

EmblemHealth Small Group, Essential Plan, and Qualified Health Plan

2025 Formulary (List of Covered Drugs)

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

This formulary was updated on December 1, 2024. To reach member services, please call **877-793-6253** (TTY: **711**). Our hours are Monday to Friday from 8 a.m. to 6 p.m., and Saturday and Sunday from 10 a.m. to 1 p.m. A representative will be happy to help.



EmblemHealth Small Group, Essential Plan, and Qualified Health Plan

2025 Formulary (List of Covered Drugs)

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

Thank you for being an EmblemHealth member. This guide tells you about the list of covered drugs in your plan. This list is called a formulary. It is up to date as of December 1, 2024. Please note: This list may change over time, such as when:

- We add a new, less costly drug.
- We remove a drug that may no longer be as effective as other drugs.

Which drugs are included in the formulary?

Our list of covered drugs includes both brand-name drugs and generic drugs. The brand name is the name the drug company gave the drug. For example, the brand name of acetaminophen is Tylenol. Generic drugs are the low-cost version of the brand-name drug.

What if I don't see the drug I need?

If your doctor orders you a drug that is not listed in this formulary, please call **877-793-6253** (TTY: **711**). We can review your next steps. Our hours are Monday through Friday from 8 a.m. to 6 p.m., and Saturday and Sunday from 10 a.m. to 1 p.m. A representative will be happy to help.

How do I use the formulary?

You can look for your drug using the index. This starts on page 119. Or, if you already know what your drug is used for, look for the section name in the Table of Contents. Then look there for your drug.

Sections are based on what the drugs are used to treat. For example, drugs used for a heart condition are under "Cardiovascular, Hypertension & Lipids." The first column of the chart lists the drug name. Brand-name drugs are upper case (for example, SYNTHROID). Generic drugs are shown in lower-case italics (for example, *atenolol*).

This formulary will also tell you which tier your drug belongs in. The chart below shows you what each tier means.

| Tier | Explanation |
|--------|---|
| ACA | \$0 cost-share preventive drugs (there may be some limits on these drugs; see below). |
| Tier 1 | Generic |
| Tier 2 | Preferred brand |
| Tier 3 | Non-preferred brand |

What are generic drugs?

Generic drugs are the low-cost version of a brand-name drug. Generally, a pharmacist will fill the generic type of the drug your doctor ordered if it is available. This may happen **even if** your prescription is written for a brand-name drug.

If you want the brand-name drug, be sure your doctor tells the pharmacist to give you the brand-name drug. When this happens, you may have to pay the copay (the set amount you pay) for the generic drug, plus the cost difference between the brand-name drug and the generic.

Are there any limitations on my coverage?

A medicine listed in this guide does not mean we will pay for it. For example, some drugs may need prior authorization, or approval, for us to pay for them. In other cases, we may only pay for certain amounts or strengths. These drugs will have initials after their names. Below is a list of abbreviations that explains what the initials mean.

List of abbreviations and what these terms mean to you

PA: Prior Authorization. The plan requires you or your doctor to get approval before you fill your prescription. If you don't get approval, we may not cover the drug.

QL: Quantity Limit. For certain drugs, the plan limits the amount of the drug that we will cover.

ST: Step Therapy. In some cases, the 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, we will then cover Drug B.

ACA: Affordable Care Act. By law, there is no cost-sharing for certain preventive drugs if they are right for your age, condition, and the way the drug is being used.

LA: Limited Availability. You may only be able to get this drug at some drug stores.

You can ask us to make an exception to a restriction or limit on a drug. We can also give you a list of other, similar drugs that may work. Speak with your doctor about this first.

Disclaimer

Please see your Contract or Certificate of Coverage for plan details. It will tell you what is covered and how much you pay for your drugs. A drug being listed in this guide does not guarantee that we will pay for it. Some drugs may need approval (prior authorization) before we pay. For some drugs, we will only pay for certain doses and/or strengths. The drugs on this list may change based on a decision by EmblemHealth. As new generic drugs become available, the brand-name version will no longer be a preferred choice.

This is a list of the drugs that are prescribed most often for members that use the Small Group, Essential Plan, and Qualified Health Plan formularies.

To help keep your costs down, ask your doctor to prescribe generic drugs when possible.

NOTE: Not all drugs in this list are paid for by all drug benefit plans, so coverage is not guaranteed. Check your benefits for copay and any other requirements you may have under your plan. If you have other questions about your drug benefits, please call the phone number on the back of your ID card.

Can I get my prescriptions delivered to my home?

Our pharmacy benefit manager, Express Scripts, provides convenient home delivery by mail. Home delivery may save you money if you refill drugs every month and think you will be on the same drug(s) for six months or longer.

Home delivery is as safe as going to your local pharmacy. Express Scripts pharmacists check every order for accuracy and are available 24/7 to answer your questions. To compare costs and sign up for home delivery, visit **express-scripts.com** or call Express Scripts at **877-866-5798** (TTY: **711**).

How do I contact someone at EmblemHealth?

To reach member services:

Please call **877-793-6253** (TTY: **711**). Our hours are Monday to Friday from 8 a.m. to 6 p.m., and Saturday and Sunday from 10 a.m. to 1 p.m. A representative will be happy to help.



Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

English ATTENTION: If you speak another language, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call **877-411-3625** (TTY: **711**) or speak to your provider.

Español (Spanish) ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al **877-411-3625** (TTY: **711**) o hable con su proveedor.

中文 (Simplified Chinese) 注意: 如果您说[中文], 我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务, 以无障碍格式提供信息。致电 **877-411-3625** (文本电话: **711**) 或咨询您的服务提供商。

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Kreyòl Ayisyen (Haitian Creole) ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd aladispozisyon w gratis pou lang ou pale a. Èd ak sèvis siplemantè apwopriye pou bay enfòmasyon nan fòm aksèsib yo disponib gratis tou. Rele nan **877-411-3625** (TTY: **711**) oswa pale avèk founisè w la.

한국어 (Korean) 주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. **877-411-3625** (TTY: **711**) 번으로 전화하거나 서비스 제공업체에 문의하십시오.

Italiano (Italian) ATTENZIONE: se parli Italiano, sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari adeguati per fornire informazioni in formati accessibili. Chiama l' **877-411-3625** (tty: **711**) o parla con il tuo fornitore.

יידיש נאטיץ: אויב איר רעדט יידיש, שפראך הילף סערוויסעס זענען בארעכטיגט פאר דיר פריי. צונעמען אידס און באדינונגס פֿאר פראוויידינג אינפֿארמאציע אין צוטריטלעך פֿארמאטירונגען זענען אויך בנימצא פריי. רופן **877-411-3625** (TTY: **711**) אָדער רעדן מיט דיין טרעגער.

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POLSKI (Polish) UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer **877-411-3625** (TTY: **711**) lub porozmawiaj ze swoim dostawcą.

العربية (Arabic)

تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم **877-411-3625** (TTY: **711**) أو تحدث إلى مقدم الخدمة.

Français (French) ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le **877-411-3625** (TTY: **711**) ou parlez à votre fournisseur.

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Discrimination is Against the Law

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EmblemHealth does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

EmblemHealth:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters.
 - Written information in other formats (large print, audio, accessible electronic formats, and other formats).
- Provides free language assistance services to people whose primary language is not English, which may include:
 - Qualified interpreters.
 - Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services contact the Civil Rights Coordinator by calling Customer Service at **877-411-3625** (TTY: **711**).

If you believe that EmblemHealth has failed to provide these services or discriminated in another way based on race, color, national origin, age, disability, or sex, you can file a grievance with the Civil Rights Coordinator by writing to the EmblemHealth Grievance and Appeals Department, P.O. Box 2844, New York, NY 10116-2844; faxing them at **212-510-5320**; or calling Customer Service at **877-411-3625**. (Dial **711** for TTY services.) You can file a grievance in person, by mail, by fax, or through your secure member portal. If you need help filing a grievance, EmblemHealth's Grievance and Appeals Department is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf or by mail or phone at: **U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201; 800-368-1019** (TTY: **800-537-7697**).

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

This notice is available on EmblemHealth's website at emblemhealth.com/legal/nondiscrimination.

This Guidebook includes information accurate at the time it was collected from Express Scripts' systems and may not reflect actual benefit setup details at later times.

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| Drug Name | Drug Tier | Requirements / Limits |
|--|-----------|-----------------------|
| ANTI - INFECTIVES | | |
| ANTIFUNGAL AGENTS | | |
| ANCOBON ORAL CAPSULE | 3 | PA |
| BREXAFEMME ORAL TABLET | 3 | ST; QL |
| <i>clotrimazole mucous membrane troche</i> | 1 | |
| CRESEMBA ORAL CAPSULE | 2 | PA |
| DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML | 3 | |
| DIFLUCAN ORAL TABLET 100 MG, 200 MG | 3 | |
| <i>fluconazole oral suspension for reconstitution</i> | 1 | |
| <i>fluconazole oral tablet 100 mg, 50 mg</i> | 1 | |
| <i>fluconazole oral tablet 150 mg</i> | 1 | QL |
| <i>flucytosine oral capsule</i> | 1 | PA |
| <i>griseofulvin microsize oral suspension</i> | 1 | |
| <i>griseofulvin microsize oral tablet</i> | 1 | |
| <i>griseofulvin ultramicrosize oral tablet</i> | 1 | |
| <i>itraconazole oral capsule</i> | 1 | QL |
| <i>itraconazole oral solution</i> | 1 | QL |
| <i>ketoconazole oral tablet</i> | 1 | |
| NOXAFIL ORAL SUSP,DELAYED RELEASE FOR RECON | 2 | PA |
| NOXAFIL ORAL SUSPENSION | 3 | PA |
| <i>nystatin oral suspension</i> | 1 | |
| <i>nystatin oral tablet</i> | 1 | |
| ORAVIG BUCCAL MUCO-ADHESIVE BUCCAL TABLET | 3 | |
| <i>posaconazole oral suspension</i> | 1 | PA |
| <i>posaconazole oral tablet, delayed release (dr/ec)</i> | 1 | PA |
| SPORANOX ORAL CAPSULE | 3 | QL |
| SPORANOX ORAL SOLUTION | 3 | QL |
| <i>terbinafine hcl oral tablet</i> | 1 | |
| VFEND ORAL SUSPENSION FOR RECONSTITUTION | 3 | PA |
| VFEND ORAL TABLET | 3 | PA |
| VIVJOA ORAL CAPSULE | 3 | PA; QL |
| <i>voriconazole oral suspension for reconstitution</i> | 1 | PA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>voriconazole oral tablet</i> | 1 | PA |
| ANTIVIRALS | | |
| <i>abacavir oral solution</i> | 3 | |
| <i>abacavir oral tablet</i> | 3 | |
| <i>abacavir-lamivudine oral tablet</i> | 3 | |
| <i>acyclovir oral capsule</i> | 1 | |
| <i>acyclovir oral suspension 200 mg/5 ml</i> | 1 | |
| <i>acyclovir oral tablet</i> | 1 | |
| <i>adefovir oral tablet</i> | 1 | |
| <i>amantadine hcl oral capsule</i> | 1 | |
| <i>amantadine hcl oral solution</i> | 1 | |
| <i>amantadine hcl oral tablet</i> | 1 | |
| APRETUDE INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE | 3 | PA |
| APTIVUS ORAL CAPSULE | 3 | |
| <i>atazanavir oral capsule</i> | 3 | |
| BARACLUDE ORAL SOLUTION | 2 | |
| BEYFORTUS INTRAMUSCULAR SYRINGE | ACA | ACA |
| BIKTARVY ORAL TABLET | 3 | |
| CIMDUO ORAL TABLET | 3 | |
| <i>darunavir oral tablet</i> | 3 | |
| DESCOVY ORAL TABLET | 3 | |
| DOVATO ORAL TABLET | 3 | |
| EDURANT ORAL TABLET | 3 | |
| <i>efavirenz oral tablet</i> | 3 | |
| <i>efavirenz-emtricitabin-tenofof oral tablet</i> | 3 | |
| <i>efavirenz-lamivu-tenofof disop oral tablet</i> | 3 | |
| <i>emtricitabine oral capsule</i> | 3 | |
| <i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i> | 3 | |
| <i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i> | ACA | ACA |
| EMTRIVA ORAL CAPSULE | 3 | |
| EMTRIVA ORAL SOLUTION | 3 | |
| <i>entecavir oral tablet</i> | 1 | |
| EPCLUSA ORAL PELLETS IN PACKET | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| EPCLUSA ORAL TABLET | 3 | PA; LA; QL |
| EPIVIR ORAL SOLUTION | 3 | |
| EPIVIR ORAL TABLET | 3 | |
| <i>etravirine oral tablet</i> | 3 | |
| EVOTAZ ORAL TABLET | 3 | |
| <i>famciclovir oral tablet</i> | 1 | QL |
| FLUMADINE ORAL TABLET | 3 | |
| <i>fosamprenavir oral tablet</i> | 3 | |
| FUZEON SUBCUTANEOUS RECON SOLN | 3 | QL |
| GENVOYA ORAL TABLET | 3 | |
| HARVONI ORAL PELLETS IN PACKET | 3 | PA; LA; QL |
| HARVONI ORAL TABLET | 3 | PA; LA; QL |
| INTELENCE ORAL TABLET | 3 | |
| ISENTRESS HD ORAL TABLET | 3 | |
| ISENTRESS ORAL POWDER IN PACKET | 3 | |
| ISENTRESS ORAL TABLET | 3 | |
| ISENTRESS ORAL TABLET,CHEWABLE | 3 | |
| JULUCA ORAL TABLET | 3 | |
| KALETRA ORAL SOLUTION | 3 | |
| KALETRA ORAL TABLET | 3 | |
| LAGEVRIO (EUA) ORAL CAPSULE | 2 | QL |
| <i>lamivudine oral solution</i> | 3 | |
| <i>lamivudine oral tablet 100 mg</i> | 1 | |
| <i>lamivudine oral tablet 150 mg, 300 mg</i> | 3 | |
| <i>lamivudine-zidovudine oral tablet</i> | 3 | |
| LIVTENCITY ORAL TABLET | 3 | PA; QL |
| <i>lopinavir-ritonavir oral solution</i> | 3 | |
| <i>lopinavir-ritonavir oral tablet</i> | 3 | |
| <i>maraviroc oral tablet</i> | 3 | |
| <i>nevirapine oral suspension</i> | 3 | |
| <i>nevirapine oral tablet</i> | 3 | |
| <i>nevirapine oral tablet extended release 24 hr</i> | 3 | |
| NORVIR ORAL POWDER IN PACKET | 3 | |
| NORVIR ORAL TABLET | 3 | |
| ODEFSEY ORAL TABLET | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>oseltamivir oral capsule</i> | 1 | QL |
| <i>oseltamivir oral suspension for reconstitution</i> | 1 | QL |
| PAXLOVID ORAL TABLETS,DOSE PACK | 2 | QL |
| PREVYMIS ORAL TABLET | 2 | QL |
| PREZISTA ORAL SUSPENSION | 3 | |
| PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG | 3 | |
| RELENZA DISKHALER INHALATION BLISTER WITH DEVICE | 3 | QL |
| RETROVIR ORAL CAPSULE | 3 | |
| RETROVIR ORAL SYRUP | 3 | |
| REYATAZ ORAL CAPSULE 200 MG, 300 MG | 3 | |
| REYATAZ ORAL POWDER IN PACKET | 3 | |
| <i>rimantadine oral tablet</i> | 1 | |
| <i>ritonavir oral tablet</i> | 3 | |
| SELZENTRY ORAL SOLUTION | 3 | |
| SELZENTRY ORAL TABLET 150 MG, 300 MG | 3 | |
| SUNLENCA ORAL TABLET | 3 | PA |
| SUNLENCA SUBCUTANEOUS SOLUTION | 3 | PA |
| SYMFI LO ORAL TABLET | 3 | |
| SYMFI ORAL TABLET | 3 | |
| SYMTUZA ORAL TABLET | 3 | |
| SYNAGIS INTRAMUSCULAR SOLUTION | 3 | PA; LA |
| TAMIFLU ORAL CAPSULE | 3 | QL |
| TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION | 3 | QL |
| <i>tenofovir disoproxil fumarate oral tablet</i> | 3 | |
| TIVICAY ORAL TABLET 50 MG | 3 | |
| TIVICAY PD ORAL TABLET FOR SUSPENSION | 3 | |
| TRIUMEQ ORAL TABLET | 3 | |
| TRIUMEQ PD ORAL TABLET FOR SUSPENSION | 3 | |
| TYBOST ORAL TABLET | 3 | |
| <i>valacyclovir oral tablet</i> | 1 | QL |
| VALCYTE ORAL RECON SOLN | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| VALCYTE ORAL TABLET | 3 | |
| <i>valganciclovir oral recon soln</i> | 1 | |
| <i>valganciclovir oral tablet</i> | 1 | |
| VEMLIDY ORAL TABLET | 2 | |
| VIRACEPT ORAL TABLET | 3 | |
| VIREAD ORAL POWDER | 3 | |
| VIREAD ORAL TABLET | 3 | |
| VOSEVI ORAL TABLET | 3 | PA; LA; QL |
| XOFLUZA ORAL TABLET 40 MG, 80 MG | 3 | QL |
| ZEPATIER ORAL TABLET | 3 | PA; LA; QL |
| ZIAGEN ORAL SOLUTION | 3 | |
| <i>zidovudine oral capsule</i> | 3 | |
| <i>zidovudine oral syrup</i> | 3 | |
| <i>zidovudine oral tablet</i> | 3 | |
| CEPHALOSPORINS | | |
| <i>cefaclor oral capsule</i> | 1 | |
| <i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i> | 1 | |
| <i>cefaclor oral tablet extended release 12 hr</i> | 1 | |
| <i>cefadroxil oral capsule</i> | 1 | |
| <i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i> | 1 | |
| <i>cefadroxil oral tablet</i> | 1 | |
| <i>cefdinir oral capsule</i> | 1 | |
| <i>cefdinir oral suspension for reconstitution</i> | 1 | |
| <i>cefixime oral capsule</i> | 1 | |
| <i>cefixime oral suspension for reconstitution</i> | 1 | |
| <i>cefpodoxime oral suspension for reconstitution</i> | 1 | |
| <i>cefpodoxime oral tablet</i> | 1 | |
| <i>cefprozil oral suspension for reconstitution</i> | 1 | |
| <i>cefprozil oral tablet</i> | 1 | |
| <i>cefuroxime axetil oral tablet</i> | 1 | |
| <i>cephalexin oral capsule</i> | 1 | |
| <i>cephalexin oral suspension for reconstitution</i> | 1 | |
| <i>cephalexin oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| ERYTHROMYCINS & OTHER MACROLIDES | | |
| <i>azithromycin oral packet</i> | 1 | |
| <i>azithromycin oral suspension for reconstitution</i> | 1 | |
| <i>azithromycin oral tablet</i> | 1 | |
| <i>clarithromycin oral suspension for reconstitution</i> | 1 | |
| <i>clarithromycin oral tablet</i> | 1 | |
| <i>clarithromycin oral tablet extended release 24 hr</i> | 1 | |
| DIFICID ORAL SUSPENSION FOR RECONSTITUTION | 3 | QL |
| DIFICID ORAL TABLET | 3 | QL |
| <i>e.e.s. 400 oral tablet</i> | 1 | |
| E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION | 3 | |
| ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION | 3 | |
| ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION | 3 | |
| <i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i> | 1 | |
| ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG | 3 | |
| <i>erythrocin (as stearate) oral tablet 250 mg</i> | 1 | |
| <i>erythromycin ethylsuccinate oral suspension for reconstitution</i> | 1 | |
| <i>erythromycin ethylsuccinate oral tablet</i> | 1 | |
| <i>erythromycin oral capsule, delayed release (dr/ec)</i> | 1 | |
| <i>erythromycin oral tablet</i> | 1 | |
| <i>erythromycin oral tablet, delayed release (dr/ec)</i> | 1 | |
| ZITHROMAX ORAL PACKET | 3 | |
| ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION | 3 | |
| ZITHROMAX ORAL TABLET 250 MG, 500 MG | 3 | |
| ZITHROMAX TRI-PAK ORAL TABLET | 3 | |
| ZITHROMAX Z-PAK ORAL TABLET | 3 | |
| MISCELLANEOUS ANTIINFECTIVES | | |
| AEMCOLO ORAL TABLET, DELAYED RELEASE (DR/EC) | 3 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>albendazole oral tablet</i> | 1 | QL |
| ALINIA ORAL SUSPENSION FOR RECONSTITUTION | 2 | QL |
| ARAKODA ORAL TABLET | 3 | QL |
| ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION | 3 | PA; LA |
| <i>atovaquone oral suspension</i> | 1 | |
| <i>atovaquone-proguanil oral tablet</i> | 1 | QL |
| BENZNIDAZOLE ORAL TABLET | 2 | QL |
| BETHKIS INHALATION SOLUTION FOR NEBULIZATION | 3 | PA; LA; QL |
| BILTRICIDE ORAL TABLET | 3 | |
| CAYSTON INHALATION SOLUTION FOR NEBULIZATION | 3 | PA; LA; QL |
| <i>chloroquine phosphate oral tablet</i> | 1 | |
| CLEOCIN HCL ORAL CAPSULE | 3 | |
| CLEOCIN PEDIATRIC ORAL RECON SOLN | 3 | |
| <i>clindamycin hcl oral capsule</i> | 1 | |
| <i>clindamycin pediatric oral recon soln</i> | 1 | |
| COARTEM ORAL TABLET | 2 | QL |
| <i>cycloserine oral capsule</i> | 1 | |
| <i>dapsone oral tablet</i> | 1 | |
| DARAPRIM ORAL TABLET | 3 | PA |
| EMVERM ORAL TABLET,CHEWABLE | 2 | QL |
| <i>ethambutol oral tablet</i> | 1 | |
| FLAGYL ORAL CAPSULE | 3 | |
| HUMATIN ORAL CAPSULE | 3 | LA |
| <i>hydroxychloroquine oral tablet</i> | 1 | |
| IMPAVIDO ORAL CAPSULE | 2 | PA; QL |
| <i>isoniazid oral solution</i> | 1 | |
| <i>isoniazid oral tablet</i> | 1 | |
| <i>ivermectin oral tablet</i> | 1 | PA; QL |
| KITABIS PAK INHALATION SOLUTION FOR NEBULIZATION | 3 | PA; LA; QL |
| KRINTAFEL ORAL TABLET | 3 | QL |
| <i>linezolid oral suspension for reconstitution</i> | 1 | PA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>linezolid oral tablet</i> | 1 | PA |
| MALARONE ORAL TABLET | 3 | QL |
| MALARONE PEDIATRIC ORAL TABLET | 3 | QL |
| <i>mefloquine oral tablet</i> | 1 | QL |
| MEPRON ORAL SUSPENSION | 3 | |
| <i>metronidazole oral capsule</i> | 1 | |
| <i>metronidazole oral tablet</i> | 1 | |
| MYCOBUTIN ORAL CAPSULE | 3 | |
| NEBUPENT INHALATION RECON SOLN | 3 | QL |
| <i>neomycin oral tablet</i> | 1 | |
| <i>nitazoxanide oral tablet</i> | 1 | QL |
| <i>paromomycin oral capsule</i> | 1 | |
| PASER ORAL GRANULES DR FOR SUSP IN PACKET | 3 | |
| <i>pentamidine inhalation recon soln</i> | 1 | QL |
| <i>praziquantel oral tablet</i> | 1 | |
| PRETOMANID ORAL TABLET | 3 | PA |
| PRIFTIN ORAL TABLET | 2 | |
| <i>primaquine oral tablet</i> | 1 | QL |
| <i>pyrazinamide oral tablet</i> | 1 | |
| <i>pyrimethamine oral tablet</i> | 1 | PA |
| QUALAQUIN ORAL CAPSULE | 3 | QL |
| <i>quinine sulfate oral capsule</i> | 1 | QL |
| <i>rifabutin oral capsule</i> | 1 | |
| <i>rifampin oral capsule</i> | 1 | |
| SIRTURO ORAL TABLET | 2 | PA; LA |
| STROMECTOL ORAL TABLET | 3 | PA; QL |
| <i>tinidazole oral tablet</i> | 1 | QL |
| TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE | 3 | PA; LA; QL |
| <i>tobramycin in 0.225 % nacl inhalation solution for nebulization</i> | 3 | PA; LA; QL |
| <i>tobramycin inhalation solution for nebulization</i> | 3 | PA; LA; QL |
| TOBRAMYCIN WITH NEBULIZER INHALATION SOLUTION FOR NEBULIZATION | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| TRECTOR ORAL TABLET | 3 | |
| XENLETA ORAL TABLET | 3 | |
| XIFAXAN ORAL TABLET | 2 | PA; QL |
| ZYVOX ORAL SUSPENSION FOR RECONSTITUTION | 3 | PA |
| ZYVOX ORAL TABLET | 3 | PA |
| PENICILLINS | | |
| <i>amoxicillin oral capsule</i> | 1 | |
| <i>amoxicillin oral suspension for reconstitution</i> | 1 | |
| <i>amoxicillin oral tablet</i> | 1 | |
| <i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i> | 1 | |
| <i>amoxicillin-pot clavulanate oral suspension for reconstitution</i> | 1 | |
| <i>amoxicillin-pot clavulanate oral tablet</i> | 1 | |
| <i>amoxicillin-pot clavulanate oral tablet extended release 12 hr</i> | 1 | |
| <i>amoxicillin-pot clavulanate oral tablet, chewable</i> | 1 | |
| <i>ampicillin oral capsule 500 mg</i> | 1 | |
| AUGMENTIN ES-600 ORAL SUSPENSION FOR RECONSTITUTION | 3 | |
| AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML | 2 | |
| AUGMENTIN XR ORAL TABLET EXTENDED RELEASE 12 HR | 3 | |
| <i>dicloxacillin oral capsule</i> | 1 | |
| MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR | 3 | |
| <i>penicillin v potassium oral recon soln</i> | 1 | |
| <i>penicillin v potassium oral tablet</i> | 1 | |
| QUINOLONES | | |
| BAXDELA ORAL TABLET | 2 | QL |
| CIPRO ORAL SUSPENSION, MICROCAPSULE RECON | 3 | |
| CIPRO ORAL TABLET 250 MG, 500 MG | 3 | |
| <i>ciprofloxacin hcl oral tablet</i> | 1 | |
| <i>ciprofloxacin oral suspension, microcapsule recon</i> | 1 | |
| FACTIVE ORAL TABLET | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>levofloxacin oral solution</i> | 1 | |
| <i>levofloxacin oral tablet 250 mg</i> | 1 | |
| <i>moxifloxacin oral tablet</i> | 1 | |
| <i>ofloxacin oral tablet 300 mg, 400 mg</i> | 1 | |
| SULFA'S & RELATED AGENTS | | |
| BACTRIM DS ORAL TABLET | 3 | |
| BACTRIM ORAL TABLET | 3 | |
| <i>sulfadiazine oral tablet</i> | 1 | |
| <i>sulfamethoxazole-trimethoprim intravenous solution</i> | 1 | PA |
| <i>sulfamethoxazole-trimethoprim oral suspension</i> | 1 | |
| <i>sulfamethoxazole-trimethoprim oral tablet</i> | 1 | |
| <i>sulfatrim oral suspension</i> | 1 | |
| TETRACYCLINES | | |
| ACTICLATE ORAL TABLET | 3 | ST |
| AVIDOXY DK KIT | 3 | ST |
| <i>avidoxy oral tablet</i> | 1 | |
| <i>demeclocycline oral tablet</i> | 1 | |
| <i>doxycycline hyclate oral capsule</i> | 1 | |
| <i>doxycycline hyclate oral tablet 100 mg, 20 mg</i> | 1 | |
| <i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i> | 1 | ST |
| <i>doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 50 mg, 75 mg</i> | 1 | ST |
| <i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i> | 1 | |
| <i>doxycycline monohydrate oral capsule 150 mg</i> | 1 | ST |
| <i>doxycycline monohydrate oral capsule, ir - delay rel, biphasic</i> | 1 | ST |
| <i>doxycycline monohydrate oral suspension for reconstitution</i> | 1 | |
| <i>doxycycline monohydrate oral tablet</i> | 1 | |
| <i>minocycline oral capsule</i> | 1 | |
| <i>minocycline oral tablet</i> | 1 | |
| <i>minocycline oral tablet extended release 24 hr</i> | 1 | ST |
| <i>mondoxylene nl oral capsule</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| MONODOX ORAL CAPSULE | 3 | ST |
| MORGIDOX 1X 50 KIT | 3 | ST |
| MORGIDOX 1X100 KIT | 3 | ST |
| NUZYRA ORAL TABLET | 3 | QL |
| SEYSARA ORAL TABLET | 3 | ST |
| TARGADOX ORAL TABLET | 3 | ST |
| <i>tetracycline oral capsule</i> | 1 | |
| <i>tetracycline oral tablet</i> | 1 | ST |
| VIBRAMYCIN ORAL CAPSULE 100 MG | 3 | ST |
| URINARY TRACT AGENTS | | |
| <i>fosfomycin tromethamine oral packet</i> | 1 | |
| FURADANTIN ORAL SUSPENSION | 3 | |
| MACROBID ORAL CAPSULE | 3 | |
| <i>methenamine hippurate oral tablet</i> | 1 | |
| <i>methenamine mandelate oral tablet</i> | 1 | |
| <i>nitrofurantoin macrocrystal oral capsule</i> | 1 | |
| <i>nitrofurantoin monohyd/m-cryst oral capsule</i> | 1 | |
| <i>nitrofurantoin oral suspension 25 mg/5 ml</i> | 1 | |
| PRIMSOL ORAL SOLUTION | 3 | |
| <i>trimethoprim oral tablet</i> | 1 | |
| VANCOMYCIN | | |
| VANCOGIN ORAL CAPSULE | 3 | PA; QL |
| <i>vancomycin oral capsule</i> | 1 | PA; QL |
| <i>vancomycin oral recon soln</i> | 1 | QL |
| ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS | | |
| ADJUNCTIVE AGENTS | | |
| <i>leucovorin calcium oral tablet</i> | 1 | QL |
| MESNEX ORAL TABLET | 2 | QL |
| VISTOGARD ORAL GRANULES IN PACKET | 3 | PA; QL |
| ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS | | |
| <i>abiraterone oral tablet</i> | 3 | PA; LA; QL |
| ALECENSA ORAL CAPSULE | 3 | PA; LA; QL |
| ALKERAN ORAL TABLET | 3 | QL |
| ALUNBRIG ORAL TABLET | 3 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| ALUNBRIG ORAL TABLETS,DOSE PACK | 3 | PA; QL |
| <i>anastrozole oral tablet</i> | 1 | QL |
| AROMASIN ORAL TABLET | 3 | QL |
| ASTAGRAF XL ORAL CAPSULE,EXTENDED RELEASE 24HR | 3 | ST |
| AUGTYRO ORAL CAPSULE 40 MG | 3 | PA; LA; QL |
| AYVAKIT ORAL TABLET | 3 | PA; LA; QL |
| AZASAN ORAL TABLET | 3 | |
| <i>azathioprine oral tablet</i> | 3 | |
| BALVERSA ORAL TABLET | 3 | PA; LA; QL |
| <i>bexarotene oral capsule</i> | 3 | PA; LA; QL |
| <i>bexarotene topical gel</i> | 3 | PA; LA; QL |
| <i>bicalutamide oral tablet</i> | 1 | QL |
| BORTEZOMIB INJECTION RECON SOLN 1 MG, 2.5 MG | 3 | PA; LA; QL |
| BOSULIF ORAL CAPSULE | 3 | PA; LA; QL |
| BOSULIF ORAL TABLET | 3 | PA; LA; QL |
| BRAFTOVI ORAL CAPSULE | 3 | LA; QL |
| BRUKINSA ORAL CAPSULE | 3 | PA; LA; QL |
| CABOMETYX ORAL TABLET | 3 | PA; LA; QL |
| CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET | 3 | PA; LA; QL |
| <i>capecitabine oral tablet</i> | 3 | PA; LA; QL |
| CAPRELSA ORAL TABLET | 3 | PA; LA; QL |
| CASODEX ORAL TABLET | 3 | QL |
| CELLCEPT ORAL CAPSULE | 3 | |
| CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION | 3 | |
| CELLCEPT ORAL TABLET | 3 | |
| COMETRIQ ORAL CAPSULE | 3 | PA; LA; QL |
| COPIKTRA ORAL CAPSULE | 3 | PA; LA; QL |
| COTELLIC ORAL TABLET | 3 | LA; QL |
| <i>cyclophosphamide oral capsule</i> | 1 | QL |
| CYCLOPHOSPHAMIDE ORAL TABLET | 3 | QL |
| <i>cyclosporine modified oral capsule</i> | 3 | |
| <i>cyclosporine modified oral solution</i> | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>cyclosporine oral capsule</i> | 3 | |
| <i>dasatinib oral tablet</i> | 3 | PA; LA; QL |
| DAURISMO ORAL TABLET | 3 | PA; LA; QL |
| DROXIA ORAL CAPSULE | 2 | |
| ENSPRYNG SUBCUTANEOUS SYRINGE | 3 | PA; LA |
| ERIVEDGE ORAL CAPSULE | 3 | PA; LA; QL |
| ERLEADA ORAL TABLET | 3 | PA; LA; QL |
| <i>erlotinib oral tablet</i> | 3 | PA; LA; QL |
| ERWINASE INJECTION RECON SOLN | 3 | PA; QL |
| <i>etoposide oral capsule</i> | 1 | QL |
| EULEXIN ORAL CAPSULE | 3 | QL |
| <i>everolimus (antineoplastic) oral tablet</i> | 3 | PA; LA; QL |
| <i>everolimus (antineoplastic) oral tablet for suspension</i> | 3 | PA; LA; QL |
| <i>everolimus (immunosuppressive) oral tablet</i> | 3 | |
| <i>exemestane oral tablet</i> | 1 | QL |
| FARESTON ORAL TABLET | 3 | QL |
| FEMARA ORAL TABLET | 3 | QL |
| GAVRETO ORAL CAPSULE | 3 | PA; LA; QL |
| <i>gefitinib oral tablet</i> | 3 | PA; LA; QL |
| <i>gengraf oral capsule</i> | 3 | |
| <i>gengraf oral solution</i> | 3 | |
| GILOTRIF ORAL TABLET | 3 | PA; LA; QL |
| GLEOSTINE ORAL CAPSULE | 2 | QL |
| HYCAMTIN ORAL CAPSULE | 3 | PA; LA; QL |
| HYDREA ORAL CAPSULE | 3 | QL |
| <i>hydroxyurea oral capsule</i> | 1 | QL |
| IBRANCE ORAL CAPSULE | 3 | PA; LA; QL |
| IBRANCE ORAL TABLET | 3 | PA; LA; QL |
| ICLUSIG ORAL TABLET | 3 | PA; QL |
| IDHIFA ORAL TABLET | 3 | PA; LA; QL |
| <i>imatinib oral tablet</i> | 3 | PA; LA; QL |
| IMBRUVICA ORAL CAPSULE | 3 | PA; QL |
| IMBRUVICA ORAL SUSPENSION | 3 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG | 3 | PA; QL |
| IMDELLTRA INTRAVENOUS RECON SOLN | 3 | PA; QL |
| IMURAN ORAL TABLET | 3 | |
| INLYTA ORAL TABLET | 3 | PA; LA; QL |
| IRESSA ORAL TABLET | 3 | PA; LA; QL |
| IWILFIN ORAL TABLET | 3 | PA; LA; QL |
| JAKAFI ORAL TABLET | 3 | PA; LA; QL |
| <i>kemoplast intravenous solution</i> | 1 | QL |
| KISQALI ORAL TABLET | 3 | PA; LA; QL |
| KOSELUGO ORAL CAPSULE | 3 | PA; QL |
| <i>lapatinib oral tablet</i> | 3 | PA; LA; QL |
| LAZCLUZE ORAL TABLET | 3 | PA; QL |
| <i>lenalidomide oral capsule</i> | 3 | PA; LA; QL |
| LENVIMA ORAL CAPSULE | 3 | PA; LA; QL |
| <i>letrozole oral tablet</i> | 1 | QL |
| LEUKERAN ORAL TABLET | 2 | QL |
| <i>leuprolide subcutaneous kit</i> | 3 | PA; LA; QL |
| LONSURF ORAL TABLET | 3 | PA; LA; QL |
| LORBRENA ORAL TABLET | 3 | PA; LA; QL |
| LUMAKRAS ORAL TABLET 120 MG, 320 MG | 3 | PA; LA; QL |
| LUPKYNIS ORAL CAPSULE | 3 | PA; QL |
| LYNPARZA ORAL TABLET | 3 | PA; LA; QL |
| LYSODREN ORAL TABLET | 3 | QL |
| LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3), 16 MG/DAY (4 MG X 4), 20 MG/DAY (4 MG X 5) | 3 | PA; LA; QL |
| MATULANE ORAL CAPSULE | 3 | QL |
| <i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i> | 1 | |
| <i>megestrol oral tablet</i> | 1 | |
| MEKINIST ORAL RECON SOLN | 3 | LA; QL |
| MEKINIST ORAL TABLET | 3 | LA; QL |
| MEKTOVI ORAL TABLET | 3 | LA; QL |
| <i>mercaptopurine oral tablet</i> | 1 | QL |
| <i>methotrexate sodium oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| MYCAPSSA ORAL CAPSULE,DELAYED RELEASE(DR/EC) | 3 | PA; LA; QL |
| <i>mycophenolate mofetil oral capsule</i> | 3 | |
| <i>mycophenolate mofetil oral suspension for reconstitution</i> | 3 | |
| <i>mycophenolate mofetil oral tablet</i> | 3 | |
| <i>mycophenolate sodium oral tablet, delayed release (dr/ec)</i> | 3 | |
| MYFORTIC ORAL TABLET,DELAYED RELEASE (DR/EC) | 3 | |
| MYHIBBIN ORAL SUSPENSION | 3 | |
| MYLERAN ORAL TABLET | 2 | QL |
| NEORAL ORAL CAPSULE | 3 | |
| NEORAL ORAL SOLUTION | 3 | |
| NERLYNX ORAL TABLET | 3 | PA; LA; QL |
| NEXAVAR ORAL TABLET | 3 | PA; LA; QL |
| NILANDRON ORAL TABLET | 3 | PA; QL |
| <i>nilutamide oral tablet</i> | 1 | PA; QL |
| NINLARO ORAL CAPSULE | 3 | PA; LA; QL |
| NUBEQA ORAL TABLET | 3 | PA; LA; QL |
| <i>octreotide acetate injection solution</i> | 3 | PA; LA |
| <i>octreotide acetate injection syringe</i> | 3 | PA; LA |
| <i>octreotide, microspheres intramuscular suspension, extended rel recon</i> | 3 | PA; LA; QL |
| ODOMZO ORAL CAPSULE | 3 | PA; LA; QL |
| OGSIVEO ORAL TABLET | 3 | PA; QL |
| OJEMDA ORAL SUSPENSION FOR RECONSTITUTION | 3 | PA; QL |
| OJEMDA ORAL TABLET | 3 | PA; QL |
| ORGOVYX ORAL TABLET | 3 | PA; LA; QL |
| ORSERDU ORAL TABLET | 3 | PA; QL |
| <i>paraplatin intravenous solution</i> | 1 | QL |
| <i>pazopanib oral tablet</i> | 3 | LA; QL |
| PEMAZYRE ORAL TABLET | 3 | PA; LA; QL |
| PIQRAY ORAL TABLET | 3 | PA; LA; QL |
| POMALYST ORAL CAPSULE | 3 | PA; LA; QL |
| PROGRAF ORAL CAPSULE | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| PROGRAF ORAL GRANULES IN PACKET | 3 | |
| PURIXAN ORAL SUSPENSION | 3 | QL |
| RETEVMO ORAL TABLET | 3 | PA; LA; QL |
| REVLIMID ORAL CAPSULE | 3 | PA; LA; QL |
| REZUROCK ORAL TABLET | 3 | PA; QL |
| ROZLYTREK ORAL CAPSULE | 3 | PA; LA; QL |
| ROZLYTREK ORAL PELLETS IN PACKET | 3 | PA; LA; QL |
| RYDAPT ORAL CAPSULE | 3 | PA; LA; QL |
| RYLAZE INTRAMUSCULAR SOLUTION | 3 | PA; QL |
| SANDIMMUNE ORAL CAPSULE | 3 | |
| SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML | 3 | PA; LA |
| SCSEMBLIX ORAL TABLET | 3 | PA; QL |
| SIGNIFOR SUBCUTANEOUS SOLUTION | 3 | PA |
| <i>sirolimus oral solution</i> | 3 | |
| <i>sirolimus oral tablet</i> | 3 | |
| SOLTAMOX ORAL SOLUTION | 3 | QL |
| <i>sorafenib oral tablet</i> | 3 | PA; LA; QL |
| SPRYCEL ORAL TABLET | 3 | PA; LA; QL |
| STIVARGA ORAL TABLET | 3 | PA; LA; QL |
| <i>sunitinib malate oral capsule</i> | 3 | PA; LA; QL |
| SUTENT ORAL CAPSULE | 3 | PA; LA; QL |
| TABLOID ORAL TABLET | 3 | QL |
| TABRECTA ORAL TABLET | 3 | PA; LA; QL |
| <i>tacrolimus oral capsule</i> | 3 | |
| TAFINLAR ORAL CAPSULE | 3 | LA; QL |
| TAFINLAR ORAL TABLET FOR SUSPENSION | 3 | LA; QL |
| TAGRISSO ORAL TABLET | 3 | PA; LA; QL |
| TALZENNA ORAL CAPSULE | 3 | PA; LA; QL |
| <i>tamoxifen oral tablet</i> | 1 | QL |
| TARCEVA ORAL TABLET 100 MG | 3 | PA; LA; QL |
| TARGRETIN TOPICAL GEL | 3 | PA; LA; QL |
| TASIGNA ORAL CAPSULE | 3 | PA; LA; QL |
| TAZVERIK ORAL TABLET | 3 | PA; LA; QL |
| TECELRA INTRAVENOUS SUSPENSION | 3 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>temozolomide oral capsule</i> | 3 | PA; LA; QL |
| TEVIMBRA INTRAVENOUS SOLUTION | 3 | PA; QL |
| THALOMID ORAL CAPSULE 100 MG, 50 MG | 3 | PA; LA; QL |
| TIBSOVO ORAL TABLET | 3 | PA; QL |
| <i>toremifene oral tablet</i> | 1 | QL |
| <i>torpenz oral tablet</i> | 3 | PA; QL |
| <i>tretinoin (antineoplastic) oral capsule</i> | 1 | QL |
| TREXALL ORAL TABLET | 3 | |
| TRUQAP ORAL TABLET | 3 | PA; QL |
| TUKYSA ORAL TABLET | 3 | PA; LA; QL |
| TURALIO ORAL CAPSULE 125 MG | 3 | PA; LA; QL |
| TYKERB ORAL TABLET | 3 | PA; LA; QL |
| VENCLEXTA ORAL TABLET | 3 | PA; LA; QL |
| VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK | 3 | PA; QL |
| VERZENIO ORAL TABLET | 3 | PA; LA; QL |
| VIJOICE ORAL GRANULES IN PACKET | 3 | PA; QL |
| VIJOICE ORAL TABLET | 3 | PA; QL |
| VITRAKVI ORAL CAPSULE | 3 | PA; LA; QL |
| VITRAKVI ORAL SOLUTION | 3 | PA; LA; QL |
| VIZIMPRO ORAL TABLET | 3 | PA; LA; QL |
| VONJO ORAL CAPSULE | 3 | PA; QL |
| VORANIGO ORAL TABLET | 3 | PA; QL |
| VOTRIENT ORAL TABLET | 3 | PA; LA; QL |
| WELIREG ORAL TABLET | 3 | PA; LA; QL |
| XALKORI ORAL CAPSULE | 3 | PA; LA; QL |
| XALKORI ORAL PELLET | 3 | PA; LA; QL |
| XELODA ORAL TABLET | 3 | PA; LA; QL |
| XERMELO ORAL TABLET | 3 | PA; LA; QL |
| XOSPATA ORAL TABLET | 3 | PA; LA; QL |
| XTANDI ORAL CAPSULE | 3 | PA; LA; QL |
| XTANDI ORAL TABLET | 3 | PA; LA; QL |
| YONSA ORAL TABLET | 3 | PA; LA; QL |
| ZELBORAF ORAL TABLET | 3 | LA; QL |
| ZOLINZA ORAL CAPSULE | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|----------------------|-----------|-----------------------|
| ZORTRESS ORAL TABLET | 3 | |
| ZYDELIG ORAL TABLET | 3 | PA; LA; QL |
| ZYKADIA ORAL TABLET | 3 | PA; LA; QL |

