



# Retiree RxCare 2026 Premier Plus 4T Formulary (List of Covered Drugs or “Drug List”)

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

Formulary ID No. 26257, Version 10

This formulary was updated for 3/1/2026. We have made no changes to this formulary since 2/20/2026. For more recent information or other questions, please contact Retiree RxCare Customer Care Center at 1-855-693-3921 (TTY users should call 711), 24 hours a day, 7 days a week, or visit <http://retireerxcarepdp.com>.

**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 MG Insurance Company. When it refers to “plan” or “our plan,” it means Retiree RxCare.

This document includes a partial Drug List (formulary) for our plan which is current as of 2/20/2026. For a complete, updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front cover page of this document.

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, 2026, and from time to time during the year.

## **What is the Retiree RxCare Abridged 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 Retiree RxCare 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. Retiree RxCare will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a Retiree RxCare network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

This document is a partial formulary and includes only some of the drugs covered by Retiree RxCare. For a complete listing of all prescription drugs covered by Retiree RxCare, please contact us.

## **Can the formulary change?**

Most changes in drug coverage happen on January 1, but we Retiree RxCare may add or remove drugs on the formulary during the year or add new restrictions. We must follow the Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: <http://retireerxcarepdp.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 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 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 the 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 Retiree RxCare’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 new 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 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. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, we must notify affected members of the

change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30-day supply of the drug and notice of the change.

If we make these other changes, you or your prescriber can ask us to make an exception for you 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 also find information in the section below entitled “How do I request an exception to the Retiree RxCare’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.

The enclosed formulary is current as of 2/20/2026. To get updated information about the drugs covered by Retiree RxCare please contact us. Our contact information appears on the front cover page of this document. If there are any changes to this formulary mid-year, we will send members a notice of change.

## **How do I use the formulary?**

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

### **Medical Condition**

The formulary listing is contained within this document. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular, Hypertension / Lipids. If you know what your drug is used for, look for the category name within the following drug list. Then look under the category name for your drug.

### **Alphabetical Listing**

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 116. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

## **What are generic drugs?**

Retiree RxCare 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 work just as well as and usually 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 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:** Retiree RxCare requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from Retiree RxCare before you fill your prescriptions. If you don't get approval, Retiree RxCare may not cover the drug.
- **Prior Authorization B/D:** This drug requires a Prior Authorization to determine if the drug is covered under Medicare Part B or Medicare Part D. Additional information is required from you or your Physician to make a determination before you may get your prescription filled. If you do not get approval, Retiree RxCare may not cover the medication and you will be responsible for the full cost of the drug, or for submitting the drug to your Medicare health plan.
- **Quantity Limits:** For certain drugs, Retiree RxCare limits the amount of the drug that Retiree RxCare will cover. For example, Retiree RxCare provides 30 per prescription for Zolpidem Tartrate 10mg. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, Retiree RxCare 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, Retiree RxCare may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Retiree RxCare will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary listing contained within this document. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front cover page of this document.

You can ask Retiree RxCare 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 Retiree RxCare’s formulary?” on page 5 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 Member Services and ask if your drug is covered. This document includes only a partial list of covered drugs, so Retiree RxCare may cover your drug. For more information, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front cover page of this document.

If you learn that Retiree RxCare does not cover your drug, you have two options:

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

### **How do I request an exception to the Retiree RxCare’s formulary?**

You can ask Retiree RxCare 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, Retiree RxCare limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, Retiree RxCare will only approve your request for an exception if the alternative drugs included on the plan’s formulary, 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 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 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 90 days of membership in our plan, we will cover a 30-day emergency supply of that drug while you pursue a formulary exception.

**Note:** If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with a 30-day transition supply, consistent with dispensing increment, (unless you have a prescription written for fewer days). 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 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 30-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

For current members, who are in a long-term care facility or going through level of care changes, Retiree RxCare will allow up to a one-month supply of medication.

**Examples of level-of-care changes may include:**

- Discharge from a hospital to a home setting (i.e., assisted living, long-term care (LTC), or private home) accompanied by a list of medications that may not always consider the plan drug list due to the short-term nature of the hospital visit.
- Termination of a Medicare Part A skilled nursing facility stay (where payments include all pharmacy charges)
- Hospice disenrollment
- Leaving a long-term care facility stay and returning to the community.
- Discharge from psychiatric hospitals with drug regimens that are highly individualized

**For more information**

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

If you have questions about Retiree RxCare, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front cover page of this document.

If you have general questions about Medicare 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 <http://www.medicare.gov>

# Retiree RxCare Premier Plus 4T Formulary

The abridged formulary that begins on the following pages provides coverage information on some of the drugs covered by Retiree RxCare. If you have trouble finding your drug in the list, turn to the Index that begins on page 116.

Remember: This is only a partial list of drugs covered by Retiree RxCare. If your prescription is not in this partial formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front cover page of this document. 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., simvastatin).

The information in the Requirements/Limits column tells you if Retiree RxCare has any special requirements for coverage of your drug

## Understanding the requirements/limits

Coverage Tier	Definition
1	Generic
2	Preferred Brand
3	Non-Preferred Drug
4	Specialty

Abbreviation	Program Name	Definition
PA	Prior Authorization	Approval is required before your plan will cover this medication.
PA B/D	Medicare Part B vs. Part D	Coverage may be available under Medicare Part B or Part D.
QL	Quantity Limit	There is a limit to the amount that can be filled per prescription or over a period of time.
ST	Step Therapy	You must try a preferred treatment alternative before coverage is available for this medication.

Drug Name	Drug Tier	Requirements/Limits
<b>Analgesics</b>		
<b>Analgesics</b>		
JOURNAVX TABLET 50MG	3	QL (30 EA per 90 days)
<b>Nonsteroidal Anti-inflammatory Drugs</b>		
CAMBIA PACKET 50MG	3	
CELEBREX CAPSULE 100MG, 200MG, 400MG, 50MG	3	QL (60 EA per 30 days)
<i>celecoxib capsule 100mg, 200mg, 400mg, 50mg</i>	1	QL (60 EA per 30 days)
COMBOGESIC TABLET 325MG; 97.5MG	3	
COXANTO CAPSULE 300MG	4	PA
DICLOFENAC EPOLAMINE PATCH 1.3%	1	QL (60 EA per 30 days) PA
<i>diclofenac potassium capsule 25mg</i>	1	
<i>diclofenac potassium packet 50mg</i>	1	
<i>diclofenac potassium tablet 50mg</i>	1	
<i>diclofenac potassium tablet 25mg</i>	4	
<i>diclofenac sodium dr tablet delayed release 25mg, 50mg, 75mg</i>	1	
<i>diclofenac sodium er tablet extended release 24 hour 100mg</i>	1	
<i>diclofenac sodium gel 1%</i>	1	QL (1000 GM per 30 days)
<i>diclofenac sodium external solution 1.5%</i>	1	PA
<i>diclofenac sodium external solution 2%</i>	4	PA
DICLONA GEL 1%; 4.5%	4	
<i>diflunisal tablet 500mg</i>	1	
DOLOBID TABLET 375MG	4	
DUEXIS TABLET 26.6MG; 800MG	4	QL (90 EA per 30 days) PA
<i>ec-naproxen tablet delayed release 500mg</i>	1	
ELYXYB SOLUTION 120MG/4.8ML	3	QL (144 ML per 30 days) PA
<i>etodolac capsule 200mg, 300mg</i>	1	
<i>etodolac tablet 400mg, 500mg</i>	1	
FLECTOR PATCH 1.3%	3	QL (60 EA per 30 days) PA
<i>flurbiprofen tablet 100mg, 50mg</i>	1	
<i>ibuprofen lysine injection 10mg/ml</i>	4	
<i>ibuprofen/famotidine tablet 26.6mg; 800mg</i>	1	QL (90 EA per 30 days) PA
<i>ibuprofen suspension 100mg/5ml</i>	1	
<i>ibuprofen tablet 300mg, 400mg, 600mg, 800mg</i>	1	
<i>ibu tablet 400mg, 600mg, 800mg</i>	1	
INDOCIN SUPPOSITORY 50MG	4	
INDOCIN SUSPENSION 25MG/5ML	3	
<i>indomethacin er capsule extended release 75mg</i>	1	
<i>indomethacin capsule 25mg, 50mg</i>	1	
<i>indomethacin suppository 50mg</i>	4	
<i>ketoprofen capsule 25mg</i>	1	
<i>ketorolac tromethamine tablet 10mg</i>	1	QL (20 EA per 30 days)
LICART PATCH 24 HOUR 1.3%	3	QL (30 EA per 30 days) PA
LODINE TABLET 400MG	3	
LOFENA TABLET 25MG	4	
LURBIPR TABLET 100MG	2	
<i>meloxicam tablet 15mg, 7.5mg</i>	1	
<i>nabumetone tablet 500mg, 750mg</i>	1	
NAPRELAN TABLET EXTENDED RELEASE 24 HOUR 375MG	3	

Drug Name	Drug Tier	Requirements/Limits
NAPRELAN TABLET EXTENDED RELEASE 24 HOUR 500MG	4	
NAPROSYN SUSPENSION 125MG/5ML	4	PA
<i>naproxen dr tablet delayed release 375mg, 500mg</i>	1	
<i>naproxen sodium cr tablet extended release 24 hour 375mg</i>	1	
<i>naproxen sodium er tablet extended release 24 hour 375mg</i>	1	
<i>naproxen sodium tablet 275mg, 550mg</i>	1	
<i>naproxen/esomeprazole magnesium tablet delayed release 20mg; 375mg, 20mg; 500mg</i>	4	QL (60 EA per 30 days) PA
<i>naproxen suspension 125mg/5ml</i>	1	PA
<i>naproxen tablet delayed release 500mg</i>	1	
<i>naproxen tablet 250mg, 375mg, 500mg</i>	1	
NEOPROFEN INJECTION 10MG/ML	4	
OXAPROZIN CAPSULE 300MG	4	PA
<i>oxaprozin tablet 600mg</i>	1	
PENNSAID SOLUTION 2%	4	PA
<i>piroxicam capsule 10mg, 20mg</i>	1	
RELAFEN DS TABLET 1000MG	4	
SPRIX SOLUTION 15.75MG/SPRAY	4	QL (5 EA per 30 days)
<i>sulindac tablet 150mg, 200mg</i>	1	
TOLECTIN 600 TABLET 600MG	3	ST
<i>tolmetin sodium capsule 400mg</i>	1	
<i>tolmetin sodium tablet 600mg</i>	1	
VIMOVO TABLET DELAYED RELEASE 20MG; 375MG, 20MG; 500MG	4	QL (60 EA per 30 days) PA
VYSCOXA SUSPENSION 10MG/ML	4	QL (946 ML per 23 days) PA
ZIPSOR CAPSULE 25MG	4	
<b>Opioid Analgesics, Long-acting</b>		
BELBUCA FILM 150MCG, 300MCG, 450MCG, 600MCG, 75MCG	3	QL (60 EA per 30 days)
BELBUCA FILM 750MCG, 900MCG	4	QL (60 EA per 30 days)
<i>buprenorphine patch weekly 10mcg/hr, 15mcg/hr, 20mcg/hr, 5mcg/hr, 7.5mcg/hr</i>	1	QL (4 EA per 28 days)
BUTRANS PATCH WEEKLY 10MCG/HR, 15MCG/HR, 20MCG/HR, 5MCG/HR, 7.5MCG/HR	3	QL (4 EA per 28 days)
CONZIP CAPSULE EXTENDED RELEASE 24 HOUR 100MG, 200MG, 300MG	3	PA
<i>fentanyl patch 72 hour 100mcg/hr, 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr</i>	1	
<i>fentanyl patch 72 hour 87.5mcg/hr</i>	4	
<i>hydrocodone bitartrate er capsule extended release 12 hour 10mg, 15mg, 20mg, 30mg, 40mg, 50mg</i>	1	
<i>hydrocodone bitartrate er tablet er 24 hour abuse-deterrent 20mg, 30mg, 40mg, 60mg, 80mg</i>	3	ST
<i>hydrocodone bitartrate er tablet er 24 hour abuse-deterrent 100mg, 120mg</i>	4	ST
<i>hydromorphone hcl er tablet extended release 24 hour 12mg, 16mg, 8mg</i>	1	
<i>hydromorphone hydrochloride er tablet extended release 24 hour 32mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
HYSINGLA ER TABLET ER 24 HOUR ABUSE-DETERRENT 20MG, 30MG, 40MG, 60MG	3	ST
HYSINGLA ER TABLET ER 24 HOUR ABUSE-DETERRENT 100MG, 120MG, 80MG	4	ST
INFUMORPH 200 INJECTION 10MG/ML	3	B/D
INFUMORPH 500 INJECTION 25MG/ML	3	B/D
<i>levorphanol tartrate tablet 2mg, 3mg</i>	4	
<i>methadone hcl injection 10mg/ml</i>	4	
<i>methadone hcl oral solution 5mg/5ml</i>	1	
<i>methadone hcl tablet 10mg, 5mg</i>	1	
<i>methadone hydrochloride intensol concentrate 10mg/ml</i>	1	
<i>methadone hydrochloride concentrate 10mg/ml</i>	1	
<i>methadone hydrochloride solution 10mg/5ml</i>	1	
METHADOSE SUGAR-FREE CONCENTRATE 10MG/ML	1	
METHADOSE CONCENTRATE 10MG/ML	1	
<i>mitigo injection 10mg/ml, 25mg/ml</i>	1	B/D
<i>morphine sulfate er capsule extended release 24 hour 100mg, 10mg, 120mg, 20mg, 30mg, 45mg, 50mg, 60mg, 75mg, 80mg, 90mg</i>	1	
<i>morphine sulfate er tablet extended release 100mg, 15mg, 200mg, 30mg, 60mg</i>	1	
MS CONTIN TABLET EXTENDED RELEASE 15MG, 30MG	3	
MS CONTIN TABLET EXTENDED RELEASE 100MG, 200MG, 60MG	4	
NUCYNTA ER TABLET EXTENDED RELEASE 12 HOUR 100MG, 150MG, 50MG	2	
NUCYNTA ER TABLET EXTENDED RELEASE 12 HOUR 200MG, 250MG	4	
OXYCODONE HCL ER TABLET ER 12 HOUR ABUSE-DETERRENT 40MG	3	ST
OXYCODONE HCL ER TABLET ER 12 HOUR ABUSE-DETERRENT 80MG	4	ST
OXYCODONE HYDROCHLORIDE ER TABLET ER 12 HOUR ABUSE-DETERRENT 10MG, 20MG, 40MG	3	ST
OXYCODONE HYDROCHLORIDE ER TABLET ER 12 HOUR ABUSE-DETERRENT 80MG	4	ST
OXYCONTIN TABLET ER 12 HOUR ABUSE-DETERRENT 10MG, 15MG, 20MG, 30MG, 40MG, 60MG	3	ST
OXYCONTIN TABLET ER 12 HOUR ABUSE-DETERRENT 80MG	4	ST
<i>oxymorphone hydrochloride er tablet extended release 12 hour 10mg, 15mg, 20mg, 30mg, 5mg, 7.5mg</i>	1	
<i>oxymorphone hydrochloride er tablet extended release 12 hour 40mg</i>	1	
TRAMADOL HCL ER CAPSULE EXTENDED RELEASE 24 HOUR 100MG, 200MG, 300MG	3	PA
<i>tramadol hcl er tablet extended release 24 hour 100mg, 200mg, 300mg</i>	1	
<i>tramadol hydrochloride er tablet extended release 24 hour 100mg, 200mg, 300mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
XTAMPZA ER CAPSULE ER 12 HOUR ABUSE-DETERRENT 13.5MG, 18MG, 27MG, 36MG, 9MG	2	
XYVONA TABLET 3MG	4	
<i>xyvona tablet 2mg</i>	4	
<b>Opioid Analgesics, Short-acting</b>		
<i>acetaminophen/caffeine/dihydrocodeine capsule 320.5mg; 30mg; 16mg</i>	1	QL (300 EA per 30 days)
<i>acetaminophen/codeine phosphate tablet 300mg; 60mg</i>	1	
<i>acetaminophen/codeine solution 120mg/5ml; 12mg/5ml</i>	1	
<i>acetaminophen/codeine tablet 300mg; 15mg, 300mg; 30mg</i>	1	
APADAZ TABLET 325MG; 4.08MG, 325MG; 6.12MG, 325MG; 8.16MG	3	
<i>ascomp/codeine capsule 325mg; 50mg; 40mg; 30mg</i>	1	
BENZHYDROCODONE/ACETAMINOPHEN TABLET 325MG; 4.08MG, 325MG; 6.12MG, 325MG; 8.16MG	3	
<i>butalbital/acetaminophen/caffeine/codeine capsule 300mg; 50mg; 40mg; 30mg, 325mg; 50mg; 40mg; 30mg</i>	1	
<i>butalbital/aspirin/caffeine/codeine capsule 325mg; 50mg; 40mg; 30mg</i>	1	
<i>butorphanol tartrate injection 1mg/ml, 2mg/ml</i>	1	
<i>butorphanol tartrate nasal solution 10mg/ml</i>	1	
<i>codeine sulfate tablet 15mg, 30mg, 60mg</i>	1	
DEMEROL INJECTION 100MG/ML, 25MG/ML, 50MG/ML, 75MG/ML	3	PA
DILAUDID INJECTION 0.2MG/ML, 1MG/ML, 2MG/ML	3	
DILAUDID LIQUID 1MG/ML	3	
DILAUDID TABLET 2MG, 4MG, 8MG	3	
DURAMORPH INJECTION 0.5MG/ML, 1MG/ML	1	
<i>endocet tablet 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg</i>	1	
<i>fentanyl citrate oral transmucosal lozenge on a handle 200mcg</i>	1	PA
<i>fentanyl citrate oral transmucosal lozenge on a handle 1200mcg, 1600mcg, 400mcg, 600mcg, 800mcg</i>	4	PA
<i>fentanyl citrate injection 1000mcg/20ml, 100mcg/2ml, 2500mcg/50ml, 250mcg/5ml, 25mcg/0.5ml, 500mcg/10ml, 50mcg/ml</i>	1	B/D
FENTANYL CITRATE TABLET 100MCG, 200MCG	4	PA
FENTORA TABLET 100MCG, 200MCG, 400MCG, 600MCG, 800MCG	4	PA
FIORICET/CODEINE CAPSULE 300MG; 50MG; 40MG; 30MG	3	
<i>hydrocodone bitartrate/acetaminophen solution 300mg/15ml; 10mg/15ml, 325mg/15ml; 10mg/15ml, 325mg/15ml; 7.5mg/15ml</i>	1	
<i>hydrocodone bitartrate/acetaminophen tablet 300mg; 10mg, 300mg; 5mg, 300mg; 7.5mg, 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg</i>	1	
<i>hydrocodone/acetaminophen tablet 325mg; 7.5mg</i>	1	
<i>hydrocodone/ibuprofen tablet 10mg; 200mg, 5mg; 200mg, 7.5mg; 200mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl injection 10mg/ml, 1mg/ml, 4mg/ml</i>	1	
<i>hydromorphone hcl liquid 1mg/ml</i>	1	
<i>hydromorphone hcl suppository 3mg</i>	1	
<i>hydromorphone hcl tablet 2mg, 4mg, 8mg</i>	1	
HYDROMORPHONE HYDROCHLORIDE INJECTION 0.2MG/ML	1	
<i>hydromorphone hydrochloride injection 0.2mg/ml, 1mg/ml, 2mg/ml, 4mg/ml, 50mg/5ml</i>	1	
<i>meperidine hcl injection 100mg/ml, 25mg/ml, 50mg/ml</i>	1	PA
<i>meperidine hcl oral solution 50mg/5ml</i>	1	
<i>meperidine hydrochloride tablet 50mg</i>	1	
<i>morphine sulfate/sodium chloride injection 1mg/ml</i>	1	
MORPHINE SULFATE INJECTION 1MG/ML	1	B/D
<i>morphine sulfate injection 10mg/ml, 4mg/ml, 5mg/ml, 8mg/ml</i>	1	B/D
<i>morphine sulfate injection 0.5mg/ml, 10mg/ml, 1mg/ml, 2mg/ml, 4mg/ml, 50mg/ml, 8mg/ml</i>	1	
<i>morphine sulfate oral solution 100mg/5ml, 10mg/5ml, 20mg/5ml</i>	1	
<i>morphine sulfate suppository 10mg, 20mg, 30mg, 5mg</i>	1	
<i>morphine sulfate tablet 15mg, 30mg</i>	1	
<i>nalbuphine hydrochloride injection 10mg/ml, 20mg/ml</i>	1	
NALOCET TABLET 300MG; 2.5MG	4	
NUCYNTA TABLET 50MG, 75MG	3	
NUCYNTA TABLET 100MG	4	
OXAYDO TABLET 5MG, 7.5MG	4	
OXYCODONE AND ACETAMINOPHEN TABLET 300MG; 7.5MG	4	
<i>oxycodone hcl capsule 5mg</i>	1	
OXYCODONE HYDROCHLORIDE/ACETAMINOPHEN SOLUTION 325MG/5ML; 5MG/5ML	1	
OXYCODONE HYDROCHLORIDE/ACETAMINOPHEN SOLUTION 300MG/5ML; 10MG/5ML	4	
<i>oxycodone hydrochloride capsule 5mg</i>	1	
<i>oxycodone hydrochloride concentrate 100mg/5ml</i>	1	
<i>oxycodone hydrochloride solution 5mg/5ml</i>	1	
OXYCODONE HYDROCHLORIDE TABLET ABUSE- DETERRENT 10MG, 15MG, 30MG, 5MG	3	
<i>oxycodone hydrochloride tablet 10mg, 15mg, 20mg, 30mg, 5mg</i>	1	
OXYCODONE/ACETAMINOPHEN TABLET 300MG; 10MG, 300MG; 2.5MG, 300MG; 5MG	4	
<i>oxycodone/acetaminophen tablet 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg</i>	1	
<i>oxymorphone hydrochloride tablet 10mg, 5mg</i>	1	
<i>pentazocine/naloxone hcl tablet 0.5mg; 50mg</i>	1	
PERCOCET TABLET 325MG; 2.5MG	3	
PERCOCET TABLET 325MG; 10MG, 325MG; 5MG, 325MG; 7.5MG	4	
PROLATE SOLUTION 300MG/5ML; 10MG/5ML	4	
PROLATE TABLET 300MG; 10MG, 300MG; 5MG, 300MG; 7.5MG	4	

Drug Name	Drug Tier	Requirements/Limits
QDOLO SOLUTION 5MG/ML	4	
ROXICODONE TABLET 15MG	3	
ROXICODONE TABLET 30MG	4	
SEGLENTIS TABLET 56MG; 44MG	3	QL (120 EA per 30 days) ST
<i>tramadol hydrochloride/acetaminophen tablet 325mg; 37.5mg</i>	1	
TRAMADOL HYDROCHLORIDE SOLUTION 5MG/ML	3	
<i>tramadol hydrochloride tablet 100mg, 25mg, 50mg, 75mg</i>	1	
TREZIX CAPSULE 320.5MG; 30MG; 16MG	3	QL (300 EA per 30 days)
<b>Anesthetics</b>		
<b>Local Anesthetics</b>		
DERMACINRX LIDOCAINE GEL 5%	3	PA
<i>glydo prefilled syringe 2%</i>	1	QL (30 ML per 30 days) PA
<i>lidocaine hcl jelly prefilled syringe 2%</i>	1	QL (30 ML per 30 days) PA
<i>lidocaine hcl prefilled syringe 2%</i>	1	QL (30 ML per 30 days) PA
<i>lidocaine hydrochloride jelly gel 2%</i>	1	QL (30 ML per 30 days) PA
<i>lidocaine hydrochloride solution 4%</i>	1	QL (250 ML per 30 days) PA
<i>lidocaine/prilocaine cream 2.5%; 2.5%</i>	1	QL (30 GM per 30 days) PA
<i>lidocaine ointment 5%</i>	1	QL (150 GM per 30 days) PA
<i>lidocaine patch 5%</i>	1	PA
LIDOCAN PATCH 5%	3	PA
LIDODERM PATCH 5%	3	PA
LIDOTRAL GEL 5%	3	PA
LIDOTRAL SOLUTION 5%	3	PA
LYDEXA CREAM 4.12%	4	
PLIAGLIS CREAM 7%; 7%	3	QL (30 GM per 30 days) PA
<i>premium lidocaine ointment 5%</i>	1	QL (150 GM per 30 days) PA
QUTENZA KIT 0; 8%; 0	4	QL (4 EA per 90 days) PA
TRIDACAINE III PATCH 5%	3	PA
TRIDACAINE II PATCH 5%	3	PA
TRIDACAINE PATCH 5%	3	PA
ZTLIDO PATCH 1.8%	3	QL (90 EA per 30 days) PA
<b>Anti-Addiction/Substance Abuse Treatment Agents</b>		
<b>Alcohol Deterrents/Anti-craving</b>		
<i>acamprosate calcium dr tablet delayed release 333mg</i>	1	
<i>disulfiram tablet 250mg, 500mg</i>	1	
<i>naltrexone hydrochloride tablet 50mg</i>	1	
VIVITROL INJECTION 380MG	4	
<b>Opioid Dependence</b>		
BRIXADI INJECTION 128MG/0.36ML, 16MG/0.32ML, 24MG/0.48ML, 32MG/0.64ML, 64MG/0.18ML, 8MG/0.16ML, 96MG/0.27ML	4	
BUPRENEX INJECTION 0.3MG/ML	4	
<i>buprenorphine hcl/naloxone hcl tablet sublingual 2mg; 0.5mg, 8mg; 2mg</i>	1	
<i>buprenorphine hcl tablet sublingual 2mg, 8mg</i>	1	
<i>buprenorphine hydrochloride/naloxone hydrochloride film 12mg; 3mg, 2mg; 0.5mg, 4mg; 1mg, 8mg; 2mg</i>	1	
<i>lofexidine hydrochloride tablet 0.18mg</i>	4	QL (224 EA per 14 days)
LUCEMYRA TABLET 0.18MG	4	QL (224 EA per 14 days)
SUBLOCADE INJECTION 100MG/0.5ML, 300MG/1.5ML	4	

Drug Name	Drug Tier	Requirements/Limits
SUBOXONE FILM 12MG; 3MG, 2MG; 0.5MG, 4MG; 1MG, 8MG; 2MG	2	
ZUBSOLV TABLET SUBLINGUAL 0.7MG; 0.18MG, 1.4MG; 0.36MG, 11.4MG; 2.9MG, 2.9MG; 0.71MG, 5.7MG; 1.4MG, 8.6MG; 2.1MG	3	
<b>Opioid Reversal Agents</b>		
KLOXXADO LIQUID 8MG/0.1ML	3	
<i>naloxone hcl injection 4mg/10ml</i>	1	
<i>naloxone hydrochloride injection 0.4mg/ml, 2mg/2ml, 4mg/10ml</i>	1	
<i>naloxone hydrochloride liquid 4mg/0.1ml</i>	1	
OPVEE SOLUTION 2.7MG/0.1ML	3	
ZIMHI INJECTION 5MG/0.5ML	3	ST
ZURNAI INJECTION 1.5MG/0.5ML	3	ST
<b>Smoking Cessation Agents</b>		
<i>bupropion hydrochloride er (sr) tablet extended release 12 hour 150mg</i>	1	QL (60 EA per 30 days)
CHANTIX CONTINUING MONTH PAK TABLET 1MG	3	QL (504 EA per 365 days)
CHANTIX STARTING MONTH PAK TABLET THERAPY PACK 0	3	QL (504 EA per 365 days)
CHANTIX TABLET 0.5MG, 1MG	3	QL (504 EA per 365 days)
NICOTROL INHALER INHALER 10MG	3	QL (2688 EA per 365 days)
NICOTROL NS SOLUTION 10MG/ML	2	QL (360 ML per 365 days)
TYRVAYA SOLUTION 0.03MG/ACT	3	QL (8.4 ML per 30 days)
<i>varenicline starting month tablet therapy pack 0</i>	1	QL (504 EA per 365 days)
<i>varenicline tartrate tablet 0.5mg, 1mg</i>	1	QL (504 EA per 365 days)
<b>Antibacterials</b>		
<b>Aminoglycosides</b>		
<i>amikacin sulfate injection 1gm/4ml, 500mg/2ml</i>	1	
ARIKAYCE SUSPENSION 590MG/8.4ML	4	PA
<i>gentamicin sulfate pediatric injection 10mg/ml</i>	1	
<i>gentamicin sulfate cream 0.1%</i>	1	
<i>gentamicin sulfate injection 40mg/ml</i>	1	
<i>gentamicin sulfate ointment 0.1%</i>	1	
HUMATIN CAPSULE 250MG	4	
<i>neomycin sulfate tablet 500mg</i>	1	
<i>streptomycin sulfate injection 1gm</i>	4	
<i>tobramycin sulfate injection 1.2gm/30ml, 1.2gm, 10mg/ml, 40mg/ml, 80mg/2ml</i>	1	
ZEMDRI INJECTION 500MG/10ML	4	
<b>Antibacterials, Other</b>		
AEMCOLO TABLET DELAYED RELEASE 194MG	3	PA
<i>aztreonam injection 1gm, 2gm</i>	1	
BLUJEP A TABLET 750MG	4	PA
<i>clindacin etz pledgets swab 1%</i>	1	
<i>clindamycin hcl capsule 300mg</i>	1	
<i>clindamycin hydrochloride capsule 150mg, 300mg, 75mg</i>	1	
<i>clindamycin palmitate hydrochloride solution reconstituted 75mg/5ml</i>	1	
<i>clindamycin phosphate cream 2%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate injection 300mg/2ml, 600mg/4ml, 900mg/6ml</i>	1	
<i>clindamycin phosphate swab 1%</i>	1	
<i>colistimethate sodium injection 150mg</i>	1	
COLY-MYCIN M INJECTION 150MG	4	
CUBICIN RF INJECTION 500MG	4	
<i>dalbavancin hydrochloride injection 500mg</i>	4	
DALVANCE INJECTION 500MG	4	
DAPTOMYCIN/SODIUM CHLORIDE INJECTION 1000MG/100ML; 0.9%, 350MG/50ML; 0.9%, 500MG/50ML; 0.9%, 700MG/100ML; 0.9%	3	
<i>daptomycin injection 350mg, 500mg</i>	1	
EMBLAVEO INJECTION 0.5GM; 1.5GM	4	
<i>fosfomycin tromethamine packet 3gm</i>	1	
IMPAVIDO CAPSULE 50MG	4	
KIMYRSA INJECTION 1200MG	4	
LIKMEZ SUSPENSION 500MG/5ML	3	PA
<i>lincomycin hydrochloride injection 300mg/ml</i>	1	
<i>linezolid injection 600mg/300ml</i>	1	
<i>linezolid injection 600mg/300ml; 0.9%</i>	4	
<i>linezolid suspension reconstituted 100mg/5ml</i>	4	QL (1800 ML per 28 days)
<i>linezolid tablet 600mg</i>	1	QL (56 EA per 28 days)
<i>methenamine hippurate tablet 1gm</i>	1	
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>metronidazole injection 500mg/100ml</i>	1	
<i>metronidazole tablet 125mg, 250mg, 500mg</i>	1	
<i>nitrofurantoin macrocrystals capsule 100mg, 25mg, 50mg</i>	1	
<i>nitrofurantoin monohydrate/macrocrystals capsule 100mg</i>	1	
<i>nitrofurantoin monohydrate capsule 100mg</i>	1	
NITROFURANTOIN SUSPENSION 50MG/5ML	4	
<i>nitrofurantoin suspension 25mg/5ml</i>	4	
ORBACTIV INJECTION 400MG	4	
ORLYNVAH TABLET 500MG; 500MG	4	PA
SIVEXTRO INJECTION 200MG	4	QL (6 EA per 30 days)
SIVEXTRO TABLET 200MG	4	QL (6 EA per 30 days)
<i>tigecycline injection 50mg</i>	1	
<i>tinidazole tablet 250mg, 500mg</i>	1	
<i>trimethoprim tablet 100mg</i>	1	
TYGACIL INJECTION 50MG	4	
VANCOCIN CAPSULE 125MG	4	QL (120 EA per 30 days)
VANCOCIN CAPSULE 250MG	4	QL (240 EA per 30 days)
<i>vancomycin hcl injection 10gm</i>	1	
<i>vancomycin hydrochloride capsule 125mg</i>	1	QL (120 EA per 30 days)
<i>vancomycin hydrochloride capsule 250mg</i>	1	QL (240 EA per 30 days)
<i>vancomycin hydrochloride injection 1.75gm, 1gm, 2gm, 500mg, 750mg</i>	1	
<i>vancomycin hydrochloride oral solution reconstituted 250mg/5ml, 25mg/ml</i>	1	
VIBATIV INJECTION 750MG	4	
VOQUEZNA DUAL PAK THERAPY PACK 500MG; 20MG	3	PA

Drug Name	Drug Tier	Requirements/Limits
VOQUEZNA TRIPLE PAK THERAPY PACK 500MG; 500MG; 3 20MG	3	PA
XACDURO INJECTION 1GM; 1GM	4	
ZYVOX INJECTION 200MG/100ML	4	
ZYVOX SUSPENSION RECONSTITUTED 100MG/5ML	3	QL (1800 ML per 28 days)
ZYVOX TABLET 600MG	4	QL (56 EA per 28 days)
<b>Beta-lactam, Cephalosporins</b>		
AVYCAZ INJECTION 0.5GM; 2GM	4	
<i>cefaclor capsule 250mg, 500mg</i>	1	
<i>cefaclor suspension reconstituted 250mg/5ml</i>	3	
<i>cefadroxil capsule 500mg</i>	1	
<i>cefadroxil suspension reconstituted 250mg/5ml, 500mg/5ml</i>	1	
<i>cefazolin sodium/dextrose injection 3gm; 2%</i>	1	
<i>cefazolin sodium injection 10gm, 1gm, 500mg</i>	1	
<i>cefazolin injection 2gm, 3gm</i>	1	
<i>cefdinir capsule 300mg</i>	1	
<i>cefdinir suspension reconstituted 125mg/5ml, 250mg/5ml</i>	1	
<i>cefepime hydrochloride injection 100gm, 2gm</i>	1	
<i>cefepime/dextrose injection 2gm/50ml; 5%</i>	1	
<i>cefepime injection 1gm/50ml, 1gm, 2gm/100ml, 2gm</i>	1	
<i>cefixime capsule 400mg</i>	1	
CEFOTAXIME SODIUM INJECTION 1GM, 2GM	1	
<i>cefotetan injection 1gm, 2gm</i>	1	
<i>cefoxitin sodium injection 10gm, 1gm, 2gm</i>	1	
<i>cefpodoxime proxetil suspension reconstituted 100mg/5ml, 50mg/5ml</i>	1	
<i>cefpodoxime proxetil tablet 100mg, 200mg</i>	1	
<i>cefprozil suspension reconstituted 125mg/5ml, 250mg/5ml</i>	1	
<i>cefprozil tablet 250mg, 500mg</i>	1	
<i>ceftaroline fosamil injection 400mg, 600mg</i>	4	
<i>ceftazidime injection 1gm, 2gm, 6gm</i>	1	
<i>ceftriaxone sodium injection 10gm, 1gm, 250mg, 2gm, 500mg</i>	1	
<i>cefuroxime axetil tablet 250mg, 500mg</i>	1	
<i>cefuroxime sodium injection 1.5gm, 750mg</i>	1	
<i>cephalexin capsule 250mg, 500mg, 750mg</i>	1	
<i>cephalexin suspension reconstituted 125mg/5ml, 250mg/5ml</i>	1	
FETROJA INJECTION 1GM	4	
<i>tazicef injection 1gm, 2gm, 6gm</i>	1	
TEFLARO INJECTION 400MG, 600MG	4	
ZERBAXA INJECTION 1GM; 0.5GM	4	
ZEVTERA INJECTION 500MG	4	
<b>Beta-lactam, Penicillins</b>		
<i>amoxicillin/clavulanate potassium er tablet extended release 12 hour 1000mg; 62.5mg</i>	1	
<i>amoxicillin/clavulanate potassium suspension reconstituted 200mg/5ml; 28.5mg/5ml, 250mg/5ml; 62.5mg/5ml, 400mg/5ml; 57mg/5ml, 600mg/5ml; 42.9mg/5ml</i>	1	
<i>amoxicillin/clavulanate potassium tablet chewable 200mg; 28.5mg, 400mg; 57mg</i>	1	
<i>amoxicillin/clavulanate potassium tablet 250mg; 125mg, 500mg; 125mg, 875mg; 125mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin capsule 250mg, 500mg</i>	1	
<i>amoxicillin suspension reconstituted 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml</i>	1	
<i>amoxicillin tablet chewable 125mg, 250mg</i>	1	
<i>amoxicillin tablet 500mg, 875mg</i>	1	
<i>ampicillin sodium injection 10gm, 125mg, 1gm, 2gm, 500mg</i>	1	
<i>ampicillin-sulbactam injection 10gm; 5gm, 1gm; 0.5gm, 2gm; 1gm</i>	1	
<i>ampicillin/sulbactam injection 2gm; 1gm</i>	1	
<i>ampicillin capsule 500mg</i>	1	
AUGMENTIN SUSPENSION RECONSTITUTED 125MG/5ML; 31.25MG/5ML	3	
AUGMENTIN TABLET 500MG; 125MG	3	
BICILLIN L-A INJECTION 1200000UNIT/2ML, 2400000UNIT/4ML, 600000UNIT/ML	3	
<i>dicloxacillin sodium capsule 250mg, 500mg</i>	1	
<i>nafcillin sodium injection 10gm, 1gm, 2gm</i>	1	
NAFCILLIN INJECTION 5%; 1GM/50ML, 5%; 2GM/100ML	4	
OXACILLIN SODIUM INJECTION 300MG/50ML; 2GM/50ML	3	
<i>oxacillin sodium injection 10gm, 1gm, 2gm</i>	1	
<i>penicillin g sodium injection 5000000unit</i>	4	
<i>penicillin v potassium solution reconstituted 125mg/5ml, 250mg/5ml</i>	1	
<i>penicillin v potassium tablet 250mg, 500mg</i>	1	
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM/NACL INJECTION 2GM/50ML; 0.45%; 0.25GM/50ML, 4GM/100ML; 0.45%; 0.5GM/100ML	3	
<i>piperacillin sodium/tazobactam sodium/nacl injection 3gm/50ml; 0.3%; 0.375gm/50ml</i>	3	
<i>piperacillin sodium/tazobactam sodium injection 12gm; 1.5gm, 2gm; 0.25gm, 36gm; 4.5gm, 3gm; 0.375gm, 4gm; 0.5gm</i>	1	
PIVYA TABLET 185MG	3	PA
<b>Carbapenems</b>		
<i>ertapenem sodium injection 1gm</i>	1	
<i>imipenem/cilastatin injection 250mg; 250mg, 500mg; 500mg</i>	1	
MEROPENEM/SODIUM CHLORIDE INJECTION 1GM/50ML; 0.9%, 500MG; 0.9%	3	
<i>meropenem injection 1gm, 2gm, 500mg</i>	1	
RECARBRIO INJECTION 500MG; 500MG; 250MG	4	
VABOMERE INJECTION 1GM; 1GM	3	
<b>Macrolides</b>		
<i>azithromycin injection 500mg</i>	1	
<i>azithromycin packet 1gm</i>	1	
<i>azithromycin suspension reconstituted 100mg/5ml, 200mg/5ml</i>	1	
<i>azithromycin tablet 250mg, 500mg, 600mg</i>	1	
<i>clarithromycin er tablet extended release 24 hour 500mg</i>	1	
<i>clarithromycin suspension reconstituted 125mg/5ml, 250mg/5ml</i>	1	
<i>clarithromycin tablet 250mg, 500mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
DIFICID SUSPENSION RECONSTITUTED 40MG/ML	4	
DIFICID TABLET 200MG	4	
ERYPED 400 SUSPENSION RECONSTITUTED 400MG/5ML	4	
<i>erythromycin dr tablet delayed release 250mg, 333mg, 500mg</i>	1	
<i>erythromycin ethylsuccinate suspension reconstituted 200mg/5ml, 400mg/5ml</i>	1	
<i>fidaxomicin tablet 200mg</i>	4	
<b>Quinolones</b>		
BAXDELA INJECTION 300MG	4	
BAXDELA TABLET 450MG	4	
<i>ciprofloxacin hcl tablet 750mg</i>	1	
<i>ciprofloxacin hydrochloride tablet 250mg, 500mg</i>	1	
<i>ciprofloxacin i.v.-in d5w injection 200mg/100ml; 5%, 400mg/200ml; 5%</i>	1	
<i>levofloxacin in d5w injection 5%; 250mg/50ml, 5%; 500mg/100ml, 5%; 750mg/150ml</i>	1	
<i>levofloxacin injection 25mg/ml</i>	1	
<i>levofloxacin oral solution 25mg/ml</i>	1	
<i>levofloxacin tablet 250mg, 500mg, 750mg</i>	1	
<i>moxifloxacin hydrochloride/sodium hydrochloride injection 400mg/250ml; 0.8%</i>	1	
<i>moxifloxacin hydrochloride tablet 400mg</i>	1	
<i>ofloxacin tablet 300mg, 400mg</i>	1	
<b>Sulfonamides</b>		
<i>sulfadiazine tablet 500mg</i>	4	
<i>sulfamethoxazole/trimethoprim ds tablet 800mg; 160mg</i>	1	
<i>sulfamethoxazole/trimethoprim suspension 200mg/5ml; 40mg/5ml</i>	1	
<i>sulfamethoxazole/trimethoprim tablet 400mg; 80mg</i>	1	
<i>sulfatrim pediatric suspension 200mg/5ml; 40mg/5ml</i>	1	
<b>Tetracyclines</b>		
<i>demeclocycline hcl tablet 150mg, 300mg</i>	1	
DORYX MPC TABLET DELAYED RELEASE 60MG	4	
<i>doxy 100 injection 100mg</i>	1	
<i>doxycycline hyclate capsule 100mg, 50mg</i>	1	
<i>doxycycline hyclate injection 100mg</i>	1	
<i>doxycycline hyclate tablet 100mg, 150mg, 75mg</i>	1	
<i>doxycycline monohydrate capsule 100mg, 50mg, 75mg</i>	1	
<i>doxycycline monohydrate tablet 100mg, 150mg, 50mg, 75mg</i>	1	
<i>doxycycline suspension reconstituted 25mg/5ml</i>	1	
MINOCIN INJECTION 100MG	4	
<i>minocycline hcl capsule 75mg</i>	1	
<i>minocycline hydrochloride capsule 100mg, 50mg</i>	1	
NUZYRA INJECTION 100MG	4	
NUZYRA TABLET 150MG	4	QL (30 EA per 14 days)
SEYSARA TABLET 100MG, 150MG, 60MG	4	
<i>tetracycline hydrochloride capsule 250mg, 500mg</i>	1	
XERAVA INJECTION 100MG, 50MG	4	
<b>Anticonvulsants</b>		
<b>Anticonvulsants, Other</b>		

Drug Name	Drug Tier	Requirements/Limits
BRIVIACT INJECTION 50MG/5ML	4	PA
BRIVIACT ORAL SOLUTION 10MG/ML	4	PA
BRIVIACT TABLET 100MG, 10MG, 25MG, 50MG, 75MG	4	PA
ELEPSIA XR TABLET EXTENDED RELEASE 24 HOUR 1000MG, 1500MG	4	
EPIDIOLEX SOLUTION 100MG/ML	4	PA
EPRONTIA SOLUTION 25MG/ML	3	
<i>felbamate suspension 600mg/5ml</i>	1	
<i>felbamate tablet 400mg, 600mg</i>	1	
FELBATOL TABLET 400MG, 600MG	4	
FINTEPLA SOLUTION 2.2MG/ML	4	PA
FYCOMPA SUSPENSION 0.5MG/ML	4	
FYCOMPA TABLET 2MG	3	
FYCOMPA TABLET 10MG, 12MG, 4MG, 6MG, 8MG	4	
KEPPRA XR TABLET EXTENDED RELEASE 24 HOUR 500MG	3	
KEPPRA XR TABLET EXTENDED RELEASE 24 HOUR 750MG	4	
KEPPRA INJECTION 500MG/5ML	4	
KEPPRA ORAL SOLUTION 100MG/ML	4	
KEPPRA TABLET 500MG	3	
KEPPRA TABLET 1000MG, 750MG	4	
LAMICTAL CHEWABLE DISPERSIBLE TABLET CHEWABLE 5MG	3	
LAMICTAL CHEWABLE DISPERSIBLE TABLET CHEWABLE 25MG	4	
LAMICTAL ODT KIT 0	4	
LAMICTAL ODT TABLET DISINTEGRATING 100MG, 200MG, 25MG, 50MG	3	
LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT 0	4	
LAMICTAL XR TABLET EXTENDED RELEASE 24 HOUR 100MG, 200MG, 250MG, 300MG, 50MG	4	
LAMICTAL TABLET 100MG, 150MG, 200MG, 25MG	4	
<i>lamotrigine er tablet extended release 24 hour 100mg, 200mg, 250mg, 25mg, 300mg, 50mg</i>	1	
<i>lamotrigine odt tablet disintegrating 100mg, 200mg, 25mg, 50mg</i>	1	
<i>lamotrigine starter kit/blue kit 25mg</i>	1	
<i>lamotrigine starter kit/green kit 0</i>	1	
<i>lamotrigine starter kit/orange kit 0</i>	1	
<i>lamotrigine titration kit 0</i>	1	
<i>lamotrigine tablet chewable 25mg, 5mg</i>	1	
<i>lamotrigine tablet 100mg, 150mg, 200mg, 25mg</i>	1	
<i>levetiracetam er tablet extended release 24 hour 500mg, 750mg</i>	1	
<i>levetiracetam/sodium chloride injection 1000mg/100ml; 750mg/100ml, 1500mg/100ml; 540mg/100ml, 500mg/100ml; 820mg/100ml</i>	1	
<i>levetiracetam injection 500mg/5ml</i>	1	
<i>levetiracetam oral solution 100mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
LEVETIRACETAM TABLET DISINTEGRATING SOLUBLE 250MG	3	
<i>levetiracetam tablet disintegrating soluble 500mg</i>	3	
<i>levetiracetam tablet 1000mg, 250mg, 500mg, 750mg</i>	1	
<i>midazolam hydrochloride injection 10mg/0.7ml</i>	1	
NAYZILAM SOLUTION 5MG/0.1ML	3	QL (10 EA per 30 days)
<i>perampanel suspension 0.5mg/ml</i>	4	
<i>perampanel tablet 2mg</i>	3	
<i>perampanel tablet 10mg, 12mg, 4mg, 6mg, 8mg</i>	4	
QUDEXY XR CAPSULE ER 24 HOUR SPRINKLE 200MG	3	
QUDEXY XR CAPSULE ER 24 HOUR SPRINKLE 150MG	4	
<i>roweepra tablet 500mg</i>	1	
SPRITAM TABLET DISINTEGRATING SOLUBLE 1000MG, 250MG, 500MG, 750MG	3	
<i>subvenite starter kit/blue kit 25mg</i>	1	
<i>subvenite starter kit/green kit 0</i>	1	
<i>subvenite starter kit/orange kit 0</i>	1	
SUBVENITE SUSPENSION 10MG/ML	3	
<i>subvenite tablet 100mg, 150mg, 200mg, 25mg</i>	1	
TOPAMAX SPRINKLE CAPSULE SPRINKLE 25MG	3	
TOPAMAX TABLET 50MG	3	
TOPAMAX TABLET 100MG, 200MG	4	
<i>topiramate er capsule er 24 hour sprinkle 100mg, 150mg, 200mg, 25mg, 50mg</i>	1	
<i>topiramate er capsule extended release 24 hour 100mg, 25mg, 50mg</i>	1	
<i>topiramate er capsule extended release 24 hour 200mg</i>	4	
<i>topiramate capsule sprinkle 15mg, 25mg, 50mg</i>	1	
<i>topiramate solution 25mg/ml</i>	1	
<i>topiramate tablet 100mg, 200mg, 25mg, 50mg</i>	1	
TROKENDI XR CAPSULE EXTENDED RELEASE 24 HOUR 100MG	3	
TROKENDI XR CAPSULE EXTENDED RELEASE 24 HOUR 200MG	4	
<i>valproic acid capsule 250mg</i>	1	
<i>valproic acid solution 250mg/5ml</i>	1	
<b>Calcium Channel Modifying Agents</b>		
CELONTIN CAPSULE 300MG	3	
<i>ethosuximide capsule 250mg</i>	1	
<i>ethosuximide solution 250mg/5ml</i>	1	
<i>methsuximide capsule 300mg</i>	1	
<b>Gamma-aminobutyric Acid (GABA) Modulating Agents</b>		
<i>clobazam suspension 2.5mg/ml</i>	1	
<i>clobazam tablet 10mg, 20mg</i>	1	
<i>clonazepam odt tablet disintegrating 2mg</i>	1	QL (300 EA per 30 days)
<i>clonazepam odt tablet disintegrating 0.125mg, 0.25mg, 0.5mg, 1mg</i>	1	QL (90 EA per 30 days)
<i>clonazepam tablet 2mg</i>	1	QL (300 EA per 30 days)
<i>clonazepam tablet 0.5mg, 1mg</i>	1	QL (90 EA per 30 days)
DIACOMIT CAPSULE 250MG, 500MG	4	PA
DIACOMIT PACKET 250MG, 500MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>diazepam gel 10mg, 2.5mg, 20mg</i>	1	
<i>divalproex sodium dr capsule delayed release sprinkle 125mg</i>	1	
<i>divalproex sodium dr tablet delayed release 125mg, 250mg, 500mg</i>	1	
<i>divalproex sodium er tablet extended release 24 hour 250mg, 500mg</i>	1	
<i>gabapentin capsule 400mg</i>	1	QL (270 EA per 30 days)
<i>gabapentin capsule 100mg, 300mg</i>	1	QL (360 EA per 30 days)
<i>gabapentin solution 250mg/5ml</i>	1	QL (2160 ML per 30 days)
<i>gabapentin tablet 800mg</i>	1	QL (150 EA per 30 days)
<i>gabapentin tablet 600mg</i>	1	QL (180 EA per 30 days)
GABARONE TABLET 400MG	4	QL (270 EA per 30 days) ST
GABARONE TABLET 100MG	4	QL (540 EA per 30 days) ST
KLONOPIN TABLET 2MG	3	QL (300 EA per 30 days)
KLONOPIN TABLET 0.5MG, 1MG	3	QL (90 EA per 30 days)
LIBERVANT FILM 10MG, 12.5MG, 15MG, 5MG, 7.5MG	3	QL (10 EA per 30 days)
LYRICA CAPSULE 300MG	3	QL (60 EA per 30 days)
LYRICA CAPSULE 100MG, 150MG, 200MG, 225MG, 25MG, 50MG, 75MG	3	QL (90 EA per 30 days)
LYRICA SOLUTION 20MG/ML	3	QL (900 ML per 30 days)
MYSOLINE TABLET 250MG, 50MG	4	
NEURONTIN CAPSULE 400MG	3	QL (270 EA per 30 days)
NEURONTIN CAPSULE 100MG, 300MG	3	QL (360 EA per 30 days)
NEURONTIN SOLUTION 250MG/5ML	3	QL (2160 ML per 30 days)
NEURONTIN TABLET 800MG	4	QL (150 EA per 30 days)
NEURONTIN TABLET 600MG	4	QL (180 EA per 30 days)
ONFI SUSPENSION 2.5MG/ML	4	
ONFI TABLET 10MG, 20MG	4	
<i>phenobarbital sodium injection 130mg/ml, 65mg/ml</i>	1	
<i>phenobarbital elixir 20mg/5ml</i>	1	
<i>phenobarbital tablet 100mg, 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg</i>	1	
<i>pregabalin capsule 300mg</i>	1	QL (60 EA per 30 days)
<i>pregabalin capsule 100mg, 150mg, 200mg, 225mg, 25mg, 50mg, 75mg</i>	1	QL (90 EA per 30 days)
<i>pregabalin solution 20mg/ml</i>	1	QL (900 ML per 30 days)
<i>primidone tablet 125mg, 250mg, 50mg</i>	1	
SABRIL PACKET 500MG	4	PA
SABRIL TABLET 500MG	4	PA
SYMPAZAN FILM 10MG, 5MG	3	
SYMPAZAN FILM 20MG	4	
<i>tiagabine hydrochloride tablet 12mg, 16mg, 2mg, 4mg</i>	1	
VALTOCO 10 MG DOSE LIQUID 10MG/0.1ML	4	QL (10 EA per 30 days)
VALTOCO 15 MG DOSE LIQUID THERAPY PACK 7.5MG/0.1ML	4	QL (10 EA per 30 days)
VALTOCO 20 MG DOSE LIQUID THERAPY PACK 10MG/0.1ML	4	QL (10 EA per 30 days)
VALTOCO 5 MG DOSE LIQUID 5MG/0.1ML	4	QL (10 EA per 30 days)
<i>vigabatrin packet 500mg</i>	4	PA
<i>vigabatrin tablet 500mg</i>	4	PA
VIGADRONE PACKET 500MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
VIGADRONE TABLET 500MG	4	PA
VIGAFYDE SOLUTION 100MG/ML	4	PA
<i>vigpoder packet 500mg</i>	4	PA
ZTALMY SUSPENSION 50MG/ML	4	PA
<b>Sodium Channel Agents</b>		
APTIOM TABLET 200MG, 400MG, 600MG, 800MG	4	
BANZEL SUSPENSION 40MG/ML	4	
BANZEL TABLET 200MG, 400MG	4	
<i>carbamazepine er capsule extended release 12 hour 100mg, 200mg, 300mg</i>	1	
<i>carbamazepine er tablet extended release 12 hour 100mg, 200mg, 400mg</i>	1	
<i>carbamazepine suspension 100mg/5ml</i>	1	
<i>carbamazepine tablet chewable 100mg, 200mg</i>	1	
<i>carbamazepine tablet 200mg</i>	1	
DILANTIN CAPSULE 30MG	3	
<i>epitol tablet 200mg</i>	1	
<i>eslicarbazepine acetate tablet 200mg, 400mg, 600mg, 800mg</i>	1	
<i>lacosamide injection 200mg/20ml</i>	1	
<i>lacosamide oral solution 10mg/ml</i>	3	
<i>lacosamide tablet 100mg, 150mg, 200mg, 50mg</i>	1	
<i>oxcarbazepine er tablet extended release 24 hour 150mg, 300mg</i>	1	
<i>oxcarbazepine er tablet extended release 24 hour 600mg</i>	4	
<i>oxcarbazepine suspension 300mg/5ml</i>	1	
<i>oxcarbazepine tablet 150mg, 300mg, 600mg</i>	1	
OXTELLAR XR TABLET EXTENDED RELEASE 24 HOUR 600MG	4	
<i>phenytek capsule 200mg, 300mg</i>	1	
<i>phenytoin infatabs tablet chewable 50mg</i>	1	
<i>phenytoin sodium extended capsule 100mg, 200mg, 300mg</i>	1	
<i>phenytoin suspension 125mg/5ml</i>	1	
<i>phenytoin tablet chewable 50mg</i>	1	
<i>rufinamide suspension 40mg/ml</i>	4	
<i>rufinamide tablet 200mg</i>	1	
<i>rufinamide tablet 400mg</i>	4	
TRILEPTAL SUSPENSION 300MG/5ML	3	
TRILEPTAL TABLET 300MG	3	
TRILEPTAL TABLET 600MG	4	
VIMPAT INJECTION 200MG/20ML	3	
VIMPAT ORAL SOLUTION 10MG/ML	4	
VIMPAT TABLET 100MG, 150MG, 200MG	4	
XCOPRI TABLET THERAPY PACK 0	3	PA; (12.5mg-25mg)
XCOPRI TABLET THERAPY PACK 0	4	PA
XCOPRI TABLET THERAPY PACK 0	4	PA ; (100mg-150mg)
XCOPRI TABLET 100MG, 150MG, 200MG, 25MG, 50MG	4	PA
ZONEGRAN CAPSULE 100MG, 25MG	4	
ZONISADE SUSPENSION 100MG/5ML	3	ST
<i>zonisamide capsule 100mg, 25mg, 50mg</i>	1	
<b>Antidementia Agents</b>		
<b>Antidementia Agents, Other</b>		

Drug Name	Drug Tier	Requirements/Limits
<i>ergoloid mesylates tablet 1mg</i>	3	
LEQEMBI IQLIK INJECTION 360MG/1.8ML	4	QL (7.2 ML per 28 days) PA
<i>memantine/donepezil hydrochloride er capsule extended release 24 hour 10mg; 14mg, 10mg; 21mg, 10mg; 28mg</i>	1	QL (30 EA per 30 days)
NAMZARIC CAPSULE ER 24 HOUR THERAPY PACK 10MG; 0	2	QL (56 EA per 365 days)
NAMZARIC CAPSULE EXTENDED RELEASE 24 HOUR 10MG; 14MG, 10MG; 21MG, 10MG; 28MG, 10MG; 7MG	2	QL (30 EA per 30 days)
<b>Cholinesterase Inhibitors</b>		
ADLARITY PATCH WEEKLY 10MG/DAY, 5MG/DAY	3	ST
<i>donepezil hcl tablet disintegrating 10mg, 5mg</i>	1	
<i>donepezil hcl tablet 10mg, 23mg</i>	1	
<i>donepezil hydrochloride odt tablet disintegrating 10mg, 5mg</i>	1	
<i>donepezil hydrochloride tablet 5mg</i>	1	
<i>galantamine hydrobromide er capsule extended release 24 hour 16mg, 24mg, 8mg</i>	1	
<i>galantamine hydrobromide solution 4mg/ml</i>	1	
<i>galantamine hydrobromide tablet 12mg, 4mg, 8mg</i>	1	
<i>rivastigmine tartrate capsule 1.5mg, 3mg, 4.5mg, 6mg</i>	1	
<i>rivastigmine transdermal system patch 24 hour 13.3mg/24hr, 4.6mg/24hr, 9.5mg/24hr</i>	1	
ZUNVEYL TABLET DELAYED RELEASE 10MG	3	QL (120 EA per 30 days) ST
ZUNVEYL TABLET DELAYED RELEASE 15MG, 5MG	3	QL (60 EA per 30 days) ST
<b>N-methyl-D-aspartate (NMDA) Receptor Antagonist</b>		
<i>memantine hcl titration pak tablet 0</i>	1	
<i>memantine hydrochloride er capsule extended release 24 hour 14mg, 21mg, 28mg, 7mg</i>	1	QL (30 EA per 30 days)
<i>memantine hydrochloride tablet 10mg, 5mg</i>	1	
NAMENDA XR CAPSULE EXTENDED RELEASE 24 HOUR 14MG, 21MG, 28MG	3	QL (30 EA per 30 days)
<b>Antidepressants</b>		
<b>Antidepressants, Other</b>		
APLENZIN TABLET EXTENDED RELEASE 24 HOUR 174MG, 348MG, 522MG	4	QL (30 EA per 30 days) ST
AUVELITY TABLET EXTENDED RELEASE 105MG; 45MG	4	QL (60 EA per 30 days) ST
<i>bupropion hydrochloride er (sr) tablet extended release 12 hour 150mg, 200mg</i>	1	QL (60 EA per 30 days)
<i>bupropion hydrochloride er (sr) tablet extended release 12 hour 100mg</i>	1	QL (90 EA per 30 days)
<i>bupropion hydrochloride er (xl) tablet extended release 24 hour 300mg</i>	1	QL (30 EA per 30 days)
<i>bupropion hydrochloride er (xl) tablet extended release 24 hour 150mg</i>	1	QL (90 EA per 30 days)
<i>bupropion hydrochloride tablet 100mg, 75mg</i>	1	
<i>chlordiazepoxide/amitriptyline tablet 12.5mg; 5mg, 25mg; 10mg</i>	1	
EXXUA TITRATION PACK TABLET EXTENDED RELEASE 24 HOUR 18.2MG	4	ST
EXXUA TABLET EXTENDED RELEASE 24 HOUR 36.3MG, 54.5MG, 72.6MG	4	QL (30 EA per 30 days) ST
EXXUA TABLET EXTENDED RELEASE 24 HOUR 18.2MG	4	ST

