SilverScript®
P.O. Box 30006, Pittsburgh, PA 15222-0330

MHBP SM

SilverScript (EGWP) Employer PDP for MHBP Consumer Option (SilverScript (EGWP))

2026 Formulary

(List of Covered Drugs or "Drug List")

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

This formulary was updated on 10/23/2026. For more recent information or other questions, please contact Customer Care at 1-833-825-6755, 24 hours a day, 7 days a week. TTY users should call 711.

Formulary ID Number: 26021

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

When this Drug List (formulary) refers to “we,” “us,” or “our,” it means SilverScript® Insurance Company. When it refers to “plan” or “our plan,” it means SilverScript (EGWP).

This document includes a Drug List (formulary) for our plan, which is current as of October 23, 2026. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2027, and from time to time during the year.

Due to legislation in Arkansas, effective January 1, 2026, you may not be able to utilize the following services within the state of Arkansas, unless a court takes action: CVS Retail, CVS Caremark Mail Service, CVS Specialty, and OMNI Care long term pharmacies.

Y0001_GRP_3711389_2026_C_9596_1163_813

10/23/2026

What is the SilverScript (EGWP) formulary?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by SilverScript (EGWP) 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. SilverScript (EGWP) will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a SilverScript (EGWP) network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your *Evidence of Coverage*.

Please note: MHBP provides additional coverage that may cover prescription drugs not included in your Medicare Part D benefit. For more information about your share of the cost or which prescription drugs may or may not be covered, please call Customer Care.

The additional coverage provided by MHBP covers certain prescription drugs not covered under Medicare Part D. Payments made for these prescription drugs will not count toward your total out-of-pocket costs.

Please contact Customer Care for any questions regarding your additional benefits. Customer Care also has free language interpreter services available for non-English speakers.

Can the formulary change?

Most changes in drug coverage happen on January 1, but SilverScript (EGWP) may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: SilverScriptEmployerPDP.MemberDoc.com.

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately move it to a different cost-sharing tier or add new restrictions.

  We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

  If you are currently taking that brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

  If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the

section below titled “How do I request an exception to the SilverScript (EGWP)'s formulary?”

Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug to replace a brand name drug currently on the formulary, or add a new biosimilar to replace an original biological product currently on the formulary, or add new restrictions or move a drug we are keeping on the formulary to a higher cost-sharing tier or both after we add a corresponding drug. We may remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product, or move it to a different cost-sharing tier, or both. Or we may make changes based on new clinical guidelines.

  If we remove drugs from our formulary, add quantity limits, prior authorization, and/or step therapy restrictions on a drug; or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.

  If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can find information in the section below titled “How do I request an exception to the SilverScript (EGWP)'s formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2026 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2026 coverage year except as described above. This means these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

This formulary is current as of October 23, 2026. To get updated information about the drugs covered by our plan, please contact us at the number on your member ID card. Our contact information also appears on the front and back cover pages.

If we have other types of mid-year non-maintenance formulary changes unrelated to the reasons stated above (e.g., remove drugs from our formulary; add prior authorization requirements, quantity limits, and/or step therapy restrictions on a drug; or move a drug to a higher cost-sharing tier), we will notify you by mail. We will also update our formulary with the new information. The updated formulary may be obtained by calling us.

How do I use the formulary?

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

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index at the back of this document. 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. 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.

Medical Condition

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

What are generic drugs?

Our 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. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

What are original biological products and how are they related to biosimilars?

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For discussion of drug types, please see the *Evidence of Coverage*, Chapter 3 Section 3.1, "The 'Drug List' tells which Part D drugs are covered."

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 (PA):** Some drugs require you or your prescriber to get prior authorization. You must get an approval from us before you can get your prescription filled. If you don't get approval, we may not cover the drug.
- **Quantity Limits (QL):** For certain drugs, there is a quantity limit on the amount of the drug that we will cover. For example, our plan provides up to 30 tablets per 30-day prescription for *atorvastatin*. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy (ST):** In some cases, our 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, SilverScript (EGWP) will then cover Drug B.

There may be additional drugs that are not available at mail and not marked NM, including some hepatitis B medications, post-transplant medications, and oral medications used to treat HIV.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You may ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask SilverScript (EGWP) to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the SilverScript (EGWP)'s formulary?" for information about how to request an exception.

What if my drug is not on the formulary?

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

If you learn that our plan does not cover your drug, you have two options:

- You can ask Customer Care for a list of similar drugs that are covered by our plan. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by our plan.
- You can ask us to make an exception and cover your drug. See below for information about how to request an exception.

MHBP offers additional coverage on some prescription drugs not normally covered under a Medicare Part D prescription drug plan benefit. Payments made for these drugs will not count toward your total out-of-pocket costs. Please contact Customer Care for any questions regarding your additional benefit.

How do I request an exception to the SilverScript (EGWP)'s formulary?

You can ask us 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 a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, SilverScript (EGWP) 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.
- You can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the Specialty (High Cost) Tier. If approved, this would lower the amount you must pay for your drug.

Generally, we will only approve your request for an exception if the alternative drug is included on the plan's formulary, and the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a tiering or formulary exception, including an exception to a coverage restriction. **When you request an exception, your prescriber will need to explain the medical reasons why you need the exception.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

What can I do if my drug is not on the formulary or has a restriction?

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 has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover or requesting a formulary exception so that we will cover the drug you take. While you and your doctor 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 has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer than 30 days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved, after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

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

If you experience a change in your level of care, such as a move from a home to a long-term care setting, and need a drug that is not on our formulary (or if your ability to get your drugs is limited), we may cover a one-time temporary supply from a network pharmacy for up to 31 days, unless you have a prescription for fewer days. You should use the plan's exception process if you wish to have continued coverage of the drug after the temporary supply is finished.

For more information

For more detailed information about your SilverScript (EGWP) prescription drug coverage, please review your *Evidence of Coverage* and other plan materials.

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

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

Initial Coverage Stage Copayment/Coinsurance Levels

The plan has four Cost-Sharing Tiers

Every drug on the plan's drug list is in one of four cost-sharing tiers. In general, the higher the cost-sharing tier number, the higher your cost for the drug.

- **Cost-Sharing Tier 1: Generic**
- **Cost-Sharing Tier 2: Preferred Brand**
- **Cost-Sharing Tier 3: Non-Preferred Brand**
- **Cost-Sharing Tier 4: Specialty (High Cost)**

To find out which cost-sharing tier your drug is in, look it up in the plan's drug list that begins on page 1.

Your share of the cost when you get a *one-month* supply of a covered Part D prescription drug before your Individual maximum out-of-pocket is met:

	Network Retail Pharmacy (Up to a 30-day supply)	**Mail-Order Pharmacy** (Up to a 30-day supply)	**Long-Term Care (LTC) Pharmacy** (Up to a 31-day supply)
Tier 1: Generic	$8.00	$15.00	$8.00
Tier 2: Preferred Brand	$45.00	$70.00	$45.00
Tier 3: Non-Preferred Brand	$70.00	$110.00	$70.00
Tier 4: Specialty (High Cost)	25% of total cost Maximum $225.00	25% of total cost Maximum $425.00	25% of total cost Maximum $225.00

For long term supply cost information, please refer to your *Evidence of Coverage*.

You won't pay more than $35 for a one-month supply of each covered insulin product regardless of the cost-sharing tier.

Costs shown in the table above reflect the additional coverage that may be provided by MHBP. Drugs that are part of your standard Medicare plan, but do not have additional coverage from MHBP would be covered under the 2026 Medicare Part D Defined Standard Benefit. Please visit ***https://q1medicare.com/PartD-The-2026-Medicare-Part-D-Outlook.php*** for more information about the 2026 Medicare Part D Defined Standard Benefit drug costs.

SilverScript (EGWP)'s formulary

The formulary that begins on page 1 provides coverage information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the Index at the back of this book.

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

The information in the Requirements/Limits column tells you if SilverScript (EGWP) has any special requirements for coverage of your drug.

PA	Prior Authorization
QL	Drug has Quantity Limits
ST	Step Therapy required
NM	Not available at our mail-order pharmacies. Drugs with this abbreviation are not typically available at CVS Caremark® Mail Service Pharmacy. Maintenance medications (drugs you take on a regular basis for a chronic or long-term condition) without this abbreviation are typically available at CVS Caremark® Mail Service Pharmacy. Actual availability may vary.
NDS	Non-extended day supply. Not available for an extended (long-term) supply.
B/D	This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

Drug Name	Tier	Requirements/ Limits
ANALGESICS		
GOUT		
allopurinol TABS 100mg, 300mg	1	
allopurinol TABS 200mg	1	ST
allopurinol sodium (generic of ALOPRIM) SOLR 500mg	4	NDS
ALOPRIM SOLR 500mg	4	NDS
colchicine (generic of MITIGARE) CAPS .6mg QL (60 caps / 30 days)	1	QL
colchicine TABS .6mg QL (120 tabs / 30 days)	1	QL
colchicine w/ probenecid tab 0.5-500 mg	1	
febuxostat (generic of ULORIC) TABS 40mg, 80mg	1	PA
GLOPERBA SOLN .6mg/5ml QL (300 mL / 30 days)	3	QL
KRYSTEXXA SOLN 8mg/50ml, 8mg/ml	4	NDS NM PA
MITIGARE CAPS .6mg QL (60 caps / 30 days)	3	QL
probenecid TABS 500mg	1	
ULORIC TABS 40mg, 80mg	3	PA
MISCELLANEOUS		
acetaminophen SOLN 10mg/ml	1	
clonidine hcl (analgesia) (generic of DURACLON) SOLN 100mcg/ml	1	B/D
DURACLON SOLN 100mcg/ml	3	B/D
JOURNAVX TABS 50mg QL (29 tabs / 14 days)	2	QL PA
lidocaine hcl (local anesth.) SOLN 4%	1	B/D
lidocaine hcl (local anesth.) (generic of XYLOCAINE-MPF) SOLN .5%, 1%, 1.5%, 2%	1	B/D
lidocaine hcl (local anesth.) (generic of XYLOCAINE) SOLN .5%, 1%, 2%	1	B/D
XYLOCAINE SOLN .5%, 1%, 2%	3	B/D
XYLOCAINE-MPF SOLN .5%, 1%, 1.5%, 2%	3	B/D

Drug Name	Tier	Requirements/ Limits
NSAIDS		
ARTHROTEC 50 TAB	3	
ARTHROTEC 75 TAB	3	
CELEBREX CAPS 50mg, 100mg, 200mg QL (60 caps / 30 days)	3	QL
CELEBREX CAPS 400mg QL (30 caps / 30 days)	3	QL
celecoxib (generic of CELEBREX) CAPS 50mg, 100mg, 200mg QL (60 caps / 30 days)	1	QL
celecoxib (generic of CELEBREX) CAPS 400mg QL (30 caps / 30 days)	1	QL
COMBOGESIC INJ 300-1000	3	
diclofenac potassium (generic of ZIPSOR) CAPS 25mg QL (120 caps / 30 days)	4	NDS QL PA
diclofenac potassium TABS 25mg QL (120 tabs / 30 days)	4	NDS QL PA
diclofenac potassium TABS 50mg QL (120 tabs / 30 days)	1	QL
diclofenac sodium TB24 100mg; TBEC 25mg, 50mg, 75mg	1	
diclofenac w/ misoprostol tab delayed release 50-0.2 mg (generic of ARTHROTEC 50)	1	
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (generic of ARTHROTEC 75)	1	
diflunisal TABS 500mg	1	
DOLOBID TABS 250mg QL (180 tabs / 30 days)	4	NDS QL PA
DOLOBID TABS 375mg QL (120 tabs / 30 days)	4	NDS QL PA
etodolac CAPS 200mg, 300mg; TABS 500mg; TB24 400mg, 500mg, 600mg	1	
etodolac (generic of LODINE) TABS 400mg	1	
fenoprofen calcium CAPS 200mg QL (180 caps / 30 days)	4	NDS QL PA

Drug Name	Drug Tier	Requirements/ Limits
fenoprofen calcium CAPS 300mg QL (240 caps / 30 days)	4	NDS QL PA
fenoprofen calcium CAPS 400mg QL (240 caps / 30 days)	1	QL PA
fenopron CAPS 300mg QL (240 caps / 30 days)	4	NDS QL PA
flurbiprofen TABS 100mg	1	
ibu TABS 400mg, 600mg, 800mg	1	
ibuprofen SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg	1	
ibuprofen TABS 300mg QL (120 tabs / 30 days)	4	NDS QL
ibuprofen-famotidine tab 800-26.6 mg QL (90 tabs / 30 days)	1	QL PA
ketoprofen CAPS 25mg, 75mg QL (120 caps / 30 days)	4	NDS QL PA
ketoprofen CAPS 50mg QL (180 caps / 30 days)	4	NDS QL PA
ketoprofen CP24 200mg QL (30 caps / 30 days)	1	QL PA
ketorolac tromethamine TABS 10mg QL (20 tabs / 30 days) PA applies if 65 years and older	1	QL PA
lofena TABS 25mg QL (120 tabs / 30 days)	4	NDS QL PA
LURBIRO TABS 100mg	4	NDS
meclofenamate sodium CAPS 50mg, 100mg	1	
mefenamic acid CAPS 250mg	1	
meloxicam CAPS 5mg, 10mg QL (30 caps / 30 days)	1	QL PA
MELOXICAM SUSP 7.5mg/5ml QL (300 mL / 30 days)	4	NDS QL PA
meloxicam TABS 7.5mg, 15mg	1	
nabumetone TABS 500mg, 750mg	1	
NAPRELAN TB24 375mg QL (120 tabs / 30 days)	4	NDS QL PA
NAPRELAN TB24 500mg QL (90 tabs / 30 days)	4	NDS QL PA
naproxen SUSP 125mg/5ml QL (1800 mL / 30 days)	1	QL PA
naproxen TABS 250mg, 375mg, 500mg	1	
naproxen TBEC 375mg QL (120 tabs / 30 days)	1	QL
naproxen dr TBEC 500mg QL (90 tabs / 30 days)	1	QL
naproxen sodium TABS 275mg, 550mg	1	
naproxen sodium (generic of NAPRELAN) TB24 375mg QL (120 tabs / 30 days)	1	QL PA
naproxen sodium (generic of NAPRELAN) TB24 500mg QL (90 tabs / 30 days)	1	QL PA
naproxen sodium TB24 750mg QL (60 tabs / 30 days)	1	QL PA
naproxen-esomeprazole magnesium tab dr 375-20 mg QL (60 tabs / 30 days)	4	NDS QL PA
naproxen-esomeprazole magnesium tab dr 500-20 mg QL (60 tabs / 30 days)	4	NDS QL PA
ORUDIS CAPS 75mg QL (120 caps / 30 days)	4	NDS QL PA
oxaprozin TABS 600mg	1	
piroxicam CAPS 10mg, 20mg	1	
RELAFEN DS TABS 1000mg	4	NDS PA
SPRIX SOLN 15.75mg/spray QL (5 bottles / 30 days)	4	NDS QL NM PA
sulindac TABS 150mg, 200mg	1	
tolectin 600 TABS 600mg QL (90 tabs / 30 days)	4	NDS QL PA
TOLECTIN DS CAPS 400mg	4	NDS
tolmetin sodium CAPS 400mg	4	NDS
tolmetin sodium TABS 200mg QL (120 tabs / 30 days)	4	NDS QL PA
tolmetin sodium TABS 600mg QL (90 tabs / 30 days)	4	NDS QL PA
VYSCOXA SUSP 10mg/ml QL (946 mL / 21 days)	4	NDS QL PA
XIFYRM SOLN 30mg/ml	3	

Drug Name	Tier	Requirements/ Limits
ZIPSOR CAPS 25mg QL (120 caps / 30 days)	4	NDS QL PA
ZYBIC SUSP 7.5mg/5ml QL (300 mL / 30 days)	4	NDS QL PA
OPIOID ANALGESICS, LONG-ACTING		
BELBUCA FILM 75mcg, 150mcg, 300mcg, 450mcg, 600mcg QL (60 buccal films / 30 days)	3	QL PA
BELBUCA FILM 750mcg, 900mcg QL (60 buccal films / 30 days)	4	NDS QL PA
buprenorphine (generic of BUTRANS) PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr QL (4 patches / 28 days)	1	QL PA
BUTRANS PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr QL (4 patches / 28 days)	3	QL PA
CONZIP CP24 100mg, 200mg, 300mg QL (30 caps / 30 days)	3	QL PA
fentanyl PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr QL (10 patches / 30 days)	1	QL PA
hydrocodone bitartrate CP12 10mg, 15mg, 20mg, 30mg, 40mg, 50mg QL (60 caps / 30 days)	1	QL PA
hydrocodone bitartrate T24A 20mg, 30mg, 40mg, 60mg, 80mg QL (30 tabs / 30 days)	1	QL PA
hydrocodone bitartrate T24A 100mg, 120mg QL (30 tabs / 30 days)	4	NDS QL PA
hydromorphone hcl TB24 8mg, 12mg, 16mg, 32mg QL (30 tabs / 30 days)	1	QL PA
HYSINGLA ER T24A 20mg, 30mg, 40mg QL (30 tabs / 30 days)	3	QL PA
HYSINGLA ER T24A 60mg, 80mg, 100mg QL (30 tabs / 30 days)	4	NDS QL PA
levorphanol tartrate TABS 2mg, 3mg QL (120 tabs / 30 days)	4	NDS QL PA
methadone hcl SOLN 5mg/5ml, 10mg/5ml QL (450 mL / 30 days)	1	QL PA
methadone hcl TABS 5mg, 10mg QL (90 tabs / 30 days)	1	QL PA
METHADONE HCL INJ SOLN 10mg/ml	3	
methadone hydrochloride i (generic of METHADOSE) CONC 10mg/ml QL (90 mL / 30 days)	1	QL PA
morphine sulfate CP24 10mg, 20mg, 30mg, 50mg, 60mg, 80mg, 100mg QL (60 caps / 30 days)	1	QL PA
morphine sulfate (generic of MS CONTIN) TBCR 15mg, 30mg, 60mg QL (90 tabs / 30 days)	1	QL PA
morphine sulfate TBCR 100mg, 200mg QL (90 tabs / 30 days)	1	QL PA
morphine sulfate beads CP24 30mg, 45mg, 60mg, 75mg, 90mg, 120mg QL (30 caps / 30 days)	1	QL PA
MS CONTIN TBCR 15mg, 30mg QL (90 tabs / 30 days)	3	QL PA
MS CONTIN TBCR 60mg QL (90 tabs / 30 days)	4	NDS QL PA
NUCYNTA ER TB12 50mg QL (60 tabs / 30 days)	3	QL PA
NUCYNTA ER TB12 100mg, 150mg, 200mg, 250mg QL (60 tabs / 30 days)	4	NDS QL PA
OXYCONTIN T12A 10mg, 15mg, 20mg, 30mg QL (60 tabs / 30 days)	3	QL PA

Drug Name	Drug Tier	Requirements/ Limits
OXYCONTIN T12A 40mg, 60mg, 80mg QL (60 tabs / 30 days)	4	NDS QL PA
oxymorphone hcl TB12 5mg, 7.5mg, 10mg, 15mg, 20mg QL (60 tabs / 30 days)	1	QL PA
oxymorphone hcl TB12 30mg, 40mg QL (60 tabs / 30 days)	4	NDS QL PA
TAPENTADOL HYDROCHLORIDE TB12 50mg QL (60 tabs / 30 days)	3	QL PA
TAPENTADOL HYDROCHLORIDE TB12 100mg, 150mg, 200mg, 250mg QL (60 tabs / 30 days)	4	NDS QL PA
tramadol hcl CP24 100mg, 200mg, 300mg QL (30 caps / 30 days)	1	QL PA
tramadol hcl TB24 100mg, 200mg, 300mg QL (30 tabs / 30 days)	1	QL PA
XTAMPZA ER C12A 9mg, 13.5mg, 18mg, 27mg QL (60 caps / 30 days)	3	QL PA
XTAMPZA ER C12A 36mg QL (60 caps / 30 days)	4	NDS QL PA
OPIOID ANALGESICS, SHORT-ACTING		
acetaminophen w/ codeine soln 120-12 mg/5ml QL (2700 mL / 30 days)	1	QL
acetaminophen w/ codeine tab 300-15 mg QL (400 tabs / 30 days)	1	QL
acetaminophen w/ codeine tab 300-30 mg QL (360 tabs / 30 days)	1	QL
acetaminophen w/ codeine tab 300-60 mg QL (180 tabs / 30 days)	1	QL
acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg QL (300 caps / 30 days)	1	QL
butorphanol tartrate SOLN 1mg/ml, 2mg/ml	3	
butorphanol tartrate SOLN 10mg/ml QL (10 mL / 30 days)	1	QL
CODEINE SULFATE TABS 15mg, 60mg QL (180 tabs / 30 days)	3	QL
codeine sulfate TABS 30mg QL (180 tabs / 30 days)	1	QL
DILAUDID LIQD 1mg/ml QL (600 mL / 30 days)	3	QL
DILAUDID SOLN .2mg/ml, 1mg/ml, 2mg/ml	3	B/D
DILAUDID TABS 2mg, 4mg QL (180 tabs / 30 days)	3	QL
DILAUDID TABS 8mg QL (180 tabs / 30 days)	4	NDS QL
endocet tab 2.5-325mg QL (360 tabs / 30 days)	1	QL
endocet tab 5-325mg (generic of PERCOCET) QL (360 tabs / 30 days)	1	QL
endocet tab 7.5-325mg (generic of PERCOCET) QL (240 tabs / 30 days)	1	QL
endocet tab 10-325mg (generic of PERCOCET) QL (180 tabs / 30 days)	1	QL
hydrocodone-acetaminophen soln 7.5-325 mg/15ml QL (2700 mL / 30 days)	1	QL
hydrocodone-acetaminophen soln 10-300 mg/15ml QL (2700 mL / 30 days)	1	QL
hydrocodone-acetaminophen tab 2.5-325 mg QL (240 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 5-300 mg QL (240 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 5-325 mg QL (240 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 7.5-300 mg QL (180 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 7.5-325 mg QL (180 tabs / 30 days)	1	QL

Drug Name	Tier	Requirements/ Limits
hydrocodone-acetaminophen tab 10-300 mg	1	QL
QL (180 tabs / 30 days)		
hydrocodone-acetaminophen tab 10-325 mg	1	QL
QL (180 tabs / 30 days)		
hydrocodone-ibuprofen tab 5-200 mg	1	QL
QL (150 tabs / 30 days)		
hydrocodone-ibuprofen tab 7.5-200 mg	1	QL
QL (150 tabs / 30 days)		
hydrocodone-ibuprofen tab 10-200 mg	1	QL
QL (150 tabs / 30 days)		
hydromorphone hcl (generic of DILAUDID) LIQD 1mg/ml	1	QL
QL (600 mL / 30 days)		
HYDROMORPHONE HCL SOLN 4mg/ml	3	B/D
hydromorphone hcl (generic of HYDROMORPHONE HYDROCHLORI) SOLN 10mg/ml, 50mg/5ml	3	B/D
hydromorphone hcl (generic of DILAUDID) SOLN .2mg/ml, 1mg/ml, 2mg/ml	3	B/D
hydromorphone hcl (generic of DILAUDID) TABS 2mg, 4mg, 8mg	1	QL
QL (180 tabs / 30 days)		
HYDROMORPHONE HYDROCHLORI SOLN .25mg/0.5ml, 1mg/ml, 2mg/ml, 4mg/ml	3	B/D
MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 8mg/ml, 10mg/ml, 50mg/ml	3	B/D
morphine sulfate SOLN 2mg/ml, 4mg/ml, 8mg/ml, 10mg/ml	3	B/D
morphine sulfate SOLN 10mg/5ml, 20mg/5ml	1	QL
QL (900 mL / 30 days)		
morphine sulfate (generic of MORPHINE SULFATE) SOLN 100mg/5ml	1	QL
QL (180 mL / 30 days)		
morphine sulfate TABS 15mg, 30mg	1	QL
QL (180 tabs / 30 days)		
MORPHINE SULFATE/SODIUM C SOLN 1mg/ml	3	B/D
nalbuphine hcl SOLN 10mg/ml, 20mg/ml	3	
NALOCET TAB 2.5-300	4	NDS QL PA
QL (360 tabs / 30 days)		
NUCYNTA TABS 50mg	3	QL
QL (180 tabs / 30 days)		
NUCYNTA TABS 75mg, 100mg	4	NDS QL
QL (180 tabs / 30 days)		
OXY-ACETAMIN TAB 7.5-300	4	NDS QL PA
QL (240 tabs / 30 days)		
OXYCOD-APAP TAB 2.5-300	4	NDS QL PA
QL (360 tabs / 30 days)		
OXYCOD/ACETA SOL 10/300MG	4	NDS QL PA
QL (900 mL / 30 days)		
OXYCOD/APAP TAB 5-300MG	4	NDS QL PA
QL (360 tabs / 30 days)		
OXYCOD/APAP TAB 10-300MG	4	NDS QL PA
QL (180 tabs / 30 days)		
oxycodone hcl CAPS 5mg	1	QL
QL (180 caps / 30 days)		
oxycodone hcl CONC 100mg/5ml	1	QL
QL (180 mL / 30 days)		
oxycodone hcl SOLN 5mg/5ml	1	QL
QL (900 mL / 30 days)		
oxycodone hcl TABS 5mg, 10mg, 20mg	1	QL
QL (180 tabs / 30 days)		
oxycodone hcl (generic of ROXICODONE) TABS 15mg, 30mg	1	QL
QL (180 tabs / 30 days)		
OXYCODONE HYDROCHLORIDE TABA 5mg, 10mg, 15mg, 30mg	4	NDS QL
QL (180 tabs / 30 days)		

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Tier	Requirements/ Limits
oxycodone w/ acetaminophen soln 5-325 mg/5ml QL (1800 mL / 30 days)	1	QL
oxycodone w/ acetaminophen tab 2.5-325 mg QL (360 tabs / 30 days)	1	QL
oxycodone w/ acetaminophen tab 5-325 mg (generic of PERCOCET) QL (360 tabs / 30 days)	1	QL
oxycodone w/ acetaminophen tab 7.5-325 mg (generic of PERCOCET) QL (240 tabs / 30 days)	1	QL
oxycodone w/ acetaminophen tab 10-325 mg (generic of PERCOCET) QL (180 tabs / 30 days)	1	QL
oxymorphone hcl TABS 5mg, 10mg QL (180 tabs / 30 days)	1	QL
PERCOCET TAB 5-325MG QL (360 tabs / 30 days)	4	NDS QL PA
PERCOCET TAB 7.5-325 QL (240 tabs / 30 days)	4	NDS QL PA
PERCOCET TAB 10-325MG QL (180 tabs / 30 days)	4	NDS QL PA
PROLATE SOL 10/300MG QL (900 mL / 30 days)	4	NDS QL PA
PROLATE TAB 5-300MG QL (360 tabs / 30 days)	4	NDS QL PA
PROLATE TAB 7.5-300 QL (240 tabs / 30 days)	4	NDS QL PA
PROLATE TAB 10-300MG QL (180 tabs / 30 days)	4	NDS QL PA
ROXICODONE TABS 15mg QL (180 tabs / 30 days)	3	QL
ROXICODONE TABS 30mg QL (180 tabs / 30 days)	4	NDS QL
ROXYBOND TABA 5mg, 10mg, 15mg, 30mg QL (180 tabs / 30 days)	4	NDS QL
tapentadol hcl (generic of NUCYNTA) TABS 50mg, 75mg QL (180 tabs / 30 days)	1	QL
tapentadol hcl (generic of NUCYNTA) TABS 100mg QL (180 tabs / 30 days)	4	NDS QL
TAPENTADOL HYDROCHLORIDE SOLN 20mg/ml QL (900 mL / 30 days)	4	NDS QL
tramadol hcl SOLN 5mg/ml QL (2400 mL / 30 days)	1	QL PA
tramadol hcl TABS 25mg QL (120 tabs / 30 days)	1	QL
tramadol hcl TABS 50mg QL (240 tabs / 30 days)	1	QL
tramadol hcl TABS 75mg QL (150 tabs / 30 days)	1	QL PA
tramadol hcl TABS 100mg QL (120 tabs / 30 days)	1	QL PA
TRAMADOL HYDROCHLORIDE SOLN 5mg/ml QL (2400 mL / 30 days)	3	QL PA
tramadol-acetaminophen tab 37.5-325 mg QL (240 tabs / 30 days)	1	QL
trezix QL (300 caps / 30 days)	1	QL
ANTI-INFECTIVES		
ANTI-INFECTIVES - MISCELLANEOUS		
albendazole TABS 200mg QL (672 tabs / year)	1	QL PA
amikacin sulfate SOLN 1gm/4ml, 500mg/2ml	1	
ARIKAYCE SUSP 590mg/8.4ml	4	NDS NM PA
atovaquone (generic of MEPRON) SUSP 750mg/5ml QL (300 mL / 30 days)	1	QL PA
AZACTAM SOLR 1gm, 2gm	3	
aztreonam SOLR 1gm, 2gm	1	
BACTRIM DS TAB 800-160	3	
BACTRIM TAB 400-80MG	3	
BETHKIS NEBU 300mg/4ml	4	NDS NM PA
BLUJEPA TABS 750mg	2	
CAYSTON SOLR 75mg	4	NDS NM PA
CLEOCIN CAPS 75mg, 150mg, 300mg	3	

Drug Name	Drug Tier	Requirements/ Limits
CLEOCIN PEDIATRIC GRANULE SOLR 75mg/5ml	3	
CLEOCIN PHOSPHATE SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml	3	
clindamycin hcl (generic of CLEOCIN) CAPS 75mg, 150mg, 300mg	1	
clindamycin palmitate hydrochloride (generic of CLEOCIN PEDIATRIC GRANULE) SOLR 75mg/5ml	1	
clindamycin phosphate (generic of CLEOCIN PHOSPHATE) SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml	1	
clindamycin phosphate in d5w iv soln 300 mg/50ml	1	
clindamycin phosphate in d5w iv soln 600 mg/50ml	1	
clindamycin phosphate in d5w iv soln 900 mg/50ml	1	
CLINDMYC/NAC INJ 300/50ML	3	
CLINDMYC/NAC INJ 600/50ML	3	
CLINDMYC/NAC INJ 900/50ML	3	
colistimethate sodium (generic of COLY-MYCIN M) SOLR 150mg	1	
COLY-MYCIN M SOLR 150mg	3	
CONTEPO SOLR 6gm	4	NDS
dalbavancin hcl (generic of DALVANCE) SOLR 500mg	4	NDS
DALVANCE SOLR 500mg	4	NDS
dapsone TABS 25mg, 100mg	1	
DAPTOMY/NACL INJ 350/50ML	3	
DAPTOMY/NACL INJ 500/50ML	3	
daptomycin (generic of DAPTOMYCIN) SOLR 350mg	4	NDS
DAPTOMYCIN SOLR 350mg, 500mg	4	NDS
daptomycin SOLR 500mg	4	NDS
DARAPRIM TABS 25mg QL (90 tabs / 30 days)	4	NDS QL PA
EMBLAVEO INJ 2GM	4	NDS
EMVERM CHEW 100mg QL (12 tabs / year)	4	NDS QL
ertapenem sodium SOLR 1gm	1	
FIRVANQ SOLR 25mg/ml, 50mg/ml QL (1800 mL / 180 days)	3	QL
fosfomycin tromethamine PACK 3gm	1	
gentamicin in saline inj 0.8 mg/ml	1	
gentamicin in saline inj 1 mg/ml	1	
gentamicin in saline inj 1.2 mg/ml	1	
gentamicin in saline inj 1.6 mg/ml	1	
gentamicin in saline inj 2 mg/ml	1	
gentamicin sulfate SOLN 10mg/ml, 40mg/ml	1	
HUMATIN CAPS 250mg	4	NDS
imipenem-cilastatin intravenous for soln 250 mg	1	
imipenem-cilastatin intravenous for soln 500 mg (generic of PRIMAXIN IV)	1	
ivermectin (generic of STROMECTOL) TABS 3mg QL (20 tabs / 90 days)	1	QL PA
ivermectin TABS 6mg QL (10 tabs / 90 days)	1	QL PA
KIMYRSA SOLR 1200mg	4	NDS
KITABIS PAK NEBU 300mg/5ml	4	NDS NM PA
LIKMEZ SUSP 500mg/5ml	3	
linezolid (generic of ZYVOX) SOLN 600mg/300ml	1	
linezolid SUSR 100mg/5ml QL (1800 mL / 30 days)	4	NDS QL
linezolid TABS 600mg QL (60 tabs / 30 days)	1	QL
LINEZOLID INJ 2MG/ML	3	

Drug Name	Drug Tier	Requirements/ Limits
MACROBID CAPS 100mg	3	
MEPRON SUSP 750mg/5ml	4	NDS QL PA
QL (300 mL / 30 days)		
MEROP/NACL INJ 1GM/50ML	3	
MEROP/NACL INJ 500/50ML	3	
meropenem SOLR 1gm, 500mg	1	
meropenem (generic of MEROPENEM) SOLR 2gm	1	
methenamine hippurate TABS 1gm	1	
metronidazole CAPS 375mg; TABS 125mg, 250mg, 500mg	1	
METRONIDAZOLE SOLN 500mg/100ml	3	
metronidazole (generic of METRONIDAZOLE) SOLN 500mg/100ml	1	
NEBUPENT SOLR 300mg	3	B/D
neomycin sulfate TABS 500mg	1	
nitazoxanide TABS 500mg	4	NDS QL
QL (6 tabs / 30 days)		
nitrofurantoin SUSP 25mg/5ml	4	NDS PA
NITROFURANTOIN SUSP 50mg/5ml	4	NDS PA
nitrofurantoin macrocrystal CAPS 25mg, 50mg, 100mg	2	
nitrofurantoin monohyd macro (generic of MACROBID) CAPS 100mg	2	
ORBACTIV SOLR 400mg	4	NDS
ORLYNVAH TAB 500-500	4	NDS NM
PENTAM 300 SOLR 300mg	3	
pentamidine isethionate inh (generic of NEBUPENT) SOLR 300mg	1	B/D
pentamidine isethionate inj (generic of PENTAM 300) SOLR 300mg	1	
polymyxin b sulfate SOLR 500000unit	1	
praziquantel TABS 600mg	1	
PRIMAXIN IV INJ 500MG	3	

Drug Name	Drug Tier	Requirements/ Limits
pyrimethamine (generic of DARAPRIM) TABS 25mg	4	NDS QL PA
QL (90 tabs / 30 days)		
RECARBRIO INJ 1.25GM	4	NDS
SIVEXTRO SOLR 200mg; TABS 200mg	4	NDS
SOLOSEC PACK 2gm	3	
streptomycin sulfate SOLR 1gm	4	NDS
STROMECTOL TABS 3mg	3	QL PA
QL (20 tabs / 90 days)		
sulfadiazine TABS 500mg	4	NDS
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml	1	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim tab 400-80 mg (generic of BACTRIM)	1	
sulfamethoxazole-trimethoprim tab 800-160 mg (generic of BACTRIM DS)	1	
tinidazole TABS 250mg, 500mg	1	
TOBI NEBU 300mg/5ml	4	NDS NM PA
TOBI PODHALER CAPS 28mg	4	NDS NM PA
tobramycin (generic of BETHKIS) NEBU 300mg/4ml	4	NDS NM PA
tobramycin (generic of KITABIS PAK) NEBU 300mg/5ml	4	NDS NM PA
tobramycin sulfate SOLN 1.2gm/30ml, 10mg/ml, 80mg/2ml	1	
tobramycin sulfate SOLR 1.2gm	4	NDS PA
trimethoprim TABS 100mg	1	
TYZAVAN SOLN 500mg/100ml, 750mg/150ml, 1000mg/200ml, 1250mg/250ml, 1500mg/300ml, 1750mg/350ml, 2000mg/400ml	3	
VABOMERE INJ 2GM(1-1)	4	NDS

Drug Name	Drug Tier	Requirements/ Limits
VANCOCIN CAPS 125mg QL (80 caps / 180 days)	4	NDS QL
VANCOCIN CAPS 250mg QL (160 caps / 180 days)	4	NDS QL
VANCOMYC/D5W INJ 1.5/300	3	
VANCOMYC/D5W INJ 1.25/250	3	
vancomycin hcl (generic of VANCOCIN) CAPS 125mg QL (80 caps / 180 days)	1	QL
vancomycin hcl (generic of VANCOCIN) CAPS 250mg QL (160 caps / 180 days)	1	QL
vancomycin hcl SOLN 750mg/150ml, 1000mg/200ml, 1250mg/250ml, 1500mg/300ml, 1750mg/350ml, 2000mg/400ml; SOLR 1gm, 1.5gm, 5gm, 10gm, 500mg	1	
vancomycin hcl (generic of VANCOMYCIN HYDROCHLORIDE) SOLR 1.25gm, 750mg	1	
vancomycin hcl (generic of FIRVANQ) SOLR 25mg/ml QL (1800 mL / 180 days)	1	QL
vancomycin hcl SOLR 250mg/5ml QL (1800 mL / 180 days)	1	QL
VANCOMYCIN HYDROCHLORIDE SOLN 500mg/100ml; SOLR 1gm, 1.25gm, 1.5gm, 1.75gm, 2gm, 5gm, 10gm, 500mg, 750mg	3	
VANCOMYCIN INJ 1 GM	3	
VANCOMYCIN INJ 500MG	3	
VANCOMYCIN INJ 750MG	3	
VIBATIV SOLR 750mg	4	NDS
XACDURO INJ 1-1GM	4	NDS
XIFAXAN TABS 200mg QL (9 tabs / 30 days)	3	QL
ZEMDRI SOLN 500mg/10ml	4	NDS
ZYVOX SOLN 600mg/300ml	4	NDS
ZYVOX SUSR 100mg/5ml QL (1800 mL / 30 days)	4	NDS QL
ZYVOX TABS 600mg QL (60 tabs / 30 days)	4	NDS QL
ANTIFUNGALS		
AMBISOME SUSR 50mg	4	NDS B/D
amphotericin b SOLR 50mg	1	B/D
amphotericin b liposome (generic of AMBISOME) SUSR 50mg	4	NDS B/D
ANCOBON CAPS 250mg, 500mg	4	NDS PA
CANCIDAS SOLR 50mg, 70mg	4	NDS
CASPOFUNGIN ACETATE SOLR 50mg, 70mg	4	NDS
caspofungin acetate (generic of CASPOFUNGIN ACETATE) SOLR 50mg, 70mg	1	
CRESEMBA CAPS 74.5mg, 186mg; SOLR 372mg	4	NDS PA
DIFLUCAN SUSR 40mg/ml	3	
ERAXIS SOLR 50mg	3	
ERAXIS SOLR 100mg	4	NDS
fluconazole SUSR 10mg/ml; TABS 50mg, 100mg, 150mg, 200mg	1	
fluconazole (generic of DIFLUCAN) SUSR 40mg/ml	1	
fluconazole in nacl 0.9% inj 200 mg/100ml	1	
fluconazole in nacl 0.9% inj 400 mg/200ml	1	
flucytosine (generic of ANCOBON) CAPS 250mg, 500mg	4	NDS PA
griseofulvin microsize SUSP 125mg/5ml; TABS 500mg	1	
griseofulvin ultramicrosize TABS 125mg, 250mg	1	
griseofulvin ultramicrosize TABS 165mg	4	NDS
itraconazole (generic of SPORANOX) CAPS 100mg QL (120 caps / 30 days)	1	QL
itraconazole SOLN 10mg/ml	4	NDS

Drug Name	Drug Tier	Requirements/ Limits
ketoconazole TABS 200mg	1	PA
micafungin sodium SOLR 50mg, 100mg	1	
MICAFUNGIN/NACL INJ 50MG/50ML	4	NDS
MICAFUNGIN/NACL INJ 100MG/100ML	4	NDS
MICAFUNGIN/NACL INJ 150MG/150ML	4	NDS
NOXAFIL PACK 300mg QL (32 packets / 30 days)	4	NDS QL PA
NOXAFIL SOLN 300mg/16.7ml	4	NDS
NOXAFIL SUSP 40mg/ml QL (630 mL / 30 days)	4	NDS QL PA
nystatin TABS 500000unit	1	
posaconazole SOLN 300mg/16.7ml	4	NDS
posaconazole SUSP 40mg/ml QL (630 mL / 30 days)	4	NDS QL PA
posaconazole TBEC 100mg QL (93 tabs / 30 days)	4	NDS QL PA
REZZAYO SOLR 200mg	4	NDS
terbinafine hcl TABS 250mg QL (30 tabs / 30 days) PA applies after a 90 day supply in a calendar year	1	QL PA
TOLSURA CAPS 65mg QL (120 caps / 30 days)	4	NDS QL PA
VFEND SUSR 40mg/ml QL (600 mL / 28 days)	4	NDS QL PA
VFEND IV SOLR 200mg	3	PA
VIVJOA CPPK 150mg QL (18 caps / 84 days)	4	NDS QL NM PA
VORICONAZOLE SOLN 200mg/20ml	4	NDS PA
VORICONAZOLE SOLR 200mg	3	PA
voriconazole (generic of VFEND IV) SOLR 200mg	1	PA
voriconazole (generic of VFEND) SUSR 40mg/ml QL (600 mL / 28 days)	4	NDS QL PA
voriconazole TABS 50mg QL (480 tabs / 30 days)	1	QL
voriconazole TABS 200mg QL (120 tabs / 30 days)	1	QL
ANTIMALARIALS		
atovaquone-proguanil hcl tab 62.5-25 mg (generic of MALARONE)	1	
atovaquone-proguanil hcl tab 250-100 mg (generic of MALARONE)	1	
chloroquine phosphate TABS 250mg, 500mg	1	
COARTEM TAB 20-120MG	3	
KRINTAFEL TABS 150mg	3	
MALARONE TAB 62.5-25	3	
MALARONE TAB 250-100	3	
mefloquine hcl TABS 250mg	1	
PRIMAQUINE PHOSPHATE TABS 26.3mg	2	
primaquine phosphate (generic of PRIMAQUINE PHOSPHATE) TABS 26.3mg	1	
quinine sulfate CAPS 324mg	1	PA
ANTIRETROVIRAL AGENTS		
abacavir sulfate (generic of ZIAGEN) SOLN 20mg/ml	1	NM
abacavir sulfate TABS 300mg	1	NM
APTIVUS CAPS 250mg	4	NDS NM
atazanavir sulfate CAPS 150mg	1	NM
atazanavir sulfate (generic of REYATAZ) CAPS 200mg, 300mg	1	NM
darunavir (generic of PREZISTA) TABS 600mg QL (60 tabs / 30 days)	1	QL NM
darunavir (generic of PREZISTA) TABS 800mg QL (30 tabs / 30 days)	1	QL NM
EDURANT TABS 25mg	4	NDS NM
EDURANT PED TBSO 2.5mg	4	NDS NM
efavirenz TABS 600mg	1	NM
emtricitabine (generic of EMTRIVA) CAPS 200mg	1	NM
EMTRIVA CAPS 200mg; SOLN 10mg/ml	3	NM
EPIVIR SOLN 10mg/ml; TABS 150mg, 300mg	3	NM

Drug Name	Tier	Requirements/ Limits
etravirine (generic of INTELENCE) TABS 100mg, 200mg	4	NDS NM
fosamprenavir calcium TABS 700mg	4	NDS NM
INTELENCE TABS 25mg	3	NM
INTELENCE TABS 100mg, 200mg	4	NDS NM
ISENTRESS CHEW 25mg	3	NM
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	4	NDS NM
ISENTRESS HD TABS 600mg	4	NDS NM
lamivudine (generic of EPIVIR) SOLN 10mg/ml; TABS 150mg, 300mg	1	NM
maraviroc (generic of SELZENTRY) TABS 150mg, 300mg	4	NDS NM
nevirapine SUSP 50mg/5ml; TABS 200mg; TB24 400mg	1	NM
NORVIR PACK 100mg; TABS 100mg	3	NM
PIFELTRO TABS 100mg	4	NDS NM
PREZISTA SUSP 100mg/ml QL (400 mL / 30 days)	4	NDS QL NM
PREZISTA TABS 75mg QL (480 tabs / 30 days)	3	QL NM
PREZISTA TABS 150mg QL (240 tabs / 30 days)	4	NDS QL NM
PREZISTA TABS 600mg QL (60 tabs / 30 days)	4	NDS QL NM
PREZISTA TABS 800mg QL (30 tabs / 30 days)	4	NDS QL NM
RETROVIR CAPS 100mg; SYRP 50mg/5ml	3	NM
REYATAZ CAPS 200mg, 300mg; PACK 50mg	4	NDS NM
rilpivirine hcl (generic of EDURANT) TABS 25mg	4	NDS NM
ritonavir (generic of NORVIR) TABS 100mg	1	NM
RUKOBIA TB12 600mg	4	NDS NM
SELZENTRY SOLN 20mg/ml; TABS 150mg, 300mg	4	NDS NM
SUNLENCA TABS 300mg; TBPK 300mg	4	NDS NM
tenofovir disoproxil fumarate (generic of VIREAD) TABS 300mg	1	NM
TIVICAY TABS 50mg	4	NDS NM
TIVICAY PD TBSO 5mg	4	NDS NM
TROGARZO SOLN 200mg/1.33ml	4	NDS NM
TYBOST TABS 150mg	2	NM
VIRACEPT TABS 250mg, 625mg	4	NDS NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg, 300mg	4	NDS NM
ZIAGEN SOLN 20mg/ml	3	NM
zidovudine (generic of RETROVIR) CAPS 100mg; SYRP 50mg/5ml	1	NM
zidovudine TABS 300mg	1	NM
ANTIRETROVIRAL COMBINATION AGENTS		
abacavir sulfate-lamivudine tab 600-300 mg	1	NM
BIKTARVY TAB 30-120-15 MG	4	NDS NM
BIKTARVY TAB 50-200-25 MG	4	NDS NM
CIMDUO TAB 300-300	4	NDS NM
COMPLERA TAB	4	NDS NM
DELSTRIGO TAB	4	NDS NM
DESCOVY TAB 120-15MG	4	NDS NM
DESCOVY TAB 200/25MG	4	NDS NM
DOVATO TAB 50-300MG	4	NDS NM
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	1	NM
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	4	NDS NM
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (generic of SYMFI)	4	NDS NM
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg (generic of COMPLERA)	4	NDS NM
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg (generic of TRUVADA)	1	NM

Drug Name	Tier	Requirements/ Limits
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg (generic of TRUVADA)	4	NDS NM
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg (generic of TRUVADA)	1	NM
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (generic of TRUVADA)	1	NM
EVOTAZ TAB 300-150	4	NDS NM
GENVOYA TAB	4	NDS NM
IDVYNSO TAB 100-0.25	4	NDS NM
JULUCA TAB 50-25MG	4	NDS NM
KALETRA SOL	3	NM
KALETRA TAB 100-25MG	3	NM
KALETRA TAB 200-50MG	4	NDS NM
lamivudine-zidovudine tab 150-300 mg	1	NM
lopinavir-ritonavir tab 100-25 mg (generic of KALETRA)	1	NM
lopinavir-ritonavir tab 200-50 mg (generic of KALETRA)	1	NM
ODEFSEY TAB	4	NDS NM
PREZCOBIX TAB 675/150	4	NDS NM
PREZCOBIX TAB 800-150	4	NDS NM
STRIBILD TAB	4	NDS NM
SYMFI TAB	4	NDS NM
SYMTUZA TAB	4	NDS NM
TRIUMEQ PD TAB	3	NM
TRIUMEQ TAB	4	NDS NM
TRUVADA TAB 100-150	4	NDS NM
TRUVADA TAB 133-200	4	NDS NM
TRUVADA TAB 167-250	4	NDS NM
TRUVADA TAB 200-300	4	NDS NM
ANTITUBERCULAR AGENTS		
cycloserine CAPS 250mg	4	NDS
ethambutol hcl TABS 100mg, 400mg	1	
isoniazid SYRP 50mg/5ml; TABS 100mg, 300mg	1	
PRETOMANID TABS 200mg	3	
PRIFTIN TABS 150mg	3	
pyrazinamide TABS 500mg	1	
rifabutin CAPS 150mg	1	
rifampin CAPS 150mg, 300mg; SOLR 600mg	1	
rifapentine (generic of PRIFTIN) TABS 150mg	1	
SIRTURO TABS 20mg, 100mg	4	NDS NM PA
ANTIVIRALS		
acyclovir CAPS 200mg; SUSP 200mg/5ml; TABS 400mg, 800mg	1	
acyclovir sodium SOLN 50mg/ml	1	B/D
adefovir dipivoxil TABS 10mg	1	NM
BARACLUDE SOLN .05mg/ml	4	NDS NM ST
BARACLUDE TABS .5mg, 1mg	4	NDS NM
cidofovir SOLN 75mg/ml	1	
entecavir (generic of BARACLUDE) TABS .5mg, 1mg	1	NM
EPCLUSA PAK 150-37.5	4	NDS NM PA
EPCLUSA PAK 200-50MG	4	NDS NM PA
EPCLUSA TAB 200-50MG	4	NDS NM PA
EPCLUSA TAB 400-100	4	NDS NM PA
famciclovir TABS 125mg, 250mg, 500mg	1	
foscarnet sodium (generic of FOSCAVIR) SOLN 6000mg/250ml	4	NDS B/D
GANCICLOVIR SOLN 500mg/10ml	3	B/D
ganciclovir sodium SOLR 500mg	1	B/D
HARVONI PAK 33.75-150MG	4	NDS NM PA
HARVONI PAK 45-200MG	4	NDS NM PA
HARVONI TAB 45-200MG	4	NDS NM PA
HARVONI TAB 90-400MG	4	NDS NM PA
HEPCLUDEX SOLR 8.5mg QL (30 vials / 30 days)	4	NDS QL NM PA
lamivudine (hbv) TABS 100mg	1	NM
LIVTENCITY TABS 200mg QL (336 tabs / 28 days)	4	NDS QL NM PA
MAVYRET PAK 50-20MG	4	NDS NM PA
MAVYRET TAB 100-40MG	4	NDS NM PA

Drug Name	Drug Tier	Requirements/ Limits
oseltamivir phosphate CAPS 30mg QL (168 caps / year)	1	QL
oseltamivir phosphate CAPS 45mg QL (84 caps / year)	1	QL
oseltamivir phosphate (generic of TAMIFLU) CAPS 75mg QL (84 caps / year)	1	QL
oseltamivir phosphate (generic of TAMIFLU) SUSR 6mg/ml QL (1080 mL / year)	1	QL
PAXLOVID PAK QL (22 tabs / 90 days)	1	QL
PAXLOVID TAB 150-100 QL (40 tabs / 90 days)	1	QL
PAXLOVID TAB 300-100 QL (60 tabs / 90 days)	1	QL
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	4	NDS NM PA
PREVYMIS PACK 20mg, 120mg QL (120 packets / 30 days)	4	NDS QL PA
PREVYMIS SOLN 240mg/12ml, 480mg/24ml	4	NDS
PREVYMIS TABS 240mg, 480mg QL (28 tabs / 28 days)	4	NDS QL PA
RAPIVAB SOLN 200mg/20ml	4	NDS
RELENZA DISKHALER AEPB 5mg/blister QL (6 inhalers / year)	2	QL
ribavirin (hepatitis c) CAPS 200mg; TABS 200mg	1	NM
rimantadine hydrochloride TABS 100mg	1	
TAMIFLU CAPS 30mg QL (168 caps / year)	3	QL
TAMIFLU CAPS 75mg QL (84 caps / year)	3	QL
TAMIFLU SUSR 6mg/ml QL (1080 mL / year)	3	QL
valacyclovir hcl (generic of VALTREX) TABS 1gm, 500mg	1	
VALCYTE SOLR 50mg/ml; TABS 450mg	4	NDS
valganciclovir hcl (generic of VALCYTE) SOLR 50mg/ml	4	NDS
valganciclovir hcl TABS 450mg	1	
VALTREX TABS 1gm, 500mg	3	
VEMLIDY TABS 25mg	4	NDS NM PA
VOSEVI TAB	4	NDS NM PA
XOCOVA TABS 125mg QL (7 tabs / 30 days)	4	NDS QL
XOFLUZA TBPK 40mg, 80mg QL (1 tab / 180 days)	3	QL
CEPHALOSPORINS		
AVYCAZ INJ 2-0.5GM	4	NDS
cefaclor CAPS 250mg, 500mg; SUSR 250mg/5ml	1	
CEFACLOR ER TB12 500mg	3	
cefadroxil CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml; TABS 1gm	1	
CEFAZOLIN SOLR 2gm, 3gm	3	
CEFAZOLIN INJ 1GM/50ML	3	
cefazolin sodium SOLR 1gm, 2gm, 3gm, 10gm, 500mg	1	
CEFAZOLIN SOLN 2GM/100ML-4%	3	
CEFAZOLIN/DEX SOL 1GM/50ML-4%	3	
CEFAZOLIN/DEX SOL 2GM/50ML-3%	3	
CEFAZOLIN/DEX SOL 3GM/50ML-2%	3	
CEFAZOLIN/DEX SOL 3GM/150ML-4%	3	
cefdinir CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	1	
CEFEPIME SOLN 1gm/50ml, 2gm/100ml	3	
cefepime hcl SOLR 1gm, 2gm	1	
CEFEPIME/DEX INJ 1GM	3	
CEFEPIME/DEX INJ 2GM	3	

Drug Name	Drug Tier	Requirements/ Limits
cefixime CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml; TABS 400mg	1	
cefotetan disodium SOLR 1gm	1	
cefotetan disodium (generic of CEFOTAN) SOLR 2gm	1	
CEFOXITIN INJ 1GM	3	
CEFOXITIN INJ 2GM	3	
cefoxitin sodium SOLR 1gm, 2gm, 10gm	1	
cefpodoxime proxetil SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	1	
cefprozil SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
ceftaroline fosamil (generic of TEFLARO) SOLR 400mg, 600mg	4	NDS
ceftazidime SOLR 1gm, 2gm, 6gm	1	
ceftriaxone sodium SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
cefuroxime axetil TABS 250mg, 500mg	1	
cefuroxime sodium SOLR 1.5gm, 750mg	1	
cephalexin CAPS 250mg, 500mg, 750mg; SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
FETROJA SOLR 1gm	4	NDS
tazicef SOLR 1gm, 2gm, 6gm	1	
TEFLARO SOLR 400mg, 600mg	4	NDS
ZERBAXA INJ 1.5GM	4	NDS
ZEVTERA SOLR 667mg	4	NDS
ERYTHROMYCINS/MACROLIDES		
azithromycin SOLR 500mg; SUSR 100mg/5ml; TABS 600mg	1	
azithromycin (generic of ZITHROMAX) SUSR 200mg/5ml; TABS 250mg, 500mg	1	
clarithromycin SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
clarithromycin (generic of BIAXIN XL) TB24 500mg	1	
DIFICID SUSR 40mg/ml; TABS 200mg	4	NDS
e.e.s. 400 TABS 400mg	1	
ERYTHROCIN LACTOBIONATE SOLR 500mg	3	
erythromycin base CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	1	
erythromycin ethylsuccinate (generic of E.E.S. GRANULES) SUSR 200mg/5ml	1	
erythromycin ethylsuccinate (generic of ERYPED 400) SUSR 400mg/5ml	4	NDS
erythromycin ethylsuccinate TABS 400mg	1	
erythromycin lactobionate (generic of ERYTHROCIN LACTOBIONATE) SOLR 500mg	1	
fidaxomicin (generic of DIFICID) TABS 200mg	4	NDS
ZITHROMAX SOLR 500mg; SUSR 200mg/5ml; TABS 250mg, 500mg	3	
ZITHROMAX TRI-PAK TABS 500mg	3	
ZITHROMAX Z-PAK TABS 250mg	3	
FLUOROQUINOLONES		
BAXDELA SOLR 300mg; TABS 450mg	4	NDS
CIPRO SUSR 5gm/100ml, 500mg/5ml; TABS 250mg, 500mg	3	
ciprofloxacin 200 mg/100ml in d5w	1	
ciprofloxacin 400 mg/200ml in d5w	1	

Drug Name	Tier	Requirements/ Limits
ciprofloxacin hcl (generic of CIPRO) TABS 250mg, 500mg	1	
ciprofloxacin hcl TABS 750mg	1	
levofloxacin SOLN 25mg/ml; TABS 250mg, 500mg, 750mg	1	
levofloxacin in d5w iv soln 250 mg/50ml	1	
levofloxacin in d5w iv soln 500 mg/100ml	1	
levofloxacin in d5w iv soln 750 mg/150ml	1	
moxifloxacin hcl TABS 400mg	1	
moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj	1	
MOXIFLOXACIN HYDROCHLORID SOLN 400mg/250ml	3	
PENICILLINS		
AMOX/K CLAV CHW 200/28.5	3	
AMOX/K CLAV CHW 400/57	3	
amoxicillin CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	1	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	1	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	1	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	1	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (generic of AUGMENTIN ES-600)	1	
amoxicillin & k clavulanate tab 250-125 mg	1	
amoxicillin & k clavulanate tab 500-125 mg	1	
amoxicillin & k clavulanate tab 875-125 mg	1	
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	1	
ampicillin CAPS 500mg	1	
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm (generic of UNASYN)	1	
ampicillin & sulbactam sodium for inj 3 (2-1) gm (generic of UNASYN)	1	
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm	1	
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm (generic of UNASYN BULK PACK)	1	
ampicillin sodium SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
AUGMENTIN SUS 125/5ML	3	
AUGMENTIN SUS ES-600	3	
BICILLIN C-R INJ 900/300	3	
BICILLIN C-R INJ 1200000	3	
BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml	3	
dicloxacillin sodium CAPS 250mg, 500mg	1	
NAFCILLIN INJ 2GM/100	4	NDS
nafcillin sodium SOLR 1gm, 2gm	1	
nafcillin sodium SOLR 10gm	4	NDS
OXACILLIN INJ 2GM	3	
oxacillin sodium SOLR 1gm, 2gm, 10gm	1	
PEN GK/DEXTR INJ 40000/ML	3	
PEN GK/DEXTR INJ 60000/ML	3	
penicillin g potassium SOLR 5000000unit, 20000000unit	1	
penicillin g sodium SOLR 5000000unit	1	
penicillin v potassium SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
pfizerpen SOLR 5000000unit, 20000000unit	1	

Drug Name	Drug Tier	Requirements/ Limits
PIP/TAZ/NACL INJ 2-0.25GM	3	
PIP/TAZ/NACL INJ 3-0.375G	3	
PIP/TAZ/NACL INJ 4-0.5GM	3	
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)	1	
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)	1	
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)	1	
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)	1	
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)	1	
UNASYN INJ 1.5GM	3	
UNASYN INJ 3GM	3	
UNASYN INJ 15GM	3	
ZOSYN SOL 2-0.25GM	3	
ZOSYN SOL 3-0.375G	3	
ZOSYN SOL 4-0.50GM	3	
TETRACYCLINES		
demeclocycline hcl TABS 150mg, 300mg	1	
DORYX MPC TBEC 60mg	4	NDS PA
doxy 100 SOLR 100mg	1	
doxycycline (monohydrate) CAPS 50mg, 75mg, 100mg, 150mg; SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg, 150mg	1	
doxycycline hyclate CAPS 50mg, 100mg; SOLR 100mg; TABS 20mg, 50mg, 75mg, 100mg, 150mg	1	
doxycycline hyclate TBEC 50mg, 75mg, 100mg, 150mg, 200mg	1	PA
minocycline hcl CAPS 50mg, 75mg, 100mg; TABS 50mg, 75mg, 100mg; TB24 45mg, 55mg, 65mg, 80mg, 90mg, 105mg, 115mg, 135mg	1	
NUZYRA SOLR 100mg	4	NDS NM
NUZYRA TABS 150mg QL (30 tabs / 14 days)	4	NDS QL NM
SEYSARA TABS 60mg, 100mg, 150mg	4	NDS PA
targadox TABS 50mg	1	
tetracycline hcl CAPS 250mg, 500mg	1	
TETRACYCLINE HYDROCHLORID TABS 250mg, 500mg	4	NDS PA
TIGECYCLINE SOLR 50mg	4	NDS
tigecycline (generic of TYGACIL) SOLR 50mg	1	
TYGACIL SOLR 50mg	4	NDS
XERAVA SOLR 50mg, 100mg	3	
ANTINEOPLASTIC AGENTS ***ALKYLATING AGENTS***		
bendamustine hcl (generic of TREANDA) SOLR 25mg, 100mg	4	NDS B/D NM
BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml	4	NDS B/D NM
BENDEKA SOLN 100mg/4ml	4	NDS B/D NM
carboplatin SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	1	B/D
cisplatin SOLN 50mg/50ml, 100mg/100ml	1	B/D
cisplatin (generic of CISPLATIN) SOLN 200mg/200ml	1	B/D
cyclophosphamide CAPS 25mg, 50mg; SOLR 1gm, 500mg	1	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	4	NDS B/D NM
cyclophosphamide (generic of CYCLOPHOSPHAMIDE) SOLN 1gm/5ml	4	NDS B/D
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml	4	NDS B/D
cyclophosphamide (generic of CYCLOPHOSPHAMIDE) SOLN 500mg/2.5ml		B/D

Drug Name	Drug Tier	Requirements/ Limits
cyclophosphamide SOLR 2gm	4	NDS B/D
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	3	B/D
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	4	NDS B/D
FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	4	NDS B/D NM
GLEOSTINE CAPS 10mg, 40mg	3	NM
GLEOSTINE CAPS 100mg	4	NDS NM
GRAFAPEX SOLR 1gm, 5gm	4	NDS B/D NM
IFEX SOLR 3gm	3	B/D
ifosfamide SOLN 1gm/20ml, 3gm/60ml	1	B/D
IFOSFAMIDE SOLR 3gm	3	B/D
KYXATA SOLN 80mg/8ml, 500mg/50ml	4	NDS B/D NM
LEUKERAN TABS 2mg	4	NDS PA
lomustine (generic of GLEOSTINE) CAPS 10mg, 40mg	1	NM
lomustine (generic of GLEOSTINE) CAPS 100mg	4	NDS NM
oxaliplatin SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml	1	B/D
oxaliplatin SOLR 50mg, 100mg	4	NDS B/D
TREANDA SOLR 25mg, 100mg	4	NDS B/D NM
VIVIMUSTA SOLN 100mg/4ml	4	NDS B/D NM
ZEPZELCA SOLR 4mg	4	NDS NM PA
ANTIMETABOLITES		
ALIMTA SOLR 100mg, 500mg	4	NDS B/D
AVGEMSI SOLN 1gm/26.3ml, 2gm/52.6ml	4	NDS B/D NM
AXTLE SOLR 100mg, 500mg	4	NDS B/D NM
azacitidine (generic of VIDAZA) SUSR 100mg	4	NDS B/D NM
cytarabine SOLN 20mg/ml, 100mg/ml	1	B/D
decitabine SOLR 50mg	4	NDS B/D NM
FAVLYXA SOLN 2.5gm/100ml, 250mg/10ml	4	NDS B/D NM

Drug Name	Drug Tier	Requirements/ Limits
fludarabine phosphate SOLN 50mg/2ml; SOLR 50mg	1	B/D
fluorouracil SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	1	B/D
FOLOTYN SOLN 20mg/ml, 40mg/2ml	4	NDS NM PA
gemcitabine hcl (generic of GEMCITABINE HYDROCHLORIDE) SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml	1	B/D
gemcitabine hcl SOLR 1gm, 2gm, 200mg	1	B/D
GEMCITABINE HYDROCHLORIDE SOLN 1gm/10ml, 1gm/26.3ml, 2gm/20ml, 2gm/52.6ml, 200mg/2ml, 200mg/5.26ml	3	B/D
INQOVI TAB 35-100MG QL (5 tabs / 28 days)	4	NDS QL NM PA
LONSURF TAB 15-6.14 QL (100 tabs / 28 days)	4	NDS QL NM PA
LONSURF TAB 20-8.19 QL (80 tabs / 28 days)	4	NDS QL NM PA
mercaptopurine (generic of PURIXAN) SUSP 2000mg/100ml	4	NDS NM
mercaptopurine TABS 50mg	1	
methotrexate sodium SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	1	B/D
ONUREG TABS 200mg, 300mg QL (14 tabs / 28 days)	4	NDS QL NM PA
PEMETREXED SOLN 1gm/40ml, 100mg/4ml, 500mg/20ml	4	NDS B/D
pemetrexed disodium SOLR 100mg, 500mg, 750mg, 1000mg	4	NDS B/D
PEMRYDI RTU SOLN 100mg/10ml, 500mg/50ml	4	NDS B/D
pralatrexate (generic of FOLOTYN) SOLN 20mg/ml, 40mg/2ml	4	NDS NM PA
PURIXAN SUSP 2000mg/100ml	4	NDS NM

Drug Name	Tier	Requirements/ Limits
TABLOID TABS 40mg	4	NDS PA
VIDAZA SUSR 100mg	4	NDS B/D NM
HORMONAL ANTINEOPLASTIC AGENTS		
abiraterone acetate (generic of ZYTIGA) TABS 250mg QL (120 tabs / 30 days)	4	NDS QL NM PA
abiraterone acetate (generic of ZYTIGA) TABS 500mg QL (60 tabs / 30 days)	4	NDS QL NM PA
abirtega (generic of ZYTIGA) TABS 250mg QL (120 tabs / 30 days)	1	QL NM PA
AKEEGA TAB 50/500MG QL (60 tabs / 30 days)	4	NDS QL NM PA
AKEEGA TAB 100/500 QL (60 tabs / 30 days)	4	NDS QL NM PA
anastrozole (generic of ARIMIDEX) TABS 1mg	1	
ARIMIDEX TABS 1mg	4	NDS
AROMASIN TABS 25mg	4	NDS
bicalutamide (generic of CASODEX) TABS 50mg	1	
CAMCEVI PRSY 42mg	3	NM PA
CASODEX TABS 50mg	4	NDS
CLIGAVYX SOSY 250mg/5ml	4	NDS B/D NM
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	2	NM PA
ERLEADA TABS 60mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ERLEADA TABS 240mg QL (30 tabs / 30 days)	4	NDS QL NM PA
EULEXIN CAPS 125mg	4	NDS
exemestane (generic of AROMASIN) TABS 25mg	1	
FARESTON TABS 60mg	4	NDS PA
FASLODEX SOSY 250mg/5ml	4	NDS B/D
FEMARA TABS 2.5mg	3	
FIRMAGON SOLR 80mg	3	NM PA
FIRMAGON SOLR 120mg/vial	4	NDS NM PA
fulvestrant (generic of FASLODEX) SOSY 250mg/5ml	4	NDS B/D
INLURIYO TABS 200mg QL (56 tabs / 28 days)	4	NDS QL NM PA
letrozole (generic of FEMARA) TABS 2.5mg	1	
leuprolide acetate KIT 1mg/0.2ml	1	NM PA
leuprolide acetate (3 month) INJ 22.5mg	1	NM PA
LIFYORLI CAP 125MG DS QL (18 caps / 28 days)	4	NDS QL NM PA
LIFYORLI CAP 150MG DS QL (27 caps / 28 days)	4	NDS QL NM PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg, 7.5mg	4	NDS NM PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg, 22.5mg	4	NDS NM PA
LUPRON DEPOT (4-MONTH) KIT 30mg	4	NDS NM PA
LUPRON DEPOT (6-MONTH) KIT 45mg	4	NDS NM PA
LUTRATE DEPOT INJ 22.5mg	3	NM PA
LYSODREN TABS 500mg	4	NDS NM
megestrol acetate TABS 20mg, 40mg	2	
nilutamide TABS 150mg	4	NDS
NUBEQA TABS 300mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ORGOVYX TABS 120mg	4	NDS NM PA
ORSERDU TABS 86mg QL (90 tabs / 30 days)	4	NDS QL NM PA
ORSERDU TABS 345mg QL (30 tabs / 30 days)	4	NDS QL NM PA
SOLTAMOX SOLN 10mg/5ml	4	NDS
tamoxifen citrate TABS 10mg, 20mg	1	
toremifene citrate (generic of FARESTON) TABS 60mg	1	PA
TRELSTAR MIXJECT SUSR 3.75mg, 11.25mg, 22.5mg	2	NM PA
VABRINTY KIT 7.5mg, 22.5mg, 30mg, 45mg	4	NDS NM PA
VEPPANU TABS 100mg QL (90 tabs / 30 days)	4	NDS QL NM PA
VEPPANU TABS 200mg QL (30 tabs / 30 days)	4	NDS QL NM PA
XTANDI CAPS 40mg QL (120 caps / 30 days)	4	NDS QL NM PA
XTANDI TABS 40mg QL (120 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
XTANDI TABS 80mg QL (60 tabs / 30 days)	4	NDS QL NM PA
YONSA TABS 125mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ZOLADEX IMPL 3.6mg, 10.8mg	3	NM PA
ZYTIGA TABS 250mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ZYTIGA TABS 500mg QL (60 tabs / 30 days)	4	NDS QL NM PA
IMMUNOMODULATORS		
lenalidomide (generic of REVLIMID) CAPS 2.5mg, 5mg, 10mg, 15mg QL (28 caps / 28 days)	4	NDS QL NM PA
lenalidomide (generic of REVLIMID) CAPS 20mg, 25mg QL (21 caps / 28 days)	4	NDS QL NM PA
pomalidomide (generic of POMALYST) CAPS 1mg, 2mg, 3mg, 4mg QL (21 caps / 28 days)	4	NDS QL NM PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg QL (21 caps / 28 days)	4	NDS QL NM PA
REVLIMID CAPS 2.5mg, 5mg, 10mg, 15mg QL (28 caps / 28 days)	4	NDS QL NM PA
REVLIMID CAPS 20mg, 25mg QL (21 caps / 28 days)	4	NDS QL NM PA
THALOMID CAPS 50mg QL (84 caps / 28 days)	4	NDS QL NM PA
THALOMID CAPS 100mg QL (112 caps / 28 days)	4	NDS QL NM PA
ZENBEXUS CAPS .75mg, 1mg QL (21 caps / 28 days)	4	NDS QL NM PA
MISCELLANEOUS		
ASPARLAS SOLN 3750unit/5ml	4	NDS NM PA
BESREMI SOSY 500mcg/ml QL (2 syringes / 28 days)	4	NDS QL NM PA
BESREMI PEN SOPN 500mcg/0.5ml QL (2 pens / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
bexarotene (generic of TARGRETIN) CAPS 75mg QL (300 caps / 30 days)	4	NDS QL NM PA
bleomycin sulfate SOLR 15unit, 30unit	1	B/D
CAMPTOSAR SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml	3	B/D
dacarbazine SOLR 100mg	1	B/D
dexrazoxane hcl SOLR 250mg, 500mg	4	NDS B/D
DOXIL SUSP 2mg/ml	4	NDS B/D
doxorubicin hcl (generic of DOXORUBICIN HYDROCHLORIDE) SOLN 2mg/ml	1	B/D
doxorubicin hcl liposomal (generic of DOXIL) SUSP 2mg/ml	4	NDS B/D
DOXORUBICIN HYDROCHLORIDE SOLN 2mg/ml	3	B/D
ELITEK SOLR 1.5mg, 7.5mg	4	NDS B/D
ELLENCE SOLN 50mg/25ml, 200mg/100ml	3	B/D
ETHYOL SOLR 500mg	4	NDS B/D
HYDREA CAPS 500mg	3	
hydroxyurea (generic of HYDREA) CAPS 500mg	1	
irinotecan hcl (generic of CAMPTOSAR) SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml	1	B/D
irinotecan hcl SOLN 500mg/25ml	1	B/D
IWILFIN TABS 192mg QL (240 tabs / 30 days)	4	NDS QL NM PA
KHAPZORY SOLR 175mg	4	NDS B/D NM
leucovorin calcium SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	1	B/D
leucovorin calcium TABS 5mg, 10mg, 15mg, 25mg	1	
levoleucovorin calcium SOLN 175mg/17.5ml, 250mg/25ml; SOLR 50mg	1	B/D NM
MATULANE CAPS 50mg	4	NDS NM

