

2025

 elderplan®

帶領您到優質綜合醫療。™



2025 年處方藥一覽表 (承保藥物清單)

Elderplan Extra Help (HMO-POS)

Elderplan Flex (HMO-POS)

Elderplan Select (HMO-POS I-SNP/IE-SNP)

請仔細閱讀：本文件包含有關本計劃承保藥物的資訊。

自 03/01/2025 起，我們並未對此處方藥一覽表作出任何變更。如需最新資訊或有其他問題，請聯絡 Elderplan (長老計劃) 會員服務部，電話：1-800-353-3765，TTY 使用者可致電 711，服務時間為早上 8 點至晚上 8 點，每週 7 天，或瀏覽 www.elderplan.org。

HPMS 核准之處方藥一覽表檔案提交 ID：00025192

Elderplan Extra Help (HMO-POS)
Elderplan Flex (HMO-POS)
Elderplan Select (HMO-POS I-SNP/IE-SNP)

2025 年處方藥一覽表 (承保藥物清單或「藥物清單」)

請閱讀：本文件包含
有關本計劃承保藥物的資訊

HPMS 核准之處方藥一覽表檔案提交 ID 00025192

本處方藥一覽表自 03/01/2025 起未作任何變更。如需最新資訊或如有其他問題，請致電會員服務部，電話：1-800-353-3765 (TTY 使用者應撥打 711)，服務時間為早上 8 點至晚上 8 點，每週 7 天，或流覽 www.elderplan.org。

關於您的疫苗費用的重要資訊 — 即使您尚未支付自付額，我們的計劃也會為您免費承保大部分 D 部分疫苗。請致電會員服務部瞭解更多資訊。

關於您的胰島素產品費用的重要資訊 — 對於本計劃承保的每種胰島素產品，無論其費用分攤等級如何，即使您尚未支付自付額，您一個月供藥量的費用也不會超過 \$35。

現有會員請注意：本處方藥一覽表自去年以來已經變更。請閱讀本文件，確保本處方藥一覽表仍然包含您使用的藥物。

本「藥物清單」(處方藥一覽表)中，凡提述「我們」或「我們的」均指 **Elderplan Extra Help (HMO-POS)；Elderplan Flex (HMO-POS) 和 Elderplan Select (HMO-POS I-SNP/IE-SNP)**。

本文件載有我們計劃截至 03/01/2025 的「藥物清單」(處方藥一覽表)。如需最新的「藥物清單」(處方藥一覽表)，請聯絡我們。我們的聯絡資訊連同最後更新「藥物清單」(處方藥一覽表)的日期載於封面和封底。

一般而言，您必須使用網絡內藥房才能享受處方藥福利。福利、處方藥一覽表、藥房網絡及/或共付額/共同保險可能在 2025 年 1 月 1 日有所更改，且可能在此年度中不時更改。

什麼是 Elderplan（長老計劃）處方藥一覽表？

在本文件中，提及的「藥物清單」和「處方藥一覽表」表示同一資料。處方藥一覽表是我們的計劃與健康護理提供者團隊磋商所選出的承保藥物清單，是高品質治療計劃中不可或缺的處方藥治療。只要具有醫療必需性，且於我們計劃的網絡內藥房配藥，並遵守其他計劃規則，我們的計劃通常會承保列於處方藥一覽表中的藥物。如需瞭解有關如何配取處方藥的更多資訊，請查閱您的《承保範圍說明書》。

處方藥一覽表是否可能會變更？

大多數藥物承保範圍的變更發生在 1 月 1 日，但我們可能會在全年期間增添或移除處方藥一覽表上的藥物，將藥物調整到不同的費用分攤等級，或增設新的限制。在作出這類變更時，我們必須遵守 Medicare 聯邦醫療保險的規則。處方藥一覽表的更新每月都會發佈於我們的網站：www.elderplan.org。

今年可能會影響到您的變更：在下列情況中，您將受到當年承保範圍變更的影響：

- **立即將某些原廠藥和原研生物製品替換為新版本。**如果某種藥物有新版本可以替代，且該新版本藥物將出現在相同或更低的費用分攤等級上且具有相同或更少的限制，我們可能會立即將原藥物從我們的處方藥一覽表中移除。當我們在處方藥一覽表中新增某種藥物的新版本時，我們可能會保留原廠藥或原研生物製品，但會立即將其移到不同的費用分攤等級或增設限制。

只有當我們增加處方藥一覽表中已有的原廠藥的新副廠藥版本，或已有的原研生物製品的新生物仿製藥版本時，我們才會立即進行此類變更（例如，新增可互換的生物仿製藥，藥房無需新處方即可用它替代原研生物製品）。

如果您目前正在服用該原廠藥或原研生物製品，我們可能不會在進行該立即變更前通知您，但我們之後會將已做特定變更的相關資訊提供給您。

如果我們進行此類變更，您或您的處方醫生可以要求我們作出例外處理，繼續為您承保發生了變更的藥物。如需更多資訊，請參見標題為「如何申請 Elderplan（長老計劃）處方藥一覽表例外處理？」一節。

部分此類藥物對您而言可能是全新的藥物。如需更多資訊，請參見標題為「什麼是原研生物製品，它們與生物仿製藥有何關係？」一節。

- **藥品退出市場。**如果某種藥物被製造商撤回銷售，或美國食品及藥物管理局 (FDA) 認定該藥物因安全性或有效性原因被撤回，我們會立即從我們的處方藥一覽表中移除該藥物，並在之後通知使用該藥物的會員。

- **其他變更。**我們可能會作出影響目前正在使用藥物的會員的其他變更。例如，當我們添加一種等效副廠藥時，可能會將某種原廠藥從處方藥一覽表中移除；或當我們添加一種生物仿製藥時，可能會將原研生物製品從處方藥一覽表中移除。我們還可能會對原廠藥或原研生物製品增設限制或將其移到不同的費用分攤等級，或者同時作出這兩種變更。我們可能會根據新的臨床指南作出變更。我們若從處方藥一覽表中移除藥物，新增對某種藥物的事先授權、數量限制和/或階段療法限制，或將某種藥物移至更高的費用分攤等級，我們必須在變更生效前至少 30 天向受變更影響的會員發出通知。或者，當會員要求再次配藥時，他們會獲得該藥物 30 天的藥量，並被通知該藥物的變更情況。

如果我們進行其他此類變更，您或您的處方醫生可以要求我們進行例外處理，繼續為您承保您正在使用的藥物。我們提供給您的通知也會列出相關資訊，告訴您如何申請例外處理，您也可以後文的「如何申請 Elderplan（長老計劃）處方藥一覽表例外處理？」章節中找到資訊。

不會影響您目前所使用藥物的變更。一般而言，若您正在使用年初享受承保的 2025 年處方藥一覽表上的藥物，我們不會在 2025 年承保年度中終止或減少此藥物的承保，除非出現上文所述情況。換言之，在承保年度的剩餘時間內，此藥物將以相同的分攤費用向使用此藥物的會員提供，且不設新的限制。對於不會影響您的變更，本年內您不會收到有關直接通知。然而，自明年的 1 月 1 日起，此類變更可能會影響到您，因此務必檢查新福利年度的處方藥一覽表，瞭解藥物是否有任何變更。

本文件內附的處方藥一覽表最後更新於 03/01/2025。若要獲取有關我們計劃承保藥物的最新資訊，請聯絡我們。我們的聯絡資訊載於封面和封底。

如果我們的計劃作出年中非維護性處方藥一覽表變更，我們網站上的處方藥一覽表將會更新以顯示這些變更。請瀏覽我們的網站或致電會員服務部，以獲得更新的列印版處方藥一覽表或更多有關維護性藥物變更的資訊。聯絡資訊載於封面和封底。

如何使用處方藥一覽表？

有兩種方法在處方藥一覽表中查找您所需的藥物：

病症

處方藥一覽表從第 1 頁開始。本處方藥一覽表中的藥物依照其所治療的病症類別分類。例如，用於治療心臟病的藥物列於「心血管」類別之下。若您瞭解藥物的用途，在從第 1 頁開始的清單中查找類別名稱。然後，在此類別名稱下查找所需的藥物。

按字母順序排列的清單

如果您不確定要查找什麼類別，您可以利用自第 84 頁開始的索引來查找所需的藥物。該索引提供一份按字母順序排列的清單，其中有本文件包含的所有藥物。原廠藥和副廠藥均列在該索引中。請在該索引中查找所需的藥物。在藥物旁邊，您將看到承保資訊的所在頁碼。請轉到該索引中所列的頁碼，在清單的第一欄即可找到所需的藥物名稱。

什麼是副廠藥？

我們的計劃同時承保原廠藥和副廠藥。副廠藥是一種由 FDA 核准，具有與原廠藥相同活性成分的藥物。通常，副廠藥與原廠藥的藥效相同，並且費用更低。許多原廠藥皆有副廠藥可供替代。副廠藥通常可在藥房替代原廠藥而無需新的處方，具體取決於州法律。

什麼是原研生物製品，它們與生物仿製藥有何關係？

在處方藥一覽表上，當我們提到「藥物」時，可能是指藥品也可能是生物製品。生物製品是一類比典型藥物更複雜的藥物。由於生物製品比典型藥物更複雜，因此它們沒有副廠版本，而是具有稱為生物仿製藥的替代藥物。通常，生物仿製藥和原研生物製品的藥效相同，並且費用較低。有些原研生物製品有替代的生物仿製藥。一些生物仿製藥是可互換生物仿製藥，可在藥房替代原廠藥而無需新的處方，具體取決於州法律，如同副廠藥可以替代原廠藥。

- 有關藥物類型的討論，請參閱《承保範圍說明書》第 5 章第 3.1 節「『藥物清單』說明何種 D 部分藥物有承保」。

我的承保有任何限制嗎？

部分承保藥物在承保上可能存在額外要求或限制。這些要求和限制可能包括：

- **事先授權：**我們的計劃要求您或您的處方醫生為特定藥物取得事先授權。這表示您將需要在配藥前取得我們計劃的批准。若您未取得批准，我們的計劃可能不會承保該藥物。
- **數量限制：**我們的計劃限制了某些藥物的承保數量。例如：我們的計劃對於 Januvia 50mg 的每份處方提供 30 片藥片。這可能是在每月或每三個月標準供藥量以外的供藥。
- **階段療法：**某些情況下，我們的計劃會要求您先嘗試使用某些藥物治療您的病症後才會承保您使用另外一種藥物。例如，若藥物 A 和藥物 B 皆可治療您的病症，則我們的計劃可能不會承保藥物 B，除非您先嘗試使用藥物 A。如果藥物 A 對您無效，則我們的計劃將會承保藥物 B。

您可以透過第 1 頁開始的處方藥一覽表查詢您的藥物是否有額外的要求或限制。您也可以透過瀏覽我們的網站，取得更多關於特定承保藥物適用之限制的資訊。我們已在線上刊載文件，解釋我們的事先授權和階段療法限制。您也可以要求我們寄一份給您。我們的聯絡資訊連同最後更新處方藥一覽表的日期載於封面和封底。

您可以要求我們的計劃對此類限制或使用上限作出例外處理，或索取可能治療您的病症的其他相似藥物的清單。有關如何申請例外處理的資訊，請查看第 IV 頁的「如何申請 Elderplan（長老計劃）處方藥一覽表例外處理？」章節。

若我的藥物不在處方藥一覽表上，該怎麼辦？

若您的藥物不在此處方藥一覽表（承保藥物清單）上，那麼您首先應該聯絡會員服務部，詢問您的藥物是否在承保範圍內。

若您得知我們的計劃並未承保您的藥物，您有兩種選擇：

- 您可向會員服務部索取一份由我們的計劃承保的相似藥物清單。當您收到該清單後，請拿給您的醫生看，並要求醫生開立由我們計劃承保的相似藥物。
- 您可以要求我們的計劃作出例外處理並承保您的藥物。請查看以下關於如何申請例外處理的資訊。

如何申請 Elderplan（長老計劃）處方藥一覽表例外處理？

您可以要求我們的計劃對我們的承保規則作出例外處理。您可以向我們提出數種例外處理申請。

- 您可以要求我們承保不在我們的處方藥一覽表上的藥物。如獲批准，此藥物將按預定費用分攤等級獲得承保，但您不得要求我們以更低的費用分攤等級提供此藥物。
- 您可以要求我們豁免承保限制，包括事先授權、階段治療或藥物的數量限制。例如，對於某些藥物，我們的計劃限制了藥物的承保數量。若您的藥物有數量限制，您可以要求我們撤銷限制並承保更多數量。
- 您可以要求我們按更低的費用分攤等級承保某種處方藥一覽表上的藥物。除非此藥物屬於特殊級藥，否則您可要求我們按更低的費用分攤等級承保處方藥一覽表藥物。如獲批准，則可減少您必須為藥物支付的金額。

通常，只有在計劃處方藥一覽表中的替代藥物、更低費用分攤等級藥物、遵循該限制將無法同樣有效治療您的病症並且/或將導致您出現副作用時，我們的計劃才會批准您的例外處理申請。

您和您的處方醫生應聯絡我們來申請等級或處方藥一覽表例外處理，包括承保限制例外處理。**當您申請例外處理時，您的處方醫生需就為何您需要例外處理說明醫療理由。**通常，我們在收到處方醫生的支持聲明後，必須在 72 小時內作出決定。如果您認為等候 72 小時再作出決定會對您的健康造成嚴重危害，且我們同意這一點，您可以申請加急（快速）決定。如果我們同意，或您的處方醫生要求快速決定，我們必須在收到您處方醫生的支持聲明後不遲於 24 小時為您做出決定。

如果我的藥物不在處方藥一覽表上，或有限制，該怎麼辦？

作為我們的計劃的新會員或現有會員，您可能正在使用我們處方藥一覽表上沒有的藥物。或者，您可能正在使用一種在我們處方藥一覽表上的藥物，但有承保範圍限制，例如事先授權。您應和您的處方醫生討論申請承保決定，以表明您符合關於批准、轉換到我們承保的替代藥物，或申請處方藥一覽表例外處理的標準，以便我們承保您使用的藥物。在您和您的醫生確定何種措施對您合適的時候，我們可能會在您成為我們計劃的會員的前 90 天內針對某些情況為您的藥物提供承保。

對於所有不在我們處方藥一覽表上或有承保限制的藥物，我們將承保 30 天份量的臨時供藥。如果您的處方上的供藥時間不足此數，我們將允許續配，以提供最多 30 天份量的供藥。在提供前 30 天藥量之後，如果承保未獲批准，我們將不再為您支付這些藥物的費用，即使您成為計劃的會員還不足 90 天。

如果您住在長期護理機構，並且需要的藥物不在我們的處方藥一覽表上，或如果您獲取藥物的能力受到限制，但您成為我們計劃會員已超過 90 天，則在您尋求處方藥一覽表例外處理時，我們將對該藥物承保 31 天份量的緊急供藥。

計劃現有會員的護理水平變更

若您從門診（居所）、醫院或其他長期護理 (LTC) 機構轉至一家 LTC 機構，我們將為不在我們處方藥一覽表上或有承保限制或使用上限的各種藥物承保 31 天的過渡期臨時性供藥（除非您的處方寫明更少天數）。

若您從 LTC 機構或醫院出院，並返回門診環境（居所），我們將在您出院後為不在我們處方藥一覽表上或有承保限制或使用上限的各種藥物承保 30 天的臨時性供藥（除非您的處方寫明更少天數）。

請注意，我們的過渡期政策僅適用於「D 部分藥物」和在網絡內藥房配取的藥物。

瞭解更多資訊

如需更多關於我們計劃處方藥承保的詳細資訊，請查閱您的《承保範圍說明書》及其他計劃資料。

如果您對我們的計劃有任何疑問，請聯絡我們。我們的聯絡資訊連同最後更新處方藥一覽表的日期載於封面和封底。

有關 Medicare 聯邦醫療保險處方藥承保範圍的常見問題，請致電 Medicare 聯邦醫療保險，電話：1-800-MEDICARE (1-800-633-4227)，服務時間為每週 7 天，每天 24 小時。TTY 使用者應撥打 1-877-486-2048。或瀏覽 <http://www.medicare.gov>。

我們計劃的處方藥一覽表

從第 1 頁開始的處方藥一覽表介紹了我們計劃承保的藥物的承保資訊。若您難以在清單中找到所需的藥物，請翻閱第 84 頁開始的索引。

清單的第一欄列出了藥物名稱。原廠藥用大寫字母表示（如 LANOXIN），副廠藥則用小寫斜體字母表示（如 *digoxin*）。

「要求/限制」欄中的資訊表示我們的計劃對於承保您的藥物是否有任何特殊的要求。

B/D - B 部分與 D 部分事先授權：某些藥物可能由 Medicare 聯邦醫療保險 B 部分或 D 部分承保（視情況而定）。可能需要提交資訊，描述藥物的用途與規定，以便作出裁決。

PA - 事先授權：某些藥物需要您或您的醫生獲得我們計劃的事先授權才能配取。這表示您將需要在配藥前取得我們計劃的批准。若您未取得批准，我們的計劃可能不會承保該藥物。

QL - 數量限制：我們的計劃限制了某些藥物的承保數量。例如，我們的計劃對於 Januvia 的每份處方提供 30 片藥片。數量限制指若干天的供藥量。

ST - 階段療法：我們的計劃會要求您嘗試使用某些藥物治療您的病症後才會承保您使用另一種藥物。例如，若藥物 A 和藥物 B 皆可治療您的病症，則我們的計劃可能不會承保藥物 B，除非您先嘗試使用藥物 A。如果藥物 A 對您無效，則我們的計劃將會承保藥物 B。

NM - 這類藥物不可透過郵購服務購買。

NDS - 非延長天數供應。某些特殊藥物每次配藥最多提供 30 天份量的供藥。

D 部分分攤費用金額

請查看您的承保範圍說明書 (EOC) 以瞭解適用的 **D 部分自付額**及/或 **D 部分保費**的更多資訊。

Elderplan Extra Help (HMO-POS) H3347-009

等級（等級名稱）	自付額	零售藥房費用 （30 天份量的供藥） ^Ω	零售藥房費用 （最多 90 天份量的供藥） ^{*†Ω}	郵購藥房費用 （最多 90 天份量的供藥） ^{†Ω}
第 1 級（首選副廠藥）	<u>\$0</u>	\$4.00	\$12.00	\$8.00
第 2 級（副廠藥）		\$10.00	\$30.00	\$20.00
第 3 級（首選原廠藥）		\$47.00	\$141.00	\$94.00
第 4 級（非首選藥物）	<u>\$590</u>	\$100.00	\$300.00	\$200.00
第 5 級（特殊級藥）		25%	25%	25%

*標準零售也可提供 60 天份量的供藥。

†NDS：非延長天數供應。某些特殊藥物每次配藥最多提供 30 天份量的供藥。

Ω - 即使您沒有支付自付額，對於我們計劃承保的每種胰島素產品的一個月供藥量，您支付的費用不會超過 \$35，無論 B 部分和 D 部分藥物的費用分攤等級如何。

Elderplan Flex (HMO-POS) H3347-016

等級 (等級名稱)	自付額	零售藥房費用 (30 天份量的供藥) ^Ω	零售藥房費用 (最多 90 天份量的供藥) ^{*†Ω}	郵購藥房費用 (最多 90 天份量的供藥) ^{†Ω}
第 1 級 (首選副廠藥)	<u>\$0</u>	\$0	\$0	\$0
第 2 級 (副廠藥)		\$10.00	\$30.00	\$20.00
第 3 級 (首選原廠藥)		\$47.00	\$141.00	\$94.00
第 4 級 (非首選藥物)	<u>\$375</u>	\$100.00	\$300.00	\$200.00
第 5 級 (特殊級藥)		28%	28%	28%

*標準零售也可提供 60 天份量的供藥。

†NDS：非延長天數供應。某些特殊藥物每次配藥最多提供 30 天份量的供藥。

Ω - 即使您沒有支付自付額，對於我們計劃承保的每種胰島素產品的一個月供藥量，您支付的費用不會超過 \$35，無論 B 部分和 D 部分藥物的費用分攤等級如何。

Elderplan Select (HMO-POS I-SNP/IE-SNP) H3347-018

等級（等級名稱）	自付額	零售藥房費用 （30 天份量的供藥） ^Ω	零售藥房費用 （最多 90 天份量的供藥） ^{*† Ω}	郵購藥房費用 （最多 90 天份量的供藥） ^{† Ω}
第 1 級（首選副廠藥）	\$0	\$0.00	\$0.00	\$0.00
第 2 級（副廠藥）		\$2.00	\$6.00	\$4.00
第 3 級（首選原廠藥）		\$25.00	\$75.00	\$50.00
第 4 級（非首選藥物）		\$100.00	\$300.00	\$200.00
第 5 級（特殊級藥）		25%	25%	25%

*標準零售也可提供 60 天份量的供藥。

†NDS：非延長天數供應。某些特殊藥物每次配藥最多提供 30 天份量的供藥。

Ω - 即使您沒有支付自付額，對於我們計劃承保的每種胰島素產品的一個月供藥量，您支付的費用不會超過 \$35，無論 B 部分和 D 部分藥物的費用分攤等級如何。

Elderplan, Inc.
Notice of Nondiscrimination – Discrimination is Against the Law

繁體中文 (Chinese)

Elderplan/HomeFirst 遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。Elderplan/HomeFirst. 不因種族、膚色、民族血統、年齡、殘障或性別而排斥任何人或以不同的方式對待他們。

Elderplan/HomeFirst.:

- 向殘障人士免費提供各種援助和服務，以幫助他們與我們進行有效溝通，如：
 - 合格的手語翻譯員
 - 以其他格式提供的書面資訊（大號字體、音訊、無障礙電子格式、其他格式）
- 向母語非英語的人員免費提供各種語言服務，如：
 - 合格的翻譯員
 - 以其他語言書寫的資訊

如果您需要此類服務，請聯絡 Civil Rights Coordinator。如果您認為 Elderplan/HomeFirst 未能提供此類服務或者因種族、膚色、民族血統、年齡、殘障或性別而透過其他方式歧視您，您可以向您可以親自提交投訴，或者以郵寄、傳真或電郵的方式提交投訴。如果您在提交投訴方面需要幫助 Civil Rights Coordinator 可以幫助您。

Elderplan, Inc.
ATTN Civil Rights Coordinator
55 Water St
New York, NY 10041

Phone: 1-877-326-9978, TTY 711
Fax: 1-718-759-3643

您還可以向 U.S. Department of Health and Human Services（美國衛生及公共服務部）的 Office for Civil Rights（民權辦公室）提交民權投訴，透過 Office for Civil Rights Complaint Portal 以電子方式投訴：<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>，或者透過郵寄或電話的方式投訴：

U.S. Department of Health and Human Services
200 Independence Avenue, SW, Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 1-800-537-7697 (TDD)（聾人用電信設備）

登入 <http://www.hhs.gov/ocr/office/file/index.html> 可獲得投訴表格。

Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-353-3765 (TTY: 711). Someone who speaks English can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-353-3765 (TTY: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Simplified: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-353-3765 (TTY: 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Traditional: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-353-3765 (TTY: 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasalang-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Upang makakuha ng tagasalang-wika, tawagan lamang kami sa 1-800-353-3765 (TTY: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-353-3765 (TTY: 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-353-3765 (TTY: 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-353-3765 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-353-3765 (TTY: 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-353-3765 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم بمساعدتك. هذه خدمة فوري، ليس عليك سوى الاتصال بنا على 1-800-353-3765 (TTY:711). سيقوم شخص ما يتحدث العربية مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-353-3765 (TTY: 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-353-3765 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portugués: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-353-3765 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-353-3765 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-353-3765 (TTY: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-800-353-3765 (TTY: 711) にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

Albanian: Ne ofrojmë shërbime interpretimi pa pagesë për t'ju përgjigjur çdo lloj pyetjeje që mund të keni rreth planit tonë të shëndetit ose të mjekimit. Për t'u lidhur me një interpret, telefononi në 1-800-353-3765 (TTY: 711). Një shqip folës mund t'ju ndihmojë. Ky shërbim është pa pagesë.

Bengali: আমাদের স্বাস্থ্য বা ওষুধপত্র বিষয়ক পরিকল্পনা সম্পর্কিত আপনার যে কোনো প্রশ্নের উত্তর দেওয়ার জন্য আমাদের বিনামূল্যে দোভাষী পরিষেবা রয়েছে একজন দোভাষী পেতে, আমাদের কেবল 1-800-353-3765 (TTY: 711) নম্বরে কল করুন। বাংলা বলতে পারেন এমন কেউ আপনাকে সাহায্য করতে পারবেন। পরিষেবাটি বিনামূল্যে।

Greek: Διαθέτουμε υπηρεσία δωρεάν διερμηνείας προκειμένου να απαντούμε σε οποιοδήποτε απορίες σας σχετικά με το πρόγραμμα υγείας ή φαρμάκων που προσφέρουμε. Προκειμένου να χρησιμοποιήσετε την υπηρεσία διερμηνείας, επικοινωνήστε μαζί μας καλώντας το 1-800-353-3765 (TTY: 711). Θα λάβετε βοήθεια από ένα άτομο που μιλά ελληνικά. Αυτή είναι μια υπηρεσία που παρέχεται δωρεάν.

Yiddish: מיר האבן אומזיסטע דאלמעטשער סערוויסעס צו ענטפערן סיי וועלכע פראגעס וואס איר קענט מעגליך האבן וועגן אונזער העלט אדער דראג פלאן. צו באקומען א דאלמעטשער, רופט אונז אויף 1-800-353-3765 (TTY:711) איינער וואס רעדט אידיש/שפראך קען אייך העלפן. דאס איז אן אומזיסטע סערוויס.

Urdu: ہماری صحت یا دوا کے پلان کے بارے میں آپ کے کسی بھی سوال کا جواب دینے کے لیے ہمارے پاس مفت مترجم کی خدمات موجود ہیں۔ مترجم حاصل کرنے کے لیے، ہمیں بس 1-800-353-3765 (TTY: 711) پر کال کریں۔ اردو بولنے والا کوئی شخص آپ کی مدد کر سکتا ہے۔ یہ ایک مفت خدمت ہے۔

ELDERPLAN_CY25_5T_SNP eff 03/01/2025

Drug Name Drug Tier Requirements/Limits

ANALGESICS

GOUT

<i>allopurinol</i> TABS 100mg, 300mg	1	
<i>colchicine</i> CAPS .6mg	3	QL (60 caps / 30 days)
<i>colchicine</i> TABS .6mg	2	QL (120 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	3	
MITIGARE CAPS .6mg	3	QL (60 caps / 30 days)
<i>probenecid</i> TABS 500mg	3	

MISCELLANEOUS

<i>lidocaine hcl (local anesth.)</i> SOLN .5%, 1%, 1.5%, 2%	3	B/D
---	---	-----

NSAIDS

<i>celecoxib</i> CAPS 50mg, 100mg, 200mg	3	QL (60 caps / 30 days)
<i>celecoxib</i> CAPS 400mg	3	QL (30 caps / 30 days)
<i>diclofenac potassium</i> TABS 50mg	2	QL (120 tabs / 30 days)
<i>diclofenac sodium</i> TB24 100mg	3	
<i>diclofenac sodium</i> TBEC 25mg, 50mg, 75mg	2	
<i>diflunisal</i> TABS 500mg	3	
<i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	3	
<i>flurbiprofen</i> TABS 100mg	3	
<i>ibu</i> TABS 400mg, 600mg, 800mg	1	
<i>ibuprofen</i> SUSP 100mg/5ml	3	
<i>ibuprofen</i> TABS 400mg, 600mg, 800mg	1	
<i>meloxicam</i> TABS 7.5mg, 15mg	1	
<i>nabumetone</i> TABS 500mg, 750mg	2	
<i>naproxen</i> TABS 250mg, 375mg, 500mg	1	
<i>naproxen</i> TBEC 375mg	2	QL (120 tabs / 30 days)
<i>naproxen dr</i> TBEC 500mg	4	QL (90 tabs / 30 days)
<i>naproxen sodium</i> TABS 275mg, 550mg	3	
<i>piroxicam</i> CAPS 10mg, 20mg	3	
<i>sulindac</i> TABS 150mg, 200mg	2	

OPIOID ANALGESICS, LONG-ACTING

<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	4	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg	4	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 100mg, 120mg	5	NDS, QL (30 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
<i>methadone hcl</i> SOLN 5mg/5ml, 10mg/5ml	3	QL (450 mL / 30 days), PA
<i>methadone hcl</i> TABS 5mg, 10mg	3	QL (90 tabs / 30 days), PA
<i>methadone hydrochloride i</i> CONC 10mg/ml	3	QL (90 mL / 30 days), PA
<i>morphine sulfate</i> TBCR 15mg, 30mg, 60mg, 100mg, 200mg	3	QL (90 tabs / 30 days), PA

OPIOID ANALGESICS, SHORT-ACTING

<i>acetaminophen w/ codeine soln</i> 120-12 mg/5ml	2	QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-15 mg	2	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-30 mg	2	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-60 mg	2	QL (180 tabs / 30 days)
<i>butorphanol tartrate</i> SOLN 1mg/ml, 2mg/ml	4	
<i>endocet tab</i> 2.5-325mg	3	QL (360 tabs / 30 days)
<i>endocet tab</i> 5-325mg	3	QL (360 tabs / 30 days)
<i>endocet tab</i> 7.5-325mg	3	QL (240 tabs / 30 days)
<i>endocet tab</i> 10-325mg	3	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen soln</i> 7.5-325 mg/15ml	4	QL (2700 mL / 30 days)
<i>hydrocodone-acetaminophen tab</i> 5-325 mg	3	QL (240 tabs / 30 days)
<i>hydrocodone-acetaminophen tab</i> 7.5-325 mg	3	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen tab</i> 10-325 mg	3	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab</i> 7.5-200 mg	3	QL (150 tabs / 30 days)
<i>hydromorphone hcl</i> LIQD 1mg/ml	4	QL (600 mL / 30 days)
<i>hydromorphone hcl</i> TABS 2mg, 4mg, 8mg	3	QL (180 tabs / 30 days)
<i>morphine sulfate</i> SOLN 4mg/ml, 8mg/ml, 10mg/ml	4	B/D
<i>morphine sulfate</i> SOLN 10mg/5ml, 20mg/5ml	3	QL (900 mL / 30 days)
<i>morphine sulfate</i> SOLN 100mg/5ml	3	QL (180 mL / 30 days)
<i>morphine sulfate</i> TABS 15mg, 30mg	3	QL (180 tabs / 30 days)
<i>nalbuphine hcl</i> SOLN 10mg/ml, 20mg/ml	4	
<i>oxycodone hcl</i> CONC 100mg/5ml	4	QL (180 mL / 30 days)
<i>oxycodone hcl</i> SOLN 5mg/5ml	4	QL (900 mL / 30 days)
<i>oxycodone hcl</i> TABS 5mg, 10mg, 15mg, 20mg, 30mg	3	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab</i> 2.5-325 mg	3	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab</i> 5-325 mg	3	QL (360 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	3	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	3	QL (180 tabs / 30 days)
<i>tramadol hcl TABS 50mg</i>	2	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	2	QL (240 tabs / 30 days)