Drug Name	Drug Tier	Requirements/Limits
<i>mirtazapine odt tablet disintegrating 15mg, 30mg, 45mg</i>	1	
<i>mirtazapine tablet 15mg, 30mg, 45mg, 7.5mg</i>	1	
<i>olanzapine/fluoxetine capsule 25mg; 12mg, 50mg; 12mg, 50mg; 6mg</i>	1	QL (30 EA per 30 days)
<i>olanzapine/fluoxetine capsule 25mg; 3mg, 25mg; 6mg</i>	1	QL (90 EA per 30 days)
<i>perphenazine/amitriptyline tablet 10mg; 2mg, 10mg; 4mg, 25mg; 2mg, 25mg; 4mg, 50mg; 4mg</i>	1	
SPRAVATO 56MG DOSE SOLUTION THERAPY PACK 0	4	PA
SPRAVATO 84MG DOSE SOLUTION THERAPY PACK 0	4	PA
SYMBYAX CAPSULE 25MG; 3MG, 25MG; 6MG	3	QL (90 EA per 30 days)
WELLBUTRIN SR TABLET EXTENDED RELEASE 12 HOUR3 150MG, 200MG	3	QL (60 EA per 30 days)
WELLBUTRIN SR TABLET EXTENDED RELEASE 12 HOUR3 100MG	3	QL (90 EA per 30 days)
WELLBUTRIN XL TABLET EXTENDED RELEASE 24 HOUR 4 300MG	4	QL (30 EA per 30 days)
WELLBUTRIN XL TABLET EXTENDED RELEASE 24 HOUR 4 150MG	4	QL (90 EA per 30 days)
ZURZUVAE CAPSULE 30MG	4	QL (14 EA per 14 days) PA
ZURZUVAE CAPSULE 20MG, 25MG	4	QL (28 EA per 14 days) PA
<b>Monoamine Oxidase Inhibitors</b>		
EMSAM PATCH 24 HOUR 12MG/24HR, 6MG/24HR, 9MG/24HR	4	QL (30 EA per 30 days) ST
MARPLAN TABLET 10MG	3	
PARNATE TABLET 10MG	3	
<i>phenelzine sulfate tablet 15mg</i>	1	
<i>tranylcypromine sulfate tablet 10mg</i>	1	
<b>SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor</b>		
CITALOPRAM HYDROBROMIDE CAPSULE 30MG	3	ST
<i>citalopram hydrobromide solution 10mg/5ml</i>	1	
<i>citalopram hydrobromide tablet 10mg, 20mg, 40mg</i>	1	
CYMBALTA CAPSULE DELAYED RELEASE PARTICLES 20MG, 60MG	3	QL (60 EA per 30 days)
CYMBALTA CAPSULE DELAYED RELEASE PARTICLES 30MG	3	QL (90 EA per 30 days)
DESVENLAFAXINE ER TABLET EXTENDED RELEASE 24 HOUR 100MG	3	QL (120 EA per 30 days) ST
DESVENLAFAXINE ER TABLET EXTENDED RELEASE 24 HOUR 50MG	3	QL (30 EA per 30 days) ST
<i>desvenlafaxine er tablet extended release 24 hour 100mg</i>	1	QL (120 EA per 30 days); Generic Pristiq
<i>desvenlafaxine er tablet extended release 24 hour 25mg, 50mg</i>	1	QL (30 EA per 30 days); Generic Pristiq
DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 20MG, 60MG	3	QL (60 EA per 30 days)
DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 30MG, 40MG	3	QL (90 EA per 30 days)
<i>duloxetine hydrochloride dr capsule delayed release particles 20mg, 60mg</i>	1	QL (60 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>duloxetine hydrochloride dr capsule delayed release particles 30mg, 40mg</i>	1	QL (90 EA per 30 days)
<i>escitalopram oxalate capsule 15mg</i>	1	
<i>escitalopram oxalate solution 5mg/5ml</i>	1	
<i>escitalopram oxalate tablet 10mg, 20mg, 5mg</i>	1	
FETZIMA TITRATION PACK CAPSULE ER 24 HOUR THERAPY PACK 0	3	QL (56 EA per 365 days) ST
FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 120MG, 20MG, 40MG, 80MG	3	QL (30 EA per 30 days) ST
<i>fluoxetine dr capsule delayed release 90mg</i>	1	QL (4 EA per 28 days)
<i>fluoxetine hydrochloride capsule 10mg, 20mg, 40mg</i>	1	
<i>fluoxetine hydrochloride solution 20mg/5ml</i>	1	
<i>fluoxetine hydrochloride tablet 10mg, 20mg, 60mg</i>	1	
<i>fluvoxamine maleate er capsule extended release 24 hour 100mg, 150mg</i>	1	QL (60 EA per 30 days)
<i>fluvoxamine maleate tablet 100mg, 25mg, 50mg</i>	1	
<i>nefazodone hydrochloride tablet 100mg, 150mg, 200mg, 250mg, 50mg</i>	3	
<i>paroxetine hcl er tablet extended release 24 hour 12.5mg, 25mg, 37.5mg</i>	1	
<i>paroxetine hcl tablet 30mg, 40mg</i>	1	
<i>paroxetine hydrochloride suspension 10mg/5ml</i>	1	
<i>paroxetine hydrochloride tablet 10mg, 20mg</i>	1	
<i>paroxetine capsule 7.5mg</i>	1	QL (30 EA per 30 days)
PAXIL CR TABLET EXTENDED RELEASE 24 HOUR 12.5MG, 25MG, 37.5MG	3	
PAXIL SUSPENSION 10MG/5ML	3	
PAXIL TABLET 10MG, 20MG, 30MG, 40MG	3	
PRISTIQ TABLET EXTENDED RELEASE 24 HOUR 100MG	3	QL (120 EA per 30 days)
PRISTIQ TABLET EXTENDED RELEASE 24 HOUR 25MG, 50MG	3	QL (30 EA per 30 days)
PROZAC CAPSULE 20MG	3	
PROZAC CAPSULE 40MG	4	
RALDESY SOLUTION 10MG/ML	4	
<i>sertraline hcl concentrate 20mg/ml</i>	1	
<i>sertraline hcl tablet 50mg</i>	1	
<i>sertraline hydrochloride capsule 150mg, 200mg</i>	1	
<i>sertraline hydrochloride concentrate 20mg/ml</i>	1	
<i>sertraline hydrochloride tablet 100mg, 25mg</i>	1	
<i>trazodone hydrochloride tablet 100mg, 150mg, 50mg</i>	1	
TRINTELLIX TABLET 10MG, 20MG, 5MG	3	QL (30 EA per 30 days)
VENLAFAXINE BESYLATE ER TABLET EXTENDED RELEASE 24 HOUR 112.5MG	3	ST
<i>venlafaxine hcl tablet 100mg, 25mg, 37.5mg, 50mg, 75mg</i>	1	
<i>venlafaxine hydrochloride er capsule extended release 24 hour 150mg, 37.5mg, 75mg</i>	1	
<i>venlafaxine hydrochloride er tablet extended release 24 hour 150mg, 225mg, 37.5mg, 75mg</i>	1	
<i>venlafaxine hydrochloride tablet 100mg, 25mg, 37.5mg, 50mg, 75mg</i>	1	
VIIIBRYD TABLET 10MG, 20MG, 40MG	3	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>vilazodone hydrochloride tablet 10mg, 20mg, 40mg</i>	1	QL (30 EA per 30 days)
<b>Tricyclics</b>		
<i>amitriptyline hcl tablet 100mg, 150mg, 25mg, 75mg</i>	1	
<i>amitriptyline hydrochloride tablet 100mg, 10mg, 25mg, 50mg, 75mg</i>	1	
<i>amoxapine tablet 100mg, 150mg, 25mg, 50mg</i>	1	
ANAFRANIL CAPSULE 25MG, 50MG, 75MG	4	
<i>clomipramine hcl capsule 25mg, 50mg, 75mg</i>	1	
<i>clomipramine hydrochloride capsule 25mg, 50mg, 75mg</i>	1	
<i>desipramine hydrochloride tablet 100mg, 10mg, 150mg, 25mg, 50mg, 75mg</i>	1	
<i>doxepin hcl capsule 75mg</i>	1	
<i>doxepin hcl concentrate 10mg/ml</i>	1	
<i>doxepin hydrochloride capsule 100mg, 10mg, 150mg, 25mg, 50mg</i>	1	
<i>imipramine hcl tablet 25mg, 50mg</i>	1	
<i>imipramine hydrochloride tablet 10mg</i>	1	
<i>imipramine pamoate capsule 100mg, 125mg, 150mg, 75mg</i>	1	
NORPRAMIN TABLET 10MG, 25MG	3	
<i>nortriptyline hcl capsule 25mg, 75mg</i>	1	
<i>nortriptyline hcl solution 10mg/5ml</i>	1	
<i>nortriptyline hydrochloride capsule 10mg, 50mg</i>	1	
PAMELOR CAPSULE 10MG, 25MG, 50MG, 75MG	4	
<i>protriptyline hcl tablet 10mg, 5mg</i>	1	
<i>trimipramine maleate capsule 100mg, 25mg, 50mg</i>	1	
<b>Antiemetics</b>		
<b>Antiemetics, Other</b>		
ANTIVERT TABLET CHEWABLE 25MG	3	
ANTIVERT TABLET 50MG	3	
BARHEMSYS INJECTION 10MG/4ML, 5MG/2ML	3	B/D
BONJESTA TABLET EXTENDED RELEASE 20MG; 20MG	3	QL (60 EA per 30 days)
COMPRO SUPPOSITORY 25MG	1	
DICLEGIS TABLET DELAYED RELEASE 10MG; 10MG	3	QL (120 EA per 30 days)
<i>doxylamine succinate/pyridoxine hydrochloride tablet delayed release 10mg; 10mg</i>	1	QL (120 EA per 30 days)
<i>meclizine hcl tablet 12.5mg, 25mg</i>	1	
<i>meclizine hydrochloride tablet 25mg, 50mg</i>	1	
<i>prochlorperazine edisylate injection 10mg/2ml</i>	1	
<i>prochlorperazine maleate tablet 10mg, 5mg</i>	1	
<i>prochlorperazine suppository 25mg</i>	1	
<i>promethazine hcl suppository 12.5mg</i>	1	
<i>promethazine hydrochloride suppository 25mg</i>	1	
<i>promethazine hydrochloride tablet 12.5mg, 25mg, 50mg</i>	1	
PROMETHEGAN SUPPOSITORY 12.5MG, 25MG, 50MG	1	
<i>scopolamine patch 72 hour 1mg/3days</i>	1	
TRANSDERM-SCOP PATCH 72 HOUR 1MG/3DAYS	3	
<i>trimethobenzamide hydrochloride capsule 300mg</i>	1	B/D
<b>Emetogenic Therapy Adjuncts</b>		
AKYNZEO CAPSULE 300MG; 0.5MG	3	QL (2 EA per 30 days) B/D
AKYNZEO INJECTION 235MG/20ML; 0.25MG/20ML, 235MG; 0.25MG	3	

Drug Name	Drug Tier	Requirements/Limits
ANZEMET TABLET 50MG	3	QL (5 EA per 30 days) B/D
APONVIE INJECTION 32MG/4.4ML	3	
<i>aprepitant capsule 40mg</i>	1	QL (1 EA per 30 days) B/D
<i>aprepitant capsule 0</i>	1	QL (6 EA per 30 days) B/D
<i>aprepitant capsule 80mg</i>	1	QL (8 EA per 30 days) B/D
<i>aprepitant capsule 125mg</i>	4	QL (2 EA per 30 days) B/D
<i>dronabinol capsule 10mg, 2.5mg, 5mg</i>	1	QL (60 EA per 30 days) PA
EMEND BIPACK CAPSULE 80MG	3	QL (8 EA per 30 days) B/D
EMEND TRIPACK CAPSULE 0	3	QL (6 EA per 30 days) B/D
EMEND SUSPENSION RECONSTITUTED 125MG/5ML	3	QL (6 EA per 30 days) B/D
<i>granisetron hydrochloride tablet 1mg</i>	1	QL (30 EA per 30 days) B/D
MARINOL CAPSULE 2.5MG	3	QL (60 EA per 30 days) PA
MARINOL CAPSULE 10MG, 5MG	4	QL (60 EA per 30 days) PA
<i>ondansetron hcl solution 4mg/5ml</i>	1	QL (450 ML per 30 days) B/D
<i>ondansetron hcl tablet 24mg</i>	1	QL (14 EA per 28 days) B/D
<i>ondansetron hydrochloride injection 4mg/2ml</i>	1	
<i>ondansetron hydrochloride tablet 4mg, 8mg</i>	1	B/D
<i>ondansetron odt tablet disintegrating 16mg, 4mg, 8mg</i>	1	B/D
<i>palonosetron hydrochloride injection 0.25mg/5ml</i>	1	
SANCUSO PATCH 3.1MG/24HR	4	QL (2 EA per 30 days)
SUSTOL INJECTION 10MG/0.4ML	4	QL (1.2 ML per 30 days)
SYNDROS SOLUTION 5MG/ML	4	QL (120 ML per 30 days) PA
VARUBI TABLET THERAPY PACK 90MG	3	QL (4 EA per 28 days) B/D

#### Antifungals

##### Antifungals

ABELCET INJECTION 5MG/ML	3	B/D
AMBISOME INJECTION 50MG	4	B/D
<i>amphotericin b liposome injection 50mg</i>	4	B/D
<i>amphotericin b injection 50mg</i>	1	B/D
ANCOBON CAPSULE 250MG, 500MG	4	
CANCIDAS INJECTION 50MG, 70MG	4	
<i>caspofungin acetate injection 50mg, 70mg</i>	1	
<i>clotrimazole cream 1%</i>	1	QL (90 GM per 30 days)
<i>clotrimazole solution 1%</i>	1	QL (60 ML per 30 days)
<i>clotrimazole troche 10mg</i>	1	
CRESEMBA CAPSULE 186MG, 74.5MG	4	PA
CRESEMBA INJECTION 372MG	4	
DIFLUCAN TABLET 200MG	4	
<i>econazole nitrate cream 1%</i>	1	
ERAXIS INJECTION 50MG	3	
ERAXIS INJECTION 100MG	4	
ERTACZO CREAM 2%	4	
<i>fluconazole in sodium chloride injection 200mg/100ml; 0.9%, 400mg/200ml; 0.9%</i>	1	
<i>fluconazole suspension reconstituted 10mg/ml, 40mg/ml</i>	1	
<i>fluconazole tablet 100mg, 150mg, 200mg, 50mg</i>	1	
<i>flucytosine capsule 250mg, 500mg</i>	4	
FULVICIN P/G 165 TABLET 165MG	4	
<i>griseofulvin microsize suspension 125mg/5ml</i>	1	
<i>griseofulvin microsize tablet 500mg</i>	1	
<i>griseofulvin ultramicrosize tablet 125mg, 250mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>griseofulvin ultramicrosize tablet 165mg</i>	4	
<i>itraconazole capsule 100mg</i>	1	PA
<i>itraconazole solution 10mg/ml</i>	4	PA
JUBLIA SOLUTION 10%	4	
KERYDIN SOLUTION 5%	3	PA
<i>ketoconazole cream 2%</i>	1	QL (90 GM per 30 days)
<i>ketoconazole shampoo 2%</i>	1	
<i>ketoconazole tablet 200mg</i>	1	
<i>klayesta powder 100000unit/gm</i>	1	QL (120 GM per 30 days)
MICAFUNGIN SODIUM/SODIUM CHLORIDE INJECTION 150MG/150ML; 0.9%	3	
MICAFUNGIN/SODIUM CHLORIDE INJECTION 100MG/100ML; 0.9%, 50MG/50ML; 0.9%	3	
<i>micafungin injection 100mg, 50mg</i>	1	
MYCAMINE INJECTION 50MG	3	
MYCAMINE INJECTION 100MG	4	
NOXAFIL INJECTION 300MG/16.7ML	4	
NOXAFIL PACKET 300MG	4	PA
NOXAFIL SUSPENSION 40MG/ML	4	PA
NOXAFIL TABLET DELAYED RELEASE 100MG	4	PA
<i>nyamyc powder 100000unit/gm</i>	1	QL (120 GM per 30 days)
<i>nystatin cream 100000unit/gm</i>	1	
<i>nystatin ointment 100000unit/gm</i>	1	
<i>nystatin powder 100000unit/gm</i>	1	QL (120 GM per 30 days)
<i>nystatin suspension 100000unit/ml</i>	1	
<i>nystatin tablet 500000unit</i>	1	
<i>nystop powder 100000unit/gm</i>	1	QL (120 GM per 30 days)
ORAVIG TABLET 50MG	4	
<i>oxiconazole nitrate cream 1%</i>	1	QL (90 GM per 30 days)
OXISTAT CREAM 1%	3	QL (90 GM per 30 days)
<i>posaconazole dr tablet delayed release 100mg</i>	4	PA
<i>posaconazole injection 300mg/16.7ml</i>	4	
<i>posaconazole suspension 40mg/ml</i>	4	PA
REZZAYO INJECTION 200MG	4	
SPORANOX CAPSULE 100MG	4	PA
SPORANOX SOLUTION 10MG/ML	4	PA
SULCONAZOLE NITRATE SOLUTION 1%	1	
<i>tavaborole solution 5%</i>	1	PA
<i>terbinafine hcl tablet 250mg</i>	1	QL (84 EA per 180 days)
<i>terconazole cream 0.4%, 0.8%</i>	1	
TOLSURA CAPSULE 65MG	4	PA
VFEND IV INJECTION 200MG	4	PA
VFEND SUSPENSION RECONSTITUTED 40MG/ML	4	
VIVJOA CAPSULE THERAPY PACK 150MG	3	PA
<i>voriconazole injection 200mg</i>	4	PA
<i>voriconazole suspension reconstituted 40mg/ml</i>	4	
<i>voriconazole tablet 200mg, 50mg</i>	1	
<b>Antigout Agents</b>		
<b>Antigout Agents</b>		
<i>allopurinol tablet 100mg, 200mg, 300mg</i>	1	
<i>colchicine capsule 0.6mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>colchicine tablet 0.6mg</i>	1	
<i>febuxostat tablet 40mg, 80mg</i>	1	
GLOPERBA SOLUTION 0.6MG/5ML	3	ST
KRYSTEXXA INJECTION 8MG/50ML, 8MG/ML	4	PA
<i>probenecid/colchicine tablet 0.5mg; 500mg</i>	1	
<i>probenecid tablet 500mg</i>	1	
<b>Antimigraine Agents</b>		
<b>Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists</b>		
AIMOVIG INJECTION 140MG/ML	2	QL (1 ML per 28 days) PA
AIMOVIG INJECTION 70MG/ML	2	QL (2 ML per 28 days) PA
AJOVY INJECTION 225MG/1.5ML	3	QL (4.5 ML per 84 days) PA
EMGALITY INJECTION 120MG/ML	2	QL (2 ML per 28 days) PA
EMGALITY INJECTION 100MG/ML	2	QL (3 ML per 28 days) PA
QULIPTA TABLET 10MG, 30MG, 60MG	4	QL (30 EA per 30 days) PA
UBRELVY TABLET 100MG, 50MG	4	QL (16 EA per 30 days) PA
<b>Ergot Alkaloids</b>		
BREKIYA INJECTION 1MG/ML	3	QL (24 ML per 28 days) PA
<i>dihydroergotamine mesylate injection 1mg/ml</i>	4	QL (24 ML per 28 days) PA
<i>dihydroergotamine mesylate nasal solution 4mg/ml</i>	4	QL (8 ML per 30 days) PA
ERGOMAR TABLET SUBLINGUAL 2MG	4	
<i>ergotamine tartrate/caffeine tablet 100mg; 1mg</i>	1	QL (24 EA per 28 days)
MIGERGOT SUPPOSITORY 100MG; 2MG	4	QL (20 EA per 28 days)
MIGRANAL SOLUTION 4MG/ML	4	QL (8 ML per 30 days) PA
TRUDHESA AEROSOL SOLUTION 0.725MG/ACT	3	QL (12 ML per 28 days) PA
<b>Prophylactic</b>		
<i>timolol maleate tablet 10mg, 20mg, 5mg</i>	1	
VYEPTI INJECTION 100MG/ML	3	QL (3 ML per 84 days) PA
<b>Serotonin (5-HT) Receptor Agonist</b>		
<i>almotriptan malate tablet 12.5mg</i>	1	QL (12 EA per 30 days)
<i>almotriptan tablet 12.5mg, 6.25mg</i>	1	QL (12 EA per 30 days)
<i>eletriptan hydrobromide tablet 20mg, 40mg</i>	1	QL (12 EA per 30 days)
FROVA TABLET 2.5MG	3	QL (12 EA per 30 days)
<i>frovatriptan succinate tablet 2.5mg</i>	1	QL (12 EA per 30 days)
IMITREX STATDOSE REFILL INJECTION 4MG/0.5ML, 6MG/0.5ML	4	QL (5 ML per 30 days)
IMITREX STATDOSE SYSTEM INJECTION 4MG/0.5ML	3	QL (5 ML per 30 days)
IMITREX STATDOSE SYSTEM INJECTION 6MG/0.5ML	4	QL (5 ML per 30 days)
IMITREX SOLUTION 20MG/ACT, 5MG/ACT	3	QL (12 EA per 30 days)
IMITREX TABLET 100MG, 25MG, 50MG	3	QL (9 EA per 30 days)
MAXALT-MLT TABLET DISINTEGRATING 10MG	3	QL (18 EA per 30 days)
MAXALT TABLET 10MG	3	QL (18 EA per 30 days)
<i>naratriptan hcl tablet 1mg, 2.5mg</i>	1	QL (9 EA per 30 days)
ONZETRA XSAIL EXHALER POWDER 11MG/NOSEPC	3	QL (16 EA per 30 days)
RELPAZ TABLET 20MG, 40MG	3	QL (12 EA per 30 days)
REYVOW TABLET 50MG	3	QL (4 EA per 30 days) PA
REYVOW TABLET 100MG	3	QL (8 EA per 30 days) PA
<i>rizatriptan benzoate odt tablet disintegrating 10mg, 5mg</i>	1	QL (18 EA per 30 days)
<i>rizatriptan benzoate tablet 10mg, 5mg</i>	1	QL (18 EA per 30 days)
<i>sumatriptan succinate refill injection 4mg/0.5ml, 6mg/0.5ml</i>	1	QL (5 ML per 30 days)
<i>sumatriptan succinate injection 4mg/0.5ml, 6mg/0.5ml</i>	1	QL (5 ML per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate tablet 100mg, 25mg, 50mg</i>	1	QL (9 EA per 30 days)
<i>sumatriptan/naproxen sodium tablet 500mg; 85mg</i>	1	QL (9 EA per 30 days)
<i>sumatriptan solution 20mg/act, 5mg/act</i>	1	QL (12 EA per 30 days)
SYMBRAVO TABLET 20MG; 10MG	3	QL (9 EA per 28 days) ST
TOSYMRA SOLUTION 10MG/ACT	3	QL (12 EA per 30 days)
TREXIMET TABLET 500MG; 85MG	4	QL (9 EA per 30 days)
ZEMBRACE SYMTOUCH INJECTION 3MG/0.5ML	4	QL (8 ML per 30 days)
<i>zolmitriptan odt tablet disintegrating 2.5mg</i>	1	QL (12 EA per 30 days)
<i>zolmitriptan odt tablet disintegrating 5mg</i>	1	QL (9 EA per 30 days)
<i>zolmitriptan solution 5mg</i>	1	QL (12 EA per 30 days)
<i>zolmitriptan tablet 2.5mg, 5mg</i>	1	QL (12 EA per 30 days)
ZOMIG SOLUTION 5MG	3	QL (12 EA per 30 days)
ZOMIG TABLET 2.5MG, 5MG	4	QL (12 EA per 30 days)
<b>Antimyasthenic Agents</b>		
<b><i>Parasympathomimetics</i></b>		
MESTINON TIMESPAN TABLET EXTENDED RELEASE 180MG	4	
MESTINON SOLUTION 60MG/5ML	4	
MESTINON TABLET 60MG	4	
<i>pyridostigmine bromide er tablet extended release 24 hour 105mg</i>	1	
<i>pyridostigmine bromide solution 60mg/5ml</i>	3	
<i>pyridostigmine bromide tablet 60mg</i>	1	
VYVGART HYTRULO INJECTION 180MG/ML; 2000UNIT/ML	4	PA
<b>Antimycobacterials</b>		
<b><i>Antimycobacterials, Other</i></b>		
<i>dapsone tablet 100mg, 25mg</i>	1	
EMROSI CAPSULE EXTENDED RELEASE 24 HOUR 40MG	4	
MYCOBUTIN CAPSULE 150MG	3	
<i>rifabutin capsule 150mg</i>	1	
<b><i>Antituberculars</i></b>		
<i>cycloserine capsule 250mg</i>	4	
<i>ethambutol hydrochloride tablet 100mg, 400mg</i>	1	
<i>isoniazid injection 100mg/ml</i>	3	
<i>isoniazid syrup 50mg/5ml</i>	1	
<i>isoniazid tablet 100mg, 300mg</i>	1	
PRIFTIN TABLET 150MG	3	
<i>pyrazinamide tablet 500mg</i>	1	
RIFADIN INJECTION 600MG	4	
<i>rifampin capsule 150mg, 300mg</i>	1	
<i>rifampin injection 600mg</i>	1	
SIRTURO TABLET 100MG, 20MG	4	
TRECTOR TABLET 250MG	3	
<b>Antineoplastics</b>		
<b><i>Alkylating Agents</i></b>		
BELRAPZO INJECTION 100MG/4ML	4	
BENDAMUSTINE HYDROCHLORIDE INJECTION 100MG/4ML	4	
<i>bendamustine hydrochloride injection 100mg, 25mg</i>	4	
BENDEKA INJECTION 100MG/4ML	4	
<i>busulfan injection 6mg/ml</i>	4	

Drug Name	Drug Tier	Requirements/Limits
BUSULFEX INJECTION 6MG/ML	4	
<i>carboplatin injection 450mg/45ml, 600mg/60ml</i>	1	
<i>carmustine injection 100mg, 300mg, 50mg</i>	4	
CISPLATIN INJECTION 50MG	4	
<i>cisplatin injection 100mg/100ml</i>	1	
CYCLOPHOSPHAMIDE MONOHYDRATE INJECTION 2GM/10ML	4	
<i>cyclophosphamide capsule 25mg, 50mg</i>	1	B/D
CYCLOPHOSPHAMIDE INJECTION 1000MG/10ML, 1GM/2ML, 1GM/5ML, 1GM, 2000MG/20ML, 2GM/10ML, 2GM/4ML, 500MG/2.5ML, 500MG/5ML, 500MG/ML	4	
<i>cyclophosphamide injection 500mg</i>	1	
<i>cyclophosphamide injection 1gm, 2gm</i>	4	
CYCLOPHOSPHAMIDE TABLET 25MG, 50MG	1	B/D
EVOMELA INJECTION 50MG	4	
FRINDOVYX INJECTION 1GM/2ML, 2GM/4ML, 500MG/ML	4	
GLEOSTINE CAPSULE 10MG, 40MG	3	
GLEOSTINE CAPSULE 100MG	4	
GRAFAPEX INJECTION 1GM, 5GM	4	
<i>ifosfamide injection 3gm</i>	1	
IVRA INJECTION 90MG/ML	4	
KYXATA INJECTION 500MG/50ML, 80MG/8ML	4	
LEUKERAN TABLET 2MG	4	
LOMUSTINE CAPSULE 100MG	4	
<i>lomustine capsule 10mg, 40mg</i>	1	
MATULANE CAPSULE 50MG	4	
OPDIVO QVANTIG INJECTION 10000UNIT/5ML; 600MG/5ML, 5000UNIT/2.5ML; 300MG/2.5ML	4	PA
<i>oxaliplatin injection 50mg/10ml</i>	1	
<i>oxaliplatin injection 100mg/20ml, 100mg, 200mg/40ml, 50mg</i>	4	
TEMODAR INJECTION 100MG	4	
TEPADINA INJECTION 0.9%; 200MG/200ML, 100MG, 15MG	4	
TEPYLUTE INJECTION 100MG/10ML, 15MG/1.5ML	4	
<i>thiotepa injection 100mg, 15mg</i>	4	
TREANDA INJECTION 100MG, 25MG	4	
VALCHLOR GEL 0.016%	4	PA
VIVIMUSTA INJECTION 100MG/4ML	4	
YONDELIS INJECTION 1MG	4	
ZANOSAR INJECTION 1GM	4	
ZEPZELCA INJECTION 4MG	4	PA
<b>Antiandrogens</b>		
<i>abiraterone acetate tablet 250mg</i>	1	PA
<i>abiraterone acetate tablet 500mg</i>	4	PA
<i>abirtega tablet 250mg</i>	1	PA
<i>bicalutamide tablet 50mg</i>	1	
CASODEX TABLET 50MG	3	
ERLEADA TABLET 240MG, 60MG	4	PA
EULEXIN CAPSULE 125MG	3	
NILANDRON TABLET 150MG	4	
<i>nilutamide tablet 150mg</i>	4	
NUBEQA TABLET 300MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
XTANDI CAPSULE 40MG	4	PA
XTANDI TABLET 40MG, 80MG	4	PA
YONSA TABLET 125MG	4	PA
ZYTIGA TABLET 250MG, 500MG	4	PA
<b>Antiangiogenic Agents</b>		
<i>lenalidomide capsule 10mg, 15mg, 2.5mg, 20mg, 25mg, 5mg</i>	4	PA
POMALYST CAPSULE 3MG, 4MG	4	PA
POMALYST CAPSULE 1MG, 2MG	4	QL (30 EA per 30 days) PA
REVLIMID CAPSULE 10MG, 15MG, 2.5MG, 20MG, 25MG, 5MG	4	PA
THALOMID CAPSULE 100MG, 150MG, 200MG, 50MG	4	PA
<b>Antiestrogens/Modifiers</b>		
EMCYT CAPSULE 140MG	4	
FARESTON TABLET 60MG	4	
FASLODEX INJECTION 250MG/5ML	4	
FULVESTRANT INJECTION 250MG/5ML	4	
<i>fulvestrant injection 250mg/5ml</i>	4	
INLURIYO TABLET 200MG	4	PA
ORSERDU TABLET 345MG, 86MG	4	PA
SOLTAMOX SOLUTION 10MG/5ML	4	
<i>tamoxifen citrate tablet 10mg, 20mg</i>	1	
<i>toremifene citrate tablet 60mg</i>	1	
<b>Antimetabolites</b>		
ALIMTA INJECTION 100MG, 500MG	4	
ARRANON INJECTION 5MG/ML	4	
AXTLE INJECTION 100MG, 500MG	4	
<i>cladribine injection 10mg/10ml</i>	4	B/D
<i>clofarabine injection 1mg/ml</i>	4	
COLAR INJECTION 1MG/ML	4	
<i>cytarabine aqueous injection 20mg/ml</i>	1	B/D
<i>cytarabine injection 100mg/ml, 20mg/ml</i>	1	B/D
DROXIA CAPSULE 200MG, 300MG, 400MG	3	
<i>floxuridine injection 0.5gm</i>	4	B/D
<i>fluorouracil injection 1gm/20ml, 2.5gm/50ml, 500mg/10ml, 5gm/100ml</i>	1	B/D
FOLOTYN INJECTION 20MG/ML, 40MG/2ML	4	PA
<i>gemcitabine hydrochloride injection 200mg/2ml, 200mg/5.26ml</i>	1	
<i>gemcitabine hydrochloride injection 1.5gm/15ml, 1gm/10ml, 1gm/26.3ml, 2gm/20ml, 2gm/52.6ml</i>	4	
<i>hydroxyurea capsule 500mg</i>	1	
INLEXZO INJECTION 225MG	4	PA
<i>mercaptopurine suspension 2000mg/100ml</i>	4	
<i>mercaptopurine tablet 50mg</i>	1	
<i>nelarabine injection 5mg/ml</i>	4	
NIPENT INJECTION 10MG	4	
<i>pemetrexed disodium injection 100mg, 500mg</i>	4	
PEMETREXED INJECTION 1GM/40ML	3	
PEMETREXED INJECTION 100MG/4ML, 100MG, 1GM/40ML, 500MG/20ML, 500MG, 850MG/34ML	4	
<i>pemetrexed injection 1000mg, 100mg, 500mg, 750mg</i>	4	

Drug Name	Drug Tier	Requirements/Limits
PEMFEXY INJECTION 500MG/20ML	4	
PEMRYDI RTU INJECTION 100MG/10ML, 500MG/50ML	4	
PRALATREXATE INJECTION 20MG/ML, 40MG/2ML	4	PA
PURIXAN SUSPENSION 2000MG/100ML	4	
SIKLOS TABLET 100MG	3	PA
SIKLOS TABLET 1000MG	4	PA
TABLOID TABLET 40MG	4	
VYXEOS INJECTION 100MG; 44MG	4	PA
XROMI SOLUTION 100MG/ML	4	PA
<b>Antineoplastics, Other</b>		
ABRAXANE INJECTION 900MG; 100MG	4	
<i>adriamycin injection 50mg</i>	1	B/D
ADSTILADRIN INJECTION 0	4	PA
AKEEGA TABLET 500MG; 100MG, 500MG; 50MG	4	PA
ANKTIVA INJECTION 400MCG/0.4ML	4	PA
<i>arsenic trioxide injection 10mg/10ml, 12mg/6ml</i>	4	
ASPARLAS INJECTION 3750UNIT/5ML	4	
<i>azacitidine injection 100mg</i>	4	
BEIZRAY INJECTION 20MG/ML, 25%; 80MG/4ML	4	
<i>bleomycin sulfate injection 15unit, 30unit</i>	1	B/D
BORTEZOMIB INJECTION 3.5MG	4	PA
<i>bortezomib injection 1mg, 2.5mg</i>	1	PA
<i>bortezomib injection 3.5mg/1.4ml</i>	3	PA
<i>bortezomib injection 3.5mg</i>	4	PA
BORUZU INJECTION 3.5MG/1.4ML	4	PA
COLUMVI INJECTION 10MG/10ML, 2.5MG/2.5ML	4	PA
<i>dactinomycin injection 0.5mg</i>	4	
<i>daunorubicin hydrochloride injection 20mg/4ml</i>	1	
<i>decitabine injection 50mg</i>	4	
<i>docetaxel injection 160mg/16ml, 80mg/8ml</i>	1	
<i>docetaxel injection 160mg/8ml, 20mg/2ml</i>	4	
DOXIL INJECTION 2MG/ML	4	
<i>doxorubicin hcl injection 2mg/ml, 50mg</i>	1	B/D
<i>doxorubicin hydrochloride liposomal injection 2mg/ml</i>	4	
<i>doxorubicin hydrochloride injection 10mg</i>	1	B/D
ELLECE INJECTION 50MG/25ML	3	
ELREXFIO INJECTION 44MG/1.1ML, 76MG/1.9ML	4	PA
ELZONRIS INJECTION 1000MCG/ML	4	PA
EPKINLY INJECTION 48MG/0.8ML, 4MG/0.8ML	4	PA
<i>eribulin mesylate injection 1mg/2ml</i>	4	PA
ETHYOL INJECTION 500MG	4	
HALAVEN INJECTION 1MG/2ML	4	PA
IBRANCE TABLET 100MG, 125MG, 75MG	4	PA
IDAMYCIN PFS INJECTION 10MG/10ML, 20MG/20ML, 5MG/5ML	4	
<i>idarubicin hcl injection 10mg/10ml, 20mg/20ml, 5mg/5ml</i>	1	
<i>idarubicin hydrochloride injection 10mg/10ml, 20mg/20ml, 5mg/5ml</i>	1	
IMDELLTRA INJECTION 10MG, 1MG	4	PA
INREBIC CAPSULE 100MG	4	PA
ISTODAX INJECTION 10MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
ITOVEBI TABLET 9MG	4	PA
ITOVEBI TABLET 3MG	4	QL (60 EA per 30 days) PA
IWILFIN TABLET 192MG	4	PA
IXEMPRA KIT INJECTION 15MG, 45MG	4	
JEVTANA INJECTION 60MG/1.5ML	4	PA
KIMMTRAK INJECTION 100MCG/0.5ML	4	PA
KISQALI FEMARA 200 DOSE TABLET THERAPY PACK 2.5MG; 200MG	4	PA
KISQALI FEMARA 400 DOSE TABLET THERAPY PACK 2.5MG; 200MG	4	PA
KISQALI FEMARA 600 DOSE TABLET THERAPY PACK 2.5MG; 200MG	4	PA
KOMZIFTI CAPSULE 200MG	4	PA
LAZCLUZE TABLET 240MG	4	PA
LAZCLUZE TABLET 80MG	4	QL (60 EA per 30 days) PA
<i>leucovorin calcium injection 350mg, 500mg</i>	1	
<i>leucovorin calcium tablet 10mg, 15mg, 25mg, 5mg</i>	1	
<i>levoleucovorin injection 50mg</i>	4	
LONSURF TABLET 6.14MG; 15MG, 8.19MG; 20MG	4	PA
LYMPHIR INJECTION 300MCG	4	PA
LYNOZYFIC INJECTION 200MG/10ML, 5MG/2.5ML	4	PA
LYSODREN TABLET 500MG	4	
<i>mitomycin injection 20mg, 40mg, 5mg</i>	4	
MODEYSO CAPSULE 125MG	4	PA
MUTAMYCIN INJECTION 20MG, 40MG, 5MG	4	
OGSIVEO TABLET 100MG, 150MG, 50MG	4	PA
OJEMDA SUSPENSION RECONSTITUTED 25MG/ML	4	PA
OJEMDA TABLET 100MG	4	PA
ONCASPAR INJECTION 750UNIT/ML	4	
ONUREG TABLET 200MG, 300MG	4	PA
PACLITAXEL PROTEIN-BOUND PARTICLES INJECTION 900MG; 100MG	4	
<i>paclitaxel protein-bound particles injection 0; 100mg, 900mg; 100mg</i>	4	
PEMETREXED INJECTION 100MG/4ML	4	
PHESGO INJECTION 2000UNIT/ML; 60MG/ML; 60MG/ML, 2000UNIT/ML; 80MG/ML; 40MG/ML	4	PA
PHOTOFRIN INJECTION 75MG	4	
PROLEUKIN INJECTION 22000000UNIT	4	
REVUFORJ TABLET 110MG, 160MG, 25MG	4	PA
<i>romidepsin injection 10mg</i>	4	PA
RYLAZE INJECTION 10MG/0.5ML	4	
RYTELO INJECTION 188MG, 47MG	4	PA
TALVEY INJECTION 3MG/1.5ML, 40MG/ML	4	PA
TECVAYLI INJECTION 153MG/1.7ML, 30MG/3ML	4	PA
TICE BCG INJECTION 50MG	3	
TRISENOX INJECTION 12MG/6ML	4	
<i>valrubicin injection 40mg/ml</i>	4	
VALSTAR INJECTION 40MG/ML	4	
VELCADE INJECTION 3.5MG	4	PA
VIDAZA INJECTION 100MG	4	

Drug Name	Drug Tier	Requirements/Limits
<i>vinblastine sulfate injection 1mg/ml</i>	1	B/D
<i>vincristine sulfate injection 1mg/ml</i>	1	B/D
VONJO CAPSULE 100MG	4	PA
ZALTRAP INJECTION 100MG/4ML, 200MG/8ML	4	PA
ZOLINZA CAPSULE 100MG	4	PA
<b>Antineoplastics</b>		
OPDUALAG INJECTION 240MG/20ML; 80MG/20ML	4	PA
<b>Aromatase Inhibitors, 3rd Generation</b>		
<i>anastrozole tablet 1mg</i>	1	
ARIMIDEX TABLET 1MG	3	
AROMASIN TABLET 25MG	4	
<i>exemestane tablet 25mg</i>	1	
<i>letrozole tablet 2.5mg</i>	1	
<b>Enzyme Inhibitors</b>		
AVMAPKI FAKZYNJA CO-PACK THERAPY PACK 0.8MG; 200MG	4	PA
CAMPTOSAR INJECTION 100MG/5ML, 300MG/15ML, 40MG/2ML	4	
ETOPOPHOS INJECTION 100MG	4	
<i>etoposide injection 1gm/50ml, 500mg/25ml</i>	1	
HYCAMTIN INJECTION 4MG	4	
<i>irinotecan hydrochloride injection 100mg/5ml, 300mg/15ml, 40mg/2ml</i>	4	
<i>irinotecan injection 500mg/25ml</i>	4	
KYPROLIS INJECTION 10MG, 30MG, 60MG	4	PA
ONIVYDE INJECTION 43MG/10ML	4	
<i>topotecan hcl injection 4mg</i>	4	
<i>topotecan hydrochloride injection 4mg/4ml</i>	4	
<b>Molecular Target Inhibitors</b>		
AFINITOR DISPERZ TABLET SOLUBLE 2MG, 3MG, 5MG	4	PA
AFINITOR TABLET 10MG, 2.5MG, 5MG, 7.5MG	4	QL (30 EA per 30 days) PA
ALECENSA CAPSULE 150MG	4	PA
ALIQOPA INJECTION 60MG	4	PA
ALUNBRIG TABLET THERAPY PACK 0	4	QL (60 EA per 365 days) PA
ALUNBRIG TABLET 30MG	4	QL (120 EA per 30 days) PA
ALUNBRIG TABLET 180MG, 90MG	4	QL (30 EA per 30 days) PA
AUGTYRO CAPSULE 160MG, 40MG	4	PA
AYVAKIT TABLET 100MG, 200MG, 25MG, 300MG, 50MG	4	QL (30 EA per 30 days) PA
BALVERSA TABLET 3MG, 4MG, 5MG	4	PA
BELEODAQ INJECTION 500MG	4	PA
BOSULIF CAPSULE 100MG, 50MG	4	PA
BOSULIF TABLET 100MG, 400MG, 500MG	4	PA
BRAFTOVI CAPSULE 75MG	4	PA
BRUKINSA CAPSULE 80MG	4	PA
BRUKINSA TABLET 160MG	4	PA
CABOMETYX TABLET 40MG, 60MG	4	PA
CABOMETYX TABLET 20MG	4	QL (30 EA per 30 days) PA
CALQUENCE CAPSULE 100MG	4	PA
CALQUENCE TABLET 100MG	4	PA
CAPRELSA TABLET 300MG	4	PA
CAPRELSA TABLET 100MG	4	QL (60 EA per 30 days) PA

Drug Name	Drug Tier	Requirements/Limits
COMETRIQ KIT 0, 20MG	4	PA
COPIKTRA CAPSULE 15MG, 25MG	4	PA
COTELLIC TABLET 20MG	4	PA
DANZITEN TABLET 71MG, 95MG	4	PA
<i>dasatinib tablet 100mg, 140mg, 20mg, 50mg, 70mg, 80mg</i>	4	PA
DAURISMO TABLET 100MG, 25MG	4	PA
ENSACOVE CAPSULE 100MG, 25MG	4	PA
ERIVEDGE CAPSULE 150MG	4	PA
<i>erlotinib hydrochloride tablet 100mg, 150mg, 25mg</i>	1	PA
<i>everolimus tablet soluble 2mg, 3mg, 5mg</i>	4	PA
<i>everolimus tablet 10mg, 2.5mg, 5mg, 7.5mg</i>	4	QL (30 EA per 30 days) PA
EXKIVITY CAPSULE 40MG	4	
<i>fludarabine phosphate injection 50mg/2ml, 50mg</i>	4	
FOTIVDA CAPSULE 0.89MG, 1.34MG	4	PA
FRUZAQLA CAPSULE 1MG, 5MG	4	PA
FYARRO INJECTION 100MG	4	PA
GAVRETO CAPSULE 100MG	4	PA
<i>gefitinib tablet 250mg</i>	4	PA
GILOTRIF TABLET 20MG, 30MG, 40MG	4	QL (30 EA per 30 days) PA
GLEEVEC TABLET 100MG, 400MG	4	PA
GOMEKLI CAPSULE 1MG, 2MG	4	PA
GOMEKLI TABLET SOLUBLE 1MG	4	PA
HERNEXEOS TABLET 60MG	4	PA
HYRNUO TABLET 10MG	4	PA
IBRANCE CAPSULE 100MG, 125MG, 75MG	4	PA
IBTROZI CAPSULE 200MG	4	PA
ICLUSIG TABLET 30MG, 45MG	4	PA
ICLUSIG TABLET 10MG, 15MG	4	QL (30 EA per 30 days) PA
IDHIFA TABLET 100MG, 50MG	4	QL (30 EA per 30 days) PA
<i>imatinib mesylate tablet 100mg, 400mg</i>	1	PA
IMBRUVICA CAPSULE 140MG	4	QL (120 EA per 30 days) PA
IMBRUVICA CAPSULE 70MG	4	QL (28 EA per 28 days) PA
IMBRUVICA SUSPENSION 70MG/ML	4	PA
IMBRUVICA TABLET 420MG, 560MG	4	PA
IMBRUVICA TABLET 140MG, 280MG	4	QL (28 EA per 28 days) PA
IMKELDI SOLUTION 80MG/ML	4	PA
INLYTA TABLET 1MG, 5MG	4	PA
INQOVI TABLET 100MG; 35MG	4	PA
IRESSA TABLET 250MG	4	PA
JAKAFI TABLET 15MG, 20MG, 25MG, 5MG	4	PA
JAKAFI TABLET 10MG	4	QL (60 EA per 30 days) PA
JAYPIRCA TABLET 100MG	4	PA
JAYPIRCA TABLET 50MG	4	QL (30 EA per 30 days) PA
KISQALI TABLET THERAPY PACK 200MG	4	PA
KOSELUGO CAPSULE SPRINKLE 5MG, 7.5MG	4	PA
KOSELUGO CAPSULE 10MG, 25MG	4	PA
KRAZATI TABLET 200MG	4	PA
<i>lapatinib ditosylate tablet 250mg</i>	4	PA
LENVIMA 10 MG DAILY DOSE CAPSULE THERAPY PACK 10MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
LENVIMA 12MG DAILY DOSE CAPSULE THERAPY PACK 4MG	4	PA
LENVIMA 14 MG DAILY DOSE CAPSULE THERAPY PACK 0	4	PA
LENVIMA 18 MG DAILY DOSE CAPSULE THERAPY PACK 0	4	PA
LENVIMA 20 MG DAILY DOSE CAPSULE THERAPY PACK 10MG	4	PA
LENVIMA 24 MG DAILY DOSE CAPSULE THERAPY PACK 0	4	PA
LENVIMA 4 MG DAILY DOSE CAPSULE THERAPY PACK 4MG	4	PA
LENVIMA 8 MG DAILY DOSE CAPSULE THERAPY PACK 4MG	4	PA
LORBRENA TABLET 100MG, 25MG	4	PA
LUMAKRAS TABLET 120MG, 240MG, 320MG	4	PA
LYNPARZA TABLET 100MG, 150MG	4	PA
LYTGOBI TABLET THERAPY PACK 4MG	4	PA
MEKINIST SOLUTION RECONSTITUTED 0.05MG/ML	4	PA
MEKINIST TABLET 0.5MG, 2MG	4	PA
MEKTOVI TABLET 15MG	4	PA
NERLYNX TABLET 40MG	4	QL (180 EA per 30 days) PA
NEXAVAR TABLET 200MG	4	PA
<i>nilotinib hydrochloride capsule 150mg, 200mg, 50mg</i>	4	PA
NILOTINIB CAPSULE 150MG, 200MG, 50MG	4	PA
NINLARO CAPSULE 2.3MG, 3MG, 4MG	4	PA
ODOMZO CAPSULE 200MG	4	PA
OJJAARA TABLET 100MG, 200MG	4	PA
OJJAARA TABLET 150MG	4	QL (30 EA per 30 days) PA
PAZOPANIB HYDROCHLORIDE TABLET 400MG	4	PA
<i>pazopanib hydrochloride tablet 200mg</i>	4	PA
PEMAZYRE TABLET 13.5MG, 4.5MG, 9MG	4	QL (30 EA per 30 days) PA
PHYRAGO TABLET 100MG, 140MG, 20MG, 50MG, 70MG, 80MG	4	PA
PIQRAY 200MG DAILY DOSE TABLET THERAPY PACK 200MG	4	PA
PIQRAY 250MG DAILY DOSE TABLET THERAPY PACK 0	4	PA
PIQRAY 300MG DAILY DOSE TABLET THERAPY PACK 150MG	4	PA
QINLOCK TABLET 50MG	4	PA
RETEVMO CAPSULE 40MG, 80MG	4	PA
RETEVMO TABLET 120MG, 160MG	4	PA
RETEVMO TABLET 80MG	4	QL (60 EA per 30 days) PA
RETEVMO TABLET 40MG	4	QL (90 EA per 30 days) PA
REZLIDHIA CAPSULE 150MG	4	PA
ROMVIMZA CAPSULE 14MG, 20MG, 30MG	4	PA
ROZLYTREK CAPSULE 100MG, 200MG	4	PA
ROZLYTREK PACKET 50MG	4	PA
RUBRACA TABLET 250MG, 300MG	4	PA
RUBRACA TABLET 200MG	4	QL (120 EA per 30 days) PA
RYDAPT CAPSULE 25MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
SCEMBLIX TABLET 100MG	4	QL (120 EA per 30 days) PA
SCEMBLIX TABLET 40MG	4	QL (240 EA per 30 days) PA
SCEMBLIX TABLET 20MG	4	QL (60 EA per 30 days) PA
<i>sorafenib tosylate tablet 200mg</i>	4	PA
<i>sorafenib tablet 200mg</i>	4	PA
SPRYCEL TABLET 100MG, 140MG, 20MG, 50MG, 70MG, 80MG	4	PA
STIVARGA TABLET 40MG	4	PA
<i>sunitinib malate capsule 12.5mg, 25mg, 37.5mg, 50mg</i>	4	PA
SUTENT CAPSULE 12.5MG, 25MG, 37.5MG, 50MG	4	PA
TABRECTA TABLET 150MG, 200MG	4	QL (120 EA per 30 days) PA
TAFINLAR CAPSULE 50MG, 75MG	4	PA
TAFINLAR TABLET SOLUBLE 10MG	4	PA
TAGRISSE TABLET 80MG	4	PA
TAGRISSE TABLET 40MG	4	QL (30 EA per 30 days) PA
TALZENNA CAPSULE 0.1MG, 0.25MG, 0.35MG, 0.5MG, 0.75MG, 1MG	4	PA
TARCEVA TABLET 100MG	4	PA
TASIGNA CAPSULE 150MG, 200MG, 50MG	4	PA
TAZVERIK TABLET 200MG	4	PA
<i>temsirolimus injection 25mg/ml</i>	4	
TEPMETKO TABLET 225MG	4	PA
TIBSOVO TABLET 250MG	4	PA
TORISEL INJECTION 25MG/ML	4	
<i>torpenz tablet 10mg, 2.5mg, 5mg, 7.5mg</i>	4	QL (30 EA per 30 days) PA
TRUQAP TABLET THERAPY PACK 160MG, 200MG	4	PA
TRUQAP TABLET 160MG, 200MG	4	PA
TUKYSA TABLET 150MG, 50MG	4	PA
TURALIO CAPSULE 125MG	4	PA
TYKERB TABLET 250MG	4	PA
VANFLYTA TABLET 17.7MG, 26.5MG	4	PA
VENCLEXTA STARTING PACK TABLET THERAPY PACK 0	4	PA
VENCLEXTA TABLET 10MG	2	PA
VENCLEXTA TABLET 100MG, 50MG	4	PA
VERZENIO TABLET 100MG, 150MG, 200MG, 50MG	4	PA
VIJOICE PACKET 50MG	4	QL (28 EA per 28 days) PA
VIJOICE TABLET THERAPY PACK 125MG, 50MG	4	QL (28 EA per 28 days) PA
VIJOICE TABLET THERAPY PACK 0	4	QL (56 EA per 28 days) PA
VITRAKVI CAPSULE 100MG, 25MG	4	PA
VITRAKVI SOLUTION 20MG/ML	4	PA
VIZIMPRO TABLET 15MG, 30MG, 45MG	4	PA
VOTRIENT TABLET 200MG	4	PA
XALKORI CAPSULE SPRINKLE 150MG, 20MG, 50MG	4	PA
XALKORI CAPSULE 200MG, 250MG	4	PA
XOSPATA TABLET 40MG	4	PA
XPOVIO 60 MG TWICE WEEKLY TABLET THERAPY PACK 4 20MG	4	PA
XPOVIO 80 MG TWICE WEEKLY TABLET THERAPY PACK 4 20MG	4	PA
XPOVIO TABLET THERAPY PACK 10MG, 40MG, 50MG, 60MG, 80MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
ZEJULA TABLET 200MG, 300MG	4	PA
ZEJULA TABLET 100MG	4	QL (30 EA per 30 days) PA
ZELBORAF TABLET 240MG	4	PA
ZYDELIG TABLET 100MG, 150MG	4	PA
ZYKADIA TABLET 150MG	4	PA
<b>Monoclonal Antibodies/Antibody-Drug Conjugates</b>		
ADCETRIS INJECTION 50MG	4	PA
ALYMSYS INJECTION 100MG/4ML, 400MG/16ML	4	PA
ARZERRA INJECTION 1000MG/50ML, 100MG/5ML	4	PA
AVASTIN INJECTION 100MG/4ML, 400MG/16ML	4	PA
BAVENCIO INJECTION 200MG/10ML	4	PA
BESPONSA INJECTION 0.9MG	4	PA
BIZENGRI INJECTION 375MG/18.75ML	4	PA
BLENREP INJECTION 70MG	4	PA
BLINCYTO INJECTION 35MCG	4	PA
CYRAMZA INJECTION 100MG/10ML, 500MG/50ML	4	PA
DANYELZA INJECTION 40MG/10ML	4	PA
DARZALEX FASPRO INJECTION 1800MG/15ML; 30000UNIT/15ML	4	PA
DARZALEX INJECTION 100MG/5ML, 400MG/20ML	4	PA
DATROWAY INJECTION 100MG	4	PA
ELAHERE INJECTION 100MG/20ML	4	PA
EMPLICITI INJECTION 300MG, 400MG	4	PA
EMRELIS INJECTION 100MG, 20MG	4	PA
ENHERTU INJECTION 100MG	4	PA
ERBITUX INJECTION 100MG/50ML, 200MG/100ML	4	PA
GAZYVA INJECTION 1000MG/40ML	4	PA
HERCEPTIN HYLECTA INJECTION 10000UNIT/5ML; 600MG/5ML	4	PA
HERCEPTIN INJECTION 150MG	4	PA
HERCESSI INJECTION 150MG, 420MG	4	PA
HERZUMA INJECTION 150MG, 420MG	4	PA
IMFINZI INJECTION 120MG/2.4ML, 500MG/10ML	4	PA
IMJUDO INJECTION 25MG/1.25ML, 300MG/15ML	4	PA
JEMPERLI INJECTION 500MG/10ML	4	PA
JOBVNE INJECTION 100MG/4ML, 400MG/16ML	4	PA
KADCYLA INJECTION 100MG, 160MG	4	PA
KANJINTI INJECTION 150MG, 420MG	4	PA
KEYTRUDA QLEX INJECTION 4800UNIT/2.4ML; 395MG/2.4ML, 9600UNIT/4.8ML; 790MG/4.8ML	4	PA
KEYTRUDA INJECTION 100MG/4ML	4	PA
LIBTAYO INJECTION 350MG/7ML	4	PA
LOQTORZI INJECTION 240MG/6ML	4	PA
LUNSUMIO VELO INJECTION 45MG/ML, 5MG/0.5ML	4	PA
LUNSUMIO INJECTION 1MG/ML, 30MG/30ML	4	PA
MARGENZA INJECTION 250MG/10ML	4	PA
MONJUVI INJECTION 200MG	4	PA
MVASI INJECTION 100MG/4ML, 400MG/16ML	4	PA
MYLOTARG INJECTION 4.5MG	4	PA
OGIVRI INJECTION 150MG, 420MG	4	PA
ONTRUZANT INJECTION 150MG, 420MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
OPDIVO INJECTION 100MG/10ML, 120MG/12ML, 240MG/24ML, 40MG/4ML	4	PA
PADCEV INJECTION 20MG, 30MG	4	PA
PERJETA INJECTION 420MG/14ML	4	PA
POLIVY INJECTION 140MG, 30MG	4	PA
PORTRAZZA INJECTION 800MG/50ML	4	PA
POTELIGEO INJECTION 20MG/5ML	4	PA
RIABNI INJECTION 100MG/10ML, 500MG/50ML	4	PA
RITUXAN HYCELA INJECTION 23400UNT/11.7ML; 1400MG/11.7ML, 26800UNT/13.4ML; 1600MG/13.4ML	4	PA
RITUXAN INJECTION 100MG/10ML, 500MG/50ML	4	PA
RUXIENCE INJECTION 100MG/10ML, 500MG/50ML	4	PA
RYBREVANT FASPRO INJECTION 1600MG/10ML; 20000UNIT/10ML, 2240MG/14ML; 28000UNIT/14ML	4	PA
RYBREVANT INJECTION 350MG/7ML	4	PA
SARCLISA INJECTION 100MG/5ML, 500MG/25ML	4	PA
TECENTRIQ HYBREZA INJECTION 1875MG/15ML; 30000UNIT/15ML	4	PA
TECENTRIQ INJECTION 1200MG/20ML, 840MG/14ML	4	PA
TEVIMBRA INJECTION 100MG/10ML	4	PA
TIVDAK INJECTION 40MG	4	PA
TRAZIMERA INJECTION 150MG, 420MG	4	PA
TRODELVY INJECTION 180MG	4	PA
TRUXIMA INJECTION 100MG/10ML, 500MG/50ML	4	PA
UNITUXIN INJECTION 17.5MG/5ML	4	PA
UNLOXCYT INJECTION 300MG/5ML	4	PA
VECTIBIX INJECTION 100MG/5ML, 400MG/20ML	4	
VEGZELMA INJECTION 100MG/4ML, 400MG/16ML	4	PA
VYLOY INJECTION 100MG, 300MG	4	PA
YERVOY INJECTION 200MG/40ML, 50MG/10ML	4	PA
ZEVALIN Y-90 INJECTION 3.2MG/2ML	4	
ZIIHERA INJECTION 300MG	4	PA
ZIRABEV INJECTION 100MG/4ML, 400MG/16ML	4	PA
ZYNLONTA INJECTION 10MG	4	PA
ZYNYZ INJECTION 500MG/20ML	4	PA
<b>Retinoids</b>		
<i>bexarotene capsule 75mg</i>	4	PA
<i>bexarotene gel 1%</i>	4	PA
PANRETIN GEL 0.1%	4	
TARGRETIN CAPSULE 75MG	4	PA
TARGRETIN GEL 1%	4	PA
<i>tretinoin capsule 10mg</i>	4	
<b>Treatment Adjuncts</b>		
<i>dexrazoxane hydrochloride injection 250mg, 500mg</i>	4	
<i>dexrazoxane injection 250mg, 500mg</i>	4	
ELITEK INJECTION 1.5MG, 7.5MG	4	
KHAPZORY INJECTION 175MG	4	
<i>mesna tablet 400mg</i>	4	
MESNEX TABLET 400MG	4	
VORANIGO TABLET 40MG	4	PA
VORANIGO TABLET 10MG	4	QL (60 EA per 30 days) PA