Drug Name	Tier	Requirements/ Limits
mesna (generic of MESNEX) TABS 400mg	4	NDS
MESNEX TABS 400mg	4	NDS
mitomycin SOLR 5mg	1	B/D
mitomycin SOLR 20mg, 40mg	4	NDS B/D
mitoxantrone hcl CONC 20mg/10ml, 25mg/12.5ml, 30mg/15ml	1	B/D NM
MODEYSO CAPS 125mg QL (20 caps / 28 days)	4	NDS QL NM PA
NIPENT SOLR 10mg	4	NDS B/D
ONCASPAR SOLN 750unit/ml	4	NDS NM PA
ONIVYDE SUSP 43mg/10ml	4	NDS B/D NM
RYLAZE SOLN 10mg/0.5ml	4	NDS NM PA
SYLVANT SOLR 100mg, 400mg	4	NDS NM PA
TARGRETIN CAPS 75mg QL (300 caps / 30 days)	4	NDS QL NM PA
TOPOTECAN HCL SOLN 4mg/4ml	3	B/D
topotecan hcl (generic of TOPOTECAN HCL) SOLN 4mg/4ml	1	B/D
topotecan hcl (generic of HYCAMTIN) SOLR 4mg	4	NDS B/D
tretinoin (chemotherapy) CAPS 10mg	4	NDS
valrubicin (generic of VALSTAR) SOLN 40mg/ml	4	NDS B/D NM
VALSTAR SOLN 40mg/ml	4	NDS B/D NM
VYKOURA SOLN 50mg/5ml	3	B/D NM
VYKOURA SOLN 350mg/35ml, 500mg/50ml	4	NDS B/D NM
WELIREG TABS 40mg QL (90 tabs / 30 days)	4	NDS QL NM PA
MITOTIC INHIBITORS		
ABRAXANE INJ 100MG	4	NDS B/D NM
AVOPEF SOLN 100mg/5ml, 500mg/25ml	4	NDS B/D NM
BEIZRAY CONC 20mg/ml	3	B/D NM
BEIZRAY INJ 80MG/4ML	4	NDS B/D NM
BEIZRAY INJ 160/8ML	4	NDS B/D NM
docetaxel CONC 20mg/ml	1	B/D
DOCETAXEL CONC 20mg/ml	3	B/D
docetaxel CONC 80mg/4ml	4	NDS B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	4	NDS B/D
docetaxel (generic of DOCETAXEL) CONC 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	4	NDS B/D
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	4	NDS B/D NM
eribulin mesylate (generic of HALAVEN) SOLN 1mg/2ml	4	NDS B/D NM
ETOPOPHOS SOLR 100mg	3	B/D
etoposide SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	1	B/D
HALAVEN SOLN 1mg/2ml	4	NDS B/D NM
IXEMPRA KIT SOLR 15mg, 45mg	4	NDS B/D NM
JEVTANA SOLN 60mg/1.5ml	4	NDS NM PA
paclitaxel CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	1	B/D
PACLITAXEL INJ 100MG	4	NDS B/D NM
paclitaxel inj 100mg (generic of ABRAXANE)	4	NDS B/D NM
vinblastine sulfate SOLN 1mg/ml	1	B/D
vincristine sulfate SOLN 1mg/ml	1	B/D
vinorelbine tartrate SOLN 10mg/ml, 50mg/5ml	1	B/D
MOLECULAR TARGET AGENTS		
AFINITOR TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
AFINITOR DISPERZ TBSO 2mg, 5mg QL (60 tabs / 30 days)	4	NDS QL NM PA
AFINITOR DISPERZ TBSO 3mg QL (90 tabs / 30 days)	4	NDS QL NM PA
ALECENSA CAPS 150mg QL (240 caps / 30 days)	4	NDS QL NM PA
ALUNBRIG TABS 30mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ALUNBRIG TABS 90mg, 180mg QL (30 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
ALUNBRIG PAK QL (30 tabs / 30 days)	4	NDS QL NM PA
ALYMSYS SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
AUGTYRO CAPS 40mg QL (240 caps / 30 days)	4	NDS QL NM PA
AUGTYRO CAPS 160mg QL (60 caps / 30 days)	4	NDS QL NM PA
AVASTIN SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
AVMAPKI PAK FAKZYNJA QL (1 pack / 28 days)	4	NDS QL NM PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg QL (30 tabs / 30 days)	4	NDS QL NM PA
BALVERSA TABS 3mg QL (84 tabs / 28 days)	4	NDS QL NM PA
BALVERSA TABS 4mg QL (56 tabs / 28 days)	4	NDS QL NM PA
BALVERSA TABS 5mg QL (28 tabs / 28 days)	4	NDS QL NM PA
BAVENCIO SOLN 200mg/10ml	4	NDS NM PA
BELEODAQ SOLR 500mg	4	NDS NM PA
BESPONSA SOLR .9mg	4	NDS NM PA
BLENREP SOLR 70mg	4	NDS NM PA
BORTEZOMIB SOLR 1mg, 2.5mg	3	NM PA
bortezomib (generic of VELCADE) SOLR 3.5mg	4	NDS NM PA
BORUZU SOLN 3.5mg/1.4ml	4	NDS NM PA
BOSULIF CAPS 50mg QL (30 caps / 30 days)	4	NDS QL NM PA
BOSULIF CAPS 100mg QL (300 caps / 30 days)	4	NDS QL NM PA
BOSULIF TABS 100mg QL (180 tabs / 30 days)	4	NDS QL NM PA
BOSULIF TABS 400mg, 500mg QL (30 tabs / 30 days)	4	NDS QL NM PA
bosutinib (generic of BOSULIF) TABS 100mg QL (180 tabs / 30 days)	4	NDS QL NM PA
bosutinib (generic of BOSULIF) TABS 400mg, 500mg QL (30 tabs / 30 days)	4	NDS QL NM PA
BRAFTOVI CAPS 75mg QL (180 caps / 30 days)	4	NDS QL NM PA
BRUKINSA CAPS 80mg QL (120 caps / 30 days)	4	NDS QL NM PA
BRUKINSA TABS 160mg QL (60 tabs / 30 days)	4	NDS QL NM PA
CABOMETYX TABS 20mg, 40mg, 60mg QL (30 tabs / 30 days)	4	NDS QL NM PA
CALQUENCE TABS 100mg QL (60 tabs / 30 days)	4	NDS QL NM PA
CAPRELSA TABS 100mg QL (60 tabs / 30 days)	4	NDS QL NM PA
CAPRELSA TABS 300mg QL (30 tabs / 30 days)	4	NDS QL NM PA
CAVHANZA TBDP 60mg, 80mg QL (112 tabs / 28 days)	4	NDS QL NM PA
COLUMVI SOLN 2.5mg/2.5ml, 10mg/10ml	4	NDS NM PA
COMETRIQ (60MG DOSE) KIT 20mg QL (84 caps / 28 days)	4	NDS QL NM PA
COMETRIQ KIT 100MG QL (56 caps / 28 days)	4	NDS QL NM PA
COMETRIQ KIT 140MG QL (112 caps / 28 days)	4	NDS QL NM PA
COPIKTRA CAPS 15mg, 25mg QL (56 caps / 28 days)	4	NDS QL NM PA
COTELLIC TABS 20mg QL (63 tabs / 28 days)	4	NDS QL NM PA
CYRAMZA SOLN 100mg/10ml, 500mg/50ml	4	NDS NM PA
DANZITEN TABS 71mg, 95mg QL (112 tabs / 28 days)	4	NDS QL NM PA
DARZALEX SOLN 100mg/5ml, 400mg/20ml	4	NDS NM PA
DARZALEX INJ FASPRO	4	NDS NM PA
dasatinib (generic of SPRYCEL) TABS 20mg QL (90 tabs / 30 days)	4	NDS QL NM PA
dasatinib (generic of SPRYCEL) TABS 50mg, 70mg, 80mg, 100mg, 140mg QL (30 tabs / 30 days)	4	NDS QL NM PA
DATROWAY SOLR 100mg	4	NDS NM PA

Drug Name	Tier	Requirements/ Limits
DAURISMO TABS 25mg QL (60 tabs / 30 days)	4	NDS QL NM PA
DAURISMO TABS 100mg QL (30 tabs / 30 days)	4	NDS QL NM PA
ELAHERE SOLN 100mg/20ml	4	NDS NM PA
EMPLICITI SOLR 300mg, 400mg	4	NDS NM PA
EMRELIS SOLR 20mg, 100mg	4	NDS NM PA
ENHERTU SOLR 100mg	4	NDS NM PA
ENSACOVE CAPS 25mg QL (270 caps / 30 days)	4	NDS QL NM PA
ENSACOVE CAPS 100mg QL (60 caps / 30 days)	4	NDS QL NM PA
EPKINLY SOLN 4mg/0.8ml, 48mg/0.8ml	4	NDS NM PA
ERBITUX SOLN 100mg/50ml, 200mg/100ml	4	NDS B/D NM
ERIVEDGE CAPS 150mg QL (30 caps / 30 days)	4	NDS QL NM PA
erlotinib hcl TABS 25mg QL (90 tabs / 30 days)	4	NDS QL NM PA
erlotinib hcl TABS 100mg, 150mg QL (30 tabs / 30 days)	4	NDS QL NM PA
everolimus (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
everolimus (generic of AFINITOR DISPERZ) TBSO 2mg, 5mg QL (60 tabs / 30 days)	4	NDS QL NM PA
everolimus (generic of AFINITOR DISPERZ) TBSO 3mg QL (90 tabs / 30 days)	4	NDS QL NM PA
FOTIVDA CAPS .89mg, 1.34mg QL (21 caps / 28 days)	4	NDS QL NM PA
FRUZAQLA CAPS 1mg QL (84 caps / 28 days)	4	NDS QL NM PA
FRUZAQLA CAPS 5mg QL (21 caps / 28 days)	4	NDS QL NM PA
FYARRO SUSR 100mg	4	NDS NM PA
GAVRETO CAPS 100mg QL (120 caps / 30 days)	4	NDS QL NM PA
GAZYVA SOLN 1000mg/40ml	4	NDS NM PA
gefitinib (generic of IRESSA) TABS 250mg QL (60 tabs / 30 days)	4	NDS QL NM PA
GILOTRIF TABS 20mg, 30mg, 40mg QL (30 tabs / 30 days)	4	NDS QL NM PA
GLEEVEC TABS 100mg QL (90 tabs / 30 days)	4	NDS QL NM PA
GLEEVEC TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA
GOMEKLI CAPS 1mg QL (168 caps / 28 days)	4	NDS QL NM PA
GOMEKLI CAPS 2mg QL (84 caps / 28 days)	4	NDS QL NM PA
GOMEKLI TBSO 1mg QL (168 tabs / 28 days)	4	NDS QL NM PA
HERCEP HYLEC SOL 60-10000	4	NDS NM PA
HERCEPTIN SOLR 150mg	4	NDS NM PA
HERCESSI SOLR 150mg, 420mg	4	NDS NM PA
HERNEXEOS TABS 60mg QL (120 tabs / 30 days)	4	NDS QL NM PA
HERZUMA SOLR 150mg, 420mg	4	NDS NM PA
HYRNUO TABS 10mg QL (120 tabs / 30 days)	4	NDS QL NM PA
IBRANCE CAPS 75mg, 100mg, 125mg QL (21 caps / 28 days)	4	NDS QL NM PA
IBRANCE TABS 75mg, 100mg, 125mg QL (21 tabs / 28 days)	4	NDS QL NM PA
IBTROZI CAPS 200mg QL (90 caps / 30 days)	4	NDS QL NM PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg QL (30 tabs / 30 days)	4	NDS QL NM PA
IDHIFA TABS 50mg, 100mg QL (30 tabs / 30 days)	4	NDS QL NM PA
imatinib mesylate (generic of GLEEVEC) TABS 100mg QL (90 tabs / 30 days)	1	QL NM PA
imatinib mesylate (generic of GLEEVEC) TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
IMBRUVICA CAPS 70mg	4	NDS QL NM PA QL (30 caps / 30 days)
IMBRUVICA CAPS 140mg	4	NDS QL NM PA QL (120 caps / 30 days)
IMBRUVICA SUSP 70mg/ml	4	NDS QL NM PA QL (216 mL / 27 days)
IMBRUVICA TABS 140mg, 280mg, 420mg	4	NDS QL NM PA QL (30 tabs / 30 days)
IMDELLTRA SOLR 1mg, 10mg	4	NDS NM PA
IMFINZI SOLN 120mg/2.4ml, 500mg/10ml	4	NDS NM PA
IMJUDO SOLN 25mg/1.25ml, 300mg/15ml	4	NDS NM PA
IMKELDI SOLN 80mg/ml	4	NDS QL NM PA QL (280 mL / 28 days)
INLYTA TABS 1mg	4	NDS QL NM PA QL (180 tabs / 30 days)
INLYTA TABS 5mg	4	NDS QL NM PA QL (120 tabs / 30 days)
INREBIC CAPS 100mg	4	NDS QL NM PA QL (120 caps / 30 days)
IRESSA TABS 250mg	4	NDS QL NM PA QL (60 tabs / 30 days)
ITOVEBI TABS 3mg	4	NDS QL NM PA QL (56 tabs / 28 days)
ITOVEBI TABS 9mg	4	NDS QL NM PA QL (28 tabs / 28 days)
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	4	NDS QL NM PA QL (60 tabs / 30 days)
JAKAFI XR TB24 11mg, 22mg, 33mg, 44mg, 55mg	4	NDS QL NM PA QL (30 tabs / 30 days)
JAYPIRCA TABS 50mg	4	NDS QL NM PA QL (30 tabs / 30 days)
JAYPIRCA TABS 100mg	4	NDS QL NM PA QL (60 tabs / 30 days)
JEMPERLI SOLN 500mg/10ml	4	NDS NM PA
JIDEYTRO TABS 25mg	4	NDS QL NM PA QL (90 tabs / 30 days)
JIDEYTRO TABS 100mg	4	NDS QL NM PA QL (30 tabs / 30 days)
JOBEVNE SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA

Drug Name	Tier	Requirements/ Limits
KADCYLA SOLR 100mg, 160mg	4	NDS B/D NM
KANJINTI SOLR 150mg, 420mg	4	NDS NM PA
KEYTRUDA SOLN 100mg/4ml	4	NDS NM PA
KEYTRUDA INJ QLEX 395-4800 MG-UNIT/2.4ML	4	NDS QL NM PA QL (1 vial / 21 days)
KEYTRUDA INJ QLEX 790-9600 MG-UNIT/4.8ML	4	NDS QL NM PA QL (1 vial / 42 days)
KIMMTRAK SOLN 100mcg/0.5ml	4	NDS NM PA
KISQALI 200 DOSE TBPK 200mg	4	NDS QL NM PA QL (21 tabs / 28 days)
KISQALI 400 DOSE TBPK 200mg	4	NDS QL NM PA QL (42 tabs / 28 days)
KISQALI 600 DOSE TBPK 200mg	4	NDS QL NM PA QL (63 tabs / 28 days)
KOMZIFTI CAPS 200mg	4	NDS QL NM PA QL (90 caps / 30 days)
KOSELUGO CAPS 10mg	4	NDS QL NM PA QL (240 caps / 30 days)
KOSELUGO CAPS 25mg	4	NDS QL NM PA QL (120 caps / 30 days)
KOSELUGO CPSP 5mg	4	NDS QL NM PA QL (600 caps / 30 days)
KOSELUGO CPSP 7.5mg	4	NDS QL NM PA QL (360 caps / 30 days)
KRAZATI TABS 200mg	4	NDS QL NM PA QL (180 tabs / 30 days)
KYPROLIS SOLR 10mg, 30mg, 60mg	4	NDS NM PA
lapatinib ditosylate (generic of TYKERB) TABS 250mg	4	NDS QL NM PA QL (180 tabs / 30 days)
LAZCLUZE TABS 80mg	4	NDS QL NM PA QL (60 tabs / 30 days)
LAZCLUZE TABS 240mg	4	NDS QL NM PA QL (30 tabs / 30 days)
LENVIMA 4 MG DAILY DOSE CPPK 4mg	4	NDS QL NM PA QL (30 caps / 30 days)

Drug Name	Drug Tier	Requirements/ Limits
LENVIMA 8 MG DAILY DOSE CPPK 4mg QL (60 caps / 30 days)	4	NDS QL NM PA
LENVIMA 10 MG DAILY DOSE CPPK 10mg QL (30 caps / 30 days)	4	NDS QL NM PA
LENVIMA 12MG DAILY DOSE CPPK 4mg QL (90 caps / 30 days)	4	NDS QL NM PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg QL (60 caps / 30 days)	4	NDS QL NM PA
LENVIMA CAP 14 MG QL (60 caps / 30 days)	4	NDS QL NM PA
LENVIMA CAP 18 MG QL (90 caps / 30 days)	4	NDS QL NM PA
LENVIMA CAP 24 MG QL (90 caps / 30 days)	4	NDS QL NM PA
LIBTAYO SOLN 350mg/7ml	4	NDS NM PA
LOQTORZI SOLN 240mg/6ml	4	NDS NM PA
LORBRENA TABS 25mg QL (90 tabs / 30 days)	4	NDS QL NM PA
LORBRENA TABS 100mg QL (30 tabs / 30 days)	4	NDS QL NM PA
LUMAKRAS TABS 120mg QL (240 tabs / 30 days)	4	NDS QL NM PA
LUMAKRAS TABS 240mg QL (120 tabs / 30 days)	4	NDS QL NM PA
LUMAKRAS TABS 320mg QL (90 tabs / 30 days)	4	NDS QL NM PA
LUNSUMIO SOLN 1mg/ml, 30mg/30ml	4	NDS NM PA
LUNSUMIO VELO SOLN 5mg/0.5ml, 45mg/ml	4	NDS NM PA
LYNOZYFIC SOLN 5mg/2.5ml, 200mg/10ml	4	NDS NM PA
LYNPARZA TABS 100mg, 150mg QL (120 tabs / 30 days)	4	NDS QL NM PA
LYTGOBI (12 MG DAILY DOSE) TBPK 4mg QL (84 tabs / 28 days)	4	NDS QL NM PA
LYTGOBI (16 MG DAILY DOSE) TBPK 4mg QL (112 tabs / 28 days)	4	NDS QL NM PA
LYTGOBI (20 MG DAILY DOSE) TBPK 4mg QL (140 tabs / 28 days)	4	NDS QL NM PA
MARGENZA SOLN 250mg/10ml	4	NDS NM PA
MEKINIST SOLR .05mg/ml QL (1260 mL / 30 days)	4	NDS QL NM PA
MEKINIST TABS 2mg QL (30 tabs / 30 days)	4	NDS QL NM PA
MEKINIST TABS .5mg QL (90 tabs / 30 days)	4	NDS QL NM PA
MEKTOVI TABS 15mg QL (180 tabs / 30 days)	4	NDS QL NM PA
MONJUVI SOLR 200mg	4	NDS NM PA
MVASI SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
MYLOTARG SOLR 4.5mg	4	NDS NM PA
NERLYNX TABS 40mg QL (180 tabs / 30 days)	4	NDS QL NM PA
NEXAVAR TABS 200mg QL (120 tabs / 30 days)	4	NDS QL NM PA
NILOTINIB D-TARTRATE CAPS 50mg QL (120 caps / 30 days)	4	NDS QL NM PA
NILOTINIB D-TARTRATE CAPS 150mg, 200mg QL (112 caps / 28 days)	4	NDS QL NM PA
nilotinib hcl (generic of TASIGNA) CAPS 50mg QL (120 caps / 30 days)	4	NDS QL NM PA
nilotinib hcl (generic of TASIGNA) CAPS 150mg, 200mg QL (112 caps / 28 days)	4	NDS QL NM PA
NINLARO CAPS 2.3mg, 3mg, 4mg QL (3 caps / 28 days)	4	NDS QL NM PA
ODOMZO CAPS 200mg QL (30 caps / 30 days)	4	NDS QL NM PA
OGIVRI SOLR 150mg, 420mg	4	NDS NM PA
OGSIVEO TABS 100mg, 150mg QL (56 tabs / 28 days)	4	NDS QL NM PA
OJEMDA SUSR 25mg/ml QL (96 mL / 28 days)	4	NDS QL NM PA
OJEMDA TABS 100mg QL (24 tabs / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
OJJAARA TABS 100mg, 150mg, 200mg QL (30 tabs / 30 days)	4	NDS QL NM PA
ONTRUZANT SOLR 150mg, 420mg	4	NDS NM PA
OPDIVO SOLN 40mg/4ml, 100mg/10ml, 120mg/12ml, 240mg/24ml	4	NDS NM PA
OPDIVO INJ QVANTIG	4	NDS NM PA
OPDUALAG INJ	4	NDS NM PA
PADCEV SOLR 20mg, 30mg	4	NDS NM PA
pazopanib hcl (generic of VOTRIENT) TABS 200mg QL (120 tabs / 30 days)	4	NDS QL NM PA
pazopanib hcl TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg QL (28 tabs / 28 days)	4	NDS QL NM PA
PERJETA SOLN 420mg/14ml	4	NDS NM PA
PHESGO SOL	4	NDS NM PA
PHYRAGO TABS 20mg QL (90 tabs / 30 days)	4	NDS QL NM PA
PHYRAGO TABS 50mg, 70mg, 80mg, 100mg, 140mg QL (30 tabs / 30 days)	4	NDS QL NM PA
PIQRAY 200MG DAILY DOSE TBPK 200mg QL (28 tabs / 28 days)	4	NDS QL NM PA
PIQRAY 250MG TAB DOSE QL (56 tabs / 28 days)	4	NDS QL NM PA
PIQRAY 300MG DAILY DOSE TBPK 150mg QL (56 tabs / 28 days)	4	NDS QL NM PA
POLIVY SOLR 30mg, 140mg	4	NDS NM PA
POTELIGEO SOLN 20mg/5ml	4	NDS NM PA
QINLOCK TABS 50mg QL (90 tabs / 30 days)	4	NDS QL NM PA
RETEVMO TABS 40mg QL (90 tabs / 30 days)	4	NDS QL NM PA
RETEVMO TABS 80mg QL (120 tabs / 30 days)	4	NDS QL NM PA
RETEVMO TABS 120mg, 160mg QL (60 tabs / 30 days)	4	NDS QL NM PA
REVUFORJ TABS 25mg QL (240 tabs / 30 days)	4	NDS QL NM PA
REVUFORJ TABS 110mg QL (120 tabs / 30 days)	4	NDS QL NM PA
REVUFORJ TABS 160mg QL (60 tabs / 30 days)	4	NDS QL NM PA
REZLIDHIA CAPS 150mg QL (60 caps / 30 days)	4	NDS QL NM PA
RIABNI SOLN 100mg/10ml, 500mg/50ml	4	NDS NM PA
RITUXAN SOLN 500mg/50ml	4	NDS NM PA
RITUXAN INJ HYCELA	4	NDS NM PA
ROMVIMZA CAPS 14mg, 20mg, 30mg QL (8 caps / 28 days)	4	NDS QL NM PA
ROZLYTREK CAPS 100mg QL (180 caps / 30 days)	4	NDS QL NM PA
ROZLYTREK CAPS 200mg QL (90 caps / 30 days)	4	NDS QL NM PA
ROZLYTREK PACK 50mg QL (336 packets / 28 days)	4	NDS QL NM PA
RUBRACA TABS 200mg, 250mg, 300mg QL (120 tabs / 30 days)	4	NDS QL NM PA
RUXIENCE SOLN 100mg/10ml, 500mg/50ml	4	NDS NM PA
RYBREVANT SOLN 350mg/7ml	4	NDS NM PA
RYBREVANT INJ FASPRO	4	NDS NM PA
RYDAPT CAPS 25mg QL (224 caps / 28 days)	4	NDS QL NM PA
SARCLISA SOLN 100mg/5ml, 500mg/25ml	4	NDS NM PA
SARCLISA ESCENA SOLN 1400mg/10ml	4	NDS NM PA
SCEMBLIX TABS 20mg QL (60 tabs / 30 days)	4	NDS QL NM PA
SCEMBLIX TABS 40mg QL (300 tabs / 30 days)	4	NDS QL NM PA
SCEMBLIX TABS 100mg QL (120 tabs / 30 days)	4	NDS QL NM PA
sorafenib tosylate (generic of NEXAVAR) TABS 200mg QL (120 tabs / 30 days)	4	NDS QL NM PA
SPRYCEL TABS 20mg QL (90 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Drug Tier	Requirements/ Limits
SPRYCEL TABS 50mg, 70mg, 80mg, 100mg, 140mg QL (30 tabs / 30 days)	4	NDS QL NM PA
STIVARGA TABS 40mg QL (84 tabs / 28 days)	4	NDS QL NM PA
sunitinib malate (generic of SUTENT) CAPS 12.5mg, 25mg, 37.5mg, 50mg QL (30 caps / 30 days)	4	NDS QL NM PA
SUTENT CAPS 12.5mg, 25mg, 37.5mg, 50mg QL (30 caps / 30 days)	4	NDS QL NM PA
TABRECTA TABS 150mg, 200mg QL (112 tabs / 28 days)	4	NDS QL NM PA
TAFINLAR CAPS 50mg, 75mg QL (120 caps / 30 days)	4	NDS QL NM PA
TAFINLAR TBSO 10mg QL (840 tabs / 28 days)	4	NDS QL NM PA
TAGRISSO TABS 40mg, 80mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg QL (30 caps / 30 days)	4	NDS QL NM PA
TALZENNA CAPS .25mg QL (90 caps / 30 days)	4	NDS QL NM PA
TASIGNA CAPS 50mg QL (120 caps / 30 days)	4	NDS QL NM PA
TASIGNA CAPS 150mg, 200mg QL (112 caps / 28 days)	4	NDS QL NM PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	4	NDS NM PA
TECENTRIQ INJ HYBREZA QL (1 vial / 21 days)	4	NDS QL NM PA
TECVAYLI SOLN 30mg/3ml, 153mg/1.7ml	4	NDS NM PA
temsirolimus (generic of TORISEL) SOLN 25mg/ml	4	NDS B/D NM
TEPMETKO TABS 225mg QL (60 tabs / 30 days)	4	NDS QL NM PA
TEVIMBRA SOLN 100mg/10ml, 150mg/15ml	4	NDS NM PA
TIBSOVO TABS 250mg QL (60 tabs / 30 days)	4	NDS QL NM PA
TIVDAK SOLR 40mg	4	NDS NM PA
TORISEL SOLN 25mg/ml	4	NDS B/D NM
torpenz (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TRAZIMERA SOLR 150mg, 420mg	4	NDS NM PA
TRODELVY SOLR 180mg	4	NDS NM PA
TRUQAP TABS 160mg, 200mg QL (64 tabs / 28 days)	4	NDS QL NM PA
TRUQAP TBPK 160mg, 200mg QL (4 packs / 28 days)	4	NDS QL NM PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	4	NDS NM PA
TUKYSA TABS 50mg, 150mg QL (120 tabs / 30 days)	4	NDS QL NM PA
TURALIO CAPS 125mg QL (120 caps / 30 days)	4	NDS QL NM PA
TYKERB TABS 250mg QL (180 tabs / 30 days)	4	NDS QL NM PA
UNLOXCYT SOLN 300mg/5ml	4	NDS NM PA
VANFLYTA TABS 17.7mg, 26.5mg QL (56 tabs / 28 days)	4	NDS QL NM PA
VECTIBIX SOLN 100mg/5ml, 400mg/20ml	4	NDS B/D NM
VEGZELMA SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
VELCADE SOLR 3.5mg	4	NDS NM PA
VENCLEXTA TABS 10mg QL (112 tabs / 28 days)	2	QL NM PA
VENCLEXTA TABS 50mg QL (112 tabs / 28 days)	4	NDS QL NM PA
VENCLEXTA TABS 100mg QL (180 tabs / 30 days)	4	NDS QL NM PA
VENCLEXTA TAB START PK QL (42 tabs / 28 days)	4	NDS QL NM PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg QL (56 tabs / 28 days)	4	NDS QL NM PA
VITRAKVI CAPS 25mg QL (180 caps / 30 days)	4	NDS QL NM PA
VITRAKVI CAPS 100mg QL (60 caps / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
VITRAKVI SOLN 20mg/ml QL (300 mL / 30 days)	4	NDS QL NM PA
VIZIMPRO TABS 15mg, 30mg, 45mg QL (30 tabs / 30 days)	4	NDS QL NM PA
VONJO CAPS 100mg QL (120 caps / 30 days)	4	NDS QL NM PA
VORANIGO TABS 10mg QL (60 tabs / 30 days)	4	NDS QL NM PA
VORANIGO TABS 40mg QL (30 tabs / 30 days)	4	NDS QL NM PA
VOTRIENT TABS 200mg QL (120 tabs / 30 days)	4	NDS QL NM PA
VYLOY SOLR 100mg, 300mg	4	NDS NM PA
XALKORI CAPS 200mg, 250mg; CPSP 20mg, 50mg QL (120 caps / 30 days)	4	NDS QL NM PA
XALKORI CPSP 150mg QL (180 caps / 30 days)	4	NDS QL NM PA
XOSPATA TABS 40mg QL (90 tabs / 30 days)	4	NDS QL NM PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 10mg QL (16 tabs / 28 days)	4	NDS QL NM PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 40mg QL (4 tabs / 28 days)	4	NDS QL NM PA
XPOVIO PAK (40 MG TWICE WEEKLY) TBPK 40mg QL (8 tabs / 28 days)	4	NDS QL NM PA
XPOVIO PAK (60 MG ONCE WEEKLY) TBPK 60mg QL (4 tabs / 28 days)	4	NDS QL NM PA
XPOVIO PAK (60 MG TWICE WEEKLY) TBPK 20mg QL (24 tabs / 28 days)	4	NDS QL NM PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 40mg QL (8 tabs / 28 days)	4	NDS QL NM PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 80mg QL (4 tabs / 28 days)	4	NDS QL NM PA
XPOVIO PAK (80 MG TWICE WEEKLY) TBPK 20mg QL (32 tabs / 28 days)	4	NDS QL NM PA
XPOVIO PAK (100 MG ONCE WEEKLY) TBPK 50mg QL (8 tabs / 28 days)	4	NDS QL NM PA
YERVOY SOLN 50mg/10ml, 200mg/40ml	4	NDS NM PA
yulithira (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	1	QL NM PA
ZALTRAP SOLN 100mg/4ml, 200mg/8ml	4	NDS NM PA
ZEJULA TABS 100mg, 200mg, 300mg QL (30 tabs / 30 days)	4	NDS QL NM PA
ZELBORAF TABS 240mg QL (240 tabs / 30 days)	4	NDS QL NM PA
ZIIHERA SOLR 300mg	4	NDS NM PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
ZOLINZA CAPS 100mg QL (120 caps / 30 days)	4	NDS QL NM PA
ZYDELIG TABS 100mg, 150mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ZYKADIA TABS 150mg QL (84 tabs / 28 days)	4	NDS QL NM PA
ZYNLONTA SOLR 10mg	4	NDS NM PA
ZYNYZ SOLN 500mg/20ml	4	NDS NM PA
CARDIOVASCULAR ***ACE INHIBITOR COMBINATIONS***		
amlodipine besylate-benazepril hcl cap 2.5-10 mg QL (30 caps / 30 days)	1	QL
amlodipine besylate-benazepril hcl cap 5-10 mg QL (30 caps / 30 days)	1	QL
amlodipine besylate-benazepril hcl cap 5-20 mg QL (30 caps / 30 days)	1	QL
amlodipine besylate-benazepril hcl cap 5-40 mg QL (30 caps / 30 days)	1	QL
amlodipine besylate-benazepril hcl cap 10-20 mg (generic of LOTREL) QL (30 caps / 30 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
amlodipine besylate-benazepril hcl cap 10-40 mg QL (30 caps / 30 days)	1	QL
benazepril & hydrochlorothiazide tab 5-6.25mg	1	
benazepril & hydrochlorothiazide tab 10-12.5 mg (generic of LOTENSIN HCT)	1	
benazepril & hydrochlorothiazide tab 20-12.5 mg (generic of LOTENSIN HCT)	1	
benazepril & hydrochlorothiazide tab 20-25 mg (generic of LOTENSIN HCT)	1	
captopril & hydrochlorothiazide tab 25-15 mg	1	
captopril & hydrochlorothiazide tab 25-25 mg	1	
captopril & hydrochlorothiazide tab 50-15 mg	1	
captopril & hydrochlorothiazide tab 50-25 mg	1	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	1	
enalapril maleate & hydrochlorothiazide tab 10-25 mg (generic of VASERETIC)	1	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	1	
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg	1	
lisinopril & hydrochlorothiazide tab 10-12.5 mg (generic of ZESTORETIC)	1	
lisinopril & hydrochlorothiazide tab 20-12.5 mg (generic of ZESTORETIC)	1	
lisinopril & hydrochlorothiazide tab 20-25 mg (generic of ZESTORETIC)	1	
quinapril-hydrochlorothiazide tab 10-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-25 mg	1	
trandolapril-verapamil hcl tab er 1-240 mg	1	
trandolapril-verapamil hcl tab er 2-180 mg	1	
trandolapril-verapamil hcl tab er 2-240 mg	1	
trandolapril-verapamil hcl tab er 4-240 mg	1	
VASERETIC TAB 10-25MG	3	
ZESTORETIC TAB 10-12.5	3	
ZESTORETIC TAB 20-12.5	3	
ZESTORETIC TAB 20-25MG	3	
ACE INHIBITORS		
benazepril hcl TABS 5mg	1	
benazepril hcl (generic of LOTENSIN) TABS 10mg, 20mg, 40mg	1	
captopril TABS 12.5mg, 25mg, 50mg, 100mg	1	
enalapril maleate (generic of EPANED) SOLN 1mg/ml	1	
enalapril maleate (generic of VASOTEC) TABS 2.5mg, 5mg, 10mg, 20mg	1	
EPANED SOLN 1mg/ml	4	NDS
fosinopril sodium TABS 10mg, 20mg, 40mg	1	
lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	1	
LOTENSIN TABS 10mg, 20mg, 40mg	3	
moexipril hcl TABS 7.5mg, 15mg	1	
perindopril erbumine TABS 2mg, 4mg, 8mg	1	
QBRELIS SOLN 1mg/ml	4	NDS
quinapril hcl TABS 5mg, 10mg, 20mg, 40mg	1	

Drug Name	Drug Tier	Requirements/ Limits
ramipril CAPS 1.25mg, 2.5mg, 5mg, 10mg	1	
trandolapril TABS 1mg, 2mg, 4mg	1	
VASOTEC TABS 2.5mg, 5mg, 10mg	3	
VASOTEC TABS 20mg	4	NDS
ZESTRIL TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	3	
ALDOSTERONE RECEPTOR ANTAGONISTS		
ALDACTONE TABS 25mg, 50mg, 100mg	3	
CAROSPIR SUSP 25mg/5ml	3	
eplerenone TABS 25mg, 50mg	1	
INSPRA TABS 25mg, 50mg	3	
KERENDIA TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	2	QL
spironolactone (generic of CAROSPIR) SUSP 25mg/5ml	1	
spironolactone (generic of ALDACTONE) TABS 25mg, 50mg, 100mg	1	
ALPHA BLOCKERS		
CARDURA TABS 1mg, 2mg, 4mg, 8mg	3	
doxazosin mesylate (generic of CARDURA) TABS 1mg, 2mg, 4mg, 8mg	1	
prazosin hcl CAPS 1mg, 2mg, 5mg	1	
terazosin hcl CAPS 1mg, 2mg, 5mg, 10mg	1	
TEZRULY SOLN 1mg/ml QL (600 mL / 30 days)	3	QL ST
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
amlodipine besylate-olmesartan medoxomil tab 5-20 mg (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-olmesartan medoxomil tab 5-40 mg (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-olmesartan medoxomil tab 10-20 mg (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-olmesartan medoxomil tab 10-40 mg (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-valsartan tab 5-160 mg (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-valsartan tab 5-320 mg (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-valsartan tab 10-160 mg (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-valsartan tab 10-320 mg (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg (generic of EXFORGE HCT)	1	QL (30 tabs / 30 days)
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg (generic of EXFORGE HCT)	1	QL (30 tabs / 30 days)
ATACAND HCT TAB 16-12.5	3	QL (60 tabs / 30 days)
ATACAND HCT TAB 32-12.5	3	QL (30 tabs / 30 days)
ATACAND HCT TAB 32-25MG	3	QL (30 tabs / 30 days)
AVALIDE TAB 150-12.5	3	QL (60 tabs / 30 days)
AVALIDE TAB 300-12.5	3	QL (30 tabs / 30 days)
AZOR TAB 5-20MG	3	QL (30 tabs / 30 days)
AZOR TAB 5-40MG	3	QL (30 tabs / 30 days)
AZOR TAB 10-20MG	3	QL (30 tabs / 30 days)
AZOR TAB 10-40MG	3	QL (30 tabs / 30 days)
BENICAR HCT TAB 20-12.5	3	QL (30 tabs / 30 days)
BENICAR HCT TAB 40-12.5	3	QL (30 tabs / 30 days)
BENICAR HCT TAB 40-25MG	3	QL (30 tabs / 30 days)
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg (generic of ATACAND HCT)	1	QL (60 tabs / 30 days)
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg (generic of ATACAND HCT)	1	QL (30 tabs / 30 days)
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg (generic of ATACAND HCT)	1	QL (30 tabs / 30 days)
DIOVAN HCT TAB 80-12.5	3	QL (30 tabs / 30 days)
DIOVAN HCT TAB 160-12.5	3	QL (30 tabs / 30 days)
DIOVAN HCT TAB 160-25MG	3	QL (30 tabs / 30 days)
DIOVAN HCT TAB 320-12.5	3	QL (30 tabs / 30 days)
DIOVAN HCT TAB 320-25MG	3	QL (30 tabs / 30 days)
EDARBYCLOR TAB 40-12.5	3	QL ST (30 tabs / 30 days)
EDARBYCLOR TAB 40-25MG	3	QL ST (30 tabs / 30 days)
ENTRESTO CAP 6-6MG	2	QL (240 caps / 30 days)
ENTRESTO CAP 15-16MG	2	QL (240 caps / 30 days)
ENTRESTO TAB 24-26MG	3	QL (180 tabs / 30 days)
ENTRESTO TAB 49-51MG	3	QL (60 tabs / 30 days)
ENTRESTO TAB 97-103MG	3	QL (60 tabs / 30 days)
EXFORGE HCT TAB 5-160-12.5MG	3	QL (30 tabs / 30 days)
EXFORGE HCT TAB 5-160-25MG	3	QL (30 tabs / 30 days)
EXFORGE HCT TAB 10-160-12.5MG	3	QL (30 tabs / 30 days)
EXFORGE HCT TAB 10-160-25MG	3	QL (30 tabs / 30 days)
EXFORGE HCT TAB 10-320-25MG	3	QL (30 tabs / 30 days)
EXFORGE TAB 5-160MG	3	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/ Limits
EXFORGE TAB 5-320MG QL (30 tabs / 30 days)	3	QL
EXFORGE TAB 10-160MG QL (30 tabs / 30 days)	3	QL
EXFORGE TAB 10-320MG QL (30 tabs / 30 days)	3	QL
HYZAAR TAB 50-12.5	3	
HYZAAR TAB 100-12.5	3	
HYZAAR TAB 100-25	3	
irbesartan-hydrochlorothiazide tab 150-12.5 mg (generic of AVALIDE) QL (60 tabs / 30 days)	1	QL
irbesartan-hydrochlorothiazide tab 300-12.5 mg (generic of AVALIDE) QL (30 tabs / 30 days)	1	QL
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (generic of HYZAAR)	1	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (generic of HYZAAR)	1	
losartan potassium & hydrochlorothiazide tab 100-25 mg (generic of HYZAAR)	1	
MICARDIS HCT TAB 40/12.5 QL (30 tabs / 30 days)	3	QL
MICARDIS HCT TAB 80-25MG QL (30 tabs / 30 days)	3	QL
MICARDIS HCT TAB 80/12.5 QL (60 tabs / 30 days)	3	QL
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
sacubitril-valsartan tab 24-26 mg (generic of ENTRESTO) QL (180 tabs / 30 days)	1	QL
sacubitril-valsartan tab 49-51 mg (generic of ENTRESTO) QL (60 tabs / 30 days)	1	QL
sacubitril-valsartan tab 97-103 mg (generic of ENTRESTO) QL (60 tabs / 30 days)	1	QL
telmisartan-amlodipine tab 40-5 mg QL (30 tabs / 30 days)	1	QL
telmisartan-amlodipine tab 40-10 mg QL (30 tabs / 30 days)	1	QL
telmisartan-amlodipine tab 80-5 mg QL (30 tabs / 30 days)	1	QL
telmisartan-amlodipine tab 80-10 mg QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
telmisartan-hydrochlorothiazide tab 40-12.5 mg (generic of MICARDIS HCT)	1	QL
QL (30 tabs / 30 days)		
telmisartan-hydrochlorothiazide tab 80-12.5 mg (generic of MICARDIS HCT)	1	QL
QL (60 tabs / 30 days)		
telmisartan-hydrochlorothiazide tab 80-25 mg (generic of MICARDIS HCT)	1	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 20-5-12.5MG	3	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 40-5-12.5MG	3	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 40-5-25MG	3	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 40-10-12.5MG	3	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 40-10-25MG	3	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 80-12.5 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 160-12.5 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 160-25 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 320-12.5 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 320-25 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
WIDAPLIK TAB 10-1.25-0.625	3	QL
QL (30 tabs / 30 days)		
WIDAPLIK TAB 20-2.5-1.25	3	QL
QL (30 tabs / 30 days)		
WIDAPLIK TAB 40-5-2.5	3	QL
QL (30 tabs / 30 days)		
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ARBLI SUSP 10mg/ml	3	QL
QL (330 mL / 30 days)		
ATACAND TABS 4mg, 8mg, 16mg	3	QL
QL (60 tabs / 30 days)		
ATACAND TABS 32mg	3	QL
QL (30 tabs / 30 days)		
AVAPRO TABS 150mg, 300mg	3	QL
QL (30 tabs / 30 days)		
azilsartan medoxomil (generic of EDARBI) TABS 40mg, 80mg	3	QL ST
QL (30 tabs / 30 days)		
BENICAR TABS 5mg	3	QL
QL (60 tabs / 30 days)		
BENICAR TABS 20mg, 40mg	3	QL
QL (30 tabs / 30 days)		
candesartan cilexetil (generic of ATACAND) TABS 4mg, 8mg, 16mg	1	QL
QL (60 tabs / 30 days)		
candesartan cilexetil (generic of ATACAND) TABS 32mg	1	QL
QL (30 tabs / 30 days)		
COZAAR TABS 25mg, 50mg, 100mg	3	
DIOVAN TABS 40mg, 80mg, 160mg	3	QL
QL (60 tabs / 30 days)		
DIOVAN TABS 320mg	3	QL
QL (30 tabs / 30 days)		
EDARBI TABS 40mg, 80mg	3	QL ST
QL (30 tabs / 30 days)		
irbesartan TABS 75mg	1	QL
QL (30 tabs / 30 days)		
irbesartan (generic of AVAPRO) TABS 150mg, 300mg	1	QL
QL (30 tabs / 30 days)		

Drug Name	Tier	Requirements/ Limits
losartan potassium (generic of COZAAR) TABS 25mg, 50mg, 100mg	1	
olmesartan medoxomil (generic of BENICAR) TABS 5mg QL (60 tabs / 30 days)	1	QL
olmesartan medoxomil (generic of BENICAR) TABS 20mg, 40mg QL (30 tabs / 30 days)	1	QL
telmisartan TABS 20mg, 80mg QL (30 tabs / 30 days)	1	QL
telmisartan (generic of MICARDIS) TABS 40mg QL (30 tabs / 30 days)	1	QL
valsartan SOLN 4mg/ml QL (2400 mL / 30 days)	4	NDS QL PA
valsartan (generic of DIOVAN) TABS 40mg, 80mg, 160mg QL (60 tabs / 30 days)	1	QL
valsartan (generic of DIOVAN) TABS 320mg QL (30 tabs / 30 days)	1	QL
ANTIARRHYTHMICS		
amiodarone hcl SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 200mg, 400mg	1	
BETAPACE TABS 80mg, 120mg, 160mg	4	NDS
BETAPACE AF TABS 80mg	3	
BETAPACE AF TABS 120mg, 160mg	4	NDS
disopyramide phosphate (generic of NORPACE) CAPS 100mg, 150mg	3	
dofetilide (generic of TIKOSYN) CAPS 125mcg, 250mcg, 500mcg	1	NM
flecainide acetate TABS 50mg, 100mg, 150mg	1	
MULTAQ TABS 400mg QL (60 tabs / 30 days)	3	QL
NORPACE CAPS 100mg, 150mg	3	
pacerone TABS 100mg, 200mg, 400mg	1	
propafenone hcl CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg	1	
quinidine sulfate TABS 200mg, 300mg	1	
sotalol hcl (generic of BETAPACE) TABS 80mg, 120mg, 160mg	1	
sotalol hcl TABS 240mg	1	
sotalol hcl (afib/afl) (generic of BETAPACE AF) TABS 80mg, 120mg, 160mg	1	
SOTYLIZE SOLN 5mg/ml	3	
TIKOSYN CAPS 125mcg, 250mcg, 500mcg	3	NM
ANTILIPEMICS, FIBRATES		
choline fenofibrate CPDR 45mg, 135mg	1	
fenofibrate CAPS 50mg QL (60 caps / 30 days)	1	QL ST
fenofibrate CAPS 150mg QL (30 caps / 30 days)	1	QL ST
fenofibrate TABS 40mg QL (60 tabs / 30 days)	1	QL ST
fenofibrate TABS 48mg, 54mg, 160mg	1	
fenofibrate TABS 120mg QL (30 tabs / 30 days)	1	QL ST
fenofibrate (generic of TRICOR) TABS 145mg	1	
fenofibrate micronized CAPS 43mg, 67mg, 134mg, 200mg	1	
fenofibrate micronized CAPS 130mg QL (30 caps / 30 days)	1	QL ST
fenofibric acid TABS 35mg QL (60 tabs / 30 days)	1	QL ST
fenofibric acid TABS 105mg QL (30 tabs / 30 days)	1	QL ST
gemfibrozil (generic of LOPID) TABS 600mg	1	
LIPOFEN CAPS 50mg QL (60 caps / 30 days)	3	QL ST
LIPOFEN CAPS 150mg QL (30 caps / 30 days)	3	QL ST
LOPID TABS 600mg	3	

Drug Name	Tier	Requirements/ Limits
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
ATORVALIQ SUSP 20mg/5ml QL (600 mL / 30 days)	3	QL ST
atorvastatin calcium (generic of LIPITOR) TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	1	QL
CRESTOR TABS 5mg, 10mg, 20mg, 40mg QL (30 tabs / 30 days)	3	QL
FLOLIPID SUSP 20mg/5ml, 40mg/5ml QL (300 mL / 30 days)	3	QL ST
fluvastatin sodium CAPS 20mg, 40mg QL (60 caps / 30 days)	1	QL ST
fluvastatin sodium (generic of LESCOL XL) TB24 80mg QL (30 tabs / 30 days)	1	QL ST
LESCOL XL TB24 80mg QL (30 tabs / 30 days)	3	QL ST
LIPITOR TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	3	QL
LIVALO TABS 1mg, 2mg, 4mg QL (30 tabs / 30 days)	3	QL ST
lovastatin TABS 10mg, 20mg, 40mg QL (60 tabs / 30 days)	1	QL
pitavastatin calcium (generic of LIVALO) TABS 1mg, 2mg, 4mg QL (30 tabs / 30 days)	1	QL ST
pravastatin sodium TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	1	QL
rosuvastatin calcium (generic of CRESTOR) TABS 5mg, 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
simvastatin TABS 5mg, 80mg QL (30 tabs / 30 days)	1	QL
simvastatin (generic of ZOCOR) TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
ZOCOR TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	3	QL
ZYPITAMAG TABS 2mg, 4mg QL (30 tabs / 30 days)	3	QL ST
ANTILIPEMICS, MISCELLANEOUS		
cholestyramine (generic of QUESTRAN) PACK 4gm; POWD 4gm/dose	1	
cholestyramine light PACK 4gm	1	
cholestyramine light (generic of QUESTRAN LIGHT) POWD 4gm/dose	1	
colesevelam hcl (generic of WELCHOL) PACK 3.75gm; TABS 625mg	1	
COLESTID GRAN 5gm; TABS 1gm	3	
colestipol hcl GRAN 5gm; PACK 5gm	1	
colestipol hcl (generic of COLESTID) TABS 1gm	1	
EVKEEZA SOLN 345mg/2.3ml, 1200mg/8ml	4	NDS NM PA
ezetimibe (generic of ZETIA) TABS 10mg QL (30 tabs / 30 days)	1	QL
ezetimibe-simvastatin tab 10-10 mg (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
ezetimibe-simvastatin tab 10-20 mg (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
ezetimibe-simvastatin tab 10-40 mg (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
ezetimibe-simvastatin tab 10-80 mg (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
JUXTAPID CAPS 2mg, 5mg, 10mg, 20mg, 30mg	4	NDS NM PA
LOVAZA CAP 1GM	3	PA

Drug Name	Drug Tier	Requirements/ Limits
NEXLETOL TABS 180mg QL (30 tabs / 30 days)	2	QL
NEXLIZET TAB 180/10MG QL (30 tabs / 30 days)	2	QL
niacin (antihyperlipidemic) TABS 500mg	1	
niacin (antihyperlipidemic) TBCR 500mg, 750mg, 1000mg QL (60 tabs / 30 days)	1	QL
niacor TABS 500mg	1	
omega-3-acid ethyl esters cap 1 gm (generic of LOVAZA)	1	
prevalite PACK 4gm	1	
prevalite (generic of QUESTRAN LIGHT) POWD 4gm/dose	1	
QUESTRAN PACK 4gm; POWD 4gm/dose	3	
QUESTRAN LIGHT POWD 4gm/dose	3	
REPATHA SOSY 140mg/ml QL (6 syringes / 28 days)	2	QL NM PA
REPATHA SURECLICK SOAJ 140mg/ml QL (6 autoinjectors / 28 days)	2	QL NM PA
VASCEPA CAPS .5gm, 1gm	2	
VYTORIN TAB 10-10MG QL (30 tabs / 30 days)	3	QL
VYTORIN TAB 10-20MG QL (30 tabs / 30 days)	3	QL
VYTORIN TAB 10-40MG QL (30 tabs / 30 days)	3	QL
VYTORIN TAB 10-80MG QL (30 tabs / 30 days)	3	QL
WELCHOL PACK 3.75gm; TABS 625mg	3	
ZETIA TABS 10mg QL (30 tabs / 30 days)	3	QL
BETA-BLOCKER/DIURETIC COMBINATIONS		
atenolol & chlorthalidone tab 50-25 mg	1	
atenolol & chlorthalidone tab 100-25 mg	1	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	1	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	1	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	1	
metoprolol & hydrochlorothiazide tab 50-25 mg	1	
metoprolol & hydrochlorothiazide tab 100-25 mg	1	
metoprolol & hydrochlorothiazide tab 100-50 mg	1	
BETA-BLOCKERS		
acebutolol hcl CAPS 200mg, 400mg	1	
atenolol (generic of TENORMIN) TABS 25mg, 50mg, 100mg	1	
betaxolol hcl TABS 10mg, 20mg	1	
bisoprolol fumarate TABS 2.5mg, 5mg, 10mg	1	
BYSTOLIC TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	3	QL
BYSTOLIC TABS 20mg QL (60 tabs / 30 days)	3	QL
carvedilol (generic of COREG) TABS 3.125mg, 6.25mg, 12.5mg, 25mg	1	
carvedilol phosphate (generic of COREG CR) CP24 10mg, 20mg, 40mg, 80mg QL (30 caps / 30 days)	1	QL
COREG TABS 3.125mg, 6.25mg, 12.5mg, 25mg	3	
COREG CR CP24 10mg, 20mg, 40mg, 80mg QL (30 caps / 30 days)	4	NDS QL
INDERAL LA CP24 60mg, 80mg, 120mg, 160mg	4	NDS

Drug Name	Drug Tier	Requirements/ Limits
KAPSPARGO SPRINKLE CS24 25mg, 50mg, 100mg, 200mg	3	
labetalol hcl SOLN 5mg/ml; TABS 100mg, 200mg, 300mg, 400mg	1	
LOPRESSOR SOLN 10mg/ml; TABS 12.5mg, 50mg, 100mg	3	
metoprolol succinate (generic of TOPROL XL) TB24 25mg, 50mg, 100mg, 200mg	1	
metoprolol tartrate SOLN 5mg/5ml; TABS 12.5mg, 25mg, 37.5mg, 75mg	1	
metoprolol tartrate (generic of LOPRESSOR) TABS 50mg, 100mg	1	
nadolol TABS 20mg, 40mg, 80mg	1	
nebivolol hcl (generic of BYSTOLIC) TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	1	QL
nebivolol hcl (generic of BYSTOLIC) TABS 20mg QL (60 tabs / 30 days)	1	QL
pindolol TABS 5mg, 10mg	1	
propranolol hcl (generic of INDERAL LA) CP24 60mg, 80mg, 120mg, 160mg	1	
propranolol hcl SOLN 1mg/ml, 20mg/5ml, 40mg/5ml; TABS 10mg, 20mg, 40mg, 60mg, 80mg	1	
TENORMIN TABS 25mg, 50mg, 100mg	3	
timolol maleate TABS 5mg, 10mg, 20mg	1	
TOPROL XL TB24 25mg, 50mg, 100mg, 200mg	3	
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate (generic of NORVASC) TABS 2.5mg, 5mg, 10mg	1	
CARDAMYST SOLN 70mg/dose	4	NDS
CARDIZEM TABS 30mg, 60mg, 120mg	3	
CARDIZEM CD CP24 120mg	3	
CARDIZEM CD CP24 180mg, 240mg, 300mg, 360mg	4	NDS
CARDIZEM LA TB24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	3	
cartia xt (generic of CARDIZEM CD) CP24 120mg, 180mg, 240mg, 300mg	1	
dilt-xr CP24 120mg, 180mg, 240mg	1	
diltiazem hcl CP12 60mg, 90mg, 120mg; CP24 120mg, 180mg, 240mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TABS 90mg	1	
diltiazem hcl (generic of CARDIZEM) TABS 30mg, 60mg, 120mg	1	
diltiazem hcl (generic of CARDIZEM LA) TB24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
diltiazem hcl coated beads (generic of CARDIZEM CD) CP24 120mg, 180mg, 240mg, 300mg, 360mg	1	
diltiazem hcl extended release beads (generic of TIAZAC) CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
felodipine TB24 2.5mg, 5mg, 10mg	1	
isradipine CAPS 2.5mg, 5mg	1	
KATERZIA SUSP 1mg/ml	3	
matzim la (generic of CARDIZEM LA) TB24 180mg, 240mg, 300mg, 360mg, 420mg	1	
nicardipine hcl CAPS 20mg, 30mg	1	

Drug Name	Drug Tier	Requirements/ Limits
nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9% (generic of NICARDIPINE HYDROCHLORIDE)	1	
nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9% (generic of NICARDIPINE HYDROCHLORIDE)	1	
NICARDIPINE SOL 20/200ML	3	
NICARDIPINE SOL 40/200ML	3	
nifedipine (generic of PROCARDIA XL) TB24 30mg, 60mg	1	
nifedipine TB24 30mg, 60mg, 90mg	1	
nimodipine CAPS 30mg	1	
nimodipine SOLN 60mg/20ml	4	NDS
nisoldipine (generic of SULAR) TB24 8.5mg	1	
nisoldipine TB24 17mg, 34mg	1	
NORLIQVA SOLN 1mg/ml	3	
NORVASC TABS 2.5mg, 5mg, 10mg	3	
NYMALIZE SOLN 6mg/ml	4	NDS
PROCARDIA XL TB24 30mg, 60mg	3	
SDAMLO SOLR 5mg QL (30 bottles / 30 days)	4	NDS QL PA
SULAR TB24 8.5mg, 17mg, 34mg	3	
tiadylt er (generic of TIAZAC) CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
TIAZAC CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	3	
verapamil hcl CP24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; SOLN 2.5mg/ml; TABS 40mg, 80mg, 120mg; TBCR 120mg, 180mg, 240mg	1	
DIURETICS		
acetazolamide CP12 500mg; TABS 125mg, 250mg	1	
amiloride & hydrochlorothiazide tab 5-50 mg	1	
amiloride hcl TABS 5mg	1	
bumetanide SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	1	
chlorthalidone TABS 25mg, 50mg	1	
dichlorphenamide (generic of KEVEYIS) TABS 50mg	4	NDS NM PA
DIURIL SUSP 250mg/5ml	3	
DYRENIUM CAPS 50mg, 100mg	3	
EDECRIN TABS 25mg	4	NDS
ENBUMYST SOLN .5mg/0.1ml	4	NDS
ethacrynic acid (generic of EDECRIN) TABS 25mg	1	
FUROSCIX CTKT 80mg/10ml	4	NDS
FUROSCIX READYFLOW SOAJ 80mg/ml	4	NDS
furosemide SOLN 10mg/ml, 40mg/5ml	1	
furosemide (generic of LASIX) TABS 20mg, 40mg, 80mg	1	
furosemide inj SOLN 10mg/ml	1	
HEMICLOR TABS 12.5mg	3	
hydrochlorothiazide CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1	
indapamide TABS 1.25mg, 2.5mg	1	
INZIRQO SUSR 10mg/ml QL (320 mL / 30 days)	3	QL
KEVEYIS TABS 50mg	4	NDS NM PA
LASIX TABS 20mg, 40mg, 80mg	3	
LASIX ONYU CTKT 80mg/2.67ml	4	NDS
methazolamide TABS 25mg, 50mg	1	
metolazone TABS 2.5mg, 5mg, 10mg	1	
ormalvi (generic of KEVEYIS) TABS 50mg	4	NDS NM PA
SOAANZ TABS 40mg	3	

Drug Name	Tier	Limits
spironolactone & hydrochlorothiazide tab 25-25 mg	1	
THALITONE TABS 15mg	3	
torsemide TABS 5mg, 10mg, 20mg, 100mg	1	
triamterene (generic of DYRENIUM) CAPS 50mg, 100mg	1	
triamterene & hydrochlorothiazide cap 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 75-50 mg	1	
MISCELLANEOUS		
ADRENALIN SOLN 1mg/ml	3	
aliskiren fumarate (generic of TEKTURNA) TABS 150mg, 300mg QL (30 tabs / 30 days)	1	QL
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg	1	
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg	1	
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg	1	
amlodipine besylate-atorvastatin calcium tab 5-10 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 5-20 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 5-40 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 5-80 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 10-10 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 10-20 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 10-40 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 10-80 mg (generic of CADUET)	1	
ATTRUBY TBPK 356mg QL (112 tabs / 28 days)	4	NDS QL NM PA
BAXFENDY TABS 1mg, 2mg QL (30 tabs / 30 days)	3	QL PA
BIDIL TAB	3	
CADUET TAB 5-10MG	3	
CADUET TAB 5-20MG	3	
CADUET TAB 5-40MG	3	
CADUET TAB 5-80MG	3	
CADUET TAB 10-10MG	3	
CADUET TAB 10-20MG	3	
CADUET TAB 10-40MG	3	
CADUET TAB 10-80MG	3	
CAMZYOS CAPS 2.5mg, 5mg, 10mg, 15mg QL (30 caps / 30 days)	4	NDS QL NM PA
clonidine (generic of CATAPRES-TTS-1) PTWK .1mg/24hr	1	
clonidine (generic of CATAPRES-TTS-2) PTWK .2mg/24hr	1	
clonidine (generic of CATAPRES-TTS-3) PTWK .3mg/24hr	1	
clonidine TB24 .17mg	1	
clonidine hcl TABS .05mg, .1mg, .2mg, .3mg	1	
CORLANOR SOLN 5mg/5ml QL (450 mL / 30 days)	2	QL
CORLANOR TABS 5mg, 7.5mg QL (60 tabs / 30 days)	3	QL
DEMSER CAPS 250mg	4	NDS NM PA
digoxin SOLN .05mg/ml	1	
digoxin (generic of LANOXIN) SOLN .25mg/ml; TABS 62.5mcg	1	

Drug Name	Drug Tier	Requirements/ Limits
digoxin (generic of LANOXIN) TABS 125mcg, 250mcg QL (30 tabs / 30 days)	1	QL
droxidopa (generic of NORTHERA) CAPS 100mg QL (90 caps / 30 days)	1	QL NM PA
droxidopa (generic of NORTHERA) CAPS 200mg, 300mg QL (180 caps / 30 days)	4	NDS QL NM PA
EPINEPHRINE SOLN 1mg/ml	3	
epinephrine (generic of ADRENALIN) SOLN 1mg/ml	1	
epinephrine (generic of EPINEPHRINE HCL) SOLN 1mg/ml	1	
guanfacine hcl TABS 1mg, 2mg PA applies if 65 years and older	2	PA
hydralazine hcl SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg	1	
INPEFA TABS 200mg, 400mg QL (30 tabs / 30 days)	3	QL
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (generic of BIDIL)	1	
ivabradine hcl (generic of CORLANOR) TABS 5mg, 7.5mg QL (60 tabs / 30 days)	1	QL
JAVADIN SOLN .02mg/ml	3	
LANOXIN SOLN .25mg/ml; TABS 62.5mcg	3	
LANOXIN TABS 125mcg, 250mcg QL (30 tabs / 30 days)	3	QL
LANOXIN PEDIATRIC SOLN .1mg/ml	3	
LODOCO TABS .5mg QL (30 tabs / 30 days)	3	QL PA
methyldopa TABS 250mg, 500mg PA applies if 65 years and older	3	PA
metyrosine CAPS 250mg	4	NDS NM PA
midodrine hcl TABS 2.5mg, 5mg, 10mg	1	
minoxidil TABS 2.5mg, 10mg	1	
MYQORZO TABS 5mg, 10mg, 15mg, 20mg QL (30 tabs / 30 days)	4	NDS QL NM PA
NEXICLON XR TB24 .17mg	3	
NORTHERA CAPS 100mg QL (90 caps / 30 days)	4	NDS QL NM PA
NORTHERA CAPS 200mg, 300mg QL (180 caps / 30 days)	4	NDS QL NM PA
phenoxybenzamine hcl CAPS 10mg	4	NDS PA
ranolazine TB12 500mg, 1000mg	1	
REDEMPLO SOSY 25mg/0.5ml QL (1 syringe / 90 days)	4	NDS QL NM PA
TEKTURNA TABS 150mg, 300mg QL (30 tabs / 30 days)	3	QL
TRYNGOLZA SOAJ 50mg/0.8ml QL (1 pen / 30 days)	4	NDS QL NM PA
TRYNGOLZA SOAJ 80mg/0.8ml QL (1 autoinjector / 30 days)	4	NDS QL NM PA
TRYVIO TABS 12.5mg QL (30 tabs / 30 days)	3	QL PA
VERQUVO TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	2	QL PA
VYNDAMAX CAPS 61mg QL (30 caps / 30 days)	4	NDS QL NM PA
VYNDAQEL CAPS 20mg QL (120 caps / 30 days)	4	NDS QL NM PA
NITRATES		
isosorbide dinitrate TABS 5mg, 10mg, 20mg, 30mg	1	
isosorbide dinitrate TABS 40mg	1	ST
isosorbide mononitrate TABS 10mg, 20mg; TB24 30mg, 60mg, 120mg	1	
nitro-bid OINT 2%	1	

Drug Name	Tier	Requirements/ Limits
NITRO-DUR PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	3	
NITRO-DUR PT24 .3mg/hr, .8mg/hr	4	NDS
nitroglycerin OINT 2%; PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	1	
nitroglycerin (generic of NITROLINGUAL) SOLN .4mg/spray	1	
nitroglycerin (generic of NITROSTAT) SUBL .3mg, .4mg, .6mg	1	
NITROLINGUAL SOLN .4mg/spray	3	
NITROSTAT SUBL .3mg, .4mg, .6mg	3	
PULMONARY ARTERIAL HYPERTENSION		
ADCIRCA TABS 20mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg QL (90 tabs / 30 days)	4	NDS QL NM PA
alyq (generic of ADCIRCA) TABS 20mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ambrisentan (generic of LETAIRIS) TABS 5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
bosentan (generic of TRACLEER) TABS 62.5mg, 125mg QL (60 tabs / 30 days)	4	NDS QL NM PA
bosentan (generic of TRACLEER) TBSO 32mg QL (120 tabs / 30 days)	4	NDS QL NM PA
epoprostenol sodium (generic of VELETRI) SOLR .5mg, 1.5mg	4	NDS B/D NM
LETAIRIS TABS 5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
macitentan (generic of OPSUMIT) TABS 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
OPSUMIT TABS 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
OPSYNVI TAB 10-20MG QL (30 tabs / 30 days)	4	NDS QL NM PA
OPSYNVI TAB 10-40MG QL (30 tabs / 30 days)	4	NDS QL NM PA
ORENITRAM TBCR .25mg, 1mg, 2.5mg, 5mg	4	NDS NM PA
ORENITRAM TBCR .125mg	3	NM PA
ORENITRAM TAB MONTH 1	4	NDS NM PA
ORENITRAM TAB MONTH 2	4	NDS NM PA
ORENITRAM TAB MONTH 3	4	NDS NM PA
REMODULIN SOLN 8mg/20ml, 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	4	NDS NM PA
REVATIO SOLN 10mg/12.5ml	4	NDS NM PA
REVATIO TABS 20mg QL (360 tabs / 30 days)	4	NDS QL NM PA
sildenafil citrate (pulmonary hypertension) (generic of REVATIO) SOLN 10mg/12.5ml	4	NDS NM PA
sildenafil citrate (pulmonary hypertension) SUSR 10mg/ml QL (784 mL / 30 days)	4	NDS QL NM PA
sildenafil citrate (pulmonary hypertension) (generic of REVATIO) TABS 20mg QL (360 tabs / 30 days)	1	QL NM PA
tadalafil (pulmonary hypertension) (generic of ADCIRCA) TABS 20mg QL (60 tabs / 30 days)	1	QL NM PA
TADLIQ SUSP 20mg/5ml QL (300 mL / 30 days)	4	NDS QL NM PA
TRACLEER TABS 62.5mg, 125mg QL (60 tabs / 30 days)	4	NDS QL NM PA
TRACLEER TBSO 32mg QL (120 tabs / 30 days)	4	NDS QL NM PA
treprostinil SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	4	NDS NM PA
TYVASO SOLN .6mg/ml	4	NDS NM PA
TYVASO DPI INSTITUTIONAL POWD 80mcg QL (112 cartridges / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
TYVASO DPI MAINTENANCE KI POWD 16mcg, 32mcg, 48mcg, 64mcg, 80mcg QL (112 cartridges / 28 days)	4	NDS QL NM PA
TYVASO DPI POW 16-32-48 QL (252 cartridges / 28 days)	4	NDS QL NM PA
TYVASO DPI POW 48-80MCG QL (224 cartridges / 28 days)	4	NDS QL NM PA
TYVASO DPI POW MAIN KIT 32-64MCG QL (224 cartridges / 28 days)	4	NDS QL NM PA
TYVASO DPI POW MAIN KIT 48-64MCG QL (224 cartridges / 28 days)	4	NDS QL NM PA
TYVASO REFILL KIT SOLN .6mg/ml	4	NDS NM PA
TYVASO STARTER KIT SOLN .6mg/ml	4	NDS NM PA
UPTRAVI SOLR 1800mcg	4	NDS NM PA
UPTRAVI TABS 100mcg, 150mcg QL (280 tabs / 28 days)	4	NDS QL NM PA
UPTRAVI TABS 200mcg QL (140 tabs / 28 days)	4	NDS QL NM PA
UPTRAVI TABS 400mcg, 600mcg, 800mcg, 1000mcg, 1200mcg, 1400mcg, 1600mcg QL (60 tabs / 30 days)	4	NDS QL NM PA
UPTRAVI PACK TAB 200/800 QL (1 pack / 28 days)	4	NDS QL NM PA
VELETRI SOLR .5mg, 1.5mg	4	NDS B/D NM
WINREVAIR KIT 45mg, 60mg QL (2 vials / 21 days)	4	NDS QL NM PA
YUTREPIA CAPS 26.5mcg, 53mcg, 79.5mcg QL (140 caps / 28 days)	4	NDS QL NM PA
YUTREPIA CAPS 106mcg QL (224 caps / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
CENTRAL NERVOUS SYSTEM		
ANTIANXIETY		
alprazolam (generic of XANAX) TABS .25mg, .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
alprazolam TB24 2mg, 3mg QL (90 tabs / 30 days) PA applies if 65 years and older	1	QL PA
alprazolam TB24 .5mg, 1mg QL (150 tabs / 30 days) PA applies if 65 years and older	1	QL PA
alprazolam TBDP .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
alprazolam TBDP .25mg QL (120 tabs / 30 days)	1	QL
ALPRAZOLAM INTENSOL CONC 1mg/ml QL (300 mL / 30 days)	3	QL
ATIVAN SOLN 2mg/ml, 4mg/ml	3	
ATIVAN TABS .5mg, 1mg, 2mg QL (150 tabs / 30 days)	4	NDS QL
BUCAPSOL CAPS 5mg, 7.5mg, 10mg QL (60 caps / 30 days)	4	NDS QL
BUCAPSOL CAPS 15mg QL (120 caps / 30 days)	4	NDS QL
buspirone hcl TABS 2.5mg, 12.5mg QL (60 tabs / 30 days)	4	NDS QL
buspirone hcl TABS 5mg, 7.5mg, 10mg, 15mg, 30mg	1	
chlordiazepoxide hcl CAPS 5mg, 10mg, 25mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
fluvoxamine maleate CP24 100mg, 150mg QL (60 caps / 30 days)	1	QL
fluvoxamine maleate TABS 25mg, 50mg, 100mg	1	

