	5	PA; \$\$\$\$\$
TYVASO REFILL KIT	5	PA; \$\$\$\$\$
TYVASO STARTER KIT	5	PA; \$\$\$\$\$
VENTAVIS	5	PA; ST; \$\$\$\$\$
<i>wixela inhub</i>	1	ST; QL
XHANCE	4	ST; QL
XOLAIR SUBCUTANEOUS RECON SOLN	5	PA; \$\$\$\$; LA; QL
XOLAIR SUBCUTANEOUS SYRINGE	5	PA; LA; QL
XOPENEX	4	
XOPENEX CONCENTRATE	4	
YUPELRI	3	QL
<i>zafirlukast</i>	1	
<i>zileuton</i>	1	ST
ZYFLO	4	ST
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
<i>darifenacin</i>	2	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24HR 10 MG, 5 MG	4	ST
<i>flavoxate</i>	2	

Drug Name	Drug Tier	Requirements / Limits
GELNIQUE TRANSDERMAL GEL IN PACKET	3	QL
MYRBETRIQ	3	
<i>oxybutynin chloride</i>	2	
OXYTROL	4	ST; QL
<i>solifenacin</i>	2	
<i>tolterodine</i>	2	
TOVIAZ	3	
<i>trospium</i>	2	
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
<i>alfuzosin</i>	2	
<i>dutasteride</i>	2	PA
<i>dutasteride-tamsulosin</i>	2	ST
<i>finasteride oral tablet 5 mg</i>	2	
FLOMAX	4	ST
JALYN	4	ST
PROSCAR	4	ST
<i>silodosin</i>	2	
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	2	PA; QL
<i>tamsulosin</i>	2	
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride</i>	2	
MISCELLANEOUS UROLOGICALS		
CAVERJECT	3	PA; QL
CAVERJECT IMPULSE	3	PA; QL
CYSTAGON	5	LA
EDEX	4	PA; QL
ELMIRON	3	

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

Drug Name	Drug Tier	Requirements / Limits
<i>hyophen</i>	2	
IFE-BIMIX 30/1	4	
IFE-PG20	4	
K-PHOS NO 2	4	
K-PHOS ORIGINAL	3	
<i>methen-sod phos-meth blue-hyos</i>	2	
ORACIT	4	
<i>phosphasal</i>	2	
<i>potassium citrate</i>	2	
RENACIDIN	3	
<i>sildenafil</i>	2	PA; QL
STENDRA	4	PA; QL
<i>tadalafil oral tablet 10 mg, 20 mg</i>	2	PA; QL
TRI-MIX (PAPAVRN-PHNTLMN-PGE1)	4	
URELLE	4	
<i>uretron d-s</i>	2	
URIBEL	4	
<i>urimar-t</i>	2	
<i>uro-458</i>	2	
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5	4	
<i>urogesic-blue</i>	2	
<i>uro-mp</i>	2	
UROQID-ACID NO.2	4	
<i>uryl</i>	2	
<i>ustell</i>	2	
<i>utira-c</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>varденаfil</i>	2	PA; QL
URINARY ANESTHETICS		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	2	
PYRIDIUM	4	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
<i>calcium 500 + d oral tablet, chewable</i>	2	ACA; OTC
<i>calcium 600 + d(3) oral tablet 600 mg(1,500mg) -400 unit</i>	2	ACA; OTC
<i>calcium carbonate-vitamin d3 oral tablet 600 mg(1,500mg) -200 unit</i>	2	ACA; OTC
<i>calcium citrate-vitamin d3 oral tablet 315 mg-5 mcg (200 unit)</i>	2	ACA; OTC
<i>calcium citrate-vitamin d3 oral tablet 315 mg-6.25 mcg (250 unit)</i>	2	OTC
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	4	
<i>effer-k oral tablet, effervescent 25 meq</i>	2	
GALZIN	4	
<i>klor-con</i>	2	
<i>klor-con 10</i>	2	
<i>klor-con 8</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>klor-con m10</i>	2	
<i>klor-con m15</i>	2	
