EmblemHealth®

EmblemHealth Uniformed Sanitationmen's Association Medicare Eligible Formulary

Formulary ID – U86M
(To find your plan's formulary, simply locate the letter identifiers in the "Formulary" section on the front of your member ID card. Then, visit **emblemhealth.com**, click Member Resources, and choose Drugs Covered to locate and view your drug list online.)

2026 Formulary (List of Covered Drugs)

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

This formulary was updated on **Jan. 1, 2026**. To reach member services, please call **877-793-6253** (TTY: **711**). Our hours are 8 a.m. to 6 p.m., Monday through Friday, and 10 a.m. to 1 p.m., Saturday and Sunday. A representative will be happy to help.

EmblemHealth Uniformed Sanitationmen's Association Medicare Eligible Formulary

2026 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 **Jan. 1, 2026**. 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 8 a.m. to 6 p.m., Monday through Friday, and 10 a.m. to 1 p.m., Saturday and Sunday. 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 83. Generic drugs are shown in lower-case boldface type. Most generic drugs are followed by a reference brand drug in (parentheses). Some generic products have no reference brand.

Brand prescription drugs are shown in capital letters followed by the generic name.

EMBLEMHEALTH UNIFORMED SANITATIONMEN'S ASSOCIATION MEDICARE PRESCRIPTION DRUG FORMULARY

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

Tier	Explanation
Tier 1	Generic
Tier 2	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 one.

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. Following is a list of abbreviations that explains what the initials mean.

List of abbreviations and what these terms mean to you

FF: This product is currently affected by the Frozen Formulary mandate. Coverage, copay, and utilization management may change due to frozen formulary depending on your plan year start date.

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

OTC: Over the Counter. An OTC drug is a non-prescription drug.

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.

SP: Specialty Drugs. Specialty drugs may require special handling, patient monitoring, and unique education prior to use.

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.

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.

EMBLEMHEALTH UNIFORMED SANITATIONMEN'S ASSOCIATION MEDICARE PRESCRIPTION DRUG FORMULARY

Can I get my drugs delivered to my home?

Yes, your plan benefit provides the convenience of home delivery. 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. Pharmacists check every order for accuracy and are available 24/7 to answer your questions.

Disclaimer

Please see your Certificate of Coverage for plan details. It will tell you what is covered and how much you pay for your drugs. As new generic drugs become available, the brand-name version will no longer be a preferred choice. To help keep your costs down, ask your doctor to prescribe generic drugs when possible. You can view your Certificate of Coverage and other important plan information by signing in to your member portal at **my.emblemhealth.com**.

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 member ID card.

How do I contact someone at EmblemHealth?

To reach member services:

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

EmblemHealth®

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。

РУССКИЙ (Russian) ВНИМАНИЕ: Если вы говорите на русском, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону **877-411-3625** (TTY: **711**) или обратитесь к своему поставщику услуг.

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 fòma aksesib 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.

(**Yiddish**) **יידיש** נאטיץ: אויב איר רעדט יידיש, שפראך הילף סערוויסעס זענען בארעכטיגט פאר דיר פריי. צונעמען אידס און באדינונגס פאר פראווייזינג אינפארמאציע אין צוטריטלעך פארמאטירונגען זענען אויך בנימצא פריי. רופן **877-411-3625** (TTY: **711**) אדער רעדן מיט דיין טרעגער.

EmblemHealth Plan, Inc., EmblemHealth Insurance Company, EmblemHealth Services Company, LLC, and Health Insurance Plan of Greater New York (HIP) are EmblemHealth companies. EmblemHealth Services Company, LLC provides administrative services to the EmblemHealth companies.

10-9127 8/24

বাংলা (Bengali) মনোযোগ দিন: যদি আপনি বাংলা বলেন তাহলে আপনার জন্য বিনামূল্যে ভাষা সহায়তা পরিষেবাদি উপলব্ধ রয়েছে। অ্যাক্সেসযোগ্য ফরম্যাটে তথ্য প্রদানের জন্য উপযুক্ত সহায়ক সহযোগিতা এবং পরিষেবাদিও বিনামূল্যে উপলব্ধ রয়েছে। **877-411-3625** (TTY: **711**) নম্বরে কল করুন অথবা আপনার প্রদানকারীর সাথে কথা বলুন।

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 كنـ تتتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصـ لعلى الرقم **877-411-3625** (**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.

اردو (Urdu)

توجہ دیں: اگر آپ اردو بولتے ہیں، تو آپ کے لیے زبان کی مفت مدد کی خدمات دستیاب ہیں۔ قابـ لوسائی فارمیٹس میں معلومات فراہم کرنے کے لیـ ےمناسب معاون امداد اور خدمات بھی مفت دستیاب ہیں۔ (TTY: **711**) **877-411-3625** پر کال کریں یا اپنے فراہم کنندہ سے بات کریں۔

Tagalog (Tagalog) PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa **877-411-3625** (TTY: **711**) o makipag-usap sa iyong provider.

Ελληνικά (Greek) ΠΡΟΣΟΧΗ: Εάν μιλάτε ελληνικά, υπάρχουν διαθέσιμες δωρεάν υπηρεσίες υποστήριξης στη συγκεκριμένη γλώσσα. Διατίθενται δωρεάν κατάλληλα βοηθήματα και υπηρεσίες για παροχή πληροφοριών σε προσβάσιμες μορφές. Καλέστε το **877-411-3625** (TTY: **711**) ή απευθυνθείτε στον πάροχό σας.

SHQIP (Albanian) VINI RE: Nëse flisni shqip, shërbime falas të ndihmës së gjuhës janë në dispozicion për ju. Ndihma të përshtatshme dhe shërbime shtesë për të siguruar informacion në formate të përdorshme janë gjithashtu në dispozicion falas. Telefononi **877-411-3625** (TTY: **711**) ose bisedoni me ofruesin tuaj të shërbimit.

NOTICE OF NONDISCRIMINATION POLICY

Discrimination is Against the Law

EmblemHealth complies with Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex, including sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes. 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**.

Drug Name	Drug Tier	Requirements/Limits
ANTI-INFECTIVE AGENTS		
PENICILLINS		
AMOXICILLIN - amoxicillin (trihydrate) chew tab 125 mg, 250 mg	2	
amoxicillin (trihydrate) cap 250 mg, 500 mg	1	
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	1	
amoxicillin (trihydrate) tab 500 mg, 875 mg	1	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml	1	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	1	
amoxicillin & k clavulanate tab 250-125 mg, 500-125 mg, 875-125 mg	1	
AMOXICILLIN/CLAVULANATE P - amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	2	
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm, 3 (2-1) gm (Unasyn)	1	
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm	1	
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm (Unasyn bulk pack)	1	
ampicillin cap 500 mg	1	
AMPICILLIN SODIUM - ampicillin sodium for iv soln 1 gm, 2 gm	2	
ampicillin sodium for inj 250 mg, 500 mg, 1 gm, 2 gm	1	
ampicillin sodium for iv soln 10 gm	1	
AMPICILLIN-SULBACTAM - ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm	2	
dicloxacillin sodium cap 250 mg, 500 mg	1	
NAFCILLIN - nafcillin sodium in dextrose inj 2 gm/100ml	2	
nafcillin sodium for inj 1 gm, 2 gm	1	
nafcillin sodium for iv soln 10 gm	1	
OXACILLIN SODIUM - oxacillin sodium in dextrose inj 2 gm/50ml	2	
oxacillin sodium for inj 1 gm (base equivalent), 2 gm (base equivalent)	1	
oxacillin sodium for iv soln 10 gm (base equivalent)	1	
penicillin g potassium for inj 5000000 unit, 20000000 unit	1	
PENICILLIN G SODIUM - penicillin g sodium for inj 5000000 unit	2	
PENICILLIN V POTASSIUM - penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	2	
penicillin v potassium tab 250 mg, 500 mg	1	
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)	1	LA
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm), 4.5 gm (4-0.5 gm), 40.5 gm (36-4.5 gm)	1	LA
CEPHALOSPORINS		
CEFACLOR - cefaclor cap 250 mg, 500 mg	2	

Drug Name	Drug Tier	Requirements/Limits
CEFACLOR - cefaclor for susp 250 mg/5ml	2	
CEFACLOR ER - cefaclor monohydrate tab er 12hr 500 mg	2	
CEFADROXIL - cefadroxil tab 1 gm	2	
cefadroxil cap 500 mg	1	
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	1	
CEFAZOLIN SODIUM - cefazolin sodium-dextrose iv solution 1 gm/50ml-4%	2	
CEFAZOLIN SODIUM - cefazolin sodium for iv soln 1 gm	2	
CEFAZOLIN SODIUM - cefazolin sodium (bulk) for inj 100 gm, 300 gm	2	
cefazolin sodium for inj 500 mg, 1 gm, 10 gm	1	
CEFAZOLIN SODIUM/DEXTROSE - cefazolin sodium for iv soln 1 gm and dextrose 4% (50 ml), 2 gm and dextrose 3% (50 ml)	2	
cefdinir cap 300 mg	1	
cefdinir for susp 125 mg/5ml, 250 mg/5ml	1	
CEFEPIME - cefepime hcl iv soln 1 gm/50ml, 2 gm/100ml	2	
cefepime hcl for inj 1 gm	1	
cefepime hcl for iv soln 2 gm	1	
cefixime cap 400 mg	1	
cefixime for susp 100 mg/5ml, 200 mg/5ml	1	
cefotetan disodium for inj 1 gm, 2 gm (Cefotan)	1	
CEFOXITIN SODIUM - cefoxitin sodium iv for soln 1 gm and dextrose 4% (50 ml), 2 gm and dextrose 2.2% (50 ml)	2	
cefoxitin sodium for iv soln 1 gm, 2 gm, 10 gm	1	
CEFPODOXIME PROXETIL - cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	2	
cefpodoxime proxetil tab 100 mg, 200 mg	1	
cefprozil for susp 125 mg/5ml, 250 mg/5ml	1	
cefprozil tab 250 mg, 500 mg	1	
CEFTAZIDIME - ceftazidime for inj 6 gm	2	
ceftazidime for inj 1 gm	1	
ceftazidime for iv soln 2 gm	1	
CEFTRIAXONE IN ISO-OSMOTI - ceftriaxone sodium in dextrose inj 20 mg/ml, 40 mg/ml	2	
ceftriaxone sodium for inj 250 mg, 500 mg, 1 gm, 2 gm, 10 gm	1	
ceftriaxone sodium for iv soln 1 gm, 2 gm	1	
CEFTRIAXONE/DEXTROSE - ceftriaxone sodium for iv soln 1 gm and dextrose 3.74% 50 ml, 2 gm and dextrose 2.22% 50 ml	2	
cefuroxime axetil tab 250 mg, 500 mg	1	
cefuroxime sodium for inj 750 mg	1	
cefuroxime sodium for iv soln 1.5 gm	1	
cephalexin cap 250 mg, 500 mg, 750 mg	1	
cephalexin for susp 125 mg/5ml, 250 mg/5ml	1	
cephalexin tab 250 mg, 500 mg	1	

Drug Name	Drug Tier	Requirements/Limits
MACROLIDES		
azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)	1	
azithromycin iv for soln 500 mg (Zithromax)	1	
azithromycin tab 250 mg (Zithromax z-pak)	1	
azithromycin tab 500 mg (Zithromax)	1	
azithromycin tab 600 mg	1	
CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml, 250 mg/5ml	2	
clarithromycin tab er 24hr 500 mg	1	
clarithromycin tab 250 mg, 500 mg	1	
ERYTHROMYCIN DR - erythromycin w/ delayed release particles cap 250 mg	2	
erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)	1	
erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)	1	
erythromycin tab delayed release 250 mg, 333 mg, 500 mg	1	
erythromycin tab 250 mg, 500 mg	1	
TETRACYCLINES		
demeclocycline hcl tab 150 mg, 300 mg	1	
doxycycline hyclate cap 50 mg, 100 mg	1	
doxycycline hyclate for inj 100 mg	1	
doxycycline hyclate tab 20 mg, 50 mg, 75 mg, 100 mg, 150 mg	1	
doxycycline monohydrate cap 50 mg, 75 mg, 100 mg, 150 mg	1	
doxycycline monohydrate for susp 25 mg/5ml	1	
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg	1	
minocycline hcl cap 50 mg, 75 mg, 100 mg	1	
minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg	1	
minocycline hcl tab 50 mg, 75 mg, 100 mg	1	
MINOCYCLINE HYDROCHLORIDE - minocycline hcl tab er 24hr 45 mg, 90 mg, 135 mg	2	
tetracycline hcl cap 250 mg, 500 mg	1	
FLUOROQUINOLONES		
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro)	1	
ciprofloxacin hcl tab 750 mg (base equiv)	1	
CIPROFLOXACIN I.V.-IN D5W - ciprofloxacin 200 mg/100ml in d5w	2	
CIPROFLOXACIN I.V.-IN D5W - ciprofloxacin 400 mg/200ml in d5w	2	
levofloxacin in d5w iv soln 250 mg/50ml, 500 mg/100ml, 750 mg/150ml	1	
levofloxacin oral soln 25 mg/ml	1	
levofloxacin tab 250 mg, 500 mg, 750 mg	1	
moxifloxacin hcl tab 400 mg (base equiv)	1	
OFLOXACIN - ofloxacin tab 300 mg, 400 mg	2	

Drug Name	Drug Tier	Requirements/Limits
AMINOGLYCOSIDES		
amikacin sulfate inj 500 mg/2ml (250 mg/ml), 1 gm/4ml (250 mg/ml)	1	
gentamicin sulfate inj 10 mg/ml, 40 mg/ml	1	
GENTAMICIN SULFATE/0.9% S - gentamicin in saline inj 1 mg/ml, 1.2 mg/ml, 1.6 mg/ml	2	
ISOTONIC GENTAMICIN - gentamicin in saline inj 0.8 mg/ml	2	
neomycin sulfate tab 500 mg	1	
TOBI PODHALER - tobramycin inhal cap 28 mg	2	LA, SP
tobramycin nebu soln 300 mg/5ml (Tobi)	1	SP
tobramycin nebu soln 300 mg/4ml (Bethkis)	1	SP
TOBRAMYCIN SULFATE - tobramycin sulfate inj 10 mg/ml (base equivalent), 2 gm/50ml (40 mg/ml) (base equiv)	2	
tobramycin sulfate for inj 1.2 gm	1	
tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv), 1.2 gm/30ml (40 mg/ml) (base equiv)	1	
SULFONAMIDES		
sulfadiazine tab 500 mg	1	
ANTIMYCOBACTERIAL AGENTS		
CYCLOSERINE - cycloserine cap 250 mg	2	
ethambutol hcl tab 100 mg, 400 mg	1	
ISONIAZID - isoniazid inj 100 mg/ml	2	
isoniazid syrup 50 mg/5ml	1	
isoniazid tab 100 mg, 300 mg	1	
pyrazinamide tab 500 mg	1	
rifabutin cap 150 mg	1	
rifampin cap 150 mg, 300 mg	1	
rifampin for inj 600 mg (Rifadin)	1	
ANTIFUNGALS		
AMPHOTERICIN B - amphotericin b for iv soln 50 mg	2	
fluconazole for susp 10 mg/ml	1	
fluconazole for susp 40 mg/ml (Diflucan)	1	
fluconazole in nacl 0.9% inj 200 mg/100ml, 400 mg/200ml	1	
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg	1	
flucytosine cap 250 mg, 500 mg (Ancobon)	1	
griseofulvin microsize susp 125 mg/5ml	1	
griseofulvin microsize tab 500 mg	1	
GRISEOFULVIN ULTRAMICROSI - griseofulvin ultramicrosize tab 165 mg	2	
itraconazole cap 100 mg (Sporanox)	1	
itraconazole oral soln 10 mg/ml	1	
ketoconazole tab 200 mg	1	
nystatin tab 500000 unit	1	

Drug Name	Drug Tier	Requirements/Limits
posaconazole susp 40 mg/ml (Noxafil)	1	
posaconazole tab delayed release 100 mg (Noxafil)	1	
terbinafine hcl tab 250 mg	1	
voriconazole for susp 40 mg/ml (Vfend)	1	
voriconazole tab 50 mg, 200 mg	1	
ANTIVIRALS		
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)	1	QL (960 mls/30 days)
abacavir sulfate tab 300 mg (base equiv)	1	QL (60 tablets/30 days)
abacavir sulfate-lamivudine tab 600-300 mg	1	QL (30 tablets/30 days)
acyclovir cap 200 mg	1	
acyclovir sodium iv soln 50 mg/ml	1	
acyclovir susp 200 mg/5ml	1	
acyclovir tab 400 mg, 800 mg	1	
adefovir dipivoxil tab 10 mg	1	
APRETUDE - cabotegravir im extended release susp 600 mg/3ml	2	LA, SP
APTIVUS - tipranavir cap 250 mg	2	QL (120 capsules/30 days)
atazanavir sulfate cap 150 mg (base equiv)	1	QL (30 capsules/30 days)
atazanavir sulfate cap 200 mg (base equiv) (Reyataz)	1	QL (60 capsules/30 days)
atazanavir sulfate cap 300 mg (base equiv) (Reyataz)	1	QL (30 capsules/30 days)
BIKTARVY - bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	2	QL (30 tablets/30 days)
COMPLERA - emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	2	QL (30 tablets/30 days)
darunavir tab 600 mg (Prezista)	1	QL (60 tablets/30 days)
darunavir tab 800 mg (Prezista)	1	QL (30 tablets/30 days)
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	2	QL (30 tablets/30 days)
EDURANT - rilpivirine hcl tab 25 mg (base equivalent)	2	QL (30 tablets/30 days)
efavirenz tab 600 mg	1	QL (30 tablets/30 days)
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	1	QL (30 tablets/30 days)
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)	1	QL (30 tablets/30 days)
EFAVIRENZ/LAMIVUDINE/TENO - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	2	QL (30 tablets/30 days)
emtricitabine caps 200 mg (Emtriva)	1	QL (30 capsules/30 days)
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg (Complera)	1	QL (30 tablets/30 days)
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg (Truvada)	1	QL (30 tablets/30 days)
EMTRIVA - emtricitabine soln 10 mg/ml	2	QL (680 mls/28 days)
entecavir tab 0.5 mg, 1 mg (Baraclude)	1	
etravirine tab 100 mg, 200 mg (Intelence)	1	QL (60 tablets/30 days)
famciclovir tab 125 mg, 250 mg, 500 mg	1	
fosamprenavir calcium tab 700 mg (base equiv)	1	QL (120 tablets/30 days)
foscarnet sodium inj 6000 mg/250ml (24 mg/ml) (Foscavir)	1	

