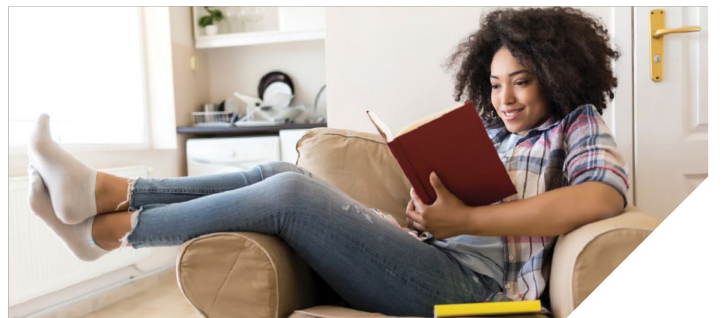




# 2025 处方集

2025 年 1 月 1 日生效



# 处方集简介

## 处方集

Ambetter 处方集或处方药清单是一份指南，其中列出了经美国食品药品监督管理局 (FDA) 批准并由您的处方药福利承保的现有品牌药和非专利药。非专利药的活性成分与品牌药相同，应被视为第一线治疗药物。FDA 要求仿制药与品牌药同样安全有效。如果没有非专利药，可能不止一种品牌药可以治疗某种疾病。如果处方集上的非专利药物不适合您的病情，会将首选品牌药物列在 2 级，以帮助确定临床上合适、安全且性价比高的品牌药物。

请注意，处方集并非处方福利承保药物的完整清单。并非所有剂型或强度的药物都在承保范围之内。本清单定期审查和更新，可能会有变动。为批准继续使用特定药物，可能会增加或删除药物，或增加额外要求。

特定的处方福利计划设计可能不涵盖某些产品或类别，无论其是否出现在本文件中。请查看您的福利，了解承保限制和您应承担的药物费用。

药物清单重点：

品牌药用大写，非专利药用小写。

根据您的福利，不同共付额层级的药物享有不同的承保范围：

- 0 级** - 《平价医疗法案》规定的用于预防的药物无需共付额。本层级可承保特选口服避孕药、维生素 D、育龄妇女叶酸、非处方 (OTC) 阿司匹林和戒烟产品。可能会有一定的年龄限制。
- 1<sub>A</sub> 级** - 与用于治疗类似病症的其他药物相比，特选药物的共付额最低、价值最高。本层级可能承保特选非处方 (OTC) 药。
- 1<sub>B</sub> 级** - 与用于治疗类似病症的其他药物相比，特选药物的共付额低、价值高。本层级可能承保特选非处方 (OTC) 药。
- 2 级** - 中等共付额承保通常更实惠的品牌药，或与治疗相同病症的其他药物相比可能更受青睐的品牌药。
- 3 级** - 高共付额承保费用较高的品牌药和非首选非专利药。本层级也可能承保不在处方药清单上但已批准承保的非特殊药。
- 4 级** - 最高自付额是用于治疗复杂慢性病的“特殊”药物，这些药物可能需要特殊处理、储存或临床管理。特殊级的处方药可能需要在参与 Ambetter “特殊”或“血友病”网络的药房配药。有关哪些药店在我们的“特殊”或“血友病”网络中的更多信息，请咨询 Ambetter 网站的药房信息部分。

### 非处方集药物的事先授权

要获得非处方集药物的事先授权，您的医疗服务提供者必须填写事先授权表。服务部门将在收到紧急请求的所有必要信息后 24 小时内通过传真或电话做出回应，非紧急请求将在 72 小时内做出回应，除非州法律要求更快的回应。如果请求被驳回，驳回通知将包含对驳回事先授权请求的具体原因的明确解释，或者如果请求不完整，该解释将确定完成请求所需的缺失材料信息。

### 处方集缩略语：

| 缩略语    | 术语       | 具体含义                                                                                                    |
|--------|----------|---------------------------------------------------------------------------------------------------------|
| AL     | 年龄限制     | 有些药物只对特定年龄段承保。                                                                                          |
| QL     | 数量限制     | 有些药物只对特定数量承保。                                                                                           |
| PA     | 事先授权     | 在承保某些药物之前，您的医生必须获得 Ambetter 的批准。                                                                        |
| ST     | 阶梯疗法     | 在某些情况下，您必须先尝试某些药物，然后 Ambetter 才会为您的病症承保另一种药物。例如，如果药物 A 和药物 B 都能治疗您的病症，除非您先试用药物 A，否则 Ambetter 可能不承保药物 B。 |
| NF     | 非处方集     | 除非您或您的医疗服务提供者申请例外，否则本产品不在承保范围内。替代药物列在非承保产品旁边                                                            |
| RX/OTC | 处方药与 OTC | 这些药物以处方药和非处方药（OTC）两种形式生产。                                                                               |
| SP     | 特殊药品     | 这些产品是特殊药物，可能有特殊的配药要求。                                                                                   |
| SF     | 分开配药     | 最初，某些药物可能只能以 15 天为单位递增，直到您的用药情况稳定下来。服药 90 天后，这一限制可能不再适用。                                                |

### 阿片类药物：

在处方集上注明“**新开始用药限 7 天用量**”的药物，在任何 28 天内最多可有两次 7 天用量，在任何 90 天内最多可有总共 28 天的非连续用量。该限额累计适用于所有配药的阿片类药物。对于超出上述限额的配药，您的医疗服务提供者可提交事先授权申请。

| Drug Name                                                                                              | Drug Tier | Requirements/ Limits                   |
|--------------------------------------------------------------------------------------------------------|-----------|----------------------------------------|
| <b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders</b> |           |                                        |
| <b>Amphetamines</b>                                                                                    |           |                                        |
| <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 5 MG, 10 MG</i>                                                  | 1B        | QL(1 EA daily)                         |
| <i>amphetamine-dextroamphetamine CP24 15 MG</i>                                                        | 1B        |                                        |
| <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) |
| <b>Anorexiants Non-Amphetamine</b>                                                                     |           |                                        |

| Drug Name                                                      | Drug Tier | Requirements/ Limits                        |
|----------------------------------------------------------------|-----------|---------------------------------------------|
| <i>phendimetrazine tartrate TABS</i>                           | 1B        | PA                                          |
| <i>phentermine hcl CAPS</i>                                    | 1B        | PA                                          |
| <b>Anti-Obesity Agents</b>                                     |           |                                             |
| CONTRAVE                                                       | 3         | QL(4 EA daily); PA                          |
| <b>Attention-Deficit/Hyperactivity Disorder (ADHD) Agents</b>  |           |                                             |
| <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)      |
| <b>Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)</b> |           |                                             |
| SUNOSI 150 MG                                                  | 3         | QL(1 EA daily); PA                          |
| SUNOSI 75 MG                                                   | 3         | QL(2 EA daily); PA                          |
| <b>Stimulants - Misc.</b>                                      |           |                                             |
| <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                    |
|--------------------------------------------------------------|-----------|-----------------------------------------|
| <i>methylphenidate hcl CP24</i>                              | 1B        | QL(1 EA daily)                          |
| <i>methylphenidate hcl CP24 30 MG</i>                        | 1B        | QL(2 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate hcl CPCR</i>                              | 1B        | QL(1 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate hcl SOLN</i>                              | 1B        | QL(30 ML daily); AL(At least 6 yrs old) |
| <i>methylphenidate hcl TABS 5 MG</i>                         | 1B        | QL(6 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate hcl TABS 10 MG, 20 MG</i>                 | 1B        | QL(5 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate hcl TB24 36 MG, 54 MG</i>                 | 1B        | QL(2 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate hcl TB24 18 MG, 27 MG</i>                 | 1B        | QL(1 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate hcl TBCR 36 MG, 54 MG</i>                 | 1B        | QL(2 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate hcl TBCR 10 MG, 20 MG</i>                 | 1B        | QL(3 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate hcl TBCR 18 MG, 27 MG</i>                 | 1B        | QL(1 EA daily); AL(At least 6 yrs old)  |
| <i>methylphenidate PTCH</i>                                  | 1B        | QL(1 EA daily); PA                      |
| <i>modafinil 200 MG</i>                                      | 1B        | QL(2 EA daily); PA                      |
| <i>modafinil 100 MG</i>                                      | 1B        | QL(1 EA daily); PA                      |
| <b>ALLERGENIC EXTRACTS/BIOLOGICALS MISC</b>                  |           |                                         |
| Allergenic Extracts                                          |           |                                         |
| GRASTEK SUBL                                                 | 3         | PA                                      |
| <b>AMEBICIDES</b>                                            |           |                                         |
| Amebicides                                                   |           |                                         |
| SOLOSEC                                                      | 3         | PA                                      |
| <b>AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections</b> |           |                                         |

| Drug Name                                                                                          | Drug Tier | Requirements/ Limits                                         |
|----------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------|
| <b>Aminoglycosides</b>                                                                             |           |                                                              |
| <i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>                                                  | 1B        |                                                              |
| ARIKAYCE                                                                                           | 4         | PA                                                           |
| <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>gentamicin sulfate IJ 40 MG/ML</i>                                                              | 1B        |                                                              |
| <i>neomycin sulfate TABS</i>                                                                       | 1B        |                                                              |
| <i>streptomycin sulfate SOLR</i>                                                                   | 3         |                                                              |
| <i>tobramycin sulfate SOLN IJ 2 GM/50ML, 10 MG/ML, 80 MG/2ML</i>                                   | 1B        |                                                              |
| <i>tobramycin NEBU</i>                                                                             | 4         | QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); PA |
| <b>ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions</b> |           |                                                              |
| <b>Antirheumatic - Enzyme Inhibitors</b>                                                           |           |                                                              |
| RINVOQ LQ SOLN                                                                                     | 4         | QL(12 ML daily); PA                                          |
| RINVOQ TB24                                                                                        | 4         | QL(1 EA daily); PA                                           |
| XELJANZ XR TB24                                                                                    | 4         | QL(1 EA daily); PA                                           |
| XELJANZ SOLN                                                                                       | 4         | QL(20 ML daily); PA                                          |
| XELJANZ TABS 5 MG                                                                                  | 4         | QL(2 EA daily); SP; PA                                       |
| XELJANZ TABS 10 MG                                                                                 | 4         | QL(2 EA daily); PA                                           |
| <b>Anti-TNF-alpha - Monoclonal Antibodies</b>                                                      |           |                                                              |
| CYLTEZO (2 PEN) AJKT                                                                               | 4         | QL(0.215 EA daily); PA                                       |
| CYLTEZO (2 PEN) AJKT                                                                               | 4         | QL(0.072 EA daily); PA                                       |
| 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         | QL(0.215 EA daily); 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-PSORIASIS/UV STARTER AJKT                 | 4         | QL(0.143 EA daily); PA                                                     | SIMPONI ARIA SOLN                     | 4         | 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 (1 PEN) AJKT                  | 4         | QL(0.143 EA daily); PA                                                     |
| HUMIRA (2 PEN) AJKT                               | 4         | QL(0.143 EA daily); PA                                                     | YUFLYMA (2 PEN) AJKT                  | 4         | QL(0.29 EA daily); PA                                                      |
| HUMIRA (2 PEN) AJKT 80 MG/0.8ML                   | 4         | QL(0.072 EA daily); PA                                                     | YUFLYMA (2 SYRINGE) PSKT              | 4         | QL(0.143 EA daily); PA                                                     |
| HUMIRA (2 SYRINGE) PSKT                           | 4         | QL(0.143 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-CD/UC/HS STARTER AJKT                      | 4         | 1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA   | Gold Compounds                        |           |                                                                            |
| HUMIRA-PED<40KG CROHNS STARTER PSKT               | 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 START 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 UC STARTER AJKT                  | 4         | 1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA   | Interleukin-1 Blockers                |           |                                                                            |
|                                                   |           |                                                                            | 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 25 MG/0.5ML                       | 4         | QL(0.146 ML daily); PA                                                     |
| <i>meloxicam TABS</i>                          | 1A        | QL(1 EA daily)                                                 | ENBREL SOSY 50 MG/ML                          | 4         | QL(0.286 ML daily); SP; PA                                                 |
| <i>nabumetone</i>                              | 1B        |                                                                |                                               |           |                                                                            |

| Drug Name                                                                          | Drug Tier | Requirements/ Limits                       | Drug Name                                                                   | Drug Tier | Requirements/ Limits                                           |
|------------------------------------------------------------------------------------|-----------|--------------------------------------------|-----------------------------------------------------------------------------|-----------|----------------------------------------------------------------|
| <b>ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions</b> |           |                                            |                                                                             |           |                                                                |
| <b>Analgesic Combinations</b>                                                      |           |                                            |                                                                             |           |                                                                |
| <i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>                   | 1B        |                                            | <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 TABS 40 MG-50 MG-325 MG</i>                   | 1B        | QL(6 EA daily)                             | <i>hydrocodone bitartrate T24A</i>                                          | 3         | QL(2 EA daily); PA                                             |
| <i>butalbital-acetaminophen TABS 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-aspirin-caffeine CAPS</i>                                            | 1B        | QL(4 EA daily)                             | <i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>           | 1B        |                                                                |
| <b>Salicylates</b>                                                                 |           |                                            | <i>hydromorphone hcl TABS</i>                                               | 1B        | New starts limited to 7 day supply; QL(8 EA daily)             |
| <i>aspirin CHEW</i>                                                                | 0         | AL(At least 45 yrs old - Up to 79 yrs old) | <i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>                            | 1B        | QL(2 EA daily); PA                                             |
| <i>aspirin TABS 325 MG</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 TBEC 325 MG</i>                                                         | 1A        |                                            | <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 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 SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>                 | 1B        |                                                                |
| <i>salsalate</i>                                                                   | 1B        |                                            | <i>meperidine hcl TABS 50 MG</i>                                            | 1B        | New starts limited to 7 day supply; QL(6 EA daily)             |
| <b>ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions</b>      |           |                                            | <i>methadone hcl CONC</i>                                                   | 1B        | QL(10 ML daily)                                                |
| <b>Opioid Agonists</b>                                                             |           |                                            | <i>methadone hcl SOLN PO 10 MG/5ML</i>                                      | 1B        | QL(50 ML daily)                                                |
| <i>codeine sulfate TABS 30 MG</i>                                                  | 1B        | New starts limited to 7 day supply         | <i>methadone hcl SOLN IJ 10 MG/ML</i>                                       | 1B        |                                                                |
| CODEINE SULFATE TABS                                                               | 1B        | New starts limited to 7 day supply         | <i>methadone hcl SOLN PO 5 MG/5ML</i>                                       | 1B        | QL(100 ML daily)                                               |
| <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 15 MG-300 MG</i>                                                           | 1B        | New starts limited to 7 day supply; QL(13 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 30 MG-300 MG</i>                                                           | 1A        | New starts limited to 7 day supply; QL(12 EA daily)  |
| <i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>                            | 1B        |                                                      | <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 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 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 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-300 MG</i>                                | 1B        | New starts limited to 7 day supply                   |
| <i>morphine sulfate TBCR</i>                                                  | 1B        | QL(2 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>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 325 MG/15ML-10 MG/15ML</i>                                                | 1B        | New starts limited to 7 day supply                   |
| <i>oxymorphone hcl TABS</i>                                                   | 1B        | QL(12 EA daily); PA                                  | <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 TB12 40 MG</i>                                             | 1B        | QL(4 EA daily); PA                                   |                                                                                                             |           |                                                      |
| <i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>          | 1B        | QL(2 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 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-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-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>                                    | 1B        | PA                                                  |
| <i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>                                                | 1B        | New starts limited to 7 day supply; QL(5 EA daily)  |
| <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)  |
| <b>Opioid Partial Agonists</b>                                                            |           |                                                     |
| <i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>                        | 1B        | QL(2 EA daily)                                      |
| <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 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 |
| <b>ANDROGENS-ANABOLIC - Drugs to Regulate Hormones</b>                                   |           |                                    |
| <b>Androgens</b>                                                                         |           |                                    |
| <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        |                                    |
| <b>ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching</b> |           |                                    |
| <b>Intrarectal Steroids</b>                                                              |           |                                    |
| <i>budesonide (intrarectal)</i>                                                          | 4         | QL(3.2 GM daily); PA               |
| <i>hydrocortisone (intrarectal)</i>                                                      | 1B        |                                    |
| <b>Rectal Steroids</b>                                                                   |           |                                    |
| <i>hydrocortisone (rectal) EX</i>                                                        | 1B        |                                    |
| <i>hydrocortisone acetate (rectal)</i>                                                   | 1B        |                                    |
| <b>Vasodilating Agents</b>                                                               |           |                                    |
| <i>nitroglycerin (intra-anal)</i>                                                        | 1B        | QL(2 GM daily)                     |
| <b>ANTHELMINTICS - Drugs to Treat Worm Infections</b>                                    |           |                                    |
| <b>Anthelmintics</b>                                                                     |           |                                    |

