SilverScript®
P.O. Box 30006, Pittsburgh, PA 15222-0330

MHBP SM

SilverScript (EGWP) Employer PDP for MHBP Standard Option PSHBP (SilverScript (EGWP))

2026 Formulary

(List of Covered Drugs or "Drug List")

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

This formulary was updated on 04/24/2026. For more recent information or other questions, please contact Customer Care at 1-833-266-6958, 24 hours a day, 7 days a week. TTY users should call 711.

Formulary ID Number: 26021

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this Drug List (formulary) refers to “we,” “us,” or “our,” it means SilverScript® Insurance Company. When it refers to “plan” or “our plan,” it means SilverScript (EGWP).

This document includes a Drug List (formulary) for our plan, which is current as of April 24, 2026. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2027, and from time to time during the year.

Due to legislation in Arkansas, effective January 1, 2026, you may not be able to utilize the following services within the state of Arkansas, unless a court takes action: CVS Retail, CVS Caremark Mail Service, CVS Specialty, and OMNI Care long term pharmacies.

Y0001_GRP_3711389_2026_C_91AJ_1204_813

04/24/2026

What is the SilverScript (EGWP) formulary?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by SilverScript (EGWP) in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. SilverScript (EGWP) will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a SilverScript (EGWP) network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your *Evidence of Coverage*.

Please note: MHBP Postal Service Health Benefits Program provides additional coverage that may cover prescription drugs not included in your Medicare Part D benefit. For more information about your share of the cost or which prescription drugs may or may not be covered, please call Customer Care.

The additional coverage provided by MHBP Postal Service Health Benefits Program covers certain prescription drugs not covered under Medicare Part D. Payments made for these prescription drugs will not count toward your total out-of-pocket costs.

Please contact Customer Care for any questions regarding your additional benefits. Customer Care also has free language interpreter services available for non-English speakers.

Can the formulary change?

Most changes in drug coverage happen on January 1, but SilverScript (EGWP) may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: SilverScriptEmployerPDP.MemberDoc.com.

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately move it to a different cost-sharing tier or add new restrictions.

  We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

  If you are currently taking that brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the SilverScript (EGWP)'s formulary?”

Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug to replace a brand name drug currently on the formulary, or add a new biosimilar to replace an original biological product currently on the formulary, or add new restrictions or move a drug we are keeping on the formulary to a higher cost-sharing tier or both after we add a corresponding drug. We may remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product, or move it to a different cost-sharing tier, or both. Or we may make changes based on new clinical guidelines.

  If we remove drugs from our formulary, add quantity limits, prior authorization, and/or step therapy restrictions on a drug; or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.

  If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can find information in the section below titled “How do I request an exception to the SilverScript (EGWP)'s formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2026 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2026 coverage year except as described above. This means these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

This formulary is current as of April 24, 2026. To get updated information about the drugs covered by our plan, please contact us at the number on your member ID card. Our contact information also appears on the front and back cover pages.

If we have other types of mid-year non-maintenance formulary changes unrelated to the reasons stated above (e.g., remove drugs from our formulary; add prior authorization requirements, quantity limits, and/or step therapy restrictions on a drug; or move a drug to a higher cost-sharing tier), we will notify you by mail. We will also update our formulary with the new information. The updated formulary may be obtained by calling us.

How do I use the formulary?

There are two ways to find your drug within the formulary:

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index at the back of this document. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category "Cardiovascular." If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

What are generic drugs?

Our plan covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

What are original biological products and how are they related to biosimilars?

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For discussion of drug types, please see the *Evidence of Coverage*, Chapter 3 Section 3.1, "The 'Drug List' tells which Part D drugs are covered."

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization (PA):** Some drugs require you or your prescriber to get prior authorization. You must get an approval from us before you can get your prescription filled. If you don't get approval, we may not cover the drug.
- **Quantity Limits (QL):** For certain drugs, there is a quantity limit on the amount of the drug that we will cover. For example, our plan provides up to 30 tablets per 30-day prescription for *atorvastatin*. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy (ST):** In some cases, our plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, SilverScript (EGWP) will then cover Drug B.

There may be additional drugs that are not available at mail and not marked NM, including some hepatitis B medications, post-transplant medications, and oral medications used to treat HIV.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You may ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask SilverScript (EGWP) to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the SilverScript (EGWP)'s formulary?" for information about how to request an exception.

What if my drug is not on the formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Customer Care and ask if your drug is covered.

If you learn that our plan does not cover your drug, you have two options:

- You can ask Customer Care for a list of similar drugs that are covered by our plan. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by our plan.
- You can ask us to make an exception and cover your drug. See below for information about how to request an exception.

MHBP Postal Service Health Benefits Program offers additional coverage on some prescription drugs not normally covered under a Medicare Part D prescription drug plan benefit. Payments made for these drugs will not count toward your total out-of-pocket costs. Please contact Customer Care for any questions regarding your additional benefit.

How do I request an exception to the SilverScript (EGWP)'s formulary?

You can ask us to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make:

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, SilverScript (EGWP) limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.
- You can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the Specialty (High Cost) Tier. If approved, this would lower the amount you must pay for your drug.

Generally, we will only approve your request for an exception if the alternative drug is included on the plan's formulary, and the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a tiering or formulary exception, including an exception to a coverage restriction. **When you request an exception, your prescriber will need to explain the medical reasons why you need the exception.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan, you may be taking drugs that are not on our formulary. Or you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer than 30 days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved, after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

If you experience a change in your level of care, such as a move from a home to a long-term care setting, and need a drug that is not on our formulary (or if your ability to get your drugs is limited), we may cover a one-time temporary supply from a network pharmacy for up to 31 days, unless you have a prescription for fewer days. You should use the plan's exception process if you wish to have continued coverage of the drug after the temporary supply is finished.

For more information

For more detailed information about your SilverScript (EGWP) prescription drug coverage, please review your *Evidence of Coverage* and other plan materials.

If you have questions about our plan, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare Part D prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048. Or visit www.Medicare.gov.

Initial Coverage Stage Copayment/Coinsurance Levels

The plan has four Cost-Sharing Tiers

Every drug on the plan's drug list is in one of four cost-sharing tiers. In general, the higher the cost-sharing tier number, the higher your cost for the drug.

- **Cost-Sharing Tier 1: Generic**
- **Cost-Sharing Tier 2: Preferred Brand**
- **Cost-Sharing Tier 3: Non-Preferred Brand**
- **Cost-Sharing Tier 4: Specialty (High Cost)**

To find out which cost-sharing tier your drug is in, look it up in the plan's drug list that begins on page 1.

Your share of the cost when you get a *one-month* supply of a covered Part D prescription drug before your Individual maximum out-of-pocket is met:

	Network Retail Pharmacy (Up to a 30-day supply)	**Mail-Order Pharmacy** (Up to a 30-day supply)	**Long-Term Care (LTC) Pharmacy** (Up to a 31-day supply)
Tier 1: Generic	$5.00	$10.00	$5.00
Tier 2: Preferred Brand	$45.00	$55.00	$45.00
Tier 3: Non-Preferred Brand	$60.00	$80.00	$60.00
Tier 4: Specialty (High Cost)	15% of total cost Maximum $225.00	15% of total cost Maximum $425.00	15% of total cost Maximum $225.00

For long term supply cost information, please refer to your *Evidence of Coverage*.

You won't pay more than $35 for a one-month supply of each covered insulin product regardless of the cost-sharing tier.

Costs shown in the table above reflect the additional coverage that may be provided by MHBP Postal Service Health Benefits Program. Drugs that are part of your standard Medicare plan, but do not have additional coverage from MHBP Postal Service Health Benefits Program would be covered under the 2026 Medicare Part D Defined Standard Benefit. Please visit ***https://q1medicare.com/PartD-The-2026-Medicare-Part-D-Outlook.php*** for more information about the 2026 Medicare Part D Defined Standard Benefit drug costs.

SilverScript (EGWP)'s formulary

The formulary that begins on page 1 provides coverage information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the Index at the back of this book.

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

The information in the Requirements/Limits column tells you if SilverScript (EGWP) has any special requirements for coverage of your drug.

PA	Prior Authorization
QL	Drug has Quantity Limits
ST	Step Therapy required
NM	Not available at our mail-order pharmacies. Drugs with this abbreviation are not typically available at CVS Caremark® Mail Service Pharmacy. Maintenance medications (drugs you take on a regular basis for a chronic or long-term condition) without this abbreviation are typically available at CVS Caremark® Mail Service Pharmacy. Actual availability may vary.
NDS	Non-extended day supply. Not available for an extended (long-term) supply.
B/D	This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

Drug Name	Tier	Requirements/ Limits
ANALGESICS		
GOUT		
allopurinol TABS 100mg, 300mg	1	
allopurinol TABS 200mg	1	ST
allopurinol sodium (generic of ALOPRIM) SOLR 500mg	4	NDS
ALOPRIM SOLR 500mg	4	NDS
colchicine (generic of MITIGARE) CAPS .6mg QL (60 caps / 30 days)	1	QL
colchicine TABS .6mg QL (120 tabs / 30 days)	1	QL
colchicine w/ probenecid tab 0.5-500 mg	1	
febuxostat (generic of ULORIC) TABS 40mg, 80mg	1	PA
GLOPERBA SOLN .6mg/5ml QL (300 mL / 30 days)	3	QL
KRYSTEXXA SOLN 8mg/50ml, 8mg/ml	4	NDS NM PA
MITIGARE CAPS .6mg QL (60 caps / 30 days)	3	QL
probenecid TABS 500mg	1	
ULORIC TABS 40mg, 80mg	3	PA
MISCELLANEOUS		
acetaminophen SOLN 10mg/ml	1	
clonidine hcl (analgesia) (generic of DURACLON) SOLN 100mcg/ml	1	B/D
DURACLON SOLN 100mcg/ml	3	B/D
JOURNAVX TABS 50mg QL (29 tabs / 14 days)	3	QL PA
lidocaine hcl (local anesth.) SOLN 4%	1	B/D
lidocaine hcl (local anesth.) (generic of XYLOCAINE-MPF) SOLN .5%, 1%, 1.5%, 2%	1	B/D
lidocaine hcl (local anesth.) (generic of XYLOCAINE) SOLN .5%, 1%, 2%	1	B/D
XYLOCAINE SOLN .5%, 1%, 2%	3	B/D
XYLOCAINE-MPF SOLN .5%, 1%, 1.5%, 2%	3	B/D

Drug Name	Tier	Requirements/ Limits
NSAIDS		
ARTHROTEC 50 TAB	3	
ARTHROTEC 75 TAB	3	
CELEBREX CAPS 50mg, 100mg, 200mg QL (60 caps / 30 days)	3	QL
CELEBREX CAPS 400mg QL (30 caps / 30 days)	3	QL
celecoxib (generic of CELEBREX) CAPS 50mg, 100mg, 200mg QL (60 caps / 30 days)	1	QL
celecoxib (generic of CELEBREX) CAPS 400mg QL (30 caps / 30 days)	1	QL
COMBOGESIC INJ 300-1000	3	
diclofenac potassium (generic of ZIPSOR) CAPS 25mg QL (120 caps / 30 days)	4	NDS QL PA
diclofenac potassium TABS 25mg QL (120 tabs / 30 days)	4	NDS QL PA
diclofenac potassium TABS 50mg QL (120 tabs / 30 days)	1	QL
diclofenac sodium TB24 100mg; TBEC 25mg, 50mg, 75mg	1	
diclofenac w/ misoprostol tab delayed release 50-0.2 mg (generic of ARTHROTEC 50)	1	
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (generic of ARTHROTEC 75)	1	
diflunisal TABS 500mg	1	
DOLOBID TABS 250mg QL (180 tabs / 30 days)	4	NDS QL PA
DOLOBID TABS 375mg QL (120 tabs / 30 days)	4	NDS QL PA
etodolac CAPS 200mg, 300mg; TABS 500mg; TB24 400mg, 500mg, 600mg	1	
etodolac (generic of LODINE) TABS 400mg	1	
fenoprofen calcium CAPS 400mg QL (240 caps / 30 days)	1	QL PA

Drug Name	Drug Tier	Requirements/ Limits
FENOPRON CAPS 300mg QL (240 caps / 30 days)	4	NDS QL PA
flurbiprofen TABS 100mg	1	
ibu TABS 400mg, 600mg, 800mg	1	
ibuprofen SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg	1	
ibuprofen TABS 300mg QL (120 tabs / 30 days)	4	NDS QL
ibuprofen-famotidine tab 800-26.6 mg QL (90 tabs / 30 days)	1	QL PA
ketoprofen CAPS 25mg QL (120 caps / 30 days)	4	NDS QL PA
ketoprofen CAPS 50mg QL (180 caps / 30 days)	4	NDS QL PA
ketoprofen CP24 200mg QL (30 caps / 30 days)	1	QL PA
ketorolac tromethamine TABS 10mg QL (20 tabs / 30 days) PA applies if 65 years and older	1	QL PA
lofena TABS 25mg QL (120 tabs / 30 days)	4	NDS QL PA
LURBIRO TABS 100mg	4	NDS
meclofenamate sodium CAPS 50mg, 100mg	1	
mefenamic acid CAPS 250mg	1	
meloxicam CAPS 5mg, 10mg QL (30 caps / 30 days)	1	QL PA
meloxicam TABS 7.5mg, 15mg	1	
nabumetone TABS 500mg, 750mg	1	
NAPRELAN TB24 375mg QL (120 tabs / 30 days)	4	NDS QL PA
NAPRELAN TB24 500mg QL (90 tabs / 30 days)	4	NDS QL PA
naproxen SUSP 125mg/5ml QL (1800 mL / 30 days)	1	QL PA
naproxen TABS 250mg, 375mg, 500mg	1	
naproxen TBEC 375mg QL (120 tabs / 30 days)	1	QL
naproxen dr TBEC 500mg QL (90 tabs / 30 days)	1	QL
naproxen sodium TABS 275mg, 550mg	1	
naproxen sodium (generic of NAPRELAN) TB24 375mg QL (120 tabs / 30 days)	1	QL PA
naproxen sodium (generic of NAPRELAN) TB24 500mg QL (90 tabs / 30 days)	1	QL PA
naproxen sodium TB24 750mg QL (60 tabs / 30 days)	1	QL PA
naproxen-esomeprazole magnesium tab dr 375-20 mg QL (60 tabs / 30 days)	4	NDS QL PA
naproxen-esomeprazole magnesium tab dr 500-20 mg QL (60 tabs / 30 days)	4	NDS QL PA
ORUDIS CAPS 75mg QL (120 caps / 30 days)	4	NDS QL PA
oxaprozin TABS 600mg	1	
piroxicam CAPS 10mg, 20mg	1	
RELAFEN DS TABS 1000mg	4	NDS PA
SPRIX SOLN 15.75mg/spray QL (5 bottles / 30 days)	4	NDS QL NM PA
sulindac TABS 150mg, 200mg	1	
tolectin 600 TABS 600mg QL (90 tabs / 30 days)	4	NDS QL PA
tolmetin sodium CAPS 400mg	4	NDS
tolmetin sodium TABS 600mg QL (90 tabs / 30 days)	4	NDS QL PA
VYSCOXA SUSP 10mg/ml QL (946 mL / 21 days)	4	NDS QL PA
XIFYRM SOLN 30mg/ml	3	
ZIPSOR CAPS 25mg QL (120 caps / 30 days)	4	NDS QL PA
OPIOID ANALGESICS, LONG-ACTING		
BELBUCA FILM 75mcg, 150mcg, 300mcg, 450mcg, 600mcg QL (60 buccal films / 30 days)	3	QL PA
BELBUCA FILM 750mcg, 900mcg QL (60 buccal films / 30 days)	4	NDS QL PA

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Tier	Limits
buprenorphine (generic of BUTRANS) PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	1	QL PA
QL (4 patches / 28 days)		
BUTRANS PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	3	QL PA
QL (4 patches / 28 days)		
CONZIP CP24 100mg, 200mg, 300mg	3	QL PA
QL (30 caps / 30 days)		
fentanyl PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	1	QL PA
QL (10 patches / 30 days)		
hydrocodone bitartrate CP12 10mg, 15mg, 20mg, 30mg, 40mg, 50mg	1	QL PA
QL (60 caps / 30 days)		
hydrocodone bitartrate T24A 20mg, 30mg, 40mg, 60mg, 80mg	1	QL PA
QL (30 tabs / 30 days)		
hydrocodone bitartrate T24A 100mg, 120mg	4	NDS QL PA
QL (30 tabs / 30 days)		
hydromorphone hcl TB24 8mg, 12mg, 16mg, 32mg	1	QL PA
QL (30 tabs / 30 days)		
HYSINGLA ER T24A 20mg, 30mg, 40mg	3	QL PA
QL (30 tabs / 30 days)		
HYSINGLA ER T24A 60mg, 80mg, 100mg	4	NDS QL PA
QL (30 tabs / 30 days)		
levorphanol tartrate TABS 2mg, 3mg	4	NDS QL PA
QL (120 tabs / 30 days)		
methadone hcl SOLN 5mg/5ml, 10mg/5ml	1	QL PA
QL (450 mL / 30 days)		
methadone hcl TABS 5mg, 10mg	1	QL PA
QL (90 tabs / 30 days)		
METHADONE HCL INJ SOLN 10mg/ml	3	
methadone hydrochloride i (generic of METHADOSE) CONC 10mg/ml	1	QL PA
QL (90 mL / 30 days)		
morphine sulfate CP24 10mg, 20mg, 30mg, 50mg, 60mg, 80mg, 100mg	1	QL PA
QL (60 caps / 30 days)		
morphine sulfate (generic of MS CONTIN) TBCR 15mg, 30mg, 60mg	1	QL PA
QL (90 tabs / 30 days)		
morphine sulfate TBCR 100mg, 200mg	1	QL PA
QL (90 tabs / 30 days)		
morphine sulfate beads CP24 30mg, 45mg, 60mg, 75mg, 90mg, 120mg	1	QL PA
QL (30 caps / 30 days)		
MS CONTIN TBCR 15mg, 30mg	3	QL PA
QL (90 tabs / 30 days)		
MS CONTIN TBCR 60mg	4	NDS QL PA
QL (90 tabs / 30 days)		
NUCYNTA ER TB12 50mg	3	QL PA
QL (60 tabs / 30 days)		
NUCYNTA ER TB12 100mg, 150mg, 200mg, 250mg	4	NDS QL PA
QL (60 tabs / 30 days)		
OXYCONTIN T12A 10mg, 15mg, 20mg, 30mg	3	QL PA
QL (60 tabs / 30 days)		
OXYCONTIN T12A 40mg, 60mg, 80mg	4	NDS QL PA
QL (60 tabs / 30 days)		
oxymorphone hcl TB12 5mg, 7.5mg, 10mg, 15mg, 20mg	1	QL PA
QL (60 tabs / 30 days)		
oxymorphone hcl TB12 30mg, 40mg	4	NDS QL PA
QL (60 tabs / 30 days)		
tramadol hcl CP24 100mg, 200mg, 300mg	1	QL PA
QL (30 caps / 30 days)		
tramadol hcl TB24 100mg, 200mg, 300mg	1	QL PA
QL (30 tabs / 30 days)		

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Tier	Requirements/ Limits
XTAMPZA ER C12A 9mg, 13.5mg, 18mg, 27mg QL (60 caps / 30 days)	3	QL PA
XTAMPZA ER C12A 36mg QL (60 caps / 30 days)	4	NDS QL PA
OPIOID ANALGESICS, SHORT-ACTING		
acetaminophen w/ codeine soln 120-12 mg/5ml QL (2700 mL / 30 days)	1	QL
acetaminophen w/ codeine tab 300-15 mg QL (400 tabs / 30 days)	1	QL
acetaminophen w/ codeine tab 300-30 mg QL (360 tabs / 30 days)	1	QL
acetaminophen w/ codeine tab 300-60 mg QL (180 tabs / 30 days)	1	QL
acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg QL (300 caps / 30 days)	1	QL
butorphanol tartrate SOLN 1mg/ml, 2mg/ml	3	
butorphanol tartrate SOLN 10mg/ml QL (10 mL / 30 days)	1	QL
CODEINE SULFATE TABS 15mg, 60mg QL (180 tabs / 30 days)	3	QL
codeine sulfate TABS 30mg QL (180 tabs / 30 days)	1	QL
DILAUDID LIQD 1mg/ml QL (600 mL / 30 days)	3	QL
DILAUDID SOLN .2mg/ml, 1mg/ml, 2mg/ml	3	B/D
DILAUDID TABS 2mg, 4mg QL (180 tabs / 30 days)	3	QL
DILAUDID TABS 8mg QL (180 tabs / 30 days)	4	NDS QL
endocet tab 2.5-325mg QL (360 tabs / 30 days)	1	QL
endocet tab 5-325mg (generic of PERCOCET) QL (360 tabs / 30 days)	1	QL
endocet tab 7.5-325mg (generic of PERCOCET) QL (240 tabs / 30 days)	1	QL
endocet tab 10-325mg (generic of PERCOCET) QL (180 tabs / 30 days)	1	QL
hydrocodone-acetaminophen soln 7.5-325 mg/15ml QL (2700 mL / 30 days)	1	QL
hydrocodone-acetaminophen soln 10-300 mg/15ml QL (2700 mL / 30 days)	1	QL
hydrocodone-acetaminophen tab 2.5-325 mg QL (240 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 5-300 mg QL (240 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 5-325 mg QL (240 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 7.5-300 mg QL (180 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 7.5-325 mg QL (180 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 10-300 mg QL (180 tabs / 30 days)	1	QL
hydrocodone-acetaminophen tab 10-325 mg QL (180 tabs / 30 days)	1	QL
hydrocodone-ibuprofen tab 5-200 mg QL (150 tabs / 30 days)	1	QL
hydrocodone-ibuprofen tab 7.5-200 mg QL (150 tabs / 30 days)	1	QL
hydrocodone-ibuprofen tab 10-200 mg QL (150 tabs / 30 days)	1	QL
hydromorphone hcl (generic of DILAUDID) LIQD 1mg/ml QL (600 mL / 30 days)	1	QL
hydromorphone hcl SOLN 4mg/ml, 10mg/ml, 50mg/5ml	3	B/D
hydromorphone hcl (generic of DILAUDID) SOLN .2mg/ml, 1mg/ml, 2mg/ml	3	B/D

Drug Name	Drug Tier	Requirements/ Limits
hydromorphone hcl (generic of DILAUDID) TABS 2mg, 4mg, 8mg QL (180 tabs / 30 days)	1	QL
HYDROMORPHONE HYDROCHLORI SOLN .25mg/0.5ml, 1mg/ml, 2mg/ml, 4mg/ml	3	B/D
MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 8mg/ml, 10mg/ml, 50mg/ml	3	B/D
morphine sulfate SOLN 2mg/ml, 4mg/ml, 8mg/ml, 10mg/ml	3	B/D
morphine sulfate SOLN 10mg/5ml, 20mg/5ml QL (900 mL / 30 days)	1	QL
morphine sulfate SOLN 100mg/5ml QL (180 mL / 30 days)	1	QL
morphine sulfate TABS 15mg, 30mg QL (180 tabs / 30 days)	1	QL
MORPHINE SULFATE/SODIUM C SOLN 1mg/ml	3	B/D
nalbuphine hcl SOLN 10mg/ml, 20mg/ml	3	
NALOCET TAB 2.5-300 QL (360 tabs / 30 days)	4	NDS QL PA
NUCYNTA TABS 50mg QL (180 tabs / 30 days)	3	QL
NUCYNTA TABS 75mg, 100mg QL (180 tabs / 30 days)	4	NDS QL
OXY-ACETAMIN TAB 7.5-300 QL (240 tabs / 30 days)	4	NDS QL PA
OXYCOD-APAP TAB 2.5-300 QL (360 tabs / 30 days)	4	NDS QL PA
OXYCOD/ACETA SOL 10/300MG QL (900 mL / 30 days)	4	NDS QL PA
OXYCOD/APAP TAB 5-300MG QL (360 tabs / 30 days)	4	NDS QL PA
OXYCOD/APAP TAB 10-300MG QL (180 tabs / 30 days)	4	NDS QL PA
oxycodone hcl CAPS 5mg QL (180 caps / 30 days)	1	QL
oxycodone hcl CONC 100mg/5ml QL (180 mL / 30 days)	1	QL
oxycodone hcl SOLN 5mg/5ml QL (900 mL / 30 days)	1	QL
oxycodone hcl TABS 5mg, 10mg, 20mg QL (180 tabs / 30 days)	1	QL
oxycodone hcl (generic of ROXICODONE) TABS 15mg, 30mg QL (180 tabs / 30 days)	1	QL
OXYCODONE HYDROCHLORIDE TABA 5mg, 10mg, 15mg, 30mg QL (180 tabs / 30 days)	4	NDS QL
oxycodone w/ acetaminophen soln 5-325 mg/5ml QL (1800 mL / 30 days)	1	QL
oxycodone w/ acetaminophen tab 2.5-325 mg QL (360 tabs / 30 days)	1	QL
oxycodone w/ acetaminophen tab 5-325 mg (generic of PERCOCET) QL (360 tabs / 30 days)	1	QL
oxycodone w/ acetaminophen tab 7.5-325 mg (generic of PERCOCET) QL (240 tabs / 30 days)	1	QL
oxycodone w/ acetaminophen tab 10-325 mg (generic of PERCOCET) QL (180 tabs / 30 days)	1	QL
oxymorphone hcl TABS 5mg, 10mg QL (180 tabs / 30 days)	1	QL
PERCOCET TAB 5-325MG QL (360 tabs / 30 days)	4	NDS QL PA
PERCOCET TAB 7.5-325 QL (240 tabs / 30 days)	4	NDS QL PA
PERCOCET TAB 10-325MG QL (180 tabs / 30 days)	4	NDS QL PA
PROLATE SOL 10/300MG QL (900 mL / 30 days)	4	NDS QL PA

Drug Name	Drug Tier	Requirements/ Limits
PROLATE TAB 5-300MG QL (360 tabs / 30 days)	4	NDS QL PA
PROLATE TAB 7.5-300 QL (240 tabs / 30 days)	4	NDS QL PA
PROLATE TAB 10-300MG QL (180 tabs / 30 days)	4	NDS QL PA
ROXICODONE TABS 15mg QL (180 tabs / 30 days)	3	QL
ROXICODONE TABS 30mg QL (180 tabs / 30 days)	4	NDS QL
ROXYBOND TABA 5mg, 10mg, 15mg, 30mg QL (180 tabs / 30 days)	4	NDS QL
tapentadol hcl (generic of NUCYNTA) TABS 50mg QL (180 tabs / 30 days)	1	QL
tapentadol hcl (generic of NUCYNTA) TABS 75mg, 100mg QL (180 tabs / 30 days)	4	NDS QL
tramadol hcl SOLN 5mg/ml QL (2400 mL / 30 days)	1	QL PA
tramadol hcl TABS 25mg QL (120 tabs / 30 days)	1	QL
tramadol hcl TABS 50mg QL (240 tabs / 30 days)	1	QL
tramadol hcl TABS 75mg QL (150 tabs / 30 days)	1	QL PA
tramadol hcl TABS 100mg QL (120 tabs / 30 days)	1	QL PA
TRAMADOL HYDROCHLORIDE SOLN 5mg/ml QL (2400 mL / 30 days)	3	QL PA
tramadol-acetaminophen tab 37.5-325 mg QL (240 tabs / 30 days)	1	QL
trezix QL (300 caps / 30 days)	1	QL
ANTI-INFECTIVES		
ANTI-INFECTIVES - MISCELLANEOUS		
albendazole TABS 200mg QL (672 tabs / year)	1	QL PA
amikacin sulfate SOLN 1gm/4ml, 500mg/2ml	1	
ARIKAYCE SUSP 590mg/8.4ml	4	NDS NM PA
atovaquone (generic of MEPRON) SUSP 750mg/5ml QL (300 mL / 30 days)	1	QL PA
AZACTAM SOLR 1gm, 2gm	3	
aztreonam (generic of AZACTAM) SOLR 1gm, 2gm	1	
BACTRIM DS TAB 800-160	3	
BACTRIM TAB 400-80MG	3	
BETHKIS NEBU 300mg/4ml	4	NDS NM PA
BLUJEPA TABS 750mg	2	
CAYSTON SOLR 75mg	4	NDS NM PA
CLEOCIN CAPS 75mg, 150mg, 300mg	3	
CLEOCIN PEDIATRIC GRANULE SOLR 75mg/5ml	3	
CLEOCIN PHOSPHATE SOLN 9gm/60ml, 300mg/2ml, 600mg/4ml, 900mg/6ml	3	
clindamycin hcl (generic of CLEOCIN) CAPS 75mg, 150mg, 300mg	1	
clindamycin palmitate hydrochloride (generic of CLEOCIN PEDIATRIC GRANULE) SOLR 75mg/5ml	1	
clindamycin phosphate (generic of CLEOCIN PHOSPHATE) SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml	1	
clindamycin phosphate in d5w iv soln 300 mg/50ml	1	
clindamycin phosphate in d5w iv soln 600 mg/50ml	1	
clindamycin phosphate in d5w iv soln 900 mg/50ml	1	
CLINDMYC/NAC INJ 300/50ML	3	
CLINDMYC/NAC INJ 600/50ML	3	
CLINDMYC/NAC INJ 900/50ML	3	
colistimethate sodium (generic of COLY-MYCIN M) SOLR 150mg	1	
COLY-MYCIN M SOLR 150mg	3	

Drug Name	Drug Tier	Requirements/ Limits
dalbavancin hcl (generic of DALVANCE) SOLR 500mg	4	NDS
DALVANCE SOLR 500mg	4	NDS
dapsone TABS 25mg, 100mg	1	
DAPTOMY/NACL INJ 350/50ML	3	
DAPTOMY/NACL INJ 500/50ML	3	
daptomycin (generic of DAPTOMYCIN) SOLR 350mg	4	NDS
DAPTOMYCIN SOLR 350mg, 500mg	4	NDS
daptomycin SOLR 500mg	4	NDS
DARAPRIM TABS 25mg QL (90 tabs / 30 days)	4	NDS QL PA
EMBLAVEO INJ 2GM	4	NDS
EMVERM CHEW 100mg QL (12 tabs / year)	4	NDS QL
ertapenem sodium SOLR 1gm	1	
FIRVANQ SOLR 25mg/ml, 50mg/ml QL (1800 mL / 180 days)	3	QL
fosfomycin tromethamine PACK 3gm	1	
gentamicin in saline inj 0.8 mg/ml	1	
gentamicin in saline inj 1 mg/ml	1	
gentamicin in saline inj 1.2 mg/ml	1	
gentamicin in saline inj 1.6 mg/ml	1	
gentamicin in saline inj 2 mg/ml	1	
gentamicin sulfate SOLN 10mg/ml, 40mg/ml	1	
HUMATIN CAPS 250mg	4	NDS
imipenem-cilastatin intravenous for soln 250 mg	1	
imipenem-cilastatin intravenous for soln 500 mg (generic of PRIMAXIN IV)	1	
IMPAVIDO CAPS 50mg	4	NDS PA
ivermectin (generic of STROMECTOL) TABS 3mg QL (20 tabs / 90 days)	1	QL PA
ivermectin TABS 6mg QL (10 tabs / 90 days)	1	QL PA
KIMYRSA SOLR 1200mg	4	NDS
KITABIS PAK NEBU 300mg/5ml	4	NDS NM PA
LIKMEZ SUSP 500mg/5ml	3	
linezolid (generic of ZYVOX) SOLN 600mg/300ml	1	
linezolid (generic of ZYVOX) SUSR 100mg/5ml QL (1800 mL / 30 days)	4	NDS QL
linezolid TABS 600mg QL (60 tabs / 30 days)	1	QL
LINEZOLID INJ 2MG/ML	3	
MACROBID CAPS 100mg	3	
MACRODANTIN CAPS 25mg, 50mg, 100mg	3	
MEPRON SUSP 750mg/5ml QL (300 mL / 30 days)	4	NDS QL PA
MEROP/NACL INJ 1GM/50ML	3	
MEROP/NACL INJ 500/50ML	3	
meropenem SOLR 1gm, 500mg	1	
meropenem (generic of MEROPENEM) SOLR 2gm	1	
methenamine hippurate (generic of HIPREX) TABS 1gm	1	
metronidazole CAPS 375mg; TABS 125mg, 250mg, 500mg	1	
METRONIDAZOLE SOLN 500mg/100ml	3	
metronidazole (generic of METRONIDAZOLE) SOLN 500mg/100ml	1	
NEBUPENT SOLR 300mg	3	B/D
neomycin sulfate TABS 500mg	1	
nitazoxanide TABS 500mg QL (6 tabs / 30 days)	4	NDS QL
nitrofurantoin SUSP 25mg/5ml	4	NDS PA
NITROFURANTOIN SUSP 50mg/5ml	4	NDS PA

Drug Name	Drug Tier	Requirements/ Limits
nitrofurantoin macrocrystal (generic of MACRODANTIN) CAPS 25mg, 50mg, 100mg	2	
nitrofurantoin monohyd macro (generic of MACROBID) CAPS 100mg	2	
ORBACTIV SOLR 400mg	4	NDS
ORLYNVAH TAB 500-500	4	NDS NM
PENTAM 300 SOLR 300mg	3	
pentamidine isethionate inh (generic of NEBUPENT) SOLR 300mg	1	B/D
pentamidine isethionate inj (generic of PENTAM 300) SOLR 300mg	1	
polymyxin b sulfate SOLR 500000unit	1	
praziquantel TABS 600mg	1	
PRIMAXIN IV INJ 500MG	3	
pyrimethamine (generic of DARAPRIM) TABS 25mg QL (90 tabs / 30 days)	4	NDS QL PA
RECARBRIO INJ 1.25GM	4	NDS
SIVEXTRO SOLR 200mg; TABS 200mg	4	NDS
SOLOSEC PACK 2gm	3	
streptomycin sulfate SOLR 1gm	4	NDS
STROMECTOL TABS 3mg QL (20 tabs / 90 days)	3	QL PA
sulfadiazine TABS 500mg	4	NDS
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml	1	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim tab 400-80 mg (generic of BACTRIM)	1	
sulfamethoxazole-trimethoprim tab 800-160 mg (generic of BACTRIM DS)	1	
tinidazole TABS 250mg, 500mg	1	
TOBI NEBU 300mg/5ml	4	NDS NM PA
TOBI PODHALER CAPS 28mg	4	NDS NM PA
tobramycin (generic of BETHKIS) NEBU 300mg/4ml	4	NDS NM PA
tobramycin (generic of KITABIS PAK) NEBU 300mg/5ml	4	NDS NM PA
tobramycin sulfate SOLN 1.2gm/30ml, 10mg/ml, 80mg/2ml	1	
tobramycin sulfate SOLR 1.2gm	4	NDS PA
trimethoprim TABS 100mg	1	
TYZAVAN SOLN 500mg/100ml, 750mg/150ml, 1000mg/200ml, 1250mg/250ml, 1500mg/300ml, 1750mg/350ml, 2000mg/400ml	3	
VABOMERE INJ 2GM(1-1)	4	NDS
VANCOCIN CAPS 125mg QL (80 caps / 180 days)	4	NDS QL
VANCOCIN CAPS 250mg QL (160 caps / 180 days)	4	NDS QL
VANCOMYC/D5W INJ 1.5/300	3	
VANCOMYC/D5W INJ 1.25/250	3	
vancomycin hcl (generic of VANCOCIN) CAPS 125mg QL (80 caps / 180 days)	1	QL
vancomycin hcl (generic of VANCOCIN) CAPS 250mg QL (160 caps / 180 days)	1	QL
vancomycin hcl SOLN 750mg/150ml, 1000mg/200ml, 1250mg/250ml, 1500mg/300ml, 1750mg/350ml, 2000mg/400ml; SOLR 1gm, 1.5gm, 5gm, 10gm, 500mg	1	
vancomycin hcl (generic of VANCOMYCIN HYDROCHLORIDE) SOLR 1.25gm, 750mg	1	

Drug Name	Drug Tier	Requirements/ Limits
vancomycin hcl (generic of FIRVANQ) SOLR 25mg/ml QL (1800 mL / 180 days)	1	QL
vancomycin hcl SOLR 250mg/5ml QL (1800 mL / 180 days)	1	QL
VANCOMYCIN HYDROCHLORIDE SOLN 500mg/100ml; SOLR 1gm, 1.25gm, 1.5gm, 1.75gm, 2gm, 5gm, 10gm, 500mg, 750mg	3	
VANCOMYCIN INJ 1 GM	3	
VANCOMYCIN INJ 500MG	3	
VANCOMYCIN INJ 750MG	3	
VIBATIV SOLR 750mg	4	NDS
XACDURO INJ 1-1GM	4	NDS
XIFAXAN TABS 200mg QL (9 tabs / 30 days)	3	QL
ZEMDRI SOLN 500mg/10ml	4	NDS
ZYVOX SOLN 600mg/300ml	4	NDS
ZYVOX SUSR 100mg/5ml QL (1800 mL / 30 days)	4	NDS QL
ZYVOX TABS 600mg QL (60 tabs / 30 days)	4	NDS QL
ANTIFUNGALS		
AMBISOME SUSR 50mg	4	NDS B/D
amphotericin b SOLR 50mg	1	B/D
amphotericin b liposome (generic of AMBISOME) SUSR 50mg	4	NDS B/D
ANCOBON CAPS 250mg, 500mg	4	NDS PA
CANCIDAS SOLR 50mg, 70mg	4	NDS
CASPOFUNGIN ACETATE SOLR 50mg, 70mg	4	NDS
caspofungin acetate (generic of CASPOFUNGIN ACETATE) SOLR 50mg, 70mg	1	
CRESEMBA CAPS 74.5mg, 186mg; SOLR 372mg	4	NDS PA
DIFLUCAN SUSR 40mg/ml	3	
ERAXIS SOLR 50mg	3	
ERAXIS SOLR 100mg	4	NDS

Drug Name	Drug Tier	Requirements/ Limits
fluconazole SUSR 10mg/ml; TABS 50mg, 100mg, 200mg	1	
fluconazole (generic of DIFLUCAN) SUSR 40mg/ml; TABS 150mg	1	
fluconazole in nacl 0.9% inj 200 mg/100ml	1	
fluconazole in nacl 0.9% inj 400 mg/200ml	1	
flucytosine (generic of ANCOBON) CAPS 250mg, 500mg	4	NDS PA
fulvicin p/g 165 TABS 165mg	4	NDS
griseofulvin microsize SUSP 125mg/5ml; TABS 500mg	1	
griseofulvin ultramicrosize TABS 125mg, 250mg	1	
griseofulvin ultramicrosize TABS 165mg	4	NDS
itraconazole (generic of SPORANOX) CAPS 100mg QL (120 caps / 30 days)	1	QL
itraconazole SOLN 10mg/ml	4	NDS
ketoconazole TABS 200mg	1	PA
MICAFUNGIN SOLR 50mg, 100mg	4	NDS
micafungin sodium SOLR 50mg, 100mg	1	
MICAFUNGIN/NACL INJ 50MG/50ML	4	NDS
MICAFUNGIN/NACL INJ 100MG/100ML	4	NDS
MICAFUNGIN/NACL INJ 150MG/150ML	4	NDS
MYCAMINE SOLR 50mg, 100mg	4	NDS
NOXAFIL PACK 300mg QL (32 packets / 30 days)	4	NDS QL PA
NOXAFIL SOLN 300mg/16.7ml	4	NDS
NOXAFIL SUSP 40mg/ml QL (630 mL / 30 days)	4	NDS QL PA
nystatin TABS 500000unit	1	
posaconazole (generic of NOXAFIL) SOLN 300mg/16.7ml	4	NDS

Drug Name	Tier	Requirements/ Limits
posaconazole SUSP 40mg/ml QL (630 mL / 30 days)	4	NDS QL PA
posaconazole TBEC 100mg QL (93 tabs / 30 days)	4	NDS QL PA
REZZAYO SOLR 200mg	4	NDS
terbinafine hcl TABS 250mg QL (30 tabs / 30 days) PA applies after a 90 day supply in a calendar year	1	QL PA
TOLSURA CAPS 65mg QL (120 caps / 30 days)	4	NDS QL PA
VFEND SUSR 40mg/ml QL (600 mL / 28 days)	4	NDS QL PA
VFEND IV SOLR 200mg	3	PA
VIVJOA CPPK 150mg QL (18 caps / 84 days)	4	NDS QL NM PA
VORICONAZOLE SOLR 200mg	3	PA
voriconazole (generic of VFEND IV) SOLR 200mg	1	PA
voriconazole (generic of VFEND) SUSR 40mg/ml QL (600 mL / 28 days)	4	NDS QL PA
voriconazole TABS 50mg QL (480 tabs / 30 days)	1	QL
voriconazole TABS 200mg QL (120 tabs / 30 days)	1	QL
ANTIMALARIALS		
atovaquone-proguanil hcl tab 62.5-25 mg (generic of MALARONE)	1	
atovaquone-proguanil hcl tab 250-100 mg (generic of MALARONE)	1	
chloroquine phosphate TABS 250mg, 500mg	1	
COARTEM TAB 20-120MG	3	
KRINTAFEL TABS 150mg	3	
MALARONE TAB 62.5-25	3	
MALARONE TAB 250-100	3	
mefloquine hcl TABS 250mg	1	
PRIMAQUINE PHOSPHATE TABS 26.3mg	2	
primaquine phosphate (generic of PRIMAQUINE PHOSPHATE) TABS 26.3mg	1	
quinine sulfate CAPS 324mg	1	PA
ANTIRETROVIRAL AGENTS		
abacavir sulfate (generic of ZIAGEN) SOLN 20mg/ml	1	NM
abacavir sulfate TABS 300mg	1	NM
APTIVUS CAPS 250mg	4	NDS NM
atazanavir sulfate CAPS 150mg	1	NM
atazanavir sulfate (generic of REYATAZ) CAPS 200mg, 300mg	1	NM
darunavir (generic of PREZISTA) TABS 600mg QL (60 tabs / 30 days)	1	QL NM
darunavir (generic of PREZISTA) TABS 800mg QL (30 tabs / 30 days)	1	QL NM
EDURANT TABS 25mg	4	NDS NM
EDURANT PED TBSO 2.5mg	4	NDS NM
efavirenz TABS 600mg	1	NM
emtricitabine (generic of EMTRIVA) CAPS 200mg	1	NM
EMTRIVA CAPS 200mg; SOLN 10mg/ml	3	NM
EPIVIR SOLN 10mg/ml; TABS 150mg, 300mg	3	NM
etravirine (generic of INTELENCE) TABS 100mg, 200mg	4	NDS NM
fosamprenavir calcium TABS 700mg	4	NDS NM
INTELENCE TABS 25mg	3	NM
INTELENCE TABS 100mg, 200mg	4	NDS NM
ISENTRESS CHEW 25mg	3	NM
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	4	NDS NM
ISENTRESS HD TABS 600mg	4	NDS NM
lamivudine (generic of EPIVIR) SOLN 10mg/ml; TABS 150mg, 300mg	1	NM
maraviroc (generic of SELZENTRY) TABS 150mg, 300mg	4	NDS NM
nevirapine SUSP 50mg/5ml; TABS 200mg; TB24 400mg	1	NM

Drug Name	Drug Tier	Requirements/ Limits
NORVIR PACK 100mg; TABS 100mg	3	NM
PIFELTRO TABS 100mg	4	NDS NM
PREZISTA SUSP 100mg/ml QL (400 mL / 30 days)	4	NDS QL NM
PREZISTA TABS 75mg QL (480 tabs / 30 days)	3	QL NM
PREZISTA TABS 150mg QL (240 tabs / 30 days)	4	NDS QL NM
PREZISTA TABS 600mg QL (60 tabs / 30 days)	4	NDS QL NM
PREZISTA TABS 800mg QL (30 tabs / 30 days)	4	NDS QL NM
RETROVIR CAPS 100mg; SYRP 50mg/5ml	3	NM
REYATAZ CAPS 200mg, 300mg; PACK 50mg	4	NDS NM
rilpivirine hcl (generic of EDURANT) TABS 25mg	4	NDS NM
ritonavir (generic of NORVIR) TABS 100mg	1	NM
RUKOBIA TB12 600mg	4	NDS NM
SELZENTRY SOLN 20mg/ml; TABS 150mg, 300mg	4	NDS NM
SUNLENCA TABS 300mg; TBPK 300mg	4	NDS NM
tenofovir disoproxil fumarate (generic of VIREAD) TABS 300mg	1	NM
TIVICAY TABS 50mg	4	NDS NM
TIVICAY PD TBSO 5mg	4	NDS NM
TROGARZO SOLN 200mg/1.33ml	4	NDS NM
TYBOST TABS 150mg	2	NM
VIRACEPT TABS 250mg, 625mg	4	NDS NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg, 300mg	4	NDS NM
ZIAGEN SOLN 20mg/ml	3	NM
zidovudine (generic of RETROVIR) CAPS 100mg; SYRP 50mg/5ml	1	NM
zidovudine TABS 300mg	1	NM

Drug Name	Drug Tier	Requirements/ Limits
ANTIRETROVIRAL COMBINATION AGENTS		
abacavir sulfate-lamivudine tab 600-300 mg	1	NM
BIKTARVY TAB 30-120-15 MG	4	NDS NM
BIKTARVY TAB 50-200-25 MG	4	NDS NM
CIMDUO TAB 300-300	4	NDS NM
COMPLERA TAB	4	NDS NM
DELSTRIGO TAB	4	NDS NM
DESCOVY TAB 120-15MG	4	NDS NM
DESCOVY TAB 200/25MG	4	NDS NM
DOVATO TAB 50-300MG	4	NDS NM
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	1	NM
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	4	NDS NM
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (generic of SYMFI)	4	NDS NM
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg (generic of COMPLERA)	4	NDS NM
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg (generic of TRUVADA)	1	NM
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg (generic of TRUVADA)	4	NDS NM
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg (generic of TRUVADA)	1	NM
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (generic of TRUVADA)	1	NM
EVOTAZ TAB 300-150	4	NDS NM
GENVOYA TAB	4	NDS NM
JULUCA TAB 50-25MG	4	NDS NM
KALETRA SOL	3	NM
KALETRA TAB 100-25MG	3	NM
KALETRA TAB 200-50MG	4	NDS NM

Drug Name	Tier	Requirements/ Limits
lamivudine-zidovudine tab 150-300 mg	1	NM
lopinavir-ritonavir tab 100-25 mg (generic of KALETRA)	1	NM
lopinavir-ritonavir tab 200-50 mg (generic of KALETRA)	1	NM
ODEFSEY TAB	4	NDS NM
PREZCOBIX TAB 675/150	4	NDS NM
PREZCOBIX TAB 800-150	4	NDS NM
STRIBILD TAB	4	NDS NM
SYMFI TAB	4	NDS NM
SYMTUZA TAB	4	NDS NM
TRIUMEQ PD TAB	3	NM
TRIUMEQ TAB	4	NDS NM
TRUVADA TAB 100-150	4	NDS NM
TRUVADA TAB 133-200	4	NDS NM
TRUVADA TAB 167-250	4	NDS NM
TRUVADA TAB 200-300	4	NDS NM
ANTITUBERCULAR AGENTS		
cycloserine CAPS 250mg	4	NDS
ethambutol hcl TABS 100mg, 400mg	1	
isoniazid SYRP 50mg/5ml; TABS 100mg, 300mg	1	
PRETOMANID TABS 200mg	3	
PRIFTIN TABS 150mg	3	
pyrazinamide TABS 500mg	1	
rifabutin CAPS 150mg	1	
rifampin CAPS 150mg, 300mg	1	
rifampin (generic of RIFADIN) SOLR 600mg	1	
SIRTURO TABS 20mg, 100mg	4	NDS NM PA
ANTIVIRALS		
acyclovir CAPS 200mg; SUSP 200mg/5ml; TABS 400mg, 800mg	1	
acyclovir sodium SOLN 50mg/ml	1	B/D
adefovir dipivoxil TABS 10mg	1	NM
BARACLUDE SOLN .05mg/ml	4	NDS NM ST
BARACLUDE TABS .5mg, 1mg	4	NDS NM
cidofovir SOLN 75mg/ml	1	
entecavir (generic of BARACLUDE) TABS .5mg, 1mg	1	NM
EPCLUSA PAK 150-37.5	4	NDS NM PA
EPCLUSA PAK 200-50MG	4	NDS NM PA
EPCLUSA TAB 200-50MG	4	NDS NM PA
EPCLUSA TAB 400-100	4	NDS NM PA
famciclovir TABS 125mg, 250mg, 500mg	1	
foscarnet sodium (generic of FOSCAVIR) SOLN 6000mg/250ml	4	NDS B/D
GANCICLOVIR SOLN 500mg/10ml	3	B/D
ganciclovir sodium SOLR 500mg	1	B/D
HARVONI PAK 33.75-150MG	4	NDS NM PA
HARVONI PAK 45-200MG	4	NDS NM PA
HARVONI TAB 45-200MG	4	NDS NM PA
HARVONI TAB 90-400MG	4	NDS NM PA
lamivudine (hbv) TABS 100mg	1	NM
LIVTENCITY TABS 200mg QL (336 tabs / 28 days)	4	NDS QL NM PA
MAVYRET PAK 50-20MG	4	NDS NM PA
MAVYRET TAB 100-40MG	4	NDS NM PA
oseltamivir phosphate CAPS 30mg QL (168 caps / year)	1	QL
oseltamivir phosphate (generic of TAMIFLU) CAPS 45mg, 75mg QL (84 caps / year)	1	QL
oseltamivir phosphate (generic of TAMIFLU) SUSR 6mg/ml QL (1080 mL / year)	1	QL
PAXLOVID PAK QL (22 tabs / 90 days)	1	QL
PAXLOVID TAB 150-100 QL (40 tabs / 90 days)	1	QL
PAXLOVID TAB 300-100 QL (60 tabs / 90 days)	1	QL
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	4	NDS NM PA

Drug Name	Tier	Requirements/ Limits
PREVYMIS PACK 20mg, 120mg QL (120 packets / 30 days)	4	NDS QL PA
PREVYMIS SOLN 240mg/12ml, 480mg/24ml	4	NDS
PREVYMIS TABS 240mg, 480mg QL (28 tabs / 28 days)	4	NDS QL PA
RAPIVAB SOLN 200mg/20ml	4	NDS
RELENZA DISKHALER AEPB 5mg/blister QL (6 inhalers / year)	2	QL
ribavirin (hepatitis c) CAPS 200mg; TABS 200mg	1	NM
rimantadine hydrochloride TABS 100mg	1	
TAMIFLU CAPS 30mg QL (168 caps / year)	3	QL
TAMIFLU CAPS 75mg QL (84 caps / year)	3	QL
TAMIFLU SUSR 6mg/ml QL (1080 mL / year)	3	QL
valacyclovir hcl (generic of VALTREX) TABS 1gm, 500mg	1	
VALCYTE SOLR 50mg/ml; TABS 450mg	4	NDS
valganciclovir hcl (generic of VALCYTE) SOLR 50mg/ml	4	NDS
valganciclovir hcl TABS 450mg	1	
VALTREX TABS 1gm, 500mg	3	
VEMLIDY TABS 25mg	4	NDS NM PA
VOSEVI TAB	4	NDS NM PA
XOFLUZA TBPK 40mg, 80mg QL (1 tab / 180 days)	3	QL
CEPHALOSPORINS		
AVYCAZ INJ 2-0.5GM	4	NDS
cefaclor CAPS 250mg, 500mg; SUSR 250mg/5ml	1	
CEFACLOR ER TB12 500mg	3	
cefadroxil CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml; TABS 1gm	1	
CEFAZOLIN SOLR 2gm, 3gm	3	
CEFAZOLIN INJ 1GM/50ML	3	
cefazolin sodium SOLR 1gm, 2gm, 3gm, 10gm, 500mg	1	
CEFAZOLIN SOLN 2GM/100ML-4%	3	
CEFAZOLIN/DEX SOL 1GM/50ML-4%	3	
CEFAZOLIN/DEX SOL 2GM/50ML-3%	3	
CEFAZOLIN/DEX SOL 3GM/50ML-2%	3	
CEFAZOLIN/DEX SOL 3GM/150ML-4%	3	
cefdinir CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	1	
CEFEPIME SOLN 1gm/50ml, 2gm/100ml	3	
cefepime hcl SOLR 1gm, 2gm	1	
CEFEPIME/DEX INJ 1GM	3	
CEFEPIME/DEX INJ 2GM	3	
cefixime CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml; TABS 400mg	1	
cefotetan disodium (generic of CEFOTAN) SOLR 1gm, 2gm	1	
CEFOXITIN INJ 1GM	3	
CEFOXITIN INJ 2GM	3	
cefoxitin sodium SOLR 1gm, 2gm, 10gm	1	
cefpodoxime proxetil SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	1	
cefprozil SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
ceftaroline fosamil (generic of TEFLARO) SOLR 400mg, 600mg	4	NDS
ceftazidime SOLR 1gm, 2gm, 6gm	1	
ceftriaxone sodium SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
cefuroxime axetil TABS 250mg, 500mg	1	

Drug Name	Drug Tier	Requirements/ Limits
cefuroxime sodium SOLR 1.5gm, 750mg	1	
cephalexin CAPS 250mg, 500mg, 750mg; SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
FETROJA SOLR 1gm	4	NDS
tazicef SOLR 1gm, 2gm, 6gm	1	
TEFLARO SOLR 400mg, 600mg	4	NDS
ZERBAXA INJ 1.5GM	4	NDS
ZEVTERA SOLR 667mg	4	NDS
ERYTHROMYCINS/MACROLIDES		
azithromycin (generic of ZITHROMAX) SOLR 500mg; SUSR 200mg/5ml; TABS 250mg, 500mg	1	
azithromycin SUSR 100mg/5ml; TABS 600mg	1	
clarithromycin SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
clarithromycin (generic of BIAXIN XL) TB24 500mg	1	
DIFICID SUSR 40mg/ml; TABS 200mg	4	NDS
e.e.s. 400 TABS 400mg	1	
ERYTHROCIN LACTOBIONATE SOLR 500mg	3	
erythromycin base CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	1	
erythromycin ethylsuccinate (generic of E.E.S. GRANULES) SUSR 200mg/5ml	1	
erythromycin ethylsuccinate (generic of ERYPED 400) SUSR 400mg/5ml	4	NDS
erythromycin ethylsuccinate TABS 400mg	1	
erythromycin lactobionate (generic of ERYTHROCIN LACTOBIONATE) SOLR 500mg	1	
fidaxomicin (generic of DIFICID) TABS 200mg	4	NDS
ZITHROMAX SOLR 500mg; SUSR 200mg/5ml; TABS 250mg, 500mg	3	
ZITHROMAX TRI-PAK TABS 500mg	3	
ZITHROMAX Z-PAK TABS 250mg	3	
FLUOROQUINOLONES		
BAXDELA SOLR 300mg; TABS 450mg	4	NDS
CIPRO SUSR 5gm/100ml, 500mg/5ml; TABS 250mg, 500mg	3	
ciprofloxacin 200 mg/100ml in d5w	1	
ciprofloxacin 400 mg/200ml in d5w	1	
ciprofloxacin hcl (generic of CIPRO) TABS 250mg, 500mg	1	
ciprofloxacin hcl TABS 750mg	1	
levofloxacin SOLN 25mg/ml; TABS 250mg, 500mg, 750mg	1	
levofloxacin in d5w iv soln 250 mg/50ml	1	
levofloxacin in d5w iv soln 500 mg/100ml	1	
levofloxacin in d5w iv soln 750 mg/150ml	1	
moxifloxacin hcl TABS 400mg	1	
moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj	1	
MOXIFLOXACIN HYDROCHLORID SOLN 400mg/250ml	3	
PENICILLINS		
amoxicillin CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	1	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	1	

Drug Name	Drug Tier	Requirements/ Limits
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	1	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	1	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (generic of AUGMENTIN ES-600)	1	
amoxicillin & k clavulanate tab 250-125 mg	1	
amoxicillin & k clavulanate tab 500-125 mg	1	
amoxicillin & k clavulanate tab 875-125 mg	1	
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	1	
ampicillin CAPS 500mg	1	
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm (generic of UNASYN)	1	
ampicillin & sulbactam sodium for inj 3 (2-1) gm (generic of UNASYN)	1	
ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm	1	
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm	1	
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm (generic of UNASYN BULK PACK)	1	
ampicillin sodium SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
AUGMENTIN SUS 125/5ML	3	
AUGMENTIN SUS ES-600	3	
AUGMENTIN TAB 500MG	3	
BICILLIN C-R INJ 900/300	3	
BICILLIN C-R INJ 1200000	3	
BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml	3	
dicloxacillin sodium CAPS 250mg, 500mg	1	
NAFCILLIN INJ 2GM/100	4	NDS
nafcillin sodium SOLR 1gm, 2gm	1	
nafcillin sodium SOLR 10gm	4	NDS
OXACILLIN INJ 2GM	3	
oxacillin sodium SOLR 1gm, 2gm, 10gm	1	
PEN GK/DEXTR INJ 40000/ML	3	
PEN GK/DEXTR INJ 60000/ML	3	
penicillin g potassium SOLR 5000000unit, 20000000unit	1	
penicillin g sodium SOLR 5000000unit	1	
penicillin v potassium SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
pfizerpen SOLR 5000000unit, 20000000unit	1	
PIP/TAZ/NACL INJ 2-0.25GM	3	
PIP/TAZ/NACL INJ 3-0.375G	3	
PIP/TAZ/NACL INJ 4-0.5GM	3	
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)	1	
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)	1	
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)	1	
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)	1	
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)	1	
UNASYN INJ 1.5GM	3	
UNASYN INJ 3GM	3	
UNASYN INJ 15GM	3	
ZOSYN SOL 2-0.25GM	3	
ZOSYN SOL 3-0.375G	3	
ZOSYN SOL 4-0.50GM	3	
TETRACYCLINES		
demeclocycline hcl TABS 150mg, 300mg	1	
DORYX MPC TBEC 60mg	4	NDS PA
doxy 100 SOLR 100mg	1	

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Tier	Requirements/ Limits
doxycycline (monohydrate) CAPS 50mg, 75mg, 100mg, 150mg; SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg, 150mg	1	
doxycycline hyclate CAPS 50mg, 100mg; SOLR 100mg; TABS 20mg, 50mg, 75mg, 100mg, 150mg	1	
doxycycline hyclate TBEC 50mg, 75mg, 100mg, 150mg, 200mg	1	PA
minocycline hcl CAPS 50mg, 75mg, 100mg; TABS 50mg, 75mg, 100mg; TB24 45mg, 55mg, 65mg, 80mg, 90mg, 105mg, 115mg, 135mg	1	
NUZYRA SOLR 100mg	4	NDS NM
NUZYRA TABS 150mg QL (30 tabs / 14 days)	4	NDS QL NM
SEYSARA TABS 60mg, 100mg, 150mg	4	NDS PA
targadox TABS 50mg	1	
tetracycline hcl CAPS 250mg, 500mg	1	
TETRACYCLINE HYDROCHLORID TABS 250mg, 500mg	4	NDS PA
TIGECYCLINE SOLR 50mg	4	NDS
tigecycline (generic of TYGACIL) SOLR 50mg	1	
TYGACIL SOLR 50mg	4	NDS
XERAVA SOLR 50mg, 100mg	3	
ANTINEOPLASTIC AGENTS		
ALKYLATING AGENTS		
bendamustine hcl (generic of TREANDA) SOLR 25mg, 100mg	4	NDS B/D NM
BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml	4	NDS B/D NM
BENDEKA SOLN 100mg/4ml	4	NDS B/D NM
carboplatin SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	1	B/D
cisplatin SOLN 50mg/50ml, 100mg/100ml	1	B/D
cisplatin (generic of CISPLATIN) SOLN 200mg/200ml	1	B/D
cyclophosphamide CAPS 25mg, 50mg; SOLR 1gm, 500mg	1	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	4	NDS B/D NM
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml	4	NDS B/D
cyclophosphamide SOLR 2gm	4	NDS B/D
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	3	B/D
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	4	NDS B/D
FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	4	NDS B/D NM
GLEOSTINE CAPS 10mg, 40mg	3	NM
GLEOSTINE CAPS 100mg	4	NDS NM
GRAFAPEX SOLR 1gm, 5gm	4	NDS B/D NM
IFEX SOLR 3gm	3	B/D
ifosfamide SOLN 1gm/20ml, 3gm/60ml	1	B/D
IFOSFAMIDE SOLR 3gm	3	B/D
KYXATA SOLN 80mg/8ml, 500mg/50ml	4	NDS B/D NM
LEUKERAN TABS 2mg	4	NDS PA
lomustine (generic of GLEOSTINE) CAPS 10mg, 40mg	1	NM
lomustine (generic of GLEOSTINE) CAPS 100mg	4	NDS NM
oxaliplatin SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml	1	B/D
oxaliplatin SOLR 50mg, 100mg	4	NDS B/D
TREANDA SOLR 25mg, 100mg	4	NDS B/D NM
VIVIMUSTA SOLN 100mg/4ml	4	NDS B/D NM
ZEPZELCA SOLR 4mg	4	NDS NM PA

Drug Name	Drug Tier	Requirements/ Limits
ANTIMETABOLITES		
ALIMTA SOLR 100mg, 500mg	4	NDS B/D
AVGEMSI SOLN 1gm/26.3ml, 2gm/52.6ml	4	NDS B/D NM
AXTLE SOLR 100mg, 500mg	4	NDS B/D NM
azacitidine (generic of VIDAZA) SUSR 100mg	4	NDS B/D NM
cytarabine SOLN 20mg/ml, 100mg/ml	1	B/D
decitabine SOLR 50mg	4	NDS B/D NM
fludarabine phosphate SOLN 50mg/2ml; SOLR 50mg	1	B/D
fluorouracil SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	1	B/D
FOLOTYN SOLN 20mg/ml, 40mg/2ml	4	NDS NM PA
gemcitabine hcl (generic of GEMCITABINE HYDROCHLORIDE) SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml	1	B/D
gemcitabine hcl SOLR 1gm, 2gm, 200mg	1	B/D
GEMCITABINE HYDROCHLORIDE SOLN 1gm/10ml, 1gm/26.3ml, 2gm/20ml, 2gm/52.6ml, 200mg/2ml, 200mg/5.26ml	3	B/D
INQOVI TAB 35-100MG QL (5 tabs / 28 days)	4	NDS QL NM PA
LONSURF TAB 15-6.14 QL (100 tabs / 28 days)	4	NDS QL NM PA
LONSURF TAB 20-8.19 QL (80 tabs / 28 days)	4	NDS QL NM PA
mercaptopurine (generic of PURIXAN) SUSP 2000mg/100ml	4	NDS NM
mercaptopurine TABS 50mg	1	
methotrexate sodium SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	1	B/D
ONUREG TABS 200mg, 300mg QL (14 tabs / 28 days)	4	NDS QL NM PA
PEMETREXED SOLN 1gm/40ml, 100mg/4ml, 500mg/20ml	4	NDS B/D
pemetrexed disodium SOLR 100mg, 500mg, 750mg, 1000mg	4	NDS B/D
PEMRYDI RTU SOLN 100mg/10ml, 500mg/50ml	4	NDS B/D
pralatrexate (generic of FOLOTYN) SOLN 20mg/ml, 40mg/2ml	4	NDS NM PA
PURIXAN SUSP 2000mg/100ml	4	NDS NM
TABLOID TABS 40mg	4	NDS PA
VIDAZA SUSR 100mg	4	NDS B/D NM
HORMONAL ANTINEOPLASTIC AGENTS		
abiraterone acetate (generic of ZYTIGA) TABS 250mg QL (120 tabs / 30 days)	4	NDS QL NM PA
abiraterone acetate (generic of ZYTIGA) TABS 500mg QL (60 tabs / 30 days)	4	NDS QL NM PA
abirtega (generic of ZYTIGA) TABS 250mg QL (120 tabs / 30 days)	1	QL NM PA
AKEEGA TAB 50/500MG QL (60 tabs / 30 days)	4	NDS QL NM PA
AKEEGA TAB 100/500 QL (60 tabs / 30 days)	4	NDS QL NM PA
anastrozole (generic of ARIMIDEX) TABS 1mg	1	
ARIMIDEX TABS 1mg	4	NDS
AROMASIN TABS 25mg	4	NDS
bicalutamide (generic of CASODEX) TABS 50mg	1	
CAMCEVI PRSY 42mg	3	NM PA
CASODEX TABS 50mg	4	NDS
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	2	NM PA
ERLEADA TABS 60mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ERLEADA TABS 240mg QL (30 tabs / 30 days)	4	NDS QL NM PA
EULEXIN CAPS 125mg	4	NDS
exemestane (generic of AROMASIN) TABS 25mg	1	
FARESTON TABS 60mg	4	NDS PA

Drug Name	Drug Tier	Requirements/ Limits
FASLODEX SOSY 250mg/5ml	4	NDS B/D
FEMARA TABS 2.5mg	3	
FIRMAGON SOLR 80mg	3	NM PA
FIRMAGON SOLR 120mg/vial	4	NDS NM PA
fulvestrant (generic of FASLODEX) SOSY 250mg/5ml	4	NDS B/D
INLURIYO TABS 200mg QL (56 tabs / 28 days)	4	NDS QL NM PA
letrozole (generic of FEMARA) TABS 2.5mg	1	
leuprolide acetate KIT 1mg/0.2ml	1	NM PA
leuprolide acetate (3 month) INJ 22.5mg	1	NM PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg, 7.5mg	4	NDS NM PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg, 22.5mg	4	NDS NM PA
LUPRON DEPOT (4-MONTH) KIT 30mg	4	NDS NM PA
LUPRON DEPOT (6-MONTH) KIT 45mg	4	NDS NM PA
LUTRATE DEPOT INJ 22.5mg	3	NM PA
LYSODREN TABS 500mg	4	NDS NM
megestrol acetate TABS 20mg, 40mg	2	
nilutamide TABS 150mg	4	NDS
NUBEQA TABS 300mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ORGOVYX TABS 120mg	4	NDS NM PA
ORSERDU TABS 86mg QL (90 tabs / 30 days)	4	NDS QL NM PA
ORSERDU TABS 345mg QL (30 tabs / 30 days)	4	NDS QL NM PA
SOLTAMOX SOLN 10mg/5ml	4	NDS
tamoxifen citrate TABS 10mg, 20mg	1	
toremifene citrate (generic of FARESTON) TABS 60mg	1	PA
TRELSTAR MIXJECT SUSR 3.75mg, 11.25mg, 22.5mg	2	NM PA
VABRINTY KIT 7.5mg, 22.5mg, 30mg, 45mg	4	NDS NM PA
XTANDI CAPS 40mg QL (120 caps / 30 days)	4	NDS QL NM PA
XTANDI TABS 40mg QL (120 tabs / 30 days)	4	NDS QL NM PA
XTANDI TABS 80mg QL (60 tabs / 30 days)	4	NDS QL NM PA
YONSA TABS 125mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ZOLADEX IMPL 3.6mg, 10.8mg	3	NM PA
ZYTIGA TABS 250mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ZYTIGA TABS 500mg QL (60 tabs / 30 days)	4	NDS QL NM PA
IMMUNOMODULATORS		
lenalidomide (generic of REVLIMID) CAPS 2.5mg, 5mg, 10mg, 15mg QL (28 caps / 28 days)	4	NDS QL NM PA
lenalidomide (generic of REVLIMID) CAPS 20mg, 25mg QL (21 caps / 28 days)	4	NDS QL NM PA
pomalidomide (generic of POMALYST) CAPS 1mg, 2mg, 3mg, 4mg QL (21 caps / 28 days)	4	NDS QL NM PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg QL (21 caps / 28 days)	4	NDS QL NM PA
REVLIMID CAPS 2.5mg, 5mg, 10mg, 15mg QL (28 caps / 28 days)	4	NDS QL NM PA
REVLIMID CAPS 20mg, 25mg QL (21 caps / 28 days)	4	NDS QL NM PA
THALOMID CAPS 50mg QL (84 caps / 28 days)	4	NDS QL NM PA
THALOMID CAPS 100mg QL (112 caps / 28 days)	4	NDS QL NM PA
MISCELLANEOUS		
ASPARLAS SOLN 3750unit/5ml	4	NDS NM PA
BESREMI SOSY 500mcg/ml QL (2 syringes / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
bexarotene (generic of TARGRETIN) CAPS 75mg	4	NDS QL NM PA QL (300 caps / 30 days)
bleomycin sulfate SOLR 15unit, 30unit	1	B/D
CAMPTOSAR SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml	3	B/D
dacarbazine SOLR 100mg	1	B/D
dexrazoxane hcl SOLR 250mg, 500mg	4	NDS B/D
DOXIL SUSP 2mg/ml	4	NDS B/D
doxorubicin hcl (generic of DOXORUBICIN HYDROCHLORIDE) SOLN 2mg/ml	1	B/D
doxorubicin hcl liposomal (generic of DOXIL) SUSP 2mg/ml	4	NDS B/D
DOXORUBICIN HYDROCHLORIDE SOLN 2mg/ml	3	B/D
ELITEK SOLR 1.5mg, 7.5mg	4	NDS B/D
ELLENCE SOLN 50mg/25ml, 200mg/100ml	3	B/D
HYDREA CAPS 500mg	3	
hydroxyurea (generic of HYDREA) CAPS 500mg	1	
irinotecan hcl (generic of CAMPTOSAR) SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml	1	B/D
irinotecan hcl SOLN 500mg/25ml	1	B/D
IWILFIN TABS 192mg	4	NDS QL NM PA QL (240 tabs / 30 days)
KHAPZORY SOLR 175mg	4	NDS B/D NM
leucovorin calcium SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	1	B/D
leucovorin calcium TABS 5mg, 10mg, 15mg, 25mg	1	
levoleucovorin calcium SOLN 175mg/17.5ml, 250mg/25ml; SOLR 50mg	1	B/D NM
MATULANE CAPS 50mg	4	NDS NM
mesna (generic of MESNEX) TABS 400mg	4	NDS
MESNEX TABS 400mg	4	NDS
mitomycin SOLR 5mg	1	B/D
mitomycin SOLR 20mg, 40mg	4	NDS B/D
mitoxantrone hcl CONC 20mg/10ml, 25mg/12.5ml, 30mg/15ml	1	B/D NM
MODEYSO CAPS 125mg	4	NDS QL NM PA QL (20 caps / 28 days)
NIPENT SOLR 10mg	4	NDS B/D
ONCASPAR SOLN 750unit/ml	4	NDS NM PA
ONIVYDE SUSP 43mg/10ml	4	NDS B/D NM
RYLAZE SOLN 10mg/0.5ml	4	NDS NM PA
SYLVANT SOLR 100mg, 400mg	4	NDS NM PA
TARGRETIN CAPS 75mg	4	NDS QL NM PA QL (300 caps / 30 days)
TOPOTECAN HCL SOLN 4mg/4ml	3	B/D
topotecan hcl (generic of TOPOTECAN HCL) SOLN 4mg/4ml	1	B/D
topotecan hcl (generic of HYCAMTIN) SOLR 4mg	4	NDS B/D
tretinoin (chemotherapy) CAPS 10mg	4	NDS
valrubicin (generic of VALSTAR) SOLN 40mg/ml	4	NDS B/D NM
VALSTAR SOLN 40mg/ml	4	NDS B/D NM
VYKOURA SOLN 50mg/5ml	3	B/D NM
VYKOURA SOLN 350mg/35ml, 500mg/50ml	4	NDS B/D NM
WELIREG TABS 40mg	4	NDS QL NM PA QL (90 tabs / 30 days)
MITOTIC INHIBITORS		
ABRAXANE INJ 100MG	4	NDS B/D NM
BEIZRAY CONC 20mg/ml	3	B/D NM
BEIZRAY INJ 80MG/4ML	4	NDS B/D NM
BEIZRAY INJ 160/8ML	4	NDS B/D NM
DOCETAXEL CONC 20mg/ml	3	B/D
docetaxel (generic of DOCETAXEL) CONC 20mg/ml	1	B/D