Drug Name	Drug Tier	Requirements/Limits
ganciclovir sodium for inj 500 mg	1	
GENVOYA - elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	2	QL (30 tablets/30 days)
INTELENCE - etravirine tab 25 mg	2	QL (120 tablets/30 days)
INTELENCE - etravirine tab 100 mg, 200 mg	2	QL (60 tablets/30 days)
ISENTRESS - raltegravir potassium tab 400 mg (base equiv)	2	QL (60 tablets/30 days)
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	2	QL (180 tablets/30 days)
KALETRA - lopinavir-ritonavir tab 100-25 mg	2	QL (180 tablets/30 days)
KALETRA - lopinavir-ritonavir tab 200-50 mg	2	QL (120 tablets/30 days)
LAGEVRIO - molnupiravir cap 200 mg	2	QL (40 capsules/30 days)
lamivudine oral soln 10 mg/ml (Epivir)	1	QL (960 mls/30 days)
lamivudine tab 100 mg (hbv)	1	
lamivudine tab 150 mg (Epivir)	1	QL (60 tablets/30 days)
lamivudine tab 300 mg (Epivir)	1	QL (30 tablets/30 days)
lamivudine-zidovudine tab 150-300 mg	1	QL (60 tablets/30 days)
lopinavir-ritonavir tab 100-25 mg (Kaletra)	1	QL (180 tablets/30 days)
lopinavir-ritonavir tab 200-50 mg (Kaletra)	1	QL (120 tablets/30 days)
maraviroc tab 150 mg (Selzentry)	1	QL (60 tablets/30 days)
maraviroc tab 300 mg (Selzentry)	1	QL (120 tablets/30 days)
NEVIRAPINE - nevirapine susp 50 mg/5ml	2	QL (1200 mls/30 days)
nevirapine tab er 24hr 400 mg	1	QL (30 tablets/30 days)
nevirapine tab 200 mg	1	QL (60 tablets/30 days)
oseltamivir phosphate cap 30 mg (base equiv) (Tamiflu)	1	QL (40 capsules/120 days)
oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)	1	QL (20 capsules/120 days)
oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)	1	QL (300 mls/120 days)
PREZISTA - darunavir oral susp 100 mg/ml	2	QL (400 mls/30 days)
PREZISTA - darunavir tab 75 mg	2	QL (300 tablets/30 days)
PREZISTA - darunavir tab 150 mg	2	QL (180 tablets/30 days)
PREZISTA - darunavir tab 600 mg	2	QL (60 tablets/30 days)
PREZISTA - darunavir tab 800 mg	2	QL (30 tablets/30 days)
RELENZA DISKHALER - zanamivir aerosol powder breath activated 5 mg/act	2	QL (40 blisters/120 days)
RETROVIR IV INFUSION - zidovudine iv soln 10 mg/ml	2	
REYATAZ - atazanavir sulfate oral powder packet 50 mg (base equiv)	2	QL (240 packets/30 days)
ribavirin for inhal soln 6 gm	1	
RIMANTADINE HYDROCHLORIDE - rimantadine hydrochloride tab 100 mg	2	
ritonavir tab 100 mg (Norvir)	1	QL (360 tablets/30 days)
SELZENTRY - maraviroc oral soln 20 mg/ml	2	QL (1840 mls/30 days)
SELZENTRY - maraviroc tab 150 mg	2	QL (60 tablets/30 days)
SELZENTRY - maraviroc tab 300 mg	2	QL (120 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
STRIBILD - elvitegrav-cobic-emtricitab-tenofovdf tab 150-150-200-300 mg	2	QL (30 tablets/30 days)
tenofovir disoproxil fumarate tab 300 mg (Viread)	1	QL (30 tablets/30 days)
valacyclovir hcl tab 500 mg, 1 gm (Valtrex)	1	
valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)	1	
valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)	1	
VIRACEPT - nelfinavir mesylate tab 250 mg	2	QL (270 tablets/30 days)
VIRACEPT - nelfinavir mesylate tab 625 mg	2	QL (120 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	2	QL (30 tablets/30 days)
zidovudine cap 100 mg (Retrovir)	1	QL (180 capsules/30 days)
zidovudine syrup 10 mg/ml (Retrovir)	1	QL (1920 mls/30 days)
zidovudine tab 300 mg	1	QL (60 tablets/30 days)
ANTIMALARIALS		
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)	1	
CHLOROQUINE PHOSPHATE - chloroquine phosphate tab 250 mg	2	
chloroquine phosphate tab 500 mg	1	
COARTEM - artemether-lumefantrine tab 20-120 mg	2	
hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg	1	
hydroxychloroquine sulfate tab 200 mg (Plaquenil)	1	
mefloquine hcl tab 250 mg	1	
primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)	1	
pyrimethamine tab 25 mg (Daraprim)	1	
quinine sulfate cap 324 mg	1	
ANTHELMINTICS		
albendazole tab 200 mg	1	
IVERMECTIN - ivermectin tab 6 mg	2	
ivermectin tab 3 mg (Stromectol)	1	
praziquantel tab 600 mg (Biltricide)	1	
ANTI-INFECTIVE AGENTS - MISC.		
atovaquone susp 750 mg/5ml (Mepron)	1	
aztreonam for inj 1 gm, 2 gm (Azactam)	1	
CHLORAMPHENICOL SODIUM SU - chloramphenicol sodium succinate for iv inj 1 gm	2	
clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)	1	
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)	1	
clindamycin phosphate inj 300 mg/2ml, 600 mg/4ml, 900 mg/6ml (Cleocin phosphate)	1	
colistimethate sod for inj 150 mg (colistin base activity) (Colymycin m)	1	
dapsone tab 25 mg, 100 mg	1	
fosfomycin tromethamine powd pack 3 gm (base equivalent)	1	

Drug Name	Drug Tier	Requirements/Limits
imipenem-cilastatin intravenous for soln 500 mg (Primaxin iv)	1	
IMIPENEM/CILASTATIN - imipenem-cilastatin intravenous for soln 250 mg	2	
linezolid for susp 100 mg/5ml (Zyvox)	1	
linezolid tab 600 mg (Zyvox)	1	
meropenem iv for soln 500 mg, 1 gm	1	
methenamine hippurate tab 1 gm (Hiprex)	1	
METRONIDAZOLE - metronidazole iv soln 500 mg/100ml	2	
metronidazole cap 375 mg	1	
metronidazole iv soln 500 mg/100ml (Metronidazole)	1	
metronidazole tab 250 mg, 500 mg	1	
nitazoxanide tab 500 mg	1	QL (12 tablets/90 days)
nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrodantin)	1	
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	1	
nitrofurantoin susp 25 mg/5ml	1	
pentamidine isethionate for nebulization soln 300 mg (Nebupent)	1	
polymyxin b sulfate for inj 500000 unit	1	
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml	1	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)	1	
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)	1	
tinidazole tab 250 mg, 500 mg	1	
TRIMETHOPRIM - trimethoprim tab 100 mg	2	
trimethoprim tab 100 mg (Trimethoprim)	1	
vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent) (Vancocin)	1	
vancomycin hcl for iv soln 500 mg (base equivalent), 1 gm (base equivalent), 5 gm (base equivalent), 10 gm (base equivalent)	1	
vancomycin hcl for iv soln 750 mg (base equivalent) (Vancomycin hydrochlo)	1	
vancomycin hcl for oral soln 25 mg/ml (base equivalent), 50 mg/ml (base equivalent) (Firvanq)	1	
VANCOMYCIN HYDROCHLORIDE - vancomycin hcl for iv soln 500 mg (base equivalent), 750 mg (base equivalent), 1 gm (base equivalent), 5 gm (base equivalent), 10 gm (base equivalent)	2	
XIFAXAN - rifaximin tab 200 mg, 550 mg	2	
BIOLOGICALS		
VACCINES		
ABRYSVO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	2	
ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj	2	

Drug Name	Drug Tier	Requirements/Limits
AFLURIA 2025-2026 - influenza virus vaccine split im susp	2	
AFLURIA 2025-2026 - influenza virus vaccine split pf susp pref syringe 0.5 ml	2	
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	2	
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	2	
CAPVAXIVE - pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	2	
COMIRNATY 2025-26 - covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	2	
COMIRNATY/5-11Y/2025-26 - covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	2	
ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	2	
ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	2	
FLUAD 2025-2026 - influenza vac type a&b surface ant adj susp pref syr 0.5 ml	2	
FLUARIX 2025-2026 - influenza virus vaccine split pf susp pref syringe 0.5 ml	2	
FLUBLOK 2025-2026 - influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	2	
FLUCELVAX 2025-2026 - influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	2	
FLUCELVAX 2025-2026 - influenza virus vac tiss-cult subunit im susp	2	
FLULAVAL 2025-2026 - influenza virus vaccine split pf susp pref syringe 0.5 ml	2	
FLUMIST NASAL VACCINE 202 - influenza virus vaccine live intranasal liquid	2	
FLUZONE HIGH-DOSE 2025-20 - influenza virus vac split high-dose pf susp pref syr 0.5ml	2	
FLUZONE 2025-2026 - influenza virus vaccine split im susp	2	
FLUZONE 2025-2026 - influenza virus vaccine split pf susp pref syringe 0.5 ml	2	
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac susp pref syr	2	
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac im susp	2	
HAVRIX - hepatitis a vaccine susp prefilled syr 720 el unit/0.5ml, 1440 el unit/ml	2	
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	2	
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg	2	
IPOL INACTIVATED IPV - poliovirus vaccine, ipv inj susp	2	

Drug Name	Drug Tier	Requirements/Limits
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	2	
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	2	
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	2	
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln	2	
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj	2	
MNEXSPIKE COVID-19 VACCIN - covid-19 mrna vaccine-moderna im susp pref syr 10 mcg/0.2ml	2	
MRESVIA - rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	2	
NUVAXOVID COVID-19 VACCIN - covid-19 subunit vacc-novavax im susp pref syr 5 mcg/0.5ml	2	
PEDVAX HIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	2	
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	2	
PENMENVY - meningococcal acwy (oligo conj)-mening b (rcmb) vacc for inj	2	
PNEUMOVAX 23 - pneumococcal vaccine polyvalent soln pref syr 25 mcg/0.5ml	2	
PREVNAR 20 - pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	2	
PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp	2	
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	2	
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	2	
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	2	
ROTARIX - rotavirus vaccine, live oral susp	2	
ROTATEQ - rotavirus vaccine, live oral pentavalent soln	2	
SHINGRIX - zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	2	
SPIKEVAX COVID-19 VACCINE - covid-19 mrna vac 6mo-11yr-moderna im susp pfs 25 mcg/0.25ml	2	
SPIKEVAX COVID-19 VACCINE - covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	2	
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	2	
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	2	
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	2	
VAQTA - hepatitis a vaccine susp prefilled syr 25 unit/0.5ml, 50 unit/ml	2	
VARIVAX - varicella virus vac live for inj 1350 pfu/0.5ml	2	

Drug Name	Drug Tier	Requirements/Limits
VAXNEUVANCE - pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	2	
VIVOTIF - typhoid vaccine cap delayed release	2	
TOXOIDS		
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	2	
ADACEL - tet-diph-acell pertuss ad pref syr 5-2-15.5 lf-mcg/0.5ml	2	
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	2	
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	2	
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	2	
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	2	
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	2	
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	2	
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	2	
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	2	
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lf/0.5ml	2	
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	2	
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recmb susp	2	
PASSIVE IMMUNIZING AGENTS		
BEYFORTUS - nirsevimab-alip im soln prefilled syringe 50 mg/0.5ml, 100 mg/ml	2	SP
ANTINEOPLASTIC AGENTS		
ANTINEOPLASTICS		
abiraterone acetate tab 250 mg, 500 mg (Zytiga)	1	SP
AFINITOR - everolimus tab 10 mg	2	LA, SP
AFINITOR DISPERZ - everolimus tab for oral susp 2 mg, 3 mg, 5 mg	2	LA, SP
AKEEGA - niraparib tosylate-abiraterone acetate tab 50-500 mg, 100-500 mg	2	LA, SP
ALECENSA - alectinib hcl cap 150 mg (base equivalent)	2	LA, SP
ALUNBRIG - brigatinib tab initiation therapy pack 90 mg & 180 mg	2	LA, SP
ALUNBRIG - brigatinib tab 30 mg, 90 mg, 180 mg	2	LA, SP
anastrozole tab 1 mg (Arimidex)	1	
AYVAKIT - avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	2	LA, SP
azacitidine for inj 100 mg (Vidaza)	1	SP
BALVERSA - erdafitinib tab 3 mg, 4 mg, 5 mg	2	LA, SP
bexarotene cap 75 mg (Targretin)	1	SP
bicalutamide tab 50 mg (Casodex)	1	SP
bleomycin sulfate for inj 15 unit, 30 unit	1	

Drug Name	Drug Tier	Requirements/Limits
BOSULIF - bosutinib cap 50 mg, 100 mg	2	LA, SP
BOSULIF - bosutinib tab 100 mg, 400 mg, 500 mg	2	LA, SP
BRAFTOVI - encorafenib cap 75 mg	2	LA, SP
BRUKINSA - zanubrutinib cap 80 mg	2	LA, SP
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	2	LA, SP
CALQUENCE - acalabrutinib maleate tab 100 mg	2	LA, SP
capecitabine tab 150 mg, 500 mg (Xeloda)	1	SP
CAPRELSA - vandetanib tab 100 mg, 300 mg	2	LA, SP
carboplatin iv soln 50 mg/5ml, 150 mg/15ml, 450 mg/45ml, 600 mg/60ml	1	
CISPLATIN - cisplatin inj 200 mg/200ml (1 mg/ml)	2	
cisplatin inj 50 mg/50ml (1 mg/ml), 100 mg/100ml (1 mg/ml)	1	
cladribine iv soln 10 mg/10ml (1 mg/ml)	1	SP
COMETRIQ - cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	2	LA, SP
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	2	LA, SP
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	2	LA, SP
COPIKTRA - duvelisib cap 15 mg, 25 mg	2	LA, SP
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	2	LA, SP
CYCLOPHOSPHAMIDE - cyclophosphamide cap 25 mg, 50 mg	2	SP
cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)	1	SP
cyclophosphamide for inj 500 mg, 1 gm, 2 gm	1	
CYTARABINE - cytarabine inj 20 mg/ml	2	
cytarabine inj pf 20 mg/ml, 100 mg/ml	1	
DACARBAZINE - dacarbazine for inj 100 mg	2	
dacarbazine for inj 200 mg	1	
dactinomycin for inj 0.5 mg	1	SP
dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel)	1	SP
daunorubicin hcl iv soln 20 mg/4ml (base equiv), 50 mg/10ml (base equiv) (Daunorubicin hydroch)	1	SP
DAUNORUBICIN HYDROCHLORID - daunorubicin hcl iv soln 20 mg/4ml (base equiv), 50 mg/10ml (base equiv)	2	SP
DAURISMO - glasdegib maleate tab 25 mg (base equivalent), 100 mg (base equivalent)	2	LA, SP
dexrazoxane hcl for inj 250 mg (base equivalent), 500 mg (base equivalent)	1	
DOCETAXEL - docetaxel for inj conc 20 mg/ml, 80 mg/4ml (20 mg/ml), 160 mg/8ml (20 mg/ml)	2	SP
DOCETAXEL - docetaxel soln for iv infusion 20 mg/2ml, 80 mg/8ml, 160 mg/16ml	2	SP
docetaxel for inj conc 20 mg/ml, 80 mg/4ml (20 mg/ml), 160 mg/8ml (20 mg/ml) (Docetaxel)	1	SP

Drug Name	Drug Tier	Requirements/Limits
docetaxel soln for iv infusion 20 mg/2ml, 80 mg/8ml, 160 mg/16ml (Docetaxel)	1	SP
doxorubicin hcl for inj 50 mg	1	SP
doxorubicin hcl inj 2 mg/ml (Doxorubicin hydrochl)	1	SP
DOXORUBICIN HYDROCHLORIDE - doxorubicin hcl inj 2 mg/ml	2	SP
DOXORUBICIN HYDROCHLORIDE - doxorubicin hcl for inj 10 mg	2	SP
ERIVEDGE - vismodegib cap 150 mg	2	LA, SP
ERLEADA - apalutamide tab 60 mg, 240 mg	2	LA, SP
erlotinib hcl tab 25 mg (base equivalent), 150 mg (base equivalent)	1	SP
erlotinib hcl tab 100 mg (base equivalent) (Tarceva)	1	SP
ETOPOSIDE - etoposide cap 50 mg	2	SP
etoposide inj 100 mg/5ml (20 mg/ml), 500 mg/25ml (20 mg/ml), 1 gm/50ml (20 mg/ml)	1	
everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz)	1	SP
everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)	1	SP
exemestane tab 25 mg (Aromasin)	1	
FLOXURIDINE - floxuridine for inj 0.5 gm	2	
fludarabine phosphate inj 25 mg/ml	1	
fluorouracil iv soln 500 mg/10ml (50 mg/ml), 1 gm/20ml (50 mg/ml), 2.5 gm/50ml (50 mg/ml), 5 gm/100ml (50 mg/ml)	1	
FOTIVDA - tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	2	LA, SP
FULVESTRANT - fulvestrant inj soln pref syr 250 mg/5ml	2	SP
fulvestrant inj soln pref syr 250 mg/5ml (Faslodex)	1	SP
GAVRETO - pralsetinib cap 100 mg	2	LA, SP
gefitinib tab 250 mg (Iressa)	1	SP
gemcitabine hcl for inj 200 mg, 1 gm, 2 gm	1	
gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv), 1 gm/26.3ml (38 mg/ml) (base equiv), 2 gm/52.6ml (38 mg/ml) (base equiv) (Gemcitabine hydrochl)	1	
GEMCITABINE HYDROCHLORIDE - gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv), 1 gm/26.3ml (38 mg/ml) (base equiv), 2 gm/52.6ml (38 mg/ml) (base equiv)	2	
GILOTRIF - afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	2	LA, SP
GLEEVEC - imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent)	2	SP
GLEOSTINE - lomustine cap 10 mg, 40 mg, 100 mg	2	SP
HYCAMTIN - topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	2	SP
hydroxyurea cap 500 mg (Hydrea)	1	SP
IBRANCE - palbociclib cap 75 mg, 100 mg, 125 mg	2	LA, SP
IBRANCE - palbociclib tab 75 mg, 100 mg, 125 mg	2	LA, SP

Drug Name	Drug Tier	Requirements/Limits
ICLUSIG - ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	2	LA, SP
idarubicin hcl iv inj 5 mg/5ml (1 mg/ml), 10 mg/10ml (1 mg/ml), 20 mg/20ml (1 mg/ml) (Idamycin pfs)	1	
IDHIFA - enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	2	LA, SP
IFOSFAMIDE - ifosfamide iv inj 1 gm/20ml (50 mg/ml), 3 gm/60ml (50 mg/ml)	2	
IFOSFAMIDE - ifosfamide for inj 3 gm	2	
ifosfamide for inj 1 gm (Ifex)	1	
imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec)	1	SP
IMBRUVICA - ibrutinib cap 70 mg, 140 mg	2	LA, SP
IMBRUVICA - ibrutinib tab 140 mg, 280 mg, 420 mg	2	LA, SP
IMBRUVICA - ibrutinib oral susp 70 mg/ml	2	LA, SP
INLYTA - axitinib tab 1 mg, 5 mg	2	LA, SP
INQOVI - decitabine-cedazuridine tab 35-100 mg	2	LA, SP
INREBIC - fedratinib hcl cap 100 mg	2	LA, SP
IRESSA - gefitinib tab 250 mg	2	LA, SP
irinotecan hcl inj 40 mg/2ml (20 mg/ml), 100 mg/5ml (20 mg/ml) (Camptosar)	1	
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	2	LA, SP
JYLAMVO - methotrexate oral soln 2 mg/ml	2	
KISQALI - ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)	2	SP
KRAZATI - adagrasib tab 200 mg	2	LA, SP
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)	1	SP
LENVIMA 10 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg (10 mg daily dose)	2	LA, SP
LENVIMA 12MG DAILY DOSE - lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	2	LA, SP
LENVIMA 14 MG DAILY DOSE - lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	2	LA, SP
LENVIMA 18 MG DAILY DOSE - lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	2	LA, SP
LENVIMA 20 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	2	LA, SP
LENVIMA 24 MG DAILY DOSE - lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	2	LA, SP
LENVIMA 4 MG DAILY DOSE - lenvatinib cap therapy pack 4 mg (4 mg daily dose)	2	LA, SP
LENVIMA 8 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	2	LA, SP
letrozole tab 2.5 mg (Femara)	1	

Drug Name	Drug Tier	Requirements/Limits
leucovorin calcium for inj 50 mg, 100 mg, 200 mg, 350 mg, 500 mg	1	
leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg	1	
LEUKERAN - chlorambucil tab 2 mg	2	SP
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	1	SP
LONSURF - trifluridine-tipiracil tab 15-6.14 mg, 20-8.19 mg	2	LA, SP
LORBRENA - lorlatinib tab 25 mg, 100 mg	2	LA, SP
LUMAKRAS - sotorasib tab 120 mg, 240 mg, 320 mg	2	LA, SP
LYNPARZA - olaparib tab 100 mg, 150 mg	2	LA, SP
LYSODREN - mitotane tab 500 mg	2	LA, SP
MATULANE - procarbazine hcl cap 50 mg	2	LA, SP
megestrol acetate susp 40 mg/ml	1	
megestrol acetate tab 20 mg, 40 mg	1	
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent), 2 mg (base equivalent)	2	SP
MEKTOVI - binimetinib tab 15 mg	2	LA, SP
melphalan hcl for inj 50 mg (base equiv)	1	SP
mercaptopurine susp 2000 mg/100ml (20 mg/ml) (Purixan)	1	SP
mercaptopurine tab 50 mg	1	SP
mesna inj 100 mg/ml (Mesnex)	1	
mesna tab 400 mg (Mesnex)	1	
MESNEX - mesna tab 400 mg	2	
METHOTREXATE SODIUM - methotrexate sodium inj 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	2	
METHOTREXATE SODIUM - methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)	2	
methotrexate sodium for inj 1 gm	1	
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	1	
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml) (Methotrexate sodium)	1	
methotrexate sodium tab 2.5 mg (base equiv)	1	
mitomycin for iv soln 5 mg, 20 mg, 40 mg	1	SP
mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml), 25 mg/12.5ml (2 mg/ml), 30 mg/15ml (2 mg/ml)	1	
MYLERAN - busulfan tab 2 mg	2	SP
nelarabine iv soln 5 mg/ml (Arranon)	1	SP
NERLYNX - neratinib maleate tab 40 mg (base equivalent)	2	LA, SP
NEXAVAR - sorafenib tosylate tab 200 mg (base equivalent)	2	LA, SP
nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent) (Tasigna)	1	SP
nilutamide tab 150 mg (Nilandron)	1	SP
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	2	LA, SP

