

*This formulary details coverage for medications filled through the pharmacy benefit portion of your plan. For medications administered by a health care professional, please refer to your medical benefit for coverage details or call Member Services for assistance at (855) 624-6463 M-F 8:00 am – 6:00 pm.*

\*\*To Search for your medication press Ctrl + F and type in your medication in the search box. If the search does not automatically advance, select the previous or next arrows.

#### **List of Abbreviations**

**ACA (Affordable Care Act):** preventive medications that have no cost-share when ACA conditions are met and when the medication is filled as a prescription at a participating pharmacy.

**CISP:** This designation is only applicable for plans that include the Chronic Illness Support Program (CISP) benefit. Enhanced coverage is limited to \$0 cost-share for Tier 1 medications, and reduced cost shares on select Tier 2 and Tier 3 medications according to your plan design without having to meet deductibles first. Reduced cost-share is only available through Express Scripts Home Delivery (mail). For non-CISP eligible plans, please refer to the numeric listing in the Drug Tier column.

**CISP-1:** This designation is only applicable for plans that include the Chronic Illness Support Program (CISP) benefit. The CISP-1 designation indicates the cost-share for the medication/item is \$0 through Express Scripts Home Delivery (mail).

**CSE-9:** This designation is only applicable to Members enrolled in a Cornerstone plan. Certain generic medications will be substituted with the brand name equivalent at the generic cost-share. The inclusion of the brand name product in this program is subject to change without notice.

**H.S.A.:** This designation is only applicable for employer-sponsored group plans that are Health Savings Account compatible. For drugs with this designation, the Deductible is waived and the Member pays the applicable drug Tier cost-share.

**INS:** This designation indicates the cost-share for this medication will be no more than \$35 for up to a 30-day supply. Becomes effective with the start of your plan's 2021 benefit year.

**MSP (Mandatory Specialty Pharmacy):** These drugs must be obtained directly through our exclusive mandatory pharmacy, Accredo (mail order), or the drug is not covered. We may require that you try certain drugs to treat your medical condition before you are provided coverage. These drugs are limited to a 30-day supply.

**OTC:** This drug is an over-the-counter product that is covered with a prescription from the prescriber and when filled at an in-network pharmacy.

**PA (Prior Approval):** The Plan requires you or your Provider to get Prior Approval for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you do not get approval, we may not cover the drug. We may require that you try certain drugs to treat your medical condition before you are provided coverage.

**QL (Quantity Limit):** A quantity limit (QL) defines how much of a particular drug you may get during a specific time period (days supply limit) or the maximum days supply you may get at once (quantity per days supply limit).

**SP (Specialty Pharmacy):** This means the out-of-pocket cost is at the 'specialty' cost-share. The Plan offers one courtesy fill at a retail pharmacy as a covered benefit. Then, this drug must be obtained directly through the exclusive specialty pharmacy, Accredo (mail), or you pay 100% of the retail cost. We may require that you try certain drugs to treat your medical condition before you are provided coverage.

**ST (Step Therapy):** In some cases, the Plan requires you to first try certain drugs to treat your medical condition within a certain look-back period before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, the Plan may cover Drug B. \*Note: The Prior Approval process may be used to facilitate this process.

**Effective January 1, 2021**

**If you need assistance or have questions, please call Member Services at (855) 624-6463.**

Drug Name	Drug Tier	Requirements / Limits
<b>ANTI - INFECTIVES</b>		
<b>ANTIFUNGAL AGENTS</b>		
ANCOBON ORAL CAPSULE	4	
<i>clotrimazole mucous membrane troche</i>	2	
CRESEMBA ORAL CAPSULE	3	PA
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION	4	
DIFLUCAN ORAL TABLET 100 MG, 200 MG, 50 MG	4	
DIFLUCAN ORAL TABLET 150 MG	4	QL
<i>fluconazole oral suspension for reconstitution</i>	2	
<i>fluconazole oral tablet 100 mg, 200 mg</i>	2	
<i>fluconazole oral tablet 150 mg</i>	1	QL
<i>fluconazole oral tablet 50 mg</i>	1	
<i>flucytosine oral capsule</i>	2	
<i>griseofulvin microsize oral suspension</i>	2	
<i>griseofulvin microsize oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>griseofulvin ultramicrosize oral tablet</i>	2	
<i>itraconazole oral capsule</i>	2	QL
<i>itraconazole oral solution</i>	2	
<i>ketoconazole oral tablet</i>	2	
NOXAFIL ORAL SUSPENSION	3	PA
<i>nystatin oral suspension</i>	1	
<i>nystatin oral tablet</i>	2	
ORAVIG BUCCAL MUCO-ADHESIVE BUCCAL TABLET	4	
<i>posaconazole oral tablet, delayed release (dr/ec)</i>	2	PA
SPORANOX ORAL SOLUTION	4	
SPORANOX PULSEPAK ORAL CAPSULE	4	QL
<i>terbinafine hcl oral tablet</i>	2	
VFEND ORAL SUSPENSION FOR RECONSTITUTION	4	PA
VFEND ORAL TABLET	4	PA
<i>voriconazole oral suspension for reconstitution</i>	2	PA
<i>voriconazole oral tablet</i>	2	PA

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Drug Name	Drug Tier	Requirements / Limits
<b>ANTIVIRALS</b>		
<i>abacavir oral solution</i>	5	MSP
<i>abacavil tablet</i>	5	MSP
<i>abacavir-lamivudine oral tablet</i>	5	MSP
<i>abacavir-lamivudine-zidovudine oral tablet</i>	5	MSP
<i>acyclovir oral capsule</i>	1	
<i>acyclovir oral suspension 200 mg/5 ml</i>	2	
<i>acyclovir oral tablet 400 mg</i>	1	
<i>acyclovir oral tablet 800 mg</i>	2	
<i>adefovir oral tablet</i>	2	
<i>amantadine hcl oral capsule</i>	2	
<i>amantadine hcl oral solution</i>	1	
<i>amantadine hcl oral tablet</i>	1	
APTIVUS (WITH VITAMIN E) ORAL SOLUTION	5	MSP
APTIVUS ORAL CAPSULE	5	MSP
<i>atazanavir oral capsule</i>	5	MSP
BARACLUDE ORAL SOLUTION	3	
BIKTARVY ORAL TABLET	5	MSP

Drug Name	Drug Tier	Requirements / Limits
CIMDUO ORAL TABLET	5	MSP
COMBIVIR ORAL TABLET	5	MSP
CRIXIVAN ORAL CAPSULE 200 MG	5	MSP
DESCOVY ORAL TABLET	5	MSP
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	5	MSP
DOVATO ORAL TABLET	5	MSP
EDURANT ORAL TABLET	5	MSP
<i>efavirenz oral capsule</i>	5	MSP
<i>efavirenz oral tablet</i>	5	MSP
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate oral tablet</i>	5	MSP
<i>emtricitabine oral capsule</i>	5	MSP
EMTRIVA ORAL CAPSULE	5	MSP
EMTRIVA ORAL SOLUTION	5	MSP
<i>entecavir oral tablet</i>	2	
EPCLUSA ORAL TABLET	5	PA; MSP; QL
EPIVIR HBV ORAL SOLUTION	3	
EPIVIR HBV ORAL TABLET	4	
EPIVIR ORAL SOLUTION	5	MSP

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Drug Name	Drug Tier	Requirements / Limits
EPIVIR ORAL TABLET	5	MSP
EPZICOM ORAL TABLET	5	MSP
EVOTAZ ORAL TABLET	5	MSP
<i>famciclovir oral tablet</i>	2	QL
FLUMADINE ORAL TABLET	4	
<i>fosamprenavir oral tablet</i>	5	MSP
FUZEON SUBCUTANEOUS RECON SOLN	5	MSP
GENVOYA ORAL TABLET	5	MSP
HARVONI ORAL PELLETS IN PACKET	5	PA; MSP; QL
HARVONI ORAL TABLET	5	PA; MSP; QL
HEPSERA ORAL TABLET	4	
INTELENCE ORAL TABLET	5	MSP
INVIRASE ORAL TABLET	5	MSP
ISENTRESS HD ORAL TABLET	5	MSP
ISENTRESS ORAL POWDER IN PACKET	5	MSP
ISENTRESS ORAL TABLET	5	MSP

Drug Name	Drug Tier	Requirements / Limits
ISENTRESS ORAL TABLET,CHEWABLE	5	MSP
JULUCA ORAL TABLET	5	MSP
KALETRA ORAL SOLUTION	5	MSP; QL
KALETRA ORAL TABLET	5	MSP; QL
<i>lamivudine oral solution</i>	5	MSP
<i>lamivudine oral tablet 100 mg</i>	2	
<i>lamivudine oral tablet 150 mg, 300 mg</i>	5	MSP
<i>lamivudine-zidovudine oral tablet</i>	5	MSP
LEXIVA ORAL SUSPENSION	5	MSP
LEXIVA ORAL TABLET	5	MSP
<i>lopinavir-ritonavir oral solution</i>	5	MSP; QL
<i>nevirapine oral suspension</i>	5	MSP
<i>nevirapine oral tablet</i>	5	MSP
<i>nevirapine oral tablet extended release 24 hr</i>	5	MSP
NORVIR ORAL POWDER IN PACKET	5	MSP
NORVIR ORAL SOLUTION	5	MSP

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Drug Name	Drug Tier	Requirements / Limits
NORVIR ORAL TABLET	5	MSP
ODEFSEY ORAL TABLET	5	MSP
<i>oseltamivir oral capsule</i>	2	QL
<i>oseltamivir oral suspension for reconstitution</i>	2	QL
PREVYMIS ORAL TABLET	3	QL
PREZISTA ORAL SUSPENSION	5	MSP
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	5	MSP
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE	4	QL
RETROVIR ORAL CAPSULE	5	MSP
RETROVIR ORAL SYRUP	5	MSP
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG	5	MSP
REYATAZ ORAL POWDER IN PACKET	5	MSP
<i>ribavirin inhalation recon soln</i>	2	
<i>rimantadine oral tablet</i>	2	
<i>ritonavir oral tablet</i>	5	MSP

Drug Name	Drug Tier	Requirements / Limits
SELZENTRY ORAL SOLUTION	5	MSP
SELZENTRY ORAL TABLET	5	MSP
<i>stavudine oral capsule</i>	5	MSP
SUSTIVA ORAL CAPSULE	5	MSP
SUSTIVA ORAL TABLET	5	MSP
SYMFI LO ORAL TABLET	5	MSP
SYMFI ORAL TABLET	5	MSP
SYMTUZA ORAL TABLET	5	MSP
SYNAGIS INTRAMUSCULAR SOLUTION	5	PA; MSP
TAMIFLU ORAL CAPSULE	4	QL
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION	4	QL
TEMIXYS ORAL TABLET	5	MSP
<i>tenofovir disoproxil fumarate oral tablet</i>	5	MSP
TIVICAY ORAL TABLET	5	MSP
TIVICAY PD ORAL TABLET FOR SUSPENSION	5	MSP
TRIUMEQ ORAL TABLET	5	MSP

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Drug Name	Drug Tier	Requirements / Limits
TRIZIVIR ORAL TABLET	5	MSP
TRUVADA ORAL TABLET	5	MSP
TYBOST ORAL TABLET	5	MSP
<i>valacyclovir oral tablet</i>	2	QL
VALCYTE ORAL RECON SOLN	4	
VALCYTE ORAL TABLET	4	
<i>valganciclovir oral recon soln</i>	2	
<i>valganciclovir oral tablet</i>	2	
VEMLIDY ORAL TABLET	3	
VIEKIRA PAK ORAL TABLETS,DOSE PACK	5	PA; MSP; QL
VIRACEPT ORAL TABLET	5	MSP
VIRAMUNE ORAL SUSPENSION	5	MSP
VIRAMUNE ORAL TABLET	5	MSP
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HR 400 MG	5	MSP
VIRAZOLE INHALATION RECON SOLN	4	
VIREAD ORAL POWDER	5	MSP

Drug Name	Drug Tier	Requirements / Limits
VIREAD ORAL TABLET	5	MSP
VOSEVI ORAL TABLET	5	PA; MSP; QL
XOFLUZA ORAL TABLET	4	QL
ZEPATIER ORAL TABLET	5	PA; MSP; QL
ZIAGEN ORAL SOLUTION	5	MSP
ZIAGEN ORAL TABLET	5	MSP
<i>zidovudine oral capsule</i>	5	MSP
<i>zidovudine oral syrup</i>	5	MSP
<i>zidovudine oral tablet</i>	5	MSP
ZOVIRAX ORAL SUSPENSION	4	
<b>CEPHALOSPORINS</b>		
<i>cefaclor oral capsule</i>	1	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	1	
<i>cefaclor oral tablet extended release 12 hr</i>	1	
<i>cefadroxil oral capsule</i>	1	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>cefadroxil oral tablet</i>	1	
<i>cefdinir oral capsule</i>	2	
<i>cefdinir oral suspension for reconstitution</i>	1	
<i>cefditoren pivoxil oral tablet</i>	1	
<i>cefixime oral capsule</i>	1	
<i>cefixime oral suspension for reconstitution</i>	1	
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml</i>	2	
<i>cefpodoxime oral suspension for reconstitution 50 mg/5 ml</i>	2	
<i>cefpodoxime oral tablet</i>	2	
<i>cefprozil oral suspension for reconstitution</i>	1	
<i>cefprozil oral tablet</i>	1	
<i>cefuroxime axetil oral tablet</i>	2	
<i>cephalexin oral capsule</i>	1	
<i>cephalexin oral suspension for reconstitution</i>	1	
<i>cephalexin oral tablet</i>	1	
KEFLEX ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
SPECTRACEF ORAL TABLET 400 MG	4	
SUPRAX ORAL CAPSULE	4	
SUPRAX ORAL SUSPENSION FOR RECONSTITUTION	4	
SUPRAX ORAL TABLET,CHEWABLE	4	
<b>ERYTHROMYCINS &amp; OTHER MACROLIDES</b>		
<i>azithromycin oral packet</i>	1	QL
<i>azithromycin oral suspension for reconstitution</i>	2	QL
<i>azithromycin oral tablet</i>	1	QL
<i>clarithromycin oral suspension for reconstitution</i>	1	
<i>clarithromycin oral tablet</i>	1	
<i>clarithromycin oral tablet extended release 24 hr</i>	1	
DIFICID ORAL TABLET	4	QL
<i>e.e.s. 400 oral tablet</i>	2	
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION	4	

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Drug Name	Drug Tier	Requirements / Limits
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION	4	
ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION	4	
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg</i>	2	
<i>ery-tab oral tablet, delayed release (dr/ec) 333 mg</i>	1	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	4	
<i>erythrocin (as stearate) oral tablet 250 mg</i>	2	
<i>erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml</i>	2	
<i>erythromycin ethylsuccinate oral suspension for reconstitution 400 mg/5 ml</i>	2	
<i>erythromycin ethylsuccinate oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin oral capsule, delayed release (dr/ec)</i>	2	
<i>erythromycin oral tablet 250 mg</i>	2	
<i>erythromycin oral tablet 500 mg</i>	2	
<i>erythromycin oral tablet, delayed release (dr/ec) 250 mg</i>	2	
<i>erythromycin oral tablet, delayed release (dr/ec) 333 mg, 500 mg</i>	2	
ZITHROMAX ORAL PACKET	4	QL
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION	4	QL
ZITHROMAX ORAL TABLET 250 MG, 500 MG	4	QL
ZITHROMAX TRI-PAK ORAL TABLET	4	QL
ZITHROMAX Z-PAK ORAL TABLET	4	QL
<b>MISCELLANEOUS ANTIINFECTIVES</b>		
AEMCOLO ORAL TABLET, DELAYED RELEASE (DR/EC)	4	QL
<i>albendazole oral tablet</i>	2	QL

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Drug Name	Drug Tier	Requirements / Limits
ALBENZA ORAL TABLET	4	QL
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	3	QL
ALINIA ORAL TABLET	3	QL
ARAKODA ORAL TABLET	4	QL
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION	5	PA; SP
<i>atovaquone oral suspension</i>	2	
<i>atovaquone-proguanil oral tablet</i>	2	H.S.A.; QL
BENZNIDAZOLE ORAL TABLET	3	QL
BETHKIS INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP; QL
BILTRICIDE ORAL TABLET	4	
CAYSTON INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP; QL
<i>chloroquine phosphate oral tablet 250 mg</i>	2	H.S.A.; QL
<i>chloroquine phosphate oral tablet 500 mg</i>	2	H.S.A.; QL
CLEOCIN HCL ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
CLEOCIN PEDIATRIC ORAL RECON SOLN	4	
<i>clindamycin hcl oral capsule</i>	1	
<i>clindamycin palmitate hcl oral recon soln</i>	1	
<i>clindamycin pediatric oral recon soln</i>	1	
COARTEM ORAL TABLET	3	QL
CYCLOSERINE ORAL CAPSULE	4	
<i>dapsone oral tablet</i>	2	
DARAPRIM ORAL TABLET	5	PA; SP
EMVERM ORAL TABLET,CHEWABLE	3	QL
<i>ethambutol oral tablet</i>	2	
FLAGYL ORAL CAPSULE	4	
FLAGYL ORAL TABLET	4	
<i>hydroxychloroquine oral tablet</i>	2	QL
IMPAVIDO ORAL CAPSULE	3	PA; QL
<i>isoniazid oral solution</i>	2	
<i>isoniazid oral tablet</i>	2	
<i>ivermectin oral tablet</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
KITABIS PAK INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP; QL
KRINTAFEL ORAL TABLET	4	QL
<i>linezolid oral suspension for reconstitution</i>	1	PA
<i>linezolid oral tablet</i>	2	PA
MALARONE ORAL TABLET	4	QL
MALARONE PEDIATRIC ORAL TABLET	4	QL
<i>mefloquine oral tablet</i>	2	H.S.A.; QL
MEPRON ORAL SUSPENSION	4	
<i>metronidazole oral capsule</i>	2	
<i>metronidazole oral tablet</i>	1	
MYAMBUTOL ORAL TABLET 400 MG	4	
MYCOBUTIN ORAL CAPSULE	4	
NEBUPENT INHALATION RECON SOLN	4	QL
<i>neomycin oral tablet</i>	1	
<i>paromomycin oral capsule</i>	2	
PASER ORAL GRANULES DR FOR SUSP IN PACKET	4	

Drug Name	Drug Tier	Requirements / Limits
<i>pentamidine inhalation recon soln</i>	2	QL
<i>praziquantel oral tablet</i>	2	
PRETOMANID ORAL TABLET	4	PA
PRIFTIN ORAL TABLET	3	
<i>primaquine oral tablet</i>	2	H.S.A.; QL
<i>pyrazinamide oral tablet</i>	2	
<i>pyrimethamine oral tablet</i>	5	PA; SP
QUALAQUIN ORAL CAPSULE	4	QL
<i>quinine sulfate oral capsule</i>	2	QL
<i>rifabutin oral capsule</i>	2	
RIFADIN ORAL CAPSULE	4	
RIFAMATE ORAL CAPSULE	4	
<i>rifampin oral capsule</i>	2	
RIFATER ORAL TABLET	4	
SIRTURO ORAL TABLET	3	PA
SIVEXTRO ORAL TABLET	4	PA
SOLOSEC ORAL GRANULES DEL RELEASE IN PACKET	3	QL

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Drug Name	Drug Tier	Requirements / Limits
STROMEKTOL ORAL TABLET	4	QL
<i>tinidazole oral tablet</i>	2	QL
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; MSP; QL
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization</i>	5	PA; SP; QL
<i>tobramycin inhalation solution for nebulization</i>	5	PA; SP; QL
TOBRAMYCIN WITH NEBULIZER INHALATION SOLUTION FOR NEBULIZATION	5	PA; SP; QL
TRECTOR ORAL TABLET	4	
XENLETA ORAL TABLET	4	
XIFAXAN ORAL TABLET	3	QL
ZYVOX ORAL SUSPENSION FOR RECONSTITUTION	4	PA
ZYVOX ORAL TABLET	4	PA
<b>PENICILLINS</b>		
<i>amoxicillin oral capsule</i>	1	
<i>amoxicillin oral suspension for reconstitution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>amoxicillin oral tablet</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution</i>	1	
<i>amoxicillin-pot clavulanate oral tablet</i>	1	
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr</i>	1	
<i>amoxicillin-pot clavulanate oral tablet, chewable</i>	1	
<i>ampicillin oral capsule 500 mg</i>	1	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	3	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 250-62.5 MG/5 ML	4	
AUGMENTIN XR ORAL TABLET EXTENDED RELEASE 12 HR	4	
<i>dicloxacillin oral capsule</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR	4	
<i>penicillin v potassium oral recon soln</i>	1	
<i>penicillin v potassium oral tablet</i>	1	
<b>QUINOLONES</b>		
BAXDELA ORAL TABLET	3	QL
CIPRO ORAL SUSPENSION, MICROCAPSULE RECON	4	
CIPRO ORAL TABLET 250 MG, 500 MG	4	
<i>ciprofloxacin hcl oral tablet</i>	1	
<i>ciprofloxacin oral suspension, microcapsule recon</i>	1	
FACTIVE ORAL TABLET	4	
<i>levofloxacin oral solution</i>	1	
<i>levofloxacin oral tablet</i>	1	
<i>moxifloxacin oral tablet</i>	2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	2	
<b>SULFA'S &amp; RELATED AGENTS</b>		
BACTRIM DS ORAL TABLET	4	

Drug Name	Drug Tier	Requirements / Limits
BACTRIM ORAL TABLET	4	
<i>sulfadiazine oral tablet</i>	2	
<i>sulfamethoxazole-trimethoprim oral suspension</i>	1	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	1	
<i>sulfatrim oral suspension</i>	1	
<b>TETRACYCLINES</b>		
ACTICLATE ORAL TABLET	4	ST
AVIDOXY DK KIT	4	ST
<i>avidoxy oral tablet</i>	1	
<i>coremino oral tablet extended release 24 hr</i>	2	
<i>demeclocycline oral tablet</i>	2	
DORYX MPC ORAL TABLET, DELAYED RELEASE (DR/EC)	4	ST
DORYX ORAL TABLET, DELAYED RELEASE (DR/EC) 200 MG, 50 MG	4	ST
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 75 mg</i>	2	
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 50 mg</i>	1	
<i>doxycycline monohydrate oral capsule 100 mg, 150 mg, 50 mg</i>	1	
<i>doxycycline monohydrate oral capsule 75 mg</i>	2	
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet</i>	1	
<i>minocycline oral capsule</i>	1	
<i>minocycline oral tablet 100 mg, 50 mg</i>	2	
<i>minocycline oral tablet 75 mg</i>	2	
<i>minocycline oral tablet extended release 24 hr</i>	2	ST
MINOLIRA ER ORAL TABLET, IR - ER, BIPHASIC 24HR	4	ST
<i>mondoxyne nl oral capsule 100 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mondoxyne nl oral capsule 75 mg</i>	2	
MONODOX ORAL CAPSULE	4	ST
MORGIDOX 1X 50 KIT	4	ST
MORGIDOX 2X100 KIT	4	ST
<i>morgidox oral capsule 100 mg</i>	2	
NUZYRA ORAL TABLET	4	QL
ORACEA ORAL CAPSULE, IR - DELAY REL, BIPHASE	4	ST
SEYSARA ORAL TABLET	4	ST
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	4	ST
TARGADOX ORAL TABLET	4	ST
<i>tetracycline oral capsule</i>	2	
VIBRAMYCIN ORAL CAPSULE 100 MG	4	ST
VIBRAMYCIN ORAL SUSPENSION FOR RECONSTITUTION	4	

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Drug Name	Drug Tier	Requirements / Limits
VIBRAMYCIN ORAL SYRUP	4	
<b>URINARY TRACT AGENTS</b>		
FURADANTIN ORAL SUSPENSION	4	
HIPREX ORAL TABLET	4	
MACROBID ORAL CAPSULE	4	
MACRODANTIN ORAL CAPSULE	4	
<i>methenamine hippurate oral tablet</i>	2	
<i>methenamine mandelate oral tablet</i>	2	
MONUROL ORAL PACKET	4	
<i>nitrofurantoin macrocrystal oral capsule</i>	1	
<i>nitrofurantoin monohyd/m-cryst oral capsule</i>	1	
<i>nitrofurantoin oral suspension</i>	2	
PRIMSOL ORAL SOLUTION	4	
<i>trimethoprim oral tablet</i>	1	
<b>VANCOMYCIN</b>		
VANCOCIN ORAL CAPSULE	4	PA; QL
<i>vancomycin oral capsule</i>	2	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>vancomycin oral recon soln</i>	2	QL
<b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS</b>		
<b>ADJUNCTIVE AGENTS</b>		
<i>leucovorin calcium oral tablet 10 mg, 25 mg, 5 mg</i>	1	
<i>leucovorin calcium oral tablet 15 mg</i>	2	
MESNEX ORAL TABLET	3	
VISTOGARD ORAL GRANULES IN PACKET	5	PA; SP
XGEVA SUBCUTANEOUS SOLUTION	5	PA; MSP
<b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS</b>		
<i>abiraterone oral tablet</i>	5	PA; MSP; QL
AFINITOR DISPERZ ORAL TABLET FOR SUSPENSION	5	PA; MSP
AFINITOR ORAL TABLET	5	PA; MSP
ALECENSA ORAL CAPSULE	5	PA; MSP; QL
ALKERAN ORAL TABLET	4	
ALUNBRIG ORAL TABLET	5	PA; MSP; QL

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Drug Name	Drug Tier	Requirements / Limits
ALUNBRIG ORAL TABLETS,DOSE PACK	5	PA; MSP; QL
<i>anastrozole oral tablet</i>	2	
AROMASIN ORAL TABLET	4	
ASTAGRAF XL ORAL CAPSULE,EXTENDED RELEASE 24HR	5	PA; SP
AYVAKIT ORAL TABLET	5	PA; SP; QL
AZASAN ORAL TABLET	5	SP
<i>azathioprine oral tablet</i>	5	SP
BALVERSA ORAL TABLET	5	PA; SP
<i>bexarotene oral capsule</i>	5	PA; SP
<i>bicalutamide oral tablet</i>	2	
BOSULIF ORAL TABLET	5	PA; MSP; QL
BRAFTOVI ORAL CAPSULE	5	PA; SP; QL
BRUKINSA ORAL CAPSULE	5	PA; SP
BYNFEZIA SUBCUTANEOUS PEN INJECTOR	5	MSP
CABOMETYX ORAL TABLET	5	PA; MSP; QL
<i>capecitabine oral tablet</i>	5	SP

Drug Name	Drug Tier	Requirements / Limits
CAPRELSA ORAL TABLET	5	PA; SP; QL
CASODEX ORAL TABLET	4	
CELLCEPT ORAL CAPSULE	5	SP
CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION	5	SP
CELLCEPT ORAL TABLET	5	SP
COMETRIQ ORAL CAPSULE	5	PA; MSP
COPIKTRA ORAL CAPSULE	5	PA; SP; QL
COTELLIC ORAL TABLET	5	PA; MSP; QL
<i>cyclophosphamide oral capsule</i>	2	
<i>cyclosporine modified oral capsule</i>	5	SP
<i>cyclosporine modified oral solution</i>	5	SP
<i>cyclosporine oral capsule</i>	5	SP
DAURISMO ORAL TABLET	5	PA; MSP; QL
DROXIA ORAL CAPSULE	3	
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MSP

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Drug Name	Drug Tier	Requirements / Limits
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MSP
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MSP
ELIGARD SUBCUTANEOUS SYRINGE	5	PA; MSP
EMCYT ORAL CAPSULE	3	
ENSPRYNG SUBCUTANEOUS SYRINGE	5	PA; MSP
ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; SP
ERIVEDGE ORAL CAPSULE	5	PA; MSP; QL
ERLEADA ORAL TABLET	5	PA; MSP; QL
<i>erlotinib oral tablet</i>	5	PA; MSP; QL
<i>etoposide oral capsule</i>	2	
<i>everolimus (antineoplastic) oral tablet</i>	5	PA; MSP
<i>everolimus (immunosuppressive) oral tablet 0.25 mg</i>	5	MSP
<i>everolimus (immunosuppressive) oral tablet 0.5 mg, 0.75 mg</i>	5	SP

Drug Name	Drug Tier	Requirements / Limits
<i>exemestane oral tablet</i>	2	
FARESTON ORAL TABLET	4	
FARYDAK ORAL CAPSULE	5	PA; MSP; QL
FEMARA ORAL TABLET	4	
<i>flutamide oral capsule</i>	1	
<i>gengraf oral capsule 100 mg, 25 mg</i>	5	SP
<i>gengraf oral solution</i>	5	SP
GILOTRIF ORAL TABLET	5	PA; MSP; QL
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	3	
GLIADEL WAFER IMPLANT WAFER	4	
HYCAMTIN ORAL CAPSULE	5	PA; MSP
HYDREA ORAL CAPSULE	4	
<i>hydroxyurea oral capsule</i>	1	
IBRANCE ORAL CAPSULE	5	PA; MSP; QL
IBRANCE ORAL TABLET	5	PA; MSP; QL
ICLUSIG ORAL TABLET	5	PA; SP; QL
IDHIFA ORAL TABLET	5	PA; MSP; QL
<i>imatinib oral tablet</i>	5	PA; MSP; QL

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Drug Name	Drug Tier	Requirements / Limits
IMBRUVICA ORAL CAPSULE	5	PA; SP; QL
IMBRUVICA ORAL TABLET	5	PA; SP; QL
IMURAN ORAL TABLET	5	SP
INLYTA ORAL TABLET	5	PA; MSP; QL
IRESSA ORAL TABLET	5	PA; MSP; QL
JAKAFI ORAL TABLET	5	PA; MSP; QL
JELMYTO INTRAPYELOCALYCEAL KIT	5	PA; SP
KOSELUGO ORAL CAPSULE	5	PA; SP
LENVIMA ORAL CAPSULE	5	PA; MSP
<i>letrozole oral tablet</i>	1	
LEUKERAN ORAL TABLET	3	
<i>leuprolide subcutaneous kit</i>	5	PA; SP
LONSURF ORAL TABLET	5	PA; MSP
LORBRENA ORAL TABLET	5	PA; MSP; QL
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; MSP
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; MSP
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT	5	PA; MSP
LUPRON DEPOT-PED (3 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; MSP
LUPRON DEPOT-PED INTRAMUSCULAR KIT	5	PA; MSP
LYNPARZA ORAL TABLET	5	PA; MSP; QL
LYSODREN ORAL TABLET	3	
MATULANE ORAL CAPSULE	5	SP
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i>	2	
<i>megestrol oral tablet</i>	1	
MEKINIST ORAL TABLET	5	PA; MSP; QL
MEKTOVI ORAL TABLET	5	PA; SP; QL
<i>melphalan oral tablet</i>	1	
<i>mercaptopurine oral tablet</i>	2	
<i>methotrexate sodium (pf) injection recon soln</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>methotrexate sodium (pf) injection solution</i>	1	
<i>methotrexate sodium injection solution</i>	1	
<i>methotrexate sodium oral tablet</i>	2	
<i>mycophenolate mofetil oral capsule</i>	5	SP
<i>mycophenolate mofetil oral suspension for reconstitution</i>	5	SP
<i>mycophenolate mofetil oral tablet</i>	5	SP
<i>mycophenolate sodium oral tablet, delayed release (dr/ec)</i>	5	SP
MYFORTIC ORAL TABLET, DELAYED RELEASE (DR/EC)	5	SP
MYLERAN ORAL TABLET	3	
NEORAL ORAL CAPSULE	5	SP
NEORAL ORAL SOLUTION	5	SP
NERLYNX ORAL TABLET	5	PA; MSP
NEXAVAR ORAL TABLET	5	PA; MSP; QL
NILANDRON ORAL TABLET	4	PA
<i>nilutamide oral tablet</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
NINLARO ORAL CAPSULE	5	PA; MSP; QL
NUBEQA ORAL TABLET	5	PA; MSP; QL
<i>octreotide acetate injection solution</i>	5	MSP
<i>octreotide acetate injection syringe</i>	5	MSP
ODOMZO ORAL CAPSULE	5	PA; MSP; QL
PEMAZYRE ORAL TABLET	5	PA; SP; QL
PROGRAF ORAL CAPSULE	5	SP
PROGRAF ORAL GRANULES IN PACKET	5	SP
PURIXAN ORAL SUSPENSION	5	SP
RAPAMUNE ORAL SOLUTION	5	SP
RAPAMUNE ORAL TABLET	5	SP
RETEVMO ORAL CAPSULE	5	PA; MSP; QL
ROZLYTREK ORAL CAPSULE	5	PA; MSP; QL
RUBRACA ORAL TABLET	5	PA; MSP; QL
RYDAPT ORAL CAPSULE	5	PA; MSP
SANDIMMUNE ORAL CAPSULE	5	SP
SANDIMMUNE ORAL SOLUTION	5	SP

