PREMERA BLUE CROSS

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Preferred (B4) Drug List
Effective 12-01-2024

How to use this list:

On a 4 tier PPO plan? Refer to the B4 drug list.

Your drugs will fall into 4 tiers: Generic (1), Brand (2), Non-Preferred Brand (3), and Specialty (4).

Please see the chart on pages III- IV for information.

Have any questions? Please call customer service at 800-722-1471 (TTY:711), Monday through Friday, 5 a.m. to 8p.m. Pacific Time.

What is the list of covered drugs (Drug list)?

This document contains a list of generic, brand and specialty drugs covered under your plan.

How is the list of covered drugs developed?

The drug list is developed with an independent committee of physicians, pharmacists and other healthcare providers called the Pharmacy and Therapeutics Committee. This independent committee reviews and selects drugs for coverage based on each drugs safety, effectiveness, and cost.
The committee meets at least quarterly to review new drugs to market to determine placement on this list and reviews updated safety, effectiveness, and cost information for existing drugs to ensure the drug list remains up to date with current medical evidence.

How do I use the Drug list?

Drugs are listed by categories depending on the type of medical conditions that they are used totreat. If you know what your drug is used for, look for the category name in the list that begins below. Then look under the category name for your drug.
If you are not sure what category to look under, you can also search for the drug in the index. The index provides an alphabetical list of all the drugs included in this document. Next to the name of the drug in the Index, 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.

How does this drug list help me understand my drug coverage?

Drug coverage is based on your coverage contract. Coverage for a specific drug is subject to the rulesoutlined in your member booklet. This document will tell you if a drug is included on the drug list attached to your plan.

Will this drug list change?

This drug list is updated throughout the year. If you are taking a drug and it will be removed from the drug list or moved to a higher cost sharing tier, we will notify you of this change via letter. We also post information on upcoming drug list changes on our website on the "Drug List Changes" page.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These can be seen in the column next to the drug name on the list. These requirements and limits may include:

- Prior Authorization: some drugs require prior approval before they are covered.
- Quantity Limits: for some drugs, we limit the amount of the drug that we will cover. For example, we will cover 18 per 30-day supply of zolmitriptan oral tablets.
- Step Therapy: for some drugs we require that you first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, then we will then cover Drug B.

Drugs subject to these restrictions will generally mean that your physician or healthcare provider may need to provide additional information on your medical condition before the drug will be covered at the pharmacy. Information on this process is on our website on the "Drugs Requiring Approval" page.

Preferred (B4) Drug list

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

The information in the Requirements/Limits column tells you if we have any special requirements for coverage of your drug.

The amount you pay for a covered drug will depend on if you have met any applicable deductible for the plan year, if you have met any applicable maximum out of pocket for the planyear and what tier the medication is on.

More information on applicable deductibles and maximum out of pockets can be found in your member booklet.

Drug Tier	Includes
Generic (1)	Tier 1 is the lowest tier and includes generic drugs. Generic drugs are as effective, safe, and high quality as their brand-name counterparts, yet less expensive.
Brand (2)	Tier 2 includes preferred brand drugs. Considered "preferred" when there is no generic, and/or because of their value and effectiveness.
Non-Preferred Brand (3)	Tier 3 includes non-preferred brand drugs. These drugs may be more expensive than their alternatives in tiers 1 and 2.
Specialty (4)	Tier 4 includes specialty drugs are drugs typically used to treat chronic,complex, or rare conditions and may require enhanced clinical support. Specialty Drugs are generally limited to a month supply on dispense. Please check your member booklet for more details.

Preferred (B4) Drug list

COVERAGE AND ABBREVIATIONS

ABBREVIATION	DESCRIPTION	EXPLANATION
UTILIZATION MANAGEMENT RESTRICTIONS		
PA	Prior Authorization Restriction	You (or your physician) are required to get prior authorization from us before you fill your prescription for this drug. Without prior approval, we may not cover this drug.
QL	Quantity Limit Restriction	We limit the amount of this drug that is covered per prescription, or within a specific time frame.
ST	Step Therapy Restriction	Before we provide coverage for this drug you must first try another drug to treat your medical condition. This drug may only be covered if the other drug does not work for you.
OTHER SPECIAL REQUIREMENTS FOR COVERAGE		
SP	Specialty Pharmacy	In general, specialty drugs are drugs typically used to treat chronic, complex, or rare conditions and may require enhanced clinical support. Specialty Drugs are generally limited to a month supply on dispense. Please check your member booklet for more details.
OCh	Oral Chemo	Oral Chemotherapy Drug. Certain oral chemotherapy drugs may be covered under your medical plan. Please check your member booklet for more details.

ACA PV	Affordable Care Act (ACA) Preventive Medication	The Affordable Care Act (ACA) makes certain preventive medications available to you at no cost when you meet the requirements of the U.S. Preventive Services Task Force (USPSTF) recommendation grade of "A" or "B." *If you have an Individual or a Family Plan that was purchased independently, the coverage in full for some drugs is limited to the following:* • *Bowel prep (example: peg 3350-electrolytes oral recon soln): Covered for persons between 45 and 75 years old. Limited to 2 prescriptions per year.* • *Breast cancer prevention (tamoxifen, raloxifene, anastrozole, exemestane, Soltamox liquid): Covered in full for persons 35 years or older.* • *Fluoride: Covered in full for persons 6 months old through 16 years old* • *Smoking cessation aids (example: nicotine patches): Covered in full for persons 18 years or older. Limited to 180 days per year.* • *Statins (example: atorvastatin): Covered in full for persons 40 years old through 75 years old.* *Coverage outside of the limits described above will be at the tier in the "Drug Tier" column.*
LA	Limited Access Drug	Some drugs under your plan may only be filled at an in-network specialty pharmacy. These are drugs where the FDA has restricted distribution or are drugs that require special handling, provider coordination, or patient education that cannot be met by a network retail pharmacy.
Vac	Vaccines	For more information on the coverage of vaccines administered at a Pharmacy, please see your member booklet, or contact Customer Service.

Drug Name	Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ANCOBON ORAL CAPSULE 250 MG, 500 MG	3	
BREXAFEMME ORAL TABLET 150 MG	3	PA; ST; QL (24 per 180 days)
clotrimazole mucous membrane troche 10 mg	1	
CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG	3	PA
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	3	
DIFLUCAN ORAL TABLET 100 MG, 200 MG	3	
fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml	1	
fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg	1	
flucytosine oral capsule 250 mg, 500 mg	1	
griseofulvin microsize oral suspension 125 mg/5 ml	1	
griseofulvin microsize oral tablet 500 mg	1	
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	1	
itraconazole oral capsule 100 mg	1	
itraconazole oral solution 10 mg/ml	1	
ketoconazole oral tablet 200 mg	1	
NOXAFIL ORAL SUSP, DELAYED RELEASE FOR RECON 300 MG	3	PA; ST
nystatin oral suspension 100,000 unit/ml	1	
nystatin oral tablet 500,000 unit	1	
ORAVIG MUCO-ADHESIVE BUCCAL TABLET 50 MG	3	ST
posaconazole oral suspension 200 mg/5 ml (40 mg/ml)	1	
posaconazole oral tablet, delayed release (dr/ec) 100 mg	1	
SPORANOX ORAL CAPSULE 100 MG	3	
SPORANOX ORAL SOLUTION 10 MG/ML	3	
terbinafine hcl oral tablet 250 mg	1	
TOLSURA ORAL CAPSULE, SOLID DISPERSION 65 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
VFEND ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML (40 MG/ML)	3	PA
VFEND ORAL TABLET 200 MG, 50 MG	3	PA
VIVJOA ORAL CAPSULE 150 MG	4	PA; ST; SP
voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)	1	
voriconazole oral tablet 200 mg, 50 mg	1	
ANTIVIRALS		
abacavir oral solution 20 mg/ml	1	
abacavir oral tablet 300 mg	1	
abacavir-lamivudine oral tablet 600-300 mg	1	
acyclovir oral capsule 200 mg	1	
acyclovir oral suspension 200 mg/5 ml	1	
acyclovir oral tablet 400 mg, 800 mg	1	
adefovir oral tablet 10 mg	1	
amantadine hcl oral capsule 100 mg	1	
amantadine hcl oral solution 50 mg/5 ml	1	
amantadine hcl oral tablet 100 mg	1	
APRETUDE INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE 600 MG/3 ML (200 MG/ML)	4	PA; SP
APTIVUS ORAL CAPSULE 250 MG	2	
atazanavir oral capsule 150 mg, 200 mg, 300 mg	1	
ATRIPLA ORAL TABLET 600-200-300 MG	3	
BARACLUDE ORAL SOLUTION 0.05 MG/ML	2	PA
BARACLUDE ORAL TABLET 0.5 MG, 1 MG	3	PA
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	2	
CABENUVA INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE 400 MG/2 ML- 600 MG/2 ML, 600 MG/3 ML- 900 MG/3 ML	4	PA; SP
CIMDUO ORAL TABLET 300-300 MG	3	
COMPLERA ORAL TABLET 200-25-300 MG	2	
darunavir oral tablet 600 mg, 800 mg	1	
DELSTRIGO ORAL TABLET 100-300-300 MG	3	
DESCOVY ORAL TABLET 120-15 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
DESCOVY ORAL TABLET 200-25 MG	3	PA; ST; QL (30 per 30 days)
DOVATO ORAL TABLET 50-300 MG	2	
EDURANT ORAL TABLET 25 MG	2	
efavirenz oral tablet 600 mg	1	
efavirenz-emtricitabin-tenofov oral tablet 600-200-300 mg	1	
efavirenz-lamivu-tenofov disop oral tablet 400-300-300 mg, 600-300-300 mg	1	
emtricitabine oral capsule 200 mg	1	
emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg	1	
EMTRIVA ORAL CAPSULE 200 MG	3	
EMTRIVA ORAL SOLUTION 10 MG/ML	2	
entecavir oral tablet 0.5 mg, 1 mg	1	
EPCLUSA ORAL PELLETS IN PACKET 150-37.5 MG, 200-50 MG	4	PA; SP; LA
EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG	4	PA; SP; LA
EPIVIR ORAL SOLUTION 10 MG/ML	3	PA
EPIVIR ORAL TABLET 150 MG, 300 MG	3	PA
etravirine oral tablet 100 mg, 200 mg	1	
EVOTAZ ORAL TABLET 300-150 MG	3	
famciclovir oral tablet 125 mg, 250 mg, 500 mg	1	
FLUMADINE ORAL TABLET 100 MG	3	
fosamprenavir oral tablet 700 mg	1	
FUZEON SUBCUTANEOUS RECON SOLN 90 MG	4	SP
GENVOYA ORAL TABLET 150-150-200-10 MG	2	
HARVONI ORAL PELLETS IN PACKET 33.75-150 MG, 45-200 MG	4	PA; ST; SP; LA
HARVONI ORAL TABLET 45-200 MG, 90-400 MG	4	PA; ST; SP; LA
INTELENCE ORAL TABLET 100 MG, 200 MG, 25 MG	3	
ISENTRESS HD ORAL TABLET 600 MG	2	
ISENTRESS ORAL POWDER IN PACKET 100 MG	3	

Drug Name	Tier	Requirements / Limits
ISENTRESS ORAL TABLET 400 MG	2	
ISENTRESS ORAL TABLET, CHEWABLE 100 MG, 25 MG	2	
JULUCA ORAL TABLET 50-25 MG	2	
KALETRA ORAL SOLUTION 400-100 MG/5 ML	3	
KALETRA ORAL TABLET 100-25 MG, 200-50 MG	3	
lamivudine oral solution 10 mg/ml	1	
lamivudine oral tablet 100 mg, 150 mg, 300 mg	1	
lamivudine-zidovudine oral tablet 150-300 mg	1	
LEDIPASVIR-SOFOSBUVIR ORAL TABLET 90-400 MG	4	PA; SP; LA
LIVTENCITY ORAL TABLET 200 MG	4	PA; SP
lopinavir-ritonavir oral solution 400-100 mg/5 ml	1	
lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg	1	
maraviroc oral tablet 150 mg, 300 mg	1	PA
MAVYRET ORAL PELLETS IN PACKET 50-20 MG	4	PA; ST; SP; LA
MAVYRET ORAL TABLET 100-40 MG	4	PA; ST; SP; LA
nevirapine oral suspension 50 mg/5 ml	1	
nevirapine oral tablet 200 mg	1	
nevirapine oral tablet extended release 24 hr 100 mg, 400 mg	1	
NORVIR ORAL POWDER IN PACKET 100 MG	2	
NORVIR ORAL TABLET 100 MG	3	
ODEFSEY ORAL TABLET 200-25-25 MG	2	
oseltamivir oral capsule 30 mg, 45 mg, 75 mg	1	
oseltamivir oral suspension for reconstitution 6 mg/ml	1	
PAXLOVID ORAL TABLETS, DOSE PACK 150-100 MG, 300 MG (150 MG X 2)-100 MG	2	QL (40 per 90 days)
PIFELTRO ORAL TABLET 100 MG	3	
PREVYMIS ORAL TABLET 240 MG, 480 MG	3	
PREZCOBIX ORAL TABLET 800-150 MG-MG	3	
PREZISTA ORAL SUSPENSION 100 MG/ML	2	
PREZISTA ORAL TABLET 150 MG, 75 MG	2	

Drug Name	Tier	Requirements / Limits
PREZISTA ORAL TABLET 600 MG, 800 MG	3	
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	3	
RETROVIR ORAL CAPSULE 100 MG	3	
RETROVIR ORAL SYRUP 10 MG/ML	3	
REYATAZ ORAL CAPSULE 200 MG, 300 MG	3	
REYATAZ ORAL POWDER IN PACKET 50 MG	3	
ribavirin inhalation recon soln 6 gram	1	
rimantadine oral tablet 100 mg	1	
ritonavir oral tablet 100 mg	1	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	3	PA; ST; QL (60 per 30 days)
SELZENTRY ORAL SOLUTION 20 MG/ML	2	
SELZENTRY ORAL TABLET 150 MG, 300 MG	3	
SOFOSBUVIR-VELPATASVIR ORAL TABLET 400-100 MG	4	PA; ST; SP; LA
SOVALDI ORAL PELLETS IN PACKET 150 MG, 200 MG	4	PA; ST; SP; LA
SOVALDI ORAL TABLET 200 MG, 400 MG	4	PA; ST; SP; LA
STRIBILD ORAL TABLET 150-150-200-300 MG	3	
SUNLENCA ORAL TABLET 300 MG	4	PA; ST; SP; QL (9 per 365 days)
SUNLENCA SUBCUTANEOUS SOLUTION 309 MG/ML	4	PA; ST; SP; QL (2 per 135 days)
SYMFI LO ORAL TABLET 400-300-300 MG	3	
SYMFI ORAL TABLET 600-300-300 MG	3	
SYMTUZA ORAL TABLET 800-150-200-10 MG	3	
TAMIFLU ORAL CAPSULE 30 MG, 45 MG, 75 MG	3	
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION 6 MG/ML	3	
TEMBEXA ORAL SUSPENSION 10 MG/ML	3	
TEMBEXA ORAL TABLET 100 MG	3	
tenofovir disoproxil fumarate oral tablet 300 mg	1	
TIVICAY ORAL TABLET 50 MG	2	
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	2	

Drug Name	Tier	Requirements / Limits
TRIUMEQ ORAL TABLET 600-50-300 MG	2	
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	3	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG	3	PA; ST
TYBOST ORAL TABLET 150 MG	3	
valacyclovir oral tablet 1 gram, 500 mg	1	
VALCYTE ORAL RECON SOLN 50 MG/ML	3	
VALCYTE ORAL TABLET 450 MG	3	
valganciclovir oral recon soln 50 mg/ml	1	
valganciclovir oral tablet 450 mg	1	
VALTREX ORAL TABLET 1 GRAM, 500 MG	3	PA; ST
VEMLIDY ORAL TABLET 25 MG	2	PA
VIRACEPT ORAL TABLET 250 MG, 625 MG	2	
VIRAZOLE INHALATION RECON SOLN 6 GRAM	3	
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	3	PA; ST
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	PA; ST
VIREAD ORAL TABLET 300 MG	3	PA; ST
VOSEVI ORAL TABLET 400-100-100 MG	4	PA; ST; SP; LA
XOFLUZA ORAL TABLET 40 MG, 80 MG	3	QL (2 per 365 days)
ZEPATIER ORAL TABLET 50-100 MG	4	PA; SP; LA
ZIAGEN ORAL SOLUTION 20 MG/ML	3	
zidovudine oral capsule 100 mg	1	
zidovudine oral syrup 10 mg/ml	1	
zidovudine oral tablet 300 mg	1	
CEPHALOSPORINS		
cefaclor oral capsule 250 mg, 500 mg	1	
cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml	1	
cefaclor oral tablet extended release 12 hr 500 mg	1	
cefadroxil oral capsule 500 mg	1	
cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml	1	
cefadroxil oral tablet 1 gram	1	

Drug Name	Tier	Requirements / Limits
cefazolin injection recon soln 1 gram, 3 gram	1	
cefdinir oral capsule 300 mg	1	
cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	1	
cefixime oral capsule 400 mg	1	
cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml	1	
cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml	1	
cefpodoxime oral tablet 100 mg, 200 mg	1	
cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	1	
cefprozil oral tablet 250 mg, 500 mg	1	
ceftriaxone injection recon soln 1 gram, 250 mg, 500 mg	1	
cefuroxime axetil oral tablet 250 mg, 500 mg	1	
cephalexin oral capsule 250 mg, 500 mg, 750 mg	1	
cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	1	
cephalexin oral tablet 250 mg, 500 mg	1	
ERYTHROMYCINS & OTHER MACROLIDES		
azithromycin oral packet 1 gram	1	
azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml	1	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	1	
clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	1	
clarithromycin oral tablet 250 mg, 500 mg	1	
clarithromycin oral tablet extended release 24 hr 500 mg	1	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	3	
DIFICID ORAL TABLET 200 MG	3	
e.e.s. oral tablet 400 mg	1	
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	3	
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	3	

Drug Name	Tier	Requirements / Limits
ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION 400 MG/5 ML	3	
ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg	1	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	3	
erythrocin (as stearate) oral tablet 250 mg	1	
erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml, 400 mg/5 ml	1	
erythromycin ethylsuccinate oral tablet 400 mg	1	
erythromycin oral capsule, delayed release (dr/ec) 250 mg	1	
erythromycin oral tablet 250 mg, 500 mg	1	
erythromycin oral tablet, delayed release (dr/ec) 250 mg, 333 mg, 500 mg	1	
ZITHROMAX ORAL PACKET 1 GRAM	3	
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML, 200 MG/5 ML	3	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	3	
ZITHROMAX TRI-PAK ORAL TABLET 500 MG	3	
ZITHROMAX Z-PAK ORAL TABLET 250 MG	3	
MISCELLANEOUS ANTIINFECTIVES		
AEMCOLO ORAL TABLET, DELAYED RELEASE (DR/EC) 194 MG	3	PA; ST
albendazole oral tablet 200 mg	1	
ALINIA ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	3	PA; ST
ALINIA ORAL TABLET 500 MG	3	PA; ST
amikacin injection solution 500 mg/2 ml	1	
ARAKODA ORAL TABLET 100 MG	3	
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION 590 MG/8.4 ML	4	SP
atovaquone oral suspension 750 mg/5 ml	1	
atovaquone-proguanil oral tablet 250-100 mg, 62.5-25 mg	1	

Drug Name	Tier	Requirements / Limits
BENZNIDAZOLE ORAL TABLET 100 MG, 12.5 MG	3	
BETHKIS INHALATION SOLUTION FOR NEBULIZATION 300 MG/4 ML	4	PA; ST; SP
BILTRICIDE ORAL TABLET 600 MG	3	
CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	4	PA; SP; LA; QL (90 per 30 days)
chloroquine phosphate oral tablet 250 mg, 500 mg	1	
CLEOCIN HCL ORAL CAPSULE 150 MG, 300 MG, 75 MG	3	
CLEOCIN PEDIATRIC ORAL RECON SOLN 75 MG/5 ML	3	
clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg	1	
clindamycin pediatric oral recon soln 75 mg/5 ml	1	
COARTEM ORAL TABLET 20-120 MG	2	
colistin (colistimethate na) injection recon soln 150 mg	1	
COLY-MYCIN M PARENTERAL INJECTION RECON SOLN 150 MG	3	
cycloserine oral capsule 250 mg	1	
dapsone oral tablet 100 mg, 25 mg	1	
DARAPRIM ORAL TABLET 25 MG	4	PA; ST; SP
EMVERM ORAL TABLET, CHEWABLE 100 MG	3	PA
ethambutol oral tablet 100 mg, 400 mg	1	
FLAGYL ORAL CAPSULE 375 MG	3	PA
gentamicin injection solution 40 mg/ml	1	
HUMATIN ORAL CAPSULE 250 MG	4	PA; SP; LA
hydroxychloroquine oral tablet 100 mg, 200 mg, 300 mg, 400 mg	1	
IMPAVIDO ORAL CAPSULE 50 MG	3	PA
isoniazid oral solution 50 mg/5 ml	1	
isoniazid oral tablet 100 mg, 300 mg	1	
ivermectin oral tablet 3 mg	1	QL (20 per 30 days)
KITABIS PAK INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	4	PA; ST; SP
KRINTAFEL ORAL TABLET 150 MG	3	

Drug Name	Tier	Requirements / Limits
LAMPIT ORAL TABLET 120 MG, 30 MG	3	
LIKMEZ ORAL SUSPENSION 500 MG/5 ML	3	PA
linezolid oral suspension for reconstitution 100 mg/5 ml	1	
linezolid oral tablet 600 mg	1	
MALARONE ORAL TABLET 250-100 MG	3	
MALARONE PEDIATRIC ORAL TABLET 62.5-25 MG	3	
mefloquine oral tablet 250 mg	1	
MEPRON ORAL SUSPENSION 750 MG/5 ML	3	
metronidazole oral capsule 375 mg	1	
metronidazole oral tablet 250 mg, 500 mg	1	
MYCOBUTIN ORAL CAPSULE 150 MG	3	
NEBUPENT INHALATION RECON SOLN 300 MG	3	
neomycin oral tablet 500 mg	1	
nitazoxanide oral tablet 500 mg	1	
paromomycin oral capsule 250 mg	1	
PASER ORAL GRANULES DR FOR SUSP IN PACKET 4 GRAM	3	
pentamidine inhalation recon soln 300 mg	1	
PLAQUENIL ORAL TABLET 200 MG	3	
praziquantel oral tablet 600 mg	1	
PRETOMANID ORAL TABLET 200 MG	3	
PRIFTIN ORAL TABLET 150 MG	3	
primaquine oral tablet 26.3 mg (15 mg base)	1	
pyrazinamide oral tablet 500 mg	1	
pyrimethamine oral tablet 25 mg	1	PA; ST
QUALAQUIN ORAL CAPSULE 324 MG	3	
quinine sulfate oral capsule 324 mg	1	
rifabutin oral capsule 150 mg	1	
rifampin oral capsule 150 mg, 300 mg	1	
SIRTURO ORAL TABLET 100 MG, 20 MG	3	PA
SIVEXTRO ORAL TABLET 200 MG	3	QL (6 per 30 days)
SOVUNA ORAL TABLET 200 MG, 300 MG	3	
STROMECTOL ORAL TABLET 3 MG	3	QL (20 per 30 days)

Drug Name	Tier	Requirements / Limits
tinidazole oral tablet 250 mg, 500 mg	1	
TOBI INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	4	PA; ST; SP
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE 28 MG	4	PA; ST; SP
tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml	4	SP
tobramycin inhalation solution for nebulization 300 mg/4 ml	4	SP
tobramycin sulfate injection recon soln 1.2 gram	1	
TOBRAMYCIN WITH NEBULIZER INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	4	PA; ST; SP
TRECATOR ORAL TABLET 250 MG	3	
XENLETA ORAL TABLET 600 MG	3	
XIFAXAN ORAL TABLET 200 MG	3	PA; ST; QL (60 per 30 days)
XIFAXAN ORAL TABLET 550 MG	2	PA; ST; QL (60 per 30 days)
ZYVOX ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	3	
ZYVOX ORAL TABLET 600 MG	3	
PENICILLINS		
amoxicillin oral capsule 250 mg, 500 mg	1	
amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml	1	
amoxicillin oral tablet 500 mg, 875 mg	1	
amoxicillin oral tablet, chewable 125 mg, 250 mg	1	
amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml	1	
amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	1	
amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg	1	
amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg	1	
ampicillin oral capsule 500 mg	1	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	2	

Drug Name	Tier	Requirements / Limits
AUGMENTIN XR ORAL TABLET EXTENDED RELEASE 12 HR 1,000-62.5 MG	3	
BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML	3	
dicloxacillin oral capsule 250 mg, 500 mg	1	
EXTENCILLINE INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 1.2 MILLION UNIT, 2.4 MILLION UNIT	3	
MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR 775 MG	3	
penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml	1	
penicillin v potassium oral tablet 250 mg, 500 mg	1	
QUINOLONES		
BAXDELA ORAL TABLET 450 MG	3	
CIPRO ORAL SUSPENSION, MICROCAPSULE RECON 250 MG/5 ML, 500 MG/5 ML	3	
CIPRO ORAL TABLET 250 MG, 500 MG	3	
ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg	1	
ciprofloxacin oral suspension, microcapsule recon 250 mg/5 ml, 500 mg/5 ml	1	
FACTIVE ORAL TABLET 320 MG	3	QL (7 per 30 days)
levofloxacin oral solution 250 mg/10 ml	1	
levofloxacin oral tablet 250 mg, 500 mg, 750 mg	1	
moxifloxacin oral tablet 400 mg	1	
ofloxacin oral tablet 300 mg, 400 mg	1	
SULFA'S & RELATED AGENTS		
BACTRIM DS ORAL TABLET 800-160 MG	3	
BACTRIM ORAL TABLET 400-80 MG	3	
sulfadiazine oral tablet 500 mg	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml	1	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg	1	
sulfatrim oral suspension 200-40 mg/5 ml	1	
TETRACYCLINES		
ACTICLATE ORAL TABLET 150 MG, 75 MG	3	ST

Drug Name	Tier	Requirements / Limits
AVIDOXY DK KIT 100 MG-2 % -SPF 30	3	ST
avidoxy oral tablet 100 mg	1	ST
demeclocycline oral tablet 150 mg, 300 mg	1	
DORYX MPC ORAL TABLET, DELAYED RELEASE (DR/EC) 60 MG	3	ST
DORYX ORAL TABLET, DELAYED RELEASE (DR/EC) 200 MG, 80 MG	3	ST
doxycycline hyclate oral capsule 100 mg, 50 mg	1	
doxycycline hyclate oral tablet 100 mg, 150 mg, 20 mg, 50 mg, 75 mg	1	
doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	1	
DOXYCYCLINE HYCLATE ORAL TABLET, DELAYED RELEASE (DR/EC) 80 MG	3	ST
doxycycline monohydrate oral capsule 100 mg, 150 mg, 50 mg, 75 mg	1	
doxycycline monohydrate oral capsule, ir - delay rel, biphase 40 mg	1	ST
doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml	1	
doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg	1	
minocycline oral capsule 100 mg, 50 mg, 75 mg	1	
MINOCYCLINE ORAL CAPSULE, EXTENDED RELEASE 24HR 135 MG, 45 MG, 90 MG	3	ST
minocycline oral tablet 100 mg, 50 mg, 75 mg	1	
minocycline oral tablet extended release 24 hr 105 mg, 115 mg, 135 mg, 45 mg, 55 mg, 65 mg, 80 mg, 90 mg	1	ST
mondoxyne nl oral capsule 100 mg, 75 mg	1	
MONODOX ORAL CAPSULE 100 MG, 50 MG, 75 MG	3	ST
MORGIDOX 1X 50 KIT 50 MG	3	ST
MORGIDOX 1X100 KIT 100 MG	3	ST
NUZYRA ORAL TABLET 150 MG	3	
ORACEA ORAL CAPSULE, IR - DELAY REL, BIPHASE 40 MG	3	ST
SEYSARA ORAL TABLET 100 MG, 150 MG, 60 MG	3	ST

Drug Name	Tier	Requirements / Limits
TARGADOX ORAL TABLET 50 MG	3	ST
tetracycline oral capsule 250 mg, 500 mg	1	
tetracycline oral tablet 250 mg, 500 mg	1	
VIBRAMYCIN ORAL CAPSULE 100 MG	3	
XIMINO ORAL CAPSULE, EXTENDED RELEASE 24HR 135 MG, 45 MG, 90 MG	3	ST
URINARY TRACT AGENTS		
fosfomycin tromethamine oral packet 3 gram	1	
FURADANTIN ORAL SUSPENSION 25 MG/5 ML	3	
MACROBID ORAL CAPSULE 100 MG	3	
methenamine hippurate oral tablet 1 gram	1	
methenamine mandelate oral tablet 0.5 gram, 1 gram	1	
nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg	1	
nitrofurantoin monohyd/m-cryst oral capsule 100 mg	1	
nitrofurantoin oral suspension 25 mg/5 ml	1	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5 ML	3	
PRIMSOL ORAL SOLUTION 50 MG/5 ML	3	
trimethoprim oral tablet 100 mg	1	
VANCOMYCIN		
FIRVANQ ORAL RECON SOLN 25 MG/ML, 50 MG/ML	3	
VANCOCIN ORAL CAPSULE 125 MG, 250 MG	3	
vancomycin oral capsule 125 mg, 250 mg	1	
vancomycin oral recon soln 25 mg/ml, 50 mg/ml	1	
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg	1	
MESNEX ORAL TABLET 400 MG	3	
VISTOGARD ORAL GRANULES IN PACKET 10 GRAM	4	PA; SP
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		

Drug Name	Tier	Requirements / Limits
abiraterone oral tablet 250 mg, 500 mg	4	PA; SP; Och; LA
AFINITOR DISPERZ ORAL TABLET FOR SUSPENSION 2 MG, 3 MG, 5 MG	4	PA; ST; SP; Och; LA
AFINITOR ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG	4	PA; ST; SP; Och; LA
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG	4	PA; SP; Och
ALECENSA ORAL CAPSULE 150 MG	4	PA; SP; Och; LA; QL (240 per 30 days)
ALKERAN ORAL TABLET 2 MG	3	Och
ALUNBRIG ORAL TABLET 180 MG	4	PA; SP; Och; QL (30 per 30 days)
ALUNBRIG ORAL TABLET 30 MG	4	PA; SP; Och; QL (180 per 30 days)
ALUNBRIG ORAL TABLET 90 MG	4	PA; SP; Och; QL (60 per 30 days)
ALUNBRIG ORAL TABLETS, DOSE PACK 90 MG (7)- 180 MG (23)	4	PA; SP; Och; QL (1 per 30 days)
anastrozole oral tablet 1 mg	1	Och; ACA PV; QL (30 per 30 days)
ARIMIDEX ORAL TABLET 1 MG	3	PA; ST; Och; QL (30 per 30 days)
AROMASIN ORAL TABLET 25 MG	3	PA; ST; Och; QL (30 per 30 days)
ASTAGRAF XL ORAL CAPSULE, EXTENDED RELEASE 24HR 0.5 MG, 1 MG, 5 MG	3	
AUGTYRO ORAL CAPSULE 40 MG	4	PA; SP; Och; LA
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	4	PA; SP; Och
AZASAN ORAL TABLET 100 MG, 75 MG	3	
azathioprine oral tablet 100 mg, 50 mg, 75 mg	1	
BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG	4	PA; ST; SP; Och
bexarotene oral capsule 75 mg	4	PA; ST; SP; Och
bexarotene topical gel 1 %	1	PA; ST
bicalutamide oral tablet 50 mg	1	Och; QL (30 per 30 days)
BOSULIF ORAL CAPSULE 100 MG, 50 MG	4	PA; ST; SP; Och; LA
BOSULIF ORAL TABLET 100 MG, 400 MG, 500 MG	4	PA; ST; SP; Och; LA
BRAFTOVI ORAL CAPSULE 75 MG	4	PA; SP; Och; LA
BRUKINSA ORAL CAPSULE 80 MG	4	PA; ST; SP; Och
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	4	PA; ST; SP; Och; LA

Drug Name	Tier	Requirements / Limits
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG	4	PA; ST; SP; Och
CAMCEVI (6 MONTH) SUBCUTANEOUS SYRINGE 42 MG	4	PA; SP
capecitabine oral tablet 150 mg	4	SP; Och; LA; QL (210 per 30 days)
capecitabine oral tablet 500 mg	4	SP; Och; LA; QL (84 per 30 days)
CAPRELSA ORAL TABLET 100 MG, 300 MG	4	PA; SP; Och
CASODEX ORAL TABLET 50 MG	3	PA; ST; Och
CELLCEPT ORAL CAPSULE 250 MG	3	
CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION 200 MG/ML	3	
CELLCEPT ORAL TABLET 500 MG	3	
COMETRIQ ORAL CAPSULE 100 MG/DAY (80 MG X1-20 MG X1), 140 MG/DAY (80 MG X1-20 MG X3), 60 MG/DAY (20 MG X 3/DAY)	2	PA; Och
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	4	PA; ST; SP; Och
COTELLIC ORAL TABLET 20 MG	4	PA; SP; Och; LA
cyclophosphamide oral capsule 25 mg, 50 mg	1	Och
CYCLOPHOSPHAMIDE ORAL TABLET 25 MG, 50 MG	3	Och
cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg	1	
cyclosporine modified oral solution 100 mg/ml	1	
cyclosporine oral capsule 100 mg, 25 mg	1	
DARZALEX FASPRO SUBCUTANEOUS SOLUTION 1, 800 MG-30, 000 UNIT/15 ML	4	PA; ST; SP; LA
dasatinib oral tablet 100 mg, 140 mg, 20 mg, 50 mg, 70 mg, 80 mg	4	PA; SP; Och; LA
DAURISMO ORAL TABLET 100 MG, 25 MG	4	PA; SP; Och; LA
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	3	
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	4	PA; SP; LA
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	4	PA; SP; LA
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	4	PA; SP; LA
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	4	PA; SP; LA

Drug Name	Tier	Requirements / Limits
ENSPRYNG SUBCUTANEOUS SYRINGE 120 MG/ML	4	PA; SP; LA
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HR 0.75 MG, 1 MG, 4 MG	3	PA; ST
ERIVEDGE ORAL CAPSULE 150 MG	4	PA; SP; Och; LA
ERLEADA ORAL TABLET 240 MG, 60 MG	4	PA; SP; Och; LA
erlotinib oral tablet 100 mg, 150 mg, 25 mg	4	PA; ST; SP; Och; LA
etoposide oral capsule 50 mg	1	Och
EULEXIN ORAL CAPSULE 125 MG	3	PA; ST; Och
everolimus (antineoplastic) oral tablet 10 mg	4	PA; SP; Och; LA; QL (30 per 30 days)
everolimus (antineoplastic) oral tablet 2.5 mg, 5 mg, 7.5 mg	4	PA; SP; Och; LA
everolimus (antineoplastic) oral tablet for suspension 2 mg	4	PA; SP; Och; LA; QL (150 per 30 days)
everolimus (antineoplastic) oral tablet for suspension 3 mg	4	PA; SP; Och; LA; QL (90 per 30 days)
everolimus (antineoplastic) oral tablet for suspension 5 mg	4	PA; SP; Och; LA; QL (60 per 30 days)
everolimus (immunosuppressive) oral tablet 0.25 mg, 0.5 mg, 0.75 mg	1	PA
everolimus (immunosuppressive) oral tablet 1 mg	1	PA; QL (300 per 30 days)
exemestane oral tablet 25 mg	1	Och; ACA PV; QL (30 per 30 days)
FARESTON ORAL TABLET 60 MG	3	PA; ST; Och; QL (30 per 30 days)
FEMARA ORAL TABLET 2.5 MG	3	PA; ST; Och; QL (30 per 30 days)
FENSOLVI SUBCUTANEOUS SYRINGE 45 MG	4	PA; SP; LA
FOTIVDA ORAL CAPSULE 0.89 MG	4	PA; ST; SP; Och; QL (33 per 30 days)
FOTIVDA ORAL CAPSULE 1.34 MG	4	PA; ST; SP; Och; QL (22 per 30 days)
FRUZAQLA ORAL CAPSULE 1 MG, 5 MG	4	PA; SP; Och
GAVRETO ORAL CAPSULE 100 MG	4	PA; SP; Och; QL (120 per 30 days)
gefitinib oral tablet 250 mg	4	PA; SP; Och
gengraf oral capsule 100 mg, 25 mg	1	
gengraf oral solution 100 mg/ml	1	
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	4	PA; ST; SP; Och; LA
GLEEVEC ORAL TABLET 100 MG, 400 MG	4	PA; SP; Och; LA

Drug Name	Tier	Requirements / Limits
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	2	PA; ST; Och
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG	4	SP; Och; LA
HYDREA ORAL CAPSULE 500 MG	3	Och
hydroxyurea oral capsule 500 mg	1	Och
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	4	PA; SP; Och; LA
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	4	PA; SP; Och; LA
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	4	PA; ST; SP; Och
IDHIFA ORAL TABLET 100 MG, 50 MG	4	PA; SP; Och; LA
imatinib oral tablet 100 mg	4	PA; SP; Och; LA; QL (90 per 30 days)
imatinib oral tablet 400 mg	4	PA; SP; Och; LA; QL (60 per 30 days)
IMBRUVICA ORAL CAPSULE 140 MG, 70 MG	4	PA; ST; SP; Och
IMBRUVICA ORAL SUSPENSION 70 MG/ML	4	PA; ST; SP; Och
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	4	PA; ST; SP; Och
IMURAN ORAL TABLET 50 MG	3	
INLYTA ORAL TABLET 1 MG, 5 MG	4	PA; ST; SP; Och; LA
INQOVI ORAL TABLET 35-100 MG	4	PA; SP; Och; LA
INREBIC ORAL CAPSULE 100 MG	4	PA; SP; Och; LA
IRESSA ORAL TABLET 250 MG	4	PA; ST; SP; Och; LA
IWILFIN ORAL TABLET 192 MG	4	PA; ST; SP; Och; QL (240 per 30 days)
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	4	PA; ST; SP; Och; LA
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1), 400 MG/DAY (200 MG X 2), 600 MG/DAY (200 MG X 3)	4	PA; SP; Och; LA
KLISYRI TOPICAL OINTMENT IN PACKET 1 %	3	PA; ST
KOSELUGO ORAL CAPSULE 10 MG, 25 MG	4	PA; SP; Och
KRAZATI ORAL TABLET 200 MG	4	PA; SP; Och
lanreotide subcutaneous syringe 120 mg/0.5 ml	4	PA; ST; SP
lapatinib oral tablet 250 mg	4	PA; ST; SP; Och; LA; QL (180 per 30 days)

Drug Name	Tier	Requirements / Limits
lenalidomide oral capsule 10 mg, 15 mg, 25 mg, 5 mg	4	PA; ST; SP; Och; LA; QL (30 per 30 days)
lenalidomide oral capsule 2.5 mg, 20 mg	4	PA; ST; SP; Och; LA
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 12 MG/DAY (4 MG X 3), 14 MG/DAY(10 MG X 1-4 MG X 1), 18 MG/DAY (10 MG X 1-4 MG X2), 20 MG/DAY (10 MG X 2), 24 MG/DAY(10 MG X 2-4 MG X 1), 4 MG, 8 MG/DAY (4 MG X 2)	4	PA; ST; SP; Och; LA
letrozole oral tablet 2.5 mg	1	Och; ACA PV; QL (30 per 30 days)
LEUKERAN ORAL TABLET 2 MG	2	PA; Och
LEUPROLIDE (3 MONTH) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 22.5 MG	4	PA; SP
leuprolide subcutaneous kit 1 mg/0.2 ml	4	PA; SP
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	4	PA; ST; SP; Och; LA
LORBRENA ORAL TABLET 100 MG	4	PA; SP; Och; LA; QL (30 per 30 days)
LORBRENA ORAL TABLET 25 MG	4	PA; SP; Och; LA; QL (120 per 30 days)
LUMAKRAS ORAL TABLET 120 MG	4	PA; ST; SP; Och; LA; QL (240 per 30 days)
LUMAKRAS ORAL TABLET 320 MG	4	PA; ST; SP; Och; LA; QL (90 per 30 days)
LUPKYNIS ORAL CAPSULE 7.9 MG	4	PA; ST; SP; QL (180 per 30 days)
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG, 22.5 MG	4	PA; SP; LA
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT 30 MG	4	PA; SP; LA
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT 45 MG	4	PA; SP; LA
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG, 7.5 MG	4	PA; SP; LA
LUPRON DEPOT-PED (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG, 30 MG	4	PA; SP; LA
LUPRON DEPOT-PED INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG (PED)	4	PA; SP; LA

Drug Name	Tier	Requirements / Limits
LUPRON DEPOT-PED INTRAMUSCULAR SYRINGE KIT 45 MG	4	PA; SP; LA
LYNPARZA ORAL TABLET 100 MG, 150 MG	4	PA; ST; SP; Och; LA
LYSODREN ORAL TABLET 500 MG	4	PA; SP; Och
LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3), 16 MG/DAY (4 MG X 4), 20 MG/DAY (4 MG X 5)	4	PA; SP; Och
MATULANE ORAL CAPSULE 50 MG	4	PA; SP; Och
megestrol oral suspension 400 mg/10 ml (40 mg/ml)	1	QL (2 per 30 days)
megestrol oral suspension 625 mg/5 ml (125 mg/ml)	1	QL (1 per 30 days)
megestrol oral tablet 20 mg	1	Och; QL (480 per 30 days)
megestrol oral tablet 40 mg	1	Och; QL (240 per 30 days)
MEKINIST ORAL RECON SOLN 0.05 MG/ML	4	PA; ST; SP; Och; LA
MEKINIST ORAL TABLET 0.5 MG, 2 MG	4	PA; ST; SP; Och; LA
MEKTOVI ORAL TABLET 15 MG	4	PA; SP; Och; LA
mercaptopurine oral tablet 50 mg	1	Och; QL (120 per 30 days)
methotrexate sodium (pf) injection recon soln 1 gram	1	
methotrexate sodium (pf) injection solution 25 mg/ml	1	
methotrexate sodium injection solution 25 mg/ml	1	
methotrexate sodium oral tablet 2.5 mg	1	Och
MYCAPSSA ORAL CAPSULE, DELAYED RELEASE(DR/EC) 20 MG	4	PA; ST; SP; QL (120 per 30 days)
mycophenolate mofetil oral capsule 250 mg	1	
mycophenolate mofetil oral suspension for reconstitution 200 mg/ml	1	
mycophenolate mofetil oral tablet 500 mg	1	
mycophenolate sodium oral tablet, delayed release (dr/ec) 180 mg, 360 mg	1	
MYFORTIC ORAL TABLET, DELAYED RELEASE (DR/EC) 180 MG, 360 MG	3	
MYHIBBIN ORAL SUSPENSION 200 MG/ML	3	
MYLERAN ORAL TABLET 2 MG	2	Och
NEORAL ORAL CAPSULE 100 MG, 25 MG	3	
NEORAL ORAL SOLUTION 100 MG/ML	3	