Drug Name	Drug Tier	Requirements/Limits
VORAXAZE INJECTION 1000UNIT	4	
<b>Antiparasitics</b>		
<b>Anthelmintics</b>		
<i>albendazole tablet 200mg</i>	1	
EMVERM TABLET CHEWABLE 100MG	3	
<i>ivermectin tablet 3mg, 6mg</i>	1	PA
<i>praziquantel tablet 600mg</i>	1	
STROMECTOL TABLET 3MG	3	PA
<b>Antiprotozoals</b>		
ALINIA SUSPENSION RECONSTITUTED 100MG/5ML	4	
ALINIA TABLET 500MG	4	
ARTESUNATE INJECTION 110MG	4	
<i>atovaquone/proguanil hcl tablet 62.5mg; 25mg</i>	1	
<i>atovaquone/proguanil hydrochloride tablet 250mg; 100mg</i>	1	
<i>atovaquone suspension 750mg/5ml</i>	1	
BENZNIDAZOLE TABLET 100MG, 12.5MG	2	
<i>chloroquine phosphate tablet 250mg, 500mg</i>	1	
COARTEM TABLET 20MG; 120MG	3	
DARAPRIM TABLET 25MG	4	PA
<i>hydroxychloroquine sulfate tablet 100mg, 200mg, 300mg, 400mg</i>	1	
<i>mefloquine hydrochloride tablet 250mg</i>	1	
MEPRON SUSPENSION 750MG/5ML	4	
NEBUPENT SOLUTION RECONSTITUTED 300MG	3	B/D
<i>nitazoxanide tablet 500mg</i>	4	
<i>pentamidine isethionate injection 300mg</i>	1	
<i>pentamidine isethionate inhalation solution reconstituted 300mg</i>	1	B/D
PLAQUENIL TABLET 200MG	3	
<i>primaquine phosphate tablet 26.3mg</i>	1	
<i>pyrimethamine tablet 25mg</i>	4	PA
QUALAQUIN CAPSULE 324MG	3	PA
<i>quinine sulfate capsule 324mg</i>	1	PA
SOVUNA TABLET 200MG, 300MG	3	ST
<b>Antiparkinson Agents</b>		
<b>Anticholinergics</b>		
<i>benztropine mesylate tablet 0.5mg, 1mg, 2mg</i>	1	
<i>trihexyphenidyl hcl solution 0.4mg/ml</i>	1	
<i>trihexyphenidyl hydrochloride tablet 2mg, 5mg</i>	1	
<b>Antiparkinson Agents, Other</b>		
<i>carbidopa/levodopa/entacapone tablet 12.5mg; 200mg; 50mg, 18.75mg; 200mg; 75mg, 25mg; 200mg; 100mg, 31.25mg; 200mg; 125mg, 37.5mg; 200mg; 150mg, 50mg; 200mg; 200mg</i>	1	
COMTAN TABLET 200MG	3	
<i>entacapone tablet 200mg</i>	1	
GOCOVRI CAPSULE EXTENDED RELEASE 24 HOUR 137MG, 68.5MG	4	PA
NOURIANZ TABLET 20MG, 40MG	4	PA
ONGENTYS CAPSULE 25MG, 50MG	3	ST

Drug Name	Drug Tier	Requirements/Limits
OSMOLEX ER TABLET EXTENDED RELEASE 24 HOUR 129MG, 193MG	3	
STALEVO 100 TABLET 25MG; 200MG; 100MG	4	
STALEVO 125 TABLET 31.25MG; 200MG; 125MG	4	
STALEVO 150 TABLET 37.5MG; 200MG; 150MG	4	
STALEVO 200 TABLET 50MG; 200MG; 200MG	4	
TASMAR TABLET 100MG	4	QL (180 EA per 30 days)
<i>tolcapone tablet 100mg</i>	4	QL (180 EA per 30 days)
<b>Dopamine Agonists</b>		
APOKYN INJECTION 30MG/3ML	4	QL (90 ML per 30 days) PA
<i>apomorphine hydrochloride injection 30mg/3ml</i>	4	QL (90 ML per 30 days) PA
<i>bromocriptine mesylate capsule 5mg</i>	3	
<i>bromocriptine mesylate tablet 2.5mg</i>	3	
NEUPRO PATCH 24 HOUR 1MG/24HR, 2MG/24HR, 3MG/24HR, 4MG/24HR, 6MG/24HR, 8MG/24HR	3	
<i>pramipexole dihydrochloride er tablet extended release 24 hour 0.375mg, 0.75mg, 1.5mg, 2.25mg, 3.75mg, 3mg, 4.5mg</i>	1	
<i>pramipexole dihydrochloride tablet 0.125mg, 0.25mg, 0.5mg, 0.75mg, 1.5mg, 1mg</i>	1	
<i>ropinirole er tablet extended release 24 hour 12mg, 2mg, 4mg, 6mg, 8mg</i>	1	
<i>ropinirole hcl tablet 0.5mg, 1mg, 2mg, 4mg, 5mg</i>	1	
<i>ropinirole hydrochloride tablet 0.25mg, 3mg</i>	1	
<b>Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors</b>		
CARBIDOPA/LEVODOPA ER CAPSULE EXTENDED RELEASE 23.75MG; 95MG, 36.25MG; 145MG, 48.75MG; 195MG, 61.25MG; 245MG	3	ST
<i>carbidopa/levodopa er tablet extended release 25mg; 100mg, 50mg; 200mg</i>	1	
<i>carbidopa/levodopa odt tablet disintegrating 10mg; 100mg, 25mg; 100mg, 25mg; 250mg</i>	1	
<i>carbidopa/levodopa tablet 10mg; 100mg, 25mg; 100mg, 25mg; 250mg</i>	1	
<i>carbidopa tablet 25mg</i>	1	
DHIVY TABLET 25MG; 100MG	3	ST
DUOPA SUSPENSION 4.63MG/ML; 20MG/ML	4	PA
INBRIJA CAPSULE 42MG	4	PA
LODOSYN TABLET 25MG	4	
RYTARY CAPSULE EXTENDED RELEASE 23.75MG; 95MG, 36.25MG; 145MG, 48.75MG; 195MG, 61.25MG; 245MG	3	ST
<b>Monoamine Oxidase B (MAO-B) Inhibitors</b>		
AZILECT TABLET 0.5MG, 1MG	3	
<i>rasagiline mesylate tablet 0.5mg, 1mg</i>	1	
<i>selegiline hcl capsule 5mg</i>	1	
<i>selegiline hcl tablet 5mg</i>	1	
XADAGO TABLET 100MG, 50MG	4	QL (30 EA per 30 days) ST
ZELAPAR TABLET DISINTEGRATING 1.25MG	4	
<b>Antipsychotics</b>		
<b>1st Generation/Typical</b>		

Drug Name	Drug Tier	Requirements/Limits
<i>chlorpromazine hcl tablet 100mg, 10mg, 200mg, 25mg, 50mg</i>	1	
<i>chlorpromazine hydrochloride concentrate 100mg/ml, 30mg/ml</i>	1	
<i>chlorpromazine hydrochloride injection 50mg/2ml</i>	1	
<i>chlorpromazine hydrochloride tablet 100mg, 10mg, 200mg, 25mg, 50mg</i>	1	
<i>fluphenazine decanoate injection 25mg/ml</i>	1	
<i>fluphenazine hcl concentrate 5mg/ml</i>	1	
<i>fluphenazine hydrochloride elixir 2.5mg/5ml</i>	1	
<i>fluphenazine hydrochloride injection 2.5mg/ml</i>	1	
<i>fluphenazine hydrochloride tablet 10mg, 1mg, 2.5mg, 5mg</i>	1	
<i>haloperidol decanoate injection 100mg/ml, 50mg/ml</i>	1	
<i>haloperidol lactate injection 5mg/ml</i>	1	
<i>haloperidol concentrate 2mg/ml</i>	1	
<i>haloperidol tablet 0.5mg, 10mg, 1mg, 20mg, 2mg, 5mg</i>	1	
<i>loxapine succinate capsule 25mg, 50mg, 5mg</i>	1	
<i>loxapine capsule 10mg, 25mg, 50mg, 5mg</i>	1	
<i>molindone hydrochloride tablet 10mg, 25mg, 5mg</i>	1	
<i>perphenazine tablet 16mg, 2mg, 4mg, 8mg</i>	1	
<i>thioridazine hydrochloride tablet 100mg, 10mg, 25mg, 50mg</i>	1	
<i>thiothixene capsule 10mg, 1mg, 2mg, 5mg</i>	1	
<i>trifluoperazine hcl tablet 10mg, 1mg, 2mg, 5mg</i>	1	
<i>trifluoperazine hydrochloride tablet 1mg</i>	1	
<b>2nd Generation/Atypical</b>		
ABILIFY ASIMTUFII INJECTION 720MG/2.4ML, 960MG/3.2ML	4	
ABILIFY MAINTENA INJECTION 300MG, 400MG	4	
ABILIFY MYCITE MAINTENANCE KIT TABLET THERAPY PACK 10MG, 15MG, 20MG, 2MG, 30MG, 5MG	4	QL (30 EA per 30 days) ST
ABILIFY MYCITE STARTER KIT TABLET THERAPY PACK 15MG, 20MG, 2MG, 30MG, 5MG	4	QL (60 EA per 365 days) ST
ABILIFY MYCITE STARTER KIT TABLET THERAPY PACK 10MG	4	ST
ABILIFY TABLET 10MG, 15MG, 20MG, 2MG, 30MG, 5MG	4	QL (30 EA per 30 days)
<i>aripiprazole odt tablet disintegrating 10mg, 15mg</i>	1	QL (60 EA per 30 days)
<i>aripiprazole solution 1mg/ml</i>	1	QL (750 ML per 30 days)
<i>aripiprazole tablet 10mg, 15mg, 20mg, 2mg, 30mg, 5mg</i>	1	QL (30 EA per 30 days)
ARISTADA INITIO INJECTION 675MG/2.4ML	4	
ARISTADA INJECTION 1064MG/3.9ML, 441MG/1.6ML, 662MG/2.4ML, 882MG/3.2ML	4	
<i>asenapine maleate sl tablet sublingual 10mg, 2.5mg, 5mg</i>	1	QL (60 EA per 30 days)
CAPLYTA CAPSULE 10.5MG, 21MG, 42MG	4	QL (30 EA per 30 days) PA
FANAPT TITRATION PACK A TABLET 0	3	QL (16 EA per 365 days) ST
FANAPT TITRATION PACK B TABLET 0	3	QL (24 EA per 365 days) ST
FANAPT TITRATION PACK C TABLET 0	3	QL (16 EA per 365 days) ST
FANAPT TABLET 10MG, 12MG, 1MG, 2MG, 4MG, 6MG, 8MG	4	QL (60 EA per 30 days) ST
GEODON CAPSULE 20MG	3	QL (60 EA per 30 days)
GEODON CAPSULE 40MG, 60MG, 80MG	4	QL (60 EA per 30 days)
GEODON INJECTION 20MG	3	QL (60 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
INVEGA HAFYERA INJECTION 1092MG/3.5ML, 1560MG/5ML	4	ST
INVEGA SUSTENNA INJECTION 39MG/0.25ML	3	
INVEGA SUSTENNA INJECTION 117MG/0.75ML, 156MG/ML, 234MG/1.5ML, 78MG/0.5ML	4	
INVEGA TRINZA INJECTION 273MG/0.88ML, 410MG/1.32ML, 546MG/1.75ML, 819MG/2.63ML	4	
INVEGA TABLET EXTENDED RELEASE 24 HOUR 3MG, 9MG	3	QL (30 EA per 30 days)
INVEGA TABLET EXTENDED RELEASE 24 HOUR 6MG	3	QL (60 EA per 30 days)
LATUDA TABLET 120MG, 20MG, 40MG, 60MG	4	QL (30 EA per 30 days)
LATUDA TABLET 80MG	4	QL (60 EA per 30 days)
<i>lurasidone hydrochloride tablet 120mg, 20mg, 40mg, 60mg</i>	1	QL (30 EA per 30 days)
<i>lurasidone hydrochloride tablet 80mg</i>	1	QL (60 EA per 30 days)
LYBALVI TABLET 10MG; 10MG, 15MG; 10MG, 20MG; 10MG, 5MG; 10MG	4	QL (30 EA per 30 days) ST
NUPLAZID CAPSULE 34MG	4	PA
NUPLAZID TABLET 10MG	4	PA
<i>olanzapine odt tablet disintegrating 10mg, 15mg, 20mg, 5mg</i>	1	QL (30 EA per 30 days)
<i>olanzapine injection 10mg</i>	1	
<i>olanzapine tablet 10mg, 15mg, 2.5mg, 20mg, 5mg, 7.5mg</i>	1	QL (30 EA per 30 days)
OPIPZA FILM 2MG	4	QL (30 EA per 30 days) PA
OPIPZA FILM 10MG, 5MG	4	QL (90 EA per 30 days) PA
<i>paliperidone er tablet extended release 24 hour 1.5mg, 3mg, 9mg</i>	1	QL (30 EA per 30 days)
<i>paliperidone er tablet extended release 24 hour 6mg</i>	1	QL (60 EA per 30 days)
PERSERIS INJECTION 120MG, 90MG	4	
<i>quetiapine fumarate er tablet extended release 24 hour 150mg, 300mg, 400mg, 50mg</i>	1	QL (60 EA per 30 days)
<i>quetiapine fumarate er tablet extended release 24 hour 200mg</i>	1	QL (90 EA per 30 days)
<i>quetiapine fumarate tablet 300mg, 400mg</i>	1	QL (60 EA per 30 days)
<i>quetiapine fumarate tablet 100mg, 150mg, 200mg, 25mg, 50mg</i>	1	QL (90 EA per 30 days)
REXULTI TABLET 0.25MG, 0.5MG, 1MG, 2MG, 3MG, 4MG	4	QL (30 EA per 30 days)
RISPERDAL CONSTA INJECTION 12.5MG, 25MG	3	
RISPERDAL CONSTA INJECTION 37.5MG, 50MG	4	
RISPERDAL SOLUTION 1MG/ML	4	QL (240 ML per 30 days)
RISPERDAL TABLET 0.5MG, 1MG, 4MG	3	QL (60 EA per 30 days)
RISPERDAL TABLET 2MG, 3MG	4	QL (60 EA per 30 days)
<i>risperidone er injection 12.5mg, 25mg</i>	3	
<i>risperidone er injection 37.5mg, 50mg</i>	4	
<i>risperidone odt tablet disintegrating 0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg</i>	1	QL (60 EA per 30 days)
<i>risperidone solution 1mg/ml</i>	1	QL (240 ML per 30 days)
<i>risperidone tablet 0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg</i>	1	QL (60 EA per 30 days)
SAPHRIS TABLET SUBLINGUAL 10MG, 2.5MG, 5MG	3	QL (60 EA per 30 days)
SECUADO PATCH 24 HOUR 3.8MG/24HR, 5.7MG/24HR, 7.6MG/24HR	4	QL (30 EA per 30 days) ST
SEROQUEL XR TABLET EXTENDED RELEASE 24 HOUR 150MG, 300MG, 400MG, 50MG	3	QL (60 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
SEROQUEL XR TABLET EXTENDED RELEASE 24 HOUR 200MG	3	QL (90 EA per 30 days)
SEROQUEL TABLET 300MG, 400MG	3	QL (60 EA per 30 days)
SEROQUEL TABLET 100MG, 200MG, 25MG, 50MG	3	QL (90 EA per 30 days)
UZEDY INJECTION 100MG/0.28ML, 125MG/0.35ML, 150MG/0.42ML, 200MG/0.56ML, 250MG/0.7ML, 50MG/0.14ML, 75MG/0.21ML	4	ST
VRAYLAR CAPSULE 0.5MG, 0.75MG, 1.5MG, 3MG, 4.5MG, 6MG	4	QL (30 EA per 30 days)
<i>ziprasidone hcl capsule 20mg, 40mg, 60mg, 80mg</i>	1	QL (60 EA per 30 days)
<i>ziprasidone mesylate injection 20mg</i>	1	QL (60 EA per 30 days)
ZYPREXA RELPREVV INJECTION 210MG	3	
ZYPREXA RELPREVV INJECTION 300MG, 405MG	4	
ZYPREXA ZYDIS TABLET DISINTEGRATING 10MG, 5MG	3	QL (30 EA per 30 days)
ZYPREXA ZYDIS TABLET DISINTEGRATING 15MG, 20MG	4	QL (30 EA per 30 days)
ZYPREXA TABLET 10MG, 2.5MG, 5MG, 7.5MG	3	QL (30 EA per 30 days)
ZYPREXA TABLET 15MG, 20MG	4	QL (30 EA per 30 days)
<b>Treatment-Resistant</b>		
<i>clozapine odt tablet disintegrating 200mg</i>	1	QL (120 EA per 30 days)
<i>clozapine odt tablet disintegrating 150mg</i>	1	QL (180 EA per 30 days)
<i>clozapine odt tablet disintegrating 100mg, 25mg</i>	1	QL (270 EA per 30 days)
<i>clozapine odt tablet disintegrating 12.5mg</i>	1	QL (90 EA per 30 days)
<i>clozapine tablet 200mg</i>	1	QL (120 EA per 30 days)
<i>clozapine tablet 50mg</i>	1	QL (180 EA per 30 days)
<i>clozapine tablet 100mg, 25mg</i>	1	QL (270 EA per 30 days)
CLOZARIL TABLET 200MG	3	QL (120 EA per 30 days)
CLOZARIL TABLET 50MG	3	QL (180 EA per 30 days)
CLOZARIL TABLET 25MG	3	QL (270 EA per 30 days)
CLOZARIL TABLET 100MG	4	QL (270 EA per 30 days)
VERSACLOZ SUSPENSION 50MG/ML	4	QL (540 ML per 30 days)
<b>Antispasticity Agents</b>		
<b>Antispasticity Agents</b>		
<i>baclofen injection 20000mcg/20ml, 500mcg/ml</i>	1	B/D
<i>baclofen injection 40mg/20ml, 50mcg/ml</i>	4	B/D
BACLOFEN ORAL SOLUTION 10MG/5ML	3	ST
<i>baclofen oral solution 5mg/5ml</i>	4	ST
<i>baclofen suspension 25mg/5ml</i>	4	ST
<i>baclofen tablet 10mg, 15mg, 20mg, 5mg</i>	1	
BOTOX INJECTION 100UNIT, 200UNIT	3	PA
DANTRIUM IV INJECTION 20MG	4	
<i>dantrolene sodium capsule 100mg, 25mg, 50mg</i>	1	
<i>dantrolene sodium injection 20mg</i>	4	
DYSPORT INJECTION 300UNIT, 500UNIT	3	PA
FLEQSUVY SUSPENSION 25MG/5ML	4	ST
GABLOFEN INJECTION 10000MCG/20ML, 20000MCG/20ML	3	B/D
GABLOFEN INJECTION 20000MCG/20ML, 40000MCG/20ML, 50MCG/ML	4	B/D
LIORESAL INTRATHECAL INJECTION 0.05MG/ML, 10MG/20ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
LIORESAL INTRATHECAL INJECTION 10MG/5ML, 40MG/20ML	4	B/D
LYVISPAH PACKET 20MG	3	QL (120 EA per 30 days) ST
LYVISPAH PACKET 5MG	3	QL (270 EA per 30 days) ST
LYVISPAH PACKET 10MG	3	QL (90 EA per 30 days) ST
MYOBLOC INJECTION 10000UNIT/2ML, 2500UNIT/0.5ML, 5000UNIT/ML	3	PA
OZOBAX DS SOLUTION 10MG/5ML	4	ST
OZOBAX SOLUTION 5MG/5ML	4	ST
<i>revonto injection 20mg</i>	4	
SOHONOS CAPSULE 5MG	4	QL (112 EA per 28 days) PA
SOHONOS CAPSULE 2.5MG	4	QL (224 EA per 28 days) PA
SOHONOS CAPSULE 1.5MG	4	QL (364 EA per 28 days) PA
SOHONOS CAPSULE 10MG	4	QL (56 EA per 28 days) PA
SOHONOS CAPSULE 1MG	4	QL (560 EA per 28 days) PA
<i>tizanidine hcl tablet 2mg</i>	1	
TIZANIDINE HYDROCHLORIDE CAPSULE 8MG	4	
<i>tizanidine hydrochloride tablet 4mg</i>	1	
XEOMIN INJECTION 100UNIT, 50UNIT	3	PA
XEOMIN INJECTION 200UNIT	4	PA
ZANAFLEX CAPSULE 8MG	4	
<b>Antivirals</b>		
<b>Anti-cytomegalovirus (CMV) Agents</b>		
<i>cidofovir injection 75mg/ml</i>	4	
<i>foscarnet sodium injection 6000mg/250ml</i>	4	B/D
FOSCAVIR INJECTION 6000MG/250ML	4	B/D
<i>ganciclovir injection 500mg/10ml, 500mg</i>	1	B/D
LIVTENCITY TABLET 200MG	4	
PREVYMIS INJECTION 240MG/12ML, 480MG/24ML	4	
PREVYMIS PACKET 120MG, 20MG	4	
PREVYMIS TABLET 240MG, 480MG	4	
VALCYTE SOLUTION RECONSTITUTED 50MG/ML	4	
VALCYTE TABLET 450MG	4	
<i>valganciclovir hydrochloride solution reconstituted 50mg/ml</i>	4	
<i>valganciclovir tablet 450mg</i>	1	
<b>Anti-hepatitis B (HBV) Agents</b>		
<i>adefovir dipivoxil tablet 10mg</i>	1	
BARACLUDE SOLUTION 0.05MG/ML	4	QL (600 ML per 30 days)
BARACLUDE TABLET 0.5MG, 1MG	4	QL (30 EA per 30 days)
<i>entecavir tablet 0.5mg, 1mg</i>	1	QL (30 EA per 30 days)
<i>lamivudine tablet 100mg</i>	1	
VEMLIDY TABLET 25MG	4	
<b>Anti-hepatitis C (HCV) Agents</b>		
EPCLUSA PACKET 200MG; 50MG	4	QL (168 EA per 365 days) PA
EPCLUSA PACKET 150MG; 37.5MG	4	QL (84 EA per 365 days) PA
EPCLUSA TABLET 200MG; 50MG	4	QL (168 EA per 365 days) PA
EPCLUSA TABLET 400MG; 100MG	4	QL (84 EA per 365 days) PA
HARVONI PACKET 33.75MG; 150MG	4	QL (168 EA per 365 days) PA

Drug Name	Drug Tier	Requirements/Limits
HARVONI PACKET 45MG; 200MG	4	QL (336 EA per 365 days) PA
HARVONI TABLET 90MG; 400MG	4	QL (168 EA per 365 days) PA
HARVONI TABLET 45MG; 200MG	4	QL (336 EA per 365 days) PA
LEDIPASVIR/SOFOSBUVIR TABLET 90MG; 400MG	4	QL (168 EA per 365 days) PA
MAVYRET PACKET 50MG; 20MG	4	QL (560 EA per 365 days) PA
MAVYRET TABLET 100MG; 40MG	4	QL (336 EA per 365 days) PA
<i>ribavirin tablet 200mg</i>	1	
SOFOSBUVIR/VELPATASVIR TABLET 400MG; 100MG	4	QL (84 EA per 365 days) PA
SOVALDI PACKET 150MG	4	QL (168 EA per 365 days) PA
SOVALDI PACKET 200MG	4	QL (336 EA per 365 days) PA
SOVALDI TABLET 200MG, 400MG	4	QL (336 EA per 365 days) PA
VOSEVI TABLET 400MG; 100MG; 100MG	4	QL (84 EA per 365 days) PA
ZEPATIER TABLET 50MG; 100MG	4	QL (112 EA per 365 days) PA
<b><i>Anti-HIV Agents, Integrase Inhibitors (INSTI)</i></b>		
BIKTARVY TABLET 30MG; 120MG; 15MG, 50MG; 200MG; 25MG	4	QL (30 EA per 30 days)
CABENUVA INJECTION 400MG/2ML; 600MG/2ML, 600MG/3ML; 900MG/3ML	4	
DOVATO TABLET 50MG; 300MG	4	QL (30 EA per 30 days)
GENVOYA TABLET 150MG; 150MG; 200MG; 10MG	4	QL (30 EA per 30 days)
ISENTRESS HD TABLET 600MG	4	QL (60 EA per 30 days)
ISENTRESS PACKET 100MG	4	QL (60 EA per 30 days)
ISENTRESS TABLET CHEWABLE 25MG	2	QL (180 EA per 30 days)
ISENTRESS TABLET CHEWABLE 100MG	4	QL (180 EA per 30 days)
ISENTRESS TABLET 400MG	4	QL (60 EA per 30 days)
JULUCA TABLET 50MG; 25MG	4	QL (30 EA per 30 days)
STRIBILD TABLET 150MG; 150MG; 200MG; 300MG	4	QL (30 EA per 30 days)
TIVICAY PD TABLET SOLUBLE 5MG	3	QL (180 EA per 30 days)
TIVICAY TABLET 10MG	3	QL (30 EA per 30 days)
TIVICAY TABLET 25MG	4	QL (30 EA per 30 days)
TIVICAY TABLET 50MG	4	QL (60 EA per 30 days)
VOCABRIA TABLET 30MG	4	
<b><i>Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)</i></b>		
COMPLERA TABLET 200MG; 25MG; 300MG	4	QL (30 EA per 30 days)
DELSTRIGO TABLET 100MG; 300MG; 300MG	4	QL (30 EA per 30 days)
EDURANT PED TABLET SOLUBLE 2.5MG	4	QL (180 EA per 30 days)
EDURANT TABLET 25MG	4	QL (30 EA per 30 days)
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate tablet 600mg; 200mg; 300mg</i>	1	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate tablet 400mg; 300mg; 300mg, 600mg; 300mg; 300mg</i>	4	QL (30 EA per 30 days)
<i>efavirenz capsule 200mg, 50mg</i>	1	QL (90 EA per 30 days)
<i>efavirenz tablet 600mg</i>	1	QL (30 EA per 30 days)
<i>emtricitabine/rilpivirine/tenofovir disoproxil fumarate tablet 200mg; 25mg; 300mg</i>	4	QL (30 EA per 30 days)
<i>etravirine tablet 100mg, 200mg</i>	4	QL (60 EA per 30 days)
INTELENCE TABLET 25MG	3	QL (120 EA per 30 days)
INTELENCE TABLET 100MG	3	QL (60 EA per 30 days)
INTELENCE TABLET 200MG	4	QL (60 EA per 30 days)
<i>nevirapine er tablet extended release 24 hour 400mg</i>	1	QL (30 EA per 30 days)
<i>nevirapine suspension 50mg/5ml</i>	1	QL (1200 ML per 30 days)
<i>nevirapine tablet 200mg</i>	1	QL (60 EA per 30 days)
PIFELTRO TABLET 100MG	4	QL (30 EA per 30 days)
SYMFI LO TABLET 400MG; 300MG; 300MG	4	QL (30 EA per 30 days)
SYMFI TABLET 600MG; 300MG; 300MG	4	QL (30 EA per 30 days)
<b>Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)</b>		
<i>abacavir sulfate/lamivudine tablet 600mg; 300mg</i>	1	QL (30 EA per 30 days)
<i>abacavir sulfate tablet 300mg</i>	1	QL (60 EA per 30 days)
<i>abacavir solution 20mg/ml</i>	1	QL (960 ML per 30 days)
<i>abacavir tablet 300mg</i>	1	QL (60 EA per 30 days)
CIMDUO TABLET 300MG; 300MG	4	QL (30 EA per 30 days)
COMBIVIR TABLET 150MG; 300MG	4	QL (60 EA per 30 days)
DESCOVY TABLET 120MG; 15MG, 200MG; 25MG	4	QL (30 EA per 30 days)
<i>emtricitabine/tenofovir disoproxil fumarate tablet 100mg; 150mg, 200mg; 300mg</i>	1	QL (30 EA per 30 days)
<i>emtricitabine/tenofovir disoproxil fumarate tablet 133mg; 200mg</i>	4	QL (30 EA per 30 days)
<i>emtricitabine/tenofovir disoproxil tablet 167mg; 250mg</i>	1	QL (30 EA per 30 days)
<i>emtricitabine capsule 200mg</i>	1	QL (30 EA per 30 days)
EMTRIVA CAPSULE 200MG	3	QL (30 EA per 30 days)
EMTRIVA SOLUTION 10MG/ML	3	QL (850 ML per 30 days)
EPIVIR SOLUTION 10MG/ML	3	QL (960 ML per 30 days)
EPIVIR TABLET 300MG	3	QL (30 EA per 30 days)
EPIVIR TABLET 150MG	3	QL (60 EA per 30 days)
EPZICOM TABLET 600MG; 300MG	4	QL (30 EA per 30 days)
<i>lamivudine/zidovudine tablet 150mg; 300mg</i>	1	QL (60 EA per 30 days)
<i>lamivudine solution 10mg/ml</i>	1	QL (960 ML per 30 days)
<i>lamivudine tablet 300mg</i>	1	QL (30 EA per 30 days)
<i>lamivudine tablet 150mg</i>	1	QL (60 EA per 30 days)
ODEFSEY TABLET 200MG; 25MG; 25MG	4	QL (30 EA per 30 days)
RETROVIR IV INFUSION INJECTION 10MG/ML	3	
RETROVIR CAPSULE 100MG	3	QL (180 EA per 30 days)
RETROVIR SYRUP 50MG/5ML	3	QL (1920 ML per 30 days)
<i>tenofovir disoproxil fumarate tablet 300mg</i>	1	QL (30 EA per 30 days)
TRIUMEQ PD TABLET SOLUBLE 60MG; 5MG; 30MG	3	QL (180 EA per 30 days)
TRIUMEQ TABLET 600MG; 50MG; 300MG	4	QL (30 EA per 30 days)
TRUVADA TABLET 100MG; 150MG, 133MG; 200MG, 167MG; 250MG, 200MG; 300MG	4	QL (30 EA per 30 days)
VIREAD POWDER 40MG/GM	4	QL (240 GM per 30 days)

Drug Name	Drug Tier	Requirements/Limits
VIREAD TABLET 150MG, 200MG, 250MG, 300MG	4	QL (30 EA per 30 days)
ZIAGEN SOLUTION 20MG/ML	3	QL (960 ML per 30 days)
<i>zidovudine capsule 100mg</i>	1	QL (180 EA per 30 days)
<i>zidovudine syrup 50mg/5ml</i>	1	QL (1920 ML per 30 days)
<i>zidovudine tablet 300mg</i>	1	QL (60 EA per 30 days)
<b>Anti-HIV Agents, Other</b>		
FUZEON INJECTION 90MG	4	
<i>maraviroc tablet 300mg</i>	4	QL (120 EA per 30 days)
<i>maraviroc tablet 150mg</i>	4	QL (60 EA per 30 days)
RUKOBIA TABLET EXTENDED RELEASE 12 HOUR 600MG	4	QL (60 EA per 30 days)
SELZENTRY SOLUTION 20MG/ML	4	
SELZENTRY TABLET 25MG	3	QL (480 EA per 30 days)
SELZENTRY TABLET 300MG	4	QL (120 EA per 30 days)
SELZENTRY TABLET 150MG, 75MG	4	QL (60 EA per 30 days)
SUNLENCA INJECTION 463.5MG/1.5ML	4	
SUNLENCA TABLET THERAPY PACK 300MG	4	QL (10 EA per 365 days) ; (5 X 300 MG Pack)
SUNLENCA TABLET THERAPY PACK 300MG	4	QL (8 EA per 365 days) ; (4 X 300 MG Pack)
SUNLENCA TABLET 300MG	4	QL (24 EA per 168 days)
TROGARZO INJECTION 200MG/1.33ML	4	
TYBOST TABLET 150MG	2	QL (30 EA per 30 days)
<b>Anti-HIV Agents, Protease Inhibitors (PI)</b>		
APTIVUS CAPSULE 250MG	4	QL (120 EA per 30 days)
<i>atazanavir sulfate capsule 300mg</i>	1	QL (30 EA per 30 days)
<i>atazanavir capsule 150mg</i>	1	
<i>atazanavir capsule 200mg</i>	1	QL (60 EA per 30 days)
<i>darunavir tablet 800mg</i>	1	QL (30 EA per 30 days)
<i>darunavir tablet 600mg</i>	1	QL (60 EA per 30 days)
EVOTAZ TABLET 300MG; 150MG	4	QL (30 EA per 30 days)
<i>fosamprenavir calcium tablet 700mg</i>	4	QL (120 EA per 30 days)
KALETRA SOLUTION 400MG/5ML; 100MG/5ML	3	
KALETRA TABLET 200MG; 50MG	4	
LEXIVA SUSPENSION 50MG/ML	3	QL (1800 ML per 30 days)
LEXIVA TABLET 700MG	4	QL (120 EA per 30 days)
<i>lopinavir/ritonavir solution 400mg/5ml; 100mg/5ml</i>	1	
<i>lopinavir/ritonavir tablet 100mg; 25mg, 200mg; 50mg</i>	1	
NORVIR PACKET 100MG	3	QL (360 EA per 30 days)
NORVIR TABLET 100MG	3	QL (360 EA per 30 days)
PREZCOBIX TABLET 150MG; 675MG, 150MG; 800MG	4	QL (30 EA per 30 days)
PREZISTA SUSPENSION 100MG/ML	4	QL (400 ML per 30 days)
PREZISTA TABLET 75MG	3	QL (300 EA per 30 days)
PREZISTA TABLET 150MG	4	QL (180 EA per 30 days)
PREZISTA TABLET 800MG	4	QL (30 EA per 30 days)
PREZISTA TABLET 600MG	4	QL (60 EA per 30 days)
REYATAZ CAPSULE 300MG	4	QL (30 EA per 30 days)
REYATAZ CAPSULE 200MG	4	QL (60 EA per 30 days)
REYATAZ PACKET 50MG	4	QL (180 EA per 30 days)
<i>ritonavir tablet 100mg</i>	1	QL (360 EA per 30 days)
SYMTUZA TABLET 150MG; 800MG; 200MG; 10MG	4	QL (30 EA per 30 days)
VIRACEPT TABLET 625MG	4	QL (120 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
VIRACEPT TABLET 250MG	4	QL (300 EA per 30 days)
<b>Anti-influenza Agents</b>		
<i>amantadine hcl capsule 100mg</i>	1	
<i>amantadine hcl solution 50mg/5ml</i>	1	
<i>oseltamivir phosphate capsule 75mg</i>	1	QL (110 EA per 365 days)
<i>oseltamivir phosphate capsule 30mg</i>	1	QL (168 EA per 365 days)
<i>oseltamivir phosphate capsule 45mg</i>	1	QL (84 EA per 365 days)
<i>oseltamivir phosphate suspension reconstituted 6mg/ml</i>	1	QL (1080 ML per 365 days)
RAPIVAB INJECTION 200MG/20ML	4	
RELENZA DISKHALER AEROSOL POWDER BREATH ACTIVATED 5MG/BLISTER	3	QL (240 EA per 365 days)
<i>rimantadine hydrochloride tablet 100mg</i>	1	
TAMIFLU CAPSULE 75MG	3	QL (110 EA per 365 days)
TAMIFLU CAPSULE 30MG	3	QL (168 EA per 365 days)
TAMIFLU CAPSULE 45MG	3	QL (84 EA per 365 days)
TAMIFLU SUSPENSION RECONSTITUTED 6MG/ML	3	QL (1080 ML per 365 days)
XOFLUZA TABLET THERAPY PACK 40MG, 80MG	2	
<b>Antiherpetic Agents</b>		
<i>acyclovir sodium injection 50mg/ml</i>	1	B/D
<i>acyclovir capsule 200mg</i>	1	
<i>acyclovir suspension 200mg/5ml</i>	1	
<i>acyclovir tablet 400mg, 800mg</i>	1	
<i>famciclovir tablet 125mg, 250mg, 500mg</i>	1	
SITAVIG TABLET 50MG	3	QL (2 EA per 30 days)
<i>valacyclovir hydrochloride tablet 1gm, 500mg</i>	1	QL (120 EA per 30 days)
VALTREX TABLET 1GM, 500MG	3	QL (120 EA per 30 days)
VYJUVEK GEL 0	4	PA
<b>Antiviral, Coronavirus Agents</b>		
PAXLOVID TABLET THERAPY PACK 150MG; 100MG	2	QL (11 EA per 5 days); (300mg-100mg Day 1; 150mg-100mg Days 2-5 Pak)
PAXLOVID TABLET THERAPY PACK 150MG; 100MG	2	QL (20 EA per 5 days); (150mg-100mg Pak)
PAXLOVID TABLET THERAPY PACK 150MG; 100MG	2	QL (30 EA per 5 days); (300mg-100mg Pak)
VEKLURY INJECTION 100MG	4	QL (4 EA per 3 days)
<b>Anxiolytics</b>		
<b>Anxiolytics, Other</b>		
BUCAPSOL CAPSULE 10MG, 15MG, 7.5MG	4	
<i>buspirone hcl tablet 15mg</i>	1	
<i>buspirone hydrochloride tablet 10mg, 30mg, 5mg, 7.5mg</i>	1	
<b>Benzodiazepines</b>		
<i>alprazolam er tablet extended release 24 hour 2mg</i>	1	QL (150 EA per 30 days)
<i>alprazolam er tablet extended release 24 hour 0.5mg, 1mg</i>	1	QL (30 EA per 30 days)
<i>alprazolam er tablet extended release 24 hour 3mg</i>	1	QL (90 EA per 30 days)
<i>alprazolam odt tablet disintegrating 0.25mg, 0.5mg, 1mg</i>	1	QL (120 EA per 30 days)
<i>alprazolam odt tablet disintegrating 2mg</i>	1	QL (150 EA per 30 days)
<i>alprazolam xr tablet extended release 24 hour 2mg</i>	1	QL (150 EA per 30 days)
<i>alprazolam xr tablet extended release 24 hour 0.5mg, 1mg</i>	1	QL (30 EA per 30 days)
<i>alprazolam xr tablet extended release 24 hour 3mg</i>	1	QL (90 EA per 30 days)
<i>alprazolam tablet 0.25mg, 0.5mg, 1mg</i>	1	QL (120 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>alprazolam tablet 2mg</i>	1	QL (150 EA per 30 days)
ATIVAN INJECTION 2MG/ML, 4MG/ML	4	
ATIVAN TABLET 2MG	4	QL (150 EA per 30 days)
ATIVAN TABLET 0.5MG, 1MG	4	QL (90 EA per 30 days)
<i>chlordiazepoxide hcl capsule 5mg</i>	1	QL (120 EA per 30 days)
<i>chlordiazepoxide hcl capsule 10mg</i>	1	QL (900 EA per 30 days)
<i>chlordiazepoxide hydrochloride capsule 25mg</i>	1	QL (360 EA per 30 days)
<i>clorazepate dipotassium tablet 15mg</i>	1	QL (180 EA per 30 days)
<i>clorazepate dipotassium tablet 7.5mg</i>	1	QL (360 EA per 30 days)
<i>clorazepate dipotassium tablet 3.75mg</i>	1	QL (720 EA per 30 days)
<i>diazepam intensol concentrate 5mg/ml</i>	1	
<i>diazepam concentrate 5mg/ml</i>	1	
<i>diazepam injection 5mg/ml</i>	1	
<i>diazepam oral solution 5mg/5ml</i>	1	
<i>diazepam tablet 10mg</i>	1	QL (120 EA per 30 days)
<i>diazepam tablet 5mg</i>	1	QL (240 EA per 30 days)
<i>diazepam tablet 2mg</i>	1	QL (300 EA per 30 days)
<i>lorazepam intensol concentrate 2mg/ml</i>	1	
<i>lorazepam injection 2mg/ml</i>	1	
<i>lorazepam tablet 2mg</i>	1	QL (150 EA per 30 days)
<i>lorazepam tablet 0.5mg, 1mg</i>	1	QL (90 EA per 30 days)
LOREEV XR CAPSULE ER 24 HOUR SPRINKLE 1.5MG, 2MG	3	QL (150 EA per 30 days)
LOREEV XR CAPSULE ER 24 HOUR SPRINKLE 1MG	3	QL (30 EA per 30 days)
LOREEV XR CAPSULE ER 24 HOUR SPRINKLE 3MG	3	QL (90 EA per 30 days)
<i>midazolam hcl injection 5mg/ml</i>	1	
<i>oxazepam capsule 10mg, 15mg, 30mg</i>	1	QL (120 EA per 30 days)
VALIUM TABLET 10MG	3	QL (120 EA per 30 days)
VALIUM TABLET 5MG	3	QL (240 EA per 30 days)
VALIUM TABLET 2MG	3	QL (300 EA per 30 days)
XANAX XR TABLET EXTENDED RELEASE 24 HOUR 2MG	3	QL (150 EA per 30 days)
XANAX XR TABLET EXTENDED RELEASE 24 HOUR 0.5MG, 1MG	3	QL (30 EA per 30 days)
XANAX XR TABLET EXTENDED RELEASE 24 HOUR 3MG	3	QL (90 EA per 30 days)
XANAX TABLET 0.25MG, 0.5MG, 1MG	3	QL (120 EA per 30 days)
XANAX TABLET 2MG	3	QL (150 EA per 30 days)
<b>Bipolar Agents</b>		
<b><i>Bipolar Agents, Other</i></b>		
IGALMI FILM 120MCG, 180MCG	3	PA
<b><i>Mood Stabilizers</i></b>		
<i>lithium carbonate er tablet extended release 300mg, 450mg</i>	1	
<i>lithium carbonate capsule 150mg, 300mg, 600mg</i>	1	
<i>lithium carbonate tablet 300mg</i>	1	
<i>lithium solution 8meq/5ml</i>	1	
LITHOBID TABLET EXTENDED RELEASE 300MG	3	
<b>Blood Glucose Regulators</b>		
<b><i>Antidiabetic Agents</i></b>		
<i>acarbose tablet 100mg, 25mg, 50mg</i>	1	
ALOGLIPTIN/METFORMIN HCL TABLET 12.5MG; 500MG	3	ST
ALOGLIPTIN/METFORMIN HYDROCHLORIDE TABLET 12.5MG; 1000MG	3	ST

Drug Name	Drug Tier	Requirements/Limits
ALOGLIPTIN/PIOGLITAZONE TABLET 12.5MG; 30MG, 25MG; 15MG, 25MG; 30MG, 25MG; 45MG	3	ST
ALOGLIPTIN TABLET 12.5MG, 25MG, 6.25MG	3	QL (30 EA per 30 days) ST
BEXAGLIFLOZIN TABLET 20MG	3	QL (30 EA per 30 days) ST
BRENZAVVY TABLET 20MG	3	QL (30 EA per 30 days) ST
CYCLOSET TABLET 0.8MG	3	
EXENATIDE INJECTION 10MCG/0.04ML	3	QL (2.4 ML per 28 days) PA
EXENATIDE INJECTION 5MCG/0.02ML	3	QL (4.8 ML per 28 days) PA
<i>glimepiride tablet 1mg, 2mg, 4mg</i>	1	
<i>glipizide er tablet extended release 24 hour 10mg, 2.5mg, 5mg</i>	1	
<i>glipizide xl tablet extended release 24 hour 10mg, 2.5mg, 5mg</i>	1	
<i>glipizide/metformin hydrochloride tablet 2.5mg; 250mg, 2.5mg; 500mg, 5mg; 500mg</i>	1	
<i>glipizide tablet 10mg, 2.5mg, 5mg</i>	1	
GLUMETZA TABLET EXTENDED RELEASE 24 HOUR 500MG	3	PA
GLUMETZA TABLET EXTENDED RELEASE 24 HOUR 1000MG	4	PA
<i>glyburide/metformin hydrochloride tablet 1.25mg; 250mg, 2.5mg; 500mg, 5mg; 500mg</i>	1	
<i>glyburide tablet 1.25mg, 2.5mg, 5mg</i>	1	
GLYXAMBI TABLET 10MG; 5MG, 25MG; 5MG	2	
INVOKAMET XR TABLET EXTENDED RELEASE 24 HOUR 150MG; 1000MG, 150MG; 500MG, 50MG; 1000MG, 50MG; 500MG	3	ST
INVOKAMET TABLET 150MG; 1000MG, 150MG; 500MG, 50MG; 1000MG, 50MG; 500MG	3	ST
JANUMET XR TABLET EXTENDED RELEASE 24 HOUR 1000MG; 100MG, 1000MG; 50MG, 500MG; 50MG	2	
JANUMET TABLET 1000MG; 50MG, 500MG; 50MG	2	
JANUVIA TABLET 100MG, 25MG, 50MG	2	QL (30 EA per 30 days)
JENTADUETO XR TABLET EXTENDED RELEASE 24 HOUR 2.5MG; 1000MG, 5MG; 1000MG	2	
JENTADUETO TABLET 2.5MG; 1000MG, 2.5MG; 500MG, 2.5MG; 850MG	2	
<i>metformin hydrochloride er tablet extended release 24 hour 1000mg, 500mg, 750mg</i>	1	
<i>metformin hydrochloride er tablet extended release 24 hour 1000mg, 500mg</i>	1	PA
<i>metformin hydrochloride tablet 1000mg, 500mg, 850mg</i>	1	
<i>metformin hydrochloride tablet 625mg, 750mg</i>	4	PA
<i>miglitol tablet 100mg, 25mg, 50mg</i>	1	
MOUNJARO INJECTION 10MG/0.5ML, 12.5MG/0.5ML, 15MG/0.5ML, 2.5MG/0.5ML, 5MG/0.5ML, 7.5MG/0.5ML	2	QL (2 ML per 28 days) PA
<i>nateglinide tablet 120mg, 60mg</i>	1	
OZEMPIC INJECTION 2MG/3ML, 4MG/3ML, 8MG/3ML	2	QL (3 ML per 28 days) PA
<i>pioglitazone hcl/metformin hcl tablet 500mg; 15mg, 850mg; 15mg</i>	1	
<i>pioglitazone hcl tablet 45mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pioglitazone hydrochloride tablet 15mg, 30mg</i>	1	
QTERN TABLET 10MG; 5MG, 5MG; 5MG	3	ST
<i>repaglinide tablet 0.5mg, 1mg, 2mg</i>	1	
RYBELSUS TABLET 14MG, 7MG	2	QL (30 EA per 30 days) PA
RYBELSUS TABLET 3MG	2	QL (60 EA per 365 days) PA
<i>saxagliptin hydrochloride/metformin hydrochloride er tablet extended release 24 hour 1000mg; 2.5mg, 1000mg; 5mg, 500mg; 5mg</i>	3	ST
<i>saxagliptin hydrochloride tablet 2.5mg, 5mg</i>	3	QL (30 EA per 30 days) ST
SEGLUROMET TABLET 2.5MG; 1000MG, 2.5MG; 500MG, 7.5MG; 1000MG, 7.5MG; 500MG	3	ST
SITAGLIPTIN TABLET 100MG, 25MG, 50MG	3	QL (30 EA per 30 days) ST
SOLIQUA 100/33 INJECTION 100UNIT/ML; 33MCG/ML	2	
STEGLUJAN TABLET 15MG; 100MG, 5MG; 100MG	3	ST
SYMLINPEN 120 INJECTION 2700MCG/2.7ML	4	PA
SYMLINPEN 60 INJECTION 1500MCG/1.5ML	4	PA
SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 1000MG, 12.5MG; 1000MG, 25MG; 1000MG, 5MG; 1000MG	2	
SYNJARDY TABLET 12.5MG; 1000MG, 12.5MG; 500MG, 5MG; 1000MG, 5MG; 500MG	2	
TRADJENTA TABLET 5MG	2	QL (30 EA per 30 days)
TRIJARDY XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 5MG; 1000MG, 12.5MG; 2.5MG; 1000MG, 25MG; 5MG; 1000MG, 5MG; 2.5MG; 1000MG	2	
TRULICITY INJECTION 0.75MG/0.5ML, 1.5MG/0.5ML, 3MG/0.5ML, 4.5MG/0.5ML	2	QL (2 ML per 28 days) PA
XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 1000MG, 10MG; 500MG, 2.5MG; 1000MG, 5MG; 1000MG, 5MG; 500MG	2	
XULTOPHY 100/3.6 INJECTION 100UNIT/ML; 3.6MG/ML	3	
ZITUVIMET XR TABLET EXTENDED RELEASE 24 HOUR 1000MG; 100MG, 1000MG; 50MG, 500MG; 50MG	3	ST
ZITUVIMET TABLET 1000MG; 50MG, 500MG; 50MG	3	ST
<b>Glycemic Agents</b>		
BAQSIMI ONE PACK POWDER 3MG/DOSE	2	
BAQSIMI TWO PACK POWDER 3MG/DOSE	2	
<i>diazoxide suspension 50mg/ml</i>	4	
GLUCAGEN HYPOKIT INJECTION 1MG	3	ST
<i>glucagon emergency kit for low blood sugar injection 1mg/ml, 2 1mg</i>	2	
<i>glucagon emergency kit injection 1mg</i>	2	
GVOKE HYPOPEN 1-PACK INJECTION 0.5MG/0.1ML, 1MG/0.2ML	2	
GVOKE HYPOPEN 2-PACK INJECTION 0.5MG/0.1ML, 1MG/0.2ML	2	
GVOKE KIT INJECTION 1MG/0.2ML	2	
GVOKE PFS INJECTION 0.5MG/0.1ML, 1MG/0.2ML	2	
ZEGALOGUE INJECTION 0.6MG/0.6ML	3	ST
<b>Insulins</b>		
ADMELOG SOLOSTAR INJECTION 100UNIT/ML	3	ST

Drug Name	Drug Tier	Requirements/Limits
ADMELOG INJECTION 100UNIT/ML	3	ST
AFREZZA POWDER 0, 12UNIT, 4UNIT, 8UNIT	3	PA
AFREZZA POWDER 0	4	PA
BASAGLAR KWIKPEN INJECTION 100UNIT/ML	3	ST
BASAGLAR TEMPO PEN INJECTION 100UNIT/ML	3	ST
FIASP FLEXTOUCH INJECTION 100UNIT/ML	2	
FIASP PENFILL INJECTION 100UNIT/ML	2	
FIASP INJECTION 100UNIT/ML	2	
HUMALOG JUNIOR KWIKPEN INJECTION 100UNIT/ML	2	
HUMALOG KWIKPEN INJECTION 100UNIT/ML, 200UNIT/ML	2	
HUMALOG MIX 50/50 KWIKPEN INJECTION 50UNIT/ML; 50UNIT/ML	2	
HUMALOG MIX 50/50 INJECTION 50UNIT/ML; 50UNIT/ML	2	
HUMALOG MIX 75/25 KWIKPEN INJECTION 25UNIT/ML; 75UNIT/ML	2	
HUMALOG MIX 75/25 INJECTION 25UNIT/ML; 75UNIT/ML	2	
HUMALOG INJECTION 100UNIT/ML	2	
HUMULIN 70/30 KWIKPEN INJECTION 30UNIT/ML; 70UNIT/ML	2	
HUMULIN 70/30 INJECTION 30UNIT/ML; 70UNIT/ML	2	
HUMULIN N KWIKPEN INJECTION 100UNIT/ML	2	
HUMULIN N INJECTION 100UNIT/ML	2	
HUMULIN R U-500 (CONCENTRATED) INJECTION 500UNIT/ML	2	
HUMULIN R U-500 KWIKPEN INJECTION 500UNIT/ML	2	
HUMULIN R INJECTION 100UNIT/ML	2	
INSULIN ASPART FLEXPEN INJECTION 100UNIT/ML	2	
INSULIN ASPART PENFILL INJECTION 100UNIT/ML	2	
INSULIN ASPART INJECTION 100UNIT/ML	2	
INSULIN LISPRO INJECTION 100UNIT/ML	2	
KIRSTY INJECTION 100UNIT/ML	3	ST
LANTUS SOLOSTAR INJECTION 100UNIT/ML	2	
LANTUS INJECTION 100UNIT/ML	2	
LYUMJEV KWIKPEN INJECTION 100UNIT/ML, 200UNIT/ML	2	
LYUMJEV INJECTION 100UNIT/ML	2	
NOVOLIN 70/30 FLEXPEN RELION INJECTION 30UNIT/ML; 70UNIT/ML	2	
NOVOLIN 70/30 FLEXPEN INJECTION 30UNIT/ML; 70UNIT/ML	2	
NOVOLIN 70/30 RELION INJECTION 30UNIT/ML; 70UNIT/ML	2	
NOVOLIN 70/30 INJECTION 30UNIT/ML; 70UNIT/ML	2	
NOVOLIN N FLEXPEN RELION INJECTION 100UNIT/ML	2	
NOVOLIN N FLEXPEN INJECTION 100UNIT/ML	2	
NOVOLIN N RELION INJECTION 100UNIT/ML	2	
NOVOLIN N INJECTION 100UNIT/ML	2	
NOVOLIN R FLEXPEN RELION INJECTION 100UNIT/ML	2	
NOVOLIN R FLEXPEN INJECTION 100UNIT/ML	2	
NOVOLIN R RELION INJECTION 100UNIT/ML	2	
NOVOLIN R INJECTION 100UNIT/ML	2	

Drug Name	Drug Tier	Requirements/Limits
NOVOLOG FLEXPEN RELION INJECTION 100UNIT/ML	2	
NOVOLOG FLEXPEN INJECTION 100UNIT/ML	2	
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION INJECTION 30UNIT/ML; 70UNIT/ML	2	
NOVOLOG MIX 70/30 PREFILLED FLEXPEN INJECTION 30UNIT/ML; 70UNIT/ML	2	
NOVOLOG MIX 70/30 RELION INJECTION 30UNIT/ML; 70UNIT/ML	2	
NOVOLOG MIX 70/30 INJECTION 30UNIT/ML; 70UNIT/ML	2	
NOVOLOG PENFILL INJECTION 100UNIT/ML	2	
NOVOLOG RELION INJECTION 100UNIT/ML	2	
NOVOLOG INJECTION 100UNIT/ML	2	
TOUJEO MAX SOLOSTAR INJECTION 300UNIT/ML	2	
TOUJEO SOLOSTAR INJECTION 300UNIT/ML	2	
TRESIBA FLEXTOUCH INJECTION 100UNIT/ML, 200UNIT/ML	2	
TRESIBA INJECTION 100UNIT/ML	2	
<b>Blood Products and Modifiers</b>		
<b>Anticoagulants</b>		
<i>argatroban/sodium chloride injection 50mg/50ml; 0.9%</i>	4	
<i>argatroban injection 250mg/2.5ml, 50mg/50ml</i>	4	
ARIXTRA INJECTION 2.5MG/0.5ML	3	
ARIXTRA INJECTION 10MG/0.8ML, 5MG/0.4ML, 7.5MG/0.6ML	4	
CEPROTIN INJECTION 1000UNIT, 500UNIT	4	
<i>dabigatran etexilate capsule 110mg, 150mg, 75mg</i>	1	QL (60 EA per 30 days)
ELIQUIS STARTER PACK TABLET THERAPY PACK 5MG	2	QL (148 EA per 365 days)
ELIQUIS CAPSULE SPRINKLE 0.15MG	2	QL (84 EA per 28 days)
ELIQUIS TABLET SOLUBLE 0.5MG	2	QL (140 EA per 28 days)
ELIQUIS TABLET SOLUBLE 0.5MG	2	QL (420 EA per 28 days); PACK 3 X 0.5 MG (1.5 MG)
ELIQUIS TABLET SOLUBLE 0.5MG	2	QL (560 EA per 28 days); PACK 4 X 0.5 MG (2 MG)
ELIQUIS TABLET 2.5MG	2	QL (60 EA per 30 days)
ELIQUIS TABLET 5MG	2	QL (90 EA per 30 days)
<i>enoxaparin sodium injection 100mg/ml, 120mg/0.8ml, 150mg/ml, 300mg/3ml, 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml</i>	1	
<i>fondaparinux sodium injection 2.5mg/0.5ml, 5mg/0.4ml, 7.5mg/0.6ml</i>	3	
<i>fondaparinux sodium injection 10mg/0.8ml</i>	4	
FRAGMIN INJECTION 10000UNIT/4ML, 2500UNIT/0.2ML	3	
FRAGMIN INJECTION 10000UNIT/ML, 12500UNIT/0.5ML, 15000UNIT/0.6ML, 18000UNIT/0.72ML, 5000UNIT/0.2ML, 7500UNIT/0.3ML, 95000UNIT/3.8ML	4	
<i>heparin sodium/dextrose injection 5%; 25000unit/250ml, 5%; 25000unit/500ml</i>	1	
<i>heparin sodium injection 10000unit/ml, 1000unit/ml, 5000unit/ml</i>	1	
<i>jantoven tablet 10mg, 1mg, 2.5mg, 2mg, 3mg, 4mg, 5mg, 6mg, 7.5mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
LOVENOX INJECTION 120MG/0.8ML, 30MG/0.3ML, 40MG/0.4ML, 60MG/0.6ML, 80MG/0.8ML	3	
LOVENOX INJECTION 100MG/ML, 150MG/ML, 300MG/3ML	4	
<i>rivaroxaban suspension reconstituted 1mg/ml</i>	1	QL (600 ML per 30 days)
<i>rivaroxaban tablet 2.5mg</i>	2	QL (360 EA per 30 days)
TISSEEL KIT 0; 0; 0; 0	4	
<i>warfarin sodium tablet 10mg, 1mg, 2.5mg, 2mg, 3mg, 4mg, 5mg, 6mg, 7.5mg</i>	1	
XARELTO STARTER PACK TABLET THERAPY PACK 0	2	QL (102 EA per 365 days)
XARELTO SUSPENSION RECONSTITUTED 1MG/ML	2	QL (600 ML per 30 days)
XARELTO TABLET 10MG, 20MG	2	QL (30 EA per 30 days)
XARELTO TABLET 2.5MG	2	QL (360 EA per 30 days)
XARELTO TABLET 15MG	2	QL (60 EA per 30 days)
<b>Blood Products and Modifiers, Other</b>		
ADAKVEO INJECTION 100MG/10ML	4	PA
ALVAIZ TABLET 18MG, 36MG, 54MG, 9MG	4	PA
<i>anagrelide hydrochloride capsule 0.5mg, 1mg</i>	1	
APHEXDA INJECTION 62MG	4	
ARANESP ALBUMIN FREE INJECTION 10MCG/0.4ML, 25MCG/0.42ML, 25MCG/ML, 40MCG/0.4ML, 40MCG/ML, 60MCG/ML	3	PA
ARANESP ALBUMIN FREE INJECTION 100MCG/0.5ML, 100MCG/ML, 150MCG/0.3ML, 200MCG/0.4ML, 200MCG/ML, 300MCG/0.6ML, 500MCG/ML, 60MCG/0.3ML	4	PA
<i>eltrombopag olamine packet 12.5mg, 25mg</i>	4	PA
<i>eltrombopag olamine tablet 12.5mg, 25mg, 50mg, 75mg</i>	4	PA
EPOGEN INJECTION 10000UNIT/ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	3	PA
FABHALTA CAPSULE 200MG	4	QL (60 EA per 30 days) PA
FULPHILA INJECTION 6MG/0.6ML	4	PA
FYLNETRA INJECTION 6MG/0.6ML	4	PA
GRANIX INJECTION 300MCG/0.5ML, 300MCG/ML, 480MCG/0.8ML, 480MCG/1.6ML	4	ST
LEUKINE INJECTION 250MCG	4	PA
MOZOBIL INJECTION 24MG/1.2ML	4	
MULPLETA TABLET 3MG	4	PA
NEULASTA ONPRO KIT INJECTION 6MG/0.6ML	4	PA
NEULASTA INJECTION 6MG/0.6ML	4	PA
NEUPOGEN INJECTION 300MCG/0.5ML, 300MCG/ML, 480MCG/0.8ML, 480MCG/1.6ML	4	ST
NIVESTYM INJECTION 300MCG/0.5ML, 300MCG/ML, 480MCG/0.8ML, 480MCG/1.6ML	4	ST
NPLATE INJECTION 125MCG, 250MCG, 500MCG	4	PA
NYPOZI INJECTION 300MCG/0.5ML, 480MCG/0.8ML	4	ST
NYVEPRIA INJECTION 6MG/0.6ML	4	PA
<i>plerixafor injection 24mg/1.2ml</i>	4	
PROCRIT INJECTION 10000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	3	PA
PROCRIT INJECTION 20000UNIT/ML, 40000UNIT/ML	4	PA
PROMACTA PACKET 12.5MG, 25MG	4	PA
PROMACTA TABLET 12.5MG, 25MG, 50MG, 75MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
REBLOZYL INJECTION 25MG, 75MG	4	PA
RELEUKO INJECTION 300MCG/0.5ML, 480MCG/0.8ML	3	ST
RETACRIT INJECTION 10000UNIT/ML, 20000UNIT/2ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	3	PA
RETACRIT INJECTION 40000UNIT/ML	4	PA
ROLVEDON INJECTION 13.2MG/0.6ML	4	PA
RYZNEUTA INJECTION 20MG/ML	4	PA
STIMUFEND INJECTION 6MG/0.6ML	4	PA
UDENYCA ONBODY INJECTION 6MG/0.6ML	4	PA
UDENYCA INJECTION 6MG/0.6ML	4	PA
VAFSEO TABLET 150MG	3	QL (90 EA per 30 days) PA
VAFSEO TABLET 300MG	4	QL (60 EA per 30 days) PA
XOLREMDI CAPSULE 100MG	4	QL (120 EA per 30 days) PA
ZARXIO INJECTION 300MCG/0.5ML, 480MCG/0.8ML	4	
ZIEXTENZO INJECTION 6MG/0.6ML	4	PA
<b>Hemostasis Agents</b>		
<i>aminocaproic acid solution 0.25gm/ml</i>	4	
<i>aminocaproic acid tablet 1000mg, 500mg</i>	4	
<i>tranexamic acid tablet 650mg</i>	1	
<b>Platelet Modifying Agents</b>		
<i>aspirin/dipyridamole er capsule extended release 12 hour 25mg; 200mg</i>	1	
<i>aspirin/dipyridamole capsule extended release 12 hour 25mg; 200mg</i>	1	
CABLIVI INJECTION 11MG	4	QL (30 EA per 30 days) PA
<i>cilostazol tablet 100mg, 50mg</i>	1	
<i>clopidogrel tablet 300mg, 75mg</i>	1	
DOPTELET SPRINKLE CAPSULE SPRINKLE 10MG	4	PA
DOPTELET TABLET 20MG	4	PA
<i>eptifibatide injection 200mg/100ml, 20mg/10ml, 75mg/100ml</i>	4	
KENGREAL INJECTION 50MG	4	
<i>prasugrel hydrochloride tablet 10mg, 5mg</i>	1	
TAVALISSE TABLET 100MG, 150MG	4	PA
<i>ticagrelor tablet 60mg, 90mg</i>	2	
WAYRILZ TABLET 400MG	4	QL (60 EA per 30 days) PA
YOSPRALA TABLET DELAYED RELEASE 325MG; 40MG, 81MG; 40MG	3	QL (30 EA per 30 days)
<b>Cardiovascular Agents</b>		
<b>Alpha-adrenergic Agonists</b>		
CLONIDINE HYDROCHLORIDE ER TABLET EXTENDED RELEASE 24 HOUR 0.17MG	3	ST
<i>clonidine hydrochloride tablet 0.1mg, 0.2mg, 0.3mg</i>	1	
<i>clonidine patch weekly 0.1mg/24hr, 0.2mg/24hr, 0.3mg/24hr</i>	1	
<i>droxidopa capsule 100mg</i>	3	PA
<i>droxidopa capsule 200mg, 300mg</i>	4	PA
<i>guanfacine hydrochloride tablet 1mg, 2mg</i>	1	
JAVADIN SOLUTION 0.02MG/ML	3	PA
<i>methyl dopa tablet 250mg, 500mg</i>	1	
<i>midodrine hydrochloride tablet 10mg, 2.5mg, 5mg</i>	1	
NEXICLON XR TABLET EXTENDED RELEASE 24 HOUR 0.17MG	3	ST