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Drug Name	Drug Tier	Requirements / Limits
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	5	MSP
SIGNIFOR SUBCUTANEOUS SOLUTION	5	PA; MSP
<i>sirolimus oral solution</i>	5	SP
<i>sirolimus oral tablet</i>	5	SP
SOLTAMOX ORAL SOLUTION	4	
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE	5	PA; MSP
SPRYCEL ORAL TABLET	5	PA; MSP; QL
STIVARGA ORAL TABLET	5	PA; MSP; QL
SUPPRELIN LA IMPLANT KIT	5	PA; MSP
SUTENT ORAL CAPSULE	5	PA; MSP; QL
SYNRIBO SUBCUTANEOUS RECON SOLN	5	PA; SP
TABLOID ORAL TABLET	4	
TABRECTA ORAL TABLET	5	PA; MSP
<i>tacrolimus oral capsule</i>	5	SP
TAFINLAR ORAL CAPSULE	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
TAGRISSEO ORAL TABLET	5	PA; MSP; QL
TALZENNA ORAL CAPSULE	5	PA; MSP; QL
<i>tamoxifen oral tablet 10 mg</i>	1	
<i>tamoxifen oral tablet 20 mg</i>	2	
TARCEVA ORAL TABLET	5	PA; MSP; QL
TARGRETIN TOPICAL GEL	5	PA; SP
TASIGNA ORAL CAPSULE	5	PA; MSP; QL
TAZVERIK ORAL TABLET	5	PA; SP
TEMODAR ORAL CAPSULE	5	PA; MSP
<i>temozolomide oral capsule</i>	5	PA; MSP
THALOMID ORAL CAPSULE	5	PA; MSP
TIBSOVO ORAL TABLET	5	PA; SP
<i>toremifene oral tablet</i>	2	
<i>tretinoin (antineoplastic) oral capsule</i>	2	
TREXALL ORAL TABLET	4	
TRIPTODUR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	5	PA; SP

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Drug Name	Drug Tier	Requirements / Limits
TUKYSA ORAL TABLET	5	PA; SP; QL
TURALIO ORAL CAPSULE	5	PA; SP; QL
TYKERB ORAL TABLET	5	PA; MSP; QL
VANTAS IMPLANT KIT	5	PA; MSP
VENCLEXTA ORAL TABLET	5	PA; SP
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK	5	PA; SP; QL
VERZENIO ORAL TABLET	5	PA; MSP; QL
VITRAKVI ORAL CAPSULE	5	PA; MSP
VITRAKVI ORAL SOLUTION	5	PA; MSP
VIZIMPRO ORAL TABLET	5	PA; MSP; QL
VOTRIENT ORAL TABLET	5	PA; MSP; QL
XALKORI ORAL CAPSULE	5	PA; MSP; QL
XELODA ORAL TABLET	5	SP
XERMELO ORAL TABLET	5	PA; SP; QL
XOSPATA ORAL TABLET	5	PA; SP
XTANDI ORAL CAPSULE	5	PA; MSP; QL
YONSA ORAL TABLET	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
ZEJULA ORAL CAPSULE	5	PA; SP
ZELBORAF ORAL TABLET	5	PA; MSP; QL
ZOLADEX SUBCUTANEOUS IMPLANT	5	PA; MSP
ZOLINZA ORAL CAPSULE	5	PA; MSP
ZORTRESS ORAL TABLET	5	SP
ZYDELIG ORAL TABLET	5	PA; MSP; QL
ZYKADIA ORAL TABLET	5	PA; MSP; QL
ZYTIGA ORAL TABLET 500 MG	5	PA; MSP; QL

## AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

### ANTICONVULSANTS

BANZEL ORAL SUSPENSION	3	PA
BANZEL ORAL TABLET	3	PA
BRIVIACT ORAL SOLUTION	4	ST
BRIVIACT ORAL TABLET	4	ST
<i>carbamazepine oral capsule, er multiphase 12 hr</i>	2	
<i>carbamazepine oral suspension 100 mg/5 ml</i>	2	
<i>carbamazepine oral tablet</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>carbamazepine oral tablet extended release 12 hr</i>	2	
<i>carbamazepine oral tablet, chewable</i>	2	
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR	4	
CELONTIN ORAL CAPSULE 300 MG	3	
<i>clobazam oral suspension</i>	2	PA
<i>clobazam oral tablet</i>	2	PA
<i>clonazepam oral tablet</i>	1	
<i>clonazepam oral tablet, disintegrating</i>	2	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR	4	ST
DEPAKOTE ORAL TABLET, DELAYED RELEASE (DR/EC)	4	ST
DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE	4	ST
DIACOMIT ORAL CAPSULE	5	PA; SP
DIACOMIT ORAL POWDER IN PACKET	5	PA; SP

Drug Name	Drug Tier	Requirements / Limits
DIASTAT ACUDIAL RECTAL KIT	4	
DIASTAT RECTAL KIT	4	
<i>diazepam rectal kit</i>	2	
DILANTIN EXTENDED ORAL CAPSULE	4	
DILANTIN INFATABS ORAL TABLET, CHEWABLE	4	
DILANTIN ORAL CAPSULE	3	
DILANTIN-125 ORAL SUSPENSION	4	
<i>divalproex oral capsule, delayed rel sprinkle</i>	2	
<i>divalproex oral tablet extended release 24 hr</i>	2	
<i>divalproex oral tablet, delayed release (dr/ec)</i>	2	
EPIDIOLEX ORAL SOLUTION	5	PA; MSP
<i>epitol oral tablet</i>	1	
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR	4	
<i>ethosuximide oral capsule</i>	2	
<i>ethosuximide oral solution</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>felbamate oral suspension</i>	2	
<i>felbamate oral tablet</i>	2	
FELBATOL ORAL SUSPENSION	4	
FELBATOL ORAL TABLET	4	
FYCOMPA ORAL SUSPENSION	3	
FYCOMPA ORAL TABLET	3	
<i>gabapentin oral capsule</i>	2	
<i>gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	2	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	2	
GABITRIL ORAL TABLET	4	
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR	4	ST
KLONOPIN ORAL TABLET	4	
LAMICTAL XR STARTER (BLUE) ORAL TABLET EXTENDED REL,DOSE PACK	4	ST

Drug Name	Drug Tier	Requirements / Limits
LAMICTAL XR STARTER (GREEN) ORAL TABLET EXTENDED REL,DOSE PACK	4	ST
LAMICTAL XR STARTER (ORANGE) ORAL TABLET EXTENDED REL,DOSE PACK	4	ST
<i>lamotrigine oral tablet</i>	1	
<i>lamotrigine oral tablet disintegrating, dose pk</i>	2	
<i>lamotrigine oral tablet extended release 24hr</i>	2	
<i>lamotrigine oral tablet, chewable dispersible 25 mg</i>	2	
<i>lamotrigine oral tablet, chewable dispersible 5 mg</i>	1	
<i>lamotrigine oral tablet, disintegrating</i>	2	
<i>lamotrigine oral tablets, dose pack</i>	2	
<i>levetiracetam oral solution 100 mg/ml</i>	2	
<i>levetiracetam oral solution 500 mg/5 ml (5 ml)</i>	1	
<i>levetiracetam oral tablet</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>levetiracetam oral tablet extended release 24 hr</i>	2	
MYSOLINE ORAL TABLET	4	
NAYZILAM NASAL SPRAY, NON-AEROSOL	3	PA; QL
ONFI ORAL SUSPENSION	4	PA
ONFI ORAL TABLET 10 MG, 20 MG	4	PA
<i>oxcarbazepine oral suspension</i>	2	
<i>oxcarbazepine oral tablet</i>	2	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR	4	ST
PEGANONE ORAL TABLET	3	
<i>phenobarbital oral elixir</i>	1	
<i>phenobarbital oral tablet 100 mg, 15 mg</i>	1	
<i>phenobarbital oral tablet 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	2	
PHENYTEK ORAL CAPSULE	4	
<i>phenytoin oral suspension</i>	2	
<i>phenytoin oral tablet, chewable</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>phenytoin sodium extended oral capsule</i>	2	
<i>pregabalin oral capsule</i>	2	
<i>pregabalin oral solution</i>	2	
<i>primidone oral tablet</i>	1	
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR	3	ST
<i>roweepra oral tablet</i>	1	
SABRIL ORAL POWDER IN PACKET	5	PA; MSP
SABRIL ORAL TABLET	5	PA; MSP
SPRITAM ORAL TABLET FOR SUSPENSION	4	ST
<i>Metformin oralite oral tablet</i>	1	
<i>subvenite starter (blue) kit oral tablets, dose pack</i>	2	
<i>subvenite starter (green) kit oral tablets, dose pack</i>	2	
<i>subvenite starter (orange) kit oral tablets, dose pack</i>	2	
SYMPAZAN ORAL FILM	4	PA
TEGRETOL ORAL SUSPENSION	4	

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Drug Name	Drug Tier	Requirements / Limits
TEGRETOL ORAL TABLET	4	
TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR	4	
<i>tiagabine oral tablet</i>	2	
<i>topiramate oral capsule, sprinkle</i>	2	
<i>topiramate oral tablet</i>	2	
TROKENDI XR ORAL CAPSULE,EXTENDED RELEASE 24HR	4	ST
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)</i>	1	
<i>valproic acid oral capsule</i>	2	
VALTOCO NASAL SPRAY, NON-AEROSOL	4	QL
<i>vigabatrin oral powder in packet</i>	5	PA; MSP
<i>vigabatrin oral tablet</i>	5	PA; MSP
<i>vigadrone oral powder in packet</i>	5	PA; SP
VIMPAT ORAL SOLUTION	3	
VIMPAT ORAL TABLET	3	

Drug Name	Drug Tier	Requirements / Limits
XCOPRI MAINTENANCE PACK ORAL TABLET	4	QL
XCOPRI ORAL TABLET	4	QL
XCOPRI TITRATION PACK ORAL TABLETS, DOSE PACK	4	QL
ZARONTIN ORAL CAPSULE	4	
ZARONTIN ORAL SOLUTION	4	
<i>zonisamide oral capsule</i>	2	
<b>ANTIPARKINSONISM AGENTS</b>		
APOKYN SUBCUTANEOUS CARTRIDGE	5	PA; MSP
AZILECT ORAL TABLET	4	ST
<i>benztropine oral tablet</i>	1	
<i>bromocriptine oral capsule</i>	2	
<i>bromocriptine oral tablet</i>	2	
<i>carbidopa oral tablet</i>	2	PA
<i>carbidopa-levodopa oral tablet</i>	2	
<i>carbidopa-levodopa oral tablet extended release</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>carbidopa-levodopa oral tablet, disintegrating</i>	2	
<i>carbidopa-levodopa-entacapone oral tablet</i>	2	
COMTAN ORAL TABLET	4	
DUOPA J-TUBE INTESTINAL PUMP SUSPENSION	5	PA; MSP
<i>entacapone oral tablet</i>	1	
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; MSP
KYNMOBI SUBLINGUAL FILM 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	3	PA
LODOSYN ORAL TABLET	4	PA
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HR	4	
NEUPRO TRANSDERMAL PATCH 24 HOUR	4	
NOURIANZ ORAL TABLET	5	PA; SP; QL
OSMOLEX ER ORAL TABLET, IR - ER, BIPHASIC 24HR	5	PA; SP; QL

Drug Name	Drug Tier	Requirements / Limits
PARLODEL ORAL CAPSULE	4	
PARLODEL ORAL TABLET	4	
<i>pramipexole oral tablet</i>	2	
<i>pramipexole oral tablet extended release 24 hr</i>	2	
<i>rasagiline oral tablet</i>	2	
REQUIP XL ORAL TABLET EXTENDED RELEASE 24 HR 12 MG, 6 MG	4	
<i>ropinirole oral tablet</i>	2	
<i>ropinirole oral tablet extended release 24 hr</i>	2	
RYTARY ORAL CAPSULE, EXTENDED RELEASE	4	
<i>selegiline hcl oral capsule</i>	2	
<i>selegiline hcl oral tablet</i>	1	
SINEMET ORAL TABLET	4	
STALEVO 100 ORAL TABLET	4	
STALEVO 125 ORAL TABLET	4	
STALEVO 150 ORAL TABLET	4	
STALEVO 200 ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements / Limits
STALEVO 50 ORAL TABLET	4	
STALEVO 75 ORAL TABLET	4	
TASMAR ORAL TABLET 100 MG	4	PA
<i>tolcapone oral tablet</i>	2	PA
<i>trihexyphenidyl oral elixir</i>	1	
<i>trihexyphenidyl oral tablet</i>	1	
<b>MIGRAINE &amp; CLUSTER HEADACHE THERAPY</b>		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	3	PA; QL
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	3	PA
AJOVY SYRINGE SUBCUTANEOUS SYRINGE	3	PA; QL
<i>almotriptan malate oral tablet</i>	2	QL
AMERGE ORAL TABLET	4	ST; QL
CAFERGOT ORAL TABLET	4	
D.H.E.45 INJECTION SOLUTION	4	
<i>dihydroergotamine injection solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>dihydroergotamine nasal spray,non-aerosol</i>	2	ST; QL
<i>eletriptan oral tablet</i>	2	QL
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR	3	PA; QL
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE	3	PA; QL
ERGOMAR SUBLINGUAL TABLET	4	
<i>ergotamine-caffeine oral tablet</i>	1	
FROVA ORAL TABLET	4	ST; QL
<i>frovatriptan oral tablet</i>	2	QL
<i>migergot rectal suppository</i>	2	
MIGRANAL NASAL SPRAY,NON-AEROSOL	4	ST; QL
<i>naratriptan oral tablet</i>	2	QL
NURTEC ODT ORAL TABLET,DISINTEGRATING	4	PA; QL
ONZETRA XSAIL NASAL AEROSOL POWDR BREATH ACTIVATED	4	ST; QL
RELPAK ORAL TABLET	4	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
REYVOW ORAL TABLET	4	PA; QL
<i>rizatriptan oral tablet</i>	2	QL
<i>rizatriptan oral tablet, disintegrating</i>	2	QL
<i>sumatriptan nasal spray, non-aerosol</i>	2	QL
<i>sumatriptan succinate oral tablet</i>	2	QL
<i>sumatriptan succinate subcutaneous cartridge</i>	2	QL
<i>sumatriptan succinate subcutaneous pen injector</i>	2	QL
<i>sumatriptan succinate subcutaneous solution</i>	2	QL
<i>sumatriptan succinate subcutaneous syringe 6 mg/0.5 ml</i>	2	QL
<i>sumatriptan-naproxen oral tablet</i>	2	PA; QL
TOSYMRA NASAL SPRAY, NON-AEROSOL	4	ST; QL
UBRELVY ORAL TABLET	4	PA; QL
ZEMBRACE SYMTOUCH SUBCUTANEOUS PEN INJECTOR	4	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>zolmitriptan oral tablet</i>	2	QL
<i>zolmitriptan oral tablet, disintegrating</i>	2	QL
ZOMIG NASAL SPRAY, NON-AEROSOL	3	ST; QL
<b>MISCELLANEOUS NEUROLOGICAL THERAPY</b>		
ARICEPT ORAL TABLET	4	ST
AUSTEDO ORAL TABLET	5	PA; MSP; QL
<i>dalfampridine oral tablet extended release 12 hr</i>	5	PA; MSP
<i>donepezil oral tablet 10 mg, 5 mg</i>	2	
<i>donepezil oral tablet 23 mg</i>	2	ST
<i>donepezil oral tablet, disintegrating</i>	2	
EVRYSDI ORAL RECON SOLN	5	PA; MSP
EXELON TRANSDERMAL PATCH 24 HOUR	4	ST
<i>galantamine oral capsule, ext rel. pellets 24 hr</i>	2	
<i>galantamine oral solution</i>	2	
<i>galantamine oral tablet</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
HORIZANT ORAL TABLET EXTENDED RELEASE	4	ST
KEVEYIS ORAL TABLET	5	PA; SP
<i>memantine oral capsule,sprinkle,er 24hr</i>	2	
<i>memantine oral solution</i>	2	
<i>memantine oral tablet</i>	2	
MEMANTINE ORAL TABLETS,DOSE PACK	4	
NAMENDA ORAL TABLET	4	ST
NAMENDA TITRATION PAK ORAL TABLETS,DOSE PACK	4	
NAMENDA XR ORAL CAP,SPRINKLE,ER 24HR DOSE PACK	4	
NAMZARIC ORAL CAP,SPRINKLE,ER 24HR DOSE PACK	3	ST
NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR	3	ST
NUEDEXTA ORAL CAPSULE	3	PA

Drug Name	Drug Tier	Requirements / Limits
RAZADYNE ER ORAL CAPSULE,EXT REL. PELLETS 24 HR	4	ST
<i>rivastigmine tartrate oral capsule</i>	2	
<i>rivastigmine transdermal patch 24 hour</i>	2	
RUZURGI ORAL TABLET	5	PA; SP
TEGSEDI SUBCUTANEOUS SYRINGE	5	PA; MSP
<i>tetrabenazine oral tablet</i>	5	PA; MSP; QL
TYSABRI INTRAVENOUS SOLUTION	5	PA; MSP
<b>MUSCLE RELAXANTS &amp; ANTISPASMODIC THERAPY</b>		
<i>baclofen oral tablet 10 mg, 20 mg</i>	1	
BACLOFEN ORAL TABLET 5 MG	4	
<i>carisoprodol oral tablet</i>	2	
<i>carisoprodol-aspirin oral tablet</i>	2	
<i>carisoprodol-aspirin-codeine oral tablet</i>	2	QL
<i>chlorzoxazone oral tablet 250 mg</i>	2	PA
<i>chlorzoxazone oral tablet 375 mg, 750 mg</i>	1	PA

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Drug Name	Drug Tier	Requirements / Limits
<i>chlorzoxazone oral tablet 500 mg</i>	2	
<i>cyclobenzaprine oral capsule, extended release 24hr</i>	1	PA
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1	
<i>cyclobenzaprine oral tablet 7.5 mg</i>	1	PA
DANTRIUM ORAL CAPSULE 25 MG, 50 MG	4	
<i>dantrolene oral capsule</i>	2	
FEXMID ORAL TABLET	4	PA
LORZONE ORAL TABLET	4	PA
<i>meprobamate oral tablet</i>	2	
<i>metaxall oral tablet</i>	2	
<i>metaxalone oral tablet</i>	2	
<i>methocarbamol oral tablet</i>	1	
NORGESIC FORTE ORAL TABLET	4	
<i>orphenadrine citrate oral tablet extended release</i>	2	
<i>orphenadrine-asa-caffeine oral tablet 50-770-60 mg</i>	2	
<i>orphengesic forte oral tablet</i>	2	
<i>pyridostigmine bromide oral syrup</i>	2	

Drug Name	Drug Tier	Requirements / Limits
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	4	
<i>pyridostigmine bromide oral tablet 60 mg</i>	2	
<i>pyridostigmine bromide oral tablet extended release</i>	2	
ROBAXIN-750 ORAL TABLET	4	
SKELAXIN ORAL TABLET	4	
SOMA ORAL TABLET	4	
<i>tizanidine oral capsule</i>	2	
<i>tizanidine oral tablet</i>	1	
<i>vanadom oral tablet</i>	2	
ZANAFLEX ORAL CAPSULE	4	
ZANAFLEX ORAL TABLET	4	
<b>NARCOTIC ANALGESICS</b>		
<i>acetaminophen-caff-dihydrocod oral capsule</i>	2	ST; QL
<i>acetaminophen-caff-dihydrocod oral tablet 325-30-16 mg</i>	2	ST; QL
<i>acetaminophen-codeine oral solution 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml</i>	2	ST; QL
<i>acetaminophen-codeine oral tablet</i>	1	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
ACTIQ BUCCAL LOZENGE ON A HANDLE	4	ST; QL
ALLZITAL ORAL TABLET	4	PA
ARYMO ER ORAL TABLET,ORAL ONLY,EXTND RELEASE	4	ST; QL
<i>ascomp with codeine oral capsule</i>	2	ST; QL
BELBUCA BUCCAL FILM	3	ST; QL
<i>buprenorphine hcl sublingual tablet</i>	2	QL
<i>buprenorphine transdermal patch weekly</i>	2	ST; QL
<i>butalbital compound w/codeine oral capsule</i>	2	ST; QL
<i>butalbital-acetaminop-caf-cod oral capsule</i>	2	ST; QL
<i>butalbital-acetaminophen oral capsule</i>	2	
<i>butalbital-acetaminophen oral tablet</i>	2	
<i>butalbital-acetaminophen-caff oral capsule</i>	2	
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>butalbital-aspirin-caffeine oral capsule</i>	2	
<i>butalbital-aspirin-caffeine oral tablet</i>	2	
<i>codeine sulfate oral tablet</i>	2	ST; QL
<i>codeine-butalbital-asa-caff oral capsule</i>	2	ST; QL
DILAUDID ORAL LIQUID	4	ST; QL
DILAUDID ORAL TABLET	4	ST; QL
<i>diskets oral tablet,soluble</i>	2	ST; QL
DOLOPHINE ORAL TABLET	4	ST; QL
DSUVIA SUBLINGUAL TABLET IN APPLICATOR	4	
<i>dvorah oral tablet</i>	2	ST; QL
<i>endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	ST; QL
ESGIC ORAL CAPSULE	4	PA
ESGIC ORAL TABLET	4	PA
<i>fentanyl citrate buccal lozenge on a handle</i>	2	ST; QL
<i>fentanyl transdermal patch 72 hour</i>	2	ST; QL
FIORICET ORAL CAPSULE	4	PA

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Drug Name	Drug Tier	Requirements / Limits
FIORICET WITH CODEINE ORAL CAPSULE 50-300-40-30 MG	4	ST; QL
FIORINAL ORAL CAPSULE	4	PA
FIORINAL-CODEINE #3 ORAL CAPSULE	4	ST; QL
<i>hydrocodone bitartrate oral capsule, oral only, er 12hr</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15 ml(15 ml), 7.5-325 mg/15 ml</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg</i>	1	ST; QL
<i>hydrocodone-acetaminophen oral tablet 7.5-300 mg, 7.5-325 mg</i>	2	ST; QL
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	2	ST; QL
<i>hydromorphone oral liquid</i>	1	ST; QL
<i>hydromorphone oral tablet</i>	1	ST; QL
<i>hydromorphone oral tablet extended release 24 hr</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydromorphone rectal suppository</i>	1	ST; QL
HYSINGLA ER ORAL TABLET,ORAL ONLY,EXT.REL.24 HR	3	ST; QL
<i>ibuprofen-oxycodone oral tablet</i>	2	ST; QL
KADIAN ORAL CAPSULE,EXTEN D.RELEASE PELLETS 10 MG, 100 MG, 20 MG, 200 MG, 30 MG, 40 MG, 50 MG, 60 MG, 80 MG	4	ST; QL
<i>levorphanol tartrate oral tablet 2 mg</i>	2	PA; QL
LEVORPHANOL TARTRATE ORAL TABLET 3 MG	4	PA; QL
<i>lorcet hd oral tablet</i>	1	ST; QL
LORTAB ELIXIR ORAL SOLUTION 10-300 MG/15 ML	4	ST; QL
<i>meperidine oral solution</i>	2	ST; QL
<i>meperidine oral tablet</i>	2	ST; QL
<i>methadone oral concentrate</i>	2	ST; QL
<i>methadone oral solution</i>	1	ST; QL
<i>methadone oral tablet</i>	2	ST; QL
<i>methadone oral tablet,soluble</i>	2	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>methadose oral concentrate</i>	2	ST; QL
<i>methadose oral tablet, soluble</i>	2	ST; QL
<i>morphine concentrate oral solution</i>	2	ST; QL
<i>morphine oral capsule, er multiphase 24 hr</i>	2	ST; QL
<i>morphine oral capsule, extend. release pellets</i>	2	ST; QL
<i>morphine oral solution</i>	2	ST; QL
<i>morphine oral tablet</i>	1	ST; QL
<i>morphine oral tablet extended release</i>	2	ST; QL
<i>morphine rectal suppository 10 mg, 20 mg, 5 mg</i>	1	QL
<i>morphine rectal suppository 30 mg</i>	2	QL
MS CONTIN ORAL TABLET EXTENDED RELEASE	4	ST; QL
NALOCET ORAL TABLET	4	ST; QL
OXAYDO ORAL TABLET, ORAL ONLY	4	ST; QL
<i>oxycodone oral capsule</i>	2	ST; QL
<i>oxycodone oral concentrate</i>	2	ST; QL
<i>oxycodone oral solution</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>oxycodone oral tablet</i>	2	ST; QL
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-300 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	ST; QL
<i>oxycodone-aspirin oral tablet</i>	2	ST; QL
OXYCONTIN ORAL TABLET, ORAL ONLY, EXT. REL. 12 HR	3	ST; QL
<i>oxymorphone oral tablet</i>	2	ST; QL
<i>oxymorphone oral tablet extended release 12 hr</i>	2	ST; QL
PROBUPHINE SUBDERMAL IMPLANT	5	MSP
<i>prolate oral tablet</i>	2	ST; QL
ROXICODONE ORAL TABLET	4	ST; QL
SUBLOCADE SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE	5	MSP; QL
<i>tencon oral tablet 50-325 mg</i>	1	
TREZIX ORAL CAPSULE 320.5-30-16 MG	4	ST; QL
VANATOL LQ ORAL SOLUTION	4	PA

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Drug Name	Drug Tier	Requirements / Limits
VANATOL S ORAL SOLUTION	4	PA
<i>vtol lq oral solution</i>	2	
<i>zebutal oral capsule 50-325-40 mg</i>	2	
<b>NON-NARCOTIC ANALGESICS</b>		
<i>adult aspirin regimen oral tablet, delayed release (dr/ec)</i>	1	H.S.A.; ACA; OTC
ANAPROX DS ORAL TABLET	4	ST
ARTHROTEC 50 ORAL TABLET, IR, DELAYED REL, BIPHASIC	4	ST
ARTHROTEC 75 ORAL TABLET, IR, DELAYED REL, BIPHASIC	4	ST
<i>aspirin low dose oral tablet, delayed release (dr/ec)</i>	1	H.S.A.; ACA; OTC
<i>aspirin oral tablet</i>	1	H.S.A.; ACA; OTC
<i>aspirin oral tablet, chewable</i>	1	H.S.A.; ACA; OTC
<i>aspirin oral tablet, delayed release (dr/ec) 325 mg, 81 mg</i>	1	H.S.A.; ACA; OTC
<i>aspir-trin oral tablet, delayed release (dr/ec)</i>	1	H.S.A.; ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>bayer aspirin oral tablet</i>	1	H.S.A.; ACA; OTC
<i>buprenorphine-naloxone sublingual film 12-3 mg</i>	2	
<i>buprenorphine-naloxone sublingual film 2-0.5 mg, 4-1 mg, 8-2 mg</i>	2	QL
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg</i>	2	QL
<i>buprenorphine-naloxone sublingual tablet 8-2 mg</i>	2	
<i>butorphanol injection solution</i>	1	QL
<i>butorphanol nasal spray, non-aerosol</i>	2	QL
CAMBIA ORAL POWDER IN PACKET	4	ST; QL
<i>celecoxib oral capsule</i>	2	ST
<i>children's aspirin oral tablet, chewable</i>	1	H.S.A.; ACA; OTC
<i>choline, magnesium salicylate oral liquid</i>	1	
CONZIP ORAL CAPSULE, ER BIPHASE 24 HR 17-83	4	ST; QL
CONZIP ORAL CAPSULE, ER BIPHASE 24 HR 25-75	4	ST; QL
DAYPRO ORAL TABLET	4	ST

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Drug Name	Drug Tier	Requirements / Limits
<i>diclofenac potassium oral tablet</i>	2	
<i>diclofenac sodium oral tablet extended release 24 hr</i>	2	
<i>diclofenac sodium oral tablet, delayed release (dr/ec)</i>	2	
<i>diclofenac sodium topical drops</i>	1	QL
<i>diclofenac sodium topical gel 1 %</i>	2	ST; QL
<i>diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic</i>	2	
<i>diflunisal oral tablet</i>	2	
DISALCID ORAL TABLET	4	
DUEXIS ORAL TABLET	4	ST
<i>e.c. prin oral tablet, delayed release (dr/ec)</i>	1	H.S.A.; ACA; OTC
EC-NAPROSYN ORAL TABLET, DELAYED RELEASE (DR/EC)	4	ST
<i>ecotrin low strength oral tablet, delayed release (dr/ec)</i>	1	H.S.A.; ACA; OTC
<i>ecotrin oral tablet, delayed release (dr/ec)</i>	1	H.S.A.; ACA; OTC
<i>etodolac oral capsule</i>	2	
<i>etodolac oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>etodolac oral tablet extended release 24 hr</i>	2	
FELDENE ORAL CAPSULE	4	ST
<i>fenoprofen oral tablet</i>	2	ST
FLECTOR TRANSDERMAL PATCH 12 HOUR	3	ST; QL
<i>flurbiprofen oral tablet 100 mg</i>	2	
<i>ibu oral tablet</i>	1	
<i>ibuprofen oral suspension</i>	1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1	
INDOCIN ORAL SUSPENSION	4	PA
INDOCIN RECTAL SUPPOSITORY	4	
<i>indomethacin oral capsule</i>	1	
<i>indomethacin oral capsule, extended release</i>	1	
<i>ketoprofen oral capsule 25 mg</i>	2	PA
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	2	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr 200 mg</i>	1	ST
<i>ketorolac oral tablet</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
LICART TRANSDERMAL PATCH 24 HOUR	3	ST; QL
<i>lite coat aspirin oral tablet</i>	1	H.S.A.; ACA; OTC
LODINE ORAL TABLET	4	ST
<i>meclofenamate oral capsule</i>	2	
<i>mefenamic acid oral capsule</i>	2	
<i>meloxicam oral tablet 15 mg</i>	2	
<i>meloxicam oral tablet 7.5 mg</i>	2	QL
MOBIC ORAL TABLET 15 MG	4	ST
MOBIC ORAL TABLET 7.5 MG	4	ST; QL
<i>nabumetone oral tablet</i>	2	
NALFON ORAL TABLET	4	ST
<i>naloxone injection solution</i>	2	H.S.A.
<i>naloxone injection syringe</i>	1	H.S.A.
<i>naltrexone oral tablet</i>	2	
NAPRELAN CR ORAL TABLET, ER MULTIPHASE 24 HR	4	ST
NAPROSYN ORAL SUSPENSION	4	ST
NAPROSYN ORAL TABLET 500 MG	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>naproxen oral suspension</i>	2	ST
<i>naproxen oral tablet</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec)</i>	2	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	
<i>naproxen sodium oral tablet, er multiphase 24 hr</i>	2	ST
<i>naproxen-esomeprazole oral tablet, ir, delayed rel, biphasic</i>	2	ST
NARCAN NASAL SPRAY, NON-AEROSOL 4 MG/ACTUATION	3	H.S.A.; QL
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HR	4	ST; QL
<i>oxaprozin oral tablet</i>	2	
<i>pentazocine-naloxone oral tablet</i>	2	ST; QL
<i>piroxicam oral capsule</i>	2	
RELAFEN ORAL TABLET	4	ST
<i>salsalate oral tablet</i>	1	
SPRIX NASAL SPRAY, NON-AEROSOL	5	ST; SP; QL
<i>st joseph aspirin oral tablet, chewable</i>	1	H.S.A.; ACA; OTC

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Drug Name	Drug Tier	Requirements / Limits
<i>st. joseph aspirin oral tablet, delayed release (dr/ec)</i>	1	H.S.A.; ACA; OTC
SUBOXONE SUBLINGUAL FILM 12-3 MG	4	
SUBOXONE SUBLINGUAL FILM 2-0.5 MG, 4-1 MG, 8-2 MG	4	QL
<i>sulindac oral tablet</i>	1	
<i>tolmetin oral capsule</i>	2	ST
<i>tolmetin oral tablet 200 mg</i>	2	
<i>tolmetin oral tablet 600 mg</i>	2	ST
TRAMADOL ORAL CAPSULE, ER BIPHASE 24 HR 17-83	4	ST; QL
TRAMADOL ORAL CAPSULE, ER BIPHASE 24 HR 25-75	4	ST; QL
TRAMADOL ORAL TABLET 100 MG	4	ST; QL
<i>tramadol oral tablet 50 mg</i>	2	ST; QL
<i>tramadol oral tablet extended release 24 hr</i>	2	ST; QL
<i>tramadol oral tablet, er multiphase 24 hr</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>tramadol-acetaminophen oral tablet</i>	1	ST; QL
ULTRACET ORAL TABLET	4	ST; QL
ULTRAM ORAL TABLET	4	ST; QL
VIMOVO ORAL TABLET, IR, DELAYED REL, BIPHASIC	4	ST
VIVITROL INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON	5	MSP
VOLTAREN TOPICAL GEL	4	ST; QL
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 1.4-0.36 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG	3	QL
ZUBSOLV SUBLINGUAL TABLET 11.4-2.9 MG	3	
<b>PSYCHOTHERAPEUTIC DRUGS</b>		
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON	3	