| 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                                                                                                                          |
| <b>ANTIANGINAL AGENTS - Drugs to Treat Chest Pain</b>      |           |                                                                                                                             |
| 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        |                                                                                                                             |
| <b>ANTIANXIETY AGENTS - Drugs to Treat Anxiety</b>         |           |                                                                                                                             |
| 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        |                      |
| <b>Benzodiazepines</b>                                         |           |                      |
| <i>alprazolam TABS 2 MG</i>                                    | 1B        | QL(4 EA daily)       |
| <i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>                   | 1A        | 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        |                      |
| <b>ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms</b> |           |                      |
| 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    |
|---------------------------------------------------------------------------------|-----------|-------------------------|
| <i>flecainide acetate</i>                                                       | 1B        |                         |
| <i>propafenone hcl CP12</i>                                                     | 1B        |                         |
| <i>propafenone hcl TABS</i>                                                     | 1B        |                         |
| Antiarrhythmics Type III                                                        |           |                         |
| <i>amiodarone hcl SOLN 150 MG/3ML</i>                                           | 1B        |                         |
| <i>amiodarone hcl TABS</i>                                                      | 1B        |                         |
| <i>dofetilide</i>                                                               | 1B        |                         |
| <b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions</b> |           |                         |
| Antiasthmatic - Monoclonal Antibodies                                           |           |                         |
| FASENRA PEN SOAJ                                                                | 4         | QL(0.036 ML daily); PA  |
| FASENRA SOSY 10 MG/0.5ML                                                        | 4         | QL(0.018 ML daily); PA  |
| FASENRA SOSY 30 MG/ML                                                           | 4         | QL(0.036 ML daily); PA  |
| NUCALA SOAJ                                                                     | 4         | QL(0.1073 ML daily); PA |
| NUCALA SOLR                                                                     | 4         | QL(0.1073 EA daily); PA |
| NUCALA SOSY 100 MG/ML                                                           | 4         | QL(0.1073 ML daily); PA |
| NUCALA SOSY 40 MG/0.4ML                                                         | 4         | QL(0.0144 ML daily); PA |
| XOLAIR SOAJ 150 MG/ML, 300 MG/2ML                                               | 4         | QL(0.286 ML daily); PA  |
| XOLAIR SOAJ 75 MG/0.5ML                                                         | 4         | QL(0.036 ML daily); PA  |
| XOLAIR SOLR                                                                     | 4         | QL(0.286 EA daily); PA  |
| XOLAIR SOSY 150 MG/ML, 300 MG/2ML                                               | 4         | QL(0.286 ML daily); PA  |
| XOLAIR SOSY 75 MG/0.5ML                                                         | 4         | QL(0.036 ML daily); PA  |
| Anti-Inflammatory Agents                                                        |           |                         |
| <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                                               |
|--------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------------|
| INCRUSE ELLIPTA                                                                                  | 2         | QL(1 EA daily)                                                     |
| <i>ipratropium bromide SOLN 0.02 %</i>                                                           | 1B        | QL(15 ML daily)                                                    |
| SPIRIVA RESPIMAT AERS IN                                                                         | 2         | QL(0.14 GM daily)                                                  |
| <i>tiotropium bromide CAPS IN 18 MCG</i>                                                         | 1B        | QL(1 EA daily)                                                     |
| Leukotriene Modulators                                                                           |           |                                                                    |
| <i>montelukast sodium CHEW</i>                                                                   | 1B        | QL(1 EA daily)                                                     |
| <i>montelukast sodium PACK</i>                                                                   | 1B        | QL(1 EA daily)                                                     |
| <i>montelukast sodium TABS</i>                                                                   | 1B        | QL(1 EA daily)                                                     |
| <i>zafirlukast</i>                                                                               | 1B        | QL(2 EA daily)                                                     |
| <i>zileuton TB12</i>                                                                             | 3         | QL(4 EA daily); PA                                                 |
| Selective Phosphodiesterase 4 (PDE4) Inhibitors                                                  |           |                                                                    |
| <i>roflumilast</i>                                                                               | 3         | QL(1 EA daily)                                                     |
| Steroid Inhalants                                                                                |           |                                                                    |
| ALVESCO                                                                                          | 3         | 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 |
| <i>budesonide (inhalation) SUSP</i>                                                              | 1B        | QL(4 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 |
| <i>fluticasone propionate (inhalation) AEPB</i>                                                  | 1B        |                                                                    |
| <i>fluticasone propionate hfa</i>                                                                | 1B        | QL(0.8 GM daily)                                                   |
| PULMICORT FLEXHALER AEPB                                                                         | 2         |                                                                    |
| QVAR REDIHALER                                                                                   | 2         |                                                                    |
| Sympathomimetics                                                                                 |           |                                                                    |

| 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                        | 2         | QL(2 EA daily)                                           |
| XARELTO TABS 10 MG, 20 MG                         | 2         | QL(1 EA daily)                                           |
| XARELTO TABS 2.5 MG, 15 MG ( <i>rivaroxaban</i> ) | 2         | QL(2 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 30 MG/0.3ML</i>                                          | 4         | QL(0.6 ML daily); SP                                         |
| <i>enoxaparin sodium SOSY 40 MG/0.4ML</i>                                          | 4         | QL(0.8 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>fondaparinux sodium 10 MG/0.8ML</i>                                             | 4         | QL(7.2 ML per 180 day(s) retail; 7 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 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 2.5 MG/0.5ML</i>                                            | 4         | QL(4.5 ML per 180 day(s) retail; 4 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 2 MG ( <i>perampanel</i> )               | 3         | QL(6 EA daily); PA                                                 |
| FYCOMPA TABS 8 MG, 10 MG, 12 MG ( <i>perampanel</i> ) | 3         | QL(1 EA daily); PA                                                 |
| FYCOMPA TABS 6 MG ( <i>perampanel</i> )               | 3         | QL(2 EA daily); PA                                                 |
| FYCOMPA TABS 4 MG ( <i>perampanel</i> )               | 3         | QL(3 EA daily); PA                                                 |
| <i>perampanel TABS 4 MG</i>                           | 1B        | QL(3 EA daily); PA                                                 |
| <i>perampanel TABS 6 MG</i>                           | 1B        | QL(2 EA daily); PA                                                 |
| <i>perampanel TABS 2 MG</i>                           | 1B        | QL(6 EA daily); PA                                                 |
| <i>perampanel TABS 8 MG, 10 MG, 12 MG</i>             | 1B        | QL(1 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 ( <i>eslicarbazepine acetate</i> ) | 3         | QL(2 EA daily); ST   | <i>lacosamide TABS</i>                                             | 1B        | QL(2 EA daily)       |
| BANZEL TABS 200 MG ( <i>rufinamide</i> )                                 | 2         | QL(2 EA daily); PA   | <i>lamotrigine CHEW 5 MG</i>                                       | 1B        | QL(100 EA daily)     |
| BANZEL TABS 400 MG ( <i>rufinamide</i> )                                 | 2         | QL(8 EA daily); PA   | <i>lamotrigine CHEW 25 MG</i>                                      | 1B        | QL(20 EA daily)      |
| BRIVIACT SOLN PO 10 MG/ML                                                | 3         | QL(20 ML daily); PA  | <i>lamotrigine TABS</i>                                            | 1B        |                      |
| BRIVIACT TABS                                                            | 3         | QL(2 EA daily); PA   | <i>lamotrigine TBDP</i>                                            | 1B        | QL(1 EA daily)       |
| <i>carbamazepine CHEW 100 MG</i>                                         | 1B        |                      | <i>levetiracetam SOLN IV 500 MG/5ML</i>                            | 1B        | QL(30 ML daily)      |
| <i>carbamazepine CP12 100 MG</i>                                         | 1B        |                      | <i>levetiracetam TABS 250 MG, 750 MG</i>                           | 1B        | QL(4 EA daily)       |
| <i>carbamazepine CP12 200 MG</i>                                         | 1B        | QL(6 EA daily)       | <i>levetiracetam TABS 500 MG</i>                                   | 1B        | QL(6 EA daily)       |
| <i>carbamazepine CP12 300 MG</i>                                         | 1B        | QL(4 EA daily)       | <i>levetiracetam TABS 1000 MG</i>                                  | 1B        | QL(3 EA daily)       |
| <i>carbamazepine SUSP</i>                                                | 1B        |                      | <i>levetiracetam TB24</i>                                          | 1B        | QL(4 EA daily)       |
| <i>carbamazepine TABS</i>                                                | 1B        |                      | <i>oxcarbazepine SUSP</i>                                          | 1B        | QL(40 ML daily)      |
| <i>carbamazepine TB12 200 MG</i>                                         | 1B        | QL(6 EA daily)       | <i>oxcarbazepine TABS 150 MG, 300 MG</i>                           | 1B        | QL(3 EA daily)       |
| <i>carbamazepine TB12 100 MG, 400 MG</i>                                 | 1B        | QL(4 EA daily)       | <i>oxcarbazepine TABS 600 MG</i>                                   | 1B        | QL(4 EA daily)       |
| DIACOMIT CAPS 500 MG                                                     | 4         | QL(6 EA daily); PA   | <i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i> | 3         | QL(3 EA daily); PA   |
| DIACOMIT CAPS 250 MG                                                     | 4         | QL(12 EA daily); PA  | <i>pregabalin CAPS 225 MG, 300 MG</i>                              | 3         | QL(2 EA daily); PA   |
| DIACOMIT PACK 500 MG                                                     | 4         | QL(6 EA daily); PA   | <i>pregabalin SOLN</i>                                             | 3         | QL(30 ML daily); PA  |
| DIACOMIT PACK 250 MG                                                     | 4         | QL(12 EA daily); PA  | <i>primidone 50 MG, 250 MG</i>                                     | 1B        |                      |
| EPIDIOLEX                                                                | 3         | PA                   | <i>rufinamide SUSP</i>                                             | 1B        | QL(80 ML daily); PA  |
| <i>eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG</i>            | 1B        | QL(2 EA daily); ST   | <i>rufinamide TABS 200 MG</i>                                      | 1B        | QL(2 EA daily); PA   |
| <i>gabapentin CAPS</i>                                                   | 1B        |                      | <i>rufinamide TABS 400 MG</i>                                      | 1B        | QL(8 EA daily); PA   |
| <i>gabapentin SOLN</i>                                                   | 1B        | QL(60 ML daily)      | TEGRETOL SUSP ( <i>carbamazepine</i> )                             | 2         |                      |
| <i>gabapentin TABS 600 MG, 800 MG</i>                                    | 1B        |                      | TEGRETOL TABS ( <i>carbamazepine</i> )                             | 2         |                      |
| <i>lacosamide SOLN IV 200 MG/20ML</i>                                    | 1B        | QL(40 ML daily)      | <i>topiramate CPSP 25 MG</i>                                       | 1B        | QL(8 EA daily)       |
|                                                                          |           |                      | <i>topiramate CPSP 15 MG</i>                                       | 1B        | QL(6 EA daily)       |

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| Drug Name                                               | Drug Tier | Requirements/ Limits   |
|---------------------------------------------------------|-----------|------------------------|
| <i>topiramate CS24</i>                                  | 3         | PA                     |
| <i>topiramate TABS 25 MG, 100 MG</i>                    | 1B        | QL(4 EA daily)         |
| <i>topiramate TABS 50 MG</i>                            | 1B        | QL(6 EA daily)         |
| <i>topiramate TABS 200 MG</i>                           | 1B        | QL(2 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                                                 | Drug Name                                                            | Drug Tier | Requirements/ Limits |
|-------------------------------------------------------------|-----------|----------------------------------------------------------------------|----------------------------------------------------------------------|-----------|----------------------|
| <i>escitalopram oxalate TABS</i>                            | 1B        | +                                                                    | <i>amitriptyline hcl TABS</i>                                        | 1B        | #                    |
| <i>fluoxetine hcl CAPS 10 MG</i>                            | 1A        | #                                                                    | <i>amoxapine</i>                                                     | 1B        |                      |
| <i>fluoxetine hcl CAPS 20 MG, 40 MG</i>                     | 1B        | #                                                                    | <i>clomipramine hcl</i>                                              | 1B        |                      |
| <i>fluoxetine hcl CPDR</i>                                  | 1B        |                                                                      | <i>desipramine hcl TABS</i>                                          | 1B        |                      |
| <i>fluoxetine hcl SOLN</i>                                  | 1B        |                                                                      | <i>doxepin hcl CAPS</i>                                              | 1B        |                      |
| <i>fluoxetine hcl TABS</i>                                  | 1B        |                                                                      | <i>doxepin hcl CONC</i>                                              | 1B        |                      |
| <i>fluvoxamine maleate TABS</i>                             | 1B        | +                                                                    | <i>imipramine hcl TABS</i>                                           | 1B        | +                    |
| <i>paroxetine hcl SUSP</i>                                  | 1B        |                                                                      | <i>imipramine pamoate</i>                                            | 1B        |                      |
| <i>paroxetine hcl TABS</i>                                  | 1B        | #                                                                    | <i>nortriptyline hcl CAPS</i>                                        | 1B        |                      |
| <i>paroxetine hcl TB24</i>                                  | 1B        |                                                                      | <i>nortriptyline hcl SOLN</i>                                        | 1B        |                      |
| <i>sertraline hcl CONC</i>                                  | 1B        |                                                                      | <i>protriptyline hcl</i>                                             | 1B        |                      |
| <i>sertraline hcl TABS</i>                                  | 1B        | #                                                                    | <i>trimipramine maleate CAPS</i>                                     | 1B        |                      |
| <b>Serotonin Modulators</b>                                 |           |                                                                      | <b>ANTIDIABETICS - Drugs to Regulate Blood Sugar</b>                 |           |                      |
| <i>nefazodone hcl</i>                                       | 1B        |                                                                      | <b>Alpha-Glucosidase Inhibitors</b>                                  |           |                      |
| <i>trazodone hcl TABS</i>                                   | 1B        |                                                                      | <i>acarbose</i>                                                      | 1B        | QL(3 EA daily)       |
| TRINTELLIX                                                  | 3         | QL(1 EA daily); PA                                                   | <i>miglitol</i>                                                      | 1B        | QL(3 EA daily)       |
| VIIBRYD STARTER PACK KIT                                    | 3         | 1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail | <b>Antidiabetic Combinations</b>                                     |           |                      |
| <i>vilazodone hcl TABS</i>                                  | 1B        |                                                                      | <i>alogliptin-metformin hcl</i>                                      | 1B        | QL(2 EA daily); PA   |
| <b>Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)</b> |           |                                                                      | <i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i> | 1B        | QL(1 EA daily); PA   |
| <i>desvenlafaxine succinate</i>                             | 1B        |                                                                      | <i>alogliptin-pioglitazone 30 MG-12.5 MG</i>                         | 1B        | QL(2 EA daily); PA   |
| <i>duloxetine hcl CPEP</i>                                  | 1B        | #                                                                    | <i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>         | 2         | QL(1 EA daily)       |
| FETZIMA TITRATION C4PK                                      | 3         | PA                                                                   | <i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>          | 2         | QL(2 EA daily)       |
| FETZIMA CP24                                                | 3         | QL(1 EA daily); PA                                                   | <i>glipizide-metformin hcl 500 MG-5 MG</i>                           | 1B        | ++; QL(4 EA daily)   |
| <i>venlafaxine hcl CP24</i>                                 | 1B        | +                                                                    | <i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>          | 1B        | ++; QL(2 EA daily)   |
| <i>venlafaxine hcl TABS</i>                                 | 1B        | #                                                                    | <i>glyburide-metformin 250 MG-1.25 MG</i>                            | 1B        | ++; QL(2 EA daily)   |
| <i>venlafaxine hcl TB24</i>                                 | 1B        |                                                                      |                                                                      |           |                      |
| <b>Tricyclic Agents</b>                                     |           |                                                                      |                                                                      |           |                      |

| 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-100 MG                                | 2         | QL(1 EA daily)       |
| JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG                   | 2         | QL(2 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-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG | 2         | QL(2 EA daily)       |
| SYNJARDY XR TB24 1000 MG-25 MG                                | 2         | QL(1 EA daily)       |
| SYNJARDY TABS                                                 | 2         | QL(2 EA daily)       |
| TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG       | 2         | QL(2 EA daily)       |
| TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG            | 2         | QL(1 EA daily)       |
| XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG                        | 2         | QL(2 EA daily)       |
| XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG            | 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 ( <i>dapagliflozin propanediol-metformin hcl</i> ) | 2         | QL(1 EA daily)         |
| XULTOPHY                                                     | 2         | QL(0.5 ML daily); PA   |
| Biguanides                                                   |           |                        |
| <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 TABS 500 MG</i>                             | 1B        | +; QL(5 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 2 MG</i>                                  | 1B        | QL(8 EA daily)       |
| <i>repaglinide 0.5 MG, 1 MG</i>                          | 1B        | QL(4 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         |                                                                      |
| <b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>               |           |                                                                      |
| 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        |                                                                      |
| <b>ANTIEMETICS - Drugs to Treat Nausea and Vomiting</b> |           |                                                                      |
| 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 8 MG</i>                        | 1B        | QL(3 EA daily; 45 EA per fill retail; 45 per fill mail)              |

| Drug Name                                             | Drug Tier | Requirements/ Limits                                                                       |
|-------------------------------------------------------|-----------|--------------------------------------------------------------------------------------------|
| <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)                                                                         |
| <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 12.5 MG</i>                     | 1A        | RX/OTC                                                                                     |
| <i>meclizine hcl TABS 25 MG</i>                       | 1B        | 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                                                                                         |
| <b>ANTIFUNGALS - Drugs to Treat Fungal Infections</b> |           |                                                                                            |
| Antifungal - Glucan Synthesis Inhibitors              |           |                                                                                            |
| <i>caspofungin acetate</i>                            | 1B        |                                                                                            |
| ERAXIS                                                | 3         |                                                                                            |