Drug Name	Drug Tier	Requirements/ Limits
lorazepam CONC 2mg/ml QL (150 mL / 30 days)	1	QL
lorazepam (generic of ATIVAN) SOLN 4mg/ml, 20mg/10ml	1	
lorazepam (generic of ATIVAN) TABS .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
lorazepam intensol CONC 2mg/ml QL (150 mL / 30 days)	1	QL
LOREEV XR CS24 1mg, 1.5mg, 2mg QL (150 caps / 30 days) PA applies if 65 years and older	3	QL PA
LOREEV XR CS24 3mg QL (90 caps / 30 days) PA applies if 65 years and older	3	QL PA
oxazepam CAPS 10mg, 15mg, 30mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
XANAX TABS .25mg, .5mg, 1mg, 2mg QL (150 tabs / 30 days)	3	QL
XANAX XR TB24 2mg, 3mg QL (90 tabs / 30 days) PA applies if 65 years and older	3	QL PA
ANTIDEMENTIA		
ARICEPT TABS 5mg QL (30 tabs / 30 days)	3	QL
ARICEPT TABS 10mg, 23mg	3	
donepezil hydrochloride (generic of ARICEPT) TABS 5mg QL (30 tabs / 30 days)	1	QL
donepezil hydrochloride (generic of ARICEPT) TABS 10mg, 23mg	1	
donepezil hydrochloride TBDP 5mg QL (30 tabs / 30 days)	1	QL
donepezil hydrochloride TBDP 10mg	1	
EXELON PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr QL (30 patches / 30 days)	3	QL
galantamine hydrobromide CP24 8mg, 16mg, 24mg QL (30 caps / 30 days)	1	QL
galantamine hydrobromide SOLN 4mg/ml QL (200 mL / 30 days)	1	QL
galantamine hydrobromide TABS 4mg, 8mg, 12mg QL (60 tabs / 30 days)	1	QL
LEQEMBI IQLIK SOAJ 250mg/1.25ml QL (8 pens / 28 days)	4	NDS QL NM PA
LEQEMBI IQLIK SOAJ 360mg/1.8ml QL (4 pens / 28 days)	4	NDS QL NM PA
memantine hcl CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg PA applies if 29 years and younger	1	PA
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack PA applies if 29 years and younger	1	PA
memantine hcl-donepezil hcl cap er 24hr 14-10 mg (generic of NAMZARIC)	1	
memantine hcl-donepezil hcl cap er 24hr 21-10 mg (generic of NAMZARIC)	1	
memantine hcl-donepezil hcl cap er 24hr 28-10 mg (generic of NAMZARIC)	1	
NAMZARIC CAP 7-10MG	3	
NAMZARIC CAP 14-10MG	3	
NAMZARIC CAP 21-10MG	3	
NAMZARIC CAP 28-10MG	3	
rivastigmine (generic of EXELON) PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr QL (30 patches / 30 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
rivastigmine tartrate CAPS 1.5mg, 3mg, 4.5mg, 6mg QL (60 caps / 30 days)	1	QL
ZUNVEYL TBEC 5mg, 10mg, 15mg QL (60 tabs / 30 days)	3	QL PA
ANTIDEPRESSANTS		
amitriptyline hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg PA applies if 65 years and older	2	PA
amoxapine TABS 25mg, 50mg, 100mg, 150mg PA applies if 65 years and older	2	PA
ANAFRANIL CAPS 25mg, 50mg, 75mg	4	NDS PA
APLENZIN TB24 174mg QL (60 tabs / 30 days)	4	NDS QL ST
APLENZIN TB24 348mg, 522mg QL (30 tabs / 30 days)	4	NDS QL ST
AUVELITY TAB 45-105MG QL (60 tabs / 30 days)	3	QL
AUVELITY TAB TITRATIO QL (2 packs / year)	4	NDS QL
bupropion hcl TABS 75mg, 100mg	1	
bupropion hcl (generic of WELLBUTRIN SR) TB12 100mg, 150mg, 200mg QL (60 tabs / 30 days)	1	QL
bupropion hcl (generic of WELLBUTRIN XL) TB24 150mg QL (60 tabs / 30 days)	1	QL
bupropion hcl (generic of WELLBUTRIN XL) TB24 300mg QL (30 tabs / 30 days)	1	QL
bupropion hcl TB24 450mg QL (30 tabs / 30 days)	1	QL ST
CELEXA TABS 10mg, 20mg, 40mg	3	
CITALOPRAM HYDROBROMIDE CAPS 30mg QL (30 caps / 30 days)	3	QL ST
citalopram hydrobromide (generic of CITALOPRAM HYDROBROMIDE) CAPS 30mg QL (30 caps / 30 days)	1	QL ST
citalopram hydrobromide SOLN 10mg/5ml	1	
citalopram hydrobromide (generic of CELEXA) TABS 10mg, 20mg, 40mg	1	
clomipramine hcl (generic of ANAFRANIL) CAPS 25mg, 50mg, 75mg	3	PA
desipramine hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg PA applies if 65 years and older	3	PA
DESVENLAFAXINE ER TB24 50mg, 100mg QL (30 tabs / 30 days)	3	QL
desvenlafaxine succinate (generic of PRISTIQ) TB24 25mg, 50mg, 100mg QL (30 tabs / 30 days)	1	QL
doxepin hcl CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml PA applies if 65 years and older	2	PA
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg QL (60 caps / 30 days)	3	QL PA
duloxetine hcl CPEP 20mg QL (120 caps / 30 days)	1	QL
duloxetine hcl CPEP 30mg QL (90 caps / 30 days)	1	QL
duloxetine hcl CPEP 40mg, 60mg QL (60 caps / 30 days)	1	QL
DULOXETINE HYDROCHLORIDE CPEP 80mg, 90mg, 120mg QL (30 caps / 30 days)	3	QL

Drug Name	Tier	Requirements/ Limits
EFFEXOR XR CP24 37.5mg, 75mg, 150mg	3	
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr QL (30 patches / 30 days)	4	NDS QL PA
ESCITALOPRAM OXALATE CAPS 15mg QL (30 caps / 30 days)	3	QL
escitalopram oxalate SOLN 5mg/5ml	1	
escitalopram oxalate (generic of LEXAPRO) TABS 5mg, 10mg, 20mg	1	
EXXUA TB24 18.2mg, 36.3mg, 54.5mg, 72.6mg QL (30 tabs / 30 days)	4	NDS QL PA
EXXUA TITRATION PACK TB24 18.2mg QL (2 packs / year)	4	NDS QL PA
FETZIMA CP24 20mg, 40mg QL (60 caps / 30 days)	3	QL PA
FETZIMA CP24 80mg, 120mg QL (30 caps / 30 days)	3	QL PA
FETZIMA CAP TITRATIO QL (2 packs / year)	3	QL PA
fluoxetine hcl CAPS 10mg, 20mg, 40mg; SOLN 20mg/5ml	1	
fluoxetine hcl CPDR 90mg QL (4 caps / 28 days)	1	QL
fluoxetine hcl TABS 10mg, 60mg QL (30 tabs / 30 days)	1	QL
fluoxetine hcl TABS 20mg QL (120 tabs / 30 days)	1	QL
fluoxetine hcl (pmdd) TABS 10mg QL (30 tabs / 30 days) (generic of SARAFEM)	1	QL
fluoxetine hcl (pmdd) TABS 20mg QL (120 tabs / 30 days) (generic of SARAFEM)	1	QL
FORFIVO XL TB24 450mg QL (30 tabs / 30 days)	3	QL ST
imipramine hcl TABS 10mg, 25mg, 50mg PA applies if 65 years and older	1	PA
imipramine pamoate CAPS 75mg, 100mg, 125mg, 150mg PA applies if 65 years and older	3	PA
LEXAPRO TABS 5mg, 10mg, 20mg	3	
MARPLAN TABS 10mg QL (180 tabs / 30 days)	3	QL
mirtazapine TABS 7.5mg, 45mg	1	
mirtazapine (generic of REMERON) TABS 15mg, 30mg	1	
mirtazapine (generic of REMERON SOLTAB) TBDP 15mg, 30mg, 45mg	1	
NARDIL TABS 15mg	3	
nefazodone hcl TABS 50mg, 100mg, 150mg, 200mg, 250mg	1	
NORPRAMIN TABS 10mg, 25mg PA applies if 65 years and older	3	PA
nortriptyline hcl (generic of PAMELOR) CAPS 10mg, 25mg, 50mg, 75mg	1	
nortriptyline hcl SOLN 10mg/5ml	3	
PARNATE TABS 10mg	4	NDS
paroxetine hcl SUSP 10mg/5ml QL (900 mL / 30 days) PA applies if 65 years and older	3	QL PA
paroxetine hcl (generic of PAXIL) TABS 10mg, 20mg, 30mg, 40mg PA applies if 65 years and older	1	PA

Drug Name	Tier	Drug Requirements/ Limits
paroxetine hcl (generic of PAXIL CR) TB24 12.5mg, 25mg, 37.5mg QL (60 tabs / 30 days) PA applies if 65 years and older	3	QL PA
PAXIL TABS 10mg, 20mg, 30mg, 40mg PA applies if 65 years and older	3	PA
PAXIL CR TB24 12.5mg, 25mg, 37.5mg QL (60 tabs / 30 days) PA applies if 65 years and older	3	QL PA
perphenazine-amitriptyline tab 2-10 mg PA applies if 65 years and older	2	PA
perphenazine-amitriptyline tab 2-25 mg PA applies if 65 years and older	2	PA
perphenazine-amitriptyline tab 4-10 mg PA applies if 65 years and older	2	PA
perphenazine-amitriptyline tab 4-25 mg PA applies if 65 years and older	2	PA
perphenazine-amitriptyline tab 4-50 mg PA applies if 65 years and older	2	PA
phenelzine sulfate (generic of NARDIL) TABS 15mg	1	
PRISTIQ TB24 25mg, 50mg, 100mg QL (30 tabs / 30 days)	3	QL
protriptyline hcl TABS 5mg, 10mg	3	
RALDESY SOLN 10mg/ml QL (1800 mL / 30 days)	3	QL PA
REMERON TABS 15mg, 30mg	3	
REMERON SOLTAB TBDP 15mg, 30mg, 45mg	3	
sertraline hcl (generic of SERTRALINE HYDROCHLORIDE) CAPS 150mg, 200mg QL (30 caps / 30 days)	1	QL ST
sertraline hcl (generic of ZOLOFT) CONC 20mg/ml; TABS 25mg, 50mg, 100mg	1	
SERTRALINE HYDROCHLORIDE CAPS 150mg, 200mg QL (30 caps / 30 days)	3	QL ST
SPRAVATO 56MG DOSE SOPK 28mg/device	4	NDS NM PA
SPRAVATO 84MG DOSE SOPK 28mg/device	4	NDS NM PA
tranylcypromine sulfate (generic of PARNATE) TABS 10mg	1	
trazodone hcl TABS 50mg, 100mg, 150mg, 300mg	1	
trimipramine maleate CAPS 25mg, 50mg QL (120 caps / 30 days)	3	QL
trimipramine maleate CAPS 100mg QL (60 caps / 30 days)	3	QL
TRINTELLIX TABS 5mg, 10mg, 20mg QL (30 tabs / 30 days)	3	QL PA
VENLAFAXINE BESYLATE ER TB24 112.5mg QL (30 tabs / 30 days)	3	QL ST
venlafaxine hcl (generic of EFFEXOR XR) CP24 37.5mg, 75mg, 150mg	1	
venlafaxine hcl TABS 25mg, 37.5mg, 50mg, 75mg, 100mg; TB24 37.5mg, 75mg, 150mg	1	
venlafaxine hcl TB24 225mg QL (30 tabs / 30 days)	1	QL ST
VIIBRYD TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	3	QL
vilazodone hcl (generic of VIIBRYD) TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL

Drug Name	Tier	Requirements/ Limits
WELLBUTRIN SR TB12 100mg, 150mg, 200mg QL (60 tabs / 30 days)	3	QL ST
WELLBUTRIN XL TB24 150mg QL (60 tabs / 30 days)	4	NDS QL ST
WELLBUTRIN XL TB24 300mg QL (30 tabs / 30 days)	4	NDS QL ST
ZOLOFT CONC 20mg/ml; TABS 25mg, 50mg, 100mg	3	
ZURZUVAE CAPS 20mg, 25mg QL (28 caps / 14 days)	4	NDS QL NM PA
ZURZUVAE CAPS 30mg QL (14 caps / 14 days)	4	NDS QL NM PA
ANTIPARKINSONIAN AGENTS		
amantadine hcl CAPS 100mg QL (120 caps / 30 days)	1	QL
amantadine hcl SOLN 50mg/5ml; TABS 100mg	1	
APOKYN SOCT 30mg/3ml QL (20 cartridges / 30 days)	4	NDS QL NM PA
apomorphine hydrochloride SOCT 30mg/3ml QL (20 cartridges / 30 days)	4	NDS QL NM PA
AZILECT TABS .5mg, 1mg QL (30 tabs / 30 days)	4	NDS QL
benztropine mesylate SOLN 1mg/ml	1	
benztropine mesylate TABS .5mg, 1mg, 2mg PA applies if 65 years and older	1	PA
bromocriptine mesylate CAPS 5mg; TABS 2.5mg	1	
carb/levo orally disintegrating tab 10-100mg	1	
carb/levo orally disintegrating tab 25-100mg	1	
carb/levo orally disintegrating tab 25-250mg	1	
carbidopa (generic of LODOSYN) TABS 25mg	1	
carbidopa & levodopa cap er 23.75-95 mg	1	
carbidopa & levodopa cap er 36.25-145 mg	1	
carbidopa & levodopa cap er 48.75-195 mg	1	
carbidopa & levodopa cap er 61.25-245 mg	1	
carbidopa & levodopa tab 10-100 mg (generic of SINEMET)	1	
carbidopa & levodopa tab 25-100 mg (generic of SINEMET)	1	
carbidopa & levodopa tab 25-250 mg	1	
carbidopa & levodopa tab er 25-100 mg	1	
carbidopa & levodopa tab er 50-200 mg	1	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	1	
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	1	
carbidopa-levodopa-entacapone tabs 25-100-200 mg	1	
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	1	
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	1	
carbidopa-levodopa-entacapone tabs 50-200-200 mg	1	
CREXONT CAP 35-140MG	3	ST
CREXONT CAP 52.5-210	3	ST
CREXONT CAP 70-280MG	3	ST
CREXONT CAP 87.5-350	3	ST
DHIVY TAB 25-100MG	3	
DUOPA SUS 4.63-20	4	NDS B/D NM
entacapone TABS 200mg	1	
GOCOVRI CP24 68.5mg QL (30 caps / 30 days)	4	NDS QL NM PA
GOCOVRI CP24 137mg QL (60 caps / 30 days)	4	NDS QL NM PA
INBRIJA CAPS 42mg QL (300 caps / 30 days)	4	NDS QL NM PA
LODOSYN TABS 25mg	4	NDS

Drug Name	Tier	Requirements/ Limits
NEUPRO PT24 1mg/24hr, 2mg/24hr, 3mg/24hr, 4mg/24hr, 6mg/24hr, 8mg/24hr	3	PA
NOURIANZ TABS 20mg, 40mg QL (30 tabs / 30 days)	4	NDS QL NM
ONAPGO SOCT 98mg/20ml QL (30 cartridges / 30 days)	4	NDS QL NM PA
ONGENTYS CAPS 25mg, 50mg QL (30 caps / 30 days)	3	QL PA
PARLODEL CAPS 5mg; TABS 2.5mg	3	
pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg; TB24 .375mg, .75mg, 1.5mg, 2.25mg, 3mg, 3.75mg, 4.5mg	1	
rasagiline mesylate (generic of AZILECT) TABS .5mg, 1mg QL (30 tabs / 30 days)	1	QL
ropinirole hydrochloride TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg; TB24 2mg, 4mg, 6mg, 8mg, 12mg	1	
RYTARY CAP 95MG	3	ST
RYTARY CAP 145MG	3	ST
RYTARY CAP 195MG	3	ST
RYTARY CAP 245MG	3	ST
selegiline hcl CAPS 5mg; TABS 5mg	1	
SINEMET TAB 10-100MG	3	
SINEMET TAB 25-100MG	3	
trihexyphenidyl hcl SOLN .4mg/ml	2	
trihexyphenidyl hcl TABS 2mg, 5mg	1	
VYALEV INJ 12-240MG	4	NDS NM PA
XADAGO TABS 50mg, 100mg	4	NDS
ZELAPAR TBDP 1.25mg	4	NDS
ANTIPSYCHOTICS		
ABILIFY TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	3	QL
ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml QL (1 syringe / 56 days)	4	NDS QL
ABILIFY MAINTENA PRSY 300mg, 400mg QL (1 syringe / 28 days)	4	NDS QL
ABILIFY MAINTENA SRER 300mg, 400mg QL (1 injection / 28 days)	4	NDS QL
aripiprazole SOLN 1mg/ml QL (900 mL / 30 days)	1	QL
aripiprazole (generic of ABILIFY) TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	1	QL
aripiprazole TBDP 10mg, 15mg QL (60 tabs / 30 days)	1	QL ST
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml QL (1 syringe / 28 days)	4	NDS QL
ARISTADA PRSY 1064mg/3.9ml QL (1 syringe / 56 days)	4	NDS QL
ARISTADA INITIO PRSY 675mg/2.4ml	4	NDS
asenapine maleate (generic of SAPHRIS) SUBL 2.5mg, 5mg, 10mg QL (60 tabs / 30 days)	1	QL
BYSANTI TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg QL (60 tabs / 30 days)	4	NDS QL PA
BYSANTI TAB PACK A QL (2 packs / year)	3	QL PA
BYSANTI TAB PACK B QL (2 packs / year)	3	QL PA
BYSANTI TAB PACK C QL (2 packs / year)	3	QL PA
CAPLYTA CAPS 10.5mg, 21mg, 42mg QL (30 caps / 30 days)	4	NDS QL
chlorpromazine hcl CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	1	

Drug Name	Drug Tier	Requirements/ Limits
clozapine (generic of CLOZARIL) TABS 25mg	1	
clozapine TABS 50mg	1	
clozapine (generic of CLOZARIL) TABS 100mg QL (270 tabs / 30 days)	1	QL
clozapine TABS 200mg QL (120 tabs / 30 days)	1	QL
clozapine TBDP 12.5mg, 25mg	1	PA
clozapine TBDP 100mg QL (270 tabs / 30 days)	1	QL PA
clozapine TBDP 150mg QL (180 tabs / 30 days)	1	QL PA
clozapine TBDP 200mg QL (120 tabs / 30 days)	1	QL PA
CLOZARIL TABS 25mg	3	
CLOZARIL TABS 100mg QL (270 tabs / 30 days)	4	NDS QL
COBENFY CAP 50-20MG QL (60 caps / 30 days)	4	NDS QL
COBENFY CAP 100-20MG QL (60 caps / 30 days)	4	NDS QL
COBENFY CAP 125-30MG QL (60 caps / 30 days)	4	NDS QL
COBENFY STRT CAP PACK QL (2 packs / year)	4	NDS QL
ERZOFRI SUSY 39mg/0.25ml QL (1 syringe / 28 days)	3	QL
ERZOFRI SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml QL (1 syringe / 28 days)	4	NDS QL
ERZOFRI SUSY 351mg/2.25ml QL (2 syringes / year)	4	NDS QL
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg QL (60 tabs / 30 days)	4	NDS QL PA
FANAPT PAK PACK A QL (2 packs / year)	3	QL PA
FANAPT PAK PACK B QL (2 packs / year)	3	QL PA
FANAPT PAK PACK C QL (2 packs / year)	3	QL PA
fluphenazine decanoate SOLN 25mg/ml	1	
fluphenazine hcl CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	1	
GEODON CAPS 20mg, 40mg, 60mg, 80mg QL (60 caps / 30 days)	4	NDS QL
GEODON SOLR 20mg QL (6 injections / 3 days)	3	QL
haloperidol TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	1	
haloperidol decanoate SOLN 50mg/ml, 100mg/ml	1	
haloperidol lactate CONC 2mg/ml; SOLN 5mg/ml	1	
INVEGA TB24 3mg, 9mg QL (30 tabs / 30 days)	3	QL
INVEGA TB24 6mg QL (60 tabs / 30 days)	3	QL
INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml QL (1 injection / 180 days)	4	NDS QL
INVEGA SUSTENNA SUSY 39mg/0.25ml QL (1 syringe / 28 days)	3	QL
INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml QL (1 syringe / 28 days)	4	NDS QL
INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml QL (1 syringe / 90 days)	4	NDS QL
LATUDA TABS 20mg, 40mg, 60mg, 120mg QL (30 tabs / 30 days)	4	NDS QL
LATUDA TABS 80mg QL (60 tabs / 30 days)	4	NDS QL
loxapine succinate CAPS 5mg, 10mg, 25mg, 50mg	1	
lurasidone hcl (generic of LATUDA) TABS 20mg, 40mg, 60mg, 120mg QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
lurasidone hcl (generic of LATUDA) TABS 80mg	1	QL
QL (60 tabs / 30 days)		
LYBALVI TAB 5-10MG	4	NDS QL
QL (30 tabs / 30 days)		
LYBALVI TAB 10-10MG	4	NDS QL
QL (30 tabs / 30 days)		
LYBALVI TAB 15-10MG	4	NDS QL
QL (30 tabs / 30 days)		
LYBALVI TAB 20-10MG	4	NDS QL
QL (30 tabs / 30 days)		
molindone hcl TABS 5mg, 10mg, 25mg	1	
NUPLAZID CAPS 34mg	4	NDS QL NM PA
QL (30 caps / 30 days)		
NUPLAZID TABS 10mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
olanzapine (generic of ZYPREXA) SOLR 10mg	1	QL
QL (3 vials / 1 day)		
olanzapine (generic of ZYPREXA) TABS 2.5mg, 5mg, 10mg	1	QL
QL (60 tabs / 30 days)		
olanzapine (generic of ZYPREXA) TABS 7.5mg, 15mg, 20mg	1	QL
QL (30 tabs / 30 days)		
olanzapine (generic of ZYPREXA ZYDIS) TBDP 5mg, 15mg, 20mg	1	QL ST
QL (30 tabs / 30 days)		
olanzapine (generic of ZYPREXA ZYDIS) TBDP 10mg	1	QL ST
QL (60 tabs / 30 days)		
OPIPZA FILM 2mg, 5mg	4	NDS QL PA
QL (30 films / 30 days)		
OPIPZA FILM 10mg	4	NDS QL PA
QL (90 films / 30 days)		
paliperidone TB24 1.5mg	1	QL
QL (30 tabs / 30 days)		
paliperidone (generic of INVEGA) TB24 3mg, 9mg	1	QL
QL (30 tabs / 30 days)		
paliperidone (generic of INVEGA) TB24 6mg	1	QL
QL (60 tabs / 30 days)		

Drug Name	Drug Tier	Requirements/ Limits
perphenazine TABS 2mg, 4mg, 8mg, 16mg	1	
PERSERIS PRSY 90mg, 120mg	4	NDS QL
QL (1 syringe / 30 days)		
pimozide TABS 1mg, 2mg	1	
quetiapine fumarate (generic of SEROQUEL) TABS 25mg	1	QL
QL (180 tabs / 30 days)		
quetiapine fumarate (generic of SEROQUEL) TABS 50mg, 100mg, 200mg	1	QL
QL (90 tabs / 30 days)		
quetiapine fumarate TABS 150mg	1	QL
QL (90 tabs / 30 days)		
quetiapine fumarate (generic of SEROQUEL) TABS 300mg, 400mg	1	QL
QL (60 tabs / 30 days)		
quetiapine fumarate (generic of SEROQUEL XR) TB24 50mg, 300mg, 400mg	1	QL PA
QL (60 tabs / 30 days)		
quetiapine fumarate (generic of SEROQUEL XR) TB24 150mg, 200mg	1	QL PA
QL (30 tabs / 30 days)		
REXULTI TABS 3mg, 4mg	4	NDS QL
QL (30 tabs / 30 days)		
REXULTI TABS .25mg, .5mg, 1mg, 2mg	4	NDS QL
QL (60 tabs / 30 days)		
RISPERDAL SOLN 1mg/ml	3	QL
QL (240 mL / 30 days)		
RISPERDAL TABS .5mg, 1mg, 2mg, 3mg, 4mg	3	
RISPERDAL CONSTA SRER 12.5mg	3	QL
QL (2 injections / 28 days)		
RISPERDAL CONSTA SRER 25mg, 37.5mg, 50mg	4	NDS QL
QL (2 injections / 28 days)		
risperidone (generic of RISPERDAL) SOLN 1mg/ml	1	QL
QL (240 mL / 30 days)		

Drug Name	Tier	Requirements/ Limits
risperidone (generic of RISPERDAL) TABS .5mg, 1mg, 2mg, 3mg, 4mg	1	
risperidone TABS .25mg	1	
risperidone TBDP 1mg, 2mg, 3mg QL (60 tabs / 30 days)	1	QL ST
risperidone TBDP 4mg QL (120 tabs / 30 days)	1	QL ST
risperidone TBDP .25mg, .5mg QL (90 tabs / 30 days)	1	QL ST
risperidone microspheres (generic of RISPERDAL CONSTA) SRER 12.5mg, 25mg QL (2 injections / 28 days)	1	QL
risperidone microspheres (generic of RISPERDAL CONSTA) SRER 37.5mg, 50mg QL (2 injections / 28 days)	4	NDS QL
RYKINDO SRER 25mg QL (2 vials / 28 days)	4	NDS QL PA
SAPHRIS SUBL 2.5mg, 5mg, 10mg QL (60 tabs / 30 days)	4	NDS QL
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr QL (30 patches / 30 days)	4	NDS QL
SEROQUEL TABS 25mg QL (180 tabs / 30 days)	3	QL
SEROQUEL TABS 50mg, 100mg, 200mg QL (90 tabs / 30 days)	3	QL
SEROQUEL TABS 300mg QL (60 tabs / 30 days)	3	QL
SEROQUEL XR TB24 50mg, 300mg, 400mg QL (60 tabs / 30 days)	3	QL PA
SEROQUEL XR TB24 150mg, 200mg QL (30 tabs / 30 days)	3	QL PA
thioridazine hcl TABS 10mg, 25mg, 50mg, 100mg	1	
thiothixene CAPS 1mg, 2mg, 5mg, 10mg	1	
trifluoperazine hcl TABS 1mg, 2mg, 5mg, 10mg	1	
UZEDY SUSY 50mg/0.14ml, 75mg/0.21ml, 100mg/0.28ml, 125mg/0.35ml QL (1 syringe / 30 days)	4	NDS QL
UZEDY SUSY 150mg/0.42ml, 200mg/0.56ml, 250mg/0.7ml QL (1 syringe / 60 days)	4	NDS QL
VERSACLOZ SUSP 50mg/ml QL (600 mL / 30 days)	4	NDS QL PA
VRAYLAR CAPS 1.5mg QL (60 caps / 30 days)	4	NDS QL
VRAYLAR CAPS .5mg, .75mg, 3mg, 4.5mg, 6mg QL (30 caps / 30 days)	4	NDS QL
ziprasidone hcl (generic of GEODON) CAPS 20mg, 40mg, 60mg, 80mg QL (60 caps / 30 days)	1	QL
ziprasidone mesylate (generic of GEODON) SOLR 20mg QL (6 injections / 3 days)	1	QL
ZYPREXA SOLR 10mg QL (3 vials / 1 day)	3	QL
ZYPREXA TABS 2.5mg, 5mg, 10mg QL (60 tabs / 30 days)	3	QL
ZYPREXA TABS 7.5mg QL (30 tabs / 30 days)	3	QL
ZYPREXA TABS 15mg, 20mg QL (30 tabs / 30 days)	4	NDS QL
ZYPREXA RELPREVV SUSR 210mg QL (2 vials / 28 days)	3	QL NM PA
ZYPREXA RELPREVV SUSR 300mg QL (2 vials / 28 days)	4	NDS QL NM PA
ZYPREXA RELPREVV SUSR 405mg QL (1 vial / 28 days)	4	NDS QL NM PA
ZYPREXA ZYDIS TBDP 5mg QL (30 tabs / 30 days)	3	QL ST

Drug Name	Tier	Requirements/ Limits
ZYPREXA ZYDIS TBDP 10mg QL (60 tabs / 30 days)	3	QL ST
ZYPREXA ZYDIS TBDP 15mg, 20mg QL (30 tabs / 30 days)	4	NDS QL ST
ANTISEIZURE AGENTS		
APTIOM TABS 200mg, 400mg QL (30 tabs / 30 days)	4	NDS QL
APTIOM TABS 600mg, 800mg QL (60 tabs / 30 days)	4	NDS QL
BANZEL SUSP 40mg/ml QL (2400 mL / 30 days)	4	NDS QL PA
BANZEL TABS 200mg QL (480 tabs / 30 days)	4	NDS QL PA
BANZEL TABS 400mg QL (240 tabs / 30 days)	4	NDS QL PA
brivaracetam (generic of BRIVIACT) SOLN 10mg/ml QL (600 mL / 30 days)	1	QL PA
brivaracetam (generic of BRIVIACT) SOLN 50mg/5ml	1	PA
brivaracetam (generic of BRIVIACT) TABS 10mg, 25mg, 50mg, 75mg, 100mg QL (60 tabs / 30 days)	1	QL PA
BRIVIACT SOLN 10mg/ml QL (600 mL / 30 days)	4	NDS QL PA
BRIVIACT SOLN 50mg/5ml	3	PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg QL (60 tabs / 30 days)	4	NDS QL PA
carbamazepine CHEW 100mg, 200mg	1	
carbamazepine (generic of CARBATROL) CP12 100mg, 200mg, 300mg	1	
carbamazepine (generic of TEGRETOL) SUSP 100mg/5ml; TABS 200mg	1	
carbamazepine (generic of TEGRETOL-XR) TB12 100mg, 200mg, 400mg	1	
CARBATROL CP12 100mg, 200mg, 300mg	3	
CELONTIN CAPS 300mg	3	
clobazam (generic of ONFI) SUSP 2.5mg/ml QL (480 mL / 30 days)	1	QL PA
clobazam (generic of ONFI) TABS 10mg, 20mg QL (60 tabs / 30 days)	1	QL PA
clonazepam (generic of KLONOPIN) TABS 2mg QL (300 tabs / 30 days)	1	QL
clonazepam (generic of KLONOPIN) TABS .5mg, 1mg QL (90 tabs / 30 days)	1	QL
clonazepam TBDP 2mg QL (300 tabs / 30 days)	1	QL
clonazepam TBDP .125mg, .25mg, .5mg, 1mg QL (90 tabs / 30 days)	1	QL
clorazepate dipotassium TABS 3.75mg, 7.5mg, 15mg QL (180 tabs / 30 days) PA applies if 65 years and older	1	QL PA
DEPAKOTE TBEC 125mg, 250mg, 500mg	3	
DEPAKOTE ER TB24 250mg, 500mg	3	
DEPAKOTE SPRINKLES CSDR 125mg	3	
DIACOMIT CAPS 250mg QL (360 caps / 30 days)	4	NDS QL NM PA
DIACOMIT CAPS 500mg QL (180 caps / 30 days)	4	NDS QL NM PA
DIACOMIT PACK 250mg QL (360 packets / 30 days)	4	NDS QL NM PA
DIACOMIT PACK 500mg QL (180 packets / 30 days)	4	NDS QL NM PA
diazepam SOLN 5mg/5ml QL (1200 mL / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA

Drug Name	Tier	Requirements/ Limits
diazepam (generic of VALIUM) TABS 2mg, 5mg, 10mg QL (120 tabs / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA
diazepam (anticonvulsant) GEL 2.5mg, 10mg, 20mg	1	
diazepam inj SOLN 5mg/ml	1	
diazepam intensol CONC 5mg/ml QL (240 mL / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA
DILANTIN CAPS 30mg, 100mg	3	
DILANTIN INFATABS CHEW 50mg	3	
DILANTIN-125 SUSP 125mg/5ml	3	
divalproex sodium (generic of DEPAKOTE SPRINKLES) CSDR 125mg	1	
divalproex sodium (generic of DEPAKOTE ER) TB24 250mg, 500mg	1	
divalproex sodium (generic of DEPAKOTE) TBEC 125mg, 250mg, 500mg	1	
ELEPSIA XR TB24 1000mg	3	
ELEPSIA XR TB24 1500mg	4	NDS
EPIDIOLEX SOLN 100mg/ml QL (600 mL / 30 days)	4	NDS QL NM PA
EPRONTIA SOLN 25mg/ml QL (480 mL / 30 days)	3	QL PA
eslicarbazepine acetate (generic of APTIOM) TABS 200mg, 400mg QL (30 tabs / 30 days)	1	QL
eslicarbazepine acetate (generic of APTIOM) TABS 600mg, 800mg QL (60 tabs / 30 days)	1	QL
ethosuximide (generic of ZARONTIN) CAPS 250mg; SOLN 250mg/5ml	1	
felbamate SUSP 600mg/5ml	1	
felbamate (generic of FELBATOL) TABS 400mg, 600mg	1	
FELBATOL TABS 400mg, 600mg	4	NDS
FINTEPLA SOLN 2.2mg/ml QL (360 mL / 30 days)	4	NDS QL NM PA
FYCOMPA SUSP .5mg/ml QL (680 mL / 28 days)	4	NDS QL PA
FYCOMPA TABS 2mg QL (60 tabs / 30 days)	3	QL PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg QL (30 tabs / 30 days)	4	NDS QL PA
gabapentin (generic of NEURONTIN) CAPS 100mg, 300mg QL (360 caps / 30 days)	1	QL
gabapentin CAPS 200mg QL (60 caps / 30 days)	1	QL
gabapentin (generic of NEURONTIN) CAPS 400mg QL (270 caps / 30 days)	1	QL
gabapentin (generic of NEURONTIN) SOLN 250mg/5ml, 300mg/6ml QL (2160 mL / 30 days)	1	QL
gabapentin (generic of NEURONTIN) TABS 600mg QL (180 tabs / 30 days)	1	QL
gabapentin (generic of NEURONTIN) TABS 800mg QL (120 tabs / 30 days)	1	QL
GABARONE TABS 100mg QL (360 tabs / 30 days)	4	NDS QL PA
GABARONE TABS 400mg QL (270 tabs / 30 days)	4	NDS QL PA
KEPPRA SOLN 100mg/ml, 500mg/5ml; TABS 500mg, 750mg, 1000mg	4	NDS
KEPPRA TABS 250mg	3	
KEPPRA XR TB24 500mg, 750mg	4	NDS
KLONOPIN TABS 2mg QL (300 tabs / 30 days)	3	QL
KLONOPIN TABS .5mg, 1mg QL (90 tabs / 30 days)	3	QL

Drug Name	Drug Tier	Requirements/ Limits
lacosamide (generic of VIMPAT) SOLN 200mg/20ml	1	
lacosamide (generic of VIMPAT) TABS 50mg QL (120 tabs / 30 days)	1	QL
lacosamide (generic of VIMPAT) TABS 100mg, 150mg, 200mg QL (60 tabs / 30 days)	1	QL
lacosamide oral (generic of VIMPAT) SOLN 10mg/ml QL (1200 mL / 30 days)	1	QL
LAMICTAL TABS 25mg, 100mg, 150mg, 200mg	3	
LAMICTAL CHEWABLE DISPERS CHEW 5mg, 25mg	4	NDS
LAMICTAL ODT TBDP 25mg, 50mg, 100mg, 200mg	4	NDS ST
LAMICTAL ODT KIT BLUE	3	
LAMICTAL ODT KIT GREEN	3	
LAMICTAL ODT KIT ORANGE	3	
LAMICTAL STARTER KIT (35 X 25MG TABS) KIT 25mg	3	
LAMICTAL STARTER KIT (42 X 25MG TABS & 7 X 100MG TAB)	3	
LAMICTAL STARTER KIT (84 X 25MG TABS & 14 X 100MG TABS)	3	
LAMICTAL XR TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	4	NDS ST
LAMICTAL XR KIT	3	
lamotrigine (generic of LAMICTAL CHEWABLE DISPERS) CHEW 5mg, 25mg	1	
lamotrigine (generic of LAMICTAL) TABS 25mg, 100mg, 150mg, 200mg	1	
lamotrigine (generic of LAMICTAL XR) TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	1	ST
lamotrigine (generic of LAMICTAL ODT) TBDP 25mg, 50mg, 100mg, 200mg	1	ST
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (generic of LAMICTAL STARTER/NOT TAKI)	1	
lamotrigine tab 35 x 25 mg starter kit (generic of LAMICTAL STARTER/TAKING V) KIT 25mg	1	
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (generic of LAMICTAL STARTER/TAKING C)	4	NDS
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (generic of LAMICTAL ODT)	1	
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (generic of LAMICTAL ODT)	1	
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (generic of LAMICTAL ODT)	1	
LEVETIR/NACL INJ 5MG/ML	3	
LEVETIR/NACL INJ 10MG/ML	3	
LEVETIR/NACL INJ 15MG/ML	3	
levetiracetam (generic of KEPPRA) SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg	1	
levetiracetam TB3D 250mg QL (360 tabs / 30 days)	1	QL
levetiracetam TB3D 500mg QL (180 tabs / 30 days)	1	QL
levetiracetam (generic of KEPPRA XR) TB24 500mg, 750mg	1	
levetiracetam in sodium chloride iv soln 500 mg/100ml (generic of LEVETIRACETAM/SODIUM CHLO)	1	
levetiracetam in sodium chloride iv soln 1000 mg/100ml (generic of LEVETIRACETAM/SODIUM CHLO)	1	

Drug Name	Drug Tier	Requirements/ Limits
levetiracetam in sodium chloride iv soln 1500 mg/100ml (generic of LEVETIRACETAM/SODIUM CHLO)	1	
LYRICA CAPS 25mg, 50mg, 75mg, 100mg, 150mg QL (120 caps / 30 days)	3	QL
LYRICA CAPS 200mg QL (90 caps / 30 days)	3	QL
LYRICA CAPS 225mg, 300mg QL (60 caps / 30 days)	3	QL
LYRICA SOLN 20mg/ml QL (900 mL / 30 days) PA applies if 65 years and older	3	QL PA
methsuximide (generic of CELONTIN) CAPS 300mg	1	
MOTPOLY XR CP24 100mg QL (60 caps / 30 days)	3	QL PA
MOTPOLY XR CP24 150mg, 200mg QL (60 caps / 30 days)	4	NDS QL PA
MYSOLINE TABS 50mg, 250mg	4	NDS
NAYZILAM SOLN 5mg/0.1ml QL (10 nasal units / 30 days)	3	QL
NEURONTIN CAPS 100mg, 300mg QL (360 caps / 30 days)	3	QL
NEURONTIN CAPS 400mg QL (270 caps / 30 days)	3	QL
NEURONTIN SOLN 250mg/5ml QL (2160 mL / 30 days)	3	QL
NEURONTIN TABS 600mg QL (180 tabs / 30 days)	4	NDS QL
NEURONTIN TABS 800mg QL (120 tabs / 30 days)	4	NDS QL
ONFI SUSP 2.5mg/ml QL (480 mL / 30 days)	4	NDS QL PA
ONFI TABS 10mg, 20mg QL (60 tabs / 30 days)	4	NDS QL PA
oxcarbazepine (generic of TRILEPTAL) SUSP 300mg/5ml; TABS 150mg, 300mg, 600mg	1	
oxcarbazepine (generic of OXTELLAR XR) TB24 150mg, 300mg	1	PA
oxcarbazepine (generic of OXTELLAR XR) TB24 600mg	4	NDS PA
OXTELLAR XR TB24 150mg	3	PA
OXTELLAR XR TB24 300mg, 600mg	4	NDS PA
perampanel (generic of FYCOMPA) SUSP .5mg/ml QL (680 mL / 28 days)	4	NDS QL PA
perampanel (generic of FYCOMPA) TABS 2mg QL (60 tabs / 30 days)	1	QL PA
perampanel (generic of FYCOMPA) TABS 4mg, 6mg, 8mg, 10mg, 12mg QL (30 tabs / 30 days)	1	QL PA
phenobarbital ELIX 20mg/5ml QL (1500 mL / 30 days) PA applies if 65 years and older	3	QL PA
phenobarbital TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg QL (120 tabs / 30 days) PA applies if 65 years and older	2	QL PA
phenobarbital sodium SOLN 65mg/ml, 130mg/ml PA applies if 65 years and older	3	PA
phenytek CAPS 200mg, 300mg	1	
phenytoin (generic of DILANTIN INFATABS) CHEW 50mg	1	
phenytoin (generic of DILANTIN-125) SUSP 125mg/5ml	1	
phenytoin sodium SOLN 50mg/ml	1	

Drug Name	Tier	Requirements/ Limits
phenytoin sodium extended (generic of DILANTIN) CAPS 100mg	1	
phenytoin sodium extended CAPS 200mg, 300mg	1	
pregabalin (generic of LYRICA) CAPS 25mg, 50mg, 75mg, 100mg, 150mg QL (120 caps / 30 days)	1	QL
pregabalin (generic of LYRICA) CAPS 200mg QL (90 caps / 30 days)	1	QL
pregabalin (generic of LYRICA) CAPS 225mg, 300mg QL (60 caps / 30 days)	1	QL
pregabalin (generic of LYRICA) SOLN 20mg/ml QL (900 mL / 30 days) PA applies if 65 years and older	1	QL PA
primidone (generic of MYSOLINE) TABS 50mg, 250mg	1	
primidone TABS 125mg	1	
relgaabi CAPS 200mg QL (60 caps / 30 days)	1	QL
relgaabi (generic of NEURONTIN) CAPS 300mg QL (360 caps / 30 days)	1	QL
relgaabi (generic of NEURONTIN) CAPS 400mg QL (270 caps / 30 days)	1	QL
roweepra (generic of KEPPRA) TABS 500mg	1	
rufinamide (generic of BANZEL) SUSP 40mg/ml QL (2400 mL / 30 days)	4	NDS QL PA
rufinamide (generic of BANZEL) TABS 200mg QL (480 tabs / 30 days)	1	QL PA
rufinamide (generic of BANZEL) TABS 400mg QL (240 tabs / 30 days)	4	NDS QL PA
SABRIL PACK 500mg QL (180 packets / 30 days)	4	NDS QL NM PA
SABRIL TABS 500mg QL (180 tabs / 30 days)	4	NDS QL NM PA
SPRITAM TB3D 250mg QL (360 tabs / 30 days)	3	QL
SPRITAM TB3D 500mg QL (180 tabs / 30 days)	3	QL
SPRITAM TB3D 750mg QL (120 tabs / 30 days)	3	QL
SPRITAM TB3D 1000mg QL (90 tabs / 30 days)	3	QL
SUBVENITE SUSP 10mg/ml	4	NDS ST
subvenite (generic of LAMICTAL) TABS 25mg, 100mg, 150mg, 200mg	1	
subvenite starter kit/blu (generic of LAMICTAL STARTER/TAKING V) KIT 25mg	1	
subvenite starter kit/gre (generic of LAMICTAL STARTER/TAKING C)	4	NDS
subvenite starter kit/ora (generic of LAMICTAL STARTER/NOT TAKI)	1	
SYMPAZAN FILM 5mg, 10mg, 20mg QL (60 films / 30 days)	4	NDS QL PA
TEGRETOL SUSP 100mg/5ml; TABS 200mg	3	
TEGRETOL-XR TB12 100mg, 200mg, 400mg	3	
tiagabine hcl TABS 2mg, 4mg, 12mg, 16mg	1	
TOPAMAX TABS 25mg	3	
TOPAMAX TABS 50mg, 100mg, 200mg	4	NDS
TOPAMAX SPRINKLE CPSP 15mg	3	
TOPAMAX SPRINKLE CPSP 25mg	4	NDS
topiramate (generic of TROKENDI XR) CP24 25mg QL (480 caps / 30 days)	1	QL PA
topiramate (generic of TROKENDI XR) CP24 50mg QL (240 caps / 30 days)	1	QL PA

Drug Name	Tier	Requirements/ Limits
topiramate (generic of TROKENDI XR) CP24 100mg QL (120 caps / 30 days)	1	QL PA
topiramate (generic of TROKENDI XR) CP24 200mg QL (60 caps / 30 days)	1	QL PA
topiramate (generic of TOPAMAX SPRINKLE) CPSP 15mg, 25mg	1	
topiramate CPSP 50mg	1	
topiramate CS24 25mg QL (480 caps / 30 days)	1	QL PA
topiramate CS24 50mg QL (240 caps / 30 days)	1	QL PA
topiramate CS24 100mg QL (120 caps / 30 days)	1	QL PA
topiramate CS24 150mg, 200mg QL (60 caps / 30 days)	1	QL PA
topiramate (generic of EPRONTIA) SOLN 25mg/ml QL (480 mL / 30 days)	1	QL PA
topiramate (generic of TOPAMAX) TABS 25mg, 50mg, 100mg, 200mg	1	
TRILEPTAL SUSP 300mg/5ml; TABS 300mg, 600mg	4	NDS
TRILEPTAL TABS 150mg	3	
TROKENDI XR CP24 25mg QL (480 caps / 30 days)	3	QL PA
TROKENDI XR CP24 50mg QL (240 caps / 30 days)	3	QL PA
TROKENDI XR CP24 100mg QL (120 caps / 30 days)	4	NDS QL PA
TROKENDI XR CP24 200mg QL (60 caps / 30 days)	4	NDS QL PA
VALIUM TABS 2mg, 5mg, 10mg QL (120 tabs / 30 days) PA applies if 65 years and older when greater than 5 day supply	3	QL PA
valproate sodium SOLN 100mg/ml, 250mg/5ml	1	
valproic acid CAPS 250mg	1	

Drug Name	Tier	Requirements/ Limits
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml QL (10 blister packs / 30 days)	3	QL
vigabatrin (generic of SABRIL) PACK 500mg QL (180 packets / 30 days)	4	NDS QL NM PA
vigabatrin (generic of SABRIL) TABS 500mg QL (180 tabs / 30 days)	4	NDS QL NM PA
vigadrone (generic of SABRIL) PACK 500mg QL (180 packets / 30 days)	4	NDS QL NM PA
vigadrone (generic of SABRIL) TABS 500mg QL (180 tabs / 30 days)	4	NDS QL NM PA
VIGAFYDE SOLN 100mg/ml QL (900 mL / 30 days)	4	NDS QL NM PA
VIMPAT SOLN 10mg/ml QL (1200 mL / 30 days)	4	NDS QL
VIMPAT SOLN 200mg/20ml	4	NDS
VIMPAT TABS 50mg QL (120 tabs / 30 days)	3	QL
VIMPAT TABS 100mg, 150mg, 200mg QL (60 tabs / 30 days)	4	NDS QL
XCOPRI TABS 25mg, 50mg, 100mg QL (30 tabs / 30 days)	4	NDS QL
XCOPRI TABS 150mg, 200mg QL (60 tabs / 30 days)	4	NDS QL
XCOPRI PAK 12.5-25 QL (28 tabs / 28 days)	3	QL

Drug Name	Drug Tier	Requirements/ Limits
XCOPRI PAK 50-100MG QL (28 tabs / 28 days)	4	NDS QL
XCOPRI PAK 100-150 QL (56 tabs / 28 days)	4	NDS QL
XCOPRI PAK 150-200MG (MAINTENANCE) QL (56 tabs / 28 days)	4	NDS QL
XCOPRI PAK 150-200MG (TITRATION) QL (28 tabs / 28 days)	4	NDS QL
ZARONTIN CAPS 250mg; SOLN 250mg/5ml	3	
ZONEGRAN CAPS 25mg, 100mg	4	NDS
ZONISADE SUSP 100mg/5ml QL (900 mL / 30 days)	4	NDS QL PA
zonisamide (generic of ZONEGRAN) CAPS 25mg, 100mg	1	
zonisamide CAPS 50mg	1	
ZTALMY SUSP 50mg/ml QL (1100 mL / 30 days)	4	NDS QL NM PA
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
ADDERALL TAB 5MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 7.5MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 10MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 12.5MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 15MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 20MG QL (90 tabs / 30 days)	3	QL PA
ADDERALL TAB 30MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL XR CAP 5MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 10MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 15MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 20MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 25MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 30MG QL (30 caps / 30 days)	3	QL PA
ADZENYS XR-ODT TBED 3.1mg, 6.3mg, 9.4mg QL (60 tabs / 30 days)	3	QL PA
ADZENYS XR-ODT TBED 12.5mg, 15.7mg, 18.8mg QL (30 tabs / 30 days)	3	QL PA
amphetamine (generic of ADZENYS XR-ODT) TBED 3.1mg, 6.3mg, 9.4mg QL (60 tabs / 30 days)	1	QL PA
amphetamine (generic of ADZENYS XR-ODT) TBED 12.5mg, 15.7mg, 18.8mg QL (30 tabs / 30 days)	1	QL PA
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine cap er 24hr 5 mg (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine cap er 24hr 10 mg (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
amphetamine-dextroamphetamine cap er 24hr 15 mg (generic of ADDERALL XR)	1	QL PA
QL (30 caps / 30 days)		
amphetamine-dextroamphetamine cap er 24hr 20 mg (generic of ADDERALL XR)	1	QL PA
QL (30 caps / 30 days)		
amphetamine-dextroamphetamine cap er 24hr 25 mg (generic of ADDERALL XR)	1	QL PA
QL (30 caps / 30 days)		
amphetamine-dextroamphetamine cap er 24hr 30 mg (generic of ADDERALL XR)	1	QL PA
QL (30 caps / 30 days)		
amphetamine-dextroamphetamine tab 5 mg (generic of ADDERALL)	1	QL PA
QL (60 tabs / 30 days)		
amphetamine-dextroamphetamine tab 7.5 mg (generic of ADDERALL)	1	QL PA
QL (60 tabs / 30 days)		
amphetamine-dextroamphetamine tab 10 mg (generic of ADDERALL)	1	QL PA
QL (60 tabs / 30 days)		
amphetamine-dextroamphetamine tab 12.5 mg (generic of ADDERALL)	1	QL PA
QL (60 tabs / 30 days)		
amphetamine-dextroamphetamine tab 15 mg (generic of ADDERALL)	1	QL PA
QL (60 tabs / 30 days)		
amphetamine-dextroamphetamine tab 20 mg (generic of ADDERALL)	1	QL PA
QL (90 tabs / 30 days)		
amphetamine-dextroamphetamine tab 30 mg (generic of ADDERALL)	1	QL PA
QL (60 tabs / 30 days)		
ARYNTA SOLN 10mg/ml	3	QL PA
QL (240 mL / 30 days)		
atomoxetine hcl CAPS 10mg, 18mg, 25mg	1	QL
QL (120 caps / 30 days)		
atomoxetine hcl CAPS 40mg	1	QL
QL (60 caps / 30 days)		
atomoxetine hcl CAPS 60mg, 80mg, 100mg	1	QL
QL (30 caps / 30 days)		
atomoxetine hcl SOLN 4mg/ml	1	QL
QL (700 mL / 28 days)		
ATONCY SOLN 4mg/ml	3	QL
QL (700 mL / 28 days)		
AZSTARYS CAP 26.1-5.2	3	QL PA
QL (30 caps / 30 days)		
AZSTARYS CAP 39.2-7.8	3	QL PA
QL (30 caps / 30 days)		
AZSTARYS CAP 52.3-10.	3	QL PA
QL (30 caps / 30 days)		
CONCERTA TBCR 18mg, 27mg, 36mg	3	QL PA
QL (60 tabs / 30 days)		
CONCERTA TBCR 54mg	3	QL PA
QL (30 tabs / 30 days)		
COTEMPLA XR-ODT TBED 8.6mg, 17.3mg, 25.9mg	3	QL PA
QL (60 tabs / 30 days)		
DAYTRANA PTCH 10mg/9hr, 15mg/9hr, 20mg/9hr, 30mg/9hr	3	QL PA
QL (30 patches / 30 days)		
DEXEDRINE CP24 10mg	4	NDS QL PA
QL (150 caps / 30 days)		
DEXEDRINE CP24 15mg	4	NDS QL PA
QL (120 caps / 30 days)		
dexmethylphenidate hcl (generic of FOCALIN XR) CP24 5mg, 10mg, 15mg, 20mg	1	QL PA
QL (60 caps / 30 days)		
dexmethylphenidate hcl (generic of FOCALIN XR) CP24 25mg, 30mg, 35mg, 40mg	1	QL PA
QL (30 caps / 30 days)		

Drug Name	Drug Tier	Requirements/ Limits
dexmethylphenidate hcl (generic of FOCALIN) TABS 2.5mg, 5mg	1	QL PA
QL (120 tabs / 30 days)		
dexmethylphenidate hcl (generic of FOCALIN) TABS 10mg	1	QL PA
QL (60 tabs / 30 days)		
dextroamphetamine sulfate CP24 5mg	1	QL PA
QL (150 caps / 30 days)		
dextroamphetamine sulfate (generic of DEXEDRINE) CP24 10mg	1	QL PA
QL (150 caps / 30 days)		
dextroamphetamine sulfate (generic of DEXEDRINE) CP24 15mg	1	QL PA
QL (120 caps / 30 days)		
dextroamphetamine sulfate TABS 2.5mg, 5mg, 7.5mg, 10mg	1	QL PA
QL (180 tabs / 30 days)		
dextroamphetamine sulfate TABS 15mg	1	QL PA
QL (120 tabs / 30 days)		
dextroamphetamine sulfate TABS 20mg	1	QL PA
QL (90 tabs / 30 days)		
dextroamphetamine sulfate TABS 30mg	1	QL PA
QL (60 tabs / 30 days)		
DYANAVEL XR SUER 2.5mg/ml	3	QL PA
QL (240 mL / 30 days)		
DYANAVEL XR TBCR 5mg	3	QL PA
QL (60 tabs / 30 days)		
DYANAVEL XR TBCR 10mg, 15mg, 20mg	3	QL PA
QL (30 tabs / 30 days)		
FOCALIN TABS 2.5mg, 5mg	3	QL PA
QL (120 tabs / 30 days)		
FOCALIN TABS 10mg	3	QL PA
QL (60 tabs / 30 days)		
FOCALIN XR CP24 5mg, 10mg, 15mg, 20mg	3	QL PA
QL (60 caps / 30 days)		
FOCALIN XR CP24 25mg, 30mg, 35mg, 40mg	3	QL PA
QL (30 caps / 30 days)		
guanfacine hcl (adhd) (generic of INTUNIV) TB24 1mg, 2mg, 4mg	2	QL PA
QL (30 tabs / 30 days)		
PA applies if 65 years and older		
guanfacine hcl (adhd) (generic of INTUNIV) TB24 3mg	2	QL PA
QL (60 tabs / 30 days)		
PA applies if 65 years and older		
INTUNIV TB24 1mg, 2mg, 4mg	3	QL PA
QL (30 tabs / 30 days)		
PA applies if 65 years and older		
INTUNIV TB24 3mg	3	QL PA
QL (60 tabs / 30 days)		
PA applies if 65 years and older		
JORNAY PM CP24 20mg, 40mg	3	QL PA
QL (60 caps / 30 days)		
JORNAY PM CP24 60mg, 80mg, 100mg	3	QL PA
QL (30 caps / 30 days)		
lisdexamfetamine dimesylate (generic of VYVANSE) CAPS 10mg, 20mg, 30mg	1	QL PA
QL (60 caps / 30 days)		
lisdexamfetamine dimesylate (generic of VYVANSE) CAPS 40mg, 50mg, 60mg, 70mg	1	QL PA
QL (30 caps / 30 days)		
lisdexamfetamine dimesylate (generic of VYVANSE) CHEW 10mg, 20mg, 30mg	1	QL PA
QL (60 tabs / 30 days)		
lisdexamfetamine dimesylate (generic of VYVANSE) CHEW 40mg, 50mg, 60mg	1	QL PA
QL (30 tabs / 30 days)		
METADATE CD CPCR 10mg, 20mg, 30mg	3	QL PA
QL (60 caps / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits
METADATE CD CPCR 40mg, 50mg, 60mg	3	QL PA
QL (30 caps / 30 days)		
METHYLIN SOLN 5mg/5ml	3	QL PA
QL (1800 mL / 30 days)		
METHYLIN SOLN 10mg/5ml	3	QL PA
QL (900 mL / 30 days)		
methylphenidate (generic of DAYTRANA) PTCH 10mg/9hr, 15mg/9hr, 20mg/9hr, 30mg/9hr	1	QL PA
QL (30 patches / 30 days)		
METHYLPHENIDATE ER ODT TBED 8.6mg, 17.3mg, 25.9mg	3	QL PA
QL (60 tabs / 30 days)		
methylphenidate hcl CHEW 2.5mg, 5mg, 10mg	1	QL PA
QL (180 tabs / 30 days)		
methylphenidate hcl CP24 10mg, 15mg, 20mg, 30mg	1	QL PA
QL (60 caps / 30 days)		
methylphenidate hcl (generic of RITALIN LA) CP24 40mg	1	QL PA
QL (30 caps / 30 days)		
methylphenidate hcl CP24 40mg, 50mg, 60mg	1	QL PA
QL (30 caps / 30 days)		
methylphenidate hcl (generic of METADATE CD) CPCR 10mg, 20mg, 30mg	1	QL PA
QL (60 caps / 30 days)		
methylphenidate hcl (generic of METADATE CD) CPCR 40mg, 50mg, 60mg	1	QL PA
QL (30 caps / 30 days)		
methylphenidate hcl (generic of METHYLIN) SOLN 5mg/5ml	1	QL PA
QL (1800 mL / 30 days)		
methylphenidate hcl (generic of METHYLIN) SOLN 10mg/5ml	1	QL PA
QL (900 mL / 30 days)		
methylphenidate hcl (generic of RITALIN) TABS 5mg, 10mg	1	QL PA
QL (180 tabs / 30 days)		
methylphenidate hcl (generic of RITALIN) TABS 20mg	1	QL PA
QL (90 tabs / 30 days)		
methylphenidate hcl TB24 18mg, 27mg, 36mg; TBCR 27mg, 36mg	1	QL PA
QL (60 tabs / 30 days)		
methylphenidate hcl TB24 54mg; TBCR 45mg, 54mg, 63mg, 72mg	1	QL PA
QL (30 tabs / 30 days)		
methylphenidate hcl TBCR 10mg, 20mg	1	QL PA
QL (90 tabs / 30 days)		
methylphenidate hcl (generic of CONCERTA) TBCR 18mg, 27mg, 36mg	1	QL PA
QL (60 tabs / 30 days)		
methylphenidate hcl (generic of CONCERTA) TBCR 54mg	1	QL PA
QL (30 tabs / 30 days)		
MYDAYIS CAP 12.5MG	3	QL PA
QL (30 caps / 30 days)		
MYDAYIS CAP 25MG	3	QL PA
QL (30 caps / 30 days)		
MYDAYIS CAP 37.5MG	3	QL PA
QL (30 caps / 30 days)		
MYDAYIS CAP 50MG	3	QL PA
QL (30 caps / 30 days)		
QELBREE CP24 100mg	3	QL PA
QL (180 caps / 30 days)		
QELBREE CP24 150mg	3	QL PA
QL (60 caps / 30 days)		
QELBREE CP24 200mg	3	QL PA
QL (90 caps / 30 days)		
QUILLICHEW ER CHER 20mg, 30mg	3	QL PA
QL (60 tabs / 30 days)		
QUILLICHEW ER CHER 40mg	3	QL PA
QL (30 tabs / 30 days)		
QUILLIVANT XR SRER 25mg/5ml	3	QL PA
QL (360 mL / 30 days)		
RELEXXII TBCR 18mg, 27mg, 36mg	3	QL PA
QL (60 tabs / 30 days)		

Drug Name	Tier	Requirements/ Limits
RELEXXII TBCR 45mg, 54mg, 63mg, 72mg QL (30 tabs / 30 days)	3	QL PA
RITALIN TABS 5mg, 10mg QL (180 tabs / 30 days)	3	QL PA
RITALIN TABS 20mg QL (90 tabs / 30 days)	3	QL PA
VYVANSE CAPS 10mg, 20mg, 30mg QL (60 caps / 30 days)	3	QL PA
VYVANSE CAPS 40mg, 50mg, 60mg, 70mg QL (30 caps / 30 days)	3	QL PA
VYVANSE CHEW 10mg, 20mg, 30mg QL (60 tabs / 30 days)	3	QL PA
VYVANSE CHEW 40mg, 50mg, 60mg QL (30 tabs / 30 days)	3	QL PA
XELSTRYM PTCH 4.5mg/9hr, 9mg/9hr, 13.5mg/9hr, 18mg/9hr QL (30 patches / 30 days)	3	QL PA
zenzedi TABS 2.5mg, 5mg, 7.5mg, 10mg QL (180 tabs / 30 days)	1	QL PA
zenzedi TABS 15mg QL (120 tabs / 30 days)	1	QL PA
zenzedi TABS 20mg QL (90 tabs / 30 days)	1	QL PA
zenzedi TABS 30mg QL (60 tabs / 30 days)	1	QL PA
HYPNOTICS		
AMBIEN TABS 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
AMBIEN CR TBCR 6.25mg, 12.5mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
BELSOMRA TABS 5mg, 10mg, 15mg, 20mg QL (30 tabs / 30 days)	2	QL
DAYVIGO TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
doxepin hcl (sleep) (generic of SILENOR) TABS 3mg, 6mg QL (30 tabs / 30 days)	1	QL
EDLUAR SUBL 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
estazolam TABS 1mg, 2mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	1	QL PA
eszopiclone (generic of LUNESTA) TABS 1mg, 2mg, 3mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
HETLIOZ CAPS 20mg QL (30 caps / 30 days)	4	NDS QL NM PA
HETLIOZ LQ SUSP 4mg/ml QL (158 ml / 30 days)	4	NDS QL NM PA
LUNESTA TABS 1mg, 2mg, 3mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
QUVIVIQ TABS 25mg, 50mg QL (30 tabs / 30 days)	3	QL
ramelteon (generic of ROZEREM) TABS 8mg QL (30 tabs / 30 days)	1	QL
RESTORIL CAPS 7.5mg, 22.5mg, 30mg QL (30 caps / 30 days) PA applies if 65 years and older	4	NDS QL PA
RESTORIL CAPS 15mg QL (60 caps / 30 days) PA applies if 65 years and older	4	NDS QL PA
ROZEREM TABS 8mg QL (30 tabs / 30 days)	3	QL

Drug Name	Tier	Requirements/ Limits
SILENOR TABS 3mg, 6mg QL (30 tabs / 30 days)	3	QL
tasimelteon (generic of HETLIOZ) CAPS 20mg QL (30 caps / 30 days)	4	NDS QL NM PA
temazepam (generic of RESTORIL) CAPS 7.5mg, 22.5mg, 30mg QL (30 caps / 30 days) PA applies if 65 years and older	1	QL PA
temazepam (generic of RESTORIL) CAPS 15mg QL (60 caps / 30 days) PA applies if 65 years and older	1	QL PA
triazolam TABS .25mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
triazolam TABS .125mg QL (60 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
zaleplon CAPS 5mg QL (30 caps / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
zaleplon CAPS 10mg QL (60 caps / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
ZOLPIDEM TARTRATE CAPS 7.5mg QL (30 caps / 30 days)	3	QL PA
zolpidem tartrate SUBL 1.75mg, 3.5mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
zolpidem tartrate (generic of AMBIEN) TABS 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	1	QL PA
zolpidem tartrate (generic of AMBIEN CR) TBCR 6.25mg, 12.5mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
MIGRAINE		
AIMOVIG SOAJ 70mg/ml, 140mg/ml QL (1 pen / 30 days)	2	QL NM PA
AJOVY SOAJ 225mg/1.5ml QL (3 pens / 90 days)	3	QL NM PA
AJOVY SOSY 225mg/1.5ml QL (3 syringes / 90 days)	3	QL NM PA
almotriptan malate TABS 6.25mg, 12.5mg QL (12 tabs / 30 days)	1	QL ST
BREKIYA SOAJ 1mg/ml QL (24 pens / 28 days)	4	NDS QL NM PA
CAFERGOT TAB 1-100MG QL (40 tabs / 28 days)	4	NDS QL PA
CAMBIA PACK 50mg QL (9 packets / 30 days)	4	NDS QL PA
diclofenac potassium (migraine) (generic of CAMBIA) PACK 50mg QL (9 packets / 30 days)	1	QL PA
dihydroergotamine mesylate SOLN 1mg/ml	4	NDS
dihydroergotamine mesylate SOLN 4mg/ml QL (8 mL / 30 days)	4	NDS QL PA
eletriptan hydrobromide (generic of RELPAX) TABS 20mg, 40mg QL (12 tabs / 30 days)	1	QL ST
ELYXYB SOLN 120mg/4.8ml QL (28.8 mL / 21 days)	4	NDS QL PA
EMGALITY SOAJ 120mg/ml QL (2 pens / 30 days)	2	QL NM PA

Drug Name	Tier	Requirements/ Limits
EMGALITY SOSY 100mg/ml QL (3 syringes / 30 days)	2	QL NM PA
EMGALITY SOSY 120mg/ml QL (2 syringes / 30 days)	2	QL NM PA
ERGOMAR SUBL 2mg QL (20 tabs / 28 days)	4	NDS QL PA
ergotamine w/ caffeine tab 1-100 mg QL (40 tabs / 28 days)	1	QL PA
frovatriptan succinate TABS 2.5mg QL (18 tabs / 30 days)	1	QL ST
IMITREX TABS 25mg, 50mg, 100mg QL (12 tabs / 30 days)	3	QL
IMITREX STATDOSE REFILL SOCT 4mg/0.5ml QL (18 injections / 30 days)	4	NDS QL
IMITREX STATDOSE REFILL SOCT 6mg/0.5ml QL (12 injections / 30 days)	4	NDS QL
IMITREX STATDOSE SYSTEM SOAJ 4mg/0.5ml QL (18 injections / 30 days)	4	NDS QL
IMITREX STATDOSE SYSTEM SOAJ 6mg/0.5ml QL (12 injections / 30 days)	4	NDS QL
MAXALT TABS 10mg QL (18 tabs / 30 days)	3	QL
MAXALT-MLT TBDP 10mg QL (18 tabs / 30 days)	3	QL
MIGERGOT QL (20 suppositories / 28 days)	4	NDS QL PA
naratriptan hcl TABS 1mg, 2.5mg QL (12 tabs / 30 days)	1	QL
NURTEC TBDP 75mg QL (16 tabs / 30 days)	2	QL PA
ONZETRA XSAIL EXHP 11mg/nosepc QL (16 nosepieces / 30 days)	4	NDS QL ST
QULIPTA TABS 10mg, 30mg, 60mg QL (30 tabs / 30 days)	2	QL PA
RELPAX TABS 20mg QL (12 tabs / 30 days)	3	QL ST
RELPAX TABS 40mg QL (12 tabs / 30 days)	4	NDS QL ST
REYVOW TABS 50mg QL (4 tabs / 30 days)	3	QL PA
REYVOW TABS 100mg QL (8 tabs / 30 days)	3	QL PA
RIZAFILM FILM 5mg, 10mg QL (18 films / 30 days)	3	QL
rizatriptan benzoate TABS 5mg; TBDP 5mg QL (18 tabs / 30 days)	1	QL
rizatriptan benzoate (generic of MAXALT) TABS 10mg QL (18 tabs / 30 days)	1	QL
rizatriptan benzoate (generic of MAXALT-MLT) TBDP 10mg QL (18 tabs / 30 days)	1	QL
sumatriptan SOLN 5mg/act QL (24 units / 30 days)	1	QL
sumatriptan SOLN 20mg/act QL (12 units / 30 days)	1	QL
sumatriptan succinate (generic of IMITREX STATDOSE SYSTEM) SOAJ 6mg/0.5ml QL (12 injections / 30 days)	1	QL
sumatriptan succinate SOLN 6mg/0.5ml QL (12 injections / 30 days)	1	QL
sumatriptan succinate (generic of IMITREX) TABS 25mg, 50mg, 100mg QL (12 tabs / 30 days)	1	QL
sumatriptan-naproxen sodium tab 85-500 mg (generic of TREXIMET) QL (9 tabs / 30 days)	1	QL ST
SYMBRAVO TAB 20-10MG QL (9 tabs / 30 days)	3	QL ST

Drug Name	Tier	Requirements/ Limits
TOSYMRA SOLN 10mg/act QL (18 units / 30 days)	3	QL ST
TREXIMET TAB 85-500MG QL (9 tabs / 30 days)	4	NDS QL ST
TRUDHESA AERS .725mg/act QL (12 mL / 28 days)	4	NDS QL PA
UBRELVY TABS 50mg, 100mg QL (16 tabs / 30 days)	2	QL PA
VYEPTI SOLN 100mg/ml	4	NDS NM PA
ZAVZPRET SOLN 10mg/act QL (6 nasal units / 21 days)	4	NDS QL PA
ZEMBRACE SYMTOUCH SOAJ 3mg/0.5ml QL (24 pens / 30 days)	4	NDS QL ST
zolmitriptan SOLN 2.5mg QL (12 units / 30 days)	1	QL ST
zolmitriptan (generic of ZOMIG) SOLN 5mg QL (12 units / 30 days)	1	QL ST
zolmitriptan TABS 2.5mg, 5mg; TBDP 2.5mg, 5mg QL (12 tabs / 30 days)	1	QL ST
ZOMIG SOLN 2.5mg, 5mg QL (12 units / 30 days)	3	QL ST
zomig TABS 2.5mg, 5mg QL (12 tabs / 30 days)	1	QL ST
MISCELLANEOUS		
AMVUTTRA SOSY 25mg/0.5ml QL (1 syringe / 90 days)	4	NDS QL NM PA
AUSTEDO TABS 6mg QL (60 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO TABS 9mg, 12mg QL (120 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TB24 6mg QL (90 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TB24 12mg QL (120 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TB24 18mg, 30mg, 36mg, 42mg, 48mg QL (30 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TB24 24mg QL (60 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TAB TITR KIT QL (2 packs / year)	4	NDS QL NM PA
DAYBUE SOLN 200mg/ml QL (3600 mL / 30 days)	4	NDS QL NM PA
DAYBUE STIX PACK 5000mg, 6000mg QL (120 packets / 30 days)	4	NDS QL NM PA
DAYBUE STIX PACK 8000mg QL (60 packets / 30 days)	4	NDS QL NM PA
dextromethorphan hbr-quinidine sulfate cap 20-10 mg (generic of NUEDEXTA) QL (60 caps / 30 days)	4	NDS QL PA
DUVYZAT SUSP 8.86mg/ml QL (420 mL / 30 days)	4	NDS QL NM PA
edaravone SOLN 30mg/100ml	4	NDS NM PA
ENSPRYNG SOSY 120mg/ml	4	NDS NM PA
EQUETRO CP12 100mg, 200mg, 300mg	3	
EVRYSDI SOLR .75mg/ml; TABS 5mg	4	NDS NM PA
FIRDAPSE TABS 10mg QL (300 tabs / 30 days)	4	NDS QL NM PA
gabapentin (once-daily) (generic of GRALISE) TABS 300mg QL (180 tabs / 30 days)	1	QL PA
gabapentin (once-daily) (generic of GRALISE) TABS 450mg, 600mg QL (90 tabs / 30 days)	1	QL PA
gabapentin (once-daily) (generic of GRALISE) TABS 750mg, 900mg QL (60 tabs / 30 days)	1	QL PA
GRALISE TABS 300mg QL (180 tabs / 30 days)	3	QL PA
GRALISE TABS 450mg, 600mg QL (90 tabs / 30 days)	3	QL PA
GRALISE TABS 750mg, 900mg QL (60 tabs / 30 days)	3	QL PA