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Drug Name	Drug Tier	Requirements / Limits
ABILIFY MAINTENANCE INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE SYRING	3	
ABILIFY MYCITE ORAL TABLET WITH SENSOR AND PATCH	4	QL
ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED	4	
ADDERALL XR ORAL CAPSULE, EXTENDED RELEASE 24HR	4	PA
ADDYI ORAL TABLET	4	PA
ADHANSIA XR ORAL CAPSULE, ER BIPHASIC 20-80	4	PA
ADZENYS ER ORAL SUSPENSION, IR - ER, BIPHASIC 24HR	4	PA
ADZENYS XR-ODT ORAL TABLET, DISINTEGRATING ER BIPHASIC 24H	4	PA
<i>alprazolam intensol oral concentrate</i>	1	
<i>alprazolam oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 3 mg</i>	1	
<i>alprazolam oral tablet extended release 24 hr 1 mg, 2 mg</i>	2	
<i>alprazolam oral tablet, disintegrating</i>	1	
<i>amitriptyline oral tablet 10 mg, 25 mg</i>	1	
<i>amitriptyline oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>	2	
<i>amitriptyline-chlordiazepoxide oral tablet</i>	1	
<i>amoxapine oral tablet</i>	2	
<i>amphetamine sulfate oral tablet</i>	2	PA
ANAFRANIL ORAL CAPSULE	4	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HR	4	ST; QL
APTENSIO XR ORAL CAPSULE, ER SPRINKLE, BIPHASIC 40-60	4	PA
<i>aripiprazole oral solution</i>	2	
<i>aripiprazole oral tablet</i>	2	QL
<i>aripiprazole oral tablet, disintegrating</i>	2	QL

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Drug Name	Drug Tier	Requirements / Limits
ARISTADA INITIO INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING	3	
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING	3	
<i>armodafinil oral tablet</i>	2	PA; QL
ATIVAN ORAL TABLET	4	
<i>atomoxetine oral capsule</i>	2	PA
BELSOMRA ORAL TABLET	4	ST; QL
<i>bupropion hcl oral tablet</i>	2	
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	2	QL
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	4	ST; QL
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	2	QL
<i>bupropion hcl oral tablet</i>	2	
<i>chlordiazepoxide hcl oral capsule</i>	1	
<i>chlorpromazine oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>citalopram oral solution</i>	2	H.S.A.
<i>citalopram oral tablet</i>	1	H.S.A.; QL
<i>clomipramine oral capsule</i>	2	
<i>clonidine hcl oral tablet extended release 12 hr</i>	2	PA
<i>clorazepate dipotassium oral tablet</i>	2	
<i>clozapine oral tablet</i>	2	
<i>clozapine oral tablet, disintegrating</i>	2	
CLOZARIL ORAL TABLET	4	
COTEMPLA XR-ODT ORAL TABLET,DISINTEGRER BIPHASE 24H	4	PA
DAYTRANA TRANSDERMAL PATCH 24 HOUR 10 MG/9 HR, 15 MG/9 HR, 20 MG/9 HR	3	PA
DAYTRANA TRANSDERMAL PATCH 24 HOUR 30 MG/9 HR	3	PA; ST
DAYVIGO ORAL TABLET	4	ST
<i>desipramine oral tablet</i>	2	
DESOXYN ORAL TABLET	4	PA

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Drug Name	Drug Tier	Requirements / Limits
DESVENLAFAXIN E ORAL TABLET EXTENDED RELEASE 24 HR	4	ST; QL
<i>desvenlafaxine succinate oral tablet extended release 24 hr</i>	2	ST; QL
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE	4	PA
<i>dexmethylphenidate oral capsule,er biphasic 50-50</i>	2	PA
<i>dexmethylphenidate oral tablet</i>	2	PA
<i>dextroamphetamine oral capsule, extended release</i>	2	PA
<i>dextroamphetamine oral solution</i>	2	PA
<i>dextroamphetamine oral tablet</i>	2	PA
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr</i>	2	PA; CSE-9
<i>dextroamphetamine-amphetamine oral tablet</i>	2	PA
<i>diazepam intensol oral concentrate</i>	1	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	1	
<i>diazepam oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>doxepin oral capsule</i>	2	
<i>doxepin oral concentrate</i>	1	
<i>doxepin oral tablet</i>	2	PA; QL
<i>duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	2	QL
<i>duloxetine oral capsule,delayed release(dr/ec) 40 mg</i>	2	ST; QL
DYANAVEL XR ORAL SUSPEN, IR - ER, BIPHASIC 24HR	3	PA
EDLUAR SUBLINGUAL TABLET	4	ST; QL
EMSAM TRANSDERMAL PATCH 24 HOUR	4	
<i>ergoloid oral tablet</i>	1	
<i>escitalopram oxalate oral solution</i>	2	H.S.A.
<i>escitalopram oxalate oral tablet</i>	1	H.S.A.; QL
<i>estazolam oral tablet</i>	1	
<i>eszopiclone oral tablet</i>	2	QL
EVEKEO ODT ORAL TABLET,DISINTEGRATING	4	PA
EVEKEO ORAL TABLET	4	PA
FANAPT ORAL TABLET	4	QL

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Drug Name	Drug Tier	Requirements / Limits
FANAPT ORAL TABLETS,DOSE PACK	4	QL
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK	3	ST; QL
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR	3	ST; QL
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	H.S.A.; QL
<i>fluoxetine oral capsule 20 mg</i>	1	H.S.A.
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	2	H.S.A.; QL
<i>fluoxetine oral solution</i>	2	H.S.A.
<i>fluoxetine oral tablet 10 mg</i>	2	ST; QL
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	2	ST
<i>fluphenazine hcl oral concentrate</i>	1	
<i>fluphenazine hcl oral elixir</i>	1	
<i>fluphenazine hcl oral tablet</i>	2	
<i>flurazepam oral capsule</i>	1	
<i>fluvoxamine oral capsule, extended release 24hr</i>	2	ST; QL
<i>fluvoxamine oral tablet</i>	2	H.S.A.; QL

Drug Name	Drug Tier	Requirements / Limits
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HR	4	ST; QL
GEODON ORAL CAPSULE	4	QL
<i>guanfacine oral tablet extended release 24 hr</i>	2	PA
<i>guanidine oral tablet</i>	1	
HALCION ORAL TABLET 0.25 MG	4	
<i>haloperidol lactate oral concentrate</i>	1	
<i>haloperidol oral tablet</i>	1	
HETLIOZ ORAL CAPSULE	5	PA; MSP; QL
<i>imipramine hcl oral tablet</i>	1	
<i>imipramine pamoate oral capsule</i>	2	
INTERMEZZO SUBLINGUAL TABLET 1.75 MG	4	ST; QL
INVEGA ORAL TABLET EXTENDED RELEASE 24HR	4	QL
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE	4	
JORNAY PM ORAL CAPSULE, DEL REL, EXT REL SPRINK	4	PA

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Drug Name	Drug Tier	Requirements / Limits
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HR	4	PA; ST
KETAMINE SUBLINGUAL TROCHE	4	
LATUDA ORAL TABLET	3	QL
<i>lithium carbonate oral capsule</i>	1	
<i>lithium carbonate oral tablet</i>	1	
<i>lithium carbonate oral tablet extended release</i>	1	
<i>lithium citrate oral solution 8 meq/5 ml</i>	1	
LITHOBID ORAL TABLET EXTENDED RELEASE	4	
<i>lorazepam intensol oral concentrate</i>	1	
<i>lorazepam oral concentrate</i>	1	
<i>lorazepam oral tablet</i>	1	
<i>loxapine succinate oral capsule</i>	2	
<i>maprotiline oral tablet</i>	2	
MARPLAN ORAL TABLET	4	
<i>methamphetamine oral tablet</i>	2	PA
METHYLIN ORAL SOLUTION	4	PA

Drug Name	Drug Tier	Requirements / Limits
METHYLPHENIDATE HCL ORAL CAP,ER SPRINKLE,BIPHASIC 40-60	4	PA
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	2	PA
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	2	PA
<i>methylphenidate hcl oral solution</i>	2	PA
<i>methylphenidate hcl oral tablet</i>	2	PA
<i>methylphenidate hcl oral tablet extended release</i>	2	PA
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	2	PA
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 72 MG	4	PA
<i>methylphenidate hcl oral tablet, chewable</i>	2	PA
<i>midazolam oral syrup 2 mg/ml</i>	2	
<i>mirtazapine oral tablet</i>	2	
<i>mirtazapine oral tablet, disintegrating</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
MKO (MIDAZOLAM- KETAMINE- ONDAN) SUBLINGUAL TROCHE	4	
<i>modafinil oral tablet</i>	2	PA; QL
<i>molindone oral tablet</i>	2	
MYDAYIS ORAL CAPSULE, ER TRIPHASIC 24 HR 12.5 MG, 50 MG	3	PA; ST
MYDAYIS ORAL CAPSULE, ER TRIPHASIC 24 HR 25 MG, 37.5 MG	3	PA
NARDIL ORAL TABLET	4	
<i>nefazodone oral tablet</i>	2	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	4	
<i>nortriptyline oral capsule</i>	1	
<i>nortriptyline oral solution</i>	2	
NUPLAZID ORAL CAPSULE	5	PA; MSP; QL
NUPLAZID ORAL TABLET 10 MG	5	PA; MSP; QL
<i>olanzapine oral tablet</i>	1	QL
<i>olanzapine oral tablet, disintegrating</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>olanzapine-fluoxetine oral capsule</i>	2	
<i>oxazepam oral capsule</i>	2	
<i>paliperidone oral tablet extended release 24hr</i>	2	QL
PAMELOR ORAL CAPSULE	4	
PARNATE ORAL TABLET	4	
<i>paroxetine hcl oral tablet</i>	1	H.S.A.; QL
<i>paroxetine hcl oral tablet extended release 24 hr</i>	2	ST; QL
<i>paroxetine mesylate(menop.sym ) oral capsule</i>	2	ST; QL
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR	4	ST; QL
PAXIL ORAL SUSPENSION	4	ST
PAXIL ORAL TABLET	4	ST; QL
<i>perphenazine oral tablet</i>	2	
<i>perphenazine-amitriptyline oral tablet</i>	2	
PEXEVA ORAL TABLET	4	ST; QL
<i>phenelzine oral tablet</i>	2	
<i>pimozide oral tablet</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>procentra oral solution</i>	2	PA
<i>protriptyline oral tablet</i>	2	
<i>quetiapine oral tablet</i>	2	QL
<i>quetiapine oral tablet extended release 24 hr</i>	2	QL
QUILLICHEW ER ORAL TABLET,CHEW,IR - ER.BIPHASIC24HR	3	PA; ST
QUILLIVANT XR ORAL SUSPENSION,EXT REL 24HR,RECON	3	PA
<i>ramelteon oral tablet</i>	2	QL
RELEXXII ORAL TABLET EXTENDED RELEASE 24HR	4	PA
REMERON ORAL TABLET 15 MG, 30 MG	4	
REMERON SOLTAB ORAL TABLET,DISINTEGRATING	4	
RESTORIL ORAL CAPSULE	4	
REXULTI ORAL TABLET	4	QL
RISPERDAL ORAL SOLUTION	4	

Drug Name	Drug Tier	Requirements / Limits
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	4	QL
<i>risperidone oral solution</i>	2	
<i>risperidone oral tablet</i>	1	QL
<i>risperidone oral tablet,disintegrating</i>	2	QL
RITALIN LA ORAL CAPSULE,ER BIPHASIC 50-50 10 MG, 20 MG, 30 MG, 40 MG	4	PA
RITALIN ORAL TABLET	4	PA
SAPHRIS SUBLINGUAL TABLET	4	QL
SARAFEM ORAL TABLET 10 MG	4	ST; QL
SARAFEM ORAL TABLET 20 MG	4	ST
<i>seconal sodium oral capsule</i>	2	QL
SECUADO TRANSDERMAL PATCH 24 HOUR	4	QL
<i>sertraline oral concentrate</i>	2	H.S.A.
<i>sertraline oral tablet</i>	1	H.S.A.; QL
SILENOR ORAL TABLET	4	ST; QL
SUNOSI ORAL TABLET	3	PA; QL

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Drug Name	Drug Tier	Requirements / Limits
SYMBYAX ORAL CAPSULE 12-50 MG, 3-25 MG, 6-25 MG, 6-50 MG	4	
<i>temazepam oral capsule</i>	1	
<i>thioridazine oral tablet</i>	1	
<i>thiothixene oral capsule</i>	2	
TRANXENE T-TAB ORAL TABLET 7.5 MG	4	
<i>tranylcypromine oral tablet</i>	2	
<i>trazodone oral tablet 100 mg, 50 mg</i>	1	
<i>trazodone oral tablet 150 mg, 300 mg</i>	2	
<i>triazolam oral tablet</i>	1	
<i>trifluoperazine oral tablet</i>	1	
<i>trimipramine oral capsule</i>	2	
TRINTELLIX ORAL TABLET	4	ST; QL
<i>venlafaxine oral capsule, extended release 24hr</i>	2	QL
<i>venlafaxine oral tablet</i>	2	QL
<i>venlafaxine oral tablet extended release 24hr</i>	2	ST; QL
VERSACLOZ ORAL SUSPENSION	4	

Drug Name	Drug Tier	Requirements / Limits
VIIBRYD ORAL TABLET	3	ST; QL
VIIBRYD ORAL TABLETS, DOSE PACK 10 MG (7)-20 MG (23)	3	ST; QL
VRAYLAR ORAL CAPSULE	4	QL
VRAYLAR ORAL CAPSULE, DOSE PACK	4	QL
VYLEESI SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; QL
VYVANSE ORAL CAPSULE	3	PA; ST
VYVANSE ORAL TABLET, CHEWABLE	3	PA; ST
WAKIX ORAL TABLET	5	PA; MSP; QL
XYREM ORAL SOLUTION	5	PA; SP
<i>zaleplon oral capsule</i>	2	QL
<i>zenzedi oral tablet 10 mg, 5 mg</i>	2	PA
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	4	PA
<i>ziprasidone hcl oral capsule</i>	2	QL
<i>zolpidem oral tablet</i>	2	QL
<i>zolpidem oral tablet, ext release multiphase</i>	2	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>zolpidem sublingual tablet</i>	2	QL
ZOLPIMIST ORAL SPRAY, NON-AEROSOL	4	ST; QL
ZYPREXA ORAL TABLET	4	QL
ZYPREXA ZYDIS ORAL TABLET, DISINTEGRATING	4	QL

## CARDIOVASCULAR, HYPERTENSION & LIPIDS

### ANTIARRHYTHMIC AGENTS

<i>amiodarone oral tablet</i>	2	
BETAPACE AF ORAL TABLET	4	ST
BETAPACE ORAL TABLET	4	ST
<i>disopyramide phosphate oral capsule</i>	2	
<i>dofetilide oral capsule</i>	2	
<i>flecainide oral tablet</i>	2	
<i>mexiletine oral capsule</i>	2	
MULTAQ ORAL TABLET	4	
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE	4	
NORPACE ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	2	
<i>propafenone oral capsule, extended release 12 hr</i>	2	
<i>propafenone oral tablet</i>	2	
<i>quinidine gluconate oral tablet extended release</i>	2	
<i>quinidine sulfate oral tablet 200 mg</i>	1	
<i>quinidine sulfate oral tablet 300 mg</i>	2	
RYTHMOL SR ORAL CAPSULE, EXTENDED RELEASE 12 HR	4	
<i>sotalol af oral tablet</i>	2	
<i>sotalol oral tablet</i>	2	
SOTYLIZE ORAL SOLUTION	3	

### ANTIHYPERTENSIVE THERAPY

ACCUPRIL ORAL TABLET	4	
ACCURETIC ORAL TABLET	4	
<i>acebutolol oral capsule</i>	1	H.S.A.
ADALAT CC ORAL TABLET EXTENDED RELEASE	4	ST
ALDACTAZIDE ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements / Limits
ALDACTONE ORAL TABLET	4	
<i>aliskiren oral tablet</i>	2	
ALTACE ORAL CAPSULE	4	
<i>amiloride oral tablet</i>	2	
<i>amiloride-hydrochlorothiazide oral tablet</i>	2	
<i>amlodipine oral tablet</i>	1	CISP-1; H.S.A.
<i>amlodipine-benazepril oral capsule</i>	2	CISP; H.S.A.
<i>amlodipine-olmesartan oral tablet</i>	2	H.S.A.
<i>amlodipine-valsartan oral tablet</i>	2	CISP; H.S.A.
<i>amlodipine-valsartan-hcthiazyd oral tablet</i>	2	H.S.A.
<i>atenolol oral tablet</i>	1	CISP; H.S.A.
<i>atenolol-chlorthalidone oral tablet</i>	1	H.S.A.
<i>benazepril oral tablet</i>	1	H.S.A.
<i>benazepril-hydrochlorothiazide oral tablet</i>	1	H.S.A.
<i>betaxolol oral tablet</i>	2	H.S.A.
BIDIL ORAL TABLET	4	
<i>bisoprolol fumarate oral tablet</i>	2	H.S.A.

Drug Name	Drug Tier	Requirements / Limits
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	2	CISP; H.S.A.
<i>bumetanide oral tablet</i>	2	
BYSTOLIC ORAL TABLET	3	ST
CALAN SR ORAL TABLET EXTENDED RELEASE	4	ST
<i>candesartan oral tablet</i>	2	H.S.A.
<i>candesartan-hydrochlorothiazid oral tablet</i>	2	H.S.A.
<i>captopril oral tablet</i>	2	H.S.A.
<i>captopril-hydrochlorothiazide oral tablet</i>	2	H.S.A.
CARDIZEM CD ORAL CAPSULE,EXTENDED RELEASE 24HR	4	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HR	4	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	4	
CARDURA ORAL TABLET	4	ST; QL
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR	4	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
CAROSPIR ORAL SUSPENSION	4	PA
<i>cartia xt oral capsule, extended release 24hr</i>	2	H.S.A.
<i>carvedilol oral tablet</i>	1	CISP; H.S.A.
<i>carvedilol phosphate oral capsule, er multiphase 24 hr</i>	2	
CATAPRES ORAL TABLET	4	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY	4	QL
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY	4	QL
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY	4	QL
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	2	H.S.A.
<i>clonidine hcl oral tablet</i>	1	CISP; H.S.A.
<i>clonidine transdermal patch weekly</i>	2	QL
CONSENSI ORAL TABLET	4	PA
COREG CR ORAL CAPSULE, ER MULTIPHASE 24 HR	4	ST
CORGARD ORAL TABLET	4	ST
DEMSER ORAL CAPSULE	4	PA

Drug Name	Drug Tier	Requirements / Limits
DIBENZYLINE ORAL CAPSULE	4	PA
<i>diltiazem hcl oral capsule, extended release 12 hr</i>	2	H.S.A.
<i>diltiazem hcl oral capsule, extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	2	H.S.A.
<i>diltiazem hcl oral capsule, extended release 24hr 120 mg, 180 mg, 240 mg, 360 mg</i>	2	H.S.A.
<i>diltiazem hcl oral capsule, extended release 24hr 300 mg</i>	2	H.S.A.
<i>diltiazem hcl oral tablet</i>	2	H.S.A.
<i>diltiazem hcl oral tablet extended release 24 hr</i>	2	H.S.A.
<i>dilt-xr oral capsule, ext. rel 24h degradable</i>	2	H.S.A.
DIURIL ORAL SUSPENSION	4	
<i>doxazosin oral tablet</i>	2	QL
DYAZIDE ORAL CAPSULE	4	
DYRENIUM ORAL CAPSULE	4	
EDARBI ORAL TABLET	3	ST
EDARBYCLOR ORAL TABLET	3	ST

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Drug Name	Drug Tier	Requirements / Limits
EDECIN ORAL TABLET	4	
<i>enalapril maleate oral tablet</i>	2	H.S.A.
<i>enalapril-hydrochlorothiazide oral tablet</i>	2	H.S.A.
<i>eplerenone oral tablet</i>	2	CISP
<i>eprosartan oral tablet</i>	2	H.S.A.
<i>ethacrynic acid oral tablet</i>	2	
<i>felodipine oral tablet extended release 24 hr</i>	2	H.S.A.
FLOLAN INTRAVENOUS RECON SOLN	5	PA; MSP
<i>fosinopril oral tablet</i>	2	H.S.A.
<i>fosinopril-hydrochlorothiazide oral tablet</i>	2	H.S.A.
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	1	CISP; H.S.A.
<i>furosemide oral tablet</i>	1	CISP; H.S.A.
<i>guanfacine oral tablet</i>	1	
HEMANGEOL ORAL SOLUTION	5	SP
<i>hydralazine oral tablet</i>	1	CISP
<i>hydrochlorothiazide oral capsule</i>	1	CISP; H.S.A.

Drug Name	Drug Tier	Requirements / Limits
<i>hydrochlorothiazide oral tablet</i>	1	CISP; H.S.A.
<i>indapamide oral tablet</i>	1	H.S.A.
INNOPRAN XL ORAL CAPSULE, EXTENDED RELEASE 24HR	4	ST
INSPIRA ORAL TABLET	4	
<i>irbesartan oral tablet</i>	2	H.S.A.
<i>irbesartan-hydrochlorothiazide oral tablet</i>	2	H.S.A.
<i>isradipine oral capsule</i>	2	H.S.A.
<i>labetalol oral tablet</i>	2	
LASIX ORAL TABLET	4	
<i>lisinopril oral tablet</i>	1	CISP; H.S.A.
<i>lisinopril-hydrochlorothiazide oral tablet</i>	1	CISP; H.S.A.
LOPRESSOR ORAL TABLET	4	ST
<i>losartan oral tablet</i>	1	CISP-1; H.S.A.
<i>losartan-hydrochlorothiazide oral tablet</i>	1	CISP; H.S.A.
LOTENSIN HCT ORAL TABLET	4	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	4	

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Drug Name	Drug Tier	Requirements / Limits
<i>matzim la oral tablet extended release 24 hr</i>	2	H.S.A.
MAXZIDE ORAL TABLET	4	
MAXZIDE-25MG ORAL TABLET	4	
<i>methyl dopa oral tablet</i>	1	
<i>methyl dopa-hydrochlorothiazide oral tablet</i>	1	CISP
<i>metolazone oral tablet</i>	2	H.S.A.
<i>metoprolol succinate oral tablet extended release 24 hr</i>	2	CISP; H.S.A.
<i>metoprolol ta-hydrochlorothiaz oral tablet</i>	2	H.S.A.
<i>metoprolol tartrate intravenous solution</i>	2	CISP-1
<i>metoprolol tartrate oral tablet</i>	1	CISP; H.S.A.
<i>metirosine oral capsule</i>	2	PA
MINIPRESS ORAL CAPSULE	4	
<i>minoxidil oral tablet</i>	2	
<i>moexipril oral tablet</i>	2	H.S.A.
<i>nadolol oral tablet</i>	2	H.S.A.
<i>nadolol-bendroflumethiazide oral tablet 80-5 mg</i>	2	H.S.A.
<i>nicardipine oral capsule</i>	2	H.S.A.

Drug Name	Drug Tier	Requirements / Limits
<i>nifedipine oral capsule</i>	2	H.S.A.
<i>nifedipine oral tablet extended release</i>	2	H.S.A.
<i>nifedipine oral tablet extended release 24hr</i>	2	H.S.A.
<i>nimodipine oral capsule</i>	2	
<i>nisoldipine oral tablet extended release 24 hr</i>	2	H.S.A.
NYMALIZE ORAL SYRINGE	4	
<i>olmesartan oral tablet</i>	1	H.S.A.
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg</i>	1	H.S.A.
<i>olmesartan-amlodipin-hcthiazyd oral tablet 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</i>	2	H.S.A.
<i>olmesartan-hydrochlorothiazide oral tablet</i>	1	H.S.A.
ORENITRAM ORAL TABLET EXTENDED RELEASE	5	PA; MSP
<i>perindopril erbumine oral tablet</i>	2	H.S.A.
<i>phenoxybenzamine oral capsule</i>	2	PA
<i>pindolol oral tablet</i>	2	H.S.A.

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Drug Name	Drug Tier	Requirements / Limits
<i>prazosin oral capsule</i>	2	
PRESTALIA ORAL TABLET	4	ST
PRINIVIL ORAL TABLET 10 MG, 20 MG	4	
PROCARDIA ORAL CAPSULE	4	ST
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24HR	4	ST
<i>propranolol oral capsule, extended release 24 hr</i>	2	H.S.A.
<i>propranolol oral solution</i>	1	H.S.A.
<i>propranolol oral tablet</i>	1	CISP; H.S.A.
<i>propranolol-hydrochlorothiazid oral tablet</i>	1	CISP; H.S.A.
<i>quinapril oral tablet</i>	2	H.S.A.
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1	H.S.A.
<i>quinapril-hydrochlorothiazide oral tablet 20-25 mg</i>	2	H.S.A.
<i>ramipril oral capsule 1.25 mg</i>	1	CISP; H.S.A.
<i>ramipril oral capsule 10 mg, 2.5 mg, 5 mg</i>	1	CISP-1; H.S.A.

Drug Name	Drug Tier	Requirements / Limits
REMODULIN INJECTION SOLUTION	5	PA; MSP
<i>spironolactone oral tablet 100 mg</i>	2	CISP
<i>spironolactone oral tablet 25 mg, 50 mg</i>	1	CISP
<i>spironolactone-hydrochlorothiazid oral tablet</i>	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	4	ST
TARKA ORAL TABLET, IR - ER, BIPHASIC 24HR 2-180 MG, 2-240 MG, 4-240 MG	4	
<i>taztia xt oral capsule, extended release 24 hr</i>	2	H.S.A.
TEKTURNA HCT ORAL TABLET	3	
<i>telmisartan oral tablet</i>	2	H.S.A.
<i>telmisartan-amlodipine oral tablet</i>	2	H.S.A.
<i>telmisartan-hydrochlorothiazid oral tablet</i>	2	H.S.A.
TENORETIC 100 ORAL TABLET	4	ST
TENORETIC 50 ORAL TABLET	4	ST

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Drug Name	Drug Tier	Requirements / Limits
TENORMIN ORAL TABLET	4	ST
<i>terazosin oral capsule</i>	2	QL
<i>tiadylt er oral capsule,extended release 24 hr</i>	2	H.S.A.
TIAZAC ORAL CAPSULE,EXTENDED RELEASE 24 HR	4	
<i>timolol maleate oral tablet</i>	2	H.S.A.
<i>torse mide oral tablet</i>	1	CISP
<i>trandolapril oral tablet</i>	1	H.S.A.
<i>trandolapril-verapamil oral tablet, ir - er, biphasic 24hr</i>	2	H.S.A.
<i>treprostinil sodium injection solution</i>	5	PA; MSP
<i>triamterene oral capsule</i>	2	
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	2	CISP
<i>triamterene-hydrochlorothiazid oral tablet</i>	2	CISP
UPTRAVI ORAL TABLET	5	PA; MSP
UPTRAVI ORAL TABLETS,DOSE PACK	5	PA; MSP
<i>valsartan oral tablet</i>	2	H.S.A.

Drug Name	Drug Tier	Requirements / Limits
<i>valsartan-hydrochlorothiazide oral tablet</i>	2	H.S.A.
VASERETIC ORAL TABLET	4	
VASOTEC ORAL TABLET	4	
<i>veletri intravenous recon soln</i>	5	PA; MSP
<i>verapamil oral capsule, 24 hr er pellet ct</i>	2	H.S.A.
<i>verapamil oral capsule,ext rel. pellets 24 hr</i>	2	H.S.A.
<i>verapamil oral tablet</i>	1	CISP; H.S.A.
<i>verapamil oral tablet extended release</i>	2	H.S.A.
VERELAN ORAL CAPSULE,EXT REL. PELLETS 24 HR	4	ST
VERELAN PM ORAL CAPSULE, 24 HR ER PELLET CT	4	ST
ZESTORETIC ORAL TABLET	4	
ZESTRIL ORAL TABLET	4	
ZIAC ORAL TABLET	4	ST
<b>CARDIAC GLYCOSIDES</b>		
<i>digitek oral tablet</i>	2	
<i>digox oral tablet</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	1	
<i>digoxin oral tablet</i>	2	
LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG), 62.5 MCG (0.0625 MG)	4	
<b>COAGULATION THERAPY</b>		
ADVATE INTRAVENOUS RECON SOLN	5	PA; MSP
ADYNOVATE INTRAVENOUS SOLUTION	5	PA; MSP
AFSTYLA INTRAVENOUS RECON SOLN	5	PA; MSP
ALPROLIX INTRAVENOUS RECON SOLN	5	PA; MSP
AMICAR ORAL SOLUTION	4	
AMICAR ORAL TABLET	4	
<i>aminocaproic acid oral solution</i>	2	
<i>aminocaproic acid oral tablet</i>	2	
ARIXTRA SUBCUTANEOUS SYRINGE	5	SP
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr</i>	2	H.S.A.

Drug Name	Drug Tier	Requirements / Limits
ASPIRIN- OMEPRAZOLE ORAL TABLET,IR,DELAYED REL,BIPHASIC	4	PA
BENEFIX INTRAVENOUS RECON SOLN	5	PA; MSP
BRILINTA ORAL TABLET	3	
CABLIVI INJECTION KIT	5	PA; SP
CEPROTIN (BLUE BAR) INTRAVENOUS RECON SOLN	5	PA; MSP
CEPROTIN (GREEN BAR) INTRAVENOUS RECON SOLN	5	PA; MSP
<i>cilostazol oral tablet</i>	1	
<i>clopidogrel oral tablet</i>	2	H.S.A.
COAGADEX INTRAVENOUS RECON SOLN	5	PA; SP
<i>dipyridamole oral tablet</i>	2	H.S.A.
DOPTELET (15 TAB PACK) ORAL TABLET	5	PA; MSP; QL
EFFIENT ORAL TABLET	4	
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK	3	PA

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Drug Name	Drug Tier	Requirements / Limits
ELIQUIS ORAL TABLET	3	PA
ELOCTATE INTRAVENOUS RECON SOLN	5	PA; MSP
<i>enoxaparin subcutaneous solution</i>	5	SP
<i>enoxaparin subcutaneous syringe</i>	5	SP
ESPEROCT INTRAVENOUS RECON SOLN	5	PA; MSP
<i>fondaparinux subcutaneous syringe</i>	5	SP
FRAGMIN SUBCUTANEOUS SOLUTION	5	SP
FRAGMIN SUBCUTANEOUS SYRINGE	5	SP
HEMLIBRA SUBCUTANEOUS SOLUTION	5	PA; MSP
<i>hep flush-10 (pf) intravenous solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
HEPARIN (PORCINE) IN 0.9% NACL INTRAVENOUS PARENTERAL SOLUTION 2,500 UNIT/500 ML (5 UNIT/ML), 30,000 UNIT/1,000 ML, 5,000 UNIT/1,000 ML, 5,000 UNIT/500 ML (10 UNIT/ML)	4	
<i>heparin (porcine) in 5 % dex intravenous parenteral solution 20,000 unit/500 ml (40 unit/ml), 25,000 unit/250 ml(100 unit/ml), 25,000 unit/500 ml (50 unit/ml)</i>	1	
<i>heparin (porcine) in nacl (pf) intravenous parenteral solution</i>	1	
<i>heparin (porcine) injection cartridge</i>	1	
<i>heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml</i>	1	
<i>heparin (porcine) injection solution 5,000 unit/ml</i>	2	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>heparin flush(porcine)-0.9nacl intravenous kit</i>	1	
<i>heparin lock flush (porcine) intravenous solution 100 unit/ml</i>	1	
<i>heparin lock flush intravenous solution</i>	1	
<i>heparin lock flush intravenous syringe</i>	1	
<i>heparin lockflush(porcine)(pf) intravenous syringe 10 unit/ml</i>	1	
<i>heparin lockflush(porcine)(pf) intravenous syringe 100 unit/ml</i>	2	
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	4	
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	1	
<i>heparin, porcine (pf) injection solution</i>	1	
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	4	
<i>heparin, porcine (pf) intravenous solution 100 unit/ml (1 ml)</i>	1	
<i>heparin, porcine (pf) intravenous syringe 1 unit/ml, 100 unit/ml</i>	1	
HEPARIN, PORCINE (PF) SUBCUTANEOUS SYRINGE	4	
IDELVION INTRAVENOUS RECON SOLN	5	PA; MSP
IXINITY INTRAVENOUS RECON SOLN	5	PA; MSP
<i>jantoven oral tablet</i>	1	H.S.A.
JIVI INTRAVENOUS RECON SOLN	5	PA; MSP
KOGENATE FS INTRAVENOUS RECON SOLN	5	PA; MSP
KOVALTRY INTRAVENOUS RECON SOLN	5	PA; MSP
MEPHYTON ORAL TABLET	4	QL
NOVOEIGHT INTRAVENOUS RECON SOLN	5	PA; MSP

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Drug Name	Drug Tier	Requirements / Limits
NOVOSEVEN RT INTRAVENOUS RECON SOLN	5	PA; MSP
<i>pentoxifylline oral tablet extended release</i>	1	
<i>phytonadione (vitamin k1) injection solution</i>	1	
PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE	3	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	2	QL
<i>prasugrel oral tablet</i>	2	H.S.A.
PROMACTA ORAL POWDER IN PACKET	5	PA; MSP
PROMACTA ORAL TABLET	5	PA; MSP
REBINYN INTRAVENOUS RECON SOLN	5	PA; MSP
RIXUBIS INTRAVENOUS RECON SOLN	5	PA; MSP
<i>vitamin k injection solution</i>	2	
<i>vitamin k1 injection solution</i>	1	
<i>warfarin oral tablet</i>	1	H.S.A.
WILATE INTRAVENOUS RECON SOLN 1,000-1,000 UNIT, 500-500 UNIT	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK	3	PA
XARELTO ORAL TABLET	3	PA
YOSPRALA ORAL TABLET,IR,DELA YED REL,BIPHASIC	4	PA
ZONTIVITY ORAL TABLET	4	PA
<b>LIPID/CHOLESTEROL LOWERING AGENTS</b>		
<i>amlodipine-atorvastatin oral tablet</i>	2	H.S.A.; QL
ANTARA ORAL CAPSULE 30 MG, 90 MG	4	ST
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	H.S.A.; ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	2	H.S.A.; QL
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	4	ST; QL
<i>cholestyramine (with sugar) oral powder</i>	2	H.S.A.
<i>cholestyramine (with sugar) oral powder in packet</i>	2	CISP; H.S.A.
<i>cholestyramine light oral powder</i>	2	H.S.A.