Drug Name	Tier	Requirements/ Limits
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	4	NDS B/D
docetaxel (generic of DOCETAXEL) CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	4	NDS B/D
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	4	NDS B/D NM
eribulin mesylate (generic of HALAVEN) SOLN 1mg/2ml	4	NDS B/D NM
ETOPOPHOS SOLR 100mg	3	B/D
etoposide SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	1	B/D
HALAVEN SOLN 1mg/2ml	4	NDS B/D NM
IXEMPRA KIT SOLR 15mg, 45mg	4	NDS B/D NM
JEVTANA SOLN 60mg/1.5ml	4	NDS NM PA
paclitaxel CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	1	B/D
PACLITAXEL INJ 100MG	4	NDS B/D NM
paclitaxel inj 100mg (generic of ABRAXANE)	4	NDS B/D NM
vinblastine sulfate SOLN 1mg/ml	1	B/D
vincristine sulfate SOLN 1mg/ml	1	B/D
vinorelbine tartrate SOLN 10mg/ml, 50mg/5ml	1	B/D
MOLECULAR TARGET AGENTS		
AFINITOR TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
AFINITOR DISPERZ TBSO 2mg, 5mg QL (60 tabs / 30 days)	4	NDS QL NM PA
AFINITOR DISPERZ TBSO 3mg QL (90 tabs / 30 days)	4	NDS QL NM PA
ALECENSA CAPS 150mg QL (240 caps / 30 days)	4	NDS QL NM PA
ALUNBRIG TABS 30mg QL (120 tabs / 30 days)	4	NDS QL NM PA
ALUNBRIG TABS 90mg, 180mg QL (30 tabs / 30 days)	4	NDS QL NM PA
ALUNBRIG PAK QL (30 tabs / 30 days)	4	NDS QL NM PA
ALYMSYS SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
AUGTYRO CAPS 40mg QL (240 caps / 30 days)	4	NDS QL NM PA
AUGTYRO CAPS 160mg QL (60 caps / 30 days)	4	NDS QL NM PA
AVASTIN SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
AVMAPKI PAK FAKZYNJA QL (1 pack / 28 days)	4	NDS QL NM PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg QL (30 tabs / 30 days)	4	NDS QL NM PA
BALVERSA TABS 3mg QL (84 tabs / 28 days)	4	NDS QL NM PA
BALVERSA TABS 4mg QL (56 tabs / 28 days)	4	NDS QL NM PA
BALVERSA TABS 5mg QL (28 tabs / 28 days)	4	NDS QL NM PA
BAVENCIO SOLN 200mg/10ml	4	NDS NM PA
BELEODAQ SOLR 500mg	4	NDS NM PA
BESPONSA SOLR .9mg	4	NDS NM PA
BLENREP SOLR 70mg	4	NDS NM PA
BORTEZOMIB SOLR 1mg, 2.5mg	3	NM PA
bortezomib (generic of VELCADE) SOLR 3.5mg	4	NDS NM PA
BORUZU SOLN 3.5mg/1.4ml	4	NDS NM PA
BOSULIF CAPS 50mg QL (30 caps / 30 days)	4	NDS QL NM PA
BOSULIF CAPS 100mg QL (300 caps / 30 days)	4	NDS QL NM PA
BOSULIF TABS 100mg QL (180 tabs / 30 days)	4	NDS QL NM PA
BOSULIF TABS 400mg, 500mg QL (30 tabs / 30 days)	4	NDS QL NM PA
BRAFTOVI CAPS 75mg QL (180 caps / 30 days)	4	NDS QL NM PA
BRUKINSA CAPS 80mg QL (120 caps / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
BRUKINSA TABS 160mg QL (60 tabs / 30 days)	4	NDS QL NM PA
CABOMETYX TABS 20mg, 40mg, 60mg QL (30 tabs / 30 days)	4	NDS QL NM PA
CALQUENCE TABS 100mg QL (60 tabs / 30 days)	4	NDS QL NM PA
CAPRELSA TABS 100mg QL (60 tabs / 30 days)	4	NDS QL NM PA
CAPRELSA TABS 300mg QL (30 tabs / 30 days)	4	NDS QL NM PA
COLUMVI SOLN 2.5mg/2.5ml, 10mg/10ml	4	NDS NM PA
COMETRIQ (60MG DOSE) KIT 20mg QL (84 caps / 28 days)	4	NDS QL NM PA
COMETRIQ KIT 100MG QL (56 caps / 28 days)	4	NDS QL NM PA
COMETRIQ KIT 140MG QL (112 caps / 28 days)	4	NDS QL NM PA
COPIKTRA CAPS 15mg, 25mg QL (56 caps / 28 days)	4	NDS QL NM PA
COTELLIC TABS 20mg QL (63 tabs / 28 days)	4	NDS QL NM PA
CYRAMZA SOLN 100mg/10ml, 500mg/50ml	4	NDS NM PA
DANZITEN TABS 71mg, 95mg QL (112 tabs / 28 days)	4	NDS QL NM PA
DARZALEX SOLN 100mg/5ml, 400mg/20ml	4	NDS NM PA
DARZALEX INJ FASPRO	4	NDS NM PA
dasatinib (generic of SPRYCEL) TABS 20mg QL (90 tabs / 30 days)	4	NDS QL NM PA
dasatinib (generic of SPRYCEL) TABS 50mg, 70mg, 80mg, 100mg, 140mg QL (30 tabs / 30 days)	4	NDS QL NM PA
DATROWAY SOLR 100mg	4	NDS NM PA
DAURISMO TABS 25mg QL (60 tabs / 30 days)	4	NDS QL NM PA
DAURISMO TABS 100mg QL (30 tabs / 30 days)	4	NDS QL NM PA
ELAHERE SOLN 100mg/20ml	4	NDS NM PA
EMPLICITI SOLR 300mg, 400mg	4	NDS NM PA
EMRELIS SOLR 20mg, 100mg	4	NDS NM PA
ENHERTU SOLR 100mg	4	NDS NM PA
ENSACOVE CAPS 25mg QL (270 caps / 30 days)	4	NDS QL NM PA
ENSACOVE CAPS 100mg QL (60 caps / 30 days)	4	NDS QL NM PA
EPKINLY SOLN 4mg/0.8ml, 48mg/0.8ml	4	NDS NM PA
ERBITUX SOLN 100mg/50ml, 200mg/100ml	4	NDS B/D NM
ERIVEDGE CAPS 150mg QL (30 caps / 30 days)	4	NDS QL NM PA
erlotinib hcl TABS 25mg QL (90 tabs / 30 days)	4	NDS QL NM PA
erlotinib hcl TABS 100mg, 150mg QL (30 tabs / 30 days)	4	NDS QL NM PA
everolimus (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
everolimus (generic of AFINITOR DISPERZ) TBSO 2mg, 5mg QL (60 tabs / 30 days)	4	NDS QL NM PA
everolimus (generic of AFINITOR DISPERZ) TBSO 3mg QL (90 tabs / 30 days)	4	NDS QL NM PA
FOTIVDA CAPS .89mg, 1.34mg QL (21 caps / 28 days)	4	NDS QL NM PA
FRUZAQLA CAPS 1mg QL (84 caps / 28 days)	4	NDS QL NM PA
FRUZAQLA CAPS 5mg QL (21 caps / 28 days)	4	NDS QL NM PA
FYARRO SUSR 100mg	4	NDS NM PA
GAVRETO CAPS 100mg QL (120 caps / 30 days)	4	NDS QL NM PA
GAZYVA SOLN 1000mg/40ml	4	NDS NM PA
gefitinib (generic of IRESSA) TABS 250mg QL (60 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
GILOTRIF TABS 20mg, 30mg, 40mg QL (30 tabs / 30 days)	4	NDS QL NM PA
GLEEVEC TABS 100mg QL (90 tabs / 30 days)	4	NDS QL NM PA
GLEEVEC TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA
GOMEKLI CAPS 1mg QL (168 caps / 28 days)	4	NDS QL NM PA
GOMEKLI CAPS 2mg QL (84 caps / 28 days)	4	NDS QL NM PA
GOMEKLI TBSO 1mg QL (168 tabs / 28 days)	4	NDS QL NM PA
HERCEP HYLEC SOL 60-10000	4	NDS NM PA
HERCEPTIN SOLR 150mg	4	NDS NM PA
HERCESSI SOLR 150mg, 420mg	4	NDS NM PA
HERNEXEOS TABS 60mg QL (120 tabs / 30 days)	4	NDS QL NM PA
HERZUMA SOLR 150mg, 420mg	4	NDS NM PA
HYRNUO TABS 10mg QL (120 tabs / 30 days)	4	NDS QL NM PA
IBRANCE CAPS 75mg, 100mg, 125mg QL (21 caps / 28 days)	4	NDS QL NM PA
IBRANCE TABS 75mg, 100mg, 125mg QL (21 tabs / 28 days)	4	NDS QL NM PA
IBTROZI CAPS 200mg QL (90 caps / 30 days)	4	NDS QL NM PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg QL (30 tabs / 30 days)	4	NDS QL NM PA
IDHIFA TABS 50mg, 100mg QL (30 tabs / 30 days)	4	NDS QL NM PA
imatinib mesylate (generic of GLEEVEC) TABS 100mg QL (90 tabs / 30 days)	1	QL NM PA
imatinib mesylate (generic of GLEEVEC) TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA
IMBRUVICA CAPS 70mg QL (30 caps / 30 days)	4	NDS QL NM PA
IMBRUVICA CAPS 140mg QL (120 caps / 30 days)	4	NDS QL NM PA
IMBRUVICA SUSP 70mg/ml QL (216 mL / 27 days)	4	NDS QL NM PA
IMBRUVICA TABS 140mg, 280mg, 420mg QL (30 tabs / 30 days)	4	NDS QL NM PA
IMDELLTRA SOLR 1mg, 10mg	4	NDS NM PA
IMFINZI SOLN 120mg/2.4ml, 500mg/10ml	4	NDS NM PA
IMJUDO SOLN 25mg/1.25ml, 300mg/15ml	4	NDS NM PA
IMKELDI SOLN 80mg/ml QL (280 mL / 28 days)	4	NDS QL NM PA
INLYTA TABS 1mg QL (180 tabs / 30 days)	4	NDS QL NM PA
INLYTA TABS 5mg QL (120 tabs / 30 days)	4	NDS QL NM PA
INREBIC CAPS 100mg QL (120 caps / 30 days)	4	NDS QL NM PA
IRESSA TABS 250mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ITOVEBI TABS 3mg QL (56 tabs / 28 days)	4	NDS QL NM PA
ITOVEBI TABS 9mg QL (28 tabs / 28 days)	4	NDS QL NM PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg QL (60 tabs / 30 days)	4	NDS QL NM PA
JAYPIRCA TABS 50mg QL (30 tabs / 30 days)	4	NDS QL NM PA
JAYPIRCA TABS 100mg QL (60 tabs / 30 days)	4	NDS QL NM PA
JEMPERLI SOLN 500mg/10ml	4	NDS NM PA
JOBEVNE SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
KADCYLA SOLR 100mg, 160mg	4	NDS B/D NM
KANJINTI SOLR 150mg, 420mg	4	NDS NM PA
KEYTRUDA SOLN 100mg/4ml	4	NDS NM PA
KEYTRUDA INJ QLEX 395-4800 MG-UNIT/2.4ML QL (1 vial / 21 days)	4	NDS QL NM PA
KEYTRUDA INJ QLEX 790-9600 MG-UNIT/4.8ML QL (1 vial / 42 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
KIMMTRAK SOLN 100mcg/0.5ml	4	NDS NM PA
KISQALI 200 DOSE TBPK 200mg	4	NDS QL NM PA
QL (21 tabs / 28 days)		
KISQALI 400 DOSE TBPK 200mg	4	NDS QL NM PA
QL (42 tabs / 28 days)		
KISQALI 400 PAK FEMARA	4	NDS QL NM PA
QL (70 tabs / 28 days)		
KISQALI 600 DOSE TBPK 200mg	4	NDS QL NM PA
QL (63 tabs / 28 days)		
KISQALI 600 PAK FEMARA	4	NDS QL NM PA
QL (91 tabs / 28 days)		
KOMZIFTI CAPS 200mg	4	NDS QL NM PA
QL (90 caps / 30 days)		
KOSELUGO CAPS 10mg	4	NDS QL NM PA
QL (240 caps / 30 days)		
KOSELUGO CAPS 25mg	4	NDS QL NM PA
QL (120 caps / 30 days)		
KOSELUGO CPSP 5mg	4	NDS QL NM PA
QL (600 caps / 30 days)		
KOSELUGO CPSP 7.5mg	4	NDS QL NM PA
QL (360 caps / 30 days)		
KRAZATI TABS 200mg	4	NDS QL NM PA
QL (180 tabs / 30 days)		
KYPROLIS SOLR 10mg, 30mg, 60mg	4	NDS NM PA
lapatinib ditosylate (generic of TYKERB) TABS 250mg	4	NDS QL NM PA
QL (180 tabs / 30 days)		
LAZCLUZE TABS 80mg	4	NDS QL NM PA
QL (60 tabs / 30 days)		
LAZCLUZE TABS 240mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
LENVIMA 4 MG DAILY DOSE CPPK 4mg	4	NDS QL NM PA
QL (30 caps / 30 days)		
LENVIMA 8 MG DAILY DOSE CPPK 4mg	4	NDS QL NM PA
QL (60 caps / 30 days)		
LENVIMA 10 MG DAILY DOSE CPPK 10mg	4	NDS QL NM PA
QL (30 caps / 30 days)		
LENVIMA 12MG DAILY DOSE CPPK 4mg	4	NDS QL NM PA
QL (90 caps / 30 days)		
LENVIMA 20 MG DAILY DOSE CPPK 10mg	4	NDS QL NM PA
QL (60 caps / 30 days)		
LENVIMA CAP 14 MG	4	NDS QL NM PA
QL (60 caps / 30 days)		
LENVIMA CAP 18 MG	4	NDS QL NM PA
QL (90 caps / 30 days)		
LENVIMA CAP 24 MG	4	NDS QL NM PA
QL (90 caps / 30 days)		
LIBTAYO SOLN 350mg/7ml	4	NDS NM PA
LOQTORZI SOLN 240mg/6ml	4	NDS NM PA
LORBRENA TABS 25mg	4	NDS QL NM PA
QL (90 tabs / 30 days)		
LORBRENA TABS 100mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
LUMAKRAS TABS 120mg	4	NDS QL NM PA
QL (240 tabs / 30 days)		
LUMAKRAS TABS 240mg	4	NDS QL NM PA
QL (120 tabs / 30 days)		
LUMAKRAS TABS 320mg	4	NDS QL NM PA
QL (90 tabs / 30 days)		
LUNSUMIO SOLN 1mg/ml, 30mg/30ml	4	NDS NM PA
LUNSUMIO VELO SOLN 5mg/0.5ml, 45mg/ml	4	NDS NM PA
LYNOZYFIC SOLN 5mg/2.5ml, 200mg/10ml	4	NDS NM PA
LYNPARZA TABS 100mg, 150mg	4	NDS QL NM PA
QL (120 tabs / 30 days)		
LYTGOBI (12 MG DAILY DOSE) TBPK 4mg	4	NDS QL NM PA
QL (84 tabs / 28 days)		
LYTGOBI (16 MG DAILY DOSE) TBPK 4mg	4	NDS QL NM PA
QL (112 tabs / 28 days)		
LYTGOBI (20 MG DAILY DOSE) TBPK 4mg	4	NDS QL NM PA
QL (140 tabs / 28 days)		
MARGENZA SOLN 250mg/10ml	4	NDS NM PA
MEKINIST SOLR .05mg/ml	4	NDS QL NM PA
QL (1260 mL / 30 days)		
MEKINIST TABS 2mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
MEKINIST TABS .5mg	4	NDS QL NM PA
QL (90 tabs / 30 days)		

Drug Name	Tier	Requirements/ Limits
MEKTOVI TABS 15mg QL (180 tabs / 30 days)	4	NDS QL NM PA
MONJUVI SOLR 200mg	4	NDS NM PA
MVASI SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
MYLOTARG SOLR 4.5mg	4	NDS NM PA
NERLYNX TABS 40mg QL (180 tabs / 30 days)	4	NDS QL NM PA
NEXAVAR TABS 200mg QL (120 tabs / 30 days)	4	NDS QL NM PA
NILOTINIB D-TARTRATE CAPS 50mg QL (120 caps / 30 days)	4	NDS QL NM PA
NILOTINIB D-TARTRATE CAPS 150mg, 200mg QL (112 caps / 28 days)	4	NDS QL NM PA
nilotinib hcl (generic of TASIGNA) CAPS 50mg QL (120 caps / 30 days)	4	NDS QL NM PA
nilotinib hcl (generic of TASIGNA) CAPS 150mg, 200mg QL (112 caps / 28 days)	4	NDS QL NM PA
NINLARO CAPS 2.3mg, 3mg, 4mg QL (3 caps / 28 days)	4	NDS QL NM PA
ODOMZO CAPS 200mg QL (30 caps / 30 days)	4	NDS QL NM PA
OGIVRI SOLR 150mg, 420mg	4	NDS NM PA
OGSIVEO TABS 100mg, 150mg QL (56 tabs / 28 days)	4	NDS QL NM PA
OJEMDA SUSR 25mg/ml QL (96 mL / 28 days)	4	NDS QL NM PA
OJEMDA TABS 100mg QL (24 tabs / 28 days)	4	NDS QL NM PA
OJJAARA TABS 100mg, 150mg, 200mg QL (30 tabs / 30 days)	4	NDS QL NM PA
ONTRUZANT SOLR 150mg, 420mg	4	NDS NM PA
OPDIVO SOLN 40mg/4ml, 100mg/10ml, 120mg/12ml, 240mg/24ml	4	NDS NM PA
OPDIVO INJ QVANTIG	4	NDS NM PA
OPDUALAG SOL	4	NDS NM PA
PADCEV SOLR 20mg, 30mg	4	NDS NM PA
pazopanib hcl (generic of VOTRIENT) TABS 200mg QL (120 tabs / 30 days)	4	NDS QL NM PA
pazopanib hcl TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg QL (28 tabs / 28 days)	4	NDS QL NM PA
PERJETA SOLN 420mg/14ml	4	NDS NM PA
PHESGO SOL	4	NDS NM PA
PHYRAGO TABS 20mg QL (90 tabs / 30 days)	4	NDS QL NM PA
PHYRAGO TABS 50mg, 70mg, 80mg, 100mg, 140mg QL (30 tabs / 30 days)	4	NDS QL NM PA
PIQRAY 200MG DAILY DOSE TBPK 200mg QL (28 tabs / 28 days)	4	NDS QL NM PA
PIQRAY 250MG TAB DOSE QL (56 tabs / 28 days)	4	NDS QL NM PA
PIQRAY 300MG DAILY DOSE TBPK 150mg QL (56 tabs / 28 days)	4	NDS QL NM PA
POLIVY SOLR 30mg, 140mg	4	NDS NM PA
POTELIGEO SOLN 20mg/5ml	4	NDS NM PA
QINLOCK TABS 50mg QL (90 tabs / 30 days)	4	NDS QL NM PA
RETEVMO TABS 40mg QL (90 tabs / 30 days)	4	NDS QL NM PA
RETEVMO TABS 80mg QL (120 tabs / 30 days)	4	NDS QL NM PA
RETEVMO TABS 120mg, 160mg QL (60 tabs / 30 days)	4	NDS QL NM PA
REVUFORJ TABS 25mg QL (240 tabs / 30 days)	4	NDS QL NM PA
REVUFORJ TABS 110mg QL (120 tabs / 30 days)	4	NDS QL NM PA
REVUFORJ TABS 160mg QL (60 tabs / 30 days)	4	NDS QL NM PA
REZLIDHIA CAPS 150mg QL (60 caps / 30 days)	4	NDS QL NM PA
RIABNI SOLN 100mg/10ml, 500mg/50ml	4	NDS NM PA
RITUXAN SOLN 500mg/50ml	4	NDS NM PA
RITUXAN INJ HYCELA	4	NDS NM PA

Drug Name	Tier	Requirements/ Limits
ROMVIMZA CAPS 14mg, 20mg, 30mg QL (8 caps / 28 days)	4	NDS QL NM PA
ROZLYTREK CAPS 100mg QL (180 caps / 30 days)	4	NDS QL NM PA
ROZLYTREK CAPS 200mg QL (90 caps / 30 days)	4	NDS QL NM PA
ROZLYTREK PACK 50mg QL (336 packets / 28 days)	4	NDS QL NM PA
RUBRACA TABS 200mg, 250mg, 300mg QL (120 tabs / 30 days)	4	NDS QL NM PA
RUXIENCE SOLN 100mg/10ml, 500mg/50ml	4	NDS NM PA
RYBREVANT SOLN 350mg/7ml	4	NDS NM PA
RYBREVANT INJ FASPRO	4	NDS NM PA
RYDAPT CAPS 25mg QL (224 caps / 28 days)	4	NDS QL NM PA
SARCLISA SOLN 100mg/5ml, 500mg/25ml	4	NDS NM PA
SCEMBLIX TABS 20mg QL (60 tabs / 30 days)	4	NDS QL NM PA
SCEMBLIX TABS 40mg QL (300 tabs / 30 days)	4	NDS QL NM PA
SCEMBLIX TABS 100mg QL (120 tabs / 30 days)	4	NDS QL NM PA
sorafenib tosylate (generic of NEXAVAR) TABS 200mg QL (120 tabs / 30 days)	4	NDS QL NM PA
SPRYCEL TABS 20mg QL (90 tabs / 30 days)	4	NDS QL NM PA
SPRYCEL TABS 50mg, 70mg, 80mg, 100mg, 140mg QL (30 tabs / 30 days)	4	NDS QL NM PA
STIVARGA TABS 40mg QL (84 tabs / 28 days)	4	NDS QL NM PA
sunitinib malate (generic of SUTENT) CAPS 12.5mg, 25mg, 37.5mg, 50mg QL (30 caps / 30 days)	4	NDS QL NM PA
SUTENT CAPS 12.5mg, 25mg, 37.5mg, 50mg QL (30 caps / 30 days)	4	NDS QL NM PA
TABRECTA TABS 150mg, 200mg QL (112 tabs / 28 days)	4	NDS QL NM PA
TAFINLAR CAPS 50mg, 75mg QL (120 caps / 30 days)	4	NDS QL NM PA
TAFINLAR TBSO 10mg QL (840 tabs / 28 days)	4	NDS QL NM PA
TAGRISSO TABS 40mg, 80mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg QL (30 caps / 30 days)	4	NDS QL NM PA
TALZENNA CAPS .25mg QL (90 caps / 30 days)	4	NDS QL NM PA
TASIGNA CAPS 50mg QL (120 caps / 30 days)	4	NDS QL NM PA
TASIGNA CAPS 150mg, 200mg QL (112 caps / 28 days)	4	NDS QL NM PA
TAZVERIK TABS 200mg QL (240 tabs / 30 days)	4	NDS QL NM PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	4	NDS NM PA
TECENTRIQ INJ HYBREZA QL (1 vial / 21 days)	4	NDS QL NM PA
TECVAYLI SOLN 30mg/3ml, 153mg/1.7ml	4	NDS NM PA
temsirolimus (generic of TORISEL) SOLN 25mg/ml	4	NDS B/D NM
TEPMETKO TABS 225mg QL (60 tabs / 30 days)	4	NDS QL NM PA
TEVIMBRA SOLN 100mg/10ml	4	NDS NM PA
TIBSOVO TABS 250mg QL (60 tabs / 30 days)	4	NDS QL NM PA
TIVDAK SOLR 40mg	4	NDS NM PA
TORISEL SOLN 25mg/ml	4	NDS B/D NM
torpenz (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TRAZIMERA SOLR 150mg, 420mg	4	NDS NM PA
TRODELVY SOLR 180mg	4	NDS NM PA
TRUQAP TABS 160mg, 200mg QL (64 tabs / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
TRUQAP TBPK 160mg, 200mg	4	NDS QL NM PA
QL (4 packs / 28 days)		
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	4	NDS NM PA
TUKYSA TABS 50mg, 150mg	4	NDS QL NM PA
QL (120 tabs / 30 days)		
TURALIO CAPS 125mg	4	NDS QL NM PA
QL (120 caps / 30 days)		
TYKERB TABS 250mg	4	NDS QL NM PA
QL (180 tabs / 30 days)		
VANFLYTA TABS 17.7mg, 26.5mg	4	NDS QL NM PA
QL (56 tabs / 28 days)		
VECTIBIX SOLN 100mg/5ml, 400mg/20ml	4	NDS B/D NM
VEGZELMA SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA
VELCADE SOLR 3.5mg	4	NDS NM PA
VENCLEXTA TABS 10mg	2	QL NM PA
QL (112 tabs / 28 days)		
VENCLEXTA TABS 50mg	4	NDS QL NM PA
QL (112 tabs / 28 days)		
VENCLEXTA TABS 100mg	4	NDS QL NM PA
QL (180 tabs / 30 days)		
VENCLEXTA TAB START PK	4	NDS QL NM PA
QL (42 tabs / 28 days)		
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	4	NDS QL NM PA
QL (56 tabs / 28 days)		
VITRAKVI CAPS 25mg	4	NDS QL NM PA
QL (180 caps / 30 days)		
VITRAKVI CAPS 100mg	4	NDS QL NM PA
QL (60 caps / 30 days)		
VITRAKVI SOLN 20mg/ml	4	NDS QL NM PA
QL (300 mL / 30 days)		
VIZIMPRO TABS 15mg, 30mg, 45mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
VONJO CAPS 100mg	4	NDS QL NM PA
QL (120 caps / 30 days)		
VORANIGO TABS 10mg	4	NDS QL NM PA
QL (60 tabs / 30 days)		
VORANIGO TABS 40mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
VOTRIENT TABS 200mg	4	NDS QL NM PA
QL (120 tabs / 30 days)		
VYLOY SOLR 100mg, 300mg	4	NDS NM PA
XALKORI CAPS 200mg, 250mg; CPSP 20mg, 50mg	4	NDS QL NM PA
QL (120 caps / 30 days)		
XALKORI CPSP 150mg	4	NDS QL NM PA
QL (180 caps / 30 days)		
XOSPATA TABS 40mg	4	NDS QL NM PA
QL (90 tabs / 30 days)		
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 10mg	4	NDS QL NM PA
QL (16 tabs / 28 days)		
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 40mg	4	NDS QL NM PA
QL (4 tabs / 28 days)		
XPOVIO PAK (40 MG TWICE WEEKLY) TBPK 40mg	4	NDS QL NM PA
QL (8 tabs / 28 days)		
XPOVIO PAK (60 MG ONCE WEEKLY) TBPK 60mg	4	NDS QL NM PA
QL (4 tabs / 28 days)		
XPOVIO PAK (60 MG TWICE WEEKLY) TBPK 20mg	4	NDS QL NM PA
QL (24 tabs / 28 days)		
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 40mg	4	NDS QL NM PA
QL (8 tabs / 28 days)		
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 80mg	4	NDS QL NM PA
QL (4 tabs / 28 days)		
XPOVIO PAK (80 MG TWICE WEEKLY) TBPK 20mg	4	NDS QL NM PA
QL (32 tabs / 28 days)		
XPOVIO PAK (100 MG ONCE WEEKLY) TBPK 50mg	4	NDS QL NM PA
QL (8 tabs / 28 days)		
YERVOY SOLN 50mg/10ml, 200mg/40ml	4	NDS NM PA
ZALTRAP SOLN 100mg/4ml, 200mg/8ml	4	NDS NM PA
ZEJULA TABS 100mg, 200mg, 300mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
ZELBORAF TABS 240mg	4	NDS QL NM PA
QL (240 tabs / 30 days)		
ZIIHERA SOLR 300mg	4	NDS NM PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	4	NDS NM PA

Drug Name	Drug Tier	Requirements/ Limits
ZOLINZA CAPS 100mg	4	NDS QL NM PA
QL (120 caps / 30 days)		
ZYDELIG TABS 100mg, 150mg	4	NDS QL NM PA
QL (60 tabs / 30 days)		
ZYKADIA TABS 150mg	4	NDS QL NM PA
QL (84 tabs / 28 days)		
ZYNLONTA SOLR 10mg	4	NDS NM PA
ZYNYZ SOLN 500mg/20ml	4	NDS NM PA
CARDIOVASCULAR		
ACE INHIBITOR COMBINATIONS		
amlodipine besylate-benazepril hcl cap 2.5-10 mg	1	QL
QL (30 caps / 30 days)		
amlodipine besylate-benazepril hcl cap 5-10 mg (generic of LOTREL)	1	QL
QL (30 caps / 30 days)		
amlodipine besylate-benazepril hcl cap 5-20 mg	1	QL
QL (30 caps / 30 days)		
amlodipine besylate-benazepril hcl cap 5-40 mg	1	QL
QL (30 caps / 30 days)		
amlodipine besylate-benazepril hcl cap 10-20 mg (generic of LOTREL)	1	QL
QL (30 caps / 30 days)		
amlodipine besylate-benazepril hcl cap 10-40 mg (generic of LOTREL)	1	QL
QL (30 caps / 30 days)		
benazepril & hydrochlorothiazide tab 5-6.25mg	1	
benazepril & hydrochlorothiazide tab 10-12.5 mg (generic of LOTENSIN HCT)	1	
benazepril & hydrochlorothiazide tab 20-12.5 mg (generic of LOTENSIN HCT)	1	
benazepril & hydrochlorothiazide tab 20-25 mg (generic of LOTENSIN HCT)	1	
captopril & hydrochlorothiazide tab 25-15 mg	1	
captopril & hydrochlorothiazide tab 25-25 mg	1	
captopril & hydrochlorothiazide tab 50-15 mg	1	
captopril & hydrochlorothiazide tab 50-25 mg	1	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	1	
enalapril maleate & hydrochlorothiazide tab 10-25 mg (generic of VASERETIC)	1	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	1	
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg	1	
lisinopril & hydrochlorothiazide tab 10-12.5 mg (generic of ZESTORETIC)	1	
lisinopril & hydrochlorothiazide tab 20-12.5 mg (generic of ZESTORETIC)	1	
lisinopril & hydrochlorothiazide tab 20-25 mg (generic of ZESTORETIC)	1	
quinapril-hydrochlorothiazide tab 10-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-25 mg	1	
trandolapril-verapamil hcl tab er 1-240 mg	1	
trandolapril-verapamil hcl tab er 2-180 mg	1	
trandolapril-verapamil hcl tab er 2-240 mg	1	
trandolapril-verapamil hcl tab er 4-240 mg	1	
VASERETIC TAB 10-25MG	3	

Drug Name	Drug Tier	Requirements/ Limits
ZESTORETIC TAB 10-12.5	3	
ZESTORETIC TAB 20-12.5	3	
ZESTORETIC TAB 20-25MG	3	
ACE INHIBITORS		
benazepril hcl TABS 5mg	1	
benazepril hcl (generic of LOTENSIN) TABS 10mg, 20mg, 40mg	1	
captopril TABS 12.5mg, 25mg, 50mg, 100mg	1	
enalapril maleate (generic of EPANED) SOLN 1mg/ml	1	
enalapril maleate (generic of VASOTEC) TABS 2.5mg, 5mg, 10mg, 20mg	1	
EPANED SOLN 1mg/ml	4	NDS
fosinopril sodium TABS 10mg, 20mg, 40mg	1	
lisinopril (generic of ZESTRIL) TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	1	
LOTENSIN TABS 10mg, 20mg, 40mg	3	
moexipril hcl TABS 7.5mg, 15mg	1	
perindopril erbumine TABS 2mg, 4mg, 8mg	1	
QBRELIS SOLN 1mg/ml	4	NDS
quinapril hcl TABS 5mg, 10mg, 20mg, 40mg	1	
ramipril CAPS 1.25mg, 2.5mg, 5mg, 10mg	1	
trandolapril TABS 1mg, 2mg, 4mg	1	
VASOTEC TABS 2.5mg, 5mg, 10mg	3	
VASOTEC TABS 20mg	4	NDS
ZESTRIL TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	3	
ALDOSTERONE RECEPTOR ANTAGONISTS		
ALDACTONE TABS 25mg, 50mg, 100mg	3	
CAROSPIR SUSP 25mg/5ml	3	
eplerenone TABS 25mg, 50mg	1	
INSPRA TABS 25mg, 50mg	3	
KERENDIA TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	2	QL
spironolactone (generic of CAROSPIR) SUSP 25mg/5ml	1	
spironolactone (generic of ALDACTONE) TABS 25mg, 50mg, 100mg	1	
ALPHA BLOCKERS		
CARDURA TABS 1mg, 2mg, 4mg, 8mg	3	
doxazosin mesylate (generic of CARDURA) TABS 1mg, 2mg, 4mg, 8mg	1	
prazosin hcl CAPS 1mg, 2mg, 5mg	1	
terazosin hcl CAPS 1mg, 2mg, 5mg, 10mg	1	
TEZRULY SOLN 1mg/ml QL (600 mL / 30 days)	3	QL ST
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
amlodipine besylate-olmesartan medoxomil tab 5-20 mg (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-olmesartan medoxomil tab 5-40 mg (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-olmesartan medoxomil tab 10-20 mg (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-olmesartan medoxomil tab 10-40 mg (generic of AMLODIPINE/OLMESARTAN MED) QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
amlodipine besylate-valsartan tab 5-160 mg (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-valsartan tab 5-320 mg (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-valsartan tab 10-160 mg (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
amlodipine besylate-valsartan tab 10-320 mg (generic of EXFORGE) QL (30 tabs / 30 days)	1	QL
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg (generic of EXFORGE HCT) QL (30 tabs / 30 days)	1	QL
ATACAND HCT TAB 16-12.5 QL (60 tabs / 30 days)	3	QL
ATACAND HCT TAB 32-12.5 QL (30 tabs / 30 days)	3	QL
ATACAND HCT TAB 32-25MG QL (30 tabs / 30 days)	3	QL
AVALIDE TAB 150-12.5 QL (60 tabs / 30 days)	3	QL
AVALIDE TAB 300-12.5 QL (30 tabs / 30 days)	3	QL
AZOR TAB 5-20MG QL (30 tabs / 30 days)	3	QL
AZOR TAB 5-40MG QL (30 tabs / 30 days)	3	QL
AZOR TAB 10-20MG QL (30 tabs / 30 days)	3	QL
AZOR TAB 10-40MG QL (30 tabs / 30 days)	3	QL
BENICAR HCT TAB 20-12.5 QL (30 tabs / 30 days)	3	QL
BENICAR HCT TAB 40-12.5 QL (30 tabs / 30 days)	3	QL
BENICAR HCT TAB 40-25MG QL (30 tabs / 30 days)	3	QL
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg (generic of ATACAND HCT) QL (60 tabs / 30 days)	1	QL
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg (generic of ATACAND HCT) QL (30 tabs / 30 days)	1	QL
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg (generic of ATACAND HCT) QL (30 tabs / 30 days)	1	QL
DIOVAN HCT TAB 80-12.5 QL (30 tabs / 30 days)	3	QL
DIOVAN HCT TAB 160-12.5 QL (30 tabs / 30 days)	3	QL
DIOVAN HCT TAB 160-25MG QL (30 tabs / 30 days)	3	QL
DIOVAN HCT TAB 320-12.5 QL (30 tabs / 30 days)	3	QL
DIOVAN HCT TAB 320-25MG QL (30 tabs / 30 days)	3	QL
EDARBYCLOR TAB 40-12.5 QL (30 tabs / 30 days)	3	QL ST
EDARBYCLOR TAB 40-25MG QL (30 tabs / 30 days)	3	QL ST

Drug Name	Drug Requirements/ Tier	Limits
ENTRESTO CAP 6-6MG QL (240 caps / 30 days)	2	QL
ENTRESTO CAP 15-16MG QL (240 caps / 30 days)	2	QL
ENTRESTO TAB 24-26MG QL (60 tabs / 30 days)	3	QL
ENTRESTO TAB 49-51MG QL (60 tabs / 30 days)	3	QL
ENTRESTO TAB 97-103MG QL (60 tabs / 30 days)	3	QL
EXFORGE HCT TAB 5-160-12.5MG QL (30 tabs / 30 days)	3	QL
EXFORGE HCT TAB 5-160-25MG QL (30 tabs / 30 days)	3	QL
EXFORGE HCT TAB 10-160-12.5MG QL (30 tabs / 30 days)	3	QL
EXFORGE HCT TAB 10-160-25MG QL (30 tabs / 30 days)	3	QL
EXFORGE HCT TAB 10-320-25MG QL (30 tabs / 30 days)	3	QL
EXFORGE TAB 5-160MG QL (30 tabs / 30 days)	3	QL
EXFORGE TAB 5-320MG QL (30 tabs / 30 days)	3	QL
EXFORGE TAB 10-160MG QL (30 tabs / 30 days)	3	QL
EXFORGE TAB 10-320MG QL (30 tabs / 30 days)	3	QL
HYZAAR TAB 50-12.5	3	
HYZAAR TAB 100-12.5	3	
HYZAAR TAB 100-25	3	
irbesartan-hydrochlorothiazide tab 150-12.5 mg (generic of AVALIDE) QL (60 tabs / 30 days)	1	QL
irbesartan-hydrochlorothiazide tab 300-12.5 mg (generic of AVALIDE) QL (30 tabs / 30 days)	1	QL
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (generic of HYZAAR)	1	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (generic of HYZAAR)	1	
losartan potassium & hydrochlorothiazide tab 100-25 mg (generic of HYZAAR)	1	
MICARDIS HCT TAB 40/12.5 QL (30 tabs / 30 days)	3	QL
MICARDIS HCT TAB 80-25MG QL (30 tabs / 30 days)	3	QL
MICARDIS HCT TAB 80/12.5 QL (60 tabs / 30 days)	3	QL
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL

Drug Name	Tier	Requirements/ Limits
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg (generic of TRIBENZOR)	1	QL
QL (30 tabs / 30 days)		
sacubitril-valsartan tab 24-26 mg (generic of ENTRESTO)	1	QL
QL (60 tabs / 30 days)		
sacubitril-valsartan tab 49-51 mg (generic of ENTRESTO)	1	QL
QL (60 tabs / 30 days)		
sacubitril-valsartan tab 97-103 mg (generic of ENTRESTO)	1	QL
QL (60 tabs / 30 days)		
telmisartan-amlodipine tab 40-5 mg	1	QL
QL (30 tabs / 30 days)		
telmisartan-amlodipine tab 40-10 mg	1	QL
QL (30 tabs / 30 days)		
telmisartan-amlodipine tab 80-5 mg	1	QL
QL (30 tabs / 30 days)		
telmisartan-amlodipine tab 80-10 mg	1	QL
QL (30 tabs / 30 days)		
telmisartan-hydrochlorothiazide tab 40-12.5 mg (generic of MICARDIS HCT)	1	QL
QL (30 tabs / 30 days)		
telmisartan-hydrochlorothiazide tab 80-12.5 mg (generic of MICARDIS HCT)	1	QL
QL (60 tabs / 30 days)		
telmisartan-hydrochlorothiazide tab 80-25 mg (generic of MICARDIS HCT)	1	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 20-5-12.5MG	3	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 40-5-12.5MG	3	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 40-5-25MG	3	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 40-10-12.5MG	3	QL
QL (30 tabs / 30 days)		
TRIBENZOR TAB 40-10-25MG	3	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 80-12.5 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 160-12.5 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 160-25 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 320-12.5 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
valsartan-hydrochlorothiazide tab 320-25 mg (generic of DIOVAN HCT)	1	QL
QL (30 tabs / 30 days)		
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ARBLI SUSP 10mg/ml	3	QL
QL (330 mL / 30 days)		
ATACAND TABS 4mg, 8mg, 16mg	3	QL
QL (60 tabs / 30 days)		
ATACAND TABS 32mg	3	QL
QL (30 tabs / 30 days)		
AVAPRO TABS 150mg, 300mg	3	QL
QL (30 tabs / 30 days)		
BENICAR TABS 5mg	3	QL
QL (60 tabs / 30 days)		
BENICAR TABS 20mg, 40mg	3	QL
QL (30 tabs / 30 days)		
candesartan cilexetil (generic of ATACAND) TABS 4mg, 8mg, 16mg	1	QL
QL (60 tabs / 30 days)		

Drug Name	Drug Tier	Requirements/ Limits
candesartan cilexetil (generic of ATACAND) TABS 32mg QL (30 tabs / 30 days)	1	QL
COZAAR TABS 25mg, 50mg, 100mg	3	
DIOVAN TABS 40mg, 80mg, 160mg QL (60 tabs / 30 days)	3	QL
DIOVAN TABS 320mg QL (30 tabs / 30 days)	3	QL
EDARBI TABS 40mg, 80mg QL (30 tabs / 30 days)	3	QL ST
irbesartan TABS 75mg QL (30 tabs / 30 days)	1	QL
irbesartan (generic of AVAPRO) TABS 150mg, 300mg QL (30 tabs / 30 days)	1	QL
losartan potassium (generic of COZAAR) TABS 25mg, 50mg, 100mg	1	
olmesartan medoxomil (generic of BENICAR) TABS 5mg QL (60 tabs / 30 days)	1	QL
olmesartan medoxomil (generic of BENICAR) TABS 20mg, 40mg QL (30 tabs / 30 days)	1	QL
telmisartan TABS 20mg QL (30 tabs / 30 days)	1	QL
telmisartan (generic of MICARDIS) TABS 40mg, 80mg QL (30 tabs / 30 days)	1	QL
valsartan SOLN 4mg/ml QL (2400 mL / 30 days)	4	NDS QL PA
valsartan (generic of DIOVAN) TABS 40mg, 80mg, 160mg QL (60 tabs / 30 days)	1	QL
valsartan (generic of DIOVAN) TABS 320mg QL (30 tabs / 30 days)	1	QL
ANTIARRHYTHMICS		
amiodarone hcl SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 200mg, 400mg	1	

Drug Name	Drug Tier	Requirements/ Limits
BETAPACE TABS 80mg, 120mg, 160mg	4	NDS
BETAPACE AF TABS 80mg	3	
BETAPACE AF TABS 120mg, 160mg	4	NDS
disopyramide phosphate (generic of NORPACE) CAPS 100mg, 150mg	3	
dofetilide (generic of TIKOSYN) CAPS 125mcg, 250mcg, 500mcg	1	NM
flecainide acetate TABS 50mg, 100mg, 150mg	1	
MULTAQ TABS 400mg QL (60 tabs / 30 days)	3	QL
NORPACE CAPS 100mg, 150mg	3	
NORPACE CR CP12 100mg, 150mg	3	
pacerone TABS 100mg, 200mg, 400mg	1	
propafenone hcl CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg	1	
quinidine sulfate TABS 200mg, 300mg	1	
sotalol hcl (generic of BETAPACE) TABS 80mg, 120mg, 160mg	1	
sotalol hcl TABS 240mg	1	
sotalol hcl (afib/afl) (generic of BETAPACE AF) TABS 80mg, 120mg, 160mg	1	
SOTYLIZE SOLN 5mg/ml	3	
TIKOSYN CAPS 125mcg, 250mcg, 500mcg	3	NM
ANTILIPEMICS, FIBRATES		
choline fenofibrate CPDR 45mg, 135mg	1	
fenofibrate CAPS 50mg QL (60 caps / 30 days)	1	QL ST
fenofibrate CAPS 150mg QL (30 caps / 30 days)	1	QL ST
fenofibrate TABS 40mg QL (60 tabs / 30 days)	1	QL ST
fenofibrate TABS 48mg, 54mg, 160mg	1	

Drug Name	Drug Requirements/ Tier	Limits
fenofibrate TABS 120mg QL (30 tabs / 30 days)	1	QL ST
fenofibrate (generic of TRICOR) TABS 145mg	1	
fenofibrate micronized CAPS 43mg, 67mg, 134mg, 200mg	1	
fenofibrate micronized CAPS 130mg QL (30 caps / 30 days)	1	QL ST
fenofibric acid TABS 35mg QL (60 tabs / 30 days)	1	QL ST
fenofibric acid TABS 105mg QL (30 tabs / 30 days)	1	QL ST
gemfibrozil (generic of LOPID) TABS 600mg	1	
LIPOFEN CAPS 50mg QL (60 caps / 30 days)	3	QL ST
LIPOFEN CAPS 150mg QL (30 caps / 30 days)	3	QL ST
LOPID TABS 600mg	3	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
ATORVALIQ SUSP 20mg/5ml QL (600 mL / 30 days)	3	QL ST
atorvastatin calcium (generic of LIPITOR) TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	1	QL
CRESTOR TABS 5mg, 10mg, 20mg, 40mg QL (30 tabs / 30 days)	3	QL
EZALLOR SPRINKLE CPSP 5mg, 10mg, 20mg, 40mg QL (30 caps / 30 days)	3	QL ST
FLOLIPID SUSP 20mg/5ml, 40mg/5ml QL (300 mL / 30 days)	3	QL ST
fluvastatin sodium CAPS 20mg, 40mg QL (60 caps / 30 days)	1	QL ST
fluvastatin sodium (generic of LESCOL XL) TB24 80mg QL (30 tabs / 30 days)	1	QL ST
LESCOL XL TB24 80mg QL (30 tabs / 30 days)	3	QL ST

Drug Name	Drug Requirements/ Tier	Limits
LIPITOR TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	3	QL
LIVALO TABS 1mg, 2mg, 4mg QL (30 tabs / 30 days)	3	QL ST
lovastatin TABS 10mg, 20mg, 40mg QL (60 tabs / 30 days)	1	QL
pitavastatin calcium (generic of LIVALO) TABS 1mg, 2mg, 4mg QL (30 tabs / 30 days)	1	QL ST
pravastatin sodium TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	1	QL
rosuvastatin calcium (generic of CRESTOR) TABS 5mg, 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
simvastatin TABS 5mg, 80mg QL (30 tabs / 30 days)	1	QL
simvastatin (generic of ZOCOR) TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
ZOCOR TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	3	QL
ZYPITAMAG TABS 2mg, 4mg QL (30 tabs / 30 days)	3	QL ST
ANTILIPEMICS, MISCELLANEOUS		
cholestyramine (generic of QUESTRAN) PACK 4gm; POWD 4gm/dose	1	
cholestyramine light PACK 4gm	1	
cholestyramine light (generic of QUESTRAN LIGHT) POWD 4gm/dose	1	
colesevelam hcl (generic of WELCHOL) PACK 3.75gm; TABS 625mg	1	
COLESTID GRAN 5gm; TABS 1gm	3	

Drug Name	Tier	Requirements/ Limits
colestipol hcl (generic of COLESTID) GRAN 5gm; TABS 1gm	1	
colestipol hcl PACK 5gm	1	
EVKEEZA SOLN 345mg/2.3ml, 1200mg/8ml	4	NDS NM PA
ezetimibe (generic of ZETIA) TABS 10mg QL (30 tabs / 30 days)	1	QL
ezetimibe-simvastatin tab 10-10 mg (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
ezetimibe-simvastatin tab 10-20 mg (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
ezetimibe-simvastatin tab 10-40 mg (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
ezetimibe-simvastatin tab 10-80 mg (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
JUXTAPID CAPS 5mg, 10mg, 20mg, 30mg	4	NDS NM PA
LOVAZA CAP 1GM	3	PA
NEXLETOL TABS 180mg QL (30 tabs / 30 days)	2	QL
NEXLIZET TAB 180/10MG QL (30 tabs / 30 days)	2	QL
niacin (antihyperlipidemic) TABS 500mg	1	
niacin (antihyperlipidemic) TBCR 500mg, 750mg, 1000mg QL (60 tabs / 30 days)	1	QL
niacor TABS 500mg	1	
omega-3-acid ethyl esters cap 1 gm (generic of LOVAZA)	1	PA
prevalite PACK 4gm	1	
prevalite (generic of QUESTRAN LIGHT) POWD 4gm/dose	1	
QUESTRAN PACK 4gm; POWD 4gm/dose	3	
QUESTRAN LIGHT POWD 4gm/dose	3	
REPATHA SOSY 140mg/ml QL (6 syringes / 28 days)	2	QL NM PA
REPATHA SURECLICK SOAJ 140mg/ml QL (6 autoinjectors / 28 days)	2	QL NM PA
VASCEPA CAPS .5gm, 1gm	2	
VYTORIN TAB 10-10MG QL (30 tabs / 30 days)	3	QL
VYTORIN TAB 10-20MG QL (30 tabs / 30 days)	3	QL
VYTORIN TAB 10-40MG QL (30 tabs / 30 days)	3	QL
VYTORIN TAB 10-80MG QL (30 tabs / 30 days)	3	QL
WELCHOL PACK 3.75gm; TABS 625mg	3	
ZETIA TABS 10mg QL (30 tabs / 30 days)	3	QL
BETA-BLOCKER/DIURETIC COMBINATIONS		
atenolol & chlorthalidone tab 50-25 mg (generic of TENORETIC 50)	1	
atenolol & chlorthalidone tab 100-25 mg (generic of TENORETIC 100)	1	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	1	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	1	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	1	
metoprolol & hydrochlorothiazide tab 50-25 mg	1	
metoprolol & hydrochlorothiazide tab 100-25 mg	1	
metoprolol & hydrochlorothiazide tab 100-50 mg	1	
TENORETIC TAB 50	3	
TENORETIC TAB 100	3	
BETA-BLOCKERS		
acebutolol hcl CAPS 200mg, 400mg	1	

Drug Name	Drug Tier	Requirements/ Limits
atenolol (generic of TENORMIN) TABS 25mg, 50mg, 100mg	1	
betaxolol hcl TABS 10mg, 20mg	1	
bisoprolol fumarate TABS 2.5mg, 5mg, 10mg	1	
BYSTOLIC TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	3	QL
BYSTOLIC TABS 20mg QL (60 tabs / 30 days)	3	QL
carvedilol (generic of COREG) TABS 3.125mg, 6.25mg, 12.5mg, 25mg	1	
carvedilol phosphate (generic of COREG CR) CP24 10mg, 20mg, 40mg, 80mg QL (30 caps / 30 days)	1	QL
COREG TABS 3.125mg, 6.25mg, 12.5mg, 25mg	3	
COREG CR CP24 10mg, 20mg, 40mg, 80mg QL (30 caps / 30 days)	4	NDS QL
INDERAL LA CP24 60mg, 80mg, 120mg, 160mg	4	NDS
KAPSPARGO SPRINKLE CS24 25mg, 50mg, 100mg, 200mg	3	
labetalol hcl SOLN 5mg/ml; TABS 100mg, 200mg, 300mg, 400mg	1	
LOPRESSOR SOLN 10mg/ml; TABS 12.5mg, 50mg, 100mg	3	
metoprolol succinate (generic of TOPROL XL) TB24 25mg, 50mg, 100mg, 200mg	1	
metoprolol tartrate SOLN 5mg/5ml; TABS 25mg, 37.5mg, 75mg	1	
metoprolol tartrate (generic of LOPRESSOR) TABS 50mg, 100mg	1	
nadolol TABS 20mg, 40mg, 80mg	1	
nebivolol hcl (generic of BYSTOLIC) TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	1	QL
nebivolol hcl (generic of BYSTOLIC) TABS 20mg QL (60 tabs / 30 days)	1	QL
pindolol TABS 5mg, 10mg	1	
propranolol hcl (generic of INDERAL LA) CP24 60mg, 80mg, 120mg, 160mg	1	
propranolol hcl SOLN 1mg/ml, 20mg/5ml, 40mg/5ml; TABS 10mg, 20mg, 40mg, 60mg, 80mg	1	
TENORMIN TABS 25mg, 50mg, 100mg	3	
timolol maleate TABS 5mg, 10mg, 20mg	1	
TOPROL XL TB24 25mg, 50mg, 100mg, 200mg	3	
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate (generic of NORVASC) TABS 2.5mg, 5mg, 10mg	1	
CARDAMYST SOLN 70mg/dose	4	NDS
CARDIZEM TABS 30mg, 60mg, 120mg	3	
CARDIZEM CD CP24 120mg	3	
CARDIZEM CD CP24 180mg, 240mg, 300mg, 360mg	4	NDS
CARDIZEM LA TB24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	3	
cartia xt (generic of CARDIZEM CD) CP24 120mg, 180mg, 240mg, 300mg	1	
dilt-xr CP24 120mg, 180mg, 240mg	1	
diltiazem hcl CP12 60mg, 90mg, 120mg; CP24 120mg, 180mg, 240mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TABS 90mg	1	

Drug Name	Drug Tier	Requirements/ Limits
diltiazem hcl (generic of CARDIZEM) TABS 30mg, 60mg, 120mg	1	
diltiazem hcl (generic of CARDIZEM LA) TB24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
diltiazem hcl coated beads (generic of CARDIZEM CD) CP24 120mg, 180mg, 240mg, 300mg, 360mg	1	
diltiazem hcl extended release beads (generic of TIAZAC) CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
felodipine TB24 2.5mg, 5mg, 10mg	1	
isradipine CAPS 2.5mg, 5mg	1	
KATERZIA SUSP 1mg/ml	3	
matzim la (generic of CARDIZEM LA) TB24 180mg, 240mg, 300mg, 360mg, 420mg	1	
nicardipine hcl CAPS 20mg, 30mg	1	
nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9% (generic of NICARDIPINE HYDROCHLORIDE)	1	
nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9% (generic of NICARDIPINE HYDROCHLORIDE)	1	
NICARDIPINE SOL 20/200ML	3	
NICARDIPINE SOL 40/200ML	3	
nifedipine (generic of PROCARDIA XL) TB24 30mg, 60mg	1	
nifedipine TB24 30mg, 60mg, 90mg	1	
nimodipine CAPS 30mg	1	
nimodipine SOLN 60mg/20ml	4	NDS
nisoldipine (generic of SULAR) TB24 8.5mg, 17mg	1	
nisoldipine TB24 34mg	1	
NORLIQVA SOLN 1mg/ml	3	
NORVASC TABS 2.5mg, 5mg, 10mg	3	
NYMALIZE SOLN 6mg/ml	4	NDS
PROCARDIA XL TB24 30mg, 60mg	3	
SDAMLO SOLR 2.5mg, 5mg, 10mg	4	NDS QL PA
QL (30 bottles / 30 days)		
SULAR TB24 8.5mg, 17mg, 34mg	3	
tiadylt er (generic of TIAZAC) CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
TIAZAC CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	3	
verapamil hcl CP24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; SOLN 2.5mg/ml; TABS 40mg, 80mg, 120mg; TBCR 120mg, 180mg, 240mg	1	
DIURETICS		
acetazolamide CP12 500mg; TABS 125mg, 250mg	1	
amiloride & hydrochlorothiazide tab 5-50 mg	1	
amiloride hcl TABS 5mg	1	
bumetanide SOLN .25mg/ml; TABS 1mg, 2mg	1	
bumetanide (generic of BUMEX) TABS .5mg	1	
chlorthalidone TABS 25mg, 50mg	1	
dichlorphenamide (generic of KEVEYIS) TABS 50mg	4	NDS NM PA
DIURIL SUSP 250mg/5ml	3	
DYRENIUM CAPS 50mg, 100mg	3	
EDECRIN TABS 25mg	4	NDS
ENBUMYST SOLN .5mg/0.1ml	4	NDS
ethacrynic acid (generic of EDECRIN) TABS 25mg	1	
FUROSCIX CTKT 80mg/10ml	4	NDS

Drug Name	Tier	Requirements/ Limits
furosemide SOLN 10mg/ml, 40mg/5ml	1	
furosemide (generic of LASIX) TABS 20mg, 40mg, 80mg	1	
furosemide inj SOLN 10mg/ml	1	
HEMICLOR TABS 12.5mg	3	
hydrochlorothiazide CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1	
indapamide TABS 1.25mg, 2.5mg	1	
INZIRQO SUSR 10mg/ml QL (320 mL / 30 days)	3	QL
KEVEYIS TABS 50mg	4	NDS NM PA
LASIX TABS 20mg, 40mg, 80mg	3	
LASIX ONYU CTKT 80mg/2.67ml	4	NDS
methazolamide TABS 25mg, 50mg	1	
metolazone TABS 2.5mg, 5mg, 10mg	1	
ormalvi (generic of KEVEYIS) TABS 50mg	4	NDS NM PA
SOAANZ TABS 40mg	3	
spironolactone & hydrochlorothiazide tab 25-25 mg	1	
THALITONE TABS 15mg	3	
torsemide TABS 5mg, 10mg, 20mg, 100mg	1	
triamterene (generic of DYRENIUM) CAPS 50mg, 100mg	1	
triamterene & hydrochlorothiazide cap 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 75-50 mg	1	
MISCELLANEOUS		
ADRENALIN SOLN 1mg/ml	3	

Drug Name	Tier	Requirements/ Limits
aliskiren fumarate (generic of TEKTURNA) TABS 150mg, 300mg QL (30 tabs / 30 days)	1	QL
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg	1	
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg	1	
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg	1	
amlodipine besylate-atorvastatin calcium tab 5-10 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 5-20 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 5-40 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 5-80 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 10-10 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 10-20 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 10-40 mg (generic of CADUET)	1	
amlodipine besylate-atorvastatin calcium tab 10-80 mg (generic of CADUET)	1	
ATTRUBY TBPK 356mg QL (112 tabs / 28 days)	4	NDS QL NM PA
BIDIL TAB	3	
CADUET TAB 5-10MG	3	
CADUET TAB 5-20MG	3	
CADUET TAB 5-40MG	3	
CADUET TAB 5-80MG	3	
CADUET TAB 10-10MG	3	
CADUET TAB 10-20MG	3	
CADUET TAB 10-40MG	3	

Drug Name	Tier	Requirements/ Limits
CADUET TAB 10-80MG	3	
CAMZYOS CAPS 2.5mg, 5mg, 10mg, 15mg QL (30 caps / 30 days)	4	NDS QL NM PA
clonidine (generic of CATAPRES-TTS-1) PTWK .1mg/24hr	1	
clonidine (generic of CATAPRES-TTS-2) PTWK .2mg/24hr	1	
clonidine (generic of CATAPRES-TTS-3) PTWK .3mg/24hr	1	
clonidine TB24 .17mg	1	
clonidine hcl TABS .1mg, .2mg, .3mg	1	
CORLANOR SOLN 5mg/5ml QL (450 mL / 30 days)	2	QL
CORLANOR TABS 5mg, 7.5mg QL (60 tabs / 30 days)	3	QL
DEMSER CAPS 250mg	4	NDS NM PA
digoxin SOLN .05mg/ml	1	
digoxin (generic of LANOXIN) SOLN .25mg/ml; TABS 62.5mcg	1	
digoxin (generic of LANOXIN) TABS 125mcg, 250mcg QL (30 tabs / 30 days)	1	QL
droxidopa (generic of NORTHERA) CAPS 100mg QL (90 caps / 30 days)	1	QL NM PA
droxidopa (generic of NORTHERA) CAPS 200mg, 300mg QL (180 caps / 30 days)	4	NDS QL NM PA
epinephrine (generic of ADRENALIN) SOLN 1mg/ml	1	
guanfacine hcl TABS 1mg, 2mg PA applies if 65 years and older	2	PA
hydralazine hcl SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg	1	
INPEFA TABS 200mg, 400mg QL (30 tabs / 30 days)	3	QL
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (generic of BIDIL)	1	
ivabradine hcl (generic of CORLANOR) TABS 5mg, 7.5mg QL (60 tabs / 30 days)	1	QL
JAVADIN SOLN .02mg/ml	3	
LANOXIN SOLN .25mg/ml; TABS 62.5mcg	3	
LANOXIN TABS 125mcg, 250mcg QL (30 tabs / 30 days)	3	QL
LANOXIN PEDIATRIC SOLN .1mg/ml	3	
LODOCO TABS .5mg QL (30 tabs / 30 days)	3	QL PA
methyldopa TABS 250mg, 500mg PA applies if 65 years and older	3	PA
metyrosine CAPS 250mg	4	NDS NM PA
midodrine hcl TABS 2.5mg, 5mg, 10mg	1	
minoxidil TABS 2.5mg, 10mg	1	
MYQORZO TABS 5mg, 10mg, 15mg, 20mg QL (30 tabs / 30 days)	4	NDS QL NM PA
NEXICLON XR TB24 .17mg	3	
NORTHERA CAPS 100mg QL (90 caps / 30 days)	4	NDS QL NM PA
NORTHERA CAPS 200mg, 300mg QL (180 caps / 30 days)	4	NDS QL NM PA
phenoxybenzamine hcl CAPS 10mg	4	NDS PA
ranolazine TB12 500mg, 1000mg	1	
REDEMPLO SOSY 25mg/0.5ml QL (1 syringe / 90 days)	4	NDS QL NM PA
TEKTURNA TABS 150mg, 300mg QL (30 tabs / 30 days)	3	QL
TRYNGOLZA SOAJ 80mg/0.8ml QL (1 autoinjector / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
TRYVIO TABS 12.5mg QL (30 tabs / 30 days)	3	QL PA
VERQUVO TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	2	QL PA
VYNDAMAX CAPS 61mg QL (30 caps / 30 days)	4	NDS QL NM PA
VYNDAQEL CAPS 20mg QL (120 caps / 30 days)	4	NDS QL NM PA
NITRATES		
isosorbide dinitrate TABS 5mg, 10mg, 20mg, 30mg	1	
isosorbide dinitrate TABS 40mg	1	ST
ISOSORBIDE MONONITRATE TABS 10mg, 20mg	3	
isosorbide mononitrate TB24 30mg, 60mg, 120mg	1	
NITRO-BID OINT 2%	2	
NITRO-DUR PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	3	
NITRO-DUR PT24 .3mg/hr, .8mg/hr	4	NDS
nitroglycerin PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	1	
nitroglycerin (generic of NITROLINGUAL) SOLN .4mg/spray	1	
nitroglycerin (generic of NITROSTAT) SUBL .3mg, .4mg, .6mg	1	
NITROLINGUAL SOLN .4mg/spray	3	
NITROSTAT SUBL .3mg, .4mg, .6mg	3	
PULMONARY ARTERIAL HYPERTENSION		
ADCIRCA TABS 20mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg QL (90 tabs / 30 days)	4	NDS QL NM PA
alyq (generic of ADCIRCA) TABS 20mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ambrisentan (generic of LETAIRIS) TABS 5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
bosentan (generic of TRACLEER) TABS 62.5mg, 125mg QL (60 tabs / 30 days)	4	NDS QL NM PA
bosentan (generic of TRACLEER) TBSO 32mg QL (120 tabs / 30 days)	4	NDS QL NM PA
epoprostenol sodium (generic of VELETRI) SOLR .5mg, 1.5mg	4	NDS B/D NM
LETAIRIS TABS 5mg, 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
OPSUMIT TABS 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
OPSYNVI TAB 10-20MG QL (30 tabs / 30 days)	4	NDS QL NM PA
OPSYNVI TAB 10-40MG QL (30 tabs / 30 days)	4	NDS QL NM PA
ORENITRAM TBCR .25mg, 1mg, 2.5mg, 5mg	4	NDS NM PA
ORENITRAM TBCR .125mg	3	NM PA
ORENITRAM TAB MONTH 1	4	NDS NM PA
ORENITRAM TAB MONTH 2	4	NDS NM PA
ORENITRAM TAB MONTH 3	4	NDS NM PA
REMODULIN SOLN 8mg/20ml, 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	4	NDS NM PA
REVATIO SOLN 10mg/12.5ml	4	NDS NM PA
REVATIO TABS 20mg QL (360 tabs / 30 days)	4	NDS QL NM PA
sildenafil citrate (pulmonary hypertension) (generic of REVATIO) SOLN 10mg/12.5ml	4	NDS NM PA
sildenafil citrate (pulmonary hypertension) SUSR 10mg/ml QL (784 mL / 30 days)	4	NDS QL NM PA
sildenafil citrate (pulmonary hypertension) (generic of REVATIO) TABS 20mg QL (360 tabs / 30 days)	1	QL NM PA
tadalafil (pulmonary hypertension) (generic of ADCIRCA) TABS 20mg QL (60 tabs / 30 days)	1	QL NM PA

Drug Name	Tier	Requirements/ Limits
TADLIQ SUSP 20mg/5ml QL (300 mL / 30 days)	4	NDS QL NM PA
TRACLEER TABS 62.5mg, 125mg QL (60 tabs / 30 days)	4	NDS QL NM PA
TRACLEER TBSO 32mg QL (120 tabs / 30 days)	4	NDS QL NM PA
treprostinil SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	4	NDS NM PA
TYVASO SOLN .6mg/ml	4	NDS NM PA
TYVASO DPI INSTITUTIONAL POWD 80mcg QL (112 cartridges / 28 days)	4	NDS QL NM PA
TYVASO DPI MAINTENANCE KI POWD 16mcg, 32mcg, 48mcg, 64mcg, 80mcg QL (112 cartridges / 28 days)	4	NDS QL NM PA
TYVASO DPI POW 16-32-48 QL (252 cartridges / 28 days)	4	NDS QL NM PA
TYVASO DPI POW MAIN KIT 32-64MCG QL (224 cartridges / 28 days)	4	NDS QL NM PA
TYVASO DPI POW MAIN KIT 48-64MCG QL (224 cartridges / 28 days)	4	NDS QL NM PA
TYVASO REFILL KIT SOLN .6mg/ml	4	NDS NM PA
TYVASO STARTER KIT SOLN .6mg/ml	4	NDS NM PA
UPTRAVI SOLR 1800mcg	4	NDS NM PA
UPTRAVI TABS 200mcg QL (140 tabs / 28 days)	4	NDS QL NM PA
UPTRAVI TABS 400mcg, 600mcg, 800mcg, 1000mcg, 1200mcg, 1400mcg, 1600mcg QL (60 tabs / 30 days)	4	NDS QL NM PA
UPTRAVI PACK TAB 200/800 QL (1 pack / 28 days)	4	NDS QL NM PA
VELETRI SOLR .5mg, 1.5mg	4	NDS B/D NM
WINREVAIR KIT 45mg, 60mg QL (2 vials / 21 days)	4	NDS QL NM PA
WINREVAIR INJ 45MG QL (2 vials / 21 days)	4	NDS QL NM PA
WINREVAIR INJ 60MG QL (2 vials / 21 days)	4	NDS QL NM PA
YUTREPIA CAPS 26.5mcg, 53mcg, 79.5mcg QL (140 caps / 28 days)	4	NDS QL NM PA
YUTREPIA CAPS 106mcg QL (224 caps / 28 days)	4	NDS QL NM PA
CENTRAL NERVOUS SYSTEM		
ANTIANXIETY		
alprazolam (generic of XANAX) TABS .25mg, .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
alprazolam (generic of XANAX XR) TB24 2mg QL (90 tabs / 30 days) PA applies if 65 years and older	1	QL PA
alprazolam TB24 3mg QL (90 tabs / 30 days) PA applies if 65 years and older	1	QL PA
alprazolam TB24 .5mg, 1mg QL (150 tabs / 30 days) PA applies if 65 years and older	1	QL PA
alprazolam TBDP .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
alprazolam TBDP .25mg QL (120 tabs / 30 days)	1	QL
ALPRAZOLAM INTENSOL CONC 1mg/ml QL (300 mL / 30 days)	3	QL
ATIVAN SOLN 2mg/ml, 4mg/ml	3	
ATIVAN TABS .5mg, 1mg, 2mg QL (150 tabs / 30 days)	4	NDS QL
BUCAPSOL CAPS 7.5mg, 10mg QL (60 caps / 30 days)	4	NDS QL