Drug Name	Tier	Requirements / Limits
NERLYNX ORAL TABLET 40 MG	4	PA; ST; SP; Och; LA; QL (180 per 30 days)
NEXAVAR ORAL TABLET 200 MG	4	PA; ST; SP; Och; LA
NILANDRON ORAL TABLET 150 MG	3	PA; ST; Och
nilutamide oral tablet 150 mg	1	PA; ST; Och; QL (60 per 30 days)
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	4	PA; ST; SP; Och; LA
NUBEQA ORAL TABLET 300 MG	4	PA; SP; Och; LA
octreotide acetate injection solution 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	4	SP
octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml), 500 mcg/ml (1 ml)	4	SP
ODOMZO ORAL CAPSULE 200 MG	4	PA; SP; Och; LA; QL (30 per 30 days)
OGSIVEO ORAL TABLET 100 MG, 150 MG	4	PA; SP; Och
OJEMDA ORAL SUSPENSION FOR RECONSTITUTION 25 MG/ML	4	PA; SP; Och
OJEMDA ORAL TABLET 400 MG/WEEK (100 MG X 4), 500 MG/WEEK (100 MG X 5), 600 MG/WEEK (100 MG X 6)	4	PA; SP; Och
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG	4	PA; SP; Och
ONUREG ORAL TABLET 200 MG	4	PA; ST; SP; Och; LA; QL (21 per 30 days)
ONUREG ORAL TABLET 300 MG	4	PA; ST; SP; Och; LA; QL (14 per 30 days)
ORGOVYX ORAL TABLET 120 MG	4	PA; SP; Och
ORSERDU ORAL TABLET 345 MG, 86 MG	4	PA; SP; Och
pazopanib oral tablet 200 mg	4	PA; ST; SP; Och; LA
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	4	PA; ST; SP; Och; QL (28 per 30 days)
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1), 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	4	PA; SP; Och; LA; QL (30 per 30 days)
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	4	PA; ST; SP; Och; LA; QL (30 per 30 days)
PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG	3	
PROGRAF ORAL GRANULES IN PACKET 0.2 MG, 1 MG	3	

Drug Name	Tier	Requirements / Limits
PURIXAN ORAL SUSPENSION 20 MG/ML	4	PA; SP; Och
QINLOCK ORAL TABLET 50 MG	4	PA; ST; SP; Och; QL (90 per 30 days)
RETEVMO ORAL TABLET 120 MG, 160 MG, 40 MG, 80 MG	4	PA; SP; Och; LA; QL (60 per 30 days)
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG	4	PA; ST; SP; Och; LA; QL (30 per 30 days)
REZLIDHIA ORAL CAPSULE 150 MG	4	PA; SP; Och
REZUROCK ORAL TABLET 200 MG	3	PA
ROZLYTREK ORAL CAPSULE 100 MG, 200 MG	4	PA; SP; Och; LA
ROZLYTREK ORAL PELLETS IN PACKET 50 MG	4	PA; ST; SP; Och; LA
RUBRACA ORAL TABLET 250 MG, 300 MG	4	PA; ST; SP; Och; LA
RYDAPT ORAL CAPSULE 25 MG	4	PA; SP; Och; LA
SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG	3	
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	4	PA; ST; SP; LA
SCEMBLIX ORAL TABLET 100 MG, 20 MG, 40 MG	4	PA; ST; SP; Och
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	4	PA; ST; SP
SIKLOS ORAL TABLET 1,000 MG, 100 MG	3	
sirolimus oral solution 1 mg/ml	1	
sirolimus oral tablet 0.5 mg, 1 mg, 2 mg	1	
SOLTAMOX ORAL SOLUTION 20 MG/10 ML	3	Och; ACA PV
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML	4	PA; SP; LA
sorafenib oral tablet 200 mg	4	PA; ST; SP; Och; LA
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	4	PA; ST; SP; Och; LA
STIVARGA ORAL TABLET 40 MG	4	PA; ST; SP; Och; LA
sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg	4	PA; ST; SP; Och; LA
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG	4	PA; ST; SP; Och; LA
TABLOID ORAL TABLET 40 MG	2	PA; Och; QL (210 per 30 days)

Drug Name	Tier	Requirements / Limits
TABRECTA ORAL TABLET 150 MG, 200 MG	4	PA; SP; Och; LA; QL (168 per 30 days)
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg	1	
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	4	PA; SP; Och; LA
TAFINLAR ORAL TABLET FOR SUSPENSION 10 MG	4	PA; SP; Och; LA
TAGRISSO ORAL TABLET 40 MG, 80 MG	4	PA; ST; SP; Och; LA
TALVEY SUBCUTANEOUS SOLUTION 2 MG/ML, 40 MG/ML	4	PA; SP
TALZENNA ORAL CAPSULE 0.1 MG, 0.25 MG, 0.35 MG, 1 MG	4	PA; SP; Och; LA
TALZENNA ORAL CAPSULE 0.5 MG, 0.75 MG	4	PA; ST; SP; Och; LA
tamoxifen oral tablet 10 mg, 20 mg	1	Och; ACA PV; QL (60 per 30 days)
TARCEVA ORAL TABLET 100 MG	4	PA; ST; SP; Och; LA
TARGRETIN ORAL CAPSULE 75 MG	3	PA; ST; Och
TARGRETIN TOPICAL GEL 1 %	3	PA; ST
TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG	4	PA; ST; SP; Och; LA
TAZVERIK ORAL TABLET 200 MG	4	PA; ST; SP; Och; QL (240 per 30 days)
temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg	4	PA; ST; SP; Och; LA
TEPMETKO ORAL TABLET 225 MG	4	PA; SP; Och; QL (60 per 30 days)
THALOMID ORAL CAPSULE 100 MG, 50 MG	4	PA; SP; Och; LA
TIBSOVO ORAL TABLET 250 MG	4	PA; SP; Och
toremifene oral tablet 60 mg	1	Och
torpenz oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	4	PA; ST; SP; Och
tretinoin (antineoplastic) oral capsule 10 mg	1	Och
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	3	PA; ST; Och; QL (15 per 30 days)
TRUQAP ORAL TABLET 160 MG, 200 MG	4	PA; ST; SP; Och; QL (40 per 30 days)
TUKYSA ORAL TABLET 150 MG, 50 MG	4	PA; ST; SP; Och; QL (120 per 30 days)
TURALIO ORAL CAPSULE 125 MG	4	PA; SP; Och
TYKERB ORAL TABLET 250 MG	4	PA; ST; SP; Och; LA; QL (180 per 30 days)
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG	4	PA; SP; Och

Drug Name	Tier	Requirements / Limits
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG	4	PA; ST; SP; Och
VENCLEXTA STARTING PACK ORAL TABLETS, DOSE PACK 10 MG-50 MG- 100 MG	4	PA; SP; Och
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	4	PA; SP; Och; LA
VIJOICE ORAL GRANULES IN PACKET 50 MG	4	PA; SP
VIJOICE ORAL TABLET 125 MG, 250 MG/DAY (200 MG X1-50 MG X1), 50 MG	4	PA; SP
VITRAKVI ORAL CAPSULE 100 MG	4	PA; SP; Och; LA
VITRAKVI ORAL CAPSULE 25 MG	4	PA; ST; SP; Och; LA
VITRAKVI ORAL SOLUTION 20 MG/ML	4	PA; SP; Och; LA
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	4	PA; SP; Och; LA
VONJO ORAL CAPSULE 100 MG	4	PA; ST; SP; Och; QL (120 per 30 days)
VOTRIENT ORAL TABLET 200 MG	4	PA; ST; SP; Och; LA
WELIREG ORAL TABLET 40 MG	4	PA; ST; SP; Och; QL (90 per 30 days)
XALKORI ORAL CAPSULE 200 MG	4	PA; SP; Och; LA; QL (75 per 30 days)
XALKORI ORAL CAPSULE 250 MG	4	PA; SP; Och; LA; QL (60 per 30 days)
XALKORI ORAL PELLET 150 MG, 20 MG, 50 MG	4	PA; SP; Och; LA
XATMEP ORAL SOLUTION 2.5 MG/ML	3	PA; ST; Och; QL (2 per 30 days)
XELODA ORAL TABLET 150 MG, 500 MG	4	PA; ST; SP; Och; LA
XERMELO ORAL TABLET 250 MG	4	PA; ST; SP
XOSPATA ORAL TABLET 40 MG	4	PA; SP; Och
XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40 MG/WEEK (40 MG X 1), 40MG TWICE WEEK (40 MG X 2), 60 MG/WEEK (60 MG X 1), 60MG TWICE WEEK (120 MG/WEEK), 80 MG/WEEK (40 MG X 2), 80MG TWICE WEEK (160 MG/WEEK)	4	PA; ST; SP; Och
XTANDI ORAL CAPSULE 40 MG	4	PA; SP; Och; LA
XTANDI ORAL TABLET 40 MG, 80 MG	4	PA; SP; Och; LA
YONSA ORAL TABLET 125 MG	4	PA; SP; Och; LA

Drug Name	Tier	Requirements / Limits
ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG	4	PA; ST; SP; Och; LA
ZELBORAF ORAL TABLET 240 MG	4	PA; ST; SP; Och; LA
ZOLINZA ORAL CAPSULE 100 MG	4	PA; ST; SP; Och; LA
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	3	PA
ZYDELIG ORAL TABLET 100 MG, 150 MG	4	PA; SP; Och; LA; QL (30 per 30 days)
ZYKADIA ORAL TABLET 150 MG	4	PA; ST; SP; Och; LA; QL (90 per 30 days)
ZYTIGA ORAL TABLET 250 MG, 500 MG	4	PA; ST; SP; Och; LA
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH		
ANTICONVULSANTS		
APTIOM ORAL TABLET 200 MG	3	PA; ST; QL (240 per 30 days)
APTIOM ORAL TABLET 400 MG	3	PA; ST; QL (120 per 30 days)
APTIOM ORAL TABLET 600 MG	3	PA; ST; QL (80 per 30 days)
APTIOM ORAL TABLET 800 MG	3	PA; ST; QL (60 per 30 days)
BANZEL ORAL SUSPENSION 40 MG/ML	3	PA; ST
BANZEL ORAL TABLET 200 MG, 400 MG	3	PA; ST
BRIVIACT ORAL SOLUTION 10 MG/ML	3	PA; ST; QL (2 per 30 days)
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG	3	PA; ST; QL (60 per 30 days)
carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg	1	
carbamazepine oral suspension 100 mg/5 ml, 200 mg/10 ml	1	
carbamazepine oral tablet 200 mg	1	
carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg	1	
carbamazepine oral tablet, chewable 100 mg	1	
CARBAMAZEPINE ORAL TABLET, CHEWABLE 200 MG	3	
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	3	
CELONTIN ORAL CAPSULE 300 MG	3	QL (1200 per 30 days)
clobazam oral suspension 2.5 mg/ml	1	
clobazam oral tablet 10 mg, 20 mg	1	

Drug Name	Tier	Requirements / Limits
clonazepam oral tablet 0.5 mg, 1 mg, 2 mg	1	
clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	1	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR 250 MG, 500 MG	3	
DEPAKOTE ORAL TABLET, DELAYED RELEASE (DR/EC) 125 MG, 250 MG, 500 MG	3	
DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE 125 MG	3	
DIACOMIT ORAL CAPSULE 250 MG, 500 MG	4	PA; ST; SP
DIACOMIT ORAL POWDER IN PACKET 250 MG, 500 MG	4	PA; ST; SP
diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg	1	
DILANTIN EXTENDED ORAL CAPSULE 100 MG	2	
DILANTIN INFATABS ORAL TABLET, CHEWABLE 50 MG	2	
DILANTIN ORAL CAPSULE 30 MG	2	
DILANTIN-125 ORAL SUSPENSION 125 MG/5 ML	2	
divalproex oral capsule, delayed rel sprinkle 125 mg	1	
divalproex oral tablet extended release 24 hr 250 mg, 500 mg	1	
divalproex oral tablet, delayed release (dr/ec) 125 mg, 250 mg, 500 mg	1	
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HR 1, 000 MG, 1, 500 MG	3	
EPIDIOLEX ORAL SOLUTION 100 MG/ML	4	PA; ST; SP; LA; QL (400 per 30 days)
epitol oral tablet 200 mg	1	
EPRONTIA ORAL SOLUTION 25 MG/ML	3	PA
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	3	
ethosuximide oral capsule 250 mg	1	
ethosuximide oral solution 250 mg/5 ml	1	
felbamate oral suspension 600 mg/5 ml	1	
felbamate oral tablet 400 mg, 600 mg	1	

Drug Name	Tier	Requirements / Limits
FELBATOL ORAL TABLET 400 MG, 600 MG	3	
FINTEPLA ORAL SOLUTION 2.2 MG/ML	4	PA; ST; SP; QL (210 per 30 days)
FYCOMPA ORAL SUSPENSION 0.5 MG/ML	3	PA; ST; QL (2 per 30 days)
FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	3	PA; ST; QL (30 per 30 days)
gabapentin oral capsule 100 mg, 300 mg, 400 mg	1	
gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)	1	
gabapentin oral tablet 600 mg, 800 mg	1	
gabapentin oral tablet extended release 24 hr 300 mg, 600 mg	1	PA; ST
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 300 MG, 450 MG, 600 MG, 750 MG, 900 MG	3	PA; ST
KEPPRA ORAL SOLUTION 100 MG/ML	3	PA; ST; QL (9 per 30 days)
KEPPRA ORAL TABLET 1, 000 MG	3	PA; ST; QL (90 per 30 days)
KEPPRA ORAL TABLET 250 MG	3	PA; ST; QL (360 per 30 days)
KEPPRA ORAL TABLET 500 MG	3	PA; ST; QL (180 per 30 days)
KEPPRA ORAL TABLET 750 MG	3	PA; ST; QL (120 per 30 days)
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HR 500 MG	3	PA; ST; QL (180 per 30 days)
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HR 750 MG	3	PA; ST; QL (120 per 30 days)
KLONOPIN ORAL TABLET 0.5 MG, 1 MG, 2 MG	3	
lacosamide oral solution 10 mg/ml	1	
lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg	1	
LAMICTAL ODT ORAL TABLET, DISINTEGRATING 100 MG	3	PA; ST; QL (225 per 30 days)
LAMICTAL ODT ORAL TABLET, DISINTEGRATING 200 MG	3	PA; ST; QL (113 per 30 days)
LAMICTAL ODT ORAL TABLET, DISINTEGRATING 25 MG	3	PA; ST; QL (900 per 30 days)
LAMICTAL ODT ORAL TABLET, DISINTEGRATING 50 MG	3	PA; ST; QL (450 per 30 days)
LAMICTAL ODT STARTER (BLUE) ORAL TABLET DISINTEGRATING, DOSE PK 25 MG (21) -50 MG (7)	3	PA; ST; QL (1 per 30 days)

Drug Name	Tier	Requirements / Limits
LAMICTAL ODT STARTER (GREEN) ORAL TABLET DISINTEGRATING, DOSE PK 50 MG (42) -100 MG (14)	3	PA; ST; QL (1 per 30 days)
LAMICTAL ODT STARTER (ORANGE) ORAL TABLET DISINTEGRATING, DOSE PK 25 MG(14)-50 MG (14)-100 MG (7)	3	PA; ST; QL (1 per 30 days)
LAMICTAL ORAL TABLET 100 MG	3	PA; ST; QL (225 per 30 days)
LAMICTAL ORAL TABLET 150 MG	3	PA; ST; QL (150 per 30 days)
LAMICTAL ORAL TABLET 200 MG	3	PA; ST; QL (113 per 30 days)
LAMICTAL ORAL TABLET 25 MG	3	PA; ST; QL (900 per 30 days)
LAMICTAL ORAL TABLET, CHEWABLE DISPERSIBLE 25 MG	3	PA; ST; QL (900 per 30 days)
LAMICTAL ORAL TABLET, CHEWABLE DISPERSIBLE 5 MG	3	PA; ST; QL (4500 per 30 days)
LAMICTAL STARTER (BLUE) KIT ORAL TABLETS, DOSE PACK 25 MG (35)	3	PA; ST; QL (1 per 30 days)
LAMICTAL STARTER (GREEN) KIT ORAL TABLETS, DOSE PACK 25 MG (84) -100 MG (14)	3	PA; ST; QL (1 per 30 days)
LAMICTAL STARTER (ORANGE) KIT ORAL TABLETS, DOSE PACK 25 MG (42) -100 MG (7)	3	PA; ST; QL (1 per 365 days)
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24HR 100 MG	3	PA; ST; QL (225 per 30 days)
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24HR 200 MG	3	PA; ST; QL (113 per 30 days)
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24HR 25 MG	3	PA; ST; QL (900 per 30 days)
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24HR 250 MG	3	PA; ST; QL (90 per 30 days)
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24HR 300 MG	3	PA; ST; QL (75 per 30 days)
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24HR 50 MG	3	PA; ST; QL (450 per 30 days)
LAMICTAL XR STARTER (BLUE) ORAL TABLET EXTENDED REL, DOSE PACK 25 MG (21) -50 MG (7)	3	PA; ST; QL (1 per 365 days)
LAMICTAL XR STARTER (GREEN) ORAL TABLET EXTENDED REL, DOSE PACK 50 MG(14)-100MG (14)-200 MG (7)	3	PA; ST; QL (1 per 365 days)

Drug Name	Tier	Requirements / Limits
LAMICTAL XR STARTER (ORANGE) ORAL TABLET EXTENDED REL, DOSE PACK 25MG (14)-50 MG (14)-100MG (7)	3	PA; ST; QL (1 per 365 days)
lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg	1	
lamotrigine oral tablet disintegrating, dose pk 25 mg (21) -50 mg (7), 25 mg(14)-50 mg (14)-100 mg (7), 50 mg (42) -100 mg (14)	1	
lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg	1	
lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg	1	
lamotrigine oral tablet, disintegrating 100 mg, 200 mg, 25 mg, 50 mg	1	
lamotrigine oral tablets, dose pack 25 mg (35), 25 mg (42) -100 mg (7), 25 mg (84) -100 mg (14)	1	
levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)	1	
levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg	1	
levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg	1	
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	2	PA; QL (2 per 30 days)
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HR 165 MG, 330 MG, 82.5 MG	3	PA; ST
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG	3	PA; ST
methsuximide oral capsule 300 mg	1	
MOTPOLY XR ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG	3	PA; ST; QL (120 per 30 days)
MOTPOLY XR ORAL CAPSULE, EXTENDED RELEASE 24HR 150 MG, 200 MG	3	PA; ST; QL (60 per 30 days)
MYSOLINE ORAL TABLET 250 MG	3	QL (240 per 30 days)
MYSOLINE ORAL TABLET 50 MG	3	QL (1200 per 30 days)
NAYZILAM NASAL SPRAY, NON-AEROSOL 5 MG/SPRAY (0.1 ML)	2	
NEURONTIN ORAL CAPSULE 100 MG	3	PA; ST; QL (540 per 30 days)
NEURONTIN ORAL CAPSULE 300 MG	3	PA; ST; QL (180 per 30 days)

Drug Name	Tier	Requirements / Limits
NEURONTIN ORAL CAPSULE 400 MG	3	PA; ST; QL (135 per 30 days)
NEURONTIN ORAL SOLUTION 250 MG/5 ML	3	PA; ST
NEURONTIN ORAL TABLET 600 MG	3	PA; ST; QL (90 per 30 days)
NEURONTIN ORAL TABLET 800 MG	3	PA; ST; QL (68 per 30 days)
ONFI ORAL SUSPENSION 2.5 MG/ML	3	PA; ST; QL (4 per 30 days)
ONFI ORAL TABLET 10 MG	3	PA; ST; QL (120 per 30 days)
ONFI ORAL TABLET 20 MG	3	PA; ST; QL (60 per 30 days)
oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)	1	
oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg	1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 300 MG	3	PA; ST; QL (30 per 30 days)
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR 600 MG	3	PA; ST; QL (120 per 30 days)
phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)	1	
phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg	1	
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	2	
phenytoin oral suspension 125 mg/5 ml	1	
phenytoin oral tablet, chewable 50 mg	1	
phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg	1	
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg	1	
pregabalin oral solution 20 mg/ml	1	
pregabalin oral tablet extended release 24 hr 165 mg, 330 mg, 82.5 mg	1	
PRIMIDONE ORAL TABLET 125 MG	3	
primidone oral tablet 250 mg, 50 mg	1	
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR 100 MG	3	PA; ST; QL (120 per 30 days)
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR 150 MG	3	PA; ST; QL (80 per 30 days)
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR 200 MG	3	PA; ST; QL (60 per 30 days)
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR 25 MG	3	PA; ST; QL (480 per 30 days)

Drug Name	Tier	Requirements / Limits
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR 50 MG	3	PA; ST; QL (240 per 30 days)
roweepra oral tablet 500 mg	1	
rufinamide oral suspension 40 mg/ml	1	PA
rufinamide oral tablet 200 mg, 400 mg	1	PA
SABRIL ORAL POWDER IN PACKET 500 MG	4	PA; ST; SP; LA
SABRIL ORAL TABLET 500 MG	4	PA; ST; SP; LA
SPRITAM ORAL TABLET FOR SUSPENSION 1, 000 MG	3	PA; ST; QL (90 per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 250 MG	3	PA; ST; QL (360 per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 500 MG	3	PA; ST; QL (180 per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 750 MG	3	PA; ST; QL (120 per 30 days)
subvenite oral tablet 100 mg, 150 mg, 200 mg, 25 mg	1	
subvenite starter (blue) kit oral tablets, dose pack 25 mg (35)	1	
subvenite starter (green) kit oral tablets, dose pack 25 mg (84) -100 mg (14)	1	
subvenite starter (orange) kit oral tablets, dose pack 25 mg (42) -100 mg (7)	1	
SYMPAZAN ORAL FILM 10 MG	3	PA; ST; QL (120 per 30 days)
SYMPAZAN ORAL FILM 20 MG	3	PA; ST; QL (60 per 30 days)
SYMPAZAN ORAL FILM 5 MG	3	PA; ST; QL (240 per 30 days)
TEGRETOL ORAL SUSPENSION 100 MG/5 ML	3	
TEGRETOL ORAL TABLET 200 MG	3	
TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 200 MG, 400 MG	3	
tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg	1	
TOPAMAX ORAL CAPSULE, SPRINKLE 15 MG	3	PA; ST; QL (800 per 30 days)
TOPAMAX ORAL CAPSULE, SPRINKLE 25 MG	3	PA; ST; QL (480 per 30 days)
TOPAMAX ORAL TABLET 100 MG	3	PA; ST; QL (120 per 30 days)
TOPAMAX ORAL TABLET 200 MG	3	PA; ST; QL (60 per 30 days)
TOPAMAX ORAL TABLET 25 MG	3	PA; ST; QL (480 per 30 days)

Drug Name	Tier	Requirements / Limits
TOPAMAX ORAL TABLET 50 MG	3	PA; ST; QL (240 per 30 days)
topiramate oral capsule, sprinkle 15 mg, 25 mg	1	
topiramate oral capsule, extended release 24hr 100 mg, 200 mg, 25 mg, 50 mg	1	
topiramate oral capsule, sprinkle, er 24hr 100 mg, 150 mg, 200 mg, 25 mg, 50 mg	1	
topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	1	
TRILEPTAL ORAL SUSPENSION 300 MG/5 ML (60 MG/ML)	3	PA; ST; QL (5 per 30 days)
TRILEPTAL ORAL TABLET 150 MG	3	PA; ST; QL (480 per 30 days)
TRILEPTAL ORAL TABLET 300 MG	3	PA; ST; QL (240 per 30 days)
TRILEPTAL ORAL TABLET 600 MG	3	PA; ST; QL (120 per 30 days)
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG	3	PA; ST; QL (120 per 30 days)
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR 200 MG	3	PA; ST; QL (60 per 30 days)
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR 25 MG	3	PA; ST; QL (480 per 30 days)
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR 50 MG	3	PA; ST; QL (240 per 30 days)
valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)	1	
valproic acid oral capsule 250 mg	1	
VALTOCO NASAL SPRAY, NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)	2	
vigabatrin oral powder in packet 500 mg	4	PA; ST; SP; LA
vigabatrin oral tablet 500 mg	4	PA; ST; SP; LA
vigadrone oral powder in packet 500 mg	4	PA; ST; SP
vigadrone oral tablet 500 mg	4	PA; ST; SP
VIGAFYDE ORAL SOLUTION 100 MG/ML	4	PA; SP
vigpoder oral powder in packet 500 mg	4	PA; ST; SP
VIMPAT ORAL SOLUTION 10 MG/ML	3	PA; ST; QL (6 per 30 days)
VIMPAT ORAL TABLET 100 MG	3	PA; ST; QL (120 per 30 days)
VIMPAT ORAL TABLET 150 MG	3	PA; ST; QL (80 per 30 days)
VIMPAT ORAL TABLET 200 MG	3	PA; ST; QL (60 per 30 days)

Drug Name	Tier	Requirements / Limits
VIMPAT ORAL TABLET 50 MG	3	PA; ST; QL (240 per 30 days)
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY (150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	3	PA; ST
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG	3	PA; ST
XCOPRI TITRATION PACK ORAL TABLETS, DOSE PACK 12.5 MG (14) - 25 MG (14), 150 MG (14) - 200 MG (14), 50 MG (14) - 100 MG (14)	3	PA; ST
ZARONTIN ORAL CAPSULE 250 MG	3	
ZARONTIN ORAL SOLUTION 250 MG/5 ML	3	
ZONEGRAN ORAL CAPSULE 100 MG, 25 MG	3	
ZONISADE ORAL SUSPENSION 100 MG/5 ML	3	PA; ST; QL (6 per 30 days)
zonisamide oral capsule 100 mg, 25 mg, 50 mg	1	
ZTALMY ORAL SUSPENSION 50 MG/ML	4	PA; SP
ANTIPARKINSONISM AGENTS		
APOKYN SUBCUTANEOUS CARTRIDGE 10 MG/ML	4	PA; ST; SP; LA; QL (1 per 30 days)
apomorphine subcutaneous cartridge 10 mg/ml	4	PA; ST; SP
AZILECT ORAL TABLET 0.5 MG, 1 MG	3	
benztropine oral tablet 0.5 mg, 1 mg, 2 mg	1	
bromocriptine oral capsule 5 mg	1	
bromocriptine oral tablet 2.5 mg	1	
carbidopa oral tablet 25 mg	1	
carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg	1	
carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg	1	
carbidopa-levodopa oral tablet, disintegrating 10-100 mg, 25-100 mg, 25-250 mg	1	
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	1	
DHIVY ORAL TABLET 25-100 MG	3	PA
DUOPA J-TUBE INTESTINAL PUMP SUSPENSION 4.63-20 MG/ML	4	PA; SP; LA
entacapone oral tablet 200 mg	1	

Drug Name	Tier	Requirements / Limits
GOCOVRI ORAL CAPSULE, EXTENDED RELEASE 24HR 137 MG, 68.5 MG	4	PA; ST; SP
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE 42 MG	4	PA; ST; SP
LODOSYN ORAL TABLET 25 MG	3	
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HR 2.25 MG, 3 MG, 3.75 MG	3	
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR	3	
NOURIANZ ORAL TABLET 20 MG, 40 MG	4	PA; ST; SP; LA
ONGENTYS ORAL CAPSULE 25 MG, 50 MG	3	PA; ST
OSMOLEX ER ORAL TABLET, IR - ER, BIPHASIC 24HR 129 MG	4	PA; ST; SP; QL (30 per 30 days)
pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	1	
pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg	1	
rasagiline oral tablet 0.5 mg, 1 mg	1	
ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	1	
ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 6 mg, 8 mg	1	
RYTARY ORAL CAPSULE, EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG	3	PA
selegiline hcl oral capsule 5 mg	1	
selegiline hcl oral tablet 5 mg	1	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	3	PA
TASMAR ORAL TABLET 100 MG	3	
tolcapone oral tablet 100 mg	1	
trihexyphenidyl oral elixir 0.4 mg/ml	1	
trihexyphenidyl oral tablet 2 mg, 5 mg	1	
XADAGO ORAL TABLET 100 MG, 50 MG	3	PA
ZELAPAR ORAL TABLET, DISINTEGRATING 1.25 MG	3	

Drug Name	Tier	Requirements / Limits
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA; ST
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 225 MG/1.5 ML	2	PA; ST
AJOVY SUBCUTANEOUS SYRINGE 225 MG/1.5 ML	2	PA; ST
almotriptan malate oral tablet 12.5 mg, 6.25 mg	1	QL (18 per 30 days)
dihydroergotamine injection solution 1 mg/ml	1	
dihydroergotamine nasal spray, non-aerosol 0.5 mg/pump act. (4 mg/ml)	1	QL (8 per 30 days)
eletriptan oral tablet 20 mg, 40 mg	1	QL (18 per 30 days)
ELYXYB ORAL SOLUTION 120 MG/4.8 ML (25 MG/ML)	3	PA; ST
EMGALITY SUBCUTANEOUS PEN INJECTOR 120 MG/ML	2	PA; ST
EMGALITY SUBCUTANEOUS SYRINGE 120 MG/ML, 300 MG/3 ML (100 MG/ML X 3)	2	PA; ST
ERGOMAR SUBLINGUAL TABLET 2 MG	2	
ergotamine-caffeine oral tablet 1-100 mg	1	
FROVA ORAL TABLET 2.5 MG	3	QL (18 per 30 days)
frovatriptan oral tablet 2.5 mg	1	QL (18 per 30 days)
IMITREX ORAL TABLET 100 MG, 25 MG, 50 MG	3	QL (18 per 30 days)
IMITREX STATDOSE SUBCUTANEOUS PEN INJECTOR 4 MG/0.5 ML, 6 MG/0.5 ML	3	QL (8 per 30 days)
IMITREX STATDOSE REFILL SUBCUTANEOUS CARTRIDGE 4 MG/0.5 ML, 6 MG/0.5 ML	3	QL (8 per 30 days)
MAXALT ORAL TABLET 10 MG	3	QL (18 per 30 days)
MAXALT-MLT ORAL TABLET, DISINTEGRATING 10 MG	3	QL (18 per 30 days)
migergot rectal suppository 2-100 mg	1	
MIGRANAL NASAL SPRAY, NON-AEROSOL 0.5 MG/PUMP ACT. (4 MG/ML)	3	QL (8 per 30 days)
naratriptan oral tablet 1 mg, 2.5 mg	1	QL (18 per 30 days)
NURTEC ODT ORAL TABLET, DISINTEGRATING 75 MG	3	PA; ST; QL (8 per 30 days)

Drug Name	Tier	Requirements / Limits
ONZETRA XSAIL NASAL AEROSOL POWDR BREATH ACTIVATED 11 MG	3	ST; QL (16 per 30 days)
QULIPTA ORAL TABLET 10 MG	3	PA; ST; QL (180 per 30 days)
QULIPTA ORAL TABLET 30 MG	3	PA; ST; QL (60 per 30 days)
QULIPTA ORAL TABLET 60 MG	3	PA; ST; QL (30 per 30 days)
RELPAX ORAL TABLET 20 MG, 40 MG	3	QL (18 per 30 days)
REYVOW ORAL TABLET 100 MG, 50 MG	3	PA; ST; QL (8 per 30 days)
rizatriptan oral tablet 10 mg, 5 mg	1	QL (18 per 30 days)
rizatriptan oral tablet, disintegrating 10 mg, 5 mg	1	QL (18 per 30 days)
sumatriptan nasal spray, non-aerosol 20 mg/actuation, 5 mg/actuation	1	QL (18 per 30 days)
sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg	1	QL (18 per 30 days)
sumatriptan succinate subcutaneous cartridge 4 mg/0.5 ml, 6 mg/0.5 ml	1	QL (8 per 30 days)
sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml, 6 mg/0.5 ml	1	QL (8 per 30 days)
sumatriptan succinate subcutaneous solution 6 mg/0.5 ml	1	QL (8 per 30 days)
sumatriptan-naproxen oral tablet 85-500 mg	1	PA; ST; QL (18 per 30 days)
TOSYMRA NASAL SPRAY, NON-AEROSOL 10 MG/ACTUATION	3	QL (18 per 30 days)
TREXIMET ORAL TABLET 85-500 MG	3	PA; ST; QL (18 per 30 days)
TRUDHESA NASAL SPRAY, NON-AEROSOL 0.725 MG/PUMP ACT. (4 MG/ML)	3	PA
UBRELVY ORAL TABLET 100 MG, 50 MG	3	PA; ST; QL (10 per 30 days)
ZEMBRACE SYMTOUCH SUBCUTANEOUS PEN INJECTOR 3 MG/0.5 ML	3	ST; QL (8 per 30 days)
ZOLMITRIPTAN NASAL SPRAY, NON-AEROSOL 2.5 MG	3	
zolmitriptan nasal spray, non-aerosol 5 mg	1	PA
zolmitriptan oral tablet 2.5 mg, 5 mg	1	QL (18 per 30 days)
zolmitriptan oral tablet, disintegrating 2.5 mg, 5 mg	1	QL (18 per 30 days)
ZOMIG NASAL SPRAY, NON-AEROSOL 2.5 MG	3	ST
ZOMIG NASAL SPRAY, NON-AEROSOL 5 MG	3	ST; QL (18 per 30 days)
ZOMIG ORAL TABLET 2.5 MG, 5 MG	3	QL (18 per 30 days)

Drug Name	Tier	Requirements / Limits
MISCELLANEOUS NEUROLOGICAL THERAPY		
ADLARITY TRANSDERMAL PATCH WEEKLY 10 MG/24 HOUR, 5 MG/24 HOUR	3	PA; ST
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HR 10 MG	4	PA; ST; SP; LA; QL (60 per 30 days)
ARICEPT ORAL TABLET 10 MG, 23 MG, 5 MG	3	
AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG	4	PA; SP; LA
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG, 18 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG	4	PA; SP; LA
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	4	PA; SP; LA
dalfampridine oral tablet extended release 12 hr 10 mg	4	PA; SP; LA; QL (60 per 30 days)
DAYBUE ORAL SOLUTION 200 MG/ML	4	PA; SP
dichlorphenamide oral tablet 50 mg	4	PA; SP; LA; QL (120 per 30 days)
donepezil oral tablet 10 mg, 23 mg, 5 mg	1	
donepezil oral tablet, disintegrating 10 mg, 5 mg	1	
EVRYSDI ORAL RECON SOLN 0.75 MG/ML	4	PA; SP; LA; QL (3 per 30 days)
EXELON PATCH TRANSDERMAL PATCH 24 HOUR 13.3 MG/24 HOUR, 4.6 MG/24 HOUR, 9.5 MG/24 HOUR	3	
FIRDAPSE ORAL TABLET 10 MG	4	PA; ST; SP
galantamine oral capsule, ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg	1	
galantamine oral solution 4 mg/ml	1	
galantamine oral tablet 12 mg, 4 mg, 8 mg	1	
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG	3	PA; ST
INGREZZA INITIATION PK(TARDIV) ORAL CAPSULE, DOSE PACK 40 MG (7)- 80 MG (21)	4	PA; SP
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG	4	PA; SP
INGREZZA SPRINKLE ORAL CAPSULE, SPRINKLE 40 MG, 60 MG, 80 MG	4	PA; SP
KEVEYIS ORAL TABLET 50 MG	4	PA; ST; SP; QL (120 per 30 days)

Drug Name	Tier	Requirements / Limits
memantine oral capsule, sprinkle, er 24hr 14 mg, 21 mg, 28 mg, 7 mg	1	
memantine oral solution 2 mg/ml	1	
memantine oral tablet 10 mg, 5 mg	1	
MEMANTINE ORAL TABLETS, DOSE PACK 5-10 MG	2	
NAMENDA TITRATION PAK ORAL TABLETS, DOSE PACK 5-10 MG	2	
NAMENDA XR ORAL CAP, SPRINKLE, ER 24HR DOSE PACK 7-14-21-28 MG	3	
NAMENDA XR ORAL CAPSULE, SPRINKLE, ER 24HR 7 MG	3	
NAMZARIC ORAL CAP, SPRINKLE, ER 24HR DOSE PACK 7/14/21/28 MG-10 MG	3	
NAMZARIC ORAL CAPSULE, SPRINKLE, ER 24HR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG	3	
NUEDEXTA ORAL CAPSULE 20-10 MG	3	PA; QL (60 per 30 days)
ormalvi oral tablet 50 mg	4	PA; SP
RADICAVA ORS STARTER KIT SUSP ORAL SUSPENSION 105 MG/5 ML	4	PA; SP; LA
rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg	1	
rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour	1	
SKYCLARYS ORAL CAPSULE 50 MG	4	PA; SP
tetrabenazine oral tablet 12.5 mg, 25 mg	4	SP; LA
WAINUA SUBCUTANEOUS AUTO-INJECTOR 45 MG/0.8 ML	4	PA; SP; QL (30 per 30 days)
XENAZINE ORAL TABLET 12.5 MG, 25 MG	4	PA; ST; SP; LA
ZEPOSIA ORAL CAPSULE 0.92 MG	4	PA; ST; SP; LA; QL (30 per 30 days)
ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE, DOSE PACK 0.23 MG-0.46 MG - 0.92 MG (21)	4	PA; SP; LA; QL (1 per 365 days)
ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE, DOSE PACK 0.23 MG (4)- 0.46 MG (3)	4	PA; ST; SP; LA; QL (1 per 365 days)
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
AMRIX ORAL CAPSULE, EXTENDED RELEASE 24HR 15 MG, 30 MG	3	ST

Drug Name	Tier	Requirements / Limits
BACLOFEN ORAL SOLUTION 10 MG/5 ML (2 MG/ML)	3	PA
BACLOFEN ORAL SOLUTION 5 MG/5 ML	3	PA; ST
baclofen oral suspension 25 mg/5 ml (5 mg/ml)	1	
baclofen oral tablet 10 mg, 15 mg, 20 mg, 5 mg	1	
carisoprodol oral tablet 250 mg, 350 mg	1	
carisoprodol-aspirin oral tablet 200-325 mg	1	
carisoprodol-aspirin-codeine oral tablet 200-325-16 mg	1	PA; ST
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	1	ST
chlorzoxazone oral tablet 500 mg	1	
cyclobenzaprine oral capsule, extended release 24hr 15 mg, 30 mg	1	ST
cyclobenzaprine oral tablet 10 mg, 5 mg, 7.5 mg	1	
DANTRIUM ORAL CAPSULE 25 MG	3	
dantrolene oral capsule 100 mg, 25 mg, 50 mg	1	
FEXMID ORAL TABLET 7.5 MG	3	
FLEQSUVY ORAL SUSPENSION 25 MG/5 ML (5 MG/ML)	3	ST
LORZONE ORAL TABLET 375 MG, 750 MG	3	PA; ST
LYVISPAH ORAL GRANULES IN PACKET 10 MG, 20 MG, 5 MG	3	PA
meprobamate oral tablet 200 mg, 400 mg	1	
MESTINON ORAL SYRUP 60 MG/5 ML	3	
MESTINON ORAL TABLET 60 MG	3	
MESTINON TIMESPAN ORAL TABLET EXTENDED RELEASE 180 MG	3	
metaxalone oral tablet 400 mg, 800 mg	1	
methocarbamol oral tablet 1,000 mg, 500 mg, 750 mg	1	
NORGESIC FORTE ORAL TABLET 50-770-60 MG	3	
NORGESIC ORAL TABLET 25-385-30 MG	3	
orphenadrine citrate oral tablet extended release 100 mg	1	
orphenadrine-asa-caffeine oral tablet 25-385-30 mg	1	
orphengesic forte oral tablet 50-770-60 mg	1	

Drug Name	Tier	Requirements / Limits
OZOBAX DS ORAL SOLUTION 10 MG/5 ML (2 MG/ML)	3	PA; ST
OZOBAX ORAL SOLUTION 5 MG/5 ML	3	PA; ST
pyridostigmine bromide oral syrup 60 mg/5 ml	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	3	
pyridostigmine bromide oral tablet 60 mg	1	
pyridostigmine bromide oral tablet extended release 180 mg	1	
SOMA ORAL TABLET 250 MG, 350 MG	3	
tanlor oral tablet 1,000 mg	1	
tizanidine oral capsule 2 mg, 4 mg, 6 mg	1	
tizanidine oral tablet 2 mg, 4 mg	1	
vanadom oral tablet 350 mg	1	
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	3	
ZANAFLEX ORAL TABLET 4 MG	3	
ZILBRYSQ SUBCUTANEOUS SYRINGE 16.6 MG/0.416 ML, 23 MG/0.574 ML, 32.4 MG/0.81 ML	4	PA; ST; SP
NARCOTIC ANALGESICS		
acetaminophen-caff-dihydrocod oral capsule 320.5-30-16 mg	1	PA; ST
acetaminophen-codeine oral solution 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml	1	PA; ST
acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg	1	PA; ST
ascomp with codeine oral capsule 30-50-325-40 mg	1	PA; ST
BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG	3	PA; ST
buprenorphine hcl sublingual tablet 2 mg, 8 mg	1	
buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour	1	PA; ST
butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg, 50-325-40-30 mg	1	PA; ST
butalbital-acetaminophen oral capsule 50-300 mg	1	

Drug Name	Tier	Requirements / Limits
butalbital-acetaminophen oral tablet 50-300 mg, 50-325 mg	1	
butalbital-acetaminophen-caff oral capsule 50-300-40 mg, 50-325-40 mg	1	
butalbital-acetaminophen-caff oral tablet 50-325-40 mg	1	
butalbital-aspirin-caffeine oral capsule 50-325-40 mg	1	
butalbital-aspirin-caffeine oral tablet 50-325-40 mg	1	
BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HOUR, 15 MCG/HOUR, 20 MCG/HOUR, 5 MCG/HOUR, 7.5 MCG/HOUR	3	PA
codeine sulfate oral tablet 15 mg, 30 mg, 60 mg	1	PA; ST
codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg	1	PA; ST
DILAUDID ORAL LIQUID 1 MG/ML	3	PA; ST
DILAUDID ORAL TABLET 2 MG, 4 MG, 8 MG	3	PA; ST
diskets oral tablet, soluble 40 mg	1	PA; ST
DSUVIA SUBLINGUAL TABLET IN APPLICATOR 30 MCG	3	
endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	PA; ST
ESGIC ORAL TABLET 50-325-40 MG	3	
fentanyl citrate buccal lozenge on a handle 1,200 mcg, 200 mcg, 600 mcg	1	PA
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hour, 50 mcg/hr, 62.5 mcg/hour, 75 mcg/hr, 87.5 mcg/hour	1	PA; ST
FIORICET ORAL CAPSULE 50-300-40 MG	3	
FIORICET WITH CODEINE ORAL CAPSULE 50-300-40-30 MG	3	PA; ST
hydrocodone bitartrate oral capsule, oral only, er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	1	PA; ST; QL (60 per 30 days)
hydrocodone bitartrate oral tablet, oral only, ext.rel.24 hr 100 mg, 120 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	1	PA; ST; QL (60 per 30 days)
hydrocodone-acetaminophen oral solution 10-325 mg/15 ml, 10-325 mg/15 ml(15 ml)	1	PA; ST