ANTI-INFECTIVES

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole TABS 200mg</i>	5	NDS, QL (672 tabs / year), PA
<i>amikacin sulfate SOLN 1gm/4ml, 500mg/2ml</i>	4	
ARIKAYCE SUSP 590mg/8.4ml	5	NDS, NM, PA
<i>atovaquone SUSP 750mg/5ml</i>	4	QL (300 mL / 30 days), PA
<i>aztreonam SOLR 1gm, 2gm</i>	4	
CAYSTON SOLR 75mg	5	NDS, NM, PA
<i>clindamycin hcl CAPS 75mg, 150mg, 300mg</i>	2	
<i>clindamycin palmitate hydrochloride SOLR 75mg/5ml</i>	4	
<i>clindamycin phosphate SOLN 900mg/6ml</i>	3	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	4	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	4	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	4	
CLINDMYC/NAC INJ 300/50ML	4	
CLINDMYC/NAC INJ 600/50ML	4	
CLINDMYC/NAC INJ 900/50ML	4	
<i>colistimethate sodium SOLR 150mg</i>	4	
<i>dapsone TABS 25mg, 100mg</i>	3	
DAPTOMYCIN SOLR 350mg	5	NDS
<i>daptomycin SOLR 350mg, 500mg</i>	5	NDS
EMVERM CHEW 100mg	5	NDS, QL (12 tabs / year)
<i>ertapenem sodium SOLR 1gm</i>	3	
<i>gentamicin in saline inj 0.8 mg/ml</i>	3	
<i>gentamicin in saline inj 1 mg/ml</i>	3	
<i>gentamicin in saline inj 1.2 mg/ml</i>	3	
<i>gentamicin in saline inj 1.6 mg/ml</i>	3	
<i>gentamicin in saline inj 2 mg/ml</i>	3	
<i>gentamicin sulfate SOLN 10mg/ml, 40mg/ml</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	3	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	3	
IMPAVIDO CAPS 50mg	5	NDS, PA
<i>ivermectin TABS 3mg</i>	3	QL (12 tabs / 90 days), PA
<i>linezolid SOLN 600mg/300ml</i>	4	
<i>linezolid SUSR 100mg/5ml</i>	5	NDS, QL (1800 mL / 30 days)
<i>linezolid TABS 600mg</i>	4	QL (60 tabs / 30 days)
LINEZOLID INJ 2MG/ML	4	
<i>meropenem SOLR 1gm, 500mg</i>	4	
<i>methenamine hippurate TABS 1gm</i>	3	
<i>metronidazole SOLN 500mg/100ml</i>	3	
<i>metronidazole TABS 250mg, 500mg</i>	1	
<i>neomycin sulfate TABS 500mg</i>	2	
<i>nitazoxanide TABS 500mg</i>	5	NDS, QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystal CAPS 50mg, 100mg</i>	3	
<i>nitrofurantoin monohyd macro CAPS 100mg</i>	3	
<i>pentamidine isethionate inh SOLR 300mg</i>	4	B/D
<i>pentamidine isethionate inj SOLR 300mg</i>	4	
<i>polymyxin b sulfate SOLR 500000unit</i>	4	
<i>praziquantel TABS 600mg</i>	4	
<i>pyrimethamine TABS 25mg</i>	5	NDS, QL (90 tabs / 30 days), PA
<i>streptomycin sulfate SOLR 1gm</i>	5	NDS
<i>sulfadiazine TABS 500mg</i>	5	NDS
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	4	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	3	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
<i>tinidazole TABS 250mg, 500mg</i>	3	
TOBI PODHALER CAPS 28mg	5	NDS, NM, PA
<i>tobramycin NEBU 300mg/5ml</i>	5	NDS, NM, PA
<i>tobramycin sulfate SOLN 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml</i>	3	
<i>trimethoprim TABS 100mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl</i> CAPS 125mg	4	QL (80 caps / 180 days)
<i>vancomycin hcl</i> CAPS 250mg	4	QL (160 caps / 180 days)
<i>vancomycin hcl</i> SOLR 1gm, 1.25gm, 1.5gm, 5gm, 10gm, 500mg, 750mg	4	
VANCOMYCIN INJ 1 GM	4	
VANCOMYCIN INJ 500MG	4	
VANCOMYCIN INJ 750MG	4	

ANTIFUNGALS

<i>ABELCET</i> SUSP 5mg/ml	4	B/D
<i>amphotericin b</i> SOLR 50mg	4	B/D
<i>amphotericin b liposome</i> SUSR 50mg	5	NDS, B/D
<i>casprofungin acetate</i> SOLR 50mg, 70mg	4	
<i>fluconazole</i> SUSR 10mg/ml, 40mg/ml; TABS 50mg	3	
<i>fluconazole</i> TABS 100mg, 150mg, 200mg	2	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	3	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	3	
<i>flucytosine</i> CAPS 250mg, 500mg	5	NDS, PA
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	4	
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	4	
<i>itraconazole</i> CAPS 100mg	4	PA
<i>ketoconazole</i> TABS 200mg	3	PA
<i>miconazole sodium</i> SOLR 50mg, 100mg	4	
<i>nystatin</i> TABS 500000unit	3	
<i>posaconazole</i> SUSP 40mg/ml	5	NDS, QL (630 mL / 30 days), PA
<i>posaconazole</i> TBEC 100mg	5	NDS, QL (93 tabs / 30 days), PA
<i>terbinafine hcl</i> TABS 250mg	1	QL (30 tabs / 30 days), PA; PA applies after a 90 day supply in a calendar year
<i>voriconazole</i> SOLR 200mg	4	PA
<i>voriconazole</i> SUSR 40mg/ml	5	NDS, QL (600 mL / 28 days), PA
<i>voriconazole</i> TABS 50mg	4	QL (480 tabs / 30 days)
<i>voriconazole</i> TABS 200mg	4	QL (120 tabs / 30 days)

ANTIMALARIALS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	4	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	4	
<i>chloroquine phosphate</i> TABS 250mg, 500mg	4	

Drug Name	Drug Tier	Requirements/Limits
COARTEM TAB 20-120MG	4	
<i>mefloquine hcl</i> TABS 250mg	3	
<i>primaquine phosphate</i> TABS 26.3mg	3	
PRIMAQUINE PHOSPHATE TABS 26.3mg	3	
<i>quinine sulfate</i> CAPS 324mg	4	PA

ANTIRETROVIRAL AGENTS

<i>abacavir sulfate</i> SOLN 20mg/ml	4	NM
<i>abacavir sulfate</i> TABS 300mg	3	NM
APTIVUS CAPS 250mg	5	NDS, NM
<i>atazanavir sulfate</i> CAPS 150mg, 200mg, 300mg	4	NM
<i>darunavir</i> TABS 600mg	5	NDS, QL (60 tabs / 30 days), NM
<i>darunavir</i> TABS 800mg	5	NDS, QL (30 tabs / 30 days), NM
EDURANT TABS 25mg	5	NDS, NM
<i>efavirenz</i> TABS 600mg	4	NM
<i>emtricitabine</i> CAPS 200mg	3	NM
EMTRIVA SOLN 10mg/ml	4	NM
<i>etravirine</i> TABS 100mg, 200mg	5	NDS, NM
<i>fosamprenavir calcium</i> TABS 700mg	5	NDS, NM
FUZEON SOLR 90mg	5	NDS, NM
INTELENCE TABS 25mg	4	NM
ISENTRESS CHEW 25mg	4	NM
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	5	NDS, NM
ISENTRESS HD TABS 600mg	5	NDS, NM
<i>lamivudine</i> SOLN 10mg/ml; TABS 150mg, 300mg	3	NM
<i>maraviroc</i> TABS 150mg, 300mg	5	NDS, NM
<i>nevirapine</i> SUSP 50mg/5ml; TB24 400mg	4	NM
<i>nevirapine</i> TABS 200mg	2	NM
NORVIR PACK 100mg	4	NM
PIFELTRO TABS 100mg	5	NDS, NM
PREZISTA SUSP 100mg/ml	5	NDS, QL (400 mL / 30 days), NM
PREZISTA TABS 75mg	4	QL (480 tabs / 30 days), NM
PREZISTA TABS 150mg	5	NDS, QL (240 tabs / 30 days), NM
REYATAZ PACK 50mg	5	NDS, NM
<i>ritonavir</i> TABS 100mg	3	NM
RUKOBIA TB12 600mg	5	NDS, NM
SELZENTRY SOLN 20mg/ml	5	NDS, NM
SUNLENCA TBPK 300mg	5	NDS, NM

Drug Name	Drug Tier	Requirements/Limits
<i>tenofovir disoproxil fumarate</i> TABS 300mg	3	NM
TIVICAY TABS 10mg	3	NM
TIVICAY TABS 25mg, 50mg	5	NDS, NM
TIVICAY PD TBSO 5mg	5	NDS, NM
TROGARZO SOLN 200mg/1.33ml	5	NDS, NM
TYBOST TABS 150mg	3	NM
VIRACEPT TABS 250mg, 625mg	5	NDS, NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	5	NDS, NM
<i>zidovudine</i> CAPS 100mg; SYRP 50mg/5ml	4	NM
<i>zidovudine</i> TABS 300mg	3	NM

ANTIRETROVIRAL COMBINATION AGENTS

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	3	NM
BIKTARVY TAB 30-120-15 MG	5	NDS, NM
BIKTARVY TAB 50-200-25 MG	5	NDS, NM
CIMDUO TAB 300-300	5	NDS, NM
COMPLERA TAB	5	NDS, NM
DELSTRIGO TAB	5	NDS, NM
DESCOVY TAB 120-15MG	5	NDS, NM
DESCOVY TAB 200/25MG	5	NDS, NM
DOVATO TAB 50-300MG	5	NDS, NM
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	5	NDS, NM
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	5	NDS, NM
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	5	NDS, NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	5	NDS, NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	5	NDS, NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	5	NDS, NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	4	NM
EVOTAZ TAB 300-150	5	NDS, NM
GENVOYA TAB	5	NDS, NM
JULUCA TAB 50-25MG	5	NDS, NM
<i>lamivudine-zidovudine tab 150-300 mg</i>	4	NM
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	4	NM
<i>lopinavir-ritonavir tab 100-25 mg</i>	4	NM
<i>lopinavir-ritonavir tab 200-50 mg</i>	4	NM
ODEFSEY TAB	5	NDS, NM

Drug Name	Drug Tier	Requirements/Limits
PREZCOBIX TAB 800-150	5	NDS, NM
STRIBILD TAB	5	NDS, NM
SYMTUZA TAB	5	NDS, NM
TRIUMEQ PD TAB	3	NM
TRIUMEQ TAB	5	NDS, NM

ANTITUBERCULAR AGENTS

<i>cycloserine</i> CAPS 250mg	5	NDS
<i>ethambutol hcl</i> TABS 100mg, 400mg	3	
<i>isoniazid</i> SYRP 50mg/5ml	4	
<i>isoniazid</i> TABS 100mg, 300mg	1	
PRIFTIN TABS 150mg	4	
<i>pyrazinamide</i> TABS 500mg	4	
<i>rifabutin</i> CAPS 150mg	4	
<i>rifampin</i> CAPS 150mg, 300mg	3	
<i>rifampin</i> SOLR 600mg	4	
SIRTURO TABS 20mg, 100mg	5	NDS, NM, PA
TRECTOR TABS 250mg	4	

ANTIVIRALS

<i>acyclovir</i> CAPS 200mg; TABS 400mg, 800mg	2	
<i>acyclovir</i> SUSP 200mg/5ml	4	
<i>acyclovir sodium</i> SOLN 50mg/ml	4	B/D
<i>adefovir dipivoxil</i> TABS 10mg	4	NM
BARACLUDE SOLN .05mg/ml	5	NDS, NM, ST
<i>entecavir</i> TABS .5mg, 1mg	4	NM
EPCLUSA PAK 150-37.5	5	NDS, NM, PA
EPCLUSA PAK 200-50MG	5	NDS, NM, PA
EPCLUSA TAB 200-50MG	5	NDS, NM, PA
EPCLUSA TAB 400-100	5	NDS, NM, PA
<i>famciclovir</i> TABS 125mg, 250mg, 500mg	3	
<i>ganciclovir sodium</i> SOLR 500mg	4	B/D
HARVONI PAK 33.75-150MG	5	NDS, NM, PA
HARVONI PAK 45-200MG	5	NDS, NM, PA
HARVONI TAB 45-200MG	5	NDS, NM, PA
HARVONI TAB 90-400MG	5	NDS, NM, PA
<i>lamivudine (hbv)</i> TABS 100mg	4	NM
LIVTENCITY TABS 200mg	5	NDS, QL (336 tabs / 28 days), NM, PA
MAVYRET PAK 50-20MG	5	NDS, NM, PA
MAVYRET TAB 100-40MG	5	NDS, NM, PA
<i>oseltamivir phosphate</i> CAPS 30mg	3	QL (168 caps / year)
<i>oseltamivir phosphate</i> CAPS 45mg, 75mg	3	QL (84 caps / year)
<i>oseltamivir phosphate</i> SUSR 6mg/ml	3	QL (1080 mL / year)

Drug Name	Drug Tier	Requirements/Limits
PAXLOVID TAB 150-100	5	NDS, QL (40 tabs / 90 days)
PAXLOVID TAB 300-100	5	NDS, QL (60 tabs / 90 days)
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	5	NDS, NM, PA
PREVYMIS TABS 240mg, 480mg	5	NDS, QL (28 tabs / 28 days), PA
RELENZA DISKHALER AEPB 5mg/blister	3	QL (6 inhalers / year)
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	3	NM
<i>rimantadine hydrochloride</i> TABS 100mg	4	
<i>valacyclovir hcl</i> TABS 1gm, 500mg	3	
<i>valganciclovir hcl</i> SOLR 50mg/ml	5	NDS
<i>valganciclovir hcl</i> TABS 450mg	3	
VOSEVI TAB	5	NDS, NM, PA
XOFLUZA TBPk 40mg, 80mg	4	QL (1 tab / 180 days)

CEPHALOSPORINS

<i>cefaclor</i> CAPS 250mg, 500mg	3	
<i>cefadroxil</i> CAPS 500mg	2	
<i>cefadroxil</i> SUSR 250mg/5ml, 500mg/5ml	3	
CEFAZOLIN SOLR 2gm, 3gm	4	
CEFAZOLIN INJ 1GM/50ML	4	
<i>cefazolin sodium</i> SOLR 1gm, 2gm, 3gm, 10gm, 500mg	3	
CEFAZOLIN SOLN 2GM/100ML-4%	4	
CEFAZOLIN/DEX SOL 1GM/50ML-4%	4	
CEFAZOLIN/DEX SOL 2GM/50ML-3%	4	
CEFAZOLIN/DEX SOL 3GM/150ML-4%	4	
<i>cefdinir</i> CAPS 300mg	2	
<i>cefdinir</i> SUSR 125mg/5ml, 250mg/5ml	3	
<i>cefepime hcl</i> SOLR 1gm, 2gm	4	
<i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml	4	
<i>cefotetan disodium</i> SOLR 1gm, 2gm	4	
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	4	
<i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml	4	
<i>cefpodoxime proxetil</i> TABS 100mg, 200mg	3	
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	3	
<i>ceftazidime</i> SOLR 1gm, 2gm, 6gm	4	
<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	4	
<i>cefuroxime axetil</i> TABS 250mg, 500mg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>cefuroxime sodium</i> SOLR 1.5gm, 750mg	3	
<i>cephalexin</i> CAPS 250mg, 500mg	1	
<i>cephalexin</i> SUSR 125mg/5ml, 250mg/5ml	3	
<i>tazicef</i> SOLR 1gm, 2gm, 6gm	4	
TEFLARO SOLR 400mg, 600mg	5	NDS

ERYTHROMYCINS/MACROLIDES

<i>azithromycin</i> PACK 1gm; SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml	3	
<i>azithromycin</i> TABS 250mg, 500mg, 600mg	1	
<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TB24 500mg	4	
<i>clarithromycin</i> TABS 250mg, 500mg	3	
DIFICID SUSR 40mg/ml; TABS 200mg	5	NDS
<i>e.e.s. 400</i> TABS 400mg	4	
<i>ery-tab</i> TBEC 250mg, 333mg, 500mg	4	
ERYTHROCIN LACTOBIONATE SOLR 500mg	4	
<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	4	
<i>erythromycin ethylsuccinate</i> TABS 400mg	4	
<i>erythromycin lactobionate</i> SOLR 500mg	4	

FLUOROQUINOLONES

<i>ciprofloxacin 200 mg/100ml in d5w</i>	3	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	3	
<i>ciprofloxacin hcl</i> TABS 250mg, 500mg, 750mg	1	
<i>levofloxacin</i> SOLN 25mg/ml	4	
<i>levofloxacin</i> TABS 250mg, 500mg, 750mg	1	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	3	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	3	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	3	
<i>moxifloxacin hcl</i> TABS 400mg	3	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	4	

PENICILLINS

<i>amoxicillin</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	1	
<i>amoxicillin</i> CHEW 125mg, 250mg	2	
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	3	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	4	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	3	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	3	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	3	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	4	
<i>ampicillin CAPS 500mg</i>	2	
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	4	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	4	
<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	4	
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	4	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	4	
<i>ampicillin sodium SOLR 1gm, 2gm, 10gm, 125mg, 250mg, 500mg</i>	4	
<i>BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml</i>	4	
<i>dicloxacillin sodium CAPS 250mg, 500mg</i>	3	
<i>nafcillin sodium SOLR 1gm, 2gm</i>	4	
<i>nafcillin sodium SOLR 10gm</i>	5	NDS
<i>oxacillin sodium SOLR 1gm, 2gm, 10gm</i>	4	
<i>penicillin g potassium SOLR 5000000unit, 20000000unit</i>	4	
<i>penicillin g sodium SOLR 5000000unit</i>	4	
<i>penicillin v potassium SOLR 125mg/5ml, 250mg/5ml</i>	2	
<i>penicillin v potassium TABS 250mg, 500mg</i>	1	
<i>pfizerpen SOLR 5000000unit, 20000000unit</i>	4	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	4	

Drug Name	Drug Tier	Requirements/Limits
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	4	

TETRACYCLINES

<i>doxy 100 SOLR 100mg</i>	4	
<i>doxycycline (monohydrate) CAPS 50mg, 100mg</i>	2	
<i>doxycycline (monohydrate) SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg</i>	3	
<i>doxycycline hyclate CAPS 50mg, 100mg; TABS 20mg, 100mg</i>	3	
<i>doxycycline hyclate SOLR 100mg</i>	4	
<i>minocycline hcl CAPS 50mg, 75mg, 100mg</i>	3	
NUZYRA SOLR 100mg	5	NDS, NM
NUZYRA TABS 150mg	5	NDS, QL (30 tabs / 14 days), NM
<i>tetracycline hcl CAPS 250mg, 500mg</i>	4	
<i>tigecycline SOLR 50mg</i>	5	NDS

ANTINEOPLASTIC AGENTS

ALKYLATING AGENTS

BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml	5	NDS, B/D, NM
BENDEKA SOLN 100mg/4ml	5	NDS, B/D, NM
<i>carboplatin SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml</i>	3	B/D
<i>cisplatin SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml</i>	3	B/D
<i>cyclophosphamide CAPS 25mg, 50mg</i>	3	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 1gm/5ml, 2gm/4ml, 500mg/2.5ml, 500mg/5ml, 500mg/ml, 1000mg/10ml, 2000mg/20ml	5	NDS, B/D
<i>cyclophosphamide SOLR 1gm, 500mg</i>	4	B/D
<i>cyclophosphamide SOLR 2gm</i>	5	NDS, B/D
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	4	B/D
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	5	NDS, B/D
GLEOSTINE CAPS 10mg, 40mg	4	NM
GLEOSTINE CAPS 100mg	5	NDS, NM
<i>oxaliplatin SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml; SOLR 50mg</i>	4	B/D
<i>oxaliplatin SOLR 100mg</i>	5	NDS, B/D

Drug Name	Drug Tier	Requirements/Limits
ANTIMETABOLITES		
<i>azacitidine</i> SUSR 100mg	5	NDS, B/D, NM
<i>cytarabine</i> SOLN 20mg/ml	3	B/D
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	3	B/D
<i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	4	B/D
INQOVI TAB 35-100MG	5	NDS, QL (5 tabs / 28 days), NM, PA
LONSURF TAB 15-6.14	5	NDS, QL (100 tabs / 28 days), NM, PA
LONSURF TAB 20-8.19	5	NDS, QL (80 tabs / 28 days), NM, PA
<i>mercaptopurine</i> TABS 50mg	3	
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	2	B/D
ONUREG TABS 200mg, 300mg	5	NDS, QL (14 tabs / 28 days), NM, PA
<i>pemetrexed disodium</i> SOLR 100mg, 500mg, 750mg, 1000mg	5	NDS, B/D
PURIXAN SUSP 2000mg/100ml	5	NDS, NM
HORMONAL ANTINEOPLASTIC AGENTS		
<i>abiraterone acetate</i> TABS 250mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<i>abiraterone acetate</i> TABS 500mg	5	NDS, QL (60 tabs / 30 days), NM, PA
AKEEGA TAB 50/500MG	5	NDS, QL (60 tabs / 30 days), NM, PA
AKEEGA TAB 100/500	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>anastrozole</i> TABS 1mg	2	
<i>bicalutamide</i> TABS 50mg	2	
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	4	NM, PA
ERLEADA TABS 60mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ERLEADA TABS 240mg	5	NDS, QL (30 tabs / 30 days), NM, PA
EULEXIN CAPS 125mg	5	NDS
<i>exemestane</i> TABS 25mg	4	
FIRMAGON SOLR 80mg	4	NM, PA
FIRMAGON SOLR 120mg/vial	5	NDS, NM, PA
<i>fulvestrant</i> SOSY 250mg/5ml	5	NDS, B/D
<i>letrozole</i> TABS 2.5mg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>leuprolide acetate</i> KIT 1mg/0.2ml	4	NM, PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg	5	NDS, NM, PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg	5	NDS, NM, PA
LYSODREN TABS 500mg	5	NDS, NM
<i>megestrol acetate</i> TABS 20mg, 40mg	3	
<i>nilutamide</i> TABS 150mg	5	NDS
NUBEQA TABS 300mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ORGOVYX TABS 120mg	5	NDS, NM, PA
ORSERDU TABS 86mg	5	NDS, QL (90 tabs / 30 days), NM, PA
ORSERDU TABS 345mg	5	NDS, QL (30 tabs / 30 days), NM, PA
SOLTAMOX SOLN 10mg/5ml	5	NDS
<i>tamoxifen citrate</i> TABS 10mg, 20mg	2	
<i>toremifene citrate</i> TABS 60mg	4	PA
XTANDI CAPS 40mg	5	NDS, QL (120 caps / 30 days), NM, PA
XTANDI TABS 40mg	5	NDS, QL (120 tabs / 30 days), NM, PA
XTANDI TABS 80mg	5	NDS, QL (60 tabs / 30 days), NM, PA

IMMUNOMODULATORS

<i>lenalidomide</i> CAPS 2.5mg, 5mg, 10mg, 15mg	5	NDS, QL (28 caps / 28 days), NM, PA
<i>lenalidomide</i> CAPS 20mg, 25mg	5	NDS, QL (21 caps / 28 days), NM, PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg	5	NDS, QL (21 caps / 28 days), NM, PA
THALOMID CAPS 50mg	5	NDS, QL (84 caps / 28 days), NM, PA
THALOMID CAPS 100mg	5	NDS, QL (112 caps / 28 days), NM, PA
THALOMID CAPS 150mg, 200mg	5	NDS, QL (56 caps / 28 days), NM, PA

MISCELLANEOUS

BESREMI SOSY 500mcg/ml	5	NDS, QL (2 syringes / 28 days), NM, PA
<i>bexarotene</i> CAPS 75mg	5	NDS, QL (300 caps / 30 days), NM, PA
<i>doxorubicin hcl</i> SOLN 2mg/ml	4	B/D
<i>doxorubicin hcl liposomal</i> SUSP 2mg/ml	5	NDS, B/D
<i>hydroxyurea</i> CAPS 500mg	2	
<i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml	4	B/D

Drug Name	Drug Tier	Requirements/Limits
IWILFIN TABS 192mg	5	NDS, QL (240 tabs / 30 days), NM, PA
MATULANE CAPS 50mg	5	NDS, NM
<i>tretinoin (chemotherapy)</i> CAPS 10mg	5	NDS
WELIREG TABS 40mg	5	NDS, QL (90 tabs / 30 days), NM, PA

MITOTIC INHIBITORS

<i>docetaxel</i> CONC 20mg/ml	4	B/D
<i>docetaxel</i> CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	NDS, B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	NDS, B/D
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	NDS, B/D, NM
<i>etoposide</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	3	B/D
<i>paclitaxel</i> CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	4	B/D
<i>paclitaxel inj 100mg</i>	5	NDS, B/D, NM
<i>vincristine sulfate</i> SOLN 1mg/ml	2	B/D
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml	4	B/D

MOLECULAR TARGET AGENTS

ALECENSA CAPS 150mg	5	NDS, QL (240 caps / 30 days), NM, PA
ALUNBRIG TABS 30mg	5	NDS, QL (120 tabs / 30 days), NM, PA
ALUNBRIG TABS 90mg, 180mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ALUNBRIG PAK	5	NDS, QL (30 tabs / 30 days), NM, PA
AUGTYRO CAPS 40mg	5	NDS, QL (240 caps / 30 days), NM, PA
AUGTYRO CAPS 160mg	5	NDS, QL (60 caps / 30 days), NM, PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA
BALVERSA TABS 3mg	5	NDS, QL (84 tabs / 28 days), NM, PA
BALVERSA TABS 4mg	5	NDS, QL (56 tabs / 28 days), NM, PA
BALVERSA TABS 5mg	5	NDS, QL (28 tabs / 28 days), NM, PA
BORTEZOMIB SOLR 1mg, 2.5mg	4	NM, PA
<i>bortezomib</i> SOLR 3.5mg	5	NDS, NM, PA

Drug Name	Drug Tier	Requirements/Limits
BOSULIF CAPS 50mg	5	NDS, QL (360 caps / 30 days), NM, PA
BOSULIF CAPS 100mg	5	NDS, QL (150 caps / 25 days), NM, PA
BOSULIF TABS 100mg	5	NDS, QL (180 tabs / 30 days), NM, PA
BOSULIF TABS 400mg, 500mg	5	NDS, QL (30 tabs / 30 days), NM, PA
BRAFTOVI CAPS 75mg	5	NDS, QL (180 caps / 30 days), NM, PA
BRUKINSA CAPS 80mg	5	NDS, QL (120 caps / 30 days), NM, PA
CABOMETYX TABS 20mg, 40mg, 60mg	5	NDS, QL (30 tabs / 30 days), NM, PA
CALQUENCE CAPS 100mg	5	NDS, QL (60 caps / 30 days), NM, PA
CALQUENCE TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA
CAPRELSA TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA
CAPRELSA TABS 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA
COMETRIQ (60MG DOSE) KIT 20mg	5	NDS, QL (84 caps / 28 days), NM, PA
COMETRIQ KIT 100MG	5	NDS, QL (56 caps / 28 days), NM, PA
COMETRIQ KIT 140MG	5	NDS, QL (112 caps / 28 days), NM, PA
COPIKTRA CAPS 15mg, 25mg	5	NDS, QL (56 caps / 28 days), NM, PA
COTELLIC TABS 20mg	5	NDS, QL (63 tabs / 28 days), NM, PA
DANZITEN TABS 71mg, 95mg	5	NDS, QL (112 tabs / 28 days), NM, PA
<i>dasatinib</i> TABS 20mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>dasatinib</i> TABS 50mg, 70mg, 80mg, 100mg, 140mg	5	NDS, QL (30 tabs / 30 days), NM, PA
DAURISMO TABS 25mg	5	NDS, QL (60 tabs / 30 days), NM, PA
DAURISMO TABS 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ERIVEDGE CAPS 150mg	5	NDS, QL (30 caps / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 25mg	5	NDS, QL (90 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
<i>erlotinib hcl</i> TABS 100mg, 150mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 2mg	5	NDS, QL (150 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 3mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 5mg	5	NDS, QL (60 tabs / 30 days), NM, PA
FOTIVDA CAPS .89mg, 1.34mg	5	NDS, QL (21 caps / 28 days), NM, PA
FRUZAQLA CAPS 1mg	5	NDS, QL (84 caps / 28 days), NM, PA
FRUZAQLA CAPS 5mg	5	NDS, QL (21 caps / 28 days), NM, PA
GAVRETO CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
<i>gefitinib</i> TABS 250mg	5	NDS, QL (60 tabs / 30 days), NM, PA
GILOTRIF TABS 20mg, 30mg, 40mg	5	NDS, QL (30 tabs / 30 days), NM, PA
HERCEP HYLEC SOL 60-10000	5	NDS, NM, PA
HERCEPTIN SOLR 150mg	5	NDS, NM, PA
HERZUMA SOLR 150mg, 420mg	5	NDS, NM, PA
IBRANCE CAPS 75mg, 100mg, 125mg	5	NDS, QL (21 caps / 28 days), NM, PA
IBRANCE TABS 75mg, 100mg, 125mg	5	NDS, QL (21 tabs / 28 days), NM, PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg	5	NDS, QL (30 tabs / 30 days), NM, PA
IDHIFA TABS 50mg, 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 100mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 400mg	5	NDS, QL (60 tabs / 30 days), NM, PA
IMBRUVICA CAPS 70mg	5	NDS, QL (30 caps / 30 days), NM, PA
IMBRUVICA CAPS 140mg	5	NDS, QL (120 caps / 30 days), NM, PA
IMBRUVICA SUSP 70mg/ml	5	NDS, QL (216 mL / 27 days), NM, PA
IMBRUVICA TABS 140mg, 280mg, 420mg	5	NDS, QL (30 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
IMKELDI SOLN 80mg/ml	5	NDS, QL (280 mL / 28 days), NM, PA
INLYTA TABS 1mg	5	NDS, QL (180 tabs / 30 days), NM, PA
INLYTA TABS 5mg	5	NDS, QL (120 tabs / 30 days), NM, PA
INREBIC CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
ITOVEBI TABS 3mg	5	NDS, QL (56 tabs / 28 days), NM, PA
ITOVEBI TABS 9mg	5	NDS, QL (28 tabs / 28 days), NM, PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	5	NDS, QL (60 tabs / 30 days), NM, PA
JAYPIRCA TABS 50mg	5	NDS, QL (30 tabs / 30 days), NM, PA
JAYPIRCA TABS 100mg	5	NDS, QL (60 tabs / 30 days), NM, PA
KADCYLA SOLR 100mg, 160mg	5	NDS, B/D, NM
KANJINTI SOLR 150mg, 420mg	5	NDS, NM, PA
KEYTRUDA SOLN 100mg/4ml	5	NDS, NM, PA
KISQALI 200 DOSE TBPK 200mg	5	NDS, QL (21 tabs / 28 days), NM, PA
KISQALI 200 PAK FEMARA	5	NDS, QL (49 tabs / 28 days), NM, PA
KISQALI 400 DOSE TBPK 200mg	5	NDS, QL (42 tabs / 28 days), NM, PA
KISQALI 400 PAK FEMARA	5	NDS, QL (70 tabs / 28 days), NM, PA
KISQALI 600 DOSE TBPK 200mg	5	NDS, QL (63 tabs / 28 days), NM, PA
KISQALI 600 PAK FEMARA	5	NDS, QL (91 tabs / 28 days), NM, PA
KOSELUGO CAPS 10mg	5	NDS, QL (240 caps / 30 days), NM, PA
KOSELUGO CAPS 25mg	5	NDS, QL (120 caps / 30 days), NM, PA
KRAZATI TABS 200mg	5	NDS, QL (180 tabs / 30 days), NM, PA
<i>lapatinib ditosylate</i> TABS 250mg	5	NDS, QL (180 tabs / 30 days), NM, PA
LAZCLUZE TABS 80mg	5	NDS, QL (60 tabs / 30 days), NM, PA
LAZCLUZE TABS 240mg	5	NDS, QL (30 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
LENVIMA 4 MG DAILY DOSE CPPK 4mg	5	NDS, QL (30 caps / 30 days), NM, PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg	5	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA 10 MG DAILY DOSE CPPK 10mg	5	NDS, QL (30 caps / 30 days), NM, PA
LENVIMA 12MG DAILY DOSE CPPK 4mg	5	NDS, QL (90 caps / 30 days), NM, PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg	5	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA CAP 14 MG	5	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA CAP 18 MG	5	NDS, QL (90 caps / 30 days), NM, PA
LENVIMA CAP 24 MG	5	NDS, QL (90 caps / 30 days), NM, PA
LORBRENA TABS 25mg	5	NDS, QL (90 tabs / 30 days), NM, PA
LORBRENA TABS 100mg	5	NDS, QL (30 tabs / 30 days), NM, PA
LUMAKRAS TABS 120mg	5	NDS, QL (240 tabs / 30 days), NM, PA
LUMAKRAS TABS 240mg	5	NDS, QL (120 tabs / 30 days), NM, PA
LUMAKRAS TABS 320mg	5	NDS, QL (90 tabs / 30 days), NM, PA
LYNPARZA TABS 100mg, 150mg	5	NDS, QL (120 tabs / 30 days), NM, PA
LYTGOBI (12 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (84 tabs / 28 days), NM, PA
LYTGOBI (16 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (112 tabs / 28 days), NM, PA
LYTGOBI (20 MG DAILY DOSE) TBPK 4mg	5	NDS, QL (140 tabs / 28 days), NM, PA
MEKINIST SOLR .05mg/ml	5	NDS, QL (1260 mL / 30 days), NM, PA
MEKINIST TABS 2mg	5	NDS, QL (30 tabs / 30 days), NM, PA
MEKINIST TABS .5mg	5	NDS, QL (90 tabs / 30 days), NM, PA
MEKTOVI TABS 15mg	5	NDS, QL (180 tabs / 30 days), NM, PA
MONJUVI SOLR 200mg	5	NDS, NM, PA
NERLYNX TABS 40mg	5	NDS, QL (180 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
NINLARO CAPS 2.3mg, 3mg, 4mg	5	NDS, QL (3 caps / 28 days), NM, PA
ODOMZO CAPS 200mg	5	NDS, QL (30 caps / 30 days), NM, PA
OGIVRI SOLR 150mg, 420mg	5	NDS, NM, PA
OGSIVEO TABS 50mg	5	NDS, QL (180 tabs / 30 days), NM, PA
OGSIVEO TABS 100mg, 150mg	5	NDS, QL (56 tabs / 28 days), NM, PA
OJEMDA SUSR 25mg/ml	5	NDS, QL (96 mL / 28 days), NM, PA
OJEMDA TABS 100mg	5	NDS, QL (24 tabs / 28 days), NM, PA
OJJAARA TABS 100mg, 150mg, 200mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ONTRUZANT SOLR 150mg, 420mg	5	NDS, NM, PA
<i>pazopanib hcl</i> TABS 200mg	5	NDS, QL (120 tabs / 30 days), NM, PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg	5	NDS, QL (28 tabs / 28 days), NM, PA
PHESGO SOL	5	NDS, NM, PA
PIQRAY 200MG DAILY DOSE TBPK 200mg	5	NDS, QL (28 tabs / 28 days), NM, PA
PIQRAY 250MG TAB DOSE	5	NDS, QL (56 tabs / 28 days), NM, PA
PIQRAY 300MG DAILY DOSE TBPK 150mg	5	NDS, QL (56 tabs / 28 days), NM, PA
QINLOCK TABS 50mg	5	NDS, QL (90 tabs / 30 days), NM, PA
RETEVMO CAPS 40mg	5	NDS, QL (180 caps / 30 days), NM, PA
RETEVMO CAPS 80mg	5	NDS, QL (120 caps / 30 days), NM, PA
RETEVMO TABS 40mg	5	NDS, QL (90 tabs / 30 days), NM, PA
RETEVMO TABS 80mg, 120mg, 160mg	5	NDS, QL (60 tabs / 30 days), NM, PA
REVUFORJ TABS 110mg	5	NDS, QL (120 tabs / 30 days), NM, PA
REVUFORJ TABS 160mg	5	NDS, QL (60 tabs / 30 days), NM, PA
REZLIDHIA CAPS 150mg	5	NDS, QL (60 caps / 30 days), NM, PA
ROZLYTREK CAPS 100mg	5	NDS, QL (180 caps / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
ROZLYTREK CAPS 200mg	5	NDS, QL (90 caps / 30 days), NM, PA
ROZLYTREK PACK 50mg	5	NDS, QL (336 packets / 28 days), NM, PA
RUBRACA TABS 200mg, 250mg, 300mg	5	NDS, QL (120 tabs / 30 days), NM, PA
RYDAPT CAPS 25mg	5	NDS, QL (224 caps / 28 days), NM, PA
SCSEMBLIX TABS 20mg	5	NDS, QL (60 tabs / 30 days), NM, PA
SCSEMBLIX TABS 40mg	5	NDS, QL (300 tabs / 30 days), NM, PA
SCSEMBLIX TABS 100mg	5	NDS, QL (120 tabs / 30 days), NM, PA
<i>sorafenib tosylate</i> TABS 200mg	5	NDS, QL (120 tabs / 30 days), NM, PA
STIVARGA TABS 40mg	5	NDS, QL (84 tabs / 28 days), NM, PA
<i>sunitinib malate</i> CAPS 12.5mg, 25mg, 37.5mg, 50mg	5	NDS, QL (30 caps / 30 days), NM, PA
TABRECTA TABS 150mg, 200mg	5	NDS, QL (112 tabs / 28 days), NM, PA
TAFINLAR CAPS 50mg, 75mg	5	NDS, QL (120 caps / 30 days), NM, PA
TAFINLAR TBSO 10mg	5	NDS, QL (900 tabs / 30 days), NM, PA
TAGRISSE TABS 40mg, 80mg	5	NDS, QL (30 tabs / 30 days), NM, PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg	5	NDS, QL (30 caps / 30 days), NM, PA
TALZENNA CAPS .25mg	5	NDS, QL (90 caps / 30 days), NM, PA
TASIGNA CAPS 50mg	5	NDS, QL (120 caps / 30 days), NM, PA
TASIGNA CAPS 150mg, 200mg	5	NDS, QL (112 caps / 28 days), NM, PA
TAZVERIK TABS 200mg	5	NDS, QL (240 tabs / 30 days), NM, PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	5	NDS, NM, PA
TECENTRIQ INJ HYBREZA	5	NDS, QL (1 vial / 21 days), NM, PA
TEPMETKO TABS 225mg	5	NDS, QL (60 tabs / 30 days), NM, PA
TIBSOVO TABS 250mg	5	NDS, QL (60 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
<i>torpenz</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
TRAZIMERA SOLR 150mg, 420mg	5	NDS, NM, PA
TRUQAP TABS 160mg, 200mg	5	NDS, QL (64 tabs / 28 days), NM, PA
TRUQAP TBPK 160mg, 200mg	5	NDS, QL (4 packs / 28 days), NM, PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	5	NDS, NM, PA
TUKYSA TABS 50mg, 150mg	5	NDS, QL (120 tabs / 30 days), NM, PA
TURALIO CAPS 125mg	5	NDS, QL (120 caps / 30 days), NM, PA
VANFLYTA TABS 17.7mg, 26.5mg	5	NDS, QL (56 tabs / 28 days), NM, PA
VENCLEXTA TABS 10mg	3	QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 50mg	5	NDS, QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 100mg	5	NDS, QL (180 tabs / 30 days), NM, PA
VENCLEXTA TAB START PK	5	NDS, QL (42 tabs / 28 days), NM, PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	5	NDS, QL (56 tabs / 28 days), NM, PA
VITRAKVI CAPS 25mg	5	NDS, QL (180 caps / 30 days), NM, PA
VITRAKVI CAPS 100mg	5	NDS, QL (60 caps / 30 days), NM, PA
VITRAKVI SOLN 20mg/ml	5	NDS, QL (300 mL / 30 days), NM, PA
VIZIMPRO TABS 15mg, 30mg, 45mg	5	NDS, QL (30 tabs / 30 days), NM, PA
VONJO CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
VORANIGO TABS 10mg	5	NDS, QL (60 tabs / 30 days), NM, PA
VORANIGO TABS 40mg	5	NDS, QL (30 tabs / 30 days), NM, PA
XALKORI CAPS 200mg, 250mg; CPSP 50mg	5	NDS, QL (120 caps / 30 days), NM, PA
XALKORI CPSP 20mg	5	NDS, QL (240 caps / 30 days), NM, PA
XALKORI CPSP 150mg	5	NDS, QL (180 caps / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
XOSPATA TABS 40mg	5	NDS, QL (90 tabs / 30 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 40mg	5	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG TWICE WEEKLY) TBPK 40mg	5	NDS, QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG ONCE WEEKLY) TBPK 60mg	5	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG TWICE WEEKLY) TBPK 20mg	5	NDS, QL (24 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 40mg	5	NDS, QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG TWICE WEEKLY) TBPK 20mg	5	NDS, QL (32 tabs / 28 days), NM, PA
XPOVIO PAK (100 MG ONCE WEEKLY) TBPK 50mg	5	NDS, QL (8 tabs / 28 days), NM, PA
ZEJULA TABS 100mg, 200mg, 300mg	5	NDS, QL (30 tabs / 30 days), NM, PA
ZELBORAF TABS 240mg	5	NDS, QL (240 tabs / 30 days), NM, PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	5	NDS, NM, PA
ZOLINZA CAPS 100mg	5	NDS, QL (120 caps / 30 days), NM, PA
ZYDELIG TABS 100mg, 150mg	5	NDS, QL (60 tabs / 30 days), NM, PA
ZYKADIA TABS 150mg	5	NDS, QL (84 tabs / 28 days), NM, PA