Drug Name	Drug Tier	Requirements/Limits
NORTHERA CAPSULE 100MG, 200MG, 300MG	4	PA
<i>phenylephrine hydrochloride injection 0.5mg/5ml</i>	1	
<b>Alpha-adrenergic Blocking Agents</b>		
DIBENZYLIN CAPSULE 10MG	4	PA
<i>phenoxybenzamine hydrochloride capsule 10mg</i>	4	PA
<i>prazosin hydrochloride capsule 1mg, 2mg, 5mg</i>	1	
<b>Angiotensin II Receptor Antagonists</b>		
ARBLI SUSPENSION 10MG/ML	3	PA
<i>candesartan cilexetil tablet 16mg, 32mg, 4mg, 8mg</i>	1	
EDARBI TABLET 40MG, 80MG	3	
<i>irbesartan tablet 150mg, 300mg, 75mg</i>	1	
<i>losartan potassium tablet 100mg, 25mg, 50mg</i>	1	
<i>olmesartan medoxomil tablet 20mg, 40mg, 5mg</i>	1	
<i>telmisartan tablet 20mg, 40mg, 80mg</i>	1	
VALSARTAN SOLUTION 4MG/ML	4	ST
<i>valsartan tablet 160mg, 320mg, 40mg, 80mg</i>	1	
<b>Angiotensin-converting Enzyme (ACE) Inhibitors</b>		
<i>benazepril hydrochloride tablet 10mg, 20mg, 40mg, 5mg</i>	1	
<i>captopril tablet 100mg, 12.5mg, 25mg, 50mg</i>	1	
<i>enalapril maleate solution 1mg/ml</i>	1	
<i>enalapril maleate tablet 10mg, 2.5mg, 20mg, 5mg</i>	1	
EPANED SOLUTION 1MG/ML	3	
<i>fosinopril sodium tablet 10mg, 20mg, 40mg</i>	1	
<i>lisinopril tablet 10mg, 2.5mg, 20mg, 30mg, 40mg, 5mg</i>	1	
<i>moexipril hydrochloride tablet 15mg, 7.5mg</i>	1	
<i>perindopril erbumine tablet 2mg, 4mg, 8mg</i>	1	
QBRELIS SOLUTION 1MG/ML	3	
<i>quinapril hydrochloride tablet 10mg, 20mg, 40mg, 5mg</i>	1	
<i>ramipril capsule 1.25mg, 10mg, 2.5mg, 5mg</i>	1	
<i>trandolapril tablet 1mg, 2mg, 4mg</i>	1	
VASOTEC TABLET 20MG	4	
<b>Antiarrhythmics</b>		
<i>amiodarone hydrochloride tablet 100mg, 200mg, 400mg</i>	1	
BETAPACE AF TABLET 120MG, 160MG	3	
BETAPACE TABLET 120MG, 160MG, 80MG	4	
<i>digoxin solution 0.05mg/ml</i>	1	
<i>digoxin tablet 125mcg, 250mcg, 62.5mcg</i>	1	
<i>disopyramide phosphate capsule 100mg, 150mg</i>	1	
<i>dofetilide capsule 125mcg, 250mcg, 500mcg</i>	1	
<i>flecainide acetate tablet 100mg, 150mg, 50mg</i>	1	
<i>lidocaine hcl injection 100mg/5ml, 50mg/5ml</i>	1	
<i>mexiletine hydrochloride capsule 150mg, 200mg, 250mg</i>	1	
MULTAQ TABLET 400MG	2	
NEXTERONE INJECTION 360MG/200ML; 41.4MG/ML	3	
NORPACE CR CAPSULE EXTENDED RELEASE 12 HOUR 100MG, 150MG	3	
PACERONE TABLET 100MG, 200MG, 400MG	1	
<i>propafenone hcl tablet 150mg, 225mg, 300mg</i>	1	
<i>propafenone hydrochloride er capsule extended release 12 hour 225mg, 325mg, 425mg</i>	1	
<i>propafenone hydrochloride tablet 150mg, 225mg, 300mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>quinidine sulfate tablet 200mg, 300mg</i>	1	
RYTHMOL SR CAPSULE EXTENDED RELEASE 12 HOUR 325MG	3	
RYTHMOL SR CAPSULE EXTENDED RELEASE 12 HOUR 425MG	4	
<i>sotalol hcl (af) tablet 80mg</i>	1	
<i>sotalol hcl tablet 120mg, 160mg, 240mg</i>	1	
<i>sotalol hydrochloride (af) tablet 120mg, 160mg, 80mg</i>	1	
<i>sotalol hydrochloride af tablet 160mg</i>	1	
SOTALOL HYDROCHLORIDE INJECTION 150MG/10ML	4	
<i>sotalol hydrochloride tablet 160mg, 80mg</i>	1	
<b>Beta-adrenergic Blocking Agents</b>		
<i>acebutolol hydrochloride capsule 200mg, 400mg</i>	1	
<i>atenolol tablet 100mg, 25mg, 50mg</i>	1	
<i>betaxolol hcl tablet 10mg, 20mg</i>	1	
<i>bisoprolol fumarate tablet 10mg, 2.5mg, 5mg</i>	1	
<i>carvedilol phosphate er capsule extended release 24 hour 10mg, 20mg, 40mg, 80mg</i>	1	
<i>carvedilol tablet 12.5mg, 25mg, 3.125mg, 6.25mg</i>	1	
HEMANGEOL SOLUTION 4.28MG/ML	4	
INDERAL LA CAPSULE EXTENDED RELEASE 24 HOUR 60MG, 80MG	3	
INDERAL LA CAPSULE EXTENDED RELEASE 24 HOUR 120MG, 160MG	4	
INDERAL XL CAPSULE EXTENDED RELEASE 24 HOUR 120MG, 80MG	3	
INNOPRAN XL CAPSULE EXTENDED RELEASE 24 HOUR 120MG, 80MG	3	
<i>labetalol hydrochloride tablet 100mg, 200mg, 300mg, 400mg</i>	1	
LOPRESSOR SOLUTION 10MG/ML	3	PA
<i>metoprolol succinate er tablet extended release 24 hour 100mg, 200mg, 25mg, 50mg</i>	1	
<i>metoprolol tartrate tablet 100mg, 25mg, 37.5mg, 50mg, 75mg</i>	1	
<i>nadolol tablet 20mg, 40mg, 80mg</i>	1	
<i>nebivolol hydrochloride tablet 10mg, 2.5mg, 20mg, 5mg</i>	1	
<i>pindolol tablet 10mg, 5mg</i>	1	
<i>propranolol hcl tablet 40mg</i>	1	
<i>propranolol hydrochloride er capsule extended release 24 hour 120mg, 160mg, 60mg, 80mg</i>	1	
<i>propranolol hydrochloride tablet 10mg, 20mg, 60mg, 80mg</i>	1	
<b>Calcium Channel Blocking Agents, Dihydropyridines</b>		
<i>amlodipine besylate tablet 10mg, 2.5mg, 5mg</i>	1	
CLEVIPREX INJECTION 25MG/50ML, 50MG/100ML	4	
CONJUPRI TABLET 2.5MG, 5MG	3	ST
<i>felodipine er tablet extended release 24 hour 10mg, 2.5mg, 5mg</i>	1	
<i>isradipine capsule 2.5mg, 5mg</i>	3	
LEVAMLODIPINE TABLET 2.5MG, 5MG	3	ST
<i>nicardipine hcl capsule 20mg, 30mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>nicardipine hydrochloride/sodium chloride injection</i> 20mg/200ml; 0.86%, 20mg/200ml; 0.9%, 40mg/200ml; 0.83%, 40mg/200ml; 0.9%	1	
<i>nifedipine er tablet extended release 24 hour</i> 30mg, 60mg, 90mg	1	
<i>nimodipine capsule</i> 30mg	1	
NIMODIPINE SOLUTION 60MG/20ML	3	
NORLIQVA SOLUTION 1MG/ML	3	ST
NYMALIZE SOLUTION 6MG/ML	4	
SDAMLO SOLUTION RECONSTITUTED 10MG, 2.5MG, 5MG	4	ST
<b>Calcium Channel Blocking Agents, Nondihydropyridines</b>		
CARDAMYST SOLUTION 70MG/DOSE	4	PA
CARDIZEM CD CAPSULE EXTENDED RELEASE 24 HOUR 120MG, 180MG	3	
CARDIZEM CD CAPSULE EXTENDED RELEASE 24 HOUR 240MG, 300MG, 360MG	4	
CARDIZEM TABLET 120MG, 60MG	3	
<i>cartia xt capsule extended release 24 hour</i> 120mg, 180mg, 240mg, 300mg	1	
<i>dilt-xr capsule extended release 24 hour</i> 120mg, 180mg, 240mg	1	
<i>diltiazem hcl cd capsule extended release 24 hour</i> 360mg	1	
<i>diltiazem hcl er capsule extended release 12 hour</i> 120mg, 60mg, 90mg	1	
<i>diltiazem hcl er capsule extended release 24 hour</i> 120mg, 180mg, 240mg, 420mg	1	
<i>diltiazem hcl er tablet extended release 24 hour</i> 240mg, 300mg, 360mg, 420mg	1	
<i>diltiazem hcl tablet</i> 30mg, 60mg	1	
<i>diltiazem hydrochloride er capsule extended release 24 hour</i> 120mg, 180mg, 240mg, 300mg, 360mg	1	
<i>diltiazem hydrochloride er tablet extended release 24 hour</i> 120mg, 180mg, 240mg, 300mg, 360mg	1	
<i>diltiazem hydrochloride tablet</i> 120mg, 90mg	1	
<i>matzim la tablet extended release 24 hour</i> 180mg, 240mg, 300mg, 360mg, 420mg	1	
<i>taztia xt capsule extended release 24 hour</i> 120mg, 180mg, 240mg, 300mg, 360mg	1	
<i>tiadylt er capsule extended release 24 hour</i> 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
<i>verapamil hcl er capsule extended release 24 hour</i> 100mg, 120mg, 180mg, 240mg	1	
<i>verapamil hcl er tablet extended release</i> 120mg, 180mg	1	
<i>verapamil hcl sr capsule extended release 24 hour</i> 120mg, 180mg, 240mg, 360mg	1	
<i>verapamil hcl tablet</i> 40mg, 80mg	1	
<i>verapamil hydrochloride er capsule extended release 24 hour</i> 100mg, 200mg	1	
<i>verapamil hydrochloride er tablet extended release</i> 180mg, 240mg	1	

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hydrochloride sr capsule extended release 24 hour 360mg</i>	1	
<i>verapamil hydrochloride tablet 120mg</i>	1	
<b>Cardiovascular Agents, Other</b>		
<i>acetazolamide sodium injection 500mg</i>	4	
ADRENALIN INJECTION 1MG/ML	3	
<i>aliskiren tablet 150mg, 300mg</i>	1	
<i>amiloride/hydrochlorothiazide tablet 5mg; 50mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride capsule 10mg; 20mg, 10mg; 40mg, 2.5mg; 10mg, 5mg; 10mg, 5mg; 20mg, 5mg; 40mg</i>	1	
<i>amlodipine besylate/valsartan tablet 10mg; 160mg, 10mg; 320mg, 5mg; 160mg, 5mg; 320mg</i>	1	
<i>amlodipine/olmesartan medoxomil tablet 10mg; 20mg, 10mg; 40mg, 5mg; 20mg, 5mg; 40mg</i>	1	
ASPRUZYO SPRINKLE PACKET 1000MG, 500MG	3	QL (60 EA per 30 days) ST
<i>atenolol/chlorthalidone tablet 100mg; 25mg, 50mg; 25mg</i>	1	
<i>benazepril hydrochloride/hydrochlorothiazide tablet 10mg; 12.5mg, 20mg; 12.5mg, 20mg; 25mg, 5mg; 6.25mg</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide tablet 10mg; 6.25mg, 2.5mg; 6.25mg, 5mg; 6.25mg</i>	1	
CAMZYOS CAPSULE 10MG, 15MG, 2.5MG, 5MG	4	QL (30 EA per 30 days) PA
<i>candesartan cilexetil/hydrochlorothiazide tablet 16mg; 12.5mg, 32mg; 12.5mg, 32mg; 25mg</i>	1	
<i>captopril/hydrochlorothiazide tablet 25mg; 15mg, 25mg; 25mg, 50mg; 15mg, 50mg; 25mg</i>	1	
CORLANOR SOLUTION 5MG/5ML	3	QL (450 ML per 30 days)
CORLANOR TABLET 5MG, 7.5MG	3	QL (60 EA per 30 days)
DEFITELIO INJECTION 200MG/2.5ML	4	
DEMSEER CAPSULE 250MG	4	PA
<i>dobutamine hcl/d5w injection 5%; 1mg/ml</i>	1	B/D
<i>dobutamine hcl injection 12.5mg/ml</i>	1	B/D
<i>dobutamine hydrochloride/dextrose 5% injection 5%; 2mg/ml, 5%; 4mg/ml</i>	1	B/D
<i>dopamine hydrochloride/dextrose injection 5%; 0.8mg/ml, 5%; 1.6mg/ml, 5%; 3.2mg/ml</i>	1	B/D
<i>dopamine hydrochloride injection 40mg/ml</i>	1	B/D
<i>dopamine/d5w injection 5%; 3.2mg/ml</i>	1	B/D
EDARBYCLOR TABLET 40MG; 12.5MG, 40MG; 25MG	3	
<i>enalapril maleate/hydrochlorothiazide tablet 10mg; 25mg, 5mg; 12.5mg</i>	1	
ENTRESTO CAPSULE SPRINKLE 15MG; 16MG, 6MG; 6MG	2	QL (240 EA per 30 days)
ENTRESTO TABLET 24MG; 26MG, 49MG; 51MG, 97MG; 103MG	2	QL (60 EA per 30 days)
<i>epinephrine injection 1mg/ml</i>	1	
EVKEEZA INJECTION 1200MG/8ML, 345MG/2.3ML	4	PA
FILSPARI TABLET 200MG, 400MG	4	QL (30 EA per 30 days) PA
<i>fosinopril sodium/hydrochlorothiazide tablet 10mg; 12.5mg, 20mg; 12.5mg</i>	1	
<i>irbesartan/hydrochlorothiazide tablet 12.5mg; 150mg, 12.5mg; 300mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>isosorbide dinitrate/hydralazine hydrochloride tablet 37.5mg; 20mg</i>	1	
<i>ivabradine hydrochloride tablet 5mg, 7.5mg</i>	1	QL (60 EA per 30 days)
<i>lisinopril/hydrochlorothiazide tablet 12.5mg; 10mg, 12.5mg; 20mg, 25mg; 20mg</i>	1	
LODOCO TABLET 0.5MG	3	PA
<i>losartan potassium/hydrochlorothiazide tablet 12.5mg; 100mg, 12.5mg; 50mg, 25mg; 100mg</i>	1	
<i>metyrosine capsule 250mg</i>	4	PA
<i>milrinone lactate in dextrose injection 5%; 20mg/100ml, 5%; 40mg/200ml</i>	1	B/D
<i>milrinone lactate injection 10mg/10ml, 20mg/20ml, 50mg/50ml</i>	1	B/D
MYQORZO TABLET 10MG, 15MG, 20MG	4	QL (30 EA per 30 days) PA
NEFFY SOLUTION 1MG/0.1ML	3	
<i>olmesartan medoxomil/hydrochlorothiazide tablet 12.5mg; 20mg, 12.5mg; 40mg, 25mg; 40mg</i>	1	
<i>pentoxifylline er tablet extended release 400mg</i>	1	
<i>quinapril/hydrochlorothiazide tablet 12.5mg; 10mg, 12.5mg; 20mg, 25mg; 20mg</i>	1	
<i>ranolazine er tablet extended release 12 hour 1000mg, 500mg</i>	1	
<i>sacubitril/valsartan tablet 24mg; 26mg, 49mg; 51mg, 97mg; 103mg</i>	2	QL (60 EA per 30 days)
<i>spironolactone/hydrochlorothiazide tablet 25mg; 25mg</i>	1	
<i>telmisartan/amlodipine tablet 10mg; 40mg, 10mg; 80mg, 5mg; 40mg, 5mg; 80mg</i>	1	
<i>telmisartan/hydrochlorothiazide tablet 12.5mg; 40mg, 12.5mg; 80mg, 25mg; 80mg</i>	1	
<i>trandolapril/verapamil hcl er tablet extended release 1mg; 240mg, 2mg; 180mg, 2mg; 240mg, 4mg; 240mg</i>	1	
<i>triamterene/hydrochlorothiazide capsule 25mg; 37.5mg</i>	1	
<i>triamterene/hydrochlorothiazide tablet 25mg; 37.5mg, 50mg; 75mg</i>	1	
<i>valsartan/hydrochlorothiazide tablet 12.5mg; 160mg, 12.5mg; 320mg, 12.5mg; 80mg, 25mg; 160mg, 25mg; 320mg</i>	1	
VECAMEYL TABLET 2.5MG	4	
VYNDAMAX CAPSULE 61MG	4	QL (30 EA per 30 days) PA
<b>Diuretics, Loop</b>		
<i>bumetanide injection 0.25mg/ml</i>	1	
<i>bumetanide tablet 0.5mg, 1mg, 2mg</i>	1	
EDECRIN TABLET 25MG	4	
ENBUMYST SOLUTION 0.5MG/0.1ML	3	PA
<i>ethacrynate sodium injection 50mg</i>	4	
<i>ethacrynic acid tablet 25mg</i>	1	
FUROSCIX INJECTION 80MG/10ML	3	PA
<i>furosemide injection 10mg/ml</i>	1	
<i>furosemide oral solution 10mg/ml, 40mg/5ml</i>	1	
<i>furosemide tablet 20mg, 40mg, 80mg</i>	1	
LASIX ONYU INJECTION 80MG/2.67ML	3	PA
SOANZ TABLET 20MG, 40MG, 60MG	3	ST

Drug Name	Drug Tier	Requirements/Limits
SODIUM EDECRIN INJECTION 50MG	4	
<i>torse mide tablet 100mg, 10mg, 20mg, 5mg</i>	1	
<b>Diuretics, Potassium-sparing</b>		
<i>amiloride hcl tablet 5mg</i>	1	
<i>triamterene capsule 100mg, 50mg</i>	3	
<b>Diuretics, Thiazide</b>		
<i>chlorthalidone tablet 25mg, 50mg</i>	1	
HEMICLOR TABLET 12.5MG	3	
<i>hydrochlorothiazide capsule 12.5mg</i>	1	
<i>hydrochlorothiazide tablet 12.5mg, 25mg, 50mg</i>	1	
<i>indapamide tablet 1.25mg, 2.5mg</i>	1	
INZIRQO SUSPENSION RECONSTITUTED 10MG/ML	3	PA
<i>metolazone tablet 10mg, 2.5mg, 5mg</i>	1	
<b>Dyslipidemics, Fibric Acid Derivatives</b>		
<i>fenofibrate micronized capsule 134mg, 200mg, 67mg</i>	1	
<i>fenofibrate capsule 130mg, 43mg</i>	1	
<i>fenofibrate tablet 120mg, 145mg, 160mg, 40mg, 48mg, 54mg</i>	1	
<i>fenofibric acid dr capsule delayed release 135mg, 45mg</i>	1	
FENOGLIDE TABLET 120MG	3	
<i>gemfibrozil tablet 600mg</i>	1	
<b>Dyslipidemics, HMG CoA Reductase Inhibitors</b>		
ALTOPREV TABLET EXTENDED RELEASE 24 HOUR 20MG, 40MG, 60MG	3	ST
ATORVALIQ SUSPENSION 20MG/5ML	3	ST
<i>atorvastatin calcium tablet 10mg, 20mg, 40mg, 80mg</i>	1	
EZALLOR SPRINKLE CAPSULE SPRINKLE 10MG, 20MG, 40MG, 5MG	3	ST
FLOLIPID SUSPENSION 20MG/5ML, 40MG/5ML	3	ST
<i>fluvastatin sodium er tablet extended release 24 hour 80mg</i>	1	
<i>fluvastatin capsule 20mg, 40mg</i>	1	
LIVALO TABLET 1MG, 2MG, 4MG	2	ST
<i>lovastatin tablet 10mg, 20mg, 40mg</i>	1	
<i>pitavastatin calcium tablet 1mg, 2mg, 4mg</i>	1	
<i>pravastatin sodium tablet 10mg, 20mg, 40mg, 80mg</i>	1	
<i>rosuvastatin calcium tablet 10mg, 20mg, 40mg, 5mg</i>	1	
<i>simvastatin tablet 10mg, 20mg, 40mg, 5mg, 80mg</i>	1	
ZYPITAMAG TABLET 2MG, 4MG	3	ST
<b>Dyslipidemics, Other</b>		
<i>cholestyramine light packet 4gm</i>	1	
<i>cholestyramine light powder 4gm/dose</i>	1	
<i>colesevelam hydrochloride tablet 625mg</i>	1	
<i>colestipol hydrochloride granules 5gm</i>	1	
<i>colestipol hydrochloride packet 5gm</i>	1	
<i>colestipol hydrochloride tablet 1gm</i>	1	
<i>ezetimibe/simvastatin tablet 10mg; 10mg, 10mg; 20mg, 10mg; 40mg, 10mg; 80mg</i>	1	
<i>ezetimibe tablet 10mg</i>	1	
<i>icosapent ethyl capsule 0.5gm, 1gm</i>	1	
JUXTAPID CAPSULE 10MG, 5MG	4	QL (30 EA per 30 days) PA
JUXTAPID CAPSULE 20MG, 30MG	4	QL (60 EA per 30 days) PA
LEQVIO INJECTION 284MG/1.5ML	3	QL (3 ML per 180 days) PA

Drug Name	Drug Tier	Requirements/Limits
LOVAZA CAPSULE 375MG; 465MG; 1GM	3	
MYQORZO TABLET 5MG	4	QL (30 EA per 30 days) PA
NEXLETOL TABLET 180MG	2	QL (30 EA per 30 days) PA
NEXLIZET TABLET 180MG; 10MG	2	QL (30 EA per 30 days) PA
<i>niacin er tablet extended release 1000mg, 500mg, 750mg</i>	1	
<i>omega-3-acid ethyl esters capsule 375mg; 465mg; 1gm</i>	1	
PRALUENT INJECTION 150MG/ML, 75MG/ML	2	QL (2 ML per 28 days) PA
<i>prevalite packet 4gm</i>	1	
<i>prevalite powder 4gm/dose</i>	1	
REDEMPLO INJECTION 25MG/0.5ML	4	QL (0.5 ML per 84 days) PA
REPATHA PUSHTRONEX SYSTEM INJECTION 420MG/3.5ML	2	QL (7 ML per 28 days) PA
REPATHA SURECLICK INJECTION 140MG/ML	2	QL (3 ML per 28 days) PA
REPATHA INJECTION 140MG/ML	2	QL (3 ML per 28 days) PA
ROSUVASTATIN/EZETIMIBE TABLET 10MG; 10MG, 10MG; 20MG, 10MG; 40MG, 10MG; 5MG	3	ST
ROSZET TABLET 10MG; 10MG, 10MG; 20MG, 10MG; 40MG, 10MG; 5MG	3	ST
TRYNGOLZA INJECTION 80MG/0.8ML	4	QL (0.8 ML per 28 days) PA
<b>Mineralocorticoid Receptor Antagonists</b>		
<i>eplerenone tablet 25mg, 50mg</i>	1	
KERENDIA TABLET 10MG, 20MG, 40MG	3	QL (30 EA per 30 days) PA
<i>spironolactone tablet 100mg, 25mg, 50mg</i>	1	
<b>Sodium-Glucose Co-Transporter 2 Inhibitors (SGLT2i)</b>		
DAPAGLIFLOZIN PROPANEDIOL TABLET 10MG, 5MG	2	QL (30 EA per 30 days)
FARXIGA TABLET 10MG, 5MG	2	QL (30 EA per 30 days)
INPEFA TABLET 200MG, 400MG	3	ST
INVOKANA TABLET 100MG, 300MG	3	QL (30 EA per 30 days) ST
JARDIANCE TABLET 10MG, 25MG	2	QL (30 EA per 30 days)
STEGLATRO TABLET 15MG	3	QL (30 EA per 30 days) ST
STEGLATRO TABLET 5MG	3	QL (60 EA per 30 days) ST
<b>Vasodilators, Direct-acting Arterial/Venous</b>		
ISORDIL TITRADOSE TABLET 5MG	3	
ISORDIL TITRADOSE TABLET 40MG	4	
<i>isosorbide dinitrate tablet 10mg, 20mg, 30mg, 40mg, 5mg</i>	1	
<i>isosorbide mononitrate er tablet extended release 24 hour 120mg, 30mg, 60mg</i>	1	
<i>isosorbide mononitrate tablet 10mg, 20mg</i>	1	
NITRO-BID OINTMENT 2%	3	
NITRO-DUR PATCH 24 HOUR 0.3MG/HR, 0.8MG/HR	4	
<i>nitroglycerin transdermal patch 24 hour 0.1mg/hr, 0.2mg/hr, 0.4mg/hr, 0.6mg/hr</i>	1	
<i>nitroglycerin solution 0.4mg/spray</i>	1	
<i>nitroglycerin tablet sublingual 0.3mg, 0.4mg, 0.6mg</i>	1	
VERQUVO TABLET 10MG, 2.5MG, 5MG	2	QL (30 EA per 30 days) PA
<b>Vasodilators, Direct-acting Arterial</b>		
<i>hydralazine hydrochloride injection 20mg/ml</i>	1	
<i>hydralazine hydrochloride tablet 100mg, 10mg, 25mg, 50mg</i>	1	
<i>minoxidil tablet 10mg, 2.5mg</i>	1	
<b>Central Nervous System Agents</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Attention Deficit Hyperactivity Disorder Agents, Amphetamines</b>		
ADDERALL XR CAPSULE EXTENDED RELEASE 24 HOUR 1.25MG; 1.25MG; 1.25MG; 1.25MG, 2.5MG; 2.5MG; 2.5MG; 2.5MG; 3.75MG; 3.75MG; 3.75MG; 3.75MG, 5MG; 5MG; 5MG; 5MG, 6.25MG; 6.25MG; 6.25MG; 6.25MG, 7.5MG; 7.5MG; 7.5MG	3	QL (60 EA per 30 days)
ADDERALL TABLET 1.25MG; 1.25MG; 1.25MG; 1.25MG, 1.875MG; 1.875MG; 1.875MG; 1.875MG, 2.5MG; 2.5MG; 2.5MG; 2.5MG, 3.125MG; 3.125MG; 3.125MG; 3.125MG, 3.75MG; 3.75MG; 3.75MG; 3.75MG, 5MG; 5MG; 5MG; 5MG, 7.5MG; 7.5MG; 7.5MG; 7.5MG	3	QL (90 EA per 30 days)
<i>amphetamine/dextroamphetamine capsule extended release 24 hour 1.25mg; 1.25mg; 1.25mg; 1.25mg, 2.5mg; 2.5mg; 2.5mg; 2.5mg, 3.75mg; 3.75mg; 3.75mg; 3.75mg, 5mg; 5mg; 5mg; 5mg, 6.25mg; 6.25mg; 6.25mg; 6.25mg, 7.5mg; 7.5mg; 7.5mg; 7.5mg</i>	1	QL (60 EA per 30 days)
<i>amphetamine/dextroamphetamine tablet 1.25mg; 1.25mg; 1.25mg; 1.25mg, 1.875mg; 1.875mg; 1.875mg; 1.875mg, 2.5mg; 2.5mg; 2.5mg; 2.5mg, 3.125mg; 3.125mg; 3.125mg; 3.125mg, 3.75mg; 3.75mg; 3.75mg; 3.75mg, 5mg; 5mg; 5mg; 5mg, 7.5mg; 7.5mg; 7.5mg; 7.5mg</i>	1	QL (90 EA per 30 days)
DESOXYN TABLET 5MG	4	QL (150 EA per 30 days) PA
DEXEDRINE CAPSULE EXTENDED RELEASE 24 HOUR 15MG	4	QL (120 EA per 30 days)
DEXEDRINE CAPSULE EXTENDED RELEASE 24 HOUR 10MG	4	QL (180 EA per 30 days)
<i>dextroamphetamine sulfate er capsule extended release 24 hour 15mg</i>	1	QL (120 EA per 30 days)
<i>dextroamphetamine sulfate er capsule extended release 24 hour 10mg</i>	1	QL (180 EA per 30 days)
<i>dextroamphetamine sulfate er capsule extended release 24 hour 5mg</i>	1	QL (60 EA per 30 days)
<i>dextroamphetamine sulfate tablet 10mg</i>	1	QL (180 EA per 30 days)
<i>dextroamphetamine sulfate tablet 2.5mg, 7.5mg</i>	1	QL (240 EA per 30 days)
<i>dextroamphetamine sulfate tablet 30mg</i>	1	QL (60 EA per 30 days)
<i>dextroamphetamine sulfate tablet 15mg, 20mg, 5mg</i>	1	QL (90 EA per 30 days)
DYANAVEL XR TABLET EXTENDED RELEASE 10MG, 15MG, 20MG, 5MG	3	QL (30 EA per 30 days)
<i>methamphetamine hydrochloride tablet 5mg</i>	1	QL (150 EA per 30 days) PA
XELSTRYM PATCH 13.5MG/9HR, 18MG/9HR, 4.5MG/9HR, 9MG/9HR	3	QL (30 EA per 30 days)
ZENZEDI TABLET 10MG	3	QL (180 EA per 30 days)
ZENZEDI TABLET 2.5MG, 7.5MG	3	QL (240 EA per 30 days)
ZENZEDI TABLET 30MG	3	QL (60 EA per 30 days)
ZENZEDI TABLET 15MG, 20MG, 5MG	3	QL (90 EA per 30 days)
<b>Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines</b>		
APTENSIO XR CAPSULE EXTENDED RELEASE 24 HOUR 10MG, 15MG, 20MG, 30MG, 40MG, 50MG, 60MG	3	QL (30 EA per 30 days)
<i>atomoxetine hydrochloride capsule 100mg, 18mg, 25mg</i>	1	QL (30 EA per 30 days)
<i>atomoxetine hydrochloride capsule 10mg</i>	1	QL (60 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>atomoxetine capsule 100mg, 18mg, 25mg, 40mg, 60mg, 80mg</i>	1	QL (30 EA per 30 days)
<i>atomoxetine capsule 10mg</i>	1	QL (60 EA per 30 days)
CONCERTA TABLET EXTENDED RELEASE 18MG, 27MG, 54MG	3	QL (30 EA per 30 days)
CONCERTA TABLET EXTENDED RELEASE 36MG	3	QL (60 EA per 30 days)
COTEMPLA XR-ODT TABLET EXTENDED RELEASE DISINTEGRATING 25.9MG	3	QL (60 EA per 30 days)
<i>dexmethylphenidate hcl tablet 10mg, 5mg</i>	1	QL (60 EA per 30 days)
<i>dexmethylphenidate hydrochloride er capsule extended release 24 hour 10mg, 15mg, 20mg, 25mg, 30mg, 35mg, 40mg, 5mg</i>	1	QL (30 EA per 30 days)
<i>dexmethylphenidate hydrochloride tablet 2.5mg</i>	1	QL (60 EA per 30 days)
FOCALIN XR CAPSULE EXTENDED RELEASE 24 HOUR 10MG, 15MG, 20MG, 25MG, 30MG, 35MG, 40MG, 5MG	3	QL (30 EA per 30 days)
FOCALIN TABLET 10MG, 2.5MG, 5MG	3	QL (60 EA per 30 days)
<i>guanfacine hydrochloride er tablet extended release 24 hour 1mg, 2mg, 3mg, 4mg</i>	1	
METADATE CD CAPSULE EXTENDED RELEASE 10MG, 20MG, 30MG, 40MG, 50MG, 60MG	3	QL (30 EA per 30 days)
<i>methylphenidate hydrochloride er (cd) capsule extended release 10mg, 20mg, 30mg, 40mg, 50mg, 60mg</i>	1	QL (30 EA per 30 days)
<i>methylphenidate hydrochloride er (la) capsule extended release 24 hour 10mg, 20mg, 30mg, 40mg, 60mg</i>	1	QL (30 EA per 30 days)
METHYLPHENIDATE HYDROCHLORIDE ER (OSM) TABLET EXTENDED RELEASE 45MG, 63MG	1	QL (30 EA per 30 days)
<i>methylphenidate hydrochloride er (osm) tablet extended release 18mg, 27mg, 54mg, 72mg</i>	1	QL (30 EA per 30 days)
<i>methylphenidate hydrochloride er (osm) tablet extended release 36mg</i>	1	QL (60 EA per 30 days)
<i>methylphenidate hydrochloride er (xr) capsule extended release 24 hour 10mg, 15mg, 20mg, 30mg, 40mg, 50mg, 60mg</i>	1	QL (30 EA per 30 days)
<i>methylphenidate hydrochloride er tablet extended release 24 hour 18mg</i>	1	QL (30 EA per 30 days)
<i>methylphenidate hydrochloride er tablet extended release 10mg</i>	1	QL (180 EA per 30 days)
<i>methylphenidate hydrochloride er tablet extended release 20mg</i>	1	QL (90 EA per 30 days)
<i>methylphenidate hydrochloride solution 10mg/5ml, 5mg/5ml</i>	1	
<i>methylphenidate hydrochloride tablet chewable 10mg</i>	1	QL (180 EA per 30 days)
<i>methylphenidate hydrochloride tablet chewable 2.5mg, 5mg</i>	1	QL (90 EA per 30 days)
<i>methylphenidate hydrochloride tablet 10mg, 20mg, 5mg</i>	1	QL (90 EA per 30 days)
ONYDA XR SUSPENSION EXTENDED RELEASE 0.1MG/ML	3	QL (120 ML per 30 days) PA
RELEXXII TABLET EXTENDED RELEASE 18MG, 27MG, 45MG, 54MG, 63MG, 72MG	3	QL (30 EA per 30 days)
RELEXXII TABLET EXTENDED RELEASE 36MG	3	QL (60 EA per 30 days)
RITALIN LA CAPSULE EXTENDED RELEASE 24 HOUR 10MG, 20MG, 30MG, 40MG	3	QL (30 EA per 30 days)
RITALIN TABLET 10MG, 20MG, 5MG	3	QL (90 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
STRATTERA CAPSULE 100MG, 18MG, 25MG, 40MG, 60MG, 80MG	3	QL (30 EA per 30 days)
STRATTERA CAPSULE 10MG	3	QL (60 EA per 30 days)
<b>Central Nervous System, Other</b>		
ALLZITAL TABLET 325MG; 25MG	3	
AQNEURSA PACKET 1GM	4	QL (120 EA per 30 days) PA
AUSTEDO XR PATIENT TITRATION KIT TABLET EXTENDED RELEASE THERAPY PACK 0	4	QL (56 EA per 365 days) PA ; (12mg & 18mg & 24mg & 30mg Pack)
AUSTEDO XR PATIENT TITRATION KIT TABLET EXTENDED RELEASE THERAPY PACK 0	4	QL (84 EA per 365 days) PA ; (6mg & 12mg & 24mg Pack)
AUSTEDO XR TABLET EXTENDED RELEASE 24 HOUR 12MG, 18MG, 24MG, 30MG, 36MG, 42MG, 48MG, 6MG	4	QL (30 EA per 30 days) PA
AUSTEDO TABLET 12MG, 6MG, 9MG	4	QL (120 EA per 30 days) PA
BUPAP TABLET 300MG; 50MG	3	
<i>butalbital/acetaminophen capsule 300mg; 50mg</i>	4	
<i>butalbital/acetaminophen tablet 300mg; 50mg, 325mg; 50mg</i>	1	
<i>butalbital/aspirin/caffeine capsule 325mg; 50mg; 40mg</i>	1	
<i>caffeine citrate solution 60mg/3ml</i>	4	
<i>clonidine hydrochloride injection 100mcg/ml, 500mcg/ml</i>	1	B/D
COBENFY STARTER PACK CAPSULE THERAPY PACK 20MG; 0	4	QL (112 EA per 365 days) PA
COBENFY CAPSULE 20MG; 100MG, 20MG; 50MG, 30MG; 125MG	4	QL (60 EA per 30 days) PA
DAYBUE STIX PACKET 5000MG, 6000MG	4	QL (120 EA per 30 days) PA
DAYBUE STIX PACKET 8000MG	4	QL (60 EA per 30 days) PA
DURACLON INJECTION 100MCG/ML	3	B/D
<i>edaravone injection 30mg/100ml, 60mg/100ml</i>	4	PA
EXSERVAN FILM 50MG	4	PA
FIRDAPSE TABLET 10MG	4	QL (300 EA per 30 days) PA
INGREZZA CAPSULE SPRINKLE 60MG, 80MG	4	QL (30 EA per 30 days) PA
INGREZZA CAPSULE SPRINKLE 40MG	4	QL (60 EA per 30 days) PA
INGREZZA CAPSULE THERAPY PACK 0	4	QL (56 EA per 365 days) PA
INGREZZA CAPSULE 60MG, 80MG	4	QL (30 EA per 30 days) PA
INGREZZA CAPSULE 40MG	4	QL (60 EA per 30 days) PA
LYNKUET CAPSULE 60MG	3	QL (60 EA per 30 days) PA
NUDEXTA CAPSULE 20MG; 10MG	4	PA
PRIALT INJECTION 100MCG/ML, 500MCG/20ML, 500MCG/5ML	4	B/D
QALSODY INJECTION 100MG/15ML	4	PA
RADICAVA ORS STARTER KIT SUSPENSION 105MG/5ML	4	PA
RADICAVA ORS SUSPENSION 105MG/5ML	4	PA
RADICAVA INJECTION 30MG/100ML	4	PA
RELYVRIO PACKET 3GM; 1GM	4	QL (60 EA per 30 days) PA
RILUTEK TABLET 50MG	4	
<i>riluzole tablet 50mg</i>	1	
TENCON TABLET 325MG; 50MG	1	
<i>tetrabenazine tablet 12.5mg</i>	1	PA
<i>tetrabenazine tablet 25mg</i>	4	PA
TIGLUTIK SUSPENSION 50MG/10ML	4	PA

Drug Name	Drug Tier	Requirements/Limits
VEOZAH TABLET 45MG	3	QL (30 EA per 30 days) PA
XENAZINE TABLET 12.5MG, 25MG	4	PA
<b>Fibromyalgia Agents</b>		
SAVELLA TITRATION PACK MISCELLANEOUS 0	2	QL (110 EA per 365 days)
SAVELLA TABLET 100MG, 12.5MG, 25MG, 50MG	2	QL (60 EA per 30 days)
TONMYA TABLET SUBLINGUAL 2.8MG	4	PA
<b>Multiple Sclerosis Agents</b>		
AMPYRA TABLET EXTENDED RELEASE 12 HOUR 10MG	4	QL (60 EA per 30 days) PA
AUBAGIO TABLET 14MG, 7MG	4	QL (30 EA per 30 days) PA
AVONEX PEN INJECTION 30MCG/0.5ML	4	QL (4 EA per 28 days) PA
AVONEX INJECTION 30MCG/0.5ML	4	QL (4 EA per 28 days) PA
BAFIERTAM CAPSULE DELAYED RELEASE 95MG	4	QL (120 EA per 30 days) PA
BETASERON INJECTION 0.3MG	4	QL (15 EA per 30 days) PA
BRIUMVI INJECTION 150MG/6ML	4	PA
<i>cladribine tablet therapy pack 10mg</i>	4	PA
COPAXONE INJECTION 40MG/ML	4	QL (12 ML per 28 days) PA
COPAXONE INJECTION 20MG/ML	4	QL (30 ML per 30 days) PA
<i>dalfampridine er tablet extended release 12 hour 10mg</i>	1	QL (60 EA per 30 days) PA
<i>dimethyl fumarate starterpack capsule delayed release therapy pack 0</i>	1	QL (120 EA per 365 days) PA
<i>dimethyl fumarate capsule delayed release 120mg, 240mg</i>	1	QL (60 EA per 30 days) PA
EXTAVIA INJECTION 0.3MG	4	QL (15 EA per 30 days) PA
<i> fingolimod hydrochloride capsule 0.5mg</i>	4	QL (30 EA per 30 days) PA
GILENYA CAPSULE 0.5MG	4	QL (30 EA per 30 days) PA
GILENYA CAPSULE 0.25MG	4	QL (60 EA per 30 days) PA
<i>glatiramer acetate injection 40mg/ml</i>	4	QL (12 ML per 28 days) PA
<i>glatiramer acetate injection 20mg/ml</i>	4	QL (30 ML per 30 days) PA
<i>glatopa injection 40mg/ml</i>	4	QL (12 ML per 28 days) PA
<i>glatopa injection 20mg/ml</i>	4	QL (30 ML per 30 days) PA
KESIMPTA INJECTION 20MG/0.4ML	4	QL (0.4 ML per 28 days) PA
MAVENCLAD TABLET THERAPY PACK 10MG	4	PA
MAYZENT STARTER PACK TABLET THERAPY PACK 0.25MG	3	QL (14 EA per 365 days) PA; (7 tablet Starter Pack)
MAYZENT STARTER PACK TABLET THERAPY PACK 0.25MG	4	QL (24 EA per 365 days) PA ; (12 tablet Starter Pack)
MAYZENT TABLET 0.25MG	4	QL (120 EA per 30 days) PA
MAYZENT TABLET 1MG, 2MG	4	QL (30 EA per 30 days) PA
<i>mitoxantrone hcl injection 2mg/ml</i>	1	PA
OCREVUS ZUNOVO INJECTION 23000UNIT/23ML; 920MG/23ML	4	QL (23 ML per 168 days) PA
OCREVUS INJECTION 300MG/10ML	4	PA
PLEGRIDY STARTER PACK INJECTION 0	4	QL (2 ML per 365 days) PA ; Auto-Injector
PLEGRIDY STARTER PACK INJECTION 0	4	QL (4 ML per 365 days) PA ; Pre-Filled Syringe
PLEGRIDY INJECTION 125MCG/0.5ML	4	QL (1 ML per 28 days) PA
PONVORY 14-DAY STARTER PACK TABLET THERAPY PACK 0	4	QL (28 EA per 365 days) PA
PONVORY TABLET 20MG	4	QL (30 EA per 30 days) PA
REBIF REBIDOSE TITRATION PACK INJECTION 0	4	QL (8.4 ML per 365 days) PA

Drug Name	Drug Tier	Requirements/Limits
REBIF REBIDOSE INJECTION 22MCG/0.5ML, 44MCG/0.5ML	4	QL (6 ML per 28 days) PA
REBIF TITRATION PACK INJECTION 0	4	QL (8.4 ML per 365 days) PA
REBIF INJECTION 22MCG/0.5ML, 44MCG/0.5ML	4	QL (6 ML per 28 days) PA
TASCENSO ODT TABLET DISINTEGRATING 0.25MG, 0.5MG	4	QL (30 EA per 30 days) PA
TECFIDERA STARTER PACK CAPSULE DELAYED RELEASE THERAPY PACK 0	4	QL (120 EA per 365 days) PA
TECFIDERA CAPSULE DELAYED RELEASE 120MG, 240MG	4	QL (60 EA per 30 days) PA
<i>teriflunomide tablet 14mg, 7mg</i>	4	QL (30 EA per 30 days) PA
TYRUKO INJECTION 300MG/15ML	4	PA
TYSABRI INJECTION 300MG/15ML	4	PA
VUMERITY CAPSULE DELAYED RELEASE 231MG	4	QL (120 EA per 30 days) PA
ZEPOSIA 7-DAY STARTER PACK CAPSULE THERAPY PACK 0	4	QL (14 EA per 365 days) PA
ZEPOSIA STARTER KIT CAPSULE THERAPY PACK 0	4	QL (56 EA per 365 days) PA ; (28 Capsules Pack)
ZEPOSIA CAPSULE 0.92MG	4	QL (30 EA per 30 days) PA
<b>Dental and Oral Agents</b>		
<b><i>Dental and Oral Agents</i></b>		
ARESTIN MISCELLANEOUS 1MG	4	
<i>chlorhexidine gluconate solution 0.12%</i>	1	
<i>doxycycline hyclate tablet 20mg</i>	1	
KEPIVANCE INJECTION 5.16MG	4	
KOURZEQ PASTE 0.1%	1	
<i>lidocaine hcl solution 4%</i>	1	
<i>lidocaine hydrochloride viscous solution 2%</i>	1	
<i>lidocaine viscous solution 2%</i>	1	
ORALONE DENTAL PASTE PASTE 0.1%	1	
<i>periogard solution 0.12%</i>	1	
<i>pilocarpine hydrochloride tablet 5mg, 7.5mg</i>	1	
<i>triamcinolone acetonide dental paste paste 0.1%</i>	1	
<b>Dermatological Agents</b>		
<b><i>Acne and Rosacea Agents</i></b>		
ABSORICA LD CAPSULE 16MG, 24MG, 32MG, 8MG	4	
ABSORICA CAPSULE 20MG, 30MG, 40MG	4	
<i>accutane capsule 10mg, 20mg, 30mg, 40mg</i>	1	
<i>acitretin capsule 10mg, 17.5mg, 25mg</i>	1	
<i>adapalene/benzoyl peroxide gel 0.3%; 2.5%</i>	1	
ADAPALENE/BENZOYL PEROXIDE PAD 0.1%; 2.5%	4	
ADAPALENE PAD 0.1%	3	
ADAPALENE SOLUTION 0.1%	4	
<i>amnestem capsule 10mg, 20mg, 30mg, 40mg</i>	1	
ARAZLO LOTION 0.045%	3	QL (90 GM per 30 days)
ATRALIN GEL 0.05%	3	PA
<i>azelaic acid gel 15%</i>	1	QL (100 GM per 30 days)
AZELEX CREAM 20%	3	QL (100 GM per 30 days)
BENZOLYL PEROXIDE FORTE- HC LOTION 7.5%; 1%	4	
BENZOYL PEROXIDE- HC LOTION 5%; 0.5%	3	
<i>brimonidine tartrate gel 0.33%</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
<i>claravis capsule 10mg, 20mg, 30mg, 40mg</i>	1	
<i>clindamycin phosphate/benzoyl peroxide gel 5%; 1.2%</i>	1	
<i>erythromycin/benzoyl peroxide gel 5%; 3%</i>	1	
FABIOR FOAM 0.1%	3	QL (100 GM per 30 days)
FINACEA FOAM 15%	2	QL (50 GM per 30 days)
FINACEA GEL 15%	3	QL (100 GM per 30 days)
<i>isotretinoin capsule 10mg, 20mg, 25mg, 30mg, 35mg, 40mg</i>	1	
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%, 1%</i>	1	
MIRVASO GEL 0.33%	3	PA
NORITATE CREAM 1%	4	
RETIN-A MICRO PUMP GEL 0.04%, 0.08%, 0.1%	3	PA
RETIN-A MICRO GEL 0.04%, 0.06%, 0.1%	3	PA
RETIN-A CREAM 0.025%, 0.05%, 0.1%	3	PA
RETIN-A GEL 0.01%, 0.025%	3	PA
<i>tazarotene cream 0.05%, 0.1%</i>	1	QL (60 GM per 30 days)
TAZAROTENE FOAM 0.1%	3	QL (100 GM per 30 days)
<i>tazarotene gel 0.05%, 0.1%</i>	1	QL (100 GM per 30 days)
TAZORAC CREAM 0.05%, 0.1%	3	QL (60 GM per 30 days)
TAZORAC GEL 0.05%, 0.1%	3	QL (100 GM per 30 days)
<i>tretinoin microsphere pump gel 0.04%, 0.1%</i>	1	PA
<i>tretinoin microsphere gel 0.04%, 0.08%, 0.1%</i>	1	PA
<i>tretinoin cream 0.025%, 0.05%, 0.1%</i>	1	PA
<i>tretinoin gel 0.01%, 0.025%, 0.05%</i>	1	PA
WINLEVI CREAM 1%	3	PA
<i>zenatane capsule 10mg, 20mg, 30mg, 40mg</i>	1	
<b>Dermatitis and Pruritus Agents</b>		
ADBRY INJECTION 150MG/ML	4	QL (6 ML per 28 days) PA
ADBRY INJECTION 300MG/2ML	4	QL (8 ML per 28 days) PA
<i>alclometasone dipropionate cream 0.05%</i>	1	
<i>alclometasone dipropionate ointment 0.05%</i>	1	
<i>amcinonide lotion 0.1%</i>	1	
<i>ammonium lactate cream 12%</i>	1	
<i>ammonium lactate lotion 12%</i>	1	
APEXICON E CREAM 0.05%	4	
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	
<i>betamethasone dipropionate augmented gel 0.05%</i>	1	
<i>betamethasone dipropionate augmented ointment 0.05%</i>	1	
<i>betamethasone dipropionate cream 0.05%</i>	1	
<i>betamethasone dipropionate lotion 0.05%</i>	1	
<i>betamethasone dipropionate ointment 0.05%</i>	1	
<i>betamethasone valerate cream 0.1%</i>	1	
<i>betamethasone valerate foam 0.12%</i>	1	QL (100 GM per 30 days)
<i>betamethasone valerate lotion 0.1%</i>	1	
<i>betamethasone valerate ointment 0.1%</i>	1	
<i>clobetasol propionate e cream 0.05%</i>	1	
<i>clobetasol propionate cream 0.05%</i>	1	
<i>clobetasol propionate gel 0.05%</i>	1	
<i>clobetasol propionate ointment 0.05%</i>	1	
<i>clobetasol propionate shampoo 0.05%</i>	1	
<i>clobetasol propionate solution 0.05%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
CLOBEX LOTION 0.05%	3	
CLOBEX SHAMPOO 0.05%	3	
CORDRAN TAPE 4MCG/SQCM	3	
<i>desonide cream 0.05%</i>	1	
<i>desonide ointment 0.05%</i>	1	QL (120 GM per 30 days)
<i>desoximetasone cream 0.05%, 0.25%</i>	1	QL (100 GM per 30 days)
<i>desoximetasone ointment 0.05%, 0.25%</i>	1	
<i>diflorasone diacetate ointment 0.05%</i>	1	QL (60 GM per 30 days)
<i>doxepin hydrochloride cream 5%</i>	1	QL (90 GM per 30 days) PA
EUCRISA OINTMENT 2%	3	PA
<i>fluocinolone acetonide body oil 0.01%</i>	1	
<i>fluocinolone acetonide scalp oil 0.01%</i>	1	
<i>fluocinolone acetonide topical oil 0.01%</i>	1	
<i>fluocinolone acetonide cream 0.01%, 0.025%</i>	1	
<i>fluocinolone acetonide ointment 0.025%</i>	1	
<i>fluocinolone acetonide solution 0.01%</i>	1	
<i>fluocinonide emulsified base cream 0.05%</i>	1	QL (60 GM per 30 days)
<i>fluocinonide cream 0.1%</i>	1	QL (120 GM per 30 days)
<i>fluocinonide cream 0.05%</i>	1	QL (60 GM per 30 days)
<i>fluocinonide gel 0.05%</i>	1	QL (60 GM per 30 days)
<i>fluocinonide ointment 0.05%</i>	1	QL (60 GM per 30 days)
<i>fluocinonide solution 0.05%</i>	1	QL (60 ML per 30 days)
<i>fluticasone propionate cream 0.05%</i>	1	
<i>fluticasone propionate ointment 0.005%</i>	1	
<i>halcinonide solution 0.1%</i>	1	
<i>halobetasol propionate cream 0.05%</i>	1	
<i>halobetasol propionate foam 0.05%</i>	1	
<i>halobetasol propionate ointment 0.05%</i>	1	
<i>hydrocortisone butyrate (lipid) cream 0.1%</i>	1	QL (60 GM per 30 days)
<i>hydrocortisone butyrate (lipophilic) cream 0.1%</i>	1	QL (60 GM per 30 days)
<i>hydrocortisone butyrate lotion 0.1%</i>	1	
<i>hydrocortisone valerate cream 0.2%</i>	1	QL (60 GM per 30 days)
<i>hydrocortisone cream 1%, 2.5%</i>	1	
<i>hydrocortisone lotion 2.5%</i>	1	
<i>hydrocortisone ointment 2.5%</i>	1	
<i>hydrocortisone ointment 1%</i>	1	QL (100 GM per 30 days)
HYFTOR GEL 0.2%	4	PA
IMPOYZ CREAM 0.025%	4	
KENALOG AEROSOL SOLUTION 0.147MG/GM	3	
KORSUVA INJECTION 65MCG/1.3ML	4	PA
LEXETTE FOAM 0.05%	4	
LOCOID LIPOCREAM CREAM 0.1%	3	QL (60 GM per 30 days)
LOCOID LOTION 0.1%	3	
<i>mometasone furoate cream 0.1%</i>	1	
<i>mometasone furoate ointment 0.1%</i>	1	
<i>mometasone furoate solution 0.1%</i>	1	
OPZELURA CREAM 1.5%	4	QL (240 GM per 30 days) PA
PANDEL CREAM 0.1%	4	
<i>pimecrolimus cream 1%</i>	1	
PRUDOXIN CREAM 5%	3	QL (90 GM per 30 days) PA
<i>selenium sulfide lotion 2.5%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
SERNIVO EMULSION 0.05%	3	
SPEVIGO INJECTION 450MG/7.5ML	4	QL (300 ML per 84 days) PA
SPEVIGO INJECTION 150MG/ML, 300MG/2ML	4	QL (4 ML per 28 days) PA
<i>tacrolimus ointment 0.03%, 0.1%</i>	1	
TOPICORT CREAM 0.05%, 0.25%	3	QL (100 GM per 30 days)
<i>triamcinolone acetonide cream 0.025%, 0.1%, 0.5%</i>	1	
<i>triamcinolone acetonide lotion 0.025%, 0.1%</i>	1	
<i>triamcinolone acetonide ointment 0.025%, 0.1%, 0.5%</i>	1	
ULTRAVATE LOTION 0.05%	3	
VANOS CREAM 0.1%	4	QL (120 GM per 30 days)
ZONALON CREAM 5%	3	QL (90 GM per 30 days) PA
ZORYVE CREAM 0.05%, 0.15%	3	PA
<b>Dermatological Agents, Other</b>		
<i>analpram hc lotion 2.5%; 1%</i>	3	
<i>calcipotriene/betamethasone dipropionate ointment 0.064%; 0.005%</i>	1	QL (400 GM per 30 days)
<i>calcipotriene/betamethasone dipropionate suspension 0.064%; 0.005%</i>	1	QL (400 GM per 30 days)
<i>calcipotriene cream 0.005%</i>	1	QL (120 GM per 30 days)
CALCIPOTRIENE FOAM 0.005%	3	
<i>calcipotriene ointment 0.005%</i>	1	QL (120 GM per 30 days)
<i>calcipotriene solution 0.005%</i>	1	QL (60 ML per 30 days)
CALCITRENE OINTMENT 0.005%	3	QL (120 GM per 30 days)
CARAC CREAM 0.5%	4	
<i>clotrimazole/betamethasone dipropionate cream 0.05%; 1%</i>	1	QL (90 GM per 30 days)
<i>clotrimazole/betamethasone dipropionate lotion 0.05%; 1%</i>	1	QL (60 ML per 30 days)
<i>diclofenac sodium gel 3%</i>	1	QL (300 GM per 30 days) ST
DUOBRII LOTION 0.01%; 0.045%	4	PA
EFUDEX CREAM 5%	3	QL (40 GM per 30 days)
ENSTILAR FOAM 0.064%; 0.005%	4	QL (420 GM per 28 days)
FILSUVEZ GEL 10%	4	PA
FLUOROURACIL CREAM 0.5%	3	
<i>fluorouracil cream 5%</i>	1	QL (40 GM per 30 days)
<i>fluorouracil external solution 2%, 5%</i>	1	
HYDROCORTISONE ACETATE/PRAMOXINE HYDROCHLORIDE SUPPOSITORY 25MG; 18MG	4	
<i>imiquimod pump cream 3.75%</i>	3	QL (56 GM per 30 days)
<i>imiquimod cream 5%</i>	1	QL (48 EA per 30 days)
<i>imiquimod cream 3.75%</i>	3	QL (56 EA per 30 days)
KLISYRI OINTMENT 1%	4	ST
<i>methoxsalen capsule 10mg</i>	4	
NEO-SYNALAR CREAM 0.025%; 0.5%	3	
<i>nystatin/triamcinolone acetonide ointment 100000unit/gm; 0.1%</i>	1	
<i>nystatin/triamcinolone cream 100000unit/gm; 1mg/gm</i>	1	
<i>nystatin/triamcinolone ointment 100000unit/gm; 0.1%</i>	1	
OTEZLA XR TABLET EXTENDED RELEASE 24 HOUR 75MG	4	PA
OTEZLA/OTEZLA XR 28 DAY TREATMENT INITIATION PACK TABLET THERAPY PACK 0	4	PA
OTEZLA TABLET 20MG, 30MG	4	QL (60 EA per 30 days) PA