Drug Name	Tier	Requirements / Limits
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	1	PA; ST
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	1	PA; ST
hydromorphone oral liquid 1 mg/ml	1	PA; ST
hydromorphone oral tablet 2 mg, 4 mg, 8 mg	1	PA; ST
hydromorphone oral tablet extended release 24 hr 12 mg, 16 mg, 32 mg, 8 mg	1	PA; ST; QL (60 per 30 days)
hydromorphone rectal suppository 3 mg	1	PA; ST
HYSINGLA ER ORAL TABLET, ORAL ONLY, EXT.REL.24 HR 100 MG, 120 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	3	PA; ST
levorphanol tartrate oral tablet 2 mg, 3 mg	1	PA; ST
meperidine oral solution 50 mg/5 ml	1	PA; ST
meperidine oral tablet 50 mg	1	PA; ST
methadone oral concentrate 10 mg/ml	1	PA; ST
methadone oral solution 10 mg/5 ml, 5 mg/5 ml	1	PA; ST
methadone oral tablet 10 mg, 5 mg	1	PA; ST
methadone oral tablet, soluble 40 mg	1	PA; ST
methadose oral concentrate 10 mg/ml	1	PA; ST
methadose oral tablet, soluble 40 mg	1	PA; ST
morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)	1	PA; ST
morphine oral capsule, er multiphase 24 hr 120 mg, 30 mg, 45 mg, 60 mg, 75 mg, 90 mg	1	PA; ST; QL (60 per 30 days)
morphine oral capsule, extend.release pellets 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg	1	PA; ST; QL (90 per 30 days)
morphine oral solution 10 mg/5 ml, 20 mg/5 ml (4 mg/ml)	1	PA; ST
morphine oral tablet 15 mg, 30 mg	1	PA; ST
morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg	1	PA; ST; QL (120 per 30 days)
morphine rectal suppository 10 mg, 20 mg, 30 mg, 5 mg	1	PA; ST
MS CONTIN ORAL TABLET EXTENDED RELEASE 100 MG, 15 MG, 200 MG, 30 MG, 60 MG	3	PA; ST; QL (120 per 30 days)
NALOCET ORAL TABLET 2.5-300 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
oxycodone oral capsule 5 mg	1	PA; ST
oxycodone oral concentrate 20 mg/ml	1	PA; ST
oxycodone oral solution 5 mg/5 ml	1	PA; ST
oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	PA; ST
OXYCODONE ORAL TABLET, ORAL ONLY 30 MG, 5 MG	3	PA; ST
OXYCODONE ORAL TABLET, ORAL ONLY, EXT.REL.12 HR 10 MG, 20 MG, 40 MG	3	PA; ST; QL (90 per 30 days)
OXYCODONE ORAL TABLET, ORAL ONLY, EXT.REL.12 HR 80 MG	3	PA; ST; QL (120 per 30 days)
oxycodone-acetaminophen oral solution 10-300 mg/5 ml, 5-325 mg/5 ml	1	PA; ST
oxycodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 2.5-300 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	1	PA; ST
OXYCONTIN ORAL TABLET, ORAL ONLY, EXT.REL.12 HR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG	2	PA; ST; QL (90 per 30 days)
OXYCONTIN ORAL TABLET, ORAL ONLY, EXT.REL.12 HR 60 MG, 80 MG	2	PA; ST; QL (120 per 30 days)
oxymorphone oral tablet 10 mg, 5 mg	1	PA; ST
oxymorphone oral tablet extended release 12 hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg	1	PA; ST; QL (90 per 30 days)
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	3	PA; ST
PRIMLEV ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG	3	PA; ST
PROLATE ORAL SOLUTION 10-300 MG/5 ML	3	PA; ST
prolate oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	1	PA; ST
ROXICODONE ORAL TABLET 15 MG, 30 MG	3	PA; ST
ROXYBOND ORAL TABLET, ORAL ONLY 10 MG, 15 MG, 30 MG, 5 MG	3	PA; ST
SEGLENTIS ORAL TABLET 44-56 MG	3	PA; ST
tencon oral tablet 50-325 mg	1	
TREZIX ORAL CAPSULE 320.5-30-16 MG	3	PA; ST
XTAMPZA ER ORAL CAP, SPRINKL, ER12HR (DONT CRUSH) 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
NON-NARCOTIC ANALGESICS		
adult aspirin regimen oral tablet, delayed release (dr/ec) 81 mg	1	ACA PV
ANAPROX DS ORAL TABLET 550 MG	3	ST
ARTHROTEC 50 ORAL TABLET, IR, DELAYED REL, BIPHASIC 50-200 MG-MCG	3	ST
ARTHROTEC 75 ORAL TABLET, IR, DELAYED REL, BIPHASIC 75-200 MG-MCG	3	ST
aspirin childrens oral tablet, chewable 81 mg	1	ACA PV
aspirin oral tablet, chewable 81 mg	1	ACA PV
aspirin oral tablet, delayed release (dr/ec) 81 mg	1	ACA PV
BAYER CHEWABLE ASPIRIN ORAL TABLET 81 MG	3	
bayer low dose aspirin oral tablet, delayed release (dr/ec) 81 mg	1	ACA PV
buprenorphine-naloxone sublingual film 12-3 mg	1	QL (60 per 30 days)
buprenorphine-naloxone sublingual film 2-0.5 mg, 4-1 mg, 8-2 mg	1	QL (90 per 30 days)
buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg	1	QL (90 per 30 days)
butorphanol nasal spray, non-aerosol 10 mg/ml	1	PA; ST; QL (2 per 30 days)
CAMBIA ORAL POWDER IN PACKET 50 MG	3	PA; ST
CELEBREX ORAL CAPSULE 100 MG, 200 MG, 400 MG, 50 MG	3	ST
celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg	1	
CONZIP ORAL CAPSULE, ER BIPHASE 24 HR 17-83 300 MG	3	PA; ST
CONZIP ORAL CAPSULE, ER BIPHASE 24 HR 25-75 100 MG, 200 MG	3	PA; ST
DAYPRO ORAL TABLET 600 MG	3	ST
DICLOFENAC EPOLAMINE TRANSDERMAL PATCH 12 HOUR 1.3 %	3	ST
diclofenac potassium oral capsule 25 mg	1	ST
diclofenac potassium oral powder in packet 50 mg	1	
diclofenac potassium oral tablet 25 mg, 50 mg	1	
diclofenac sodium oral tablet extended release 24 hr 100 mg	1	

Drug Name	Tier	Requirements / Limits
diclofenac sodium oral tablet, delayed release (dr/ec) 25 mg, 50 mg, 75 mg	1	
diclofenac sodium topical drops 1.5 %	1	
diclofenac sodium topical solution in metered-dose pump 20 mg/gram /actuation(2 %)	1	
DICLOFENAC SUBMICRONIZED ORAL CAPSULE 35 MG	3	ST
diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic 50-200 mg-mcg, 75-200 mg-mcg	1	
diflunisal oral tablet 500 mg	1	
DISALCID ORAL TABLET 500 MG, 750 MG	3	
DOLOBID ORAL TABLET 250 MG	3	
DUEXIS ORAL TABLET 800-26.6 MG	3	ST
EC-NAPROSYN ORAL TABLET, DELAYED RELEASE (DR/EC) 375 MG, 500 MG	3	ST
ecotrin low strength oral tablet, delayed release (dr/ec) 81 mg	1	ACA PV
etodolac oral capsule 200 mg, 300 mg	1	
etodolac oral tablet 400 mg, 500 mg	1	
etodolac oral tablet extended release 24 hr 400 mg, 500 mg, 600 mg	1	
FENOPROFEN ORAL CAPSULE 200 MG	3	ST
fenoprofen oral capsule 400 mg	1	ST
fenoprofen oral tablet 600 mg	1	
FLECTOR TRANSDERMAL PATCH 12 HOUR 1.3 %	3	ST
flurbiprofen oral tablet 100 mg	1	
ibu oral tablet 400 mg, 600 mg, 800 mg	1	
ibuprofen oral suspension 100 mg/5 ml	1	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ibuprofen-famotidine oral tablet 800-26.6 mg	1	PA
INDOCIN ORAL SUSPENSION 25 MG/5 ML	3	ST
INDOCIN RECTAL SUPPOSITORY 50 MG	3	
indomethacin oral capsule 25 mg, 50 mg	1	
indomethacin oral capsule, extended release 75 mg	1	
indomethacin oral suspension 25 mg/5 ml	1	
indomethacin rectal suppository 50 mg	1	

Drug Name	Tier	Requirements / Limits
ketoprofen oral capsule 25 mg, 50 mg, 75 mg	1	
ketoprofen oral capsule, ext rel. pellets 24 hr 200 mg	1	
ketorolac injection solution 15 mg/ml, 30 mg/ml (1 ml)	1	
ketorolac injection syringe 30 mg/ml	1	
ketorolac intramuscular solution 60 mg/2 ml	1	
ketorolac oral tablet 10 mg	1	QL (20 per 5 days)
kiprofen oral capsule 25 mg	1	
KLOXXADO NASAL SPRAY, NON-AEROSOL 8 MG/ACTUATION	3	
LICART TRANSDERMAL PATCH 24 HOUR 1.3 %	3	ST
LODINE ORAL TABLET 400 MG	3	ST
lofena oral tablet 25 mg	1	ST
lofexidine oral tablet 0.18 mg	1	PA; ST
LOTREXONE ORAL CAPSULE 1.5 MG, 4.5 MG	3	
LUCEMYRA ORAL TABLET 0.18 MG	3	PA; ST
meclofenamate oral capsule 100 mg, 50 mg	1	
mefenamic acid oral capsule 250 mg	1	
MELOXICAM ORAL SUSPENSION 7.5 MG/5 ML	3	PA; ST
meloxicam oral tablet 15 mg, 7.5 mg	1	
meloxicam submicronized oral capsule 10 mg, 5 mg	1	
nabumetone oral tablet 500 mg, 750 mg	1	
NALFON ORAL CAPSULE 400 MG	3	ST
NALFON ORAL TABLET 600 MG	3	ST
naloxone injection solution 0.4 mg/ml	1	
naloxone injection syringe 0.4 mg/ml, 1 mg/ml	1	
NALTREX ORAL CAPSULE 1.5 MG	3	
NALTREX ORAL CAPSULE 4.5 MG	3	PA
naltrexone oral tablet 50 mg	1	
NAPRELAN CR ORAL TABLET, ER MULTIPHASE 24 HR 375 MG, 500 MG, 750 MG	3	ST

Drug Name	Tier	Requirements / Limits
NAPROSYN ORAL SUSPENSION 125 MG/5 ML	3	ST
NAPROSYN ORAL TABLET 500 MG	3	ST
naproxen oral suspension 125 mg/5 ml	1	
naproxen oral tablet 250 mg, 375 mg, 500 mg	1	
naproxen oral tablet, delayed release (dr/ec) 375 mg, 500 mg	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
naproxen sodium oral tablet, er multiphase 24 hr 375 mg, 500 mg	1	
naproxen sodium oral tablet, er multiphase 24 hr 750 mg	1	PA; ST
naproxen-esomeprazole oral tablet, ir, delayed rel, biphasic 375-20 mg, 500-20 mg	1	ST
NARCAN NASAL SPRAY, NON-AEROSOL 4 MG/ACTUATION	3	
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG	3	PA; ST; QL (60 per 30 days)
NUCYNTA ORAL TABLET 100 MG, 50 MG, 75 MG	3	PA; ST; QL (181 per 30 days)
OPVEE NASAL SPRAY, NON-AEROSOL 2.7 MG/ACTUATION	3	PA
oxaprozin oral tablet 600 mg	1	
PENNSAID TOPICAL SOLUTION IN METERED-DOSE PUMP 20 MG/GRAM /ACTUATION (2 %)	3	PA; ST
pentazocine-naloxone oral tablet 50-0.5 mg	1	PA; ST
piroxicam oral capsule 10 mg, 20 mg	1	
QDOLO ORAL SOLUTION 5 MG/ML	3	PA; ST
RELAFEN DS ORAL TABLET 1, 000 MG	3	ST
REXTOVY NASAL SPRAY, NON-AEROSOL 4 MG/ACTUATION	3	
salsalate oral tablet 500 mg, 750 mg	1	
SPRIX NASAL SPRAY, NON-AEROSOL 15.75 MG/SPRAY	4	PA; ST; SP; QL (5 per 30 days)
st joseph aspirin oral tablet, chewable 81 mg	1	ACA PV
st. joseph aspirin oral tablet, delayed release (dr/ec) 81 mg	1	ACA PV

Drug Name	Tier	Requirements / Limits
SUBOXONE SUBLINGUAL FILM 12-3 MG	3	QL (60 per 30 days)
SUBOXONE SUBLINGUAL FILM 2-0.5 MG, 4-1 MG, 8-2 MG	3	QL (90 per 30 days)
sulindac oral tablet 150 mg, 200 mg	1	
TOLECTIN 600 ORAL TABLET 600 MG	3	ST
tolmetin oral capsule 400 mg	1	
TRAMADOL ORAL CAPSULE, ER BIPHASE 24 HR 17-83 300 MG	3	PA; ST
TRAMADOL ORAL CAPSULE, ER BIPHASE 24 HR 25-75 100 MG, 200 MG	3	PA; ST
TRAMADOL ORAL SOLUTION 5 MG/ML	3	PA; ST
TRAMADOL ORAL TABLET 100 MG, 25 MG	3	PA; ST
tramadol oral tablet 50 mg	1	PA; ST
tramadol oral tablet extended release 24 hr 100 mg, 200 mg, 300 mg	1	PA; ST
tramadol oral tablet, er multiphase 24 hr 100 mg, 200 mg, 300 mg	1	PA; ST
tramadol-acetaminophen oral tablet 37.5-325 mg	1	PA; ST
VIMOVO ORAL TABLET, IR, DELAYED REL, BIPHASIC 375-20 MG, 500-20 MG	3	ST
VIVITROL INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 380 MG	4	SP
VIVLODEX ORAL CAPSULE 10 MG, 5 MG	3	
ZIMHI INJECTION SYRINGE 5 MG/0.5 ML	3	PA
ZIPSOR ORAL CAPSULE 25 MG	3	ST
ZORVOLEX ORAL CAPSULE 18 MG, 35 MG	3	ST
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 1.4-0.36 MG, 2.9-0.71 MG, 5.7-1.4 MG	3	QL (90 per 30 days)
ZUBSOLV SUBLINGUAL TABLET 11.4-2.9 MG	3	QL (30 per 30 days)
ZUBSOLV SUBLINGUAL TABLET 8.6-2.1 MG	3	QL (60 per 30 days)
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 300 MG, 400 MG	3	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 300 MG, 400 MG	3	

Drug Name	Tier	Requirements / Limits
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET WITH SENSOR AND STRIP 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG	3	PA; ST
ABILIFY MYCITE STARTER KIT ORAL TABLET WITH SENSOR, STRIP, POD 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG	3	PA; ST
ABILIFY ORAL TABLET 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG	3	ST
ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG	3	PA; ST
ADDERALL XR ORAL CAPSULE, EXTENDED RELEASE 24HR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 5 MG	3	PA; ST
ADDYI ORAL TABLET 100 MG	3	PA
ADZENYS XR-ODT ORAL TABLET, DISINTEG ER BIPHASE 24H 12.5 MG, 15.7 MG, 18.8 MG, 3.1 MG, 6.3 MG, 9.4 MG	3	PA; ST
alprazolam intensol oral concentrate 1 mg/ml	1	
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg	1	
alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg, 3 mg	1	
alprazolam oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg	1	
AMBIEN CR ORAL TABLET, EXT RELEASE MULTIPHASE 12.5 MG, 6.25 MG	3	PA; ST
AMBIEN ORAL TABLET 10 MG, 5 MG	3	PA; ST
amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	1	
amitriptyline-chlordiazepoxide oral tablet 12.5-5 mg, 25-10 mg	1	
amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg	1	
amphetamine sulfate oral tablet 10 mg, 5 mg	1	
ANAFRANIL ORAL CAPSULE 25 MG, 50 MG, 75 MG	3	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HR 174 MG, 348 MG, 522 MG	3	PA; ST
APTENSIO XR ORAL CAP, ER SPRINKLE, BIPHASIC 40-60 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
aripiprazole oral solution 1 mg/ml	1	
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg	1	
aripiprazole oral tablet, disintegrating 10 mg, 15 mg	1	
ARISTADA INITIO INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 675 MG/2.4 ML	3	
ARISTADA INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 1,064 MG/3.9 ML, 441 MG/1.6 ML, 662 MG/2.4 ML, 882 MG/3.2 ML	3	
armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg	1	
asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg	1	
ATIVAN ORAL TABLET 0.5 MG, 1 MG, 2 MG	3	
atomoxetine oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg	1	
AUVELITY ORAL TABLET, IR AND ER, BIPHASIC 45-105 MG	3	PA; ST
AZSTARYS ORAL CAPSULE 26.1 MG- 5.2 MG, 39.2 MG- 7.8 MG, 52.3 MG- 10.4 MG	3	PA; ST
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	3	PA; ST
bupropion hcl oral tablet 100 mg, 75 mg	1	
bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg	1	
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	3	PA; ST
bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg	1	
buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	1	
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG	3	ST
CELEXA ORAL TABLET 10 MG, 20 MG, 40 MG	3	PA; ST
chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg	1	

Drug Name	Tier	Requirements / Limits
chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml	1	
chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg	1	
CITALOPRAM ORAL CAPSULE 30 MG	3	PA; ST
citalopram oral solution 10 mg/5 ml	1	
citalopram oral tablet 10 mg, 20 mg, 40 mg	1	
clomipramine oral capsule 25 mg, 50 mg, 75 mg	1	
clonidine hcl oral tablet extended release 12 hr 0.1 mg	1	
clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg	1	
clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg	1	
clozapine oral tablet, disintegrating 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg	1	
CLOZARIL ORAL TABLET 100 MG, 25 MG	3	ST
COBENFY ORAL CAPSULE 125-30 MG, 50-20 MG	3	PA; QL (60 per 30 days)
COBENFY STARTER PACK ORAL CAPSULE, DOSE PACK 50 MG-20 MG /100 MG-20 MG	3	PA; QL (60 per 30 days)
CONCERTA ORAL TABLET EXTENDED RELEASE 24HR 18 MG, 27 MG, 36 MG, 54 MG	3	PA; ST
COTEMPLA XR-ODT ORAL TABLET, DISINTEG ER BIPHASE 24H 17.3 MG, 25.9 MG, 8.6 MG	3	PA; ST
CYMBALTA ORAL CAPSULE, DELAYED RELEASE (DR/EC) 20 MG, 30 MG, 60 MG	3	PA; ST
DAYTRANA TRANSDERMAL PATCH 24 HOUR 10 MG/9 HR, 15 MG/9 HR, 20 MG/9 HR, 30 MG/9 HR	3	PA; ST
DAYVIGO ORAL TABLET 10 MG, 5 MG	3	PA; ST
desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	1	
DESOXYN ORAL TABLET 5 MG	3	PA; ST
DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24 HR 100 MG, 50 MG	3	PA; ST
desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg	1	

Drug Name	Tier	Requirements / Limits
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG	3	PA; ST
dexmethylphenidate oral capsule, er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg	1	
dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg	1	
dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg, 5 mg	1	
dextroamphetamine sulfate oral solution 5 mg/5 ml	1	
dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 30 mg, 5 mg, 7.5 mg	1	
dextroamphetamine-amphetamine oral capsule, er triphasic 24 hr 12.5 mg, 25 mg, 37.5 mg, 50 mg	1	
dextroamphetamine-amphetamine oral capsule, extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg	1	
dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg	1	
diazepam intensol oral concentrate 5 mg/ml	1	
diazepam oral solution 5 mg/5 ml (1 mg/ml)	1	
diazepam oral tablet 10 mg, 2 mg, 5 mg	1	
DORAL ORAL TABLET 15 MG	3	
doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	1	
doxepin oral concentrate 10 mg/ml	1	
doxepin oral tablet 3 mg, 6 mg	1	
DRIZALMA ORAL CAPSULE, DELAYED REL SPRINKLE 20 MG, 30 MG, 40 MG, 60 MG	3	PA; ST
duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 40 mg, 60 mg	1	
DYANAVEL XR ORAL SUSPEN, IR - ER, BIPHASIC 24HR 2.5 MG/ML	3	PA; ST
DYANAVEL XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10 MG, 15 MG, 20 MG, 5 MG	3	PA; ST
EDLUAR SUBLINGUAL TABLET 10 MG, 5 MG	3	PA; ST
EFFEXOR XR ORAL CAPSULE, EXTENDED RELEASE 24HR 150 MG, 37.5 MG, 75 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	3	
ergoloid oral tablet 1 mg	1	
escitalopram oxalate oral solution 5 mg/5 ml	1	
escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg	1	
estazolam oral tablet 1 mg, 2 mg	1	
eszopiclone oral tablet 1 mg, 2 mg, 3 mg	1	
EVEKEO ORAL TABLET 10 MG, 5 MG	3	PA; ST
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	3	ST
FANAPT ORAL TABLETS, DOSE PACK 1MG (2)-2MG (2)- 4MG (2)-6MG (2)	3	ST
FETZIMA ORAL CAPSULE, EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26)	3	PA; ST
FETZIMA ORAL CAPSULE, EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	3	PA; ST
fluoxetine oral capsule 10 mg, 20 mg, 40 mg	1	
fluoxetine oral capsule, delayed release (dr/ec) 90 mg	1	
fluoxetine oral solution 20 mg/5 ml (4 mg/ml)	1	
fluoxetine oral tablet 10 mg, 20 mg	1	
fluoxetine oral tablet 60 mg	1	PA; ST
fluphenazine hcl oral concentrate 5 mg/ml	1	
fluphenazine hcl oral elixir 2.5 mg/5 ml	1	
fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg	1	
flurazepam oral capsule 15 mg, 30 mg	1	
fluvoxamine oral capsule, extended release 24hr 100 mg, 150 mg	1	
fluvoxamine oral tablet 100 mg, 25 mg, 50 mg	1	
FOCALIN ORAL TABLET 10 MG, 2.5 MG, 5 MG	3	PA; ST
FOCALIN XR ORAL CAPSULE, ER BIPHASIC 50-50 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG, 5 MG	3	PA; ST
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
GEODON INTRAMUSCULAR RECON SOLN 20 MG/ML (FINAL CONC.)	3	
GEODON ORAL CAPSULE 20 MG, 40 MG, 60 MG, 80 MG	3	ST
guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg	1	
HALCION ORAL TABLET 0.25 MG	3	
HALDOL DECANOATE INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/ML	3	
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	1	
haloperidol lactate injection solution 5 mg/ml	1	
haloperidol lactate intramuscular syringe 5 mg/ml	1	
haloperidol lactate oral concentrate 2 mg/ml	1	
haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg	1	
HETLIOZ LQ ORAL SUSPENSION 4 MG/ML	4	PA; ST; SP; LA
HETLIOZ ORAL CAPSULE 20 MG	4	PA; ST; SP; LA
IGALMI SUBLINGUAL FILM 120 MCG, 180 MCG	3	PA
imipramine hcl oral tablet 10 mg, 25 mg, 50 mg	1	
imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg	1	
INTUNIV ER ORAL TABLET EXTENDED RELEASE 24 HR 1 MG, 2 MG, 3 MG, 4 MG	3	PA; ST
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,092 MG/3.5 ML, 1,560 MG/5 ML	3	
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 3 MG, 6 MG, 9 MG	3	ST
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML, 156 MG/ML, 234 MG/1.5 ML, 39 MG/0.25 ML, 78 MG/0.5 ML	3	
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML, 410 MG/1.32 ML, 546 MG/1.75 ML, 819 MG/2.63 ML	3	
JORNAY PM ORAL CAPSULE, DEL REL, EXT REL SPRINK 100 MG, 20 MG, 40 MG, 60 MG, 80 MG	3	PA; ST
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
LEXAPRO ORAL TABLET 10 MG, 20 MG, 5 MG	3	PA; ST
lisdexamfetamine oral capsule 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	1	
lisdexamfetamine oral tablet, chewable 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	1	
lithium carbonate oral capsule 150 mg, 300 mg, 600 mg	1	
lithium carbonate oral tablet 300 mg	1	
lithium carbonate oral tablet extended release 300 mg, 450 mg	1	
lithium citrate oral solution 8 meq/5 ml	1	
LITHOBID ORAL TABLET EXTENDED RELEASE 300 MG	3	
lorazepam intensol oral concentrate 2 mg/ml	1	
lorazepam oral concentrate 2 mg/ml	1	
lorazepam oral tablet 0.5 mg, 1 mg, 2 mg	1	
LOREEV XR ORAL CAPSULE, EXTENDED RELEASE 24HR 1 MG, 1.5 MG, 2 MG, 3 MG	3	
loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg	1	
LUMRYZ STARTER PACK ORAL GRANULES ER PACKET, DOSE PACK 4.5-6-7.5 GRAM	4	PA; SP
LUNESTA ORAL TABLET 1 MG, 2 MG, 3 MG	3	PA; ST
lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg	1	
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	3	ST
MARPLAN ORAL TABLET 10 MG	3	
METADATE CD ORAL CAPSULE, ER BIPHASIC 30-70 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG	3	PA; ST
methamphetamine oral tablet 5 mg	1	
METHYLIN ORAL SOLUTION 10 MG/5 ML, 5 MG/5 ML	3	PA; ST
methylphenidate hcl oral cap, er sprinkle, biphasic 40-60 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	1	
methylphenidate hcl oral capsule, er biphasic 30-70 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	1	

Drug Name	Tier	Requirements / Limits
methylphenidate hcl oral capsule, er biphasic 50-50 10 mg, 20 mg, 30 mg, 40 mg, 60 mg	1	
methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml	1	
methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg	1	
methylphenidate hcl oral tablet extended release 10 mg, 20 mg	1	
methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg	1	
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 45 MG, 63 MG, 72 MG	3	PA; ST
methylphenidate hcl oral tablet, chewable 10 mg, 2.5 mg, 5 mg	1	
methylphenidate transdermal patch 24 hour 10 mg/9 hr, 15 mg/9 hr, 20 mg/9 hr, 30 mg/9 hr	1	
midazolam oral syrup 2 mg/ml	1	
mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg	1	
mirtazapine oral tablet, disintegrating 15 mg, 30 mg, 45 mg	1	
MKO (MIDAZOLAM-KETAMINE-ONDAN) SUBLINGUAL TROCHE 3-25-2 MG	3	
modafinil oral tablet 100 mg, 200 mg	1	
molindone oral tablet 10 mg, 25 mg, 5 mg	1	
MYDAYIS ORAL CAPSULE, ER TRIPHASIC 24 HR 12.5 MG, 25 MG, 37.5 MG, 50 MG	3	PA; ST
NARDIL ORAL TABLET 15 MG	3	
nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	1	
nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg	1	
nortriptyline oral solution 10 mg/5 ml	1	
NUPLAZID ORAL CAPSULE 34 MG	4	PA; SP; LA
NUPLAZID ORAL TABLET 10 MG	4	PA; SP; LA
NUVIGIL ORAL TABLET 150 MG, 200 MG, 250 MG, 50 MG	3	
olanzapine intramuscular recon soln 10 mg	1	

Drug Name	Tier	Requirements / Limits
olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	1	
olanzapine oral tablet, disintegrating 10 mg, 15 mg, 20 mg, 5 mg	1	
olanzapine-fluoxetine oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg	1	
oxazepam oral capsule 10 mg, 15 mg, 30 mg	1	
paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 6 mg, 9 mg	1	
PAMELOR ORAL CAPSULE 10 MG, 25 MG, 50 MG, 75 MG	3	
PARNATE ORAL TABLET 10 MG	3	
paroxetine hcl oral suspension 10 mg/5 ml	1	
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	1	
paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg	1	
paroxetine mesylate (menop.sym) oral capsule 7.5 mg	1	
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR 12.5 MG, 25 MG, 37.5 MG	3	PA; ST
PAXIL ORAL SUSPENSION 10 MG/5 ML	3	PA; ST
PAXIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG	3	PA; ST
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	1	
perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	1	
PERSERIS SUBCUTANEOUS SUSPENSION, EXTENDED REL SYRING 120 MG, 90 MG	3	
phenelzine oral tablet 15 mg	1	
pimozide oral tablet 1 mg, 2 mg	1	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HR 100 MG, 25 MG, 50 MG	3	PA; ST
procentra oral solution 5 mg/5 ml	1	
protriptyline oral tablet 10 mg, 5 mg	1	
PROVIGIL ORAL TABLET 100 MG, 200 MG	3	
PROZAC ORAL CAPSULE 10 MG, 20 MG, 40 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
QELBREE ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG	3	PA; ST; QL (120 per 30 days)
QELBREE ORAL CAPSULE, EXTENDED RELEASE 24HR 150 MG	3	PA; ST; QL (80 per 30 days)
QELBREE ORAL CAPSULE, EXTENDED RELEASE 24HR 200 MG	3	PA; ST; QL (60 per 30 days)
QUAZEPAM ORAL TABLET 15 MG	3	
quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	1	
QUETIAPINE ORAL TABLET 150 MG	3	ST
quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg	1	
QUILLICHEW ER ORAL TABLET, CHEW, IR-ER.BIPHASIC24HR 20 MG, 30 MG, 40 MG	3	PA; ST
QUILLIVANT XR ORAL SUSPENSION, EXT REL 24HR, RECON 5 MG/ML (25 MG/5 ML)	3	PA; ST
QUVIVIQ ORAL TABLET 25 MG, 50 MG	3	PA; ST
ramelteon oral tablet 8 mg	1	
RELEXXII ORAL TABLET EXTENDED RELEASE 24HR 18 MG, 27 MG, 36 MG, 54 MG	3	
RELEXXII ORAL TABLET EXTENDED RELEASE 24HR 45 MG, 63 MG, 72 MG	3	PA; ST
REMERON ORAL TABLET 15 MG, 30 MG	3	PA; ST
REMERON SOLTAB ORAL TABLET, DISINTEGRATING 15 MG, 30 MG, 45 MG	3	PA; ST
RESTORIL ORAL CAPSULE 15 MG, 22.5 MG, 30 MG, 7.5 MG	3	
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	PA; ST
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 12.5 MG/2 ML, 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML	3	
RISPERDAL ORAL SOLUTION 1 MG/ML	3	ST
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	ST
risperidone microspheres intramuscular suspension, extended rel recon 12.5 mg/2 ml, 25 mg/2 ml, 37.5 mg/2 ml, 50 mg/2 ml	1	
risperidone oral solution 1 mg/ml	1	

Drug Name	Tier	Requirements / Limits
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	1	
risperidone oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	1	
RITALIN LA ORAL CAPSULE, ER BIPHASIC 50-50 10 MG, 20 MG, 30 MG, 40 MG	3	PA; ST
RITALIN ORAL TABLET 10 MG, 20 MG, 5 MG	3	PA; ST
ROZEREM ORAL TABLET 8 MG	3	PA; ST
SAPHRIS SUBLINGUAL TABLET 10 MG, 2.5 MG, 5 MG	3	ST
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR	3	ST
SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG	3	ST
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 200 MG, 300 MG, 400 MG, 50 MG	3	PA; ST
SERTRALINE ORAL CAPSULE 150 MG, 200 MG	3	PA; ST
sertraline oral concentrate 20 mg/ml	1	
sertraline oral tablet 100 mg, 25 mg, 50 mg	1	
SILENOR ORAL TABLET 3 MG, 6 MG	3	PA; ST
SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	4	PA; ST; SP; QL (3 per 30 days)
SPRAVATO NASAL SPRAY, NON-AEROSOL 56 MG (28 MG X 2), 84 MG (28 MG X 3)	4	PA; ST; SP
STRATTERA ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG	3	PA; ST
SUNOSI ORAL TABLET 150 MG	3	PA; ST; QL (30 per 30 days)
SUNOSI ORAL TABLET 75 MG	3	PA; ST; QL (60 per 30 days)
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	3	PA; ST
tasimelteon oral capsule 20 mg	4	PA; SP; LA
temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg	1	
thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg	1	
thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg	1	
tranylcypromine oral tablet 10 mg	1	

Drug Name	Tier	Requirements / Limits
trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg	1	
triazolam oral tablet 0.125 mg, 0.25 mg	1	
trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg	1	
trimipramine oral capsule 100 mg, 25 mg, 50 mg	1	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	3	PA; ST
VALIUM ORAL TABLET 10 MG, 2 MG, 5 MG	3	
VENLAFAXINE BESYLATE ORAL TABLET EXTENDED RELEASE 24HR 112.5 MG	3	PA; ST
venlafaxine oral capsule, extended release 24hr 150 mg, 37.5 mg, 75 mg	1	
venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	1	
venlafaxine oral tablet extended release 24hr 150 mg, 225 mg, 37.5 mg, 75 mg	1	
VERSACLOZ ORAL SUSPENSION 50 MG/ML	3	ST
VIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG	3	PA; ST
vilazodone oral tablet 10 mg, 20 mg, 40 mg	1	
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	3	ST
VYLEESI SUBCUTANEOUS AUTO-INJECTOR 1.75 MG/0.3 ML	4	PA; SP
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG	3	PA; ST
VYVANSE ORAL TABLET, CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG	3	PA; ST
WAKIX ORAL TABLET 17.8 MG, 4.45 MG	4	PA; ST; SP; LA; QL (60 per 30 days)
WELLBUTRIN SR ORAL TABLET SUSTAINED-RELEASE 12 HR 100 MG, 150 MG, 200 MG	3	PA; ST
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 300 MG	3	PA; ST
XANAX ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG	3	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HR 0.5 MG, 1 MG, 3 MG	3	

Drug Name	Tier	Requirements / Limits
XELSTRYM TRANSDERMAL PATCH 24 HOUR 13.5 MG/9 HOUR, 18 MG/9 HOUR, 4.5 MG/9 HOUR, 9 MG/9 HOUR	3	PA; ST
XYREM ORAL SOLUTION 500 MG/ML	4	PA; ST; SP; QL (3 per 30 days)
XYWAV ORAL SOLUTION 0.5 GRAM/ML	4	PA; ST; SP; QL (3 per 30 days)
zaleplon oral capsule 10 mg, 5 mg	1	
zenzedi oral tablet 10 mg, 5 mg	1	PA; ST
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	PA; ST
ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg	1	
ziprasidone mesylate intramuscular recon soln 20 mg/ml (final conc.)	1	
ZOLOFT ORAL CONCENTRATE 20 MG/ML	3	PA; ST
ZOLOFT ORAL TABLET 100 MG, 25 MG, 50 MG	3	PA; ST
zolpidem oral tablet 10 mg, 5 mg	1	
zolpidem oral tablet, ext release multiphase 12.5 mg, 6.25 mg	1	
zolpidem sublingual tablet 1.75 mg, 3.5 mg	1	
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG, 30 MG	4	PA; SP; QL (14 per 30 days)
ZYPREXA INTRAMUSCULAR RECON SOLN 10 MG	3	ST
ZYPREXA ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG	3	ST
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 210 MG, 300 MG, 405 MG	3	
ZYPREXA ZYDIS ORAL TABLET, DISINTEGRATING 10 MG, 15 MG, 20 MG, 5 MG	3	ST
CARDIOVASCULAR, HYPERTENSION & LIPIDS		
ANTIARRHYTHMIC AGENTS		
amiodarone oral tablet 100 mg, 200 mg, 400 mg	1	
BETAPACE AF ORAL TABLET 120 MG, 160 MG, 80 MG	3	
BETAPACE ORAL TABLET 120 MG, 160 MG, 240 MG, 80 MG	3	

Drug Name	Tier	Requirements / Limits
disopyramide phosphate oral capsule 100 mg, 150 mg	1	
dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	1	
flecainide oral tablet 100 mg, 150 mg, 50 mg	1	
mexiletine oral capsule 150 mg, 200 mg, 250 mg	1	
MULTAQ ORAL TABLET 400 MG	3	
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 100 MG, 150 MG	3	
NORPACE ORAL CAPSULE 100 MG, 150 MG	3	
pacerone oral tablet 100 mg, 200 mg, 400 mg	1	
propafenone oral capsule, extended release 12 hr 225 mg, 325 mg, 425 mg	1	
propafenone oral tablet 150 mg, 225 mg, 300 mg	1	
quinidine gluconate oral tablet extended release 324 mg	1	
quinidine sulfate oral tablet 200 mg, 300 mg	1	
sotalol af oral tablet 120 mg, 160 mg, 80 mg	1	
sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg	1	
SOTYLIZE ORAL SOLUTION 5 MG/ML	3	
TIKOSYN ORAL CAPSULE 125 MCG, 250 MCG, 500 MCG	3	
ANTIHYPERTENSIVE THERAPY		
ACCUPRIL ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG	3	ST
ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	3	ST
acebutolol oral capsule 200 mg, 400 mg	1	
ALDACTONE ORAL TABLET 100 MG, 25 MG, 50 MG	3	
aliskiren oral tablet 150 mg, 300 mg	1	
ALTACE ORAL CAPSULE 1.25 MG, 10 MG, 2.5 MG, 5 MG	3	ST
amiloride oral tablet 5 mg	1	
amiloride-hydrochlorothiazide oral tablet 5-50 mg	1	
amlodipine oral tablet 10 mg, 2.5 mg, 5 mg	1	
amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	1	

Drug Name	Tier	Requirements / Limits
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg	1	
amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg	1	
amlodipine-valsartan-hcthiazid oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg	1	
ATACAND HCT ORAL TABLET 16-12.5 MG, 32-12.5 MG, 32-25 MG	3	ST
ATACAND ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG	3	ST
atenolol oral tablet 100 mg, 25 mg, 50 mg	1	
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	1	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	3	ST
AVAPRO ORAL TABLET 150 MG, 300 MG, 75 MG	3	ST
AZOR ORAL TABLET 10-20 MG, 10-40 MG, 5-20 MG, 5-40 MG	3	ST
benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	1	
BENICAR HCT ORAL TABLET 20-12.5 MG, 40-12.5 MG, 40-25 MG	3	ST
BENICAR ORAL TABLET 20 MG, 40 MG, 5 MG	3	ST
betaxolol oral tablet 10 mg, 20 mg	1	
BIDIL ORAL TABLET 20-37.5 MG	3	
bisoprolol fumarate oral tablet 10 mg, 5 mg	1	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	1	
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	1	
BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG	3	
candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg	1	
candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg	1	
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	1	

Drug Name	Tier	Requirements / Limits
captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	1	
CARDIZEM CD ORAL CAPSULE, EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	3	
CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG, 8 MG	3	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR 4 MG, 8 MG	3	
CAROSPIR ORAL SUSPENSION 25 MG/5 ML	3	PA
cartia xt oral capsule, extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg	1	
carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg	1	
carvedilol phosphate oral capsule, er multiphase 24 hr 10 mg, 20 mg, 40 mg, 80 mg	1	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY 0.1 MG/24 HR	3	
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY 0.2 MG/24 HR	3	
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY 0.3 MG/24 HR	3	
chlorthalidone oral tablet 25 mg, 50 mg	1	
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	1	
CLONIDINE HCL ORAL TABLET EXTENDED RELEASE 24 HR 0.17 MG	3	
clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr	1	
CONJUPRI ORAL TABLET 2.5 MG, 5 MG	3	
CONSENSI ORAL TABLET 10-200 MG, 2.5-200 MG, 5-200 MG	3	ST
COREG CR ORAL CAPSULE, ER MULTIPHASE 24 HR 10 MG, 20 MG, 40 MG, 80 MG	3	
COREG ORAL TABLET 12.5 MG, 25 MG, 3.125 MG, 6.25 MG	3	

Drug Name	Tier	Requirements / Limits
COZAAR ORAL TABLET 100 MG, 25 MG, 50 MG	3	ST
DEMSER ORAL CAPSULE 250 MG	3	
DIBENZYLINE ORAL CAPSULE 10 MG	3	
diltiazem hcl oral capsule, ext.rel 24h degradable 120 mg, 180 mg, 240 mg	1	
diltiazem hcl oral capsule, extended release 12 hr 120 mg, 60 mg, 90 mg	1	
diltiazem hcl oral capsule, extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1	
diltiazem hcl oral capsule, extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	1	
diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg	1	
diltiazem hcl oral tablet extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1	
dilt-xr oral capsule, ext.rel 24h degradable 120 mg, 180 mg, 240 mg	1	
DIOVAN HCT ORAL TABLET 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG	3	ST
DIOVAN ORAL TABLET 160 MG, 320 MG, 40 MG, 80 MG	3	ST
DIURIL ORAL SUSPENSION 250 MG/5 ML	2	
doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg	1	
DYRENIUM ORAL CAPSULE 100 MG, 50 MG	3	
EDARBI ORAL TABLET 40 MG, 80 MG	3	ST
EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG	3	ST
EDECRIN ORAL TABLET 25 MG	3	
enalapril maleate oral solution 1 mg/ml	1	
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	1	
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	1	
EPANED ORAL SOLUTION 1 MG/ML	3	ST
eplerenone oral tablet 25 mg, 50 mg	1	
eprosartan oral tablet 600 mg	1	
ethacrynic acid oral tablet 25 mg	1	

Drug Name	Tier	Requirements / Limits
EXFORGE HCT ORAL TABLET 10-160-12.5 MG, 10-160-25 MG, 10-320-25 MG, 5-160-12.5 MG, 5-160-25 MG	3	ST
EXFORGE ORAL TABLET 10-160 MG, 10-320 MG, 5-160 MG, 5-320 MG	3	ST
felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg	1	
fosinopril oral tablet 10 mg, 20 mg, 40 mg	1	
fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg	1	
furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)	1	
furosemide oral tablet 20 mg, 40 mg, 80 mg	1	
guanfacine oral tablet 1 mg, 2 mg	1	
HEMANGEOL ORAL SOLUTION 4.28 MG/ML	4	PA; SP
hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg	1	
hydrochlorothiazide oral capsule 12.5 mg	1	
hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg	1	
HYZAAR ORAL TABLET 100-12.5 MG, 100-25 MG, 50-12.5 MG	3	ST
indapamide oral tablet 1.25 mg, 2.5 mg	1	
INDERAL LA ORAL CAPSULE, EXTENDED RELEASE 24 HR 120 MG, 160 MG, 60 MG, 80 MG	3	
INDERAL XL ORAL CAPSULE, EXTENDED RELEASE 24HR 120 MG, 80 MG	3	
INNOPRAN XL ORAL CAPSULE, EXTENDED RELEASE 24HR 120 MG, 80 MG	3	
INSPRA ORAL TABLET 25 MG, 50 MG	3	
irbesartan oral tablet 150 mg, 300 mg, 75 mg	1	
irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg	1	
isosorbide-hydralazine oral tablet 20-37.5 mg	1	
isradipine oral capsule 2.5 mg, 5 mg	1	
KAPSPARGO SPRINKLE ORAL CAPSULE, SPRINKLE, ER 24HR 100 MG, 200 MG, 25 MG, 50 MG	3	
KATERZIA ORAL SUSPENSION 1 MG/ML	3	

