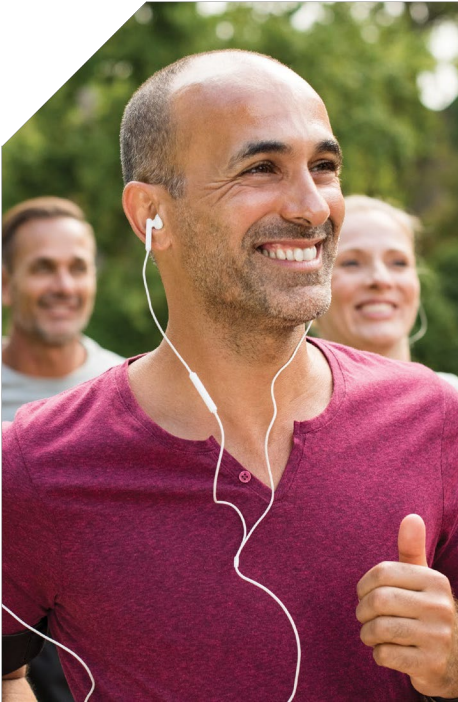




2025 FORMULARY

EFFECTIVE JANUARY 1, 2025



Ambetter.BuckeyeHealthPlan.com

Formulary Introduction

FORMULARY

The Ambetter Formulary, or Prescription Drug List, is a guide to available brand and generic drugs that are approved by the Food and Drug Administration (FDA) and covered through your prescription drug benefit. Generic drugs have the same active ingredients as their brand name counterparts and should be considered the first line of treatment. The FDA requires generics to be safe and work the same as brand name drugs. If there is no generic available, there may be more than one brand name drug to treat a condition. Preferred brand name drugs are listed on Tier 2 to help identify brand drugs that are clinically appropriate, safe, and cost-effective treatment options, if a generic medication on the formulary is not suitable for your condition.

Please note, the Formulary is not meant to be a complete list of the drugs covered under your prescription benefit. Not all dosage forms or strengths of a drug may be covered. This list is periodically reviewed and updated and may be subject to change. Drugs may be added or removed, or additional requirements may be added in order to approve continued usage of a specific drug.

Specific prescription benefit plan designs may not cover certain products or categories, regardless of their appearance in this document. Please check your benefits for coverage limitations and your share of cost for your drugs.

Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are lower case.

Drugs are covered under different copay tiers depending on your benefit:

Tier 0 - No copayment for those drugs that are used for prevention and are mandated by the Affordable Care Act. Select oral contraceptives, vitamin D, folic acid for women of child bearing age, over-the-counter (OTC) aspirin, and smoking cessation products may be covered under this tier. Certain age limits may apply.

Tier 1_A - Lowest copayment for select drugs that offer the greatest value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.

Tier 1_B - Low copayment for those drugs that offer great value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.

Tier 2 - Medium copayment covers brand name drugs that are generally more affordable, or may be preferred compared to other drugs to treat the same conditions.

Tier 3 - High copayment covers higher cost brand name and non-preferred generic drugs. This tier may also cover non-specialty drugs that are not on the Prescription Drug List but approval has been granted for coverage.

Tier 4 - Highest copayment is for "specialty" drugs used to treat complex, chronic conditions that may require special handling, storage or clinical management. Prescription drugs covered under the specialty tier may require fulfillment at a pharmacy that participates in Ambetter's "specialty" or "hemophilia" networks. For additional information on which pharmacies are within our "specialty" or "hemophilia" networks, please consult Ambetter website's pharmacy information section.

In addition to products listed in this formulary, Apretude and Descovy 200-25mg are available on preventative tier and do not require prior authorization.

Prior Authorization for Non-Formulary Drugs

To obtain prior authorization for a non-formulary drug, your provider must fill out the Prior Authorization form. Services will respond via fax or phone within 24 hours of receipt of all necessary information for urgent requests, and within 72 hours for non-urgent requests, unless state law requires faster response. If the request is disapproved, the notice of disapproval will contain a clear explanation of the specific reasons for disapproving the prior authorization request, or if the request was incomplete, the explanation will identify the missing material information that is necessary to complete the request.

Formulary Abbreviations:

Abbreviation	Term	What it means
AL	Age Limit	Some drugs are only covered for certain ages.
QL	Quantity Limit	Some drugs are only covered for a certain amount.
PA	Prior Authorization	Your doctor must ask for approval from Ambetter before some drugs will be covered.
ST	Step Therapy	In some cases, you must first try certain drugs before Ambetter covers another drug for your medical condition. For example, if Drug A and Drug B both treat your medical condition, Ambetter may not cover Drug B unless you try Drug A first.
NF	Non-formulary	This product is not covered unless you or your provider request an exception. Alternative medications are listed next to non-covered product
RX/OTC	Prescription and OTC	These drugs are made in both prescription form and Over-the-counter (OTC) form.
SP	Specialty Drug	These products are Specialty Drugs that may have special fill requirements.
SF	Split Fill	Initially, certain medications may only be available in 15-day-supply increments until you are stabilized on the medication. After you have been taking the medication for 90 days, this restriction may no longer apply.
#/+	Not applicable	Medications on the formulary with #/+ may take alternative copays for certain benefit designs. Please consult your benefit documents for more information.

Opioid Medications:

Medications identified on the formulary by "New starts limited to 7 day supply" allow up to two 7 day fills during any 28 day period and up to a total of 28 day non-consecutive supply in any 90 day period. This limit applies cumulatively to all opioid medications filled. For fills exceeding these limits, your providers may submit a Prior Authorization request.

Introducción al Formulario

FORMULARIO

El Formulario de Ambetter o la Lista de medicamentos recetados, es una guía de los medicamentos de marca y genéricos disponibles que están aprobados por la Administración de Alimentos y Medicamentos (FDA) y que están cubiertos a través de su beneficio de medicamentos recetados. Los medicamentos genéricos tienen los mismos principios activos que los de marca y deben considerarse la primera línea de tratamiento. La FDA exige que los medicamentos genéricos sean seguros y funcionen igual que los medicamentos de marca. Si no hay un genérico disponible, podría haber más de un medicamento de marca para tratar una condición. Los medicamentos de marca preferidos figuran en el nivel 2 para ayudar a identificar los medicamentos de marca que son opciones de tratamiento clínicamente adecuadas, seguras y rentables, si un medicamento genérico del Formulario no es adecuado para su condición.

Tenga en cuenta que el Formulario no pretende ser una lista completa de los medicamentos cubiertos por su beneficio de medicamentos recetados. Es posible que no estén cubiertas todas las formas farmacéuticas o concentraciones de un medicamento. Esta lista se revisa y actualiza periódicamente y puede estar sujeta a cambios. Se pueden agregar o eliminar medicamentos, o se pueden incorporar requisitos adicionales para aprobar el uso continuado de un medicamento específico.

Es posible que determinados diseños de planes de beneficios de medicamentos recetados no cubran algunos productos o categorías, independientemente de que figuren en este documento. Revise sus beneficios para conocer las limitaciones de la cobertura y la parte que le corresponde pagar por sus medicamentos.

Clave de la lista de medicamentos:

Los medicamentos de marca aparecen en MAYÚSCULAS y los medicamentos genéricos aparecen en minúsculas.

Los medicamentos están cubiertos por diferentes niveles de copago en función de su beneficio:

- Nivel 0** - Sin copago para aquellos medicamentos que se usan para prevención y son obligatorios según la Ley de Cuidado de Salud Asequible. Los anticonceptivos orales seleccionados, la vitamina D, el ácido fólico para mujeres en edad fértil, las aspirinas de venta libre (OTC) y los productos para dejar de fumar pueden estar cubiertos en este nivel. Es posible que se apliquen ciertos límites de edad.
- Nivel 1_A** - El copago más bajo para medicamentos seleccionados que ofrecen el mayor valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 1_B** - Copago bajo para aquellos medicamentos que ofrecen un gran valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 2** - El copago medio cubre los medicamentos de marca que suelen ser más asequibles o que pueden ser preferidos en comparación con otros medicamentos para tratar las mismas condiciones.
- Nivel 3** - El copago alto cubre los medicamentos de marca de costo más alto y medicamentos genéricos no preferidos. Este nivel también puede cubrir medicamentos no especializados que no figuran en la Lista de medicamentos recetados, pero cuya cobertura ha sido aprobada.
- Nivel 4** - El copago más alto es para medicamentos “de especialidad” usados para tratar condiciones crónicas complejas que pueden requerir una manipulación, almacenamiento o administración clínica especiales. Los medicamentos recetados cubiertos en el nivel de especialidad pueden tener que ser surtidos en una farmacia que participe de las redes de “especialidad” o de “hemofilia” de Ambetter. Para obtener información adicional sobre qué farmacias están dentro de nuestras redes de “especialidad” o “hemofilia”, debe consultar la sección de información farmacéutica del sitio web de Ambetter.

Autorización previa para medicamentos no incluidos en el Formulario

Para obtener autorización previa para un medicamento no incluido en el Formulario, su proveedor debe completar el formulario de autorización previa. Los servicios responderán por fax o teléfono en un plazo de 24 horas a partir de la recepción de toda la información necesaria para las solicitudes urgentes, y en un plazo de 72 horas en caso de solicitudes no urgentes, a menos que la legislación estatal exija una respuesta más rápida. Si la solicitud es denegada, el aviso de la denegación incluirá una explicación clara de los motivos específicos para denegar la solicitud de autorización previa, o si la autorización estaba incompleta, la explicación identificará la información material faltante necesaria para completar la solicitud.

Abreviaturas del Formulario:

Abreviatura	Plazo	Significado
AL	Límite de edad	Algunos medicamentos solo están cubiertos para determinadas edades.
QL	Límite de cantidad	Algunos medicamentos solo están cubiertos para determinadas cantidades.
PA	Autorización previa	Su médico debe solicitar la aprobación de Ambetter antes de que algunos medicamentos tengan cobertura.
ST	Terapia escalonada	En algunos casos, usted primero debe probar un medicamento determinado antes de que Ambetter cubra otro medicamento para su condición médica. Por ejemplo, si tanto el medicamento A como el medicamento B tratan su condición médica, Ambetter podría no cubrir el medicamento B a menos que usted pruebe primero el medicamento A.
NF	No incluido en el Formulario	Este producto no está cubierto a menos que usted o su proveedor soliciten una excepción. Hay medicamentos alternativos que figuran a continuación del producto no cubierto.
RX/OTC	Medicamentos recetados y OTC	Estos medicamentos se fabrican tanto como medicamento recetado como de venta libre (OTC).
SP	Medicamento de especialidad	Estos productos son medicamentos de especialidad que pueden tener requisitos de surtido especiales.
SF	Surtido dividido	Al principio es posible que ciertos medicamentos solo estén disponibles en suministros incrementales cada 15 días hasta que usted se estabilice con el medicamento. Una vez transcurridos 90 días desde que comenzó a tomar este medicamento, es posible que esta restricción ya no se aplique.
#/+	No se aplica	Los medicamentos que aparecen en el Formulario con los símbolos #/+ pueden conllevar copagos alternativos para ciertos diseños de beneficio. Consulte sus documentos sobre los beneficios para obtener más información.

Medicamentos opioides:

Los medicamentos identificados en el Formulario como “Nuevos pedidos limitados a suministro de 7 días” permiten hasta dos surtidos de 7 días durante cualquier periodo de 28 días y hasta un total de 28 días no consecutivos en un periodo de 90 días. Este límite se aplica de forma acumulativa a todos los medicamentos opioides surtidos. Para surtidos que superen estos límites, sus proveedores pueden presentar una solicitud de autorización previa.

Drug Name	Drug Tier	Requirements/ Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
<i>amphetamine sulfate TABS</i>	3	PA
<i>amphetamine-dextroamphetamine CP24 20 MG, 25 MG, 30 MG</i>	1B	QL(2 EA daily)
<i>amphetamine-dextroamphetamine CP24 15 MG</i>	1B	
<i>amphetamine-dextroamphetamine CP24 5 MG, 10 MG</i>	1B	QL(1 EA daily)
<i>amphetamine-dextroamphetamine TABS 30 MG</i>	1B	QL(2 EA daily)
<i>amphetamine-dextroamphetamine TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG</i>	1B	QL(3 EA daily)
<i>dextroamphetamine sulfate CP24 5 MG</i>	1B	
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	1B	QL(4 EA daily)
<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1B	QL(4 EA daily)
<i>dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	1B	
<i>lisdexamfetamine dimesylate CAPS</i>	1B	QL(1 EA daily); ST
<i>lisdexamfetamine dimesylate CHEW</i>	1B	QL(1 EA daily); ST
<i>methamphetamine hcl</i>	1B	QL(5 EA daily); AL(At least 6 yrs old)
Anorexiants Non-Amphetamine		

Drug Name	Drug Tier	Requirements/ Limits
<i>phendimetrazine tartrate TABS</i>	1B	PA
<i>phentermine hcl CAPS</i>	1B	PA
Anti-Obesity Agents		
CONTRAVE	3	QL(4 EA daily); PA
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>clonidine hcl (adhd) TB12</i>	1B	
<i>guanfacine hcl (adhd)</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
SUNOSI 150 MG	3	QL(1 EA daily); PA
SUNOSI 75 MG	3	QL(2 EA daily); PA
Stimulants - Misc.		
<i>armodafinil</i>	1B	QL(1 EA daily); AL(At least 17 yrs old); PA
<i>dexmethylphenidate hcl CP24</i>	1B	QL(1 EA daily)
<i>dexmethylphenidate hcl TABS</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CHEW 10 MG</i>	1B	QL(5 EA daily)
<i>methylphenidate hcl CHEW 2.5 MG</i>	1B	QL(2 EA daily)
<i>methylphenidate hcl CHEW 5 MG</i>	1B	QL(6 EA daily)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)	Aminoglycosides		
<i>methylphenidate hcl CP24</i>	1B	QL(1 EA daily)	<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1B	
<i>methylphenidate hcl CPCR</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)	ARIKAYCE	4	PA
<i>methylphenidate hcl SOLN</i>	1B	QL(30 ML daily); AL(At least 6 yrs old)	<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %</i>	1B	
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	1B	QL(5 EA daily); AL(At least 6 yrs old)	<i>gentamicin sulfate IJ 40 MG/ML</i>	1B	
<i>methylphenidate hcl TABS 5 MG</i>	1B	QL(6 EA daily); AL(At least 6 yrs old)	<i>neomycin sulfate TABS</i>	1B	
<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)	<i>streptomycin sulfate SOLR</i>	3	
<i>methylphenidate hcl TB24 18 MG, 27 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)	<i>tobramycin sulfate SOLN IJ 2 GM/50ML, 10 MG/ML, 80 MG/2ML</i>	1B	
<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1B	QL(3 EA daily); AL(At least 6 yrs old)	<i>tobramycin NEBU</i>	4	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); PA
<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)	ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)	Antirheumatic - Enzyme Inhibitors		
<i>methylphenidate PTCH</i>	1B	QL(1 EA daily); PA	RINVOQ LQ SOLN	4	QL(12 ML daily); PA
<i>modafinil 100 MG</i>	1B	QL(1 EA daily); PA	RINVOQ TB24	4	QL(1 EA daily); PA
<i>modafinil 200 MG</i>	1B	QL(2 EA daily); PA	XELJANZ XR TB24	4	QL(1 EA daily); PA
ALLERGENIC EXTRACTS/BIOLOGICALS MISC			XELJANZ SOLN	4	QL(20 ML daily); PA
Allergenic Extracts			XELJANZ TABS 10 MG	4	QL(2 EA daily); PA
GRASTEK SUBL	3	PA	XELJANZ TABS 5 MG	4	QL(2 EA daily); SP; PA
AMEBICIDES			Anti-TNF-alpha - Monoclonal Antibodies		
Amebicides			CYLTEZO (2 PEN) AJKT	4	QL(0.072 EA daily); PA
SOLOSEC	3	PA	CYLTEZO (2 PEN) AJKT	4	QL(0.215 EA daily); PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections			CYLTEZO (2 SYRINGE) PSKT 10 MG/0.2ML, 40 MG/0.4ML	4	QL(0.072 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CYLTEZO (2 SYRINGE) PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 EA daily); PA	HUMIRA-PS/UV/ADOL HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
CYLTEZO-CD/UC/HS STARTER AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA-PSORIASIS/UEIT STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
CYLTEZO-CD/UC/HS STARTER AJKT	4	QL(0.215 EA daily); PA	SIMPONI ARIA SOLN	4	PA
CYLTEZO-PSORIASIS/UV STARTER AJKT	4	QL(0.143 EA daily); PA	YUFLYMA (1 PEN) AJKT	4	QL(0.143 EA daily); PA
CYLTEZO-PSORIASIS/UV STARTER AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	YUFLYMA (2 PEN) AJKT	4	QL(0.29 EA daily); PA
HUMIRA (2 PEN) AJKT	4	QL(0.143 EA daily); PA	YUFLYMA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4	QL(0.072 EA daily); PA	YUFLYMA-CD/UC/HS STARTER AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
HUMIRA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA	Gold Compounds		
HUMIRA-CD/UC/HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA	AURANOFIN 3 MG	3	QL(3 EA daily)
HUMIRA-PED<40KG CROHNS STARTER PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA	RIDAURA	3	QL(3 EA daily)
HUMIRA-PED>=40KG CROHNS START PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA	Interleukin-1 Blockers		
HUMIRA-PED>=40KG UC STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA	ARCALYST	4	QL(0.286 EA daily); SP; PA
			Interleukin-6 Receptor Inhibitors		
			ACTEMRA ACTPEN SOAJ	4	QL(3.6 ML per 28 day(s) retail; 4 ML per 28 days mail); SP; PA
			ACTEMRA SOLN 80 MG/4ML	4	QL(20 ML per 28 day(s) retail; 20 ML per 28 days mail); SP; PA
			ACTEMRA SOLN 200 MG/10ML, 400 MG/20ML	4	QL(40 ML per 28 day(s) retail; 40 ML per 28 days mail); SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ACTEMRA SOSY	4	QL(3.6 ML per 28 day(s) retail; 4 ML per 28 days mail); SP; PA	<i>naproxen sodium TABS 550 MG</i>	1B	
KEVZARA SOAJ	4	QL(0.082 ML daily); PA	<i>naproxen SUSP</i>	1B	PA
KEVZARA SOSY	4	QL(0.082 ML daily); PA	<i>naproxen TABS</i>	1B	
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>naproxen TBEC 500 MG</i>	1B	QL(3 EA daily)
<i>celecoxib</i>	1B	QL(2 EA daily)	<i>oxaprozin TABS</i>	1B	
<i>diclofenac potassium TABS 50 MG</i>	1B		<i>piroxicam CAPS</i>	1B	
<i>diclofenac sodium TB24</i>	1B		<i>sulindac TABS</i>	1B	
<i>diclofenac sodium TBEC</i>	1B		<i>tolmetin sodium CAPS</i>	1B	
<i>diclofenac w/ misoprostol TBEC</i>	1B		<i>tolmetin sodium TABS 600 MG</i>	1B	
<i>etodolac CAPS</i>	1B		Phosphodiesterase 4 (PDE4) Inhibitors		
<i>etodolac TABS</i>	1B		OTEZLA XR TB24 PO 75 MG	4	QL(1 EA daily); PA
<i>fenoprofen calcium TABS</i>	1B	QL(4 EA daily); ST	OTEZLA/OTEZLA XR INITIATION PK TBPk	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
<i>flurbiprofen TABS</i>	1B		OTEZLA TABS	4	QL(2 EA daily); PA
<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	1B	RX/OTC	OTEZLA TBPk	4	1 package(s) per 180 day(s) retail; PA
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A		OTEZLA TBPk	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
<i>ibuprofen TABS 800 MG</i>	1B		Pyrimidine Synthesis Inhibitors		
<i>indomethacin CAPS 25 MG, 50 MG</i>	1B		<i>leflunomide</i>	1B	QL(1 EA daily)
<i>indomethacin CPCR</i>	1B		Soluble Tumor Necrosis Factor Receptor Agents		
<i>ketoprofen CAPS 50 MG</i>	1B		ENBREL MINI SOCT	4	QL(0.146 ML daily); PA
<i>ketorolac tromethamine TABS</i>	1B	QL(0.667 EA daily)	ENBREL SURECLICK SOAJ	4	QL(0.146 ML daily); PA
<i>meclofenamate sodium CAPS</i>	1B		ENBREL SOLN	4	QL(0.146 ML daily); PA
<i>mefenamic acid CAPS</i>	1B	Must try ibuprofen. ; QL(5 EA daily); ST	ENBREL SOSY 50 MG/ML	4	QL(0.286 ML daily); SP; PA
<i>meloxicam TABS</i>	1A	QL(1 EA daily)	ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ML daily); PA
<i>nabumetone</i>	1B				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions					
Analgesic Combinations			<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1B	QL(0.34 EA daily)
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 EA daily)	<i>hydrocodone bitartrate CP12</i>	3	QL(2 EA daily); PA
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B		<i>hydrocodone bitartrate T24A</i>	3	QL(2 EA daily); PA
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 EA daily)	<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 EA daily)	<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B	
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 EA daily)	<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)
Salicylates			<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 EA daily); PA
<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 EA daily); PA
<i>aspirin TABS 325 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>levorphanol tartrate TABS 2 MG</i>	1B	New starts limited to 7 day supply
<i>aspirin TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)	<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B	
<i>aspirin TBEC 325 MG</i>	1A		<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(500 ML per fill retail)
<i>diflunisal TABS</i>	1B		<i>meperidine hcl TABS 50 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>salsalate</i>	1B		<i>methadone hcl CONC</i>	1B	QL(10 ML daily)
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			<i>methadone hcl SOLN PO 10 MG/5ML</i>	1B	QL(50 ML daily)
Opioid Agonists			<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B	
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply	<i>methadone hcl SOLN PO 5 MG/5ML</i>	1B	QL(100 ML daily)
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply			
<i>fentanyl citrate LPOP</i>	1B	QL(4 EA daily); PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
METHADONE HCL SOLN IJ (<i>methadone hcl</i>)	1B		<i>tramadol hcl TB24</i>	1B	QL(1 EA daily)
<i>methadone hcl TABS 10 MG</i>	1B	QL(10 EA daily)	Opioid Combinations		
<i>methadone hcl TABS 5 MG</i>	1B	QL(4 EA daily)	<i>acetaminophen w/ codeine SOLN</i>	1A	New starts limited to 7 day supply; QL(75 ML daily)
<i>methadone hcl TBSO</i>	1B	QL(2 EA daily)	<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1B	QL(2 EA daily); PA	<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)
<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1B		<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1A	New starts limited to 7 day supply; QL(12 EA daily)
<i>morphine sulfate SOLN PO 10 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(100 ML daily)	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1B	New starts limited to 7 day supply
<i>morphine sulfate SOLN PO 20 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(50 ML daily)	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA
<i>morphine sulfate TABS</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>morphine sulfate TBCR</i>	1B	QL(2 EA daily)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1B	New starts limited to 7 day supply
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(2 EA daily); PA	<i>butalbital-aspirin-caffeine w/cod</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>oxycodone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)	<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1B	New starts limited to 7 day supply; QL(180 ML daily)
<i>oxymorphone hcl TABS</i>	1B	QL(12 EA daily); PA	<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	1B	New starts limited to 7 day supply
<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1B	QL(2 EA daily); PA			
<i>oxymorphone hcl TB12 40 MG</i>	1B	QL(4 EA daily); PA			
SUBSYS LIQD 800 MCG	3	QL(8 EA daily); PA			
<i>tramadol hcl TABS 50 MG</i>	1A	New starts limited to 7 day supply; QL(8 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)
<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 EA daily)
<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)
<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)
<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)
Opioid Partial Agonists		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 EA daily)
<i>buprenorphine hcl SOLN</i>	1B	
<i>buprenorphine hcl SUBL</i>	1B	QL(3 EA daily)
<i>buprenorphine PTWK</i>	1B	QL(0.143 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ML daily); PA
<i>nalbuphine hcl</i>	1B	QL(8 ML daily)
<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Androgens		
<i>ANDRODERM PT24 2 MG/24HR, 4 MG/24HR</i>	2	QL(1 EA daily); PA
<i>danazol CAPS</i>	1B	
<i>methyltestosterone TABS</i>	1B	
<i>testosterone cypionate SOLN IM</i>	1B	
<i>TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML</i>	1B	
<i>testosterone enanthate SOLN IM</i>	1B	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	4	QL(3.2 GM daily); PA
<i>hydrocortisone (intrarectal)</i>	1B	
Rectal Steroids		
<i>hydrocortisone (rectal) EX</i>	1B	
<i>hydrocortisone acetate (rectal)</i>	1B	
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1B	QL(2 GM daily)
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		