Drug Name	Tier	Requirements/ Limits
HORIZANT TBCR 300mg, 600mg QL (60 tabs / 30 days)	3	QL PA
lithium SOLN 8meq/5ml	1	
lithium carbonate CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 450mg	1	
lithium carbonate (generic of LITHOBID) TBCR 300mg	1	
LITHOBID TBCR 300mg	4	NDS
LYRICA CR TB24 82.5mg, 165mg QL (90 tabs / 30 days)	3	QL PA
LYRICA CR TB24 330mg QL (60 tabs / 30 days)	3	QL PA
MESTINON SOLN 60mg/5ml; TABS 60mg	4	NDS
MESTINON TIMESPAN TBCR 180mg	4	NDS
milnacipran hcl (generic of SAVELLA) TABS 12.5mg, 25mg, 50mg, 100mg QL (60 tabs / 30 days)	1	QL PA
milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak QL (2 packs / year)	1	QL PA
NUEDEXTA CAP 20-10MG QL (60 caps / 30 days)	4	NDS QL PA
paroxetine mesylate (vasomotor) CAPS 7.5mg QL (30 caps / 30 days) PA applies if 65 years and older	3	QL PA
pregabalin (once-daily) (generic of LYRICA CR) TB24 82.5mg, 165mg QL (90 tabs / 30 days)	1	QL PA
pregabalin (once-daily) (generic of LYRICA CR) TB24 330mg QL (60 tabs / 30 days)	1	QL PA
pyridostigmine bromide (generic of MESTINON) SOLN 60mg/5ml; TABS 60mg	1	
pyridostigmine bromide TABS 30mg	1	
pyridostigmine bromide (generic of MESTINON TIMESPAN) TBCR 180mg	1	
RADICAVA ORS SUSP 105mg/5ml QL (70 mL / 28 days)	4	NDS QL NM PA
RADICAVA ORS STARTER KIT SUSP 105mg/5ml QL (70 mL / 28 days)	4	NDS QL NM PA
riluzole TABS 50mg	1	
SAVELLA TABS 12.5mg, 25mg, 50mg, 100mg QL (60 tabs / 30 days)	3	QL PA
SAVELLA MIS TITR PAK QL (2 packs / year)	3	QL PA
SKYCLARYS CAPS 50mg QL (90 caps / 30 days)	4	NDS QL NM PA
tetrabenazine (generic of XENAZINE) TABS 12.5mg QL (90 tabs / 30 days)	1	QL NM PA
tetrabenazine (generic of XENAZINE) TABS 25mg QL (120 tabs / 30 days)	4	NDS QL NM PA
TIGLUTIK SUSP 50mg/10ml QL (600 mL / 30 days)	4	NDS QL NM PA
TONMYA SUBL 2.8mg QL (60 tabs / 30 days)	4	NDS QL PA
UPLIZNA SOLN 100mg/10ml	4	NDS NM PA
WAINUA SOAJ 45mg/0.8ml QL (1 pen / 30 days)	4	NDS QL NM PA
WAINUA SOSY 45mg/0.8ml QL (1 syringe / 30 days)	4	NDS QL NM PA
XENAZINE TABS 12.5mg QL (90 tabs / 30 days)	4	NDS QL NM PA
XENAZINE TABS 25mg QL (120 tabs / 30 days)	4	NDS QL NM PA
MULTIPLE SCLEROSIS AGENTS		
AMPYRA TB12 10mg QL (60 tabs / 30 days)	4	NDS QL NM PA
AUBAGIO TABS 7mg, 14mg QL (30 tabs / 30 days)	4	NDS QL NM PA
AVONEX PSKT 30mcg/0.5ml QL (4 syringes / 28 days)	4	NDS QL NM PA
AVONEX PEN AJKT 30mcg/0.5ml QL (4 injections / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
BAFIERTAM CPDR 95mg QL (120 caps / 30 days)	4	NDS QL NM PA
BETASERON KIT .3mg QL (14 kits / 28 days)	4	NDS QL NM PA
BRIUMVI SOLN 150mg/6ml	4	NDS NM PA
cladribine (4 tabs) (generic of MAVENCLAD) TBPK 10mg QL (16 tabs per lifetime)	4	NDS QL NM PA
cladribine (5 tabs) (generic of MAVENCLAD) TBPK 10mg QL (20 tabs per lifetime)	4	NDS QL NM PA
cladribine (6 tabs) (generic of MAVENCLAD) TBPK 10mg QL (24 tabs per lifetime)	4	NDS QL NM PA
cladribine (7 tabs) (generic of MAVENCLAD) TBPK 10mg QL (28 tabs per lifetime)	4	NDS QL NM PA
cladribine (8 tabs) (generic of MAVENCLAD) TBPK 10mg QL (32 tabs per lifetime)	4	NDS QL NM PA
cladribine (9 tabs) (generic of MAVENCLAD) TBPK 10mg QL (36 tabs per lifetime)	4	NDS QL NM PA
cladribine (10 tabs) (generic of MAVENCLAD) TBPK 10mg QL (40 tabs per lifetime)	4	NDS QL NM PA
COPAXONE SOSY 20mg/ml QL (30 syringes / 30 days)	4	NDS QL NM PA
COPAXONE SOSY 40mg/ml QL (12 syringes / 28 days)	4	NDS QL NM PA
dalfampridine (generic of AMPYRA) TB12 10mg QL (60 tabs / 30 days)	1	QL NM PA
dimethyl fumarate (generic of TECFIDERA) CPDR 120mg QL (14 caps / 7 days)	4	NDS QL NM PA
dimethyl fumarate (generic of TECFIDERA) CPDR 240mg QL (60 caps / 30 days)	4	NDS QL NM PA
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (generic of TECFIDERA STARTER PACK) QL (2 packs / year)	4	NDS QL NM PA
fingolimod hcl (generic of GILENYA) CAPS .5mg QL (30 caps / 30 days)	4	NDS QL NM PA
GILENYA CAPS .25mg, .5mg QL (30 caps / 30 days)	4	NDS QL NM PA
glatiramer acetate (generic of COPAXONE) SOSY 20mg/ml QL (30 syringes / 30 days)	4	NDS QL NM PA
glatiramer acetate (generic of COPAXONE) SOSY 40mg/ml QL (12 syringes / 28 days)	4	NDS QL NM PA
glatopa (generic of COPAXONE) SOSY 20mg/ml QL (30 syringes / 30 days)	4	NDS QL NM PA
glatopa (generic of COPAXONE) SOSY 40mg/ml QL (12 syringes / 28 days)	4	NDS QL NM PA
KESIMPTA SOAJ 20mg/0.4ml QL (16 pens / 365 days)	4	NDS QL NM PA
LEMTRADA SOLN 12mg/1.2ml	4	NDS NM PA
MAVENCLAD (4 TABS) TBPK 10mg QL (16 tabs per lifetime)	4	NDS QL NM PA
MAVENCLAD (5 TABS) TBPK 10mg QL (20 tabs per lifetime)	4	NDS QL NM PA
MAVENCLAD (6 TABS) TBPK 10mg QL (24 tabs per lifetime)	4	NDS QL NM PA
MAVENCLAD (7 TABS) TBPK 10mg QL (28 tabs per lifetime)	4	NDS QL NM PA
MAVENCLAD (8 TABS) TBPK 10mg QL (32 tabs per lifetime)	4	NDS QL NM PA
MAVENCLAD (9 TABS) TBPK 10mg QL (36 tabs per lifetime)	4	NDS QL NM PA
MAVENCLAD (10 TABS) TBPK 10mg QL (40 tabs per lifetime)	4	NDS QL NM PA
MAYZENT TABS 1mg, 2mg QL (30 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
MAYZENT TABS .25mg QL (112 tabs / 28 days)	4	NDS QL NM PA
MAYZENT STARTER PACK (7) TBPK .25mg QL (2 packs / year)	4	NDS QL NM PA
MAYZENT STARTER PACK (12) TBPK .25mg QL (2 packs / year)	4	NDS QL NM PA
OCREVUS SOLN 300mg/10ml	4	NDS NM PA
OCREVUS INJ ZUNOVO QL (23 mL / 180 days)	4	NDS QL NM PA
PLEGRIDY SOAJ 125mcg/0.5ml QL (2 pens / 28 days)	4	NDS QL NM PA
PLEGRIDY SOSY 125mcg/0.5ml QL (2 syringes / 28 days)	4	NDS QL NM PA
PLEGRIDY INJ STARTER QL (2 packs / year)	4	NDS QL NM PA
PLEGRIDY PEN INJ STARTER QL (2 packs / year)	4	NDS QL NM PA
PONVORY TABS 20mg QL (30 tabs / 30 days)	4	NDS QL NM PA
PONVORY TAB STARTER QL (2 packs / year)	4	NDS QL NM PA
REBIF SOSY 22mcg/0.5ml, 44mcg/0.5ml QL (12 syringes / 28 days)	4	NDS QL NM PA
REBIF REBIDO INJ TITRATN QL (12 injections / 28 days)	4	NDS QL NM PA
REBIF REBIDOSE SOAJ 22mcg/0.5ml, 44mcg/0.5ml QL (12 injections / 28 days)	4	NDS QL NM PA
REBIF TITRTN INJ PACK QL (12 syringes / 28 days)	4	NDS QL NM PA
TASCENSO ODT TBDP .25mg, .5mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TECFIDERA CPDR 120mg QL (14 caps / 7 days)	4	NDS QL NM PA
TECFIDERA CPDR 240mg QL (60 caps / 30 days)	4	NDS QL NM PA
TECFIDERA CAP STARTER QL (2 packs / year)	4	NDS QL NM PA
teriflunomide (generic of AUBAGIO) TABS 7mg, 14mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TYRUKO CONC 300mg/15ml	4	NDS NM PA
TYSABRI CONC 300mg/15ml	4	NDS NM PA
VUMERITY CPDR 231mg QL (120 caps / 30 days)	4	NDS QL NM PA
ZEPOSIA CAPS .92mg QL (30 caps / 30 days)	4	NDS QL NM PA
ZEPOSIA 7DAY CAP STR PACK QL (2 packs / year)	4	NDS QL NM PA
ZEPOSIA CAP STR KIT QL (2 packs / year)	4	NDS QL NM PA
MUSCULOSKELETAL THERAPY AGENTS		
ATMEKSI SUSP 750mg/5ml QL (900 mL / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
baclofen SOLN 5mg/5ml	1	PA
baclofen (generic of OZOBAX DS) SOLN 10mg/5ml	1	PA
baclofen (generic of FLEQSUVY) SUSP 25mg/5ml	4	NDS PA
baclofen TABS 5mg QL (90 tabs / 30 days)	1	QL
baclofen TABS 10mg, 15mg, 20mg	1	
BOTOX SOLR 100unit, 200unit	4	NDS PA
carisoprodol (generic of SOMA) TABS 250mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA

Drug Name	Tier	Requirements/ Limits
carisoprodol (generic of SOMA) TABS 350mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
cyclobenzaprine hcl TABS 5mg, 7.5mg, 10mg QL (90 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
DANTRIUM CAPS 25mg	3	
dantrolene sodium (generic of DANTRIUM) CAPS 25mg	1	
dantrolene sodium CAPS 50mg, 100mg	1	
DAXXIFY SOLR 100unit	3	NM PA
DYSPORT SOLR 300unit	3	NM PA
DYSPORT SOLR 500unit	4	NDS NM PA
fexmid TABS 7.5mg QL (90 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
FLEQSUVY SUSP 25mg/5ml	4	NDS PA
metaxalone TABS 400mg QL (240 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
METAXALONE TABS 640mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
metaxalone TABS 800mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
methocarbamol TABS 500mg QL (360 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
methocarbamol TABS 750mg QL (240 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
methocarbamol TABS 1000mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
MYOBLOC SOLN 2500unit/0.5ml, 5000unit/ml	3	NM PA
MYOBLOC SOLN 10000unit/2ml	4	NDS NM PA
ONTRALFY SOLN 2mg/5ml	3	
OZOBAX DS SOLN 10mg/5ml	4	NDS PA
SOMA TABS 250mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
SOMA TABS 350mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
tanlor TABS 1000mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
tizanidine hcl (generic of ZANAFLEX) CAPS 2mg, 4mg, 6mg; TABS 4mg	1	
tizanidine hcl CAPS 8mg	4	NDS
tizanidine hcl TABS 2mg	1	
XEOMIN SOLR 50unit	3	NM PA
XEOMIN SOLR 100unit, 200unit	4	NDS NM PA
ZANAFLEX CAPS 2mg, 4mg, 6mg; TABS 4mg	3	
ZANAFLEX CAPS 8mg	4	NDS
NARCOLEPSY/CATAPLEXY		
armodafinil (generic of NUVIGIL) TABS 50mg QL (60 tabs / 30 days)	1	QL PA

Drug Name	Drug Tier	Requirements/ Limits
armodafinil (generic of NUVIGIL) TABS 150mg, 200mg, 250mg QL (30 tabs / 30 days)	1	QL PA
LUMRYZ PACK 4.5gm, 6gm, 7.5gm, 9gm QL (30 packets / 30 days)	4	NDS QL NM PA
LUMRYZ PAK STARTER QL (2 packs / year)	4	NDS QL NM PA
modafinil (generic of PROVIGIL) TABS 100mg QL (30 tabs / 30 days)	1	QL PA
modafinil (generic of PROVIGIL) TABS 200mg QL (60 tabs / 30 days)	1	QL PA
NUVIGIL TABS 50mg QL (60 tabs / 30 days)	3	QL PA
NUVIGIL TABS 150mg, 200mg, 250mg QL (30 tabs / 30 days)	4	NDS QL PA
PROVIGIL TABS 100mg QL (30 tabs / 30 days)	4	NDS QL PA
PROVIGIL TABS 200mg QL (60 tabs / 30 days)	4	NDS QL PA
sodium oxybate (generic of XYREM) SOLN 500mg/ml QL (540 mL / 30 days)	4	NDS QL NM PA
SUNOSI TABS 75mg, 150mg QL (30 tabs / 30 days)	3	QL PA
WAKIX TABS 4.45mg, 17.8mg QL (60 tabs / 30 days)	4	NDS QL NM PA
XYREM SOLN 500mg/ml QL (540 mL / 30 days)	4	NDS QL NM PA
XYWAV SOL 0.5GM/ML QL (540 mL / 30 days)	4	NDS QL NM PA
PSYCHOTHERAPEUTIC-MISC		
acamprosate calcium TBEC 333mg	1	
BRIXADI SOSY 8mg/0.16ml, 16mg/0.32ml, 24mg/0.48ml, 32mg/0.64ml, 64mg/0.18ml, 96mg/0.27ml, 128mg/0.36ml	4	NDS NM
buprenorphine hcl SUBL 2mg QL (180 tabs / 30 days)	1	QL
buprenorphine hcl SUBL 8mg QL (120 tabs / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (generic of SUBOXONE) QL (180 films / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) (generic of SUBOXONE) QL (90 films / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) (generic of SUBOXONE) QL (120 films / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv) (generic of SUBOXONE) QL (90 films / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv) QL (180 tabs / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv) QL (120 tabs / 30 days)	1	QL
bupropion hcl (smoking deterrent) TB12 150mg QL (60 tabs / 30 days)	1	QL
CHANTIX TABS .5mg, 1mg QL (56 tabs / 28 days)	3	QL
CHANTIX CONTINUING MONTH TABS 1mg QL (56 tabs / 28 days)	3	QL
CHANTIX TAB 0.5& 1MG QL (2 packs / year)	3	QL
disulfiram TABS 250mg, 500mg	1	
KLOXXADO LIQD 8mg/0.1ml	2	
lofexidine hcl (generic of LUCEMYRA) TABS .18mg QL (228 tabs / 14 days)	4	NDS QL PA
naloxone hcl SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml	1	
naltrexone hcl TABS 50mg	1	
NICOTROL NS SOLN 10mg/ml	3	
OPVEE SOLN 2.7mg/0.1ml	3	

Drug Name	Tier	Requirements/ Limits
REXTOVY LIQD 4mg/0.25ml	3	
REZENOPY LIQD 10mg/0.11ml	3	
SUBLOCADE SOSY 100mg/0.5ml, 300mg/1.5ml	4	NDS NM
SUBOXONE MIS 2-0.5MG	3	QL
QL (180 films / 30 days)		
SUBOXONE MIS 4-1MG	3	QL
QL (90 films / 30 days)		
SUBOXONE MIS 8-2MG	3	QL
QL (120 films / 30 days)		
SUBOXONE MIS 12-3MG	3	QL
QL (90 films / 30 days)		
varenicline tartrate (generic of CHANTIX) TABS .5mg, 1mg	1	QL
QL (56 tabs / 28 days)		
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	1	QL
QL (2 packs / year)		
VIVITROL SUSR 380mg	4	NDS NM
ZUBSOLV SUB 0.7-0.18	3	QL
QL (90 tabs / 30 days)		
ZUBSOLV SUB 1.4-0.36	3	QL
QL (90 tabs / 30 days)		
ZUBSOLV SUB 2.9-0.71	3	QL
QL (90 tabs / 30 days)		
ZUBSOLV SUB 5.7-1.4	3	QL
QL (90 tabs / 30 days)		
ZUBSOLV SUB 8.6-2.1	3	QL
QL (60 tabs / 30 days)		
ZUBSOLV SUB 11.4-2.9	3	QL
QL (30 tabs / 30 days)		
ZURNAI SOAJ 1.5mg/0.5ml	3	
ENDOCRINE AND METABOLIC		
ANDROGENS		
AVEED SOLN 750mg/3ml	4	NDS NM PA
AZMIRO SOSY 200mg/ml	3	PA
danazol CAPS 50mg, 100mg, 200mg	1	
depo-testosterone SOLN 100mg/ml, 200mg/ml	1	PA
JATENZO CAPS 158mg, 198mg	3	QL PA
QL (120 caps / 30 days)		
JATENZO CAPS 237mg	4	NDS QL PA
QL (60 caps / 30 days)		
KYZATREX CAPS 150mg, 200mg	3	QL PA
QL (120 caps / 30 days)		
TESTIM GEL 50mg/5gm	3	QL PA
QL (300 gm / 30 days)		
testosterone GEL 12.5mg/act, 25mg/2.5gm, 50mg/5gm	1	QL PA
QL (300 gm / 30 days)		
testosterone GEL 20.25mg/1.25gm, 40.5mg/2.5gm	1	QL PA
QL (150 gm / 30 days)		
testosterone SOLN 30mg/act	1	QL PA
QL (180 mL / 30 days)		
testosterone cypionate SOLN 100mg/ml, 200mg/ml	1	PA
testosterone enanthate SOLN 200mg/ml	1	PA
testosterone pump (generic of ANDROGEL PUMP) GEL 20.25mg/act	1	QL PA
QL (150 gm / 30 days)		
TLANDO CAPS 112.5mg	3	QL PA
QL (120 caps / 30 days)		
VOGELXO GEL 50mg/5gm	3	QL PA
QL (300 gm / 30 days)		
VOGELXO PUMP GEL 12.5mg/act	3	QL PA
QL (300 gm / 30 days)		
XYOSTED SOAJ 50mg/0.5ml, 75mg/0.5ml, 100mg/0.5ml	3	PA
ANTIDIABETICS		
acarbose TABS 25mg, 50mg, 100mg	1	
ACTOPLUS MET TAB 15-850MG	3	QL
QL (90 tabs / 30 days)		
ACTOS TABS 15mg, 30mg, 45mg	3	QL
QL (30 tabs / 30 days)		
alogliptin benzoate TABS 6.25mg, 12.5mg, 25mg	3	QL ST
QL (30 tabs / 30 days)		
alogliptin-metformin hcl tab 12.5-500 mg	3	QL ST
QL (60 tabs / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits
alogliptin-metformin hcl tab 12.5-1000 mg QL (60 tabs / 30 days)	3	QL ST
alogliptin-pioglitazone tab 12.5-30 mg QL (30 tabs / 30 days)	3	QL ST
alogliptin-pioglitazone tab 25-15 mg QL (30 tabs / 30 days)	3	QL ST
alogliptin-pioglitazone tab 25-30 mg QL (30 tabs / 30 days)	3	QL ST
alogliptin-pioglitazone tab 25-45 mg QL (30 tabs / 30 days)	3	QL ST
BRYNOVIN SOLN 25mg/ml QL (120 mL / 30 days)	3	QL ST
dapagliflozin (generic of FARXIGA) TABS 5mg, 10mg QL (30 tabs / 30 days)	1	QL
dapagliflozin-metformin hcl tab er 24hr 5-500 mg (generic of XIGDUO XR) QL (60 tabs / 30 days)	1	QL
dapagliflozin-metformin hcl tab er 24hr 5-1000 mg (generic of XIGDUO XR) QL (60 tabs / 30 days)	1	QL
dapagliflozin-metformin hcl tab er 24hr 10-500 mg (generic of XIGDUO XR) QL (30 tabs / 30 days)	1	QL
dapagliflozin-metformin hcl tab er 24hr 10-1000 mg (generic of XIGDUO XR) QL (30 tabs / 30 days)	1	QL
dapagliflozin-saxagliptin tab 10-5 mg QL (30 tabs / 30 days)	3	QL
DUETACT TAB 30-2MG QL (30 tabs / 30 days)	3	QL
DUETACT TAB 30-4MG QL (30 tabs / 30 days)	3	QL
exenatide SOPN 5mcg/0.02ml, 10mcg/0.04ml QL (1 pen / 30 days)	1	QL PA
FARXIGA TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
glimepiride TABS 1mg, 2mg QL (90 tabs / 30 days)	1	QL
glimepiride TABS 3mg, 4mg QL (60 tabs / 30 days)	1	QL
glipizide TABS 2.5mg QL (480 tabs / 30 days)	1	QL
glipizide TABS 5mg QL (240 tabs / 30 days)	1	QL
glipizide TABS 10mg QL (120 tabs / 30 days)	1	QL
glipizide TABS 15mg QL (30 tabs / 30 days)	1	QL
glipizide TB24 2.5mg QL (90 tabs / 30 days)	1	QL
glipizide (generic of GLUCOTROL XL) TB24 5mg QL (90 tabs / 30 days)	1	QL
glipizide TB24 10mg QL (60 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 2.5-250 mg QL (240 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 2.5-500 mg QL (120 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 5-500 mg QL (120 tabs / 30 days)	1	QL
GLUCOTROL XL TB24 5mg QL (90 tabs / 30 days)	3	QL
GLYXAMBI TAB 10-5 MG QL (30 tabs / 30 days)	2	QL
GLYXAMBI TAB 25-5 MG QL (30 tabs / 30 days)	2	QL
INVOKAMET TAB 50-500MG QL (120 tabs / 30 days)	3	QL
INVOKAMET TAB 50-1000 QL (60 tabs / 30 days)	3	QL
INVOKAMET TAB 150-500 QL (60 tabs / 30 days)	3	QL
INVOKAMET TAB 150-1000 QL (60 tabs / 30 days)	3	QL
INVOKAMET XR TAB 50-500MG QL (120 tabs / 30 days)	3	QL
INVOKAMET XR TAB 50-1000 QL (60 tabs / 30 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits
INVOKAMET XR TAB 150-500	3	QL
QL (60 tabs / 30 days)		
INVOKAMET XR TAB 150-1000	3	QL
QL (60 tabs / 30 days)		
INVOKANA TABS 100mg	3	QL
QL (60 tabs / 30 days)		
INVOKANA TABS 300mg	3	QL
QL (30 tabs / 30 days)		
JANUMET TAB 50-500MG	2	QL
QL (60 tabs / 30 days)		
JANUMET TAB 50-1000	2	QL
QL (60 tabs / 30 days)		
JANUMET XR TAB 50-500MG	2	QL
QL (60 tabs / 30 days)		
JANUMET XR TAB 50-1000	2	QL
QL (60 tabs / 30 days)		
JANUMET XR TAB 100-1000	2	QL
QL (30 tabs / 30 days)		
JANUVIA TABS 25mg, 50mg, 100mg	2	QL
QL (30 tabs / 30 days)		
JARDIANCE TABS 10mg, 25mg	2	QL
QL (30 tabs / 30 days)		
JENTADUETO TAB 2.5-500	2	QL
QL (60 tabs / 30 days)		
JENTADUETO TAB 2.5-850	2	QL
QL (60 tabs / 30 days)		
JENTADUETO TAB 2.5-1000	2	QL
QL (60 tabs / 30 days)		
JENTADUETO TAB XR 2.5-1000MG	2	QL
QL (60 tabs / 30 days)		
JENTADUETO TAB XR 5-1000MG	2	QL
QL (30 tabs / 30 days)		
liraglutide (generic of VICTOZA) SOPN 6mg/ml	1	QL PA
QL (3 pens / 30 days)		
metformin hcl (generic of RIOMET) SOLN 500mg/5ml	1	QL ST
QL (765 mL / 30 days)		
metformin hcl TABS 500mg	1	QL
QL (150 tabs / 30 days)		
metformin hcl TABS 625mg	4	NDS QL ST
QL (120 tabs / 30 days)		
metformin hcl TABS 750mg	4	NDS QL ST
QL (90 tabs / 30 days)		
metformin hcl TABS 850mg	1	QL
QL (90 tabs / 30 days)		
metformin hcl TABS 1000mg	1	QL
QL (75 tabs / 30 days)		
metformin hcl TB24 500mg	1	QL
QL (120 tabs / 30 days) (generic of GLUCOPHAGE XR)		
metformin hcl TB24 500mg	1	QL PA
QL (120 tabs / 30 days) (generic of FORTAMET)		
metformin hcl TB24 500mg	1	QL PA
QL (120 tabs / 30 days) (generic of GLUMETZA)		
metformin hcl TB24 750mg	1	QL
QL (60 tabs / 30 days) (generic of GLUCOPHAGE XR)		
metformin hcl TB24 1000mg	1	QL PA
QL (60 tabs / 30 days) (generic of FORTAMET)		
metformin hcl TB24 1000mg	1	QL PA
QL (60 tabs / 30 days) (generic of GLUMETZA)		
miglitol TABS 25mg, 50mg, 100mg	1	
MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml	2	QL PA
QL (4 pens / 28 days)		
nateglinide TABS 60mg, 120mg	1	QL
QL (90 tabs / 30 days)		
OZEMPIC TABS 1.5mg, 4mg, 9mg	2	QL PA
QL (30 tabs / 30 days)		
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml	2	QL PA
QL (1 pen / 28 days)		
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	2	QL PA
QL (1 pen / 28 days)		

Drug Name	Drug Requirements/ Tier	Limits
OZEMPIC (2MG/DOSE) SOPN 8mg/3ml	2	QL PA
QL (1 pen / 28 days)		
pioglitazone hcl (generic of ACTOS) TABS 15mg, 30mg, 45mg	1	QL
QL (30 tabs / 30 days)		
pioglitazone hcl-glimepiride tab 30-2 mg (generic of DUETACT)	1	QL
QL (30 tabs / 30 days)		
pioglitazone hcl-glimepiride tab 30-4 mg (generic of DUETACT)	1	QL
QL (30 tabs / 30 days)		
pioglitazone hcl-metformin hcl tab 15-500 mg	1	QL
QL (90 tabs / 30 days)		
pioglitazone hcl-metformin hcl tab 15-850 mg (generic of ACTOPLUS MET)	1	QL
QL (90 tabs / 30 days)		
repaglinide TABS 2mg	1	QL
QL (240 tabs / 30 days)		
repaglinide TABS .5mg, 1mg	1	QL
QL (120 tabs / 30 days)		
RYBELSUS TABS 3mg, 7mg, 14mg	2	QL PA
QL (30 tabs / 30 days)		
saxagliptin hcl TABS 2.5mg, 5mg	1	QL
QL (30 tabs / 30 days)		
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg	1	QL
QL (60 tabs / 30 days)		
saxagliptin-metformin hcl tab er 24hr 5-500 mg	1	QL
QL (30 tabs / 30 days)		
saxagliptin-metformin hcl tab er 24hr 5-1000 mg	1	QL
QL (30 tabs / 30 days)		
SEGLUROMET TAB 2.5-500	3	QL
QL (120 tabs / 30 days)		
SEGLUROMET TAB 2.5-1000	3	QL
QL (60 tabs / 30 days)		
SEGLUROMET TAB 7.5-500	3	QL
QL (60 tabs / 30 days)		
SEGLUROMET TAB 7.5-1000	3	QL
QL (60 tabs / 30 days)		
sitagliptin TABS 25mg, 50mg, 100mg	1	QL
QL (30 tabs / 30 days)		
sitagliptin free base-metformin hcl tab 50-500 mg	1	QL
QL (60 tabs / 30 days)		
sitagliptin free base-metformin hcl tab 50-1000 mg	1	QL
QL (60 tabs / 30 days)		
sitagliptin free base-metformin hcl tab er 24hr 50-500 mg	1	QL
QL (60 tabs / 30 days)		
sitagliptin free base-metformin hcl tab er 24hr 50-1000 mg	1	QL
QL (60 tabs / 30 days)		
sitagliptin free base-metformin hcl tab er 24hr 100-1000 mg	1	QL
QL (30 tabs / 30 days)		
sitagliptin phosphate (generic of JANUVIA) TABS 25mg, 50mg, 100mg	1	QL
QL (30 tabs / 30 days)		
sitagliptin phosphate-metformin hcl tab 50-500 mg (generic of JANUMET)	1	QL
QL (60 tabs / 30 days)		
sitagliptin phosphate-metformin hcl tab 50-1000 mg (generic of JANUMET)	1	QL
QL (60 tabs / 30 days)		
sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg (generic of JANUMET XR)	1	QL
QL (60 tabs / 30 days)		
sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg (generic of JANUMET XR)	1	QL
QL (60 tabs / 30 days)		
sitagliptin phosphate-metformin hcl tab er 24hr 100-1000 mg (generic of JANUMET XR)	1	QL
QL (30 tabs / 30 days)		
STEGLATRO TABS 5mg	3	QL
QL (90 tabs / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits
STEGLATRO TABS 15mg QL (30 tabs / 30 days)	3	QL
STEGLUJAN TAB 5-100MG QL (30 tabs / 30 days)	3	QL
STEGLUJAN TAB 15-100MG QL (30 tabs / 30 days)	3	QL
SYMLINPEN 60 SOPN 1500mcg/1.5ml	4	NDS PA
SYMLINPEN 120 SOPN 2700mcg/2.7ml	4	NDS PA
SYNJARDY TAB 5-500MG QL (120 tabs / 30 days)	2	QL
SYNJARDY TAB 5-1000MG QL (60 tabs / 30 days)	2	QL
SYNJARDY TAB 12.5-500 QL (60 tabs / 30 days)	2	QL
SYNJARDY TAB 12.5-1000MG QL (60 tabs / 30 days)	2	QL
SYNJARDY XR TAB 5-1000MG QL (60 tabs / 30 days)	2	QL
SYNJARDY XR TAB 10-1000 QL (60 tabs / 30 days)	2	QL
SYNJARDY XR TAB 12.5-1000 QL (60 tabs / 30 days)	2	QL
SYNJARDY XR TAB 25-1000 QL (30 tabs / 30 days)	2	QL
TRADJENTA TABS 5mg QL (30 tabs / 30 days)	2	QL
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG QL (60 tabs / 30 days)	2	QL
TRIJARDY XR TAB ER 24HR 10-5-1000MG QL (30 tabs / 30 days)	2	QL
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG QL (60 tabs / 30 days)	2	QL
TRIJARDY XR TAB ER 24HR 25-5-1000MG QL (30 tabs / 30 days)	2	QL
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml QL (4 pens / 28 days)	2	QL PA
TZIELD SOLN 2mg/2ml	4	NDS NM PA
VICTOZA SOPN 18mg/3ml QL (3 pens / 30 days)	3	QL PA
XIGDUO XR TAB 2.5-1000 QL (60 tabs / 30 days)	2	QL
XIGDUO XR TAB 5-500MG QL (60 tabs / 30 days)	2	QL
XIGDUO XR TAB 5-1000MG QL (60 tabs / 30 days)	2	QL
XIGDUO XR TAB 10-500MG QL (30 tabs / 30 days)	2	QL
XIGDUO XR TAB 10-1000 QL (30 tabs / 30 days)	2	QL
ZITUVIMET TAB 50-500MG QL (60 tabs / 30 days)	3	QL ST
ZITUVIMET TAB 50-1000 QL (60 tabs / 30 days)	3	QL ST
ZITUVIMET XR TAB 50-500MG QL (60 tabs / 30 days)	3	QL ST
ZITUVIMET XR TAB 50-1000 QL (60 tabs / 30 days)	3	QL ST
ZITUVIMET XR TAB 100-1000 QL (30 tabs / 30 days)	3	QL ST
ZITUVIO TABS 25mg, 50mg, 100mg QL (30 tabs / 30 days)	3	QL ST
ANTIDIABETICS, INSULINS		
ADMELOG SOLN 100unit/ml	2	B/D
ADMELOG SOLOSTAR SOPN 100unit/ml	2	
AFREZZA POWD 4unit, 8unit	3	
AFREZZA POWD 12unit	4	NDS
AFREZZA POW 4-8 UNIT	4	NDS
AFREZZA POW 4-8-12	4	NDS
AFREZZA POW 8-12UNIT	4	NDS
ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY	2	PA
APIDRA SOLN 100unit/ml	3	B/D
APIDRA SOLOSTAR SOPN 100unit/ml	3	
AWIQLI FLEXTOUCH SOPN 700unit/ml	3	
BASAGLAR KWIKPEN SOPN 100unit/ml	2	
CEQUR EXT WR MIS INSERTER QL (2 inserters / year)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
CEQUR SIMPL KIT 1U EXTND QL (8 patches / 24 days)	3	QL PA
CEQUR SIMPL KIT 2U EXTND QL (10 patches / 30 days)	3	QL PA
CEQUR SIMPL KIT PATCH 2U (3-DAY) QL (10 patches / 30 days)	3	QL PA
CEQUR SIMPL KIT PATCH 2U (4-DAY) QL (8 patches / 24 days)	3	QL PA
CEQUR SIMPL MIS INSERTER QL (2 inserters / year)	3	QL PA
FIASP SOLN 100unit/ml	2	B/D
FIASP FLEXTOUCH SOPN 100unit/ml	2	
FIASP PENFILL SOCT 100unit/ml	2	
FIASP PUMPCART SOCT 100unit/ml	2	B/D
GAUZE PADS 2X2	2	PA
HUMALOG SOCT 100unit/ml	3	
HUMALOG SOLN 100unit/ml	3	B/D
HUMALOG JUNIOR KWIKPEN SOPN 100unit/ml	3	
HUMALOG KWIKPEN SOPN 100unit/ml, 200unit/ml	3	
HUMALOG MIX INJ 50/50KWP	3	
HUMALOG MIX INJ 75/25KWP	3	
HUMALOG MIX SUS 75/25	3	
HUMALOG TEMPO PEN SOPN 100unit/ml	3	
HUMULIN INJ 70/30	3	
HUMULIN INJ 70/30KWP	3	
HUMULIN N SUSP 100unit/ml	3	
HUMULIN N KWIKPEN SUPN 100unit/ml	3	
HUMULIN R SOLN 100unit/ml	3	B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	4	NDS
INSULIN GLARGINE MAX SOLO SOPN 300unit/ml	3	
INSULIN GLARGINE SOLOSTAR SOPN 300unit/ml	3	
INSULIN GLARGINE-YFGN SOLN 100unit/ml; SOPN 100unit/ml	3	
INSULIN LISP INJ PROT KWP	3	
INSULIN LISPRO SOLN 100unit/ml	3	B/D
INSULIN LISPRO JUNIOR KWI SOPN 100unit/ml	3	
INSULIN LISPRO KWIKPEN SOPN 100unit/ml	3	
INSULIN PEN NEEDLES: EMBECTA-BD	2	PA
INSULIN SAFETY NEEDLES: EMBECTA-BD	2	PA
INSULIN SYRINGES: EMBECTA-BD	2	PA
KIRSTY SOLN 100unit/ml	3	B/D
KIRSTY SOPN 100unit/ml	3	
LANTUS SOLN 100unit/ml	2	
LANTUS SOLOSTAR SOPN 100unit/ml	2	
LYUMJEV SOLN 100unit/ml	3	B/D
LYUMJEV KWIKPEN SOPN 100unit/ml, 200unit/ml	3	
LYUMJEV TEMPO PEN SOPN 100unit/ml	3	
MERILOG SOLN 100unit/ml	3	B/D
MERILOG SOLOSTAR SOPN 100unit/ml	3	
NOVOLIN70/30 INJ RELION	3	
NOVOLIN INJ 70/30	2	
NOVOLIN INJ 70/30 FP	2	
NOVOLIN INJ 70/30 FP RELION	3	
NOVOLIN N SUSP 100unit/ml	2	
NOVOLIN N FLEXPEN SUPN 100unit/ml	2	
NOVOLIN N FLEXPEN RELION SUPN 100unit/ml	3	

Drug Name	Tier	Requirements/ Limits
NOVOLIN N RELION SUSP 100unit/ml	3	
NOVOLIN R SOLN 100unit/ml	2	B/D
NOVOLIN R FLEXPEN SOPN 100unit/ml	2	
NOVOLIN R FLEXPEN RELION SOPN 100unit/ml	3	
NOVOLIN R RELION SOLN 100unit/ml	3	B/D
NOVOLOG SOLN 100unit/ml	2	B/D
NOVOLOG FLEXPEN SOPN 100unit/ml	2	
NOVOLOG FLEXPEN RELION SOPN 100unit/ml	2	
NOVOLOG MIX INJ 70/30	2	
NOVOLOG MIX INJ FLEX REL	3	
NOVOLOG MIX INJ FLEXPEN	2	
NOVOLOG PENFILL SOCT 100unit/ml	2	
NOVOLOG RELI INJ 70/30	3	
NOVOLOG RELION SOLN 100unit/ml	2	B/D
OMNIPOD5 LIB KIT INTRO QL (1 kit / year)	3	QL PA
OMNIPOD5 LIB MIS PODS QL (15 pods / 30 days)	3	QL PA
OMNIPOD 5 DX KIT INT G7G6 QL (1 kit / year)	3	QL PA
OMNIPOD 5 DX MIS POD G7G6 QL (15 pods / 30 days)	3	QL PA
OMNIPOD DASH KIT INTRO QL (1 kit / year)	3	QL PA
OMNIPOD DASH MIS PODS QL (15 pods / 30 days)	3	QL PA
REZVOGLAR KWIKPEN SOPN 100unit/ml	3	
SEMGLEE SOLN 100unit/ml; SOPN 100unit/ml	3	
SOLIQUA INJ 100/33 QL (5 pens / 25 days)	2	QL
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	2	
TOUJEO SOLOSTAR SOPN 300unit/ml	2	
TRESIBA SOLN 100unit/ml	3	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	3	
V-GO 20 KIT QL (30 devices / 30 days)	3	QL PA
V-GO 30 KIT QL (30 devices / 30 days)	3	QL PA
V-GO 40 KIT QL (30 devices / 30 days)	3	QL PA
XULTOPHY INJ 100/3.6 QL (5 pens / 30 days)	2	QL
CALCIUM REGULATORS		
ACTONEL TABS 35mg, 150mg	3	
alendronate sodium SOLN 70mg/75ml	1	ST
alendronate sodium TABS 10mg, 35mg	1	
alendronate sodium (generic of FOSAMAX) TABS 70mg	1	
ATELVIA TBEC 35mg	3	ST
BILDYOS SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
BINOSTO TBEF 70mg	3	ST
BONSITY SOPN 560mcg/2.24ml QL (1 pen / 28 days)	4	NDS QL NM PA
calcitonin (salmon) inj (generic of MIACALCIN) SOLN 200unit/ml	4	NDS B/D
calcitonin (salmon) spray SOLN 200unit/act	1	B/D
EVENITY SOSY 105mg/1.17ml	4	NDS NM PA
FORTEO SOPN 560mcg/2.24ml QL (1 pen / 28 days)	4	NDS QL NM PA
FOSAMAX TABS 70mg	3	
FOSAMAX + D TAB 70-2800	3	ST
FOSAMAX + D TAB 70-5600	3	ST

Drug Name	Drug Tier	Requirements/ Limits
ibandronate sodium SOLN 3mg/3ml QL (1 injection / 90 days)	1	B/D QL
ibandronate sodium TABS 150mg	1	B/D
MIACALCIN SOLN 200unit/ml	4	NDS B/D
OSPOMYV SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
PAMIDRONATE DISODIUM SOLN 6mg/ml	2	B/D
pamidronate disodium SOLN 30mg/10ml, 90mg/10ml	1	B/D
PROLIA SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
RECLAST SOLN 5mg/100ml	3	B/D NM
risedronate sodium TABS 5mg, 30mg	1	
risedronate sodium (generic of ACTONEL) TABS 35mg, 150mg	1	
risedronate sodium (generic of ATELVIA) TBEC 35mg	1	ST
TERIPARATIDE SOPN 560mcg/2.24ml QL (1 pen / 28 days) (ALVOGEN product)	4	NDS QL NM PA
teriparatide (generic of FORTEO) SOPN 560mcg/2.24ml QL (1 pen / 28 days)	4	NDS QL NM PA
TYMLOS SOPN 3120mcg/1.56ml QL (1 pen / 30 days)	4	NDS QL NM PA
WYOST SOLN 120mg/1.7ml	4	NDS NM PA
XGEVA SOLN 120mg/1.7ml	4	NDS NM PA
XTRENBO SOLN 120mg/1.7ml	3	NM PA
YORVIPATH SOPN 168mcg/0.56ml, 294mcg/0.98ml, 420mcg/1.4ml	4	NDS NM PA
zoledronic acid CONC 4mg/5ml	1	B/D NM
ZOLEDRONIC ACID SOLN 4mg/100ml	3	B/D NM
zoledronic acid (generic of RECLAST) SOLN 5mg/100ml	1	B/D NM
CHELATING AGENTS		
CHEMET CAPS 100mg	4	NDS
CUVRIOR TABS 300mg	4	NDS NM PA
deferasirox (generic of JADENU SPRINKLE) PACK 90mg, 180mg, 360mg	4	NDS NM PA
deferasirox (generic of JADENU) TABS 90mg	1	NM PA
deferasirox (generic of JADENU) TABS 180mg, 360mg	3	NM PA
deferasirox (generic of EXJADE) TBSO 125mg	1	NM PA
deferasirox (generic of EXJADE) TBSO 250mg, 500mg	4	NDS NM PA
deferiprone TABS 500mg	4	NDS NM PA
deferiprone (generic of FERRIPROX) TABS 1000mg	4	NDS NM PA
deferoxamine mesylate SOLR 2gm	1	NM PA
deferoxamine mesylate (generic of DESFERAL) SOLR 500mg	1	NM PA
DEPEN TITRATABS TABS 250mg	4	NDS NM
DESFERAL SOLR 500mg	3	NM PA
EXJADE TBSO 125mg, 250mg, 500mg	4	NDS NM PA
FERRIPROX SOLN 100mg/ml; TABS 1000mg	4	NDS NM PA
FERRIPROX TWICE-A-DAY TABS 1000mg	4	NDS NM PA
JADENU TABS 90mg, 180mg, 360mg	4	NDS NM PA
JADENU SPRINKLE PACK 90mg, 180mg, 360mg	4	NDS NM PA
kionex SUSP 15gm/60ml	1	
LOKELMA PACK 5gm, 10gm	2	
penicillamine (generic of DEPEN TITRATABS) TABS 250mg	4	NDS NM
sodium polystyrene sulfonate SUSP 15gm/60ml	1	

Drug Name	Drug Tier	Requirements/ Limits
sodium polystyrene sulfonate powder	1	
sps SUSP 15gm/60ml	1	
sps rectal SUSP 15gm/60ml	1	
SYPRINE CAPS 250mg	4	NDS NM PA
trientine hcl (generic of SYPRINE) CAPS 250mg	4	NDS NM PA
trientine hcl CAPS 500mg	4	NDS NM PA
VELTASSA PACK 1gm, 8.4gm, 16.8gm, 25.2gm	2	
CONTRACEPTIVES		
afirmelle	1	
altavera	1	
alyacen 1/35	1	
alyacen 7/7/7	1	
amethyst	1	
ANNOVERA MIS	3	
apri	1	
aranelle	1	
ashlyna	1	
aubra eq	1	
aurovela 1/20	1	
aurovela 24 fe	1	
aurovela fe 1.5/30	1	
aurovela fe 1/20	1	
aviane	1	
ayuna	1	
azurette	1	
BALCOLTRA TAB 0.1-20	3	
balziva	1	
BEYAZ TAB	3	
blisovi 24 fe	1	
blisovi fe 1.5/30	1	
blisovi fe 1/20	1	
briellyn	1	
camila TABS .35mg	1	
camrese	1	
camrese lo	1	
chateal eq	1	
cryselle	1	
cyred eq	1	
dasetta 1/35	1	
dasetta 7/7/7	1	
daysee	1	

Drug Name	Drug Tier	Requirements/ Limits
deblitane TABS .35mg	1	
DEPO-PROVERA CONTRACEPTIV SUSP 150mg/ml; SUSY 150mg/ml	3	
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	2	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	
dolishale	1	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (generic of BEYAZ)	1	
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (generic of SAFYRAL)	1	
drospirenone-ethinyl estradiol tab 3-0.02 mg (generic of YAZ)	1	
drospirenone-ethinyl estradiol tab 3-0.03 mg (generic of YASMIN 28)	1	
elinest	1	
eluryng (generic of NUVARING)	1	
emzahh TABS .35mg	1	
enilloring (generic of NUVARING)	1	
enskyce	1	
errin TABS .35mg	1	
estarylla	1	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	1	
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (generic of NUVARING)	1	
falmina	1	
feirza 1.5/30	1	
feirza 1/20	1	
FEMLYV TAB 1/0.02MG	3	
finzala	1	
galbriela	1	
gemmily (generic of TAYTULLA)	1	
hailey 1.5/30	1	
hailey 24 fe	1	

Drug Name	Drug Requirements/ Tier	Limits
hailey fe 1/20	1	
heather TABS .35mg	1	
iclevia	1	
incassia TABS .35mg	1	
introvale	1	
isibloom	1	
jaimiess	1	
jasmiel (generic of YAZ)	1	
jencycla TABS .35mg	1	
jolessa	1	
joyeaux (generic of BALCOLTRA)	1	
juleber	1	
junel 1.5/30	1	
junel 1/20	1	
junel fe 1.5/30	1	
junel fe 1/20	1	
junel fe 24	1	
kaitlib fe	1	
kariva	1	
kelnor 1/35	1	
kurvelo	1	
larin 1.5/30	1	
larin 1/20	1	
larin 24 fe	1	
larin fe 1.5/30	1	
larin fe 1/20	1	
lessina	1	
levonest	1	
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	1	
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	1	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	1	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	1	
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (generic of BALCOLTRA)	1	
levora 0.15/30-28	1	
LILETTA IUD 20.1mcg/day	2	NM
LO LOESTRIN TAB 1-10-10	3	
loestrin 1.5/30-21	1	
loestrin 1/20-21	1	
loestrin fe 1.5/30	1	
loestrin fe 1/20	1	
lojaimiess	1	
loryna (generic of YAZ)	1	
low-ogestrel	1	
luizza 1.5/30	1	
luizza 1/20	1	
lutera	1	
lyleq TABS .35mg	1	
lyza TABS .35mg	1	
marlissa	1	
medroxyprogesterone acetate (contraceptive) (generic of DEPO-PROVERA CONTRACEPTIV) SUSP 150mg/ml; SUSY 150mg/ml	1	
meleya TABS .35mg	1	
mibelas 24 fe	1	
microgestin 1.5/30	1	
microgestin 1/20	1	
microgestin fe 1.5/30	1	
microgestin fe 1/20	1	
mili	1	
minzoya (generic of BALCOLTRA)	1	
mono-linyah	1	
NATAZIA TAB	3	
necon 0.5/35-28	1	
NEXPLANON IMPL 68mg	2	NM
NEXTSTELLIS TAB 3-14.2MG	3	
nikki (generic of YAZ)	1	
nora-be TABS .35mg	1	

Drug Name	Drug Requirements/ Tier	Limits
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	1	
norethindrone (contraceptive) TABS .35mg	1	
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	1	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	1	
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	1	
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (generic of TAYTULLA)	1	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	1	
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	
norlyroc TABS .35mg	1	
nortrel 0.5/35 (28)	1	
nortrel 1/35 (21)	1	
nortrel 1/35 (28)	1	
nortrel 7/7/7	1	
NUVARING MIS	3	
nylia 1/35	1	
nylia 7/7/7	1	
orquidea TABS .35mg	1	
PHEXX GEL	3	
PHEXXI GEL	3	
philith	1	
pimtrea	1	
portia-28	1	
reclipsen	1	
rivelsa	1	
rosyrah	1	
SAFYRAL TAB	3	

Drug Name	Drug Requirements/ Tier	Limits
setlakin	1	
sharobel TABS .35mg	1	
simliya	1	
simpesse	1	
SLYND TABS 4mg	3	
sprintec 28	1	
sronyx	1	
syeda (generic of YASMIN 28)	1	
tarina 24 fe	1	
tarina fe 1/20 eq	1	
TAYTULLA CAP 1MG/20MC	3	
tilia fe	1	
tri-estarylla	1	
tri-legest fe	1	
tri-linyah	1	
tri-lo-estarylla	1	
tri-lo-marzia	1	
tri-lo-mili	1	
tri-lo-sprintec	1	
tri-mili	1	
tri-sprintec	1	
tri-vylibra	1	
tri-vylibra lo	1	
turqoz	1	
TWIRLA DIS 120-30	3	
TYBLUME CHW 0.1-0.02	3	
tydemy (generic of SAFYRAL)	1	
valtya 1/35	1	
valtya 1/50	1	
velivet	1	
vestura (generic of YAZ)	1	
vienva	1	
viorele	1	
vyfemla	1	
vylibra	1	
wera	1	
wymzya fe	1	
xarah fe	1	
xelria fe	1	
xulane	1	
YASMIN 28 TAB 3-0.03MG	3	
YAZ TAB 3-0.02MG	3	
zafemy	1	

Drug Name	Tier	Requirements/ Limits
zovia 1/35	1	
zumandimine (generic of YASMIN 28)	1	
ESTROGENS		
abigale (generic of ACTIVELLA)	2	
abigale lo	2	
ACTIVELLA TAB 1-0.5MG	3	
BIJUVA CAP 0.5-100	3	
BIJUVA CAP 1-100MG	3	
CLIMARA PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	3	
CLIMARA PRO DIS WEEKLY	3	
COMBIPATCH DIS	3	
DELESTROGEN OIL 10mg/ml, 20mg/ml	3	
DEPO-ESTRADIOL OIL 5mg/ml	3	
DIVIGEL GEL .25mg/0.25gm, .5mg/0.5gm, .75mg/0.75gm, 1mg/gm, 1.25mg/1.25gm	3	
dotti (generic of VIVELLE-DOT) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	
ELESTRIN GEL .06%	3	
ESTRACE CREA .1mg/gm	3	
estradiol (generic of ESTROGEL) GEL .06%	3	
estradiol (generic of DIVIGEL) GEL .25mg/0.25gm, .5mg/0.5gm, .75mg/0.75gm, 1mg/gm, 1.25mg/1.25gm	3	
estradiol (generic of VIVELLE-DOT) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	
estradiol (generic of CLIMARA) PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	2	
estradiol TABS .5mg, 1mg, 2mg	1	
estradiol & norethindrone acetate tab 0.5-0.1 mg	2	
estradiol & norethindrone acetate tab 1-0.5 mg (generic of ACTIVELLA)	2	
estradiol vaginal (generic of ESTRACE) CREA .1mg/gm	1	
estradiol vaginal (generic of VAGIFEM) TABS 10mcg	1	
estradiol valerate (generic of DELESTROGEN) OIL 10mg/ml, 20mg/ml	1	
estradiol valerate OIL 40mg/ml	1	
ESTRING RING 7.5mcg/24hr	3	
estrogens, conjugated (generic of PREMARIN) TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	2	
EVAMIST SOLN 1.53mg/spray	3	
FEMRING RING .05mg/24hr, .1mg/24hr	3	
fyavolv tab 0.5mg-2.5mcg	2	
fyavolv tab 1mg-5mcg	2	
IMVEXXY MAINTENANCE PACK INST 4mcg, 10mcg	3	PA
IMVEXXY STARTER PACK INST 4mcg, 10mcg	3	PA
jinteli	2	
lyllana (generic of MINIVELLE) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	
MENOSTAR PTWK 14mcg/24hr	3	
mimvey (generic of ACTIVELLA)	2	
MINIVELLE PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	2	
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	2	

Drug Name	Tier	Requirements/ Limits
PREMARIN CREA .625mg/gm; SOLR 25mg	3	
PREMARIN TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	2	
PREMPHASE TAB	2	
PREMPRO TAB 0.3-1.5	2	
PREMPRO TAB 0.45-1.5	2	
PREMPRO TAB 0.625-2.5	2	
PREMPRO TAB 0.625-5	2	
VAGIFEM TABS 10mcg	3	
VIVELLE-DOT PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
yuvafem (generic of VAGIFEM) TABS 10mcg	1	
GLUCOCORTICOIDS		
ALKINDI SPRINKLE CPSP 1mg, 2mg, 5mg	4	NDS NM PA
ALKINDI SPRINKLE CPSP .5mg	3	NM PA
betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml (generic of CELESTONE SOLUSPAN)	1	
CELESTONE INJ SOLUSPAN	3	
CORTEF TABS 5mg, 10mg, 20mg	3	
CORTISONE ACETATE TABS 25mg	3	
DEPO-MEDROL SUSP 20mg/ml, 40mg/ml, 80mg/ml	3	B/D
dexamethasone ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg; TBPK 1.5mg	1	
DEXAMETHASONE INTENSOL CONC 1mg/ml	3	
dexamethasone sodium phosphate SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml	1	
DEXLYT TABS .25mg	4	NDS
fludrocortisone acetate TABS .1mg	1	
HEMADY TABS 20mg	3	PA
hydrocortisone (generic of CORTEF) TABS 5mg, 10mg, 20mg	1	
hydrocortisone sod succinate (generic of SOLU-CORTEF) SOLR 100mg	1	
KENALOG-10 SUSP 10mg/ml	3	B/D
KENALOG-40 SUSP 40mg/ml	3	B/D
KENALOG-80 SUSP 80mg/ml	3	B/D
KHINDIVI SOLN 1mg/ml	4	NDS PA
MEDROL TABS 2mg, 4mg, 8mg, 16mg	3	B/D
MEDROL DOSEPAK TBPK 4mg	3	
methylprednisolone (generic of MEDROL) TABS 4mg, 8mg, 16mg	1	B/D
methylprednisolone TABS 32mg	1	B/D
methylprednisolone (generic of MEDROL DOSEPAK) TBPK 4mg	1	
methylprednisolone acetate (generic of DEPO-MEDROL) SUSP 40mg/ml, 80mg/ml	1	B/D
methylprednisolone sod succ SOLR 40mg, 125mg	1	B/D
methylprednisolone sod succ (generic of SOLU-MEDROL) SOLR 500mg, 1000mg	1	B/D
ORAPRED ODT TBDP 10mg, 15mg, 30mg	3	B/D
prednisolone SOLN 15mg/5ml; TABS 5mg	1	B/D
prednisolone sodium phosphate SOLN 5mg/5ml, 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml; TBDP 10mg, 15mg, 30mg	1	B/D
prednisone SOLN 5mg/5ml; TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	1	B/D
prednisone TBEC 1mg, 2mg, 5mg	4	NDS B/D

Drug Name	Tier	Requirements/ Limits
prednisone TBPK 5mg, 10mg	1	
PREDNISONE INTENSOL CONC 5mg/ml	3	B/D
SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg	3	
SOLU-MEDROL SOLR 2gm, 40mg, 125mg, 500mg, 1000mg	3	B/D
taperdex 6-day TBPK 1.5mg	1	
taperdex 7-day TBPK 1.5mg	1	
taperdex 12-day TBPK 1.5mg	1	
triamcinolone acetonide (generic of KENALOG-10) SUSP 10mg/ml	1	B/D
triamcinolone acetonide (generic of KENALOG-40) SUSP 40mg/ml	1	B/D
ZILRETTA SRER 32mg	3	B/D NM
GLUCOSE ELEVATING AGENTS		
BAQSIMI ONE PACK POWD 3mg/dose	3	
BAQSIMI TWO PACK POWD 3mg/dose	3	
diazoxide (generic of PROGLYCEM) SUSP 50mg/ml	4	NDS
glucagon SOLR 1mg	1	
GVOKE HYPOPEN 1-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	2	
GVOKE HYPOPEN 2-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	2	
GVOKE KIT SOLN 1mg/0.2ml	2	
GVOKE PFS SOSY 1mg/0.2ml	2	
PROGLYCEM SUSP 50mg/ml	4	NDS
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml	2	
MISCELLANEOUS		
ACTHAR GEL 80unit/ml QL (1.5 mL / 1 day)	4	NDS QL NM PA
ACTHAR GEL PEN 40unit/0.5ml QL (28 injectors / 28 days)	4	NDS QL NM PA
ACTHAR GEL PEN 80unit/ml QL (30 injectors / 30 days)	4	NDS QL NM PA
ALDURAZYME SOLN 2.9mg/5ml	4	NDS NM PA
AQNEURSA PACK 1gm QL (112 packets / 28 days)	4	NDS QL NM PA
AVLAYAH SOLR 150mg	4	NDS NM PA
betaine powder for oral solution (generic of CYSTADANE)	4	NDS NM
BUPHENYL POWD 3gm/tsp; TABS 500mg	4	NDS NM PA
BYNFEZIA PEN SOPN 2500mcg/ml	4	NDS PA
cabergoline TABS .5mg	1	
CARBAGLU TBSO 200mg	4	NDS NM PA
carglumic acid (generic of CARBAGLU) TBSO 200mg	4	NDS NM PA
CARNITOR SOLN 1gm/10ml, 200mg/ml; TABS 330mg	3	B/D
CERDELGA CAPS 84mg	4	NDS NM PA
CEREZYME SOLR 400unit	4	NDS NM PA
CHORIONIC GONADOTROPIN SOLR 10000unit	3	NM PA
cinacalcet hcl (generic of SENSIPAR) TABS 30mg, 60mg QL (60 tabs / 30 days)	1	B/D QL NM
cinacalcet hcl (generic of SENSIPAR) TABS 90mg QL (120 tabs / 30 days)	1	B/D QL NM
CORTROPHIN GEL 80unit/ml QL (1.5 mL / 1 day)	4	NDS QL NM PA
CORTROPHIN PRSY 40unit/0.5ml, 80unit/ml QL (28 syringes / 28 days)	4	NDS QL NM PA
CRENESSITY CAPS 25mg, 50mg, 100mg QL (60 caps / 30 days)	4	NDS QL NM PA
CRENESSITY SOLN 50mg/ml QL (120 mL / 30 days)	4	NDS QL NM PA

Drug Name	Drug Tier	Requirements/ Limits
CRYSVITA SOLN 10mg/ml, 20mg/ml, 30mg/ml	4	NDS NM PA
CYSTADANE POW	4	NDS NM
CYSTAGON CAPS 50mg, 150mg	3	NM PA
DDAVP SOLN 4mcg/ml; TABS .2mg	4	NDS
DDAVP TABS .1mg	3	
DESMODA SOLN .05mg/ml	4	NDS PA
desmopressin acetate (generic of DDAVP) SOLN 4mcg/ml	4	NDS
desmopressin acetate (generic of DDAVP) TABS .1mg, .2mg	1	
desmopressin acetate spray SOLN .01%	1	
desmopressin acetate spray refrigerated SOLN .01%	1	
DOJOLVI LIQD 100%	4	NDS NM PA
EGRIFTA SV SOLR 2mg	4	NDS NM PA
EGRIFTA WR KIT 11.6mg	4	NDS NM PA
ELAPRASE SOLN 6mg/3ml	4	NDS NM PA
ELELYSO SOLR 200unit	4	NDS NM PA
ELFABRIO SOLN 5mg/2.5ml, 20mg/10ml	4	NDS NM PA
EVISTA TABS 60mg	3	
FABRAZYME SOLR 5mg, 35mg	4	NDS NM PA
FENSOLVI KIT 45mg	4	NDS NM PA
GALAFOLD CAPS 123mg	4	NDS NM PA
GENOTROPIN CART 5mg, 12mg	4	NDS NM PA
GENOTROPIN MINIQUICK PRSY .2mg	2	NM PA
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	4	NDS NM PA
glycerol phenylbutyrate (generic of RAVICTI) LIQD 1.1gm/ml	4	NDS NM PA
INCRELEX SOLN 40mg/4ml	4	NDS NM PA
ISTURISA TABS 1mg QL (240 tabs / 30 days)	4	NDS QL NM PA
ISTURISA TABS 5mg QL (360 tabs / 30 days)	4	NDS QL NM PA
javygtor (generic of KUVAN) PACK 100mg, 500mg; TABS 100mg	4	NDS NM PA
JYNARQUE TABS 15mg, 30mg; TBPK 15mg	4	NDS NM PA
JYNARQUE PAK 30-15MG	4	NDS NM PA
JYNARQUE PAK 45-15MG	4	NDS NM PA
JYNARQUE PAK 60-30MG	4	NDS NM PA
JYNARQUE PAK 90-30MG	4	NDS NM PA
KANUMA SOLN 20mg/10ml	4	NDS NM PA
KORLYM TABS 300mg	4	NDS NM PA
KUVAN PACK 100mg, 500mg; TABS 100mg	4	NDS NM PA
LAMZEDE SOLR 10mg	4	NDS NM PA
lanreotide acetate SOLN 120mg/0.5ml	4	NDS NM PA
LANREOTIDE ACETATE SOLN 120mg/0.5ml	4	NDS NM PA
levocarnitine (metabolic modifiers) (generic of CARNITOR) SOLN 1gm/10ml, 200mg/ml; TABS 330mg	1	B/D
LOARGYS SOLN 2mg/0.4ml	4	NDS NM PA
LUMIZYME SOLR 50mg	4	NDS NM PA
LUMVOA SOLN 500mg/10ml	4	NDS NM PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg	4	NDS NM PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg	4	NDS NM PA
LUPRON DEPOT-PED (6-MONTH KIT 45mg	4	NDS NM PA
LYNKUET CAPS 60mg QL (60 caps / 30 days)	3	QL PA
methergine TABS .2mg	4	NDS PA
methylergonovine maleate TABS .2mg	4	NDS PA
mifepristone (hyperglycemia) (generic of KORLYM) TABS 300mg	4	NDS NM PA
miglustat (generic of ZAVESCA) CAPS 100mg QL (90 caps / 30 days)	4	NDS QL NM PA
MIPLYFFA CAPS 47mg, 62mg, 93mg, 124mg QL (90 caps / 30 days)	4	NDS QL NM PA
MYALEPT SOLR 11.3mg	4	NDS NM PA

Drug Name	Drug Tier	Requirements/ Limits
MYCAPSSA CPDR 20mg QL (112 caps / 28 days)	4	NDS QL NM PA
MYFEMBREE TAB	4	NDS PA
NAGLAZYME SOLN 1mg/ml	4	NDS NM PA
NEXVIAZYME SOLR 100mg	4	NDS NM PA
NGENLA SOPN 24mg/1.2ml, 60mg/1.2ml	4	NDS NM PA
nitisinone (generic of ORFADIN) CAPS 2mg, 5mg, 10mg, 20mg	4	NDS NM PA
NITYR TABS 2mg, 5mg, 10mg	4	NDS NM PA
NORDITROPIN FLEXPRO SOPN 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml, 30mg/3ml	4	NDS NM PA
NOVAREL SOLR 5000unit	3	NM PA
octreotide acetate (generic of SANDOSTATIN LAR DEPOT) KIT 10mg, 20mg, 30mg	4	NDS NM PA
octreotide acetate (generic of SANDOSTATIN) SOLN 50mcg/ml, 100mcg/ml	1	NM PA
octreotide acetate SOLN 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	1	NM PA
octreotide acetate (generic of SANDOSTATIN) SOLN 500mcg/ml	4	NDS NM PA
octreotide acetate SOLN 1000mcg/ml; SOSY 500mcg/ml	4	NDS NM PA
OLPRUVA THPK 2gm, 3gm, 4gm, 5gm, 6gm, 6.67gm	4	NDS NM PA
OMNITROPE SOCT 5mg/1.5ml, 10mg/1.5ml; SOLR 5.8mg	4	NDS NM PA
OPFOLDA CAPS 65mg QL (8 caps / 28 days)	3	QL NM PA
ORFADIN CAPS 2mg, 5mg, 10mg, 20mg; SUSP 4mg/ml	4	NDS NM PA
ORIAHNN CAP	4	NDS PA
ORILISSA TABS 150mg, 200mg	4	NDS PA
OSPHENA TABS 60mg	3	PA
PALSONIFY TABS 20mg QL (90 tabs / 30 days)	4	NDS QL NM PA
PALSONIFY TABS 30mg QL (120 tabs / 30 days)	4	NDS QL NM PA
PALYNZIQ SOSY 2.5mg/0.5ml, 10mg/0.5ml, 20mg/ml	4	NDS NM PA
PHEBURANE PLLT 483mg/gm	4	NDS NM PA
POMBILITI SOLR 105mg	4	NDS NM PA
PREGNYL W/DILUENT BENZYL SOLR 10000unit	3	NM PA
PROCYSBI CPDR 25mg, 75mg; PACK 75mg, 300mg	4	NDS NM PA
raloxifene hcl (generic of EVISTA) TABS 60mg	1	
RAVICTI LIQD 1.1gm/ml	4	NDS NM PA
RECORLEV TABS 150mg QL (240 tabs / 30 days)	4	NDS QL NM PA
REVCOVI SOLN 2.4mg/1.5ml	4	NDS NM PA
REZDIFFRA TABS 60mg, 80mg, 100mg QL (30 tabs / 30 days)	4	NDS QL NM PA
SAMSCA TABS 15mg, 30mg	4	NDS NM PA
SANDOSTATIN SOLN 50mcg/ml	3	NM PA
SANDOSTATIN SOLN 100mcg/ml, 500mcg/ml	4	NDS NM PA
SANDOSTATIN LAR DEPOT KIT 10mg, 20mg, 30mg	4	NDS NM PA
sapropterin dihydrochloride (generic of KUVAN) PACK 100mg, 500mg; TABS 100mg	4	NDS NM PA
SEPHIENCE PACK 250mg, 1000mg	4	NDS NM PA
SEROSTIM SOLR 4mg, 5mg, 6mg	4	NDS NM PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	4	NDS NM PA
SIGNIFOR LAR SRER 10mg, 20mg, 30mg, 40mg, 60mg	4	NDS NM PA
SKYTROFA CART .7mg, 1.4mg, 1.8mg, 2.1mg, 2.5mg, 3mg, 3.6mg, 4.3mg, 5.2mg, 6.3mg, 7.6mg, 9.1mg, 11mg, 13.3mg	4	NDS NM PA
sodium phenylbutyrate POWD 3gm/tsp	4	NDS NM PA

Drug Name	Drug Tier	Requirements/ Limits
sodium phenylbutyrate (generic of BUPHENYL) TABS 500mg	4	NDS NM PA
SOGROYA SOPN 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml	4	NDS NM PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	4	NDS NM PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	4	NDS NM PA
STRENSIQ SOLN 18mg/0.45ml, 28mg/0.7ml, 40mg/ml, 80mg/0.8ml	4	NDS NM PA
SYNAREL SOLN 2mg/ml	4	NDS PA
TEPEZZA SOLR 500mg	4	NDS NM PA
tolvaptan (generic of JYNARQUE) TABS 15mg, 30mg (generic of JYNARQUE)	4	NDS NM PA
tolvaptan (generic of JYNARQUE) TBPK 15mg	4	NDS NM PA
tolvaptan (hyponatremia) (generic of SAMSCA) TABS 15mg, 30mg (generic of SAMSCA)	4	NDS NM PA
tolvaptan tab therapy pack 30 & 15 mg (generic of JYNARQUE)	4	NDS NM PA
tolvaptan tab therapy pack 45 & 15 mg (generic of JYNARQUE)	4	NDS NM PA
tolvaptan tab therapy pack 60 & 30 mg (generic of JYNARQUE)	4	NDS NM PA
tolvaptan tab therapy pack 90 & 30 mg (generic of JYNARQUE)	4	NDS NM PA
VEOZAH TABS 45mg QL (30 tabs / 30 days)	3	QL PA
VIJOICE PACK 50mg QL (28 packets / 28 days)	4	NDS QL NM PA
VIJOICE TBPK 50mg, 125mg QL (28 tabs / 28 days)	4	NDS QL NM PA
VIJOICE TAB 250MG QL (56 tabs / 28 days)	4	NDS QL NM PA
VIMIZIM SOLN 5mg/5ml	4	NDS NM PA
VOXZOGO SOLR .4mg, .56mg, 1.2mg	4	NDS NM PA
VPRIV SOLR 400unit	4	NDS NM PA
VYKAT XR TB24 25mg QL (120 tabs / 30 days)	4	NDS QL NM PA
VYKAT XR TB24 75mg QL (30 tabs / 30 days)	4	NDS QL NM PA
VYKAT XR TB24 150mg QL (90 tabs / 30 days)	4	NDS QL NM PA
XENPOZYME SOLR 4mg, 20mg	4	NDS NM PA
yargesa (generic of ZAVESCA) CAPS 100mg QL (90 caps / 30 days)	4	NDS QL NM PA
YUVIWEL SOLR 1.3mg, 2.8mg, 5.5mg	4	NDS NM PA
ZAVESCA CAPS 100mg QL (90 caps / 30 days)	4	NDS QL NM PA
zelvysia (generic of KUVAN) PACK 100mg, 500mg	4	NDS NM PA
ZOMACTON SOLR 5mg	3	NM PA
ZOMACTON SOLR 10mg	4	NDS NM PA
PROGESTINS		
CRINONE GEL 4%, 8%	3	PA
gallifrey TABS 5mg	1	
medroxyprogesterone acetate (generic of PROVERA) TABS 2.5mg, 5mg, 10mg	1	
megestrol acetate SUSP 40mg/ml	2	
megestrol acetate (appetite) SUSP 625mg/5ml	3	PA
norethindrone acetate TABS 5mg	1	
progesterone (generic of PROMETRIUM) CAPS 100mg, 200mg	1	
PROMETRIUM CAPS 100mg, 200mg	3	
PROVERA TABS 2.5mg, 5mg, 10mg	3	
THYROID AGENTS		
CYTOMEL TABS 5mcg, 25mcg, 50mcg	3	