| Drug Name                                        | Drug Tier | Requirements/ Limits   |
|--------------------------------------------------|-----------|------------------------|
| <i>micafungin sodium</i>                         | 1B        | PA                     |
| <b>Antifungals</b>                               |           |                        |
| <i>amphotericin b IV</i>                         | 3         |                        |
| <i>amphotericin b liposome</i>                   | 3         |                        |
| <i>flucytosine</i>                               | 1B        |                        |
| <i>griseofulvin microsize SUSP</i>               | 1B        | AL(At least 2 yrs old) |
| <i>griseofulvin microsize TABS</i>               | 1B        |                        |
| <i>griseofulvin ultramicrosize</i>               | 1B        |                        |
| <i>nystatin TABS</i>                             | 1B        |                        |
| <i>terbinafine hcl TABS</i>                      | 1B        | QL(1 EA daily)         |
| <b>Imidazole-Related Antifungals</b>             |           |                        |
| CRESEMBA CAPS 186 MG                             | 3         | PA                     |
| <i>fluconazole SUSP</i>                          | 1B        |                        |
| <i>fluconazole TABS</i>                          | 1B        |                        |
| <i>itraconazole CAPS</i>                         | 1B        | QL(4 EA daily); PA     |
| <i>itraconazole SOLN</i>                         | 1B        | QL(20 ML daily); PA    |
| <i>ketoconazole</i>                              | 1B        |                        |
| <i>posaconazole SUSP</i>                         | 3         | QL(20 ML daily)        |
| TOLSURA CAPS                                     | 4         | PA                     |
| <i>voriconazole TABS</i>                         | 1B        | QL(4 EA daily)         |
| <b>ANTIHISTAMINES - Drugs to Treat Allergies</b> |           |                        |
| <b>Antihistamines - Alkylamines</b>              |           |                        |
| <i>dexchlorpheniramine maleate SOLN</i>          | 1B        |                        |
| <b>Antihistamines - Ethanolamines</b>            |           |                        |
| <i>carbinoxamine maleate SOLN</i>                | 1B        |                        |
| <i>carbinoxamine maleate TABS 4 MG</i>           | 1B        |                        |
| <i>clemastine fumarate SYRP</i>                  | 1B        |                        |
| <i>clemastine fumarate TABS 2.68 MG</i>          | 1B        |                        |

| Drug Name                                                           | Drug Tier | Requirements/ Limits    |
|---------------------------------------------------------------------|-----------|-------------------------|
| <i>diphenhydramine hcl CAPS 50 MG</i>                               | 1A        |                         |
| <i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>                         | 1B        |                         |
| <i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i> | 1B        | QL(20 ML daily)         |
| <i>diphenhydramine hcl SOLN 50 MG/ML</i>                            | 1B        |                         |
| <b>Antihistamines - Non-Sedating</b>                                |           |                         |
| <i>cetirizine hcl TABS</i>                                          | 1A        | QL(1 EA daily)          |
| <i>desloratadine TABS</i>                                           | 1B        | QL(1 EA daily)          |
| <i>desloratadine TBDP 2.5 MG</i>                                    | 1B        | QL(1 EA daily)          |
| <i>levocetirizine dihydrochloride SOLN</i>                          | 1B        | QL(10 ML daily); RX/OTC |
| <i>levocetirizine dihydrochloride TABS</i>                          | 1B        | QL(1 EA daily); RX/OTC  |
| <i>loratadine CAPS</i>                                              | 1B        |                         |
| <i>loratadine CHEW</i>                                              | 1B        |                         |
| <i>loratadine SOLN</i>                                              | 1B        |                         |
| <i>loratadine TABS</i>                                              | 1A        |                         |
| <i>loratadine TBDP</i>                                              | 1B        |                         |
| QUZYTIR SOLN IV                                                     | 3         | PA                      |
| <b>Antihistamines - Phenothiazines</b>                              |           |                         |
| <i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>           | 1B        |                         |
| <i>promethazine hcl SUPP 50 MG</i>                                  | 1B        |                         |
| <i>promethazine hcl SUPP 12.5 MG, 25 MG</i>                         | 1B        | QL(6 EA daily)          |
| <i>promethazine hcl TABS</i>                                        | 1B        |                         |
| <b>Antihistamines - Piperidines</b>                                 |           |                         |
| <i>cyproheptadine hcl SYRP</i>                                      | 1B        |                         |
| <i>cyproheptadine hcl TABS</i>                                      | 1B        |                         |
| <b>ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol</b>        |           |                         |

| Drug Name                                            | Drug Tier | Requirements/ Limits | Drug Name                                                       | Drug Tier | Requirements/ Limits    |
|------------------------------------------------------|-----------|----------------------|-----------------------------------------------------------------|-----------|-------------------------|
| Antihyperlipidemics - Combinations                   |           |                      | <i>lovastatin TABS 40 MG</i>                                    | 1B        | +; QL(2 EA daily); PV   |
| <i>ezetimibe-simvastatin</i>                         | 1B        | QL(1 EA daily)       | <i>lovastatin TABS 10 MG, 20 MG</i>                             | 1B        | +; QL(1 EA daily); PV   |
| Antihyperlipidemics - Misc.                          |           |                      | <i>pravastatin sodium</i>                                       | 1B        | +; QL(1 EA daily)       |
| <i>icosapent ethyl 1 GM</i>                          | 1B        | QL(4 EA daily); PA   | <i>rosuvastatin calcium TABS</i>                                | 3         | QL(1 EA daily)          |
| <i>omega-3-acid ethyl esters</i>                     | 1B        | +; QL(4 EA daily)    | <i>simvastatin TABS</i>                                         | 1B        | +; QL(1 EA daily)       |
| Bile Acid Sequestrants                               |           |                      | Intestinal Cholesterol Absorption Inhibitors                    |           |                         |
| <i>cholestyramine light PACK</i>                     | 1B        | QL(6 EA daily)       | <i>ezetimibe</i>                                                | 1B        | +; QL(1 EA daily)       |
| <i>cholestyramine light POWD</i>                     | 1B        | QL(24 GM daily)      | Nicotinic Acid Derivatives                                      |           |                         |
| <i>cholestyramine PACK</i>                           | 1B        | QL(6 EA daily)       | <i>niacin (antihyperlipidemic) TBCR</i>                         | 1B        | QL(2 EA daily)          |
| <i>cholestyramine POWD</i>                           | 1B        | QL(25.2 GM daily)    | Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors        |           |                         |
| <i>colesevelam hcl PACK</i>                          | 1B        | QL(1 EA daily); PA   | REPATHA PUSHTRONEX SYSTEM SOCT                                  | 4         | QL(0.25 ML daily); PA   |
| <i>colesevelam hcl TABS</i>                          | 1B        | QL(7 EA daily)       | REPATHA SURECLICK SOAJ                                          | 4         | QL(0.0714 ML daily); PA |
| <i>colestipol hcl GRAN</i>                           | 1B        | QL(6 GM daily)       | REPATHA SOSY                                                    | 4         | QL(0.0714 ML daily); PA |
| <i>colestipol hcl PACK</i>                           | 1B        | QL(6 EA daily)       | ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure          |           |                         |
| <i>colestipol hcl TABS</i>                           | 1B        | QL(16 EA daily)      | ACE Inhibitors                                                  |           |                         |
| Fibric Acid Derivatives                              |           |                      | <i>benazepril hcl</i>                                           | 1B        | +                       |
| <i>choline fenofibrate</i>                           | 1B        | +; QL(1 EA daily)    | <i>captopril 25 MG, 50 MG, 100 MG</i>                           | 1B        | QL(3 EA daily)          |
| <i>fenofibrate micronized 43 MG, 130 MG</i>          | 1B        | QL(1 EA daily)       | <i>captopril 12.5 MG</i>                                        | 1B        |                         |
| <i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>  | 1B        | +; QL(1 EA daily)    | <i>enalapril maleate TABS</i>                                   | 1B        | +                       |
| <i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i> | 1B        | +; QL(1 EA daily)    | <i>fosinopril sodium</i>                                        | 1B        | +                       |
| <i>gemfibrozil TABS</i>                              | 1B        | +; QL(2 EA daily)    | <i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i> | 1B        | +                       |
| HMG CoA Reductase Inhibitors                         |           |                      | <i>moexipril hcl</i>                                            | 1B        | QL(2 EA daily)          |
| <i>atorvastatin calcium TABS</i>                     | 1B        | +; QL(1 EA daily)    | <i>perindopril erbumine 2 MG, 8 MG</i>                          | 1B        | QL(2 EA daily)          |
| <i>fluvastatin sodium CAPS 20 MG</i>                 | 1B        | QL(1 EA daily)       |                                                                 |           |                         |
| <i>fluvastatin sodium CAPS 40 MG</i>                 | 1B        | QL(2 EA daily)       |                                                                 |           |                         |

| Drug Name                                       | Drug Tier | Requirements/ Limits | Drug Name                                                                        | Drug Tier | Requirements/ Limits |
|-------------------------------------------------|-----------|----------------------|----------------------------------------------------------------------------------|-----------|----------------------|
| <i>perindopril erbumine 4 MG</i>                | 1B        |                      | <i>amlodipine besylate-valsartan</i>                                             | 1B        | QL(1 EA daily)       |
| <i>quinapril hcl 20 MG, 40 MG</i>               | 1B        |                      | <i>amlodipine-valsartan-hydrochlorothiazide</i>                                  | 3         |                      |
| <i>quinapril hcl 5 MG, 10 MG</i>                | 1B        | QL(2 EA daily)       | <i>atenolol &amp; chlorthalidone</i>                                             | 1B        |                      |
| <i>ramipril CAPS</i>                            | 1B        | +                    | <i>benazepril &amp; 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>benazepril &amp; hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>          | 1B        |                      |
| <i>trandolapril 4 MG</i>                        | 1B        | ++; QL(2 EA daily)   | <i>bisoprolol &amp; 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 &amp; hydrochlorothiazide 12.5 MG-5 MG</i>                  | 1B        | QL(2 EA daily)       |
| Angiotensin II Receptor Antagonists             |           |                      | <i>enalapril maleate &amp; hydrochlorothiazide 25 MG-10 MG</i>                   | 1B        |                      |
| <i>candesartan cilexetil</i>                    | 1B        | QL(1 EA daily)       | <i>fosinopril sodium &amp; 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 &amp; hydrochlorothiazide</i>                                      | 1B        | +                    |
| <i>losartan potassium</i>                       | 1B        | ++; QL(1 EA daily)   | <i>losartan potassium &amp; hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i> | 1B        | ++; QL(1 EA daily)   |
| <i>olmesartan medoxomil</i>                     | 1B        | ++; QL(1 EA daily)   | <i>losartan potassium &amp; hydrochlorothiazide 12.5 MG-50 MG</i>                | 1B        | ++; QL(2 EA daily)   |
| <i>telmisartan</i>                              | 1B        | QL(1 EA daily)       | <i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-50 MG</i>                     | 1B        | QL(1 EA daily)       |
| <i>valsartan TABS</i>                           | 1B        | ++; QL(1 EA daily)   | <i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>      | 1B        |                      |
| Antiadrenergic Antihypertensives                |           |                      |                                                                                  |           |                      |
| <i>clonidine hcl TABS</i>                       | 1B        | ++; QL(8 EA daily)   |                                                                                  |           |                      |
| <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                   |                                                                                  |           |                      |

| Drug Name                                                                  | Drug Tier | Requirements/ Limits |
|----------------------------------------------------------------------------|-----------|----------------------|
| <i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>                 | 1B        | ST                   |
| <i>olmesartan medoxomil-hydrochlorothiazide</i>                            | 1B        |                      |
| <i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>                         | 1B        | QL(4 EA daily)       |
| <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>telmisartan-amlodipine</i>                                              | 1B        | QL(1 EA daily)       |
| <i>telmisartan-hydrochlorothiazide</i>                                     | 1B        | QL(1 EA daily)       |
| <i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>                 | 3         |                      |
| <i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>                 | 3         | QL(1 EA daily)       |
| <i>valsartan-hydrochlorothiazide</i>                                       | 1B        | QL(1 EA daily)       |
| Antihypertensives - Misc.                                                  |           |                      |
| VECAMEYL                                                                   | 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        | +                    |
| <b>ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections</b> |           |                      |
| Anti-infective Agents - Misc.                                              |           |                      |

| Drug Name                                 | Drug Tier | Requirements/ Limits                                                                        |
|-------------------------------------------|-----------|---------------------------------------------------------------------------------------------|
| IMPAVIDO                                  | 3         | QL(3 EA daily); PA                                                                          |
| <i>metronidazole TABS 250 MG, 500 MG</i>  | 1B        |                                                                                             |
| <i>trimethoprim TABS</i>                  | 1B        |                                                                                             |
| 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 |
| XIFAXAN 550 MG                            | 3         | QL(3 EA daily); 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)                                                       |

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| Drug Name                                                                                        | Drug Tier | Requirements/ Limits       |
|--------------------------------------------------------------------------------------------------|-----------|----------------------------|
| <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) |
| 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        |                            |
| <b>ANTIMALARIALS - Drugs to Treat Malaria</b>                                                    |           |                            |

| Drug Name                                | Drug Tier | Requirements/ Limits                                                                                                                                                                 |
|------------------------------------------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>(Parasitic Infections)</b>            |           |                                                                                                                                                                                      |
| Antimalarial Combinations                |           |                                                                                                                                                                                      |
| <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 400 MG</i> | 1B        | QL(1 EA daily)                                                                                                                                                                       |
| <i>hydroxychloroquine sulfate 100 MG</i> | 1B        | QL(4 EA daily)                                                                                                                                                                       |
| <i>hydroxychloroquine sulfate 200 MG</i> | 1B        | QL(3 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                                                                                                                                                      |
| <b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>                                             |           |                                                                                                                                                         |
| 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        |                                                                                                                                                         |
| <b>ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)</b> |           |                                                                                                                                                         |
| 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                  |
| <b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer</b> |           |                     |
| 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 10 MG                                                         | 4         | SP; PA              |
| GLEOSTINE 40 MG, 100 MG                                                 | 4         | 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   | Drug Name                                    | Drug Tier | Requirements/ Limits   |
|--------------------------------------------------------|-----------|------------------------|----------------------------------------------|-----------|------------------------|
| <i>fludarabine phosphate SOLN</i>                      | 4         | SP; PA                 | MVASI                                        | 4         | PA                     |
| <i>fludarabine phosphate SOLR</i>                      | 4         | SP; PA                 | ZALTRAP 100 MG/4ML                           | 4         | SP; PA                 |
| <i>fluorouracil 500 MG/10ML</i>                        | 4         | SP; PA                 | ZIRABEV                                      | 4         | PA                     |
| <i>gemcitabine hcl SOLR 2 GM, 200 MG</i>               | 4         | SP; PA                 | Antineoplastic - Antibodies                  |           |                        |
| <i>mercaptopurine TABS</i>                             | 1B        |                        | ADCETRIS                                     | 4         | SP; PA                 |
| <i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i> | 1B        |                        | ARZERRA                                      | 4         | SP; PA                 |
| <i>methotrexate sodium SOLR</i>                        | 1B        | SP                     | LOQTORZI                                     | 4         | PA                     |
| <i>methotrexate sodium TABS 2.5 MG</i>                 | 1B        | SP                     | RUXIENCE                                     | 4         | PA                     |
| <i>nelarabine</i>                                      | 4         | SP; PA                 | TRUXIMA                                      | 4         | PA                     |
| <i>pemetrexed disodium SOLR 500 MG</i>                 | 4         | SP; PA                 | YERVOY                                       | 4         | SP; PA                 |
| <i>pralatrexate 20 MG/ML</i>                           | 4         | SP; PA                 | Antineoplastic - Anti-HER2 Agents            |           |                        |
| TABLOID                                                | 4         | SP; PA                 | KANJINTI                                     | 4         | PA                     |
| TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG                | 4         | SP; PA                 | OGIVRI                                       | 4         | PA                     |
| Antineoplastic - Angiogenesis Inhibitors               |           |                        | PERJETA                                      | 4         | SP; PA                 |
| INLYTA                                                 | 4         | QL(2 EA daily); SP; PA | TRAZIMERA                                    | 4         | PA                     |
| LENVIMA (10 MG DAILY DOSE)                             | 4         | QL(1 EA daily); PA     | TUKYSA                                       | 4         | PA                     |
| LENVIMA (12 MG DAILY DOSE)                             | 4         | QL(3 EA daily); PA     | Antineoplastic - EGFR Inhibitors             |           |                        |
| LENVIMA (14 MG DAILY DOSE)                             | 4         | QL(2 EA daily); PA     | ERBITUX                                      | 4         | SP; PA                 |
| LENVIMA (18 MG DAILY DOSE)                             | 4         | QL(3 EA daily); PA     | <i>erlotinib hcl</i>                         | 4         | QL(1 EA daily); SP; PA |
| LENVIMA (20 MG DAILY DOSE)                             | 4         | QL(2 EA daily); PA     | <i>gefitinib</i>                             | 4         | QL(2 EA daily); PA     |
| LENVIMA (24 MG DAILY DOSE)                             | 4         | QL(3 EA daily); PA     | GILOTRIF                                     | 4         | QL(1 EA daily); PA     |
| LENVIMA (4 MG DAILY DOSE)                              | 4         | QL(1 EA daily); PA     | TAGRISSO 80 MG                               | 4         | QL(1 EA daily); PA     |
| LENVIMA (8 MG DAILY DOSE)                              | 4         | QL(2 EA daily); PA     | TAGRISSO 40 MG                               | 4         | QL(2 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 40 MG                       | 4         | QL(4 EA daily); PA          |
| XTANDI TABS 80 MG                       | 4         | QL(2 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 400 MG                        | 4         | QL(1 EA daily); PA     | KISQALI (600 MG DOSE)            | 4         | QL(2.5 EA daily); PA   |
| BOSULIF TABS 100 MG, 500 MG                | 4         | QL(1 EA daily); SP; 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 120 MG, 240 MG          | 3         | QL(2 EA daily); PA     |
| CAPRELSA                                   | 4         | QL(1 EA daily); SP; PA | LUMAKRAS 320 MG                  | 3         | QL(3 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 37.5 MG</i>                 | 4         | QL(1 EA daily); PA         |
| MEKINIST SOLR                                      | 4         | QL(40 ML daily); PA    | <i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>   | 4         | QL(1 EA daily); SP; 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 100 MG                              | 4         | QL(3 EA daily); PA         |
| SCEMBLIX 20 MG, 40 MG                              | 4         | QL(2 EA daily); PA     | ZEJULA TABS 200 MG, 300 MG                      | 4         | QL(1 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 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i> | 1B        |                      |
| <i>pramipexole dihydrochloride TABS 0.125 MG</i>                               | 1B        | QL(4 EA daily)       |
| <i>ropinirole hydrochloride TABS</i>                                           | 1B        |                      |
| <i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>                          | 1B        | QL(1 EA daily); ST   |
| <i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>                               | 1B        | QL(2 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        |                      |
| <b>ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders</b>         |           |                      |
| 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 200 MG                                                                 | 3         | QL(8 EA daily); ST   |
| EQUETRO 300 MG                                                                 | 3         | QL(4 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 25 MG</i>                        | 1B        | QL(3 EA daily)                          |
| <i>clozapine TBDP 100 MG</i>                       | 1B        | QL(9 EA daily)                          |
| <i>clozapine TBDP 12.5 MG, 150 MG</i>              | 1B        | QL(6 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 200 MG</i>                                                                        | 1B        | QL(2 EA daily)       |
| <i>thiothixene</i>                                                           | 1B        |                                         | <i>etravirine 100 MG</i>                                                                        | 1B        | QL(4 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 250 MG                       | 3         | QL(10 EA daily)             |
| <i>lamivudine SOLN</i>          | 1B        | QL(30 ML daily)      | VIRACEPT TABS 625 MG                       | 3         | QL(4 EA daily)              |
| <i>lamivudine TABS 300 MG</i>   | 1B        | QL(1 EA daily)       | VIREAD POWD                                | 3         | QL(7.5 GM daily)            |
| <i>lamivudine TABS 150 MG</i>   | 1B        | QL(2 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 100 MG, 200 MG</i>              | 1B        | +                    |
| Herpes Agents                                      |           |                                                                                                                                                | <i>labetalol hcl TABS 300 MG</i>                      | 1B        | +; QL(8 EA daily)    |
| <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 125 MG, 250 MG</i>                  | 1B        | QL(3 EA daily)                                                                                                                                 | <i>betaxolol hcl</i>                                  | 1B        |                      |
| <i>famciclovir 500 MG</i>                          | 1B        | QL(4 EA daily)                                                                                                                                 | <i>bisoprolol fumarate</i>                            | 1B        | +                    |
| <i>valacyclovir hcl 1 GM</i>                       | 1B        | QL(4 EA daily)                                                                                                                                 | <i>metoprolol succinate TB24 200 MG</i>               | 1B        | +; QL(2 EA daily)    |
| <i>valacyclovir hcl 500 MG</i>                     | 1B        | QL(2 EA daily)                                                                                                                                 | <i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i> | 1B        | +                    |
| 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 80 MG</i>                             | 1B        |                      |
| <i>carvedilol</i>                                  | 1B        | +                                                                                                                                              | <i>nadolol TABS 40 MG</i>                             | 1B        | QL(6 EA daily)       |
|                                                    |           |                                                                                                                                                | <i>nadolol TABS 20 MG</i>                             | 1B        | QL(3 EA daily)       |
|                                                    |           |                                                                                                                                                | <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 |
|------------------------------------------------------------------------------------|-----------|----------------------|
| <b>CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure</b>               |           |                      |
| Calcium Channel Blockers                                                           |           |                      |
| <i>amlodipine besylate TABS</i>                                                    | 1B        | +                    |
| <i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>                      | 1B        |                      |
| <i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>                              | 1B        | QL(2 EA daily)       |
| <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 20 MG</i>                                                       | 1B        | QL(9 EA daily)       |
| <i>nifedipine CAPS 10 MG</i>                                                       | 1B        |                      |
| <i>nifedipine TB24</i>                                                             | 1B        |                      |
| <i>nifedipine TB24 60 MG</i>                                                       | 1B        | +; QL(2 EA daily)    |
| <i>nifedipine TB24 90 MG</i>                                                       | 1B        | +; QL(1 EA daily)    |
| <i>nifedipine TB24 30 MG</i>                                                       | 1B        | +                    |
| <i>nimodipine CAPS</i>                                                             | 1B        |                      |
| <i>nisoldipine</i>                                                                 | 1B        |                      |
| <i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>                           | 1B        | QL(1 EA daily)       |