PROTECTIVE AGENTS

<i>leucovorin calcium</i> SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	4	B/D
<i>leucovorin calcium</i> TABS 5mg, 10mg, 15mg, 25mg	3	
<i>mesna</i> TABS 400mg	5	NDS
MESNEX TABS 400mg	5	NDS

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	QL (30 caps / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	QL (30 caps / 30 days)
<i>benazepril & hydrochlorothiazide tab 5-6.25mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	

ACE INHIBITORS

<i>benazepril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	1	
<i>captopril TABS 12.5mg, 25mg, 50mg, 100mg</i>	1	
<i>enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg</i>	1	
<i>fosinopril sodium TABS 10mg, 20mg, 40mg</i>	1	
<i>lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg</i>	1	
<i>moexipril hcl TABS 7.5mg, 15mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>perindopril erbumine</i> TABS 2mg, 4mg, 8mg	1	
<i>quinapril hcl</i> TABS 5mg, 10mg, 20mg, 40mg	1	
<i>ramipril</i> CAPS 1.25mg, 2.5mg, 5mg, 10mg	1	
<i>trandolapril</i> TABS 1mg, 2mg, 4mg	1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone</i> TABS 25mg, 50mg	3	
KERENDIA TABS 10mg, 20mg	3	QL (30 tabs / 30 days)
<i>spironolactone</i> TABS 25mg, 50mg, 100mg	1	
ALPHA BLOCKERS		
<i>doxazosin mesylate</i> TABS 1mg, 2mg, 4mg, 8mg	1	
<i>prazosin hcl</i> CAPS 1mg, 2mg, 5mg	3	
<i>terazosin hcl</i> CAPS 1mg, 2mg, 5mg, 10mg	1	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	QL (60 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	QL (30 tabs / 30 days)
ENTRESTO CAP 6-6MG	3	QL (240 caps / 30 days)
ENTRESTO CAP 15-16MG	3	QL (240 caps / 30 days)
ENTRESTO TAB 24-26MG	3	QL (60 tabs / 30 days)
ENTRESTO TAB 49-51MG	3	QL (60 tabs / 30 days)
ENTRESTO TAB 97-103MG	3	QL (60 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	QL (60 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	QL (60 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil</i> TABS 4mg, 8mg, 16mg	1	QL (60 tabs / 30 days)
<i>candesartan cilexetil</i> TABS 32mg	1	QL (30 tabs / 30 days)
<i>irbesartan</i> TABS 75mg, 150mg, 300mg	1	QL (30 tabs / 30 days)
<i>losartan potassium</i> TABS 25mg, 50mg, 100mg	1	
<i>olmesartan medoxomil</i> TABS 5mg	1	QL (60 tabs / 30 days)
<i>olmesartan medoxomil</i> TABS 20mg, 40mg	1	QL (30 tabs / 30 days)
<i>telmisartan</i> TABS 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
<i>valsartan</i> TABS 40mg, 80mg, 160mg	1	QL (60 tabs / 30 days)
<i>valsartan</i> TABS 320mg	1	QL (30 tabs / 30 days)
ANTIARRHYTHMICS		
<i>amiodarone hcl</i> SOLN 50mg/ml, 900mg/18ml; TABS 100mg, 400mg	4	
<i>amiodarone hcl</i> TABS 200mg	1	
<i>disopyramide phosphate</i> CAPS 100mg, 150mg	4	
<i>dofetilide</i> CAPS 125mcg, 250mcg, 500mcg	4	NM
<i>flecainide acetate</i> TABS 50mg, 100mg, 150mg	3	
MULTAQ TABS 400mg	4	QL (60 tabs / 30 days)
<i>pacerone</i> TABS 100mg, 400mg	4	
<i>pacerone</i> TABS 200mg	1	
<i>propafenone hcl</i> CP12 225mg, 325mg, 425mg	4	
<i>propafenone hcl</i> TABS 150mg, 225mg, 300mg	3	
<i>quinidine sulfate</i> TABS 200mg, 300mg	4	
<i>sotalol hcl</i> TABS 80mg, 120mg, 160mg, 240mg	2	
<i>sotalol hcl (afib/af)</i> TABS 80mg, 120mg, 160mg	3	
ANTILIPEMICS, FIBRATES		
<i>fenofibrate</i> TABS 48mg, 54mg, 145mg, 160mg	2	
<i>fenofibrate micronized</i> CAPS 67mg, 134mg, 200mg	3	
<i>gemfibrozil</i> TABS 600mg	1	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
<i>atorvastatin calcium</i> TABS 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
<i>lovastatin</i> TABS 10mg, 20mg, 40mg	1	QL (60 tabs / 30 days)
<i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>rosuvastatin calcium</i> TABS 5mg, 10mg, 20mg, 40mg	1	QL (30 tabs / 30 days)
<i>simvastatin</i> TABS 5mg, 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
ANTILIPEMICS, MISCELLANEOUS		
<i>cholestyramine</i> PACK 4gm; POWD 4gm/dose	3	
<i>cholestyramine light</i> PACK 4gm; POWD 4gm/dose	3	
<i>colesevelam hcl</i> PACK 3.75gm; TABS 625mg	4	
<i>colestipol hcl</i> GRAN 5gm; PACK 5gm	4	
<i>colestipol hcl</i> TABS 1gm	3	
<i>ezetimibe</i> TABS 10mg	3	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	QL (30 tabs / 30 days)
NEXLETOL TABS 180mg	3	QL (30 tabs / 30 days)
NEXLIZET TAB 180/10MG	3	QL (30 tabs / 30 days)
<i>niacin (antihyperlipidemic)</i> TBCR 500mg, 750mg, 1000mg	3	QL (60 tabs / 30 days)
<i>omega-3-acid ethyl esters cap 1 gm</i>	3	PA
<i>prevalite</i> PACK 4gm; POWD 4gm/dose	3	
REPATHA SOSY 140mg/ml	3	NM, PA
REPATHA PUSHTRONEX SYSTEM SOCT 420mg/3.5ml	3	NM, PA
REPATHA SURECLICK SOAJ 140mg/ml	3	NM, PA
VASCEPA CAPS .5gm, 1gm	3	
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	2	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	2	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	2	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	3	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	3	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
BETA-BLOCKERS		
<i>acebutolol hcl</i> CAPS 200mg, 400mg	3	
<i>atenolol</i> TABS 25mg, 50mg, 100mg	1	
<i>betaxolol hcl</i> TABS 10mg, 20mg	3	
<i>bisoprolol fumarate</i> TABS 5mg, 10mg	2	
<i>carvedilol</i> TABS 3.125mg, 6.25mg, 12.5mg, 25mg	1	
<i>labetalol hcl</i> TABS 100mg, 200mg, 300mg	3	
<i>metoprolol succinate</i> TB24 25mg, 50mg, 100mg, 200mg	1	
<i>metoprolol tartrate</i> SOLN 5mg/5ml	4	
<i>metoprolol tartrate</i> TABS 25mg, 50mg, 100mg	1	
<i>nadolol</i> TABS 20mg, 40mg, 80mg	3	
<i>nebivolol hcl</i> TABS 2.5mg, 5mg, 10mg	3	QL (30 tabs / 30 days)
<i>nebivolol hcl</i> TABS 20mg	3	QL (60 tabs / 30 days)
<i>pindolol</i> TABS 5mg, 10mg	3	
<i>propranolol hcl</i> CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml	3	
<i>propranolol hcl</i> TABS 10mg, 20mg, 40mg, 60mg, 80mg	2	
<i>timolol maleate</i> TABS 5mg, 10mg, 20mg	3	
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine besylate</i> TABS 2.5mg, 5mg, 10mg	1	
<i>cartia xt</i> CP24 120mg, 180mg, 240mg, 300mg	2	
<i>dilt-xr</i> CP24 120mg, 180mg, 240mg	2	
<i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg	4	
<i>diltiazem hcl</i> SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml	3	
<i>diltiazem hcl</i> TABS 30mg, 60mg, 90mg, 120mg	2	
<i>diltiazem hcl coated beads</i> CP24 120mg, 180mg, 240mg, 300mg	2	
<i>diltiazem hcl coated beads</i> CP24 360mg	4	
<i>diltiazem hcl extended release beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	2	
<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	2	
<i>isradipine</i> CAPS 2.5mg, 5mg	4	
<i>nicardipine hcl</i> CAPS 20mg, 30mg	4	
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	3	
<i>nimodipine</i> CAPS 30mg	4	

Drug Name	Drug Tier	Requirements/Limits
<i>tiadylt er</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	2	
<i>verapamil hcl</i> CP24 100mg, 200mg, 300mg, 360mg; SOLN 2.5mg/ml	4	
<i>verapamil hcl</i> CP24 120mg, 180mg, 240mg	3	
<i>verapamil hcl</i> TABS 40mg, 80mg, 120mg	1	
<i>verapamil hcl</i> TBCR 120mg, 180mg, 240mg	2	

DIURETICS

<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	3	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	2	
<i>amiloride hcl</i> TABS 5mg	2	
<i>bumetanide</i> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	3	
<i>chlorthalidone</i> TABS 25mg, 50mg	2	
FUROSCIX CTKT 80mg/10ml	5	NDS
<i>furosemide</i> SOLN 10mg/ml, 40mg/5ml	2	
<i>furosemide</i> TABS 20mg, 40mg, 80mg	1	
<i>furosemide inj</i> SOLN 10mg/ml	3	
<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1	
<i>indapamide</i> TABS 1.25mg, 2.5mg	1	
<i>methazolamide</i> TABS 25mg, 50mg	4	
<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	2	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	2	
<i>toremide</i> TABS 5mg, 10mg, 20mg, 100mg	2	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	

MISCELLANEOUS

<i>aliskiren fumarate</i> TABS 150mg, 300mg	1	
<i>clonidine</i> PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr	3	
<i>clonidine hcl</i> TABS .1mg, .2mg, .3mg	1	
CORLANOR SOLN 5mg/5ml	4	QL (450 mL / 30 days)
<i>digoxin</i> SOLN .05mg/ml, .25mg/ml	4	
<i>digoxin</i> TABS 125mcg, 250mcg	2	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>droxidopa</i> CAPS 100mg	5	NDS, QL (90 caps / 30 days), NM, PA
<i>droxidopa</i> CAPS 200mg, 300mg	5	NDS, QL (180 caps / 30 days), NM, PA
<i>epinephrine (anaphylaxis)</i> SOLN 1mg/ml	4	
<i>guanfacine hcl</i> TABS 1mg, 2mg	3	PA; PA applies if 70 years and older
<i>hydralazine hcl</i> SOLN 20mg/ml	4	
<i>hydralazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	1	
<i>ivabradine hcl</i> TABS 5mg, 7.5mg	4	QL (60 tabs / 30 days)
<i>metyrosine</i> CAPS 250mg	5	NDS, NM, PA
<i>midodrine hcl</i> TABS 2.5mg, 5mg	3	
<i>midodrine hcl</i> TABS 10mg	4	
<i>minoxidil</i> TABS 2.5mg, 10mg	2	
<i>ranolazine</i> TB12 500mg, 1000mg	4	
VERQUVO TABS 2.5mg, 5mg, 10mg	3	QL (30 tabs / 30 days), PA

NITRATES

<i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg	3	
<i>isosorbide mononitrate</i> TABS 10mg, 20mg	2	
<i>isosorbide mononitrate</i> TB24 30mg, 60mg, 120mg	1	
NITRO-BID OINT 2%	3	
<i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	3	
<i>nitroglycerin</i> SOLN .4mg/spray	4	
<i>nitroglycerin</i> SUBL .3mg, .4mg, .6mg	2	

PULMONARY ARTERIAL HYPERTENSION

<i>alyq</i> TABS 20mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>ambrisentan</i> TABS 5mg, 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>bosentan</i> TABS 62.5mg, 125mg	5	NDS, QL (60 tabs / 30 days), NM, PA
OPSUMIT TABS 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg	3	QL (360 tabs / 30 days), NM, PA
<i>tadalafil (pulmonary hypertension)</i> TABS 20mg	5	NDS, QL (60 tabs / 30 days), NM, PA
<i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	5	NDS, NM, PA

Drug Name	Drug Tier	Requirements/Limits
-----------	-----------	---------------------

CENTRAL NERVOUS SYSTEM

ANTI ANXIETY

<i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg	2	QL (150 tabs / 30 days)
<i>bupirone hcl</i> TABS 5mg, 10mg, 15mg	1	
<i>bupirone hcl</i> TABS 7.5mg, 30mg	3	
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	3	
<i>lorazepam</i> CONC 2mg/ml	3	QL (150 mL / 30 days)
<i>lorazepam</i> SOLN 4mg/ml, 20mg/10ml	2	
<i>lorazepam</i> TABS .5mg, 1mg, 2mg	2	QL (150 tabs / 30 days)
<i>lorazepam intensol</i> CONC 2mg/ml	3	QL (150 mL / 30 days)

ANTIDEMENTIA

<i>donepezil hydrochloride</i> TABS 5mg; TBDP 5mg	2	QL (30 tabs / 30 days)
<i>donepezil hydrochloride</i> TABS 10mg; TBDP 10mg	2	
<i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg	3	QL (30 caps / 30 days)
<i>galantamine hydrobromide</i> SOLN 4mg/ml	4	QL (200 mL / 30 days)
<i>galantamine hydrobromide</i> TABS 4mg, 8mg, 12mg	3	QL (60 tabs / 30 days)
<i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml	4	PA; PA applies if 29 years and younger
<i>memantine hcl</i> TABS 5mg, 10mg	3	PA; PA applies if 29 years and younger
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	4	PA; PA applies if 29 years and younger
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	4	
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	4	
NAMZARIC CAP 7-10MG	4	
NAMZARIC CAP 14-10MG	4	
NAMZARIC CAP 21-10MG	4	
NAMZARIC CAP 28-10MG	4	
NAMZARIC CAP PACK	4	
<i>rivastigmine</i> PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	4	QL (30 patches / 30 days)
<i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg, 4.5mg, 6mg	3	QL (60 caps / 30 days)

ANTIDEPRESSANTS

<i>amitriptyline hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	3	
<i>amoxapine</i> TABS 25mg, 50mg, 100mg, 150mg	3	

Drug Name	Drug Tier	Requirements/Limits
AUVELITY TAB 45-105MG	4	QL (60 tabs / 30 days), PA
<i>bupropion hcl</i> TABS 75mg, 100mg	2	
<i>bupropion hcl</i> TB12 100mg, 150mg, 200mg; TB24 150mg	2	QL (60 tabs / 30 days)
<i>bupropion hcl</i> TB24 300mg	2	QL (30 tabs / 30 days)
<i>citalopram hydrobromide</i> SOLN 10mg/5ml	3	
<i>citalopram hydrobromide</i> TABS 10mg, 20mg, 40mg	1	
<i>clomipramine hcl</i> CAPS 25mg, 50mg, 75mg	4	PA
<i>desipramine hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	4	
<i>desvenlafaxine succinate</i> TB24 25mg, 50mg, 100mg	3	QL (30 tabs / 30 days)
<i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml	3	
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg	4	QL (60 caps / 30 days), PA
<i>duloxetine hcl</i> CPEP 20mg, 30mg, 60mg	3	QL (60 caps / 30 days)
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	5	NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate</i> SOLN 5mg/5ml	4	
<i>escitalopram oxalate</i> TABS 5mg, 10mg, 20mg	1	
FETZIMA CP24 20mg, 40mg	4	QL (60 caps / 30 days), PA
FETZIMA CP24 80mg, 120mg	4	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	4	QL (2 packs / year), PA
<i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg	1	
<i>fluoxetine hcl</i> SOLN 20mg/5ml	3	
<i>imipramine hcl</i> TABS 10mg, 25mg, 50mg	2	
MARPLAN TABS 10mg	4	QL (180 tabs / 30 days)
<i>mirtazapine</i> TABS 7.5mg; TBDP 15mg, 30mg, 45mg	3	
<i>mirtazapine</i> TABS 15mg, 30mg, 45mg	2	
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	4	
<i>nortriptyline hcl</i> CAPS 10mg, 25mg, 50mg, 75mg	2	
<i>nortriptyline hcl</i> SOLN 10mg/5ml	4	
<i>paroxetine hcl</i> SUSP 10mg/5ml	4	QL (900 mL / 30 days), PA
<i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg, 40mg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>phenelzine sulfate</i> TABS 15mg	3	
<i>protriptyline hcl</i> TABS 5mg, 10mg	4	
<i>sertraline hcl</i> CONC 20mg/ml	3	
<i>sertraline hcl</i> TABS 25mg, 50mg, 100mg	1	
<i>tranylcypromine sulfate</i> TABS 10mg	4	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg	1	
<i>trimipramine maleate</i> CAPS 25mg, 50mg	4	QL (120 caps / 30 days)
<i>trimipramine maleate</i> CAPS 100mg	4	QL (60 caps / 30 days)
TRINTELLIX TABS 5mg, 10mg, 20mg	4	QL (30 tabs / 30 days), PA
<i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg	2	
<i>venlafaxine hcl</i> TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	3	
<i>vilazodone hcl</i> TABS 10mg, 20mg, 40mg	4	QL (30 tabs / 30 days)
ZURZUVAE CAPS 20mg, 25mg	5	NDS, QL (28 caps / 14 days), NM, PA
ZURZUVAE CAPS 30mg	5	NDS, QL (14 caps / 14 days), NM, PA

ANTIPARKINSONIAN AGENTS

<i>amantadine hcl</i> CAPS 100mg	3	QL (120 caps / 30 days)
<i>amantadine hcl</i> SOLN 50mg/5ml	3	
<i>amantadine hcl</i> TABS 100mg	4	
<i>benztropine mesylate</i> SOLN 1mg/ml	4	
<i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg	2	PA; PA applies if 70 years and older
<i>bromocriptine mesylate</i> CAPS 5mg; TABS 2.5mg	4	
<i>carb/levo orally disintegrating tab</i> 10-100mg	3	
<i>carb/levo orally disintegrating tab</i> 25-100mg	3	
<i>carb/levo orally disintegrating tab</i> 25-250mg	3	
<i>carbidopa & levodopa tab</i> 10-100 mg	2	
<i>carbidopa & levodopa tab</i> 25-100 mg	2	
<i>carbidopa & levodopa tab</i> 25-250 mg	2	
<i>carbidopa & levodopa tab er</i> 25-100 mg	3	
<i>carbidopa & levodopa tab er</i> 50-200 mg	3	
<i>carbidopa-levodopa-entacapone tabs</i> 12.5-50-200 mg	4	
<i>carbidopa-levodopa-entacapone tabs</i> 18.75-75-200 mg	4	
<i>carbidopa-levodopa-entacapone tabs</i> 25-100-200 mg	4	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	4	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	4	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	4	
<i>entacapone TABS 200mg</i>	4	
INBRIJA CAPS 42mg	5	NDS, QL (300 caps / 30 days), NM, PA
<i>pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg</i>	2	
<i>rasagiline mesylate TABS .5mg, 1mg</i>	4	QL (30 tabs / 30 days)
<i>ropinirole hydrochloride TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg</i>	2	
<i>selegiline hcl CAPS 5mg; TABS 5mg</i>	3	
<i>trihexyphenidyl hcl SOLN .4mg/ml</i>	3	PA; PA applies if 70 years and older
<i>trihexyphenidyl hcl TABS 2mg, 5mg</i>	2	PA; PA applies if 70 years and older

ANTIPSYCHOTICS

ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml	5	NDS, QL (1 syringe / 56 days)
ABILIFY MAINTENA PRSY 300mg, 400mg	5	NDS, QL (1 syringe / 28 days)
ABILIFY MAINTENA SRER 300mg, 400mg	5	NDS, QL (1 injection / 28 days)
<i>aripiprazole SOLN 1mg/ml</i>	4	QL (900 mL / 30 days)
<i>aripiprazole TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg</i>	4	QL (30 tabs / 30 days)
<i>aripiprazole TBDP 10mg, 15mg</i>	4	QL (60 tabs / 30 days), ST
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml	5	NDS, QL (1 syringe / 28 days)
ARISTADA PRSY 1064mg/3.9ml	5	NDS, QL (1 syringe / 56 days)
ARISTADA INITIO PRSY 675mg/2.4ml	5	NDS
<i>asenapine maleate SUBL 2.5mg, 5mg, 10mg</i>	4	QL (60 tabs / 30 days)
CAPLYTA CAPS 10.5mg, 21mg, 42mg	5	NDS, QL (30 caps / 30 days)
<i>chlorpromazine hcl CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg</i>	4	
<i>clozapine TABS 25mg, 50mg</i>	3	
<i>clozapine TABS 100mg</i>	3	QL (270 tabs / 30 days)
<i>clozapine TABS 200mg</i>	3	QL (120 tabs / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
LYBALVI TAB 15-10MG	5	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 20-10MG	5	NDS, QL (30 tabs / 30 days)
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	4	
NUPLAZID CAPS 34mg	5	NDS, QL (30 caps / 30 days), NM, PA
NUPLAZID TABS 10mg	5	NDS, QL (30 tabs / 30 days), NM, PA
<i>olanzapine</i> SOLR 10mg	4	QL (3 vials / 1 day)
<i>olanzapine</i> TABS 2.5mg, 5mg, 10mg	2	QL (60 tabs / 30 days)
<i>olanzapine</i> TABS 7.5mg, 15mg, 20mg	2	QL (30 tabs / 30 days)
<i>olanzapine</i> TBDP 5mg, 15mg, 20mg	4	QL (30 tabs / 30 days), ST
<i>olanzapine</i> TBDP 10mg	4	QL (60 tabs / 30 days), ST
OPIPZA FILM 2mg, 5mg	5	NDS, QL (30 films / 30 days), PA
OPIPZA FILM 10mg	5	NDS, QL (90 films / 30 days), PA
<i>paliperidone</i> TB24 1.5mg, 3mg, 9mg	4	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 6mg	4	QL (60 tabs / 30 days)
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	3	
<i>pimozide</i> TABS 1mg, 2mg	4	
<i>quetiapine fumarate</i> TABS 25mg	2	QL (180 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 50mg, 100mg, 150mg, 200mg	2	QL (90 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 300mg, 400mg	2	QL (60 tabs / 30 days)
<i>quetiapine fumarate</i> TB24 50mg, 300mg, 400mg	4	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate</i> TB24 150mg, 200mg	4	QL (30 tabs / 30 days), PA
REXULTI TABS 3mg, 4mg	5	NDS, QL (30 tabs / 30 days)
REXULTI TABS .25mg, .5mg, 1mg, 2mg	5	NDS, QL (60 tabs / 30 days)
<i>risperidone</i> SOLN 1mg/ml	3	QL (240 mL / 30 days)
<i>risperidone</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	2	
<i>risperidone</i> TBDP 1mg, 2mg, 3mg	4	QL (60 tabs / 30 days), ST
<i>risperidone</i> TBDP 4mg	4	QL (120 tabs / 30 days), ST
<i>risperidone</i> TBDP .25mg, .5mg	4	QL (90 tabs / 30 days), ST

Drug Name	Drug Tier	Requirements/Limits
<i>risperidone microspheres</i> SRER 12.5mg, 25mg	4	QL (2 injections / 28 days)
<i>risperidone microspheres</i> SRER 37.5mg, 50mg	5	NDS, QL (2 injections / 28 days)
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr	5	NDS, QL (30 patches / 30 days)
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	3	
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	4	
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	3	
VERSACLOZ SUSP 50mg/ml	5	NDS, QL (600 mL / 30 days), PA
VRAYLAR CAPS 1.5mg	5	NDS, QL (60 caps / 30 days)
VRAYLAR CAPS 3mg, 4.5mg, 6mg	5	NDS, QL (30 caps / 30 days)
<i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg	4	QL (60 caps / 30 days)
<i>ziprasidone mesylate</i> SOLR 20mg	4	QL (6 injections / 3 days)