Drug Name	Drug Tier	Requirements/ Limits
<i>albendazole</i>	1B	PA
EMVERM CHEW	2	QL(2 EA daily; 6 EA per fill retail; 6 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail
<i>ivermectin</i>	1B	QL(9 EA per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
<i>praziquantel</i>	1B	PA
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12 500 MG</i>	1B	QL(3 EA daily)
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 EA daily)
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1B	
<i>isosorbide mononitrate TABS</i>	1B	
<i>isosorbide mononitrate TB24</i>	1B	
NITRO-BID OINT	3	
<i>nitroglycerin CPCR</i>	1B	QL(4 EA daily)
<i>nitroglycerin PT24</i>	1B	
NITROGLYCERIN SOLN IV	1B	
<i>nitroglycerin SUBL</i>	1B	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 5 MG</i>	1A	
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1B	
<i>hydroxyzine hcl SYRP</i>	1B	
<i>hydroxyzine hcl TABS</i>	1B	
<i>hydroxyzine pamoate CAPS</i>	1B	
<i>meprobamate</i>	1B	
Benzodiazepines		
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 EA daily)
<i>alprazolam TABS 2 MG</i>	1B	QL(4 EA daily)
<i>alprazolam TB24</i>	1B	
<i>alprazolam TBDP</i>	1B	
<i>chlordiazepoxide hcl CAPS</i>	1B	
<i>clorazepate dipotassium TABS</i>	1B	
<i>diazepam CONC</i>	1B	
<i>diazepam SOLN PO 5 MG/5ML</i>	1B	
<i>diazepam TABS</i>	1A	QL(4 EA daily)
<i>lorazepam CONC</i>	1B	
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1A	QL(3 EA daily)
<i>lorazepam TABS 1 MG</i>	1A	QL(4 EA daily)
<i>oxazepam CAPS</i>	1B	
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1B	
<i>procainamide hcl SOLN 500 MG/ML</i>	1B	
<i>quinidine sulfate TABS</i>	1B	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1B	
Antiarrhythmics Type I-C		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>flecainide acetate</i>	1B		INCRUSE ELLIPTA	2	QL(1 EA daily)
<i>propafenone hcl CP12</i>	1B		<i>ipratropium bromide SOLN 0.02 %</i>	1B	QL(15 ML daily)
<i>propafenone hcl TABS</i>	1B		SPIRIVA RESPIMAT AERS IN	2	QL(0.14 GM daily)
Antiarrhythmics Type III			<i>tiotropium bromide CAPS IN 18 MCG</i>	1B	QL(1 EA daily)
<i>amiodarone hcl SOLN 150 MG/3ML</i>	1B		Leukotriene Modulators		
<i>amiodarone hcl TABS</i>	1B		<i>montelukast sodium CHEW</i>	1B	QL(1 EA daily)
<i>dofetilide</i>	1B		<i>montelukast sodium PACK</i>	1B	QL(1 EA daily)
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions			<i>montelukast sodium TABS</i>	1B	QL(1 EA daily)
Antiasthmatic - Monoclonal Antibodies			<i>zafirlukast</i>	1B	QL(2 EA daily)
FASENRA PEN SOAJ	4	QL(0.036 ML daily); PA	<i>zileuton TB12</i>	3	QL(4 EA daily); PA
FASENRA SOSY 10 MG/0.5ML	4	QL(0.018 ML daily); PA	Selective Phosphodiesterase 4 (PDE4) Inhibitors		
FASENRA SOSY 30 MG/ML	4	QL(0.036 ML daily); PA	<i>roflumilast</i>	3	QL(1 EA daily)
NUCALA SOAJ	4	QL(0.1073 ML daily); PA	Steroid Inhalants		
NUCALA SOLR	4	QL(0.1073 EA daily); PA	ALVESCO	3	PA
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ML daily); PA	ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ML daily); PA	<i>budesonide (inhalation) SUSP</i>	1B	QL(4 ML daily); PA
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ML daily); PA	<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	1B	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
XOLAIR SOAJ 75 MG/0.5ML	4	QL(0.036 ML daily); PA	<i>fluticasone propionate (inhalation) AEPB</i>	1B	
XOLAIR SOLR	4	QL(0.286 EA daily); PA	<i>fluticasone propionate hfa</i>	1B	QL(0.8 GM daily)
XOLAIR SOSY 150 MG/ML, 300 MG/2ML	4	QL(0.286 ML daily); PA	PULMICORT FLEXHALER AEPB	2	
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ML daily); PA	QVAR REDIHALER	2	
Anti-Inflammatory Agents			Sympathomimetics		
<i>cromolyn sodium NEBU</i>	1B	QL(8 ML daily)			
Bronchodilators - Anticholinergics					
ATROVENT HFA	3	QL(0.44 GM daily)			

Drug Name	Drug Tier	Requirements/ Limits
AIRDUO DIGIHALER	3	
AIRSUPRA	3	
<i>albuterol sulfate AERS</i>	1B	
<i>albuterol sulfate NEBU</i>	1B	
<i>albuterol sulfate SYRP</i>	1B	
<i>albuterol sulfate TABS</i>	1B	
ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (<i>umeclidinium-vilanterol</i>)	2	QL(2 EA daily)
<i>arformoterol tartrate</i>	1B	QL(4 ML daily)
BREO ELLIPTA	2	
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2	
BREZTRI AEROSPHERE	2	QL(0.38 GM daily)
<i>budesonide-formoterol fumarate dihydrate</i>	1B	
COMBIVENT RESPIMAT AERS	2	QL(0.16 GM daily)
DULERA	2	
<i>fluticasone furoate-vilanterol</i>	1B	
<i>fluticasone-salmeterol AEPB</i>	1B	
<i>fluticasone-salmeterol AERO</i>	1B	
<i>formoterol fumarate NEBU</i>	1B	QL(4 ML daily)
<i>ipratropium-albuterol SOLN</i>	1B	QL(18 ML daily)
<i>levalbuterol hcl</i>	1B	
<i>levalbuterol tartrate</i>	1B	QL(0.5 GM daily)
PROAIR DIGIHALER	3	
PROAIR RESPICLICK AEPB	3	
SEREVENT DISKUS	2	
STIOLTO RESPIMAT	2	
STRIVERDI RESPIMAT	2	
<i>terbutaline sulfate SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>terbutaline sulfate TABS</i>	1B	
TRELEGY ELLIPTA	2	QL(2 EA daily)
<i>umeclidinium-vilanterol</i>	2	QL(2 EA daily)
Xanthines		
<i>theophylline ELIX</i>	1B	
<i>theophylline SOLN</i>	1B	QL(56 ML daily)
<i>theophylline TB12</i>	1B	
<i>theophylline TB24</i>	1B	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
<i>warfarin sodium TABS</i>	1B	
Direct Factor Xa Inhibitors		
ELIQUIS DVT/PE STARTER PACK TBPK	2	QL(2.47 EA daily); 1 max fill(s) per 180 day(s) retail
ELIQUIS TABS	2	QL(2 EA daily)
<i>rivaroxaban SUSR 1 MG/ML</i>	1B	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)
<i>rivaroxaban TABS 2.5 MG</i>	1B	QL(2 EA daily)
XARELTO STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail
XARELTO SUSR 1 MG/ML (<i>rivaroxaban</i>)	2	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)
XARELTO TABS 2.5 MG, 15 MG (<i>rivaroxaban</i>)	2	QL(2 EA daily)
XARELTO TABS 2.5 MG, 15 MG	2	QL(2 EA daily)
XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)
Heparins And Heparinoid-Like Agents		
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ML daily; 30 Day(s) limit); SP
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ML daily)
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ML daily)
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ML daily; 30 Day(s) limit); SP
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ML daily); SP
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail); SP
<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail); SP
<i>fondaparinux sodium 5 MG/0.4ML</i>	4	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail); SP
<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail); SP
FRAGMIN SOSY	4	SP; PA
HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	1B	
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B	
Thrombin Inhibitors		
<i>dabigatran etexilate mesylate CAPS</i>	1B	
ANTICONVULSANTS - Drugs to Treat Seizures		
AMPA Glutamate Receptor Antagonists		

Drug Name	Drug Tier	Requirements/ Limits
FYCOMPA TABS 4 MG (<i>perampanel</i>)	3	QL(3 EA daily); PA
FYCOMPA TABS 2 MG (<i>perampanel</i>)	3	QL(6 EA daily); PA
FYCOMPA TABS 6 MG (<i>perampanel</i>)	3	QL(2 EA daily); PA
FYCOMPA TABS 8 MG, 10 MG, 12 MG (<i>perampanel</i>)	3	QL(1 EA daily); PA
<i>perampanel TABS 6 MG</i>	1B	QL(2 EA daily); PA
<i>perampanel TABS 8 MG, 10 MG, 12 MG</i>	1B	QL(1 EA daily); PA
<i>perampanel TABS 2 MG</i>	1B	QL(6 EA daily); PA
<i>perampanel TABS 4 MG</i>	1B	QL(3 EA daily); PA
Anticonvulsants - Benzodiazepines		
<i>clobazam SUSP</i>	1B	QL(16 ML daily); PA
<i>clobazam TABS</i>	1B	QL(2 EA daily); PA
<i>clonazepam TABS</i>	1A	
<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
NAYZILAM	3	QL(10 EA per 30 day(s) retail); PA
VALTOCO 10 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA
VALTOCO 5 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA
Anticonvulsants - Misc.		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
APTIOM 200 MG, 400 MG, 600 MG, 800 MG (eslicarbazepine acetate)	3	QL(2 EA daily); ST	lacosamide TABS	1B	QL(2 EA daily)
BANZEL TABS 200 MG (rufinamide)	2	QL(2 EA daily); PA	lamotrigine CHEW 5 MG	1B	QL(100 EA daily)
BANZEL TABS 400 MG (rufinamide)	2	QL(8 EA daily); PA	lamotrigine CHEW 25 MG	1B	QL(20 EA daily)
BRIVIACT SOLN PO 10 MG/ML	3	QL(20 ML daily); PA	lamotrigine TABS	1B	
BRIVIACT TABS	3	QL(2 EA daily); PA	lamotrigine TBDP	1B	QL(1 EA daily)
carbamazepine CHEW 100 MG	1B		levetiracetam SOLN IV 500 MG/5ML	1B	QL(30 ML daily)
carbamazepine CP12 300 MG	1B	QL(4 EA daily)	levetiracetam TABS 500 MG	1B	QL(6 EA daily)
carbamazepine CP12 200 MG	1B	QL(6 EA daily)	levetiracetam TABS 1000 MG	1B	QL(3 EA daily)
carbamazepine CP12 100 MG	1B		levetiracetam TABS 250 MG, 750 MG	1B	QL(4 EA daily)
carbamazepine SUSP	1B		levetiracetam TB24	1B	QL(4 EA daily)
carbamazepine TABS	1B		oxcarbazepine SUSP	1B	QL(40 ML daily)
carbamazepine TB12 200 MG	1B	QL(6 EA daily)	oxcarbazepine TABS 600 MG	1B	QL(4 EA daily)
carbamazepine TB12 100 MG, 400 MG	1B	QL(4 EA daily)	oxcarbazepine TABS 150 MG, 300 MG	1B	QL(3 EA daily)
DIACOMIT CAPS 250 MG	4	QL(12 EA daily); PA	pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG	3	QL(3 EA daily); PA
DIACOMIT CAPS 500 MG	4	QL(6 EA daily); PA	pregabalin CAPS 225 MG, 300 MG	3	QL(2 EA daily); PA
DIACOMIT PACK 500 MG	4	QL(6 EA daily); PA	pregabalin SOLN	3	QL(30 ML daily); PA
DIACOMIT PACK 250 MG	4	QL(12 EA daily); PA	primidone 50 MG, 250 MG	1B	
EPIDIOLEX	3	PA	rufinamide SUSP	1B	QL(80 ML daily); PA
eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG	1B	QL(2 EA daily); ST	rufinamide TABS 200 MG	1B	QL(2 EA daily); PA
gabapentin CAPS	1B		rufinamide TABS 400 MG	1B	QL(8 EA daily); PA
gabapentin SOLN	1B	QL(60 ML daily)	TEGRETOL SUSP (carbamazepine)	2	
gabapentin TABS 600 MG, 800 MG	1B		TEGRETOL TABS (carbamazepine)	2	
lacosamide SOLN IV 200 MG/20ML	1B	QL(40 ML daily)	topiramate CPSP 15 MG	1B	QL(6 EA daily)
			topiramate CPSP 25 MG	1B	QL(8 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>topiramate CS24</i>	3	PA
<i>topiramate TABS 50 MG</i>	1B	QL(6 EA daily)
<i>topiramate TABS 200 MG</i>	1B	QL(2 EA daily)
<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 EA daily)
<i>zonisamide CAPS</i>	1B	QL(6 EA daily)
Carbamates		
<i>felbamate SUSP</i>	1B	QL(30 ML daily)
<i>felbamate TABS 600 MG</i>	1B	QL(6 EA daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 EA daily)
GABA Modulators		
<i>tiagabine hcl</i>	1B	
<i>vigabatrin PACK</i>	4	QL(6 EA daily); SP; PA
<i>vigabatrin TABS</i>	4	QL(6 EA daily); SP; PA
Hydantoins		
DILANTIN	2	
DILANTIN (<i>phenytoin sodium extended</i>)	2	
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	2	
DILANTIN-125 SUSP (<i>phenytoin</i>)	2	
DILANTIN SUSP (<i>phenytoin</i>)	2	
<i>fosphenytoin sodium</i>	1B	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B	
<i>phenytoin sodium SOLN</i>	1B	
<i>phenytoin CHEW</i>	1B	
<i>phenytoin SUSP</i>	1B	
Succinimides		
<i>ethosuximide CAPS</i>	1B	QL(6 EA daily)
<i>ethosuximide SOLN</i>	1B	QL(30 ML daily)
<i>methsuximide</i>	1B	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
ZARONTIN CAPS (<i>ethosuximide</i>)	2	QL(6 EA daily)
Valproic Acid		
<i>divalproex sodium TB24</i>	1B	
<i>divalproex sodium TBEC</i>	1B	
<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	1B	
<i>valproic acid CAPS</i>	1B	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS</i>	1B	
<i>mirtazapine TBDP</i>	1B	
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	1B	+
<i>bupropion hcl TB12</i>	1B	+
<i>bupropion hcl TB24 150 MG, 300 MG</i>	1B	
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	3	QL(1 EA daily)
MARPLAN	2	QL(6 EA daily)
<i>phenelzine sulfate</i>	1B	
<i>tranylcypromine sulfate</i>	1B	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
SPRAVATO (56 MG DOSE)	4	PA
SPRAVATO (84 MG DOSE)	4	PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		
<i>citalopram hydrobromide SOLN</i>	1B	
<i>citalopram hydrobromide TABS</i>	1B	#
<i>escitalopram oxalate SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>escitalopram oxalate TABS</i>	1B	+
<i>fluoxetine hcl CAPS 20 MG, 40 MG</i>	1B	#
<i>fluoxetine hcl CAPS 10 MG</i>	1A	#
<i>fluoxetine hcl CPDR</i>	1B	
<i>fluoxetine hcl SOLN</i>	1B	
<i>fluoxetine hcl TABS</i>	1B	
<i>fluvoxamine maleate TABS</i>	1B	+
<i>paroxetine hcl SUSP</i>	1B	
<i>paroxetine hcl TABS</i>	1B	#
<i>paroxetine hcl TB24</i>	1B	
<i>sertraline hcl CONC</i>	1B	
<i>sertraline hcl TABS</i>	1B	#
Serotonin Modulators		
<i>nefazodone hcl</i>	1B	
<i>trazodone hcl TABS</i>	1B	
TRINTELLIX	3	QL(1 EA daily); PA
VIIBRYD STARTER PACK KIT	3	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail
<i>vilazodone hcl TABS</i>	1B	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>desvenlafaxine succinate</i>	1B	
<i>duloxetine hcl CPEP</i>	1B	#
FETZIMA TITRATION C4PK	3	PA
FETZIMA CP24	3	QL(1 EA daily); PA
<i>venlafaxine hcl CP24</i>	1B	+
<i>venlafaxine hcl TABS</i>	1B	#
<i>venlafaxine hcl TB24</i>	1B	
Tricyclic Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>amitriptyline hcl TABS</i>	1B	#
<i>amoxapine</i>	1B	
<i>clomipramine hcl</i>	1B	
<i>desipramine hcl TABS</i>	1B	
<i>doxepin hcl CAPS</i>	1B	
<i>doxepin hcl CONC</i>	1B	
<i>imipramine hcl TABS</i>	1B	+
<i>imipramine pamoate</i>	1B	
<i>nortriptyline hcl CAPS</i>	1B	
<i>nortriptyline hcl SOLN</i>	1B	
<i>protriptyline hcl</i>	1B	
<i>trimipramine maleate CAPS</i>	1B	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	1B	QL(3 EA daily)
<i>miglitol</i>	1B	QL(3 EA daily)
Antidiabetic Combinations		
<i>alogliptin-metformin hcl</i>	1B	QL(2 EA daily); PA
<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1B	QL(2 EA daily); PA
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1B	QL(1 EA daily); PA
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 EA daily)
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	2	QL(1 EA daily)
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1B	++; QL(2 EA daily)
<i>glipizide-metformin hcl 500 MG-5 MG</i>	1B	++; QL(4 EA daily)
<i>glyburide-metformin 250 MG-1.25 MG</i>	1B	++; QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1B	+; QL(4 EA daily)
GLYXAMBI	2	QL(1 EA daily)
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 EA daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 EA daily)
JANUMET TABS	2	QL(2 EA daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 EA daily)
<i>pioglitazone hcl-metformin hcl TABS</i>	1B	QL(2 EA daily)
<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1B	QL(2 EA daily)
<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1B	QL(1 EA daily)
SOLIQUA	2	QL(0.5 ML daily); PA
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 EA daily)
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)
SYNJARDY TABS	2	QL(2 EA daily)
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 EA daily)
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 EA daily)
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)
XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	QL(1 EA daily)
XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	2	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 EA daily)
XULTOPHY	2	QL(0.5 ML daily); PA
Biguanides		
<i>metformin hcl TABS 500 MG</i>	1B	+; QL(5 EA daily)
<i>metformin hcl TABS 1000 MG</i>	1B	+; QL(2.5 EA daily)
<i>metformin hcl TABS 850 MG</i>	0	QL(3 EA daily)
<i>metformin hcl TB24 500 MG</i>	1B	+; QL(4 EA daily)
<i>metformin hcl TB24 750 MG</i>	1B	+; QL(3 EA daily)
Diabetic Other		
<i>diazoxide</i>	3	
<i>glucagon SOLR IJ 1 MG</i>	1B	+; QL(0.035 EA daily)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	1B	QL(1 EA daily)
JANUVIA	2	QL(1 EA daily)
<i>saxagliptin hcl</i>	1B	QL(1 EA daily)
Incretin Mimetic Agents		
<i>liraglutide</i>	1B	QL(0.3 ML daily)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.054 ML daily); PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.108 ML daily); PA
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	QL(0.108 ML daily); PA
OZEMPIC (2 MG/DOSE) SOPN	2	QL(0.108 ML daily); PA
RYBELSUS TABS	2	QL(1 EA daily); PA
TRULICITY	2	QL(0.143 ML daily); PA
VICTOZA (<i>liraglutide</i>)	2	QL(0.3 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
Insulin		
APIDRA SOLOSTAR SOPN	3	PA
APIDRA SOLN	3	PA
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	#, QL(1.34 ML daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	#, QL(1.34 ML daily)
INSULIN ASP PROT & ASP FLEXPEN SUPN	1B	#
INSULIN ASPART FLEXPEN SOPN	1B	#
INSULIN ASPART PENFILL SOCT	1B	#
INSULIN ASPART PROT & ASPART SUSP	1B	#
INSULIN ASPART SOLN IJ	1B	#
INSULIN DEGLUDEC FLEXTouch SOPN	2	#
INSULIN DEGLUDEC SOLN	2	#
INSULIN GLARGINE-YFGN SOLN	2	
INSULIN GLARGINE-YFGN SOPN	2	
INSULIN LISPRO (1 UNIT DIAL) SOPN	1B	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	1B	
INSULIN LISPRO PROT & LISPRO SUPN	1B	
INSULIN LISPRO SOLN IJ	1B	
NOVOLIN 70/30 FLEXPEN SUPN	2	#
NOVOLIN 70/30 SUSP	2	#
NOVOLIN N FLEXPEN SUPN	2	#
NOVOLIN N SUSP	2	#

Drug Name	Drug Tier	Requirements/ Limits
NOVOLIN R FLEXPEN SOPN IJ	2	#
NOVOLIN R SOLN IJ	2	#
REZVOGLAR KWIKPEN	3	PA
SEMGLEE (YFGN) SOLN	2	
SEMGLEE (YFGN) SOPN	2	
Insulin Sensitizing Agents		
<i>pioglitazone hcl</i>	1B	+, QL(1 EA daily)
Meglitinide Analogues		
<i>nateglinide</i>	1B	QL(3 EA daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 EA daily)
<i>repaglinide 2 MG</i>	1B	QL(8 EA daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	2	QL(1 EA daily)
FARXIGA (<i>dapagliflozin propanediol</i>)	2	QL(1 EA daily)
JARDIANCE	2	QL(1 EA daily)
Sulfonylureas		
<i>glimepiride 1 MG, 2 MG</i>	1B	+, QL(4 EA daily)
<i>glimepiride 4 MG</i>	1B	+, QL(2 EA daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1B	+, QL(4 EA daily)
<i>glipizide TB24</i>	1B	+, QL(2 EA daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1B	+, QL(4 EA daily)
<i>glyburide TABS</i>	1B	+, QL(4 EA daily)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1B	
<i>diphenoxylate w/ atropine TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>loperamide hcl CAPS</i>	1B	RX/OTC
MOTOFEN	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Opioid Antagonists		
<i>naloxone hcl LIQD</i>	1B	QL(2 EA per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1B	
<i>naltrexone hcl</i>	1B	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 EA daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1B	
<i>granisetron hcl TABS</i>	1B	QL(0.34 EA daily)
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1B	QL(3.34 ML daily)
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1B	
<i>ondansetron hcl SOSY</i>	1B	
<i>ondansetron hcl TABS 4 MG</i>	1B	QL(4 EA daily; 60 EA per fill retail; 60 per fill mail)
<i>ondansetron hcl TABS 24 MG</i>	1B	QL(0.143 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 EA daily; 45 EA per fill retail; 45 per fill mail)
<i>ondansetron TBDP 4 MG</i>	1B	QL(1 EA daily)
<i>ondansetron TBDP 8 MG</i>	1B	
<i>palonosetron hcl SOLN</i>	1B	
Antiemetics - Anticholinergic		
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 EA daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
Antiemetics - Miscellaneous		
AKYNZEO	3	PA
<i>doxylamine-pyridoxine TBEC</i>	1B	QL(4 EA daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA
<i>dronabinol CAPS</i>	1B	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 EA daily)
<i>aprepitant CAPS</i>	1B	PA
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 EA daily)
VARUBI (180 MG DOSE) TBPK	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
<i>caspofungin acetate</i>	1B	
ERAXIS	3	
<i>miconazole sodium</i>	1B	PA
Antifungals		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amphotericin b IV</i>	3		<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B	
<i>amphotericin b liposome</i>	3		<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1B	QL(20 ML daily)
<i>flucytosine</i>	1B		<i>diphenhydramine hcl SOLN 50 MG/ML</i>	1B	
<i>griseofulvin microsize SUSP</i>	1B	AL(At least 2 yrs old)	Antihistamines - Non-Sedating		
<i>griseofulvin microsize TABS</i>	1B		<i>cetirizine hcl TABS</i>	1A	QL(1 EA daily)
<i>griseofulvin ultramicrosize</i>	1B		<i>desloratadine TABS</i>	1B	QL(1 EA daily)
<i>nystatin TABS</i>	1B		<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 EA daily)
<i>terbinafine hcl TABS</i>	1B	QL(1 EA daily)	<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ML daily); RX/OTC
Imidazole-Related Antifungals			<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 EA daily); RX/OTC
CRESEMBA CAPS 186 MG	3	PA	<i>loratadine CAPS</i>	1B	
<i>fluconazole SUSP</i>	1B		<i>loratadine CHEW</i>	1B	
<i>fluconazole TABS</i>	1B		<i>loratadine SOLN</i>	1B	
<i>itraconazole CAPS</i>	1B	QL(4 EA daily); PA	<i>loratadine TABS</i>	1A	
<i>itraconazole SOLN</i>	1B	QL(20 ML daily); PA	<i>loratadine TBDP</i>	1B	
<i>ketoconazole</i>	1B		QUZYTIR SOLN IV	3	PA
<i>posaconazole SUSP</i>	3	QL(20 ML daily)	Antihistamines - Phenothiazines		
TOLSURA CAPS	4	PA	<i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>	1B	
<i>voriconazole TABS</i>	1B	QL(4 EA daily)	<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 EA daily)
ANTI-HISTAMINES - Drugs to Treat Allergies			<i>promethazine hcl SUPP 50 MG</i>	1B	
Antihistamines - Alkylamines			<i>promethazine hcl TABS</i>	1B	
<i>dexchlorpheniramine maleate SOLN</i>	1B		Antihistamines - Piperidines		
Antihistamines - Ethanolamines			<i>ciproheptadine hcl SYRP</i>	1B	
<i>carbinoxamine maleate SOLN</i>	1B		<i>ciproheptadine hcl TABS</i>	1B	
<i>carbinoxamine maleate TABS 4 MG</i>	1B		ANTI-HYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
<i>clemastine fumarate SYRP</i>	1B		Antihyperlipidemics - Combinations		
<i>clemastine fumarate TABS 2.68 MG</i>	1B		<i>ezetimibe-simvastatin</i>	1B	QL(1 EA daily)
<i>diphenhydramine hcl CAPS 50 MG</i>	1A				

Drug Name	Drug Tier	Requirements/ Limits
Antihyperlipidemics - Misc.		
<i>icosapent ethyl 1 GM</i>	1B	QL(4 EA daily); PA
<i>omega-3-acid ethyl esters</i>	1B	+; QL(4 EA daily)
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	1B	QL(6 EA daily)
<i>cholestyramine light POWD</i>	1B	QL(24 GM daily)
<i>cholestyramine PACK</i>	1B	QL(6 EA daily)
<i>cholestyramine POWD</i>	1B	QL(25.2 GM daily)
<i>colesevelam hcl PACK</i>	1B	QL(1 EA daily); PA
<i>colesevelam hcl TABS</i>	1B	QL(7 EA daily)
<i>colestipol hcl GRAN</i>	1B	QL(6 GM daily)
<i>colestipol hcl PACK</i>	1B	QL(6 EA daily)
<i>colestipol hcl TABS</i>	1B	QL(16 EA daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1B	+; QL(1 EA daily)
<i>fenofibrate micronized 43 MG, 130 MG</i>	1B	QL(1 EA daily)
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	1B	+; QL(1 EA daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	+; QL(1 EA daily)
<i>gemfibrozil TABS</i>	1B	+; QL(2 EA daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	1B	+; QL(1 EA daily)
<i>fluvastatin sodium CAPS 40 MG</i>	1B	QL(2 EA daily)
<i>fluvastatin sodium CAPS 20 MG</i>	1B	QL(1 EA daily)
<i>lovastatin TABS 40 MG</i>	1B	+; QL(2 EA daily); PV
<i>lovastatin TABS 10 MG, 20 MG</i>	1B	+; QL(1 EA daily); PV