Drug Name	Drug Requirements/ Tier	Limits
levothyroxine sodium CAPS 13mcg, 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	ST
levothyroxine sodium (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
levoxyl (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
liomny (generic of CYTOMEL) TABS 5mcg, 25mcg, 50mcg	1	
liothyronine sodium (generic of CYTOMEL) TABS 5mcg, 25mcg, 50mcg	1	
methimazole TABS 5mg, 10mg	1	
propylthiouracil TABS 50mg	1	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	3	
THYQUIDITY SOLN 100mcg/5ml	3	
TIROSINT CAPS 13mcg, 25mcg, 37.5mcg, 44mcg, 50mcg, 62.5mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	3	ST
TIROSINT-SOL SOLN 13mcg/ml, 25mcg/ml, 37.5mcg/ml, 44mcg/ml, 50mcg/ml, 62.5mcg/ml, 75mcg/ml, 88mcg/ml, 100mcg/ml, 112mcg/ml, 125mcg/ml, 137mcg/ml, 150mcg/ml, 175mcg/ml, 200mcg/ml	3	
unithroid (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
VITAMIN D ANALOGS		
calcitriol CAPS .25mcg, .5mcg	1	B/D
calcitriol (oral) SOLN 1mcg/ml	1	B/D
doxercalciferol CAPS .5mcg, 1mcg, 2.5mcg	1	B/D
paricalcitol (generic of ZEMPLAR) CAPS 1mcg, 2mcg	1	B/D
paricalcitol CAPS 4mcg	1	B/D
RAYALDEE CPCR 30mcg	4	NDS
ROCALTROL CAPS .25mcg, .5mcg; SOLN 1mcg/ml	3	B/D
ZEMPLAR CAPS 1mcg, 2mcg	3	B/D
GASTROINTESTINAL ***ANTIEMETICS***		
AKYNZEO CAP 300-0.5	3	B/D
AKYNZEO INJ 235-0.25MG/20ML	3	NM
APONVIE EMUL 32mg/4.4ml	3	
aprepitant CAPS 40mg, 125mg	1	B/D
aprepitant (generic of EMEND BIPACK) CAPS 80mg	1	B/D
aprepitant capsule therapy pack 80 & 125 mg	1	B/D
BONJESTA TAB 20-20MG	3	
CINVANTI EMUL 130mg/18ml	3	
compro SUPP 25mg	1	
DICLEGIS TAB 10-10MG	3	
DIMENHYDRINATE SOLN 50mg/ml	3	
doxylamine-pyridoxine tab delayed release 10-10 mg (generic of DICLEGIS)	3	
dronabinol (generic of MARINOL) CAPS 2.5mg QL (60 caps / 30 days)	1	B/D QL

Drug Name	Drug Tier	Requirements/ Limits
dronabinol CAPS 5mg, 10mg QL (60 caps / 30 days)	1	B/D QL
EMEND SOLR 150mg	3	
EMEND SUSR 125mg/5ml	4	NDS B/D
EMEND BIPACK CAPS 80mg	3	B/D
EMEND TRIPAC CAP 125 & 80	3	B/D
FOCINVEZ SOLN 150mg/50ml	3	
fosaprepitant dimeglumine (generic of EMEND) SOLR 150mg	1	
GIMOTI SOLN 15mg/act	4	NDS PA
granisetron hcl SOLN 1mg/ml, 4mg/4ml	1	
granisetron hcl TABS 1mg	1	B/D
GRANISOL SOLN 2mg/10ml	4	NDS B/D
MARINOL CAPS 2.5mg QL (60 caps / 30 days)	3	B/D QL
meclizine hcl CHEW 25mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 30 day supply in a calendar year	1	QL PA
meclizine hcl TABS 12.5mg, 25mg PA applies if 65 years and older after a 30 day supply in a calendar year	1	PA
meclizine hcl TABS 50mg QL (60 tabs / 30 days) PA applies if 65 years and older after a 30 day supply in a calendar year	1	QL PA
metoclopramide hcl SOLN 5mg/5ml, 5mg/ml	1	
metoclopramide hcl (generic of REGLAN) TABS 5mg, 10mg	1	
NAVITRUX SOLR 150mg	3	
NEREUS CAPS 85mg QL (16 caps / 30 days)	4	NDS QL
ondansetron TBDP 4mg, 8mg	1	B/D
ondansetron TBDP 16mg	4	NDS B/D
ondansetron hcl SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	1	
ondansetron hcl SOLN 4mg/5ml; TABS 4mg, 8mg	1	B/D
palonosetron hcl SOLN .25mg/5ml; SOSY .25mg/5ml	1	
PHENERGAN SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older after a 30 day supply in a calendar year	3	PA
POSFREA SOLN .25mg/5ml	3	
prochlorperazine SUPP 25mg	1	
prochlorperazine edisylate SOLN 10mg/2ml	1	
prochlorperazine maleate TABS 5mg, 10mg	1	
promethazine hcl SOLN 6.25mg/5ml; TABS 12.5mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	1	PA
promethazine hcl (generic of PHENERGAN) SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
promethazine hcl SUPP 12.5mg, 25mg PA applies if 65 years and older after a 30 day supply in a calendar year	3	PA
promethegan SUPP 12.5mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	3	PA
REGLAN TABS 5mg, 10mg	3	
SANCUSO PTCH 3.1mg/24hr QL (4 patches / 28 days)	4	NDS QL
scopolamine (generic of TRANSDERM SCOP) PT72 1mg/3days QL (10 patches / 30 days)	3	QL

Drug Name	Tier	Requirements/ Limits
TRANSDERM SCOP PT72 1mg/3days QL (10 patches / 30 days)	3	QL
trimethobenzamide hcl CAPS 300mg	1	
VARUBI TBPK 90mg	3	B/D NM
ANTISPASMODICS		
atropine sulfate (generic of ATROPINE SULFATE) SOSY 1mg/10ml	3	
ATROPINE SULFATE SOSY .25mg/5ml, 1mg/10ml	3	
CUVPOSA SOLN 1mg/5ml	3	
dicyclomine hcl CAPS 10mg; TABS 20mg PA applies if 65 years and older	2	PA
dicyclomine hcl SOLN 10mg/5ml PA applies if 65 years and older	3	PA
dicyclomine hcl (generic of BENTYL) SOLN 10mg/ml PA applies if 65 years and older	3	PA
dicyclomine hcl TABS 40mg PA applies if 65 years and older	4	NDS PA
GLYCATE TABS 1.5mg QL (90 tabs / 30 days)	4	NDS QL ST
glycopyrrolate SOLN .2mg/ml, .4mg/2ml, 1mg/5ml, 4mg/20ml	1	
glycopyrrolate (generic of GLYCOPYRROLATE) SOSY .2mg/ml, .4mg/2ml	1	
GLYCOPYRROLATE TABS 1.5mg QL (90 tabs / 30 days)	4	NDS QL ST
glycopyrrolate TABS 1mg QL (90 tabs / 30 days)	1	QL
glycopyrrolate TABS 2mg QL (120 tabs / 30 days)	1	QL
glycopyrrolate (oral) (generic of CUVPOSA) SOLN 1mg/5ml	1	
methscopolamine bromide TABS 2.5mg, 5mg PA applies if 65 years and older	3	PA
H2-RECEPTOR ANTAGONISTS		
cimetidine TABS 200mg, 300mg, 400mg, 800mg	1	
cimetidine hcl SOLN 300mg/5ml QL (1200 mL / 30 days)	1	QL
famotidine SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml; SUSR 40mg/5ml	1	
FAMOTIDINE SOLN 20mg/5ml, 40mg/10ml, 200mg/50ml	3	
famotidine (generic of PEPCID) TABS 20mg, 40mg	1	
famotidine in nacl 0.9% iv soln 20 mg/50ml	1	
nizatidine CAPS 150mg, 300mg	1	
PEPCID TABS 20mg, 40mg	3	
ranitidine hcl TABS 150mg, 300mg	1	
INFLAMMATORY BOWEL DISEASE		
APRISO CP24 .375gm QL (120 caps / 30 days)	3	QL
AZULFIDINE TABS 500mg	3	
AZULFIDINE EN-TABS TBEC 500mg	3	
balsalazide disodium CAPS 750mg	1	
budesonide CPEP 3mg QL (90 caps / 30 days)	1	QL
budesonide (generic of UCERIS) TB24 9mg QL (30 tabs / 30 days)	4	NDS QL PA
budesonide (intrarectal) (generic of UCERIS) FOAM 2mg	1	
CANASA SUPP 1000mg QL (30 suppositories / 30 days)	4	NDS QL
CORTENEMA ENEM 100mg/60ml	3	
DIPENTUM CAPS 250mg	4	NDS

Drug Name	Drug Tier	Requirements/ Limits
hydrocortisone (intrarectal) (generic of CORTENEMA) ENEM 100mg/60ml	1	
LIALDA TBEC 1.2gm	3	QL
QL (120 tabs / 30 days)		
mesalamine (generic of APRISO) CP24 .375gm	1	QL
QL (120 caps / 30 days)		
mesalamine (generic of PENTASA) CPCR 250mg	1	QL
QL (480 caps / 30 days)		
mesalamine (generic of PENTASA) CPCR 500mg	1	QL
QL (240 caps / 30 days)		
mesalamine CPDR 400mg	1	QL
QL (180 caps / 30 days)		
mesalamine ENEM 4gm	1	QL
QL (1680 mL / 28 days)		
mesalamine (generic of CANASA) SUPP 1000mg	1	QL
QL (30 suppositories / 30 days)		
mesalamine (generic of LIALDA) TBEC 1.2gm	1	QL
QL (120 tabs / 30 days)		
mesalamine TBEC 800mg	1	QL
QL (180 tabs / 30 days)		
mesalamine w/ cleanser (generic of ROWASA) KIT 4gm	1	QL
QL (28 bottles / 28 days)		
PENTASA CPCR 250mg	3	QL
QL (480 caps / 30 days)		
PENTASA CPCR 500mg	4	NDS QL
QL (240 caps / 30 days)		
ROWASA KIT 4gm	4	NDS QL
QL (28 bottles / 28 days)		
sulfasalazine (generic of AZULFIDINE) TABS 500mg	1	
sulfasalazine (generic of AZULFIDINE EN-TABS) TBEC 500mg	1	
UCERIS FOAM 2mg/act	3	
UCERIS TB24 9mg	4	NDS QL PA
QL (30 tabs / 30 days)		
LAXATIVES		
CLENPIQ SOL 10 MG-3.5 GM-12 GM/175ML	3	
constulose SOLN 10gm/15ml	1	
enulose SOLN 10gm/15ml	1	
gavilyte-c	1	
gavilyte-g (generic of GOLYTELY)	1	
gavilyte-n/flavor pack	1	
generlac SOLN 10gm/15ml	1	
GOLYTELY SOL	3	
kristalose PACK 10gm	1	QL PA
QL (30 packets / 30 days)		
kristalose PACK 20gm	1	QL PA
QL (60 packets / 30 days)		
lactulose PACK 10gm	4	NDS QL PA
QL (30 packets / 30 days)		
lactulose PACK 20gm	1	QL PA
QL (60 packets / 30 days)		
lactulose SOLN 10gm/15ml	1	
lactulose (encephalopathy) SOLN 10gm/15ml	1	
MOVIPREP SOL	3	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (generic of GOLYTELY)	1	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	
peg-3350/electrolytes/asc (generic of MOVIPREP)	1	
PLENVU SOL	3	
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (generic of SUPREP BOWEL PREP KIT)	1	
SUFLAVE SOL	3	
SUPREP BOWEL SOL PREP KIT	3	
SUTAB TAB	3	
MISCELLANEOUS		
alosetron hcl (generic of LOTRONEX) TABS 1mg	4	NDS QL PA
QL (60 tabs / 30 days)		
alosetron hcl (generic of LOTRONEX) TABS .5mg	1	QL PA
QL (60 tabs / 30 days)		

Drug Name	Drug Tier	Requirements/ Limits
AMITIZA CAPS 8mcg, 24mcg QL (60 caps / 30 days)	3	QL
amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg	1	
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (generic of PYLERA)	1	
BYLVAY CAPS 400mcg, 1200mcg	4	NDS NM PA
BYLVAY (PELLETS) CPSP 200mcg, 600mcg	4	NDS NM PA
CARAFATE SUSP 1gm/10ml	3	ST
CARAFATE TABS 1gm	3	
CHOLBAM CAPS 50mg, 250mg	4	NDS NM PA
CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
cromolyn sodium (mastocytosis) (generic of GASTROCROM) CONC 100mg/5ml	1	
CYTOTEC TABS 100mcg, 200mcg	3	
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	3	
diphenoxylate w/ atropine tab 2.5-0.025 mg (generic of LOMOTIL)	3	
EOHILIA SUSP 2mg/10ml QL (600 mL / 30 days)	4	NDS QL PA
GASTROCROM CONC 100mg/5ml	4	NDS
GATTEX KIT 5mg	4	NDS NM PA
IBSRELA TABS 50mg QL (60 tabs / 30 days)	4	NDS QL NM PA
IQIRVO TABS 80mg QL (30 tabs / 30 days)	4	NDS QL NM PA
LINZESS CAPS 72mcg, 145mcg, 290mcg QL (30 caps / 30 days)	2	QL
LIVDELZI CAPS 10mg QL (30 caps / 30 days)	4	NDS QL NM PA
LIVMARLI SOLN 9.5mg/ml, 19mg/ml; TABS 10mg, 15mg, 20mg, 30mg	4	NDS NM PA
LOMOTIL TAB 2.5MG	3	
loperamide hcl CAPS 2mg	1	
LOTRONEX TABS .5mg, 1mg QL (60 tabs / 30 days)	4	NDS QL PA
lubiprostone (generic of AMITIZA) CAPS 8mcg, 24mcg QL (60 caps / 30 days)	1	QL
LYNAVOY TABS 40mg QL (60 tabs / 30 days)	4	NDS QL NM PA
misoprostol (generic of CYTOTEC) TABS 100mcg, 200mcg	1	
MOTEGRITY TABS 1mg, 2mg	3	
MOVANTIK TABS 12.5mg, 25mg QL (30 tabs / 30 days)	2	QL
PANCREAZE CAP 2600UNIT	3	
PANCREAZE CAP 4200UNIT	3	
PANCREAZE CAP 10500UNT	3	
PANCREAZE CAP 16800UNT	3	
PANCREAZE CAP 21000UNT	3	
PANCREAZE CAP 37000	3	
PERTZYE CAP 4000UNIT	3	
PERTZYE CAP 8000UNIT	3	
PERTZYE CAP 16000U	3	
PERTZYE CAP 24000U	3	
prucalopride succinate (generic of MOTEGRITY) TABS 1mg, 2mg	1	
PYLERA CAP	3	
REBYOTA SUSP 150ml QL (150 mL / 30 days)	4	NDS QL NM PA
RELISTOR SOLN 12mg/0.6ml QL (28 vials / 28 days)	4	NDS QL PA

Drug Name	Tier	Requirements/ Limits
RELISTOR SOSY 8mg/0.4ml, 12mg/0.6ml QL (28 syringes / 28 days)	4	NDS QL PA
RELISTOR TABS 150mg QL (90 tabs / 30 days)	4	NDS QL PA
RELTONE CAPS 200mg, 400mg	4	NDS PA
SUCRAID SOLN 8500unit/ml	4	NDS NM PA
sucralfate SUSP 1gm/10ml	1	ST
sucralfate (generic of CARAFATE) TABS 1gm	1	
SYMPROIC TABS .2mg QL (30 tabs / 30 days)	3	QL
TALICIA CAP	3	
TRULANCE TABS 3mg QL (30 tabs / 30 days)	3	QL
URSODIOL CAPS 200mg, 400mg	4	NDS PA
ursodiol CAPS 300mg; TABS 250mg	1	
ursodiol (generic of URSO FORTE) TABS 500mg	1	
URSOLIGN CAPS 150mg	4	NDS PA
VIBERZI TABS 75mg, 100mg	4	NDS PA
VIOKACE TAB 10440	3	
VIOKACE TAB 20880	4	NDS
VOQUEZNA PAK DUAL PAK QL (2 kits / year)	2	QL PA
VOQUEZNA PAK TRIP PK QL (2 kits / year)	2	QL PA
VOWST CAP QL (12 caps / 30 days)	4	NDS QL NM PA
XERMELO TABS 250mg QL (84 tabs / 28 days)	4	NDS QL NM PA
XIFAXAN TABS 550mg	4	NDS PA
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 20000UNT	2	
ZENPEP CAP 25000UNT	2	
ZENPEP CAP 40000UNT	2	
ZENPEP CAP 60000UNT	2	
PROTON PUMP INHIBITORS		
ACIPHEX TBEC 20mg QL (30 tabs / 30 days)	4	NDS QL ST
DEXILANT CPDR 30mg, 60mg QL (30 caps / 30 days)	3	QL
dexlansoprazole (generic of DEXILANT) CPDR 30mg, 60mg QL (30 caps / 30 days)	1	QL
esomeprazole magnesium (generic of NEXIUM) CPDR 20mg, 40mg QL (30 caps / 30 days)	1	QL ST
esomeprazole magnesium (generic of NEXIUM) PACK 2.5mg, 5mg	1	
esomeprazole magnesium (generic of NEXIUM) PACK 10mg, 20mg, 40mg QL (30 packets / 30 days)	1	QL
esomeprazole sodium SOLR 40mg	1	
KONVOMEP SUS 2-84/ML QL (600 mL / 30 days)	3	QL PA
lansoprazole CPDR 15mg QL (60 caps / 30 days)	1	QL
lansoprazole (generic of PREVACID) CPDR 30mg QL (60 caps / 30 days)	1	QL
lansoprazole (generic of PREVACID SOLUTAB) TBDD 15mg, 30mg QL (60 tabs / 30 days)	1	QL ST
NEXIUM CPDR 20mg, 40mg QL (30 caps / 30 days)	3	QL ST
NEXIUM PACK 2.5mg, 5mg	3	
NEXIUM PACK 10mg, 20mg, 40mg QL (30 packets / 30 days)	3	QL
omeprazole CPDR 10mg, 20mg, 40mg	1	
omeprazole-sodium bicarbonate cap 20-1100 mg QL (30 caps / 30 days)	1	QL PA
omeprazole-sodium bicarbonate cap 40-1100 mg QL (30 caps / 30 days)	1	QL PA

Drug Name	Tier	Requirements/ Limits
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg QL (30 packets / 30 days)	4	NDS QL PA
omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg QL (30 packets / 30 days)	4	NDS QL PA
PANTOPR/NACL SOL 40MG/100	3	
PANTOPR/NACL SOL 80MG/100	3	
pantoprazole sodium PACK 40mg QL (30 packets / 30 days)	1	QL ST
PANTOPRAZOLE SODIUM SOLR 40mg	3	
pantoprazole sodium (generic of PANTOPRAZOLE SODIUM) SOLR 40mg	1	
pantoprazole sodium (generic of PROTONIX) TBEC 20mg, 40mg	1	
PANTOPRAZOLE SOL 40/50ML	3	
PREVACID CPDR 30mg QL (60 caps / 30 days)	3	QL
PREVACID SOLUTAB TBDD 15mg, 30mg QL (60 tabs / 30 days)	3	QL ST
PRILOSEC PACK 2.5mg, 10mg	3	PA
PROTONIX PACK 40mg QL (30 packets / 30 days)	3	QL ST
PROTONIX SOLR 40mg; TBEC 20mg, 40mg	3	
rabeprazole sodium (generic of ACIPHEX) TBEC 20mg QL (30 tabs / 30 days)	1	QL
VOQUEZNA TABS 10mg QL (30 tabs / 30 days)	3	QL PA
VOQUEZNA TABS 20mg QL (60 tabs / 30 days)	3	QL PA

Drug Name	Tier	Requirements/ Limits
GENITOURINARY		
BENIGN PROSTATIC HYPERPLASIA		
alfuzosin hcl (generic of UROXATRAL) TB24 10mg QL (30 tabs / 30 days)	1	QL
AVODART CAPS .5mg QL (30 caps / 30 days)	4	NDS QL
CARDURA XL TB24 4mg, 8mg QL (30 tabs / 30 days)	3	QL ST
CIALIS TABS 5mg QL (30 tabs / 30 days)	3	QL PA
dutasteride (generic of AVODART) CAPS .5mg QL (30 caps / 30 days)	1	QL
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (generic of JALYN) QL (30 caps / 30 days)	1	QL
finasteride (generic of PROSCAR) TABS 5mg QL (30 tabs / 30 days)	1	QL
JALYN CAP 0.5-0.4 QL (30 caps / 30 days)	3	QL
PROSCAR TABS 5mg QL (30 tabs / 30 days)	3	QL
silodosin CAPS 4mg, 8mg QL (30 caps / 30 days)	1	QL
tadalafil (generic of CIALIS) TABS 5mg QL (30 tabs / 30 days)	1	QL PA
tamsulosin hcl CAPS .4mg QL (60 caps / 30 days)	1	QL
UROXATRAL TB24 10mg QL (30 tabs / 30 days)	3	QL
MISCELLANEOUS		
acetic acid SOLN .25%	1	
bethanechol chloride TABS 5mg, 10mg, 25mg, 50mg	1	
dimethyl sulfoxide (generic of RIMSO-50) SOLN 50%	1	
ELMIRON CAPS 100mg QL (90 caps / 30 days)	4	NDS QL
FILSPARI TABS 200mg QL (30 tabs / 30 days)	4	NDS QL NM PA
FILSPARI TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA
INTRAROSA INST 6.5mg	3	PA
LITHOSTAT TABS 250mg	3	

Drug Name	Drug Tier	Requirements/ Limits
neomycin-polymyxin b gu irrigation soln	1	
OXLUMO SOLN 94.5mg/0.5ml	4	NDS NM PA
potassium citrate (alkalinizer) (generic of UROCIT-K 15) TBCR 15meq	1	
potassium citrate (alkalinizer) TBCR 540mg	1	
potassium citrate (alkalinizer) (generic of UROCIT-K 10) TBCR 1080mg	1	
RIMSO-50 SOLN 50%	3	
RIVFLOZA SOLN 80mg/0.5ml; SOSY 128mg/0.8ml, 160mg/ml	4	NDS NM PA
TARPEYO CPDR 4mg QL (120 caps / 30 days)	4	NDS QL NM PA
THIOLA TABS 100mg	4	NDS NM
THIOLA EC TBEC 100mg, 300mg	4	NDS NM
tiopronin (generic of THIOLA) TABS 100mg	4	NDS NM
tiopronin (generic of THIOLA EC) TBEC 100mg, 300mg	4	NDS NM
TRUTAKNA SOAJ 150mg/ml QL (4 pens / 28 days)	4	NDS QL NM PA
UROCIT-K 10 TBCR 1080mg	3	
UROCIT-K 15 TBCR 15meq	3	
VANRAFIA TABS .75mg QL (30 tabs / 30 days)	4	NDS QL NM PA
venxxiva (generic of THIOLA EC) TBEC 100mg, 300mg	4	NDS NM
VOYXACT SOSY 400mg/2ml QL (1 syringe / 28 days)	4	NDS QL NM PA
URINARY ANTISPASMODICS		
darifenacin hydrobromide TB24 7.5mg, 15mg QL (30 tabs / 30 days)	1	QL ST
fesoterodine fumarate (generic of TOVIAZ) TB24 4mg, 8mg QL (30 tabs / 30 days)	1	QL
GEMTESA TABS 75mg QL (30 tabs / 30 days)	2	QL
mirabegron (generic of MYRBETRIQ) TB24 25mg, 50mg QL (30 tabs / 30 days)	1	QL
MYRBETRIQ SRER 8mg/ml QL (300 mL / 28 days)	3	QL
MYRBETRIQ TB24 25mg, 50mg QL (30 tabs / 30 days)	3	QL
oxybutynin chloride SOLN 5mg/5ml QL (600 mL / 30 days)	1	QL
oxybutynin chloride TABS 2.5mg QL (90 tabs / 30 days)	1	QL
oxybutynin chloride TABS 5mg QL (120 tabs / 30 days)	1	QL
oxybutynin chloride TB24 5mg QL (30 tabs / 30 days)	1	QL
oxybutynin chloride TB24 10mg, 15mg QL (60 tabs / 30 days)	1	QL
OXYTROL PTTW 3.9mg/24hr QL (8 patches / 28 days)	3	QL ST
solifenacin succinate TABS 5mg, 10mg QL (30 tabs / 30 days)	1	QL
tolterodine tartrate CP24 2mg, 4mg QL (30 caps / 30 days)	1	QL
tolterodine tartrate TABS 1mg, 2mg QL (60 tabs / 30 days)	1	QL
TOVIAZ TB24 4mg, 8mg QL (30 tabs / 30 days)	3	QL
trospium chloride CP24 60mg QL (30 caps / 30 days)	1	QL
trospium chloride TABS 20mg QL (60 tabs / 30 days)	1	QL
VAGINAL ANTI-INFECTIVES		
CLEOCIN CREA 2%; SUPP 100mg	3	
clindamycin phosphate vaginal (generic of CLEOCIN) CREA 2%	1	

Drug Name	Drug Tier	Requirements/ Limits
CLINDESSE CREA 2%	3	
GYNAZOLE-1 CREA 2%	3	
metronidazole vaginal GEL .75%	1	
miconazole 3 SUPP 200mg	1	
NUVESSA GEL 1.3%	3	
terconazole vaginal CREA .4%, .8%; SUPP 80mg	1	
VANDAZOLE GEL .75%	3	
XACIATO GEL 2%	3	
HEMATOLOGIC		
ANTICOAGULANTS		
ARIXTRA SOLN 2.5mg/0.5ml	3	
ARIXTRA SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	4	NDS
dabigatran etexilate mesylate (generic of PRADAXA) CAPS 75mg, 150mg QL (60 caps / 30 days)	1	QL
dabigatran etexilate mesylate (generic of PRADAXA) CAPS 110mg QL (120 caps / 30 days)	1	QL
ELIQUIS CPSP .15mg QL (56 caps / 21 days)	2	QL
ELIQUIS TABS 2.5mg QL (60 tabs / 30 days)	2	QL
ELIQUIS TABS 5mg QL (74 tabs / 30 days)	2	QL
ELIQUIS TBSO .5mg QL (588 tabs / 29 days)	2	QL
ELIQUIS (1.5MG PACK) 3 X TBSO .5mg QL (591 tabs / 29 days)	2	QL
ELIQUIS (2MG PACK) 4 X TBSO .5mg QL (592 tabs / 30 days)	2	QL
ELIQUIS STARTER PACK TBPK 5mg QL (74 tabs / 30 days)	2	QL
enoxaparin sodium (generic of LOVENOX) SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	1	
fondaparinux sodium (generic of ARIXTRA) SOLN 2.5mg/0.5ml	1	
fondaparinux sodium (generic of ARIXTRA) SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	4	NDS
FRAGMIN SOLN 10000unit/4ml; SOSY 2500unit/0.2ml	3	
FRAGMIN SOLN 95000unit/3.8ml; SOSY 5000unit/0.2ml, 7500unit/0.3ml, 10000unit/ml, 12500unit/0.5ml, 15000unit/0.6ml, 18000unt/0.72ml	4	NDS
HEP SOD/D5W INJ 20000UNT	3	
HEP SOD/D5W INJ 25000UNT	3	
HEP SOD/NACL INJ 12500UNT	2	
HEP SOD/NACL INJ 25000UNT	2	
HEPARIN SODIUM SOLN 5000unit/ml; SOSY 5000unit/0.5ml	3	B/D
heparin sodium (porcine) SOLN 1000unit/ml, 5000unit/0.5ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	1	B/D
HEPARIN/NACL INJ 25000UNT	2	
jantoven TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
LOVENOX SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml	3	
LOVENOX SOSY 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	4	NDS
PRADAXA CAPS 75mg, 150mg QL (60 caps / 30 days)	3	QL
PRADAXA CAPS 110mg QL (120 caps / 30 days)	3	QL

Drug Name	Tier	Requirements/ Limits
PRADAXA PACK 20mg, 150mg QL (60 packets / 30 days)	4	NDS QL PA
PRADAXA PACK 30mg, 40mg, 50mg, 110mg QL (120 packets / 30 days)	4	NDS QL PA
rivaroxaban (generic of XARELTO) SUSR 1mg/ml QL (620 mL / 30 days)	1	QL
rivaroxaban (generic of XARELTO) TABS 2.5mg QL (60 tabs / 30 days)	1	QL
warfarin sodium TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
XARELTO SUSR 1mg/ml QL (620 mL / 30 days)	3	QL
XARELTO TABS 2.5mg QL (60 tabs / 30 days)	2	QL
XARELTO TABS 10mg, 15mg, 20mg QL (30 tabs / 30 days)	2	QL
XARELTO STAR TAB 15/20MG QL (51 tabs / 30 days)	2	QL
HEMATOPOIETIC GROWTH FACTORS		
ARANESP ALBUMIN FREE SOLN 25mcg/ml, 40mcg/ml, 60mcg/ml; SOSY 10mcg/0.4ml, 25mcg/0.42ml, 40mcg/0.4ml	2	NM PA
ARANESP ALBUMIN FREE SOLN 100mcg/ml, 200mcg/ml; SOSY 60mcg/0.3ml, 100mcg/0.5ml, 150mcg/0.3ml, 200mcg/0.4ml, 300mcg/0.6ml, 500mcg/ml	4	NDS NM PA
ARMLUPEG SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
EPOGEN SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	3	NM PA
EPOGEN SOLN 20000unit/ml	4	NDS NM PA
FILKRI SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
FULPHILA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
FYLNETRA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
GRANIX SOLN 300mcg/ml; SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
LEUKINE SOLR 250mcg	4	NDS NM PA
MIRCERA SOSY 30mcg/0.3ml, 50mcg/0.3ml, 75mcg/0.3ml, 100mcg/0.3ml, 120mcg/0.3ml, 150mcg/0.3ml, 200mcg/0.3ml	3	NM PA
MOZOBIL SOLN 24mg/1.2ml	4	NDS NM PA
NEULASTA SOLN 4mg/0.4ml	4	NDS NM PA
NEULASTA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
NEULASTA ONPRO KIT SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
NEUPOGEN SOLN 300mcg/ml, 480mcg/1.6ml; SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
NIVESTYM SOLN 300mcg/ml, 480mcg/1.6ml; SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
NPLATE SOLR 125mcg, 250mcg, 500mcg	4	NDS NM PA
NYPOZI SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
NYVEPRIA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
plerixafor (generic of MOZOBIL) SOLN 24mg/1.2ml	4	NDS NM PA
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	2	NM PA

Drug Name	Tier	Requirements/ Limits
PROCRIT SOLN 20000unit/ml, 40000unit/ml	4	NDS NM PA
RELEUKO SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
RETACRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml, 20000unit/2ml, 20000unit/ml	3	NM PA
RETACRIT SOLN 40000unit/ml	4	NDS NM PA
ROLVEDON SOSY 13.2mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
RYZNEUTA SOSY 20mg/ml QL (2 syringes / 28 days)	4	NDS QL NM PA
STIMUFEND SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
UDENYCA SOAJ 6mg/0.6ml QL (2 pens / 28 days)	4	NDS QL NM PA
UDENYCA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
UDENYCA ONBODY SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
XOLREMDI CAPS 100mg QL (120 caps / 30 days)	4	NDS QL NM PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
ZIEXTENZO SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
MISCELLANEOUS		
ADAKVEO SOLN 100mg/10ml	4	NDS NM PA
ADZYNMA KIT 500unit, 1500unit	4	NDS NM PA
AGRYLIN CAPS .5mg	3	
ALVAIZ TABS 9mg, 54mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ALVAIZ TABS 18mg, 36mg QL (90 tabs / 30 days)	4	NDS QL NM PA
aminocaproic acid SOLN .25gm/ml; TABS 500mg, 1000mg	4	NDS
anagrelide hcl CAPS 1mg	1	
anagrelide hcl (generic of AGRYLIN) CAPS .5mg	1	
ANDEMBRY SOAJ 200mg/1.2ml QL (13 pens / 365 days)	4	NDS QL NM PA
AQVESME TABS 100mg QL (56 tabs / 28 days)	4	NDS QL NM PA
BERINERT KIT 500unit QL (24 boxes / 30 days)	4	NDS QL NM PA
BKEMV SOLN 300mg/30ml	4	NDS NM PA
CABLIVI KIT 11mg	4	NDS NM PA
cilostazol TABS 50mg, 100mg	1	
CINRYZE SOLR 500unit QL (20 vials / 30 days)	4	NDS QL NM PA
DAWNZERA SOAJ 80mg/0.8ml QL (1 pen / 28 days)	4	NDS QL NM PA
DOPTELET TABS 20mg	4	NDS NM PA
DOPTELET SPRINKLE CPSP 10mg	4	NDS NM PA
DROXIA CAPS 200mg, 300mg, 400mg	3	
EKTERLY TABS 300mg QL (12 tabs / 30 days)	4	NDS QL NM PA
eltrombopag olamine (generic of PROMACTA) PACK 12.5mg QL (360 packets / 30 days)	4	NDS QL NM PA
eltrombopag olamine (generic of PROMACTA) PACK 25mg QL (180 packets / 30 days)	4	NDS QL NM PA
eltrombopag olamine (generic of PROMACTA) TABS 12.5mg, 25mg QL (30 tabs / 30 days)	4	NDS QL NM PA
eltrombopag olamine (generic of PROMACTA) TABS 50mg, 75mg QL (60 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
EMPAVELI SOLN 1080mg/20ml QL (200 mL / 30 days)	4	NDS QL NM PA
ENDARI PACK 5gm	4	NDS NM PA
ENJAYMO SOLN 1100mg/22ml	4	NDS NM PA
EPYSQLI SOLN 300mg/30ml	4	NDS NM PA
FABHALTA CAPS 200mg QL (60 caps / 30 days)	4	NDS QL NM PA
FIRAZYR SOSY 30mg/3ml QL (9 syringes / 30 days)	4	NDS QL NM PA
GIVLAARI SOLN 189mg/ml	4	NDS NM PA
HAEGARDA SOLR 2000unit QL (30 vials / 30 days)	4	NDS QL NM PA
HAEGARDA SOLR 3000unit QL (20 vials / 30 days)	4	NDS QL NM PA
icatibant acetate (generic of FIRAZYR) SOSY 30mg/3ml QL (9 syringes / 30 days)	4	NDS QL NM PA
KALBITOR SOLN 10mg/ml QL (18 mL / 30 days)	4	NDS QL NM PA
l-glutamine (sickle cell) (generic of ENDARI) PACK 5gm	4	NDS NM PA
MULPLETA TABS 3mg	4	NDS NM PA
ORLADEYO CAPS 110mg, 150mg QL (28 caps / 28 days)	4	NDS QL NM PA
ORLADEYO PACK 72mg, 96mg, 108mg, 132mg QL (28 packets / 28 days)	4	NDS QL NM PA
pentoxifylline TBCR 400mg	1	
PIASKY SOLN 340mg/2ml	4	NDS NM PA
PROMACTA PACK 12.5mg QL (360 packets / 30 days)	4	NDS QL NM PA
PROMACTA PACK 25mg QL (180 packets / 30 days)	4	NDS QL NM PA
PROMACTA TABS 12.5mg, 25mg QL (30 tabs / 30 days)	4	NDS QL NM PA
PROMACTA TABS 50mg, 75mg QL (60 tabs / 30 days)	4	NDS QL NM PA
PYRUKYND TABS 5mg, 20mg, 50mg QL (56 tabs / 28 days)	4	NDS QL NM PA
PYRUKYND TAB 20MGX5MG QL (14 tabs / 14 days)	4	NDS QL NM PA
PYRUKYND TAB 50MGX20M QL (14 tabs / 14 days)	4	NDS QL NM PA
PYRUKYND TAPER PACK TBPK 5mg QL (7 tabs / 7 days)	4	NDS QL NM PA
REBLOZYL SOLR 25mg, 75mg	4	NDS NM PA
RUCONEST SOLR 2100unit QL (12 vials / 30 days)	4	NDS QL NM PA
RYTELO SOLR 47mg, 188mg	4	NDS NM PA
sajazir (generic of FIRAZYR) SOSY 30mg/3ml QL (9 syringes / 30 days)	4	NDS QL NM PA
SIKLOS TABS 100mg	3	
SIKLOS TABS 1000mg	4	NDS
SOLIRIS SOLN 300mg/30ml	4	NDS NM PA
TAKHZYRO SOSY 150mg/ml, 300mg/2ml QL (2 syringes / 28 days)	4	NDS QL NM PA
TAVALISSE TABS 100mg, 150mg QL (60 tabs / 30 days)	4	NDS QL NM PA
TAVNEOS CAPS 10mg QL (180 caps / 30 days)	4	NDS QL NM PA
tranexamic acid (generic of CYKLOKAPRON) SOLN 1000mg/10ml	1	
tranexamic acid TABS 650mg	1	
tranexamic acid-sodium chloride iv soln 1000 mg/100ml-0.7% (generic of TRANEXAMIC ACID/SODIUM CH)	1	
ULTOMIRIS SOLN 300mg/3ml, 1100mg/11ml	4	NDS NM PA
VOYDEYA TABS 100mg QL (180 tabs / 30 days)	4	NDS QL NM PA
VOYDEYA TAB 50-100MG QL (180 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
WAYRILZ TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA
XROMI SOLN 100mg/ml	4	NDS
PLATELET AGGREGATION INHIBITORS		
aspirin-dipyridamole cap er 12hr 25-200 mg	1	
BRILINTA TABS 60mg, 90mg	3	
clopidogrel bisulfate (generic of PLAVIX) TABS 75mg	1	
clopidogrel bisulfate TABS 300mg	1	
dipyridamole TABS 25mg, 50mg, 75mg PA applies if 65 years and older	2	PA
EFFIENT TABS 5mg, 10mg	3	
PLAVIX TABS 75mg	3	
prasugrel hcl (generic of EFFIENT) TABS 5mg, 10mg	1	
ticagrelor (generic of BRILINTA) TABS 60mg, 90mg	1	
IMMUNOLOGIC AGENTS ***AUTOIMMUNE AGENTS***		
ACTEMRA SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	4	NDS NM PA
ACTEMRA SOSY 162mg/0.9ml QL (4 syringes / 28 days)	4	NDS QL NM PA
ACTEMRA ACTPEN SOAJ 162mg/0.9ml QL (4 pens / 28 days)	4	NDS QL NM PA
ADALIMUMAB-BWWD SOAJ 40mg/0.4ml QL (6 autoinjectors / 28 days)	4	NDS QL NM PA
ADALIMUMAB-BWWD SOSY 40mg/0.4ml QL (6 syringes / 28 days)	4	NDS QL NM PA
ADBRY SOAJ 300mg/2ml QL (28 pens / 365 days)	4	NDS QL NM PA
ADBRY SOSY 150mg/ml QL (56 syringes / 365 days)	4	NDS QL NM PA
AVSOLA SOLR 100mg	4	NDS NM PA
AVTOZMA SOAJ 162mg/0.9ml QL (4 pens / 28 days)	4	NDS QL NM PA
AVTOZMA SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	4	NDS NM PA
AVTOZMA SOSY 162mg/0.9ml QL (4 syringes / 28 days)	4	NDS QL NM PA
BIMZELX SOAJ 160mg/ml, 320mg/2ml QL (2 pens / 28 days)	4	NDS QL NM PA
BIMZELX SOSY 160mg/ml, 320mg/2ml QL (2 syringes / 28 days)	4	NDS QL NM PA
CIBINQO TABS 50mg, 100mg, 200mg QL (30 tabs / 30 days)	4	NDS QL NM PA
CIMZIA KIT 200mg QL (2 kits / 28 days)	4	NDS QL NM PA
CIMZIA (1 SYRINGE) PSKT 200mg/ml QL (4 syringes / 28 days)	4	NDS QL NM PA
CIMZIA (2 SYRINGE) PSKT 200mg/ml QL (4 syringes / 28 days)	4	NDS QL NM PA
CIMZIA STARTER KIT PSKT 200mg/ml QL (2 kits / year)	4	NDS QL NM PA
COSENTYX SOLN 125mg/5ml	4	NDS NM PA
COSENTYX SOSY 75mg/0.5ml QL (16 syringes / 365 days)	4	NDS QL NM PA
COSENTYX SOSY 150mg/ml QL (56 syringes / 365 days)	4	NDS QL NM PA
COSENTYX SENSOREADY PEN SOAJ 150mg/ml QL (56 pens / 365 days)	4	NDS QL NM PA
COSENTYX UNOREADY SOAJ 300mg/2ml QL (28 pens / 365 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml	4	NDS QL NM PA
QL (4 pens / 28 days)		
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml	4	NDS QL NM PA
QL (4 syringes / 28 days)		
EBGLYSS SOAJ 250mg/2ml	4	NDS QL NM PA
QL (20 pens / 365 days)		
EBGLYSS SOSY 250mg/2ml	4	NDS QL NM PA
QL (20 syringes / 365 days)		
ENBREL SOLN 25mg/0.5ml	4	NDS QL NM PA
QL (16 vials / 28 days)		
ENBREL SOSY 25mg/0.5ml	4	NDS QL NM PA
QL (16 syringes / 28 days)		
ENBREL SOSY 50mg/ml	4	NDS QL NM PA
QL (8 syringes / 28 days)		
ENBREL MINI SOCT 50mg/ml	4	NDS QL NM PA
QL (8 cartridges / 28 days)		
ENBREL SURECLICK SOAJ 50mg/ml	4	NDS QL NM PA
QL (8 pens / 28 days)		
HADLIMA SOSY 40mg/0.4ml, 40mg/0.8ml	4	NDS QL NM PA
QL (6 syringes / 28 days)		
HADLIMA PUSHTOUCH SOAJ 40mg/0.4ml, 40mg/0.8ml	4	NDS QL NM PA
QL (6 autoinjectors / 28 days)		
HUMIRA PSKT 10mg/0.1ml	4	NDS QL NM PA
QL (2 syringes / 28 days)		
HUMIRA PSKT 20mg/0.2ml	4	NDS QL NM PA
QL (4 syringes / 28 days)		
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	4	NDS QL NM PA
QL (6 syringes / 28 days)		
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml	4	NDS QL NM PA
QL (6 pens / 28 days)		
HUMIRA PEN AJKT 80mg/0.8ml	4	NDS QL NM PA
QL (4 pens / 28 days)		
HUMIRA PEN KIT PS/UV	4	NDS QL NM PA
QL (3 pens / 28 days)		
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml	4	NDS QL NM PA
QL (3 pens / 28 days)		
ILUMYA SOSY 100mg/ml	4	NDS QL NM PA
QL (6 syringes / 365 days)		
INFLECTRA SOLR 100mg	4	NDS NM PA
INFLIXIMAB SOLR 100mg	4	NDS NM PA
KEVZARA SOAJ 150mg/1.14ml, 200mg/1.14ml	4	NDS QL NM PA
QL (2 pens / 28 days)		
KEVZARA SOSY 150mg/1.14ml, 200mg/1.14ml	4	NDS QL NM PA
QL (2 syringes / 28 days)		
KINERET SOSY 100mg/0.67ml	4	NDS QL NM PA
QL (28 syringes / 28 days)		
LEQSELVI TABS 8mg	4	NDS QL NM PA
QL (60 tabs / 30 days)		
LITFULO CAPS 50mg	4	NDS QL NM PA
QL (28 caps / 28 days)		
NEMLUVIO AUIJ 30mg	4	NDS QL NM PA
QL (2 pens / 28 days)		
OLUMIANT TABS 1mg, 2mg, 4mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
OMVOH SOAJ 100mg/ml	4	NDS QL NM PA
QL (2 pens / 28 days)		
OMVOH SOAJ 200mg/2ml	4	NDS QL NM PA
QL (1 pen / 28 days)		
OMVOH SOLN 300mg/15ml	4	NDS NM PA
OMVOH SOSY 100mg/ml	4	NDS QL NM PA
QL (2 syringes / 28 days)		
OMVOH SOSY 200mg/2ml	4	NDS QL NM PA
QL (1 syringe / 28 days)		
OMVOH SOAJ 100/200	4	NDS QL NM PA
QL (2 pens / 28 days)		
OMVOH SOSY 100/200	4	NDS QL NM PA
QL (2 syringes / 28 days)		

Drug Name	Tier	Requirements/ Limits
ORENCIA SOLR 250mg	4	NDS NM PA
ORENCIA SOSY 50mg/0.4ml, 87.5mg/0.7ml, 125mg/ml QL (4 syringes / 28 days)	4	NDS QL NM PA
ORENCIA CLICKJECT SOAJ 125mg/ml QL (4 autoinjectors / 28 days)	4	NDS QL NM PA
OTEZLA TABS 20mg, 30mg QL (60 tabs / 30 days)	4	NDS QL NM PA
OTEZLA TAB 10/20 QL (110 tabs / year)	4	NDS QL NM PA
OTEZLA TAB 10/20/30 QL (110 tabs / year)	4	NDS QL NM PA
OTEZLA XR TB24 75mg QL (30 tabs / 30 days)	4	NDS QL NM PA
OTEZLA/XR TAB 28 DAY QL (2 packs / year)	4	NDS QL NM PA
PYZCHIVA SOAJ 45mg/0.5ml QL (1 pen / 28 days)	2	QL NM PA
PYZCHIVA SOAJ 90mg/ml QL (1 pen / 28 days)	4	NDS QL NM PA
PYZCHIVA SOLN 45mg/0.5ml QL (1 vial / 28 days)	2	QL NM PA
PYZCHIVA SOLN 130mg/26ml	4	NDS NM PA
PYZCHIVA SOSY 45mg/0.5ml QL (1 syringe / 28 days)	2	QL NM PA
PYZCHIVA SOSY 90mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
REMICADE SOLR 100mg	4	NDS NM PA
RENFLEXIS SOLR 100mg	4	NDS NM PA
RHAPSIDO TABS 25mg QL (60 tabs / 30 days)	4	NDS QL NM PA
RINVOQ TB24 15mg, 30mg QL (30 tabs / 30 days)	4	NDS QL NM PA
RINVOQ TB24 45mg QL (168 tabs / year)	4	NDS QL NM PA
RINVOQ LQ SOLN 1mg/ml QL (360 mL / 30 days)	4	NDS QL NM PA
SILIQ SOSY 210mg/1.5ml QL (3 syringes / 28 days)	4	NDS QL NM PA
SIMPONI SOAJ 50mg/0.5ml QL (6 autoinjectors / 28 days)	4	NDS QL NM PA
SIMPONI SOAJ 100mg/ml QL (3 autoinjectors / 28 days)	4	NDS QL NM PA
SIMPONI SOSY 50mg/0.5ml QL (6 syringes / 28 days)	4	NDS QL NM PA
SIMPONI SOSY 100mg/ml QL (3 syringes / 28 days)	4	NDS QL NM PA
SIMPONI ARIA SOLN 50mg/4ml	4	NDS NM PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml QL (1 cartridge / 56 days)	4	NDS QL NM PA
SKYRIZI SOLN 600mg/10ml	4	NDS NM PA
SKYRIZI SOSY 55mg/0.37ml, 150mg/ml QL (6 syringes / 365 days)	4	NDS QL NM PA
SKYRIZI PEN SOAJ 150mg/ml QL (6 pens / 365 days)	4	NDS QL NM PA
SOTYKTU TABS 6mg QL (30 tabs / 30 days)	4	NDS QL NM PA
SPEVIGO SOLN 450mg/7.5ml	4	NDS NM PA
SPEVIGO SOSY 150mg/ml QL (28 syringes / 365 days)	4	NDS QL NM PA
SPEVIGO SOSY 300mg/2ml QL (14 syringes / 365 days)	4	NDS QL NM PA
STELARA SOLN 45mg/0.5ml QL (1 vial / 28 days)	4	NDS QL NM PA
STELARA SOLN 130mg/26ml	4	NDS NM PA
STELARA SOSY 45mg/0.5ml, 90mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
TALTZ SOAJ 80mg/ml QL (3 pens / 28 days)	4	NDS QL NM PA
TALTZ SOSY 20mg/0.25ml, 40mg/0.5ml QL (1 syringe / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
TALTZ SOSY 80mg/ml QL (3 syringes / 28 days)	4	NDS QL NM PA
tofacitinib citrate (generic of XELJANZ) SOLN 1mg/ml QL (480 mL / 24 days)	4	NDS QL NM PA
tofacitinib citrate (generic of XELJANZ) TABS 5mg, 10mg QL (60 tabs / 30 days)	4	NDS QL NM PA
tofacitinib citrate (generic of XELJANZ XR) TB24 11mg, 22mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TOFIDENCE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	4	NDS NM PA
TREMFYA SOAJ 200mg/2ml QL (2 pens / 28 days)	4	NDS QL NM PA
TREMFYA SOLN 200mg/20ml	4	NDS NM PA
TREMFYA SOPN 100mg/ml QL (1 pen / 28 days)	4	NDS QL NM PA
TREMFYA SOSY 100mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
TREMFYA SOSY 200mg/2ml QL (2 syringes / 28 days)	4	NDS QL NM PA
TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml QL (2 pens / 28 days)	4	NDS QL NM PA
TREMFYA PEN SOAJ 100mg/ml QL (1 pen / 28 days)	4	NDS QL NM PA
TYENNE SOAJ 162mg/0.9ml QL (4 pens / 28 days)	4	NDS QL NM PA
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	4	NDS NM PA
TYENNE SOSY 162mg/0.9ml QL (4 syringes / 28 days)	4	NDS QL NM PA
USTEKINUMAB SOLN 45mg/0.5ml QL (1 vial / 28 days)	4	NDS QL NM PA
USTEKINUMAB SOLN 130mg/26ml	4	NDS NM PA
USTEKINUMAB SOSY 45mg/0.5ml, 90mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
VELSIPITY TABS 2mg QL (30 tabs / 30 days)	4	NDS QL NM PA
XELJANZ SOLN 1mg/ml QL (480 mL / 24 days)	4	NDS QL NM PA
XELJANZ TABS 5mg, 10mg QL (60 tabs / 30 days)	4	NDS QL NM PA
XELJANZ XR TB24 11mg, 22mg QL (30 tabs / 30 days)	4	NDS QL NM PA
YESINTEK SOLN 45mg/0.5ml QL (1 vial / 28 days)	2	QL NM PA
YESINTEK SOLN 130mg/26ml	2	NM PA
YESINTEK SOSY 45mg/0.5ml QL (1 syringe / 28 days)	2	QL NM PA
YESINTEK SOSY 90mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)		
ARAVA TABS 10mg, 20mg QL (30 tabs / 30 days)	4	NDS QL
hydroxychloroquine sulfate TABS 100mg, 300mg, 400mg	1	
hydroxychloroquine sulfate (generic of PLAQUENIL) TABS 200mg	1	
JYLAMVO SOLN 2mg/ml	3	B/D
leflunomide (generic of ARAVA) TABS 10mg, 20mg QL (30 tabs / 30 days)	1	QL
methotrexate sodium TABS 2.5mg	1	
OTREXUP SOAJ 10mg/0.4ml, 12.5mg/0.4ml, 15mg/0.4ml, 17.5mg/0.4ml, 20mg/0.4ml, 22.5mg/0.4ml, 25mg/0.4ml	3	NM PA
PLAQUENIL TABS 200mg	3	
RASUVO SOAJ 7.5mg/0.15ml, 10mg/0.2ml, 12.5mg/0.25ml, 15mg/0.3ml, 17.5mg/0.35ml, 20mg/0.4ml, 22.5mg/0.45ml, 25mg/0.5ml, 30mg/0.6ml	3	NM PA
SOVUNA TABS 200mg, 300mg	3	

Drug Name	Tier	Requirements/ Limits
TREXALL TABS 5mg, 7.5mg, 10mg, 15mg	3	B/D
XATMEP SOLN 2.5mg/ml	3	B/D
IMMUNOGLOBULINS		
ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	4	NDS NM PA
BIVIGAM SOLN 5gm/50ml, 10%	4	NDS NM PA
CUTAQUIG SOLN 1gm/6ml, 1.65gm/10ml, 2gm/12ml, 3.3gm/20ml, 4gm/24ml, 8gm/48ml	4	NDS NM PA
CUVITRU SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 8gm/40ml, 10gm/50ml	4	NDS NM PA
CYTOGAM SOLN 50mg/ml	4	NDS B/D NM
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	4	NDS NM PA
GAMASTAN INJ	3	B/D NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	4	NDS NM PA
GAMMAGARD LIQUID ERC SOLN 5gm/50ml, 10gm/100ml	4	NDS NM PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	4	NDS NM PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	4	NDS NM PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	4	NDS NM PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	4	NDS NM PA
HEPAGAM B SOLN 312unit/ml	4	NDS B/D NM
HIZENTRA SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml; SOSY 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml	4	NDS NM PA
HYQVIA INJ 2.5-200	4	NDS NM PA
HYQVIA INJ 5-400	4	NDS NM PA
HYQVIA INJ 10-800	4	NDS NM PA
HYQVIA INJ 20-1600	4	NDS NM PA
HYQVIA INJ 30-2400	4	NDS NM PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	4	NDS NM PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	4	NDS NM PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	4	NDS NM PA
QIVIGY SOLN 5gm/50ml, 10gm/100ml	4	NDS NM PA
XEMBIFY SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml	4	NDS NM PA
YIMMUGO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	4	NDS NM PA
IMMUNOMODULATORS		
ACTIMMUNE SOLN 100mcg/0.5ml	4	NDS NM PA
ARCALYST SOLR 220mg	4	NDS NM PA
GRASTEK SUBL 2800bau	3	PA
ILARIS SOLN 150mg/ml	4	NDS NM PA
IMAAVY SOLN 300mg/1.62ml, 1200mg/6.5ml	4	NDS NM PA
JOENJA TABS 70mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ODACTRA SUB	3	PA
RAGWITEK SUBL 12amba1-u	3	PA
RYSTIGGO SOLN 280mg/2ml, 420mg/3ml, 560mg/4ml, 840mg/6ml	4	NDS NM PA
VYVGART SOLN 400mg/20ml	4	NDS NM PA
VYVGART INJ HYTRULO	4	NDS NM PA
ZILBRYSQ SOSY 16.6mg/0.416ml, 23mg/0.574ml, 32.4mg/0.81ml QL (28 syringes / 28 days)	4	NDS QL NM PA
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CP24 5mg	4	NDS B/D NM

Drug Name	Tier	Requirements/ Limits
ASTAGRAF XL CP24 .5mg, 1mg	3	B/D NM
ATGAM SOLN 50mg/ml	4	NDS B/D
azasan TABS 75mg, 100mg	1	B/D
azathioprine (generic of IMURAN) TABS 50mg	1	B/D
azathioprine TABS 75mg, 100mg	1	B/D
BENLYSTA SOAJ 200mg/ml QL (8 pens / 28 days)	4	NDS QL NM PA
BENLYSTA SOLR 120mg, 400mg	4	NDS NM PA
BENLYSTA SOSY 200mg/ml QL (8 syringes / 28 days)	4	NDS QL NM PA
CELLCEPT CAPS 250mg; SUSR 200mg/ml; TABS 500mg	4	NDS B/D NM
cyclosporine (generic of SANDIMMUNE) CAPS 25mg, 100mg	1	B/D NM
cyclosporine modified (for microemulsion) (generic of NEORAL) CAPS 25mg, 100mg; SOLN 100mg/ml	1	B/D NM
cyclosporine modified (for microemulsion) CAPS 50mg	1	B/D NM
ENVARSUS XR TB24 4mg	4	NDS B/D NM
ENVARSUS XR TB24 .75mg, 1mg	3	B/D NM
everolimus (immunosuppressant) (generic of ZORTRESS) TABS .5mg, .75mg, 1mg	4	NDS B/D NM
everolimus (immunosuppressant) (generic of ZORTRESS) TABS .25mg	1	B/D NM
gengraf (generic of NEORAL) CAPS 25mg, 100mg	1	B/D NM
IMURAN TABS 50mg	3	B/D
LUPKYNIS CAPS 7.9mg	4	NDS NM PA
mycophenolate mofetil (generic of CELLCEPT) CAPS 250mg; TABS 500mg	1	B/D NM
mycophenolate mofetil (generic of CELLCEPT) SUSR 200mg/ml	4	NDS B/D NM
mycophenolate sodium (generic of MYFORTIC) TBEC 180mg, 360mg	1	B/D NM
MYFORTIC TBEC 180mg	3	B/D NM
MYFORTIC TBEC 360mg	4	NDS B/D NM
MYHIBBIN SUSP 200mg/ml	4	NDS B/D NM
NEORAL CAPS 25mg, 100mg; SOLN 100mg/ml	3	B/D NM
NIKTIMVO SOLN 9mg/0.18ml, 9mg/0.9ml, 22mg/0.44ml, 22mg/2.2ml	4	NDS NM PA
NULOJIX SOLR 250mg	4	NDS B/D NM
PROGRAF CAPS 5mg	4	NDS B/D NM
PROGRAF CAPS .5mg, 1mg; PACK .2mg, 1mg	3	B/D NM
REZUROCK TABS 200mg QL (30 tabs / 30 days)	4	NDS QL NM PA
SANDIMMUNE CAPS 25mg; SOLN 50mg/ml	3	B/D NM
SANDIMMUNE CAPS 100mg	4	NDS B/D NM
SAPHNELO SOLN 300mg/2ml	4	NDS NM PA
SAPHNELO SOSY 120mg/0.8ml QL (4 syringes / 28 days)	4	NDS QL NM PA
SAPHNELO PEN SOAJ 120mg/0.8ml QL (4 pens / 28 days)	4	NDS QL NM PA
sirolimus SOLN 1mg/ml; TABS .5mg, 1mg, 2mg	1	B/D NM
tacrolimus (generic of PROGRAF) CAPS .5mg, 1mg, 5mg	1	B/D NM
tacrolimus (generic of ASTAGRAF XL) CP24 5mg	4	NDS B/D NM
tacrolimus (generic of ASTAGRAF XL) CP24 .5mg, 1mg	1	B/D NM
ZORTRESS TABS .25mg, .5mg, .75mg, 1mg	4	NDS B/D NM
VACCINES		
ABRYSVO SOLR 120mcg/0.5ml	1	PA
ACTHIB INJ	1	
ADACEL INJ	1	
AREXVY SUSR 120mcg/0.5ml	1	PA

Drug Name	Drug Requirements/ Tier	Limits
BCG VACCINE SOLR 50mg	1	
BEXSERO SUSY .5ml	1	
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 SUSP .5ml; SUSY .5ml	1	
HAVRIX SUSY 720elu/0.5ml, 1440unit/ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D
HIBERIX SOLR 10mcg	1	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
IPOL INJ INACTIVE	1	
IXIARO INJ	1	
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	
M-M-R II INJ	1	
MENQUADFI SOLN .5ml	1	
MENVEO INJ	1	
MENVEO SOL	1	
MRESVIA SUSY 50mcg/0.5ml	1	PA
PEDIARIX INJ 0.5ML	1	
PEDVAXHIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENMENVY INJ	1	
PENTACEL INJ	1	
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml QL (2 vials per lifetime)	1	QL
SHINGRIX SUSY 50mcg/0.5ml QL (2 syringes per lifetime)	1	QL
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	
TRUMENBA SUSY .5ml	1	
TWINRIX INJ	1	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	
VAQTA SUSP 25unit/0.5ml, 50unit/ml; SUSY 25unit/0.5ml, 50unit/ml	1	
VARIVAX SUSR 1350pfu/0.5ml	1	
VAXCHORA SUS	1	
VIMKUNYA SUSY 40mcg/0.8ml	1	
VIVOTIF CAP EC	1	
YF-VAX INJ	1	
NUTRITIONAL/SUPPLEMENTS *ELECTROLYTES/MINERALS, INJECTABLE*		
D2.5W/NACL INJ 0.45%	3	
D5W/LYTES INJ #48	3	
D5W/NACL INJ 0.2%	1	
D5W/NACL INJ 0.3%	3	
D5W/NACL INJ 0.9%	3	
D5W/NACL INJ 0.45%	1	
D10W/NACL INJ 0.2%	2	
D10W/NACL INJ 0.45%	1	
dextrose 2.5% w/ sodium chloride 0.45% (generic of DEXTROSE 2.5%/SODIUM CHLO)	1	
dextrose 5% in lactated ringers	1	
dextrose 5% w/ sodium chloride 0.3% (generic of DEXTROSE 5%/SODIUM CHLORI)	1	
dextrose 5% w/ sodium chloride 0.9% (generic of DEXTROSE 5%/SODIUM CHLORI)	1	

Drug Name	Drug Requirements/ Tier	Limits
dextrose 5% w/ sodium chloride 0.45% (generic of DEXTROSE 5%/SODIUM CHLORI)	1	
dextrose 5% w/ sodium chloride 0.225% (generic of DEXTROSE/SODIUM CHLORIDE)	1	
DW5-NACL INJ 0.225%	3	
ISOLYTE-P INJ /D5W	3	
ISOLYTE-S INJ	3	
ISOLYTE-S INJ PH 7.4	3	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj (generic of KCL 0.075%/D5W/NACL 0.45%)	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj (generic of KCL 0.15%/D5W/NACL 0.9%)	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj (generic of KCL 0.15%/D5W/NACL 0.45%)	1	
kcl 20 meq/l (0.15%) in nacl 0.9% inj (generic of POTASSIUM CHLORIDE/SODIUM)	1	
kcl 20 meq/l (0.15%) in nacl 0.45% inj (generic of POTASSIUM CHLORIDE/SODIUM)	1	
kcl 20 meq/l (0.149%) in nacl 0.9% inj	1	
kcl 20 meq/l (0.149%) in nacl 0.45% inj	1	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj (generic of POTASSIUM CHLORIDE/DEXTRO)	1	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj (generic of KCL 0.3%/D5W/NACL 0.9%)	1	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj (generic of KCL 0.3%/D5W/NACL 0.45%)	1	
kcl 40 meq/l (0.3%) in nacl 0.9% inj (generic of POTASSIUM CHLORIDE/SODIUM)	1	
kcl 40 meq/l (0.298%) in nacl 0.9% inj	1	
KCL/D5W/LACT INJ 20MEQ/L	3	
KCL/D5W/NACL INJ 0.3/0.9%	3	
KCL/D5W/NACL INJ 0.15/0.2	1	
KCL/D5W/NACL INJ 0.15/0.9	3	
KCL/D5W/NACL INJ 0.15/0.45	3	
LACTATED RIN INJ	3	
lactated ringer's solution (generic of LACTATED RINGERS)	1	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 20gm/500ml, 40gm/1000ml	2	
magnesium sulfate (generic of MAGNESIUM SULFATE) SOLN 2gm/50ml, 4gm/100ml, 20gm/500ml, 40gm/1000ml, 50%	2	
magnesium sulfate SOLN 3gm/100ml, 4gm/50ml	2	
magnesium sulfate in dextrose 5% iv soln 1 gm/100ml (generic of MAGNESIUM SULFATE IN D5W)	2	
MG SO4/D5W INJ 1GM/100	2	
multiple electrolytes ph 5.5 (generic of PLASMA-LYTE A)	1	
PLASMA-LYTE INJ -A	3	
POT CHL 20MEQ/L IN NACL 0.9% INJ	3	
POT CHL 20MEQ/L IN NACL 0.45% INJ	3	
POT CHL 40MEQ/L IN NACL 0.9% INJ	3	
POT CHL/D5W INJ 20MEQ/L	3	
potassium chloride SOLN 2meq/ml	1	

Drug Name	Drug Tier	Requirements/ Limits
POTASSIUM CHLORIDE SOLN 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	3	
potassium chloride (generic of POTASSIUM CHLORIDE) SOLN 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	1	
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj (generic of POTASSIUM CHLORIDE/DEXTRO)	1	
sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%	1	
TPN ELECTROL INJ	3	B/D
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
klor-con PACK 20meq	1	
KLOR-CON 8 TBCR 8meq	1	
klor-con 8 (generic of KLOR-CON 8) TBCR 8meq	1	
klor-con 10 TBCR 10meq	1	
KLOR-CON 10 TBCR 10meq	1	
klor-con m10 TBCR 10meq	1	
klor-con m15 TBCR 15meq	1	
klor-con m20 TBCR 20meq	1	
M-NATAL PLUS TAB	2	
POKONZA PACK 10meq	3	
POKONZA PACK 15meq; SOLN 5%	4	NDS
potassium chloride CPCR 8meq, 10meq; PACK 20meq; SOLN 10%, 20%; TBCR 10meq, 15meq, 20meq	1	
potassium chloride (generic of KLOR-CON 8) TBCR 8meq	1	
potassium chloride microencapsulated crystals er TBCR 10meq, 15meq, 20meq	1	
PRENATAL TAB 27-1MG	2	
PRENATAL TAB PLUS	2	
sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln	1	
WESTAB PLUS TAB 27-1MG	2	
IV NUTRITION		
aminosyn ii soln 15%	1	B/D
AMINOSYN INJ 10%	3	B/D
AMINOSYN-PF INJ 7%	3	B/D
AMINOSYN-PF INJ 10%	3	B/D
CLINIMIX E INJ 2.75/D5W	3	B/D
CLINIMIX E INJ 4.25/D5W	3	B/D
CLINIMIX E INJ 4.25/D10	3	B/D
CLINIMIX E INJ 5%/D15W	3	B/D
CLINIMIX E INJ 5%/D20W	3	B/D
CLINIMIX E INJ 8/10	3	B/D
CLINIMIX E INJ 8/14	3	B/D
CLINIMIX INJ 4.25/D5W	3	B/D
CLINIMIX INJ 4.25/D10	3	B/D
CLINIMIX INJ 5%/D15W	3	B/D
CLINIMIX INJ 5%/D20W	3	B/D
CLINIMIX INJ 6/5	3	B/D
CLINIMIX INJ 8/10	3	B/D
CLINIMIX INJ 8/14	3	B/D
clinisol sf 15%	1	B/D
CLINOLIPID EMU 20%	3	B/D
dextrose SOLN 5%	1	
dextrose (generic of DEXTROSE 10%) SOLN 10%	1	
dextrose SOLN 50%	1	B/D
DEXTROSE 10% SOLN 10%	1	
DEXTROSE 70% SOLN 70%	1	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	3	B/D
KABIVEN EMU	4	NDS B/D
NUTRILIPID EMUL 20gm/100ml	3	B/D
plenamine	1	B/D
PREMASOL SOL 10%	4	NDS B/D
PROSOL INJ 20%	3	B/D
SMOFLIPID EMU	3	B/D
TRAVASOL INJ 10%	3	B/D
TROPHAMINE INJ 10%	3	B/D
OPHTHALMIC *ANTI-INFECTIVE/ANTI-INFLAMMATORY*		
bacitracin-polymyxin-neomycin-hc ophth oint 1%	1	
loteprednol etabonate-tobramycin ophth susp 0.5-0.3% (generic of ZYLET)	1	
MAXITROL OIN 0.1% OP	3	
MAXITROL SUS 0.1% OP	3	

Drug Name	Drug Tier	Requirements/ Limits
neomycin-polymyxin-dexamethasone ophth oint 0.1% (generic of MAXITROL)	1	
neomycin-polymyxin-dexamethasone ophth susp 0.1% (generic of MAXITROL)	1	
neomycin-polymyxin-hc ophth susp	1	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	3	
tobramycin-dexamethasone ophth susp 0.3-0.1%	1	
ZYLET SUS 0.5-0.3%	2	
ANTI-INFECTIVES		
AZASITE SOLN 1%	3	
bacitracin-polymyxin b ophth oint	1	
besifloxacin hcl SUSP .6%	1	
BESIVANCE SUSP .6%	2	
CILOXAN OINT .3%	2	
ciprofloxacin hcl (ophth) SOLN .3%	1	
erythromycin (ophth) OINT 5mg/gm	1	
gatifloxacin (ophth) SOLN .5%	1	
gentamicin sulfate (ophth) SOLN .3%	1	
levofloxacin (ophth) SOLN .5%, 1.5%	1	
moxifloxacin hcl (ophth) SOLN .5% QL (12 mL / 30 days)	1	QL
moxifloxacin hcl (ophth) (generic of VIGAMOX) SOLN .5% QL (12 mL / 30 days)	1	QL
NATACYN SUSP 5%	3	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	1	
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	1	
OCUFLOX SOLN .3%	3	
ofloxacin (ophth) (generic of OCUFLOX) SOLN .3%	1	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	1	
sulfacetamide sodium (ophth) SOLN 10%	1	
tobramycin (ophth) SOLN .3%	1	
TOBREX OINT .3%	3	
trifluridine SOLN 1%	1	
VIGAMOX SOLN .5% QL (12 mL / 30 days)	3	QL
XDEMVY SOLN .25%	4	NDS NM PA
ZIRGAN GEL .15%	3	
ANTI-INFLAMMATORIES		
ACULAR SOLN .5%	3	
ACULAR LS SOLN .4%	3	
ACUVAIL SOLN .45%	3	
ALREX SUSP .2%	3	
bromfenac sodium (ophth) (generic of PROLENSA) SOLN .07%	1	
bromfenac sodium (ophth) SOLN .09%	1	
bromfenac sodium (ophth) (generic of BROMSITE) SOLN .075%	1	
BROMSITE SOLN .075%	3	
BYQLOVI SUSP .05%	3	
dexamethasone sodium phosphate (ophth) SOLN .1%	1	
DEXYCU SUSP 9%	3	
diclofenac sodium (ophth) SOLN .1%	1	
difluprednate (generic of DUREZOL) EMUL .05%	1	
DUREZOL EMUL .05%	3	
FLAREX SUSP .1%	3	
fluorometholone (ophth) (generic of FML LIQUIFILM) SUSP .1%	1	
flurbiprofen sodium SOLN .03%	1	
FML FORTE SUSP .25%	3	
FML LIQUIFILM SUSP .1%	3	