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Drug Name	Drug Tier	Requirements / Limits
<i>cholestyramine light oral powder in packet</i>	2	H.S.A.
<i>colesevelam oral powder in packet</i>	2	CISP; H.S.A.
<i>colesevelam oral tablet</i>	2	CISP; H.S.A.
COLESTID FLAVORED ORAL PACKET	4	ST
COLESTID ORAL GRANULES	4	ST
COLESTID ORAL PACKET	4	ST
COLESTID ORAL TABLET	4	ST
<i>colestipol oral granules</i>	2	H.S.A.
<i>colestipol oral packet</i>	2	H.S.A.
<i>colestipol oral tablet</i>	2	H.S.A.
<i>ezetimibe oral tablet</i>	2	ST; H.S.A.
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-80 mg</i>	1	H.S.A.; QL
<i>ezetimibe-simvastatin oral tablet 10-20 mg, 10-40 mg</i>	2	H.S.A.; QL
<i>fenofibrate micronized oral capsule</i>	2	H.S.A.
<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	2	H.S.A.

Drug Name	Drug Tier	Requirements / Limits
FENOFIBRATE ORAL CAPSULE	4	ST
<i>fenofibrate oral tablet</i>	2	H.S.A.
<i>fenofibric acid (choline) oral capsule, delayed release(dr/ec)</i>	2	H.S.A.
<i>fenofibric acid oral tablet</i>	2	H.S.A.
FENOGLIDE ORAL TABLET	4	ST
FIBRICOR ORAL TABLET	4	ST
FLOLIPID ORAL SUSPENSION	4	ST; QL
<i>fluvastatin oral capsule</i>	2	H.S.A.; ACA; QL
<i>fluvastatin oral tablet extended release 24 hr</i>	2	H.S.A.; ACA; QL
<i>gemfibrozil oral tablet</i>	2	CISP; H.S.A.
JUXTAPID ORAL CAPSULE	5	PA; MSP
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HR	4	ST; QL
LIPOFEN ORAL CAPSULE	3	
LIVALO ORAL TABLET	3	ST; QL
LOPID ORAL TABLET	4	
<i>lovastatin oral tablet</i>	1	H.S.A.; ACA; QL

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Drug Name	Drug Tier	Requirements / Limits
LOVAZA ORAL CAPSULE	4	PA
NEXLETOL ORAL TABLET	3	PA
NEXLIZET ORAL TABLET	3	PA
<i>niacin oral tablet 500 mg</i>	2	H.S.A.
<i>niacin oral tablet extended release 24 hr</i>	2	CISP; H.S.A.
NIACOR ORAL TABLET	4	PA
NIASPAN EXTENDED-RELEASE ORAL TABLET EXTENDED RELEASE 24 HR	4	
<i>omega-3 acid ethyl esters oral capsule</i>	2	PA
<i>pravastatin oral tablet</i>	1	H.S.A.; ACA; QL
<i>prevalite oral powder</i>	2	H.S.A.
<i>prevalite oral powder in packet</i>	2	H.S.A.
QUESTRAN LIGHT ORAL POWDER	4	ST
QUESTRAN ORAL POWDER	4	ST
QUESTRAN ORAL POWDER IN PACKET	4	ST

Drug Name	Drug Tier	Requirements / Limits
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR	3	PA; QL
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR	3	PA; QL
REPATHA SYRINGE SUBCUTANEOUS SYRINGE	3	PA; QL
<i>rosuvastatin oral tablet 10 mg</i>	1	H.S.A.; ACA; QL
<i>rosuvastatin oral tablet 20 mg</i>	1	H.S.A.; QL
<i>rosuvastatin oral tablet 40 mg</i>	2	H.S.A.; QL
<i>rosuvastatin oral tablet 5 mg</i>	2	H.S.A.; ACA; QL
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	CISP-1; H.S.A.; ACA; QL
<i>simvastatin oral tablet 80 mg</i>	2	CISP-1; H.S.A.; QL
TRILIPIX ORAL CAPSULE, DELAYED RELEASE (DR/EC)	4	ST
VASCEPA ORAL CAPSULE	3	PA
WELCHOL ORAL TABLET	4	ST
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	4	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
<b>MISCELLANEOUS CARDIOVASCULAR AGENTS</b>		
CORLANOR ORAL SOLUTION	3	PA
CORLANOR ORAL TABLET	3	PA
ENTRESTO ORAL TABLET	3	QL
<i>ranolazine oral tablet extended release 12 hr</i>	2	
VECAMYL ORAL TABLET	4	PA
VYNDAMAX ORAL CAPSULE	5	PA; MSP
VYNDAQEL ORAL CAPSULE	5	PA; MSP
<b>NITRATES</b>		
DILATRATE-SR ORAL CAPSULE, EXTENDED RELEASE	3	
GONITRO SUBLINGUAL POWDER IN PACKET	4	
ISORDIL ORAL TABLET	4	
ISORDIL TITRADOSE ORAL TABLET 5 MG	4	
<i>isosorbide dinitrate oral tablet</i>	1	
<i>isosorbide mononitrate oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>isosorbide mononitrate oral tablet extended release 24 hr</i>	2	
MINITRAN TRANSDERMAL PATCH 24 HOUR	4	
<i>nitro-bid transdermal ointment</i>	2	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR	4	
<i>nitroglycerin oral capsule, extended release</i>	1	
<i>nitroglycerin sublingual tablet</i>	1	
<i>nitroglycerin transdermal patch 24 hour</i>	2	
<i>nitroglycerin translingual spray, non-aerosol</i>	2	
NITROLINGUAL TRANSLINGUAL SPRAY, NON-AEROSOL	4	
NITROMIST TRANSLINGUAL AEROSOL, SPRAY	4	
NITROSTAT SUBLINGUAL TABLET	4	
<i>nitro-time oral capsule, extended release</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>DERMATOLOGICALS/TOPICAL THERAPY</b>		
<b>ANTIPSORIATIC / ANTISEBORRHEIC</b>		
<i>acitretin oral capsule</i>	2	
ANALPRAM-HC TOPICAL LOTION	4	ST
<i>calcipotriene scalp solution</i>	2	QL
<i>calcipotriene topical cream</i>	2	QL
<i>calcipotriene topical ointment</i>	2	QL
<i>calcipotriene-betamethasone topical ointment</i>	2	QL
<i>calcipotriene-betamethasone topical suspension</i>	2	CSE-9; QL
<i>calcitriol topical ointment</i>	2	
DOVONEX TOPICAL CREAM	4	QL
ENSTILAR TOPICAL FOAM	3	QL
EPIFOAM TOPICAL FOAM	4	ST
<i>hydrocortisone-pramoxine topical cream</i>	2	ST
OVACE PLUS SHAMPOO TOPICAL SHAMPOO	4	
OVACE PLUS TOPICAL CLEANSER	4	

Drug Name	Drug Tier	Requirements / Limits
OVACE PLUS TOPICAL CREAM	4	
OVACE PLUS TOPICAL FOAM	4	
OVACE PLUS TOPICAL LOTION	4	
OVACE PLUS WASH TOPICAL CLEANSER, GEL	4	
OVACE TOPICAL CLEANSER	4	
PRAMOSONE TOPICAL CREAM	4	ST
PRAMOSONE TOPICAL LOTION	4	ST
PRAMOSONE TOPICAL OINTMENT	4	ST
<i>selenium sulfide topical lotion</i>	1	
<i>selenium sulfide topical shampoo 2.25 %, 2.3 %</i>	1	
SELRX TOPICAL SHAMPOO	4	
SKYRIZI SUBCUTANEOUS SYRINGE KIT	5	PA; MSP; QL
SORIATANE ORAL CAPSULE 10 MG, 25 MG	4	
SORILUX TOPICAL FOAM	4	QL
STELARA SUBCUTANEOUS SOLUTION	5	PA; MSP; QL

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Drug Name	Drug Tier	Requirements / Limits
STELARA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>sulfacetamide sodium topical cleanser</i>	2	
<i>sulfacetamide sodium topical cleanser, gel</i>	2	
<i>sulfacetamide sodium topical shampoo</i>	1	
TACLONEX TOPICAL OINTMENT	4	QL
TACLONEX TOPICAL SUSPENSION	4	QL
TERSI FOAM TOPICAL FOAM	4	
TREMFYA SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
TREMFYA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
VECTICAL TOPICAL OINTMENT	4	
<b>BURN THERAPY</b>		
SILVADENE TOPICAL CREAM	4	
<i>silver sulfadiazine topical cream</i>	1	
<i>ssd topical cream</i>	1	
<b>KERATOLYTICS</b>		

Drug Name	Drug Tier	Requirements / Limits
INOVA 4-1 TOPICAL COMBO PACK	4	ST
INOVA 8-2 TOPICAL COMBO PACK	4	ST
<b>MISCELLANEOUS DERMATOLOGICALS</b>		
AMELUZ TOPICAL GEL	4	
<i>ammonium lactate topical cream</i>	2	
<i>ammonium lactate topical lotion</i>	2	
CANTHARIDIN IN ACETONE TOPICAL SOLUTION	4	
CONDYLOX TOPICAL GEL	4	
CORTANE-B TOPICAL LOTION	4	
<i>diclofenac sodium topical gel 3 %</i>	2	PA; QL
<i>doxepin topical cream</i>	2	ST; QL
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
EFUDEX TOPICAL CREAM	4	
ESKATA TOPICAL SOLUTION WITH APPLICATOR	4	

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Drug Name	Drug Tier	Requirements / Limits
EUCRISA TOPICAL OINTMENT	4	ST; QL
FLUOROPLEX TOPICAL CREAM	4	
<i>fluorouracil topical cream 5 %</i>	2	
<i>fluorouracil topical solution</i>	2	
<i>iodine-sodium iodide topical tincture 2 %</i>	2	
IODOFLEX TOPICAL PADS, MEDICATED	4	
IODOSORB TOPICAL GEL	4	
LEVULAN TOPICAL SOLUTION	4	
<i>methoxsalen oral capsule,liqd- filled,rapid rel</i>	2	
<i>methyl salicylate oil</i>	2	
<i>methyl salicylate topical liquid</i>	2	
OXSORALEN ULTRA ORAL CAPSULE,LIQD- FILLED,RAPID REL	4	
PANRETIN TOPICAL GEL	4	
PICATO TOPICAL GEL	3	
<i>pimecrolimus topical cream</i>	2	ST; QL
<i>podofilox topical solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PROTOPIC TOPICAL OINTMENT	4	ST; QL
<i>pradoxin topical cream</i>	2	ST; QL
QBREXZA TOPICAL TOWELETTE	4	PA
REGRANEX TOPICAL GEL	3	QL
<i>tacrolimus topical ointment</i>	2	ST; QL
TOLAK TOPICAL CREAM	4	
VALCHLOR TOPICAL GEL	5	PA; MSP
VEREGEN TOPICAL OINTMENT	4	PA; QL
<i>wintergreen oil oil</i>	2	
ZONALON TOPICAL CREAM	4	ST; QL
<b>THERAPY FOR ACNE</b>		
ABSORICA LD ORAL CAPSULE	4	ST
ABSORICA ORAL CAPSULE	4	ST
ACZONE TOPICAL GEL	4	ST
ACZONE TOPICAL GEL WITH PUMP	4	ST
<i>adapalene topical cream</i>	2	
<i>adapalene topical gel 0.3 %</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>adapalene topical gel with pump</i>	2	
ADAPALENE TOPICAL LOTION	4	ST
<i>adapalene topical solution</i>	2	
<i>adapalene topical swab</i>	2	
<i>adapalene-benzoyl peroxide topical gel with pump</i>	2	
AKLIEF TOPICAL CREAM	4	PA; ST
ALTRENO TOPICAL LOTION	4	PA
<i>amnestem oral capsule</i>	2	
AMZEEQ TOPICAL FOAM	3	ST
ARAZLO TOPICAL LOTION	4	PA
AVAR LS TOPICAL CLEANSER	4	ST
AVAR LS TOPICAL FOAM	4	ST
AVAR LS TOPICAL PADS, MEDICATED	4	ST
<i>avar topical cleanser</i>	1	
AVAR TOPICAL PADS, MEDICATED	4	ST
AVAR-E GREEN TOPICAL CREAM	4	ST
AVAR-E LS TOPICAL CREAM	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>avita topical cream</i>	2	PA
AVITA TOPICAL GEL	4	PA
<i>azelaic acid topical gel</i>	2	
AZELEX TOPICAL CREAM	4	ST
BENZAACLIN PUMP TOPICAL GEL WITH PUMP	4	ST
BENZAACLIN TOPICAL GEL	4	ST
BENZAMYCIN TOPICAL GEL	4	ST
BENZEPRO (MICROSPHERES) TOPICAL CLEANSER	4	ST
<i>benzebro topical towelette</i>	2	
<i>benzoyl peroxide topical cleanser 7 %</i>	1	
<i>benzoyl peroxide topical foam 9.8 %</i>	2	
<i>bp 10-1 topical cleanser</i>	2	ST
<i>claravis oral capsule</i>	2	
CLEOCIN T TOPICAL GEL	4	ST; QL
CLEOCIN T TOPICAL LOTION	4	ST; QL
CLINDACIN ETZ TOPICAL KIT	4	ST
<i>clindacin p topical swab</i>	1	
CLINDACIN PAC TOPICAL KIT	4	ST

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Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate topical foam</i>	2	QL
<i>clindamycin phosphate topical gel</i>	2	QL
<i>clindamycin phosphate topical lotion</i>	2	QL
<i>clindamycin phosphate topical solution</i>	2	QL
<i>clindamycin phosphate topical swab</i>	1	
<i>clindamycin-benzoyl peroxide topical gel</i>	2	
<i>clindamycin-benzoyl peroxide topical gel with pump</i>	2	
<i>clindamycin-tretinoin topical gel</i>	2	PA
<i>dapsone topical gel</i>	2	
DAPSONE TOPICAL GEL WITH PUMP	4	ST
DIFFERIN TOPICAL CREAM	4	ST
DIFFERIN TOPICAL GEL WITH PUMP	4	ST
DIFFERIN TOPICAL LOTION	4	ST
ENZOCLEAR TOPICAL FOAM	4	ST
<i>ery pads topical swab</i>	2	
<i>erygel topical gel</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin with ethanol topical gel</i>	2	
<i>erythromycin with ethanol topical solution</i>	2	
<i>erythromycin-benzoyl peroxide topical gel</i>	2	
EVOCLIN TOPICAL FOAM	4	ST; QL
FABIOR TOPICAL FOAM	4	PA
FINACEA TOPICAL FOAM	3	ST
FINACEA TOPICAL GEL	4	ST
INOVA TOPICAL COMBO PACK	4	ST
<i>isotretinoin oral capsule</i>	2	
METROCREAM TOPICAL CREAM	4	ST
METROGEL TOPICAL GEL 1 %	4	ST
<i>metronidazole topical cream</i>	2	
<i>metronidazole topical gel</i>	2	
<i>metronidazole topical gel with pump</i>	2	
<i>metronidazole topical lotion</i>	2	
MIRVASO TOPICAL GEL WITH PUMP	3	PA

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Drug Name	Drug Tier	Requirements / Limits
<i>myorisan oral capsule</i>	2	
NEUAC KIT TOPICAL COMBO PACK, CREAM AND GEL	4	ST
<i>neuac topical gel</i>	2	
NORITATE TOPICAL CREAM	4	ST
ONEXTON TOPICAL GEL WITH PUMP	3	ST
PACNEX TOPICAL CLEANSER	4	ST
PLEXION CLEANSING CLOTHS TOPICAL PADS, MEDICATED	4	ST
PLEXION TOPICAL CLEANSER	4	ST
PLEXION TOPICAL CREAM	4	ST
PLEXION TOPICAL LOTION	4	ST
PR BENZOYL PEROXIDE TOPICAL CLEANSER	4	ST
RETIN-A TOPICAL CREAM	4	PA
RETIN-A TOPICAL GEL	4	PA
RHOFADE TOPICAL CREAM	4	PA
<i>rosadan topical cream</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>rosadan topical gel</i>	2	
ROSDAN TOPICAL KIT, CLEANSER AND GEL	4	ST
ROSDAN TOPICAL KIT, CLEANSER AND CREAM	4	ST
ROSANIL TOPICAL CLEANSER	4	ST
<i>rosula cleansing cloths topical pads, medicated</i>	2	
ROSULA TOPICAL CLEANSER	4	ST
SOOLANTRA TOPICAL CREAM	4	ST; QL
<i>sss 10-5 topical cream</i>	2	
<i>sss 10-5 topical foam</i>	2	
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 9-4 %, 9.8-4.8 %</i>	2	
<i>sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w), 9-4.5 %</i>	1	
<i>sulfacetamide sodium-sulfur topical cream</i>	2	
<i>sulfacetamide sodium-sulfur topical lotion</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium-sulfur topical pads, medicated 10-4 %</i>	2	
<i>sulfacetamide sodium-sulfur topical suspension 10-5 %</i>	2	
<i>sulfacetamide sodium-sulfur topical suspension 8-4 %</i>	1	
<i>sulfacetamide-sulfur-cleansr23 topical kit</i>	2	
<i>sulfacleanse 8-4 topical suspension</i>	2	ST
SUMADAN TOPICAL CLEANSER	4	ST
SUMADAN TOPICAL KIT	4	ST
SUMADAN XLT TOPICAL COMBO PACK,CLEANSER AND CREAM	4	ST
SUMAXIN CP TOPICAL KIT	4	ST
SUMAXIN TOPICAL CLEANSER	4	ST
SUMAXIN TOPICAL PADS, MEDICATED	4	ST
SUMAXIN TS TOPICAL SUSPENSION	4	ST
<i>tazarotene topical cream</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
TAZORAC TOPICAL CREAM 0.05 %	3	PA
TAZORAC TOPICAL GEL	3	PA
<i>tretinoin microspheres topical gel</i>	2	PA
<i>tretinoin microspheres topical gel with pump</i>	2	PA
<i>tretinoin topical cream</i>	2	PA
<i>tretinoin topical gel</i>	2	PA
TRETIN-X CREAM KIT TOPICAL COMBO PACK	4	PA
TRETIN-X TOPICAL CREAM 0.075 %	4	PA
VANOXIDE-HC TOPICAL SUSPENSION	4	ST
<i>zenatane oral capsule</i>	2	
ZIANA TOPICAL GEL	4	PA; ST
ZILXI TOPICAL FOAM	4	ST
<b>TOPICAL ANESTHETICS</b>		
COCAINE NASAL SOLUTION	4	
<i>glydo mucous membrane jelly in applicator</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
GOPRELTO NASAL SOLUTION	4	
<i>lidocaine hcl laryngotracheal solution</i>	1	
<i>lidocaine hcl mucous membrane jelly</i>	1	QL
<i>lidocaine hcl mucous membrane jelly in applicator</i>	1	QL
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	1	
<i>lidocaine hcl-hydrocortison ac topical cream</i>	2	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	2	PA
<i>lidocaine topical ointment</i>	2	QL
<i>lidocaine viscous mucous membrane solution</i>	1	
<i>lidocaine-prilocaine topical cream</i>	2	QL
<i>lidocaine-prilocaine topical kit</i>	2	
<i>lta pre-attached laryngotracheal solution</i>	1	
NUMBRINO NASAL SOLUTION	4	
PLIAGLIS TOPICAL CREAM	4	PA; QL

Drug Name	Drug Tier	Requirements / Limits
SYNERA TOPICAL PATCH, MEDICATED SELF-HEATING	4	
ZTLIDO TOPICAL ADHESIVE PATCH,MEDICATED	3	PA
<b>TOPICAL ANTIBACTERIALS</b>		
ALTABAX TOPICAL OINTMENT	4	ST; QL
CENTANY AT TOPICAL OINTMENT KIT	4	ST; QL
CENTANY TOPICAL OINTMENT	4	ST; QL
CORTISPORIN TOPICAL CREAM	4	
CORTISPORIN TOPICAL OINTMENT	4	
<i>gentamicin topical cream</i>	2	
<i>gentamicin topical ointment</i>	2	
KLARON TOPICAL SUSPENSION	4	ST
<i>lugols topical solution</i>	1	
<i>mafenide acetate topical packet</i>	2	
<i>mupirocin calcium topical cream</i>	2	ST; QL
<i>mupirocin topical ointment</i>	2	QL

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Drug Name	Drug Tier	Requirements / Limits
NEO-SYNALAR KIT TOPICAL CREAM	4	
NEO-SYNALAR TOPICAL CREAM	4	
<i>strong iodine topical solution</i>	1	
<i>sulfacetamide sodium (acne) topical suspension</i>	2	
SULFAMYLON TOPICAL CREAM	3	
SULFAMYLON TOPICAL PACKET	4	
XEPI TOPICAL CREAM	4	ST; QL
<b>TOPICAL ANTIFUNGALS</b>		
CICLODAN KIT TOPICAL COMBO PACK	4	
CICLODAN KIT TOPICAL SOLUTION	4	ST
<i>ciclodan topical cream</i>	2	QL
<i>ciclodan topical solution</i>	2	
<i>ciclopirox topical cream</i>	2	QL
<i>ciclopirox topical gel</i>	2	QL
<i>ciclopirox topical shampoo</i>	2	QL
<i>ciclopirox topical solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>ciclopirox topical suspension</i>	2	QL
<i>ciclopirox-urea-camph-menth-euc topical solution</i>	2	
<i>clotrimazole topical cream</i>	2	QL
<i>clotrimazole topical solution</i>	2	QL
<i>clotrimazole-betamethasone topical cream</i>	2	QL
<i>clotrimazole-betamethasone topical lotion</i>	2	QL
<i>econazole topical cream</i>	2	QL
ERTACZO TOPICAL CREAM	4	QL
EXELDERM TOPICAL CREAM	4	QL
EXELDERM TOPICAL SOLUTION	4	QL
EXTINA TOPICAL FOAM	4	QL
JUBLIA TOPICAL SOLUTION WITH APPLICATOR	4	ST
KERYDIN TOPICAL SOLUTION WITH APPLICATOR	4	ST
<i>ketconazole topical cream</i>	2	QL
<i>ketconazole topical foam</i>	2	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>ketoconazole topical shampoo</i>	1	QL
<i>ketodan kit topical combo pack</i>	2	
<i>ketodan topical foam</i>	1	QL
LOPROX (AS OLAMINE) TOPICAL CREAM	4	QL
LOPROX (AS OLAMINE) TOPICAL SUSPENSION	4	QL
LOPROX KIT TOPICAL COMBO PACK	4	QL
LOPROX KIT TOPICAL KIT, SUSPENSION AND CLEANSER	4	QL
LOPROX TOPICAL SHAMPOO	4	QL
LUZU TOPICAL CREAM	4	QL
MENTAX TOPICAL CREAM	4	QL
MICONAZOLE NITRATE-ZINC OX-PET TOPICAL OINTMENT	4	QL
<i>naftifine topical cream</i>	2	QL
<i>naftifine topical gel</i>	2	QL
NAFTIN TOPICAL CREAM 2 %	4	QL
NAFTIN TOPICAL GEL	4	QL
<i>nyamyc topical powder</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>nystatin topical cream</i>	1	QL
<i>nystatin topical ointment</i>	2	QL
<i>nystatin topical powder</i>	1	QL
<i>nystatin-triamcinolone topical cream</i>	2	QL
<i>nystatin-triamcinolone topical ointment</i>	2	QL
<i>nystop topical powder</i>	1	QL
<i>oxiconazole topical cream</i>	2	QL
OXISTAT TOPICAL CREAM	4	QL
OXISTAT TOPICAL LOTION	4	QL
VUSION TOPICAL OINTMENT	4	QL
<b>TOPICAL ANTIVIRALS</b>		
<i>acyclovir topical cream</i>	2	PA; QL
<i>acyclovir topical ointment</i>	2	PA; QL
DENAVIR TOPICAL CREAM	4	
XERESE TOPICAL CREAM	4	
ZOVIRAX TOPICAL CREAM	4	PA; QL

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Drug Name	Drug Tier	Requirements / Limits
<b>TOPICAL CORTICOSTEROIDS</b>		
<i>ala-cort topical cream 1 %</i>	2	
ALA-SCALP TOPICAL LOTION	4	ST
<i>alclometasone topical cream</i>	2	
<i>alclometasone topical ointment</i>	2	
<i>amcinonide topical cream</i>	2	ST
<i>amcinonide topical lotion</i>	2	ST
<i>apexicon e topical cream</i>	2	ST
<i>beser topical lotion</i>	2	ST
<i>betamethasone dipropionate topical cream</i>	2	
<i>betamethasone dipropionate topical lotion</i>	2	
<i>betamethasone dipropionate topical ointment</i>	2	
<i>betamethasone valerate topical cream</i>	2	
<i>betamethasone valerate topical foam</i>	2	ST
<i>betamethasone valerate topical lotion</i>	2	
<i>betamethasone valerate topical ointment</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>betamethasone, augmented topical cream</i>	2	
<i>betamethasone, augmented topical gel</i>	2	
<i>betamethasone, augmented topical lotion</i>	1	
<i>betamethasone, augmented topical ointment</i>	2	
BRYHALI TOPICAL LOTION	4	ST
CAPEX TOPICAL SHAMPOO	4	ST
<i>clobetasol scalp solution</i>	2	QL
<i>clobetasol topical cream</i>	2	QL
<i>clobetasol topical foam</i>	2	ST; QL
<i>clobetasol topical gel</i>	2	QL
<i>clobetasol topical lotion</i>	2	ST; QL
<i>clobetasol topical ointment</i>	2	QL
<i>clobetasol topical shampoo</i>	2	ST; QL
<i>clobetasol topical spray, non-aerosol</i>	2	ST; QL
<i>clobetasol-emollient topical cream</i>	2	QL
<i>clobetasol-emollient topical foam</i>	2	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
CLOBEX TOPICAL LOTION	4	ST; QL
CLOBEX TOPICAL SHAMPOO	4	ST; QL
CLOBEX TOPICAL SPRAY, NON-AEROSOL	4	ST; QL
CLODAN KIT TOPICAL KIT, SHAMPOO AND CLEANSER	4	ST
<i>clodan topical shampoo</i>	2	ST; QL
CLODERM TOPICAL CREAM	4	ST
CORDRAN TAPE LARGE ROLL TOPICAL TAPE	4	ST
CORDRAN TOPICAL CREAM	4	ST; QL
CORDRAN TOPICAL LOTION	4	ST; QL
CORDRAN TOPICAL OINTMENT	4	ST; QL
CUTIVATE TOPICAL CREAM	4	ST
CUTIVATE TOPICAL LOTION	4	ST
DERMA-SMOOTHIE/FS BODY OIL TOPICAL OIL	4	ST
DERMA-SMOOTHIE/FS SCALP OIL SCALP OIL	4	ST

Drug Name	Drug Tier	Requirements / Limits
DESONATE TOPICAL GEL	4	ST
<i>desonide topical cream</i>	2	
<i>desonide topical gel</i>	2	ST
<i>desonide topical lotion</i>	2	ST
<i>desonide topical ointment</i>	2	
DESOWEN TOPICAL LOTION	4	ST
<i>desoximetasone topical cream</i>	2	ST
<i>desoximetasone topical gel</i>	2	ST
<i>desoximetasone topical ointment</i>	2	ST
<i>desoximetasone topical spray, non-aerosol</i>	2	ST
<i>diflorasone topical cream</i>	2	ST; QL
<i>diflorasone topical ointment</i>	2	ST; QL
DIPROLENE TOPICAL OINTMENT	4	ST
<i>fluocinolone and shower cap scalp oil</i>	2	
<i>fluocinolone topical cream</i>	2	
<i>fluocinolone topical oil</i>	2	
<i>fluocinolone topical ointment</i>	2	
<i>fluocinolone topical solution</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<i>fluocinonide topical cream 0.05 %</i>	2	QL
<i>fluocinonide topical cream 0.1 %</i>	2	ST; QL
<i>fluocinonide topical gel</i>	2	QL
<i>fluocinonide topical ointment</i>	2	QL
<i>fluocinonide topical solution</i>	2	QL
<i>fluocinonide-e topical cream</i>	2	QL
<i>flurandrenolide topical cream</i>	2	ST; QL
<i>flurandrenolide topical lotion</i>	2	ST; QL
<i>flurandrenolide topical ointment</i>	2	ST; QL
<i>fluticasone propionate topical cream</i>	2	
<i>fluticasone propionate topical lotion</i>	2	ST
<i>fluticasone propionate topical ointment</i>	2	
<i>halcinonide topical cream</i>	2	ST
<i>halobetasol propionate topical cream</i>	2	
HALOBETASOL PROPIONATE TOPICAL FOAM	4	ST
<i>halobetasol propionate topical ointment</i>	2	

Drug Name	Drug Tier	Requirements / Limits
HALOG TOPICAL CREAM	4	ST
HALOG TOPICAL OINTMENT	4	ST
HALOG TOPICAL SOLUTION	4	ST
<i>hydrocortisone butyrate topical cream</i>	2	QL
<i>hydrocortisone butyrate topical lotion</i>	2	ST; QL
<i>hydrocortisone butyrate topical ointment</i>	2	ST
<i>hydrocortisone butyrate topical solution</i>	2	ST; QL
<i>hydrocortisone butyr-emollient topical cream</i>	2	QL
<i>hydrocortisone topical cream 1 %, 2.5 %</i>	1	
<i>hydrocortisone topical lotion 2.5 %</i>	2	
<i>hydrocortisone topical ointment 1 %, 2.5 %</i>	1	
<i>hydrocortisone valerate topical cream</i>	2	
<i>hydrocortisone valerate topical ointment</i>	2	
IMPOYZ TOPICAL CREAM	4	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
KENALOG TOPICAL AEROSOL	4	ST; QL
LEXETTE TOPICAL FOAM	4	ST
LUXIQ TOPICAL FOAM	4	ST
<i>mometasone topical cream</i>	2	
<i>mometasone topical ointment</i>	2	
<i>mometasone topical solution</i>	2	
<i>nolix topical cream</i>	2	ST; QL
<i>nolix topical lotion</i>	2	ST; QL
NUCORT TOPICAL LOTION	4	ST
OLUX TOPICAL FOAM	4	ST; QL
OLUX-E TOPICAL FOAM	4	ST; QL
PANDEL TOPICAL CREAM	4	ST
<i>prednicarbate topical cream</i>	2	
<i>prednicarbate topical ointment</i>	2	
PROCTOCORT TOPICAL CREAM	4	ST
PSORCON TOPICAL CREAM	4	ST; QL
SCALACORT DK TOPICAL COMBO PACK	4	ST
<i>scalacort topical lotion</i>	2	