Drug Name	Drug Tier	Requirements/Limits
NUBEQA - darolutamide tab 300 mg	2	SP
ODOMZO - sonidegib phosphate cap 200 mg (base equivalent)	2	LA, SP
ORGOVYX - relugolix tab 120 mg	2	LA, SP
oxaliplatin for iv inj 50 mg, 100 mg	1	
oxaliplatin iv soln 50 mg/10ml, 100 mg/20ml	1	
PACLITAXEL - paclitaxel iv conc 150 mg/25ml (6 mg/ml)	2	
paclitaxel iv conc 30 mg/5ml (6 mg/ml), 100 mg/16.7ml (6 mg/ml), 300 mg/50ml (6 mg/ml)	1	
pazopanib hcl tab 200 mg (base equiv) (Votrient)	1	SP
PEMAZYRE - pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	2	LA, SP
PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	2	SP
PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	2	SP
PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	2	SP
POMALYST - pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	2	LA, SP
PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)	2	LA, SP
QINLOCK - ripretinib tab 50 mg	2	LA, SP
RETEVMO - selpercatinib tab 40 mg, 80 mg, 120 mg, 160 mg	2	LA, SP
REZLIDHIA - olutasidenib cap 150 mg	2	LA, SP
ROZLYTREK - entrectinib cap 100 mg, 200 mg	2	LA, SP
ROZLYTREK - entrectinib pellet pack 50 mg	2	LA, SP
RUBRACA - rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	2	LA, SP
RUXIENCE - rituximab-pvvr iv soln 100 mg/10ml (10 mg/ml), 500 mg/50ml (10 mg/ml)	2	SP
RYDAPT - midostaurin cap 25 mg	2	SP
SOLTAMOX - tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	2	
sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)	1	SP
SPRYCEL - dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg	2	SP
STIVARGA - regorafenib tab 40 mg	2	LA, SP
sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)	1	SP
SUTENT - sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent)	2	LA, SP
TABLOID - thioguanine tab 40 mg	2	SP
TABRECTA - capmatinib hcl tab 150 mg, 200 mg	2	SP
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	2	SP

Drug Name	Drug Tier	Requirements/Limits
TAGRISSO - osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	2	LA, SP
TALZENNA - talazoparib tosylate cap 0.1 mg (base equivalent), 0.25 mg (base equivalent), 0.35 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)	2	LA, SP
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	1	
TARCEVA - erlotinib hcl tab 100 mg (base equivalent)	2	LA, SP
TARGRETIN - bexarotene cap 75 mg	2	SP
TASIGNA - nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	2	SP
TAZVERIK - tazemetostat hbr tab 200 mg	2	LA, SP
temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg, 250 mg	1	SP
TEPMETKO - tepotinib hcl tab 225 mg	2	LA, SP
thiotepa for inj 15 mg (Tepadina)	1	
TIBSOVO - ivosidenib tab 250 mg	2	LA, SP
TOPOTECAN HCL - topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)	2	SP
topotecan hcl for inj 4 mg (base equiv) (Hycamtin)	1	SP
topotecan hcl inj 4 mg/4ml (base equiv) (for infusion) (Topotecan hcl)	1	SP
toremifene citrate tab 60 mg (base equivalent) (Fareston)	1	SP
tretinoin cap 10 mg	1	SP
TUKYSA - tucatinib tab 50 mg, 150 mg	2	LA, SP
TURALIO - pexidartinib hcl cap 125 mg (base equivalent)	2	LA, SP
TYKERB - lapatinib ditosylate tab 250 mg (base equiv)	2	SP
VENCLEXTA - venetoclax tab 10 mg, 50 mg, 100 mg	2	LA, SP
VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg	2	LA, SP
VERZENIO - abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	2	LA, SP
VINBLASTINE SULFATE - vinblastine sulfate inj 1 mg/ml	2	
VINCRISTINE SULFATE - vincristine sulfate iv soln 1 mg/ml	2	
vinorelbine tartrate inj 10 mg/ml (base equiv), 50 mg/5ml (10 mg/ml) (base equiv)	1	
VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent), 100 mg (base equivalent)	2	LA, SP
VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	2	LA, SP
VIZIMPRO - dacomitinib tab 15 mg, 30 mg, 45 mg	2	LA, SP
XALKORI - crizotinib cap 200 mg, 250 mg	2	LA, SP
XALKORI - crizotinib cap sprinkle 20 mg, 50 mg, 150 mg	2	LA, SP
XATMEP - methotrexate oral soln 2.5 mg/ml	2	
XOSPATA - gilteritinib fumarate tablet 40 mg (base equivalent)	2	LA, SP

Drug Name	Drug Tier	Requirements/Limits
XPOVIO - selinexor tab therapy pack 10 mg (40 mg once weekly), 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly), 60 mg (60 mg once weekly)	2	LA, SP
XPOVIO 60 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (60 mg twice weekly)	2	LA, SP
XPOVIO 80 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (80 mg twice weekly)	2	LA, SP
XTANDI - enzalutamide cap 40 mg	2	LA, SP
XTANDI - enzalutamide tab 40 mg, 80 mg	2	LA, SP
YONSA - abiraterone acetate micronized tab 125 mg	2	LA, SP
ZELBORAF - vemurafenib tab 240 mg	2	LA, SP
ZOLINZA - vorinostat cap 100 mg	2	LA, SP
ZYDELIG - idelalisib tab 100 mg, 150 mg	2	LA, SP
ZYKADIA - ceritinib tab 150 mg	2	LA, SP
ZYTIGA - abiraterone acetate tab 250 mg, 500 mg	2	SP
ENDOCRINE AND METABOLIC DRUGS		
CORTICOSTEROIDS		
betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml (Celestone soluspan)	1	
budesonide delayed release particles cap 3 mg	1	
budesonide tab er 24hr 9 mg (Uceris)	1	
CORTISONE ACETATE - cortisone acetate tab 25 mg	2	
deflazacort susp 22.75 mg/ml (Emflaza)	1	LA, SP
deflazacort tab 6 mg, 18 mg, 30 mg, 36 mg (Emflaza)	1	LA, SP
DEXAMETHASONE - dexamethasone soln 0.5 mg/5ml	2	
dexamethasone elixir 0.5 mg/5ml	1	
DEXAMETHASONE INTENSOL - dexamethasone conc 1 mg/ml	2	
dexamethasone sod phosphate preservative free inj 10 mg/ml	1	
DEXAMETHASONE SODIUM PHOS - dexamethasone sodium phosphate inj 10 mg/ml	1	
dexamethasone sodium phosphate inj 4 mg/ml, 20 mg/5ml, 120 mg/30ml, 100 mg/10ml	1	
dexamethasone tab therapy pack 1.5 mg (21)	1	
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	1	
DEXAMETHASONE 10-DAY DOSE - dexamethasone tab therapy pack 1.5 mg (35)	2	
DEXAMETHASONE 13-DAY DOSE - dexamethasone tab therapy pack 1.5 mg (51)	2	
fludrocortisone acetate tab 0.1 mg	1	
hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)	1	
methylprednisolone acetate inj susp 40 mg/ml, 80 mg/ml (Depo-medrol)	1	
methylprednisolone sod succ for inj 40 mg (base equiv), 125 mg (base equiv)	1	

Drug Name	Drug Tier	Requirements/Limits
methylprednisolone sod succ for inj 1000 mg (base equiv) (Solu-medrol)	1	
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)	1	
methylprednisolone tab 4 mg, 8 mg, 16 mg (Medrol)	1	
methylprednisolone tab 32 mg	1	
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv), 10 mg/5ml (base equiv), 20 mg/5ml (base equiv)	1	
prednisolone sod phosphate oral soln 5 mg/5ml (base equiv) (Pediapred)	1	
PREDNISOLONE SODIUM PHOSP - prednisolone sod phos orally disintegr tab 15 mg (base eq)	2	
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	1	
prednisolone soln 15 mg/5ml	1	
prednisolone tab 5 mg	1	
PREDNISONE - prednisone oral soln 5 mg/5ml	2	
PREDNISONE INTENSOL - prednisone conc 5 mg/ml	2	
prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)	1	
prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg	1	
ESTROGENS		
CLIMARA PRO - estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	2	QL (4 patches/28 days)
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day	2	QL (8 patches/28 days)
estradiol & norethindrone acetate tab 0.5-0.1 mg	1	
estradiol & norethindrone acetate tab 1-0.5 mg (Activella)	1	
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (Estrogel)	1	QL (1 pump/30 days)
estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace)	1	
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%) (Divigel)	1	QL (30 packets/30 days)
estradiol td gel 1.25 mg/1.25gm (0.1%) (Divigel)	1	QL (37.5 grams/30 days)
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot)	1	QL (8 patches/28 days)
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara)	1	QL (4 patches/28 days)
estradiol valerate im in oil 10 mg/ml, 20 mg/ml (Delestrogen)	1	
estradiol valerate im in oil 40 mg/ml	1	
estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg (Premarin)	1	
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg	1	

Drug Name	Drug Tier	Requirements/Limits
PREMARIN - estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	2	
PREMPHASE - conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)	2	
PREMPRO - conjugated estrogen-medroxyprogest acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg	2	
CONTRACEPTIVES		
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)	1	
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral)	1	
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	1	
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	1	
ELLA - ulipristal acetate tab 30 mg	2	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg	1	
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (Nuvaring)	1	
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	1	
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	1	
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	1	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	1	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	1	
levonorgestrel tab 1.5 mg	1	OTC
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	1	
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (Balcoltra)	1	
LO LOESTRIN FE - norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	2	
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)	1	
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)	1	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	1	
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg	1	
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg, 0.8 mg-25 mcg	1	
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	1	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg	1	

Drug Name	Drug Tier	Requirements/Limits
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg	1	
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	1	
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)	1	
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	1	
norethindrone tab 0.35 mg	1	
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg	1	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg	1	
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1	
NUVARING - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	2	
OPILL - norgestrel tab 0.075 mg	2	OTC
VELIVET - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	2	
PROGESTINS		
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)	1	
MEGESTROL ACETATE - megestrol acetate susp 625 mg/5ml	2	
norethindrone acetate tab 5 mg	1	
progesterone cap 100 mg, 200 mg (Prometrium)	1	
progesterone im in oil 50 mg/ml	1	
ANTIDIABETICS		
Antidiabetics		
acarbose tab 25 mg, 50 mg, 100 mg	1	
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose	2	
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose	2	
diazoxide susp 50 mg/ml (Proglycem)	1	
FARXIGA - dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	2	QL (30 tablets/30 days)
glimepiride tab 1 mg, 2 mg, 4 mg	1	
glipizide tab er 24hr 2.5 mg	1	
glipizide tab er 24hr 5 mg, 10 mg (Glucotrol xl)	1	
glipizide tab 5 mg, 10 mg	1	
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	1	
glucagon for inj 1 mg	1	
GLYBURIDE MICRONIZED - glyburide micronized tab 1.5 mg, 3 mg, 6 mg	2	
glyburide tab 1.25 mg, 2.5 mg, 5 mg	1	
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	1	
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	2	QL (30 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2	
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2	
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml	2	
INVOKAMET - canagliflozin-metformin hcl tab 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	2	QL (60 tablets/30 days)
INVOKAMET XR - canagliflozin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	2	QL (60 tablets/30 days)
INVOKANA - canagliflozin tab 100 mg, 300 mg	2	QL (30 tablets/30 days)
JANUMET - sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg	2	QL (60 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 100-1000 mg	2	QL (30 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg	2	QL (60 tablets/30 days)
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	2	QL (30 tablets/30 days)
JARDIANCE - empagliflozin tab 10 mg, 25 mg	2	QL (30 tablets/30 days)
liraglutide soln pen-injector 18 mg/3ml (6 mg/ml) (Victoza)	1	
metformin hcl oral soln 500 mg/5ml (Riomet)	1	
metformin hcl tab er 24hr 500 mg, 750 mg	1	
metformin hcl tab 500 mg, 850 mg, 1000 mg	1	
METFORMIN HYDROCHLORIDE - metformin hcl tab 750 mg	2	
MIGLITOL - miglitol tab 25 mg, 50 mg, 100 mg	2	
MOUNJARO - tirzepatide soln auto-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	2	
nateglinide tab 60 mg, 120 mg	1	
ONGLYZA - saxagliptin hcl tab 5 mg (base equiv)	2	QL (30 tablets/30 days)
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	2	
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)	1	
pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg (Duetact)	1	
pioglitazone hcl-metformin hcl tab 15-500 mg	1	
pioglitazone hcl-metformin hcl tab 15-850 mg (Actoplus met)	1	
repaglinide tab 0.5 mg, 1 mg, 2 mg	1	
RYBELSUS - semaglutide tab 3 mg, 7 mg, 14 mg	2	
saxagliptin hcl tab 2.5 mg (base equiv)	1	QL (30 tablets/30 days)
saxagliptin hcl tab 5 mg (base equiv) (Onglyza)	1	QL (30 tablets/30 days)
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg	1	QL (60 tablets/30 days)
saxagliptin-metformin hcl tab er 24hr 5-500 mg, 5-1000 mg	1	QL (30 tablets/30 days)
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	2	QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg	2	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg	2	QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg	2	QL (60 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg, 25-5-1000 mg	2	QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg	2	QL (60 tablets/30 days)
TRULICITY - dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	2	
VICTOZA - liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	2	
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 2.5-1000 mg, 5-1000 mg	2	QL (60 tablets/30 days)
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 5-500 mg, 10-500 mg, 10-1000 mg	2	QL (30 tablets/30 days)
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	2	QL (5 pens/30 days)
Rapid-Acting Insulins		
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	2	QL (100 mls/30 days)
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	2	QL (100 mls/30 days)
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	2	QL (100 mls/30 days)
FIASP PUMPCART - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	2	QL (100 mls/30 days)
NOVOLOG - insulin aspart inj soln 100 unit/ml	2	QL (100 mls/30 days)
NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml	2	QL (100 mls/30 days)
NOVOLOG FLEXPEN RELION - insulin aspart soln pen-injector 100 unit/ml	2	QL (100 mls/30 days)
NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml	2	QL (100 mls/30 days)
NOVOLOG RELION - insulin aspart inj soln 100 unit/ml	2	QL (100 mls/30 days)
Intermediate-Acting Insulins		
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2	QL (100 mls/30 days)
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	2	QL (100 mls/30 days)
NOVOLOG MIX 70/30 RELION - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2	QL (100 mls/30 days)
Basal Insulins		
LANTUS - insulin glargine inj 100 unit/ml	2	QL (100 mls/30 days)
LANTUS SOLOSTAR - insulin glargine soln pen-injector 100 unit/ml	2	QL (100 mls/30 days)
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	2	QL (100 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	2	QL (100 mls/30 days)
TRESIBA - insulin degludec inj 100 unit/ml	2	QL (100 mls/30 days)
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	2	QL (100 mls/30 days)
THYROID AGENTS		
ADTHYZA - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	2	
ARMOUR THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain), 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	2	
LEVOTHYROXINE SODIUM - levothyroxine sodium for iv inj 200 mcg, 500 mcg	2	
levothyroxine sodium for iv inj 200 mcg, 500 mcg (Levothyroxine sodium)	1	
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid)	1	
LIOTHYRONINE SODIUM - liothyronine sodium iv soln 10 mcg/ml	2	
liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel)	1	
methimazole tab 5 mg, 10 mg	1	
NIVA THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	2	
NP THYROID 120 - thyroid tab 120 mg (2 grain)	2	
NP THYROID 15 - thyroid tab 15 mg (1/4 grain)	2	
NP THYROID 30 - thyroid tab 30 mg (1/2 grain)	2	
NP THYROID 60 - thyroid tab 60 mg (1 grain)	2	
NP THYROID 90 - thyroid tab 90 mg (1 1/2 grain)	2	
propylthiouracil tab 50 mg	1	
SYNTHROID - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	2	
THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	2	
OXYTOCICS		
methylergonovine maleate inj 0.2 mg/ml	1	
methylergonovine maleate tab 0.2 mg	1	
oxytocin inj 10 unit/ml (Pitocin)	1	
ENDOCRINE and METABOLIC AGENTS - MISC.		
alendronate sodium oral soln 70 mg/75ml	1	
alendronate sodium tab 10 mg, 35 mg	1	
alendronate sodium tab 70 mg (Fosamax)	1	
betaine powder for oral solution (Cystadane)	1	SP
cabergoline tab 0.5 mg	1	
calcitonin (salmon) nasal soln 200 unit/act	1	

Drug Name	Drug Tier	Requirements/Limits
calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol)	1	
calcitriol oral soln 1 mcg/ml (Rocaltrol)	1	
carglumic acid soluble tab 200 mg (Carbaglu)	1	SP
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)	1	SP
DESMOPRESSIN ACETATE - desmopressin acetate nasal spray soln 0.01%	2	
desmopressin acetate inj 4 mcg/ml (Ddavp)	1	
desmopressin acetate nasal spray soln 0.01% (refrigerated)	1	
desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddavp)	1	
desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavp)	1	
DOXERCALCIFEROL - doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg	2	
doxercalciferol inj 4 mcg/2ml (2 mcg/ml)	1	
FORTEO - teriparatide soln pen-inj 560 mcg/2.24ml	2	SP
ibandronate sodium tab 150 mg (base equivalent)	1	
JYNARQUE - tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	2	LA, SP
JYNARQUE - tolvaptan tab 15 mg, 30 mg	2	LA, SP
levocarnitine inj 200 mg/ml (Carnitor)	1	
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	1	
levocarnitine tab 330 mg (Carnitor)	1	
mifepristone tab 200 mg (Mifeprex)	1	
nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)	1	LA, SP
NORDITROPIN FLEXPRO - somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml, 30 mg/3ml	2	SP
OCTREOTIDE ACETATE - octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	2	SP
octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)	1	SP
octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)	1	SP
ORILISSA - elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)	2	
PAMIDRONATE DISODIUM - pamidronate disodium iv soln 6 mg/ml	2	
pamidronate disodium iv soln 3 mg/ml, 9 mg/ml	1	
paricalcitol cap 1 mcg, 2 mcg (Zemplar)	1	
paricalcitol cap 4 mcg	1	
raloxifene hcl tab 60 mg (Evista)	1	
risedronate sodium tab delayed release 35 mg (Atelvia)	1	
risedronate sodium tab 5 mg, 30 mg	1	
risedronate sodium tab 35 mg, 150 mg (Actonel)	1	
sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)	1	LA, SP

Drug Name	Drug Tier	Requirements/Limits
sapropterin dihydrochloride tab 100 mg (Kuvan)	1	LA, SP
sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)	1	SP
STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	2	LA, SP
tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg (Jynarque)	1	SP
tolvaptan tab 15 mg (Samsca)	1	QL (30 tablets/365 days), SP
tolvaptan tab 30 mg (Samsca)	1	QL (60 tablets/365 days), SP
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	2	LA, SP
VASOPRESSIN - vasopressin iv soln 20 unit/ml (for iv infusion)	1	
vasopressin iv soln 20 unit/ml (for iv infusion) (Vasostrict)	1	
CARDIOVASCULAR AGENTS		
CARDIOTONICS		
DIGOXIN - digoxin oral soln 0.05 mg/ml	2	
digoxin inj 0.25 mg/ml (Lanoxin)	1	
digoxin oral soln 0.05 mg/ml (Digoxin)	1	
digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)	1	
dobutamine hcl inj 12.5 mg/ml	1	
DOBUTAMINE HCL/D5W - dobutamine in dextrose 5% inj 1 mg/ml	2	
DOBUTAMINE HYDROCHLORIDE/ - dobutamine in dextrose 5% inj 2 mg/ml, 4 mg/ml	2	
dopamine hcl inj 40 mg/ml (Dopamine hydrochlori)	1	
DOPAMINE HYDROCHLORIDE - dopamine hcl inj 40 mg/ml	2	
DOPAMINE HYDROCHLORIDE/DE - dopamine in dextrose 5% inj 0.8 mg/ml, 1.6 mg/ml	2	
DOPAMINE/D5W - dopamine in dextrose 5% inj 3.2 mg/ml	2	
LANOXIN - digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)	2	
milrinone lactate in dextrose 5% iv soln 20 mg/100ml, 40 mg/200ml	1	
milrinone lactate iv soln 10 mg/10ml (base equivalent), 20 mg/20ml (base equivalent), 50 mg/50ml (base equivalent)	1	
ANTIANGINAL AGENTS		
isosorbide dinitrate tab 5 mg, 40 mg (Isordil titradose)	1	
isosorbide dinitrate tab 10 mg, 20 mg, 30 mg	1	
ISOSORBIDE MONONITRATE - isosorbide mononitrate tab 10 mg, 20 mg	2	
isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg	1	
NITRO-BID - nitroglycerin oint 2%	2	
NITRO-TIME - nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	2	
NITROGLYCERIN - nitroglycerin iv soln 5 mg/ml	2	

Drug Name	Drug Tier	Requirements/Limits
NITROGLYCERIN IN DEXTROSE - nitroglycerin iv soln 200 mcg/ml in d5w	2	
NITROGLYCERIN IN DEXTROSE - nitroglycerin iv soln 400 mcg/ml in d5w	2	
nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)	1	
nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)	1	
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual)	1	
ranolazine tab er 12hr 500 mg, 1000 mg	1	
BETA BLOCKERS		
acebutolol hcl cap 200 mg, 400 mg	1	
atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)	1	
betaxolol hcl tab 10 mg, 20 mg	1	
bisoprolol fumarate tab 5 mg, 10 mg	1	
BYSTOLIC - nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent)	2	
carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg (Coreg cr)	1	
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)	1	
labetalol hcl iv soln 5 mg/ml	1	
labetalol hcl tab 100 mg, 200 mg, 300 mg	1	
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl)	1	
metoprolol tartrate iv soln 5 mg/5ml	1	
metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg	1	
metoprolol tartrate tab 50 mg, 100 mg (Lopressor)	1	
nadolol tab 20 mg, 40 mg, 80 mg	1	
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)	1	
pindolol tab 5 mg, 10 mg	1	
PROPRANOLOL HCL - propranolol hcl oral soln 40 mg/5ml	2	
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)	1	
propranolol hcl inj 1 mg/ml	1	
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	1	
PROPRANOLOL HYDROCHLORIDE - propranolol hcl oral soln 20 mg/5ml	2	
sotalol hcl (afib/afl) tab 80 mg, 120 mg, 160 mg (Betapace af)	1	
sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace)	1	
sotalol hcl tab 240 mg	1	
timolol maleate tab 5 mg, 10 mg, 20 mg	1	
CALCIUM CHANNEL BLOCKERS		