Drug Name	Drug Tier	Requirements/ Limits
<i>pravastatin sodium</i>	1B	+; QL(1 EA daily)
<i>rosuvastatin calcium TABS</i>	3	QL(1 EA daily)
<i>simvastatin TABS</i>	1B	+; QL(1 EA daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1B	+; QL(1 EA daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1B	QL(2 EA daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ML daily); PA
REPATHA SURECLICK SOAJ	4	QL(0.0714 ML daily); PA
REPATHA SOSY	4	QL(0.0714 ML daily); PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
<i>benazepril hcl</i>	1B	+
<i>captopril 12.5 MG</i>	1B	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 EA daily)
<i>enalapril maleate TABS</i>	1B	+
<i>fosinopril sodium</i>	1B	+
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1B	+
<i>moexipril hcl</i>	1B	QL(2 EA daily)
<i>perindopril erbumine 4 MG</i>	1B	
<i>perindopril erbumine 2 MG, 8 MG</i>	1B	QL(2 EA daily)
<i>quinapril hcl 20 MG, 40 MG</i>	1B	
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>ramipril CAPS</i>	1B	+	<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B	
<i>trandolapril 4 MG</i>	1B	++; QL(2 EA daily)	<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 EA daily)
<i>trandolapril 1 MG, 2 MG</i>	1B	++; QL(1 EA daily)	<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 EA daily)
Agents for Pheochromocytoma			<i>candesartan cilexetil-hydrochlorothiazide</i>	1B	
<i>phenoxybenzamine hcl</i>	3	PA	<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 EA daily)
Angiotensin II Receptor Antagonists			<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B	
<i>candesartan cilexetil</i>	1B	QL(1 EA daily)	<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 EA daily)
EDARBI	3	QL(1 EA daily); ST	<i>irbesartan-hydrochlorothiazide</i>	1B	+
<i>irbesartan</i>	1B	++; QL(1 EA daily)	<i>lisinopril & hydrochlorothiazide</i>	1B	+
<i>losartan potassium</i>	1B	++; QL(1 EA daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1B	++; QL(2 EA daily)
<i>olmesartan medoxomil</i>	1B	++; QL(1 EA daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1B	++; QL(1 EA daily)
<i>telmisartan</i>	1B	QL(1 EA daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 EA daily)
<i>valsartan TABS</i>	1B	++; QL(1 EA daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
Antiadrenergic Antihypertensives			<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST
<i>clonidine hcl TABS</i>	1B	++; QL(8 EA daily)	<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B	
<i>clonidine PTWK</i>	3	QL(0.15 EA daily)			
<i>doxazosin mesylate</i>	1B				
<i>guanfacine hcl</i>	1B				
<i>methyldopa TABS</i>	1B	QL(6 EA daily)			
<i>prazosin hcl CAPS</i>	1B	QL(4 EA daily)			
<i>terazosin hcl</i>	1B				
Antihypertensive Combinations					
<i>amlodipine besylate-benazepril hcl</i>	1B				
<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST			
<i>amlodipine besylate-valsartan</i>	1B	QL(1 EA daily)			
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3				
<i>atenolol & chlorthalidone</i>	1B				

Drug Name	Drug Tier	Requirements/ Limits
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 EA daily)
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 EA daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 EA daily)
<i>telmisartan-amlodipine</i>	1B	QL(1 EA daily)
<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 EA daily)
<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 EA daily)
<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>valsartan-hydrochlorothiazide</i>	1B	QL(1 EA daily)
Antihypertensives - Misc.		
VECAMYL	3	PA
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	1B	QL(1 EA daily)
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	1B	
Vasodilators		
<i>hydralazine hcl SOLN</i>	1B	
<i>hydralazine hcl TABS</i>	1B	+
<i>minoxidil 2.5 MG, 10 MG</i>	1B	+
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
IMPAVIDO	3	QL(3 EA daily); PA
<i>metronidazole TABS 250 MG, 500 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>trimethoprim TABS</i>	1B	
XIFAXAN 550 MG	3	QL(3 EA daily); AL(At least 12 yrs old); PA
XIFAXAN 200 MG	3	QL(3 EA daily; 9 EA per 3 day(s) retail; 9 EA per 3 days mail); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>sulfamethoxazole-trimethoprim TABS</i>	1A	
Antiprotozoal Agents		
ALINIA SUSR	2	PA
<i>atovaquone</i>	1B	
<i>nitazoxanide TABS</i>	1B	PA
Carbapenems		
<i>ertapenem sodium IJ</i>	1B	
<i>imipenem-cilastatin IV</i>	1B	
<i>meropenem</i>	1B	
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	SP; PA
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	1B	
Glycopeptides		
<i>vancomycin hcl CAPS</i>	1B	QL(4 EA daily; 40 EA per fill retail)
<i>vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG</i>	1B	
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ML per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
Leprostatics		
<i>dapsone</i>	1B	
Lincosamides		
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1B	
<i>lincomycin hcl</i>	1B	
Monobactams		
<i>aztreonam 1 GM</i>	1B	
CAYSTON	4	QL(3 ML daily); PA
Oxazolidinones		
<i>linezolid SUSR</i>	1B	
<i>linezolid TABS</i>	1B	QL(2 EA daily); PA
SIVEXTRO TABS	3	PA
Polymyxins		
<i>polymyxin b sulfate SOLR</i>	1B	
Urinary Anti-infectives		
<i>fosfomycin tromethamine</i>	1B	
<i>methenamine hippurate</i>	1B	
<i>nitrofurantoin</i>	1B	
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1B	
<i>nitrofurantoin monohyd macro</i>	1B	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		

Drug Name	Drug Tier	Requirements/ Limits
<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 EA per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
Antimalarials		
<i>chloroquine phosphate TABS 500 MG</i>	1B	
<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 EA daily)
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 EA daily)
<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 EA daily)
<i>hydroxychloroquine sulfate 400 MG</i>	1B	QL(1 EA daily)
KRINTAFEL	3	QL(2 EA per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>primaquine phosphate TABS</i>	3	
<i>pyrimethamine</i>	1B	QL(3 EA daily); PA
<i>quinine sulfate CAPS 324 MG</i>	1B	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimychasthenic/Cholinergic Agents		
FIRDAPSE	4	PA
<i>neostigmine methylsulfate SOSY</i>	3	PA
<i>pyridostigmine bromide SOLN PO</i>	1B	
<i>pyridostigmine bromide TABS 60 MG</i>	1B	
<i>pyridostigmine bromide TBCR</i>	1B	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine</i>	1B	QL(4 EA daily)
<i>ethambutol hcl TABS</i>	1B	
<i>isoniazid SOLN</i>	1B	
<i>isoniazid SYRP</i>	1B	
<i>isoniazid TABS</i>	1B	
PRIFTIN	3	
<i>pyrazinamide</i>	1B	
<i>rifabutin</i>	1B	PA
<i>rifampin CAPS</i>	1B	
<i>rifampin SOLR</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
SIRTURO	3	PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
<i>bendamustine hcl SOLR</i>	4	SP; PA
<i>busulfan SOLN</i>	4	SP; PA
<i>carboplatin SOLN 50 MG/5ML</i>	4	SP; PA
<i>carmustine</i>	4	SP; PA
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA
<i>cyclophosphamide CAPS</i>	1B	PA
<i>cyclophosphamide SOLR IJ</i>	4	
GLEOSTINE 40 MG, 100 MG	4	PA
GLEOSTINE 10 MG	4	SP; PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA
<i>ifosfamide SOLR</i>	4	SP; PA
LEUKERAN	4	SP; PA
<i>melphalan</i>	1B	
<i>melphalan hcl IV</i>	1B	
MYLERAN TABS	4	SP; PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA
TEMODAR SOLR	4	
<i>temozolomide CAPS</i>	4	SP; PA
<i>thiotepa 15 MG</i>	4	SP; PA
ZANOSAR	4	SP; PA
Antimetabolites		
<i>azacitidine SUSR</i>	4	SP; PA
<i>capecitabine</i>	4	SP; PA
<i>clofarabine</i>	4	SP; PA
<i>cytarabine SOLN</i>	4	SP; PA
<i>decitabine</i>	4	SP; PA
<i>floxuridine</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
<i>fludarabine phosphate SOLN</i>	4	SP; PA
<i>fludarabine phosphate SOLR</i>	4	SP; PA
<i>fluorouracil 500 MG/10ML</i>	4	SP; PA
<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA
<i>mercaptopurine TABS</i>	1B	
<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B	
<i>methotrexate sodium SOLR</i>	1B	SP
<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP
<i>nelarabine</i>	4	SP; PA
<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA
<i>pralatrexate 20 MG/ML</i>	4	SP; PA
TABLOID	4	SP; PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA
Antineoplastic - Angiogenesis Inhibitors		
INLYTA	4	QL(2 EA daily); SP; PA
LENVIMA (10 MG DAILY DOSE)	4	QL(1 EA daily); PA
LENVIMA (12 MG DAILY DOSE)	4	QL(3 EA daily); PA
LENVIMA (14 MG DAILY DOSE)	4	QL(2 EA daily); PA
LENVIMA (18 MG DAILY DOSE)	4	QL(3 EA daily); PA
LENVIMA (20 MG DAILY DOSE)	4	QL(2 EA daily); PA
LENVIMA (24 MG DAILY DOSE)	4	QL(3 EA daily); PA
LENVIMA (4 MG DAILY DOSE)	4	QL(1 EA daily); PA
LENVIMA (8 MG DAILY DOSE)	4	QL(2 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
MVASI	4	PA
ZALTRAP 100 MG/4ML	4	SP; PA
ZIRABEV	4	PA
Antineoplastic - Antibodies		
ADCETRIS	4	SP; PA
ARZERRA	4	SP; PA
LOQTORZI	4	PA
RUXIENCE	4	PA
TRUXIMA	4	PA
YERVOY	4	SP; PA
Antineoplastic - Anti-HER2 Agents		
KANJINTI	4	PA
OGIVRI	4	PA
PERJETA	4	SP; PA
TRAZIMERA	4	PA
TUKYSA	4	PA
Antineoplastic - EGFR Inhibitors		
ERBITUX	4	SP; PA
<i>erlotinib hcl</i>	4	QL(1 EA daily); SP; PA
<i>gefitinib</i>	4	QL(2 EA daily); PA
GILOTRIF	4	QL(1 EA daily); PA
TAGRISSO 40 MG	4	QL(2 EA daily); PA
TAGRISSO 80 MG	4	QL(1 EA daily); PA
VECTIBIX 100 MG/5ML	4	SP; PA
VIZIMPRO	4	QL(1 EA daily); PA
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO	4	PA
ERIVEDGE	4	QL(1 EA daily); SP; PA
ODOMZO	4	QL(1 EA daily); PA
Antineoplastic - Hormonal and Related Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>abiraterone acetate 250 MG</i>	4	QL(4 EA daily); SP; PA
<i>abiraterone acetate 500 MG</i>	4	QL(2 EA daily); PA
<i>anastrozole</i>	1B	QL(1 EA daily)
<i>bicalutamide</i>	1B	QL(1 EA daily); SP
ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
ELIGARD KIT SC 7.5 MG	4	QL(0.0089 EA daily); SP; PA
EMCYT	4	SP; PA
ERLEADA 240 MG	4	QL(1 EA daily); PA
ERLEADA 60 MG	4	QL(4 EA daily); PA
<i>exemestane</i>	4	QL(1 EA daily); SP
FIRMAGON 80 MG	4	QL(0.143 EA daily); SP; PA
FIRMAGON (240 MG DOSE)	4	QL(0.143 EA daily); SP; PA
<i>fulvestrant SOSY</i>	4	QL(0.357 ML daily); SP; PA
<i>letrozole</i>	1B	
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0358 EA daily); SP; PA
LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 EA daily); SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 EA daily); SP; PA
LYSODREN	4	SP; PA
<i>megestrol acetate SUSP</i>	1B	
<i>megestrol acetate TABS</i>	1B	
<i>nilutamide</i>	1B	QL(2 EA daily)
NUBEQA	4	QL(4 EA daily); PA
ORGOVYX	4	PA
<i>tamoxifen citrate TABS</i>	0	

Drug Name	Drug Tier	Requirements/ Limits
<i>toremifene citrate</i>	1B	
TRELSTAR MIXJECT	4	SP; PA
VABRINTY SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
XTANDI CAPS	4	QL(4 EA daily); SP; PA
XTANDI TABS 80 MG	4	QL(2 EA daily); PA
XTANDI TABS 40 MG	4	QL(4 EA daily); PA
YONSA	4	QL(4 EA daily); PA
ZOLADEX 3.6 MG	4	QL(0.0357 EA daily); SP; PA
ZOLADEX 10.8 MG	4	QL(0.0119 EA daily); SP; PA
Antineoplastic - Immunomodulators		
POMALYST	4	QL(1 EA daily); PA
Antineoplastic - PDGFR-alpha Inhibitors		
AYVAKIT	4	QL(1 EA daily); PA
Antineoplastic - XPO1 Inhibitors		
XPOVIO (100 MG ONCE WEEKLY) 50 MG	4	PA
XPOVIO (40 MG ONCE WEEKLY) 40 MG	4	PA
XPOVIO (40 MG TWICE WEEKLY) 40 MG	4	PA
XPOVIO (60 MG ONCE WEEKLY) 60 MG	4	PA
XPOVIO (60 MG TWICE WEEKLY)	4	PA
XPOVIO (80 MG ONCE WEEKLY) 40 MG	4	PA
XPOVIO (80 MG TWICE WEEKLY)	4	PA
Antineoplastic Antibiotics		
<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA
<i>dactinomycin</i>	4	SP; PA
<i>doxorubicin hcl liposomal SUSP</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>doxorubicin hcl SOLN</i>	4	SP; PA	COMETRIQ (100 MG DAILY DOSE) KIT	4	QL(2 EA daily); SP; PA
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	SP; PA	COMETRIQ (140 MG DAILY DOSE) KIT	4	QL(4 EA daily); SP; PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA	COMETRIQ (60 MG DAILY DOSE) KIT	4	QL(3 EA daily); SP; PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA	COPIKTRA	4	PA
<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA	<i>dasatinib</i>	4	QL(1 EA daily); SP; PA
<i>mitoxantrone hcl 25 MG/12.5ML</i>	4	SP; PA	<i>everolimus TABS</i>	4	QL(1 EA daily); SP; PA
<i>valrubicin</i>	4	SP; PA	IBRANCE CAPS	4	QL(1 EA daily); PA
Antineoplastic Combinations			IBRANCE TABS	4	QL(1 EA daily); PA
KISQALI FEMARA (200 MG DOSE)	4	QL(2 EA daily); PA	ICLUSIG	4	QL(1 EA daily); PA
KISQALI FEMARA (400 MG DOSE)	4	QL(2.5 EA daily); PA	<i>imatinib mesylate TABS</i>	4	QL(2 EA daily); SP; PA
KISQALI FEMARA (600 MG DOSE)	4	QL(3.25 EA daily); PA	IMBRUVICA CAPS 140 MG	4	QL(3 EA daily); PA
Antineoplastic Enzyme Inhibitors			IMBRUVICA CAPS 70 MG	4	QL(1 EA daily); PA
ALECENSA	4	QL(8 EA daily); PA	IMBRUVICA SUSP	4	QL(8 ML daily); PA
ALUNBRIG TABS	4	QL(1 EA daily); PA	IMBRUVICA TABS	4	QL(1 EA daily); PA
ALUNBRIG TBPk	4	QL(1 EA daily); PA	INREBIC	4	PA
BALVERSA	4	PA	JAKAFI	4	QL(2 EA daily); SP; PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	KISQALI (200 MG DOSE)	4	QL(2 EA daily); PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA	KISQALI (400 MG DOSE)	4	QL(2 EA daily); PA
BOSULIF TABS 100 MG, 500 MG	4	QL(1 EA daily); SP; PA	KISQALI (600 MG DOSE)	4	QL(2.5 EA daily); PA
BOSULIF TABS 400 MG	4	QL(1 EA daily); PA	KOSELUGO	4	PA
BRAFTOVI 75 MG	4	QL(6 EA daily); SP; PA	KYPROLIS	4	PA
BRUKINSA	4	PA	<i>lapatinib ditosylate</i>	4	QL(6 EA daily); SP; PA
CABOMETYX TABS	4	QL(1 EA daily); PA	LORBRENA	4	QL(1 EA daily); PA
CALQUENCE	4	QL(2 EA daily); PA	LUMAKRAS 320 MG	3	QL(3 EA daily); PA
CAPRELSA	4	QL(1 EA daily); SP; PA	LUMAKRAS 120 MG, 240 MG	3	QL(2 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LYNPARZA TABS	4	QL(4 EA daily); PA	<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 EA daily); SP; PA
MEKINIST SOLR	4	QL(40 ML daily); PA	<i>sunitinib malate 37.5 MG</i>	4	QL(1 EA daily); PA
MEKINIST TABS 0.5 MG	4	QL(3 EA daily); PA	TABRECTA	4	QL(4 EA daily); PA
MEKINIST TABS 2 MG	4	QL(1 EA daily); PA	TAFINLAR CAPS	4	QL(4 EA daily); PA
MEKTOVI	4	QL(6 EA daily); SP; PA	TAFINLAR TBSO	4	QL(30 EA daily); PA
<i>nilotinib hcl 50 MG</i>	4	QL(4 EA daily); PA	TALZENNA	4	QL(1 EA daily); PA
<i>nilotinib hcl 150 MG, 200 MG</i>	4	QL(4 EA daily); SP; PA	TASIGNA 150 MG, 200 MG (<i>nilotinib hcl</i>)	4	QL(4 EA daily); SP; PA
NINLARO	4	QL(0.143 EA daily); PA	TASIGNA 50 MG (<i>nilotinib hcl</i>)	4	QL(4 EA daily); PA
<i>pazopanib hcl</i>	4	QL(4 EA daily); SP; PA	TAZVERIK	4	PA
PEMAZYRE	4	QL(1 EA daily); PA	<i>temsirolimus</i>	4	QL(0.143 ML daily); SP; PA
PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG	4	QL(1 EA daily); SP; PA	TIBSOVO	4	PA
PIQRAY (200 MG DAILY DOSE)	4	QL(1 EA daily); PA	TURALIO 125 MG	4	PA
PIQRAY (250 MG DAILY DOSE)	4	QL(2 EA daily); PA	VERZENIO	4	QL(2 EA daily); PA
PIQRAY (300 MG DAILY DOSE)	4	QL(2 EA daily); PA	VITRAKVI CAPS	4	PA
QINLOCK	4	PA	VITRAKVI SOLN	4	PA
RETEVMO CAPS	4	PA	XALKORI CAPS	4	QL(2 EA daily); SP; PA
<i>romidepsin SOLR</i>	4	SP; PA	XOSPATA	4	PA
ROZLYTREK CAPS	4	PA	ZEJULA CAPS	4	QL(3 EA daily); PA
RUBRACA	4	QL(4 EA daily); PA	ZEJULA TABS 200 MG, 300 MG	4	QL(1 EA daily); PA
SCEMBLIX 20 MG, 40 MG	4	QL(2 EA daily); PA	ZEJULA TABS 100 MG	4	QL(3 EA daily); PA
SCEMBLIX 100 MG	4	QL(4 EA daily); PA	ZELBORAF	4	QL(8 EA daily); SP; PA
<i>sorafenib tosylate</i>	4	QL(4 EA daily); SP; PA	ZOLINZA	4	QL(4 EA daily); SP; PA
SPRYCEL (<i>dasatinib</i>)	4	QL(1 EA daily); SP; PA	ZYDELIG	4	QL(2 EA daily); PA
STIVARGA	4	QL(4 EA daily); SP; PA	Antineoplastic Enzymes		
			ONCASPAR	4	SP; PA
			Antineoplastics Misc.		