Drug Name	Tier	Requirements/ Limits
BUCAPSOL CAPS 15mg QL (120 caps / 30 days)	4	NDS QL
buspirone hcl TABS 5mg, 7.5mg, 10mg, 15mg, 30mg	1	
chlordiazepoxide hcl CAPS 5mg, 10mg, 25mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
fluvoxamine maleate CP24 100mg, 150mg QL (60 caps / 30 days)	1	QL
fluvoxamine maleate TABS 25mg, 50mg, 100mg	1	
lorazepam CONC 2mg/ml QL (150 mL / 30 days)	1	QL
lorazepam (generic of ATIVAN) SOLN 4mg/ml, 20mg/10ml	1	
lorazepam (generic of ATIVAN) TABS .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
lorazepam intensol CONC 2mg/ml QL (150 mL / 30 days)	1	QL
LOREEV XR CS24 1mg, 1.5mg, 2mg QL (150 caps / 30 days) PA applies if 65 years and older	3	QL PA
LOREEV XR CS24 3mg QL (90 caps / 30 days) PA applies if 65 years and older	3	QL PA
oxazepam CAPS 10mg, 15mg, 30mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
XANAX TABS .25mg, .5mg, 1mg, 2mg QL (150 tabs / 30 days)	3	QL
XANAX XR TB24 2mg, 3mg QL (90 tabs / 30 days) PA applies if 65 years and older	3	QL PA
XANAX XR TB24 .5mg, 1mg QL (150 tabs / 30 days) PA applies if 65 years and older	3	QL PA
ANTIDEMENTIA		
ARICEPT TABS 5mg QL (30 tabs / 30 days)	3	QL
ARICEPT TABS 10mg, 23mg	3	
donepezil hydrochloride (generic of ARICEPT) TABS 5mg QL (30 tabs / 30 days)	1	QL
donepezil hydrochloride (generic of ARICEPT) TABS 10mg, 23mg	1	
donepezil hydrochloride TBDP 5mg QL (30 tabs / 30 days)	1	QL
donepezil hydrochloride TBDP 10mg	1	
EXELON PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr QL (30 patches / 30 days)	3	QL
galantamine hydrobromide CP24 8mg, 16mg, 24mg QL (30 caps / 30 days)	1	QL
galantamine hydrobromide SOLN 4mg/ml QL (200 mL / 30 days)	1	QL
galantamine hydrobromide TABS 4mg, 8mg, 12mg QL (60 tabs / 30 days)	1	QL
LEQEMBI IQLIK SOAJ 360mg/1.8ml QL (4 pens / 28 days)	4	NDS QL NM PA
memantine hcl CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg PA applies if 29 years and younger	1	PA
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack PA applies if 29 years and younger	1	PA
memantine hcl-donepezil hcl cap er 24hr 14-10 mg (generic of NAMZARIC)	1	

Drug Name	Drug Tier	Requirements/ Limits
memantine hcl-donepezil hcl cap er 24hr 21-10 mg (generic of NAMZARIC)	1	
memantine hcl-donepezil hcl cap er 24hr 28-10 mg (generic of NAMZARIC)	1	
NAMZARIC CAP 7-10MG	3	
NAMZARIC CAP 14-10MG	3	
NAMZARIC CAP 21-10MG	3	
NAMZARIC CAP 28-10MG	3	
rivastigmine (generic of EXELON) PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr QL (30 patches / 30 days)	1	QL
rivastigmine tartrate CAPS 1.5mg, 3mg, 4.5mg, 6mg QL (60 caps / 30 days)	1	QL
ZUNVEYL TBEC 5mg, 10mg, 15mg QL (60 tabs / 30 days)	3	QL PA
ANTIDEPRESSANTS		
amitriptyline hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg PA applies if 65 years and older	2	PA
amoxapine TABS 25mg, 50mg, 100mg, 150mg PA applies if 65 years and older	2	PA
ANAFRANIL CAPS 25mg, 50mg, 75mg	4	NDS PA
APLENZIN TB24 174mg QL (60 tabs / 30 days)	4	NDS QL ST
APLENZIN TB24 348mg, 522mg QL (30 tabs / 30 days)	4	NDS QL ST
AUVELITY TAB 45-105MG QL (60 tabs / 30 days)	3	QL PA
bupropion hcl TABS 75mg, 100mg	1	
bupropion hcl (generic of WELLBUTRIN SR) TB12 100mg, 150mg, 200mg QL (60 tabs / 30 days)	1	QL
bupropion hcl (generic of WELLBUTRIN XL) TB24 150mg QL (60 tabs / 30 days)	1	QL
bupropion hcl (generic of WELLBUTRIN XL) TB24 300mg QL (30 tabs / 30 days)	1	QL
bupropion hcl TB24 450mg QL (30 tabs / 30 days)	1	QL ST
CELEXA TABS 10mg, 20mg, 40mg	3	
CITALOPRAM HYDROBROMIDE CAPS 30mg QL (30 caps / 30 days)	3	QL ST
citalopram hydrobromide SOLN 10mg/5ml	1	
citalopram hydrobromide (generic of CELEXA) TABS 10mg, 20mg, 40mg	1	
clomipramine hcl (generic of ANAFRANIL) CAPS 25mg, 50mg, 75mg	3	PA
desipramine hcl (generic of NORPRAMIN) TABS 10mg, 25mg PA applies if 65 years and older	3	PA
desipramine hcl TABS 50mg, 75mg, 100mg, 150mg PA applies if 65 years and older	3	PA
DESVENLAFAXINE ER TB24 50mg, 100mg QL (30 tabs / 30 days)	3	QL
desvenlafaxine succinate (generic of PRISTIQ) TB24 25mg, 50mg, 100mg QL (30 tabs / 30 days)	1	QL
doxepin hcl CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml PA applies if 65 years and older	2	PA
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg QL (60 caps / 30 days)	3	QL PA

Drug Name	Drug Tier	Requirements/ Limits
duloxetine hcl CPEP 20mg, 30mg, 40mg, 60mg QL (60 caps / 30 days)	1	QL
EFFEXOR XR CP24 37.5mg, 75mg, 150mg	3	
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr QL (30 patches / 30 days)	4	NDS QL PA
ESCITALOPRAM OXALATE CAPS 15mg QL (30 caps / 30 days)	3	QL
escitalopram oxalate SOLN 5mg/5ml	1	
escitalopram oxalate (generic of LEXAPRO) TABS 5mg, 10mg, 20mg	1	
EXXUA TB24 18.2mg, 36.3mg, 54.5mg, 72.6mg QL (30 tabs / 30 days)	4	NDS QL PA
EXXUA TITRATION PACK TB24 18.2mg QL (2 packs / year)	4	NDS QL PA
FETZIMA CP24 20mg, 40mg QL (60 caps / 30 days)	3	QL PA
FETZIMA CP24 80mg, 120mg QL (30 caps / 30 days)	3	QL PA
FETZIMA CAP TITRATIO QL (2 packs / year)	3	QL PA
fluoxetine hcl CAPS 10mg, 20mg, 40mg; SOLN 20mg/5ml	1	
fluoxetine hcl CPDR 90mg QL (4 caps / 28 days)	1	QL
fluoxetine hcl TABS 10mg, 60mg QL (30 tabs / 30 days)	1	QL
fluoxetine hcl TABS 20mg QL (120 tabs / 30 days)	1	QL
fluoxetine hcl (pmdd) TABS 10mg QL (30 tabs / 30 days) (generic of SARAFEM)	1	QL
fluoxetine hcl (pmdd) TABS 20mg QL (120 tabs / 30 days) (generic of SARAFEM)	1	QL
FORFIVO XL TB24 450mg QL (30 tabs / 30 days)	3	QL ST
imipramine hcl TABS 10mg, 25mg, 50mg PA applies if 65 years and older	1	PA
imipramine pamoate CAPS 75mg, 100mg, 125mg, 150mg PA applies if 65 years and older	3	PA
LEXAPRO TABS 5mg, 10mg, 20mg	3	
MARPLAN TABS 10mg QL (180 tabs / 30 days)	3	QL
mirtazapine TABS 7.5mg, 45mg	1	
mirtazapine (generic of REMERON) TABS 15mg, 30mg	1	
mirtazapine (generic of REMERON SOLTAB) TBDP 15mg, 30mg, 45mg	1	
NARDIL TABS 15mg	3	
nefazodone hcl TABS 50mg, 100mg, 150mg, 200mg, 250mg	1	
NORPRAMIN TABS 10mg, 25mg PA applies if 65 years and older	3	PA
nortriptyline hcl (generic of PAMELOR) CAPS 10mg, 25mg, 50mg, 75mg	1	
nortriptyline hcl SOLN 10mg/5ml	3	
PARNATE TABS 10mg	4	NDS
paroxetine hcl SUSP 10mg/5ml QL (900 mL / 30 days) PA applies if 65 years and older	3	QL PA
paroxetine hcl (generic of PAXIL) TABS 10mg, 20mg, 30mg, 40mg PA applies if 65 years and older	1	PA

Drug Name	Drug Requirements/ Tier	Limits
paroxetine hcl (generic of PAXIL CR) TB24 12.5mg, 25mg, 37.5mg	3	QL PA
QL (60 tabs / 30 days)		
PA applies if 65 years and older		
PAXIL TABS 10mg, 20mg, 30mg, 40mg	3	PA
PA applies if 65 years and older		
PAXIL CR TB24 12.5mg, 25mg, 37.5mg	3	QL PA
QL (60 tabs / 30 days)		
PA applies if 65 years and older		
perphenazine-amitriptyline tab 2-10 mg	2	PA
PA applies if 65 years and older		
perphenazine-amitriptyline tab 2-25 mg	2	PA
PA applies if 65 years and older		
perphenazine-amitriptyline tab 4-10 mg	2	PA
PA applies if 65 years and older		
perphenazine-amitriptyline tab 4-25 mg	2	PA
PA applies if 65 years and older		
perphenazine-amitriptyline tab 4-50 mg	2	PA
PA applies if 65 years and older		
phenelzine sulfate (generic of NARDIL) TABS 15mg	1	
PRISTIQ TB24 25mg, 50mg, 100mg	3	QL
QL (30 tabs / 30 days)		
protriptyline hcl TABS 5mg, 10mg	3	
RALDESY SOLN 10mg/ml	3	QL PA
QL (1800 mL / 30 days)		
REMERON TABS 15mg, 30mg	3	
REMERON SOLTAB TBDP 15mg, 30mg, 45mg	3	

Drug Name	Drug Requirements/ Tier	Limits
sertraline hcl (generic of SERTRALINE HYDROCHLORIDE) CAPS 150mg, 200mg	1	QL ST
QL (30 caps / 30 days)		
sertraline hcl (generic of ZOLOFT) CONC 20mg/ml; TABS 25mg, 50mg, 100mg	1	
SERTRALINE HYDROCHLORIDE CAPS 150mg, 200mg	3	QL ST
QL (30 caps / 30 days)		
SPRAVATO SOL 56MG DOS	4	NDS NM PA
SPRAVATO SOL 84MG DOS	4	NDS NM PA
tranylcypromine sulfate (generic of PARNATE) TABS 10mg	1	
trazodone hcl TABS 50mg, 100mg, 150mg, 300mg	1	
trimipramine maleate CAPS 25mg, 50mg	3	QL
QL (120 caps / 30 days)		
trimipramine maleate CAPS 100mg	3	QL
QL (60 caps / 30 days)		
TRINTELLIX TABS 5mg, 10mg, 20mg	3	QL PA
QL (30 tabs / 30 days)		
VENLAFAXINE BESYLATE ER TB24 112.5mg	3	QL ST
QL (30 tabs / 30 days)		
venlafaxine hcl (generic of EFFEXOR XR) CP24 37.5mg, 75mg, 150mg	1	
venlafaxine hcl TABS 25mg, 37.5mg, 50mg, 75mg, 100mg; TB24 37.5mg, 75mg, 150mg	1	
venlafaxine hcl TB24 225mg	1	QL ST
QL (30 tabs / 30 days)		
VIIBRYD TABS 10mg, 20mg, 40mg	3	QL
QL (30 tabs / 30 days)		
vilazodone hcl (generic of VIIBRYD) TABS 10mg, 20mg, 40mg	1	QL
QL (30 tabs / 30 days)		

Drug Name	Tier	Requirements/ Limits
WELLBUTRIN SR TB12 100mg, 150mg, 200mg QL (60 tabs / 30 days)	3	QL ST
WELLBUTRIN XL TB24 150mg QL (60 tabs / 30 days)	4	NDS QL ST
WELLBUTRIN XL TB24 300mg QL (30 tabs / 30 days)	4	NDS QL ST
ZOLOFT CONC 20mg/ml; TABS 25mg, 50mg, 100mg	3	
ZURZUVAE CAPS 20mg, 25mg QL (28 caps / 14 days)	4	NDS QL NM PA
ZURZUVAE CAPS 30mg QL (14 caps / 14 days)	4	NDS QL NM PA
ANTIPARKINSONIAN AGENTS		
amantadine hcl CAPS 100mg QL (120 caps / 30 days)	1	QL
amantadine hcl SOLN 50mg/5ml; TABS 100mg	1	
APOKYN SOCT 30mg/3ml QL (20 cartridges / 30 days)	4	NDS QL NM PA
apomorphine hydrochloride SOCT 30mg/3ml QL (20 cartridges / 30 days)	4	NDS QL NM PA
AZILECT TABS .5mg, 1mg QL (30 tabs / 30 days)	4	NDS QL
benztropine mesylate SOLN 1mg/ml	1	
benztropine mesylate TABS .5mg, 1mg, 2mg PA applies if 65 years and older	1	PA
bromocriptine mesylate (generic of PARLODEL) CAPS 5mg; TABS 2.5mg	1	
carb/levo orally disintegrating tab 10-100mg	1	
carb/levo orally disintegrating tab 25-100mg	1	
carb/levo orally disintegrating tab 25-250mg	1	
carbidopa (generic of LODOSYN) TABS 25mg	1	
carbidopa & levodopa cap er 23.75-95 mg	1	
carbidopa & levodopa cap er 36.25-145 mg	1	
carbidopa & levodopa cap er 48.75-195 mg	1	
carbidopa & levodopa cap er 61.25-245 mg	1	
carbidopa & levodopa tab 10-100 mg (generic of SINEMET)	1	
carbidopa & levodopa tab 25-100 mg (generic of SINEMET)	1	
carbidopa & levodopa tab 25-250 mg	1	
carbidopa & levodopa tab er 25-100 mg	1	
carbidopa & levodopa tab er 50-200 mg	1	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	1	
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	1	
carbidopa-levodopa-entacapone tabs 25-100-200 mg	1	
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	1	
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	1	
carbidopa-levodopa-entacapone tabs 50-200-200 mg	1	
CREXONT CAP 35-140MG	3	ST
CREXONT CAP 52.5-210	3	ST
CREXONT CAP 70-280MG	3	ST
CREXONT CAP 87.5-350	3	ST
DHIVY TAB 25-100MG	3	
DUOPA SUS 4.63-20	4	NDS B/D NM
entacapone TABS 200mg	1	
GOCOVRI CP24 68.5mg QL (30 caps / 30 days)	4	NDS QL NM PA
GOCOVRI CP24 137mg QL (60 caps / 30 days)	4	NDS QL NM PA

Drug Name	Drug Tier	Requirements/ Limits
INBRIJA CAPS 42mg QL (300 caps / 30 days)	4	NDS QL NM PA
LODOSYN TABS 25mg	4	NDS
NEUPRO PT24 1mg/24hr, 2mg/24hr, 3mg/24hr, 4mg/24hr, 6mg/24hr, 8mg/24hr	3	PA
NOURIANZ TABS 20mg, 40mg QL (30 tabs / 30 days)	4	NDS QL NM
ONAPGO SOCT 98mg/20ml QL (30 cartridges / 30 days)	4	NDS QL NM PA
ONGENTYS CAPS 25mg, 50mg QL (30 caps / 30 days)	3	QL PA
PARLODEL CAPS 5mg; TABS 2.5mg	3	
pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg; TB24 .375mg, .75mg, 1.5mg, 2.25mg, 3mg, 3.75mg, 4.5mg	1	
rasagiline mesylate (generic of AZILECT) TABS .5mg, 1mg QL (30 tabs / 30 days)	1	QL
ropinirole hydrochloride TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg; TB24 2mg, 4mg, 6mg, 8mg, 12mg	1	
RYTARY CAP 95MG	3	ST
RYTARY CAP 145MG	3	ST
RYTARY CAP 195MG	3	ST
RYTARY CAP 245MG	3	ST
selegiline hcl CAPS 5mg; TABS 5mg	1	
SINEMET TAB 10-100MG	3	
SINEMET TAB 25-100MG	3	
trihexyphenidyl hcl SOLN .4mg/ml	2	
trihexyphenidyl hcl TABS 2mg, 5mg	1	
VYALEV INJ 12-240MG	4	NDS NM PA
XADAGO TABS 50mg, 100mg	4	NDS
ZELAPAR TBDP 1.25mg	4	NDS

Drug Name	Drug Tier	Requirements/ Limits
ANTIPSYCHOTICS		
ABILIFY TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	3	QL
ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml QL (1 syringe / 56 days)	4	NDS QL
ABILIFY MAINTENA PRSY 300mg, 400mg QL (1 syringe / 28 days)	4	NDS QL
ABILIFY MAINTENA SRER 300mg, 400mg QL (1 injection / 28 days)	4	NDS QL
ABILIFY MYCITE MAINTENANC TBPK 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	4	NDS QL PA
ABILIFY MYCITE STARTER KI TBPK 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	4	NDS QL PA
aripiprazole SOLN 1mg/ml QL (900 mL / 30 days)	1	QL
aripiprazole (generic of ABILIFY) TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	1	QL
aripiprazole TBDP 10mg, 15mg QL (60 tabs / 30 days)	1	QL ST
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml QL (1 syringe / 28 days)	4	NDS QL
ARISTADA PRSY 1064mg/3.9ml QL (1 syringe / 56 days)	4	NDS QL
ARISTADA INITIO PRSY 675mg/2.4ml	4	NDS
asenapine maleate (generic of SAPHRIS) SUBL 2.5mg, 5mg, 10mg QL (60 tabs / 30 days)	1	QL
CAPLYTA CAPS 10.5mg, 21mg, 42mg QL (30 caps / 30 days)	4	NDS QL

Drug Name	Drug Tier	Requirements/ Limits
chlorpromazine hcl CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	1	
clozapine (generic of CLOZARIL) TABS 25mg	1	
clozapine TABS 50mg	1	
clozapine (generic of CLOZARIL) TABS 100mg QL (270 tabs / 30 days)	1	QL
clozapine TABS 200mg QL (120 tabs / 30 days)	1	QL
clozapine TBDP 12.5mg, 25mg	1	PA
clozapine TBDP 100mg QL (270 tabs / 30 days)	1	QL PA
clozapine TBDP 150mg QL (180 tabs / 30 days)	1	QL PA
clozapine TBDP 200mg QL (120 tabs / 30 days)	1	QL PA
CLOZARIL TABS 25mg	3	
CLOZARIL TABS 100mg QL (270 tabs / 30 days)	4	NDS QL
COBENFY CAP 50-20MG QL (60 caps / 30 days)	4	NDS QL
COBENFY CAP 100-20MG QL (60 caps / 30 days)	4	NDS QL
COBENFY CAP 125-30MG QL (60 caps / 30 days)	4	NDS QL
COBENFY STRT CAP PACK QL (2 packs / year)	4	NDS QL
ERZOFRI SUSY 39mg/0.25ml QL (1 syringe / 28 days)	3	QL
ERZOFRI SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml QL (1 syringe / 28 days)	4	NDS QL
ERZOFRI SUSY 351mg/2.25ml QL (2 syringes / year)	4	NDS QL
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg QL (60 tabs / 30 days)	4	NDS QL PA
FANAPT PAK PACK A QL (2 packs / year)	3	QL PA
FANAPT PAK PACK B QL (2 packs / year)	3	QL PA
FANAPT PAK PACK C QL (2 packs / year)	3	QL PA
fluphenazine decanoate SOLN 25mg/ml	1	
fluphenazine hcl CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	1	
GEODON CAPS 20mg, 40mg, 60mg, 80mg QL (60 caps / 30 days)	4	NDS QL
GEODON SOLR 20mg QL (6 injections / 3 days)	3	QL
HALDOL DECANOATE 50 SOLN 50mg/ml	3	
HALDOL DECANOATE 100 SOLN 100mg/ml	3	
haloperidol TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	1	
haloperidol decanoate SOLN 50mg/ml, 100mg/ml	1	
haloperidol lactate CONC 2mg/ml; SOLN 5mg/ml	1	
INVEGA TB24 3mg, 9mg QL (30 tabs / 30 days)	3	QL
INVEGA TB24 6mg QL (60 tabs / 30 days)	3	QL
INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml QL (1 injection / 180 days)	4	NDS QL
INVEGA SUSTENNA SUSY 39mg/0.25ml QL (1 syringe / 28 days)	3	QL
INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml QL (1 syringe / 28 days)	4	NDS QL
INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml QL (1 syringe / 90 days)	4	NDS QL
LATUDA TABS 20mg, 40mg, 60mg, 120mg QL (30 tabs / 30 days)	4	NDS QL

Drug Name	Drug Tier	Requirements/ Limits
LATUDA TABS 80mg QL (60 tabs / 30 days)	4	NDS QL
loxapine succinate CAPS 5mg, 10mg, 25mg, 50mg	1	
lurasidone hcl (generic of LATUDA) TABS 20mg, 40mg, 60mg, 120mg QL (30 tabs / 30 days)	1	QL
lurasidone hcl (generic of LATUDA) TABS 80mg QL (60 tabs / 30 days)	1	QL
LYBALVI TAB 5-10MG QL (30 tabs / 30 days)	4	NDS QL
LYBALVI TAB 10-10MG QL (30 tabs / 30 days)	4	NDS QL
LYBALVI TAB 15-10MG QL (30 tabs / 30 days)	4	NDS QL
LYBALVI TAB 20-10MG QL (30 tabs / 30 days)	4	NDS QL
molindone hcl TABS 5mg, 10mg, 25mg	1	
NUPLAZID CAPS 34mg QL (30 caps / 30 days)	4	NDS QL NM PA
NUPLAZID TABS 10mg QL (30 tabs / 30 days)	4	NDS QL NM PA
olanzapine (generic of ZYPREXA) SOLR 10mg QL (3 vials / 1 day)	1	QL
olanzapine (generic of ZYPREXA) TABS 2.5mg, 5mg QL (60 tabs / 30 days)	1	QL
olanzapine TABS 7.5mg, 15mg QL (30 tabs / 30 days)	1	QL
olanzapine TABS 10mg QL (60 tabs / 30 days)	1	QL
olanzapine (generic of ZYPREXA) TABS 20mg QL (30 tabs / 30 days)	1	QL
olanzapine (generic of ZYPREXA ZYDIS) TBDP 5mg, 15mg, 20mg QL (30 tabs / 30 days)	1	QL ST
olanzapine (generic of ZYPREXA ZYDIS) TBDP 10mg QL (60 tabs / 30 days)	1	QL ST
OPIPZA FILM 2mg, 5mg QL (30 films / 30 days)	4	NDS QL PA
OPIPZA FILM 10mg QL (90 films / 30 days)	4	NDS QL PA
paliperidone TB24 1.5mg QL (30 tabs / 30 days)	1	QL
paliperidone (generic of INVEGA) TB24 3mg, 9mg QL (30 tabs / 30 days)	1	QL
paliperidone (generic of INVEGA) TB24 6mg QL (60 tabs / 30 days)	1	QL
perphenazine TABS 2mg, 4mg, 8mg, 16mg	1	
PERSERIS PRSY 90mg, 120mg QL (1 syringe / 30 days)	4	NDS QL
pimozide TABS 1mg, 2mg	1	
quetiapine fumarate (generic of SEROQUEL) TABS 25mg QL (180 tabs / 30 days)	1	QL
quetiapine fumarate (generic of SEROQUEL) TABS 50mg, 100mg, 200mg QL (90 tabs / 30 days)	1	QL
quetiapine fumarate TABS 150mg QL (90 tabs / 30 days)	1	QL
quetiapine fumarate (generic of SEROQUEL) TABS 300mg, 400mg QL (60 tabs / 30 days)	1	QL
quetiapine fumarate (generic of SEROQUEL XR) TB24 50mg, 300mg, 400mg QL (60 tabs / 30 days)	1	QL PA
quetiapine fumarate (generic of SEROQUEL XR) TB24 150mg, 200mg QL (30 tabs / 30 days)	1	QL PA
REXULTI TABS 3mg, 4mg QL (30 tabs / 30 days)	4	NDS QL
REXULTI TABS .25mg, .5mg, 1mg, 2mg QL (60 tabs / 30 days)	4	NDS QL
RISPERDAL SOLN 1mg/ml QL (240 mL / 30 days)	3	QL

Drug Name	Drug Tier	Requirements/ Limits
RISPERDAL TABS .5mg, 1mg, 2mg, 3mg, 4mg	3	
RISPERDAL CONSTA SRER 12.5mg QL (2 injections / 28 days)	3	QL
RISPERDAL CONSTA SRER 25mg, 37.5mg, 50mg QL (2 injections / 28 days)	4	NDS QL
risperidone (generic of RISPERDAL) SOLN 1mg/ml QL (240 mL / 30 days)	1	QL
risperidone (generic of RISPERDAL) TABS .5mg, 1mg, 2mg, 3mg, 4mg	1	
risperidone TABS .25mg	1	
risperidone TBDP 1mg, 2mg, 3mg QL (60 tabs / 30 days)	1	QL ST
risperidone TBDP 4mg QL (120 tabs / 30 days)	1	QL ST
risperidone TBDP .25mg, .5mg QL (90 tabs / 30 days)	1	QL ST
risperidone microspheres (generic of RISPERDAL CONSTA) SRER 12.5mg, 25mg QL (2 injections / 28 days)	1	QL
risperidone microspheres (generic of RISPERDAL CONSTA) SRER 37.5mg, 50mg QL (2 injections / 28 days)	4	NDS QL
RYKINDO SRER 25mg, 37.5mg, 50mg QL (2 vials / 28 days)	4	NDS QL PA
SAPHRIS SUBL 2.5mg, 5mg, 10mg QL (60 tabs / 30 days)	4	NDS QL
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr QL (30 patches / 30 days)	4	NDS QL
SEROQUEL TABS 25mg QL (180 tabs / 30 days)	3	QL
SEROQUEL TABS 50mg, 100mg, 200mg QL (90 tabs / 30 days)	3	QL
SEROQUEL TABS 300mg, 400mg QL (60 tabs / 30 days)	3	QL
SEROQUEL XR TB24 150mg, 200mg QL (30 tabs / 30 days)	3	QL PA
SEROQUEL XR TB24 300mg, 400mg QL (60 tabs / 30 days)	3	QL PA
thioridazine hcl TABS 10mg, 25mg, 50mg, 100mg	1	
thiothixene CAPS 1mg, 2mg, 5mg, 10mg	1	
trifluoperazine hcl TABS 1mg, 2mg, 5mg, 10mg	1	
UZEDY SUSY 50mg/0.14ml, 75mg/0.21ml, 100mg/0.28ml, 125mg/0.35ml QL (1 syringe / 30 days)	4	NDS QL
UZEDY SUSY 150mg/0.42ml, 200mg/0.56ml, 250mg/0.7ml QL (1 syringe / 60 days)	4	NDS QL
VERSACLOZ SUSP 50mg/ml QL (600 mL / 30 days)	4	NDS QL PA
VRAYLAR CAPS 1.5mg QL (60 caps / 30 days)	4	NDS QL
VRAYLAR CAPS .5mg, .75mg, 3mg, 4.5mg, 6mg QL (30 caps / 30 days)	4	NDS QL
ziprasidone hcl (generic of GEODON) CAPS 20mg, 40mg, 60mg, 80mg QL (60 caps / 30 days)	1	QL
ziprasidone mesylate (generic of GEODON) SOLR 20mg QL (6 injections / 3 days)	1	QL
ZYPREXA SOLR 10mg QL (3 vials / 1 day)	3	QL
ZYPREXA TABS 2.5mg, 5mg QL (60 tabs / 30 days)	3	QL
ZYPREXA TABS 20mg QL (30 tabs / 30 days)	4	NDS QL

Drug Name	Drug Tier	Requirements/ Limits
ZYPREXA RELPREVV SUSR 210mg QL (2 vials / 28 days)	3	QL NM PA
ZYPREXA RELPREVV SUSR 300mg QL (2 vials / 28 days)	4	NDS QL NM PA
ZYPREXA RELPREVV SUSR 405mg QL (1 vial / 28 days)	4	NDS QL NM PA
ANTISEIZURE AGENTS		
APTIOM TABS 200mg, 400mg QL (30 tabs / 30 days)	4	NDS QL
APTIOM TABS 600mg, 800mg QL (60 tabs / 30 days)	4	NDS QL
BANZEL SUSP 40mg/ml QL (2400 mL / 30 days)	4	NDS QL PA
BANZEL TABS 200mg QL (480 tabs / 30 days)	4	NDS QL PA
BANZEL TABS 400mg QL (240 tabs / 30 days)	4	NDS QL PA
brivaracetam (generic of BRIVIACT) SOLN 10mg/ml QL (600 mL / 30 days)	4	NDS QL PA
brivaracetam (generic of BRIVIACT) SOLN 50mg/5ml	1	PA
brivaracetam (generic of BRIVIACT) TABS 10mg, 25mg, 50mg, 75mg, 100mg QL (60 tabs / 30 days)	4	NDS QL PA
BRIVIACT SOLN 10mg/ml QL (600 mL / 30 days)	4	NDS QL PA
BRIVIACT SOLN 50mg/5ml	3	PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg QL (60 tabs / 30 days)	4	NDS QL PA
carbamazepine CHEW 100mg, 200mg	1	
carbamazepine (generic of CARBATROL) CP12 100mg, 200mg, 300mg	1	
carbamazepine (generic of TEGRETOL) SUSP 100mg/5ml; TABS 200mg	1	
carbamazepine (generic of TEGRETOL-XR) TB12 100mg, 200mg, 400mg	1	
CARBATROL CP12 100mg, 200mg, 300mg	3	
CELONTIN CAPS 300mg	3	
clobazam (generic of ONFI) SUSP 2.5mg/ml QL (480 mL / 30 days)	1	QL PA
clobazam (generic of ONFI) TABS 10mg, 20mg QL (60 tabs / 30 days)	1	QL PA
clonazepam (generic of KLONOPIN) TABS 2mg QL (300 tabs / 30 days)	1	QL
clonazepam (generic of KLONOPIN) TABS .5mg, 1mg QL (90 tabs / 30 days)	1	QL
clonazepam TBDP 2mg QL (300 tabs / 30 days)	1	QL
clonazepam TBDP .125mg, .25mg, .5mg, 1mg QL (90 tabs / 30 days)	1	QL
clorazepate dipotassium TABS 3.75mg, 7.5mg, 15mg QL (180 tabs / 30 days) PA applies if 65 years and older	1	QL PA
DEPAKOTE TBEC 125mg, 250mg, 500mg	3	
DEPAKOTE ER TB24 250mg, 500mg	3	
DEPAKOTE SPRINKLES CSDR 125mg	3	
DIACOMIT CAPS 250mg QL (360 caps / 30 days)	4	NDS QL NM PA
DIACOMIT CAPS 500mg QL (180 caps / 30 days)	4	NDS QL NM PA
DIACOMIT PACK 250mg QL (360 packets / 30 days)	4	NDS QL NM PA
DIACOMIT PACK 500mg QL (180 packets / 30 days)	4	NDS QL NM PA
diazepam SOLN 5mg/5ml QL (1200 mL / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA

Drug Name	Tier	Requirements/ Limits
diazepam (generic of VALIUM) TABS 2mg, 5mg, 10mg QL (120 tabs / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA
diazepam (anticonvulsant) GEL 2.5mg, 10mg, 20mg	1	
diazepam inj SOLN 5mg/ml	1	
diazepam intensol CONC 5mg/ml QL (240 mL / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA
DILANTIN CAPS 30mg, 100mg	3	
DILANTIN INFATABS CHEW 50mg	3	
DILANTIN-125 SUSP 125mg/5ml	3	
divalproex sodium (generic of DEPAKOTE SPRINKLES) CSDR 125mg	1	
divalproex sodium (generic of DEPAKOTE ER) TB24 250mg, 500mg	1	
divalproex sodium (generic of DEPAKOTE) TBEC 125mg, 250mg, 500mg	1	
ELEPSIA XR TB24 1000mg	3	
ELEPSIA XR TB24 1500mg	4	NDS
EPIDIOLEX SOLN 100mg/ml QL (600 mL / 30 days)	4	NDS QL NM PA
EPRONTIA SOLN 25mg/ml QL (480 mL / 30 days)	3	QL PA
eslicarbazepine acetate (generic of APTIOM) TABS 200mg, 400mg QL (30 tabs / 30 days)	1	QL
eslicarbazepine acetate (generic of APTIOM) TABS 600mg, 800mg QL (60 tabs / 30 days)	1	QL
ethosuximide (generic of ZARONTIN) CAPS 250mg; SOLN 250mg/5ml	1	
felbamate SUSP 600mg/5ml	1	
felbamate (generic of FELBATOL) TABS 400mg, 600mg	1	
FELBATOL TABS 400mg, 600mg	4	NDS
FINTEPLA SOLN 2.2mg/ml QL (360 mL / 30 days)	4	NDS QL NM PA
FYCOMPA SUSP .5mg/ml QL (680 mL / 28 days)	4	NDS QL PA
FYCOMPA TABS 2mg QL (60 tabs / 30 days)	3	QL PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg QL (30 tabs / 30 days)	4	NDS QL PA
gabapentin (generic of NEURONTIN) CAPS 100mg, 300mg QL (360 caps / 30 days)	1	QL
gabapentin (generic of NEURONTIN) CAPS 400mg QL (270 caps / 30 days)	1	QL
gabapentin (generic of NEURONTIN) SOLN 250mg/5ml, 300mg/6ml QL (2160 mL / 30 days)	1	QL
gabapentin (generic of NEURONTIN) TABS 600mg QL (180 tabs / 30 days)	1	QL
gabapentin (generic of NEURONTIN) TABS 800mg QL (120 tabs / 30 days)	1	QL
GABARONE TABS 100mg QL (360 tabs / 30 days)	4	NDS QL PA
GABARONE TABS 400mg QL (270 tabs / 30 days)	4	NDS QL PA
KEPPRA SOLN 100mg/ml, 500mg/5ml; TABS 500mg, 750mg, 1000mg	4	NDS
KEPPRA TABS 250mg	3	
KEPPRA XR TB24 500mg, 750mg	4	NDS
KLONOPIN TABS 2mg QL (300 tabs / 30 days)	3	QL
KLONOPIN TABS .5mg, 1mg QL (90 tabs / 30 days)	3	QL
lacosamide (generic of VIMPAT) SOLN 200mg/20ml	1	

Drug Name	Drug Tier	Requirements/ Limits
lacosamide (generic of VIMPAT) TABS 50mg	1	QL
QL (120 tabs / 30 days)		
lacosamide (generic of VIMPAT) TABS 100mg, 150mg, 200mg	1	QL
QL (60 tabs / 30 days)		
lacosamide oral (generic of VIMPAT) SOLN 10mg/ml	1	QL
QL (1200 mL / 30 days)		
LAMICTAL TABS 25mg, 100mg, 150mg, 200mg	3	
LAMICTAL CHEWABLE DISPERS CHEW 5mg, 25mg	4	NDS
LAMICTAL ODT TBDP 25mg, 50mg, 100mg, 200mg	4	NDS ST
LAMICTAL ODT KIT BLUE	3	
LAMICTAL ODT KIT GREEN	3	
LAMICTAL ODT KIT ORANGE	3	
LAMICTAL STARTER KIT (35 X 25MG TABS) KIT 25mg	3	
LAMICTAL STARTER KIT (42 X 25MG TABS & 7 X 100MG TAB)	3	
LAMICTAL STARTER KIT (84 X 25MG TABS & 14 X 100MG TABS)	3	
LAMICTAL XR TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	4	NDS ST
LAMICTAL XR KIT	3	
lamotrigine (generic of LAMICTAL CHEWABLE DISPERS) CHEW 5mg, 25mg	1	
lamotrigine (generic of LAMICTAL) TABS 25mg, 100mg, 150mg, 200mg	1	
lamotrigine (generic of LAMICTAL XR) TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	1	ST
lamotrigine (generic of LAMICTAL ODT) TBDP 25mg, 50mg, 100mg, 200mg	1	ST

Drug Name	Drug Tier	Requirements/ Limits
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (generic of LAMICTAL STARTER/NOT TAKI)	1	
lamotrigine tab 35 x 25 mg starter kit (generic of LAMICTAL STARTER/TAKING V) KIT 25mg	1	
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (generic of LAMICTAL STARTER/TAKING C)	4	NDS
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (generic of LAMICTAL ODT)	1	
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (generic of LAMICTAL ODT)	1	
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (generic of LAMICTAL ODT)	1	
LEVETIR/NACL INJ 5MG/ML	3	
LEVETIR/NACL INJ 10MG/ML	3	
LEVETIR/NACL INJ 15MG/ML	3	
levetiracetam (generic of KEPPRA) SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg	1	
levetiracetam TB3D 250mg	1	QL
QL (360 tabs / 30 days)		
levetiracetam TB3D 500mg	1	QL
QL (180 tabs / 30 days)		
levetiracetam (generic of KEPPRA XR) TB24 500mg, 750mg	1	
levetiracetam in sodium chloride iv soln 500 mg/100ml (generic of LEVETIRACETAM/SODIUM CHLO)	1	
levetiracetam in sodium chloride iv soln 1000 mg/100ml (generic of LEVETIRACETAM/SODIUM CHLO)	1	

Drug Name	Tier	Requirements/ Limits
levetiracetam in sodium chloride iv soln 1500 mg/100ml (generic of LEVETIRACETAM/SODIUM CHLO)	1	
LYRICA CAPS 25mg, 50mg, 75mg, 100mg, 150mg QL (120 caps / 30 days) PA applies if 65 years and older	3	QL PA
LYRICA CAPS 200mg QL (90 caps / 30 days) PA applies if 65 years and older	3	QL PA
LYRICA CAPS 225mg, 300mg QL (60 caps / 30 days) PA applies if 65 years and older	3	QL PA
LYRICA SOLN 20mg/ml QL (900 mL / 30 days) PA applies if 65 years and older	3	QL PA
methsuximide (generic of CELONTIN) CAPS 300mg	1	
MOTPOLY XR CP24 100mg QL (60 caps / 30 days)	3	QL PA
MOTPOLY XR CP24 150mg, 200mg QL (60 caps / 30 days)	4	NDS QL PA
MYSOLINE TABS 50mg, 250mg	4	NDS
NAYZILAM SOLN 5mg/0.1ml QL (10 nasal units / 30 days)	3	QL
NEURONTIN CAPS 100mg, 300mg QL (360 caps / 30 days)	3	QL
NEURONTIN CAPS 400mg QL (270 caps / 30 days)	3	QL
NEURONTIN SOLN 250mg/5ml QL (2160 mL / 30 days)	3	QL
NEURONTIN TABS 600mg QL (180 tabs / 30 days)	4	NDS QL
NEURONTIN TABS 800mg QL (120 tabs / 30 days)	4	NDS QL
ONFI SUSP 2.5mg/ml QL (480 mL / 30 days)	4	NDS QL PA
ONFI TABS 10mg, 20mg QL (60 tabs / 30 days)	4	NDS QL PA
oxcarbazepine (generic of TRILEPTAL) SUSP 300mg/5ml; TABS 150mg, 300mg, 600mg	1	
oxcarbazepine (generic of OXTELLAR XR) TB24 150mg, 300mg	1	PA
oxcarbazepine (generic of OXTELLAR XR) TB24 600mg	4	NDS PA
OXTELLAR XR TB24 150mg	3	PA
OXTELLAR XR TB24 300mg, 600mg	4	NDS PA
perampanel (generic of FYCOMPA) SUSP .5mg/ml QL (680 mL / 28 days)	4	NDS QL PA
perampanel (generic of FYCOMPA) TABS 2mg QL (60 tabs / 30 days)	1	QL PA
perampanel (generic of FYCOMPA) TABS 4mg, 6mg, 8mg, 10mg, 12mg QL (30 tabs / 30 days)	1	QL PA
phenobarbital ELIX 20mg/5ml QL (1500 mL / 30 days) PA applies if 65 years and older	3	QL PA
phenobarbital TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg QL (120 tabs / 30 days) PA applies if 65 years and older	2	QL PA
phenobarbital sodium SOLN 65mg/ml, 130mg/ml PA applies if 65 years and older	3	PA
phenytek CAPS 200mg, 300mg	1	
phenytoin (generic of DILANTIN INFATABS) CHEW 50mg	1	
phenytoin (generic of DILANTIN-125) SUSP 125mg/5ml	1	
phenytoin sodium SOLN 50mg/ml	1	

Drug Name	Drug Tier	Requirements/ Limits
phenytoin sodium extended (generic of DILANTIN) CAPS 100mg	1	
phenytoin sodium extended CAPS 200mg, 300mg	1	
pregabalin (generic of LYRICA) CAPS 25mg, 50mg, 75mg, 100mg, 150mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
pregabalin (generic of LYRICA) CAPS 200mg QL (90 caps / 30 days) PA applies if 65 years and older	1	QL PA
pregabalin (generic of LYRICA) CAPS 225mg, 300mg QL (60 caps / 30 days) PA applies if 65 years and older	1	QL PA
pregabalin (generic of LYRICA) SOLN 20mg/ml QL (900 mL / 30 days) PA applies if 65 years and older	1	QL PA
primidone (generic of MYSOLINE) TABS 50mg, 250mg	1	
primidone TABS 125mg	1	
roweepra (generic of KEPPRA) TABS 500mg	1	
rufinamide (generic of BANZEL) SUSP 40mg/ml QL (2400 mL / 30 days)	4	NDS QL PA
rufinamide (generic of BANZEL) TABS 200mg QL (480 tabs / 30 days)	1	QL PA
rufinamide (generic of BANZEL) TABS 400mg QL (240 tabs / 30 days)	4	NDS QL PA
SABRIL PACK 500mg QL (180 packets / 30 days)	4	NDS QL NM PA
SABRIL TABS 500mg QL (180 tabs / 30 days)	4	NDS QL NM PA
SPRITAM TB3D 250mg QL (360 tabs / 30 days)	3	QL
SPRITAM TB3D 500mg QL (180 tabs / 30 days)	3	QL
SPRITAM TB3D 750mg QL (120 tabs / 30 days)	3	QL
SPRITAM TB3D 1000mg QL (90 tabs / 30 days)	3	QL
SUBVENITE SUSP 10mg/ml	4	NDS ST
subvenite (generic of LAMICTAL) TABS 25mg, 100mg, 150mg, 200mg	1	
subvenite starter kit/blu (generic of LAMICTAL STARTER/TAKING V) KIT 25mg	1	
subvenite starter kit/gre (generic of LAMICTAL STARTER/TAKING C)	4	NDS
subvenite starter kit/ora (generic of LAMICTAL STARTER/NOT TAKI)	1	
SYMPAZAN FILM 5mg, 10mg, 20mg QL (60 films / 30 days)	4	NDS QL PA
TEGRETOL SUSP 100mg/5ml; TABS 200mg	3	
TEGRETOL-XR TB12 100mg, 200mg, 400mg	3	
tiagabine hcl TABS 2mg, 4mg, 12mg, 16mg	1	
TOPAMAX TABS 25mg	3	
TOPAMAX TABS 50mg, 100mg, 200mg	4	NDS
TOPAMAX SPRINKLE CPSP 15mg	3	
TOPAMAX SPRINKLE CPSP 25mg	4	NDS
topiramate (generic of TROKENDI XR) CP24 25mg QL (480 caps / 30 days)	1	QL PA
topiramate (generic of TROKENDI XR) CP24 50mg QL (240 caps / 30 days)	1	QL PA
topiramate (generic of TROKENDI XR) CP24 100mg QL (120 caps / 30 days)	1	QL PA

Drug Name	Drug Tier	Requirements/ Limits
topiramate (generic of TROKENDI XR) CP24 200mg QL (60 caps / 30 days)	1	QL PA
topiramate (generic of TOPAMAX SPRINKLE) CPSP 15mg, 25mg	1	
topiramate CPSP 50mg	1	
topiramate CS24 25mg QL (480 caps / 30 days)	1	QL PA
topiramate CS24 50mg QL (240 caps / 30 days)	1	QL PA
topiramate CS24 100mg QL (120 caps / 30 days)	1	QL PA
topiramate CS24 150mg, 200mg QL (60 caps / 30 days)	1	QL PA
topiramate (generic of EPRONTIA) SOLN 25mg/ml QL (480 mL / 30 days)	1	QL PA
topiramate (generic of TOPAMAX) TABS 25mg, 50mg, 100mg, 200mg	1	
TRILEPTAL SUSP 300mg/5ml; TABS 300mg, 600mg	4	NDS
TRILEPTAL TABS 150mg	3	
TROKENDI XR CP24 25mg QL (480 caps / 30 days)	3	QL PA
TROKENDI XR CP24 50mg QL (240 caps / 30 days)	3	QL PA
TROKENDI XR CP24 100mg QL (120 caps / 30 days)	4	NDS QL PA
TROKENDI XR CP24 200mg QL (60 caps / 30 days)	4	NDS QL PA
VALIUM TABS 2mg, 5mg, 10mg QL (120 tabs / 30 days) PA applies if 65 years and older when greater than 5 day supply	3	QL PA
valproate sodium SOLN 100mg/ml, 250mg/5ml	1	
valproic acid CAPS 250mg	1	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml QL (10 blister packs / 30 days)	3	QL
vigabatrin (generic of SABRIL) PACK 500mg QL (180 packets / 30 days)	4	NDS QL NM PA
vigabatrin (generic of SABRIL) TABS 500mg QL (180 tabs / 30 days)	4	NDS QL NM PA
vigadrone (generic of SABRIL) PACK 500mg QL (180 packets / 30 days)	4	NDS QL NM PA
vigadrone (generic of SABRIL) TABS 500mg QL (180 tabs / 30 days)	4	NDS QL NM PA
VIGAFYDE SOLN 100mg/ml QL (900 mL / 30 days)	4	NDS QL NM PA
VIMPAT SOLN 10mg/ml QL (1200 mL / 30 days)	4	NDS QL
VIMPAT SOLN 200mg/20ml	4	NDS
VIMPAT TABS 50mg QL (120 tabs / 30 days)	3	QL
VIMPAT TABS 100mg, 150mg, 200mg QL (60 tabs / 30 days)	4	NDS QL
XCOPRI TABS 25mg, 50mg, 100mg QL (30 tabs / 30 days)	4	NDS QL
XCOPRI TABS 150mg, 200mg QL (60 tabs / 30 days)	4	NDS QL
XCOPRI PAK 12.5-25 QL (28 tabs / 28 days)	3	QL
XCOPRI PAK 50-100MG QL (28 tabs / 28 days)	4	NDS QL
XCOPRI PAK 100-150 QL (56 tabs / 28 days)	4	NDS QL

Drug Name	Tier	Requirements/ Limits
XCOPRI PAK 150-200MG (MAINTENANCE) QL (56 tabs / 28 days)	4	NDS QL
XCOPRI PAK 150-200MG (TITRATION) QL (28 tabs / 28 days)	4	NDS QL
ZARONTIN CAPS 250mg; SOLN 250mg/5ml	3	
ZONEGRAN CAPS 25mg, 100mg	4	NDS
ZONISADE SUSP 100mg/5ml QL (900 mL / 30 days)	4	NDS QL PA
zonisamide (generic of ZONEGRAN) CAPS 25mg, 100mg	1	
zonisamide CAPS 50mg	1	
ZTALMY SUSP 50mg/ml QL (1100 mL / 30 days)	4	NDS QL NM PA
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
ADDERALL TAB 5MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 7.5MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 10MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 12.5MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 15MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL TAB 20MG QL (90 tabs / 30 days)	3	QL PA
ADDERALL TAB 30MG QL (60 tabs / 30 days)	3	QL PA
ADDERALL XR CAP 5MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 10MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 15MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 20MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 25MG QL (30 caps / 30 days)	3	QL PA
ADDERALL XR CAP 30MG QL (30 caps / 30 days)	3	QL PA
ADZENYS XR-ODT TBED 3.1mg, 6.3mg, 9.4mg QL (60 tabs / 30 days)	3	QL PA
ADZENYS XR-ODT TBED 12.5mg, 15.7mg, 18.8mg QL (30 tabs / 30 days)	3	QL PA
amphetamine (generic of ADZENYS XR-ODT) TBED 3.1mg, 6.3mg, 9.4mg QL (60 tabs / 30 days)	1	QL PA
amphetamine (generic of ADZENYS XR-ODT) TBED 12.5mg, 15.7mg, 18.8mg QL (30 tabs / 30 days)	1	QL PA
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine cap er 24hr 5 mg (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine cap er 24hr 10 mg (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine cap er 24hr 15 mg (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
amphetamine-dextroamphetamine cap er 24hr 20 mg (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine cap er 24hr 25 mg (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine cap er 24hr 30 mg (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
amphetamine-dextroamphetamine tab 5 mg (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
amphetamine-dextroamphetamine tab 7.5 mg (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
amphetamine-dextroamphetamine tab 10 mg (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
amphetamine-dextroamphetamine tab 12.5 mg (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
amphetamine-dextroamphetamine tab 15 mg (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
amphetamine-dextroamphetamine tab 20 mg (generic of ADDERALL) QL (90 tabs / 30 days)	1	QL PA
amphetamine-dextroamphetamine tab 30 mg (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
APTENSIO XR CP24 10mg, 15mg, 20mg, 30mg QL (60 caps / 30 days)	3	QL PA
APTENSIO XR CP24 40mg, 50mg, 60mg QL (30 caps / 30 days)	3	QL PA
atomoxetine hcl CAPS 10mg, 18mg, 25mg QL (120 caps / 30 days)	1	QL
atomoxetine hcl CAPS 40mg QL (60 caps / 30 days)	1	QL
atomoxetine hcl CAPS 60mg, 80mg, 100mg QL (30 caps / 30 days)	1	QL
AZSTARYS CAP 26.1-5.2 QL (30 caps / 30 days)	3	QL PA
AZSTARYS CAP 39.2-7.8 QL (30 caps / 30 days)	3	QL PA
AZSTARYS CAP 52.3-10. QL (30 caps / 30 days)	3	QL PA
CONCERTA TBCR 18mg, 27mg, 36mg QL (60 tabs / 30 days)	3	QL PA
CONCERTA TBCR 54mg QL (30 tabs / 30 days)	3	QL PA
COTEMPLA XR-ODT TBED 8.6mg, 17.3mg, 25.9mg QL (60 tabs / 30 days)	3	QL PA
DAYTRANA PTCH 10mg/9hr, 15mg/9hr, 20mg/9hr, 30mg/9hr QL (30 patches / 30 days)	3	QL PA
DEXEDRINE CP24 10mg QL (150 caps / 30 days)	4	NDS QL PA
DEXEDRINE CP24 15mg QL (120 caps / 30 days)	4	NDS QL PA
dexmethylphenidate hcl (generic of FOCALIN XR) CP24 5mg, 10mg, 15mg, 20mg QL (60 caps / 30 days)	1	QL PA
dexmethylphenidate hcl (generic of FOCALIN XR) CP24 25mg, 30mg, 35mg, 40mg QL (30 caps / 30 days)	1	QL PA
dexmethylphenidate hcl (generic of FOCALIN) TABS 2.5mg, 5mg QL (120 tabs / 30 days)	1	QL PA
dexmethylphenidate hcl (generic of FOCALIN) TABS 10mg QL (60 tabs / 30 days)	1	QL PA

Drug Name	Drug Tier	Requirements/ Limits
dextroamphetamine sulfate CP24 5mg QL (150 caps / 30 days)	1	QL PA
dextroamphetamine sulfate (generic of DEXEDRINE) CP24 10mg QL (150 caps / 30 days)	1	QL PA
dextroamphetamine sulfate (generic of DEXEDRINE) CP24 15mg QL (120 caps / 30 days)	1	QL PA
dextroamphetamine sulfate TABS 2.5mg, 5mg, 7.5mg, 10mg QL (180 tabs / 30 days)	1	QL PA
dextroamphetamine sulfate TABS 15mg QL (120 tabs / 30 days)	1	QL PA
dextroamphetamine sulfate TABS 20mg QL (90 tabs / 30 days)	1	QL PA
dextroamphetamine sulfate TABS 30mg QL (60 tabs / 30 days)	1	QL PA
DYANAVEL XR SUER 2.5mg/ml QL (240 mL / 30 days)	3	QL PA
DYANAVEL XR TBCR 5mg QL (60 tabs / 30 days)	3	QL PA
DYANAVEL XR TBCR 10mg, 15mg, 20mg QL (30 tabs / 30 days)	3	QL PA
FOCALIN TABS 2.5mg, 5mg QL (120 tabs / 30 days)	3	QL PA
FOCALIN TABS 10mg QL (60 tabs / 30 days)	3	QL PA
FOCALIN XR CP24 5mg, 10mg, 15mg, 20mg QL (60 caps / 30 days)	3	QL PA
FOCALIN XR CP24 25mg, 30mg, 35mg, 40mg QL (30 caps / 30 days)	3	QL PA
guanfacine hcl (adhd) (generic of INTUNIV) TB24 1mg, 2mg, 4mg QL (30 tabs / 30 days) PA applies if 65 years and older	2	QL PA
guanfacine hcl (adhd) (generic of INTUNIV) TB24 3mg QL (60 tabs / 30 days) PA applies if 65 years and older	2	QL PA
INTUNIV TB24 1mg, 2mg, 4mg QL (30 tabs / 30 days) PA applies if 65 years and older	3	QL PA
INTUNIV TB24 3mg QL (60 tabs / 30 days) PA applies if 65 years and older	3	QL PA
JORNAY PM CP24 20mg, 40mg QL (60 caps / 30 days)	3	QL PA
JORNAY PM CP24 60mg, 80mg, 100mg QL (30 caps / 30 days)	3	QL PA
lisdexamfetamine dimesylate CAPS 10mg, 20mg, 30mg QL (60 caps / 30 days)	1	QL PA
lisdexamfetamine dimesylate CAPS 40mg, 50mg, 60mg, 70mg QL (30 caps / 30 days)	1	QL PA
lisdexamfetamine dimesylate CHEW 10mg, 20mg, 30mg QL (60 tabs / 30 days)	1	QL PA
lisdexamfetamine dimesylate CHEW 40mg, 50mg, 60mg QL (30 tabs / 30 days)	1	QL PA
METADATE CD CPCR 10mg, 20mg, 30mg QL (60 caps / 30 days)	3	QL PA
METADATE CD CPCR 40mg, 50mg, 60mg QL (30 caps / 30 days)	3	QL PA
METHYLIN SOLN 5mg/5ml QL (1800 mL / 30 days)	3	QL PA
METHYLIN SOLN 10mg/5ml QL (900 mL / 30 days)	3	QL PA
methylphenidate (generic of DAYTRANA) PTCH 10mg/9hr, 15mg/9hr, 20mg/9hr, 30mg/9hr QL (30 patches / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
methylphenidate hcl CHEW 2.5mg, 5mg, 10mg	1	QL PA
QL (180 tabs / 30 days)		
methylphenidate hcl (generic of APTENSIO XR) CP24 10mg, 15mg, 20mg, 30mg	1	QL PA
QL (60 caps / 30 days)		
methylphenidate hcl (generic of RITALIN LA) CP24 10mg, 30mg	1	QL PA
QL (60 caps / 30 days)		
methylphenidate hcl CP24 20mg	1	QL PA
QL (60 caps / 30 days)		
methylphenidate hcl (generic of RITALIN LA) CP24 40mg	1	QL PA
QL (30 caps / 30 days)		
methylphenidate hcl (generic of APTENSIO XR) CP24 40mg, 50mg, 60mg	1	QL PA
QL (30 caps / 30 days)		
methylphenidate hcl CP24 60mg	1	QL PA
QL (30 caps / 30 days)		
methylphenidate hcl (generic of METADATE CD) CPCR 10mg, 20mg, 30mg	1	QL PA
QL (60 caps / 30 days)		
methylphenidate hcl (generic of METADATE CD) CPCR 40mg, 50mg, 60mg	1	QL PA
QL (30 caps / 30 days)		
methylphenidate hcl (generic of METHYLIN) SOLN 5mg/5ml	1	QL PA
QL (1800 mL / 30 days)		
methylphenidate hcl (generic of METHYLIN) SOLN 10mg/5ml	1	QL PA
QL (900 mL / 30 days)		
methylphenidate hcl (generic of RITALIN) TABS 5mg, 10mg	1	QL PA
QL (180 tabs / 30 days)		
methylphenidate hcl (generic of RITALIN) TABS 20mg	1	QL PA
QL (90 tabs / 30 days)		
methylphenidate hcl TB24 18mg, 27mg, 36mg; TBCR 27mg, 36mg	1	QL PA
QL (60 tabs / 30 days)		
methylphenidate hcl TB24 54mg; TBCR 45mg, 54mg, 63mg, 72mg	1	QL PA
QL (30 tabs / 30 days)		
methylphenidate hcl TBCR 10mg, 20mg	1	QL PA
QL (90 tabs / 30 days)		
methylphenidate hcl (generic of CONCERTA) TBCR 18mg, 27mg, 36mg	1	QL PA
QL (60 tabs / 30 days)		
methylphenidate hcl (generic of CONCERTA) TBCR 54mg	1	QL PA
QL (30 tabs / 30 days)		
MYDAYIS CAP 12.5MG	3	QL PA
QL (30 caps / 30 days)		
MYDAYIS CAP 25MG	3	QL PA
QL (30 caps / 30 days)		
MYDAYIS CAP 37.5MG	3	QL PA
QL (30 caps / 30 days)		
MYDAYIS CAP 50MG	3	QL PA
QL (30 caps / 30 days)		
QELBREE CP24 100mg	3	QL PA
QL (180 caps / 30 days)		
QELBREE CP24 150mg	3	QL PA
QL (60 caps / 30 days)		
QELBREE CP24 200mg	3	QL PA
QL (90 caps / 30 days)		
QUILLICHEW ER CHER 20mg, 30mg	3	QL PA
QL (60 tabs / 30 days)		
QUILLICHEW ER CHER 40mg	3	QL PA
QL (30 tabs / 30 days)		
QUILLIVANT XR SRER 25mg/5ml	3	QL PA
QL (360 mL / 30 days)		
RELEXXII TBCR 18mg, 27mg, 36mg	3	QL PA
QL (60 tabs / 30 days)		
RELEXXII TBCR 45mg, 54mg, 63mg, 72mg	3	QL PA
QL (30 tabs / 30 days)		

Drug Name	Drug Tier	Requirements/ Limits
RITALIN TABS 5mg, 10mg QL (180 tabs / 30 days)	3	QL PA
RITALIN TABS 20mg QL (90 tabs / 30 days)	3	QL PA
VYVANSE CAPS 10mg, 20mg, 30mg QL (60 caps / 30 days)	3	QL PA
VYVANSE CAPS 40mg, 50mg, 60mg, 70mg QL (30 caps / 30 days)	3	QL PA
VYVANSE CHEW 10mg, 20mg, 30mg QL (60 tabs / 30 days)	3	QL PA
VYVANSE CHEW 40mg, 50mg, 60mg QL (30 tabs / 30 days)	3	QL PA
XELSTRYM PTCH 4.5mg/9hr, 9mg/9hr, 13.5mg/9hr, 18mg/9hr QL (30 patches / 30 days)	3	QL PA
zenzedi TABS 2.5mg, 5mg, 7.5mg, 10mg QL (180 tabs / 30 days)	1	QL PA
zenzedi TABS 15mg QL (120 tabs / 30 days)	1	QL PA
zenzedi TABS 20mg QL (90 tabs / 30 days)	1	QL PA
zenzedi TABS 30mg QL (60 tabs / 30 days)	1	QL PA
HYPNOTICS		
AMBIEN TABS 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
AMBIEN CR TBCR 6.25mg, 12.5mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
BELSOMRA TABS 5mg, 10mg, 15mg, 20mg QL (30 tabs / 30 days)	2	QL
DAYVIGO TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
doxepin hcl (sleep) (generic of SILENOR) TABS 3mg, 6mg QL (30 tabs / 30 days)	1	QL
EDLUAR SUBL 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
estazolam TABS 1mg, 2mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	1	QL PA
eszopiclone (generic of LUNESTA) TABS 1mg, 2mg, 3mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
HALCION TABS .25mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
HETLIOZ CAPS 20mg QL (30 caps / 30 days)	4	NDS QL NM PA
HETLIOZ LQ SUSP 4mg/ml QL (158 ml / 30 days)	4	NDS QL NM PA
LUNESTA TABS 1mg, 2mg, 3mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
QUVIVIQ TABS 25mg, 50mg QL (30 tabs / 30 days)	3	QL
ramelteon (generic of ROZEREM) TABS 8mg QL (30 tabs / 30 days)	1	QL
RESTORIL CAPS 7.5mg, 22.5mg, 30mg QL (30 caps / 30 days) PA applies if 65 years and older	4	NDS QL PA
RESTORIL CAPS 15mg QL (60 caps / 30 days) PA applies if 65 years and older	4	NDS QL PA

Drug Name	Drug Tier	Requirements/ Limits
ROZEREM TABS 8mg QL (30 tabs / 30 days)	3	QL
SILENOR TABS 3mg, 6mg QL (30 tabs / 30 days)	3	QL
tasimelteon (generic of HETLIOZ) CAPS 20mg QL (30 caps / 30 days)	4	NDS QL NM PA
temazepam (generic of RESTORIL) CAPS 7.5mg, 22.5mg, 30mg QL (30 caps / 30 days) PA applies if 65 years and older	1	QL PA
temazepam (generic of RESTORIL) CAPS 15mg QL (60 caps / 30 days) PA applies if 65 years and older	1	QL PA
triazolam (generic of HALCION) TABS .25mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
triazolam TABS .125mg QL (60 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
zaleplon CAPS 5mg QL (30 caps / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
zaleplon CAPS 10mg QL (60 caps / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
ZOLPIDEM TARTRATE CAPS 7.5mg QL (30 caps / 30 days)	3	QL PA
zolpidem tartrate SUBL 1.75mg, 3.5mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
zolpidem tartrate (generic of AMBIEN) TABS 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	1	QL PA
zolpidem tartrate (generic of AMBIEN CR) TBCR 6.25mg, 12.5mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
MIGRAINE		
AIMOVIG SOAJ 70mg/ml, 140mg/ml QL (1 pen / 30 days)	2	QL NM PA
AJOVY SOAJ 225mg/1.5ml QL (3 pens / 90 days)	3	QL NM PA
AJOVY SOSY 225mg/1.5ml QL (3 syringes / 90 days)	3	QL NM PA
almotriptan malate TABS 6.25mg, 12.5mg QL (12 tabs / 30 days)	1	QL ST
BREKIYA SOAJ 1mg/ml QL (24 pens / 28 days)	4	NDS QL NM PA
CAMBIA PACK 50mg QL (9 packets / 30 days)	4	NDS QL PA
diclofenac potassium (migraine) (generic of CAMBIA) PACK 50mg QL (9 packets / 30 days)	1	QL PA
dihydroergotamine mesylate SOLN 1mg/ml	4	NDS
dihydroergotamine mesylate SOLN 4mg/ml QL (8 mL / 30 days)	4	NDS QL PA
eletriptan hydrobromide (generic of RELPAX) TABS 20mg, 40mg QL (12 tabs / 30 days)	1	QL ST
ELYXYB SOLN 120mg/4.8ml QL (28.8 mL / 21 days)	4	NDS QL PA
EMGALITY SOAJ 120mg/ml QL (2 pens / 30 days)	2	QL NM PA

Drug Name	Drug Tier	Requirements/ Limits
EMGALITY SOSY 100mg/ml QL (3 syringes / 30 days)	2	QL NM PA
EMGALITY SOSY 120mg/ml QL (2 syringes / 30 days)	2	QL NM PA
ERGOMAR SUBL 2mg QL (20 tabs / 28 days)	4	NDS QL PA
ergotamine w/ caffeine tab 1-100 mg QL (40 tabs / 28 days)	1	QL PA
frovatriptan succinate TABS 2.5mg QL (18 tabs / 30 days)	1	QL ST
IMITREX TABS 25mg, 50mg, 100mg QL (12 tabs / 30 days)	3	QL
IMITREX STATDOSE REFILL SOCT 4mg/0.5ml QL (18 injections / 30 days)	4	NDS QL
IMITREX STATDOSE REFILL SOCT 6mg/0.5ml QL (12 injections / 30 days)	4	NDS QL
IMITREX STATDOSE SYSTEM SOAJ 4mg/0.5ml QL (18 injections / 30 days)	4	NDS QL
IMITREX STATDOSE SYSTEM SOAJ 6mg/0.5ml QL (12 injections / 30 days)	4	NDS QL
MAXALT TABS 10mg QL (18 tabs / 30 days)	3	QL
MAXALT-MLT TBDP 10mg QL (18 tabs / 30 days)	3	QL
migergot QL (20 suppositories / 28 days)	4	NDS QL PA
naratriptan hcl TABS 1mg, 2.5mg QL (12 tabs / 30 days)	1	QL
NURTEC TBDP 75mg QL (16 tabs / 30 days)	2	QL PA
ONZETRA XSAIL EXHP 11mg/nosepc QL (16 nosepieces / 30 days)	4	NDS QL ST
QULIPTA TABS 10mg, 30mg, 60mg QL (30 tabs / 30 days)	2	QL PA
RELPAX TABS 20mg QL (12 tabs / 30 days)	3	QL ST
RELPAX TABS 40mg QL (12 tabs / 30 days)	4	NDS QL ST
REYVOW TABS 50mg QL (4 tabs / 30 days)	3	QL PA
REYVOW TABS 100mg QL (8 tabs / 30 days)	3	QL PA
rizatriptan benzoate TABS 5mg; TBDP 5mg QL (18 tabs / 30 days)	1	QL
rizatriptan benzoate (generic of MAXALT) TABS 10mg QL (18 tabs / 30 days)	1	QL
rizatriptan benzoate (generic of MAXALT-MLT) TBDP 10mg QL (18 tabs / 30 days)	1	QL
sumatriptan SOLN 5mg/act QL (24 units / 30 days)	1	QL
sumatriptan SOLN 20mg/act QL (12 units / 30 days)	1	QL
sumatriptan succinate (generic of IMITREX STATDOSE SYSTEM) SOAJ 6mg/0.5ml QL (12 injections / 30 days)	1	QL
sumatriptan succinate SOLN 6mg/0.5ml QL (12 injections / 30 days)	1	QL
sumatriptan succinate (generic of IMITREX) TABS 25mg, 50mg, 100mg QL (12 tabs / 30 days)	1	QL
sumatriptan-naproxen sodium tab 85-500 mg (generic of TREXIMET) QL (9 tabs / 30 days)	1	QL ST
SYMBRAVO TAB 20-10MG QL (9 tabs / 30 days)	3	QL ST
TOSYMRA SOLN 10mg/act QL (18 units / 30 days)	3	QL ST

Drug Name	Drug Tier	Requirements/ Limits
TREXIMET TAB 85-500MG QL (9 tabs / 30 days)	4	NDS QL ST
TRUDHESA AERS .725mg/act QL (12 mL / 28 days)	4	NDS QL PA
UBRELVY TABS 50mg, 100mg QL (16 tabs / 30 days)	2	QL PA
VYEPTI SOLN 100mg/ml	4	NDS NM PA
ZAVZPRET SOLN 10mg/act QL (6 nasal units / 21 days)	4	NDS QL PA
ZEMBRACE SYMTOUCH SOAJ 3mg/0.5ml QL (24 pens / 30 days)	4	NDS QL ST
zolmitriptan (generic of ZOMIG) SOLN 2.5mg, 5mg QL (12 units / 30 days)	1	QL ST
zolmitriptan TABS 2.5mg, 5mg; TBDP 2.5mg, 5mg QL (12 tabs / 30 days)	1	QL ST
ZOMIG SOLN 2.5mg, 5mg QL (12 units / 30 days)	3	QL ST
zomig TABS 2.5mg, 5mg QL (12 tabs / 30 days)	1	QL ST
MISCELLANEOUS		
AMVUTTRA SOSY 25mg/0.5ml QL (1 syringe / 90 days)	4	NDS QL NM PA
AUSTEDO TABS 6mg QL (60 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO TABS 9mg, 12mg QL (120 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TB24 6mg QL (90 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TB24 12mg QL (120 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TB24 18mg, 30mg, 36mg, 42mg, 48mg QL (30 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TB24 24mg QL (60 tabs / 30 days)	4	NDS QL NM PA
AUSTEDO XR TAB TITR KIT QL (2 packs / year)	4	NDS QL NM PA
DAYBUE SOLN 200mg/ml QL (3600 mL / 30 days)	4	NDS QL NM PA
DAYBUE STIX PACK 5000mg, 6000mg QL (120 packets / 30 days)	4	NDS QL NM PA
DAYBUE STIX PACK 8000mg QL (60 packets / 30 days)	4	NDS QL NM PA
DUVYZAT SUSP 8.86mg/ml QL (420 mL / 30 days)	4	NDS QL NM PA
edaravone (generic of RADICAVA) SOLN 30mg/100ml	4	NDS NM PA
edaravone SOLN 60mg/100ml	4	NDS NM PA
ENSPRYNG SOSY 120mg/ml	4	NDS NM PA
EQUETRO CP12 100mg, 200mg, 300mg	3	
EVRYSDI SOLR .75mg/ml; TABS 5mg	4	NDS NM PA
FIRDAPSE TABS 10mg QL (300 tabs / 30 days)	4	NDS QL NM PA
gabapentin (once-daily) (generic of GRALISE) TABS 300mg QL (180 tabs / 30 days)	1	QL PA
gabapentin (once-daily) (generic of GRALISE) TABS 450mg, 600mg QL (90 tabs / 30 days)	1	QL PA
gabapentin (once-daily) (generic of GRALISE) TABS 750mg, 900mg QL (60 tabs / 30 days)	1	QL PA
GRALISE TABS 300mg QL (180 tabs / 30 days)	3	QL PA
GRALISE TABS 450mg, 600mg QL (90 tabs / 30 days)	3	QL PA
GRALISE TABS 750mg, 900mg QL (60 tabs / 30 days)	3	QL PA
HORIZANT TBCR 300mg, 600mg QL (60 tabs / 30 days)	3	QL PA
lithium SOLN 8meq/5ml	1	