<i>klor-con m20</i>	2	
<i>klor-con/ef</i>	2	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	4	
<i>k-tab oral tablet extended release 8 meq</i>	2	
<i>lugols oral</i>	2	
<i>oyster shell + d3</i>	2	ACA; OTC
POTABA	4	
<i>potassium chloride oral</i>	2	
<i>strong iodine oral</i>	2	
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
DOJOLVI	5	PA; LA
VITAMINS & HEMATINICS		
<i>b complex 1 (with folic acid)</i>	2	ACA; OTC
<i>b complex-vitamin b12</i>	2	ACA; OTC
<i>b complex-vitamin c-folic acid oral tablet</i>	2	ACA; OTC
<i>balanced b-100 complex</i>	2	ACA; OTC
<i>balanced b-100 oral tablet</i>	2	ACA; OTC
<i>balanced b-50</i>	2	ACA; OTC
<i>bal-care dha</i>	1	
BAL-CARE DHA ESSENTIAL	4	

Drug Name	Drug Tier	Requirements / Limits
<i>b-complex with vitamin c oral tablet</i>	2	ACA; OTC
<i>cholecalciferol (vitamin d3) oral capsule 25 mcg (1,000 unit)</i>	2	ACA; OTC
<i>cholecalciferol (vitamin d3) oral tablet 25 mcg (1,000 unit)</i>	2	OTC
CITRANATAL B-CALM (FE GLUC)	4	
<i>classic prenatal</i>	1	ACA; OTC
<i>c-nate dha</i>	1	
<i>complete natal dha</i>	1	
<i>complex b-100 oral tablet extended release</i>	2	ACA; OTC
CONCEPT DHA	4	
CONCEPT OB	4	
<i>cyanocobalamin (vitamin b-12) injection</i>	2	
DERMACINRX PRENATRYL	4	
<i>dialyvite 800 oral tablet</i>	2	ACA; OTC
DRISDOL	4	
DUET DHA BALANCED	4	
DUET DHA WITH OMEGA-3	4	
<i>elite-ob</i>	2	
ENBRACE HR	4	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	2	

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

Drug Name	Drug Tier	Requirements / Limits
FLORIVA (FLUORIDE-VITAMIN D3)	4	OTC
<i>fluoride (sodium) oral drops</i>	1	ACA; OTC
<i>fluoride (sodium) oral tablet, chewable</i>	1	ACA; OTC
<i>folic acid oral tablet 1 mg</i>	1	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	1	ACA; OTC
<i>folivane-ob</i>	2	
<i>foltabs 800</i>	2	ACA; OTC
<i>full spectrum b-vitamin c</i>	2	ACA; OTC
<i>hydroxocobalamin</i>	2	
<i>kobee</i>	2	ACA; OTC
KOSHER PRENATAL PLUS IRON	4	
<i>kpn oral tablet</i>	1	ACA; OTC
<i>ludent fluoride</i>	1	ACA; OTC
MARNATAL-F	4	
MECOBALAMIN (VITAMIN B12) INJECTION	4	
<i>m-natal plus</i>	1	
<i>multi-vitamin with fluoride oral drops</i>	1	ACA; OTC
<i>multi-vitamin with fluoride oral tablet, chewable</i>	2	ACA; OTC
<i>multivitamins with fluoride</i>	2	ACA; OTC
<i>mvc-fluoride</i>	2	ACA; OTC
<i>mynatal</i>	1	
<i>mynatal plus</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mynatal-z</i>	1	
NASCOBAL	3	QL
NATACHEW (FE BIS-GLYCINATE)	4	
<i>natural b-100 complex</i>	2	ACA; OTC
NEEVODHA (WITH ALGAL OIL)	4	
NEONATAL COMPLETE	4	
NEONATAL FE	4	
NEONATAL-DHA	4	
NESTABS	4	
NESTABS ABC	4	
NESTABS DHA	4	
NESTABS ONE	4	
<i>newgen</i>	1	
OB COMPLETE	4	
OB COMPLETE ONE	4	
OB COMPLETE PETITE	4	
OB COMPLETE PREMIER	4	
OB COMPLETE WITH DHA	4	
<i>one daily prenatal</i>	1	ACA; OTC