Drug Name	Drug Tier	Requirements/ Limits
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA
arsenic trioxide 10 MG/10ML	4	SP; PA
bexarotene	4	SP; PA
dacarbazine SOLR 200 MG	4	SP; PA
hydroxyurea	1B	
MATULANE	4	SP; PA
NIPENT	4	SP; PA
PHOTOFRIN	4	SP; PA
PROLEUKIN	4	SP; PA
SYNRIBO	4	SP; PA
tretinoin (chemotherapy)	1B	
UVADEX	4	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
leucovorin calcium SOLR	1B	
leucovorin calcium TABS	1B	
VORAXAZE	4	SP; PA
Mitotic Inhibitors		
docetaxel CONC 20 MG/ML	4	SP; PA
docetaxel SOLN 20 MG/2ML	4	SP; PA
eribulin mesylate	4	SP; PA
ETOPOPHOS	4	SP; PA
etoposide CAPS	4	SP; PA
etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	4	PA
HALAVEN (eribulin mesylate)	4	SP; PA
IXEMPRA KIT 15 MG	4	SP; PA
JEVTANA	4	SP; PA
paclitaxel 100 MG/16.7ML, 150 MG/25ML	4	SP; PA
paclitaxel protein-bound particles	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
vincristine sulfate	4	SP; PA
vinorelbine tartrate 10 MG/ML	4	SP; PA
Topoisomerase I Inhibitors		
HYCANTIN CAPS	4	SP; PA
irinotecan hcl 40 MG/2ML, 100 MG/5ML	4	SP; PA
topotecan hcl SOLN	4	
topotecan hcl SOLR	4	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
carbidopa	1B	
Antiparkinson Anticholinergics		
benztropine mesylate SOLN	1B	
benztropine mesylate TABS	1B	
trihexyphenidyl hcl SOLN	1B	
trihexyphenidyl hcl TABS	1B	
Antiparkinson COMT Inhibitors		
entacapone	1B	QL(8 EA daily)
tolcapone	1B	
Antiparkinson Dopaminergics		
amantadine hcl CAPS	1B	
amantadine hcl SOLN	1B	
amantadine hcl TABS	1B	
apomorphine hydrochloride SOCT	4	PA
bromocriptine mesylate CAPS	1B	
bromocriptine mesylate TABS 2.5 MG	1B	
carbidopa-levodopa-entacapone	1B	
carbidopa-levodopa TABS	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>carbidopa-levodopa TBCR</i>	1B	
<i>carbidopa-levodopa TBDP</i>	1B	
NEUPRO	2	
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 EA daily)
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
<i>ropinirole hydrochloride TABS</i>	1B	
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 EA daily); ST
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 EA daily); ST
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	1B	QL(1 EA daily); PA
<i>selegiline hcl CAPS</i>	1B	
<i>selegiline hcl TABS</i>	1B	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	1B	
<i>lithium carbonate CAPS</i>	1B	
<i>lithium carbonate TABS</i>	1B	
<i>lithium carbonate TBCR</i>	1B	
Antipsychotics - Misc.		
EQUETRO 100 MG	3	QL(2 EA daily); ST
EQUETRO 300 MG	3	QL(4 EA daily); ST
EQUETRO 200 MG	3	QL(8 EA daily); ST
<i>lurasidone hcl 80 MG</i>	1B	QL(2 EA daily)
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>ziprasidone hcl</i>	1B	QL(2 EA daily); AL(At least 18 yrs old)
Benzisoxazoles		
FANAPT	2	QL(2 EA daily); PA
FANAPT TITRATION PACK A	2	PA
<i>paliperidone</i>	1B	
PERSERIS PRSY	2	QL(0.072 EA daily); PA
<i>risperidone microspheres</i>	1B	QL(0.072 EA daily); PA
<i>risperidone SOLN</i>	1B	
<i>risperidone TABS</i>	1B	
<i>risperidone TBDP</i>	1B	
Butyrophenones		
<i>haloperidol decanoate</i>	1B	QL(0.036 ML daily)
<i>haloperidol lactate CONC</i>	1B	
<i>haloperidol lactate SOLN</i>	1B	
<i>haloperidol TABS</i>	1B	
Dibenzapines		
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 EA daily); PA
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 EA daily); PA
<i>clozapine TABS</i>	1B	
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 EA daily)
<i>clozapine TBDP 100 MG</i>	1B	QL(9 EA daily)
<i>clozapine TBDP 25 MG</i>	1B	QL(3 EA daily)
<i>loxapine succinate</i>	1B	
<i>olanzapine SOLR</i>	1B	QL(0.215 EA daily)
<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 EA daily)
<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 EA daily)
<i>olanzapine TBDP 20 MG</i>	1B	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 EA daily)	<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 EA daily)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1B	AL(At least 10 yrs old)	<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 EA daily)
<i>quetiapine fumarate TB24</i>	1B		BIKTARVY	3	QL(1 EA daily)
Phenothiazines			CIMDUO	3	QL(1 EA daily); ST
<i>chlorpromazine hcl SOLN</i>	3		COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	3	QL(1 EA daily)
<i>chlorpromazine hcl TABS</i>	1B		<i>darunavir TABS</i>	1B	
<i>fluphenazine hcl CONC</i>	1B		DELSTRIGO	3	QL(1 EA daily)
<i>fluphenazine hcl ELIX</i>	1B		DOVATO	3	QL(1 EA daily)
<i>fluphenazine hcl SOLN</i>	1B		EDURANT	3	QL(1 EA daily)
<i>fluphenazine hcl TABS</i>	1B		<i>efavirenz CAPS 200 MG</i>	1B	QL(2 EA daily)
<i>perphenazine TABS</i>	1B		<i>efavirenz CAPS 50 MG</i>	1B	QL(3 EA daily)
<i>prochlorperazine</i>	1B		<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)
<i>prochlorperazine maleate TABS</i>	1B		<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)
<i>thioridazine hcl</i>	1B		<i>efavirenz TABS</i>	1B	QL(1 EA daily)
<i>trifluoperazine hcl TABS</i>	1B		<i>emtricitabine CAPS</i>	1B	QL(1 EA daily)
Quinolinone Derivatives			<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)
<i>aripiprazole SOLN PO</i>	1B	QL(30 ML daily); AL(At least 6 yrs old)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 EA daily)
<i>aripiprazole TABS</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)	<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 EA daily)
REXULTI	3	PA	EMTRIVA SOLN	3	QL(24 ML daily)
Thioxanthenes			<i>etravirine 100 MG</i>	1B	QL(4 EA daily)
<i>thiothixene</i>	1B		<i>etravirine 200 MG</i>	1B	QL(2 EA daily)
ANTIVIRALS - Drugs to Treat Viral Infections			EVOTAZ	3	QL(1 EA daily)
Antiretrovirals			<i>fosamprenavir calcium TABS</i>	1B	QL(4 EA daily)
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 EA daily)			
<i>abacavir sulfate SOLN</i>	1B	QL(32 ML daily)			
<i>abacavir sulfate TABS</i>	1B	QL(2 EA daily)			
APTIVUS CAPS	3	QL(4 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FUZEON SOLR	4	SP; PA	SELZENTRY TABS 25 MG, 75 MG	3	QL(2 EA daily)
GENVOYA	3	QL(1 EA daily)	STRIBILD	3	QL(1 EA daily)
INTELENCE 25 MG	3	QL(8 EA daily)	<i>tenofovir disoproxil fumarate TABS</i>	1B	
ISENTRESS HD TABS	3	QL(2 EA daily)	TIVICAY TABS	3	QL(2 EA daily)
ISENTRESS CHEW	3	QL(6 EA daily)	TRIUMEQ TABS	3	QL(1 EA daily)
ISENTRESS TABS	3	QL(2 EA daily)	TRIZIVIR	3	QL(2 EA daily)
JULUCA	3	QL(1 EA daily)	TYBOST	3	QL(1 EA daily)
KALETRA SOLN	2	QL(12.5 ML daily)	VIRACEPT TABS 625 MG	3	QL(4 EA daily)
<i>lamivudine SOLN</i>	1B	QL(30 ML daily)	VIRACEPT TABS 250 MG	3	QL(10 EA daily)
<i>lamivudine TABS 150 MG</i>	1B	QL(2 EA daily)	VIREAD POWD	3	QL(7.5 GM daily)
<i>lamivudine TABS 300 MG</i>	1B	QL(1 EA daily)	VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 EA daily)
<i>lamivudine-zidovudine</i>	1B	QL(2 EA daily)	<i>zidovudine CAPS</i>	1B	QL(6 EA daily)
LEXIVA SUSP	3	QL(56 ML daily)	<i>zidovudine SYRP</i>	1B	QL(60 ML daily)
<i>lopinavir-ritonavir SOLN</i>	1B	QL(12.5 ML daily)	<i>zidovudine TABS</i>	1B	QL(2 EA daily)
<i>lopinavir-ritonavir TABS</i>	1B	QL(4 EA daily)	CMV Agents		
<i>maraviroc TABS 150 MG</i>	1B	QL(2 EA daily)	<i>cidofovir</i>	3	
<i>maraviroc TABS 300 MG</i>	1B	QL(4 EA daily)	<i>ganciclovir sodium SOLR</i>	1B	
<i>nevirapine SUSP</i>	1B	QL(40 ML daily)	<i>valganciclovir hcl TABS</i>	1B	QL(4 EA daily); PA
<i>nevirapine TABS</i>	1B	QL(2 EA daily)	Hepatitis Agents		
<i>nevirapine TB24 400 MG</i>	1B	QL(1 EA daily)	<i>adefovir dipivoxil</i>	4	QL(1 EA daily); SP
NORVIR CAPS	2	QL(12 EA daily)	<i>entecavir TABS</i>	4	QL(1 EA daily); SP
NORVIR PACK	3	QL(12 EA daily)	<i>lamivudine (hbv) TABS</i>	1B	QL(3 EA daily); SP
ODEFSEY	3	QL(1 EA daily)	PEGASYS SOLN	4	QL(0.0714 ML daily); SP; PA
PIFELTRO	3	QL(1 EA daily)	PEGASYS SOSY	4	QL(0.072 ML daily); PA
PREZCOBIX	3	QL(1 EA daily)	<i>ribavirin (hepatitis c) CAPS</i>	1B	QL(7 EA daily)
PREZISTA SUSP	3	QL(12 ML daily)	<i>ribavirin (hepatitis c) TABS 200 MG</i>	1B	QL(7 EA daily)
PREZISTA TABS 75 MG, 150 MG	3	QL(2 EA daily)	SOFOSBUVIR-VELPATASVIR TABS	1B	QL(1 EA daily); PA
RETROVIR SOLN	3				
<i>ritonavir TABS</i>	1B	QL(12 EA daily)			
SELZENTRY SOLN	3	QL(30 ML daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SOVALDI TABS 200 MG	4	QL(1 EA daily); PA	<i>carvedilol phosphate</i>	3	QL(1 EA daily)
SOVALDI TABS 400 MG	4	QL(1 EA daily); SP; PA	<i>labetalol hcl SOLN</i>	1B	
VOSEVI	4	QL(1 EA daily); PA	<i>labetalol hcl TABS 300 MG</i>	1B	+; QL(8 EA daily)
Herpes Agents			<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	+
<i>acyclovir CAPS</i>	1A	QL(5 EA daily; 50 EA per fill retail; 50 per fill mail)	Beta Blockers Cardio-Selective		
<i>acyclovir SUSP</i>	1B	QL(13.34 ML daily)	<i>acebutolol hcl CAPS</i>	1B	
<i>acyclovir TABS PO</i>	1B	QL(5 EA daily)	<i>atenolol TABS</i>	1B	+
<i>famciclovir 500 MG</i>	1B	QL(4 EA daily)	<i>betaxolol hcl</i>	1B	
<i>famciclovir 125 MG, 250 MG</i>	1B	QL(3 EA daily)	<i>bisoprolol fumarate</i>	1B	+
<i>valacyclovir hcl 1 GM</i>	1B	QL(4 EA daily)	<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	+
<i>valacyclovir hcl 500 MG</i>	1B	QL(2 EA daily)	<i>metoprolol succinate TB24 200 MG</i>	1B	+; QL(2 EA daily)
Influenza Agents			<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B	
<i>oseltamivir phosphate CAPS</i>	1B	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1B	+
<i>oseltamivir phosphate SUSR</i>	1B	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail	<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 EA daily)
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail	<i>nebivolol hcl 20 MG</i>	3	QL(2 EA daily)
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 EA daily)	Beta Blockers Non-Selective		
BETA BLOCKERS - Drugs to Treat High Blood Pressure			HEMANGEOL SOLN PO	4	QL(75 ML daily); PA
Alpha-Beta Blockers			<i>nadolol TABS 20 MG</i>	1B	QL(3 EA daily)
<i>carvedilol</i>	1B	+	<i>nadolol TABS 40 MG</i>	1B	QL(6 EA daily)
			<i>nadolol TABS 80 MG</i>	1B	
			<i>pindolol TABS</i>	1B	
			<i>propranolol hcl CP24</i>	1B	QL(2 EA daily)
			<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	1B	
			<i>propranolol hcl TABS</i>	1B	
			<i>sotalol hcl (afib/af)</i>	1B	
			<i>sotalol hcl TABS 240 MG</i>	1B	
			<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 EA daily)
			<i>timolol maleate TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
<i>amlodipine besylate TABS</i>	1B	+
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 EA daily)
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B	
<i>diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	1B	+
<i>diltiazem hcl extended release beads 420 MG</i>	1B	
<i>diltiazem hcl CP12</i>	1B	QL(2 EA daily)
<i>diltiazem hcl CP24</i>	1B	+
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	
<i>DILTIAZEM HCL SOLR</i>	1B	
<i>diltiazem hcl TABS</i>	1B	+
<i>diltiazem hcl TB24</i>	1B	
<i>felodipine</i>	1B	+
<i>isradipine CAPS</i>	1B	
<i>nicardipine hcl CAPS</i>	1B	
<i>nicardipine hcl SOLN</i>	1B	
<i>nifedipine CAPS 10 MG</i>	1B	
<i>nifedipine CAPS 20 MG</i>	1B	QL(9 EA daily)
<i>nifedipine TB24 60 MG</i>	1B	++; QL(2 EA daily)
<i>nifedipine TB24</i>	1B	
<i>nifedipine TB24 30 MG</i>	1B	+
<i>nifedipine TB24 90 MG</i>	1B	++; QL(1 EA daily)
<i>nimodipine CAPS</i>	1B	
<i>nisoldipine</i>	1B	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 EA daily)
<i>verapamil hcl SOLN 2.5 MG/ML</i>	1B	
<i>verapamil hcl TABS</i>	1B	+
<i>verapamil hcl TBCR</i>	1B	+
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	1B	
<i>digoxin TABS 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
<i>LANOXIN SOLN IJ (digoxin)</i>	2	
<i>LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)</i>	2	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 EA daily)
<i>isosorbide dinitrate-hydralazine hcl</i>	1B	
<i>sacubitril-valsartan TABS</i>	1B	QL(2 EA daily)
Impotence Agents		
<i>avanafil</i>	1B	QL(0.134 EA daily)
<i>sildenafil citrate</i>	1B	QL(0.1334 EA daily); PA
<i>STENDRA (avanafil)</i>	3	QL(0.134 EA daily)
<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 EA daily); PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	PA
<i>ORENITRAM TBCR</i>	4	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>treprostinil SOLN IJ</i>	4	SP; PA
TYVASO REFILL KIT SOLN IN	4	PA
TYVASO STARTER KIT SOLN IN	4	PA
TYVASO SOLN IN	4	PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 EA daily); SP; PA
<i>bosentan TABS 62.5 MG</i>	4	QL(2 EA daily); PA
<i>bosentan TABS 125 MG</i>	4	QL(2 EA daily); SP; PA
<i>bosentan TBSO 32 MG</i>	4	QL(2 EA daily); SP; PA
OPSUMIT	4	QL(1 EA daily); PA
TRACLEER TBSO 32 MG (<i>bosentan</i>)	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ML daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ML daily); PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 EA daily); SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION TBPk	4	1 max fill(s) per 180 day(s) retail; PA

Drug Name	Drug Tier	Requirements/ Limits
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 EA daily); PA
UPTRAVI TABS 200 MCG	4	PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	4	QL(3 EA daily); PA
Sinus Node Inhibitors		
<i>ivabradine hcl TABS</i>	3	QL(2 EA daily); PA
Transthyretin Stabilizers		
VYNDAMAX	4	QL(1 EA daily); PA
VYNDAQEL	4	QL(4 EA daily); PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1B	
<i>cefadroxil SUSR</i>	1B	
<i>cefadroxil TABS</i>	1B	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B	
<i>cephalexin CAPS</i>	1B	
<i>cephalexin SUSR</i>	1B	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	1B	
<i>cefaclor SUSR 250 MG/5ML</i>	1B	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
<i>cefprozil SUSR</i>	1B	
<i>cefprozil TABS</i>	1B	
<i>cefuroxime axetil TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefuroxime sodium IJ 750 MG</i>	1B		<i>levonorgestrel & eth estradiol TABS</i>	0	
Cephalosporins - 3rd Generation			<i>levonorgestrel-eth estradiol (triphasic)</i>	0	
<i>cefдинир CAPS</i>	1B		<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0	
<i>cefдинир SUSR</i>	1B		<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0	
<i>cefixime CAPS</i>	1B		<i>levonorgestrel-ethinyl estradiol-iron</i>	0	
<i>cefixime SUSR</i>	1B	ST	LO LOESTRIN FE TABS	0	
<i>cefpodoxime proxetil SUSR</i>	1B		NATAZIA	0	
<i>cefpodoxime proxetil TABS</i>	1B		NEXTSTELLIS	0	
<i>ceftazidime IJ 1 GM, 6 GM</i>	1B		<i>norethin acet & estrad-fe CAPS</i>	0	
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG</i>	1B		<i>norethin acet & estrad-fe CHEW</i>	0	
<i>ceftriaxone sodium IJ 250 MG</i>	1A		<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	
Cephalosporins - 4th Generation			<i>norethindrone & eth estradiol</i>	0	
<i>cefepime hcl SOLR IV 2 GM</i>	1B		<i>norethindrone & ethinyl estradiol-fe</i>	0	
Cephalosporins - 5th Generation			<i>norethindrone acet & eth estra TABS</i>	0	
TEFLARO	3		<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	
CONTRACEPTIVES - Drugs to Prevent Pregnancy			<i>norethindrone-eth estradiol (triphasic)</i>	0	
Combination Contraceptives - Oral			<i>norgestimate-ethinyl estradiol</i>	0	
AVERI TABS PO	0		<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	
<i>desogestrel & ethinyl estradiol</i>	0		<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0		TYBLUME CHEW	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0		Combination Contraceptives - Transdermal		
<i>drospirenone-ethinyl estradiol</i>	0		<i>norelgestromin-ethinyl estradiol</i>	0	
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0				
<i>ethynodiol diacet & eth estrad</i>	0				
FEMLYV TBDP	0				

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Drug Name	Drug Tier	Requirements/ Limits
TWIRLA	0	QL(3 EA per 28 day(s) retail; 9 EA per 84 days mail)
Combination Contraceptives - Vaginal		
ANNOVERA	0	
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 EA daily)
Copper Contraceptives - IUD		
MIUDELLA INTRAUTERINE COPPER	0	
PARAGARD INTRAUTERINE COPPER	0	
Emergency Contraceptives		
ELLA	0	
<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
Progestin Contraceptives - Implants		
NEXPLANON	0	
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ML per 90 day(s) retail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(90 Day(s) limit ; 1 ML per 90 day(s) retail)
Progestin Contraceptives - IUD		
KYLEENA	0	
LILETTA (52 MG)	0	
MIRENA (52 MG)	0	
SKYLA	0	
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	0	
OPILL	0	
SLYND	0	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
<i>budesonide CPEP</i>	1B	QL(3 EA daily)
<i>deflazacort SUSP</i>	4	PA
<i>deflazacort TABS</i>	4	PA
DEPO-MEDROL SUSP	3	
DEXAMETHASONE INTENSOL CONC	1B	
<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	1B	
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	1B	
<i>dexamethasone ELIX</i>	1B	
<i>dexamethasone SOLN</i>	1B	
<i>dexamethasone TABS 0.5 MG, 0.75 MG</i>	1A	
<i>dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG</i>	1B	
EMFLAZA SUSP (<i>deflazacort</i>)	4	PA
<i>hydrocortisone sod succinate 100 MG</i>	1B	2 max fill(s) per 30 day(s) retail
<i>hydrocortisone TABS</i>	1B	
MEDROL TABS	3	
<i>methylprednisolone acetate SUSP</i>	1B	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1B	
<i>methylprednisolone TABS</i>	1B	
<i>methylprednisolone TBPk</i>	1B	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>prednisolone sodium phosphate TBDP</i>	3	
<i>prednisolone SOLN</i>	1B	
<i>prednisolone TABS</i>	1B	
<i>prednisone SOLN</i>	1B	
<i>prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG</i>	1A	
<i>prednisone TABS 1 MG, 5 MG</i>	1B	
<i>prednisone TBPk</i>	1B	
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-CORTEF 250 MG	3	
SOLU-CORTEF (<i>hydrocortisone sod succinate</i>)	3	2 max fill(s) per 30 day(s) retail
SOLU-MEDROL 2 GM	3	
<i>triamcinolone acetonide SUSP 40 MG/ML</i>	1B	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1B	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 200 MG</i>	1B	QL(3 EA daily)
<i>benzonatate 100 MG</i>	1B	QL(6 EA daily)
<i>benzonatate 150 MG</i>	1B	QL(4 EA daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1B	
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1B	
NEBUSAL NEBU	1B	
<i>sodium chloride (inhalant) NEBU 7 %</i>	1B	
Mucolytics		

Drug Name	Drug Tier	Requirements/ Limits
<i>acetylcysteine SOLN</i>	1B	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1B	AL(At least 12 yrs old); ST
<i>adapalene CREA</i>	1B	AL(At least 12 yrs old)
<i>adapalene GEL</i>	1B	AL(At least 12 yrs old); RX/OTC
AZELEX	3	QL(50 GM per 30 day(s) retail; 50 GM per 30 days mail); AL(At least 12 yrs old); ST
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old)
BENZEPRO FOAM 5.3 %	2	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide-erythromycin GEL</i>	1B	AL(At least 12 yrs old); PA
<i>benzoyl peroxide FOAM 5.3 %, 9.8 %</i>	1B	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide GEL 10 %</i>	1B	AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old)
<i>benzoyl peroxide LIQD 4 %, 10 %</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) FOAM</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate (topical) GEL</i>	1B	QL(8 ML daily)
<i>clindamycin phosphate (topical) LOTN</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SOLN</i>	1B	QL(4 ML daily); AL(At least 12 yrs old)

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Drug Name	Drug Tier	Requirements/ Limits
<i>clindamycin phosphate (topical) SWAB</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate-tretinoin</i>	1B	AL(At least 12 yrs old); ST
DIFFERIN LOTN	2	AL(At least 12 yrs old); ST
<i>erythromycin (acne aid) PADS</i>	1B	AL(At least 12 yrs old)
<i>erythromycin (acne aid) SOLN</i>	1B	AL(At least 12 yrs old)
<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	AL(At least 12 yrs old); PA
PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old)
<i>sulfacetamide sodium (acne)</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %</i>	1B	AL(At least 12 yrs old); ST
<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	1B	AL(At least 12 yrs old)
<i>tretinoin microsphere 0.1 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>tretinoin GEL 0.01 %, 0.025 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
Agents for External Genital and Perianal Warts		
VEREGEN	3	QL(1 GM daily)

Drug Name	Drug Tier	Requirements/ Limits
Antibiotics - Topical		
ALTABAX	2	QL(15 GM per 30 day(s) retail; 15 GM per 30 days mail)
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 GM daily)
<i>gentamicin sulfate (topical) OINT</i>	1B	
<i>mupirocin OINT</i>	1B	QL(6 GM daily)
NEO-SYNALAR	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail); PA
Antifungals - Topical		
<i>butenafine hcl</i>	1B	QL(6 GM daily)
<i>ciclopirox olamine CREA</i>	1B	QL(90 GM per fill retail); 1 max fill(s) per 30 day(s) retail
<i>ciclopirox olamine SUSP</i>	1B	
<i>ciclopirox GEL</i>	1B	QL(3.35 GM daily)
<i>ciclopirox SHAM</i>	1B	QL(10 ML daily)
<i>ciclopirox SOLN</i>	1B	QL(0.22 ML daily)
<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 GM daily); RX/OTC
<i>clotrimazole (topical) SOLN</i>	1B	QL(10 ML daily); RX/OTC
<i>clotrimazole w/ betamethasone CREA</i>	1B	QL(8 GM daily)
<i>clotrimazole w/ betamethasone LOTN</i>	1B	
<i>econazole nitrate CREA</i>	1B	QL(85 GM per fill retail; 85 per fill mail)
ERTACZO	3	QL(2.15 GM daily)
<i>ketoconazole (topical) CREA</i>	1B	QL(10 GM daily)
<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>luliconazole</i>	1B	PA
<i>naftifine hcl CREA 2 %</i>	1B	QL(2 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>naftifine hcl CREA 1 %</i>	1B	QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>nystatin (topical) CREA</i>	1B	QL(10 GM daily)
<i>nystatin (topical) OINT</i>	1B	QL(6 GM daily)
<i>nystatin (topical) POWD EX</i>	1B	QL(10 GM daily)
<i>nystatin-triamcinolone CREA</i>	1B	QL(10 GM daily)
<i>nystatin-triamcinolone OINT</i>	1B	QL(4 GM daily)
<i>oxiconazole nitrate CREA</i>	1B	Limit 1 Fill per 180 days; QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
OXISTAT LOTN	2	Limit 1 Fill per 180 days; QL(2 ML daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>sulconazole nitrate CREA</i>	1B	
<i>sulconazole nitrate SOLN</i>	1B	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>tavaborole</i>	1B	PA
Anti-inflammatory Agents - Topical		

Drug Name	Drug Tier	Requirements/ Limits
<i>diclofenac epolamine PTCH EX</i>	1B	QL(2 EA daily); PA
<i>diclofenac sodium (topical) GEL EX</i>	1B	QL(3.34 GM daily); RX/OTC
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP; PA
<i>diclofenac sodium (actinic keratoses) EX</i>	1B	QL(3.34 GM daily); PA
<i>fluorouracil (topical) CREA 5 %</i>	1B	QL(4 GM daily)
<i>fluorouracil (topical) SOLN</i>	1B	QL(2 ML daily)
PANRETIN	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail)
Antipruritics - Topical		
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Antipsoriatics		
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 EA daily)
<i>acitretin 25 MG</i>	1B	QL(2 EA daily)
<i>calcipotriene CREA</i>	1B	QL(4 GM daily); PA
<i>calcipotriene OINT</i>	1B	QL(4 GM daily); PA
<i>calcipotriene SOLN</i>	1B	QL(4 ML daily); PA
<i>calcitriol (topical)</i>	1B	QL(3.34 GM daily)
COSENTYX (300 MG DOSE) SOSY	4	QL(0.072 ML daily); PA
COSENTYX SENSOREADY (300 MG) SOAJ	4	QL(0.072 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ML daily); PA
COSENTYX UNOREADY SOAJ	4	QL(0.072 ML daily); PA
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ML daily); PA
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ML daily); PA
<i>methoxsalen rapid</i>	1B	QL(4 EA daily)
SKYRIZI PEN SOAJ	4	QL(0.025 ML daily); PA
SKYRIZI SOSY	4	QL(0.025 ML daily); PA
STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); PA
STELARA SOSY 90 MG/ML	4	QL(0.018 ML daily); PA
STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); PA
<i>tazarotene CREA 0.1 %</i>	1B	QL(1 GM daily)
TREMFYA ONE-PRESS SOPN SC 100 MG/ML	4	QL(0.018 ML daily); PA
TREMFYA PEN SOAJ 100 MG/ML	4	QL(0.018 ML daily); PA
TREMFYA SOSY 100 MG/ML	4	QL(0.018 ML daily); PA
Antiseborrheic Products		
<i>selenium sulfide LOTN 2.5 %</i>	1B	
Antivirals - Topical		
<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
<i>penciclovir</i>	3	QL(0.18 GM daily)
Burn Products		

Drug Name	Drug Tier	Requirements/ Limits
<i>mafenide acetate PACK</i>	3	
<i>silver sulfadiazine</i>	1B	QL(20 GM daily)
SULFAMYLON CREA	3	
Corticosteroids - Topical		
<i>alclometasone dipropionate CREA</i>	1B	QL(2 GM daily)
<i>alclometasone dipropionate OINT</i>	1B	QL(3 GM daily)
<i>amcinonide CREA</i>	1B	QL(60 GM per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
<i>amcinonide LOTN</i>	3	
<i>amcinonide OINT</i>	3	
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 GM daily)
<i>betamethasone dipropionate (topical) LOTN</i>	1B	
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 GM daily)
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 GM daily)
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ML daily)
<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 GM daily)
<i>betamethasone valerate CREA</i>	1B	QL(2.5 GM daily)
<i>betamethasone valerate FOAM</i>	1B	QL(1.67 GM daily)
<i>betamethasone valerate LOTN</i>	1B	QL(5 ML daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>betamethasone valerate OINT</i>	1B	QL(3 GM daily)	<i>fluocinolone acetonide OIL</i>	1B	QL(8 ML daily)
<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST	<i>fluocinolone acetonide OINT</i>	1B	QL(4 GM daily)
<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST	<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ML daily)
<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 GM daily); PA	<i>fluocinonide emulsified base</i>	1B	QL(2 GM daily)
<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 GM daily); PA	<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 GM daily)
<i>clobetasol propionate FOAM</i>	1B	QL(3 GM daily); ST	<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 GM daily)
<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 GM daily); ST	<i>fluocinonide GEL</i>	1B	
<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 GM daily); PA	<i>fluocinonide OINT</i>	1B	QL(2 GM daily)
<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ML daily); PA	<i>fluocinonide SOLN</i>	1B	QL(2 ML daily)
<i>clocortolone pivalate</i>	3	QL(3 GM daily)	<i>flurandrenolide CREA</i>	2	QL(2 GM daily)
CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>flurandrenolide LOTN</i>	2	QL(2 ML daily)
<i>desonide CREA</i>	1B	QL(4 GM daily)	<i>fluticasone propionate CREA 0.05 %</i>	1B	QL(4 GM daily)
<i>desonide LOTN</i>	1B	QL(4 ML daily)	<i>fluticasone propionate LOTN</i>	1B	QL(6 ML daily)
<i>desonide OINT</i>	1B	QL(3 GM daily)	<i>fluticasone propionate OINT</i>	1B	QL(4 GM daily)
<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 GM daily)	<i>halcinonide CREA</i>	1B	PA
<i>desoximetasone GEL</i>	1B	QL(3 GM daily)	<i>halobetasol propionate CREA</i>	1B	QL(3.5 GM daily)
<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 GM daily)	<i>halobetasol propionate OINT</i>	1B	QL(3.5 GM daily)
<i>diflorasone diacetate CREA</i>	1B	PA	HALOG OINT	3	PA
<i>diflorasone diacetate OINT</i>	1B	PA	<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1B	QL(15.15 GM daily); RX/OTC
<i>fluocinolone acetonide CREA 0.01 %</i>	1B		<i>hydrocortisone (topical) LOTN 2.5 %</i>	1B	
<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 GM daily)	<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1B	QL(15.15 GM daily); RX/OTC
			<i>hydrocortisone butyrate CREA</i>	1B	QL(3 GM daily)
			<i>hydrocortisone butyrate OINT</i>	1B	QL(3 GM daily)
			<i>hydrocortisone butyrate SOLN</i>	1B	QL(5 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocortisone valerate CREA</i>	1B	
<i>hydrocortisone valerate OINT</i>	1B	
<i>mometasone furoate CREA</i>	1B	QL(3 GM daily)
<i>mometasone furoate OINT</i>	1B	QL(4 GM daily)
<i>mometasone furoate SOLN</i>	1B	QL(5 ML daily)
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1B	QL(3.34 GM daily)
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1B	QL(5 GM daily)
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1B	QL(15.15 GM daily)
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1B	
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1B	QL(6 ML daily)
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1B	QL(6 GM daily)
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1B	QL(15.15 GM daily)
Eczema Agents		
DUPIXENT SOAJ 300 MG/2ML	4	QL(0.29 ML daily); PA
DUPIXENT SOAJ 200 MG/1.14ML	4	QL(0.082 ML daily); PA
DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ML daily); PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ML daily); PA
Emollients		
<i>lactic acid (ammonium lactate) CREA</i>	1B	QL(12.9 GM daily); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1B	RX/OTC
Enzymes - Topical		
SANTYL OINT	3	PA

Drug Name	Drug Tier	Requirements/ Limits
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	1B	QL(12 EA per fill retail; 12 per fill mail)
Immunosuppressive Agents - Topical		
<i>pimecrolimus</i>	1B	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT</i>	1B	AL(At least 2 yrs old); PA
Keratolytic/Antimitotic/Vesicant Agents		
<i>podofilox SOLN</i>	1B	
Local Anesthetics - Topical		
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ML daily)
<i>lidocaine hcl PRSY</i>	1B	QL(4 ML daily)
<i>lidocaine hcl SOLN</i>	1B	QL(10 ML daily)
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 GM daily)
<i>lidocaine PTCH 5 %</i>	1B	PA
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	3	QL(2 GM daily); PA
Rosacea Agents		
<i>azelaic acid GEL</i>	1B	QL(1.67 GM daily)
<i>brimonidine tartrate (topical)</i>	3	QL(1 GM daily); PA
<i>metronidazole (topical) CREA</i>	1B	QL(3 GM daily)
<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 GM daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 GM daily)
<i>metronidazole (topical) LOTN</i>	1B	
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	1B	PA
<i>ivermectin (pediculicide)</i>	1B	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>malathion</i>	1B	
<i>permethrin CREA</i>	1B	
<i>permethrin LIQD EX</i>	1B	
<i>spinosad</i>	1B	PA
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
GLUCAGEN DIAGNOSTIC	3	QL(0.035 EA daily)
THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; PA
Diagnostic Tests		
CHEMSTRIP K STRP	1B	#
FORA GTEL BLOOD KETONE TEST	1B	#
FORA TEST N'GO ADV-VOICE-6 CON	1B	#
GOJJI BLOOD KETONE TEST	1B	#
KETONE TEST STRP	1B	#
KETOSTIX STRP	1B	#
NOVA MAX PLUS KETONE TEST	1B	#
PRECISION XTRA KETONE	1B	#
RELION KETONE TEST STRP	1B	#
RELION TRUE METRIX TEST STRIPS STRP	1B	#, QL(3.34 EA daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	1B	#, QL(3.34 EA daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	1B	QL(3.34 EA daily); RX/OTC
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		