Drug Name	Drug Tier	Requirements / Limits
SERNIVO TOPICAL SPRAY WITH PUMP	4	ST
SYNALAR CREAM KIT TOPICAL CREAM	4	ST
SYNALAR OINTMENT KIT TOPICAL COMBO PACK,OINTMENT AND CREAM	4	ST
SYNALAR TOPICAL CREAM	4	ST
SYNALAR TOPICAL OINTMENT	4	ST
SYNALAR TOPICAL SOLUTION	4	ST
SYNALAR TS TOPICAL KIT	4	ST
TEMOVATE TOPICAL CREAM	4	ST; QL
TEMOVATE TOPICAL OINTMENT	4	ST; QL
TEXACORT TOPICAL SOLUTION	4	ST
TOPICORT TOPICAL CREAM	4	ST
TOPICORT TOPICAL GEL	4	ST
TOPICORT TOPICAL OINTMENT	4	ST
<i>tovet emollient topical foam</i>	2	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>triamcinolone acetonide topical aerosol</i>	2	ST; QL
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
<i>trianex topical ointment</i>	2	ST
<i>triderm topical cream 0.1 %</i>	1	
<i>triderm topical cream 0.5 %</i>	1	ST
TRIDESILON TOPICAL CREAM	4	ST
ULTRAVATE TOPICAL LOTION	4	ST
<b>TOPICAL ENZYMES</b>		
SANTYL TOPICAL OINTMENT	3	QL
<b>TOPICAL SCABICIDES / PEDICULICIDES</b>		
<i>crotan topical lotion</i>	2	
ELIMITE TOPICAL CREAM	4	

Drug Name	Drug Tier	Requirements / Limits
EURAX TOPICAL CREAM	4	
EURAX TOPICAL LOTION	4	
<i>lindane topical shampoo</i>	2	
<i>malathion topical lotion</i>	1	
OVIDE TOPICAL LOTION	4	
<i>permethrin topical cream</i>	2	
SKLICE TOPICAL LOTION	4	
<i>spinosad topical suspension</i>	2	
ULESFIA TOPICAL LOTION	4	
<b>DIAGNOSTICS &amp; MISCELLANEOUS AGENTS</b>		
<b>IRRIGATING SOLUTIONS</b>		
<i>lactated ringers irrigation solution</i>	2	
<i>neomycin-polymyxin b gu irrigation solution</i>	2	
SORBITOL IRRIGATION SOLUTION	4	
SORBITOL-MANNITOL TRANSURETHRAL SOLUTION	4	
<i>tis-u-sol pentalyte irrigation irrigation solution</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
<b>MISCELLANEOUS AGENTS</b>		
<i>acamprosate oral tablet, delayed release (dr/ec)</i>	2	
<i>acetic acid irrigation solution</i>	2	
AGRYLIN ORAL CAPSULE	4	
AMMONIA N-13 INTRAVENOUS SOLUTION 3.75 MCI TO 37.5 MCI/ML	4	
<i>anagrelide oral capsule</i>	2	
ANTABUSE ORAL TABLET	4	
<i>aqua care sodium chloride irrigation solution</i>	2	
<i>aqua care sterile water irrigation solution</i>	2	
ARALAST NP INTRAVENOUS RECON SOLN	5	PA; MSP
AXUMIN INTRAVENOUS SOLUTION	4	
BUPHENYL ORAL POWDER	4	PA
BUPHENYL ORAL TABLET	4	PA
<i>caffeine citrate oral solution</i>	2	
CARBAGLU ORAL TABLET, DISPERSIBLE	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
CARNITOR (SUGAR-FREE) ORAL SOLUTION	4	
CARNITOR ORAL SOLUTION	4	
CARNITOR ORAL TABLET	4	
<i>cevimeline oral capsule</i>	2	
CHEMET ORAL CAPSULE	3	PA
CHOLETEC INTRAVENOUS RECON SOLN	4	
<i>clovique oral capsule</i>	2	PA
<i>deferasirox oral granules in packet</i>	5	PA; SP
<i>deferasirox oral tablet</i>	5	PA; SP
<i>deferasirox oral tablet, dispersible</i>	5	PA; SP
<i>disulfiram oral tablet</i>	2	
ENDARI ORAL POWDER IN PACKET	5	PA; SP
EVOXAC ORAL CAPSULE	4	
FERRIPROX ORAL SOLUTION	5	PA; SP
FERRIPROX ORAL TABLET	5	PA; SP
FLUDEOXYGLUCOSE F-18 INTRAVENOUS SOLUTION 20 MCI TO 300 MCI/ML	4	

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Drug Name	Drug Tier	Requirements / Limits
GLASSIA INTRAVENOUS SOLUTION	5	PA; MSP
GLEOLAN ORAL RECON SOLN	4	
<i>ic green injection recon soln</i>	2	
INCRELEX SUBCUTANEOUS SOLUTION	5	PA; MSP
<i>indocyanine green injection recon soln</i>	2	
INFASURF INTRATRACHEAL SUSPENSION	4	
KIT FOR TC 99M-SESTAMIBI NO.1 INTRAVENOUS RECON SOLN	4	
KIT PREP OF TC-99M-MEBROFENIN INTRAVENOUS RECON SOLN	4	
KIT PREP OF TC-99M-SOD PYROPH INTRAVENOUS RECON SOLN	4	
<i>levocarnitine (with sugar) oral solution</i>	1	
<i>levocarnitine oral solution 100 mg/ml</i>	2	
<i>levocarnitine oral tablet</i>	1	
LITHOSTAT ORAL TABLET	4	
METOPIRONE ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
<i>midodrine oral tablet</i>	2	
MYOVIEW KIT INTRAVENOUS RECON SOLN	4	
<i>nitisinone oral capsule</i>	5	PA; MSP
NITYR ORAL TABLET	5	PA; MSP
NORTHERA ORAL CAPSULE	5	PA; MSP
ORFADIN ORAL CAPSULE	5	PA; SP
ORFADIN ORAL SUSPENSION	5	PA; SP
<i>pilocarpine hcl oral tablet 5 mg</i>	2	
PROLASTIN-C INTRAVENOUS RECON SOLN	5	PA; SP
PROLASTIN-C INTRAVENOUS SOLUTION	5	PA; SP
RADIOGARDASE ORAL CAPSULE	4	
RAVICTI ORAL LIQUID	5	PA; MSP
RILUTEK ORAL TABLET	4	PA
<i>riluzole oral tablet</i>	2	PA
<i>risedronate oral tablet 30 mg</i>	2	H.S.A.; QL
SALAGEN (PILOCARPINE) ORAL TABLET 5 MG	4	

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Drug Name	Drug Tier	Requirements / Limits
SINOGRAFIN INJECTION SOLUTION	4	
<i>sodium chloride 0.9 % (flush) injection syringe</i>	1	
<i>sodium chloride 0.9 % injection solution</i>	1	
<i>sodium chloride 0.9 % intravenous parenteral solution</i>	1	
<i>sodium chloride 0.9 % intravenous piggyback</i>	1	
<i>sodium chloride injection syringe</i>	1	
<i>sodium chloride irrigation solution</i>	1	
<i>sodium phenylbutyrate oral powder</i>	2	PA
<i>sodium phenylbutyrate oral tablet</i>	2	PA
SOLIRIS INTRAVENOUS SOLUTION	5	PA; MSP
SURVANTA INTRATRACHEAL SUSPENSION	4	
SYPRINE ORAL CAPSULE	4	PA
THALLOUS CHLORIDE TL-201 INTRAVENOUS SOLUTION	4	

Drug Name	Drug Tier	Requirements / Limits
THIOLA EC ORAL TABLET, DELAYED RELEASE (DR/EC)	5	PA; SP
THIOLA ORAL TABLET	5	PA; SP
TIGLUTIK ORAL SUSPENSION	4	PA
<i>trientine oral capsule</i>	2	PA
<i>water for irrigation, sterile irrigation solution</i>	1	
XURIDEN ORAL GRANULES IN PACKET	5	PA; SP
ZEMAIRA INTRAVENOUS RECON SOLN	5	PA; MSP
<i>zoledronic acid-mannitol-water intravenous piggyback 5 mg/100 ml</i>	5	PA; MSP
<b>SMOKING DETERRENENTS</b>		
<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr</i>	2	H.S.A.; ACA
CHANTIX CONTINUING MONTH BOX ORAL TABLET	3	ACA
CHANTIX ORAL TABLET	3	ACA

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Drug Name	Drug Tier	Requirements / Limits
CHANTIX STARTING MONTH BOX ORAL TABLETS,DOSE PACK	3	ACA
NICODERM CQ TRANSDERMAL PATCH 24 HOUR	3	ACA; OTC
NICORETTE BUCCAL GUM 2 MG	3	ACA; OTC
<i>nicorette buccal gum 4 mg</i>	2	H.S.A.; ACA; OTC
NICORETTE BUCCAL LOZENGE	3	ACA; OTC
NICORETTE BUCCAL MINI LOZENGE	3	ACA; OTC
<i>nicotine (polacrilex) buccal gum</i>	2	H.S.A.; ACA; OTC
<i>nicotine (polacrilex) buccal lozenge</i>	2	H.S.A.; ACA; OTC
<i>nicotine (polacrilex) buccal mini lozenge</i>	2	H.S.A.; ACA; OTC
<i>nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr</i>	2	H.S.A.; ACA; OTC
<i>nicotine transdermal patch, td daily, sequential</i>	2	H.S.A.; ACA; OTC
NICOTROL INHALATION CARTRIDGE	4	ACA

Drug Name	Drug Tier	Requirements / Limits
NICOTROL NS NASAL SPRAY, NON-AEROSOL	4	ACA
<i>quit 2 buccal gum</i>	2	H.S.A.; ACA; OTC
<i>quit 2 buccal lozenge</i>	2	H.S.A.; ACA; OTC
<i>quit 4 buccal gum</i>	2	H.S.A.; ACA; OTC
<i>quit 4 buccal lozenge</i>	2	H.S.A.; ACA; OTC
<i>stop smoking aid buccal lozenge</i>	2	H.S.A.; ACA; OTC
<b>EAR, NOSE &amp; THROAT MEDICATIONS</b>		
<b>MISCELLANEOUS AGENTS</b>		
ARESTIN DENTAL CARTRIDGE	5	SP
<i>azelastine nasal aerosol, spray</i>	2	QL
<i>azelastine nasal spray, non-aerosol</i>	2	
<i>chlorhexidine gluconate mucous membrane mouthwash</i>	1	
CLINPRO 5000 DENTAL PASTE	4	
<i>denta 5000 plus dental cream</i>	1	H.S.A.
<i>dentagel dental gel</i>	1	H.S.A.
EPISIL MUCOUS MEMBRANE GEL FORMING SOLUTION	4	

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Drug Name	Drug Tier	Requirements / Limits
<i>fluoride (sodium) dental cream</i>	1	H.S.A.
<i>fluoride (sodium) dental gel</i>	1	H.S.A.
<i>fluoride (sodium) dental paste</i>	1	H.S.A.
FLUORIDEX DAILY DEFENSE DENTAL PASTE	4	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	4	
GELCLAIR MUCOUS MEMBRANE GEL IN PACKET	4	
GELX MUCOUS MEMBRANE GEL	4	
<i>ipratropium bromide nasal spray, non-aerosol</i>	1	H.S.A.; QL
MUGARD MUCOUS MEMBRANE SOLUTION	4	
<i>olopatadine nasal spray, non-aerosol</i>	2	QL
<i>oralone dental paste</i>	2	
ORAMAGICRX MUCOUS MEMBRANE MOUTHWASH	4	
<i>paroex oral rinse mucous membrane mouthwash</i>	2	

Drug Name	Drug Tier	Requirements / Limits
PATANASE NASAL SPRAY, NON-AEROSOL	4	QL
PERIDEX MUCOUS MEMBRANE MOUTHWASH	4	
<i>periogard mucous membrane mouthwash</i>	2	
<i>pilocarpine hcl oral tablet 7.5 mg</i>	2	
PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE	4	
PREVIDENT 5000 DRY MOUTH DENTAL GEL	4	
PREVIDENT 5000 ENAMEL PROTECT DENTAL PASTE	4	
PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE	4	
PREVIDENT 5000 PLUS DENTAL CREAM	4	
PREVIDENT 5000 SENSITIVE DENTAL PASTE	4	
PREVIDENT DENTAL GEL	4	
PREVIDENT DENTAL SOLUTION	4	

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Drug Name	Drug Tier	Requirements / Limits
PROTHELIAL MUCOUS MEMBRANE PASTE	5	MSP
SALAGEN (PILOCARPINE) ORAL TABLET 7.5 MG	4	
<i>sf 5000 plus dental cream</i>	1	H.S.A.
<i>sf dental gel</i>	1	H.S.A.
<i>sodium fluoride 5000 plus dental cream</i>	1	H.S.A.
<i>sodium fluoride-pot nitrate dental paste</i>	2	H.S.A.
<i>triamcinolone acetonide dental paste</i>	2	
<b>MISCELLANEOUS OTIC PREPARATIONS</b>		
<i>acetic acid otic (ear) solution</i>	2	
<i>ciprofloxacin hcl otic (ear) dropperette</i>	2	
DERMOTIC OIL OTIC (EAR) DROPS	4	
<i>flac otic oil otic (ear) drops</i>	2	
<i>fluocinolone acetonide oil otic (ear) drops</i>	2	
<i>hydrocortisone-acetic acid otic (ear) drops</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>ofloxacin otic (ear) drops</i>	2	
OTIPRIO INTRATYMPANIC SUSPENSION	4	QL
<b>OTIC STEROID / ANTIBIOTIC</b>		
CIPRO HC OTIC (EAR) DROPS,SUSPENSION	4	
CIPRODEX OTIC (EAR) DROPS,SUSPENSION	4	
<i>ciprofloxacin-dexamethasone otic (ear) drops,suspension</i>	2	
CORTISPORIN-TC OTIC (EAR) DROPS,SUSPENSION	4	
<i>neomycin-polymyxin-hc otic (ear) drops,suspension</i>	2	
<i>neomycin-polymyxin-hc otic (ear) solution</i>	2	
OTOVEL OTIC (EAR) SOLUTION	3	
<b>ENDOCRINE/ DIABETES</b>		
<b>ADRENAL HORMONES</b>		
ACTHAR INJECTION GEL	5	PA; MSP

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Drug Name	Drug Tier	Requirements / Limits
CORTEF ORAL TABLET	4	
<i>cortisone oral tablet</i>	1	
<i>decadron oral tablet</i>	1	
<i>dexabliss oral tablets,dose pack</i>	1	PA
<i>dexamethasone intensol oral drops</i>	1	
<i>dexamethasone oral elixir</i>	1	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>dexamethasone oral tablets,dose pack</i>	1	PA
DXEVO ORAL TABLETS,DOSE PACK	4	PA
<i>fludrocortisone oral tablet</i>	1	
<i>hidex oral tablets,dose pack</i>	1	PA
<i>hydrocortisone oral tablet</i>	1	
MEDROL (PAK) ORAL TABLETS,DOSE PACK	4	
MEDROL ORAL TABLET	4	
<i>methylprednisolone oral tablet</i>	2	
<i>methylprednisolone oral tablets,dose pack</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>millipred dp oral tablets,dose pack</i>	2	
<i>millipred oral tablet</i>	2	
ORAPRED ODT ORAL TABLET,DISINTEGRATING	4	
<i>prednisolone oral solution 15 mg/5 ml</i>	2	
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	2	
<i>prednisolone sodium phosphate oral solution 25 mg/5 ml (5 mg/ml)</i>	1	
<i>prednisolone sodium phosphate oral tablet,disintegrating</i>	2	
<i>prednisone intensol oral concentrate</i>	1	
<i>prednisone oral solution</i>	1	
<i>prednisone oral tablet</i>	1	
<i>prednisone oral tablets,dose pack</i>	1	
RAYOS ORAL TABLET,DELAYED RELEASE (DR/EC)	4	PA
TAPERDEX ORAL TABLETS,DOSE PACK	4	PA

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Drug Name	Drug Tier	Requirements / Limits
TRIESENCE (PF) INTRAOCULAR SUSPENSION	4	
ZCORT ORAL TABLETS,DOSE PACK	4	PA
<b>ANTITHYROID AGENTS</b>		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	
<i>propylthiouracil oral tablet</i>	1	
SSKI ORAL SOLUTION	4	
TAPAZOLE ORAL TABLET	4	
<b>BLOOD GLUCOSE MONITORING DEVICES &amp; SUPPLIES</b>		
FREESTYLE INSULINX STRIP	3	CISP-1; H.S.A.; OTC
FREESTYLE INSULINX TEST STRIPS STRIP	3	CISP-1; H.S.A.; OTC
FREESTYLE LITE STRIPS STRIP	3	CISP-1; H.S.A.; OTC
FREESTYLE TEST STRIP	3	CISP-1; H.S.A.; OTC
ONETOUCH ULTRA BLUE TEST STRIP STRIP	3	CISP-1; H.S.A.; OTC
ONETOUCH VERIO TEST STRIPS STRIP	3	CISP-1; H.S.A.; OTC
PRECISION XTRA TEST STRIP	3	OTC

Drug Name	Drug Tier	Requirements / Limits
<b>DIABETES, SUPPLIES, &amp; DURABLE MEDICAL EQUIPMENT</b>		
ACE AEROSOL CLOUD ENHANCER SPACER	3	
AEROCHAMBER MINI SPACER	3	CISP-1
AEROCHAMBER PLUS FLOW-VU SPACER	3	CISP-1
AEROCHAMBER PLUS Z STAT SPACER	3	CISP-1
AEROTRACH PLUS SPACER	3	CISP-1
AEROVENT PLUS SPACER	3	
BREATHERITE MDI SPACER SPACER	3	
COMPACT SPACE CHAMBER SPACER	3	
EASIVENT HOLDING CHAMBER SPACER	3	CISP-1
FLEXICHAMBER SPACER	3	
GLUCAGEN DIAGNOSTIC KIT INJECTION RECON SOLN	3	
GLUCAGON HCL INJECTION RECON SOLN	4	

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Drug Name	Drug Tier	Requirements / Limits
INSPIRACHAMBER SPACER	3	
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.5 ML 29 GAUGE X 1/2"	4	CISP-1
LITEAIRE MDI CHAMBER SPACER	3	CISP-1
MICROCHAMBER SPACER	3	CISP-1
MICROSPACER SPACER	3	
OPTICHAMBER DIAMOND VHC SPACER	3	CISP-1
POCKET CHAMBER SPACER	3	
PRIMEAIRE SPACER	3	
PROCHAMBER SPACER	3	
RITEFLO AEROCHAMBER SPACER	3	CISP-1
SPACE CHAMBER SPACER	3	
<b>GLUCOSE ELEVATING AGENTS</b>		
BAQSIMI NASAL SPRAY, NON-AEROSOL	3	QL
<i>diazoxide oral suspension</i>	2	

Drug Name	Drug Tier	Requirements / Limits
GLUCAGEN HYPOKIT INJECTION RECON SOLN	3	QL
GLUCAGON (HCL) EMERGENCY KIT INJECTION RECON SOLN	3	QL
GLUCAGON EMERGENCY KIT (HUMAN) INJECTION RECON SOLN	3	QL
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR	3	QL
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE	3	QL
PROGLYCEM ORAL SUSPENSION	4	
<b>INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU</b>		
ACCU-CHEK GUIDE L1-L2 CTRL SOL SOLUTION	4	OTC
AT HOME A1C DEVICE	4	OTC
AUTOJECT 2 INJECTION DEVICE SUBCUTANEOUS INSULIN PEN	3	OTC

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Drug Name	Drug Tier	Requirements / Limits
AUTOPEN 1 TO 21 UNITS SUBCUTANEOUS INSULIN PEN	3	OTC
BD INTEGRA NEEDLE NEEDLE	3	
BD MICROTAINER LANCET 30 GAUGE	3	CISP-1; H.S.A.; OTC
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	3	
BD ULTRA FINE LANCETS	3	CISP-1; H.S.A.; OTC
BD ULTRA-FINE NANO PEN NEEDLE NEEDLE	3	CISP-1; H.S.A.; OTC
CEQR SIMPLICITY DEVICE	4	
DEXCOM G4 RECEIVER	3	
DEXCOM G5 RECEIVER	3	
DEXCOM G6 RECEIVER	3	
DEXCOM RECEIVER	3	
EASY STEP HIGH CONTROL SOLN SOLUTION	4	OTC
EASY TRAK II CTRL SOLN-NORMAL SOLUTION	4	OTC

Drug Name	Drug Tier	Requirements / Limits
EASYGLUCO PLUS NORMAL CONTROL SOLUTION	4	OTC
ECLIPSE NEEDLE NEEDLE 27 GAUGE X 1/2"	4	
EMBRACE TALK CONTROL-LOW (L1) SOLUTION	4	OTC
ENLITE SYSTEM	4	
EVERSENSE SENSOR-HOLDER SUBCUTANEOUS DEVICE	4	
FORA GTEL MULTI-FUNCTN MONITOR DEVICE	4	OTC
FREESTYLE CONTROL SOLUTION	3	CISP-1; H.S.A.; OTC
FREESTYLE FREEDOM KIT	3	CISP-1; H.S.A.; OTC
FREESTYLE FREEDOM LITE KIT	3	CISP-1; H.S.A.; OTC
FREESTYLE INSULINX	3	OTC
FREESTYLE LIBRE 14 DAY READER	3	
FREESTYLE LIBRE 14 DAY SENSOR KIT	3	QL
FREESTYLE LITE METER KIT	3	OTC

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Drug Name	Drug Tier	Requirements / Limits
GENTEEL VACUUM LANCING DEVICE COMBO PACK	4	OTC
GOJJI GLUCOSE CNTRL SOL-NORMAL SOLUTION	4	OTC
GOJJI KETONE CONTROL SOLN-L1 SOLUTION	4	OTC
GUARDIAN REAL-TIME GLU MONITOR	4	
INFINITY VOICE CTRL SOLN-LVL 2 SOLUTION	4	OTC
INPEN (FOR HUMALOG) SUBCUTANEOUS INSULIN PEN	4	
INPEN (FOR NOVOLOG OR FIASP) SUBCUTANEOUS INSULIN PEN	4	
LANCETS 33 GAUGE	3	CISP-1; OTC
LANCING DEVICE	3	OTC
MEDISENSE COMBO PACK	3	OTC
MEDISENSE GLUCOSE KETONE COMBO PACK	3	OTC
NOVOPEN ECHO SUBCUTANEOUS INSULIN PEN	4	

Drug Name	Drug Tier	Requirements / Limits
OMNIPOD DASH 5 PACK POD SUBCUTANEOUS CARTRIDGE	4	
ONETOUCH ULTRA CONTROL SOLUTION	3	CISP-1; H.S.A.; OTC
ONETOUCH ULTRA2 METER	3	CISP-1; H.S.A.; OTC
ONETOUCH ULTRAMINI KIT	3	CISP-1; H.S.A.; OTC
ONETOUCH VERIO FLEX METER	3	CISP-1; H.S.A.; OTC
ONETOUCH VERIO IQ METER	3	CISP-1; H.S.A.; OTC
ONETOUCH VERIO METER	3	CISP-1; H.S.A.; OTC
ONETOUCH VERIO REFLECT METER	3	OTC
PRECISION XTRA KETONE-GLUCOSE KIT	3	OTC
PRECISION XTRA MONITOR	3	OTC
SAFE-CLIP BY MAIL DEVICE	3	OTC
VERASENS CONTROL SOLN-LEVEL 1 SOLUTION	4	OTC
V-GO 20 DEVICE	3	
V-GO 30 DEVICE	3	
V-GO 40 DEVICE	3	
VIVAGUARD INO CTRL SOLN-L1,2,3 SOLUTION	4	OTC

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Drug Name	Drug Tier	Requirements / Limits
<b>INSULIN THERAPY</b>		
AFREZZA INHALATION CARTRIDGE WITH INHALER 12 UNIT, 4 UNIT, 4 UNIT (90)/ 8 UNIT (90), 4 UNIT/8 UNIT/ 12 UNIT (60), 8 UNIT, 8 UNIT (90)/ 12 UNIT (90)	4	INS
BASAGLAR KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN	4	INS
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT	3	INS
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN	3	INS
HUMALOG MIX 50-50 INSULN U-100 SUBCUTANEOUS SUSPENSION	3	INS
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS

Drug Name	Drug Tier	Requirements / Limits
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION	3	INS
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE	3	INS
HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION	3	H.S.A., INS
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION	3	H.S.A., INS
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN	3	H.S.A., INS
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION	3	H.S.A., INS
HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION	3	H.S.A., INS

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Drug Name	Drug Tier	Requirements / Limits
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION	3	INS
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN	3	H.S.A., INS
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION	3	H.S.A., INS
LEVEMIR FLEXTOUCH U-100 INSULN SUBCUTANEOUS INSULIN PEN	3	INS
LEVEMIR U-100 INSULIN SUBCUTANEOUS SOLUTION	3	INS
LYUMJEV KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN	3	INS
LYUMJEV KWIKPEN U-200 INSULIN SUBCUTANEOUS INSULIN PEN	3	INS
LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION	3	INS

Drug Name	Drug Tier	Requirements / Limits
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN	3	INS, QL
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN	3	INS
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN	3	INS
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN	3	INS
TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN	3	INS
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION	3	INS
XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN	3	INS, QL
<b>MISCELLANEOUS HORMONES</b>		
ANADROL-50 ORAL TABLET	4	
ANDRODERM TRANSDERMAL PATCH 24 HOUR	3	PA; QL
ANDROID ORAL CAPSULE	4	PA

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Drug Name	Drug Tier	Requirements / Limits
<i>cabergoline oral tablet</i>	2	QL
<i>calcitonin (salmon) nasal spray,non-aerosol</i>	2	
<i>calcitriol intravenous solution 1 mcg/ml</i>	2	
<i>calcitriol oral capsule</i>	2	
<i>calcitriol oral solution</i>	2	
CERDELGA ORAL CAPSULE	5	PA; MSP
CEREZYME INTRAVENOUS RECON SOLN 400 UNIT	5	PA; MSP
<i>cinacalcet oral tablet</i>	2	PA
<i>danazol oral capsule</i>	2	
DDAVP NASAL SOLUTION	3	
DDAVP ORAL TABLET	4	
DEPO-TESTOSTERONE INTRAMUSCULAR OIL	4	PA
<i>desmopressin nasal spray,non-aerosol</i>	2	
<i>desmopressin oral tablet</i>	2	
<i>doxercalciferol oral capsule</i>	2	ST

Drug Name	Drug Tier	Requirements / Limits
FORTESTA TRANSDERMAL GEL IN METERED-DOSE PUMP	4	PA; QL
GALAFOLD ORAL CAPSULE	5	PA; MSP; QL
JYNARQUE ORAL TABLET	5	PA; SP; QL
JYNARQUE ORAL TABLETS, SEQUENTIAL	5	PA; SP; QL
KUVAN ORAL POWDER IN PACKET	5	PA; MSP
KUVAN ORAL TABLET,SOLUBLE	5	PA; MSP
METHITEST ORAL TABLET	3	
<i>methyltestosterone oral capsule</i>	2	
MIACALCIN INJECTION SOLUTION	3	
<i>miglustat oral capsule</i>	5	PA; MSP
MYALEPT SUBCUTANEOUS RECON SOLN	5	PA; MSP
NATESTO NASAL GEL IN METERED-DOSE PUMP	3	PA; QL
NATPARA SUBCUTANEOUS CARTRIDGE	5	PA; MSP

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Drug Name	Drug Tier	Requirements / Limits
NOC DURNA (MEN) SUBLINGUAL TABLET, DISINTEGRATING	4	PA; QL
NOC DURNA (WOMEN) SUBLINGUAL TABLET, DISINTEGRATING	4	PA; QL
ORILISSA ORAL TABLET	3	PA; QL
<i>oxandrolone oral tablet</i>	2	
PALYNZIQ SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>paricalcitol intravenous solution</i>	2	
<i>paricalcitol oral capsule</i>	2	ST
RAYALDEE ORAL CAPSULE, EXTENDED RELEASE 24 HR	4	ST
ROCALTROL ORAL CAPSULE	4	ST
ROCALTROL ORAL SOLUTION	4	ST
SAMSCA ORAL TABLET	5	PA; MSP; QL
<i>sapropterin oral powder in packet</i>	2	PA
<i>sapropterin oral tablet, soluble</i>	2	PA
SOMAVERT SUBCUTANEOUS RECON SOLN	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
STRENSIQ SUBCUTANEOUS SOLUTION	5	PA; SP
SYNAREL NASAL SPRAY, NON-AEROSOL	3	
TESTOPEL IMPLANT PELLETT	5	PA; SP
<i>testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml</i>	2	PA
<i>testosterone enanthate intramuscular oil</i>	2	PA
TESTOSTERONE IMPLANT PELLETT 200 MG	4	PA
<i>testosterone transdermal gel</i>	2	PA; QL
<i>testosterone transdermal gel in metered-dose pump</i>	2	PA; QL
<i>testosterone transdermal gel in packet</i>	2	PA; QL
<i>testosterone transdermal solution in metered pump w/app</i>	2	PA; QL
TESTRED ORAL CAPSULE	4	PA
<i>tolvaptan oral tablet 30 mg</i>	5	PA; MSP; QL
VOGELXO TRANSDERMAL GEL	4	PA; QL

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Drug Name	Drug Tier	Requirements / Limits
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP	4	PA; QL
VOGELXO TRANSDERMAL GEL IN PACKET	4	PA; QL
XYOSTED SUBCUTANEOUS AUTO-INJECTOR	4	PA
ZEMPLAR INTRAVENOUS SOLUTION	4	
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	4	ST
<i>zoledronic acid intravenous recon soln</i>	5	MSP
<i>zoledronic acid intravenous solution</i>	5	MSP
<i>zoledronic acid-mannitol-water intravenous piggyback 4 mg/100 ml</i>	5	MSP
ZOLEDRONIC AC-MANNITOL-0.9NACL INTRAVENOUS PIGGYBACK	5	MSP
<b>NON-INSULIN HYPOGLYCEMIC AGENTS</b>		
<i>acarbose oral tablet</i>	1	CISP; H.S.A.
ACTOPLUS MET ORAL TABLET	4	ST; QL
ACTOS ORAL TABLET	4	ST; QL

Drug Name	Drug Tier	Requirements / Limits
AMARYL ORAL TABLET	4	
AVANDIA ORAL TABLET 2 MG, 4 MG	4	ST; QL
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	3	ST; CISP; QL
BYDUREON SUBCUTANEOUS PEN INJECTOR	3	ST; CISP; QL
BYETTA SUBCUTANEOUS PEN INJECTOR	3	ST; QL
CYCLOSET ORAL TABLET	4	
DUETACT ORAL TABLET	4	ST; QL
FARXIGA ORAL TABLET	3	ST; CISP; QL
FORTAMET ORAL TABLET EXTENDED RELEASE 24HR	4	PA; QL
<i>glimepiride oral tablet</i>	1	CISP; H.S.A.
<i>glipizide oral tablet</i>	1	CISP; H.S.A.
<i>glipizide oral tablet extended release 24hr</i>	1	CISP; H.S.A.
<i>glipizide-metformin oral tablet</i>	1	H.S.A.
GLUCOTROL ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements / Limits
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24HR	4	
<i>glyburide micronized oral tablet</i>	1	CISP; H.S.A.
<i>glyburide oral tablet</i>	1	CISP; H.S.A.
<i>glyburide-metformin oral tablet</i>	1	CISP; H.S.A.
GLYNASE ORAL TABLET	4	
GLYSET ORAL TABLET	4	
GLYXAMBI ORAL TABLET	3	ST; QL
INVOKAMET ORAL TABLET	3	ST; CISP; QL
INVOKAMET XR ORAL TABLET, IR - ER, BIPHASIC 24HR	3	ST; CISP; QL
INVOKANA ORAL TABLET	3	ST; QL
JANUMET ORAL TABLET	3	ST; CISP; QL
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR	3	ST; CISP; QL
JANUVIA ORAL TABLET	3	ST; CISP; QL
JARDIANCE ORAL TABLET	3	ST; CISP; QL
<i>metformin oral solution</i>	2	H.S.A.
<i>metformin oral tablet</i>	1	CISP-1; H.S.A.