| Drug Name                                                                              | Drug Tier | Requirements/ Limits         |
|----------------------------------------------------------------------------------------|-----------|------------------------------|
| <i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>                                       | 1B        |                              |
| <i>verapamil hcl SOLN 2.5 MG/ML</i>                                                    | 1B        |                              |
| <i>verapamil hcl TABS</i>                                                              | 1B        | +                            |
| <i>verapamil hcl TBCR</i>                                                              | 1B        | +                            |
| <b>CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm</b>           |           |                              |
| 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         |                              |
| <b>CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions</b> |           |                              |
| 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 125 MG</i>                              | 4         | QL(2 EA daily); SP; PA                  |
| <i>bosentan TABS 62.5 MG</i>                             | 4         | QL(2 EA daily); 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 |
| UPTRAVI TABS 200 MCG                                     | 4         | 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   |
| 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 &amp; 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 &amp; estrad-fe CAPS</i>                                        | 0         |                      |
| <i>ceftriaxone sodium IJ 1 GM, 2 GM, 500 MG</i>            | 1B        |                      | <i>norethin acet &amp; estrad-fe CHEW</i>                                        | 0         |                      |
| <i>ceftriaxone sodium IJ 250 MG</i>                        | 1A        |                      | <i>norethin acet &amp; estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i> | 0         |                      |
| Cephalosporins - 4th Generation                            |           |                      | <i>norethindrone &amp; eth estradiol</i>                                         | 0         |                      |
| <i>cefepime hcl SOLR IV 2 GM</i>                           | 1B        |                      | <i>norethindrone &amp; ethinyl estradiol-fe</i>                                  | 0         |                      |
| Cephalosporins - 5th Generation                            |           |                      | <i>norethindrone acet &amp; eth estra TABS</i>                                   | 0         |                      |
| TEFLARO                                                    | 3         |                      | <i>norethindrone acetate-ethinyl estradiol-fe</i>                                | 0         |                      |
| <b>CONTRACEPTIVES - Drugs to Prevent Pregnancy</b>         |           |                      | <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 &amp; ethinyl estradiol</i>                 | 0         |                      | <i>norgestrel &amp; 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 &amp; 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               |
|--------------------------------------------------------------------------------------|-----------|------------------------------------|
| <b>CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions</b> |           |                                    |
| 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 1 MG, 5 MG</i>                                    | 1B        |                                    |
| <i>prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG</i>                   | 1A        |                                    |
| <i>prednisone TBPk</i>                                               | 1B        |                                    |
| SOLU-CORTEF 250 MG                                                   | 3         |                                    |
| SOLU-CORTEF 100 MG, 500 MG, 1000 MG                                  | 3         | 2 max fill(s) per 30 day(s) retail |
| 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 100 MG</i>                                            | 1B        | QL(6 EA daily)                     |
| <i>benzonatate 200 MG</i>                                            | 1B        | QL(3 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 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>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)     |
| <b>Agents for External Genital and Perianal Warts</b>       |           |                                                                |
| VEREGEN                                                     | 3         | QL(1 GM daily)                                                 |

| Drug Name                                 | Drug Tier | Requirements/ Limits                                          |
|-------------------------------------------|-----------|---------------------------------------------------------------|
| <b>Antibiotics - Topical</b>              |           |                                                               |
| 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    |
| <b>Antifungals - Topical</b>              |           |                                                               |
| <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                                     | Drug Name                                        | Drug Tier | Requirements/ Limits                                                                                              |
|-------------------------------------|-----------|----------------------------------------------------------|--------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------|
| COSENTYX SENSOREADY PEN SOAJ        | 4         | QL(0.072 ML daily); PA                                   | <i>mafenide acetate PACK</i>                     | 3         |                                                                                                                   |
| COSENTYX UNOREADY SOAJ              | 4         | QL(0.072 ML daily); PA                                   | <i>silver sulfadiazine</i>                       | 1B        | QL(20 GM daily)                                                                                                   |
| COSENTYX SOSY 150 MG/ML             | 4         | QL(0.036 ML daily); PA                                   | SULFAMYLON CREA                                  | 3         |                                                                                                                   |
| COSENTYX SOSY 75 MG/0.5ML           | 4         | QL(0.18 ML daily); PA                                    | Corticosteroids - Topical                        |           |                                                                                                                   |
| <i>methoxsalen rapid</i>            | 1B        | QL(4 EA daily)                                           | <i>alclometasone dipropionate CREA</i>           | 1B        | QL(2 GM daily)                                                                                                    |
| SKYRIZI PEN SOAJ                    | 4         | QL(0.025 ML daily); PA                                   | <i>alclometasone dipropionate OINT</i>           | 1B        | QL(3 GM daily)                                                                                                    |
| SKYRIZI SOSY                        | 4         | QL(0.025 ML daily); PA                                   | <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 |
| STELARA SOLN 45 MG/0.5ML            | 4         | QL(0.012 ML daily); PA                                   | <i>amcinonide LOTN</i>                           | 3         |                                                                                                                   |
| STELARA SOSY 45 MG/0.5ML            | 4         | QL(0.012 ML daily); PA                                   | <i>amcinonide OINT</i>                           | 3         |                                                                                                                   |
| STELARA SOSY 90 MG/ML               | 4         | QL(0.018 ML daily); PA                                   | <i>betamethasone dipropionate (topical) CREA</i> | 1B        | QL(3 GM daily)                                                                                                    |
| <i>tazarotene CREA 0.1 %</i>        | 1B        | QL(1 GM daily)                                           | <i>betamethasone dipropionate (topical) LOTN</i> | 1B        |                                                                                                                   |
| TREMFYA ONE-PRESS SOPN SC 100 MG/ML | 4         | QL(0.018 ML daily); PA                                   | <i>betamethasone dipropionate (topical) OINT</i> | 1B        | QL(3 GM daily)                                                                                                    |
| TREMFYA PEN SOAJ 100 MG/ML          | 4         | QL(0.018 ML daily); PA                                   | <i>betamethasone dipropionate augmented CREA</i> | 1B        | QL(3.5 GM daily)                                                                                                  |
| TREMFYA SOSY 100 MG/ML              | 4         | QL(0.018 ML daily); PA                                   | <i>betamethasone dipropionate augmented LOTN</i> | 1B        | QL(5 ML daily)                                                                                                    |
| Antiseborrheic Products             |           |                                                          | <i>betamethasone dipropionate augmented OINT</i> | 1B        | QL(3.5 GM daily)                                                                                                  |
| <i>selenium sulfide LOTN 2.5 %</i>  | 1B        |                                                          | <i>betamethasone valerate CREA</i>               | 1B        | QL(2.5 GM daily)                                                                                                  |
| Antivirals - Topical                |           |                                                          | <i>betamethasone valerate FOAM</i>               | 1B        | QL(1.67 GM daily)                                                                                                 |
| <i>acyclovir topical CREA</i>       | 1B        | 1 package(s) per fill retail; 1 package(s) per fill mail | <i>betamethasone valerate LOTN</i>               | 1B        | QL(5 ML daily)                                                                                                    |
| <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                                               | 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 0.1 %</i>                  | 1B        | QL(4 GM daily)             |
| <i>clobetasol propionate FOAM</i>                    | 1B        | QL(3 GM daily); ST                                                 | <i>fluocinonide CREA 0.05 %</i>                 | 1B        | QL(2 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 0.025 %</i>           | 1B        | QL(4 GM daily)                                                     | <i>hydrocortisone (topical) LOTN 2.5 %</i>      | 1B        |                            |
| <i>fluocinolone acetonide CREA 0.01 %</i>            | 1B        |                                                                    | <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 0.5 %</i>          | 1B        | QL(5 GM daily)            |
| <i>triamcinolone acetonide (topical) CREA 0.1 %</i>          | 1B        | QL(3.34 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 0.025 %, 0.1 %</i> | 1B        | QL(15.15 GM daily)        |
| <i>triamcinolone acetonide (topical) OINT 0.5 %</i>          | 1B        | QL(6 GM daily)            |
| <b>Eczema Agents</b>                                         |           |                           |
| 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 300 MG/2ML                                     | 4         | QL(0.29 ML daily); PA     |
| DUPIXENT SOSY 200 MG/1.14ML                                  | 4         | QL(0.082 ML daily); PA    |
| <b>Emollients</b>                                            |           |                           |
| <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                    |
| <b>Enzymes - Topical</b>                                     |           |                           |
| SANTYL OINT                                                  | 3         | PA                        |

| Drug Name                                              | Drug Tier | Requirements/ Limits                        |
|--------------------------------------------------------|-----------|---------------------------------------------|
| <b>Immunomodulating Agents - Topical</b>               |           |                                             |
| <i>imiquimod 5 %</i>                                   | 1B        | QL(12 EA per fill retail; 12 per fill mail) |
| <b>Immunosuppressive Agents - Topical</b>              |           |                                             |
| <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                  |
| <b>Keratolytic/Antimitotic/Vesicant Agents</b>         |           |                                             |
| <i>podofilox SOLN</i>                                  | 1B        |                                             |
| <b>Local Anesthetics - Topical</b>                     |           |                                             |
| <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                                          |
| <b>Phosphodiesterase 4 (PDE4) Inhibitors - Topical</b> |           |                                             |
| EUCRISA                                                | 3         | QL(2 GM daily); PA                          |
| <b>Rosacea Agents</b>                                  |           |                                             |
| <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 0.75 %</i>              | 1B        | QL(3 GM daily)                              |
| <i>metronidazole (topical) GEL 1 %</i>                 | 1B        | QL(5 GM daily)                              |
| <i>metronidazole (topical) LOTN</i>                    | 1B        |                                             |
| <b>Scabicides &amp; Pediculicides</b>                  |           |                                             |
| <i>crotamiton LOTN</i>                                 | 1B        | PA                                          |
| <i>ivermectin (pediculicide)</i>                       | 1B        | PA                                          |

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| 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                                                                         |
| <b>DIAGNOSTIC PRODUCTS</b>                                   |           |                                                                            |
| 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                                               |
| <b>DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes</b> |           |                                                                            |
| 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         |                                                   |
| <b>DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure</b>                                                                                                                                                                        |           |                                                   |
| 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 &amp; hydrochlorothiazide</i>                                                                                                                                                                                                                | 1B        |                                                   |
| <i>spironolactone &amp; hydrochlorothiazide</i>                                                                                                                                                                                                           | 1B        |                                                   |
| <i>triamterene &amp; hydrochlorothiazide CAPS 25 MG-37.5 MG</i>                                                                                                                                                                                           | 1B        |                                                   |
| <i>triamterene &amp; 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 1.25 MG</i>                             | 1B        | QL(1 EA daily)         |
| <i>indapamide TABS 2.5 MG</i>                              | 1B        | QL(2 EA daily)         |
| <i>metolazone</i>                                          | 1B        | QL(2 EA daily)         |
| <b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>              |           |                        |
| <b>- Drugs to Treat Bone Disease and Regulate Hormones</b> |           |                        |
| Bone Density Regulators                                    |           |                        |
| <i>alendronate sodium TABS 5 MG, 10 MG</i>                 | 1B        | QL(1 EA daily)         |
| <i>alendronate sodium TABS 35 MG, 70 MG</i>                | 1B        | QL(0.143 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) 11.25 MG                           | 4         | PA                     |
| LUPRON DEPOT-PED (3-MONTH) 30 MG                              | 4         | SP; 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 0.2 MG</i>               | 1B        | QL(8 EA daily)         |
| <i>desmopressin acetate TABS 0.1 MG</i>               | 1B        | QL(6 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                 |