Drug Name	Drug Tier	Requirements/ Limits
CREON CPEP	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 EA daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 EA daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 EA daily)
<i>dichlorphenamide</i>	4	QL(4 EA daily); PA
<i>methazolamide TABS</i>	1B	QL(6 EA daily)
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1B	
<i>spironolactone & hydrochlorothiazide</i>	1B	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1B	
<i>triamterene & hydrochlorothiazide TABS</i>	1B	
Loop Diuretics		

Drug Name	Drug Tier	Requirements/ Limits
<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
<i>bumetanide TABS</i>	1B	QL(5 EA daily)
<i>ethacrynic acid</i>	1B	QL(16 EA daily)
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	1B	
<i>furosemide TABS</i>	1B	
<i>torsemide TABS</i>	1B	
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	1B	
<i>spironolactone TABS</i>	1B	
<i>triamterene CAPS</i>	1B	QL(3 EA daily)
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	1B	
DIURIL SUSP	2	QL(20 ML daily)
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 EA daily)
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 EA daily)
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 EA daily)
<i>indapamide TABS 2.5 MG</i>	1B	QL(2 EA daily)
<i>indapamide TABS 1.25 MG</i>	1B	QL(1 EA daily)
<i>metolazone</i>	1B	QL(2 EA daily)
ENDOCRINE AND METABOLIC AGENTS - MISC.		
- Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1B	QL(0.143 EA daily)
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1B	QL(1 EA daily)
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ML daily)
FOSAMAX PLUS D	3	QL(0.143 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>ibandronate sodium SOLN</i>	4	SP; PA
<i>ibandronate sodium TABS</i>	1B	QL(0.036 EA daily)
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA
PAMIDRONATE DISODIUM SOLN	4	SP; PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 EA daily); PA
<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 EA daily); PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 EA daily); PA
<i>risedronate sodium TBEC</i>	1B	PA
<i>teriparatide SOPN</i>	4	QL(0.09 ML daily); SP; PA
TYMLOS	4	PA
XGEVA SOLN	4	SP; PA
<i>zoledronic acid CONC</i>	4	SP; PA
<i>zoledronic acid SOLN 5 MG/100ML</i>	4	SP; PA
Corticotropin		
ACTHAR GEL PEN SC 40 UNIT/0.5ML, 80 UNIT/ML	3	PA
ACTHAR GEL	3	PA
Fertility Regulators		
CHORIONIC GONADOTROPIN IM	4	PA
<i>clomiphene citrate TABS</i>	3	PA
NOVAREL IM 10000 UNIT	4	PA
GnRH/LHRH Antagonists		
<i>ganirelix acetate</i>	4	PA
ORILISSA	2	PA
Growth Hormone Releasing Hormones (GHRH)		
EGRIFTA SV	4	PA

Drug Name	Drug Tier	Requirements/ Limits
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	4	PA
GENOTROPIN CART SC	4	PA
HUMATROPE CART IJ	4	SP; PA
NORDITROPIN FLEXPPO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA
NORDITROPIN FLEXPPO SOPN 30 MG/3ML	4	PA
ZORBTIVE SC	4	SP; PA
Hormone Receptor Modulators		
OSPHENA	3	PA
<i>raloxifene hcl</i>	0	QL(1 EA daily)
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	4	SP; PA
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI (6 MONTH) SC	4	SP; PA
LUPRON DEPOT-PED (1-MONTH)	4	SP; PA
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA
LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA
SYNAREL	4	SP; PA
Metabolic Modifiers		
ALDURAZYME	4	SP; PA
<i>betaine</i>	4	SP; PA
<i>calcitriol CAPS</i>	1B	
<i>calcitriol SOLN IV</i>	1B	
<i>cinacalcet hcl</i>	4	QL(4 EA daily); SP; PA
<i>doxercalciferol CAPS</i>	1B	
<i>doxercalciferol SOLN</i>	1B	
ELAPRASE	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
LUMIZYME	4	SP; PA
MYALEPT	4	PA
<i>nitisinone CAPS</i>	4	PA
<i>paricalcitol CAPS</i>	1B	
<i>paricalcitol SOLN</i>	1B	
PHEBURANE PLLT	4	PA
<i>sapropterin dihydrochloride PACK</i>	4	PA
<i>sapropterin dihydrochloride TABS</i>	4	PA
<i>sodium phenylbutyrate POWD</i>	1B	PA
<i>sodium phenylbutyrate TABS</i>	1B	PA
STRENSIQ	4	PA
Posterior Pituitary Hormones		
<i>desmopressin acetate spray</i>	1B	
<i>desmopressin acetate spray refrigerated 0.01 %</i>	1B	
<i>desmopressin acetate SOLN IJ</i>	1B	PA
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 EA daily)
<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 EA daily)
Prolactin Inhibitors		
<i>cabergoline</i>	1B	
Somatostatic Agents		
<i>octreotide acetate SOLN</i>	4	SP; PA
SIGNIFOR	4	PA
Vasopressin Receptor Antagonists		
JYNARQUE TBPK 15 MG (<i>tolvaptan</i>)	4	SP; PA
<i>tolvaptan TABS</i>	4	QL(2 EA daily); SP; PA
<i>tolvaptan TBPK 15 MG</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
ACTIVELLA TABS 1 MG-0.5 MG (<i>estradiol & norethindrone acetate</i>)	3	
ANGELIQ	3	
BIJUVA	3	
CLIMARA PRO	3	
COMBIPATCH PTTW	3	
DUAVEE	3	
<i>esterified estrogens & methyltestosterone</i>	3	
<i>estradiol & norethindrone acetate TABS</i>	3	
<i>norethindrone acetate-ethinyl estradiol</i>	1B	
PREMPHASE	2	
PREMPRO	2	QL(1 EA daily)
Estrogens		
DEPO-ESTRADIOL	3	
ELESTRIN GEL	3	
<i>estradiol valerate</i>	1B	
<i>estradiol GEL</i>	1B	
<i>estradiol GEL</i>	3	
<i>estradiol PTTW</i>	1B	QL(0.572 EA daily)
<i>estradiol PTWK</i>	1B	
<i>estradiol TABS</i>	1B	
ESTROGEL GEL (<i>estradiol</i>)	3	
<i>estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG</i>	1B	QL(1 EA daily)
EVAMIST SOLN	3	
MENEST 2.5 MG	3	
MENOSTAR PTWK	3	
PREMARIN SOLR	2	

Drug Name	Drug Tier	Requirements/ Limits
PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (<i>estrogens, conjugated</i>)	2	QL(1 EA daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
<i>ciprofloxacin hcl TABS</i>	1B	
<i>ciprofloxacin in d5w 200 MG/100ML</i>	3	
<i>levofloxacin in d5w 500 MG/100ML</i>	1B	
<i>levofloxacin SOLN PO</i>	1B	
<i>levofloxacin TABS 500 MG</i>	1A	
<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
<i>moxifloxacin hcl in sodium chloride</i>	1B	
<i>moxifloxacin hcl TABS</i>	1B	
<i>ofloxacin 300 MG, 400 MG</i>	1B	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
<i>prucalopride succinate</i>	1B	QL(1 EA daily)
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE	2	QL(1 EA daily)
Bile Acid Synthesis Disorder Agents		
CHOLBAM	4	SP; PA
Gallstone Solubilizing Agents		
<i>ursodiol CAPS</i>	1B	QL(3 EA daily)
<i>ursodiol TABS</i>	1B	
Gastrointestinal Chloride Channel Activators		

Drug Name	Drug Tier	Requirements/ Limits
<i>lubiprostone</i>	1B	QL(2 EA daily)
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ML daily)
<i>metoclopramide hcl TABS</i>	1A	QL(6 EA daily)
Inflammatory Bowel Agents		
<i>balsalazide disodium CAPS</i>	1B	QL(9 EA daily)
DIPENTUM	2	
INFLECTRA SOLR	4	PA
<i>mesalamine CP24</i>	1B	
<i>mesalamine CPDR</i>	1B	
<i>mesalamine ENEM</i>	3	
<i>mesalamine SUPP</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 EA daily)
<i>mesalamine TBEC 1.2 GM</i>	3	
RENFLEXIS	4	PA
SKYRIZI SOCT	4	QL(0.043 ML daily); PA
SKYRIZI SOLN	4	QL(0.36 ML daily); PA
STELARA 130 MG/26ML	4	QL(3.47 ML daily); PA
<i>sulfasalazine TABS</i>	1B	
<i>sulfasalazine TBEC</i>	1B	
TREMFYA PEN SOAJ SC 200 MG/2ML	4	QL(0.072 ML daily); PA
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); PA
TREMFYA SOLN IV	4	QL(0.72 ML daily); PA
TREMFYA SOSY SC 200 MG/2ML	4	QL(0.072 ML daily); PA
Intestinal Acidifiers		

Drug Name	Drug Tier	Requirements/ Limits
<i>lactulose (encephalopathy)</i>	1B	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	1B	QL(2 EA daily)
LINZESS	2	QL(1 EA daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1B	
MOVANTIK	3	QL(1 EA daily); PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1B	
<i>calcium acetate (phosphate binder) TABS</i>	1B	RX/OTC
<i>lanthanum carbonate CHEW</i>	1B	
<i>sevelamer carbonate PACK</i>	1B	
<i>sevelamer carbonate TABS</i>	1B	
VELPHORO	3	PA
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	1B	
<i>sodium citrate & citric acid</i>	1B	RX/OTC
Cystinosis Agents		
CYSTAGON CAPS	3	PA
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1B	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1B	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1B	
SORBITOL 3 %	1B	

Drug Name	Drug Tier	Requirements/ Limits
SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	1B	
Interstitial Cystitis Agents		
ELMIRON CAPS	2	QL(3 EA daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1B	QL(1 EA daily)
<i>dutasteride</i>	1B	QL(1 EA daily)
<i>dutasteride-tamsulosin hcl</i>	3	PA
<i>finasteride</i>	1B	5 mg only
<i>silodosin</i>	1B	
<i>tamsulosin hcl</i>	1B	
Urinary Analgesics		
<i>phenazopyridine hcl</i> TABS 100 MG, 200 MG	1B	
Urinary Stone Agents		
THIOLA EC TBEC 100 MG (<i>tiopronin</i>)	3	QL(3 EA daily); PA
THIOLA EC TBEC 300 MG (<i>tiopronin</i>)	3	QL(10 EA daily); PA
<i>tiopronin TBEC 300 MG</i>	3	QL(10 EA daily); PA
<i>tiopronin TBEC 100 MG</i>	3	QL(3 EA daily); PA
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1B	
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	1B	
<i>colchicine TABS</i>	1B	QL(1 EA daily)
<i>febuxostat</i>	1B	QL(1 EA daily); PA
Uricosurics		
<i>probenecid</i>	1B	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		

Drug Name	Drug Tier	Requirements/ Limits
Antihemophilic Products		
ADVATE	4	PA
ADYNOVATE	4	PA
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	4	PA
ALPROLIX	4	PA
ALTUVIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	4	PA
BENEFIX KIT	4	PA
ELOCTATE	4	PA
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT	4	PA
IDELVION	4	PA
JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT	4	PA
KOGENATE FS KIT	4	PA
KOVALTRY	4	PA
NOVOEIGHT	4	PA
XYNTHA	4	PA
XYNTHA SOLOFUSE	4	PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOSY</i>	4	QL(9 ML daily); PA
Complement Inhibitors		
GOHIBIC	4	PA
HAEGARDA SOLR SC	4	PA
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE	4	QL(2 EA daily); SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1B	QL(3 EA daily)
Plasma Kallikrein Inhibitors		
ORLADEYO	4	PA

Drug Name	Drug Tier	Requirements/ Limits
TAKHZYRO SOLN	4	PA
TAKHZYRO SOSY	4	PA
Platelet Aggregation Inhibitors		
<i>anagrelide hcl</i>	1B	
<i>aspirin-dipyridamole</i>	1B	QL(2 EA daily); PA
BRILINTA 60 MG, 90 MG (<i>ticagrelor</i>)	2	QL(2 EA daily)
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1B	QL(1 EA daily)
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>dipyridamole</i>	1B	
<i>prasugrel hcl</i>	1B	QL(1 EA daily)
<i>ticagrelor 60 MG, 90 MG</i>	1B	QL(2 EA daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 EA daily); PA
CEREZYME 400 UNIT	4	SP; PA
<i>miglustat</i>	4	QL(3 EA daily); SP; PA
Agents for Sickie Cell Disease		
DROXIA CAPS	3	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ML daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	0	
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP; PA
ARANESP (ALBUMIN FREE) SOLN 25 MCG/ML	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ARANESP (ALBUMIN FREE) SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP; PA
DOPTelet	4	QL(3 EA daily); PA
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	4	QL(1 EA daily); PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG</i>	4	QL(1 EA daily); PA
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
LEUKINE SOLR IJ	4	SP; PA
MIRCERA	4	PA
MULPLETA	4	QL(1 EA daily); PA
NYVEPRIA	4	PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
PROCRIT 40000 UNIT/ML	4	SP; PA
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	4	SP; PA
PROMACTA PACK 12.5 MG, 25 MG (<i>eltrombopag olamine</i>)	4	QL(1 EA daily); PA
PROMACTA TABS 12.5 MG, 25 MG, 50 MG, 75 MG (<i>eltrombopag olamine</i>)	4	QL(1 EA daily); PA
RETACRIT	4	PA
UDENYCA ONBODY SOSY	4	PA
UDENYCA SOAJ	4	PA
UDENYCA SOSY	4	PA
ZARXIO	4	PA

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Drug Name	Drug Tier	Requirements/ Limits
Hematopoietic Mixtures		
HEMATINIC/FOLIC ACID	1B	QL(1 EA daily)
Iron		
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	0	AL(Up to 1 yrs old)
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	0	
<i>ferrous sulfate TBEC 325 MG</i>	0	
Stem Cell Mobilizers		
<i>plerixafor</i>	4	SP; PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1B	PA
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
<i>tranexamic acid TABS</i>	1B	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1B	
<i>phenobarbital TABS</i>	1B	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1B	QL(1 EA daily); PA
Non-Barbiturate Hypnotics		
<i>estazolam</i>	1B	
<i>eszopiclone</i>	1B	QL(1 EA daily); AL(At least 18 yrs old); ST
<i>flurazepam hcl</i>	1B	PA
<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 EA daily)
<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>triazolam</i>	1B	
<i>zaleplon 5 MG</i>	1B	QL(1 EA daily); AL(At least 18 yrs old)
<i>zaleplon 10 MG</i>	1B	QL(2 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TABS</i>	1A	QL(1 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TBCR</i>	1B	QL(1 EA daily)
Orexin Receptor Antagonists		
BELSOMRA	3	PA
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1B	QL(1 EA daily); AL(At least 18 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	1B	
Laxative Combinations		
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1B	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM</i>	0	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1B	PA
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1B	
Laxatives - Miscellaneous		
<i>lactulose SOLN</i>	1B	
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	1A	
<i>bisacodyl TBEC</i>	1A	
Surfactant Laxatives		

Drug Name	Drug Tier	Requirements/ Limits
<i>docusate calcium</i>	1A	QL(1 EA daily)
<i>docusate sodium CAPS 250 MG</i>	1A	
<i>docusate sodium CAPS 100 MG</i>	1A	QL(4 EA daily)
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
Local Anesthetics - Amides		
<i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %</i>	1B	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin PACK</i>	1B	
<i>azithromycin SOLR</i>	1B	
<i>azithromycin SUSR</i>	1B	
<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 EA daily)
<i>azithromycin TABS 500 MG</i>	1B	QL(4 EA per fill retail; 4 per fill mail)
<i>azithromycin TABS 250 MG</i>	1B	QL(6 EA per fill retail; 6 per fill mail)
Clarithromycin		
<i>clarithromycin SUSR</i>	1B	
<i>clarithromycin TABS</i>	1B	
<i>clarithromycin TB24</i>	1B	
Erythromycins		
<i>erythromycin base CPEP</i>	3	
<i>erythromycin base TABS</i>	3	
<i>erythromycin base TBEC</i>	1B	
<i>erythromycin ethylsuccinate SUSR</i>	1B	
<i>erythromycin ethylsuccinate TABS</i>	3	
Fidaxomicin		

Drug Name	Drug Tier	Requirements/ Limits
DIFICID TABS 200 MG (<i>fidaxomicin</i>)	2	
<i>fidaxomicin TABS 200 MG</i>	1B	
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
AIMSCO LUBRICATED MISC	0	
CAYA DPRH	0	
DUREX EXTRA SENSITIVE THIN DEVI	0	
DUREX EXTRA SENSITIVE THIN MISC	0	
DUREX TROPICAL MISC	0	
FANTASY LUBRICATED/SPERMICI DE MISC	0	
FANTASY LUBRICATED MISC	0	
FC2 FEMALE CONDOM	0	QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
FEMCAP DEVI	0	
KAMELEON LUBRICATED MISC	0	
KIMONO COLORS DEVI	0	
KIMONO MAXX-LARGE FLARE MISC	0	
KIMONO MICRO THIN PLUS MISC	0	
KIMONO PLUS MISC	0	
KIMONO PS PLUS MISC	0	
KIMONO PS MISC	0	
KIMONO SENSATION PLUS MISC	0	
KIMONO SENSATION MISC	0	
KIMONO SPECIAL DEVI	0	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KIMONO MISC	0		TRUSTEX LUBRICATED/SPERMICI DE MISC	0	
K-Y ME & YOU EXTRA LUBRICATED DEVI	0		TRUSTEX LUBRICATED MISC	0	
K-Y ME & YOU INTENSE DEVI	0		TRUSTEX NATURAL CONDOMS + LUBE MISC	0	
MAXX PLUS MISC	0		TRUSTEX RIA LUB/SPERMICIDE MISC	0	
MAXX MISC	0		TRUSTEX RIA LUBRICATED MISC	0	
OMNIFLEX DIAPHRAGM	0		TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	0	
REALITY LATEX CONDOMS MISC	0		WIDE-SEAL DIAPHRAGM 60	0	
REALITY LATEX/ULTRA TEXTURED DEVI	0		WIDE-SEAL DIAPHRAGM 65	0	
REALITY LATEX/ULTRA THIN DEVI	0		WIDE-SEAL DIAPHRAGM 70	0	
TROJAN BARESKIN DEVI	0		WIDE-SEAL DIAPHRAGM 75	0	
TROJAN MAGNUM MISC	0		WIDE-SEAL DIAPHRAGM 80	0	
TROJAN ULTRA THIN/SPERMICIDAL MISC	0		WIDE-SEAL DIAPHRAGM 85	0	
TROJAN ULTRA THIN MISC	0		WIDE-SEAL DIAPHRAGM 90	0	
TROJAN-ENZ LUBRICATED MISC	0		WIDE-SEAL DIAPHRAGM 95	0	
TROJAN-ENZ/SPERMICIDAL MISC	0		Diabetic Supplies		
TRUE COVER DEVI	0		FREESTYLE LIBRE 14 DAY READER	3	PA
TRUSTEX COLOR CONDOMS + LUBE MISC	0		FREESTYLE LIBRE 14 DAY SENSOR	3	QL(0.072 EA daily); PA
TRUSTEX LUB/RIBBED/STUDED MISC	0		FREESTYLE LIBRE 2 PLUS SENSOR	3	QL(0.072 EA daily); PA
TRUSTEX LUB/SPERMICIDE EX ST MISC	0		FREESTYLE LIBRE 2 READER	3	PA
TRUSTEX LUB/SPERMICIDE XL MISC	0		FREESTYLE LIBRE 2 SENSOR	3	QL(0.072 EA daily); PA
TRUSTEX LUBRICATED EX LARGE MISC	0		FREESTYLE LIBRE 3 PLUS SENSOR	3	QL(0.072 EA daily); PA
TRUSTEX LUBRICATED EXTRA ST MISC	0				

Drug Name	Drug Tier	Requirements/ Limits
FREESTYLE LIBRE 3 READER	3	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LIBRE 3 SENSOR	3	QL(0.072 EA daily); PA
FREESTYLE LIBRE READER	3	PA
ONETOUCH DELICA SAFETY LANCING	1B	#; RX/OTC
RELION LANCET DEVICES 30G	1B	#; RX/OTC
RELION LANCETS	1B	#; RX/OTC
SELECT LANCETS	1B	6.66/day
SELECT LANCETS	1	6.66/day
TRUE METRIX LEVEL 3 SOLN	1B	#
Parenteral Therapy Supplies		
BD PEN NEEDLE NANO 2ND GEN	1B	QL(5 EA daily); RX/OTC
EMBECTA AUTOSHIELD DUO	1B	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO	1B	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	1B	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	1B	QL(5 EA daily); RX/OTC
SELECT INSULIN SYRINGES	1B	5/day; #
SELECT INSULIN SYRINGES	1	5/day
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ML daily); PA
EMGALITY (300 MG DOSE) SOSY	2	QL(0.1 ML daily); PA
EMGALITY SOAJ	2	QL(0.07 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
EMGALITY SOSY	2	QL(0.07 ML daily); PA
UBRELVY	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); ST
Migraine Combinations		
<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 EA daily)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
Migraine Products		
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ML daily)
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
ERGOMAR SUBL	3	QL(0.667 EA daily)
Serotonin Agonists		
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 EA daily); AL(At least 12 yrs old); ST
<i>eletriptan hydrobromide</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 EA daily); AL(At least 18 yrs old); ST
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	2	QL(0.134 ML daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>naratriptan hcl</i>	1B	QL(0.3 EA daily); AL(At least 18 yrs old)
<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 EA daily); AL(At least 6 yrs old)
<i>sumatriptan</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate TABS</i>	1B	QL(0.3 EA daily); AL(At least 18 yrs old)
<i>zolmitriptan SOLN</i>	1B	QL(0.2 EA daily); AL(At least 12 yrs old); ST
<i>zolmitriptan TABS</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>zolmitriptan TBDP</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST

MINERALS & ELECTROLYTES

Drug Name	Drug Tier	Requirements/ Limits
Bicarbonates		
<i>sodium acetate SOLN</i>	1B	
SODIUM ACETATE SOLN (<i>sodium acetate</i>)	1B	
Calcium		
<i>calcium chloride (dihydrate) SOLN</i>	1B	
Electrolyte Mixtures		
<i>dextrose in lactated ringers</i>	1B	
<i>electrolyte-148</i>	1B	
<i>electrolyte-a</i>	1B	
IONOSOL-MB IN D5W	1B	
ISOLYTE-P IN D5W	1B	
ISOLYTE-S	1B	
KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (<i>potassium chloride in dextrose & sodium chloride</i>)	1B	
KCL-LACTATED RINGERS-D5W	1B	
<i>lactated ringer's</i>	1B	
NORMOSOL-M IN D5W	1B	
NORMOSOL-R PH 7.4	1B	
PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	1B	
PLASMA-LYTE A (<i>electrolyte-a</i>)	1B	
<i>potassium chloride in dextrose 20 MEQ/L</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	1B		<i>potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML</i>	1B	
<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %</i>	1B		POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>potassium chloride</i>)	1B	
POTASSIUM CHLORIDE IN NACL 20 MEQ/L-0.45 % (<i>potassium chloride in nacl</i>)	1B		<i>potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ</i>	1B	
<i>ringer's</i>	1B		Sodium		
Fluoride			<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	1B	
<i>sodium fluoride CHEW</i>	0	QL(1 EA daily)	MISCELLANEOUS THERAPEUTIC CLASSES		
Magnesium			Chelating Agents		
<i>magnesium sulfate IJ 50 %</i>	1B		<i>penicillamine CAPS</i>	1B	PA
Phosphate			<i>penicillamine TABS</i>	1B	QL(8 EA daily)
<i>potassium phosphates 45 MMOLE/15ML</i>	1B		<i>trientine hcl 250 MG</i>	4	QL(8 EA daily); SP; PA
Potassium			Immunomodulators		
<i>potassium acetate SOLN 2 MEQ/ML</i>	1B		<i>lenalidomide 20 MG</i>	4	QL(1 EA daily); PA
<i>potassium bicarbonate TBEF</i>	1B		<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 EA daily); SP; PA
<i>potassium chloride microencapsulated crystals er</i>	1B		THALOMID	4	QL(3 EA daily); SP; PA
<i>potassium chloride CPCR</i>	1B		Immunosuppressive Agents		
<i>potassium chloride PACK PO 20 MEQ</i>	1B	PA	ATGAM	4	SP; PA
			AZATHIOPRINE SODIUM	1B	
			<i>azathioprine TABS</i>	1B	
			<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
			<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	
			<i>cyclosporine CAPS</i>	1B	
			<i>cyclosporine SOLN IV 50 MG/ML</i>	1B	
			ENSPRYNG	4	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 EA daily); SP; PA
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 EA daily); PA
<i>mycophenolate mofetil CAPS</i>	1B	
<i>mycophenolate mofetil TABS</i>	1B	
<i>mycophenolate sodium</i>	1B	
NULOJIX	4	SP; PA
PROGRAF PACK	2	PA
PROGRAF SOLN	2	
SIMULECT	3	
<i>sirolimus TABS</i>	1B	
<i>tacrolimus CAPS</i>	1B	
<i>tacrolimus SOLN 5 MG/ML</i>	1B	
THYMOGLOBULIN	4	SP; PA
Irrigation Solutions		
<i>irrigation solutions, physiological</i>	1B	
<i>lactated ringer's (irrigation)</i>	1B	
<i>ringer's irrigation</i>	1B	
<i>water for irrigation, sterile</i>	1B	
Potassium Removing Agents		
LOKELMA	3	QL(1 EA daily); PA
<i>sodium polystyrene sulfonate POWD</i>	1B	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1B	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B	
Anti-infectives - Throat		
<i>clotrimazole</i>	1B	
<i>nystatin (mouth-throat)</i>	1B	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1B	
DEBACTEROL	2	
Dental Products		
<i>stannous fluoride CONC</i>	0	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1B	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1B	
<i>pilocarpine hcl (oral)</i>	1B	
MULTIVITAMINS		
Ped MV w/ Fluoride		
<i>pediatric multivitamins w/fl CHEW</i>	1A	RX/OTC
Prenatal Vitamins		
CLASSIC PRENATAL TABS	2	QL(1 EA daily)
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	2	QL(1 EA daily)
EQL PRENATAL FORMULA TABS	2	QL(1 EA daily)
FT PRENATAL TABS	2	QL(1 EA daily)
GNP PRENATAL/FOLIC ACID TABS	2	QL(1 EA daily)
GNP PRENATAL TABS	2	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)	PRENATAL/IRON TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 EA daily)
MASONATAL TABS	2	QL(1 EA daily)	PRENATAL TABS	2	QL(1 EA daily)
M-NATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	PRENATRIX TABS	2	QL(1 EA daily); RX/OTC
MULTI PRENATAL TABS	2	QL(1 EA daily)	PRENATRYL TABS	2	QL(1 EA daily); RX/OTC
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 EA daily); RX/OTC	PX PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)
NEONATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	QC PRENATAL TABS	2	QL(1 EA daily)
NEONATAL PRENATAL TABS	2	QL(1 EA daily)	SM PRENATAL VITAMINS TABS	2	QL(1 EA daily)
NEONATAL VITAMIN TABS	2	QL(1 EA daily)	THERANATAL CORE NUTRITION TABS	2	QL(1 EA daily); RX/OTC
NIVA-PLUS TABS	2	QL(1 EA daily); RX/OTC	TRICARE TABS	2	QL(1 EA daily); RX/OTC
ONE VITE WOMENS PLUS TABS	2	QL(1 EA daily); RX/OTC	VITATHELY WITH GINGER TABS	2	QL(1 EA daily); RX/OTC
ONE VITE WOMENS TABS	2	QL(1 EA daily)	WESTAB PLUS TABS	2	QL(1 EA daily); RX/OTC
PRENATAL ONE DAILY TABS	2	QL(1 EA daily)	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
PRENATAL PLUS VITAMIN/MINERAL TABS	2	QL(1 EA daily); RX/OTC	Central Muscle Relaxants		
PRENATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	<i>baclofen TABS</i>	1B	
PRENATAL VITAMIN AND MINERAL TABS	2	QL(1 EA daily)	<i>carisoprodol TABS</i>	1B	
PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 EA daily)	<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 EA daily)
			<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 EA daily)
			<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 EA daily)
			<i>metaxalone 800 MG</i>	1B	QL(4 EA daily)
			<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
			<i>orphenadrine citrate TB12</i>	1B	QL(2 EA daily)
			<i>tizanidine hcl CAPS</i>	1B	
			<i>tizanidine hcl TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
Direct Muscle Relaxants		
<i>dantrolene sodium CAPS</i>	1B	QL(4 EA daily)
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	
<i>olopatadine hcl (nasal)</i>	1B	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ML daily)
Nasal Steroids		
<i>budesonide (nasal)</i>	1B	
<i>flunisolide (nasal)</i>	1B	1 package(s) per fill retail
<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ML per 30 day(s) retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 GM daily); RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1B	
XHANCE EXHU	3	PA
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	3	
Neuromuscular Blocking Agent - Neurotoxins		
XEOMIN	3	PA
Nondepolarizing Muscle Relaxants		
<i>atracurium besylate 50 MG/5ML, 100 MG/10ML</i>	3	PA
NUTRIENTS		