Drug Name	Drug Tier	Requirements / Limits
<i>metformin oral tablet extended release 24 hr</i>	1	CISP; H.S.A.; QL
<i>metformin oral tablet extended release osmotic 24hr</i>	2	PA; QL
<i>metformin oral tablet,er gast.retention 24 hr</i>	2	PA; QL
<i>migliitol oral tablet</i>	2	H.S.A.
<i>nateglinide oral tablet</i>	2	H.S.A.
OSENI ORAL TABLET	4	ST; QL
OZEMPIC SUBCUTANEOUS PEN INJECTOR	3	ST; QL
<i>pioglitazone oral tablet</i>	1	CISP; H.S.A.; QL
<i>pioglitazone-glimepiride oral tablet</i>	2	H.S.A.; QL
<i>pioglitazone-metformin oral tablet</i>	2	H.S.A.; QL
PRANDIN ORAL TABLET 1 MG, 2 MG	4	
PRECOSE ORAL TABLET	4	
<i>repaglinide oral tablet</i>	2	CISP; H.S.A.
<i>repaglinide-metformin oral tablet</i>	2	H.S.A.; QL

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Drug Name	Drug Tier	Requirements / Limits
RIOMET ER ORAL SUSPENSION,EXTENDED REL RECON	4	ST
RIOMET ORAL SOLUTION	4	ST
RYBELSUS ORAL TABLET	3	ST; QL
SEGLUROMET ORAL TABLET	3	ST; QL
STARLIX ORAL TABLET	4	
STEGLATRO ORAL TABLET	3	ST; QL
STEGLUJAN ORAL TABLET	3	ST; QL
SYMLINPEN 120 SUBCUTANEOUS PEN INJECTOR	3	ST; QL
SYMLINPEN 60 SUBCUTANEOUS PEN INJECTOR	3	ST; QL
SYNJARDY ORAL TABLET	3	ST; QL
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR	3	ST; QL
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR	3	ST
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML	3	ST; QL

Drug Name	Drug Tier	Requirements / Limits
TRULICITY SUBCUTANEOUS PEN INJECTOR 3 MG/0.5 ML, 4.5 MG/0.5 ML	3	ST
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR	3	ST; CISP; QL
<b>THYROID HORMONES</b>		
ARMOUR THYROID ORAL TABLET	3	
<i>euthyrox oral tablet</i>	2	
<i>levo-t oral tablet</i>	2	
<i>levothyroxine oral tablet</i>	1	
<i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>liothyronine oral tablet</i>	1	
<i>np thyroid oral tablet</i>	1	
SYNTHROID ORAL TABLET	4	
THYROLAR-1 ORAL TABLET	4	
THYROLAR-1/2 ORAL TABLET	4	
THYROLAR-1/4 ORAL TABLET	4	
THYROLAR-2 ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements / Limits
THYROLAR-3 ORAL TABLET	4	
TIROSINT ORAL CAPSULE	4	
TIROSINT-SOL ORAL SOLUTION	4	
<i>unithroid oral tablet</i>	2	
<i>westhroid oral tablet 130 mg, 195 mg, 32.5 mg, 65 mg, 97.5 mg</i>	1	

## GASTROENTEROLOGY

### ANTIDIARRHEALS & ANTISPASMODICS

<i>anaspaz oral tablet, disintegrating</i>	1	
<i>belladonna alkaloids-opium rectal suppository 16.2-30 mg</i>	1	
<i>belladonna alkaloids-opium rectal suppository 16.2-60 mg</i>	2	
<i>chlordiazepoxide-clidinium oral capsule</i>	1	
CUVPOSA ORAL SOLUTION	4	
<i>dicyclomine oral capsule</i>	1	
<i>dicyclomine oral solution</i>	1	
<i>dicyclomine oral tablet</i>	1	
<i>diphenoxylate-atropine oral liquid</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>diphenoxylate-atropine oral tablet</i>	1	
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	4	
DONNATAL ORAL TABLET	4	
<i>ed-spaz oral tablet, disintegrating</i>	1	
GLYCATE ORAL TABLET	4	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	2	
<i>glycopyrrolate oral tablet 1.5 mg</i>	2	PA
<i>hyoscyamine sulfate oral drops</i>	1	
<i>hyoscyamine sulfate oral elixir</i>	1	
<i>hyoscyamine sulfate oral tablet</i>	1	
<i>hyoscyamine sulfate oral tablet extended release 12 hr</i>	1	
<i>hyoscyamine sulfate oral tablet, disintegrating</i>	1	
<i>hyoscyamine sulfate sublingual tablet</i>	1	
<i>hyosyne oral drops</i>	1	
<i>hyosyne oral elixir</i>	1	
LEVVID ORAL TABLET EXTENDED RELEASE 12 HR	4	

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Drug Name	Drug Tier	Requirements / Limits
LEVSIN ORAL TABLET	4	
LEVSIN/SL SUBLINGUAL TABLET	4	
LOMOTIL ORAL TABLET	4	
<i>loperamide oral capsule</i>	2	
<i>methscopolamine oral tablet</i>	2	
MOTOFEN ORAL TABLET	4	
NULEV ORAL TABLET,DISINTEGRATING	4	
<i>opium tincture oral tincture</i>	2	
<i>oscimin oral tablet</i>	1	
<i>oscimin sl sublingual tablet</i>	1	
<i>oscimin sr oral tablet extended release 12 hr</i>	1	
<i>phenobarb-hyoscy-atropine-scop oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	2	
<i>phenobarb-hyoscy-atropine-scop oral tablet</i>	2	
<i>phenohydro oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	2	
<i>phenohydro oral tablet</i>	2	
<i>propantheline oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
SYMAX DUOTAB ORAL TABLET,EXT RELEASE MULTIPHASE	4	
<i>symax fastabs oral tablet,disintegrating</i>	1	
<i>symax-sl sublingual tablet</i>	1	
<i>symax-sr oral tablet extended release 12 hr</i>	1	
<b>MISCELLANEOUS GASTROINTESTINAL AGENTS</b>		
ACTIGALL ORAL CAPSULE	4	
<i>alophen (bisacodyl) oral tablet,delayed release (dr/ec)</i>	1	ACA; OTC
<i>alosetron oral tablet</i>	2	
ANA-LEX KIT RECTAL KIT	4	
ANALPRAM-HC RECTAL CREAM 1-1 %	4	
ANALPRAM-HC RECTAL CREAM 2.5-1 %	4	ST
ANALPRAM-HC SINGLES RECTAL CREAM 2.5-1 % (4G)	4	
<i>anucort-hc rectal suppository</i>	2	
<i>aprepitant oral capsule</i>	2	QL
<i>aprepitant oral capsule,dose pack</i>	2	QL

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Drug Name	Drug Tier	Requirements / Limits
APRISO ORAL CAPSULE,EXTENDED RELEASE 24HR	4	
AURYXIA ORAL TABLET	4	
AZULFIDINE ENTABS ORAL TABLET,DELAYED RELEASE (DR/EC)	4	ST
AZULFIDINE ORAL TABLET	4	ST
<i>balsalazide oral capsule</i>	2	
<i>bisacodyl oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
<i>bisa-lax (bisacodyl) oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
BONJESTA ORAL TABLET,IR,DELAYED REL,BIPHASIC	4	QL
<i>budesonide oral capsule, delayed, extended release</i>	2	
<i>budesonide oral tablet, delayed and ext. release</i>	2	CSE-9
<i>calcium acetate(phosphat bind) oral capsule</i>	1	
<i>calcium acetate(phosphat bind) oral tablet</i>	1	
CANASA RECTAL SUPPOSITORY	4	

Drug Name	Drug Tier	Requirements / Limits
CHENODAL ORAL TABLET	5	PA; SP
CHOLBAM ORAL CAPSULE 250 MG	5	PA; SP
CHOLBAM ORAL CAPSULE 50 MG	5	PA; SP; QL
<i>citrate of magnesia oral solution</i>	1	ACA; OTC
<i>citroma oral solution</i>	1	ACA; OTC
<i>clearlax oral powder</i>	1	ACA; OTC
<i>clearlax oral powder in packet</i>	1	ACA; OTC
CLENPIQ ORAL SOLUTION	3	
COLAZAL ORAL CAPSULE	4	ST
COMPAZINE ORAL TABLET	4	
COMPAZINE RECTAL SUPPOSITORY	4	
<i>compro rectal suppository</i>	2	
<i>constulose oral solution</i>	1	
CORTENEMA RECTAL ENEMA	4	
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC)	3	
<i>cromolyn oral concentrate</i>	2	
CYSTADANE ORAL POWDER	5	SP

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Drug Name	Drug Tier	Requirements / Limits
DICLEGIS ORAL TABLET,DELAYED RELEASE (DR/EC)	4	QL
DIPENTUM ORAL CAPSULE	4	ST
<i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec)</i>	2	CSE-9; QL
<i>dronabinol oral capsule</i>	2	PA
<i>ducodyl (bisacodyl) oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
ENTEREG ORAL CAPSULE	4	
ENTOCORT EC ORAL CAPSULE,DELAYED,EXTENDED RELEASE	4	
ENTYVIO INTRAVENOUS RECON SOLN	5	PA; MSP
<i>enulose oral solution</i>	1	
GASTROCROM ORAL CONCENTRATE	4	
GATTEX 30-VIAL SUBCUTANEOUS KIT	5	PA; MSP
<i>gavilax oral powder</i>	1	ACA; OTC
<i>gavilyte-c oral recon soln</i>	1	H.S.A.; ACA
<i>gavilyte-g oral recon soln</i>	1	H.S.A.; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>gavilyte-n oral recon soln</i>	1	H.S.A.; ACA
<i>generlac oral solution</i>	1	
<i>gentle laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
<i>gentlelax oral powder</i>	1	ACA; OTC
<i>glycolax oral powder</i>	1	ACA; OTC
GOLYTELY ORAL POWDER IN PACKET	4	
GOLYTELY ORAL RECON SOLN	4	
<i>granisetron hcl oral tablet</i>	2	QL
<i>healthylax oral powder in packet</i>	1	ACA; OTC
<i>hemmorex-hc rectal suppository 25 mg</i>	2	
<i>hydrocortisone acetate rectal suppository 25 mg</i>	2	
<i>hydrocortisone acetate rectal suppository 30 mg</i>	1	
<i>hydrocortisone rectal enema</i>	1	
<i>hydrocortisone topical cream with perineal applicator</i>	2	
<i>hydrocortisone-pramoxine rectal cream</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
INFLECTRA INTRAVENOUS RECON SOLN	5	PA; MSP
<i>kionex (with sorbitol) oral suspension</i>	1	
KRISTALOSE ORAL PACKET	4	
<i>lactulose oral packet</i>	1	PA
<i>lactulose oral solution 10 gram/15 ml, 20 gram/30 ml</i>	1	
<i>lanthanum oral tablet, chewable</i>	2	
<i>laxaclear oral powder</i>	1	ACA; OTC
<i>laxative (bisacodyl) oral tablet</i>	1	ACA; OTC
<i>laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
<i>laxative peg 3350 oral powder</i>	1	ACA; OTC
<i>lidocaine hcl-hydrocortison ac rectal cream 3-0.5 %</i>	2	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL	4	
<i>lidocaine hcl-hydrocortison ac rectal kit</i>	2	
<i>lidocaine-hydrocortisone-aloe rectal gel</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine-hydrocortisone-aloe rectal kit 3-2.5 % (7 gram)</i>	2	
LINZESS ORAL CAPSULE	3	QL
LOKELMA ORAL POWDER IN PACKET	3	QL
<i>magnesium citrate oral solution</i>	1	ACA; OTC
MARINOL ORAL CAPSULE	4	PA
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	1	
<i>mesalamine oral capsule (with del rel tablets)</i>	2	
<i>mesalamine oral capsule, extended release 24hr</i>	2	CSE-9
<i>mesalamine oral tablet, delayed release (dr/ec)</i>	2	
<i>mesalamine rectal enema</i>	2	
<i>mesalamine rectal suppository</i>	2	
<i>mesalamine with cleansing wipe rectal enema kit</i>	2	
<i>metoclopramide hcl oral solution</i>	1	
<i>metoclopramide hcl oral tablet</i>	1	
<i>metoclopramide hcl oral tablet, disintegrating</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>milk of magnesia concentrated oral suspension</i>	1	ACA; OTC
<i>milk of magnesia oral suspension</i>	1	ACA; OTC
<i>miralax oral powder in packet</i>	1	ACA; OTC
MOTEGRITY ORAL TABLET	4	QL
MOVANTIK ORAL TABLET	3	QL
<i>natura-lax oral powder</i>	1	ACA; OTC
NULYTELY LEMON-LIME ORAL RECON SOLN	4	
NULYTELY WITH FLAVOR PACKS ORAL RECON SOLN	4	
OICALIVA ORAL TABLET	5	PA; MSP; QL
<i>ondansetron hcl oral solution</i>	2	QL
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	2	QL
<i>ondansetron oral tablet, disintegrating</i>	2	QL
<i>oral saline laxative oral liquid</i>	1	ACA; OTC
ORTIKOS ORAL CAPSULE, EXTENDED RELEASE	4	

Drug Name	Drug Tier	Requirements / Limits
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram</i>	1	H.S.A.; ACA
<i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet</i>	2	H.S.A.; ACA
<i>peg-electrolyte soln oral recon soln</i>	1	H.S.A.; ACA
<i>peg-prep oral kit</i>	2	H.S.A.; ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE	3	
PHOSLYRA ORAL SOLUTION	3	
<i>phosphate laxative oral liquid</i>	1	ACA; OTC
PLENVU ORAL POWDER IN PACKET, SEQUENTIAL	4	
<i>polyethylene glycol 3350 oral powder</i>	2	ACA; OTC
<i>polyethylene glycol 3350 oral powder in packet</i>	2	ACA; OTC
<i>powderlax oral powder</i>	1	ACA; OTC
<i>powderlax oral powder in packet</i>	1	ACA; OTC
<i>prochlorperazine maleate oral tablet</i>	1	
<i>prochlorperazine rectal suppository</i>	2	
PROCORT RECTAL CREAM	4	

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Drug Name	Drug Tier	Requirements / Limits
PROCTOCORT RECTAL SUPPOSITORY	4	ST
<i>procto-med hc topical cream with perineal applicator</i>	2	
<i>procto-pak topical cream with perineal applicator</i>	2	
<i>proctosol hc topical cream with perineal applicator</i>	2	
<i>proctozone-hc topical cream with perineal applicator</i>	2	
<i>purelax oral powder</i>	1	ACA; OTC
<i>purelax oral powder in packet</i>	1	ACA; OTC
RECTIV RECTAL OINTMENT	3	
REGLAN ORAL TABLET	4	
RELISTOR ORAL TABLET	3	ST
RELISTOR SUBCUTANEOUS SOLUTION	3	ST
RELISTOR SUBCUTANEOUS SYRINGE	3	ST
REMICADE INTRAVENOUS RECON SOLN	5	PA; MSP
RENFLEXIS INTRAVENOUS RECON SOLN	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
REVELA ORAL POWDER IN PACKET	4	
REVELA ORAL TABLET	4	
ROWASA RECTAL ENEMA KIT	4	
SANCUSO TRANSDERMAL PATCH WEEKLY	4	QL
<i>scopolamine base transdermal patch 3 day</i>	2	
<i>sevelamer carbonate oral powder in packet</i>	1	
<i>sevelamer carbonate oral tablet</i>	2	
<i>sevelamer hcl oral tablet</i>	2	
SFROWASA RECTAL ENEMA	4	
<i>smoothlax oral powder</i>	1	ACA; OTC
<i>smoothlax oral powder in packet</i>	1	ACA; OTC
<i>sodium polystyrene (sorb free) oral suspension</i>	1	
<i>sodium polystyrene sulfonate oral powder</i>	1	
SOLESTA IMPLANT GEL FOR IMPLANT IN SYRINGE	5	MSP
<i>sps (with sorbitol) oral suspension</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>sps (with sorbitol) rectal enema</i>	1	
SUCRAID ORAL SOLUTION	5	PA; SP
<i>sulfasalazine oral tablet</i>	1	
<i>sulfasalazine oral tablet, delayed release (dr/ec)</i>	2	
SUPREP BOWEL PREP KIT ORAL RECON SOLN	3	
SYMPROIC ORAL TABLET	3	
SYNDROS ORAL SOLUTION	4	PA
TIGAN ORAL CAPSULE 300 MG	4	
<i>trilyte with flavor packets oral recon soln</i>	1	H.S.A.; ACA
<i>trimethobenzamide oral capsule</i>	2	
TRULANCE ORAL TABLET	3	
UCERIS ORAL TABLET, DELAYED AND EXT. RELEASE	4	
UCERIS RECTAL FOAM	3	
URSO 250 ORAL TABLET	4	
URSO FORTE ORAL TABLET	4	
<i>ursodiol oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>ursodiol oral tablet</i>	2	
VARUBI ORAL TABLET	3	QL
VELPHORO ORAL TABLET, CHEWABLE	3	
VIBERZI ORAL TABLET	3	
VIOKACE ORAL TABLET	3	
<i>women's gentle laxative (bisac) oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
<i>women's laxative (bisacodyl) oral tablet</i>	1	ACA; OTC
<i>women's laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
ZELNORM ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements / Limits
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 - 63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000-105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000-24,000 UNIT	3	
ZOFRAN ORAL TABLET	4	QL
ZUPLENZ ORAL FILM	4	QL
<b>ULCER THERAPY</b>		
<i>amoxicil-clarithromy-lansopraz oral combo pack</i>	2	QL
CARAFATE ORAL SUSPENSION	4	
CARAFATE ORAL TABLET	4	
<i>cimetidine hcl oral solution</i>	1	
<i>cimetidine oral tablet</i>	2	
CYTOTEC ORAL TABLET	4	

Drug Name	Drug Tier	Requirements / Limits
DEXILANT ORAL CAPSULE,BIPHAS E DELAYED RELEAS 30 MG	4	ST; QL
DEXILANT ORAL CAPSULE,BIPHAS E DELAYED RELEAS 60 MG	4	ST
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 20 mg</i>	2	QL
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 40 mg</i>	2	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	2	ST; QL
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	2	ST
<i>famotidine oral suspension</i>	2	
<i>famotidine oral tablet 20 mg, 40 mg</i>	1	
<i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg</i>	2	QL
<i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i>	2	
<i>lansoprazole oral tablet, disintegrat, delay rel 15 mg</i>	2	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>lansoprazole oral tablet,disintegrat, delay rel 30 mg</i>	2	
<i>misoprostol oral tablet</i>	1	
<i>nizatidine oral capsule</i>	2	
<i>nizatidine oral solution</i>	2	
OMECLAMOX-PAK ORAL COMBO PACK	4	QL
<i>omeprazole oral capsule,delayed release(dr/ec) 10 mg</i>	1	QL
<i>omeprazole oral capsule,delayed release(dr/ec) 20 mg, 40 mg</i>	1	
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i>	2	PA; QL
<i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	2	PA
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i>	2	PA; QL
<i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i>	2	PA
<i>pantoprazole oral granules dr for susp in packet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>pantoprazole oral tablet,delayed release (dr/ec) 20 mg</i>	1	QL
<i>pantoprazole oral tablet,delayed release (dr/ec) 40 mg</i>	1	
PEPCID ORAL TABLET	4	
<i>rabeprazole oral tablet,delayed release (dr/ec)</i>	2	
<i>ranitidine hcl oral syrup</i>	2	
<i>ranitidine hcl oral tablet 150 mg, 300 mg</i>	1	
<i>sucralfate oral suspension</i>	2	CSE-9
<i>sucralfate oral tablet</i>	2	
TALICIA ORAL CAPSULE,IR - DELAY REL,BIPHASE	3	QL
<b>IMMUNOLOGY, VACCINES &amp; BIOTECHNOLOGY</b>		
<b>BIOTECHNOLOGY DRUGS</b>		
FULPHILA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
LEUKINE INJECTION RECON SOLN	5	PA; MSP
MACRILEN ORAL RECON SOLN	5	MSP; QL

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Drug Name	Drug Tier	Requirements / Limits
MOZOBIL SUBCUTANEOUS SOLUTION	5	MSP
NIVESTYM INJECTION SOLUTION	5	PA; MSP
NIVESTYM SUBCUTANEOUS SYRINGE	5	PA; MSP
PROCRIT INJECTION SOLUTION	5	PA; MSP
RETACRIT INJECTION SOLUTION	5	PA; MSP
ZARXIO INJECTION SYRINGE	5	PA; MSP
ZIEXTENZO SUBCUTANEOUS SYRINGE	5	PA; MSP
<b>GROWTH HORMONES</b>		
EGRIFTA SV SUBCUTANEOUS RECON SOLN	5	PA; MSP
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE	5	PA; SP
GENOTROPIN SUBCUTANEOUS CARTRIDGE	5	PA; SP
NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR	5	PA; SP

Drug Name	Drug Tier	Requirements / Limits
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	5	PA; SP
ZORBTIVE SUBCUTANEOUS RECON SOLN	5	PA; MSP
<b>INTERFERONS</b>		
AUBAGIO ORAL TABLET	5	PA; MSP
AVONEX INTRAMUSCULA R PEN INJECTOR KIT	5	PA; MSP; QL
AVONEX INTRAMUSCULA R SYRINGE KIT	5	PA; MSP; QL
BETASERON SUBCUTANEOUS KIT	5	PA; MSP; QL
COPAXONE SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 120 mg, 240 mg</i>	5	PA; MSP
GILENYA ORAL CAPSULE 0.5 MG	5	PA; MSP
<i>glatiramer subcutaneous syringe</i>	5	PA; MSP; QL
<i>glatopa subcutaneous syringe</i>	5	PA; MSP; QL
MAVENCLAD (10 TABLET PACK) ORAL TABLET	5	PA; MSP; QL

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Drug Name	Drug Tier	Requirements / Limits
MAVENCLAD (4 TABLET PACK) ORAL TABLET	5	PA; MSP; QL
MAVENCLAD (5 TABLET PACK) ORAL TABLET	5	PA; MSP; QL
MAVENCLAD (6 TABLET PACK) ORAL TABLET	5	PA; MSP; QL
MAVENCLAD (7 TABLET PACK) ORAL TABLET	5	PA; MSP; QL
MAVENCLAD (8 TABLET PACK) ORAL TABLET	5	PA; MSP; QL
MAVENCLAD (9 TABLET PACK) ORAL TABLET	5	PA; MSP; QL
MAYZENT ORAL TABLET	5	PA; MSP; QL
OCREVUS INTRAVENOUS SOLUTION	5	PA; MSP
PEGASYS SUBCUTANEOUS SOLUTION	5	PA; MSP; QL
PEGASYS SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
PEGINTRON SUBCUTANEOUS KIT 50 MCG/0.5 ML	5	PA; MSP; QL
PLEGRIDY SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
PLEGRIDY SUBCUTANEOUS SYRINGE	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
POMALYST ORAL CAPSULE	5	PA; MSP
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
REVLIMID ORAL CAPSULE	5	PA; MSP
<i>ribavirin oral capsule</i>	5	ST; MSP
<i>ribavirin oral tablet 200 mg</i>	5	ST; MSP
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG	5	PA; MSP
TECFIDERA ORAL CAPSULE, DELAYED RELEASE(DR/EC)	5	PA; MSP
VUMERITY ORAL CAPSULE, DELAYED RELEASE(DR/EC)	5	PA; MSP
ZEPOSIA ORAL CAPSULE	5	PA; MSP
ZEPOSIA STARTER KIT ORAL CAPSULE, DOSE PACK	5	PA; MSP

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Drug Name	Drug Tier	Requirements / Limits
ZEPOSIA STARTER PACK ORAL CAPSULE,DOSE PACK	5	PA; MSP
<b>INTERLEUKINS</b>		
ACTIMMUNE SUBCUTANEOUS SOLUTION	5	PA; MSP
ALDARA TOPICAL CREAM IN PACKET	4	
ALFERON N INJECTION SOLUTION	3	
ARCALYST SUBCUTANEOUS RECON SOLN	5	PA; MSP
ILARIS (PF) SUBCUTANEOUS SOLUTION	5	PA; MSP
<i>imiquimod topical cream in packet</i>	2	
INTRON A INJECTION RECON SOLN	5	MSP
INTRON A INJECTION SOLUTION	5	MSP
PROLEUKIN INTRAVENOUS RECON SOLN	5	PA; MSP
<b>VACCINES &amp; MISCELLANEOUS IMMUNOLOGICALS</b>		
ACTHIB (PF) INTRAMUSCULA R RECON SOLN	3	ACA

Drug Name	Drug Tier	Requirements / Limits
ADACEL(TDAP ADOLESN/ADULT (PF) INTRAMUSCULA R SUSPENSION	3	ACA
ADACEL(TDAP ADOLESN/ADULT (PF) INTRAMUSCULA R SYRINGE	3	ACA
AFLURIA QD 2020-21(3YR UP)(PF) INTRAMUSCULA R SYRINGE	3	ACA
AFLURIA QD 2020-21(6- 35MO)(PF) INTRAMUSCULA R SYRINGE	3	ACA
AFLURIA QUAD 2020-2021(6MO UP) INTRAMUSCULA R SUSPENSION	3	ACA
ASCENIV INTRAVENOUS SOLUTION	5	PA; MSP
BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTIO N	3	
BEXSERO INTRAMUSCULA R SYRINGE	3	ACA
BIOTHRAX INTRAMUSCULA R SUSPENSION	3	

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Drug Name	Drug Tier	Requirements / Limits
BIVIGAM INTRAVENOUS SOLUTION	5	PA; SP
BOOSTRIX TDAP INTRAMUSCULAR SUSPENSION	3	ACA
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE	3	ACA
BOTOX INJECTION RECON SOLN	5	PA; MSP
CUVITRU SUBCUTANEOUS SOLUTION	5	PA; MSP
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION	3	ACA
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION	3	ACA
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE	3	ACA
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	5	PA; SP
FLUAD 2020-2021 (65 YR UP)(PF) INTRAMUSCULAR SYRINGE	3	ACA

Drug Name	Drug Tier	Requirements / Limits
FLUAD QUAD 2020-21(65Y UP)(PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUARIX QUAD 2020-2021 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUBLOK QUAD 2020-2021 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUCELVAX QUAD 2020-2021 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUCELVAX QUAD 2020-2021 INTRAMUSCULAR SUSPENSION	3	ACA
FLULAVAL QUAD 2020-2021 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUMIST QUAD 2020-2021 NASAL NASAL SPRAY SYRINGE	4	ACA
FLUZONE HIGHDOSE QUAD 20-21 PF INTRAMUSCULAR SYRINGE	3	ACA
FLUZONE QUAD 2020-2021 (PF) INTRAMUSCULAR SUSPENSION	3	ACA

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Drug Name	Drug Tier	Requirements / Limits
FLUZONE QUAD 2020-2021 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUZONE QUAD 2020-2021 INTRAMUSCULAR SUSPENSION	3	ACA
GAMASTAN INTRAMUSCULAR SOLUTION	5	SP
GAMASTAN S/D INTRAMUSCULAR SOLUTION	5	SP
GAMMAGARD LIQUID INJECTION SOLUTION	5	PA; MSP
GAMMAGARD S-D (IGA < 1 MCG/ML) INTRAVENOUS RECON SOLN	5	PA; MSP
GAMMAPLEX (WITH SORBITOL) INTRAVENOUS SOLUTION	5	PA; MSP
GAMMAPLEX INTRAVENOUS SOLUTION	5	PA; MSP
GAMUNEX-C INJECTION SOLUTION	5	PA; MSP
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION	3	ACA
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE	3	ACA

Drug Name	Drug Tier	Requirements / Limits
HAVRIX (PF) INTRAMUSCULAR SUSPENSION 1,440 ELISA UNIT/ML	3	ACA
HAVRIX (PF) INTRAMUSCULAR SYRINGE	3	ACA
HEPAGAM B INJECTION SOLUTION	3	
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE	4	ACA
HIBERIX (PF) INTRAMUSCULAR RECON SOLN	3	ACA
HYPERHEP B S/D INTRAMUSCULAR SOLUTION	3	
HYPERHEP B S/D INTRAMUSCULAR SYRINGE	3	
HYPERHEP B S-D NEONATAL INTRAMUSCULAR SYRINGE	3	
HYPERRAB (PF) INTRAMUSCULAR SOLUTION	3	
HYPERRAB S/D (PF) INTRAMUSCULAR SOLUTION	3	
HYPERTET S/D (PF) INTRAMUSCULAR SYRINGE	3	

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Drug Name	Drug Tier	Requirements / Limits
HYQVIA SUBCUTANEOUS SOLUTION	5	PA; MSP
IMOGAM RABIES- HT (PF) INTRAMUSCULA R SOLUTION	3	
IMOVAX RABIES VACCINE (PF) INTRAMUSCULA R RECON SOLN	3	
INFANRIX (DTAP) (PF) INTRAMUSCULA R SUSPENSION	3	ACA
INFANRIX (DTAP) (PF) INTRAMUSCULA R SYRINGE	3	ACA
IPOL INJECTION SUSPENSION	3	ACA
IXIARO (PF) INTRAMUSCULA R SYRINGE	3	
KEDRAB (PF) INTRAMUSCULA R SOLUTION	4	
KINRIX (PF) INTRAMUSCULA R SUSPENSION	4	ACA
KINRIX (PF) INTRAMUSCULA R SYRINGE	4	ACA
MENACTRA (PF) INTRAMUSCULA R SOLUTION	3	ACA

Drug Name	Drug Tier	Requirements / Limits
MENVEO A-C-Y- W-135-DIP (PF) INTRAMUSCULA R KIT	4	ACA
M-M-R II (PF) SUBCUTANEOUS RECON SOLN	3	ACA
MYOBLOC INTRAMUSCULA R SOLUTION	5	PA; MSP
NABI-HB INTRAMUSCULA R SOLUTION	4	
OCTAGAM INTRAVENOUS SOLUTION	5	PA; MSP
PANZYGA INTRAVENOUS SOLUTION	4	PA
PEDIARIX (PF) INTRAMUSCULA R SYRINGE	3	ACA
PEDVAX HIB (PF) INTRAMUSCULA R SOLUTION	3	ACA
PENTACEL (PF) INTRAMUSCULA R KIT	3	ACA
PENTACEL ACTHIB COMPONENT (PF) INTRAMUSCULA R RECON SOLN	3	ACA
PNEUMOVAX-23 INJECTION SOLUTION	3	ACA
PNEUMOVAX-23 INJECTION SYRINGE	3	ACA

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Drug Name	Drug Tier	Requirements / Limits
PREVNAR 13 (PF) INTRAMUSCULAR SYRINGE	3	ACA
PRIVIGEN INTRAVENOUS SOLUTION	5	PA; MSP
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	ACA
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION	3	ACA
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	3	
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION	3	ACA
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE	3	ACA
ROTARIX ORAL SUSPENSION FOR RECONSTITUTION	4	ACA
ROTATEQ VACCINE ORAL SOLUTION	3	ACA

Drug Name	Drug Tier	Requirements / Limits
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	3	ACA
STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	
TDVAX INTRAMUSCULAR SUSPENSION	3	ACA
TENIVAC (PF) INTRAMUSCULAR SUSPENSION	4	ACA
TENIVAC (PF) INTRAMUSCULAR SYRINGE	4	ACA
TETANUS,DIPHTHERIA TOX PED(PF) INTRAMUSCULAR SUSPENSION	3	ACA
TICE BCG INTRA VESICAL SUSPENSION FOR RECONSTITUTION	3	
TRUMENBA INTRAMUSCULAR SYRINGE	3	ACA
TWINRIX (PF) INTRAMUSCULAR SYRINGE	3	ACA
TYPHIM VI INTRAMUSCULAR SOLUTION	3	

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Drug Name	Drug Tier	Requirements / Limits
TYPHIM VI INTRAMUSCULAR SYRINGE	3	
VAQTA (PF) INTRAMUSCULAR SUSPENSION	4	ACA
VAQTA (PF) INTRAMUSCULAR SYRINGE	4	ACA
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	ACA
VARIZIG INTRAMUSCULAR SOLUTION	3	ACA
VAXCHORA VACCINE ORAL SUSPENSION FOR RECONSTITUTION	3	
VIVOTIF ORAL CAPSULE, DELAYED RELEASE (DR/EC)	3	
XEMBIFY SUBCUTANEOUS SOLUTION	5	PA; MSP
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	
ZOSTAVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	4	ACA

Drug Name	Drug Tier	Requirements / Limits
<b>MUSCULOSKELETAL &amp; RHEUMATOLOGY</b>		
<b>GOUT THERAPY</b>		
<i>allopurinol oral tablet</i>	1	
<i>colchicine oral tablet</i>	2	CSE-9
COLCRYS ORAL TABLET	4	ST
<i>febuxostat oral tablet</i>	2	ST
GLOPERBA ORAL SOLUTION	4	
MITIGARE ORAL CAPSULE	3	
<i>probenecid oral tablet</i>	1	
<i>probenecid-colchicine oral tablet</i>	2	
ZYLOPRIM ORAL TABLET	4	
<b>OSTEOPOROSIS THERAPY</b>		
ACTONEL ORAL TABLET 150 MG, 35 MG, 5 MG	4	ST; QL
<i>alendronate oral solution</i>	2	H.S.A.; QL
<i>alendronate oral tablet 10 mg, 70 mg</i>	2	H.S.A.; QL
<i>alendronate oral tablet 35 mg, 5 mg</i>	1	H.S.A.; QL

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Drug Name	Drug Tier	Requirements / Limits
AELVIA ORAL TABLET, DELAYED RELEASE (DR/EC)	4	ST; QL
BINOSTO ORAL TABLET, EFFERVESCENT	4	ST; QL
BONIVA ORAL TABLET	4	ST; QL
EVISTA ORAL TABLET	4	
FORTEO SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
FOSAMAX ORAL TABLET 70 MG	4	ST; QL
FOSAMAX PLUS D ORAL TABLET	4	ST; QL
<i>ibandronate oral tablet</i>	2	H.S.A.; QL
<i>raloxifene oral tablet</i>	2	H.S.A.
<i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i>	2	H.S.A.; QL
<i>risedronate oral tablet, delayed release (dr/ec)</i>	2	H.S.A.; QL
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
TYMLOS SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
<b>OTHER RHEUMATOLOGICALS</b>		
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
ACTEMRA INTRAVENOUS SOLUTION	5	PA; ST; MSP
ACTEMRA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
ARAVA ORAL TABLET	4	QL
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
BENLYSTA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
DEPEN TITRATABS ORAL TABLET	4	PA
ENBREL MINI SUBCUTANEOUS CARTRIDGE	5	PA; MSP; QL
ENBREL SUBCUTANEOUS RECON SOLN	5	PA; MSP; QL
ENBREL SUBCUTANEOUS SOLUTION	5	PA; MSP; QL
ENBREL SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT	5	PA; MSP; QL