Drug Name	Drug Tier	Requirements/ Limits
lithium carbonate CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 450mg	1	
lithium carbonate (generic of LITHOBID) TBCR 300mg	1	
LITHOBID TBCR 300mg	4	NDS
LYRICA CR TB24 82.5mg, 165mg QL (90 tabs / 30 days)	3	QL PA
LYRICA CR TB24 330mg QL (60 tabs / 30 days)	3	QL PA
MESTINON SOLN 60mg/5ml; TABS 60mg	4	NDS
MESTINON TIMESPAN TBCR 180mg	4	NDS
NUEDEXTA CAP 20-10MG QL (60 caps / 30 days)	4	NDS QL PA
paroxetine mesylate (vasomotor) CAPS 7.5mg QL (30 caps / 30 days) PA applies if 65 years and older	3	QL PA
pregabalin (once-daily) (generic of LYRICA CR) TB24 82.5mg, 165mg QL (90 tabs / 30 days)	1	QL PA
pregabalin (once-daily) (generic of LYRICA CR) TB24 330mg QL (60 tabs / 30 days)	1	QL PA
pyridostigmine bromide (generic of MESTINON) SOLN 60mg/5ml; TABS 60mg	1	
pyridostigmine bromide TABS 30mg	1	
pyridostigmine bromide (generic of MESTINON TIMESPAN) TBCR 180mg	1	
RADICAVA ORS SUSP 105mg/5ml QL (70 mL / 28 days)	4	NDS QL NM PA
RADICAVA ORS STARTER KIT SUSP 105mg/5ml QL (70 mL / 28 days)	4	NDS QL NM PA
riluzole TABS 50mg	1	
SAVELLA TABS 12.5mg, 25mg, 50mg, 100mg QL (60 tabs / 30 days)	3	QL PA
SAVELLA MIS TITR PAK QL (2 packs / year)	3	QL PA
SKYCLARYS CAPS 50mg QL (90 caps / 30 days)	4	NDS QL NM PA
tetrabenazine (generic of XENAZINE) TABS 12.5mg QL (90 tabs / 30 days)	1	QL NM PA
tetrabenazine (generic of XENAZINE) TABS 25mg QL (120 tabs / 30 days)	4	NDS QL NM PA
TIGLUTIK SUSP 50mg/10ml QL (600 mL / 30 days)	4	NDS QL NM PA
TONMYA SUBL 2.8mg QL (60 tabs / 30 days)	4	NDS QL PA
UPLIZNA SOLN 100mg/10ml	4	NDS NM PA
WAINUA SOAJ 45mg/0.8ml QL (1 pen / 30 days)	4	NDS QL NM PA
XENAZINE TABS 12.5mg QL (90 tabs / 30 days)	4	NDS QL NM PA
XENAZINE TABS 25mg QL (120 tabs / 30 days)	4	NDS QL NM PA
MULTIPLE SCLEROSIS AGENTS		
AMPYRA TB12 10mg QL (60 tabs / 30 days)	4	NDS QL NM PA
AUBAGIO TABS 7mg, 14mg QL (30 tabs / 30 days)	4	NDS QL NM PA
AVONEX PSKT 30mcg/0.5ml QL (4 syringes / 28 days)	4	NDS QL NM PA
AVONEX PEN AJKT 30mcg/0.5ml QL (4 injections / 28 days)	4	NDS QL NM PA
BAFIERTAM CPDR 95mg QL (120 caps / 30 days)	4	NDS QL NM PA
BETASERON KIT .3mg QL (14 kits / 28 days)	4	NDS QL NM PA
BRIUMVI SOLN 150mg/6ml	4	NDS NM PA
cladribine (4 tabs) (generic of MAVENCLAD) TBPK 10mg QL (16 tabs per lifetime)	4	NDS QL NM PA
cladribine (5 tabs) (generic of MAVENCLAD) TBPK 10mg QL (20 tabs per lifetime)	4	NDS QL NM PA
cladribine (6 tabs) (generic of MAVENCLAD) TBPK 10mg QL (24 tabs per lifetime)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
cladribine (7 tabs) (generic of MAVENCLAD) TBPK 10mg	4	NDS QL NM PA
QL (28 tabs per lifetime)		
cladribine (8 tabs) (generic of MAVENCLAD) TBPK 10mg	4	NDS QL NM PA
QL (32 tabs per lifetime)		
cladribine (9 tabs) (generic of MAVENCLAD) TBPK 10mg	4	NDS QL NM PA
QL (36 tabs per lifetime)		
cladribine (10 tabs) (generic of MAVENCLAD) TBPK 10mg	4	NDS QL NM PA
QL (40 tabs per lifetime)		
COPAXONE SOSY 20mg/ml	4	NDS QL NM PA
QL (30 syringes / 30 days)		
COPAXONE SOSY 40mg/ml	4	NDS QL NM PA
QL (12 syringes / 28 days)		
dalfampridine (generic of AMPYRA) TB12 10mg	1	QL NM PA
QL (60 tabs / 30 days)		
dimethyl fumarate (generic of TECFIDERA) CPDR 120mg	4	NDS QL NM PA
QL (14 caps / 7 days)		
dimethyl fumarate (generic of TECFIDERA) CPDR 240mg	4	NDS QL NM PA
QL (60 caps / 30 days)		
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (generic of TECFIDERA STARTER PACK)	4	NDS QL NM PA
QL (2 packs / year)		
fingolimod hcl (generic of GILENYA) CAPS .5mg	4	NDS QL NM PA
QL (30 caps / 30 days)		
GILENYA CAPS .25mg, .5mg	4	NDS QL NM PA
QL (30 caps / 30 days)		
glatiramer acetate (generic of COPAXONE) SOSY 20mg/ml	4	NDS QL NM PA
QL (30 syringes / 30 days)		
glatiramer acetate (generic of COPAXONE) SOSY 40mg/ml	4	NDS QL NM PA
QL (12 syringes / 28 days)		
glatopa (generic of COPAXONE) SOSY 20mg/ml	4	NDS QL NM PA
QL (30 syringes / 30 days)		
glatopa (generic of COPAXONE) SOSY 40mg/ml	4	NDS QL NM PA
QL (12 syringes / 28 days)		
KESIMPTA SOAJ 20mg/0.4ml	4	NDS QL NM PA
QL (16 pens / 365 days)		
LEMTRADA SOLN 12mg/1.2ml	4	NDS NM PA
MAVENCLAD (4 TABS) TBPK 10mg	4	NDS QL NM PA
QL (16 tabs per lifetime)		
MAVENCLAD (5 TABS) TBPK 10mg	4	NDS QL NM PA
QL (20 tabs per lifetime)		
MAVENCLAD (6 TABS) TBPK 10mg	4	NDS QL NM PA
QL (24 tabs per lifetime)		
MAVENCLAD (7 TABS) TBPK 10mg	4	NDS QL NM PA
QL (28 tabs per lifetime)		
MAVENCLAD (8 TABS) TBPK 10mg	4	NDS QL NM PA
QL (32 tabs per lifetime)		
MAVENCLAD (9 TABS) TBPK 10mg	4	NDS QL NM PA
QL (36 tabs per lifetime)		
MAVENCLAD (10 TABS) TBPK 10mg	4	NDS QL NM PA
QL (40 tabs per lifetime)		
MAYZENT TABS 1mg, 2mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
MAYZENT TABS .25mg	4	NDS QL NM PA
QL (112 tabs / 28 days)		
MAYZENT STARTER PACK (7) TBPK .25mg	4	NDS QL NM PA
QL (2 packs / year)		
MAYZENT STARTER PACK (12) TBPK .25mg	4	NDS QL NM PA
QL (2 packs / year)		
OCREVUS SOLN 300mg/10ml	4	NDS NM PA
OCREVUS INJ ZUNOVO	4	NDS QL NM PA
QL (23 mL / 180 days)		
PLEGRIDY SOAJ 125mcg/0.5ml	4	NDS QL NM PA
QL (2 pens / 28 days)		

Drug Name	Tier	Requirements/ Limits
PLEGRIDY SOSY 125mcg/0.5ml QL (2 syringes / 28 days)	4	NDS QL NM PA
PLEGRIDY INJ STARTER QL (2 packs / year)	4	NDS QL NM PA
PLEGRIDY PEN INJ STARTER QL (2 packs / year)	4	NDS QL NM PA
PONVORY TABS 20mg QL (30 tabs / 30 days)	4	NDS QL NM PA
PONVORY TAB STARTER QL (2 packs / year)	4	NDS QL NM PA
REBIF SOSY 22mcg/0.5ml, 44mcg/0.5ml QL (12 syringes / 28 days)	4	NDS QL NM PA
REBIF REBIDO INJ TITRATN QL (12 injections / 28 days)	4	NDS QL NM PA
REBIF REBIDOSE SOAJ 22mcg/0.5ml, 44mcg/0.5ml QL (12 injections / 28 days)	4	NDS QL NM PA
REBIF TITRTN INJ PACK QL (12 syringes / 28 days)	4	NDS QL NM PA
TASCENSO ODT TBDP .25mg, .5mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TECFIDERA CPDR 120mg QL (14 caps / 7 days)	4	NDS QL NM PA
TECFIDERA CPDR 240mg QL (60 caps / 30 days)	4	NDS QL NM PA
TECFIDERA CAP STARTER QL (2 packs / year)	4	NDS QL NM PA
teriflunomide (generic of AUBAGIO) TABS 7mg, 14mg QL (30 tabs / 30 days)	4	NDS QL NM PA
TYRUKO CONC 300mg/15ml	4	NDS NM PA
TYSABRI CONC 300mg/15ml	4	NDS NM PA
VUMERITY CPDR 231mg QL (120 caps / 30 days)	4	NDS QL NM PA
ZEPOSIA CAPS .92mg QL (30 caps / 30 days)	4	NDS QL NM PA
ZEPOSIA 7DAY CAP STR PACK QL (2 packs / year)	4	NDS QL NM PA
ZEPOSIA CAP STR KIT QL (2 packs / year)	4	NDS QL NM PA
MUSCULOSKELETAL THERAPY AGENTS		
baclofen SOLN 5mg/5ml	1	PA
baclofen (generic of OZOBAX DS) SOLN 10mg/5ml	1	PA
baclofen (generic of FLEQSUVY) SUSP 25mg/5ml	4	NDS PA
baclofen TABS 5mg QL (90 tabs / 30 days)	1	QL
baclofen TABS 10mg, 15mg, 20mg	1	
BOTOX SOLR 100unit, 200unit	4	NDS PA
carisoprodol (generic of SOMA) TABS 250mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
carisoprodol (generic of SOMA) TABS 350mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
cyclobenzaprine hcl TABS 5mg, 7.5mg, 10mg QL (90 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
DANTRIUM CAPS 25mg	3	
dantrolene sodium (generic of DANTRIUM) CAPS 25mg	1	
dantrolene sodium CAPS 50mg, 100mg	1	
DAXXIFY SOLR 100unit	3	NM PA
DYSPORT SOLR 300unit	3	NM PA
DYSPORT SOLR 500unit	4	NDS NM PA

Drug Name	Tier	Requirements/ Limits
fexmid TABS 7.5mg QL (90 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
FLEQSUVY SUSP 25mg/5ml	4	NDS PA
metaxalone TABS 400mg QL (240 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
metaxalone TABS 800mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
methocarbamol TABS 500mg QL (360 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
methocarbamol TABS 750mg QL (240 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
methocarbamol TABS 1000mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
MYOBLOC SOLN 2500unit/0.5ml, 5000unit/ml	3	NM PA
MYOBLOC SOLN 10000unit/2ml	4	NDS NM PA
ONTRALFY SOLN 2mg/5ml	3	
OZOBAX DS SOLN 10mg/5ml	4	NDS PA
SOMA TABS 250mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
SOMA TABS 350mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
tanlor TABS 1000mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	4	NDS QL PA
tizanidine hcl (generic of ZANAFLEX) CAPS 2mg, 4mg, 6mg; TABS 4mg	1	
tizanidine hcl CAPS 8mg	4	NDS
tizanidine hcl TABS 2mg	1	
XEOMIN SOLR 50unit	3	NM PA
XEOMIN SOLR 100unit, 200unit	4	NDS NM PA
ZANAFLEX CAPS 8mg	4	NDS
ZANAFLEX TABS 4mg	3	
NARCOLEPSY/CATAPLEXY		
armodafinil (generic of NUVIGIL) TABS 50mg QL (60 tabs / 30 days)	1	QL PA
armodafinil (generic of NUVIGIL) TABS 150mg, 200mg, 250mg QL (30 tabs / 30 days)	1	QL PA
LUMRYZ PACK 4.5gm, 6gm, 7.5gm, 9gm QL (30 packets / 30 days)	4	NDS QL NM PA
LUMRYZ PAK STARTER QL (2 packs / year)	4	NDS QL NM PA
modafinil (generic of PROVIGIL) TABS 100mg QL (30 tabs / 30 days)	1	QL PA
modafinil (generic of PROVIGIL) TABS 200mg QL (60 tabs / 30 days)	1	QL PA
NUVIGIL TABS 50mg QL (60 tabs / 30 days)	3	QL PA
NUVIGIL TABS 150mg, 200mg, 250mg QL (30 tabs / 30 days)	4	NDS QL PA
PROVIGIL TABS 100mg QL (30 tabs / 30 days)	4	NDS QL PA
PROVIGIL TABS 200mg QL (60 tabs / 30 days)	4	NDS QL PA
sodium oxybate (generic of XYREM) SOLN 500mg/ml QL (540 mL / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
SUNOSI TABS 75mg, 150mg QL (30 tabs / 30 days)	3	QL PA
WAKIX TABS 4.45mg, 17.8mg QL (60 tabs / 30 days)	4	NDS QL NM PA
XYREM SOLN 500mg/ml QL (540 mL / 30 days)	4	NDS QL NM PA
XYWAV SOL 0.5GM/ML QL (540 mL / 30 days)	4	NDS QL NM PA
PSYCHOTHERAPEUTIC-MISC		
acamprosate calcium TBEC 333mg	1	
BRIXADI SOSY 8mg/0.16ml, 16mg/0.32ml, 24mg/0.48ml, 32mg/0.64ml, 64mg/0.18ml, 96mg/0.27ml, 128mg/0.36ml	4	NDS NM
buprenorphine hcl SUBL 2mg QL (180 tabs / 30 days)	1	QL
buprenorphine hcl SUBL 8mg QL (120 tabs / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (generic of SUBOXONE) QL (180 films / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) (generic of SUBOXONE) QL (90 films / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) (generic of SUBOXONE) QL (120 films / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv) (generic of SUBOXONE) QL (90 films / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv) QL (180 tabs / 30 days)	1	QL
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv) QL (120 tabs / 30 days)	1	QL
bupropion hcl (smoking deterrent) TB12 150mg QL (60 tabs / 30 days)	1	QL
CHANTIX TABS .5mg, 1mg QL (56 tabs / 28 days)	3	QL
CHANTIX CONTINUING MONTH TABS 1mg QL (56 tabs / 28 days)	3	QL
CHANTIX TAB 0.5& 1MG QL (2 packs / year)	3	QL
disulfiram TABS 250mg, 500mg	1	
KLOXXADO LIQD 8mg/0.1ml	2	
lofexidine hcl (generic of LUCEMYRA) TABS .18mg QL (228 tabs / 14 days)	4	NDS QL PA
naloxone hcl LIQD 4mg/0.1ml; SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml	1	
naltrexone hcl TABS 50mg	1	
NICOTROL NS SOLN 10mg/ml	3	
OPVEE SOLN 2.7mg/0.1ml	3	
REXTOVY LIQD 4mg/0.25ml	3	
SUBLOCADE SOSY 100mg/0.5ml, 300mg/1.5ml	4	NDS NM
SUBOXONE MIS 2-0.5MG QL (180 films / 30 days)	3	QL
SUBOXONE MIS 4-1MG QL (90 films / 30 days)	3	QL
SUBOXONE MIS 8-2MG QL (120 films / 30 days)	3	QL
SUBOXONE MIS 12-3MG QL (90 films / 30 days)	3	QL
varenicline tartrate (generic of CHANTIX) TABS .5mg, 1mg QL (56 tabs / 28 days)	1	QL
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack QL (2 packs / year)	1	QL
VIVITROL SUSR 380mg	4	NDS NM
ZUBSOLV SUB 0.7-0.18 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 1.4-0.36 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 2.9-0.71 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 5.7-1.4 QL (90 tabs / 30 days)	3	QL

Drug Name	Tier	Requirements/ Limits
ZUBSOLV SUB 8.6-2.1 QL (60 tabs / 30 days)	3	QL
ZUBSOLV SUB 11.4-2.9 QL (30 tabs / 30 days)	3	QL
ZURNAI SOAJ 1.5mg/0.5ml	3	
ENDOCRINE AND METABOLIC		
ANDROGENS		
AVEED SOLN 750mg/3ml	4	NDS NM PA
AZMIRO SOSY 200mg/ml	3	PA
danazol CAPS 50mg, 100mg, 200mg	1	
depo-testosterone SOLN 100mg/ml, 200mg/ml	1	PA
JATENZO CAPS 158mg, 198mg QL (120 caps / 30 days)	3	QL PA
JATENZO CAPS 237mg QL (60 caps / 30 days)	4	NDS QL PA
TESTIM GEL 1% QL (300 gm / 30 days)	3	QL PA
testosterone GEL 1%, 25mg/2.5gm, 50mg/5gm QL (300 gm / 30 days)	1	QL PA
testosterone GEL 20.25mg/1.25gm, 40.5mg/2.5gm QL (150 gm / 30 days)	1	QL PA
testosterone SOLN 30mg/act QL (180 mL / 30 days)	1	QL PA
testosterone cypionate SOLN 100mg/ml, 200mg/ml	1	PA
testosterone enanthate SOLN 200mg/ml	1	PA
testosterone pump (generic of ANDROGEL PUMP) GEL 1.62% QL (150 gm / 30 days)	1	QL PA
TLANDO CAPS 112.5mg QL (120 caps / 30 days)	3	QL PA
VOGELXO GEL 50mg/5gm QL (300 gm / 30 days)	3	QL PA
VOGELXO PUMP GEL 1% QL (300 gm / 30 days)	3	QL PA
XYOSTED SOAJ 50mg/0.5ml, 75mg/0.5ml, 100mg/0.5ml	3	PA

Drug Name	Tier	Requirements/ Limits
ANTIDIABETICS		
acarbose TABS 25mg, 50mg, 100mg	1	
ACTOPLUS MET TAB 15-850MG QL (90 tabs / 30 days)	3	QL
ACTOS TABS 15mg, 30mg, 45mg QL (30 tabs / 30 days)	3	QL
alogliptin benzoate TABS 6.25mg, 12.5mg, 25mg QL (30 tabs / 30 days)	3	QL ST
alogliptin-metformin hcl tab 12.5-500 mg QL (60 tabs / 30 days)	3	QL ST
alogliptin-metformin hcl tab 12.5-1000 mg QL (60 tabs / 30 days)	3	QL ST
alogliptin-pioglitazone tab 12.5-30 mg QL (30 tabs / 30 days)	3	QL ST
alogliptin-pioglitazone tab 25-15 mg QL (30 tabs / 30 days)	3	QL ST
alogliptin-pioglitazone tab 25-30 mg QL (30 tabs / 30 days)	3	QL ST
alogliptin-pioglitazone tab 25-45 mg QL (30 tabs / 30 days)	3	QL ST
BRYNOVIN SOLN 25mg/ml QL (120 mL / 30 days)	3	QL ST
dapagliflozin propanediol (generic of FARXIGA) TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
DUETACT TAB 30-2MG QL (30 tabs / 30 days)	3	QL
DUETACT TAB 30-4MG QL (30 tabs / 30 days)	3	QL
exenatide SOPN 5mcg/0.02ml, 10mcg/0.04ml QL (1 pen / 30 days)	1	QL PA
FARXIGA TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
glimepiride TABS 1mg, 2mg QL (90 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
glimepiride TABS 3mg, 4mg QL (60 tabs / 30 days)	1	QL
glipizide TABS 2.5mg QL (480 tabs / 30 days)	1	QL
glipizide TABS 5mg QL (240 tabs / 30 days)	1	QL
glipizide TABS 10mg QL (120 tabs / 30 days)	1	QL
glipizide TB24 2.5mg QL (90 tabs / 30 days)	1	QL
glipizide (generic of GLUCOTROL XL) TB24 5mg QL (90 tabs / 30 days)	1	QL
glipizide TB24 10mg QL (60 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 2.5-250 mg QL (240 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 2.5-500 mg QL (120 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 5-500 mg QL (120 tabs / 30 days)	1	QL
GLUCOTROL XL TB24 5mg QL (90 tabs / 30 days)	3	QL
GLYXAMBI TAB 10-5 MG QL (30 tabs / 30 days)	2	QL
GLYXAMBI TAB 25-5 MG QL (30 tabs / 30 days)	2	QL
INVOKAMET TAB 50-500MG QL (120 tabs / 30 days)	3	QL
INVOKAMET TAB 50-1000 QL (60 tabs / 30 days)	3	QL
INVOKAMET TAB 150-500 QL (60 tabs / 30 days)	3	QL
INVOKAMET TAB 150-1000 QL (60 tabs / 30 days)	3	QL
INVOKAMET XR TAB 50-500MG QL (120 tabs / 30 days)	3	QL
INVOKAMET XR TAB 50-1000 QL (60 tabs / 30 days)	3	QL
INVOKAMET XR TAB 150-500 QL (60 tabs / 30 days)	3	QL
INVOKAMET XR TAB 150-1000 QL (60 tabs / 30 days)	3	QL
INVOKANA TABS 100mg QL (60 tabs / 30 days)	3	QL
INVOKANA TABS 300mg QL (30 tabs / 30 days)	3	QL
JANUMET TAB 50-500MG QL (60 tabs / 30 days)	2	QL
JANUMET TAB 50-1000 QL (60 tabs / 30 days)	2	QL
JANUMET XR TAB 50-500MG QL (60 tabs / 30 days)	2	QL
JANUMET XR TAB 50-1000 QL (60 tabs / 30 days)	2	QL
JANUMET XR TAB 100-1000 QL (30 tabs / 30 days)	2	QL
JANUVIA TABS 25mg, 50mg, 100mg QL (30 tabs / 30 days)	2	QL
JARDIANCE TABS 10mg, 25mg QL (30 tabs / 30 days)	2	QL
JENTADUETO TAB 2.5-500 QL (60 tabs / 30 days)	2	QL
JENTADUETO TAB 2.5-850 QL (60 tabs / 30 days)	2	QL
JENTADUETO TAB 2.5-1000 QL (60 tabs / 30 days)	2	QL
JENTADUETO TAB XR 2.5-1000MG QL (60 tabs / 30 days)	2	QL
JENTADUETO TAB XR 5-1000MG QL (30 tabs / 30 days)	2	QL
liraglutide (generic of VICTOZA) SOPN 6mg/ml QL (3 pens / 30 days)	1	QL PA
metformin hcl (generic of RIOMET) SOLN 500mg/5ml QL (765 mL / 30 days)	1	QL ST
metformin hcl TABS 500mg QL (150 tabs / 30 days)	1	QL
metformin hcl TABS 625mg QL (120 tabs / 30 days)	4	NDS QL ST
metformin hcl TABS 750mg QL (90 tabs / 30 days)	4	NDS QL ST

Drug Name	Tier	Limits
metformin hcl TABS 850mg	1	QL
QL (90 tabs / 30 days)		
metformin hcl TABS 1000mg	1	QL
QL (75 tabs / 30 days)		
metformin hcl TB24 500mg	1	QL
QL (120 tabs / 30 days) (generic of GLUCOPHAGE XR)		
metformin hcl TB24 500mg	1	QL PA
QL (120 tabs / 30 days) (generic of FORTAMET)		
metformin hcl TB24 500mg	1	QL PA
QL (120 tabs / 30 days) (generic of GLUMETZA)		
metformin hcl TB24 750mg	1	QL
QL (60 tabs / 30 days) (generic of GLUCOPHAGE XR)		
metformin hcl TB24 1000mg	1	QL PA
QL (60 tabs / 30 days) (generic of FORTAMET)		
metformin hcl TB24 1000mg	1	QL PA
QL (60 tabs / 30 days) (generic of GLUMETZA)		
miglitol TABS 25mg, 50mg, 100mg	1	
MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml	2	QL PA
QL (4 pens / 28 days)		
nateglinide TABS 60mg, 120mg	1	QL
QL (90 tabs / 30 days)		
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml	2	QL PA
QL (1 pen / 28 days)		
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	2	QL PA
QL (1 pen / 28 days)		
OZEMPIC (2MG/DOSE) SOPN 8mg/3ml	2	QL PA
QL (1 pen / 28 days)		
pioglitazone hcl (generic of ACTOS) TABS 15mg, 30mg, 45mg	1	QL
QL (30 tabs / 30 days)		
pioglitazone hcl-glimepiride tab 30-2 mg (generic of DUETACT)	1	QL
QL (30 tabs / 30 days)		
pioglitazone hcl-glimepiride tab 30-4 mg (generic of DUETACT)	1	QL
QL (30 tabs / 30 days)		
pioglitazone hcl-metformin hcl tab 15-500 mg	1	QL
QL (90 tabs / 30 days)		
pioglitazone hcl-metformin hcl tab 15-850 mg (generic of ACTOPLUS MET)	1	QL
QL (90 tabs / 30 days)		
repaglinide TABS 2mg	1	QL
QL (240 tabs / 30 days)		
repaglinide TABS .5mg, 1mg	1	QL
QL (120 tabs / 30 days)		
RYBELSUS TABS 3mg, 7mg, 14mg	2	QL PA
QL (30 tabs / 30 days)		
saxagliptin hcl TABS 2.5mg, 5mg	1	QL
QL (30 tabs / 30 days)		
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg	1	QL
QL (60 tabs / 30 days)		
saxagliptin-metformin hcl tab er 24hr 5-500 mg	1	QL
QL (30 tabs / 30 days)		
saxagliptin-metformin hcl tab er 24hr 5-1000 mg	1	QL
QL (30 tabs / 30 days)		
SEGLUROMET TAB 2.5-500	3	QL
QL (120 tabs / 30 days)		
SEGLUROMET TAB 2.5-1000	3	QL
QL (60 tabs / 30 days)		
SEGLUROMET TAB 7.5-500	3	QL
QL (60 tabs / 30 days)		
SEGLUROMET TAB 7.5-1000	3	QL
QL (60 tabs / 30 days)		
sitagliptin TABS 25mg, 50mg, 100mg	1	QL
QL (30 tabs / 30 days)		
sitagliptin free base-metformin hcl tab 50-500 mg	1	QL
QL (60 tabs / 30 days)		

Drug Name	Tier	Requirements/ Limits
sitagliptin free base-metformin hcl tab 50-1000 mg	1	QL
QL (60 tabs / 30 days)		
sitagliptin free base-metformin hcl tab er 24hr 50-500 mg	1	QL
QL (60 tabs / 30 days)		
sitagliptin free base-metformin hcl tab er 24hr 50-1000 mg	1	QL
QL (60 tabs / 30 days)		
sitagliptin free base-metformin hcl tab er 24hr 100-1000 mg	1	QL
QL (30 tabs / 30 days)		
STEGLATRO TABS 5mg	3	QL
QL (90 tabs / 30 days)		
STEGLATRO TABS 15mg	3	QL
QL (30 tabs / 30 days)		
STEGLUJAN TAB 5-100MG	3	QL
QL (30 tabs / 30 days)		
STEGLUJAN TAB 15-100MG	3	QL
QL (30 tabs / 30 days)		
SYMLINPEN 60 SOPN 1500mcg/1.5ml	4	NDS PA
SYMLINPEN 120 SOPN 2700mcg/2.7ml	4	NDS PA
SYNJARDY TAB 5-500MG	2	QL
QL (120 tabs / 30 days)		
SYNJARDY TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY TAB 12.5-500	2	QL
QL (60 tabs / 30 days)		
SYNJARDY TAB 12.5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 10-1000	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 12.5-1000	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 25-1000	2	QL
QL (30 tabs / 30 days)		
TRADJENTA TABS 5mg	2	QL
QL (30 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	2	QL
QL (60 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 10-5-1000MG	2	QL
QL (30 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	2	QL
QL (60 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 25-5-1000MG	2	QL
QL (30 tabs / 30 days)		
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	2	QL PA
QL (4 pens / 28 days)		
TZIELD SOLN 2mg/2ml	4	NDS NM PA
VICTOZA SOPN 18mg/3ml	3	QL PA
QL (3 pens / 30 days)		
XIGDUO XR TAB 2.5-1000	2	QL
QL (60 tabs / 30 days)		
XIGDUO XR TAB 5-500MG	2	QL
QL (60 tabs / 30 days)		
XIGDUO XR TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
XIGDUO XR TAB 10-500MG	2	QL
QL (30 tabs / 30 days)		
XIGDUO XR TAB 10-1000	2	QL
QL (30 tabs / 30 days)		
ZITUVIMET TAB 50-500MG	3	QL ST
QL (60 tabs / 30 days)		
ZITUVIMET TAB 50-1000	3	QL ST
QL (60 tabs / 30 days)		
ZITUVIMET XR TAB 50-500MG	3	QL ST
QL (60 tabs / 30 days)		
ZITUVIMET XR TAB 50-1000	3	QL ST
QL (60 tabs / 30 days)		
ZITUVIMET XR TAB 100-1000	3	QL ST
QL (30 tabs / 30 days)		
ZITUVIO TABS 25mg, 50mg, 100mg	3	QL ST
QL (30 tabs / 30 days)		
ANTIDIABETICS, INSULINS		
ADMELOG SOLN 100unit/ml	2	B/D
ADMELOG SOLOSTAR SOPN 100unit/ml	2	
AFREZZA POWD 4unit, 8unit	3	
AFREZZA POWD 12unit	4	NDS
AFREZZA POW 4-8 UNIT	4	NDS

Drug Name	Drug Requirements/ Tier	Limits
AFREZZA POW 4-8-12	4	NDS
AFREZZA POW 8-12UNIT	4	NDS
ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY	2	PA
APIDRA SOLN 100unit/ml	3	B/D
APIDRA SOLOSTAR SOPN 100unit/ml	3	
BASAGLAR KWIKPEN SOPN 100unit/ml	2	
BASAGLAR TEMPO PEN SOPN 100unit/ml	2	
CEQUR SIMPL KIT PATCH 2U (3-DAY) QL (10 patches / 30 days)	3	QL PA
CEQUR SIMPL KIT PATCH 2U (4-DAY) QL (8 patches / 24 days)	3	QL PA
CEQUR SIMPL MIS INSERTER QL (2 inserters / year)	3	QL PA
FIASP SOLN 100unit/ml	2	B/D
FIASP FLEXTOUCH SOPN 100unit/ml	2	
FIASP PENFILL SOCT 100unit/ml	2	
FIASP PUMPCART SOCT 100unit/ml	2	B/D
GAUZE PADS 2X2	2	PA
HUMALOG SOCT 100unit/ml	3	
HUMALOG SOLN 100unit/ml	3	B/D
HUMALOG JUNIOR KWIKPEN SOPN 100unit/ml	3	
HUMALOG KWIKPEN SOPN 100unit/ml, 200unit/ml	3	
HUMALOG MIX INJ 50/50KWP	3	
HUMALOG MIX INJ 75/25KWP	3	
HUMALOG MIX SUS 75/25	3	
HUMALOG TEMPO PEN SOPN 100unit/ml	3	
HUMULIN INJ 70/30	3	
HUMULIN INJ 70/30KWP	3	
HUMULIN N SUSP 100unit/ml	3	
HUMULIN N KWIKPEN SUPN 100unit/ml	3	
HUMULIN R SOLN 100unit/ml	3	B/D
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	4	NDS B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	4	NDS
INSULIN GLARGINE MAX SOLO SOPN 300unit/ml	3	
INSULIN GLARGINE SOLOSTAR SOPN 300unit/ml	3	
INSULIN GLARGINE-YFGN SOLN 100unit/ml; SOPN 100unit/ml	3	
INSULIN LISP INJ PROT KWP	3	
INSULIN LISPRO SOLN 100unit/ml	3	B/D
INSULIN LISPRO JUNIOR KWI SOPN 100unit/ml	3	
INSULIN LISPRO KWIKPEN SOPN 100unit/ml	3	
INSULIN PEN NEEDLES: EMBECTA-BD	2	PA
INSULIN SAFETY NEEDLES: EMBECTA-BD	2	PA
INSULIN SYRINGES: EMBECTA-BD	2	PA
KIRSTY SOLN 100unit/ml	3	B/D
KIRSTY SOPN 100unit/ml	3	
LANTUS SOLN 100unit/ml	2	
LANTUS SOLOSTAR SOPN 100unit/ml	2	
LYUMJEV SOLN 100unit/ml	3	B/D
LYUMJEV KWIKPEN SOPN 100unit/ml, 200unit/ml	3	
LYUMJEV TEMPO PEN SOPN 100unit/ml	3	
MERILOG SOLN 100unit/ml	3	B/D
MERILOG SOLOSTAR SOPN 100unit/ml	3	
NOVOLIN70/30 INJ RELION	3	
NOVOLIN INJ 70/30	2	
NOVOLIN INJ 70/30 FP	2	
NOVOLIN INJ 70/30 FP RELION	3	

Drug Name	Drug Tier	Requirements/ Limits
NOVOLIN N SUSP 100unit/ml	2	
NOVOLIN N FLEXPEN SUPN 100unit/ml	2	
NOVOLIN N FLEXPEN RELION SUPN 100unit/ml	3	
NOVOLIN N RELION SUSP 100unit/ml	3	
NOVOLIN R SOLN 100unit/ml	2	B/D
NOVOLIN R FLEXPEN SOPN 100unit/ml	2	
NOVOLIN R FLEXPEN RELION SOPN 100unit/ml	3	
NOVOLIN R RELION SOLN 100unit/ml	3	B/D
NOVOLOG SOLN 100unit/ml	2	B/D
NOVOLOG FLEXPEN SOPN 100unit/ml	2	
NOVOLOG FLEXPEN RELION SOPN 100unit/ml	2	
NOVOLOG MIX INJ 70/30	2	
NOVOLOG MIX INJ FLEX REL	3	
NOVOLOG MIX INJ FLEXPEN	2	
NOVOLOG PENFILL SOCT 100unit/ml	2	
NOVOLOG RELI INJ 70/30	3	
NOVOLOG RELION SOLN 100unit/ml	2	B/D
OMNIPOD 5 DX KIT INT G7G6 QL (1 kit / year)	3	QL PA
OMNIPOD 5 DX MIS POD G7G6 QL (15 pods / 30 days)	3	QL PA
OMNIPOD 5 L2 KIT INTRO G6 QL (1 kit / year)	3	QL PA
OMNIPOD 5 L2 MIS PODS G6 QL (15 pods / 30 days)	3	QL PA
OMNIPOD DASH KIT INTRO QL (1 kit / year)	3	QL PA
OMNIPOD DASH MIS PODS QL (15 pods / 30 days)	3	QL PA
REZVOGLAR KWIKPEN SOPN 100unit/ml	3	
SEMGLEE SOLN 100unit/ml; SOPN 100unit/ml	3	
SOLIQUA INJ 100/33 QL (5 pens / 25 days)	2	QL
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	2	
TOUJEO SOLOSTAR SOPN 300unit/ml	2	
TRESIBA SOLN 100unit/ml	3	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	3	
V-GO 20 KIT QL (30 devices / 30 days)	3	QL PA
V-GO 30 KIT QL (30 devices / 30 days)	3	QL PA
V-GO 40 KIT QL (30 devices / 30 days)	3	QL PA
XULTOPHY INJ 100/3.6 QL (5 pens / 30 days)	2	QL
CALCIUM REGULATORS		
ACTONEL TABS 35mg, 150mg	3	
alendronate sodium SOLN 70mg/75ml	1	ST
alendronate sodium TABS 10mg, 35mg	1	
alendronate sodium (generic of FOSAMAX) TABS 70mg	1	
ATELVIA TBEC 35mg	3	ST
BILDYOS SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
BINOSTO TBEF 70mg	3	ST
BONSITY SOPN 560mcg/2.24ml QL (1 pen / 28 days)	4	NDS QL NM PA
calcitonin (salmon) inj (generic of MIACALCIN) SOLN 200unit/ml	4	NDS B/D
calcitonin (salmon) spray SOLN 200unit/act	1	B/D
EVENITY SOSY 105mg/1.17ml	4	NDS NM PA

Drug Name	Tier	Requirements/ Limits
FORTEO SOPN 560mcg/2.24ml QL (1 pen / 28 days)	4	NDS QL NM PA
FOSAMAX TABS 70mg	3	
FOSAMAX + D TAB 70-2800	3	ST
FOSAMAX + D TAB 70-5600	3	ST
ibandronate sodium SOLN 3mg/3ml QL (1 injection / 90 days)	1	B/D QL
ibandronate sodium TABS 150mg	1	B/D
MIACALCIN SOLN 200unit/ml	4	NDS B/D
OSPOMYV SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
PAMIDRONATE DISODIUM SOLN 6mg/ml	2	B/D
pamidronate disodium SOLN 30mg/10ml, 90mg/10ml	1	B/D
PROLIA SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
RECLAST SOLN 5mg/100ml	3	B/D NM
risedronate sodium TABS 5mg, 30mg	1	
risedronate sodium (generic of ACTONEL) TABS 35mg, 150mg	1	
risedronate sodium (generic of ATELVIA) TBEC 35mg	1	ST
TERIPARATIDE SOPN 560mcg/2.24ml QL (1 pen / 28 days) (ALVOGEN product)	4	NDS QL NM PA
teriparatide (generic of FORTEO) SOPN 560mcg/2.24ml QL (1 pen / 28 days)	4	NDS QL NM PA
TYMLOS SOPN 3120mcg/1.56ml QL (1 pen / 30 days)	4	NDS QL NM PA
WYOST SOLN 120mg/1.7ml	4	NDS NM PA
XGEVA SOLN 120mg/1.7ml	4	NDS NM PA
XTRENBO SOLN 120mg/1.7ml	3	NM PA
YORVIPATH SOPN 168mcg/0.56ml, 294mcg/0.98ml, 420mcg/1.4ml	4	NDS NM PA
zoledronic acid CONC 4mg/5ml	1	B/D NM
ZOLEDRONIC ACID SOLN 4mg/100ml	3	B/D NM
zoledronic acid (generic of RECLAST) SOLN 5mg/100ml	1	B/D NM
CHELATING AGENTS		
CHEMET CAPS 100mg	4	NDS
CUVRIOR TABS 300mg	4	NDS NM PA
deferasirox (generic of JADENU SPRINKLE) PACK 90mg, 180mg, 360mg	4	NDS NM PA
deferasirox (generic of JADENU) TABS 90mg	1	NM PA
deferasirox (generic of JADENU) TABS 180mg, 360mg	3	NM PA
deferasirox (generic of EXJADE) TBSO 125mg	1	NM PA
deferasirox (generic of EXJADE) TBSO 250mg, 500mg	4	NDS NM PA
deferiprone TABS 500mg	4	NDS NM PA
deferiprone (generic of FERRIPROX) TABS 1000mg	4	NDS NM PA
deferoxamine mesylate SOLR 2gm	1	NM PA
deferoxamine mesylate (generic of DESFERAL) SOLR 500mg	1	NM PA
DEPEN TITRATABS TABS 250mg	4	NDS NM
DESFERAL SOLR 500mg	3	NM PA
EXJADE TBSO 125mg, 250mg, 500mg	4	NDS NM PA
FERRIPROX SOLN 100mg/ml; TABS 1000mg	4	NDS NM PA
FERRIPROX TWICE-A-DAY TABS 1000mg	4	NDS NM PA
JADENU TABS 90mg, 180mg, 360mg	4	NDS NM PA
JADENU SPRINKLE PACK 90mg, 180mg, 360mg	4	NDS NM PA
kionex SUSP 15gm/60ml	1	

Drug Name	Drug Requirements/ Tier	Limits
LOKELMA PACK 5gm, 10gm	2	
penicillamine (generic of DEPEN TITRATABS) TABS 250mg	4	NDS NM
sodium polystyrene sulfonate SUSP 15gm/60ml	1	
sodium polystyrene sulfonate powder	1	
sps SUSP 15gm/60ml	1	
sps rectal SUSP 15gm/60ml	1	
SYPRINE CAPS 250mg	4	NDS NM PA
trientine hcl (generic of SYPRINE) CAPS 250mg	4	NDS NM PA
trientine hcl CAPS 500mg	4	NDS NM PA
VELTASSA PACK 1gm, 8.4gm, 16.8gm, 25.2gm	2	
CONTRACEPTIVES		
afirmelle	1	
altavera	1	
alyacen 1/35	1	
alyacen 7/7/7	1	
amethyst	1	
ANNOVERA MIS	3	
apri	1	
aranelle	1	
ashlyna	1	
aubra eq	1	
aurovela 1/20	1	
aurovela 24 fe	1	
aurovela fe 1.5/30	1	
aurovela fe 1/20	1	
AVERI TAB	3	
aviane	1	
ayuna	1	
azurette	1	
BALCOLTRA TAB 0.1-20	3	
balziva	1	
BEYAZ TAB	3	
blisovi 24 fe	1	
blisovi fe 1.5/30	1	
blisovi fe 1/20	1	
briellyn	1	
camila TABS .35mg	1	
camrese	1	
camrese lo	1	
chateal eq	1	
cryselle	1	
cyred eq	1	
dasetta 1/35	1	
dasetta 7/7/7	1	
daysee	1	
deblitane TABS .35mg	1	
DEPO-PROVERA CONTRACEPTIV SUSP 150mg/ml; SUSY 150mg/ml	3	
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	2	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	
dolishale	1	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (generic of BEYAZ)	1	
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (generic of SAFYRAL)	1	
drospirenone-ethinyl estradiol tab 3-0.02 mg (generic of YAZ)	1	
drospirenone-ethinyl estradiol tab 3-0.03 mg (generic of YASMIN 28)	1	
elinest	1	
eluryng (generic of NUVARING)	1	
emzahh TABS .35mg	1	
enilloring (generic of NUVARING)	1	
enskyce	1	
errin TABS .35mg	1	
estarylla	1	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	1	
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (generic of NUVARING)	1	
falmina	1	
feirza 1.5/30	1	
feirza 1/20	1	

Drug Name	Drug Requirements/ Tier	Limits
FEMLYV TAB 1/0.02MG	3	
finzala	1	
galbriela	1	
gemmily (generic of TAYTULLA)	1	
hailey 1.5/30	1	
hailey 24 fe	1	
hailey fe 1/20	1	
heather TABS .35mg	1	
iclevia	1	
incassia TABS .35mg	1	
introvale	1	
isibloom	1	
jaimiess	1	
jasmiel (generic of YAZ)	1	
jencycla TABS .35mg	1	
jolessa	1	
joyeaux (generic of BALCOLTRA)	1	
juleber	1	
junel 1.5/30	1	
junel 1/20	1	
junel fe 1.5/30	1	
junel fe 1/20	1	
junel fe 24	1	
kaitlib fe	1	
kariva	1	
kelnor 1/35	1	
kurvelo	1	
larin 1.5/30	1	
larin 1/20	1	
larin 24 fe	1	
larin fe 1.5/30	1	
larin fe 1/20	1	
lessina	1	
levonest	1	
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	1	
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	1	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	1	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	1	
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (generic of BALCOLTRA)	1	
levora 0.15/30-28	1	
LILETTA IUD 20.1mcg/day	2	NM
LO LOESTRIN TAB 1-10-10	3	
loestrin 1.5/30-21	1	
loestrin 1/20-21	1	
loestrin fe 1.5/30	1	
loestrin fe 1/20	1	
lojaimiess	1	
loryna (generic of YAZ)	1	
low-ogestrel	1	
luizza 1.5/30	1	
luizza 1/20	1	
lutera	1	
lyleq TABS .35mg	1	
lyza TABS .35mg	1	
marlissa	1	
medroxyprogesterone acetate (contraceptive) (generic of DEPO-PROVERA CONTRACEPTIV) SUSP 150mg/ml; SUSY 150mg/ml	1	
meleya TABS .35mg	1	
merzee (generic of TAYTULLA)	1	
mibelas 24 fe	1	
microgestin 1.5/30	1	
microgestin 1/20	1	
microgestin fe 1.5/30	1	
microgestin fe 1/20	1	
mili	1	

Drug Name	Drug Requirements/ Tier	Limits
minzoya (generic of BALCOLTRA)	1	
mono-linyah	1	
NATAZIA TAB	3	
necon 0.5/35-28	1	
NEXPLANON IMPL 68mg	2	NM
NEXTSTELLIS TAB 3-14.2MG	3	
nikki (generic of YAZ)	1	
nora-be TABS .35mg	1	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	1	
norethindrone (contraceptive) TABS .35mg	1	
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	1	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	1	
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	1	
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (generic of TAYTULLA)	1	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	1	
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	
norlyroc TABS .35mg	1	
nortrel 0.5/35 (28)	1	
nortrel 1/35 (21)	1	
nortrel 1/35 (28)	1	
nortrel 7/7/7	1	
NUVARING MIS	3	
nylia 1/35	1	
nylia 7/7/7	1	
orquidea TABS .35mg	1	

Drug Name	Drug Requirements/ Tier	Limits
PHEXX GEL	3	
PHEXXI GEL	3	
philith	1	
pimtrea	1	
portia-28	1	
reclipsen	1	
rivelsa	1	
rosyrah	1	
SAFYRAL TAB	3	
setlakin	1	
sharobel TABS .35mg	1	
simliya	1	
simpesse	1	
sprintec 28	1	
sronyx	1	
syeda (generic of YASMIN 28)	1	
tarina 24 fe	1	
tarina fe 1/20 eq	1	
TAYTULLA CAP 1MG/20MC	3	
tilia fe	1	
tri-estarylla	1	
tri-legest fe	1	
tri-linyah	1	
tri-lo-estarylla	1	
tri-lo-marzia	1	
tri-lo-mili	1	
tri-lo-sprintec	1	
tri-mili	1	
tri-sprintec	1	
tri-vylibra	1	
tri-vylibra lo	1	
turqoz	1	
tydemy (generic of SAFYRAL)	1	
valtya 1/35	1	
valtya 1/50	1	
velivet	1	
vestura (generic of YAZ)	1	
vienva	1	
viorele	1	
vyfemla	1	
vylibra	1	
wera	1	
wymzya fe	1	

Drug Name	Drug Requirements/ Tier	Limits
xarah fe	1	
xelria fe	1	
xulane	1	
YASMIN 28 TAB 3-0.03MG	3	
YAZ TAB 3-0.02MG	3	
zafemy	1	
zovia 1/35	1	
zumandimine (generic of YASMIN 28)	1	
ESTROGENS		
abigale (generic of ACTIVELLA)	2	
abigale lo	2	
ACTIVELLA TAB 1-0.5MG	3	
BIJUVA CAP 0.5-100	3	
BIJUVA CAP 1-100MG	3	
CLIMARA PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	3	
CLIMARA PRO DIS WEEKLY	3	
COMBIPATCH DIS	3	
DELESTROGEN OIL 10mg/ml, 20mg/ml	3	
DEPO-ESTRADIOL OIL 5mg/ml	3	
DIVIGEL GEL .25mg/0.25gm, .5mg/0.5gm, .75mg/0.75gm, 1mg/gm, 1.25mg/1.25gm	3	
dotti (generic of VIVELLE-DOT) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	
ELESTRIN GEL .06%	3	
ESTRACE CREA .1mg/gm	3	
estradiol (generic of ESTROGEL) GEL .06%	3	
estradiol (generic of DIVIGEL) GEL .25mg/0.25gm, .5mg/0.5gm, .75mg/0.75gm, 1mg/gm, 1.25mg/1.25gm	3	
estradiol (generic of VIVELLE-DOT) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	
estradiol (generic of CLIMARA) PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	2	
estradiol TABS .5mg, 1mg, 2mg	1	
estradiol & norethindrone acetate tab 0.5-0.1 mg	2	
estradiol & norethindrone acetate tab 1-0.5 mg (generic of ACTIVELLA)	2	
estradiol vaginal (generic of ESTRACE) CREA .1mg/gm	1	
estradiol vaginal (generic of VAGIFEM) TABS 10mcg	1	
estradiol valerate (generic of DELESTROGEN) OIL 10mg/ml, 20mg/ml	1	
estradiol valerate OIL 40mg/ml	1	
ESTRING RING 7.5mcg/24hr	3	
estrogens, conjugated (generic of PREMARIN) TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	2	
EVAMIST SOLN 1.53mg/spray	3	
FEMRING RING .05mg/24hr, .1mg/24hr	3	
fyavolv tab 0.5mg-2.5mcg	2	
fyavolv tab 1mg-5mcg	2	
IMVEXXY MAINTENANCE PACK INST 4mcg, 10mcg	3	PA
IMVEXXY STARTER PACK INST 4mcg, 10mcg	3	PA
jinteli	2	
lyllana (generic of MINIVELLE) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	
MENOSTAR PTWK 14mcg/24hr	3	
mimvey (generic of ACTIVELLA)	2	

Drug Name	Drug Tier	Requirements/ Limits
MINIVELLE PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	2	
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	2	
PREMARIN CREA .625mg/gm; SOLR 25mg	3	
PREMARIN TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	2	
PREMPHASE TAB	2	
PREMPRO TAB 0.3-1.5	2	
PREMPRO TAB 0.45-1.5	2	
PREMPRO TAB 0.625-2.5	2	
PREMPRO TAB 0.625-5	2	
VAGIFEM TABS 10mcg	3	
VIVELLE-DOT PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
yuvafem (generic of VAGIFEM) TABS 10mcg	1	
GLUCOCORTICOIDS		
ALKINDI SPRINKLE CPSP 1mg, 2mg, 5mg	4	NDS NM PA
ALKINDI SPRINKLE CPSP .5mg	3	NM PA
betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml (generic of CELESTONE SOLUSPAN)	1	
CELESTONE INJ SOLUSPAN	3	
CORTEF TABS 5mg, 10mg, 20mg	3	
CORTISONE ACETATE TABS 25mg	3	
DEPO-MEDROL SUSP 20mg/ml, 40mg/ml, 80mg/ml	3	B/D
dexamethasone ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg; TBPK 1.5mg	1	
DEXAMETHASONE INTENSOL CONC 1mg/ml	3	
dexamethasone sodium phosphate SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml	1	
fludrocortisone acetate TABS .1mg	1	
HEMADY TABS 20mg	3	PA
hydrocortisone (generic of CORTEF) TABS 5mg, 10mg, 20mg	1	
hydrocortisone sod succinate (generic of SOLU-CORTEF) SOLR 100mg	1	
KENALOG-10 SUSP 10mg/ml	3	B/D
KENALOG-40 SUSP 40mg/ml	3	B/D
KENALOG-80 SUSP 80mg/ml	3	B/D
KHINDIVI SOLN 1mg/ml	4	NDS PA
MEDROL TABS 2mg, 4mg, 8mg, 16mg	3	B/D
MEDROL DOSEPAK TBPK 4mg	3	
methylprednisolone (generic of MEDROL) TABS 4mg, 8mg, 16mg	1	B/D
methylprednisolone TABS 32mg	1	B/D
methylprednisolone (generic of MEDROL DOSEPAK) TBPK 4mg	1	
methylprednisolone acetate (generic of DEPO-MEDROL) SUSP 40mg/ml, 80mg/ml	1	B/D
methylprednisolone sod succ SOLR 40mg, 125mg	1	B/D
methylprednisolone sod succ (generic of SOLU-MEDROL) SOLR 500mg, 1000mg	1	B/D
ORAPRED ODT TBDP 10mg, 15mg, 30mg	3	B/D
prednisolone SOLN 15mg/5ml; TABS 5mg	1	B/D
PREDNISOLONE SODIUM PHOSP TBDP 10mg, 15mg, 30mg	3	B/D

Drug Name	Tier	Requirements/ Limits
prednisolone sodium phosphate SOLN 5mg/5ml, 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml	1	B/D
prednisone SOLN 5mg/5ml; TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	1	B/D
prednisone TBEC 1mg, 2mg	4	NDS B/D
prednisone TBPK 5mg, 10mg	1	
PREDNISONE INTENSOL CONC 5mg/ml	3	B/D
SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg	3	
SOLU-MEDROL SOLR 2gm, 40mg, 125mg, 500mg, 1000mg	3	B/D
taperdex 6-day TBPK 1.5mg	1	
taperdex 7-day TBPK 1.5mg	1	
taperdex 12-day TBPK 1.5mg	1	
triamcinolone acetonide (generic of KENALOG-10) SUSP 10mg/ml	1	B/D
triamcinolone acetonide (generic of KENALOG-40) SUSP 40mg/ml	1	B/D
ZILRETTA SRER 32mg	3	B/D NM
GLUCOSE ELEVATING AGENTS		
BAQSIMI ONE PACK POWD 3mg/dose	3	
BAQSIMI TWO PACK POWD 3mg/dose	3	
diazoxide (generic of PROGLYCEM) SUSP 50mg/ml	4	NDS
glucagon SOLR 1mg	1	
GVOKE HYPOPEN 1-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	2	
GVOKE HYPOPEN 2-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	2	
GVOKE KIT SOLN 1mg/0.2ml	2	
GVOKE PFS SOSY 1mg/0.2ml	2	
PROGLYCEM SUSP 50mg/ml	4	NDS
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml	2	

Drug Name	Tier	Requirements/ Limits
MISCELLANEOUS		
ACTHAR GEL 80unit/ml QL (1.5 mL / 1 day)	4	NDS QL NM PA
ACTHAR GEL PEN 40unit/0.5ml QL (28 injectors / 28 days)	4	NDS QL NM PA
ACTHAR GEL PEN 80unit/ml QL (30 injectors / 30 days)	4	NDS QL NM PA
ALDURAZYME SOLN 2.9mg/5ml	4	NDS NM PA
AQNEURSA PACK 1gm QL (112 packets / 28 days)	4	NDS QL NM PA
betaine powder for oral solution (generic of CYSTADANE)	4	NDS NM
BUPHENYL POWD 3gm/tsp; TABS 500mg	4	NDS NM PA
BYNFEZIA PEN SOPN 2500mcg/ml	4	NDS PA
cabergoline TABS .5mg	1	
CARBAGLU TBSO 200mg	4	NDS NM PA
carglumic acid (generic of CARBAGLU) TBSO 200mg	4	NDS NM PA
CARNITOR SOLN 1gm/10ml, 200mg/ml; TABS 330mg	3	B/D
CERDELGA CAPS 84mg	4	NDS NM PA
CEREZYME SOLR 400unit	4	NDS NM PA
CHORIONIC GONADOTROPIN SOLR 10000unit	3	NM PA
cinacalcet hcl (generic of SENSIPAR) TABS 30mg, 60mg QL (60 tabs / 30 days)	1	B/D QL NM
cinacalcet hcl (generic of SENSIPAR) TABS 90mg QL (120 tabs / 30 days)	1	B/D QL NM
CORTROPHIN GEL 80unit/ml QL (1.5 mL / 1 day)	4	NDS QL NM PA
CORTROPHIN PRSY 40unit/0.5ml, 80unit/ml QL (28 syringes / 28 days)	4	NDS QL NM PA

Drug Name	Drug Tier	Requirements/ Limits
CRENESSITY CAPS 25mg, 50mg, 100mg QL (60 caps / 30 days)	4	NDS QL NM PA
CRENESSITY SOLN 50mg/ml QL (120 mL / 30 days)	4	NDS QL NM PA
CRYSVITA SOLN 10mg/ml, 20mg/ml, 30mg/ml	4	NDS NM PA
CYSTADANE POW	4	NDS NM
CYSTAGON CAPS 50mg, 150mg	3	NM PA
DDAVP SOLN 4mcg/ml; TABS .2mg	4	NDS
DDAVP TABS .1mg	3	
desmopressin acetate (generic of DDAVP) SOLN 4mcg/ml	4	NDS
desmopressin acetate (generic of DDAVP) TABS .1mg, .2mg	1	
desmopressin acetate spray SOLN .01%	1	
desmopressin acetate spray refrigerated SOLN .01%	1	
DOJOLVI LIQD 100%	4	NDS NM PA
EGRIFTA SV SOLR 2mg	4	NDS NM PA
EGRIFTA WR KIT 11.6mg	4	NDS NM PA
ELAPRASE SOLN 6mg/3ml	4	NDS NM PA
ELELYSO SOLR 200unit	4	NDS NM PA
ELFABRIO SOLN 5mg/2.5ml, 20mg/10ml	4	NDS NM PA
EVISTA TABS 60mg	3	
FABRAZYME SOLR 5mg, 35mg	4	NDS NM PA
FENSOLVI KIT 45mg	4	NDS NM PA
GALAFOLD CAPS 123mg	4	NDS NM PA
GENOTROPIN CART 5mg, 12mg	4	NDS NM PA
GENOTROPIN MINIQUICK PRSY .2mg	2	NM PA
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	4	NDS NM PA
glycerol phenylbutyrate (generic of RAVICTI) LIQD 1.1gm/ml	4	NDS NM PA
INCRELEX SOLN 40mg/4ml	4	NDS NM PA
ISTURISA TABS 1mg QL (240 tabs / 30 days)	4	NDS QL NM PA
ISTURISA TABS 5mg QL (360 tabs / 30 days)	4	NDS QL NM PA
javygtor (generic of KUVAN) PACK 100mg, 500mg; TABS 100mg	4	NDS NM PA
JYNARQUE TABS 15mg, 30mg; TBPK 15mg	4	NDS NM PA
JYNARQUE PAK 30-15MG	4	NDS NM PA
JYNARQUE PAK 45-15MG	4	NDS NM PA
JYNARQUE PAK 60-30MG	4	NDS NM PA
JYNARQUE PAK 90-30MG	4	NDS NM PA
KANUMA SOLN 20mg/10ml	4	NDS NM PA
KORLYM TABS 300mg	4	NDS NM PA
KUVAN PACK 100mg, 500mg; TABS 100mg	4	NDS NM PA
LAMZEDE SOLR 10mg	4	NDS NM PA
lanreotide acetate SOLN 120mg/0.5ml	4	NDS NM PA
LANREOTIDE ACETATE SOLN 120mg/0.5ml	4	NDS NM PA
levocarnitine (metabolic modifiers) (generic of CARNITOR) SOLN 1gm/10ml, 200mg/ml; TABS 330mg	1	B/D
LUMIZYME SOLR 50mg	4	NDS NM PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg	4	NDS NM PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg	4	NDS NM PA
LUPRON DEPOT-PED (6-MONTH KIT 45mg	4	NDS NM PA
LYNKUET CAPS 60mg QL (60 caps / 30 days)	3	QL PA
methergine TABS .2mg	4	NDS PA
methylergonovine maleate TABS .2mg	4	NDS PA
mifepristone (hyperglycemia) (generic of KORLYM) TABS 300mg	4	NDS NM PA
miglustat (generic of ZAVESCA) CAPS 100mg QL (90 caps / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
MIPLYFFA CAPS 47mg, 62mg, 93mg, 124mg QL (90 caps / 30 days)	4	NDS QL NM PA
MYALEPT SOLR 11.3mg	4	NDS NM PA
MYCAPSSA CPDR 20mg QL (112 caps / 28 days)	4	NDS QL NM PA
MYFEMBREE TAB	4	NDS PA
NAGLAZYME SOLN 1mg/ml	4	NDS NM PA
NEXVIAZYME SOLR 100mg	4	NDS NM PA
NGENLA SOPN 24mg/1.2ml, 60mg/1.2ml	4	NDS NM PA
nitisinone (generic of ORFADIN) CAPS 2mg, 5mg, 10mg, 20mg	4	NDS NM PA
NITYR TABS 2mg, 5mg, 10mg	4	NDS NM PA
NORDITROPIN FLEXPRO SOPN 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml, 30mg/3ml	4	NDS NM PA
NOVAREL SOLR 5000unit	3	NM PA
octreotide acetate (generic of SANDOSTATIN LAR DEPOT) KIT 10mg, 20mg, 30mg	4	NDS NM PA
octreotide acetate (generic of SANDOSTATIN) SOLN 50mcg/ml, 100mcg/ml	1	NM PA
octreotide acetate SOLN 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	1	NM PA
octreotide acetate (generic of SANDOSTATIN) SOLN 500mcg/ml	4	NDS NM PA
octreotide acetate SOLN 1000mcg/ml; SOSY 500mcg/ml	4	NDS NM PA
OLPRUVA THPK 2gm, 3gm, 4gm, 5gm, 6gm, 6.67gm	4	NDS NM PA
OMNITROPE SOCT 5mg/1.5ml, 10mg/1.5ml; SOLR 5.8mg	4	NDS NM PA
OPFOLDA CAPS 65mg QL (8 caps / 28 days)	3	QL NM PA
ORFADIN CAPS 2mg, 5mg, 10mg, 20mg; SUSP 4mg/ml	4	NDS NM PA
ORIAHNN CAP	4	NDS PA
ORILISSA TABS 150mg, 200mg	4	NDS PA
OSPHENA TABS 60mg	3	PA
PALSONIFY TABS 20mg QL (90 tabs / 30 days)	4	NDS QL NM PA
PALSONIFY TABS 30mg QL (120 tabs / 30 days)	4	NDS QL NM PA
PALYNZIQ SOSY 2.5mg/0.5ml, 10mg/0.5ml, 20mg/ml	4	NDS NM PA
PHEBURANE PLLT 483mg/gm	4	NDS NM PA
POMBILITI SOLR 105mg	4	NDS NM PA
PREGNYL W/DILUENT BENZYL SOLR 10000unit	3	NM PA
PROCYSBI CPDR 25mg, 75mg; PACK 75mg, 300mg	4	NDS NM PA
raloxifene hcl (generic of EVISTA) TABS 60mg	1	
RAVICTI LIQD 1.1gm/ml	4	NDS NM PA
RECORLEV TABS 150mg QL (240 tabs / 30 days)	4	NDS QL NM PA
REVCOVI SOLN 2.4mg/1.5ml	4	NDS NM PA
REZDIFFRA TABS 60mg, 80mg, 100mg QL (30 tabs / 30 days)	4	NDS QL NM PA
SAMSCA TABS 15mg, 30mg	4	NDS NM PA
SANDOSTATIN SOLN 50mcg/ml	3	NM PA
SANDOSTATIN SOLN 100mcg/ml, 500mcg/ml	4	NDS NM PA
SANDOSTATIN LAR DEPOT KIT 10mg, 20mg, 30mg	4	NDS NM PA
sapropterin dihydrochloride (generic of KUVAN) PACK 100mg, 500mg; TABS 100mg	4	NDS NM PA
SEPHIENCE PACK 250mg, 1000mg	4	NDS NM PA
SEROSTIM SOLR 4mg, 5mg, 6mg	4	NDS NM PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	4	NDS NM PA
SIGNIFOR LAR SRER 10mg, 20mg, 30mg, 40mg, 60mg	4	NDS NM PA
SKYTROFA CART .7mg, 1.4mg, 1.8mg, 2.1mg, 2.5mg, 3mg, 3.6mg, 4.3mg, 5.2mg, 6.3mg, 7.6mg, 9.1mg, 11mg, 13.3mg	4	NDS NM PA

Drug Name	Tier	Requirements/ Limits
sodium phenylbutyrate (generic of BUPHENYL) POWD 3gm/tsp; TABS 500mg	4	NDS NM PA
SOGROYA SOPN 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml	4	NDS NM PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	4	NDS NM PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	4	NDS NM PA
STRENSIQ SOLN 18mg/0.45ml, 28mg/0.7ml, 40mg/ml, 80mg/0.8ml	4	NDS NM PA
SYNAREL SOLN 2mg/ml	4	NDS PA
TEPEZZA SOLR 500mg	4	NDS NM PA
tolvaptan (generic of JYNARQUE) TABS 15mg, 30mg (generic of JYNARQUE)	4	NDS NM PA
tolvaptan (generic of JYNARQUE) TBPK 15mg	4	NDS NM PA
tolvaptan (hyponatremia) (generic of SAMSCA) TABS 15mg, 30mg (generic of SAMSCA)	4	NDS NM PA
tolvaptan tab therapy pack 30 & 15 mg	4	NDS NM PA
tolvaptan tab therapy pack 45 & 15 mg	4	NDS NM PA
tolvaptan tab therapy pack 60 & 30 mg	4	NDS NM PA
tolvaptan tab therapy pack 90 & 30 mg	4	NDS NM PA
VEOZAH TABS 45mg QL (30 tabs / 30 days)	3	QL PA
VIJOICE PACK 50mg QL (28 packets / 28 days)	4	NDS QL NM PA
VIJOICE TBPK 50mg, 125mg QL (28 tabs / 28 days)	4	NDS QL NM PA
VIJOICE TAB 250MG QL (56 tabs / 28 days)	4	NDS QL NM PA
VIMIZIM SOLN 5mg/5ml	4	NDS NM PA
VOXZOGO SOLR .4mg, .56mg, 1.2mg	4	NDS NM PA
VPRIV SOLR 400unit	4	NDS NM PA
VYKAT XR TB24 25mg QL (120 tabs / 30 days)	4	NDS QL NM PA
VYKAT XR TB24 75mg QL (30 tabs / 30 days)	4	NDS QL NM PA
VYKAT XR TB24 150mg QL (90 tabs / 30 days)	4	NDS QL NM PA
XENPOZYME SOLR 4mg, 20mg	4	NDS NM PA
yargesa (generic of ZAVESCA) CAPS 100mg QL (90 caps / 30 days)	4	NDS QL NM PA
ZAVESCA CAPS 100mg QL (90 caps / 30 days)	4	NDS QL NM PA
zelvysia (generic of KUVAN) PACK 100mg, 500mg	4	NDS NM PA
ZOMACTON SOLR 5mg	3	NM PA
ZOMACTON SOLR 10mg	4	NDS NM PA
PROGESTINS		
CRINONE GEL 4%, 8%	3	PA
gallifrey TABS 5mg	1	
medroxyprogesterone acetate (generic of PROVERA) TABS 2.5mg, 5mg, 10mg	1	
megestrol acetate SUSP 40mg/ml	2	
megestrol acetate (appetite) SUSP 625mg/5ml	3	PA
norethindrone acetate TABS 5mg	1	
progesterone (generic of PROMETRIUM) CAPS 100mg, 200mg	1	
PROMETRIUM CAPS 100mg, 200mg	3	
PROVERA TABS 2.5mg, 5mg, 10mg	3	
THYROID AGENTS		
CYTOMEL TABS 5mcg, 25mcg, 50mcg	3	
ERMEZA SOLN 150mcg/5ml	3	
levo-t (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	

Drug Name	Tier	Requirements/ Limits
levothyroxine sodium CAPS 13mcg, 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	ST
levothyroxine sodium (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
levoxyl (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
liomny (generic of CYTOMEL) TABS 5mcg, 25mcg, 50mcg	1	
liothyronine sodium (generic of CYTOMEL) TABS 5mcg, 25mcg, 50mcg	1	
methimazole TABS 5mg, 10mg	1	
propylthiouracil TABS 50mg	1	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	3	
THYQUIDITY SOLN 100mcg/5ml	3	
TIROSINT CAPS 13mcg, 25mcg, 37.5mcg, 44mcg, 50mcg, 62.5mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	3	ST
TIROSINT-SOL SOLN 13mcg/ml, 25mcg/ml, 37.5mcg/ml, 44mcg/ml, 50mcg/ml, 62.5mcg/ml, 75mcg/ml, 88mcg/ml, 100mcg/ml, 112mcg/ml, 125mcg/ml, 137mcg/ml, 150mcg/ml, 175mcg/ml, 200mcg/ml	3	
unithroid (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
VITAMIN D ANALOGS		
calcitriol (generic of ROCALTROL) CAPS .25mcg, .5mcg	1	B/D
calcitriol (oral) (generic of ROCALTROL) SOLN 1mcg/ml	1	B/D
doxercalciferol CAPS .5mcg, 1mcg, 2.5mcg	1	B/D
paricalcitol (generic of ZEMPLAR) CAPS 1mcg, 2mcg	1	B/D
paricalcitol CAPS 4mcg	1	B/D
RAYALDEE CPCR 30mcg	4	NDS
ROCALTROL CAPS .25mcg, .5mcg; SOLN 1mcg/ml	3	B/D
ZEMPLAR CAPS 1mcg, 2mcg	3	B/D
GASTROINTESTINAL ***ANTIEMETICS***		
AKYNZEO CAP 300-0.5	3	B/D
AKYNZEO INJ 235-0.25	3	NM
AKYNZEO INJ 235-0.25MG/20ML	3	NM
APONVIE EMUL 32mg/4.4ml	3	
aprepitant CAPS 40mg, 125mg	1	B/D
aprepitant (generic of EMEND BIPACK) CAPS 80mg	1	B/D
aprepitant capsule therapy pack 80 & 125 mg	1	B/D
BONJESTA TAB 20-20MG	3	
CINVANTI EMUL 130mg/18ml	3	
compro SUPP 25mg	1	
DICLEGIS TAB 10-10MG	3	
DIMENHYDRINATE SOLN 50mg/ml	3	
doxylamine-pyridoxine tab delayed release 10-10 mg (generic of DICLEGIS)	3	