Drug Name	Drug Tier	Requirements/Limits
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	1	
DILTIAZEM HCL - diltiazem hcl iv for soln 100 mg	2	
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg	1	
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	1	
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg (Cardizem cd)	1	
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)	1	
diltiazem hcl iv soln 25 mg/5ml (5 mg/ml), 50 mg/10ml (5 mg/ml), 125 mg/25ml (5 mg/ml)	1	
diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Cardizem la)	1	
diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)	1	
diltiazem hcl tab 90 mg	1	
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	1	
isradipine cap 2.5 mg, 5 mg	1	
nicardipine hcl cap 20 mg, 30 mg	1	
nicardipine hcl iv soln 2.5 mg/ml (Nicardipine hydrochl)	1	
NICARDIPINE HYDROCHLORIDE - nicardipine hcl iv soln 2.5 mg/ml	2	
nifedipine cap 10 mg, 20 mg	1	
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg	1	
nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)	1	
NIMODIPINE - nimodipine oral soln 60 mg/20ml (3 mg/ml)	2	
nimodipine cap 30 mg	1	
NISOLDIPINE ER - nisoldipine tab er 24hr 20 mg, 25.5 mg, 30 mg, 40 mg	2	
nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg (Sular)	1	
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)	1	
verapamil hcl iv soln 2.5 mg/ml	1	
verapamil hcl tab er 120 mg, 180 mg, 240 mg	1	
verapamil hcl tab 40 mg, 80 mg, 120 mg	1	
VERAPAMIL HYDROCHLORIDE E - verapamil hcl cap er 24hr 100 mg, 200 mg, 300 mg	2	
VERAPAMIL HYDROCHLORIDE S - verapamil hcl cap er 24hr 360 mg	2	
ANTIARRHYTHMICS		
adenosine iv soln 6 mg/2ml, 12 mg/4ml	1	
amiodarone hcl inj 150 mg/3ml (50 mg/ml), 450 mg/9ml (50 mg/ml), 900 mg/18ml (50 mg/ml)	1	
amiodarone hcl tab 100 mg, 200 mg, 400 mg	1	
disopyramide phosphate cap 100 mg, 150 mg (Norpace)	1	

Drug Name	Drug Tier	Requirements/Limits
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)	1	
flecainide acetate tab 50 mg, 100 mg, 150 mg	1	
ibutilide fumarate inj 1 mg/10ml (Corvert)	1	
LIDOCAINE HCL - lidocaine hcl (cardiac) iv pf soln 100 mg/5ml (2%)	2	
LIDOCAINE HCL - lidocaine hcl (cardiac) iv pf soln pref syr 50 mg/5ml(1%)	2	
LIDOCAINE HCL - lidocaine hcl(cardiac) iv pf soln pref syr 100 mg/5ml (2%)	2	
lidocaine iv infusion in d5w inj 4 mg/ml, 8 mg/ml	1	
mexiletine hcl cap 150 mg, 200 mg, 250 mg	1	
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)	2	
NORPACE CR - disopyramide phosphate cap er 12hr 100 mg, 150 mg	2	
procainamide hcl inj 100 mg/ml, 500 mg/ml	1	
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg	1	
propafenone hcl tab 150 mg, 225 mg, 300 mg	1	
quinidine gluconate tab er 324 mg	1	
QUINIDINE SULFATE - quinidine sulfate tab 200 mg, 300 mg	2	
ANTIHYPERTENSIVES		
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna)	1	
amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	1	
amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)	1	
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)	1	
amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)	1	
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct)	1	
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	1	
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	1	
benazepril & hydrochlorothiazide tab 5-6.25 mg	1	
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)	1	
benazepril hcl tab 5 mg	1	
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)	1	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg	1	
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand)	1	
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)	1	

Drug Name	Drug Tier	Requirements/Limits
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	1	
CAPTOPRIL/HYDROCHLOROTHIA - captopril & hydrochlorothiazide tab 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	2	
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg	1	
clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)	1	
clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)	1	
clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)	1	
doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)	1	
EDARBI - azilsartan medoxomil tab 40 mg, 80 mg	2	
EDARBYCLOR - azilsartan medoxomil-chlorthalidone tab 40-12.5 mg, 40-25 mg	2	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	1	
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)	1	
enalapril maleate oral soln 1 mg/ml (Epaned)	1	
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)	1	
enalaprilat iv soln 1.25 mg/ml	1	
eplerenone tab 25 mg, 50 mg (Inspra)	1	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	1	
fosinopril sodium tab 10 mg, 20 mg, 40 mg	1	
guanfacine hcl tab 1 mg, 2 mg	1	
hydralazine hcl inj 20 mg/ml	1	
hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	1	
irbesartan tab 75 mg	1	
irbesartan tab 150 mg, 300 mg (Avapro)	1	
irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)	1	
lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)	1	
lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril)	1	
losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)	1	
losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar)	1	
METHYLDOPA - methyldopa tab 500 mg	2	
methyldopa tab 250 mg	1	
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg	1	
metyrosine cap 250 mg (Demser)	1	
minoxidil tab 2.5 mg, 10 mg	1	
moexipril hcl tab 7.5 mg, 15 mg	1	
olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar)	1	
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)	1	

Drug Name	Drug Tier	Requirements/Limits
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)	1	
PERINDOPRIL ERBUMINE - perindopril erbumine tab 2 mg, 8 mg	2	
perindopril erbumine tab 4 mg	1	
phenoxybenzamine hcl cap 10 mg (Dibenzyline)	1	
prazosin hcl cap 1 mg, 2 mg, 5 mg	1	
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)	1	
quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg (Accuretic)	1	
QUINAPRIL/HYDROCHLOROTHIA - quinapril-hydrochlorothiazide tab 20-25 mg	2	
ramipril cap 1.25 mg, 5 mg, 10 mg	1	
ramipril cap 2.5 mg (Altace)	1	
telmisartan tab 20 mg	1	
telmisartan tab 40 mg, 80 mg (Micardis)	1	
telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct)	1	
TELMISARTAN/AMLODIPINE - telmisartan-amlodipine tab 40-5 mg, 40-10 mg, 80-5 mg, 80-10 mg	2	
terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1	
trandolapril tab 1 mg, 2 mg, 4 mg	1	
TRANDOLAPRIL/VERAPAMIL HC - trandolapril-verapamil hcl tab er 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	2	
valsartan oral soln 4 mg/ml	1	
valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan)	1	
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)	1	
DIURETICS		
acetazolamide cap er 12hr 500 mg	1	
acetazolamide sodium for inj 500 mg	1	
acetazolamide tab 125 mg, 250 mg	1	
amiloride hcl tab 5 mg	1	
AMILORIDE/HYDROCHLOROTHIA - amiloride & hydrochlorothiazide tab 5-50 mg	2	
bumetanide inj 0.25 mg/ml	1	
bumetanide tab 0.5 mg (Bumex)	1	
bumetanide tab 1 mg, 2 mg	1	
chlorothiazide sodium for inj 500 mg	1	
chlorthalidone tab 25 mg, 50 mg	1	
ethacrynic acid tab 25 mg (Edecrin)	1	
FUROSEMIDE - furosemide oral soln 8 mg/ml	2	
furosemide inj 10 mg/ml	1	

Drug Name	Drug Tier	Requirements/Limits
furosemide oral soln 10 mg/ml	1	
furosemide tab 20 mg, 40 mg, 80 mg (Lasix)	1	
hydrochlorothiazide cap 12.5 mg	1	
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	1	
indapamide tab 1.25 mg, 2.5 mg	1	
mannitol iv soln 20%, 25%	1	
methazolamide tab 25 mg, 50 mg	1	
metolazone tab 2.5 mg, 5 mg, 10 mg	1	
spironolactone & hydrochlorothiazide tab 25-25 mg	1	
spironolactone susp 25 mg/5ml (Carospir)	1	
spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)	1	
torsemide tab 5 mg, 10 mg, 20 mg, 100 mg	1	
triamterene & hydrochlorothiazide cap 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 37.5-25 mg, 75-50 mg	1	
triamterene cap 50 mg, 100 mg (Dyrenium)	1	
VASOPRESSORS		
AUVI-Q - epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	2	
droxidopa cap 100 mg, 200 mg, 300 mg (Northera)	1	SP
EPINEPHRINE - epinephrine iv soln prefilled syringe 1 mg/10ml (0.1 mg/ml)	2	
EPINEPHRINE - epinephrine inj 1 mg/ml	2	
epinephrine inj 1 mg/ml (Epinephrine)	1	
epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000) (Adrenalin)	1	
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)	1	
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)	1	
midodrine hcl tab 2.5 mg, 5 mg, 10 mg	1	
norepinephrine bitartrate iv soln 1 mg/ml (base equivalent) (Levophed)	1	
phenylephrine hcl iv soln 10 mg/ml (Phenylephrine hydroc)	1	
PHENYLEPHRINE HYDROCHLORI - phenylephrine hcl iv soln 10 mg/ml	2	
ANTIHYPERLIPIDEMICS		
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)	1	
cholestyramine light powder packets 4 gm	1	
cholestyramine light powder 4 gm/dose (Questran light)	1	
cholestyramine powder packets 4 gm (Questran)	1	
cholestyramine powder 4 gm/dose (Questran)	1	
choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv)	1	

Drug Name	Drug Tier	Requirements/Limits
colesevelam hcl packet for susp 3.75 gm (Welchol)	1	
colesevelam hcl tab 625 mg (Welchol)	1	
colestipol hcl granule packets 5 gm	1	
colestipol hcl granules 5 gm (Colestid)	1	
colestipol hcl tab 1 gm (Colestid)	1	
ezetimibe tab 10 mg (Zetia)	1	
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)	1	
fenofibrate micronized cap 43 mg, 67 mg, 130 mg, 134 mg, 200 mg	1	
fenofibrate tab 40 mg, 54 mg, 120 mg, 160 mg	1	
fenofibrate tab 48 mg, 145 mg (Tricor)	1	
FENOFIBRIC ACID - fenofibric acid tab 35 mg, 105 mg	2	
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	1	
fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)	1	
gemfibrozil tab 600 mg (Lopid)	1	
icosapent ethyl cap 0.5 gm, 1 gm (Vascepa)	1	
lovastatin tab 10 mg, 20 mg, 40 mg	1	
niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic)	1	
omega-3-acid ethyl esters cap 1 gm (Lovaza)	1	
pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo)	1	
PRALUENT - alirocumab subcutaneous solution auto-injector 75 mg/ml, 150 mg/ml	2	
pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg	1	
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml	2	
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml	2	
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor)	1	
simvastatin tab 10 mg, 20 mg, 40 mg (Zocor)	1	
simvastatin tab 5 mg, 80 mg	1	
CARDIOVASCULAR AGENTS - MISC.		
alprostadil inj 500 mcg/ml (Prostin vr pediatric)	1	
ambrisentan tab 5 mg, 10 mg (Letairis)	1	LA, SP
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg	1	
amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Caduet)	1	
bosentan tab 62.5 mg, 125 mg (Tracleer)	1	SP
CORLANOR - ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)	2	LA

Drug Name	Drug Tier	Requirements/Limits
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)	2	LA
ENTRESTO - sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg	2	
ENTRESTO - sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	2	
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)	1	
ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) (Corlanor)	1	
sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg (Entresto)	1	
sildenafil citrate for suspension 10 mg/ml	1	SP
sildenafil citrate tab 20 mg (Revatio)	1	SP
tadalafil tab 20 mg (pah) (Adcirca)	1	SP
VELETRI - epoprostenol sodium for inj 0.5 mg, 1.5 mg	2	LA, SP
ERECTILE DYSFUNCTION		
tadalafil tab 2.5 mg	1	QL (30 tablets/30 days)
tadalafil tab 5 mg (Cialis)	1	QL (30 tablets/30 days)
RESPIRATORY AGENTS		
ANTIHISTAMINES		
CARBINOXAMINE MALEATE - carbinoxamine maleate soln 4 mg/5ml	2	
carbinoxamine maleate tab 4 mg, 6 mg	1	
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	1	OTC
CLEMASTINE FUMARATE - clemastine fumarate tab 2.68 mg	2	
CLEMASTINE FUMARATE - clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)	2	
cyproheptadine hcl syrup 2 mg/5ml	1	
cyproheptadine hcl tab 4 mg	1	
DESLORATADINE ODT - desloratadine tab orally disintegrating 2.5 mg, 5 mg	2	
desloratadine tab 5 mg (Clarinex)	1	
DIPHENHYDRAMINE HCL - diphenhydramine hcl elixir 12.5 mg/5ml	2	
diphenhydramine hcl inj 50 mg/ml	1	
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	1	
levocetirizine dihydrochloride tab 5 mg	1	OTC
promethazine hcl inj 25 mg/ml, 50 mg/ml (Phenergan)	1	
promethazine hcl oral soln 6.25 mg/5ml	1	
promethazine hcl oral soln 6.25 mg/5ml	2	
promethazine hcl suppos 12.5 mg, 25 mg	1	
promethazine hcl tab 12.5 mg, 25 mg, 50 mg	1	
PROMETHEGAN - promethazine hcl suppos 50 mg	2	
NASAL AGENTS - SYSTEMIC and TOPICAL		
azelastine hcl nasal spray 0.1% (137 mcg/spray)	1	

Drug Name	Drug Tier	Requirements/Limits
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (Dymista)	1	
flunisolide nasal soln 25 mcg/act (0.025%)	1	
fluticasone propionate nasal susp 50 mcg/act	1	OTC
ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray)	1	
olopatadine hcl nasal soln 0.6%	1	
COUGH/COLD/ALLERGY		
acetylcysteine inhal soln 10%, 20%	1	
benzonatate cap 100 mg, 200 mg	1	
hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan)	1	
hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg (Hycodan)	1	
HYDROCODONE POLISTIREX/CH - hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	2	
PROMETHAZINE HYDROCHLORID - promethazine & phenylephrine syrup 6.25-5 mg/5ml	2	
promethazine w/ codeine syrup 6.25-10 mg/5ml	1	
promethazine-dm syrup 6.25-15 mg/5ml	1	
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	1	
sodium chloride soln nebu 3%, 10%	1	
sodium chloride soln nebu 7% (Hypersal)	1	
ANTIASTHMATIC and BRONCHODILATOR AGENTS		
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	2	QL (1 inhaler/30 days)
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	1	QL (2 inhalers/30 days)
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	1	
albuterol sulfate syrup 2 mg/5ml	1	
albuterol sulfate tab 2 mg, 4 mg	1	
AMINOPHYLLINE - aminophylline inj 25 mg/ml	2	
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	2	QL (60 blisters/30 days)
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	2	QL (30 blisters/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act	2	QL (1 canister/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 100 mcg/act, 200 mcg/act	2	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/act (breath activated)	2	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	2	QL (1 inhaler/30 days)

Drug Name	Drug Tier	Requirements/Limits
ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/act (breath activated)	2	QL (1 inhaler/30 days)
ATROVENT HFA - ipratropium bromide hfa inhal aerosol 17 mcg/act	2	QL (2 inhalers/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act	2	QL (1 inhaler/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act, 200-25 mcg/act	2	QL (60 blisters/30 days)
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)	1	
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort)	1	QL (3 inhalers/30 days)
COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	2	QL (2 inhalers/30 days)
cromolyn sodium soln nebu 20 mg/2ml	1	
DALIRESP - roflumilast tab 250 mcg, 500 mcg	2	
DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	2	QL (3 inhalers/30 days)
FLUTICASONE PROPIONATE DI - fluticasone propionate aer pow ba 50 mcg/act, 100 mcg/act	2	QL (60 blisters/30 days)
FLUTICASONE PROPIONATE DI - fluticasone propionate aer pow ba 250 mcg/act	2	QL (240 blisters/30 days)
fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)	1	QL (60 blisters/30 days)
formoterol fumarate soln nebu 20 mcg/2ml (Perforomist)	1	
INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	2	QL (30 blisters/30 days)
ipratropium bromide inhal soln 0.02%	1	
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	1	
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)	1	
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	1	
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)	1	
montelukast sodium oral granules packet 4 mg (base equiv) (Singulair)	1	
montelukast sodium tab 10 mg (base equiv) (Singulair)	1	
PERFOROMIST - formoterol fumarate soln nebu 20 mcg/2ml	2	
PULMICORT FLEXHALER - budesonide inhal aero powd 90 mcg/act (breath activated)	2	QL (1 inhaler/30 days)
PULMICORT FLEXHALER - budesonide inhal aero powd 180 mcg/act (breath activated)	2	QL (2 inhalers/30 days)
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act	2	QL (1 inhaler/30 days)
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act	2	QL (2 inhalers/30 days)
roflumilast tab 250 mcg, 500 mcg (Daliresp)	1	

Drug Name	Drug Tier	Requirements/Limits
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	2	QL (60 blisters/30 days)
SPIRIVA HANDIHALER - tiotropium bromide inhal cap 18 mcg (base equiv)	2	QL (30 capsules/30 days)
SPIRIVA RESPIMAT - tiotropium bromide inhal aerosol 1.25 mcg/act, 2.5 mcg/act	2	QL (1 inhaler/30 days)
STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act	2	QL (1 inhaler/30 days)
terbutaline sulfate inj 1 mg/ml	1	
terbutaline sulfate tab 2.5 mg, 5 mg	1	
TEZSPIRE - tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	2	LA, SP
theophylline elixir 80 mg/15ml	1	
theophylline soln 80 mg/15ml	1	
theophylline tab er 12hr 300 mg, 450 mg	1	
theophylline tab er 24hr 400 mg, 600 mg	1	
tiotropium bromide inhal cap 18 mcg (base equiv) (Spiriva handihaler)	1	QL (30 capsules/30 days)
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act	2	QL (60 blisters/30 days)
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 200-62.5-25 mcg/act	2	QL (1 inhaler/30 days)
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	2	QL (2 inhalers/30 days)
XOLAIR - omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	2	LA, SP
XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	2	LA, SP
XOLAIR - omalizumab for inj 150 mg	2	LA, SP
YUPELRI - revefenacin inhalation solution 175 mcg/3ml	2	
zafirlukast tab 10 mg, 20 mg (Accolate)	1	
zileuton tab er 12hr 600 mg	1	
RESPIRATORY AGENTS - MISC.		
OFEV - nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)	2	LA, SP
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	2	SP
GASTROINTESTINAL AGENTS		
LAXATIVES		
bisacodyl tab delayed release 5 mg	1	OTC
GAVILYTE-C - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	2	
lactulose oral crystal packet 10 gm, 20 gm	1	
lactulose solution 10 gm/15ml	1	
magnesium citrate soln	1	OTC
magnesium hydroxide susp 400 mg/5ml	1	OTC

Drug Name	Drug Tier	Requirements/Limits
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)	1	
peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm (Moviprep)	1	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	
PEG-PREP - bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	2	
polyethylene glycol 3350 oral powder 17 gm/scoop	1	OTC
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)	1	
SUPREP BOWEL PREP KIT - sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	2	
ANTIDIARRHEALS		
diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)	1	
DIPHENOXYLATE/ATROPINE - diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	2	
loperamide hcl cap 2 mg	1	OTC
ULCER DRUGS		
ATROPINE SULFATE - atropine sulfate inj 8 mg/20ml (0.4 mg/ml)	2	
ATROPINE SULFATE - atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml), 1 mg/10ml (0.1 mg/ml)	2	
ATROPINE SULFATE - atropine sulfate soln prefill syr 0.5 mg/5ml (0.1 mg/ml)	1	
atropine sulfate inj 8 mg/20ml (0.4 mg/ml) (Atropine sulfate)	1	
atropine sulfate iv soln 0.4 mg/ml, 1 mg/ml (Atropine sulfate)	1	
atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml) (Atropine sulfate)	1	
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (Pylera)	1	
chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg (Librax)	1	
cimetidine hcl soln 300 mg/5ml	1	
cimetidine tab 200 mg	1	OTC
cimetidine tab 300 mg, 400 mg, 800 mg	1	
dexlansoprazole cap delayed release 30 mg (Dexilant)	1	QL (60 capsules/30 days)
dexlansoprazole cap delayed release 60 mg (Dexilant)	1	QL (30 capsules/30 days)
dicyclomine hcl cap 10 mg	1	
dicyclomine hcl oral soln 10 mg/5ml	1	
dicyclomine hcl tab 20 mg	1	
esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq) (Nexium)	1	QL (60 capsules/30 days)
esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg (Nexium)	1	QL (60 packets/30 days)
esomeprazole magnesium for delayed release susp pack 2.5 mg (Nexium)	1	QL (60 packets/30 days)
esomeprazole sodium for intravenous soln 40 mg (base equiv)	1	