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Drug Name	Drug Tier	Requirements / Limits
HUMIRA PEN PSOR-UVEITS-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT	5	PA; MSP; QL
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT	5	PA; MSP; QL
HUMIRA SUBCUTANEOUS SYRINGE KIT	5	PA; MSP; QL
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT	5	PA; MSP; QL
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT	5	PA; MSP; QL
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT	5	PA; MSP; QL
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	5	PA; MSP; QL
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT	5	PA; MSP; QL
KEVZARA SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
KEVZARA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>leflunomide oral tablet</i>	2	QL
OTEZLA ORAL TABLET	5	PA; MSP; QL
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; MSP; QL
<i>penicillamine oral capsule</i>	2	PA
<i>penicillamine oral tablet</i>	2	PA
RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.2 ML, 12.5 MG/0.25 ML, 15 MG/0.3 ML, 17.5 MG/0.35 ML, 20 MG/0.4 ML, 22.5 MG/0.45 ML, 25 MG/0.5 ML, 30 MG/0.6 ML, 7.5 MG/0.15 ML	3	ST
RIDAURA ORAL CAPSULE	3	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; MSP; QL
SAVELLA ORAL TABLET	3	ST; QL
SAVELLA ORAL TABLETS,DOSE PACK	3	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
SIMPONI ARIA INTRAVENOUS SOLUTION	5	PA; MSP
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; MSP; QL
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; MSP; QL
XELJANZ ORAL TABLET	5	PA; MSP; QL
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; MSP; QL

## OBSTETRICS & GYNECOLOGY

### DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES

CAYA CONTOURED VAGINAL DIAPHRAGM	4	ACA
FC2 FEMALE CONDOM	3	ACA; OTC
FEMCAP VAGINAL DEVICE 22 MM	3	ACA
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	5	SP; ACA
LILETTA INTRAUTERINE INTRAUTERINE DEVICE	5	ACA; MSP

Drug Name	Drug Tier	Requirements / Limits
MIRENA INTRAUTERINE INTRAUTERINE DEVICE	5	SP; ACA
PARAGARD T 380A INTRAUTERINE INTRAUTERINE DEVICE	5	SP; ACA
SKYLA INTRAUTERINE INTRAUTERINE DEVICE	5	SP; ACA
WIDE-SEAL DIAPHRAGM	4	ACA

### ESTROGENS & PROGESTINS

ACTIVELLA ORAL TABLET 1-0.5 MG	4	
ALORA TRANSDERMAL PATCH SEMIWEEKLY	4	QL
<i>amabelz oral tablet</i>	2	
ANGELIQ ORAL TABLET	4	
AYGESTIN ORAL TABLET	4	
BIJUVA ORAL CAPSULE	4	
<i>camila oral tablet</i>	1	ACA
CLIMARA TRANSDERMAL PATCH WEEKLY	4	QL

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Drug Name	Drug Tier	Requirements / Limits
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY	3	
<i>covaryx h.s. oral tablet</i>	1	
<i>covaryx oral tablet</i>	2	
<i>deblitane oral tablet</i>	1	ACA
DELESTROGEN INTRAMUSCULAR OIL	4	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	3	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	4	ACA; QL
DEPO-PROVERA INTRAMUSCULAR SYRINGE	4	ACA; QL
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE	4	ACA; QL
DIVIGEL TRANSDERMAL GEL IN PACKET 0.25 MG/0.25 GRAM (0.1 %), 0.5 MG/0.5 GRAM (0.1 %), 0.75 MG/0.75 GRAM (0.1%), 1 MG/GRAM (0.1 %)	3	QL
DIVIGEL TRANSDERMAL GEL IN PACKET 1.25 MG/1.25 GRAM (0.1 %)	3	

Drug Name	Drug Tier	Requirements / Limits
<i>dotti transdermal patch semiweekly</i>	2	QL
DUAVEE ORAL TABLET	3	
<i>eemt hs oral tablet</i>	1	
<i>eemt oral tablet</i>	2	
ENDOMETRIN VAGINAL INSERT	5	SP
<i>errin oral tablet</i>	1	ACA
ESTRACE ORAL TABLET	4	
<i>estradiol oral tablet</i>	1	
<i>estradiol transdermal patch semiweekly</i>	2	QL
<i>estradiol transdermal patch weekly</i>	2	QL
<i>estradiol vaginal cream</i>	2	
<i>estradiol vaginal tablet</i>	2	
<i>estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml</i>	2	
<i>estradiol-norethindrone acet oral tablet</i>	2	
ESTRING VAGINAL RING	3	
<i>estrogens-methyltestosterone oral tablet 0.625-1.25 mg</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>estrogens-methyltestosterone oral tablet 1.25-2.5 mg</i>	2	
EVAMIST TRANSDERMAL SPRAY, NON-AEROSOL	4	QL
FEMHRT LOW DOSE ORAL TABLET	4	
<i>fyavolv oral tablet</i>	2	
<i>heather oral tablet</i>	1	ACA
<i>hydroxyprogest(pf)(p reg presv) intramuscular oil</i>	5	PA; MSP
<i>hydroxyprogesterone cap(ppres) intramuscular oil</i>	5	PA; MSP
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	4	QL
IMVEXXY STARTER PACK VAGINAL INSERT, DOSE PACK	4	QL
<i>incassia oral tablet</i>	2	ACA
<i>jencycla oral tablet</i>	2	ACA
<i>jinteli oral tablet</i>	2	
<i>lopreeza oral tablet 1-0.5 mg</i>	2	
<i>lyza oral tablet</i>	1	ACA
MAKENA (PF) SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
MAKENA INTRAMUSCULAR OIL 250 MG/ML (1 ML)	5	PA; MSP
<i>medroxyprogesterone intramuscular suspension</i>	2	ACA; QL
<i>medroxyprogesterone intramuscular syringe</i>	2	ACA; QL
<i>medroxyprogesterone oral tablet</i>	1	
MENEST ORAL TABLET	4	
MENOSTAR TRANSDERMAL PATCH WEEKLY	4	QL
<i>mimvey oral tablet</i>	2	
<i>nora-be oral tablet</i>	2	ACA
<i>norethindrone (contraceptive) oral tablet</i>	1	ACA
<i>norethindrone acetate oral tablet</i>	1	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	2	
<i>norlyda oral tablet</i>	1	ACA
PREFEST ORAL TABLET	4	
PREMARIN ORAL TABLET	3	
PREMARIN VAGINAL CREAM	3	
PREMPHASE ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements / Limits
PREMPRO ORAL TABLET	3	
<i>progesterone micronized oral capsule</i>	2	
PROMETRIUM ORAL CAPSULE	4	
PROVERA ORAL TABLET	4	
<i>sharobel oral tablet</i>	1	ACA
<i>tulana oral tablet</i>	2	ACA
<i>yuvafem vaginal tablet</i>	2	
<b>MISCELLANEOUS OB/GYN</b>		
ANNOVERA VAGINAL RING	4	ACA; QL
CERVIDIL VAGINAL INSERT, EXTENDED RELEASE	4	
CLEOCIN VAGINAL CREAM	4	
CLEOCIN VAGINAL SUPPOSITORY	4	
<i>clindamycin phosphate vaginal cream</i>	2	
CLINDESSE VAGINAL CREAM, EXTENDED RELEASE	4	
<i>eluryng vaginal ring</i>	2	ACA
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>fem ph vaginal gel</i>	1	
<i>gynol ii vaginal gel</i>	1	ACA; OTC
<i>isoxsuprine oral tablet</i>	1	
LUPANETA PACK (1 MONTH) KIT. SYRINGE AND TABLET	5	PA; SP
LUPANETA PACK (3 MONTH) KIT. SYRINGE AND TABLET	5	PA; SP
LYSTEDA ORAL TABLET	4	
METROGEL VAGINAL VAGINAL GEL	4	
<i>metronidazole vaginal gel</i>	2	
<i>miconazole-3 vaginal suppository</i>	1	
NEXPLANON SUBDERMAL IMPLANT	5	ACA; MSP
NUVARING VAGINAL RING	4	PA; ACA
NUVESSA VAGINAL GEL	4	
ORIAHNN ORAL CAPSULE, SEQUENTIAL	3	PA
OSPHENA ORAL TABLET	4	
PREPIDIL VAGINAL GEL	4	
PROSTIN E2 VAGINAL SUPPOSITORY	4	

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Drug Name	Drug Tier	Requirements / Limits
RELAGARD VAGINAL GEL	4	
<i>terconazole vaginal cream</i>	2	
<i>terconazole vaginal suppository</i>	1	
TODAY CONTRACEPTIVE SPONGE VAGINAL CONTRACEPTIVE SPONGE	3	ACA; OTC
<i>tranexamic acid oral tablet</i>	2	
TRIMO-SAN JELLY VAGINAL GEL	3	
<i>vaginal contraceptive foam vaginal foam</i>	1	ACA; OTC
<i>vandazole vaginal gel</i>	2	
VCF CONTRACEPTIVE FILM VAGINAL FILM	3	ACA; OTC
VCF CONTRACEPTIVE GEL VAGINAL GEL	3	ACA; OTC
<i>xulane transdermal patch weekly</i>	2	ACA
<b>ORAL CONTRACEPTIVES &amp; RELATED AGENTS</b>		
<i>afirmelle oral tablet</i>	1	ACA
AFTERA ORAL TABLET	4	ACA; OTC; QL

Drug Name	Drug Tier	Requirements / Limits
<i>altavera (28) oral tablet</i>	1	ACA
<i>alyacen 1/35 (28) oral tablet</i>	1	ACA
<i>alyacen 7/7/7 (28) oral tablet</i>	1	ACA
<i>amethia lo oral tablets,dose pack,3 month</i>	1	ACA
<i>amethia oral tablets,dose pack,3 month</i>	2	ACA
<i>amethyst (28) oral tablet</i>	2	ACA
<i>apri oral tablet</i>	1	ACA
<i>aranelle (28) oral tablet</i>	1	ACA
<i>ashlyna oral tablets,dose pack,3 month</i>	2	ACA
<i>aubra eq oral tablet</i>	1	ACA
<i>aubra oral tablet</i>	1	ACA
<i>aurovela 1.5/30 (21) oral tablet</i>	2	ACA
<i>aurovela 1/20 (21) oral tablet</i>	1	ACA
<i>aurovela 24 fe oral tablet</i>	2	ACA
<i>aurovela fe 1.5/30 (28) oral tablet</i>	2	ACA
<i>aurovela fe 1-20 (28) oral tablet</i>	2	ACA
<i>aviane oral tablet</i>	1	ACA
<i>ayuna oral tablet</i>	1	ACA
<i>azurette (28) oral tablet</i>	1	ACA

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Drug Name	Drug Tier	Requirements / Limits
BALCOLTRA ORAL TABLET	4	ST; ACA
<i>balziva (28) oral tablet</i>	1	ACA
<i>bekyree (28) oral tablet</i>	1	ACA
BEYAZ ORAL TABLET	4	ST; ACA
<i>blisovi 24 fe oral tablet</i>	2	ACA
<i>blisovi fe 1.5/30 (28) oral tablet</i>	2	ACA
<i>blisovi fe 1/20 (28) oral tablet</i>	2	ACA
<i>briellyn oral tablet</i>	2	ACA
<i>camrese lo oral tablets,dose pack,3 month</i>	1	ACA
<i>camrese oral tablets,dose pack,3 month</i>	2	ACA
<i>caziant (28) oral tablet</i>	1	ACA
<i>charlotte 24 fe oral tablet,chewable</i>	2	ACA
<i>chateal (28) oral tablet</i>	1	ACA
<i>chateal eq (28) oral tablet</i>	1	ACA
<i>cryselle (28) oral tablet</i>	1	ACA
<i>cyclafem 1/35 (28) oral tablet</i>	1	ACA
<i>cyclafem 7/7/7 (28) oral tablet</i>	1	ACA
<i>cyred eq oral tablet</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>cyred oral tablet</i>	1	ACA
<i>dasetta 1/35 (28) oral tablet</i>	1	ACA
<i>dasetta 7/7/7 (28) oral tablet</i>	1	ACA
<i>daysee oral tablets,dose pack,3 month</i>	2	ACA
<i>desog-e.estradiol/e.estradiol oral tablet</i>	1	ACA
<i>desogestrel-ethinyl estradiol oral tablet</i>	1	ACA
<i>drospirenone-e.estradiol-lm,fa oral tablet 3-0.02-0.451 mg (24) (4)</i>	2	ACA
<i>drospirenone-e.estradiol-lm,fa oral tablet 3-0.03-0.451 mg (21) (7)</i>	1	ACA
<i>drospirenone-ethinyl estradiol oral tablet</i>	2	ACA
<i>econtra ez oral tablet</i>	1	ACA; OTC; QL
<i>econtra one-step oral tablet</i>	1	ACA; OTC; QL
<i>elinest oral tablet</i>	1	ACA
ELLA ORAL TABLET	4	ACA; QL
<i>emoquette oral tablet</i>	1	ACA
<i>enpresse oral tablet</i>	1	ACA
<i>enskyce oral tablet</i>	1	ACA
<i>estarylla oral tablet</i>	1	ACA
<i>ethynodiol diac-eth estradiol oral tablet</i>	1	ACA

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>falmina (28) oral tablet</i>	1	ACA
<i>fayosim oral tablets,dose pack,3 month</i>	1	ACA
<i>femynor oral tablet</i>	1	ACA
<i>gianvi (28) oral tablet</i>	2	ACA
<i>hailey 24 fe oral tablet</i>	2	ACA
<i>hailey fe 1.5/30 (28) oral tablet</i>	2	ACA
<i>hailey fe 1/20 (28) oral tablet</i>	2	ACA
<i>hailey oral tablet</i>	2	ACA
<i>introvale oral tablets,dose pack,3 month</i>	2	ACA
<i>isibloom oral tablet</i>	1	ACA
<i>jaimiess oral tablets,dose pack,3 month</i>	2	ACA
<i>jasmiel (28) oral tablet</i>	2	ACA
<i>jolessa oral tablets,dose pack,3 month</i>	2	ACA
<i>juleber oral tablet</i>	1	ACA
<i>junel 1.5/30 (21) oral tablet</i>	1	ACA
<i>junel 1/20 (21) oral tablet</i>	1	ACA
<i>junel fe 1.5/30 (28) oral tablet</i>	1	ACA
<i>junel fe 1/20 (28) oral tablet</i>	1	ACA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements / Limits</b>
<i>junel fe 24 oral tablet</i>	2	ACA
<i>kaitlib fe oral tablet,chewable</i>	2	ACA
<i>kalliga oral tablet</i>	1	ACA
<i>kariva (28) oral tablet</i>	1	ACA
<i>kelnor 1/35 (28) oral tablet</i>	1	ACA
<i>kelnor 1-50 oral tablet</i>	1	ACA
<i>kurvelo (28) oral tablet</i>	1	ACA
<i>l norgest/e.estradiol-e.estradiol oral tablets,dose pack,3 month</i>	2	ACA
<i>larin 1.5/30 (21) oral tablet</i>	1	ACA
<i>larin 1/20 (21) oral tablet</i>	1	ACA
<i>larin 24 fe oral tablet</i>	2	ACA
<i>larin fe 1.5/30 (28) oral tablet</i>	1	ACA
<i>larin fe 1/20 (28) oral tablet</i>	1	ACA
<i>larissia oral tablet</i>	1	ACA
<i>layolis fe oral tablet,chewable</i>	2	ACA
<i>leena 28 oral tablet</i>	1	ACA
<i>lessina oral tablet</i>	1	ACA
<i>levonest (28) oral tablet</i>	1	ACA
<i>levonorgestrel oral tablet 1.5 mg</i>	1	ACA; OTC; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg</i>	1	ACA
<i>levonorgestrel-ethinyl estrad oral tablet 90-20 mcg (28)</i>	2	ACA
<i>levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month</i>	2	ACA
<i>levonorg-eth estrad triphasic oral tablet</i>	1	ACA
<i>levora-28 oral tablet</i>	1	ACA
<i>lillow (28) oral tablet</i>	1	ACA
<b>LO LOESTRIN FE ORAL TABLET</b>	3	ST; ACA
<i>lojaimiess oral tablets,dose pack,3 month</i>	2	ACA
<i>loryna (28) oral tablet</i>	2	ACA
<i>low-ogestrel (28) oral tablet</i>	1	ACA
<i>lo-zumandimine (28) oral tablet</i>	2	ACA
<i>lutera (28) oral tablet</i>	1	ACA
<i>marlissa (28) oral tablet</i>	1	ACA
<i>melodetta 24 fe oral tablet,chewable</i>	2	ACA
<i>mibelas 24 fe oral tablet,chewable</i>	2	ACA
<i>microgestin 1.5/30 (21) oral tablet</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>microgestin 1/20 (21) oral tablet</i>	1	ACA
<i>microgestin fe 1.5/30 (28) oral tablet</i>	1	ACA
<i>microgestin fe 1/20 (28) oral tablet</i>	1	ACA
<i>mili oral tablet</i>	1	ACA
<i>mono-linyah oral tablet</i>	1	ACA
<i>my choice oral tablet</i>	1	ACA; OTC; QL
<i>my way oral tablet</i>	1	ACA; OTC; QL
<b>NATAZIA ORAL TABLET</b>	4	ST; ACA
<i>necon 0.5/35 (28) oral tablet</i>	1	ACA
<i>new day oral tablet</i>	1	ACA; OTC; QL
<i>nikki (28) oral tablet</i>	2	ACA
<i>noreth-ethinyl estradiol-iron oral tablet,chewable 0.4mg-35mcg(21) and 75 mg (7)</i>	1	ACA
<i>noreth-ethinyl estradiol-iron oral tablet,chewable 0.8mg-25mcg(24) and 75 mg (4)</i>	2	ACA
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	1	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA
<i>norethindrone-e.estradiol-iron oral tablet,chewable</i>	2	ACA
<i>norgestimate-ethinyl estradiol oral tablet</i>	1	ACA
<i>nortrel 0.5/35 (28) oral tablet</i>	1	ACA
<i>nortrel 1/35 (21) oral tablet</i>	1	ACA
<i>nortrel 1/35 (28) oral tablet</i>	1	ACA
<i>nortrel 7/7/7 (28) oral tablet</i>	1	ACA
<i>ocella oral tablet</i>	2	ACA
<i>opcicon one-step oral tablet</i>	1	ACA; OTC; QL
<i>option-2 oral tablet</i>	1	ACA; OTC; QL
<i>orsythia oral tablet</i>	1	ACA
<i>philith oral tablet</i>	2	ACA
<i>pimtrea (28) oral tablet</i>	2	ACA
<i>pirmella oral tablet</i>	1	ACA
PLAN B ONE-STEP ORAL TABLET	3	ACA; OTC; QL
<i>portia 28 oral tablet</i>	1	ACA
<i>previfem oral tablet</i>	1	ACA
<i>reclipsen (28) oral tablet</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>rivelsa oral tablets,dose pack,3 month</i>	1	ACA
<i>setlakin oral tablets,dose pack,3 month</i>	1	ACA
<i>simliya (28) oral tablet</i>	2	ACA
<i>simpesse oral tablets,dose pack,3 month</i>	2	ACA
SLYND ORAL TABLET	4	ST; ACA
<i>sprintec (28) oral tablet</i>	1	ACA
<i>sronyx oral tablet</i>	1	ACA
<i>syeda oral tablet</i>	2	ACA
TAKE ACTION ORAL TABLET	4	ACA; OTC; QL
<i>tarina 24 fe oral tablet</i>	2	ACA
<i>tarina fe 1/20 (28) oral tablet</i>	1	ACA
TAYTULLA ORAL CAPSULE	3	ST; ACA
<i>tilia fe oral tablet</i>	2	ACA
<i>tri femynor oral tablet</i>	1	ACA
<i>tri-estarylla oral tablet</i>	1	ACA
<i>tri-legest fe oral tablet</i>	1	ACA
<i>tri-linyah oral tablet</i>	1	ACA
<i>tri-lo-estarylla oral tablet</i>	1	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>tri-lo-marzia oral tablet</i>	1	ACA
<i>tri-lo-mili oral tablet</i>	1	ACA
<i>tri-lo-sprintec oral tablet</i>	1	ACA
<i>tri-mili oral tablet</i>	1	ACA
<i>tri-previfem (28) oral tablet</i>	1	ACA
<i>tri-sprintec (28) oral tablet</i>	1	ACA
<i>trivora (28) oral tablet</i>	1	ACA
<i>tri-vylibra lo oral tablet</i>	1	ACA
<i>tri-vylibra oral tablet</i>	1	ACA
<i>tydemy oral tablet</i>	2	ACA
<i>velivet triphasic regimen (28) oral tablet</i>	2	ACA
<i>vienva oral tablet</i>	1	ACA
<i>viorele (28) oral tablet</i>	2	ACA
<i>volnea (28) oral tablet</i>	2	ACA
<i>vyfemla (28) oral tablet</i>	1	ACA
<i>vylibra oral tablet</i>	1	ACA
<i>wera (28) oral tablet</i>	1	ACA
<i>wymzya fe oral tablet, chewable</i>	2	ACA
YAZ (28) ORAL TABLET	4	ST; ACA
<i>zarah oral tablet</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>zovia 1/35e (28) oral tablet</i>	1	ACA
<i>zumandimine (28) oral tablet</i>	2	ACA
<b>OXYTOCICS</b>		
<i>methergine oral tablet</i>	2	PA; QL
<i>methylergonovine oral tablet</i>	2	PA; QL
<b>OPHTHALMOLOGY</b>		
<b>ANTIBIOTICS</b>		
<i>ak-poly-bac ophthalmic (eye) ointment</i>	2	
AZASITE OPHTHALMIC (EYE) DROPS	3	
BACIGUENT OPHTHALMIC (EYE) OINTMENT	4	
<i>bacitracin ophthalmic (eye) ointment</i>	2	
<i>bacitracin-polymyxin b ophthalmic (eye) ointment</i>	2	
BESIVANCE OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
BETADINE OPHTHALMIC PREP OPHTHALMIC (EYE) SOLUTION	4	

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Drug Name	Drug Tier	Requirements / Limits
CILOXAN OPTHALMIC (EYE) DROPS	4	
<i>ciprofloxacin hcl ophthalmic (eye) drops</i>	1	
<i>erythromycin ophthalmic (eye) ointment</i>	2	
<i>gatifloxacin ophthalmic (eye) drops</i>	2	
<i>gentak ophthalmic (eye) ointment</i>	2	
<i>gentamicin ophthalmic (eye) drops</i>	1	
<i>levofloxacin ophthalmic (eye) drops</i>	1	
MOXEZA OPTHALMIC (EYE) DROPS, VISCOUS	4	
MOXIFLOXACIN (PF)-BSS INTRAVITREAL SOLUTION	4	ST
<i>moxifloxacin ophthalmic (eye) drops</i>	2	
<i>moxifloxacin ophthalmic (eye) drops, viscous</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SOLUTION 0.8 MG/0.8 ML, 4 MG/0.8 ML	4	ST
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SOLUTION 5 MG/ML	4	
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SYRINGE	4	ST
NATACYN OPTHALMIC (EYE) DROPS,SUSPENSION	3	
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment</i>	2	
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops</i>	1	
<i>neo-polycin ophthalmic (eye) ointment</i>	2	
OCUFLOX OPTHALMIC (EYE) DROPS	4	
<i>ofloxacin ophthalmic (eye) drops</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>polycin ophthalmic (eye) ointment</i>	2	
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops</i>	1	
POLYTRIM OPTHALMIC (EYE) DROPS	4	
<i>tobramycin ophthalmic (eye) drops</i>	1	
TOBREX OPTHALMIC (EYE) DROPS	4	
TOBREX OPTHALMIC (EYE) OINTMENT	4	
VIGAMOX OPTHALMIC (EYE) DROPS	4	
ZYMAXID OPTHALMIC (EYE) DROPS	4	
<b>ANTIVIRALS</b>		
<i>trifluridine ophthalmic (eye) drops</i>	1	
ZIRGAN OPTHALMIC (EYE) GEL	4	
<b>BETA-BLOCKERS</b>		
<i>betaxolol ophthalmic (eye) drops</i>	2	
BETIMOL OPTHALMIC (EYE) DROPS	4	

Drug Name	Drug Tier	Requirements / Limits
BETOPTIC S OPTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>carteolol ophthalmic (eye) drops</i>	1	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) drops</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily</i>	2	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %</i>	1	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.5 %</i>	2	
TIMOPTIC OPTHALMIC (EYE) DROPS	4	
TIMOPTIC-XE OPTHALMIC (EYE) GEL FORMING SOLUTION	4	
<b>CHOLINESTERASE INHIBITOR MIOTICS</b>		
PHOSPHOLINE IODIDE OPTHALMIC (EYE) DROPS	3	

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Drug Name	Drug Tier	Requirements / Limits
<b>CYCLOPLEGIC MYDRIATICS</b>		
<i>atropine ophthalmic (eye) drops</i>	1	
ATROPINE OPHTHALMIC (EYE) DROPS, EMULSION	4	
<i>atropine ophthalmic (eye) ointment</i>	2	
CYCLOGYL OPHTHALMIC (EYE) DROPS	4	
<i>cyclopentolate ophthalmic (eye) drops</i>	1	
CYCLOPEN-TROPIC-PHENYLEPH-WATR OPHTHALMIC (EYE) DROPS	4	
<i>homatropaire ophthalmic (eye) drops</i>	1	
ISOPTO ATROPINE OPHTHALMIC (EYE) DROPS	4	
MYDRIACYL OPHTHALMIC (EYE) DROPS	4	
PAREMYD OPHTHALMIC (EYE) DROPS	4	

Drug Name	Drug Tier	Requirements / Limits
PHENYLEPH-TROPICAMIDE IN WATER OPHTHALMIC (EYE) DROPS	4	
<i>tropicamide ophthalmic (eye) drops</i>	1	
<b>DIRECT ACTING MIOTICS</b>		
ISOPTO CARPINE OPHTHALMIC (EYE) DROPS	4	
MIOCHOL-E INTRAOCULAR KIT	4	
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	1	
<b>MISCELLANEOUS OPHTHALMOLOGICS</b>		
AKTEN (PF) OPHTHALMIC (EYE) GEL	4	
ALCAINE OPHTHALMIC (EYE) DROPS	4	
ALOCRIAL OPHTHALMIC (EYE) DROPS	4	ST
ALOMIDE OPHTHALMIC (EYE) DROPS	4	ST
<i>altacaine ophthalmic (eye) drops</i>	1	
ALTAFLUOR BENOX OPHTHALMIC (EYE) DROPS	4	

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Drug Name	Drug Tier	Requirements / Limits
<i>azelastine ophthalmic (eye) drops</i>	2	
BEOVU INTRAVITREAL SOLUTION	5	PA; MSP
BEPREVE OPHTHALMIC (EYE) DROPS	4	ST
BEVACIZUMAB INTRAVITREAL SYRINGE 2.5 MG/0.1 ML, 3.25 MG/0.13 ML, 3.75 MG/0.15 ML	4	MSP
CEQUA OPHTHALMIC (EYE) DROPPERETTE	4	PA
<i>cromolyn ophthalmic (eye) drops</i>	1	
CYCLOSPORINE IN KLARITY OPHTHALMIC (EYE) DROPS	4	
CYSTARAN OPHTHALMIC (EYE) DROPS	5	PA; SP
DEXAMET-MOXIFL-KETORO-NACL(PF) INTRAOCULAR SOLUTION	4	
<i>epinastine ophthalmic (eye) drops</i>	1	

Drug Name	Drug Tier	Requirements / Limits
EYLEA INTRAVITREAL SOLUTION	5	PA; MSP
EYLEA INTRAVITREAL SYRINGE	5	PA; MSP
<i>fluorescein-proparacaine ophthalmic (eye) drops</i>	1	
KLARITY-A (AZITHRO-CHONDR)(PF) OPHTHALMIC (EYE) DROPS	4	
KLARITY-B (BETAMETH-CHOND)(PF) OPHTHALMIC (EYE) DROPS	4	
KLARITY-L (LOTEPRED-CHOND)(PF) OPHTHALMIC (EYE) DROPS	4	
LACRISERT OPHTHALMIC (EYE) INSERT	4	
LIDOCAINE-PHENYLEPHRIN-BSS(PF) INTRAOCULAR SYRINGE	4	
<i>lidocaine-phenylephrn in water intraocular solution</i>	2	
LUCENTIS INTRAVITREAL SOLUTION	5	PA; MSP

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Drug Name	Drug Tier	Requirements / Limits
LUCENTIS INTRAVITREAL SYRINGE	5	PA; MSP
LUXTURNA SUBRETINAL SUSPENSION	5	PA; MSP
MYDRIATIC4(TROP-PROP-PEKTRLC) OPHTHALMIC (EYE) DROPS	4	
<i>olopatadine ophthalmic (eye) drops</i>	2	
OMIDRIA INTRAOCULAR CONCENTRATE	4	
OXERVATE OPHTHALMIC (EYE) DROPS	5	PA; MSP
PHOTREXA CROSS-LINKING KIT OPHTHALMIC (EYE) COMBO, DROPS AND DROPS VISCOUS	4	
PHOTREXA VISCOUS OPHTHALMIC (EYE) DROPS, VISCOUS	4	
PREDNISOL ACE-GATIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS,SUSPENSION	4	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLN SP-GATIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS	4	
PREDNISOLN SP-MOXIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS	4	
PREDNISOLONE SOD PH-BROMFENAC OPHTHALMIC (EYE) DROPS	4	
PREDNISOLONE-MOXIFLO-NEPAFENAC OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
PREDNISOLONE-MOXIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>proparacaine ophthalmic (eye) drops</i>	1	
RACEPINEPH-LIDOCAINE-BSS 7(PF) INTRAOCULAR SOLUTION	4	
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS	3	PA; QL

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Drug Name	Drug Tier	Requirements / Limits
RESTASIS OPHTHALMIC (EYE) DROPPERETTE	3	PA; QL
TETRACAINE HCL (PF) OPHTHALMIC (EYE) DROPS	4	
<i>tetracaine hcl ophthalmic (eye) drops</i>	1	
XIIDRA OPHTHALMIC (EYE) DROPPERETTE	3	PA; QL
ZERVIAE OPHTHALMIC (EYE) DROPPERETTE	3	ST
<b>NON-STEROIDAL ANTI- INFLAMMATORY AGENTS</b>		
ACULAR LS OPHTHALMIC (EYE) DROPS	4	ST
ACULAR OPHTHALMIC (EYE) DROPS	4	ST
<i>bromfenac ophthalmic (eye) drops</i>	2	
BROMSITE OPHTHALMIC (EYE) DROPS	4	
<i>diclofenac sodium ophthalmic (eye) drops</i>	1	
<i>flurbiprofen sodium ophthalmic (eye) drops</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSIO N	4	ST
<i>ketorolac ophthalmic (eye) drops</i>	1	
PROLENSA OPHTHALMIC (EYE) DROPS	4	ST
<b>ORAL DRUGS FOR GLAUCOMA</b>		
<i>acetazolamide oral capsule, extended release</i>	2	
<i>acetazolamide oral tablet</i>	2	
<i>methazolamide oral tablet</i>	2	
<b>OTHER GLAUCOMA DRUGS</b>		
AZOPT OPHTHALMIC (EYE) DROPS,SUSPENSIO N	3	
<i>bimatoprost ophthalmic (eye) drops</i>	2	ST
BRIMONIDINE- DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS	4	
COSOPT (PF) OPHTHALMIC (EYE) DROPPERETTE	4	

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Drug Name	Drug Tier	Requirements / Limits
DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS	4	
<i>dorzolamide ophthalmic (eye) drops</i>	1	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette</i>	2	
DORZOLAMIDE-TIMOLOL (PF) OPHTHALMIC (EYE) DROPS	4	
<i>dorzolamide-timolol ophthalmic (eye) drops</i>	1	
LATANOPROST (PF) OPHTHALMIC (EYE) DROPS	4	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	3	ST
<i>miostat intraocular solution</i>	2	
MITOSOL OPHTHALMIC (EYE) KIT	4	
RHOPRESSA OPHTHALMIC (EYE) DROPS	3	
ROCKLATAN OPHTHALMIC (EYE) DROPS	4	ST