Drug Name	Tier	Requirements/ Limits
dronabinol (generic of MARINOL) CAPS 2.5mg QL (60 caps / 30 days)	1	B/D QL
dronabinol CAPS 5mg, 10mg QL (60 caps / 30 days)	1	B/D QL
EMEND SOLR 150mg	3	
EMEND SUSR 125mg/5ml	4	NDS B/D
EMEND BIPACK CAPS 80mg	3	B/D
EMEND TRIPAC CAP 125 & 80	3	B/D
FOCINVEZ SOLN 150mg/50ml	3	
fosaprepitant dimeglumine (generic of EMEND) SOLR 150mg	1	
GIMOTI SOLN 15mg/act	4	NDS PA
granisetron hcl SOLN 1mg/ml, 4mg/4ml	1	
granisetron hcl TABS 1mg	1	B/D
MARINOL CAPS 2.5mg QL (60 caps / 30 days)	3	B/D QL
meclizine hcl TABS 12.5mg, 25mg PA applies if 65 years and older after a 30 day supply in a calendar year	1	PA
meclizine hcl TABS 50mg QL (60 tabs / 30 days) PA applies if 65 years and older after a 30 day supply in a calendar year	1	QL PA
metoclopramide hcl SOLN 5mg/5ml, 5mg/ml; TBDP 5mg	1	
metoclopramide hcl (generic of REGLAN) TABS 5mg, 10mg	1	
ondansetron TBDP 4mg, 8mg	1	B/D
ondansetron TBDP 16mg	4	NDS B/D
ondansetron hcl SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	1	
ondansetron hcl SOLN 4mg/5ml; TABS 4mg, 8mg	1	B/D
palonosetron hcl SOLN .25mg/5ml; SOSY .25mg/5ml	1	
PHENERGAN SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older after a 30 day supply in a calendar year	3	PA
POSFREA SOLN .25mg/5ml	3	
prochlorperazine SUPP 25mg	1	
prochlorperazine edisylate SOLN 10mg/2ml	1	
prochlorperazine maleate TABS 5mg, 10mg	1	
promethazine hcl SOLN 6.25mg/5ml; TABS 12.5mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	1	PA
promethazine hcl (generic of PHENERGAN) SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
promethazine hcl SUPP 12.5mg, 25mg PA applies if 65 years and older after a 30 day supply in a calendar year	3	PA
promethegan SUPP 12.5mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	3	PA
REGLAN TABS 5mg, 10mg	3	
SANCUSO PTCH 3.1mg/24hr QL (4 patches / 28 days)	4	NDS QL
scopolamine (generic of TRANSDERM SCOP) PT72 1mg/3days QL (10 patches / 30 days)	3	QL
SUSTOL PRSY 10mg/0.4ml	3	
TRANSDERM SCOP PT72 1mg/3days QL (10 patches / 30 days)	3	QL

Drug Name	Tier	Requirements/ Limits
trimethobenzamide hcl CAPS 300mg	1	
VARUBI TBPK 90mg	3	B/D NM
ANTISPASMODICS		
atropine sulfate (generic of ATROPINE SULFATE) SOSY 1mg/10ml	3	
ATROPINE SULFATE SOSY .25mg/5ml, 1mg/10ml	3	
CUVPOSA SOLN 1mg/5ml	3	
dicyclomine hcl CAPS 10mg; TABS 20mg PA applies if 65 years and older	2	PA
dicyclomine hcl SOLN 10mg/5ml PA applies if 65 years and older	3	PA
dicyclomine hcl (generic of BENTYL) SOLN 10mg/ml PA applies if 65 years and older	3	PA
dicyclomine hcl TABS 40mg PA applies if 65 years and older	4	NDS PA
GLYCATE TABS 1.5mg QL (90 tabs / 30 days)	4	NDS QL ST
glycopyrrolate SOLN .2mg/ml, .4mg/2ml, 1mg/5ml, 4mg/20ml	1	
glycopyrrolate (generic of GLYCOPYRROLATE) SOSY .2mg/ml, .4mg/2ml	1	
GLYCOPYRROLATE TABS 1.5mg QL (90 tabs / 30 days)	4	NDS QL ST
glycopyrrolate TABS 1mg QL (90 tabs / 30 days)	1	QL
glycopyrrolate TABS 2mg QL (120 tabs / 30 days)	1	QL
glycopyrrolate (oral) (generic of CUVPOSA) SOLN 1mg/5ml	1	
methscopolamine bromide TABS 2.5mg, 5mg PA applies if 65 years and older	3	PA

Drug Name	Tier	Requirements/ Limits
H2-RECEPTOR ANTAGONISTS		
cimetidine TABS 200mg, 300mg, 400mg, 800mg	1	
cimetidine hcl SOLN 300mg/5ml QL (1200 mL / 30 days)	1	QL
famotidine SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml; SUSR 40mg/5ml	1	
FAMOTIDINE SOLN 20mg/5ml, 40mg/10ml, 200mg/50ml	3	
famotidine (generic of PEPCID) TABS 20mg, 40mg	1	
famotidine in nacl 0.9% iv soln 20 mg/50ml	1	
nizatidine CAPS 150mg, 300mg	1	
PEPCID TABS 20mg, 40mg	3	
ranitidine hcl TABS 150mg, 300mg	1	
INFLAMMATORY BOWEL DISEASE		
APRISO CP24 .375gm QL (120 caps / 30 days)	3	QL
AZULFIDINE TABS 500mg	3	
AZULFIDINE EN-TABS TBEC 500mg	3	
balsalazide disodium CAPS 750mg	1	
budesonide CPEP 3mg QL (90 caps / 30 days)	1	QL
budesonide (generic of UCERIS) TB24 9mg QL (30 tabs / 30 days)	4	NDS QL PA
budesonide (intrarectal) (generic of UCERIS) FOAM 2mg	1	
CANASA SUPP 1000mg QL (30 suppositories / 30 days)	4	NDS QL
CORTENEMA ENEM 100mg/60ml	3	
DIPENTUM CAPS 250mg	4	NDS
hydrocortisone (intrarectal) (generic of CORTENEMA) ENEM 100mg/60ml	1	
LIALDA TBEC 1.2gm QL (120 tabs / 30 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits
mesalamine (generic of APRISO) CP24 .375gm	1	QL
QL (120 caps / 30 days)		
mesalamine (generic of PENTASA) CPCR 500mg	1	QL
QL (240 caps / 30 days)		
mesalamine CPDR 400mg	1	QL
QL (180 caps / 30 days)		
mesalamine ENEM 4gm	1	QL
QL (1680 mL / 28 days)		
mesalamine (generic of CANASA) SUPP 1000mg	1	QL
QL (30 suppositories / 30 days)		
mesalamine (generic of LIALDA) TBEC 1.2gm	1	QL
QL (120 tabs / 30 days)		
mesalamine TBEC 800mg	1	QL
QL (180 tabs / 30 days)		
mesalamine w/ cleanser (generic of ROWASA) KIT 4gm	1	QL
QL (28 bottles / 28 days)		
PENTASA CPCR 250mg	3	QL
QL (480 caps / 30 days)		
PENTASA CPCR 500mg	4	NDS QL
QL (240 caps / 30 days)		
ROWASA KIT 4gm	4	NDS QL
QL (28 bottles / 28 days)		
SFROWASA ENEM 4gm/60ml	4	NDS QL
QL (1680 mL / 28 days)		
sulfasalazine (generic of AZULFIDINE) TABS 500mg	1	
sulfasalazine (generic of AZULFIDINE EN-TABS) TBEC 500mg	1	
UCERIS FOAM 2mg/act	3	
UCERIS TB24 9mg	4	NDS QL PA
QL (30 tabs / 30 days)		
LAXATIVES		
CLENPIQ SOL 10 MG-3.5 GM-12 GM/175ML	3	
constulose SOLN 10gm/15ml	1	
enulose SOLN 10gm/15ml	1	
gavilyte-c	1	
gavilyte-g (generic of GOLYTELY)	1	
gavilyte-n/flavor pack	1	
generlac SOLN 10gm/15ml	1	
GOLYTELY SOL	3	
kristalose PACK 10gm	1	QL PA
QL (30 packets / 30 days)		
kristalose PACK 20gm	1	QL PA
QL (60 packets / 30 days)		
lactulose PACK 10gm	4	NDS QL PA
QL (30 packets / 30 days)		
lactulose PACK 20gm	1	QL PA
QL (60 packets / 30 days)		
lactulose SOLN 10gm/15ml	1	
lactulose (encephalopathy) SOLN 10gm/15ml	1	
MOVIPREP SOL	3	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (generic of GOLYTELY)	1	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	
peg-3350/electrolytes/asc (generic of MOVIPREP)	1	
PLENVU SOL	3	
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (generic of SUPREP BOWEL PREP KIT)	1	
SUFLAVE SOL	3	
SUPREP BOWEL SOL PREP KIT	3	
SUTAB TAB	3	
MISCELLANEOUS		
alosetron hcl (generic of LOTRONEX) TABS 1mg	4	NDS QL PA
QL (60 tabs / 30 days)		
alosetron hcl (generic of LOTRONEX) TABS .5mg	1	QL PA
QL (60 tabs / 30 days)		
AMITIZA CAPS 8mcg, 24mcg	3	QL
QL (60 caps / 30 days)		
amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg	1	

Drug Name	Drug Tier	Requirements/ Limits
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (generic of PYLERA)	1	
BYLVAY CAPS 400mcg, 1200mcg	4	NDS NM PA
BYLVAY (PELLETS) CPSP 200mcg, 600mcg	4	NDS NM PA
CARAFATE SUSP 1gm/10ml	3	ST
CARAFATE TABS 1gm	3	
CHOLBAM CAPS 50mg, 250mg	4	NDS NM PA
CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
cromolyn sodium (mastocytosis) (generic of GASTROCROM) CONC 100mg/5ml	1	
CYTOTEC TABS 100mcg, 200mcg	3	
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	3	
diphenoxylate w/ atropine tab 2.5-0.025 mg (generic of LOMOTIL)	3	
EOHILIA SUSP 2mg/10ml QL (600 mL / 30 days)	4	NDS QL PA
GASTROCROM CONC 100mg/5ml	4	NDS
GATTEX KIT 5mg	4	NDS NM PA
IBSRELA TABS 50mg QL (60 tabs / 30 days)	4	NDS QL NM PA
IQIRVO TABS 80mg QL (30 tabs / 30 days)	4	NDS QL NM PA
LINZESS CAPS 72mcg, 145mcg, 290mcg QL (30 caps / 30 days)	2	QL
LIVDELZI CAPS 10mg QL (30 caps / 30 days)	4	NDS QL NM PA
LIVMARLI SOLN 9.5mg/ml, 19mg/ml; TABS 10mg, 15mg, 20mg, 30mg	4	NDS NM PA
LOMOTIL TAB 2.5MG	3	
loperamide hcl CAPS 2mg	1	
lubiprostone (generic of AMITIZA) CAPS 8mcg, 24mcg QL (60 caps / 30 days)	1	QL
misoprostol (generic of CYTOTEC) TABS 100mcg, 200mcg	1	
MOTEGRITY TABS 1mg, 2mg	3	
MOVANTIK TABS 12.5mg, 25mg QL (30 tabs / 30 days)	2	QL
PANCREAZE CAP 2600UNIT	3	
PANCREAZE CAP 4200UNIT	3	
PANCREAZE CAP 10500UNT	3	
PANCREAZE CAP 16800UNT	3	
PANCREAZE CAP 21000UNT	3	
PANCREAZE CAP 37000	3	
PERTZYE CAP 4000UNIT	3	
PERTZYE CAP 8000UNIT	3	
PERTZYE CAP 16000U	3	
PERTZYE CAP 24000U	3	
prucalopride succinate (generic of MOTEGRITY) TABS 1mg, 2mg	1	
PYLERA CAP	3	
REBYOTA SUSP 150ml QL (150 mL / 30 days)	4	NDS QL NM PA
RELISTOR SOLN 12mg/0.6ml QL (28 vials / 28 days)	4	NDS QL PA
RELISTOR SOSY 8mg/0.4ml, 12mg/0.6ml QL (28 syringes / 28 days)	4	NDS QL PA
RELISTOR TABS 150mg QL (90 tabs / 30 days)	4	NDS QL PA
RELTONE CAPS 200mg, 400mg	4	NDS PA
SUCRAID SOLN 8500unit/ml	4	NDS NM PA
sucralfate SUSP 1gm/10ml	1	ST
sucralfate (generic of CARAFATE) TABS 1gm	1	

Drug Name	Drug Tier	Requirements/ Limits
SYMPROIC TABS .2mg QL (30 tabs / 30 days)	3	QL
TALICIA CAP	3	
TRULANCE TABS 3mg QL (30 tabs / 30 days)	3	QL
URSODIOL CAPS 200mg, 400mg	4	NDS PA
ursodiol CAPS 300mg; TABS 250mg	1	
ursodiol (generic of URSO FORTE) TABS 500mg	1	
VIBERZI TABS 75mg, 100mg	4	NDS PA
VIOKACE TAB 10440	3	
VIOKACE TAB 20880	4	NDS
VOQUEZNA PAK DUAL PAK QL (2 kits / year)	2	QL PA
VOQUEZNA PAK TRIP PK QL (2 kits / year)	2	QL PA
VOWST CAP QL (12 caps / 30 days)	4	NDS QL NM PA
XERMELO TABS 250mg QL (84 tabs / 28 days)	4	NDS QL NM PA
XIFAXAN TABS 550mg	4	NDS PA
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 20000UNT	2	
ZENPEP CAP 25000UNT	2	
ZENPEP CAP 40000UNT	2	
ZENPEP CAP 60000UNT	2	
PROTON PUMP INHIBITORS		
ACIPHEX TBEC 20mg QL (30 tabs / 30 days)	4	NDS QL ST
DEXILANT CPDR 30mg, 60mg QL (30 caps / 30 days)	3	QL
dexlansoprazole (generic of DEXILANT) CPDR 30mg, 60mg QL (30 caps / 30 days)	1	QL
esomeprazole magnesium (generic of NEXIUM) CPDR 20mg, 40mg QL (30 caps / 30 days)	1	QL ST
esomeprazole magnesium (generic of NEXIUM) PACK 2.5mg, 5mg	1	
esomeprazole magnesium (generic of NEXIUM) PACK 10mg, 20mg, 40mg QL (30 packets / 30 days)	1	QL
esomeprazole sodium SOLR 40mg	1	
KONVOMEP SUS 2-84/ML QL (600 mL / 30 days)	3	QL PA
lansoprazole CPDR 15mg QL (60 caps / 30 days)	1	QL
lansoprazole (generic of PREVACID) CPDR 30mg QL (60 caps / 30 days)	1	QL
lansoprazole (generic of PREVACID SOLUTAB) TBDD 15mg, 30mg QL (60 tabs / 30 days)	1	QL ST
NEXIUM CPDR 20mg, 40mg QL (30 caps / 30 days)	3	QL ST
NEXIUM PACK 2.5mg, 5mg	3	
NEXIUM PACK 10mg, 20mg, 40mg QL (30 packets / 30 days)	3	QL
omeprazole CPDR 10mg, 20mg, 40mg	1	
omeprazole-sodium bicarbonate cap 20-1100 mg QL (30 caps / 30 days)	1	QL PA
omeprazole-sodium bicarbonate cap 40-1100 mg QL (30 caps / 30 days)	1	QL PA
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg QL (30 packets / 30 days)	4	NDS QL PA
omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg QL (30 packets / 30 days)	4	NDS QL PA
PANTOPR/NACL SOL 40MG/100	3	

Drug Name	Drug Tier	Requirements/ Limits
PANTOPR/NACL SOL 80MG/100	3	
pantoprazole sodium (generic of PROTONIX) PACK 40mg QL (30 packets / 30 days)	1	QL ST
PANTOPRAZOLE SODIUM SOLR 40mg	3	
pantoprazole sodium (generic of PANTOPRAZOLE SODIUM) SOLR 40mg	1	
pantoprazole sodium (generic of PROTONIX) TBEC 20mg, 40mg	1	
PANTOPRAZOLE SOL 40/50ML	3	
PREVACID CPDR 30mg QL (60 caps / 30 days)	3	QL
PREVACID SOLUTAB TBDD 15mg, 30mg QL (60 tabs / 30 days)	3	QL ST
PRILOSEC PACK 2.5mg, 10mg	3	PA
PROTONIX PACK 40mg QL (30 packets / 30 days)	3	QL ST
PROTONIX SOLR 40mg; TBEC 20mg, 40mg	3	
rabeprazole sodium (generic of ACIPHEX) TBEC 20mg QL (30 tabs / 30 days)	1	QL
VOQUEZNA TABS 10mg QL (30 tabs / 30 days)	3	QL PA
VOQUEZNA TABS 20mg QL (60 tabs / 30 days)	3	QL PA
GENITOURINARY		
BENIGN PROSTATIC HYPERPLASIA		
alfuzosin hcl (generic of UROXATRAL) TB24 10mg QL (30 tabs / 30 days)	1	QL
AVODART CAPS .5mg QL (30 caps / 30 days)	4	NDS QL
CARDURA XL TB24 4mg, 8mg QL (30 tabs / 30 days)	3	QL ST
CIALIS TABS 5mg QL (30 tabs / 30 days)	3	QL PA
dutasteride (generic of AVODART) CAPS .5mg QL (30 caps / 30 days)	1	QL
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (generic of JALYN) QL (30 caps / 30 days)	1	QL
finasteride (generic of PROSCAR) TABS 5mg QL (30 tabs / 30 days)	1	QL
JALYN CAP 0.5-0.4 QL (30 caps / 30 days)	3	QL
PROSCAR TABS 5mg QL (30 tabs / 30 days)	3	QL
silodosin CAPS 4mg, 8mg QL (30 caps / 30 days)	1	QL
tadalafil (generic of CIALIS) TABS 5mg QL (30 tabs / 30 days)	1	QL PA
tamsulosin hcl CAPS .4mg QL (60 caps / 30 days)	1	QL
UROXATRAL TB24 10mg QL (30 tabs / 30 days)	3	QL
MISCELLANEOUS		
acetic acid SOLN .25%	1	
bethanechol chloride TABS 5mg, 10mg, 25mg, 50mg	1	
ELMIRON CAPS 100mg QL (90 caps / 30 days)	4	NDS QL
FILSPARI TABS 200mg, 400mg QL (30 tabs / 30 days)	4	NDS QL NM PA
INTRAROSA INST 6.5mg	3	PA
LITHOSTAT TABS 250mg	3	
neomycin-polymyxin b gu irrigation soln	1	
OXLUMO SOLN 94.5mg/0.5ml	4	NDS NM PA
potassium citrate (alkalinizer) (generic of UROCIT-K 15) TBCR 15meq	1	
potassium citrate (alkalinizer) TBCR 540mg	1	
potassium citrate (alkalinizer) (generic of UROCIT-K 10) TBCR 1080mg	1	
RIMSO-50 SOLN 50%	3	

Drug Name	Tier	Requirements/ Limits
RIVFLOZA SOLN 80mg/0.5ml; SOSY 128mg/0.8ml, 160mg/ml	4	NDS NM PA
TARPEYO CPDR 4mg QL (120 caps / 30 days)	4	NDS QL NM PA
THIOLA TABS 100mg	4	NDS NM
THIOLA EC TBEC 100mg, 300mg	4	NDS NM
tiopronin (generic of THIOLA) TABS 100mg	4	NDS NM
tiopronin (generic of THIOLA EC) TBEC 100mg, 300mg	4	NDS NM
UROCIT-K 10 TBCR 1080mg	3	
UROCIT-K 15 TBCR 15meq	3	
VANRAFIA TABS .75mg QL (30 tabs / 30 days)	4	NDS QL NM PA
venxxiva (generic of THIOLA EC) TBEC 100mg, 300mg	4	NDS NM
VOYXACT SOSY 400mg/2ml QL (1 syringe / 28 days)	4	NDS QL NM PA
URINARY ANTISPASMODICS		
darifenacin hydrobromide TB24 7.5mg, 15mg QL (30 tabs / 30 days)	1	QL ST
fesoterodine fumarate (generic of TOVIAZ) TB24 4mg, 8mg QL (30 tabs / 30 days)	1	QL
GEMTESA TABS 75mg QL (30 tabs / 30 days)	2	QL
mirabegron (generic of MYRBETRIQ) TB24 25mg, 50mg QL (30 tabs / 30 days)	1	QL
MYRBETRIQ SRER 8mg/ml QL (300 mL / 28 days)	3	QL
MYRBETRIQ TB24 25mg, 50mg QL (30 tabs / 30 days)	3	QL
oxybutynin chloride SOLN 5mg/5ml QL (600 mL / 30 days)	1	QL
oxybutynin chloride TABS 2.5mg QL (90 tabs / 30 days)	1	QL
oxybutynin chloride TABS 5mg QL (120 tabs / 30 days)	1	QL
oxybutynin chloride TB24 5mg QL (30 tabs / 30 days)	1	QL
oxybutynin chloride TB24 10mg, 15mg QL (60 tabs / 30 days)	1	QL
OXYTROL PTTW 3.9mg/24hr QL (8 patches / 28 days)	3	QL ST
solifenacin succinate (generic of VESICARE) TABS 5mg, 10mg QL (30 tabs / 30 days)	1	QL
tolterodine tartrate CP24 2mg, 4mg QL (30 caps / 30 days)	1	QL
tolterodine tartrate TABS 1mg, 2mg QL (60 tabs / 30 days)	1	QL
TOVIAZ TB24 4mg, 8mg QL (30 tabs / 30 days)	3	QL
trospium chloride CP24 60mg QL (30 caps / 30 days)	1	QL
trospium chloride TABS 20mg QL (60 tabs / 30 days)	1	QL
VESICARE LS SUSP 5mg/5ml QL (300 mL / 30 days)	3	QL
VAGINAL ANTI-INFECTIVES		
CLEOCIN CREA 2%; SUPP 100mg	3	
clindamycin phosphate vaginal (generic of CLEOCIN) CREA 2%	1	
CLINDESSE CREA 2%	3	
GYNAZOLE-1 CREA 2%	3	
metronidazole vaginal GEL .75%	1	
miconazole 3 SUPP 200mg	1	
terconazole vaginal CREA .4%, .8%; SUPP 80mg	1	
VANDAZOLE GEL .75%	3	
XACIATO GEL 2%	3	
HEMATOLOGIC ***ANTICOAGULANTS***		
ARIXTRA SOLN 2.5mg/0.5ml	3	

Drug Name	Drug Requirements/ Tier	Limits
ARIXTRA SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	4	NDS
dabigatran etexilate mesylate (generic of PRADAXA) CAPS 75mg, 150mg QL (60 caps / 30 days)	1	QL
dabigatran etexilate mesylate (generic of PRADAXA) CAPS 110mg QL (120 caps / 30 days)	1	QL
ELIQUIS CPSP .15mg QL (56 caps / 21 days)	2	QL
ELIQUIS TABS 2.5mg QL (60 tabs / 30 days)	2	QL
ELIQUIS TABS 5mg QL (74 tabs / 30 days)	2	QL
ELIQUIS TBSO .5mg QL (588 tabs / 29 days)	2	QL
ELIQUIS (1.5MG PACK) 3 X TBSO .5mg QL (591 tabs / 29 days)	2	QL
ELIQUIS (2MG PACK) 4 X TBSO .5mg QL (592 tabs / 30 days)	2	QL
ELIQUIS STARTER PACK TBPK 5mg QL (74 tabs / 30 days)	2	QL
enoxaparin sodium (generic of LOVENOX) SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	1	
fondaparinux sodium (generic of ARIXTRA) SOLN 2.5mg/0.5ml	1	
fondaparinux sodium (generic of ARIXTRA) SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	4	NDS
FRAGMIN SOLN 10000unit/4ml; SOSY 2500unit/0.2ml	3	
FRAGMIN SOLN 95000unit/3.8ml; SOSY 5000unit/0.2ml, 7500unit/0.3ml, 10000unit/ml, 12500unit/0.5ml, 15000unit/0.6ml, 18000unt/0.72ml	4	NDS
HEP SOD/D5W INJ 20000UNT	3	
HEP SOD/D5W INJ 25000UNT	3	
HEP SOD/NACL INJ 12500UNT	2	
HEP SOD/NACL INJ 25000UNT	2	
HEPARIN SODIUM SOLN 5000unit/ml; SOSY 5000unit/0.5ml	3	B/D
heparin sodium (porcine) SOLN 1000unit/ml, 5000unit/0.5ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	1	B/D
HEPARIN/NACL INJ 25000UNT	2	
jantoven TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
LOVENOX SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml	3	
LOVENOX SOSY 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	4	NDS
PRADAXA CAPS 75mg, 150mg QL (60 caps / 30 days)	3	QL
PRADAXA CAPS 110mg QL (120 caps / 30 days)	3	QL
PRADAXA PACK 20mg, 150mg QL (60 packets / 30 days)	4	NDS QL PA
PRADAXA PACK 30mg, 40mg, 50mg, 110mg QL (120 packets / 30 days)	4	NDS QL PA

Drug Name	Drug Tier	Requirements/ Limits
rivaroxaban (generic of XARELTO) SUSR 1mg/ml QL (620 mL / 30 days)	1	QL
rivaroxaban (generic of XARELTO) TABS 2.5mg QL (60 tabs / 30 days)	1	QL
warfarin sodium TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
XARELTO SUSR 1mg/ml QL (620 mL / 30 days)	3	QL
XARELTO TABS 2.5mg QL (60 tabs / 30 days)	2	QL
XARELTO TABS 10mg, 15mg, 20mg QL (30 tabs / 30 days)	2	QL
XARELTO STAR TAB 15/20MG QL (51 tabs / 30 days)	2	QL
HEMATOPOIETIC GROWTH FACTORS		
ARANESP ALBUMIN FREE SOLN 25mcg/ml, 40mcg/ml, 60mcg/ml; SOSY 10mcg/0.4ml, 25mcg/0.42ml, 40mcg/0.4ml	2	NM PA
ARANESP ALBUMIN FREE SOLN 100mcg/ml, 200mcg/ml; SOSY 60mcg/0.3ml, 100mcg/0.5ml, 150mcg/0.3ml, 200mcg/0.4ml, 300mcg/0.6ml, 500mcg/ml	4	NDS NM PA
EPOGEN SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	3	NM PA
EPOGEN SOLN 20000unit/ml	4	NDS NM PA
FULPHILA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
FYLNETRA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
GRANIX SOLN 300mcg/ml; SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
LEUKINE SOLR 250mcg	4	NDS NM PA
MIRCERA SOSY 30mcg/0.3ml, 50mcg/0.3ml, 75mcg/0.3ml, 100mcg/0.3ml, 120mcg/0.3ml, 150mcg/0.3ml, 200mcg/0.3ml	3	NM PA
MOZOBIL SOLN 24mg/1.2ml	4	NDS NM PA
NEULASTA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
NEULASTA ONPRO KIT SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
NEUPOGEN SOLN 300mcg/ml, 480mcg/1.6ml; SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
NIVESTYM SOLN 300mcg/ml, 480mcg/1.6ml; SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
NPLATE SOLR 125mcg, 250mcg, 500mcg	4	NDS NM PA
NYPOZI SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
NYVEPRIA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
plerixafor (generic of MOZOBIL) SOLN 24mg/1.2ml	4	NDS NM PA
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	2	NM PA
PROCRIT SOLN 20000unit/ml, 40000unit/ml	4	NDS NM PA
RELEUKO SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
RETACRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml, 20000unit/2ml, 20000unit/ml	3	NM PA
RETACRIT SOLN 40000unit/ml	4	NDS NM PA
ROLVEDON SOSY 13.2mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
RYZNEUTA SOSY 20mg/ml QL (2 syringes / 28 days)	4	NDS QL NM PA
STIMUFEND SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
UDENYCA SOAJ 6mg/0.6ml QL (2 pens / 28 days)	4	NDS QL NM PA
UDENYCA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
UDENYCA ONBODY SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
XOLREMDI CAPS 100mg QL (120 caps / 30 days)	4	NDS QL NM PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	4	NDS NM PA
ZIEXTENZO SOSY 6mg/0.6ml QL (2 syringes / 28 days)	4	NDS QL NM PA
MISCELLANEOUS		
ADAKVEO SOLN 100mg/10ml	4	NDS NM PA
ADZYNMA KIT 500unit, 1500unit	4	NDS NM PA
AGRYLIN CAPS .5mg	3	
ALVAIZ TABS 9mg, 54mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ALVAIZ TABS 18mg, 36mg QL (90 tabs / 30 days)	4	NDS QL NM PA
aminocaproic acid SOLN .25gm/ml; TABS 500mg, 1000mg	4	NDS
anagrelide hcl CAPS 1mg	1	
anagrelide hcl (generic of AGRYLIN) CAPS .5mg	1	
ANDEMBRY SOAJ 200mg/1.2ml QL (13 pens / 365 days)	4	NDS QL NM PA
AQVESME TABS 100mg QL (56 tabs / 28 days)	4	NDS QL NM PA
BERINERT KIT 500unit QL (24 boxes / 30 days)	4	NDS QL NM PA
BKEMV SOLN 300mg/30ml	4	NDS NM PA
CABLIVI KIT 11mg	4	NDS NM PA
cilostazol TABS 50mg, 100mg	1	
CINRYZE SOLR 500unit QL (20 vials / 30 days)	4	NDS QL NM PA
DAWNZERA SOAJ 80mg/0.8ml QL (1 pen / 28 days)	4	NDS QL NM PA
DOPTELET TABS 20mg	4	NDS NM PA
DOPTELET SPRINKLE CPSP 10mg	4	NDS NM PA
DROXIA CAPS 200mg, 300mg, 400mg	3	
EKTERLY TABS 300mg QL (12 tabs / 30 days)	4	NDS QL NM PA
eltrombopag olamine (generic of PROMACTA) PACK 12.5mg QL (360 packets / 30 days)	4	NDS QL NM PA
eltrombopag olamine (generic of PROMACTA) PACK 25mg QL (180 packets / 30 days)	4	NDS QL NM PA
eltrombopag olamine (generic of PROMACTA) TABS 12.5mg, 25mg QL (30 tabs / 30 days)	4	NDS QL NM PA
eltrombopag olamine (generic of PROMACTA) TABS 50mg, 75mg QL (60 tabs / 30 days)	4	NDS QL NM PA
EMPAVELI SOLN 1080mg/20ml QL (200 mL / 30 days)	4	NDS QL NM PA
ENDARI PACK 5gm	4	NDS NM PA
ENJAYMO SOLN 1100mg/22ml	4	NDS NM PA
EPYSQLI SOLN 300mg/30ml	4	NDS NM PA
FABHALTA CAPS 200mg QL (60 caps / 30 days)	4	NDS QL NM PA
FIRAZYR SOSY 30mg/3ml QL (9 syringes / 30 days)	4	NDS QL NM PA
GIVLAARI SOLN 189mg/ml	4	NDS NM PA
HAEGARDA SOLR 2000unit QL (30 vials / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
HAEGARDA SOLR 3000unit QL (20 vials / 30 days)	4	NDS QL NM PA
icatibant acetate (generic of FIRAZYR) SOSY 30mg/3ml QL (9 syringes / 30 days)	4	NDS QL NM PA
KALBITOR SOLN 10mg/ml QL (18 mL / 30 days)	4	NDS QL NM PA
l-glutamine (sickle cell) (generic of ENDARI) PACK 5gm	4	NDS NM PA
MULPLETA TABS 3mg	4	NDS NM PA
ORLADEYO CAPS 110mg, 150mg QL (28 caps / 28 days)	4	NDS QL NM PA
ORLADEYO PACK 72mg, 96mg, 108mg, 132mg QL (28 packets / 28 days)	4	NDS QL NM PA
pentoxifylline TBCR 400mg	1	
PIASKY SOLN 340mg/2ml	4	NDS NM PA
PROMACTA PACK 12.5mg QL (360 packets / 30 days)	4	NDS QL NM PA
PROMACTA PACK 25mg QL (180 packets / 30 days)	4	NDS QL NM PA
PROMACTA TABS 12.5mg, 25mg QL (30 tabs / 30 days)	4	NDS QL NM PA
PROMACTA TABS 50mg, 75mg QL (60 tabs / 30 days)	4	NDS QL NM PA
PYRUKYND TABS 5mg, 20mg, 50mg QL (56 tabs / 28 days)	4	NDS QL NM PA
PYRUKYND TAB 20MGX5MG QL (14 tabs / 14 days)	4	NDS QL NM PA
PYRUKYND TAB 50MGX20M QL (14 tabs / 14 days)	4	NDS QL NM PA
PYRUKYND TAPER PACK TBPK 5mg QL (7 tabs / 7 days)	4	NDS QL NM PA
REBLOZYL SOLR 25mg, 75mg	4	NDS NM PA
RUCONEST SOLR 2100unit QL (12 vials / 30 days)	4	NDS QL NM PA
RYTELO SOLR 47mg, 188mg	4	NDS NM PA
sajazir (generic of FIRAZYR) SOSY 30mg/3ml QL (9 syringes / 30 days)	4	NDS QL NM PA
SIKLOS TABS 100mg	3	
SIKLOS TABS 1000mg	4	NDS
SOLIRIS SOLN 300mg/30ml	4	NDS NM PA
TAKHZYRO SOSY 150mg/ml, 300mg/2ml QL (2 syringes / 28 days)	4	NDS QL NM PA
TAVALISSE TABS 100mg, 150mg QL (60 tabs / 30 days)	4	NDS QL NM PA
TAVNEOS CAPS 10mg QL (180 caps / 30 days)	4	NDS QL NM PA
tranexamic acid (generic of CYKLOKAPRON) SOLN 1000mg/10ml	1	
tranexamic acid TABS 650mg	1	
tranexamic acid-sodium chloride iv soln 1000 mg/100ml-0.7% (generic of TRANEXAMIC ACID/SODIUM CH)	1	
ULTOMIRIS SOLN 300mg/3ml, 1100mg/11ml	4	NDS NM PA
VOYDEYA TABS 100mg QL (180 tabs / 30 days)	4	NDS QL NM PA
VOYDEYA TAB 50-100MG QL (180 tabs / 30 days)	4	NDS QL NM PA
WAYRILZ TABS 400mg QL (60 tabs / 30 days)	4	NDS QL NM PA
XROMI SOLN 100mg/ml	4	NDS
PLATELET AGGREGATION INHIBITORS		
aspirin-dipyridamole cap er 12hr 25-200 mg	1	
BRILINTA TABS 60mg, 90mg	3	
clopidogrel bisulfate (generic of PLAVIX) TABS 75mg	1	
clopidogrel bisulfate TABS 300mg	1	
dipyridamole TABS 25mg, 50mg, 75mg PA applies if 65 years and older	2	PA

Drug Name	Tier	Requirements/ Limits
EFFIENT TABS 5mg, 10mg	3	
PLAVIX TABS 75mg	3	
prasugrel hcl (generic of EFFIENT) TABS 5mg, 10mg	1	
ticagrelor (generic of BRILINTA) TABS 60mg, 90mg	1	
IMMUNOLOGIC AGENTS		
AUTOIMMUNE AGENTS		
ACTEMRA SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	4	NDS NM PA
ACTEMRA SOSY 162mg/0.9ml QL (4 syringes / 28 days)	4	NDS QL NM PA
ACTEMRA ACTPEN SOAJ 162mg/0.9ml QL (4 pens / 28 days)	4	NDS QL NM PA
ADALIMUMAB-BWWD SOAJ 40mg/0.4ml QL (6 autoinjectors / 28 days)	4	NDS QL NM PA
ADALIMUMAB-BWWD SOSY 40mg/0.4ml QL (6 syringes / 28 days)	4	NDS QL NM PA
ADBRY SOAJ 300mg/2ml QL (28 pens / 365 days)	4	NDS QL NM PA
ADBRY SOSY 150mg/ml QL (56 syringes / 365 days)	4	NDS QL NM PA
AVSOLA SOLR 100mg	4	NDS NM PA
AVTOZMA SOAJ 162mg/0.9ml QL (4 pens / 28 days)	4	NDS QL NM PA
AVTOZMA SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	4	NDS NM PA
AVTOZMA SOSY 162mg/0.9ml QL (4 syringes / 28 days)	4	NDS QL NM PA
BIMZELX SOAJ 160mg/ml, 320mg/2ml QL (2 pens / 28 days)	4	NDS QL NM PA
BIMZELX SOSY 160mg/ml, 320mg/2ml QL (2 syringes / 28 days)	4	NDS QL NM PA
CIBINQO TABS 50mg, 100mg, 200mg QL (30 tabs / 30 days)	4	NDS QL NM PA
CIMZIA KIT 200mg QL (2 kits / 28 days)	4	NDS QL NM PA
CIMZIA PSKT 200mg/ml QL (4 syringes / 28 days)	4	NDS QL NM PA
CIMZIA STARTER KIT PSKT 200mg/ml QL (2 kits / year)	4	NDS QL NM PA
COSENTYX SOLN 125mg/5ml	4	NDS NM PA
COSENTYX SOSY 75mg/0.5ml QL (16 syringes / 365 days)	4	NDS QL NM PA
COSENTYX SOSY 150mg/ml QL (56 syringes / 365 days)	4	NDS QL NM PA
COSENTYX SENSOREADY PEN SOAJ 150mg/ml QL (56 pens / 365 days)	4	NDS QL NM PA
COSENTYX UNOREADY SOAJ 300mg/2ml QL (28 pens / 365 days)	4	NDS QL NM PA
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml QL (4 pens / 28 days)	4	NDS QL NM PA
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml QL (4 syringes / 28 days)	4	NDS QL NM PA
EBGLYSS SOAJ 250mg/2ml QL (20 pens / 365 days)	4	NDS QL NM PA
EBGLYSS SOSY 250mg/2ml QL (20 syringes / 365 days)	4	NDS QL NM PA
ENBREL SOLN 25mg/0.5ml QL (16 vials / 28 days)	4	NDS QL NM PA
ENBREL SOSY 25mg/0.5ml QL (16 syringes / 28 days)	4	NDS QL NM PA
ENBREL SOSY 50mg/ml QL (8 syringes / 28 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
ENBREL MINI SOCT 50mg/ml QL (8 cartridges / 28 days)	4	NDS QL NM PA
ENBREL SURECLICK SOAJ 50mg/ml QL (8 pens / 28 days)	4	NDS QL NM PA
HADLIMA SOSY 40mg/0.4ml, 40mg/0.8ml QL (6 syringes / 28 days)	4	NDS QL NM PA
HADLIMA PUSHTOUCH SOAJ 40mg/0.4ml, 40mg/0.8ml QL (6 autoinjectors / 28 days)	4	NDS QL NM PA
HUMIRA PSKT 10mg/0.1ml QL (2 syringes / 28 days)	4	NDS QL NM PA
HUMIRA PSKT 20mg/0.2ml QL (4 syringes / 28 days)	4	NDS QL NM PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml QL (6 syringes / 28 days)	4	NDS QL NM PA
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml QL (6 pens / 28 days)	4	NDS QL NM PA
HUMIRA PEN AJKT 80mg/0.8ml QL (4 pens / 28 days)	4	NDS QL NM PA
HUMIRA PEN KIT PS/UV QL (3 pens / 28 days)	4	NDS QL NM PA
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml QL (3 pens / 28 days)	4	NDS QL NM PA
ILUMYA SOSY 100mg/ml QL (6 syringes / 365 days)	4	NDS QL NM PA
INFLECTRA SOLR 100mg	4	NDS NM PA
INFLIXIMAB SOLR 100mg	4	NDS NM PA
KEVZARA SOAJ 150mg/1.14ml, 200mg/1.14ml QL (2 pens / 28 days)	4	NDS QL NM PA
KEVZARA SOSY 150mg/1.14ml, 200mg/1.14ml QL (2 syringes / 28 days)	4	NDS QL NM PA
KINERET SOSY 100mg/0.67ml QL (28 syringes / 28 days)	4	NDS QL NM PA
LEQSELVI TABS 8mg QL (60 tabs / 30 days)	4	NDS QL NM PA
LITFULO CAPS 50mg QL (28 caps / 28 days)	4	NDS QL NM PA
NEMLUVIO AUIJ 30mg QL (2 pens / 28 days)	4	NDS QL NM PA
OLUMIANT TABS 1mg, 2mg, 4mg QL (30 tabs / 30 days)	4	NDS QL NM PA
OMVOH SOAJ 100mg/ml QL (2 pens / 28 days)	4	NDS QL NM PA
OMVOH SOAJ 200mg/2ml QL (1 pen / 28 days)	4	NDS QL NM PA
OMVOH SOLN 300mg/15ml	4	NDS NM PA
OMVOH SOSY 100mg/ml QL (2 syringes / 28 days)	4	NDS QL NM PA
OMVOH SOSY 200mg/2ml QL (1 syringe / 28 days)	4	NDS QL NM PA
OMVOH SOAJ 100/200 QL (2 pens / 28 days)	4	NDS QL NM PA
OMVOH SOSY 100/200 QL (2 syringes / 28 days)	4	NDS QL NM PA
ORENCIA SOLR 250mg	4	NDS NM PA
ORENCIA SOSY 50mg/0.4ml, 87.5mg/0.7ml, 125mg/ml QL (4 syringes / 28 days)	4	NDS QL NM PA
ORENCIA CLICKJECT SOAJ 125mg/ml QL (4 autoinjectors / 28 days)	4	NDS QL NM PA
OTEZLA TABS 20mg, 30mg QL (60 tabs / 30 days)	4	NDS QL NM PA
OTEZLA TAB 10/20 QL (110 tabs / year)	4	NDS QL NM PA
OTEZLA TAB 10/20/30 QL (110 tabs / year)	4	NDS QL NM PA
OTEZLA XR TB24 75mg QL (30 tabs / 30 days)	4	NDS QL NM PA
OTEZLA/XR TAB 28 DAY QL (2 packs / year)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
PYZCHIVA SOAJ 45mg/0.5ml	2	QL NM PA
QL (1 pen / 28 days)		
PYZCHIVA SOAJ 90mg/ml	4	NDS QL NM PA
QL (1 pen / 28 days)		
PYZCHIVA SOLN 45mg/0.5ml	2	QL NM PA
QL (1 vial / 28 days)		
PYZCHIVA SOLN 130mg/26ml	4	NDS NM PA
PYZCHIVA SOSY 45mg/0.5ml	2	QL NM PA
QL (1 syringe / 28 days)		
PYZCHIVA SOSY 90mg/ml	4	NDS QL NM PA
QL (1 syringe / 28 days)		
REMICADE SOLR 100mg	4	NDS NM PA
RENFLEXIS SOLR 100mg	4	NDS NM PA
RHAPSIDO TABS 25mg	4	NDS QL NM PA
QL (60 tabs / 30 days)		
RINVOQ TB24 15mg, 30mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
RINVOQ TB24 45mg	4	NDS QL NM PA
QL (168 tabs / year)		
RINVOQ LQ SOLN 1mg/ml	4	NDS QL NM PA
QL (360 mL / 30 days)		
SILIQ SOSY 210mg/1.5ml	4	NDS QL NM PA
QL (3 syringes / 28 days)		
SIMPONI SOAJ 50mg/0.5ml	4	NDS QL NM PA
QL (6 autoinjectors / 28 days)		
SIMPONI SOAJ 100mg/ml	4	NDS QL NM PA
QL (3 autoinjectors / 28 days)		
SIMPONI SOSY 50mg/0.5ml	4	NDS QL NM PA
QL (6 syringes / 28 days)		
SIMPONI SOSY 100mg/ml	4	NDS QL NM PA
QL (3 syringes / 28 days)		
SIMPONI ARIA SOLN 50mg/4ml	4	NDS NM PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml	4	NDS QL NM PA
QL (1 cartridge / 56 days)		
SKYRIZI SOLN 600mg/10ml	4	NDS NM PA
SKYRIZI SOSY 150mg/ml	4	NDS QL NM PA
QL (6 syringes / 365 days)		
SKYRIZI PEN SOAJ 150mg/ml	4	NDS QL NM PA
QL (6 pens / 365 days)		
SOTYKTU TABS 6mg	4	NDS QL NM PA
QL (30 tabs / 30 days)		
SPEVIGO SOLN 450mg/7.5ml	4	NDS NM PA
SPEVIGO SOSY 150mg/ml	4	NDS QL NM PA
QL (28 syringes / 365 days)		
SPEVIGO SOSY 300mg/2ml	4	NDS QL NM PA
QL (14 syringes / 365 days)		
STELARA SOLN 45mg/0.5ml	4	NDS QL NM PA
QL (1 vial / 28 days)		
STELARA SOLN 130mg/26ml	4	NDS NM PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	4	NDS QL NM PA
QL (1 syringe / 28 days)		
TALTZ SOAJ 80mg/ml	4	NDS QL NM PA
QL (3 pens / 28 days)		
TALTZ SOSY 20mg/0.25ml, 40mg/0.5ml	4	NDS QL NM PA
QL (1 syringe / 28 days)		
TALTZ SOSY 80mg/ml	4	NDS QL NM PA
QL (3 syringes / 28 days)		
TOFIDENCE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	4	NDS NM PA
TREMFYA SOAJ 200mg/2ml	4	NDS QL NM PA
QL (2 pens / 28 days)		
TREMFYA SOLN 200mg/20ml	4	NDS NM PA
TREMFYA SOPN 100mg/ml	4	NDS QL NM PA
QL (1 pen / 28 days)		
TREMFYA SOSY 100mg/ml	4	NDS QL NM PA
QL (1 syringe / 28 days)		
TREMFYA SOSY 200mg/2ml	4	NDS QL NM PA
QL (2 syringes / 28 days)		
TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml	4	NDS QL NM PA
QL (2 pens / 28 days)		

Drug Name	Tier	Requirements/ Limits
TREMFYA PEN SOAJ 100mg/ml QL (1 pen / 28 days)	4	NDS QL NM PA
TYENNE SOAJ 162mg/0.9ml QL (4 pens / 28 days)	4	NDS QL NM PA
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	4	NDS NM PA
TYENNE SOSY 162mg/0.9ml QL (4 syringes / 28 days)	4	NDS QL NM PA
USTEKINUMAB SOLN 45mg/0.5ml QL (1 vial / 28 days)	4	NDS QL NM PA
USTEKINUMAB SOLN 130mg/26ml	4	NDS NM PA
USTEKINUMAB SOSY 45mg/0.5ml, 90mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
VELSIPITY TABS 2mg QL (30 tabs / 30 days)	4	NDS QL NM PA
XELJANZ SOLN 1mg/ml QL (480 mL / 24 days)	4	NDS QL NM PA
XELJANZ TABS 5mg, 10mg QL (60 tabs / 30 days)	4	NDS QL NM PA
XELJANZ XR TB24 11mg, 22mg QL (30 tabs / 30 days)	4	NDS QL NM PA
YESINTEK SOLN 45mg/0.5ml QL (1 vial / 28 days)	2	QL NM PA
YESINTEK SOLN 130mg/26ml	2	NM PA
YESINTEK SOSY 45mg/0.5ml QL (1 syringe / 28 days)	2	QL NM PA
YESINTEK SOSY 90mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)		
ARAVA TABS 10mg, 20mg QL (30 tabs / 30 days)	4	NDS QL
hydroxychloroquine sulfate TABS 100mg, 300mg, 400mg	1	
hydroxychloroquine sulfate (generic of PLAQUENIL) TABS 200mg	1	
JYLAMVO SOLN 2mg/ml	3	B/D
leflunomide (generic of ARAVA) TABS 10mg, 20mg QL (30 tabs / 30 days)	1	QL
methotrexate sodium TABS 2.5mg	1	
OTREXUP SOAJ 10mg/0.4ml, 12.5mg/0.4ml, 15mg/0.4ml, 17.5mg/0.4ml, 20mg/0.4ml, 22.5mg/0.4ml, 25mg/0.4ml	3	NM PA
PLAQUENIL TABS 200mg	3	
RASUVO SOAJ 7.5mg/0.15ml, 10mg/0.2ml, 12.5mg/0.25ml, 15mg/0.3ml, 17.5mg/0.35ml, 20mg/0.4ml, 22.5mg/0.45ml, 25mg/0.5ml, 30mg/0.6ml	3	NM PA
SOVUNA TABS 200mg, 300mg	3	
TREXALL TABS 5mg, 7.5mg, 10mg, 15mg	3	B/D
XATMEP SOLN 2.5mg/ml	3	B/D
IMMUNOGLOBULINS		
ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	4	NDS NM PA
BIVIGAM SOLN 5gm/50ml, 10%	4	NDS NM PA
CUTAQUIG SOLN 1gm/6ml, 1.65gm/10ml, 2gm/12ml, 3.3gm/20ml, 4gm/24ml, 8gm/48ml	4	NDS NM PA
CUVITRU SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 8gm/40ml, 10gm/50ml	4	NDS NM PA
CYTOGAM SOLN 50mg/ml	4	NDS B/D NM
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	4	NDS NM PA
GAMASTAN INJ	3	B/D NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	4	NDS NM PA
GAMMAGARD LIQUID ERC SOLN 5gm/50ml, 10gm/100ml	4	NDS NM PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	4	NDS NM PA

Drug Name	Tier	Requirements/ Limits
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	4	NDS NM PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	4	NDS NM PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	4	NDS NM PA
HEPAGAM B SOLN 312unit/ml	4	NDS B/D NM
HIZENTRA SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml; SOSY 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml	4	NDS NM PA
HYQVIA INJ 2.5-200	4	NDS NM PA
HYQVIA INJ 5-400	4	NDS NM PA
HYQVIA INJ 10-800	4	NDS NM PA
HYQVIA INJ 20-1600	4	NDS NM PA
HYQVIA INJ 30-2400	4	NDS NM PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	4	NDS NM PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	4	NDS NM PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	4	NDS NM PA
XEMBIFY SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml	4	NDS NM PA
YIMMUGO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	4	NDS NM PA
IMMUNOMODULATORS		
ACTIMMUNE SOLN 100mcg/0.5ml	4	NDS NM PA
ARCALYST SOLR 220mg	4	NDS NM PA
GRASTEK SUBL 2800bau	3	PA
ILARIS SOLN 150mg/ml	4	NDS NM PA
IMAAVY SOLN 300mg/1.62ml, 1200mg/6.5ml	4	NDS NM PA
JOENJA TABS 70mg QL (60 tabs / 30 days)	4	NDS QL NM PA
ODACTRA SUB	3	PA
PALFORZIA CAP ESCALAT	4	NDS NM PA
PALFORZIA CAP LEVEL 3	4	NDS NM PA
PALFORZIA CAP LEVEL 7	4	NDS NM PA
PALFORZIA CAP LEVEL 8	4	NDS NM PA
PALFORZIA CAP LEVEL 10	4	NDS NM PA
PALFORZIA LEVEL 1 CSPK 1mg	4	NDS NM PA
PALFORZIA LEVEL 2 CSPK 1mg	4	NDS NM PA
PALFORZIA LEVEL 4 CSPK 20mg	4	NDS NM PA
PALFORZIA LEVEL 5 CSPK 20mg	4	NDS NM PA
PALFORZIA LEVEL 6 CSPK 20mg	4	NDS NM PA
PALFORZIA LEVEL 9 CSPK 100mg	4	NDS NM PA
PALFORZIA LEVEL 11 (MAINT PACK 300mg	4	NDS NM PA
PALFORZIA LEVEL 11 (TITRA PACK 300mg	4	NDS NM PA
RAGWITEK SUBL 12amba1-u	3	PA
RYSTIGGO SOLN 280mg/2ml, 420mg/3ml, 560mg/4ml, 840mg/6ml	4	NDS NM PA
VYVGART SOLN 400mg/20ml	4	NDS NM PA
VYVGART INJ HYTRULO	4	NDS NM PA
ZILBRYSQ SOSY 16.6mg/0.416ml, 23mg/0.574ml, 32.4mg/0.81ml QL (28 syringes / 28 days)	4	NDS QL NM PA
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CP24 5mg	4	NDS B/D NM
ASTAGRAF XL CP24 .5mg, 1mg	3	B/D NM
ATGAM SOLN 50mg/ml	4	NDS B/D
azasan TABS 75mg, 100mg	1	B/D
azathioprine (generic of IMURAN) TABS 50mg	1	B/D
azathioprine TABS 75mg, 100mg	1	B/D

Drug Name	Tier	Requirements/ Limits
BENLYSTA SOAJ 200mg/ml QL (8 pens / 28 days)	4	NDS QL NM PA
BENLYSTA SOLR 120mg, 400mg	4	NDS NM PA
BENLYSTA SOSY 200mg/ml QL (8 syringes / 28 days)	4	NDS QL NM PA
CELLCEPT CAPS 250mg; SUSR 200mg/ml; TABS 500mg	4	NDS B/D NM
cyclosporine (generic of SANDIMMUNE) CAPS 25mg, 100mg	1	B/D NM
cyclosporine modified (for microemulsion) (generic of NEORAL) CAPS 25mg, 100mg; SOLN 100mg/ml	1	B/D NM
cyclosporine modified (for microemulsion) CAPS 50mg	1	B/D NM
ENVARSUS XR TB24 4mg	4	NDS B/D NM
ENVARSUS XR TB24 .75mg, 1mg	3	B/D NM
everolimus (immunosuppressant) (generic of ZORTRESS) TABS .5mg, .75mg, 1mg	4	NDS B/D NM
everolimus (immunosuppressant) (generic of ZORTRESS) TABS .25mg	1	B/D NM
gengraf (generic of NEORAL) CAPS 25mg, 100mg	1	B/D NM
IMURAN TABS 50mg	3	B/D
LUPKYNIS CAPS 7.9mg	4	NDS NM PA
mycophenolate mofetil (generic of CELLCEPT) CAPS 250mg; TABS 500mg	1	B/D NM
mycophenolate mofetil (generic of CELLCEPT) SUSR 200mg/ml	4	NDS B/D NM
mycophenolate sodium (generic of MYFORTIC) TBEC 180mg, 360mg	1	B/D NM
MYFORTIC TBEC 180mg	3	B/D NM
MYFORTIC TBEC 360mg	4	NDS B/D NM
MYHIBBIN SUSP 200mg/ml	4	NDS B/D NM
NEORAL CAPS 25mg, 100mg; SOLN 100mg/ml	3	B/D NM
NIKTIMVO SOLN 9mg/0.18ml, 22mg/0.44ml	4	NDS NM PA
NULOJIX SOLR 250mg	4	NDS B/D NM
PROGRAF CAPS 5mg	4	NDS B/D NM
PROGRAF CAPS .5mg, 1mg; PACK .2mg, 1mg	3	B/D NM
REZUROCK TABS 200mg QL (30 tabs / 30 days)	4	NDS QL NM PA
SANDIMMUNE CAPS 25mg; SOLN 50mg/ml	3	B/D NM
SANDIMMUNE CAPS 100mg	4	NDS B/D NM
SAPHNELO SOLN 300mg/2ml	4	NDS NM PA
sirolimus SOLN 1mg/ml; TABS .5mg, 1mg, 2mg	1	B/D NM
tacrolimus (generic of PROGRAF) CAPS .5mg, 1mg, 5mg	1	B/D NM
ZORTRESS TABS .25mg, .5mg, .75mg, 1mg	4	NDS B/D NM
VACCINES		
ABRYSVO SOLR 120mcg/0.5ml	1	PA
ACTHIB INJ	1	
ADACEL INJ	1	
AREXVY SUSR 120mcg/0.5ml	1	PA
BCG VACCINE SOLR 50mg	1	
BEXSERO SUSY .5ml	1	
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
DENGVAXIA SUS	1	
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 SUSP .5ml; SUSY .5ml	1	
HAVRIX SUSY 720elu/0.5ml, 1440unit/ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D
HIBERIX SOLR 10mcg	1	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
IPOL INJ INACTIVE	1	
IXIARO INJ	1	

Drug Name	Drug Requirements/ Tier	Limits
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	
M-M-R II INJ	1	
MENQUADFI SOLN .5ml	1	
MENVEO INJ	1	
MENVEO SOL	1	
MRESVIA SUSY 50mcg/0.5ml	1	PA
PEDIARIX INJ 0.5ML	1	
PEDVAX HIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENMENVY INJ	1	
PENTACEL INJ	1	
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml QL (2 vials per lifetime)	1	QL
SHINGRIX SUSY 50mcg/0.5ml QL (2 syringes per lifetime)	1	QL
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	
TRUMENBA SUSY .5ml	1	
TWINRIX INJ	1	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	
VAQTA SUSP 25unit/0.5ml, 50unit/ml; SUSY 25unit/0.5ml, 50unit/ml	1	
VARIVAX SUSR 1350pfu/0.5ml	1	
VAXCHORA SUS	1	
VIMKUNYA SUSY 40mcg/0.8ml	1	
VIVOTIF CAP EC	1	
YF-VAX INJ	1	
NUTRITIONAL/SUPPLEMENTS *ELECTROLYTES/MINERALS, INJECTABLE*		
D2.5W/NACL INJ 0.45%	3	
D5W/LYTES INJ #48	3	
D5W/NACL INJ 0.2%	1	
D5W/NACL INJ 0.3%	3	
D5W/NACL INJ 0.9%	3	
D5W/NACL INJ 0.45%	1	
D10W/NACL INJ 0.2%	2	
D10W/NACL INJ 0.45%	1	
dextrose 2.5% w/ sodium chloride 0.45% (generic of DEXTROSE 2.5%/SODIUM CHLO)	1	
dextrose 5% in lactated ringers	1	
dextrose 5% w/ sodium chloride 0.3% (generic of DEXTROSE 5%/SODIUM CHLORI)	1	
dextrose 5% w/ sodium chloride 0.9% (generic of DEXTROSE 5%/SODIUM CHLORI)	1	
dextrose 5% w/ sodium chloride 0.45% (generic of DEXTROSE 5%/SODIUM CHLORI)	1	
dextrose 5% w/ sodium chloride 0.225% (generic of DEXTROSE/SODIUM CHLORIDE)	1	
DW5-NACL INJ 0.225%	3	
ISOLYTE-P INJ /D5W	3	
ISOLYTE-S INJ	3	
ISOLYTE-S INJ PH 7.4	3	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj (generic of KCL 0.075%/D5W/NACL 0.45%)	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	1	

Drug Name	Drug Tier	Requirements/ Limits
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	1	
kcl 20 meq/l (0.15%) in nacl 0.9% inj (generic of POTASSIUM CHLORIDE/SODIUM)	1	
kcl 20 meq/l (0.15%) in nacl 0.45% inj (generic of POTASSIUM CHLORIDE/SODIUM)	1	
kcl 20 meq/l (0.149%) in nacl 0.9% inj	1	
kcl 20 meq/l (0.149%) in nacl 0.45% inj	1	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj (generic of POTASSIUM CHLORIDE/DEXTRO)	1	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj (generic of KCL 0.3%/D5W/NACL 0.9%)	1	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj (generic of KCL 0.3%/D5W/NACL 0.45%)	1	
kcl 40 meq/l (0.3%) in nacl 0.9% inj (generic of POTASSIUM CHLORIDE/SODIUM)	1	
kcl 40 meq/l (0.298%) in nacl 0.9% inj	1	
KCL/D5W/LACT INJ 20MEQ/L	3	
KCL/D5W/NACL INJ 0.3/0.9%	3	
KCL/D5W/NACL INJ 0.15/0.2	1	
KCL/D5W/NACL INJ 0.15/0.9	3	
KCL/D5W/NACL INJ 0.15/0.45	3	
LACTATED RIN INJ	3	
lactated ringer's solution (generic of LACTATED RINGERS)	1	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	2	
magnesium sulfate (generic of MAGNESIUM SULFATE) SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%	2	
magnesium sulfate SOLN 3gm/100ml	2	
magnesium sulfate in dextrose 5% iv soln 1 gm/100ml (generic of MAGNESIUM SULFATE IN D5W)	2	
MG SO4/D5W INJ 10MG/ML	2	
multiple electrolytes ph 5.5 (generic of PLASMA-LYTE A)	1	
PLASMA-LYTE INJ -A	3	
POT CHL 20MEQ/L IN NACL 0.9% INJ	3	
POT CHL 20MEQ/L IN NACL 0.45% INJ	3	
POT CHL 40MEQ/L IN NACL 0.9% INJ	3	
POT CHL/D5W INJ 20MEQ/L	3	
potassium chloride SOLN 2meq/ml	1	
POTASSIUM CHLORIDE SOLN 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	3	
potassium chloride (generic of POTASSIUM CHLORIDE) SOLN 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	1	
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj (generic of POTASSIUM CHLORIDE/DEXTRO)	1	
sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%	1	
TPN ELECTROL INJ	3	B/D
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
klor-con PACK 20meq	1	
KLOR-CON 8 TBCR 8meq	1	
klor-con 10 TBCR 10meq	1	
KLOR-CON 10 TBCR 10meq	1	

Drug Name	Drug Requirements/ Tier	Limits
klor-con m10 TBCR 10meq	1	
klor-con m15 TBCR 15meq	1	
klor-con m20 TBCR 20meq	1	
M-NATAL PLUS TAB	2	
POKONZA PACK 10meq	3	
POKONZA PACK 15meq; SOLN 5%	4	NDS
potassium chloride CPCR 8meq, 10meq; PACK 20meq; SOLN 10%, 20%; TBCR 10meq, 15meq, 20meq	1	
potassium chloride (generic of KLOR-CON 8) TBCR 8meq	1	
potassium chloride microencapsulated crystals er TBCR 10meq, 15meq, 20meq	1	
PRENATAL TAB 27-1MG	2	
PRENATAL TAB PLUS	2	
sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln	1	
WESTAB PLUS TAB 27-1MG	2	
IV NUTRITION		
aminosyn ii soln 15%	1	B/D
AMINOSYN INJ 10%	3	B/D
AMINOSYN-PF INJ 7%	3	B/D
AMINOSYN-PF INJ 10%	3	B/D
CLINIMIX E INJ 2.75/D5W	3	B/D
CLINIMIX E INJ 4.25/D5W	3	B/D
CLINIMIX E INJ 4.25/D10	3	B/D
CLINIMIX E INJ 5%/D15W	3	B/D
CLINIMIX E INJ 5%/D20W	3	B/D
CLINIMIX E INJ 8/10	3	B/D
CLINIMIX E INJ 8/14	3	B/D
CLINIMIX INJ 4.25/D5W	3	B/D
CLINIMIX INJ 4.25/D10	3	B/D
CLINIMIX INJ 5%/D15W	3	B/D
CLINIMIX INJ 5%/D20W	3	B/D
CLINIMIX INJ 6/5	3	B/D
CLINIMIX INJ 8/10	3	B/D
CLINIMIX INJ 8/14	3	B/D
clinisol sf 15%	1	B/D
CLINOLIPID EMU 20%	3	B/D
dextrose (generic of DEXTROSE 5%) SOLN 5%	1	
dextrose (generic of DEXTROSE 10%) SOLN 10%	1	
dextrose SOLN 50%	1	B/D
DEXTROSE 10% SOLN 10%	1	
DEXTROSE 70% SOLN 70%	1	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	3	B/D
KABIVEN EMU	4	NDS B/D
NUTRILIPID EMUL 20gm/100ml	3	B/D
plenamine	1	B/D
PREMASOL SOL 10%	4	NDS B/D
PROSOL INJ 20%	3	B/D
SMOFLIPID EMU	3	B/D
TRAVASOL INJ 10%	3	B/D
TROPHAMINE INJ 10%	3	B/D
OPHTHALMIC *ANTI-INFECTIVE/ANTI-INFLAMMATORY*		
bacitracin-polymyxin-neomycin-hc ophth oint 1%	1	
loteprednol etabonate-tobramycin ophth susp 0.5-0.3% (generic of ZYLET)	1	
MAXITROL OIN 0.1% OP	3	
MAXITROL SUS 0.1% OP	3	
neomycin-polymyxin-dexamethasone ophth oint 0.1% (generic of MAXITROL)	1	
neomycin-polymyxin-dexamethasone ophth susp 0.1% (generic of MAXITROL)	1	
neomycin-polymyxin-hc ophth susp	1	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	3	
tobramycin-dexamethasone ophth susp 0.3-0.1%	1	
ZYLET SUS 0.5-0.3%	2	
ANTI-INFECTIVES		
AZASITE SOLN 1%	3	
bacitracin (ophthalmic) OINT 500unit/gm	1	
bacitracin-polymyxin b ophth oint	1	
besifloxacin hcl SUSP .6%	1	
BESIVANCE SUSP .6%	2	

Drug Name	Drug Tier	Requirements/ Limits
CILOXAN OINT .3%	2	
ciprofloxacin hcl (ophth) SOLN .3%	1	
erythromycin (ophth) OINT 5mg/gm	1	
gatifloxacin (ophth) SOLN .5%	1	
gentamicin sulfate (ophth) SOLN .3%	1	
levofloxacin (ophth) SOLN .5%, 1.5%	1	
moxifloxacin hcl (ophth) SOLN .5% QL (12 mL / 30 days)	1	QL
moxifloxacin hcl (ophth) (generic of VIGAMOX) SOLN .5% QL (12 mL / 30 days)	1	QL
NATACYN SUSP 5%	3	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	1	
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	1	
OCUFLOX SOLN .3%	3	
ofloxacin (ophth) (generic of OCUFLOX) SOLN .3%	1	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	1	
sulfacetamide sodium (ophth) SOLN 10%	1	
tobramycin (ophth) SOLN .3%	1	
TOBREX OINT .3%	3	
trifluridine SOLN 1%	1	
VIGAMOX SOLN .5% QL (12 mL / 30 days)	3	QL
XDEMVY SOLN .25%	4	NDS NM PA
ZIRGAN GEL .15%	3	
ANTI-INFLAMMATORIES		
ACULAR SOLN .5%	3	
ACULAR LS SOLN .4%	3	
ACUVAIL SOLN .45%	3	
ALREX SUSP .2%	3	

Drug Name	Drug Tier	Requirements/ Limits
bromfenac sodium (ophth) (generic of PROLENSA) SOLN .07%	1	
bromfenac sodium (ophth) SOLN .09%	1	
bromfenac sodium (ophth) (generic of BROMSITE) SOLN .075%	1	
BROMSITE SOLN .075%	3	
dexamethasone sodium phosphate (ophth) SOLN .1%	1	
DEXYCU SUSP 9%	3	
diclofenac sodium (ophth) SOLN .1%	1	
difluprednate (generic of DUREZOL) EMUL .05%	1	
DUREZOL EMUL .05%	3	
FLAREX SUSP .1%	3	
fluorometholone (ophth) (generic of FML LIQUIFILM) SUSP .1%	1	
flurbiprofen sodium SOLN .03%	1	
FML FORTE SUSP .25%	3	
FML LIQUIFILM SUSP .1%	3	
ILEVRO SUSP .3%	3	
INVELTYS SUSP 1%	3	
ketorolac tromethamine (ophth) (generic of ACULAR LS) SOLN .4%	1	
ketorolac tromethamine (ophth) (generic of ACULAR) SOLN .5%	1	
LOTEMAX GEL .5%; SUSP .5%	3	
LOTEMAX OINT .5%	2	
LOTEMAX SM GEL .38%	2	
loteprednol etabonate (generic of LOTEMAX) GEL .5%; SUSP .5%	1	
loteprednol etabonate (generic of ALREX) SUSP .2%	1	
MAXIDEX SUSP .1%	3	
NEVANAC SUSP .1%	3	
PRED FORTE SUSP 1%	3	
PRED MILD SUSP .12%	3	