Drug Name	Drug Tier	Requirements/Limits
famotidine for susp 40 mg/5ml	1	
famotidine inj 40 mg/4ml, 200 mg/20ml	1	
FAMOTIDINE PREMIXED - famotidine in nacl 0.9% iv soln 20 mg/50ml	2	
famotidine preservative free inj 20 mg/2ml	1	
famotidine tab 20 mg (Pepcid)	1	OTC
famotidine tab 40 mg (Pepcid)	1	
GLYCOPYRROLATE - glycopyrrolate tab 1.5 mg	2	
glycopyrrolate inj 0.2 mg/ml, 0.4 mg/2ml (0.2 mg/ml), 1 mg/5ml (0.2 mg/ml), 4 mg/20ml (0.2 mg/ml)	1	
glycopyrrolate oral soln 1 mg/5ml (Cuvposa)	1	
glycopyrrolate tab 1 mg, 2 mg	1	
lansoprazole cap delayed release 15 mg	1	OTC, QL (60 capsules/30 days)
lansoprazole cap delayed release 30 mg (Prevacid)	1	QL (60 capsules/30 days)
lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg (Prevacid solutab)	1	OTC, QL (60 tablets/30 days)
LANSOPRAZOLE/AMOXICILLIN/ - amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg	2	
methscopolamine bromide tab 2.5 mg, 5 mg	1	
misoprostol tab 100 mcg, 200 mcg (Cytotec)	1	
NIZATIDINE - nizatidine cap 300 mg	2	
nizatidine cap 150 mg	1	
omeprazole cap delayed release 10 mg, 20 mg, 40 mg	1	QL (60 capsules/30 days)
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)	1	QL (60 tablets/30 days)
pantoprazole sodium for delayed release susp packet 40 mg (Protonix)	1	QL (60 packets/30 days)
rabeprazole sodium ec tab 20 mg (Aciphex)	1	QL (60 tablets/30 days)
sucralfate susp 1 gm/10ml (Carafate)	1	
sucralfate tab 1 gm (Carafate)	1	
ANTIEMETICS		
aprepitant capsule therapy pack 80 & 125 mg (Emend tripack)	1	
aprepitant capsule 40 mg, 125 mg	1	
aprepitant capsule 80 mg (Emend bipack)	1	
DIMENHYDRINATE - dimenhydrinate inj 50 mg/ml	2	
doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis)	1	
dronabinol cap 2.5 mg (Marinol)	1	
dronabinol cap 5 mg, 10 mg	1	
granisetron hcl inj 1 mg/ml, 4 mg/4ml (1 mg/ml)	1	
granisetron hcl tab 1 mg	1	
meclizine hcl tab 12.5 mg, 25 mg	1	OTC
meclizine hcl tab 50 mg	1	
ondansetron hcl inj 4 mg/2ml (2 mg/ml), 40 mg/20ml (2 mg/ml)	1	
ondansetron hcl oral soln 4 mg/5ml	1	

Drug Name	Drug Tier	Requirements/Limits
ondansetron hcl tab 4 mg, 8 mg	1	
ONDANSETRON HYDROCHLORIDE - ondansetron hcl inj soln pref syr 4 mg/2ml	2	
ondansetron orally disintegrating tab 4 mg, 8 mg	1	
scopolamine td patch 72hr 1 mg/3days	1	
trimethobenzamide hcl cap 300 mg	1	
DIGESTIVE AIDS		
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	2	
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	2	
GASTROINTESTINAL AGENTS- MISC.		
alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex)	1	
balsalazide disodium cap 750 mg (Colazal)	1	
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	1	
calcium acetate (phosphate binder) tab 667 mg	1	OTC
cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)	1	
ENTYVIO - vedolizumab for iv solution 300 mg	2	LA, SP
INFLECTRA - infliximab-dyyb for iv inj 100 mg	2	SP
lactulose (encephalopathy) solution 10 gm/15ml	1	
lanthanum carbonate chew tab 500 mg (elemental) (Fosrenol)	1	QL (270 tablets/30 days)
lanthanum carbonate chew tab 750 mg (elemental) (Fosrenol)	1	QL (180 tablets/30 days)
lanthanum carbonate chew tab 1000 mg (elemental) (Fosrenol)	1	QL (120 tablets/30 days)
LINZESS - linaclotide cap 72 mcg, 145 mcg, 290 mcg	2	
lubiprostone cap 8 mcg, 24 mcg (Amitiza)	1	
mesalamine cap dr 400 mg	1	
mesalamine cap er 24hr 0.375 gm (Apriso)	1	
mesalamine cap er 500 mg	1	
mesalamine enema 4 gm	1	
mesalamine suppos 1000 mg (Canasa)	1	
mesalamine tab delayed release 800 mg	1	
mesalamine tab delayed release 1.2 gm (Lialda)	1	
metoclopramide hcl inj 5 mg/ml (base equivalent)	1	
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	1	
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)	1	
METOCLOPRAMIDE ODT - metoclopramide hcl orally disintegrating tab 5 mg (base eq)	2	

Drug Name	Drug Tier	Requirements/Limits
MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	2	
OMVOH - mirikizumab-mrkz iv soln 300 mg/15ml (20 mg/ml)	2	LA, SP
OMVOH - mirikizumab-mrkz subcutaneous soln auto-injector 100 mg/ml	2	LA, SP
OMVOH - mirikizumab-mrkz subcutaneous auto-inj 100 mg/ml & 200mg/2ml	2	LA, SP
OMVOH - mirikizumab-mrkz subcutaneous sol prefill syringe 100 mg/ml	2	LA, SP
OMVOH - mirikizumab-mrkz subcutaneous pref syr 100 mg/ml & 200mg/2ml	2	LA, SP
prucalopride succinate tab 1 mg (base equivalent), 2 mg (base equivalent) (Motegrity)	1	
SELARSDI - ustekinumab-aekn iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	2	
sevelamer carbonate packet 0.8 gm (Renvela)	1	QL (510 packets/30 days)
sevelamer carbonate packet 2.4 gm (Renvela)	1	QL (150 packets/30 days)
sevelamer carbonate tab 800 mg (Renvela)	1	QL (510 tablets/30 days)
sevelamer hcl tab 400 mg	1	QL (960 tablets/30 days)
sevelamer hcl tab 800 mg	1	QL (480 tablets/30 days)
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	2	SP
SKYRIZI - risankizumab-rzaa iv soln 600 mg/10ml (60 mg/ml)	2	SP
STELARA - ustekinumab iv soln 130 mg/26ml (5 mg/ml) (for iv infusion)	2	SP
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	1	
sulfasalazine tab 500 mg (Azulfidine)	1	
TREMFYA - guselkumab soln prefilled syringe 200 mg/2ml	2	SP
TREMFYA - guselkumab iv soln 200 mg/20ml (10 mg/ml)	2	SP
TREMFYA - guselkumab soln auto-injector 200 mg/2ml	2	SP
TREMFYA INDUCTION PACK FO - guselkumab soln auto-injector 200 mg/2ml	2	SP
TRULANCE - plecanatide tab 3 mg	2	
URSODIOL - ursodiol cap 200 mg, 400 mg	2	
ursodiol cap 300 mg	1	
ursodiol tab 250 mg	1	
ursodiol tab 500 mg (Urso forte)	1	
USTEKINUMAB-TTWE - ustekinumab-ttwe iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	2	SP
VELSIPITY - etrasimod arginine tab 2 mg	2	SP
YESINTEK - ustekinumab-kfce iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	2	SP
ZYMFENTRA 1-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	2	LA, SP

Drug Name	Drug Tier	Requirements/Limits
ZYMFENTRA 2-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	2	LA, SP
ZYMFENTRA 2-SYRINGE - infliximab-dyyb soln prefilled syringe kit 120 mg/ml	2	LA, SP
GENITOURINARY AGENTS		
URINARY ANTISPASMODICS		
bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg	1	
flavoxate hcl tab 100 mg	1	
MYRBETRIQ - mirabegron tab er 24 hr 25 mg, 50 mg	2	QL (30 tablets/30 days)
oxybutynin chloride solution 5 mg/5ml	1	QL (600 mls/30 days)
oxybutynin chloride tab er 24hr 5 mg	1	QL (30 tablets/30 days)
oxybutynin chloride tab er 24hr 10 mg, 15 mg	1	QL (60 tablets/30 days)
oxybutynin chloride tab 5 mg	1	QL (120 tablets/30 days)
solifenacin succinate tab 5 mg, 10 mg (Vesicare)	1	QL (30 tablets/30 days)
tolterodine tartrate cap er 24hr 2 mg, 4 mg	1	QL (30 capsules/30 days)
tolterodine tartrate tab 1 mg	1	QL (60 tablets/30 days)
tolterodine tartrate tab 2 mg (Detrol)	1	QL (60 tablets/30 days)
trospium chloride cap er 24hr 60 mg	1	QL (30 capsules/30 days)
trospium chloride tab 20 mg	1	QL (60 tablets/30 days)
VAGINAL PRODUCTS		
clindamycin phosphate vaginal cream 2% (Cleocin)	1	
ENCARE - nonoxynol-9 vaginal suppos 100 mg	2	OTC
estradiol vaginal cream 0.01% (Estrace)	1	QL (255 grams/365 days)
estradiol vaginal tab 10 mcg (Vagifem)	1	
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	2	QL (1 ring/90 days)
metronidazole vaginal gel 0.75%	1	
MICONAZOLE 3 - miconazole nitrate vaginal suppos 200 mg	2	
OPTIONS GYNOL II VAGINAL - nonoxynol-9 gel 3%	2	OTC
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm	2	
terconazole vaginal cream 0.4%, 0.8%	1	
terconazole vaginal suppos 80 mg	1	
TODAY SPONGE - nonoxynol-9 vaginal sponge 1000 mg	2	OTC
VANDAZOLE - metronidazole vaginal gel 0.75%	2	
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 foam 12.5%	2	OTC
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 film 28%	2	OTC
GENITOURINARY AGENTS - MISC.		
acetic acid irrigation soln 0.25%	1	
alfuzosin hcl tab er 24hr 10 mg (Uroxatral)	1	
dutasteride cap 0.5 mg (Avodart)	1	
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)	1	
finasteride tab 5 mg (Proscar)	1	
glycine irrigation soln 1.5%	1	

Drug Name	Drug Tier	Requirements/Limits
NEOMYCIN/POLYMYXIN B SULF - neomycin-polymyxin b gu irrigation soln	2	
potassium citrate tab er 5 meq (540 mg)	1	
potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)	1	
potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)	1	
silodosin cap 4 mg, 8 mg (Rapaflo)	1	
sodium chloride irrigation soln 0.9%	1	
tamsulosin hcl cap 0.4 mg	1	
tiopronin tab delayed release 100 mg, 300 mg (Thiola ec)	1	LA, SP
tiopronin tab 100 mg (Thiola)	1	LA, SP
CENTRAL NERVOUS SYSTEM DRUGS		
ANTIANXIETY AGENTS		
ALPRAZOLAM INTENSOL - alprazolam conc 1 mg/ml	2	
alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg	1	
alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)	1	
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)	1	
buspirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg	1	
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg	1	
clorazepate dipotassium tab 3.75 mg, 7.5 mg, 15 mg	1	
diazepam conc 5 mg/ml	1	
diazepam inj 5 mg/ml	1	
diazepam oral soln 1 mg/ml	1	
diazepam tab 2 mg, 5 mg, 10 mg (Valium)	1	
droperidol inj 2.5 mg/ml	1	
HYDROXYZINE HCL - hydroxyzine hcl im soln 25 mg/ml	2	
hydroxyzine hcl syrup 10 mg/5ml	1	
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg	1	
HYDROXYZINE HYDROCHLORIDE - hydroxyzine hcl im soln 50 mg/ml	2	
HYDROXYZINE PAMOATE - hydroxyzine pamoate cap 100 mg	2	
hydroxyzine pamoate cap 25 mg, 50 mg	1	
lorazepam conc 2 mg/ml	1	
lorazepam inj 2 mg/ml, 4 mg/ml (Ativan)	1	
lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)	1	
meprobamate tab 200 mg, 400 mg	1	
oxazepam cap 10 mg, 15 mg, 30 mg	1	
ANTIDEPRESSANTS		
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	1	
amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg	1	
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr)	1	
bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl)	1	

Drug Name	Drug Tier	Requirements/Limits
bupropion hcl tab 75 mg, 100 mg	1	
citalopram hydrobromide oral soln 10 mg/5ml	1	
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa)	1	
clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)	1	
desipramine hcl tab 10 mg, 25 mg (Norpramin)	1	
desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg	1	
desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)	1	
doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	1	
doxepin hcl conc 10 mg/ml	1	
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 40 mg (base eq), 60 mg (base eq)	1	
escitalopram oxalate soln 5 mg/5ml (base equiv)	1	
escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro)	1	
FLUOXETINE DR - fluoxetine hcl cap delayed release 90 mg	2	
fluoxetine hcl cap 10 mg, 40 mg	1	
fluoxetine hcl cap 20 mg (Prozac)	1	
fluoxetine hcl solution 20 mg/5ml	1	
fluoxetine hcl tab 10 mg, 20 mg	1	
fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo)	1	
FLUOXETINE HYDROCHLORIDE - fluoxetine hcl tab 60 mg	2	
fluvoxamine maleate cap er 24hr 100 mg, 150 mg	1	
fluvoxamine maleate tab 25 mg, 50 mg, 100 mg	1	
imipramine hcl tab 10 mg, 25 mg, 50 mg	1	
imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg	1	
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab)	1	
mirtazapine tab 7.5 mg, 45 mg	1	
mirtazapine tab 15 mg, 30 mg (Remeron)	1	
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	2	
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)	1	
nortriptyline hcl soln 10 mg/5ml	1	
paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg (Paxil cr)	1	
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil)	1	
PAROXETINE HYDROCHLORIDE - paroxetine hcl oral susp 10 mg/5ml (base equiv)	2	
PHENELZINE SULFATE - phenelzine sulfate tab 15 mg	2	
protriptyline hcl tab 5 mg, 10 mg	1	
sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)	1	
sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft)	1	
tranylcypromine sulfate tab 10 mg (Parnate)	1	

Drug Name	Drug Tier	Requirements/Limits
trazodone hcl tab 50 mg, 100 mg, 150 mg, 300 mg	1	
trimipramine maleate cap 25 mg, 50 mg, 100 mg	1	
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr)	1	
venlafaxine hcl tab er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent), 225 mg (base equivalent)	1	
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)	1	
ANTIPSYCHOTICS		
ABILIFY MAINTENA - aripiprazole im for er susp prefilled syringe 300 mg, 400 mg	2	
ABILIFY MAINTENA - aripiprazole im for extended release susp 300 mg, 400 mg	2	
aripiprazole oral solution 1 mg/ml	1	
aripiprazole orally disintegrating tab 10 mg, 15 mg	1	
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)	1	
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 441 mg/1.6ml, 662 mg/2.4ml, 882 mg/3.2ml, 1064 mg/3.9ml	2	
ARISTADA INITIO - aripiprazole lauroxil im er susp prefilled syr 675 mg/2.4ml	2	
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)	1	
chlorpromazine hcl inj 25 mg/ml, 50 mg/2ml	1	
chlorpromazine hcl tab 10 mg, 50 mg, 200 mg	1	
CHLORPROMAZINE HYDROCHLOR - chlorpromazine hcl conc 30 mg/ml, 100 mg/ml	2	
CLOZAPINE ODT - clozapine orally disintegrating tab 12.5 mg	2	
clozapine orally disintegrating tab 25 mg, 100 mg, 150 mg, 200 mg	1	
clozapine tab 25 mg, 100 mg (Clozaril)	1	
clozapine tab 50 mg, 200 mg	1	
fluphenazine decanoate inj 25 mg/ml	1	
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml	2	
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	1	
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml	2	
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl inj 2.5 mg/ml	2	
haloperidol decanoate im soln 50 mg/ml	1	
haloperidol decanoate im soln 100 mg/ml (Haldol decanoate 100)	1	
haloperidol lactate inj 5 mg/ml	1	
haloperidol lactate oral conc 2 mg/ml	1	

Drug Name	Drug Tier	Requirements/Limits
haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg	1	
LITHIUM CARBONATE - lithium carbonate cap 150 mg, 300 mg, 600 mg	2	
lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate)	1	
lithium carbonate tab er 300 mg (Lithobid)	1	
lithium carbonate tab er 450 mg	1	
lithium carbonate tab 300 mg	1	
lithium oral solution 8 meq/5ml	1	
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	1	
lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda)	1	
MOLINDONE HYDROCHLORIDE - molindone hcl tab 5 mg, 10 mg, 25 mg	2	
NUPLAZID - pimavanserin tartrate cap 34 mg (base equivalent)	2	LA, SP
NUPLAZID - pimavanserin tartrate tab 10 mg (base equivalent)	2	LA, SP
olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg	1	
olanzapine tab 2.5 mg, 5 mg, 20 mg (Zyprexa)	1	
olanzapine tab 7.5 mg, 10 mg, 15 mg	1	
paliperidone tab er 24hr 1.5 mg	1	
paliperidone tab er 24hr 3 mg, 6 mg, 9 mg (Invega)	1	
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	1	
prochlorperazine edisylate inj 10 mg/2ml	1	
prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)	1	
prochlorperazine suppos 25 mg	1	
quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg (Seroquel xr)	1	
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel)	1	
risperidone microspheres for im extended rel susp 12.5 mg, 25 mg, 37.5 mg, 50 mg (Risperdal consta)	1	
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg	2	
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	1	
risperidone soln 1 mg/ml (Risperdal)	1	
risperidone tab 0.25 mg	1	
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg (Risperdal)	1	
thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	1	
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg	1	
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1	
ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)	1	
HYPNOTICS		

Drug Name	Drug Tier	Requirements/Limits
doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor)	1	
estazolam tab 1 mg, 2 mg	1	
eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta)	1	
FLURAZEPAM HYDROCHLORIDE - flurazepam hcl cap 15 mg, 30 mg	2	
midazolam hcl inj pf 5 mg/ml (base equivalent), 2 mg/2ml (base equivalent), 5 mg/5ml (base equivalent), 10 mg/2ml (base equivalent)	1	
midazolam hcl inj 2 mg/2ml (base equivalent), 5 mg/5ml (base equivalent), 10 mg/10ml (base equivalent), 5 mg/ml (base equivalent), 10 mg/2ml (base equivalent), 25 mg/5ml (base equivalent), 50 mg/10ml (base equivalent)	1	
midazolam hcl syrup 2 mg/ml (base equivalent)	1	
phenobarbital elixir 20 mg/5ml	1	
phenobarbital sodium inj 65 mg/ml, 130 mg/ml	1	
phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg	1	
ramelteon tab 8 mg (Rozerem)	1	
tasimelteon capsule 20 mg (Hetlioz)	1	SP
temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg (Restoril)	1	
triazolam tab 0.125 mg	1	
triazolam tab 0.25 mg (Halcion)	1	
zaleplon cap 5 mg, 10 mg	1	
ZOLPIDEM TARTRATE - zolpidem tartrate sl tab 1.75 mg, 3.5 mg	2	
zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien cr)	1	
zolpidem tartrate tab 5 mg, 10 mg (Ambien)	1	
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
amphetamine sulfate tab 5 mg (Evekeo)	1	QL (90 tablets/30 days)
amphetamine sulfate tab 10 mg (Evekeo)	1	QL (180 tablets/30 days)
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr)	1	QL (30 capsules/30 days)
amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg (Adderall)	1	QL (60 tablets/30 days)
amphetamine-dextroamphetamine tab 20 mg (Adderall)	1	QL (90 tablets/30 days)
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg (Mydayis)	1	QL (30 capsules/30 days)
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)	1	
atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv)	1	QL (60 capsules/30 days)
atomoxetine hcl cap 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv)	1	QL (30 capsules/30 days)
CAFFEINE CITRATE - caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)	2	