Drug Name	Drug Requirements/ Tier	Limits
ILEVRO SUSP .3%	3	
ketorolac tromethamine (ophth) SOLN .4%	1	
ketorolac tromethamine (ophth) (generic of ACULAR) SOLN .5%	1	
LOTEMAX GEL .5%; SUSP .5%	3	
LOTEMAX OINT .5%	2	
LOTEMAX SM GEL .38%	2	
loteprednol etabonate (generic of LOTEMAX) GEL .5%; SUSP .5%	1	
loteprednol etabonate SUSP .2%	1	
MAXIDEX SUSP .1%	3	
NEVANAC SUSP .1%	3	
PRED FORTE SUSP 1%	3	
PRED MILD SUSP .12%	3	
prednisolone acetate (ophth) (generic of PRED FORTE) SUSP 1%	1	
PREDNISOLONE SODIUM PHOSP SOLN 1%	2	
PROLENSA SOLN .07%	3	
TRIESENCE SUSP 40mg/ml	3	PA
XIPERE SUSP 40mg/ml	3	NM PA
YUTIQ IMPL .18mg	4	NDS NM
ANTIALLERGICS		
azelastine hcl (ophth) SOLN .05%	1	
bepotastine besilate SOLN 1.5%	1	
BEPREVE SOLN 1.5%	3	
cromolyn sodium (ophth) SOLN 4%	1	
epinastine hcl (ophth) SOLN .05%	1	
ZERVIATE SOLN .24%	3	
ANTIGLAUCOMA		
ALPHAGAN P SOLN .1%, .15%	3	
AZOPT SUSP 1%	3	ST
betaxolol hcl (ophth) SOLN .5%	1	
BETIMOL SOLN .5%	3	
bimatoprost SOLN .03%	1	
brimonidine tartrate (generic of ALPHAGAN P) SOLN .1%, .15%	1	
brimonidine tartrate SOLN .2%	1	
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (generic of COMBIGAN)	1	
brinzolamide (generic of AZOPT) SUSP 1%	1	ST
carteolol hcl (ophth) SOLN 1%	1	
COMBIGAN SOL 0.2/0.5%	2	
COSOPT PF SOL 2%-0.5%	3	
COSOPT SOL 2-0.5%OP	3	
dorzolamide hcl SOLN 2%	1	
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (generic of COSOPT)	1	
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (generic of COSOPT PF)	1	
ISTALOL SOLN .5%	3	
IYUZEH SOLN .005%	3	ST
latanoprost (generic of XALATAN) SOLN .005%	1	
levobunolol hcl SOLN .5%	1	
LUMIGAN SOLN .01%	2	
PHOSPHOLINE IODIDE SOLR .125%	4	NDS NM
pilocarpine hcl SOLN 1%, 2%, 4%	1	
RHOPRESSA SOLN .02%	2	
ROCKLATAN DRO	2	
SIMBRINZA SUS 1-0.2%	3	
tafluprost (generic of ZIOPTAN) SOLN .015mg/ml	1	
timolol hemihydrate (ophth) (generic of BETIMOL) SOLN .5%	1	
timolol maleate (ophth) SOLG .25%, .5%; SOLN .25%, .5%	1	
timolol maleate (ophth) once-daily SOLN .5%	1	

Drug Name	Tier	Requirements/ Limits
timolol maleate (ophth) pf (generic of TIMOPTIC OCUDOSE) SOLN .25%, .5%	1	
TIMOPTIC OCUDOSE SOLN .25%, .5%	3	
TRAVATAN Z SOLN .004%	3	
travoprost (generic of TRAVATAN Z) SOLN .004%	1	
VYZULTA SOLN .024%	3	
XALATAN SOLN .005%	3	
XELPROS EMUL .005%	3	ST
ZIOPTAN SOLN .015mg/ml	3	ST
ZOLYMBUS GEL .01%	3	ST
MISCELLANEOUS		
ATROPINE SULFATE SOLN 1%	2	
atropine sulfate (ophthalmic) SOLN 1%	1	
BEOVU SOSY 6mg/0.05ml	4	NDS NM PA
BYOOVIZ SOLN .5mg/0.05ml	4	NDS NM PA
CEQUA SOLN .09% QL (60 single use vials / 30 days)	3	QL PA
CIMERLI SOLN .3mg/0.05ml, .5mg/0.05ml	4	NDS NM PA
CYSTADROPS SOLN .37%	4	NDS NM PA
CYSTARAN SOLN .44%	4	NDS NM PA
EYLEA SOLN 2mg/0.05ml; SOSY 2mg/0.05ml	4	NDS NM PA
EYLEA HD SOLN 8mg/0.07ml	4	NDS NM PA
EYSUVIS SUSP .25%	3	
IZERVAY SOLN 2mg/0.1ml	4	NDS NM PA
LUCENTIS SOSY .3mg/0.05ml, .5mg/0.05ml	4	NDS NM PA
MIEBO SOLN 1.338gm/ml	2	
OXERVATE SOLN .002% QL (112 mL / year)	4	NDS QL NM PA
PAVBLU SOSY 2mg/0.05ml	4	NDS NM PA
proparacaine hcl (generic of ALCAINE) SOLN .5%	1	
RESTASIS EMUL .05%	2	
RESTASIS MULTIDOSE EMUL .05%	2	
SUSVIMO SOLN 10mg/0.1ml	4	NDS NM PA
SYFOVRE SOLN 15mg/0.1ml	4	NDS NM PA
TRYPTYR SOLN .003% QL (60 single use vials / 30 days)	3	QL PA
TYRVAYA SOLN .03mg/act	3	PA
VABYSMO SOLN 6mg/0.05ml; SOSY 6mg/0.05ml	4	NDS NM PA
VERKAZIA EMUL .1% QL (120 single use vials / 30 days)	4	NDS QL PA
VEVYE SOLN .1%	4	NDS PA
XIIDRA SOLN 5%	2	
YESAFILI SOSY 2mg/0.05ml	4	NDS NM PA
OTIC		
OTIC AGENTS		
acetic acid (otic) SOLN 2%	1	
CIPRO HC SUS 0.2-1%OT	3	
ciprofloxacin hcl (otic) (generic of CETRAXAL) SOLN .2%	1	
ciprofloxacin-dexamethasone otic susp 0.3-0.1%	1	
ciprofloxacin-hydrocortisone otic susp 0.2-1% (generic of CIPRO HC)	1	
CORTISPORIN SUS -TC OTIC	3	
DERMOTIC OIL .01%	3	
flac (generic of DERMOTIC) OIL .01%	1	
fluocinolone acetonide (otic) (generic of DERMOTIC) OIL .01%	1	
hydrocortisone w/ acetic acid otic soln 1-2%	1	
neomycin-polymyxin-hc otic soln 1%	1	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	1	
ofloxacin (otic) SOLN .3%	1	
XTORO SUSP .3%	3	
RESPIRATORY		
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPT AER 62.5-25 QL (60 blisters / 30 days)	2	QL

Drug Name	Drug Tier	Requirements/ Limits
BEVESPI AER 9-4.8MCG QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER 9MCG QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER 18MCG QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) QL (4 inhalers / 28 days)	2	QL
COMBIVENT AER 20-100 QL (2 inhalers / 30 days)	3	QL
DUAKLIR AER 400/12 QL (1 inhaler / 30 days)	3	QL
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	1	B/D
STIOLTO AER 2.5-2.5 QL (1 inhaler / 30 days)	3	QL
TRELEGY AER ELLIPTA 100-62.5-25 MCG QL (60 blisters / 30 days)	2	QL
TRELEGY AER ELLIPTA 200-62.5-25 MCG QL (60 blisters / 30 days)	2	QL
ANTICHOLINERGICS		
ATROVENT HFA AERS 17mcg/act QL (2 inhalers / 30 days)	3	QL
INCRUSE ELLIPTA AEPB 62.5mcg/inh QL (30 blisters / 30 days)	2	QL
ipratropium bromide SOLN .02%	1	B/D
ipratropium bromide (nasal) SOLN .03%, .06%	1	
ipratropium bromide hfa (generic of ATROVENT HFA) AERS 17mcg/act QL (2 inhalers / 30 days)	1	QL
SPIRIVA HANDIHALER CAPS 18mcg QL (30 caps / 30 days)	3	QL
SPIRIVA RESPIMAT AERS 1.25mcg/act, 2.5mcg/act QL (1 inhaler / 30 days)	3	QL
tiotropium bromide (generic of SPIRIVA HANDIHALER) CAPS 18mcg QL (30 caps / 30 days)	1	QL
TUDORZA PRESSAIR AEPB 400mcg/act QL (1 inhaler / 30 days)	3	QL
TUDORZA PRESSAIR (INSTITUTIONAL PACK) AEPB 400mcg/act QL (2 inhalers / 30 days)	3	QL
YUPELRI NEBU 175mcg/3ml	4	NDS PA
ANTIHISTAMINE COMBINATIONS		
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (generic of DYMISTA) QL (1 bottle / 30 days)	1	QL
CLARINEX-D TAB 2.5-120	3	
DYMISTA SPR 137-50 QL (1 bottle / 30 days)	3	QL
promethazine & phenylephrine syrup 6.25-5 mg/5ml PA applies if 65 years and older	2	PA
RYALTRIS SPR 665-25 QL (31 gm / 30 days)	3	QL
ANTIHISTAMINES		
azelastine hcl SOLN .1%	1	
carbinoxamine maleate SOLN 4mg/5ml; SUER 4mg/5ml; TABS 6mg PA applies if 65 years and older	3	PA
carbinoxamine maleate TABS 4mg PA applies if 65 years and older	2	PA
carbzah SOLN 4mg/5ml PA applies if 65 years and older	3	PA
cetirizine hcl SOLN 5mg/5ml QL (300 mL / 30 days)	1	QL
CLARINEX TABS 5mg QL (30 tabs / 30 days)	3	QL
clemastine fumarate SYRP .67mg/5ml QL (1800 mL / 30 days)	4	NDS QL PA

Drug Name	Tier	Requirements/ Limits
clemastine fumarate TABS 2.68mg PA applies if 65 years and older	2	PA
CLEMSZA TABS 2.68mg PA applies if 65 years and older	4	NDS PA
corphena SOLN 2mg/5ml PA applies if 65 years and older	1	PA
cyproheptadine hcl SYRP 2mg/5ml; TABS 4mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
desloratadine (generic of CLARINEX) TABS 5mg QL (30 tabs / 30 days)	1	QL
desloratadine TBDP 2.5mg, 5mg QL (30 tabs / 30 days)	1	QL
diphenhydramine hcl SOLN 50mg/ml	1	
hydroxyzine hcl SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older	3	PA
hydroxyzine hcl SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
hydroxyzine pamoate CAPS 25mg, 50mg, 100mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
KARBINAL ER SUER 4mg/5ml PA applies if 65 years and older	3	PA
levocetirizine dihydrochloride SOLN 2.5mg/5ml QL (300 mL / 30 days)	1	QL
levocetirizine dihydrochloride TABS 5mg QL (30 tabs / 30 days)	1	QL
olopatadine hcl (nasal) SOLN .6%	1	
QUZYTTIR SOLN 10mg/ml QL (30 mL / 30 days)	4	NDS QL PA
ryclora SOLN 2mg/5ml PA applies if 65 years and older	1	PA
ryvent TABS 6mg PA applies if 65 years and older	3	PA
BETA AGONISTS		
albuterol sulfate AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Proair HFA)	1	QL
albuterol sulfate AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Proventil HFA)	1	QL
albuterol sulfate (generic of VENTOLIN HFA) AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Ventolin HFA)	1	QL
albuterol sulfate NEBU .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	1	B/D
albuterol sulfate SYRP 2mg/5ml; TABS 2mg, 4mg	1	
arformoterol tartrate NEBU 15mcg/2ml	1	B/D
formoterol fumarate (generic of PERFOROMIST) NEBU 20mcg/2ml	1	B/D
levalbuterol hcl NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	1	B/D
levalbuterol tartrate AERO 45mcg/act QL (2 inhalers / 30 days)	1	QL ST
PERFOROMIST NEBU 20mcg/2ml	4	NDS B/D
PROAIR RESPICLICK AEPB 108mcg/act QL (2 inhalers / 30 days)	3	QL

Drug Name	Drug Tier	Requirements/ Limits
SEREVENT DISKUS AEPB 50mcg/dose QL (60 inhalations / 30 days)	2	QL
STRIVERDI RESPIMAT AERS 2.5mcg/act QL (1 inhaler / 30 days)	3	QL
terbutaline sulfate SOLN 1mg/ml; TABS 2.5mg, 5mg	1	
VENTOLIN HFA AERS 108mcg/act QL (2 inhalers / 30 days)	2	QL
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act QL (6 inhalers / 30 days)	2	QL
XOPENEX HFA AERO 45mcg/act QL (2 inhalers / 30 days)	3	QL ST
LEUKOTRIENE MODULATORS		
montelukast sodium (generic of SINGULAIR) CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	1	
SINGULAIR CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	3	
zafirlukast TABS 10mg, 20mg	1	
zileuton TB12 600mg QL (120 tabs / 30 days)	4	NDS QL ST
ZYFLO TABS 600mg QL (120 tabs / 30 days)	4	NDS QL ST
MISCELLANEOUS		
acetylcysteine SOLN 10%, 20%	1	B/D
ALYFTREK TAB 4-20-50 QL (84 tabs / 28 days)	4	NDS QL NM PA
ALYFTREK TAB 10-50-125 QL (56 tabs / 28 days)	4	NDS QL NM PA
ARALAST NP SOLR 500mg, 1000mg	4	NDS NM PA
BRINSUPRI TABS 10mg, 25mg QL (30 tabs / 30 days)	4	NDS QL NM PA
CINQAIR SOLN 100mg/10ml	4	NDS NM PA
cromolyn sodium NEBU 20mg/2ml	1	B/D
DALIRESP TABS 250mcg QL (56 tabs / year)	3	QL
DALIRESP TABS 500mcg QL (30 tabs / 30 days)	3	QL
elixophyllin ELIX 80mg/15ml	4	NDS
epinephrine (anaphylaxis) (generic of EPIPEN 2-PAK) SOAJ .3mg/0.3ml (generic of EpiPen)	1	
epinephrine (anaphylaxis) (generic of EPIPEN-JR 2-PAK) SOAJ .15mg/0.3ml (generic of EpiPen)	1	
epinephrine (anaphylaxis) SOAJ .15mg/0.15ml, .3mg/0.3ml (generic of Adrenaclick)	1	
EPIPEN 2-PAK SOAJ .3mg/0.3ml	3	
EPIPEN-JR 2-PAK SOAJ .15mg/0.3ml	3	
ESBRIET TABS 267mg QL (270 tabs / 30 days)	4	NDS QL NM PA
ESBRIET TABS 801mg QL (90 tabs / 30 days)	4	NDS QL NM PA
EXDENSUR SOSY 100mg/ml QL (1 syringe / 180 days)	4	NDS QL NM PA
FASENRA SOSY 10mg/0.5ml, 30mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
FASENRA PEN SOAJ 30mg/ml QL (1 pen / 28 days)	4	NDS QL NM PA
GLASSIA SOLN 4gm/200ml, 5gm/250ml, 1000mg/50ml	4	NDS NM PA
JASCAYD TABS 9mg, 18mg QL (60 tabs / 30 days)	4	NDS QL NM PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg QL (56 packets / 28 days)	4	NDS QL NM PA
KALYDECO TABS 150mg QL (60 tabs / 30 days)	4	NDS QL NM PA
nintedanib esylate (generic of OFEV) CAPS 100mg, 150mg QL (60 caps / 30 days)	4	NDS QL NM PA
NUCALA SOAJ 100mg/ml QL (3 pens / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
NUCALA SOLR 100mg QL (3 vials / 28 days)	4	NDS QL NM PA
NUCALA SOSY 40mg/0.4ml QL (1 syringe / 28 days)	4	NDS QL NM PA
NUCALA SOSY 100mg/ml QL (3 syringes / 28 days)	4	NDS QL NM PA
OFEV CAPS 100mg, 150mg QL (60 caps / 30 days)	4	NDS QL NM PA
OHTUVAYRE SUSP 3mg/2.5ml	4	NDS NM PA
ORKAMBI GRA 75-94MG QL (56 packets / 28 days)	4	NDS QL NM PA
ORKAMBI GRA 100-125 QL (56 packets / 28 days)	4	NDS QL NM PA
ORKAMBI GRA 150-188 QL (56 packets / 28 days)	4	NDS QL NM PA
ORKAMBI TAB 100-125 QL (112 tabs / 28 days)	4	NDS QL NM PA
ORKAMBI TAB 200-125 QL (112 tabs / 28 days)	4	NDS QL NM PA
pirfenidone CAPS 267mg QL (270 caps / 30 days)	4	NDS QL NM PA
pirfenidone (generic of ESBRIET) TABS 267mg QL (270 tabs / 30 days)	4	NDS QL NM PA
pirfenidone TABS 534mg QL (90 tabs / 30 days)	4	NDS QL NM PA
pirfenidone (generic of ESBRIET) TABS 801mg QL (90 tabs / 30 days)	4	NDS QL NM PA
PROLASTIN-C SOLN 1000mg/20ml	4	NDS NM PA
PULMOZYME SOLN 2.5mg/2.5ml	4	NDS NM PA
roflumilast (generic of DALIRESP) TABS 250mcg QL (56 tabs / year)	1	QL
roflumilast (generic of DALIRESP) TABS 500mcg QL (30 tabs / 30 days)	1	QL
SYMDEKO TAB 50-75MG QL (56 tabs / 28 days)	4	NDS QL NM PA
SYMDEKO TAB 100-150 QL (56 tabs / 28 days)	4	NDS QL NM PA
TEZSPIRE SOAJ 210mg/1.91ml QL (1 pen / 28 days)	4	NDS QL NM PA
TEZSPIRE SOSY 210mg/1.91ml QL (1 syringe / 28 days)	4	NDS QL NM PA
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	3	
theophylline ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg; TB24 400mg, 600mg	1	
TRIKAFTA PAK 59.5MG QL (56 packs / 28 days)	4	NDS QL NM PA
TRIKAFTA PAK 75MG QL (56 packs / 28 days)	4	NDS QL NM PA
TRIKAFTA TAB 50-25-37.5MG & 75MG QL (84 tabs / 28 days)	4	NDS QL NM PA
TRIKAFTA TAB 100-50-75MG & 150MG QL (84 tabs / 28 days)	4	NDS QL NM PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml QL (4 pens / 28 days)	4	NDS QL NM PA
XOLAIR SOAJ 150mg/ml QL (8 pens / 28 days)	4	NDS QL NM PA
XOLAIR SOLR 150mg QL (8 vials / 28 days)	4	NDS QL NM PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml QL (4 syringes / 28 days)	4	NDS QL NM PA
XOLAIR SOSY 150mg/ml QL (8 syringes / 28 days)	4	NDS QL NM PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	4	NDS NM PA
NASAL STEROIDS		
flunisolide (nasal) SOLN .025% QL (3 bottles / 30 days)	1	QL
fluticasone propionate (nasal) SUSP 50mcg/act QL (1 bottle / 30 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
mometasone furoate (nasal) SUSP 50mcg/act QL (2 bottles / 30 days)	1	QL
OMNARIS SUSP 50mcg/act QL (1 inhaler / 30 days)	3	QL ST
QNASL AERS 80mcg/act QL (1 inhaler / 30 days)	3	QL ST
QNASL CHILDRENS AERS 40mcg/act QL (1 inhaler / 30 days)	3	QL ST
XHANCE EXHU 93mcg/act QL (32 mL / 30 days)	3	QL PA
STEROID INHALANTS		
ALVESCO AERS 80mcg/act QL (3 inhalers / 30 days)	3	QL
ALVESCO AERS 160mcg/act QL (2 inhalers / 30 days)	3	QL
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act QL (30 inhalations / 30 days)	2	QL
ASMANEX HFA AERO 50mcg/act, 100mcg/act, 200mcg/act QL (1 inhaler / 30 days)	3	QL
ASMANEX TWISTHALER 14 MET AEPB 220mcg/inh QL (8 inhalers / 28 days)	3	QL
ASMANEX TWISTHALER 30 MET AEPB 110mcg/inh QL (2 inhalers / 30 days)	3	QL
ASMANEX TWISTHALER 30 MET AEPB 220mcg/inh QL (4 inhalers / 30 days)	3	QL
ASMANEX TWISTHALER 60 MET AEPB 220mcg/inh QL (2 inhalers / 30 days)	3	QL
ASMANEX TWISTHALER 120 ME AEPB 220mcg/inh QL (1 inhaler / 30 days)	3	QL
beclomethasone dipropionate AERS 40mcg/act, 80mcg/act QL (2 inhalers / 30 days)	1	QL
budesonide (inhalation) (generic of PULMICORT) SUSP .25mg/2ml, .5mg/2ml, 1mg/2ml	1	B/D
fluticasone propionate (inhalation) AEPB 50mcg/act QL (180 inhalations / 30 days)	2	QL
fluticasone propionate (inhalation) AEPB 100mcg/act, 250mcg/act QL (240 inhalations / 30 days)	2	QL
fluticasone propionate hfa AERO 44mcg/act, 110mcg/act, 220mcg/act QL (2 inhalers / 30 days)	2	QL
PULMICORT SUSP .25mg/2ml, .5mg/2ml, 1mg/2ml	3	B/D
PULMICORT FLEXHALER AEPB 90mcg/act QL (3 inhalers / 30 days)	3	QL
PULMICORT FLEXHALER AEPB 180mcg/act QL (2 inhalers / 30 days)	3	QL
QVAR REDIHALER AERB 40mcg/act, 80mcg/act QL (2 inhalers / 30 days)	3	QL
STEROID/BETA-AGONIST COMBINATIONS		
ADVAIR DISKU AER 100/50 QL (60 inhalations / 30 days)	3	QL PA
ADVAIR DISKU AER 250/50 QL (60 inhalations / 30 days)	3	QL PA
ADVAIR DISKU AER 500/50 QL (60 inhalations / 30 days)	3	QL PA
ADVAIR HFA AER 45/21 QL (1 inhaler / 30 days)	2	QL
ADVAIR HFA AER 115/21 QL (1 inhaler / 30 days)	2	QL
ADVAIR HFA AER 230/21 QL (1 inhaler / 30 days)	2	QL
AIRSUPRA AER 90-80MCG QL (3 inhalers / 30 days)	2	QL
BREO ELLIPTA INH 50-25MCG QL (60 blisters / 30 days)	2	QL

Drug Name	Tier	Requirements/ Limits
BREO ELLIPTA INH 100-25 QL (60 blisters / 30 days)	2	QL
BREO ELLIPTA INH 200-25 QL (60 blisters / 30 days)	2	QL
breyna (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
DULERA AER 50-5MCG QL (3 inhalers / 30 days)	3	QL
DULERA AER 100-5MCG QL (3 inhalers / 30 days)	3	QL
DULERA AER 200-5MCG QL (3 inhalers / 30 days)	3	QL
fluticasone-salmeterol aer powder ba 100-50 mcg/act (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
fluticasone-salmeterol aer powder ba 250-50 mcg/act (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
fluticasone-salmeterol aer powder ba 500-50 mcg/act (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
SYMBICORT AER 80-4.5 QL (3 inhalers / 30 days)	3	QL PA
SYMBICORT AER 160-4.5 QL (3 inhalers / 30 days)	3	QL PA
wixela inhub (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL

Drug Name	Tier	Requirements/ Limits
TOPICAL		
DERMATOLOGY, ACNE		
ABSORICA CAPS 10mg, 20mg, 25mg, 30mg, 35mg, 40mg	4	NDS PA
ABSORICA LD CAPS 8mg, 16mg, 24mg, 32mg	4	NDS PA
ACANYA GEL 1.2-2.5% QL (50 gm / 30 days)	3	QL
accutane CAPS 10mg, 20mg, 30mg, 40mg	1	PA
ACZONE GEL 7.5% QL (90 gm / 30 days)	3	QL
adapalene CREA .1% QL (45 gm / 30 days)	1	QL PA
adapalene (generic of DIFFERIN) GEL .3% QL (45 gm / 30 days)	1	QL PA
adapalene PADS .1% QL (28 swabs / 28 days)	4	NDS QL PA
ADAPALENE SOLN .1% QL (120 mL / 30 days)	3	QL PA
adapalene-benzoyl peroxide gel 0.1-2.5% QL (45 gm / 30 days)	1	QL PA
adapalene-benzoyl peroxide gel 0.3-2.5% QL (60 gm / 30 days)	1	QL PA
AKLIEF CREA .005% QL (45 gm / 30 days)	3	QL PA
ALTRENO LOTN .05% QL (45 gm / 30 days)	3	QL PA
amnesteem CAPS 10mg, 20mg, 30mg, 40mg	1	PA
AMZEEQ FOAM 4% QL (30 gm / 30 days)	3	QL PA
ARAZLO LOTN .045% QL (45 gm / 30 days)	3	QL PA
ATRALIN GEL .05% QL (45 gm / 30 days)	3	QL PA
AZELEX CREA 20% QL (50 gm / 30 days)	3	QL PA
BENZAMYCIN GEL 5-3% QL (46.6 gm / 30 days)	3	QL
benzoyl peroxide-erythromycin gel 5-3% (generic of BENZAMYCIN) QL (46.6 gm / 30 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
CABTREO GEL QL (50 gm / 30 days)	4	NDS QL PA
claravis CAPS 10mg, 20mg, 30mg, 40mg	1	PA
CLEOCIN-T LOTN 1% QL (60 mL / 30 days)	3	QL
clindacin FOAM 1% QL (100 gm / 30 days)	1	QL
clindacin etz pledgets SWAB 1% QL (69 pledgets / 30 days)	1	QL
clindacin-p SWAB 1% QL (69 pledgets / 30 days)	1	QL
CLINDAGEL GEL 1% QL (75 mL / 30 days)	4	NDS QL PA
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5% QL (45 gm / 30 days)	1	QL
clindamycin phosphate (topical) FOAM 1% QL (100 gm / 30 days)	1	QL
clindamycin phosphate (topical) (generic of CLINDAGEL) GEL 1% QL (75 mL / 30 days)	1	QL PA
clindamycin phosphate (topical) (generic of CLEOCIN-T) LOTN 1% QL (60 mL / 30 days)	1	QL
clindamycin phosphate (topical) SOLN 1% QL (60 mL / 30 days)	1	QL
clindamycin phosphate (topical) SWAB 1% QL (69 pledgets / 30 days)	1	QL
clindamycin phosphate-benzoyl peroxide gel 1-5% QL (50 gm / 30 days)	1	QL
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% (generic of ACANYA) QL (50 gm / 30 days)	1	QL
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (generic of ONEXTON) QL (50 gm / 30 days)	1	QL
clindamycin phosphate-tretinoin gel 1.2-0.025% QL (60 gm / 30 days)	1	QL PA
dapsone (topical) GEL 5% QL (90 gm / 30 days)	1	QL
dapsone (topical) (generic of ACZONE) GEL 7.5% QL (90 gm / 30 days)	1	QL
DIFFERIN PUMP GEL .3% QL (45 gm / 30 days)	3	QL PA
EPIDUO FORTE GEL 0.3-2.5% QL (60 gm / 30 days)	3	QL PA
ery PADS 2% QL (60 pledgets / 30 days)	1	QL
erythromycin (acne aid) GEL 2% QL (60 gm / 30 days)	1	QL
erythromycin (acne aid) SOLN 2% QL (60 mL / 30 days)	1	QL
FABIOR FOAM .1% QL (100 gm / 30 days)	3	QL PA
isotretinoin CAPS 10mg, 20mg, 30mg, 40mg	1	PA
isotretinoin (generic of ABSORICA) CAPS 25mg, 35mg	1	PA
KLARON LOTN 10% QL (118 mL / 30 days)	3	QL
neuac gel 1.2-5% QL (45 gm / 30 days)	1	QL
ONEXTON GEL 1.2-3.75 QL (50 gm / 30 days)	3	QL
RETIN-A CREA .025%, .05%, .1%; GEL .01%, .025% QL (45 gm / 30 days)	3	QL PA
RETIN-A MICRO GEL .06% QL (50 gm / 30 days)	3	QL PA
RETIN-A MICRO PUMP GEL .08% QL (50 gm / 30 days)	3	QL PA

Drug Name	Drug Tier	Requirements/ Limits
sulfacetamide sodium (acne) (generic of KLARON) LOTN 10% QL (118 mL / 30 days)	1	QL
TAZAROTENE FOAM .1% QL (100 gm / 30 days)	3	QL PA
tretinoin (generic of RETIN-A) CREA .025%, .05%, .1%; GEL .01%, .025% QL (45 gm / 30 days)	1	QL PA
tretinoin (generic of ATRALIN) GEL .05% QL (45 gm / 30 days)	1	QL PA
tretinoin microsphere GEL .04%, .1% QL (50 gm / 30 days)	1	QL PA
tretinoin microsphere (generic of RETIN-A MICRO) GEL .06% QL (50 gm / 30 days)	1	QL PA
tretinoin microsphere (generic of RETIN-A MICRO PUMP) GEL .08% QL (50 gm / 30 days)	1	QL PA
twice-daily clindamycin phosphate (topical) GEL 1% QL (60 gm / 30 days)	1	QL
TWYNEO CRE 0.1-3% QL (30 gm / 30 days)	3	QL PA
WINLEVI CREA 1% QL (60 gm / 30 days)	3	QL PA
zenatane CAPS 10mg, 20mg, 30mg, 40mg	1	PA
ZIANA GEL QL (60 gm / 30 days)	3	QL PA
DERMATOLOGY, ANTIBIOTICS		
gentamicin sulfate (topical) CREA .1%; OINT .1% QL (30 gm / 30 days)	1	QL
mupirocin OINT 2% QL (220 gm / 30 days)	1	QL
mupirocin calcium (topical) CREA 2% QL (30 gm / 30 days)	1	QL PA
SILVADENE CREA 1%	3	
silver sulfadiazine (generic of SILVADENE) CREA 1%	1	
ssd (generic of SILVADENE) CREA 1%	1	
SULFAMYLON CREA 85mg/gm QL (453.6 gm / 30 days)	3	QL
DERMATOLOGY, ANTIFUNGALS		
ciclopirox GEL .77% QL (100 gm / 30 days)	1	QL
ciclopirox SHAM 1% QL (120 mL / 30 days)	1	QL
ciclopirox olamine CREA .77% QL (90 gm / 30 days)	1	QL
ciclopirox olamine SUSP .77% QL (60 mL / 30 days)	1	QL
clotrimazole (topical) CREA 1% QL (45 gm / 30 days)	1	QL
clotrimazole (topical) SOLN 1% QL (60 mL / 30 days)	1	QL
clotrimazole w/ betamethasone cream 1-0.05% QL (45 gm / 30 days)	1	QL
econazole nitrate CREA 1% QL (85 gm / 30 days)	1	QL
ECONAZOLE NITRATE FOAM 1% QL (70 gm / 28 days)	3	QL ST
ERTACZO CREA 2% QL (60 gm / 30 days)	4	NDS QL ST
EXELDERM CREA 1% QL (60 gm / 30 days)	3	QL PA
EXELDERM SOLN 1% QL (30 mL / 30 days)	3	QL PA
JUBLIA SOLN 10% QL (8 mL / 30 days)	4	NDS QL
ketoconazole (topical) CREA 2% QL (60 gm / 30 days)	1	QL
ketoconazole (topical) FOAM 2% QL (100 gm / 30 days)	1	QL PA
ketoconazole (topical) SHAM 2% QL (120 mL / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
ketodan FOAM 2% QL (100 gm / 30 days)	1	QL PA
klayesta POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
luliconazole CREA 1% QL (60 gm / 30 days)	1	QL ST
LUZU CREA 1% QL (60 gm / 30 days)	3	QL ST
miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35% QL (50 gm / 30 days)	1	QL PA
naftifine hcl CREA 1% QL (90 gm / 30 days)	1	QL
naftifine hcl CREA 2% QL (60 gm / 30 days)	1	QL
naftifine hcl (generic of NAFTIN) GEL 2% QL (60 gm / 30 days)	1	QL
NAFTIN GEL 2% QL (60 gm / 30 days)	3	QL
nyamyc POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
nystatin (topical) CREA 100000unit/gm; OINT 100000unit/gm QL (30 gm / 30 days)	1	QL
nystatin (topical) POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
nystop POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
oxiconazole nitrate CREA 1% QL (90 gm / 30 days)	1	QL PA
OXISTAT LOTN 1% QL (60 mL / 30 days)	3	QL PA
selenium sulfide LOTN 2.5%	1	
VUSION OIN QL (50 gm / 30 days)	3	QL PA
ZORYVE FOAM .3% QL (60 gm / 30 days)	3	QL PA
DERMATOLOGY, ANTIPSORIATICS		
acitretin CAPS 10mg, 17.5mg, 25mg	1	PA
calcipotriene CREA .005%; OINT .005% QL (120 gm / 30 days)	1	QL PA
CALCIPOTRIENE FOAM .005% QL (120 gm / 30 days)	4	NDS QL PA
calcipotriene (generic of PELLIX) SOLN .005% QL (120 mL / 30 days)	1	QL PA
calcipotriene-betamethasone dipropionate oint 0.005-0.064% QL (400 gm / 28 days)	1	QL PA
calcipotriene-betamethasone dipropionate susp 0.005-0.064% (generic of TACLONEX) QL (420 gm / 28 days)	1	QL PA
calcitrene OINT .005% QL (120 gm / 30 days)	1	QL PA
calcitriol (topical) OINT 3mcg/gm QL (800 gm / 28 days)	1	QL PA
ENSTILAR AER QL (120 gm / 30 days)	4	NDS QL PA
methoxsalen rapid CAPS 10mg	4	NDS
PELLIX SOLN .005% QL (120 mL / 30 days)	1	QL PA
SORILUX FOAM .005% QL (120 gm / 30 days)	4	NDS QL PA
TACLONEX SUS QL (420 gm / 28 days)	4	NDS QL PA
tazarotene (generic of TAZORAC) CREA .05%, .1% QL (60 gm / 30 days)	1	QL PA
tazarotene (generic of TAZORAC) GEL .05%, .1% QL (100 gm / 30 days)	1	QL PA
TAZORAC CREA .05%, .1% QL (60 gm / 30 days)	3	QL PA
TAZORAC GEL .05%, .1% QL (100 gm / 30 days)	3	QL PA
trilitas (generic of TAZORAC) GEL .1% QL (100 gm / 30 days)	1	QL PA
VECTICAL OINT 3mcg/gm QL (800 gm / 28 days)	4	NDS QL PA

Drug Name	Drug Tier	Requirements/ Limits
VTAMA CREA 1% QL (60 gm / 30 days)	4	NDS QL PA
ZORYVE CREA .3% QL (60 gm / 30 days)	3	QL PA
DERMATOLOGY, CORTICOSTEROIDS		
ala-cort CREA 1%	1	
ala-scalp LOTN 2% QL (60 mL / 30 days)	4	NDS QL
alclometasone dipropionate CREA .05%; OINT .05% QL (60 gm / 30 days)	1	QL
amcinonide CREA .1%; OINT .1% QL (60 gm / 30 days)	4	NDS QL PA
betamethasone dipropionate (topical) CREA .05%; OINT .05% QL (120 gm / 30 days)	1	QL
betamethasone dipropionate (topical) LOTN .05% QL (120 mL / 30 days)	1	QL
betamethasone dipropionate augmented CREA .05%; GEL .05% QL (120 gm / 30 days)	1	QL
betamethasone dipropionate augmented LOTN .05% QL (120 mL / 30 days)	1	QL
betamethasone dipropionate augmented (generic of DIPROLENE) OINT .05% QL (120 gm / 30 days)	1	QL
betamethasone valerate CREA .1%; FOAM .12%; OINT .1% QL (120 gm / 30 days)	1	QL
betamethasone valerate LOTN .1% QL (120 mL / 30 days)	1	QL
BRYHALI LOTN .01% QL (100 gm / 30 days)	3	QL PA
clobetasol propionate CREA .05%; GEL .05%; OINT .05% QL (120 gm / 30 days)	1	QL
CLOBETASOL PROPIONATE CREA .025% QL (100 gm / 30 days)	4	NDS QL
clobetasol propionate FOAM .05% QL (100 gm / 30 days)	1	QL
clobetasol propionate (generic of CLOBEX) LIQD .05% QL (125 mL / 30 days)	1	QL
clobetasol propionate LOTN .05% QL (118 mL / 30 days)	1	QL
clobetasol propionate SHAM .05% QL (236 mL / 30 days)	1	QL
clobetasol propionate SOLN .05% QL (100 mL / 30 days)	1	QL
clobetasol propionate emo CREA .05% QL (120 gm / 30 days)	1	QL
clobetasol propionate emulsion FOAM .05% QL (100 gm / 30 days)	1	QL
clocortolone pivalate CREA .1% QL (90 gm / 30 days)	1	QL PA
clodan SHAM .05% QL (236 mL / 30 days)	1	QL
CORDRAN TAPE 4mcg/sqcm QL (1 roll / 30 days)	3	QL PA
DERMA-SMOOTHE/FS BODY OIL .01% QL (118.28 mL / 30 days)	3	QL
DERMA-SMOOTHE/FS SCALP OIL .01% QL (118.28 mL / 30 days)	3	QL
desonide CREA .05%; OINT .05% QL (60 gm / 30 days)	1	QL
desonide GEL .05% QL (60 gm / 30 days)	1	QL PA
desonide LOTN .05% QL (118 mL / 30 days)	1	QL
desoximetasone CREA .05% QL (100 gm / 30 days)	1	QL PA
desoximetasone CREA .25% QL (100 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
desoximetasone GEL .05% QL (60 gm / 30 days)	1	QL PA
desoximetasone (generic of TOPICORT) LIQD .25% QL (100 mL / 30 days)	1	QL
desoximetasone (generic of TOPICORT) OINT .05% QL (100 gm / 30 days)	1	QL PA
desoximetasone (generic of TOPICORT) OINT .25% QL (100 gm / 30 days)	1	QL
diflorasone diacetate CREA .05%; OINT .05% QL (60 gm / 30 days)	1	QL PA
DIPROLENE OINT .05% QL (120 gm / 30 days)	3	QL
DUOBRII LOT QL (200 gm / 28 days)	4	NDS QL PA
EPIFOAM AER 1%	3	
evesse LOTN .1% QL (118 mL / 30 days)	1	QL PA
fluocinolone acetonide CREA .01% QL (60 gm / 30 days)	1	QL
fluocinolone acetonide (generic of SYNALAR) CREA .025%; OINT .025% QL (120 gm / 30 days)	1	QL
fluocinolone acetonide (generic of DERMA-SMOOTHE/FS BODY) OIL .01% QL (118.28 mL / 30 days)	1	QL
fluocinolone acetonide (generic of DERMA-SMOOTHE/FS SCALP) OIL .01% QL (118.28 mL / 30 days)	1	QL
fluocinolone acetonide SOLN .01% QL (60 mL / 30 days)	1	QL
fluocinonide CREA .05%, .1% QL (120 gm / 30 days)	1	QL
fluocinonide GEL .05%; OINT .05% QL (60 gm / 30 days)	1	QL
fluocinonide SOLN .05% QL (60 mL / 30 days)	1	QL
fluocinonide emulsified base CREA .05% QL (120 gm / 30 days)	1	QL
flurandrenolide LOTN .05% QL (120 mL / 30 days)	1	QL PA
fluticasone propionate CREA .05%; OINT .005%	1	
fluticasone propionate LOTN .05% QL (120 mL / 30 days)	1	QL
halcinonide (generic of HALOG) CREA .1% QL (240 gm / 30 days)	1	QL PA
halcinonide (generic of HALOG) SOLN .1% QL (120 mL / 30 days)	1	QL PA
halobetasol propionate CREA .05%; OINT .05% QL (50 gm / 30 days)	1	QL
halobetasol propionate FOAM .05% QL (200 gm / 28 days)	1	QL PA
HALOBETASOL PROPIONATE LOTN .05% QL (120 mL / 30 days)	4	NDS QL PA
HALOG CREA .1% QL (240 gm / 30 days)	3	QL PA
HALOG SOLN .1% QL (120 mL / 30 days)	4	NDS QL PA
hydrocortisone (topical) CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%; SOLN 2.5%	1	
hydrocortisone (topical) LOTN 2% QL (60 mL / 30 days)	4	NDS QL
hydrocortisone (topical) OINT 1% QL (30 gm / 30 days)	1	QL
hydrocortisone butyrate CREA .1%; OINT .1% QL (45 gm / 30 days)	1	QL
hydrocortisone butyrate LOTN .1% QL (118 mL / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
hydrocortisone butyrate SOLN .1% QL (60 mL / 30 days)	1	QL
hydrocortisone valerate CREA .2%; OINT .2% QL (60 gm / 30 days)	1	QL
LEXETTE FOAM .05% QL (200 gm / 28 days)	1	QL PA
mometasone furoate CREA .1%; OINT .1%; SOLN .1%	1	
PRAMOSONE CRE 1-1%	3	
PRAMOSONE LOT 1-1%	3	
PRAMOSONE LOT 2.5%	3	
SYNALAR CREA .025%; OINT .025% QL (120 gm / 30 days)	3	QL
texacort SOLN 2.5%	1	
TOPICORT LIQD .25% QL (100 mL / 30 days)	3	QL PA
TOPICORT OINT .05% QL (100 gm / 30 days)	3	QL PA
tovet FOAM .05% QL (100 gm / 30 days)	1	QL
triamcinolone acetonide (topical) AERS .147mg/gm QL (100 gm / 30 days)	1	QL PA
triamcinolone acetonide (topical) CREA .025%, .1%, .5% QL (454 gm / 30 days)	1	QL
triamcinolone acetonide (topical) LOTN .025%, .1%; OINT .025%, .1%, .5%	1	
triamcinolone acetonide (topical) OINT .05% QL (430 gm / 30 days)	1	QL PA
triderm CREA .5% QL (454 gm / 30 days)	1	QL
ULTRAVATE LOTN .05% QL (120 mL / 30 days)	4	NDS QL PA
DERMATOLOGY, LOCAL ANESTHETICS		
DYCLOPRO SOLN .5%	3	
glydo PRSY 2% QL (60 mL / 30 days)	1	QL PA
lidocaine OINT 5% QL (50 gm / 30 days)	1	QL PA
lidocaine (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
lidocaine hcl GEL 2% QL (30 mL / 30 days)	1	QL PA
lidocaine hcl PRSY 2% QL (60 mL / 30 days)	1	QL PA
lidocaine hcl SOLN 4% QL (50 mL / 30 days)	1	QL PA
lidocaine-prilocaine cream 2.5-2.5% QL (30 gm / 30 days)	1	B/D QL
lidocan (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
QUTENZA KIT 8% 1-PCH QL (4 patches / 90 days)	4	NDS QL NM PA
QUTENZA KIT 8% 2-PCH QL (4 patches / 90 days)	4	NDS QL NM PA
QUTENZA KIT 8% 4-PCH QL (4 patches / 90 days)	4	NDS QL NM PA
tridacaine iii (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
ZTLIDO PTCH 1.8% QL (3 patches / 1 day)	3	QL PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
acyclovir topical (generic of ZOVIRAX) CREA 5% QL (5 gm / 30 days)	1	QL PA
acyclovir topical (generic of ZOVIRAX) OINT 5% QL (30 gm / 30 days)	1	QL
ANALPRAM HC LOT 2.5%	3	
ANUSOL-HC CREA 2.5%	3	
ANZUPGO CREA 20mg/gm QL (60 gm / 30 days)	4	NDS QL NM PA
azelaic acid (generic of FINACEA) GEL 15% QL (50 gm / 30 days)	1	QL
bexarotene (topical) (generic of TARGRETIN) GEL 1% QL (60 gm / 30 days)	4	NDS QL NM PA
brimonidine tartrate (topical) GEL .33% QL (30 gm / 30 days)	1	QL PA
CORTIFOAM FOAM 10%	3	

Drug Name	Drug Tier	Requirements/ Limits
DENAVIR CREA 1% QL (5 gm / 30 days)	3	QL
diclofenac sodium (actinic keratoses) GEL 3% QL (100 gm / 30 days)	1	QL PA
diclofenac sodium (topical) SOLN 1.5% QL (300 mL / 28 days)	1	QL
diclofenac sodium (topical) SOLN 2% QL (224 gm / 28 days)	1	QL PA
doxepin hcl (antipruritic) (generic of PRUDOXIN) CREA 5% QL (45 gm / 30 days)	1	QL PA
doxycycline (rosacea) (generic of ORACEA) CPDR 40mg	1	
EMROSI CP24 40mg QL (30 caps / 30 days)	4	NDS QL PA
EPSOLAY CREA 5% QL (30 gm / 30 days)	3	QL PA
EUCRISA OINT 2% QL (120 gm / 30 days)	3	QL PA
FINACEA FOAM 15% QL (50 gm / 30 days)	3	QL PA
fluorouracil (topical) CREA 5% QL (40 gm / 30 days)	1	QL
fluorouracil (topical) CREA .5% QL (30 gm / 30 days)	4	NDS QL
fluorouracil (topical) SOLN 2%, 5% QL (10 mL / 30 days)	1	QL
hydrocortisone (rectal) CREA 1%	1	
hydrocortisone (rectal) (generic of ANUSOL-HC) CREA 2.5%	1	
HYFTOR GEL .2% QL (20 gm / 25 days)	4	NDS QL NM PA
imiquimod (generic of ZYCLARA PUMP) CREA 3.75% QL (28 packets / 28 days)	1	QL
imiquimod CREA 5% QL (24 packets / 30 days)	1	QL
imiquimod pump (generic of ZYCLARA PUMP) CREA 3.75% QL (7.5 gm / 28 days)	1	QL
ivermectin (rosacea) (generic of SOOLANTRA) CREA 1% QL (45 gm / 30 days)	1	QL PA
KLISYRI OINT 1% QL (5 packets / 30 days)	4	NDS QL PA
lactic acid (ammonium lactate) CREA 12%; LOTN 12%	1	
metronidazole (topical) CREA .75%; GEL .75% QL (45 gm / 30 days)	1	QL
metronidazole (topical) GEL 1% QL (60 gm / 30 days)	1	QL
metronidazole (topical) LOTN .75% QL (59 mL / 30 days)	1	QL
MIRVASO GEL .33% QL (30 gm / 30 days)	3	QL PA
nitroglycerin (intra-anal) (generic of RECTIV) OINT .4% QL (30 gm / 30 days)	1	QL
NORITATE CREA 1% QL (60 gm / 30 days)	4	NDS QL PA
OPZELURA CREA 1.5% QL (240 gm / 28 days)	4	NDS QL PA
ORACEA CPDR 40mg	3	
oxymetazoline hcl (topical) (generic of RHOFADE) CREA 1% QL (30 gm / 30 days)	1	QL
PANRETIN GEL .1% QL (60 gm / 30 days)	4	NDS QL PA
penciclovir (generic of DENAVIR) CREA 1% QL (5 gm / 30 days)	1	QL
pimecrolimus CREA 1% QL (100 gm / 30 days)	1	QL PA
podofilox GEL .5% QL (7 gm / 28 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
podofilox SOLN .5% QL (7 mL / 28 days)	1	QL
procto-med hc (generic of ANUSOL-HC) CREA 2.5%	1	
proctocort CREA 1%	1	
PROCTOFOAM AER HC 1%	3	
proctosol hc (generic of ANUSOL-HC) CREA 2.5%	1	
proctozone-hc (generic of ANUSOL-HC) CREA 2.5%	1	
PRUDOXIN CREA 5% QL (45 gm / 30 days)	3	QL PA
QBREXZA PADS 2.4% QL (30 cloths / 30 days)	3	QL PA
RECTIV OINT .4% QL (30 gm / 30 days)	3	QL
RHOFADE CREA 1% QL (30 gm / 30 days)	3	QL
SOFDRA GEL 12.45% QL (50 mL / 30 days)	3	QL NM PA
SOOLANTRA CREA 1% QL (45 gm / 30 days)	3	QL PA
tacrolimus (topical) OINT .03%, .1% QL (100 gm / 30 days)	1	QL PA
TARGRETIN GEL 1% QL (60 gm / 30 days)	4	NDS QL NM PA
VALCHLOR GEL .016% QL (60 gm / 30 days)	4	NDS QL NM PA
XERESE CRE 5-1% QL (5 gm / 30 days)	4	NDS QL
YCANTH SOLN .7%	3	NM PA
ZELSUVMI GEL 10.3%	4	NDS PA
ZILXI FOAM 1.5% QL (30 gm / 30 days)	3	QL PA
ZONALON CREA 5% QL (45 gm / 30 days)	3	QL PA
ZORYVE CREA .05%, .15% QL (60 gm / 30 days)	3	QL PA
ZOVIRAX CREA 5% QL (5 gm / 30 days)	3	QL PA
ZOVIRAX OINT 5% QL (30 gm / 30 days)	3	QL
ZYCLARA PUMP CREA 3.75% QL (7.5 gm / 28 days)	4	NDS QL

Drug Name	Drug Tier	Requirements/ Limits
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
crotan LOTN 10% QL (454 gm / 30 days)	4	NDS QL PA
ELIMITE CREA 5% QL (60 gm / 30 days)	3	QL
EURAX CREA 10% QL (60 gm / 30 days)	3	QL PA
malathion LOTN .5% QL (59 mL / 30 days)	1	QL
NATROBA SUSP .9%	3	
OVIDE LOTN .5% QL (59 mL / 30 days)	3	QL
permethrin (generic of PERMETHRIN) CREA 5% QL (60 gm / 30 days)	1	QL
pruradik LOTN 10% QL (454 gm / 30 days)	4	NDS QL PA
spinosad SUSP .9%	1	
DERMATOLOGY, WOUND CARE AGENTS		
FILSUVEZ GEL 10% QL (30 tubes / 30 days)	4	NDS QL NM PA
SANTYL OINT 250unit/gm QL (180 gm / 30 days)	3	QL PA
sodium chloride (gu irrigant) SOLN .9%	1	
water for irrigation, sterile irrigation soln	1	
MOUTH/THROAT/DENTAL AGENTS		
cevimeline hcl (generic of EVOXAC) CAPS 30mg	1	
chlorhexidine gluconate (mouth-throat) (generic of PERIDEX) SOLN .12%	1	
clotrimazole TROC 10mg QL (150 lozenges / 30 days)	1	QL
EVOXAC CAPS 30mg	3	
kourzeq PSTE .1%	1	
lidocaine hcl (mouth-throat) SOLN 2%	1	
nystatin (mouth-throat) (generic of NYSTATIN) SUSP 100000unit/ml	1	
periogard (generic of PERIDEX) SOLN .12%	1	

Drug Name	Drug Tier	Requirements/ Limits
pilocarpine hcl (oral) (generic of SALAGEN) TABS 5mg, 7.5mg	1	
SALAGEN TABS 5mg, 7.5mg	3	
triamcinolone acetonide (mouth) PSTE .1%	1	

Index

A
abacavir sulfate.....10
abacavir sulfate-lamivudine tab 600-300 mg.....11
abigale.....81
abigale lo.....81
ABILIFY.....47
see *aripiprazole*.....47
ABILIFY ASIMTUFII.....47
ABILIFY MAINTENA.....47
abiraterone acetate.....18
abirtega.....18
ABRAXANE
see *paclitaxel inj 100mg*.....20
ABRAXANE INJ 100MG.20
ABRYSVO.....104
ABSORICA.....116
see *isotretinoin*.....117
ABSORICA LD.....116
acamprosate calcium.....69
ACANYA
see *clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%*.....117
ACANYA GEL 1.2-2.5%116
acarbose.....70
accutane.....116
acebutolol hcl.....35
acetaminophen.....1
acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg.....4
acetaminophen w/ codeine soln 120-12 mg/5ml.....4
acetaminophen w/ codeine tab 300-15 mg.....4
acetaminophen w/ codeine tab 300-30 mg.....4
acetaminophen w/ codeine tab 300-60 mg.....4
acetazolamide.....37
acetic acid.....93
acetic acid (otic).....110
acetylcysteine.....113
ACIPHEX.....92
see *rabeprazole sodium*.....93
acitretin.....119
ACTEMRA.....99
ACTEMRA ACTPEN.....99
ACTHAR.....83
ACTHAR GEL.....83
ACTHIB INJ.....104
ACTIMMUNE.....103
ACTIVELLA
see *abigale*.....81
see *estradiol & norethindrone acetate tab 1-0.5 mg*.....81
see *mimvey*.....81
ACTIVELLA TAB 1-0.5MG.....81
ACTONEL.....76
see *risedronate sodium*.....77
ACTOPLUS MET
see *pioglitazone hcl-metformin hcl tab 15-850 mg*.....73
ACTOPLUS MET TAB 15-850MG.....70
ACTOS.....70
see *pioglitazone hcl*.....73
ACULAR.....108
see *ketorolac tromethamine (ophth)*.....109
ACULAR LS.....108
ACUVAIL.....108
acyclovir.....12
acyclovir sodium.....12
acyclovir topical.....122
ACZONE.....116
see *dapsone (topical)*117
ADACEL INJ.....104
ADAKVEO.....97
ADALIMUMAB-BWWD...99
adapalene.....116
ADAPALENE.....116
adapalene-benzoyl peroxide gel 0.1-2.5%.....116
adapalene-benzoyl peroxide gel 0.3-2.5%.....116
ADBRY.....99
ADCIRCA.....40
see *alyq*.....40
see *tadalafil (pulmonary hypertension)*.....40
ADDERALL
see *amphetamine-dextroamphetamine tab 10 mg*.....58
see *amphetamine-dextroamphetamine tab 12.5 mg*.....58
see *amphetamine-dextroamphetamine tab 15 mg*.....58
see *amphetamine-dextroamphetamine tab 20 mg*.....58
see *amphetamine-dextroamphetamine tab 30 mg*.....58
see *amphetamine-dextroamphetamine tab 5 mg*.....58
see *amphetamine-dextroamphetamine tab 7.5 mg*.....58
ADDERALL TAB 10MG..57
ADDERALL TAB 12.5MG.....57
ADDERALL TAB 15MG..57
ADDERALL TAB 20MG..57
ADDERALL TAB 30MG..57
ADDERALL TAB 5MG....57
ADDERALL TAB 7.5MG.57
ADDERALL XR
see *amphetamine-dextroamphetamine cap er 24hr 10 mg*....57
see *amphetamine-dextroamphetamine cap er 24hr 15 mg*....58

see *amphetamine-dextroamphetamine cap er 24hr 20 mg*....58
see *amphetamine-dextroamphetamine cap er 24hr 25 mg*....58
see *amphetamine-dextroamphetamine cap er 24hr 30 mg*....58
see *amphetamine-dextroamphetamine cap er 24hr 5 mg*.....57
ADDERALL XR CAP 10MG 57
ADDERALL XR CAP 15MG 57
ADDERALL XR CAP 20MG 57
ADDERALL XR CAP 25MG 57
ADDERALL XR CAP 30MG 57
ADDERALL XR CAP 5MG 57
adefovir dipivoxil 12
ADEMPAS 40
ADMELOG 74
ADMELOG SOLOSTAR .74
ADRENALIN 38
see *epinephrine*.....39
ADVAIR DISKU AER 100/50 115
ADVAIR DISKU AER 250/50 115
ADVAIR DISKU AER 500/50 115
ADVAIR DISKUS
see *fluticasone-salmeterol aer powder ba 100-50 mcg/act*.116
see *fluticasone-salmeterol aer powder ba 250-50 mcg/act*.116
see *fluticasone-salmeterol aer powder ba 500-50 mcg/act*.116
see *wixela inhub*.....116
ADVAIR HFA AER 115/21 115
ADVAIR HFA AER 230/21 115
ADVAIR HFA AER 45/21 115
ADZENYS XR-ODT 57
see *amphetamine*.....57
ADZYNMA 97
AFINITOR 20
see *everolimus* 22
see *torpenz*.....26
see *yulithira* 27
AFINITOR DISPERZ.....20
see *everolimus* 22
afirmelle 78
AFREZZA.....74
AFREZZA POW 4-8-12...74
AFREZZA POW 4-8 UNIT 74
AFREZZA POW 8-12UNIT 74
AGRYLIN 97
see *anagrelide hcl* 97
AIMOVIG.....62
AIRSUPRA AER 90-80MCG 115
AJOVY 62
AKEEGA TAB 100/500 ...18
AKEEGA TAB 50/500MG 18
AKLIEF.....116
AKYNZEO CAP 300-0.5 .87
AKYNZEO INJ 235-0.25MG/20ML.....87
ala-cort 120
ala-scalp.....120
albendazole.....6
albuterol sulfate.....112
ALCAINE
see *proparacaine hcl* .110
alclometasone dipropionate 120
ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY 74
ALDACTONE 29
see *spironolactone* 29
ALDURAZYME 83
ALECENSA.....20
alendronate sodium 76
alfuzosin hcl 93
ALIMTA 17
aliskiren fumarate.....38
ALKINDI SPRINKLE 82
allopurinol.....1
allopurinol sodium 1
almotriptan malate 62
alogliptin benzoate 70
alogliptin-metformin hcl tab 12.5-1000 mg 71
alogliptin-metformin hcl tab 12.5-500 mg 70
alogliptin-pioglitazone tab 12.5-30 mg 71
alogliptin-pioglitazone tab 25-15 mg 71
alogliptin-pioglitazone tab 25-30 mg 71
alogliptin-pioglitazone tab 25-45 mg 71
ALOPRIM.....1
see *allopurinol sodium*...1
alosetron hcl.....90
ALPHAGAN P 109
see *brimonidine tartrate* 109
alprazolam 41
ALPRAZOLAM INTENSOL 41
ALREX 108
altavera 78
ALTRENO 116
ALUNBRIG.....20
ALUNBRIG PAK 21
ALVAIZ.....97
ALVESCO 115
alyacen 1/35.....78
alyacen 7/7/7.....78
ALYFTREK TAB 10-50-125 113
ALYFTREK TAB 4-20-50 113
ALYGLO.....103
ALYMSYS 21
alyq 40

amantadine hcl.....46
AMBIEN 61
see *zolpidem tartrate*...62
AMBIEN CR.....61
see *zolpidem tartrate*...62
AMBISOME.....9
see *amphotericin b liposome* 9
ambrisentan 40
amcinonide.....120
amethyst 78
amikacin sulfate 6
amiloride & hydrochlorothiazide tab 5-50 mg 37
amiloride hcl.....37
aminocaproic acid 97
aminosyn ii soln 15% 107
AMINOSYN INJ 10% 107
AMINOSYN-PF INJ 10% 107
AMINOSYN-PF INJ 7% 107
amiodarone hcl 33
AMITIZA.....91
see *lubiprostone* 91
amitriptyline hcl 43
AMLODIPINE/OLMESARTAN MED
see *amlodipine besylate-olmesartan medoxomil tab 10-20 mg*.....29
see *amlodipine besylate-olmesartan medoxomil tab 10-40 mg*.....29
see *amlodipine besylate-olmesartan medoxomil tab 5-20 mg*.....29
see *amlodipine besylate-olmesartan medoxomil tab 5-40 mg*.....29
amlodipine besylate 36
amlodipine besylate-atorvastatin calcium tab 10-10 mg 38
amlodipine besylate-atorvastatin calcium tab 10-20 mg 38
amlodipine besylate-atorvastatin calcium tab 10-40 mg 38
amlodipine besylate-atorvastatin calcium tab 10-80 mg 38
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg 38
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg 38
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg 38
amlodipine besylate-atorvastatin calcium tab 5-10 mg 38
amlodipine besylate-atorvastatin calcium tab 5-20 mg 38
amlodipine besylate-atorvastatin calcium tab 5-40 mg 38
amlodipine besylate-atorvastatin calcium tab 5-80 mg 38
amlodipine besylate-benazepril hcl cap 10-20 mg 27
amlodipine besylate-benazepril hcl cap 10-40 mg 28
amlodipine besylate-benazepril hcl cap 2.5-10 mg 27
amlodipine besylate-benazepril hcl cap 5-10 mg 27
amlodipine besylate-benazepril hcl cap 5-20 mg 27
amlodipine besylate-benazepril hcl cap 5-40 mg 27
amlodipine besylate-olmesartan medoxomil tab 10-20 mg 29
amlodipine besylate-olmesartan medoxomil tab 10-40 mg 29
amlodipine besylate-olmesartan medoxomil tab 5-20 mg 29
amlodipine besylate-olmesartan medoxomil tab 5-40 mg 29
amlodipine besylate-valsartan tab 10-160 mg 29
amlodipine besylate-valsartan tab 10-320 mg 29
*amlodipine besylate-valsartan tab 5-160 mg*29
*amlodipine besylate-valsartan tab 5-320 mg*29
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg.....29
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg.....30
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg.....30
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg.....29
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg.....29
amnesteem 116
AMOX/K CLAV CHW 200/28.5 15
AMOX/K CLAV CHW 400/57 15
amoxapine 43
amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg.....91
amoxicillin 15
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml 15

amoxicillin & k clavulanate for susp 250-62.5 mg/5ml 15
amoxicillin & k clavulanate for susp 400-57 mg/5ml 15
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml 15
amoxicillin & k clavulanate tab 250-125 mg 15
amoxicillin & k clavulanate tab 500-125 mg 15
amoxicillin & k clavulanate tab 875-125 mg 15
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg 15
amphetamine 57
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg 57
amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg 57
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg 57
amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg 57
amphetamine-dextroamphetamine cap er 24hr 10 mg 57
amphetamine-dextroamphetamine cap er 24hr 15 mg 58
amphetamine-dextroamphetamine cap er 24hr 20 mg 58
amphetamine-dextroamphetamine cap er 24hr 25 mg 58
amphetamine-dextroamphetamine cap er 24hr 30 mg 58
amphetamine-dextroamphetamine cap er 24hr 5 mg 57
amphetamine-dextroamphetamine tab 10 mg 58
amphetamine-dextroamphetamine tab 12.5 mg 58
amphetamine-dextroamphetamine tab 15 mg 58
amphetamine-dextroamphetamine tab 20 mg 58
amphetamine-dextroamphetamine tab 30 mg 58
amphetamine-dextroamphetamine tab 5 mg 58
amphetamine-dextroamphetamine tab 7.5 mg 58
amphotericin b 9
amphotericin b liposome ...9
ampicillin 15
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm 15
ampicillin & sulbactam sodium for inj 3 (2-1) gm 15
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm 15
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm 15
ampicillin sodium.....15
AMPYRA.....65
see *dalfampridine* 66
AMVUTTRA 64
AMZEEQ.....116
ANAFRANIL.....43
see *clomipramine hcl*...43
anagrelide hcl.....97
ANALPRAM HC LOT 2.5% 122
anastrozole 18
ANCOBON.....9
see *flucytosine*.....9
ANDEMBRY.....97
ANDROGEL PUMP
see *testosterone pump*70
ANNOVERA MIS 78
ANORO ELLIPT AER 62.5-25 110
ANUSOL-HC.....122
see *hydrocortisone (rectal)*.....123
see *procto-med hc*.....124
see *proctosol hc* 124
see *proctozone-hc*.....124
ANZUPGO 122
APIDRA.....74
APIDRA SOLOSTAR 74
APLENZIN 43
APOKYN.....46
apomorphine hydrochloride 46
APONVIE.....87
aprepitant.....87
aprepitant capsule therapy pack 80 & 125 mg 87
apri.....78
APRISO 89
see *mesalamine* 90
APTIOM 51
see *eslicarbazepine acetate* 52
APTIVUS.....10
AQNEURSA.....83
AQVESME 97
ARALAST NP.....113
aranelle 78
ARANESP ALBUMIN FREE.....96
ARAVA.....102
see *leflunomide* 102
ARAZLO.....116
ARBLI.....32
ARCALYST 103

AREXVY 104
arformoterol tartrate 112
ARICEPT 42
see *donepezil hydrochloride* 42
ARIKAYCE.....6
ARIMIDEX.....18
see *anastrozole* 18
aripiprazole 47
ARISTADA.....47
ARISTADA INITIO 47
ARIXTRA 95
see *fondaparinux sodium* 95
ARMLUPEG.....96
armodafinil 68, 69
ARNUITY ELLIPTA.....115
AROMASIN.....18
see *exemestane* 18
ARTHROTEC 50
see *diclofenac w/ misoprostol tab delayed release 50-0.2 mg* 1
ARTHROTEC 50 TAB.....1
ARTHROTEC 75
see *diclofenac w/ misoprostol tab delayed release 75-0.2 mg* 1
ARTHROTEC 75 TAB.....1
ARYNTA 58
asenapine maleate.....47
ashlyna.....78
ASMANEX HFA 115
ASMANEX TWISTHALER 120 ME 115
ASMANEX TWISTHALER 14 MET.....115
ASMANEX TWISTHALER 30 MET.....115
ASMANEX TWISTHALER 60 MET.....115
ASPARLAS 19
aspirin-dipyridamole cap er 12hr 25-200 mg 99
ASTAGRAF XL 103, 104
see *tacrolimus* 104
ATACAND.....32
see *candesartan cilexetil* 32
ATACAND HCT
see *candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg*.....30
see *candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg*.....30
see *candesartan cilexetil-hydrochlorothiazide tab 32-25 mg*.....30
ATACAND HCT TAB 16-12.5 30
ATACAND HCT TAB 32-12.5 30
ATACAND HCT TAB 32-25MG.....30
atazanavir sulfate.....10
ATELVIA 76
see *risedronate sodium* 77
atenolol 35
atenolol & chlorthalidone tab 100-25 mg 35
atenolol & chlorthalidone tab 50-25 mg 35
ATGAM 104
ATIVAN 41
see *lorazepam*.....42
ATMEKSI 67
atomoxetine hcl.....58
ATONCY 58
ATORVALIQ 34
atorvastatin calcium 34
atovaquone 6
atovaquone-proguanil hcl tab 250-100 mg 10
atovaquone-proguanil hcl tab 62.5-25 mg 10
ATRALIN.....116
see *tretinoin*.....118
atropine sulfate 89
ATROPINE SULFATE89, 110
see *atropine sulfate* 89
atropine sulfate (ophthalmic).....110
ATROVENT HFA 111
see *ipratropium bromide hfa*.....111
ATTRUBY 38
AUBAGIO.....65
see *teriflunomide* 67
aubra eq.....78
AUGMENTIN ES-600
see *amoxicillin & k clavulanate for susp 600-42.9 mg/5ml*.....15
AUGMENTIN SUS 125/5ML 15
AUGMENTIN SUS ES-600 15
AUGTYRO 21
aurovela 1/20 78
aurovela 24 fe 78
aurovela fe 1/20 78
aurovela fe 1.5/30 78
AUSTEDO.....64
AUSTEDO XR.....64
AUSTEDO XR TAB TITR KIT.....64
AUVELITY TAB 45-105MG 43
AUVELITY TAB TITRATIO 43
AVALIDE
see *irbesartan-hydrochlorothiazide tab 150-12.5 mg*.....31
see *irbesartan-hydrochlorothiazide tab 300-12.5 mg*.....31
AVALIDE TAB 150-12.5..30
AVALIDE TAB 300-12.5..30
AVAPRO 32
see *irbesartan*.....32
AVASTIN.....21
AVEED.....70
AVGEMSI.....17
aviane 78
AVLAYAH 83
AVMAPKI PAK FAKZYNJA 21

AVODART.....93
see *dutasteride*.....93
AVONEX.....65
AVONEX PEN.....65
AVOPEF 20
AVSOLA.....99
AVTOZMA.....99
AVYCAZ INJ 2-0.5GM 13
AWIQLI FLEXTOUCH.....74
AXTLE.....17
ayuna 78
AYVAKIT.....21
azacitidine.....17
AZACTAM.....6
azasan 104
AZASITE.....108
azathioprine 104
azelaic acid 122
azelastine hcl 111
azelastine hcl (ophth)....109
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act.....111
AZELEX 116
AZILECT 46
see *rasagiline mesylate* 47
azilsartan medoxomil 32
azithromycin.....14
AZMIRO 70
AZOPT 109
see *brinzolamide* 109
AZOR TAB 10-20MG.....30
AZOR TAB 10-40MG.....30
AZOR TAB 5-20MG.....30
AZOR TAB 5-40MG.....30
AZSTARYS CAP 26.1-5.2 58
AZSTARYS CAP 39.2-7.8 58
AZSTARYS CAP 52.3-10. 58
aztreonam.....6
AZULFIDINE.....89
see *sulfasalazine*.....90
AZULFIDINE EN-TABS ..89
see *sulfasalazine*.....90
azurette.....78

B

bacitracin-polymyxin b ophth oint.....108
bacitracin-polymyxin-neomycin-hc ophth oint 1% 107
baclofen 67
BACTRIM
see *sulfamethoxazole-trimethoprim tab 400-80 mg*.....8
BACTRIM DS
see *sulfamethoxazole-trimethoprim tab 800-160 mg*.....8
BACTRIM DS TAB 800-160 6
BACTRIM TAB 400-80MG6
BAFIERTAM 66
BALCOLTRA
see *joyeaux* 79
see *levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)* .79
see *minzoya* 79
BALCOLTRA TAB 0.1-20 78
balsalazide disodium.....89
BALVERSA.....21
balziva.....78
BANZEL.....51
see *rufinamide*.....55
BAQSIMI ONE PACK 83
BAQSIMI TWO PACK.....83
BARACLUDE.....12
see *entecavir*.....12
BASAGLAR KWIKPEN ...74
BAVENCIO 21
BAXDELA 14
BAXFENDY.....38
BCG VACCINE 105
beclomethasone dipropionate.....115
BEIZRAY.....20
BEIZRAY INJ 160/8ML ...20
BEIZRAY INJ 80MG/4ML 20
BELBUCA 3
BELEODAQ 21
BELSOMRA.....61
benazepril & hydrochlorothiazide tab 10-12.5 mg 28
benazepril & hydrochlorothiazide tab 20-12.5 mg 28
benazepril & hydrochlorothiazide tab 20-25 mg 28
benazepril & hydrochlorothiazide tab 5-6.25mg 28
benazepril hcl.....28
bendamustine hcl.....16
BENDAMUSTINE HYDROCHLORID 16
BENDEKA.....16
BENICAR.....32
see *olmesartan medoxomil* 33
BENICAR HCT
see *olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg*.....31
see *olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg*.....31
see *olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg*.....31
BENICAR HCT TAB 20-12.5 30
BENICAR HCT TAB 40-12.5 30
BENICAR HCT TAB 40-25MG.....30
BENLYSTA 104
BENTYL
see *dicyclomine hcl* 89
BENZAMYCIN
see *benzoyl peroxide-erythromycin gel 5-3%* 116