Drug Name	Drug Tier	Requirements/ Limits
Proteins		
CLINIMIX E/DEXTROSE (5/20)	3	
CLINIMIX/DEXTROSE (4.25/10)	3	
CLINIMIX/DEXTROSE (4.25/5)	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1B	
<i>brimonidine tartrate-timolol maleate</i>	1B	
<i>carteolol hcl (ophth)</i>	1B	
<i>dorzolamide hcl-timolol maleate</i>	1B	
<i>levobunolol hcl 0.5 %</i>	1B	
<i>timolol maleate (ophth) SOLG</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B	
Cycloplegic Mydriatics		
<i>tropicamide SOLN 1 %</i>	1B	
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ML daily)
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B	
Ophthalmic Adrenergic Agents		
<i>apraclonidine hcl</i>	1B	
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B	
IOPIDINE	3	
Ophthalmic Anti-infectives		
<i>bacitracin (ophthalmic)</i>	3	
BESIVANCE	3	PA
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>erythromycin (ophth)</i>	1B		<i>neomycin-polymy-dexameth OINT</i>	1B	
<i>gatifloxacin (ophth)</i>	1B		<i>neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %</i>	1B	
<i>gentamicin sulfate (ophth) SOLN</i>	1B		<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ML daily)
<i>levofloxacin (ophth) 0.5 %</i>	1B		PRED MILD	3	PA
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B		<i>prednisolone acetate (ophth)</i>	1B	
NATACYN	2		PREDNISOLONE SODIUM PHOSPHATE	3	
<i>neomycin-bacitracin zn-polymyxin</i>	1B		<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA
<i>ofloxacin (ophth)</i>	1B		<i>tobramycin-dexamethasone SUSP</i>	1B	
<i>polymyxin b-trimethoprim</i>	1B		ZYLET	3	PA
<i>sulfacetamide sodium (ophth) SOLN</i>	1B		Ophthalmic Surgical Aids		
<i>tobramycin (ophth) SOLN</i>	1B		HEALON PRO SOSY	3	PA
<i>trifluridine</i>	1B		PROVISC SOSY	3	PA
ZIRGAN GEL	2		Ophthalmics - Misc.		
Ophthalmic Immunomodulators			ALOCRIL	3	PA
<i>cyclosporine (ophth) EMUL</i>	3	PA	ALOMIDE	3	PA
Ophthalmic Local Anesthetics			<i>azelastine hcl (ophth)</i>	1B	
<i>proparacaine hcl</i>	1B		<i>bepotastine besilate</i>	3	PA
Ophthalmic Steroids			<i>brinzolamide</i>	1B	
ALREX SUSP (<i>loteprednol etabonate</i>)	3	PA	<i>bromfenac sodium (ophth)</i>	1B	
<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ML daily)	<i>cromolyn sodium (ophth)</i>	1B	
<i>difluprednate</i>	1B	PA	CYSTARAN	2	QL(2.143 ML daily); PA
<i>fluorometholone (ophth) SUSP</i>	1B		<i>diclofenac sodium (ophth)</i>	1B	
FML FORTE SUSP	3	PA	<i>dorzolamide hcl</i>	1B	
LOTEMAX OINT	3	PA	<i>epinastine hcl (ophth)</i>	1B	
<i>loteprednol etabonate GEL</i>	1B	PA	<i>flurbiprofen sodium</i>	1B	
<i>loteprednol etabonate SUSP</i>	1B	PA	<i>ketorolac tromethamine (ophth)</i>	1B	
MAXIDEX SUSP OP	3	PA	<i>ketotifen fumarate (ophth) 0.035 %</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
LASTACAFT	3	PA
NEVANAC	3	QL(0.2 ML daily); ST
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ML daily)
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	3	
<i>latanoprost SOLN</i>	1B	
<i>tafluprost</i>	1B	
<i>travoprost SOLN</i>	1B	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1B	QL(0.5 ML daily)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	1B	
<i>ofloxacin (otic)</i>	1B	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	1B	
<i>ciprofloxacin-fluocinolone acetonide</i>	1B	QL(0.5 EA daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1B	QL(2 ML daily)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1B	
Otic Steroids		
<i>fluocinolone acetonide (otic)</i>	1B	
<i>hydrocortisone w/acetic acid</i>	1B	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		

Drug Name	Drug Tier	Requirements/ Limits
GAMMAGARD 30 GM/300ML	4	PA
GAMMAGARD 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMMAGARD S/D LESS IGA SOLR	4	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMUNEX-C	4	SP; PA
Monoclonal Antibodies		
BEYFORTUS	0	
Passive Immunizing Agents - Combinations		
HYQVIA	4	PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	
<i>amoxicillin TABS</i>	1B	
<i>ampicillin sodium IV 10 GM</i>	1B	
<i>ampicillin CAPS 500 MG</i>	1B	
Natural Penicillins		
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B	
<i>penicillin g potassium 5000000 UNIT</i>	1B	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium SOLR</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>penicillin v potassium TABS</i>	1B	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	1B	
<i>amoxicillin & pot clavulanate SUSR</i>	1B	
<i>amoxicillin & pot clavulanate TABS</i>	1B	
<i>amoxicillin & pot clavulanate TB12</i>	1B	
<i>ampicillin & sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	1B	
<i>piperacillin sodium-tazobactam sodium</i>	1B	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1B	
<i>naftillin sodium IV 10 GM</i>	1B	
<i>oxacillin sodium IV 10 GM</i>	1B	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 10 MG</i>	1A	
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B	
<i>megestrol acetate (appetite)</i>	1B	PA
<i>norethindrone acetate TABS</i>	0	
<i>progesterone CAPS</i>	1B	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1B	
<i>disulfiram</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>lofexidine hcl</i>	1B	QL(224 EA per 14 day(s) retail); PA
LUCEMYRA (<i>lofexidine hcl</i>)	3	QL(224 EA per 14 day(s) retail); PA
Antidementia Agents		
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 EA daily)
<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 EA daily)
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 EA daily)
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 EA daily)
<i>galantamine hydrobromide CP24</i>	1B	QL(1 EA daily)
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ML daily)
<i>galantamine hydrobromide TABS</i>	1B	QL(2 EA daily)
<i>memantine hcl TABS</i>	1B	QL(2 EA daily)
<i>memantine hcl TABS</i>	1B	
<i>rivastigmine tartrate CAPS</i>	1B	
Combination Psychotherapeutics		
<i>chlorthalidone- amitriptyline</i>	1B	
<i>perphenazine-amitriptyline</i>	1B	QL(4 EA daily)
Fibromyalgia Agents		
SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA
SAVELLA TABS	2	QL(2 EA daily); PA
Movement Disorder Drug Therapy		
AUSTEDO XR PATIENT TITRATION TEPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA

Drug Name	Drug Tier	Requirements/ Limits
AUSTEDO XR TB24	4	QL(1 EA daily); PA
AUSTEDO TABS	4	QL(4 EA daily); PA
INGREZZA CAPS	4	QL(1 EA daily); PA
INGREZZA CPPK	4	1 max fill(s) per 180 day(s) retail; PA
INGREZZA CPSP	4	QL(1 EA daily); PA
<i>tetrabenazine</i>	4	QL(3 EA daily); SP; PA
Multiple Sclerosis Agents		
AVONEX PEN AJKT	4	QL(0.0714 EA daily); SP; PA
AVONEX PREFILLED PSKT	4	QL(0.0714 EA daily); SP; PA
BETASERON KIT	4	QL(0.5 EA daily); SP; PA
<i>dalfampridine</i>	4	QL(2 EA daily); SP; PA
<i>dimethyl fumarate CDPK</i>	1B	QL(2 EA daily)
<i>dimethyl fumarate CPDR</i>	1B	QL(2 EA daily)
<i>fingolimod hcl</i>	4	QL(1 EA daily)
<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ML daily)
<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ML daily)
LEMTRADA	4	QL(1.2 ML daily); PA
PLEGRIDY STARTER PACK SOAJ	4	QL(0.036 ML daily); PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ML daily); PA
PLEGRIDY SOAJ	4	QL(0.036 ML daily); PA
PLEGRIDY SOSY SC	4	QL(0.036 ML daily); PA
REBIF REBIDOSE TITRATION PACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ML daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF SOSY	4	QL(0.214 ML daily); SP; PA
<i>teriflunomide</i>	4	QL(1 EA daily)
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 EA daily); PA
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 EA daily); PA
Pseudobulbar Affect (PBA) Agents		
NUDEXTA	3	QL(2 EA daily); PA
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1B	
<i>pimozide</i>	1B	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 EA daily)
<i>nicotine polacrilex GUM</i>	0	
<i>nicotine polacrilex LOZG</i>	0	
NICOTINE KIT	0	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 EA daily)
NICOTROL NS SOLN	0	
NICOTROL INHA	0	
<i>varenicline tartrate TABS</i>	0	QL(2 EA daily)
<i>varenicline tartrate TBPK</i>	0	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
PROLASTIN-C SOLN	4	PA
PROLASTIN-C SOLR	4	PA

Drug Name	Drug Tier	Requirements/ Limits
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 EA daily); SP; PA
ORKAMBI PACK	4	QL(2 EA daily); PA
ORKAMBI TABS	4	QL(4 EA daily); PA
PULMOZYME	4	QL(2.5 ML daily); SP; PA
TRIKAFTA TBPK	4	QL(3 EA daily); PA
Pulmonary Fibrosis Agents		
OFEV	4	QL(2 EA daily); PA
<i>pirfenidone CAPS</i>	4	QL(1 EA daily); PA
<i>pirfenidone TABS 534 MG</i>	4	QL(3 EA daily); PA
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	QL(1 EA daily); PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	1B	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Fluorocyclines		
XERAVA	4	PA
Glycylcyclines		
<i>tigecycline</i>	1B	
Tetracyclines		
<i>demeclocycline hcl TABS</i>	1B	
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 EA daily)
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>doxycycline hyclate CAPS</i>	1B	QL(2 EA daily)
<i>doxycycline hyclate SOLR</i>	1B	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 EA daily)
<i>minocycline hcl CAPS</i>	1B	QL(3 EA daily)
<i>minocycline hcl TABS</i>	1B	QL(3 EA daily)
<i>tetracycline hcl CAPS</i>	1B	QL(8 EA daily)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	1B	
<i>propylthiouracil</i>	1B	
Thyroid Hormones		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 EA daily)
EVEXITHROID TABS 180 MG	2	QL(1 EA daily)
<i>levothyroxine sodium TABS</i>	1B	
<i>liothyronine sodium SOLN</i>	1B	
<i>liothyronine sodium TABS</i>	1B	
NP THYROID TABS	1B	QL(1 EA daily)
SYNTHROID TABS (<i>levothyroxine sodium</i>)	2	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	0	
ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	0	

Drug Name	Drug Tier	Requirements/ Limits
BOOSTRIX SUSP	0	
BOOSTRIX SUSY	0	
DAPTACEL	0	
INFANRIX	0	
KINRIX SUSY	0	
PEDIARIX SUSY	0	
PENTACEL	0	
QUADRACEL SUSP	0	
QUADRACEL SUSY	0	
TDVAX SUSP	0	
TENIVAC SUSP 2 LFU-5 LFU	0	
TETANUS-DIPHThERIA TOXOIDS TD SUSP	0	
VAXELIS SUSP	0	
VAXELIS SUSY	0	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1B	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B	
<i>dicyclomine hcl CAPS</i>	1B	
<i>dicyclomine hcl SOLN PO</i>	1B	
<i>dicyclomine hcl TABS</i>	1B	
<i>glycopyrrolate SOLN IJ 4 MG/20ML</i>	1B	
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 EA daily)
<i>glycopyrrolate TABS 1 MG</i>	1B	
<i>methscopolamine bromide</i>	1B	
H-2 Antagonists		
<i>cimetidine TABS</i>	1B	RX/OTC
<i>famotidine in nacl SOLN</i>	1B	
<i>famotidine SOLN 40 MG/4ML, 200 MG/20ML</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>famotidine SOLN 20 MG/2ML</i>	1A	
<i>famotidine SUSR</i>	1B	QL(10 ML daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1B	RX/OTC
<i>nizatidine CAPS</i>	1B	
Misc. Anti-Ulcer		
<i>sucralfate SUSP</i>	1B	QL(40 ML daily)
<i>sucralfate TABS</i>	1B	QL(4 EA daily)
Proton Pump Inhibitors		
<i>dexlansoprazole</i>	3	QL(1 EA daily)
<i>esomeprazole magnesium CPDR 20 MG</i>	1B	QL(2 EA daily); RX/OTC
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 EA daily)
<i>esomeprazole magnesium TBEC</i>	1B	QL(2 EA daily)
<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 EA daily); RX/OTC
<i>lansoprazole CPDR 30 MG</i>	1B	
NEXIUM 24HR TBEC 20 MG	1B	QL(2 EA daily)
<i>omeprazole magnesium CPDR</i>	1B	QL(4 EA daily)
<i>omeprazole CPDR</i>	1B	QL(2 EA daily)
<i>omeprazole TBEC</i>	1B	QL(2 EA daily)
<i>pantoprazole sodium TBEC 40 MG</i>	1B	
<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 EA daily)
<i>rabeprazole sodium TBEC</i>	3	QL(1 EA daily)
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	1B	QL(4 EA daily)
Ulcer Therapy Combinations		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail	MENACTRA	0	
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 EA daily); RX/OTC	MENQUADFI 0.5 ML	0	
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms			MENVEO SOLN	0	
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)			MENVEO SOLR	0	
<i>darifenacin hydrobromide</i>	1B	QL(1 EA daily)	PEDVAX HIB SUSP	0	
<i>fesoterodine fumarate</i>	1B	QL(1 EA daily)	PENBRAYA	0	
<i>oxybutynin chloride SOLN</i>	1B		PENMENVY SUSR IM	0	AL(At least 10 yrs old - Up to 25 yrs old)
<i>oxybutynin chloride TABS 5 MG</i>	1B		PNEUMOVAX 23 SOLN	0	
<i>oxybutynin chloride TB24</i>	1B		PNEUMOVAX 23 SOSY	0	
<i>solifenacin succinate TABS</i>	1B	QL(1 EA daily)	PREVNAR 13	0	
<i>tolterodine tartrate CP24</i>	1B	QL(1 EA daily)	PREVNAR 20	0	1 max fill(s) per 999 day(s) retail
<i>tolterodine tartrate TABS</i>	1B		TRUMENBA 0.5 ML	0	
<i>trospium chloride CP24</i>	1B	QL(1 EA daily)	VAXNEUVANCE	0	4 max fill(s) per 999 day(s) retail
<i>trospium chloride TABS</i>	1B	QL(3 EA daily)	Viral Vaccines		
Urinary Antispasmodics - Cholinergic Agonists			ABRYSVO	0	
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 EA daily)	AFLURIA PRESERVATIVE FREE SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
<i>bethanechol chloride 25 MG</i>	1B		AFLURIA QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail
Urinary Antispasmodics - Direct Muscle Relaxants			AFLURIA QUADRIVALENT SUSY 0.5 ML	0	1 max fill(s) per 180 day(s) retail
<i>flavoxate hcl</i>	1B		AFLURIA SUSP	0	1 max fill(s) per 180 day(s) retail
VACCINES			AREXVY	0	
Bacterial Vaccines			AUDENZ EMUL	0	
ACTHIB SOLR IM	0		AUDENZ PRSY	0	
BEXSERO 0.5 ML	0		COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	0	
CAPVAXIVE	0		COMIRNATY SUSP	0	
HIBERIX SOLR IJ	0		COMIRNATY SUSY	0	

Drug Name	Drug Tier	Requirements/ Limits
ENGERIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
ENGERIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
FLUAD	0	1 max fill(s) per 180 day(s) retail
FLUAD QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail
FLUARIX QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail
FLUARIX SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUBLOK QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUBLOK SOSY	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX SUSP	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX SUSY	0	1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits
FLULAVAL QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail
FLULAVAL SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUMIST	0	1 max fill(s) per 180 day(s) retail
FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUZONE HIGH-DOSE QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail
FLUZONE HIGH-DOSE SUSY	0	1 max fill(s) per 180 day(s) retail
FLUZONE QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail
FLUZONE QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail
FLUZONE SUSP	0	1 max fill(s) per 180 day(s) retail
FLUZONE SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
GARDASIL 9 SUSP 0.5 ML	0	3 max fill(s) per 365 day(s) retail
GARDASIL 9 SUSY 0.5 ML	0	3 max fill(s) per 365 day(s) retail
HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	0	
HEPLISAV-B SOSY	0	2 max fill(s) per 292 day(s) retail; 2 max fill(s) per 292 day(s) mail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
IPOL IJ	0		ROTARIX SUSP	0	
JYNNEOS	0		ROTATEQ SOLN	0	
M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail	SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL (At least 18 yrs old)
MNEXSPIKE SUSY 10 MCG/0.2ML	0		SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0	
MODERNA COVID-19 BIVALENT	0		SPIKEVAX SUSP	0	
MODERNA COVID-19 VAC 6M-11Y SUSP	0		SPIKEVAX SUSY	0	
MODERNA COVID-19 VAC 6M-11Y SUSY	0		TWINRIX SUSY	0	
MODERNA COVID-19 VACCINE SUSP	0		VAQTA	0	
MRESVIA	0		VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	0	
NOVAVAX COVID-19 VACCINE SUSP	0		VARIVAX SUSR	0	2 max fill(s) per 365 day(s) retail
NOVAVAX COVID-19 VACCINE SUSY	0		VAGINAL AND RELATED PRODUCTS		
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0		Spermicides		
PFIZER COVID-19 VAC BIVALENT	0		TODAY SPONGE MISC	0	
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0		VCF VAGINAL CONTRACEPTIVE FILM	0	
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0		Vaginal Anti-infectives		
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	0		<i>clindamycin phosphate vaginal CREA</i>	1B	
PFIZER-BIONTECH COVID-19 VACC SUSP	0		<i>clotrimazole vaginal CREA 1 %</i>	1B	
PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail	GYNAZOLE-1	3	QL(5 GM per 30 day(s) retail; 5 GM per 30 days mail)
PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail	<i>metronidazole vaginal</i>	1B	
PROQUAD SUSR	0	2 max fill(s) per 365 day(s) retail	<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
RECOMBIVAX HB SUSP	0		<i>terconazole vaginal CREA</i>	1B	
RECOMBIVAX HB SUSY	0		<i>terconazole vaginal CREA</i>	1B	
			<i>terconazole vaginal SUPP</i>	1B	
			Vaginal Anti-inflammatory Agents		
			<i>hydrocortisone vaginal</i>	1B	QL(15.15 GM daily)

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Drug Name	Drug Tier	Requirements/ Limits
Vaginal Contraceptive - pH Modulators		
PHEXX	0	PV
PHEXXI	0	PV
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	1B	QL(2 GM daily)
<i>estradiol vaginal TABS</i>	1B	
ESTRING RING 7.5 MCG/24HR	3	
FEMRING	3	
PREMARIN	2	QL(1.5 GM daily)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) SOAJ</i>	1B	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Vasopressors		
<i>midodrine hcl</i>	1B	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS</i>	1A	
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0	
<i>ergocalciferol CAPS</i>	0	
<i>ergocalciferol SOLN PO 200 MCG/ML</i>	1B	
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		
<i>ascorbic acid SOLN IJ</i>	3	QL(0.4 ML daily)
NIACIN ER TBCR	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>niacinamide TABS 100 MG</i>	1B	
<i>niacinamide TABS 500 MG</i>	1A	
<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>niacin TABS</i>	1A	
<i>niacin TBCR</i>	1A	

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ALVESCO9	amoxicillin & pot clavulanate TB12 61	ANNOVERA36
alvimopan47	amoxicillin CAPS60	ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (umeclidinium-vilanterol) 10
amantadine hcl CAPS 28	amoxicillin CHEW 125 MG, 250 MG . 60	ANZEMET TABS 50 MG17
amantadine hcl SOLN 28	amoxicillin SUSR 125 MG/5ML60	APIDRA SOLN16
amantadine hcl TABS28	amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML60	APIDRA SOLOSTAR SOPN16
ambrisentan34	amoxicillin TABS60	apomorphine hydrochloride SOCT 28
amcinonide CREA40	amoxicillin-clarithromycin w/ lansoprazole THPK 65	apraclonidine hcl 58
amcinonide LOTN40	amphetamine sulfate TABS1	aprepitant CAPS 40 MG, 125 MG . 17
amcinonide OINT40	amphetamine-dextroamphetamine CP24 15 MG1	aprepitant CAPS 80 MG 17
amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML 2		aprepitant CAPS 17
amiloride & hydrochlorothiazide ..43		APTiom 200 MG, 400 MG, 600 MG, 800 MG 17
amiloride hcl TABS44		
aminocaproic acid TABS50		

800 MG (eslicarbazepine acetate) .12	atazanavir sulfate CAPS 200 MG .30	azelastine hcl (ophth) 59
APTIVUS CAPS30	atenolol & chlorthalidone20	azelastine hcl58
ARANESP (ALBUMIN FREE) SOLN 25 MCG/ML49	atenolol TABS32	AZELEX 37
ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML49	ATGAM55	azithromycin PACK 51
ARANESP (ALBUMIN FREE) SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML ...49	atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG1	azithromycin SOLR 51
ARCALYST3	atomoxetine hcl 60 MG, 80 MG, 100 MG1	azithromycin SUSR51
AREXVY65	atorvastatin calcium TABS19	azithromycin TABS 250 MG 51
arformoterol tartrate10	atovaquone21	azithromycin TABS 500 MG 51
ARIKAYCE2	atovaquone-proguanil hcl22	azithromycin TABS 600 MG 51
aripiprazole SOLN PO30	atracurium besylate 50 MG/5ML, 100 MG/10ML58	aztreonam 1 GM22
aripiprazole TABS30	atropine sulfate SOSY IJ 0.25 MG/5ML64	bacitracin (ophthalmic)58
armodafinil1	ATROVENT HFA9	baclofen TABS57
ARMOUR THYROID TABS63	AUDENZ EMUL65	balsalazide disodium CAPS 47
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (fluticasone furoate (inhalation))9	AUDENZ PRSY65	BALVERSA26
arsenic trioxide 10 MG/10ML28	AURANOFIN 3 MG3	BANZEL TABS 200 MG (rufinamide) 12
ARZERRA24	AUSTEDO TABS62	BANZEL TABS 400 MG (rufinamide) 12
ascorbic acid SOLN IJ68	AUSTEDO XR PATIENT TITRATION TEPK61	BAXDELA SOLR46
asenapine maleate 2.5 MG29	AUSTEDO XR TB2462	BAXDELA TABS46
asenapine maleate 5 MG, 10 MG .29	avanafil33	BD PEN NEEDLE NANO 2ND GEN . 53
aspirin CHEW5	AVERI TABS PO35	BELSOMRA50
aspirin TABS 325 MG5	AVONEX PEN AJKT62	benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG ...20
aspirin TBEC 325 MG5	AVONEX PREFILLED PSKT62	benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG ..20
aspirin TBEC 81 MG5	AYVAKIT25	benazepril hcl19
aspirin-dipyridamole49	azacitidine SUSR23	bendamustine hcl SOLR23
atazanavir sulfate CAPS 150 MG, 300 MG30	AZATHIOPRINE SODIUM55	BENEFIX KIT48
	azathioprine TABS55	BENZEPRO CREAMY WASH LIQD . 37
	azelaic acid GEL42	