<i>perry prenatal</i>	1	ACA; OTC
<i>pnv 29-1</i>	1	
<i>pnv-dha</i>	2	
<i>pnv-omega</i>	2	
<i>pnv-select</i>	1	
<i>pr natal 400</i>	1	
<i>pr natal 400 ec</i>	1	

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

Drug Name	Drug Tier	Requirements / Limits
<i>pr natal 430</i>	1	
<i>pr natal 430 ec</i>	1	
<i>prena1 chew</i>	1	
<i>prena1 pearl</i>	1	
<i>prena1 true</i>	1	
PRENATA	4	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
<i>prenatal complete</i>	1	ACA; OTC
<i>prenatal multi-dha (algal oil)</i>	1	ACA; OTC
<i>prenatal one daily</i>	1	ACA; OTC
<i>prenatal oral tablet 28 mg iron- 800 mcg</i>	1	ACA; OTC
<i>prenatal plus</i>	1	
<i>prenatal plus (calcium carb)</i>	1	
PRENATAL PLUS DHA ORAL COMBO PACK	4	
<i>prenatal vitamin oral tablet 27 mg iron- 0.8 mg</i>	1	ACA; OTC
<i>prenatal vitamin plus low iron</i>	1	
<i>prenatal vitamin with minerals</i>	1	ACA; OTC
<i>prenatal vits96-iron fum-folic</i>	1	ACA; OTC
<i>prenatal-u</i>	2	
PRENATE AM	4	
PRENATE CHEWABLE	4	
PRENATE DHA (FERR ASP GLYCIN)	4	

Drug Name	Drug Tier	Requirements / Limits
PRENATE ELITE (IRON ASP GLYC)	4	
PRENATE ENHANCE	4	
PRENATE ESSENTIAL(IRON-ASP-GL)	4	
PRENATE MINI (FERR ASP GLYCIN)	4	
PRENATE PIXIE	4	
PRENATE RESTORE	4	
PRENATE STAR	4	
<i>preplus</i>	1	
<i>pretab</i>	1	
PRIMACARE	4	
PROVIDA OB	4	
PUREFE OB PLUS	4	
<i>rena-vite</i>	2	ACA; OTC
R-NATAL OB	4	
SELECT-OB	4	
SELECT-OB (FOLIC ACID)	4	
SELECT-OB + DHA	4	
<i>se-natal 19 chewable</i>	1	
<i>se-natal-19</i>	1	
<i>stress formula</i>	2	ACA; OTC
<i>stress formula with iron</i>	2	ACA; OTC
<i>stress formula with iron(sulf)</i>	2	ACA; OTC
<i>super b complex-vitamin c</i>	2	ACA; OTC

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

Drug Name	Drug Tier	Requirements / Limits
<i>super b maxi complex</i>	2	ACA; OTC
<i>super quints</i>	2	ACA; OTC
<i>super quints b-50</i>	2	ACA; OTC
<i>taron-c dha</i>	2	
THRIVITE RX	4	
TRICARE	4	
TRIFERIC	4	
<i>trinatal rx 1</i>	1	
<i>trinate</i>	1	
TRISTART DHA	4	
<i>tri-vitamin with fluoride</i>	2	ACA; OTC
<i>virt-c dha</i>	2	
<i>virt-nate dha</i>	1	
<i>virt-pn dha</i>	2	
<i>virt-pn plus</i>	2	
VITAFOL FE PLUS	4	
VITAFOL GUMMIES	4	
VITAFOL NANO	4	
VITAFOL ULTRA	4	
VITAFOL-OB	4	
VITAFOL-OB+DHA	4	

Drug Name	Drug Tier	Requirements / Limits
VITAFOL-ONE	4	
VITAMED MD ONE RX	4	
VITAMEDMD REDICHEW RX	4	
<i>vitamin b complex oral tablet</i>	2	ACA; OTC
<i>vitamin b complex-folic acid oral tablet</i>	2	ACA; OTC
<i>vitamin d3 oral tablet 10 mcg (400 unit)</i>	2	ACA; OTC
<i>vitamin d3 oral tablet, chewable 25 mcg (1,000 unit)</i>	2	ACA; OTC
<i>vitamins a,c,d and fluoride</i>	2	ACA; OTC
VITAPEARL	4	
VITATRUE	4	
VP-PNV-DHA	4	
<i>westab plus</i>	1	
<i>westgel dha</i>	1	
<i>zatean-pn dha</i>	2	
<i>zatean-pn plus</i>	2	
<i>zingiber</i>	2	

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CLOBEX.....	42	CONZIP.....	21	cyproheptadine	78