BENZAMYCIN GEL 5-3% 116
benzoyl peroxide-erythromycin gel 5-3% 116
benztropine mesylate.....46
BEOVU 110
bepotastine besilate.....109
BEPREVE.....109
BERINERT.....97
besifloxacin hcl.....108
BESIVANCE 108
BESPONSA 21
BESREMI.....19
BESREMI PEN 19
betaine powder for oral solution.....83
betamethasone dipropionate (topical).120
betamethasone dipropionate augmented 120
betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml 82
betamethasone valerate 120
BETAPACE.....33
see *sotalol hcl*.....33
BETAPACE AF 33
see *sotalol hcl (afib/afl)*33
BETASERON.....66
betaxolol hcl.....35
betaxolol hcl (ophth).....109
bethanechol chloride.....93
BETHKIS.....6
see *tobramycin*.....8
BETIMOL 109
see *timolol hemihydrate (ophth)* 109
BEVESPI AER 9-4.8MCG 111
bexarotene.....19
bexarotene (topical) 122
BEXSERO.....105
BEYAZ
see *drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg* 78
BEYAZ TAB 78
BIAXIN XL
see *clarithromycin* 14
bicalutamide.....18
BICILLIN C-R INJ 1200000 15
BICILLIN C-R INJ 900/300 15
BICILLIN L-A.....15
BIDIL
see *isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg*.....39
BIDIL TAB.....38
BIJUVA CAP 0.5-100.....81
BIJUVA CAP 1-100MG...81
BIKTARVY TAB 30-120-15 MG.....11
BIKTARVY TAB 50-200-25 MG.....11
BILDYOS 76
bimatoprost 109
BIMZELX.....99
BINOSTO.....76
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg 91
bisoprolol & hydrochlorothiazide tab 10-6.25 mg 35
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg 35
bisoprolol & hydrochlorothiazide tab 5-6.25 mg 35
bisoprolol fumarate 35
BIVIGAM.....103
BKEMV 97
BLENREP 21
bleomycin sulfate 19
blisovi 24 fe.....78
blisovi fe 1/20.....78
blisovi fe 1.5/30.....78
BLUJEPA.....6
BONJESTA TAB 20-20MG 87
BONSITY 76
BOOSTRIX INJ.....105
bortezomib 21
BORTEZOMIB 21
BORUZU.....21
bosentan 40
BOSULIF.....21
see *bosutinib* 21
bosutinib.....21
BOTOX 67
BRAFTOVI.....21
BREKIYA 62
BREO ELLIPTA INH 100-25 116
BREO ELLIPTA INH 200-25 116
BREO ELLIPTA INH 50-25MCG.....115
breyna.....116
BREZTRI AERO AER 18MCG.....111
BREZTRI AERO AER 9MCG.....111
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) 111
briellyn.....78
BRILINTA.....99
see *ticagrelor*.....99
brimonidine tartrate.....109
brimonidine tartrate (topical).....122
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% 109
BRINSUPRI 113
brinzolamide.....109
BRIUMVI.....66
brivaracetam 51
BRIVIACT 51
see *brivaracetam*.....51
BRIXADI.....69
bromfenac sodium (ophth) 108

bromocriptine mesylate...46
BROMSITE 108
see *bromfenac sodium (ophth)* 108
BRUKINSA.....21
BRYHALI.....120
BRYNOVIN 71
BUCAPSOL 41
budesonide 89
budesonide (inhalation).115
budesonide (intrarectal) ..89
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act.....116
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act.....116
bumetanide 37
BUPHENYL.....83
see *sodium phenylbutyrate* 86
buprenorphine.....3
buprenorphine hcl 69
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv).....69
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv).....69
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv).....69
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv).....69
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv).....69
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv).....69
bupropion hcl 43
bupropion hcl (smoking deterrent).....69
buspirone hcl.....41
butorphanol tartrate.....4
BUTRANS.....3
see *buprenorphine* 3
BYLVAY 91
BYLVAY (PELLETS).....91
BYNFEZIA PEN 83
BYOOVIZ 110
BYQLOVI 108
BYSANTI.....47
BYSANTI TAB PACK A ..47
BYSANTI TAB PACK B ..47
BYSANTI TAB PACK C ..47
BYSTOLIC 35
see *nebivolol hcl*.....36

C

cabergoline 83
CABLIVI 97
CABOMETYX 21
CABTREO GEL 117
CADUET
see *amlodipine besylate-atorvastatin calcium tab 10-10 mg*.....38
see *amlodipine besylate-atorvastatin calcium tab 10-20 mg*.....38
see *amlodipine besylate-atorvastatin calcium tab 10-40 mg*.....38
see *amlodipine besylate-atorvastatin calcium tab 10-80 mg*.....38
see *amlodipine besylate-atorvastatin calcium tab 5-10 mg*.....38
see *amlodipine besylate-atorvastatin calcium tab 5-20 mg*.....38
see *amlodipine besylate-atorvastatin calcium tab 5-40 mg*.....38
see *amlodipine besylate-atorvastatin calcium tab 5-80 mg*.....38
CADUET TAB 10-10MG .38
CADUET TAB 10-20MG .38
CADUET TAB 10-40MG .38
CADUET TAB 10-80MG .38
CADUET TAB 5-10MG ...38
CADUET TAB 5-20MG ...38
CADUET TAB 5-40MG ...38
CADUET TAB 5-80MG ...38
CAFERGOT TAB 1-100MG 62
calcipotriene.....119
CALCIPOTRIENE 119
calcipotriene-betamethasone dipropionate oint 0.005-0.064% 119
calcipotriene-betamethasone dipropionate susp 0.005-0.064% 119
calcitonin (salmon) inj 76
calcitonin (salmon) spray 76
calcitrene.....119
calcitriol 87
calcitriol (oral).....87
calcitriol (topical) 119
CALQUENCE.....21
CAMBIA 62
see *diclofenac potassium (migraine)*.....62
CAMCEVI.....18
camila.....78
CAMPTOSAR 19
see *irinotecan hcl* 19
camrese 78
camrese lo 78
CAMZYOS 38
CANASA 89
see *mesalamine* 90
CANCIDAS 9
candesartan cilexetil 32
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg 30
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg 30
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg 30
CAPLYTA.....47
CAPRELSA.....21
captopril 28

captopril & hydrochlorothiazide tab 25-15 mg 28
captopril & hydrochlorothiazide tab 25-25 mg 28
captopril & hydrochlorothiazide tab 50-15 mg 28
captopril & hydrochlorothiazide tab 50-25 mg 28
CARAFATE.....91
see *sucralfate* 92
carb/levo orally disintegrating tab 10-100mg 46
carb/levo orally disintegrating tab 25-100mg 46
carb/levo orally disintegrating tab 25-250mg 46
CARBAGLU 83
see *carglumic acid*.....83
carbamazepine 51
CARBATROL.....51
see *carbamazepine*.....51
carbidopa 46
carbidopa & levodopa cap er 23.75-95 mg.....46
carbidopa & levodopa cap er 36.25-145 mg.....46
carbidopa & levodopa cap er 48.75-195 mg.....46
carbidopa & levodopa cap er 61.25-245 mg.....46
carbidopa & levodopa tab 10-100 mg 46
carbidopa & levodopa tab 25-100 mg 46
carbidopa & levodopa tab 25-250 mg 46
carbidopa & levodopa tab er 25-100 mg.....46
carbidopa & levodopa tab er 50-200 mg.....46
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg 46
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg 46
carbidopa-levodopa-entacapone tabs 25-100-200 mg 46
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg 46
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg 46
carbidopa-levodopa-entacapone tabs 50-200-200 mg 46
carbinoxamine maleate.111
carboplatin 16
carbzah 111
CARDAMYST 36
CARDIZEM 36
see *diltiazem hcl*.....36
CARDIZEM CD 36
see *cartia xt* 36
see *diltiazem hcl coated beads*.....36
CARDIZEM LA.....36
see *diltiazem hcl*.....36
see *matzim la* 36
CARDURA 29
see *doxazosin mesylate* 29
CARDURA XL.....93
carglumic acid 83
carisoprodol 67, 68
CARNITOR 83
see *levocarnitine (metabolic modifiers)* 84
CAROSPIR 29
see *spironolactone* 29
carteolol hcl (ophth) 109
cartia xt 36
carvedilol.....35
carvedilol phosphate.....35
CASODEX 18
see *bicalutamide* 18
caspofungin acetate.....9
CASPOFUNGIN ACETATE 9
see *caspofungin acetate* 9
CATAPRES-TTS-1
see *clonidine* 38
CATAPRES-TTS-2
see *clonidine* 38
CATAPRES-TTS-3
see *clonidine* 38
CAVHANZA 21
CAYSTON.....6
cefaclor 13
CEFACLOR ER 13
cefadroxil.....13
CEFAZOLIN.....13
CEFAZOLIN/DEX SOL 1GM/50ML-4% 13
CEFAZOLIN/DEX SOL 2GM/50ML-3% 13
CEFAZOLIN/DEX SOL 3GM/150ML-4% 13
CEFAZOLIN/DEX SOL 3GM/50ML-2% 13
CEFAZOLIN INJ 1GM/50ML.....13
cefazolin sodium 13
CEFAZOLIN SOLN 2GM/100ML-4% 13
cefdinir 13
CEFEPIME.....13
CEFEPIME/DEX INJ 1GM 13
CEFEPIME/DEX INJ 2GM 13
cefepime hcl.....13
cefixime.....14
CEFOTAN
see *cefotetan disodium* 14
cefotetan disodium.....14
CEFOXITIN INJ 1GM.....14
CEFOXITIN INJ 2GM.....14
cefoxitin sodium 14
cefpodoxime proxetil.....14
cefprozil.....14

ceftaroline fosamil 14
ceftazidime 14
ceftriaxone sodium 14
cefuroxime axetil 14
cefuroxime sodium 14
CELEBREX 1
see *celecoxib* 1
celecoxib 1
CELESTONE INJ SOLUSPAN 82
CELESTONE SOLUSPAN
see *betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml* 82
CELEXA 43
see *citalopram hydrobromide* 43
CELLCEPT 104
see *mycophenolate mofetil* 104
CELONTIN 51
see *methsuximide* 54
cephalexin 14
CEQUA 110
CEQUR EXT WR MIS INSERTER 74
CEQUR SIMPL KIT 1U EXTND 75
CEQUR SIMPL KIT 2U EXTND 75
CEQUR SIMPL KIT PATCH 2U (3-DAY) 75
CEQUR SIMPL KIT PATCH 2U (4-DAY) 75
CEQUR SIMPL MIS INSERTER 75
CERDELGA 83
CEREZYME 83
cetirizine hcl 111
CETRAXAL
see *ciprofloxacin hcl (otic)* 110
cevimeline hcl 124
CHANTIX 69
see *varenicline tartrate* 70
CHANTIX CONTINUING MONTH 69
CHANTIX TAB 0.5& 1MG 69
chateal eq 78
CHEMET 77
chlordiazepoxide hcl 41
chlorhexidine gluconate (mouth-throat) 124
chloroquine phosphate 10
chlorpromazine hcl 47
chlorthalidone 37
CHOLBAM 91
cholestyramine 34
cholestyramine light 34
choline fenofibrate 33
CHORIONIC GONADOTROPIN 83
CIALIS 93
see *tadalafil* 93
CIBINQO 99
ciclopirox 118
ciclopirox olamine 118
cidofovir 12
cilostazol 97
CILOXAN 108
CIMDUO TAB 300-300 11
CIMERLI 110
cimetidine 89
cimetidine hcl 89
CIMZIA 99
CIMZIA (1 SYRINGE) 99
CIMZIA (2 SYRINGE) 99
CIMZIA STARTER KIT 99
cinacalcet hcl 83
CINQAIR 113
CINRYZE 97
CINVANTI 87
CIPRO 14
see *ciprofloxacin hcl* 15
ciprofloxacin 200 mg/100ml in d5w 14
ciprofloxacin 400 mg/200ml in d5w 14
ciprofloxacin-dexamethasone otic susp 0.3-0.1% 110
ciprofloxacin hcl 15
ciprofloxacin hcl (ophth) 108
ciprofloxacin hcl (otic) 110
ciprofloxacin-hydrocortisone otic susp 0.2-1% 110
CIPRO HC
see *ciprofloxacin-hydrocortisone otic susp 0.2-1%* 110
CIPRO HC SUS 0.2-1%OT 110
cisplatin 16
CISPLATIN
see *cisplatin* 16
citalopram hydrobromide 43
CITALOPRAM HYDROBROMIDE 43
see *citalopram hydrobromide* 43
cladribine (10 tabs) 66
cladribine (4 tabs) 66
cladribine (5 tabs) 66
cladribine (6 tabs) 66
cladribine (7 tabs) 66
cladribine (8 tabs) 66
cladribine (9 tabs) 66
claravis 117
CLARINEX 111
see *desloratadine* 112
CLARINEX-D TAB 2.5-120 111
clarithromycin 14
clemastine fumarate 111, 112
CLEMSZA 112
CLENPIQ SOL 10 MG-3.5 GM-12 GM/175ML 90
CLEOCIN 6, 94
see *clindamycin hcl* 7
see *clindamycin phosphate vaginal* 94
CLEOCIN PEDIATRIC GRANULE 7
see *clindamycin palmitate hydrochloride* 7
CLEOCIN PHOSPHATE 7
see *clindamycin phosphate* 7
CLEOCIN-T 117

see *clindamycin phosphate (topical)* 117
CLIGAVYX.....18
CLIMARA.....81
see *estradiol*.....81
CLIMARA PRO DIS WEEKLY 81
clindacin.....117
clindacin etz pledgets....117
clindacin-p.....117
CLINDAGEL.....117
see *clindamycin phosphate (topical)* 117
clindamycin hcl.....7
clindamycin palmitate hydrochloride.....7
clindamycin phosphate 7
clindamycin phosphate (topical).....117
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% 117
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% 117
clindamycin phosphate-benzoyl peroxide gel 1-5% 117
clindamycin phosphate in d5w iv soln 300 mg/50ml 7
clindamycin phosphate in d5w iv soln 600 mg/50ml 7
clindamycin phosphate in d5w iv soln 900 mg/50ml 7
clindamycin phosphate-tretinoin gel 1.2-0.025% 117
clindamycin phosphate vaginal.....94
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%.....117
CLINDESSE.....95
CLINDMYC/NAC INJ 300/50ML 7
CLINDMYC/NAC INJ 600/50ML 7
CLINDMYC/NAC INJ 900/50ML 7
CLINIMIX E INJ 2.75/D5W 107
CLINIMIX E INJ 4.25/D10 107
CLINIMIX E INJ 4.25/D5W 107
CLINIMIX E INJ 5%/D15W 107
CLINIMIX E INJ 5%/D20W 107
CLINIMIX E INJ 8/10.....107
CLINIMIX E INJ 8/14.....107
CLINIMIX INJ 4.25/D10 107
CLINIMIX INJ 4.25/D5W 107
CLINIMIX INJ 5%/D15W 107
CLINIMIX INJ 5%/D20W 107
CLINIMIX INJ 6/5.....107
CLINIMIX INJ 8/10.....107
CLINIMIX INJ 8/14.....107
clinisol sf 15% 107
CLINOLIPID EMU 20%.107
clobazam.....51
clobetasol propionate....120
CLOBETASOL PROPIONATE.....120
clobetasol propionate emo 120
clobetasol propionate emulsion.....120
CLOBEX
see *clobetasol propionate*.....120
clocortolone pivalate.....120
clodan 120
clomipramine hcl.....43
clonazepam.....51
clonidine.....38
clonidine hcl 38
clonidine hcl (analgesia) ...1
clopidogrel bisulfate 99
clorazepate dipotassium .51
clotrimazole.....124
clotrimazole (topical) 118
clotrimazole w/ betamethasone cream 1-0.05% 118
clozapine.....48
CLOZARIL 48
see *clozapine* 48
COARTEM TAB 20-120MG 10
COBENFY CAP 100-20MG 48
COBENFY CAP 125-30MG 48
COBENFY CAP 50-20MG 48
COBENFY STRT CAP PACK.....48
codeine sulfate.....4
CODEINE SULFATE 4
colchicine 1
colchicine w/ probenecid tab 0.5-500 mg 1
colesevelam hcl 34
COLESTID.....34
see *colestipol hcl*.....34
colestipol hcl 34
colistimethate sodium 7
COLUMVI.....21
COLY-MYCIN M 7
see *colistimethate sodium* 7
COMBIGAN
see *brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%*.....109
COMBIGAN SOL 0.2/0.5% 109
COMBIPATCH DIS.....81
COMBIVENT AER 20-100 111
COMBOGESIC INJ 300-1000 1
COMETRIQ (60MG DOSE) 21
COMETRIQ KIT 100MG .21
COMETRIQ KIT 140MG .21
COMPLERA

see *emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg* ..11
COMPLERA TAB.....11
compro.....87
CONCERTA.....58
see *methylphenidate hcl* 60
constulose.....90
CONTEPO 7
CONZIP 3
COPAXONE.....66
see *glatiramer acetate*.66
see *glatopa*.....66
COPIKTRA.....21
CORDRAN.....120
COREG.....35
see *carvedilol* 35
COREG CR.....35
see *carvedilol phosphate* 35
CORLANOR.....38
see *ivabradine hcl* 39
corphena.....112
CORTEF 82
see *hydrocortisone*.....82
CORTENEMA.....89
see *hydrocortisone (intrarectal)*.....90
CORTIFOAM 122
CORTISONE ACETATE .82
CORTISPORIN SUS -TC OTIC.....110
CORTROPHIN.....83
COSENTYX 99
COSENTYX SENSOREADY PEN ...99
COSENTYX UNOREADY 99
COSOPT
see *dorzolamide hcl-timolol maleate ophth soln 2-0.5%*.....109
COSOPT PF
see *dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%*..109
COSOPT PF SOL 2%-0.5% 109
COSOPT SOL 2-0.5%OP 109
COTELLIC 21
COTEMPLA XR-ODT 58
COZAAR.....32
see *losartan potassium* 33
CRENESSITY.....83
CREON CAP 12000UNT 91
CREON CAP 24000UNT 91
CREON CAP 3000UNIT .91
CREON CAP 36000UNT 91
CREON CAP 6000UNIT .91
CRESEMBA.....9
CRESTOR 34
see *rosuvastatin calcium* 34
CREXONT CAP 35-140MG 46
CREXONT CAP 52.5-210 46
CREXONT CAP 70-280MG 46
CREXONT CAP 87.5-350 46
CRINONE 86
cromolyn sodium.....113
cromolyn sodium (mastocytosis) 91
cromolyn sodium (ophth) 109
crotan.....124
cryselle.....78
CRYSVITA.....84
CUTAQUIG.....103
CUVITRU.....103
CUVPOSA 89
see *glycopyrrolate (oral)* 89
CUVRIOR 77
cyclobenzaprine hcl 68
cyclophosphamide 16, 17
CYCLOPHOSPHAMIDE16, 17
see *cyclophosphamide*16
CYCLOPHOSPHAMIDE MONOHYDR.....17
cycloserine.....12
cyclosporine.....104
cyclosporine modified (for microemulsion).....104
CYKLOKAPRON
see *tranexamic acid* 98
cyproheptadine hcl.....112
CYRAMZA 21
cyred eq 78
CYSTADANE
see *betaine powder for oral solution* 83
CYSTADANE POW 84
CYSTADROPS 110
CYSTAGON.....84
CYSTARAN 110
cytarabine 17
CYTOGAM.....103
CYTOMEL.....86
see *liomny* 87
see *liothyronine sodium* 87
CYTOTEC.....91
see *misoprostol* 91

D

D10W/NACL INJ 0.2%..105
D10W/NACL INJ 0.45%105
D2.5W/NACL INJ 0.45% 105
D5W/LYTES INJ #48 105
D5W/NACL INJ 0.2%....105
D5W/NACL INJ 0.3%....105
D5W/NACL INJ 0.45%..105
D5W/NACL INJ 0.9%....105
dabigatran etexilate mesylate.....95
dacarbazine 19
dalbavancin hcl 7
dalfampridine 66
DALIRESP 113
see *roflumilast* 114
DALVANCE.....7
see *dalbavancin hcl*.....7
danazol 70
DANTRIUM.....68
see *dantrolene sodium*68

dantrolene sodium 68
DANZITEN 21
dapagliflozin 71
dapagliflozin-metformin hcl tab er 24hr 10-1000 mg 71
dapagliflozin-metformin hcl tab er 24hr 10-500 mg.71
dapagliflozin-metformin hcl tab er 24hr 5-1000 mg.71
dapagliflozin-metformin hcl tab er 24hr 5-500 mg...71
dapagliflozin-saxagliptin tab 10-5 mg 71
dapsone 7
dapsone (topical) 117
DAPTACEL INJ.....105
DAPTOMY/NACL INJ 350/50ML 7
DAPTOMY/NACL INJ 500/50ML 7
daptomycin.....7
DAPTOMYCIN 7
see *daptomycin* 7
DARAPRIM 7
see *pyrimethamine* 8
darifenacin hydrobromide 94
darunavir 10
DARZALEX 21
DARZALEX INJ FASPRO 21
dasatinib.....21
dasetta 1/35 78
dasetta 7/7/7 78
DATROWAY 21
DAURISMO.....22
DAWNZERA 97
DAXXIFY.....68
DAYBUE 64
DAYBUE STIX 64
daysee 78
DAYTRANA 58
see *methylphenidate* ...60
DAYVIGO.....61
DDAVP.....84
see *desmopressin acetate* 84
deblitane 78
decitabine.....17
deferasirox 77
deferiprone.....77
deferoxamine mesylate...77
DELESTROGEN.....81
see *estradiol valerate* ..81
DELSTRIGO TAB 11
demeclocycline hcl.....16
DEMSER.....38
DENAVIR 123
see *penciclovir*.....123
DEPAKOTE 51
see *divalproex sodium*.52
DEPAKOTE ER 51
see *divalproex sodium*.52
DEPAKOTE SPRINKLES 51
see *divalproex sodium*.52
DEPEN TITRATABS.....77
see *penicillamine*.....77
DEPO-ESTRADIOL 81
DEPO-MEDROL 82
see *methylprednisolone acetate* 82
DEPO-PROVERA CONTRACEPTIV 78
see *medroxyprogesterone acetate (contraceptive)* 79
DEPO-SUBQ PROVERA 104 78
depo-testosterone 70
DERMA-SMOOTHE/FS BODY 120
see *fluocinolone acetonide* 121
DERMA-SMOOTHE/FS SCALP.....120
see *fluocinolone acetonide* 121
DERMOTIC.....110
see *flac* 110
see *fluocinolone acetonide (otic)* 110
DESCOVY TAB 120-15MG 11
DESCOVY TAB 200/25MG 11
DESFERAL 77
see *deferoxamine mesylate* 77
desipramine hcl.....43
desloratadine 112
DESMODA.....84
desmopressin acetate.....84
desmopressin acetate spray.....84
desmopressin acetate spray refrigerated 84
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) 78
desonide 120
desoximetasone....120, 121
DESVENLAFAXINE ER..43
*desvenlafaxine succinate*43
dexamethasone 82
DEXAMETHASONE INTENSOL 82
dexamethasone sodium phosphate.....82
dexamethasone sodium phosphate (ophth) 108
DEXEDRINE 58
see *dextroamphetamine sulfate* 59
DEXILANT 92
see *dexlansoprazole* ...92
dexlansoprazole.....92
DEXLYT 82
*dexmethylphenidate hcl*58, 59
dexrazoxane hcl.....19
dextroamphetamine sulfate 59
dextromethorphan hbr-quinidine sulfate cap 20-10 mg 64
dextrose 107
DEXTROSE/SODIUM CHLORIDE
see *dextrose 5% w/ sodium chloride 0.225%*.....106

DEXTROSE 10% 107
see *dextrose* 107
DEXTROSE 2.5%/SODIUM CHLO
see *dextrose 2.5% w/ sodium chloride 0.45%* 105
dextrose 2.5% w/ sodium chloride 0.45% 105
DEXTROSE 5%/SODIUM CHLORI
see *dextrose 5% w/ sodium chloride 0.3%* 105
see *dextrose 5% w/ sodium chloride 0.45%* 106
see *dextrose 5% w/ sodium chloride 0.9%* 105
dextrose 5% in lactated ringers 105
dextrose 5% w/ sodium chloride 0.225% 106
dextrose 5% w/ sodium chloride 0.3% 105
dextrose 5% w/ sodium chloride 0.45% 106
dextrose 5% w/ sodium chloride 0.9% 105
DEXTROSE 70% 107
DEXYCU 108
DHIVY TAB 25-100MG ...46
DIACOMIT 51
diazepam 51, 52
diazepam (anticonvulsant) 52
diazepam inj 52
diazepam intensol 52
diazoxide 83
dichlorphenamide 37
DICLEGIS
see *doxylamine-pyridoxine tab delayed release 10-10 mg* 87
DICLEGIS TAB 10-10MG 87
diclofenac potassium 1
diclofenac potassium (migraine) 62
diclofenac sodium 1
diclofenac sodium (actinic keratoses) 123
diclofenac sodium (ophth) 108
diclofenac sodium (topical) 123
diclofenac w/ misoprostol tab delayed release 50-0.2 mg 1
diclofenac w/ misoprostol tab delayed release 75-0.2 mg 1
dicloxacillin sodium 15
dicyclomine hcl 89
DIFFERIN
see *adapalene* 116
DIFFERIN PUMP 117
DIFICID 14
see *fidaxomicin* 14
diflorasone diacetate 121
DIFLUCAN 9
see *fluconazole* 9
diflunisal 1
difluprednate 108
digoxin 38, 39
dihydroergotamine mesylate 62
DILANTIN 52
see *phenytoin sodium extended* 55
DILANTIN-125 52
see *phenytoin* 54
DILANTIN INFATABS 52
see *phenytoin* 54
DILAUDID 4
see *hydromorphone hcl* .5
diltiazem hcl 36
diltiazem hcl coated beads 36
diltiazem hcl extended release beads 36
dilt-xr 36
DIMENHYDRINATE 87
dimethyl fumarate 66
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg 66
dimethyl sulfoxide 93
DIOVAN 32
see *valsartan* 33
DIOVAN HCT
see *valsartan-hydrochlorothiazide tab 160-12.5 mg* 32
see *valsartan-hydrochlorothiazide tab 160-25 mg* 32
see *valsartan-hydrochlorothiazide tab 320-12.5 mg* 32
see *valsartan-hydrochlorothiazide tab 320-25 mg* 32
see *valsartan-hydrochlorothiazide tab 80-12.5 mg* 32
DIOVAN HCT TAB 160-12.5 30
DIOVAN HCT TAB 160-25MG 30
DIOVAN HCT TAB 320-12.5 30
DIOVAN HCT TAB 320-25MG 30
DIOVAN HCT TAB 80-12.5 30
DIPENTUM 89
diphenhydramine hcl 112
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml 91
diphenoxylate w/ atropine tab 2.5-0.025 mg 91
DIPROLENE 121
see *betamethasone dipropionate augmented* 120
dipyridamole 99
disopyramide phosphate .33
disulfiram 69
DIURIL 37
divalproex sodium 52
DIVIGEL 81

see *estradiol* 81
docetaxel.....20
DOCETAXEL 20
see *docetaxel* 20
DOCIVYX.....20
dofetilide.....33
DOJOLVI.....84
dolishale.....78
DOLOBID.....1
donepezil hydrochloride..42
DOPTELET.....97
DOPTELET SPRINKLE ..97
DORYX MPC 16
dorzolamide hcl.....109
dorzolamide hcl-timolol maleate ophth soln 2-0.5% 109
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% 109
dotti 81
DOVATO TAB 50-300MG 11
doxazosin mesylate 29
doxepin hcl.....43
*doxepin hcl (antipruritic)*123
doxepin hcl (sleep).....61
doxercalciferol.....87
DOXIL 19
see *doxorubicin hcl liposomal*.....19
doxorubicin hcl.....19
*doxorubicin hcl liposomal*19
DOXORUBICIN HYDROCHLORIDE.....19
see *doxorubicin hcl*.....19
doxy 100 16
doxycycline (monohydrate) 16
doxycycline (rosacea) ...123
doxycycline hyclate.....16
doxylamine-pyridoxine tab delayed release 10-10 mg 87
DRIZALMA SPRINKLE ...43
dronabinol 87, 88
*drospirenone-ethinyl estradiol tab 3-0.02 mg*78
*drospirenone-ethinyl estradiol tab 3-0.03 mg*78
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg.....78
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg.....78
DROXIA 97
droxidopa 39
DUAKLIR AER 400/12 ..111
DUETACT
see *pioglitazone hcl-glimepiride tab 30-2 mg*.....73
see *pioglitazone hcl-glimepiride tab 30-4 mg*.....73
DUETACT TAB 30-2MG .71
DUETACT TAB 30-4MG .71
DULERA AER 100-5MCG 116
DULERA AER 200-5MCG 116
DULERA AER 50-5MCG 116
duloxetine hcl.....43
DULOXETINE HYDROCHLORIDE.....43
DUOBRII LOT.....121
DUOPA SUS 4.63-20.....46
DUPIXENT.....100
DURACLON.....1
see *clonidine hcl (analgesia)* 1
DUREZOL.....108
see *difluprednate*.....108
dutasteride 93
dutasteride-tamsulosin hcl cap 0.5-0.4 mg 93
DUVYZAT 64
DW5-NACL INJ 0.225%106
DYANAVEL XR.....59
DYCLOPRO.....122
DYMISTA
see *azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act* 111
DYMISTA SPR 137-50 .111
DYRENIUM.....37
see *triamterene* 38
DYSPORT.....68
E
e.e.s. 400 14
E.E.S. GRANULES
see *erythromycin ethylsuccinate*.....14
EBGLYSS 100
econazole nitrate.....118
ECONAZOLE NITRATE 118
edaravone.....64
EDARBI.....32
see *azilsartan medoxomil* 32
EDARBYCLOR TAB 40-12.5 30
EDARBYCLOR TAB 40-25MG.....30
EDECRIN.....37
see *ethacrynic acid*.....37
EDLUAR 61
EDURANT.....10
see *rilpivirine hcl*.....11
EDURANT PED 10
efavirenz 10
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg 11
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg 11
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg 11
EFFEXOR XR.....44
see *venlafaxine hcl*.....45
EFFIENT.....99
see *prasugrel hcl*.....99
EGRIFTA SV.....84
EGRIFTA WR 84
EKTERLY.....97
ELAHERE 22
ELAPRASE.....84

ELELYSO.....84
ELEPSIA XR.....52
ELESTRIN.....81
eletriptan hydrobromide..62
ELFABRIO.....84
ELIGARD.....18
ELIMITE.....124
elinest.....78
ELIQUIS.....95
ELIQUIS (1.5MG PACK) 3 X.....95
ELIQUIS (2MG PACK) 4 X.....95
ELIQUIS STARTER PACK.....95
ELITEK.....19
elixophyllin.....113
ELLENCE.....19
ELMIRON.....93
eltrombopag olamine.....97
eluryng.....78
ELYXYB.....62
EMBLAVEO INJ 2GM.....7
EMEND.....88
see *fosaprepitant dimeglumine*.....88
EMEND BIPACK.....88
see *aprepitant*.....87
EMEND TRIPAC CAP 125 & 80.....88
EMGALITY.....62, 63
EMPAVELI.....98
EMPLICITI.....22
EMRELIS.....22
EMROSI.....123
EMSAM.....44
emtricitabine.....10
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg.....11
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg.....11
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg.....12
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg.....12
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg.....12
EMTRIVA.....10
see *emtricitabine*.....10
EMVERM.....7
emzahh.....78
enalapril maleate.....28
enalapril maleate & hydrochlorothiazide tab 10-25 mg.....28
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg.....28
ENBREL.....100
ENBREL MINI.....100
ENBREL SURECLICK..100
ENBUMYST.....37
ENDARI.....98
see *l-glutamine (sickle cell)*.....98
endocet tab 10-325mg.....4
endocet tab 2.5-325mg.....4
endocet tab 5-325mg.....4
endocet tab 7.5-325mg.....4
ENGERIX-B.....105
ENHERTU.....22
enilloring.....78
ENJAYMO.....98
enoxaparin sodium.....95
ENSACOVE.....22
enskyce.....78
ENSPRYNG.....64
ENSTILAR AER.....119
entacapone.....46
entecavir.....12
ENTRESTO
see *sacubitril-valsartan tab 24-26 mg*.....31
see *sacubitril-valsartan tab 49-51 mg*.....31
see *sacubitril-valsartan tab 97-103 mg*.....31
ENTRESTO CAP 15-16MG.....30
ENTRESTO CAP 6-6MG 30
ENTRESTO TAB 24-26MG.....30
ENTRESTO TAB 49-51MG.....30
ENTRESTO TAB 97-103MG.....30
enulose.....90
ENVARSUS XR.....104
EOHILIA.....91
EPANED.....28
see *enalapril maleate*..28
EPCLUSA PAK 150-37.512
EPCLUSA PAK 200-50MG.....12
EPCLUSA TAB 200-50MG.....12
EPCLUSA TAB 400-100.12
EPIDIOLEX.....52
EPIDUO FORTE GEL 0.3-2.5%.....117
EPIFOAM AER 1%.....121
epinastine hcl (ophth)....109
epinephrine.....39
EPINEPHRINE.....39
epinephrine (anaphylaxis).....113
EPINEPHRINE HCL
see *epinephrine*.....39
EPIPEN 2-PAK.....113
see *epinephrine (anaphylaxis)*.....113
EPIPEN-JR 2-PAK.....113
see *epinephrine (anaphylaxis)*.....113
EPIVIR.....10
see *lamivudine*.....11
EPKINLY.....22
eplerenone.....29
EPOGEN.....96
epoprostenol sodium.....40
EPRONTIA.....52
see *topiramate*.....56
EPSOLAY.....123
EPYSQLI.....98
EQUETRO.....64
ERAXIS.....9
ERBITUX.....22

ERGOMAR 63
ergotamine w/ caffeine tab 1-100 mg 63
eribulin mesylate 20
ERIVEDGE 22
ERLEADA 18
erlotinib hcl 22
errin 78
ERTACZO 118
ertapenem sodium 7
ery 117
ERYPED 400
see *erythromycin ethylsuccinate* 14
ERYTHROCIN LACTOBIONATE 14
see *erythromycin lactobionate* 14
erythromycin (acne aid) 117
erythromycin (ophth) 108
erythromycin base 14
erythromycin ethylsuccinate 14
erythromycin lactobionate 14
ERZOFRI 48
ESBRIET 113
see *pirfenidone* 114
escitalopram oxalate 44
ESCITALOPRAM OXALATE 44
eslicarbazepine acetate ..52
esomeprazole magnesium 92
esomeprazole sodium 92
estarylla 78
estazolam 61
ESTRACE 81
see *estradiol vaginal* 81
estradiol 81
estradiol & norethindrone acetate tab 0.5-0.1 mg 81
estradiol & norethindrone acetate tab 1-0.5 mg ...81
estradiol vaginal 81
estradiol valerate 81
ESTRING 81
ESTROGEL
see *estradiol* 81
estrogens, conjugated 81
eszopiclone 61
ethacrynic acid 37
ethambutol hcl 12
ethosuximide 52
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg 78
ETHYOL 19
etodolac 1
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr 78
ETOPOPHOS 20
etoposide 20
etravirine 11
EUCRISA 123
EULEXIN 18
EURAX 124
EVAMIST 81
EVENITY 76
everolimus 22
everolimus (immunosuppressant) 104
evesse 121
EVISTA 84
see *raloxifene hcl* 85
EVKEEZA 34
EVOTAZ TAB 300-150 ...12
EVOXAC 124
see *cevimeline hcl* 124
EVRYSDI 64
EXDENSUR 113
EXELDERM 118
EXELON 42
see *rivastigmine* 42
exemestane 18
exenatide 71
EXFORGE
see *amlodipine besylate-valsartan tab 10-160 mg* 29
see *amlodipine besylate-valsartan tab 10-320 mg* 29
see *amlodipine besylate-valsartan tab 5-160 mg* 29
see *amlodipine besylate-valsartan tab 5-320 mg* 29
EXFORGE HCT
see *amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg* 29
see *amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg* 30
see *amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg* 30
see *amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg* 29
see *amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg* 29
EXFORGE HCT TAB 10-160-12.5MG 30
EXFORGE HCT TAB 10-160-25MG 30
EXFORGE HCT TAB 10-320-25MG 30
EXFORGE HCT TAB 5-160-12.5MG 30
EXFORGE HCT TAB 5-160-25MG 30
EXFORGE TAB 10-160MG 31
EXFORGE TAB 10-320MG 31
EXFORGE TAB 5-160MG 30
EXFORGE TAB 5-320MG 31
EXJADE 77
see *deferasirox* 77
EXXUA 44

EXXUA TITRATION PACK 44
EYLEA 110
EYLEA HD 110
EYSUVIS 110
ezetimibe.....34
ezetimibe-simvastatin tab 10-10 mg 34
ezetimibe-simvastatin tab 10-20 mg 34
ezetimibe-simvastatin tab 10-40 mg 34
ezetimibe-simvastatin tab 10-80 mg 34
F
FABHALTA 98
FABIOR.....117
FABRAZYME 84
falmina 78
famciclovir.....12
famotidine 89
FAMOTIDINE.....89
famotidine in nacl 0.9% iv soln 20 mg/50ml.....89
FANAPT.....48
FANAPT PAK PACK A ...48
FANAPT PAK PACK B ...48
FANAPT PAK PACK C ...48
FARESTON 18
see *toremifene citrate*..18
FARXIGA 71
see *dapagliflozin*.....71
FASENRA.....113
FASENRA PEN.....113
FASLODEX.....18
see *fulvestrant*.....18
FAVLYXA.....17
febuxostat 1
feirza 1/20 78
feirza 1.5/30 78
felbamate 52
FELBATOL.....52
see *felbamate*.....52
felodipine.....36
FEMARA.....18
see *letrozole*.....18
FEMLYV TAB 1/0.02MG.78
FEMRING 81
fenofibrate.....33
fenofibrate micronized.....33
fenofibric acid.....33
fenoprofen calcium.....1, 2
fenopron.....2
FENSOLVI 84
fentanyl 3
FERRIPROX.....77
see *deferiprone* 77
FERRIPROX TWICE-A-DAY 77
fesoterodine fumarate.....94
FETROJA.....14
FETZIMA.....44
FETZIMA CAP TITRATIO 44
fexmid 68
FIASP.....75
FIASP FLEXTOUCH.....75
FIASP PENFILL 75
FIASP PUMPCART 75
fidaxomicin.....14
FILKRI.....96
FILSPARI 93
FILSUVEZ.....124
FINACEA 123
see *azelaic acid*.....122
finasteride 93
fingolimod hcl.....66
FINTEPLA.....52
finzala.....78
FIRAZYR.....98
see *icatibant acetate* ...98
see *sajazir* 98
FIRDAPSE 64
FIRMAGON.....18
FIRVANQ 7
see *vancomycin hcl*.....9
flac 110
FLAREX.....108
FLEBOGAMMA DIF.....103
flecainide acetate.....33
FLEQSUVY.....68
see *baclofen*.....67
FLOLIPID 34
fluconazole.....9
fluconazole in nacl 0.9% inj 200 mg/100ml.....9
fluconazole in nacl 0.9% inj 400 mg/200ml.....9
flucytosine.....9
fludarabine phosphate 17
fludrocortisone acetate....82
flunisolide (nasal) 114
fluocinolone acetonide ..121
fluocinolone acetonide (otic) 110
fluocinonide.....121
fluocinonide emulsified base.....121
*fluorometholone (ophth)*108
fluorouracil 17
fluorouracil (topical).....123
fluoxetine hcl.....44
fluoxetine hcl (pmdd).....44
fluphenazine decanoate..48
fluphenazine hcl.....48
flurandrenolide 121
flurbiprofen.....2
flurbiprofen sodium 108
fluticasone propionate...121
fluticasone propionate (inhalation).....115
fluticasone propionate (nasal) 114
fluticasone propionate hfa 115
fluticasone-salmeterol aer powder ba 100-50 mcg/act.....116
fluticasone-salmeterol aer powder ba 250-50 mcg/act.....116
fluticasone-salmeterol aer powder ba 500-50 mcg/act.....116
fluvastatin sodium 34
fluvoxamine maleate.....41
FML FORTE.....108
FML LIQUIFILM 108
see *fluorometholone (ophth)* 108
FOCALIN 59
see *dexmethylphenidate hcl* 59
FOCALIN XR 59

see *dexmethylphenidate hcl* 58
FOCINVEZ.....88
FOLOTYN.....17
see *pralatrexate*.....17
fondaparinux sodium.....95
FORFIVO XL.....44
formoterol fumarate.....112
FORTEO.....76
see *teriparatide*.....77
FOSAMAX.....76
see *alendronate sodium* 76
FOSAMAX + D TAB 70-2800 76
FOSAMAX + D TAB 70-5600 76
fosamprenavir calcium....11
fosaprepitant dimeglumine 88
foscarnet sodium.....12
FOSCAVIR
see *foscarnet sodium*..12
fosfomycin tromethamine..7
fosinopril sodium.....28
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg 28
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg 28
FOTIVDA 22
FRAGMIN 95
FRINDOVYX.....17
frovatriptan succinate.....63
FRUZAQLA.....22
FULPHILA.....96
fulvestrant 18
FUROSCIX 37
FUROSCIX READYFLOW 37
furosemide 37
furosemide inj.....37
FYARRO.....22
fyavolv tab 0.5mg-2.5mcg 81
fyavolv tab 1mg-5mcg.....81
FYCOMPA 52
see *perampanel*.....54
FYLNETRA 96

G

gabapentin 52
gabapentin (once-daily) ..64
GABARONE.....52
GALAFOLD.....84
galantamine hydrobromide 42
galbriela 78
gallifrey.....86
GAMASTAN INJ 103
GAMMAGARD LIQUID .103
GAMMAGARD LIQUID ERC.....103
GAMMAGARD S/D IGA LESS TH 103
GAMMAKED 103
GAMMAPLEX 103
GAMUNEX-C 103
GANCICLOVIR 12
ganciclovir sodium 12
GARDASIL 9.....105
GASTROCROM.....91
see *cromolyn sodium (mastocytosis)*.....91
gatifloxacin (ophth).....108
GATTEX.....91
GAUZE PADS 2X2 75
gavilyte-c.....90
gavilyte-g.....90
gavilyte-n/flavor pack 90
GAVRETO 22
GAZYVA 22
gefitinib.....22
gemcitabine hcl 17
GEMCITABINE HYDROCHLORIDE.....17
see *gemcitabine hcl*.....17
gemfibrozil.....33
gemmily.....78
GEMTESA 94
generlac 90
gengraf.....104
GENOTROPIN.....84
GENOTROPIN MINIQUICK 84
gentamicin in saline inj 0.8 mg/ml.....7
gentamicin in saline inj 1.2 mg/ml.....7
gentamicin in saline inj 1.6 mg/ml.....7
gentamicin in saline inj 1 mg/ml.....7
gentamicin in saline inj 2 mg/ml.....7
gentamicin sulfate 7
gentamicin sulfate (ophth) 108
gentamicin sulfate (topical) 118
GENVOYA TAB 12
GEODON.....48
see *ziprasidone hcl*.....50
see *ziprasidone mesylate* 50
GILENYA 66
see *fingolimod hcl*.....66
GILOTRIF 22
GIMOTI 88
GIVLAARI 98
GLASSIA.....113
glatiramer acetate 66
glatopa 66
GLEEVEC.....22
see *imatinib mesylate*..22
GLEOSTINE 17
see *lomustine* 17
glimepiride.....71
glipizide 71
glipizide-metformin hcl tab 2.5-250 mg 71
glipizide-metformin hcl tab 2.5-500 mg 71
glipizide-metformin hcl tab 5-500 mg 71
GLOPERBA 1
glucagon 83
GLUCOTROL XL 71
see *glipizide*.....71
GLYCATE 89
glycerol phenylbutyrate ...84
glycopyrrolate.....89
GLYCOPYRROLATE.....89

see *glycopyrrolate* 89
glycopyrrolate (oral) 89
glydo 122
GLYXAMBI TAB 10-5 MG 71
GLYXAMBI TAB 25-5 MG 71
GOCOVRI 46
GOLYTELY
see *gavilyte-g* 90
see *peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm* 90
GOLYTELY SOL 90
GOMEKLI 22
GRAFAPEX 17
GRALISE 64
see *gabapentin (once-daily)* 64
granisetron hcl 88
GRANISOL 88
GRANIX 96
GRASTEK 103
griseofulvin microsize 9
griseofulvin ultramicrosize .9
guanfacine hcl 39
guanfacine hcl (adhd) 59
GVOKE HYPOPEN 1-PACK 83
GVOKE HYPOPEN 2-PACK 83
GVOKE KIT 83
GVOKE PFS 83
GYNAZOLE-1 95
H
HADLIMA 100
HADLIMA PUSHTOUCH 100
HAEGARDA 98
hailey 1.5/30 78
hailey 24 fe 78
hailey fe 1/20 79
HALAVEN 20
see *eribulin mesylate* ...20
halcinonide 121
halobetasol propionate ..121
HALOBETASOL PROPIONATE 121
HALOG 121
see *halcinonide* 121
haloperidol 48
haloperidol decanoate 48
haloperidol lactate 48
HARVONI PAK 33.75-150MG 12
HARVONI PAK 45-200MG 12
HARVONI TAB 45-200MG 12
HARVONI TAB 90-400MG 12
HAVRIX 105
heather 79
HEMADY 82
HEMICLOR 37
HEPAGAM B 103
HEPARIN/NACL INJ 25000UNT 95
HEPARIN SODIUM 95
heparin sodium (porcine) 95
HEPCLUDEX 12
HEPLISAV-B 105
HEP SOD/D5W INJ 20000UNT 95
HEP SOD/D5W INJ 25000UNT 95
HEP SOD/NACL INJ 12500UNT 95
HEP SOD/NACL INJ 25000UNT 95
HERCEP HYLEC SOL 60-10000 22
HERCEPTIN 22
HERCESSI 22
HERNEXEOS 22
HERZUMA 22
HETLIOZ 61
see *tasimelteon* 62
HETLIOZ LQ 61
HIBERIX 105
HIZENTRA 103
HORIZANT 65
HUMALOG 75
HUMALOG JUNIOR KWIKPEN 75
HUMALOG KWIKPEN 75
HUMALOG MIX INJ 50/50KWP 75
HUMALOG MIX INJ 75/25KWP 75
HUMALOG MIX SUS 75/25 75
HUMALOG TEMPO PEN75
HUMATIN 7
HUMIRA 100
HUMIRA PEN 100
HUMIRA PEN-CD/UC/HS START 100
HUMIRA PEN KIT PS/UV 100
HUMULIN INJ 70/30 75
HUMULIN INJ 70/30KWP 75
HUMULIN N 75
HUMULIN N KWIKPEN ..75
HUMULIN R 75
HUMULIN R U-500 KWIKPEN 75
HYCAMTIN
see *topotecan hcl* 20
hydralazine hcl 39
HYDREA 19
see *hydroxyurea* 19
hydrochlorothiazide 37
hydrocodone-acetaminophen soln 10-300 mg/15ml 4
hydrocodone-acetaminophen soln 7.5-325 mg/15ml 4
hydrocodone-acetaminophen tab 10-300 mg 5
hydrocodone-acetaminophen tab 10-325 mg 5
hydrocodone-acetaminophen tab 2.5-325 mg 4
hydrocodone-acetaminophen tab 5-300 mg 4

hydrocodone-acetaminophen tab 5-325 mg 4
hydrocodone-acetaminophen tab 7.5-300 mg 4
hydrocodone-acetaminophen tab 7.5-325 mg 4
hydrocodone bitartrate 3
hydrocodone-ibuprofen tab 10-200 mg 5
hydrocodone-ibuprofen tab 5-200 mg 5
hydrocodone-ibuprofen tab 7.5-200 mg 5
hydrocortisone 82
hydrocortisone (intrarectal) 90
hydrocortisone (rectal) ..123
hydrocortisone (topical).121
hydrocortisone butyrate 121, 122
hydrocortisone sod succinate 82
hydrocortisone valerate.122
hydrocortisone w/ acetic acid otic soln 1-2% 110
hydromorphone hcl 3, 5
HYDROMORPHONE HCL5
HYDROMORPHONE HYDROCHLORI.....5
see *hydromorphone hcl*.5
hydroxychloroquine sulfate 102
hydroxyurea 19
hydroxyzine hcl 112
hydroxyzine pamoate....112
HYFTOR 123
HYQVIA INJ 10-800.....103
HYQVIA INJ 2.5-200.....103
HYQVIA INJ 20-1600....103
HYQVIA INJ 30-2400....103
HYQVIA INJ 5-400.....103
HYRNUO 22
HYSINGLA ER.....3
HYZAAR
see *losartan potassium & hydrochlorothiazide tab 100-12.5 mg*.....31
see *losartan potassium & hydrochlorothiazide tab 100-25 mg*.....31
see *losartan potassium & hydrochlorothiazide tab 50-12.5 mg*.....31
HYZAAR TAB 100-12.5 ..31
HYZAAR TAB 100-25 31
HYZAAR TAB 50-12.5 31
I
ibandronate sodium 77
IBRANCE 22
IBSRELA.....91
IBTROZI.....22
ibu 2
ibuprofen 2
ibuprofen-famotidine tab 800-26.6 mg 2
icatibant acetate.....98
iclevia 79
ICLUSIG.....22
IDHIFA 22
IDVYNSO TAB 100-0.25.12
IFEX 17
ifosfamide.....17
IFOSFAMIDE 17
ILARIS.....103
ILEVRO.....109
ILUMYA.....100
IMAAVY 103
imatinib mesylate 22
IMBRUVICA.....23
IMDELLTRA.....23
IMFINZI 23
imipenem-cilastatin intravenous for soln 250 mg 7
imipenem-cilastatin intravenous for soln 500 mg 7
imipramine hcl.....44
imipramine pamoate 44
imiquimod.....123
imiquimod pump.....123
IMITREX 63
see *sumatriptan succinate*.....63
IMITREX STATDOSE REFILL 63
IMITREX STATDOSE SYSTEM.....63
see *sumatriptan succinate*.....63
IMJUDO 23
IMKELDI.....23
IMOVAX RABIES (H.D.C.V.).....105
IMURAN.....104
see *azathioprine* 104
IMVEXXY MAINTENANCE PACK.....81
IMVEXXY STARTER PACK 81
INBRIJA 46
incassia 79
INCRELEX.....84
INCRUSE ELLIPTA 111
indapamide 37
INDERAL LA 35
see *propranolol hcl* 36
INFANRIX INJ.....105
INFLECTRA.....100
INFLIXIMAB 100
INLURIYO 18
INLYTA 23
INPEFA 39
INQOVI TAB 35-100MG .17
INREBIC 23
INSPRA.....29
INSULIN GLARGINE MAX SOLO 75
INSULIN GLARGINE SOLOSTAR.....75
INSULIN GLARGINE-YFGN 75
INSULIN LISP INJ PROT KWP 75
INSULIN LISPRO.....75
INSULIN LISPRO JUNIOR KWI.....75
INSULIN LISPRO KWIKPEN.....75

INSULIN PEN NEEDLES: EMBECTA-BD.....75
INSULIN SAFETY NEEDLES: EMBECTA-BD 75
INSULIN SYRINGES: EMBECTA-BD.....75
INTELENCE.....11
see *etravirine*.....11
INTRALIPID 107
INTRAROSA.....93
introvale 79
INTUNIV.....59
see *guanfacine hcl (adhd)* 59
INVEGA 48
see *paliperidone* 49
INVEGA HAFYERA 48
INVEGA SUSTENNA.....48
INVEGA TRINZA 48
INVOKAMET TAB 150-1000 71
INVOKAMET TAB 150-500 71
INVOKAMET TAB 50-1000 71
INVOKAMET TAB 50-500MG.....71
INVOKAMET XR TAB 150-1000 72
INVOKAMET XR TAB 150-500 72
INVOKAMET XR TAB 50-1000 71
INVOKAMET XR TAB 50-500MG.....71
INVOKANA 72
INZIRQO 37
IPOL INJ INACTIVE.....105
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml 111
ipratropium bromide.....111
ipratropium bromide (nasal) 111
*ipratropium bromide hfa*111
IQIRVO 91
irbesartan.....32
irbesartan-hydrochlorothiazide tab 150-12.5 mg 31
irbesartan-hydrochlorothiazide tab 300-12.5 mg 31
IRESSA.....23
see *gefitinib* 22
irinotecan hcl.....19
ISENTRESS.....11
ISENTRESS HD 11
isibloom.....79
ISOLYTE-P INJ /D5W...106
ISOLYTE-S INJ.....106
ISOLYTE-S INJ PH 7.4.106
isoniazid.....12
isosorbide dinitrate.....39
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg 39
isosorbide mononitrate....39
isotretinoin.....117
isradipine.....36
ISTALOL 109
ISTURISA 84
ITOVEBI.....23
itraconazole.....9
ivabradine hcl.....39
ivermectin.....7
ivermectin (rosacea) 123
IWILFIN.....19
IXEMPRA KIT 20
IXIARO INJ 105
IYUZEH.....109
IZERVAY.....110
J
JADENU.....77
see *deferasirox*.....77
JADENU SPRINKLE.....77
see *deferasirox*.....77
jaimiess.....79
JAKAFI.....23
JAKAFI XR.....23
JALYN
see *dutasteride-tamsulosin hcl cap 0.5-0.4 mg*.....93
JALYN CAP 0.5-0.4 93
jantoven 95
JANUMET
see *sitagliptin phosphate-metformin hcl tab 50-1000 mg*.....73
see *sitagliptin phosphate-metformin hcl tab 50-500 mg*.....73
JANUMET TAB 50-1000.72
JANUMET TAB 50-500MG 72
JANUMET XR
see *sitagliptin phosphate-metformin hcl tab er 24hr 100-1000 mg* ...73
see *sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg* 73
see *sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg* 73
JANUMET XR TAB 100-1000 72
JANUMET XR TAB 50-1000 72
JANUMET XR TAB 50-500MG.....72
JANUVIA.....72
see *sitagliptin phosphate* 73
JARDIANCE.....72
JASCAYD 113
jasmiel.....79
JATENZO.....70
JAVADIN.....39
javygtor 84
JAYPIRCA 23
JEMPERLI 23
jencycla.....79
JENTADUETO TAB 2.5-1000 72
JENTADUETO TAB 2.5-500 72
JENTADUETO TAB 2.5-850 72
JENTADUETO TAB XR 2.5-1000MG 72

JENTADUETO TAB XR 5-1000MG....72
JEVTANA....20
JIDEYTRO....23
jinteli....81
JOBEVNE....23
JOENJA....103
jolessa....79
JORNAY PM....59
JOURNAVX....1
joyeaux....79
JUBLIA....118
juleber....79
JULUCA TAB 50-25MG..12
junel 1/20....79
junel 1.5/30....79
junel fe 1/20....79
junel fe 1.5/30....79
junel fe 24....79
JUXTAPID....34
JYLAMVO....102
JYNARQUE....84
see *tolvaptan*....86
see *tolvaptan tab therapy pack 30 & 15 mg*....86
see *tolvaptan tab therapy pack 45 & 15 mg*....86
see *tolvaptan tab therapy pack 60 & 30 mg*....86
see *tolvaptan tab therapy pack 90 & 30 mg*....86
JYNARQUE PAK 30-15MG....84
JYNARQUE PAK 45-15MG....84
JYNARQUE PAK 60-30MG....84
JYNARQUE PAK 90-30MG....84
JYNNEOS....105
K
KABIVEN EMU....107
KADCYLA....23
kaitlib fe....79
KALBITOR....98
KALETRA
see *lopinavir-ritonavir tab 100-25 mg*....12
see *lopinavir-ritonavir tab 200-50 mg*....12
KALETRA SOL....12
KALETRA TAB 100-25MG....12
KALETRA TAB 200-50MG....12
KALYDECO....113
KANJINTI....23
KANUMA....84
KAPSPARGO SPRINKLE....36
KARBINAL ER....112
kariva....79
KATERZIA....36
KCL/D5W/LACT INJ 20MEQ/L....106
KCL/D5W/NACL INJ 0.15/0.2....106
KCL/D5W/NACL INJ 0.15/0.45....106
KCL/D5W/NACL INJ 0.15/0.9....106
KCL/D5W/NACL INJ 0.3/0.9%....106
KCL 0.075%/D5W/NACL 0.45%
see *kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj*....106
KCL 0.15%/D5W/NACL 0.45%
see *kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj*....106
KCL 0.15%/D5W/NACL 0.9%
see *kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj*....106
KCL 0.3%/D5W/NACL 0.45%
see *kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj*....106
KCL 0.3%/D5W/NACL 0.9%
see *kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj*....106
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj....106
kcl 20 meq/l (0.149%) in nacl 0.45% inj....106
kcl 20 meq/l (0.149%) in nacl 0.9% inj....106
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj....106
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj....106
kcl 20 meq/l (0.15%) in nacl 0.45% inj....106
kcl 20 meq/l (0.15%) in nacl 0.9% inj....106
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj....106
kcl 40 meq/l (0.298%) in nacl 0.9% inj....106
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj....106
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj....106
kcl 40 meq/l (0.3%) in nacl 0.9% inj....106
kelnor 1/35....79
KENALOG-10....82
see *triamcinolone acetonide*....83
KENALOG-40....82
see *triamcinolone acetonide*....83
KENALOG-80....82
KEPPRA....52
see *levetiracetam*....53
see *roweepra*....55
KEPPRA XR....52
see *levetiracetam*....53
KERENDIA....29
KESIMPTA....66

ketoconazole 10
ketoconazole (topical) ...118
ketodan 119
ketoprofen 2
ketorolac tromethamine 2
ketorolac tromethamine (ophth) 109
KEVEYIS.....37
see *dichlorphenamide* .37
see *ormalvi* 37
KEVZARA 100
KEYTRUDA 23
KEYTRUDA INJ QLEX 395-4800 MG-UNIT/2.4ML 23
KEYTRUDA INJ QLEX 790-9600 MG-UNIT/4.8ML 23
KHAPZORY 19
KHINDIVI 82
KIMMTRAK.....23
KIMYRSA.....7
KINERET 100
KINRIX INJ.....105
kionex.....77
KIRSTY 75
KISQALI 200 DOSE.....23
KISQALI 400 DOSE.....23
KISQALI 600 DOSE.....23
KITABIS PAK.....7
see *tobramycin* 8
KLARON 117
see *sulfacetamide sodium (acne)* 118
klayesta.....119
KLISYRI 123
KLONOPIN 52
see *clonazepam* 51
klor-con 107
klor-con 10 107
KLOR-CON 10 107
klor-con 8 107
KLOR-CON 8 107
see *klor-con 8*.....107
see *potassium chloride* 107
klor-con m10 107
klor-con m15 107
klor-con m20 107
KLOXXADO 69
KOMZIFTI 23
KONVOMEP SUS 2-84/ML 92
KORLYM.....84
see *mifepristone (hyperglycemia)* 84
KOSELUGO.....23
kourzeq 124
KRAZATI.....23
KRINTAFEL 10
kristalose.....90
KRYSTEXXA 1
kurvelo 79
KUVAN.....84
see *javygtor* 84
see *sapropterin dihydrochloride* 85
see *zelvysia*.....86
KYPROLIS 23
KYXATA.....17
KYZATREX.....70
L
labetalol hcl 36
lacosamide.....53
lacosamide oral.....53
lactated ringer's solution 106
LACTATED RINGERS
see *lactated ringer's solution* 106
LACTATED RIN INJ.....106
lactic acid (ammonium lactate).....123
lactulose.....90
lactulose (encephalopathy) 90
LAMICTAL 53
see *lamotrigine* 53
see *subvenite* 55
LAMICTAL CHEWABLE DISPERS.....53
see *lamotrigine* 53
LAMICTAL ODT.....53
see *lamotrigine* 53
see *lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit* 53
see *lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit*.....53
see *lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit* 53
LAMICTAL ODT KIT BLUE 53
LAMICTAL ODT KIT GREEN.....53
LAMICTAL ODT KIT ORANGE.....53
LAMICTAL STARTER/NOT TAKI
see *lamotrigine tab 25 mg (42) & 100 mg (7) starter kit*.....53
see *subvenite starter kit/ora* 55
LAMICTAL STARTER/TAKING C
see *lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit*.....53
see *subvenite starter kit/gre* 55
LAMICTAL STARTER/TAKING V
see *lamotrigine tab 35 x 25 mg starter kit* 53
see *subvenite starter kit/blu* 55
LAMICTAL STARTER KIT (35 X 25MG TABS) 53
LAMICTAL STARTER KIT (42 X 25MG TABS & 7 X 100MG TAB) 53
LAMICTAL STARTER KIT (84 X 25MG TABS & 14 X 100MG TABS).....53
LAMICTAL XR 53
see *lamotrigine* 53
LAMICTAL XR KIT.....53
lamivudine.....11
lamivudine (hbv).....12

lamivudine-zidovudine tab 150-300 mg 12
lamotrigine 53
*lamotrigine tab 25 mg (42) & 100 mg (7) starter kit*53
lamotrigine tab 35 x 25 mg starter kit.....53
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit 53
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit 53
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit 53
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit 53
LAMZEDE 84
LANOXIN 39
see *digoxin* 38, 39
LANOXIN PEDIATRIC 39
lanreotide acetate 84
LANREOTIDE ACETATE 84
lansoprazole.....92
LANTUS.....75
LANTUS SOLOSTAR 75
lapatinib ditosylate 23
larin 1/20 79
larin 1.5/30 79
larin 24 fe 79
larin fe 1/20 79
larin fe 1.5/30 79
LASIX.....37
see *furosemide*.....37
LASIX ONYU 37
latanoprost 109
LATUDA.....48
see *lurasidone hcl* .48, 49
LAZCLUZE.....23
leflunomide.....102
LEMTRADA 66
lenalidomide.....19
LENVIMA 10 MG DAILY DOSE 24
LENVIMA 12MG DAILY DOSE 24
LENVIMA 20 MG DAILY DOSE 24
LENVIMA 4 MG DAILY DOSE 23
LENVIMA 8 MG DAILY DOSE 24
LENVIMA CAP 14 MG 24
LENVIMA CAP 18 MG 24
LENVIMA CAP 24 MG 24
LEQEMBI IQLIK.....42
LEQSELVI.....100
LESCOL XL 34
see *fluvastatin sodium*.34
lessina.....79
LETAIRIS 40
see *ambrisentan*.....40
letrozole 18
leucovorin calcium 19
LEUKERAN.....17
LEUKINE.....96
leuprolide acetate.....18
leuprolide acetate (3 month) 18
levalbuterol hcl.....112
levalbuterol tartrate 112
LEVETIR/NACL INJ 10MG/ML.....53
LEVETIR/NACL INJ 15MG/ML.....53
LEVETIR/NACL INJ 5MG/ML.....53
levetiracetam.....53
LEVETIRACETAM/SODIUM CHLO
see *levetiracetam in sodium chloride iv soln 1000 mg/100ml*.....53
see *levetiracetam in sodium chloride iv soln 1500 mg/100ml*.....54
see *levetiracetam in sodium chloride iv soln 500 mg/100ml*.....53
levetiracetam in sodium chloride iv soln 1000 mg/100ml.....53
levetiracetam in sodium chloride iv soln 1500 mg/100ml.....54
levetiracetam in sodium chloride iv soln 500 mg/100ml.....53
levobunolol hcl 109
levocarnitine (metabolic modifiers).....84
levocetirizine dihydrochloride.....112
levofloxacin 15
levofloxacin (ophth).....108
levofloxacin in d5w iv soln 250 mg/50ml.....15
levofloxacin in d5w iv soln 500 mg/100ml.....15
levofloxacin in d5w iv soln 750 mg/150ml.....15
levoleucovorin calcium....19
levonest.....79
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg.....79
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg 79
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....79
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg 79
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg 79
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) 79
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) 79
levora 0.15/30-28 79
levorphanol tartrate 3
levothyroxine sodium 87
levoxyl.....87
LEXAPRO 44

see *escitalopram oxalate* 44
LEXETTE 122
l-glutamine (sickle cell)....98
LIALDA.....90
see *mesalamine* 90
LIBTAYO.....24
lidocaine.....122
lidocaine hcl 122
lidocaine hcl (local anesth.) 1
lidocaine hcl (mouth-throat) 124
lidocaine-prilocaine cream 2.5-2.5% 122
lidocan.....122
LIDODERM
see *lidocaine* 122
see *lidocan* 122
see *tridacaine iii*.....122
LIFYORLI CAP 125MG DS 18
LIFYORLI CAP 150MG DS 18
LIKMEZ 7
LILETTA.....79
linezolid 7
LINEZOLID INJ 2MG/ML ..7
LINZESS 91
liomny.....87
liothyronine sodium 87
LIPITOR.....34
see *atorvastatin calcium* 34
LIPOFEN.....33
liraglutide.....72
lisdexamfetamine dimesylate 59
lisinopril 28
lisinopril & hydrochlorothiazide tab 10-12.5 mg 28
lisinopril & hydrochlorothiazide tab 20-12.5 mg 28
lisinopril & hydrochlorothiazide tab 20-25 mg 28
LITFULO 100
lithium.....65
lithium carbonate.....65
LITHOBID 65
see *lithium carbonate* ..65
LITHOSTAT 93
LIVALO 34
see *pitavastatin calcium* 34
LIVDELZI 91
LIVMARLI.....91
LIVTENCITY 12
LOARGYS.....84
LODINE
see *etodolac* 1
LODOCO 39
LODOSYN 46
see *carbidopa*.....46
loestrin 1/20-21 79
loestrin 1.5/30-21 79
loestrin fe 1/20 79
loestrin fe 1.5/30 79
lofena 2
lofexidine hcl 69
lojaimiess 79
LOKELMA.....77
LO LOESTRIN TAB 1-10-10 79
LOMOTIL
see *diphenoxylate w/ atropine tab 2.5-0.025 mg*.....91
LOMOTIL TAB 2.5MG 91
lomustine.....17
LONSURF TAB 15-6.14..17
LONSURF TAB 20-8.19..17
loperamide hcl.....91
LOPID 33
see *gemfibrozil* 33
lopinavir-ritonavir tab 100-25 mg 12
lopinavir-ritonavir tab 200-50 mg 12
LOPRESSOR.....36
see *metoprolol tartrate* 36
LOQTORZI.....24
lorazepam 42
lorazepam intensol.....42
LORBRENA 24
LOREEV XR 42
loryna 79
losartan potassium.....33
losartan potassium & hydrochlorothiazide tab 100-12.5 mg 31
losartan potassium & hydrochlorothiazide tab 100-25 mg 31
losartan potassium & hydrochlorothiazide tab 50-12.5 mg 31
LOTEMAX.....109
see *loteprednol etabonate*.....109
LOTEMAX SM 109
LOTENSIN 28
see *benazepril hcl* 28
LOTENSIN HCT
see *benazepril & hydrochlorothiazide tab 10-12.5 mg*.....28
see *benazepril & hydrochlorothiazide tab 20-12.5 mg*.....28
see *benazepril & hydrochlorothiazide tab 20-25 mg*.....28
loteprednol etabonate ...109
loteprednol etabonate-tobramycin ophth susp 0.5-0.3% 107
LOTREL
see *amlodipine besylate-benazepril hcl cap 10-20 mg*.....27
LOTRONEX 91
see *alosetron hcl* 90
lovastatin.....34
LOVAZA
see *omega-3-acid ethyl esters cap 1 gm* 35
LOVAZA CAP 1GM.....34
LOVENOX.....95
see *enoxaparin sodium* 95
low-ogestrel.....79

loxapine succinate 48
lubiprostone 91
LUCEMYRA
see *lofexidine hcl*.....69
LUCENTIS 110
luizza 1/20.....79
luizza 1.5/30.....79
luliconazole 119
LUMAKRAS 24
LUMIGAN.....109
LUMIZYME 84
LUMRYZ 69
LUMRYZ PAK STARTER 69
LUMVOA.....84
LUNESTA 61
see *eszopiclone*.....61
LUNSUMIO 24
LUNSUMIO VELO 24
LUPKYNIS 104
LUPRON DEPOT (1-MONTH) 18
LUPRON DEPOT (3-MONTH) 18
LUPRON DEPOT (4-MONTH) 18
LUPRON DEPOT (6-MONTH) 18
LUPRON DEPOT-PED (1-MONTH 84
LUPRON DEPOT-PED (3-MONTH 84
LUPRON DEPOT-PED (6-MONTH 84
lurasidone hcl.....48, 49
LURBIRO 2
lutera 79
LUTRATE DEPOT 18
LUZU.....119
LYBALVI TAB 10-10MG .49
LYBALVI TAB 15-10MG .49
LYBALVI TAB 20-10MG .49
LYBALVI TAB 5-10MG ...49
lyleq.....79
lyllana.....81
LYNAVOY 91
LYNKUET 84
LYNOZYFIC.....24
LYNPARZA.....24
LYRICA.....54
see *pregabalin*.....55
LYRICA CR.....65
see *pregabalin (once-daily)* 65
LYSODREN 18
LYTGOBI (12 MG DAILY DOSE).....24
LYTGOBI (16 MG DAILY DOSE).....24
LYTGOBI (20 MG DAILY DOSE).....24
LYUMJEV 75
LYUMJEV KWIKPEN.....75
LYUMJEV TEMPO PEN .75
lyza.....79
M
macitentan 40
MACROBID.....8
see *nitrofurantoin monohyd macro*.....8
magnesium sulfate.....106
MAGNESIUM SULFATE 106
see *magnesium sulfate* 106
MAGNESIUM SULFATE IN D5W
see *magnesium sulfate in dextrose 5% iv soln 1 gm/100ml*.....106
magnesium sulfate in dextrose 5% iv soln 1 gm/100ml.....106
MALARONE
see *atovaquone-proguanil hcl tab 250-100 mg*.....10
see *atovaquone-proguanil hcl tab 62.5-25 mg*.....10
MALARONE TAB 250-100 10
MALARONE TAB 62.5-25 10
malathion 124
maraviroc 11
MARGENZA.....24
MARINOL.....88
see *dronabinol*.....87
marlissa.....79
MARPLAN.....44
MATULANE 19
matzim la.....36
MAVENCLAD
see *cladribine (10 tabs)* 66
see *cladribine (4 tabs)* .66
see *cladribine (5 tabs)* .66
see *cladribine (6 tabs)* .66
see *cladribine (7 tabs)* .66
see *cladribine (8 tabs)* .66
see *cladribine (9 tabs)* .66
MAVENCLAD (10 TABS)66
MAVENCLAD (4 TABS)..66
MAVENCLAD (5 TABS)..66
MAVENCLAD (6 TABS)..66
MAVENCLAD (7 TABS)..66
MAVENCLAD (8 TABS)..66
MAVENCLAD (9 TABS)..66
MAVYRET PAK 50-20MG 12
MAVYRET TAB 100-40MG 12
MAXALT.....63
see *rizatriptan benzoate* 63
MAXALT-MLT 63
see *rizatriptan benzoate* 63
MAXIDEX.....109
MAXITROL
see *neomycin-polymyxin-dexamethasone ophth oint 0.1%*.....108
see *neomycin-polymyxin-dexamethasone ophth susp 0.1%*.....108
MAXITROL OIN 0.1% OP 107
MAXITROL SUS 0.1% OP 107
MAYZENT.....66, 67
MAYZENT STARTER PACK (12) 67