Drug Name	Drug Tier	Requirements/Limits
<i>podofilox solution 0.5%</i>	1	
PRAMOSONE LOTION 1%; 1%, 2.5%; 1%	3	
RADIAURA CREAM 0.5%; 3%	4	
REGRANEX GEL 0.01%	4	PA
SANTYL OINTMENT 250UNIT/GM	3	
<i>silver sulfadiazine cream 1%</i>	1	
SOFDRA GEL 12.45%	3	QL (40.2 ML per 30 days) PA
SORILUX FOAM 0.005%	3	
<i>ssd cream 1%</i>	1	
TACLONEX SUSPENSION 0.064%; 0.005%	4	QL (400 GM per 30 days)
<i>urea lotion 40%</i>	1	
UVADEX SOLUTION 20MCG/ML	4	
VECTICAL OINTMENT 3MCG/GM	3	
VEREGEN OINTMENT 15%	4	
VTAMA CREAM 1%	4	PA
WYNZORA CREAM 0.064%; 0.005%	4	QL (420 GM per 28 days)
XERESE CREAM 5%; 1%	4	QL (10 GM per 30 days)
ZORYVE CREAM 0.3%	3	PA
ZYCLARA PUMP CREAM 2.5%	4	QL (15 GM per 30 days)
ZYCLARA PUMP CREAM 3.75%	4	QL (56 GM per 30 days)
ZYCLARA CREAM 3.75%	4	QL (56 EA per 30 days)
<b><i>Pediculicides/Scabicides</i></b>		
<i>ivermectin cream 1%</i>	1	QL (45 GM per 30 days)
<i>malathion lotion 0.5%</i>	1	
<i>permethrin cream 5%</i>	1	
SOOLANTRA CREAM 1%	3	QL (45 GM per 30 days)
<b><i>Topical Anti-infectives</i></b>		
<i>acyclovir cream 5%</i>	1	QL (5 GM per 30 days)
<i>acyclovir ointment 5%</i>	1	QL (60 GM per 30 days)
ACZONE GEL 5%	3	
BENZOYL PEROXIDE GEL 6.5%	4	
<i>ciclodan solution 8%</i>	1	PA
<i>ciclopirox nail lacquer solution 8%</i>	1	PA
<i>ciclopirox olamine cream 0.77%</i>	1	
<i>ciclopirox gel 0.77%</i>	1	
<i>ciclopirox shampoo 1%</i>	1	
<i>ciclopirox suspension 0.77%</i>	1	
CLEOCIN-T LOTION 1%	3	QL (75 ML per 30 days)
CLINDAGEL GEL 1%	3	
<i>clindamycin phosphate gel 1%</i>	1	
<i>clindamycin phosphate lotion 1%</i>	1	QL (75 ML per 30 days)
<i>clindamycin phosphate external solution 1%</i>	1	QL (60 ML per 30 days)
<i>dapsone gel 7.5%</i>	1	
DENAVIR CREAM 1%	3	
EPSOLAY CREAM 5%	3	PA
<i>ery pad 2%</i>	1	
<i>erythromycin gel 2%</i>	1	
<i>erythromycin solution 2%</i>	1	
<i>mafenide acetate packet 5%</i>	1	
<i>mupirocin cream 2%</i>	1	
<i>mupirocin ointment 2%</i>	1	QL (110 GM per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>penciclovir cream 1%</i>	1	
ZELSUVMI GEL 10.3%	4	PA
ZOVIRAX CREAM 5%	3	QL (5 GM per 30 days)
ZOVIRAX OINTMENT 5%	3	QL (60 GM per 30 days)
<b>Electrolytes/Minerals/Metals/Vitamins</b>		
<b><i>Electrolyte/Mineral Replacement</i></b>		
AMINOSYN II INJECTION 107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 405MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 750MG/100ML, 993MG/100ML; 1018MG/100ML; 700MG/100ML; 738MG/100ML; 500MG/100ML; 300MG/100ML; 660MG/100ML; 1000MG/100ML; 1050MG/100ML; 172MG/100ML; 270MG/100ML; 298MG/100ML; 722MG/100ML; 530MG/100ML; 400MG/100ML; 200MG/100ML; 500MG/100ML	3	B/D
AMINOSYN-PF 7% INJECTION 32.5MEQ/L; 490MG/100ML; 861MG/100ML; 370MG/100ML; 576MG/100ML; 270MG/100ML; 220MG/100ML; 534MG/100ML; 831MG/100ML; 475MG/100ML; 125MG/100ML; 300MG/100ML; 570MG/100ML; 347MG/100ML; 50MG/100ML; 360MG/100ML; 125MG/100ML; 44MG/100ML; 452MG/100ML	3	B/D
AMINOSYN-PF INJECTION 46MEQ/L; 698MG/100ML; 1227MG/100ML; 527MG/100ML; 820MG/100ML; 385MG/100ML; 312MG/100ML; 760MG/100ML; 1200MG/100ML; 677MG/100ML; 180MG/100ML; 427MG/100ML; 812MG/100ML; 495MG/100ML; 70MG/100ML; 512MG/100ML; 180MG/100ML; 44MG/100ML; 673MG/100ML	3	B/D
CARBAGLU TABLET SOLUBLE 200MG	4	
<i>carglumic acid tablet soluble 200mg</i>	4	
CLINIMIX 4.25%/DEXTROSE 10% INJECTION 37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 10GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	B/D
CLINIMIX 4.25%/DEXTROSE 5% INJECTION 37MEQ/L; 880MG/100ML; 489MG/100ML; 17MEQ/L; 5GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 170MG/100ML; 238MG/100ML; 289MG/100ML; 213MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX 5%/DEXTROSE 15% INJECTION 42MEQ/1000ML; 1035MG/100ML; 575MG/100ML; 20MEQ/1000ML; 15GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	B/D
CLINIMIX 5%/DEXTROSE 20% INJECTION 42MEQ/L; 1035MG/100ML; 575MG/100ML; 20MEQ/L; 20GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 200MG/100ML; 280MG/100ML; 340MG/100ML; 250MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	B/D
CLINIMIX 6/5 INJECTION 1242MG/100ML; 690MG/100ML; 5GM/100ML; 618MG/100ML; 288MG/100ML; 360MG/100ML; 438MG/100ML; 348MG/100ML; 240MG/100ML; 336MG/100ML; 408MG/100ML; 300MG/100ML; 252MG/100ML; 108MG/100ML; 24MG/100ML; 348MG/100ML	3	B/D
CLINIMIX 8/10 INJECTION 1656MG/100ML; 920MG/100ML; 10GM/100ML; 824MG/100ML; 384MG/100ML; 480MG/100ML; 584MG/100ML; 464MG/100ML; 320MG/100ML; 448MG/100ML; 544MG/100ML; 400MG/100ML; 336MG/100ML; 144MG/100ML; 32MG/100ML; 464MG/100ML	3	B/D
CLINIMIX 8/14 INJECTION 1656MG/100ML; 920MG/100ML; 14GM/100ML; 824MG/100ML; 384MG/100ML; 480MG/100ML; 584MG/100ML; 464MG/100ML; 320MG/100ML; 448MG/100ML; 544MG/100ML; 400MG/100ML; 336MG/100ML; 144MG/100ML; 32MG/100ML; 464MG/100ML	3	B/D
CLINIMIX E 2.75%/DEXTROSE 5% INJECTION 570MG/100ML; 316MG/100ML; 33MG/100ML; 5GM/100ML; 515MG/100ML; 132MG/100ML; 165MG/100ML; 201MG/100ML; 159MG/100ML; 51MG/100ML; 110MG/100ML; 454MG/100ML; 154MG/100ML; 261MG/100ML; 187MG/100ML; 138MG/100ML; 217MG/100ML; 112MG/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	3	B/D
CLINIMIX E 4.25%/DEXTROSE 10% INJECTION 880MG/100ML; 489MG/100ML; 33MG/100ML; 10GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX E 4.25%/DEXTROSE 5% INJECTION 880MG/100ML; 489MG/100ML; 33MG/100ML; 5GM/100ML; 438MG/100ML; 204MG/100ML; 255MG/100ML; 311MG/100ML; 247MG/100ML; 51MG/100ML; 170MG/100ML; 702MG/100ML; 238MG/100ML; 261MG/100ML; 289MG/100ML; 213MG/100ML; 297MG/100ML; 77MG/100ML; 179MG/100ML; 77MG/100ML; 17MG/100ML; 247MG/100ML	3	B/D
CLINIMIX E 5%/DEXTROSE 15% INJECTION 1035MG/100ML; 575MG/100ML; 33MG/100ML; 15GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	B/D
CLINIMIX E 5%/DEXTROSE 20% INJECTION 1035MG/100ML; 575MG/100ML; 33MG/100ML; 20GM/100ML; 515MG/100ML; 240MG/100ML; 300MG/100ML; 365MG/100ML; 290MG/100ML; 51MG/100ML; 200MG/100ML; 826MG/100ML; 280MG/100ML; 261MG/100ML; 340MG/100ML; 250MG/100ML; 340MG/100ML; 59MG/100ML; 210MG/100ML; 90MG/100ML; 20MG/100ML; 290MG/100ML	3	B/D
CLINIMIX E 8/10 INJECTION 83MEQ/L; 1656MG/100ML; 920MG/100ML; 33MG/100ML; 10GM/100ML; 824MG/100ML; 384MG/100ML; 480MG/100ML; 584MG/100ML; 464MG/100ML; 51MG/100ML; 320MG/100ML; 448MG/100ML; 261MG/100ML; 544MG/100ML; 400MG/100ML; 205MG/100ML; 336MG/100ML; 144MG/100ML; 32MG/100ML; 464MG/100ML	3	B/D
CLINIMIX E 8/14 INJECTION 83MEQ/L; 1656MG/100ML; 920MG/100ML; 33MG/100ML; 14GM/100ML; 824MG/100ML; 384MG/100ML; 480MG/100ML; 584MG/100ML; 464MG/100ML; 51MG/100ML; 320MG/100ML; 448MG/100ML; 261MG/100ML; 544MG/100ML; 400MG/100ML; 205MG/100ML; 336MG/100ML; 144MG/100ML; 32MG/100ML; 464MG/100ML	3	B/D
CLINISOL SF 15% INJECTION 151MEQ/L; 2170MG/100ML; 1470MG/100ML; 434MG/100ML; 749MG/100ML; 1040MG/100ML; 894MG/100ML; 749MG/100ML; 1040MG/100ML; 1180MG/100ML; 749MG/100ML; 1040MG/100ML; 894MG/100ML; 592MG/100ML; 749MG/100ML; 250MG/100ML; 39MG/100ML; 960MG/100ML	1	B/D
<i>dextrose 10% injection 10%</i>	1	
<i>dextrose 5%/sodium chloride 0.45% injection 5%; 0.45%</i>	1	
<i>dextrose 5%/sodium chloride 0.9% injection 5%; 0.9%</i>	1	
<i>dextrose 5% injection 5%</i>	1	
<i>effe-r-k tablet effervescent 25meq</i>	1	

Drug Name	Drug Tier	Requirements/Limits
KABIVEN INJECTION 38MEQ/L; 467MG/100ML; 330MG/100ML; 99MG/100ML; 3.8MEQ/L; 45MEQ/L; 10.8GM/100ML; 164MG/100ML; 231MG/100ML; 199MG/100ML; 164MG/100ML; 231MG/100ML; 263MG/100ML; 7.8MEQ/L; 164MG/100ML; 231MG/100ML; 9.7MMOL/L; 23MEQ/L; 199MG/100ML; 131MG/100ML; 31MEQ/L; 7.8MEQ/L; 164MG/100ML; 55MG/100ML; 6.7MG/100ML; 213MG/100ML	4	B/D
<i>klor-con 10 tablet extended release 10meq</i>	1	
<i>klor-con 8 tablet extended release 8meq</i>	1	
<i>klor-con m10 tablet extended release 10meq</i>	1	
<i>klor-con m15 tablet extended release 15meq</i>	1	
<i>klor-con m20 tablet extended release 20meq</i>	1	
<i>klor-con/ef tablet effervescent 25meq</i>	1	
<i>magnesium sulfate injection 3gm/100ml, 50%</i>	1	
PERIKABIVEN INJECTION 333MG/100ML; 235MG/100ML; 71MG/100ML; 20MG/100ML; 6.8GM/100ML; 116MG/100ML; 164MG/100ML; 141MG/100ML; 116MG/100ML; 164MG/100ML; 187MG/100ML; 68MG/100ML; 116MG/100ML; 164MG/100ML; 124MG/100ML; 141MG/100ML; 94MG/100ML; 170MG/100ML; 105MG/100ML; 3.5GM/100ML; 116MG/100ML; 40MG/100ML; 4.8MG/100ML; 152MG/100ML	4	B/D
PLENAMINE INJECTION 147.4MEQ/L; 2.17GM/100ML; 1.47GM/100ML; 434MG/100ML; 749MG/100ML; 1.04GM/100ML; 894MG/100ML; 749MG/100ML; 1.04GM/100ML; 1.18GM/100ML; 749MG/100ML; 1.04GM/100ML; 894MG/100ML; 592MG/100ML; 749MG/100ML; 250MG/100ML; 39MG/100ML; 960MG/100ML	1	B/D
POKONZA PACKET 10MEQ, 15MEQ	4	
<i>potassium chloride er capsule extended release 10meq, 8meq</i>	1	
<i>potassium chloride er tablet extended release 10meq, 15meq, 20meq, 8meq</i>	1	
<i>potassium chloride sr tablet extended release 8meq</i>	1	
<i>potassium chloride injection 10meq/100ml, 20meq/100ml, 40meq/100ml</i>	1	
<i>potassium chloride packet 40meq</i>	4	
<i>potassium citrate er tablet extended release 1080mg, 15meq, 540mg</i>	1	
PREMASOL INJECTION 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
PROSOL INJECTION 140MEQ/100ML; 2.76GM/100ML; 1.96GM/100ML; 600MG/100ML; 1.02GM/100ML; 2.06GM/100ML; 1.18GM/100ML; 1.08GM/100ML; 1.08GM/100ML; 1.35GM/100ML; 760MG/100ML; 1GM/100ML; 1.34GM/100ML; 1.02GM/100ML; 980MG/100ML; 320MG/100ML; 50MG/100ML; 1.44GM/100ML	3	B/D
SODIUM BICARBONATE/DEXTROSE INJECTION 5%; 150MEQ/L	1	
<i>sodium bicarbonate injection 4.2%, 8.4%</i>	1	
<i>sodium chloride 0.45% injection 0.45%</i>	1	
<i>sodium chloride injection 0.45%, 0.9%</i>	1	
TRAVASOL INJECTION 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 500MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
TROPHAMINE INJECTION 0.54GM/100ML; 1.2GM/100ML; 3 0.32GM/100ML; 0; 0; 0.5GM/100ML; 0.36GM/100ML; 0.48GM/100ML; 0.82GM/100ML; 1.4GM/100ML; 1.2GM/100ML; 0.34GM/100ML; 0.48GM/100ML; 0.68GM/100ML; 0.38GM/100ML; 5MEQ/L; 0.025GM/100ML; 0.42GM/100ML; 0.2GM/100ML; 0.24GM/100ML; 0.78GM/100ML	3	B/D
XENPOZYME INJECTION 20MG, 4MG	4	PA
<b>Electrolyte/Mineral/Metal Modifiers</b>		
CHEMET CAPSULE 100MG	4	
CUPRIMINE CAPSULE 250MG	4	PA
CUVRIOR TABLET 300MG	4	PA
<i>deferasirox packet 180mg, 360mg, 90mg</i>	4	PA
<i>deferasirox tablet soluble 125mg, 250mg</i>	1	PA
<i>deferasirox tablet soluble 500mg</i>	4	PA
<i>deferasirox tablet 180mg, 360mg, 90mg</i>	1	PA
<i>deferiprone tablet 1000mg, 500mg</i>	4	PA
DEPEN TITRATABS TABLET 250MG	4	
EXJADE TABLET SOLUBLE 125MG, 250MG, 500MG	4	PA
FERRIPROX TWICE-A-DAY TABLET 1000MG	4	PA
FERRIPROX SOLUTION 100MG/ML	4	PA
FERRIPROX TABLET 1000MG, 500MG	4	PA
JADENU SPRINKLE PACKET 180MG, 360MG, 90MG	4	PA
JADENU TABLET 180MG, 360MG, 90MG	4	PA
JYNARQUE TABLET THERAPY PACK 0, 15MG	4	QL (56 EA per 28 days) PA
JYNARQUE TABLET 15MG, 30MG	4	QL (120 EA per 30 days) PA
<i>penicillamine capsule 250mg</i>	4	PA
<i>penicillamine tablet 250mg</i>	4	
SAMSCA TABLET 15MG, 30MG	4	QL (120 EA per 30 days) PA
SYPRINE CAPSULE 250MG	4	PA
<i>tolvaptan tablet therapy pack 0, 15mg</i>	4	QL (56 EA per 28 days) PA
TOLVAPTAN TABLET 15MG	4	QL (120 EA per 30 days) PA
<i>tolvaptan tablet 15mg, 30mg</i>	4	QL (120 EA per 30 days) PA

Drug Name	Drug Tier	Requirements/Limits
<i>trientine hydrochloride capsule 250mg, 500mg</i>	4	PA
XPHOZAH TABLET 20MG, 30MG	4	QL (60 EA per 30 days) PA
<b>Phosphate Binders</b>		
AURYXIA TABLET 210MG	4	PA
<i>calcium acetate capsule 667mg</i>	1	
<i>calcium acetate tablet 667mg</i>	1	
FERRIC CITRATE TABLET 210MG	4	PA
FOSRENOL PACKET 1000MG, 750MG	4	
FOSRENOL TABLET CHEWABLE 1000MG, 500MG, 750MG	4	
<i>lanthanum carbonate tablet chewable 1000mg, 500mg, 750mg</i>	4	
RENAGEL TABLET 800MG	3	
REVELA PACKET 0.8GM, 2.4GM	4	
REVELA TABLET 800MG	4	
<i>sevelamer carbonate packet 0.8gm, 2.4gm</i>	1	
<i>sevelamer hydrochloride tablet 800mg</i>	1	
VELPHORO TABLET CHEWABLE 500MG	4	
<b>Potassium Binders</b>		
KIONEX SUSPENSION 15GM/60ML	3	
LOKELMA PACKET 10GM, 5GM	3	QL (90 EA per 30 days)
<i>sodium polystyrene sulfonate powder 0</i>	1	
<i>sodium polystyrene sulfonate suspension 15gm/60ml</i>	1	
SPS SUSPENSION 15GM/60ML	1	
VELTASSA PACKET 16.8GM, 1GM, 25.2GM, 8.4GM	3	
<b>Vitamins</b>		
<i>prenatal tablet 120mg; 0; 200mg; 10mcg; 2mg; 12mcg; 27mg; 31mg; 20mg; 10mg; 1200mcg; 3mg; 1.84mg; 10mg; 25mg</i>		
<b>Gastrointestinal Agents</b>		
<b>Anti-Constipation Agents</b>		
AMITIZA CAPSULE 24MCG, 8MCG	2	QL (60 EA per 30 days)
<i>constulose solution 10gm/15ml</i>	1	
<i>enulose solution 10gm/15ml</i>	1	
<i>generlac solution 10gm/15ml</i>	1	
IBSRELA TABLET 50MG	4	QL (60 EA per 30 days) PA
<i>lactulose solution 10gm/15ml</i>	1	
LINZESS CAPSULE 145MCG, 290MCG, 72MCG	2	QL (30 EA per 30 days)
<i>lubiprostone capsule 24mcg, 8mcg</i>	2	QL (60 EA per 30 days)
MOTEGRITY TABLET 1MG, 2MG	2	QL (30 EA per 30 days)
<i>prucalopride tablet 1mg, 2mg</i>	1	QL (30 EA per 30 days)
RELISTOR INJECTION 8MG/0.4ML	4	QL (12 ML per 30 days) ST
RELISTOR INJECTION 12MG/0.6ML	4	QL (18 ML per 30 days) ST
RELISTOR TABLET 150MG	4	QL (90 EA per 30 days) ST
SYMPROIC TABLET 0.2MG	3	QL (30 EA per 30 days) ST
TRULANCE TABLET 3MG	3	QL (30 EA per 30 days)
<b>Anti-Diarrheal Agents</b>		
<i>alosetron hydrochloride tablet 0.5mg</i>	1	PA
<i>alosetron hydrochloride tablet 1mg</i>	4	PA
<i>diphenoxylate hydrochloride/atropine sulfate tablet 0.025mg; 2.5mg</i>	1	
<i>diphenoxylate/atropine liquid 0.025mg/5ml; 2.5mg/5ml</i>	1	
LOMOTIL TABLET 0.025MG; 2.5MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>loperamide hydrochloride capsule 2mg</i>	1	
LOTRONEX TABLET 0.5MG, 1MG	4	PA
MOTOFEN TABLET 0.025MG; 1MG	3	
MYTESI TABLET DELAYED RELEASE 125MG	3	QL (60 EA per 30 days)
VIBERZI TABLET 100MG, 75MG	4	QL (60 EA per 30 days) PA
XERMELO TABLET 250MG	4	QL (90 EA per 30 days) PA
<b>Antispasmodics, Gastrointestinal</b>		
ANASPAZ TABLET DISINTEGRATING 0.125MG	3	
<i>belladonna/opium suppository 16.2mg; 30mg, 16.2mg; 60mg</i>	1	
<i>chlordiazepoxide hydrochloride/clidinium bromide capsule 5mg; 2.5mg</i>	1	
CUVPOSA SOLUTION 1MG/5ML	3	PA
<i>dicyclomine hcl solution 10mg/5ml</i>	1	
<i>dicyclomine hydrochloride capsule 10mg</i>	1	
DICYCLOMINE HYDROCHLORIDE TABLET 40MG	4	
<i>dicyclomine hydrochloride tablet 20mg</i>	1	
GLYCATE TABLET 1.5MG	3	PA
<i>glycopyrrolate injection 0.2mg/ml, 0.4mg/2ml, 1mg/5ml, 4mg/20ml</i>	1	
<i>glycopyrrolate oral solution 1mg/5ml</i>	1	PA
GLYCOPYRROLATE TABLET 1.5MG	1	PA
<i>glycopyrrolate tablet 1mg, 2mg</i>	1	PA
<i>hyoscyamine sulfate er tablet extended release 12 hour 0.375mg</i>	1	
<i>hyoscyamine sulfate odt tablet disintegrating 0.125mg</i>	1	
<i>hyoscyamine sulfate sr tablet extended release 12 hour 0.375mg</i>	1	
<i>hyoscyamine sulfate elixir 0.125mg/5ml</i>	1	
<i>hyoscyamine sulfate solution 0.125mg/ml</i>	1	
<i>hyoscyamine sulfate tablet 0.125mg</i>	1	
LEVBID TABLET EXTENDED RELEASE 12 HOUR 0.375MG	3	
LEVSIN TABLET 0.125MG	3	
LIBRAX CAPSULE 5MG; 2.5MG	3	
<i>methscopolamine bromide tablet 2.5mg, 5mg</i>	1	
NULEV TABLET DISINTEGRATING 0.125MG	3	
OSCIMIN TABLET 0.125MG	3	
ROBINUL FORTE TABLET 2MG	3	PA
ROBINUL TABLET 1MG	3	PA
<b>Gastrointestinal Agents, Other</b>		
<i>bismuth subcitrate pot/metronidazole/tetracycline hydrochloride capsule 140mg; 125mg; 125mg</i>	1	
BYLVAY (PELLETS) CAPSULE SPRINKLE 200MCG, 600MCG	4	PA
BYLVAY CAPSULE 1200MCG, 400MCG	4	PA
CHENODAL TABLET 250MG	4	PA
CLENPIQ SOLUTION 12GM/175ML; 3.5GM/175ML; 10MG/175ML	2	
CTEXLI TABLET 250MG	4	PA
EDETATE CALCIUM DISODIUM INJECTION 1GM/5ML	4	
GATTEX INJECTION 5MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>gavilyte-c solution reconstituted 240gm; 2.98gm; 6.72gm; 5.84gm; 22.72gm</i>	1	
<i>gavilyte-g solution reconstituted 236gm; 2.97gm; 6.74gm; 5.86gm; 22.74gm</i>	1	
<i>gavilyte-n/flavor pack solution reconstituted 420gm; 1.48gm; 5.72gm; 11.2gm</i>	1	
GIMOTI SOLUTION 15MG/ACT	4	ST
HELIDAC THERAPY MISCELLANEOUS 262.4MG; 250MG; 500MG	3	
IQIRVO TABLET 80MG	4	QL (30 EA per 30 days) PA
LIVDELZI CAPSULE 10MG	4	QL (30 EA per 30 days) PA
LIVMARLI SOLUTION 19MG/ML	4	QL (60 ML per 30 days) PA
LIVMARLI SOLUTION 9.5MG/ML	4	QL (90 ML per 30 days) PA
LIVMARLI TABLET 30MG	4	QL (30 EA per 30 days) PA
LIVMARLI TABLET 10MG, 15MG, 20MG	4	QL (60 EA per 30 days) PA
<i>metoclopramide hcl solution 5mg/5ml</i>	1	
<i>metoclopramide hydrochloride injection 5mg/ml</i>	1	
<i>metoclopramide hydrochloride tablet 10mg, 5mg</i>	1	
<i>metoclopramide odt tablet disintegrating 5mg</i>	1	
MYALEPT INJECTION 11.3MG	4	PA
<i>nitroglycerin ointment 0.4%</i>	1	
OCALIVA TABLET 10MG, 5MG	4	QL (30 EA per 30 days) PA
<i>peg-3350/electrolytes solution reconstituted 236gm; 2.97gm; 6.74gm; 5.86gm; 22.74gm</i>	1	
<i>peg-3350/nacl/na bicarbonate/kcl solution reconstituted 420gm; 1.48gm; 5.72gm; 11.2gm</i>	1	
PYLERA CAPSULE 140MG; 125MG; 125MG	3	
RELSTONE CAPSULE 200MG, 400MG	4	
<i>sodium sulfate/potassium sulfate/magnesium sulfate solution 1.6gm/177ml; 3.13gm/177ml; 17.5gm/177ml</i>	1	
SUPREP BOWEL PREP KIT SOLUTION 1.6GM/177ML; 3.13GM/177ML; 17.5GM/177ML	2	
SUTAB TABLET 225MG; 188MG; 1479MG	2	
URSODIOL CAPSULE 200MG, 400MG	4	
<i>ursodiol tablet 250mg, 500mg</i>	1	
VOQUEZNA TABLET 10MG	3	QL (30 EA per 30 days) PA
VOQUEZNA TABLET 20MG	3	QL (60 EA per 30 days) PA
VOWST CAPSULE 0	4	PA
XIFAXAN TABLET 200MG	3	PA
XIFAXAN TABLET 550MG	4	PA
ZINPLAVA INJECTION 1000MG/40ML	4	
ZORBTIVE INJECTION 8.8MG	4	PA
<b>Histamine2 (H2) Receptor Antagonists</b>		
<i>famotidine injection 200mg/50ml, 20mg/5ml, 40mg/10ml</i>	3	
<i>famotidine suspension reconstituted 40mg/5ml</i>	1	
<i>famotidine tablet 20mg, 40mg</i>	1	
<i>nizatidine capsule 150mg, 300mg</i>	1	
PEPCID TABLET 40MG	3	
<b>Protectants</b>		
<i>misoprostol tablet 100mcg, 200mcg</i>	1	
<i>sucralfate suspension 1gm/10ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>sucralfate tablet 1gm</i>	1	
<b>Proton Pump Inhibitors</b>		
ACIPHEX TABLET DELAYED RELEASE 20MG	3	QL (60 EA per 30 days)
DEXILANT CAPSULE DELAYED RELEASE 30MG, 60MG	2	QL (30 EA per 30 days)
<i>dexlansoprazole capsule delayed release 30mg, 60mg</i>	1	QL (30 EA per 30 days)
<i>esomeprazole magnesium capsule delayed release 20mg, 40mg</i>	3	QL (60 EA per 30 days)
<i>esomeprazole magnesium packet 10mg, 2.5mg, 20mg, 40mg, 5mg</i>	3	QL (60 EA per 30 days)
KONVOMEF SUSPENSION RECONSTITUTED 2MG/ML; 84MG/ML	3	QL (600 ML per 30 days)
<i>lansoprazole capsule delayed release 15mg, 30mg</i>	1	QL (60 EA per 30 days)
NEXIUM CAPSULE DELAYED RELEASE 20MG, 40MG	3	QL (60 EA per 30 days)
NEXIUM PACKET 10MG, 2.5MG, 20MG, 40MG, 5MG	3	QL (60 EA per 30 days)
<i>omeprazole dr capsule delayed release 10mg, 40mg</i>	1	QL (60 EA per 30 days)
<i>omeprazole/sodium bicarbonate capsule 20mg; 1100mg, 40mg; 1100mg</i>	3	QL (30 EA per 30 days)
<i>omeprazole/sodium bicarbonate packet 20mg; 1680mg, 40mg; 1680mg</i>	4	QL (30 EA per 30 days)
<i>omeprazole capsule delayed release 20mg, 40mg</i>	1	QL (60 EA per 30 days)
<i>pantoprazole sodium packet 40mg</i>	1	QL (60 EA per 30 days)
<i>pantoprazole sodium tablet delayed release 20mg, 40mg</i>	1	QL (60 EA per 30 days)
PREVACID CAPSULE DELAYED RELEASE 30MG	3	QL (60 EA per 30 days)
PROTONIX PACKET 40MG	3	QL (60 EA per 30 days)
PROTONIX TABLET DELAYED RELEASE 20MG, 40MG	3	QL (60 EA per 30 days)
RABEPRAZOLE SODIUM DR SPRINKLE CAPSULE SPRINKLE 10MG	3	QL (60 EA per 30 days)
<i>rabeprazole sodium tablet delayed release 20mg</i>	1	QL (60 EA per 30 days)
ZEGERID CAPSULE 20MG; 1100MG, 40MG; 1100MG	4	QL (30 EA per 30 days)
ZEGERID PACKET 20MG; 1680MG, 40MG; 1680MG	4	QL (30 EA per 30 days)

**Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment**

**Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment**

ADZYNMA INJECTION 1500UNIT, 500UNIT	4	PA
ALDURAZYME INJECTION 2.9MG/5ML	4	PA
AMONDYS 45 INJECTION 100MG/2ML	4	PA
AMVUTTRA INJECTION 25MG/0.5ML	4	QL (0.5 ML per 90 days) PA
AQVESME TABLET 100MG	4	QL (56 EA per 28 days) PA
ARALAST NP INJECTION 1000MG, 500MG	4	PA
<i>betaine anhydrous powder 0</i>	4	
BUPHENYL POWDER 3GM/TSP	4	
BUPHENYL TABLET 500MG	4	
CERDELGA CAPSULE 84MG	4	PA
CEREZYME INJECTION 400UNIT	4	PA
CHOLBAM CAPSULE 250MG, 50MG	4	PA
CRENESSITY CAPSULE 100MG	4	QL (120 EA per 30 days) PA
CRENESSITY CAPSULE 25MG, 50MG	4	QL (90 EA per 30 days) PA
CRENESSITY SOLUTION 50MG/ML	4	QL (240 ML per 30 days) PA

Drug Name	Drug Tier	Requirements/Limits
CREON CAPSULE DELAYED RELEASE PARTICLES 120000UNIT; 24000UNIT; 76000UNIT, 15000UNIT; 3000UNIT; 9500UNIT, 180000UNIT; 36000UNIT; 114000UNIT, 30000UNIT; 6000UNIT; 19000UNIT, 60000UNIT; 12000UNIT; 38000UNIT	2	
<i>cromolyn sodium concentrate 100mg/5ml</i>	1	
CRYSVITA INJECTION 10MG/ML, 20MG/ML, 30MG/ML	4	PA
CYSTADANE POWDER 0	4	
CYSTAGON CAPSULE 150MG, 50MG	3	
DAYBUE SOLUTION 200MG/ML	4	QL (3600 ML per 30 days) PA
<i>dichlorphenamide tablet 50mg</i>	4	QL (120 EA per 30 days) PA
DOJOLVI LIQUID 100%	4	PA
ELAPRASE INJECTION 6MG/3ML	4	PA
ELELYSO INJECTION 200UNIT	4	PA
ELFABRIO INJECTION 20MG/10ML, 5MG/2.5ML	4	PA
ENDARI PACKET 5GM	4	PA
EVRYSDI SOLUTION RECONSTITUTED 0.75MG/ML	4	QL (240 ML per 30 days) PA
EVRYSDI TABLET 5MG	4	QL (30 EA per 30 days) PA
EXONDYS 51 INJECTION 100MG/2ML, 500MG/10ML	4	PA
FABRAZYME INJECTION 35MG, 5MG	4	PA
FORZINITY INJECTION 280MG/3.5ML	4	QL (14 ML per 28 days) PA
GALAFOLD CAPSULE 123MG	4	QL (14 EA per 28 days) PA
GASTROCROM CONCENTRATE 100MG/5ML	4	
GLASSIA INJECTION 4GM/200ML, 5GM/250ML	3	PA
GLASSIA INJECTION 1000MG/50ML	4	PA
GLYCEROL PHENYLBUTYRATE LIQUID 1.1GM/ML	4	PA
HARLIKU TABLET 2MG	4	QL (30 EA per 30 days) PA
JAVYGTOR PACKET 100MG, 500MG	4	PA
JAVYGTOR TABLET 100MG	4	PA
JOENJA TABLET 70MG	4	QL (60 EA per 30 days) PA
KANUMA INJECTION 20MG/10ML	4	PA
KEVEYIS TABLET 50MG	4	QL (120 EA per 30 days) PA
KUVAN PACKET 100MG, 500MG	4	PA
KUVAN TABLET 100MG	4	PA
<i>l-glutamine packet 5gm</i>	4	PA
LAMZEDE INJECTION 10MG	4	PA
LUMIZYME INJECTION 50MG	4	PA
MEPSEVII INJECTION 10MG/5ML	4	PA
<i>miglustat capsule 100mg</i>	4	PA
MIPLYFFA CAPSULE 124MG, 47MG, 62MG, 93MG	4	QL (90 EA per 30 days) PA
NAGLAZYME INJECTION 1MG/ML	4	PA
NEXVIAZYME INJECTION 100MG	4	PA
<i>nitisinone capsule 10mg, 20mg, 2mg, 5mg</i>	4	
NITYR TABLET 10MG, 2MG, 5MG	4	
NULIBRY INJECTION 9.5MG	4	PA
OLPRUVA THERAPY PACK 2GM, 3GM, 4GM, 5GM, 6.67GM, 6GM	4	PA
ONPATTRO INJECTION 10MG/5ML	4	PA
OPFOLDA CAPSULE 65MG	3	QL (8 EA per 28 days) PA
ORFADIN CAPSULE 10MG, 20MG, 2MG, 5MG	4	

Drug Name	Drug Tier	Requirements/Limits
ORFADIN SUSPENSION 4MG/ML	4	
ORMALVI TABLET 50MG	4	QL (120 EA per 30 days) PA
PALYNZIQ INJECTION 10MG/0.5ML	4	QL (28 ML per 28 days) PA
PALYNZIQ INJECTION 20MG/ML	4	QL (56 ML per 28 days) PA
PALYNZIQ INJECTION 2.5MG/0.5ML	4	QL (8 ML per 28 days) PA
PANCREAZE CAPSULE DELAYED RELEASE PARTICLES 15200UNIT; 2600UNIT; 8800UNIT, 24600UNIT; 4200UNIT; 14200UNIT, 61500UNIT; 10500UNIT; 35500UNIT, 98400UNIT; 16800UNIT; 56800UNIT	3	ST
PANCREAZE CAPSULE DELAYED RELEASE PARTICLES 149900UNIT; 37000UNIT; 97300UNIT, 83900UNIT; 21000UNIT; 54700UNIT	4	ST
PERTZYE CAPSULE DELAYED RELEASE PARTICLES 15125UNIT; 4000UNIT; 14375UNIT, 30250UNIT; 8000UNIT; 28750UNIT, 90750UNIT; 24000UNIT; 86250UNIT	3	ST
PERTZYE CAPSULE DELAYED RELEASE PARTICLES 60500UNIT; 16000UNIT; 57500UNIT	4	ST
PHEBURANE PELLETT 483MG/GM	4	
POMBILITI INJECTION 105MG	4	PA
PROCYSBI CAPSULE DELAYED RELEASE 25MG, 75MG	4	PA
PROCYSBI PACKET 300MG, 75MG	4	PA
PROLASTIN-C INJECTION 1000MG/20ML	4	PA
PYRUKYND TAPER PACK TABLET THERAPY PACK 0, 5MG	4	QL (30 EA per 30 days) PA
PYRUKYND TABLET 50MG	4	QL (120 EA per 30 days) PA
PYRUKYND TABLET 20MG, 5MG	4	QL (60 EA per 30 days) PA
RAVICTI LIQUID 1.1GM/ML	4	PA
REVCIVI INJECTION 2.4MG/1.5ML	4	PA
<i>sapropterin dihydrochloride packet 100mg, 500mg</i>	4	PA
<i>sapropterin dihydrochloride tablet 100mg</i>	4	PA
SEPHIENCE PACKET 1000MG, 250MG	4	PA
<i>sodium phenylbutyrate powder 3gm/tsp</i>	4	
<i>sodium phenylbutyrate tablet 500mg</i>	4	
SPINRAZA INJECTION 12MG/5ML	4	PA
STRENSIQ INJECTION 18MG/0.45ML, 28MG/0.7ML, 40MG/ML, 80MG/0.8ML	4	PA
SUCRAID SOLUTION 8500UNIT/ML	4	PA
TEGSEDI INJECTION 284MG/1.5ML	4	PA
VILTEPSO INJECTION 250MG/5ML	4	PA
VIMIZIM INJECTION 5MG/5ML	4	PA
VIOKACE TABLET 39150UNIT; 10440UNIT; 39150UNIT	3	ST
VIOKACE TABLET 78300UNIT; 20880UNIT; 78300UNIT	4	ST
VOXZOGO INJECTION 0.4MG, 0.56MG, 1.2MG	4	QL (30 EA per 30 days) PA
VPRIV INJECTION 400UNIT	4	PA
VYENDAQEL CAPSULE 20MG	4	QL (120 EA per 30 days) PA
VYONDYS 53 INJECTION 100MG/2ML	4	PA
WAINUA INJECTION 45MG/0.8ML	4	QL (0.8 ML per 28 days) PA
WELIREG TABLET 40MG	4	PA
XIAFLEX INJECTION 0.9MG	4	PA
XURIDEN PACKET 2GM	4	QL (120 EA per 30 days) PA
<i>yargesa capsule 100mg</i>	4	PA

Drug Name	Drug Tier	Requirements/Limits
ZAVESCA CAPSULE 100MG	4	PA
<i>zelvysia packet 100mg, 500mg</i>	4	PA
ZEMAIRA INJECTION 1000MG, 4000MG, 5000MG	4	PA
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 105000UNIT; 25000UNIT; 79000UNIT, 14000UNIT; 3000UNIT; 10000UNIT, 168000UNIT; 40000UNIT; 126000UNIT, 24000UNIT; 5000UNIT; 17000UNIT, 252600UNIT; 60000UNIT; 189600UNIT, 42000UNIT; 10000UNIT; 32000UNIT, 63000UNIT; 15000UNIT; 47000UNIT, 84000UNIT; 20000UNIT; 63000UNIT	2	
<b>Genitourinary Agents</b>		
<b>Antispasmodics, Urinary</b>		
<i>darifenacin hydrobromide er tablet extended release 24 hour 15mg, 7.5mg</i>	1	
DETROL LA CAPSULE EXTENDED RELEASE 24 HOUR 2MG, 4MG	3	
DETROL TABLET 1MG, 2MG	3	
<i>fesoterodine fumarate er tablet extended release 24 hour 4mg, 8mg</i>	1	
<i>flavoxate hcl tablet 100mg</i>	1	
GELNIQUE GEL 10%	3	
GEMTESA TABLET 75MG	3	
MB CAPS CAPSULE 0.12MG; 120MG; 10.8MG; 36.2MG; 40.8MG	4	
<i>me/naphos/mb/hyo 1 tablet 0.12mg; 81.6mg; 10.8mg; 40.8mg</i>	1	
MYRBETRIQ SUSPENSION RECONSTITUTED ER 8MG/ML	2	
MYRBETRIQ TABLET EXTENDED RELEASE 24 HOUR 25MG, 50MG	2	
<i>oxybutynin chloride er tablet extended release 24 hour 10mg, 15mg, 5mg</i>	1	
<i>oxybutynin chloride solution 5mg/5ml</i>	1	
<i>oxybutynin chloride tablet 2.5mg, 5mg</i>	1	
OXYTROL PATCH TWICE WEEKLY 3.9MG/24HR	3	QL (8 EA per 28 days)
<i>solifenacin succinate tablet 10mg, 5mg</i>	1	
<i>tolterodine tartrate er capsule extended release 24 hour 2mg, 4mg</i>	1	
<i>tolterodine tartrate tablet 1mg, 2mg</i>	1	
TOVIAZ TABLET EXTENDED RELEASE 24 HOUR 4MG, 8MG	3	
<i>trospium chloride er capsule extended release 24 hour 60mg</i>	1	
<i>trospium chloride tablet 20mg</i>	1	
<i>uretron d/s tablet 0.12mg; 81.6mg; 10.8mg; 36.2mg; 40.8mg</i>	1	
URIBEL CAPSULE 0.12MG; 118MG; 10MG; 36MG; 40.8MG	3	
URIBEL TABLET 9MG; 0.12MG; 81.6MG; 10.8MG; 36.2MG	3	
URIMAR-T CAPSULE 0.12MG; 120MG; 10.8MG; 36.2MG; 40.8MG	4	
URIMAR-T TABLET 0.12MG; 120MG; 10.8MG; 36.2MG; 40.8MG	3	
URNEVA CAPSULE 0.12MG; 120MG; 10.8MG; 36.2MG; 40.8MG	4	
URO-MP CAPSULE 0.12MG; 118MG; 10MG; 36MG; 40.8MG	3	

Drug Name	Drug Tier	Requirements/Limits
URO-SP CAPSULE 0.12MG; 118MG; 10MG; 36MG; 40.8MG	3	
UROGESIC-BLUE TABLET 0.12MG; 81.6MG; 10.8MG; 40.8MG	3	
VESICARE LS SUSPENSION 5MG/5ML	3	
VESICARE TABLET 10MG, 5MG	3	
VILAMIT MB CAPSULE 0.12MG; 118MG; 10MG; 36MG; 40.8MG	3	
<b>Benign Prostatic Hypertrophy Agents</b>		
<i>alfuzosin hcl er tablet extended release 24 hour 10mg</i>	1	
CIALIS TABLET 5MG	3	QL (30 EA per 30 days) PA
<i>doxazosin mesylate tablet 1mg, 2mg, 4mg, 8mg</i>	1	
<i>dutasteride/tamsulosin hydrochloride capsule 0.5mg; 0.4mg</i>	1	
<i>dutasteride capsule 0.5mg</i>	1	
ENTADFI CAPSULE 5MG; 5MG	3	QL (30 EA per 30 days) ST
<i>finasteride tablet 5mg</i>	1	
<i>silodosin capsule 4mg, 8mg</i>	1	
<i>tadalafil tablet 2.5mg, 5mg</i>	1	QL (30 EA per 30 days) PA
<i>tamsulosin hydrochloride capsule 0.4mg</i>	1	
<i>terazosin hcl capsule 10mg, 1mg, 5mg</i>	1	
<i>terazosin hydrochloride capsule 2mg</i>	1	
TEZRULY SOLUTION 1MG/ML	3	ST
<b>Genitourinary Agents, Other</b>		
<i>acetic acid 0.25% solution 0.25%</i>	1	
<i>bethanechol chloride tablet 10mg, 25mg, 50mg, 5mg</i>	1	
ELMIRON CAPSULE 100MG	3	
LITHOSTAT TABLET 250MG	3	
THIOLA EC TABLET DELAYED RELEASE 100MG, 300MG	4	
THIOLA TABLET 100MG	4	
<i>tiopronin dr tablet delayed release 100mg, 300mg</i>	4	
<i>tiopronin tablet 100mg</i>	4	
VANRAFIA TABLET 0.75MG	3	QL (30 EA per 30 days) PA
VENXXIVA TABLET DELAYED RELEASE 100MG, 300MG	4	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)</b>		
<b><i>Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)</i></b>		
ACTHAR GEL INJECTION 40UNIT/0.5ML, 80UNIT/ML	4	PA
ACTHAR INJECTION 80UNIT/ML	4	PA
AGAMREE SUSPENSION 40MG/ML	4	PA
ALKINDI SPRINKLE CAPSULE SPRINKLE 1MG, 2MG, 5MG	4	
CORTISONE ACETATE TABLET 25MG	4	
CORTROPHIN INJECTION 80UNIT/ML	4	PA
<i>deflazacort suspension 22.75mg/ml</i>	4	PA
<i>deflazacort tablet 18mg, 30mg, 36mg, 6mg</i>	4	PA
<i>dexamethasone elixir 0.5mg/5ml</i>	1	
<i>dexamethasone solution 0.5mg/5ml</i>	1	
<i>dexamethasone tablet 0.5mg, 0.75mg, 1.5mg, 1mg, 2mg, 4mg, 6mg</i>	1	
EMFLAZA SUSPENSION 22.75MG/ML	4	PA
EMFLAZA TABLET 18MG, 30MG, 36MG, 6MG	4	PA
<i>fludrocortisone acetate tablet 0.1mg</i>	1	
<i>hydrocortisone tablet 10mg, 20mg, 5mg</i>	1	
INTRAROSA INSERT 6.5MG	3	QL (28 EA per 28 days) PA

Drug Name	Drug Tier	Requirements/Limits
JAYTHARI SUSPENSION 22.75MG/ML	4	PA
JAYTHARI TABLET 18MG, 30MG, 36MG, 6MG	4	PA
KHINDIVI SOLUTION 1MG/ML	4	PA
KYMBEE TABLET 36MG	4	PA
<i>kymbee tablet 18mg, 30mg, 6mg</i>	4	PA
<i>methylprednisolone dose pack tablet therapy pack 4mg</i>	1	
<i>methylprednisolone sodium succinate injection 500mg</i>	1	
<i>methylprednisolone tablet 16mg, 32mg, 4mg, 8mg</i>	1	
<i>prednisolone sodium phosphate solution 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml, 5mg/5ml</i>	1	
<i>prednisolone solution 15mg/5ml</i>	1	
<i>prednisone dr tablet delayed release 1mg, 2mg</i>	4	PA
<i>prednisone solution 5mg/5ml</i>	1	
<i>prednisone tablet therapy pack 10mg, 5mg</i>	1	
<i>prednisone tablet 10mg, 1mg, 2.5mg, 20mg, 50mg, 5mg</i>	1	
<i>pyquvi suspension 22.75mg/ml</i>	4	PA
RAYOS TABLET DELAYED RELEASE 1MG, 2MG, 5MG	4	PA
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)</b>		
<b><i>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)</i></b>		
CHORIONIC GONADOTROPIN INJECTION 10000UNIT	3	PA
DDAVP INJECTION 4MCG/ML	4	
DDAVP TABLET 0.2MG	3	
<i>desmopressin acetate injection 4mcg/ml</i>	4	
DESMOPRESSIN ACETATE NASAL SOLUTION 1.5MG/ML	4	
<i>desmopressin acetate nasal solution 0.01%</i>	1	
<i>desmopressin acetate tablet 0.1mg, 0.2mg</i>	1	
EGRIFTA SV INJECTION 2MG	4	QL (30 EA per 30 days) PA
EGRIFTA WR INJECTION 11.6MG	4	QL (4 EA per 28 days) PA
FENSOLVI INJECTION 45MG	4	QL (1 EA per 168 days) PA
GENOTROPIN MINIQUICK INJECTION 0.2MG	3	PA
GENOTROPIN MINIQUICK INJECTION 0.4MG, 0.6MG, 0.8MG, 1.2MG, 1.4MG, 1.6MG, 1.8MG, 1MG, 2MG	4	PA
GENOTROPIN INJECTION 12MG, 5MG	4	PA
HUMATROPE INJECTION 12MG, 24MG, 6MG	4	PA
INCRELEX INJECTION 40MG/4ML	4	PA
ISTURISA TABLET 1MG	4	QL (240 EA per 30 days) PA
ISTURISA TABLET 5MG	4	QL (360 EA per 30 days) PA
LUPRON DEPOT-PED (6-MONTH) INJECTION 45MG	4	QL (1 EA per 168 days) PA
NGENLA INJECTION 24MG/1.2ML, 60MG/1.2ML	4	PA
NORDITROPIN FLEXPLO INJECTION 10MG/1.5ML, 15MG/1.5ML, 30MG/3ML, 5MG/1.5ML	4	PA
NOVAREL INJECTION 5000UNIT	3	PA
NUTROPIN AQ NUSPIN 10 INJECTION 10MG/2ML	4	PA
NUTROPIN AQ NUSPIN 20 INJECTION 20MG/2ML	4	PA
NUTROPIN AQ NUSPIN 5 INJECTION 5MG/2ML	4	PA
OMNITROPE INJECTION 10MG/1.5ML, 5.8MG, 5MG/1.5ML	4	PA
PREGNYL W/DILUENT BENZYL ALCOHOL/NACL INJECTION 10000UNIT	3	PA
PREGNYL INJECTION 10000UNIT	3	PA
SAIZEN INJECTION 5MG, 8.8MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
SAIZENPREP RECONSTITUTIONKIT INJECTION 8.8MG	4	PA
SEROSTIM INJECTION 4MG, 5MG, 6MG	4	PA
SKYTROFA INJECTION 0.7MG, 1.4MG, 1.8MG, 11MG, 13.3MG, 2.1MG, 2.5MG, 3.6MG, 3MG, 4.3MG, 5.2MG, 6.3MG, 7.6MG, 9.1MG	4	PA
SOGROYA INJECTION 10MG/1.5ML, 15MG/1.5ML, 5MG/1.5ML	4	PA
ZOMACTON INJECTION 10MG, 5MG	3	PA
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)</b>		
<i>Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)</i>		
<i>carboprost tromethamine injection 250mcg/ml</i>	4	
HEMABATE INJECTION 250MCG/ML	4	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)</b>		
<i>Androgens</i>		
ANDROGEL PUMP GEL 1.62%	3	PA
AVEED INJECTION 750MG/3ML	3	PA
AZMIRO INJECTION 200MG/ML	3	PA
<i>danazol capsule 100mg, 200mg, 50mg</i>	1	
DEPO-TESTOSTERONE INJECTION 100MG/ML, 200MG/ML	3	PA
FORTESTA GEL 10MG/ACT	3	PA
JATENZO CAPSULE 158MG, 198MG	3	PA
JATENZO CAPSULE 237MG	4	PA
KYZATREX CAPSULE 100MG, 150MG, 200MG	3	PA
METHITEST TABLET 10MG	4	PA
<i>methyltestosterone capsule 10mg</i>	4	PA
NATESTO GEL 5.5MG/ACT	3	PA
TESTIM GEL 1%	3	PA
<i>testosterone cypionate injection 100mg/ml, 200mg/ml</i>	1	PA
<i>testosterone enanthate injection 200mg/ml</i>	1	PA
<i>testosterone pump gel 1.62%</i>	1	PA
<i>testosterone pump gel 1%</i>	2	PA
<i>testosterone topical solution solution 30mg/act</i>	1	PA
<i>testosterone gel 10mg/act, 20.25mg/1.25gm, 40.5mg/2.5gm</i>	1	PA
<i>testosterone gel 25mg/2.5gm, 50mg/5gm</i>	2	PA
<i>testosterone solution 30mg/act</i>	1	PA
TLANDO CAPSULE 112.5MG	3	PA
UNDECATREX CAPSULE 200MG	3	PA
VOGELXO PUMP GEL 1%	3	PA
VOGELXO GEL 50MG/5GM	3	PA
XYOSTED INJECTION 100MG/0.5ML, 50MG/0.5ML, 75MG/0.5ML	3	PA
<i>Estrogens</i>		
<i>abigale lo tablet 0.5mg; 0.1mg</i>	1	
<i>abigale tablet 1mg; 0.5mg</i>	1	
<i>afirmelle tablet 20mcg; 0.1mg</i>	1	
<i>altavera tablet 30mcg; 0.15mg</i>	1	
<i>alyacen 1/35 tablet 35mcg; 1mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>alyacen 7/7/7 tablet 35mcg; 0</i>	1	
<i>amabelz tablet 0.5mg; 0.1mg, 1mg; 0.5mg</i>	1	
<i>amethia tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>amethyst tablet 20mcg; 90mcg</i>	1	
ANNOVERA RING 0.013MG/24HR; 0.15MG/24HR	3	QL (1 EA per 360 days)
<i>ashlyna tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>aubra eq tablet 20mcg; 0.1mg</i>	1	
<i>aurovela 1.5/30 tablet 30mcg; 1.5mg</i>	1	
<i>aurovela 1/20 tablet 20mcg; 1mg</i>	1	
<i>aurovela 24 fe tablet 20mcg; 75mg; 1mg</i>	1	
<i>aurovela fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	1	
<i>aurovela fe 1/20 tablet 20mcg; 75mg; 1mg</i>	1	
AVERI TABLET 0.15MG; 0.03MG; 36.5MG	3	
<i>aviane tablet 20mcg; 0.1mg</i>	1	
<i>ayuna tablet 0.03mg; 0.15mg</i>	1	
<i>azurette tablet 0; 0</i>	1	
<i>balziva tablet 35mcg; 0.4mg</i>	1	
<i>blisovi 24 fe tablet 20mcg; 75mg; 1mg</i>	1	
<i>blisovi fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	1	
<i>blisovi fe 1/20 tablet 20mcg; 75mg; 1mg</i>	1	
<i>briellyn tablet 35mcg; 0.4mg</i>	1	
<i>camrese lo tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>camrese tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>chateal eq tablet 30mcg; 0.15mg</i>	1	
<i>chateal tablet 0.03mg; 0.15mg</i>	1	
CLIMARA PRO PATCH WEEKLY 0.045MG/DAY; 0.015MG/DAY	3	
<i>conjugated estrogens tablet 0.3mg, 0.45mg, 0.625mg, 0.9mg, 3 1.25mg</i>	3	
<i>cryselle-28 tablet 30mcg; 0.3mg</i>	1	
<i>cryselle tablet 30mcg; 0.3mg</i>	1	
<i>dasetta 1/35 tablet 35mcg; 1mg</i>	1	
<i>dasetta 7/7/7 tablet 35mcg; 0</i>	1	
<i>daysee tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>delyla tablet 20mcg; 0.1mg</i>	1	
<i>desogestrel/ethinyl estradiol tablet 0; 0</i>	1	
DIVIGEL GEL 0.5MG/0.5GM, 0.75MG/0.75GM, 1.25MG/1.25GM, 1MG/GM	3	
<i>dolishale tablet 20mcg; 90mcg</i>	1	
<i>dotti patch twice weekly 0.025mg/24hr, 0.0375mg/24hr, 0.05mg/24hr, 0.075mg/24hr, 0.1mg/24hr</i>	1	
<i>elimest tablet 30mcg; 0.3mg</i>	1	
<i>eluryng ring 0.015mg/24hr; 0.12mg/24hr</i>	1	
<i>enilloring ring 0.015mg/24hr; 0.12mg/24hr</i>	1	
<i>enpresse-28 tablet 0; 0</i>	1	
<i>estarylla tablet 35mcg; 0.25mg</i>	1	
<i>estradiol/norethindrone acetate tablet 0.5mg; 0.1mg, 1mg; 0.5mg</i>	1	
<i>estradiol cream 0.1mg/gm</i>	1	
<i>estradiol gel 0.06%, 0.25mg/0.25gm, 0.5mg/0.5gm, 0.75mg/0.75gm, 1.25mg/1.25gm, 1mg/gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol patch twice weekly 0.025mg/24hr, 0.0375mg/24hr, 0.05mg/24hr, 0.075mg/24hr, 0.1mg/24hr</i>	1	
<i>estradiol patch weekly 0.025mg/24hr, 0.05mg/24hr, 0.06mg/24hr, 0.075mg/24hr, 0.1mg/24hr, 37.5mcg/24hr</i>	1	
<i>estradiol oral tablet 0.5mg, 1mg, 2mg</i>	1	
<i>estradiol vaginal tablet 10mcg</i>	1	Generic Vagifem
ESTRING RING 7.5MCG/24HR	3	QL (1 EA per 90 days)
<i>ethynodiol diacetate/ethinyl estradiol tablet 35mcg; 1mg, 50mcg; 1mg</i>	1	
<i>etonogestrel/ethinyl estradiol ring 0.015mg/24hr; 0.12mg/24hr</i>	1	
<i>falmina tablet 20mcg; 0.1mg</i>	1	
<i>feirza 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	1	
<i>feirza 1/20 tablet 20mcg; 75mg; 1mg</i>	1	
FEMLYV TABLET DISINTEGRATING 0.02MG; 1MG	3	
FEMRING RING 0.05MG/24HR, 0.1MG/24HR	3	QL (1 EA per 90 days)
<i>fyavolv tablet 2.5mcg; 0.5mg, 5mcg; 1mg</i>	1	
<i>galbriela tablet chewable 25mcg; 75mg; 0.8mg</i>	1	
<i>hailey 1.5/30 tablet 30mcg; 1.5mg</i>	1	
<i>hailey 24 fe tablet 20mcg; 75mg; 1mg</i>	1	
<i>haloette ring 0.015mg/24hr; 0.12mg/24hr</i>	1	
<i>iclevia tablet 0.03mg; 0.15mg</i>	1	QL (91 EA per 91 days)
IMVEXXY MAINTENANCE PACK INSERT 10MCG, 4MCG	2	PA
IMVEXXY STARTER PACK INSERT 10MCG, 4MCG	2	PA
<i>introvale tablet 0.03mg; 0.15mg</i>	1	QL (91 EA per 91 days)
<i>jaimiess tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>jinteli tablet 5mcg; 1mg</i>	1	
<i>jolessa tablet 0.03mg; 0.15mg</i>	1	QL (91 EA per 91 days)
<i>joyeaux tablet 20mcg; 75mg; 0.1mg</i>	1	
<i>junel 1.5/30 tablet 30mcg; 1.5mg</i>	1	
<i>junel 1/20 tablet 20mcg; 1mg</i>	1	
<i>junel fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	1	
<i>junel fe 1/20 tablet 20mcg; 75mg; 1mg</i>	1	
<i>junel fe 24 tablet 20mcg; 75mg; 1mg</i>	1	
<i>kalliga tablet 0.15mg; 30mcg</i>	1	
<i>kariva tablet 0; 0</i>	1	
<i>kelnor 1/35 tablet 35mcg; 1mg</i>	1	
<i>kelnor 1/50 tablet 50mcg; 1mg</i>	1	
<i>kurvelo tablet 0.03mg; 0.15mg</i>	1	
<i>larin 1.5/30 tablet 30mcg; 1.5mg</i>	1	
<i>larin 1/20 tablet 20mcg; 1mg</i>	1	
<i>larin 24 fe tablet 20mcg; 75mg; 1mg</i>	1	
<i>larin fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	1	
<i>larin fe 1/20 tablet 20mcg; 75mg; 1mg</i>	1	
<i>lessina tablet 20mcg; 0.1mg</i>	1	
<i>levonest tablet 0; 0</i>	1	
<i>levonorgestrel and ethinyl estradiol tablet 20mcg; 90mcg</i>	1	
<i>levonorgestrel and ethinyl estradiol tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>levonorgestrel/ethinyl estradiol tablet 0.03mg; 0.15mg, 0; 0, 20mcg; 0.1mg</i>	1	
<i>levonorgestrel/ethinyl estradiol tablet 0.03mg; 0.15mg, 0; 0</i>	1	QL (91 EA per 91 days)
<i>levora 0.15/30-28 tablet 0.03mg; 0.15mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>lo-zumandimine tablet 3mg; 0.02mg</i>	1	
<i>lojaimiess tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>low-ogestrel tablet 30mcg; 0.3mg</i>	1	
<i>luizza 1.5/30 tablet 30mcg; 1.5mg</i>	1	
<i>luizza 1/20 tablet 20mcg; 1mg</i>	1	
<i>lutera tablet 20mcg; 0.1mg</i>	1	
<i>lyllana patch twice weekly 0.025mg/24hr, 0.0375mg/24hr, 0.05mg/24hr, 0.075mg/24hr, 0.1mg/24hr</i>	1	
<i>marlissa tablet 0.03mg; 0.15mg</i>	1	
MENEST TABLET 0.3MG, 0.625MG, 1.25MG, 2.5MG	3	
<i>mibelas 24 fe tablet chewable 20mcg; 75mg; 1mg</i>	1	
<i>microgestin 1.5/30 tablet 30mcg; 1.5mg</i>	1	
<i>microgestin 1/20 tablet 20mcg; 1mg</i>	1	
<i>microgestin fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	1	
<i>microgestin fe 1/20 tablet 20mcg; 75mg; 1mg</i>	1	
<i>mili tablet 35mcg; 0.25mg</i>	1	
<i>mimvey tablet 1mg; 0.5mg</i>	1	
<i>minzoya tablet 0.02mg; 36.5mg; 0.1mg</i>	1	
<i>mono-linyah tablet 35mcg; 0.25mg</i>	1	
<i>necon 0.5/35-28 tablet 35mcg; 0.5mg</i>	1	
<i>norelgestromin/ethinyl estradiol patch weekly 35mcg/24hr; 150mcg/24hr</i>	1	
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate tablet 1 20mcg; 75mg; 1mg, 30mcg; 75mg; 1.5mg</i>	1	
<i>norethindrone acetate/ethinyl estradiol tablet 2.5mcg; 0.5mg, 1 20mcg; 1mg, 30mcg; 1.5mg, 5mcg; 1mg</i>	1	
<i>norgestimate/ethinyl estradiol tablet 0; 0, 35mcg; 0.25mg</i>	1	
<i>nortrel 0.5/35 (28) tablet 35mcg; 0.5mg</i>	1	
<i>nortrel 1/35 tablet 35mcg; 1mg</i>	1	
<i>nortrel 7/7/7 tablet 35mcg; 0</i>	1	
<i>nylia 1/35 tablet 35mcg; 1mg</i>	1	
<i>nylia 7/7/7 tablet 35mcg; 0</i>	1	
<i>philith tablet 35mcg; 0.4mg</i>	1	
<i>pimtrea tablet 0; 0</i>	1	
<i>portia-28 tablet 0.03mg; 0.15mg</i>	1	
PREMARIN CREAM 0.625MG/GM	2	
PREMARIN TABLET 0.3MG, 0.45MG, 0.625MG, 0.9MG, 1.25MG	3	
PREMPHASE TABLET 0.625MG; 5MG	3	
PREMPRO TABLET 0.3MG; 1.5MG, 0.45MG; 1.5MG, 0.625MG; 2.5MG, 0.625MG; 5MG	3	
<i>rivelsa tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>rosyrah tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>setlakin tablet 0.03mg; 0.15mg</i>	1	QL (91 EA per 91 days)
<i>simliya tablet 0; 0</i>	1	
<i>simpesse tablet 0; 0</i>	1	QL (91 EA per 91 days)
<i>sprintec 28 tablet 35mcg; 0.25mg</i>	1	
<i>sronyx tablet 20mcg; 0.1mg</i>	1	
<i>tarina 24 fe tablet 20mcg; 75mg; 1mg</i>	1	
<i>tarina fe 1/20 eq tablet 20mcg; 75mg; 1mg</i>	1	
<i>tarina fe 1/20 tablet 20mcg; 75mg; 1mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>taysofy capsule 20mcg; 75mg; 1mg</i>	1	
<i>tri-estarylla tablet 0; 0</i>	1	
<i>tri-linyah tablet 0; 0</i>	1	
<i>tri-lo-mili tablet 0; 0</i>	1	
<i>tri-mili tablet 0; 0</i>	1	
<i>tri-sprintec tablet 0; 0</i>	1	
<i>tri-vylibra tablet 0; 0</i>	1	
<i>trivora-28 tablet 0; 0</i>	1	
<i>turqoz tablet 30mcg; 0.3mg</i>	1	
TYBLUME TABLET CHEWABLE 20MCG; 0.1MG	1	
<i>tydemy tablet 3mg; 0.03mg; 0.451mg</i>	1	
<i>valtya 1/35 tablet 35mcg; 1mg</i>	1	
<i>valtya 1/50 tablet 50mcg; 1mg</i>	1	
<i>vestura tablet 3mg; 0.02mg</i>	1	
<i>vienva tablet 20mcg; 0.1mg</i>	1	
<i>viorele tablet 0; 0</i>	1	
<i>vyfemla tablet 35mcg; 0.4mg</i>	1	
<i>vylibra tablet 35mcg; 0.25mg</i>	1	
<i>wera tablet 35mcg; 0.5mg</i>	1	
<i>xarah fe tablet 0; 75mg; 1mg</i>	1	
<i>xelria fe tablet chewable 35mcg; 75mg; 0.4mg</i>	1	
<i>xulane patch weekly 35mcg/24hr; 150mcg/24hr</i>	1	
<i>yuvaferm tablet 10mcg</i>	1	
<i>zafemy patch weekly 35mcg/24hr; 150mcg/24hr</i>	1	
<i>zovia 1/35 tablet 35mcg; 1mg</i>	1	
<b>Progestins</b>		
<i>camila tablet 0.35mg</i>	1	
CRINONE GEL 4%, 8%	3	PA
<i>deblitane tablet 0.35mg</i>	1	
DEPO-PROVERA CONTRACEPTIVE INJECTION 150MG/ML	3	QL (1 ML per 90 days)
DEPO-SUBQ PROVERA 104 INJECTION 104MG/0.65ML	2	QL (0.65 ML per 90 days)
<i>emzahh tablet 0.35mg</i>	1	
ENDOMETRIN INSERT 100MG	3	PA
<i>errin tablet 0.35mg</i>	1	
<i>gallifrey tablet 5mg</i>	1	
<i>heather tablet 0.35mg</i>	1	
<i>incassia tablet 0.35mg</i>	1	
<i>jencycla tablet 0.35mg</i>	1	
LILETTA INTRAUTERINE DEVICE 20.1MCG/DAY	2	
<i>lyleq tablet 0.35mg</i>	1	
<i>lyza tablet 0.35mg</i>	1	
<i>medroxyprogesterone acetate injection 150mg/ml</i>	1	QL (1 ML per 90 days)
<i>medroxyprogesterone acetate tablet 10mg, 2.5mg, 5mg</i>	1	
<i>megestrol acetate suspension 40mg/ml, 625mg/5ml</i>	1	
<i>megestrol acetate tablet 20mg, 40mg</i>	1	
<i>meleya tablet 0.35mg</i>	1	
NEXPLANON INJECTION 68MG	2	
<i>nora-be tablet 0.35mg</i>	1	
<i>norethindrone acetate tablet 5mg</i>	1	
<i>norethindrone tablet 0.35mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>norlyroc tablet 0.35mg</i>	1	
<i>orquidea tablet 0.35mg</i>	1	
<i>progesterone capsule 100mg, 200mg</i>	1	
<i>progesterone insert 100mg</i>	1	PA
<i>sharobel tablet 0.35mg</i>	1	
SKYLA INTRAUTERINE DEVICE 13.5MG	3	
<b>Selective Estrogen Receptor Modifying Agents</b>		
CLOMID TABLET 50MG	1	PA
<i>clomiphene citrate tablet 50mg</i>	1	PA
<i>milophene tablet 50mg</i>	1	PA
OSPHENA TABLET 60MG	2	QL (30 EA per 30 days) PA
<i>raloxifene hydrochloride tablet 60mg</i>	1	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</b>		
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</b>		
<i>euthyrox tablet 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 50mcg, 75mcg, 88mcg</i>	3	
<i>levo-t tablet 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 300mcg, 50mcg, 75mcg, 88mcg</i>	3	
<i>levothyroxine sodium injection 100mcg/5ml, 100mcg/ml, 100mcg, 200mcg/5ml, 200mcg, 500mcg/5ml, 500mcg</i>	4	
<i>levothyroxine sodium tablet 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 300mcg, 50mcg, 75mcg, 88mcg</i>	1	
<i>levoxyl tablet 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 50mcg, 75mcg, 88mcg</i>	1	
<i>liomny tablet 25mcg, 50mcg, 5mcg</i>	1	
<i>liothyronine sodium injection 10mcg/ml</i>	4	
<i>liothyronine sodium tablet 25mcg, 50mcg, 5mcg</i>	1	
REZDIFFRA TABLET 100MG, 60MG, 80MG	4	QL (30 EA per 30 days) PA
SYNTHROID TABLET 100MCG, 112MCG, 125MCG, 137MCG, 150MCG, 175MCG, 200MCG, 25MCG, 300MCG, 50MCG, 75MCG, 88MCG	3	
THYROGEN INJECTION 0.9MG	4	PA
<i>unithroid tablet 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 300mcg, 50mcg, 75mcg, 88mcg</i>	1	
<b>Hormonal Agents, Suppressant (Adrenal or Pituitary)</b>		
<b>Hormonal Agents, Suppressant (Adrenal or Pituitary)</b>		
<i>cabergoline tablet 0.5mg</i>	1	
ELIGARD INJECTION 30MG	3	QL (1 EA per 112 days) PA
ELIGARD INJECTION 45MG	3	QL (1 EA per 168 days) PA
ELIGARD INJECTION 7.5MG	3	QL (1 EA per 28 days) PA
ELIGARD INJECTION 22.5MG	3	QL (1 EA per 84 days) PA
FIRMAGON INJECTION 80MG	3	QL (1 EA per 28 days) PA
FIRMAGON INJECTION 120MG/VIAL	4	QL (4 EA per 365 days) PA
KORLYM TABLET 300MG	4	QL (120 EA per 30 days) PA
<i>lanreotide acetate injection 120mg/0.5ml</i>	4	PA
<i>leuprolide acetate injection 1mg/0.2ml</i>	3	PA
LUPRON DEPOT (1-MONTH) INJECTION 3.75MG, 7.5MG	4	QL (1 EA per 28 days) PA
LUPRON DEPOT (3-MONTH) INJECTION 11.25MG, 22.5MG	4	QL (1 EA per 84 days) PA
LUPRON DEPOT (4-MONTH) INJECTION 30MG	4	QL (1 EA per 112 days) PA
LUPRON DEPOT (6-MONTH) INJECTION 45MG	4	QL (1 EA per 168 days) PA

Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT-PED (1-MONTH) INJECTION 11.25MG, 15MG, 7.5MG	4	QL (1 EA per 28 days) PA
LUPRON DEPOT-PED (3-MONTH) INJECTION 11.25MG, 30MG	4	QL (1 EA per 84 days) PA
<i>mifepristone tablet 200mg</i>	1	
<i>mifepristone tablet 300mg</i>	4	QL (120 EA per 30 days) PA
MYCAPSSA CAPSULE DELAYED RELEASE 20MG	4	PA
MYFEMBREE TABLET 1MG; 0.5MG; 40MG	4	QL (30 EA per 30 days) PA
<i>octreotide acetate injection 100mcg/ml, 200mcg/ml, 50mcg/ml</i>	1	PA
<i>octreotide acetate injection 1000mcg/ml, 10mg, 20mg, 30mg, 500mcg/ml</i>	4	PA
ORGOVYX TABLET 120MG	4	PA
ORIAHNN CAPSULE THERAPY PACK 300MG; 1MG; 0.5MG	4	QL (56 EA per 28 days) PA
ORILISSA TABLET 150MG	4	QL (30 EA per 30 days) PA
ORILISSA TABLET 200MG	4	QL (60 EA per 30 days) PA
PALSONIFY TABLET 30MG	4	QL (120 EA per 30 days) PA
PALSONIFY TABLET 20MG	4	QL (60 EA per 30 days) PA
RECORLEV TABLET 150MG	4	QL (240 EA per 30 days) PA
SANDOSTATIN LAR DEPOT INJECTION 10MG, 20MG, 30MG	4	PA
SANDOSTATIN INJECTION 50MCG/ML	3	PA
SANDOSTATIN INJECTION 100MCG/ML, 500MCG/ML	4	PA
SIGNIFOR LAR INJECTION 10MG, 20MG, 30MG, 40MG, 60MG	4	QL (1 EA per 28 days) PA
SIGNIFOR INJECTION 0.3MG/ML, 0.6MG/ML, 0.9MG/ML	4	QL (60 ML per 30 days) PA
SOMATULINE DEPOT INJECTION 120MG/0.5ML, 60MG/0.2ML, 90MG/0.3ML	4	PA
SOMAVERT INJECTION 10MG, 15MG, 20MG, 25MG, 30MG	4	PA
SUPPRELIN LA INJECTION 50MG	4	QL (1 EA per 365 days) PA
SYNAREL SOLUTION 2MG/ML	4	
TRELSTAR MIXJECT INJECTION 22.5MG	3	QL (1 EA per 168 days) PA
TRELSTAR MIXJECT INJECTION 3.75MG	3	QL (1 EA per 28 days) PA
TRELSTAR MIXJECT INJECTION 11.25MG	3	QL (1 EA per 84 days) PA
TRIPTODUR INJECTION 22.5MG	4	QL (1 EA per 168 days) PA
VABRINTY INJECTION 45MG	3	QL (1 EA per 168 days) PA
VABRINTY INJECTION 30MG	4	QL (1 EA per 112 days) PA
VABRINTY INJECTION 22.5MG	4	QL (1 EA per 84 days) PA
ZOLADEX INJECTION 3.6MG	3	QL (1 EA per 28 days) PA
ZOLADEX INJECTION 10.8MG	3	QL (1 EA per 84 days) PA
<b>Hormonal Agents, Suppressant (Thyroid)</b>		
<b><i>Antithyroid Agents</i></b>		
<i>methimazole tablet 10mg, 5mg</i>	1	
<i>propylthiouracil tablet 50mg</i>	1	
<b>Immunological Agents</b>		
<b><i>Angioedema Agents</i></b>		
ANDEMBRY INJECTION 200MG/1.2ML	4	QL (2.4 ML per 28 days) PA
BERINERT INJECTION 500UNIT	4	PA
CINRYZE INJECTION 500UNIT	4	PA
DAWNZERA INJECTION 80MG/0.8ML	4	QL (0.8 ML per 28 days) PA
EKTERLY TABLET 300MG	4	QL (120 EA per 30 days) PA
FIRAZYR INJECTION 30MG/3ML	4	PA

Drug Name	Drug Tier	Requirements/Limits
HAEGARDA INJECTION 2000UNIT, 3000UNIT	4	PA
<i>icatibant acetate injection 30mg/3ml</i>	4	PA
KALBITOR INJECTION 10MG/ML	4	PA
ORLADEYO CAPSULE 110MG, 150MG	4	QL (30 EA per 30 days) PA
RUCONEST INJECTION 2100UNIT	4	PA
SAJAZIR INJECTION 30MG/3ML	4	PA
TAKHZYRO INJECTION 150MG/ML, 300MG/2ML	4	PA
<b>Immunoglobulins</b>		
ALYGLO INJECTION 10GM/100ML, 20GM/200ML, 5GM/50ML	4	PA
ASCENIV INJECTION 5GM/50ML	4	PA
ATGAM INJECTION 50MG/ML	4	
BEYFORTUS INJECTION 100MG/ML, 50MG/0.5ML	3	
BIVIGAM INJECTION 10%, 5GM/50ML	4	PA
CUTAQUIG INJECTION 1.65GM/10ML, 1GM/6ML, 2GM/12ML, 3.3GM/20ML, 4GM/24ML, 8GM/48ML	4	PA
CUVITRU INJECTION 10GM/50ML, 1GM/5ML, 2GM/10ML, 4GM/20ML, 8GM/40ML	4	PA
CYTOGAM INJECTION 50MG/ML	4	PA
FLEBOGAMMA DIF INJECTION 10GM/100ML, 10GM/200ML, 2.5GM/50ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	4	PA
GAMASTAN INJECTION 0	2	PA
GAMMAGARD LIQUID ERC INJECTION 10GM/100ML, 5GM/50ML	4	PA
GAMMAGARD LIQUID INJECTION 10GM/100ML, 1GM/10ML, 2.5GM/25ML, 20GM/200ML, 30GM/300ML, 5GM/50ML	4	PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML INJECTION 10GM, 5GM	4	PA
GAMMAKED INJECTION 10GM/100ML, 1GM/10ML, 20GM/200ML, 5GM/50ML	4	PA
GAMMAPLEX INJECTION 10GM/100ML, 10GM/200ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	4	PA
GAMUNEX-C INJECTION 10GM/100ML, 1GM/10ML, 2.5GM/25ML, 20GM/200ML, 40GM/400ML, 5GM/50ML	4	PA
HEPAGAM B INJECTION 312UNIT/ML	4	B/D
HIZENTRA INJECTION 10GM/50ML, 1GM/5ML, 2GM/10ML, 4GM/20ML	4	PA
HYPERHEP B INJECTION 110UNIT/0.5ML	3	B/D
HYPERHEP B INJECTION 220UNIT/ML	4	B/D
HYQVIA INJECTION 10GM/100ML; 800UNIT/5ML, 2.5GM/25ML; 200UNT/1.25ML, 20GM/200ML; 1600UNIT/10ML, 30GM/300ML; 2400UNIT/15ML, 5GM/50ML; 400UNIT/2.5ML	4	PA
NABI-HB INJECTION 312UNIT/ML	4	B/D
OCTAGAM INJECTION 10GM/100ML, 10GM/200ML, 1GM/20ML, 2.5GM/50ML, 20GM/200ML, 2GM/20ML, 30GM/300ML, 5GM/100ML, 5GM/50ML	4	PA
PANZYGA INJECTION 10GM/100ML, 1GM/10ML, 2.5GM/25ML, 20GM/200ML, 30GM/300ML, 5GM/50ML	4	PA

Drug Name	Drug Tier	Requirements/Limits
PRIVIGEN INJECTION 10GM/100ML, 20GM/200ML, 40GM/400ML, 5GM/50ML	4	PA
SYNAGIS INJECTION 100MG/ML, 50MG/0.5ML	4	
THYMOGLOBULIN INJECTION 25MG	4	
VARIZIG INJECTION 125UNIT/1.2ML	4	PA
WINRHO SDF INJECTION 15000UNIT/13ML, 1500UNIT/1.3ML, 2500UNIT/2.2ML, 5000UNIT/4.4ML	4	
XEMBIFY INJECTION 10GM/50ML, 1GM/5ML, 2GM/10ML, 4GM/20ML	4	PA
YIMMUGO INJECTION 10GM/100ML, 20GM/200ML, 5GM/50ML	4	PA
<b>Immunological Agents, Other</b>		
ARCALYST INJECTION 220MG	4	PA
AURANOFIN CAPSULE 3MG	4	
BENLYSTA INJECTION 200MG/ML	4	PA
BIMZELX INJECTION 160MG/ML	4	QL (1 ML per 28 days) PA
BIMZELX INJECTION 320MG/2ML	4	QL (6 ML per 28 days) PA
CIBINQO TABLET 100MG, 200MG, 50MG	4	QL (30 EA per 30 days) PA
COSENTYX SENSOREADY PEN INJECTION 150MG/ML	4	QL (10 ML per 28 days) PA
COSENTYX UNOREADY INJECTION 300MG/2ML	4	QL (10 ML per 28 days) PA
COSENTYX INJECTION 125MG/5ML	4	PA
COSENTYX INJECTION 150MG/ML, 75MG/0.5ML	4	QL (10 ML per 28 days) PA
DUPIXENT INJECTION 200MG/1.14ML	4	QL (4.56 ML per 28 days) PA
DUPIXENT INJECTION 300MG/2ML	4	QL (8 ML per 28 days) PA
EMPAVELI INJECTION 1080MG/20ML	4	PA
ENFLONIA INJECTION 105MG/0.7ML	3	
ENJAYMO INJECTION 1100MG/22ML	4	PA
ENTYVIO PEN INJECTION 108MG/0.68ML	4	QL (1.36 ML per 28 days) PA
ENTYVIO INJECTION 300MG	4	PA
GAMIFANT INJECTION 100MG/20ML, 10MG/2ML, 50MG/10ML	4	PA
ILARIS INJECTION 150MG/ML	4	QL (2 ML per 28 days) PA
ILUMYA INJECTION 100MG/ML	4	QL (1 ML per 28 days) PA
KEVZARA INJECTION 150MG/1.14ML, 200MG/1.14ML	4	QL (2.28 ML per 28 days) PA
KINERET INJECTION 100MG/0.67ML	4	PA
LEMTRADA INJECTION 12MG/1.2ML	4	PA
LITFULO CAPSULE 50MG	4	QL (30 EA per 30 days) PA
NEMLUVIO INJECTION 30MG	4	QL (2 EA per 28 days) PA
ODACTRA TABLET SUBLINGUAL 0; 0	2	QL (30 EA per 30 days) PA
OMVOH INJECTION 100MG/ML, 200MG/2ML	4	QL (2 ML per 28 days) PA
OMVOH INJECTION 0	4	QL (3 ML per 28 days) PA
OMVOH INJECTION 300MG/15ML	4	QL (45 ML per 365 days) PA
ORENCIA CLICKJECT INJECTION 125MG/ML	4	QL (4 ML per 28 days) PA
ORENCIA INJECTION 50MG/0.4ML	4	QL (1.6 ML per 28 days) PA
ORENCIA INJECTION 87.5MG/0.7ML	4	QL (2.8 ML per 28 days) PA
ORENCIA INJECTION 125MG/ML	4	QL (4 ML per 28 days) PA
OTEZLA TABLET THERAPY PACK 0	4	QL (110 EA per 365 days) PA
PALFORZIA INITIAL DOSE ESCALATION 1-3 YEARS CAPSULE SPRINKLE THERAPY PACK 0	3	PA

Drug Name	Drug Tier	Requirements/Limits
PALFORZIA INITIAL DOSE ESCALATION 4-17 YEARS CAPSULE SPRINKLE THERAPY PACK 0	4	PA
PALFORZIA INITIAL DOSE ESCALATION CAPSULE SPRINKLE THERAPY PACK 0	4	PA
PALFORZIA LEVEL 0 CAPSULE SPRINKLE THERAPY PACK 1MG	3	PA
PALFORZIA LEVEL 10 CAPSULE SPRINKLE THERAPY PACK 0	4	PA
PALFORZIA LEVEL 11 (MAINTENANCE) PACKET 300MG	4	PA
PALFORZIA LEVEL 11 (TITRATION) PACKET 300MG	4	PA
PALFORZIA LEVEL 1 CAPSULE SPRINKLE THERAPY PACK 1MG	4	PA
PALFORZIA LEVEL 2 CAPSULE SPRINKLE THERAPY PACK 1MG	4	PA
PALFORZIA LEVEL 3 CAPSULE SPRINKLE THERAPY PACK 0	4	PA
PALFORZIA LEVEL 4 CAPSULE SPRINKLE THERAPY PACK 20MG	4	PA
PALFORZIA LEVEL 5 CAPSULE SPRINKLE THERAPY PACK 20MG	4	PA
PALFORZIA LEVEL 6 CAPSULE SPRINKLE THERAPY PACK 20MG	4	PA
PALFORZIA LEVEL 7 CAPSULE SPRINKLE THERAPY PACK 0	4	PA
PALFORZIA LEVEL 8 CAPSULE SPRINKLE THERAPY PACK 0	4	PA
PALFORZIA LEVEL 9 CAPSULE SPRINKLE THERAPY PACK 100MG	4	PA
PIASKY INJECTION 340MG/2ML	4	PA
PROVENGE INJECTION 50000000CELLS	4	PA
RHAPSIDO TABLET 25MG	4	QL (60 EA per 30 days) PA
RIDAURA CAPSULE 3MG	4	
RINVOQ LQ SOLUTION 1MG/ML	4	QL (360 ML per 30 days) PA
RINVOQ TABLET EXTENDED RELEASE 24 HOUR 15MG, 30MG, 45MG	4	QL (30 EA per 30 days) PA
RYSTIGGO INJECTION 280MG/2ML, 420MG/3ML	4	QL (12 ML per 28 days) PA
RYSTIGGO INJECTION 560MG/4ML	4	QL (16 ML per 28 days) PA
RYSTIGGO INJECTION 840MG/6ML	4	QL (24 ML per 28 days) PA
SAPHNELO INJECTION 300MG/2ML	4	PA
SILIQ INJECTION 210MG/1.5ML	4	QL (7.5 ML per 28 days) PA
SIMULECT INJECTION 10MG, 20MG	4	
SKYRIZI PEN INJECTION 150MG/ML	4	QL (1 ML per 28 days) PA
SKYRIZI INJECTION 150MG/ML	4	QL (1 ML per 28 days) PA
SKYRIZI INJECTION 180MG/1.2ML	4	QL (1.2 ML per 56 days) PA
SKYRIZI INJECTION 360MG/2.4ML	4	QL (2.4 ML per 56 days) PA
SKYRIZI INJECTION 600MG/10ML	4	QL (60 ML per 365 days) PA
SOLIRIS INJECTION 300MG/30ML	4	PA
STELARA INJECTION 130MG/26ML	4	QL (104 ML per 365 days) PA
STELARA INJECTION 45MG/0.5ML, 90MG/ML	4	QL (3 ML per 84 days) PA
STEQEYMA INJECTION 45MG/0.5ML	2	QL (3 ML per 84 days) PA

Drug Name	Drug Tier	Requirements/Limits
STEQEYMA INJECTION 130MG/26ML	4	QL (104 ML per 365 days) PA
STEQEYMA INJECTION 90MG/ML	4	QL (3 ML per 84 days) PA
SYLVANT INJECTION 100MG, 400MG	4	PA
TALTZ INJECTION 20MG/0.25ML	4	QL (0.5 ML per 28 days) PA
TALTZ INJECTION 40MG/0.5ML	4	QL (1 ML per 28 days) PA
TALTZ INJECTION 80MG/ML	4	QL (4 ML per 28 days) PA
TAVNEOS CAPSULE 10MG	4	QL (180 EA per 30 days) PA
TEPEZZA INJECTION 500MG	4	PA
TYENNE INJECTION 200MG/10ML, 400MG/20ML, 80MG/4ML	4	PA
TYENNE INJECTION 162MG/0.9ML	4	QL (3.6 ML per 28 days) PA
ULTOMIRIS INJECTION 1100MG/11ML, 300MG/3ML	4	PA
USTEKINUMAB INJECTION 130MG/26ML	4	QL (104 ML per 365 days) PA
USTEKINUMAB INJECTION 45MG/0.5ML, 90MG/ML	4	QL (3 ML per 84 days) PA
VELSIPITY TABLET 2MG	4	QL (30 EA per 30 days) PA
VEOPOZ INJECTION 400MG/2ML	4	PA
VYVGART HYTRULO INJECTION 1000MG/5ML; 10000UNIT/5ML	4	QL (20 ML per 28 days) PA
VYVGART INJECTION 400MG/20ML	4	PA
WEZLANA INJECTION 130MG/26ML	4	QL (104 ML per 365 days) PA
WEZLANA INJECTION 45MG/0.5ML, 90MG/ML	4	QL (3 ML per 84 days) PA
XELJANZ XR TABLET EXTENDED RELEASE 24 HOUR 11MG, 22MG	4	QL (30 EA per 30 days) PA
XELJANZ SOLUTION 1MG/ML	4	QL (300 ML per 30 days) PA
XELJANZ TABLET 10MG, 5MG	4	QL (60 EA per 30 days) PA
XOLAIR INJECTION 75MG/0.5ML	4	QL (1 ML per 28 days) PA
XOLAIR INJECTION 150MG	4	QL (8 EA per 28 days) PA
XOLAIR INJECTION 150MG/ML, 300MG/2ML	4	QL (8 ML per 28 days) PA
ZILBRYSQ INJECTION 16.6MG/0.416ML, 23MG/0.574ML, 32.4MG/0.81ML	4	PA
<b>Immunostimulants</b>		
ACTIMMUNE INJECTION 100MCG/0.5ML	4	PA
ALFERON N INJECTION 5000000UNIT/ML	4	
BESREMI INJECTION 500MCG/ML	4	PA
PEGASYS INJECTION 180MCG/ML	4	PA
<b>Immunosuppressants</b>		
ADALIMUMAB-AATY 1-PEN KIT INJECTION 80MG/0.8ML	4	QL (3 EA per 28 days) PA
ADALIMUMAB-AATY 1-PEN KIT INJECTION 40MG/0.4ML	4	QL (6 EA per 28 days) PA
ADALIMUMAB-AATY 2-PEN KIT INJECTION 40MG/0.4ML	4	QL (6 EA per 28 days) PA
ADALIMUMAB-AATY 2-SYRINGE INJECTION 20MG/0.2ML	4	QL (2 EA per 28 days) PA
ADALIMUMAB-AATY 2-SYRINGE INJECTION 40MG/0.4ML	4	QL (6 EA per 28 days) PA
ADALIMUMAB-AATY CD/UC/HS STARTER INJECTION 80MG/0.8ML	4	QL (3 EA per 28 days) PA
ADALIMUMAB-ADB M CROHNS/UC/HS STARTER INJECTION 40MG/0.8ML	4	QL (6 EA per 28 days) PA ; Boehringer Ingelheim labeled products only

Drug Name	Drug Tier	Requirements/Limits
ADALIMUMAB-ADBM PSORIASIS/UVEITIS STARTER INJECTION 40MG/0.8ML	4	QL (6 EA per 28 days) PA ; Boehringer Ingelheim labeled products only
ADALIMUMAB-ADBM STARTER PACKAGE FOR CROHNS DISEASE/UC/HS INJECTION 40MG/0.4ML	4	QL (6 EA per 28 days) PA ; Boehringer Ingelheim labeled products only
ADALIMUMAB-ADBM STARTER PACKAGE FOR PSORIASIS/UVEITIS INJECTION 40MG/0.4ML	4	QL (6 EA per 28 days) PA ; Boehringer Ingelheim labeled products only
ADALIMUMAB-ADBM INJECTION 10MG/0.2ML, 20MG/0.4ML	4	QL (2 EA per 28 days) PA ; Boehringer Ingelheim labeled products only
ADALIMUMAB-ADBM INJECTION 40MG/0.4ML, 40MG/0.8ML	4	QL (6 EA per 28 days) PA ; Boehringer Ingelheim labeled products only
ARAVA TABLET 10MG, 20MG	4	
ASTAGRAF XL CAPSULE EXTENDED RELEASE 24 HOUR 0.5MG, 1MG, 5MG	3	B/D
AVSOLA INJECTION 100MG	4	PA
AZASAN TABLET 100MG, 75MG	3	B/D
<i>azathioprine injection 100mg</i>	4	B/D
<i>azathioprine tablet 100mg, 50mg, 75mg</i>	1	B/D
BENLYSTA INJECTION 120MG, 400MG	4	PA
CELLCEPT INTRAVENOUS INJECTION 500MG	4	B/D
CELLCEPT CAPSULE 250MG	4	B/D
CELLCEPT SUSPENSION RECONSTITUTED 200MG/ML	4	B/D
CELLCEPT TABLET 500MG	4	B/D
CIMZIA STARTER KIT INJECTION 200MG/ML	4	QL (6 EA per 365 days) PA
CIMZIA INJECTION 200MG	4	QL (1 EA per 28 days) PA
CIMZIA INJECTION 200MG/ML	4	QL (2 EA per 28 days) PA
<i>cyclosporine modified capsule 100mg, 25mg, 50mg</i>	1	B/D
<i>cyclosporine modified solution 100mg/ml</i>	1	B/D
<i>cyclosporine capsule 100mg, 25mg</i>	1	B/D
<i>cyclosporine injection 50mg/ml</i>	4	
ENBREL MINI INJECTION 50MG/ML	4	QL (8 ML per 28 days) PA
ENBREL SURECLICK INJECTION 50MG/ML	4	QL (8 ML per 28 days) PA
ENBREL INJECTION 25MG/0.5ML	4	QL (4 ML per 28 days) PA
ENBREL INJECTION 50MG/ML	4	QL (8 ML per 28 days) PA
ENVARUS XR TABLET EXTENDED RELEASE 24 HOUR 0.75MG, 1MG	3	B/D
ENVARUS XR TABLET EXTENDED RELEASE 24 HOUR 4MG	4	B/D
<i>everolimus tablet 0.25mg</i>	1	B/D
<i>everolimus tablet 0.5mg, 0.75mg, 1mg</i>	4	B/D
<i>gengraf capsule 100mg, 25mg</i>	1	B/D
<i>gengraf solution 100mg/ml</i>	1	B/D
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJECTION 0	4	QL (4 EA per 365 days) PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJECTION 80MG/0.8ML	4	QL (6 EA per 365 days) PA

Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN-CD/UC/HS STARTER INJECTION 80MG/0.8ML	4	QL (4 EA per 28 days) PA ; Abbvie labeled products only
HUMIRA PEN-CD/UC/HS STARTER INJECTION 40MG/0.8ML	4	QL (6 EA per 28 days) PA
HUMIRA PEN-PEDIATRIC UC STARTER PACK INJECTION 80MG/0.8ML	4	QL (4 EA per 28 days) PA ; Abbvie labeled products only
HUMIRA PEN-PS/UV STARTER INJECTION 40MG/0.8ML	4	QL (6 EA per 28 days) PA
HUMIRA PEN-PS/UV STARTER INJECTION 0	4	QL (6 EA per 365 days) PA
HUMIRA PEN INJECTION 80MG/0.8ML	4	QL (4 EA per 28 days) PA ; Abbvie labeled products only
HUMIRA PEN INJECTION 40MG/0.8ML	4	QL (6 EA per 28 days) PA
HUMIRA PEN INJECTION 40MG/0.4ML	4	QL (6 EA per 28 days) PA ; Abbvie labeled products only
HUMIRA INJECTION 10MG/0.1ML, 20MG/0.2ML	4	QL (2 EA per 28 days) PA ; Abbvie labeled products only
HUMIRA INJECTION 40MG/0.8ML	4	QL (6 EA per 28 days) PA
HUMIRA INJECTION 40MG/0.4ML	4	QL (6 EA per 28 days) PA ; Abbvie labeled products only
IMURAN TABLET 50MG	3	B/D
INFLECTRA INJECTION 100MG	4	PA
INFLIXIMAB INJECTION 100MG	4	PA
JYLAMVO SOLUTION 2MG/ML	3	PA
<i>leflunomide tablet 10mg, 20mg</i>	1	
LUPKYNIS CAPSULE 7.9MG	4	QL (180 EA per 30 days) PA
<i>methotrexate sodium injection 1gm/40ml, 250mg/10ml, 50mg/2ml</i>	1	
<i>methotrexate sodium tablet 2.5mg</i>	1	
<i>methotrexate injection 50mg/2ml</i>	1	
<i>mycophenolate mofetil capsule 250mg</i>	1	B/D
<i>mycophenolate mofetil injection 500mg</i>	4	B/D
<i>mycophenolate mofetil suspension reconstituted 200mg/ml</i>	4	B/D
<i>mycophenolate mofetil tablet 500mg</i>	1	B/D
<i>mycophenolic acid dr tablet delayed release 180mg, 360mg</i>	1	B/D
MYFORTIC TABLET DELAYED RELEASE 180MG	3	B/D
MYFORTIC TABLET DELAYED RELEASE 360MG	4	B/D
MYHIBBIN SUSPENSION 200MG/ML	4	B/D
NEORAL CAPSULE 100MG, 25MG	3	B/D
NEORAL SOLUTION 100MG/ML	3	B/D
NIKTIMVO INJECTION 22MG/0.44ML, 9MG/0.18ML	4	PA
NULOJIX INJECTION 250MG	4	
ORENCIA INJECTION 250MG	4	PA
OTREXUP INJECTION 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	QL (1.6 ML per 28 days) PA
PEGASYS INJECTION 180MCG/0.5ML	4	PA
PROGRAF CAPSULE 0.5MG, 1MG	3	B/D
PROGRAF CAPSULE 5MG	4	B/D
PROGRAF PACKET 0.2MG, 1MG	3	B/D
RAPAMUNE SOLUTION 1MG/ML	4	B/D
RAPAMUNE TABLET 0.5MG	3	B/D
RAPAMUNE TABLET 1MG, 2MG	4	B/D

Drug Name	Drug Tier	Requirements/Limits
RASUVO INJECTION 7.5MG/0.15ML	3	QL (0.6 ML per 28 days) PA
RASUVO INJECTION 10MG/0.2ML	3	QL (0.8 ML per 28 days) PA
RASUVO INJECTION 12.5MG/0.25ML	3	QL (1 ML per 28 days) PA
RASUVO INJECTION 15MG/0.3ML	3	QL (1.2 ML per 28 days) PA
RASUVO INJECTION 17.5MG/0.35ML	3	QL (1.4 ML per 28 days) PA
RASUVO INJECTION 20MG/0.4ML	3	QL (1.6 ML per 28 days) PA
RASUVO INJECTION 22.5MG/0.45ML	3	QL (1.8 ML per 28 days) PA
RASUVO INJECTION 25MG/0.5ML	3	QL (2 ML per 28 days) PA
RASUVO INJECTION 30MG/0.6ML	3	QL (2.4 ML per 28 days) PA
REMICADE INJECTION 100MG	4	PA
RENFLEXIS INJECTION 100MG	4	PA
REZUROCK TABLET 200MG	4	QL (60 EA per 30 days) PA
SANDIMMUNE CAPSULE 100MG, 25MG	3	B/D
SANDIMMUNE INJECTION 50MG/ML	4	
SANDIMMUNE ORAL SOLUTION 100MG/ML	3	B/D
SIMPONI ARIA INJECTION 50MG/4ML	4	PA
SIMPONI INJECTION 50MG/0.5ML	4	QL (0.5 ML per 28 days) PA
SIMPONI INJECTION 100MG/ML	4	QL (3 ML per 28 days) PA
<i>sirolimus solution 1mg/ml</i>	1	B/D
<i>sirolimus tablet 0.5mg, 1mg, 2mg</i>	1	B/D
<i>tacrolimus capsule 0.5mg, 1mg, 5mg</i>	1	B/D
<i>tacrolimus injection 5mg/ml</i>	1	
VOYXACT INJECTION 400MG/2ML	4	QL (2 ML per 28 days) PA
XATMEP SOLUTION 2.5MG/ML	3	PA
ZORTRESS TABLET 0.25MG	3	B/D
ZORTRESS TABLET 0.5MG, 0.75MG, 1MG	4	B/D
<b>Vaccines</b>		
ABRYSVO INJECTION 120MCG/0.5ML	1	QL (1 EA per 252 days)
ACTHIB INJECTION 0	1	
ADACEL INJECTION 2LF/0.5ML; 15.5MCG/0.5ML; 5LF/0.5ML	1	
AREXVY INJECTION 120MCG/0.5ML	1	QL (1 EA per 999 days)
BCG VACCINE INJECTION 50MG	1	
BEXSERO INJECTION 0.5ML	1	
BOOSTRIX INJECTION 2.5LF/0.5ML; 18.5MCG/0.5ML; 5LF/0.5ML	1	
DAPTACEL INJECTION 15LF/0.5ML; 23MCG/0.5ML; 5LF/0.5ML	2	
DENGVAXIA INJECTION 0	2	
ENGERIX-B INJECTION 10MCG/0.5ML, 20MCG/ML	1	B/D
GARDASIL 9 INJECTION 0.5ML	1	
HAVRIX INJECTION 1440UNIT/ML, 720ELU/0.5ML	1	
HEPLISAV-B INJECTION 20MCG/0.5ML	1	B/D
HIBERIX INJECTION 10MCG	1	
IMOVAX RABIES (H.D.C.V.) INJECTION 2.5UNIT/ML	1	B/D
INFANRIX INJECTION 25LFU/0.5ML; 58MCG/0.5ML; 10LFU/0.5ML	2	
IPOL INACTIVATED IPV INJECTION 0	1	
IXIARO INJECTION 0	1	
JYNNEOS INJECTION 0.5ML	1	

Drug Name	Drug Tier	Requirements/Limits
KINRIX INJECTION 25LFU/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	2	
M-M-R II INJECTION 0; 0; 0	1	
MENACTRA INJECTION 0	1	
MENQUADFI INJECTION 0.5ML	1	
MENVEO INJECTION 0	1	
MRESVIA INJECTION 50MCG/0.5ML	1	QL (0.5 ML per 999 days)
PEDIARIX INJECTION 25LFU/0.5ML; 10MCG/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	1	
PEDVAX HIB INJECTION 7.5MCG/0.5ML	2	
PENBRAYA INJECTION 0; 0	1	
PENMENVY INJECTION 0; 0	1	
PENTACEL INJECTION 15LFU/0.5ML; 0; 48MCG/0.5ML; 0; 5LFU/0.5ML	2	
PREHEVBRIO INJECTION 10MCG/ML	1	B/D
PRIORIX INJECTION 0; 0; 0	1	
PROQUAD INJECTION 0; 0; 0; 0	2	
QUADRACEL INJECTION 15LFU/0.5ML; 48MCG/0.5ML; 0; 5LFU/0.5ML	2	
RABAVERT INJECTION 0	1	B/D
RECOMBIVAX HB INJECTION 10MCG/ML, 40MCG/ML, 5MCG/0.5ML	1	B/D
ROTARIX SUSPENSION 0	2	
ROTATEQ SOLUTION 0	1	
SHINGRIX INJECTION 50MCG/0.5ML	1	
<i>shingrix injection 50mcg/0.5ml</i>	1	
STAMARIL INJECTION 0	1	
TDVAX INJECTION 2LF/0.5ML; 2LF/0.5ML	1	
TENIVAC INJECTION 2LFU; 5LFU	1	
TETANUS/DIPHThERIA TOXOIDS-ADSORBED ADULT INJECTION 2LF/0.5ML; 2LF/0.5ML	1	
TICOVAC INJECTION 2.4MCG/0.5ML	1	
TICOVAC INJECTION 1.2MCG/0.25ML	2	
TRUMENBA INJECTION 0.5ML	1	
TWINRIX INJECTION 720ELU/ML; 20MCG/ML	1	
TYPHIM VI INJECTION 25MCG/0.5ML	1	
VAQTA INJECTION 25UNIT/0.5ML, 50UNIT/ML	1	
VARIVAX INJECTION 1350PFU/0.5ML	1	
VAXCHORA SUSPENSION RECONSTITUTED 0	1	
VAXELIS INJECTION 0; 0; 0; 0; 0; 0	2	
VIMKUNYA INJECTION 40MCG/0.8ML	1	
VIVOTIF CAPSULE DELAYED RELEASE 0	1	
YF-VAX INJECTION 0	1	
<b>Inflammatory Bowel Disease Agents</b>		
<b><i>Aminosalicylates</i></b>		
<i>balsalazide disodium capsule 750mg</i>	1	
CANASA SUPPOSITORY 1000MG	4	
COLAZAL CAPSULE 750MG	4	
DIPENTUM CAPSULE 250MG	4	
LIALDA TABLET DELAYED RELEASE 1.2GM	3	
<i>mesalamine dr tablet delayed release 1.2gm, 800mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine er capsule extended release 24 hour 0.375gm</i>	1	
<i>mesalamine er capsule extended release 500mg</i>	1	
<i>mesalamine enema 4gm</i>	1	
<i>mesalamine kit 4gm</i>	4	
<i>mesalamine suppository 1000mg</i>	1	
ROWASA KIT 4GM	4	
SFROWASA ENEMA 4GM/60ML	4	
<i>sulfasalazine tablet delayed release 500mg</i>	1	
<i>sulfasalazine tablet 500mg</i>	1	
<b>Glucocorticoids</b>		
ANUSOL-HC CREAM 2.5%	3	
<i>budesonide er tablet extended release 24 hour 9mg</i>	4	
<i>budesonide capsule delayed release particles 3mg</i>	1	
CORTIFOAM FOAM 10%	3	
EOHILIA SUSPENSION 2MG/10ML	4	QL (600 ML per 30 days) PA
<i>hydrocortisone cream 1%, 2.5%</i>	1	
<i>hydrocortisone enema 100mg/60ml</i>	1	
<i>procto-med hc cream 2.5%</i>	1	
PROCTOSOL HC CREAM 2.5%	1	
PROCTOZONE-HC CREAM 2.5%	1	
TARPEYO CAPSULE DELAYED RELEASE 4MG	4	QL (120 EA per 30 days) PA
UCERIS TABLET EXTENDED RELEASE 24 HOUR 9MG	4	
<b>Metabolic Bone Disease Agents</b>		
<b>Metabolic Bone Disease Agents</b>		
ACTONEL TABLET 150MG	3	QL (1 EA per 28 days)
ACTONEL TABLET 35MG	3	QL (4 EA per 28 days)
<i>alendronate sodium solution 70mg/75ml</i>	1	
<i>alendronate sodium tablet 10mg, 35mg, 5mg</i>	1	
<i>alendronate sodium tablet 70mg</i>	1	QL (4 EA per 28 days)
AELVIA TABLET DELAYED RELEASE 35MG	3	QL (4 EA per 28 days)
BINOSTO TABLET EFFERVESCENT 70MG	3	QL (4 EA per 28 days)
BONSITY INJECTION 560MCG/2.24ML	4	PA
<i>calcitonin salmon injection 200unit/ml</i>	4	
<i>calcitonin-salmon solution 200unit/act</i>	1	QL (3.7 ML per 30 days)
<i>calcitriol capsule 0.25mcg, 0.5mcg</i>	1	
<i>cinacalcet hydrochloride tablet 30mg, 60mg, 90mg</i>	1	
<i>doxercalciferol capsule 0.5mcg, 1mcg, 2.5mcg</i>	1	
EVENITY INJECTION 105MG/1.17ML	4	QL (2.34 ML per 28 days) PA
FORTEO INJECTION 560MCG/2.24ML	4	PA
FOSAMAX PLUS D TABLET 70MG; 2800UNIT, 70MG; 5600UNIT	3	QL (4 EA per 28 days)
FOSAMAX TABLET 70MG	3	QL (4 EA per 28 days)
<i>ibandronate sodium tablet 150mg</i>	1	QL (1 EA per 28 days)
JUBBONTI INJECTION 60MG/ML	3	QL (2 ML per 365 days)
MIACALCIN INJECTION 200UNIT/ML	4	
OSENVELT INJECTION 120MG/1.7ML	4	PA
<i>paricalcitol capsule 1mcg, 2mcg, 4mcg</i>	1	
PROLIA INJECTION 60MG/ML	3	QL (2 ML per 365 days)
RAYALDEE CAPSULE EXTENDED RELEASE 30MCG	4	
<i>risedronate sodium dr tablet delayed release 35mg</i>	1	QL (4 EA per 28 days)
<i>risedronate sodium tablet 30mg, 5mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>risedronate sodium tablet 150mg</i>	1	QL (1 EA per 28 days)
<i>risedronate sodium tablet 35mg</i>	1	QL (4 EA per 28 days)
SENSIPAR TABLET 30MG	3	
SENSIPAR TABLET 60MG, 90MG	4	
STOBOCLO INJECTION 60MG/ML	3	QL (2 ML per 365 days)
TERIPARATIDE INJECTION 560MCG/2.24ML	4	PA
TYMLOS INJECTION 3120MCG/1.56ML	4	PA
WYOST INJECTION 120MG/1.7ML	4	PA
XGEVA INJECTION 120MG/1.7ML	4	PA
ZEMPLAR INJECTION 5MCG/ML	4	
<i>zoledronic acid injection 4mg/100ml, 4mg/5ml</i>	1	
<b>Miscellaneous Therapeutic Agents</b>		
<b><i>Miscellaneous Therapeutic Agents</i></b>		
ALCOHOL PREP PADS PAD 70%	2	
AMMONUL INJECTION 10%; 10%	4	
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16" MISCELLANEOUS	2	QL (200 EA per 30 days)
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2" MISCELLANEOUS	2	QL (200 EA per 30 days)
BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM MISCELLANEOUS	2	QL (200 EA per 30 days)
BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM MISCELLANEOUS	2	QL (200 EA per 30 days)
BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM MISCELLANEOUS	2	QL (200 EA per 30 days)
CLINOLIPID INJECTION 1.2GM/100ML; 2.25GM/100ML; 16GM/100ML; 4GM/100ML	3	B/D
COSELA INJECTION 300MG	4	PA
CURITY GAUZE PADS 2"X2" 12 PLY PAD	2	
<i>deferoxamine mesylate injection 2gm</i>	1	B/D
<i>deferoxamine mesylate injection 500mg</i>	4	B/D
DESFERAL INJECTION 500MG	4	B/D
DUVYZAT SUSPENSION 8.86MG/ML	4	QL (360 ML per 30 days) PA
EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 1/2" MISCELLANEOUS	2	QL (200 EA per 30 days)
EASY COMFORT PEN NEEDLES 29GX4MM MISCELLANEOUS	2	QL (200 EA per 30 days)
EASY TOUCH SAFETY PEN NEEDLES/30G X 1/4" MISCELLANEOUS	2	QL (200 EA per 30 days)
ELLA TABLET 30MG	2	
<i>fomepizole injection 1.5gm/1.5ml</i>	4	
GIVLAARI INJECTION 189MG/ML	4	PA
INTRALIPID INJECTION 20GM/100ML, 30GM/100ML	3	B/D
METHERGINE TABLET 0.2MG	4	QL (56 EA per 365 days)
<i>methylergonovine maleate tablet 0.2mg</i>	4	QL (56 EA per 365 days)
METOPIRONE CAPSULE 250MG	4	
NUTRILIPID INJECTION 20GM/100ML	3	B/D
OMEGAIVEN INJECTION 10GM/100ML, 5GM/50ML	4	B/D
OMNIPOD 5 DEXCOM G7G6 INTRO KIT (GEN 5) KIT	2	QL (1 EA per 365 days)
OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5) MISCELLANEOUS	2	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
OMNIPOD 5 G7 INTRO KIT (GEN 5) KIT	2	QL (1 EA per 365 days)
OMNIPOD 5 G7 PODS (GEN 5) MISCELLANEOUS	2	QL (30 EA per 30 days)
OMNIPOD 5 LIBRE2 PLUS G6 INTRO GEN 5 KIT	2	QL (1 EA per 365 days)
OMNIPOD 5 LIBRE2 PLUS G6 PODS MISCELLANEOUS	2	QL (30 EA per 30 days)
OMNIPOD CLASSIC PDM STARTER KIT (GEN 3) KIT	2	QL (1 EA per 365 days)
OMNIPOD CLASSIC PODS (GEN 3) MISCELLANEOUS	2	QL (30 EA per 30 days)
OMNIPOD DASH INTRO KIT (GEN 4) KIT	2	QL (1 EA per 365 days)
OMNIPOD DASH PDM KIT (GEN 4) KIT	2	QL (1 EA per 365 days)
OMNIPOD DASH PODS (GEN 4) MISCELLANEOUS	2	QL (30 EA per 30 days)
OMNIPOD GO 10 UNITS/DAY KIT	2	QL (10 EA per 30 days)
OMNIPOD GO 15 UNITS/DAY KIT	2	QL (10 EA per 30 days)
OMNIPOD GO 20 UNITS/DAY KIT	2	QL (10 EA per 30 days)
OMNIPOD GO 25 UNITS/DAY KIT	2	QL (10 EA per 30 days)
OMNIPOD GO 30 UNITS/DAY KIT	2	QL (10 EA per 30 days)
OMNIPOD GO 35 UNITS/DAY KIT	2	QL (10 EA per 30 days)
OMNIPOD GO 40 UNITS/DAY KIT	2	QL (10 EA per 30 days)
OXLUMO INJECTION 94.5MG/0.5ML	4	PA
PEDMARK INJECTION 12.5%	4	
RIVFLOZA INJECTION 128MG/0.8ML	4	QL (0.8 ML per 28 days) PA
RIVFLOZA INJECTION 160MG/ML, 80MG/0.5ML	4	QL (1 ML per 28 days) PA
SKYCLARYS CAPSULE 50MG	4	QL (90 EA per 30 days) PA
SMOFLIPID INJECTION 3%; 6%; 5%; 6%	3	B/D
<i>sodium chloride 0.9% solution 0.9%</i>	1	
<i>sodium phenylacetate/sodium benzoate injection 10%; 10%</i>	4	
TACHOSIL PATCH 0; 0	4	
V-GO 20 KIT	2	
V-GO 30 KIT	2	
V-GO 40 KIT	2	
VISTOGARD PACKET 10GM	4	
VYKAT XR TABLET EXTENDED RELEASE 24 HOUR 75MG	4	QL (210 EA per 30 days) PA
VYKAT XR TABLET EXTENDED RELEASE 24 HOUR 25MG	4	QL (390 EA per 30 days) PA
VYKAT XR TABLET EXTENDED RELEASE 24 HOUR 150MG	4	QL (90 EA per 30 days) PA
ZOKINVY CAPSULE 50MG, 75MG	4	QL (120 EA per 30 days) PA
<b>Ophthalmic Agents</b>		
<b><i>Ophthalmic Agents, Other</i></b>		
<i>atropine sulfate solution 1%</i>	1	
<i>bacitracin/polymyxin b ointment 500unit/gm; 10000unit/gm</i>	1	
BEOVU SOLUTION PREFILLED SYRINGE 6MG/0.05ML	4	PA
<i>brimonidine tartrate/timolol maleate solution 0.2%; 0.5%</i>	2	
BYOOVIZ SOLUTION 0.5MG/0.05ML	4	PA
CEQUA SOLUTION 0.09%	3	
CIMERLI SOLUTION 0.3MG/0.05ML	3	PA
CIMERLI SOLUTION 0.5MG/0.05ML	4	PA
COMBIGAN SOLUTION 0.2%; 0.5%	2	
<i>cyclosporine emulsion 0.05%</i>	2	
CYSTADROPS SOLUTION 0.37%	4	QL (20 ML per 28 days)
CYSTARAN SOLUTION 0.44%	4	QL (60 ML per 28 days)
<i>dorzolamide hcl/timolol maleate solution 22.3mg/ml; 6.8mg/ml</i>	1	
<i>dorzolamide hydrochloride/timolol maleate pf solution 2%; 0.5%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
ENSPRYNG INJECTION 120MG/ML	4	PA
EYLEA SOLUTION PREFILLED SYRINGE 2MG/0.05ML	4	PA
EYLEA SOLUTION 2MG/0.05ML	4	PA
IZERVAY SOLUTION 2MG/0.1ML	4	PA
LUCENTIS SOLUTION PREFILLED SYRINGE 0.3MG/0.05ML, 0.5MG/0.05ML	4	PA
NEO-POLYCIN HC OINTMENT 400UNIT/GM; 1%; 3.5MG/GM; 10000UNIT/GM	1	
NEO-POLYCIN OINTMENT 400UNIT/GM; 3.5MG/GM; 10000UNIT/GM	1	
<i>neomycin/polymyxin/bacitracin/hydrocortisone ointment 400unit/gm; 1%; 0.5%; 10000unit/gm</i>	1	
<i>neomycin/polymyxin/bacitracin ointment 400unit/gm; 5mg/gm; 1 10000unit/gm</i>	1	
<i>neomycin/polymyxin/dexamethasone ointment 0.1%; 3.5mg/gm; 10000unit/gm</i>	1	
<i>neomycin/polymyxin/dexamethasone suspension 0.1%; 3.5mg/ml; 10000unit/ml</i>	1	
<i>neomycin/polymyxin/gramicidin solution 0.025mg/ml; 1.75mg/ml; 10000unit/ml</i>	1	
OXERVATE SOLUTION 0.002%	4	QL (56 ML per 28 days) PA
POLYCIN OINTMENT 500UNIT/GM; 10000UNIT/GM	1	
<i>polymyxin b sulfate/trimethoprim sulfate solution 10000unit/ml; 0.1%</i>	1	
RESTASIS MULTIDOSE EMULSION 0.05%	2	
RESTASIS EMULSION 0.05%	2	
ROCKLATAN SOLUTION 0.005%; 0.02%	2	QL (2.5 ML per 25 days)
SIMBRINZA SUSPENSION 0.2%; 1%	2	
<i>sulfacetamide sodium/prednisolone sodium phosphate solution 0.23%; 10%</i>	1	
SUSVIMO SOLUTION 10MG/0.1ML	4	PA
SYFOVRE SOLUTION 15MG/0.1ML	4	PA
TOBRADEX OINTMENT 0.1%; 0.3%	3	
<i>tobramycin/dexamethasone suspension 0.1%; 0.3%</i>	1	
VABYSMO SOLUTION PREFILLED SYRINGE 6MG/0.05ML	4	PA
VABYSMO SOLUTION 6MG/0.05ML	4	PA
VERKAZIA EMULSION 0.1%	4	QL (120 EA per 30 days) PA
VEVYE SOLUTION 0.1%	3	PA
VISUDYNE INJECTION 15MG	4	
XIIDRA SOLUTION 5%	3	QL (60 EA per 30 days)
ZYLET SUSPENSION 0.5%; 0.3%	3	
<b>Ophthalmic Anti-allergy Agents</b>		
<i>azelastine hcl ophthalmic solution 0.05%</i>	1	
<i>bepotastine besilate solution 1.5%</i>	1	
BEPREVE SOLUTION 1.5%	3	
<i>cromolyn sodium solution 4%</i>	1	
<i>epinastine hcl solution 0.05%</i>	1	
<i>olopatadine hydrochloride ophthalmic solution 0.1%, 0.2%</i>	1	
<b>Ophthalmic Anti-Infectives</b>		
<i>bacitracin ointment 500unit/gm</i>	1	
BESIVANCE SUSPENSION 0.6%	3	