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clomipramine.....	24	COPIKTRA	11	CYSTAGON	82
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CLOZARIL	24	CORTENEMA	58	dapsone	7, 39
c-nate dha	84	CORTISPORIN-TC	47	DAPTACEL (DTAP	
COAGADEX	32	COTELIC.....	11	PEDIATRIC) (PF).....	64
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DAYVIGO	24	MOXIFLOX(PF)-		digox	32
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DEMSER.....	29	TRANSMITTER	50	diltiazem	29
DENAVIR.....	41	DEXCOM G5 RECEIVER ..	50	dilt-xr	29
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PRENATRYL	84	amphetamine	24	DIURIL.....	29
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BODY OIL	42	DIACOMIT	15	dofetilide.....	28
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SCALP OIL	42	DIASTAT	15	dolishale.....	70
DERMOTIC OIL	47	DIASTAT ACUDIAL	15	donepezil.....	18
DESCOVY	3	DIATRUE CONTROL SOLN		DONNATAL	57
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desogestrel-ethinyl estradiol.	70	DIBENZYLINE	29	dorzolamide-timolol	76
DESONATE.....	42	DICLEGIS.....	58	dorzolamide-timolol (pf)	76
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DESOXYN.....	24	dicloxacin	8	DOVATO	4
desrx	43	dicyclomine	57	DOVONEX	36
DESVENLAFAXINE	24	didanosine.....	4	doxazosin	29
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.....	58	EASYGLUCO PLUS		ELOCTATE	32
DRISDOL	84	NORMAL CONTROL	50	eluryng	68
dronabinol	58	EASYMAX 15 LEVEL 2	50	EMBRACE EVO LEVEL 1.51	
drosiprenone-e.estradiol-lm.fa		EASYMAX NORMAL		EMBRACE GLUCOSE	
.....	70	CONTROL	50	CONTROL LOW	51
drosiprenone-ethinyl estradiol		ECLIPSE NEEDLE	50	EMBRACE TALK	
.....	70	EC-NAPROSYN	22	CONTROL-LOW (L1)	51
DROXIA	11	econazole	41	EMCYT	11
droxidopa	45	econtra ez	70	EMGALITY PEN	17
DSUVIA	19	econtra one-step	70	EMGALITY SYRINGE	17
DUAVEE	67	ecotrin	22	emoquette	70
DUET DHA BALANCED	84	ecotrin low strength	22	EMPAVELI	45
DUET DHA WITH OMEGA-3		EDARBI	29	EMSAM	25
.....	84	EDECIN	29	emtricitabine	4
DUETACT	55	EDEX	82	emtricitabine-tenofovir (tdf)	4
DUEXIS	22	EDLUAR	25	EMTRIVA	4
dulcolax (magnesium		ed-spaz	57	EMVERM	7
hydroxide)	58	EDURANT	4	enalapril maleate	29, 30
DULERA	80	eemt	67	enalapril-hydrochlorothiazide	
duloxetine	25	eemt hs	68		30
DUOBRII	43	efavirenz	4	ENBRACE HR	84
DUOPA	16	efavirenz-emtricitabin-tenofov		ENBREL	66
DUPIXENT PEN	37		4	ENBREL MINI	66
DUPIXENT SYRINGE	37	efavirenz-lamivu-tenofov disop		ENBREL SURECLICK	66
DUREZOL	77		4	endocet	19
dutasteride	82	effer-k	83	ENERGIX-B (PF)	64
dutasteride-tamsulosin	82	EFFER-K	83	ENERGIX-B PEDIATRIC	
dvorah	19	EFFIENT	32	(PF)	64
DXEVO	48	EFUDEX	37	ENLITE SYSTEM	51
DYANAVEL XR	25	EGRIFTA SV	62	enoxaparin	32
DYMISTA	80	ELEMENT COMPACT		enpresse	70
DYRENIUM	29	NORMAL CONTROL	50	enskyce	70