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

| | | |
|---|---|----|
| APTIOM ORAL TABLET | 3 | |
| BRIVIACT ORAL SOLUTION | 3 | ST |
| BRIVIACT ORAL TABLET | 3 | ST |
| <i>carbamazepine oral capsule, er multiphase 12 hr</i> | 1 | |
| <i>carbamazepine oral suspension 100 mg/5 ml</i> | 1 | |
| <i>carbamazepine oral tablet</i> | 1 | |
| <i>carbamazepine oral tablet extended release 12 hr</i> | 1 | |
| <i>carbamazepine oral tablet, chewable 100 mg</i> | 1 | |
| CARBAMAZEPINE ORAL TABLET, CHEWABLE 200 MG | 3 | |
| CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR | 3 | |
| CELONTIN ORAL CAPSULE 300 MG | 3 | |
| <i>clobazam oral suspension</i> | 1 | PA |
| <i>clobazam oral tablet</i> | 1 | PA |
| <i>clonazepam oral tablet</i> | 1 | |
| <i>clonazepam oral tablet, disintegrating</i> | 1 | |
| DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR | 3 | ST |
| DEPAKOTE ORAL TABLET, DELAYED RELEASE (DR/EC) | 3 | ST |
| DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE | 3 | ST |
| DIACOMIT ORAL CAPSULE | 3 | PA |
| DIACOMIT ORAL POWDER IN PACKET | 3 | PA |
| <i>diazepam rectal kit</i> | 1 | |
| DILANTIN EXTENDED ORAL CAPSULE | 3 | |
| DILANTIN INFATABS ORAL TABLET, CHEWABLE | 3 | |
| DILANTIN ORAL CAPSULE | 2 | |
| DILANTIN-125 ORAL SUSPENSION | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>divalproex oral capsule, delayed rel sprinkle</i> | 1 | |
| <i>divalproex oral tablet extended release 24 hr</i> | 1 | |
| <i>divalproex oral tablet, delayed release (dr/ec)</i> | 1 | |
| ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HR | 3 | ST |
| EPIDIOLEX ORAL SOLUTION | 3 | PA; LA |
| <i>epitol oral tablet</i> | 1 | |
| EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR | 3 | |
| <i>ethosuximide oral capsule</i> | 1 | |
| <i>ethosuximide oral solution</i> | 1 | |
| <i>felbamate oral suspension</i> | 1 | |
| <i>felbamate oral tablet</i> | 1 | |
| FELBATOL ORAL TABLET | 3 | |
| FYCOMPA ORAL SUSPENSION | 2 | |
| FYCOMPA ORAL TABLET | 2 | |
| <i>gabapentin oral capsule</i> | 1 | |
| <i>gabapentin oral solution 250 mg/5 ml</i> | 1 | |
| <i>gabapentin oral tablet 600 mg, 800 mg</i> | 1 | |
| <i>gabapentin oral tablet extended release 24 hr</i> | 1 | ST |
| GRALISE ORAL TABLET EXTENDED RELEASE 24 HR | 3 | ST |
| <i>lacosamide oral solution</i> | 1 | |
| <i>lacosamide oral tablet</i> | 1 | |
| LAMICTAL XR STARTER ORAL TABLET EXTENDED REL,DOSE PACK 25 MG (21) -50 MG (7), 25MG (14)-50 MG (14)-100MG (7), 50 MG(14)-100MG (14)-200 MG (7) | 3 | ST |
| <i>lamotrigine oral tablet</i> | 1 | |
| <i>lamotrigine oral tablet disintegrating, dose pk</i> | 1 | |
| <i>lamotrigine oral tablet extended release 24hr</i> | 1 | |
| <i>lamotrigine oral tablet, chewable dispersible</i> | 1 | |
| <i>lamotrigine oral tablet, disintegrating</i> | 1 | |
| <i>lamotrigine oral tablets, dose pack</i> | 1 | |
| <i>levetiracetam oral solution</i> | 1 | |
| <i>levetiracetam oral tablet</i> | 1 | |
| <i>levetiracetam oral tablet extended release 24 hr</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>methsuximide oral capsule</i> | 1 | |
| MYSOLINE ORAL TABLET | 3 | |
| NAYZILAM NASAL SPRAY, NON-AEROSOL | 2 | PA; QL |
| <i>oxcarbazepine oral suspension</i> | 1 | |
| <i>oxcarbazepine oral tablet</i> | 1 | |
| <i>oxcarbazepine oral tablet extended release 24 hr</i> | 1 | |
| OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR | 3 | ST |
| <i>phenobarbital oral elixir</i> | 1 | |
| <i>phenobarbital oral tablet</i> | 1 | |
| PHENYTEK ORAL CAPSULE | 3 | |
| <i>phenytoin oral suspension 125 mg/5 ml</i> | 1 | |
| <i>phenytoin oral tablet, chewable</i> | 1 | |
| <i>phenytoin sodium extended oral capsule</i> | 1 | |
| <i>pregabalin oral capsule</i> | 1 | |
| <i>pregabalin oral solution</i> | 1 | |
| <i>pregabalin oral tablet extended release 24 hr</i> | 1 | ST |
| <i>primidone oral tablet 250 mg, 50 mg</i> | 1 | |
| QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR | 3 | ST |
| <i>roweepira oral tablet 500 mg</i> | 1 | |
| <i>rufinamide oral suspension</i> | 1 | PA |
| <i>rufinamide oral tablet</i> | 1 | PA |
| SPRITAM ORAL TABLET FOR SUSPENSION | 3 | ST |
| <i>subvenite oral tablet</i> | 1 | |
| <i>subvenite starter (blue) kit oral tablets, dose pack</i> | 1 | |
| <i>subvenite starter (green) kit oral tablets, dose pack</i> | 1 | |
| <i>subvenite starter (orange) kit oral tablets, dose pack</i> | 1 | |
| SYMPAZAN ORAL FILM | 3 | PA |
| TEGRETOL ORAL SUSPENSION | 3 | |
| TEGRETOL ORAL TABLET | 3 | |
| TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR | 3 | |
| <i>tiagabine oral tablet</i> | 1 | |
| <i>topiramate oral capsule, sprinkle</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>topiramate oral capsule,extended release 24hr</i> | 1 | ST |
| <i>topiramate oral capsule,sprinkle,er 24hr</i> | 1 | ST |
| <i>topiramate oral tablet</i> | 1 | |
| TROKENDI XR ORAL CAPSULE,EXTENDED RELEASE 24HR | 3 | ST |
| <i>valproic acid (as sodium salt) oral solution 250 mg/5 ml</i> | 1 | |
| <i>valproic acid oral capsule</i> | 1 | |
| VALTOCO NASAL SPRAY,NON-AEROSOL | 2 | PA; QL |
| <i>vigabatrin oral powder in packet</i> | 3 | PA; LA; QL |
| <i>vigabatrin oral tablet</i> | 3 | PA; LA; QL |
| <i>vigadrone oral powder in packet</i> | 3 | PA; QL |
| <i>vigadrone oral tablet</i> | 3 | PA; QL |
| <i>vigpoder oral powder in packet</i> | 3 | PA; QL |
| XCOPRI MAINTENANCE PACK ORAL TABLET | 3 | QL |
| XCOPRI ORAL TABLET | 3 | QL |
| XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK | 3 | QL |
| ZARONTIN ORAL CAPSULE | 3 | |
| ZARONTIN ORAL SOLUTION | 3 | |
| <i>zonisamide oral capsule</i> | 1 | |
| ZTALMY ORAL SUSPENSION | 3 | PA; LA |
| ANTIPARKINSONISM AGENTS | | |
| <i>apomorphine subcutaneous cartridge</i> | 3 | PA; QL |
| AZILECT ORAL TABLET | 3 | ST |
| <i>benztropine oral tablet</i> | 1 | |
| <i>bromocriptine oral capsule</i> | 1 | |
| <i>bromocriptine oral tablet</i> | 1 | |
| <i>carbidopa oral tablet</i> | 1 | PA |
| <i>carbidopa-levodopa oral tablet</i> | 1 | |
| <i>carbidopa-levodopa oral tablet extended release</i> | 1 | |
| <i>carbidopa-levodopa oral tablet,disintegrating</i> | 1 | |
| <i>carbidopa-levodopa-entacapone oral tablet</i> | 1 | |
| DUOPA J-TUBE INTESTINAL PUMP SUSPENSION | 3 | PA; LA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>entacapone oral tablet</i> | 1 | |
| INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE | 3 | PA; QL |
| LODOSYN ORAL TABLET | 3 | PA |
| MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HR 2.25 MG, 3 MG, 3.75 MG | 3 | |
| NEUPRO TRANSDERMAL PATCH 24 HOUR | 3 | |
| NOURIANZ ORAL TABLET | 3 | PA; LA; QL |
| ONGENTYS ORAL CAPSULE | 3 | PA; QL |
| <i>pramipexole oral tablet</i> | 1 | |
| <i>pramipexole oral tablet extended release 24 hr</i> | 1 | |
| <i>rasagiline oral tablet</i> | 1 | |
| <i>ropinirole oral tablet</i> | 1 | |
| <i>ropinirole oral tablet extended release 24 hr</i> | 1 | |
| RYTARY ORAL CAPSULE, EXTENDED RELEASE | 3 | |
| <i>selegiline hcl oral capsule</i> | 1 | |
| <i>selegiline hcl oral tablet</i> | 1 | |
| SINEMET ORAL TABLET 10-100 MG, 25-100 MG | 3 | |
| TASMAR ORAL TABLET 100 MG | 3 | PA |
| <i>tolcapone oral tablet</i> | 1 | PA |
| <i>trihexyphenidyl oral elixir</i> | 1 | |
| <i>trihexyphenidyl oral tablet</i> | 1 | |
| MIGRAINE & CLUSTER HEADACHE THERAPY | | |
| AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR | 2 | PA; QL |
| AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR | 2 | PA; QL |
| AJOVY SYRINGE SUBCUTANEOUS SYRINGE | 2 | PA; QL |
| <i>almotriptan malate oral tablet</i> | 1 | QL |
| <i>dihydroergotamine nasal spray,non-aerosol</i> | 1 | ST; QL |
| <i>eletriptan oral tablet</i> | 1 | QL |
| EMGALITY PEN SUBCUTANEOUS PEN INJECTOR | 2 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| EMGALITY SYRINGE SUBCUTANEOUS SYRINGE | 2 | PA; QL |
| ERGOMAR SUBLINGUAL TABLET | 3 | |
| <i>ergotamine-caffeine oral tablet</i> | 1 | |
| FROVA ORAL TABLET | 3 | ST; QL |
| <i>frovatriptan oral tablet</i> | 1 | QL |
| <i>migergot rectal suppository</i> | 1 | |
| MIGRANAL NASAL SPRAY, NON-AEROSOL | 3 | ST; QL |
| <i>naratriptan oral tablet</i> | 1 | QL |
| NURTEC ODT ORAL TABLET, DISINTEGRATING | 2 | PA; QL |
| QULIPTA ORAL TABLET | 2 | PA; QL |
| REYVOW ORAL TABLET | 3 | PA; QL |
| <i>rizatriptan oral tablet</i> | 1 | QL |
| <i>rizatriptan oral tablet, disintegrating</i> | 1 | QL |
| <i>sumatriptan nasal spray, non-aerosol</i> | 1 | QL |
| <i>sumatriptan succinate oral tablet</i> | 1 | QL |
| <i>sumatriptan succinate subcutaneous cartridge</i> | 1 | QL |
| <i>sumatriptan succinate subcutaneous pen injector</i> | 1 | QL |
| <i>sumatriptan succinate subcutaneous solution</i> | 1 | QL |
| <i>sumatriptan-naproxen oral tablet</i> | 1 | ST; QL |
| TOSYMRA NASAL SPRAY, NON-AEROSOL | 3 | ST; QL |
| UBRELVY ORAL TABLET | 2 | PA; QL |
| ZEMBRACE SYMTOUCH SUBCUTANEOUS PEN INJECTOR | 3 | ST; QL |
| ZOLMITRIPTAN NASAL SPRAY, NON-AEROSOL 2.5 MG | 3 | ST; QL |
| <i>zolmitriptan nasal spray, non-aerosol 5 mg</i> | 1 | ST; QL |
| <i>zolmitriptan oral tablet</i> | 1 | QL |
| <i>zolmitriptan oral tablet, disintegrating</i> | 1 | QL |
| ZOMIG NASAL SPRAY, NON-AEROSOL 2.5 MG | 2 | ST; QL |
| ZOMIG NASAL SPRAY, NON-AEROSOL 5 MG | 3 | ST; QL |
| MISCELLANEOUS NEUROLOGICAL THERAPY | | |
| ADLARITY TRANSDERMAL PATCH WEEKLY | 3 | ST |
| ARICEPT ORAL TABLET | 3 | ST |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| AUSTEDO ORAL TABLET | 3 | PA; LA; QL |
| AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR | 3 | PA; LA; QL |
| AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG | 3 | PA; LA; QL |
| <i>dalfampridine oral tablet extended release 12 hr</i> | 3 | PA; LA; QL |
| <i>dichlorphenamide oral tablet</i> | 3 | PA; LA |
| <i>donepezil oral tablet 10 mg, 5 mg</i> | 1 | |
| <i>donepezil oral tablet 23 mg</i> | 1 | ST |
| <i>donepezil oral tablet,disintegrating</i> | 1 | |
| EVRYSDI ORAL RECON SOLN | 3 | PA; LA; QL |
| EXELON PATCH TRANSDERMAL PATCH 24 HOUR | 3 | ST |
| FIRDAPSE ORAL TABLET | 3 | PA; LA |
| <i>galantamine oral capsule,ext rel. pellets 24 hr</i> | 1 | |
| <i>galantamine oral solution</i> | 1 | |
| <i>galantamine oral tablet</i> | 1 | |
| HORIZANT ORAL TABLET EXTENDED RELEASE | 3 | ST |
| INGREZZA INITIATION PK(TARDIV) ORAL CAPSULE,DOSE PACK | 3 | PA; QL |
| INGREZZA ORAL CAPSULE | 3 | PA; LA; QL |
| INGREZZA SPRINKLE ORAL CAPSULE, SPRINKLE | 3 | PA; LA; QL |
| <i>memantine oral capsule,sprinkle,er 24hr</i> | 1 | |
| <i>memantine oral solution</i> | 1 | |
| <i>memantine oral tablet</i> | 1 | |
| MEMANTINE ORAL TABLETS,DOSE PACK | 3 | |
| NAMENDA TITRATION PAK ORAL TABLETS,DOSE PACK | 3 | |
| NAMENDA XR ORAL CAP,SPRINKLE,ER 24HR DOSE PACK | 3 | |
| NAMZARIC ORAL CAP,SPRINKLE,ER 24HR DOSE PACK | 2 | ST |
| NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR | 2 | ST |
| NUEDEXTA ORAL CAPSULE | 2 | PA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>ormalvi oral tablet</i> | 3 | PA |
| <i>rivastigmine tartrate oral capsule</i> | 1 | |
| <i>rivastigmine transdermal patch 24 hour</i> | 1 | |
| <i>tetrabenazine oral tablet</i> | 3 | PA; LA; QL |
| ZEPOSIA ORAL CAPSULE | 3 | PA; LA; QL |
| ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE,DOSE PACK | 3 | PA; LA; QL |
| ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE,DOSE PACK | 3 | PA; LA; QL |
| MUSCLE RELAXANTS & ANTISPASMODIC THERAPY | | |
| <i>baclofen oral suspension</i> | 1 | |
| <i>baclofen oral tablet</i> | 1 | |
| <i>carisoprodol oral tablet</i> | 1 | |
| <i>carisoprodol-aspirin oral tablet</i> | 1 | |
| <i>carisoprodol-aspirin-codeine oral tablet</i> | 1 | PA; QL |
| <i>chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg</i> | 1 | PA |
| <i>chlorzoxazone oral tablet 500 mg</i> | 1 | |
| <i>cyclobenzaprine oral capsule,extended release 24hr</i> | 1 | PA |
| <i>cyclobenzaprine oral tablet 10 mg</i> | 1 | |
| <i>cyclobenzaprine oral tablet 7.5 mg</i> | 1 | PA |
| DANTRIUM ORAL CAPSULE 25 MG | 3 | |
| <i>dantrolene oral capsule</i> | 1 | |
| FEXMID ORAL TABLET | 3 | PA |
| LORZONE ORAL TABLET | 3 | PA |
| <i>meprobamate oral tablet</i> | 1 | |
| <i>metaxalone oral tablet</i> | 1 | |
| <i>methocarbamol oral tablet</i> | 1 | |
| NORGESIC FORTE ORAL TABLET | 3 | PA |
| NORGESIC ORAL TABLET | 3 | PA |
| <i>orphenadrine citrate oral tablet extended release</i> | 1 | |
| <i>orphenadrine-asa-caffeine oral tablet 25-385-30 mg</i> | 1 | PA |
| <i>orphengesic forte oral tablet</i> | 1 | PA |
| <i>pyridostigmine bromide oral syrup</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG | 3 | |
| <i>pyridostigmine bromide oral tablet 60 mg</i> | 1 | |
| <i>pyridostigmine bromide oral tablet extended release</i> | 1 | |
| SOMA ORAL TABLET | 3 | |
| <i>tanlor oral tablet</i> | 1 | |
| <i>tizanidine oral capsule</i> | 1 | PA |
| <i>tizanidine oral tablet</i> | 1 | |
| <i>vanadom oral tablet</i> | 1 | |
| ZANAFLEX ORAL CAPSULE | 3 | |
| ZANAFLEX ORAL TABLET | 3 | |
| NARCOTIC ANALGESICS | | |
| <i>acetaminophen-caff-dihydrocod oral capsule</i> | 1 | PA; QL |
| <i>acetaminophen-codeine oral solution 120-12 mg/5 ml</i> | 1 | PA; QL |
| <i>acetaminophen-codeine oral tablet</i> | 1 | PA; QL |
| <i>ascomp with codeine oral capsule</i> | 1 | PA; QL |
| BELBUCA BUCCAL FILM | 2 | PA; QL |
| BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE | 3 | LA |
| <i>buprenorphine hcl sublingual tablet</i> | 1 | |
| <i>buprenorphine transdermal patch weekly</i> | 1 | PA; QL |
| <i>butalbital-acetaminop-caf-cod oral capsule</i> | 1 | PA; QL |
| <i>butalbital-acetaminophen oral capsule</i> | 1 | |
| <i>butalbital-acetaminophen oral tablet</i> | 1 | |
| <i>butalbital-acetaminophen-caff oral capsule</i> | 1 | |
| <i>butalbital-acetaminophen-caff oral tablet</i> | 1 | |
| <i>butalbital-aspirin-caffeine oral capsule</i> | 1 | |
| <i>butalbital-aspirin-caffeine oral tablet</i> | 1 | |
| <i>codeine sulfate oral tablet 30 mg, 60 mg</i> | 1 | PA; QL |
| <i>codeine-butalbital-asa-caff oral capsule</i> | 1 | PA; QL |
| DILAUDID ORAL LIQUID | 3 | PA; QL |
| DILAUDID ORAL TABLET | 3 | PA; QL |
| <i>diskets oral tablet, soluble</i> | 1 | PA; QL |
| <i>endocet oral tablet</i> | 1 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| ESGIC ORAL TABLET | 3 | ST |
| <i>fentanyl citrate buccal lozenge on a handle 1,200 mcg, 200 mcg, 600 mcg</i> | 1 | PA; QL |
| <i>fentanyl transdermal patch 72 hour</i> | 1 | PA; QL |
| FIORICET ORAL CAPSULE | 3 | ST |
| FIORICET WITH CODEINE ORAL CAPSULE | 3 | PA; QL |
| <i>hydrocodone bitartrate oral capsule, oral only, er 12hr</i> | 1 | PA; QL |
| <i>hydrocodone bitartrate oral tablet,oral only,ext.rel.24 hr</i> | 1 | PA; QL |
| <i>hydrocodone-acetaminophen oral solution</i> | 1 | PA; QL |
| <i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i> | 1 | PA; QL |
| <i>hydrocodone-ibuprofen oral tablet</i> | 1 | PA; QL |
| <i>hydromorphone oral liquid</i> | 1 | PA; QL |
| <i>hydromorphone oral tablet</i> | 1 | PA; QL |
| <i>hydromorphone oral tablet extended release 24 hr</i> | 1 | PA; QL |
| <i>hydromorphone rectal suppository</i> | 1 | PA; QL |
| HYSINGLA ER ORAL TABLET,ORAL ONLY,EXT.REL.24 HR | 2 | PA; QL |
| <i>levorphanol tartrate oral tablet</i> | 1 | PA; QL |
| <i>meperidine oral solution</i> | 1 | PA; QL |
| <i>meperidine oral tablet 50 mg</i> | 1 | PA; QL |
| <i>methadone oral concentrate</i> | 1 | PA; QL |
| <i>methadone oral solution</i> | 1 | PA; QL |
| <i>methadone oral tablet</i> | 1 | PA; QL |
| <i>methadone oral tablet,soluble</i> | 1 | PA; QL |
| <i>methadose oral concentrate</i> | 1 | PA; QL |
| <i>methadose oral tablet,soluble</i> | 1 | PA; QL |
| <i>morphine concentrate oral solution</i> | 1 | PA; QL |
| <i>morphine oral capsule, er multiphase 24 hr</i> | 1 | PA; QL |
| <i>morphine oral capsule,extend.release pellets</i> | 1 | PA; QL |
| <i>morphine oral solution</i> | 1 | PA; QL |
| <i>morphine oral tablet</i> | 1 | PA; QL |
| <i>morphine oral tablet extended release</i> | 1 | PA; QL |
| <i>morphine rectal suppository</i> | 1 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| MS CONTIN ORAL TABLET EXTENDED RELEASE | 3 | PA; QL |
| NALOCET ORAL TABLET | 3 | PA; QL |
| <i>oxycodone oral capsule</i> | 1 | PA; QL |
| <i>oxycodone oral concentrate</i> | 1 | PA; QL |
| <i>oxycodone oral solution</i> | 1 | PA; QL |
| <i>oxycodone oral tablet</i> | 1 | PA; QL |
| <i>oxycodone-acetaminophen oral solution</i> | 1 | PA; QL |
| <i>oxycodone-acetaminophen oral tablet</i> | 1 | PA; QL |
| OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR | 2 | PA; QL |
| <i>oxymorphone oral tablet</i> | 1 | PA; QL |
| <i>oxymorphone oral tablet extended release 12 hr</i> | 1 | PA; QL |
| <i>prolate oral tablet</i> | 1 | PA; QL |
| ROXICODONE ORAL TABLET 15 MG, 30 MG | 3 | PA; QL |
| <i>tencon oral tablet</i> | 1 | |
| TREZIX ORAL CAPSULE | 3 | PA; QL |
| NON-NARCOTIC ANALGESICS | | |
| <i>adult aspirin regimen oral tablet, delayed release (dr/ec)</i> | ACA | ACA; OTC |
| ANAPROX DS ORAL TABLET | 3 | ST |
| ARTHROTEC 50 ORAL TABLET,IR,DELAYED REL,BIPHASIC | 3 | ST |
| ARTHROTEC 75 ORAL TABLET,IR,DELAYED REL,BIPHASIC | 3 | ST |
| <i>aspirin childrens oral tablet, chewable</i> | ACA | ACA; OTC |
| <i>aspirin oral tablet, chewable</i> | ACA | ACA; OTC |
| <i>aspirin oral tablet, delayed release (dr/ec) 81 mg</i> | ACA | ACA; OTC |
| <i>bayer low dose aspirin oral tablet, delayed release (dr/ec)</i> | ACA | ACA; OTC |
| <i>buprenorphine-naloxone sublingual film</i> | 1 | |
| <i>buprenorphine-naloxone sublingual tablet</i> | 1 | |
| <i>butorphanol nasal spray, non-aerosol</i> | 1 | PA; QL |
| CAMBIA ORAL POWDER IN PACKET | 3 | ST; QL |
| <i>celecoxib oral capsule</i> | 1 | |
| DAYPRO ORAL TABLET | 3 | ST |
| <i>diclofenac potassium oral capsule</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>diclofenac potassium oral powder in packet</i> | 1 | ST; QL |
| <i>diclofenac potassium oral tablet 25 mg</i> | 1 | ST |
| <i>diclofenac potassium oral tablet 50 mg</i> | 1 | |
| <i>diclofenac sodium oral tablet extended release 24 hr</i> | 1 | |
| <i>diclofenac sodium oral tablet, delayed release (dr/ec)</i> | 1 | |
| <i>diclofenac sodium topical drops</i> | 1 | QL |
| <i>diclofenac sodium topical solution in metered-dose pump</i> | 1 | ST; QL |
| <i>diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic</i> | 1 | |
| <i>diflunisal oral tablet</i> | 1 | |
| DISALCID ORAL TABLET | 3 | |
| DUEXIS ORAL TABLET | 3 | ST |
| EC-NAPROSYN ORAL TABLET, DELAYED RELEASE (DR/EC) | 3 | ST |
| <i>ecotrin low strength oral tablet, delayed release (dr/ec)</i> | ACA | ACA; OTC |
| <i>etodolac oral capsule</i> | 1 | |
| <i>etodolac oral tablet</i> | 1 | |
| <i>etodolac oral tablet extended release 24 hr</i> | 1 | |
| <i>fenoprofen oral capsule 400 mg</i> | 1 | ST |
| <i>fenoprofen oral tablet</i> | 1 | ST |
| FLECTOR TRANSDERMAL PATCH 12 HOUR | 2 | ST; QL |
| <i>flurbiprofen oral tablet 100 mg</i> | 1 | |
| <i>ibu oral tablet</i> | 1 | |
| <i>ibuprofen oral suspension</i> | 1 | |
| <i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i> | 1 | |
| <i>ibuprofen-famotidine oral tablet</i> | 1 | ST |
| <i>indomethacin oral capsule</i> | 1 | |
| <i>indomethacin oral capsule, extended release</i> | 1 | |
| <i>indomethacin oral suspension</i> | 1 | ST |
| <i>indomethacin rectal suppository 50 mg</i> | 1 | |
| <i>ketoprofen oral capsule 25 mg</i> | 1 | PA |
| <i>ketoprofen oral capsule 50 mg, 75 mg</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>ketoprofen oral capsule,ext rel. pellets 24 hr 200 mg</i> | 1 | ST |
| <i>ketorolac oral tablet</i> | 1 | QL |
| <i>kiprofen oral capsule</i> | 1 | PA |
| KLOXXADO NASAL SPRAY,NON-AEROSOL | 2 | QL |
| LICART TRANSDERMAL PATCH 24 HOUR | 2 | ST; QL |
| LODINE ORAL TABLET | 3 | ST |
| <i>lofena oral tablet</i> | 1 | ST |
| <i>lofexidine oral tablet</i> | 1 | QL |
| <i>meclofenamate oral capsule</i> | 1 | |
| <i>mefenamic acid oral capsule</i> | 1 | |
| <i>meloxicam oral tablet</i> | 1 | QL |
| <i>meloxicam submicronized oral capsule</i> | 1 | ST; QL |
| <i>nabumetone oral tablet</i> | 1 | |
| NALFON ORAL TABLET | 3 | ST |
| NALMEFENE INJECTION SOLUTION | 3 | |
| <i>naloxone injection solution</i> | 1 | |
| <i>naloxone injection syringe</i> | 1 | |
| <i>naloxone nasal spray,non-aerosol</i> | 1 | OTC; QL |
| <i>naltrexone oral tablet</i> | 1 | |
| NAPRELAN CR ORAL TABLET, ER MULTIPHASE 24 HR | 3 | ST |
| NAPROSYN ORAL SUSPENSION | 3 | ST |
| NAPROSYN ORAL TABLET 500 MG | 3 | ST |
| <i>naproxen oral suspension</i> | 1 | ST |
| <i>naproxen oral tablet</i> | 1 | |
| <i>naproxen oral tablet,delayed release (dr/ec)</i> | 1 | |
| <i>naproxen sodium oral tablet 275 mg, 550 mg</i> | 1 | |
| <i>naproxen sodium oral tablet, er multiphase 24 hr</i> | 1 | ST |
| <i>naproxen-esomeprazole oral tablet,ir,delayed rel,biphasic</i> | 1 | ST |
| NARCAN NASAL SPRAY,NON-AEROSOL | 3 | QL |
| OPVEE NASAL SPRAY,NON-AEROSOL | 3 | |
| <i>oxaprozin oral tablet</i> | 1 | |
| <i>pentazocine-naloxone oral tablet</i> | 1 | PA; QL |
| <i>piroxicam oral capsule</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| REXTOVY NASAL SPRAY, NON-AEROSOL | 2 | QL |
| <i>salsalate oral tablet</i> | 1 | |
| SPRIX NASAL SPRAY, NON-AEROSOL | 3 | ST; QL |
| <i>st joseph aspirin oral tablet, chewable</i> | ACA | ACA; OTC |
| <i>st. joseph aspirin oral tablet, delayed release (dr/ec)</i> | ACA | ACA; OTC |
| <i>sulindac oral tablet</i> | 1 | |
| TOLECTIN 600 ORAL TABLET | 3 | ST |
| <i>tolmetin oral capsule</i> | 1 | ST |
| <i>tramadol oral tablet 50 mg</i> | 1 | PA; QL |
| <i>tramadol oral tablet extended release 24 hr</i> | 1 | PA; QL |
| <i>tramadol oral tablet, er multiphase 24 hr</i> | 1 | PA; QL |
| <i>tramadol-acetaminophen oral tablet</i> | 1 | PA; QL |
| ZUBSOLV SUBLINGUAL TABLET | 2 | |
| PSYCHOTHERAPEUTIC DRUGS | | |
| ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING | 2 | |
| ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET WITH SENSOR AND STRIP | 3 | QL |
| ABILIFY MYCITE STARTER KIT ORAL TABLET WITH SENSOR, STRIP, POD | 3 | QL |
| ADASUVE INHALATION AEROSOL POWDR BREATH ACTIVATED | 3 | |
| ADDYI ORAL TABLET | 3 | PA |
| ADZENYS XR-ODT ORAL TABLET, DISINTEGRER BIPHASE 24H | 3 | ST |
| <i>alprazolam intensol oral concentrate</i> | 1 | |
| <i>alprazolam oral tablet</i> | 1 | |
| <i>alprazolam oral tablet extended release 24 hr</i> | 1 | |
| <i>alprazolam oral tablet, disintegrating</i> | 1 | |
| <i>amitriptyline oral tablet</i> | 1 | |
| <i>amitriptyline-chlordiazepoxide oral tablet</i> | 1 | |
| <i>amoxapine oral tablet</i> | 1 | |
| <i>amphetamine sulfate oral tablet</i> | 1 | |
| ANAFRANIL ORAL CAPSULE | 3 | |
| <i>aripiprazole oral solution</i> | 1 | |
| <i>aripiprazole oral tablet</i> | 1 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>aripiprazole oral tablet,disintegrating</i> | 1 | QL |
| <i>armodafinil oral tablet</i> | 1 | ST; QL |
| <i>asenapine maleate sublingual tablet</i> | 1 | QL |
| ATIVAN ORAL TABLET | 3 | |
| <i>atomoxetine oral capsule</i> | 1 | |
| AUVELITY ORAL TABLET, IR AND ER, BIPHASIC | 3 | ST; QL |
| AZSTARYS ORAL CAPSULE | 2 | ST |
| BELSOMRA ORAL TABLET | 3 | ST; QL |
| <i>bupropion hcl oral tablet</i> | 1 | |
| <i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i> | 1 | QL |
| <i>bupropion hcl oral tablet sustained-release 12 hr</i> | 1 | QL |
| <i>bupirone oral tablet</i> | 1 | |
| CAPLYTA ORAL CAPSULE | 3 | QL |
| <i>chlordiazepoxide hcl oral capsule</i> | 1 | |
| <i>chlorpromazine oral concentrate</i> | 1 | |
| <i>chlorpromazine oral tablet</i> | 1 | |
| <i>citalopram oral solution</i> | 1 | |
| <i>citalopram oral tablet</i> | 1 | QL |
| <i>clomipramine oral capsule</i> | 1 | |
| <i>clonidine hcl oral tablet extended release 12 hr</i> | 1 | |
| <i>clorazepate dipotassium oral tablet</i> | 1 | |
| <i>clozapine oral tablet</i> | 1 | |
| <i>clozapine oral tablet,disintegrating</i> | 1 | |
| CLOZARIL ORAL TABLET 100 MG, 25 MG | 3 | |
| COTEMPLA XR-ODT ORAL TABLET,DISINTEG ER BIPHASE 24H | 3 | ST |
| DAYTRANA TRANSDERMAL PATCH 24 HOUR | 3 | ST |
| DAYVIGO ORAL TABLET | 3 | ST; QL |
| <i>desipramine oral tablet</i> | 1 | |
| DESOXYN ORAL TABLET | 3 | |
| DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24 HR | 3 | ST; QL |
| <i>desvenlafaxine succinate oral tablet extended release 24 hr</i> | 1 | ST; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG | 3 | ST |
| <i>dexmethylphenidate oral capsule,er biphasic 50-50</i> | 1 | |
| <i>dexmethylphenidate oral tablet</i> | 1 | |
| <i>dextroamphetamine sulfate oral capsule, extended release</i> | 1 | |
| <i>dextroamphetamine sulfate oral solution</i> | 1 | |
| <i>dextroamphetamine sulfate oral tablet</i> | 1 | |
| <i>dextroamphetamine-amphetamine oral capsule, er triphasic 24 hr</i> | 1 | |
| <i>dextroamphetamine-amphetamine oral capsule,extended release 24hr</i> | 1 | |
| <i>dextroamphetamine-amphetamine oral tablet</i> | 1 | |
| <i>diazepam intensol oral concentrate</i> | 1 | |
| <i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i> | 1 | |
| <i>diazepam oral tablet</i> | 1 | |
| <i>doxepin oral capsule</i> | 1 | |
| <i>doxepin oral concentrate</i> | 1 | |
| <i>doxepin oral tablet</i> | 1 | ST; QL |
| <i>duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i> | 1 | QL |
| <i>duloxetine oral capsule,delayed release(dr/ec) 40 mg</i> | 1 | ST; QL |
| EMSAM TRANSDERMAL PATCH 24 HOUR | 3 | |
| <i>ergoloid oral tablet</i> | 1 | |
| <i>escitalopram oxalate oral solution</i> | 1 | ST |
| <i>escitalopram oxalate oral tablet</i> | 1 | QL |
| <i>estazolam oral tablet</i> | 1 | QL |
| <i>eszopiclone oral tablet</i> | 1 | QL |
| FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26) | 2 | ST; QL |
| FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR | 2 | ST; QL |
| <i>fluoxetine oral capsule 10 mg, 40 mg</i> | 1 | QL |
| <i>fluoxetine oral capsule 20 mg</i> | 1 | |
| <i>fluoxetine oral capsule,delayed release(dr/ec)</i> | 1 | ST; QL |
| <i>fluoxetine oral solution</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>fluoxetine oral tablet 10 mg</i> | 1 | ST; QL |
| <i>fluoxetine oral tablet 20 mg, 60 mg</i> | 1 | ST |
| <i>fluphenazine hcl oral concentrate</i> | 1 | |
| <i>fluphenazine hcl oral elixir</i> | 1 | |
| <i>fluphenazine hcl oral tablet</i> | 1 | |
| <i>flurazepam oral capsule</i> | 1 | QL |
| <i>fluvoxamine oral capsule,extended release 24hr</i> | 1 | ST; QL |
| <i>fluvoxamine oral tablet</i> | 1 | QL |
| GEODON ORAL CAPSULE | 3 | QL |
| <i>guanfacine oral tablet extended release 24 hr</i> | 1 | |
| HALCION ORAL TABLET 0.25 MG | 3 | QL |
| <i>haloperidol lactate oral concentrate</i> | 1 | |
| <i>haloperidol oral tablet</i> | 1 | |
| HETLIOZ LQ ORAL SUSPENSION | 3 | PA; LA; QL |
| HETLIOZ ORAL CAPSULE | 3 | PA; LA; QL |
| <i>imipramine hcl oral tablet</i> | 1 | |
| <i>imipramine pamoate oral capsule</i> | 1 | |
| INVEGA ORAL TABLET EXTENDED RELEASE 24HR 3 MG, 6 MG, 9 MG | 3 | QL |
| JORNAY PM ORAL CAPSULE,DEL REL,EXT REL SPRINK | 3 | ST |
| <i>lisdexamfetamine oral capsule</i> | 1 | |
| <i>lisdexamfetamine oral tablet,chewable</i> | 1 | ST |
| <i>lithium carbonate oral capsule</i> | 1 | |
| <i>lithium carbonate oral tablet</i> | 1 | |
| <i>lithium carbonate oral tablet extended release</i> | 1 | |
| <i>lithium citrate oral solution</i> | 1 | |
| LITHOBID ORAL TABLET EXTENDED RELEASE | 3 | |
| <i>lorazepam intensol oral concentrate</i> | 1 | |
| <i>lorazepam oral concentrate</i> | 1 | |
| <i>lorazepam oral tablet</i> | 1 | |
| <i>loxapine succinate oral capsule</i> | 1 | |
| LUMRYZ ORAL EXTEND RELEASE GRANULES,PACKET | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| LUMRYZ STARTER PACK ORAL GRANULES ER PACKET, DOSE PACK | 3 | PA |
| <i>lurasidone oral tablet</i> | 1 | QL |
| LYBALVI ORAL TABLET | 3 | QL |
| MARPLAN ORAL TABLET | 3 | |
| METADATE CD ORAL CAPSULE, ER BIPHASIC 30-70 | 3 | ST |
| <i>methamphetamine oral tablet</i> | 1 | |
| METHYLIN ORAL SOLUTION | 3 | |
| <i>methylphenidate hcl oral cap,er sprinkle,biphasic 40-60</i> | 1 | ST |
| <i>methylphenidate hcl oral capsule, er biphasic 30-70</i> | 1 | |
| <i>methylphenidate hcl oral capsule,er biphasic 50-50</i> | 1 | |
| <i>methylphenidate hcl oral solution</i> | 1 | |
| <i>methylphenidate hcl oral tablet</i> | 1 | |
| <i>methylphenidate hcl oral tablet extended release</i> | 1 | |
| <i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i> | 1 | |
| <i>methylphenidate hcl oral tablet,chewable</i> | 1 | |
| <i>methylphenidate transdermal patch 24 hour</i> | 1 | ST |
| <i>midazolam oral syrup 2 mg/ml</i> | 1 | |
| <i>mirtazapine oral tablet</i> | 1 | |
| <i>mirtazapine oral tablet,disintegrating</i> | 1 | |
| <i>modafinil oral tablet</i> | 1 | ST; QL |
| <i>molindone oral tablet</i> | 1 | |
| MYDAYIS ORAL CAPSULE, ER TRIPHASIC 24 HR | 3 | ST |
| NARDIL ORAL TABLET | 3 | |
| <i>nefazodone oral tablet</i> | 1 | |
| <i>nortriptyline oral capsule</i> | 1 | |
| <i>nortriptyline oral solution</i> | 1 | |
| NUPLAZID ORAL CAPSULE | 3 | PA; LA; QL |
| NUPLAZID ORAL TABLET | 3 | PA; LA; QL |
| <i>olanzapine oral tablet</i> | 1 | QL |
| <i>olanzapine oral tablet,disintegrating</i> | 1 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>olanzapine-fluoxetine oral capsule</i> | 1 | |
| <i>oxazepam oral capsule</i> | 1 | |
| <i>paliperidone oral tablet extended release 24hr</i> | 1 | QL |
| PAMELOR ORAL CAPSULE | 3 | |
| PARNATE ORAL TABLET | 3 | |
| <i>paroxetine hcl oral suspension</i> | 1 | ST |
| <i>paroxetine hcl oral tablet</i> | 1 | QL |
| <i>paroxetine hcl oral tablet extended release 24 hr</i> | 1 | ST; QL |
| <i>paroxetine mesylate(menop.sym) oral capsule</i> | 1 | ST; QL |
| PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR | 3 | ST; QL |
| PAXIL ORAL SUSPENSION | 3 | ST |
| PAXIL ORAL TABLET | 3 | ST; QL |
| <i>perphenazine oral tablet</i> | 1 | |
| <i>perphenazine-amitriptyline oral tablet</i> | 1 | |
| <i>phenelzine oral tablet</i> | 1 | |
| <i>pimozide oral tablet</i> | 1 | |
| <i>procentra oral solution</i> | 1 | |
| <i>protriptyline oral tablet</i> | 1 | |
| QELBREE ORAL CAPSULE,EXTENDED RELEASE 24HR | 3 | ST |
| <i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i> | 1 | QL |
| <i>quetiapine oral tablet extended release 24 hr</i> | 1 | QL |
| QUVIVIQ ORAL TABLET | 3 | ST; QL |
| <i>ramelteon oral tablet</i> | 1 | QL |
| REMERON ORAL TABLET 15 MG, 30 MG | 3 | |
| REMERON SOLTAB ORAL TABLET,DISINTEGRATING | 3 | |
| RESTORIL ORAL CAPSULE | 3 | QL |
| REXULTI ORAL TABLET | 3 | QL |
| RISPERDAL ORAL SOLUTION | 3 | |
| RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG | 3 | QL |
| <i>risperidone microspheres intramuscular suspension,extended rel recon</i> | 1 | |
| <i>risperidone oral solution</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>risperidone oral tablet</i> | 1 | QL |
| <i>risperidone oral tablet, disintegrating</i> | 1 | QL |
| RYKINDO INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON | 2 | |
| SECUADO TRANSDERMAL PATCH 24 HOUR | 3 | QL |
| <i>sertraline oral concentrate</i> | 1 | |
| <i>sertraline oral tablet</i> | 1 | QL |
| SILENOR ORAL TABLET | 3 | ST; QL |
| SODIUM OXYBATE ORAL SOLUTION | 3 | PA; LA; QL |
| SUNOSI ORAL TABLET | 2 | ST; QL |
| SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG | 3 | |
| <i>tasimelteon oral capsule</i> | 3 | PA; LA; QL |
| <i>temazepam oral capsule</i> | 1 | QL |
| <i>thioridazine oral tablet</i> | 1 | |
| <i>thiothixene oral capsule</i> | 1 | |
| <i>tranylcypromine oral tablet</i> | 1 | |
| <i>trazodone oral tablet</i> | 1 | |
| <i>triazolam oral tablet</i> | 1 | QL |
| <i>trifluoperazine oral tablet</i> | 1 | |
| <i>trimipramine oral capsule</i> | 1 | |
| TRINTELLIX ORAL TABLET | 3 | ST; QL |
| UZEDY SUBCUTANEOUS SUSPENSION, EXTENDED REL SYRING | 2 | |
| <i>venlafaxine oral capsule, extended release 24hr</i> | 1 | QL |
| <i>venlafaxine oral tablet</i> | 1 | QL |
| <i>venlafaxine oral tablet extended release 24hr</i> | 1 | PA; QL |
| VERSACLOZ ORAL SUSPENSION | 3 | |
| <i>vilazodone oral tablet</i> | 1 | ST; QL |
| VRAYLAR ORAL CAPSULE | 3 | QL |
| VYLEESI SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; QL |
| VYVANSE ORAL CAPSULE | 3 | ST |
| VYVANSE ORAL TABLET, CHEWABLE | 3 | ST |
| WAKIX ORAL TABLET | 3 | ST; LA; QL |
| XYWAV ORAL SOLUTION | 3 | PA; LA; QL |
| <i>zaleplon oral capsule</i> | 1 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|-----------|-----------------------|
| <i>zenzedi oral tablet 10 mg, 5 mg</i> | 1 | |
| ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG | 3 | |
| <i>ziprasidone hcl oral capsule</i> | 1 | QL |
| <i>zolpidem oral tablet</i> | 1 | QL |
| <i>zolpidem oral tablet,ext release multiphase</i> | 1 | QL |
| <i>zolpidem sublingual tablet</i> | 1 | QL |
| ZURZUVAE ORAL CAPSULE | 3 | QL |
| ZYPREXA ORAL TABLET | 3 | QL |
| ZYPREXA ZYDIS ORAL TABLET,DISINTEGRATING | 3 | QL |

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

| | | |
|---|---|----|
| <i>amiodarone oral tablet</i> | 1 | |
| BETAPACE AF ORAL TABLET | 3 | ST |
| BETAPACE ORAL TABLET | 3 | ST |
| <i>disopyramide phosphate oral capsule</i> | 1 | |
| <i>dofetilide oral capsule</i> | 1 | |
| <i>flecainide oral tablet</i> | 1 | |
| <i>mexiletine oral capsule</i> | 1 | |
| MULTAQ ORAL TABLET | 2 | |
| <i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i> | 1 | |
| <i>propafenone oral capsule,extended release 12 hr</i> | 1 | |
| <i>propafenone oral tablet</i> | 1 | |
| <i>quinidine gluconate oral tablet extended release</i> | 1 | |
| <i>quinidine sulfate oral tablet</i> | 1 | |
| <i>sotalol af oral tablet</i> | 1 | |
| <i>sotalol oral tablet</i> | 1 | |
| SOTYLIZE ORAL SOLUTION | 2 | |