Drug Name	Tier	Requirements / Limits
KERENDIA ORAL TABLET 10 MG	3	PA; ST; QL (60 per 30 days)
KERENDIA ORAL TABLET 20 MG	3	PA; ST; QL (30 per 30 days)
labetalol oral tablet 100 mg, 200 mg, 300 mg	1	
LASIX ORAL TABLET 20 MG, 40 MG, 80 MG	3	
LEVAMLODIPINE ORAL TABLET 2.5 MG, 5 MG	3	
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg	1	
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	1	
LOPRESSOR ORAL TABLET 100 MG, 50 MG	3	
losartan oral tablet 100 mg, 25 mg, 50 mg	1	
losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg	1	
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	3	ST
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	3	ST
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	3	ST
matzim la oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1	
methyldopa oral tablet 250 mg, 500 mg	1	
methyldopa-hydrochlorothiazide oral tablet 250-15 mg, 250-25 mg	1	
metolazone oral tablet 10 mg, 2.5 mg, 5 mg	1	
metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg	1	
metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	1	
metyrosine oral capsule 250 mg	1	
MICARDIS HCT ORAL TABLET 40-12.5 MG, 80-12.5 MG, 80-25 MG	3	ST
MICARDIS ORAL TABLET 20 MG, 40 MG, 80 MG	3	ST
minoxidil oral tablet 10 mg, 2.5 mg	1	
moexipril oral tablet 15 mg, 7.5 mg	1	

Drug Name	Tier	Requirements / Limits
nadolol oral tablet 20 mg, 40 mg, 80 mg	1	
nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	1	
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HR 0.17 MG	3	PA
nicardipine oral capsule 20 mg, 30 mg	1	
nifedipine oral capsule 10 mg, 20 mg	1	
nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg	1	
nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg	1	
nimodipine oral capsule 30 mg	1	
nisoldipine oral tablet extended release 24 hr 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg	1	
NORLIQVA ORAL SOLUTION 1 MG/ML	3	PA
NORVASC ORAL TABLET 10 MG, 2.5 MG, 5 MG	3	
NYMALIZE ORAL SOLUTION 60 MG/10 ML	3	
NYMALIZE ORAL SYRINGE 30 MG/5 ML, 60 MG/10 ML	3	
olmesartan oral tablet 20 mg, 40 mg, 5 mg	1	
olmesartan-amlodipin-hcthiazid oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg	1	
olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg	1	
ORENITRAM MONTH 1 TITRATION KT ORAL TABLET EXTENDED REL, DOSE PACK 0.125 MG (126)- 0.25 MG (42)	4	PA; SP; LA
ORENITRAM MONTH 2 TITRATION KT ORAL TABLET EXTENDED REL, DOSE PACK 0.125 MG (126)- 0.25 MG (210)	4	PA; SP; LA
ORENITRAM MONTH 3 TITRATION KT ORAL TABLET EXTENDED REL, DOSE PACK 0.125 MG (126)- 0.25 MG(42)-1MG	4	PA; SP; LA
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG	4	PA; SP; LA
perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg	1	
phenoxybenzamine oral capsule 10 mg	1	
pindolol oral tablet 10 mg, 5 mg	1	

Drug Name	Tier	Requirements / Limits
prazosin oral capsule 1 mg, 2 mg, 5 mg	1	
PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7-5 MG	3	ST
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24HR 30 MG, 60 MG, 90 MG	3	
propranolol oral capsule, extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg	1	
propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)	1	
propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	1	
propranolol-hydrochlorothiazid oral tablet 40-25 mg, 80-25 mg	1	
QBRELIS ORAL SOLUTION 1 MG/ML	3	ST
quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	
quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	1	
ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg	1	
SOAANZ ORAL TABLET 20 MG, 40 MG, 60 MG	3	PA; ST
spironolactone oral suspension 25 mg/5 ml	1	
spironolactone oral tablet 100 mg, 25 mg, 50 mg	1	
spironolacton-hydrochlorothiaz oral tablet 25-25 mg	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	3	
TEKTURNA ORAL TABLET 150 MG, 300 MG	3	PA
telmisartan oral tablet 20 mg, 40 mg, 80 mg	1	
telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg	1	
telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg	1	
TENORETIC 50 ORAL TABLET 50-25 MG	3	
TENORMIN ORAL TABLET 100 MG, 25 MG, 50 MG	3	
terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg	1	
THALITONE ORAL TABLET 15 MG	3	

Drug Name	Tier	Requirements / Limits
tiadylt er oral capsule, extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1	
TIAZAC ORAL CAPSULE, EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	3	
timolol maleate oral tablet 10 mg, 20 mg, 5 mg	1	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HR 100 MG, 200 MG, 25 MG, 50 MG	3	
torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg	1	
trandolapril oral tablet 1 mg, 2 mg, 4 mg	1	
trandolapril-verapamil oral tablet, ir - er, biphasic 24hr 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	1	
triamterene oral capsule 100 mg, 50 mg	1	
triamterene-hydrochlorothiazid oral capsule 37.5-25 mg	1	
triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg	1	
TRIBENZOR ORAL TABLET 20-5-12.5 MG, 40-10-12.5 MG, 40-10-25 MG, 40-5-12.5 MG, 40-5-25 MG	3	ST
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	4	PA; SP; LA
UPTRAVI ORAL TABLETS, DOSE PACK 200 MCG (140)- 800 MCG (60)	4	PA; SP; LA
VALSARTAN ORAL SOLUTION 4 MG/ML	3	ST
valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg	1	
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg	1	
VASERETIC ORAL TABLET 10-25 MG	3	ST
VASOTEC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG	3	ST
verapamil oral capsule, 24 hr er pellet ct 100 mg, 200 mg, 300 mg	1	
verapamil oral capsule, ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg	1	
verapamil oral tablet 120 mg, 40 mg, 80 mg	1	

Drug Name	Tier	Requirements / Limits
verapamil oral tablet extended release 120 mg, 180 mg, 240 mg	1	
VERELAN PM ORAL CAPSULE, 24 HR ER PELLET CT 100 MG, 200 MG, 300 MG	3	
ZESTORETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	3	ST
ZESTRIL ORAL TABLET 10 MG, 2.5 MG, 20 MG, 30 MG, 40 MG, 5 MG	3	ST
CARDIAC GLYCOSIDES		
digoxin oral solution 50 mcg/ml (0.05 mg/ml)	1	
digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg), 62.5 mcg (0.0625 mg)	1	
LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG), 62.5 MCG (0.0625 MG)	3	
COAGULATION THERAPY		
ALVAIZ ORAL TABLET 18 MG, 36 MG, 54 MG, 9 MG	4	PA; SP; LA; QL (60 per 30 days)
AMICAR ORAL SOLUTION 250 MG/ML (25 %)	3	
AMICAR ORAL TABLET 1,000 MG, 500 MG	3	
aminocaproic acid oral solution 250 mg/ml (25 %)	1	
aminocaproic acid oral tablet 1,000 mg, 500 mg	1	
ARIXTRA SUBCUTANEOUS SYRINGE 10 MG/0.8 ML, 2.5 MG/0.5 ML, 5 MG/0.4 ML, 7.5 MG/0.6 ML	4	SP
aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg	1	
ASPIRIN-OMEPRAZOLE ORAL TABLET, IR, DELAYED REL, BIPHASIC 81-40 MG	3	
BRILINTA ORAL TABLET 60 MG, 90 MG	2	
CABLIVI INJECTION KIT 11 MG	4	PA; SP
cilostazol oral tablet 100 mg, 50 mg	1	
clopidogrel oral tablet 300 mg, 75 mg	1	
dabigatran etexilate oral capsule 110 mg, 150 mg, 75 mg	1	
dipyridamole oral tablet 25 mg, 50 mg, 75 mg	1	
DOPTELET ORAL TABLET 20 MG	4	PA; ST; SP; LA
EFFIENT ORAL TABLET 10 MG, 5 MG	3	

Drug Name	Tier	Requirements / Limits
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS, DOSE PACK 5 MG (74 TABS)	2	
ELIQUIS ORAL TABLET 2.5 MG, 5 MG	2	
enoxaparin subcutaneous solution 300 mg/3 ml	4	SP
enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml	4	SP
fondaparinux subcutaneous syringe 10 mg/0.8 ml, 2.5 mg/0.5 ml, 5 mg/0.4 ml, 7.5 mg/0.6 ml	4	SP
FRAGMIN SUBCUTANEOUS SOLUTION 2,500 ANTI-XA UNIT/ML, 25,000 ANTI-XA UNIT/ML	4	SP
FRAGMIN SUBCUTANEOUS SYRINGE 10,000 ANTI-XA UNIT/ML, 12,500 ANTI-XA UNIT/0.5 ML, 15,000 ANTI-XA UNIT/0.6 ML, 18,000 ANTI-XA UNIT/0.72 ML, 2,500 ANTI-XA UNIT/0.2 ML, 5,000 ANTI-XA UNIT/0.2 ML, 7,500 ANTI-XA UNIT/0.3 ML	4	ST; SP
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7 ML, 12 MG/0.4 ML, 150 MG/ML, 30 MG/ML, 300 MG/2 ML (150 MG/ML), 60 MG/0.4 ML	4	PA; SP; LA
heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml	1	
heparin (porcine) injection syringe 5,000 unit/ml	1	
heparin, porcine (pf) injection solution 1,000 unit/ml, 5,000 unit/0.5 ml	1	
HEPARIN, PORCINE (PF) SUBCUTANEOUS SYRINGE 5, 000 UNIT/0.5 ML	3	
jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	1	
LOVENOX SUBCUTANEOUS SOLUTION 300 MG/3 ML	4	SP
LOVENOX SUBCUTANEOUS SYRINGE 100 MG/ML, 120 MG/0.8 ML, 150 MG/ML, 30 MG/0.3 ML, 40 MG/0.4 ML, 60 MG/0.6 ML, 80 MG/0.8 ML	4	ST; SP
MULPLETA ORAL TABLET 3 MG	4	PA; SP; LA
pentoxifylline oral tablet extended release 400 mg	1	
PHYTONADIONE (VITAMIN K1) INJECTION SOLUTION 1 MG/0.5 ML	3	

Drug Name	Tier	Requirements / Limits
phytonadione (vitamin k1) injection solution 10 mg/ml	1	
PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE 1 MG/0.5 ML	3	
phytonadione (vitamin k1) oral tablet 5 mg	1	
PLAVIX ORAL TABLET 75 MG	3	
PRADAXA ORAL CAPSULE 110 MG, 150 MG, 75 MG	3	
prasugrel oral tablet 10 mg, 5 mg	1	
PROMACTA ORAL POWDER IN PACKET 12.5 MG	4	PA; SP; LA; QL (360 per 30 days)
PROMACTA ORAL POWDER IN PACKET 25 MG	4	PA; SP; LA; QL (180 per 30 days)
PROMACTA ORAL TABLET 12.5 MG	4	PA; SP; LA; QL (360 per 30 days)
PROMACTA ORAL TABLET 25 MG	4	PA; SP; LA; QL (180 per 30 days)
PROMACTA ORAL TABLET 50 MG	4	PA; SP; LA; QL (90 per 30 days)
PROMACTA ORAL TABLET 75 MG	4	PA; SP; LA; QL (60 per 30 days)
SAVAYSA ORAL TABLET 15 MG, 30 MG, 60 MG	3	
TAVALISSE ORAL TABLET 100 MG, 150 MG	4	PA; ST; SP
vitamin k injection solution 1 mg/0.5 ml	1	
vitamin k1 injection solution 10 mg/ml	1	
warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	1	
XARELTO DVT-PE TREAT 30D START ORAL TABLETS, DOSE PACK 15 MG (42)- 20 MG (9)	2	
XARELTO ORAL SUSPENSION FOR RECONSTITUTION 1 MG/ML	2	
XARELTO ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG	2	
YOSPRALA ORAL TABLET, IR, DELAYED REL, BIPHASIC 325-40 MG, 81-40 MG	3	
ZONTIVITY ORAL TABLET 2.08 MG	3	
LIPID/CHOLESTEROL LOWERING AGENTS		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HR 20 MG, 40 MG, 60 MG	3	PA; ST
amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg	1	

Drug Name	Tier	Requirements / Limits
atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg	1	ACA PV
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-80 MG	3	ST
CADUET ORAL TABLET 5-40 MG	3	
cholestyramine (with sugar) oral powder 4 gram	1	
cholestyramine (with sugar) oral powder in packet 4 gram	1	
cholestyramine light oral powder 4 gram	1	
cholestyramine light oral powder in packet 4 gram	1	
colesevelam oral powder in packet 3.75 gram	1	
colesevelam oral tablet 625 mg	1	
COLESTID ORAL GRANULES 5 GRAM	3	
COLESTID ORAL TABLET 1 GRAM	3	
colestipol oral granules 5 gram	1	
colestipol oral packet 5 gram	1	
colestipol oral tablet 1 gram	1	
CRESTOR ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG	3	PA; ST
EZALLOR ORAL CAPSULE, SPRINKLE 10 MG, 20 MG, 40 MG, 5 MG	3	PA; ST
ezetimibe oral tablet 10 mg	1	
EZETIMIBE-ROSUVASTATIN ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-5 MG	3	PA; ST
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	1	
fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg	1	
FENOFIBRATE MICRONIZED ORAL CAPSULE 90 MG	3	PA; ST
fenofibrate nanocrystallized oral tablet 145 mg, 48 mg	1	
FENOFIBRATE ORAL CAPSULE 150 MG, 50 MG	3	PA; ST
fenofibrate oral tablet 120 mg, 160 mg, 40 mg, 54 mg	1	
fenofibric acid (choline) oral capsule, delayed release (dr/ec) 135 mg, 45 mg	1	

Drug Name	Tier	Requirements / Limits
fenofibric acid oral tablet 105 mg, 35 mg	1	
FENOGLIDE ORAL TABLET 120 MG, 40 MG	3	PA; ST
FIBRICOR ORAL TABLET 105 MG, 35 MG	3	PA; ST
FLOLIPID ORAL SUSPENSION 20 MG/5 ML (4 MG/ML), 40 MG/5 ML (8 MG/ML)	3	PA; ST
fluvastatin oral capsule 20 mg, 40 mg	1	ACA PV
fluvastatin oral tablet extended release 24 hr 80 mg	1	ACA PV
gemfibrozil oral tablet 600 mg	1	
icosapent ethyl oral capsule 0.5 gram, 1 gram	1	PA; ST; QL (120 per 30 days)
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 5 MG	4	PA; ST; SP; LA; QL (30 per 30 days)
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HR 80 MG	3	PA; ST
LIPITOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG	3	PA; ST
LIPOFEN ORAL CAPSULE 150 MG, 50 MG	3	PA; ST
LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG	3	PA; ST
LOPID ORAL TABLET 600 MG	3	PA; ST
lovastatin oral tablet 10 mg, 20 mg, 40 mg	1	ACA PV
LOVAZA ORAL CAPSULE 1 GRAM	3	ST; QL (120 per 30 days)
NEXLETOL ORAL TABLET 180 MG	3	PA; ST
NEXLIZET ORAL TABLET 180-10 MG	3	PA; ST
niacin oral tablet 500 mg	1	
niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg	1	
NIACOR ORAL TABLET 500 MG	3	ST
omega-3 acid ethyl esters oral capsule 1 gram	1	
pitavastatin calcium oral tablet 1 mg, 2 mg, 4 mg	1	ACA PV
PRALUENT SUBCUTANEOUS PEN INJECTOR 150 MG/ML	3	PA; ST; QL (2 per 30 days)
PRALUENT SUBCUTANEOUS PEN INJECTOR 75 MG/ML	3	PA; ST; QL (4 per 30 days)
pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg	1	ACA PV
prevalite oral powder 4 gram	1	
prevalite oral powder in packet 4 gram	1	
QUESTRAN LIGHT ORAL POWDER 4 GRAM	3	

Drug Name	Tier	Requirements / Limits
QUESTRAN ORAL POWDER 4 GRAM	3	
QUESTRAN ORAL POWDER IN PACKET 4 GRAM	3	
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR 420 MG/3.5 ML	2	PA; ST
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	2	PA; ST
REPATHA SUBCUTANEOUS SYRINGE 140 MG/ML	2	PA; ST
rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	ACA PV
ROSZET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-5 MG	3	PA; ST
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg	1	ACA PV
TRICOR ORAL TABLET 145 MG, 48 MG	3	PA; ST
TRILIPIX ORAL CAPSULE, DELAYED RELEASE (DR/EC) 135 MG, 45 MG	3	PA; ST
VASCEPA ORAL CAPSULE 0.5 GRAM, 1 GRAM	3	PA; ST; QL (120 per 30 days)
VYTORIN ORAL TABLET 10-10 MG	3	PA; ST
VYTORIN ORAL TABLET 10-20 MG	3	PA; ST
VYTORIN ORAL TABLET 10-40 MG	3	PA; ST
VYTORIN ORAL TABLET 10-80 MG	3	PA; ST
WELCHOL ORAL POWDER IN PACKET 3.75 GRAM	3	
WELCHOL ORAL TABLET 625 MG	3	
ZETIA ORAL TABLET 10 MG	3	PA; ST
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG	3	PA; ST
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	3	PA; ST
MISCELLANEOUS CARDIOVASCULAR AGENTS		
ASPRUZYO SPRINKLE ORAL EXTEND RELEASE GRANULES,PACKET 1,000 MG, 500 MG	3	PA; ST
CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG	4	PA; SP; LA
CORLANOR ORAL SOLUTION 5 MG/5 ML	4	PA; ST; SP
CORLANOR ORAL TABLET 5 MG, 7.5 MG	3	PA; ST

Drug Name	Tier	Requirements / Limits
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	2	PA
ENTRESTO SPRINKLE ORAL PELLET 15-16 MG, 6-6 MG	2	PA
FILSPARI ORAL TABLET 200 MG, 400 MG	4	PA; ST; SP
ivabradine oral tablet 5 mg, 7.5 mg	1	PA; ST
LODOCO ORAL TABLET 0.5 MG	3	PA
ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg	1	
TRYVIO ORAL TABLET 12.5 MG	3	PA
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG	3	PA
VYNDAMAX ORAL CAPSULE 61 MG	4	PA; SP; LA
VYNDAQEL ORAL CAPSULE 20 MG	4	PA; SP; LA
NITRATES		
GONITRO SUBLINGUAL POWDER IN PACKET 400 MCG	3	
ISORDIL ORAL TABLET 40 MG	3	
ISORDIL TITRADOSE ORAL TABLET 5 MG	3	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 40 mg, 5 mg	1	
isosorbide mononitrate oral tablet 10 mg, 20 mg	1	
isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg	1	
nitro-bid transdermal ointment 2 %	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.3 MG/HR, 0.4 MG/HR, 0.6 MG/HR, 0.8 MG/HR	2	
nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg	1	
nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	1	
nitroglycerin translingual spray, non-aerosol 400 mcg/spray	1	
NITROLINGUAL TRANSLINGUAL SPRAY, NON-AEROSOL 400 MCG/SPRAY	3	
NITROMIST TRANSLINGUAL AEROSOL, SPRAY 400 MCG/SPRAY	3	

Drug Name	Tier	Requirements / Limits
NITROSTAT SUBLINGUAL TABLET 0.3 MG, 0.4 MG, 0.6 MG	3	
nitro-time oral capsule, extended release 2.5 mg, 6.5 mg, 9 mg	1	
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
acitretin oral capsule 10 mg, 17.5 mg, 25 mg	1	
ANALPRAM-HC TOPICAL LOTION 2.5-1 %	3	ST
BIMZELX AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 160 MG/ML	4	PA; SP; LA
BIMZELX SUBCUTANEOUS SYRINGE 160 MG/ML	4	PA; SP; LA
calcipotriene scalp solution 0.005 %	1	
calcipotriene topical cream 0.005 %	1	
CALCIPOTRIENE TOPICAL FOAM 0.005 %	3	PA; ST
calcipotriene topical ointment 0.005 %	1	
calcipotriene-betamethasone topical ointment 0.005-0.064 %	1	
calcipotriene-betamethasone topical suspension 0.005-0.064 %	1	
calcitriol topical ointment 3 mcg/gram	1	
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; ST; SP; LA
COSENTYX PEN (2 PENS) SUBCUTANEOUS NJECTOR 150 MG/ML	4	PA; ST; SP; LA
COSENTYX PEN SUBCUTANEOUS INJECTOR 150 MG/ML	4	PA; ST; SP; LA
COSENTYX SUBCUTANEOUS SYRINGE 150 MG/ML, 75 MG/0.5 ML	4	PA; ST; SP; LA
COSENTYX UNOREADY PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML (150 MG/ML)	4	PA; ST; SP; LA
ENSTILAR TOPICAL FOAM 0.005-0.064 %	3	ST
EPIFOAM TOPICAL FOAM 1-1 %	3	
hydrocortisone-pramoxine topical cream 2.5-1 %	1	
ILUMYA SUBCUTANEOUS SYRINGE 100 MG/ML	4	PA; ST; SP; LA
OVACE PLUS TOPICAL SHAMPOO 10 %	3	ST

Drug Name	Tier	Requirements / Limits
OVACE PLUS TOPICAL CLEANSER 10 %	3	ST
OVACE PLUS TOPICAL CREAM 10 %	3	ST
OVACE PLUS TOPICAL LOTION 9.8 %	3	ST
OVACE PLUS WASH TOPICAL CLEANSER, GEL 10 %	3	ST
OVACE TOPICAL CLEANSER 10 %	3	ST
PLEXION NS TOPICAL SHAMPOO 9.8 %	3	ST
PRAMOSONE TOPICAL CREAM 1-1 %	2	ST
PRAMOSONE TOPICAL LOTION 1-1 %, 2.5-1 %	2	ST
PRAMOSONE TOPICAL OINTMENT 1-1 %, 2.5-1 %	2	ST
selenium sulfide topical lotion 2.5 %	1	
selenium sulfide topical shampoo 2.25 %, 2.3 %	1	
SILIQ SUBCUTANEOUS SYRINGE 210 MG/1.5 ML	4	PA; ST; SP; LA
SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML	4	PA; ST; SP; LA
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; ST; SP; LA
SORILUX TOPICAL FOAM 0.005 %	3	ST
SOTYKTU ORAL TABLET 6 MG	4	PA; SP; LA
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	4	PA; ST; SP; LA
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	4	PA; ST; SP; LA
sulfacetamide sodium topical cleanser 10 %	1	
sulfacetamide sodium topical cleanser, gel 10 %	1	
sulfacetamide sodium topical shampoo 10 %, 9.8 %	1	
TACLONEX TOPICAL SUSPENSION 0.005-0.064 %	3	ST
TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	4	PA; ST; SP; LA
TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	4	PA; ST; SP; LA

Drug Name	Tier	Requirements / Limits
TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	4	PA; ST; SP; LA
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 20 MG/0.25 ML, 40 MG/0.5 ML, 80 MG/ML	4	PA; ST; SP; LA
TERSI TOPICAL FOAM 2.25 %	3	ST
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	4	PA; ST; SP; LA
TREMFYA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	4	PA; ST; SP; LA
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML	4	PA; ST; SP; LA
VECTICAL TOPICAL OINTMENT 3 MCG/GRAM	3	ST
VTAMA TOPICAL CREAM 1 %	3	PA; ST
WYNZORA TOPICAL CREAM 0.005-0.064 %	3	PA
ZORYVE TOPICAL CREAM 0.15 %	3	PA; ST
ZORYVE TOPICAL CREAM 0.3 %	3	PA
ZORYVE TOPICAL FOAM 0.3 %	3	PA; ST; QL (1 per 30 days)
BURN THERAPY		
SILVADENE TOPICAL CREAM 1 %	3	
silver sulfadiazine topical cream 1 %	1	
ssd topical cream 1 %	1	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML	4	PA; ST; SP; LA
ADBRY SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; ST; SP; LA
AMELUZ TOPICAL GEL 10 %	3	
ammonium lactate topical cream 12 %	1	
ammonium lactate topical lotion 12 %	1	
CANTHARIDIN IN ACETONE TOPICAL SOLUTION 0.7 %	3	PA; ST; QL (2 per 30 days)
CARAC TOPICAL CREAM 0.5 %	2	PA; ST
CIBINQO ORAL TABLET 100 MG, 200 MG, 50 MG	4	PA; ST; SP; LA
CONDYLOX TOPICAL GEL 0.5 %	3	PA; ST
CORTANE-B TOPICAL LOTION 1-1-0.1 %	3	

Drug Name	Tier	Requirements / Limits
diclofenac sodium topical gel 3 %	1	
doxepin topical cream 5 %	1	
DRYSOL DAB-O-MATIC TOPICAL SOLUTION 20 %	3	
DUPIXENT SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML, 300 MG/2 ML	4	PA; ST; SP; LA; QL (2 per 30 days)
DUPIXENT SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	4	PA; ST; SP; LA; QL (2 per 30 days)
EBGLYSS PEN SUBCUTANEOUS PEN INJECTOR 250 MG/2 ML	4	PA; SP; LA
EFUDEX TOPICAL CREAM 5 %	3	
ELIDEL TOPICAL CREAM 1 %	3	PA; ST
EUCRISA TOPICAL OINTMENT 2 %	3	PA; ST
FLUOROPLEX TOPICAL CREAM 1 %	2	PA; ST
FLUOROURACIL TOPICAL CREAM 0.5 %	2	PA; ST
fluorouracil topical cream 5 %	1	
fluorouracil topical solution 2 %, 5 %	1	
IODOSORB TOPICAL GEL 0.9 %	3	
LEVULAN TOPICAL SOLUTION 20 %	3	
methoxsalen oral capsule, liqd-filled, rapid rel 10 mg	1	
methyl salicylate topical liquid	1	
OPZELURA TOPICAL CREAM 1.5 %	3	PA; ST
PANRETIN TOPICAL GEL 0.1 %	3	
pimecrolimus topical cream 1 %	1	
podofilox topical gel 0.5 %	1	
podofilox topical solution 0.5 %	1	
prudoxin topical cream 5 %	1	
QBREXZA TOPICAL TOWELETTE 2.4 %	3	PA; ST
REGRANEX TOPICAL GEL 0.01 %	3	
SCENESSE SUBCUTANEOUS IMPLANT 16 MG	4	PA; SP
SOFDRA TOPICAL GEL WITH PUMP 12.45 % (72 MG /ACTUATION)	3	PA; ST; QL (1 per 30 days)
tacrolimus topical ointment 0.03 %, 0.1 %	1	
TOLAK TOPICAL CREAM 4 %	2	PA; ST
VALCHLOR TOPICAL GEL 0.016 %	4	PA; ST; SP; LA

Drug Name	Tier	Requirements / Limits
VEREGEN TOPICAL OINTMENT 15 %	3	PA
ZONALON TOPICAL CREAM 5 %	3	
THERAPY FOR ACNE		
ABSORICA LD ORAL CAPSULE 16 MG, 24 MG, 32 MG, 8 MG	3	PA; ST
ABSORICA ORAL CAPSULE 10 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG	3	PA; ST
ACANYA TOPICAL GEL WITH PUMP 1.2-2.5 %	3	PA; ST
accutane oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
ACZONE TOPICAL GEL 5 %	3	PA; ST
ACZONE TOPICAL GEL WITH PUMP 7.5 %	3	PA; ST
adapalene topical cream 0.1 %	1	PA; ST
adapalene topical gel 0.3 %	1	PA; ST
adapalene topical gel with pump 0.3 %	1	PA; ST
ADAPALENE TOPICAL LOTION 0.1 %	2	PA; ST
adapalene topical solution 0.1 %	1	PA; ST
adapalene topical swab 0.1 %	1	PA; ST
adapalene-benzoyl peroxide topical gel with pump 0.1-2.5 %	1	
adapalene-benzoyl peroxide topical gel with pump 0.3-2.5 %	1	PA; ST
AKLIEF TOPICAL CREAM 0.005 %	3	PA; ST
ALTRENO TOPICAL LOTION 0.05 %	3	PA; ST
amnesteem oral capsule 10 mg, 20 mg, 40 mg	1	
AMZEEQ TOPICAL FOAM 4 %	3	PA; ST
ARAZLO TOPICAL LOTION 0.045 %	3	PA; ST
ATRALIN TOPICAL GEL 0.05 %	3	PA; ST
AVAR LS TOPICAL CLEANSER 10-2 %	3	PA; ST
avar topical cleanser 10-5 % (w/w)	1	
AVAR-E TOPICAL CREAM 10-5 % (W/W)	3	ST
azelaic acid topical gel 15 %	1	
AZELEX TOPICAL CREAM 20 %	3	PA; ST
BENZAMYCIN TOPICAL GEL 3-5 %	3	ST
BENZEPRO (MICROSPHERES) TOPICAL CLEANSER 7 %	3	
benzepro topical towelette 6 %	1	

Drug Name	Tier	Requirements / Limits
benzoyl peroxide topical cleanser 7 %	1	
benzoyl peroxide topical foam 9.8 %	1	
bp topical cleanser 10-1 %	1	
brimonidine topical gel with pump 0.33 %	1	
claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
CLENIA PLUS TOPICAL SUSPENSION 9-4.25 %	3	PA; ST
CLEOCIN T TOPICAL LOTION 1 %	3	ST
CLINDACIN ETZ TOPICAL KIT 1 %	3	ST
clindacin etz topical swab 1 %	1	
clindacin p topical swab 1 %	1	
CLINDACIN PAC TOPICAL KIT 1 %	3	ST
clindacin topical foam 1 %	1	
CLINDAGEL TOPICAL GEL, ONCE DAILY 1 %	3	PA; ST
clindamycin phosphate topical foam 1 %	1	
clindamycin phosphate topical gel 1 %	1	
clindamycin phosphate topical gel, once daily 1 %	1	
clindamycin phosphate topical lotion 1 %	1	
clindamycin phosphate topical solution 1 %	1	
clindamycin phosphate topical swab 1 %	1	
clindamycin-benzoyl peroxide topical gel 1-5 %, 1.2 %(1 % base) -5 %	1	
clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2 %(1 % base) -3.75 %, 1.2-2.5 %	1	
clindamycin-tretinoin topical gel 1.2-0.025 %	1	
dapsone topical gel 5 %	1	
dapsone topical gel with pump 7.5 %	1	
DIFFERIN TOPICAL CREAM 0.1 %	3	PA; ST
DIFFERIN TOPICAL GEL WITH PUMP 0.3 %	3	PA; ST
DIFFERIN TOPICAL LOTION 0.1 %	2	PA; ST
EPIDUO FORTE TOPICAL GEL WITH PUMP 0.3-2.5 %	3	PA; ST
EPSOLAY TOPICAL CREAM 5 %	3	PA; ST
ery pads topical swab 2 %	1	
erygel topical gel 2 %	1	

Drug Name	Tier	Requirements / Limits
erythromycin with ethanol topical gel 2 %	1	
erythromycin with ethanol topical solution 2 %	1	
erythromycin-benzoyl peroxide topical gel 3-5 %	1	
EVOCLIN TOPICAL FOAM 1 %	3	PA; ST
FABIOR TOPICAL FOAM 0.1 %	3	PA; ST
FINACEA TOPICAL FOAM 15 %	3	PA; ST
isotretinoin oral capsule 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	1	
ivermectin topical cream 1 %	1	
METROCREAM TOPICAL CREAM 0.75 %	3	PA; ST
METROGEL TOPICAL GEL 1 %	3	PA; ST
metronidazole topical cream 0.75 %	1	
metronidazole topical gel 0.75 %, 1 %	1	
metronidazole topical gel with pump 1 %	1	
metronidazole topical lotion 0.75 %	1	
MIRVASO TOPICAL GEL WITH PUMP 0.33 %	3	
NEUAC KIT TOPICAL COMBO PACK, CREAM AND GEL 1.2-5 %	3	ST
neuac topical gel 1.2 %(1 % base) -5 %	1	
NORITATE TOPICAL CREAM 1 %	3	PA; ST
ONEXTON TOPICAL GEL WITH PUMP 1.2 % (1 % BASE) -3.75 %	3	PA; ST
PACNEX TOPICAL CLEANSER 7 %	3	
PLEXION CLEANSING CLOTHS TOPICAL PADS, MEDICATED 9.8-4.8 %	3	ST
PLEXION TOPICAL CLEANSER 9.8-4.8 %	3	PA; ST
PLEXION TOPICAL CREAM 9.8-4.8 %	3	PA; ST
PLEXION TOPICAL LOTION 9.8-4.8 %	3	PA; ST
PR BENZOYL PEROXIDE TOPICAL CLEANSER 7 %	3	ST
RETIN-A MICRO TOPICAL GEL WITH PUMP 0.04 %, 0.06 %, 0.08 %, 0.1 %	3	PA; ST
RETIN-A MICRO TOPICAL GEL 0.04 %, 0.1 %	3	PA; ST
RETIN-A TOPICAL CREAM 0.025 %, 0.05 %, 0.1 %	3	PA; ST
RETIN-A TOPICAL GEL 0.01 %, 0.025 %	3	PA; ST
RHOFADE TOPICAL CREAM 1 %	3	PA

Drug Name	Tier	Requirements / Limits
rosadan topical cream 0.75 %	1	
rosadan topical gel 0.75 %	1	
ROSADAN TOPICAL KIT, CLEANSER AND GEL 0.75 %	3	ST
ROSADAN TOPICAL KIT, CLEANSER AND CREAM 0.75 %	3	ST
rosula cleansing cloths topical pads, medicated 10-5 %	1	
ROSULA TOPICAL CLEANSER 10-4.5 %	3	PA; ST
SOOLANTRA TOPICAL CREAM 1 %	3	PA; ST
sss 10-5 topical cream 10-5 % (w/w)	1	
sss 10-5 topical foam 10-5 %	1	
sulfacetamide sodium-sulfur topical cleanser 10-2 %, 10-5 % (w/w), 9-4 %, 9-4.5 %, 9.8-4.8 %	1	
SULFACETAMIDE SODIUM-SULFUR TOPICAL CLEANSER 8-4 %	3	PA; ST
sulfacetamide sodium-sulfur topical cream 10-2 %, 10-5 % (w/w), 9.8-4.8 %	1	
sulfacetamide sodium-sulfur topical lotion 10-5 % (w/v), 10-5 % (w/w), 9.8-4.8 %	1	
sulfacetamide sodium-sulfur topical pads, medicated 10-4 %, 9.8-4.8 %	1	
sulfacetamide sodium-sulfur topical suspension 10-5 %, 8-4 %	1	
SULFACETAMIDE SODIUM-SULFUR TOPICAL SUSPENSION 9-4.25 %	3	PA; ST
sulfacleanse 8-4 topical suspension 8-4 %	1	
SUMADAN TOPICAL CLEANSER 9-4.5 %	3	PA; ST
SUMADAN TOPICAL KIT 9-4.5 %	3	ST
SUMADAN XLT TOPICAL COMBO PACK, CLEANSER AND CREAM 9 %-4.5 % -SPF 25	3	ST
SUMAXIN CP TOPICAL KIT 10-4 %	3	ST
SUMAXIN TOPICAL CLEANSER 9-4 %	3	PA; ST
SUMAXIN TOPICAL PADS, MEDICATED 10-4 %	3	ST
SUMAXIN TS TOPICAL SUSPENSION 8-4 %	3	PA; ST
tazarotene topical cream 0.05 %, 0.1 %	1	
TAZAROTENE TOPICAL FOAM 0.1 %	3	PA; ST

Drug Name	Tier	Requirements / Limits
tazarotene topical gel 0.05 %, 0.1 %	1	
TAZORAC TOPICAL CREAM 0.05 %, 0.1 %	3	PA; ST
TAZORAC TOPICAL GEL 0.05 %, 0.1 %	3	PA; ST
tretinoin microspheres topical gel 0.04 %, 0.1 %	1	
tretinoin microspheres topical gel with pump 0.04 %, 0.1 %	1	
tretinoin topical cream 0.025 %, 0.05 %, 0.1 %	1	
tretinoin topical gel 0.01 %, 0.025 %, 0.05 %	1	
TWYNEO TOPICAL CREAM 0.1-3 %	3	PA; ST
VANOXIDE-HC TOPICAL SUSPENSION 5-0.5 %	3	ST
VELTIN TOPICAL GEL 1.2-0.025 %	3	PA; ST
WINLEVI TOPICAL CREAM 1 %	3	PA; ST
zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
ZIANA TOPICAL GEL 1.2-0.025 %	3	PA; ST
ZILXI TOPICAL FOAM 1.5 %	3	PA; ST
ZMA CLEAR TOPICAL SUSPENSION 9-4.5 %	3	PA; ST
TOPICAL ANESTHETICS		
COCAINE NASAL SOLUTION 4 %	3	
dermacinrx lidocan topical adhesive patch, medicated 5 %	1	
GOPRELTO NASAL SOLUTION 4 %	3	
lidocaine hcl laryngotracheal solution 4 %	1	
lidocaine hcl mucous membrane solution 4 % (40 mg/ml)	1	
lidocaine hcl-hydrocortison ac topical cream 3-0.5 %	1	
lidocaine topical adhesive patch, medicated 5 %	1	
lidocaine topical ointment 5 %	1	
lidocaine viscous mucous membrane solution 2 %	1	
lidocaine-prilocaine topical cream 2.5-2.5 %	1	
lidocaine-prilocaine topical kit 2.5-2.5 %	1	
LIDOCAINE-TETRACAINE TOPICAL CREAM 7-7 %	3	PA; ST
lidocan iv topical adhesive patch, medicated 5 %	1	
lidocan v topical adhesive patch, medicated 5 %	1	
lidocort topical cream 3-0.5 %	1	

Drug Name	Tier	Requirements / Limits
LIDODERM TOPICAL ADHESIVE PATCH, MEDICATED 5 %	3	ST
NYNUTEY TOPICAL CREAM 23-7 %	3	ST
PLIAGLIS TOPICAL CREAM 7-7 %	3	ST
ZTLIDO TOPICAL ADHESIVE PATCH, MEDICATED 1.8 %	3	ST
TOPICAL ANTIBACTERIALS		
ALCORTIN A TOPICAL GEL 2-1-1 %	3	ST
ALCORTIN A TOPICAL GEL IN PACKET 2-1-1 %	3	ST
ALTABAX TOPICAL OINTMENT 1 %	3	
CENTANY AT TOPICAL OINTMENT KIT 2 %	3	ST
CENTANY TOPICAL OINTMENT 2 %	2	ST
gentamicin topical cream 0.1 %	1	
gentamicin topical ointment 0.1 %	1	
KLARON TOPICAL SUSPENSION 10 %	3	ST
lugols topical solution 5-10 %	1	
mafenide acetate topical packet 50 gram	1	
mupirocin calcium topical cream 2 %	1	
mupirocin topical ointment 2 %	1	
NEO-SYNALAR KIT TOPICAL CREAM 0.5 % (0.35 % BASE)-0.025 %	3	ST
NEO-SYNALAR TOPICAL CREAM 0.5 % (0.35 % BASE)-0.025 %	3	ST
strong iodine topical solution 5-10 %	1	
sulfacetamide sodium (acne) topical suspension 10 %	1	
SULFAMYLON TOPICAL CREAM 85 MG/G	3	
XEPI TOPICAL CREAM 1 %	3	PA; ST
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK 0.77 %	3	ST
CICLODAN KIT TOPICAL SOLUTION 8 %	3	ST
ciclodan topical cream 0.77 %	1	ST
ciclodan topical solution 8 %	1	ST
ciclopirox topical cream 0.77 %	1	
ciclopirox topical gel 0.77 %	1	

Drug Name	Tier	Requirements / Limits
ciclopirox topical shampoo 1 %	1	
ciclopirox topical solution 8 %	1	
ciclopirox topical suspension 0.77 %	1	
ciclopirox-ure-camph-menth-euc topical solution 8 %	1	
clotrimazole topical cream 1 %	1	
clotrimazole topical solution 1 %	1	
clotrimazole-betamethasone topical cream 1-0.05 %	1	
clotrimazole-betamethasone topical lotion 1-0.05 %	1	
econazole topical cream 1 %	1	
ECOZA TOPICAL FOAM 1 %	3	ST
ERTACZO TOPICAL CREAM 2 %	3	ST
EXELDERM TOPICAL CREAM 1 %	3	ST
EXELDERM TOPICAL SOLUTION 1 %	3	ST
EXTINA TOPICAL FOAM 2 %	3	ST
JUBLIA TOPICAL SOLUTION WITH APPLICATOR 10 %	3	PA; ST
ketoconazole topical cream 2 %	1	
ketoconazole topical foam 2 %	1	
ketoconazole topical shampoo 2 %	1	
ketodan kit topical combo pack 2 %	1	ST
ketodan topical foam 2 %	1	
klayesta topical powder 100,000 unit/gram	1	
LOPROX (AS OLAMINE) TOPICAL CREAM 0.77 %	3	ST
LOPROX (AS OLAMINE) TOPICAL SUSPENSION 0.77 %	3	ST
LOPROX KIT TOPICAL COMBO PACK 0.77 %	3	ST
LOPROX KIT TOPICAL KIT, SUSPENSION AND CLEANSER 0.77 %	3	ST
LULICONAZOLE TOPICAL CREAM 1 %	3	ST
LUZU TOPICAL CREAM 1 %	3	ST
MICONAZOLE NITRATE-ZINC OX-PET TOPICAL OINTMENT 0.25-15-81.35 %	3	ST
naftifine topical cream 1 %, 2 %	1	