E		ELEMENT NORMAL		ENSPRYNG	11
e.e.s. 400	6	CONTROL	50	ENSTILAR	36
E.E.S. GRANULES	6	eletriptan	17	entacapone	16
EASY PLUS II HIGH		ELIGARD	11	entecavir	4
CONTROL	50	ELIGARD (3 MONTH)	11	ENTEREG	58
EASY STEP HIGH		ELIGARD (4 MONTH)	11	ENTOCORT EC	58
CONTROL SOLN	50	ELIGARD (6 MONTH)	11	ENTRESTO	35
EASY TALK HIGH		ELIMITE	44	enulose	59
CONTROL	50	elinst	70	ENZOCLEAR	39
EASY TOUCH BLU CTRL		ELIQUIS	32	EPCLUSA	4
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EASY TRAK II CTRL SOLN-		30D START	32	EPIFOAM	36
NORMAL	50	elite-ob	84	epinastine	74
		ELIXOPHYLLIN	80	epinephrine	78

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EPIPEN 2-PAK	78	etodolac	22	FEMHRT LOW DOSE	68
EPIPEN JR 2-PAK.....	78	etonogestrel-ethinyl estradiol	68	femynor.....	70
EPISIL	46	etoposide.....	11	fenofibrate.....	34
epitol.....	15	etravirine.....	4	FENOFIBRATE	34
EPIVIR	4	EUCRISA	37	fenofibrate micronized.....	34
EPIVIR HBV	4	EURAX	44	fenofibrate nanocrystallized	34
eplerenone	30	euthyrox.....	57	fenofibric acid.....	34
eprosartan	30	EVEKEO	25	fenofibric acid (choline)	34
EPZICOM	4	EVEKEO ODT	25	FENOGLIDE.....	34
EQUETRO	15	everolimus (antineoplastic) ..	11	fenopufen.....	22
ergocalciferol (vitamin d2)...	84	everolimus		fentanyl	19
ergoloid.....	25	(immunosuppressive)	11	fentanyl citrate	20
ERGOMAR.....	17	EVERSENSE SENSOR-		FERRIPROX	45
ergotamine-caffeine.....	17	HOLDER.....	51	FETZIMA	25
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ERLEADA	11	EVOCLIN	39	FIBRICOR.....	34
erlotinib	11	EVOLUTION NORMAL		FINACEA.....	39
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ERTACZO	41	EVOTAZ	4	FIORICET	20
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erygel.....	39	EVRYSDI.....	18		20
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ERYPED 400	6	EXELON PATCH.....	18	FLAGYL	7
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ERY-TAB.....	6	exemestane	11	flecainide	28
erythrocin (as stearate)	6	EXTINA	41	FLECTOR	22
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erythromycin ethylsuccinate ..	6	EYSUVIS	77	FLOMAX	82
erythromycin with ethanol ...	39	ezetimibe	34	FLORIVA (FLUORIDE-	
erythromycin-benzoyl peroxide		ezetimibe-simvastatin.....	34	VITAMIN D3).....	85
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ESBRIET.....	80	FABIOR	39	FLOVENT HFA.....	80
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ESPEROCT	32	famotidine.....	61	(PF).....	64
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estradiol valerate	68	FASENRA PEN	80	FLUCELVAX QUAD 2021-	
estradiol-norethindrone acet.	68	febuxostat	65	2022 (PF)	64
estrogens-methyltestosterone	68	felbamate	15	fluconazole	3
eszopiclone	25	FELBATOL.....	15	flucytosine	3
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fluocinolone.....	43	FORFIVO XL.....	25	galantamine.....	18