Drug Name	Drug Tier	Requirements / Limits
SIMBRINZA OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
TIMOL-BRIMON-DORZO-LATANOP(PF) OPHTHALMIC (EYE) DROPS	4	
TIMOLOL-BRIMONIDI-DORZOLAM(PF) OPHTHALMIC (EYE) DROPS	4	
TIMOLOL-DORZOLAMID-LATANOP(PF) OPHTHALMIC (EYE) DROPS	4	
TIMOLOL-LATANOPROST(PF) OPHTHALMIC (EYE) DROPS	4	
<i>travoprost ophthalmic (eye) drops</i>	2	ST
TRUSOPT OPHTHALMIC (EYE) DROPS	4	
VYZULTA OPHTHALMIC (EYE) DROPS	4	ST
ZIOPTAN (PF) OPHTHALMIC (EYE) DROPPERETTE	3	ST

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Drug Name	Drug Tier	Requirements / Limits
<b>STEROID-ANTIBIOTIC COMBINATIONS</b>		
DEXAMETH-MOXIFLOX(PF)-NACL,ISO INTRAOCULAR SOLUTION	4	
MAXITROL OPTHALMIC (EYE) DROPS,SUSPENSION	4	
MAXITROL OPTHALMIC (EYE) OINTMENT	4	
<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment</i>	2	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension</i>	2	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment</i>	2	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension</i>	2	
<i>neo-polycin hc ophthalmic (eye) ointment</i>	2	
PRED-G OPTHALMIC (EYE) DROPS,SUSPENSION	4	

Drug Name	Drug Tier	Requirements / Limits
PRED-G S.O.P. OPTHALMIC (EYE) OINTMENT	4	
PREDNISOLONE ACET-GATIFLOXACIN OPTHALMIC (EYE) DROPS,SUSPENSION	4	
PREDNISOLONE SOD PH-MOXIFLOX OPTHALMIC (EYE) DROPS	4	
PREDNISOLONE-MOXIFLOXACIN HCL OPTHALMIC (EYE) DROPS,SUSPENSION	4	
TOBRADEX OPTHALMIC (EYE) DROPS,SUSPENSION	4	
TOBRADEX OPTHALMIC (EYE) OINTMENT	3	
TOBRADEX ST OPTHALMIC (EYE) DROPS,SUSPENSION	3	
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
TRIAMCINOLON-MOXIFLOX-WATR(PF) INTRAOCULAR SUSPENSION	4	
ZYLET OPTHALMIC (EYE) DROPS,SUSPENSION	3	
<b>STERIODS</b>		
ALREX OPTHALMIC (EYE) DROPS,SUSPENSION	4	ST
<i>dexamethasone sodium phosphate ophthalmic (eye) drops</i>	2	
DEXTENZA INTRACANALICULAR INSERT	4	
DEXYCU (PF) INTRAOCULAR SUSPENSION	4	
DUREZOL OPTHALMIC (EYE) DROPS	4	
FLAREX OPTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>fluorometholone ophthalmic (eye) drops,suspension</i>	2	

Drug Name	Drug Tier	Requirements / Limits
FML LIQUIFILM OPTHALMIC (EYE) DROPS,SUSPENSION	4	
ILUVIEN INTRAVITREAL IMPLANT	5	MSP
INVELTYS OPTHALMIC (EYE) DROPS,SUSPENSION	3	
LOTEMAX OPTHALMIC (EYE) DROPS,GEL	3	
LOTEMAX OPTHALMIC (EYE) DROPS,SUSPENSION	4	
LOTEMAX OPTHALMIC (EYE) OINTMENT	3	
LOTEMAX SM OPTHALMIC (EYE) DROPS,GEL	3	
<i>loteprednol etabonate ophthalmic (eye) drops,suspension</i>	2	
OZURDEX INTRAVITREAL IMPLANT	5	MSP
PRED FORTE OPTHALMIC (EYE) DROPS,SUSPENSION	4	

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Drug Name	Drug Tier	Requirements / Limits
PREDNISOLONE ACETATE (PF) OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>prednisolone acetate ophthalmic (eye) drops,suspension</i>	2	
<i>prednisolone sodium phosphate ophthalmic (eye) drops</i>	1	
RETISERT INTRAVITREAL IMPLANT	5	MSP
YUTIQ INTRAVITREAL IMPLANT	5	SP
<b>STEROID-SULFONAMIDE COMBINATIONS</b>		
BLEPHAMIDE OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
BLEPHAMIDE S.O.P. OPHTHALMIC (EYE) OINTMENT	4	
<i>sulfacetamide-prednisolone ophthalmic (eye) drops</i>	1	
<b>SULFONAMIDES</b>		
BLEPH-10 OPHTHALMIC (EYE) DROPS	4	

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium ophthalmic (eye) drops</i>	2	
<i>sulfacetamide sodium ophthalmic (eye) ointment</i>	2	
<b>SYMPATHOMIMETICS</b>		
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.15 %	4	
<i>apraclonidine ophthalmic (eye) drops</i>	2	
<i>brimonidine ophthalmic (eye) drops 0.15 %</i>	2	
<i>brimonidine ophthalmic (eye) drops 0.2 %</i>	1	
IOPIDINE OPHTHALMIC (EYE) DROPPERETTE	4	
<b>VASOCONSTRICTOR DECONGESTANTS</b>		
CYCLOMYDRIL OPHTHALMIC (EYE) DROPS	4	
<i>phenylephrine hcl ophthalmic (eye) drops</i>	1	
<b>RESPIRATORY, ALLERGY, COUGH &amp; COLD</b>		
<b>ANTI-HISTAMINE &amp; ANTI-ALLERGENIC AGENTS</b>		
<i>carbinoxamine maleate oral liquid</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	1	ST
<i>cetirizine oral solution 1 mg/ml</i>	1	
CLARINEX ORAL TABLET	4	QL
<i>clemastine oral tablet 2.68 mg</i>	1	
<i>cyproheptadine oral syrup</i>	1	
<i>cyproheptadine oral tablet</i>	1	
<i>desloratadine oral tablet</i>	2	QL
<i>desloratadine oral tablet, disintegrating</i>	2	QL
<i>dexchlorpheniramine maleate oral solution</i>	2	PA
DIPHEN ORAL ELIXIR	4	
<i>diphenhydramine hcl injection solution 50 mg/ml</i>	2	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	2	QL
EPIPEN 2-PAK INJECTION AUTO-INJECTOR	3	PA; QL
EPIPEN JR 2-PAK INJECTION AUTO-INJECTOR	3	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1	
<i>hydroxyzine hcl oral tablet</i>	1	
<i>hydroxyzine pamoate oral capsule</i>	1	
KARBINAL ER ORAL SUSPENSION, EXTENDED REL 12 HR	4	ST
<i>levocetirizine oral solution</i>	1	
<i>levocetirizine oral tablet</i>	2	QL
<i>phenadoz rectal suppository 25 mg</i>	2	
<i>promethazine oral syrup</i>	1	
<i>promethazine oral tablet</i>	1	
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	2	
<i>promethegan rectal suppository</i>	2	
RYCLORA ORAL SOLUTION	4	
RYVENT ORAL TABLET	4	ST
SYMJEPI INJECTION SYRINGE	3	QL
VISTARIL ORAL CAPSULE	4	

**COUGH & COLD THERAPY**

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Drug Name	Drug Tier	Requirements / Limits
<i>benzonatate oral capsule</i>	2	
BROMFED DM ORAL SYRUP	4	
<i>brompheniramine-pseudoeph-dm oral syrup</i>	1	
CAPCOF ORAL LIQUID	4	
CLARINEX-D 12 HOUR ORAL TABLET, ER MULTIPHASE 12 HR	4	QL
<i>codeine-guaifenesin oral liquid</i>	2	
CODITUSSIN AC ORAL LIQUID	4	
CODITUSSIN DAC ORAL LIQUID	4	
<i>g tussin ac oral liquid</i>	2	
<i>guaiaatussin ac oral liquid</i>	2	
HISTEX-AC ORAL SYRUP	4	
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr</i>	2	
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i>	1	
<i>hydrocodone-homatropine oral tablet</i>	1	
<i>hydromet oral syrup</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MAR-COF CG ORAL LIQUID	4	
<i>maxi-tuss ac oral liquid</i>	2	
MAXI-TUSS CD ORAL LIQUID	4	
<i>m-clear wc oral liquid</i>	1	
M-END PE ORAL LIQUID	4	
NINJACOF-XG ORAL LIQUID	4	
OBREDON ORAL SOLUTION	4	PA
POLY-TUSSIN AC ORAL LIQUID 4-10-10 MG/5 ML	4	
<i>promethazine-codeine oral syrup</i>	1	
<i>promethazine-dm oral syrup</i>	1	
<i>promethazine-phenyleph-codeine oral syrup</i>	1	
<i>promethazine-phenylephrine oral syrup</i>	1	
RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR	4	
SEMPREX-D ORAL CAPSULE	4	
TESSALON PERLES ORAL CAPSULE	4	

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Drug Name	Drug Tier	Requirements / Limits
TUSSICAPS ORAL CAPSULE,EXTENDED RELEASE 12 HR 10-8 MG	4	PA
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR	4	
TUZISTRA XR ORAL SUSPENSION,EXTENDED REL 12 HR	4	PA
<i>virtussin ac oral liquid</i>	2	
<i>virtussin dac oral syrup</i>	2	
Z-TUSS AC ORAL LIQUID	4	
<b>PULMONARY AGENTS</b>		
ACCOLATE ORAL TABLET	4	
<i>acetylcysteine solution</i>	2	
ADEMPAS ORAL TABLET	5	PA; MSP
ADRENALIN NASAL SOLUTION	4	
ADVAIR DISKUS INHALATION BLISTER WITH DEVICE	4	ST; QL
ADVAIR HFA INHALATION HFA AEROSOL INHALER	3	ST; CISP; H.S.A.; QL

Drug Name	Drug Tier	Requirements / Limits
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	QL
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 5 mg/ml</i>	1	CISP; H.S.A.
<i>albuterol sulfate inhalation solution for nebulization 2.5 mg/0.5 ml</i>	1	CISP
<i>albuterol sulfate oral syrup</i>	1	
<i>albuterol sulfate oral tablet</i>	2	
<i>albuterol sulfate oral tablet extended release 12 hr</i>	2	
ALVESCO INHALATION HFA AEROSOL INHALER	4	QL
<i>alyq oral tablet</i>	5	PA; MSP; QL
<i>ambrisentan oral tablet</i>	5	PA; MSP
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE	3	QL
ARCAPTA NEOHALER INHALATION CAPSULE, W/INHALATION DEVICE	4	QL

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Drug Name	Drug Tier	Requirements / Limits
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE	3	QL
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION , 200 MCG/ACTUATION	3	CISP; H.S.A.; QL
ASMANEX HFA INHALATION HFA AEROSOL INHALER 50 MCG/ACTUATION	3	H.S.A.; QL
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	3	CISP; H.S.A.; QL
ATROVENT HFA INHALATION HFA AEROSOL INHALER	4	QL
<i>azelastine-fluticasone nasal spray, non-aerosol</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
BEVESPI AEROSPHERE INHALATION HFA AEROSOL INHALER	3	QL
<i>bosentan oral tablet</i>	5	PA; MSP
BREO ELLIPTA INHALATION BLISTER WITH DEVICE	3	ST; CISP; H.S.A.; QL
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER	3	
BROVANA INHALATION SOLUTION FOR NEBULIZATION	4	QL
<i>budesonide inhalation suspension for nebulization</i>	2	CISP; H.S.A.; QL
CINRYZE INTRAVENOUS RECON SOLN	5	PA; MSP
COMBIVENT RESPIMAT INHALATION MIST	3	CISP; QL
<i>cromolyn inhalation solution for nebulization</i>	1	CISP
CUROSURF INTRATRACHEAL SUSPENSION	4	
DALIRESP ORAL TABLET 250 MCG	3	PA; QL

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Drug Name	Drug Tier	Requirements / Limits
DALIRESP ORAL TABLET 500 MCG	3	PA
DULERA INHALATION HFA AEROSOL INHALER	3	ST; CISP; QL
DYMISTA NASAL SPRAY, NON-AEROSOL	4	ST; QL
ELIXOPHYLLIN ORAL ELIXIR 80 MG/15 ML	4	
ESBRIET ORAL CAPSULE	5	PA; MSP; QL
ESBRIET ORAL TABLET 267 MG	5	PA; MSP; QL
ESBRIET ORAL TABLET 801 MG	5	PA; MSP
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP
FLOVENT DISKUS INHALATION BLISTER WITH DEVICE	3	H.S.A.; QL
FLOVENT HFA INHALATION HFA AEROSOL INHALER	3	H.S.A.; QL
<i>flunisolide nasal spray, non-aerosol 25 mcg (0.025 %)</i>	1	ST; QL
<i>fluticasone propionate nasal spray, suspension</i>	1	H.S.A.; QL
<i>fluticasone propion-salmeterol inhalation blister with device</i>	2	ST; CISP; H.S.A.; CSE-9; QL

Drug Name	Drug Tier	Requirements / Limits
HAEGARDA SUBCUTANEOUS RECON SOLN	5	PA; MSP
<i>icatibant subcutaneous syringe</i>	5	PA; SP
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE	3	CISP; H.S.A.; QL
<i>ipratropium bromide inhalation solution</i>	1	CISP; H.S.A.
<i>ipratropium-albuterol inhalation solution for nebulization</i>	1	CISP; H.S.A.; QL
KALBITOR SUBCUTANEOUS SOLUTION	5	PA; MSP
KALYDECO ORAL GRANULES IN PACKET 25 MG	5	PA; MSP
KALYDECO ORAL GRANULES IN PACKET 50 MG, 75 MG	5	PA; MSP; QL
KALYDECO ORAL TABLET	5	PA; MSP; QL
<i>levalbuterol hcl inhalation solution for nebulization</i>	2	H.S.A.
LONHALA MAGNAIR REFILL INHALATION SOLUTION FOR NEBULIZATION	4	QL

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Drug Name	Drug Tier	Requirements / Limits
LONHALA MAGNAIR STARTER INHALATION SOLUTION FOR NEBULIZATION	4	QL
<i>metaproterenol oral syrup</i>	1	CISP; H.S.A.
<i>mometasone nasal spray, non-aerosol</i>	2	ST; QL
<i>montelukast oral granules in packet</i>	2	
<i>montelukast oral tablet</i>	2	CISP; H.S.A.
<i>montelukast oral tablet, chewable</i>	2	CISP; H.S.A.
<i>nebusal inhalation solution for nebulization 3 %</i>	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	4	
NUCALA SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
NUCALA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
OFEV ORAL CAPSULE	5	PA; MSP; QL
OPSUMIT ORAL TABLET	5	PA; MSP
ORKAMBI ORAL GRANULES IN PACKET	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
ORKAMBI ORAL TABLET	5	PA; MSP; QL
PERFOROMIST INHALATION SOLUTION FOR NEBULIZATION	3	QL
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED	3	QL
<i>pulmosal inhalation solution for nebulization</i>	1	
PULMOZYME INHALATION SOLUTION	5	PA; MSP
QNASL NASAL HFA AEROSOL INHALER	3	QL
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED	3	QL
REVATIO ORAL SUSPENSION FOR RECONSTITUTION	5	PA; SP; QL
REVATIO ORAL TABLET	5	PA; SP; QL
RUCONEST INTRAVENOUS RECON SOLN	5	PA; MSP

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Drug Name	Drug Tier	Requirements / Limits
SEEBRI NEOHALER INHALATION CAPSULE, W/INHALATION DEVICE	4	QL
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE	3	CISP; H.S.A.; QL
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution</i>	5	PA; SP; QL
<i>sildenafil (pulm.hypertension) oral tablet</i>	5	PA; SP; QL
SINUVA SINUS IMPLANT	5	SP
<i>sodium chloride inhalation solution for nebulization</i>	1	
SPIRIVA RESPIMAT INHALATION MIST	3	QL
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE	3	QL
STIOLTO RESPIMAT INHALATION MIST	3	QL
SURFAXIN INTRATRACHEAL SUSPENSION	4	

Drug Name	Drug Tier	Requirements / Limits
SYMBICORT INHALATION HFA AEROSOL INHALER	3	ST; QL
SYMDEKO ORAL TABLETS, SEQUENTIAL	5	PA; MSP; QL
<i>tadalafil (pulm. hypertension) oral tablet</i>	5	PA; MSP; QL
TAKHZYRO SUBCUTANEOUS SOLUTION	5	PA; MSP
<i>terbutaline oral tablet</i>	2	H.S.A.
THEO-24 ORAL CAPSULE,EXTEN DED RELEASE 24HR	4	
<i>theophylline oral elixir</i>	1	CISP; H.S.A.
<i>theophylline oral solution</i>	1	CISP; H.S.A.
<i>theophylline oral tablet extended release 12 hr 300 mg, 450 mg</i>	2	CISP-1; H.S.A.
<i>theophylline oral tablet extended release 24 hr 400 mg</i>	2	CISP-1; H.S.A.
<i>theophylline oral tablet extended release 24 hr 600 mg</i>	1	CISP; H.S.A.
TRACLEER ORAL TABLET	5	PA; MSP
TRACLEER ORAL TABLET FOR SUSPENSION	5	PA; MSP

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Drug Name	Drug Tier	Requirements / Limits
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG	3	QL
<i>triamcinolone acetonide nasal aerosol, spray</i>	1	OTC; QL
TRIKAFTA ORAL TABLETS, SEQUENTIAL	5	PA; MSP
TYVASO INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP
UTIBRON NEOHALER INHALATION CAPSULE, W/INHALATION DEVICE	4	QL
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP
<i>wixela inhub inhalation blister with device</i>	2	ST; CISP-1; H.S.A.; CSE-9; QL

Drug Name	Drug Tier	Requirements / Limits
XHANCE NASAL AEROSOL BREATH ACTIVATED	4	ST; QL
XOLAIR SUBCUTANEOUS RECON SOLN	5	PA; MSP; QL
XOLAIR SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
XOPENEX CONCENTRATE INHALATION SOLUTION FOR NEBULIZATION	4	
XOPENEX INHALATION SOLUTION FOR NEBULIZATION	4	
YUPELRI INHALATION SOLUTION FOR NEBULIZATION	3	QL
<i>zafirlukast oral tablet</i>	2	H.S.A.
<i>zileuton oral tablet, er multiphase 12 hr</i>	1	PA
ZYFLO ORAL TABLET	4	PA
<b>UROLOGICALS</b>		
<b>ANTICHOLINERGICS &amp; ANTISPASMODICS</b>		
<i>darifenacin oral tablet extended release 24 hr</i>	2	

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Drug Name	Drug Tier	Requirements / Limits
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24HR 10 MG, 5 MG	4	ST
<i>flavoxate oral tablet</i>	1	
GELNIQUE TRANSDERMAL GEL IN PACKET	3	QL
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR	3	
<i>oxybutynin chloride oral syrup</i>	1	
<i>oxybutynin chloride oral tablet</i>	1	
<i>oxybutynin chloride oral tablet extended release 24hr</i>	2	
OXYTROL TRANSDERMAL PATCH SEMIWEEKLY	4	ST; QL
<i>solifenacin oral tablet</i>	2	
<i>tolterodine oral capsule, extended release 24hr</i>	2	
<i>tolterodine oral tablet</i>	2	
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HR	3	
<i>trospium oral capsule, extended release 24hr</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>trospium oral tablet</i>	2	
<b>BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY</b>		
<i>alfuzosin oral tablet extended release 24 hr</i>	2	
<i>dutasteride oral capsule</i>	2	ST
<i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr</i>	2	ST
<i>finasteride oral tablet 5 mg</i>	2	
FLOMAX ORAL CAPSULE	4	ST
JALYN ORAL CAPSULE, ER MULTIPHASE 24 HR	4	ST
PROSCAR ORAL TABLET	4	ST
<i>silodosin oral capsule</i>	2	
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	2	PA; QL
<i>tamsulosin oral capsule</i>	2	
<b>CHOLINERGIC STIMULANTS</b>		
<i>bethanechol chloride oral tablet</i>	2	
<b>MISCELLANEOUS UROLOGICALS</b>		
CYSTAGON ORAL CAPSULE	5	PA; SP
ELMIRON ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements / Limits
<i>hyophen oral tablet</i>	2	
K-PHOS NO 2 ORAL TABLET	4	
K-PHOS ORIGINAL ORAL TABLET,SOLUBLE	3	
<i>methen-sod phos-meth blue-hyos oral tablet</i>	2	
ORACIT ORAL SOLUTION	4	
<i>phosphasal oral tablet</i>	2	
<i>potassium citrate oral tablet extended release</i>	2	
RENACIDIN IRRIGATION SOLUTION 1980.6 MG-59.4 MG-980.4MG/30ML	3	
SHOHL'S MODIFIED ORAL SOLUTION	4	
URELLE ORAL TABLET	4	
<i>uretron d-s oral tablet 81.6-10.8-40.8 mg</i>	1	
URIBEL ORAL CAPSULE	4	
<i>urimar-t oral tablet</i>	2	
<i>urin ds oral tablet</i>	1	
<i>uro-458 oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
UROCID-K 10 ORAL TABLET EXTENDED RELEASE	4	
UROCID-K 15 ORAL TABLET EXTENDED RELEASE	4	
UROCID-K 5 ORAL TABLET EXTENDED RELEASE	4	
<i>urogesic-blue oral tablet</i>	2	
<i>uro-mp oral capsule</i>	2	
UROQID-ACID NO.2 ORAL TABLET	4	
<i>uryl oral tablet</i>	2	
<i>ustell oral capsule</i>	2	
<i>utira-c oral tablet</i>	2	
<i>vilamit mb oral capsule</i>	2	
<i>vilevev mb oral tablet</i>	2	
<b>URINARY ANESTHETICS</b>		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	2	
PYRIDIUM ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements / Limits
<b>VITAMINS, HEMATINICS &amp; ELECTROLYTES</b>		
<b>ELECTROLYTES</b>		
<i>calcium 500 + d oral tablet, chewable</i>	1	ACA; OTC
<i>calcium 600 + d(3) oral tablet 600 mg(1,500mg) -200 unit, 600 mg(1,500mg) -400 unit</i>	1	ACA; OTC
<i>calcium citrate-vitamin d3 oral tablet 315 mg-5 mcg (200 unit), 315 mg-6.25 mcg (250 unit)</i>	1	ACA; OTC
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	4	
<i>effer-k oral tablet, effervescent 25 meq</i>	2	
GALZIN ORAL CAPSULE	4	
<i>klor-con 10 oral tablet extended release</i>	1	
<i>klor-con 8 oral tablet extended release</i>	1	
<i>klor-con m10 oral tablet,er particles/crystals</i>	1	
<i>klor-con m15 oral tablet,er particles/crystals</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>klor-con m20 oral tablet,er particles/crystals</i>	1	
<i>klor-con oral packet</i>	2	
<i>klor-con/ef oral tablet, effervescent</i>	2	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	4	
<i>k-tab oral tablet extended release 8 meq</i>	1	
<i>lugols oral solution</i>	1	
<i>oyster shell + d3 oral tablet</i>	1	ACA; OTC
<i>oyster shell calcium-vit d3 oral tablet 500 mg(1,250mg) -400 unit</i>	1	ACA; OTC
POTABA ORAL CAPSULE	4	
<i>potassium chloride oral capsule, extended release</i>	1	
<i>potassium chloride oral packet</i>	2	
<i>potassium chloride oral tablet extended release</i>	1	
<i>potassium chloride oral tablet,er particles/crystals</i>	1	
<i>strong iodine oral solution</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<b>MISCELLANEOUS VITAMINS, HEMATINICS, &amp; ELECTROLYTES</b>		
DOJOLVI ORAL LIQUID	5	PA; MSP
<b>VITAMINS &amp; HEMATINICS</b>		
BAL-CARE DHA ESSENTIAL ORAL COMBO PACK, TABLET AND CAP, DR	4	
<i>bal-care dha oral combo pack, tablet and cap, dr</i>	1	H.S.A.
<i>cholecalciferol (vitamin d3) oral capsule 25 mcg (1,000 unit)</i>	1	ACA; OTC
<i>cholecalciferol (vitamin d3) oral tablet 25 mcg (1,000 unit)</i>	1	ACA; OTC
CITRANATAL (DUAL-IRON) ORAL TABLET	4	
CITRANATAL 90 DHA (ALGAL OIL) ORAL COMBO PACK	4	
CITRANATAL ASSURE ORAL COMBO PACK 35 MG IRON-1 MG - 50 MG-300 MG	4	
CITRANATAL B-CALM (FE GLUC) ORAL TABLETS, SEQUENTIAL	4	

Drug Name	Drug Tier	Requirements / Limits
CITRANATAL BLOOM ORAL TABLET	4	
CITRANATAL DHA (ALGAL OIL) ORAL COMBO PACK	4	
CITRANATAL HARMONY (IRON FUM) ORAL CAPSULE	4	
<i>c-nate dha oral capsule</i>	1	H.S.A.
<i>complete natal dha oral combo pack</i>	1	H.S.A.
CONCEPT DHA ORAL CAPSULE	4	
CONCEPT OB ORAL CAPSULE	4	
<i>cyanocobalamin (vitamin b-12) injection solution</i>	1	
DRISDOL ORAL CAPSULE	4	
DUET DHA BALANCED ORAL COMBO PACK 25 MG IRON-1 MG - 267 MG-233 MG	4	
DUET DHA WITH OMEGA-3 ORAL COMBO PACK 25 MG IRON-1 MG - 400 MG	4	
<i>elite-ob oral tablet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
ENBRACE HR ORAL CAPSULE,IR - DELAY REL,BIPHASE	4	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	
FOLET ONE ORAL CAPSULE	4	
<i>folic acid oral tablet 1 mg</i>	1	H.S.A.
<i>folivane-ob oral capsule</i>	1	
<i>hydroxocobalamin intramuscular solution</i>	1	
KOSHER PRENATAL PLUS IRON ORAL TABLET	4	
MARNATAL-F ORAL CAPSULE	4	
MECOBALAMIN (VITAMIN B12) INJECTION RECON SOLN	4	
<i>m-natal plus oral tablet</i>	1	H.S.A.
<i>mynatal advance oral tablet</i>	1	H.S.A.
<i>mynatal oral capsule</i>	1	H.S.A.
<i>mynatal oral tablet</i>	1	H.S.A.
<i>mynatal plus oral tablet</i>	1	H.S.A.
<i>mynatal-z oral tablet</i>	1	H.S.A.

Drug Name	Drug Tier	Requirements / Limits
<i>mynate 90 plus oral tablet extended release</i>	1	H.S.A.
NASCOBAL NASAL SPRAY,NON-AEROSOL	3	
NATACHEW (FE BIS-GLYCINATE) ORAL TABLET,CHEWABLE	4	
NEEVODHA (WITH ALGAL OIL) ORAL CAPSULE	4	
NESTABS ABC ORAL COMBO PACK	4	
NESTABS DHA ORAL COMBO PACK	4	
NESTABS ONE ORAL CAPSULE	4	
NESTABS ORAL TABLET	4	
<i>newgen oral tablet</i>	1	H.S.A.
OB COMPLETE ONE ORAL CAPSULE	4	
OB COMPLETE ORAL TABLET	4	
OB COMPLETE PETITE ORAL CAPSULE	4	
OB COMPLETE PREMIER ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements / Limits
OB COMPLETE WITH DHA ORAL CAPSULE	4	
<i>obstetrix dha oral combo pack,tablet and cap,dr</i>	1	H.S.A.
OBSTETRIX EC ORAL TABLET,DELAYED RELEASE (DR/EC)	4	
OBSTETRIX ONE ORAL CAPSULE	4	
OBTREX DHA ORAL COMBO PACK, TABLET AND CAP, DR	4	
<i>pnv 29-1 oral tablet</i>	1	H.S.A.
<i>pnv-dha + docusate oral capsule</i>	2	H.S.A.
<i>pnv-dha oral capsule</i>	2	
<i>pnv-omega oral capsule</i>	2	
<i>pnv-select oral tablet</i>	2	H.S.A.
<i>pr natal 400 ec oral combo pack,tablet and cap,dr</i>	1	H.S.A.
<i>pr natal 400 oral combo pack</i>	1	H.S.A.
<i>pr natal 430 ec oral combo pack,tablet and cap,dr</i>	1	H.S.A.
<i>pr natal 430 oral combo pack</i>	1	H.S.A.
<i>prenal chew oral tablet,chew,ir - dr,biphase</i>	2	H.S.A.

Drug Name	Drug Tier	Requirements / Limits
<i>prenal pearl oral capsule,ir - delay rel,biphase</i>	2	H.S.A.
<i>prenal true oral combo pack</i>	1	H.S.A.
<i>prenaissance oral capsule</i>	2	H.S.A.
<i>prenaissance plus oral capsule</i>	2	H.S.A.
PRENATA ORAL TABLET,CHEWABLE	4	
<i>prenatabs fa oral tablet</i>	1	H.S.A.
<i>prenatabs rx oral tablet</i>	1	H.S.A.
<i>prenatal plus (calcium carb) oral tablet</i>	1	H.S.A.
PRENATAL PLUS DHA ORAL COMBO PACK	4	
<i>prenatal plus oral tablet</i>	1	H.S.A.
<i>prenatal vitamin plus low iron oral tablet</i>	1	H.S.A.
<i>prenatal-u oral capsule</i>	1	
PRENATE AM ORAL TABLET	4	
PRENATE CHEWABLE ORAL TABLET,CHEWABLE	4	

Coverage of medications, including those not otherwise identified by qualifiers such as QL/PA/ST, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.\*\* Products listed may not be all inclusive and are subject to change.

Drug Name	Drug Tier	Requirements / Limits
PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE	4	
PRENATE ELITE (IRON ASP GLYC) ORAL TABLET	4	
PRENATE ENHANCE ORAL CAPSULE	4	
PRENATE ESSENTIAL(IRON-ASP-GL) ORAL CAPSULE	4	
PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE	4	
PRENATE PIXIE ORAL CAPSULE	4	
PRENATE RESTORE ORAL CAPSULE	4	
PRENATE STAR ORAL TABLET	4	
<i>preplus oral tablet</i>	1	H.S.A.
<i>pretab oral tablet</i>	1	H.S.A.
PRIMACARE ORAL CAPSULE	4	
PROVIDA OB ORAL CAPSULE	4	
PUREFE OB PLUS ORAL CAPSULE	4	
R-NATAL OB ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
SELECT-OB (FOLIC ACID) ORAL TABLET,CHEWABLE	4	
SELECT-OB + DHA ORAL COMBO PACK	4	
SELECT-OB ORAL TABLET,CHEWABLE	4	
<i>se-natal 19 chewable oral tablet,chewable</i>	1	H.S.A.
<i>se-natal-19 oral tablet</i>	2	H.S.A.
<i>taron-c dha oral capsule</i>	1	
<i>taron-prex prenatal-dha oral capsule</i>	2	
THRIVITE RX ORAL TABLET	4	
TRICARE ORAL TABLET	4	
TRIFERIC HEMODIALYSIS POWDER IN PACKET	4	
TRIFERIC HEMODIALYSIS SOLUTION	4	
<i>trinatal rx 1 oral tablet</i>	1	H.S.A.
<i>trinate oral tablet</i>	1	H.S.A.
TRISTART DHA ORAL CAPSULE	4	
<i>triveen-duo dha oral combo pack</i>	1	H.S.A.

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Drug Name	Drug Tier	Requirements / Limits
VINATE DHA RF ORAL CAPSULE	4	
<i>virt-c dha oral capsule</i>	1	
<i>virt-nate dha oral capsule</i>	2	H.S.A.
<i>virt-pn dha oral capsule</i>	2	
<i>virt-pn plus oral capsule</i>	2	
VITAFOL FE PLUS ORAL CAPSULE	4	
VITAFOL FE+ (WITH DOCUSATE) ORAL CAPSULE	4	
VITAFOL GUMMIES ORAL TABLET,CHEWABLE	4	
VITAFOL NANO ORAL TABLET	4	
VITAFOL ULTRA ORAL CAPSULE	4	
VITAFOL-OB ORAL TABLET	4	
VITAFOL-OB+DHA ORAL COMBO PACK	4	
VITAFOL-ONE ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
VITAMED MD ONE RX ORAL CAPSULE	4	
VITAMEDMD REDICHEW RX ORAL TABLET,CHEW,IR - DR,BIPHASE	4	
<i>vitamin d3 oral tablet 10 mcg (400 unit)</i>	1	ACA; OTC
<i>vitamin d3 oral tablet,chewable 25 mcg (1,000 unit)</i>	1	ACA; OTC
VITAPEARL ORAL CAPSULE,IR - DELAY REL,BIPHASE	4	
VITATRUE ORAL COMBO PACK	4	
<i>vp-ch-pnv oral capsule</i>	2	H.S.A.
VP-PNV-DHA ORAL CAPSULE	4	
<i>zatean-pn dha oral capsule</i>	2	
<i>zatean-pn plus oral capsule</i>	2	
<i>zingiber oral tablet</i>	1	

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