ANTIHYPERTENSIVE THERAPY

| | | |
|--------------------------------|---|--|
| ACCUPRIL ORAL TABLET | 3 | |
| ACCURETIC ORAL TABLET | 3 | |
| <i>acebutolol oral capsule</i> | 1 | |
| ALDACTONE ORAL TABLET | 3 | |
| <i>aliskiren oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| ALTACE ORAL CAPSULE | 3 | |
| <i>amiloride oral tablet</i> | 1 | |
| <i>amiloride-hydrochlorothiazide oral tablet</i> | 1 | |
| <i>amlodipine oral tablet</i> | 1 | |
| <i>amlodipine-benazepril oral capsule</i> | 1 | |
| <i>amlodipine-olmesartan oral tablet</i> | 1 | |
| <i>amlodipine-valsartan oral tablet</i> | 1 | |
| <i>amlodipine-valsartan-hctiazid oral tablet</i> | 1 | |
| <i>atenolol oral tablet</i> | 1 | |
| <i>atenolol-chlorthalidone oral tablet</i> | 1 | |
| <i>benazepril oral tablet</i> | 1 | |
| <i>benazepril-hydrochlorothiazide oral tablet</i> | 1 | |
| <i>betaxolol oral tablet</i> | 1 | |
| <i>bisoprolol fumarate oral tablet</i> | 1 | |
| <i>bisoprolol-hydrochlorothiazide oral tablet</i> | 1 | |
| <i>bumetanide oral tablet</i> | 1 | |
| <i>candesartan oral tablet</i> | 1 | |
| <i>candesartan-hydrochlorothiazid oral tablet</i> | 1 | |
| <i>captopril oral tablet</i> | 1 | |
| <i>captopril-hydrochlorothiazide oral tablet</i> | 1 | |
| CARDIZEM CD ORAL CAPSULE,EXTENDED RELEASE 24HR | 3 | |
| CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HR | 3 | |
| CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG | 3 | |
| CARDURA ORAL TABLET | 3 | ST; QL |
| CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR | 3 | ST; QL |
| <i>cartia xt oral capsule,extended release 24hr</i> | 1 | |
| <i>carvedilol oral tablet</i> | 1 | |
| <i>carvedilol phosphate oral capsule, er multiphase 24 hr</i> | 1 | |
| CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY | 3 | QL |
| CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY | 3 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY | 3 | QL |
| <i>chlorthalidone oral tablet 25 mg, 50 mg</i> | 1 | |
| <i>clonidine hcl oral tablet</i> | 1 | |
| <i>clonidine transdermal patch weekly</i> | 1 | QL |
| CONSENSI ORAL TABLET | 3 | PA |
| COREG CR ORAL CAPSULE, ER MULTIPHASE 24 HR | 3 | ST |
| DEMSER ORAL CAPSULE | 3 | PA |
| DIBENZYLINE ORAL CAPSULE | 3 | PA |
| <i>diltiazem hcl oral capsule,ext.rel 24h degradable</i> | 1 | |
| <i>diltiazem hcl oral capsule,extended release 12 hr</i> | 1 | |
| <i>diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i> | 1 | |
| <i>diltiazem hcl oral capsule,extended release 24hr</i> | 1 | |
| <i>diltiazem hcl oral tablet</i> | 1 | |
| <i>diltiazem hcl oral tablet extended release 24 hr</i> | 1 | |
| <i>dilt-xr oral capsule,ext.rel 24h degradable</i> | 1 | |
| DIURIL ORAL SUSPENSION | 3 | |
| <i>doxazosin oral tablet</i> | 1 | QL |
| DYRENIUM ORAL CAPSULE | 3 | |
| EDECRIN ORAL TABLET | 3 | ST |
| <i>enalapril maleate oral solution</i> | 1 | |
| <i>enalapril maleate oral tablet</i> | 1 | |
| <i>enalapril-hydrochlorothiazide oral tablet</i> | 1 | |
| <i>eplerenone oral tablet</i> | 1 | |
| <i>eprosartan oral tablet</i> | 1 | |
| <i>ethacrynic acid oral tablet</i> | 1 | |
| <i>felodipine oral tablet extended release 24 hr</i> | 1 | |
| <i>fosinopril oral tablet</i> | 1 | |
| <i>fosinopril-hydrochlorothiazide oral tablet</i> | 1 | |
| <i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i> | 1 | |
| <i>furosemide oral tablet</i> | 1 | |
| <i>guanfacine oral tablet</i> | 1 | |
| <i>hydralazine oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>hydrochlorothiazide oral capsule</i> | 1 | |
| <i>hydrochlorothiazide oral tablet</i> | 1 | |
| <i>indapamide oral tablet</i> | 1 | |
| INSPRA ORAL TABLET | 3 | |
| <i>irbesartan oral tablet</i> | 1 | |
| <i>irbesartan-hydrochlorothiazide oral tablet</i> | 1 | |
| <i>isosorbide-hydralazine oral tablet</i> | 1 | |
| <i>isradipine oral capsule</i> | 1 | |
| KERENDIA ORAL TABLET | 2 | PA; QL |
| <i>labetalol oral tablet</i> | 1 | |
| LASIX ORAL TABLET | 3 | ST |
| <i>lisinopril oral tablet</i> | 1 | |
| <i>lisinopril-hydrochlorothiazide oral tablet</i> | 1 | |
| LOPRESSOR ORAL TABLET | 3 | ST |
| <i>losartan oral tablet</i> | 1 | |
| <i>losartan-hydrochlorothiazide oral tablet</i> | 1 | |
| LOTENSIN HCT ORAL TABLET | 3 | |
| LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG | 3 | |
| <i>matzim la oral tablet extended release 24 hr</i> | 1 | |
| <i>methyldopa oral tablet</i> | 1 | |
| <i>methyldopa-hydrochlorothiazide oral tablet</i> | 1 | |
| <i>metolazone oral tablet</i> | 1 | |
| <i>metoprolol succinate oral tablet extended release 24 hr</i> | 1 | |
| <i>metoprolol ta-hydrochlorothiaz oral tablet</i> | 1 | |
| <i>metoprolol tartrate oral tablet</i> | 1 | |
| <i>metyrosine oral capsule</i> | 1 | PA |
| <i>minoxidil oral tablet</i> | 1 | |
| <i>moexipril oral tablet</i> | 1 | |
| <i>nadolol oral tablet</i> | 1 | |
| <i>nebivolol oral tablet</i> | 1 | |
| <i>nicardipine oral capsule</i> | 1 | |
| <i>nifedipine oral capsule</i> | 1 | |
| <i>nifedipine oral tablet extended release</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>nifedipine oral tablet extended release 24hr</i> | 1 | |
| <i>nimodipine oral capsule</i> | 1 | |
| <i>nisoldipine oral tablet extended release 24 hr</i> | 1 | |
| NYMALIZE ORAL SOLUTION | 3 | |
| NYMALIZE ORAL SYRINGE | 3 | |
| <i>olmesartan oral tablet</i> | 1 | |
| <i>olmesartan-amlodipin-hcthiazyd oral tablet</i> | 1 | |
| <i>olmesartan-hydrochlorothiazide oral tablet</i> | 1 | |
| ORENITRAM MONTH 1 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK | 3 | PA; LA; QL |
| ORENITRAM MONTH 2 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK | 3 | PA; LA; QL |
| ORENITRAM MONTH 3 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK | 3 | PA; LA; QL |
| ORENITRAM ORAL TABLET EXTENDED RELEASE | 3 | PA; LA; QL |
| <i>perindopril erbumine oral tablet</i> | 1 | |
| <i>phenoxybenzamine oral capsule</i> | 1 | PA |
| <i>pindolol oral tablet</i> | 1 | |
| <i>prazosin oral capsule</i> | 1 | |
| PRESTALIA ORAL TABLET | 3 | ST |
| PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24HR | 3 | ST |
| <i>propranolol oral capsule,extended release 24 hr</i> | 1 | |
| <i>propranolol oral solution</i> | 1 | |
| <i>propranolol oral tablet</i> | 1 | |
| <i>propranolol-hydrochlorothiazid oral tablet</i> | 1 | |
| <i>quinapril oral tablet</i> | 1 | |
| <i>quinapril-hydrochlorothiazide oral tablet</i> | 1 | |
| <i>ramipril oral capsule</i> | 1 | |
| <i>spironolactone oral suspension</i> | 1 | |
| <i>spironolactone oral tablet</i> | 1 | |
| <i>spironolacton-hydrochlorothiaz oral tablet</i> | 1 | |
| SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG | 3 | ST |
| <i>telmisartan oral tablet</i> | 1 | |
| <i>telmisartan-amlodipine oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>telmisartan-hydrochlorothiazid oral tablet</i> | 1 | |
| TENORETIC 100 ORAL TABLET | 3 | ST |
| TENORETIC 50 ORAL TABLET | 3 | ST |
| TENORMIN ORAL TABLET | 3 | ST |
| <i>terazosin oral capsule</i> | 1 | QL |
| <i>tiadylt er oral capsule,extended release 24 hr</i> | 1 | |
| TIAZAC ORAL CAPSULE,EXTENDED RELEASE 24 HR | 3 | |
| <i>timolol maleate oral tablet</i> | 1 | |
| <i>torse mide oral tablet</i> | 1 | |
| <i>trandolapril oral tablet</i> | 1 | |
| <i>trandolapril-verapamil oral tablet, ir - er, biphasic 24hr</i> | 1 | |
| <i>triamterene oral capsule</i> | 1 | |
| <i>triamterene-hydrochlorothiazid oral capsule</i> | 1 | |
| <i>triamterene-hydrochlorothiazid oral tablet</i> | 1 | |
| UPTRAVI ORAL TABLET | 3 | PA; LA; QL |
| UPTRAVI ORAL TABLETS,DOSE PACK | 3 | PA; LA; QL |
| <i>valsartan oral tablet</i> | 1 | |
| <i>valsartan-hydrochlorothiazide oral tablet</i> | 1 | |
| VASERETIC ORAL TABLET | 3 | |
| VASOTEC ORAL TABLET | 3 | |
| <i>verapamil oral capsule, 24 hr er pellet ct</i> | 1 | |
| <i>verapamil oral capsule,ext rel. pellets 24 hr</i> | 1 | |
| <i>verapamil oral tablet</i> | 1 | |
| <i>verapamil oral tablet extended release</i> | 1 | |
| VERELAN PM ORAL CAPSULE, 24 HR ER PELLETT CT | 3 | ST |
| ZESTORETIC ORAL TABLET | 3 | |
| ZESTRIL ORAL TABLET | 3 | |
| CARDIAC GLYCOSIDES | | |
| <i>digoxin oral solution</i> | 1 | |
| <i>digoxin oral tablet</i> | 1 | |
| LANOXIN ORAL TABLET | 3 | |
| COAGULATION THERAPY | | |
| AMICAR ORAL SOLUTION | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| AMICAR ORAL TABLET | 3 | |
| <i>aminocaproic acid oral solution</i> | 1 | |
| <i>aminocaproic acid oral tablet</i> | 1 | |
| ARIXTRA SUBCUTANEOUS SYRINGE | 3 | |
| <i>aspirin-dipyridamole oral capsule, er multiphase 12 hr</i> | 1 | |
| BRILINTA ORAL TABLET | 2 | |
| CABLIVI INJECTION KIT | 3 | PA; LA |
| <i>cilostazol oral tablet</i> | 1 | |
| <i>clopidogrel oral tablet</i> | 1 | |
| <i>dabigatran etexilate oral capsule</i> | 1 | |
| <i>dipyridamole oral tablet</i> | 1 | |
| DOPTELET (15 TAB PACK) ORAL TABLET | 3 | PA; LA; QL |
| EFFIENT ORAL TABLET | 3 | |
| ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK | 2 | |
| ELIQUIS ORAL TABLET | 2 | |
| <i>enoxaparin subcutaneous solution</i> | 3 | |
| <i>enoxaparin subcutaneous syringe</i> | 3 | |
| <i>fondaparinux subcutaneous syringe</i> | 3 | |
| FRAGMIN SUBCUTANEOUS SOLUTION | 3 | |
| FRAGMIN SUBCUTANEOUS SYRINGE | 3 | |
| <i>jantoven oral tablet</i> | 1 | |
| <i>pentoxifylline oral tablet extended release</i> | 1 | |
| <i>phytonadione (vitamin k1) oral tablet 5 mg</i> | 1 | QL |
| <i>prasugrel oral tablet</i> | 1 | |
| PROMACTA ORAL POWDER IN PACKET | 3 | LA |
| PROMACTA ORAL TABLET | 3 | LA |
| TAVALISSE ORAL TABLET | 3 | PA; LA; QL |
| <i>warfarin oral tablet</i> | 1 | |
| XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK | 2 | |
| XARELTO, XARELTO STARTER PACK ORAL SUSPENSION FOR RECONSTITUTION | 2 | |
| XARELTO, XARELTO STARTER PACK ORAL TABLET | 2 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| ZONTIVITY ORAL TABLET | 3 | PA |
| LIPID/CHOLESTEROL LOWERING AGENTS | | |
| <i>amlodipine-atorvastatin oral tablet</i> | 1 | QL |
| <i>atorvastatin oral tablet 10 mg, 20 mg</i> | ACA | ACA; QL |
| <i>atorvastatin oral tablet 40 mg, 80 mg</i> | 1 | QL |
| CADUET ORAL TABLET | 3 | ST; QL |
| <i>cholestyramine (with sugar) oral powder</i> | 1 | |
| <i>cholestyramine (with sugar) oral powder in packet</i> | 1 | |
| <i>cholestyramine light oral powder</i> | 1 | |
| <i>cholestyramine light oral powder in packet</i> | 1 | |
| <i>colesevelam oral powder in packet</i> | 1 | |
| <i>colesevelam oral tablet</i> | 1 | |
| COLESTID ORAL GRANULES | 3 | ST |
| COLESTID ORAL TABLET | 3 | ST |
| <i>colestipol oral granules</i> | 1 | |
| <i>colestipol oral packet</i> | 1 | |
| <i>colestipol oral tablet</i> | 1 | |
| <i>ezetimibe oral tablet</i> | 1 | |
| <i>ezetimibe-simvastatin oral tablet</i> | 1 | QL |
| <i>fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg</i> | 1 | |
| <i>fenofibrate nanocrystallized oral tablet</i> | 1 | |
| <i>fenofibrate oral tablet 120 mg</i> | 1 | PA |
| <i>fenofibrate oral tablet 160 mg, 54 mg</i> | 1 | |
| <i>fenofibrate oral tablet 40 mg</i> | 1 | ST |
| <i>fenofibric acid (choline) oral capsule, delayed release(dr/ec)</i> | 1 | |
| <i>fenofibric acid oral tablet</i> | 1 | |
| FENOGLIDE ORAL TABLET | 3 | ST |
| FIBRICOR ORAL TABLET | 3 | ST |
| FLOLIPID ORAL SUSPENSION | 3 | ST; QL |
| <i>fluvastatin oral capsule</i> | ACA | ACA; QL |
| <i>fluvastatin oral tablet extended release 24 hr</i> | ACA | ACA; QL |
| <i>gemfibrozil oral tablet</i> | 1 | |
| <i>icosapent ethyl oral capsule</i> | 1 | PA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 5 MG | 3 | LA |
| LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HR | 3 | ST; QL |
| LIVALO ORAL TABLET | 3 | ST; QL |
| LOPID ORAL TABLET | 3 | |
| <i>lovastatin oral tablet</i> | ACA | ACA; QL |
| NEXLETOL ORAL TABLET | 2 | PA |
| NEXLIZET ORAL TABLET | 2 | PA |
| <i>niacin oral tablet extended release 24 hr</i> | 1 | |
| <i>omega-3 acid ethyl esters oral capsule</i> | 1 | PA |
| <i>pitavastatin calcium oral tablet</i> | ACA | ACA; QL |
| <i>pravastatin oral tablet</i> | ACA | ACA; QL |
| <i>prevalite oral powder</i> | 1 | |
| <i>prevalite oral powder in packet</i> | 1 | |
| QUESTRAN LIGHT ORAL POWDER | 3 | ST |
| QUESTRAN ORAL POWDER | 3 | ST |
| QUESTRAN ORAL POWDER IN PACKET | 3 | ST |
| REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR | 2 | QL |
| REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR | 2 | QL |
| REPATHA SYRINGE SUBCUTANEOUS SYRINGE | 2 | QL |
| <i>rosuvastatin oral tablet 10 mg, 5 mg</i> | ACA | ACA; QL |
| <i>rosuvastatin oral tablet 20 mg, 40 mg</i> | 1 | QL |
| ROSZET ORAL TABLET | 3 | ST; QL |
| <i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i> | ACA | ACA; QL |
| <i>simvastatin oral tablet 80 mg</i> | 1 | QL |
| TRILIPIX ORAL CAPSULE, DELAYED RELEASE(DR/EC) | 3 | ST |
| VASCEPA ORAL CAPSULE | 2 | PA |
| ZYPITAMAG ORAL TABLET | 3 | ST; QL |
| MISCELLANEOUS CARDIOVASCULAR AGENTS | | |
| CAMZYOS ORAL CAPSULE | 3 | PA; LA; QL |
| ENTRESTO ORAL TABLET | 2 | QL |
| ENTRESTO SPRINKLE ORAL PELLETT | 2 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>ivabradine oral tablet</i> | 1 | PA |
| <i>ranolazine oral tablet extended release 12 hr</i> | 1 | |
| VERQUVO ORAL TABLET | 2 | QL |
| VYNDAMAX ORAL CAPSULE | 3 | PA; LA |
| VYNDAQEL ORAL CAPSULE | 3 | PA; LA |
| NITRATES | | |
| GONITRO SUBLINGUAL POWDER IN PACKET | 3 | |
| ISORDIL ORAL TABLET | 3 | |
| ISORDIL TITRADOSE ORAL TABLET 5 MG | 3 | |
| <i>isosorbide dinitrate oral tablet</i> | 1 | |
| <i>isosorbide mononitrate oral tablet</i> | 1 | |
| <i>isosorbide mononitrate oral tablet extended release 24 hr</i> | 1 | |
| <i>nitro-bid transdermal ointment</i> | 1 | |
| NITRO-DUR TRANSDERMAL PATCH 24 HOUR | 3 | |
| <i>nitroglycerin sublingual tablet</i> | 1 | |
| <i>nitroglycerin transdermal patch 24 hour</i> | 1 | |
| <i>nitroglycerin translingual spray,non-aerosol</i> | 1 | |
| NITROLINGUAL TRANSLINGUAL SPRAY,NON-AEROSOL | 3 | |
| NITROMIST TRANSLINGUAL AEROSOL,SPRAY | 3 | |
| NITROSTAT SUBLINGUAL TABLET | 3 | |
| <i>nitro-time oral capsule, extended release</i> | 1 | |
| DERMATOLOGICALS/TOPICAL THERAPY | | |
| ANTIPSORIATIC / ANTISEBORRHEIC | | |
| <i>acitretin oral capsule</i> | 1 | |
| ANALPRAM-HC TOPICAL LOTION | 3 | ST |
| <i>calcipotriene scalp solution</i> | 1 | QL |
| <i>calcipotriene topical cream</i> | 1 | QL |
| <i>calcipotriene topical ointment</i> | 1 | QL |
| <i>calcipotriene-betamethasone topical ointment</i> | 1 | ST; QL |
| <i>calcipotriene-betamethasone topical suspension</i> | 1 | QL |
| <i>calcitriol topical ointment</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| ENSTILAR TOPICAL FOAM | 2 | ST; QL |
| EPIFOAM TOPICAL FOAM | 3 | ST |
| <i>hydrocortisone-pramoxine topical cream 2.5-1 %</i> | 1 | ST |
| OVACE PLUS SHAMPOO TOPICAL SHAMPOO | 3 | |
| OVACE PLUS TOPICAL CLEANSER | 3 | |
| OVACE PLUS TOPICAL CREAM | 3 | |
| OVACE PLUS TOPICAL LOTION | 3 | |
| OVACE PLUS WASH TOPICAL CLEANSER, GEL | 3 | |
| OVACE TOPICAL CLEANSER | 3 | |
| PLEXION NS TOPICAL SHAMPOO | 3 | |
| PRAMOSONE TOPICAL CREAM 1-1 % | 3 | ST |
| PRAMOSONE TOPICAL LOTION | 3 | ST |
| PRAMOSONE TOPICAL OINTMENT | 3 | ST |
| <i>selenium sulfide topical lotion</i> | 1 | |
| <i>selenium sulfide topical shampoo 2.25 %, 2.3 %</i> | 1 | |
| SKYRIZI SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML | 3 | PA; LA; QL |
| SOTYKTU ORAL TABLET | 3 | PA; LA; QL |
| SPEVIGO SUBCUTANEOUS SYRINGE | 3 | PA; LA |
| STELARA SUBCUTANEOUS SOLUTION | 3 | PA; LA; QL |
| STELARA SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| <i>sulfacetamide sodium topical cleanser</i> | 1 | |
| <i>sulfacetamide sodium topical cleanser, gel</i> | 1 | |
| <i>sulfacetamide sodium topical shampoo</i> | 1 | |
| TACLONEX TOPICAL SUSPENSION | 3 | QL |
| TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; LA; QL |
| TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; LA; QL |
| TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; LA; QL |
| TALTZ SYRINGE SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| TERSI FOAM TOPICAL FOAM | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| TREMFYA INTRAVENOUS SOLUTION | 3 | PA; LA |
| TREMFYA PEN SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA |
| TREMFYA SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; LA; QL |
| TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML | 3 | PA; LA; QL |
| TREMFYA SUBCUTANEOUS SYRINGE 200 MG/2 ML | 3 | PA; LA |
| VECTICAL TOPICAL OINTMENT | 3 | |
| VTAMA TOPICAL CREAM | 3 | ST; QL |
| WYNZORA TOPICAL CREAM | 3 | ST; QL |
| ZORYVE TOPICAL CREAM 0.3 % | 3 | ST; QL |
| ZORYVE TOPICAL FOAM | 3 | ST; QL |
| BURN THERAPY | | |
| SILVADENE TOPICAL CREAM | 3 | |
| <i>silver sulfadiazine topical cream</i> | 1 | |
| <i>ssd topical cream</i> | 1 | |
| MISCELLANEOUS DERMATOLOGICALS | | |
| ADBRY SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; LA; QL |
| ADBRY SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| AMELUZ TOPICAL GEL | 3 | |
| <i>ammonium lactate topical cream</i> | 1 | |
| <i>ammonium lactate topical lotion</i> | 1 | |
| CIBINQO ORAL TABLET | 3 | PA; LA; QL |
| CORTANE-B TOPICAL LOTION | 3 | |
| <i>diclofenac sodium topical gel 3 %</i> | 1 | PA; QL |
| <i>doxepin topical cream</i> | 1 | ST; QL |
| DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML | 3 | PA; LA; QL |
| EBGLYSS PEN SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA |
| EFUDEX TOPICAL CREAM | 3 | QL |
| EUCRISA TOPICAL OINTMENT | 2 | ST; QL |
| FLUOROPLEX TOPICAL CREAM | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>fluorouracil topical cream 5 %</i> | 1 | QL |
| <i>fluorouracil topical solution 2 %</i> | 1 | |
| <i>fluorouracil topical solution 5 %</i> | 1 | QL |
| HYFTOR TOPICAL GEL | 3 | PA |
| IODOFLEX TOPICAL PADS, MEDICATED | 3 | |
| IODOSORB TOPICAL GEL | 3 | |
| LEVULAN TOPICAL SOLUTION | 3 | |
| <i>methoxsalen oral capsule,liqd-filled,rapid rel</i> | 1 | |
| <i>methyl salicylate oil</i> | 1 | |
| <i>methyl salicylate topical liquid</i> | 1 | |
| OPZELURA TOPICAL CREAM | 3 | PA; QL |
| PANRETIN TOPICAL GEL | 3 | PA; QL |
| <i>pimecrolimus topical cream</i> | 1 | ST; QL |
| <i>podofilox topical gel</i> | 1 | ST; QL |
| <i>podofilox topical solution</i> | 1 | |
| <i>prudoxin topical cream</i> | 1 | ST; QL |
| REGRANEX TOPICAL GEL | 2 | QL |
| <i>tacrolimus topical ointment</i> | 1 | ST; QL |
| TOLAK TOPICAL CREAM | 3 | |
| VALCHLOR TOPICAL GEL | 3 | PA; LA; QL |
| <i>wintergreen oil oil</i> | 1 | |
| ZONALON TOPICAL CREAM | 3 | ST; QL |
| THERAPY FOR ACNE | | |
| ABSORICA ORAL CAPSULE | 3 | ST |
| <i>accutane oral capsule</i> | 1 | |
| ACZONE TOPICAL GEL | 3 | ST |
| ACZONE TOPICAL GEL WITH PUMP | 3 | ST |
| <i>adapalene topical cream</i> | 1 | |
| <i>adapalene topical gel 0.3 %</i> | 1 | |
| <i>adapalene topical gel with pump</i> | 1 | |
| ADAPALENE TOPICAL LOTION | 3 | ST |
| <i>adapalene topical solution</i> | 1 | |
| <i>adapalene topical swab</i> | 1 | ST |
| <i>adapalene-benzoyl peroxide topical gel with pump</i> | 1 | |
| AKLIEF TOPICAL CREAM | 3 | PA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| ALTRENO TOPICAL LOTION | 3 | |
| <i>amnesteem oral capsule</i> | 1 | |
| AMZEEQ TOPICAL FOAM | 3 | ST |
| ARAZLO TOPICAL LOTION | 3 | PA |
| AVAR LS TOPICAL CLEANSER | 3 | ST |
| <i>avar topical cleanser</i> | 1 | |
| AVAR-E TOPICAL CREAM | 3 | ST |
| <i>azelaic acid topical gel</i> | 1 | |
| AZELEX TOPICAL CREAM | 3 | ST |
| BENZAMYCIN TOPICAL GEL | 3 | ST |
| BENZepro (MICROSPHERES) TOPICAL CLEANSER | 3 | ST |
| <i>benzepro topical towelette</i> | 1 | |
| <i>benzoyl peroxide topical cleanser 7 %</i> | 1 | |
| <i>benzoyl peroxide topical foam</i> | 1 | |
| <i>bp 10-1 topical cleanser</i> | 1 | ST |
| <i>brimonidine topical gel with pump</i> | 1 | PA |
| <i>claravis oral capsule</i> | 1 | |
| CLEOCIN T TOPICAL LOTION | 3 | ST; QL |
| CLINDACIN ETZ TOPICAL KIT | 3 | ST |
| <i>clindacin etz topical swab</i> | 1 | |
| <i>clindacin p topical swab</i> | 1 | |
| CLINDACIN PAC TOPICAL KIT | 3 | ST |
| <i>clindacin topical foam</i> | 1 | QL |
| <i>clindamycin phosphate topical foam</i> | 1 | QL |
| <i>clindamycin phosphate topical gel</i> | 1 | QL |
| <i>clindamycin phosphate topical gel, once daily</i> | 1 | ST; QL |
| <i>clindamycin phosphate topical lotion</i> | 1 | QL |
| <i>clindamycin phosphate topical solution</i> | 1 | QL |
| <i>clindamycin phosphate topical swab</i> | 1 | |
| <i>clindamycin-benzoyl peroxide topical gel</i> | 1 | |
| <i>clindamycin-benzoyl peroxide topical gel with pump</i> | 1 | |
| <i>clindamycin-tretinoin topical gel</i> | 1 | |
| <i>dapsone topical gel</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>dapsone topical gel with pump</i> | 1 | |
| DIFFERIN TOPICAL CREAM | 3 | ST |
| DIFFERIN TOPICAL GEL WITH PUMP | 3 | ST |
| DIFFERIN TOPICAL LOTION | 3 | ST |
| EPIDUO FORTE TOPICAL GEL WITH PUMP | 3 | ST |
| EPSOLAY TOPICAL CREAM | 3 | ST |
| <i>ery pads topical swab</i> | 1 | |
| <i>erygel topical gel</i> | 1 | |
| <i>erythromycin with ethanol topical gel</i> | 1 | |
| <i>erythromycin with ethanol topical solution</i> | 1 | |
| <i>erythromycin-benzoyl peroxide topical gel</i> | 1 | |
| EVOCLIN TOPICAL FOAM | 3 | ST; QL |
| FINACEA TOPICAL FOAM | 2 | ST |
| <i>isotretinoin oral capsule</i> | 1 | |
| <i>ivermectin topical cream</i> | 1 | QL |
| METROCREAM TOPICAL CREAM | 3 | ST |
| METROGEL TOPICAL GEL 1 % | 3 | ST |
| <i>metronidazole topical cream</i> | 1 | |
| <i>metronidazole topical gel</i> | 1 | |
| <i>metronidazole topical gel with pump</i> | 1 | |
| <i>metronidazole topical lotion</i> | 1 | |
| MIRVASO TOPICAL GEL WITH PUMP | 2 | PA |
| NEUAC KIT TOPICAL COMBO PACK, CREAM AND GEL | 3 | ST |
| <i>neuac topical gel</i> | 1 | |
| ONEXTON TOPICAL GEL WITH PUMP | 3 | ST |
| PACNEX TOPICAL CLEANSER | 3 | ST |
| PLEXION CLEANSING CLOTHS TOPICAL PADS, MEDICATED | 3 | ST |
| PLEXION TOPICAL CLEANSER | 3 | ST |
| PLEXION TOPICAL CREAM | 3 | ST |
| PLEXION TOPICAL LOTION | 3 | ST |
| PR BENZOYL PEROXIDE TOPICAL CLEANSER | 3 | ST |
| RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.06 %, 0.08 % | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| RETIN-A TOPICAL CREAM | 3 | |
| RETIN-A TOPICAL GEL | 3 | |
| RHOFADE TOPICAL CREAM | 3 | PA |
| <i>rosadan topical cream</i> | 1 | |
| <i>rosadan topical gel</i> | 1 | |
| ROSDAN TOPICAL KIT, CLEANSER AND GEL | 3 | ST |
| ROSDAN TOPICAL KIT,CLEANSER AND CREAM | 3 | ST |
| <i>rosula cleansing cloths topical pads, medicated</i> | 1 | |
| ROSULA TOPICAL CLEANSER | 3 | ST |
| SOOLANTRA TOPICAL CREAM | 3 | ST; QL |
| <i>sss 10-5 topical cream</i> | 1 | |
| <i>sss 10-5 topical foam</i> | 1 | |
| <i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 10-5 % (w/w), 9-4 %, 9-4.5 %, 9.8-4.8 %</i> | 1 | |
| <i>sulfacetamide sodium-sulfur topical cream</i> | 1 | |
| <i>sulfacetamide sodium-sulfur topical lotion</i> | 1 | |