fluocinolone acetone oil	47	formoterol fumarate.....	80	GALZIN	83
fluocinolone and shower cap	43	FORTEO	66	GARDASIL 9 (PF).....	64
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FLUORESC EIN-		FOSAMAX	66	GATTEX 30-VIAL	59
BENOXINATE	74	FOSAMAX PLUS D.....	66	gavilyte-c	59
fluorescein-proparacaine	74	fosamprenavir	4	gavilyte-g	59
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DEFENSE	46	fosinopril-hydrochlorothiazide	30	GE100 CONTROL SOLUTION NORMAL	51
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RELIEF	46	FREESTYLE CONTROL	51	GELNIQUE	82
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FLUOROPLEX.....	37	FREESTYLE FREEDOM LITE	51	gemfibrozil	34
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flurandrenolide	43	FREESTYLE LIBRE 14 DAY READER.....	51	GENOTROPIN.....	62
flurazepam.....	25	FREESTYLE LIBRE 14 DAY SENSOR.....	51	GENOTROPIN MINISQUICK	62
flurbiprofen.....	22	FREESTYLE LIBRE 2 READER.....	51	gentak	73
flurbiprofen sodium.....	75	FREESTYLE LIBRE 2 SENSOR.....	51	gentamicin	40, 73
flutamide.....	12	FREESTYLE LITE METER	51	GENTEEL VACUUM LANCING DEVICE	51
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fluticasone propion-salmeterol	80	FREESTYLE TEST	48	GENVOYA	4
fluvastatin	34	FROVA	17	GEODON	25
fluvoxamine.....	25	frovatriptan	17	GILENYA	63
FLUZONE HIGHDOSE		full spectrum b-vitamin c	85	GILOTRIF	12
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FML LIQUIFILM	77	FUZEON	4	GLEOLAN	45
folic acid.....	85	fyavolv.....	68	GLEOSTINE	12
folivane-ob	85	FYCOMPA.....	15	GLIADEL WAFER.....	12
foltabs 800	85	G		glimepiride.....	55
fondaparinux.....	32	g tussin ac	78	glipizide	55
FORA GT EL MULTI-		gabapentin	15	glipizide-metformin	56
FUNCTN MONITOR	51			GLOPERBA	65
FORA KETONE CONTROL				GLUCAGEN DIAGNOSTIC KIT	49
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GLUCAGON HCL	49	HALOG	43	HUMALOG MIX 75-25(U- 100)INSULN	53
GLUCOCARD 01 NORMAL CONTROL	51	haloperidol.....	25	HUMALOG U-100 INSULIN	53
GLUCOCOM CONTROL NORMAL.....	51	haloperidol lactate	25	HUMATIN	7
GLUCOSE CONTROL.....	51	HARVONI.....	4	HUMIRA.....	66
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GLUCOTROL XL	56	HEALTHPRO HIGH-LOW CONTROL	51	HUMIRA PEN CROHNS-UC- HS START	66
glyburide.....	56	heather	68	HUMIRA PEN PSOR- UVEITS-ADOL HS	66
glyburide micronized.....	56	HEMANGEOL.....	30	HUMIRA(CF)	66
glyburide-metformin	56	HEMLIBRA	32	HUMIRA(CF) PEDI CROHNS STARTER	66
glycopyrrolate.....	57	hemmorex-hc.....	59	HUMIRA(CF) PEN.....	67
glydo.....	40	hep flush-10 (pf).....	32	HUMIRA(CF) PEN CROHNS-UC-HS.....	66
GLYNASE	56	heparin (porcine)	33	HUMIRA(CF) PEN PEDIATRIC UC.....	66
GLYXAMBI	56	HEPARIN (PORCINE) IN 0.9% NACL.....	32	HUMIRA(CF) PEN PSOR- UV-ADOL HS.....	66
GOJJI GLUCOSE CNTRL SOL-NORMAL.....	51	heparin (porcine) in 5 % dex	32	HUMULIN 70/30 U-100 INSULIN	53