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| Drug Name                                                                    | Drug Tier | Requirements/ Limits |
|------------------------------------------------------------------------------|-----------|----------------------|
| <b>ESTROGENS - Hormone Replacement/Modifying Drugs</b>                       |           |                      |
| Estrogen Combinations                                                        |           |                      |
| ACTIVELLA TABS 1 MG-0.5 MG ( <i>estradiol &amp; norethindrone acetate</i> )  | 3         |                      |
| ANGELIQ                                                                      | 3         |                      |
| BIJUVA                                                                       | 3         |                      |
| CLIMARA PRO                                                                  | 3         |                      |
| COMBIPATCH PTTW                                                              | 3         |                      |
| DUAVEE                                                                       | 3         |                      |
| <i>esterified estrogens &amp; methyltestosterone</i>                         | 3         |                      |
| <i>estradiol &amp; 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)       |
| <b>FLUOROQUINOLONES - Drugs to Treat Bacterial Infections</b>                             |           |                      |
| 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 250 MG, 750 MG</i>                                                   | 1B        |                      |
| <i>levofloxacin TABS 500 MG</i>                                                           | 1A        |                      |
| <i>moxifloxacin hcl in sodium chloride</i>                                                | 1B        |                      |
| <i>moxifloxacin hcl TABS</i>                                                              | 1B        |                      |
| <i>ofloxacin 300 MG, 400 MG</i>                                                           | 1B        |                      |
| <b>GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs</b>             |           |                      |
| 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                   |
| <b>GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System</b> |           |                      |
| Alkalinizers                                                                                                      |           |                      |
| <i>potassium citrate (alkalinizer) TBCR</i>                                                                       | 1B        |                      |
| <i>sodium citrate &amp; 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   |
| <b>GOUT AGENTS - Drugs to Treat Gout</b>                             |           |                      |
| 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        |                      |
| <b>HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders</b> |           |                      |

| 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                     |
| <b>HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders</b> |           |                        |
| 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 Sickle 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 25 MCG/ML                        | 4         | SP; PA                 |
| ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML, 60 MCG/ML, 100 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 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               |
| 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                                      |
| <b>HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders</b> |           |                                             |
| Hemostatics - Systemic                                            |           |                                             |
| <i>aminocaproic acid TABS</i>                                     | 1B        | PA                                          |
| <i>tranexamic acid SOLN 1000 MG/10ML</i>                          | 1B        |                                             |
| <i>tranexamic acid TABS</i>                                       | 1B        |                                             |
| <b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>                  |           |                                             |
| 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 15 MG, 30 MG</i>                                     | 1A        | QL(1 EA daily)                              |
| <i>temazepam 7.5 MG, 22.5 MG</i>                                  | 1B        | 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) |
| <b>LAXATIVES - Bowel Treatment Drugs</b>                            |           |                                         |
| 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                      | Drug Name                                  | Drug Tier | Requirements/ Limits                                                                                              |
|-----------------------------------------------------------|-----------|-------------------------------------------|--------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------|
| <i>docusate calcium</i>                                   | 1A        | QL(1 EA daily)                            | DIFICID TABS 200 MG ( <i>fidaxomicin</i> ) | 2         |                                                                                                                   |
| <i>docusate sodium CAPS 250 MG</i>                        | 1A        |                                           | <i>fidaxomicin TABS 200 MG</i>             | 1B        |                                                                                                                   |
| <i>docusate sodium CAPS 100 MG</i>                        | 1A        | QL(4 EA daily)                            | <b>MEDICAL DEVICES AND SUPPLIES</b>        |           |                                                                                                                   |
| <b>LOCAL ANESTHETICS-Parenteral - Drugs for Numbing</b>   |           |                                           | Contraceptives                             |           |                                                                                                                   |
| Local Anesthetics - Amides                                |           |                                           | AIMSCO LUBRICATED MISC                     | 0         |                                                                                                                   |
| <i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %</i> | 1B        |                                           | CAYA DPRH                                  | 0         |                                                                                                                   |
| <b>MACROLIDES - Drugs to Treat Bacterial Infections</b>   |           |                                           | DUREX EXTRA SENSITIVE THIN DEVI            | 0         |                                                                                                                   |
| Azithromycin                                              |           |                                           | DUREX EXTRA SENSITIVE THIN MISC            | 0         |                                                                                                                   |
| <i>azithromycin PACK</i>                                  | 1B        |                                           | DUREX TROPICAL MISC                        | 0         |                                                                                                                   |
| <i>azithromycin SOLR</i>                                  | 1B        |                                           | FANTASY LUBRICATED/SPERMICI DE MISC        | 0         |                                                                                                                   |
| <i>azithromycin SUSR</i>                                  | 1B        |                                           | FANTASY LUBRICATED MISC                    | 0         |                                                                                                                   |
| <i>azithromycin TABS 500 MG</i>                           | 1B        | QL(4 EA per fill retail; 4 per fill mail) | 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 |
| <i>azithromycin TABS 250 MG</i>                           | 1B        | QL(6 EA per fill retail; 6 per fill mail) | FEMCAP DEVI                                | 0         |                                                                                                                   |
| <i>azithromycin TABS 600 MG</i>                           | 1B        | QL(0.286 EA daily)                        | KAMELEON LUBRICATED MISC                   | 0         |                                                                                                                   |
| Clarithromycin                                            |           |                                           | KIMONO COLORS DEVI                         | 0         |                                                                                                                   |
| <i>clarithromycin SUSR</i>                                | 1B        |                                           | KIMONO MAXX-LARGE FLARE MISC               | 0         |                                                                                                                   |
| <i>clarithromycin TABS</i>                                | 1B        |                                           | KIMONO MICRO THIN PLUS MISC                | 0         |                                                                                                                   |
| <i>clarithromycin TB24</i>                                | 1B        |                                           | KIMONO PLUS MISC                           | 0         |                                                                                                                   |
| Erythromycins                                             |           |                                           | KIMONO PS PLUS MISC                        | 0         |                                                                                                                   |
| <i>erythromycin base CPEP</i>                             | 3         |                                           | KIMONO PS MISC                             | 0         |                                                                                                                   |
| <i>erythromycin base TABS</i>                             | 3         |                                           | KIMONO SENSATION PLUS MISC                 | 0         |                                                                                                                   |
| <i>erythromycin base TBEC</i>                             | 1B        |                                           | KIMONO SENSATION MISC                      | 0         |                                                                                                                   |
| <i>erythromycin ethylsuccinate SUSR</i>                   | 1B        |                                           | KIMONO SPECIAL DEVI                        | 0         |                                                                                                                   |
| <i>erythromycin ethylsuccinate TABS</i>                   | 3         |                                           |                                            |           |                                                                                                                   |
| Fidaxomicin                                               |           |                                           |                                            |           |                                                                                                                   |

| 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                              |
| <b>MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches</b> |           |                                    |
| 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 12.5 MG</i>                 | 1B        | QL(0.4 EA daily); AL(At least 12 yrs old); ST              |
| <i>almotriptan malate 6.25 MG</i>                 | 1B        | QL(0.3 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 10 MG</i>       | 1B        | QL(0.6 EA daily); AL(At least 6 yrs old)      |
| <i>rizatriptan benzoate TABS 5 MG</i>        | 1B        | QL(0.4 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 |
|---------------------------------------------------------------------------------------------------------|-----------|----------------------|
| <b>Bicarbonates</b>                                                                                     |           |                      |
| <i>sodium acetate SOLN</i>                                                                              | 1B        |                      |
| SODIUM ACETATE SOLN ( <i>sodium acetate</i> )                                                           | 1B        |                      |
| <b>Calcium</b>                                                                                          |           |                      |
| <i>calcium chloride (dihydrate) SOLN</i>                                                                | 1B        |                      |
| <b>Electrolyte Mixtures</b>                                                                             |           |                      |
| <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 &amp; 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 &amp; 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 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>                | 4         | QL(1 EA daily); SP; PA |
| <i>potassium bicarbonate TBEF</i>                                                                                                                                                                                              | 1B        |                      | <i>lenalidomide 20 MG</i>                                            | 4         | QL(1 EA daily); 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) 4 %</i>                        | 1B        |                         |

| Drug Name                                                                                                       | Drug Tier | Requirements/ Limits |
|-----------------------------------------------------------------------------------------------------------------|-----------|----------------------|
| <i>lidocaine hcl (mouth-throat) 2 %</i>                                                                         | 1B        | QL(4 ML daily)       |
| 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)         | <b>MUSCULOSKELETAL THERAPY AGENTS -<br/>Drugs to Treat Spasms</b>                                                |           |                        |
| PRENATAL PLUS VITAMIN/MINERAL TABS                                                                                                                                                                                       | 2         | QL(1 EA daily); RX/OTC | <b>Central Muscle Relaxants</b>                                                                                  |           |                        |
| 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 750 MG</i>                                                                                 | 1B        | QL(4 EA daily)         |
|                                                                                                                                                                                                                          |           |                        | <i>chlorzoxazone TABS 500 MG</i>                                                                                 | 1B        | QL(6 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)                                                     |
| <b>NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus</b> |           |                                                                    |
| Nasal Antiallergy                                                             |           |                                                                    |
| <i>azelastine hcl</i>                                                         | 1B        |                                                                    |
| <i>olopatadine hcl (nasal)</i>                                                | 1B        |                                                                    |
| Nasal Anticholinergics                                                        |           |                                                                    |
| <i>ipratropium bromide (nasal) 0.03 %</i>                                     | 1B        | QL(1 ML daily)                                                     |
| <i>ipratropium bromide (nasal) 0.06 %</i>                                     | 1B        |                                                                    |
| 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                                                                 |
| <b>NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles</b>                 |           |                                                                    |
| 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                                                                 |
| <b>NUTRIENTS</b>                                                              |           |                                                                    |

| 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         |                      |
| <b>OPHTHALMIC AGENTS - Drugs to Treat the Eye</b> |           |                      |
| 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 0.1 %</i>                                                               | 1B        | QL(0.34 ML daily)    |
| <i>olopatadine hcl 0.2 %</i>                                                               | 1B        | RX/OTC               |
| Prostaglandins - Ophthalmic                                                                |           |                      |
| <i>bimatoprost SOLN</i>                                                                    | 3         |                      |
| <i>latanoprost SOLN</i>                                                                    | 1B        |                      |
| <i>tafluprost</i>                                                                          | 1B        |                      |
| <i>travoprost SOLN</i>                                                                     | 1B        |                      |
| <b>OTIC AGENTS - Drugs to Treat the Ear</b>                                                |           |                      |
| 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        |                      |
| <b>PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System</b> |           |                      |
| 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                   |
| <b>PENICILLINS - Drugs to Treat Bacterial Infections</b>              |           |                      |
| 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 &amp; pot clavulanate CHEW</i>                                                      | 1B        |                      |
| <i>amoxicillin &amp; pot clavulanate SUSR</i>                                                      | 1B        |                      |
| <i>amoxicillin &amp; pot clavulanate TABS</i>                                                      | 1B        |                      |
| <i>amoxicillin &amp; pot clavulanate TB12</i>                                                      | 1B        |                      |
| <i>ampicillin &amp; 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 267 MG, 801 MG</i>              | 4         | QL(1 EA daily); PA       |
| <i>pirfenidone TABS 534 MG</i>                      | 4         | QL(3 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         |                      |
| <b>ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions</b> |           |                      |
| <b>Antispasmodics</b>                                                       |           |                      |
| <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        |                      |
| <b>H-2 Antagonists</b>                                                      |           |                      |
| <i>cimetidine TABS</i>                                                      | 1B        | RX/OTC               |
| <i>famotidine in nacl SOLN</i>                                              | 1B        |                      |
| <i>famotidine SOLN 20 MG/2ML</i>                                            | 1A        |                      |

| Drug Name                                     | Drug Tier | Requirements/ Limits   |
|-----------------------------------------------|-----------|------------------------|
| <i>famotidine SOLN 40 MG/4ML, 200 MG/20ML</i> | 1B        |                        |
| <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        |                        |
| <b>Misc. Anti-Ulcer</b>                       |           |                        |
| <i>sucralfate SUSP</i>                        | 1B        | QL(40 ML daily)        |
| <i>sucralfate TABS</i>                        | 1B        | QL(4 EA daily)         |
| <b>Proton Pump Inhibitors</b>                 |           |                        |
| <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        |                        |
| <b>NEXIUM 24HR TBEC 20 MG</b>                 | 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 20 MG</i>         | 1B        | QL(1 EA daily)         |
| <i>pantoprazole sodium TBEC 40 MG</i>         | 1B        |                        |
| <i>rabeprazole sodium TBEC</i>                | 3         | QL(1 EA daily)         |
| <b>Ulcer Drugs - Prostaglandins</b>           |           |                        |
| <i>misoprostol</i>                            | 1B        | QL(4 EA daily)         |
| <b>Ulcer Therapy Combinations</b>             |           |                        |

| 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         |                                                              |
| <b>URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms</b> |           |                                                                                      | 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)                                                                       | <b>Viral Vaccines</b>                  |           |                                                              |
| 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                          |
| <b>VACCINES</b>                                                             |           |                                                                                      | 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         |                                     | <b>VAGINAL AND RELATED PRODUCTS</b>           |           |                                                               |
| NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML | 0         |                                     | <b>Spermicides</b>                            |           |                                                               |
| 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         |                                     | <b>Vaginal Anti-infectives</b>                |           |                                                               |
| 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        |                                                               |
|                                             |           |                                     | <b>Vaginal Anti-inflammatory Agents</b>       |           |                                                               |
|                                             |           |                                     | <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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| ALTUVIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT .....48 | amoxicillin & pot clavulanate CHEW . 61                     | anastrozole .....25                                                                   |
| ALUNBRIG TABS .....26                                                            | amoxicillin & pot clavulanate SUSR 61                       | ANDRODERM PT24 2 MG/24HR, 4 MG/24HR .....7                                            |
| ALUNBRIG TBPk .....26                                                            | amoxicillin & pot clavulanate TABS 61                       | ANGELIQ .....46                                                                       |
| ALVESCO .....9                                                                   | amoxicillin & pot clavulanate TB12 61                       | ANNOVERA .....36                                                                      |
| alvimopan .....47                                                                | amoxicillin CAPS .....60                                    | 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 MG .....17                                                            |
| amantadine hcl SOLN ..... 28                                                     | amoxicillin SUSR 125 MG/5ML ....60                          | APIDRA SOLN .....16                                                                   |
| amantadine hcl TABS .....28                                                      | amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML .....60 | APIDRA SOLOSTAR SOPN .....16                                                          |
| ambrisentan .....34                                                              | amoxicillin TABS .....60                                    | apomorphine hydrochloride SOCT 28                                                     |
| amcinonide CREA .....40                                                          | amoxicillin-clarithromycin w/ lansoprazole THPK ..... 65    | apraclonidine hcl ..... 58                                                            |
| amcinonide LOTN .....40                                                          | amphetamine sulfate TABS .....1                             | aprepitant CAPS 40 MG, 125 MG . 17                                                    |
| amcinonide OINT .....40                                                          | amphetamine-dextroamphetamine CP24 15 MG .....1             | 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 TABS .....44                                                       |                                                             |                                                                                       |
| aminocaproic acid TABS .....50                                                   |                                                             |                                                                                       |

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| 800 MG (eslicarbazepine acetate) .12                                                                 | atazanavir sulfate CAPS 200 MG .30                    | azelastine hcl (ophth) ..... 59                                       |
| APTIVUS CAPS .....30                                                                                 | atenolol & chlorthalidone .....20                     | azelastine hcl .....58                                                |
| ARANESP (ALBUMIN FREE) SOLN<br>25 MCG/ML .....49                                                     | atenolol TABS .....32                                 | AZELEX ..... 37                                                       |
| ARANESP (ALBUMIN FREE) SOLN<br>40 MCG/ML, 60 MCG/ML, 100<br>MCG/ML .....49                           | ATGAM .....55                                         | azithromycin PACK ..... 51                                            |
| ARANESP (ALBUMIN FREE) SOSY<br>150 MCG/0.3ML, 200 MCG/0.4ML,<br>300 MCG/0.6ML, 500 MCG/ML ...49      | atomoxetine hcl 10 MG, 18 MG, 25<br>MG, 40 MG .....1  | azithromycin SOLR ..... 51                                            |
| ARCALYST .....3                                                                                      | atomoxetine hcl 60 MG, 80 MG, 100<br>MG .....1        | azithromycin SUSR .....51                                             |
| AREXVY .....65                                                                                       | atorvastatin calcium TABS .....19                     | azithromycin TABS 250 MG ..... 51                                     |
| arformoterol tartrate .....10                                                                        | atovaquone .....21                                    | azithromycin TABS 500 MG ..... 51                                     |
| ARIKAYCE .....2                                                                                      | atovaquone-proguanil hcl .....22                      | azithromycin TABS 600 MG ..... 51                                     |
| aripiprazole SOLN PO .....30                                                                         | atracurium besylate 50 MG/5ML, 100<br>MG/10ML .....58 | aztreonam 1 GM .....22                                                |
| aripiprazole TABS .....30                                                                            | atropine sulfate SOSY IJ 0.25<br>MG/5ML .....64       | bacitracin (ophthalmic) .....58                                       |
| armodafinil .....1                                                                                   | ATROVENT HFA .....9                                   | baclofen TABS .....57                                                 |
| ARMOUR THYROID TABS .....63                                                                          | AUDENZ EMUL .....65                                   | balsalazide disodium CAPS ..... 47                                    |
| ARNUITY ELLIPTA 50 MCG/ACT,<br>100 MCG/ACT, 200 MCG/ACT<br>(fluticasone furoate (inhalation)) .... 9 | AUDENZ PRSY .....65                                   | BALVERSA .....26                                                      |
| arsenic trioxide 10 MG/10ML .....28                                                                  | AURANOFIN 3 MG .....3                                 | BANZEL TABS 200 MG (rufinamide)<br>12                                 |
| ARZERRA .....24                                                                                      | AUSTEDO TABS .....62                                  | BANZEL TABS 400 MG (rufinamide)<br>12                                 |
| ascorbic acid SOLN IJ .....68                                                                        | AUSTEDO XR PATIENT TITRATION<br>TEPK .....61          | BAXDELA SOLR .....46                                                  |
| asenapine maleate 2.5 MG .....29                                                                     | AUSTEDO XR TB24 .....62                               | BAXDELA TABS .....46                                                  |
| asenapine maleate 5 MG, 10 MG .29                                                                    | avanafil .....33                                      | BD PEN NEEDLE NANO 2ND GEN .<br>53                                    |
| aspirin CHEW .....5                                                                                  | AVERI TABS PO .....35                                 | BELSOMRA .....50                                                      |
| aspirin TABS 325 MG .....5                                                                           | AVONEX PEN AJKT .....62                               | benazepril & hydrochlorothiazide<br>12.5 MG-10 MG, 25 MG-20 MG ...20  |
| aspirin TBEC 325 MG .....5                                                                           | AVONEX PREFILLED PSKT .....62                         | benazepril & hydrochlorothiazide<br>12.5 MG-20 MG, 6.25 MG-5 MG .. 20 |
| aspirin TBEC 81 MG .....5                                                                            | AYVAKIT .....25                                       | benazepril hcl .....19                                                |
| aspirin-dipyridamole .....49                                                                         | azacitidine SUSR .....23                              | bendamustine hcl SOLR .....23                                         |
| atazanavir sulfate CAPS 150 MG,<br>300 MG .....30                                                    | AZATHIOPRINE SODIUM .....55                           | BENEFIX KIT .....48                                                   |
|                                                                                                      | azathioprine TABS .....55                             | BENZEPRO CREAMY WASH LIQD .<br>37                                     |
|                                                                                                      | azelaic acid GEL .....42                              |                                                                       |