| <i>sulfacetamide sodium-sulfur topical pads, medicated</i> | 1 | |
| <i>sulfacetamide sodium-sulfur topical suspension 10-5 %, 8-4 %</i> | 1 | |
| <i>sulfacleanse 8-4 topical suspension</i> | 1 | ST |
| SUMADAN TOPICAL CLEANSER | 3 | ST |
| SUMADAN TOPICAL KIT | 3 | ST |
| SUMADAN XLT TOPICAL COMBO PACK,CLEANSER AND CREAM | 3 | ST |
| SUMAXIN CP TOPICAL KIT | 3 | ST |
| SUMAXIN TOPICAL CLEANSER | 3 | ST |
| SUMAXIN TOPICAL PADS, MEDICATED | 3 | ST |
| SUMAXIN TS TOPICAL SUSPENSION | 3 | ST |
| <i>tazarotene topical cream</i> | 1 | PA |
| <i>tazarotene topical gel</i> | 1 | PA |
| <i>tretinoin microspheres topical gel</i> | 1 | |
| <i>tretinoin microspheres topical gel with pump</i> | 1 | |
| <i>tretinoin topical cream</i> | 1 | |
| <i>tretinoin topical gel</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| TWYNEO TOPICAL CREAM | 3 | ST |
| VANOXIDE-HC TOPICAL SUSPENSION | 3 | ST |
| <i>zenatane oral capsule</i> | 1 | |
| ZIANA TOPICAL GEL | 3 | ST |
| TOPICAL ANESTHETICS | | |
| <i>dermacinrx lidocan topical adhesive patch,medicated</i> | 1 | PA |
| <i>lidocaine hcl laryngotracheal solution</i> | 1 | |
| <i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i> | 1 | |
| <i>lidocaine hcl-hydrocortison ac topical cream</i> | 1 | |
| <i>lidocaine topical adhesive patch,medicated 5 %</i> | 1 | PA |
| <i>lidocaine topical ointment</i> | 1 | QL |
| <i>lidocaine viscous mucous membrane solution</i> | 1 | |
| <i>lidocaine-prilocaine topical cream</i> | 1 | QL |
| <i>lidocaine-prilocaine topical kit</i> | 1 | |
| <i>lidocan iii topical adhesive patch,medicated</i> | 1 | PA |
| <i>lidocan iv topical adhesive patch,medicated</i> | 1 | PA |
| <i>lidocan v topical adhesive patch,medicated</i> | 1 | PA |
| <i>lidocort topical cream</i> | 1 | |
| NYNUTEY TOPICAL CREAM | 3 | |
| ZTLIDO TOPICAL ADHESIVE PATCH,MEDICATED | 2 | PA |
| TOPICAL ANTIBACTERIALS | | |
| ALTABAX TOPICAL OINTMENT | 3 | ST; QL |
| CENTANY AT TOPICAL OINTMENT KIT | 3 | ST; QL |
| CENTANY TOPICAL OINTMENT | 3 | ST; QL |
| <i>gentamicin topical cream</i> | 1 | QL |
| <i>gentamicin topical ointment</i> | 1 | QL |
| KLARON TOPICAL SUSPENSION | 3 | ST |
| <i>lugols topical solution</i> | 1 | |
| <i>mafenide acetate topical packet</i> | 1 | |
| <i>mupirocin calcium topical cream</i> | 1 | ST; QL |
| <i>mupirocin topical ointment</i> | 1 | QL |
| NEO-SYNALAR KIT TOPICAL CREAM | 3 | |
| NEO-SYNALAR TOPICAL CREAM | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>strong iodine topical solution</i> | 1 | |
| <i>sulfacetamide sodium (acne) topical suspension</i> | 1 | |
| SULFAMYLON TOPICAL CREAM | 2 | |
| XEPI TOPICAL CREAM | 3 | ST; QL |
| TOPICAL ANTIFUNGALS | | |
| CICLODAN KIT TOPICAL COMBO PACK | 3 | |
| CICLODAN KIT TOPICAL SOLUTION | 3 | ST |
| <i>ciclodan topical cream</i> | 1 | QL |
| <i>ciclodan topical solution</i> | 1 | |
| <i>ciclopirox topical cream</i> | 1 | QL |
| <i>ciclopirox topical gel</i> | 1 | QL |
| <i>ciclopirox topical shampoo</i> | 1 | QL |
| <i>ciclopirox topical solution</i> | 1 | |
| <i>ciclopirox topical suspension</i> | 1 | QL |
| <i>ciclopirox-ure-camph-menth-euc topical solution</i> | 1 | |
| <i>clotrimazole topical cream</i> | 1 | QL |
| <i>clotrimazole topical solution</i> | 1 | QL |
| <i>clotrimazole-betamethasone topical cream</i> | 1 | QL |
| <i>clotrimazole-betamethasone topical lotion</i> | 1 | QL |
| <i>econazole topical cream</i> | 1 | QL |
| EXELDERM TOPICAL CREAM | 3 | QL |
| EXELDERM TOPICAL SOLUTION | 3 | QL |
| EXTINA TOPICAL FOAM | 3 | ST; QL |
| JUBLIA TOPICAL SOLUTION WITH APPLICATOR | 3 | ST |
| <i>ketoconazole topical cream</i> | 1 | QL |
| <i>ketoconazole topical foam</i> | 1 | ST; QL |
| <i>ketoconazole topical shampoo</i> | 1 | QL |
| <i>ketodan kit topical combo pack</i> | 1 | ST |
| <i>ketodan topical foam</i> | 1 | ST; QL |
| <i>klayesta topical powder</i> | 1 | QL |
| LOPROX (AS OLAMINE) TOPICAL CREAM | 3 | QL |
| LOPROX (AS OLAMINE) TOPICAL SUSPENSION | 3 | QL |
| LOPROX KIT TOPICAL COMBO PACK | 3 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| LOPROX KIT TOPICAL KIT, SUSPENSION AND CLEANSER | 3 | QL |
| <i>naftifine topical cream</i> | 1 | QL |
| <i>naftifine topical gel 2 %</i> | 1 | QL |
| NAFTIN TOPICAL GEL 2 % | 3 | QL |
| <i>nyamyc topical powder</i> | 1 | QL |
| <i>nystatin topical cream</i> | 1 | QL |
| <i>nystatin topical ointment</i> | 1 | QL |
| <i>nystatin topical powder</i> | 1 | QL |
| <i>nystatin-triamcinolone topical cream</i> | 1 | QL |
| <i>nystatin-triamcinolone topical ointment</i> | 1 | QL |
| <i>nystop topical powder</i> | 1 | QL |
| <i>oxiconazole topical cream</i> | 1 | QL |
| <i>tavaborole topical solution with applicator</i> | 1 | ST |
| TOPICAL ANTIVIRALS | | |
| <i>acyclovir topical cream</i> | 1 | PA; QL |
| <i>acyclovir topical ointment</i> | 1 | PA; QL |
| DENAVIR TOPICAL CREAM | 3 | |
| <i>penciclovir topical cream</i> | 1 | |
| ZOVIRAX TOPICAL CREAM | 3 | PA; QL |
| TOPICAL CORTICOSTEROIDS | | |
| <i>ala-cort topical cream 1 %</i> | 1 | |
| ALA-SCALP TOPICAL LOTION | 3 | ST |
| <i>alclometasone topical cream</i> | 1 | |
| <i>alclometasone topical ointment</i> | 1 | |
| <i>amcinonide topical cream</i> | 1 | ST |
| <i>amcinonide topical ointment</i> | 1 | ST |
| <i>apexicon e topical cream</i> | 1 | ST |
| <i>beser topical lotion</i> | 1 | ST |
| <i>betamethasone dipropionate topical cream</i> | 1 | |
| <i>betamethasone dipropionate topical lotion</i> | 1 | |
| <i>betamethasone dipropionate topical ointment</i> | 1 | |
| <i>betamethasone valerate topical cream</i> | 1 | |
| <i>betamethasone valerate topical foam</i> | 1 | ST |
| <i>betamethasone valerate topical lotion</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>betamethasone valerate topical ointment</i> | 1 | |
| <i>betamethasone, augmented topical cream</i> | 1 | |
| <i>betamethasone, augmented topical gel</i> | 1 | |
| <i>betamethasone, augmented topical lotion</i> | 1 | |
| <i>betamethasone, augmented topical ointment</i> | 1 | |
| BRYHALI TOPICAL LOTION | 3 | ST |
| CAPEX TOPICAL SHAMPOO | 3 | ST |
| <i>clobetasol scalp solution</i> | 1 | QL |
| <i>clobetasol topical cream</i> | 1 | QL |
| <i>clobetasol topical foam</i> | 1 | ST; QL |
| <i>clobetasol topical gel</i> | 1 | QL |
| <i>clobetasol topical lotion</i> | 1 | ST; QL |
| <i>clobetasol topical ointment</i> | 1 | QL |
| <i>clobetasol topical shampoo</i> | 1 | ST; QL |
| <i>clobetasol topical spray,non-aerosol</i> | 1 | ST; QL |
| <i>clobetasol-emollient topical cream</i> | 1 | QL |
| <i>clobetasol-emollient topical foam</i> | 1 | ST; QL |
| CLOBEX TOPICAL SHAMPOO | 3 | ST; QL |
| CLOBEX TOPICAL SPRAY,NON-AEROSOL | 3 | ST; QL |
| <i>clocortolone pivalate topical cream</i> | 1 | |
| CLODAN KIT TOPICAL KIT,SHAMPOO AND CLEANSER | 3 | ST; QL |
| <i>clodan topical shampoo</i> | 1 | ST; QL |
| CORDRAN TAPE LARGE ROLL TOPICAL TAPE | 3 | ST |
| CORDRAN TOPICAL CREAM | 3 | ST; QL |
| CORDRAN TOPICAL LOTION | 3 | ST; QL |
| CORDRAN TOPICAL OINTMENT | 3 | ST; QL |
| DERMA-SMOOTHIE/FS BODY OIL TOPICAL OIL | 3 | ST |
| DERMA-SMOOTHIE/FS SCALP OIL SCALP OIL | 3 | ST |
| <i>desonide topical cream</i> | 1 | |
| <i>desonide topical gel</i> | 1 | ST |
| <i>desonide topical lotion</i> | 1 | ST |
| <i>desonide topical ointment</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>desoximetasone topical cream</i> | 1 | ST |
| <i>desoximetasone topical gel</i> | 1 | ST |
| <i>desoximetasone topical ointment</i> | 1 | ST |
| <i>desoximetasone topical spray,non-aerosol</i> | 1 | ST |
| <i>diflorasone topical cream</i> | 1 | ST; QL |
| <i>diflorasone topical ointment</i> | 1 | ST; QL |
| DIPROLENE (AUGMENTED) TOPICAL OINTMENT | 3 | ST |
| DUOBRII TOPICAL LOTION | 3 | ST; QL |
| <i>fluocinolone and shower cap scalp oil</i> | 1 | |
| <i>fluocinolone topical cream</i> | 1 | |
| <i>fluocinolone topical oil</i> | 1 | |
| <i>fluocinolone topical ointment</i> | 1 | |
| <i>fluocinolone topical solution</i> | 1 | |
| <i>fluocinonide topical cream 0.05 %</i> | 1 | QL |
| <i>fluocinonide topical cream 0.1 %</i> | 1 | ST; QL |
| <i>fluocinonide topical gel</i> | 1 | QL |
| <i>fluocinonide topical ointment</i> | 1 | QL |
| <i>fluocinonide topical solution</i> | 1 | QL |
| <i>fluocinonide-e topical cream</i> | 1 | QL |
| <i>flurandrenolide topical cream</i> | 1 | ST; QL |
| <i>flurandrenolide topical lotion</i> | 1 | ST; QL |
| <i>flurandrenolide topical ointment</i> | 1 | ST; QL |
| <i>fluticasone propionate topical cream</i> | 1 | |
| <i>fluticasone propionate topical lotion</i> | 1 | ST |
| <i>fluticasone propionate topical ointment</i> | 1 | |
| <i>halcinonide topical cream</i> | 1 | ST |
| <i>halobetasol propionate topical cream</i> | 1 | |
| <i>halobetasol propionate topical foam</i> | 1 | ST |
| <i>halobetasol propionate topical ointment</i> | 1 | |
| HALOG TOPICAL CREAM | 3 | ST |
| HALOG TOPICAL OINTMENT | 3 | ST |
| HALOG TOPICAL SOLUTION | 3 | ST |
| <i>hydrocortisone butyrate topical cream</i> | 1 | QL |
| <i>hydrocortisone butyrate topical lotion</i> | 1 | ST; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>hydrocortisone butyrate topical ointment</i> | 1 | ST; QL |
| <i>hydrocortisone butyrate topical solution</i> | 1 | ST; QL |
| <i>hydrocortisone topical cream 1 %, 2.5 %</i> | 1 | |
| <i>hydrocortisone topical lotion 2 %, 2.5 %</i> | 1 | |
| <i>hydrocortisone topical ointment 1 %, 2.5 %</i> | 1 | |
| <i>hydrocortisone valerate topical cream</i> | 1 | |
| <i>hydrocortisone valerate topical ointment</i> | 1 | |
| KENALOG TOPICAL AEROSOL | 3 | ST; QL |
| <i>mometasone topical cream</i> | 1 | |
| <i>mometasone topical ointment</i> | 1 | |
| <i>mometasone topical solution</i> | 1 | |
| NUCORT TOPICAL LOTION | 3 | ST |
| OLUX TOPICAL FOAM | 3 | ST; QL |
| PANDEL TOPICAL CREAM | 3 | ST |
| <i>prednicarbate topical cream</i> | 1 | |
| <i>prednicarbate topical ointment</i> | 1 | |
| PROCTOCORT TOPICAL CREAM | 3 | ST |
| SCALACORT DK TOPICAL COMBO PACK | 3 | ST |
| <i>scalacort topical lotion</i> | 1 | |
| SYNALAR CREAM KIT TOPICAL CREAM | 3 | ST |
| SYNALAR OINTMENT KIT TOPICAL COMBO PACK,OINTMENT AND CREAM | 3 | ST |
| SYNALAR TOPICAL CREAM | 3 | ST |
| SYNALAR TOPICAL OINTMENT | 3 | ST |
| SYNALAR TOPICAL SOLUTION | 3 | ST |
| SYNALAR TS TOPICAL KIT | 3 | ST |
| TEXACORT TOPICAL SOLUTION | 3 | ST |
| TOPICORT TOPICAL CREAM | 3 | ST |
| TOPICORT TOPICAL GEL | 3 | ST |
| TOPICORT TOPICAL OINTMENT | 3 | ST |
| <i>tovet emollient topical foam</i> | 1 | ST; QL |
| <i>triamcinolone acetonide topical aerosol</i> | 1 | ST; QL |
| <i>triamcinolone acetonide topical cream</i> | 1 | |
| <i>triamcinolone acetonide topical lotion</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i> | 1 | |
| <i>triamcinolone acetonide topical ointment 0.05 %</i> | 1 | ST |
| <i>triderm topical cream 0.1 %</i> | 1 | |
| <i>triderm topical cream 0.5 %</i> | 1 | ST |
| TOPICAL ENZYMES | | |
| SANTYL TOPICAL OINTMENT | 2 | QL |
| TOPICAL SCABICIDES / PEDICULICIDES | | |
| <i>crotan topical lotion</i> | 1 | |
| ELIMITE TOPICAL CREAM | 3 | |
| EURAX TOPICAL CREAM | 3 | |
| EURAX TOPICAL LOTION | 3 | |
| <i>malathion topical lotion</i> | 1 | |
| OVIDE TOPICAL LOTION | 3 | |
| <i>permethrin topical cream</i> | 1 | |
| <i>spinosad topical suspension</i> | 1 | |
| ULESFIA TOPICAL LOTION | 3 | |
| DIAGNOSTICS & MISCELLANEOUS AGENTS | | |
| ANOREXIANTS | | |
| ADIPEX-P ORAL TABLET | 3 | PA |
| <i>benzphetamine oral tablet</i> | 1 | PA |
| CONTRAVE ORAL TABLET EXTENDED RELEASE | 3 | PA |
| <i>diethylpropion oral tablet</i> | 1 | PA |
| <i>diethylpropion oral tablet extended release</i> | 1 | PA |
| IMCIVREE SUBCUTANEOUS SOLUTION | 3 | PA; QL |
| LOMAIRA ORAL TABLET | 3 | PA |
| ORLISTAT ORAL CAPSULE | 3 | PA |
| <i>phendimetrazine tartrate oral capsule, extended release</i> | 1 | PA |
| <i>phendimetrazine tartrate oral tablet</i> | 1 | PA |
| <i>phentermine oral capsule</i> | 1 | PA |
| <i>phentermine oral tablet</i> | 1 | PA |
| QSYMIA ORAL CAPSULE, ER MULTIPHASE 24 HR | 3 | PA |
| WEGOVY SUBCUTANEOUS PEN INJECTOR | 2 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| XENICAL ORAL CAPSULE | 3 | PA |
| ZEPBOUND SUBCUTANEOUS PEN INJECTOR | 2 | PA; QL |
| ZEPBOUND SUBCUTANEOUS SOLUTION 2.5 MG/0.5 ML | 3 | PA; QL |
| ZEPBOUND SUBCUTANEOUS SOLUTION 5 MG/0.5 ML | 2 | PA; QL |
| IRRIGATING SOLUTIONS | | |
| SORBITOL IRRIGATION SOLUTION | 3 | |
| SORBITOL-MANNITOL TRANSURETHRAL SOLUTION | 3 | |
| <i>tis-u-sol pentalyte irrigation irrigation solution</i> | 1 | |
| MISCELLANEOUS AGENTS | | |
| <i>acamprosate oral tablet, delayed release (dr/ec)</i> | 1 | |
| AGRYLIN ORAL CAPSULE | 3 | |
| <i>anagrelide oral capsule</i> | 1 | |
| BUPHENYL ORAL POWDER | 3 | |
| BUPHENYL ORAL TABLET | 3 | |
| <i>caffeine citrate oral solution</i> | 1 | |
| CARBAGLU ORAL TABLET, DISPERSIBLE | 3 | PA; LA |
| <i>carglumic acid oral tablet, dispersible</i> | 3 | PA |
| CARNITOR (SUGAR-FREE) ORAL SOLUTION | 3 | |
| CARNITOR ORAL SOLUTION | 3 | |
| CARNITOR ORAL TABLET | 3 | |
| <i>cevimeline oral capsule</i> | 1 | |
| CHEMET ORAL CAPSULE | 2 | PA |
| <i>deferasirox oral granules in packet</i> | 3 | PA; LA; QL |
| <i>deferasirox oral tablet</i> | 3 | PA; LA; QL |
| <i>deferasirox oral tablet, dispersible</i> | 3 | PA; LA; QL |
| <i>deferiprone oral tablet</i> | 3 | PA; LA |
| <i>disulfiram oral tablet</i> | 1 | |
| <i>droxidopa oral capsule</i> | 3 | PA; LA; QL |
| EMPAVELI SUBCUTANEOUS SOLUTION | 3 | PA |
| ENDARI ORAL POWDER IN PACKET | 3 | PA; LA |
| EVOXAC ORAL CAPSULE | 3 | |
| FABHALTA ORAL CAPSULE | 3 | PA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| FERRIPROX (2 TIMES A DAY) ORAL TABLET, MODIFIED RELEASE | 3 | PA |
| FERRIPROX ORAL SOLUTION | 3 | PA |
| FERRIPROX ORAL TABLET | 3 | PA |
| <i>glutamine (sickle cell) oral powder in packet</i> | 3 | PA; LA |
| INCRELEX SUBCUTANEOUS SOLUTION | 3 | PA; LA |
| JOENJA ORAL TABLET | 3 | PA; QL |
| <i>levocarnitine (with sugar) oral solution</i> | 1 | |
| <i>levocarnitine oral solution 100 mg/ml</i> | 1 | |
| <i>levocarnitine oral tablet</i> | 1 | |
| LITFULO ORAL CAPSULE | 3 | PA; LA; QL |
| LITHOSTAT ORAL TABLET | 3 | |
| METOPIRONE ORAL CAPSULE | 3 | |
| <i>midodrine oral tablet 5 mg</i> | 1 | |
| <i>nitisinone oral capsule</i> | 3 | PA; LA |
| NITYR ORAL TABLET | 3 | PA; LA |
| OLPRUVA ORAL PELLETS IN PACKET | 3 | |
| ORFADIN ORAL CAPSULE | 3 | PA; LA |
| ORFADIN ORAL SUSPENSION | 3 | PA; LA |
| PHEBURANE ORAL GRANULES | 3 | LA |
| <i>pilocarpine hcl oral tablet 5 mg</i> | 1 | |
| PYRUKYND ORAL TABLET | 3 | PA; LA; QL |
| PYRUKYND ORAL TABLETS,DOSE PACK | 3 | PA; LA; QL |
| RADIOGARDASE ORAL CAPSULE | 3 | |
| REZDIFFRA ORAL TABLET | 3 | PA; LA; QL |
| RILUTEK ORAL TABLET | 3 | PA |
| <i>riluzole oral tablet</i> | 1 | PA |
| <i>risedronate oral tablet 30 mg</i> | 1 | QL |
| SALAGEN (PILOCARPINE) ORAL TABLET 5 MG | 3 | |
| <i>sodium phenylbutyrate oral powder</i> | 1 | |
| <i>sodium phenylbutyrate oral tablet</i> | 1 | |
| SOHONOS ORAL CAPSULE | 3 | PA; LA; QL |
| SYPRINE ORAL CAPSULE | 3 | PA |
| TAVNEOS ORAL CAPSULE | 3 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|-----------|-----------------------|
| TEGLUTIK ORAL SUSPENSION | 3 | PA |
| THIOLA EC ORAL TABLET,DELAYED RELEASE (DR/EC) | 3 | |
| TIGLUTIK ORAL SUSPENSION | 3 | PA |
| <i>tiopronin oral tablet</i> | 3 | LA |
| <i>tiopronin oral tablet, delayed release (dr/ec)</i> | 3 | |
| <i>trientine oral capsule 250 mg</i> | 1 | PA |
| VOYDEYA ORAL TABLET | 3 | PA |
| XURIDEN ORAL GRANULES IN PACKET | 3 | PA |
| ZOKINVY ORAL CAPSULE | 3 | PA; QL |
| SMOKING DETERRENTS | | |
| <i>bupropion hcl (smoking deter) oral tablet extended release 12 hr</i> | ACA | ACA |
| CHANTIX CONTINUING MONTH BOX ORAL TABLET | ACA | ACA |
| CHANTIX ORAL TABLET 1 MG | ACA | ACA |
| CHANTIX STARTING MONTH BOX ORAL TABLETS,DOSE PACK | ACA | ACA |
| NICODERM CQ TRANSDERMAL PATCH 24 HOUR | ACA | ACA; OTC |
| NICORETTE BUCCAL GUM 2 MG | ACA | ACA; OTC |
| <i>nicorette buccal gum 4 mg</i> | ACA | ACA; OTC |
| NICORETTE BUCCAL LOZENGE | ACA | ACA; OTC |
| NICORETTE BUCCAL MINI LOZENGE | ACA | ACA; OTC |
| <i>nicotine (polacrilex) buccal gum</i> | ACA | ACA; OTC |
| <i>nicotine (polacrilex) buccal lozenge</i> | ACA | ACA; OTC |
| <i>nicotine (polacrilex) buccal mini lozenge</i> | ACA | ACA; OTC |
| <i>nicotine transdermal patch 24 hour</i> | ACA | ACA; OTC |
| <i>nicotine transdermal patch, td daily, sequential</i> | ACA | ACA; OTC |
| NICOTROL NS NASAL SPRAY, NON-AEROSOL | ACA | ACA |
| <i>quit 2 buccal gum</i> | ACA | ACA; OTC |
| <i>quit 2 buccal lozenge</i> | ACA | ACA; OTC |
| <i>quit 4 buccal gum</i> | ACA | ACA; OTC |
| <i>quit 4 buccal lozenge</i> | ACA | ACA; OTC |
| <i>stop smoking aid buccal lozenge</i> | ACA | ACA; OTC |
| <i>varenicline oral tablet</i> | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|-----------|-----------------------|
| <i>varenicline oral tablets,dose pack</i> | ACA | ACA |
| EAR, NOSE & THROAT MEDICATIONS | | |
| MISCELLANEOUS AGENTS | | |
| <i>azelastine nasal spray,non-aerosol 137 mcg (0.1 %)</i> | 1 | QL |
| <i>azelastine nasal spray,non-aerosol 205.5 mcg (0.15 %)</i> | 1 | |
| <i>chlorhexidine gluconate mucous membrane mouthwash</i> | 1 | |
| CLINPRO 5000 DENTAL PASTE | 3 | |
| <i>denta 5000 plus dental cream</i> | 1 | |
| <i>denta 5000 plus sensitive dental paste</i> | 1 | |
| <i>dentagel dental gel</i> | 1 | |
| <i>fluoride (sodium) dental cream</i> | 1 | |
| <i>fluoride (sodium) dental gel</i> | 1 | |
| <i>fluoride (sodium) dental paste</i> | 1 | |
| <i>fluoride (sodium) dental solution</i> | 1 | |
| FLUORIDEX DAILY DEFENSE DENTAL PASTE | 3 | |
| FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE | 3 | |
| FLUORIMAX 5000 DENTAL PASTE | 3 | |
| FLUORIMAX 5000 SENSITIVE DENTAL PASTE | 3 | |
| <i>fraiche 5000 dental gel</i> | 1 | |
| FRAICHE 5000 PREVI DENTAL GEL | 3 | |
| FRAICHE 5000 SENSITIVE DENTAL GEL | 3 | |
| <i>ipratropium bromide nasal spray,non-aerosol</i> | 1 | QL |
| JUST RIGHT 5000 DENTAL PASTE | 3 | |
| <i>kourzeq dental paste</i> | 1 | |
| <i>olopatadine nasal spray,non-aerosol</i> | 1 | QL |
| <i>oralone dental paste</i> | 1 | |
| <i>paroex oral rinse mucous membrane mouthwash</i> | 1 | |
| PERIDEX MUCOUS MEMBRANE MOUTHWASH | 3 | |
| <i>periogard mucous membrane mouthwash</i> | 1 | |
| <i>pilocarpine hcl oral tablet 7.5 mg</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE | 3 | |
| PREVIDENT 5000 ENAMEL PROTECT DENTAL PASTE | 3 | |
| PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE | 3 | |
| PREVIDENT 5000 PLUS DENTAL CREAM | 3 | |
| PREVIDENT 5000 SENSITIVE DENTAL PASTE | 3 | |
| PREVIDENT DENTAL GEL | 3 | |
| PREVIDENT DENTAL SOLUTION | 3 | |
| PREVIDENT KIDS DENTAL PASTE | 3 | |
| Q-CARE RX Q4 KIT | 3 | |
| SALAGEN (PILOCARPINE) ORAL TABLET 7.5 MG | 3 | |
| <i>sf 5000 plus dental cream</i> | 1 | |
| <i>sf dental gel</i> | 1 | |
| <i>sodium fluoride 5000 plus dental cream</i> | 1 | |
| <i>sodium fluoride-pot nitrate dental paste</i> | 1 | |
| <i>triamcinolone acetate dental paste</i> | 1 | |
| MISCELLANEOUS OTIC PREPARATIONS | | |
| <i>acetic acid otic (ear) solution</i> | 1 | |
| <i>ciprofloxacin hcl otic (ear) dropperette</i> | 1 | |
| DERMOTIC OIL OTIC (EAR) DROPS | 3 | |
| <i>flac otic oil otic (ear) drops</i> | 1 | |
| <i>fluocinolone acetonide oil otic (ear) drops</i> | 1 | |
| <i>hydrocortisone-acetic acid otic (ear) drops</i> | 1 | |
| <i>ofloxacin otic (ear) drops</i> | 1 | |
| OTIC STEROID / ANTIBIOTIC | | |
| <i>ciprofloxacin-dexamethasone otic (ear) drops,suspension</i> | 1 | |
| CORTISPORIN-TC OTIC (EAR) DROPS,SUSPENSION | 3 | |
| <i>neomycin-polymyxin-hc otic (ear) drops,suspension</i> | 1 | |
| <i>neomycin-polymyxin-hc otic (ear) solution</i> | 1 | |
| OTOVEL OTIC (EAR) SOLUTION | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|-----------|-----------------------|
| ENDOCRINE/DIABETES | | |
| ADRENAL HORMONES | | |
| ACTHAR SELFJECT SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA |
| CORTEF ORAL TABLET | 3 | |
| <i>cortisone oral tablet</i> | 1 | |
| <i>deflazacort oral suspension</i> | 3 | |
| <i>deflazacort oral tablet</i> | 3 | LA |
| <i>dexabliss oral tablets,dose pack</i> | 1 | ST |
| <i>dexamethasone intensol oral drops</i> | 1 | |
| <i>dexamethasone oral elixir</i> | 1 | |
| <i>dexamethasone oral solution</i> | 1 | |
| <i>dexamethasone oral tablet</i> | 1 | |
| <i>dexamethasone oral tablets,dose pack</i> | 1 | ST |
| <i>fludrocortisone oral tablet</i> | 1 | |
| <i>hydrocortisone oral tablet</i> | 1 | |
| MEDROL (PAK) ORAL TABLETS,DOSE PACK | 3 | |
| MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG | 3 | |
| <i>methylprednisolone oral tablet</i> | 1 | |
| <i>methylprednisolone oral tablets,dose pack</i> | 1 | |
| <i>millipred dp oral tablets,dose pack</i> | 1 | |
| <i>millipred oral tablet</i> | 1 | |
| ORAPRED ODT ORAL TABLET,DISINTEGRATING | 3 | |
| <i>prednisolone oral solution</i> | 1 | |
| <i>prednisolone oral tablet</i> | 1 | |
| <i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i> | 1 | |
| <i>prednisolone sodium phosphate oral tablet,disintegrating</i> | 1 | |
| <i>prednisone intensol oral concentrate</i> | 1 | |
| <i>prednisone oral solution</i> | 1 | |
| <i>prednisone oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>prednisone oral tablets,dose pack</i> | 1 | |
| RAYOS ORAL TABLET,DELAYED RELEASE (DR/EC) | 3 | ST |
| TAPERDEX ORAL TABLETS,DOSE PACK | 3 | ST |
| TARPEYO ORAL CAPSULE,DELAYED RELEASE(DR/EC) | 3 | PA; QL |
| ZCORT ORAL TABLETS,DOSE PACK | 3 | ST |
| ANTITHYROID AGENTS | | |
| <i>methimazole oral tablet 10 mg, 5 mg</i> | 1 | |
| <i>potassium iodide oral solution</i> | 1 | |
| <i>propylthiouracil oral tablet</i> | 1 | |
| SSKI ORAL SOLUTION | 3 | |
| BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES | | |
| FREESTYLE INSULINX STRIP | 2 | OTC |
| FREESTYLE INSULINX TEST STRIPS STRIP | 2 | OTC |
| FREESTYLE LITE STRIPS STRIP | 2 | OTC |
| FREESTYLE PRECISION NEO STRIPS STRIP | 2 | OTC |
| FREESTYLE TEST STRIP | 2 | OTC |
| DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT | | |
| AEROCHAMBER MECHANICAL VENT SPACER | 2 | |
| EUA PATIENT ASSESSMENT | 2 | |
| SPACE CHAMBER SPACER | 2 | |
| GLUCOSE ELEVATING AGENTS | | |
| BAQSIMI NASAL SPRAY,NON-AEROSOL | 2 | QL |
| <i>diazoxide oral suspension</i> | 1 | |
| <i>glucagon emergency kit (human) injection recon soln</i> | 1 | QL |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR | 2 | QL |
| GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML | 2 | QL |
| GVOKE SUBCUTANEOUS SOLUTION | 2 | QL |
| PROGLYCEM ORAL SUSPENSION | 3 | |
| INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU | | |
| DEXCOM G6 RECEIVER | 2 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| DEXCOM G6 SENSOR DEVICE | 2 | QL |
| DEXCOM G6 TRANSMITTER DEVICE | 2 | QL |
| DEXCOM G7 RECEIVER | 2 | QL |
| DEXCOM G7 SENSOR DEVICE | 2 | QL |