ANTISEIZURE AGENTS

APTIOM TABS 200mg, 400mg	5	NDS, QL (30 tabs / 30 days)
APTIOM TABS 600mg, 800mg	5	NDS, QL (60 tabs / 30 days)
BRIVIACT SOLN 10mg/ml	5	NDS, QL (600 mL / 30 days), PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg	5	NDS, QL (60 tabs / 30 days), PA
<i>carbamazepine</i> CHEW 100mg; TABS 200mg	3	
<i>carbamazepine</i> CHEW 200mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TB12 100mg, 200mg, 400mg	4	
<i>clobazam</i> SUSP 2.5mg/ml	4	QL (480 mL / 30 days), PA
<i>clobazam</i> TABS 10mg, 20mg	4	QL (60 tabs / 30 days), PA
<i>clonazepam</i> TABS 2mg	2	QL (300 tabs / 30 days)
<i>clonazepam</i> TABS .5mg, 1mg	2	QL (90 tabs / 30 days)
<i>clonazepam</i> TBDP 2mg	3	QL (300 tabs / 30 days)
<i>clonazepam</i> TBDP .125mg, .25mg, .5mg, 1mg	3	QL (90 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg	4	QL (180 tabs / 30 days), PA; PA applies if 65 years and older
DIACOMIT CAPS 250mg	5	NDS, QL (360 caps / 30 days), NM, PA
DIACOMIT CAPS 500mg	5	NDS, QL (180 caps / 30 days), NM, PA
DIACOMIT PACK 250mg	5	NDS, QL (360 packets / 30 days), NM, PA
DIACOMIT PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
<i>diazepam</i> SOLN 5mg/5ml	3	QL (1200 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam</i> TABS 2mg, 5mg, 10mg	2	QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg	4	
<i>diazepam inj</i> SOLN 5mg/ml	4	
<i>diazepam intensol</i> CONC 5mg/ml	3	QL (240 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
DILANTIN CAPS 30mg	4	
<i>divalproex sodium</i> CSDR 125mg	4	
<i>divalproex sodium</i> TB24 250mg, 500mg	3	
<i>divalproex sodium</i> TBEC 125mg, 250mg, 500mg	2	
EPIDIOLEX SOLN 100mg/ml	5	NDS, QL (600 mL / 30 days), NM, PA
<i>epitol</i> TABS 200mg	3	
EPRONTIA SOLN 25mg/ml	4	QL (480 mL / 30 days), PA
<i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml	3	
<i>felbamate</i> SUSP 600mg/5ml; TABS 400mg, 600mg	4	
FINTEPLA SOLN 2.2mg/ml	5	NDS, QL (360 mL / 30 days), NM, PA
FYCOMPA SUSP .5mg/ml	5	NDS, QL (720 mL / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
FYCOMPA TABS 2mg	4	QL (60 tabs / 30 days), PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg	5	NDS, QL (30 tabs / 30 days), PA
<i>gabapentin</i> CAPS 100mg, 300mg	2	QL (360 caps / 30 days)
<i>gabapentin</i> CAPS 400mg	2	QL (270 caps / 30 days)
<i>gabapentin</i> SOLN 250mg/5ml, 300mg/6ml	3	QL (2160 mL / 30 days)
<i>gabapentin</i> TABS 600mg	2	QL (180 tabs / 30 days)
<i>gabapentin</i> TABS 800mg	2	QL (120 tabs / 30 days)
<i>lacosamide</i> SOLN 200mg/20ml	4	
<i>lacosamide</i> TABS 50mg	4	QL (120 tabs / 30 days)
<i>lacosamide</i> TABS 100mg, 150mg, 200mg	4	QL (60 tabs / 30 days)
<i>lacosamide oral</i> SOLN 10mg/ml	4	QL (1200 mL / 30 days)
<i>lamotrigine</i> CHEW 5mg, 25mg	3	
<i>lamotrigine</i> TABS 25mg, 100mg, 150mg, 200mg	1	
<i>lamotrigine</i> TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	4	ST
<i>levetiracetam</i> SOLN 100mg/ml; TB24 500mg, 750mg	3	
<i>levetiracetam</i> SOLN 500mg/5ml	4	
<i>levetiracetam</i> TABS 250mg, 500mg, 750mg, 1000mg	2	
<i>levetiracetam in sodium chloride iv soln</i> 500 mg/100ml	4	
<i>levetiracetam in sodium chloride iv soln</i> 1000 mg/100ml	4	
<i>levetiracetam in sodium chloride iv soln</i> 1500 mg/100ml	4	
LIBERVANT FILM 5mg, 7.5mg, 10mg, 12.5mg, 15mg	4	QL (10 buccal films / 30 days)
<i>methsuximide</i> CAPS 300mg	4	
NAYZILAM SOLN 5mg/0.1ml	4	QL (10 nasal units per 30 days)
<i>oxcarbazepine</i> SUSP 300mg/5ml	4	
<i>oxcarbazepine</i> TABS 150mg, 300mg, 600mg	3	
<i>phenobarbital</i> ELIX 20mg/5ml	4	QL (1500 mL / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital</i> TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	3	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml	4	PA; PA applies if 70 years and older
<i>phenytek</i> CAPS 200mg, 300mg	3	

Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml	3	
<i>phenytoin sodium</i> SOLN 50mg/ml	3	
<i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg	3	
<i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg	3	QL (120 caps / 30 days), PA
<i>pregabalin</i> CAPS 200mg	3	QL (90 caps / 30 days), PA
<i>pregabalin</i> CAPS 225mg, 300mg	3	QL (60 caps / 30 days), PA
<i>pregabalin</i> SOLN 20mg/ml	4	QL (900 mL / 30 days), PA
<i>primidone</i> TABS 50mg, 125mg, 250mg	2	
<i>roweepra</i> TABS 500mg	2	
<i>rufinamide</i> SUSP 40mg/ml	5	NDS, QL (2400 mL / 30 days), PA
<i>rufinamide</i> TABS 200mg	4	QL (480 tabs / 30 days), PA
<i>rufinamide</i> TABS 400mg	5	NDS, QL (240 tabs / 30 days), PA
SPRITAM TB3D 250mg	4	QL (360 tabs / 30 days)
SPRITAM TB3D 500mg	4	QL (180 tabs / 30 days)
SPRITAM TB3D 750mg	4	QL (120 tabs / 30 days)
SPRITAM TB3D 1000mg	4	QL (90 tabs / 30 days)
<i>subvenite</i> TABS 25mg, 100mg, 150mg, 200mg	1	
SYMPAZAN FILM 5mg, 10mg, 20mg	5	NDS, QL (60 films / 30 days), PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	4	
<i>topiramate</i> CPSP 15mg, 25mg	3	
<i>topiramate</i> TABS 25mg, 50mg, 100mg, 200mg	2	
<i>valproate sodium</i> SOLN 100mg/ml	4	
<i>valproate sodium</i> SOLN 250mg/5ml	3	
<i>valproic acid</i> CAPS 250mg	3	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml	4	QL (10 blister packs per 30 days)
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml	4	QL (10 blister packs per 30 days)
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml	4	QL (10 blister packs per 30 days)
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml	4	QL (10 blister packs per 30 days)
<i>vigabatrin</i> PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
<i>vigabatrin</i> TABS 500mg	5	NDS, QL (180 tabs / 30 days), NM, PA
<i>vigadrone</i> PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
<i>vigadrone</i> TABS 500mg	5	NDS, QL (180 tabs / 30 days), NM, PA
VIGAFYDE SOLN 100mg/ml	5	NDS, QL (900 mL / 30 days), NM, PA
<i>vigpoder</i> PACK 500mg	5	NDS, QL (180 packets / 30 days), NM, PA
XCOPRI TABS 25mg, 50mg, 100mg	5	NDS, QL (30 tabs / 30 days)
XCOPRI TABS 150mg, 200mg	5	NDS, QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	4	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	5	NDS, QL (28 tabs / 28 days)
XCOPRI PAK 100-150	5	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	5	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	5	NDS, QL (28 tabs / 28 days)
ZONISADE SUSP 100mg/5ml	5	NDS, QL (900 mL / 30 days), PA
<i>zonisamide</i> CAPS 25mg, 50mg, 100mg	2	
ZTALMY SUSP 50mg/ml	5	NDS, QL (1100 mL / 30 days), NM, PA

ATTENTION DEFICIT HYPERACTIVITY DISORDER

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	4	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine tab 5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	3	QL (60 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
<i>amphetamine-dextroamphetamine tab 10 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 15 mg</i>	3	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 20 mg</i>	3	QL (90 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 30 mg</i>	3	QL (60 tabs / 30 days), PA
<i>atomoxetine hcl CAPS 10mg, 18mg, 25mg</i>	4	QL (120 caps / 30 days)
<i>atomoxetine hcl CAPS 40mg</i>	4	QL (60 caps / 30 days)
<i>atomoxetine hcl CAPS 60mg, 80mg, 100mg</i>	4	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl TABS 2.5mg, 5mg</i>	3	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl TABS 10mg</i>	3	QL (60 tabs / 30 days), PA
<i>guanfacine hcl (adhd) TB24 1mg, 2mg, 4mg</i>	3	QL (30 tabs / 30 days), PA; PA applies if 70 years and older
<i>guanfacine hcl (adhd) TB24 3mg</i>	3	QL (60 tabs / 30 days), PA; PA applies if 70 years and older
<i>methylphenidate hcl CHEW 2.5mg, 5mg, 10mg</i>	4	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl SOLN 5mg/5ml</i>	4	QL (1800 mL / 30 days), PA
<i>methylphenidate hcl SOLN 10mg/5ml</i>	4	QL (900 mL / 30 days), PA
<i>methylphenidate hcl TABS 5mg, 10mg</i>	3	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl TABS 20mg</i>	3	QL (90 tabs / 30 days), PA
<i>methylphenidate hcl TBCR 10mg, 20mg</i>	4	QL (90 tabs / 30 days), PA
HYPNOTICS		
<i>DAYVIGO TABS 5mg, 10mg</i>	3	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) TABS 3mg, 6mg</i>	3	QL (30 tabs / 30 days)
<i>eszopiclone TABS 1mg, 2mg, 3mg</i>	4	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>tasimelteon CAPS 20mg</i>	5	NDS, QL (30 caps / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
<i>temazepam</i> CAPS 7.5mg, 30mg	4	QL (30 caps / 30 days), PA; PA applies if 65 years and older
<i>temazepam</i> CAPS 15mg	4	QL (60 caps / 30 days), PA; PA applies if 65 years and older
<i>zaleplon</i> CAPS 5mg	3	QL (30 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zaleplon</i> CAPS 10mg	3	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate</i> TABS 5mg, 10mg	2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

MIGRAINE

AIMOVIG SOAJ 70mg/ml, 140mg/ml	3	QL (1 pen / 30 days), NM, PA
<i>dihydroergotamine mesylate</i> SOLN 1mg/ml	5	NDS
<i>dihydroergotamine mesylate</i> SOLN 4mg/ml	5	NDS, QL (8 mL / 30 days), PA
EMGALITY SOAJ 120mg/ml	3	QL (2 pens / 30 days), NM, PA
EMGALITY SOSY 100mg/ml	3	QL (3 syringes / 30 days), NM, PA
EMGALITY SOSY 120mg/ml	3	QL (2 syringes / 30 days), NM, PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	3	QL (40 tabs / 28 days), PA
<i>naratriptan hcl</i> TABS 1mg, 2.5mg	3	QL (12 tabs / 30 days)
NURTEC TBDP 75mg	3	QL (16 tabs / 30 days), PA
QULIPTA TABS 10mg, 30mg, 60mg	3	QL (30 tabs / 30 days), PA
<i>rizatriptan benzoate</i> TABS 5mg, 10mg; TBDP 5mg, 10mg	3	QL (18 tabs / 30 days)
<i>sumatriptan</i> SOLN 5mg/act	4	QL (24 units / 30 days)
<i>sumatriptan</i> SOLN 20mg/act	4	QL (12 units / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate</i> SOAJ 4mg/0.5ml; SOCT 4mg/0.5ml	4	QL (18 injections / 30 days)
<i>sumatriptan succinate</i> SOAJ 6mg/0.5ml; SOCT 6mg/0.5ml; SOLN 6mg/0.5ml	4	QL (12 injections / 30 days)
<i>sumatriptan succinate</i> TABS 25mg, 50mg, 100mg	2	QL (12 tabs / 30 days)
UBRELVY TABS 50mg, 100mg	3	QL (16 tabs / 30 days), PA

MISCELLANEOUS

AUSTEDO TABS 6mg	5	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO TABS 9mg, 12mg	5	NDS, QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 6mg	5	NDS, QL (90 tabs / 30 days), NM, PA
AUSTEDO XR TB24 12mg	5	NDS, QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 18mg, 24mg	5	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO XR TB24 30mg, 36mg, 42mg, 48mg	5	NDS, QL (30 tabs / 30 days), NM, PA
AUSTEDO XR TAB TITR KIT	5	NDS, QL (2 packs / year), NM, PA
<i>lithium</i> SOLN 8meq/5ml	4	
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg	1	
<i>lithium carbonate</i> TBCR 300mg, 450mg	2	
NUDEXTA CAP 20-10MG	5	NDS, QL (60 caps / 30 days), PA
<i>pyridostigmine bromide</i> TABS 60mg	3	
<i>riluzole</i> TABS 50mg	4	
<i>tetrabenazine</i> TABS 12.5mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>tetrabenazine</i> TABS 25mg	5	NDS, QL (120 tabs / 30 days), NM, PA

MULTIPLE SCLEROSIS AGENTS

BAFIERTAM CPDR 95mg	5	NDS, QL (120 caps / 30 days), NM, PA
BETASERON KIT .3mg	5	NDS, QL (14 syringes / 28 days), NM, PA
COPAXONE SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA
COPAXONE SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
<i>dalfampridine</i> TB12 10mg	3	QL (60 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
<i>fingolimod hcl</i> CAPS .5mg	5	NDS, QL (30 caps / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
<i>glatopa</i> SOSY 20mg/ml	5	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatopa</i> SOSY 40mg/ml	5	NDS, QL (12 syringes / 28 days), NM, PA
KESIMPTA SOAJ 20mg/0.4ml	5	NDS, QL (16 pens / 365 days), NM, PA

MUSCULOSKELETAL THERAPY AGENTS

<i>baclofen</i> TABS 5mg	2	QL (90 tabs / 30 days)
<i>baclofen</i> TABS 10mg, 20mg	2	
<i>carisoprodol</i> TABS 350mg	3	QL (120 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg	3	QL (90 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>dantrolene sodium</i> CAPS 25mg, 50mg, 100mg	4	
<i>methocarbamol</i> TABS 500mg	3	QL (360 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>methocarbamol</i> TABS 750mg	3	QL (240 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>tizanidine hcl</i> TABS 2mg, 4mg	2	

NARCOLEPSY/CATAPLEXY

<i>armodafinil</i> TABS 50mg	4	QL (60 tabs / 30 days), PA
<i>armodafinil</i> TABS 150mg, 200mg, 250mg	4	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 100mg	3	QL (30 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
<i>modafinil</i> TABS 200mg	3	QL (60 tabs / 30 days), PA
SODIUM OXYBATE SOLN 500mg/ml	5	NDS, QL (540 mL / 30 days), NM, PA

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium</i> TBEC 333mg	4	
<i>buprenorphine hcl</i> SUBL 2mg, 8mg	3	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	4	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	4	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	4	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	4	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent)</i> TB12 150mg	2	QL (60 tabs / 30 days)
<i>disulfiram</i> TABS 250mg, 500mg	3	
<i>naloxone hcl</i> LIQD 4mg/0.1ml	3	
<i>naloxone hcl</i> SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml	2	
<i>naltrexone hcl</i> TABS 50mg	3	
NICOTROL INHALER INHA 10mg	4	
NICOTROL NS SOLN 10mg/ml	4	
<i>varenicline tartrate</i> TABS .5mg, 1mg	4	QL (56 tabs / 28 days)
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	4	QL (2 packs / year)
VIVITROL SUSR 380mg	5	NDS, NM

ENDOCRINE AND METABOLIC

ANDROGENS

<i>danazol</i> CAPS 50mg, 100mg, 200mg	4	
<i>depo-testosterone</i> SOLN 100mg/ml, 200mg/ml	3	PA
<i>methyltestosterone</i> CAPS 10mg	5	NDS, QL (600 caps / 30 days), PA
<i>testosterone</i> GEL 1%, 25mg/2.5gm, 50mg/5gm	4	QL (300 gm / 30 days), PA
<i>testosterone cypionate</i> SOLN 100mg/ml, 200mg/ml	3	PA
<i>testosterone enanthate</i> SOLN 200mg/ml	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>testosterone pump</i> GEL 1.62%	4	QL (150 gm / 30 days), PA

ANTIDIABETICS

<i>acarbose</i> TABS 25mg, 50mg, 100mg	3	
FARXIGA TABS 5mg, 10mg	3	QL (30 tabs / 30 days)
<i>glimepiride</i> TABS 1mg, 2mg	1	QL (90 tabs / 30 days)
<i>glimepiride</i> TABS 4mg	1	QL (60 tabs / 30 days)
<i>glipizide</i> TABS 5mg	1	QL (240 tabs / 30 days)
<i>glipizide</i> TABS 10mg	1	QL (120 tabs / 30 days)
<i>glipizide</i> TB24 2.5mg, 5mg	1	QL (90 tabs / 30 days)
<i>glipizide</i> TB24 10mg	1	QL (60 tabs / 30 days)
<i>glipizide xl</i> TB24 2.5mg, 5mg	1	QL (90 tabs / 30 days)
<i>glipizide xl</i> TB24 10mg	1	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	3	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	3	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	3	QL (30 tabs / 30 days)
JANUVIA TABS 25mg, 50mg, 100mg	3	QL (30 tabs / 30 days)
JARDIANCE TABS 10mg, 25mg	3	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	3	QL (30 tabs / 30 days)
<i>metformin hcl</i> TABS 500mg	1	QL (150 tabs / 30 days)
<i>metformin hcl</i> TABS 850mg	1	QL (90 tabs / 30 days)
<i>metformin hcl</i> TABS 1000mg	1	QL (75 tabs / 30 days)
<i>metformin hcl</i> TB24 500mg	1	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl</i> TB24 750mg	1	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml	3	QL (4 pens / 28 days), PA
<i>nateglinide</i> TABS 60mg, 120mg	1	QL (90 tabs / 30 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN 2mg/1.5ml	3	QL (1 pen / 28 days), PA

Drug Name	Drug Tier	Requirements/Limits
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml	3	QL (1 pen / 28 days), PA
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	3	QL (1 pen / 28 days), PA
OZEMPIC (2MG/DOSE) SOPN 8mg/3ml	3	QL (1 pen / 28 days), PA
pioglitazone hcl TABS 15mg, 30mg, 45mg	1	QL (30 tabs / 30 days)
pioglitazone hcl-metformin hcl tab 15-500 mg	1	QL (90 tabs / 30 days)
pioglitazone hcl-metformin hcl tab 15-850 mg	1	QL (90 tabs / 30 days)
repaglinide TABS 2mg	1	QL (240 tabs / 30 days)
repaglinide TABS .5mg, 1mg	1	QL (120 tabs / 30 days)
RYBELSUS TABS 3mg, 7mg, 14mg	3	QL (30 tabs / 30 days), PA
SYNJARDY TAB 5-500MG	3	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	3	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 12.5-1000	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	3	QL (30 tabs / 30 days)
TRADJENTA TABS 5mg	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	3	QL (30 tabs / 30 days)
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	3	QL (4 pens / 28 days), PA
XIGDUO XR TAB 2.5-1000	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	3	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	3	QL (30 tabs / 30 days)
ANTIDIABETICS, INSULINS		
ADMELOG SOLN 100unit/ml	3	
ADMELOG SOLOSTAR SOPN 100unit/ml	3	
ALCOHOL SWABS: BD-EMBECTA/MHC/RUGBY	3	PA
BASAGLAR KWIKPEN SOPN 100unit/ml	3	
CEQUR SIMPL KIT PATCH 2U (3-DAY)	4	QL (10 patches / 30 days), PA
CEQUR SIMPL KIT PATCH 2U (4-DAY)	4	QL (8 patches / 24 days), PA
FIASP SOLN 100unit/ml	3	

Drug Name	Drug Tier	Requirements/Limits
FIASP FLEXTOUCH SOPN 100unit/ml	3	
FIASP PENFILL SOCT 100unit/ml	3	
FIASP PUMPCART SOCT 100unit/ml	3	B/D
GAUZE PADS 2" X 2"	3	PA
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	5	NDS, B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	5	NDS
INSULIN PEN NEEDLES: BD-EMBECTA	3	PA
INSULIN SAFETY NEEDLES: BD-EMBECTA	3	PA
INSULIN SYRINGES: BD-EMBECTA	3	PA
NOVOLIN INJ 70/30	3	(brand RELION not covered)
NOVOLIN INJ 70/30 FP	3	(brand RELION not covered)
NOVOLIN N SUSP 100unit/ml	3	(brand RELION not covered)
NOVOLIN N FLEXPEN SUPN 100unit/ml	3	(brand RELION not covered)
NOVOLIN R SOLN 100unit/ml	3	(brand RELION not covered)
NOVOLIN R FLEXPEN SOPN 100unit/ml	3	(brand RELION not covered)
NOVOLOG SOLN 100unit/ml	3	(brand RELION not covered)
NOVOLOG FLEXPEN SOPN 100unit/ml	3	(brand RELION not covered)
NOVOLOG MIX INJ 70/30	3	(brand RELION not covered)
NOVOLOG MIX INJ FLEXPEN	3	(brand RELION not covered)
NOVOLOG PENFILL SOCT 100unit/ml	3	(brand RELION not covered)
OMNIPOD 5 DX KIT INT G7G6	4	QL (1 kit / year), PA
OMNIPOD 5 DX MIS POD G7G6	4	QL (15 pods / 30 days), PA
OMNIPOD 5 G7 KIT INTRO	4	QL (1 kit / year), PA
OMNIPOD 5 G7 MIS PODS	4	QL (15 pods / 30 days), PA
OMNIPOD 5 LB KIT INTRO G6	4	QL (1 kit / year), PA
OMNIPOD 5 LB MIS PODS G6	4	QL (15 pods / 30 days), PA
OMNIPOD DASH KIT INTRO	4	QL (1 kit / year), PA
OMNIPOD DASH MIS PODS	4	QL (15 pods / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
OMNIPOD GO KIT 10UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 15UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 20UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 25UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 30UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 35UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 40UNT/DY	4	QL (15 pods / 30 days), PA
OMNIPOD MIS CLASSIC	4	QL (15 pods / 30 days), PA
SIMPLICITY MIS INSERTER	4	QL (2 inserters / year), PA
SOLIQUA INJ 100/33	3	QL (5 pens / 25 days)
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	3	
TOUJEO SOLOSTAR SOPN 300unit/ml	3	
TRESIBA SOLN 100unit/ml	3	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	3	
XULTOPHY INJ 100/3.6	3	QL (5 pens / 30 days)
CALCIUM REGULATORS		
<i>alendronate sodium</i> SOLN 70mg/75ml	4	ST
<i>alendronate sodium</i> TABS 10mg, 35mg, 70mg	1	
<i>calcitonin (salmon) spray</i> SOLN 200unit/act	3	B/D
<i>ibandronate sodium</i> TABS 150mg	2	B/D
PAMIDRONATE DISODIUM SOLN 6mg/ml	3	B/D
<i>pamidronate disodium</i> SOLN 30mg/10ml, 90mg/10ml	3	B/D
PROLIA SOSY 60mg/ml	4	QL (1 syringe / 180 days), NM
<i>risedronate sodium</i> TABS 5mg, 35mg, 150mg	3	
<i>risedronate sodium</i> TBEC 35mg	4	ST
TERIPARATIDE SOPN 620mcg/2.48ml	5	NDS, NM, PA
XGEVA SOLN 120mg/1.7ml	5	NDS, NM, PA
<i>zoledronic acid</i> CONC 4mg/5ml; SOLN 5mg/100ml	4	B/D, NM

Drug Name	Drug Tier	Requirements/Limits
CHELATING AGENTS		
CHEMET CAPS 100mg	5	NDS
<i>deferasirox</i> TABS 90mg	3	NM, PA
<i>deferasirox</i> TABS 180mg, 360mg; TBSO 125mg	4	NM, PA
<i>deferasirox</i> TBSO 250mg, 500mg	5	NDS, NM, PA
<i>kionex</i> SUSP 15gm/60ml	3	
LOKELMA PACK 5gm, 10gm	3	
<i>penicillamine</i> TABS 250mg	5	NDS, NM
<i>sodium polystyrene sulfonate powder</i>	3	
<i>sps</i> SUSP 15gm/60ml	3	
<i>sps rectal</i> SUSP 15gm/60ml	3	
<i>trientine hcl</i> CAPS 250mg	5	NDS, NM, PA
CONTRACEPTIVES		
<i>afirmelle</i>	2	
<i>altavera</i>	3	
<i>alyacen 1/35</i>	3	
<i>alyacen 7/7/7</i>	3	
<i>amethia</i>	3	
<i>amethyst</i>	3	
<i>apri</i>	2	
<i>aranelle</i>	3	
<i>ashlyna</i>	3	
<i>aubra eq</i>	2	
<i>aurovela 1/20</i>	3	
<i>aurovela 24 fe</i>	3	
<i>aurovela fe 1.5/30</i>	2	
<i>aurovela fe 1/20</i>	2	
<i>aviane</i>	2	
<i>ayuna</i>	3	
<i>azurette</i>	3	
<i>balziva</i>	3	
<i>blisovi 24 fe</i>	3	
<i>blisovi fe 1.5/30</i>	2	
<i>briellyn</i>	3	
<i>camila</i> TABS .35mg	2	
<i>camrese</i>	3	
<i>camrese lo</i>	3	
<i>chateal eq</i>	3	
<i>cryselle-28</i>	3	
<i>cyred eq</i>	2	
<i>dasetta 1/35</i>	3	
<i>dasetta 7/7/7</i>	3	
<i>daysee</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>deblitane</i> TABS .35mg	2	
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	3	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	3	
<i>dolishale</i>	3	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	3	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	3	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	3	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	3	
<i>elinest</i>	3	
<i>eluryng</i>	3	
<i>emzahh</i> TABS .35mg	2	
<i>enilloring</i>	3	
<i>enpresse-28</i>	2	
<i>enskyce</i>	2	
<i>errin</i> TABS .35mg	2	
<i>estarylla</i>	2	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	2	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	3	
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	3	
<i>falmina</i>	2	
<i>finzala</i>	3	
<i>hailey 1.5/30</i>	3	
<i>hailey 24 fe</i>	3	
<i>haloette</i>	3	
<i>heather</i> TABS .35mg	2	
<i>iclevia</i>	3	
<i>incassia</i> TABS .35mg	2	
<i>introvale</i>	3	
<i>isibloom</i>	2	
<i>jasmiel</i>	3	
<i>jolessa</i>	3	
<i>juleber</i>	2	
<i>junel 1.5/30</i>	3	
<i>junel 1/20</i>	3	
<i>junel fe 1.5/30</i>	2	
<i>junel fe 1/20</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>junel fe 24</i>	3	
<i>kaitlib fe</i>	3	
<i>kariva</i>	3	
<i>kelnor 1/35</i>	2	
<i>kelnor 1/50</i>	3	
<i>kurvelo</i>	3	
<i>larin 1.5/30</i>	3	
<i>larin 1/20</i>	3	
<i>larin 24 fe</i>	3	
<i>larin fe 1.5/30</i>	2	
<i>larin fe 1/20</i>	2	
<i>layolis fe</i>	3	
<i>leena</i>	3	
<i>lessina</i>	2	
<i>levonest</i>	2	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	3	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	3	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	3	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	3	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	3	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	2	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	3	
<i>levora 0.15/30-28</i>	3	
LILETTA IUD 20.1mcg/day	3	NM
<i>loestrin 1.5/30-21</i>	3	
<i>loestrin 1/20-21</i>	3	
<i>loestrin fe 1.5/30</i>	2	
<i>loestrin fe 1/20</i>	2	
<i>loryna</i>	3	
<i>low-ogestrel</i>	3	
<i>lutera</i>	2	
<i>lyleq TABS .35mg</i>	2	
<i>lyza TABS .35mg</i>	2	
<i>marlissa</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate</i> (contraceptive) SUSP 150mg/ml; SUSY 150mg/ml	3	
<i>mibelas 24 fe</i>	3	
<i>microgestin 1.5/30</i>	3	
<i>microgestin 1/20</i>	3	
<i>microgestin fe 1.5/30</i>	2	
<i>microgestin fe 1/20</i>	2	
<i>mili</i>	2	
<i>mono-linyah</i>	2	
<i>necon 0.5/35-28</i>	3	
NEXPLANON IMPL 68mg	3	NM
<i>nikki</i>	3	
<i>nora-be TABS .35mg</i>	2	
<i>norelgestromin-ethinyl estradiol td ptwk</i> <i>150-35 mcg/24hr</i>	3	
<i>norethindrone & ethinyl estradiol-fe chew</i> <i>tab 0.4 mg-35 mcg</i>	3	
<i>norethindrone & ethinyl estradiol-fe chew</i> <i>tab 0.8 mg-25 mcg</i>	3	
<i>norethindrone (contraceptive) TABS</i> <i>.35mg</i>	2	
<i>norethindrone ac-ethinyl estrad-fe tab 1-</i> <i>20/1-30/1-35 mg-mcg</i>	3	
<i>norethindrone ace & ethinyl estradiol tab 1</i> <i>mg-20 mcg</i>	3	
<i>norethindrone ace & ethinyl estradiol tab</i> <i>1.5 mg-30 mcg</i>	3	
<i>norethindrone ace & ethinyl estradiol-fe</i> <i>tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace-eth estradiol-fe chew</i> <i>tab 1 mg-20 mcg (24)</i>	3	
<i>norgestimate & ethinyl estradiol tab 0.25</i> <i>mg-35 mcg</i>	2	
<i>norgestimate-eth estrad tab 0.18-</i> <i>25/0.215-25/0.25-25 mg-mcg</i>	3	
<i>norgestimate-eth estrad tab 0.18-</i> <i>35/0.215-35/0.25-35 mg-mcg</i>	3	
<i>norlyroc TABS .35mg</i>	2	
<i>nortrel 0.5/35 (28)</i>	3	
<i>nortrel 1/35 (21)</i>	3	
<i>nortrel 1/35 (28)</i>	3	
<i>nortrel 7/7/7</i>	3	
<i>nylia 1/35</i>	3	
<i>nylia 7/7/7</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>ocella</i>	3	
<i>philith</i>	3	
<i>pimtrea</i>	3	
<i>portia-28</i>	3	
<i>reclipsen</i>	2	
<i>rivelsa</i>	3	
<i>setlakin</i>	3	
<i>sharobel</i> TABS .35mg	2	
<i>simliya</i>	3	
<i>simpesse</i>	3	
<i>sprintec 28</i>	2	
<i>sronyx</i>	2	
<i>syeda</i>	3	
<i>tarina 24 fe</i>	3	
<i>tarina fe 1/20 eq</i>	2	
<i>tilia fe</i>	3	
<i>tri-estarylla</i>	3	
<i>tri-legest fe</i>	3	
<i>tri-linyah</i>	3	
<i>tri-lo-estarylla</i>	3	
<i>tri-lo-marzia</i>	3	
<i>tri-lo-mili</i>	3	
<i>tri-lo-sprintec</i>	3	
<i>tri-mili</i>	3	
<i>tri-nymyo</i>	3	
<i>tri-sprintec</i>	3	
<i>tri-vylibra</i>	3	
<i>tri-vylibra lo</i>	3	
<i>trivora-28</i>	2	
<i>turqoz</i>	3	
<i>tydemy</i>	3	
<i>velivet</i>	3	
<i>vestura</i>	3	
<i>vienva</i>	2	
<i>viorele</i>	3	
<i>vyfemla</i>	3	
<i>vylibra</i>	2	
<i>wera</i>	3	
<i>wymzya fe</i>	3	
<i>xulane</i>	3	
<i>zafemy</i>	3	
<i>zovia 1/35</i>	2	
<i>zumandimine</i>	3	

Drug Name	Drug Tier	Requirements/Limits
ESTROGENS		
<i>dotti</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
<i>estradiol</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	3	
<i>estradiol</i> TABS .5mg, 1mg, 2mg	2	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	3	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	3	
<i>estradiol vaginal</i> CREA .1mg/gm	3	
<i>estradiol vaginal</i> TABS 10mcg	4	
<i>estradiol valerate</i> OIL 10mg/ml, 20mg/ml, 40mg/ml	4	
<i>fyavolv tab 0.5mg-2.5mcg</i>	3	
<i>fyavolv tab 1mg-5mcg</i>	3	
<i>jinteli</i>	3	
<i>lyllana</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
<i>mimvey</i>	3	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	3	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	3	
<i>yuvaferm</i> TABS 10mcg	4	
GLUCOCORTICOIDS		
<i>dexamethasone</i> ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg	3	
DEXAMETHASONE INTENSOL CONC 1mg/ml	4	
<i>dexamethasone sodium phosphate</i> SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml	3	
<i>fludrocortisone acetate</i> TABS .1mg	2	
<i>hydrocortisone</i> TABS 5mg, 10mg, 20mg	3	
<i>hydrocortisone sod succinate</i> SOLR 100mg	4	
<i>methylprednisolone</i> TABS 4mg, 8mg, 16mg, 32mg	3	B/D
<i>methylprednisolone</i> TBPK 4mg	2	
<i>methylprednisolone acetate</i> SUSP 40mg/ml, 80mg/ml	3	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>methylprednisolone sod succ</i> SOLR 40mg, 125mg, 1000mg	3	B/D
<i>prednisolone</i> SOLN 15mg/5ml	2	B/D
<i>prednisolone sodium phosphate</i> SOLN 5mg/5ml, 25mg/5ml	4	B/D
<i>prednisolone sodium phosphate</i> SOLN 15mg/5ml	2	B/D
<i>prednisone</i> SOLN 5mg/5ml	4	B/D
<i>prednisone</i> TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	1	B/D
<i>prednisone</i> TBPK 5mg, 10mg	3	
PREDNISONE INTENSOL CONC 5mg/ml	4	B/D
SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg	4	
GLUCOSE ELEVATING AGENTS		
<i>diazoxide</i> SUSP 50mg/ml	5	NDS
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml	3	
MISCELLANEOUS		
ALDURAZYME SOLN 2.9mg/5ml	5	NDS, NM, PA
<i>betaine powder for oral solution</i>	5	NDS, NM
<i>cabergoline</i> TABS .5mg	3	
<i>carglumic acid</i> TBSO 200mg	5	NDS, NM, PA
CERDELGA CAPS 84mg	5	NDS, NM, PA
CEREZYME SOLR 400unit	5	NDS, NM, PA
<i>cinacalcet hcl</i> TABS 30mg, 60mg	4	B/D, QL (60 tabs / 30 days), NM
<i>cinacalcet hcl</i> TABS 90mg	5	NDS, B/D, QL (120 tabs / 30 days), NM
CYSTAGON CAPS 50mg, 150mg	4	NM, PA
<i>desmopressin acetate</i> SOLN 4mcg/ml	5	NDS
<i>desmopressin acetate</i> TABS .1mg, .2mg	3	
<i>desmopressin acetate spray</i> SOLN .01%	4	
<i>desmopressin acetate spray refrigerated</i> SOLN .01%	4	
FABRAZYME SOLR 5mg, 35mg	5	NDS, NM, PA
GENOTROPIN CART 5mg, 12mg	5	NDS, NM, PA
GENOTROPIN MINIQUICK PRSY .2mg	3	NM, PA
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	5	NDS, NM, PA
INCRELEX SOLN 40mg/4ml	5	NDS, NM, PA
<i>javygtor</i> PACK 100mg, 500mg; TABS 100mg	5	NDS, NM, PA
<i>lanreotide acetate</i> SOLN 120mg/0.5ml	5	NDS, NM, PA