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| 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 |                                                                                    |    |

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| bupropion hcl (smoking deterrent) 62                                               | calcipotriene-betamethasone<br>dipropionate OINT ..... 41 | carbidopa .....28                                        |
| bupropion hcl TABS .....13                                                         | calcipotriene-betamethasone<br>dipropionate SUSP ..... 41 | carbidopa-levodopa TABS .....28                          |
| bupropion hcl TB12 ..... 13                                                        | calcitonin (salmon) NA ..... 44                           | carbidopa-levodopa TBCR ..... 29                         |
| bupropion hcl TB24 150 MG, 300 MG<br>.....13                                       | calcitriol (topical) .....39                              | carbidopa-levodopa TBDP ..... 29                         |
| buspirone hcl 5 MG .....8                                                          | calcitriol CAPS ..... 45                                  | carbidopa-levodopa-entacapone ..28                       |
| buspirone hcl 7.5 MG, 10 MG, 15<br>MG, 30 MG .....8                                | calcitriol SOLN IV ..... 45                               | carbinoxamine maleate SOLN .....18                       |
| busulfan SOLN .....23                                                              | calcium acetate (phosphate binder)<br>CAPS .....47        | carbinoxamine maleate TABS 4 MG .<br>18                  |
| butalbital-acetaminophen TABS 50<br>MG-325 MG .....5                               | calcium acetate (phosphate binder)<br>TABS .....47        | carboplatin SOLN 50 MG/5ML ....23                        |
| butalbital-acetaminophen-caffeine<br>CAPS 40 MG-50 MG-300 MG ..... 5               | calcium chloride (dihydrate) SOLN 54                      | carisoprodol TABS .....57                                |
| butalbital-acetaminophen-caffeine<br>CAPS 40 MG-50 MG-325 MG ..... 5               | calcium polycarbophil TABS .....50                        | carmustine .....23                                       |
| butalbital-acetaminophen-caffeine<br>TABS 40 MG-50 MG-325 MG .....5                | CALQUENCE ..... 26                                        | carteolol hcl (ophth) .....58                            |
| butalbital-acetaminophen-caffeine w/<br>codeine 30 MG-40 MG-50 MG-300<br>MG .....6 | candesartan cilexetil .....20                             | carvedilol ..... 32                                      |
| butalbital-acetaminophen-caffeine w/<br>codeine 30 MG-40 MG-50 MG-325<br>MG .....6 | candesartan cilexetil-<br>hydrochlorothiazide ..... 20    | carvedilol phosphate .....32                             |
| butalbital-aspirin-caffeine CAPS ....5                                             | capecitabine .....23                                      | caspofungin acetate .....17                              |
| butalbital-aspirin-caffeine w/cod ....6                                            | CAPRELSA .....26                                          | CAYA DPRH .....51                                        |
| butenafine hcl ..... 38                                                            | captopril 12.5 MG .....19                                 | CAYSTON .....22                                          |
| butorphanol tartrate IJ 1 MG/ML, 2<br>MG/ML .....7                                 | captopril 25 MG, 50 MG, 100 MG .19                        | cefaclor CAPS ..... 34                                   |
| butorphanol tartrate NA 10 MG/ML .7                                                | CAPVAXIVE .....65                                         | cefaclor SUSR 250 MG/5ML ..... 34                        |
| cabergoline .....45                                                                | carbamazepine CHEW 100 MG ...12                           | cefadroxil CAPS ..... 34                                 |
| CABOMETYX TABS .....26                                                             | carbamazepine CP12 100 MG ....12                          | cefadroxil SUSR ..... 34                                 |
| calcipotriene CREA .....39                                                         | carbamazepine CP12 200 MG ....12                          | cefadroxil TABS .....34                                  |
| calcipotriene OINT .....39                                                         | carbamazepine CP12 300 MG ....12                          | cefazolin sodium SOLR IJ 1 GM, 10<br>GM, 500 MG ..... 34 |
| calcipotriene SOLN ..... 39                                                        | carbamazepine SUSP ..... 12                               | cefdinir CAPS .....35                                    |
|                                                                                    | carbamazepine TABS .....12                                | cefdinir SUSR .....35                                    |
|                                                                                    | carbamazepine TB12 100 MG, 400<br>MG ..... 12             | cefepime hcl SOLR IV 2 GM .....35                        |
|                                                                                    | carbamazepine TB12 200 MG .....12                         | cefixime CAPS .....35                                    |
|                                                                                    |                                                           | cefixime SUSR .....35                                    |
|                                                                                    |                                                           | cefotetan disodium IJ 1 GM, 2 GM 34                      |
|                                                                                    |                                                           | cefoxitin sodium IV 1 GM, 2 GM ...34                     |

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| cefpodoxime proxetil SUSR .....35                   | chlorpromazine hcl TABS .....30                  | ciprofloxacin-fluocinolone acetonide .<br>60                                                                |
| cefpodoxime proxetil TABS .....35                   | chlorthalidone 25 MG, 50 MG ..... 44             | cisplatin SOLN 100 MG/100ML ....23                                                                          |
| cefprozil SUSR .....34                              | chlorzoxazone TABS 500 MG .....57                | citalopram hydrobromide SOLN ... 13                                                                         |
| cefprozil TABS .....34                              | chlorzoxazone TABS 750 MG .....57                | citalopram hydrobromide TABS ... 13                                                                         |
| ceftazidime IJ 1 GM, 6 GM ..... 35                  | CHOLBAM .....46                                  | clarithromycin SUSR .....51                                                                                 |
| ceftriaxone sodium IJ 1 GM, 2 GM,<br>500 MG .....35 | cholecalciferol CAPS .....68                     | clarithromycin TABS .....51                                                                                 |
| ceftriaxone sodium IJ 250 MG ....35                 | cholecalciferol TABS 10 MCG, 400<br>UNIT .....68 | clarithromycin TB24 .....51                                                                                 |
| cefuroxime axetil TABS .....34                      | cholestyramine light PACK ..... 19               | CLASSIC PRENATAL TABS ..... 56                                                                              |
| cefuroxime sodium IJ 750 MG .....35                 | cholestyramine light POWD .....19                | clemastine fumarate SYRP ..... 18                                                                           |
| celecoxib ..... 4                                   | cholestyramine PACK .....19                      | clemastine fumarate TABS 2.68 MG .<br>18                                                                    |
| cephalexin CAPS ..... 34                            | cholestyramine POWD .....19                      | CLIMARA PRO .....46                                                                                         |
| cephalexin SUSR .....34                             | choline fenofibrate .....19                      | clindamycin hcl .....22                                                                                     |
| CERDELGA .....49                                    | CHORIONIC GONADOTROPIN IM<br>44                  | clindamycin palmitate hydrochloride .<br>22                                                                 |
| CEREZYME 400 UNIT .....49                           | ciclopirox GEL .....38                           | clindamycin phosphate (topical)<br>FOAM .....37                                                             |
| cetirizine hcl TABS .....18                         | ciclopirox olamine CREA .....38                  | clindamycin phosphate (topical) GEL<br>37                                                                   |
| cevimeline hcl ..... 56                             | ciclopirox olamine SUSP .....38                  | clindamycin phosphate (topical)<br>LOTN .....37                                                             |
| CHEMET ..... 17                                     | ciclopirox SHAM ..... 38                         | clindamycin phosphate (topical)<br>SOLN .....37                                                             |
| CHEMSTRIP K STRP .....43                            | ciclopirox SOLN .....38                          | clindamycin phosphate (topical)<br>SWAB .....38                                                             |
| chloramphenicol sodium succinate<br>21              | cidofovir .....31                                | clindamycin phosphate SOLN IJ 9<br>GM/60ML, 300 MG/2ML, 600<br>MG/4ML, 900 MG/6ML, 9000<br>MG/60ML ..... 22 |
| chlordiazepoxide hcl CAPS ..... 8                   | cilostazol .....49                               | clindamycin phosphate vaginal CREA<br>.....67                                                               |
| chlordiazepoxide hcl-clidinium<br>bromide .....64   | CIMDUO .....30                                   | clindamycin phosphate-benzoyl<br>peroxide (refrigerate) .....38                                             |
| chlordiazepoxide-amitriptyline ....61               | cimetidine TABS ..... 64                         |                                                                                                             |
| chlorhexidine gluconate (mouth-<br>throat) .....56  | cinacalcet hcl .....45                           |                                                                                                             |
| chloroquine phosphate TABS 250<br>MG ..... 22       | ciprofloxacin hcl (ophth) SOLN ....58            |                                                                                                             |
| chloroquine phosphate TABS 500<br>MG ..... 22       | ciprofloxacin hcl (otic) .....60                 |                                                                                                             |
| chlorpromazine hcl SOLN .....30                     | ciprofloxacin hcl TABS .....46                   |                                                                                                             |
|                                                     | ciprofloxacin in d5w 200 MG/100ML .<br>46        |                                                                                                             |
|                                                     | ciprofloxacin-dexamethasone .....60              |                                                                                                             |

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| 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 |

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| cyclosporine CAPS .....                                        | 55 | DAPTACEL .....                                          | 64 | desogestrel & ethinyl estradiol .....                                              | 35 |
| cyclosporine modified (for<br>microemulsion) CAPS .....        | 55 | daptomycin 500 MG .....                                 | 21 | desogestrel-ethinyl estradiol<br>(biphasic) .....                                  | 35 |
| cyclosporine modified (for<br>microemulsion) SOLN .....        | 55 | darifenacin hydrobromide .....                          | 65 | desogestrel-ethinyl estradiol<br>(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<br>MG/0.2ML, 40 MG/0.4ML .....     | 2  | DAURISMO .....                                          | 24 | desonide OINT .....                                                                | 41 |
| CYLTEZO (2 SYRINGE) PSKT 20<br>MG/0.4ML, 40 MG/0.8ML .....     | 3  | DEBACTEROL .....                                        | 56 | desoximetasone CREA 0.25 % .....                                                   | 41 |
| CYLTEZO-CD/UC/HS STARTER<br>AJKT .....                         | 3  | decitabine .....                                        | 23 | desoximetasone GEL .....                                                           | 41 |
| CYLTEZO-PSORIASIS/UV<br>STARTER AJKT .....                     | 3  | deferasirox PACK .....                                  | 17 | desoximetasone OINT 0.25 % .....                                                   | 41 |
| cyproheptadine hcl SYRP .....                                  | 18 | deferasirox TABS .....                                  | 17 | desvenlafaxine succinate .....                                                     | 14 |
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| fulvestrant SOSY .....25                                 | gatifloxacin (ophth) .....59                                                                       | glucagon SOLR IJ 1 MG .....15                                   |
| furosemide SOLN PO 8 MG/ML, 10<br>MG/ML .....44          | gefitinib .....24                                                                                  | glyburide micronized 1.5 MG, 3 MG,<br>6 MG ..... 16             |
| furosemide TABS .....44                                  | gemcitabine hcl SOLR 2 GM, 200<br>MG .....24                                                       | glyburide TABS ..... 16                                         |
| FUZEON SOLR .....31                                      | gemfibrozil TABS .....19                                                                           | glyburide-metformin 250 MG-1.25<br>MG ..... 14                  |
| FYCOMPA TABS 2 MG<br>(perampanel) .....11                | GENOTROPIN CART SC .....45                                                                         | glyburide-metformin 500 MG-2.5 MG,<br>500 MG-5 MG .....15       |
| FYCOMPA TABS 4 MG<br>(perampanel) .....11                | GENOTROPIN MINIQUICK PRSY 45                                                                       | glycine (gu irrigant) SOLN 1.5 % .. 47                          |
| FYCOMPA TABS 6 MG<br>(perampanel) .....11                | gentamicin in saline 0.8 MG/ML-0.9<br>%, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9<br>%, 1.6 MG/ML-0.9 % .....2 | glycopyrrolate SOLN IJ 4 MG/20ML<br>64                          |
| FYCOMPA TABS 8 MG, 10 MG, 12<br>MG (perampanel) ..... 11 | gentamicin sulfate (ophth) SOLN ..59                                                               | glycopyrrolate TABS 1 MG ..... 64                               |
| gabapentin CAPS .....12                                  | gentamicin sulfate (topical) CREA .38                                                              | glycopyrrolate TABS 2 MG ..... 64                               |
| gabapentin SOLN .....12                                  | gentamicin sulfate (topical) OINT ..38                                                             | GLYXAMBI ..... 15                                               |
| gabapentin TABS 600 MG, 800 MG<br>12                     | gentamicin sulfate IJ 40 MG/ML .... 2                                                              | GNP PRENATAL TABS ..... 56                                      |
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| granisetron hcl SOLN IV 1 MG/ML 17                                                         | HUMATROPE CART IJ .....45                                       | hydrocodone-acetaminophen SOLN<br>325 MG/15ML-10 MG/15ML ..... 6                                                      |
| granisetron hcl TABS ..... 17                                                              | HUMIRA (2 PEN) AJKT 80<br>MG/0.8ML ..... 3                      | hydrocodone-acetaminophen TABS<br>300 MG-10 MG, 300 MG-5 MG, 300<br>MG-7.5 MG .....7                                  |
| GRASTEK SUBL .....2                                                                        | HUMIRA (2 PEN) AJKT ..... 3                                     | hydrocodone-acetaminophen TABS<br>325 MG-10 MG, 325 MG-5 MG, 325<br>MG-7.5 MG .....7                                  |
| griseofulvin microsize SUSP .....18                                                        | HUMIRA (2 SYRINGE) PSKT .....3                                  | hydrocodone-acetaminophen TABS<br>325 MG-2.5 MG ..... 7                                                               |
| griseofulvin microsize TABS ..... 18                                                       | HUMIRA-CD/UC/HS STARTER<br>AJKT .....3                          | hydrocodone-ibuprofen 10 MG-200<br>MG, 5 MG-200 MG .....7                                                             |
| griseofulvin ultramicrosize .....18                                                        | HUMIRA-PED<40KG CROHNS<br>STARTER PSKT ..... 3                  | hydrocodone-ibuprofen 7.5 MG-200<br>MG .....7                                                                         |
| guanfacine hcl (adhd) .....1                                                               | HUMIRA-PED>=40KG CROHNS<br>START PSKT .....3                    | hydrocortisone (intrarectal) .....7                                                                                   |
| guanfacine hcl .....20                                                                     | HUMIRA-PED>=40KG UC<br>STARTER AJKT .....3                      | hydrocortisone (rectal) EX .....7                                                                                     |
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| hydrocortisone w/acetic acid .....60                                 | icosapent ethyl 1 GM ..... 19                      | INREBIC .....26                                |
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| hydromorphone hcl SOLN IJ 10<br>MG/ML, 50 MG/5ML, 500 MG/50ML .<br>5 | idarubicin hcl 5 MG/5ML, 10<br>MG/10ML .....26     | INSULIN ASPART FLEXPEN SOPN .<br>16            |
| hydromorphone hcl TABS .....5                                        | IDELVION ..... 48                                  | INSULIN ASPART PENFILL SOCT<br>16              |
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| ibandronate sodium TABS .....44                                      | INCRELEX ..... 45                                  | IPOP IJ .....67                                |
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| ibuprofen TABS 800 MG .....4                                         | indomethacin CPCR .....4                           |                                                |
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| ipratropium-albuterol SOLN .....                          | 10 | JANUMET XR TB24 1000 MG-100 MG .....                                                             | 15 | KEVZARA SOSY .....                 | 4  |
| irbesartan .....                                          | 20 | JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG .....                                                | 15 | KIMONO COLORS DEVI .....           | 51 |
| irbesartan-hydrochlorothiazide ....                       | 20 | JANUVIA .....                                                                                    | 15 | KIMONO MAXX-LARGE FLARE MISC ..... | 51 |
| irinotecan hcl 40 MG/2ML, 100 MG/5ML .....                | 28 | JARDIANCE .....                                                                                  | 16 | KIMONO MICRO THIN PLUS MISC .      | 51 |
| irrigation solutions, physiological ..                    | 56 | JEVTANA .....                                                                                    | 28 | KIMONO MISC .....                  | 52 |
| ISENTRESS CHEW .....                                      | 31 | JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT .....                                             | 48 | KIMONO PLUS MISC .....             | 51 |
| ISENTRESS HD TABS .....                                   | 31 | JULUCA .....                                                                                     | 31 | KIMONO PS MISC .....               | 51 |
| ISENTRESS TABS .....                                      | 31 | JYNARQUE TBPK 15 MG (tolvaptan) .....                                                            | 45 | KIMONO PS PLUS MISC .....          | 51 |
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| ISOLYTE-S .....                                           | 54 | KALETRA SOLN .....                                                                               | 31 | KIMONO SENSATION PLUS MISC         | 51 |
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| isoniazid SYRP .....                                      | 23 | KAMELEON LUBRICATED MISC ..                                                                      | 51 | KINRIX SUSY .....                  | 64 |
| isoniazid TABS .....                                      | 23 | KANJINTI .....                                                                                   | 24 | KISQALI (200 MG DOSE) .....        | 26 |
| isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG ..... | 8  | KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (potassium chloride in dextrose & sodium chloride) ..... | 54 | KISQALI (400 MG DOSE) .....        | 26 |
| isosorbide dinitrate-hydralazine hcl 33                   |    | KCL-LACTATED RINGERS-D5W                                                                         | 54 | KISQALI (600 MG DOSE) .....        | 26 |
| isosorbide mononitrate TABS .....                         | 8  | ketoconazole (topical) CREA .....                                                                | 38 | KISQALI FEMARA (200 MG DOSE) .     | 26 |
| isosorbide mononitrate TB24 .....                         | 8  | ketoconazole (topical) SHAM 2 % ..                                                               | 38 | KISQALI FEMARA (400 MG DOSE) .     | 26 |
| isotretinoin 10 MG, 20 MG, 30 MG, 40 MG .....             | 38 | ketoconazole .....                                                                               | 18 | KISQALI FEMARA (600 MG DOSE) .     | 26 |
| isradipine CAPS .....                                     | 33 | KETONE TEST STRP .....                                                                           | 43 | KOGENATE FS KIT .....              | 48 |
| itraconazole CAPS .....                                   | 18 | ketoprofen CAPS 50 MG .....                                                                      | 4  | KOSELUGO .....                     | 26 |
| itraconazole SOLN .....                                   | 18 | ketorolac tromethamine (ophth) ...                                                               | 59 | KOVALTRY .....                     | 48 |
| ivabradine hcl TABS .....                                 | 34 | ketorolac tromethamine TABS .....                                                                | 4  | KP PRENATAL MULTIVITAMINS          |    |
| ivermectin (pediculicide) .....                           | 42 | KETOSTIX STRP .....                                                                              | 43 | TABS .....                         | 57 |
| ivermectin .....                                          | 8  | ketotifen fumarate (ophth) 0.035 %                                                               | 59 | KRINTAFEL .....                    | 22 |
| IXEMPRA KIT 15 MG .....                                   | 28 | KEVZARA SOAJ .....                                                                               | 4  | K-Y ME & YOU EXTRA                 |    |
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| KYPROLIS .....                       | 26 | LASTACRAFT .....                     | 60 | levobunolol hcl 0.5 % .....           | 58 |
| 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 |
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| 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 |
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| 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 |                                       |    |