Drug Name	Drug Tier	Requirements/Limits
caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv) (Caffeine citrate)	1	
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	1	
clonidine hcl tab er 12hr 0.1 mg	1	QL (120 tablets/30 days)
dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)	1	QL (30 capsules/30 days)
dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg (Focalin)	1	QL (60 tablets/30 days)
dextroamphetamine sulfate cap er 24hr 5 mg	1	QL (90 capsules/30 days)
dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg (Dexedrine)	1	QL (120 capsules/30 days)
dextroamphetamine sulfate oral solution 5 mg/5ml	1	QL (1800 mls/30 days)
dextroamphetamine sulfate tab 2.5 mg, 5 mg, 7.5 mg, 15 mg, 20 mg	1	QL (90 tablets/30 days)
dextroamphetamine sulfate tab 10 mg	1	QL (180 tablets/30 days)
dextroamphetamine sulfate tab 30 mg	1	QL (60 tablets/30 days)
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv)	1	QL (30 tablets/30 days)
lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse)	1	QL (30 capsules/30 days)
lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse)	1	QL (30 tablets/30 days)
methamphetamine hcl tab 5 mg	1	QL (150 tablets/30 days)
methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd) (Metadate cd)	1	QL (30 capsules/30 days)
methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)	1	QL (30 capsules/30 days)
methylphenidate hcl cap er 24hr 60 mg (la)	1	QL (30 capsules/30 days)
methylphenidate hcl cap er 24hr 10 mg (xr), 15 mg (xr), 20 mg (xr), 30 mg (xr), 40 mg (xr), 50 mg (xr), 60 mg (xr) (Aptensio xr)	1	QL (30 capsules/30 days)
methylphenidate hcl chew tab 2.5 mg, 5 mg	1	QL (90 tablets/30 days)
methylphenidate hcl chew tab 10 mg	1	QL (180 tablets/30 days)
methylphenidate hcl soln 5 mg/5ml (Methylin)	1	QL (450 mls/30 days)
methylphenidate hcl soln 10 mg/5ml (Methylin)	1	QL (900 mls/30 days)
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg (Concerta)	1	QL (30 tablets/30 days)
methylphenidate hcl tab er osmotic release (osm) 36 mg (Concerta)	1	QL (60 tablets/30 days)
methylphenidate hcl tab er osmotic release (osm) 72 mg	1	QL (30 tablets/30 days)
methylphenidate hcl tab er 10 mg, 20 mg	1	QL (90 tablets/30 days)
methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin)	1	QL (90 tablets/30 days)
METHYLPHENIDATE HYDROCHLO - methylphenidate hcl tab er 24hr 18 mg, 27 mg, 54 mg	2	QL (30 tablets/30 days)
METHYLPHENIDATE HYDROCHLO - methylphenidate hcl tab er 24hr 36 mg	2	QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr (Daytrana)	1	QL (30 patches/30 days)
modafinil tab 100 mg, 200 mg (Provigil)	1	
VYVANSE - lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	2	QL (30 capsules/30 days)
VYVANSE - lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	2	QL (30 tablets/30 days)
PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.		
acamprosate calcium tab delayed release 333 mg	1	
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	2	SP
AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	2	SP
BETASERON - interferon beta-1b for inj kit 0.3 mg	2	SP
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	1	
CHLORDIAZEPOXIDE/AMITRIPT - chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg	2	
dalfampridine tab er 12hr 10 mg (Ampyra)	1	SP
dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera)	1	SP
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	1	SP
disulfiram tab 250 mg, 500 mg	1	
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	1	
donepezil hydrochloride tab 5 mg, 10 mg, 23 mg (Aricept)	1	
fingolimod hcl cap 0.5 mg (base equiv) (Gilenya)	1	SP
FLUOXETINE HYDROCHLORIDE - fluoxetine hcl (pmdd) tab 10 mg, 20 mg	2	
GALANTAMINE HYDROBROMIDE - galantamine hydrobromide oral soln 4 mg/ml	2	
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg	1	
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	1	
GILENYA - fingolimod hcl cap 0.25 mg (base equiv)	2	SP
GILENYA - fingolimod hcl cap 0.5 mg (base equiv)	2	LA, SP
glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml (Copaxone)	1	SP
lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra)	1	
MAVENCLAD - cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5 tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs), 10 mg (9 tabs), 10 mg (10 tabs)	2	LA, SP
MAYZENT - siponimod fumarate tab 0.25 mg (base equiv), 1 mg (base equiv), 2 mg (base equiv)	2	LA, SP
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (7) starter pack	2	LA, SP
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (12) starter pack	2	LA, SP
memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg	1	

Drug Name	Drug Tier	Requirements/Limits
memantine hcl oral solution 2 mg/ml	1	
memantine hcl tab 5 mg, 10 mg	1	
memantine hcl-donepezil hcl cap er 24hr 14-10 mg, 21-10 mg, 28-10 mg (Namzaric)	1	
NICODERM CQ - nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	2	OTC
NICORETTE - nicotine polacrilex gum 2 mg, 4 mg	2	OTC
NICORETTE - nicotine polacrilex lozenge 2 mg, 4 mg	2	OTC
NICORETTE MINI - nicotine polacrilex lozenge 2 mg, 4 mg	2	OTC
NICORETTE STARTER KIT - nicotine polacrilex gum 2 mg, 4 mg	2	OTC
nicotine polacrilex gum 2 mg, 4 mg	1	OTC
nicotine polacrilex lozenge 2 mg, 4 mg	1	OTC
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	1	OTC
NICOTINE TRANSDERMAL SYST - nicotine td patch 24 hr kit 21-14-7 mg/24hr	2	OTC
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)	2	
olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg (Symbyax)	1	
olanzapine-fluoxetine hcl cap 6-50 mg, 12-25 mg, 12-50 mg	1	
paroxetine mesylate cap 7.5 mg (base equiv)	1	
PERPHENAZINE/AMITRIPTYLIN - perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	2	
PIMOZIDE - pimozide tab 1 mg, 2 mg	2	
PLEGRIDY - peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	2	LA, SP
PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	2	LA, SP
PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	2	LA, SP
PLEGRIDY STARTER PACK - peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	2	LA, SP
PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	2	LA, SP
pregabalin tab er 24hr 82.5 mg, 165 mg (Lyrica cr)	1	QL (30 tablets/30 days)
pregabalin tab er 24hr 330 mg (Lyrica cr)	1	QL (60 tablets/30 days)
REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	2	SP
REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	2	SP
REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	2	SP
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	2	SP
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	1	
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)	1	
SAVELLA - milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	2	QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
SAVELLA TITRATION PACK - milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	2	QL (1 pack/180 days)
TASCENSO ODT - fingolimod lauryl sulfate tablet disintegrating 0.25 mg, 0.5 mg	2	LA, SP
TECFIDERA - dimethyl fumarate capsule delayed release 120 mg, 240 mg	2	LA, SP
TECFIDERA STARTER PACK - dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	2	LA, SP
teriflunomide tab 7 mg, 14 mg (Aubagio)	1	SP
tetrabenazine tab 12.5 mg, 25 mg (Xenazine)	1	SP
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	1	
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	1	
VUMERITY - diroximel fumarate capsule delayed release 231 mg	2	LA, SP
ZEPOSIA - ozanimod hcl cap 0.92 mg	2	SP
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	2	SP
ZEPOSIA 7-DAY STARTER PAC - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	2	SP
ANALGESICS AND ANESTHETICS		
ANALGESICS - NON-NARCOTIC		
aspirin chew tab 81 mg	1	OTC
aspirin tab delayed release 81 mg	1	OTC
butalbital-acetaminophen cap 50-300 mg	1	QL (180 capsules/30 days)
butalbital-acetaminophen tab 50-325 mg	1	QL (180 tablets/30 days)
butalbital-acetaminophen-caffeine cap 50-300-40 mg (Fioricet)	1	QL (180 capsules/30 days)
butalbital-acetaminophen-caffeine cap 50-325-40 mg	1	QL (180 capsules/30 days)
butalbital-acetaminophen-caffeine tab 50-325-40 mg	1	QL (180 tablets/30 days)
butalbital-aspirin-caffeine cap 50-325-40 mg	1	QL (180 capsules/30 days)
CLONIDINE HCL - clonidine hcl inj (for epidural infusion) 500 mcg/ml	2	
clonidine hcl inj (for epidural infusion) 100 mcg/ml (Duraclon)	1	
diflunisal tab 500 mg	1	
TENCON - butalbital-acetaminophen tab 50-325 mg	2	QL (180 tablets/30 days)
ANALGESICS - NARCOTIC		
acetaminophen w/ codeine tab 300-15 mg, 300-30 mg	1	QL (360 tablets/30 days)
acetaminophen w/ codeine tab 300-60 mg	1	QL (180 tablets/30 days)
ACETAMINOPHEN/CAFFEINE/DI - acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	2	QL (300 capsules/30 days)
ACETAMINOPHEN/CODEINE - acetaminophen w/ codeine soln 120-12 mg/5ml	2	QL (2700 mls/30 days)
buprenorphine hcl inj 0.3 mg/ml (base equiv)	1	
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)	1	QL (6 tablets/90 days)
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (Suboxone)	1	QL (120 films/30 days)

Drug Name	Drug Tier	Requirements/Limits
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) (Suboxone)	1	QL (60 tablets/30 days)
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone)	1	QL (60 films/30 days)
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	1	QL (120 tablets/30 days)
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	1	QL (90 tablets/30 days)
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans)	1	
butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg (Fioricet/codeine)	1	QL (180 capsules/30 days)
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	1	QL (180 capsules/30 days)
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	1	QL (180 capsules/30 days)
BUTORPHANOL TARTRATE - butorphanol tartrate inj 1 mg/ml, 2 mg/ml	2	
butorphanol tartrate nasal soln 10 mg/ml	1	QL (7.5 ml/30 days)
CODEINE SULFATE - codeine sulfate tab 15 mg, 30 mg, 60 mg	2	QL (180 tablets/30 days)
codeine sulfate tab 30 mg (Codeine sulfate)	1	QL (180 tablets/30 days)
FENTANYL CITRATE - fentanyl citrate soln prefilled syringe 100 mcg/2ml	2	
FENTANYL CITRATE - fentanyl citrate preservative free (pf) inj 50 mcg/ml, 500 mcg/10ml	2	
fentanyl citrate preservative free (pf) inj 50 mcg/ml (Fentanyl citrate)	1	
fentanyl citrate preservative free (pf) inj 100 mcg/2ml, 250 mcg/5ml, 1000 mcg/20ml, 2500 mcg/50ml	1	
fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr, 100 mcg/hr	1	
HYDROCODONE BITARTRATE ER - hydrocodone bitartrate tab er 24hr deter 120 mg	2	
HYDROCODONE BITARTRATE ER - hydrocodone bitartrate cap er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	2	
hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg (Hysingla er)	1	
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen tab 2.5-325 mg	2	QL (240 tablets/30 days)
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen soln 10-300 mg/15ml	2	QL (2025 mls/30 days)
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen soln 10-325 mg/15ml	2	QL (2700 mls/30 days)
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	1	QL (2700 mls/30 days)
hydrocodone-acetaminophen tab 10-325 mg, 7.5-300 mg, 7.5-325 mg, 10-300 mg	1	QL (180 tablets/30 days)
hydrocodone-acetaminophen tab 5-300 mg, 5-325 mg	1	QL (240 tablets/30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	1	QL (150 tablets/30 days)
HYDROCODONE/IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg, 10-200 mg	2	QL (150 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
HYDROMORPHONE HCL - hydromorphone hcl inj 1 mg/ml	1	
HYDROMORPHONE HCL - hydromorphone hcl inj 4 mg/ml	2	
hydromorphone hcl inj 1 mg/ml, 2 mg/ml (Dilaudid)	1	
hydromorphone hcl liqd 1 mg/ml (Dilaudid)	1	QL (1440 mls/30 days)
hydromorphone hcl preservative free (pf) inj 10 mg/ml (Hydromorphone hydroc)	1	
hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg	1	
hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid)	1	QL (180 tablets/30 days)
HYDROMORPHONE HYDROCHLORI - hydromorphone hcl inj 0.5 mg/ml, 2 mg/ml	2	
HYDROMORPHONE HYDROCHLORI - hydromorphone hcl inj 1 mg/ml, 2 mg/ml	1	
HYDROMORPHONE HYDROCHLORI - hydromorphone hcl preservative free (pf) inj 10 mg/ml	2	
levorphanol tartrate tab 2 mg	1	QL (120 tablets/30 days)
MEPERIDINE HCL - meperidine hcl inj 100 mg/ml	1	
MEPERIDINE HCL - meperidine hcl oral soln 50 mg/5ml	2	QL (1800 mls/30 days)
meperidine hcl inj 25 mg/ml, 50 mg/ml (Demerol)	1	
meperidine hcl tab 50 mg	1	QL (360 tablets/30 days)
METHADONE HCL - methadone hcl inj 10 mg/ml	2	
METHADONE HCL - methadone hcl soln 5 mg/5ml	2	QL (900 mls/30 days)
methadone hcl conc 10 mg/ml (Methadose)	1	QL (90 mls/30 days)
methadone hcl inj 10 mg/ml (Methadone hcl)	1	
methadone hcl soln 5 mg/5ml (Methadone hcl)	1	QL (900 mls/30 days)
methadone hcl soln 10 mg/5ml (Methadone hcl)	1	QL (450 mls/30 days)
methadone hcl tab for oral susp 40 mg	1	QL (90 tablets/30 days)
methadone hcl tab 5 mg, 10 mg	1	QL (90 tablets/30 days)
METHADONE HYDROCHLORIDE - methadone hcl soln 5 mg/5ml	1	QL (900 mls/30 days)
METHADONE HYDROCHLORIDE - methadone hcl soln 10 mg/5ml	2	QL (450 mls/30 days)
METHADOSE - methadone hcl conc 10 mg/ml	2	QL (90 mls/30 days)
METHADOSE SUGAR-FREE - methadone hcl conc 10 mg/ml	2	QL (90 mls/30 days)
MORPHINE SULFATE - morphine sulfate tab 15 mg	2	QL (360 tablets/30 days)
MORPHINE SULFATE - morphine sulfate tab 30 mg	2	QL (180 tablets/30 days)
MORPHINE SULFATE - morphine sulfate iv soln 2 mg/ml, 10 mg/ml, 50 mg/ml	2	
MORPHINE SULFATE - morphine sulfate inj 4 mg/ml	2	
MORPHINE SULFATE - morphine sulfate iv soln pf 2 mg/ml, 4 mg/ml, 10 mg/ml	2	
MORPHINE SULFATE - morphine sulfate oral soln 10 mg/5ml	2	QL (2700 mls/30 days)
MORPHINE SULFATE - morphine sulfate oral soln 20 mg/5ml	2	QL (1350 mls/30 days)
MORPHINE SULFATE - morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	2	QL (270 mls/30 days)
MORPHINE SULFATE ER - morphine sulfate cap er 24hr 10 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg, 100 mg	2	

Drug Name	Drug Tier	Requirements/Limits
MORPHINE SULFATE ER - morphine sulfate beads cap er 24hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	2	
morphine sulfate inj pf 0.5 mg/ml, 1 mg/ml (Duramorph)	1	
morphine sulfate iv soln 4 mg/ml	1	
morphine sulfate oral soln 10 mg/5ml (Morphine sulfate)	1	QL (2700 mls/30 days)
morphine sulfate oral soln 20 mg/5ml (Morphine sulfate)	1	QL (1350 mls/30 days)
morphine sulfate oral soln 100 mg/5ml (20 mg/ml) (Morphine sulfate)	1	QL (270 mls/30 days)
morphine sulfate tab er 15 mg, 30 mg, 60 mg (Ms contin)	1	
morphine sulfate tab er 100 mg, 200 mg	1	
morphine sulfate tab 15 mg (Morphine sulfate)	1	QL (360 tablets/30 days)
morphine sulfate tab 30 mg (Morphine sulfate)	1	QL (180 tablets/30 days)
MORPHINE SULFATE/SODIUM C - morphine sulfate iv soln pf 1 mg/ml	2	
nalbuphine hcl inj 10 mg/ml, 20 mg/ml	1	
OXYCODONE AND ACETAMINOPH - oxycodone w/ acetaminophen tab 7.5-300 mg	2	QL (240 tablets/30 days)
oxycodone hcl cap 5 mg	1	QL (360 capsules/30 days)
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	1	QL (270 mls/30 days)
oxycodone hcl soln 5 mg/5ml	1	QL (5400 mls/30 days)
oxycodone hcl tab 5 mg	1	QL (360 tablets/30 days)
oxycodone hcl tab 10 mg, 20 mg	1	QL (180 tablets/30 days)
oxycodone hcl tab 15 mg, 30 mg (Roxicodone)	1	QL (180 tablets/30 days)
OXYCODONE HYDROCHLORIDE/A - oxycodone w/ acetaminophen soln 5-325 mg/5ml	2	QL (1800 mls/30 days)
OXYCODONE HYDROCHLORIDE/A - oxycodone w/ acetaminophen soln 10-300 mg/5ml	2	QL (900 mls/30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg (Percocet)	1	QL (360 tablets/30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg (Percocet)	1	QL (240 tablets/30 days)
oxycodone w/ acetaminophen tab 10-325 mg (Percocet)	1	QL (180 tablets/30 days)
OXYCODONE/ACETAMINOPHEN - oxycodone w/ acetaminophen tab 2.5-300 mg, 5-300 mg	2	QL (360 tablets/30 days)
OXYCODONE/ACETAMINOPHEN - oxycodone w/ acetaminophen tab 10-300 mg	2	QL (180 tablets/30 days)
oxymorphone hcl tab 5 mg, 10 mg	1	QL (180 tablets/30 days)
OXYMORPHONE HYDROCHLORIDE - oxymorphone hcl tab er 12hr 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	2	
pentazocine w/ naloxone hcl tab 50-0.5 mg	1	QL (360 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen tab 5-300 mg	2	QL (360 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen tab 7.5-300 mg	2	QL (240 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen tab 10-300 mg	2	QL (180 tablets/30 days)
TRAMADOL HCL ER - tramadol hcl tab er 24hr biphasic release 100 mg, 200 mg, 300 mg	2	
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	1	

Drug Name	Drug Tier	Requirements/Limits
tramadol hcl tab 50 mg	1	QL (240 tablets/30 days)
tramadol hcl tab 100 mg	1	QL (120 tablets/30 days)
tramadol-acetaminophen tab 37.5-325 mg	1	QL (240 tablets/30 days)
ANALGESICS - ANTI-INFLAMMATORY		
ACTEMRA - tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	2	LA, SP
ACTEMRA - tocilizumab iv inj 80 mg/4ml, 200 mg/10ml, 400 mg/20ml	2	LA, SP
ACTEMRA ACTPEN - tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	2	SP
ADALIMUMAB-ADAZ - adalimumab-adaz soln auto-injector 40 mg/0.4ml, 80 mg/0.8ml	2	SP
ADALIMUMAB-ADAZ - adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml	2	SP
ADALIMUMAB-ADBM - adalimumab-adbm auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml	2	SP
ADALIMUMAB-ADBM - adalimumab-adbm prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.4ml, 40 mg/0.8ml	2	SP
ADALIMUMAB-RYVK - adalimumab-ryvk prefilled syringe kit 40 mg/0.4ml	2	SP
ADALIMUMAB-RYVK (1 PEN) - adalimumab-ryvk auto-injector kit 80 mg/0.8ml	2	
ADALIMUMAB-RYVK (2 PEN) - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	2	SP
AURANOFIN - auranofin cap 3 mg	2	
celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex)	1	
CYLTEZO - adalimumab-adbm auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml	2	SP
CYLTEZO - adalimumab-adbm prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.4ml, 40 mg/0.8ml	2	SP
CYLTEZO STARTER PACKAGE F - adalimumab-adbm auto-injector kit 40 mg/0.8ml	2	SP
diclofenac potassium cap 25 mg (Zipsor)	1	
diclofenac potassium tab 25 mg, 50 mg	1	
diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg	1	
diclofenac sodium tab er 24hr 100 mg	1	
diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)	1	
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)	1	
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	2	SP
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	2	SP
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	2	SP

Drug Name	Drug Tier	Requirements/Limits
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	2	SP
etodolac cap 200 mg, 300 mg	1	
etodolac tab er 24hr 400 mg, 500 mg, 600 mg	1	
etodolac tab 400 mg (Lodine)	1	
etodolac tab 500 mg	1	
FENOPROFEN CALCIUM - fenoprofen calcium cap 400 mg	2	
FLURBIPROFEN - flurbiprofen tab 100 mg	2	
ibuprofen susp 100 mg/5ml	1	OTC
ibuprofen tab 400 mg, 600 mg, 800 mg	1	
ibuprofen-famotidine tab 800-26.6 mg (Duexis)	1	
INDOMETHACIN - indomethacin sodium iv for soln 1 mg	2	
indomethacin cap er 75 mg	1	
indomethacin cap 25 mg, 50 mg	1	
indomethacin suppos 50 mg	1	
indomethacin susp 25 mg/5ml (Indocin)	1	
KETOPROFEN - ketoprofen cap 25 mg, 50 mg	2	
KETOPROFEN ER - ketoprofen cap er 24hr 200 mg	2	
ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)	1	
ketorolac tromethamine inj 15 mg/ml, 30 mg/ml	1	
ketorolac tromethamine tab 10 mg	1	QL (20 tablets/5 days)
leflunomide tab 10 mg, 20 mg (Arava)	1	
MECLOFENAMATE SODIUM - meclofenamate sodium cap 50 mg, 100 mg	2	
mefenamic acid cap 250 mg	1	
meloxicam cap 5 mg, 10 mg	1	
meloxicam tab 7.5 mg, 15 mg	1	
nabumetone tab 500 mg, 750 mg	1	
naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv) (Naprelan)	1	
naproxen sodium tab 275 mg	1	
naproxen sodium tab 550 mg (Anaprox ds)	1	
naproxen susp 125 mg/5ml	1	
naproxen tab ec 375 mg, 500 mg (Ec-naprosyn)	1	
naproxen tab 250 mg, 375 mg	1	
naproxen tab 500 mg (Naprosyn)	1	
naproxen-esomeprazole magnesium tab dr 375-20 mg	1	
naproxen-esomeprazole magnesium tab dr 500-20 mg (Vimovo)	1	
OTEZLA - apremilast tab 20 mg, 30 mg	2	SP
OTEZLA - apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg, 10 mg & 20 mg & 30 mg	2	SP
OTEZLA XR - apremilast tab er 24hr 75 mg	2	SP