| FREESTYLE CONTROL SOLUTION | 2 | OTC |
| FREESTYLE FREEDOM KIT | 2 | OTC |
| FREESTYLE FREEDOM LITE KIT | 2 | OTC |
| FREESTYLE INSULINX | 2 | OTC |
| FREESTYLE LIBRE 14 DAY READER | 2 | |
| FREESTYLE LIBRE 14 DAY SENSOR KIT | 2 | QL |
| FREESTYLE LIBRE 2 READER | 2 | |
| FREESTYLE LIBRE 2 SENSOR KIT | 2 | QL |
| FREESTYLE LIBRE 3 PLUS SENSOR DEVICE | 2 | QL |
| FREESTYLE LIBRE 3 READER | 2 | QL |
| FREESTYLE LIBRE 3 SENSOR DEVICE | 2 | QL |
| FREESTYLE LITE METER KIT | 2 | OTC |
| OMNIPOD 5 (G6/LIBRE 2 PLUS) SUBCUTANEOUS CARTRIDGE | 2 | |
| OMNIPOD 5 G6-G7 INTRO KT(GEN5) SUBCUTANEOUS CARTRIDGE | 2 | QL |
| OMNIPOD 5 G6-G7 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE | 2 | QL |
| OMNIPOD 5 INTRO(G6/LIBRE2PLUS) SUBCUTANEOUS CARTRIDGE | 2 | |
| OMNIPOD CLASSIC PODS (GEN 3) SUBCUTANEOUS CARTRIDGE | 2 | QL |
| OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE | 2 | QL |
| OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE | 2 | QL |
| OMNIPOD GO PODS 10 UNITS/DAY SUBCUTANEOUS CARTRIDGE | 2 | QL |
| INSULIN THERAPY | | |
| HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT | 2 | |
| HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN | 2 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN | 2 | |
| HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN | 2 | |
| HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION | 2 | |
| HUMALOG TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR | 2 | |
| HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE | 2 | |
| HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION | 2 | |
| HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN | 2 | |
| HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN | 2 | |
| HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION | 2 | |
| HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION | 2 | |
| HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION | 2 | |
| HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN | 2 | |
| INSULIN ASPART U-100 SUBCUTANEOUS CARTRIDGE | 3 | |
| INSULIN ASPART U-100 SUBCUTANEOUS INSULIN PEN | 3 | |
| INSULIN ASPART U-100 SUBCUTANEOUS SOLUTION | 3 | |
| INSULIN GLARGINE-YFGN SUBCUTANEOUS INSULIN PEN | 2 | |
| INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION | 2 | |
| INSULIN LISPRO PROTAMIN-LISPRO SUBCUTANEOUS INSULIN PEN | 2 | |
| INSULIN LISPRO SUBCUTANEOUS INSULIN PEN | 2 | |
| INSULIN LISPRO SUBCUTANEOUS INSULIN PEN, HALF-UNIT | 2 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| INSULIN LISPRO SUBCUTANEOUS SOLUTION | 2 | |
| LEVEMIR U-100 INSULIN SUBCUTANEOUS SOLUTION | 3 | |
| LYUMJEV KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN | 2 | |
| LYUMJEV KWIKPEN U-200 INSULIN SUBCUTANEOUS INSULIN PEN | 2 | |
| LYUMJEV TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR | 2 | |
| LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION | 2 | |
| SEMGLEE(INSULIN GLARGINE-YFGN) SUBCUTANEOUS SOLUTION | 2 | |
| SEMGLEE(INSULIN GLARG-YFGN)PEN SUBCUTANEOUS INSULIN PEN | 2 | |
| SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN | 2 | QL |
| TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN | 2 | |
| TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN | 2 | |
| TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN | 2 | |
| TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN | 2 | |
| TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION | 2 | |
| XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN | 3 | QL |
| MISCELLANEOUS HORMONES | | |
| <i>cabergoline oral tablet</i> | 1 | QL |
| <i>calcitonin (salmon) injection solution</i> | 1 | |
| <i>calcitonin (salmon) nasal spray,non-aerosol</i> | 1 | |
| <i>calcitriol oral capsule</i> | 1 | |
| <i>calcitriol oral solution</i> | 1 | |
| CERDELGA ORAL CAPSULE | 3 | PA; LA; QL |
| <i>cetrotelix subcutaneous kit</i> | 3 | PA |
| CETROTIDE SUBCUTANEOUS KIT | 3 | PA; LA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| CHORIONIC GONADOTROPIN, HUMAN INJECTION RECON SOLN | 3 | PA |
| <i>cinacalcet oral tablet</i> | 1 | PA |
| <i>clomid oral tablet</i> | 1 | |
| <i>clomiphene citrate oral tablet</i> | 1 | PA |
| <i>danazol oral capsule</i> | 1 | |
| DDAVP ORAL TABLET | 3 | |
| DEPO-TESTOSTERONE INTRAMUSCULAR OIL | 3 | |
| <i>desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)</i> | 1 | |
| DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML) | 2 | |
| <i>desmopressin oral tablet</i> | 1 | |
| <i>doxercalciferol oral capsule</i> | 1 | ST |
| <i>fyremadel subcutaneous syringe</i> | 3 | PA; LA |
| GALAFOLD ORAL CAPSULE | 3 | PA; LA; QL |
| <i>ganirelix subcutaneous syringe</i> | 3 | PA; LA |
| GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA |
| GONAL-F RFF SUBCUTANEOUS RECON SOLN | 3 | PA; LA |
| GONAL-F SUBCUTANEOUS RECON SOLN | 3 | PA; LA |
| JATENZO ORAL CAPSULE | 3 | QL |
| <i>javygtor oral powder in packet</i> | 3 | PA; LA |
| <i>javygtor oral tablet,soluble</i> | 3 | PA; LA |
| JYNARQUE ORAL TABLET | 3 | PA; LA; QL |
| JYNARQUE ORAL TABLETS, SEQUENTIAL | 3 | PA; LA; QL |
| MENOPUR SUBCUTANEOUS RECON SOLN | 3 | PA; LA |
| METHITEST ORAL TABLET | 2 | |
| <i>methyltestosterone oral capsule</i> | 1 | |
| <i>mifepristone oral tablet 300 mg</i> | 3 | LA |
| <i>miglustat oral capsule</i> | 3 | PA; LA; QL |
| NOCDURNA (MEN) SUBLINGUAL TABLET,DISINTEGRATING | 3 | PA; QL |
| NOCDURNA (WOMEN) SUBLINGUAL TABLET,DISINTEGRATING | 3 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| NOVAREL INTRAMUSCULAR RECON SOLN 5,000 UNIT | 3 | PA; LA; QL |
| OPFOLDA ORAL CAPSULE | 3 | PA; LA; QL |
| ORILISSA ORAL TABLET | 2 | PA |
| OVIDREL SUBCUTANEOUS SYRINGE | 3 | PA; LA |
| PALYNZIQ SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| <i>paricalcitol oral capsule</i> | 1 | ST |
| PREGNYL INTRAMUSCULAR RECON SOLN | 3 | PA; LA; QL |
| RAYALDEE ORAL CAPSULE,EXTENDED RELEASE 24 HR | 3 | ST |
| ROCALTROL ORAL SOLUTION | 3 | ST |
| <i>sapropterin oral powder in packet</i> | 3 | PA; LA |
| <i>sapropterin oral tablet,soluble</i> | 3 | PA; LA |
| SOMAVERT SUBCUTANEOUS RECON SOLN | 3 | PA; LA |
| STRENSIQ SUBCUTANEOUS SOLUTION | 3 | PA; LA |
| SYNAREL NASAL SPRAY,NON-AEROSOL | 2 | PA |
| <i>testosterone cypionate intramuscular oil</i> | 1 | |
| <i>testosterone enanthate intramuscular oil</i> | 1 | |
| <i>testosterone transdermal gel</i> | 1 | QL |
| <i>testosterone transdermal gel in metered-dose pump</i> | 1 | QL |
| <i>testosterone transdermal gel in packet</i> | 1 | QL |
| <i>testosterone transdermal solution in metered pump w/app</i> | 1 | QL |
| <i>tolvaptan oral tablet</i> | 3 | PA; LA; QL |
| VOGELXO TRANSDERMAL GEL | 3 | QL |
| VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP | 3 | QL |
| VOGELXO TRANSDERMAL GEL IN PACKET | 3 | QL |
| VOXZOGO SUBCUTANEOUS RECON SOLN | 3 | PA; LA |
| XYOSTED SUBCUTANEOUS AUTO-INJECTOR | 2 | QL |
| YORVIPATH SUBCUTANEOUS PEN INJECTOR | 3 | PA |
| ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG | 3 | ST |
| NON-INSULIN HYPOGLYCEMIC AGENTS | | |
| <i>acarbose oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| ACTOPLUS MET ORAL TABLET 15-850 MG | 3 | ST; QL |
| ACTOS ORAL TABLET | 3 | ST; QL |
| BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR | 2 | PA; QL |
| BYETTA SUBCUTANEOUS PEN INJECTOR | 2 | PA; QL |
| CYCLOSET ORAL TABLET | 3 | |
| DUETACT ORAL TABLET | 3 | ST; QL |
| FARXIGA ORAL TABLET | 2 | ST; QL |
| <i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i> | 1 | |
| <i>glipizide oral tablet 10 mg, 5 mg</i> | 1 | |
| <i>glipizide oral tablet extended release 24hr</i> | 1 | |
| <i>glipizide-metformin oral tablet</i> | 1 | |
| GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24HR | 3 | |
| <i>glyburide micronized oral tablet</i> | 1 | |
| <i>glyburide oral tablet</i> | 1 | |
| <i>glyburide-metformin oral tablet</i> | 1 | |
| GLYXAMBI ORAL TABLET | 2 | ST; QL |
| JANUMET ORAL TABLET | 2 | ST; QL |
| JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR | 2 | ST; QL |
| JANUVIA ORAL TABLET | 2 | ST; QL |
| JARDIANCE ORAL TABLET | 2 | ST; QL |
| <i>metformin oral solution</i> | 1 | ST |
| <i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i> | 1 | |
| <i>metformin oral tablet extended release 24 hr</i> | 1 | QL |
| <i>metformin oral tablet extended release 24hr</i> | 1 | ST; QL |
| <i>metformin oral tablet,er gast.retention 24 hr</i> | 1 | ST; QL |
| <i>miglitol oral tablet</i> | 1 | |
| MOUNJARO SUBCUTANEOUS PEN INJECTOR | 2 | PA; QL |
| <i>nateglinide oral tablet</i> | 1 | |
| OSENI ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG | 3 | ST; QL |
| OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML) | 2 | PA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>pioglitazone oral tablet</i> | 1 | QL |
| <i>pioglitazone-glimepiride oral tablet</i> | 1 | QL |
| <i>pioglitazone-metformin oral tablet</i> | 1 | QL |
| PRECOSE ORAL TABLET | 3 | |
| <i>repaglinide oral tablet</i> | 1 | |
| RIOMET ORAL SOLUTION | 3 | ST |
| RYBELSUS ORAL TABLET | 2 | PA; QL |
| <i>saxagliptin oral tablet</i> | 1 | ST; QL |
| <i>saxagliptin-metformin oral tablet, er multiphase 24 hr</i> | 1 | ST; QL |
| SYMLINPEN 120 SUBCUTANEOUS PEN INJECTOR | 2 | PA; QL |
| SYMLINPEN 60 SUBCUTANEOUS PEN INJECTOR | 2 | PA; QL |
| SYNJARDY ORAL TABLET | 2 | ST; QL |
| SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR | 2 | ST; QL |
| TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR | 2 | ST |
| TRULICITY SUBCUTANEOUS PEN INJECTOR | 2 | PA; QL |
| XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR | 2 | ST; QL |
| THYROID HORMONES | | |
| <i>adthyza oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i> | 1 | |
| ARMOUR THYROID ORAL TABLET | 2 | |
| ERMEZA ORAL SOLUTION | 3 | ST |
| <i>euthyrox oral tablet</i> | 1 | |
| <i>levo-t oral tablet</i> | 1 | |
| <i>levothyroxine oral tablet</i> | 1 | |
| <i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i> | 1 | |
| <i>liothyronine oral tablet</i> | 1 | |
| <i>niva thyroid oral tablet</i> | 1 | |
| <i>np thyroid oral tablet</i> | 1 | |
| <i>thyroid (pork) oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|-----------|-----------------------|
| <i>unithroid oral tablet</i> | 1 | |
| GASTROENTEROLOGY | | |
| ANTIDIARRHEALS & ANTISPASMODICS | | |
| <i>anaspaz oral tablet,disintegrating</i> | 1 | |
| <i>atropine intravenous solution</i> | 1 | |
| <i>atropine intravenous syringe 0.25 mg/5 ml (0.05 mg/ml)</i> | 1 | |
| <i>belladonna alkaloids-opium rectal suppository</i> | 1 | PA; QL |
| <i>chlordiazepoxide-clidinium oral capsule</i> | 1 | |
| <i>dicyclomine oral capsule</i> | 1 | |
| <i>dicyclomine oral solution</i> | 1 | |
| <i>dicyclomine oral tablet</i> | 1 | |
| <i>diphenoxylate-atropine oral liquid</i> | 1 | |
| <i>diphenoxylate-atropine oral tablet</i> | 1 | |
| DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML | 3 | |
| DONNATAL ORAL TABLET | 3 | |
| <i>ed-spaz oral tablet,disintegrating</i> | 1 | |
| GLYCATE ORAL TABLET | 3 | |
| <i>glycopyrrolate oral solution</i> | 1 | |
| <i>glycopyrrolate oral tablet</i> | 1 | |
| <i>hyoscyamine sulfate oral drops</i> | 1 | |
| <i>hyoscyamine sulfate oral elixir</i> | 1 | |
| <i>hyoscyamine sulfate oral tablet</i> | 1 | |
| <i>hyoscyamine sulfate oral tablet extended release 12 hr</i> | 1 | |
| <i>hyoscyamine sulfate oral tablet,disintegrating</i> | 1 | |
| <i>hyoscyamine sulfate sublingual tablet</i> | 1 | |
| <i>hyosyne oral drops</i> | 1 | |
| <i>hyosyne oral elixir</i> | 1 | |
| LEVBIID ORAL TABLET EXTENDED RELEASE 12 HR | 3 | |
| LEVSIN ORAL TABLET | 3 | |
| LEVSIN/SL SUBLINGUAL TABLET | 3 | |
| LOMOTIL ORAL TABLET | 3 | |
| <i>loperamide oral capsule</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>methscopolamine oral tablet</i> | 1 | |
| MOTOFEN ORAL TABLET | 3 | |
| NULEV ORAL TABLET,DISINTEGRATING | 3 | |
| <i>opium tincture oral tincture</i> | 1 | |
| <i>oscimin oral tablet</i> | 1 | |
| <i>oscimin sl sublingual tablet</i> | 1 | |
| <i>phenobarb-hyoscy-atropine-scop oral elixir</i> | 1 | |
| <i>phenobarb-hyoscy-atropine-scop oral tablet</i> | 1 | |
| <i>phenohydro oral elixir 16.2-0.1037 -0.0194 mg/5 ml</i> | 1 | |
| <i>phenohydro oral tablet</i> | 1 | |
| ROBINUL FORTE ORAL TABLET | 3 | |
| ROBINUL ORAL TABLET | 3 | |
| SYMAX DUOTAB ORAL TABLET,EXT RELEASE MULTIPHASE | 3 | |
| <i>symax fastabs oral tablet,disintegrating</i> | 1 | |
| <i>symax-sl sublingual tablet</i> | 1 | |
| <i>symax-sr oral tablet extended release 12 hr</i> | 1 | |
| MISCELLANEOUS AGENTS | | |
| AURYXIA ORAL TABLET | 3 | |
| <i>lanthanum oral tablet,chewable</i> | 1 | QL |
| LOKELMA ORAL POWDER IN PACKET | 2 | QL |
| RENVELA ORAL POWDER IN PACKET | 3 | QL |
| RENVELA ORAL TABLET | 3 | QL |
| <i>sevelamer carbonate oral powder in packet</i> | 1 | QL |
| <i>sevelamer carbonate oral tablet</i> | 1 | QL |
| <i>sevelamer hcl oral tablet</i> | 1 | QL |
| <i>sodium polystyrene sulfonate oral powder</i> | 1 | |
| <i>sps (with sorbitol) oral suspension</i> | 1 | |
| <i>sps (with sorbitol) rectal enema</i> | 1 | |
| VELPHORO ORAL TABLET,CHEWABLE | 2 | QL |
| VELTASSA ORAL POWDER IN PACKET | 2 | QL |
| MISCELLANEOUS GASTROINTESTINAL AGENTS | | |
| <i>alosetron oral tablet</i> | 1 | |
| ANA-LEX KIT RECTAL KIT | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| ANALPRAM-HC RECTAL CREAM 1-1 % | 3 | |
| ANALPRAM-HC RECTAL CREAM 2.5-1 % | 3 | ST |
| <i>anucort-hc rectal suppository</i> | 1 | |
| <i>aprepitant oral capsule</i> | 1 | QL |
| <i>aprepitant oral capsule,dose pack</i> | 1 | QL |
| APRISO ORAL CAPSULE,EXTENDED RELEASE 24HR | 3 | |
| AZULFIDINE EN-TABS ORAL TABLET,DELAYED RELEASE (DR/EC) | 3 | |
| AZULFIDINE ORAL TABLET | 3 | |
| <i>balsalazide oral capsule</i> | 1 | |
| <i>betaine oral powder</i> | 3 | PA |
| <i>budesonide oral capsule,delayed,extend.release</i> | 1 | |
| <i>budesonide oral tablet,delayed and ext.release</i> | 1 | |
| <i>budesonide rectal foam</i> | 1 | |
| BYLVAY ORAL CAPSULE | 3 | PA; LA; QL |
| BYLVAY ORAL PELLETT | 3 | PA; LA; QL |
| CHENODAL ORAL TABLET | 3 | PA; LA |
| CHOLBAM ORAL CAPSULE 250 MG | 3 | PA |
| CHOLBAM ORAL CAPSULE 50 MG | 3 | PA; QL |
| <i>citrate of magnesia oral solution</i> | ACA | ACA; OTC |
| <i>citroma oral solution</i> | ACA | ACA; OTC |
| <i>clearlax oral powder</i> | ACA | ACA; OTC |
| COLAZAL ORAL CAPSULE | 3 | |
| COMPAZINE ORAL TABLET | 3 | |
| COMPAZINE RECTAL SUPPOSITORY | 3 | |
| <i>compro rectal suppository</i> | 1 | |
| <i>constulose oral solution</i> | 1 | |
| CORTENEMA RECTAL ENEMA | 3 | |
| CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) | 2 | |
| <i>cromolyn oral concentrate</i> | 1 | |
| DICLEGIS ORAL TABLET,DELAYED RELEASE (DR/EC) | 3 | QL |
| DIPENTUM ORAL CAPSULE | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec)</i> | 1 | QL |
| <i>dronabinol oral capsule</i> | 1 | PA |
| <i>dulcolax (magnesium hydroxide) oral suspension</i> | ACA | ACA; OTC |
| <i>enulose oral solution</i> | 1 | |
| GASTROCROM ORAL CONCENTRATE | 3 | |
| GATTEX 30-VIAL SUBCUTANEOUS KIT | 3 | PA; LA |
| <i>gavilax oral powder</i> | ACA | ACA; OTC |
| <i>gavilyte-c oral recon soln</i> | ACA | ACA |
| <i>gavilyte-g oral recon soln</i> | ACA | ACA |
| <i>gavilyte-n oral recon soln</i> | ACA | ACA |
| <i>generlac oral solution</i> | 1 | |
| <i>gentle laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i> | ACA | ACA; OTC |
| <i>gentle laxative (mag hydrox) oral suspension</i> | ACA | ACA; OTC |
| <i>gentlelax oral powder</i> | ACA | ACA; OTC |
| GOLYTELY ORAL RECON SOLN | 3 | |
| <i>granisetron hcl oral tablet</i> | 1 | QL |
| <i>hemmorex-hc rectal suppository</i> | 1 | |
| <i>hydrocortisone acetate rectal suppository</i> | 1 | |
| <i>hydrocortisone rectal enema</i> | 1 | |
| <i>hydrocortisone topical cream with perineal applicator</i> | 1 | |
| <i>hydrocortisone-pramoxine rectal cream 1-1 %</i> | 1 | |
| <i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i> | 1 | ST |
| KRISTALOSE ORAL PACKET | 3 | |
| <i>lactulose oral packet</i> | 1 | PA |
| <i>lactulose oral solution 10 gram/15 ml</i> | 1 | |
| <i>laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i> | ACA | ACA; OTC |
| <i>laxative peg 3350 oral powder</i> | ACA | ACA; OTC |
| <i>lidocaine hcl-hydrocortison ac rectal cream</i> | 1 | |
| LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL | 3 | |
| <i>lidocaine hcl-hydrocortison ac rectal kit</i> | 1 | |
| <i>lidocaine-hydrocortisone-aloe rectal gel</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>lidocaine-hydrocortisone-aloe rectal kit</i> | 1 | |
| LINZESS ORAL CAPSULE | 2 | QL |
| LIVMARLI ORAL SOLUTION | 3 | PA |
| <i>lubiprostone oral capsule</i> | 1 | QL |
| <i>magnesium citrate oral solution</i> | ACA | ACA; OTC |
| MARINOL ORAL CAPSULE | 3 | PA |
| <i>meclizine oral tablet 12.5 mg, 25 mg</i> | 1 | |
| <i>mesalamine oral capsule (with del rel tablets)</i> | 1 | |
| <i>mesalamine oral capsule, extended release</i> | 1 | |
| <i>mesalamine oral capsule, extended release 24hr</i> | 1 | |
| <i>mesalamine oral tablet, delayed release (dr/ec)</i> | 1 | |
| <i>mesalamine rectal enema</i> | 1 | |
| <i>mesalamine rectal suppository</i> | 1 | |
| <i>mesalamine with cleansing wipe rectal enema kit</i> | 1 | |
| <i>metoclopramide hcl oral solution</i> | 1 | |
| <i>metoclopramide hcl oral tablet</i> | 1 | |
| <i>milk of magnesia oral suspension</i> | ACA | ACA; OTC |
| MOVANTIK ORAL TABLET | 2 | QL |
| <i>natura-lax oral powder</i> | ACA | ACA; OTC |
| <i>nitroglycerin rectal ointment</i> | 1 | |
| OICALIVA ORAL TABLET | 3 | PA; LA; QL |
| OMVOH INTRAVENOUS SOLUTION | 3 | PA; LA |
| OMVOH PEN SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| OMVOH SUBCUTANEOUS SYRINGE | 3 | PA; LA |
| <i>ondansetron hcl oral solution</i> | 1 | QL |
| <i>ondansetron hcl oral tablet 4 mg, 8 mg</i> | 1 | QL |
| <i>ondansetron oral tablet, disintegrating 4 mg, 8 mg</i> | 1 | QL |
| <i>onelax magnesium citrate oral solution</i> | ACA | ACA; OTC |
| <i>oral saline laxative oral liquid</i> | ACA | ACA; OTC |
| PANCREAZE ORAL CAPSULE, DELAYED RELEASE (DR/EC) 10,500-35,500- 61,500 UNIT, 16,800-56,800- 98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700- 83,900 UNIT, 37,000-97,300- 149,900 UNIT, 4,200-14,200- 24,600 UNIT | 2 | |
| <i>peg 3350-electrolytes oral recon soln</i> | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet</i> | ACA | ACA |
| <i>peg-electrolyte soln oral recon soln</i> | ACA | ACA |
| PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG | 2 | |
| PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG | 3 | |
| <i>phosphate laxative oral liquid</i> | ACA | ACA; OTC |
| <i>polyethylene glycol 3350 oral powder</i> | ACA | ACA; OTC |
| <i>powderlax oral powder</i> | ACA | ACA; OTC |
| <i>prochlorperazine maleate oral tablet</i> | 1 | |
| <i>prochlorperazine rectal suppository</i> | 1 | |
| PROCORT RECTAL CREAM | 3 | |
| PROCTOCORT RECTAL SUPPOSITORY | 3 | ST |
| <i>procto-med hc topical cream with perineal applicator</i> | 1 | |
| <i>proctosol hc topical cream with perineal applicator</i> | 1 | |
| <i>proctozone-hc topical cream with perineal applicator</i> | 1 | |
| <i>purelax oral powder</i> | ACA | ACA; OTC |
| RECTIV RECTAL OINTMENT | 2 | |
| REGLAN ORAL TABLET | 3 | |
| RELISTOR SUBCUTANEOUS SOLUTION | 2 | ST |
| RELISTOR SUBCUTANEOUS SYRINGE | 2 | ST |
| ROWASA RECTAL ENEMA KIT | 3 | |
| SANCUSO TRANSDERMAL PATCH WEEKLY | 3 | QL |
| <i>scopolamine base transdermal patch 3 day</i> | 1 | |
| SFROWASA RECTAL ENEMA | 3 | |
| SKYRIZI INTRAVENOUS SOLUTION | 3 | PA; LA |
| SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR | 3 | PA; LA; QL |
| <i>smoothlax oral powder</i> | ACA | ACA; OTC |
| <i>sodium,potassium,mag sulfates oral recon soln</i> | ACA | ACA |
| SUCRAID ORAL SOLUTION | 3 | PA |
| <i>sulfasalazine oral tablet</i> | 1 | |
| <i>sulfasalazine oral tablet,delayed release (dr/ec)</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| SYMPROIC ORAL TABLET | 2 | |
| SYNDROS ORAL SOLUTION | 3 | PA |
| <i>trimethobenzamide oral capsule</i> | 1 | |
| TRULANCE ORAL TABLET | 2 | |
| UCERIS ORAL TABLET,DELAYED AND EXT.RELEASE | 3 | |
| UCERIS RECTAL FOAM | 3 | |
| URSO FORTE ORAL TABLET | 3 | |
| <i>ursodiol oral capsule</i> | 1 | |
| <i>ursodiol oral tablet</i> | 1 | |
| VARUBI ORAL TABLET | 2 | QL |
| VIBERZI ORAL TABLET | 2 | |
| VIOKACE ORAL TABLET | 2 | |
| VOWST ORAL CAPSULE | 3 | |
| <i>women's gentle laxative(bisac) oral tablet,delayed release (dr/ec)</i> | ACA | ACA; OTC |
| ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT | 2 | |
| ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT | 3 | PA; LA; QL |
| ZYMFENTRA SUBCUTANEOUS SYRINGE KIT | 3 | PA; LA; QL |
| ULCER THERAPY | | |
| <i>amoxicil-clarithromy-lansopraz oral combo pack</i> | 1 | QL |
| <i>bismuth subcit k-metronidz-tcn oral capsule</i> | 1 | |
| <i>cimetidine hcl oral solution</i> | 1 | |
| <i>cimetidine oral tablet</i> | 1 | |
| CYTOTEC ORAL TABLET | 3 | |
| <i>dexlansoprazole oral capsule,biphase delayed releas 30 mg</i> | 1 | ST; QL |
| <i>dexlansoprazole oral capsule,biphase delayed releas 60 mg</i> | 1 | ST |
| <i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i> | 1 | ST; QL |
| <i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i> | 1 | ST |
| <i>famotidine oral suspension for reconstitution</i> | 1 | |
| <i>famotidine oral tablet 20 mg, 40 mg</i> | 1 | |
| <i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg</i> | 1 | QL |
| <i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i> | 1 | |
| <i>lansoprazole oral tablet, disintegrat, delay rel 15 mg</i> | 1 | ST; QL |
| <i>lansoprazole oral tablet, disintegrat, delay rel 30 mg</i> | 1 | ST |
| <i>misoprostol oral tablet</i> | 1 | |
| <i>nizatidine oral capsule</i> | 1 | |
| OMECLAMOX-PAK ORAL COMBO PACK | 3 | QL |
| <i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg</i> | 1 | QL |
| <i>omeprazole oral capsule, delayed release(dr/ec) 40 mg</i> | 1 | |
| <i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i> | 1 | ST; QL |
| <i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i> | 1 | ST |
| <i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i> | 1 | ST; QL |
| <i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i> | 1 | ST |
| <i>pantoprazole oral granules dr for susp in packet</i> | 1 | ST |
| <i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i> | 1 | QL |
| <i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i> | 1 | |
| PEPCID ORAL TABLET | 3 | |
| <i>rabeprazole oral tablet, delayed release (dr/ec)</i> | 1 | |
| <i>sucralfate oral suspension</i> | 1 | |
| <i>sucralfate oral tablet</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|-----------|-----------------------|
| TALICIA ORAL CAPSULE,IR - DELAY REL,BIPHASE | 2 | QL |
| VOQUEZNA DUAL PAK ORAL COMBO PACK | 3 | |
| VOQUEZNA ORAL TABLET | 3 | ST |
| VOQUEZNA TRIPLE PAK ORAL COMBO PACK | 3 | |