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|-------------------------------------------------------------|----|-----------------------------------------------------------------------------|----|--------------------------------------------------------|----|
| lidocaine hcl SOLN                                          | 42 | loratadine TABS                                                             | 18 | 45                                                     |    |
| lidocaine PTCH 5 %                                          | 42 | loratadine TBDP                                                             | 18 | LUPRON DEPOT-PED (3-MONTH)<br>11.25 MG                 | 45 |
| lidocaine-prilocaine CREA                                   | 42 | lorazepam CONC                                                              | 8  | LUPRON DEPOT-PED (3-MONTH)<br>30 MG                    | 45 |
| LILETTA (52 MG)                                             | 36 | lorazepam TABS 0.5 MG, 2 MG                                                 | 8  | lurasidone hcl 20 MG, 40 MG, 60<br>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 &<br>hydrochlorothiazide 12.5 MG-100<br>MG, 25 MG-100 MG | 20 | LYSODREN                                               | 25 |
| LINZESS                                                     | 47 | losartan potassium &<br>hydrochlorothiazide 12.5 MG-50 MG .<br>20           |    | mafenide acetate PACK                                  | 40 |
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| 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 |
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| lisinopril & hydrochlorothiazide                            | 20 | lovastatin TABS 40 MG                                                       | 19 | MASONATAL TABS                                         | 57 |
| lisinopril TABS 2.5 MG, 5 MG, 10<br>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<br>(contraceptive) SUSP IM | 36 |
| lopinavir-ritonavir SOLN                                    | 31 | LUPRON DEPOT (4-MONTH) IM                                                   | 25 | medroxyprogesterone acetate<br>(contraceptive) SUSY IM | 36 |
| lopinavir-ritonavir TABS                                    | 31 | LUPRON DEPOT (6-MONTH) IM                                                   | 25 | medroxyprogesterone acetate 10 MG                      | 61 |
| LOQTORZI                                                    | 24 | LUPRON DEPOT-PED (1-MONTH)                                                  |    | medroxyprogesterone acetate 2.5                        |    |
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| mefloquine hcl .....23               | mesalamine TBEC 800 MG .....47     | methyldopa TABS .....20            |
| megestrol acetate (appetite) .....61 | metaxalone 800 MG .....57          | methylphenidate hcl CHEW 10 MG .1  |
| megestrol acetate SUSP .....25       | metformin hcl TABS 1000 MG .....15 | methylphenidate hcl CHEW 2.5 MG 1  |
| megestrol acetate TABS .....25       | metformin hcl TABS 500 MG .....15  | methylphenidate hcl CHEW 5 MG .1   |
| MEKINIST SOLR .....27                | metformin hcl TABS 850 MG .....15  | methylphenidate hcl CP24 10 MG, 20 |
| MEKINIST TABS 0.5 MG .....27         | metformin hcl TB24 500 MG .....15  | MG, 40 MG, 60 MG .....1            |
| MEKINIST TABS 2 MG .....27           | metformin hcl TB24 750 MG .....15  | methylphenidate hcl CP24 30 MG ..2 |
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| meloxicam TABS .....4                | METHADONE HCL SOLN IJ              | methylphenidate hcl CPCR .....2    |
| melphalan .....23                    | (methadone hcl) .....6             | methylphenidate hcl SOLN .....2    |
| melphalan hcl IV .....23             | methadone hcl SOLN IJ 10 MG/ML .5  | methylphenidate hcl TABS 10 MG,    |
| memantine hcl TABS .....61           | methadone hcl SOLN PO 10           | 20 MG .....2                       |
| MENACTRA .....65                     | MG/5ML .....5                      | methylphenidate hcl TABS 5 MG ...2 |
| MENEST 2.5 MG .....46                | methadone hcl SOLN PO 5 MG/5ML     | methylphenidate hcl TB24 18 MG, 27 |
| MENOSTAR PTWK .....46                | 5                                  | MG .....2                          |
| MENQUADFI 0.5 ML .....65             | methadone hcl TABS 10 MG .....6    | methylphenidate hcl TB24 36 MG, 54 |
| MENVEO SOLN .....65                  | methadone hcl TABS 5 MG .....6     | MG .....2                          |
| MENVEO SOLR .....65                  | methadone hcl TBSO .....6          | methylphenidate hcl TBCR 10 MG,    |
| meperidine hcl SOLN IJ 25 MG/ML,     | methamphetamine hcl .....1         | 20 MG .....2                       |
| 50 MG/ML, 100 MG/ML .....5           | methazolamide TABS .....43         | methylphenidate hcl TBCR 18 MG,    |
| meperidine hcl SOLN PO 50            | methenamine hippurate .....22      | 27 MG .....2                       |
| MG/5ML .....5                        | methimazole TABS .....63           | methylphenidate hcl TBCR 36 MG,    |
| meperidine hcl TABS 50 MG .....5     | methocarbamol TABS 500 MG, 750     | 54 MG .....2                       |
| meprobamate .....8                   | MG .....57                         | methylphenidate PTCH .....2        |
| mercaptopurine TABS .....24          | methotrexate sodium SOLN 50        | methylprednisolone acetate SUSP 36 |
| meropenem .....21                    | MG/2ML, 250 MG/10ML .....24        | methylprednisolone sod succ 40 MG, |
| mesalamine CP24 .....47              | methotrexate sodium SOLR .....24   | 125 MG, 500 MG, 1000 MG .....36    |
| mesalamine CPDR .....47              | methotrexate sodium TABS 2.5 MG    | methylprednisolone TABS .....36    |
| mesalamine ENEM .....47              | 24                                 | methylprednisolone TBPK .....36    |
|                                      | methoxsalen rapid .....40          | methyltestosterone TABS .....7     |
|                                      |                                    | metoclopramide hcl SOLN IJ 5       |

|                                                                              |    |                                           |    |                                                                                    |    |
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| MG/ML .....                                                                  | 47 | minocycline hcl TABS .....                | 63 | montelukast sodium PACK .....                                                      | 9  |
| metoclopramide hcl SOLN PO 5<br>MG/5ML, 10 MG/10ML .....                     | 47 | minoxidil 2.5 MG, 10 MG .....             | 21 | montelukast sodium TABS .....                                                      | 9  |
| metoclopramide hcl TABS .....                                                | 47 | MIRCERA .....                             | 49 | morphine sulfate CP24 10 MG, 20<br>MG, 30 MG, 50 MG, 60 MG, 80 MG,<br>100 MG ..... | 6  |
| metolazone .....                                                             | 44 | MIRENA (52 MG) .....                      | 36 | morphine sulfate SOLN IJ 0.5<br>MG/ML, 1 MG/ML .....                               | 6  |
| metoprolol & hydrochlorothiazide<br>TABs 25 MG-100 MG, 50 MG-100<br>MG ..... | 20 | mirtazapine TABS .....                    | 13 | morphine sulfate SOLN PO 10<br>MG/5ML .....                                        | 6  |
| metoprolol & hydrochlorothiazide<br>TABs 25 MG-50 MG .....                   | 20 | mirtazapine TBDP .....                    | 13 | morphine sulfate SOLN PO 20<br>MG/5ML .....                                        | 6  |
| metoprolol succinate TB24 200 MG<br>32                                       |    | misoprostol .....                         | 64 | morphine sulfate TABS .....                                                        | 6  |
| metoprolol succinate TB24 25 MG,<br>50 MG, 100 MG .....                      | 32 | mitomycin SOLR IV 20 MG .....             | 26 | morphine sulfate TBCR .....                                                        | 6  |
| metoprolol tartrate SOLN IV 5<br>MG/5ML .....                                | 32 | mitoxantrone hcl 25 MG/12.5ML ..          | 26 | MOTOFEN .....                                                                      | 17 |
| metoprolol tartrate TABs 25 MG, 50<br>MG, 100 MG .....                       | 32 | MIUDELLA INTRAUTERINE<br>COPPER .....     | 36 | MOVANTIK .....                                                                     | 47 |
| metronidazole (topical) CREA .....                                           | 42 | M-M-R II SOLR .....                       | 67 | moxifloxacin hcl (ophth) SOLN OP 59<br>46                                          |    |
| metronidazole (topical) GEL 0.75 %<br>42                                     |    | M-NATAL PLUS TABS .....                   | 57 | moxifloxacin hcl in sodium chloride<br>46                                          |    |
| metronidazole (topical) GEL 1 % ..                                           | 42 | MNEXSPIKE SUSY 10 MCG/0.2ML .<br>67       |    | moxifloxacin hcl TABS .....                                                        | 46 |
| metronidazole (topical) LOTN .....                                           | 42 | modafinil 100 MG .....                    | 2  | MRESVIA .....                                                                      | 67 |
| metronidazole TABs 250 MG, 500<br>MG .....                                   | 21 | modafinil 200 MG .....                    | 2  | MULPLETA .....                                                                     | 49 |
| metronidazole vaginal .....                                                  | 67 | MODERNA COVID-19 BIVALENT<br>67           |    | MULTI PRENATAL TABS .....                                                          | 57 |
| mexiletine hcl .....                                                         | 8  | MODERNA COVID-19 VAC 6M-11Y<br>SUSP ..... | 67 | mupirocin OINT .....                                                               | 38 |
| micafungin sodium .....                                                      | 18 | MODERNA COVID-19 VAC 6M-11Y<br>SUSY ..... | 67 | MVASI .....                                                                        | 24 |
| miconazole nitrate vaginal SUPP 200<br>MG .....                              | 67 | MODERNA COVID-19 VACCINE<br>SUSP .....    | 67 | MYALEPT .....                                                                      | 45 |
| midodrine hcl .....                                                          | 68 | moexipril hcl .....                       | 19 | mycophenolate mofetil CAPS .....                                                   | 56 |
| miglitol .....                                                               | 14 | mometasone furoate (nasal) SUSP<br>58     |    | mycophenolate mofetil TABS .....                                                   | 56 |
| miglustat .....                                                              | 49 | mometasone furoate CREA .....             | 42 | mycophenolate sodium .....                                                         | 56 |
| minocycline hcl CAPS .....                                                   | 63 | mometasone furoate OINT .....             | 42 | MYLERAN TABS .....                                                                 | 23 |
|                                                                              |    | mometasone furoate SOLN .....             | 42 | nabumetone .....                                                                   | 4  |
|                                                                              |    | montelukast sodium CHEW .....             | 9  | nadolol TABs 20 MG .....                                                           | 32 |
|                                                                              |    |                                           |    | nadolol TABs 40 MG .....                                                           | 32 |

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| nadolol TABS 80 MG ..... 32          | neomycin-polymyxin-hc (otic) SOLN . 60 | nicotine polacrilex GUM ..... 62      |
| nafticillin sodium IV 10 GM ..... 61 | neomycin-polymyxin-hc (otic) SUSP . 60 | nicotine polacrilex LOZG ..... 62     |
| naftifine hcl CREA 1 % ..... 39      | NEONATAL COMPLETE TABS 120             | nicotine PT24 TD 7 MG/24HR, 14        |
| naftifine hcl CREA 2 % ..... 39      | MG-10 MG-9.2 MG-1000 MCG-10            | MG/24HR, 21 MG/24HR ..... 62          |
| nalbuphine hcl ..... 7               | MCG-12 MCG-3 MG-5 MG-20 MG-            | NICOTROL INHA ..... 62                |
| naloxone hcl LIQD ..... 17           | 27 MG-200 MG-1.84 MG-25 MG-2           | NICOTROL NS SOLN ..... 62             |
| naloxone hcl SOLN 0.4 MG/ML, 4       | MG-1200 MCG-2 MG-0.2 MG ..... 57       | nifedipine CAPS 10 MG ..... 33        |
| MG/10ML ..... 17                     | NEONATAL PLUS TABS ..... 57            | nifedipine CAPS 20 MG ..... 33        |
| naltrexone hcl ..... 17              | NEONATAL PRENATAL TABS ... 57          | nifedipine TB24 30 MG ..... 33        |
| naproxen sodium TABS 550 MG ... 4    | NEONATAL VITAMIN TABS ..... 57         | nifedipine TB24 60 MG ..... 33        |
| naproxen SUSP ..... 4                | neostigmine methylsulfate SOSY . 23    | nifedipine TB24 90 MG ..... 33        |
| naproxen TABS ..... 4                | NEO-SYNALAR ..... 38                   | nifedipine TB24 ..... 33              |
| naproxen TBEC 500 MG ..... 4         | NEUPRO ..... 29                        | nilotinib hcl 150 MG, 200 MG ..... 27 |
| naratriptan hcl ..... 54             | NEVANAC ..... 60                       | nilotinib hcl 50 MG ..... 27          |
| NATACYN ..... 59                     | nevirapine SUSP ..... 31               | nilutamide ..... 25                   |
| NATAZIA ..... 35                     | nevirapine TABS ..... 31               | nimodipine CAPS ..... 33              |
| nateglinide ..... 16                 | nevirapine TB24 400 MG ..... 31        | NINLARO ..... 27                      |
| NAYZILAM ..... 11                    | NEXIUM 24HR TBEC 20 MG ..... 64        | NIPENT ..... 28                       |
| nebivolol hcl 2.5 MG, 5 MG, 10 MG    | NEXPLANON ..... 36                     | nisoldipine ..... 33                  |
| 32                                   | NEXTSTELLIS ..... 35                   | nitazoxanide TABS ..... 21            |
| nebivolol hcl 20 MG ..... 32         | niacin (antihyperlipidemic) TBCR .. 19 | nitisinone CAPS ..... 45              |
| NEBUSAL NEBU ..... 37                | niacin CPCR 250 MG, 500 MG ... 68      | NITRO-BID OINT ..... 8                |
| nefazodone hcl ..... 14              | NIACIN ER TBCR ..... 68                | nitrofurantoin ..... 22               |
| nelarabine ..... 24                  | niacin TABS ..... 68                   | nitrofurantoin macrocrystal 50 MG,    |
| neomycin sulfate TABS ..... 2        | niacin TBCR ..... 68                   | 100 MG ..... 22                       |
| neomycin-bacitracin zn-polymyxin 59  | niacinamide TABS 100 MG ..... 68       | nitrofurantoin monohyd macro .... 22  |
| neomycin-polymy-dexameth OINT 59     | niacinamide TABS 500 MG ..... 68       | nitroglycerin (intra-anal) ..... 7    |
| neomycin-polymy-dexameth SUSP        | nicardipine hcl CAPS ..... 33          | nitroglycerin CPCR ..... 8            |
| 0.1 %-3.5 MG/ML-10000 UNIT/ML,       | nicardipine hcl SOLN ..... 33          | nitroglycerin PT24 ..... 8            |
| 0.1 % ..... 59                       | NICOTINE KIT ..... 62                  | NITROGLYCERIN SOLN IV ..... 8         |
| neomycin-polymyxin-hc (ophth) ... 59 |                                        | nitroglycerin SUBL ..... 8            |