Drug Name	Tier	Requirements / Limits
naftifine topical gel 2 %	1	
NAFTIN TOPICAL GEL 2 %	3	ST
nyamyc topical powder 100,000 unit/gram	1	
nystatin topical cream 100,000 unit/gram	1	
nystatin topical ointment 100,000 unit/gram	1	
nystatin topical powder 100,000 unit/gram	1	
nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%	1	
nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%	1	
nystop topical powder 100,000 unit/gram	1	
oxiconazole topical cream 1 %	1	
OXISTAT TOPICAL LOTION 1 %	3	ST
SULCONAZOLE TOPICAL CREAM 1 %	3	ST
SULCONAZOLE TOPICAL SOLUTION 1 %	3	ST
tavaborole topical solution with applicator 5 %	1	PA; ST
VUSION TOPICAL OINTMENT 0.25-15-81.35 %	3	ST
XOLEGEL TOPICAL GEL 2 %	3	ST
TOPICAL ANTIVIRALS		
acyclovir topical cream 5 %	1	
acyclovir topical ointment 5 %	1	
DENAVIR TOPICAL CREAM 1 %	3	PA; ST
penciclovir topical cream 1 %	1	PA
XERESE TOPICAL CREAM 5-1 %	3	ST
ZOVIRAX TOPICAL CREAM 5 %	3	ST
ZOVIRAX TOPICAL OINTMENT 5 %	3	ST
TOPICAL CORTICOSTEROIDS		
ala-cort topical cream 1 %	1	
ALA-SCALP TOPICAL LOTION 2 %	3	ST
alclometasone topical cream 0.05 %	1	
alclometasone topical ointment 0.05 %	1	
amcinonide topical cream 0.1 %	1	
amcinonide topical ointment 0.1 %	1	
apexicon e topical cream 0.05 %	1	
beser topical lotion 0.05 %	1	

Drug Name	Tier	Requirements / Limits
betamethasone dipropionate topical cream 0.05 %	1	
betamethasone dipropionate topical lotion 0.05 %	1	
betamethasone dipropionate topical ointment 0.05 %	1	
betamethasone valerate topical cream 0.1 %	1	
betamethasone valerate topical foam 0.12 %	1	
betamethasone valerate topical lotion 0.1 %	1	
betamethasone valerate topical ointment 0.1 %	1	
betamethasone, augmented topical cream 0.05 %	1	
betamethasone, augmented topical gel 0.05 %	1	
betamethasone, augmented topical lotion 0.05 %	1	
betamethasone, augmented topical ointment 0.05 %	1	
BRYHALI TOPICAL LOTION 0.01 %	3	ST
CAPEX TOPICAL SHAMPOO 0.01 %	2	ST
clobetasol scalp solution 0.05 %	1	
clobetasol topical cream 0.05 %	1	
clobetasol topical foam 0.05 %	1	
clobetasol topical gel 0.05 %	1	
clobetasol topical lotion 0.05 %	1	
clobetasol topical ointment 0.05 %	1	
clobetasol topical shampoo 0.05 %	1	
clobetasol topical spray, non-aerosol 0.05 %	1	
clobetasol-emollient topical cream 0.05 %	1	
clobetasol-emollient topical foam 0.05 %	1	
CLOBEX TOPICAL SHAMPOO 0.05 %	3	ST
CLOBEX TOPICAL SPRAY, NON-AEROSOL 0.05 %	3	ST
clocortolone pivalate topical cream 0.1 %	1	ST
CLODAN KIT TOPICAL KIT, SHAMPOO AND CLEANSER 0.05 %	3	ST
clodan topical shampoo 0.05 %	1	
CORDRAN LARGE ROLL TOPICAL TAPE 4 MCG/CM2	3	ST
CORDRAN TOPICAL CREAM 0.025 %, 0.05 %	3	ST
CORDRAN TOPICAL LOTION 0.05 %	3	ST

Drug Name	Tier	Requirements / Limits
CORDRAN TOPICAL OINTMENT 0.05 %	3	ST
DERMA-SMOOTHE/FS BODY TOPICAL OIL 0.01 %	3	
DERMA-SMOOTHE/FS SCALP OIL 0.01 %	3	
desonide topical cream 0.05 %	1	
desonide topical gel 0.05 %	1	
desonide topical lotion 0.05 %	1	
desonide topical ointment 0.05 %	1	
desoximetasone topical cream 0.05 %, 0.25 %	1	
desoximetasone topical gel 0.05 %	1	
desoximetasone topical ointment 0.05 %, 0.25 %	1	
desoximetasone topical spray, non-aerosol 0.25 %	1	
diflorasone topical cream 0.05 %	1	
diflorasone topical ointment 0.05 %	1	
DIPROLENE (AUGMENTED) TOPICAL OINTMENT 0.05 %	3	ST
DUOBRII TOPICAL LOTION 0.01-0.045 %	3	ST
fluocinolone and shower cap scalp oil 0.01 %	1	
fluocinolone topical cream 0.01 %, 0.025 %	1	
fluocinolone topical oil 0.01 %	1	
fluocinolone topical ointment 0.025 %	1	
fluocinolone topical solution 0.01 %	1	
fluocinonide topical cream 0.05 %, 0.1 %	1	
fluocinonide topical gel 0.05 %	1	
fluocinonide topical ointment 0.05 %	1	
fluocinonide topical solution 0.05 %	1	
fluocinonide-e topical cream 0.05 %	1	
flurandrenolide topical cream 0.05 %	1	ST
flurandrenolide topical lotion 0.05 %	1	
flurandrenolide topical ointment 0.05 %	1	
fluticasone propionate topical cream 0.05 %	1	
fluticasone propionate topical lotion 0.05 %	1	
fluticasone propionate topical ointment 0.005 %	1	
halcinonide topical cream 0.1 %	1	ST
halobetasol propionate topical cream 0.05 %	1	

Drug Name	Tier	Requirements / Limits
halobetasol propionate topical ointment 0.05 %	1	
HALOG TOPICAL CREAM 0.1 %	3	ST
HALOG TOPICAL OINTMENT 0.1 %	3	ST
HALOG TOPICAL SOLUTION 0.1 %	3	ST
hydrocortisone butyrate topical cream 0.1 %	1	
hydrocortisone butyrate topical lotion 0.1 %	1	
hydrocortisone butyrate topical ointment 0.1 %	1	ST
hydrocortisone butyrate topical solution 0.1 %	1	
hydrocortisone topical cream 1 %, 2.5 %	1	
hydrocortisone topical lotion 2 %, 2.5 %	1	
hydrocortisone topical ointment 1 %, 2.5 %	1	
hydrocortisone valerate topical cream 0.2 %	1	
hydrocortisone valerate topical ointment 0.2 %	1	
IMPOYZ TOPICAL CREAM 0.025 %	3	ST
KENALOG TOPICAL AEROSOL 0.147 MG/GRAM	3	ST
LOCOID LIPOCREAM TOPICAL CREAM 0.1 %	3	ST
LOCOID TOPICAL LOTION 0.1 %	3	ST
mometasone topical cream 0.1 %	1	
mometasone topical ointment 0.1 %	1	
mometasone topical solution 0.1 %	1	
NUCORT TOPICAL LOTION 2 %	3	ST
OLUX TOPICAL FOAM 0.05 %	3	ST
PANDEL TOPICAL CREAM 0.1 %	3	ST
prednicarbate topical cream 0.1 %	1	
prednicarbate topical ointment 0.1 %	1	
PROCTOCORT TOPICAL CREAM 1 %	3	ST
scalacort topical lotion 2 %	1	
SERNIVO TOPICAL SPRAY WITH PUMP 0.05 %	3	ST
SYNALAR CREAM KIT TOPICAL CREAM 0.025 %	3	ST
SYNALAR OINTMENT KIT TOPICAL COMBO PACK, OINTMENT AND CREAM 0.025 %	3	ST
SYNALAR TOPICAL CREAM 0.025 %	3	ST

Drug Name	Tier	Requirements / Limits
SYNALAR TOPICAL OINTMENT 0.025 %	3	ST
SYNALAR TOPICAL SOLUTION 0.01 %	3	ST
SYNALAR TS TOPICAL KIT 0.01 %	3	ST
TEXACORT TOPICAL SOLUTION 2.5 %	3	ST
TOPICORT TOPICAL CREAM 0.05 %, 0.25 %	3	ST
TOPICORT TOPICAL GEL 0.05 %	3	ST
TOPICORT TOPICAL OINTMENT 0.05 %, 0.25 %	3	ST
TOPICORT TOPICAL SPRAY, NON-AEROSOL 0.25 %	3	ST
tovet emollient topical foam 0.05 %	1	ST
triamcinolone acetonide topical aerosol 0.147 mg/gram	1	
triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide topical lotion 0.025 %, 0.1 %	1	
triamcinolone acetonide topical ointment 0.025 %, 0.05 %, 0.1 %, 0.5 %	1	
triderm topical cream 0.1 %, 0.5 %	1	
ULTRAVATE TOPICAL LOTION 0.05 %	3	ST
VANOS TOPICAL CREAM 0.1 %	3	ST
VERDESO TOPICAL FOAM 0.05 %	3	ST
TOPICAL ENZYMES		
NEXOBRID TOPICAL GEL 8.8 %	3	PA
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	3	QL (6 per 30 days)
TOPICAL SCABICIDES / PEDICULICIDES		
crotan topical lotion 10 %	1	
ELIMITE TOPICAL CREAM 5 %	3	
EURAX TOPICAL CREAM 10 %	2	
EURAX TOPICAL LOTION 10 %	3	
malathion topical lotion 0.5 %	1	
NATROBA TOPICAL SUSPENSION 0.9 %	3	
OVIDE TOPICAL LOTION 0.5 %	3	
permethrin topical cream 5 %	1	
spinosad topical suspension 0.9 %	1	

Drug Name	Tier	Requirements / Limits
ULESFIA TOPICAL LOTION 5 %	3	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
IRRIGATING SOLUTIONS		
lactated ringers irrigation solution	1	
neomycin-polymyxin b gu irrigation solution 40 mg-200,000 unit/ml	1	
PHYSIOLYTE IRRIGATION SOLUTION 140-5-3-98 MEQ/L	3	
PHYSIOSOL IRRIGATION SOLUTION 140-5-3-98 MEQ/L	3	
ringer's irrigation solution	1	
SORBITOL IRRIGATION SOLUTION 3 %	3	
SORBITOL-MANNITOL TRANSURETHRAL SOLUTION 2.7-0.54 GRAM/100 ML	3	
tis-u-sol pentalyte irrigation solution 800-40-20-8.75- 6.25 mg/100 ml	1	
MISCELLANEOUS AGENTS		
acamprosate oral tablet, delayed release (dr/ec) 333 mg	1	
acetic acid irrigation solution 0.25 %	1	
AGRYLIN ORAL CAPSULE 0.5 MG	3	
anagrelide oral capsule 0.5 mg, 1 mg	1	
BUPHENYL ORAL POWDER 0.94 GRAM/GRAM	4	PA; ST; SP
BUPHENYL ORAL TABLET 500 MG	4	PA; ST; SP
caffeine citrate oral solution 60 mg/3 ml (20 mg/ml)	1	
CARBAGLU ORAL TABLET, DISPERSIBLE 200 MG	4	PA; SP; LA
carglumic acid oral tablet, dispersible 200 mg	4	PA; SP
CARNITOR (SUGAR-FREE) ORAL SOLUTION 100 MG/ML	3	
CARNITOR ORAL SOLUTION 100 MG/ML	3	
CARNITOR ORAL TABLET 330 MG	3	
cevimeline oral capsule 30 mg	1	
CHEMET ORAL CAPSULE 100 MG	2	PA
CUVRIOR ORAL TABLET 300 MG	4	PA; ST; SP

Drug Name	Tier	Requirements / Limits
deferasirox oral granules in packet 180 mg, 360 mg, 90 mg	4	PA; SP; LA
deferasirox oral tablet 180 mg	4	PA; SP; LA
deferasirox oral tablet 360 mg, 90 mg	4	PA; ST; SP; LA
deferasirox oral tablet, dispersible 125 mg, 250 mg, 500 mg	4	PA; ST; SP; LA
deferiprone oral tablet 1,000 mg, 500 mg	4	PA; SP
disulfiram oral tablet 250 mg, 500 mg	1	
droxidopa oral capsule 100 mg, 200 mg, 300 mg	4	PA; ST; SP; LA
DUVYZAT ORAL SUSPENSION 8.86 MG/ML	4	PA; SP
EMPAVELI SUBCUTANEOUS SOLUTION 1,080 MG/20 ML	4	PA; ST; SP
ENDARI ORAL POWDER IN PACKET 5 GRAM	4	PA; ST; SP; LA; QL (180 per 30 days)
EVOXAC ORAL CAPSULE 30 MG	3	
EXJADE ORAL TABLET, DISPERSIBLE 125 MG, 250 MG, 500 MG	4	PA; ST; SP; LA
FABHALTA ORAL CAPSULE 200 MG	4	PA; ST; SP
FERRIPROX (2 TIMES A DAY) ORAL TABLET, MODIFIED RELEASE 1,000 MG	4	PA; ST; SP
FERRIPROX ORAL SOLUTION 100 MG/ML	4	PA; ST; SP
FERRIPROX ORAL TABLET 1,000 MG, 500 MG	4	PA; ST; SP
GIVLAARI SUBCUTANEOUS SOLUTION 189 MG/ML	4	PA; SP; LA
glutamine (sickle cell) oral powder in packet 5 gram	4	PA; SP; LA
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	4	PA; SP; LA
JADENU ORAL TABLET 180 MG, 360 MG, 90 MG	4	PA; ST; SP; LA
JADENU SPRINKLE ORAL GRANULES IN PACKET 180 MG, 360 MG, 90 MG	4	PA; ST; SP; LA
JESDUVROQ ORAL TABLET 1 MG, 2 MG, 4 MG, 6 MG, 8 MG	3	PA; ST
JOENJA ORAL TABLET 70 MG	4	PA; SP; QL (60 per 30 days)
levocarnitine (with sugar) oral solution 100 mg/ml	1	
levocarnitine oral solution 100 mg/ml	1	
levocarnitine oral tablet 330 mg	1	

Drug Name	Tier	Requirements / Limits
LITFULO ORAL CAPSULE 50 MG	4	PA; SP; LA
LITHOSTAT ORAL TABLET 250 MG	3	
METOPIRONE ORAL CAPSULE 250 MG	3	
midodrine oral tablet 10 mg, 2.5 mg, 5 mg	1	
nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg	4	PA; SP; LA
NITYR ORAL TABLET 10 MG, 2 MG, 5 MG	4	PA; ST; SP; LA
NORTHERA ORAL CAPSULE 100 MG, 200 MG, 300 MG	4	PA; ST; SP; LA
OLPRUVA ORAL PELLETS IN PACKET 2 GRAM, 3 GRAM, 4 GRAM, 5 GRAM, 6 GRAM, 6.67 GRAM	4	PA; ST; SP
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG	4	PA; ST; SP
ORFADIN ORAL SUSPENSION 4 MG/ML	4	PA; ST; SP
PHEBURANE ORAL GRANULES 483 MG/GRAM	4	PA; ST; SP; LA
pilocarpine hcl oral tablet 5 mg	1	
PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG	4	PA; ST; SP
PYRUKYND ORAL TABLETS, DOSE PACK 20 MG (7)- 5 MG (7), 50 MG (7)- 20 MG (7)	4	PA; ST; SP
RADIOGARDASE ORAL CAPSULE 0.5 GRAM	3	
RAVICTI ORAL LIQUID 1.1 GRAM/ML	4	PA; ST; SP; LA
RILUTEK ORAL TABLET 50 MG	3	
riluzole oral tablet 50 mg	1	
risedronate oral tablet 30 mg	1	
SALAGEN (PILOCARPINE) ORAL TABLET 5 MG	3	
sodium chlor 0.9% bacteriostat injection solution 0.9 %	1	
sodium chloride 0.9 % injection solution	1	
sodium chloride irrigation solution 0.9 %	1	
sodium phenylbutyrate oral powder 0.94 gram/gram	1	PA
sodium phenylbutyrate oral tablet 500 mg	1	PA
SOHONOS ORAL CAPSULE 1 MG, 1.5 MG, 10 MG, 2.5 MG, 5 MG	4	PA; SP
SYPRINE ORAL CAPSULE 250 MG	3	PA; ST; QL (240 per 30 days)

Drug Name	Tier	Requirements / Limits
TAVNEOS ORAL CAPSULE 10 MG	4	PA; SP
TEGLUTIK ORAL SUSPENSION 50 MG/10 ML	4	PA; ST; SP
THIOLA EC ORAL TABLET, DELAYED RELEASE (DR/EC) 100 MG, 300 MG	4	PA; ST; SP
THIOLA ORAL TABLET 100 MG	4	PA; ST; SP
TIGLUTIK ORAL SUSPENSION 50 MG/10 ML	4	PA; ST; SP
tiopronin oral tablet 100 mg	4	PA; SP; LA
tiopronin oral tablet, delayed release (dr/ec) 100 mg, 300 mg	4	PA; SP
trientine oral capsule 250 mg	1	PA; ST; QL (240 per 30 days)
VAFSEO ORAL TABLET 150 MG, 300 MG	3	PA; QL (30 per 30 days)
VOYDEYA ORAL TABLET 100 MG, 150 MG (50 MG X 1-100 MG X 1)	4	PA; ST; SP; QL (180 per 30 days)
water for irrigation, sterile irrigation solution	1	
XURIDEN ORAL GRANULES IN PACKET 2 GRAM	4	PA; SP; QL (120 per 30 days)
ZOKINVY ORAL CAPSULE 50 MG, 75 MG	4	PA; ST; SP
SMOKING DETERRENTS		
bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg	1	ACA PV
CHANTIX CONTINUING MONTH BOX ORAL TABLET 1 MG	2	ACA PV
CHANTIX ORAL TABLET 1 MG	2	ACA PV
CHANTIX STARTING MONTH BOX ORAL TABLETS, DOSE PACK 0.5 MG (11)- 1 MG (42)	2	ACA PV
NICODERM CQ TRANSDERMAL PATCH 24 HOUR 14 MG/24 HR, 21 MG/24 HR, 7 MG/24 HR	3	ACA PV
NICORETTE BUCCAL GUM 2 MG	3	ACA PV
nicorette buccal gum 4 mg	1	ACA PV
nicotine (polacrilex) buccal gum 2 mg, 4 mg	1	ACA PV
nicotine (polacrilex) buccal lozenge 2 mg, 4 mg	1	ACA PV
nicotine (polacrilex) buccal mini lozenge 2 mg, 4 mg	1	ACA PV
nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr	1	ACA PV
nicotine transdermal patch, td daily, sequential 21-14-7 mg/24 hr	1	ACA PV

Drug Name	Tier	Requirements / Limits
NICOTROL NS NASAL SPRAY, NON-AEROSOL 10 MG/ML	2	ACA PV
quit 2 buccal gum 2 mg	1	ACA PV
quit 2 buccal lozenge 2 mg	1	ACA PV
quit 4 buccal gum 4 mg	1	ACA PV
quit 4 buccal lozenge 4 mg	1	ACA PV
stop smoking aid buccal lozenge 2 mg, 4 mg	1	ACA PV
varenicline oral tablet 0.5 mg, 1 mg	1	ACA PV
varenicline oral tablets, dose pack 0.5 mg (11)- 1 mg (42)	1	ACA PV
EAR, NOSE & THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
azelastine nasal spray, non-aerosol 137 mcg (0.1 %), 205.5 mcg (0.15 %)	1	
chlorhexidine gluconate mucous membrane mouthwash 0.12 %	1	
CLINPRO 5000 DENTAL PASTE 1.1 %	3	
denta 5000 plus dental cream 1.1 %	1	
dentagel dental gel 1.1 %	1	
fluoride (sodium) dental cream 1.1 %	1	
fluoride (sodium) dental gel 1.1 %	1	
fluoride (sodium) dental paste 1.1 %	1	
fluoride (sodium) dental solution 0.2 %	1	
FLUORIDEX DAILY DEFENSE DENTAL PASTE 1.1 %	3	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE 1.1-5 %	3	
FLUORIMAX 5000 DENTAL PASTE 1.1 %	3	
FLUORIMAX 5000 SENSITIVE DENTAL PASTE 1.1-5 %	3	
GELCLAIR MUCOUS MEMBRANE GEL IN PACKET	3	
ipratropium bromide nasal spray, non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)	1	
JUST RIGHT 5000 DENTAL PASTE 1.1 %	3	
kourzeq dental paste 0.1 %	1	
MUGARD MUCOUS MEMBRANE SOLUTION	4	SP

Drug Name	Tier	Requirements / Limits
olopatadine nasal spray, non-aerosol 0.6 %	1	
oralone dental paste 0.1 %	1	
ORAMAGICRX MUCOUS MEMBRANE MOUTHWASH	3	
paroex oral rinse mucous membrane mouthwash 0.12 %	1	
PERIDEX MUCOUS MEMBRANE MOUTHWASH 0.12 %	3	
periogard mucous membrane mouthwash 0.12 %	1	
pilocarpine hcl oral tablet 7.5 mg	1	
PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE 1.1 %	3	
PREVIDENT 5000 ENAMEL PROTECT DENTAL PASTE 1.1-5 %	3	
PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE 1.1 %	3	
PREVIDENT 5000 PLUS DENTAL CREAM 1.1 %	3	
PREVIDENT 5000 SENSITIVE DENTAL PASTE 1.1-5 %	3	
PREVIDENT DENTAL GEL 1.1 %	3	
PREVIDENT DENTAL SOLUTION 0.2 %	3	
PREVIDENT KIDS DENTAL PASTE 1.1 %	3	
PROTHELIAL MUCOUS MEMBRANE PASTE 1 GRAM/10 ML	4	SP
SALAGEN (PILOCARPINE) ORAL TABLET 7.5 MG	3	
sf 5000 plus dental cream 1.1 %	1	
sf dental gel 1.1 %	1	
sodium fluoride 5000 plus dental cream 1.1 %	1	
sodium fluoride-pot nitrate dental paste 1.1-5 %	1	
triamcinolone acetonide dental paste 0.1 %	1	
MISCELLANEOUS OTIC PREPARATIONS		
acetic acid otic (ear) solution 2 %	1	
CETRAXAL OTIC (EAR) DROPPERETTE 0.2 %	3	
ciprofloxacin hcl otic (ear) dropperette 0.2 %	1	
DERMOTIC OIL OTIC (EAR) DROPS 0.01 %	3	

Drug Name	Tier	Requirements / Limits
flac oil otic (ear) drops 0.01 %	1	
fluocinolone acetonide oil otic (ear) drops 0.01 %	1	
hydrocortisone-acetic acid otic (ear) drops 1-2 %	1	
ofloxacin otic (ear) drops 0.3 %	1	
OTIC STEROID / ANTIBIOTIC		
CIPRO HC OTIC (EAR) DROPS, SUSPENSION 0.2-1 %	3	
ciprofloxacin-dexamethasone otic (ear) drops, suspension 0.3-0.1 %	1	
CIPROFLOXACIN-FLUOCINOLONE OTIC (EAR) SOLUTION 0.3-0.025 % (0.25 ML)	3	
CORTISPORIN-TC OTIC (EAR) DROPS, SUSPENSION 3.3-3-10-0.5 MG/ML	3	
neomycin-polymyxin-hc otic (ear) drops, suspension 3.5-10,000-1 mg/ml-unit/ml-%	1	
neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%	1	
OTOVEL OTIC (EAR) SOLUTION 0.3-0.025 % (0.25 ML)	3	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
ACTHAR INJECTION GEL 80 UNIT/ML	4	PA; SP; LA
ACTHAR SELFJECT SUBCUTANEOUS PEN INJECTOR 40 UNIT/0.5 ML, 80 UNIT/ML	4	PA; SP; LA
AGAMREE ORAL SUSPENSION 40 MG/ML	4	PA; ST; SP
ALKINDI ORAL CAPSULE, SPRINKLE 0.5 MG, 1 MG, 2 MG, 5 MG	3	PA; ST
betamethasone acet, sod phos injection suspension 6 mg/ml	1	
CORTEF ORAL TABLET 10 MG, 20 MG, 5 MG	3	ST
cortisone oral tablet 25 mg	1	
CORTROPHIN GEL INJECTION 80 UNIT/ML	4	PA; SP; LA
deflazacort oral suspension 22.75 mg/ml	4	PA; SP
deflazacort oral tablet 18 mg, 30 mg, 36 mg, 6 mg	4	PA; ST; SP
DEPO-MEDROL INJECTION SUSPENSION 80 MG/ML	3	
dexabliss oral tablets, dose pack 1.5 mg (39 tabs)	1	
dexamethasone intensol oral drops 1 mg/ml	1	

Drug Name	Tier	Requirements / Limits
dexamethasone oral elixir 0.5 mg/5 ml	1	
dexamethasone oral solution 0.5 mg/5 ml	1	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	1	
dexamethasone oral tablets, dose pack 1.5 mg (21 tabs), 1.5 mg (35 tabs), 1.5 mg (51 tabs)	1	
dexamethasone sodium phos (pf) injection solution 10 mg/ml	1	
dexamethasone sodium phosphate injection solution 10 mg/ml, 4 mg/ml	1	
dexamethasone sodium phosphate injection syringe 4 mg/ml	1	
EMFLAZA ORAL SUSPENSION 22.75 MG/ML	4	PA; ST; SP; LA
EMFLAZA ORAL TABLET 18 MG, 30 MG, 36 MG, 6 MG	4	PA; ST; SP; LA
fludrocortisone oral tablet 0.1 mg	1	
HEMADY ORAL TABLET 20 MG	3	ST
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	1	
KENALOG INJECTION SUSPENSION 10 MG/ML, 40 MG/ML	3	
MEDROL (PAK) ORAL TABLETS, DOSE PACK 4 MG	3	ST
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	ST
MEDROL ORAL TABLET 2 MG	2	ST
methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml	1	
methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg	1	
methylprednisolone oral tablets, dose pack 4 mg	1	
millipred dp oral tablets, dose pack 5 mg (21 tabs), 5 mg (48 tabs)	1	
millipred oral tablet 5 mg	1	
ORAPRED ODT ORAL TABLET, DISINTEGRATING 10 MG, 15 MG, 30 MG	3	ST
prednisolone oral solution 15 mg/5 ml	1	
prednisolone oral tablet 5 mg	1	

Drug Name	Tier	Requirements / Limits
prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)	1	
prednisolone sodium phosphate oral tablet, disintegrating 10 mg, 15 mg, 30 mg	1	
prednisone intensol oral concentrate 5 mg/ml	1	
prednisone oral solution 5 mg/5 ml	1	
prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg	1	
prednisone oral tablets, dose pack 10 mg, 5 mg	1	
RAYOS ORAL TABLET, DELAYED RELEASE (DR/EC) 1 MG, 2 MG, 5 MG	3	ST
TAPERDEX ORAL TABLETS, DOSE PACK 1.5 MG (21 TABS), 1.5 MG (27 TABS), 1.5 MG (49 TABS)	3	ST
TARPEYO ORAL CAPSULE, DELAYED RELEASE(DR/EC) 4 MG	4	PA; ST; SP
triamcinolone acetonide injection suspension 40 mg/ml	1	
ZCORT ORAL TABLETS, DOSE PACK 1.5 MG (25 TABS)	3	ST
ANTITHYROID AGENTS		
methimazole oral tablet 10 mg, 5 mg	1	
potassium iodide oral solution 1 gram/ml	1	
propylthiouracil oral tablet 50 mg	1	
SSKI ORAL SOLUTION 1 GRAM/ML	3	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
ACCU-CHEK AVIVA PLUS TEST STRIPS	3	ST
ACCU-CHEK GUIDE TEST STRIPS	3	ST
ACCU-CHEK SMARTVIEW TEST STRIPS	3	ST
ACCUTREND GLUCOSE TEST STRIPS	3	ST
ADVANCED GLUC METER TEST STRIPS	3	ST
ADVOCATE REDI-CODE PLUS STRIPS	3	ST
AGAMATRIX AMP TEST STRIPS	3	ST
ASSURE 4 STRIPS	3	ST
ASSURE PLATINUM TEST STRIPS	3	ST
ASSURE PRISM MULTI STRIPS	3	ST

Drug Name	Tier	Requirements / Limits
BIONIME RIGHTEST TEST STRIPS	3	ST
BLOOD GLUCOSE TEST STRIPS	3	ST
BLULINK GLUCOSE TEST STRIPS	3	ST
CARESENS N TEST STRIPS	3	ST
CARETOUCH TEST STRIPS	3	ST
CLEVER CHOICE MICRO TEST STRIPS	3	ST
CLEVER CHOICE PRO STRIPS	3	ST
CLEVER CHOICE TALK TEST STRIPS	3	ST
CLEVER CHOICE TEST STRIPS	3	ST
CLEVER CHOICE VOICE PLUS TEST STRIPS	3	ST
CONTOUR NEXT TEST STRIPS	2	
CONTOUR PLUS TEST STRIPS	2	
CONTOUR TEST STRIPS	2	
DIATRUE PLUS TEST STRIPS	3	ST
EASY PLUS II TEST STRIPS	3	ST
EASY STEP STRIPS	3	ST
EASY TALK GLUCOSE TEST STRIPS	3	ST
EASY TALK PLUS II TEST STRIPS	3	ST
EASY TOUCH BLULINK TEST STRIPS	3	ST
EASY TOUCH TEST STRIPS	3	ST
EASY TRAK GLUCOSE TEST STRIPS	3	ST
EASY TRAK II TEST STRIPS	3	ST
EASYGLUCO TEST STRIPS	3	ST
EASYMAX STRIPS	3	ST
ELEMENT COMPACT TEST STRIPS	3	ST
ELEMENT TEST STRIPS	3	ST
EMBRACE BLOOD GLUCOSE SYSTEM STRIPS	3	ST
EMBRACE EVO TEST STRIPS	3	ST
EMBRACE PRO TEST STRIPS	3	ST
EMBRACE TALK TEST STRIPS	3	ST
EVENCARE G2 STRIPS	3	ST
EVENCARE G3 TEST STRIPS	3	ST
EVENCARE MINI GLUCOSE TEST STRIPS	3	ST
EVENCARE PROVIEW TEST STRIPS	3	ST

Drug Name	Tier	Requirements / Limits
EVOLUTION TEST STRIPS	3	ST
EZ SMART PLUS TEST STRIPS	3	ST
EZ SMART TEST STRIPS	3	ST
FORA 6 CONNECT GLUCOSE STRIPS	3	ST
FORA 6CONN-GTEL-TN'G ADV STRIPS	3	ST
FORA D15G STRIPS	3	ST
FORA D20 STRIPS	3	ST
FORA D40-G31 TEST STRIPS	3	ST
FORA G20 STRIPS	3	ST
FORA G30-PREMIUM V10 TEST STRIPS	3	ST
FORA GD50 TEST STRIPS	3	ST
FORA GTEL GLUCOSE TEST STRIPS	3	ST
FORA TEST STRIPS	3	ST
FORA TN'G ADVAN PRO TEST STRIPS	3	ST
FORA TN'G VOICE TEST STRIPS	3	ST
FORA V10 STRIPS	3	ST
FORA V10-V12-D10-D20 STRIPS	3	ST
FORA V12 GLUCOSE STRIPS	3	ST
FORA V20 STRIPS	3	ST
FORACARE GD20 STRIPS	3	ST
FORACARE GD40 TEST STRIPS	3	ST
FREESTYLE INSULINX STRIPS	3	ST
FREESTYLE INSULINX TEST STRIPS	3	ST
FREESTYLE LITE STRIPS	3	ST
FREESTYLE PRECISION NEO STRIPS	3	ST
FREESTYLE TEST STRIPS	3	ST
GE100 BLOOD GLUCOSE TEST STRIPS	3	ST
GE333 BLOOD GLUCOSE TEST STRIPS	3	ST
GENSTRIP TEST STRIPS	3	ST
GLUCO NAVII TEST STRIPS	3	ST
GLUCOCARD 01 SENSOR PLUS STRIPS	3	ST
GLUCOCARD EXPRESSION STRIPS	3	ST
GLUCOCARD SHINE TEST STRIPS	3	ST
GLUCOCARD VITAL SENSOR STRIPS	3	ST
GLUCOCARD VITAL TEST STRIPS	3	ST

Drug Name	Tier	Requirements / Limits
GLUCOCOM GLUCOSE STRIPS	3	ST
GM100 STRIPS	3	ST
GOJJI BLOOD GLUCOSE TEST STRIPS	3	ST
HARMONY GLUCOSE TEST STRIPS	3	ST
HEALTHPRO TEST STRIPS	3	ST
IHEALTH GLUCOSE TEST STRIPS	3	ST
INFINITY TEST STRIPS	3	ST
MICRO BLOOD GLUCOSE STRIPS	3	ST
MICRODOT BLOOD GLUCOSE SYSTEM STRIPS	3	ST
MICRODOT XTRA BLOOD GLUCOSE STRIPS	3	ST
MYGLUCOHEALTH STRIPS	3	ST
NEUTEK 2TEK TEST STRIPS	3	ST
NOVA MAX GLUCOSE TEST STRIPS	3	ST
ON CALL EXPRESS TEST STRIPS	3	ST
ONETOUCH ULTRA TEST STRIPS	2	
ONETOUCH VERIO TEST STRIPS	2	
OPTIUM EZ STRIPS	3	ST
OPTIUM TEST STRIPS	3	ST
PHARMACIST CHOICE STRIPS	3	ST
PIP BLOOD GLUCOSE TEST STRIPS	3	ST
PLATINUM TEST STRIPS	3	ST
PRECISION PCX PLUS TEST STRIPS	3	ST
PRECISION PCX TEST STRIPS	3	ST
PRECISION POINT OF CARE TEST STRIPS	3	ST
PRECISION Q-I-D TEST STRIPS	3	ST
PRECISION XTRA TEST STRIPS	3	ST
PREMIER TEST STRIPS	3	ST
PREMIUM V10 STRIPS	3	ST
PRO VOICE V8-V9 TEST STRIPS	3	ST
PRODIGY NO CODING STRIPS	3	ST
QUINTET AC STRIPS	3	ST
REFUAH PLUS STRIPS	3	ST
RELION CONFIRM-MICRO STRIPS	3	ST
RELION PRIME TEST STRIPS	3	ST

Drug Name	Tier	Requirements / Limits
RELION ULTIMA STRIPS	3	ST
REVEAL TEST STRIPS	3	ST
RIGHTEST GS550 TEST STRIPS	3	ST
RIGHTEST GT333 TEST STRIPS	3	ST
SMART SENSE TEST STRIPS	3	ST
SMARTEST TEST STRIPS	3	ST
SOLUS V2 TEST STRIPS	3	ST
SURE-TEST EASYPLUS MINI STRIPS	3	ST
TELCARE TEST STRIPS	3	ST
TEST N'GO TEST STRIPS	3	ST
TRUE METRIX GLUCOSE TEST STRIPS	3	ST
TRUETEST TEST STRIPS	3	ST
TRUETRACK TEST STRIPS	3	ST
ULTRATRAK STRIPS	3	ST
ULTRATRAK ULTIMATE STRIPS	3	ST
UNISTRIP1 TEST STRIPS	3	ST
VIVAGUARD INO TEST STRIPS	3	ST
WAVESENSE JAZZ STRIPS	3	ST
WAVESENSE PRESTO STRIPS	3	ST
GLUCOSE ELEVATING AGENTS		
BAQSIMI NASAL SPRAY, NON-AEROSOL 3 MG/ACTUATION	2	
diazoxide oral suspension 50 mg/ml	1	
GLUCAGON (HCL) EMERGENCY KIT INJECTION RECON SOLN 1 MG	3	
glucagon emergency kit (human) injection recon soln 1 mg	1	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	3	
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	3	
GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML	3	
PROGLYCEM ORAL SUSPENSION 50 MG/ML	3	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
EVERSENSE 365 TRANSMITTER DEVICE	3	

Drug Name	Tier	Requirements / Limits
OMNIPOD 5 (G6/LIBRE 2 PLUS) SUBCUTANEOUS CARTRIDGE	3	
OMNIPOD 5 INTRO(G6/LIBRE2PLUS) SUBCUTANEOUS CARTRIDGE	3	
TWIIST STARTER KIT KIT	3	
INSULIN THERAPY		
ADMELOG SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	PA; ST
ADMELOG U-100 INSULIN LISPRO SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; ST
AFREZZA INHALATION CARTRIDGE WITH INHALER 12 UNIT, 4 UNIT, 4 UNIT (90)/ 8 UNIT (90), 4 UNIT/8 UNIT/ 12 UNIT (60), 8 UNIT, 8 UNIT (90)/ 12 UNIT (90)	3	
APIDRA SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	PA; ST
APIDRA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; ST
BASAGLAR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	PA; ST
BASAGLAR TEMPO PEN(U-100)INSLN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML (3 ML)	3	PA; ST
FIASP FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
FIASP PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (3 ML)	2	
FIASP PUMPCART SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (1.6 ML)	3	
FIASP U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	3	PA; ST
HUMALOG KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML, 200 UNIT/ML (3 ML)	3	PA; ST

Drug Name	Tier	Requirements / Limits
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	3	PA; ST
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	3	PA; ST
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	3	PA; ST
HUMALOG TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML	3	PA
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	3	PA; ST
HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; ST
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	3	PA; ST
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	3	PA; ST
HUMULIN N NPH KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	PA; ST
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	3	PA; ST
HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION 100 UNIT/ML	3	PA; ST
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	2	
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	2	
INSULIN ASP PRT-INSULIN ASPART SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	
INSULIN ASP PRT-INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	2	
INSULIN ASPART U-100 SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	2	

Drug Name	Tier	Requirements / Limits
INSULIN ASPART U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
INSULIN ASPART U-100 SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
INSULIN DEGLUDEC SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML), 200 UNIT/ML (3 ML)	3	PA; ST
INSULIN DEGLUDEC SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; ST
INSULIN GLARGINE U-300 CONC SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML), 300 UNIT/ML (3 ML)	3	PA; ST
INSULIN GLARGINE-YFGN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	PA; ST
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; ST
INSULIN LISPRO PROTAMIN-LISPRO SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	3	PA; ST
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	PA; ST
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	3	PA; ST
INSULIN LISPRO SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; ST
LANTUS SOLOSTAR U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
LEVEMIR U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
LYUMJEV KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	PA; ST
LYUMJEV KWIKPEN U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	3	PA; ST
LYUMJEV TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML	3	PA; ST

Drug Name	Tier	Requirements / Limits
LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; ST
NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
NOVOLOG FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
NOVOLOG MIX 70-30 U-100 INSULN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	2	
NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	
NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	2	
NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	2	
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML	2	
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML	2	
REZVOGLAR KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	PA; ST
SEMGLEE (INSULIN GLARGINE-YFGN) SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; ST
SEMGLEE (INSULIN GLARG-YFGN) PEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	PA; ST
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN 100 UNIT-33 MCG/ML	2	PA; ST
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	2	
TOUJEO SOLOSTAR U-300 SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	2	

Drug Name	Tier	Requirements / Limits
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	2	
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN 100 UNIT-3.6 MG /ML (3 ML)	2	PA; ST
MISCELLANEOUS HORMONES		
ANDROGEL TRANSDERMAL GEL IN METERED-DOSE PUMP 20.25 MG/1.25 GRAM (1.62 %)	3	ST
ANDROGEL TRANSDERMAL GEL IN PACKET 1 % (25 MG/2.5GRAM), 1 % (50 MG/5 GRAM), 1.62 % (20.25 MG/1.25 GRAM), 1.62 % (40.5 MG/2.5 GRAM)	3	ST
AVEED INTRAMUSCULAR SOLUTION 750 MG/3 ML (250 MG/ML)	4	ST; SP
cabergoline oral tablet 0.5 mg	1	
calcitonin (salmon) injection solution 200 unit/ml	1	
calcitonin (salmon) nasal spray, non-aerosol 200 unit/actuation	1	
calcitriol oral capsule 0.25 mcg, 0.5 mcg	1	
calcitriol oral solution 1 mcg/ml	1	
CERDELGA ORAL CAPSULE 84 MG	4	PA; SP; LA
cinacalcet oral tablet 30 mg, 60 mg, 90 mg	1	PA
danazol oral capsule 100 mg, 200 mg, 50 mg	1	
DDAVP ORAL TABLET 0.1 MG, 0.2 MG	3	
DEPO-TESTOSTERONE INTRAMUSCULAR OIL 100 MG/ML, 200 MG/ML	3	
desmopressin injection solution 4 mcg/ml	4	SP; LA
desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)	1	
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	3	
desmopressin oral tablet 0.1 mg, 0.2 mg	1	
doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg	1	

Drug Name	Tier	Requirements / Limits
GALAFOLD ORAL CAPSULE 123 MG	4	PA; SP; LA
ISTURISA ORAL TABLET 1 MG, 5 MG	4	PA; ST; SP; QL (180 per 30 days)
JATENZO ORAL CAPSULE 158 MG, 198 MG, 237 MG	3	ST
javygtor oral powder in packet 100 mg, 500 mg	4	PA; SP; LA
javygtor oral tablet, soluble 100 mg	4	PA; SP; LA
JYNARQUE ORAL TABLET 15 MG, 30 MG	4	PA; SP; QL (60 per 30 days)
JYNARQUE ORAL TABLETS, SEQUENTIAL 15 MG (AM)/ 15 MG (PM), 30 MG (AM)/ 15 MG (PM), 45 MG (AM)/ 15 MG (PM), 60 MG (AM)/ 30 MG (PM), 90 MG (AM)/ 30 MG (PM)	4	PA; SP; QL (60 per 30 days)
KORLYM ORAL TABLET 300 MG	4	PA; SP
KUVAN ORAL POWDER IN PACKET 100 MG, 500 MG	4	PA; ST; SP; LA
KUVAN ORAL TABLET, SOLUBLE 100 MG	4	PA; ST; SP; LA
KYZATREX ORAL CAPSULE 100 MG, 150 MG, 200 MG	3	ST
METHITEST ORAL TABLET 10 MG	2	ST
methyltestosterone oral capsule 10 mg	1	
MIACALCIN INJECTION SOLUTION 200 UNIT/ML	3	
mifepristone oral tablet 300 mg	4	PA; SP; LA
miglustat oral capsule 100 mg	4	PA; ST; SP; LA
MYALEPT SUBCUTANEOUS RECON SOLN 5 MG/ML (FINAL CONC.)	4	PA; SP; LA; QL (27 per 30 days)
NATESTO NASAL GEL IN METERED-DOSE PUMP 5.5 MG/0.122 GRAM/ACTUATION	3	ST
NOCDURNA (MEN) SUBLINGUAL TABLET, DISINTEGRATING 55.3 MCG	3	
NOCDURNA (WOMEN) SUBLINGUAL TABLET, DISINTEGRATING 27.7 MCG	3	
OPFOLDA ORAL CAPSULE 65 MG	4	PA; SP; LA
ORILISSA ORAL TABLET 150 MG	3	PA; QL (1 per 30 days)
ORILISSA ORAL TABLET 200 MG	3	PA; QL (90 per 30 days)
PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 2.5 MG/0.5 ML, 20 MG/ML	4	PA; ST; SP; LA
paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg	1	
RAYALDEE ORAL CAPSULE, EXTENDED RELEASE 24 HR 30 MCG	3	