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin hydrochloride solution 0.3%</i>	1	
<i>erythromycin ointment 5mg/gm</i>	1	
<i>gatifloxacin solution 0.5%</i>	1	
<i>gentamicin sulfate ophthalmic solution 0.3%</i>	1	
<i>levofloxacin ophthalmic solution 0.5%</i>	1	
<i>moxifloxacin hydrochloride solution 0.5%</i>	1	
NATACYN SUSPENSION 5%	3	
<i>ofloxacin ophthalmic solution 0.3%</i>	1	
<i>sulfacetamide sodium ointment 10%</i>	1	
<i>sulfacetamide sodium solution 10%</i>	1	
<i>tobramycin solution 0.3%</i>	1	
<i>trifluridine solution 1%</i>	1	
XDEMY SOLUTION 0.25%	4	QL (10 ML per 42 days)
ZIRGAN GEL 0.15%	3	
<b>Ophthalmic Anti-inflammatories</b>		
ACUVAIL SOLUTION 0.45%	3	ST
<i>bromfenac sodium solution 0.07%</i>	3	QL (12 ML per 365 days)
<i>bromfenac sodium solution 0.075%</i>	3	ST
BROMSITE SOLUTION 0.075%	3	ST
<i>dexamethasone sodium phosphate solution 0.1%</i>	1	
DEXYCU INJECTION 9%	4	
<i>diclofenac sodium ophthalmic solution 0.1%</i>	1	
<i>difluprednate emulsion 0.05%</i>	1	
FLAREX SUSPENSION 0.1%	2	
<i>fluorometholone suspension 0.1%</i>	1	
<i>flurbiprofen sodium solution 0.03%</i>	1	
FML FORTE SUSPENSION 0.25%	2	
ILEVRO SUSPENSION 0.3%	3	QL (4 ML per 30 days)
ILUVIEN IMPLANT 0.19MG	4	
<i>ketorolac tromethamine solution 0.4%, 0.5%</i>	1	
LOTEMAX SM GEL 0.38%	3	QL (20 GM per 365 days)
LOTEMAX GEL 0.5%	3	QL (20 GM per 365 days)
LOTEMAX OINTMENT 0.5%	3	QL (14 GM per 365 days)
<i>loteprednol etabonate gel 0.5%</i>	1	QL (20 GM per 365 days)
NEVANAC SUSPENSION 0.1%	3	QL (4 ML per 30 days)
PRED MILD SUSPENSION 0.12%	2	
<i>prednisolone acetate suspension 1%</i>	1	
PROLENSA SOLUTION 0.07%	3	QL (12 ML per 365 days)
RETISERT IMPLANT 0.59MG	4	
XIPERE INJECTION 40MG/ML	4	PA
YUTIQ IMPLANT 0.18MG	4	
<b>Ophthalmic Beta-Adrenergic Blocking Agents</b>		
<i>betaxolol hcl solution 0.5%</i>	1	
<i>carteolol hcl solution 1%</i>	1	
<i>levobunolol hcl solution 0.5%</i>	1	
<i>timolol maleate solution 0.25%, 0.5%</i>	1	
<b>Ophthalmic Intraocular Pressure Lowering Agents, Other</b>		
<i>acetazolamide er capsule extended release 12 hour 500mg</i>	1	
<i>acetazolamide tablet 125mg, 250mg</i>	1	
<i>apraclonidine solution 0.5%</i>	1	
<i>brimonidine tartrate solution 0.1%, 0.15%, 0.2%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>brinzolamide suspension 1%</i>	1	
<i>dorzolamide hydrochloride solution 2%</i>	1	
<i>methazolamide tablet 25mg, 50mg</i>	1	
OMLONTI SOLUTION 0.002%	3	QL (2.5 ML per 25 days) ST
<i>pilocarpine hydrochloride solution 1%, 2%, 4%</i>	1	
<i>pilocarpine hydrochloride solution 1.25%</i>	1	QL (7.5 ML per 28 days) PA
QLOSI SOLUTION 0.4%	3	QL (60 EA per 30 days) PA
RHOPRESSA SOLUTION 0.02%	2	QL (2.5 ML per 25 days)
VUITY SOLUTION 1.25%	3	QL (7.5 ML per 28 days) PA
<b>Ophthalmic Prostaglandin and Prostamide Analogs</b>		
<i>bimatoprost solution 0.03%</i>	1	QL (5 ML per 30 days)
DURYSTA INJECTION 10MCG	4	
IDOSE TR INJECTION 75MCG	4	ST
IYUZEH SOLUTION 0.005%	3	ST
<i>latanoprost solution 0.005%</i>	1	
LUMIGAN SOLUTION 0.01%	2	QL (2.5 ML per 25 days)
TRAVATAN Z SOLUTION 0.004%	3	QL (2.5 ML per 25 days)
<i>travoprost solution 0.004%</i>	1	QL (2.5 ML per 25 days)
VYZULTA SOLUTION 0.024%	3	QL (5 ML per 25 days)
XELPROS EMULSION 0.005%	3	QL (2.5 ML per 25 days) ST
<b>Otic Agents</b>		
<b>Otic Agents</b>		
<i>acetic acid solution 2%</i>	1	
<i>ciprofloxacin/dexamethasone suspension 0.3%; 0.1%</i>	1	
<i>ciprofloxacin solution 0.2%</i>	1	
<i>flac oil 0.01%</i>	1	
<i>fluocinolone acetonide ear drops oil 0.01%</i>	1	
<i>fluocinolone acetonide oil 0.01%</i>	1	
<i>neomycin/polymyxin/hc solution 1%; 3.5mg/ml; 10000unit/ml</i>	1	
<i>neomycin/polymyxin/hydrocortisone suspension 1%; 3.5mg/ml; 10000unit/ml</i>	1	
<i>ofloxacin otic solution 0.3%</i>	1	
<b>Respiratory Tract/Pulmonary Agents</b>		
<b>Anti-inflammatories, Inhaled Corticosteroids</b>		
ARMONAIR DIGIHALER AEROSOL POWDER BREATH ACTIVATED 113MCG/ACT, 232MCG/ACT, 55MCG/ACT	3	QL (1 EA per 30 days) ST
ARNUITY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100MCG/ACT, 200MCG/ACT, 50MCG/ACT	2	QL (30 EA per 30 days)
ASMANEX HFA AEROSOL 100MCG/ACT, 200MCG/ACT, 50MCG/ACT	3	QL (13 GM per 30 days)
ASMANEX TWISTHALER 120 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 220MCG/INH	3	QL (1 EA per 30 days)
ASMANEX TWISTHALER 14 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 220MCG/INH	3	QL (1 EA per 30 days)
ASMANEX TWISTHALER 30 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 110MCG/INH, 220MCG/INH	3	QL (1 EA per 30 days)
ASMANEX TWISTHALER 60 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 220MCG/INH	3	QL (1 EA per 30 days)
<i>budesonide suspension 0.25mg/2ml, 0.5mg/2ml, 1mg/2ml</i>	1	QL (120 ML per 30 days) B/D
<i>flunisolide solution 0.025%</i>	1	QL (50 ML per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone propionate suspension 50mcg/act</i>	1	
<i>mometasone furoate suspension 50mcg/act</i>	1	QL (34 GM per 30 days)
PULMICORT FLEXHALER AEROSOL POWDER BREATH ACTIVATED 180MCG/ACT, 90MCG/ACT	3	QL (2 EA per 30 days) ST
PULMICORT SUSPENSION 0.25MG/2ML, 0.5MG/2ML, 1MG/2ML	3	QL (120 ML per 30 days) B/D
QVAR REDHALER AEROSOL BREATH ACTIVATED 40MCG/ACT, 80MCG/ACT	2	QL (21.2 GM per 30 days)
<b>Antihistamines</b>		
<i>azelastine hcl nasal solution 0.15%</i>	1	QL (60 ML per 30 days)
<i>azelastine hydrochloride/fluticasone propionate suspension 137mcg/act; 50mcg/act</i>	3	QL (23 GM per 30 days)
<i>azelastine hydrochloride solution 0.1%, 0.15%</i>	1	QL (60 ML per 30 days)
<i>carbinoxamine maleate solution 4mg/5ml</i>	1	
<i>carbinoxamine maleate tablet 4mg, 6mg</i>	1	
<i>cetirizine hydrochloride solution 5mg/5ml</i>	1	
<i>clemastine fumarate syrup 0.67mg/5ml</i>	1	
<i>clemastine fumarate tablet 2.68mg</i>	1	
<i>cyproheptadine hcl syrup 2mg/5ml</i>	1	
<i>cyproheptadine hydrochloride tablet 4mg</i>	1	
<i>diphenhydramine hcl elixir 12.5mg/5ml</i>	1	
<i>diphenhydramine hydrochloride injection 50mg/ml</i>	1	
DYMISTA SUSPENSION 137MCG/ACT; 50MCG/ACT	3	QL (23 GM per 30 days)
<i>hydroxyzine hcl tablet 50mg</i>	1	
<i>hydroxyzine hydrochloride syrup 10mg/5ml</i>	1	
<i>hydroxyzine hydrochloride tablet 10mg, 25mg</i>	1	
<i>hydroxyzine pamoate capsule 100mg, 25mg, 50mg</i>	1	
<i>levocetirizine dihydrochloride tablet 5mg</i>	1	
<i>olopatadine hcl solution 0.6%</i>	1	QL (30.5 GM per 30 days)
<i>olopatadine hydrochloride nasal solution 0.6%</i>	1	QL (30.5 GM per 30 days)
RYCLORA SOLUTION 2MG/5ML	3	
<b>Antileukotrienes</b>		
<i>montelukast sodium packet 4mg</i>	1	
<i>montelukast sodium tablet chewable 4mg, 5mg</i>	1	
<i>montelukast sodium tablet 10mg</i>	1	
<i>zafirlukast tablet 10mg, 20mg</i>	1	
<i>zileuton er tablet extended release 12 hour 600mg</i>	4	
ZYFLO TABLET 600MG	4	
<b>Bronchodilators, Anticholinergic</b>		
ATROVENT HFA AEROSOL SOLUTION 17MCG/ACT	3	QL (25.8 GM per 30 days)
DUAKLIR PRESSAIR AEROSOL POWDER BREATH ACTIVATED 400MCG/ACT; 12MCG/ACT	3	QL (2 EA per 30 days) ST
INCRUSE ELLIPTA AEROSOL POWDER BREATH ACTIVATED 62.5MCG/INH	2	QL (30 EA per 30 days)
<i>ipratropium bromide nasal solution 0.03%, 0.06%</i>	1	
<i>ipratropium bromide inhalation solution 0.02%</i>	1	QL (312.5 ML per 30 days) B/D
SPIRIVA HANDHALER CAPSULE 18MCG	2	QL (30 EA per 30 days)
SPIRIVA RESPIMAT AEROSOL SOLUTION 2.5MCG/ACT	2	
SPIRIVA RESPIMAT AEROSOL SOLUTION 1.25MCG/ACT	2	QL (8 GM per 30 days)
<i>tiotropium bromide capsule 18mcg</i>	2	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
TUDORZA PRESSAIR AEROSOL POWDER BREATH ACTIVATED 400MCG/ACT	3	QL (1 EA per 30 days) ST
YUPELRI SOLUTION 175MCG/3ML	4	QL (90 ML per 30 days) B/D
<b>Bronchodilators, Sympathomimetic</b>		
<i>albuterol sulfate hfa aerosol solution 108mcg/act</i>	1	QL (13.4 GM per 30 days); (6.7GM Package Size)
<i>albuterol sulfate hfa aerosol solution 108mcg/act</i>	1	QL (17 GM per 30 days); (8.5GM Package Size)
<i>albuterol sulfate hfa aerosol solution 108mcg/act</i>	1	QL (48 GM per 30 days); (18GM Package Size)
<i>albuterol sulfate nebulization solution 2.5mg/0.5ml</i>	1	QL (100 EA per 30 days) B/D
<i>albuterol sulfate nebulization solution 0.63mg/3ml, 1.25mg/3ml</i>	1	QL (375 ML per 30 days) B/D
<i>albuterol sulfate nebulization solution 0.083%</i>	1	QL (525 ML per 30 days) B/D
<i>albuterol sulfate syrup 2mg/5ml</i>	3	
<i>arformoterol tartrate nebulization solution 15mcg/2ml</i>	1	QL (120 ML per 30 days) PA
AUVI-Q INJECTION 0.1MG/0.1ML	3	QL (2 EA per 30 days) ST
AUVI-Q INJECTION 0.15MG/0.15ML, 0.3MG/0.3ML	3	ST
BROVANA NEBULIZATION SOLUTION 15MCG/2ML	4	QL (120 ML per 30 days) PA
<i>epinephrine injection 0.15mg/0.15ml, 0.15mg/0.3ml, 0.3mg/0.3ml</i>	1	
<i>formoterol fumarate nebulization solution 20mcg/2ml</i>	3	QL (120 ML per 30 days) B/D
<i>levalbuterol hcl nebulization solution 1.25mg/3ml</i>	1	QL (270 ML per 30 days) B/D
<i>levalbuterol hcl nebulization solution 0.31mg/3ml</i>	1	QL (540 ML per 30 days) B/D
<i>levalbuterol hydrochloride nebulization solution 1.25mg/3ml</i>	1	QL (270 ML per 30 days) B/D
<i>levalbuterol hydrochloride nebulization solution 0.31mg/3ml, 0.63mg/3ml</i>	1	QL (540 ML per 30 days) B/D
LEVALBUTEROL TARTRATE HFA AEROSOL 45MCG/ACT	1	QL (30 GM per 30 days)
<i>levalbuterol nebulization solution 1.25mg/0.5ml</i>	1	QL (90 EA per 30 days) B/D
PERFOROMIST NEBULIZATION SOLUTION 20MCG/2ML	3	QL (120 ML per 30 days) B/D
PROAIR DIGIHALER AEROSOL POWDER BREATH ACTIVATED 108MCG/ACT	3	QL (2 EA per 30 days)
PROVENTIL HFA AEROSOL SOLUTION 108MCG/ACT	3	QL (13.4 GM per 30 days)
SEREVENT DISKUS AEROSOL POWDER BREATH ACTIVATED 50MCG/DOSE	2	QL (60 EA per 30 days)
STRIVERDI RESPIMAT AEROSOL SOLUTION 2.5MCG/ACT	3	QL (4 GM per 30 days)
<i>terbutaline sulfate injection 1mg/ml</i>	1	
<i>terbutaline sulfate tablet 2.5mg, 5mg</i>	3	
VENTOLIN HFA AEROSOL SOLUTION 108MCG/ACT	3	QL (48 GM per 30 days) ST
XOPENEX HFA AEROSOL 45MCG/ACT	3	QL (30 GM per 30 days)
<b>Cystic Fibrosis Agents</b>		
ALYFTREK TABLET 125MG; 50MG; 10MG	4	QL (56 EA per 28 days) PA
ALYFTREK TABLET 50MG; 20MG; 4MG	4	QL (84 EA per 28 days) PA
BETHKIS NEBULIZATION SOLUTION 300MG/4ML	4	B/D
CAYSTON SOLUTION RECONSTITUTED 75MG	4	PA
KALYDECO PACKET 13.4MG, 25MG, 5.8MG, 50MG, 75MG	4	QL (56 EA per 28 days) PA
KALYDECO TABLET 150MG	4	QL (60 EA per 30 days) PA
KITABIS PAK NEBULIZATION SOLUTION 300MG/5ML	4	B/D
ORKAMBI PACKET 125MG; 100MG, 188MG; 150MG, 94MG; 75MG	4	QL (56 EA per 28 days) PA

Drug Name	Drug Tier	Requirements/Limits
ORKAMBI TABLET 125MG; 100MG, 125MG; 200MG	4	QL (112 EA per 28 days) PA
PULMOZYME SOLUTION 2.5MG/2.5ML	4	PA
SYMDEKO TABLET THERAPY PACK 150MG; 100MG	4	QL (56 EA per 28 days) PA
SYMDEKO TABLET THERAPY PACK 75MG; 50MG	4	QL (60 EA per 30 days) PA
TOBI PODHALER CAPSULE 28MG	4	QL (224 EA per 56 days)
TOBI NEBULIZATION SOLUTION 300MG/5ML	4	B/D
<i>tobramycin nebulization solution 300mg/4ml, 300mg/5ml</i>	4	B/D
TRIKAFTA TABLET THERAPY PACK 100MG; 0; 50MG, 50MG; 0; 25MG	4	QL (84 EA per 28 days) PA
TRIKAFTA THERAPY PACK 100MG; 0; 50MG, 80MG; 0; 40MG	4	QL (56 EA per 28 days) PA
<b>Mast Cell Stabilizers</b>		
<i>cromolyn sodium nebulization solution 20mg/2ml</i>	1	B/D
<b>Phosphodiesterase Inhibitors, Airways Disease</b>		
DALIRESP TABLET 250MCG, 500MCG	3	PA
OHTUVAYRE SUSPENSION 3MG/2.5ML	4	QL (150 ML per 30 days) PA
<i>roflumilast tablet 250mcg, 500mcg</i>	1	PA
<i>theophylline er tablet extended release 12 hour 100mg, 200mg, 300mg, 450mg</i>	1	
<i>theophylline er tablet extended release 24 hour 400mg, 600mg</i>	1	
<b>Pulmonary Antihypertensives</b>		
ADCIRCA TABLET 20MG	4	QL (60 EA per 30 days) PA
ADEMPAS TABLET 0.5MG, 1.5MG, 1MG, 2.5MG, 2MG	4	QL (90 EA per 30 days) PA
<i>alyq tablet 20mg</i>	1	QL (60 EA per 30 days) PA
<i>ambrisentan tablet 10mg, 5mg</i>	4	QL (30 EA per 30 days) PA
<i>bosentan tablet soluble 32mg</i>	4	QL (112 EA per 28 days) PA
<i>bosentan tablet 125mg, 62.5mg</i>	4	QL (60 EA per 30 days) PA
<i>epoprostenol sodium injection 0.5mg, 1.5mg</i>	4	PA
FLOLAN INJECTION 0.5MG, 1.5MG	4	PA
LETAIRIS TABLET 10MG, 5MG	4	QL (30 EA per 30 days) PA
LIQREV SUSPENSION 10MG/ML	4	PA
OPSUMIT TABLET 10MG	4	QL (30 EA per 30 days) PA
ORENITRAM TITRATION KIT MONTH 1 TABLET EXTENDED RELEASE THERAPY PACK 0	4	QL (336 EA per 365 days) PA
ORENITRAM TITRATION KIT MONTH 2 TABLET EXTENDED RELEASE THERAPY PACK 0	4	QL (672 EA per 365 days) PA
ORENITRAM TITRATION KIT MONTH 3 TABLET EXTENDED RELEASE THERAPY PACK 0	4	QL (504 EA per 365 days) PA
ORENITRAM TABLET EXTENDED RELEASE 0.125MG	3	PA
ORENITRAM TABLET EXTENDED RELEASE 0.25MG, 1MG, 2.5MG, 5MG	4	PA
REMODULIN INJECTION 8MG/20ML	3	PA
REMODULIN INJECTION 100MG/20ML, 200MG/20ML, 20MG/20ML, 50MG/20ML	4	PA
REVATIO INJECTION 10MG/12.5ML	4	PA
REVATIO SUSPENSION RECONSTITUTED 10MG/ML	4	PA
REVATIO TABLET 20MG	4	QL (90 EA per 30 days) PA
<i>sildenafil citrate suspension reconstituted 10mg/ml</i>	1	PA
<i>sildenafil citrate tablet 20mg</i>	1	QL (90 EA per 30 days) PA
<i>sildenafil injection 10mg/12.5ml</i>	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>tadalafil tablet 20mg</i>	1	QL (60 EA per 30 days) PA
TADLIQ SUSPENSION 20MG/5ML	4	QL (300 ML per 30 days) PA
TRACLEER TABLET SOLUBLE 32MG	4	QL (112 EA per 28 days) PA
TRACLEER TABLET 125MG, 62.5MG	4	QL (60 EA per 30 days) PA
<i>treprostinil injection 100mg/20ml, 200mg/20ml, 20mg/20ml, 50mg/20ml</i>	4	PA
TYVASO DPI INSTITUTIONAL KIT POWDER 16MCG, 32MCG, 48MCG, 64MCG, 80MCG	4	QL (112 EA per 28 days) PA
TYVASO DPI MAINTENANCE KIT POWDER 16MCG, 32MCG, 48MCG, 64MCG, 80MCG	4	QL (112 EA per 28 days) PA
TYVASO DPI MAINTENANCE KIT POWDER 0	4	QL (224 EA per 28 days) PA
TYVASO DPI TITRATION KIT POWDER 0	4	QL (392 EA per 365 days) PA ; (112 X 16mcg & 84 X 32mcg)
TYVASO DPI TITRATION KIT POWDER 0	4	QL (504 EA per 365 days) PA ; (112 X 16mcg & 112 X 32mcg & 28 X 48mcg)
TYVASO REFILL KIT SOLUTION 0.6MG/ML	4	QL (87 ML per 30 days) PA
TYVASO STARTER KIT SOLUTION 0.6MG/ML	4	QL (87 ML per 30 days) PA
TYVASO SOLUTION 0.6MG/ML	4	QL (87 ML per 30 days) PA
UPTRAVI TITRATION PACK TABLET THERAPY PACK 0	4	QL (400 EA per 365 days) PA
UPTRAVI INJECTION 1800MCG	4	PA
UPTRAVI TABLET 1000MCG, 1200MCG, 1400MCG, 1600MCG, 200MCG, 400MCG, 600MCG, 800MCG	4	QL (60 EA per 30 days) PA
VELETRI INJECTION 0.5MG, 1.5MG	4	PA
VENTAVIS SOLUTION 10MCG/ML, 20MCG/ML	4	QL (270 ML per 30 days) PA
WINREVAIR INJECTION 0, 45MG, 60MG	4	QL (1 EA per 21 days) PA
YUTREPIA CAPSULE 26.5MCG, 53MCG	4	QL (140 EA per 28 days) PA
YUTREPIA CAPSULE 106MCG	4	QL (224 EA per 28 days) PA
YUTREPIA CAPSULE 79.5MCG	4	QL (280 EA per 28 days) PA
<b><i>Pulmonary Fibrosis Agents</i></b>		
ESBRIET CAPSULE 267MG	4	PA
ESBRIET TABLET 267MG, 801MG	4	PA
JASCAYD TABLET 18MG, 9MG	4	QL (60 EA per 30 days) PA
OFEV CAPSULE 100MG, 150MG	4	PA
<i>pirfenidone capsule 267mg</i>	4	PA
<i>pirfenidone tablet 267mg, 534mg, 801mg</i>	4	PA
<b><i>Respiratory Tract Agents, Other</i></b>		
ACETADOTE INJECTION 200MG/ML	4	
<i>acetylcysteine solution 10%, 20%</i>	1	B/D
ADVAIR DISKUS AEROSOL POWDER BREATH ACTIVATED 100MCG/ACT; 50MCG/ACT, 250MCG/ACT; 50MCG/ACT, 500MCG/ACT; 50MCG/ACT	3	QL (60 EA per 30 days)
ADVAIR HFA AEROSOL 115MCG/ACT; 21MCG/ACT, 230MCG/ACT; 21MCG/ACT, 45MCG/ACT; 21MCG/ACT	2	QL (24 GM per 30 days)
AIRDUO DIGIHALER 113/14 AEROSOL POWDER BREATH ACTIVATED 113MCG/ACT; 14MCG/ACT	3	QL (1 EA per 30 days)
AIRDUO DIGIHALER 232/14 AEROSOL POWDER BREATH ACTIVATED 232MCG/ACT; 14MCG/ACT	3	QL (1 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
AIRDUO DIGIHALER 55/14 AEROSOL POWDER BREATH ACTIVATED 55MCG/ACT; 14MCG/ACT	3	QL (1 EA per 30 days)
AIRDUO RESPICLICK 113/14 AEROSOL POWDER BREATH ACTIVATED 113MCG/ACT; 14MCG/ACT	3	QL (1 EA per 30 days)
AIRDUO RESPICLICK 232/14 AEROSOL POWDER BREATH ACTIVATED 232MCG/ACT; 14MCG/ACT	3	QL (1 EA per 30 days)
AIRDUO RESPICLICK 55/14 AEROSOL POWDER BREATH ACTIVATED 55MCG/ACT; 14MCG/ACT	3	QL (1 EA per 30 days)
AIRSUPRA AEROSOL 90MCG/ACT; 80MCG/ACT	2	QL (32.1 GM per 30 days)
ANORO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 62.5MCG/ACT; 25MCG/ACT	2	QL (60 EA per 30 days)
BEVESPI AEROSPHERE AEROSOL 4.8MCG/ACT; 9MCG/ACT	2	QL (10.7 GM per 30 days)
BREO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100MCG/ACT; 25MCG/ACT, 200MCG/INH; 25MCG/INH, 50MCG/INH; 25MCG/INH	2	QL (60 EA per 30 days)
<i>brey-na aerosol 160mcg/act; 4.5mcg/act, 80mcg/act; 4.5mcg/act</i>	3	QL (10.3 GM per 30 days)
BREZTRI AEROSPHERE AEROSOL 160MCG/ACT; 4.8MCG/ACT; 9MCG/ACT	2	QL (23.6 GM per 28 days)
BRINSUPRI TABLET 10MG, 25MG	4	QL (30 EA per 30 days) PA
BRONCHITOL CAPSULE 40MG	4	QL (560 EA per 28 days) PA
<i>budesonide/formoterol fumarate dihydrate aerosol 160mcg/act; 4.5mcg/act, 80mcg/act; 4.5mcg/act</i>	3	QL (10.3 GM per 30 days)
CINQAIR INJECTION 100MG/10ML	4	PA
COMBIVENT RESPIMAT AEROSOL SOLUTION 100MCG/ACT; 20MCG/ACT	2	QL (8 GM per 30 days)
DULERA AEROSOL 5MCG/ACT; 50MCG/ACT	3	QL (13 GM per 30 days) PA
DULERA AEROSOL 5MCG/ACT; 100MCG/ACT, 5MCG/ACT; 200MCG/ACT	3	QL (17.6 GM per 30 days) PA
FASENRA PEN INJECTION 30MG/ML	4	QL (1 ML per 28 days) PA
FASENRA INJECTION 10MG/0.5ML	3	QL (0.5 ML per 28 days) PA
FASENRA INJECTION 30MG/ML	4	QL (1 ML per 28 days) PA
<i>fluticasone propionate/salmeterol diskus aerosol powder breath activated 100mcg/act; 50mcg/act, 250mcg/act; 50mcg/act, 500mcg/act; 50mcg/act</i>	1	QL (60 EA per 30 days)
FLUTICASONE PROPIONATE/SALMETEROL AEROSOL POWDER BREATH ACTIVATED 113MCG/ACT; 14MCG/ACT, 232MCG/ACT; 14MCG/ACT, 55MCG/ACT; 14MCG/ACT	3	QL (1 EA per 30 days)
<i>fluticasone propionate/salmeterol aerosol powder breath activated 500mcg/act; 50mcg/act</i>	1	QL (60 EA per 30 days)
<i>ipratropium bromide/albuterol sulfate solution 2.5mg/3ml; 0.5mg/3ml</i>	1	QL (540 ML per 30 days) B/D
NUCALA INJECTION 40MG/0.4ML	4	QL (0.4 ML per 28 days) PA
NUCALA INJECTION 100MG	4	QL (3 EA per 28 days) PA
NUCALA INJECTION 100MG/ML	4	QL (3 ML per 28 days) PA
<i>promethazine hydrochloride/phenylephrine hydrochloride syrup 5mg/5ml; 6.25mg/5ml</i>	1	
<i>promethazine vc syrup 5mg/5ml; 6.25mg/5ml</i>	1	
<i>ribavirin solution reconstituted 6gm</i>	4	

Drug Name	Drug Tier	Requirements/Limits
STIOLTO RESPIMAT AEROSOL SOLUTION 2.5MCG/ACT; 2.5MCG/ACT	3	QL (24 GM per 30 days) ST
TEZSPIRE INJECTION 210MG/1.91ML	4	QL (1.91 ML per 28 days) PA
TRELEGY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100MCG/ACT; 62.5MCG/ACT; 25MCG/ACT, 200MCG/INH; 62.5MCG/INH; 25MCG/INH	2	QL (60 EA per 30 days)
VIRAZOLE SOLUTION RECONSTITUTED 6GM	4	
<i>wixela inhub aerosol powder breath activated 100mcg/act; 50mcg/act, 250mcg/act; 50mcg/act, 500mcg/act; 50mcg/act</i>	1	QL (60 EA per 30 days)
<b>Skeletal Muscle Relaxants</b>		
<b><i>Skeletal Muscle Relaxants</i></b>		
AMRIX CAPSULE EXTENDED RELEASE 24 HOUR 15MG, 30MG	4	PA
<i>carisoprodol tablet 250mg, 350mg</i>	1	PA
<i>chlorzoxazone tablet 375mg, 500mg, 750mg</i>	1	
<i>chlorzoxazone tablet 250mg</i>	4	
<i>cyclobenzaprine hydrochloride er capsule extended release 24 hour 15mg, 30mg</i>	1	PA
<i>cyclobenzaprine hydrochloride tablet 10mg, 5mg, 7.5mg</i>	1	PA
FEXMID TABLET 7.5MG	3	PA
<i>metaxalone tablet 640mg</i>	4	
<i>methocarbamol injection 1000mg/10ml</i>	1	
<i>methocarbamol tablet 500mg, 750mg</i>	1	
<i>methocarbamol tablet 1000mg</i>	4	
NORGESIC FORTE TABLET 770MG; 60MG; 50MG	4	
NORGESIC TABLET 385MG; 30MG; 25MG	3	
<i>orphenadrine citrate er tablet extended release 12 hour 100mg</i>	1	
<i>orphenadrine/aspirin/caffeine tablet 385mg; 30mg; 25mg</i>	1	
ORPHENGESIC FORTE TABLET 770MG; 60MG; 50MG	4	
ROBAXIN INJECTION 1000MG/10ML	4	
SOMA TABLET 250MG	3	PA
SOMA TABLET 350MG	4	PA
VANADOM TABLET 350MG	4	PA
<b>Sleep Disorder Agents</b>		
<b><i>Sleep Promoting Agents</i></b>		
AMBIEN CR TABLET EXTENDED RELEASE 12.5MG, 6.25MG	3	QL (30 EA per 30 days)
AMBIEN TABLET 10MG, 5MG	3	QL (30 EA per 30 days)
BELSOMRA TABLET 10MG, 15MG, 20MG, 5MG	2	QL (30 EA per 30 days)
DAYVIGO TABLET 10MG, 5MG	3	QL (30 EA per 30 days) PA
<i>doxepin hydrochloride tablet 3mg, 6mg</i>	1	QL (30 EA per 30 days)
EDLUAR TABLET SUBLINGUAL 10MG, 5MG	3	QL (30 EA per 30 days)
<i>estazolam tablet 1mg, 2mg</i>	1	QL (30 EA per 30 days)
<i>eszopiclone tablet 1mg, 2mg, 3mg</i>	1	QL (30 EA per 30 days)
HALCION TABLET 0.25MG	3	QL (60 EA per 30 days)
HETLIOZ LQ SUSPENSION 4MG/ML	4	QL (158 ML per 30 days) PA
HETLIOZ CAPSULE 20MG	4	QL (30 EA per 30 days) PA
LUNESTA TABLET 1MG, 2MG, 3MG	3	QL (30 EA per 30 days)
QUVIVIQ TABLET 25MG, 50MG	3	QL (30 EA per 30 days) PA
<i>ramelteon tablet 8mg</i>	1	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
RESTORIL CAPSULE 15MG, 22.5MG, 30MG, 7.5MG	3	QL (30 EA per 30 days)
ROZEREM TABLET 8MG	3	QL (30 EA per 30 days)
SILENOR TABLET 3MG, 6MG	3	QL (30 EA per 30 days)
<i>tasimelteon capsule 20mg</i>	4	QL (30 EA per 30 days) PA
<i>temazepam capsule 15mg, 22.5mg, 30mg, 7.5mg</i>	1	QL (30 EA per 30 days)
<i>triazolam tablet 0.125mg, 0.25mg</i>	1	QL (60 EA per 30 days)
<i>zaleplon capsule 5mg</i>	1	QL (30 EA per 30 days)
<i>zaleplon capsule 10mg</i>	1	QL (60 EA per 30 days)
<i>zolpidem tartrate er tablet extended release 12.5mg, 6.25mg</i>	1	QL (30 EA per 30 days)
ZOLPIDEM TARTRATE CAPSULE 7.5MG	1	QL (30 EA per 30 days)
<i>zolpidem tartrate tablet sublingual 1.75mg, 3.5mg</i>	1	QL (30 EA per 30 days)
<i>zolpidem tartrate tablet 10mg, 5mg</i>	1	QL (30 EA per 30 days)
<b>Wakefulness Promoting Agents</b>		
<i>armodafinil tablet 150mg, 200mg, 250mg</i>	3	QL (30 EA per 30 days) PA
<i>armodafinil tablet 50mg</i>	3	QL (60 EA per 30 days) PA
LUMRYZ STARTER PACK THERAPY PACK 0	4	QL (56 EA per 365 days) PA
LUMRYZ PACKET 4.5GM, 6GM, 7.5GM, 9GM	4	QL (30 EA per 30 days) PA
<i>modafinil tablet 100mg, 200mg</i>	1	QL (30 EA per 30 days) PA
NUVIGIL TABLET 150MG, 200MG, 250MG	3	QL (30 EA per 30 days) PA
NUVIGIL TABLET 50MG	3	QL (60 EA per 30 days) PA
PROVIGIL TABLET 100MG, 200MG	4	QL (30 EA per 30 days) PA
SODIUM OXYBATE SOLUTION 500MG/ML	4	QL (540 ML per 30 days) PA
SUNOSI TABLET 150MG, 75MG	3	QL (30 EA per 30 days) PA
WAKIX TABLET 17.8MG, 4.45MG	4	QL (60 EA per 30 days) PA
XYREM SOLUTION 500MG/ML	4	QL (540 ML per 30 days) PA
XYWAV SOLUTION 234MG/ML; 96MG/ML; 130MG/ML; 40MG/ML	4	QL (540 ML per 30 days) PA

# INDEX

abacavir .....	48	adapalene/benzoyl peroxide .....	69
abacavir sulfate .....	48	adbry .....	70
abacavir sulfate/lamivudine .....	48	adcetris .....	39
abelcet .....	27	adcirca .....	111
abigale .....	88	adderall .....	65
abigale lo .....	88	adderall xr .....	65
abilify .....	43	adefovir dipivoxil .....	46
abilify asimtufii .....	43	adempas .....	111
abilify maintena .....	43	adlarity .....	23
abilify mycite maintenance kit .....	43	admelog .....	54
abilify mycite starter kit .....	43	admelog solostar .....	53
abiraterone acetate .....	31	adrenalin .....	61
abirtega .....	31	adriamycin .....	33
abraxane .....	33	adstiladrin .....	33
abrysvo .....	101	advair diskus .....	112
absorica .....	69	advair hfa .....	112
absorica ld .....	69	adzynma .....	82
acamprosate calcium dr .....	13	aemcolo .....	14
acarbose .....	51	afinitor .....	35
accutane .....	69	afinitor disperz .....	35
acebutolol hydrochloride .....	59	afirmelle .....	88
acetadote .....	112	afrezza .....	54
acetaminophen/caffeine/dihydrocodeine .....	11	agamree .....	86
acetaminophen/codeine .....	11	aimovig .....	29
acetaminophen/codeine phosphate .....	11	airduo digihaler 113/14 .....	112
acetazolamide .....	107	airduo digihaler 232/14 .....	112
acetazolamide er .....	107	airduo digihaler 55/14 .....	113
acetazolamide sodium .....	61	airduo respiclick 113/14 .....	113
acetic acid .....	108	airduo respiclick 232/14 .....	113
acetic acid 0.25% .....	86	airduo respiclick 55/14 .....	113
acetylcysteine .....	112	airsupra .....	113
aciphex .....	82	ajovy .....	29
acitretin .....	69	akeega .....	33
acthar .....	86	akynzeo .....	26
acthar gel .....	86	albendazole .....	41
acthib .....	101	albuterol sulfate .....	110
actimmune .....	98	albuterol sulfate hfa .....	110
actonel .....	103	alclometasone dipropionate .....	70
acuvail .....	107	alcohol prep pads .....	104
acyclovir .....	50, 73	aldurazyme .....	82
acyclovir sodium .....	50	alecensa .....	35
aczone .....	73	alendronate sodium .....	103
adacel .....	101	alferon n .....	98
adakveo .....	56	alfuzosin hcl er .....	86
adalimumab-aaty 1-pen kit .....	98	alimta .....	32
adalimumab-aaty 2-pen kit .....	98	alinia .....	41
adalimumab-aaty 2-syringe .....	98	aliqopa .....	35
adalimumab-aaty cd/uc/hs starter .....	98	aliskiren .....	61
adalimumab-adbm .....	99	alkindi sprinkle .....	86
adalimumab-adbm crohns/uc/hs starter .....	98	allopurinol .....	28
adalimumab-adbm psoriasis/uveitis starter .....	99	allzital .....	67
adalimumab-adbm starter package for crohns disease/uc/hs .....	99	almotriptan .....	29
adalimumab-adbm starter package for psoriasis/uveitis .....	99	almotriptan malate .....	29
adapalene .....	69	alogliptin .....	51
		alogliptin/metformin hcl .....	51
		alogliptin/metformin hydrochloride .....	51

alogliptin/pioglitazone	52	analpram hc	72
alosetron hydrochloride	79	anaspaz	80
alprazolam	50, 51	anastrozole	35
alprazolam er	50	ancobon	27
alprazolam odt	50	andembry	94
alprazolam xr	50	androgel pump	88
altavera	88	anktiva	33
altoprev	63	annovera	89
alunbrig	35	anoro ellipta	113
alvaiz	56	antivert	26
alyacen 1/35	88	anusol-hc	103
alyacen 7/7/7	89	anzemet	27
alyftrek	110	apadaz	11
alyglo	95	apexicon e	70
alysmsys	39	aphexda	56
alyq	111	aplenzin	23
amabelz	89	apokyn	42
amantadine hcl	50	apomorphine hydrochloride	42
ambien	114	aponvie	27
ambien cr	114	apraclonidine	107
ambisome	27	aprepitant	27
ambrisentan	111	aptensio xr	65
amcinonide	70	aptiom	22
amethia	89	aptivus	49
amethyst	89	aqneursa	67
amikacin sulfate	14	aqvesme	82
amiloride hcl	63	aralast np	82
amiloride/hydrochlorothiazide	61	aranesp albumin free	56
aminocaproic acid	57	arava	99
aminosyn ii	74	arazlo	69
aminosyn-pf	74	arbli	58
aminosyn-pf 7%	74	arcalyst	96
amiodarone hydrochloride	58	arestin	69
amitiza	79	arexvy	101
amitriptyline hcl	26	arformoterol tartrate	110
amitriptyline hydrochloride	26	argatroban	55
amlodipine besylate	59	argatroban/sodium chloride	55
amlodipine besylate/benazepril hydrochloride	61	arikayce	14
amlodipine besylate/valsartan	61	arimidex	35
amlodipine/olmesartan medoxomil	61	aripiprazole	43
ammonium lactate	70	aripiprazole odt	43
ammonul	104	aristada	43
amnesteem	69	aristada initio	43
amondys 45	82	arixtra	55
amoxapine	26	armodafinil	115
amoxicillin	16	armonair digihaler	108
amoxicillin/clavulanate potassium	16	arnuity ellipta	108
amoxicillin/clavulanate potassium er	16	aromasin	35
amphetamine/dextroamphetamine	65	arranon	32
amphotericin b	27	arsenic trioxide	33
amphotericin b liposome	27	artesanate	41
ampicillin	17	arzerra	39
ampicillin sodium	17	asceniv	95
ampicillin/sulbactam	17	ascomp/codeine	11
ampicillin-sulbactam	17	asenapine maleate sl	43
ampyra	68	ashlyna	89
amrix	114	asmanex hfa	108
amvuttra	82	asmanex twisthaler 120 metered doses	108
anafranil	26	asmanex twisthaler 14 metered doses	108
anagrelide hydrochloride	56	asmanex twisthaler 30 metered doses	108

asmanex twisthaler 60 metered doses.....	108	azithromycin.....	17
asparlas.....	33	azmiro.....	88
aspirin/dipyridamole.....	57	aztreonam.....	14
aspirin/dipyridamole er.....	57	azurette.....	89
aspruzyo sprinkle.....	61	bacitracin.....	106
astagraf xl.....	99	bacitracin/polymyxin b.....	105
atazanavir.....	49	baclofen.....	45
atazanavir sulfate.....	49	bafiertam.....	68
atelvia.....	103	balsalazide disodium.....	102
atenolol.....	59	balversa.....	35
atenolol/chlorthalidone.....	61	balziva.....	89
atgam.....	95	banzel.....	22
ativan.....	51	baqsimi one pack.....	53
atomoxetine.....	65	baqsimi two pack.....	53
atomoxetine hydrochloride.....	65	baraclude.....	46
atorvaliq.....	63	barhemsys.....	26
atorvastatin calcium.....	63	basaglar kwikpen.....	54
atovaquone.....	41	basaglar tempo pen.....	54
atovaquone/proguanil hcl.....	41	bavencio.....	39
atovaquone/proguanil hydrochloride.....	41	baxdela.....	18
atralin.....	69	bcg vaccine.....	101
atropine sulfate.....	105	bd insulin syringe safetyglide/1ml/29g x 1/2.....	104
atrovent hfa.....	109	b-d insulin syringe ultrafine ii/0.3ml/31g x 5/16.....	104
aubagio.....	68	bd insulin syringe ultra-fine/0.5ml/30g x 12.7mm.....	104
aubra eq.....	89	bd insulin syringe ultra-fine/1ml/31g x 8mm.....	104
augmentin.....	17	bd pen needle/original/ultra-fine/29g x 12.7mm.....	104
augtyro.....	35	beizray.....	33
auranofin.....	96	belbuca.....	9
aurovela 1.5/30.....	89	beleodaq.....	35
aurovela 1/20.....	89	belladonna/opium.....	80
aurovela 24 fe.....	89	belrapzo.....	30
aurovela fe 1.5/30.....	89	belsomra.....	114
aurovela fe 1/20.....	89	benazepril hydrochloride.....	58
auryxia.....	79	benazepril hydrochloride/hydrochlorothiazide.....	61
austedo.....	67	bendamustine hydrochloride.....	30
austedo xr.....	67	bendeka.....	30
austedo xr patient titration kit.....	67	benlysta.....	96, 99
auvelity.....	23	benzhydrocodone/acetaminophen.....	11
auvi-q.....	110	benznidazole.....	41
avastin.....	39	benzoyl peroxide forte- hc.....	69
aveed.....	88	benzoyl peroxide.....	73
averi.....	89	benzoyl peroxide- hc.....	69
aviane.....	89	benztropine mesylate.....	41
avmapki fakzynja co-pack.....	35	beovu.....	105
avonex.....	68	bepotastine besilate.....	106
avonex pen.....	68	bepreve.....	106
avsola.....	99	berinert.....	94
avycaz.....	16	besivance.....	106
axtle.....	32	besponsa.....	39
ayuna.....	89	besremi.....	98
ayvakit.....	35	betaine anhydrous.....	82
azacitidine.....	33	betamethasone dipropionate.....	70
azasan.....	99	betamethasone dipropionate augmented.....	70
azathioprine.....	99	betamethasone valerate.....	70
azelaic acid.....	69	betapace.....	58
azelastine hcl.....	106, 109	betapace af.....	58
azelastine hydrochloride.....	109	betaseron.....	68
azelastine hydrochloride/fluticasone propionate.....	109	betaxolol hcl.....	59, 107
azelex.....	69	bethanechol chloride.....	86
azilect.....	42	bethkis.....	110

bevespi aerosphere.....	113	buprenorphine.....	9
bexagliflozin.....	52	buprenorphine hcl.....	13
bexarotene.....	40	buprenorphine hcl/naloxone hcl.....	13
bexsero.....	101	buprenorphine hydrochloride/naloxone hydrochloride.....	13
beyfortus.....	95	bupropion hydrochloride.....	23
bicalutamide.....	31	bupropion hydrochloride er (sr).....	14, 23
bicillin l-a.....	17	bupropion hydrochloride er (xl).....	23
biktarvy.....	47	buspirone hcl.....	50
bimatoprost.....	108	buspirone hydrochloride.....	50
bimzelx.....	96	busulfan.....	30
binosto.....	103	busulfex.....	31
bismuth subcitrate pot/metronidazole/tetracycline hydrochlo.....	80	butalbital/acetaminophen.....	67
bisoprolol fumarate.....	59	butalbital/acetaminophen/caffeine/codeine.....	11
bisoprolol fumarate/hydrochlorothiazide.....	61	butalbital/aspirin/caffeine.....	67
bivigam.....	95	butalbital/aspirin/caffeine/codeine.....	11
bizengri.....	39	butorphanol tartrate.....	11
blenrep.....	39	butrans.....	9
bleomycin sulfate.....	33	bylvay.....	80
blincyto.....	39	bylvay (pellets).....	80
blisovi 24 fe.....	89	byooviz.....	105
blisovi fe 1.5/30.....	89	cabenuva.....	47
blisovi fe 1/20.....	89	cabergoline.....	93
blujepa.....	14	cablivi.....	57
bonjesta.....	26	cabometyx.....	35
bonsity.....	103	caffeine citrate.....	67
boostrix.....	101	calcipotriene.....	72
bortezomib.....	33	calcipotriene/betamethasone dipropionate.....	72
boruzu.....	33	calcitonin salmon.....	103
bosentan.....	111	calcitonin-salmon.....	103
bosulif.....	35	calcitrene.....	72
botox.....	45	calcitriol.....	103
braftovi.....	35	calcium acetate.....	79
brekiya.....	29	calquence.....	35
brenzavvy.....	52	cambia.....	8
breo ellipta.....	113	camila.....	92
breyna.....	113	camptosar.....	35
breztri aerosphere.....	113	camrese.....	89
briellyn.....	89	camrese lo.....	89
brimonidine tartrate.....	69, 107	camzyos.....	61
brimonidine tartrate/timolol maleate.....	105	canasa.....	102
brinsupri.....	113	cancidas.....	27
brinzolamide.....	108	candesartan cilexetil.....	58
briumvi.....	68	candesartan cilexetil/hydrochlorothiazide.....	61
briviact.....	19	caplyta.....	43
brixadi.....	13	caprelsa.....	35
bromfenac sodium.....	107	captopril.....	58
bromocriptine mesylate.....	42	captopril/hydrochlorothiazide.....	61
bromsite.....	107	carac.....	72
bronchitol.....	113	carbaglu.....	74
brovana.....	110	carbamazepine.....	22
brukinsa.....	35	carbamazepine er.....	22
bucapsol.....	50	carbidopa.....	42
budesonide.....	103, 108	carbidopa/levodopa.....	42
budesonide er.....	103	carbidopa/levodopa er.....	42
budesonide/formoterol fumarate dihydrate.....	113	carbidopa/levodopa odt.....	42
bumetanide.....	62	carbidopa/levodopa/entacapone.....	41
bupap.....	67	carbinoxamine maleate.....	109
buphenyl.....	82	carboplatin.....	31
buprenex.....	13	carboprost tromethamine.....	88
		cardamyst.....	60

cardizem	60	cholbam	82
cardizem cd	60	cholestyramine light	63
carglumic acid	74	chorionic gonadotropin	87
carisoprodol	114	cialis	86
carmustine	31	cibinqo	96
carteolol hcl	107	ciclodan	73
cartia xt	60	ciclopirox	73
carvedilol	59	ciclopirox nail lacquer	73
carvedilol phosphate er	59	ciclopirox olamine	73
casodex	31	cidofovir	46
caspofungin acetate	27	cilostazol	57
cayston	110	cimduo	48
cefaclor	16	cimerli	105
cefadroxil	16	cimzia	99
cefazolin	16	cimzia starter kit	99
cefazolin sodium	16	cinacalcet hydrochloride	103
cefazolin sodium/dextrose	16	cinqair	113
cefdinir	16	cinryze	94
cefepime	16	ciprofloxacin	108
cefepime hydrochloride	16	ciprofloxacin hcl	18
cefepime/dextrose	16	ciprofloxacin hydrochloride	18, 107
cefixime	16	ciprofloxacin i.v.-in d5w	18
cefotaxime sodium	16	ciprofloxacin/dexamethasone	108
cefotetan	16	cisplatin	31
cefoxitin sodium	16	citalopram hydrobromide	24
cefpodoxime proxetil	16	cladribine	32, 68
cefprozil	16	claravis	70
ceftaroline fosamil	16	clarithromycin	17
ceftazidime	16	clarithromycin er	17
ceftriaxone sodium	16	clemastine fumarate	109
cefuroxime axetil	16	clenpiq	80
cefuroxime sodium	16	cleocin-t	73
celebrex	8	cleviprex	59
celecoxib	8	climara pro	89
cellcept	99	clindacin etz pledgets	14
cellcept intravenous	99	clindagel	73
celontin	20	clindamycin hcl	14
cephalexin	16	clindamycin hydrochloride	14
ceprotin	55	clindamycin palmitate hydrochloride	14
cequa	105	clindamycin phosphate	14, 15, 73
cerdelga	82	clindamycin phosphate/benzoyl peroxide	70
cerezyme	82	clinimix 4.25%/dextrose 10%	74
cetirizine hydrochloride	109	clinimix 4.25%/dextrose 5%	74
chantix	14	clinimix 5%/dextrose 15%	75
chantix continuing month pak	14	clinimix 5%/dextrose 20%	75
chantix starting month pak	14	clinimix 6/5	75
chateal	89	clinimix 8/10	75
chateal eq	89	clinimix 8/14	75
chemet	78	clinimix e 2.75%/dextrose 5%	75
chenodal	80	clinimix e 4.25%/dextrose 10%	75
chlordiazepoxide hcl	51	clinimix e 4.25%/dextrose 5%	76
chlordiazepoxide hydrochloride	51	clinimix e 5%/dextrose 15%	76
chlordiazepoxide hydrochloride/clidinium bromide	80	clinimix e 5%/dextrose 20%	76
chlordiazepoxide/amitriptyline	23	clinimix e 8/10	76
chlorhexidine gluconate	69	clinimix e 8/14	76
chloroquine phosphate	41	clinisol sf 15%	76
chlorpromazine hcl	43	clinolipid	104
chlorpromazine hydrochloride	43	clobazam	20
chlorthalidone	63	clobetasol propionate	70
chlorzoxazone	114	clobetasol propionate e	70

clobex	71	crinone	92
clofarabine	32	cromolyn sodium	83, 106, 111
clolar	32	cryselle	89
clomid	93	cryselle-28	89
clomiphene citrate	93	crysvita	83
clomipramine hcl	26	ctexli	80
clomipramine hydrochloride	26	cubicin rf	15
clonazepam	20	cuprimine	78
clonazepam odt	20	curity gauze pads 2	104
clonidine	57	cutaquig	95
clonidine hydrochloride	57, 67	cuvitru	95
clonidine hydrochloride er	57	cuvposa	80
clopidogrel	57	cuvrior	78
clorazepate dipotassium	51	cyclobenzaprine hydrochloride	114
clotrimazole	27	cyclobenzaprine hydrochloride er	114
clotrimazole/betamethasone dipropionate	72	cyclophosphamide	31
clozapine	45	cyclophosphamide monohydrate	31
clozapine odt	45	cycloserine	30
clozaril	45	cycloset	52
coartem	41	cyclosporine	99, 105
cobenfy	67	cyclosporine modified	99
cobenfy starter pack	67	cymbalta	24
codeine sulfate	11	cyproheptadine hcl	109
colazal	102	cyproheptadine hydrochloride	109
colchicine	28, 29	cyramza	39
colesevelam hydrochloride	63	cystadane	83
colestipol hydrochloride	63	cystadrops	105
colistimethate sodium	15	cystagon	83
columvi	33	cystaran	105
coly-mycin m	15	cytarabine	32
combigan	105	cytarabine aqueous	32
combivent respimat	113	cytogam	95
combivir	48	dabigatran etexilate	55
combogesic	8	dactinomycin	33
cometriq	36	dalbavancin hydrochloride	15
complera	47	dalfampridine er	68
compro	26	daliresp	111
comtan	41	davance	15
concerta	66	danazol	88
conjugated estrogens	89	dantrium iv	45
conjupri	59	dantrolene sodium	45
constulose	79	danyelza	39
conzip	9	danziten	36
copaxone	68	dapagliflozin propanediol	64
copiktra	36	dapsone	30, 73
cordran	71	daptacel	101
corlanor	61	daptomycin	15
cortifoam	103	daptomycin/sodium chloride	15
cortisone acetate	86	daraprim	41
cortrophin	86	darifenacin hydrobromide er	85
cosela	104	darunavir	49
cosentyx	96	darzalex	39
cosentyx sensoready pen	96	darzalex faspro	39
cosentyx unoready	96	dasatinib	36
cotellic	36	dasetta 1/35	89
cotempla xr-odt	66	dasetta 7/7/7	89
coxanto	8	datroway	39
crenesity	82	daunorubicin hydrochloride	33
creon	83	daurismo	36
cresemba	27	dawnzera	94

daybue.....	83	diclofenac epolamine .....	8
daybue stix .....	67	diclofenac potassium.....	8
daysee.....	89	diclofenac sodium .....	8, 72, 107
dayvigo.....	114	diclofenac sodium dr .....	8
ddavp.....	87	diclofenac sodium er .....	8
deblitane .....	92	diclona .....	8
decitabine .....	33	dicloxacillin sodium .....	17
deferasirox.....	78	dicyclomine hcl.....	80
deferiprone .....	78	dicyclomine hydrochloride .....	80
deferoxamine mesylate .....	104	dificid .....	18
defitelio .....	61	diflorasone diacetate .....	71
deflazacort.....	86	diflucan .....	27
delstrigo.....	47	diflunisal.....	8
delyla.....	89	difluprednate .....	107
demeclocycline hcl.....	18	digoxin .....	58
demerol .....	11	dihydroergotamine mesylate .....	29
demser .....	61	dilantin .....	22
denavir.....	73	dilaudid .....	11
dengvaxia .....	101	diltiazem hcl.....	60
depen titratabs .....	78	diltiazem hcl cd .....	60
depo-provera contraceptive.....	92	diltiazem hcl er .....	60
depo-subq provera 104 .....	92	diltiazem hydrochloride.....	60
depo-testosterone .....	88	diltiazem hydrochloride er .....	60
dermacinrx lidocaine .....	13	dilt-xr.....	60
descovy .....	48	dimethyl fumarate .....	68
desferal.....	104	dimethyl fumarate starterpack .....	68
desipramine hydrochloride.....	26	dipentum.....	102
desmopressin acetate .....	87	diphenhydramine hcl.....	109
desogestrel/ethinyl estradiol .....	89	diphenhydramine hydrochloride.....	109
desonide .....	71	diphenoxylate hydrochloride/atropine sulfate .....	79
desoximetasone.....	71	diphenoxylate/atropine .....	79
desoxyn .....	65	disopyramide phosphate .....	58
desvenlafaxine er .....	24	disulfiram .....	13
detrol .....	85	divalproex sodium dr .....	21
detrol la.....	85	divalproex sodium er .....	21
dexamethasone .....	86	divigel .....	89
dexamethasone sodium phosphate .....	107	dobutamine hcl .....	61
dexedrine.....	65	dobutamine hcl/d5w .....	61
dexilant.....	82	dobutamine hydrochloride/dextrose 5%.....	61
dexlansoprazole.....	82	docetaxel .....	33
dexmethylphenidate hcl.....	66	dofetilide .....	58
dexmethylphenidate hydrochloride .....	66	dojolvi .....	83
dexmethylphenidate hydrochloride er .....	66	dolishale .....	89
dextrazoxane .....	40	dolobid .....	8
dextrazoxane hydrochloride .....	40	donepezil hcl.....	23
dextroamphetamine sulfate .....	65	donepezil hydrochloride .....	23
dextroamphetamine sulfate er .....	65	donepezil hydrochloride odt.....	23
dextrose 10%.....	76	dopamine hydrochloride .....	61
dextrose 5%.....	76	dopamine hydrochloride/dextrose.....	61
dextrose 5%/sodium chloride 0.45%.....	76	dopamine/d5w .....	61
dextrose 5%/sodium chloride 0.9%.....	76	doptelet.....	57
dexycu .....	107	doptelet sprinkle .....	57
dhivy.....	42	doryx mpc.....	18
diacomit .....	20	dorzolamide hcl/timolol maleate .....	105
diazepam .....	21, 51	dorzolamide hydrochloride .....	108
diazepam intensol .....	51	dorzolamide hydrochloride/timolol maleate pf .....	105
diazoxide .....	53	dotti .....	89
dibenzylamine.....	58	dovato.....	47
dichlorphenamide.....	83	doxazosin mesylate.....	86
diclegis .....	26	doxepin hcl .....	26

doxepin hydrochloride	26, 71, 114	eliquis	55
doxercalciferol	103	eliquis starter pack	55
doxil	33	elitek	40
doxorubicin hcl	33	ella	104
doxorubicin hydrochloride	33	ellence	33
doxorubicin hydrochloride liposomal	33	elmiron	86
doxy 100	18	elrefxio	33
doxycycline	18	eltrombopag olamine	56
doxycycline hyclate	18, 69	eluryng	89
doxycycline monohydrate	18	elyxyb	8
doxylamine succinate/pyridoxine hydrochloride	26	elzonris	33
drizalma sprinkle	24	emblaveo	15
dronabinol	27	emcyt	32
droxia	32	emend	27
droxidopa	57	emend bipack	27
duaklir pressair	109	emend tripack	27
duexis	8	emflaza	86
dulera	113	emgality	29
duloxetine hydrochloride dr	24, 25	empaveli	96
duobrii	72	empliciti	39
duopa	42	emrelis	39
dupixent	96	emrosi	30
duraclon	67	emsam	24
duramorph	11	emtricitabine	48
durysta	108	emtricitabine/rilpivirine/tenofovir disoproxil fumarate	48
dutasteride	86	emtricitabine/tenofovir disoproxil	48
dutasteride/tamsulosin hydrochloride	86	emtricitabine/tenofovir disoproxil fumarate	48
duvyzat	104	emtriva	48
dyanavel xr	65	emverm	41
dymista	109	emzahh	92
dysport	45	enalapril maleate	58
easy comfort insulin syringe/0.3ml/31g x 1/2	104	enalapril maleate/hydrochlorothiazide	61
easy comfort pen needles 29gx4mm	104	enbrel	99
easy touch safety pen needles/30g x 1/4	104	enbrel mini	99
ec-naproxen	8	enbrel sureclick	99
econazole nitrate	27	enbumyst	62
edaravone	67	endari	83
edarbi	58	endocet	11
edarbyclor	61	endometrin	92
edecrin	62	enflonsia	96
edetate calcium disodium	80	engerix-b	101
edluar	114	enhertu	39
edurant	47	enilloring	89
edurant ped	47	enjaymo	96
efavirenz	48	enoxaparin sodium	55
efavirenz/emtricitabine/tenofovir disoproxil fumarate	47	enpresse-28	89
efavirenz/lamivudine/tenofovir disoproxil fumarate	48	ensacove	36
effer-k	76	enspryng	106
efudex	72	enstilar	72
egrifta sv	87	entacapone	41
egrifta wr	87	entadfi	86
ekterly	94	entecavir	46
elahere	39	entresto	61
elaprase	83	entyvio	96
elelyso	83	entyvio pen	96
elepsia xr	19	enulose	79
eletriptan hydrobromide	29	envarsus xr	99
elfabrio	83	eohilia	103
eligard	93	epaned	58
elinest	89	epclusa	46