Drug Name	Drug Tier	Requirements/Limits
<i>levocarnitine (metabolic modifiers)</i> SOLN 1gm/10ml; TABS 330mg	4	B/D
LUMIZYME SOLR 50mg	5	NDS, NM, PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg	5	NDS, NM, PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg	5	NDS, NM, PA
LUPRON DEPOT-PED (6-MONTH KIT 45mg	5	NDS, NM, PA
<i>mifepristone (hyperglycemia)</i> TABS 300mg	5	NDS, NM, PA
NAGLAZYME SOLN 1mg/ml	5	NDS, NM, PA
<i>nitisinone</i> CAPS 2mg, 5mg, 10mg, 20mg	5	NDS, NM, PA
<i>octreotide acetate</i> SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	4	NM, PA
<i>octreotide acetate</i> SOLN 500mcg/ml, 1000mcg/ml; SOSY 500mcg/ml	5	NDS, NM, PA
<i>raloxifene hcl</i> TABS 60mg	3	
<i>sapropterin dihydrochloride</i> PACK 100mg, 500mg; TABS 100mg	5	NDS, NM, PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	5	NDS, NM, PA
<i>sodium phenylbutyrate</i> POWD 3gm/tsp; TABS 500mg	5	NDS, NM, PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	5	NDS, NM, PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	5	NDS, NM, PA
SYNAREL SOLN 2mg/ml	5	NDS, PA
VEOZAH TABS 45mg	4	PA
PROGESTINS		
<i>gallifrey</i> TABS 5mg	3	
<i>medroxyprogesterone acetate</i> TABS 2.5mg, 5mg, 10mg	1	
<i>megestrol acetate</i> SUSP 40mg/ml	3	
<i>megestrol acetate (appetite)</i> SUSP 625mg/5ml	4	PA
<i>norethindrone acetate</i> TABS 5mg	3	
<i>progesterone</i> CAPS 100mg, 200mg	3	
THYROID AGENTS		
<i>euthyrox</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	

Drug Name	Drug Tier	Requirements/Limits
<i>levo-t</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levothyroxine sodium</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levoxyl</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
<i>liothyronine sodium</i> TABS 5mcg, 25mcg, 50mcg	3	
<i>methimazole</i> TABS 5mg, 10mg	1	
<i>propylthiouracil</i> TABS 50mg	3	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	4	
<i>unithroid</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	

VITAMIN D ANALOGS

<i>calcitriol</i> CAPS .25mcg, .5mcg	2	B/D
<i>calcitriol (oral)</i> SOLN 1mcg/ml	4	B/D
<i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg	4	B/D

GASTROINTESTINAL

ANTIEMETICS

<i>aprepitant</i> CAPS 40mg, 80mg, 125mg	4	B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	4	B/D
<i>compro</i> SUPP 25mg	4	
<i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg	4	B/D, QL (60 caps / 30 days)
<i>granisetron hcl</i> SOLN 1mg/ml, 4mg/4ml	4	
<i>granisetron hcl</i> TABS 1mg	4	B/D
<i>meclizine hcl</i> TABS 12.5mg, 25mg	2	
<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml	3	
<i>metoclopramide hcl</i> TABS 5mg, 10mg	1	
<i>ondansetron</i> TBDP 4mg, 8mg	3	B/D
<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	3	
<i>ondansetron hcl</i> SOLN 4mg/5ml	4	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron hcl</i> TABS 4mg, 8mg	3	B/D
<i>prochlorperazine</i> SUPP 25mg	4	
<i>prochlorperazine edisylate</i> SOLN 10mg/2ml	4	
<i>prochlorperazine maleate</i> TABS 5mg, 10mg	2	
<i>promethazine hcl</i> SOLN 6.25mg/5ml, 25mg/ml, 50mg/ml; TABS 12.5mg, 25mg, 50mg	3	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>scopolamine</i> PT72 1mg/3days	4	QL (10 patches / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year

ANTISPASMODICS

<i>dicyclomine hcl</i> CAPS 10mg; TABS 20mg	3	
<i>dicyclomine hcl</i> SOLN 10mg/5ml	4	
<i>glycopyrrolate</i> TABS 1mg	3	QL (90 tabs / 30 days)
<i>glycopyrrolate</i> TABS 2mg	3	QL (120 tabs / 30 days)

H2-RECEPTOR ANTAGONISTS

<i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml	3	
<i>famotidine</i> SUSR 40mg/5ml	4	
<i>famotidine</i> TABS 20mg, 40mg	1	
<i>famotidine in nacl 0.9% iv soln</i> 20 mg/50ml	3	
<i>nizatidine</i> CAPS 150mg, 300mg	4	

INFLAMMATORY BOWEL DISEASE

<i>balsalazide disodium</i> CAPS 750mg	3	
<i>budesonide</i> CPEP 3mg	4	QL (90 caps / 30 days), PA
<i>budesonide</i> TB24 9mg	5	NDS, QL (30 tabs / 30 days), PA
<i>hydrocortisone (intrarectal)</i> ENEM 100mg/60ml	4	
<i>mesalamine</i> CP24 .375gm	4	QL (120 caps / 30 days)
<i>mesalamine</i> CPDR 400mg	4	QL (180 caps / 30 days)
<i>mesalamine</i> ENEM 4gm	4	QL (1680 mL / 28 days)
<i>mesalamine</i> SUPP 1000mg	4	QL (30 suppositories / 30 days)
<i>mesalamine</i> TBEC 1.2gm	4	QL (120 tabs / 30 days)
<i>mesalamine w/ cleanser</i> KIT 4gm	4	QL (28 bottles / 28 days)
<i>sulfasalazine</i> TABS 500mg	2	

Drug Name	Drug Tier	Requirements/Limits
<i>sulfasalazine</i> TBEC 500mg	3	
LAXATIVES		
<i>constulose</i> SOLN 10gm/15ml	3	
<i>enulose</i> SOLN 10gm/15ml	3	
<i>gavilyte-c</i>	2	
<i>gavilyte-g</i>	2	
<i>gavilyte-n/ flavor pack</i>	2	
<i>generlac</i> SOLN 10gm/15ml	3	
<i>lactulose</i> SOLN 10gm/15ml	3	
<i>lactulose (encephalopathy)</i> SOLN 10gm/15ml	3	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	2	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	2	
PLENVU SOL	4	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	3	
MISCELLANEOUS		
<i>alosetron hcl</i> TABS 1mg	5	NDS, QL (60 tabs / 30 days), PA
<i>alosetron hcl</i> TABS .5mg	4	QL (60 tabs / 30 days), PA
CREON CAP 3000UNIT	3	
CREON CAP 6000UNIT	3	
CREON CAP 12000UNT	3	
CREON CAP 24000UNT	3	
CREON CAP 36000UNT	3	
<i>cromolyn sodium (mastocytosis)</i> CONC 100mg/5ml	4	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	4	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	3	
GATTEX KIT 5mg	5	NDS, NM, PA
LINZESS CAPS 72mcg, 145mcg, 290mcg	3	QL (30 caps / 30 days)
<i>loperamide hcl</i> CAPS 2mg	3	
<i>misoprostol</i> TABS 100mcg, 200mcg	3	
MOVANTIK TABS 12.5mg, 25mg	3	QL (30 tabs / 30 days)
RELISTOR SOLN 8mg/0.4ml, 12mg/0.6ml	5	NDS, QL (28 syringes / 28 days), PA
<i>sucrafate</i> TABS 1gm	3	
<i>ursodiol</i> CAPS 300mg	3	
<i>ursodiol</i> TABS 250mg, 500mg	4	

Drug Name	Drug Tier	Requirements/Limits
VOWST CAP	5	NDS, QL (12 caps / 30 days), NM, PA
XERMELO TABS 250mg	5	NDS, QL (84 tabs / 28 days), NM, PA
XIFAXAN TABS 550mg	5	NDS, PA
ZENPEP CAP 3000UNIT	4	
ZENPEP CAP 5000UNIT	4	
ZENPEP CAP 10000UNIT	4	
ZENPEP CAP 15000UNIT	4	
ZENPEP CAP 20000UNIT	4	
ZENPEP CAP 25000UNIT	4	
ZENPEP CAP 40000UNIT	4	
ZENPEP CAP 60000UNIT	4	

PROTON PUMP INHIBITORS

<i>esomeprazole magnesium</i> CPDR 20mg, 40mg	3	QL (30 caps / 30 days), ST
<i>lansoprazole</i> CPDR 15mg, 30mg	3	QL (60 caps / 30 days)
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	1	
<i>omeprazole-sodium bicarbonate cap 20-1100 mg</i>	4	QL (30 caps / 30 days), PA
<i>omeprazole-sodium bicarbonate cap 40-1100 mg</i>	4	QL (30 caps / 30 days), PA
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	5	NDS, QL (30 packets / 30 days), PA
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	5	NDS, QL (30 packets / 30 days), PA
<i>pantoprazole sodium</i> SOLR 40mg	4	
<i>pantoprazole sodium</i> TBEC 20mg, 40mg	1	
<i>rabeprazole sodium</i> TBEC 20mg	3	QL (30 tabs / 30 days)

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl</i> TB24 10mg	2	QL (30 tabs / 30 days)
<i>dutasteride</i> CAPS .5mg	3	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	3	QL (30 caps / 30 days)
<i>finasteride</i> TABS 5mg	1	QL (30 tabs / 30 days)
<i>tadalafil</i> TABS 5mg	3	QL (30 tabs / 30 days), PA
<i>tamsulosin hcl</i> CAPS .4mg	1	QL (60 caps / 30 days)

MISCELLANEOUS

<i>acetic acid</i> SOLN .25%	2	
<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	3	
<i>potassium citrate (alkalinizer)</i> TBCR 15meq, 540mg, 1080mg	3	

Drug Name	Drug Tier	Requirements/Limits
URINARY ANTISPASMODICS		
<i>fesoterodine fumarate</i> TB24 4mg, 8mg	4	QL (30 tabs / 30 days)
MYRBETRIQ SRER 8mg/ml	4	QL (300 mL / 28 days)
MYRBETRIQ TB24 25mg, 50mg	4	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> SOLN 5mg/5ml	3	QL (600 mL / 30 days)
<i>oxybutynin chloride</i> TABS 5mg	3	QL (120 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 5mg	3	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 10mg, 15mg	3	QL (60 tabs / 30 days)
<i>solifenacin succinate</i> TABS 5mg, 10mg	4	QL (30 tabs / 30 days)
<i>tolterodine tartrate</i> CP24 2mg, 4mg	4	QL (30 caps / 30 days), ST
<i>tolterodine tartrate</i> TABS 1mg, 2mg	4	QL (60 tabs / 30 days)
<i>trospium chloride</i> TABS 20mg	3	QL (60 tabs / 30 days)

VAGINAL ANTI-INFECTIVES

<i>clindamycin phosphate vaginal</i> CREA 2%	3	
<i>metronidazole vaginal</i> GEL .75%	3	
<i>terconazole vaginal</i> CREA .4%, .8%; SUPP 80mg	3	

HEMATOLOGIC

ANTICOAGULANTS

<i>dabigatran etexilate mesylate</i> CAPS 75mg, 150mg	4	QL (60 caps / 30 days)
<i>dabigatran etexilate mesylate</i> CAPS 110mg	4	QL (120 caps / 30 days)
ELIQUIS TABS 2.5mg	3	QL (60 tabs / 30 days)
ELIQUIS TABS 5mg	3	QL (74 tabs / 30 days)
ELIQUIS STARTER PACK TBPK 5mg	3	QL (74 tabs / 30 days)
<i>enoxaparin sodium</i> SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	4	
<i>fondaparinux sodium</i> SOLN 2.5mg/0.5ml	4	
<i>fondaparinux sodium</i> SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	5	NDS
HEP SOD/NAACL INJ 25000UNT	3	
<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	3	B/D
<i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
XARELTO SUSR 1mg/ml	3	QL (620 mL / 30 days)
XARELTO TABS 2.5mg	3	QL (60 tabs / 30 days)
XARELTO TABS 10mg, 15mg, 20mg	3	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
XARELTO STAR TAB 15/20MG	3	QL (51 tabs / 30 days)
HEMATOPOIETIC GROWTH FACTORS		
FULPHILA SOSY 6mg/0.6ml	5	NDS, QL (2 syringes / 28 days), NM, PA
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	3	NM, PA
PROCRIT SOLN 20000unit/ml, 40000unit/ml	5	NDS, NM, PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	5	NDS, NM, PA
MISCELLANEOUS		
ALVAIZ TABS 9mg, 54mg	5	NDS, QL (60 tabs / 30 days), NM, PA
ALVAIZ TABS 18mg, 36mg	5	NDS, QL (90 tabs / 30 days), NM, PA
<i>anagrelide hcl</i> CAPS .5mg, 1mg	4	
BERINERT KIT 500unit	5	NDS, QL (24 boxes / 30 days), NM, PA
<i>cilostazol</i> TABS 50mg, 100mg	2	
DOPTELET TABS 20mg	5	NDS, NM, PA
HAEGARDA SOLR 2000unit	5	NDS, QL (30 vials / 30 days), NM, PA
HAEGARDA SOLR 3000unit	5	NDS, QL (20 vials / 30 days), NM, PA
<i>icatibant acetate</i> SOSY 30mg/3ml	5	NDS, QL (9 syringes / 30 days), NM, PA
<i>l-glutamine (sickle cell)</i> PACK 5gm	5	NDS, NM, PA
<i>pentoxifylline</i> TBCR 400mg	2	
<i>sajazir</i> SOSY 30mg/3ml	5	NDS, QL (9 syringes / 30 days), NM, PA
TAVNEOS CAPS 10mg	5	NDS, QL (180 caps / 30 days), NM, PA
<i>tranexamic acid</i> SOLN 1000mg/10ml	4	
<i>tranexamic acid</i> TABS 650mg	3	
PLATELET AGGREGATION INHIBITORS		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	4	
BRILINTA TABS 60mg, 90mg	3	
<i>clopidogrel bisulfate</i> TABS 75mg	1	
<i>dipyridamole</i> TABS 25mg, 50mg, 75mg	3	PA; PA applies if 70 years and older
<i>prasugrel hcl</i> TABS 5mg, 10mg	3	

Drug Name	Drug Tier	Requirements/Limits
IMMUNOLOGIC AGENTS		
AUTOIMMUNE AGENTS		
ADALIMUMAB-AACF (2 PEN) AJKT 40mg/0.8ml	5	NDS, QL (56 pens / 365 days), NM, PA
ADALIMUMAB-AACF (2 SYRING PSKT 40mg/0.8ml	5	NDS, QL (56 syringes / 365 days), NM, PA
ADALIMUMAB-AACF STARTER P AJKT 40mg/0.8ml	5	NDS, QL (2 packs / year), NM, PA
COSENTYX SOLN 125mg/5ml	5	NDS, NM, PA
COSENTYX SOSY 75mg/0.5ml	5	NDS, QL (16 syringes / 365 days), NM, PA
COSENTYX SOSY 150mg/ml	5	NDS, QL (32 syringes / 365 days), NM, PA
COSENTYX SENSOREADY PEN SOAJ 150mg/ml	5	NDS, QL (32 pens / 365 days), NM, PA
COSENTYX UNOREADY SOAJ 300mg/2ml	5	NDS, QL (16 pens / 365 days), NM, PA
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml	5	NDS, QL (4 pens / 28 days), NM, PA
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
ENBREL SOLN 25mg/0.5ml	5	NDS, QL (16 vials / 28 days), NM, PA
ENBREL SOSY 25mg/0.5ml	5	NDS, QL (16 syringes / 28 days), NM, PA
ENBREL SOSY 50mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA
ENBREL MINI SOCT 50mg/ml	5	NDS, QL (8 cartridges / 28 days), NM, PA
ENBREL SURECLICK SOAJ 50mg/ml	5	NDS, QL (8 pens / 28 days), NM, PA
HUMIRA PSKT 10mg/0.1ml	5	NDS, QL (2 syringes / 28 days), NM, PA
HUMIRA PSKT 20mg/0.2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	5	NDS, QL (6 syringes / 28 days), NM, PA
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml	5	NDS, QL (6 pens / 28 days), NM, PA
HUMIRA PEN AJKT 80mg/0.8ml	5	NDS, QL (4 pens / 28 days), NM, PA
HUMIRA PEN KIT PS/UV	5	NDS, QL (3 pens / 28 days), NM, PA
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml	5	NDS, QL (3 pens / 28 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN-PEDIATRIC UC S AJKT 80mg/0.8ml	5	NDS, QL (4 pens / 28 days), NM, PA
IDACIO (2 PEN) AJKT 40mg/0.8ml	5	NDS, QL (56 pens / 365 days), NM, PA
IDACIO (2 SYRINGE) PSKT 40mg/0.8ml	5	NDS, QL (56 syringes / 365 days), NM, PA
IDACIO CROHN INJ DISEASE AJKT 40mg/0.8ml	5	NDS, QL (2 packs / year), NM, PA
IDACIO PLAQU INJ PSORIASIS AJKT 40mg/0.8ml	5	NDS, QL (2 packs / year), NM, PA
INFLIXIMAB SOLR 100mg	5	NDS, NM, PA
REMICADE SOLR 100mg	5	NDS, NM, PA
RENFLEXIS SOLR 100mg	5	NDS, NM, PA
RINVOQ TB24 15mg, 30mg	5	NDS, QL (30 tabs / 30 days), NM, PA
RINVOQ TB24 45mg	5	NDS, QL (168 tabs / year), NM, PA
RINVOQ LQ SOLN 1mg/ml	5	NDS, QL (360 mL / 30 days), NM, PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml	5	NDS, QL (1 cartridge / 56 days), NM, PA
SKYRIZI SOLN 600mg/10ml	5	NDS, NM, PA
SKYRIZI SOSY 150mg/ml	5	NDS, QL (6 syringes / 365 days), NM, PA
SKYRIZI PEN SOAJ 150mg/ml	5	NDS, QL (6 pens / 365 days), NM, PA
SOTYKTU TABS 6mg	5	NDS, QL (30 tabs / 30 days), NM, PA
STELARA SOLN 45mg/0.5ml	5	NDS, QL (1 vial / 28 days), NM, PA
STELARA SOLN 130mg/26ml	5	NDS, NM, PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
TREMFYA SOAJ 100mg/ml, 200mg/2ml	5	NDS, QL (1 pen / 28 days), NM, PA
TREMFYA SOLN 200mg/20ml	5	NDS, NM, PA
TREMFYA SOSY 100mg/ml, 200mg/2ml	5	NDS, QL (1 syringe / 28 days), NM, PA
TYENNE SOAJ 162mg/0.9ml	5	NDS, QL (4 pens / 28 days), NM, PA
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	5	NDS, NM, PA
TYENNE SOSY 162mg/0.9ml	5	NDS, QL (4 syringes / 28 days), NM, PA
VELSIPITY TABS 2mg	5	NDS, QL (30 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
XELJANZ SOLN 1mg/ml	5	NDS, QL (480 mL / 24 days), NM, PA
XELJANZ TABS 5mg, 10mg	5	NDS, QL (60 tabs / 30 days), NM, PA
XELJANZ XR TB24 11mg, 22mg	5	NDS, QL (30 tabs / 30 days), NM, PA

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)

<i>hydroxychloroquine sulfate</i> TABS 200mg	3	
JYLAMVO SOLN 2mg/ml	4	B/D
<i>leflunomide</i> TABS 10mg, 20mg	3	QL (30 tabs / 30 days)
<i>methotrexate sodium</i> TABS 2.5mg	3	
XATMEP SOLN 2.5mg/ml	4	B/D

IMMUNOGLOBULINS

ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	5	NDS, NM, PA
BIVIGAM SOLN 5gm/50ml, 10%	5	NDS, NM, PA
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	5	NDS, NM, PA
GAMASTAN INJ	4	B/D, NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	5	NDS, NM, PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	5	NDS, NM, PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	5	NDS, NM, PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	5	NDS, NM, PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	5	NDS, NM, PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	5	NDS, NM, PA

IMMUNOMODULATORS

ACTIMMUNE SOLN 100mcg/0.5ml	5	NDS, NM, PA
ARCALYST SOLR 220mg	5	NDS, NM, PA

Drug Name	Drug Tier	Requirements/Limits
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CP24 5mg	5	NDS, B/D, NM
ASTAGRAF XL CP24 .5mg, 1mg	4	B/D, NM
azathioprine TABS 50mg	3	B/D
BENLYSTA SOAJ 200mg/ml; SOSY 200mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA
BENLYSTA SOLR 120mg, 400mg	5	NDS, NM, PA
cyclosporine CAPS 25mg, 100mg	4	B/D, NM
cyclosporine modified (for microemulsion) CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	4	B/D, NM
everolimus (immunosuppressant) TABS .25mg, .5mg, .75mg, 1mg	5	NDS, B/D, NM
engraf CAPS 25mg, 100mg; SOLN 100mg/ml	4	B/D, NM
mycophenolate mofetil CAPS 250mg; TABS 500mg	3	B/D, NM
mycophenolate mofetil SUSR 200mg/ml	5	NDS, B/D, NM
mycophenolate sodium TBEC 180mg, 360mg	4	B/D, NM
NULOJIX SOLR 250mg	5	NDS, B/D, NM
PROGRAF PACK .2mg, 1mg	4	B/D, NM
REZUROCK TABS 200mg	5	NDS, QL (30 tabs / 30 days), NM, PA
sirolimus SOLN 1mg/ml	5	NDS, B/D, NM
sirolimus TABS .5mg, 1mg, 2mg	4	B/D, NM
tacrolimus CAPS .5mg, 1mg, 5mg	4	B/D, NM
VACCINES		
ABRYSVO SOLR 120mcg/0.5ml	1	
ACTHIB INJ	1	
ADACEL INJ	1	
AREXVY SUSR 120mcg/0.5ml	1	
BCG VACCINE SOLR 50mg	1	
BEXSERO INJ	1	
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
DENG VAXIA SUS	1	
DIP/TET PED INJ 25-5LFU	1	B/D
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 INJ	1	
HAVRIX SUSP 720elu/0.5ml, 1440elu/ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D
HIBERIX SOLR 10mcg	1	

Drug Name	Drug Tier	Requirements/Limits
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
IPOL INJ INACTIVE	1	
IXCHIQ INJ	1	
IXIARO INJ	1	
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	
M-M-R II INJ	1	
MENACTRA INJ	1	
MENQUADFI INJ	1	
MENVEO INJ	1	
MENVEO SOL	1	
MRESVIA SUSY 50mcg/0.5ml	1	
PEDIARIX INJ 0.5ML	1	
PEDVAX HIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENTACEL INJ	1	
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml	1	QL (2 vials per lifetime)
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	
TRUMENBA INJ	1	
TWINRIX INJ	1	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	
VAQTA SUSP 25unit/0.5ml, 50unit/ml	1	
VARIVAX SUSR 1350pfu/0.5ml	1	
VAXCHORA SUS	1	
YF-VAX INJ	1	

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTES/MINERALS, INJECTABLE

D2.5W/NACL INJ 0.45%	4	
D10W/NACL INJ 0.2%	3	
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>dextrose 5% in lactated ringers</i>	3	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.3%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.225%</i>	3	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	3	
ISOLYTE-P INJ /D5W	4	
ISOLYTE-S INJ PH 7.4	4	
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	3	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	3	
KCL/D5W/NACL INJ 0.3/0.9%	4	
<i>lactated ringer's solution</i>	3	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	3	
<i>magnesium sulfate SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>	3	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	3	
<i>multiple electrolytes ph 5.5</i>	4	
<i>multiple electrolytes ph 7.4</i>	4	
POT CHL 20MEQ/L IN NACL 0.9% INJ	4	
POT CHL 20MEQ/L IN NACL 0.45% INJ	4	
POT CHL 40MEQ/L IN NACL 0.9% INJ	4	

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride</i> SOLN 2meq/ml, 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	3	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	3	
<i>sodium chloride</i> SOLN .45%, .9%, 2.5meq/ml, 3%, 5%	3	
TPN ELECTROL INJ	4	B/D

ELECTROLYTES/MINERALS/VITAMINS, ORAL

<i>klor-con</i> PACK 20meq	4	
<i>klor-con 8</i> TBCR 8meq	2	
<i>klor-con 10</i> TBCR 10meq	2	
<i>klor-con m10</i> TBCR 10meq	2	
<i>klor-con m15</i> TBCR 15meq	2	
<i>klor-con m20</i> TBCR 20meq	2	
M-NATAL PLUS TAB	3	
<i>potassium chloride</i> CPCR 8meq, 10meq; TBCR 8meq, 10meq, 20meq	2	
<i>potassium chloride</i> PACK 20meq; SOLN 10%, 20%	4	
<i>potassium chloride microencapsulated crystals er</i> TBCR 10meq, 15meq, 20meq	2	
PRENATAL TAB 27-1MG	3	
PRENATAL TAB PLUS	3	
<i>sodium fluoride</i> chew; tab; 1.1 (0.5 f) mg/ml soln	2	
WESTAB PLUS TAB 27-1MG	3	

IV NUTRITION

CLINIMIX INJ 4.25/D5W	4	B/D
CLINIMIX INJ 4.25/D10	4	B/D
CLINIMIX INJ 5%/D15W	4	B/D
CLINIMIX INJ 5%/D20W	4	B/D
CLINIMIX INJ 6/5	4	B/D
CLINIMIX INJ 8/10	4	B/D
CLINIMIX INJ 8/14	4	B/D
<i>clinisol sf 15%</i>	4	B/D
CLINOLIPID EMU 20%	4	B/D
<i>dextrose</i> SOLN 5%, 10%	3	
<i>dextrose</i> SOLN 50%, 70%	3	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	4	B/D
NUTRILIPID EMUL 20gm/100ml	4	B/D
<i>plenamine</i>	4	B/D
PREMASOL SOL 10%	5	NDS, B/D

Drug Name	Drug Tier	Requirements/Limits
PROSOL INJ 20%	4	B/D
TRAVASOL INJ 10%	4	B/D
TROPHAMINE INJ 10%	4	B/D

OPHTHALMIC

ANTI-INFECTIVE/ANTI-INFLAMMATORY

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	3	
<i>neo-polycin hc ophth oint 1%</i>	3	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	2	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	2	
<i>neomycin-polymyxin-hc ophth susp</i>	4	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	2	
TOBRADEX OIN 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	3	
ZYLET SUS 0.5-0.3%	3	

ANTI-INFECTIVES

<i>bacitracin (ophthalmic) OINT 500unit/gm</i>	3	
<i>bacitracin-polymyxin b ophth oint</i>	2	
BESIVANCE SUSP .6%	3	
CILOXAN OINT .3%	3	
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	2	
<i>erythromycin (ophth) OINT 5mg/gm</i>	2	
<i>gatifloxacin (ophth) SOLN .5%</i>	3	
<i>gentamicin sulfate (ophth) SOLN .3%</i>	2	
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	3	QL (12 mL / 30 days)
<i>neo-polycin 5(3.5)mg-400unt-10000unt op oin</i>	3	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	3	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	3	
<i>ofloxacin (ophth) SOLN .3%</i>	2	
<i>polycin ophth oint</i>	2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium (ophth) OINT 10%; SOLN 10%</i>	3	
<i>tobramycin (ophth) SOLN .3%</i>	1	
<i>trifluridine SOLN 1%</i>	4	
XDEMVY SOLN .25%	5	NDS, NM, PA
ZIRGAN GEL .15%	4	

Drug Name	Drug Tier	Requirements/Limits
ANTI-INFLAMMATORIES		
<i>bromfenac sodium (ophth)</i> SOLN .07%	3	
<i>bromfenac sodium (ophth)</i> SOLN .075%	4	
<i>dexamethasone sodium phosphate (ophth)</i> SOLN .1%	3	
<i>diclofenac sodium (ophth)</i> SOLN .1%	2	
<i>difluprednate</i> EMUL .05%	4	
FLAREX SUSP .1%	4	
<i>fluorometholone (ophth)</i> SUSP .1%	3	
<i>flurbiprofen sodium</i> SOLN .03%	3	
<i>ketorolac tromethamine (ophth)</i> SOLN .4%	3	
<i>ketorolac tromethamine (ophth)</i> SOLN .5%	2	
LOTEMAX OINT .5%	3	
<i>loteprednol etabonate</i> SUSP .2%	3	
<i>prednisolone acetate (ophth)</i> SUSP 1%	3	
PREDNISOLONE SODIUM PHOSP SOLN 1%	3	
ANTIALLERGICS		
<i>azelastine hcl (ophth)</i> SOLN .05%	2	
<i>cromolyn sodium (ophth)</i> SOLN 4%	2	
ANTI GLAUCOMA		
<i>betaxolol hcl (ophth)</i> SOLN .5%	3	
BETOPTIC-S SUSP .25%	4	
<i>brimonidine tartrate</i> SOLN .2%	1	
<i>brimonidine tartrate</i> SOLN .15%	4	
<i>brinzolamide</i> SUSP 1%	4	
<i>carteolol hcl (ophth)</i> SOLN 1%	2	
COMBIGAN SOL 0.2/0.5%	3	
<i>dorzolamide hcl</i> SOLN 2%	1	
<i>dorzolamide hcl-timolol maleate ophth soln</i> 2-0.5%	1	
<i>latanoprost</i> SOLN .005%	1	
<i>levobunolol hcl</i> SOLN .5%	2	
LUMIGAN SOLN .01%	3	
<i>pilocarpine hcl</i> SOLN 1%, 2%, 4%	3	
RHOPRESSA SOLN .02%	4	
ROCKLATAN DRO	4	
SIMBRINZA SUS 1-0.2%	4	
<i>timolol maleate (ophth)</i> SOLG .25%, .5%	3	
<i>timolol maleate (ophth)</i> SOLN .25%, .5%	1	
<i>travoprost</i> SOLN .004%	2	
VYZULTA SOLN .024%	4	

Drug Name	Drug Tier	Requirements/Limits
MISCELLANEOUS		
ATROPINE SULFATE SOLN 1%	3	
<i>atropine sulfate (ophthalmic)</i> SOLN 1%	3	
CYSTARAN SOLN .37%	5	NDS, NM, PA
CYSTARAN SOLN .44%	5	NDS, NM, PA
EYSUVIS SUSP .25%	4	
MIEBO SOLN 1.338gm/ml	3	
<i>proparacaine hcl</i> SOLN .5%	3	
RESTASIS EMUL .05%	3	
RESTASIS MULTIDOSE EMUL .05%	3	
XIIDRA SOLN 5%	3	

OTIC

OTIC AGENTS

<i>acetic acid (otic)</i> SOLN 2%	3	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	4	
<i>flac</i> OIL .01%	3	
<i>fluocinolone acetonide (otic)</i> OIL .01%	3	
<i>neomycin-polymyxin-hc otic soln 1%</i>	3	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	3	
<i>ofloxacin (otic)</i> SOLN .3%	4	

RESPIRATORY

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS

ANORO ELLIPTA AER 62.5-25	3	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	3	QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	4	QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	3	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG	3	QL (60 blisters / 30 days)
TRELEGY AER ELLIPTA 200-62.5-25 MCG	3	QL (60 blisters / 30 days)