Drug Name	Tier	Requirements / Limits
RECORLEV ORAL TABLET 150 MG	4	PA; ST; SP; QL (240 per 30 days)
ROCALTROL ORAL SOLUTION 1 MCG/ML	3	PA; ST
SAMSCA ORAL TABLET 15 MG, 30 MG	4	PA; SP; LA; QL (60 per 30 days)
sapropterin oral powder in packet 100 mg, 500 mg	4	PA; SP; LA
sapropterin oral tablet, soluble 100 mg	4	PA; SP; LA
SENSIPAR ORAL TABLET 30 MG, 60 MG, 90 MG	4	PA; ST; SP
SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	4	PA; ST; SP; LA; QL (30 per 30 days)
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45 ML, 28 MG/0.7 ML, 40 MG/ML, 80 MG/0.8 ML	4	PA; SP
SYNAREL NASAL SPRAY, NON-AEROSOL 2 MG/ML	2	PA; ST; QL (5 per 30 days)
TESTIM TRANSDERMAL GEL 50 MG/5 GRAM (1 %)	3	ST
testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml	1	
testosterone enanthate intramuscular oil 200 mg/ml	1	
testosterone transdermal gel 50 mg/5 gram (1 %)	1	
testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation, 12.5 mg/ 1.25 gram (1 %), 20.25 mg/1.25 gram (1.62 %)	1	
testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram), 1.62 % (20.25 mg/1.25 gram), 1.62 % (40.5 mg/2.5 gram)	1	
testosterone transdermal solution in metered pump w/app 30 mg/actuation (1.5 ml)	1	
TLANDO ORAL CAPSULE 112.5 MG	3	ST
tolvaptan oral tablet 15 mg, 30 mg	4	PA; SP; LA; QL (60 per 30 days)
UNDECATREX ORAL CAPSULE 200 MG	3	PA; ST; QL (120 per 30 days)
VOGELXO TRANSDERMAL GEL 50 MG/5 GRAM (1 %)	3	ST
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP 12.5 MG/ 1.25 GRAM (1 %)	3	ST
VOGELXO TRANSDERMAL GEL IN PACKET 1 % (50 MG/5 GRAM)	3	ST

Drug Name	Tier	Requirements / Limits
VOXZOGO SUBCUTANEOUS RECON SOLN 0.4 MG, 0.56 MG, 1.2 MG	4	PA; SP; LA; QL (30 per 30 days)
XYOSTED SUBCUTANEOUS AUTO-INJECTOR 100 MG/0.5 ML, 50 MG/0.5 ML, 75 MG/0.5 ML	3	ST
YORVIPATH SUBCUTANEOUS PEN INJECTOR 168 MCG/0.56 ML, 294 MCG/0.98 ML, 420 MCG/1.4 ML	4	PA; SP
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	3	
NON-INSULIN HYPOGLYCEMIC AGENTS		
acarbose oral tablet 100 mg, 25 mg, 50 mg	1	
ACTOPLUS MET ORAL TABLET 15-850 MG	3	
ACTOS ORAL TABLET 15 MG, 30 MG, 45 MG	3	
ALOGLIPTIN ORAL TABLET 12.5 MG, 25 MG, 6.25 MG	3	PA; ST
ALOGLIPTIN-METFORMIN ORAL TABLET 12.5-1,000 MG, 12.5-500 MG	3	PA; ST
ALOGLIPTIN-PIOGLITAZONE ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	3	PA; ST
BRENZAVVY ORAL TABLET 20 MG	3	PA; ST
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85 ML	2	PA; ST
BYETTA SUBCUTANEOUS PEN INJECTOR 10 MCG/DOSE (250 MCG/ML) 2.4 ML, 5 MCG/DOSE (250 MCG/ML) 1.2 ML	2	PA; ST
CYCLOSET ORAL TABLET 0.8 MG	3	
DAPAGLIFLOZ PROPANED-METFORMIN ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 5-1,000 MG	3	PA; ST
DAPAGLIFLOZIN PROPANEDIOL ORAL TABLET 10 MG, 5 MG	3	PA; ST
DUETACT ORAL TABLET 30-2 MG, 30-4 MG	3	
FARXIGA ORAL TABLET 10 MG, 5 MG	2	PA; ST
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glipizide oral tablet 10 mg, 5 mg	1	
GLIPIZIDE ORAL TABLET 2.5 MG	3	
glipizide oral tablet extended release 24hr 10 mg, 2.5 mg, 5 mg	1	

Drug Name	Tier	Requirements / Limits
glipizide-metformin oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg	1	
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24HR 10 MG, 2.5 MG, 5 MG	3	
GLUMETZA ORAL TABLET, ER GAST.RETENTION 24 HR 1,000 MG, 500 MG	3	PA; ST
glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg	1	
glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg	1	
glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg	1	
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	2	PA; ST
INPEFA ORAL TABLET 400 MG	3	PA; ST
INVOKAMET ORAL TABLET 150-1,000 MG, 150-500 MG, 50-1,000 MG, 50-500 MG	3	PA; ST
INVOKAMET XR ORAL TABLET, IR - ER, BIPHASIC 24HR 150-1,000 MG, 150-500 MG, 50-1,000 MG, 50-500 MG	3	PA; ST
INVOKANA ORAL TABLET 100 MG, 300 MG	3	PA; ST
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	2	PA; ST
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	2	PA; ST
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	2	PA; ST
JARDIANCE ORAL TABLET 10 MG, 25 MG	2	PA; ST
JENTADUETO ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 2.5-850 MG	2	PA; ST
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG, 5-1,000 MG	2	PA; ST
KAZANO ORAL TABLET 12.5-1,000 MG, 12.5-500 MG	3	PA; ST
metformin oral solution 500 mg/5 ml	1	PA
metformin oral tablet 1,000 mg, 500 mg, 850 mg	1	
METFORMIN ORAL TABLET 625 MG	3	PA; ST
metformin oral tablet extended release 24 hr 500 mg, 750 mg	1	

Drug Name	Tier	Requirements / Limits
metformin oral tablet extended release 24hr 1,000 mg, 500 mg	1	PA; ST
metformin oral tablet, er gast.retention 24 hr 1,000 mg, 500 mg	1	PA; ST
miglitol oral tablet 100 mg, 25 mg, 50 mg	1	
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	2	PA; ST
nateglinide oral tablet 120 mg, 60 mg	1	
NESINA ORAL TABLET 12.5 MG, 25 MG, 6.25 MG	3	PA; ST
OSENI ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	3	PA; ST
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	2	PA; ST
pioglitazone oral tablet 15 mg, 30 mg, 45 mg	1	
pioglitazone-glimepiride oral tablet 30-2 mg, 30-4 mg	1	
pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg	1	
PRECOSE ORAL TABLET 100 MG, 25 MG, 50 MG	3	
QTERN ORAL TABLET 10-5 MG, 5-5 MG	2	PA; ST
repaglinide oral tablet 0.5 mg, 1 mg, 2 mg	1	
RIOMET ORAL SOLUTION 500 MG/5 ML	3	PA; ST
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	2	PA; ST
saxagliptin oral tablet 2.5 mg, 5 mg	1	PA
saxagliptin-metformin oral tablet, er multiphase 24 hr 2.5-1,000 mg, 5-1,000 mg, 5-500 mg	1	PA
SEGLUROMET ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 7.5-1,000 MG, 7.5-500 MG	3	PA; ST
STEGLATRO ORAL TABLET 15 MG, 5 MG	3	PA; ST
STEGLUJAN ORAL TABLET 15-100 MG, 5-100 MG	3	PA; ST
SYMLINPEN 120 SUBCUTANEOUS PEN INJECTOR 2,700 MCG/2.7 ML	2	PA; ST

Drug Name	Tier	Requirements / Limits
SYMLINPEN 60 SUBCUTANEOUS PEN INJECTOR 1,500 MCG/1.5 ML	2	PA; ST
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	2	PA; ST
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 12.5-1,000 MG, 25-1,000 MG, 5-1,000 MG	2	PA; ST
TRADJENTA ORAL TABLET 5 MG	2	PA; ST
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 12.5-2.5-1,000 MG, 25-5-1,000 MG, 5-2.5-1,000 MG	2	PA; ST
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	2	PA; ST
VICTOZA 2-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	2	PA; ST
VICTOZA 3-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	2	PA; ST
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG, 2.5-1,000 MG, 5-1,000 MG, 5-500 MG	2	PA; ST
ZITUVIMET ORAL TABLET 50-1,000 MG, 50-500 MG	3	PA; ST
ZITUVIMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	3	PA; ST
THYROID HORMONES		
adthyza oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	1	
ADTHYZA ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG	3	
ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG	2	
CYTOMEL ORAL TABLET 25 MCG, 5 MCG, 50 MCG	3	
ERMEZA ORAL SOLUTION 30 MCG/ML	3	
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	

Drug Name	Tier	Requirements / Limits
levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	1	
LEVOTHYROXINE ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	3	
levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	1	
levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	
liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg	1	
niva thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	1	
np thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	1	
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	2	
THYQUIDITY ORAL SOLUTION 20 MCG/ML	3	
TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	3	
TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 37.5 MCG/ML, 44 MCG/ML, 50 MCG/ML, 62.5 MCG/ML, 75 MCG/ML, 88 MCG/ML	3	
unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	1	
GASTROENTEROLOGY		
ANTIDIARRHEALS & ANTISPASMODICS		
anaspaz oral tablet, disintegrating 0.125 mg	1	
belladonna alkaloids-opium rectal suppository 16.2-30 mg, 16.2-60 mg	1	PA; ST
chlordiazepoxide-clidinium oral capsule 5-2.5 mg	1	

Drug Name	Tier	Requirements / Limits
CUVPOSA ORAL SOLUTION 1 MG/5 ML (0.2 MG/ML)	3	
DARTISLA ORAL TABLET, DISINTEGRATING 1.7 MG	3	PA
dicyclomine oral capsule 10 mg	1	
dicyclomine oral solution 10 mg/5 ml	1	
dicyclomine oral tablet 20 mg	1	
diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml	1	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	1	
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	3	
DONNATAL ORAL TABLET 16.2-0.1037 -0.0194 MG	3	
ed-spaz oral tablet, disintegrating 0.125 mg	1	
GLYCATE ORAL TABLET 1.5 MG	3	
glycopyrrolate oral solution 1 mg/5 ml (0.2 mg/ml)	1	
glycopyrrolate oral tablet 1 mg, 1.5 mg, 2 mg	1	
hyoscyamine sulfate oral drops 0.125 mg/ml	1	
hyoscyamine sulfate oral elixir 0.125 mg/5 ml	1	
hyoscyamine sulfate oral tablet 0.125 mg	1	
hyoscyamine sulfate oral tablet extended release 12 hr 0.375 mg	1	
hyoscyamine sulfate oral tablet, disintegrating 0.125 mg	1	
hyoscyamine sulfate sublingual tablet 0.125 mg	1	
hyosyne oral drops 0.125 mg/ml	1	
hyosyne oral elixir 0.125 mg/5 ml	1	
LEVBID ORAL TABLET EXTENDED RELEASE 12 HR 0.375 MG	3	
LEVSIN ORAL TABLET 0.125 MG	3	
LEVSIN/SL SUBLINGUAL TABLET 0.125 MG	3	
LIBRAX (WITH CLIDINIUM) ORAL CAPSULE 5-2.5 MG	3	
LOMOTIL ORAL TABLET 2.5-0.025 MG	3	
loperamide oral capsule 2 mg	1	
methscopolamine oral tablet 2.5 mg, 5 mg	1	
MOTOFEN ORAL TABLET 1-0.025 MG	3	

Drug Name	Tier	Requirements / Limits
MYTESI ORAL TABLET, DELAYED RELEASE (DR/EC) 125 MG	4	PA; ST; SP; QL (60 per 30 days)
NULEV ORAL TABLET, DISINTEGRATING 0.125 MG	3	
opium oral tincture 10 mg/ml (morphine)	1	
oscimin oral tablet 0.125 mg	1	
oscimin sl sublingual tablet 0.125 mg	1	
phenobarb-hyoscy-atropine-scop oral elixir 16.2-0.1037 -0.0194 mg/5 ml	1	
phenobarb-hyoscy-atropine-scop oral tablet 16.2-0.1037 -0.0194 mg	1	
phenohytro oral elixir 16.2-0.1037 -0.0194 mg/5 ml	1	
phenohytro oral tablet 16.2-0.1037 -0.0194 mg	1	
ROBINUL FORTE ORAL TABLET 2 MG	3	
ROBINUL ORAL TABLET 1 MG	3	
SYMAX DUOTAB ORAL TABLET, EXT RELEASE MULTIPHASE 0.125 MG-0.25 MG (0.375 MG)	3	
symax fastabs oral tablet, disintegrating 0.125 mg	1	
symax-sl sublingual tablet 0.125 mg	1	
symax-sr oral tablet extended release 12 hr 0.375 mg	1	
MISCELLANEOUS AGENTS		
AURYXIA ORAL TABLET 210 MG IRON	3	PA; ST
FOSRENOL ORAL POWDER IN PACKET 1,000 MG, 750 MG	3	PA; ST
FOSRENOL ORAL TABLET, CHEWABLE 1,000 MG, 500 MG, 750 MG	3	PA
lanthanum oral tablet, chewable 1,000 mg, 500 mg, 750 mg	1	
LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	3	PA; ST; QL (30 per 30 days)
RENVELA ORAL POWDER IN PACKET 0.8 GRAM, 2.4 GRAM	3	PA; ST
RENVELA ORAL TABLET 800 MG	3	PA; ST
sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram	1	
sevelamer carbonate oral tablet 800 mg	1	

Drug Name	Tier	Requirements / Limits
sevelamer hcl oral tablet 400 mg, 800 mg	1	
sodium polystyrene sulfonate oral powder	1	
sps (with sorbitol) oral suspension 15-20 gram/60 ml	1	
sps (with sorbitol) rectal enema 30-40 gram/120 ml	1	
VELPHORO ORAL TABLET, CHEWABLE 500 MG	3	PA; ST
VELTASSA ORAL POWDER IN PACKET 16.8 GRAM, 25.2 GRAM, 8.4 GRAM	4	PA; ST; SP
XPHOZAH ORAL TABLET 20 MG, 30 MG	4	PA; ST; SP
MISCELLANEOUS GASTROINTESTINAL AGENTS		
AKYNZEO (NETUPITANT) ORAL CAPSULE 300-0.5 MG	3	
alosetron oral tablet 0.5 mg, 1 mg	1	
alvimopan oral capsule 12 mg	1	
AMITIZA ORAL CAPSULE 24 MCG, 8 MCG	3	PA; ST
ANA-LEX RECTAL KIT 2-2 %	3	ST
ANALPRAM-HC RECTAL CREAM 1-1 %, 2.5-1 %	2	
ANTIVERT ORAL TABLET 50 MG	3	
ANTIVERT ORAL TABLET, CHEWABLE 25 MG	3	
anucort-hc rectal suppository 25 mg	1	
ANUSOL-HC RECTAL SUPPOSITORY 25 MG	3	ST
ANUSOL-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	3	ST
aprepitant oral capsule 125 mg, 40 mg, 80 mg	1	
aprepitant oral capsule, dose pack 125 mg (1)- 80 mg (2)	1	
APRISO ORAL CAPSULE, EXTENDED RELEASE 24HR 0.375 GRAM	3	PA; ST
AZULFIDINE EN-TABS ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	3	
AZULFIDINE ORAL TABLET 500 MG	3	
balsalazide oral capsule 750 mg	1	
betaine oral powder 1 gram/scoop	4	PA; ST; SP

Drug Name	Tier	Requirements / Limits
BONJESTA ORAL TABLET, IR, DELAYED REL, BIPHASIC 20-20 MG	3	PA; ST
budesonide oral capsule, delayed, extend.release 3 mg	1	
budesonide oral tablet, delayed and ext.release 9 mg	1	
budesonide rectal foam 2 mg/actuation	1	
BYLVAY ORAL CAPSULE 1,200 MCG	4	PA; ST; SP; LA; QL (150 per 30 days)
BYLVAY ORAL CAPSULE 400 MCG	4	PA; ST; SP; LA; QL (450 per 30 days)
BYLVAY ORAL PELLET 200 MCG	4	PA; ST; SP; LA; QL (900 per 30 days)
BYLVAY ORAL PELLET 600 MCG	4	PA; ST; SP; LA; QL (300 per 30 days)
CANASA RECTAL SUPPOSITORY 1,000 MG	3	
CHENODAL ORAL TABLET 250 MG	4	SP
CHOLBAM ORAL CAPSULE 250 MG, 50 MG	4	PA; SP
CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS)	4	PA; ST; SP; LA
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	4	PA; ST; SP; LA
CLENPIQ ORAL SOLUTION 10 MG-3.5 GRAM- 12 GRAM/175 ML	3	ACA PV
COLAZAL ORAL CAPSULE 750 MG	3	PA; ST
COMPAZINE ORAL TABLET 10 MG, 5 MG	3	
COMPAZINE RECTAL SUPPOSITORY 25 MG	3	
compro rectal suppository 25 mg	1	
constulose oral solution 10 gram/15 ml	1	
CORTENEMA RECTAL ENEMA 100 MG/60 ML	3	
CORTIFOAM RECTAL FOAM 10 % (80 MG)	2	PA
CREON ORAL CAPSULE,DELAYED RELEASE (DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT	2	
cromolyn oral concentrate 100 mg/5 ml	1	

Drug Name	Tier	Requirements / Limits
CYSTADANE ORAL POWDER 1 GRAM/SCOOP	4	PA; ST; SP
DELZICOL ORAL CAPSULE (WITH DEL REL TABLETS) 400 MG	3	PA; ST
DICLEGIS ORAL TABLET, DELAYED RELEASE (DR/EC) 10-10 MG	3	PA; ST
DIPENTUM ORAL CAPSULE 250 MG	3	PA; ST
doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec) 10-10 mg	1	
dronabinol oral capsule 10 mg, 2.5 mg, 5 mg	1	
EMEND ORAL CAPSULE 80 MG	3	
EMEND ORAL CAPSULE, DOSE PACK 125 MG (1)- 80 MG (2)	3	
EMEND ORAL SUSPENSION FOR RECONSTITUTION 125 MG (25 MG/ ML FINAL CONC.)	2	
enulose oral solution 10 gram/15 ml	1	
GASTROCROM ORAL CONCENTRATE 100 MG/5 ML	3	
GATTEX 30-VIAL SUBCUTANEOUS KIT 5 MG	4	PA; SP; LA
gavilyte-c oral recon soln 240-22.72-6.72 -5.84 gram	1	ACA PV
gavilyte-g oral recon soln 236-22.74-6.74 -5.86 gram	1	ACA PV
gavilyte-n oral recon soln 420 gram	1	ACA PV
generlac oral solution 10 gram/15 ml	1	
gentle laxative (mag hydrox) oral suspension 400 mg/5 ml	1	ACA PV
GIMOTI NASAL SPRAY WITH PUMP 15 MG/SPRAY	4	PA; ST; SP
GOLYTELY ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM	3	
granisetron hcl oral tablet 1 mg	1	
hemmorex-hc rectal suppository 25 mg, 30 mg	1	
hydrocortisone acetate rectal suppository 25 mg, 30 mg	1	
hydrocortisone rectal enema 100 mg/60 ml	1	
hydrocortisone topical cream with perineal applicator 1 %, 2.5 %	1	

Drug Name	Tier	Requirements / Limits
hydrocortisone-pramoxine rectal cream 1-1 %, 2.5-1 %, 2.5-1 % (4g)	1	
HYDROCORTISONE-PRAMOXINE RECTAL SUPPOSITORY 25-18 MG	3	ST
IBSRELA ORAL TABLET 50 MG	3	PA; ST
IQIRVO ORAL TABLET 80 MG	4	PA; ST; SP; LA
KRISTALOSE ORAL PACKET 10 GRAM, 20 GRAM	2	
lactulose oral packet 10 gram	1	
lactulose oral solution 10 gram/15 ml, 20 gram/30 ml	1	
LIALDA ORAL TABLET, DELAYED RELEASE (DR/EC) 1.2 GRAM	3	PA; ST
lidocaine hcl-hydrocortison ac rectal cream 3-0.5 %	1	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL 3 %-2.5 % (7 GRAM)	3	
lidocaine hcl-hydrocortison ac rectal kit 2 %-2 % (7 gram), 3-0.5 %, 3-1 % (7 gram)	1	ST
lidocaine-hydrocortisone-aloe rectal gel 2.8-0.55 %	1	
lidocaine-hydrocortisone-aloe rectal kit 3-2.5 % (7 gram)	1	ST
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	2	PA; ST
LIVDELZI ORAL CAPSULE 10 MG	4	PA; SP
LIVMARLI ORAL SOLUTION 19 MG/ML	4	PA; SP
LIVMARLI ORAL SOLUTION 9.5 MG/ML	4	PA; ST; SP; QL (3 per 30 days)
LOTRONEX ORAL TABLET 0.5 MG, 1 MG	3	
lubiprostone oral capsule 24 mcg, 8 mcg	1	
MARINOL ORAL CAPSULE 10 MG, 2.5 MG, 5 MG	3	
meclizine oral tablet 12.5 mg, 25 mg	1	
MECLIZINE ORAL TABLET 50 MG	3	
mesalamine oral capsule (with del rel tablets) 400 mg	1	
mesalamine oral capsule, extended release 500 mg	1	
mesalamine oral capsule, extended release 24hr 0.375 gram	1	

Drug Name	Tier	Requirements / Limits
mesalamine oral tablet, delayed release (dr/ec) 1.2 gram, 800 mg	1	
mesalamine rectal enema 4 gram/60 ml	1	
mesalamine rectal suppository 1,000 mg	1	
metoclopramide hcl oral solution 5 mg/5 ml	1	
metoclopramide hcl oral tablet 10 mg, 5 mg	1	
MOTEGRITY ORAL TABLET 1 MG, 2 MG	3	PA; ST
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	3	PA; ST
MOVIPREP ORAL POWDER IN PACKET 100-7.5-2.691 GRAM	3	
nitroglycerin rectal ointment 0.4 % (w/w)	1	
OCALIVA ORAL TABLET 10 MG, 5 MG	4	PA; ST; SP; LA; QL (30 per 30 days)
OMVOH PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML	4	PA; ST; SP; LA
OMVOH SUBCUTANEOUS SYRINGE 100 MG/ML	4	PA; ST; SP; LA
ondansetron hcl (pf) injection solution 4 mg/2 ml	1	
ondansetron hcl oral solution 4 mg/5 ml	1	
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron oral tablet, disintegrating 4 mg, 8 mg	1	
PANCREAZE ORAL CAPSULE, DELAYED RELEASE (DR/EC) 10,500-35,500- 61,500 UNIT, 16,800-56,800- 98,400 UNIT, 2,600-8,800-15,200 UNIT, 21,000-54,700- 83,900 UNIT, 37,000-97,300- 149,900 UNIT, 4,200-14,200-24,600 UNIT	3	PA; ST
peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram	1	ACA PV
peg3350-sod sul-nacl-kcl-asb-c oral powder in packet 100-7.5-2.691 gram	1	ACA PV
peg-electrolyte oral recon soln 420 gram	1	ACA PV
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG, 500 MG	3	PA; ST
PERTZYE ORAL CAPSULE, DELAYED RELEASE (DR/EC) 16,000-57,500- 60,500 UNIT, 24,000-86,250- 90,750 UNIT, 4,000-14,375- 15,125 UNIT, 8,000-28,750- 30,250 UNIT	3	PA; ST
PLENVU ORAL POWDER IN PACKET, SEQUENTIAL 140-9-5.2 GRAM	3	ACA PV

Drug Name	Tier	Requirements / Limits
prochlorperazine maleate oral tablet 10 mg, 5 mg	1	
prochlorperazine rectal suppository 25 mg	1	
PROCORT RECTAL CREAM 1.85-1.15 %	3	
PROCTOCORT RECTAL SUPPOSITORY 30 MG	3	ST
PROCTOFOAM HC RECTAL FOAM 1-1 %	3	
procto-med hc topical cream with perineal applicator 2.5 %	1	
proctosol hc topical cream with perineal applicator 2.5 %	1	
proctozone-hc topical cream with perineal applicator 2.5 %	1	
RECTIV RECTAL OINTMENT 0.4 % (W/W)	3	
REGLAN ORAL TABLET 10 MG, 5 MG	3	
RELISTOR ORAL TABLET 150 MG	3	
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6 ML	3	
RELISTOR SUBCUTANEOUS SYRINGE 12 MG/0.6 ML, 8 MG/0.4 ML	3	
RELTONE ORAL CAPSULE 200 MG, 400 MG	3	
ROWASA RECTAL ENEMA KIT 4 GRAM/60 ML	3	ST
SANCUSO TRANSDERMAL PATCH WEEKLY 3.1 MG/24 HOUR	3	
scopolamine base transdermal patch 3 day 1 mg over 3 days	1	
SFROWASA RECTAL ENEMA 4 GRAM/60 ML	3	
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML), 360 MG/2.4 ML (150 MG/ML)	4	PA; ST; SP; LA
sodium, potassium, mag sulfates oral recon soln 17.5-3.13-1.6 gram	1	ACA PV
SUCRAID ORAL SOLUTION 8,500 UNIT/ML	4	PA; ST; SP; QL (2 per 30 days)
SUFLAVE ORAL RECON SOLN 178.7-7.3-0.5 GRAM	3	ACA PV
sulfasalazine oral tablet 500 mg	1	
sulfasalazine oral tablet, delayed release (dr/ec) 500 mg	1	

Drug Name	Tier	Requirements / Limits
SUPREP BOWEL PREP KIT ORAL RECON SOLN 17.5-3.13-1.6 GRAM	3	
SUTAB ORAL TABLET 1.479-0.188- 0.225 GRAM	3	ACA PV
SYMPROIC ORAL TABLET 0.2 MG	3	
SYNDROS ORAL SOLUTION 5 MG/ML	3	
TRANSDERM-SCOP TRANSDERMAL PATCH 3 DAY 1 MG OVER 3 DAYS	3	
trimethobenzamide oral capsule 300 mg	1	
TRULANCE ORAL TABLET 3 MG	3	PA; ST
UCERIS ORAL TABLET, DELAYED AND EXT.RELEASE 9 MG	3	PA; ST
UCERIS RECTAL FOAM 2 MG/ACTUATION	3	PA
URSO FORTE ORAL TABLET 500 MG	3	
ursodiol oral capsule 200 mg, 300 mg, 400 mg	1	
ursodiol oral tablet 250 mg, 500 mg	1	
VARUBI ORAL TABLET 90 MG	3	
VELSIPITY ORAL TABLET 2 MG	4	PA; ST; SP; LA
VIBERZI ORAL TABLET 100 MG, 75 MG	2	PA; ST; QL (60 per 30 days)
VIOKACE ORAL TABLET 10,440-39,150-39,150 UNIT, 20,880-78,300- 78,300 UNIT	2	
VOWST ORAL CAPSULE	4	PA; SP
ZENPEP ORAL CAPSULE, DELAYED RELEASE (DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	2	
ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT 120 MG/ML	4	PA; ST; SP
ZYMFENTRA SUBCUTANEOUS SYRINGE KIT 120 MG/ML	4	PA; ST; SP
ULCER THERAPY		
ACIPHEX ORAL TABLET, DELAYED RELEASE (DR/EC) 20 MG	3	ST
amoxicil-clarithromy-lansopraz oral combo pack 500-500-30 mg	1	

Drug Name	Tier	Requirements / Limits
bismuth subcit k-metronidz-tcn oral capsule 140-125-125 mg	1	PA
CARAFATE ORAL SUSPENSION 100 MG/ML	3	
CARAFATE ORAL TABLET 1 GRAM	3	
cimetidine hcl oral solution 300 mg/5 ml	1	
cimetidine oral tablet 200 mg, 300 mg, 400 mg, 800 mg	1	
CYTOTEC ORAL TABLET 100 MCG, 200 MCG	3	
DEXILANT ORAL CAPSULE, BIPHASE DELAYED RELEAS 30 MG, 60 MG	3	ST
dexlansoprazole oral capsule, biphase delayed releas 30 mg, 60 mg	1	ST
esomeprazole magnesium oral capsule, delayed release (dr/ec) 40 mg	1	
esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg, 40 mg	1	
famotidine oral suspension for reconstitution 40 mg/5 ml (8 mg/ml)	1	
famotidine oral tablet 20 mg, 40 mg	1	
KONVOMEP ORAL SUSPENSION FOR RECONSTITUTION 2-84 MG/ML	3	ST
lansoprazole oral capsule, delayed release (dr/ec) 15 mg, 30 mg	1	
lansoprazole oral tablet, disintegrat, delay rel 15 mg, 30 mg	1	
misoprostol oral tablet 100 mcg, 200 mcg	1	
NEXIUM ORAL CAPSULE, DELAYED RELEASE(DR/EC) 20 MG, 40 MG	3	ST
NEXIUM ORAL GRANULES DR FOR SUSP IN PACKET 10 MG, 20 MG, 40 MG	3	ST
NEXIUM ORAL GRANULES DR FOR SUSP IN PACKET 2.5 MG, 5 MG	2	ST
nizatidine oral capsule 150 mg, 300 mg	1	
OMECLAMOX-PAK ORAL COMBO PACK 20 MG-500 MG- 500 MG (40)	3	PA; ST
omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg, 40 mg	1	
omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram, 40-1.1 mg-gram	1	ST

Drug Name	Tier	Requirements / Limits
omeprazole-sodium bicarbonate oral packet 20-1,680 mg, 40-1,680 mg	1	ST
pantoprazole oral granules dr for susp in packet 40 mg	1	
pantoprazole oral tablet, delayed release (dr/ec) 20 mg, 40 mg	1	
PEPCID ORAL TABLET 20 MG, 40 MG	3	
PREVACID ORAL CAPSULE, DELAYED RELEASE (DR/EC) 30 MG	3	ST
PREVACID SOLUTAB ORAL TABLET, DISINTEGRAT, DELAY REL 15 MG, 30 MG	3	ST
PRILOSEC ORAL SUSP, DELAYED RELEASE FOR RECON 10 MG, 2.5 MG	3	ST
PROTONIX ORAL GRANULES DR FOR SUSP IN PACKET 40 MG	3	ST
PROTONIX ORAL TABLET, DELAYED RELEASE (DR/EC) 20 MG, 40 MG	3	ST
PYLERA ORAL CAPSULE 140-125-125 MG	3	PA
RABEPRAZOLE ORAL CAPSULE, DELAYED REL SPRINKLE 10 MG	3	ST
rabeprazole oral tablet, delayed release (dr/ec) 20 mg	1	
sucralfate oral suspension 100 mg/ml	1	
sucralfate oral tablet 1 gram	1	
TALICIA ORAL CAPSULE, IR - DELAY REL, BIPHASE 10-250-12.5 MG	3	PA; ST
VOQUEZNA DUAL PAK ORAL COMBO PACK 20 MG (28)- 500 MG (84)	3	PA; ST
VOQUEZNA ORAL TABLET 10 MG, 20 MG	3	PA; ST
VOQUEZNA TRIPLE PAK ORAL COMBO PACK 20-500-500 MG	3	PA; ST
ZEGERID ORAL CAPSULE 20-1.1 MG-GRAM, 40-1.1 MG-GRAM	3	ST
ZEGERID ORAL PACKET 20-1,680 MG, 40-1,680 MG	3	ST
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY		
ANTIVIRALS		
ribavirin oral capsule 200 mg	4	SP; LA
ribavirin oral tablet 200 mg	4	SP; LA

Drug Name	Tier	Requirements / Limits
BIOTECHNOLOGY DRUGS		
ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	4	PA; SP; LA
ARANESP (IN POLYSORBATE) INJECTION SYRINGE 10 MCG/0.4 ML, 100 MCG/0.5 ML, 150 MCG/0.3 ML, 200 MCG/0.4 ML, 25 MCG/0.42 ML, 300 MCG/0.6 ML, 40 MCG/0.4 ML, 500 MCG/ML, 60 MCG/0.3 ML	4	PA; SP; LA
ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	4	PA; SP
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	4	PA; SP; LA
EPOGEN INJECTION SOLUTION 2,000 UNIT/ML	4	PA; ST; SP; LA
FULPHILA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; ST; SP
FYLNETRA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; ST; SP
GRANIX SUBCUTANEOUS SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	4	SP
GRANIX SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	SP
ILARIS (PF) SUBCUTANEOUS SOLUTION 150 MG/ML	4	PA; ST; SP; LA; QL (1 per 90 days)
LEUKINE INJECTION RECON SOLN 250 MCG	4	PA; SP
MIRCERA INJECTION SYRINGE 100 MCG/0.3 ML, 120 MCG/0.3 ML, 150 MCG/0.3 ML, 200 MCG/0.3 ML, 30 MCG/0.3 ML, 50 MCG/0.3 ML, 75 MCG/0.3 ML	4	PA; SP
MOZOBIL SUBCUTANEOUS SOLUTION 24 MG/1.2 ML (20 MG/ML)	4	SP; LA
NEULASTA ONPRO SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	4	PA; ST; SP
NEULASTA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; ST; SP
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	4	PA; ST; SP
NEUPOGEN INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	PA; ST; SP

Drug Name	Tier	Requirements / Limits
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	4	SP
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	SP
NYVEPRIA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; ST; SP
plerixafor subcutaneous solution 24 mg/1.2 ml (20 mg/ml)	4	SP
PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	4	PA; SP; LA
RELEUKO SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	PA; ST; SP
RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	4	PA; SP; LA
STIMUFEND SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; ST; SP
UDENYCA AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 6 MG/0.6 ML	4	PA; ST; SP
UDENYCA ONBODY SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	4	PA; ST; SP
UDENYCA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; ST; SP
XOLREMDI ORAL CAPSULE 100 MG	4	PA; SP
ZARXIO INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	PA; ST; SP
ZIEXTENZO SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; ST; SP
GROWTH HORMONES		
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	4	PA; ST; SP; LA
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML)	4	PA; ST; SP; LA

Drug Name	Tier	Requirements / Limits
HUMATROPE INJECTION CARTRIDGE 12 MG (36 UNIT), 24 MG (72 UNIT), 6 MG (18 UNIT)	4	PA; ST; SP; LA
NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 30 MG/3 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	4	PA; ST; SP; LA
NUTROPIN AQ NUSPIN SUBCUTANEOUS PEN INJECTOR 10 MG/2 ML (5 MG/ML), 20 MG/2 ML (10 MG/ML), 5 MG/2 ML (2.5 MG/ML)	4	PA; ST; SP; LA
OMNITROPE SUBCUTANEOUS CARTRIDGE 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	4	PA; ST; SP; LA
OMNITROPE SUBCUTANEOUS RECON SOLN 5.8 MG	4	PA; ST; SP; LA
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	4	PA; ST; SP; LA
SKYTROFA SUBCUTANEOUS CARTRIDGE 11 MG, 13.3 MG, 3 MG, 3.6 MG, 4.3 MG, 5.2 MG, 6.3 MG, 7.6 MG, 9.1 MG	4	PA; ST; SP; LA
SOGROYA SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	4	PA; SP; LA
ZOMACTON SUBCUTANEOUS RECON SOLN 10 MG, 5 MG	4	PA; ST; SP; LA
INTERFERONS		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	4	PA; SP; LA
ALFERON N INJECTION SOLUTION 5 MILLION UNIT/ML	2	
BESREMI SUBCUTANEOUS SYRINGE 500 MCG/ML	4	PA; SP
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	4	PA; SP; LA
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	4	PA; SP; LA
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO ORAL TABLET 14 MG, 7 MG	4	PA; ST; SP; LA
AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML	4	PA; SP; LA

Drug Name	Tier	Requirements / Limits
AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML	4	PA; SP; LA
BAFIERTAM ORAL CAPSULE, DELAYED RELEASE (DR/EC) 95 MG	4	PA; ST; SP; LA; QL (120 per 30 days)
BETASERON SUBCUTANEOUS KIT 0.3 MG	4	PA; SP; LA
COPAXONE SUBCUTANEOUS SYRINGE 20 MG/ML, 40 MG/ML	4	PA; ST; SP; LA
dimethyl fumarate oral capsule, delayed release (dr/ec) 120 mg (14)- 240 mg (46)	4	PA; SP; LA; QL (1 per 365 days)
dimethyl fumarate oral capsule, delayed release (dr/ec) 120 mg, 240 mg	4	PA; SP; LA; QL (60 per 30 days)
fingolimod oral capsule 0.5 mg	4	PA; SP; LA
GILENYA ORAL CAPSULE 0.25 MG, 0.5 MG	4	PA; ST; SP; LA
glatiramer subcutaneous syringe 20 mg/ml, 40 mg/ml	4	PA; SP; LA
glatopa subcutaneous syringe 20 mg/ml, 40 mg/ml	4	PA; SP; LA
KESIMPTA SUBCUTANEOUS PEN INJECTOR 20 MG/0.4 ML	4	PA; SP; LA
MAVENCLAD (10 TABLET PACK) ORAL TABLET 10 MG	4	PA; ST; SP; LA; QL (40 per 720 days)
MAVENCLAD (4 TABLET PACK) ORAL TABLET 10 MG	4	PA; ST; SP; LA; QL (16 per 720 days)
MAVENCLAD (5 TABLET PACK) ORAL TABLET 10 MG	4	PA; ST; SP; LA; QL (20 per 720 days)
MAVENCLAD (6 TABLET PACK) ORAL TABLET 10 MG	4	PA; ST; SP; LA; QL (24 per 720 days)
MAVENCLAD (7 TABLET PACK) ORAL TABLET 10 MG	4	PA; ST; SP; LA; QL (28 per 720 days)
MAVENCLAD (8 TABLET PACK) ORAL TABLET 10 MG	4	PA; ST; SP; LA; QL (32 per 720 days)
MAVENCLAD (9 TABLET PACK) ORAL TABLET 10 MG	4	PA; ST; SP; LA; QL (36 per 720 days)
MAYZENT ORAL TABLET 0.25 MG, 1 MG, 2 MG	4	PA; SP; LA
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS, DOSE PACK 0.25 MG (7 TABS)	4	PA; SP; LA
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS, DOSE PACK 0.25 MG (12 TABS)	4	PA; SP; LA

Drug Name	Tier	Requirements / Limits
PLEGRIDY INTRAMUSCULAR SYRINGE 125 MCG/0.5 ML	4	PA; SP; LA
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	4	PA; SP; LA
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	4	PA; SP; LA
PONVORY 14-DAY STARTER PACK ORAL TABLETS, DOSE PACK 2 MG (2) - 10 MG (3)	4	PA; SP; LA; QL (1 per 365 days)
PONVORY ORAL TABLET 20 MG	4	PA; SP; LA; QL (30 per 30 days)
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML	4	PA; SP; LA
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML, 8.8MCG/0.2ML-22 MCG/0.5ML (6)	4	PA; SP; LA
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6)	4	PA; SP; LA
TASCENSO ODT ORAL TABLET, DISINTEGRATING 0.25 MG	4	PA; ST; SP; LA; QL (60 per 30 days)
TASCENSO ODT ORAL TABLET, DISINTEGRATING 0.5 MG	4	PA; ST; SP; LA; QL (30 per 30 days)
TECFIDERA ORAL CAPSULE, DELAYED RELEASE (DR/EC) 120 MG	4	PA; ST; SP; LA; QL (120 per 30 days)
TECFIDERA ORAL CAPSULE, DELAYED RELEASE (DR/EC) 120 MG (14)- 240 MG (46)	4	PA; ST; SP; LA; QL (1 per 365 days)
TECFIDERA ORAL CAPSULE, DELAYED RELEASE (DR/EC) 240 MG	4	PA; ST; SP; LA; QL (60 per 30 days)
teriflunomide oral tablet 14 mg, 7 mg	4	PA; SP; LA
VUMERITY ORAL CAPSULE, DELAYED RELEASE(DR/EC) 231 MG	4	PA; ST; SP; LA; QL (120 per 30 days)
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO (PF) INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML	2	Vac; ACA PV
ACAM2000 (NATIONAL STOCKPILE) PERCUTANEOUS RECON SOLN 1-5X10EXP8 UNIT/ML	2	Vac
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	2	Vac; ACA PV
ADACEL (TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	2	Vac; ACA PV

Drug Name	Tier	Requirements / Limits
ADACEL (TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	2	Vac; ACA PV
AFLURIA TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV
AFLURIA TRIV 2024-2025 INTRAMUSCULAR SUSPENSION 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML	2	Vac; ACA PV
AUDENZ (NATIONAL STOCKPILE) INTRAMUSCULAR EMULSION 7.5 MCG/0.5 ML	2	Vac; ACA PV
AUDENZ(PF)(NATIONAL STOCKPILE) INTRAMUSCULAR SYRINGE 7.5 MCG/0.5 ML	2	Vac; ACA PV
BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION 50 MG	2	Vac
BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	2	Vac; ACA PV
BIOTHRAX INTRAMUSCULAR SUSPENSION 0.5 ML/DOSE	2	Vac; ACA PV
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	2	Vac; ACA PV
CAPVAXIVE INTRAMUSCULAR SYRINGE 0.5 ML	2	Vac; ACA PV
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML	2	Vac; ACA PV
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	2	Vac; ACA PV
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	2	Vac; ACA PV
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	2	Vac; ACA PV
FLUAD TRIV 2024-25(65Y UP)(PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV
FLUARIX TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV

Drug Name	Tier	Requirements / Limits
FLUBLOK TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE 135 MCG (45 MCG X 3)/0.5 ML	2	Vac; ACA PV
FLUCELVAX TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV
FLUCELVAX TRIV 2024-2025 INTRAMUSCULAR SUSPENSION 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV
FLULAVAL TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV
FLUMIST TRIVALENT 2024-2025 NASAL NASAL SPRAY SYRINGE 10EXP6.5-7.5 FF UNIT/0.2 ML	2	Vac; ACA PV
FLUZONE HIGH-DOSE TRIV 24-25 INTRAMUSCULAR SYRINGE 180 MCG/0.5 ML	2	Vac; ACA PV
FLUZONE TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV
FLUZONE TRIV 2024-2025 INTRAMUSCULAR SUSPENSION 45 MCG (15 MCG X 3)/0.5 ML	2	Vac; ACA PV
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	2	Vac; ACA PV
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	2	Vac; ACA PV
GRASTEK SUBLINGUAL TABLET 2,800 BAU	3	PA; ST
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML	2	Vac; ACA PV
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	2	Vac; ACA PV
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	2	Vac; ACA PV
IMOVAX RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN 2.5 UNIT	2	Vac; ACA PV
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	2	Vac; ACA PV
IPOL INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	2	Vac; ACA PV