GOJJI KETONE CONTROL SOLN-L1.....	51	heparin (porcine) in nacl (pf)	33	HUMULIN 70/30 U-100 KWIKPEN.....	53
GOJJI MULTI-FUNCTIONAL METER	51	heparin flush(porcine)-0.9nacl	33	HUMULIN N NPH INSULIN KWIKPEN.....	53
GOLYTELY.....	59	heparin lock flush (porcine) .	33	HUMULIN N NPH U-100 INSULIN	53
GONITRO.....	35	heparin lockflush(porcine)(pf)	33	HUMULIN R REGULAR U- 100 INSULN	53
GOPRELTO	40	heparin(porcine) in 0.45% nacl	33	HUMULIN R U-500 (CONC) INSULIN	53
GRALISE	15	HEPARIN(PORCINE) IN 0.45% NACL.....	33	HUMULIN R U-500 (CONC) KWIKPEN.....	53
granisetron hcl	59	heparin, porcine (pf).....	33	HYCANTIN.....	12
griseofulvin microsize	3	HEPARIN, PORCINE (PF) .	33	HYCODAN (WITH HOMATROPINE).....	78
griseofulvin ultramicrosize.....	3	HEPLISAV-B (PF).....	64	hydralazine	30
guaifenesin ac	78	HEPSERA	4	HYDREA	12
guanfacine	25, 30	HETLIOZ	25	hydrochlorothiazide	30
GVOKE HYPOPEN 2-PACK	49	HETLIOZ LQ.....	25	hydrocodone bitartrate.....	20
GVOKE PFS 2-PACK SYRINGE.....	49	HIBERIX (PF).....	64	hydrocodone-acetaminophen	20
GYNAZOLE-1.....	68	hidex	48	hydrocodone-chlorpheniramine	78
gynol ii.....	68	HIPREX.....	10	hydrocodone-homatropine....	78
H		HISTEX-AC	78		
HAEGARDA	80	homatropine.....	74		
hailey	70	HORIZANT.....	18		
hailey 24 fe.....	70	HUMALOG JUNIOR KWIKPEN U-100	53		
hailey fe 1.5/30 (28)	70	HUMALOG KWIKPEN INSULIN	53		
hailey fe 1/20 (28)	70	HUMALOG MIX 50-50 INSULN U-100	53		
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hydrocortisone	43, 48, 59	IMURAN.....	12	ISORDIL	35
hydrocortisone acetate	59	INBRIJA.....	16	ISORDIL TITRADOSE	35
hydrocortisone butyrate	43	incassia	68	isosorbide dinitrate	35
hydrocortisone butyr-emollient	43	INCRELEX	45	isosorbide mononitrate	35
hydrocortisone valerate	43	INCRUSE ELLIPTA.....	80	isotretinoin	39
hydrocortisone-acetic acid....	47	indapamide	30	isoxsuprine.....	68
hydrocortisone-pramoxine ..	36, 59	INDOCIN	22	isradipine	30
hydromet.....	79	indomethacin	22	itraconazole.....	3
hydromorphone	20	INFANRIX (DTAP) (PF)....	64	ivermectin	7, 39, 44
hydroxocobalamin	85	INFASURF.....	45	IXIARO (PF)	64
hydroxychloroquine	7	INFINITY CONTROL		IXINITY	33
HYDROXYCHLOROQUINE	7	SOLUTION NORM	52	J	
hydroxyurea.....	12	INFINITY VOICE CTRL		jaimiess	70
hydroxyzine hcl	78	SOLN-LVL 2	52	JAKAFI	12
hydroxyzine pamoate	78	INGREZZA	18	JALYN	82
hyophen	83	INLYTA	12	JANSSEN COVID-19	
hyoscyamine sulfate	57	INOVA	39	VACCINE (EUA)	65
hyosyne.....	57	INOVA 4-1.....	37	jantoven	33
HYPER-SAL	80	INOVA 8-2.....	37	JANUMET	56
HYSINGLA ER	20	INPEN (FOR HUMALOG) .	52	JANUMET XR.....	56
I		INPEN (FOR NOVOLOG OR		JANUVIA.....	56
ibandronate	66	FIASP).....	52	JARDIANCE	56
IBRANCE	12	INSPIRA.....	30	jasmiel (28).....	70
ibu.....	22	INSULIN SYRINGE-		JATENZO.....	54