ANTICHOLINERGICS

ATROVENT HFA AERS 17mcg/act	4	QL (2 inhalers / 30 days)
INCRUSE ELLIPTA AEPB 62.5mcg/inh	3	QL (30 blisters / 30 days)
<i>ipratropium bromide</i> SOLN .02%	2	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>ipratropium bromide (nasal) SOLN .03%, .06%</i>	3	
ANTI-HISTAMINES		
<i>azelastine hcl SOLN .1%</i>	3	
<i>cetirizine hcl SOLN 5mg/5ml</i>	2	QL (300 mL / 30 days)
<i>cyproheptadine hcl SYRP 2mg/5ml; TABS 4mg</i>	3	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>diphenhydramine hcl SOLN 50mg/ml</i>	3	
<i>hydroxyzine hcl SOLN 25mg/ml, 50mg/ml</i>	4	PA; PA applies if 70 years and older
<i>hydroxyzine hcl SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg</i>	3	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>hydroxyzine pamoate CAPS 25mg, 50mg</i>	3	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>levocetirizine dihydrochloride SOLN 2.5mg/5ml</i>	4	QL (300 mL / 30 days)
<i>levocetirizine dihydrochloride TABS 5mg</i>	2	QL (30 tabs / 30 days)
BETA AGONISTS		
<i>albuterol sulfate AERS 108mcg/act</i>	3	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate AERS 108mcg/act</i>	3	QL (2 inhalers / 30 days); (generic of Proventil HFA)
<i>albuterol sulfate AERS 108mcg/act</i>	3	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate NEBU .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml</i>	3	B/D
<i>albuterol sulfate NEBU .083%</i>	2	B/D
<i>albuterol sulfate SYRP 2mg/5ml</i>	3	
<i>albuterol sulfate TABS 2mg, 4mg</i>	4	
<i>levalbuterol hcl NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml</i>	4	B/D
<i>levalbuterol tartrate AERO 45mcg/act</i>	3	QL (2 inhalers / 30 days), ST
SEREVENT DISKUS AEPB 50mcg/dose	3	QL (60 inhalations / 30 days)
<i>terbutaline sulfate TABS 2.5mg, 5mg</i>	4	

Drug Name	Drug Tier	Requirements/Limits
VENTOLIN HFA AERS 108mcg/act	3	QL (2 inhalers / 30 days)
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act	3	QL (6 inhalers / 30 days)
LEUKOTRIENE MODULATORS		
<i>montelukast sodium</i> CHEW 4mg, 5mg	2	
<i>montelukast sodium</i> PACK 4mg	4	
<i>montelukast sodium</i> TABS 10mg	1	
<i>zafirlukast</i> TABS 10mg, 20mg	3	
MISCELLANEOUS		
<i>acetylcysteine</i> SOLN 10%, 20%	4	B/D
ARALAST NP SOLR 500mg, 1000mg	5	NDS, NM, PA
BRONCHITOL CAPS 40mg	5	NDS, QL (560 caps / 28 days), NM, PA
<i>cromolyn sodium</i> NEBU 20mg/2ml	3	B/D
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.3ml, .3mg/0.3ml	3	(generic of EpiPen)
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.15ml, .3mg/0.3ml	3	(generic of Adrenaclick)
FASENRA SOSY 10mg/0.5ml, 30mg/ml	5	NDS, QL (1 syringe / 28 days), NM, PA
FASENRA PEN SOAJ 30mg/ml	5	NDS, QL (1 pen / 28 days), NM, PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg	5	NDS, QL (56 packets / 28 days), NM, PA
KALYDECO TABS 150mg	5	NDS, QL (60 tabs / 30 days), NM, PA
OFEV CAPS 100mg, 150mg	5	NDS, QL (60 caps / 30 days), NM, PA
ORKAMBI GRA 75-94MG	5	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 100-125	5	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 150-188	5	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI TAB 100-125	5	NDS, QL (112 tabs / 28 days), NM, PA
ORKAMBI TAB 200-125	5	NDS, QL (112 tabs / 28 days), NM, PA
<i>pirfenidone</i> CAPS 267mg	5	NDS, QL (270 caps / 30 days), NM, PA
<i>pirfenidone</i> TABS 267mg	5	NDS, QL (270 tabs / 30 days), NM, PA
<i>pirfenidone</i> TABS 534mg, 801mg	5	NDS, QL (90 tabs / 30 days), NM, PA
PROLASTIN-C SOLN 1000mg/20ml	5	NDS, NM, PA

Drug Name	Drug Tier	Requirements/Limits
PULMOZYME SOLN 2.5mg/2.5ml	5	NDS, NM, PA
<i>roflumilast</i> TABS 250mcg	4	QL (56 tabs / year)
<i>roflumilast</i> TABS 500mcg	4	QL (30 tabs / 30 days)
SYMDEKO TAB 50-75MG	5	NDS, QL (56 tabs / 28 days), NM, PA
SYMDEKO TAB 100-150	5	NDS, QL (56 tabs / 28 days), NM, PA
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	4	
<i>theophylline</i> ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg	4	
<i>theophylline</i> TB24 400mg, 600mg	3	
TRIKAFTA PAK 59.5MG	5	NDS, QL (56 packs / 28 days), NM, PA
TRIKAFTA PAK 75MG	5	NDS, QL (56 packs / 28 days), NM, PA
TRIKAFTA TAB 50-25-37.5MG & 75MG	5	NDS, QL (84 tabs / 28 days), NM, PA
TRIKAFTA TAB 100-50-75MG & 150MG	5	NDS, QL (84 tabs / 28 days), NM, PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml	5	NDS, QL (4 pens / 28 days), NM, PA
XOLAIR SOAJ 150mg/ml	5	NDS, QL (8 pens / 28 days), NM, PA
XOLAIR SOLR 150mg	5	NDS, QL (8 vials / 28 days), NM, PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml	5	NDS, QL (4 syringes / 28 days), NM, PA
XOLAIR SOSY 150mg/ml	5	NDS, QL (8 syringes / 28 days), NM, PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	5	NDS, NM, PA
NASAL STEROIDS		
<i>flunisolide (nasal)</i> SOLN .025%	3	QL (3 bottles / 30 days)
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	2	QL (1 bottle / 30 days)
XHANCE EXHU 93mcg/act	4	QL (32 mL / 30 days), PA
STEROID INHALANTS		
ALVESCO AERS 80mcg/act	4	QL (3 inhalers / 30 days)
ALVESCO AERS 160mcg/act	4	QL (2 inhalers / 30 days)
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	3	QL (30 inhalations / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>budesonide (inhalation) SUSP .25mg/2ml, .5mg/2ml</i>	4	B/D

STEROID/BETA-AGONIST COMBINATIONS

ADVAIR HFA AER 45/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	3	QL (1 inhaler / 30 days)
AIRSUPRA AER 90-80MCG	3	QL (3 inhalers / 30 days)
BREO ELLIPTA INH 50-25MCG	3	QL (60 blisters / 30 days)
BREO ELLIPTA INH 100-25	3	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	3	QL (60 blisters / 30 days)
<i>breyna</i>	3	QL (3 inhalers / 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	3	QL (3 inhalers / 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	3	QL (3 inhalers / 30 days)
DULERA AER 50-5MCG	4	QL (3 inhalers / 30 days)
DULERA AER 100-5MCG	4	QL (3 inhalers / 30 days)
DULERA AER 200-5MCG	4	QL (3 inhalers / 30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>wixela inhub</i>	3	QL (60 inhalations / 30 days)

TOPICAL

DERMATOLOGY, ACNE

<i>acutane CAPS 10mg, 20mg, 30mg, 40mg</i>	4	PA
<i>amnesteem CAPS 10mg, 20mg, 40mg</i>	4	PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	4	QL (46.6 gm / 30 days)
<i>claravis CAPS 10mg, 20mg, 30mg, 40mg</i>	4	PA
<i>clindamycin phosphate (topical) GEL 1%</i>	3	QL (75 mL / 30 days)
<i>clindamycin phosphate (topical) LOTN 1%; SOLN 1%</i>	3	QL (60 mL / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>ery</i> PADS 2%	3	QL (60 pledgets / 30 days)
<i>erythromycin (acne aid)</i> GEL 2%	3	QL (60 gm / 30 days)
<i>erythromycin (acne aid)</i> SOLN 2%	3	QL (60 mL / 30 days)
<i>isotretinoin</i> CAPS 10mg, 20mg, 30mg, 40mg	4	PA
<i>sulfacetamide sodium (acne)</i> LOTN 10%	4	QL (118 mL / 30 days)
<i>tretinoin</i> CREA .025%, .05%, .1%; GEL .01%, .025%	4	QL (45 gm / 30 days), PA
<i>twice-daily clindamycin phosphate (topical)</i> GEL 1%	3	QL (75 gm / 30 days)
<i>zenatane</i> CAPS 10mg, 20mg, 30mg, 40mg	4	PA
DERMATOLOGY, ANTIBIOTICS		
<i>gentamicin sulfate (topical)</i> CREA .1%; OINT .1%	3	QL (30 gm / 30 days)
<i>mupirocin</i> OINT 2%	2	QL (220 gm / 30 days)
<i>silver sulfadiazine</i> CREA 1%	2	
<i>ssd</i> CREA 1%	2	
SULFAMYLON CREA 85mg/gm	4	QL (453.6 gm / 30 days)
DERMATOLOGY, ANTIFUNGALS		
<i>ciclopirox</i> SHAM 1%	3	QL (120 mL / 30 days)
<i>ciclopirox olamine</i> CREA .77%	3	QL (90 gm / 30 days)
<i>ciclopirox olamine</i> SUSP .77%	3	QL (60 mL / 30 days)
<i>clotrimazole (topical)</i> CREA 1%	2	QL (45 gm / 30 days)
<i>clotrimazole (topical)</i> SOLN 1%	3	QL (60 mL / 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	3	QL (45 gm / 30 days)
<i>econazole nitrate</i> CREA 1%	3	QL (85 gm / 30 days)
<i>ketoconazole (topical)</i> CREA 2%	3	QL (60 gm / 30 days)
<i>ketoconazole (topical)</i> SHAM 2%	2	QL (120 mL / 30 days)
<i>klayesta</i> POWD 100000unit/gm	3	QL (60 gm / 30 days)
<i>nyamyc</i> POWD 100000unit/gm	3	QL (60 gm / 30 days)
<i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm	2	QL (30 gm / 30 days)
<i>nystatin (topical)</i> POWD 100000unit/gm	3	QL (60 gm / 30 days)
<i>nystop</i> POWD 100000unit/gm	3	QL (60 gm / 30 days)
<i>selenium sulfide</i> LOTN 2.5%	2	
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	4	PA
<i>calcipotriene</i> CREA .005%; OINT .005%	4	QL (120 gm / 30 days), PA
<i>calcipotriene</i> SOLN .005%	3	QL (120 mL / 30 days), PA
<i>calcitrene</i> OINT .005%	4	QL (120 gm / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
ENSTILAR AER	5	NDS, QL (120 gm / 30 days), PA
<i>tazarotene</i> CREA .05%, .1%	3	QL (60 gm / 30 days), PA
TAZORAC CREA .05%	4	QL (60 gm / 30 days), PA

DERMATOLOGY, CORTICOSTEROIDS

<i>ala-cort</i> CREA 1%	1	
<i>alclometasone dipropionate</i> CREA .05%; OINT .05%	3	QL (60 gm / 30 days)
<i>betamethasone dipropionate (topical)</i> CREA .05%	3	QL (120 gm / 30 days)
<i>betamethasone dipropionate (topical)</i> LOTN .05%	3	QL (120 mL / 30 days)
<i>betamethasone dipropionate (topical)</i> OINT .05%	4	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented</i> CREA .05%	2	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented</i> GEL .05%; OINT .05%	4	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented</i> LOTN .05%	4	QL (120 mL / 30 days)
<i>betamethasone valerate</i> CREA .1%; OINT .1%	3	QL (120 gm / 30 days)
<i>betamethasone valerate</i> LOTN .1%	3	QL (120 mL / 30 days)
<i>clobetasol propionate</i> CREA .05%; GEL .05%; OINT .05%	4	QL (60 gm / 30 days)
<i>clobetasol propionate</i> SOLN .05%	4	QL (50 mL / 30 days)
<i>clobetasol propionate e</i> CREA .05%	4	QL (60 gm / 30 days)
<i>fluocinolone acetonide</i> CREA .01%	4	QL (60 gm / 30 days)
<i>fluocinolone acetonide</i> CREA .025%	4	QL (120 gm / 30 days)
<i>fluocinolone acetonide</i> OIL .01%	3	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide</i> OINT .025%	3	QL (120 gm / 30 days)
<i>fluocinolone acetonide</i> SOLN .01%	4	QL (60 mL / 30 days)
<i>fluocinonide</i> CREA .05%	3	QL (120 gm / 30 days)
<i>fluocinonide</i> GEL .05%; OINT .05%	4	QL (60 gm / 30 days)
<i>fluocinonide</i> SOLN .05%	3	QL (60 mL / 30 days)
<i>fluocinonide emulsified base</i> CREA .05%	3	QL (120 gm / 30 days)
<i>fluticasone propionate</i> CREA .05%; OINT .005%	3	
<i>halobetasol propionate</i> CREA .05%; OINT .05%	4	QL (50 gm / 30 days)
<i>hydrocortisone (topical)</i> CREA 1%	1	
<i>hydrocortisone (topical)</i> CREA 2.5%; LOTN 2.5%; OINT 2.5%	2	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone (topical)</i> OINT 1%	2	QL (30 gm / 30 days)
<i>hydrocortisone valerate</i> CREA .2%	3	QL (60 gm / 30 days)
<i>mometasone furoate</i> CREA .1%; OINT .1%; SOLN .1%	3	
<i>triamcinolone acetonide (topical)</i> CREA .025%, .1%, .5%	2	QL (454 gm / 30 days)
<i>triamcinolone acetonide (topical)</i> LOTN .025%, .1%	3	
<i>triamcinolone acetonide (topical)</i> OINT .025%, .1%, .5%	2	
<i>triderm</i> CREA .5%	2	QL (454 gm / 30 days)

DERMATOLOGY, LOCAL ANESTHETICS

<i>glydo</i> PRSY 2%	3	QL (60 mL / 30 days), PA
<i>lidocaine</i> OINT 5%	4	QL (50 gm / 30 days), PA
<i>lidocaine</i> PTCH 5%	4	QL (3 patches / 1 day), PA
<i>lidocaine hcl</i> SOLN 4%	3	QL (50 mL / 30 days), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	2	B/D, QL (30 gm / 30 days)
<i>lidocan</i> PTCH 5%	4	QL (3 patches / 1 day), PA
<i>tridacaine ii</i> PTCH 5%	4	QL (3 patches / 1 day), PA

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

<i>bexarotene (topical)</i> GEL 1%	5	NDS, QL (60 gm / 30 days), NM, PA
<i>diclofenac sodium (topical)</i> SOLN 1.5%	3	QL (300 mL / 28 days)
<i>diclofenac sodium (topical)</i> SOLN 2%	5	NDS, QL (224 gm / 28 days), PA
<i>doxepin hcl (antipruritic)</i> CREA 5%	4	QL (45 gm / 30 days), PA
<i>fluorouracil (topical)</i> CREA 5%	4	QL (40 gm / 30 days)
<i>fluorouracil (topical)</i> SOLN 2%, 5%	3	QL (10 mL / 30 days)
<i>hydrocortisone (rectal)</i> CREA 1%, 2.5%	3	
<i>imiquimod</i> CREA 5%	3	QL (24 packets / 30 days)
<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%	2	
<i>metronidazole (topical)</i> CREA .75%; GEL .75%	3	QL (45 gm / 30 days)
<i>metronidazole (topical)</i> LOTN .75%	4	QL (59 mL / 30 days)
<i>nitroglycerin (intra-anal)</i> OINT .4%	4	QL (30 gm / 30 days)

Drug Name	Drug Tier	Requirements/Limits
PANRETIN GEL .1%	5	NDS, QL (60 gm / 30 days), PA
PENNSAID SOLN 2%	5	NDS, QL (224 gm / 28 days), PA
<i>pimecrolimus</i> CREA 1%	4	QL (100 gm / 30 days), PA
<i>podofilox</i> SOLN .5%	3	QL (7 mL / 28 days)
<i>procto-med hc</i> CREA 2.5%	3	
<i>proctocort</i> CREA 1%	3	
<i>proctosol hc</i> CREA 2.5%	3	
<i>proctozone-hc</i> CREA 2.5%	3	
<i>tacrolimus (topical)</i> OINT .03%, .1%	4	QL (100 gm / 30 days), PA
VALCHLOR GEL .016%	5	NDS, QL (60 gm / 30 days), NM, PA
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>malathion</i> LOTN .5%	4	QL (59 mL / 30 days)
<i>permethrin</i> CREA 5%	3	QL (60 gm / 30 days)
DERMATOLOGY, WOUND CARE AGENTS		
REGRANEX GEL .01%	5	NDS, QL (30 gm / 30 days), PA
SANTYL OINT 250unit/gm	4	QL (180 gm / 30 days)
<i>sodium chloride (gu irrigant)</i> SOLN .9%	3	
<i>water for irrigation, sterile irrigation soln</i>	2	
MOUTH/THROAT/DENTAL AGENTS		
<i>cevimeline hcl</i> CAPS 30mg	4	
<i>chlorhexidine gluconate (mouth-throat)</i> SOLN .12%	1	
<i>clotrimazole</i> TROC 10mg	3	QL (150 lozenges / 30 days)
<i>kourzeq</i> PSTE .1%	3	
<i>lidocaine hcl (mouth-throat)</i> SOLN 2%	2	
<i>nystatin (mouth-throat)</i> SUSP 100000unit/ml	2	
<i>periogard</i> SOLN .12%	1	
<i>pilocarpine hcl (oral)</i> TABS 5mg, 7.5mg	3	
<i>triamcinolone acetonide (mouth)</i> PSTE .1%	3	

Index

A	
<i>abacavir sulfate</i>	6
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	7
ABELCET	5
ABILIFY ASIMTUFII	35
ABILIFY MAINTENA	35
<i>abiraterone acetate</i>	13
ABRYSVO	69
<i>acamprosate calcium</i>	47
<i>acarbose</i>	48
<i>accutane</i>	79
<i>acebutolol hcl</i>	29
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	2
<i>acetaminophen w/ codeine tab 300-15 mg</i>	2
<i>acetaminophen w/ codeine tab 300-30 mg</i>	2
<i>acetaminophen w/ codeine tab 300-60 mg</i>	2
<i>acetazolamide</i>	30
<i>acetic acid</i>	63
<i>acetic acid (otic)</i>	75
<i>acetylcysteine</i>	77
<i>acitretin</i>	80
ACTHIB INJ	69
ACTIMMUNE	68
<i>acyclovir</i>	8
<i>acyclovir sodium</i>	8
ADACEL INJ.....	69
ADALIMUMAB-AACF (2 PEN)	66
ADALIMUMAB-AACF (2 SYRING).....	66
ADALIMUMAB-AACF STARTER P	66
<i>adefovir dipivoxil</i>	8
ADMELOG	49
ADMELOG SOLOSTAR	49
ADVAIR HFA AER 115/21	79
ADVAIR HFA AER 230/21	79
ADVAIR HFA AER 45/21	79
<i>afirmelle</i>	52
AIMOVIG	44
AIRSUPRA AER 90-80MCG.....	79
AKEEGA TAB 100/500.....	13
AKEEGA TAB 50/500MG	13
<i>ala-cort</i>	81
<i>albendazole</i>	3
<i>albuterol sulfate</i>	76
<i>alclometasone dipropionate</i>	81
ALCOHOL SWABS: BD- EMBECTA/MHC/RUGBY.....	49
ALDURAZYME	58
ALECENSA	15
<i>alendronate sodium</i>	51
<i>alfuzosin hcl</i>	63
<i>aliskiren fumarate</i>	30
<i>allopurinol</i>	1
<i>alose tron hcl</i>	62
<i>alprazolam</i>	32
<i>altavera</i>	52
ALUNBRIG.....	15
ALUNBRIG PAK	15
ALVAIZ	65
ALVESCO	78
<i>alyacen 1/35</i>	52
<i>alyacen 7/7/7</i>	52
ALYGLO	68
<i>alyq</i>	31
<i>amantadine hcl</i>	34
<i>ambrisentan</i>	31
<i>amethia</i>	52
<i>amethyst</i>	52
<i>amikacin sulfate</i>	3
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	30
<i>amiloride hcl</i>	30
<i>amiodarone hcl</i>	27
<i>amitriptyline hcl</i>	32
<i>amlodipine besylate</i>	29
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	24
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	24
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	23
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	23
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	23
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	23

<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	25	<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	42
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	25	<i>amphetamine-dextroamphetamine tab 10 mg</i>	43
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	25	<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	43
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	25	<i>amphetamine-dextroamphetamine tab 15 mg</i>	43
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	25	<i>amphetamine-dextroamphetamine tab 20 mg</i>	43
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	25	<i>amphetamine-dextroamphetamine tab 30 mg</i>	43
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	25	<i>amphetamine-dextroamphetamine tab 5 mg</i>	42
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	25	<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	42
<i>amnestem</i>	79	<i>amphotericin b</i>	5
<i>amoxapine</i>	32	<i>amphotericin b liposome</i>	5
<i>amoxicillin</i>	10	<i>ampicillin</i>	11
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	10	<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	11
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	10	<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	11
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	11	<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	11
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	11	<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	11
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	11	<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	11
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	11	<i>ampicillin sodium</i>	11
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	11	<i>anagrelide hcl</i>	65
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	11	<i>anastrozole</i>	13
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	11	<i>ANORO ELLIPT AER 62.5-25</i>	75
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	42	<i>aprepitant</i>	60
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	42	<i>aprepitant capsule therapy pack 80 & 125 mg</i>	60
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	42	<i>apri</i>	52
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	42	<i>APTIOM</i>	38
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	42	<i>APTIVUS</i>	6
		<i>ARALAST NP</i>	77
		<i>aranelle</i>	52
		<i>ARCALYST</i>	68
		<i>AREXVY</i>	69
		<i>ARIKAYCE</i>	3
		<i>aripiprazole</i>	35
		<i>ARISTADA</i>	35
		<i>ARISTADA INITIO</i>	35

<i>armodafinil</i>	46	<i>bacitracin-polymyxin-neomycin-hc</i>	
ARNUIITY ELLIPTA.....	78	<i>ophth oint 1%</i>	73
<i>asenapine maleate</i>	35	<i>baclofen</i>	46
<i>ashlyna</i>	52	BAFIERTAM	45
<i>aspirin-dipyridamole cap er 12hr 25-</i>		<i>balsalazide disodium</i>	61
<i>200 mg</i>	65	BALVERSA.....	15
ASTAGRAF XL.....	69	<i>balziva</i>	52
<i>atazanavir sulfate</i>	6	BARACLUDGE	8
<i>atenolol</i>	29	BASAGLAR KWIKPEN	49
<i>atenolol & chlorthalidone tab 100-25</i>		BCG VACCINE.....	69
<i>mg</i>	28	<i>benazepril & hydrochlorothiazide tab</i>	
<i>atenolol & chlorthalidone tab 50-25 mg</i>		<i>10-12.5 mg</i>	24
.....	28	<i>benazepril & hydrochlorothiazide tab</i>	
<i>atomoxetine hcl</i>	43	<i>20-12.5 mg</i>	24
<i>atorvastatin calcium</i>	27	<i>benazepril & hydrochlorothiazide tab</i>	
<i>atovaquone</i>	3	<i>20-25 mg</i>	24
<i>atovaquone-proguanil hcl tab 250-100</i>		<i>benazepril & hydrochlorothiazide tab 5-</i>	
<i>mg</i>	5	<i>6.25mg</i>	24
<i>atovaquone-proguanil hcl tab 62.5-25</i>		<i>benazepril hcl</i>	24
<i>mg</i>	5	BENDAMUSTINE HYDROCHLORID.....	12
ATROPINE SULFATE.....	75	BENDEKA.....	12
<i>atropine sulfate (ophthalmic)</i>	75	BENLYSTA.....	69
ATROVENT HFA.....	75	<i>benzoyl peroxide-erythromycin gel 5-</i>	
<i>aubra eq</i>	52	<i>3%</i>	79
AUGTYRO.....	15	<i>benztropine mesylate</i>	34
<i>aurovela 1/20</i>	52	BERINERT	65
<i>aurovela 24 fe</i>	52	BESIVANCE	73
<i>aurovela fe 1/20</i>	52	BESREMI	14
<i>aurovela fe 1.5/30</i>	52	<i>betaine powder for oral solution</i>	58
AUSTEDO.....	45	<i>betamethasone dipropionate (topical)</i>	
AUSTEDO XR.....	45	.....	81
AUSTEDO XR TAB TITR KIT	45	<i>betamethasone dipropionate</i>	
AUVELITY TAB 45-105MG.....	33	<i>augmented</i>	81
<i>aviane</i>	52	<i>betamethasone valerate</i>	81
<i>ayuna</i>	52	BETASERON	45
AYVAKIT	15	<i>betaxolol hcl</i>	29
<i>azacitidine</i>	13	<i>betaxolol hcl (ophth)</i>	74
<i>azathioprine</i>	69	<i>bethanechol chloride</i>	63
<i>azelastine hcl</i>	76	BETOPTIC-S	74
<i>azelastine hcl (ophth)</i>	74	BEVESPI AER 9-4.8MCG.....	75
<i>azithromycin</i>	10	<i>bexarotene</i>	14
<i>aztreonam</i>	3	<i>bexarotene (topical)</i>	82
<i>azurette</i>	52	BEXSERO INJ	69
B		<i>bicalutamide</i>	13
<i>bacitracin (ophthalmic)</i>	73	BICILLIN L-A	11
<i>bacitracin-polymyxin b ophth oint</i>	73	BIKTARVY TAB 30-120-15 MG	7
		BIKTARVY TAB 50-200-25 MG	7

<i>bisoprolol & hydrochlorothiazide tab</i> 10-6.25 mg	28	<i>buprenorphine hcl-naloxone hcl sl film</i> 8-2 mg (base equiv)	47
<i>bisoprolol & hydrochlorothiazide tab</i> 2.5-6.25 mg	28	<i>buprenorphine hcl-naloxone hcl sl tab</i> 2-0.5 mg (base equiv)	47
<i>bisoprolol & hydrochlorothiazide tab</i> 5- 6.25 mg	28	<i>buprenorphine hcl-naloxone hcl sl tab</i> 8-2 mg (base equiv)	47
<i>bisoprolol fumarate</i>	29	<i>bupropion hcl</i>	33
BIVIGAM.....	68	<i>bupropion hcl (smoking deterrent)</i> ..	47
<i>blisovi 24 fe</i>	52	<i>bupirone hcl</i>	32
<i>blisovi fe 1.5/30</i>	52	<i>butorphanol tartrate</i>	2
BOOSTRIX INJ	69	C	
<i>bortezomib</i>	15	<i>cabergoline</i>	58
BORTEZOMIB	15	CABOMETYX	16
<i>bosentan</i>	31	<i>calcipotriene</i>	80
BOSULIF	16	<i>calcitonin (salmon) spray</i>	51
BRAFTOVI	16	<i>calcitrene</i>	80
BREO ELLIPTA INH 100-25	79	<i>calcitriol</i>	60
BREO ELLIPTA INH 200-25	79	<i>calcitriol (oral)</i>	60
BREO ELLIPTA INH 50-25MCG	79	CALQUENCE	16
<i>breyna</i>	79	<i>camila</i>	52
BREZTRI AERO AER SPHERE	75	<i>camrese</i>	52
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	75	<i>camrese lo</i>	52
<i>briellyn</i>	52	<i>candesartan cilexetil</i>	27
BRILINTA	65	<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 16-12.5 mg</i>	25
<i>brimonidine tartrate</i>	74	<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 32-12.5 mg</i>	25
<i>brinzolamide</i>	74	<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 32-25 mg</i> .	25
BRIVIACT.....	38	CAPLYTA.....	35
<i>bromfenac sodium (ophth)</i>	74	CAPRELSA.....	16
<i>bromocriptine mesylate</i>	34	<i>captopril</i>	24
BRONCHITOL.....	77	<i>captopril & hydrochlorothiazide tab 25-</i> <i>15 mg</i>	24
BRUKINSA	16	<i>captopril & hydrochlorothiazide tab 25-</i> <i>25 mg</i>	24
<i>budesonide</i>	61	<i>captopril & hydrochlorothiazide tab 50-</i> <i>15 mg</i>	24
<i>budesonide (inhalation)</i>	79	<i>captopril & hydrochlorothiazide tab 50-</i> <i>25 mg</i>	24
<i>budesonide-formoterol fumarate dihyd</i> <i>aerosol 160-4.5 mcg/act</i>	79	<i>carb/levo orally disintegrating tab 10-</i> <i>100mg</i>	34
<i>budesonide-formoterol fumarate dihyd</i> <i>aerosol 80-4.5 mcg/act</i>	79	<i>carb/levo orally disintegrating tab 25-</i> <i>100mg</i>	34
<i>bumetanide</i>	30		
<i>buprenorphine hcl</i>	47		
<i>buprenorphine hcl-naloxone hcl sl film</i> 12-3 mg (base equiv)	47		
<i>buprenorphine hcl-naloxone hcl sl film</i> 2-0.5 mg (base equiv)	47		
<i>buprenorphine hcl-naloxone hcl sl film</i> 4-1 mg (base equiv)	47		

<i>carb/levo orally disintegrating tab 25-250mg</i>	34	<i>ceftriaxone sodium</i>	9
<i>carbamazepine</i>	38	<i>cefuroxime axetil</i>	9
<i>carbidopa & levodopa tab 10-100 mg</i>	34	<i>cefuroxime sodium</i>	10
<i>carbidopa & levodopa tab 25-100 mg</i>	34	<i>celecoxib</i>	1
<i>carbidopa & levodopa tab 25-250 mg</i>	34	<i>cephalexin</i>	10
<i>carbidopa & levodopa tab er 25-100 mg</i>	34	CEQR SIMPL KIT PATCH 2U (3-DAY)	49
<i>carbidopa & levodopa tab er 50-200 mg</i>	34	CEQR SIMPL KIT PATCH 2U (4-DAY)	49
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	34	CERDELGA	58
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	34	CEREZYME	58
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	34	<i>cetirizine hcl</i>	76
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	35	<i>cevimeline hcl</i>	83
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	35	<i>chateal eq</i>	52
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	35	CHEMET.....	52
<i>carboplatin</i>	12	<i>chlorhexidine gluconate (mouth-throat)</i>	83
<i>carglumic acid</i>	58	<i>chloroquine phosphate</i>	5
<i>carisoprodol</i>	46	<i>chlorpromazine hcl</i>	35
<i>carteolol hcl (ophth)</i>	74	<i>chlorthalidone</i>	30
<i>cartia xt</i>	29	<i>cholestyramine</i>	28
<i>carvedilol</i>	29	<i>cholestyramine light</i>	28
<i>caspofungin acetate</i>	5	<i>ciclopirox</i>	80
CAYSTON.....	3	<i>ciclopirox olamine</i>	80
<i>cefaclor</i>	9	<i>cilostazol</i>	65
<i>cefadroxil</i>	9	CILOXAN.....	73
CEFAZOLIN	9	CIMDUO TAB 300-300	7
CEFAZOLIN/DEX SOL 1GM/50ML-4%..	9	<i>cinacalcet hcl</i>	58
CEFAZOLIN/DEX SOL 2GM/50ML-3%..	9	<i>ciprofloxacin 200 mg/100ml in d5w</i> ..	10
CEFAZOLIN/DEX SOL 3GM/150ML-4%	9	<i>ciprofloxacin 400 mg/200ml in d5w</i> ..	10
CEFAZOLIN INJ 1GM/50ML.....	9	<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	75
<i>cefazolin sodium</i>	9	<i>ciprofloxacin hcl</i>	10
CEFAZOLIN SOLN 2GM/100ML-4%	9	<i>ciprofloxacin hcl (ophth)</i>	73
<i>cefdinir</i>	9	<i>cisplatin</i>	12
<i>cefepime hcl</i>	9	<i>cialopram hydrobromide</i>	33
<i>cefexime</i>	9	<i>claravis</i>	79
<i>cefotetan disodium</i>	9	<i>clarithromycin</i>	10
<i>cefoxitin sodium</i>	9	<i>clindamycin hcl</i>	3
<i>cefpodoxime proxetil</i>	9	<i>clindamycin palmitate hydrochloride</i> ...	3
<i>cefprozil</i>	9	<i>clindamycin phosphate</i>	3
<i>ceftazidime</i>	9	<i>clindamycin phosphate (topical)</i>	79
		<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	3
		<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	3