Drug Name	Drug Tier	Requirements/ Limits
prednisolone acetate (ophth) (generic of PRED FORTE) SUSP 1%	1	
PREDNISOLONE SODIUM PHOSP SOLN 1%	2	
PROLENSA SOLN .07%	3	
TRIESENCE SUSP 40mg/ml	3	PA
XIPERE SUSP 40mg/ml	3	NM PA
YUTIQ IMPL .18mg	4	NDS NM
ANTIALLERGICS		
azelastine hcl (ophth) SOLN .05%	1	
bepotastine besilate (generic of BEPREVE) SOLN 1.5%	1	
BEPREVE SOLN 1.5%	3	
cromolyn sodium (ophth) SOLN 4%	1	
epinastine hcl (ophth) SOLN .05%	1	
ZERVIATE SOLN .24%	3	
ANTIGLAUCOMA		
ALPHAGAN P SOLN .1%, .15%	3	
AZOPT SUSP 1%	3	ST
betaxolol hcl (ophth) SOLN .5%	1	
BETIMOL SOLN .5%	3	
bimatoprost SOLN .03%	1	
brimonidine tartrate (generic of ALPHAGAN P) SOLN .1%, .15%	1	
brimonidine tartrate SOLN .2%	1	
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (generic of COMBIGAN)	1	
brinzolamide (generic of AZOPT) SUSP 1%	1	ST
carteolol hcl (ophth) SOLN 1%	1	
COMBIGAN SOL 0.2/0.5%	2	
COSOPT PF SOL 2%-0.5%	3	
COSOPT SOL 2-0.5%OP	3	
dorzolamide hcl SOLN 2%	1	
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (generic of COSOPT)	1	
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (generic of COSOPT PF)	1	
ISTALOL SOLN .5%	3	
IYUZEH SOLN .005%	3	ST
latanoprost (generic of XALATAN) SOLN .005%	1	
levobunolol hcl SOLN .5%	1	
LUMIGAN SOLN .01%	2	
PHOSPHOLINE IODIDE SOLR .125%	4	NDS NM
pilocarpine hcl SOLN 1%, 2%, 4%	1	
RHOPRESSA SOLN .02%	2	
ROCKLATAN DRO	2	
SIMBRINZA SUS 1-0.2%	3	
tafluprost (generic of ZIOPTAN) SOLN .015mg/ml	1	
timolol hemihydrate (ophth) (generic of BETIMOL) SOLN .5%	1	
timolol maleate (ophth) SOLG .25%, .5%; SOLN .25%, .5%	1	
timolol maleate (ophth) once-daily (generic of ISTALOL) SOLN .5%	1	
timolol maleate (ophth) pf (generic of TIMOPTIC OCUDOSE) SOLN .25%, .5%	1	
TIMOPTIC OCUDOSE SOLN .25%, .5%	3	
TRAVATAN Z SOLN .004%	3	
travoprost (generic of TRAVATAN Z) SOLN .004%	1	
VYZULTA SOLN .024%	3	
XALATAN SOLN .005%	3	
XELPROS EMUL .005%	3	ST
ZIOPTAN SOLN .015mg/ml	3	ST
MISCELLANEOUS		
ATROPINE SULFATE SOLN 1%	2	
atropine sulfate (ophthalmic) SOLN 1%	1	
BEOVU SOSY 6mg/0.05ml	4	NDS NM PA
BYOOVIZ SOLN .5mg/0.05ml	4	NDS NM PA

Drug Name	Drug Tier	Requirements/ Limits
CEQUA SOLN .09% QL (60 single use vials / 30 days)	3	QL PA
CIMERLI SOLN .3mg/0.05ml, .5mg/0.05ml	4	NDS NM PA
CYSTADROPS SOLN .37%	4	NDS NM PA
CYSTARAN SOLN .44%	4	NDS NM PA
EYLEA SOLN 2mg/0.05ml; SOSY 2mg/0.05ml	4	NDS NM PA
EYLEA HD SOLN 8mg/0.07ml	4	NDS NM PA
EYSUVIS SUSP .25%	3	
IZERVAY SOLN 2mg/0.1ml	4	NDS NM PA
LUCENTIS SOSY .3mg/0.05ml, .5mg/0.05ml	4	NDS NM PA
MIEBO SOLN 1.338gm/ml	2	
OXERVATE SOLN .002% QL (112 mL / year)	4	NDS QL NM PA
PAVBLU SOSY 2mg/0.05ml	4	NDS NM PA
proparacaine hcl (generic of ALCAINE) SOLN .5%	1	
RESTASIS EMUL .05%	2	
RESTASIS MULTIDOSE EMUL .05%	2	
SUSVIMO SOLN 10mg/0.1ml	4	NDS NM PA
SYFOVRE SOLN 15mg/0.1ml	4	NDS NM PA
TRYPTYR SOLN .003% QL (60 single use vials / 30 days)	3	QL PA
TYRVAYA SOLN .03mg/act	3	PA
VABYSMO SOLN 6mg/0.05ml; SOSY 6mg/0.05ml	4	NDS NM PA
VERKAZIA EMUL .1% QL (120 single use vials / 30 days)	4	NDS QL PA
VEVYE SOLN .1%	4	NDS PA
XIIDRA SOLN 5%	2	
OTIC		
OTIC AGENTS		
acetic acid (otic) SOLN 2%	1	
CIPRO HC SUS 0.2-1%OT	3	
ciprofloxacin hcl (otic) (generic of CETRAXAL) SOLN .2%	1	
ciprofloxacin-dexamethasone otic susp 0.3-0.1%	1	
ciprofloxacin-hydrocortisone otic susp 0.2-1% (generic of CIPRO HC)	1	
CORTISPORIN SUS -TC OTIC	3	
DERMOTIC OIL .01%	3	
flac (generic of DERMOTIC) OIL .01%	1	
fluocinolone acetonide (otic) (generic of DERMOTIC) OIL .01%	1	
hydrocortisone w/ acetic acid otic soln 1-2%	1	
neomycin-polymyxin-hc otic soln 1%	1	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	1	
ofloxacin (otic) SOLN .3%	1	
RESPIRATORY		
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPT AER 62.5-25 QL (60 blisters / 30 days)	2	QL
BEVESPI AER 9-4.8MCG QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER SPHERE QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) QL (4 inhalers / 28 days)	2	QL
COMBIVENT AER 20-100 QL (2 inhalers / 30 days)	3	QL
DUAKLIR AER 400/12 QL (1 inhaler / 30 days)	3	QL
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	1	B/D
STIOLTO AER 2.5-2.5 QL (1 inhaler / 30 days)	3	QL
TRELEGY AER ELLIPTA 100-62.5-25 MCG QL (60 blisters / 30 days)	2	QL

Drug Name	Drug Requirements/ Tier	Limits
TRELEGY AER ELLIPTA 200-62.5-25 MCG QL (60 blisters / 30 days)	2	QL
ANTICHOLINERGICS		
ATROVENT HFA AERS 17mcg/act QL (2 inhalers / 30 days)	3	QL
INCRUSE ELLIPTA AEPB 62.5mcg/inh QL (30 blisters / 30 days)	2	QL
ipratropium bromide SOLN .02%	1	B/D
ipratropium bromide (nasal) SOLN .03%, .06%	1	
SPIRIVA HANDIHALER CAPS 18mcg QL (30 caps / 30 days)	3	QL
SPIRIVA RESPIMAT AERS 1.25mcg/act, 2.5mcg/act QL (1 inhaler / 30 days)	3	QL
tiotropium bromide (generic of SPIRIVA HANDIHALER) CAPS 18mcg QL (30 caps / 30 days)	1	QL
TUDORZA PRESSAIR AEPB 400mcg/act QL (1 inhaler / 30 days)	3	QL
TUDORZA PRESSAIR (INSTITUTIONAL PACK) AEPB 400mcg/act QL (2 inhalers / 30 days)	3	QL
YUPELRI NEBU 175mcg/3ml	4	NDS PA
ANTIHISTAMINE COMBINATIONS		
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (generic of DYMISTA) QL (1 bottle / 30 days)	1	QL
CLARINEX-D TAB 2.5-120	3	
DYMISTA SPR 137-50 QL (1 bottle / 30 days)	3	QL
promethazine & phenylephrine syrup 6.25-5 mg/5ml PA applies if 65 years and older	2	PA
RYALTRIS SPR 665-25 QL (31 gm / 30 days)	3	QL
ANTIHISTAMINES		
azelastine hcl SOLN .1%	1	
carbinoxamine maleate SOLN 4mg/5ml; SUER 4mg/5ml; TABS 6mg PA applies if 65 years and older	3	PA
carbinoxamine maleate TABS 4mg PA applies if 65 years and older	2	PA
carbzah SOLN 4mg/5ml PA applies if 65 years and older	3	PA
cetirizine hcl SOLN 5mg/5ml QL (300 mL / 30 days)	1	QL
CLARINEX TABS 5mg QL (30 tabs / 30 days)	3	QL
clemastine fumarate SYRP .67mg/5ml QL (1800 mL / 30 days)	4	NDS QL PA
clemastine fumarate TABS 2.68mg PA applies if 65 years and older	2	PA
CLEMSZA TABS 2.68mg PA applies if 65 years and older	4	NDS PA
corphena SOLN 2mg/5ml PA applies if 65 years and older	1	PA
cyproheptadine hcl SYRP 2mg/5ml; TABS 4mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
desloratadine (generic of CLARINEX) TABS 5mg QL (30 tabs / 30 days)	1	QL
desloratadine TBDP 2.5mg, 5mg QL (30 tabs / 30 days)	1	QL
diphenhydramine hcl SOLN 50mg/ml	1	

Drug Name	Tier	Requirements/ Limits
hydroxyzine hcl SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older	3	PA
hydroxyzine hcl SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
hydroxyzine pamoate CAPS 25mg, 50mg, 100mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
KARBINAL ER SUER 4mg/5ml PA applies if 65 years and older	3	PA
levocetirizine dihydrochloride SOLN 2.5mg/5ml QL (300 mL / 30 days)	1	QL
levocetirizine dihydrochloride TABS 5mg QL (30 tabs / 30 days)	1	QL
olopatadine hcl (nasal) SOLN .6%	1	
QUZYTTIR SOLN 10mg/ml QL (30 mL / 30 days)	4	NDS QL PA
ryclora SOLN 2mg/5ml PA applies if 65 years and older	1	PA
ryvent TABS 6mg PA applies if 65 years and older	3	PA
BETA AGONISTS		
albuterol sulfate AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Proair HFA)	1	QL
albuterol sulfate AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Proventil HFA)	1	QL
albuterol sulfate AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Ventolin HFA)	1	QL
albuterol sulfate NEBU .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	1	B/D
albuterol sulfate SYRP 2mg/5ml; TABS 2mg, 4mg	1	
arformoterol tartrate NEBU 15mcg/2ml	1	B/D
formoterol fumarate (generic of PERFOROMIST) NEBU 20mcg/2ml	1	B/D
levalbuterol hcl NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	1	B/D
levalbuterol tartrate AERO 45mcg/act QL (2 inhalers / 30 days)	1	QL ST
PERFOROMIST NEBU 20mcg/2ml	4	NDS B/D
PROAIR RESPICLICK AEPB 108mcg/act QL (2 inhalers / 30 days)	3	QL
SEREVENT DISKUS AEPB 50mcg/dose QL (60 inhalations / 30 days)	2	QL
STRIVERDI RESPIMAT AERS 2.5mcg/act QL (1 inhaler / 30 days)	3	QL
terbutaline sulfate SOLN 1mg/ml; TABS 2.5mg, 5mg	1	
VENTOLIN HFA AERS 108mcg/act QL (2 inhalers / 30 days)	2	QL
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act QL (6 inhalers / 30 days)	2	QL
XOPENEX HFA AERO 45mcg/act QL (2 inhalers / 30 days)	3	QL ST
LEUKOTRIENE MODULATORS		
montelukast sodium (generic of SINGULAIR) CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	1	
SINGULAIR CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	3	
zafirlukast TABS 10mg, 20mg	1	

Drug Name	Tier	Requirements/ Limits
zileuton TB12 600mg QL (120 tabs / 30 days)	4	NDS QL ST
ZYFLO TABS 600mg QL (120 tabs / 30 days)	4	NDS QL ST
MISCELLANEOUS		
acetylcysteine SOLN 10%, 20%	1	B/D
ALYFTREK TAB 4-20-50 QL (84 tabs / 28 days)	4	NDS QL NM PA
ALYFTREK TAB 10-50-125 QL (56 tabs / 28 days)	4	NDS QL NM PA
ARALAST NP SOLR 500mg, 1000mg	4	NDS NM PA
BRINSUPRI TABS 10mg, 25mg QL (30 tabs / 30 days)	4	NDS QL NM PA
CINQAIR SOLN 100mg/10ml	4	NDS NM PA
cromolyn sodium NEBU 20mg/2ml	1	B/D
DALIRESP TABS 250mcg QL (56 tabs / year)	3	QL
DALIRESP TABS 500mcg QL (30 tabs / 30 days)	3	QL
elixophyllin ELIX 80mg/15ml	4	NDS
epinephrine (anaphylaxis) (generic of EPIPEN 2-PAK) SOAJ .3mg/0.3ml (generic of EpiPen)	1	
epinephrine (anaphylaxis) (generic of EPIPEN-JR 2-PAK) SOAJ .15mg/0.3ml (generic of EpiPen)	1	
epinephrine (anaphylaxis) SOAJ .15mg/0.15ml, .3mg/0.3ml (generic of Adrenaclick)	1	
EPIPEN 2-PAK SOAJ .3mg/0.3ml	3	
EPIPEN-JR 2-PAK SOAJ .15mg/0.3ml	3	
ESBRIET TABS 267mg QL (270 tabs / 30 days)	4	NDS QL NM PA
ESBRIET TABS 801mg QL (90 tabs / 30 days)	4	NDS QL NM PA
EXDENSUR SOSY 100mg/ml QL (1 syringe / 180 days)	4	NDS QL NM PA
FASENRA SOSY 10mg/0.5ml, 30mg/ml QL (1 syringe / 28 days)	4	NDS QL NM PA
FASENRA PEN SOAJ 30mg/ml QL (1 pen / 28 days)	4	NDS QL NM PA
GLASSIA SOLN 4gm/200ml, 5gm/250ml, 1000mg/50ml	4	NDS NM PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg QL (56 packets / 28 days)	4	NDS QL NM PA
KALYDECO TABS 150mg QL (60 tabs / 30 days)	4	NDS QL NM PA
NUCALA SOAJ 100mg/ml QL (3 pens / 28 days)	4	NDS QL NM PA
NUCALA SOLR 100mg QL (3 vials / 28 days)	4	NDS QL NM PA
NUCALA SOSY 40mg/0.4ml QL (1 syringe / 28 days)	4	NDS QL NM PA
NUCALA SOSY 100mg/ml QL (3 syringes / 28 days)	4	NDS QL NM PA
OFEV CAPS 100mg, 150mg QL (60 caps / 30 days)	4	NDS QL NM PA
OHTUVAYRE SUSP 3mg/2.5ml	4	NDS NM PA
ORKAMBI GRA 75-94MG QL (56 packets / 28 days)	4	NDS QL NM PA
ORKAMBI GRA 100-125 QL (56 packets / 28 days)	4	NDS QL NM PA
ORKAMBI GRA 150-188 QL (56 packets / 28 days)	4	NDS QL NM PA
ORKAMBI TAB 100-125 QL (112 tabs / 28 days)	4	NDS QL NM PA
ORKAMBI TAB 200-125 QL (112 tabs / 28 days)	4	NDS QL NM PA
pirfenidone CAPS 267mg QL (270 caps / 30 days)	4	NDS QL NM PA
pirfenidone (generic of ESBRIET) TABS 267mg QL (270 tabs / 30 days)	4	NDS QL NM PA
pirfenidone TABS 534mg QL (90 tabs / 30 days)	4	NDS QL NM PA

Drug Name	Tier	Requirements/ Limits
pirfenidone (generic of ESBRIET) TABS 801mg QL (90 tabs / 30 days)	4	NDS QL NM PA
PROLASTIN-C SOLN 1000mg/20ml	4	NDS NM PA
PULMOZYME SOLN 2.5mg/2.5ml	4	NDS NM PA
roflumilast (generic of DALIRESP) TABS 250mcg QL (56 tabs / year)	1	QL
roflumilast (generic of DALIRESP) TABS 500mcg QL (30 tabs / 30 days)	1	QL
SYMDEKO TAB 50-75MG QL (56 tabs / 28 days)	4	NDS QL NM PA
SYMDEKO TAB 100-150 QL (56 tabs / 28 days)	4	NDS QL NM PA
TEZSPIRE SOAJ 210mg/1.91ml QL (1 pen / 28 days)	4	NDS QL NM PA
TEZSPIRE SOSY 210mg/1.91ml QL (1 syringe / 28 days)	4	NDS QL NM PA
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	3	
theophylline ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg; TB24 400mg, 600mg	1	
TRIKAFTA PAK 59.5MG QL (56 packs / 28 days)	4	NDS QL NM PA
TRIKAFTA PAK 75MG QL (56 packs / 28 days)	4	NDS QL NM PA
TRIKAFTA TAB 50-25-37.5MG & 75MG QL (84 tabs / 28 days)	4	NDS QL NM PA
TRIKAFTA TAB 100-50-75MG & 150MG QL (84 tabs / 28 days)	4	NDS QL NM PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml QL (4 pens / 28 days)	4	NDS QL NM PA
XOLAIR SOAJ 150mg/ml QL (8 pens / 28 days)	4	NDS QL NM PA
XOLAIR SOLR 150mg QL (8 vials / 28 days)	4	NDS QL NM PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml QL (4 syringes / 28 days)	4	NDS QL NM PA
XOLAIR SOSY 150mg/ml QL (8 syringes / 28 days)	4	NDS QL NM PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	4	NDS NM PA
NASAL STEROIDS		
flunisolide (nasal) SOLN .025% QL (3 bottles / 30 days)	1	QL
fluticasone propionate (nasal) SUSP 50mcg/act QL (1 bottle / 30 days)	1	QL
mometasone furoate (nasal) SUSP 50mcg/act QL (2 bottles / 30 days)	1	QL
OMNARIS SUSP 50mcg/act QL (1 inhaler / 30 days)	3	QL ST
QNASL AERS 80mcg/act QL (1 inhaler / 30 days)	3	QL ST
QNASL CHILDRENS AERS 40mcg/act QL (1 inhaler / 30 days)	3	QL ST
XHANCE EXHU 93mcg/act QL (32 mL / 30 days)	3	QL PA
STEROID INHALANTS		
ALVESCO AERS 80mcg/act QL (3 inhalers / 30 days)	3	QL
ALVESCO AERS 160mcg/act QL (2 inhalers / 30 days)	3	QL
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act QL (30 inhalations / 30 days)	2	QL
ASMANEX HFA AERO 50mcg/act, 100mcg/act, 200mcg/act QL (1 inhaler / 30 days)	3	QL
ASMANEX TWISTHALER 14 MET AEPB 220mcg/inh QL (8 inhalers / 28 days)	3	QL
ASMANEX TWISTHALER 30 MET AEPB 110mcg/inh QL (2 inhalers / 30 days)	3	QL

Drug Name	Drug Tier	Requirements/ Limits
ASMANEX TWISTHALER 30 MET AEPB 220mcg/inh QL (4 inhalers / 30 days)	3	QL
ASMANEX TWISTHALER 60 MET AEPB 220mcg/inh QL (2 inhalers / 30 days)	3	QL
ASMANEX TWISTHALER 120 ME AEPB 220mcg/inh QL (1 inhaler / 30 days)	3	QL
budesonide (inhalation) (generic of PULMICORT) SUSP .25mg/2ml, .5mg/2ml, 1mg/2ml	1	B/D
fluticasone propionate (inhalation) AEPB 50mcg/act QL (180 inhalations / 30 days)	2	QL
fluticasone propionate (inhalation) AEPB 100mcg/act, 250mcg/act QL (240 inhalations / 30 days)	2	QL
fluticasone propionate hfa AERO 44mcg/act, 110mcg/act, 220mcg/act QL (2 inhalers / 30 days)	2	QL
PULMICORT SUSP .25mg/2ml, .5mg/2ml, 1mg/2ml	3	B/D
PULMICORT FLEXHALER AEPB 90mcg/act QL (3 inhalers / 30 days)	3	QL
PULMICORT FLEXHALER AEPB 180mcg/act QL (2 inhalers / 30 days)	3	QL
QVAR REDIHALER AERB 40mcg/act, 80mcg/act QL (2 inhalers / 30 days)	3	QL
STEROID/BETA-AGONIST COMBINATIONS		
ADVAIR DISKU AER 100/50 QL (60 inhalations / 30 days)	3	QL PA
ADVAIR DISKU AER 250/50 QL (60 inhalations / 30 days)	3	QL PA
ADVAIR DISKU AER 500/50 QL (60 inhalations / 30 days)	3	QL PA
ADVAIR HFA AER 45/21 QL (1 inhaler / 30 days)	2	QL
ADVAIR HFA AER 115/21 QL (1 inhaler / 30 days)	2	QL
ADVAIR HFA AER 230/21 QL (1 inhaler / 30 days)	2	QL
AIRSUPRA AER 90-80MCG QL (3 inhalers / 30 days)	2	QL
BREO ELLIPTA INH 50-25MCG QL (60 blisters / 30 days)	2	QL
BREO ELLIPTA INH 100-25 QL (60 blisters / 30 days)	2	QL
BREO ELLIPTA INH 200-25 QL (60 blisters / 30 days)	2	QL
breyna (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
DULERA AER 50-5MCG QL (3 inhalers / 30 days)	3	QL
DULERA AER 100-5MCG QL (3 inhalers / 30 days)	3	QL
DULERA AER 200-5MCG QL (3 inhalers / 30 days)	3	QL
fluticasone-salmeterol aer powder ba 100-50 mcg/act (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days) (generic PRASCO not covered)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
fluticasone-salmeterol aer powder ba 250-50 mcg/act (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days) (generic PRASCO not covered)	1	QL
fluticasone-salmeterol aer powder ba 500-50 mcg/act (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days) (generic PRASCO not covered)	1	QL
SYMBICORT AER 80-4.5 QL (3 inhalers / 30 days)	3	QL PA
SYMBICORT AER 160-4.5 QL (3 inhalers / 30 days)	3	QL PA
wixela inhub (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
TOPICAL *DERMATOLOGY, ACNE*		
ABSORICA CAPS 10mg, 20mg, 25mg, 30mg, 35mg, 40mg	4	NDS PA
ABSORICA LD CAPS 8mg, 16mg, 24mg, 32mg	4	NDS PA
ACANYA GEL 1.2-2.5% QL (50 gm / 30 days)	3	QL
accutane CAPS 10mg, 20mg, 30mg, 40mg	1	PA
ACZONE GEL 7.5% QL (90 gm / 30 days)	3	QL
adapalene (generic of DIFFERIN) CREA .1%; GEL .3% QL (45 gm / 30 days)	1	QL PA
adapalene PADS .1% QL (28 swabs / 28 days)	4	NDS QL PA
ADAPALENE SOLN .1% QL (120 mL / 30 days)	3	QL PA
adapalene-benzoyl peroxide gel 0.1-2.5% (generic of EPIDUO) QL (45 gm / 30 days)	1	QL PA
adapalene-benzoyl peroxide gel 0.3-2.5% (generic of EPIDUO FORTE) QL (60 gm / 30 days)	1	QL PA
AKLIEF CREA .005% QL (45 gm / 30 days)	3	QL PA
ALTRENO LOTN .05% QL (45 gm / 30 days)	3	QL PA
amnesteem CAPS 10mg, 20mg, 30mg, 40mg	1	PA
AMZEEQ FOAM 4% QL (30 gm / 30 days)	3	QL PA
ARAZLO LOTN .045% QL (45 gm / 30 days)	3	QL PA
ATRALIN GEL .05% QL (45 gm / 30 days)	3	QL PA
AZELEX CREA 20% QL (50 gm / 30 days)	3	QL PA
BENZAMYCIN GEL 5-3% QL (46.6 gm / 30 days)	3	QL
benzoyl peroxide-erythromycin gel 5-3% (generic of BENZAMYCIN) QL (46.6 gm / 30 days)	1	QL
CABTREO GEL QL (50 gm / 30 days)	4	NDS QL PA
claravis CAPS 10mg, 20mg, 30mg, 40mg	1	PA
CLEOCIN-T LOTN 1% QL (60 mL / 30 days)	3	QL
clindacin FOAM 1% QL (100 gm / 30 days)	1	QL
clindacin etz pledgets SWAB 1% QL (69 pledgets / 30 days)	1	QL
clindacin-p SWAB 1% QL (69 pledgets / 30 days)	1	QL
CLINDAGEL GEL 1% QL (75 mL / 30 days)	4	NDS QL PA
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5% QL (45 gm / 30 days)	1	QL
clindamycin phosphate (topical) FOAM 1% QL (100 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
clindamycin phosphate (topical) (generic of CLINDAGEL) GEL 1%	1	QL PA
QL (75 mL / 30 days)		
clindamycin phosphate (topical) (generic of CLEOCIN-T) LOTN 1%	1	QL
QL (60 mL / 30 days)		
clindamycin phosphate (topical) SOLN 1%	1	QL
QL (60 mL / 30 days)		
clindamycin phosphate (topical) SWAB 1%	1	QL
QL (69 pledgets / 30 days)		
clindamycin phosphate-benzoyl peroxide gel 1-5%	1	QL
QL (50 gm / 30 days)		
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% (generic of ACANYA)	1	QL
QL (50 gm / 30 days)		
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (generic of ONEXTON)	1	QL
QL (50 gm / 30 days)		
clindamycin phosphate-tretinoin gel 1.2-0.025%	1	QL PA
QL (60 gm / 30 days)		
dapsone (topical) GEL 5%	1	QL
QL (90 gm / 30 days)		
dapsone (topical) (generic of ACZONE) GEL 7.5%	1	QL
QL (90 gm / 30 days)		
DIFFERIN CREA .1%	3	QL PA
QL (45 gm / 30 days)		
DIFFERIN PUMP GEL .3%	3	QL PA
QL (45 gm / 30 days)		
EPIDUO FORTE GEL 0.3-2.5%	3	QL PA
QL (60 gm / 30 days)		
EPIDUO GEL 0.1-2.5%	3	QL PA
QL (45 gm / 30 days)		
ery PADS 2%	1	QL
QL (60 pledgets / 30 days)		
erythromycin (acne aid) GEL 2%	1	QL
QL (60 gm / 30 days)		
erythromycin (acne aid) SOLN 2%	1	QL
QL (60 mL / 30 days)		
isotretinoin CAPS 10mg, 20mg, 30mg, 40mg	1	PA
isotretinoin (generic of ABSORICA) CAPS 25mg, 35mg	1	PA
KLARON LOTN 10%	3	QL
QL (118 mL / 30 days)		
neuac gel 1.2-5%	1	QL
QL (45 gm / 30 days)		
ONEXTON GEL 1.2-3.75	3	QL
QL (50 gm / 30 days)		
RETIN-A CREA .025%, .05%, .1%; GEL .01%, .025%	3	QL PA
QL (45 gm / 30 days)		
RETIN-A MICRO GEL .06%	3	QL PA
QL (50 gm / 30 days)		
RETIN-A MICRO PUMP GEL .08%	3	QL PA
QL (50 gm / 30 days)		
sulfacetamide sodium (acne) (generic of KLARON) LOTN 10%	1	QL
QL (118 mL / 30 days)		
TAZAROTENE FOAM .1%	3	QL PA
QL (100 gm / 30 days)		
tretinoin (generic of RETIN-A) CREA .025%, .05%, .1%; GEL .01%, .025%	1	QL PA
QL (45 gm / 30 days)		
tretinoin (generic of ATRALIN) GEL .05%	1	QL PA
QL (45 gm / 30 days)		
tretinoin microsphere GEL .04%, .1%	1	QL PA
QL (50 gm / 30 days)		
tretinoin microsphere (generic of RETIN-A MICRO PUMP) GEL .08%	1	QL PA
QL (50 gm / 30 days)		
twice-daily clindamycin phosphate (topical) GEL 1%	1	QL
QL (60 gm / 30 days)		
TWYNEO CRE 0.1-3%	3	QL PA
QL (30 gm / 30 days)		

Drug Name	Tier	Drug Requirements/ Limits
WINLEVI CREA 1% QL (60 gm / 30 days)	3	QL PA
zenatane CAPS 10mg, 20mg, 30mg, 40mg	1	PA
ZIANA GEL QL (60 gm / 30 days)	3	QL PA
DERMATOLOGY, ANTIBIOTICS		
gentamicin sulfate (topical) CREA .1%; OINT .1% QL (30 gm / 30 days)	1	QL
mupirocin OINT 2% QL (220 gm / 30 days)	1	QL
mupirocin calcium (topical) CREA 2% QL (30 gm / 30 days)	1	QL PA
SILVADENE CREA 1%	3	
silver sulfadiazine (generic of SILVADENE) CREA 1%	1	
ssd (generic of SILVADENE) CREA 1%	1	
SULFAMYLON CREA 85mg/gm QL (453.6 gm / 30 days)	3	QL
DERMATOLOGY, ANTIFUNGALS		
ciclopirox GEL .77% QL (100 gm / 30 days)	1	QL
ciclopirox SHAM 1% QL (120 mL / 30 days)	1	QL
ciclopirox olamine CREA .77% QL (90 gm / 30 days)	1	QL
ciclopirox olamine SUSP .77% QL (60 mL / 30 days)	1	QL
clotrimazole (topical) CREA 1% QL (45 gm / 30 days)	1	QL
clotrimazole (topical) SOLN 1% QL (60 mL / 30 days)	1	QL
clotrimazole w/ betamethasone cream 1-0.05% QL (45 gm / 30 days)	1	QL
econazole nitrate CREA 1% QL (85 gm / 30 days)	1	QL
ECONAZOLE NITRATE FOAM 1% QL (70 gm / 28 days)	3	QL ST
ERTACZO CREA 2% QL (60 gm / 30 days)	4	NDS QL ST
EXELDERM CREA 1% QL (60 gm / 30 days)	3	QL PA
EXELDERM SOLN 1% QL (30 mL / 30 days)	3	QL PA
JUBLIA SOLN 10% QL (8 mL / 30 days)	4	NDS QL
ketoconazole (topical) CREA 2% QL (60 gm / 30 days)	1	QL
ketoconazole (topical) FOAM 2% QL (100 gm / 30 days)	1	QL PA
ketoconazole (topical) SHAM 2% QL (120 mL / 30 days)	1	QL
ketodan FOAM 2% QL (100 gm / 30 days)	1	QL PA
klayesta POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
luliconazole CREA 1% QL (60 gm / 30 days)	1	QL ST
LUZU CREA 1% QL (60 gm / 30 days)	3	QL ST
miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35% QL (50 gm / 30 days)	1	QL PA
naftifine hcl CREA 1% QL (90 gm / 30 days)	1	QL
naftifine hcl CREA 2% QL (60 gm / 30 days)	1	QL
naftifine hcl (generic of NAFTIN) GEL 2% QL (60 gm / 30 days)	1	QL
NAFTIN GEL 2% QL (60 gm / 30 days)	3	QL
nyamyc POWD 100000unit/gm QL (60 gm / 30 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
nystatin (topical) CREA 100000unit/gm; OINT 100000unit/gm QL (30 gm / 30 days)	1	QL
nystatin (topical) POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
nystop POWD 100000unit/gm QL (60 gm / 30 days)	1	QL
oxiconazole nitrate CREA 1% QL (90 gm / 30 days)	1	QL PA
OXISTAT LOTN 1% QL (60 mL / 30 days)	3	QL PA
selenium sulfide LOTN 2.5%	1	
VUSION OIN QL (50 gm / 30 days)	3	QL PA
ZORYVE FOAM .3% QL (60 gm / 30 days)	3	QL PA
DERMATOLOGY, ANTIPSORIATICS		
acitretin CAPS 10mg, 17.5mg, 25mg	1	PA
calcipotriene CREA .005%; OINT .005% QL (120 gm / 30 days)	1	QL PA
CALCIPOTRIENE FOAM .005% QL (120 gm / 30 days)	4	NDS QL PA
calcipotriene SOLN .005% QL (120 mL / 30 days)	1	QL PA
calcipotriene-betamethasone dipropionate oint 0.005-0.064% QL (400 gm / 28 days)	1	QL PA
calcipotriene-betamethasone dipropionate susp 0.005-0.064% (generic of TACLONEX) QL (420 gm / 28 days)	1	QL PA
calcitrene OINT .005% QL (120 gm / 30 days)	1	QL PA
calcitriol (topical) OINT 3mcg/gm QL (800 gm / 28 days)	1	QL PA
ENSTILAR AER QL (120 gm / 30 days)	4	NDS QL PA
methoxsalen rapid CAPS 10mg	4	NDS
SORILUX FOAM .005% QL (120 gm / 30 days)	4	NDS QL PA
TACLONEX SUS QL (420 gm / 28 days)	4	NDS QL PA
tazarotene (generic of TAZORAC) CREA .05%, .1% QL (60 gm / 30 days)	1	QL PA
tazarotene (generic of TAZORAC) GEL .05%, .1% QL (100 gm / 30 days)	1	QL PA
TAZORAC CREA .05%, .1% QL (60 gm / 30 days)	3	QL PA
TAZORAC GEL .05%, .1% QL (100 gm / 30 days)	3	QL PA
VECTICAL OINT 3mcg/gm QL (800 gm / 28 days)	4	NDS QL PA
VTAMA CREA 1% QL (60 gm / 30 days)	4	NDS QL PA
ZORYVE CREA .3% QL (60 gm / 30 days)	3	QL PA
DERMATOLOGY, CORTICOSTEROIDS		
ala-cort CREA 1%	1	
ala-scalp LOTN 2% QL (60 mL / 30 days)	4	NDS QL
alclometasone dipropionate CREA .05%; OINT .05% QL (60 gm / 30 days)	1	QL
amcinonide CREA .1%; OINT .1% QL (60 gm / 30 days)	4	NDS QL PA
betamethasone dipropionate (topical) CREA .05%; OINT .05% QL (120 gm / 30 days)	1	QL
betamethasone dipropionate (topical) LOTN .05% QL (120 mL / 30 days)	1	QL
betamethasone dipropionate augmented CREA .05%; GEL .05% QL (120 gm / 30 days)	1	QL
betamethasone dipropionate augmented LOTN .05% QL (120 mL / 30 days)	1	QL
betamethasone dipropionate augmented (generic of DIPROLENE) OINT .05% QL (120 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
betamethasone valerate CREA .1%; FOAM .12%; OINT .1% QL (120 gm / 30 days)	1	QL
betamethasone valerate LOTN .1% QL (120 mL / 30 days)	1	QL
BRYHALI LOTN .01% QL (100 gm / 30 days)	3	QL PA
clobetasol propionate CREA .05%; GEL .05%; OINT .05% QL (120 gm / 30 days)	1	QL
clobetasol propionate FOAM .05% QL (100 gm / 30 days)	1	QL
clobetasol propionate (generic of CLOBEX) LIQD .05% QL (125 mL / 30 days)	1	QL
clobetasol propionate (generic of CLOBEX) LOTN .05% QL (118 mL / 30 days)	1	QL
clobetasol propionate (generic of CLOBEX) SHAM .05% QL (236 mL / 30 days)	1	QL
clobetasol propionate SOLN .05% QL (100 mL / 30 days)	1	QL
clobetasol propionate e CREA .05% QL (120 gm / 30 days)	1	QL
clobetasol propionate emulsion FOAM .05% QL (100 gm / 30 days)	1	QL
CLOBEX LIQD .05% QL (125 mL / 30 days)	3	QL
CLOBEX LOTN .05% QL (118 mL / 30 days)	3	QL
CLOBEX SHAM .05% QL (236 mL / 30 days)	3	QL
clocortolone pivalate CREA .1% QL (90 gm / 30 days)	1	QL PA
clodan (generic of CLOBEX) SHAM .05% QL (236 mL / 30 days)	1	QL
CORDRAN TAPE 4mcg/sqcm QL (1 roll / 30 days)	3	QL PA
DERMA-SMOOTHE/FS BODY OIL .01% QL (118.28 mL / 30 days)	3	QL
DERMA-SMOOTHE/FS SCALP OIL .01% QL (118.28 mL / 30 days)	3	QL
desonide CREA .05%; OINT .05% QL (60 gm / 30 days)	1	QL
desonide GEL .05% QL (60 gm / 30 days)	1	QL PA
desonide LOTN .05% QL (118 mL / 30 days)	1	QL
desoximetasone CREA .05% QL (100 gm / 30 days)	1	QL PA
desoximetasone CREA .25% QL (100 gm / 30 days)	1	QL
desoximetasone GEL .05% QL (60 gm / 30 days)	1	QL PA
desoximetasone (generic of TOPICORT) LIQD .25% QL (100 mL / 30 days)	1	QL
desoximetasone (generic of TOPICORT) OINT .05% QL (100 gm / 30 days)	1	QL PA
desoximetasone (generic of TOPICORT) OINT .25% QL (100 gm / 30 days)	1	QL
diflorasone diacetate CREA .05%; OINT .05% QL (60 gm / 30 days)	1	QL PA
DIPROLENE OINT .05% QL (120 gm / 30 days)	3	QL
DUOBRII LOT QL (200 gm / 28 days)	4	NDS QL PA
EPIFOAM AER 1%	3	
fluocinolone acetonide CREA .01% QL (60 gm / 30 days)	1	QL
fluocinolone acetonide (generic of SYNALAR) CREA .025%; OINT .025% QL (120 gm / 30 days)	1	QL

Drug Name	Drug Tier	Requirements/ Limits
fluocinolone acetonide (generic of DERMA-SMOOTHE/FS BODY) OIL .01%	1	QL
QL (118.28 mL / 30 days)		
fluocinolone acetonide (generic of DERMA-SMOOTHE/FS SCALP) OIL .01%	1	QL
QL (118.28 mL / 30 days)		
fluocinolone acetonide SOLN .01%	1	QL
QL (60 mL / 30 days)		
fluocinonide (generic of VANOS) CREA .1%	1	QL
QL (120 gm / 30 days)		
fluocinonide CREA .05%	1	QL
QL (120 gm / 30 days)		
fluocinonide GEL .05%; OINT .05%	1	QL
QL (60 gm / 30 days)		
fluocinonide SOLN .05%	1	QL
QL (60 mL / 30 days)		
fluocinonide emulsified base CREA .05%	1	QL
QL (120 gm / 30 days)		
flurandrenolide LOTN .05%	1	QL PA
QL (120 mL / 30 days)		
fluticasone propionate CREA .05%; OINT .005%	1	
fluticasone propionate LOTN .05%	1	QL
QL (120 mL / 30 days)		
halcinonide (generic of HALOG) CREA .1%	1	QL PA
QL (240 gm / 30 days)		
halcinonide (generic of HALOG) SOLN .1%	1	QL PA
QL (120 mL / 30 days)		
halobetasol propionate CREA .05%; OINT .05%	1	QL
QL (50 gm / 30 days)		
halobetasol propionate FOAM .05%	1	QL PA
QL (200 gm / 28 days)		
HALOG CREA .1%	3	QL PA
QL (240 gm / 30 days)		
HALOG SOLN .1%	4	NDS QL PA
QL (120 mL / 30 days)		
hydrocortisone (topical) CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%; SOLN 2.5%	1	
hydrocortisone (topical) LOTN 2%	4	NDS QL
QL (60 mL / 30 days)		
hydrocortisone (topical) OINT 1%	1	QL
QL (30 gm / 30 days)		
hydrocortisone butyrate CREA .1%; OINT .1%	1	QL
QL (45 gm / 30 days)		
hydrocortisone butyrate LOTN .1%	1	QL PA
QL (118 mL / 30 days)		
hydrocortisone butyrate SOLN .1%	1	QL
QL (60 mL / 30 days)		
hydrocortisone valerate CREA .2%; OINT .2%	1	QL
QL (60 gm / 30 days)		
LEXETTE FOAM .05%	1	QL PA
QL (200 gm / 28 days)		
mometasone furoate CREA .1%; OINT .1%; SOLN .1%	1	
PRAMOSONE CRE 1-1%	3	
PRAMOSONE LOT 1-1%	3	
PRAMOSONE LOT 2.5%	3	
SYNALAR CREA .025%; OINT .025%	3	QL
QL (120 gm / 30 days)		
texacort SOLN 2.5%	1	
TOPICORT LIQD .25%	3	QL PA
QL (100 mL / 30 days)		
TOPICORT OINT .05%	3	QL PA
QL (100 gm / 30 days)		
tovet FOAM .05%	1	QL
QL (100 gm / 30 days)		
triamcinolone acetonide (topical) AERS .147mg/gm	1	QL PA
QL (100 gm / 30 days)		
triamcinolone acetonide (topical) CREA .025%, .1%, .5%	1	QL
QL (454 gm / 30 days)		

Drug Name	Tier	Requirements/ Limits
triamcinolone acetonide (topical) LOTN .025%, .1%; OINT .025%, .1%, .5%	1	
triamcinolone acetonide (topical) OINT .05% QL (430 gm / 30 days)	1	QL PA
triderm CREA .5% QL (454 gm / 30 days)	1	QL
ULTRAVATE LOTN .05% QL (120 mL / 30 days)	4	NDS QL PA
DERMATOLOGY, LOCAL ANESTHETICS		
DYCLOPRO SOLN .5%	3	
glydo PRSY 2% QL (60 mL / 30 days)	1	QL PA
lidocaine OINT 5% QL (50 gm / 30 days)	1	QL PA
lidocaine (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
lidocaine hcl GEL 2% QL (30 mL / 30 days)	1	QL PA
lidocaine hcl SOLN 4% QL (50 mL / 30 days)	1	QL PA
lidocaine-prilocaine cream 2.5-2.5% QL (30 gm / 30 days)	1	B/D QL
lidocan (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
QUTENZA KIT 8% 1-PCH QL (4 patches / 90 days)	4	NDS QL NM PA
QUTENZA KIT 8% 2-PCH QL (4 patches / 90 days)	4	NDS QL NM PA
QUTENZA KIT 8% 4-PCH QL (4 patches / 90 days)	4	NDS QL NM PA
tridacaine ii (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
ZTLIDO PTCH 1.8% QL (3 patches / 1 day)	3	QL PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
acyclovir topical (generic of ZOVIRAX) CREA 5% QL (5 gm / 30 days)	1	QL PA
acyclovir topical (generic of ZOVIRAX) OINT 5% QL (30 gm / 30 days)	1	QL

Drug Name	Tier	Requirements/ Limits
ANALPRAM HC LOT 2.5%	3	
ANUSOL-HC CREA 2.5%	3	
ANZUPGO CREA 20mg/gm QL (60 gm / 30 days)	4	NDS QL NM PA
azelaic acid (generic of FINACEA) GEL 15% QL (50 gm / 30 days)	1	QL
bexarotene (topical) (generic of TARGRETIN) GEL 1% QL (60 gm / 30 days)	4	NDS QL NM PA
brimonidine tartrate (topical) (generic of MIRVASO) GEL .33% QL (30 gm / 30 days)	1	QL PA
CORTIFOAM FOAM 10%	3	
DENAVIR CREA 1% QL (5 gm / 30 days)	3	QL
diclofenac sodium (actinic keratoses) GEL 3% QL (100 gm / 30 days)	1	QL PA
diclofenac sodium (topical) SOLN 1.5% QL (300 mL / 28 days)	1	QL
diclofenac sodium (topical) SOLN 2% QL (224 gm / 28 days)	1	QL PA
doxepin hcl (antipruritic) (generic of PRUDOXIN) CREA 5% QL (45 gm / 30 days)	1	QL PA
doxycycline (rosacea) (generic of ORACEA) CPDR 40mg	1	
EMROSI CP24 40mg QL (30 caps / 30 days)	4	NDS QL PA
EPSOLAY CREA 5% QL (30 gm / 30 days)	3	QL PA
EUCRISA OINT 2% QL (120 gm / 30 days)	3	QL PA
FINACEA FOAM 15% QL (50 gm / 30 days)	3	QL PA
fluorouracil (topical) CREA 5% QL (40 gm / 30 days)	1	QL
fluorouracil (topical) CREA .5% QL (30 gm / 30 days)	4	NDS QL

Drug Name	Drug Tier	Requirements/ Limits
fluorouracil (topical) SOLN 2%, 5% QL (10 mL / 30 days)	1	QL
hydrocortisone (rectal) CREA 1%	1	
hydrocortisone (rectal) (generic of ANUSOL-HC) CREA 2.5%	1	
HYFTOR GEL .2% QL (20 gm / 25 days)	4	NDS QL NM PA
imiquimod (generic of ZYCLARA PUMP) CREA 3.75% QL (28 packets / 28 days)	1	QL
imiquimod CREA 5% QL (24 packets / 30 days)	1	QL
imiquimod pump (generic of ZYCLARA PUMP) CREA 3.75% QL (7.5 gm / 28 days)	1	QL
ivermectin (rosacea) (generic of SOOLANTRA) CREA 1% QL (45 gm / 30 days)	1	QL PA
KLISYRI OINT 1% QL (5 packets / 30 days)	4	NDS QL PA
lactic acid (ammonium lactate) CREA 12%; LOTN 12%	1	
METROCREAM CREA .75% QL (45 gm / 30 days)	3	QL PA
metronidazole (topical) (generic of METROCREAM) CREA .75% QL (45 gm / 30 days)	1	QL
metronidazole (topical) (generic of METROGEL) GEL 1% QL (60 gm / 30 days)	1	QL
metronidazole (topical) GEL .75% QL (45 gm / 30 days)	1	QL
metronidazole (topical) LOTN .75% QL (59 mL / 30 days)	1	QL
MIRVASO GEL .33% QL (30 gm / 30 days)	3	QL PA
nitroglycerin (intra-anal) (generic of RECTIV) OINT .4% QL (30 gm / 30 days)	1	QL
NORITATE CREA 1% QL (60 gm / 30 days)	4	NDS QL PA
OPZELURA CREA 1.5% QL (240 gm / 28 days)	4	NDS QL PA
ORACEA CPDR 40mg	3	
PANRETIN GEL .1% QL (60 gm / 30 days)	4	NDS QL PA
penciclovir (generic of DENAVIR) CREA 1% QL (5 gm / 30 days)	1	QL
pimecrolimus CREA 1% QL (100 gm / 30 days)	1	QL PA
podofilox GEL .5% QL (7 gm / 28 days)	1	QL
podofilox SOLN .5% QL (7 mL / 28 days)	1	QL
procto-med hc (generic of ANUSOL-HC) CREA 2.5%	1	
proctocort CREA 1%	1	
PROCTOFOAM AER HC 1%	3	
proctosol hc (generic of ANUSOL-HC) CREA 2.5%	1	
proctozone-hc (generic of ANUSOL-HC) CREA 2.5%	1	
PRUDOXIN CREA 5% QL (45 gm / 30 days)	3	QL PA
QBREXZA PADS 2.4% QL (30 cloths / 30 days)	3	QL PA
RECTIV OINT .4% QL (30 gm / 30 days)	3	QL
RHOFADE CREA 1% QL (30 gm / 30 days)	3	QL
SOFDRA GEL 12.45% QL (50 mL / 30 days)	3	QL NM PA
SOOLANTRA CREA 1% QL (45 gm / 30 days)	3	QL PA
tacrolimus (topical) OINT .03%, .1% QL (100 gm / 30 days)	1	QL PA
TARGRETIN GEL 1% QL (60 gm / 30 days)	4	NDS QL NM PA
VALCHLOR GEL .016% QL (60 gm / 30 days)	4	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
XERESE CRE 5-1% QL (5 gm / 30 days)	4	NDS QL
YCANTH SOLN .7%	3	NM PA
ZELSUVMI GEL 10.3%	4	NDS PA
ZILXI FOAM 1.5% QL (30 gm / 30 days)	3	QL PA
ZONALON CREA 5% QL (45 gm / 30 days)	3	QL PA
ZORYVE CREA .05%, .15% QL (60 gm / 30 days)	3	QL PA
ZOVIRAX CREA 5% QL (5 gm / 30 days)	3	QL PA
ZOVIRAX OINT 5% QL (30 gm / 30 days)	3	QL
ZYCLARA PUMP CREA 3.75% QL (7.5 gm / 28 days)	4	NDS QL
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
crotan LOTN 10% QL (454 gm / 30 days)	4	NDS QL PA
ELIMITE CREA 5% QL (60 gm / 30 days)	3	QL
malathion LOTN .5% QL (59 mL / 30 days)	1	QL
NATROBA SUSP .9%	3	
OVIDE LOTN .5% QL (59 mL / 30 days)	3	QL
permethrin (generic of PERMETHRIN) CREA 5% QL (60 gm / 30 days)	1	QL
pruradik LOTN 10% QL (454 gm / 30 days)	4	NDS QL PA
spinosad SUSP .9%	1	
DERMATOLOGY, WOUND CARE AGENTS		
FILSUVEZ GEL 10% QL (30 tubes / 30 days)	4	NDS QL NM PA
SANTYL OINT 250unit/gm QL (180 gm / 30 days)	3	QL PA
sodium chloride (gu irrigant) SOLN .9%	1	
water for irrigation, sterile irrigation soln	1	
MOUTH/THROAT/DENTAL AGENTS		
cevimeline hcl (generic of EVOXAC) CAPS 30mg	1	
chlorhexidine gluconate (mouth-throat) (generic of PERIDEX) SOLN .12%	1	
clotrimazole TROC 10mg QL (150 lozenges / 30 days)	1	QL
EVOXAC CAPS 30mg	3	
kourzeq PSTE .1%	1	
lidocaine hcl (mouth-throat) SOLN 2%	1	
nystatin (mouth-throat) (generic of NYSTATIN) SUSP 100000unit/ml	1	
periogard (generic of PERIDEX) SOLN .12%	1	
pilocarpine hcl (oral) (generic of SALAGEN) TABS 5mg, 7.5mg	1	
SALAGEN TABS 5mg, 7.5mg	3	
triamcinolone acetonide (mouth) PSTE .1%	1	

Index

A
abacavir sulfate.....10
abacavir sulfate-lamivudine tab 600-300 mg.....11
abigale.....79
abigale lo.....79
ABILIFY.....46
see *aripiprazole*.....46
ABILIFY ASIMTUFII.....46
ABILIFY MAINTENA.....46
ABILIFY MYCITE MAINTENANC.....46
ABILIFY MYCITE STARTER KI.....46
abiraterone acetate.....17
abirtega.....17
ABRAXANE
see *paclitaxel inj 100mg*.....20
ABRAXANE INJ 100MG.19
ABRYSVO.....102
ABSORICA.....114
see *isotretinoin*.....115
ABSORICA LD.....114
acamprosate calcium.....68
ACANYA
see *clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%*.....115
ACANYA GEL 1.2-2.5%114
acarbose.....69
accutane.....114
acebutolol hcl.....34
acetaminophen.....1
acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg.....4
acetaminophen w/ codeine soln 120-12 mg/5ml.....4
acetaminophen w/ codeine tab 300-15 mg.....4
acetaminophen w/ codeine tab 300-30 mg.....4
acetaminophen w/ codeine tab 300-60 mg.....4
acetazolamide.....36
acetic acid.....91
acetic acid (otic).....108
acetylcysteine.....111
ACIPHEX.....90
see *rabeprazole sodium*.....91
acitretin.....117
ACTEMRA.....97
ACTEMRA ACTPEN.....97
ACTHAR.....81
ACTHAR GEL.....81
ACTHIB INJ.....102
ACTIMMUNE.....101
ACTIVELLA
see *abigale*.....79
see *estradiol & norethindrone acetate tab 1-0.5 mg*.....79
see *mimvey*.....79
ACTIVELLA TAB 1-0.5MG.....79
ACTONEL.....74
see *risedronate sodium*.....75
ACTOPLUS MET
see *pioglitazone hcl-metformin hcl tab 15-850 mg*.....71
ACTOPLUS MET TAB 15-850MG.....69
ACTOS.....69
see *pioglitazone hcl*.....71
ACULAR.....106
see *ketorolac tromethamine (ophth)*.....106
ACULAR LS.....106
see *ketorolac tromethamine (ophth)*.....106
ACUVAIL.....106
acyclovir.....12
acyclovir sodium.....12
acyclovir topical.....120
ACZONE.....114
see *dapsone (topical)*115
ADACEL INJ.....102
ADAKVEO.....95
ADALIMUMAB-BWWD...97
adapalene.....114
ADAPALENE.....114
adapalene-benzoyl peroxide gel 0.1-2.5%.....114
adapalene-benzoyl peroxide gel 0.3-2.5%.....114
ADBRY.....97
ADCIRCA.....39
see *alyq*.....39
see *tadalafil (pulmonary hypertension)*.....39
ADDERALL
see *amphetamine-dextroamphetamine tab 10 mg*.....57
see *amphetamine-dextroamphetamine tab 12.5 mg*.....57
see *amphetamine-dextroamphetamine tab 15 mg*.....57
see *amphetamine-dextroamphetamine tab 20 mg*.....57
see *amphetamine-dextroamphetamine tab 30 mg*.....57
see *amphetamine-dextroamphetamine tab 5 mg*.....57
see *amphetamine-dextroamphetamine tab 7.5 mg*.....57
ADDERALL TAB 10MG..56
ADDERALL TAB 12.5MG.....56
ADDERALL TAB 15MG..56
ADDERALL TAB 20MG..56
ADDERALL TAB 30MG..56
ADDERALL TAB 5MG....56
ADDERALL TAB 7.5MG.56
ADDERALL XR

see *amphetamine-dextroamphetamine cap er 24hr 10 mg*....56
see *amphetamine-dextroamphetamine cap er 24hr 15 mg*....56
see *amphetamine-dextroamphetamine cap er 24hr 20 mg*....57
see *amphetamine-dextroamphetamine cap er 24hr 25 mg*....57
see *amphetamine-dextroamphetamine cap er 24hr 30 mg*....57
see *amphetamine-dextroamphetamine cap er 24hr 5 mg*.....56
ADDERALL XR CAP 10MG 56
ADDERALL XR CAP 15MG 56
ADDERALL XR CAP 20MG 56
ADDERALL XR CAP 25MG 56
ADDERALL XR CAP 30MG 56
ADDERALL XR CAP 5MG 56
adefovir dipivoxil 12
ADEMPAS 39
ADMELOG 72
ADMELOG SOLOSTAR .72
ADRENALIN 37
see *epinephrine*.....38
ADVAIR DISKU AER 100/50 113
ADVAIR DISKU AER 250/50 113
ADVAIR DISKU AER 500/50 113
ADVAIR DISKUS
see *fluticasone-salmeterol aer powder ba 100-50 mcg/act*.113
see *fluticasone-salmeterol aer powder ba 250-50 mcg/act*.114
see *fluticasone-salmeterol aer powder ba 500-50 mcg/act*.114
see *wixela inhub*.....114
ADVAIR HFA AER 115/21 113
ADVAIR HFA AER 230/21 113
ADVAIR HFA AER 45/21 113
ADZENYS XR-ODT 56
see *amphetamine*.....56
ADZYNMA 95
AFINITOR 20
see *everolimus* 21
see *torpenz*.....25
AFINITOR DISPERZ.....20
see *everolimus* 21
afirmelle 76
AFREZZA.....72
AFREZZA POW 4-8-12...73
AFREZZA POW 4-8 UNIT 72
AFREZZA POW 8-12UNIT 73
AGRYLIN 95
see *anagrelide hcl* 95
AIMOVIG.....61
AIRSUPRA AER 90-80MCG 113
AJOVY 61
AKEEGA TAB 100/500 ...17
AKEEGA TAB 50/500MG 17
AKLIEF.....114
AKYNZEO CAP 300-0.5 .85
AKYNZEO INJ 235-0.25 .85
AKYNZEO INJ 235-0.25MG/20ML.....85
ala-cort 117
ala-scalp.....117
albendazole.....6
albuterol sulfate.....110
ALCAINE
see *proparacaine hcl*.108
alclometasone dipropionate 117
ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY 73
ALDACTONE.....28
see *spironolactone* 28
ALDURAZYME 81
ALECENSA.....20
alendronate sodium 74
alfuzosin hcl 91
ALIMTA.....17
aliskiren fumarate.....37
ALKINDI SPRINKLE 80
allopurinol.....1
allopurinol sodium 1
almotriptan malate 61
alogliptin benzoate 69
alogliptin-metformin hcl tab 12.5-1000 mg 69
alogliptin-metformin hcl tab 12.5-500 mg 69
alogliptin-pioglitazone tab 12.5-30 mg 69
alogliptin-pioglitazone tab 25-15 mg 69
alogliptin-pioglitazone tab 25-30 mg 69
alogliptin-pioglitazone tab 25-45 mg 69
ALOPRIM.....1
see *allopurinol sodium*...1
alosetron hcl.....88
ALPHAGAN P 107
see *brimonidine tartrate* 107
alprazolam 40
ALPRAZOLAM INTENSOL 40
ALREX 106
see *loteprednol etabonate*.....106
altavera 76
ALTRENO 114
ALUNBRIG.....20
ALUNBRIG PAK 20
ALVAIZ.....95
ALVESCO 112

alyacen 1/35.....76
alyacen 7/7/7.....76
ALYFTREK TAB 10-50-125 111
ALYFTREK TAB 4-20-50 111
ALYGLO.....100
ALYMSYS.....20
alyq 39
amantadine hcl.....45
AMBIEN 60
see *zolpidem tartrate*...61
AMBIEN CR.....60
see *zolpidem tartrate*...61
AMBISOME.....9
see *amphotericin b liposome* 9
ambrisentan 39
amcinonide.....117
amethyst 76
amikacin sulfate 6
amiloride & hydrochlorothiazide tab 5-50 mg 36
amiloride hcl.....36
aminocaproic acid 95
aminosyn ii soln 15% 105
AMINOSYN INJ 10% 105
AMINOSYN-PF INJ 10% 105
AMINOSYN-PF INJ 7% 105
amiodarone hcl 32
AMITIZA.....88
see *lubiprostone* 89
amitriptyline hcl 42
AMLODIPINE/OLMESARTAN MED
see *amlodipine besylate-olmesartan medoxomil tab 10-20 mg*.....28
see *amlodipine besylate-olmesartan medoxomil tab 10-40 mg*.....28
see *amlodipine besylate-olmesartan medoxomil tab 5-20 mg*.....28
see *amlodipine besylate-olmesartan medoxomil tab 5-40 mg*.....28
amlodipine besylate 35
amlodipine besylate-atorvastatin calcium tab 10-10 mg 37
amlodipine besylate-atorvastatin calcium tab 10-20 mg 37
amlodipine besylate-atorvastatin calcium tab 10-40 mg 37
amlodipine besylate-atorvastatin calcium tab 10-80 mg 37
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg 37
amlodipine besylate-atorvastatin calcium tab 2.5-20 mg 37
amlodipine besylate-atorvastatin calcium tab 2.5-40 mg 37
amlodipine besylate-atorvastatin calcium tab 5-10 mg 37
amlodipine besylate-atorvastatin calcium tab 5-20 mg 37
amlodipine besylate-atorvastatin calcium tab 5-40 mg 37
amlodipine besylate-atorvastatin calcium tab 5-80 mg 37
amlodipine besylate-benazepril hcl cap 10-20 mg 27
amlodipine besylate-benazepril hcl cap 10-40 mg 27
amlodipine besylate-benazepril hcl cap 2.5-10 mg 27
amlodipine besylate-benazepril hcl cap 5-10 mg 27
amlodipine besylate-benazepril hcl cap 5-20 mg 27
amlodipine besylate-benazepril hcl cap 5-40 mg 27
amlodipine besylate-olmesartan medoxomil tab 10-20 mg 28
amlodipine besylate-olmesartan medoxomil tab 10-40 mg 28
amlodipine besylate-olmesartan medoxomil tab 5-20 mg 28
amlodipine besylate-olmesartan medoxomil tab 5-40 mg 28
amlodipine besylate-valsartan tab 10-160 mg 29
amlodipine besylate-valsartan tab 10-320 mg 29
*amlodipine besylate-valsartan tab 5-160 mg*29
*amlodipine besylate-valsartan tab 5-320 mg*29
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg.....29
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg.....29
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg.....29
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg.....29
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg.....29
amnesteem 114
amoxapine 42

amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg.....88
amoxicillin 14
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml 14
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml 15
amoxicillin & k clavulanate for susp 400-57 mg/5ml 15
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml 15
amoxicillin & k clavulanate tab 250-125 mg 15
amoxicillin & k clavulanate tab 500-125 mg 15
amoxicillin & k clavulanate tab 875-125 mg 15
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg 15
amphetamine 56
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg 56
amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg 56
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg 56
amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg 56
amphetamine-dextroamphetamine cap er 24hr 10 mg.....56
amphetamine-dextroamphetamine cap er 24hr 15 mg.....56
amphetamine-dextroamphetamine cap er 24hr 20 mg.....57
amphetamine-dextroamphetamine cap er 24hr 25 mg.....57
amphetamine-dextroamphetamine cap er 24hr 30 mg.....57
amphetamine-dextroamphetamine cap er 24hr 5 mg.....56
amphetamine-dextroamphetamine tab 10 mg 57
amphetamine-dextroamphetamine tab 12.5 mg 57
amphetamine-dextroamphetamine tab 15 mg 57
amphetamine-dextroamphetamine tab 20 mg 57
amphetamine-dextroamphetamine tab 30 mg 57
amphetamine-dextroamphetamine tab 5 mg 57
amphetamine-dextroamphetamine tab 7.5 mg 57
amphotericin b 9
amphotericin b liposome...9
ampicillin 15
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm 15
ampicillin & sulbactam sodium for inj 3 (2-1) gm 15
ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm 15
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm 15
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm 15
ampicillin sodium.....15
AMPYRA.....64
see *dalfampridine*.....65
AMVUTTRA 63
AMZEEQ.....114
ANAFRANIL.....42
see *clomipramine hcl*...42
anagrelide hcl.....95
ANALPRAM HC LOT 2.5% 120
anastrozole 17
ANCOBON.....9
see *flucytosine*.....9
ANDEMBRY.....95
ANDROGEL PUMP
see *testosterone pump*69
ANNOVERA MIS 76
ANORO ELLIPT AER 62.5-25 108
ANUSOL-HC.....120
see *hydrocortisone (rectal)*.....121
see *procto-med hc*.....121
see *proctosol hc* 121
see *proctozone-hc*.....121
ANZUPGO 120
APIDRA.....73
APIDRA SOLOSTAR.....73
APLENZIN 42
APOKYN.....45
apomorphine hydrochloride 45
APONVIE.....85
aprepitant.....85
aprepitant capsule therapy pack 80 & 125 mg 85
apri.....76
APRISO 87
see *mesalamine* 88
APTENSIO XR.....57
see *methylphenidate hcl* 59
APTIOM 50
see *eslicarbazepine acetate*.....51

APTIVUS.....10
AQNEURSA.....81
AQVESME 95
ARALAST NP.....111
aranelle 76
ARANESP ALBUMIN FREE.....94
ARAVA.....100
see *leflunomide* 100
ARAZLO.....114
ARBLI.....31
ARCALYST 101
AREXVY 102
arformoterol tartrate 110
ARICEPT 41
see *donepezil hydrochloride* 41
ARIKAYCE.....6
ARIMIDEX.....17
see *anastrozole* 17
aripiprazole 46
ARISTADA 46
ARISTADA INITIO 46
ARIXTRA 92, 93
see *fondaparinux sodium* 93
armodafinil 67
ARNUITY ELLIPTA.....112
AROMASIN.....17
see *exemestane* 17
ARTHROTEC 50
see *diclofenac w/ misoprostol tab delayed release 50-0.2 mg*.....1
ARTHROTEC 50 TAB.....1
ARTHROTEC 75
see *diclofenac w/ misoprostol tab delayed release 75-0.2 mg*.....1
ARTHROTEC 75 TAB.....1
asenapine maleate.....46
ashlyna.....76
ASMANEX HFA 112
ASMANEX TWISTHALER 120 ME 113
ASMANEX TWISTHALER 14 MET.....112
ASMANEX TWISTHALER 30 MET.....112, 113
ASMANEX TWISTHALER 60 MET.....113
ASPARLAS 18
aspirin-dipyridamole cap er 12hr 25-200 mg 96
ASTAGRAF XL 101
ATACAND.....31
see *candesartan cilexetil* 31, 32
ATACAND HCT
see *candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg*.....29
see *candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg*.....29
see *candesartan cilexetil-hydrochlorothiazide tab 32-25 mg*.....29
ATACAND HCT TAB 16-12.5 29
ATACAND HCT TAB 32-12.5 29
ATACAND HCT TAB 32-25MG.....29
atazanavir sulfate.....10
ATELVIA 74
see *risedronate sodium* 75
atenolol 35
atenolol & chlorthalidone tab 100-25 mg 34
atenolol & chlorthalidone tab 50-25 mg 34
ATGAM 101
ATIVAN 40
see *lorazepam*.....41
atomoxetine hcl.....57
ATORVALIQ 33
atorvastatin calcium 33
atovaquone 6
atovaquone-proguanil hcl tab 250-100 mg 10
atovaquone-proguanil hcl tab 62.5-25 mg 10
ATRALIN.....114
see *tretinoin*.....115
atropine sulfate 87
ATROPINE SULFATE87, 107
see *atropine sulfate* 87
atropine sulfate (ophthalmic).....107
ATROVENT HFA 109
ATTRUBY 37
AUBAGIO.....64
see *teriflunomide* 66
aubra eq.....76
AUGMENTIN ES-600
see *amoxicillin & k clavulanate for susp 600-42.9 mg/5ml*.....15
AUGMENTIN SUS 125/5ML 15
AUGMENTIN SUS ES-600 15
AUGMENTIN TAB 500MG 15
AUGTYRO 20
aurovela 1/20 76
aurovela 24 fe 76
aurovela fe 1/20 76
aurovela fe 1.5/30 76
AUSTEDO.....63
AUSTEDO XR.....63
AUSTEDO XR TAB TITR KIT.....63
AUVELITY TAB 45-105MG 42
AVALIDE
see *irbesartan-hydrochlorothiazide tab 150-12.5 mg*.....30
see *irbesartan-hydrochlorothiazide tab 300-12.5 mg*.....30
AVALIDE TAB 150-12.5..29
AVALIDE TAB 300-12.5..29
AVAPRO 31
see *irbesartan*.....32
AVASTIN.....20

AVEED.....69
AVERI TAB.....76
AVGEMSI.....17
aviane.....76
AVMAPKI PAK FAKZYNJA.....20
AVODART.....91
see *dutasteride*.....91
AVONEX.....64
AVONEX PEN.....64
AVSOLA.....97
AVTOZMA.....97
AVYCAZ INJ 2-0.5GM....13
AXTLE.....17
ayuna.....76
AYVAKIT.....20
azacitidine.....17
AZACTAM.....6
see *aztreonam*.....6
azasan.....101
AZASITE.....105
azathioprine.....101
azelaic acid.....120
azelastine hcl.....109
azelastine hcl (ophth)....107
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act.....109
AZELEX.....114
AZILECT.....45
see *rasagiline mesylate*.....46
azithromycin.....14
AZMIRO.....69
AZOPT.....107
see *brinzolamide*.....107
AZOR TAB 10-20MG.....29
AZOR TAB 10-40MG.....29
AZOR TAB 5-20MG.....29
AZOR TAB 5-40MG.....29
AZSTARYS CAP 26.1-5.2.....57
AZSTARYS CAP 39.2-7.8.....57
AZSTARYS CAP 52.3-10.....57
aztreonam.....6
AZULFIDINE.....87
see *sulfasalazine*.....88
AZULFIDINE EN-TABS..87
see *sulfasalazine*.....88
azurette.....76
B
bacitracin (ophthalmic)..105
bacitracin-polymyxin b ophth oint.....105
bacitracin-polymyxin-neomycin-hc ophth oint 1%.....105
baclofen.....66
BACTRIM
see *sulfamethoxazole-trimethoprim tab 400-80 mg*.....8
BACTRIM DS
see *sulfamethoxazole-trimethoprim tab 800-160 mg*.....8
BACTRIM DS TAB 800-160.....6
BACTRIM TAB 400-80MG6
BAFIERTAM.....64
BALCOLTRA
see *joyeaux*.....77
see *levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)*.77
see *minzoya*.....78
BALCOLTRA TAB 0.1-20.....76
balsalazide disodium.....87
BALVERSA.....20
balziva.....76
BANZEL.....50
see *rufinamide*.....54
BAQSIMI ONE PACK.....81
BAQSIMI TWO PACK.....81
BARACLUDE.....12
see *entecavir*.....12
BASAGLAR KWIKPEN...73
BASAGLAR TEMPO PEN.....73
BAVENCIO.....20
BAXDELA.....14
BCG VACCINE.....102
BEIZRAY.....19
BEIZRAY INJ 160/8ML...19
BEIZRAY INJ 80MG/4ML.....19
BELBUCA.....2
BELEODAQ.....20
BELSOMRA.....60
benazepril & hydrochlorothiazide tab 10-12.5 mg.....27
benazepril & hydrochlorothiazide tab 20-12.5 mg.....27
benazepril & hydrochlorothiazide tab 20-25 mg.....27
benazepril & hydrochlorothiazide tab 5-6.25mg.....27
benazepril hcl.....28
bendamustine hcl.....16
BENDAMUSTINE HYDROCHLORID.....16
BENDEKA.....16
BENICAR.....31
see *olmesartan medoxomil*.....32
BENICAR HCT
see *olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg*.....30
see *olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg*.....30
see *olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg*.....30
BENICAR HCT TAB 20-12.5.....29
BENICAR HCT TAB 40-12.5.....29
BENICAR HCT TAB 40-25MG.....29
BENLYSTA.....102
BENTYL
see *dicyclomine hcl*.....87