MAYZENT STARTER PACK (7) 67
meclizine hcl 88
meclofenamate sodium.....2
MEDROL.....82
see *methylprednisolone* 82
MEDROL DOSEPAK 82
see *methylprednisolone* 82
medroxyprogesterone acetate.....86
*medroxyprogesterone acetate (contraceptive)*79
mefenamic acid.....2
mefloquine hcl.....10
megestrol acetate 18, 86
megestrol acetate (appetite) 86
MEKINIST 24
MEKTOVI.....24
meleya 79
meloxicam.....2
MELOXICAM 2
memantine hcl.....42
memantine hcl-donepezil hcl cap er 24hr 14-10 mg 42
memantine hcl-donepezil hcl cap er 24hr 21-10 mg 42
memantine hcl-donepezil hcl cap er 24hr 28-10 mg 42
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack.....42
MENOSTAR.....81
MENQUADFI 105
MENVEO INJ 105
MENVEO SOL 105
MEPRON 8
see *atovaquone*.....6
mercaptopurine.....17
MERILOG 75
MERILOG SOLOSTAR...75
MEROP/NACL INJ 1GM/50ML.....8
MEROP/NACL INJ 500/50ML 8
meropenem.....8
MEROPENEM
see *meropenem* 8
mesalamine.....90
mesalamine w/ cleanser .90
mesna 20
MESNEX.....20
see *mesna*.....20
MESTINON 65
see *pyridostigmine bromide*.....65
MESTINON TIMESPAN..65
see *pyridostigmine bromide*.....65
METADATE CD 59, 60
see *methylphenidate hcl* 60
metaxalone 68
METAXALONE 68
metformin hcl 72
methadone hcl 3
METHADONE HCL INJ 3
*methadone hydrochloride i*3
METHADOSE
see *methadone hydrochloride i* 3
methazolamide.....37
methenamine hippurate 8
methergine.....84
methimazole.....87
methocarbamol 68
*methotrexate sodium*17, 102
methoxsalen rapid.....119
methscopolamine bromide 89
methsuximide.....54
methyldopa 39
methylergonovine maleate 84
METHYLIN.....60
see *methylphenidate hcl* 60
methylphenidate.....60
METHYLPHENIDATE ER ODT.....60
methylphenidate hcl.....60
methylprednisolone.....82
methylprednisolone acetate 82
methylprednisolone sod succ.....82
metoclopramide hcl.....88
metolazone 37
metoprolol & hydrochlorothiazide tab 100-25 mg 35
metoprolol & hydrochlorothiazide tab 100-50 mg 35
metoprolol & hydrochlorothiazide tab 50-25 mg 35
metoprolol succinate.....36
metoprolol tartrate.....36
metronidazole 8
METRONIDAZOLE 8
see *metronidazole*.....8
metronidazole (topical)..123
metronidazole vaginal.....95
metyrosine 39
MG SO4/D5W INJ 1GM/100.....106
MIACALCIN 77
see *calcitonin (salmon) inj* 76
mibelas 24 fe.....79
MICAFUNGIN/NACL INJ 100MG/100ML.....10
MICAFUNGIN/NACL INJ 150MG/150ML.....10
MICAFUNGIN/NACL INJ 50MG/50ML.....10
micafungin sodium.....10
MICARDIS
see *telmisartan*.....33
MICARDIS HCT
see *telmisartan-hydrochlorothiazide tab 40-12.5 mg*.....32
see *telmisartan-hydrochlorothiazide tab 80-12.5 mg*.....32

see *telmisartan-hydrochlorothiazide tab 80-25 mg*.....32
MICARDIS HCT TAB 40/12.5 31
MICARDIS HCT TAB 80/12.5 31
MICARDIS HCT TAB 80-25MG.....31
miconazole 3.....95
miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%.....119
microgestin 1/20.....79
microgestin 1.5/30.....79
microgestin fe 1/20.....79
microgestin fe 1.5/30.....79
midodrine hcl.....39
MIEBO 110
mifepristone (hyperglycemia).....84
MIGERGOT 63
miglitol.....72
miglustat.....84
mili.....79
milnacipran hcl.....65
milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak.....65
mimvey.....81
MINIVELLE 81
see *lyllana* 81
minocycline hcl.....16
minoxidil.....39
minzoya.....79
MIPLYFFA 84
mirabegron.....94
MIRCERA 96
mirtazapine 44
MIRVASO 123
misoprostol.....91
MITIGARE.....1
see *colchicine*.....1
mitomycin.....20
mitoxantrone hcl.....20
M-M-R II INJ.....105
M-NATAL PLUS TAB....107
modafinil.....69
MODEYSO.....20
moexipril hcl.....28
molindone hcl.....49
mometasone furoate.....122
mometasone furoate (nasal) 115
MONJUVI.....24
mono-linyah 79
montelukast sodium.....113
morphine sulfate 3, 5
MORPHINE SULFATE 5
see *morphine sulfate*.....5
MORPHINE SULFATE/SODIUM C ...5
morphine sulfate beads.....3
MOTEGRITY.....91
see *prucalopride succinate*.....91
MOTPOLY XR 54
MOUNJARO 72
MOVANTIK 91
MOVIPREP
see *peg-3350/electrolytes/asc* 90
MOVIPREP SOL.....90
moxifloxacin hcl.....15
moxifloxacin hcl (ophth) 108
moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj.....15
MOXIFLOXACIN HYDROCHLORID 15
MOZOBIL.....96
see *plerixafor*.....96
MRESVIA.....105
MS CONTIN.....3
see *morphine sulfate*.....3
MULPLETA.....98
MULTAQ.....33
multiple electrolytes ph 5.5 106
mupirocin 118
mupirocin calcium (topical) 118
MVASI.....24
MYALEPT 84
MYCAPSSA.....85
mycophenolate mofetil..104
mycophenolate sodium.104
MYDAYIS
see *amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg*.....57
see *amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg*.....57
see *amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg*.....57
see *amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg*.....57
MYDAYIS CAP 12.5MG..60
MYDAYIS CAP 25MG.....60
MYDAYIS CAP 37.5MG..60
MYDAYIS CAP 50MG.....60
MYFEMBREE TAB 85
MYFORTIC 104
see *mycophenolate sodium* 104
MYHIBBIN.....104
MYLOTARG.....24
MYOBLOC 68
MYQORZO 39
MYRBETRIQ.....94
see *mirabegron* 94
MYSOLINE 54
see *primidone*.....55

N

nabumetone.....2
nadolol 36
NAFCILLIN INJ 2GM/100 15
nafcillin sodium 15
naftifine hcl.....119
NAFTIN.....119
see *naftifine hcl* 119
NAGLAZYME.....85
nalbuphine hcl.....5
NALOCET TAB 2.5-300....5
naloxone hcl.....69

naltrexone hcl.....69
NAMZARIC
see *memantine hcl-donepezil hcl cap er 24hr 14-10 mg* 42
see *memantine hcl-donepezil hcl cap er 24hr 21-10 mg* 42
see *memantine hcl-donepezil hcl cap er 24hr 28-10 mg* 42
NAMZARIC CAP 14-10MG 42
NAMZARIC CAP 21-10MG 42
NAMZARIC CAP 28-10MG 42
NAMZARIC CAP 7-10MG 42
NAPRELAN.....2
see *naproxen sodium*....2
naproxen.....2
naproxen dr.....2
naproxen-esomeprazole magnesium tab dr 375-20 mg 2
naproxen-esomeprazole magnesium tab dr 500-20 mg 2
naproxen sodium 2
naratriptan hcl 63
NARDIL.....44
see *phenelzine sulfate*.45
NATACYN.....108
NATAZIA TAB.....79
nateglinide.....72
NATROBA.....124
NAVITRUX.....88
NAYZILAM.....54
nebivolol hcl 36
NEBUPENT 8
see *pentamidine isethionate inh*.....8
necon 0.5/35-28 79
nefazodone hcl.....44
NEMLUVIO 100
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin 108
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml ...108
neomycin-polymyxin b gu irrigation soln.....94
neomycin-polymyxin-dexamethasone ophth oint 0.1% 108
neomycin-polymyxin-dexamethasone ophth susp 0.1%.....108
neomycin-polymyxin-hc ophth susp.....108
neomycin-polymyxin-hc otic soln 1%.....110
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1% 110
neomycin sulfate 8
NEORAL 104
see *cyclosporine modified (for microemulsion)* 104
see *gengraf* 104
NEREUS 88
NERLYNX.....24
neuac gel 1.2-5%.....117
NEULASTA.....96
NEULASTA ONPRO KIT 96
NEUPOGEN 96
NEUPRO.....47
NEURONTIN.....54
see *gabapentin*.....52
see *relgaabi*.....55
NEVANAC.....109
nevirapine 11
NEXAVAR.....24
see *sorafenib tosylate* .25
NEXICLON XR.....39
NEXIUM.....92
see *esomeprazole magnesium* 92
NEXLETOL 35
NEXLIZET TAB 180/10MG 35
NEXPLANON.....79
NEXTSTELLIS TAB 3-14.2MG.....79
NEXVIAZYME.....85
NGENLA 85
niacin (antihyperlipidemic) 35
niacor 35
nicardipine hcl.....36
nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%.....37
nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9%.....37
NICARDIPINE HYDROCHLORIDE
see *nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%* 37
see *nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9%* 37
NICARDIPINE SOL 20/200ML 37
NICARDIPINE SOL 40/200ML 37
NICOTROL NS 69
nifedipine.....37
nikki.....79
NIKTIMVO.....104
NILOTINIB D-TARTRATE 24
nilotinib hcl 24
nilutamide.....18
nimodipine.....37
NINLARO 24
nintedanib esylate 113
NIPENT 20
nisoldipine 37
nitazoxanide.....8
nitisinone.....85
nitro-bid 39
NITRO-DUR.....40
nitrofurantoin 8
NITROFURANTOIN.....8
*nitrofurantoin macrocrystal*8

nitrofurantoin monohyd macro 8
nitroglycerin....40
nitroglycerin (intra-anal) 123
NITROLINGUAL 40
see *nitroglycerin* 40
NITROSTAT....40
see *nitroglycerin* 40
NITYR 85
NIVESTYM....96
nizatidine....89
nora-be....79
NORDITROPIN FLEXPRO 85
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr 80
norethindrone (contraceptive)....80
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg....80
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg....80
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg....80
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) 80
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) 80
norethindrone acetate....86
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg 81
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg 81
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg 80
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg....80
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg 80
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg 80
NORITATE....123
NORLIQVA 37
norlyroc 80
NORPACE 33
see *disopyramide phosphate* 33
NORPRAMIN 44
NORTHERA....39
see *droxidopa*....39
nortrel 0.5/35 (28) 80
nortrel 1/35 (21) 80
nortrel 1/35 (28) 80
nortrel 7/7/7....80
nortriptyline hcl....44
NORVASC 37
see *amlodipine besylate* 36
NORVIR....11
see *ritonavir*....11
NOURIANZ 47
NOVAREL....85
NOVOLIN70/30 INJ RELION....75
NOVOLIN INJ 70/30 75
NOVOLIN INJ 70/30 FP..75
NOVOLIN INJ 70/30 FP RELION....75
NOVOLIN N 75
NOVOLIN N FLEXPEN...75
NOVOLIN N FLEXPEN RELION....75
NOVOLIN N RELION....76
NOVOLIN R 76
NOVOLIN R FLEXPEN...76
NOVOLIN R FLEXPEN RELION....76
NOVOLIN R RELION....76
NOVOLOG....76
NOVOLOG FLEXPEN 76
NOVOLOG FLEXPEN RELION....76
NOVOLOG MIX INJ 70/30 76
NOVOLOG MIX INJ FLEXPEN....76
NOVOLOG MIX INJ FLEX REL 76
NOVOLOG PENFILL 76
NOVOLOG RELI INJ 70/30 76
NOVOLOG RELION 76
NOXAFIL....10
NPLATE....96
NUBEQA....18
NUCALA 113, 114
NUCYNTA....5
see *tapentadol hcl* 6
NUCYNTA ER....3
NUEDEXTA
see *dextromethorphan hbr-quinidine sulfate cap 20-10 mg*....64
NUEDEXTA CAP 20-10MG 65
NULOJIX....104
NUPLAZID 49
NURTEC 63
NUTRILIPID 107
NUVARING
see *eluryng*....78
see *enilloring* 78
see *etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr*....78
NUVARING MIS....80
NUVESSA....95
NUVIGIL....69
see *armodafinil* 68, 69
NUZYRA 16
nyamyc....119
nylia 1/35....80
nylia 7/7/7....80
NYMALIZE 37
NYPOZI....96
nystatin....10
NYSTATIN
see *nystatin (mouth-throat)* 124
nystatin (mouth-throat)..124

nystatin (topical).....119
nystop 119
NYVEPRIA.....96
O
OCREVUS 67
OCREVUS INJ ZUNOVO67
OCTAGAM.....103
octreotide acetate 85
OCUFLOX.....108
see *ofloxacin (ophth)* .108
ODACTRA SUB 103
ODEFSEY TAB.....12
ODOMZO.....24
OFEV 114
see *nintedanib esylate* 113
ofloxacin (ophth) 108
ofloxacin (otic).....110
OGIVRI 24
OGSIVEO 24
OHTUVAYRE.....114
OJEMDA 24
OJJAARA.....25
olanzapine.....49
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg.....31
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg.....31
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg.....31
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg.....31
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg.....31
olmesartan medoxomil....33
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg 31
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg 31
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg 31
olopatadine hcl (nasal)..112
OLPRUVA.....85
OLUMIANT 100
omega-3-acid ethyl esters cap 1 gm.....35
omeprazole 92
omeprazole-sodium bicarbonate cap 20-1100 mg 92
omeprazole-sodium bicarbonate cap 40-1100 mg 92
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg ...93
omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg ...93
OMNARIS 115
OMNIPOD 5 DX KIT INT G7G6.....76
OMNIPOD 5 DX MIS POD G7G6.....76
OMNIPOD5 LIB KIT INTRO 76
OMNIPOD5 LIB MIS PODS 76
OMNIPOD DASH KIT INTRO 76
OMNIPOD DASH MIS PODS 76
OMNITROPE 85
OMVOH 100
OMVOH SOAJ 100/200 100
OMVOH SOSY 100/200 100
ONAPGO 47
ONCASPAR.....20
ondansetron.....88
ondansetron hcl 88
ONEXTON
see *clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%* 117
ONEXTON GEL 1.2-3.75 117
ONFI 54
see *clobazam* 51
ONGENTYS.....47
ONIVYDE.....20
ONTRALFY.....68
ONTRUZANT.....25
ONUREG 17
ONZETRA XSAIL.....63
OPDIVO 25
OPDIVO INJ QVANTIG ..25
OPDUALAG INJ.....25
OPFOLDA.....85
OPIPZA.....49
OPSUMIT.....40
see *macitentan*.....40
OPSYNVI TAB 10-20MG 40
OPSYNVI TAB 10-40MG 40
OPVEE.....69
OPZELURA.....123
ORACEA.....123
see *doxycycline (rosacea)*.....123
ORAPRED ODT.....82
ORBACTIV.....8
ORENCIA.....101
ORENCIA CLICKJECT .101
ORENITRAM 40
ORENITRAM TAB MONTH 1 40
ORENITRAM TAB MONTH 2 40
ORENITRAM TAB MONTH 3 40
ORFADIN.....85
see *nitisinone* 85
ORGOVYX.....18
ORIAHNN CAP 85
ORILISSA 85
ORKAMBI GRA 100-125 114
ORKAMBI GRA 150-188 114
ORKAMBI GRA 75-94MG 114
ORKAMBI TAB 100-125 114

ORKAMBI TAB 200-125 114
ORLADEYO 98
ORLYNVAH TAB 500-500 8
ormalvi 37
orquidea 80
ORSERDU 18
ORUDIS 2
oseltamivir phosphate 13
OSPHENA 85
OSPOMYV 77
OTEZLA 101
OTEZLA/XR TAB 28 DAY 101
OTEZLA TAB 10/20 101
OTEZLA TAB 10/20/30 .101
OTEZLA XR 101
OTREXUP 102
OVIDE 124
OXACILLIN INJ 2GM 15
oxacillin sodium 15
oxaliplatin 17
oxaprozin 2
oxazepam 42
oxcarbazepine 54
OXERVATE 110
oxiconazole nitrate 119
OXISTAT 119
OXLUMO 94
OXTELLAR XR 54
see *oxcarbazepine* 54
OXY-ACETAMIN TAB 7.5-300 5
oxybutynin chloride 94
OXYCOD/ACETA SOL 10/300MG 5
OXYCOD/APAP TAB 10-300MG 5
OXYCOD/APAP TAB 5-300MG 5
OXYCOD-APAP TAB 2.5-300 5
oxycodone hcl 5
OXYCODONE HYDROCHLORIDE 5
oxycodone w/ acetaminophen soln 5-325 mg/5ml 6
oxycodone w/ acetaminophen tab 10-325 mg 6
oxycodone w/ acetaminophen tab 2.5-325 mg 6
oxycodone w/ acetaminophen tab 5-325 mg 6
oxycodone w/ acetaminophen tab 7.5-325 mg 6
OXYCONTIN 3, 4
oxymetazoline hcl (topical) 123
oxymorphone hcl 4, 6
OXYTROL 94
OZEMPIC 72
OZEMPIC (0.25 OR 0.5MG/DOSE) 72
OZEMPIC (1MG/DOSE) .72
OZEMPIC (2MG/DOSE) .73
OZOBAX DS 68
see *baclofen* 67

P

pacerone 33
paclitaxel 20
paclitaxel inj 100mg 20
PACLITAXEL INJ 100MG 20
PADCEV 25
paliperidone 49
palonosetron hcl 88
PALSONIFY 85
PALYNZIQ 85
PAMELOR
see *nortriptyline hcl* 44
pamidronate disodium 77
PAMIDRONATE DISODIUM 77
PANCREAZE CAP 10500UNT 91
PANCREAZE CAP 16800UNT 91
PANCREAZE CAP 21000UNT 91
PANCREAZE CAP 2600UNIT 91
PANCREAZE CAP 37000 91
PANCREAZE CAP 4200UNIT 91
PANRETIN 123
PANTOPR/NACL SOL 40MG/100 93
PANTOPR/NACL SOL 80MG/100 93
pantoprazole sodium 93
PANTOPRAZOLE SODIUM 93
see *pantoprazole sodium* 93
PANTOPRAZOLE SOL 40/50ML 93
PANZYGA 103
paricalcitol 87
PARLODEL 47
PARNATE 44
see *tranylcypromine sulfate* 45
paroxetine hcl 44, 45
paroxetine mesylate (vasomotor) 65
PAVBLU 110
PAXIL 45
see *paroxetine hcl* 44
PAXIL CR 45
see *paroxetine hcl* 45
PAXLOVID PAK 13
PAXLOVID TAB 150-100 13
PAXLOVID TAB 300-100 13
pazopanib hcl 25
PEDIARIX INJ 0.5ML 105
PEDVAXHIB 105
peg-3350/electrolytes/asc 90
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm 90
peg 3350-kcl-sod bicarb-nacl for soln 420 gm 90
PEGASYS 13
PELLIX 119
see *calcipotriene* 119
PEMAZYRE 25
PEMETREXED 17

pemetrexed disodium.....17
PEMRYDI RTU 17
PENBRAYA INJ 105
penciclovir 123
PEN GK/DEXTR INJ 40000/ML 15
PEN GK/DEXTR INJ 60000/ML 15
penicillamine 77
penicillin g potassium.....15
penicillin g sodium.....15
penicillin v potassium.....15
PENMENVY INJ 105
PENTACEL INJ.....105
PENTAM 300 8
see *pentamidine isethionate inj*.....8
pentamidine isethionate inh 8
pentamidine isethionate inj 8
PENTASA 90
see *mesalamine* 90
pentoxifylline 98
PEPCID.....89
see *famotidine* 89
perampanel 54
PERCOCET
see *endocet tab 10-325mg*.....4
see *endocet tab 5-325mg* 4
see *endocet tab 7.5-325mg*.....4
see *oxycodone w/ acetaminophen tab 10-325 mg*.....6
see *oxycodone w/ acetaminophen tab 5-325 mg*.....6
see *oxycodone w/ acetaminophen tab 7.5-325 mg*.....6
PERCOCET TAB 10-325MG.....6
PERCOCET TAB 5-325MG 6
PERCOCET TAB 7.5-325.6
PERFOROMIST.....112
see *formoterol fumarate* 112
PERIDEX
see *chlorhexidine gluconate (mouth-throat)* 124
see *periogard* 124
perindopril erbumine 28
periogard.....124
PERJETA.....25
permethrin.....124
PERMETHRIN
see *permethrin* 124
perphenazine 49
perphenazine-amitriptyline tab 2-10 mg 45
perphenazine-amitriptyline tab 2-25 mg 45
perphenazine-amitriptyline tab 4-10 mg 45
perphenazine-amitriptyline tab 4-25 mg 45
perphenazine-amitriptyline tab 4-50 mg 45
PERSERIS.....49
PERTZYE CAP 16000U .91
PERTZYE CAP 24000U .91
PERTZYE CAP 4000UNIT 91
PERTZYE CAP 8000UNIT 91
pfizerpen 15
PHEBURANE.....85
phenelzine sulfate 45
PHENERGAN 88
see *promethazine hcl* ..88
phenobarbital 54
phenobarbital sodium.....54
phenoxybenzamine hcl ...39
phenytek 54
phenytoin 54
phenytoin sodium.....54
phenytoin sodium extended 55
PHESGO SOL 25
PHEXX GEL.....80
PHEXXI GEL.....80
philith.....80
PHOSPHOLINE IODIDE 109
PHYRAGO 25
PIASKY 98
PIFELTRO 11
pilocarpine hcl.....109
pilocarpine hcl (oral).....125
pimecrolimus.....123
pimozide.....49
pimtrea 80
pindolol.....36
pioglitazone hcl 73
pioglitazone hcl-glimepiride tab 30-2 mg 73
pioglitazone hcl-glimepiride tab 30-4 mg 73
pioglitazone hcl-metformin hcl tab 15-500 mg.....73
pioglitazone hcl-metformin hcl tab 15-850 mg.....73
PIP/TAZ/NACL INJ 2-0.25GM.....16
PIP/TAZ/NACL INJ 3-0.375G.....16
PIP/TAZ/NACL INJ 4-0.5GM.....16
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm) 16
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm) 16
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm) 16
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm) 16
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm) 16
PIQRAY 200MG DAILY DOSE 25
PIQRAY 250MG TAB DOSE 25
PIQRAY 300MG DAILY DOSE 25

pirfenidone 114
piroxicam.....2
pitavastatin calcium.....34
PLAQUENIL.....102
see *hydroxychloroquine sulfate* 102
PLASMA-LYTE A
see *multiple electrolytes ph 5.5*.....106
PLASMA-LYTE INJ -A ..106
PLAVIX 99
see *clopidogrel bisulfate* 99
PLEGRIDY.....67
PLEGRIDY INJ STARTER 67
PLEGRIDY PEN INJ STARTER.....67
plenamine 107
PLENVU SOL 90
plerixafor 96
podofilox.....123, 124
POKONZA 107
POLIVY 25
polymyxin b sulfate 8
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% 108
pomalidomide.....19
POMALYST 19
see *pomalidomide* 19
POMBILITI 85
PONVORY 67
PONVORY TAB STARTER 67
portia-28.....80
posaconazole.....10
POSFREA.....88
*potassium chloride*106, 107
POTASSIUM CHLORIDE 107
see *potassium chloride* 107
POTASSIUM CHLORIDE/DEXTRO
see *kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj* 106
see *potassium chloride 20 meq/l (0.15%) in dextrose 5% inj* 107
POTASSIUM CHLORIDE/SODIUM
see *kcl 20 meq/l (0.15%) in nacl 0.45% inj*.....106
see *kcl 20 meq/l (0.15%) in nacl 0.9% inj*.....106
see *kcl 40 meq/l (0.3%) in nacl 0.9% inj*.....106
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj.....107
potassium chloride microencapsulated crystals er.....107
potassium citrate (alkalinizer) 94
POT CHL/D5W INJ 20MEQ/L 106
POT CHL 20MEQ/L IN NACL 0.45% INJ 106
POT CHL 20MEQ/L IN NACL 0.9% INJ 106
POT CHL 40MEQ/L IN NACL 0.9% INJ 106
POTELIGEO 25
PRADAXA.....95, 96
see *dabigatran etexilate mesylate* 95
pralatrexate.....17
pramipexole dihydrochloride.....47
PRAMOSONE CRE 1-1% 122
PRAMOSONE LOT 1-1% 122
PRAMOSONE LOT 2.5% 122
prasugrel hcl 99
pravastatin sodium.....34
praziquantel 8
prazosin hcl.....29
PRED FORTE.....109
see *prednisolone acetate (ophth)* 109
PRED MILD 109
prednisolone 82
prednisolone acetate (ophth).....109
PREDNISOLONE SODIUM PHOSP.....109
prednisolone sodium phosphate.....82
prednisone 82, 83
PREDNISONE INTENSOL 83
pregabalin 55
pregabalin (once-daily) ...65
PREGNYL W/DILUENT BENZYL 85
PREMARIN 82
see *estrogens, conjugated* 81
PREMASOL SOL 10%..107
PREMPHASE TAB 82
PREMPRO TAB 0.3-1.5..82
PREMPRO TAB 0.45-1.582
PREMPRO TAB 0.625-2.5 82
PREMPRO TAB 0.625-5.82
PRENATAL TAB 27-1MG 107
PRENATAL TAB PLUS.107
PRETOMANID 12
PREVACID.....93
see *lansoprazole* 92
PREVACID SOLUTAB....93
see *lansoprazole* 92
prevalite 35
PREVYMIS 13
PREZCOBIX TAB 675/150 12
PREZCOBIX TAB 800-150 12
PREZISTA 11
see *darunavir*.....10
PRIFTIN 12
see *rifapentine*.....12
PRILOSEC.....93
primaquine phosphate 10

PRIMAQUINE PHOSPHATE 10
see *primaquine phosphate* 10
PRIMAXIN IV
see *imipenem-cilastatin intravenous for soln 500 mg* 7
PRIMAXIN IV INJ 500MG .8
primidone 55
PRIORIX INJ 105
PRISTIQ 45
see *desvenlafaxine succinate* 43
PRIVIGEN 103
PROAIR RESPICLICK .. 112
probenecid 1
PROCARDIA XL 37
see *nifedipine* 37
prochlorperazine 88
prochlorperazine edisylate 88
prochlorperazine maleate 88
PROCRIT 96, 97
proctocort 124
PROCTOFOAM AER HC 1% 124
procto-med hc 124
proctosol hc 124
proctozone-hc 124
PROCYSBI 85
progesterone 86
PROGLYCEM 83
see *diazoxide* 83
PROGRAF 104
see *tacrolimus* 104
PROLASTIN-C 114
PROLATE SOL 10/300MG 6
PROLATE TAB 10-300MG 6
PROLATE TAB 5-300MG .6
PROLATE TAB 7.5-300 6
PROLENSA 109
see *bromfenac sodium (ophth)* 108
PROLIA 77
PROMACTA 98
see *eltrombopag olamine* 97
promethazine & phenylephrine syrup 6.25-5 mg/5ml 111
promethazine hcl 88
promethegan 88
PROMETRIUM 86
see *progesterone* 86
propafenone hcl 33
proparacaine hcl 110
propranolol hcl 36
propylthiouracil 87
PROQUAD INJ 105
PROSCAR 93
see *finasteride* 93
PROSOL INJ 20% 107
PROTONIX 93
see *pantoprazole sodium* 93
protriptyline hcl 45
PROVERA 86
see *medroxyprogesterone acetate* 86
PROVIGIL 69
see *modafinil* 69
prucalopride succinate 91
PRUDOXIN 124
see *doxepin hcl (antipruritic)* 123
pruradik 124
PULMICORT 115
see *budesonide (inhalation)* 115
PULMICORT FLEXHALER 115
PULMOZYME 114
PURIXAN 17
see *mercaptopurine* 17
PYLERA
see *bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg* 91
PYLERA CAP 91
pyrazinamide 12
pyridostigmine bromide ...65
pyrimethamine 8
PYRUKYND 98
PYRUKYND TAB 20MGX5MG 98
PYRUKYND TAB 50MGX20M 98
PYRUKYND TAPER PACK 98
PYZCHIVA 101

Q

QBRELIS 28
QBREXZA 124
QELBREE 60
QINLOCK 25
QIVIGY 103
QNASL 115
QNASL CHILDRENS 115
QUADRACEL INJ 0.5ML 105
QUESTRAN 35
see *cholestyramine* 34
QUESTRAN LIGHT 35
see *cholestyramine light* 34
see *prevalite* 35
quetiapine fumarate 49
QUILLICHEW ER 60
QUILLIVANT XR 60
quinapril hcl 28
quinapril-hydrochlorothiazide tab 10-12.5 mg 28
quinapril-hydrochlorothiazide tab 20-12.5 mg 28
quinapril-hydrochlorothiazide tab 20-25 mg 28
quinidine sulfate 33
quinine sulfate 10
QULIPTA 63
QUTENZA KIT 8% 1-PCH 122
QUTENZA KIT 8% 2-PCH 122
QUTENZA KIT 8% 4-PCH 122

QUVIVIQ 61
QUZYTTIR 112
QVAR REDIHALER 115
R
RABAVERT INJ 105
rabeprazole sodium 93
RADICAVA ORS 65
RADICAVA ORS STARTER KIT 65
RAGWITEK 103
RALDESY 45
raloxifene hcl 85
ramelteon 61
ramipril 29
ranitidine hcl 89
ranolazine 39
RAPIVAB 13
rasagiline mesylate 47
RASUVO 102
RAVICTI 85
see *glycerol phenylbutyrate* 84
RAYALDEE 87
REBIF 67
REBIF REBIDO INJ TITRATN 67
REBIF REBIDOSE 67
REBIF TITRTN INJ PACK 67
REBLOZYL 98
REBYOTA 91
RECARBRIO INJ 1.25GM 8
RECLAST 77
see *zoledronic acid* 77
reclipsen 80
RECOMBIVAX HB 105
RECORLEV 85
RECTIV 124
see *nitroglycerin (intra-anal)* 123
REDEMPLO 39
REGLAN 88
see *metoclopramide hcl* 88
RELAFEN DS 2
RELENZA DISKHALER .13
RELEUKO 97
RELEXXII 60, 61
relgaabi 55
RELISTOR 91, 92
RELPAX 63
see *eletriptan hydrobromide* 62
RELTONE 92
REMERON 45
see *mirtazapine* 44
REMERON SOLTAB 45
see *mirtazapine* 44
REMICADE 101
REMODULIN 40
RENFLEXIS 101
repaglinide 73
REPATHA 35
REPATHA SURECLICK .35
RESTASIS 110
RESTASIS MULTIDOSE 110
RESTORIL 61
see *temazepam* 62
RETACRIT 97
RETEVMO 25
RETIN-A 117
see *tretinoin* 118
RETIN-A MICRO 117
see *tretinoin microsphere* 118
RETIN-A MICRO PUMP 117
see *tretinoin microsphere* 118
RETROVIR 11
see *zidovudine* 11
REVATIO 40
see *sildenafil citrate (pulmonary hypertension)* 40
REVCOVI 85
REVLIMID 19
see *lenalidomide* 19
REVUFORJ 25
REXTOVY 70
REXULTI 49
REYATAZ 11
see *atazanavir sulfate* .10
REYVOW 63
REZDIFFRA 85
REZENOPY 70
REZLIDHIA 25
REZUROCK 104
REZVOGLAR KWIKPEN 76
REZZAYO 10
RHAPSIDO 101
RHOFADE 124
see *oxymetazoline hcl (topical)* 123
RHOPRESSA 109
RIABNI 25
ribavirin (hepatitis c) 13
rifabutin 12
rifampin 12
rifapentine 12
rilpivirine hcl 11
riluzole 65
rimantadine hydrochloride 13
RIMSO-50 94
see *dimethyl sulfoxide* .93
RINVOQ 101
RINVOQ LQ 101
RIOMET
see *metformin hcl* 72
risedronate sodium 77
RISPERDAL 49
see *risperidone* 49, 50
RISPERDAL CONSTA 49
see *risperidone microspheres* 50
risperidone 49, 50
risperidone microspheres 50
RITALIN 61
see *methylphenidate hcl* 60
RITALIN LA
see *methylphenidate hcl* 60
ritonavir 11
RITUXAN 25
RITUXAN INJ HYCELA ..25
rivaroxaban 96
rivastigmine 42
rivastigmine tartrate 43
rivelsa 80
RIVFLOZA 94
RIZAFILM 63

rizatriptan benzoate 63
ROCALTROL 87
ROCKLATAN DRO 109
roflumilast 114
ROLVEDON 97
ROMVIMZA 25
ropinirole hydrochloride ...47
rosuvastatin calcium 34
rosyrah 80
ROTARIX SUS 105
ROTATEQ SOL 105
ROWASA 90
see *mesalamine w/ cleanser* 90
roweepra 55
ROXICODONE 6
see *oxycodone hcl* 5
ROXYBOND 6
ROZEREM 61
see *ramelteon* 61
ROZLYTREK 25
RUBRACA 25
RUCONEST 98
rufinamide 55
RUKOBIA 11
RUXIENCE 25
RYALTRIS SPR 665-25 111
RYBELSUS 73
RYBREVANT 25
RYBREVANT INJ FASPRO 25
ryclora 112
RYDAPT 25
RYKINDO 50
RYLAZE 20
RYSTIGGO 103
RYTARY CAP 145MG 47
RYTARY CAP 195MG 47
RYTARY CAP 245MG 47
RYTARY CAP 95MG 47
RYTELO 98
ryvent 112
RYZNEUTA 97

S

SABRIL 55
see *vigabatrin* 56
see *vigadrone* 56
sacubitril-valsartan tab 24-26 mg 31
sacubitril-valsartan tab 49-51 mg 31
sacubitril-valsartan tab 97-103 mg 31
SAFYRAL
see *drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg* 78
see *tydemy* 80
SAFYRAL TAB 80
sajazir 98
SALAGEN 125
see *pilocarpine hcl (oral)* 125
SAMSCA 85
see *tolvaptan (hyponatremia)* 86
SANCUSO 88
SANDIMMUNE 104
see *cyclosporine* 104
SANDOSTATIN 85
see *octreotide acetate* .85
SANDOSTATIN LAR DEPOT 85
see *octreotide acetate* .85
SANTYL 124
SAPHNELO 104
SAPHNELO PEN 104
SAPHRIS 50
see *asenapine maleate* 47
sapropterin dihydrochloride 85
SARCLISA 25
SARCLISA ESCENA 25
SAVELLA 65
see *milnacipran hcl* 65
SAVELLA MIS TITR PAK 65
saxagliptin hcl 73
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg 73
saxagliptin-metformin hcl tab er 24hr 5-1000 mg .73
saxagliptin-metformin hcl tab er 24hr 5-500 mg ...73
SCEMBLIX 25
scopolamine 88
SDAMLO 37
SECUADO 50
SEGLUROMET TAB 2.5-1000 73
SEGLUROMET TAB 2.5-500 73
SEGLUROMET TAB 7.5-1000 73
SEGLUROMET TAB 7.5-500 73
selegiline hcl 47
selenium sulfide 119
SELZENTRY 11
see *maraviroc* 11
SEMGLEE 76
SENSIPAR
see *cinacalcet hcl* 83
SEPHIENCE 85
SEREVENT DISKUS 113
SEROQUEL 50
see *quetiapine fumarate* 49
SEROQUEL XR 50
see *quetiapine fumarate* 49
SEROSTIM 85
sertraline hcl 45
SERTRALINE HYDROCHLORIDE 45
see *sertraline hcl* 45
setlakin 80
SEYSARA 16
sharobel 80
SHINGRIX 105
SIGNIFOR 85
SIGNIFOR LAR 85
SIKLOS 98
sildenafil citrate (pulmonary hypertension) 40
SILENOR 62
see *doxepin hcl (sleep)* 61
SILIQ 101
silodosin 93

SILVADENE.....118
see *silver sulfadiazine*.....118
see *ssd*.....118
silver sulfadiazine.....118
SIMBRINZA SUS 1-0.2%.....109
simliya.....80
simpesse.....80
SIMPONI.....101
SIMPONI ARIA.....101
simvastatin.....34
SINEMET
see *carbidopa & levodopa tab 10-100 mg*.....46
see *carbidopa & levodopa tab 25-100 mg*.....46
SINEMET TAB 10-100MG.....47
SINEMET TAB 25-100MG.....47
SINGULAIR.....113
see *montelukast sodium*.....113
sirolimus.....104
SIRTURO.....12
sitagliptin.....73
sitagliptin free base-metformin hcl tab 50-1000 mg.....73
sitagliptin free base-metformin hcl tab 50-500 mg.....73
sitagliptin free base-metformin hcl tab er 24hr 100-1000 mg.....73
sitagliptin free base-metformin hcl tab er 24hr 50-1000 mg.....73
sitagliptin free base-metformin hcl tab er 24hr 50-500 mg.....73
sitagliptin phosphate.....73
sitagliptin phosphate-metformin hcl tab 50-1000 mg.....73
sitagliptin phosphate-metformin hcl tab 50-500 mg.....73
sitagliptin phosphate-metformin hcl tab er 24hr 100-1000 mg.....73
sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg.....73
sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg.....73
SIVEXTRO.....8
SKYCLARYS.....65
SKYRIZI.....101
SKYRIZI PEN.....101
SKYTROFA.....85
SLYND.....80
SMOFLIPID EMU.....107
SOAANZ.....37
sodium chloride.....107
sodium chloride (gu irrigant).....124
sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln.107
sodium oxybate.....69
*sodium phenylbutyrate*85, 86
sodium polystyrene sulfonate.....77
sodium polystyrene sulfonate powder.....78
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml.....90
SOFDRA.....124
SOGROYA.....86
solifenacin succinate.....94
SOLIQUA INJ 100/33.....76
SOLIRIS.....98
SOLOSEC.....8
SOLTAMOX.....18
SOLU-CORTEF.....83
see *hydrocortisone sod succinate*.....82
SOLU-MEDROL.....83
see *methylprednisolone sod succ*.....82
SOMA.....68
see *carisoprodol*....67, 68
SOMATULINE DEPOT...86
SOMAVERT.....86
SOOLANTRA.....124
see *ivermectin (rosacea)*.....123
sorafenib tosylate.....25
SORILUX.....119
sotalol hcl.....33
sotalol hcl (afib/afl).....33
SOTYKTU.....101
SOTYLIZE.....33
SOVUNA.....102
SPEVIGO.....101
spinosad.....124
SPIRIVA HANDIHALER111
see *tiotropium bromide*.....111
SPIRIVA RESPIMAT....111
spironolactone.....29
spironolactone & hydrochlorothiazide tab 25-25 mg.....38
SPORANOX
see *itraconazole*.....9
SPRAVATO 56MG DOSE.....45
SPRAVATO 84MG DOSE.....45
sprintec 28.....80
SPRITAM.....55
SPRIX.....2
SPRYCEL.....25, 26
see *dasatinib*.....21
sps.....78
sps rectal.....78
sronyx.....80
ssd.....118
STEGLATRO.....73, 74
STEGLUJAN TAB 15-100MG.....74
STEGLUJAN TAB 5-100MG.....74
STELARA.....101
STIMUFEND.....97
STIOLTO AER 2.5-2.5..111
STIVARGA.....26

STRENSIQ.....86
streptomycin sulfate.....8
STRIBILD TAB.....12
STRIVERDI RESPIMAT 113
STROMECTOL.....8
see *ivermectin*.....7
SUBLOCADE.....70
SUBOXONE
see *buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)*....69
see *buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)*.69
see *buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)*.....69
see *buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)*.....69
SUBOXONE MIS 12-3MG 70
SUBOXONE MIS 2-0.5MG 70
SUBOXONE MIS 4-1MG 70
SUBOXONE MIS 8-2MG 70
subvenite.....55
SUBVENITE.....55
subvenite starter kit/blu...55
subvenite starter kit/gre...55
subvenite starter kit/ora...55
SUCRAID.....92
sucralfate.....92
SUFLAVE SOL 90
SULAR.....37
see *nisoldipine*.....37
sulfacetamide sodium (acne).....118
sulfacetamide sodium (ophth).....108
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%.....108
sulfadiazine.....8
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml.....8
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml.....8
sulfamethoxazole-trimethoprim tab 400-80 mg.....8
sulfamethoxazole-trimethoprim tab 800-160 mg.....8
SULFAMYLON.....118
sulfasalazine.....90
sulindac.....2
sumatriptan.....63
sumatriptan-naproxen sodium tab 85-500 mg.63
sumatriptan succinate.....63
sunitinib malate.....26
SUNLENCA 11
SUNOSI 69
SUPREP BOWEL PREP KIT
see *sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml*...90
SUPREP BOWEL SOL PREP KIT.....90
SUSVIMO 110
SUTAB TAB.....90
SUTENT.....26
see *sunitinib malate*.....26
syeda.....80
SYFOVRE.....110
SYLVANT.....20
SYMBICORT
see *breyna*.....116
see *budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act*.....116
see *budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act*.....116
SYMBICORT AER 160-4.5 116
SYMBICORT AER 80-4.5 116
SYMBRAVO TAB 20-10MG 63
SYMDEKO TAB 100-150 114
SYMDEKO TAB 50-75MG 114
SYMFI
see *efavirenz-lamivudine-tenofovir df tab 600-300-300 mg* 11
SYMFI TAB.....12
SYMLINPEN 120 74
SYMLINPEN 60 74
SYMPAZAN 55
SYMPROIC.....92
SYMTUZA TAB.....12
SYNALAR 122
see *fluocinolone acetonide*.....121
SYNAREL 86
SYNJARDY TAB 12.5-1000MG.....74
SYNJARDY TAB 12.5-500 74
SYNJARDY TAB 5-1000MG.....74
SYNJARDY TAB 5-500MG 74
SYNJARDY XR TAB 10-1000 74
SYNJARDY XR TAB 12.5-1000 74
SYNJARDY XR TAB 25-1000 74
SYNJARDY XR TAB 5-1000MG.....74
SYNTHROID.....87
see *levothyroxine sodium*.....87
see *levoxyl*.....87
see *unithroid*.....87
SYPRINE 78
see *trientine hcl*.....78

T

TABLOID.....18
TABRECTA.....26
TACLONEX

see *calcipotriene-betamethasone dipropionate susp 0.005-0.064%* 119
TACLONEX SUS 119
tacrolimus.....104
tacrolimus (topical).....124
tadalafil.....93
tadalafil (pulmonary hypertension).....40
TADLIQ.....40
TAFINLAR.....26
tafluprost.....109
TAGRISSO 26
TAKHZYRO 98
TALICIA CAP 92
TALTZ.....101, 102
TALZENNA 26
TAMIFLU.....13
see *oseltamivir phosphate* 13
tamoxifen citrate.....18
tamsulosin hcl 93
tanlor.....68
tapentadol hcl.....6
TAPENTADOL HYDROCHLORIDE...4, 6
taperdex 12-day.....83
taperdex 6-day.....83
taperdex 7-day.....83
targadox.....16
TARGRETIN 20, 124
see *bexarotene*.....19
see *bexarotene (topical)* 122
tarina 24 fe.....80
tarina fe 1/20 eq.....80
TARPEYO.....94
TASCENSO ODT.....67
TASIGNA 26
see *nilotinib hcl*.....24
tasimelteon.....62
TAVALISSE 98
TAVNEOS.....98
TAYTULLA
see *gemmily* 78
see *norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)* 80
TAYTULLA CAP 1MG/20MC.....80
tazarotene.....119
TAZAROTENE.....118
tazicef.....14
TAZORAC.....119
see *tazarotene*.....119
see *trilitas* 119
TECENTRIQ 26
TECENTRIQ INJ HYBREZA 26
TECFIDERA.....67
see *dimethyl fumarate* .66
TECFIDERA CAP STARTER.....67
TECFIDERA STARTER PACK
see *dimethyl fumarate capsule dr starter pack 120 mg & 240 mg* 66
TECVAYLI.....26
TEFLARO 14
see *ceftaroline fosamil*.14
TEGRETOL.....55
see *carbamazepine* 51
TEGRETOL-XR 55
see *carbamazepine* 51
TEKTURNA.....39
see *aliskiren fumarate* .38
telmisartan 33
telmisartan-amlodipine tab 40-10 mg 31
telmisartan-amlodipine tab 40-5 mg 31
telmisartan-amlodipine tab 80-10 mg 31
telmisartan-amlodipine tab 80-5 mg 31
telmisartan-hydrochlorothiazide tab 40-12.5 mg 32
telmisartan-hydrochlorothiazide tab 80-12.5 mg 32
telmisartan-hydrochlorothiazide tab 80-25 mg 32
temazepam 62
temsirolimus.....26
TENIVAC INJ 5-2LF.....105
tenofovir disoproxil fumarate 11
TENORMIN.....36
see *atenolol* 35
TEPEZZA.....86
TEPMETKO 26
terazosin hcl.....29
terbinafine hcl.....10
terbutaline sulfate.....113
terconazole vaginal.....95
teriflunomide 67
teriparatide.....77
TERIPARATIDE.....77
TESTIM.....70
testosterone 70
testosterone cypionate....70
testosterone enanthate ...70
testosterone pump 70
tetrabenazine 65
tetracycline hcl 16
TETRACYCLINE HYDROCHLORID 16
TEVIMBRA.....26
texacort 122
TEZRULY.....29
TEZSPIRE 114
THALITONE.....38
THALOMID 19
THEO-24.....114
theophylline.....114
THIOLA.....94
see *tiopronin*.....94
THIOLA EC 94
see *tiopronin*.....94
see *venxxiva*.....94
thioridazine hcl.....50
thiothixene.....50
THYQUIDITY 87
tiadylt er 37
tiagabine hcl.....55
TIAZAC 37

see *diltiazem hcl extended release beads* 36
see *tiadylt er* 37
TIBSOVO 26
ticagrelor 99
TICOVAC 105
tigecycline 16
TIGECYCLINE 16
TIGLUTIK 65
TIKOSYN 33
see *dofetilide* 33
tilia fe 80
timolol hemihydrate (ophth) 109
timolol maleate 36
timolol maleate (ophth) .109
timolol maleate (ophth) once-daily 109
timolol maleate (ophth) pf 110
TIMOPTIC OCUDOSE..110
see *timolol maleate (ophth) pf* 110
tinidazole 8
tiopronin 94
tiotropium bromide 111
TIROSINT 87
TIROSINT-SOL 87
TIVDAK 26
TIVICAY 11
TIVICAY PD 11
tizanidine hcl 68
TLANDO 70
TOBI 8
TOBI PODHALER 8
TOBRADEX OIN 0.3-0.1% 108
TOBRADEX ST SUS 0.3-0.05 108
tobramycin 8
tobramycin (ophth) 108
tobramycin-dexamethasone ophth susp 0.3-0.1% .108
tobramycin sulfate 8
TOBREX 108
tofacitinib citrate 102
TOFIDENCE 102
tolectin 600 2
TOLECTIN DS 2
tolmetin sodium 2
TOLSURA 10
tolterodine tartrate 94
tolvaptan 86
tolvaptan (hyponatremia) 86
tolvaptan tab therapy pack 30 & 15 mg 86
tolvaptan tab therapy pack 45 & 15 mg 86
tolvaptan tab therapy pack 60 & 30 mg 86
tolvaptan tab therapy pack 90 & 30 mg 86
TONMYA 65
TOPAMAX 55
see *topiramate* 56
TOPAMAX SPRINKLE....55
see *topiramate* 56
TOPICORT 122
see *desoximetasone* .121
topiramate 55, 56
topotecan hcl 20
TOPOTECAN HCL 20
see *topotecan hcl* 20
TOPROL XL 36
see *metoprolol succinate* 36
toremifene citrate 18
TORISEL 26
see *temsirolimus* 26
torpenz 26
torsemide 38
TOSYMRA 64
TOUJEO MAX SOLOSTAR 76
TOUJEO SOLOSTAR 76
tovet 122
TOVIAZ 94
see *fesoterodine fumarate* 94
TPN ELECTROL INJ 107
TRACLEER 40
see *bosentan* 40
TRADJENTA 74
tramadol-acetaminophen tab 37.5-325 mg 6
tramadol hcl 4, 6
TRAMADOL HYDROCHLORIDE 6
trandolapril 29
trandolapril-verapamil hcl tab er 1-240 mg 28
trandolapril-verapamil hcl tab er 2-180 mg 28
trandolapril-verapamil hcl tab er 2-240 mg 28
trandolapril-verapamil hcl tab er 4-240 mg 28
tranexamic acid 98
TRANEXAMIC ACID/SODIUM CH
see *tranexamic acid-sodium chloride iv soln 1000 mg/100ml-0.7%* 98
tranexamic acid-sodium chloride iv soln 1000 mg/100ml-0.7% 98
TRANSDERM SCOP 89
see *scopolamine* 88
tranylcypromine sulfate ...45
TRAVASOL INJ 10% 107
TRAVATAN Z 110
see *travoprost* 110
travoprost 110
TRAZIMERA 26
trazodone hcl 45
TREANDA 17
see *bendamustine hcl* .16
TRELEGY AER ELLIPTA 100-62.5-25 MCG 111
TRELEGY AER ELLIPTA 200-62.5-25 MCG 111
TRELSTAR MIXJECT 18
TREMFYA 102
TREMFYA INDUCTION PACK FO 102
TREMFYA PEN 102
treprostinil 40
TRESIBA 76
TRESIBA FLEXTOUCH ..76
tretinoin 118
tretinoin (chemotherapy) .20
tretinoin microsphere 118

TREXALL 103
TREXIMET
see *sumatriptan-naproxen sodium tab 85-500 mg* 63
TREXIMET TAB 85-500MG 64
trezix 6
triamcinolone acetonide ..83
triamcinolone acetonide (mouth) 125
triamcinolone acetonide (topical) 122
triamterene 38
triamterene & hydrochlorothiazide cap 37.5-25 mg 38
triamterene & hydrochlorothiazide tab 37.5-25 mg 38
triamterene & hydrochlorothiazide tab 75-50 mg 38
triazolam 62
TRIBENZOR
see *olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg* 31
see *olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg* 31
see *olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg* 31
see *olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg* 31
see *olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg* 31
TRIBENZOR TAB 20-5-12.5MG.....32
TRIBENZOR TAB 40-10-12.5MG.....32
TRIBENZOR TAB 40-10-25MG.....32
TRIBENZOR TAB 40-5-12.5MG.....32
TRIBENZOR TAB 40-5-25MG.....32
TRICOR
see *fenofibrate* 33
tridacaine iii 122
triderm 122
trientine hcl 78
TRIESENCE 109
tri-estarylla 80
trifluoperazine hcl 50
trifluridine 108
trihexyphenidyl hcl 47
TRIJARDY XR TAB ER 24HR 10-5-1000MG 74
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG 74
TRIJARDY XR TAB ER 24HR 25-5-1000MG 74
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG ...74
TRIKAFTA PAK 59.5MG 114
TRIKAFTA PAK 75MG..114
TRIKAFTA TAB 100-50-75MG & 150MG 114
TRIKAFTA TAB 50-25-37.5MG & 75MG 114
tri-legest fe 80
TRILEPTAL.....56
see *oxcarbazepine* 54
tri-linyah 80
trilitas 119
tri-lo-estarylla 80
tri-lo-marzia 80
tri-lo-mili 80
tri-lo-sprintec 80
trimethobenzamide hcl 89
trimethoprim 8
tri-mili 80
trimipramine maleate 45
TRINTELLIX.....45
tri-sprintec 80
TRIUMEQ PD TAB 12
TRIUMEQ TAB 12
tri-vylibra 80
tri-vylibra lo 80
TRODELVY.....26
TROGARZO.....11
TROKENDI XR 56
see *topiramate* 55, 56
TROPHAMINE INJ 10% 107
trospium chloride 94
TRUDHESA 64
TRULANCE.....92
TRULICITY 74
TRUMENBA.....105
TRUQAP 26
TRUTAKNA.....94
TRUVADA
see *emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg* 11
see *emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg* 12
see *emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg* 12
see *emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg* 12
TRUVADA TAB 100-150.12
TRUVADA TAB 133-200.12
TRUVADA TAB 167-250.12
TRUVADA TAB 200-300.12
TRUXIMA.....26
TRYNGOLZA.....39
TRYPTYR 110
TRYVIO.....39
TUDORZA PRESSAIR .111
TUDORZA PRESSAIR (INSTITUTIONAL PACK) 111
TUKYSA.....26

TURALIO 26
turqoz 80
twice-daily clindamycin phosphate (topical) 118
TWINRIX INJ 105
TWIRLA DIS 120-30 80
TWYNEO CRE 0.1-3% .118
TYBLUME CHW 0.1-0.02 80
TYBOST.....11
tydemy 80
TYENNE 102
TYGACIL.....16
see *tigecycline*.....16
TYKERB.....26
see *lapatinib ditosylate* 23
TYMLOS 77
TYPHIM VI 105
TYRUKO 67
TYRVAYA 110
TYSABRI.....67
TYVASO 40
TYVASO DPI INSTITUTIONAL 40
TYVASO DPI MAINTENANCE KI.....41
TYVASO DPI POW 16-32-48 41
TYVASO DPI POW 48-80MCG.....41
TYVASO DPI POW MAIN KIT 32-64MCG 41
TYVASO DPI POW MAIN KIT 48-64MCG 41
TYVASO REFILL KIT.....41
TYVASO STARTER KIT .41
TYZAVAN 8
TZIELD.....74
U
UBRELVY 64
UCERIS 90
see *budesonide*.....89
see *budesonide (intrarectal)*.....89
UDENYCA 97
UDENYCA ONBODY.....97
ULORIC 1
see *febuxostat*.....1
ULTOMIRIS 98
ULTRAVATE.....122
UNASYN
see *ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm*.....15
see *ampicillin & sulbactam sodium for inj 3 (2-1) gm*.....15
UNASYN BULK PACK
see *ampicillin & sulbactam sodium for iv soln 15 (10-5) gm* .15
UNASYN INJ 1.5GM.....16
UNASYN INJ 15GM.....16
UNASYN INJ 3GM.....16
unithroid 87
UNLOXCYT 26
UPLIZNA.....65
UPTRAVI 41
UPTRAVI PACK TAB 200/800 41
UROCIT-K 10.....94
see *potassium citrate (alkalinizer)* 94
UROCIT-K 15.....94
see *potassium citrate (alkalinizer)* 94
UROXATRAL 93
see *alfuzosin hcl*.....93
ursodiol 92
URSODIOL 92
URSO FORTE
see *ursodiol*.....92
URSOLIGN 92
USTEKINUMAB 102
UZEDY.....50
V
VABOMERE INJ 2GM(1-1) 8
VABRINTY 18
VABYSMO 110
VAGIFEM.....82
see *estradiol vaginal*....81
see *yuvafem*.....82
valacyclovir hcl.....13
VALCHLOR.....124
VALCYTE.....13
see *valganciclovir hcl* ..13
valganciclovir hcl.....13
VALIUM.....56
see *diazepam*.....52
valproate sodium.....56
valproic acid.....56
valrubicin.....20
valsartan 33
valsartan-hydrochlorothiazide tab 160-12.5 mg 32
valsartan-hydrochlorothiazide tab 160-25 mg 32
valsartan-hydrochlorothiazide tab 320-12.5 mg 32
valsartan-hydrochlorothiazide tab 320-25 mg 32
valsartan-hydrochlorothiazide tab 80-12.5 mg 32
VALSTAR.....20
see *valrubicin* 20
VALTOCO 10 MG DOSE 56
VALTOCO 15 MG DOSE 56
VALTOCO 20 MG DOSE 56
VALTOCO 5 MG DOSE..56
VALTREX.....13
see *valacyclovir hcl* 13
valtya 1/35.....80
valtya 1/50.....80
VANCOCIN 9
see *vancomycin hcl*.....9
VANCOMYC/D5W INJ 1.25/250 9
VANCOMYC/D5W INJ 1.5/300 9
vancomycin hcl 9
VANCOMYCIN HYDROCHLORIDE.....9
see *vancomycin hcl*.....9
VANCOMYCIN INJ 1 GM .9
VANCOMYCIN INJ 500MG 9
VANCOMYCIN INJ 750MG 9

VANDAZOLE 95
VANFLYTA 26
VANRAFIA 94
VAQTA 105
varenicline tartrate 70
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack 70
VARIVAX 105
VARUBI 89
VASCEPA 35
VASERETIC
see *enalapril maleate & hydrochlorothiazide tab 10-25 mg* 28
VASERETIC TAB 10-25MG 28
VASOTEC 29
see *enalapril maleate* ..28
VAXCHORA SUS 105
VECTIBIX 26
VECTICAL 119
VEGZELMA 26
VELCADE 26
see *bortezomib* 21
VELETRI 41
see *epoprostenol sodium* 40
velivet 80
VELSIPITY 102
VELTASSA 78
VEMLIDY 13
VENCLEXTA 26
VENCLEXTA TAB START PK 26
VENLAFAXINE BESYLATE ER 45
venlafaxine hcl 45
VENTOLIN HFA 113
see *albuterol sulfate* ..112
VENTOLIN HFA (INSTITUTIONAL PACK) 113
venxxiva 94
VEOZAH 86
VEPPANU 18
verapamil hcl 37
VERKAZIA 110
VERQUVO 39
VERSACLOZ 50
VERZENIO 26
vestura 80
VEVYE 110
VFEND 10
see *voriconazole* 10
VFEND IV 10
see *voriconazole* 10
V-GO 20 KIT 76
V-GO 30 KIT 76
V-GO 40 KIT 76
VIBATIV 9
VIBERZI 92
VICTOZA 74
see *liraglutide* 72
VIDAZA 18
see *azacitidine* 17
vienva 80
vigabatrin 56
vigadrone 56
VIGAFYDE 56
VIGAMOX 108
see *moxifloxacin hcl (ophth)* 108
VIIBRYD 45
see *vilazodone hcl* 45
VIJOICE 86
VIJOICE TAB 250MG 86
vilazodone hcl 45
VIMIZIM 86
VIMKUNYA 105
VIMPAT 56
see *lacosamide* 53
see *lacosamide oral* 53
vinblastine sulfate 20
vincristine sulfate 20
vinorelbine tartrate 20
VIOKACE TAB 10440 92
VIOKACE TAB 20880 92
viorele 80
VIRACEPT 11
VIREAD 11
see *tenofovir disoproxil fumarate* 11
VITRAKVI 26, 27
VIVELLE-DOT 82
see *dotti* 81
see *estradiol* 81
VIVIMUSTA 17
VIVITROL 70
VIVJOA 10
VIVOTIF CAP EC 105
VIZIMPRO 27
VOGELXO 70
VOGELXO PUMP 70
VONJO 27
VOQUEZNA 93
VOQUEZNA PAK DUAL PAK 92
VOQUEZNA PAK TRIP PK 92
VORANIGO 27
voriconazole 10
VORICONAZOLE 10
VOSEVI TAB 13
VOTRIENT 27
see *pazopanib hcl* 25
VOWST CAP 92
VOXZOGO 86
VOYDEYA 98
VOYDEYA TAB 50-100MG 98
VOYXACT 94
VPRIV 86
VRAYLAR 50
VTAMA 120
VUMERITY 67
VUSION OIN 119
VYALEV INJ 12-240MG ..47
VYEPTI 64
vyfemla 80
VYKAT XR 86
VYKOURA 20
vylibra 80
VYLOY 27
VYNDAMAX 39
VYNDAQEL 39
VYSCOXA 2
VYTORIN
see *ezetimibe-simvastatin tab 10-10 mg* 34
see *ezetimibe-simvastatin tab 10-20 mg* 34

see *ezetimibe-simvastatin tab 10-40 mg*.....34
see *ezetimibe-simvastatin tab 10-80 mg*.....34
VYTORIN TAB 10-10MG 35
VYTORIN TAB 10-20MG 35
VYTORIN TAB 10-40MG 35
VYTORIN TAB 10-80MG 35
VYVANSE.....61
see *lisdexamfetamine dimesylate*.....59
VYVGART.....103
VYVGART INJ HYTRULO 103
VYZULTA.....110
W
WAINUA.....65
WAKIX 69
warfarin sodium.....96
water for irrigation, sterile irrigation soln.....124
WAYRILZ.....99
WELCHOL 35
see *colesevelam hcl*....34
WELIREG 20
WELLBUTRIN SR.....46
see *bupropion hcl*.....43
WELLBUTRIN XL 46
see *bupropion hcl*.....43
wera 80
WESTAB PLUS TAB 27-1MG.....107
WIDAPLIK TAB 10-1.25-0.625 32
WIDAPLIK TAB 20-2.5-1.25 32
WIDAPLIK TAB 40-5-2.5 32
WINLEVI 118
WINREVAIR.....41
wixela inhub 116
wymzya fe.....80
WYOST.....77
X
XACDURO INJ 1-1GM.....9
XACIATO 95
XADAGO.....47
XALATAN.....110
see *latanoprost*.....109
XALKORI 27
XANAX.....42
see *alprazolam*.....41
XANAX XR.....42
xarah fe.....80
XARELTO 96
see *rivaroxaban*.....96
XARELTO STAR TAB 15/20MG.....96
XATMEP 103
XCOPRI 56
XCOPRI PAK 100-150....57
XCOPRI PAK 12.5-25.....56
XCOPRI PAK 150-200MG (MAINTENANCE).....57
XCOPRI PAK 150-200MG (TITRATION).....57
XCOPRI PAK 50-100MG 57
XDEMVY.....108
XELJANZ 102
see *tofacitinib citrate*..102
XELJANZ XR 102
see *tofacitinib citrate*..102
XELPROS.....110
xelria fe 80
XELSTRYM.....61
XEMBIFY 103
XENAZINE.....65
see *tetrabenazine*.....65
XENPOZYME 86
XEOMIN.....68
XERAVA 16
XERESE CRE 5-1% 124
XERMELO 92
XGEVA.....77
XHANCE.....115
XIFAXAN.....9, 92
XIFYRM 2
XIGDUO XR
see *dapagliflozin-metformin hcl tab er 24hr 10-1000 mg* 71
see *dapagliflozin-metformin hcl tab er 24hr 10-500 mg* 71
see *dapagliflozin-metformin hcl tab er 24hr 5-1000 mg* 71
see *dapagliflozin-metformin hcl tab er 24hr 5-500 mg* 71
XIGDUO XR TAB 10-1000 74
XIGDUO XR TAB 10-500MG.....74
XIGDUO XR TAB 2.5-1000 74
XIGDUO XR TAB 5-1000MG.....74
XIGDUO XR TAB 5-500MG 74
XIIDRA.....110
XIPERE.....109
XOCOVA.....13
XOFLUZA 13
XOLAIR.....114
XOLREMDI 97
XOPENEX HFA 113
XOSPATA.....27
XPOVIO PAK (100 MG ONCE WEEKLY).....27
XPOVIO PAK (40 MG ONCE WEEKLY).....27
XPOVIO PAK (40 MG TWICE WEEKLY).....27
XPOVIO PAK (60 MG ONCE WEEKLY).....27
XPOVIO PAK (60 MG TWICE WEEKLY).....27
XPOVIO PAK (80 MG ONCE WEEKLY).....27
XPOVIO PAK (80 MG TWICE WEEKLY).....27
XROMI 99
XTAMPZA ER.....4
XTANDI.....18, 19
XTORO 110
XTRENBO.....77
xulane 80
XULTOPHY INJ 100/3.6 .76
XYLOCAINE 1
see *lidocaine hcl (local anesth.)*.....1

XYLOCAINE-MPF.....1
see *lidocaine hcl (local anesth.)*.....1
XYOSTED.....70
XYREM.....69
see *sodium oxybate*....69
XYWAV SOL 0.5GM/ML.69
Y
yargesa.....86
YASMIN 28
see *drospirenone-ethinyl estradiol tab 3-0.03 mg*.....78
see *syeda*.....80
see *zumandimine*.....81
YASMIN 28 TAB 3-0.03MG.....80
YAZ
see *drospirenone-ethinyl estradiol tab 3-0.02 mg*.....78
see *jasmiel*.....79
see *loryna*.....79
see *nikki*.....79
see *vestura*.....80
YAZ TAB 3-0.02MG.....80
YCANTH.....124
YERVOY.....27
YESAFILI.....110
YESINTEK.....102
YF-VAX INJ.....105
YIMMUGO.....103
YONSA.....19
YORVIPATH.....77
yulithira.....27
YUPELRI.....111
YUTIQ.....109
YUTREPIA.....41
yuvafem.....82
YUVIWEL.....86
Z
zafemy.....80
zafirlukast.....113
zaleplon.....62
ZALTRAP.....27
ZANAFLEX.....68
see *tizanidine hcl*.....68
ZARONTIN.....57
see *ethosuximide*.....52
ZARXIO.....97
ZAVESCA.....86
see *miglustat*.....84
see *yargesa*.....86
ZAVZPRET.....64
ZEGALOGUE.....83
ZEJULA.....27
ZELAPAR.....47
ZELBORAF.....27
ZELSUVMI.....124
zelvysia.....86
ZEMAIRA.....114
ZEMBRACE SYMTOUCH.....64
ZEMDRI.....9
ZEMPLAR.....87
see *paricalcitol*.....87
zenatane.....118
ZENBEXUS.....19
ZENPEP CAP 10000UNT.....92
ZENPEP CAP 15000UNT.....92
ZENPEP CAP 20000UNT.....92
ZENPEP CAP 25000UNT.....92
ZENPEP CAP 3000UNIT92
ZENPEP CAP 40000UNT.....92
ZENPEP CAP 5000UNIT92
ZENPEP CAP 60000UNT.....92
zenzedi.....61
ZEPOSIA.....67
ZEPOSIA 7DAY CAP STR PACK.....67
ZEPOSIA CAP STR KIT.67
ZEPZELCA.....17
ZERBAXA INJ 1.5GM.....14
ZERVIATE.....109
ZESTORETIC
see *lisinopril & hydrochlorothiazide tab 10-12.5 mg*.....28
see *lisinopril & hydrochlorothiazide tab 20-12.5 mg*.....28
see *lisinopril & hydrochlorothiazide tab 20-25 mg*.....28
ZESTORETIC TAB 10-12.5.....28
ZESTORETIC TAB 20-12.5.....28
ZESTORETIC TAB 20-25MG.....28
ZESTRIL.....29
ZETIA.....35
see *ezetimibe*.....34
ZEVTERA.....14
ZIAGEN.....11
see *abacavir sulfate*....10
ZIANA GEL.....118
zidovudine.....11
ZIEXTENZO.....97
ZIIHERA.....27
ZILBRYSQ.....103
zileuton.....113
ZILRETTA.....83
ZILXI.....124
ZIOPTAN.....110
see *tafluprost*.....109
ziprasidone hcl.....50
ziprasidone mesylate.....50
ZIPSOR.....3
see *diclofenac potassium*.....1
ZIRABEV.....27
ZIRGAN.....108
ZITHROMAX.....14
see *azithromycin*.....14
ZITHROMAX TRI-PAK....14
ZITHROMAX Z-PAK.....14
ZITUVIMET TAB 50-1000.....74
ZITUVIMET TAB 50-500MG.....74
ZITUVIMET XR TAB 100-1000.....74
ZITUVIMET XR TAB 50-1000.....74

ZITUVIMET XR TAB 50-500MG.....74
ZITUVIO.....74
ZOCOR.....34
see *simvastatin*.....34
ZOLADEX.....19
zoledronic acid.....77
ZOLEDRONIC ACID.....77
ZOLINZA.....27
zolmitriptan.....64
ZOLOFT.....46
see *sertraline hcl*.....45
zolpidem tartrate.....62
ZOLPIDEM TARTRATE..62
ZOLYMBUS.....110
ZOMACTON.....86
zomig.....64
ZOMIG.....64
see *zolmitriptan*.....64
ZONALON.....124
ZONEGRAN.....57
see *zonisamide*.....57
ZONISADE.....57
zonisamide.....57
ZORTRESS.....104
see *everolimus (immunosuppressant)*.....104
ZORYVE.....119, 120, 124
ZOSYN SOL 2-0.25GM..16
ZOSYN SOL 3-0.375G...16
ZOSYN SOL 4-0.50GM..16
zovia 1/35.....81
ZOVIRAX.....124
see *acyclovir topical*..122
ZTALMY.....57
ZTLIDO.....122
ZUBSOLV SUB 0.7-0.18.70
ZUBSOLV SUB 1.4-0.36.70
ZUBSOLV SUB 11.4-2.9.70
ZUBSOLV SUB 2.9-0.71.70
ZUBSOLV SUB 5.7-1.4...70
ZUBSOLV SUB 8.6-2.1...70
zumandimine.....81
ZUNVEYL.....43
ZURNAI.....70
ZURZUVAE.....46
ZYBIC.....3
ZYCLARA PUMP.....124
see *imiquimod*.....123
see *imiquimod pump*.123
ZYDELIG.....27
ZYFLO.....113
ZYKADIA.....27
ZYLET
see *loteprednol etabonate-tobramycin ophth susp 0.5-0.3%*.....107
ZYLET SUS 0.5-0.3%...108
ZYNLONTA.....27
ZYNYZ.....27
ZYPITAMAG.....34
ZYPREXA.....50
see *olanzapine*.....49
ZYPREXA RELPREVV...50
ZYPREXA ZYDIS.....50, 51
see *olanzapine*.....49
ZYTIGA.....19
see *abiraterone acetate*.....18
see *abirtega*.....18
ZYVOX.....9
see *linezolid*.....7

This page intentionally left blank.

SilverScript®
P.O. Box 30006, Pittsburgh, PA 15222-0330

MHBP℠

Participating health care providers are independent contractors and are neither agents nor employees of SilverScript. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

For mail-order, you can get prescription drugs shipped to your home through the network mail-order delivery program. Typically, mail-order drugs arrive within 10 days. If you do not receive your mail-order drugs within this timeframe, you can call 1-833-825-6755 (TTY users should call 711). Hours are 24 hours a day, 7 days a week. Members may have the option to sign-up for automated mail-order delivery. Specialty pharmacies fill high-cost specialty drugs that require special handling. Although specialty pharmacies may deliver covered medicines through the mail, they are not considered "mail-order pharmacies." Therefore, most specialty drugs are not available at the mail-order cost share.

See *Evidence of Coverage* for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area.

This formulary was updated on 10/23/2026. For more recent information or other questions, please contact Customer Care at 1-833-825-6755, 24 hours a day, 7 days a week. TTY users should call 711.

The formulary and/or pharmacy network may change at any time. You will receive notice when necessary.

10/23/2026