epidiolex .....	19	evrysdi .....	83
epinastine hcl .....	106	exemestane .....	35
epinephrine .....	61, 110	exenatide .....	52
epitol .....	22	exjade .....	78
epivir .....	48	exkivity .....	36
epkinly .....	33	exondys 51 .....	83
eplerenone .....	64	exservan .....	67
epogen .....	56	extavia .....	68
epoprostenol sodium .....	111	exxua .....	23
eprontia .....	19	exxua titration pack .....	23
epsolay .....	73	eylea .....	106
eptifibatide .....	57	ezallor sprinkle .....	63
epzicom .....	48	ezetimibe .....	63
eraxis .....	27	ezetimibe/simvastatin .....	63
erbitux .....	39	fabhalta .....	56
ergoloid mesylates .....	23	fabior .....	70
ergomar .....	29	fabrazyme .....	83
ergotamine tartrate/caffeine .....	29	falmina .....	90
eribulin mesylate .....	33	famciclovir .....	50
erivedge .....	36	famotidine .....	81
erleada .....	31	fanapt .....	43
erlotinib hydrochloride .....	36	fanapt titration pack a .....	43
errin .....	92	fanapt titration pack b .....	43
ertaczo .....	27	fanapt titration pack c .....	43
ertapenem sodium .....	17	fareston .....	32
ery .....	73	farxiga .....	64
eryped 400 .....	18	fasenra .....	113
erythromycin .....	73, 107	fasenra pen .....	113
erythromycin dr .....	18	faslodex .....	32
erythromycin ethylsuccinate .....	18	febuxostat .....	29
erythromycin/benzoyl peroxide .....	70	feirza 1.5/30 .....	90
esbriet .....	112	feirza 1/20 .....	90
escitalopram oxalate .....	25	felbamate .....	19
eslicarbazepine acetate .....	22	felbatol .....	19
esomeprazole magnesium .....	82	felodipine er .....	59
estarylla .....	89	femlyv .....	90
estazolam .....	114	femring .....	90
estradiol .....	89, 90	fenofibrate .....	63
estradiol/norethindrone acetate .....	89	fenofibrate micronized .....	63
estring .....	90	fenofibric acid dr .....	63
eszopiclone .....	114	fenoglide .....	63
ethacrynate sodium .....	62	fensolvi .....	87
ethacrynic acid .....	62	fentanyl .....	9
ethambutol hydrochloride .....	30	fentanyl citrate .....	11
ethosuximide .....	20	fentanyl citrate oral transmucosal .....	11
ethynodiol diacetate/ethinyl estradiol .....	90	fentora .....	11
ethylol .....	33	ferric citrate .....	79
etodolac .....	8	ferriprox .....	78
etonogestrel/ethinyl estradiol .....	90	ferriprox twice-a-day .....	78
etopophos .....	35	fesoterodine fumarate er .....	85
etoposide .....	35	fetroja .....	16
etravirine .....	48	fetzima .....	25
eucrisa .....	71	fetzima titration pack .....	25
eulexin .....	31	fexmid .....	114
euthyrox .....	93	fiasp .....	54
evenity .....	103	fiasp flextouch .....	54
everolimus .....	36, 99	fiasp penfill .....	54
evkeeza .....	61	fidaxomicin .....	18
evomela .....	31	filspari .....	61
evotaz .....	49	filsuvez .....	72

finacea.....	70	foscarnet sodium.....	46
finasteride.....	86	foscavir.....	46
finngolimod hydrochloride.....	68	fosfomycin tromethamine.....	15
fintepla.....	19	fosinopril sodium.....	58
fioricet/codeine.....	11	fosinopril sodium/hydrochlorothiazide.....	61
firazyr.....	94	fosrenol.....	79
firdapse.....	67	fotivda.....	36
firmagon.....	93	fragmin.....	55
flac.....	108	frindovyx.....	31
flarex.....	107	frova.....	29
flavoxate hcl.....	85	frovatriptan succinate.....	29
flebogamma dif.....	95	fruzaqla.....	36
flecainide acetate.....	58	fulphila.....	56
flector.....	8	fulvestrant.....	32
fleqsuvy.....	45	fulvicin p/g 165.....	27
flolan.....	111	furoscix.....	62
flolipid.....	63	furosemide.....	62
floxuridine.....	32	fuzeon.....	49
fluconazole.....	27	fyarro.....	36
fluconazole in sodium chloride.....	27	fyavolv.....	90
flucytosine.....	27	fycompa.....	19
fludarabine phosphate.....	36	fylnetra.....	56
fludrocortisone acetate.....	86	gabapentin.....	21
flunisolide.....	108	gabarone.....	21
fluocinolone acetonide.....	71, 108	gablofen.....	45
fluocinolone acetonide body.....	71	galafold.....	83
fluocinolone acetonide ear drops.....	108	galantamine hydrobromide.....	23
fluocinolone acetonide scalp.....	71	galantamine hydrobromide er.....	23
fluocinolone acetonide topical.....	71	galbriela.....	90
fluocinonide.....	71	gallifrey.....	92
fluocinonide emulsified base.....	71	gamastan.....	95
fluorometholone.....	107	gamifant.....	96
fluorouracil.....	32, 72	gammagard liquid.....	95
fluoxetine dr.....	25	gammagard liquid erc.....	95
fluoxetine hydrochloride.....	25	gammagard s/d iga less than 1mcg/ml.....	95
fluphenazine decanoate.....	43	gammaked.....	95
fluphenazine hcl.....	43	gammaplex.....	95
fluphenazine hydrochloride.....	43	gamunex-c.....	95
flurbiprofen.....	8	ganciclovir.....	46
flurbiprofen sodium.....	107	gardasil 9.....	101
fluticasone propionate.....	71, 109	gastrocrom.....	83
fluticasone propionate/salmeterol.....	113	gatifloxacin.....	107
fluticasone propionate/salmeterol diskus.....	113	gattex.....	80
fluvastatin.....	63	gavilyte-c.....	81
fluvastatin sodium er.....	63	gavilyte-g.....	81
fluvoxamine maleate.....	25	gavilyte-n/ flavor pack.....	81
fluvoxamine maleate er.....	25	gavreto.....	36
fml forte.....	107	gazyva.....	39
focalin.....	66	gefitinib.....	36
focalin xr.....	66	gelnique.....	85
foloty.....	32	gemcitabine hydrochloride.....	32
fomepizole.....	104	gemfibrozil.....	63
fondaparinux sodium.....	55	gemtesa.....	85
formoterol fumarate.....	110	generlac.....	79
forte.....	103	engraf.....	99
fortesta.....	88	genotropin.....	87
forzinity.....	83	genotropin miniquick.....	87
fosamax.....	103	gentamicin sulfate.....	14, 107
fosamax plus d.....	103	gentamicin sulfate pediatric.....	14
fosamprenavir calcium.....	49	genvoya.....	47

geodon	43	heparin sodium	55
gilenya	68	heparin sodium/dextrose	55
gilotrif	36	heplisav-b	101
gimoti	81	herceptin	39
givlaari	104	herceptin hylecta	39
glassia	83	hercessi	39
glatiramer acetate	68	hernexeos	36
glatopa	68	herzuma	39
gleevec	36	hetlioz	114
gleostine	31	hetlioz lq	114
glimepiride	52	hiberix	101
glipizide	52	hizentra	95
glipizide er	52	humalog	54
glipizide xl	52	humalog junior kwikpen	54
glipizide/metformin hydrochloride	52	humalog kwikpen	54
gloperba	29	humalog mix 50/50	54
glucagen hypokit	53	humalog mix 50/50 kwikpen	54
glucagon emergency kit	53	humalog mix 75/25	54
glucagon emergency kit for low blood sugar	53	humalog mix 75/25 kwikpen	54
glumetza	52	humatin	14
glyburide	52	humatrope	87
glyburide/metformin hydrochloride	52	humira	100
glycate	80	humira pediatric crohns disease starter pack	99
glycerol phenylbutyrate	83	humira pen	100
glycopyrrolate	80	humira pen-cd/uc/hs starter	100
glydo	13	humira pen-pediatric uc starter pack	100
glyxambi	52	humira pen-ps/uv starter	100
gocovri	41	humulin 70/30	54
gomekli	36	humulin 70/30 kwikpen	54
grafapex	31	humulin n	54
granisetron hydrochloride	27	humulin n kwikpen	54
granix	56	humulin r	54
griseofulvin microsize	27	humulin r u-500 (concentrated)	54
griseofulvin ultramicronsize	27, 28	humulin r u-500 kwikpen	54
guanfacine hydrochloride	57, 66	hycantin	35
guanfacine hydrochloride er	66	hydralazine hydrochloride	64
gvoke hypopen 1-pack	53	hydrochlorothiazide	63
gvoke hypopen 2-pack	53	hydrocodone bitartrate er	9
gvoke kit	53	hydrocodone bitartrate/acetaminophen	11
gvoke pfs	53	hydrocodone/acetaminophen	11
haegarda	95	hydrocodone/ibuprofen	11
hailey 1.5/30	90	hydrocortisone	71, 86, 103
hailey 24 fe	90	hydrocortisone acetate/pramoxine hydrochloride	72
halaven	33	hydrocortisone butyrate	71
halcinonide	71	hydrocortisone butyrate (lipid)	71
halcion	114	hydrocortisone butyrate (lipophilic)	71
halobetasol propionate	71	hydrocortisone valerate	71
haloette	90	hydromorphone hcl	12
haloperidol	43	hydromorphone hcl er	9
haloperidol decanoate	43	hydromorphone hydrochloride	12
haloperidol lactate	43	hydromorphone hydrochloride er	9
harliiku	83	hydroxychloroquine sulfate	41
harvoni	46, 47	hydroxyurea	32
havrix	101	hydroxyzine hcl	109
heather	92	hydroxyzine hydrochloride	109
helidac therapy	81	hydroxyzine pamoate	109
hemabate	88	hyftor	71
hemangeol	59	hyoscyamine sulfate	80
hemiclor	63	hyoscyamine sulfate er	80
hepagam b	95	hyoscyamine sulfate odt	80

hyoscyamine sulfate sr.....	80	inflectra.....	100
hyperhep b.....	95	infliximab.....	100
hyqvia.....	95	infumorph 200.....	10
hynuo.....	36	infumorph 500.....	10
hysingla er.....	10	ingrezza.....	67
ibandronate sodium.....	103	inlexzo.....	32
ibrance.....	33, 36	inluriyo.....	32
ibsrela.....	79	inlyta.....	36
ibtrozi.....	36	innopran xl.....	59
ibu.....	8	inpefa.....	64
ibuprofen.....	8	inqovi.....	36
ibuprofen lysine.....	8	inrebic.....	33
ibuprofen/famotidine.....	8	insulin aspart.....	54
icatibant acetate.....	95	insulin aspart flexpen.....	54
iclevia.....	90	insulin aspart penfill.....	54
iclusig.....	36	insulin lispro.....	54
icosapent ethyl.....	63	intelcome.....	48
idamycin pfs.....	33	intralipid.....	104
idarubicin hcl.....	33	intrarosa.....	86
idarubicin hydrochloride.....	33	introvale.....	90
idhifa.....	36	invega.....	44
idose tr.....	108	invega hafyera.....	44
ifosfamide.....	31	invega sustenna.....	44
igalmi.....	51	invega trinza.....	44
ilaris.....	96	invokamet.....	52
ilevro.....	107	invokamet xr.....	52
ilumya.....	96	invokana.....	64
iluvien.....	107	inzirqo.....	63
imatinib mesylate.....	36	ipol inactivated ipv.....	101
imbruvica.....	36	ipratropium bromide.....	109
imdelltra.....	33	ipratropium bromide/albuterol sulfate.....	113
imfinzi.....	39	iqirvo.....	81
imipenem/cilastatin.....	17	irbesartan.....	58
imipramine hcl.....	26	irbesartan/hydrochlorothiazide.....	61
imipramine hydrochloride.....	26	iressa.....	36
imipramine pamoate.....	26	irinotecan.....	35
imiquimod.....	72	irinotecan hydrochloride.....	35
imiquimod pump.....	72	isentress.....	47
imitrex.....	29	isentress hd.....	47
imitrex statdose refill.....	29	isoniazid.....	30
imitrex statdose system.....	29	isordil titradose.....	64
imjudo.....	39	isosorbide dinitrate.....	64
imkeldi.....	36	isosorbide dinitrate/hydralazine hydrochloride.....	62
imovax rabies (h.d.c.v.).....	101	isosorbide mononitrate.....	64
impavido.....	15	isosorbide mononitrate er.....	64
impoyz.....	71	isotretinoin.....	70
imuran.....	100	isradipine.....	59
imvexxy maintenance pack.....	90	istodax.....	33
imvexxy starter pack.....	90	isturisa.....	87
inbrija.....	42	itovebi.....	34
incassia.....	92	itraconazole.....	28
increlex.....	87	ivabradine hydrochloride.....	62
incruse ellipta.....	109	ivermectin.....	41, 73
indapamide.....	63	ivra.....	31
inderal la.....	59	iwilfin.....	34
inderal xl.....	59	ixempra kit.....	34
indocin.....	8	ixiaro.....	101
indomethacin.....	8	iyuzeh.....	108
indomethacin er.....	8	izervay.....	106
infanrix.....	101	jadenu.....	78

jadenu sprinkle.....	78	kevzara.....	96
jaimiess.....	90	keytruda.....	39
jakafi.....	36	keytruda qlx.....	39
jantoven.....	55	khapzory.....	40
janumet.....	52	khindivi.....	87
janumet xr.....	52	kimmtrak.....	34
januvia.....	52	kimyrsa.....	15
jardiance.....	64	kineret.....	96
jascayd.....	112	kinrix.....	102
jatenzo.....	88	kionex.....	79
javadin.....	57	kirsty.....	54
javygtor.....	83	kisqali.....	36
jaypirca.....	36	kisqali femara 200 dose.....	34
jaythari.....	87	kisqali femara 400 dose.....	34
jemperli.....	39	kisqali femara 600 dose.....	34
jencycla.....	92	kitabisi pak.....	110
jentadueto.....	52	klayesta.....	28
jentadueto xr.....	52	klisyri.....	72
jevtana.....	34	klonopin.....	21
jinteli.....	90	klor-con 10.....	77
jobevne.....	39	klor-con 8.....	77
joenja.....	83	klor-con m10.....	77
jolessa.....	90	klor-con m15.....	77
journalvx.....	8	klor-con m20.....	77
joyeaux.....	90	klor-con/ef.....	77
jubbonti.....	103	kloxxado.....	14
jublia.....	28	komzifti.....	34
juluca.....	47	konvomep.....	82
junel 1.5/30.....	90	korlym.....	93
junel 1/20.....	90	korsuva.....	71
junel fe 1.5/30.....	90	koselugo.....	36
junel fe 1/20.....	90	kourzeq.....	69
junel fe 24.....	90	krazati.....	36
juxtapid.....	63	krystexxa.....	29
jylamvo.....	100	kurvelo.....	90
jynarque.....	78	kuvan.....	83
jynneos.....	101	kymbee.....	87
kabiven.....	77	kyprolis.....	35
kadcyla.....	39	kyxata.....	31
kalbitor.....	95	kyzatrex.....	88
kaletra.....	49	labetalol hydrochloride.....	59
kalliga.....	90	lacosamide.....	22
kalydeco.....	110	lactulose.....	79
kanjinti.....	39	lamictal.....	19
kanuma.....	83	lamictal chewable dispersible.....	19
kariva.....	90	lamictal odt.....	19
kelnor 1/35.....	90	lamictal starter/taking carbamazepine/not taking valproate.....	19
kelnor 1/50.....	90	lamictal xr.....	19
kenalog.....	71	lamivudine.....	46, 48
kengreal.....	57	lamivudine/zidovudine.....	48
kepivance.....	69	lamotrigine.....	19
keppra.....	19	lamotrigine er.....	19
keppra xr.....	19	lamotrigine odt.....	19
kerendia.....	64	lamotrigine starter kit/blue.....	19
kerydin.....	28	lamotrigine starter kit/green.....	19
kesimpta.....	68	lamotrigine starter kit/orange.....	19
ketoconazole.....	28	lamotrigine titration.....	19
ketoprofen.....	8	lamzedo.....	83
ketorolac tromethamine.....	8, 107	lanreotide acetate.....	93
keveyis.....	83		

lansoprazole .....	82	l-glutamine .....	83
lanthanum carbonate .....	79	lialda .....	102
lantus .....	54	libervant .....	21
lantus solostar .....	54	librax .....	80
lapatinib ditosylate .....	36	libtayo .....	39
larin 1.5/30 .....	90	licart .....	8
larin 1/20 .....	90	lidocaine .....	13
larin 24 fe .....	90	lidocaine hcl .....	13, 58, 69
larin fe 1.5/30 .....	90	lidocaine hcl jelly .....	13
larin fe 1/20 .....	90	lidocaine hydrochloride .....	13, 69
lasix onyu .....	62	lidocaine hydrochloride jelly .....	13
latanoprost .....	108	lidocaine hydrochloride viscous .....	69
latuda .....	44	lidocaine viscous .....	69
lazcluze .....	34	lidocaine/prilocaine .....	13
ledipasvir/sofosbuvir .....	47	lidocan .....	13
leflunomide .....	100	lidoderm .....	13
lemtrada .....	96	lidotral .....	13
lenalidomide .....	32	likmez .....	15
lenvima 10 mg daily dose .....	36	liletta .....	92
lenvima 12mg daily dose .....	37	lincomycin hydrochloride .....	15
lenvima 14 mg daily dose .....	37	linezolid .....	15
lenvima 18 mg daily dose .....	37	linzess .....	79
lenvima 20 mg daily dose .....	37	liomny .....	93
lenvima 24 mg daily dose .....	37	lioressal intrathecal .....	45, 46
lenvima 4 mg daily dose .....	37	liothyronine sodium .....	93
lenvima 8 mg daily dose .....	37	liqrev .....	111
leqembi iqlik .....	23	lisinopril .....	58
leqvio .....	63	lisinopril/hydrochlorothiazide .....	62
lessina .....	90	litfulo .....	96
letairis .....	111	lithium .....	51
letrozole .....	35	lithium carbonate .....	51
leucovorin calcium .....	34	lithium carbonate er .....	51
leukeran .....	31	lithobid .....	51
leukine .....	56	lithostat .....	86
leuprolide acetate .....	93	livalo .....	63
levalbuterol .....	110	livdelzi .....	81
levalbuterol hcl .....	110	livmarli .....	81
levalbuterol hydrochloride .....	110	livtency .....	46
levalbuterol tartrate hfa .....	110	locoid .....	71
levamlodipine .....	59	locoid lipocream .....	71
levbid .....	80	lodine .....	8
levetiracetam .....	19, 20	lodoco .....	62
levetiracetam er .....	19	lodosyn .....	42
levetiracetam/sodium chloride .....	19	lofena .....	8
levobunolol hcl .....	107	lofexidine hydrochloride .....	13
levocetirizine dihydrochloride .....	109	lojaimiess .....	91
levofloxacin .....	18, 107	lokelma .....	79
levofloxacin in d5w .....	18	lomotil .....	79
levoleucovorin .....	34	lomustine .....	31
levonest .....	90	lonsurf .....	34
levonorgestrel and ethinyl estradiol .....	90	loperamide hydrochloride .....	80
levonorgestrel/ethinyl estradiol .....	90	lopinavir/ritonavir .....	49
levora 0.15/30-28 .....	90	lopressor .....	59
levorphanol tartrate .....	10	loqtorzi .....	39
levo-t .....	93	lorazepam .....	51
levothyroxine sodium .....	93	lorazepam intensol .....	51
levoxyil .....	93	lorbrena .....	37
levsin .....	80	loreev xr .....	51
lexette .....	71	losartan potassium .....	58
lexiva .....	49	losartan potassium/hydrochlorothiazide .....	62

lotemax.....	107	mavenclad.....	68
lotemax sm.....	107	mavyret.....	47
loteprednol etabonate.....	107	maxalt.....	29
lotronex.....	80	maxalt-mlt.....	29
lovastatin.....	63	mayzent.....	68
lovaza.....	64	mayzent starter pack.....	68
lovenox.....	56	mb caps.....	85
low-ogestrel.....	91	me/naphos/mb/hyo 1.....	85
loxapine.....	43	meclizine hcl.....	26
loxapine succinate.....	43	meclizine hydrochloride.....	26
lo-zumandimine.....	91	medroxyprogesterone acetate.....	92
lubiprostone.....	79	mefloquine hydrochloride.....	41
lucemyra.....	13	megestrol acetate.....	92
lucentis.....	106	mekinist.....	37
luizza 1.5/30.....	91	mektovi.....	37
luizza 1/20.....	91	meleya.....	92
lumakras.....	37	meloxicam.....	8
lumigan.....	108	memantine hcl titration pak.....	23
lumizyme.....	83	memantine hydrochloride.....	23
lumryz.....	115	memantine hydrochloride er.....	23
lumryz starter pack.....	115	memantine/donepezil hydrochloride er.....	23
lunesta.....	114	menactra.....	102
lunsumio.....	39	menest.....	91
lunsumio velo.....	39	menquadfi.....	102
lupkynis.....	100	menveo.....	102
lupron depot (1-month).....	93	meperidine hcl.....	12
lupron depot (3-month).....	93	meperidine hydrochloride.....	12
lupron depot (4-month).....	93	mepron.....	41
lupron depot (6-month).....	93	mepsevii.....	83
lupron depot-ped (1-month).....	94	mercaptopurine.....	32
lupron depot-ped (3-month).....	94	meropenem.....	17
lupron depot-ped (6-month).....	87	meropenem/sodium chloride.....	17
lurasidone hydrochloride.....	44	mesalamine.....	103
lurbipr.....	8	mesalamine dr.....	102
luteru.....	91	mesalamine er.....	103
lybalvi.....	44	mesna.....	40
lydexa.....	13	mesnex.....	40
lyleq.....	92	mestinon.....	30
lyllana.....	91	mestinon timespan.....	30
lymphir.....	34	metadate cd.....	66
lynkuet.....	67	metaxalone.....	114
lynozyfic.....	34	metformin hydrochloride.....	52
lynparza.....	37	metformin hydrochloride er.....	52
lyrica.....	21	methadone hcl.....	10
lysodren.....	34	methadone hydrochloride.....	10
lytgobi.....	37	methadone hydrochloride intensol.....	10
lyumjev.....	54	methadose.....	10
lyumjev kwikpen.....	54	methadose sugar-free.....	10
lyvispah.....	46	methamphetamine hydrochloride.....	65
lyza.....	92	methazolamide.....	108
mafenide acetate.....	73	methenamine hippurate.....	15
magnesium sulfate.....	77	methergine.....	104
malathion.....	73	methimazole.....	94
maraviroc.....	49	methitest.....	88
margenza.....	39	methocarbamol.....	114
marinol.....	27	methotrexate.....	100
marlissa.....	91	methotrexate sodium.....	100
marplan.....	24	methoxsalen.....	72
matulane.....	31	methscopolamine bromide.....	80
matzim la.....	60	methsuximide.....	20

methylidopa	57	modeyso	34
methylergonovine maleate	104	moexipril hydrochloride	58
methylphenidate hydrochloride	66	molindone hydrochloride	43
methylphenidate hydrochloride er	66	mometasone furoate	71, 109
methylphenidate hydrochloride er (cd)	66	monjuvi	39
methylphenidate hydrochloride er (la)	66	mono-lynyah	91
methylphenidate hydrochloride er (osm)	66	montelukast sodium	109
methylphenidate hydrochloride er (xr)	66	morphine sulfate	12
methylprednisolone	87	morphine sulfate er	10
methylprednisolone dose pack	87	morphine sulfate/sodium chloride	12
methylprednisolone sodium succinate	87	motegrity	79
methyltestosterone	88	motofen	80
metoclopramide hcl	81	mounjaro	52
metoclopramide hydrochloride	81	moxifloxacin hydrochloride/sodium hydrochloride	18
metoclopramide odt	81	moxifloxacin hydrochloride	18, 107
metolazone	63	mozobil	56
metopirone	104	mresvia	102
metoprolol succinate er	59	ms contin	10
metoprolol tartrate	59	mulpleta	56
metronidazole	15, 70	multaq	58
metronidazole vaginal	15	mupirocin	73
metyrosine	62	mutamycin	34
mexiletine hydrochloride	58	mvasi	39
miacalcin	103	myalept	81
mibelas 24 fe	91	mycamine	28
micafungin	28	mycapssa	94
micafungin sodium/sodium chloride	28	mycobutin	30
micafungin/sodium chloride	28	mycophenolate mofetil	100
microgestin 1.5/30	91	mycophenolic acid dr	100
microgestin 1/20	91	myfembree	94
microgestin fe 1.5/30	91	myfortic	100
microgestin fe 1/20	91	myhibbin	100
midazolam hcl	51	mylotarg	39
midazolam hydrochloride	20	myobloc	46
midodrine hydrochloride	57	myqorzo	62, 64
mifepristone	94	myrbetriq	85
migergot	29	mysoline	21
miglitol	52	mytesi	80
miglustat	83	nabi-hb	95
migranal	29	nabumetone	8
mili	91	nadolol	59
milophene	93	nafcillin	17
milrinone lactate	62	nafcillin sodium	17
milrinone lactate in dextrose	62	naglazyme	83
mimvey	91	nalbuphine hydrochloride	12
minocin	18	nalocet	12
minocycline hcl	18	naloxone hcl	14
minocycline hydrochloride	18	naloxone hydrochloride	14
minoxidil	64	naltrexone hydrochloride	13
minzoya	91	namenda xr	23
miplyffa	83	namzaric	23
mirtazapine	24	naprelan	8, 9
mirtazapine odt	24	naprosyn	9
mirvaso	70	naproxen	9
misoprostol	81	naproxen dr	9
mitigo	10	naproxen sodium	9
mitomycin	34	naproxen sodium cr	9
mitoxantrone hcl	68	naproxen sodium er	9
m-m-r ii	102	naproxen/esomeprazole magnesium	9
modafinil	115	naratriptan hcl	29

natacyn	107	nitrofurantoin macrocrystals	15
nateglinide	52	nitrofurantoin monohydrate	15
natesto	88	nitrofurantoin monohydrate/macrocrystals	15
nayzilam	20	nitroglycerin	64, 81
nebivolol hydrochloride	59	nitroglycerin transdermal	64
nebupent	41	nityr	83
necon 0.5/35-28	91	nivestym	56
nefazodone hydrochloride	25	nizatidine	81
neffy	62	nora-be	92
nelarabine	32	norditropin flexpro	87
nemlivio	96	norelgestromin/ethinyl estradiol	91
neomycin sulfate	14	norethindrone	92
neomycin/polymyxin/bacitracin	106	norethindrone acetate	92
neomycin/polymyxin/bacitracin/hydrocortisone	106	norethindrone acetate/ethinyl estradiol	91
neomycin/polymyxin/dexamethasone	106	norethindrone acetate/ethinyl estradiol/ferrous fumarate	91
neomycin/polymyxin/gramicidin	106	norgesic	114
neomycin/polymyxin/hc	108	norgesic forte	114
neomycin/polymyxin/hydrocortisone	108	norgestimate/ethinyl estradiol	91
neo-polycin	106	noritate	70
neo-polycin hc	106	norliqva	60
neoprofen	9	norlyroc	93
neoral	100	norpace cr	58
neo-synalar	72	norpramin	26
nerlynx	37	northera	58
neulasta	56	nortrel 0.5/35 (28)	91
neulasta onpro kit	56	nortrel 1/35	91
neupogen	56	nortrel 7/7/7	91
neupro	42	nortriptyline hcl	26
neurontin	21	nortriptyline hydrochloride	26
nevanac	107	norvir	49
nevirapine	48	nourianz	41
nevirapine er	48	novarel	87
nexavar	37	novolin 70/30	54
nexiclon xr	57	novolin 70/30 flexpen	54
nexium	82	novolin 70/30 flexpen relion	54
nexletol	64	novolin 70/30 relion	54
nexlizet	64	novolin n	54
nexplanon	92	novolin n flexpen	54
nexterone	58	novolin n flexpen relion	54
nexvazyme	83	novolin n relion	54
ngenla	87	novolin r	54
niacin er	64	novolin r flexpen	54
nicardipine hcl	59	novolin r flexpen relion	54
nicardipine hydrochloride/sodium chloride	60	novolin r relion	54
nicotrol inhaler	14	novolog	55
nicotrol ns	14	novolog flexpen	55
nifedipine er	60	novolog flexpen relion	55
niktimvo	100	novolog mix 70/30	55
nilandron	31	novolog mix 70/30 prefilled flexpen	55
nilotinib	37	novolog mix 70/30 prefilled flexpen relion	55
nilotinib hydrochloride	37	novolog mix 70/30 relion	55
nilutamide	31	novolog penfill	55
nimodipine	60	novolog relion	55
ninlaro	37	noxafil	28
nipent	32	nplate	56
nitazoxanide	41	nubeqa	31
nitisinone	83	nucala	113
nitro-bid	64	nucynta	12
nitro-dur	64	nucynta er	10
nitrofurantoin	15		

nuedexta.....	67	omnipod dash pods (gen 4).....	105
nulev.....	80	omnipod go 10 units/day.....	105
nulibry.....	83	omnipod go 15 units/day.....	105
nulojix.....	100	omnipod go 20 units/day.....	105
nuplazid.....	44	omnipod go 25 units/day.....	105
nutrilipid.....	104	omnipod go 30 units/day.....	105
nutropin aq nuspin 10.....	87	omnipod go 35 units/day.....	105
nutropin aq nuspin 20.....	87	omnipod go 40 units/day.....	105
nutropin aq nuspin 5.....	87	omnitrope.....	87
nuvigil.....	115	omvoh.....	96
nuzyra.....	18	oncaspar.....	34
nyamyc.....	28	ondansetron hcl.....	27
nylia 1/35.....	91	ondansetron hydrochloride.....	27
nylia 7/7/7.....	91	ondansetron odt.....	27
nymalize.....	60	onfi.....	21
nypozi.....	56	ongentys.....	41
nystatin.....	28	onivyde.....	35
nystatin/triamcinolone.....	72	onpattro.....	83
nystatin/triamcinolone acetonide.....	72	ontruzant.....	39
nystop.....	28	onureg.....	34
nyvepria.....	56	onyda xr.....	66
ocaliva.....	81	onzetra xsail.....	29
ocrevus.....	68	opdivo.....	40
ocrevus zunovo.....	68	opdivo qvantig.....	31
octagam.....	95	opdualag.....	35
octreotide acetate.....	94	opfolda.....	83
odactra.....	96	opipza.....	44
odefsey.....	48	opsumit.....	111
odomzo.....	37	opvee.....	14
ofev.....	112	opzelura.....	71
ofloxacin.....	18, 107, 108	oralone dental paste.....	69
ogivri.....	39	oravig.....	28
ogsiveo.....	34	orbactiv.....	15
ohtuvayre.....	111	orencia.....	96, 100
ojemda.....	34	orencia clickject.....	96
ojjaara.....	37	orenitram.....	111
olanzapine.....	44	orenitram titration kit month 1.....	111
olanzapine odt.....	44	orenitram titration kit month 2.....	111
olanzapine/fluoxetine.....	24	orenitram titration kit month 3.....	111
olmesartan medoxomil.....	58	orfadin.....	83, 84
olmesartan medoxomil/hydrochlorothiazide.....	62	orgovyx.....	94
olopatadine hcl.....	109	oriahnn.....	94
olopatadine hydrochloride.....	106, 109	orilissa.....	94
olpruva.....	83	orkambi.....	110, 111
omega-3-acid ethyl esters.....	64	orladeyo.....	95
omegaven.....	104	orlynvah.....	15
omeprazole.....	82	ormalvi.....	84
omeprazole dr.....	82	orphenadrine citrate er.....	114
omeprazole/sodium bicarbonate.....	82	orphenadrine/aspirin/caffeine.....	114
omlonti.....	108	orphengesic forte.....	114
omnipod 5 dexcom g7g6 intro kit (gen 5).....	104	orquidea.....	93
omnipod 5 dexcom g7g6 pods (gen 5).....	104	orserdu.....	32
omnipod 5 g7 intro kit (gen 5).....	105	oscimin.....	80
omnipod 5 g7 pods (gen 5).....	105	oseltamivir phosphate.....	50
omnipod 5 libre2 plus g6 intro gen 5.....	105	osenvelt.....	103
omnipod 5 libre2 plus g6 pods.....	105	osmolex er.....	42
omnipod classic pdm starter kit (gen 3).....	105	osphena.....	93
omnipod classic pods (gen 3).....	105	otezla.....	72, 96
omnipod dash intro kit (gen 4).....	105	otezla xr.....	72
omnipod dash pdm kit (gen 4).....	105	otezla/otezla xr 28 day treatment initiation pack.....	72

otrexup .....	100	parnate .....	24
oxacillin sodium.....	17	paroxetine.....	25
oxaliplatin.....	31	paroxetine hcl .....	25
oxaprozin .....	9	paroxetine hcl er .....	25
oxaydo.....	12	paroxetine hydrochloride .....	25
oxazepam .....	51	paxil.....	25
oxcarbazepine .....	22	paxil cr .....	25
oxcarbazepine er .....	22	paxlovid .....	50
oxervate.....	106	pazopanib hydrochloride .....	37
oxiconazole nitrate .....	28	pediarix.....	102
oxistat.....	28	pedmark.....	105
oxlumo.....	105	pedvax hib .....	102
oxtellar xr.....	22	peg-3350/electrolytes.....	81
oxybutynin chloride .....	85	peg-3350/nacl/na bicarbonate/kcl.....	81
oxybutynin chloride er .....	85	pegasys .....	98, 100
oxycodone and acetaminophen.....	12	pemazyre.....	37
oxycodone hcl.....	12	pemetrexed.....	32, 34
oxycodone hcl er.....	10	pemetrexed disodium.....	32
oxycodone hydrochloride .....	12	pemfexy .....	33
oxycodone hydrochloride er .....	10	pemrydi rtu.....	33
oxycodone hydrochloride/acetaminophen.....	12	penbraya.....	102
oxycodone/acetaminophen.....	12	penciclovir.....	74
oxycontin .....	10	penicillamine .....	78
oxymorphone hydrochloride .....	12	penicillin g sodium.....	17
oxymorphone hydrochloride er .....	10	penicillin v potassium .....	17
oxymorphone hydrochlorideer .....	10	penmenvy .....	102
oxytrol.....	85	pennsaid .....	9
ozempic .....	52	pentacel.....	102
ozobax.....	46	pentamidine isethionate .....	41
ozobax ds .....	46	pentazocine/naloxone hcl.....	12
pacerone.....	58	pentoxifylline er .....	62
paclitaxel protein-bound particles .....	34	pepcid.....	81
padcev.....	40	perampanel.....	20
palforzia initial dose escalation .....	97	percocet.....	12
palforzia initial dose escalation 1-3 years.....	96	perforomist.....	110
palforzia initial dose escalation 4-17 years.....	97	perikabiven .....	77
palforzia level 0 .....	97	perindopril erbumine .....	58
palforzia level 1 .....	97	periogard .....	69
palforzia level 10.....	97	perjeta .....	40
palforzia level 11 (maintenance).....	97	permethrin .....	73
palforzia level 11 (titration).....	97	perphenazine .....	43
palforzia level 2.....	97	perphenazine/amitriptyline.....	24
palforzia level 3.....	97	perseris.....	44
palforzia level 4.....	97	pertzye.....	84
palforzia level 5.....	97	pheburane .....	84
palforzia level 6.....	97	phenelzine sulfate .....	24
palforzia level 7.....	97	phenobarbital .....	21
palforzia level 8.....	97	phenobarbital sodium.....	21
palforzia level 9.....	97	phenoxybenzamine hydrochloride .....	58
paliperidone er .....	44	phenylephrine hydrochloride .....	58
palonosetron hydrochloride .....	27	phenytek.....	22
palsonify .....	94	phenytoin .....	22
palynziq .....	84	phenytoin infatabs.....	22
pamelor .....	26	phenytoin sodium extended.....	22
pancreaze.....	84	phesgo.....	34
pandel.....	71	philith .....	91
panretin .....	40	photofrin.....	34
pantoprazole sodium.....	82	phyrago .....	37
panzyga.....	95	piasky .....	97
paricalcitol.....	103	pifeltro.....	48

pilocarpine hydrochloride	69, 108	premasol	77
pimecrolimus	71	premium lidocaine	13
pimtreea	91	prephase	91
pindolol	59	prempo	91
pioglitazone hcl	52	prenatal	79
pioglitazone hcl/metformin hcl	52	prevacid	82
pioglitazone hydrochloride	53	prevalite	64
piperacillin sodium/tazobactam sodium	17	prevymis	46
piperacillin sodium/tazobactam sodium/nacl	17	prezcobix	49
piqray 200mg daily dose	37	prezista	49
piqray 250mg daily dose	37	prialt	67
piqray 300mg daily dose	37	priftin	30
pirfenidone	112	primaquine phosphate	41
piroxicam	9	primidone	21
pitavastatin calcium	63	priorix	102
pivya	17	pristiq	25
plaquenil	41	privigen	96
plegridy	68	proair digihaler	110
plegridy starter pack	68	probenecid	29
plenamine	77	probenecid/colchicine	29
plerixafor	56	prochlorperazine	26
pliaglis	13	prochlorperazine edisylate	26
podofilox	73	prochlorperazine maleate	26
pokonza	77	procrit	56
polivy	40	procto-med hc	103
polycin	106	proctosol hc	103
polymyxin b sulfate/trimethoprim sulfate	106	proctozone-hc	103
pomalyst	32	procysbi	84
pombiliti	84	progesterone	93
ponvory	68	prograf	100
ponvory 14-day starter pack	68	prolastin-c	84
portia-28	91	prolate	12
portrazza	40	prolensa	107
posaconazole	28	proleukin	34
posaconazole dr	28	prolia	103
potassium chloride	77	promacta	56
potassium chloride er	77	promethazine hcl	26
potassium chloride sr	77	promethazine hydrochloride	26
potassium citrate er	77	promethazine hydrochloride/phenylephrine hydrochloride	113
poteligeo	40	promethazine vc	113
pralatrexate	33	promethegan	26
praluent	64	propafenone hcl	58
pramipexole dihydrochloride	42	propafenone hydrochloride	58
pramipexole dihydrochloride er	42	propafenone hydrochloride er	58
pramosone	73	propranolol hcl	59
prasugrel hydrochloride	57	propranolol hydrochloride	59
pravastatin sodium	63	propranolol hydrochloride er	59
praziquantel	41	propylthiouracil	94
prazosin hydrochloride	58	proquad	102
pred mild	107	prosol	78
prednisolone	87	protonix	82
prednisolone acetate	107	protriptyline hcl	26
prednisolone sodium phosphate	87	provenge	97
prednisone	87	proventil hfa	110
prednisone dr	87	provigil	115
pregabalin	21	prozac	25
pregnyl	87	prucalopride	79
pregnyl w/diluent benzyl alcohol/nacl	87	prudoxin	71
prehevbrio	102	pulmicort	109
premarin	91		

pulmicort flexhaler.....	109	relenza diskhaler.....	50
pulmozyme.....	111	releuko.....	57
purixan.....	33	relexxii.....	66
pylera.....	81	relistor.....	79
pyquvi.....	87	relpax.....	29
pyrazinamide.....	30	reitone.....	81
pyridostigmine bromide.....	30	relyvrio.....	67
pyridostigmine bromide er.....	30	remicade.....	101
pyrimethamine.....	41	remodulin.....	111
pyrukynd.....	84	renagel.....	79
pyrukynd taper pack.....	84	renflexis.....	101
qalsody.....	67	renvela.....	79
qbrelis.....	58	repaglinide.....	53
qdolo.....	13	repatha.....	64
qinlock.....	37	repatha pushtonex system.....	64
qlosi.....	108	repatha sureclick.....	64
qtern.....	53	restasis.....	106
quadracel.....	102	restasis multidose.....	106
qualaquin.....	41	restoril.....	115
qudexy xr.....	20	retacrit.....	57
quetiapine fumarate.....	44	retevmo.....	37
quetiapine fumarate er.....	44	retin-a.....	70
quinapril hydrochloride.....	58	retin-a micro.....	70
quinapril/hydrochlorothiazide.....	62	retin-a micro pump.....	70
quinidine sulfate.....	59	retisert.....	107
quinine sulfate.....	41	retrovir.....	48
qulipta.....	29	retrovir iv infusion.....	48
qutenza.....	13	revatio.....	111
quviviq.....	114	revcovi.....	84
qvar redihaler.....	109	revlimid.....	32
rabavert.....	102	revonto.....	46
rabeprazole sodium.....	82	revuforj.....	34
rabeprazole sodium dr sprinkle.....	82	rexulti.....	44
radiaura.....	73	reyataz.....	49
radicava.....	67	reyvow.....	29
radicava ors.....	67	rezdiffra.....	93
radicava ors starter kit.....	67	rezlidhia.....	37
raldesy.....	25	rezurock.....	101
raloxifene hydrochloride.....	93	rezzayo.....	28
ramelteon.....	114	rhapsido.....	97
ramipril.....	58	rhopressa.....	108
ranolazine er.....	62	riabni.....	40
rapamune.....	100	ribavirin.....	47, 113
rapivab.....	50	ridaura.....	97
rasagiline mesylate.....	42	rifabutin.....	30
rasuvo.....	101	rifadin.....	30
ravicti.....	84	rifampin.....	30
rayaldee.....	103	rilutek.....	67
rayos.....	87	riluzole.....	67
rebif.....	69	rimantadine hydrochloride.....	50
rebif rebidose.....	68, 69	rinvog.....	97
rebif rebidose titration pack.....	68	rinvog lq.....	97
rebif titration pack.....	69	risedronate sodium.....	103, 104
reblozyl.....	57	risedronate sodium dr.....	103
recarbrio.....	17	risperdal.....	44
recombivax hb.....	102	risperdal consta.....	44
recorlev.....	94	risperidone.....	44
redemplo.....	64	risperidone er.....	44
regranex.....	73	risperidone odt.....	44
relafen ds.....	9	ritalin.....	66

ritalin la	66	saphnelo	97
ritonavir	49	saphris	44
rituxan	40	sapropterin dihydrochloride	84
rituxan hycela	40	sarclisa	40
rivaroxaban	56	savella	68
rivastigmine tartrate	23	savella titration pack	68
rivastigmine transdermal system	23	saxagliptin hydrochloride	53
rivelsa	91	saxagliptin hydrochloride/metformin hydrochloride er	53
rivfloza	105	scemblix	38
rizatriptan benzoate	29	scopolamine	26
rizatriptan benzoate odt	29	sdamlo	60
robaxin	114	secuado	44
robinul	80	seglentis	13
robinul forte	80	segluromet	53
rocklatan	106	selegiline hcl	42
roflumilast	111	selenium sulfide	71
rolvedon	57	selzentry	49
romidepsin	34	sensipar	104
romvimza	37	sephience	84
ropinirole er	42	serevent diskus	110
ropinirole hcl	42	sernivo	72
ropinirole hydrochloride	42	seroquel	44, 45
rosuvastatin calcium	63	seroquel xr	44, 45
rosuvastatin/ezetimibe	64	serostim	88
rosyrah	91	sertraline hcl	25
roszet	64	sertraline hydrochloride	25
rotarix	102	setlakin	91
rotateq	102	sevelamer carbonate	79
rowasa	103	sevelamer hydrochloride	79
roweepra	20	seysara	18
roxicodone	13	sfrowasa	103
rozerem	115	sharobel	93
rozlytrek	37	shingrix	102
rubraca	37	signifor	94
ruconest	95	signifor lar	94
rufinamide	22	siklos	33
rukobia	49	sildenafil	111
ruxience	40	sildenafil citrate	111
rybelsus	53	silenor	115
rybrevant	40	siliq	97
rybrevant faspro	40	silodosin	86
ryclora	109	silver sulfadiazine	73
rydapt	37	simbrinza	106
rylaze	34	simliya	91
rystiggo	97	simpesse	91
rytary	42	simponi	101
rytelo	34	simponi aria	101
rythmol sr	59	simulect	97
ryzneuta	57	simvastatin	63
sabril	21	sirolimus	101
sacubitril/valsartan	62	sirturo	30
saizen	87	sitagliptin	53
saizenprep reconstitutionkit	88	sitavig	50
sajazir	95	sivextro	15
samsca	78	skyclarys	105
sancuso	27	skyla	93
sandimmune	101	skyrizi	97
sandostatin	94	skyrizi pen	97
sandostatin lar depot	94	skytrofa	88
santyl	73	smoflipid	105

soanz	62	stiolto respimat	114
sodium bicarbonate	78	stivarga	38
sodium bicarbonate/dextrose	78	stoboclo	104
sodium chloride	78	strattera	67
sodium chloride 0.45%	78	strensiq	84
sodium chloride 0.9%	105	streptomycin sulfate	14
sodium edecrin	63	stribild	47
sodium oxybate	115	striverdi respimat	110
sodium phenylacetate/sodium benzoate	105	stromectol	41
sodium phenylbutyrate	84	sublocade	13
sodium polystyrene sulfonate	79	suboxone	14
sodium sulfate/potassium sulfate/magnesium sulfate	81	subvenite	20
sofdra	73	subvenite starter kit/blue	20
sofosbuvir/velpatasvir	47	subvenite starter kit/green	20
sogroya	88	subvenite starter kit/orange	20
sohonos	46	sucraid	84
solifenacin succinate	85	sucrafate	81, 82
soliqua 100/33	53	sulconazole nitrate	28
soliris	97	sulfacetamide sodium	107
soltamox	32	sulfacetamide sodium/prednisolone sodium phosphate	106
soma	114	sulfadiazine	18
somatuline depot	94	sulfamethoxazole/trimethoprim	18
somavert	94	sulfamethoxazole/trimethoprim ds	18
soolantra	73	sulfasalazine	103
sorafenib	38	sulfatrim pediatric	18
sorafenib tosylate	38	sulindac	9
sorilux	73	sumatriptan	30
sotalol hcl	59	sumatriptan succinate	29, 30
sotalol hcl (af)	59	sumatriptan succinate refill	29
sotalol hydrochloride	59	sumatriptan/naproxen sodium	30
sotalol hydrochloride (af)	59	sunitinib malate	38
sotalol hydrochloride af	59	sunlenca	49
sovaldi	47	sunosi	115
sovuna	41	supprelin la	94
spevigo	72	suprep bowel prep kit	81
spinraza	84	sustol	27
spiriva handihaler	109	susvimo	106
spiriva respimat	109	sutab	81
spironolactone	64	sutent	38
spironolactone/hydrochlorothiazide	62	syfovre	106
sporanox	28	sylvant	98
spravato 56mg dose	24	symbravo	30
spravato 84mg dose	24	symbyax	24
sprintec 28	91	symdeko	111
spritam	20	symfi	48
sprix	9	symfi lo	48
sprycel	38	symlinpen 120	53
sps	79	symlinpen 60	53
sronyx	91	sympazan	21
ssd	73	symproic	79
stalevo 100	42	symtuza	49
stalevo 125	42	synagis	96
stalevo 150	42	synarel	94
stalevo 200	42	syndros	27
stamaril	102	synjardy	53
steglatro	64	synjardy xr	53
steglujan	53	synthroid	93
stelara	97	syprine	78
steqeyma	97, 98	tabloid	33
stimufend	57		

tabrecta .....	38	teriflunomide .....	69
tachosil .....	105	teriparatide .....	104
taclonex .....	73	testim .....	88
tacrolimus .....	72, 101	testosterone .....	88
tadalafil .....	86, 112	testosterone cypionate .....	88
tadliq .....	112	testosterone enanthate .....	88
tafinlar .....	38	testosterone pump .....	88
tagrisso .....	38	testosterone topical solution .....	88
takhzyro .....	95	tetanus/diphtheria toxoids-adsorbed adult .....	102
taltz .....	98	tetrabenazine .....	67
talvey .....	34	tetracycline hydrochloride .....	18
talzenna .....	38	tevimbra .....	40
tamiflu .....	50	tezruly .....	86
tamoxifen citrate .....	32	tezspire .....	114
tamsulosin hydrochloride .....	86	thalomid .....	32
tarceva .....	38	theophylline er .....	111
targretin .....	40	thiola .....	86
tarina 24 fe .....	91	thiola ec .....	86
tarina fe 1/20 .....	91	thioridazine hydrochloride .....	43
tarina fe 1/20 eq .....	91	thiotepa .....	31
tarpeyo .....	103	thiothixene .....	43
tascenso odt .....	69	thymoglobulin .....	96
tasigna .....	38	thyrogen .....	93
tasimelteon .....	115	tiadylt er .....	60
tasmar .....	42	tiagabine hydrochloride .....	21
tavaborole .....	28	tibsovo .....	38
tavalisse .....	57	ticagrelor .....	57
tavneos .....	98	tice bcg .....	34
taysofy .....	92	ticovac .....	102
tazarotene .....	70	tigecycline .....	15
tazicef .....	16	tiglutik .....	67
tazorac .....	70	timolol maleate .....	29, 107
taztia xt .....	60	tinidazole .....	15
tazverik .....	38	tiopronin .....	86
tdvax .....	102	tiopronin dr .....	86
tecentriq .....	40	tiotropium bromide .....	109
tecentriq hybreza .....	40	tisseel .....	56
tecfidera .....	69	tivdak .....	40
tecfidera starter pack .....	69	tivicay .....	47
tecvayli .....	34	tivicay pd .....	47
teflaro .....	16	tizanidine hcl .....	46
tegsedi .....	84	tizanidine hydrochloride .....	46
telmisartan .....	58	tlando .....	88
telmisartan/amlodipine .....	62	tobi .....	111
telmisartan/hydrochlorothiazide .....	62	tobi podhaler .....	111
temazepam .....	115	tobradex .....	106
temodar .....	31	tobramycin .....	107, 111
temsirolimus .....	38	tobramycin sulfate .....	14
tencon .....	67	tobramycin/dexamethasone .....	106
tenivac .....	102	tolcapone .....	42
tenofovir disoproxil fumarate .....	48	tolectin 600 .....	9
tepadina .....	31	tolmetin sodium .....	9
tepezza .....	98	tolsura .....	28
tepmetko .....	38	tolterodine tartrate .....	85
tepylute .....	31	tolterodine tartrate er .....	85
terazosin hcl .....	86	tolvaptan .....	78
terazosin hydrochloride .....	86	tonmya .....	68
terbinafine hcl .....	28	topamax .....	20
terbutaline sulfate .....	110	topamax sprinkle .....	20
terconazole .....	28	topicort .....	72

topiramate.....	20	trimethobenzamide hydrochloride.....	26
topiramate er.....	20	trimethoprim.....	15
topotecan hcl.....	35	tri-mili.....	92
topotecan hydrochloride.....	35	trimipramine maleate.....	26
toremifene citrate.....	32	trintellix.....	25
torisel.....	38	triptodur.....	94
torpenz.....	38	trisenox.....	34
torse mide.....	63	tri-sprintec.....	92
tosymra.....	30	triumeq.....	48
toujeo max solostar.....	55	triumeq pd.....	48
toujeo solostar.....	55	trivora-28.....	92
toviaz.....	85	tri-vylibra.....	92
tracleer.....	112	trodelvy.....	40
tradjenta.....	53	trogarzo.....	49
tramadol hcl er.....	10	trokendi xr.....	20
tramadol hydrochloride.....	13	trophamine.....	78
tramadol hydrochloride er.....	10	tropium chloride.....	85
tramadol hydrochloride/acetaminophen.....	13	tropium chloride er.....	85
trandolapril.....	58	trudhesa.....	29
trandolapril/verapamil hcl er.....	62	trulance.....	79
tranexamic acid.....	57	trulicity.....	53
transderm-scop.....	26	trumenba.....	102
tranylcypromine sulfate.....	24	truqap.....	38
travasol.....	78	truvada.....	48
travatan z.....	108	truxima.....	40
travoprost.....	108	tryngolza.....	64
trazimera.....	40	tudorza pressair.....	110
trazodone hydrochloride.....	25	tukysa.....	38
treanda.....	31	turalio.....	38
trecator.....	30	turqoz.....	92
trelegy ellipta.....	114	twinrix.....	102
treistar mixject.....	94	tyblume.....	92
treprostinil.....	112	tybost.....	49
tresiba.....	55	tydemy.....	92
tresiba flextouch.....	55	tyenne.....	98
tretinoin.....	40, 70	tygacil.....	15
tretinoin microsphere.....	70	tykerb.....	38
tretinoin microsphere pump.....	70	tymlos.....	104
treximet.....	30	typhim vi.....	102
trezix.....	13	tyruko.....	69
triamcinolone acetonide.....	72	tyrvaya.....	14
triamcinolone acetonide dental paste.....	69	tysabri.....	69
triamterene.....	63	tyvaso.....	112
triamterene/hydrochlorothiazide.....	62	tyvaso dpi institutional kit.....	112
triazolam.....	115	tyvaso dpi maintenance kit.....	112
tridacaine.....	13	tyvaso dpi titration kit.....	112
tridacaine ii.....	13	tyvaso refill kit.....	112
tridacaine iii.....	13	tyvaso starter kit.....	112
trientine hydrochloride.....	79	ubrelvy.....	29
tri-estarylla.....	92	uceris.....	103
trifluoperazine hcl.....	43	udenyca.....	57
trifluoperazine hydrochloride.....	43	udenyca onbody.....	57
trifluridine.....	107	ultomiris.....	98
trihexyphenidyl hcl.....	41	ultravate.....	72
trihexyphenidyl hydrochloride.....	41	undecatretx.....	88
trijardy xr.....	53	unithroid.....	93
trikafta.....	111	unituxin.....	40
trileptal.....	22	unloxcyt.....	40
tri-lynyah.....	92	uptravi.....	112
tri-lo-mili.....	92	uptravi titration pack.....	112

urea	73	vemlidy	46
uretron d/s	85	venclaxta	38
uribel	85	venclaxta starting pack	38
urimar-t	85	venlafaxine besylate er	25
urneva	85	venlafaxine hcl	25
urogesic-blue	86	venlafaxine hydrochloride	25
uro-mp	85	venlafaxine hydrochloride er	25
uro-sp	86	ventavis	112
ursodiol	81	ventolin hfa	110
ustekinumab	98	venxxiva	86
uvadex	73	veopoz	98
uzedy	45	veozah	68
vabomere	17	verapamil hcl	60
vabrinty	94	verapamil hcl er	60
vabysmo	106	verapamil hcl sr	60
vafseo	57	verapamil hydrochloride	61
valacyclovir hydrochloride	50	verapamil hydrochloride er	60
valchlor	31	verapamil hydrochloride sr	61
valcyte	46	veregen	73
valganciclovir	46	verkazia	106
valganciclovir hydrochloride	46	verquvo	64
valium	51	versacloz	45
valproic acid	20	verzenio	38
valrubicin	34	vesicare	86
valsartan	58	vesicare ls	86
valsartan/hydrochlorothiazide	62	vestura	92
valstar	34	vevye	106
valtoco 10 mg dose	21	vfend	28
valtoco 15 mg dose	21	vfend iv	28
valtoco 20 mg dose	21	v-go 20	105
valtoco 5 mg dose	21	v-go 30	105
valtrex	50	v-go 40	105
valtya 1/35	92	vibativ	15
valtya 1/50	92	viberzi	80
vanadom	114	vidaza	34
vancocin	15	vienva	92
vancomycin hcl	15	vigabatrin	21
vancomycin hydrochloride	15	vigadrone	21, 22
vanflyta	38	vigafyde	22
vanos	72	vigpoder	22
vanrafia	86	viibryd	25
vaqta	102	vijoice	38
varenicline starting month	14	vilamit mb	86
varenicline tartrate	14	vilazodone hydrochloride	26
varivax	102	viltepso	84
varizig	96	vimizim	84
varubi	27	vimkunya	102
vasotec	58	vimovo	9
vaxchora	102	vimpat	22
vaxelis	102	vinblastine sulfate	35
vecamyl	62	vincristine sulfate	35
vectibix	40	viokace	84
vectical	73	violele	92
vegzelma	40	viracept	49, 50
veklury	50	virazole	114
velcade	34	viread	48, 49
veletri	112	vistogard	105
velphoro	79	visudyne	106
velsipity	98	vitrakvi	38
veltassa	79	vivimusta	31

vivitol	13	xarelto starter pack	56
vivjoa	28	xatmep	101
vivotif	102	xcopri	22
vizimpro	38	xdemvy	107
vocabria	47	xeljanz	98
vogelxo	88	xeljanz xr	98
vogelxo pump	88	xelpros	108
vonjo	35	xelria fe	92
voquezna	81	xelstrym	65
voquezna dual pak	15	xembify	96
voquezna triple pak	16	xenazine	68
voranigo	40	xenpozyme	78
voraxaze	41	xeomin	46
voriconazole	28	xerava	18
vosevi	47	xerese	73
votrient	38	xermelo	80
vowst	81	xgeva	104
voxzogo	84	xiaflex	84
voyxact	101	xifaxan	81
vpriv	84	xigduo xr	53
vraylar	45	xiidra	106
vtama	73	xipere	107
vuity	108	xofluz	50
vumerity	69	xolair	98
vyepti	29	xolremdi	57
vyfemla	92	xopenex hfa	110
vyjuvek	50	xospata	38
vykat xr	105	xphozah	79
vylibra	92	xpovio	38
vyloy	40	xpovio 60 mg twice weekly	38
vyndamax	62	xpovio 80 mg twice weekly	38
vyndaqel	84	xromi	33
vyondys 53	84	xtampza er	11
vyscoxa	9	xtandi	32
vyvgart	98	xulane	92
vyvgart hytrulo	30, 98	xultophy 100/3.6	53
vyxeos	33	xuriden	84
vyzulta	108	xyosted	88
wainua	84	xyrem	115
wakix	115	xyvona	11
warfarin sodium	56	xywav	115
wayrilz	57	yargesa	84
welireg	84	yervoy	40
wellbutrin sr	24	yf-vax	102
wellbutrin xl	24	yimmugo	96
wera	92	yondelis	31
wezlana	98	yonsa	32
winlevi	70	yosprala	57
winrevair	112	yupelri	110
winrho sdf	96	yutiq	107
wixela inhub	114	yutrepia	112
wynzora	73	yuvafem	92
wyost	104	zafemy	92
xacduro	16	zafirlukast	109
xadago	42	zaleplon	115
xalkori	38	zaltrap	35
xanax	51	zanaflex	46
xanax xr	51	zanosar	31
xarah fe	92	zarxio	57
xarelto	56	zavesca	85

zegalogue	53	zoladex	94
zegerid	82	zoledronic acid	104
zejula	39	zolinza	35
zelapar	42	zolmitriptan	30
zelboraf	39	zolmitriptan odt	30
zelsuvmi	74	zolpidem tartrate	115
zelvysia	85	zolpidem tartrate er	115
zemaira	85	zomacton	88
zembrace symtouch	30	zomig	30
zemdri	14	zonalon	72
zemplar	104	zonegran	22
zenatane	70	zonisade	22
zenpep	85	zonisamide	22
zenzedi	65	zorbtive	81
zepatier	47	zortress	101
zeposia	69	zoryve	72, 73
zeposia 7-day starter pack	69	zovia 1/35	92
zeposia starter kit	69	zovirax	74
zepzelca	31	ztalmy	22
zerbaxa	16	ztlido	13
zevalin y-90	40	zubsolv	14
zevtera	16	zunveyl	23
ziagen	49	zurnai	14
zidovudine	49	zurzuvae	24
ziextenzo	57	zyclara	73
ziihera	40	zyclara pump	73
zilbrysq	98	zydelig	39
zileuton er	109	zyflo	109
zimhi	14	zykadia	39
zinplava	81	zylet	106
ziprasidone hcl	45	zynlonta	40
ziprasidone mesylate	45	zynyx	40
zipsor	9	zypitamag	63
zirabev	40	zyprexa	45
zirgan	107	zyprexa relprevv	45
zitivimet	53	zyprexa zydis	45
zitivimet xr	53	zytiga	32
zokinvy	105	zyvox	16