Drug Name	Tier	Requirements / Limits
IXCHIQ (PF) INTRAMUSCULAR RECON SOLN 1,000 TCID50/0.5 ML	3	Vac; ACA PV
IXIARO (PF) INTRAMUSCULAR SYRINGE 6 MCG/0.5 ML	2	Vac; ACA PV
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	2	Vac; ACA PV
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	2	Vac; ACA PV
MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML	2	Vac; ACA PV
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	2	Vac; ACA PV
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION 10-5 MCG/0.5 ML	2	Vac; ACA PV
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	2	Vac; ACA PV
MRESVIA (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	2	Vac; ACA PV
ODACTRA SUBLINGUAL TABLET 12 SQ-HDM	3	PA; ST
ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY	4	PA; ST; SP
PALFORZIA (LEVEL 1) ORAL CAPSULE, SPRINKLE 3 MG (1 MG X 3)	4	PA; SP; QL (30 per 30 days)
PALFORZIA (LEVEL 2) ORAL CAPSULE, SPRINKLE 6 MG (1 MG X 6)	4	PA; SP; QL (30 per 30 days)
PALFORZIA (LEVEL 3) ORAL CAPSULE, SPRINKLE 12 MG (1 MG X 2, 10 MG X 1)	4	PA; SP; QL (30 per 30 days)
PALFORZIA (LEVEL 4) ORAL CAPSULE, SPRINKLE 20 MG	4	PA; SP; QL (30 per 30 days)
PALFORZIA (LEVEL 5) ORAL CAPSULE, SPRINKLE 40 MG (20 MG X 2)	4	PA; SP; QL (30 per 30 days)
PALFORZIA (LEVEL 6) ORAL CAPSULE, SPRINKLE 80 MG (20 MG X 4)	4	PA; SP; QL (30 per 30 days)
PALFORZIA (LEVEL 7) ORAL CAPSULE, SPRINKLE 120 MG (20 MG X 1, 100 MG X 1)	4	PA; SP; QL (30 per 30 days)
PALFORZIA (LEVEL 8) ORAL CAPSULE, SPRINKLE 160 MG (20 MG X 3, 100 MG X1)	4	PA; SP; QL (30 per 30 days)
PALFORZIA (LEVEL 9) ORAL CAPSULE, SPRINKLE 200 MG (100 MG X 2)	4	PA; SP; QL (30 per 30 days)

Drug Name	Tier	Requirements / Limits
PALFORZIA (LEVEL 10) ORAL CAPSULE, SPRINKLE 240 MG (20 MG X 2, 100 MG X 2)	4	PA; SP; QL (30 per 30 days)
PALFORZIA INITIAL DOSE ORAL CAPSULE, SPRINKLE 0.5/1/1.5/3/6 MG	4	PA; SP; QL (30 per 30 days)
PALFORZIA LEVEL 11 MAINTENANCE ORAL POWDER IN PACKET 300 MG	4	PA; SP; QL (30 per 30 days)
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	2	Vac; ACA PV
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	2	Vac; ACA PV
PENBRAYA (PF) INTRAMUSCULAR KIT 5-120 MCG/0.5 ML	2	Vac; ACA PV
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-48MCG-62DU -10 MCG/0.5ML	2	Vac; ACA PV
PNEUMOVAX-23 INJECTION SYRINGE 25 MCG/0.5 ML	3	Vac; ACA PV
PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	2	Vac; ACA PV
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	2	Vac; ACA PV
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	2	Vac; ACA PV
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	2	Vac; ACA PV
QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML	2	Vac; ACA PV
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 2.5 UNIT	2	Vac; ACA PV
RAGWITEK SUBLINGUAL TABLET 12 AMB A 1 UNIT	3	PA; ST
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	2	Vac; ACA PV
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML	2	Vac; ACA PV
ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML	2	ACA PV
ROTATEQ VACCINE ORAL SOLUTION 2 ML	3	ACA PV

Drug Name	Tier	Requirements / Limits
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	2	Vac; ACA PV
STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,000 UNIT/0.5 ML	2	Vac; ACA PV
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF UNIT/0.5 ML	2	Vac; ACA PV
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	2	Vac; ACA PV
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	2	Vac; ACA PV
TICOVAC INTRAMUSCULAR SYRINGE 2.4 MCG/0.5 ML	3	ACA PV
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	2	Vac; ACA PV
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	2	Vac; ACA PV
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5 ML	2	Vac; ACA PV
TYPHIM VI INTRAMUSCULAR SYRINGE 25 MCG/0.5 ML	2	Vac; ACA PV
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML, 50 UNIT/ML	2	Vac; ACA PV
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML, 50 UNIT/ML	2	Vac; ACA PV
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	2	Vac; ACA PV
VAXCHORA VACCINE ORAL SUSPENSION FOR RECONSTITUTION 4X10EXP8 TO 2X 10EXP9 CF UNIT	2	ACA PV
VAXELIS (PF) INTRAMUSCULAR SUSPENSION 15 UNIT-5 UNIT- 10 MCG/0.5 ML	2	Vac; ACA PV
VAXELIS (PF) INTRAMUSCULAR SYRINGE 15 UNIT-5 UNIT- 10 MCG/0.5 ML	2	Vac; ACA PV
VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE 0.5 ML	3	Vac; ACA PV
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10 EXP4.74 UNIT/0.5 ML	2	Vac; ACA PV

Drug Name	Tier	Requirements / Limits
IMMUNOLOGY		
INTERLEUKINS		
imiquimod topical cream in metered-dose pump 3.75 %	1	
imiquimod topical cream in packet 3.75 %	1	ST
imiquimod topical cream in packet 5 %	1	
ZYCLARA TOPICAL CREAM IN METERED-DOSE PUMP 2.5 %, 3.75 %	3	PA; ST
ZYCLARA TOPICAL CREAM IN PACKET 3.75 %	3	PA; ST
MUSCULOSKELETAL & RHEUMATOLOGY		
GOUT THERAPY		
allopurinol oral tablet 100 mg, 200 mg, 300 mg	1	
colchicine oral capsule 0.6 mg	1	
colchicine oral tablet 0.6 mg	1	
COLCRYS ORAL TABLET 0.6 MG	3	
febuxostat oral tablet 40 mg, 80 mg	1	
GLOPERBA ORAL SOLUTION 0.6 MG/5 ML	3	PA; ST
MITIGARE ORAL CAPSULE 0.6 MG	3	ST
probenecid oral tablet 500 mg	1	
probenecid-colchicine oral tablet 500-0.5 mg	1	
ULORIC ORAL TABLET 40 MG, 80 MG	3	ST
ZYLOPRIM ORAL TABLET 100 MG	3	ST
OSTEOPOROSIS THERAPY		
ACTONEL ORAL TABLET 150 MG, 35 MG	3	
alendronate oral solution 70 mg/75 ml	1	
alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg	1	
ATELVIA ORAL TABLET, DELAYED RELEASE (DR/EC) 35 MG	3	
BINOSTO ORAL TABLET, EFFERVESCENT 70 MG	3	
EVENITY SUBCUTANEOUS SYRINGE 105 MG/1.17 ML	4	PA; ST; SP; LA; QL (2 per 30 days)
EVENITY SUBCUTANEOUS SYRINGE 210MG/2.34ML (105MG/1.17MLX2)	4	PA; ST; SP; LA; QL (1 per 30 days)
EVISTA ORAL TABLET 60 MG	3	PA; ST; QL (30 per 30 days)

Drug Name	Tier	Requirements / Limits
FORTEO SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (600MCG/2.4ML)	4	PA; ST; SP; LA; QL (1 per 30 days)
FOSAMAX ORAL TABLET 70 MG	3	
FOSAMAX PLUS D ORAL TABLET 70 MG- 2, 800 UNIT, 70 MG- 5, 600 UNIT	3	
ibandronate oral tablet 150 mg	1	
PROLIA SUBCUTANEOUS SYRINGE 60 MG/ML	4	PA; ST; SP; LA
raloxifene oral tablet 60 mg	1	Och; ACA PV
risedronate oral tablet 150 mg, 35 mg, 5 mg	1	
risedronate oral tablet, delayed release (dr/ec) 35 mg	1	
teriparatide subcutaneous pen injector 20 mcg/dose (600mcg/2.4ml)	4	PA; ST; SP; LA; QL (1 per 30 days)
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	4	PA; ST; SP; QL (1 per 30 days)
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	4	PA; ST; SP; LA; QL (30 per 30 days)
OTHER RHEUMATOLOGICALS		
ABRILADA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP
ABRILADA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	4	PA; ST; SP; LA; QL (2 per 30 days)
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	4	PA; ST; SP; LA; QL (2 per 30 days)
ADALIMUMAB-AACF SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP
ADALIMUMAB-AACF SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	4	PA; ST; SP; LA
ADALIMUMAB-AACF(CF) PEN CROHNS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP
ADALIMUMAB-AACF(CF) PEN PS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP
ADALIMUMAB-AATY SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML, 80 MG/0.8 ML	4	PA; ST; SP

Drug Name	Tier	Requirements / Limits
ADALIMUMAB-AATY SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	4	PA; ST; SP
ADALIMUMAB-ADAZ SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML	4	PA; ST; SP; LA
ADALIMUMAB-ADAZ SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	4	PA; ST; SP; LA
ADALIMUMAB-ADBM SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
ADALIMUMAB-ADBM SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
ADALIMUMAB-ADBM(CF) PEN CROHNS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
ADALIMUMAB-ADBM(CF) PEN PS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
ADALIMUMAB-FKJP SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP
ADALIMUMAB-FKJP SUBCUTANEOUS SYRINGE KIT 20 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP
ADALIMUMAB-RYVK SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	4	PA; ST; SP; LA
ADALIMUMAB-RYVK SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	4	PA; ST; SP; LA
AMJEVITA(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML, 40 MG/0.8 ML, 80 MG/0.8 ML	4	PA; ST; SP; LA
AMJEVITA(CF) SUBCUTANEOUS SYRINGE 10 MG/0.2 ML, 20 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
ARAVA ORAL TABLET 10 MG, 20 MG	3	
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	4	PA; ST; SP; LA
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	4	PA; ST; SP; LA
CUPRIMINE ORAL CAPSULE 250 MG	3	PA; ST
CYLTEZO(CF) PEN CROHN'S-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA

Drug Name	Tier	Requirements / Limits
CYLTEZO(CF) PEN PSORIASIS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
CYLTEZO(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
DEPEN TITRATABS ORAL TABLET 250 MG	3	PA; ST
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	4	PA; ST; SP; LA
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	4	PA; ST; SP; LA
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	4	PA; ST; SP; LA
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	4	PA; ST; SP; LA
HADLIMA PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML	4	PA; ST; SP; LA
HADLIMA SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	4	PA; ST; SP; LA
HADLIMA(CF) PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML	4	PA; ST; SP; LA
HADLIMA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	4	PA; ST; SP; LA
HULIO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP; LA
HULIO(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.4 ML, 40 MG/0.8 ML	4	PA; ST; SP; LA
HUMIRA (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	4	PA; ST; SP; LA
HUMIRA PEN (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP; LA
HUMIRA(CF) (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	4	PA; ST; SP; LA
HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	4	PA; ST; SP; LA

Drug Name	Tier	Requirements / Limits
HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; ST; SP; LA
HUMIRA(CF) PEN PEDIATRIC UC (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; ST; SP; LA
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	4	PA; ST; SP; LA
HYRIMOZ PEN CROHN'S-UC STARTER SUBCUTANEOUS PEN INJECTOR 80 MG/0.8 ML	4	PA; ST; SP; LA
HYRIMOZ PEN PSORIASIS STARTER SUBCUTANEOUS PEN INJECTOR 80MG/0.8ML(X1)- 40 MG/0.4ML(X2)	4	PA; ST; SP; LA
HYRIMOZ PEN SUBCUTANEOUS PEN INJECTOR 40 MG/0.8 ML	4	PA; ST; SP
HYRIMOZ SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	4	PA; ST; SP
HYRIMOZ(CF) PEDI CROHN STARTER SUBCUTANEOUS SYRINGE 80 MG/0.8 ML, 80 MG/0.8 ML- 40 MG/0.4 ML	4	PA; ST; SP; LA
HYRIMOZ(CF) PEN SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML, 80 MG/0.8 ML	4	PA; ST; SP; LA
HYRIMOZ(CF) SUBCUTANEOUS SYRINGE 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	4	PA; ST; SP; LA
IDACIO(CF) PEN CROHN-UC STARTR SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP; LA
IDACIO(CF) PEN PSORIASIS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP; LA
IDACIO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; ST; SP; LA
IDACIO(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	4	PA; ST; SP; LA
KEVZARA SUBCUTANEOUS PEN INJECTOR 150 MG/1.14 ML, 200 MG/1.14 ML	4	PA; ST; SP; LA
KEVZARA SUBCUTANEOUS SYRINGE 150 MG/1.14 ML, 200 MG/1.14 ML	4	PA; ST; SP; LA

Drug Name	Tier	Requirements / Limits
KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	4	PA; ST; SP
leflunomide oral tablet 10 mg, 20 mg	1	
OLUMIANT ORAL TABLET 1 MG, 2 MG, 4 MG	4	PA; ST; SP; LA
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	4	PA; ST; SP; LA
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML, 50 MG/0.4 ML, 87.5 MG/0.7 ML	4	PA; ST; SP; LA
OTEZLA ORAL TABLET 20 MG	4	PA; SP; LA
OTEZLA ORAL TABLET 30 MG	4	PA; ST; SP; LA
OTEZLA STARTER ORAL TABLETS, DOSE PACK 10 MG (4)- 20 MG (51)	4	PA; SP; LA
OTEZLA STARTER ORAL TABLETS, DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	4	PA; ST; SP; LA
OTREXUP (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.4 ML, 12.5 MG/0.4 ML, 15 MG/0.4 ML, 17.5 MG/0.4 ML, 20 MG/0.4 ML, 22.5 MG/0.4 ML, 25 MG/0.4 ML	3	PA; ST; QL (4 per 30 days)
penicillamine oral capsule 250 mg	1	PA; ST
penicillamine oral tablet 250 mg	1	PA; ST
RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.2 ML, 12.5 MG/0.25 ML, 15 MG/0.3 ML, 17.5 MG/0.35 ML, 20 MG/0.4 ML, 22.5 MG/0.45 ML, 25 MG/0.5 ML, 30 MG/0.6 ML, 7.5 MG/0.15 ML	3	PA; ST; QL (4 per 30 days)
RIDAURA ORAL CAPSULE 3 MG	2	
RINVOQ LQ ORAL SOLUTION 1 MG/ML	4	PA; ST; SP
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG	4	PA; ST; SP; LA
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	3	PA; ST
SAVELLA ORAL TABLETS, DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	3	PA; ST
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	4	PA; ST; SP; LA
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 50 MG/0.5 ML	4	PA; ST; SP; LA
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML, 50 MG/0.5 ML	4	PA; ST; SP; LA

Drug Name	Tier	Requirements / Limits
XELJANZ ORAL SOLUTION 1 MG/ML	4	PA; ST; SP; LA
XELJANZ ORAL TABLET 10 MG, 5 MG	4	PA; ST; SP; LA
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG	4	PA; ST; SP; LA
YUFLYMA(CF) AI CROHN'S-UC-HS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	4	PA; ST; SP
YUFLYMA(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML, 80 MG/0.8 ML	4	PA; ST; SP
YUFLYMA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	4	PA; ST; SP
YUSIMRY(CF) PEN SUBCUTANEOUS PEN INJECTOR 40 MG/0.8 ML	4	PA; ST; SP
OBSTETRICS & GYNECOLOGY		
DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES		
CAYA CONTOURED VAGINAL DIAPHRAGM 65-80 MM	3	ACA PV
FEMCAP VAGINAL DEVICE 22 MM	3	ACA PV
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 17.5 MCG/24 HR (5 YRS) 19.5 MG	4	SP; ACA PV
LILETTA INTRAUTERINE INTRAUTERINE DEVICE 20.4 MCG/24 HR (8 YRS) 52 MG	4	ST; SP; ACA PV
MIRENA INTRAUTERINE INTRAUTERINE DEVICE 21 MCG/24HR (UP TO 8 YRS) 52 MG	4	SP; ACA PV
PARAGARD T 380A INTRAUTERINE DEVICE 380 SQUARE MM	4	SP; ACA PV
SKYLA INTRAUTERINE INTRAUTERINE DEVICE 14 MCG/24 HR (3 YRS) 13.5 MG	4	SP; ACA PV
WIDE-SEAL VAGINAL DIAPHRAGM 60 MM	3	ACA PV
ESTROGENS & PROGESTINS		
ACTIVELLA ORAL TABLET 1-0.5 MG	3	
ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG	3	
BIJUVA ORAL CAPSULE 1-100 MG	3	
camila oral tablet 0.35 mg	1	ACA PV
CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/24 HR	3	

Drug Name	Tier	Requirements / Limits
CLIMARA TRANSDERMAL PATCH WEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.06 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	3	
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	2	
covaryx h.s. oral tablet 0.625-1.25 mg	1	
covaryx oral tablet 1.25-2.5 mg	1	
CRINONE VAGINAL GEL 4 %	3	
deblitane oral tablet 0.35 mg	1	ACA PV
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 20 MG/ML, 40 MG/ML	3	
DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML	3	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	3	ACA PV
DEPO-PROVERA INTRAMUSCULAR SYRINGE 150 MG/ML	3	ACA PV
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	3	ACA PV
DIVIGEL TRANSDERMAL GEL IN PACKET 0.25 MG/0.25 GRAM (0.1 %), 0.5 MG/0.5 GRAM (0.1 %), 0.75 MG/0.75 GRAM (0.1%), 1 MG/GRAM (0.1 %), 1.25 MG/1.25 GRAM (0.1 %)	3	
dotti transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	1	
DUAVEE ORAL TABLET 0.45-20 MG	2	
eemt hs oral tablet 0.625-1.25 mg	1	
eemt oral tablet 1.25-2.5 mg	1	
ELESTRIN TRANSDERMAL GEL IN METERED-DOSE PUMP 0.87 GRAM/ACTUATION	3	
emzahh oral tablet 0.35 mg	1	ACA PV
errin oral tablet 0.35 mg	1	ACA PV
ESTRACE ORAL TABLET 0.5 MG, 1 MG, 2 MG	3	
ESTRACE VAGINAL CREAM 0.01 % (0.1 MG/GRAM)	3	

Drug Name	Tier	Requirements / Limits
estradiol oral tablet 0.5 mg, 1 mg, 2 mg	1	
estradiol transdermal gel in metered-dose pump 1.25 gram/actuation	1	
estradiol transdermal gel in packet 0.25 mg/0.25 gram (0.1 %), 0.5 mg/0.5 gram (0.1 %), 0.75 mg/0.75 gram (0.1%), 1 mg/gram (0.1 %), 1.25 mg/1.25 gram (0.1 %)	1	
estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	1	
estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	1	
estradiol vaginal cream 0.01 % (0.1 mg/gram)	1	
estradiol vaginal tablet 10 mcg	1	
estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml	1	
estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg	1	
ESTRING VAGINAL RING 2 MG (7.5 MCG /24 HOUR)	2	
ESTROGEL TRANSDERMAL GEL IN METERED-DOSE PUMP 1.25 GRAM/ACTUATION	3	
estrogens-methyltestosterone oral tablet 0.625-1.25 mg, 1.25-2.5 mg	1	
EVAMIST TRANSDERMAL SPRAY, NON-AEROSOL 1.53 MG/SPRAY (1.7%)	2	
FEMRING VAGINAL RING 0.05 MG/24 HR, 0.1 MG/24 HR	3	
fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	1	
gallifrey oral tablet 5 mg	1	
heather oral tablet 0.35 mg	1	ACA PV
IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG	3	
IMVEXXY STARTER PACK VAGINAL INSERT, DOSE PACK 10 MCG, 4 MCG	3	
incassia oral tablet 0.35 mg	1	ACA PV
jencycla oral tablet 0.35 mg	1	ACA PV
jinteli oral tablet 1-5 mg-mcg	1	

Drug Name	Tier	Requirements / Limits
lyleq oral tablet 0.35 mg	1	ACA PV
lyllana transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	1	
lyza oral tablet 0.35 mg	1	ACA PV
medroxyprogesterone intramuscular suspension 150 mg/ml	1	ACA PV
medroxyprogesterone intramuscular syringe 150 mg/ml	1	ACA PV
medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg	1	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG, 2.5 MG	2	
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24 HR	3	
mimvey oral tablet 1-0.5 mg	1	
MINIVELLE TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	3	
nora-be oral tablet 0.35 mg	1	ACA PV
norethindrone (contraceptive) oral tablet 0.35 mg	1	ACA PV
norethindrone acetate oral tablet 5 mg	1	
norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	1	
OPILL ORAL TABLET 0.075 MG	2	ACA PV; QL (28 per 28 days)
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	2	
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	2	
PREMPHASE ORAL TABLET 0.625 MG (14)/ 0.625MG-5MG(14)	2	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	2	
progesterone intramuscular oil 50 mg/ml	4	SP; LA
progesterone micronized oral capsule 100 mg, 200 mg	1	
PROMETRIUM ORAL CAPSULE 100 MG, 200 MG	3	

Drug Name	Tier	Requirements / Limits
PROVERA ORAL TABLET 10 MG, 2.5 MG, 5 MG	3	
sharobel oral tablet 0.35 mg	1	ACA PV
tulana oral tablet 0.35 mg	1	ACA PV
VAGIFEM VAGINAL TABLET 10 MCG	3	
VIVELLE-DOT TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR	3	PA
VIVELLE-DOT TRANSDERMAL PATCH SEMIWEEKLY 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	3	
yuvafem vaginal tablet 10 mcg	1	
MISCELLANEOUS OB/GYN		
ANNOVERA VAGINAL RING 0.15-0.013 MG/24 HOUR	2	ACA PV
CERVIDIL VAGINAL INSERT, EXTENDED RELEASE 10 MG	3	
CLEOCIN VAGINAL CREAM 2 %	3	PA
CLEOCIN VAGINAL SUPPOSITORY 100 MG	3	PA
clindamycin phosphate vaginal cream 2 %	1	
CLINDESSE VAGINAL CREAM, EXTENDED RELEASE 2 %	3	PA
eluryng vaginal ring 0.12-0.015 mg/24 hr	1	ACA PV
enilloring vaginal ring 0.12-0.015 mg/24 hr	1	ACA PV
etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr	1	ACA PV
fem ph vaginal gel 0.9-0.025 %	1	
GYNAZOLE-1 VAGINAL CREAM 2 %	3	
haloette vaginal ring 0.12-0.015 mg/24 hr	1	ACA PV
INTRAROSA VAGINAL INSERT 6.5 MG	3	
metronidazole vaginal gel 0.75 % (37.5mg/5 gram)	1	
miconazole-3 vaginal suppository 200 mg	1	
MYFEMBREE ORAL TABLET 40-1-0.5 MG	3	PA; ST; QL (30 per 30 days)
NEXPLANON SUBDERMAL IMPLANT 68 MG	4	SP; ACA PV; LA
norelgestromin-ethin.estradiol transdermal patch weekly 150-35 mcg/24 hr	1	ACA PV
NUVARING VAGINAL RING 0.12-0.015 MG/24 HR	3	ACA PV

Drug Name	Tier	Requirements / Limits
NUVESSA VAGINAL GEL 1.3 % (65 MG/5 GRAM)	3	PA
ORIAHNN ORAL CAPSULE, SEQUENTIAL 300-1-0.5MG (AM) /300 MG (PM)	3	PA; QL (90 per 30 days)
OSPHENA ORAL TABLET 60 MG	3	
PHEXXI VAGINAL GEL 1.8-1-0.4 %	2	ACA PV
PREPIDIL VAGINAL GEL 0.5 MG/3 G	3	
RELAGARD VAGINAL GEL 0.9-0.025 %	3	
terconazole vaginal cream 0.4 %, 0.8 %	1	
terconazole vaginal suppository 80 mg	1	
tranexamic acid oral tablet 650 mg	1	
TRIMO-SAN JELLY VAGINAL GEL 0.025-0.01 %	3	
TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24 HR	3	ACA PV
vandazole vaginal gel 0.75 % (37.5mg/5 gram)	1	
VCF CONTRACEPTIVE VAGINAL FILM 28 %	3	ACA PV
VCF CONTRACEPTIVE VAGINAL GEL 4 %	3	ACA PV
VEOZAH ORAL TABLET 45 MG	3	PA; QL (30 per 30 days)
XACIATO VAGINAL GEL 2 %	3	PA
xulane transdermal patch weekly 150-35 mcg/24 hr	1	ACA PV
zafemy transdermal patch weekly 150-35 mcg/24 hr	1	ACA PV
ORAL CONTRACEPTIVES & RELATED AGENTS		
afirmelle oral tablet 0.1-20 mg-mcg	1	ACA PV
after pill oral tablet 1.5 mg	1	ACA PV
AFTERA ORAL TABLET 1.5 MG	3	ACA PV
altavera (28) oral tablet 0.15-0.03 mg	1	ACA PV
alyacen 1/35 (28) oral tablet 1-35 mg-mcg	1	ACA PV
alyacen 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	1	ACA PV
amethia oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA PV
amethyst oral tablet 90-20 mcg (28)	1	ACA PV
apri oral tablet 0.15-0.03 mg	1	ACA PV
aranelle (28) oral tablet 0.5/1/0.5-35 mg-mcg	1	ACA PV

Drug Name	Tier	Requirements / Limits
ashlyna oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA PV
aubra eq oral tablet 0.1-20 mg-mcg	1	ACA PV
aubra oral tablet 0.1-20 mg-mcg	1	ACA PV
aurovela 1.5/30 (21) oral tablet 1.5-30 mg-mcg	1	ACA PV
aurovela 1/20 (21) oral tablet 1-20 mg-mcg	1	ACA PV
aurovela 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA PV
aurovela fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA PV
aurovela fe 1-20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA PV
aviane oral tablet 0.1-20 mg-mcg	1	ACA PV
ayuna oral tablet 0.15-0.03 mg	1	ACA PV
azurette (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA PV
BALCOLTRA ORAL TABLET 0.1 MG-0.02 MG (21)/IRON (7)	3	ACA PV
balziva (28) oral tablet 0.4-35 mg-mcg	1	ACA PV
BEYAZ ORAL TABLET 3-0.02-0.451 MG (24) (4)	3	ACA PV
blisovi 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA PV
blisovi fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA PV
blisovi fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA PV
briellyn oral tablet 0.4-35 mg-mcg	1	ACA PV
camrese lo oral tablets, dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)	1	ACA PV
camrese oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA PV
caziant (28) oral tablet 0.1/.125/.15-25 mg-mcg	1	ACA PV
charlotte 24 fe oral tablet, chewable 1 mg-20 mcg (24) /75 mg (4)	1	ACA PV
chateal (28) oral tablet 0.15-0.03 mg	1	ACA PV
chateal eq (28) oral tablet 0.15-0.03 mg	1	ACA PV
cryselle (28) oral tablet 0.3-30 mg-mcg	1	ACA PV
curae oral tablet 1.5 mg	1	ACA PV

Drug Name	Tier	Requirements / Limits
cyred eq oral tablet 0.15-0.03 mg	1	ACA PV
cyred oral tablet 0.15-0.03 mg	1	ACA PV
dasetta 1/35 (28) oral tablet 1-35 mg-mcg	1	ACA PV
dasetta 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	1	ACA PV
daysee oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA PV
desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA PV
dolishale oral tablet 90-20 mcg (28)	1	ACA PV
drospirenone-e.estradiol-lm.fa oral tablet 3-0.02-0.451 mg (24) (4), 3-0.03-0.451 mg (21) (7)	1	ACA PV
drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg	1	ACA PV
econtra ez oral tablet 1.5 mg	1	ACA PV
econtra one-step oral tablet 1.5 mg	1	ACA PV
elinest oral tablet 0.3-30 mg-mcg	1	ACA PV
ELLA ORAL TABLET 30 MG	2	ACA PV
enpresse oral tablet 50-30 (6)/75-40 (5)/125-30(10)	1	ACA PV
enskyce oral tablet 0.15-0.03 mg	1	ACA PV
estarylla oral tablet 0.25-35 mg-mcg	1	ACA PV
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg	1	ACA PV
falmina (28) oral tablet 0.1-20 mg-mcg	1	ACA PV
FEMLYV ORAL TABLET, DISINTEGRATING 1 MG- 20 MCG	3	ACA PV
finzala oral tablet, chewable 1 mg-20 mcg(24) /75 mg (4)	1	ACA PV
gemmily oral capsule 1 mg-20 mcg (24)/75 mg (4)	1	ACA PV
hailey 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA PV
hailey fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA PV
hailey fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA PV
hailey oral tablet 1.5-30 mg-mcg	1	ACA PV
her style oral tablet 1.5 mg	1	ACA PV

Drug Name	Tier	Requirements / Limits
iclevia oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)	1	ACA PV
isibloom oral tablet 0.15-0.03 mg	1	ACA PV
jaimiess oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA PV
jasmiel (28) oral tablet 3-0.02 mg	1	ACA PV
jolessa oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)	1	ACA PV
joyeaux oral tablet 0.1 mg-0.02 mg (21)/iron (7)	1	ACA PV
juleber oral tablet 0.15-0.03 mg	1	ACA PV
junel 1.5/30 (21) oral tablet 1.5-30 mg-mcg	1	ACA PV
junel 1/20 (21) oral tablet 1-20 mg-mcg	1	ACA PV
junel fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA PV
junel fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA PV
junel fe 24 oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA PV
kaitlib fe oral tablet, chewable 0.8mg-25mcg(24) and 75 mg (4)	1	ACA PV
kalliga oral tablet 0.15-0.03 mg	1	ACA PV
kariva (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA PV
kelnor 1/35 (28) oral tablet 1-35 mg-mcg	1	ACA PV
kelnor 1/50 (28) oral tablet 1-50 mg-mcg	1	ACA PV
kurvelo (28) oral tablet 0.15-0.03 mg	1	ACA PV
l norgest/e.estradiol-e.estrad oral tablets, dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7), 0.15 mg-20 mcg/ 0.15 mg-25 mcg, 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA PV
larin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	1	ACA PV
larin 1/20 (21) oral tablet 1-20 mg-mcg	1	ACA PV
larin 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA PV
larin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA PV
larin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA PV
layolis fe oral tablet, chewable 0.8mg-25mcg(24) and 75 mg (4)	1	ACA PV
leena 28 oral tablet 0.5/1/0.5-35 mg-mcg	1	ACA PV

Drug Name	Tier	Requirements / Limits
lessina oral tablet 0.1-20 mg-mcg	1	ACA PV
levonest (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)	1	ACA PV
levonorgest-eth.estradiol-iron oral tablet 0.1 mg-0.02 mg (21)/iron (7)	1	ACA PV
levonorgestrel oral tablet 1.5 mg	1	ACA PV
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg, 90-20 mcg (28)	1	ACA PV
levonorgestrel-ethinyl estrad oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)	1	ACA PV
levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30 (10)	1	ACA PV
levora-28 oral tablet 0.15-0.03 mg	1	ACA PV
LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG (24)/10 MCG (2)	2	ACA PV
LOESTRIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	3	ACA PV
LOESTRIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	3	ACA PV
LOESTRIN FE 1.5/30 (28-DAY) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	3	ACA PV
LOESTRIN FE 1/20 (28-DAY) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	3	ACA PV
lojaimiess oral tablets, dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)	1	ACA PV
loryna (28) oral tablet 3-0.02 mg	1	ACA PV
low-ogestrel (28) oral tablet 0.3-30 mg-mcg	1	ACA PV
lo-zumandimine (28) oral tablet 3-0.02 mg	1	ACA PV
lutera (28) oral tablet 0.1-20 mg-mcg	1	ACA PV
marlissa (28) oral tablet 0.15-0.03 mg	1	ACA PV
merzee oral capsule 1 mg-20 mcg (24)/75 mg (4)	1	ACA PV
mibelas 24 fe oral tablet, chewable 1 mg-20 mcg(24) /75 mg (4)	1	ACA PV
microgestin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	1	ACA PV
microgestin 1/20 (21) oral tablet 1-20 mg-mcg	1	ACA PV
microgestin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	1	ACA PV
microgestin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA PV

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

Drug Name	Tier	Requirements / Limits
PLAN B ONE-STEP ORAL TABLET 1.5 MG	3	ACA PV
portia 28 oral tablet 0.15-0.03 mg	1	ACA PV
QUARTETTE ORAL TABLETS, DOSE PACK, 3 MONTH 0.15 MG-20 MCG/ 0.15 MG-25 MCG	3	ACA PV
reclipsen (28) oral tablet 0.15-0.03 mg	1	ACA PV
rivelsa oral tablets, dose pack, 3 month 0.15 mg-20 mcg/ 0.15 mg-25 mcg	1	ACA PV
SAFYRAL ORAL TABLET 3-0.03-0.451 MG (21) (7)	3	ACA PV
setlakin oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)	1	ACA PV
simliya (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA PV
simpesse oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)	1	ACA PV
SLYND ORAL TABLET 4 MG (28)	3	ACA PV
sprintec (28) oral tablet 0.25-35 mg-mcg	1	ACA PV
sronyx oral tablet 0.1-20 mg-mcg	1	ACA PV
syeda oral tablet 3-0.03 mg	1	ACA PV
TAKE ACTION ORAL TABLET 1.5 MG	3	ACA PV
tarina 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	1	ACA PV
tarina fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	1	ACA PV
TAYTULLA ORAL CAPSULE 1 MG-20 MCG (24)/75 MG (4)	3	ACA PV
tilia fe oral tablet 1-20 (5)/1-30 (7) /1mg-35mcg (9)	1	ACA PV
tri-estarylla oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA PV
tri-legest fe oral tablet 1-20 (5)/1-30 (7) /1mg-35mcg (9)	1	ACA PV
tri-linyah oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA PV
tri-lo-estarylla oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA PV
tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA PV
tri-lo-mili oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA PV

Drug Name	Tier	Requirements / Limits
tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA PV
tri-mili oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA PV
tri-sprintec oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA PV
trivora (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)	1	ACA PV
tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-25 mcg	1	ACA PV
tri-vylibra oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	1	ACA PV
turqoz (28) oral tablet 0.3-30 mg-mcg	1	ACA PV
TYBLUME ORAL TABLET, CHEWABLE 0.1 MG- 20 MCG	2	ACA PV
tydemy oral tablet 3-0.03-0.451 mg (21) (7)	1	ACA PV
velivet triphasic regimen (28) oral tablet 0.1/.125/.15-25 mg-mcg	1	ACA PV
vestura (28) oral tablet 3-0.02 mg	1	ACA PV
vienva oral tablet 0.1-20 mg-mcg	1	ACA PV
viorele (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA PV
volnea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	1	ACA PV
vyfemla (28) oral tablet 0.4-35 mg-mcg	1	ACA PV
vylibra oral tablet 0.25-35 mg-mcg	1	ACA PV
wera (28) oral tablet 0.5-35 mg-mcg	1	ACA PV
wymzya fe oral tablet, chewable 0.4mg-35mcg(21) and 75 mg (7)	1	ACA PV
YASMIN (28) ORAL TABLET 3-0.03 MG	3	ACA PV
YAZ (28) ORAL TABLET 3-0.02 MG	3	ACA PV
zarah oral tablet 3-0.03 mg	1	ACA PV
zovia 1-35 (28) oral tablet 1-35 mg-mcg	1	ACA PV
zumandimine (28) oral tablet 3-0.03 mg	1	ACA PV
OXYTOCICS		
methylergonovine oral tablet 0.2 mg	1	
OPHTHALMOLOGY		
ANTIBIOTICS		

Drug Name	Tier	Requirements / Limits
AZASITE OPHTHALMIC (EYE) DROPS 1 %	3	
bacitracin ophthalmic (eye) ointment 500 unit/gram	1	
bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram	1	
BESIVANCE OPHTHALMIC (EYE) DROPS, SUSPENSION 0.6 %	3	
BETADINE PREP OPHTHALMIC (EYE) SOLUTION 5 %	3	
CILOXAN OPHTHALMIC (EYE) OINTMENT 0.3 %	3	
ciprofloxacin hcl ophthalmic (eye) drops 0.3 %	1	
erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)	1	
gatifloxacin ophthalmic (eye) drops 0.5 %	1	
gentamicin ophthalmic (eye) drops 0.3 %	1	
levofloxacin ophthalmic (eye) drops 1.5 %	1	
moxifloxacin ophthalmic (eye) drops 0.5 %	1	
moxifloxacin ophthalmic (eye) drops, viscous 0.5 %	1	
NATACYN OPHTHALMIC (EYE) DROPS, SUSPENSION 5 %	3	
neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g	1	
neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml	1	
neo-polycin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g	1	
OCUFLOX OPHTHALMIC (EYE) DROPS 0.3 %	3	
ofloxacin ophthalmic (eye) drops 0.3 %	1	
polycin ophthalmic (eye) ointment 500-10,000 unit/gram	1	
polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml	1	
povidone-iodine ophthalmic (eye) solution 5 %	1	
tobramycin ophthalmic (eye) drops 0.3 %	1	
TOBREX OPHTHALMIC (EYE) OINTMENT 0.3 %	2	

Drug Name	Tier	Requirements / Limits
VIGAMOX OPHTHALMIC (EYE) DROPS 0.5 %	3	
ANTIVIRALS		
trifluridine ophthalmic (eye) drops 1 %	1	
ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %	3	
BETA-BLOCKERS		
betaxolol ophthalmic (eye) drops 0.5 %	1	
BETIMOL OPHTHALMIC (EYE) DROPS 0.25 %, 0.5 %	2	
BETOPTIC S OPHTHALMIC (EYE) DROPS, SUSPENSION 0.25 %	2	PA; ST
carteolol ophthalmic (eye) drops 1 %	1	
ISTALOL OPHTHALMIC (EYE) DROPS, ONCE DAILY 0.5 %	3	PA; ST
levobunolol ophthalmic (eye) drops 0.5 %	1	
timolol maleate (pf) ophthalmic (eye) dropperette 0.25 %, 0.5 %	1	
timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %	1	
timolol maleate ophthalmic (eye) drops, once daily 0.5 %	1	
timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %	1	
TIMOPTIC OCUDOSE (PF) OPHTHALMIC (EYE) DROPPERETTE 0.25 %	3	
TIMOPTIC OCUDOSE (PF) OPHTHALMIC (EYE) DROPPERETTE 0.5 %	3	PA; ST
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS 0.125 %	4	SP
CYCLOPLEGIC MYDRIATICS		
ATROPINE OPHTHALMIC (EYE) DROPS 0.01 %, 0.025 %, 0.05 %	3	
atropine ophthalmic (eye) drops 1 %	1	
atropine ophthalmic (eye) ointment 1 %	1	
CYCLOGYL OPHTHALMIC (EYE) DROPS 0.5 %, 1 %, 2 %	3	
cyclopentolate ophthalmic (eye) drops 1 %	1	

Drug Name	Tier	Requirements / Limits
cyclopen-tropic-phenyleph-watr ophthalmic (eye) drops 1-1-2.5 %	1	
CYCLOPENT-TROPIC-PHEN-KETR-WAT OPHTHALMIC (EYE) DROPS 1 %-1 %-10 %-0.5 %, 1 %-1 %-2.5 %- 0.5 %	3	
homatropaire ophthalmic (eye) drops 5 %	1	
MYDRIACYL OPHTHALMIC (EYE) DROPS 1 %	3	
phenyleph-tropicamide in water ophthalmic (eye) drops 2.5-1 %	1	
tropicamide ophthalmic (eye) drops 0.5 %, 1 %	1	
DIRECT ACTING MIOTICS		
pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %	1	
VUITY OPHTHALMIC (EYE) DROPS 1.25 %	3	PA
MISCELLANEOUS OPHTHALMOLOGICS		
AKTEN (PF) OPHTHALMIC (EYE) GEL 3.5 %	3	
ALCAINE OPHTHALMIC (EYE) DROPS 0.5 %	3	
ALOCRIL OPHTHALMIC (EYE) DROPS 2 %	3	PA; ST
ALOMIDE OPHTHALMIC (EYE) DROPS 0.1 %	3	PA; ST
altacaine ophthalmic (eye) drops 0.5 %	1	
ALTAFLUOR BENOX OPHTHALMIC (EYE) DROPS 0.25-0.4 %	3	
azelastine ophthalmic (eye) drops 0.05 %	1	
bepotastine besilate ophthalmic (eye) drops 1.5 %	1	
BEPREVE OPHTHALMIC (EYE) DROPS 1.5 %	3	PA; ST
CEQUA OPHTHALMIC (EYE) DROPPERETTE 0.09 %	3	PA; ST
cromolyn ophthalmic (eye) drops 4 %	1	
CYCLOSPORINE IN KLARITY OPHTHALMIC (EYE) DROPS 0.1-0.25 %	3	
cyclosporine ophthalmic (eye) dropperette 0.05 %	1	
CYSTADROPS OPHTHALMIC (EYE) DROPS 0.37 %	4	PA; SP
CYSTARAN OPHTHALMIC (EYE) DROPS 0.44 %	4	PA; SP
epinastine ophthalmic (eye) drops 0.05 %	1	

Drug Name	Tier	Requirements / Limits
FLUORESCEIN-BENOXINATE OPHTHALMIC (EYE) DROPS 0.3-0.4 %	3	
fluorescein-proparacaine ophthalmic (eye) drops 0.25-0.5 %	1	
KLARITY (CHONDROITIN) (PF) OPHTHALMIC (EYE) DROPS 0.25 %	3	
MIEBO (PF) OPHTHALMIC (EYE) DROPS 100 %	3	PA; ST
MYDRIATIC4(TROP-PROP-PE-KTRLC) OPHTHALMIC (EYE) DROPS 1-0.5-2.5-0.5 %	3	
olopatadine ophthalmic (eye) drops 0.1 %, 0.2 %	1	
OXERVATE OPHTHALMIC (EYE) DROPS 0.002 %	4	PA; ST; SP; LA; QL (30 per 30 days)
PHOTREXA CROSS-LINKING KIT OPHTHALMIC (EYE) COMBO, DROPS AND DROPS VISCOUS 0.146 % -0.146 %	3	
PREDNISOLN SP-MOXIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS 1-0.5-0.075 %	3	
PREDNISOLONE ACETATE-BROMFENAC OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.075 %	3	
PREDNISOLONE ACETATE-NEPAFENAC OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.1 %	3	
PREDNISOLONE-MOXIFLO-NEPAFENAC OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.5-0.1 %	3	
PREDNISOLONE-MOXIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.5-0.075 %	3	
proparacaine ophthalmic (eye) drops 0.5 %	1	
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS 0.05 %	3	PA; ST
RESTASIS OPHTHALMIC (EYE) DROPPERETTE 0.05 %	3	PA; ST
TETRACAINE HCL (PF) OPHTHALMIC (EYE) DROPS 0.5 %	2	
tetracaine hcl ophthalmic (eye) drops 0.5 %	1	
TYRVAYA NASAL SPRAY, METERED, NON-AEROSOL 0.03 MG/SPRAY	3	PA; ST