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

ANTIVIRALS

| | | |
|-------------------------------------|---|--------|
| <i>ribavirin oral capsule</i> | 3 | PA; LA |
| <i>ribavirin oral tablet 200 mg</i> | 3 | PA; LA |

BIOTECHNOLOGY DRUGS

| | | |
|----------------------------------|---|--------|
| ARCALYST SUBCUTANEOUS RECON SOLN | 3 | PA; QL |
| XOLREMDI ORAL CAPSULE | 3 | PA |

GROWTH HORMONES

| | | |
|---|---|--------|
| EGRIFTA SV SUBCUTANEOUS RECON SOLN | 3 | PA; LA |
| GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE | 3 | PA; LA |
| GENOTROPIN SUBCUTANEOUS CARTRIDGE | 3 | PA; LA |
| NGENLA SUBCUTANEOUS PEN INJECTOR | 3 | LA |
| OMNITROPE SUBCUTANEOUS CARTRIDGE | 3 | PA; LA |
| OMNITROPE SUBCUTANEOUS RECON SOLN | 3 | PA; LA |
| SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG | 3 | PA; LA |

INTERFERONS

| | | |
|---------------------------------|---|--------|
| ACTIMMUNE SUBCUTANEOUS SOLUTION | 3 | PA; LA |
| PEGASYS SUBCUTANEOUS SOLUTION | 3 | LA; QL |
| PEGASYS SUBCUTANEOUS SYRINGE | 3 | LA; QL |

MULTIPLE SCLEROSIS AGENTS

| | | |
|---|---|------------|
| AVONEX INTRAMUSCULAR PEN INJECTOR KIT | 3 | PA; LA; QL |
| AVONEX INTRAMUSCULAR SYRINGE KIT | 3 | PA; LA; QL |
| BAFIERTAM ORAL CAPSULE,DELAYED RELEASE(DR/EC) | 3 | PA; LA; QL |
| BETASERON SUBCUTANEOUS KIT | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>dimethyl fumarate oral capsule, delayed release(dr/ec)</i> | 3 | PA; LA; QL |
| <i>fingolimod oral capsule</i> | 3 | PA; LA; QL |
| <i>glatiramer subcutaneous syringe</i> | 3 | PA; LA; QL |
| <i>glatopa subcutaneous syringe</i> | 3 | PA; LA; QL |
| KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| MAVENCLAD (10 TABLET PACK) ORAL TABLET | 3 | PA; LA; QL |
| MAVENCLAD (4 TABLET PACK) ORAL TABLET | 3 | PA; LA; QL |
| MAVENCLAD (5 TABLET PACK) ORAL TABLET | 3 | PA; LA; QL |
| MAVENCLAD (6 TABLET PACK) ORAL TABLET | 3 | PA; LA; QL |
| MAVENCLAD (7 TABLET PACK) ORAL TABLET | 3 | PA; LA; QL |
| MAVENCLAD (8 TABLET PACK) ORAL TABLET | 3 | PA; LA; QL |
| MAVENCLAD (9 TABLET PACK) ORAL TABLET | 3 | PA; LA; QL |
| MAYZENT ORAL TABLET | 3 | PA; LA; QL |
| MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK | 3 | PA; LA; QL |
| MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK | 3 | PA; LA; QL |
| PLEGRIDY INTRAMUSCULAR SYRINGE | 3 | PA; LA; QL |
| PLEGRIDY SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| PLEGRIDY SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| PONVORY 14-DAY STARTER PACK ORAL TABLETS,DOSE PACK | 3 | PA; LA; QL |
| PONVORY ORAL TABLET | 3 | PA; LA; QL |
| REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| REBIF TITRATION PACK SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| <i>teriflunomide oral tablet</i> | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| VUMERITY ORAL CAPSULE,DELAYED RELEASE(DR/EC) | 3 | PA; LA; QL |
| VACCINES & MISCELLANEOUS IMMUNOLOGICALS | | |
| ABRYSVO (PF) INTRAMUSCULAR RECON SOLN | ACA | ACA |
| ACAM2000 (NATIONAL STOCKPILE) PERCUTANEOUS RECON SOLN | 2 | |
| ACTHIB (PF) INTRAMUSCULAR RECON SOLN | ACA | ACA |
| ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| AFLURIA TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| AFLURIA TRIV 2024-2025 INTRAMUSCULAR SUSPENSION | ACA | ACA |
| AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION | ACA | ACA |
| AUDENZ (NATIONAL STOCKPILE) INTRAMUSCULAR EMULSION | 3 | |
| AUDENZ(PF)(NATIONAL STOCKPILE) INTRAMUSCULAR SYRINGE | ACA | ACA |
| BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION | 2 | QL |
| BEXSERO INTRAMUSCULAR SYRINGE | ACA | ACA |
| BIOTHRAX INTRAMUSCULAR SUSPENSION | ACA | ACA |
| BOOSTRIX TDAP INTRAMUSCULAR SYRINGE | ACA | ACA |
| CAPVAXIVE INTRAMUSCULAR SYRINGE | ACA | ACA |
| COMIRNATY 2024-25 (12Y UP)(PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| DENGVAXIA (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION | ACA | ACA |
| ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| ENGERIX-B (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| ERVEBO(PF)(NATIONAL STOCKPILE) INTRAMUSCULAR SUSPENSION | 2 | |
| FLUAD TRIV 2024-25(65Y UP)(PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| FLUARIX TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| FLUBLOK TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| FLUCELVAX TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| FLUCELVAX TRIV 2024-2025 INTRAMUSCULAR SUSPENSION | ACA | ACA |
| FLULAVAL TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| FLUMIST TRIVALENT 2024-2025 NASAL NASAL SPRAY SYRINGE | ACA | ACA |
| FLUZONE HIGH-DOSE TRIV 24-25 INTRAMUSCULAR SYRINGE | ACA | ACA |
| FLUZONE TRIV 2024-2025 (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| FLUZONE TRIV 2024-2025 INTRAMUSCULAR SUSPENSION | ACA | ACA |
| GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| HAVRIX (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| HIBERIX (PF) INTRAMUSCULAR RECON SOLN | ACA | ACA |
| IMOVAX RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN | ACA | ACA |
| INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| IPOL INJECTION SUSPENSION | ACA | ACA |
| IXCHIQ (PF) INTRAMUSCULAR RECON SOLN | 2 | |
| IXIARO (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| JYNNEOS (PF) SUBCUTANEOUS SUSPENSION | ACA | ACA |
| KINRIX (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| MENQUADFI (PF) INTRAMUSCULAR SOLUTION | ACA | ACA |
| MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT | ACA | ACA |
| MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION | ACA | ACA |
| M-M-R II (PF) SUBCUTANEOUS RECON SOLN | ACA | ACA |
| MODERNA COVID 24-25(6M-11Y)PF INTRAMUSCULAR SYRINGE | ACA | ACA |
| MRESVIA (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| NOVAVAX COVID 2024-25(PF)(EUA) INTRAMUSCULAR SYRINGE | ACA | ACA |
| PEDIARIX (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION | ACA | ACA |
| PENBRAYA (PF) INTRAMUSCULAR KIT | ACA | ACA |
| PENTACEL (PF) INTRAMUSCULAR KIT 15LF-48MCG-62DU -10 MCG/0.5ML | ACA | ACA |
| PFIZER COVID 2024-25(5Y-11Y)PF INTRAMUSCULAR SUSPENSION | ACA | ACA |
| PFIZER COVID 2024-25(6MO-4Y)PF INTRAMUSCULAR SUSPENSION | ACA | ACA |
| PNEUMOVAX-23 INJECTION SYRINGE | ACA | ACA |
| PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION | ACA | ACA |
| PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION | ACA | ACA |
| QUADRACEL (PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| QUADRACEL (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| ROTARIX ORAL SUSPENSION | ACA | ACA |
| ROTATEQ VACCINE ORAL SOLUTION | ACA | ACA |
| SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION | ACA | ACA |
| SPIKEVAX 2024-2025(12Y UP)(PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION | ACA | ACA |
| TDVAX INTRAMUSCULAR SUSPENSION | ACA | ACA |
| TENIVAC (PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| TENIVAC (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| TICOVAC INTRAMUSCULAR SYRINGE | ACA | ACA |
| TRUMENBA INTRAMUSCULAR SYRINGE | ACA | ACA |
| TWINRIX (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| TYPHIM VI INTRAMUSCULAR SOLUTION | ACA | ACA |
| TYPHIM VI INTRAMUSCULAR SYRINGE | ACA | ACA |
| VAQTA (PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| VAQTA (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION | ACA | ACA |
| VARIZIG INTRAMUSCULAR SOLUTION | 2 | |
| VAXCHORA VACCINE ORAL SUSPENSION FOR RECONSTITUTION | ACA | ACA |
| VAXELIS (PF) INTRAMUSCULAR SUSPENSION | ACA | ACA |
| VAXELIS (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE | ACA | ACA |
| VIVOTIF ORAL CAPSULE,DELAYED RELEASE(DR/EC) | ACA | ACA |
| YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION | ACA | ACA |