<i>clindamycin phosphate in d5w iv soln</i>		<i>constulose</i>	62
900 mg/50ml	3	COPAXONE.....	45
<i>clindamycin phosphate vaginal</i>	64	COPIKTRA	16
CLINDMYC/NAC INJ 300/50ML.....	3	CORLANOR.....	30
CLINDMYC/NAC INJ 600/50ML.....	3	COSENTYX	66
CLINDMYC/NAC INJ 900/50ML.....	3	COSENTYX SENSOREADY PEN.....	66
CLINIMIX INJ 4.25/D10	72	COSENTYX UNOREADY.....	66
CLINIMIX INJ 4.25/D5W	72	COTELLIC	16
CLINIMIX INJ 5%/D15W	72	CREON CAP 12000UNT	62
CLINIMIX INJ 5%/D20W	72	CREON CAP 24000UNT	62
CLINIMIX INJ 6/5	72	CREON CAP 3000UNIT	62
CLINIMIX INJ 8/10	72	CREON CAP 36000UNT	62
CLINIMIX INJ 8/14	72	CREON CAP 6000UNIT	62
<i>clinisol sf 15%</i>	72	<i>cromolyn sodium</i>	77
CLINOLIPID EMU 20%	72	<i>cromolyn sodium (mastocytosis)</i>	62
<i>clobazam</i>	38	<i>cromolyn sodium (ophth)</i>	74
<i>clobetasol propionate</i>	81	<i>cryselle-28</i>	52
<i>clobetasol propionate e</i>	81	<i>cyclobenzaprine hcl</i>	46
<i>clomipramine hcl</i>	33	<i>cyclophosphamide</i>	12
<i>clonazepam</i>	38	CYCLOPHOSPHAMIDE	12
<i>clonidine</i>	30	CYCLOPHOSPHAMIDE MONOHYDR....	12
<i>clonidine hcl</i>	30	<i>cycloserine</i>	8
<i>clopidogrel bisulfate</i>	65	<i>cyclosporine</i>	69
<i>clorazepate dipotassium</i>	39	<i>cyclosporine modified (for</i>	
<i>clotrimazole</i>	83	<i>microemulsion)</i>	69
<i>clotrimazole (topical)</i>	80	<i>cyproheptadine hcl</i>	76
<i>clotrimazole w/ betamethasone cream</i>		<i>cyred eq</i>	52
1-0.05%	80	CYSTADROPS	75
<i>clozapine</i>	35, 36	CYSTAGON.....	58
COARTEM TAB 20-120MG	6	CYSTARAN	75
COBENFY CAP 100-20MG	36	<i>cytarabine</i>	13
COBENFY CAP 125-30MG	36	D	
COBENFY CAP 50-20MG	36	D10W/NACL INJ 0.2%	70
COBENFY STRT CAP PACK	36	D2.5W/NACL INJ 0.45%.....	70
<i>colchicine</i>	1	<i>dabigatran etexilate mesylate</i>	64
<i>colchicine w/ probenecid tab 0.5-500</i>		<i>dalfampridine</i>	45
<i>mg</i>	1	<i>danazol</i>	47
<i>colesevelam hcl</i>	28	<i>dantrolene sodium</i>	46
<i>colestipol hcl</i>	28	DANZITEN.....	16
<i>colistimethate sodium</i>	3	<i>dapsone</i>	3
COMBIGAN SOL 0.2/0.5%	74	DAPTACEL INJ	69
COMBIVENT AER 20-100.....	75	<i>daptomycin</i>	3
COMETRIQ (60MG DOSE).....	16	DAPTOMYCIN	3
COMETRIQ KIT 100MG.....	16	<i>darunavir</i>	6
COMETRIQ KIT 140MG.....	16	<i>dasatinib</i>	16
COMPLERA TAB	7	<i>dasetta 1/35</i>	52
<i>compro</i>	60	<i>dasetta 7/7/7</i>	52

DAURISMO.....	16	<i>diclofenac potassium</i>	1
<i>daysee</i>	52	<i>diclofenac sodium</i>	1
DAYVIGO	43	<i>diclofenac sodium (ophth)</i>	74
<i>deblitane</i>	53	<i>diclofenac sodium (topical)</i>	82
<i>deferasirox</i>	52	<i>dicloxacillin sodium</i>	11
DELSTRIGO TAB	7	<i>dicyclomine hcl</i>	61
DENGVAXIA SUS.....	69	DIFICID	10
DEPO-SUBQ PROVERA 104	53	<i>diflunisal</i>	1
<i>depo-testosterone</i>	47	<i>difluprednate</i>	74
DESCOVY TAB 120-15MG.....	7	<i>digoxin</i>	30
DESCOVY TAB 200/25MG.....	7	<i>dihydroergotamine mesylate</i>	44
<i>desipramine hcl</i>	33	DILANTIN	39
<i>desmopressin acetate</i>	58	<i>diltiazem hcl</i>	29
<i>desmopressin acetate spray</i>	58	<i>diltiazem hcl coated beads</i>	29
<i>desmopressin acetate spray</i> <i>refrigerated</i>	58	<i>diltiazem hcl extended release beads</i>	29
<i>desogest-eth estrad & eth estrad tab</i> <i>0.15-0.02/0.01 mg(21/5)</i>	53	<i>dilt-xr</i>	29
<i>desvenlafaxine succinate</i>	33	DIP/TET PED INJ 25-5LFU	69
<i>dexamethasone</i>	57	<i>diphenhydramine hcl</i>	76
DEXAMETHASONE INTENSOL.....	57	<i>diphenoxylate w/ atropine liq 2.5-0.025</i> <i>mg/5ml</i>	62
<i>dexamethasone sodium phosphate</i>	57	<i>diphenoxylate w/ atropine tab 2.5-</i> <i>0.025 mg</i>	62
<i>dexamethasone sodium phosphate</i> <i>(ophth)</i>	74	<i>dipyridamole</i>	65
<i>dexmethylphenidate hcl</i>	43	<i>disopyramide phosphate</i>	27
<i>dextrose</i>	72	<i>disulfiram</i>	47
<i>dextrose 10% w/ sodium chloride</i> <i>0.45%</i>	71	<i>divalproex sodium</i>	39
<i>dextrose 2.5% w/ sodium chloride</i> <i>0.45%</i>	70	<i>docetaxel</i>	15
<i>dextrose 5% in lactated ringers</i>	71	DOCETAXEL	15
<i>dextrose 5% w/ sodium chloride 0.2%</i>	71	DOCIVYX	15
<i>dextrose 5% w/ sodium chloride</i> <i>0.225%</i>	71	<i>dofetilide</i>	27
<i>dextrose 5% w/ sodium chloride 0.3%</i>	71	<i>dolishale</i>	53
<i>dextrose 5% w/ sodium chloride 0.45%</i>	71	<i>donepezil hydrochloride</i>	32
<i>dextrose 5% w/ sodium chloride 0.9%</i>	71	DOPTELET.....	65
DIACOMIT.....	39	<i>dorzolamide hcl</i>	74
<i>diazepam</i>	39	<i>dorzolamide hcl-timolol maleate ophth</i> <i>soln 2-0.5%</i>	74
<i>diazepam (anticonvulsant)</i>	39	<i>dotti</i>	57
<i>diazepam inj</i>	39	DOVATO TAB 50-300MG	7
<i>diazepam intensol</i>	39	<i>doxazosin mesylate</i>	25
<i>diazoxide</i>	58	<i>doxepin hcl</i>	33
		<i>doxepin hcl (antipruritic)</i>	82
		<i>doxepin hcl (sleep)</i>	43
		<i>doxorubicin hcl</i>	14
		<i>doxorubicin hcl liposomal</i>	14
		<i>doxy 100</i>	12
		<i>doxycycline (monohydrate)</i>	12
		<i>doxycycline hyclate</i>	12

DRIZALMA SPRINKLE.....	33	EMVERM	33
<i>dronabinol</i>	60	<i>emzahn</i>	53
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	53	<i>enalapril maleate</i>	24
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	53	<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	24
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i> 53		<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	24
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i> 53		ENBREL	66
<i>droxidopa</i>	31	ENBREL MINI.....	66
DULERA AER 100-5MCG.....	79	ENBREL SURECLICK	66
DULERA AER 200-5MCG.....	79	<i>endocet tab 10-325mg</i>	2
DULERA AER 50-5MCG.....	79	<i>endocet tab 2.5-325mg</i>	2
<i>duloxetine hcl</i>	33	<i>endocet tab 5-325mg</i>	2
DUPIXENT	66	<i>endocet tab 7.5-325mg</i>	2
<i>dutasteride</i>	63	ENGERIX-B	69
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	63	<i>enilloring</i>	53
E		<i>enoxaparin sodium</i>	64
<i>e.e.s. 400</i>	10	<i>enpresse-28</i>	53
<i>econazole nitrate</i>	80	<i>enskyce</i>	53
EDURANT	6	ENSTILAR AER.....	81
<i>efavirenz</i>	6	<i>entacapone</i>	35
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	7	<i>entecavir</i>	8
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	7	ENTRESTO CAP 15-16MG	25
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	7	ENTRESTO CAP 6-6MG.....	25
ELIGARD.....	13	ENTRESTO TAB 24-26MG	25
<i>elinest</i>	53	ENTRESTO TAB 49-51MG	25
ELIQUIS	64	ENTRESTO TAB 97-103MG	25
ELIQUIS STARTER PACK	64	<i>enulose</i>	62
<i>eluryng</i>	53	EPCLUSA PAK 150-37.5	8
EMGALITY	44	EPCLUSA PAK 200-50MG	8
EMSAM	33	EPCLUSA TAB 200-50MG	8
<i>emtricitabine</i>	6	EPCLUSA TAB 400-100	8
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	7	EPIDIOLEX	39
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	7	<i>epinephrine (anaphylaxis)</i>	31, 77
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	7	<i>epitol</i>	39
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	7	<i>eplerenone</i>	25
EMTRIVA	6	EPRONTIA	39
		<i>ergotamine w/ caffeine tab 1-100 mg</i>	44
		ERIVEDGE.....	16
		ERLEADA	13
		<i>erlotinib hcl</i>	16, 17
		<i>errin</i>	53
		<i>ertapenem sodium</i>	3
		<i>ery</i>	80
		<i>ery-tab</i>	10
		ERYTHROCIN LACTOBIONATE	10

<i>erythromycin (acne aid)</i>	80	FANAPT PAK	36
<i>erythromycin (ophth)</i>	73	FARXIGA.....	48
<i>erythromycin base</i>	10	FASENRA	77
<i>erythromycin ethylsuccinate</i>	10	FASENRA PEN.....	77
<i>erythromycin lactobionate</i>	10	<i>felbamate</i>	39
<i>escitalopram oxalate</i>	33	<i>felodipine</i>	29
<i>esomeprazole magnesium</i>	63	<i>fenofibrate</i>	27
<i>estarylla</i>	53	<i>fenofibrate micronized</i>	27
<i>estradiol</i>	57	<i>fentanyl</i>	1
<i>estradiol & norethindrone acetate tab</i> <i>0.5-0.1 mg</i>	57	<i>fesoterodine fumarate</i>	64
<i>estradiol & norethindrone acetate tab</i> <i>1-0.5 mg</i>	57	FETZIMA.....	33
<i>estradiol vaginal</i>	57	FETZIMA CAP TITRATIO	33
<i>estradiol valerate</i>	57	FIASP	49
<i>eszopiclone</i>	43	FIASP FLEXTOUCH	50
<i>ethambutol hcl</i>	8	FIASP PENFILL.....	50
<i>ethosuximide</i>	39	FIASP PUMPCART	50
<i>ethynodiol diacetate & ethinyl estradiol</i> <i>tab 1 mg-35 mcg</i>	53	<i>finasteride</i>	63
<i>ethynodiol diacetate & ethinyl estradiol</i> <i>tab 1 mg-50 mcg</i>	53	<i>fingolimod hcl</i>	46
<i>etodolac</i>	1	FINTEPLA.....	39
<i>etonogestrel-ethinyl estradiol va ring</i> <i>0.12-0.015 mg/24hr</i>	53	<i>finzala</i>	53
<i>etoposide</i>	15	FIRMAGON	13
<i>etravirine</i>	6	<i>flac</i>	75
EULEXIN	13	FLAREX.....	74
<i>euthyrox</i>	59	FLEBOGAMMA DIF	68
<i>everolimus</i>	17	<i>flecainide acetate</i>	27
<i>everolimus (immunosuppressant)</i>	69	<i>fluconazole</i>	5
EVOTAZ TAB 300-150	7	<i>fluconazole in nacl 0.9% inj 200</i> <i>mg/100ml</i>	5
<i>exemestane</i>	13	<i>fluconazole in nacl 0.9% inj 400</i> <i>mg/200ml</i>	5
EYSUVIS.....	75	<i>flucytosine</i>	5
<i>ezetimibe</i>	28	<i>fludrocortisone acetate</i>	57
<i>ezetimibe-simvastatin tab 10-10 mg</i>	28	<i>flunisolide (nasal)</i>	78
<i>ezetimibe-simvastatin tab 10-20 mg</i>	28	<i>fluocinolone acetonide</i>	81
<i>ezetimibe-simvastatin tab 10-40 mg</i>	28	<i>fluocinolone acetonide (otic)</i>	75
<i>ezetimibe-simvastatin tab 10-80 mg</i>	28	<i>fluocinonide</i>	81
F		<i>fluocinonide emulsified base</i>	81
FABRAZYME	58	<i>fluorometholone (ophth)</i>	74
<i>falmina</i>	53	<i>fluorouracil</i>	13
<i>famciclovir</i>	8	<i>fluorouracil (topical)</i>	82
<i>famotidine</i>	61	<i>fluoxetine hcl</i>	33
<i>famotidine in nacl 0.9% iv soln 20</i> <i>mg/50ml</i>	61	<i>fluphenazine decanoate</i>	36
FANAPT	36	<i>fluphenazine hcl</i>	36
		<i>flurbiprofen</i>	1
		<i>flurbiprofen sodium</i>	74
		<i>fluticasone propionate</i>	81
		<i>fluticasone propionate (nasal)</i>	78

<i>fluticasone-salmeterol aer powder ba</i>		<i>generlac</i>	62
100-50 mcg/act	79	<i>gengraf</i>	69
<i>fluticasone-salmeterol aer powder ba</i>		GENOTROPIN	58
250-50 mcg/act	79	GENOTROPIN MINIQUICK.....	58
<i>fluticasone-salmeterol aer powder ba</i>		<i>gentamicin in saline inj 0.8 mg/ml</i>	3
500-50 mcg/act	79	<i>gentamicin in saline inj 1.2 mg/ml</i>	3
<i>fluvoxamine maleate</i>	32	<i>gentamicin in saline inj 1.6 mg/ml</i>	3
<i>fondaparinux sodium</i>	64	<i>gentamicin in saline inj 1 mg/ml</i>	3
<i>fosamprenavir calcium</i>	6	<i>gentamicin in saline inj 2 mg/ml</i>	3
<i>fosinopril sodium</i>	24	<i>gentamicin sulfate</i>	3
<i>fosinopril sodium & hydrochlorothiazide</i>		<i>gentamicin sulfate (ophth)</i>	73
<i>tab 10-12.5 mg</i>	24	<i>gentamicin sulfate (topical)</i>	80
<i>fosinopril sodium & hydrochlorothiazide</i>		GENVOYA TAB	7
<i>tab 20-12.5 mg</i>	24	GILOTRIF.....	17
FOTIVDA.....	17	<i>glatiramer acetate</i>	46
FRUZAQLA	17	<i>glatopa</i>	46
FULPHILA.....	65	GLEOSTINE	12
<i>fulvestrant</i>	13	<i>glimepiride</i>	48
FUROSCIX.....	30	<i>glipizide</i>	48
<i>furosemide</i>	30	<i>glipizide-metformin hcl tab 2.5-250 mg</i>	
<i>furosemide inj</i>	30	.....	48
FUZEON	6	<i>glipizide-metformin hcl tab 2.5-500 mg</i>	
<i>fyavolv tab 0.5mg-2.5mcg</i>	57	.....	48
<i>fyavolv tab 1mg-5mcg</i>	57	<i>glipizide-metformin hcl tab 5-500 mg</i>	48
FYCOMPA	39, 40	<i>glipizide xl</i>	48
G		<i>glycopyrrolate</i>	61
<i>gabapentin</i>	40	<i>glydo</i>	82
<i>galantamine hydrobromide</i>	32	GLYXAMBI TAB 10-5 MG	48
<i>gallifrey</i>	59	GLYXAMBI TAB 25-5 MG	48
GAMASTAN INJ	68	<i>granisetron hcl</i>	60
GAMMAGARD LIQUID	68	<i>griseofulvin microsize</i>	5
GAMMAGARD S/D IGA LESS TH	68	<i>griseofulvin ultramicrosize</i>	5
GAMMAKED.....	68	<i>guanfacine hcl</i>	31
GAMMAPLEX.....	68	<i>guanfacine hcl (adhd)</i>	43
GAMUNEX-C.....	68	H	
<i>ganciclovir sodium</i>	8	HAEGARDA.....	65
GARDASIL 9 INJ	69	<i>hailey 1.5/30</i>	53
<i>gatifloxacin (ophth)</i>	73	<i>hailey 24 fe</i>	53
GATTEX	62	<i>halobetasol propionate</i>	81
GAUZE PADS 2	50	<i>haloette</i>	53
<i>gavilyte-c</i>	62	<i>haloperidol</i>	36
<i>gavilyte-g</i>	62	<i>haloperidol decanoate</i>	36
<i>gavilyte-n/flavor pack</i>	62	<i>haloperidol lactate</i>	36
GAVRETO	17	HARVONI PAK 33.75-150MG	8
<i>gefitinib</i>	17	HARVONI PAK 45-200MG	8
<i>gemcitabine hcl</i>	13	HARVONI TAB 45-200MG	8
<i>gemfibrozil</i>	27	HARVONI TAB 90-400MG	8

HAVRIX	69	ICLUSIG	17
<i>heather</i>	53	IDACIO (2 PEN)	67
<i>heparin sodium (porcine)</i>	64	IDACIO (2 SYRINGE)	67
HEPLISAV-B	69	IDACIO CROHN INJ DISEASE	67
HEP SOD/NACL INJ 25000UNT	64	IDACIO PLAQU INJ PSORIASIS.....	67
HERCEP HYLEC SOL 60-10000	17	IDHIFA	17
HERCEPTIN	17	<i>imatinib mesylate</i>	17
HERZUMA	17	IMBRUVICA	17
HIBERIX	69	<i>imipenem-cilastatin intravenous for</i>	
HUMIRA.....	66	<i>soln 250 mg</i>	4
HUMIRA PEN	66	<i>imipenem-cilastatin intravenous for</i>	
HUMIRA PEN-CD/UC/HS START.....	66	<i>soln 500 mg</i>	4
HUMIRA PEN KIT PS/UV	66	<i>imipramine hcl</i>	33
HUMIRA PEN-PEDIATRIC UC S	67	<i>imiquimod</i>	82
HUMULIN R U-500 (CONCENTR.....	50	IMKELDI	18
HUMULIN R U-500 KWIKPEN.....	50	IMOVAX RABIES (H.D.C.V.)	70
<i>hydralazine hcl</i>	31	IMPAVIDO.....	4
<i>hydrochlorothiazide</i>	30	INBRIJA.....	35
<i>hydrocodone-acetaminophen soln 7.5-</i>		<i>incassia</i>	53
<i>325 mg/15ml</i>	2	INCRELEX	58
<i>hydrocodone-acetaminophen tab 10-</i>		INCRUSE ELLIPTA	75
<i>325 mg</i>	2	<i>indapamide</i>	30
<i>hydrocodone-acetaminophen tab 5-325</i>		INFANRIX INJ	70
<i>mg</i>	2	INFLIXIMAB.....	67
<i>hydrocodone-acetaminophen tab 7.5-</i>		INLYTA	18
<i>325 mg</i>	2	INQOVI TAB 35-100MG.....	13
<i>hydrocodone bitartrate</i>	1	INREBIC	18
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>		INSULIN PEN NEEDLES: BD-EMBECTA	
.....	2	.....	50
<i>hydrocortisone</i>	57	INSULIN SAFETY NEEDLES: BD-	
<i>hydrocortisone (intrarectal)</i>	61	EMBECTA	50
<i>hydrocortisone (rectal)</i>	82	INSULIN SYRINGES: BD-EMBECTA ...	50
<i>hydrocortisone (topical)</i>	81, 82	INTELENCE	6
<i>hydrocortisone sod succinate</i>	57	INTRALIPID.....	72
<i>hydrocortisone valerate</i>	82	<i>introvale</i>	53
<i>hydromorphone hcl</i>	2	INVEGA HAFYERA.....	36
<i>hydroxychloroquine sulfate</i>	68	INVEGA SUSTENNA	36
<i>hydroxyurea</i>	14	INVEGA TRINZA.....	36
<i>hydroxyzine hcl</i>	76	IPOL INJ INACTIVE.....	70
<i>hydroxyzine pamoate</i>	76	<i>ipratropium-albuterol nebu soln 0.5-</i>	
I		<i>2.5(3) mg/3ml</i>	75
<i>ibandronate sodium</i>	51	<i>ipratropium bromide</i>	75
IBRANCE.....	17	<i>ipratropium bromide (nasal)</i>	76
<i>ibu</i>	1	<i>irbesartan</i>	27
<i>ibuprofen</i>	1	<i>irbesartan-hydrochlorothiazide tab</i>	
<i>icatibant acetate</i>	65	<i>150-12.5 mg</i>	25
<i>iclevia</i>	53		

<i>irbesartan-hydrochlorothiazide tab</i>	
300-12.5 mg	26
<i>irinotecan hcl</i>	14
ISENTRESS	6
ISENTRESS HD	6
<i>isibloom</i>	53
ISOLYTE-P INJ /D5W	71
ISOLYTE-S INJ PH 7.4.....	71
<i>isoniazid</i>	8
<i>isosorbide dinitrate</i>	31
<i>isosorbide mononitrate</i>	31
<i>isotretinoin</i>	80
<i>isradipine</i>	29
ITOVEBI	18
<i>itraconazole</i>	5
<i>ivabradine hcl</i>	31
<i>ivermectin</i>	4
IWILFIN.....	15
IXCHIQ INJ	70
IXIARO INJ.....	70
J	
JAKAFI	18
<i>jantoven</i>	64
JANUMET TAB 50-1000	48
JANUMET TAB 50-500MG	48
JANUMET XR TAB 100-1000.....	48
JANUMET XR TAB 50-1000	48
JANUMET XR TAB 50-500MG.....	48
JANUVIA	48
JARDIANCE	48
<i>jasmiel</i>	53
<i>javygtor</i>	58
JAYPIRCA.....	18
JENTADUETO TAB 2.5-1000.....	48
JENTADUETO TAB 2.5-500	48
JENTADUETO TAB 2.5-850	48
JENTADUETO TAB XR 2.5-1000MG ...	48
JENTADUETO TAB XR 5-1000MG	48
<i>jinteli</i>	57
<i>jolessa</i>	53
<i>juleber</i>	53
JULUCA TAB 50-25MG	7
<i>junel 1/20</i>	53
<i>junel 1.5/30</i>	53
<i>junel fe 1/20</i>	53
<i>junel fe 1.5/30</i>	53
<i>junel fe 24</i>	54
JYLAMVO	68
JYNNEOS	70
K	
KADCYLA	18
<i>kaitlib fe</i>	54
KALYDECO	77
KANJINTI	18
<i>kariva</i>	54
KCL/D5W/NACL INJ 0.3/0.9%.....	71
<i>kcl 10 meq/l (0.075%) in dextrose 5%</i> <i>& nacl 0.45% inj</i>	71
<i>kcl 20 meq/l (0.149%) in nacl 0.45%</i> <i>inj</i>	71
<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i> <i>nacl 0.2% inj</i>	71
<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i> <i>nacl 0.45% inj</i>	71
<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i> <i>nacl 0.9% inj</i>	71
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	71
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	71
<i>kcl 30 meq/l (0.224%) in dextrose 5%</i> <i>& nacl 0.45% inj</i>	71
<i>kcl 40 meq/l (0.3%) in dextrose 5% &</i> <i>nacl 0.45% inj</i>	71
<i>kcl 40 meq/l (0.3%) in dextrose 5% &</i> <i>nacl 0.9% inj</i>	71
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	71
<i>kelnor 1/35</i>	54
<i>kelnor 1/50</i>	54
KERENDIA.....	25
KESIMPTA	46
<i>ketoconazole</i>	5
<i>ketoconazole (topical)</i>	80
<i>ketorolac tromethamine (ophth)</i>	74
KEYTRUDA	18
KINRIX INJ.....	70
<i>kionex</i>	52
KISQALI 200 DOSE	18
KISQALI 200 PAK FEMARA.....	18
KISQALI 400 DOSE	18
KISQALI 400 PAK FEMARA.....	18
KISQALI 600 DOSE	18
KISQALI 600 PAK FEMARA.....	18
<i>klayesta</i>	80

<i>klor-con</i>	72	<i>leucovorin calcium</i>	23
<i>klor-con 10</i>	72	<i>leuprolide acetate</i>	14
<i>klor-con 8</i>	72	<i>levabuterol hcl</i>	76
<i>klor-con m10</i>	72	<i>levabuterol tartrate</i>	76
<i>klor-con m15</i>	72	<i>levetiracetam</i>	40
<i>klor-con m20</i>	72	<i>levetiracetam in sodium chloride iv soln</i> <i>1000 mg/100ml</i>	40
KOSELUGO.....	18	<i>levetiracetam in sodium chloride iv soln</i> <i>1500 mg/100ml</i>	40
<i>kourzeq</i>	83	<i>levetiracetam in sodium chloride iv soln</i> <i>500 mg/100ml</i>	40
KRAZATI.....	18	<i>levobunolol hcl</i>	74
<i>kurvelo</i>	54	<i>levocarnitine (metabolic modifiers)</i> ...	59
L		<i>levocetirizine dihydrochloride</i>	76
<i>labetalol hcl</i>	29	<i>levofloxacin</i>	10
<i>lacosamide</i>	40	<i>levofloxacin in d5w iv soln 250</i> <i>mg/50ml</i>	10
<i>lacosamide oral</i>	40	<i>levofloxacin in d5w iv soln 500</i> <i>mg/100ml</i>	10
<i>lactated ringer's solution</i>	71	<i>levofloxacin in d5w iv soln 750</i> <i>mg/150ml</i>	10
<i>lactic acid (ammonium lactate)</i>	82	<i>levonest</i>	54
<i>lactulose</i>	62	<i>levonor-eth est tab 0.15-</i> <i>0.02/0.025/0.03 mg &eth est 0.01</i> <i>mg</i>	54
<i>lactulose (encephalopathy)</i>	62	<i>levonorgestrel & ethinyl estradiol (91-</i> <i>day) tab 0.15-0.03 mg</i>	54
<i>lamivudine</i>	6	<i>levonorgestrel & ethinyl estradiol tab</i> <i>0.15 mg-30 mcg</i>	54
<i>lamivudine (hbv)</i>	8	<i>levonorgestrel & ethinyl estradiol tab</i> <i>0.1 mg-20 mcg</i>	54
<i>lamivudine-zidovudine tab 150-300 mg</i>	7	<i>levonorgestrel-eth estra tab 0.05-</i> <i>30/0.075-40/0.125-30mg-mcg</i>	54
<i>lamotrigine</i>	40	<i>levonorgestrel-ethinyl estradiol</i> <i>(continuous) tab 90-20 mcg</i>	54
<i>lanreotide acetate</i>	58	<i>levonorg-eth est tab 0.1-0.02mg(84) &</i> <i>eth est tab 0.01mg(7)</i>	54
<i>lansoprazole</i>	63	<i>levonorg-eth est tab 0.15-0.03mg(84)</i> <i>& eth est tab 0.01mg(7)</i>	54
<i>lapatinib ditosylate</i>	18	<i>levora 0.15/30-28</i>	54
<i>larin 1/20</i>	54	<i>levo-t</i>	60
<i>larin 1.5/30</i>	54	<i>levothyroxine sodium</i>	60
<i>larin 24 fe</i>	54	<i>levoxyl</i>	60
<i>larin fe 1/20</i>	54	<i>l-glutamine (sickle cell)</i>	65
<i>larin fe 1.5/30</i>	54	LIBERVANT	40
<i>latanoprost</i>	74	<i>lidocaine</i>	82
<i>layolis fe</i>	54	<i>lidocaine hcl</i>	82
LAZCLUZE.....	18		
<i>leena</i>	54		
<i>leflunomide</i>	68		
<i>lenalidomide</i>	14		
LENVIMA 10 MG DAILY DOSE	19		
LENVIMA 12MG DAILY DOSE	19		
LENVIMA 20 MG DAILY DOSE	19		
LENVIMA 4 MG DAILY DOSE	19		
LENVIMA 8 MG DAILY DOSE	19		
LENVIMA CAP 14 MG	19		
LENVIMA CAP 18 MG	19		
LENVIMA CAP 24 MG	19		
<i>lessina</i>	54		
<i>letrozole</i>	13		

<i>lidocaine hcl (local anesth.)</i>	1	<i>low-ogestrel</i>	54
<i>lidocaine hcl (mouth-throat)</i>	83	<i>loxapine succinate</i>	36
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	82	LUMAKRAS	19
<i>lidocan</i>	82	LUMIGAN	74
LILETTA	54	LUMIZYME	59
<i>linezolid</i>	4	LUPRON DEPOT (1-MONTH)	14
LINEZOLID INJ 2MG/ML	4	LUPRON DEPOT (3-MONTH)	14
LINZESS	62	LUPRON DEPOT-PED (1-MONTH)	59
<i>liothyronine sodium</i>	60	LUPRON DEPOT-PED (3-MONTH)	59
<i>lisinopril</i>	24	LUPRON DEPOT-PED (6-MONTH)	59
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	24	<i>lurasidone hcl</i>	36
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	24	<i>lutea</i>	54
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	24	LYBALVI TAB 10-10MG	36
<i>lithium</i>	45	LYBALVI TAB 15-10MG	37
<i>lithium carbonate</i>	45	LYBALVI TAB 20-10MG	37
LIVTENCITY	8	LYBALVI TAB 5-10MG	36
<i>loestrin 1/20-21</i>	54	<i>lyleq</i>	54
<i>loestrin 1.5/30-21</i>	54	<i>lyllana</i>	57
<i>loestrin fe 1/20</i>	54	LYNPARZA	19
<i>loestrin fe 1.5/30</i>	54	LYSODREN	14
LOKELMA	52	LYTGOBI (12 MG DAILY DOSE)	19
LONSURF TAB 15-6.14	13	LYTGOBI (16 MG DAILY DOSE)	19
LONSURF TAB 20-8.19	13	LYTGOBI (20 MG DAILY DOSE)	19
<i>loperamide hcl</i>	62	<i>lyza</i>	54
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	7	M	
<i>lopinavir-ritonavir tab 100-25 mg</i>	7	<i>magnesium sulfate</i>	71
<i>lopinavir-ritonavir tab 200-50 mg</i>	7	MAGNESIUM SULFATE	71
<i>lorazepam</i>	32	<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	71
<i>lorazepam intensol</i>	32	<i>malathion</i>	83
LORBRENA	19	<i>maraviroc</i>	6
<i>loryna</i>	54	<i>marlissa</i>	54
<i>losartan potassium</i>	27	MARPLAN	33
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	26	MATULANE	15
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	26	MAVYRET PAK 50-20MG	8
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	26	MAVYRET TAB 100-40MG	8
LOTEMAX	74	<i>meclizine hcl</i>	60
<i>loteprednol etabonate</i>	74	<i>medroxyprogesterone acetate</i>	59
<i>lovastatin</i>	27	<i>medroxyprogesterone acetate (contraceptive)</i>	55
		<i>mefloquine hcl</i>	6
		<i>megestrol acetate</i>	14, 59
		<i>megestrol acetate (appetite)</i>	59
		MEKINIST	19
		MEKTOVI	19
		<i>meloxicam</i>	1
		<i>memantine hcl</i>	32

<i>memantine hcl-donepezil hcl cap er</i>		<i>microgestin 1.5/30</i>	55
24hr 14-10 mg	32	<i>microgestin fe 1/20</i>	55
<i>memantine hcl-donepezil hcl cap er</i>		<i>microgestin fe 1.5/30</i>	55
24hr 28-10 mg	32	<i>midodrine hcl</i>	31
<i>memantine hcl tab 28 x 5 mg & 21 x</i>		MIEBO.....	75
10 mg titration pack	32	<i>mifepristone (hyperglycemia)</i>	59
MENACTRA INJ	70	<i>mili</i>	55
MENQUADFI INJ.....	70	<i>mimvey</i>	57
MENVEO INJ.....	70	<i>minocycline hcl</i>	12
MENVEO SOL.....	70	<i>minoxidil</i>	31
<i>mercaptapurine</i>	13	<i>mirtazapine</i>	33
<i>meropenem</i>	4	<i>misoprostol</i>	62
<i>mesalamine</i>	61	MITIGARE.....	1
<i>mesalamine w/ cleanser</i>	61	M-M-R II INJ	70
<i>mesna</i>	23	M-NATAL PLUS TAB	72
MESNEX.....	23	<i>modafinil</i>	46, 47
<i>metformin hcl</i>	48	<i>moexipril hcl</i>	24
<i>methadone hcl</i>	2	<i>molindone hcl</i>	37
<i>methadone hydrochloride i</i>	2	<i>mometasone furoate</i>	82
<i>methazolamide</i>	30	MONJUVI	19
<i>methenamine hippurate</i>	4	<i>mono-lynyah</i>	55
<i>methimazole</i>	60	<i>montelukast sodium</i>	77
<i>methocarbamol</i>	46	<i>morphine sulfate</i>	2
<i>methotrexate sodium</i>	13, 68	MOUNJARO	48
<i>methsuximide</i>	40	MOVANTIK	62
<i>methylphenidate hcl</i>	43	<i>moxifloxacin hcl</i>	10
<i>methylprednisolone</i>	57	<i>moxifloxacin hcl (ophth)</i>	73
<i>methylprednisolone acetate</i>	57	<i>moxifloxacin hcl 400 mg/250ml in</i>	
<i>methylprednisolone sod succ</i>	58	<i>sodium chloride 0.8% inj</i>	10
<i>methyltestosterone</i>	47	MRESVIA	70
<i>metoclopramide hcl</i>	60	MULTAQ.....	27
<i>metolazone</i>	30	<i>multiple electrolytes ph 5.5</i>	71
<i>metoprolol & hydrochlorothiazide tab</i>		<i>multiple electrolytes ph 7.4</i>	71
100-25 mg	28	<i>mupirocin</i>	80
<i>metoprolol & hydrochlorothiazide tab</i>		<i>mycophenolate mofetil</i>	69
100-50 mg	28	<i>mycophenolate sodium</i>	69
<i>metoprolol & hydrochlorothiazide tab</i>		MYRBETRIQ.....	64
50-25 mg.....	28	N	
<i>metoprolol succinate</i>	29	<i>nabumetone</i>	1
<i>metoprolol tartrate</i>	29	<i>nadolol</i>	29
<i>metronidazole</i>	4	<i>nafcillin sodium</i>	11
<i>metronidazole (topical)</i>	82	NAGLAZYME	59
<i>metronidazole vaginal</i>	64	<i>nalbuphine hcl</i>	2
<i>metyrosine</i>	31	<i>naloxone hcl</i>	47
<i>mibelas 24 fe</i>	55	<i>naltrexone hcl</i>	47
<i>micafungin sodium</i>	5	NAMZARIC CAP 14-10MG	32
<i>microgestin 1/20</i>	55	NAMZARIC CAP 21-10MG	32