Drug Name	Tier	Requirements / Limits
VERKAZIA OPHTHALMIC (EYE) DROPPERETTE 0.1 %	3	PA; ST
VEVYE OPHTHALMIC (EYE) DROPS 0.1 %	3	PA; ST
XDEMVY OPHTHALMIC (EYE) DROPS 0.25 %	4	PA; SP
XIIDRA OPHTHALMIC (EYE) DROPPERETTE 5 %	3	PA; ST; QL (60 per 30 days)
ZERVIATE OPHTHALMIC (EYE) DROPPERETTE 0.24 %	3	PA; ST
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR LS OPHTHALMIC (EYE) DROPS 0.4 %	3	
ACULAR OPHTHALMIC (EYE) DROPS 0.5 %	3	
ACUVAIL (PF) OPHTHALMIC (EYE) DROPPERETTE 0.45 %	3	
bromfenac ophthalmic (eye) drops 0.07 %, 0.075 %, 0.09 %	1	
BROMSITE OPHTHALMIC (EYE) DROPS 0.075 %	3	
diclofenac sodium ophthalmic (eye) drops 0.1 %	1	
flurbiprofen sodium ophthalmic (eye) drops 0.03 %	1	
ILEVRO OPHTHALMIC (EYE) DROPS, SUSPENSION 0.3 %	3	
ketorolac ophthalmic (eye) drops 0.4 %, 0.5 %	1	
NEVANAC OPHTHALMIC (EYE) DROPS, SUSPENSION 0.1 %	3	
PROLENSA OPHTHALMIC (EYE) DROPS 0.07 %	3	
ORAL DRUGS FOR GLAUCOMA		
acetazolamide oral capsule, extended release 500 mg	1	
acetazolamide oral tablet 125 mg, 250 mg	1	
methazolamide oral tablet 25 mg, 50 mg	1	
OTHER GLAUCOMA DRUGS		
AZOPT OPHTHALMIC (EYE) DROPS, SUSPENSION 1 %	3	
bimatoprost ophthalmic (eye) drops 0.03 %	1	

Drug Name	Tier	Requirements / Limits
BRIMONIDINE-DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS 0.15-2 %	3	
BRIMONIDINE-DORZOLAMIDE OPHTHALMIC (EYE) DROPS 0.1-2 %	3	PA
brimonidine-timolol ophthalmic (eye) drops 0.2-0.5 %	1	
brinzolamide ophthalmic (eye) drops, suspension 1 %	1	
COMBIGAN OPHTHALMIC (EYE) DROPS 0.2-0.5 %	3	
COSOPT (PF) OPHTHALMIC (EYE) DROPPERETTE 2-0.5 %	3	
COSOPT OPHTHALMIC (EYE) DROPS 22.3-6.8 MG/ML	3	
DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS 2 %	3	
dorzolamide ophthalmic (eye) drops 2 %	1	
dorzolamide-timolol (pf) ophthalmic (eye) dropperette 2-0.5 %	1	
dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml	1	
IYUZEH (PF) OPHTHALMIC (EYE) DROPPERETTE 0.005 %	3	PA; ST
latanoprost ophthalmic (eye) drops 0.005 %	1	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	3	PA; ST
RHOPRESSA OPHTHALMIC (EYE) DROPS 0.02 %	3	PA; ST
ROCKLATAN OPHTHALMIC (EYE) DROPS 0.02-0.005 %	3	PA; ST
SIMBRINZA OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.2 %	3	
tafluprost (pf) ophthalmic (eye) dropperette 0.0015 %	1	
TIMOLOL-BRIMONIDI-DORZOLAM(PF) OPHTHALMIC (EYE) DROPS 0.5-0.15-2 %	3	
TIMOLOL-DORZOLAM-BIMATOPRO(PF) OPHTHALMIC (EYE) DROPS 0.5-2-0.01 %	3	
TRAVATAN Z OPHTHALMIC (EYE) DROPS 0.004 %	3	PA; ST

Drug Name	Tier	Requirements / Limits
travoprost ophthalmic (eye) drops 0.004 %	1	
VYZULTA OPHTHALMIC (EYE) DROPS 0.024 %	3	PA; ST
XALATAN OPHTHALMIC (EYE) DROPS 0.005 %	3	ST
XELPROS OPHTHALMIC (EYE) DROPS, EMULSION 0.005 %	3	PA; ST
ZIOPTAN (PF) OPHTHALMIC (EYE) DROPPERETTE 0.0015 %	3	PA; ST
STEROID-ANTIBIOTIC COMBINATIONS		
MAXITROL OPHTHALMIC (EYE) DROPS, SUSPENSION 3.5MG/ML-10,000 UNIT/ML-0.1 %	3	
MAXITROL OPHTHALMIC (EYE) OINTMENT 3.5 MG/G-10,000 UNIT/G-0.1 %	3	
neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%	1	
neomycin-polymyxin b-dexameth ophthalmic (eye) drops, suspension 3.5mg/ml-10,000 unit/ml-0.1 %	1	
neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %	1	
neomycin-polymyxin-hc ophthalmic (eye) drops, suspension 3.5-10,000-10 mg-unit-mg/ml	1	
neo-polycin hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%	1	
PREDNISOLONE SOD PH-MOXIFLOX OPHTHALMIC (EYE) DROPS 1-0.5 %	3	
PREDNISOLONE-MOXIFLOXACIN HCL OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.5 %	3	
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	3	ST
TOBRADEX ST OPHTHALMIC (EYE) DROPS, SUSPENSION 0.3-0.05 %	2	ST
tobramycin-dexamethasone ophthalmic (eye) drops, suspension 0.3-0.1 %	1	
ZYLET OPHTHALMIC (EYE) DROPS, SUSPENSION 0.3-0.5 %	3	ST
STEROIDS		
ALREX OPHTHALMIC (EYE) DROPS, SUSPENSION 0.2 %	3	

Drug Name	Tier	Requirements / Limits
dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %	1	
DEXTENZA INTRACANALICULAR INSERT 0.4 MG	3	
difluprednate ophthalmic (eye) drops 0.05 %	1	
DUREZOL OPHTHALMIC (EYE) DROPS 0.05 %	3	
EYSUVIS OPHTHALMIC (EYE) DROPS, SUSPENSION 0.25 %	3	PA; ST
FLAREX OPHTHALMIC (EYE) DROPS, SUSPENSION 0.1 %	3	
fluorometholone ophthalmic (eye) drops, suspension 0.1 %	1	
FML FORTE OPHTHALMIC (EYE) DROPS, SUSPENSION 0.25 %	2	
FML LIQUIFILM OPHTHALMIC (EYE) DROPS, SUSPENSION 0.1 %	3	
INVELTYS OPHTHALMIC (EYE) DROPS, SUSPENSION 1 %	3	
LOTEMAX OPHTHALMIC (EYE) DROPS, GEL 0.5 %	3	
LOTEMAX OPHTHALMIC (EYE) DROPS, SUSPENSION 0.5 %	3	
LOTEMAX OPHTHALMIC (EYE) OINTMENT 0.5 %	3	
LOTEMAX SM OPHTHALMIC (EYE) DROPS, GEL 0.38 %	3	
loteprednol etabonate ophthalmic (eye) drops, gel 0.5 %	1	
loteprednol etabonate ophthalmic (eye) drops, suspension 0.2 %, 0.5 %	1	
MAXIDEX OPHTHALMIC (EYE) DROPS, SUSPENSION 0.1 %	3	
PRED FORTE OPHTHALMIC (EYE) DROPS, SUSPENSION 1 %	3	
PRED MILD OPHTHALMIC (EYE) DROPS, SUSPENSION 0.12 %	2	
PREDNISOLONE ACETATE (PF) OPHTHALMIC (EYE) DROPS, SUSPENSION 1 %	3	

Drug Name	Tier	Requirements / Limits
prednisolone acetate ophthalmic (eye) drops, suspension 1 %	1	
prednisolone sodium phosphate ophthalmic (eye) drops 1 %	1	
STEROID-SULFONAMIDE COMBINATIONS		
sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)	1	
SULFONAMIDES		
sulfacetamide sodium ophthalmic (eye) drops 10 %	1	
sulfacetamide sodium ophthalmic (eye) ointment 10 %	1	
SYMPATHOMIMETICS		
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %, 0.15 %	3	
apraclonidine ophthalmic (eye) drops 0.5 %	1	
brimonidine ophthalmic (eye) drops 0.1 %, 0.15 %, 0.2 %	1	
IOPIDINE OPHTHALMIC (EYE) DROPPERETTE 1 %	2	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL OPHTHALMIC (EYE) DROPS 0.2-1 %	3	
phenylephrine hcl ophthalmic (eye) drops 10 %, 2.5 %	1	
UPNEEQ (PF) OPHTHALMIC (EYE) DROPPERETTE 0.1 %	3	PA; QL (30 per 30 days)
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTIHISTAMINE & ANTIALLERGENIC AGENTS		
adrenalin injection solution 1 mg/ml (1 ml)	1	
AUVI-Q INJECTION AUTO-INJECTOR 0.1 MG/0.1 ML, 0.15 MG/0.15 ML, 0.3 MG/0.3 ML	3	PA; ST; QL (4 per 30 days)
carbinoxamine maleate oral liquid 4 mg/5 ml	1	PA; ST; QL (2 per 30 days)
carbinoxamine maleate oral tablet 4 mg	1	PA; ST; QL (240 per 30 days)
carbinoxamine maleate oral tablet 6 mg	1	PA; ST; QL (120 per 30 days)
cetirizine oral solution 1 mg/ml	1	
CLARINEX ORAL TABLET 5 MG	3	
clemastine oral syrup 0.5 mg/5 ml	1	

Drug Name	Tier	Requirements / Limits
clemastine oral tablet 2.68 mg	1	
cyproheptadine oral syrup 2 mg/5 ml	1	
cyproheptadine oral tablet 4 mg	1	
desloratadine oral tablet 5 mg	1	PA; ST; QL (30 per 30 days)
desloratadine oral tablet, disintegrating 2.5 mg, 5 mg	1	PA; ST; QL (30 per 30 days)
dexchlorpheniramine maleate oral solution 2 mg/5 ml	1	
DIPHEN ORAL ELIXIR 12.5 MG/5 ML	3	
EPINEPHRINE INJECTION AUTO-INJECTOR 0.15 MG/0.15 ML	2	QL (4 per 30 days)
epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml	1	QL (4 per 30 days)
EPIPEN INJECTION AUTO-INJECTOR 0.3 MG/0.3 ML	3	QL (4 per 30 days)
EPIPEN JR INJECTION AUTO-INJECTOR 0.15 MG/0.3 ML	3	QL (4 per 30 days)
hydroxyzine hcl oral solution 10 mg/5 ml	1	
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	1	
hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg	1	
KARBINAL ER ORAL SUSPENSION, EXTENDED REL 12 HR 4 MG/5 ML	3	
levocetirizine oral solution 2.5 mg/5 ml	1	
levocetirizine oral tablet 5 mg	1	
NEFFY NASAL SPRAY, NON-AEROSOL 2 MG/SPRAY (0.1 ML)	3	QL (2 per 30 days)
promethazine oral syrup 6.25 mg/5 ml	1	
promethazine oral tablet 12.5 mg, 25 mg, 50 mg	1	
promethazine rectal suppository 12.5 mg, 25 mg	1	
promethegan rectal suppository 12.5 mg, 25 mg, 50 mg	1	
RYCLORA ORAL SOLUTION 2 MG/5 ML	3	
RYVENT ORAL TABLET 6 MG	3	
VISTARIL ORAL CAPSULE 25 MG	3	
COUGH & COLD THERAPY		
benzonatate oral capsule 100 mg, 150 mg, 200 mg	1	

Drug Name	Tier	Requirements / Limits
BROMFED DM ORAL SYRUP 2-30-10 MG/5 ML	3	
brompheniramine-pseudoeph-dm oral syrup 2-30-10 mg/5 ml	1	
CLARINEX-D 12 HOUR ORAL TABLET, ER MULTIPHASE 12 HR 2.5-120 MG	3	
codeine-guaifenesin oral liquid 10-100 mg/5 ml	1	
CODITUSSIN AC ORAL LIQUID 10-200 MG/5 ML	3	
CODITUSSIN DAC ORAL LIQUID 30-10-200 MG/5 ML	3	
g tussin ac oral liquid 10-100 mg/5 ml	1	
HISTEX-AC ORAL SYRUP 2.5-10-10 MG/5 ML	3	
HYCODAN (WITH HOMATROPINE) ORAL SYRUP 5-1.5 MG/5 ML	2	
HYCODAN (WITH HOMATROPINE) ORAL TABLET 5-1.5 MG	3	
hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr 10-8 mg/5 ml	1	
hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml	1	
hydrocodone-homatropine oral tablet 5-1.5 mg	1	
hydromet oral syrup 5-1.5 mg/5 ml	1	
MAR-COF CG ORAL LIQUID 7.5-225 MG/5 ML	3	
maxi-tuss ac oral liquid 10-100 mg/5 ml	1	
MAXI-TUSS CD ORAL LIQUID 4-10-10 MG/5 ML	3	
NINJACOF-XG ORAL LIQUID 8-200 MG/5 ML	3	
POLY-TUSSIN AC ORAL LIQUID 4-10-10 MG/5 ML	3	
promethazine-codeine oral syrup 6.25-10 mg/5 ml	1	
promethazine-dm oral syrup 6.25-15 mg/5 ml	1	
promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml	1	
RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR 8-90-0.24 MG	3	
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR 8-54.3 MG	3	

Drug Name	Tier	Requirements / Limits
PULMONARY AGENTS		
ACCOLATE ORAL TABLET 10 MG, 20 MG	3	
acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)	1	
ADCIRCA ORAL TABLET 20 MG	4	PA; ST; SP; LA
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	4	PA; SP; LA
ADRENALIN NASAL SOLUTION 1 MG/ML	3	
ADVAIR DISKUS INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	3	
ADVAIR HFA INHALATION AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	2	
AIRDUO DIGIHALER INHALATION AERO POWDR BREATH ACT W/SENSOR 113 MCG-14 MCG/ACTUATION, 232-14 MCG/ACTUATION	3	
AIRDUO RESPICLICK INHALATION AEROSOL POWDR BREATH ACTIVATED 113-14 MCG/ACTUATION, 232-14 MCG/ACTUATION, 55-14 MCG/ACTUATION	3	
ALBUTEROL HFA 90 MCG INHALER 90 MCG/ACTUATION	3	QL
albuterol hfa 90 mcg inhaler 90 mcg/actuation	1	QL (2 per 30 days)
albuterol sulfate inhalation inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml	1	
albuterol sulfate inhalation oral syrup 2 mg/5 ml	1	
albuterol sulfate inhalation oral tablet 2 mg, 4 mg	1	
albuterol sulfate inhalation oral tablet extended release 12 hr 4 mg, 8 mg	1	
ALVESCO INHALATION HFA AEROSOL INHALER 160 MCG/ACTUATION, 80 MCG/ACTUATION	3	PA; ST
alyq oral tablet 20 mg	4	PA; SP
ambrisentan oral tablet 10 mg, 5 mg	4	PA; SP; LA
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	2	
arformoterol inhalation solution for nebulization 15 mcg/2 ml	1	

Drug Name	Tier	Requirements / Limits
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	2	
ASMANEX HFA INHALATION AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	3	PA; ST
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	3	PA; ST
ATROVENT HFA INHALATION AEROSOL INHALER 17 MCG/ACTUATION	3	
azelastine-fluticasone nasal spray, non-aerosol 137-50 mcg/spray	1	
BEVESPI AEROSPHERE INHALATION HFA AEROSOL INHALER 9-4.8 MCG	3	
bosentan oral tablet 125 mg, 62.5 mg	4	PA; SP; LA
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE, 50-25 MCG/DOSE	2	
breyna inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation	1	
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	3	
BROVANA INHALATION SOLUTION FOR NEBULIZATION 15 MCG/2 ML	3	
budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml	1	
budesonide-formoterol inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation	1	
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	2	
cromolyn inhalation solution for nebulization 20 mg/2 ml	1	
DALIRESP ORAL TABLET 250 MCG, 500 MCG	3	
DUAKLIR PRESSAIR INHALATION AEROSOL POWDR BREATH ACTIVATED 400-12 MCG/ACTUATION	3	

Drug Name	Tier	Requirements / Limits
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION, 50-5 MCG/ACTUATION	2	
DYMISTA NASAL SPRAY, NON-AEROSOL 137-50 MCG/SPRAY	3	PA; ST
ELIXOPHYLLIN ORAL ELIXIR 80 MG/15 ML	3	
epinephrine hcl nasal solution 1 mg/ml	1	
ESBRIET ORAL CAPSULE 267 MG	4	PA; ST; SP; LA; QL (270 per 30 days)
ESBRIET ORAL TABLET 267 MG, 801 MG	4	PA; SP; LA; QL (90 per 30 days)
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	4	PA; ST; SP; LA
FASENRA SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 30 MG/ML	4	PA; ST; SP; LA
FIRAZYR SUBCUTANEOUS SYRINGE 30 MG/3 ML	4	PA; ST; SP
flunisolide nasal spray, non-aerosol 25 mcg (0.025 %)	1	
FLUTICASONE FUROATE-VILANTEROL INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	3	
FLUTICASONE PROPIONATE INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 250 MCG/ACTUATION, 50 MCG/ACTUATION	3	
FLUTICASONE PROPIONATE INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION, 220 MCG/ACTUATION, 44 MCG/ACTUATION	3	
fluticasone propionate nasal spray, suspension 50 mcg/actuation	1	
FLUTICASONE PROPION-SALMETEROL INHALATION AEROSOL POWDR BREATH ACTIVATED 113-14 MCG/ACTUATION, 232-14 MCG/ACTUATION, 55-14 MCG/ACTUATION	3	
fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	1	
FLUTICASONE PROPION-SALMETEROL INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	3	

Drug Name	Tier	Requirements / Limits
formoterol fumarate inhalation solution for nebulization 20 mcg/2 ml	1	
FORMOTEROL FUMARATE-NEBULIZER INHALATION SOLUTION FOR NEBULIZATION 20 MCG/2 ML	3	
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT, 3,000 UNIT	4	PA; ST; SP; LA
HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION 3.5 %, 7 %	3	
icatibant subcutaneous syringe 30 mg/3 ml	4	PA; ST; SP
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE 62.5 MCG/ACTUATION	3	
ipratropium bromide inhalation solution 0.02 %	1	
ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml	1	
KALBITOR SUBCUTANEOUS SOLUTION 10 MG/ML (1 ML)	4	PA; ST; SP; LA
KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG	4	PA; SP; LA
KALYDECO ORAL TABLET 150 MG	4	PA; SP; LA
LETAIRIS ORAL TABLET 10 MG, 5 MG	4	PA; SP; LA
levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml	1	
LEVALBUTEROL TARTRATE INHALATION HFA AEROSOL INHALER 45 MCG/ACTUATION	3	QL (2 per 30 days)
mometasone nasal spray, non-aerosol 50 mcg/actuation	1	
montelukast oral granules in packet 4 mg	1	
montelukast oral tablet 10 mg	1	
montelukast oral tablet, chewable 4 mg, 5 mg	1	
nebusal inhalation solution for nebulization 3 %	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	3	
NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	4	PA; ST; SP; LA; QL (1 per 30 days)
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	4	PA; ST; SP; LA; QL (1 per 30 days)

Drug Name	Tier	Requirements / Limits
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	4	PA; ST; SP; LA; QL (2 per 30 days)
OFEV ORAL CAPSULE 100 MG, 150 MG	4	PA; SP; LA; QL (60 per 30 days)
OHTUVAYRE INHALATION SUSPENSION FOR NEBULIZATION 3 MG/2.5 ML	4	PA; SP; QL (60 per 30 days)
OMNARIS NASAL SPRAY, NON-AEROSOL 50 MCG	3	PA; ST
OPSUMIT ORAL TABLET 10 MG	4	PA; SP; LA
OPSYNVI ORAL TABLET 10-20 MG, 10-40 MG	4	PA; SP; LA
ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG	4	PA; SP; LA
ORKAMBI ORAL GRANULES IN PACKET 75-94 MG	4	PA; ST; SP; LA
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	4	PA; SP; LA
ORLADEYO ORAL CAPSULE 110 MG, 150 MG	4	PA; ST; SP; QL (30 per 30 days)
PERFOROMIST INHALATION SOLUTION FOR NEBULIZATION 20 MCG/2 ML	3	
pirfenidone oral capsule 267 mg	4	PA; SP; LA; QL (270 per 30 days)
pirfenidone oral tablet 267 mg, 801 mg	4	PA; SP; LA; QL (90 per 30 days)
PIRFENIDONE ORAL TABLET 534 MG	4	PA; SP; QL (135 per 30 days)
PROAIR DIGIHALER INHALATION AERO POWDR BREATH ACT W/SENSOR 90 MCG/ACTUATION	3	QL (2 per 30 days)
PROAIR RESPICLICK INHALATION AEROSOL POWDR BREATH ACTIVATED 90 MCG/ACTUATION	3	QL (2 per 30 days)
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION, 90 MCG/ACTUATION	3	PA; ST
PULMICORT INHALATION SUSPENSION FOR NEBULIZATION 0.25 MG/2 ML, 0.5 MG/2 ML, 1 MG/2 ML	3	
pulmosal inhalation solution for nebulization 7 %	1	
PULMOZYME INHALATION SOLUTION 1 MG/ML	4	PA; SP; LA
QNASL NASAL HFA AEROSOL INHALER 40 MCG/ACTUATION, 80 MCG/ACTUATION	3	PA; ST

Drug Name	Tier	Requirements / Limits
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION, 80 MCG/ACTUATION	2	
REVATIO ORAL TABLET 20 MG	4	PA; SP; LA
roflumilast oral tablet 250 mcg, 500 mcg	1	
RYALTRIS NASAL SPRAY, NON-AEROSOL 665-25 MCG/SPRAY	3	PA; ST
sajazir subcutaneous syringe 30 mg/3 ml	4	PA; ST; SP; LA
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	2	
sildenafil (pulm.hypertension) oral suspension for reconstitution 10 mg/ml	4	PA; SP
sildenafil (pulm.hypertension) oral tablet 20 mg	4	PA; SP
SINGULAIR ORAL GRANULES IN PACKET 4 MG	3	
SINGULAIR ORAL TABLET 10 MG	3	
SINGULAIR ORAL TABLET, CHEWABLE 4 MG, 5 MG	3	
SINUVA SINUS IMPLANT 1,350 MCG	4	PA; SP
sodium chloride inhalation solution for nebulization 0.9 %, 10 %, 3 %, 7 %	1	
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	2	
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE 18 MCG	2	
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	2	
STRIVERDI RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	3	
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	3	
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N)	4	PA; SP; LA
tadalafil (pulm. hypertension) oral tablet 20 mg	4	PA; SP
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2 ML (150 MG/ML)	4	PA; ST; SP; LA
TAKHZYRO SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML (150 MG/ML)	4	PA; ST; SP; LA

Drug Name	Tier	Requirements / Limits
terbutaline oral tablet 2.5 mg, 5 mg	1	
TEZSPIRE SUBCUTANEOUS PEN INJECTOR 210 MG/1.91 ML (110 MG/ML)	4	PA; ST; SP; LA
TEZSPIRE SUBCUTANEOUS SYRINGE 210 MG/1.91 ML (110 MG/ML)	4	PA; ST; SP; LA
THEO-24 ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	3	
theophylline oral elixir 80 mg/15 ml	1	
theophylline oral solution 80 mg/15 ml	1	
theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg	1	
theophylline oral tablet extended release 24 hr 400 mg, 600 mg	1	
tiotropium bromide inhalation capsule, w/inhalation device 18 mcg	1	
TRACLEER ORAL TABLET 125 MG, 62.5 MG	4	PA; SP; LA
TRACLEER ORAL TABLET FOR SUSPENSION 32 MG	4	PA; SP; LA
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	2	
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL 100-50-75MG (D) /75 MG (N), 80-40-60 MG (D) /59.5 MG (N)	4	PA; SP; LA
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	4	PA; SP; LA
TUDORZA PRESSAIR INHALATION AEROSOL POWDR BREATH ACTIVATED 400 MCG/ACTUATION	3	
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16(112)-32(112) - 48(28) MCG, 32 MCG, 48 MCG, 64 MCG	4	PA; SP; LA
TYVASO INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; SP; LA
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; SP; LA
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	4	PA; SP; LA

Drug Name	Tier	Requirements / Limits
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 10 MCG/ML, 20 MCG/ML	4	PA; SP; LA
VENTOLIN HFA INHALATION AEROSOL INHALER 90 MCG/ACTUATION	3	QL (2 per 30 days)
wixela inhub inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	1	
XHANCE NASAL AEROSOL BREATH ACTIVATED 93 MCG/ACTUATION	3	PA; ST
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 150 MG/ML	4	PA; ST; SP; LA; QL (2 per 30 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML	4	PA; SP; LA; QL (1 per 30 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 75 MG/0.5 ML	4	PA; ST; SP; LA; QL (4 per 30 days)
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	4	PA; ST; SP; LA; QL (2 per 30 days)
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; ST; SP; LA; QL (2 per 30 days)
XOLAIR SUBCUTANEOUS SYRINGE 300 MG/2 ML	4	PA; ST; SP; LA; QL (1 per 30 days)
XOLAIR SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	4	PA; ST; SP; LA; QL (4 per 30 days)
XOPENEX HFA INHALATION AEROSOL INHALER 45 MCG/ACTUATION	3	QL (2 per 30 days)
YUPELRI INHALATION SOLUTION FOR NEBULIZATION 175 MCG/3 ML	3	
zafirlukast oral tablet 10 mg, 20 mg	1	
ZETONNA NASAL HFA AEROSOL INHALER 37 MCG/ACTUATION	3	PA; ST
zileuton oral tablet, er multiphase 12 hr 600 mg	1	ST
ZYFLO ORAL TABLET 600 MG	3	ST
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg	1	
DETROL LA ORAL CAPSULE, EXTENDED RELEASE 24HR 2 MG, 4 MG	3	
DETROL ORAL TABLET 1 MG, 2 MG	3	
fesoterodine oral tablet extended release 24 hr 4 mg, 8 mg	1	

Drug Name	Tier	Requirements / Limits
flavoxate oral tablet 100 mg	1	
GEMTESA ORAL TABLET 75 MG	3	PA; ST
mirabegron oral tablet extended release 24 hr 25 mg, 50 mg	1	PA; ST
MYRBETRIQ ORAL SUSPENSION, EXTENDED REL RECON 8 MG/ML	3	ST
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG	3	ST
oxybutynin chloride oral syrup 5 mg/5 ml	1	
OXYBUTYNIN CHLORIDE ORAL TABLET 2.5 MG	3	
oxybutynin chloride oral tablet 5 mg	1	
oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg	1	
OXYTROL TRANSDERMAL PATCH SEMIWEEKLY 3.9 MG/24 HR	2	ST
solifenacin oral tablet 10 mg, 5 mg	1	
tolterodine oral capsule, extended release 24hr 2 mg, 4 mg	1	
tolterodine oral tablet 1 mg, 2 mg	1	
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HR 4 MG, 8 MG	3	ST
trospium oral capsule, extended release 24hr 60 mg	1	
trospium oral tablet 20 mg	1	
VESICARE LS ORAL SUSPENSION 1 MG/ML	3	
VESICARE ORAL TABLET 10 MG, 5 MG	3	
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
alfuzosin oral tablet extended release 24 hr 10 mg	1	
AVODART ORAL CAPSULE 0.5 MG	3	
dutasteride oral capsule 0.5 mg	1	
dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg	1	
ENTADFI ORAL CAPSULE 5-5 MG	3	PA
finasteride oral tablet 5 mg	1	
FLOMAX ORAL CAPSULE 0.4 MG	3	PA; ST
PROSCAR ORAL TABLET 5 MG	3	
RAPAFLO ORAL CAPSULE 4 MG, 8 MG	3	

Drug Name	Tier	Requirements / Limits
silodosin oral capsule 4 mg, 8 mg	1	
tamsulosin oral capsule 0.4 mg	1	
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HR 10 MG	3	
CHOLINERGIC STIMULANTS		
bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	1	
MISCELLANEOUS UROLOGICALS		
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	4	PA; SP
ELMIRON ORAL CAPSULE 100 MG	2	PA; ST
K-PHOS NO 2 ORAL TABLET 305-700 MG	3	
K-PHOS ORIGINAL ORAL TABLET, SOLUBLE 500 MG	3	
methen-sod phos-meth blue-hyos oral tablet 81.6-40.8-0.12 mg	1	
ORACIT ORAL SOLUTION 490-640 MG/5 ML	3	
potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)	1	
PROCYSBI ORAL CAPSULE, DELAYED REL SPRINKLE 25 MG, 75 MG	4	PA; ST; SP; LA
PROCYSBI ORAL GRANULES DEL RELEASE IN PACKET 300 MG, 75 MG	4	PA; ST; SP; LA
RENACIDIN IRRIGATION SOLUTION 1980.6 MG-59.4 MG-980.4MG/30ML	2	
RIVFLOZA SUBCUTANEOUS SOLUTION 80 MG/0.5 ML (160 MG/ML)	4	PA; SP
RIVFLOZA SUBCUTANEOUS SYRINGE 128 MG/0.8 ML, 160 MG/ML	4	PA; SP
sodium citrate-citric acid oral solution 490-640 mg/5 ml	1	
URELLE ORAL TABLET 81-10.8-40.8 MG	3	
uretron d-s oral tablet 81.6-10.8-40.8 mg	1	
URIBEL TABS ORAL TABLET 81.6-0.12-10.8 MG	3	
URIMAR-T ORAL CAPSULE 120-10.8-40.8 MG	3	
urimar-t oral tablet 120-10.8-0.12 mg	1	
URNEVA ORAL CAPSULE 120-10.8-40.8 MG	3	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE 10 MEQ (1,080 MG)	3	

Drug Name	Tier	Requirements / Limits
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE 15 MEQ	3	
urogesic-blue oral tablet 81.6-40.8-0.12 mg	1	
uro-mp oral capsule 118-10-40.8-36 mg	1	
UROQID-ACID NO.2 ORAL TABLET 500-500 MG	3	
uro-sp oral capsule 118-10-40.8-36 mg	1	
uryl oral tablet 81.6-40.8-0.12 mg	1	
URINARY ANESTHETICS		
phenazopyridine oral tablet 100 mg, 200 mg	1	
PYRIDIUM ORAL TABLET 100 MG, 200 MG	3	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
calcium acetate(phosphat bind) oral capsule 667 mg	1	
calcium acetate(phosphat bind) oral tablet 667 mg	1	
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	2	
effer-k oral tablet, effervescent 25 meq	1	
GALZIN ORAL CAPSULE 25 MG (ZINC), 50 MG (ZINC)	3	
klor-con 10 oral tablet extended release 10 meq	1	
klor-con 8 oral tablet extended release 8 meq	1	
klor-con m10 oral tablet, er particles/crystals 10 meq	1	
klor-con m15 oral tablet, er particles/crystals 15 meq	1	
klor-con m20 oral tablet, er particles/crystals 20 meq	1	
klor-con oral packet 20 meq	1	
klor-con/ef oral tablet, effervescent 25 meq	1	
K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ	3	
lugols oral solution 5 %	1	
POKONZA ORAL PACKET 10 MEQ	3	
potassium chloride oral capsule, extended release 10 meq, 8 meq	1	

Drug Name	Tier	Requirements / Limits
potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml	1	
potassium chloride oral packet 20 meq	1	
potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq	1	
POTASSIUM CHLORIDE ORAL TABLET EXTENDED RELEASE 15 MEQ	2	
potassium chloride oral tablet, er particles/crystals 10 meq, 15 meq, 20 meq	1	
strong iodine oral solution 5 %	1	
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
DOJOLVI ORAL LIQUID 8.3 KCAL/ML	4	PA; ST; SP; LA
VITAMINS & HEMATINICS		
ACCRUFER ORAL CAPSULE 30 MG	3	PA
ascorbic acid (vitamin c) injection solution 500 mg/ml	1	
b complex 100 injection solution 100-2-100-2-2 mg/ml	1	
BAL-CARE DHA ESSENTIAL ORAL COMBO PACK, TABLET AND CAP, DR 27 MG IRON-1 MG -374 MG	3	
bal-care dha oral combo pack, tablet and cap, dr 27-1-430 mg	1	
CITRANATAL B-CALM (FE GLUC) ORAL TABLETS, SEQUENTIAL 20 MG IRON-1 MG -25 MG/25 MG	3	
CITRANATAL MEDLEY ORAL CAPSULE 27 MG IRON-1 MG -200 MG	3	
c-nate dha oral capsule 28 mg iron-1 mg -200 mg	1	
complete natal dha oral combo pack 29 mg iron- 1 mg-200 mg	1	
CONCEPT DHA ORAL CAPSULE 35-1-200 MG	3	
CONCEPT OB ORAL CAPSULE 85-1 MG	3	
cyanocobalamin (vitamin b-12) injection solution 1,000 mcg/ml	1	PA
cyanocobalamin (vitamin b-12) nasal spray, non-aerosol 500 mcg/spray	1	PA; ST
dodex injection solution 1,000 mcg/ml	1	

Drug Name	Tier	Requirements / Limits
DUET DHA WITH OMEGA-3 ORAL COMBO PACK 25 MG IRON-1 MG -400 MG	3	
elite-ob oral tablet 50 mg iron- 1.25 mg	1	
ENBRACE HR ORAL CAPSULE, IR - DELAY REL, BIPHASE 1.5 MG IRON- 8.73 MG-6.4 MG	3	
ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)	1	
FA-8 ORAL CAPSULE 0.8 MG	3	
FER-IN-SOL ORAL DROPS 15 MG IRON (75 MG)/ML	3	
FLORIVA (FLUORIDE-VITAMIN D3) ORAL DROPS 0.25 MG (0.55 MG)-400 UNIT/ML	3	
fluoride (sodium) oral drops 0.5 mg (1.1 mg sod.fluorid)/ml	1	ACA PV
fluoride (sodium) oral tablet, chewable 0.25 mg (0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)	1	ACA PV
folic acid injection solution 5 mg/ml	1	
folic acid oral tablet 1 mg	1	
folic acid oral tablet 400 mcg, 800 mcg	1	ACA PV
folivane-ob oral capsule 85-1 mg	1	
hydroxocobalamin intramuscular solution 1,000 mcg/ml	1	
KOSHER PRENATAL PLUS IRON ORAL TABLET 30 MG IRON- 1 MG	3	
ludent fluoride oral tablet, chewable 0.25 mg (0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)	1	ACA PV
MARNATAL-F ORAL CAPSULE 60 MG IRON-1 MG	3	
MECOBALAMIN (VITAMIN B12) INJECTION RECON SOLN 10, 000 MCG	3	
m-natal plus oral tablet 27 mg iron- 1 mg	1	
multi-vitamin with fluoride oral drops 0.25 mg/ml, 0.5 mg/ml	1	ACA PV
multi-vitamin with fluoride oral tablet, chewable 0.25 mg, 0.5 mg, 1 mg	1	ACA PV
mvc-fluoride oral tablet, chewable 0.25 mg, 0.5 mg, 1 mg	1	ACA PV
mynatal oral capsule 65 mg iron- 1 mg	1	

Drug Name	Tier	Requirements / Limits
mynatal plus oral tablet 65 mg iron- 1 mg	1	
mynatal-z oral tablet 65 mg iron- 1 mg	1	
NASCOBAL NASAL SPRAY, NON-AEROSOL 500 MCG/SPRAY	3	PA; ST
NATACHEW (FE BIS-GLYCINATE) ORAL TABLET, CHEWABLE 28 MG IRON -1 MG	3	
NATAL PNV ORAL TABLET 6 MG IRON-833.5 MCG DFE	3	
NEEVODHA (WITH ALGAL OIL) ORAL CAPSULE 27 MG IRON-1.13 MG-581.92 MG	3	
NEONATAL FE ORAL TABLET 90 MG-120 MG-12 MCG-1,000 MCG	3	
NEONATAL PLUS VITAMIN ORAL TABLET 27 MG IRON- 1 MG	3	
NESTABS ABC ORAL COMBO PACK 32 MG IRON-1 MG -120 MG-180 MG	3	
NESTABS DHA ORAL COMBO PACK 32 MG IRON- 1,000 MCG-230MG	3	
NESTABS ONE ORAL CAPSULE 38-1-225 MG	3	
NESTABS ORAL TABLET 32-1,000 MG-MCG	3	
newgen oral tablet 32-1,000 mg-mcg	1	
NOVAFERRUM ORAL DROPS 15 MG IRON/ML	3	
OB COMPLETE ONE ORAL CAPSULE 40-10-1-300 MG	3	
OB COMPLETE ORAL TABLET 50 MG IRON-1.25 MG	2	
OB COMPLETE PETITE ORAL CAPSULE 35 MG IRON-5 MG IRON-1 MG	3	
OB COMPLETE PREMIER ORAL TABLET 30-20-1 MG	3	
OB COMPLETE WITH DHA ORAL CAPSULE 30 MG IRON-10 MG IRON-1 MG	3	
pnv-dha oral capsule 27 mg iron-1 mg -300 mg	1	
pnv-omega oral capsule 28-1-300 mg	1	
pnv-select oral tablet 27-1 mg	1	
pr natal 400 ec oral combo pack, tablet and cap, dr 29-1-400 mg	1	
pr natal 400 oral combo pack 29-1-400 mg	1	

Drug Name	Tier	Requirements / Limits
pr natal 430 ec oral combo pack, tablet and cap, dr 29-1-430 mg	1	
pr natal 430 oral combo pack 29 mg iron-1 mg -430 mg	1	
PRENATA ORAL TABLET, CHEWABLE 29 MG IRON- 1 MG	3	
prenatabs fa oral tablet 29-1 mg	1	
prenatabs rx oral tablet 29 mg iron- 1 mg	1	
prenatal plus (calcium carb) oral tablet 27 mg iron- 1 mg	1	
PRENATAL PLUS DHA ORAL COMBO PACK 27 MG IRON-1 MG -312 MG-250 MG	3	
prenatal plus oral tablet 29 mg iron- 1 mg	1	
PRENATAL PLUS VITAMIN-MINERAL ORAL TABLET 27 MG IRON- 1 MG	3	
prenatal vitamin oral tablet 27 mg iron- 0.8 mg	1	ACA PV
prenatal-u oral capsule 106.5-1 mg	1	
PRENATE AM ORAL TABLET 1-500 MG	3	
PRENATE CHEWABLE ORAL TABLET, CHEWABLE 1 MG	3	
PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE 18 MG IRON-1 MG -300 MG	3	
PRENATE ELITE (IRON ASP GLYC) ORAL TABLET 20 MG IRON- 1 MG	3	
PRENATE ENHANCE ORAL CAPSULE 28 MG IRON- 1 MG-400 MG	3	
PRENATE ESSENTIAL(IRON-ASP-GL) ORAL CAPSULE 18 MG IRON- 1 MG-300 MG	3	
PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE 18-1-350 MG	3	
PRENATE PIXIE ORAL CAPSULE 10 MG IRON- 1 MG-200 MG	3	
PRENATE RESTORE ORAL CAPSULE 27 MG IRON- 1 MG-400 MG	3	
PRENATE STAR ORAL TABLET 20 MG IRON-1 MG	3	
PRIMACARE ORAL CAPSULE 30-1-300 MG	3	
PROVIDA OB ORAL CAPSULE 40 MG IRON-1.25 MG	3	

Drug Name	Tier	Requirements / Limits
R-NATAL OB ORAL CAPSULE 20 MG IRON-1 MG-320 MG	3	
SELECT-OB (FOLIC ACID) ORAL TABLET, CHEWABLE 29 MG IRON- 1 MG	3	
SELECT-OB + DHA ORAL COMBO PACK 29 MG IRON-1 MG -250 MG	3	
SELECT-OB ORAL TABLET, CHEWABLE 29 MG IRON- 1 MG	3	
se-natal 19 chewable oral tablet, chewable 29 mg iron- 1 mg	1	
se-natal-19 oral tablet 29 mg iron- 1 mg	1	
soluvita a,c,d with fluoride oral drops 0.25 mg fluor. (0.55 mg)/ml	1	ACA PV
soluvita oral drops 0.5 mg (1.1 mg sod.fluorid)/ml	1	ACA PV
taron-c dha oral capsule 35-1-200 mg	1	
THRIVITE RX ORAL TABLET 29 MG IRON- 1 MG	3	
TRICARE ORAL TABLET 27 MG IRON- 1 MG	3	
trinatal rx 1 oral tablet 60 mg iron-1 mg	1	
trinate oral tablet 28 mg iron- 1 mg	1	
TRINAZ ORAL TABLET 12-1 MG	3	
TRISTART DHA ORAL CAPSULE 31 MG IRON- 1 MG-200 MG	3	
tri-vitamin with fluoride oral drops 0.25 mg fluor. (0.55 mg)/ml, 0.5 mg fluoride (1.1 mg)/ml	1	ACA PV
VITAFOL FE PLUS ORAL CAPSULE 90 MG IRON- 1 MG-200 MG	3	
VITAFOL GUMMIES ORAL TABLET, CHEWABLE 3.33 MG IRON- 0.33 MG	3	
VITAFOL ULTRA ORAL CAPSULE 29 MG IRON- 1 MG-200 MG	3	
VITAFOL-OB ORAL TABLET 65-1 MG	2	
VITAFOL-OB+DHA ORAL COMBO PACK 65-1-250 MG	3	
VITAFOL-ONE ORAL CAPSULE 29 MG IRON-1 MG-200 MG	3	
VITAMEDMD ONE RX ORAL CAPSULE 30 MG IRON-1MG -200 MG	3	
vitamins a, c, d and fluoride oral drops 0.25 mg fluor. (0.55 mg)/ml, 0.5 mg fluoride (1.1 mg)/ml	1	ACA PV

Drug Name	Tier	Requirements / Limits
VITATRUE ORAL COMBO PACK 30 MG IRON- 1.4 MG-300 MG	3	
wescap-c dha oral capsule 35-1-200 mg	1	
wescap-pn dha oral capsule 27 mg iron-1 mg -300 mg	1	
wesnatal dha complete oral combo pack 29 mg iron- 1 mg-200 mg	1	
wesnate dha oral capsule 28 mg iron-1 mg -200 mg	1	
westab plus oral tablet 27 mg iron- 1 mg	1	
westgel dha oral capsule 31 mg iron- 1 mg-200 mg	1	
zatean-pn dha oral capsule 27 mg iron-1 mg -300 mg	1	
zatean-pn plus oral capsule 28-1-300 mg	1	
zingiber oral tablet 1.2 mg-40 mg- 124.1 mg-100 mg	1	

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