Drug Name	Drug Tier	Requirements/Limits
OTEZLA/OTEZLA XR 28 DAY T - apremilast tab start pack 10 mg & 20 mg & 30 mg & (er) 75 mg	2	SP
oxaprozin tab 600 mg (Daypro)	1	
piroxicam cap 10 mg, 20 mg	1	
RIDAURA - auranofin cap 3 mg	2	
RINVOQ - upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg	2	LA, SP
RINVOQ LQ - upadacitinib oral soln 1 mg/ml	2	LA, SP
SIMLANDI - adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml	2	SP
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	2	SP
SIMLANDI 2-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	2	SP
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	2	SP
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	2	SP
sulindac tab 150 mg, 200 mg	1	
TOLMETIN SODIUM - tolmetin sodium cap 400 mg	2	
TOLMETIN SODIUM - tolmetin sodium tab 600 mg	2	
TYENNE - tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml	2	SP
TYENNE - tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml	2	SP
TYENNE - tocilizumab-aazg iv inj 80 mg/4ml, 200 mg/10ml, 400 mg/20ml	2	SP
XELJANZ - tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)	2	SP
XELJANZ - tofacitinib citrate oral soln 1 mg/ml (base equivalent)	2	SP
XELJANZ XR - tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)	2	SP
MIGRAINE PRODUCTS		
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	2	
AJOVY - fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	2	
AJOVY - fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	2	
almotriptan malate tab 6.25 mg, 12.5 mg	1	
diclofenac potassium (migraine) packet 50 mg (Cambia)	1	
dihydroergotamine mesylate inj 1 mg/ml	1	
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)	1	
EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	2	
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml, 120 mg/ml	2	

Drug Name	Drug Tier	Requirements/Limits
ERGOTAMINE TARTRATE/CAFFE - ergotamine w/ caffeine tab 1-100 mg	2	
frovatriptan succinate tab 2.5 mg (base equivalent) (Frova)	1	
MIGERGOT - ergotamine w/ caffeine suppos 2-100 mg	2	
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv)	1	
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	1	
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)	1	
rizatriptan benzoate tab 5 mg (base equivalent)	1	
rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)	1	
sumatriptan nasal spray 5 mg/act, 20 mg/act	1	
sumatriptan succinate inj 6 mg/0.5ml	1	
SUMATRIPTAN SUCCINATE REF - sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	2	
sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml (Imitrex statdose sys)	1	
sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex)	1	
sumatriptan-naproxen sodium tab 85-500 mg (Treximet)	1	
ZAVZPRET - zavegepant hcl nasal spray 10 mg/act	2	
zolmitriptan nasal spray 5 mg/spray unit (Zomig)	1	
zolmitriptan orally disintegrating tab 2.5 mg, 5 mg	1	
zolmitriptan tab 2.5 mg, 5 mg	1	
ZOMIG - zolmitriptan nasal spray 2.5 mg/spray unit, 5 mg/spray unit	2	
GOUT AGENTS		
allopurinol sodium for inj 500 mg (Aloprim)	1	
allopurinol tab 100 mg, 200 mg, 300 mg	1	
colchicine tab 0.6 mg	1	
colchicine w/ probenecid tab 0.5-500 mg	1	
febuxostat tab 40 mg, 80 mg (Uloric)	1	
MITIGARE - colchicine cap 0.6 mg	2	
probenecid tab 500 mg	1	
LOCAL ANESTHETICS - PARENTERAL		
bupivacaine hcl inj 0.25%, 0.5% (Marcaine)	1	
bupivacaine hcl preservative free (pf) inj 0.25%, 0.5%, 0.75% (Marcaine)	1	
bupivacaine inj 0.25% w/ epinephrine 1:200000, 0.25% w/ epinephrine 1:200000 (pf), 0.5% w/ epinephrine 1:200000, 0.5% w/ epinephrine 1:200000 (pf) (Marcaine/epinephrine)	1	
bupivacaine 0.75% in dextrose inj 8.25% (Marcaine spinal)	1	
chloroprocaine hcl preservative free (pf) inj 2%, 3% (Nesacaine-mpf)	1	
lidocaine hcl local inj 0.5%, 1%, 2% (Xylocaine)	1	
lidocaine hcl local preservative free (pf) inj 0.5%, 1%, 1.5%, 2% (Xylocaine-mpf)	1	

Drug Name	Drug Tier	Requirements/Limits
lidocaine hcl local preservative free (pf) inj 4%	1	
LIDOCAINE HYDROCHLORIDE - lidocaine hcl local soln prefilled syringe 100 mg/5ml (2%)	2	
lidocaine inj 0.5% w/ epinephrine-1:200000, 1% w/ epinephrine-1:100000, 2% w/ epinephrine-1:100000 (Xylocaine/epinephrin)	1	
lidocaine inj 1.5% w/ epinephrine-1:200000 (pf), 2% w/ epinephrine-1:200000 (pf) (Xylocaine-mpf/epinep)	1	
GENERAL ANESTHETICS		
desflurane inhal soln (Suprane)	1	
etomidate iv soln 2 mg/ml (Amidate)	1	
FORANE - isoflurane inhal soln	2	
isoflurane inhal soln (Forane)	1	
ketamine hcl inj 10 mg/ml, 50 mg/ml, 100 mg/ml (Ketalar)	1	
propofol iv emul 200 mg/20ml (10 mg/ml), 500 mg/50ml (10 mg/ml), 1000 mg/100ml (10 mg/ml) (Diprivan)	1	
sevoflurane inhal soln (Ultane)	1	
NEUROMUSCULAR DRUGS		
ANTICONVULSANTS		
carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)	1	
carbamazepine chew tab 100 mg	1	
carbamazepine susp 100 mg/5ml (Tegretol)	1	
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)	1	
carbamazepine tab 200 mg (Tegretol)	1	
CELONTIN - methsuximide cap 300 mg	2	
clobazam suspension 2.5 mg/ml (Onfi)	1	
clobazam tab 10 mg, 20 mg (Onfi)	1	
clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	1	
clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)	1	
DIAZEPAM RECTAL GEL - diazepam rectal gel delivery system 2.5 mg	2	
diazepam rectal gel delivery system 10 mg, 20 mg	1	
DILANTIN - phenytoin sodium extended cap 30 mg	2	
divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)	1	
divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)	1	
divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)	1	
eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg (Aptiom)	1	
ethosuximide cap 250 mg (Zarontin)	1	
ethosuximide soln 250 mg/5ml (Zarontin)	1	

Drug Name	Drug Tier	Requirements/Limits
felbamate susp 600 mg/5ml	1	
felbamate tab 400 mg, 600 mg (Felbatol)	1	
fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv), 500 mg/10ml (phenytoin equiv) (Cerebyx)	1	
gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)	1	
gabapentin oral soln 250 mg/5ml (Neurontin)	1	
gabapentin tab 600 mg, 800 mg (Neurontin)	1	
lacosamide oral solution 10 mg/ml (Vimpat)	1	
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)	1	
lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt)	1	
lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	1	
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (Lamictal odt)	1	
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (Lamictal odt)	1	
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (Lamictal odt)	1	
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	1	
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	1	
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	1	
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not)	1	
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak)	1	
levetiracetam inj 500 mg/5ml (100 mg/ml) (Keppra)	1	
levetiracetam oral soln 100 mg/ml (Keppra)	1	
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)	1	
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra)	1	
methsuximide cap 300 mg (Celontin)	1	
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	1	
oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg (Oxtellar xr)	1	
oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal)	1	
perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg (Fycompa)	1	
phenytoin chew tab 50 mg (Dilantin infatabs)	1	
phenytoin sodium extended cap 100 mg (Dilantin)	1	
phenytoin sodium extended cap 200 mg, 300 mg	1	
phenytoin sodium inj 50 mg/ml	1	
phenytoin susp 125 mg/5ml (Dilantin-125)	1	
pregabalin cap 25 mg (Lyrica)	1	QL (360 capsules/30 days)
pregabalin cap 50 mg (Lyrica)	1	QL (270 capsules/30 days)

Drug Name	Drug Tier	Requirements/Limits
pregabalin cap 75 mg, 100 mg (Lyrica)	1	QL (180 capsules/30 days)
pregabalin cap 150 mg, 200 mg (Lyrica)	1	QL (90 capsules/30 days)
pregabalin cap 225 mg, 300 mg (Lyrica)	1	QL (60 capsules/30 days)
pregabalin soln 20 mg/ml (Lyrica)	1	QL (900 mls/30 days)
primidone tab 50 mg, 250 mg (Mysoline)	1	
rufinamide susp 40 mg/ml (Banzel)	1	
rufinamide tab 200 mg, 400 mg (Banzel)	1	
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg	1	
topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg (Trokendi xr)	1	
topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)	1	
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)	1	
valproate sodium inj 100 mg/ml	1	
valproate sodium oral soln 250 mg/5ml (base equiv)	1	
valproic acid cap 250 mg	1	
vigabatrin powd pack 500 mg (Sabril)	1	LA, SP
vigabatrin tab 500 mg (Sabril)	1	LA, SP
VIMPAT - lacosamide iv inj 200 mg/20ml (10 mg/ml)	2	
zonisamide cap 25 mg, 100 mg (Zonegran)	1	
zonisamide cap 50 mg	1	
ANTIPARKINSON AGENTS		
amantadine hcl cap 100 mg	1	
amantadine hcl soln 50 mg/5ml	1	
amantadine hcl tab 100 mg	1	
benztropine mesylate inj 1 mg/ml	1	
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg	1	
bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel)	1	
bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel)	1	
carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	1	
carbidopa & levodopa tab er 25-100 mg, 50-200 mg	1	
carbidopa & levodopa tab 10-100 mg, 25-100 mg (Sinemet)	1	
carbidopa & levodopa tab 25-250 mg	1	
carbidopa tab 25 mg (Lodosyn)	1	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	1	
entacapone tab 200 mg	1	
pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg	1	
pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	1	
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)	1	

Drug Name	Drug Tier	Requirements/Limits
ropinirole hydrochloride tab er 24hr 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent), 8 mg (base equivalent), 12 mg (base equivalent)	1	
ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	1	
selegiline hcl cap 5 mg	1	
selegiline hcl tab 5 mg	1	
tolcapone tab 100 mg (Tasmar)	1	
TRIHEXYPHENIDYL HCL - trihexyphenidyl hcl oral soln 0.4 mg/ml	2	
trihexyphenidyl hcl tab 2 mg, 5 mg	1	
NEUROMUSCULAR AGENTS		
riluzole tab 50 mg	1	SP
MUSCULOSKELETAL THERAPY AGENTS		
BACLOFEN - baclofen oral soln 5 mg/5ml	2	
baclofen oral soln 10 mg/5ml (Ozobax ds)	1	
baclofen susp 25 mg/5ml (Fleqsuvy)	1	
baclofen tab 5 mg, 10 mg, 15 mg, 20 mg	1	
carisoprodol tab 250 mg, 350 mg (Soma)	1	
chlorzoxazone tab 250 mg, 375 mg, 500 mg, 750 mg	1	
cyclobenzaprine hcl tab 5 mg, 7.5 mg, 10 mg	1	
dantrolene sodium cap 25 mg (Dantrium)	1	
dantrolene sodium cap 50 mg, 100 mg	1	
dantrolene sodium for iv soln 20 mg (Dantrium iv)	1	
GEL-ONE - cross-linked hyaluronic acid gel prefilled syringe 30 mg/3ml	2	LA
metaxalone tab 400 mg, 800 mg	1	
methocarbamol tab 500 mg, 750 mg, 1000 mg	1	
orphenadrine citrate inj 30 mg/ml	1	
orphenadrine citrate tab er 12hr 100 mg	1	
SYNVISC - hylan g-f 20 intra-articular soln prefilled syr 16 mg/2ml	2	
SYNVISC ONE - hylan g-f 20 intra-articular soln prefilled syr 48 mg/6ml	2	
tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent)	1	
tizanidine hcl tab 2 mg (base equivalent)	1	
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)	1	
VISCO-3 - sodium hyaluronate intra-articular soln pref syr 25 mg/2.5ml	2	
ANTIMYASTHENIC AGENTS		
NEOSTIGMINE METHYLSULFATE - neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)	2	
neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)	1	
pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)	1	
pyridostigmine bromide tab er 180 mg (Mestinon timespan)	1	

Drug Name	Drug Tier	Requirements/Limits
pyridostigmine bromide tab 60 mg (Mestinon)	1	
NUTRITIONAL PRODUCTS		
VITAMINS		
ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)	1	
phytonadione tab 5 mg	1	
PYRIDOXINE HCL - pyridoxine hcl inj 100 mg/ml	2	
thiamine hcl inj 100 mg/ml	1	
MULTIVITAMINS		
b-complex w/ c & folic acid tab	1	OTC
b-complex w/ c & folic acid tab 0.8 mg	1	OTC
b-complex w/ c tab	1	OTC
b-complex w/ folic acid tab	1	OTC
b-complex w/biotin & folic acid tab	1	OTC
B-COMPLEX/VITAMIN C/FOLIC - b-complex w/ c-biotin-vit e & folic acid tab 0.4 mg	2	OTC
C-NATE DHA - prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	2	
CLASSIC PRENATAL - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	2	OTC
COMPLETE NATAL DHA - prenat-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	2	
COMPLETENATE - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	2	
CVS PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-0.8 mg	2	OTC
CVS PRENATAL MULTI+DHA - prenatal mv & min w/fe fum-fa-dha cap 27-0.8-250 mg	2	OTC
CVS PRENATAL MULTIVITAMIN - prenatal mv & min w/fe fum-fa-dha cap 27-0.8-250 mg	2	OTC
ELITE-OB - prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	2	
FOLIVANE-OB - prenatal w/o a w/fe fum-fe poly-fa cap 85-1 mg	2	
FT PRENATAL/FOLIC ACID - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	2	OTC
GNP PRENATAL - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	2	OTC
M-NATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2	
multiple vitamins w/ iron tab	1	OTC
NEO-VITAL RX - prenatal multivitamins & minerals w/ iron & fa tab 1 mg	2	
PNV-DHA - prenat w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	2	
PNV-DHA+DOCUSATE - prenatal w/o vit a w/ fe fum-dss-fa-dha cap 27-1.25-300 mg	2	
PNV-OMEGA - prenat w/o a w/ fe fumarate-methylfolate-fa-omega 3 cap	2	
PNV-SELECT - prenatal vit w/ fe fum-methylfolate-fa tab 27-0.6-0.4 mg	2	
PRENA 1 TRUE - prenat w/o a w/fe chel-fa tab 30-1.4 mg & dha cap 300mg pk	2	

Drug Name	Drug Tier	Requirements/Limits
PRENATAL - prenatal multivitamins & minerals w/iron & fa tab 0.8 mg	2	OTC
PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-0.8 mg, 28-0.8 mg	2	OTC
PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2	
PRENATAL AND IRON - prenatal multivitamins & minerals w/iron & fa tab 0.8 mg	2	OTC
PRENATAL COMPLETE - prenatal vit w/ fe fumarate-fa tab 14-0.4 mg	2	OTC
PRENATAL MULTI + DHA - prenatal mv & min w/fe fum-fa-dha cap 27-0.8-250 mg	2	OTC
PRENATAL MULTIVITAMIN - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	2	OTC
PRENATAL ONE DAILY - prenatal vit w/ fe fumarate-fa tab 27-0.8 mg	2	OTC
PRENATAL PLUS VITAMIN AND - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2	
PRENATAL VITAMIN & MINERA - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	2	OTC
PRENATAL VITAMIN/IRON - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	2	OTC
PRENATAL VITAMINS - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	2	OTC
PRENATAL-U - prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	2	
PRENA1 CHEW - prenat w/ b2-b6-b12-d3-folic acid chew tab 1.4 mg	2	
PRENA1 PEARL - prenat w/oa w/fefum-na fered-fa-dha cap er 30-1.4-200 mg	2	
QC PRENATAL - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	2	OTC
SE-NATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	2	
SE-NATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	2	
TARON-C DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 35-1 mg	2	
TRINATAL RX 1 - prenatal vit w/ fe fumarate-fa tab 60-1 mg	2	
TRINATE - prenatal vit w/ fe fumarate-fa tab 28-1 mg	2	
vitamins w/ lipotropics tab	1	OTC
WESCAP-PN DHA - prenat w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	2	
WESNATAL DHA COMPLETE - prenat-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	2	
WESNATE DHA - prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	2	
WESTAB PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2	
WESTGEL DHA - prenat w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	2	
MINERALS and ELECTROLYTES		
CALCIUM CHLORIDE - calcium chloride inj 10%	1	
calcium chloride inj 10%	1	

Drug Name	Drug Tier	Requirements/Limits
CALCIUM GLUCONATE - calcium gluconate inj 10%	2	
calcium gluconate inj 10% (Calcium gluconate)	1	
CHROMIUM CHLORIDE - chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)	2	
COPPER - cupric chloride inj 0.4 mg/ml (elemental)	2	
DEXTROSE 5% - electrolyte-48 in d5w soln	2	
DEXTROSE 10%/SODIUM CHLOR - dextrose 10% w/ sodium chloride 0.2%, 0.45%	2	
DEXTROSE 2.5%/SODIUM CHLO - dextrose 2.5% w/ sodium chloride 0.45%	2	
dextrose 5% in lactated ringers	1	
DEXTROSE 5%/SODIUM CHLORI - dextrose 5% w/ sodium chloride 0.2%, 0.3%, 0.33%, 0.45%, 0.9%	2	
DEXTROSE/SODIUM CHLORIDE - dextrose 5% w/ sodium chloride 0.225%	2	
dextrose 2.5% w/ sodium chloride 0.45% (Dextrose 2.5%/sodium)	1	
dextrose 5% w/ sodium chloride 0.225% (Dextrose/sodium chlo)	1	
dextrose 5% w/ sodium chloride 0.3%, 0.45%, 0.9% (Dextrose 5%/sodium c)	1	
KCL 0.075%/D5W/NACL 0.45% - kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	1	
KCL 0.15%/D5W/NACL 0.2% - kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	1	
KCL 0.15%/D5W/NACL 0.45% - kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	1	
KCL 0.15%/D5W/NACL 0.9% - kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	1	
KCL 0.3%/D5W/NACL 0.45% - kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj	1	
KCL 0.3%/D5W/NACL 0.9% - kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj	2	
kcl 20 meq/l (0.15%) in nacl 0.9% inj (Potassium chloride/s)	1	
kcl 40 meq/l (0.3%) in nacl 0.9% inj (Potassium chloride/s)	1	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	1	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj	1	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj	1	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj (Kcl 0.3%/d5w/nacl 0.)	1	
KLOR-CON 10 - potassium chloride tab er 10 meq	1	
KLOR-CON 8 - potassium chloride tab er 8 meq (600 mg)	1	
lactated ringer's solution (Lactated ringers)	1	
LACTATED RINGERS - lactated ringer's solution	2	

Drug Name	Drug Tier	Requirements/Limits
MAGNESIUM SULFATE - magnesium sulfate inj 50%	2	
MAGNESIUM SULFATE - magnesium sulfate iv soln 4 gm/100ml (40 mg/ml), 20 gm/500ml (40 mg/ml), 40 gm/1000ml (40 mg/ml), 4 gm/50ml (80 mg/ml)	2	
magnesium sulfate inj 50% (Magnesium sulfate)	1	
magnesium sulfate iv soln 4 gm/100ml (40 mg/ml), 20 gm/500ml (40 mg/ml), 40 gm/1000ml (40 mg/ml), 4 gm/50ml (80 mg/ml) (Magnesium sulfate)	1	
manganese chloride inj 0.1 mg/ml (Manganese trace meta)	1	
MANGANESE TRACE METAL - manganese chloride inj 0.1 mg/ml	2	
POTASSIUM ACETATE - potassium acetate inj 2 meq/ml	2	
potassium acetate inj 2 meq/ml (Potassium acetate)	1	
POTASSIUM CHLORIDE - potassium chloride inj 10 meq/100ml, 10 meq/50ml, 20 meq/100ml, 20 meq/50ml, 40 meq/100ml	2	
potassium chloride cap er 8 meq, 10 meq	1	
potassium chloride inj 2 meq/ml	1	
potassium chloride inj 10 meq/100ml, 10 meq/50ml, 20 meq/100ml, 20 meq/50ml, 40 meq/100ml (Potassium chloride)	1	
potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq	1	
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)	1	
potassium chloride powder packet 20 meq	1	
potassium chloride tab er 8 meq (600 mg), 10 meq, 20 meq (1500 mg)	1	
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj	1	
POTASSIUM CHLORIDE/DEXTRO - potassium chloride 20 meq/l (0.15%) in dextrose 5% inj	1	
POTASSIUM CHLORIDE/DEXTRO - potassium chloride 20 meq/l (0.15%) in d5w lactated ringers	2	
POTASSIUM CHLORIDE/DEXTRO - kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj	1	
POTASSIUM CHLORIDE/SODIUM - kcl 20 meq/l (0.15%) in nacl 0.45% inj	2	
POTASSIUM CHLORIDE/SODIUM - kcl 20 meq/l (0.15%) in nacl 0.9% inj	1	
POTASSIUM CHLORIDE/SODIUM - kcl 20 meq/l (0.15%) in nacl 0.9% inj	2	
POTASSIUM CHLORIDE/SODIUM - kcl 20 meq/l (0.149%) in nacl 0.9% inj	2	
POTASSIUM CHLORIDE/SODIUM - kcl 40 meq/l (0.3%) in nacl 0.9% inj	2	
POTASSIUM CHLORIDE/SODIUM - kcl 40 meq/l (0.298%) in nacl 0.9% inj	2	