BENZEPRO FOAM 5.3 %	37	betaxolol hcl (ophth) SOLN	58	BREZTRI AEROSPHERE	10
benzonatate 100 MG	37	betaxolol hcl	32	BRILINTA 60 MG, 90 MG (ticagrelor)	49
benzonatate 150 MG	37	bethanechol chloride 25 MG	65	brimonidine tartrate (topical)	42
benzonatate 200 MG	37	bethanechol chloride 5 MG, 10 MG, 50 MG	65	brimonidine tartrate 0.15 %, 0.2 %	58
benzoyl peroxide FOAM 5.3 %, 9.8 %	37	bexarotene (topical)	39	brimonidine tartrate-timolol maleate	58
benzoyl peroxide GEL 10 %	37	bexarotene	28	brinzolamide	59
benzoyl peroxide GEL 5 %	37	BEXSERO 0.5 ML	65	BRIVIACT SOLN PO 10 MG/ML	12
benzoyl peroxide LIQD 4 %, 10 %	37	BEYFORTUS	60	BRIVIACT TABS	12
benzoyl peroxide-erythromycin GEL	37	bicalutamide	25	bromfenac sodium (ophth)	59
benztropine mesylate SOLN	28	BIJUVA	46	bromocriptine mesylate CAPS	28
benztropine mesylate TABS	28	BIKTARVY	30	bromocriptine mesylate TABS 2.5 MG	28
bepotastine besilate	59	bimatoprost SOLN	60	BRUKINSA	26
BESIVANCE	58	bisacodyl SUPP	50	budesonide (inhalation) SUSP	9
betaine	45	bisacodyl TBEC	50	budesonide (intrarectal)	7
betamethasone dipropionate (topical) CREA	40	bisoprolol & hydrochlorothiazide	20	budesonide (nasal)	58
betamethasone dipropionate (topical) LOTN	40	bisoprolol fumarate	32	budesonide CPEP	36
betamethasone dipropionate (topical) OINT	40	bleomycin sulfate 15 UNIT	25	budesonide-formoterol fumarate dihydrate	10
betamethasone dipropionate augmented CREA	40	BOOSTRIX SUSP	64	bumetanide SOLN 0.25 MG/ML	44
betamethasone dipropionate augmented LOTN	40	BOOSTRIX SUSY	64	bumetanide TABS	44
betamethasone dipropionate augmented OINT	40	bortezomib SOLR IJ	26	buprenorphine hcl SOLN	7
betamethasone valerate CREA	40	BORTEZOMIB SOLR IV 3.5 MG	26	buprenorphine hcl SUBL	7
betamethasone valerate FOAM	40	bosentan TABS 125 MG	34	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	7
betamethasone valerate LOTN	40	bosentan TABS 62.5 MG	34	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG	7
betamethasone valerate OINT	41	bosentan TBSO 32 MG	34	buprenorphine hcl-naloxone hcl dihydrate SUBL	7
BETASERON KIT	62	BOSULIF TABS 100 MG, 500 MG	26	buprenorphine PTWK	7
		BOSULIF TABS 400 MG	26		
		BRAFTOVI 75 MG	26		
		BREO ELLIPTA (fluticasone furoate-vilanterol)	10		
		BREO ELLIPTA	10		

bupropion hcl (smoking deterrent) 62	calcipotriene-betamethasone dipropionate OINT 41	carbidopa28
bupropion hcl TABS13	calcipotriene-betamethasone dipropionate SUSP 41	carbidopa-levodopa TABS28
bupropion hcl TB12 13	calcitonin (salmon) NA 44	carbidopa-levodopa TBCR 29
bupropion hcl TB24 150 MG, 300 MG13	calcitriol (topical)39	carbidopa-levodopa TBDP 29
buspirone hcl 5 MG8	calcitriol CAPS 45	carbidopa-levodopa-entacapone ..28
buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG8	calcitriol SOLN IV 45	carbinoxamine maleate SOLN18
busulfan SOLN23	calcium acetate (phosphate binder) CAPS47	carbinoxamine maleate TABS 4 MG . 18
butalbital-acetaminophen TABS 50 MG-325 MG5	calcium acetate (phosphate binder) TABS47	carboplatin SOLN 50 MG/5ML23
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG 5	calcium chloride (dihydrate) SOLN 54	carisoprodol TABS57
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG 5	calcium polycarbophil TABS50	carmustine23
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG5	CALQUENCE 26	carteolol hcl (ophth)58
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG6	candesartan cilexetil20	carvedilol 32
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG6	candesartan cilexetil- hydrochlorothiazide 20	carvedilol phosphate32
butalbital-aspirin-caffeine CAPS5	capecitabine23	caspofungin acetate17
butalbital-aspirin-caffeine w/cod6	CAPRELSA26	CAYA DPRH51
butenafine hcl 38	captopril 12.5 MG19	CAYSTON22
butorphanol tartrate IJ 1 MG/ML, 2 MG/ML7	captopril 25 MG, 50 MG, 100 MG .19	cefaclor CAPS 34
butorphanol tartrate NA 10 MG/ML .7	CAPVAXIVE65	cefaclor SUSR 250 MG/5ML 34
cabergoline45	carbamazepine CHEW 100 MG ...12	cefadroxil CAPS 34
CABOMETYX TABS26	carbamazepine CP12 100 MG12	cefadroxil SUSR 34
calcipotriene CREA39	carbamazepine CP12 200 MG12	cefadroxil TABS34
calcipotriene OINT39	carbamazepine CP12 300 MG12	cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG 34
calcipotriene SOLN 39	carbamazepine SUSP 12	cefdinir CAPS35
	carbamazepine TABS12	cefdinir SUSR35
	carbamazepine TB12 100 MG, 400 MG 12	cefepime hcl SOLR IV 2 GM35
	carbamazepine TB12 200 MG12	cefixime CAPS35
		cefixime SUSR35
		cefotetan disodium IJ 1 GM, 2 GM 34
		cefoxitin sodium IV 1 GM, 2 GM ...34

cefpodoxime proxetil SUSR35	chlorpromazine hcl TABS30	ciprofloxacin-fluocinolone acetonide . 60
cefpodoxime proxetil TABS35	chlorthalidone 25 MG, 50 MG 44	cisplatin SOLN 100 MG/100ML23
cefprozil SUSR34	chlorzoxazone TABS 500 MG57	citalopram hydrobromide SOLN ... 13
cefprozil TABS34	chlorzoxazone TABS 750 MG57	citalopram hydrobromide TABS ... 13
ceftazidime IJ 1 GM, 6 GM 35	CHOLBAM46	clarithromycin SUSR51
ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG35	cholecalciferol CAPS68	clarithromycin TABS51
ceftriaxone sodium IJ 250 MG35	cholecalciferol TABS 10 MCG, 400 UNIT68	clarithromycin TB2451
cefuroxime axetil TABS34	cholestyramine light PACK 19	CLASSIC PRENATAL TABS 56
cefuroxime sodium IJ 750 MG35	cholestyramine light POWD19	clemastine fumarate SYRP 18
celecoxib 4	cholestyramine PACK19	clemastine fumarate TABS 2.68 MG . 18
cephalexin CAPS 34	cholestyramine POWD19	CLIMARA PRO46
cephalexin SUSR34	choline fenofibrate19	clindamycin hcl22
CERDELGA49	CHORIONIC GONADOTROPIN IM 44	clindamycin palmitate hydrochloride . 22
CEREZYME 400 UNIT49	ciclopirox GEL38	clindamycin phosphate (topical) FOAM37
cetirizine hcl TABS18	ciclopirox olamine CREA38	clindamycin phosphate (topical) GEL 37
cevimeline hcl 56	ciclopirox olamine SUSP38	clindamycin phosphate (topical) LOTN37
CHEMET 17	ciclopirox SHAM 38	clindamycin phosphate (topical) SOLN37
CHEMSTRIP K STRP43	ciclopirox SOLN38	clindamycin phosphate (topical) SWAB38
chloramphenicol sodium succinate 21	cidofovir31	clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML 22
chlordiazepoxide hcl CAPS 8	cilostazol49	clindamycin phosphate vaginal CREA67
chlordiazepoxide hcl-clidinium bromide64	CIMDUO30	clindamycin phosphate-benzoyl peroxide (refrigerate)38
chlordiazepoxide-amitriptyline61	cimetidine TABS 64	
chlorhexidine gluconate (mouth- throat)56	cinacalcet hcl45	
chloroquine phosphate TABS 250 MG 22	ciprofloxacin hcl (ophth) SOLN58	
chloroquine phosphate TABS 500 MG 22	ciprofloxacin hcl (otic)60	
chlorpromazine hcl SOLN30	ciprofloxacin hcl TABS46	
	ciprofloxacin in d5w 200 MG/100ML . 46	
	ciprofloxacin-dexamethasone60	

clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	38	clotrimazole vaginal CREA 1 %	67	COMPLERA 200 MG-300 MG-25 MG (emtricitabine-rilpivirine-tenofovir disoproxil fumarate)	30
clindamycin phosphate-tretinoin ..	38	clotrimazole w/ betamethasone CREA	38	CONTRACE	1
CLINIMIX E/DEXTROSE (5/20) ...	58	clotrimazole w/ betamethasone LOTN	38	COPIKTRA	26
CLINIMIX/DEXTROSE (4.25/10) ..	58	clozapine TABS	29	CORDRAN TAPE	41
CLINIMIX/DEXTROSE (4.25/5) ...	58	clozapine TBDP 100 MG	29	CORTISPORIN-TC	60
clobazam SUSP	11	clozapine TBDP 12.5 MG, 150 MG 29		COSENTYX (300 MG DOSE) SOSY .	39
clobazam TABS	11	clozapine TBDP 25 MG	29	COSENTYX SENSOREADY (300 MG) SOAJ	39
clobetasol propionate CREA 0.05 % .	41	COARTEM	22	COSENTYX SENSOREADY PEN SOAJ	40
clobetasol propionate emollient base 0.05 %	41	codeine sulfate TABS 30 MG	5	COSENTYX SOSY 150 MG/ML ...	40
clobetasol propionate FOAM	41	CODEINE SULFATE TABS	5	COSENTYX SOSY 75 MG/0.5ML .	40
clobetasol propionate GEL 0.05 %	41	colchicine TABS	48	COSENTYX UNOREADY SOAJ ..	40
clobetasol propionate OINT 0.05 %	41	colchicine w/ probenecid	48	CREON CPEP	43
clobetasol propionate SOLN 0.05 % .	41	colesevelam hcl PACK	19	CRESEMBA CAPS 186 MG	18
clocortolone pivalate	41	colesevelam hcl TABS	19	cromolyn sodium (ophth)	59
clofarabine	23	colestipol hcl GRAN	19	cromolyn sodium NEBU	9
clomiphene citrate TABS	44	colestipol hcl PACK	19	crotamiton LOTN	42
clomipramine hcl	14	colestipol hcl TABS	19	CVS PRENATAL TABS 100 MG-2.6	
clonazepam TABS	11	COMBIPATCH PTTW	46	MG-800 MCG-400 UNIT-4 MCG-1.7	
clonidine hcl (adhd) TB12	1	COMBIVENT RESPIMAT AERS ..	10	MG-18 MG-27 MG-1.5 MG-25 MG-	
clonidine hcl TABS	20	COMETRIQ (100 MG DAILY DOSE) KIT	26	263 MG-11 UNIT-4000 UNIT	56
clonidine PTWK	20	COMETRIQ (140 MG DAILY DOSE) KIT	26	cyanocobalamin SOLN IJ 1000 MCG/ML	49
clopidogrel bisulfate 300 MG	49	COMETRIQ (60 MG DAILY DOSE) KIT	26	cyclobenzaprine hcl TABS 5 MG, 10	
clopidogrel bisulfate 75 MG	49	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	65	MG	57
clorazepate dipotassium TABS	8	COMIRNATY SUSP	65	cyclophosphamide CAPS	23
clotrimazole (topical) CREA	38	COMIRNATY SUSY	65	cyclophosphamide SOLR IJ	23
clotrimazole (topical) SOLN	38			cycloserine	23
clotrimazole	56			cyclosporine (ophth) EMUL	59

cyclosporine CAPS	55	DAPTACEL	64	desogestrel & ethinyl estradiol	35
cyclosporine modified (for microemulsion) CAPS	55	daptomycin 500 MG	21	desogestrel-ethinyl estradiol (biphasic)	35
cyclosporine modified (for microemulsion) SOLN	55	darifenacin hydrobromide	65	desogestrel-ethinyl estradiol (triphasic)	35
cyclosporine SOLN IV 50 MG/ML ..	55	darunavir TABS	30	desonide CREA	41
CYLTEZO (2 PEN) AJKT	2	dasatinib	26	desonide LOTN	41
CYLTEZO (2 SYRINGE) PSKT 10 MG/0.2ML, 40 MG/0.4ML	2	DAURISMO	24	desonide OINT	41
CYLTEZO (2 SYRINGE) PSKT 20 MG/0.4ML, 40 MG/0.8ML	3	DEBACTEROL	56	desoximetasone CREA 0.25 %	41
CYLTEZO-CD/UC/HS STARTER AJKT	3	decitabine	23	desoximetasone GEL	41
CYLTEZO-PSORIASIS/UV STARTER AJKT	3	deferasirox PACK	17	desoximetasone OINT 0.25 %	41
cyproheptadine hcl SYRP	18	deferasirox TABS	17	desvenlafaxine succinate	14
cyproheptadine hcl TABS	18	deferasirox TBSO	17	dexamethasone ELIX	36
CYSTAGON CAPS	47	deflazacort SUSP	36	DEXAMETHASONE INTENSOL CONC	36
CYSTARAN	59	deflazacort TABS	36	dexamethasone sodium phosphate (ophth)	59
cytarabine SOLN	23	DELSTRIGO	30	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	36
dabigatran etexilate mesylate CAPS . 11		demeclocycline hcl TABS	63	dexamethasone sodium phosphate SOSY IJ 4 MG/ML	36
dacarbazine SOLR 200 MG	28	DEPO-ESTRADIOL	46	dexamethasone SOLN	36
dactinomycin	25	DEPO-MEDROL SUSP	36	dexamethasone TABS 0.5 MG, 0.75 MG	36
dalfampridine	62	DEPO-SUBQ PROVERA 104 SUSY SC	36	dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG	36
danazol CAPS	7	desipramine hcl TABS	14	dexchlorpheniramine maleate SOLN . 18	
dantrolene sodium CAPS	58	desloratadine TABS	18	dexlansoprazole	64
dapagliflozin propanediol	16	desloratadine TBDP 2.5 MG	18	dexmethylphenidate hcl CP24	1
dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	14	desmopressin acetate SOLN IJ ...	45	dexmethylphenidate hcl TABS	1
dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	14	DESMOPRESSIN ACETATE SOLN NA	45	dextroamphetamine sulfate CP24 10 MG, 15 MG	1
dapsone	22	desmopressin acetate spray	45		
		desmopressin acetate spray refrigerated 0.01 %	45		
		desmopressin acetate TABS 0.1 MG 45			
		desmopressin acetate TABS 0.2 MG 45			

dextroamphetamine sulfate CP24 5 MG	1	DIFFERIN LOTN	38	diltiazem hcl TABS	33
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG .	1	DIFICID TABS 200 MG (fidaxomicin) 51		diltiazem hcl TB24	33
dextroamphetamine sulfate TABS 5 MG, 10 MG	1	diflorasone diacetate CREA	41	dimethyl fumarate CDPK	62
dextrose in lactated ringers	54	diflorasone diacetate OINT	41	dimethyl fumarate CPDR	62
DIACOMIT CAPS 250 MG	12	diflunisal TABS	5	DIPENTUM	47
DIACOMIT CAPS 500 MG	12	difluprednate	59	diphenhydramine hcl CAPS 50 MG 18	
DIACOMIT PACK 250 MG	12	digoxin SOLN PO 0.05 MG/ML	33	diphenhydramine hcl ELIX 12.5 MG/5ML	18
DIACOMIT PACK 500 MG	12	digoxin TABS 62.5 MCG, 125 MCG, 250 MCG	33	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	18
diazepam (anticonvulsant) GEL ...	11	dihydroergotamine mesylate SOLN IJ 1 MG/ML	53	diphenhydramine hcl SOLN 50 MG/ML	18
diazepam CONC	8	dihydroergotamine mesylate SOLN NA 4 MG/ML	53	diphenoxylate w/ atropine LIQD ...	16
diazepam SOLN PO 5 MG/5ML	8	DILANTIN (phenytoin sodium extended)	13	diphenoxylate w/ atropine TABS ...	16
diazepam TABS	8	DILANTIN	13	dipyridamole	49
diazoxide	15	DILANTIN INFATABS CHEW (phenytoin)	13	disopyramide phosphate CAPS	8
dichlorphenamide	43	DILANTIN SUSP (phenytoin)	13	disulfiram	61
diclofenac epolamine PTCH EX ...	39	DILANTIN-125 SUSP (phenytoin) .	13	DIURIL SUSP	44
diclofenac potassium TABS 50 MG .	4	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	33	divalproex sodium TB24	13
diclofenac sodium (actinic keratoses) EX	39	diltiazem hcl coated beads CP24 180 MG, 240 MG	33	divalproex sodium TBEC	13
diclofenac sodium (ophth)	59	diltiazem hcl CP12	33	docetaxel CONC 20 MG/ML	28
diclofenac sodium (topical) GEL EX 39		diltiazem hcl CP24	33	docetaxel SOLN 20 MG/2ML	28
diclofenac sodium TB24	4	diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	33	docusate calcium	51
diclofenac sodium TBEC	4	diltiazem hcl extended release beads 420 MG	33	docusate sodium CAPS 100 MG ..	51
diclofenac w/ misoprostol TBEC	4	DILTIAZEM HCL SOLR	33	docusate sodium CAPS 250 MG ..	51
dicloxacillin sodium	61			dofetilide	9
dicyclomine hcl CAPS	64			donepezil hydrochloride TABS 10 MG	61
dicyclomine hcl SOLN PO	64			donepezil hydrochloride TABS 5 MG, 23 MG	61
dicyclomine hcl TABS	64				

donepezil hydrochloride TBDP 10 MG	61	drospirenone-ethinyl estradiol-levomefolate calcium	35	electrolyte-148	54
donepezil hydrochloride TBDP 5 MG 61		DROXIA CAPS	49	electrolyte-a	54
DOPTelet	49	DUAVEE	46	ELESTRIN GEL	46
dorzolamide hcl	59	DULERA	10	eletriptan hydrobromide	53
dorzolamide hcl-timolol maleate ..	58	duloxetine hcl CPEP	14	ELIGARD KIT SC 7.5 MG	25
DOVATO	30	DUPIXENT SOAJ 200 MG/1.14ML 42		ELIGARD SC 22.5 MG, 30 MG, 45 MG	25
doxazosin mesylate	20	DUPIXENT SOAJ 300 MG/2ML ...	42	ELIQUIS DVT/PE STARTER PACK TBPK	10
doxepin hcl (antipruritic)	39	DUPIXENT SOSY 200 MG/1.14ML 42		ELIQUIS TABS	10
doxepin hcl (sleep)	50	DUPIXENT SOSY 300 MG/2ML ...	42	ELLA	36
doxepin hcl CAPS	14	DUREX EXTRA SENSITIVE THIN DEVI	51	ELMIRON CAPS	48
doxepin hcl CONC	14	DUREX EXTRA SENSITIVE THIN MISC	51	ELOCTATE	48
doxercalciferol CAPS	45	DUREX TROPICAL MISC	51	eltrombopag olamine PACK 12.5 MG, 25 MG	49
doxercalciferol SOLN	45	dutasteride	48	eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG	49
doxorubicin hcl liposomal SUSP ...	25	dutasteride-tamsulosin hcl	48	EMBECTA AUTOSHIELD DUO ...	53
doxorubicin hcl SOLN	26	econazole nitrate CREA	38	EMBECTA PEN NEEDLE NANO ...	53
doxorubicin hcl SOLR 10 MG, 50 MG	26	EDARBI	20	EMBECTA PEN NEEDLE NANO 2 GEN	53
doxycycline (monohydrate) CAPS 50 MG, 100 MG	63	EDURANT	30	EMBECTA PEN NEEDLE ULTRAFINE	53
doxycycline (monohydrate) CAPS 75 MG	63	efavirenz CAPS 200 MG	30	EMCYT	25
doxycycline (monohydrate) TABS 100 MG	63	efavirenz CAPS 50 MG	30	EMFLAZA SUSP (deflazacort)	36
doxycycline (monohydrate) TABS 50 MG, 75 MG	63	efavirenz TABS	30	EMGALITY (300 MG DOSE) SOSY 53	
doxycycline hyclate CAPS	63	efavirenz-emtricitabine-tenofovir disoproxil fumarate	30	EMGALITY SOAJ	53
doxycycline hyclate SOLR	63	efavirenz-lamivudine-tenofovir disoproxil fumarate	30	EMGALITY SOSY	53
doxycycline hyclate TABS 20 MG, 100 MG	63	EGRIFTA SV	44	EMSAM	13
doxylamine-pyridoxine TBEC	17	ELAPRASE	45	emtricitabine CAPS	30
dronabinol CAPS	17			emtricitabine-rilpivirine-tenofovir disoproxil fumarate	30

emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG	30	entecavir TABS	31	erythromycin (ophth)	59
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	30	EPIDIOLEX	12	erythromycin base CPEP	51
EMTRIVA SOLN	30	epinastine hcl (ophth)	59	erythromycin base TABS	51
EMVERM CHEW	8	epinephrine (anaphylaxis) SOAJ ..	68	erythromycin base TBEC	51
enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 20		eplerenone	21	erythromycin ethylsuccinate SUSR	51
enalapril maleate & hydrochlorothiazide 25 MG-10 MG 20		EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	49	erythromycin ethylsuccinate TABS	51
enalapril maleate TABS	19	epoprostenol sodium	33	escitalopram oxalate SOLN	13
ENBREL MINI SOCT	4	EQL PRENATAL FORMULA TABS	56	escitalopram oxalate TABS	14
ENBREL SOLN	4	EQUETRO 100 MG	29	eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG	12
ENBREL SOSY 25 MG/0.5ML	4	EQUETRO 200 MG	29	esomeprazole magnesium CPDR 20 MG	64
ENBREL SOSY 50 MG/ML	4	EQUETRO 300 MG	29	esomeprazole magnesium CPDR 40 MG	64
ENBREL SURECLICK SOAJ	4	ERAXIS	17	esomeprazole magnesium TBEC ..	64
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ENGERIX-B SUSY	66	ergocalciferol CAPS	68	estazolam	50
enoxaparin sodium SOLN IJ 300 MG/3ML	10	ergocalciferol SOLN PO 200 MCG/ML	68	esterified estrogens & methyltestosterone	46
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	11	ergoloid mesylates TABS	62	estradiol & norethindrone acetate TABS	46
enoxaparin sodium SOSY 30 MG/0.3ML	11	ERGOMAR SUBL	53	estradiol GEL	46
enoxaparin sodium SOSY 40 MG/0.4ML	11	ergotamine w/ caffeine TABS	53	estradiol PTTW	46
enoxaparin sodium SOSY 60 MG/0.6ML	11	eribulin mesylate	28	estradiol PTWK	46
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	11	ERIVEDGE	24	estradiol TABS	46
ENSPRYNG	55	ERLEADA 240 MG	25	estradiol vaginal CREA	68
entacapone	28	ERLEADA 60 MG	25	estradiol vaginal TABS	68
		erlotinib hcl	24	estradiol valerate	46
		ERTACZO	38	ESTRING RING 7.5 MCG/24HR ..	68
		ertapenem sodium IJ	21	ESTROGEL GEL (estradiol)	46
		erythromycin (acne aid) PADS	38		
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eszopiclone	50	famotidine SOLN 20 MG/2ML	64	FENSOLVI (6 MONTH) SC	45
ethacrynic acid	44	famotidine SOLN 40 MG/4ML, 200 MG/20ML	64	fentanyl citrate LPOP	5
ethambutol hcl TABS	23	famotidine SUSR	64	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	5
ethosuximide CAPS	13	famotidine TABS 20 MG, 40 MG ..	64	ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	50
ethosuximide SOLN	13	FANAPT	29	ferrous sulfate TABS 325 MG, 65 MG, 325 MG	50
ethynodiol diacet & eth estrad	35	FANAPT TITRATION PACK A	29	ferrous sulfate TBEC 325 MG	50
etodolac CAPS	4	FANTASY LUBRICATED MISC ...	51	fesoterodine fumarate	65
etodolac TABS	4	FANTASY LUBRICATED/SPERMICIDE MISC 51		FETZIMA CP24	14
etonogestrel-ethinyl estradiol	36	FARXIGA (dapagliflozin propanediol)	16	FETZIMA TITRATION C4PK	14
ETOPOPHOS	28	FASENRA PEN SOAJ	9	fidaxomicin TABS 200 MG	51
etoposide CAPS	28	FASENRA SOSY 10 MG/0.5ML	9	finasteride	48
etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	28	FASENRA SOSY 30 MG/ML	9	fingolimod hcl	62
etravirine 100 MG	30	FC2 FEMALE CONDOM	51	FIRDAPSE	23
etravirine 200 MG	30	febuxostat	48	FIRMAGON (240 MG DOSE)	25
EUCRISA	42	felbamate SUSP	13	FIRMAGON 80 MG	25
EVAMIST SOLN	46	felbamate TABS 400 MG	13	flavoxate hcl	65
everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	56	felbamate TABS 600 MG	13	flecainide acetate	9
everolimus (immunosuppressant) 1 MG	56	felodipine	33	floxuridine	23
everolimus TABS	26	FEMCAP DEVI	51	FLUAD	66
EVEXITHROID TABS 180 MG	63	FEMLYV TBDP	35	FLUAD QUADRIVALENT	66
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granisetron hcl TABS 17	HUMIRA (2 PEN) AJKT 80 MG/0.8ML 3	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG7
GRASTEK SUBL2	HUMIRA (2 PEN) AJKT 3	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG7
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guanfacine hcl20	HUMIRA-PED>=40KG UC STARTER AJKT3	hydrocortisone (rectal) EX7
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labetalol hcl SOLN	32	latanoprost SOLN	60	levocetirizine dihydrochloride SOLN	18
labetalol hcl TABS 100 MG, 200 MG .	32	leflunomide	4	levocetirizine dihydrochloride TABS	18
labetalol hcl TABS 300 MG	32	LEMTRADA	62	levofloxacin (ophth) 0.5 %	59
lacosamide SOLN IV 200 MG/20ML .	12	lenalidomide 2.5 MG, 5 MG, 10 MG,	55	levofloxacin in d5w 500 MG/100ML	46
lacosamide TABS	12	15 MG, 25 MG	55	levofloxacin SOLN PO	46
lactated ringer's (irrigation)	56	lenalidomide 20 MG	55	levofloxacin TABS 250 MG, 750 MG .	46
lactated ringer's	54	LENVIMA (10 MG DAILY DOSE) .	24	levofloxacin TABS 500 MG	46
lactic acid (ammonium lactate) CREA	42	LENVIMA (12 MG DAILY DOSE) .	24	levonorgestrel & eth estradiol TABS	35
lactic acid (ammonium lactate) LOTN	42	LENVIMA (14 MG DAILY DOSE) .	24	levonorgestrel (emergency oc) 1.5	36
12 %	42	LENVIMA (18 MG DAILY DOSE) .	24	MG	36
lactulose (encephalopathy)	47	LENVIMA (20 MG DAILY DOSE) .	24	levonorgestrel-eth estradiol	35
lactulose SOLN	50	LENVIMA (24 MG DAILY DOSE) .	24	(triphasic)	35
lamivudine (hbv) TABS	31	LENVIMA (4 MG DAILY DOSE) ..	24	levonorgestrel-ethinyl estradiol (91-	35
lamivudine SOLN	31	LENVIMA (8 MG DAILY DOSE) ..	24	day) 0.03 MG-0.15 MG	35
lamivudine TABS 150 MG	31	letrozole	25	levonorgestrel-ethinyl estradiol	35
lamivudine TABS 300 MG	31	leucovorin calcium SOLR	28	(continuous)	35
lamivudine-zidovudine	31	leucovorin calcium TABS	28	levonorgestrel-ethinyl estradiol-iron	35
lamotrigine CHEW 25 MG	12	LEUKERAN	23	35	
lamotrigine CHEW 5 MG	12	LEUKINE SOLR IJ	49	levorphanol tartrate TABS 2 MG	5
lamotrigine TABS	12	leuprolide acetate KIT IJ 1 MG/0.2ML	25	levothyroxine sodium TABS	63
lamotrigine TBDP	12		25	LEXIVA SUSP	31
LANOXIN SOLN IJ (digoxin)	33	levalbuterol hcl	10	lidocaine hcl (local anesth.) SOLN	51
LANOXIN TABS 62.5 MCG, 125	33	levalbuterol tartrate	10	0.5 %, 1 %, 2 %	51
MCG, 250 MCG (digoxin)	33	levetiracetam SOLN IV 500 MG/5ML	12	lidocaine hcl (mouth-throat) 2 % ...	56
lansoprazole CPDR 15 MG	64	12		lidocaine hcl (mouth-throat) 4 % ...	56
lansoprazole CPDR 30 MG	64	levetiracetam TABS 1000 MG	12	lidocaine hcl GEL 2 %	42
lanthanum carbonate CHEW	47	levetiracetam TABS 250 MG, 750	12	lidocaine hcl PRSY	42
		MG	12		
		levetiracetam TABS 500 MG	12		