BENZAMYCIN
see *benzoyl peroxide-erythromycin gel 5-3%* 114
BENZAMYCIN GEL 5-3% 114
benzoyl peroxide-erythromycin gel 5-3% 114
benztropine mesylate.....45
BEOVU 107
bepotastine besilate.....107
BEPREVE.....107
see *bepotastine besilate* 107
BERINERT.....95
besifloxacin hcl.....105
BESIVANCE 105
BESPONSA 20
BESREMI.....18
betaine powder for oral solution.....81
betamethasone dipropionate (topical).117
betamethasone dipropionate augmented 117
betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml 80
betamethasone valerate 118
BETAPACE.....32
see *sotalol hcl*.....32
BETAPACE AF 32
see *sotalol hcl (afib/afl)*32
BETASERON.....64
betaxolol hcl.....35
betaxolol hcl (ophth).....107
bethanechol chloride.....91
BETHKIS.....6
see *tobramycin*.....8
BETIMOL 107
see *timolol hemihydrate (ophth)* 107
BEVESPI AER 9-4.8MCG 108
bexarotene.....19
bexarotene (topical) 120
BEXSERO.....102
BEYAZ
see *drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg* 76
BEYAZ TAB 76
BIAXIN XL
see *clarithromycin* 14
bicalutamide.....17
BICILLIN C-R INJ 1200000 15
BICILLIN C-R INJ 900/300 15
BICILLIN L-A.....15
BIDIL
see *isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg*.....38
BIDIL TAB 37
BIJUVA CAP 0.5-100.....79
BIJUVA CAP 1-100MG ...79
BIKTARVY TAB 30-120-15 MG.....11
BIKTARVY TAB 50-200-25 MG.....11
BILDYOS 74
bimatoprost 107
BIMZELX.....97
BINOSTO.....74
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg 89
bisoprolol & hydrochlorothiazide tab 10-6.25 mg 34
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg 34
bisoprolol & hydrochlorothiazide tab 5-6.25 mg 34
bisoprolol fumarate 35
BIVIGAM 100
BKEMV 95
BLENREP 20
bleomycin sulfate 19
blisovi 24 fe 76
blisovi fe 1/20 76
blisovi fe 1.5/30 76
BLUJEPA 6
BONJESTA TAB 20-20MG 85
BONSITY 74
BOOSTRIX INJ 102
bortezomib 20
BORTEZOMIB 20
BORUZU.....20
bosentan 39
BOSULIF.....20
BOTOX 66
BRAFTOVI 20
BREKIYA 61
BREO ELLIPTA INH 100-25 113
BREO ELLIPTA INH 200-25 113
BREO ELLIPTA INH 50-25MCG 113
breyna 113
BREZTRI AERO AER SPHERE.....108
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) 108
briellyn.....76
BRILINTA.....96
see *ticagrelor*.....97
brimonidine tartrate.....107
brimonidine tartrate (topical).....120
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% 107
BRINSUPRI 111
brinzolamide.....107
BRIUMVI 64
brivaracetam 50
BRIVIACT 50
see *brivaracetam*.....50
BRIXADI.....68
bromfenac sodium (ophth) 106
bromocriptine mesylate...45

BROMSITE 106
see *bromfenac sodium (ophth)* 106
BRUKINSA.....20, 21
BRYHALI.....118
BRYNOVIN 69
BUCAPSOL 40, 41
budesonide 87
budesonide (inhalation).113
budesonide (intrarectal) ..87
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act.....113
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act.....113
bumetanide 36
BUMEX
see *bumetanide*.....36
BUPHENYL.....81
see *sodium phenylbutyrate* 84
buprenorphine.....3
buprenorphine hcl 68
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv).....68
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv).....68
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv).....68
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv).....68
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv).....68
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv).....68
bupropion hcl 42
bupropion hcl (smoking deterrent).....68
buspirone hcl.....41
butorphanol tartrate.....4
BUTRANS.....3
see *buprenorphine* 3
BYLVAY.....89
BYLVAY (PELLETS).....89
BYNFEZIA PEN 81
BYOOVIZ.....107
BYSTOLIC 35
see *nebivolol hcl*.....35
C
cabergoline 81
CABLIVI 95
CABOMETYX 21
CABTREO GEL 114
CADUET
see *amlodipine besylate-atorvastatin calcium tab 10-10 mg*.....37
see *amlodipine besylate-atorvastatin calcium tab 10-20 mg*.....37
see *amlodipine besylate-atorvastatin calcium tab 10-40 mg*.....37
see *amlodipine besylate-atorvastatin calcium tab 10-80 mg*.....37
see *amlodipine besylate-atorvastatin calcium tab 5-10 mg*.....37
see *amlodipine besylate-atorvastatin calcium tab 5-20 mg*.....37
see *amlodipine besylate-atorvastatin calcium tab 5-40 mg*.....37
see *amlodipine besylate-atorvastatin calcium tab 5-80 mg*.....37
CADUET TAB 10-10MG .37
CADUET TAB 10-20MG .37
CADUET TAB 10-40MG .37
CADUET TAB 10-80MG .38
CADUET TAB 5-10MG ...37
CADUET TAB 5-20MG ...37
CADUET TAB 5-40MG ...37
CADUET TAB 5-80MG ...37
calcipotriene.....117
CALCIPOTRIENE 117
calcipotriene-betamethasone dipropionate oint 0.005-0.064% 117
calcipotriene-betamethasone dipropionate susp 0.005-0.064% 117
calcitonin (salmon) inj 74
calcitonin (salmon) spray 74
calcitrene.....117
calcitriol.....85
calcitriol (oral).....85
calcitriol (topical) 117
CALQUENCE.....21
CAMBIA 61
see *diclofenac potassium (migraine)*.....61
CAMCEVI.....17
camila.....76
CAMPTOSAR 19
see *irinotecan hcl* 19
camrese 76
camrese lo 76
CAMZYOS 38
CANASA 87
see *mesalamine* 88
CANCIDAS 9
candesartan cilexetil .31, 32
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg 29
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg 29
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg 29
CAPLYTA.....46
CAPRELSA.....21
captopril 28
captopril & hydrochlorothiazide tab 25-15 mg 27
captopril & hydrochlorothiazide tab 25-25 mg 27

captopril & hydrochlorothiazide tab 50-15 mg 27
captopril & hydrochlorothiazide tab 50-25 mg 27
CARAFATE.....89
see *sucralfate* 89
carb/levo orally disintegrating tab 10-100mg 45
carb/levo orally disintegrating tab 25-100mg 45
carb/levo orally disintegrating tab 25-250mg 45
CARBAGLU 81
see *carglumic acid*.....81
carbamazepine 50
CARBATROL.....50
see *carbamazepine*.....50
carbidopa 45
carbidopa & levodopa cap er 23.75-95 mg.....45
carbidopa & levodopa cap er 36.25-145 mg.....45
carbidopa & levodopa cap er 48.75-195 mg.....45
carbidopa & levodopa cap er 61.25-245 mg.....45
carbidopa & levodopa tab 10-100 mg 45
carbidopa & levodopa tab 25-100 mg 45
carbidopa & levodopa tab 25-250 mg 45
carbidopa & levodopa tab er 25-100 mg.....45
carbidopa & levodopa tab er 50-200 mg.....45
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg 45
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg 45
carbidopa-levodopa-entacapone tabs 25-100-200 mg 45
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg 45
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg 45
carbidopa-levodopa-entacapone tabs 50-200-200 mg 45
carbinoxamine maleate.109
carboplatin 16
carbzah 109
CARDAMYST 35
CARDIZEM 35
see *diltiazem hcl*.....36
CARDIZEM CD 35
see *cartia xt* 35
see *diltiazem hcl coated beads*.....36
CARDIZEM LA.....35
see *diltiazem hcl*.....36
see *matzim la* 36
CARDURA 28
see *doxazosin mesylate* 28
CARDURA XL.....91
carglumic acid 81
carisoprodol 66
CARNITOR 81
see *levocarnitine (metabolic modifiers)* 82
CAROSPIR 28
see *spironolactone* 28
carteolol hcl (ophth) 107
cartia xt 35
carvedilol.....35
carvedilol phosphate.....35
CASODEX 17
see *bicalutamide* 17
caspofungin acetate.....9
CASPOFUNGIN ACETATE 9
see *caspofungin acetate* 9
CATAPRES-TTS-1
see *clonidine* 38
CATAPRES-TTS-2
see *clonidine* 38
CATAPRES-TTS-3
see *clonidine* 38
CAYSTON.....6
cefaclor 13
CEFACLOR ER 13
cefadroxil.....13
CEFAZOLIN.....13
CEFAZOLIN/DEX SOL 1GM/50ML-4% 13
CEFAZOLIN/DEX SOL 2GM/50ML-3% 13
CEFAZOLIN/DEX SOL 3GM/150ML-4% 13
CEFAZOLIN/DEX SOL 3GM/50ML-2% 13
CEFAZOLIN INJ 1GM/50ML.....13
cefazolin sodium 13
CEFAZOLIN SOLN 2GM/100ML-4% 13
cefdinir 13
CEFEPIME.....13
CEFEPIME/DEX INJ 1GM 13
CEFEPIME/DEX INJ 2GM 13
cefepime hcl.....13
cefixime.....13
CEFOTAN
see *cefotetan disodium* 13
cefotetan disodium.....13
CEFOXITIN INJ 1GM.....13
CEFOXITIN INJ 2GM.....13
cefoxitin sodium 13
cefpodoxime proxetil.....13
cefprozil.....13
ceftaroline fosamil.....13
ceftazidime.....13
ceftriaxone sodium.....13
cefuroxime axetil.....13
cefuroxime sodium.....14
CELEBREX.....1
see *celecoxib*.....1

celecoxib 1
CELESTONE INJ SOLUSPAN.....80
CELESTONE SOLUSPAN see *betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml* 80
CELEXA.....42
see *citalopram hydrobromide*.....42
CELLCEPT 102
see *mycophenolate mofetil* 102
CELONTIN.....50
see *methsuximide* 53
cephalexin.....14
CEQUA 108
CEQUR SIMPL KIT PATCH 2U (3-DAY).....73
CEQUR SIMPL KIT PATCH 2U (4-DAY).....73
CEQUR SIMPL MIS INSERTER 73
CERDELGA 81
CEREZYME 81
cetirizine hcl 109
CETRAXAL see *ciprofloxacin hcl (otic)*.....108
cevimeline hcl 122
CHANTIX 68
see *varenicline tartrate* 68
CHANTIX CONTINUING MONTH 68
CHANTIX TAB 0.5& 1MG 68
chateal eq 76
CHEMET.....75
chlordiazepoxide hcl 41
chlorhexidine gluconate (mouth-throat).....122
chloroquine phosphate....10
chlorpromazine hcl.....47
chlorthalidone.....36
CHOLBAM 89
cholestyramine.....33
cholestyramine light 33
choline fenofibrate.....32
CHORIONIC GONADOTROPIN.....81
CIALIS.....91
see *tadalafil* 91
CIBINQO.....97
ciclopirox 116
ciclopirox olamine 116
cidofovir.....12
cilostazol 95
CILOXAN 106
CIMDUO TAB 300-300 ...11
CIMERLI 108
cimetidine.....87
cimetidine hcl 87
CIMZIA.....97
CIMZIA STARTER KIT ...97
cinacalcet hcl 81
CINQAIR 111
CINRYZE 95
CINVANTI 85
CIPRO.....14
see *ciprofloxacin hcl*....14
ciprofloxacin 200 mg/100ml in d5w.....14
ciprofloxacin 400 mg/200ml in d5w.....14
ciprofloxacin-dexamethasone otic susp 0.3-0.1%.....108
ciprofloxacin hcl 14
ciprofloxacin hcl (ophth) 106
ciprofloxacin hcl (otic) ...108
ciprofloxacin-hydrocortisone otic susp 0.2-1%.....108
CIPRO HC see *ciprofloxacin-hydrocortisone otic susp 0.2-1%*.....108
CIPRO HC SUS 0.2-1%OT 108
cisplatin 16
CISPLATIN see *cisplatin*.....16
citalopram hydrobromide 42
CITALOPRAM HYDROBROMIDE.....42
cladribine (10 tabs) 65
cladribine (4 tabs) 64
cladribine (5 tabs) 64
cladribine (6 tabs) 64
cladribine (7 tabs) 65
cladribine (8 tabs) 65
cladribine (9 tabs) 65
claravis.....114
CLARINEX.....109
see *desloratadine*.....109
CLARINEX-D TAB 2.5-120 109
clarithromycin.....14
clemastine fumarate.....109
CLEMSZA.....109
CLENPIQ SOL 10 MG-3.5 GM-12 GM/175ML.....88
CLEOCIN 6, 92
see *clindamycin hcl* 6
see *clindamycin phosphate vaginal*....92
CLEOCIN PEDIATRIC GRANULE 6
see *clindamycin palmitate hydrochloride* 6
CLEOCIN PHOSPHATE...6
see *clindamycin phosphate* 6
CLEOCIN-T.....114
see *clindamycin phosphate (topical)* 115
CLIMARA 79
see *estradiol* 79
CLIMARA PRO DIS WEEKLY 79
clindacin 114
clindacin etz pledgets....114
clindacin-p.....114
CLINDAGEL.....114
see *clindamycin phosphate (topical)* 115
clindamycin hcl.....6
clindamycin palmitate hydrochloride.....6
clindamycin phosphate 6
clindamycin phosphate (topical).....114, 115

clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% 115
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% 115
clindamycin phosphate-benzoyl peroxide gel 1-5% 115
clindamycin phosphate in d5w iv soln 300 mg/50ml 6
clindamycin phosphate in d5w iv soln 600 mg/50ml 6
clindamycin phosphate in d5w iv soln 900 mg/50ml 6
clindamycin phosphate-tretinoin gel 1.2-0.025% 115
clindamycin phosphate vaginal 92
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5% 114
CLINDESSE 92
CLINDMYC/NAC INJ 300/50ML 6
CLINDMYC/NAC INJ 600/50ML 6
CLINDMYC/NAC INJ 900/50ML 6
CLINIMIX E INJ 2.75/D5W 105
CLINIMIX E INJ 4.25/D10 105
CLINIMIX E INJ 4.25/D5W 105
CLINIMIX E INJ 5%/D15W 105
CLINIMIX E INJ 5%/D20W 105
CLINIMIX E INJ 8/10 105
CLINIMIX E INJ 8/14 105
CLINIMIX INJ 4.25/D10 105
CLINIMIX INJ 4.25/D5W 105
CLINIMIX INJ 5%/D15W 105
CLINIMIX INJ 5%/D20W 105
CLINIMIX INJ 6/5 105
CLINIMIX INJ 8/10 105
CLINIMIX INJ 8/14 105
clinisol sf 15% 105
CLINOLIPID EMU 20% .105
clobazam 50
clobetasol propionate 118
clobetasol propionate e .118
clobetasol propionate emulsion 118
CLOBEX 118
see *clobetasol propionate* 118
see *clodan* 118
clocortolone pivalate 118
clodan 118
clomipramine hcl 42
clonazepam 50
clonidine 38
clonidine hcl 38
clonidine hcl (analgesia) ...1
clopidogrel bisulfate 96
clorazepate dipotassium .50
clotrimazole 122
clotrimazole (topical) 116
clotrimazole w/ betamethasone cream 1-0.05% 116
clozapine 47
CLOZARIL 47
see *clozapine* 47
COARTEM TAB 20-120MG 10
COBENFY CAP 100-20MG 47
COBENFY CAP 125-30MG 47
COBENFY CAP 50-20MG 47
COBENFY STRT CAP PACK 47
codeine sulfate 4
CODEINE SULFATE 4
colchicine 1
colchicine w/ probenecid tab 0.5-500 mg 1
colesevelam hcl 33
COLESTID 33
see *colestipol hcl* 34
colestipol hcl 34
colistimethate sodium 6
COLUMVI 21
COLY-MYCIN M 6
see *colistimethate sodium* 6
COMBIGAN
see *brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%* 107
COMBIGAN SOL 0.2/0.5% 107
COMBIPATCH DIS 79
COMBIVENT AER 20-100 108
COMBOGESIC INJ 300-1000 1
COMETRIQ (60MG DOSE) 21
COMETRIQ KIT 100MG .21
COMETRIQ KIT 140MG .21
COMPLERA
see *emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg* ..11
COMPLERA TAB 11
compro 85
CONCERTA 57
see *methylphenidate hcl* 59
constulose 88
CONZIP 3
COPAXONE 65
see *glatiramer acetate* .65
see *glatopa* 65
COPIKTRA 21
CORDRAN 118
COREG 35
see *carvedilol* 35
COREG CR 35
see *carvedilol phosphate* 35
CORLANOR 38

see *ivabradine hcl* 38
corphena 109
CORTEF 80
see *hydrocortisone* 80
CORTENEMA 87
see *hydrocortisone (intrarectal)* 87
CORTIFOAM 120
CORTISONE ACETATE .80
CORTISPORIN SUS -TC OTIC 108
CORTROPHIN 81
COSENTYX 97
COSENTYX SENSOREADY PEN ...97
COSENTYX UNOREADY 97
COSOPT
see *dorzolamide hcl-timolol maleate ophth soln 2-0.5%* 107
COSOPT PF
see *dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%* ..107
COSOPT PF SOL 2%-0.5% 107
COSOPT SOL 2-0.5%OP 107
COTELLIC 21
COTEMPLA XR-ODT 57
COZAAR 32
see *losartan potassium* 32
CRENESSITY 82
CREON CAP 12000UNT 89
CREON CAP 24000UNT 89
CREON CAP 3000UNIT .89
CREON CAP 36000UNT 89
CREON CAP 6000UNIT .89
CRESEMBA 9
CRESTOR 33
see *rosuvastatin calcium* 33
CREXONT CAP 35-140MG 45
CREXONT CAP 52.5-210 45
CREXONT CAP 70-280MG 45
CREXONT CAP 87.5-350 45
CRINONE 84
cromolyn sodium 111
cromolyn sodium (mastocytosis) 89
cromolyn sodium (ophth) 107
crotan 122
cryselle 76
CRYSVITA 82
CUTAQUIG 100
CUVITRU 100
CUVPOSA 87
see *glycopyrrolate (oral)* 87
CUVRIOR 75
cyclobenzaprine hcl 66
cyclophosphamide 16
CYCLOPHOSPHAMIDE .16
CYCLOPHOSPHAMIDE MONOHYDR 16
cycloserine 12
cyclosporine 102
cyclosporine modified (for microemulsion) 102
CYKLOKAPRON
see *tranexamic acid* 96
cyproheptadine hcl 109
CYRAMZA 21
cyred eq 76
CYSTADANE
see *betaine powder for oral solution* 81
CYSTADANE POW 82
CYSTADROPS 108
CYSTAGON 82
CYSTARAN 108
cytarabine 17
CYTOGAM 100
CYTOMEL 84
see *liomny* 85
see *liothyronine sodium* 85
CYTOTEC 89
see *misoprostol* 89

D

D10W/NACL INJ 0.2% ..103
D10W/NACL INJ 0.45% 103
D2.5W/NACL INJ 0.45% 103
D5W/LYTES INJ #48 103
D5W/NACL INJ 0.2% 103
D5W/NACL INJ 0.3% 103
D5W/NACL INJ 0.45% ..103
D5W/NACL INJ 0.9% 103
dabigatran etexilate mesylate 93
dacarbazine 19
dalbavancin hcl 7
dalfampridine 65
DALIRESP 111
see *roflumilast* 112
DALVANCE 7
see *dalbavancin hcl* 7
danazol 69
DANTRIUM 66
see *dantrolene sodium* 66
dantrolene sodium 66
DANZITEN 21
dapagliflozin propanediol 69
dapsone 7
dapsone (topical) 115
DAPTACEL INJ 102
DAPTOMY/NACL INJ 350/50ML 7
DAPTOMY/NACL INJ 500/50ML 7
daptomycin 7
DAPTOMYCIN 7
see *daptomycin* 7
DARAPRIM 7
see *pyrimethamine* 8
darifenacin hydrobromide 92
darunavir 10
DARZALEX 21
DARZALEX INJ FASPRO 21
dasatinib 21
dasetta 1/35 76
dasetta 7/7/7 76
DATROWAY 21
DAURISMO 21

DAWNZERA 95
DAXXIFY.....66
DAYBUE 63
DAYBUE STIX 63
daysee 76
DAYTRANA 57
see *methylphenidate* ...58
DAYVIGO.....60
DDAVP.....82
see *desmopressin acetate* 82
deblitane 76
decitabine.....17
deferasirox 75
deferiprone.....75
deferoxamine mesylate...75
DELESTROGEN.....79
see *estradiol valerate* ..79
DELSTRIGO TAB 11
demeclocycline hcl.....15
DEMSER.....38
DENAVIR.....120
see *penciclovir*.....121
DENGVAXIA SUS.....102
DEPAKOTE 50
see *divalproex sodium*.51
DEPAKOTE ER 50
see *divalproex sodium*.51
DEPAKOTE SPRINKLES 50
see *divalproex sodium*.51
DEPEN TITRATABS.....75
see *penicillamine*.....76
DEPO-ESTRADIOL 79
DEPO-MEDROL 80
see *methylprednisolone acetate* 80
DEPO-PROVERA CONTRACEPTIV 76
see *medroxyprogesterone acetate (contraceptive)* 77
DEPO-SUBQ PROVERA 104 76
depo-testosterone 69
DERMA-SMOOTHE/FS BODY 118
see *fluocinolone acetonide* 119
DERMA-SMOOTHE/FS SCALP.....118
see *fluocinolone acetonide* 119
DERMOTIC.....108
see *flac* 108
see *fluocinolone acetonide (otic)* 108
DESCOVY TAB 120-15MG 11
DESCOVY TAB 200/25MG 11
DESFERAL 75
see *deferoxamine mesylate* 75
desipramine hcl.....42
desloratadine 109
desmopressin acetate.....82
desmopressin acetate spray.....82
desmopressin acetate spray refrigerated 82
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) 76
desonide 118
desoximetasone.....118
DESVENLAFAXINE ER..42
*desvenlafaxine succinate*42
dexamethasone 80
DEXAMETHASONE INTENSOL 80
dexamethasone sodium phosphate.....80
dexamethasone sodium phosphate (ophth) 106
DEXEDRINE 57
see *dextroamphetamine sulfate* 58
DEXILANT 90
see *dexlansoprazole* ...90
dexlansoprazole.....90
dexmethylphenidate hcl ..57
dexrazoxane hcl.....19
dextroamphetamine sulfate 58
dextrose 105
DEXTROSE/SODIUM CHLORIDE
see *dextrose 5% w/ sodium chloride 0.225%*.....103
DEXTROSE 10% 105
see *dextrose*.....105
DEXTROSE 2.5%/SODIUM CHLO
see *dextrose 2.5% w/ sodium chloride 0.45%* 103
dextrose 2.5% w/ sodium chloride 0.45%.....103
DEXTROSE 5%
see *dextrose*.....105
DEXTROSE 5%/SODIUM CHLORI
see *dextrose 5% w/ sodium chloride 0.3%* 103
see *dextrose 5% w/ sodium chloride 0.45%* 103
see *dextrose 5% w/ sodium chloride 0.9%* 103
dextrose 5% in lactated ringers 103
dextrose 5% w/ sodium chloride 0.225%.....103
dextrose 5% w/ sodium chloride 0.3%.....103
dextrose 5% w/ sodium chloride 0.45%.....103
dextrose 5% w/ sodium chloride 0.9%.....103
DEXTROSE 70% 105
DEXYCU 106
DHIVY TAB 25-100MG...45
DIACOMIT 50
diazepam 50, 51
diazepam (anticonvulsant) 51
diazepam inj.....51
diazepam intensol.....51
diazoxide.....81

dichlorphenamide.....36
DICLEGIS
see *doxylamine-pyridoxine tab delayed release 10-10 mg*.....85
DICLEGIS TAB 10-10MG 85
diclofenac potassium 1
diclofenac potassium (migraine) 61
diclofenac sodium 1
diclofenac sodium (actinic keratoses).....120
diclofenac sodium (ophth) 106
diclofenac sodium (topical) 120
diclofenac w/ misoprostol tab delayed release 50-0.2 mg 1
diclofenac w/ misoprostol tab delayed release 75-0.2 mg 1
dicloxacillin sodium 15
dicyclomine hcl.....87
DIFFERIN 115
see *adapalene*.....114
DIFFERIN PUMP 115
DIFICID 14
see *fidaxomicin*.....14
diflorasone diacetate.....118
DIFLUCAN 9
see *fluconazole* 9
diflunisal.....1
difluprednate 106
digoxin.....38
dihydroergotamine mesylate 61
DILANTIN.....51
see *phenytoin sodium extended*.....54
DILANTIN-125 51
see *phenytoin*.....53
DILANTIN INFATABS.....51
see *phenytoin*.....53
DILAUDID 4
see *hydromorphone hcl*4, 5
diltiazem hcl 35, 36
diltiazem hcl coated beads 36
diltiazem hcl extended release beads.....36
dilt-xr 35
DIMENHYDRINATE.....85
dimethyl fumarate 65
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg 65
DIOVAN 32
see *valsartan*.....32
DIOVAN HCT
see *valsartan-hydrochlorothiazide tab 160-12.5 mg*.....31
see *valsartan-hydrochlorothiazide tab 160-25 mg*.....31
see *valsartan-hydrochlorothiazide tab 320-12.5 mg*.....31
see *valsartan-hydrochlorothiazide tab 320-25 mg*.....31
see *valsartan-hydrochlorothiazide tab 80-12.5 mg*.....31
DIOVAN HCT TAB 160-12.5 29
DIOVAN HCT TAB 160-25MG.....29
DIOVAN HCT TAB 320-12.5 29
DIOVAN HCT TAB 320-25MG.....29
DIOVAN HCT TAB 80-12.5 29
DIPENTUM 87
diphenhydramine hcl.....109
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml....89
diphenoxylate w/ atropine tab 2.5-0.025 mg 89
DIPROLENE 118
see *betamethasone dipropionate augmented*.....117
dipyridamole.....96
disopyramide phosphate.32
disulfiram.....68
DIURIL 36
divalproex sodium.....51
DIVIGEL.....79
see *estradiol*.....79
docetaxel.....19, 20
DOCETAXEL 19, 20
see *docetaxel* 19, 20
DOCIVYX.....20
dofetilide.....32
DOJOLVI.....82
dolishale.....76
DOLOBID.....1
donepezil hydrochloride..41
DOPTELET 95
DOPTELET SPRINKLE ..95
DORYX MPC 15
dorzolamide hcl.....107
dorzolamide hcl-timolol maleate ophth soln 2-0.5% 107
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% 107
dotti 79
DOVATO TAB 50-300MG 11
doxazosin mesylate 28
doxepin hcl.....42
*doxepin hcl (antipruritic)*120
doxepin hcl (sleep).....60
doxercalciferol.....85
DOXIL 19
see *doxorubicin hcl liposomal*.....19
doxorubicin hcl.....19
*doxorubicin hcl liposomal*19
DOXORUBICIN HYDROCHLORIDE.....19
see *doxorubicin hcl*.....19
doxy 100 15
doxycycline (monohydrate) 16

doxycycline (rosacea) ...120
doxycycline hyclate 16
doxylamine-pyridoxine tab delayed release 10-10 mg 85
DRIZALMA SPRINKLE ...42
dronabinol 86
*drospirenone-ethinyl estradiol tab 3-0.02 mg*76
*drospirenone-ethinyl estradiol tab 3-0.03 mg*76
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg 76
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg 76
DROXIA 95
droxidopa 38
DUAKLIR AER 400/12 ..108
DUETACT
see *pioglitazone hcl-glimepiride tab 30-2 mg* 71
see *pioglitazone hcl-glimepiride tab 30-4 mg* 71
DUETACT TAB 30-2MG .69
DUETACT TAB 30-4MG .69
DULERA AER 100-5MCG 113
DULERA AER 200-5MCG 113
DULERA AER 50-5MCG 113
duloxetine hcl 43
DUOBRII LOT 118
DUOPA SUS 4.63-20 45
DUPIXENT 97
DURACLON 1
see *clonidine hcl (analgesia)* 1
DUREZOL 106
see *difluprednate* 106
dutasteride 91
dutasteride-tamsulosin hcl cap 0.5-0.4 mg 91
DUVYZAT 63
DW5-NACL INJ 0.225% 103
DYANAVEL XR 58
DYCLOPRO 120
DYMISTA
see *azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act* 109
DYMISTA SPR 137-50 .109
DYRENIUM 36
see *triamterene* 37
DYSPORT 66
E
e.e.s. 400 14
E.E.S. GRANULES
see *erythromycin ethylsuccinate* 14
EBGLYSS 97
econazole nitrate 116
ECONAZOLE NITRATE 116
edaravone 63
EDARBI 32
EDARBYCLOR TAB 40-12.5 29
EDARBYCLOR TAB 40-25MG 29
EDECRIN 36
see *ethacrynic acid* 36
EDLUAR 60
EDURANT 10
see *rilpivirine hcl* 11
EDURANT PED 10
efavirenz 10
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg 11
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg 11
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg 11
EFFEXOR XR 43
see *venlafaxine hcl* 44
EFFIENT 97
see *prasugrel hcl* 97
EGRIFTA SV 82
EGRIFTA WR 82
EKTERLY 95
ELAHERE 21
ELAPRASE 82
ELELYSO 82
ELEPSIA XR 51
ELESTRIN 79
eletriptan hydrobromide ..61
ELFABRIO 82
ELIGARD 17
ELIMITE 122
elinest 76
ELIQUIS 93
ELIQUIS (1.5MG PACK) 3 X 93
ELIQUIS (2MG PACK) 4 X 93
ELIQUIS STARTER PACK 93
ELITEK 19
elixophyllin 111
ELLENCE 19
ELMIRON 91
eltrombopag olamine 95
eluryng 76
ELYXYB 61
EMBLAVEO INJ 2GM 7
EMEND 86
see *fosaprepitant dimeglumine* 86
EMEND BIPACK 86
see *aprepitant* 85
EMEND TRIPAC CAP 125 & 80 86
EMGALITY 61, 62
EMPAVELI 95
EMPLICITI 21
EMRELIS 21
EMROSI 120
EMSAM 43
emtricitabine 10
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg 11
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg 11

emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg 11
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg 11
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg 11
EMTRIVA 10
see *emtricitabine* 10
EMVERM 7
emzahh 76
enalapril maleate 28
enalapril maleate & hydrochlorothiazide tab 10-25 mg 27
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg 27
ENBREL 97
ENBREL MINI 98
ENBREL SURECLICK 98
ENBUMYST 36
ENDARI 95
see *l-glutamine (sickle cell)* 96
endocet tab 10-325mg 4
endocet tab 2.5-325mg 4
endocet tab 5-325mg 4
endocet tab 7.5-325mg 4
ENGERIX-B 102
ENHERTU 21
enilloring 76
ENJAYMO 95
enoxaparin sodium 93
ENSACOVE 21
enskyce 76
ENSPRYNG 63
ENSTILAR AER 117
entacapone 45
entecavir 12
ENTRESTO
see *sacubitril-valsartan tab 24-26 mg* 31
see *sacubitril-valsartan tab 49-51 mg* 31
see *sacubitril-valsartan tab 97-103 mg* 31
ENTRESTO CAP 15-16MG 30
ENTRESTO CAP 6-6MG 30
ENTRESTO TAB 24-26MG 30
ENTRESTO TAB 49-51MG 30
ENTRESTO TAB 97-103MG 30
enulose 88
ENVARSUS XR 102
EOHILIA 89
EPANED 28
see *enalapril maleate* ..28
EPCLUSA PAK 150-37.5 12
EPCLUSA PAK 200-50MG 12
EPCLUSA TAB 200-50MG 12
EPCLUSA TAB 400-100 .12
EPIDIOLEX 51
EPIDUO
see *adapalene-benzoyl peroxide gel 0.1-2.5%* 114
EPIDUO FORTE
see *adapalene-benzoyl peroxide gel 0.3-2.5%* 114
EPIDUO FORTE GEL 0.3-2.5% 115
EPIDUO GEL 0.1-2.5% .115
EPIFOAM AER 1% 118
epinastine hcl (ophth) 107
epinephrine 38
epinephrine (anaphylaxis) 111
EPIPEN 2-PAK 111
see *epinephrine (anaphylaxis)* 111
EPIPEN-JR 2-PAK 111
see *epinephrine (anaphylaxis)* 111
EPIVIR 10
see *lamivudine* 10
EPKINLY 21
eplerenone 28
EPOGEN 94
epoprostenol sodium 39
EPRONTIA 51
see *topiramate* 55
EPSOLAY 120
EPYSQLI 95
EQUETRO 63
ERAXIS 9
ERBITUX 21
ERGOMAR 62
ergotamine w/ caffeine tab 1-100 mg 62
eribulin mesylate 20
ERIVEDGE 21
ERLEADA 17
erlotinib hcl 21
ERMEZA 84
errin 76
ERTACZO 116
ertapenem sodium 7
ery 115
ERYPED 400
see *erythromycin ethylsuccinate* 14
ERYTHROCIN LACTOBIONATE 14
see *erythromycin lactobionate* 14
erythromycin (acne aid) 115
erythromycin (ophth) 106
erythromycin base 14
erythromycin ethylsuccinate 14
erythromycin lactobionate 14
ERZOFRI 47
ESBRIET 111
see *pirfenidone* ..111, 112
escitalopram oxalate 43
ESCITALOPRAM OXALATE 43
eslicarbazepine acetate ..51
esomeprazole magnesium 90
esomeprazole sodium 90
estarylla 76
estazolam 60

ESTRACE 79
see *estradiol vaginal* 79
estradiol 79
estradiol & norethindrone acetate tab 0.5-0.1 mg 79
estradiol & norethindrone acetate tab 1-0.5 mg ...79
estradiol vaginal 79
estradiol valerate 79
ESTRING 79
ESTROGEL
see *estradiol* 79
estrogens, conjugated 79
eszopiclone 60
ethacrynic acid 36
ethambutol hcl 12
ethosuximide 51
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg 76
etodolac 1
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr 76
ETOPOPHOS 20
etoposide 20
etravirine 10
EUCRISA 120
EULEXIN 17
EVAMIST 79
EVENITY 74
everolimus 21
everolimus (immunosuppressant) 102
EVISTA 82
see *raloxifene hcl* 83
EVKEEZA 34
EVOTAZ TAB 300-150 ...11
EVOXAC 122
see *cevimeline hcl* 122
EVRYSDI 63
EXDENSUR 111
EXELDERM 116
EXELON 41
see *rivastigmine* 42
exemestane 17
exenatide 69
EXFORGE
see *amlodipine besylate-valsartan tab 10-160 mg* 29
see *amlodipine besylate-valsartan tab 10-320 mg* 29
see *amlodipine besylate-valsartan tab 5-160 mg* 29
see *amlodipine besylate-valsartan tab 5-320 mg* 29
EXFORGE HCT
see *amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg* 29
see *amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg* 29
see *amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg* 29
see *amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg* 29
see *amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg* 29
EXFORGE HCT TAB 10-160-12.5MG 30
EXFORGE HCT TAB 10-160-25MG 30
EXFORGE HCT TAB 10-320-25MG 30
EXFORGE HCT TAB 5-160-12.5MG 30
EXFORGE HCT TAB 5-160-25MG 30
EXFORGE TAB 10-160MG 30
EXFORGE TAB 10-320MG 30
EXFORGE TAB 5-160MG 30
EXFORGE TAB 5-320MG 30
EXJADE 75
see *deferasirox* 75
EXXUA 43
EXXUA TITRATION PACK 43
EYLEA 108
EYLEA HD 108
EYSUVIS 108
EZALLOR SPRINKLE 33
ezetimibe 34
ezetimibe-simvastatin tab 10-10 mg 34
ezetimibe-simvastatin tab 10-20 mg 34
ezetimibe-simvastatin tab 10-40 mg 34
ezetimibe-simvastatin tab 10-80 mg 34
F
FABHALTA 95
FABRAZYME 82
falmina 76
famciclovir 12
famotidine 87
FAMOTIDINE 87
famotidine in nacl 0.9% iv soln 20 mg/50ml 87
FANAPT 47
FANAPT PAK PACK A ...47
FANAPT PAK PACK B ...47
FANAPT PAK PACK C ...47
FARESTON 17
see *toremifene citrate* ..18
FARXIGA 69
see *dapagliflozin propanediol* 69
FASENRA 111
FASENRA PEN 111
FASLODEX 18
see *fulvestrant* 18
febuxostat 1
feirza 1/20 76
feirza 1.5/30 76
felbamate 51

FELBATOL.....51
see *felbamate*.....51
felodipine.....36
FEMARA.....18
see *letrozole*.....18
FEMLYV TAB 1/0.02MG.77
FEMRING.....79
fenofibrate.....32, 33
fenofibrate micronized.....33
fenofibric acid.....33
fenoprofen calcium.....1
FENOPRON.....2
FENSOLVI.....82
fentanyl.....3
FERRIPROX.....75
see *deferiprone*.....75
FERRIPROX TWICE-A-DAY.....75
fesoterodine fumarate.....92
FETROJA.....14
FETZIMA.....43
FETZIMA CAP TITRATIO.....43
fexmid.....67
FIASP.....73
FIASP FLEXTOUCH.....73
FIASP PENFILL.....73
FIASP PUMPCART.....73
fidaxomicin.....14
FILSPARI.....91
FILSUVEZ.....122
FINACEA.....120
see *azelaic acid*.....120
finasteride.....91
fingolimod hcl.....65
FINTEPLA.....51
finzala.....77
FIRAZYR.....95
see *icatibant acetate*...96
see *sajazir*.....96
FIRDAPSE.....63
FIRMAGON.....18
FIRVANQ.....7
see *vancomycin hcl*.....9
flac.....108
FLAREX.....106
FLEBOGAMMA DIF.....100
flecainide acetate.....32
FLEQSUVY.....67
see *baclofen*.....66
FLOLIPID.....33
fluconazole.....9
fluconazole in nacl 0.9% inj 200 mg/100ml.....9
fluconazole in nacl 0.9% inj 400 mg/200ml.....9
flucytosine.....9
fludarabine phosphate....17
fludrocortisone acetate....80
flunisolide (nasal).....112
*fluocinolone acetonide*118, 119
fluocinolone acetonide (otic).....108
fluocinonide.....119
fluocinonide emulsified base.....119
*fluorometholone (ophth)*106
fluorouracil.....17
*fluorouracil (topical)*120, 121
fluoxetine hcl.....43
fluoxetine hcl (pmdd).....43
fluphenazine decanoate..47
fluphenazine hcl.....47
flurandrenolide.....119
flurbiprofen.....2
flurbiprofen sodium.....106
fluticasone propionate...119
fluticasone propionate (inhalation).....113
fluticasone propionate (nasal).....112
fluticasone propionate hfa.....113
fluticasone-salmeterol aer powder ba 100-50 mcg/act.....113
fluticasone-salmeterol aer powder ba 250-50 mcg/act.....114
fluticasone-salmeterol aer powder ba 500-50 mcg/act.....114
fluvastatin sodium.....33
fluvoxamine maleate.....41
FML FORTE.....106
FML LIQUIFILM.....106
see *fluorometholone (ophth)*.....106
FOCALIN.....58
see *dexmethylphenidate hcl*.....57
FOCALIN XR.....58
see *dexmethylphenidate hcl*.....57
FOCINVEZ.....86
FOLOTYN.....17
see *pralatrexate*.....17
fondaparinux sodium.....93
FORFIVO XL.....43
formoterol fumarate.....110
FORTEO.....75
see *teriparatide*.....75
FOSAMAX.....75
see *alendronate sodium*.....74
FOSAMAX + D TAB 70-2800.....75
FOSAMAX + D TAB 70-5600.....75
fosamprenavir calcium....10
fosaprepitant dimeglumine.....86
foscarnet sodium.....12
FOSCAVIR
see *foscarnet sodium*..12
fosfomycin tromethamine..7
fosinopril sodium.....28
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg.....27
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg.....27
FOTIVDA.....21
FRAGMIN.....93
FRINDOVYX.....16
frovatriptan succinate.....62
FRUZAQLA.....21
FULPHILA.....94
fulvestrant.....18
fulvicin p/g 165.....9
FUROSCIX.....36

furosemide 37
furosemide inj.....37
FYARRO 21
fyavolv tab 0.5mg-2.5mcg 79
fyavolv tab 1mg-5mcg.....79
FYCOMPA 51
see *perampanel*.....53
FYLNETRA 94
G
gabapentin 51
gabapentin (once-daily) ..63
GABARONE.....51
GALAFOLD.....82
galantamine hydrobromide 41
galbriela 77
gallifrey.....84
GAMASTAN INJ 100
GAMMAGARD LIQUID .100
GAMMAGARD LIQUID ERC.....100
GAMMAGARD S/D IGA LESS TH 100
GAMMAKED 101
GAMMAPLEX 101
GAMUNEX-C 101
GANCICLOVIR 12
ganciclovir sodium 12
GARDASIL 9.....102
GASTROCROM.....89
see *cromolyn sodium (mastocytosis)*.....89
gatifloxacin (ophth).....106
GATTEX.....89
GAUZE PADS 2X2 73
gavilyte-c.....88
gavilyte-g.....88
gavilyte-n/flavor pack 88
GAVRETO 21
GAZYVA 21
gefitinib.....21
gemcitabine hcl 17
GEMCITABINE HYDROCHLORIDE.....17
see *gemcitabine hcl*.....17
gemfibrozil.....33
gemmily.....77
GEMTESA 92
generlac 88
gengraf.....102
GENOTROPIN.....82
GENOTROPIN MINIQUICK 82
gentamicin in saline inj 0.8 mg/ml.....7
gentamicin in saline inj 1.2 mg/ml.....7
gentamicin in saline inj 1.6 mg/ml.....7
gentamicin in saline inj 1 mg/ml.....7
gentamicin in saline inj 2 mg/ml.....7
gentamicin sulfate 7
gentamicin sulfate (ophth) 106
gentamicin sulfate (topical) 116
GENVOYA TAB 11
GEODON 47
see *ziprasidone hcl*.....49
see *ziprasidone mesylate* 49
GILENYA 65
see *fingolimod hcl*.....65
GILOTRIF 22
GIMOTI 86
GIVLAARI 95
GLASSIA.....111
glatiramer acetate 65
glatopa 65
GLEEVEC 22
see *imatinib mesylate*..22
GLEOSTINE 16
see *lomustine* 16
glimepiride.....69, 70
glipizide 70
glipizide-metformin hcl tab 2.5-250 mg 70
glipizide-metformin hcl tab 2.5-500 mg 70
glipizide-metformin hcl tab 5-500 mg 70
GLOPERBA 1
glucagon 81
GLUCOTROL XL 70
see *glipizide*.....70
GLYCATE 87
glycerol phenylbutyrate ...82
glycopyrrolate.....87
GLYCOPYRROLATE.....87
see *glycopyrrolate* 87
glycopyrrolate (oral) 87
glydo 120
GLYXAMBI TAB 10-5 MG 70
GLYXAMBI TAB 25-5 MG 70
GOCOVRI 45
GOLYTELY
see *gavilyte-g* 88
see *peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm* 88
GOLYTELY SOL.....88
GOMEKLI.....22
GRAFAPEX 16
GRALISE 63
see *gabapentin (once-daily)* 63
granisetron hcl 86
GRANIX 94
GRASTEK.....101
griseofulvin microsize.....9
griseofulvin ultramicrosize.9
guanfacine hcl.....38
guanfacine hcl (adhd) 58
GVOKE HYPOPEN 1-PACK.....81
GVOKE HYPOPEN 2-PACK.....81
GVOKE KIT.....81
GVOKE PFS 81
GYNAZOLE-1 92
H
HADLIMA 98
HADLIMA PUSHTOUCH 98
HAEGARDA.....95, 96
hailey 1.5/30.....77
hailey 24 fe.....77
hailey fe 1/20.....77
HALAVEN 20
see *eribulin mesylate*...20

halcinonide.....119
HALCION.....60
see *triazolam*.....61
HALDOL DECANOATE 100 47
HALDOL DECANOATE 50 47
halobetasol propionate..119
HALOG 119
see *halcinonide* 119
haloperidol 47
haloperidol decanoate.....47
haloperidol lactate.....47
HARVONI PAK 33.75-150MG.....12
HARVONI PAK 45-200MG 12
HARVONI TAB 45-200MG 12
HARVONI TAB 90-400MG 12
HAVRIX.....102
heather.....77
HEMADY.....80
HEMICLOR.....37
HEPAGAM B.....101
HEPARIN/NACL INJ 25000UNT.....93
HEPARIN SODIUM.....93
heparin sodium (porcine) 93
HEPLISAV-B.....102
HEP SOD/D5W INJ 20000UNT.....93
HEP SOD/D5W INJ 25000UNT.....93
HEP SOD/NACL INJ 12500UNT.....93
HEP SOD/NACL INJ 25000UNT.....93
HERCEP HYLEC SOL 60-10000 22
HERCEPTIN 22
HERCESSI.....22
HERNEXEOS 22
HERZUMA 22
HETLIOZ.....60
see *tasimelteon* 61
HETLIOZ LQ.....60
HIBERIX.....102
HIPREX
see *methenamine hippurate*.....7
HIZENTRA.....101
HORIZANT.....63
HUMALOG.....73
HUMALOG JUNIOR KWIKPEN.....73
HUMALOG KWIKPEN 73
HUMALOG MIX INJ 50/50KWP 73
HUMALOG MIX INJ 75/25KWP 73
HUMALOG MIX SUS 75/25 73
HUMALOG TEMPO PEN73
HUMATIN.....7
HUMIRA.....98
HUMIRA PEN 98
HUMIRA PEN-CD/UC/HS START.....98
HUMIRA PEN KIT PS/UV 98
HUMULIN INJ 70/30 73
HUMULIN INJ 70/30KWP 73
HUMULIN N.....73
HUMULIN N KWIKPEN ..73
HUMULIN R.....73
HUMULIN R U-500 (CONCENTR.....73
HUMULIN R U-500 KWIKPEN.....73
HYCAMTIN
see *topotecan hcl* 19
hydralazine hcl.....38
HYDREA.....19
see *hydroxyurea*.....19
hydrochlorothiazide.....37
hydrocodone-acetaminophen soln 10-300 mg/15ml.....4
hydrocodone-acetaminophen soln 7.5-325 mg/15ml.....4
hydrocodone-acetaminophen tab 10-300 mg 4
hydrocodone-acetaminophen tab 10-325 mg 4
hydrocodone-acetaminophen tab 2.5-325 mg 4
hydrocodone-acetaminophen tab 5-300 mg 4
hydrocodone-acetaminophen tab 5-325 mg 4
hydrocodone-acetaminophen tab 7.5-300 mg 4
hydrocodone-acetaminophen tab 7.5-325 mg 4
hydrocodone bitartrate.....3
hydrocodone-ibuprofen tab 10-200 mg 4
hydrocodone-ibuprofen tab 5-200 mg 4
hydrocodone-ibuprofen tab 7.5-200 mg 4
hydrocortisone 80
hydrocortisone (intrarectal) 87
hydrocortisone (rectal) ..121
hydrocortisone (topical).119
hydrocortisone butyrate 119
hydrocortisone sod succinate 80
hydrocortisone valerate.119
hydrocortisone w/ acetic acid otic soln 1-2% 108
hydromorphone hcl ...3, 4, 5
HYDROMORPHONE HYDROCHLORI.....5
hydroxychloroquine sulfate 100
hydroxyurea 19
hydroxyzine hcl 110
hydroxyzine pamoate....110
HYFTOR 121

HYQVIA INJ 10-800.....101
HYQVIA INJ 2.5-200.....101
HYQVIA INJ 20-1600....101
HYQVIA INJ 30-2400....101
HYQVIA INJ 5-400.....101
HYRNUO 22
HYSINGLA ER.....3
HYZAAR
see *losartan potassium & hydrochlorothiazide tab 100-12.5 mg*.....30
see *losartan potassium & hydrochlorothiazide tab 100-25 mg*.....30
see *losartan potassium & hydrochlorothiazide tab 50-12.5 mg*.....30
HYZAAR TAB 100-12.5 ..30
HYZAAR TAB 100-25 30
HYZAAR TAB 50-12.5 30
I
ibandronate sodium 75
IBRANCE.....22
IBSRELA.....89
IBTROZI.....22
ibu 2
ibuprofen 2
ibuprofen-famotidine tab 800-26.6 mg 2
icatibant acetate.....96
iclevia 77
ICLUSIG.....22
IDHIFA 22
IFEX.....16
ifosfamide.....16
IFOSFAMIDE.....16
ILARIS.....101
ILEVRO.....106
ILUMYA.....98
IMAAVY 101
imatinib mesylate 22
IMBRUVICA.....22
IMDELLTRA.....22
IMFINZI 22
imipenem-cilastatin intravenous for soln 250 mg 7
imipenem-cilastatin intravenous for soln 500 mg 7
imipramine hcl.....43
imipramine pamoate 43
imiquimod.....121
imiquimod pump.....121
IMITREX 62
see *sumatriptan succinate*.....62
IMITREX STATDOSE REFILL 62
IMITREX STATDOSE SYSTEM.....62
see *sumatriptan succinate*.....62
IMJUDO 22
IMKELDI.....22
IMOVAX RABIES (H.D.C.V.).....102
IMPAVIDO 7
IMURAN.....102
see *azathioprine*.....101
IMVEXXY MAINTENANCE PACK.....79
IMVEXXY STARTER PACK 79
INBRIJA 46
incassia 77
INCRELEX.....82
INCRUSE ELLIPTA 109
indapamide 37
INDERAL LA.....35
see *propranolol hcl*.....35
INFANRIX INJ.....102
INFLECTRA.....98
INFLIXIMAB.....98
INLURIYO.....18
INLYTA 22
INPEFA.....38
INQOVI TAB 35-100MG .17
INREBIC 22
INSPRA.....28
INSULIN GLARGINE MAX SOLO 73
INSULIN GLARGINE SOLOSTAR.....73
INSULIN GLARGINE-YFGN 73
INSULIN LISP INJ PROT KWP 73
INSULIN LISPRO.....73
INSULIN LISPRO JUNIOR KWI.....73
INSULIN LISPRO KWIKPEN.....73
INSULIN PEN NEEDLES: EMBECTA-BD.....73
INSULIN SAFETY NEEDLES: EMBECTA-BD 73
INSULIN SYRINGES: EMBECTA-BD.....73
INTELENCE.....10
see *etravirine*.....10
INTRALIPID 105
INTRAROSA.....91
introvale 77
INTUNIV.....58
see *guanfacine hcl (adhd)* 58
INVEGA 47
see *paliperidone*.....48
INVEGA HAFYERA 47
INVEGA SUSTENNA.....47
INVEGA TRINZA 47
INVELTYS.....106
INVOKAMET TAB 150-1000 70
INVOKAMET TAB 150-500 70
INVOKAMET TAB 50-1000 70
INVOKAMET TAB 50-500MG.....70
INVOKAMET XR TAB 150-1000 70
INVOKAMET XR TAB 150-500 70
INVOKAMET XR TAB 50-1000 70
INVOKAMET XR TAB 50-500MG.....70
INVOKANA 70
INZIRQO 37

IPOL INJ INACTIVE.....102
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml 108
ipratropium bromide.....109
ipratropium bromide (nasal) 109
IQIRVO 89
irbesartan.....32
irbesartan-hydrochlorothiazide tab 150-12.5 mg 30
irbesartan-hydrochlorothiazide tab 300-12.5 mg 30
IRESSA.....22
see *gefitinib* 21
irinotecan hcl.....19
ISENTRESS.....10
ISENTRESS HD 10
isibloom.....77
ISOLYTE-P INJ /D5W...103
ISOLYTE-S INJ.....103
ISOLYTE-S INJ PH 7.4.103
isoniazid.....12
isosorbide dinitrate.....39
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg 38
isosorbide mononitrate....39
ISOSORBIDE MONONITRATE.....39
isotretinoin.....115
isradipine.....36
ISTALOL 107
see *timolol maleate (ophth) once-daily*..107
ISTURISA 82
ITOVEBI.....22
itraconazole.....9
ivabradine hcl.....38
ivermectin.....7
ivermectin (rosacea) 121
IWILFIN.....19
IXEMPRA KIT 20
IXIARO INJ 102
IYUZEH.....107
IZERVAY.....108

J

JADENU.....75
see *deferasirox*.....75
JADENU SPRINKLE.....75
see *deferasirox*.....75
jaimiess.....77
JAKAFI.....22
JALYN
see *dutasteride-tamsulosin hcl cap 0.5-0.4 mg*.....91
JALYN CAP 0.5-0.4 91
jantoven 93
JANUMET TAB 50-1000.70
JANUMET TAB 50-500MG 70
JANUMET XR TAB 100-1000 70
JANUMET XR TAB 50-1000 70
JANUMET XR TAB 50-500MG.....70
JANUVIA.....70
JARDIANCE.....70
jasmiel.....77
JATENZO.....69
JAVADIN.....38
javygtor 82
JAYPIRCA 22
JEMPERLI 22
jencycla 77
JENTADUETO TAB 2.5-1000 70
JENTADUETO TAB 2.5-500 70
JENTADUETO TAB 2.5-850 70
JENTADUETO TAB XR 2.5-1000MG 70
JENTADUETO TAB XR 5-1000MG.....70
JEVTANA.....20
jinteli.....79
JOBEVNE 22
JOENJA 101
jolessa.....77
JORNAY PM 58
JOURNAVX 1
joyeaux.....77
JUBLIA.....116
juleber 77
JULUCA TAB 50-25MG ..11
junel 1/20 77
junel 1.5/30 77
junel fe 1/20 77
junel fe 1.5/30 77
junel fe 24 77
JUXTAPID.....34
JYLAMVO 100
JYNARQUE 82
see *tolvaptan*.....84
JYNARQUE PAK 30-15MG 82
JYNARQUE PAK 45-15MG 82
JYNARQUE PAK 60-30MG 82
JYNARQUE PAK 90-30MG 82
JYNNEOS.....103

K

KABIVEN EMU 105
KADCYLA 22
kaitlib fe.....77
KALBITOR 96
KALETRA
see *lopinavir-ritonavir tab 100-25 mg*.....12
see *lopinavir-ritonavir tab 200-50 mg*.....12
KALETRA SOL 11
KALETRA TAB 100-25MG 11
KALETRA TAB 200-50MG 11
KALYDECO 111
KANJINTI.....22
KANUMA.....82
KAPSPARGO SPRINKLE 35
KARBINAL ER 110
kariva 77
KATERZIA 36
KCL/D5W/LACT INJ 20MEQ/L 104

KCL/D5W/NACL INJ 0.15/0.2 104
KCL/D5W/NACL INJ 0.15/0.45 104
KCL/D5W/NACL INJ 0.15/0.9 104
KCL/D5W/NACL INJ 0.3/0.9% 104
KCL 0.075%/D5W/NACL 0.45%
see *kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj* 103
KCL 0.3%/D5W/NACL 0.45%
see *kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj* 104
KCL 0.3%/D5W/NACL 0.9%
see *kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj* 104
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj.....103
kcl 20 meq/l (0.149%) in nacl 0.45% inj.....104
kcl 20 meq/l (0.149%) in nacl 0.9% inj.....104
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj.....104
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj.....103
kcl 20 meq/l (0.15%) in nacl 0.45% inj.....104
kcl 20 meq/l (0.15%) in nacl 0.9% inj.....104
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj.....104
kcl 40 meq/l (0.298%) in nacl 0.9% inj.....104
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj.....104
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj.....104
kcl 40 meq/l (0.3%) in nacl 0.9% inj.....104
kelnor 1/35 77
KENALOG-10 80
see *triamcinolone acetonide* 81
KENALOG-40 80
see *triamcinolone acetonide* 81
KENALOG-80 80
KEPPRA 51
see *levetiracetam* 52
see *roweepra*.....54
KEPPRA XR 51
see *levetiracetam* 52
KERENDIA.....28
KESIMPTA.....65
ketoconazole.....9
ketoconazole (topical) ...116
ketodan 116
ketoprofen 2
ketorolac tromethamine 2
ketorolac tromethamine (ophth) 106
KEVEYIS.....37
see *dichlorphenamide* .36
see *ormalvi* 37
KEVZARA 98
KEYTRUDA 22
KEYTRUDA INJ QLEX 395-4800 MG-UNIT/2.4ML 22
KEYTRUDA INJ QLEX 790-9600 MG-UNIT/4.8ML 22
KHAPZORY 19
KHINDIVI 80
KIMMTRAK.....23
KIMYRSA.....7
KINERET 98
KINRIX INJ.....103
kionex.....75
KIRSTY 73
KISQALI 200 DOSE.....23
KISQALI 400 DOSE.....23
KISQALI 400 PAK FEMARA 23
KISQALI 600 DOSE.....23
KISQALI 600 PAK FEMARA 23
KITABIS PAK.....7
see *tobramycin* 8
KLARON 115
see *sulfacetamide sodium (acne)* 115
klayesta.....116
KLISYRI 121
KLONOPIN 51
see *clonazepam* 50
klor-con 104
klor-con 10 104
KLOR-CON 10 104
KLOR-CON 8 104
see *potassium chloride* 105
klor-con m10 105
klor-con m15 105
klor-con m20 105
KLOXXADO 68
KOMZIFTI 23
KONVOMEP SUS 2-84/ML 90
KORLYM.....82
see *mifepristone (hyperglycemia)* 82
KOSELUGO.....23
kourzeq 122
KRAZATI.....23
KRINTAFEL 10
kristalose.....88
KRYSTEXXA 1
kurvelo 77
KUVAN.....82
see *javygtor*.....82
see *sapropterin dihydrochloride* 83
see *zelvysia*.....84
KYPROLIS 23
KYXATA.....16

L

labetalol hcl 35
lacosamide 51, 52
lacosamide oral 52
lactated ringer's solution 104
LACTATED RINGERS
see *lactated ringer's solution* 104
LACTATED RIN INJ.....104
lactic acid (ammonium lactate) 121
lactulose 88
lactulose (encephalopathy) 88
LAMICTAL 52
see *lamotrigine* 52
see *subvenite* 54
LAMICTAL CHEWABLE DISPERS.....52
see *lamotrigine* 52
LAMICTAL ODT.....52
see *lamotrigine* 52
see *lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit* 52
see *lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit*.....52
see *lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit* 52
LAMICTAL ODT KIT BLUE 52
LAMICTAL ODT KIT GREEN.....52
LAMICTAL ODT KIT ORANGE.....52
LAMICTAL STARTER/NOT TAKI
see *lamotrigine tab 25 mg (42) & 100 mg (7) starter kit* 52
see *subvenite starter kit/ora* 54
LAMICTAL STARTER/TAKING C
see *lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit* 52
see *subvenite starter kit/gre* 54
LAMICTAL STARTER/TAKING V
see *lamotrigine tab 35 x 25 mg starter kit* 52
see *subvenite starter kit/blu* 54
LAMICTAL STARTER KIT (35 X 25MG TABS) 52
LAMICTAL STARTER KIT (42 X 25MG TABS & 7 X 100MG TAB) 52
LAMICTAL STARTER KIT (84 X 25MG TABS & 14 X 100MG TABS).....52
LAMICTAL XR 52
see *lamotrigine* 52
LAMICTAL XR KIT.....52
lamivudine 10
lamivudine (hbv) 12
lamivudine-zidovudine tab 150-300 mg 12
lamotrigine 52
*lamotrigine tab 25 mg (42) & 100 mg (7) starter kit*52
lamotrigine tab 35 x 25 mg starter kit.....52
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit 52
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit 52
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit 52
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit 52
LAMZEDE 82
LANOXIN 38
see *digoxin* 38
LANOXIN PEDIATRIC 38
lanreotide acetate 82
LANREOTIDE ACETATE 82
lansoprazole 90
LANTUS 73
LANTUS SOLOSTAR 73
lapatinib ditosylate 23
larin 1/20 77
larin 1.5/30 77
larin 24 fe 77
larin fe 1/20 77
larin fe 1.5/30 77
LASIX.....37
see *furosemide*.....37
LASIX ONYU 37
latanoprost 107
LATUDA.....47, 48
see *lurasidone hcl* 48
LAZCLUZE.....23
leflunomide.....100
LEMTRADA 65
lenalidomide.....18
LENVIMA 10 MG DAILY DOSE 23
LENVIMA 12MG DAILY DOSE 23
LENVIMA 20 MG DAILY DOSE 23
LENVIMA 4 MG DAILY DOSE 23
LENVIMA 8 MG DAILY DOSE 23
LENVIMA CAP 14 MG 23
LENVIMA CAP 18 MG 23
LENVIMA CAP 24 MG 23
LEQEMBI IQLIK.....41
LEQSELVI.....98
LESCOL XL 33
see *fluvastatin sodium*.33
lessina 77
LETAIRIS 39
see *ambrisentan*.....39
letrozole 18
leucovorin calcium 19
LEUKERAN.....16
LEUKINE.....94
leuprolide acetate.....18
leuprolide acetate (3 month) 18

levalbuterol hcl 110
levalbuterol tartrate 110
LEVETIR/NACL INJ 10MG/ML.....52
LEVETIR/NACL INJ 15MG/ML.....52
LEVETIR/NACL INJ 5MG/ML.....52
levetiracetam.....52
LEVETIRACETAM/SODIUM CHLO
see *levetiracetam in sodium chloride iv soln 1000 mg/100ml* 52
see *levetiracetam in sodium chloride iv soln 1500 mg/100ml* 53
see *levetiracetam in sodium chloride iv soln 500 mg/100ml* 52
levetiracetam in sodium chloride iv soln 1000 mg/100ml.....52
levetiracetam in sodium chloride iv soln 1500 mg/100ml.....53
levetiracetam in sodium chloride iv soln 500 mg/100ml.....52
levobunolol hcl 107
levocarnitine (metabolic modifiers).....82
levocetirizine dihydrochloride 110
levofloxacin 14
levofloxacin (ophth) 106
levofloxacin in d5w iv soln 250 mg/50ml.....14
levofloxacin in d5w iv soln 500 mg/100ml.....14
levofloxacin in d5w iv soln 750 mg/150ml.....14
levoleucovorin calcium....19
levonest.....77
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg.....77
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg 77
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....77
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg 77
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg 77
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) 77
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) 77
levora 0.15/30-28 77
levorphanol tartrate 3
levo-t 84
levothyroxine sodium 85
levoxyl 85
LEXAPRO 43
see *escitalopram oxalate* 43
LEXETTE 119
l-glutamine (sickle cell)....96
LIALDA.....87
see *mesalamine* 88
LIBTAYO.....23
lidocaine.....120
lidocaine hcl 120
lidocaine hcl (local anesth.) 1
lidocaine hcl (mouth-throat) 122
lidocaine-prilocaine cream 2.5-2.5% 120
lidocan.....120
LIDODERM
see *lidocaine* 120
see *lidocan* 120
see *tridacaine ii* 120
LIKMEZ 7
LILETTA.....77
linezolid 7
LINEZOLID INJ 2MG/ML ..7
LINZESS 89
liomny.....85
liothyronine sodium.....85
LIPITOR 33
see *atorvastatin calcium* 33
LIPOFEN.....33
liraglutide.....70
lisdexamfetamine dimesylate 58
lisinopril 28
lisinopril & hydrochlorothiazide tab 10-12.5 mg 27
lisinopril & hydrochlorothiazide tab 20-12.5 mg 27
lisinopril & hydrochlorothiazide tab 20-25 mg 27
LITFULO 98
lithium.....63
lithium carbonate.....64
LITHOBID 64
see *lithium carbonate* ..64
LITHOSTAT 91
LIVALO 33
see *pitavastatin calcium* 33
LIVDELZI 89
LIVMARLI.....89
LIVTENCITY 12
LODINE
see *etodolac* 1
LODOCO 38
LODOSYN 46
see *carbidopa*.....45
loestrin 1/20-21 77
loestrin 1.5/30-21 77
loestrin fe 1/20 77
loestrin fe 1.5/30 77
lofena 2
lofexidine hcl 68
lojaimiess 77
LOKELMA.....76
LO LOESTRIN TAB 1-10-10 77
LOMOTIL

see *diphenoxylate w/ atropine tab 2.5-0.025 mg*.....89
LOMOTIL TAB 2.5MG 89
lomustine.....16
LONSURF TAB 15-6.14..17
LONSURF TAB 20-8.19..17
loperamide hcl.....89
LOPID 33
see *gemfibrozil* 33
lopinavir-ritonavir tab 100-25 mg 12
lopinavir-ritonavir tab 200-50 mg 12
LOPRESSOR.....35
see *metoprolol tartrate* 35
LOQTORZI.....23
lorazepam 41
lorazepam intensol.....41
LORBRENA 23
LOREEV XR 41
loryna 77
losartan potassium.....32
losartan potassium & hydrochlorothiazide tab 100-12.5 mg 30
losartan potassium & hydrochlorothiazide tab 100-25 mg 30
losartan potassium & hydrochlorothiazide tab 50-12.5 mg 30
LOTEMAX.....106
see *loteprednol etabonate*.....106
LOTEMAX SM 106
LOTENSIN 28
see *benazepril hcl* 28
LOTENSIN HCT
see *benazepril & hydrochlorothiazide tab 10-12.5 mg*.....27
see *benazepril & hydrochlorothiazide tab 20-12.5 mg*.....27
see *benazepril & hydrochlorothiazide tab 20-25 mg*.....27
loteprednol etabonate ...106
loteprednol etabonate-tobramycin ophth susp 0.5-0.3%.....105
LOTREL
see *amlodipine besylate-benazepril hcl cap 10-20 mg*.....27
see *amlodipine besylate-benazepril hcl cap 10-40 mg*.....27
see *amlodipine besylate-benazepril hcl cap 5-10 mg*.....27
LOTRONEX
see *alosetron hcl* 88
lovastatin.....33
LOVAZA
see *omega-3-acid ethyl esters cap 1 gm* 34
LOVAZA CAP 1GM.....34
LOVENOX.....93
see *enoxaparin sodium* 93
low-ogestrel.....77
loxapine succinate 48
lubiprostone 89
LUCEMYRA
see *lofexidine hcl*.....68
LUCENTIS 108
luizza 1/20.....77
luizza 1.5/30.....77
luliconazole 116
LUMAKRAS 23
LUMIGAN.....107
LUMIZYME 82
LUMRYZ 67
LUMRYZ PAK STARTER 67
LUNESTA 60
see *eszopiclone*.....60
LUNSUMIO 23
LUNSUMIO VELO 23
LUPKYNIS 102
LUPRON DEPOT (1-MONTH).....18
LUPRON DEPOT (3-MONTH).....18
LUPRON DEPOT (4-MONTH).....18
LUPRON DEPOT (6-MONTH).....18
LUPRON DEPOT-PED (1-MONTH 82
LUPRON DEPOT-PED (3-MONTH 82
LUPRON DEPOT-PED (6-MONTH 82
lurasidone hcl.....48
LURBIRO 2
lutera 77
LUTRATE DEPOT 18
LUZU.....116
LYBALVI TAB 10-10MG .48
LYBALVI TAB 15-10MG .48
LYBALVI TAB 20-10MG .48
LYBALVI TAB 5-10MG ...48
lyleq.....77
lyllana.....79
LYNKUET 82
LYNOZYFIC.....23
LYNPARZA.....23
LYRICA.....53
see *pregabalin*.....54
LYRICA CR.....64
see *pregabalin (once-daily)* 64
LYSODREN 18
LYTGOBI (12 MG DAILY DOSE).....23
LYTGOBI (16 MG DAILY DOSE).....23
LYTGOBI (20 MG DAILY DOSE).....23
LYUMJEV 73
LYUMJEV KWIKPEN.....73
LYUMJEV TEMPO PEN .73
lyza.....77

M

MACROBID.....7
see *nitrofurantoin monohyd macro*.....8
MACRODANTIN 7
see *nitrofurantoin macrocrystal* 8
magnesium sulfate.....104

MAGNESIUM SULFATE 104
see *magnesium sulfate* 104
MAGNESIUM SULFATE IN D5W
see *magnesium sulfate in dextrose 5% iv soln 1 gm/100ml* 104
magnesium sulfate in dextrose 5% iv soln 1 gm/100ml 104
MALARONE
see *atovaquone-proguanil hcl tab 250-100 mg* 10
see *atovaquone-proguanil hcl tab 62.5-25 mg* 10
MALARONE TAB 250-100 10
MALARONE TAB 62.5-25 10
malathion 122
maraviroc 10
MARGENZA 23
MARINOL 86
see *dronabinol* 86
marlissa 77
MARPLAN 43
MATULANE 19
matzim la 36
MAVENCLAD
see *cladribine (10 tabs)* 65
see *cladribine (4 tabs)* .64
see *cladribine (5 tabs)* .64
see *cladribine (6 tabs)* .64
see *cladribine (7 tabs)* .65
see *cladribine (8 tabs)* .65
see *cladribine (9 tabs)* .65
MAVENCLAD (10 TABS)65
MAVENCLAD (4 TABS)..65
MAVENCLAD (5 TABS)..65
MAVENCLAD (6 TABS)..65
MAVENCLAD (7 TABS)..65
MAVENCLAD (8 TABS)..65
MAVENCLAD (9 TABS)..65
MAVYRET PAK 50-20MG 12
MAVYRET TAB 100-40MG 12
MAXALT 62
see *rizatriptan benzoate* 62
MAXALT-MLT 62
see *rizatriptan benzoate* 62
MAXIDEX 106
MAXITROL
see *neomycin-polymyxin-dexamethasone ophth oint 0.1%* 105
see *neomycin-polymyxin-dexamethasone ophth susp 0.1%* 105
MAXITROL OIN 0.1% OP 105
MAXITROL SUS 0.1% OP 105
MAYZENT 65
MAYZENT STARTER PACK (12) 65
MAYZENT STARTER PACK (7) 65
meclizine hcl 86
meclofenamate sodium 2
MEDROL 80
see *methylprednisolone* 80
MEDROL DOSEPAK 80
see *methylprednisolone* 80
medroxyprogesterone acetate 84
medroxyprogesterone acetate (contraceptive) 77
mefenamic acid 2
mefloquine hcl 10
megestrol acetate 18, 84
megestrol acetate (appetite) 84
MEKINIST 23
MEKTOVI 24
meleya 77
meloxicam 2
memantine hcl 41
memantine hcl-donepezil hcl cap er 24hr 14-10 mg 41
memantine hcl-donepezil hcl cap er 24hr 21-10 mg 42
memantine hcl-donepezil hcl cap er 24hr 28-10 mg 42
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack 41
MENOSTAR 79
MENQUADFI 103
MENVEO INJ 103
MENVEO SOL 103
MEPRON 7
see *atovaquone* 6
mercaptopurine 17
MERILOG 73
MERILOG SOLOSTAR...73
MEROP/NACL INJ 1GM/50ML 7
MEROP/NACL INJ 500/50ML 7
meropenem 7
MEROPENEM
see *meropenem* 7
merzee 77
mesalamine 88
mesalamine w/ cleanser .88
mesna 19
MESNEX 19
see *mesna* 19
MESTINON 64
see *pyridostigmine bromide* 64
MESTINON TIMESPAN..64
see *pyridostigmine bromide* 64
METADATE CD 58
see *methylphenidate hcl* 59
metaxalone 67
metformin hcl 70, 71
methadone hcl 3
METHADONE HCL INJ 3