|                                                                                   |    |                                                      |    |                                                               |    |
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| NIVA-PLUS TABS .....                                                              | 57 | nortriptyline hcl SOLN .....                         | 14 | nystatin TABS .....                                           | 18 |
| nizatidine CAPS .....                                                             | 64 | NORVIR CAPS .....                                    | 31 | nystatin-triamcinolone CREA .....                             | 39 |
| NORDITROPIN FLEXPON SOPN 30<br>MG/3ML .....                                       | 45 | NORVIR PACK .....                                    | 31 | nystatin-triamcinolone OINT .....                             | 39 |
| NORDITROPIN FLEXPON SOPN 5<br>MG/1.5ML, 10 MG/1.5ML, 15<br>MG/1.5ML .....         | 45 | NOVA MAX PLUS KETONE TEST<br>43                      |    | NYVEPRIA .....                                                | 49 |
| norelgestromin-ethinyl estradiol ...                                              | 35 | NOVAREL IM 10000 UNIT .....                          | 44 | octreotide acetate SOLN .....                                 | 45 |
| norethin acet & estrad-fe CAPS ...                                                | 35 | NOVAVAX COVID-19 VACCINE<br>SUSP .....               | 67 | ODEFSEY .....                                                 | 31 |
| norethin acet & estrad-fe CHEW ...                                                | 35 | NOVAVAX COVID-19 VACCINE<br>SUSY .....               | 67 | ODOMZO .....                                                  | 24 |
| norethin acet & estrad-fe TABS 1<br>MG-20 MCG-75 MG, 1.5 MG-30<br>MCG-75 MG ..... | 35 | NOVOEIGHT .....                                      | 48 | OFEV .....                                                    | 63 |
| norethindrone & eth estradiol .....                                               | 35 | NOVOLIN 70/30 FLEXPEN SUPN                           | 16 | ofloxacin (ophth) .....                                       | 59 |
| norethindrone & ethinyl estradiol-fe<br>35                                        |    | NOVOLIN 70/30 SUSP .....                             | 16 | ofloxacin (otic) .....                                        | 60 |
| norethindrone (contraceptive) .....                                               | 36 | NOVOLIN N FLEXPEN SUPN .....                         | 16 | ofloxacin 300 MG, 400 MG .....                                | 46 |
| norethindrone acet & eth estra TABS<br>35                                         |    | NOVOLIN N SUSP .....                                 | 16 | OGIVRI .....                                                  | 24 |
| norethindrone acetate TABS .....                                                  | 61 | NOVOLIN R FLEXPEN SOPN IJ ...                        | 16 | olanzapine SOLR .....                                         | 29 |
| norethindrone acetate-ethinyl<br>estradiol .....                                  | 46 | NOVOLIN R SOLN IJ .....                              | 16 | olanzapine TABS 2.5 MG, 5 MG ...                              | 29 |
| norethindrone acetate-ethinyl<br>estradiol-fe .....                               | 35 | NP THYROID TABS .....                                | 63 | olanzapine TABS 7.5 MG, 10 MG, 15<br>MG, 20 MG .....          | 29 |
| norethindrone-eth estradiol (triphasic)<br>.....                                  | 35 | NUBEQA .....                                         | 25 | olanzapine TBDP 20 MG .....                                   | 29 |
| norgestimate-ethinyl estradiol<br>(triphasic) .....                               | 35 | NUCALA SOAJ .....                                    | 9  | olanzapine TBDP 5 MG, 10 MG, 15<br>MG .....                   | 30 |
| norgestimate-ethinyl estradiol ...                                                | 35 | NUCALA SOLR .....                                    | 9  | olmesartan medoxomil .....                                    | 20 |
| norgestrel & ethinyl estradiol 30<br>MCG-0.3 MG .....                             | 35 | NUCALA SOSY 100 MG/ML .....                          | 9  | olmesartan medoxomil-amlodipine-<br>hydrochlorothiazide ..... | 21 |
| NORMOSOL-M IN D5W .....                                                           | 54 | NUCALA SOSY 40 MG/0.4ML .....                        | 9  | olmesartan medoxomil-<br>hydrochlorothiazide .....            | 21 |
| NORMOSOL-R PH 7.4 .....                                                           | 54 | NUEDEXTA .....                                       | 62 | olopatadine hcl (nasal) .....                                 | 58 |
| nortriptyline hcl CAPS .....                                                      | 14 | NULOJIX .....                                        | 56 | olopatadine hcl 0.1 % .....                                   | 60 |
|                                                                                   |    | NUVAXOVID COVID-19 VACCINE<br>SUSY 5 MCG/0.5ML ..... | 67 | olopatadine hcl 0.2 % .....                                   | 60 |
|                                                                                   |    | nystatin (mouth-throat) .....                        | 56 | omega-3-acid ethyl esters .....                               | 19 |
|                                                                                   |    | nystatin (topical) CREA .....                        | 39 | omeprazole CPDR .....                                         | 64 |
|                                                                                   |    | nystatin (topical) OINT .....                        | 39 | omeprazole magnesium CPDR ...                                 | 64 |
|                                                                                   |    | nystatin (topical) POWD EX .....                     | 39 | omeprazole TBEC .....                                         | 64 |

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| omeprazole-sodium bicarbonate<br>CAPS 1100 MG-20 MG .....65 | OTEZLA TBPB ..... 4                                                                   | MG/3ML .....15                                                        |
| OMNIFLEX DIAPHRAGM .....52                                  | OTEZLA XR TB24 PO 75 MG ..... 4                                                       | OZEMPIC (2 MG/DOSE) SOPN ...15                                        |
| ONCASPAR .....27                                            | OTEZLA/OTEZLA XR INITIATION<br>PK TBPB ..... 4                                        | paclitaxel 100 MG/16.7ML, 150<br>MG/25ML .....28                      |
| ondansetron hcl SOLN IJ 4 MG/2ML .<br>17                    | oxacillin sodium IV 10 GM .....61                                                     | paclitaxel protein-bound particles .28                                |
| ondansetron hcl SOLN PO 4<br>MG/5ML .....17                 | oxaliplatin SOLN 50 MG/10ML, 100<br>MG/20ML .....23                                   | paliperidone .....29                                                  |
| ondansetron hcl SOSY .....17                                | oxaprozin TABS .....4                                                                 | palonosetron hcl SOLN .....17                                         |
| ondansetron hcl TABS 24 MG .....17                          | oxazepam CAPS .....8                                                                  | pamidronate disodium SOLN 30<br>MG/10ML, 90 MG/10ML .....44           |
| ondansetron hcl TABS 4 MG .....17                           | oxcarbazepine SUSP .....12                                                            | PAMIDRONATE DISODIUM SOLN<br>44                                       |
| ondansetron hcl TABS 8 MG .....17                           | oxcarbazepine TABS 150 MG, 300<br>MG .....12                                          | PANRETIN .....39                                                      |
| ondansetron TBDP 4 MG .....17                               | oxcarbazepine TABS 600 MG .....12                                                     | pantoprazole sodium TBEC 20 MG<br>64                                  |
| ondansetron TBDP 8 MG .....17                               | oxiconazole nitrate CREA .....39                                                      | pantoprazole sodium TBEC 40 MG<br>64                                  |
| ONE VITE WOMENS PLUS TABS<br>57                             | OXISTAT LOTN .....39                                                                  | PARAGARD INTRAUTERINE<br>COPPER .....36                               |
| ONE VITE WOMENS TABS .....57                                | oxybutynin chloride SOLN .....65                                                      | paricalcitol CAPS .....45                                             |
| ONETOUCH DELICA SAFETY<br>LANCING .....53                   | oxybutynin chloride TABS 5 MG ..65                                                    | paricalcitol SOLN .....45                                             |
| OPILL .....36                                               | oxybutynin chloride TB24 .....65                                                      | paroxetine hcl SUSP .....14                                           |
| OPSUMIT .....34                                             | oxycodone hcl T12A 10 MG, 20 MG,<br>40 MG, 80 MG .....6                               | paroxetine hcl TABS .....14                                           |
| ORENITRAM TBCR .....33                                      | oxycodone hcl TABS .....6                                                             | paroxetine hcl TB24 .....14                                           |
| ORGOVYX .....25                                             | oxycodone w/ acetaminophen TABS<br>325 MG-10 MG, 325 MG-5 MG, 325<br>MG-7.5 MG .....7 | pazopanib hcl .....27                                                 |
| ORILISSA .....44                                            | oxycodone w/ acetaminophen TABS<br>325 MG-2.5 MG .....7                               | PEDIARIX SUSY .....64                                                 |
| ORKAMBI PACK .....63                                        | oxymorphone hcl TABS .....6                                                           | pediatric multivitamins w/fl CHEW .56                                 |
| ORKAMBI TABS .....63                                        | oxymorphone hcl TB12 40 MG .....6                                                     | PEDVAX HIB SUSP .....65                                               |
| ORLADEYO .....48                                            | oxymorphone hcl TB12 5 MG, 7.5<br>MG, 10 MG, 15 MG, 20 MG, 30 MG 6                    | peg 3350-kcl-nacl-na sulfate-na<br>ascorbate-ascorbic acid .....50    |
| orphenadrine citrate TB12 .....57                           | OZEMPIC (0.25 OR 0.5 MG/DOSE)<br>SOPN .....15                                         | peg 3350-kcl-sod bicarb-sod<br>chloride-sod sulfate SOLR 236 GM<br>50 |
| oseltamivir phosphate CAPS .....32                          | OZEMPIC (1 MG/DOSE) SOPN 4                                                            | peg 3350-potassium chloride-sod                                       |
| oseltamivir phosphate SUSR .....32                          |                                                                                       |                                                                       |
| OSPHERA .....45                                             |                                                                                       |                                                                       |
| OTEZLA TABS .....4                                          |                                                                                       |                                                                       |

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| bicarbonate-sod chloride .....50                              | perphenazine TABS .....30                                  | pilocarpine hcl (oral) .....56                                                |
| PEGASYS SOLN ..... 31                                         | perphenazine-amitriptyline .....61                         | pilocarpine hcl SOLN 1 %, 2 %, 4 % .58                                        |
| PEGASYS SOSY .....31                                          | PERSERIS PRSY .....29                                      | pimecrolimus ..... 42                                                         |
| PEMAZYRE .....27                                              | PFIZER COVID-19 VAC BIVALENT .67                           | pimozide .....62                                                              |
| pemetrexed disodium SOLR 500 MG 24                            | PFIZER COVID-19 VAC-TRIS 5-11Y SUSP .....67                | pindolol TABS .....32                                                         |
| PENBRAYA ..... 65                                             | PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP .....67                | pioglitazone hcl .....16                                                      |
| penciclovir .....40                                           | PFIZER-BIONT COVID-19 VAC-TRIS SUSP ..... 67               | pioglitazone hcl-glimepiride ..... 15                                         |
| penicillamine CAPS .....55                                    | PFIZER-BIONTECH COVID-19 VACC SUSP ..... 67                | pioglitazone hcl-metformin hcl TABS .15                                       |
| penicillamine TABS .....55                                    |                                                            | piperacillin sodium-tazobactam sodium .....61                                 |
| PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML .60 |                                                            | PIQRAY (200 MG DAILY DOSE) .27                                                |
| penicillin g potassium 5000000 UNIT 60                        | PHEBURANE PLLT .....45                                     | PIQRAY (250 MG DAILY DOSE) .27                                                |
| penicillin g sodium .....60                                   | phenazopyridine hcl TABS 100 MG, 200 MG .....48            | PIQRAY (300 MG DAILY DOSE) .27                                                |
| penicillin v potassium SOLR .....60                           | phendimetrazine tartrate TABS ..... 1                      | pirfenidone CAPS .....63                                                      |
| penicillin v potassium TABS ..... 61                          | phenelzine sulfate .....13                                 | pirfenidone TABS 267 MG, 801 MG 63                                            |
| PENMENVY SUSR IM .....65                                      | phenobarbital ELIX .....50                                 | pirfenidone TABS 534 MG .....63                                               |
| PENTACEL .....64                                              | phenobarbital TABS .....50                                 | piroxicam CAPS .....4                                                         |
| pentazocine w/ naloxone hcl ..... 7                           | phenoxybenzamine hcl .....20                               | PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L ..... 54 |
| pentoxifylline ..... 48                                       | phentermine hcl CAPS .....1                                | PLASMA-LYTE A (electrolyte-a) ..54                                            |
| perampanel TABS 2 MG .....11                                  | phenytoin CHEW .....13                                     | PLEGRIDY SOAJ .....62                                                         |
| perampanel TABS 4 MG .....11                                  | phenytoin sodium extended 100 MG, 200 MG, 300 MG .....13   | PLEGRIDY SOSY SC .....62                                                      |
| perampanel TABS 6 MG .....11                                  | phenytoin sodium SOLN .....13                              | PLEGRIDY STARTER PACK SOAJ .62                                                |
| perampanel TABS 8 MG, 10 MG, 12 MG ..... 11                   | phenytoin SUSP ..... 13                                    |                                                                               |
| perindopril erbumine 2 MG, 8 MG .19                           | PHEXX ..... 68                                             |                                                                               |
| perindopril erbumine 4 MG ..... 20                            | PHEXXI .....68                                             | PLEGRIDY STARTER PACK SOSY SC .....62                                         |
| PERJETA .....24                                               | PHOTOFRIN .....28                                          | plerixafor .....50                                                            |
| permethrin CREA .....43                                       | PHYRAGO 20 MG, 50 MG, 70 MG, 80 MG, 100 MG, 140 MG .....27 | PNEUMOVAX 23 SOLN .....65                                                     |
| permethrin LIQD EX ..... 43                                   | PIFELTRO .....31                                           | PNEUMOVAX 23 SOSY .....65                                                     |

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| podofilox SOLN .....                                                                                                                                                                                                      | 42 | 47                                                                                 | pregabalin (once-daily) 82.5 MG, 165 MG ..... | 62                                                                                                                                                                                                                             |    |
| polymyxin b sulfate SOLR .....                                                                                                                                                                                            | 22 | potassium phosphates 45                                                            |                                               |                                                                                                                                                                                                                                |    |
| polymyxin b-trimethoprim .....                                                                                                                                                                                            | 59 | MMOLE/15ML .....                                                                   | 55                                            | pregabalin CAPS 225 MG, 300 MG 12                                                                                                                                                                                              |    |
| POMALYST .....                                                                                                                                                                                                            | 25 | PR BENZOYL PEROXIDE WASH                                                           |                                               |                                                                                                                                                                                                                                |    |
| posaconazole SUSP .....                                                                                                                                                                                                   | 18 | LIQD .....                                                                         | 38                                            | pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ... 12                                                                                                                                                             |    |
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| sulconazole nitrate SOLN .....      | 39 | SUNOSI 150 MG .....                | 1  | tavaborole .....                             | 39 |
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| sulfacetamide sodium w/ sulfur      |    | SYNJARDY XR TB24 1000 MG-10        |    | TDVAX SUSP .....                             | 64 |
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| sulfacetamide sodium w/ sulfur LIQD |    | MG .....                           | 15 | TEGRETOL SUSP (carbamazepine) .              | 12 |
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| sulfacetamide sodium w/ sulfur LIQD |    | MG .....                           | 15 | telmisartan .....                            | 20 |
| 9 %-4.5 % .....                     | 38 | SYNRIBO .....                      | 28 | telmisartan-amlodipine .....                 | 21 |
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| sulfadiazine TABS .....             | 63 | TABLOID .....                      | 24 | temazepam 7.5 MG, 22.5 MG .....              | 50 |
| sulfamethoxazole-trimethoprim SOLN  |    | TABRECTA .....                     | 27 | TEMODAR SOLR .....                           | 23 |
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| 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 |
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| MG/0.5ML .....                      | 54 | TALZENNA .....                     | 27 |                                              |    |
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| testosterone cypionate SOLN IM ...                | 7  | tiotropium bromide CAPS IN 18 MCG<br>.....                     | 9  | tramadol hcl TABS 50 MG .....                                | 6  |
| testosterone enanthate SOLN IM ...                | 7  | TIVICAY TABS .....                                             | 31 | tramadol hcl TB24 .....                                      | 6  |
| TETANUS-DIPHTHERIA TOXOIDS<br>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<br>MG, 240 MG-1 MG ..... | 21 |
| theophylline ELIX .....                           | 10 | tobramycin sulfate SOLN IJ 2<br>GM/50ML, 10 MG/ML, 80 MG/2ML . | 2  | trandolapril-verapamil hcl 240 MG-2<br>MG, 240 MG-4 MG ..... | 21 |
| theophylline SOLN .....                           | 10 | tobramycin-dexamethasone SUSP<br>59                            |    | tranexamic acid SOLN 1000<br>MG/10ML .....                   | 50 |
| theophylline TB12 .....                           | 10 | TODAY SPONGE MISC .....                                        | 67 | tranexamic acid TABS .....                                   | 50 |
| theophylline TB24 .....                           | 10 | tolcapone .....                                                | 28 | tranylcypromine sulfate .....                                | 13 |
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| THIOLA EC TBEC 100 MG<br>(tiopronin) .....        | 48 | tolmetin sodium TABS 600 MG ....                               | 4  | TRAZIMERA .....                                              | 24 |
| THIOLA EC TBEC 300 MG<br>(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 |
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| THYMOGLOBULIN .....                               | 56 | tolvaptan TBPK 15 MG .....                                     | 45 | TREMFYA PEN SOAJ 100 MG/ML<br>40                             |    |
| THYROGEN 0.9 MG .....                             | 43 | topiramate CPSP 15 MG .....                                    | 12 | TREMFYA PEN SOAJ SC 200<br>MG/2ML .....                      | 47 |
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| tigecycline .....                                 | 63 | topiramate TABS 25 MG, 100 MG .                                | 13 | TREMFYA CD/UC INDUCTION<br>SOAJ SC 200 MG/2ML .....          | 47 |
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| 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 |
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| 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 |
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