IMMUNOLOGY

| Drug Name | Drug Tier | Requirements / Limits |
|--|-----------|-----------------------|
| INTERLEUKINS | | |
| <i>imiquimod topical cream in metered-dose pump</i> | 1 | |
| <i>imiquimod topical cream in packet</i> | 1 | |
| MUSCULOSKELETAL & RHEUMATOLOGY | | |
| GOUT THERAPY | | |
| <i>allopurinol oral tablet</i> | 1 | |
| <i>colchicine oral capsule</i> | 1 | ST |
| <i>colchicine oral tablet</i> | 1 | |
| <i>febuxostat oral tablet</i> | 1 | ST |
| GLOPERBA ORAL SOLUTION | 3 | |
| MITIGARE ORAL CAPSULE | 2 | ST |
| <i>probenecid oral tablet</i> | 1 | |
| <i>probenecid-colchicine oral tablet</i> | 1 | |
| ZYLOPRIM ORAL TABLET 100 MG | 3 | |
| OSTEOPOROSIS THERAPY | | |
| ACTONEL ORAL TABLET 150 MG, 35 MG | 3 | ST; QL |
| <i>alendronate oral solution</i> | 1 | QL |
| <i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i> | 1 | QL |
| ATEL VIA ORAL TABLET, DELAYED RELEASE (DR/EC) | 3 | ST; QL |
| BINOSTO ORAL TABLET, EFFERVESCENT | 3 | ST; QL |
| EVISTA ORAL TABLET | 3 | |
| FOSAMAX ORAL TABLET 70 MG | 3 | ST; QL |
| FOSAMAX PLUS D ORAL TABLET | 3 | ST; QL |
| <i>ibandronate oral tablet</i> | 1 | QL |
| <i>raloxifene oral tablet</i> | 1 | |
| <i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i> | 1 | QL |
| <i>risedronate oral tablet, delayed release (dr/ec)</i> | 1 | QL |
| <i>teriparatide subcutaneous pen injector 20 mcg/dose (600mcg/2.4ml)</i> | 3 | PA; LA; QL |
| TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML) | 3 | PA; QL |
| TYMLOS SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| OTHER RHEUMATOLOGICALS | | |
| ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| ACTEMRA SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| ADALIMUMAB-ADAZ SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| ADALIMUMAB-ADAZ SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| ADALIMUMAB-ADBM SUBCUTANEOUS PEN INJECTOR KIT | 3 | PA; LA; QL |
| ADALIMUMAB-ADBM SUBCUTANEOUS SYRINGE KIT | 3 | PA; LA; QL |
| ADALIMUMAB-ADBM(CF) PEN CROHNS SUBCUTANEOUS PEN INJECTOR KIT | 3 | PA; LA; QL |
| ADALIMUMAB-ADBM(CF) PEN PS-UV SUBCUTANEOUS PEN INJECTOR KIT | 3 | PA; LA; QL |
| ADALIMUMAB-RYVK SUBCUTANEOUS AUTO-INJECTOR, KIT | 3 | PA; QL |
| ADALIMUMAB-RYVK SUBCUTANEOUS SYRINGE KIT | 3 | PA; QL |
| ARA VA ORAL TABLET | 3 | QL |
| BENLYSTA SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; LA; QL |
| BENLYSTA SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| CYLTEZO(CF) PEN CROHN'S-UC-HS SUBCUTANEOUS PEN INJECTOR KIT | 3 | PA; LA; QL |
| CYLTEZO(CF) PEN PSORIASIS-UV SUBCUTANEOUS PEN INJECTOR KIT | 3 | PA; LA; QL |
| CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT | 3 | PA; LA; QL |
| CYLTEZO(CF) SUBCUTANEOUS SYRINGE KIT | 3 | PA; LA; QL |
| DEPEN TITRATABS ORAL TABLET | 3 | PA |
| ENBREL MINI SUBCUTANEOUS CARTRIDGE | 3 | PA; LA; QL |
| ENBREL SUBCUTANEOUS SOLUTION | 3 | PA; LA; QL |
| ENBREL SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| <i>leflunomide oral tablet</i> | 1 | QL |
| OTEZLA ORAL TABLET | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|-----------|-----------------------|
| OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47) | 3 | PA; LA; QL |
| <i>penicillamine oral capsule</i> | 1 | PA |
| <i>penicillamine oral tablet</i> | 1 | PA |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR | 2 | ST |
| RIDAURA ORAL CAPSULE | 2 | |
| RINVOQ LQ ORAL SOLUTION | 3 | PA; LA; QL |
| RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR | 3 | PA; LA; QL |
| SAVELLA ORAL TABLET | 2 | ST; QL |
| SAVELLA ORAL TABLETS,DOSE PACK | 2 | ST; QL |
| SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT | 3 | PA; LA; QL |
| SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML | 3 | PA; LA; QL |
| SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML | 3 | PA; LA; QL |
| TYENNE AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA |
| TYENNE INTRAVENOUS SOLUTION | 3 | PA; LA |
| TYENNE SUBCUTANEOUS SYRINGE | 3 | PA; LA |
| XELJANZ ORAL SOLUTION | 3 | PA; LA; QL |
| XELJANZ ORAL TABLET | 3 | PA; LA; QL |
| XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR | 3 | PA; LA; QL |

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES

| | | |
|------------------------------------|-----|----------|
| CAYA CONTOURED VAGINAL DIAPHRAGM | ACA | ACA |
| DUREX AVANTI BARE REAL FEEL | ACA | ACA; OTC |
| DUREX TROPICAL CONDOM DEVICE | ACA | ACA; OTC |
| FC2 FEMALE CONDOM | ACA | ACA; OTC |
| FEMCAP VAGINAL DEVICE 22 MM | ACA | ACA |
| TRUSTEX-RIA NON-LUB CONDOMS DEVICE | ACA | ACA; OTC |
| WIDE-SEAL DIAPHRAGM | ACA | ACA |

ESTROGENS & PROGESTINS

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| ACTIVELLA ORAL TABLET | 3 | |
| ANGELIQ ORAL TABLET | 3 | |
| <i>camila oral tablet</i> | ACA | ACA |
| CLIMARA TRANSDERMAL PATCH WEEKLY | 3 | QL |
| COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY | 2 | |
| <i>covaryx h.s. oral tablet</i> | 1 | |
| <i>covaryx oral tablet</i> | 1 | |
| CRINONE VAGINAL GEL 8 % | 3 | PA; LA |
| <i>deblitane oral tablet</i> | ACA | ACA |
| DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML | ACA | ACA |
| DEPO-PROVERA INTRAMUSCULAR SYRINGE | ACA | ACA |
| DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE | ACA | ACA |
| <i>dotti transdermal patch semiweekly</i> | 1 | QL |
| DUAVEE ORAL TABLET | 2 | |
| <i>eemt hs oral tablet</i> | 1 | |
| <i>eemt oral tablet</i> | 1 | |
| <i>emzahh oral tablet</i> | ACA | ACA |
| <i>errin oral tablet</i> | ACA | ACA |
| ESTRACE ORAL TABLET | 3 | |
| ESTRADIOL IMPLANT PELLETT 6 MG | 3 | |
| <i>estradiol oral tablet</i> | 1 | |
| <i>estradiol transdermal gel in metered-dose pump</i> | 1 | QL |
| <i>estradiol transdermal gel in packet</i> | 1 | QL |
| <i>estradiol transdermal patch semiweekly</i> | 1 | QL |
| <i>estradiol transdermal patch weekly</i> | 1 | QL |
| <i>estradiol vaginal cream</i> | 1 | |
| <i>estradiol vaginal tablet</i> | 1 | |
| <i>estradiol-norethindrone acet oral tablet</i> | 1 | |
| ESTRATEST F.S. ORAL TABLET | 3 | |
| <i>estrogens-methyltestosterone oral tablet</i> | 1 | |
| EVAMIST TRANSDERMAL SPRAY, NON-AEROSOL | 3 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>fyavolv oral tablet</i> | 1 | |
| <i>gallifrey oral tablet</i> | 1 | |
| <i>heather oral tablet</i> | ACA | ACA |
| <i>incassia oral tablet</i> | ACA | ACA |
| <i>jencycla oral tablet</i> | ACA | ACA |
| <i>jinteli oral tablet</i> | 1 | |
| <i>lyleq oral tablet</i> | ACA | ACA |
| <i>lyllana transdermal patch semiweekly</i> | 1 | QL |
| <i>lyza oral tablet</i> | ACA | ACA |
| <i>medroxyprogesterone intramuscular suspension</i> | ACA | ACA |
| <i>medroxyprogesterone intramuscular syringe</i> | ACA | ACA |
| <i>medroxyprogesterone oral tablet</i> | 1 | |
| MENOSTAR TRANSDERMAL PATCH WEEKLY | 3 | QL |
| <i>mimvey oral tablet</i> | 1 | |
| <i>nora-be oral tablet</i> | ACA | ACA |
| <i>norethindrone (contraceptive) oral tablet</i> | ACA | ACA |
| <i>norethindrone acetate oral tablet</i> | 1 | |
| <i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i> | 1 | |
| OPILL ORAL TABLET | ACA | ACA; OTC |
| PREMARIN VAGINAL CREAM | 2 | |
| <i>progesterone intramuscular oil</i> | 3 | PA; LA |
| <i>progesterone micronized oral capsule</i> | 1 | |
| PROMETRIUM ORAL CAPSULE | 3 | |
| PROVERA ORAL TABLET | 3 | |
| <i>sharobel oral tablet</i> | ACA | ACA |
| <i>tulana oral tablet</i> | ACA | ACA |
| <i>yuvafem vaginal tablet</i> | 1 | |
| MISCELLANEOUS OB/GYN | | |
| ANNOVERA VAGINAL RING | ACA | ACA |
| CERVIDIL VAGINAL INSERT, EXTENDED RELEASE | 3 | |
| CLEOCIN VAGINAL CREAM | 3 | |
| CLEOCIN VAGINAL SUPPOSITORY | 3 | |
| <i>clindamycin phosphate vaginal cream</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| CLINDESSE VAGINAL CREAM,EXTENDED RELEASE | 3 | |
| <i>eluryng vaginal ring</i> | ACA | ACA |
| <i>enilloring vaginal ring</i> | ACA | ACA |
| <i>etonogestrel-ethinyl estradiol vaginal ring</i> | ACA | ACA |
| <i>fem ph vaginal gel</i> | 1 | |
| GYNAZOLE-1 VAGINAL CREAM | 3 | |
| <i>haloette vaginal ring</i> | ACA | ACA |
| <i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i> | 1 | |
| <i>miconazole-3 vaginal suppository</i> | 1 | |
| MIFEPREX ORAL TABLET | 3 | |
| <i>mifepristone oral tablet 200 mg</i> | 1 | |
| MYFEMBREE ORAL TABLET | 2 | PA |
| <i>norelgestromin-ethin.estradiol transdermal patch weekly</i> | ACA | ACA |
| NUVESSA VAGINAL GEL | 3 | |
| ORIAHNN ORAL CAPSULE, SEQUENTIAL | 2 | PA |
| OSPHENA ORAL TABLET | 3 | |
| PREPIDIL VAGINAL GEL | 3 | |
| RELAGARD VAGINAL GEL | 3 | |
| <i>terconazole vaginal cream</i> | 1 | |
| <i>terconazole vaginal suppository</i> | 1 | |
| <i>tranexamic acid oral tablet</i> | 1 | |
| TRIMO-SAN JELLY VAGINAL GEL | 2 | |
| <i>vandazole vaginal gel</i> | 1 | |
| VCF CONTRACEPTIVE FILM VAGINAL FILM | ACA | ACA; OTC |
| VCF CONTRACEPTIVE GEL VAGINAL GEL | ACA | ACA; OTC |
| VEOZAH ORAL TABLET | 3 | |
| XACIATO VAGINAL GEL | 2 | |
| <i>xulane transdermal patch weekly</i> | ACA | ACA |
| <i>zafemy transdermal patch weekly</i> | ACA | ACA |
| ORAL CONTRACEPTIVES & RELATED AGENTS | | |
| <i>afirmelle oral tablet</i> | ACA | ACA |
| <i>after pill oral tablet</i> | ACA | ACA; OTC |
| AFTERA ORAL TABLET | ACA | ACA; OTC |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>altavera (28) oral tablet</i> | ACA | ACA |
| <i>alyacen 1/35 (28) oral tablet</i> | ACA | ACA |
| <i>alyacen 7/7/7 (28) oral tablet</i> | ACA | ACA |
| <i>amethia oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>amethyst (28) oral tablet</i> | ACA | ACA |
| <i>apri oral tablet</i> | ACA | ACA |
| <i>aranelle (28) oral tablet</i> | ACA | ACA |
| <i>ashlyna oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>aubra eq oral tablet</i> | ACA | ACA |
| <i>aubra oral tablet</i> | ACA | ACA |
| <i>aurovela 1.5/30 (21) oral tablet</i> | ACA | ACA |
| <i>aurovela 1/20 (21) oral tablet</i> | ACA | ACA |
| <i>aurovela 24 fe oral tablet</i> | ACA | ACA |
| <i>aurovela fe 1.5/30 (28) oral tablet</i> | ACA | ACA |
| <i>aurovela fe 1-20 (28) oral tablet</i> | ACA | ACA |
| <i>aviane oral tablet</i> | ACA | ACA |
| <i>ayuna oral tablet</i> | ACA | ACA |
| <i>azurette (28) oral tablet</i> | ACA | ACA |
| <i>balziva (28) oral tablet</i> | ACA | ACA |
| BEYAZ ORAL TABLET | ACA | ACA |
| <i>blisovi 24 fe oral tablet</i> | ACA | ACA |
| <i>blisovi fe 1.5/30 (28) oral tablet</i> | ACA | ACA |
| <i>blisovi fe 1/20 (28) oral tablet</i> | ACA | ACA |
| <i>briellyn oral tablet</i> | ACA | ACA |
| <i>camrese lo oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>camrese oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>caziant (28) oral tablet</i> | ACA | ACA |
| <i>charlotte 24 fe oral tablet,chewable</i> | ACA | ACA |
| <i>chateal (28) oral tablet</i> | ACA | ACA |
| <i>chateal eq (28) oral tablet</i> | ACA | ACA |
| <i>cryselle (28) oral tablet</i> | ACA | ACA |
| <i>curae oral tablet</i> | ACA | ACA; OTC |
| <i>cyred eq oral tablet</i> | ACA | ACA |
| <i>cyred oral tablet</i> | ACA | ACA |
| <i>dasetta 1/35 (28) oral tablet</i> | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>dasetta 7/7/7 (28) oral tablet</i> | ACA | ACA |
| <i>daysee oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>desog-e.estradiol/e.estradiol oral tablet</i> | ACA | ACA |
| <i>dolishale oral tablet</i> | ACA | ACA |
| <i>drospirenone-e.estradiol-lm,fa oral tablet</i> | ACA | ACA |
| <i>drospirenone-ethinyl estradiol oral tablet</i> | ACA | ACA |
| <i>econtra ez oral tablet</i> | ACA | ACA; OTC |
| <i>econtra one-step oral tablet</i> | ACA | ACA; OTC |
| <i>elinest oral tablet</i> | ACA | ACA |
| ELLA ORAL TABLET | ACA | ACA |
| <i>enpresse oral tablet</i> | ACA | ACA |
| <i>enskyce oral tablet</i> | ACA | ACA |
| <i>estarylla oral tablet</i> | ACA | ACA |
| <i>ethynodiol diac-eth estradiol oral tablet</i> | ACA | ACA |
| <i>falmina (28) oral tablet</i> | ACA | ACA |
| <i>finzala oral tablet,chewable</i> | ACA | ACA |
| <i>gemmily oral capsule</i> | ACA | ACA |
| <i>hailey 24 fe oral tablet</i> | ACA | ACA |
| <i>hailey fe 1.5/30 (28) oral tablet</i> | ACA | ACA |
| <i>hailey fe 1/20 (28) oral tablet</i> | ACA | ACA |
| <i>hailey oral tablet</i> | ACA | ACA |
| <i>her style oral tablet</i> | ACA | ACA; OTC |
| <i>iclevia oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>isibloom oral tablet</i> | ACA | ACA |
| <i>jaimiess oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>jasmiel (28) oral tablet</i> | ACA | ACA |
| <i>jolessa oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>joyeaux oral tablet</i> | ACA | ACA |
| <i>juleber oral tablet</i> | ACA | ACA |
| <i>junel 1.5/30 (21) oral tablet</i> | ACA | ACA |
| <i>junel 1/20 (21) oral tablet</i> | ACA | ACA |
| <i>junel fe 1.5/30 (28) oral tablet</i> | ACA | ACA |
| <i>junel fe 1/20 (28) oral tablet</i> | ACA | ACA |
| <i>junel fe 24 oral tablet</i> | ACA | ACA |
| <i>kaitlib fe oral tablet,chewable</i> | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>kalliga oral tablet</i> | ACA | ACA |
| <i>kariva (28) oral tablet</i> | ACA | ACA |
| <i>kelnor 1/35 (28) oral tablet</i> | ACA | ACA |
| <i>kelnor 1/50 (28) oral tablet</i> | ACA | ACA |
| <i>kurvelo (28) oral tablet</i> | ACA | ACA |
| <i>l norgest/e.estradiol-e.estrad oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>larin 1.5/30 (21) oral tablet</i> | ACA | ACA |
| <i>larin 1/20 (21) oral tablet</i> | ACA | ACA |
| <i>larin 24 fe oral tablet</i> | ACA | ACA |
| <i>larin fe 1.5/30 (28) oral tablet</i> | ACA | ACA |
| <i>larin fe 1/20 (28) oral tablet</i> | ACA | ACA |
| <i>layolis fe oral tablet,chewable</i> | ACA | ACA |
| <i>leena 28 oral tablet</i> | ACA | ACA |
| <i>lessina oral tablet</i> | ACA | ACA |
| <i>levonest (28) oral tablet</i> | ACA | ACA |
| <i>levonorgest-eth.estradiol-iron oral tablet</i> | ACA | ACA |
| <i>levonorgestrel oral tablet</i> | ACA | ACA; OTC |
| <i>levonorgestrel-ethinyl estrad oral tablet</i> | ACA | ACA |
| <i>levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>levonorg-eth estrad triphasic oral tablet</i> | ACA | ACA |
| <i>levora-28 oral tablet</i> | ACA | ACA |
| <i>lojaimiess oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>loryna (28) oral tablet</i> | ACA | ACA |
| <i>low-ogestrel (28) oral tablet</i> | ACA | ACA |
| <i>lo-zumandimine (28) oral tablet</i> | ACA | ACA |
| <i>lutra (28) oral tablet</i> | ACA | ACA |
| <i>marlissa (28) oral tablet</i> | ACA | ACA |
| <i>merzee oral capsule</i> | ACA | ACA |
| <i>mibelas 24 fe oral tablet,chewable</i> | ACA | ACA |
| <i>microgestin 1.5/30 (21) oral tablet</i> | ACA | ACA |
| <i>microgestin 1/20 (21) oral tablet</i> | ACA | ACA |
| <i>microgestin fe 1.5/30 (28) oral tablet</i> | ACA | ACA |
| <i>microgestin fe 1/20 (28) oral tablet</i> | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>mili oral tablet</i> | ACA | ACA |
| <i>mono-lynyah oral tablet</i> | ACA | ACA |
| <i>my choice oral tablet</i> | ACA | ACA; OTC |
| <i>my way oral tablet</i> | ACA | ACA; OTC |
| <i>necon 0.5/35 (28) oral tablet</i> | ACA | ACA |
| <i>new day oral tablet</i> | ACA | ACA; OTC |
| <i>nikki (28) oral tablet</i> | ACA | ACA |
| <i>noreth-ethinyl estradiol-iron oral tablet,chewable</i> | ACA | ACA |
| <i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i> | ACA | ACA |
| <i>norethindrone-e.estradiol-iron oral capsule</i> | ACA | ACA |
| <i>norethindrone-e.estradiol-iron oral tablet</i> | ACA | ACA |
| <i>norethindrone-e.estradiol-iron oral tablet,chewable</i> | ACA | ACA |
| <i>norgestimate-ethinyl estradiol oral tablet</i> | ACA | ACA |
| <i>nortrel 0.5/35 (28) oral tablet</i> | ACA | ACA |
| <i>nortrel 1/35 (21) oral tablet</i> | ACA | ACA |
| <i>nortrel 1/35 (28) oral tablet</i> | ACA | ACA |
| <i>nortrel 7/7/7 (28) oral tablet</i> | ACA | ACA |
| <i>nylia 1/35 (28) oral tablet</i> | ACA | ACA |
| <i>nylia 7/7/7 (28) oral tablet</i> | ACA | ACA |
| <i>ocella oral tablet</i> | ACA | ACA |
| <i>opcicon one-step oral tablet</i> | ACA | ACA; OTC |
| <i>option-2 oral tablet</i> | ACA | ACA; OTC |
| <i>philith oral tablet</i> | ACA | ACA |
| <i>pimtrea (28) oral tablet</i> | ACA | ACA |
| PLAN B ONE-STEP ORAL TABLET | ACA | ACA; OTC |
| <i>portia 28 oral tablet</i> | ACA | ACA |
| <i>reclipsen (28) oral tablet</i> | ACA | ACA |
| <i>rivelsa oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>setlakin oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>simliya (28) oral tablet</i> | ACA | ACA |
| <i>simpesse oral tablets,dose pack,3 month</i> | ACA | ACA |
| <i>sprintec (28) oral tablet</i> | ACA | ACA |
| <i>sronyx oral tablet</i> | ACA | ACA |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>syeda oral tablet</i> | ACA | ACA |
| TAKE ACTION ORAL TABLET | ACA | ACA; OTC |
| <i>tarina 24 fe oral tablet</i> | ACA | ACA |
| <i>tarina fe 1/20 (28) oral tablet</i> | ACA | ACA |
| <i>tilia fe oral tablet</i> | ACA | ACA |
| <i>tri-estarylla oral tablet</i> | ACA | ACA |
| <i>tri-legest fe oral tablet</i> | ACA | ACA |
| <i>tri-linyah oral tablet</i> | ACA | ACA |
| <i>tri-lo-estarylla oral tablet</i> | ACA | ACA |
| <i>tri-lo-marzia oral tablet</i> | ACA | ACA |
| <i>tri-lo-mili oral tablet</i> | ACA | ACA |
| <i>tri-lo-sprintec oral tablet</i> | ACA | ACA |
| <i>tri-mili oral tablet</i> | ACA | ACA |
| <i>tri-sprintec (28) oral tablet</i> | ACA | ACA |
| <i>trivora (28) oral tablet</i> | ACA | ACA |
| <i>tri-vylibra lo oral tablet</i> | ACA | ACA |
| <i>tri-vylibra oral tablet</i> | ACA | ACA |
| <i>turqoz (28) oral tablet</i> | ACA | ACA |
| <i>tydemy oral tablet</i> | ACA | ACA |
| <i>velivet triphasic regimen (28) oral tablet</i> | ACA | ACA |
| <i>vestura (28) oral tablet</i> | ACA | ACA |
| <i>vienva oral tablet</i> | ACA | ACA |
| <i>viorele (28) oral tablet</i> | ACA | ACA |
| <i>volnea (28) oral tablet</i> | ACA | ACA |
| <i>vyfemla (28) oral tablet</i> | ACA | ACA |
| <i>vylibra oral tablet</i> | ACA | ACA |
| <i>wera (28) oral tablet</i> | ACA | ACA |
| <i>wymzya fe oral tablet, chewable</i> | ACA | ACA |
| YAZ (28) ORAL TABLET | ACA | ACA |
| <i>zarah oral tablet</i> | ACA | ACA |
| <i>zovia 1-35 (28) oral tablet</i> | ACA | ACA |
| <i>zumandimine (28) oral tablet</i> | ACA | ACA |