*methadone hydrochloride i*3
METHADOSE
see *methadone hydrochloride i* 3
methazolamide.....37
methenamine hippurate 7
methergine 82
methimazole.....85
methocarbamol 67
*methotrexate sodium*17, 100
methoxsalen rapid.....117
methscopolamine bromide 87
methsuximide.....53
methyldopa 38
methylergonovine maleate 82
METHYLIN.....58
see *methylphenidate hcl* 59
methylphenidate.....58
methylphenidate hcl.....59
methylprednisolone.....80
methylprednisolone acetate 80
methylprednisolone sod succ.....80
metoclopramide hcl.....86
metolazone 37
metoprolol & hydrochlorothiazide tab 100-25 mg 34
metoprolol & hydrochlorothiazide tab 100-50 mg 34
metoprolol & hydrochlorothiazide tab 50-25 mg 34
metoprolol succinate.....35
metoprolol tartrate.....35
METROCREAM.....121
see *metronidazole (topical)* 121
METROGEL
see *metronidazole (topical)* 121
metronidazole 7
METRONIDAZOLE.....7
see *metronidazole*.....7
metronidazole (topical)..121
metronidazole vaginal.....92
metyrosine 38
MG SO4/D5W INJ 10MG/ML.....104
MIACALCIN 75
see *calcitonin (salmon) inj* 74
mibelas 24 fe.....77
MICAFUNGIN 9
MICAFUNGIN/NACL INJ 100MG/100ML.....9
MICAFUNGIN/NACL INJ 150MG/150ML.....9
MICAFUNGIN/NACL INJ 50MG/50ML.....9
micafungin sodium.....9
MICARDIS
see *telmisartan*.....32
MICARDIS HCT
see *telmisartan-hydrochlorothiazide tab 40-12.5 mg*.....31
see *telmisartan-hydrochlorothiazide tab 80-12.5 mg*.....31
see *telmisartan-hydrochlorothiazide tab 80-25 mg*.....31
MICARDIS HCT TAB 40/12.5 30
MICARDIS HCT TAB 80/12.5 30
MICARDIS HCT TAB 80-25MG.....30
miconazole 3.....92
miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%.....116
microgestin 1/20.....77
microgestin 1.5/30.....77
microgestin fe 1/20.....77
microgestin fe 1.5/30.....77
midodrine hcl.....38
MIEBO 108
mifepristone (hyperglycemia).....82
migergot.....62
miglitol.....71
miglustat.....82
mili.....77
mimvey.....79
MINIVELLE 80
see *lyllana* 79
minocycline hcl.....16
minoxidil.....38
minzoya.....78
MIPLYFFA 83
mirabegron.....92
MIRCERA 94
mirtazapine 43
MIRVASO 121
see *brimonidine tartrate (topical)* 120
misoprostol.....89
MITIGARE.....1
see *colchicine*.....1
mitomycin.....19
mitoxantrone hcl.....19
M-M-R II INJ.....103
M-NATAL PLUS TAB....105
modafinil.....67
MODEYSO.....19
moexipril hcl.....28
molindone hcl.....48
mometasone furoate.....119
mometasone furoate (nasal) 112
MONJUVI.....24
mono-linyah 78
montelukast sodium.....110
morphine sulfate 3, 5
MORPHINE SULFATE 5
MORPHINE SULFATE/SODIUM C ...5
morphine sulfate beads.....3
MOTEGRITY.....89
see *prucalopride succinate*.....89
MOTPOLY XR 53
MOUNJARO 71
MOVANTIK 89
MOVIPREP

see *peg-3350/electrolytes/asc* 88
MOVIPREP SOL....88
moxifloxacin hcl....14
moxifloxacin hcl (ophth) 106
moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj....14
MOXIFLOXACIN HYDROCHLORID....14
MOZOBIL....94
see *plerixafor*....94
MRESVIA....103
MS CONTIN....3
see *morphine sulfate*....3
MULPLETA....96
MULTAQ....32
multiple electrolytes ph 5.5 104
mupirocin 116
mupirocin calcium (topical) 116
MVASI....24
MYALEPT 83
MYCAMINE....9
MYCAPSSA....83
mycophenolate mofetil..102
mycophenolate sodium.102
MYDAYIS
see *amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg*....56
see *amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg*....56
see *amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg*....56
see *amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg*....56
MYDAYIS CAP 12.5MG..59
MYDAYIS CAP 25MG....59
MYDAYIS CAP 37.5MG..59
MYDAYIS CAP 50MG....59
MYFEMBREE TAB 83
MYFORTIC 102
see *mycophenolate sodium* 102
MYHIBBIN....102
MYLOTARG....24
MYOBLOC....67
MYQORZO 38
MYRBETRIQ....92
see *mirabegron* 92
MYSOLINE 53
see *primidone*....54

N

nabumetone 2
nadolol 35
NAFCILLIN INJ 2GM/100 15
nafcillin sodium 15
naftifine hcl....116
NAFTIN 116
see *naftifine hcl* 116
NAGLAZYME....83
nalbuphine hcl....5
NALOCET TAB 2.5-300....5
naloxone hcl....68
naltrexone hcl....68
NAMZARIC
see *memantine hcl-donepezil hcl cap er 24hr 14-10 mg* 41
see *memantine hcl-donepezil hcl cap er 24hr 21-10 mg* 42
see *memantine hcl-donepezil hcl cap er 24hr 28-10 mg* 42
NAMZARIC CAP 14-10MG 42
NAMZARIC CAP 21-10MG 42
NAMZARIC CAP 28-10MG 42
NAMZARIC CAP 7-10MG 42
NAPRELAN....2
see *naproxen sodium*....2
naproxen 2
naproxen dr....2
naproxen-esomeprazole magnesium tab dr 375-20 mg 2
naproxen-esomeprazole magnesium tab dr 500-20 mg 2
naproxen sodium 2
naratriptan hcl 62
NARDIL....43
see *phenelzine sulfate*.44
NATACYN....106
NATAZIA TAB....78
nateglinide....71
NATROBA....122
NAYZILAM....53
nebivolol hcl 35
NEBUPENT 7
see *pentamidine isethionate inh*....8
necon 0.5/35-28....78
nefazodone hcl....43
NEMLUVIO 98
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin 106
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml ...106
neomycin-polymyxin b gu irrigation soln....91
neomycin-polymyxin-dexamethasone ophth oint 0.1% 105
neomycin-polymyxin-dexamethasone ophth susp 0.1%....105
neomycin-polymyxin-hc ophth susp....105
neomycin-polymyxin-hc otic soln 1%....108
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1% 108
neomycin sulfate 7
NEORAL 102

see *cyclosporine modified (for microemulsion)* 102
see *gengraf* 102
NERLYNX.....24
neuac gel 1.2-5%.....115
NEULASTA.....94
NEULASTA ONPRO KIT 94
NEUPOGEN 94
NEUPRO.....46
NEURONTIN.....53
see *gabapentin*.....51
NEVANAC.....106
nevirapine 10
NEXAVAR.....24
see *sorafenib tosylate* .25
NEXICLON XR.....38
NEXIUM.....90
see *esomeprazole magnesium* 90
NEXLETOL 34
NEXLIZET TAB 180/10MG 34
NEXPLANON.....78
NEXTSTELLIS TAB 3-14.2MG.....78
NEXVIAZYME.....83
NGENLA 83
niacin (antihyperlipidemic) 34
niacor 34
nicardipine hcl.....36
nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%.....36
nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9%.....36
NICARDIPINE HYDROCHLORIDE
see *nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%* 36
see *nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9%* 36
NICARDIPINE SOL 20/200ML 36
NICARDIPINE SOL 40/200ML 36
NICOTROL NS 68
nifedipine.....36
nikki.....78
NIKTIMVO.....102
NILOTINIB D-TARTRATE 24
nilotinib hcl 24
nilutamide.....18
nimodipine.....36
NINLARO 24
NIPENT.....19
nisoldipine.....36
nitazoxanide.....7
nitisinone.....83
NITRO-BID.....39
NITRO-DUR.....39
nitrofurantoin 7
NITROFURANTOIN.....7
*nitrofurantoin macrocrystal*8
nitrofurantoin monohyd macro 8
nitroglycerin.....39
nitroglycerin (intra-anal) 121
NITROLINGUAL 39
see *nitroglycerin* 39
NITROSTAT.....39
see *nitroglycerin* 39
NITYR 83
NIVESTYM.....94
nizatidine.....87
nora-be.....78
NORDITROPIN FLEXPRO 83
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr 78
norethindrone (contraceptive).....78
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg.....78
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg.....78
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg.....78
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) 78
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) 78
norethindrone acetate 84
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg 80
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg 80
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg 78
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg.....78
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg 78
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg 78
NORITATE.....121
NORLIQVA 36
norlyroc 78
NORPACE 32
see *disopyramide phosphate* 32
NORPACE CR 32
NORPRAMIN 43
see *desipramine hcl* 42
NORTHERA.....38
see *droxidopa*.....38
nortrel 0.5/35 (28) 78
nortrel 1/35 (21) 78
nortrel 1/35 (28) 78
nortrel 7/7/7.....78
nortriptyline hcl.....43
NORVASC 36
see *amlodipine besylate* 35
NORVIR.....11

see *ritonavir*.....11
NOURIANZ.....46
NOVAREL.....83
NOVOLIN70/30 INJ RELION.....73
NOVOLIN INJ 70/30.....73
NOVOLIN INJ 70/30 FP..73
NOVOLIN INJ 70/30 FP RELION.....73
NOVOLIN N.....74
NOVOLIN N FLEXPEN...74
NOVOLIN N FLEXPEN RELION.....74
NOVOLIN N RELION.....74
NOVOLIN R.....74
NOVOLIN R FLEXPEN...74
NOVOLIN R FLEXPEN RELION.....74
NOVOLIN R RELION.....74
NOVOLOG.....74
NOVOLOG FLEXPEN....74
NOVOLOG FLEXPEN RELION.....74
NOVOLOG MIX INJ 70/30 74
NOVOLOG MIX INJ FLEXPEN.....74
NOVOLOG MIX INJ FLEX REL.....74
NOVOLOG PENFILL.....74
NOVOLOG RELI INJ 70/30 74
NOVOLOG RELION.....74
NOXAFIL.....9
see *posaconazole*.....9
NPLATE.....94
NUBEQA.....18
NUCALA.....111
NUCYNTA.....5
see *tapentadol hcl*.....6
NUCYNTA ER.....3
NUEDEXTA CAP 20-10MG 64
NULOJIX.....102
NUPLAZID.....48
NURTEC.....62
NUTRILIPID.....105
NUVARING see *eluryng*.....76
see *enilloring*.....76
see *etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr*.....76
NUVARING MIS.....78
NUVIGIL.....67
see *armodafinil*.....67
NUZYRA.....16
nyamyc.....116
nylia 1/35.....78
nylia 7/7/7.....78
NYMALIZE.....36
NYPOZI.....94
nystatin.....9
NYSTATIN see *nystatin (mouth-throat)*.....122
nystatin (mouth-throat)..122
nystatin (topical).....117
nystop.....117
NYVEPRIA.....94

O

OCREVUS.....65
OCREVUS INJ ZUNOVO65
OCTAGAM.....101
octreotide acetate.....83
OCUFLOX.....106
see *ofloxacin (ophth)*.106
ODACTRA SUB.....101
ODEFSEY TAB.....12
ODOMZO.....24
OFEV.....111
ofloxacin (ophth).....106
ofloxacin (otic).....108
OGIVRI.....24
OGSIVEO.....24
OHTUVAYRE.....111
OJEMDA.....24
OJJAARA.....24
olanzapine.....48
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg.....30
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg.....30
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg.....31
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg.....30
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg.....30
olmesartan medoxomil....32
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg.....30
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg.....30
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg.....30
olopatadine hcl (nasal)..110
OLPRUVA.....83
OLUMIANT.....98
omega-3-acid ethyl esters cap 1 gm.....34
omeprazole.....90
omeprazole-sodium bicarbonate cap 20-1100 mg.....90
omeprazole-sodium bicarbonate cap 40-1100 mg.....90
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg...90
omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg...90
OMNARIS.....112
OMNIPOD 5 DX KIT INT G7G6.....74
OMNIPOD 5 DX MIS POD G7G6.....74
OMNIPOD 5 L2 KIT INTRO G6.....74
OMNIPOD 5 L2 MIS PODS G6.....74
OMNIPOD DASH KIT INTRO.....74

OMNIPOD DASH MIS PODS 74
OMNITROPE 83
OMVOH 98
OMVOH SOAJ 100/200 ..98
OMVOH SOSY 100/200 .98
ONAPGO 46
ONCASPAR.....19
ondansetron 86
ondansetron hcl 86
ONEXTON
see *clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%* 115
ONEXTON GEL 1.2-3.75 115
ONFI 53
see *clobazam* 50
ONGENTYS.....46
ONIVYDE.....19
ONTRALFY.....67
ONTRUZANT.....24
ONUREG 17
ONZETRA XSAIL.....62
OPDIVO 24
OPDIVO INJ QVANTIG ..24
OPDUALAG SOL.....24
OPFOLDA.....83
OPIPZA.....48
OPSUMIT.....39
OPSYNVI TAB 10-20MG 39
OPSYNVI TAB 10-40MG 39
OPVEE.....68
OPZELURA.....121
ORACEA.....121
see *doxycycline (rosacea)*.....120
ORAPRED ODT.....80
ORBACTIV.....8
ORENCIA.....98
ORENCIA CLICKJECT ...98
ORENITRAM 39
ORENITRAM TAB MONTH 1 39
ORENITRAM TAB MONTH 2 39
ORENITRAM TAB MONTH 3 39
ORFADIN.....83
see *nitisinone* 83
ORGOVYX.....18
ORIAHNN CAP 83
ORILISSA 83
ORKAMBI GRA 100-125 111
ORKAMBI GRA 150-188 111
ORKAMBI GRA 75-94MG 111
ORKAMBI TAB 100-125 111
ORKAMBI TAB 200-125 111
ORLADEYO.....96
ORLYNVAH TAB 500-500 8
ormalvi 37
orquidea 78
ORSERDU 18
ORUDIS 2
oseltamivir phosphate 12
OSPHENA 83
OSPOMYV.....75
OTEZLA.....98
OTEZLA/XR TAB 28 DAY 98
OTEZLA TAB 10/20 98
OTEZLA TAB 10/20/30 ...98
OTEZLA XR.....98
OTREXUP.....100
OVIDE.....122
OXACILLIN INJ 2GM 15
oxacillin sodium.....15
oxaliplatin 16
oxaprozin 2
oxazepam 41
oxcarbazepine.....53
OXERVATE 108
oxiconazole nitrate 117
OXISTAT.....117
OXLUMO 91
OXTELLAR XR 53
see *oxcarbazepine* 53
OXY-ACETAMIN TAB 7.5-300 5
oxybutynin chloride 92
OXYCOD/ACETA SOL 10/300MG.....5
OXYCOD/APAP TAB 10-300MG.....5
OXYCOD/APAP TAB 5-300MG.....5
OXYCOD-APAP TAB 2.5-300 5
oxycodone hcl 5
OXYCODONE HYDROCHLORIDE.....5
oxycodone w/ acetaminophen soln 5-325 mg/5ml.....5
oxycodone w/ acetaminophen tab 10-325 mg 5
oxycodone w/ acetaminophen tab 2.5-325 mg 5
oxycodone w/ acetaminophen tab 5-325 mg 5
oxycodone w/ acetaminophen tab 7.5-325 mg 5
OXYCONTIN.....3
oxymorphone hcl.....3, 5
OXYTROL.....92
OZEMPIC (0.25 OR 0.5MG/DOSE) 71
OZEMPIC (1MG/DOSE) .71
OZEMPIC (2MG/DOSE) .71
OZOBAX DS 67
see *baclofen* 66

P

pacerone 32
paclitaxel 20
paclitaxel inj 100mg 20
PACLITAXEL INJ 100MG 20
PADCEV 24
PALFORZIA CAP ESCALAT.....101
PALFORZIA CAP LEVEL 10 101

PALFORZIA CAP LEVEL 3 101
PALFORZIA CAP LEVEL 7 101
PALFORZIA CAP LEVEL 8 101
PALFORZIA LEVEL 1...101
PALFORZIA LEVEL 11 (MAINT 101
PALFORZIA LEVEL 11 (TITRA.....101
PALFORZIA LEVEL 2...101
PALFORZIA LEVEL 4...101
PALFORZIA LEVEL 5...101
PALFORZIA LEVEL 6...101
PALFORZIA LEVEL 9...101
paliperidone 48
palonosetron hcl.....86
PALSONIFY.....83
PALYNZIQ 83
PAMELOR
see *nortriptyline hcl* 43
pamidronate disodium.....75
PAMIDRONATE DISODIUM 75
PANCREAZE CAP 10500UNT.....89
PANCREAZE CAP 16800UNT.....89
PANCREAZE CAP 21000UNT.....89
PANCREAZE CAP 2600UNIT.....89
PANCREAZE CAP 37000 89
PANCREAZE CAP 4200UNIT.....89
PANRETIN.....121
PANTOPR/NACL SOL 40MG/100.....90
PANTOPR/NACL SOL 80MG/100.....91
pantoprazole sodium.....91
PANTOPRAZOLE SODIUM 91
see *pantoprazole sodium* 91
PANTOPRAZOLE SOL 40/50ML 91
PANZYGA.....101
paricalcitol.....85
PARLODEL.....46
see *bromocriptine mesylate* 45
PARNATE.....43
see *tranylcypromine sulfate* 44
paroxetine hcl.....43, 44
paroxetine mesylate (vasomotor) 64
PAVBLU.....108
PAXIL.....44
see *paroxetine hcl* 43
PAXIL CR.....44
see *paroxetine hcl* 44
PAXLOVID PAK.....12
PAXLOVID TAB 150-10012
PAXLOVID TAB 300-10012
pazopanib hcl.....24
PEDIARIX INJ 0.5ML....103
PEDVAX HIB 103
peg-3350/electrolytes/asc 88
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm 88
peg 3350-kcl-sod bicarb-nacl for soln 420 gm....88
PEGASYS.....12
PEMAZYRE 24
PEMETREXED 17
pemetrexed disodium.....17
PEMRYDI RTU 17
PENBRAYA INJ 103
penciclovir.....121
PEN GK/DEXTR INJ 40000/ML 15
PEN GK/DEXTR INJ 60000/ML 15
penicillamine 76
penicillin g potassium.....15
penicillin g sodium.....15
penicillin v potassium.....15
PENMENVY INJ 103
PENTACEL INJ.....103
PENTAM 300 8
see *pentamidine isethionate inj*.....8
pentamidine isethionate inh 8
pentamidine isethionate inj 8
PENTASA 88
see *mesalamine* 88
pentoxifylline 96
PEPCID.....87
see *famotidine* 87
perampanel.....53
PERCOCET
see *endocet tab 10-325mg*.....4
see *endocet tab 5-325mg* 4
see *endocet tab 7.5-325mg*.....4
see *oxycodone w/ acetaminophen tab 10-325 mg*.....5
see *oxycodone w/ acetaminophen tab 5-325 mg*.....5
see *oxycodone w/ acetaminophen tab 7.5-325 mg*.....5
PERCOCET TAB 10-325MG.....5
PERCOCET TAB 5-325MG 5
PERCOCET TAB 7.5-325.5
PERFOROMIST.....110
see *formoterol fumarate* 110
PERIDEX
see *chlorhexidine gluconate (mouth-throat)* 122
see *periogard* 122
perindopril erbumine 28
periogard.....122
PERJETA.....24
permethrin.....122
PERMETHRIN
see *permethrin* 122

perphenazine 48
perphenazine-amitriptyline tab 2-10 mg 44
perphenazine-amitriptyline tab 2-25 mg 44
perphenazine-amitriptyline tab 4-10 mg 44
perphenazine-amitriptyline tab 4-25 mg 44
perphenazine-amitriptyline tab 4-50 mg 44
PERSERIS.....48
PERTZYE CAP 16000U .89
PERTZYE CAP 24000U .89
PERTZYE CAP 4000UNIT 89
PERTZYE CAP 8000UNIT 89
pfizerpen 15
PHEBURANE.....83
phenelzine sulfate 44
PHENERGAN 86
see *promethazine hcl* ..86
phenobarbital 53
phenobarbital sodium.....53
phenoxybenzamine hcl ...38
phenytek 53
phenytoin 53
phenytoin sodium.....53
phenytoin sodium extended 54
PHESGO SOL 24
PHEXX GEL.....78
PHEXXI GEL.....78
philith.....78
PHOSPHOLINE IODIDE 107
PHYRAGO 24
PIASKY 96
PIFELTRO 11
pilocarpine hcl.....107
pilocarpine hcl (oral).....122
pimecrolimus.....121
pimozide.....48
pimtrea 78
pindolol.....35
pioglitazone hcl 71
pioglitazone hcl-glimepiride tab 30-2 mg 71
pioglitazone hcl-glimepiride tab 30-4 mg 71
pioglitazone hcl-metformin hcl tab 15-500 mg.....71
pioglitazone hcl-metformin hcl tab 15-850 mg.....71
PIP/TAZ/NACL INJ 2-0.25GM.....15
PIP/TAZ/NACL INJ 3-0.375G.....15
PIP/TAZ/NACL INJ 4-0.5GM.....15
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm) 15
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm) 15
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm) 15
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm) 15
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm) 15
PIQRAY 200MG DAILY DOSE 24
PIQRAY 250MG TAB DOSE 24
PIQRAY 300MG DAILY DOSE 24
pirfenidone 111, 112
piroxicam.....2
pitavastatin calcium.....33
PLAQUENIL.....100
see *hydroxychloroquine sulfate* 100
PLASMA-LYTE A
see *multiple electrolytes ph 5.5*.....104
PLASMA-LYTE INJ -A ..104
PLAVIX 97
see *clopidogrel bisulfate* 96
PLEGRIDY.....65, 66
PLEGRIDY INJ STARTER 66
PLEGRIDY PEN INJ STARTER.....66
plenamine 105
PLENVU SOL 88
plerixafor 94
podofilox.....121
POKONZA 105
POLIVY 24
polymyxin b sulfate 8
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% 106
pomalidomide.....18
POMALYST 18
see *pomalidomide* 18
POMBILITI 83
PONVORY 66
PONVORY TAB STARTER 66
portia-28.....78
posaconazole.....9, 10
POSFREA.....86
potassium chloride 104, 105
POTASSIUM CHLORIDE 104
see *potassium chloride* 104
POTASSIUM CHLORIDE/DEXTRO
see *kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj* 104
see *potassium chloride 20 meq/l (0.15%) in dextrose 5% inj* 104
POTASSIUM CHLORIDE/SODIUM
see *kcl 20 meq/l (0.15%) in nacl 0.45% inj*.....104
see *kcl 20 meq/l (0.15%) in nacl 0.9% inj*.....104
see *kcl 40 meq/l (0.3%) in nacl 0.9% inj*.....104

potassium chloride 20 meq/l (0.15%) in dextrose 5% inj.....104
potassium chloride microencapsulated crystals er.....105
potassium citrate (alkalinizer).....91
POT CHL/D5W INJ 20MEQ/L.....104
POT CHL 20MEQ/L IN NACL 0.45% INJ.....104
POT CHL 20MEQ/L IN NACL 0.9% INJ.....104
POT CHL 40MEQ/L IN NACL 0.9% INJ.....104
POTELIGEO.....24
PRADAXA.....93
see *dabigatran etexilate mesylate*.....93
pralatrexate.....17
pramipexole dihydrochloride.....46
PRAMOSONE CRE 1-1%.....119
PRAMOSONE LOT 1-1%.....119
PRAMOSONE LOT 2.5%.....119
prasugrel hcl.....97
pravastatin sodium.....33
praziquantel.....8
prazosin hcl.....28
PRED FORTE.....106
see *prednisolone acetate (ophth)*.....107
PRED MILD.....106
prednisolone.....80
prednisolone acetate (ophth).....107
PREDNISOLONE SODIUM PHOSP.....80, 107
prednisolone sodium phosphate.....81
prednisone.....81
PREDNISONE INTENSOL.....81
pregabalin.....54
pregabalin (once-daily)...64
PREGNYL W/DILUENT BENZYL.....83
PREMARIN.....80
see *estrogens, conjugated*.....79
PREMASOL SOL 10%..105
PREMPHASE TAB.....80
PREMPRO TAB 0.3-1.5..80
PREMPRO TAB 0.45-1.580
PREMPRO TAB 0.625-2.5.....80
PREMPRO TAB 0.625-5.80
PRENATAL TAB 27-1MG.....105
PRENATAL TAB PLUS.105
PRETOMANID.....12
PREVACID.....91
see *lansoprazole*.....90
PREVACID SOLUTAB....91
see *lansoprazole*.....90
prevalite.....34
PREVYMIS.....13
PREZCOBIX TAB 675/150.....12
PREZCOBIX TAB 800-150.....12
PREZISTA.....11
see *darunavir*.....10
PRIFTIN.....12
PRILOSEC.....91
primaquine phosphate....10
PRIMAQUINE PHOSPHATE.....10
see *primaquine phosphate*.....10
PRIMAXIN IV
see *imipenem-cilastatin intravenous for soln 500 mg*.....7
PRIMAXIN IV INJ 500MG.8
primidone.....54
PRIORIX INJ.....103
PRISTIQ.....44
see *desvenlafaxine succinate*.....42
PRIVIGEN.....101
PROAIR RESPICLICK..110
probenecid.....1
PROCARDIA XL.....36
see *nifedipine*.....36
prochlorperazine.....86
prochlorperazine edisylate.....86
prochlorperazine maleate.....86
PROCRIT.....94
proctocort.....121
PROCTOFOAM AER HC 1%.....121
procto-med hc.....121
proctosol hc.....121
proctozone-hc.....121
PROCYSBI.....83
progesterone.....84
PROGLYCEM.....81
see *diazoxide*.....81
PROGRAF.....102
see *tacrolimus*.....102
PROLASTIN-C.....112
PROLATE SOL 10/300MG.....5
PROLATE TAB 10-300MG.....6
PROLATE TAB 5-300MG.6
PROLATE TAB 7.5-300....6
PROLENSA.....107
see *bromfenac sodium (ophth)*.....106
PROLIA.....75
PROMACTA.....96
see *eltrombopag olamine*.....95
promethazine & phenylephrine syrup 6.25-5 mg/5ml.....109
promethazine hcl.....86
promethegan.....86
PROMETRIUM.....84
see *progesterone*.....84
propafenone hcl.....32
proparacaine hcl.....108
propranolol hcl.....35
propylthiouracil.....85
PROQUAD INJ.....103
PROSCAR.....91

see *finasteride* 91
PROSOL INJ 20% 105
PROTONIX 91
see *pantoprazole sodium* 91
protriptyline hcl 44
PROVERA 84
see *medroxyprogesterone acetate* 84
PROVIGIL 67
see *modafinil* 67
prucalopride succinate 89
PRUDOXIN 121
see *doxepin hcl (antipruritic)* 120
pruradik 122
PULMICORT 113
see *budesonide (inhalation)* 113
PULMICORT FLEXHALER 113
PULMOZYME 112
PURIXAN 17
see *mercaptopurine* 17
PYLERA
see *bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg* 89
PYLERA CAP 89
pyrazinamide 12
pyridostigmine bromide ...64
pyrimethamine 8
PYRUKYND 96
PYRUKYND TAB 20MGX5MG 96
PYRUKYND TAB 50MGX20M 96
PYRUKYND TAPER PACK 96
PYZCHIVA 99
Q
QBRELIS 28
QBREXZA 121
QELBREE 59
QINLOCK 24
QNASL 112
QNASL CHILDRENS 112
QUADRACEL INJ 0.5ML 103
QUESTRAN 34
see *cholestyramine* 33
QUESTRAN LIGHT 34
see *cholestyramine light* 33
see *prevalite* 34
quetiapine fumarate 48
QUILLICHEW ER 59
QUILLIVANT XR 59
quinapril hcl 28
quinapril-hydrochlorothiazide tab 10-12.5 mg 27
quinapril-hydrochlorothiazide tab 20-12.5 mg 27
quinapril-hydrochlorothiazide tab 20-25 mg 27
quinidine sulfate 32
quinine sulfate 10
QULIPTA 62
QUTENZA KIT 8% 1-PCH 120
QUTENZA KIT 8% 2-PCH 120
QUTENZA KIT 8% 4-PCH 120
QUVIVIQ 60
QUZYTTIR 110
QVAR REDIHALER 113
R
RABAVERT INJ 103
rabeprazole sodium 91
RADICAVA
see *edaravone* 63
RADICAVA ORS 64
RADICAVA ORS STARTER KIT 64
RAGWITEK 101
RALDESY 44
raloxifene hcl 83
ramelteon 60
ramipril 28
ranitidine hcl 87
ranolazine 38
RAPIVAB 13
rasagiline mesylate 46
RASUVO 100
RAVICTI 83
see *glycerol phenylbutyrate* 82
RAYALDEE 85
REBIF 66
REBIF REBIDO INJ TITRATN 66
REBIF REBIDOSE 66
REBIF TITRTN INJ PACK 66
REBLOZYL 96
REBYOTA 89
RECARBRIO INJ 1.25GM 8
RECLAST 75
see *zoledronic acid* 75
reclipsen 78
RECOMBIVAX HB 103
RECORLEV 83
RECTIV 121
see *nitroglycerin (intra-anal)* 121
REDEMPLO 38
REGLAN 86
see *metoclopramide hcl* 86
RELAFEN DS 2
RELENZA DISKHALER ..13
RELEUKO 94
RELEXXII 59
RELISTOR 89
RELPAX 62
see *eletriptan hydrobromide* 61
RELTONE 89
REMERON 44
see *mirtazapine* 43
REMERON SOLTAB 44
see *mirtazapine* 43
REMICADE 99
REMODULIN 39
RENFLEXIS 99
repaglinide 71
REPATHA 34
REPATHA SURECLICK .34

RESTASIS 108
RESTASIS MULTIDOSE 108
RESTORIL 60
see *temazepam* 61
RETACRIT 94
RETEVMO 24
RETIN-A 115
see *tretinoin* 115
RETIN-A MICRO 115
RETIN-A MICRO PUMP 115
see *tretinoin microsphere* 115
RETROVIR 11
see *zidovudine* 11
REVATIO 39
see *sildenafil citrate (pulmonary hypertension)* 39
REVCOVI 83
REVLIMID 18
see *lenalidomide* 18
REVUFORJ 24
REXTOVY 68
REXULTI 48
REYATAZ 11
see *atazanavir sulfate* .10
REYVOW 62
REZDIFFRA 83
REZLIDHIA 24
REZUROCK 102
REZVOGLAR KWIKPEN 74
REZZAYO 10
RHAPSIDO 99
RHOFADE 121
RHOPRESSA 107
RIABNI 24
ribavirin (hepatitis c) 13
rifabutin 12
RIFADIN
see *rifampin* 12
rifampin 12
rilpivirine hcl 11
riluzole 64
rimantadine hydrochloride 13
RIMSO-50 91
RINVOQ 99
RINVOQ LQ 99
RIOMET
see *metformin hcl* 70
risedronate sodium 75
RISPERDAL 48, 49
see *risperidone* 49
RISPERDAL CONSTA 49
see *risperidone microspheres* 49
risperidone 49
risperidone microspheres 49
RITALIN 60
see *methylphenidate hcl* 59
RITALIN LA
see *methylphenidate hcl* 59
ritonavir 11
RITUXAN 24
RITUXAN INJ HYCELA .24
rivaroxaban 94
rivastigmine 42
rivastigmine tartrate 42
rivelsa 78
RIVFLOZA 92
rizatriptan benzoate 62
ROCALTROL 85
see *calcitriol* 85
see *calcitriol (oral)* 85
ROCKLATAN DRO 107
roflumilast 112
ROLVEDON 94
ROMVIMZA 25
ropinirole hydrochloride ...46
rosuvastatin calcium 33
rosyrah 78
ROTARIX SUS 103
ROTATEQ SOL 103
ROWASA 88
see *mesalamine w/ cleanser* 88
roweepra 54
ROXICODONE 6
see *oxycodone hcl* 5
ROXYBOND 6
ROZEREM 61
see *ramelteon* 60
ROZLYTREK 25
RUBRACA 25
RUCONEST 96
rufinamide 54
RUKOBIA 11
RUXIENCE 25
RYALTRIS SPR 665-25 109
RYBELSUS 71
RYBREVANT 25
RYBREVANT INJ FASPRO 25
ryclora 110
RYDAPT 25
RYKINDO 49
RYLAZE 19
RYSTIGGO 101
RYTARY CAP 145MG 46
RYTARY CAP 195MG 46
RYTARY CAP 245MG 46
RYTARY CAP 95MG 46
RYTELO 96
ryvent 110
RYZNEUTA 95

S

SABRIL 54
see *vigabatrin* 55
see *vigadrone* 55
sacubitril-valsartan tab 24-26 mg 31
sacubitril-valsartan tab 49-51 mg 31
sacubitril-valsartan tab 97-103 mg 31
SAFYRAL
see *drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg* 76
see *tydemy* 78
SAFYRAL TAB 78
sajazir 96
SALAGEN 122
see *pilocarpine hcl (oral)* 122
SAMSCA 83
see *tolvaptan (hyponatremia)* 84
SANCUSO 86
SANDIMMUNE 102

see *cyclosporine*.....102
SANDOSTATIN 83
see *octreotide acetate* .83
SANDOSTATIN LAR DEPOT 83
see *octreotide acetate* .83
SANTYL 122
SAPHNELO 102
SAPHRIS 49
see *asenapine maleate* 46
sapropterin dihydrochloride 83
SARCLISA 25
SAVELLA 64
SAVELLA MIS TITR PAK 64
saxagliptin hcl 71
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg 71
saxagliptin-metformin hcl tab er 24hr 5-1000 mg .71
saxagliptin-metformin hcl tab er 24hr 5-500 mg ...71
SCEMBLIX.....25
scopolamine.....86
SDAMLO.....36
SECUADO 49
SEGLUROMET TAB 2.5-1000 71
SEGLUROMET TAB 2.5-500 71
SEGLUROMET TAB 7.5-1000 71
SEGLUROMET TAB 7.5-500 71
selegiline hcl 46
selenium sulfide 117
SELZENTRY.....11
see *maraviroc*.....10
SEMGLEE.....74
SENSIPAR
see *cinacalcet hcl*.....81
SEPHIENCE 83
SEREVENT DISKUS 110
SEROQUEL 49
see *quetiapine fumarate* 48
SEROQUEL XR 49
see *quetiapine fumarate* 48
SEROSTIM 83
sertraline hcl.....44
SERTRALINE HYDROCHLORIDE.....44
see *sertraline hcl* 44
setlakin.....78
SEYSARA.....16
SFROWASA 88
sharobel 78
SHINGRIX.....103
SIGNIFOR.....83
SIGNIFOR LAR.....83
SIKLOS 96
sildenafil citrate (pulmonary hypertension).....39
SILENOR 61
see *doxepin hcl (sleep)* 60
SILIQ.....99
silodosin 91
SILVADENE.....116
see *silver sulfadiazine* 116
see *ssd* 116
silver sulfadiazine.....116
SIMBRINZA SUS 1-0.2% 107
simliya 78
simpesse.....78
SIMPONI.....99
SIMPONI ARIA 99
simvastatin 33
SINEMET
see *carbidopa & levodopa tab 10-100 mg*.....45
see *carbidopa & levodopa tab 25-100 mg*.....45
SINEMET TAB 10-100MG 46
SINEMET TAB 25-100MG 46
SINGULAIR.....110
see *montelukast sodium* 110
sirolimus.....102
SIRTURO.....12
sitagliptin 71
sitagliptin free base-metformin hcl tab 50-1000 mg 72
sitagliptin free base-metformin hcl tab 50-500 mg 71
sitagliptin free base-metformin hcl tab er 24hr 100-1000 mg 72
sitagliptin free base-metformin hcl tab er 24hr 50-1000 mg 72
sitagliptin free base-metformin hcl tab er 24hr 50-500 mg 72
SIVEXTRO.....8
SKYCLARYS 64
SKYRIZI 99
SKYRIZI PEN.....99
SKYTROFA.....83
SMOFLIPID EMU.....105
SOAANZ 37
sodium chloride.....104
sodium chloride (gu irrigant) 122
sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln.105
sodium oxybate.....67
sodium phenylbutyrate....84
sodium polystyrene sulfonate.....76
sodium polystyrene sulfonate powder.....76
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml.....88
SOFDRA.....121
SOGROYA.....84
solifenacin succinate.....92
SOLIQUA INJ 100/33.....74
SOLIRIS.....96
SOLOSEC.....8

SOLTAMOX.....18
SOLU-CORTEF 81
see *hydrocortisone sod succinate*.....80
SOLU-MEDROL.....81
see *methylprednisolone sod succ*.....80
SOMA 67
see *carisoprodol*.....66
SOMATULINE DEPOT ...84
SOMAVERT.....84
SOOLANTRA.....121
see *ivermectin (rosacea)* 121
sorafenib tosylate.....25
SORILUX 117
sotalol hcl.....32
sotalol hcl (afib/afl).....32
SOTYKTU 99
SOTYLIZE.....32
SOVUNA.....100
SPEVIGO.....99
spinosad.....122
SPIRIVA HANDIHALER109
see *tiotropium bromide* 109
SPIRIVA RESPIMAT 109
spironolactone.....28
spironolactone & hydrochlorothiazide tab 25-25 mg 37
SPORANOX
see *itraconazole* 9
SPRAVATO SOL 56MG DOS.....44
SPRAVATO SOL 84MG DOS.....44
sprintec 28 78
SPRITAM 54
SPRIX 2
SPRYCEL 25
see *dasatinib* 21
sps 76
sps rectal.....76
sronyx 78
ssd 116
STEGLATRO 72
STEGLUJAN TAB 15-100MG.....72
STEGLUJAN TAB 5-100MG.....72
STELARA.....99
STIMUFEND 95
STIOLTO AER 2.5-2.5 ..108
STIVARGA.....25
STRENSIQ.....84
streptomycin sulfate 8
STRIBILD TAB.....12
STRIVERDI RESPIMAT 110
STROMECTOL 8
see *ivermectin* 7
SUBLOCADE.....68
SUBOXONE
see *buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)* 68
see *buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)* .68
see *buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)* 68
see *buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)* 68
SUBOXONE MIS 12-3MG 68
SUBOXONE MIS 2-0.5MG 68
SUBOXONE MIS 4-1MG 68
SUBOXONE MIS 8-2MG 68
subvenite.....54
SUBVENITE.....54
subvenite starter kit/blu ...54
subvenite starter kit/gre...54
subvenite starter kit/ora...54
SUCRAID.....89
sucralfate 89
SUFLAVE SOL 88
SULAR.....36
see *nisoldipine*.....36
sulfacetamide sodium (acne) 115
sulfacetamide sodium (ophth) 106
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%.....105
sulfadiazine 8
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml.....8
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml.....8
sulfamethoxazole-trimethoprim tab 400-80 mg 8
sulfamethoxazole-trimethoprim tab 800-160 mg 8
SULFAMYLON.....116
sulfasalazine 88
sulindac.....2
sumatriptan 62
sumatriptan-naproxen sodium tab 85-500 mg.62
sumatriptan succinate 62
sunitinib malate 25
SUNLENCA 11
SUNOSI 68
SUPREP BOWEL PREP KIT
see *sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml*...88
SUPREP BOWEL SOL PREP KIT 88
SUSTOL.....86
SUSVIMO 108
SUTAB TAB 88
SUTENT.....25
see *sunitinib malate*.....25
syeda 78
SYFOVRE.....108
SYLVANT.....19
SYMBICORT
see *breyna*.....113
see *budesonide-formoterol fumarate*

dihyd aerosol 160-4.5 mcg/act 113
see *budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act* 113
SYMBICORT AER 160-4.5 114
SYMBICORT AER 80-4.5 114
SYMBRAVO TAB 20-10MG 62
SYMDEKO TAB 100-150 112
SYMDEKO TAB 50-75MG 112
SYMFI
see *efavirenz-lamivudine-tenofovir df tab 600-300-300 mg* 11
SYMFI TAB 12
SYMLINPEN 120 72
SYMLINPEN 60 72
SYMPAZAN 54
SYMPROIC 90
SYMTUZA TAB 12
SYNALAR 119
see *fluocinolone acetonide* 118
SYNAREL 84
SYNJARDY TAB 12.5-1000MG 72
SYNJARDY TAB 12.5-500 72
SYNJARDY TAB 5-1000MG 72
SYNJARDY TAB 5-500MG 72
SYNJARDY XR TAB 10-1000 72
SYNJARDY XR TAB 12.5-1000 72
SYNJARDY XR TAB 25-1000 72
SYNJARDY XR TAB 5-1000MG 72
SYNTHROID 85
see *levo-t* 84
see *levothyroxine sodium* 85
see *levoxyl* 85
see *unithroid* 85
SYPRINE 76
see *trientine hcl* 76
T
TABLOID 17
TABRECTA 25
TACLONEX
see *calcipotriene-betamethasone dipropionate susp 0.005-0.064%* 117
TACLONEX SUS 117
tacrolimus 102
tacrolimus (topical) 121
tadalafil 91
tadalafil (pulmonary hypertension) 39
TADLIQ 40
TAFINLAR 25
tafluprost 107
TAGRISSO 25
TAKHZYRO 96
TALICIA CAP 90
TALTZ 99
TALZENNA 25
TAMIFLU 13
see *oseltamivir phosphate* 12
tamoxifen citrate 18
tamsulosin hcl 91
tanlor 67
tapentadol hcl 6
taperdex 12-day 81
taperdex 6-day 81
taperdex 7-day 81
targadox 16
TARGRETIN 19, 121
see *bexarotene* 19
see *bexarotene (topical)* 120
tarina 24 fe 78
tarina fe 1/20 eq 78
TARPEYO 92
TASCENSO ODT 66
TASIGNA 25
see *nilotinib hcl* 24
tasimelteon 61
TAVALISSE 96
TAVNEOS 96
TAYTULLA
see *gemmily* 77
see *merzee* 77
see *norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)* 78
TAYTULLA CAP 1MG/20MC 78
tazarotene 117
TAZAROTENE 115
tazicef 14
TAZORAC 117
see *tazarotene* 117
TAZVERIK 25
TECENTRIQ 25
TECENTRIQ INJ HYBREZA 25
TECFIDERA 66
see *dimethyl fumarate* .65
TECFIDERA CAP STARTER 66
TECFIDERA STARTER PACK
see *dimethyl fumarate capsule dr starter pack 120 mg & 240 mg* 65
TECVAYLI 25
TEFLARO 14
see *ceftaroline fosamil* .13
TEGRETOL 54
see *carbamazepine* 50
TEGRETOL-XR 54
see *carbamazepine* 50
TEKTURNA 38
see *aliskiren fumarate* .37
telmisartan 32
telmisartan-amlodipine tab 40-10 mg 31
telmisartan-amlodipine tab 40-5 mg 31
telmisartan-amlodipine tab 80-10 mg 31
telmisartan-amlodipine tab 80-5 mg 31

telmisartan-hydrochlorothiazide tab 40-12.5 mg 31
telmisartan-hydrochlorothiazide tab 80-12.5 mg 31
telmisartan-hydrochlorothiazide tab 80-25 mg 31
temazepam 61
temsirolimus 25
TENIVAC INJ 5-2LF 103
tenofovir disoproxil fumarate 11
TENORETIC 100
see *atenolol & chlorthalidone tab 100-25 mg* 34
TENORETIC 50
see *atenolol & chlorthalidone tab 50-25 mg* 34
TENORETIC TAB 100 34
TENORETIC TAB 50 34
TENORMIN 35
see *atenolol* 35
TEPEZZA 84
TEPMETKO 25
terazosin hcl 28
terbinafine hcl 10
terbutaline sulfate 110
terconazole vaginal 92
teriflunomide 66
teriparatide 75
TERIPARATIDE 75
TESTIM 69
testosterone 69
testosterone cypionate 69
testosterone enanthate 69
testosterone pump 69
tetrabenazine 64
tetracycline hcl 16
TETRACYCLINE HYDROCHLORID 16
TEVIMBRA 25
texacort 119
TEZRULY 28
TEZSPIRE 112
THALITONE 37
THALOMID 18
THEO-24 112
theophylline 112
THIOLA 92
see *tiopronin* 92
THIOLA EC 92
see *tiopronin* 92
see *venxxiva* 92
thioridazine hcl 49
thiothixene 49
THYQUIDITY 85
tiadylt er 36
tiagabine hcl 54
TIAZAC 36
see *diltiazem hcl extended release beads* 36
see *tiadylt er* 36
TIBSOVO 25
ticagrelor 97
TICOVAC 103
tigecycline 16
TIGECYCLINE 16
TIGLUTIK 64
TIKOSYN 32
see *dofetilide* 32
tilia fe 78
timolol hemihydrate (ophth) 107
timolol maleate 35
timolol maleate (ophth) .107
timolol maleate (ophth) once-daily 107
timolol maleate (ophth) pf 107
TIMOPTIC OCUDOSE .107
see *timolol maleate (ophth) pf* 107
tinidazole 8
tiopronin 92
tiotropium bromide 109
TIROSINT 85
TIROSINT-SOL 85
TIVDAK 25
TIVICAY 11
TIVICAY PD 11
tizanidine hcl 67
TLANDO 69
TOBI 8
TOBI PODHALER 8
TOBRADEX OIN 0.3-0.1% 105
TOBRADEX ST SUS 0.3-0.05 105
tobramycin 8
tobramycin (ophth) 106
tobramycin-dexamethasone ophth susp 0.3-0.1% .105
tobramycin sulfate 8
TOBREX 106
TOFIDENCE 99
tolectin 600 2
tolmetin sodium 2
TOLSURA 10
tolterodine tartrate 92
tolvaptan 84
tolvaptan (hyponatremia) 84
tolvaptan tab therapy pack 30 & 15 mg 84
tolvaptan tab therapy pack 45 & 15 mg 84
tolvaptan tab therapy pack 60 & 30 mg 84
tolvaptan tab therapy pack 90 & 30 mg 84
TONMYA 64
TOPAMAX 54
see *topiramate* 55
TOPAMAX SPRINKLE 54
see *topiramate* 55
TOPICORT 119
see *desoximetasone* .118
topiramate 54, 55
topotecan hcl 19
TOPOTECAN HCL 19
see *topotecan hcl* 19
TOPROL XL 35
see *metoprolol succinate* 35
toremifene citrate 18
TORISEL 25
see *temsirolimus* 25
torpenz 25
torsemide 37
TOSYMRA 62

TOUJEO MAX SOLOSTAR 74
TOUJEO SOLOSTAR.....74
tovet 119
TOVIAZ.....92
see *fesoterodine fumarate*.....92
TPN ELECTROL INJ 104
TRACLEER.....40
see *bosentan*.....39
TRADJENTA.....72
tramadol-acetaminophen tab 37.5-325 mg 6
tramadol hcl 3, 6
TRAMADOL HYDROCHLORIDE.....6
trandolapril 28
trandolapril-verapamil hcl tab er 1-240 mg.....27
trandolapril-verapamil hcl tab er 2-180 mg.....27
trandolapril-verapamil hcl tab er 2-240 mg.....27
trandolapril-verapamil hcl tab er 4-240 mg.....27
tranexamic acid.....96
TRANEXAMIC ACID/SODIUM CH
see *tranexamic acid-sodium chloride iv soln 1000 mg/100ml-0.7%* 96
tranexamic acid-sodium chloride iv soln 1000 mg/100ml-0.7% 96
TRANSDERM SCOP.....86
see *scopolamine* 86
tranylcypromine sulfate...44
TRAVASOL INJ 10% 105
TRAVATAN Z.....107
see *travoprost*.....107
travoprost.....107
TRAZIMERA 25
trazodone hcl 44
TREANDA.....16
see *bendamustine hcl* .16
TRELEGY AER ELLIPTA 100-62.5-25 MCG.....108
TRELEGY AER ELLIPTA 200-62.5-25 MCG.....109
TRELSTAR MIXJECT.....18
TREMFYA.....99
TREMFYA INDUCTION PACK FO.....99
TREMFYA PEN 100
treprostinil 40
TRESIBA.....74
TRESIBA FLEXTOUCH..74
tretinoin 115
tretinoin (chemotherapy) .19
tretinoin microsphere 115
TREXALL 100
TREXIMET
see *sumatriptan-naproxen sodium tab 85-500 mg*.....62
TREXIMET TAB 85-500MG 63
trezix 6
triamcinolone acetonide ..81
triamcinolone acetonide (mouth) 122
triamcinolone acetonide (topical).....119, 120
triamterene.....37
triamterene & hydrochlorothiazide cap 37.5-25 mg 37
triamterene & hydrochlorothiazide tab 37.5-25 mg 37
triamterene & hydrochlorothiazide tab 75-50 mg 37
triazolam 61
TRIBENZOR
see *olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg* 30
see *olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg* 30
see *olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg* 31
see *olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg* 30
see *olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg* 30
TRIBENZOR TAB 20-5-12.5MG.....31
TRIBENZOR TAB 40-10-12.5MG.....31
TRIBENZOR TAB 40-10-25MG.....31
TRIBENZOR TAB 40-5-12.5MG.....31
TRIBENZOR TAB 40-5-25MG.....31
TRICOR
see *fenofibrate*.....33
tridacaine ii.....120
triderm.....120
trientine hcl.....76
TRIESENCE 107
tri-estarylla 78
trifluoperazine hcl.....49
trifluridine 106
trihexyphenidyl hcl 46
TRIJARDY XR TAB ER 24HR 10-5-1000MG....72
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG 72
TRIJARDY XR TAB ER 24HR 25-5-1000MG....72
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG...72
TRIKAFTA PAK 59.5MG 112
TRIKAFTA PAK 75MG..112
TRIKAFTA TAB 100-50-75MG & 150MG 112
TRIKAFTA TAB 50-25-37.5MG & 75MG 112
tri-legest fe 78
TRILEPTAL.....55

see *oxcarbazepine* 53
tri-linyah 78
tri-lo-estarylla 78
tri-lo-marzia 78
tri-lo-mili 78
tri-lo-sprintec 78
trimethobenzamide hcl 87
trimethoprim 8
tri-mili 78
trimipramine maleate 44
TRINTELLIX.....44
tri-sprintec 78
TRIUMEQ PD TAB 12
TRIUMEQ TAB 12
tri-vylibra 78
tri-vylibra lo.....78
TRODELVY.....25
TROGARZO.....11
TROKENDI XR 55
see *topiramate*.....54, 55
TROPHAMINE INJ 10% 105
trospium chloride.....92
TRUDHESA 63
TRULANCE.....90
TRULICITY 72
TRUMENBA.....103
TRUQAP 25, 26
TRUVADA
see *emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg*.....11
see *emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg*.....11
see *emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg*.....11
see *emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg*.....11
TRUVADA TAB 100-150.12
TRUVADA TAB 133-200.12
TRUVADA TAB 167-250.12
TRUVADA TAB 200-300.12
TRUXIMA.....26
TRYNGOLZA.....38
TRYPTYR 108
TRYVIO.....39
TUDORZA PRESSAIR .109
TUDORZA PRESSAIR (INSTITUTIONAL PACK) 109
TUKYSA.....26
TURALIO 26
turqoz 78
twice-daily clindamycin phosphate (topical)....115
TWINRIX INJ 103
TWYNEO CRE 0.1-3% .115
TYBOST.....11
tydemy 78
TYENNE 100
TYGACIL.....16
see *tigecycline*.....16
TYKERB.....26
see *lapatinib ditosylate* 23
TYMLOS 75
TYPHIM VI 103
TYRUKO 66
TYRVAYA 108
TYSABRI.....66
TYVASO 40
TYVASO DPI INSTITUTIONAL 40
TYVASO DPI MAINTENANCE KI.....40
TYVASO DPI POW 16-32-48 40
TYVASO DPI POW MAIN KIT 32-64MCG 40
TYVASO DPI POW MAIN KIT 48-64MCG 40
TYVASO REFILL KIT.....40
TYVASO STARTER KIT .40
TYZAVAN 8
TZIELD.....72
U
UBRELVY 63
UCERIS 88
see *budesonide*.....87
see *budesonide (intrarectal)*.....87
UDENYCA 95
UDENYCA ONBODY.....95
ULORIC 1
see *febuxostat*.....1
ULTOMIRIS 96
ULTRAVATE.....120
UNASYN
see *ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm*.....15
see *ampicillin & sulbactam sodium for inj 3 (2-1) gm*.....15
UNASYN BULK PACK
see *ampicillin & sulbactam sodium for iv soln 15 (10-5) gm* .15
UNASYN INJ 1.5GM.....15
UNASYN INJ 15GM.....15
UNASYN INJ 3GM.....15
unithroid 85
UPLIZNA.....64
UPTRAVI 40
UPTRAVI PACK TAB 200/800 40
UROCIT-K 10.....92
see *potassium citrate (alkalinizer)* 91
UROCIT-K 15.....92
see *potassium citrate (alkalinizer)* 91
UROXATRAL 91
see *alfuzosin hcl*.....91
ursodiol 90
URSODIOL 90
URSO FORTE
see *ursodiol*.....90
USTEKINUMAB 100
UZEDY.....49
V
VABOMERE INJ 2GM(1-1) 8
VABRINTY 18
VABYSMO 108
VAGIFEM.....80
see *estradiol vaginal*....79

see *yuvafem* 80
valacyclovir hcl 13
VALCHLOR.....121
VALCYTE.....13
see *valganciclovir hcl* ..13
valganciclovir hcl 13
VALIUM.....55
see *diazepam* 51
valproate sodium 55
valproic acid 55
valrubicin 19
valsartan 32
valsartan-hydrochlorothiazide tab 160-12.5 mg 31
valsartan-hydrochlorothiazide tab 160-25 mg 31
valsartan-hydrochlorothiazide tab 320-12.5 mg 31
valsartan-hydrochlorothiazide tab 320-25 mg 31
valsartan-hydrochlorothiazide tab 80-12.5 mg 31
VALSTAR.....19
see *valrubicin* 19
VALTOCO 10 MG DOSE55
VALTOCO 15 MG DOSE55
VALTOCO 20 MG DOSE55
VALTOCO 5 MG DOSE..55
VALTREX.....13
see *valacyclovir hcl* 13
valtya 1/35.....78
valtya 1/50.....78
VANCOCIN.....8
see *vancomycin hcl* 8
VANCOMYC/D5W INJ 1.25/250 8
VANCOMYC/D5W INJ 1.5/300 8
vancomycin hcl 8, 9
VANCOMYCIN HYDROCHLORIDE.....9
see *vancomycin hcl* 8
VANCOMYCIN INJ 1 GM .9
VANCOMYCIN INJ 500MG 9
VANCOMYCIN INJ 750MG 9
VANDAZOLE 92
VANFLYTA 26
VANOS
see *fluocinonide* 119
VANRAFIA 92
VAQTA.....103
varenicline tartrate 68
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack.....68
VARIVAX 103
VARUBI.....87
VASCEPA.....34
VASERETIC
see *enalapril maleate & hydrochlorothiazide tab 10-25 mg*.....27
VASERETIC TAB 10-25MG 27
VASOTEC.....28
see *enalapril maleate* ..28
VAXCHORA SUS 103
VECTIBIX.....26
VECTICAL 117
VEGZELMA 26
VELCADE 26
see *bortezomib*.....20
VELETRI 40
see *epoprostenol sodium* 39
velivet.....78
VELSIPITY.....100
VELTASSA 76
VEMLIDY 13
VENCLEXTA.....26
VENCLEXTA TAB START PK.....26
VENLAFAXINE BESYLATE ER 44
venlafaxine hcl 44
VENTOLIN HFA.....110
VENTOLIN HFA (INSTITUTIONAL PACK) 110
venxxiva 92
VEOZAH 84
verapamil hcl.....36
VERKAZIA 108
VERQUVO 39
VERSACLOZ 49
VERZENIO.....26
VESICARE
see *solifenacin succinate* 92
VESICARE LS 92
vestura 78
VEVYE.....108
VFEND.....10
see *voriconazole* 10
VFEND IV 10
see *voriconazole* 10
V-GO 20 KIT 74
V-GO 30 KIT 74
V-GO 40 KIT 74
VIBATIV 9
VIBERZI 90
VICTOZA 72
see *liraglutide* 70
VIDAZA 17
see *azacitidine*.....17
vienva.....78
vigabatrin 55
vigadrone 55
VIGAFYDE.....55
VIGAMOX 106
see *moxifloxacin hcl (ophth)* 106
VIIBRYD.....44
see *vilazodone hcl*.....44
VIJOICE 84
VIJOICE TAB 250MG 84
vilazodone hcl 44
VIMIZIM 84
VIMKUNYA 103
VIMPAT.....55
see *lacosamide* 51, 52
see *lacosamide oral* 52
vinblastine sulfate 20
vincristine sulfate 20
vinorelbine tartrate 20
VIOKACE TAB 10440 90
VIOKACE TAB 20880 90

viorele 78
VIRACEPT 11
VIREAD.....11
see *tenofovir disoproxil fumarate*.....11
VITRAKVI.....26
VIVELLE-DOT.....80
see *dotti*.....79
see *estradiol*.....79
VIVIMUSTA.....16
VIVITROL.....68
VIVJOA 10
VIVOTIF CAP EC.....103
VIZIMPRO.....26
VOGELXO 69
VOGELXO PUMP 69
VONJO.....26
VOQUEZNA.....91
VOQUEZNA PAK DUAL PAK 90
VOQUEZNA PAK TRIP PK 90
VORANIGO.....26
voriconazole.....10
VORICONAZOLE 10
VOSEVI TAB.....13
VOTRIENT.....26
see *pazopanib hcl* 24
VOWST CAP 90
VOXZOGO.....84
VOYDEYA.....96
VOYDEYA TAB 50-100MG 96
VOYXACT.....92
VPRIV 84
VRAYLAR 49
VTAMA.....117
VUMERITY 66
VUSION OIN.....117
VYALEV INJ 12-240MG..46
VYEPTI 63
vyfemla.....78
VYKAT XR 84
VYKOURA 19
vylibra.....78
VYLOY 26
VYNDAMAX.....39
VYNDAQEL 39
VYSCOXA.....2
VYTORIN
see *ezetimibe-simvastatin tab 10-10 mg*.....34
see *ezetimibe-simvastatin tab 10-20 mg*.....34
see *ezetimibe-simvastatin tab 10-40 mg*.....34
see *ezetimibe-simvastatin tab 10-80 mg*.....34
VYTORIN TAB 10-10MG 34
VYTORIN TAB 10-20MG 34
VYTORIN TAB 10-40MG 34
VYTORIN TAB 10-80MG 34
VYVANSE 60
VYVGART.....101
VYVGART INJ HYTRULO 101
VYZULTA.....107

W

WAINUA.....64
WAKIX 68
warfarin sodium.....94
water for irrigation, sterile irrigation soln.....122
WAYRILZ.....96
WELCHOL 34
see *colesevelam hcl*....33
WELIREG 19
WELLBUTRIN SR.....45
see *bupropion hcl*.....42
WELLBUTRIN XL 45
see *bupropion hcl*.....42
wera 78
WESTAB PLUS TAB 27-1MG.....105
WINLEVI 116
WINREVAIR.....40
WINREVAIR INJ 45MG ..40
WINREVAIR INJ 60MG ..40
wixela inhub 114
wymzya fe.....78
WYOST.....75

X

XACDURO INJ 1-1GM.....9
XACIATO 92
XADAGO.....46
XALATAN.....107
see *latanoprost*.....107
XALKORI 26
XANAX.....41
see *alprazolam*.....40
XANAX XR.....41
see *alprazolam*.....40
xarah fe.....79
XARELTO 94
see *rivaroxaban*.....94
XARELTO STAR TAB 15/20MG.....94
XATMEP 100
XCOPRI 55
XCOPRI PAK 100-150....55
XCOPRI PAK 12.5-25.....55
XCOPRI PAK 150-200MG (MAINTENANCE).....56
XCOPRI PAK 150-200MG (TITRATION).....56
XCOPRI PAK 50-100MG 55
XDEMVY.....106
XELJANZ 100
XELJANZ XR 100
XELPROS.....107
xelria fe 79
XELSTRYM.....60
XEMBIFY 101
XENAZINE.....64
see *tetrabenazine*.....64
XENPOZYME 84
XEOMIN.....67
XERAVA 16
XERESE CRE 5-1% 122
XERMELO 90
XGEVA.....75
XHANCE.....112
XIFAXAN.....9, 90
XIFYRM 2
XIGDUO XR TAB 10-1000 72
XIGDUO XR TAB 10-500MG.....72

XIGDUO XR TAB 2.5-1000 72
XIGDUO XR TAB 5-1000MG....72
XIGDUO XR TAB 5-500MG 72
XIIDRA....108
XIPERE....107
XOFLUZA 13
XOLAIR....112
XOLREMDI 95
XOPENEX HFA 110
XOSPATA....26
XPOVIO PAK (100 MG ONCE WEEKLY)....26
XPOVIO PAK (40 MG ONCE WEEKLY)....26
XPOVIO PAK (40 MG TWICE WEEKLY)....26
XPOVIO PAK (60 MG ONCE WEEKLY)....26
XPOVIO PAK (60 MG TWICE WEEKLY)....26
XPOVIO PAK (80 MG ONCE WEEKLY)....26
XPOVIO PAK (80 MG TWICE WEEKLY)....26
XROMI 96
XTAMPZA ER....4
XTANDI....18
XTRENBO....75
xulane 79
XULTOPHY INJ 100/3.6 .74
XYLOCAINE 1
see *lidocaine hcl (local anesth.)*....1
XYLOCAINE-MPF....1
see *lidocaine hcl (local anesth.)*....1
XYOSTED....69
XYREM 68
see *sodium oxybate* 67
XYWAV SOL 0.5GM/ML .68
Y
yargesa 84
YASMIN 28
see *drospirenone-ethinyl estradiol tab 3-0.03 mg* 76
see *syeda*....78
see *zumandimine* 79
YASMIN 28 TAB 3-0.03MG 79
YAZ
see *drospirenone-ethinyl estradiol tab 3-0.02 mg* 76
see *jasmiel* 77
see *loryna*....77
see *nikki* 78
see *vestura*....78
YAZ TAB 3-0.02MG....79
YCANTH 122
YERVOY 26
YESINTEK 100
YF-VAX INJ....103
YIMMUGO 101
YONSA 18
YORVIPATH 75
YUPELRI....109
YUTIQ....107
YUTREPIA....40
yuvafem 80
Z
zafemy 79
zafirlukast....110
zaleplon....61
ZALTRAP....26
ZANAFLEX 67
see *tizanidine hcl*....67
ZARONTIN....56
see *ethosuximide* 51
ZARXIO....95
ZAVESCA 84
see *miglustat* 82
see *yargesa*....84
ZAVZPRET 63
ZEGALOGUE....81
ZEJULA....26
ZELAPAR....46
ZELBORAF 26
ZELSUVMI 122
zelvysia 84
ZEMAIRA....112
ZEMBRACE SYMTOUCH 63
ZEMDRI 9
ZEMPLAR....85
see *paricalcitol*....85
zenatane 116
ZENPEP CAP 10000UNT 90
ZENPEP CAP 15000UNT 90
ZENPEP CAP 20000UNT 90
ZENPEP CAP 25000UNT 90
ZENPEP CAP 3000UNIT90
ZENPEP CAP 40000UNT 90
ZENPEP CAP 5000UNIT90
ZENPEP CAP 60000UNT 90
zenzedi....60
ZEPOSIA 66
ZEPOSIA 7DAY CAP STR PACK....66
ZEPOSIA CAP STR KIT .66
ZEPZELCA 16
ZERBAXA INJ 1.5GM 14
ZERVIATE 107
ZESTORETIC
see *lisinopril & hydrochlorothiazide tab 10-12.5 mg*....27
see *lisinopril & hydrochlorothiazide tab 20-12.5 mg*....27
see *lisinopril & hydrochlorothiazide tab 20-25 mg*....27
ZESTORETIC TAB 10-12.5 28
ZESTORETIC TAB 20-12.5 28
ZESTORETIC TAB 20-25MG....28
ZESTRIL 28
see *lisinopril*....28
ZETIA....34
see *ezetimibe* 34

ZEVTERA 14
ZIAGEN.....11
see *abacavir sulfate* 10
ZIANA GEL 116
zidovudine.....11
ZIEXTENZO.....95
ZIIHERA.....26
ZILBRYSQ 101
zileuton.....111
ZILRETTA.....81
ZILXI 122
ZIOPTAN 107
see *tafluprost*.....107
ziprasidone hcl.....49
ziprasidone mesylate 49
ZIPSOR.....2
see *diclofenac potassium* 1
ZIRABEV.....26
ZIRGAN 106
ZITHROMAX.....14
see *azithromycin* 14
ZITHROMAX TRI-PAK....14
ZITHROMAX Z-PAK 14
ZITUVIMET TAB 50-1000 72
ZITUVIMET TAB 50-500MG.....72
ZITUVIMET XR TAB 100-1000 72
ZITUVIMET XR TAB 50-1000 72
ZITUVIMET XR TAB 50-500MG.....72
ZITUVIO.....72
ZOCOR.....33
see *simvastatin*.....33
ZOLADEX 18
zoledronic acid 75
ZOLEDRONIC ACID.....75
ZOLINZA.....27
zolmitriptan.....63
ZOLOFT.....45
see *sertraline hcl* 44
zolpidem tartrate 61
ZOLPIDEM TARTRATE..61
ZOMACTON 84
zomig 63
ZOMIG 63
see *zolmitriptan* 63
ZONALON.....122
ZONEGRAN.....56
see *zonisamide* 56
ZONISADE.....56
zonisamide.....56
ZORTRESS 102
see *everolimus (immunosuppressant)* 102
ZORYVE 117, 122
ZOSYN SOL 2-0.25GM ..15
ZOSYN SOL 3-0.375G ...15
ZOSYN SOL 4-0.50GM ..15
zovia 1/35.....79
ZOVIRAX 122
see *acyclovir topical* ..120
ZTALMY.....56
ZTLIDO 120
ZUBSOLV SUB 0.7-0.18.68
ZUBSOLV SUB 1.4-0.36.68
ZUBSOLV SUB 11.4-2.9.69
ZUBSOLV SUB 2.9-0.71.68
ZUBSOLV SUB 5.7-1.4...68
ZUBSOLV SUB 8.6-2.1...69
zumandimine.....79
ZUNVEYL 42
ZURNAI.....69
ZURZUVAE.....45
ZYCLARA PUMP 122
see *imiquimod* 121
see *imiquimod pump* .121
ZYDELIG.....27
ZYFLO 111
ZYKADIA.....27
ZYLET
see *loteprednol etabonate-tobramycin ophth susp 0.5-0.3%* 105
ZYLET SUS 0.5-0.3% ...105
ZYNLONTA.....27
ZYNYZ 27
ZYPITAMAG 33
ZYPREXA 49
see *olanzapine* 48
ZYPREXA RELPREVV ...50
ZYPREXA ZYDIS
see *olanzapine* 48
ZYTIGA 18
see *abiraterone acetate* 17
see *abirtega*.....17
ZYVOX.....9
see *linezolid*.....7

This page intentionally left blank.

SilverScript®
P.O. Box 30006, Pittsburgh, PA 15222-0330

MHBP SM

Participating health care providers are independent contractors and are neither agents nor employees of SilverScript. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

For mail-order, you can get prescription drugs shipped to your home through the network mail-order delivery program. Typically, mail-order drugs arrive within 10 days. If you do not receive your mail-order drugs within this timeframe, you can call 1-833-266-6958 (TTY users should call 711). Hours are 24 hours a day, 7 days a week. Members may have the option to sign-up for automated mail-order delivery. Specialty pharmacies fill high-cost specialty drugs that require special handling. Although specialty pharmacies may deliver covered medicines through the mail, they are not considered "mail-order pharmacies." Therefore, most specialty drugs are not available at the mail-order cost share.

See *Evidence of Coverage* for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area.

This formulary was updated on 04/24/2026. For more recent information or other questions, please contact Customer Care at 1-833-266-6958, 24 hours a day, 7 days a week. TTY users should call 711.

The formulary and/or pharmacy network may change at any time. You will receive notice when necessary.

04/24/2026