lidocaine hcl SOLN	42	loratadine TABS	18	45	
lidocaine PTCH 5 %	42	loratadine TBDP	18	LUPRON DEPOT-PED (3-MONTH) 11.25 MG	45
lidocaine-prilocaine CREA	42	lorazepam CONC	8	LUPRON DEPOT-PED (3-MONTH) 30 MG	45
LILETTA (52 MG)	36	lorazepam TABS 0.5 MG, 2 MG	8	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	29
lincomycin hcl	22	lorazepam TABS 1 MG	8	lurasidone hcl 80 MG	29
linezolid SUSR	22	LORBRENA	26	LYNPARZA TABS	27
linezolid TABS	22	losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	20	LYSODREN	25
LINZESS	47	losartan potassium & hydrochlorothiazide 12.5 MG-50 MG . 20		mafenide acetate PACK	40
liothyronine sodium SOLN	63	losartan potassium	20	magnesium sulfate IJ 50 %	55
liothyronine sodium TABS	63	LOTEMAX OINT	59	malathion	43
liraglutide	15	loteprednol etabonate GEL	59	maraviroc TABS 150 MG	31
lisdexamfetamine dimesylate CAPS 1		loteprednol etabonate SUSP	59	maraviroc TABS 300 MG	31
lisdexamfetamine dimesylate CHEW . 1		lovastatin TABS 10 MG, 20 MG	19	MARPLAN	13
lisinopril & hydrochlorothiazide	20	lovastatin TABS 40 MG	19	MASONATAL TABS	57
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	19	loxapine succinate	29	MATULANE	28
lithium	29	lubiprostone	47	MAXIDEX SUSP OP	59
lithium carbonate CAPS	29	LUCEMYRA (lofexidine hcl)	61	MAXX MISC	52
lithium carbonate TABS	29	luliconazole	39	MAXX PLUS MISC	52
lithium carbonate TBCR	29	LUMAKRAS 120 MG, 240 MG	26	meclizine hcl TABS 12.5 MG	17
LO LOESTRIN FE TABS	35	LUMAKRAS 320 MG	26	meclizine hcl TABS 25 MG	17
lofexidine hcl	61	LUMIZYME	45	meclofenamate sodium CAPS	4
LOKELMA	56	LUPRON DEPOT (1-MONTH) KIT IM	25	MEDROL TABS	36
loperamide hcl CAPS	17	LUPRON DEPOT (3-MONTH) KIT IM	25	medroxyprogesterone acetate (contraceptive) SUSP IM	36
lopinavir-ritonavir SOLN	31	LUPRON DEPOT (4-MONTH) IM	25	medroxyprogesterone acetate (contraceptive) SUSY IM	36
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memantine hcl TABS61	methadone hcl SOLN PO 5 MG/5ML 5	methylphenidate hcl TB24 18 MG, 27 MG2
MENACTRA65	methadone hcl TABS 10 MG6	methylphenidate hcl TB24 36 MG, 54 MG2
MENEST 2.5 MG46	methadone hcl TABS 5 MG6	methylphenidate hcl TBCR 10 MG, 20 MG2
MENOSTAR PTWK46	methadone hcl TBSO6	methylphenidate hcl TBCR 18 MG, 27 MG2
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metoclopramide hcl TABS	47	MIRCERA	49	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	6
metolazone	44	MIRENA (52 MG)	36	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	6
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RENFLEXIS47	risperidone SOLN29	SANTYL OINT42
repaglinide 0.5 MG, 1 MG16	risperidone TABS29	sapropterin dihydrochloride PACK .45
repaglinide 2 MG16	risperidone TBDP29	sapropterin dihydrochloride TABS .45
REPATHA PUSHTRONEX SYSTEM SOCT19	ritonavir TABS31	SAVELLA TABS61
REPATHA SOSY19	rivaroxaban SUSR 1 MG/ML10	SAVELLA TITRATION PACK MISC 61
REPATHA SURECLICK SOAJ19	rivaroxaban TABS 2.5 MG10	saxagliptin hcl15
RETACRIT49	rivastigmine tartrate CAPS61	saxagliptin-metformin hcl 1000 MG- 2.5 MG15
RETEVMO CAPS27	rizatriptan benzoate TABS 10 MG .54	saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG15
RETROVIR SOLN31	rizatriptan benzoate TABS 5 MG ..54	SCEMBLIX 100 MG27
REXULTI30	rizatriptan benzoate TBDP 10 MG .54	SCEMBLIX 20 MG, 40 MG27
REZVOGLAR KWIKPEN16	rizatriptan benzoate TBDP 5 MG ..54	scopolamine17
ribavirin (hepatitis c) CAPS31	roflumilast9	SELECT INSULIN SYRINGES53
ribavirin (hepatitis c) TABS 200 MG 31	romidepsin SOLR27	SELECT LANCETS53
RIDAURA3	ropinirole hydrochloride TABS29	selegiline hcl CAPS29
rifabutin23	ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG29	selegiline hcl TABS29
rifampin CAPS23	ropinirole hydrochloride TB24 8 MG, 12 MG29	selenium sulfide LOTN 2.5 %40
rifampin SOLR23	rosuvastatin calcium TABS19	SELZENTRY SOLN31
riluzole TABS58	ROTARIX SUSP67	SELZENTRY TABS 25 MG, 75 MG 31
rimantadine hydrochloride TABS ..32	ROTATEQ SOLN67	SEMGLEE (YFGN) SOLN16
ringer's55	ROZLYTREK CAPS27	

SEMGLEE (YFGN) SOPN	16	acetate)	54	sotalol hcl TABS 240 MG	32
SEREVENT DISKUS	10	sodium acetate SOLN	54	sotalol hcl TABS 80 MG, 120 MG, 160 MG	32
sertraline hcl CONC	14	sodium chloride (gu irrigant) 0.9 %	47	SOVALDI TABS 200 MG	32
sertraline hcl TABS	14	sodium chloride (inhalant) NEBU 7 %	37	SOVALDI TABS 400 MG	32
sevelamer carbonate PACK	47	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %	55	SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	67
sevelamer carbonate TABS	47	sodium citrate & citric acid	47	SPIKEVAX SUSP	67
SHINGRIX	67	sodium fluoride CHEW	55	SPIKEVAX SUSY	67
SIGNIFOR	45	sodium phenylbutyrate POWD	45	spinosad	43
sildenafil citrate (pulmonary hypertension) SOLN	34	sodium phenylbutyrate TABS	45	SPIRIVA RESPIMAT AERS IN	9
sildenafil citrate (pulmonary hypertension) SUSR	34	sodium polystyrene sulfonate POWD 56		spironolactone & hydrochlorothiazide	43
sildenafil citrate (pulmonary hypertension) TABS	34	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	56	spironolactone TABS	44
sildenafil citrate	33	sodium sulfate-potassium sulfate- magnesium sulfate	50	SPRAVATO (56 MG DOSE)	13
silodosin	48	SOFOSBUVIR-VELPATASVIR TABS	31	SPRAVATO (84 MG DOSE)	13
silver sulfadiazine	40	SOLIFENACIN succinate TABS	65	SPRYCEL (dasatinib)	27
SIMPONI ARIA SOLN	3	SOLU-CORTEF (hydrocortisone sod succinate)	37	stannous fluoride CONC	56
SIMULECT	56	SOLU-CORTEF 100 MG, 500 MG, 1000 MG	37	STELARA 130 MG/26ML	47
simvastatin TABS	19	SOLU-CORTEF 250 MG	37	STELARA SOLN 45 MG/0.5ML ...	40
sirolimus TABS	56	SOLU-MEDROL 2 GM	37	STELARA SOSY 45 MG/0.5ML ...	40
SIRTURO	23	sorafenib tosylate	27	STELARA SOSY 90 MG/ML	40
SIVEXTRO TABS	22	SORBITOL 3 %	47	STENDRA (avanafil)	33
SKYLA	36	SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	48	STIOLTO RESPIMAT	10
SKYRIZI PEN SOAJ	40	sotalol hcl (afib/afi)	32	STIVARGA	27
SKYRIZI SOCT	47			STRENSIQ	45
SKYRIZI SOLN	47			streptomycin sulfate SOLR	2
SKYRIZI SOSY	40			STRIBILD	31
SLYND	36			STRIVERDI RESPIMAT	10
SM PRENATAL VITAMINS TABS .57				SUBSYS LIQD 800 MCG	6
SODIUM ACETATE SOLN (sodium				sucrafate SUSP	64

sucralfate TABS	64	MG	27	TASIGNA 150 MG, 200 MG (nilotinib hcl)	27
sulconazole nitrate CREA	39	sunitinib malate 37.5 MG	27	TASIGNA 50 MG (nilotinib hcl)	27
sulconazole nitrate SOLN	39	SUNOSI 150 MG	1	tavaborole	39
sulfacetamide sodium (acne)	38	SUNOSI 75 MG	1	TAVALISSE	48
sulfacetamide sodium (ophth) SOLN .	59	SYNAREL	45	tazarotene CREA 0.1 %	40
		SYNJARDY TABS	15	TAZVERIK	27
sulfacetamide sodium w/ sulfur		SYNJARDY XR TB24 1000 MG-10		TDVAX SUSP	64
CREA 10 %-5 %	38	MG, 1000 MG-12.5 MG, 1000 MG-5		TEFLARO	35
sulfacetamide sodium w/ sulfur LIQD		MG	15	TEGRETOL SUSP (carbamazepine) .	12
10 %-5 %	38	SYNJARDY XR TB24 1000 MG-25		TEGRETOL TABS (carbamazepine) .	12
sulfacetamide sodium w/ sulfur LIQD		MG	15	telmisartan	20
9 %-4.5 %	38	SYNRIBO	28	telmisartan-amlodipine	21
sulfacetamide sod-prednisolone		SYNTHROID TABS (levothyroxine		telmisartan-hydrochlorothiazide ..	21
SOLN	59	sodium)	63	temazepam 15 MG, 30 MG	50
sulfadiazine TABS	63	TABLOID	24	temazepam 7.5 MG, 22.5 MG	50
sulfamethoxazole-trimethoprim SOLN		TABRECTA	27	TEMODAR SOLR	23
.....	21	tacrolimus (topical) OINT	42	temozolomide CAPS	23
sulfamethoxazole-trimethoprim SUSP		tacrolimus CAPS	56	temsirolimus	27
.....	21	tacrolimus SOLN 5 MG/ML	56	TENIVAC SUSP 2 LFU-5 LFU	64
sulfamethoxazole-trimethoprim TABS		tadalafil (pulmonary hypertension)		tenofovir disoproxil fumarate TABS	31
.....	21	TABS	34	terazosin hcl	20
SULFAMYLON CREA	40	tadalafil 5 MG	33	terbinafine hcl TABS	18
sulfasalazine TABS	47	TAFINLAR CAPS	27	terbutaline sulfate SOLN	10
sulfasalazine TBEC	47	TAFINLAR TBSO	27	terbutaline sulfate TABS	10
sulindac TABS	4	tafluprost	60	terconazole vaginal CREA	67
sumatriptan	54	TAGRISSO 40 MG	24	terconazole vaginal SUPP	67
sumatriptan succinate SOAJ	54	TAGRISSO 80 MG	24	teriflunomide	62
sumatriptan succinate SOCT	54	TAKHZYRO SOLN	49		
sumatriptan succinate SOLN 6		TAKHZYRO SOSY	49		
MG/0.5ML	54	TALZENNA	27		
sumatriptan succinate TABS	54	tamoxifen citrate TABS	25		
sumatriptan-naproxen sodium	53	tamsulosin hcl	48		
sunitinib malate 12.5 MG, 25 MG, 50					

teriparatide SOPN	44	tiopronin TBEC 100 MG	48	torsemide TABS	44
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	7	tiopronin TBEC 300 MG	48	TRACLEER TBSO 32 MG (bosentan)	34
testosterone cypionate SOLN IM ...	7	tiotropium bromide CAPS IN 18 MCG	9	tramadol hcl TABS 50 MG	6
testosterone enanthate SOLN IM ...	7	TIVICAY TABS	31	tramadol hcl TB24	6
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	64	tizanidine hcl CAPS	57	tramadol-acetaminophen	7
tetrabenazine	62	tizanidine hcl TABS	57	trandolapril 1 MG, 2 MG	20
tetracycline hcl CAPS	63	tobramycin (ophth) SOLN	59	trandolapril 4 MG	20
THALOMID	55	tobramycin NEBU	2	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	21
theophylline ELIX	10	tobramycin sulfate SOLN IJ 2 GM/50ML, 10 MG/ML, 80 MG/2ML .	2	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	21
theophylline SOLN	10	tobramycin-dexamethasone SUSP 59		tranexamic acid SOLN 1000 MG/10ML	50
theophylline TB12	10	TODAY SPONGE MISC	67	tranexamic acid TABS	50
theophylline TB24	10	tolcapone	28	tranylcypromine sulfate	13
THERANATAL CORE NUTRITION TABS	57	tolmetin sodium CAPS	4	travoprost SOLN	60
THIOLA EC TBEC 100 MG (tiopronin)	48	tolmetin sodium TABS 600 MG	4	TRAZIMERA	24
THIOLA EC TBEC 300 MG (tiopronin)	48	TOLSURA CAPS	18	trazodone hcl TABS	14
thioridazine hcl	30	tolterodine tartrate CP24	65	TRELEGY ELLIPTA	10
thiotepa 15 MG	23	tolterodine tartrate TABS	65	TRELSTAR MIXJECT	25
thiothixene	30	tolvaptan TABS	45	TREMFYA ONE-PRESS SOPN SC 100 MG/ML	40
THYMOGLOBULIN	56	topiramate CPSP 15 MG	12	TREMFYA PEN SOAJ 100 MG/ML 40	
THYROGEN 0.9 MG	43	topiramate CPSP 25 MG	12	TREMFYA PEN SOAJ SC 200 MG/2ML	47
tiagabine hcl	13	topiramate CS24	13	TREMFYA SOLN IV	47
TIBSOVO	27	topiramate TABS 200 MG	13	TREMFYA SOSY 100 MG/ML	40
ticagrelor 60 MG, 90 MG	49	topiramate TABS 25 MG, 100 MG .	13	TREMFYA SOSY SC 200 MG/2ML 47	
tigecycline	63	topiramate TABS 50 MG	13	TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	47
timolol maleate (ophth) SOLG	58	topotecan hcl SOLN	28		
timolol maleate (ophth) SOLN	58	topotecan hcl SOLR	28		
timolol maleate TABS	32	toremifene citrate	25		

treprostinil SOLN IJ	34	trientine hcl 250 MG	55	TRUE METRIX LEVEL 3 SOLN ...	53
tretinoin (chemotherapy)	28	trifluoperazine hcl TABS	30	TRULANCE	46
tretinoin CREA 0.025 %, 0.05 %, 0.1 %	38	trifluridine	59	TRULICITY	15
tretinoin GEL 0.01 %, 0.025 %	38	trihexyphenidyl hcl SOLN	28	TRUMENBA 0.5 ML	65
tretinoin microsphere 0.1 %	38	trihexyphenidyl hcl TABS	28	TRUSTEX COLOR CONDOMS + LUBE MISC	52
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	24	TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG ..	15	TRUSTEX LUB/RIBBED/STUDDED MISC	52
triamcinolone acetonide (mouth) ..	56	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	15	TRUSTEX LUB/SPERMICIDE EX ST MISC	52
triamcinolone acetonide (nasal) AERO	58	TRIKAFTA TBPK	63	TRUSTEX LUB/SPERMICIDE XL MISC	52
triamcinolone acetonide (topical) CREA 0.025 %	42	trimethobenzamide hcl CAPS	17	TRUSTEX LUBRICATED EX LARGE MISC	52
triamcinolone acetonide (topical) CREA 0.1 %	42	trimethoprim TABS	21	TRUSTEX LUBRICATED EXTRA ST MISC	52
triamcinolone acetonide (topical) CREA 0.5 %	42	trimipramine maleate CAPS	14	TRUSTEX LUBRICATED MISC ...	52
triamcinolone acetonide (topical) LOTN 0.025 %	42	TRINTELLIX	14	TRUSTEX LUBRICATED/SPERMICIDE MISC	52
triamcinolone acetonide (topical) LOTN 0.1 %	42	TRIUMEQ TABS	31	52	
triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	42	TRIZIVIR	31	TRUSTEX NATURAL CONDOMS + LUBE MISC	52
triamcinolone acetonide (topical) OINT 0.5 %	42	TROJAN BARESKIN DEVI	52	TRUSTEX RIA LUB/SPERMICIDE MISC	52
triamcinolone acetonide SUSP 40 MG/ML	37	TROJAN MAGNUM MISC	52	TRUSTEX RIA LUBRICATED MISC .	52
triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	43	TROJAN ULTRA THIN MISC	52	TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	52
triamterene & hydrochlorothiazide TABS	43	TROJAN ULTRA THIN/SPERMICIDAL MISC	52	TRUXIMA	24
triamterene CAPS	44	TROJAN-ENZ LUBRICATED MISC	52	TUKYSA	24
triazolam	50	52		TURALIO 125 MG	27
TRICARE TABS	57	TROJAN-ENZ/SPERMICIDAL MISC .	52	TWINRIX SUSY	67
		tropicamide SOLN 0.5 %	58	TWIRLA	36
		tropicamide SOLN 1 %	58	TYBLUME CHEW	35
		trospium chloride CP24	65		
		trospium chloride TABS	65		
		TRUE COVER DEVI	52		
		TRUE METRIX BLOOD GLUCOSE TEST STRP	43		

TYBOST	31	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	11	verapamil hcl TBCR	33
TYMLOS	44	VALTOCO 5 MG DOSE LIQD	11	VEREGEN	38
TYVASO REFILL KIT SOLN IN	34	vancomycin hcl CAPS	21	VERZENIO	27
TYVASO SOLN IN	34	vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG	21	VICTOZA (liraglutide)	15
TYVASO STARTER KIT SOLN IN	34	vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML	21	vigabatrin PACK	13
UBRELVY	53	VAQTA	67	vigabatrin TABS	13
UDENYCA ONBODY SOSY	49	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	67	VIIBRYD STARTER PACK KIT	14
UDENYCA SOAJ	49	varenicline tartrate TABS	62	vilazodone hcl TABS	14
UDENYCA SOSY	49	varenicline tartrate TBPK	62	vincristine sulfate	28
umeclidinium-vilanterol	10	VARIVAX SUSR	67	vinorelbine tartrate 10 MG/ML	28
UPTRAVI TABS 200 MCG	34	VARUBI (180 MG DOSE) TBPK	17	VIRACEPT TABS 250 MG	31
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	34	VAXELIS SUSP	64	VIRACEPT TABS 625 MG	31
UPTRAVI TITRATION TBPK	34	VAXELIS SUSY	64	VIREAD POWD	31
ursodiol CAPS	46	VAXNEUVANCE	65	VIREAD TABS 150 MG, 200 MG, 250 MG	31
ursodiol TABS	46	VCF VAGINAL CONTRACEPTIVE FILM	67	VISTOGARD	17
UVADEX	28	VECAMEYL	21	VITAMIN D2 TABS 400 UNIT	68
VABRINTY SC 22.5 MG, 30 MG, 45 MG	25	VECTIBIX 100 MG/5ML	24	VITATHELY WITH GINGER TABS 57	
valacyclovir hcl 1 GM	32	VELPHORO	47	VITRAKVI CAPS	27
valacyclovir hcl 500 MG	32	venlafaxine hcl CP24	14	VITRAKVI SOLN	27
valganciclovir hcl TABS	31	venlafaxine hcl TABS	14	VIZIMPRO	24
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	13	venlafaxine hcl TB24	14	VORAXAZE	28
valproic acid CAPS	13	verapamil hcl CP24 100 MG, 200 MG, 300 MG	33	voriconazole TABS	18
valrubicin	26	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG	33	VOSEVI	32
valsartan TABS	20	verapamil hcl SOLN 2.5 MG/ML	33	VYNDAMAX	34
valsartan-hydrochlorothiazide	21	verapamil hcl TABS	33	VYNDAQEL	34
VALTOCO 10 MG DOSE LIQD	11			warfarin sodium TABS	10
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	11			water for irrigation, sterile	56

WIDE-SEAL DIAPHRAGM 65 52	XOLAIR SOAJ 150 MG/ML, 300 MG/2ML 9	YUFLYMA-CD/UC/HS STARTER AJKT 3
WIDE-SEAL DIAPHRAGM 70 52	XOLAIR SOAJ 75 MG/0.5ML 9	zafirlukast 9
WIDE-SEAL DIAPHRAGM 75 52	XOLAIR SOLR 9	zaleplon 10 MG 50
WIDE-SEAL DIAPHRAGM 80 52	XOLAIR SOSY 150 MG/ML, 300 MG/2ML 9	zaleplon 5 MG 50
WIDE-SEAL DIAPHRAGM 85 52	XOLAIR SOSY 75 MG/0.5ML 9	ZALTRAP 100 MG/4ML 24
WIDE-SEAL DIAPHRAGM 90 52	XOSPATA 27	ZANOSAR 23
WIDE-SEAL DIAPHRAGM 95 52	XPOVIO (100 MG ONCE WEEKLY) 50 MG 25	ZARONTIN CAPS (ethosuximide) .13
XALKORI CAPS 27	XPOVIO (40 MG ONCE WEEKLY) 40 MG 25	ZARXIO 49
XARELTO STARTER PACK TBPK 10	XPOVIO (40 MG TWICE WEEKLY) 40 MG 25	ZEJULA CAPS 27
XARELTO SUSR 1 MG/ML (rivaroxaban) 10	XPOVIO (60 MG ONCE WEEKLY) 60 MG 25	ZEJULA TABS 100 MG 27
XARELTO TABS 10 MG, 20 MG .. 10	XPOVIO (60 MG TWICE WEEKLY) . 25	ZEJULA TABS 200 MG, 300 MG .. 27
XARELTO TABS 2.5 MG, 15 MG (rivaroxaban) 10	XPOVIO (80 MG ONCE WEEKLY) 40 MG 25	ZELBORAF 27
XARELTO TABS 2.5 MG, 15 MG ..10	XPOVIO (80 MG TWICE WEEKLY) . 25	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT 43
XELJANZ SOLN 2	XTANDI CAPS 25	ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT 43
XELJANZ TABS 10 MG 2	XTANDI TABS 40 MG 25	zidovudine CAPS 31
XELJANZ TABS 5 MG 2	XTANDI TABS 80 MG 25	zidovudine SYRP 31
XELJANZ XR TB24 2	XULTOPHY 15	zidovudine TABS 31
XEOMIN 58	XYNTHA 48	zileuton TB12 9
XERAFA 63	XYNTHA SOLOFUSE 48	ziprasidone hcl 29
XGEVA SOLN 44	YERVOY 24	ZIRABEV 24
XHANCE EXHU 58	YONSA 25	ZIRGAN GEL 59
XIFAXAN 200 MG 21	YUFLYMA (1 PEN) AJKT 3	ZOLADEX 10.8 MG 25
XIFAXAN 550 MG 21	YUFLYMA (2 PEN) AJKT 3	ZOLADEX 3.6 MG 25
XIGDUO XR (dapagliflozin propanediol-metformin hcl) 15	YUFLYMA (2 SYRINGE) PSKT 3	
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG 15		
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG 15		

zoledronic acid CONC	44
zoledronic acid SOLN 5 MG/100ML 44	
ZOLINZA	27
zolmitriptan SOLN	54
zolmitriptan TABS	54
zolmitriptan TBDP	54
zolpidem tartrate TABS	50
zolpidem tartrate TBCR	50
zonisamide CAPS	13
ZONTIVITY	49
ZORBTIVE SC	45
ZYDELIG	27
ZYLET	59

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