OXYTOCICS

methylergonovine oral tablet

1

QL

OPHTHALMOLOGY

| Drug Name | Drug Tier | Requirements / Limits |
|--|-----------|-----------------------|
| ANTIBIOTICS | | |
| AZASITE OPHTHALMIC (EYE) DROPS | 2 | |
| <i>bacitracin ophthalmic (eye) ointment</i> | 1 | |
| <i>bacitracin-polymyxin b ophthalmic (eye) ointment</i> | 1 | |
| BETADINE OPHTHALMIC PREP OPHTHALMIC (EYE) SOLUTION | 3 | |
| <i>ciprofloxacin hcl ophthalmic (eye) drops</i> | 1 | |
| <i>erythromycin ophthalmic (eye) ointment</i> | 1 | |
| <i>gatifloxacin ophthalmic (eye) drops</i> | 1 | |
| <i>gentamicin ophthalmic (eye) drops</i> | 1 | |
| <i>levofloxacin ophthalmic (eye) drops 1.5 %</i> | 1 | |
| <i>moxifloxacin ophthalmic (eye) drops</i> | 1 | |
| <i>moxifloxacin ophthalmic (eye) drops, viscous</i> | 1 | |
| NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION | 2 | |
| <i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment</i> | 1 | |
| <i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops</i> | 1 | |
| <i>neo-polycin ophthalmic (eye) ointment</i> | 1 | |
| OCUFLOX OPHTHALMIC (EYE) DROPS | 3 | |
| <i>ofloxacin ophthalmic (eye) drops</i> | 1 | |
| <i>polycin ophthalmic (eye) ointment</i> | 1 | |
| <i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops</i> | 1 | |
| <i>povidone-iodine ophthalmic (eye) solution</i> | 1 | |
| <i>tobramycin ophthalmic (eye) drops</i> | 1 | |
| TOBRAMYCIN-VANCOMYCIN OPHTHALMIC (EYE) DROPS 1.5-5 % | 3 | |
| TOBREX OPHTHALMIC (EYE) OINTMENT | 3 | |
| VIGAMOX OPHTHALMIC (EYE) DROPS | 3 | |
| ANTIVIRALS | | |
| <i>trifluridine ophthalmic (eye) drops</i> | 1 | |
| ZIRGAN OPHTHALMIC (EYE) GEL | 3 | |
| BETA-BLOCKERS | | |
| <i>betaxolol ophthalmic (eye) drops</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| BETOPTIC S OPHTHALMIC (EYE) DROPS,SUSPENSION | 3 | |
| <i>carteolol ophthalmic (eye) drops</i> | 1 | |
| <i>levobunolol ophthalmic (eye) drops 0.5 %</i> | 1 | |
| <i>timolol maleate (pf) ophthalmic (eye) dropperette</i> | 1 | |
| <i>timolol maleate ophthalmic (eye) drops</i> | 1 | |
| <i>timolol maleate ophthalmic (eye) drops, once daily</i> | 1 | |
| <i>timolol maleate ophthalmic (eye) gel forming solution</i> | 1 | |
| CHOLINESTERASE INHIBITOR MIOTICS | | |
| PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS | 3 | |
| CYCLOPLEGIC MYDRIATICS | | |
| ATROPINE OPHTHALMIC (EYE) DROPS 0.025 %, 0.05 % | 3 | |
| <i>atropine ophthalmic (eye) drops 1 %</i> | 1 | |
| <i>atropine ophthalmic (eye) ointment</i> | 1 | |
| CYCLOGYL OPHTHALMIC (EYE) DROPS | 3 | |
| <i>cyclopentolate ophthalmic (eye) drops 1 %</i> | 1 | |
| <i>homatropaire ophthalmic (eye) drops</i> | 1 | |
| MYDRIACYL OPHTHALMIC (EYE) DROPS | 3 | |
| <i>tropicamide ophthalmic (eye) drops</i> | 1 | |
| DIRECT ACTING MIOTICS | | |
| <i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i> | 1 | |
| MISCELLANEOUS OPHTHALMOLOGICS | | |
| AKTEN (PF) OPHTHALMIC (EYE) GEL | 3 | |
| ALCAINE OPHTHALMIC (EYE) DROPS | 3 | |
| ALOCRILOPHTHALMIC (EYE) DROPS | 3 | ST |
| <i>altacaine ophthalmic (eye) drops</i> | 1 | |
| <i>azelastine ophthalmic (eye) drops</i> | 1 | |
| <i>bepotastine besilate ophthalmic (eye) drops</i> | 1 | |
| CEQUA OPHTHALMIC (EYE) DROPPERETTE | 3 | PA; QL |
| <i>cromolyn ophthalmic (eye) drops</i> | 1 | |
| <i>cyclosporine ophthalmic (eye) dropperette</i> | 1 | PA; QL |
| CYSTARAN OPHTHALMIC (EYE) DROPS | 3 | PA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>epinastine ophthalmic (eye) drops</i> | 1 | |
| <i>fluorescein-proparacaine ophthalmic (eye) drops</i> | 1 | |
| MIEBO (PF) OPHTHALMIC (EYE) DROPS | 2 | PA; QL |
| <i>olopatadine ophthalmic (eye) drops</i> | 1 | |
| OXERVATE OPHTHALMIC (EYE) DROPS | 3 | PA; LA |
| <i>proparacaine ophthalmic (eye) drops</i> | 1 | |
| RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS | 2 | PA; QL |
| RESTASIS OPHTHALMIC (EYE) DROPPERETTE | 3 | PA; QL |
| TETRACAINE HCL (PF) OPHTHALMIC (EYE) DROPS | 3 | |
| <i>tetracaine hcl ophthalmic (eye) drops</i> | 1 | |
| TYRVAYA NASAL SPRAY, METERED, NON-AEROSOL | 3 | PA |
| VEVYE OPHTHALMIC (EYE) DROPS | 3 | PA; QL |
| XDEMVIY OPHTHALMIC (EYE) DROPS | 3 | QL |
| XIIDRA OPHTHALMIC (EYE) DROPPERETTE | 2 | PA; QL |
| ZERVIAE OPHTHALMIC (EYE) DROPPERETTE | 3 | ST |
| NON-STEROIDAL ANTI-INFLAMMATORY AGENTS | | |
| ACULAR LS OPHTHALMIC (EYE) DROPS | 3 | ST |
| ACULAR OPHTHALMIC (EYE) DROPS | 3 | ST |
| <i>bromfenac ophthalmic (eye) drops</i> | 1 | |
| <i>diclofenac sodium ophthalmic (eye) drops</i> | 1 | |
| <i>flurbiprofen sodium ophthalmic (eye) drops</i> | 1 | |
| ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSION | 3 | |
| <i>ketorolac ophthalmic (eye) drops</i> | 1 | |
| PROLENSA OPHTHALMIC (EYE) DROPS | 3 | |
| ORAL DRUGS FOR GLAUCOMA | | |
| <i>acetazolamide oral capsule, extended release</i> | 1 | |
| <i>acetazolamide oral tablet</i> | 1 | |
| <i>methazolamide oral tablet</i> | 1 | |
| OTHER GLAUCOMA DRUGS | | |
| <i>bimatoprost ophthalmic (eye) drops</i> | 1 | PA |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| BRIMONIDINE-DORZOLAMIDE OPHTHALMIC (EYE) DROPS | 3 | |
| <i>brimonidine-timolol ophthalmic (eye) drops</i> | 1 | |
| <i>brinzolamide ophthalmic (eye) drops,suspension</i> | 1 | |
| COMBIGAN OPHTHALMIC (EYE) DROPS | 3 | |
| <i>dorzolamide ophthalmic (eye) drops</i> | 1 | |
| <i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette</i> | 1 | |
| <i>dorzolamide-timolol ophthalmic (eye) drops</i> | 1 | |
| <i>latanoprost ophthalmic (eye) drops</i> | 1 | PA |
| RHOPRESSA OPHTHALMIC (EYE) DROPS | 3 | |
| ROCKLATAN OPHTHALMIC (EYE) DROPS | 3 | PA |
| SIMBRINZA OPHTHALMIC (EYE) DROPS,SUSPENSION | 3 | |
| <i>tafluprost (pf) ophthalmic (eye) dropperette</i> | 1 | PA |
| TIMOL-BRIMON-DORZOL-BIMATO(PF) OPHTHALMIC (EYE) DROPS | 3 | |
| TIMOLOL-DORZOLAM-BIMATOPRO(PF) OPHTHALMIC (EYE) DROPS | 3 | |
| <i>travoprost ophthalmic (eye) drops</i> | 1 | PA |
| STEROID-ANTIBIOTIC COMBINATIONS | | |
| MAXITROL OPHTHALMIC (EYE) DROPS,SUSPENSION | 3 | |
| MAXITROL OPHTHALMIC (EYE) OINTMENT | 3 | |
| <i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment</i> | 1 | |
| <i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension</i> | 1 | |
| <i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment</i> | 1 | |
| <i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension</i> | 1 | |
| <i>neo-polycin hc ophthalmic (eye) ointment</i> | 1 | |
| TOBRADEX OPHTHALMIC (EYE) OINTMENT | 3 | |
| <i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension</i> | 1 | |
| STERIODS | | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>dexamethasone sodium phosphate ophthalmic (eye) drops</i> | 1 | |
| <i>difluprednate ophthalmic (eye) drops</i> | 1 | |
| EYSUVIS OPHTHALMIC (EYE) DROPS,SUSPENSION | 2 | PA; QL |
| <i>fluorometholone ophthalmic (eye) drops,suspension</i> | 1 | |
| FML LIQUIFILM OPHTHALMIC (EYE) DROPS,SUSPENSION | 3 | ST |
| INVELTYS OPHTHALMIC (EYE) DROPS,SUSPENSION | 3 | ST |
| LOTEMAX OPHTHALMIC (EYE) DROPS,GEL | 3 | ST |
| LOTEMAX OPHTHALMIC (EYE) DROPS,SUSPENSION | 3 | |
| LOTEMAX OPHTHALMIC (EYE) OINTMENT | 3 | ST |
| LOTEMAX SM OPHTHALMIC (EYE) DROPS,GEL | 3 | ST |
| <i>loteprednol etabonate ophthalmic (eye) drops,gel</i> | 1 | |
| <i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %</i> | 1 | ST |
| <i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %</i> | 1 | |
| PRED FORTE OPHTHALMIC (EYE) DROPS,SUSPENSION | 3 | |
| <i>prednisolone acetate ophthalmic (eye) drops,suspension</i> | 1 | |
| <i>prednisolone sodium phosphate ophthalmic (eye) drops</i> | 1 | |
| STEROID-SULFONAMIDE COMBINATIONS | | |
| <i>sulfacetamide-prednisolone ophthalmic (eye) drops</i> | 1 | |
| SULFONAMIDES | | |
| <i>sulfacetamide sodium ophthalmic (eye) drops</i> | 1 | |
| <i>sulfacetamide sodium ophthalmic (eye) ointment</i> | 1 | |
| SYMPATHOMIMETICS | | |
| ALPHAGAN P OPHTHALMIC (EYE) DROPS | 3 | |
| <i>apraclonidine ophthalmic (eye) drops</i> | 1 | |
| <i>brimonidine ophthalmic (eye) drops</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|-----------|-----------------------|
| IOPIDINE OPHTHALMIC (EYE) DROPPERETTE | 3 | |
| VASOCONSTRICTOR DECONGESTANTS | | |
| CYCLOMYDRIL OPHTHALMIC (EYE) DROPS | 3 | |
| <i>phenylephrine hcl ophthalmic (eye) drops</i> | 1 | |
| RESPIRATORY, ALLERGY, COUGH & COLD | | |
| ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS | | |
| AUVI-Q INJECTION AUTO-INJECTOR | 2 | QL |
| <i>carbinoxamine maleate oral liquid</i> | 1 | |
| <i>carbinoxamine maleate oral tablet 4 mg</i> | 1 | |
| <i>carbinoxamine maleate oral tablet 6 mg</i> | 1 | ST |
| <i>cetirizine oral solution 1 mg/ml</i> | 1 | |
| CLARINEX ORAL TABLET | 3 | QL |
| <i>clemastine oral syrup</i> | 1 | PA |
| <i>clemastine oral tablet</i> | 1 | |
| <i>cyproheptadine oral syrup</i> | 1 | |
| <i>cyproheptadine oral tablet</i> | 1 | |
| <i>desloratadine oral tablet</i> | 1 | QL |
| <i>desloratadine oral tablet, disintegrating</i> | 1 | QL |
| <i>dexchlorpheniramine maleate oral solution</i> | 1 | PA |
| DIPHEN ORAL ELIXIR | 3 | |
| <i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i> | 1 | QL |
| EPIPEN INJECTION AUTO-INJECTOR | 2 | ST; QL |
| EPIPEN JR INJECTION AUTO-INJECTOR | 2 | ST; QL |
| <i>hydroxyzine hcl oral solution 10 mg/5 ml</i> | 1 | |
| <i>hydroxyzine hcl oral tablet</i> | 1 | |
| <i>hydroxyzine pamoate oral capsule</i> | 1 | |
| <i>levocetirizine oral solution</i> | 1 | |
| <i>levocetirizine oral tablet</i> | 1 | QL |
| <i>promethazine oral syrup</i> | 1 | |
| <i>promethazine oral tablet</i> | 1 | |
| <i>promethazine rectal suppository 12.5 mg, 25 mg</i> | 1 | |
| <i>promethegan rectal suppository</i> | 1 | |
| RYCLORA ORAL SOLUTION | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| RYVENT ORAL TABLET | 3 | ST |
| VISTARIL ORAL CAPSULE 25 MG | 3 | |
| COUGH & COLD THERAPY | | |
| <i>benzonatate oral capsule</i> | 1 | |
| BROMFED DM ORAL SYRUP | 3 | |
| <i>brompheniramine-pseudoeph-dm oral syrup</i> | 1 | |
| CLARINEX-D 12 HOUR ORAL TABLET, ER MULTIPHASE 12 HR | 3 | QL |
| <i>codeine-guaifenesin oral liquid</i> | 1 | |
| CODITUSSIN AC ORAL LIQUID | 3 | |
| CODITUSSIN DAC ORAL LIQUID | 3 | |
| <i>g tussin ac oral liquid</i> | 1 | |
| HISTEX-AC ORAL SYRUP | 3 | |
| HYCODAN (WITH HOMATROPINE) ORAL SYRUP | 3 | |
| HYCODAN (WITH HOMATROPINE) ORAL TABLET | 3 | |
| <i>hydrocodone-chlorpheniramine oral suspension,extended rel 12 hr</i> | 1 | |
| <i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i> | 1 | |
| <i>hydrocodone-homatropine oral tablet</i> | 1 | |
| <i>hydromet oral syrup</i> | 1 | |
| MAR-COF CG ORAL LIQUID | 3 | |
| <i>maxi-tuss ac oral liquid</i> | 1 | |
| MAXI-TUSS CD ORAL LIQUID | 3 | |
| NINJACOF-XG ORAL LIQUID | 3 | |
| POLY-TUSSIN AC ORAL LIQUID | 3 | |
| <i>promethazine-codeine oral syrup</i> | 1 | |
| <i>promethazine-dm oral syrup</i> | 1 | |
| <i>promethazine-phenylephrine oral syrup</i> | 1 | |
| RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR | 3 | |
| TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR | 3 | |
| PULMONARY AGENTS | | |
| ACCOLATE ORAL TABLET | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| ADEMPAS ORAL TABLET | 3 | PA; LA; QL |
| ADRENALIN NASAL SOLUTION | 3 | |
| ADVAIR HFA INHALATION HFA AEROSOL INHALER | 2 | PA; QL |
| AIRDUO DIGIHALER INHALATION AERO POWDR BREATH ACT W/SENSOR 113 MCG-14 MCG/ACTUATION, 232-14 MCG/ACTUATION | 3 | PA; QL |
| AIRSUPRA INHALATION HFA AEROSOL INHALER | 2 | |
| <i>albuterol sulfate inhalation hfa aerosol inhaler</i> | 1 | QL |
| <i>albuterol sulfate inhalation solution for nebulization</i> | 1 | |
| <i>albuterol sulfate oral syrup</i> | 1 | |
| <i>albuterol sulfate oral tablet</i> | 1 | |
| <i>albuterol sulfate oral tablet extended release 12 hr</i> | 1 | |
| <i>alyq oral tablet</i> | 3 | PA; QL |
| <i>ambrisentan oral tablet</i> | 3 | PA; LA; QL |
| ANORO ELLIPTA INHALATION BLISTER WITH DEVICE | 2 | QL |
| <i>arformoterol inhalation solution for nebulization</i> | 1 | QL |
| ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE | 2 | QL |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER | 2 | QL |
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60) | 2 | QL |
| ATROVENT HFA INHALATION HFA AEROSOL INHALER | 3 | QL |
| <i>azelastine-fluticasone nasal spray,non-aerosol</i> | 1 | ST; QL |
| <i>bosentan oral tablet</i> | 3 | PA; LA; QL |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE | 2 | PA; QL |
| <i>breynga inhalation hfa aerosol inhaler</i> | 1 | PA; QL |
| BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER | 2 | QL |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| BROVANA INHALATION SOLUTION FOR NEBULIZATION | 3 | QL |
| <i>budesonide inhalation suspension for nebulization</i> | 1 | QL |
| <i>budesonide-formoterol inhalation hfa aerosol inhaler</i> | 1 | PA; QL |
| COMBIVENT RESPIMAT INHALATION MIST | 2 | QL |
| <i>cromolyn inhalation solution for nebulization</i> | 1 | |
| DULERA INHALATION HFA AEROSOL INHALER | 2 | PA; QL |
| ELIXOPHYLLIN ORAL ELIXIR | 3 | |
| <i>epinephrine hcl nasal solution</i> | 1 | |
| FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; LA; QL |
| <i>flunisolide nasal spray,non-aerosol</i> | 1 | ST; QL |
| <i>fluticasone propionate nasal spray,suspension</i> | 1 | QL |
| <i>fluticasone propion-salmeterol inhalation blister with device</i> | 1 | PA; QL |
| <i>formoterol fumarate inhalation solution for nebulization</i> | 1 | QL |
| FORMOTEROL FUMARATE-NEBULIZER INHALATION SOLUTION FOR NEBULIZATION | 2 | QL |
| HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION | 3 | |
| <i>icatibant subcutaneous syringe</i> | 3 | PA; QL |
| INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE | 2 | QL |
| <i>ipratropium bromide inhalation solution</i> | 1 | |
| <i>ipratropium-albuterol inhalation solution for nebulization</i> | 1 | QL |
| KALYDECO ORAL GRANULES IN PACKET | 3 | PA; LA; QL |
| KALYDECO ORAL TABLET | 3 | PA; LA; QL |
| <i>levalbuterol hcl inhalation solution for nebulization</i> | 1 | |
| <i>mometasone nasal spray,non-aerosol</i> | 1 | ST; QL |
| <i>montelukast oral granules in packet</i> | 1 | |
| <i>montelukast oral tablet</i> | 1 | |
| <i>montelukast oral tablet,chewable</i> | 1 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| <i>nebusal inhalation solution for nebulization 3 %</i> | 1 | |
| NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 % | 3 | |
| NUCALA SUBCUTANEOUS AUTO-INJECTOR | 3 | PA; LA; QL |
| NUCALA SUBCUTANEOUS RECON SOLN | 3 | PA; LA; QL |
| NUCALA SUBCUTANEOUS SYRINGE | 3 | PA; LA; QL |
| OFEV ORAL CAPSULE | 3 | PA; LA; QL |
| OPSUMIT ORAL TABLET | 3 | PA; LA; QL |
| OPSYNVI ORAL TABLET | 3 | PA; LA; QL |
| ORKAMBI ORAL GRANULES IN PACKET | 3 | PA; LA; QL |
| ORKAMBI ORAL TABLET | 3 | PA; LA; QL |
| ORLADEYO ORAL CAPSULE | 3 | PA; LA; QL |
| <i>pirfenidone oral capsule</i> | 3 | PA; LA; QL |
| <i>pirfenidone oral tablet 267 mg, 801 mg</i> | 3 | PA; LA; QL |
| <i>pulmosal inhalation solution for nebulization</i> | 1 | |
| PULMOZYME INHALATION SOLUTION | 3 | PA; LA |
| QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED | 2 | QL |
| REVATIO ORAL TABLET | 3 | PA; LA; QL |
| <i>roflumilast oral tablet 250 mcg</i> | 1 | ST; QL |
| <i>roflumilast oral tablet 500 mcg</i> | 1 | ST |
| RYALTRIS NASAL SPRAY, NON-AEROSOL | 3 | ST; QL |
| <i>sajazir subcutaneous syringe</i> | 3 | PA; LA; QL |
| <i>sildenafil (pulm.hypertension) oral suspension for reconstitution</i> | 3 | PA; LA; QL |
| <i>sildenafil (pulm.hypertension) oral tablet</i> | 3 | PA; LA; QL |
| <i>sodium chloride inhalation solution for nebulization</i> | 1 | |
| SPIRIVA RESPIMAT INHALATION MIST | 2 | QL |
| SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE | 3 | QL |
| STIOLTO RESPIMAT INHALATION MIST | 2 | QL |
| STRIVERDI RESPIMAT INHALATION MIST | 2 | QL |
| SYMBICORT INHALATION HFA AEROSOL INHALER | 3 | PA; QL |
| SYMDEKO ORAL TABLETS, SEQUENTIAL | 3 | PA; LA; QL |
| <i>tadalafil (pulm. hypertension) oral tablet</i> | 3 | PA; LA; QL |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>terbutaline oral tablet</i> | 1 | |
| <i>terbutaline subcutaneous solution</i> | 1 | |
| TEZSPIRE SUBCUTANEOUS PEN INJECTOR | 3 | PA; LA; QL |
| THEO-24 ORAL CAPSULE,EXTENDED RELEASE 24HR | 3 | |
| <i>theophylline oral elixir</i> | 1 | |
| <i>theophylline oral solution</i> | 1 | |
| <i>theophylline oral tablet extended release 12 hr</i> | 1 | |
| <i>theophylline oral tablet extended release 24 hr</i> | 1 | |
| <i>tiotropium bromide inhalation capsule, w/inhalation device</i> | 1 | |
| TRACLEER ORAL TABLET | 3 | PA; LA; QL |
| TRACLEER ORAL TABLET FOR SUSPENSION | 3 | PA; LA; QL |
| TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE | 2 | QL |
| TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL | 3 | PA; LA; QL |
| TRIKAFTA ORAL TABLETS, SEQUENTIAL | 3 | PA; LA; QL |
| TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16(112)-32(112) - 48(28) MCG, 32 MCG, 48 MCG, 64 MCG | 3 | PA; LA |
| TYVASO INHALATION SOLUTION FOR NEBULIZATION | 3 | PA; LA |
| TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION | 3 | PA; LA |
| TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION | 3 | PA; LA |
| VENTAVIS INHALATION SOLUTION FOR NEBULIZATION | 3 | PA; LA |
| WINREVAIR SUBCUTANEOUS KIT | 3 | PA; LA |
| <i>wixela inhub inhalation blister with device</i> | 1 | PA; QL |
| XHANCE NASAL AEROSOL BREATH ACTIVATED | 2 | ST; QL |
| YUPELRI INHALATION SOLUTION FOR NEBULIZATION | 2 | QL |
| <i>zafirlukast oral tablet</i> | 1 | |
| <i>zileuton oral tablet, er multiphase 12 hr</i> | 1 | ST |
| ZYFLO ORAL TABLET | 3 | ST |

| Drug Name | Drug Tier | Requirements / Limits |
|---|-----------|-----------------------|
| UROLOGICALS | | |
| ANTICHOLINERGICS & ANTISPASMODICS | | |
| <i>darifenacin oral tablet extended release 24 hr</i> | 1 | |
| <i>fesoterodine oral tablet extended release 24 hr</i> | 1 | |
| <i>flavoxate oral tablet</i> | 1 | |
| GEMTESA ORAL TABLET | 3 | |
| <i>mirabegron oral tablet extended release 24 hr</i> | 1 | |
| MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON | 2 | |
| MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR | 2 | |
| <i>oxybutynin chloride oral syrup</i> | 1 | |
| <i>oxybutynin chloride oral tablet 5 mg</i> | 1 | |
| <i>oxybutynin chloride oral tablet extended release 24hr</i> | 1 | |
| OXYTROL TRANSDERMAL PATCH SEMIWEEKLY | 3 | ST; QL |
| <i>solifenacin oral tablet</i> | 1 | |
| <i>tolterodine oral capsule,extended release 24hr</i> | 1 | |
| <i>tolterodine oral tablet</i> | 1 | |
| <i>trospium oral capsule,extended release 24hr</i> | 1 | |
| <i>trospium oral tablet</i> | 1 | |
| BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY | | |
| <i>alfuzosin oral tablet extended release 24 hr</i> | 1 | |
| <i>dutasteride oral capsule</i> | 1 | ST |
| <i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr</i> | 1 | ST |
| <i>finasteride oral tablet 5 mg</i> | 1 | |
| FLOMAX ORAL CAPSULE | 3 | ST |
| PROSCAR ORAL TABLET | 3 | ST |
| <i>silodosin oral capsule</i> | 1 | |
| <i>tadalafil oral tablet 2.5 mg, 5 mg</i> | 1 | PA; QL |
| <i>tamsulosin oral capsule</i> | 1 | |
| CHOLINERGIC STIMULANTS | | |
| <i>bethanechol chloride oral tablet</i> | 1 | |
| MISCELLANEOUS UROLOGICALS | | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| CAVERJECT IMPULSE INTRACAVERNOSAL KIT | 2 | PA; QL |
| CAVERJECT INTRACAVERNOSAL RECON SOLN | 2 | PA; QL |
| CAVERJECT INTRACAVERNOSAL SYRINGE | 2 | PA; QL |
| CYSTAGON ORAL CAPSULE | 3 | LA |
| EDEX INTRACAVERNOSAL KIT | 3 | PA; QL |
| ELMIRON ORAL CAPSULE | 2 | |
| K-PHOS NO 2 ORAL TABLET | 3 | |
| K-PHOS ORIGINAL ORAL TABLET,SOLUBLE | 2 | |
| <i>methen-sod phos-meth blue-hyos oral tablet</i> | 1 | |
| ORACIT ORAL SOLUTION | 3 | |
| <i>potassium citrate oral tablet extended release</i> | 1 | |
| <i>sildenafil oral tablet</i> | 1 | PA; QL |
| <i>sodium citrate-citric acid oral solution 490-640 mg/5 ml</i> | 1 | |
| STENDRA ORAL TABLET | 3 | PA; QL |
| <i>tadalafil oral tablet 10 mg, 20 mg</i> | 1 | PA; QL |
| URELLE ORAL TABLET | 3 | |
| <i>uretron d-s oral tablet</i> | 1 | |
| URIBEL TABS ORAL TABLET | 3 | |
| <i>urimar-t oral tablet</i> | 1 | |
| UROCIT-K 10 ORAL TABLET EXTENDED RELEASE | 3 | |
| UROCIT-K 15 ORAL TABLET EXTENDED RELEASE | 3 | |
| <i>urogesic-blue oral tablet</i> | 1 | |
| <i>uro-mp oral capsule</i> | 1 | |
| UROQID-ACID NO.2 ORAL TABLET | 3 | |
| <i>uro-sp oral capsule</i> | 1 | |
| <i>uryl oral tablet</i> | 1 | |
| <i>vardenafil oral tablet</i> | 1 | PA; QL |
| <i>vardenafil oral tablet,disintegrating</i> | 1 | PA; QL |
| URINARY ANESTHETICS | | |
| <i>phenazopyridine oral tablet 100 mg, 200 mg</i> | 1 | |

VITAMINS, HEMATINICS & ELECTROLYTES

| Drug Name | Drug Tier | Requirements / Limits |
|--|-----------|-----------------------|
| ELECTROLYTES | | |
| <i>calcium acetate(phosphat bind) oral capsule</i> | 1 | QL |
| <i>calcium acetate(phosphat bind) oral tablet</i> | 1 | QL |
| EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ | 3 | |
| <i>effe-r-k oral tablet, effervescent 25 meq</i> | 1 | |
| GALZIN ORAL CAPSULE | 3 | |
| <i>klor-con oral packet 20 meq</i> | 1 | |
| <i>klor-con oral tablet extended release 10 meq, 8 meq</i> | 1 | |
| <i>klor-con oral tablet,er particles/crystals 10 meq, 15 meq, 20 meq</i> | 1 | |
| <i>klor-con/ef oral tablet, effervescent</i> | 1 | |
| K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ | 3 | |
| <i>lugols oral solution</i> | 1 | |
| <i>potassium chloride oral capsule, extended release</i> | 1 | |
| <i>potassium chloride oral liquid</i> | 1 | |
| <i>potassium chloride oral packet</i> | 1 | |
| <i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i> | 1 | |
| POTASSIUM CHLORIDE ORAL TABLET EXTENDED RELEASE 15 MEQ | 3 | |
| <i>potassium chloride oral tablet,er particles/crystals</i> | 1 | |
| <i>strong iodine oral solution</i> | 1 | |
| MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES | | |
| DOJOLVI ORAL LIQUID | 3 | PA; LA |
| VITAMINS & HEMATINICS | | |
| <i>b complex 1 (with folic acid) oral tablet</i> | ACA | ACA; OTC |
| <i>b complex-vitamin c-folic acid oral tablet</i> | ACA | ACA; OTC |
| <i>balanced b-100 oral tablet</i> | ACA | ACA; OTC |
| BAL-CARE DHA ESSENTIAL ORAL COMBO PACK, TABLET AND CAP, DR | 3 | |
| <i>bal-care dha oral combo pack, tablet and cap, dr</i> | 1 | |
| <i>b-complex with vitamin c oral tablet 400-500 mcg-mg</i> | ACA | ACA; OTC |
| <i>classic prenatal oral tablet</i> | ACA | ACA; OTC |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| <i>c-nate dha oral capsule</i> | 1 | |
| <i>complete natal dha oral combo pack</i> | 1 | |
| <i>cyanocobalamin (vitamin b-12) injection solution</i> | 1 | |
| <i>cyanocobalamin (vitamin b-12) nasal spray,non-aerosol</i> | 1 | ST; QL |
| <i>dialyvite 800 oral tablet</i> | ACA | ACA; OTC |
| <i>dodex injection solution</i> | 1 | |
| DUET DHA WITH OMEGA-3 ORAL COMBO PACK | 3 | |
| <i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i> | 1 | |
| <i>fluoride (sodium) oral drops</i> | ACA | ACA; OTC |
| <i>fluoride (sodium) oral tablet,chewable</i> | ACA | ACA; OTC |
| <i>folic acid oral tablet 1 mg</i> | 1 | |
| <i>folic acid oral tablet 400 mcg, 800 mcg</i> | ACA | ACA; OTC |
| <i>folitab oral tablet extended release</i> | ACA | ACA; OTC |
| <i>foltabs 800 oral tablet</i> | ACA | ACA; OTC |
| <i>full spectrum b-vitamin c oral tablet</i> | ACA | ACA; OTC |
| <i>kobee oral tablet</i> | ACA | ACA; OTC |
| KOSHER PRENATAL PLUS IRON ORAL TABLET | 3 | |
| <i>ludent fluoride oral tablet,chewable</i> | ACA | ACA; OTC |
| MARNATAL-F ORAL CAPSULE | 3 | |
| <i>m-natal plus oral tablet</i> | 1 | |
| <i>multi-vitamin with fluoride oral drops</i> | ACA | ACA; OTC |
| <i>multi-vitamin with fluoride oral tablet,chewable</i> | ACA | ACA; OTC |
| <i>mvc-fluoride oral tablet,chewable</i> | ACA | ACA; OTC |
| <i>mynatal oral capsule</i> | 1 | |
| <i>mynatal plus oral tablet</i> | 1 | |
| <i>mynatal-z oral tablet</i> | 1 | |
| NASCOBAL NASAL SPRAY,NON-AEROSOL | 2 | ST; QL |
| NATACHEW (FE BIS-GLYCINATE) ORAL TABLET,CHEWABLE | 3 | |
| NEONATAL COMPLETE ORAL TABLET | 3 | |
| NEONATAL FE ORAL TABLET | 3 | |
| NEONATAL PLUS VITAMIN ORAL TABLET | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|--|------------------|------------------------------|
| NEONATAL-DHA ORAL COMBO PACK | 3 | |
| NESTABS ABC ORAL COMBO PACK | 3 | |
| NESTABS DHA ORAL COMBO PACK | 3 | |
| NESTABS ORAL TABLET | 3 | |
| <i>newgen oral tablet</i> | 1 | |
| OB COMPLETE ONE ORAL CAPSULE | 3 | |
| OB COMPLETE PETITE ORAL CAPSULE | 3 | |
| OB COMPLETE PREMIER ORAL TABLET | 3 | |
| OB COMPLETE WITH DHA ORAL CAPSULE | 3 | |
| <i>one daily prenatal oral combo pack</i> | ACA | ACA; OTC |
| <i>pnv-select oral tablet</i> | 1 | |
| <i>pr natal 400 ec oral combo pack,tablet and cap,dr</i> | 1 | |
| <i>pr natal 400 oral combo pack</i> | 1 | |
| <i>pr natal 430 ec oral combo pack,tablet and cap,dr</i> | 1 | |
| <i>pr natal 430 oral combo pack</i> | 1 | |
| PRENATA ORAL TABLET,CHEWABLE | 3 | |
| <i>prenatabs fa oral tablet</i> | 1 | |
| <i>prenatabs rx oral tablet</i> | 1 | |
| <i>prenatal complete oral tablet</i> | ACA | ACA; OTC |
| <i>prenatal multi-dha (algal oil) oral capsule</i> | ACA | ACA; OTC |
| <i>prenatal multivitamins oral tablet</i> | ACA | ACA; OTC |
| <i>prenatal one daily oral tablet</i> | ACA | ACA; OTC |
| <i>prenatal oral tablet 28 mg iron- 800 mcg</i> | ACA | ACA; OTC |
| <i>prenatal plus (calcium carb) oral tablet</i> | 1 | |
| PRENATAL PLUS DHA ORAL COMBO PACK | 3 | |
| <i>prenatal plus oral tablet</i> | 1 | |
| PRENATAL PLUS VITAMIN-MINERAL ORAL TABLET | 3 | |
| <i>prenatal vit no.179-iron-folic oral tablet</i> | ACA | ACA; OTC |
| <i>prenatal vitamin oral tablet 27 mg iron- 0.8 mg</i> | ACA | ACA; OTC |
| <i>prenatal vitamin with minerals oral tablet</i> | ACA | ACA; OTC |
| PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE | 3 | |
| PRENATE ELITE (IRON ASP GLYC) ORAL TABLET | 3 | |
| PRENATE ENHANCE ORAL CAPSULE | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE | 3 | |
| PRENATE PIXIE ORAL CAPSULE | 3 | |
| PRENATE RESTORE ORAL CAPSULE | 3 | |
| PRENATE STAR ORAL TABLET | 3 | |
| PRIMACARE ORAL CAPSULE | 3 | |
| PROVIDA OB ORAL CAPSULE | 3 | |
| <i>rena-vite oral tablet</i> | ACA | ACA; OTC |
| R-NATAL OB ORAL CAPSULE | 3 | |
| SELECT-OB (FOLIC ACID) ORAL TABLET,CHEWABLE | 3 | |
| SELECT-OB + DHA ORAL COMBO PACK | 3 | |
| SELECT-OB ORAL TABLET,CHEWABLE | 3 | |
| <i>se-natal 19 chewable oral tablet,chewable</i> | 1 | |
| <i>se-natal-19 oral tablet</i> | 1 | |
| <i>soluvita a,c,d with fluoride oral drops</i> | ACA | ACA; OTC |
| <i>soluvita oral drops</i> | ACA | ACA; OTC |
| <i>stress formula with iron oral tablet</i> | ACA | ACA; OTC |
| <i>stress formula with iron(sulf) oral tablet</i> | ACA | ACA; OTC |
| <i>super b maxi complex oral tablet</i> | ACA | ACA; OTC |
| <i>super b-50 complex oral capsule</i> | ACA | ACA; OTC |
| <i>super quintis oral tablet</i> | ACA | ACA; OTC |
| THRIVITE RX ORAL TABLET | 3 | |
| TRICARE ORAL TABLET | 3 | |
| <i>tricon oral capsule</i> | ACA | ACA; OTC |
| <i>trinatal rx 1 oral tablet</i> | 1 | |
| <i>trinate oral tablet</i> | 1 | |
| TRISTART DHA ORAL CAPSULE | 3 | |
| <i>tri-vitamin with fluoride oral drops</i> | ACA | ACA; OTC |
| VITAFOL FE PLUS ORAL CAPSULE | 3 | |
| VITAFOL GUMMIES ORAL TABLET,CHEWABLE | 3 | |
| VITAFOL ULTRA ORAL CAPSULE | 3 | |
| VITAFOL-OB ORAL TABLET | 3 | |
| VITAFOL-OB+DHA ORAL COMBO PACK | 3 | |
| VITAFOL-ONE ORAL CAPSULE | 3 | |

| Drug Name | Drug Tier | Requirements / Limits |
|---|------------------|------------------------------|
| VITAMEDMD ONE RX ORAL CAPSULE | 3 | |
| <i>vitamin b complex-folic acid oral tablet</i> | ACA | ACA; OTC |
| <i>vitamins a,c,d and fluoride oral drops</i> | ACA | ACA; OTC |
| VITATRUE ORAL COMBO PACK | 3 | |
| <i>wesnatal dha complete oral combo pack</i> | 1 | |
| <i>wesnate dha oral capsule</i> | 1 | |
| <i>westab plus oral tablet</i> | 1 | |
| <i>westgel dha oral capsule</i> | 1 | |

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