NAMZARIC CAP 28-10MG	32	<i>nitroglycerin</i>	31
NAMZARIC CAP 7-10MG	32	<i>nitroglycerin (intra-anal)</i>	82
NAMZARIC CAP PACK	32	<i>nizatidine</i>	61
<i>naproxen</i>	1	<i>nora-be</i>	55
<i>naproxen dr</i>	1	<i>norelgestromin-ethinyl estradiol td</i>	
<i>naproxen sodium</i>	1	<i>ptwk 150-35 mcg/24hr</i>	55
<i>naratriptan hcl</i>	44	<i>norethindrone (contraceptive)</i>	55
<i>nateglinide</i>	48	<i>norethindrone & ethinyl estradiol-fe</i>	
NAYZILAM.....	40	<i>chew tab 0.4 mg-35 mcg</i>	55
<i>nebivolol hcl</i>	29	<i>norethindrone & ethinyl estradiol-fe</i>	
<i>necon 0.5/35-28</i>	55	<i>chew tab 0.8 mg-25 mcg</i>	55
<i>nefazodone hcl</i>	33	<i>norethindrone ace & ethinyl estradiol-fe</i>	
<i>neomycin-bacitrac zn-polymyx</i>		<i>tab 1 mg-20 mcg</i>	55
5(3.5)mg-400unt-10000unt op oin	73	<i>norethindrone ace & ethinyl estradiol</i>	
<i>neomycin-polymy-gramicid op sol</i>		<i>tab 1.5 mg-30 mcg</i>	55
1.75-10000-0.025mg-unt-mg/ml ..	73	<i>norethindrone ace & ethinyl estradiol</i>	
<i>neomycin-polymyxin-dexamethasone</i>		<i>tab 1 mg-20 mcg</i>	55
<i>ophth oint 0.1%</i>	73	<i>norethindrone ace-eth estradiol-fe</i>	
<i>neomycin-polymyxin-dexamethasone</i>		<i>chew tab 1 mg-20 mcg (24)</i>	55
<i>ophth susp 0.1%</i>	73	<i>norethindrone acetate</i>	59
<i>neomycin-polymyxin-hc ophth susp</i> ..	73	<i>norethindrone acetate-ethinyl estradiol</i>	
<i>neomycin-polymyxin-hc otic soln 1%</i>	75	<i>tab 0.5 mg-2.5 mcg</i>	57
<i>neomycin-polymyxin-hc otic susp 3.5</i>		<i>norethindrone acetate-ethinyl estradiol</i>	
<i>mg/ml-10000 unit/ml-1%</i>	75	<i>tab 1 mg-5 mcg</i>	57
<i>neomycin sulfate</i>	4	<i>norethindrone ac-ethinyl estrad-fe tab</i>	
<i>neo-polycin 5(3.5)mg-400unt-</i>		<i>1-20/1-30/1-35 mg-mcg</i>	55
<i>10000unt op oin</i>	73	<i>norgestimate & ethinyl estradiol tab</i>	
<i>neo-polycin hc ophth oint 1%</i>	73	<i>0.25 mg-35 mcg</i>	55
NERLYNX	19	<i>norgestimate-eth estrad tab 0.18-</i>	
<i>nevirapine</i>	6	<i>25/0.215-25/0.25-25 mg-mcg</i>	55
NEXLETOL.....	28	<i>norgestimate-eth estrad tab 0.18-</i>	
NEXLIZET TAB 180/10MG.....	28	<i>35/0.215-35/0.25-35 mg-mcg</i>	55
NEXPLANON	55	<i>norlyroc</i>	55
<i>niacin (antihyperlipidemic)</i>	28	<i>nortrel 0.5/35 (28)</i>	55
<i>nicardipine hcl</i>	29	<i>nortrel 1/35 (21)</i>	55
NICOTROL INHALER	47	<i>nortrel 1/35 (28)</i>	55
NICOTROL NS.....	47	<i>nortrel 7/7/7</i>	55
<i>nifedipine</i>	29	<i>nortriptyline hcl</i>	33
<i>nikki</i>	55	NORVIR.....	6
<i>nilutamide</i>	14	NOVOLIN INJ 70/30	50
<i>nimodipine</i>	29	NOVOLIN INJ 70/30 FP	50
NINLARO	20	NOVOLIN N	50
<i>nitazoxanide</i>	4	NOVOLIN N FLEXPEN	50
<i>nitisinone</i>	59	NOVOLIN R	50
NITRO-BID.....	31	NOVOLIN R FLEXPEN	50
<i>nitrofurantoin macrocrystal</i>	4	NOVOLOG	50
<i>nitrofurantoin monohyd macro</i>	4	NOVOLOG FLEXPEN.....	50

NOVOLOG MIX INJ 70/30	50
NOVOLOG MIX INJ FLEXPEN	50
NOVOLOG PENFILL	50
NUBEQA	14
NUDEXTA CAP 20-10MG	45
NULOJIX	69
NUPLAZID	37
NURTEC	44
NUTRILIPID	72
NUZYRA	12
<i>nyamyc</i>	80
<i>nylia 1/35</i>	55
<i>nylia 7/7/7</i>	55
<i>nystatin</i>	5
<i>nystatin (mouth-throat)</i>	83
<i>nystatin (topical)</i>	80
<i>nystop</i>	80
O	
<i>ocella</i>	56
OCTAGAM	68
<i>octreotide acetate</i>	59
ODEFSEY TAB	7
ODOMZO	20
OFEV	77
<i>ofloxacin (ophth)</i>	73
<i>ofloxacin (otic)</i>	75
OGIVRI	20
OGSIVEO	20
OJEMDA	20
OJJAARA	20
<i>olanzapine</i>	37
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 20-5-12.5</i> <i>mg</i>	26
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-12.5</i> <i>mg</i>	26
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-25 mg</i>	26
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-12.5</i> <i>mg</i>	26
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-25 mg</i>	26
<i>olmesartan medoxomil</i>	27
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 20-12.5 mg</i>	26
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-12.5 mg</i>	26
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-25 mg</i> .	26
<i>omega-3-acid ethyl esters cap 1 gm</i> .	28
<i>omeprazole</i>	63
<i>omeprazole-sodium bicarbonate cap</i> <i>20-1100 mg</i>	63
<i>omeprazole-sodium bicarbonate cap</i> <i>40-1100 mg</i>	63
<i>omeprazole-sodium bicarbonate powd</i> <i>pack for susp 20-1680 mg</i>	63
<i>omeprazole-sodium bicarbonate powd</i> <i>pack for susp 40-1680 mg</i>	63
OMNIPOD 5 DX KIT INT G7G6	50
OMNIPOD 5 DX MIS POD G7G6	50
OMNIPOD 5 G7 KIT INTRO	50
OMNIPOD 5 G7 MIS PODS	50
OMNIPOD 5 LB KIT INTRO G6	50
OMNIPOD 5 LB MIS PODS G6	50
OMNIPOD DASH KIT INTRO	50
OMNIPOD DASH MIS PODS	50
OMNIPOD GO KIT 10UNT/DY	51
OMNIPOD GO KIT 15UNT/DY	51
OMNIPOD GO KIT 20UNT/DY	51
OMNIPOD GO KIT 25UNT/DY	51
OMNIPOD GO KIT 30UNT/DY	51
OMNIPOD GO KIT 35UNT/DY	51
OMNIPOD GO KIT 40UNT/DY	51
OMNIPOD MIS CLASSIC	51
<i>ondansetron</i>	60
<i>ondansetron hcl</i>	60, 61
ONTRUZANT	20
ONUREG	13
OPIPZA	37
OPSUMIT	31
ORGOVYX	14
ORKAMBI GRA 100-125	77
ORKAMBI GRA 150-188	77
ORKAMBI GRA 75-94MG	77
ORKAMBI TAB 100-125	77
ORKAMBI TAB 200-125	77
ORSERDU	14

<i>oseltamivir phosphate</i>	8	PENNSAID.....	83
<i>oxacillin sodium</i>	11	PENTACEL INJ	70
<i>oxaliplatin</i>	12	<i>pentamidine isethionate inh</i>	4
<i>oxcarbazepine</i>	40	<i>pentamidine isethionate inj</i>	4
<i>oxybutynin chloride</i>	64	<i>pentoxifylline</i>	65
<i>oxycodone hcl</i>	2	<i>perindopril erbumine</i>	25
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	3	<i>perio gard</i>	83
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	2	<i>permethrin</i>	83
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	2	<i>perphenazine</i>	37
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	3	<i>pfizerpen</i>	11
OZEMPIC (0.25 OR 0.5MG/DOSE) ...	49	<i>phenelzine sulfate</i>	34
OZEMPIC (0.25 OR 0.5 MG/DOSE)....	48	<i>phenobarbital</i>	40
OZEMPIC (1MG/DOSE)	49	<i>phenobarbital sodium</i>	40
OZEMPIC (2MG/DOSE)	49	<i>phenytek</i>	40
P		<i>phenytoin</i>	41
<i>pacerone</i>	27	<i>phenytoin sodium</i>	41
<i>paclitaxel</i>	15	<i>phenytoin sodium extended</i>	41
<i>paclitaxel inj 100mg</i>	15	PHESGO SOL.....	20
<i>paliperidone</i>	37	<i>philith</i>	56
<i>pamidronate disodium</i>	51	PIFELTRO	6
PAMIDRONATE DISODIUM.....	51	<i>pilocarpine hcl</i>	74
PANRETIN	83	<i>pilocarpine hcl (oral)</i>	83
<i>pantoprazole sodium</i>	63	<i>pimecrolimus</i>	83
PANZYGA	68	<i>pimozide</i>	37
<i>paricalcitol</i>	60	<i>pimtrea</i>	56
<i>paroxetine hcl</i>	33	<i>pindolol</i>	29
PAXLOVID TAB 150-100	9	<i>pioglitazone hcl</i>	49
PAXLOVID TAB 300-100	9	<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	49
<i>pazopanib hcl</i>	20	<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	49
PEDIARIX INJ 0.5ML.....	70	<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	11
PEDVAX HIB	70	<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	12
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	62	<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	11
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	62	<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	11
PEGASYS	9	<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	12
PEMAZYRE	20	PIQRAY 200MG DAILY DOSE.....	20
<i>pemetrexed disodium</i>	13	PIQRAY 250MG TAB DOSE.....	20
PENBRAYA INJ	70	PIQRAY 300MG DAILY DOSE.....	20
<i>penicillamine</i>	52	<i>pirfenidone</i>	77
<i>penicillin g potassium</i>	11	<i>piroxicam</i>	1
<i>penicillin g sodium</i>	11	<i>plenamine</i>	72
<i>penicillin v potassium</i>	11		

PLENVU SOL.....	62	<i>prochlorperazine</i>	61
<i>podofilox</i>	83	<i>prochlorperazine edisylate</i>	61
<i>polycin ophth oint</i>	73	<i>prochlorperazine maleate</i>	61
<i>polymyxin b sulfate</i>	4	PROCRIT	65
<i>polymyxin b-trimethoprim ophth soln</i> 10000 unit/ml-0.1%	73	<i>proctocort</i>	83
POMALYST	14	<i>procto-med hc</i>	83
<i>portia-28</i>	56	<i>proctosol hc</i>	83
<i>posaconazole</i>	5	<i>proctozone-hc</i>	83
<i>potassium chloride</i>	72	<i>progesterone</i>	59
<i>potassium chloride 20 meq/l (0.15%)</i> <i>in dextrose 5% inj</i>	72	PROGRAF.....	69
<i>potassium chloride microencapsulated</i> <i>crystals er</i>	72	PROLASTIN-C	77
<i>potassium citrate (alkalinizer)</i>	63	PROLIA	51
POT CHL 20MEQ/L IN NAACL 0.45% INJ	71	<i>promethazine hcl</i>	61
POT CHL 20MEQ/L IN NAACL 0.9% INJ	71	<i>propafenone hcl</i>	27
POT CHL 40MEQ/L IN NAACL 0.9% INJ	71	<i>proparacaine hcl</i>	75
<i>pramipexole dihydrochloride</i>	35	<i>propranolol hcl</i>	29
<i>prasugrel hcl</i>	65	<i>propylthiouracil</i>	60
<i>pravastatin sodium</i>	27	PROQUAD INJ.....	70
<i>praziquantel</i>	4	PROSOL INJ 20%	73
<i>prazosin hcl</i>	25	<i>protriptyline hcl</i>	34
<i>prednisolone</i>	58	PULMOZYME	78
<i>prednisolone acetate (ophth)</i>	74	PURIXAN.....	13
PREDNISOLONE SODIUM PHOSP	74	<i>pyrazinamide</i>	8
<i>prednisolone sodium phosphate</i>	58	<i>pyridostigmine bromide</i>	45
<i>prednisone</i>	58	<i>pyrimethamine</i>	4
PREDNISONE INTENSOL	58	Q	
<i>pregabalin</i>	41	QINLOCK	20
PREMASOL SOL 10%	72	QUADRACEL INJ 0.5ML	70
PRENATAL TAB 27-1MG	72	<i>quetiapine fumarate</i>	37
PRENATAL TAB PLUS	72	<i>quinapril hcl</i>	25
<i>prevalite</i>	28	<i>quinidine sulfate</i>	27
PREVYMIS.....	9	<i>quinine sulfate</i>	6
PREZCOBIX TAB 800-150.....	8	QULIPTA	44
PREZISTA	6	R	
PRIFTIN.....	8	RABAVERT INJ	70
<i>primaquine phosphate</i>	6	<i>rabeprazole sodium</i>	63
PRIMAQUINE PHOSPHATE	6	<i>raloxifene hcl</i>	59
<i>primidone</i>	41	<i>ramipril</i>	25
PRIORIX INJ	70	<i>ranolazine</i>	31
PRIVIGEN	68	<i>rasagiline mesylate</i>	35
<i>probenecid</i>	1	<i>reclipsen</i>	56
		RECOMBIVAX HB	70
		REGRANEX	83
		RELENZA DISKHALER	9
		RELISTOR	62
		REMICADE	67
		RENFLEXIS.....	67

<i>repaglinide</i>	49	SECUADO	38
REPATHA	28	<i>selegiline hcl</i>	35
REPATHA PUSHTRONEX SYSTEM	28	<i>selenium sulfide</i>	80
REPATHA SURECLICK	28	SELZENTRY	6
RESTASIS	75	SEREVENT DISKUS.....	76
RESTASIS MULTIDOSE.....	75	<i>sertraline hcl</i>	34
RETEVMO	20	<i>setlakin</i>	56
REVUFORJ.....	20	<i>sharobel</i>	56
REXULTI	37	SHINGRIX	70
REYATAZ	6	SIGNIFOR	59
REZLIDHIA.....	20	<i>sildenafil citrate (pulmonary</i>	
REZUROCK.....	69	<i>hypertension)</i>	31
RHOPRESSA	74	<i>silver sulfadiazine</i>	80
<i>ribavirin (hepatitis c)</i>	9	SIMBRINZA SUS 1-0.2%.....	74
<i>rifabutin</i>	8	<i>simliya</i>	56
<i>rifampin</i>	8	<i>simpesse</i>	56
<i>riluzole</i>	45	SIMPLICITY MIS INSERTER.....	51
<i>rimantadine hydrochloride</i>	9	<i>simvastatin</i>	28
RINVOQ.....	67	<i>sirolimus</i>	69
RINVOQ LQ	67	SIRTURO	8
<i>risedronate sodium</i>	51	SKYRIZI.....	67
<i>risperidone</i>	37	SKYRIZI PEN	67
<i>risperidone microspheres</i>	38	<i>sodium chloride</i>	72
<i>ritonavir</i>	6	<i>sodium chloride (gu irrigant)</i>	83
<i>rivastigmine</i>	32	<i>sodium fluoride chew; tab; 1.1 (0.5 f)</i>	
<i>rivastigmine tartrate</i>	32	<i>mg/ml soln</i>	72
<i>rivelsa</i>	56	SODIUM OXYBATE.....	47
<i>rizatriptan benzoate</i>	44	<i>sodium phenylbutyrate</i>	59
ROCKLATAN DRO	74	<i>sodium polystyrene sulfonate powder</i>	
<i>roflumilast</i>	78	.....	52
<i>ropinirole hydrochloride</i>	35	<i>sod sulfate-pot sulf-mg sulf oral sol</i>	
<i>rosuvastatin calcium</i>	28	<i>17.5-3.13-1.6 gm/177ml</i>	62
ROTARIX SUS.....	70	<i>solifenacin succinate</i>	64
ROTATEQ SOL	70	SOLIQUA INJ 100/33	51
<i>roweepra</i>	41	SOLTAMOX.....	14
ROZLYTREK	20, 21	SOLU-CORTEF	58
RUBRACA.....	21	SOMATULINE DEPOT	59
<i>rufinamide</i>	41	SOMAVERT.....	59
RUKOBIA	6	<i>sorafenib tosylate</i>	21
RYBELSUS.....	49	<i>sotalol hcl</i>	27
RYDAPT	21	<i>sotalol hcl (afib/af)</i>	27
S		SOTYKTU	67
<i>sajazir</i>	65	<i>spironolactone</i>	25
SANTYL	83	<i>spironolactone & hydrochlorothiazide</i>	
<i>sapropterin dihydrochloride</i>	59	<i>tab 25-25 mg</i>	30
SCSEMBLIX.....	21	<i>sprintec 28</i>	56
<i>scopolamine</i>	61	SPRITAM.....	41

<i>sps</i>	52	<i>tacrolimus</i>	69
<i>sps rectal</i>	52	<i>tacrolimus (topical)</i>	83
<i>sronyx</i>	56	<i>tadalafil</i>	63
<i>ssd</i>	80	<i>tadalafil (pulmonary hypertension)</i> ...	31
STELARA.....	67	TAFINLAR.....	21
STIVARGA.....	21	TAGRISSE.....	21
<i>streptomycin sulfate</i>	4	TALZENNA.....	21
STRIBILD TAB.....	8	<i>tamoxifen citrate</i>	14
<i>subvenite</i>	41	<i>tamsulosin hcl</i>	63
<i>sucrafate</i>	62	<i>tarina 24 fe</i>	56
<i>sulfacetamide sodium (acne)</i>	80	<i>tarina fe 1/20 eq</i>	56
<i>sulfacetamide sodium (ophth)</i>	73	TASIGNA.....	21
<i>sulfacetamide sodium-prednisolone</i> <i>ophth soln 10-0.23(0.25)%</i>	73	<i>tasimelteon</i>	43
<i>sulfadiazine</i>	4	TAVNEOS.....	65
<i>sulfamethoxazole-trimethoprim iv soln</i> <i>400-80 mg/5ml</i>	4	<i>tazarotene</i>	81
<i>sulfamethoxazole-trimethoprim susp</i> <i>200-40 mg/5ml</i>	4	<i>tazicef</i>	10
<i>sulfamethoxazole-trimethoprim tab</i> <i>400-80 mg</i>	4	TAZORAC.....	81
<i>sulfamethoxazole-trimethoprim tab</i> <i>800-160 mg</i>	4	TAZVERIK.....	21
SULFAMYLON.....	80	TECENTRIQ.....	21
<i>sulfasalazine</i>	61, 62	TECENTRIQ INJ HYBREZA.....	21
<i>sulindac</i>	1	TEFLARO.....	10
<i>sumatriptan</i>	44	<i>telmisartan</i>	27
<i>sumatriptan succinate</i>	45	<i>telmisartan-amlodipine tab 40-10 mg</i>	26
<i>sunitinib malate</i>	21	<i>telmisartan-amlodipine tab 40-5 mg</i>	26
SUNLENCA.....	6	<i>telmisartan-amlodipine tab 80-10 mg</i>	26
<i>syeda</i>	56	<i>telmisartan-amlodipine tab 80-5 mg</i>	26
SYMDEKO TAB 100-150.....	78	<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	26
SYMDEKO TAB 50-75MG.....	78	<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	26
SYMPAZAN.....	41	<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	26
SYMTUZA TAB.....	8	<i>temazepam</i>	44
SYNAREL.....	59	TENIVAC INJ 5-2LF.....	70
SYNJARDY TAB 12.5-1000MG.....	49	<i>tenofovir disoproxil fumarate</i>	7
SYNJARDY TAB 12.5-500.....	49	TEPMETKO.....	21
SYNJARDY TAB 5-1000MG.....	49	<i>terazosin hcl</i>	25
SYNJARDY TAB 5-500MG.....	49	<i>terbinafine hcl</i>	5
SYNJARDY XR TAB 10-1000.....	49	<i>terbutaline sulfate</i>	76
SYNJARDY XR TAB 12.5-1000.....	49	<i>terconazole vaginal</i>	64
SYNJARDY XR TAB 25-1000.....	49	TERIPARATIDE.....	51
SYNJARDY XR TAB 5-1000MG.....	49	<i>testosterone</i>	47
SYNTHROID.....	60	<i>testosterone cypionate</i>	47
T		<i>testosterone enanthate</i>	47
TABRECTA.....	21	<i>testosterone pump</i>	48

<i>tetrabenazine</i>	45	TRELEGY AER ELLIPTA 100-62.5-25	
<i>tetracycline hcl</i>	12	MCG	75
THALOMID	14	TRELEGY AER ELLIPTA 200-62.5-25	
THEO-24	78	MCG	75
<i>theophylline</i>	78	TREMFYA	67
<i>thioridazine hcl</i>	38	<i>treprostinil</i>	31
<i>thiothixene</i>	38	TRESIBA	51
<i>tiadylt er</i>	30	TRESIBA FLEXTOUCH	51
<i>tiagabine hcl</i>	41	<i>tretinoin</i>	80
TIBSOVO	21	<i>tretinoin (chemotherapy)</i>	15
TICOVAC	70	<i>triamcinolone acetonide (mouth)</i>	83
<i>tigecycline</i>	12	<i>triamcinolone acetonide (topical)</i>	82
<i>tilia fe</i>	56	<i>triamterene & hydrochlorothiazide cap</i>	
<i>timolol maleate</i>	29	37.5-25 mg	30
<i>timolol maleate (ophth)</i>	74	<i>triamterene & hydrochlorothiazide tab</i>	
<i>tinidazole</i>	4	37.5-25 mg	30
TIVICAY	7	<i>triamterene & hydrochlorothiazide tab</i>	
TIVICAY PD	7	75-50 mg	30
<i>tizanidine hcl</i>	46	<i>tridacaine ii</i>	82
TOBI PODHALER	4	<i>triderm</i>	82
TOBRADEX OIN 0.3-0.1%	73	<i>trientine hcl</i>	52
<i>tobramycin</i>	4	<i>tri-estarylla</i>	56
<i>tobramycin (ophth)</i>	73	<i>trifluoperazine hcl</i>	38
<i>tobramycin-dexamethasone ophth susp</i>		<i>trifluridine</i>	73
0.3-0.1%	73	<i>trihexyphenidyl hcl</i>	35
<i>tobramycin sulfate</i>	4	TRIJARDY XR TAB ER 24HR 10-5-	
<i>tolterodine tartrate</i>	64	1000MG	49
<i>topiramate</i>	41	TRIJARDY XR TAB ER 24HR 12.5-2.5-	
<i>toremifene citrate</i>	14	1000MG	49
<i>torpenz</i>	22	TRIJARDY XR TAB ER 24HR 25-5-	
<i>torse mide</i>	30	1000MG	49
TOUJEO MAX SOLOSTAR	51	TRIJARDY XR TAB ER 24HR 5-2.5-	
TOUJEO SOLOSTAR	51	1000MG	49
TPN ELECTROL INJ	72	TRIKAFTA PAK 59.5MG	78
TRADJENTA	49	TRIKAFTA PAK 75MG	78
<i>tramadol-acetaminophen tab 37.5-325</i>		TRIKAFTA TAB 100-50-75MG & 150MG	
mg	3	.....	78
<i>tramadol hcl</i>	3	TRIKAFTA TAB 50-25-37.5MG & 75MG	
<i>trandolapril</i>	25	.....	78
<i>tranexamic acid</i>	65	<i>tri-legest fe</i>	56
<i>tranylcypramine sulfate</i>	34	<i>tri-linyah</i>	56
TRAVASOL INJ 10%	73	<i>tri-lo-estarylla</i>	56
<i>travoprost</i>	74	<i>tri-lo-marzia</i>	56
TRAZIMERA	22	<i>tri-lo-mili</i>	56
<i>trazodone hcl</i>	34	<i>tri-lo-sprintec</i>	56
TRECTOR	8	<i>trimethoprim</i>	4
		<i>tri-mili</i>	56

<i>trimipramine maleate</i>	34	VALTOCO 10 MG DOSE	41
TRINTELLIX	34	VALTOCO 15 MG DOSE	41
<i>tri-nymyo</i>	56	VALTOCO 20 MG DOSE	41
<i>tri-sprintec</i>	56	VALTOCO 5 MG DOSE	41
TRIUMEQ PD TAB	8	<i>vancomycin hcl</i>	5
TRIUMEQ TAB	8	VANCOMYCIN INJ 1 GM	5
<i>trivora-28</i>	56	VANCOMYCIN INJ 500MG	5
<i>tri-vylibra</i>	56	VANCOMYCIN INJ 750MG	5
<i>tri-vylibra lo</i>	56	VANFLYTA	22
TROGARZO	7	VAQTA	70
TROPHAMINE INJ 10%	73	<i>varenicline tartrate</i>	47
<i>trosopium chloride</i>	64	<i>varenicline tartrate tab 11 x 0.5 mg &</i> <i>42 x 1 mg start pack</i>	47
TRULICITY	49	VARIVAX	70
TRUMENBA INJ	70	VASCEPA	28
TRUQAP	22	VAXCHORA SUS	70
TRUXIMA	22	<i>velivet</i>	56
TUKYSA	22	VELSIPITY	67
TURALIO	22	VENCLEXTA	22
<i>turqoz</i>	56	VENCLEXTA TAB START PK	22
<i>twice-daily clindamycin phosphate</i> <i>(topical)</i>	80	<i>venlafaxine hcl</i>	34
TWINRIX INJ	70	VENTOLIN HFA	77
TYBOST	7	VENTOLIN HFA (INSTITUTIONAL PACK)	77
<i>tydemy</i>	56	VEOZAH	59
TYENNE	67	<i>verapamil hcl</i>	30
TYPHIM VI	70	VERQUVO	31
U		VERSACLOZ	38
UBRELVY	45	VERZENIO	22
<i>unithroid</i>	60	<i>vestura</i>	56
<i>ursodiol</i>	62	<i>vienna</i>	56
V		<i>vigabatrin</i>	41, 42
<i>valacyclovir hcl</i>	9	<i>vigadrone</i>	42
VALCHLOR	83	VIGAFYDE	42
<i>valganciclovir hcl</i>	9	<i>vigpoder</i>	42
<i>valproate sodium</i>	41	<i>vilazodone hcl</i>	34
<i>valproic acid</i>	41	<i>vincristine sulfate</i>	15
<i>valsartan</i>	27	<i>vinorelbine tartrate</i>	15
<i>valsartan-hydrochlorothiazide tab 160-</i> <i>12.5 mg</i>	26	<i>viorele</i>	56
<i>valsartan-hydrochlorothiazide tab 160-</i> <i>25 mg</i>	26	VIRACEPT	7
<i>valsartan-hydrochlorothiazide tab 320-</i> <i>12.5 mg</i>	26	VIREAD	7
<i>valsartan-hydrochlorothiazide tab 320-</i> <i>25 mg</i>	26	VITRAKVI	22
<i>valsartan-hydrochlorothiazide tab 80-</i> <i>12.5 mg</i>	26	VIVITROL	47
		VIZIMPRO	22
		VONJO	22
		VORANIGO	22
		<i>voriconazole</i>	5

VOSEVI TAB.....	9	XPOVIO PAK (40 MG TWICE WEEKLY)	23
VOWST CAP	63	.....	23
VRAYLAR	38	XPOVIO PAK (60 MG ONCE WEEKLY)	23
<i>vyfemla</i>	56	XPOVIO PAK (60 MG TWICE WEEKLY)	23
<i>vylibra</i>	56	.....	23
VYZULTA.....	74	XPOVIO PAK (80 MG ONCE WEEKLY)	23
W		XPOVIO PAK (80 MG TWICE WEEKLY)	23
<i>warfarin sodium</i>	64	.....	23
<i>water for irrigation, sterile irrigation</i>		XTANDI	14
<i>soln</i>	83	<i>xulane</i>	56
WELIREG	15	XULTOPHY INJ 100/3.6	51
<i>wera</i>	56	Y	
WESTAB PLUS TAB 27-1MG.....	72	YF-VAX INJ.....	70
<i>wixela inhub</i>	79	<i>yuvafem</i>	57
<i>wymzya fe</i>	56	Z	
X		<i>zafemy</i>	56
XALKORI.....	22	<i>zafirlukast</i>	77
XARELTO	64	<i>zaleplon</i>	44
XARELTO STAR TAB 15/20MG.....	65	ZARXIO	65
XATMEP	68	ZEGALOGUE	58
XCOPRI	42	ZEJULA	23
XCOPRI PAK 100-150	42	ZELBORAF.....	23
XCOPRI PAK 12.5-25	42	ZEMAIRA	78
XCOPRI PAK 150-200MG		<i>zenatane</i>	80
(MAINTENANCE)	42	ZENPEP CAP 10000UNT	63
XCOPRI PAK 150-200MG (TITRATION)		ZENPEP CAP 15000UNT	63
.....	42	ZENPEP CAP 20000UNT	63
XCOPRI PAK 50-100MG.....	42	ZENPEP CAP 25000UNT	63
XDEMVY	73	ZENPEP CAP 3000UNIT	63
XELJANZ.....	68	ZENPEP CAP 40000UNT	63
XELJANZ XR	68	ZENPEP CAP 5000UNIT	63
XERMELO	63	ZENPEP CAP 60000UNT	63
XGEVA.....	51	<i>zidovudine</i>	7
XHANCE.....	78	<i>ziprasidone hcl</i>	38
XIFAXAN.....	63	<i>ziprasidone mesylate</i>	38
XIGDUO XR TAB 10-1000.....	49	ZIRABEV.....	23
XIGDUO XR TAB 10-500MG	49	ZIRGAN	73
XIGDUO XR TAB 2.5-1000.....	49	<i>zoledronic acid</i>	51
XIGDUO XR TAB 5-1000MG	49	ZOLINZA.....	23
XIGDUO XR TAB 5-500MG.....	49	<i>zolpidem tartrate</i>	44
XIIDRA	75	ZONISADE	42
XOFLUZA	9	<i>zonisamide</i>	42
XOLAIR.....	78	<i>zovia 1/35</i>	56
XOSPATA	23	ZTALMY	42
XPOVIO PAK (100 MG ONCE WEEKLY)		<i>zumandimine</i>	56
.....	23	ZURZUVAE	34
XPOVIO PAK (40 MG ONCE WEEKLY)	23	ZYDELIG.....	23

ZYKADIA.....23

ZYLET SUS 0.5-0.3%.....73



Elderplan Extra Help (HMO-POS)

Elderplan Flex (HMO-POS)

Elderplan Select (HMO-POS I-SNP/IE-SNP)

自 03/01/2025 起，我們並未對此處方藥一覽表作出任何變更。如需最新資訊或有其他問題，請聯絡 Elderplan（長老計劃）會員服務部，電話：1-800-353-3765，TTY 使用者可致電 711，服務時間為早上 8 點至晚上 8 點，每週 7 天，或瀏覽 www.elderplan.org。