ibuprofen	22	NEEDLE U-100	49	JELMYTO	12
ibuprofen-famotidine.....	22	INTELENCE	4	jencycla.....	68
icatibant	80	INTRAROSA	68	jinteli.....	68
iclevia	70	INTRON A.....	64	JIVI.....	33
ICLUSIG	12	INVEGA.....	25	jolessa	70
icosapent ethyl.....	34	INVELTYS	77	JORNAY PM.....	25
IDELVION.....	33	INVIRASE	4	JUBLIA	41
IDHIFA	12	iodine-sodium iodide.....	37	juleber	70
IFE-BIMIX 30/1.....	83	IODOFLEX	37	JULUCA.....	4
IFE-PG20	83	IODOSORB.....	37	junel 1.5/30 (21)	70
ILEVRO	75	IOPIDINE.....	77	junel 1/20 (21)	70
ILUVIEN.....	77	IPOL	64	junel fe 1.5/30 (28)	70
imatinib.....	12	ipratropium bromide.....	47, 80	junel fe 1/20 (28)	70
IMBRUVICA	12	ipratropium-albuterol.....	80	junel fe 24.....	70
imipramine hcl.....	25	irbesartan	30	JUXTAPID	34
imipramine pamoate	25	irbesartan-hydrochlorothiazide	30	JYNARQUE	54
imiquimod	64	K			
IMOVAX RABIES VACCINE		IRESSA	12	kaitlib fe.....	70
(PF).....	64	ISENTRESS	4	KALETRA	4
IMPAVIDO	7	ISENTRESS HD	4	kalliga	70
		isibloom.....	70	KALYDECO	80
		isoniazid.....	7	KAPVAY	25
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metaxalone	19	microgestin 1/20 (21)	71	MONODOX	9
metformin	56	MICROGESTIN 24 FE	71	mono-lylah.....	71
methadone	20	microgestin fe 1.5/30 (28)	71	montelukast.....	80
methadose.....	20	microgestin fe 1/20 (28)	71	MONUROL	10
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methazolamide	75	midodrine.....	45	MORGIDOX 1X 50	9
methenamine hippurate	10	migergot.....	17	MORGIDOX 2X100	9
methenamine mandelate	10	miglitol	56	morphine.....	20
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methergine	72	mili.....	71	MOTOFEN.....	57
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metoprolol succinate	30	MIRVASO.....	39	MYCOBUTIN.....	8
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nabumetone	22	
nadolol	30	
nadolol-bendroflumethiazide	30	
naftifine	41	
NAFTIN	41	
NALFON	22	
NALOCET	20	
naloxone	22	
naltrexone	22	
NAMENDA	18	
NAMENDA TITRATION		
PAK	18	
NAMENDA XR	18	
NAMZARIC	18	
NAPRELAN CR	22	
NAPROSYN	22	
naproxen	22	
naproxen sodium	22	
NAPROXEN SODIUM	23	
naproxen-esomeprazole	23	
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NARCAN	23	
NARDIL	26	
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NATACYN	73	
nateglinide	56	
NATESTO	54	
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NUBEQA	13	omeprazole	62	ORFADIN	45
NUCALA	81	omeprazole-sodium bicarbonate	62	ORIAHNN	69
NUCORT	44	OMIDRIA	75	ORILISSA	55
NUDEXTA	18	OMNIPOD DASH 5 PACK POD	52	ORKAMBI	81
NULEV	57	ON CALL EXPRESS CONTROL	52	orphenadrine citrate	19
NULYTELY LEMON-LIME	59	ON CALL PLUS CONTROL	52	orphenadrine-asa-caffeine	19
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NURTEC ODT	17	ondansetron hcl	59	ORTIKOS	60
NUVESSA	69	one daily prenatal	85	oscimin	57
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