Drug Name	Drug Tier	Requirements/Limits
POTASSIUM PHOSPHATES - potassium phosphates inj 15 mm/5ml (phos) 22 meq/5ml (k), 45 mm/15ml (phos) 66 meq/15ml (k), 150 mm/50ml (phos) 220 meq/50ml (k)	2	
potassium phosphates inj 15 mm/5ml (phos) 22 meq/5ml (k), 45 mm/15ml (phos) 66 meq/15ml (k), 150 mm/50ml (phos) 220 meq/50ml (k) (Potassium phosphates)	1	
ringer's solution	1	
SODIUM ACETATE - sodium acetate inj 2 meq/ml	2	
SODIUM ACETATE - sodium acetate inj 4 meq/ml	1	
sodium acetate inj 2 meq/ml (Sodium acetate)	1	
sodium bicarbonate iv soln 4.2%, 8.4%	1	
sodium chloride flush iv soln 0.9%	1	
sodium chloride inj 2.5 meq/ml (14.6%)	1	
sodium chloride iv soln 0.45%, 0.9%, 3%, 5%, 4 meq/ml (23.4%)	1	
sodium chloride preservative free (pf) inj 0.9%	1	
SODIUM FLUORIDE - sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	2	
SODIUM FLUORIDE - sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	2	
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	1	
SODIUM PHOSPHATE - sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)	1	
sodium phosphates inj 15 mm/5ml (phos) 20 meq/5ml (na), 45 mm/15ml (phos) 60 meq/15ml (na), 150 mm/50ml (phos) 200 meq/50ml (na)	1	
ZINC CHLORIDE - zinc chloride inj 1 mg/ml	2	
zinc chloride inj 1 mg/ml (Zinc chloride)	1	
ZINC SULFATE - zinc sulfate inj 1 mg/ml, 5 mg/ml	2	
zinc sulfate inj 1 mg/ml, 5 mg/ml (Zinc sulfate)	1	
NUTRIENTS		
dextrose inj 5% (Dextrose 5%)	1	
dextrose inj 10% (Dextrose 10%)	1	
dextrose inj 50% (Dextrose 50%)	1	
DEXTROSE 10% - dextrose inj 10%	2	
DEXTROSE 25% - dextrose inj 25%	2	
DEXTROSE 5% - dextrose inj 5%	1	
DEXTROSE 5% - dextrose inj 5%	2	
DEXTROSE 50% - dextrose inj 50%	2	
DEXTROSE 70% - dextrose inj 70%	2	
HEMATOLOGICAL AGENTS		
HEMATOPOIETIC AGENTS		
carbonyl iron susp 15 mg/1.25ml (elemental iron)	1	OTC
cyanocobalamin inj 1000 mcg/ml	1	

Drug Name	Drug Tier	Requirements/Limits
cyanocobalamin nasal spray 500 mcg/0.1ml (Nascobal)	1	
DROXIA - hydroxyurea cap 200 mg, 300 mg, 400 mg	2	SP
eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq) (Promacta)	1	SP
eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv) (Promacta)	1	SP
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe)	1	OTC
folic acid cap 0.8 mg	1	OTC
folic acid inj 5 mg/ml	1	
folic acid tab 400 mcg, 800 mcg, 1 mg	1	OTC
FOLTABS 800 - folic acid-vitamin b6-vitamin b12 tab 0.8-10-0.115 mg	2	OTC
glutamine (sickle cell) powd pack 5 gm (Endari)	1	SP
HYDROXOCOBALAMIN - hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)	2	
IRON UP - polysaccharide iron complex liquid 15 mg/0.5ml (fe equiv)	2	OTC
miglustat cap 100 mg (Zavesca)	1	LA, SP
NOVAFERRUM PEDIATRIC DROP - polysaccharide iron complex liquid 15 mg/ml (fe equiv)	2	OTC
sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq) (Ferrlecit)	1	
ANTICOAGULANTS		
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)	1	QL (60 capsules/30 days)
dabigatran etexilate mesylate cap 110 mg (etexilate base eq) (Pradaxa)	1	QL (120 capsules/30 days)
ELIQUIS - apixaban cap sprinkle 0.15 mg	2	QL (74 capsules/30 days)
ELIQUIS - apixaban tab 2.5 mg	2	QL (60 tablets/30 days)
ELIQUIS - apixaban tab 5 mg	2	QL (74 tablets/30 days)
ELIQUIS - apixaban tab for oral susp 0.5 mg	2	QL (5 boxes/28 days)
ELIQUIS - apixaban tab for oral susp pack 3 x 0.5 mg (1.5 mg), 4 x 0.5 mg (2 mg)	2	QL (5 boxes/28 days)
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg	2	QL (1 pack/180 days)
enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox)	1	QL (30 syringes/90 days)
enoxaparin sodium inj 300 mg/3ml (Lovenox)	1	QL (10 vials/90 days)
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)	1	QL (90 syringes/90 days)
HEPARIN LOCK FLUSH - heparin sodium (porcine) lock flush pf iv soln 1 unit/ml	2	
heparin sod (porcine)-nacl iv soln 1000 unit/500ml-0.9%, 2000 unit/l-0.9% (Heparin sodium/sodiu)	1	

Drug Name	Drug Tier	Requirements/Limits
heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml	1	
heparin sodium (porcine) lock flush iv soln 10 unit/ml, 100 unit/ml	1	
heparin sodium (porcine) lock flush pf iv soln 10 unit/ml, 100 unit/ml	1	
heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml	1	
HEPARIN SODIUM/DEXTROSE - heparin sodium (porcine) 100 unit/ml in d5w	2	
HEPARIN SODIUM/DEXTROSE - heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%	2	
HEPARIN SODIUM/D5W - heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%, 25000 unit/500ml-5%	2	
HEPARIN SODIUM/D5W - heparin sodium (porcine) 100 unit/ml in d5w	2	
HEPARIN SODIUM/NACL 0.45% - heparin sod (porcine) in nacl iv soln 25000 unit/250ml-0.45%	2	
HEPARIN SODIUM/SODIUM CHL - heparin sod (porcine)-nacl iv soln 1000 unit/500ml-0.9%, 2000 unit/l-0.9%	2	
HEPARIN SODIUM/SODIUM CHL - heparin sod (porcine) in nacl iv soln 25000 unit/250ml-0.45%, 25000 unit/500ml-0.45%	2	
rivaroxaban for susp 1 mg/ml (Xarelto)	1	
rivaroxaban tab 2.5 mg (Xarelto)	1	QL (60 tablets/30 days)
warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	1	
XARELTO - rivaroxaban for susp 1 mg/ml	2	QL (620 mls/30 days)
XARELTO - rivaroxaban tab 2.5 mg, 15 mg	2	QL (60 tablets/30 days)
XARELTO - rivaroxaban tab 10 mg, 20 mg	2	QL (30 tablets/30 days)
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg	2	QL (51 tablets/30 days)
HEMOSTATICS		
aminocaproic acid inj 250 mg/ml	1	
aminocaproic acid oral soln 0.25 gm/ml	1	
aminocaproic acid tab 500 mg, 1000 mg	1	
tranexamic acid tab 650 mg	1	
HEMATOLOGICAL AGENTS - MISC.		
ALBUMIN HUMAN - albumin, human inj 25%	2	
ALBUTEIN - albumin, human inj 25%	2	
anagrelide hcl cap 0.5 mg (Agrylin)	1	
anagrelide hcl cap 1 mg	1	
aspirin-dipyridamole cap er 12hr 25-200 mg	1	
BRILINTA - ticagrelor tab 60 mg, 90 mg	2	
cilostazol tab 50 mg, 100 mg	1	
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	1	
clopidogrel bisulfate tab 300 mg (base equiv)	1	

Drug Name	Drug Tier	Requirements/Limits
dipyridamole tab 25 mg, 50 mg, 75 mg	1	
HETASTARCH 6%/NACL - hetastarch (hes /0.7 or /0.75) 6% in nacl 0.9% iv soln	2	
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)	1	LA, SP
pentoxifylline tab er 400 mg	1	
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)	1	
ticagrelor tab 60 mg, 90 mg (Brilinta)	1	
TOPICAL PRODUCTS		
OPHTHALMIC AGENTS		
APRACLONIDINE - apraclonidine hcl ophth soln 0.5% (base equivalent)	2	
ATROPINE SULFATE - atropine sulfate ophth soln 1%	2	
atropine sulfate ophth soln 1%	1	
azelastine hcl ophth soln 0.05%	1	
BACITRACIN - bacitracin ophth oint 500 unit/gm	2	
bacitracin-polymyxin b ophth oint	1	
bacitracin-polymyxin-neomycin-hc ophth oint 1%	1	
bepotastine besilate ophth soln 1.5% (Bepreve)	1	
BETAXOLOL HCL - betaxolol hcl ophth soln 0.5%	2	
bimatoprost ophth soln 0.03%	1	QL (2.5 mls/30 days)
brimonidine tartrate ophth soln 0.1%, 0.15% (Alphagan p)	1	
brimonidine tartrate ophth soln 0.2%	1	
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan)	1	
brinzolamide ophth susp 1% (Azopt)	1	
bromfenac sodium ophth soln 0.07% (base equivalent) (Prolensa)	1	
bromfenac sodium ophth soln 0.075% (base equivalent) (Bromsite)	1	
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	1	
BROMSITE - bromfenac sodium ophth soln 0.075% (base equivalent)	2	
CARTEOLOL HCL - carteolol hcl ophth soln 1%	2	
ciprofloxacin hcl ophth soln 0.3% (base equivalent)	1	
COMBIGAN - brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%	2	
CROMOLYN SODIUM - cromolyn sodium ophth soln 4%	2	
cyclopentolate hcl ophth soln 1% (Cyclogyl)	1	
cyclosporine (ophth) emulsion 0.05% (Restasis multidose)	1	
DEXAMETHASONE SODIUM PHOS - dexamethasone sodium phosphate ophth soln 0.1%	2	
diclofenac sodium ophth soln 0.1%	1	

Drug Name	Drug Tier	Requirements/Limits
difluprednate ophth emulsion 0.05% (Durezol)	1	
dorzolamide hcl ophth soln 2%	1	
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)	1	
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf)	1	
epinastine hcl ophth soln 0.05%	1	
ERYTHROMYCIN - erythromycin ophth oint 5 mg/gm	2	
erythromycin ophth oint 5 mg/gm	1	
fluorometholone ophth susp 0.1% (Fml liquifilm)	1	
FLURBIPROFEN SODIUM - flurbiprofen sodium ophth soln 0.03%	2	
gatifloxacin ophth soln 0.5%	1	
gentamicin sulfate ophth soln 0.3%	1	
ILEVRO - nepafenac ophth susp 0.3%	2	
ketorolac tromethamine ophth soln 0.4% (Acular ls)	1	
ketorolac tromethamine ophth soln 0.5% (Acular)	1	
latanoprost ophth soln 0.005% (Xalatan)	1	QL (2.5 mls/30 days)
LEVOBUNOLOL HCL - levobunolol hcl ophth soln 0.5%	2	
LEVOFLOXACIN - levofloxacin ophth soln 0.5%, 1.5%	2	
loteprednol etabonate ophth gel 0.5% (Lotemax)	1	
loteprednol etabonate ophth susp 0.2% (Alrex)	1	
loteprednol etabonate ophth susp 0.5% (Lotemax)	1	
LUMIGAN - bimatoprost ophth soln 0.01%	2	QL (2.5 mls/30 days)
moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)	1	
MOXIFLOXACIN HYDROCHLORID - moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)	2	
NATACYN - natamycin ophth susp 5%	2	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	1	
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	1	
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	1	
NEOMYCIN/POLYMYXIN/GRAMIC - neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	2	
NEOMYCIN/POLYMYXIN/HYDROC - neomycin-polymyxin-hc ophth susp	2	
ofloxacin ophth soln 0.3% (Ocuflox)	1	
olopatadine hcl ophth soln 0.2% (base equivalent)	1	OTC
phenylephrine hcl ophth soln 2.5% (Phenylephrine hydroc)	1	
phenylephrine hcl ophth soln 10%	1	
PHENYLEPHRINE HYDROCHLORI - phenylephrine hcl ophth soln 2.5%	2	
pilocarpine hcl ophth soln 1%, 2%, 4%	1	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	1	

Drug Name	Drug Tier	Requirements/Limits
prednisolone acetate ophth susp 1% (Pred forte)	1	
PREDNISOLONE SODIUM PHOSP - prednisolone sodium phosphate ophth soln 1%	2	
proparacaine hcl ophth soln 0.5% (Alcaine)	1	
RESTASIS - cyclosporine (ophth) emulsion 0.05%	2	
RESTASIS MULTIDOSE - cyclosporine (ophth) emulsion 0.05%	2	
SULFACETAMIDE SODIUM - sulfacetamide sodium ophth soln 10%	2	
SULFACETAMIDE SODIUM - sulfacetamide sodium ophth oint 10%	2	
SULFACETAMIDE SODIUM/PRED - sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	2	
tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan)	1	QL (30 containers/30 days)
TETRACAINE HCL - tetracaine hcl ophth soln 0.5%	1	
tetracaine hcl ophth soln 0.5%	1	
TETRACAINE HYDROCHLORIDE - tetracaine hcl ophth soln 0.5%	1	
timolol maleate ophth gel forming soln 0.25%, 0.5%	1	
timolol maleate ophth soln 0.25%, 0.5%	1	
timolol maleate ophth soln 0.5% (once-daily) (Istalol)	1	
timolol maleate preservative free ophth soln 0.25%, 0.5% (Timoptic ocudose)	1	
timolol ophth soln 0.5% (Betimol)	1	
TOBRADEX - tobramycin-dexamethasone ophth oint 0.3-0.1%	2	
tobramycin ophth soln 0.3%	1	
tobramycin-dexamethasone ophth susp 0.3-0.1%	1	
TOBREX - tobramycin ophth oint 0.3%	2	
travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z)	1	QL (2.5 mls/30 days)
TRIFLURIDINE - trifluridine ophth soln 1%	2	
tropicamide ophth soln 0.5%	1	
tropicamide ophth soln 1% (Mydriacyl)	1	
XIIDRA - lifitegrast ophth soln 5%	2	
OTIC AGENTS		
acetic acid otic soln 2%	1	
ciprofloxacin hcl otic soln 0.2% (base equivalent) (Cetraxal)	1	
ciprofloxacin-dexamethasone otic susp 0.3-0.1%	1	
CORTISPORIN-TC - neomycin-colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	2	
fluocinolone acetonide (otic) oil 0.01% (Dermotic)	1	
neomycin-polymyxin-hc otic soln 1%	1	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	1	
ofloxacin otic soln 0.3%	1	
OTOVEL - ciprofloxacin-fluocinolone aceton (pf) otic soln 0.3-0.025%	2	
MOUTH/THROAT/DENTAL AGENTS		

Drug Name	Drug Tier	Requirements/Limits
cevimeline hcl cap 30 mg (Evoxac)	1	
chlorhexidine gluconate soln 0.12% (Peridex)	1	
clotrimazole troche 10 mg	1	
DENTA 5000 PLUS SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	2	
LIDOCAINE HCL - lidocaine hcl laryngotracheal soln 4%	2	
lidocaine hcl viscous soln 2%	1	
NYSTATIN - nystatin susp 100000 unit/ml	2	
nystatin susp 100000 unit/ml (Nystatin)	1	
pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)	1	
sodium fluoride cream 1.1% (Prevident 5000 plus)	1	
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)	1	
sodium fluoride paste 1.1% (Prevident 5000 boost)	1	
sodium fluoride rinse 0.2% (Prevident rinse)	1	
SODIUM FLUORIDE 5000 PPM - sodium fluoride-potassium nitrate gel 1.1-5%	2	
SODIUM FLUORIDE/POTASSIUM - sodium fluoride-potassium nitrate gel 1.1-5%	2	
stannous fluoride conc 0.63%	1	OTC
stannous fluoride gel 0.4%	1	OTC
triamcinolone acetonide dental paste 0.1%	1	
ANORECTAL AGENTS		
budesonide rectal foam 2 mg/act (Uceris)	1	
HYDROCORTISONE - hydrocortisone perianal cream 1%	2	
hydrocortisone acetate suppos 25 mg	1	
HYDROCORTISONE ACETATE/PR - hydrocortisone acetate w/ pramoxine perianal cream 1-1%	2	
hydrocortisone enema 100 mg/60ml (Cortenema)	1	
hydrocortisone perianal cream 2.5% (Anusol-hc)	1	
nitroglycerin oint 0.4% (Rectiv)	1	
DERMATOLOGICALS		
ABRAVO - wound dressings - emulsion	2	
acitretin cap 10 mg, 17.5 mg, 25 mg	1	
acyclovir cream 5% (Zovirax)	1	
acyclovir oint 5% (Zovirax)	1	
ADAPALENE - adapalene soln 0.1%	2	
ADAPALENE - adapalene pads 0.1%	2	
adapalene cream 0.1% (Differin)	1	
adapalene gel 0.3% (Differin pump)	1	
adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo)	1	
adapalene-benzoyl peroxide gel 0.3-2.5% (Epiduo forte)	1	
ADBRY - tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	2	LA, SP

Drug Name	Drug Tier	Requirements/Limits
ADBRY - tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	2	LA, SP
AMCINONIDE - amcinonide cream 0.1%	2	QL (120 grams/30 days)
AMCINONIDE - amcinonide oint 0.1%	2	QL (120 grams/30 days)
ATOPAVO - wound dressings - emulsion	2	
azelaic acid gel 15%	1	
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)	1	
betamethasone dipropionate augmented cream 0.05%	1	QL (200 grams/28 days)
betamethasone dipropionate augmented oint 0.05% (Diprolene)	1	QL (200 grams/28 days)
betamethasone dipropionate cream 0.05%	1	QL (135 grams/30 days)
betamethasone dipropionate lotion 0.05%	1	QL (120 mls/30 days)
betamethasone dipropionate oint 0.05%	1	QL (135 grams/30 days)
BETAMETHASONE VALERATE - betamethasone valerate lotion 0.1% (base equivalent)	2	QL (120 mls/30 days)
betamethasone valerate cream 0.1% (base equivalent)	1	QL (135 grams/30 days)
betamethasone valerate oint 0.1% (base equivalent)	1	QL (135 grams/30 days)
bexarotene gel 1% (Targretin)	1	SP
brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso)	1	
CALCIPOTRIENE - calcipotriene soln 0.005% (50 mcg/ml)	2	
calcipotriene cream 0.005%	1	
calcipotriene oint 0.005%	1	
calcipotriene-betamethasone dipropionate oint 0.005-0.064%	1	
calcipotriene-betamethasone dipropionate susp 0.005-0.064% (Taclonex)	1	
CALCITRIOL - calcitriol oint 3 mcg/gm	2	
CIBINQO - abrocitinib tab 50 mg, 100 mg, 200 mg	2	SP
ciclopirox gel 0.77%	1	
ciclopirox olamine cream 0.77% (base equiv)	1	
ciclopirox olamine susp 0.77% (base equiv)	1	
ciclopirox shampoo 1%	1	
ciclopirox solution 8% (Penlac Nail Lacquer)	1	
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	1	
clindamycin phosphate foam 1%	1	
clindamycin phosphate gel 1% (once-daily) (Clindagel)	1	
clindamycin phosphate gel 1% (twice-daily)	1	
clindamycin phosphate lotion 1% (Cleocin-t)	1	
clindamycin phosphate soln 1%	1	
clindamycin phosphate swab 1%	1	
clindamycin phosphate-benzoyl peroxide gel 1-5%	1	
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% (Acanya)	1	
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (Onexton)	1	
clindamycin phosphate-tretinoin gel 1.2-0.025% (Ziana)	1	

Drug Name	Drug Tier	Requirements/Limits
clobetasol propionate cream 0.05%	1	QL (210 grams/28 days)
clobetasol propionate emollient base cream 0.05%	1	QL (210 grams/28 days)
clobetasol propionate emulsion foam 0.05%	1	QL (200 grams/28 days)
clobetasol propionate gel 0.05%	1	QL (210 grams/28 days)
clobetasol propionate shampoo 0.05% (Clobex)	1	QL (236 mls/30 days)
clobetasol propionate soln 0.05%	1	QL (200 mls/28 days)
clocortolone pivalate cream 0.1% (Cloderm)	1	QL (135 grams/30 days)
clotrimazole cream 1%	1	OTC
clotrimazole soln 1%	1	OTC
clotrimazole w/ betamethasone cream 1-0.05%	1	
CLOTRIMAZOLE/BETAMETHASON - clotrimazole w/ betamethasone lotion 1-0.05%	2	
CONDYLOX - podofilox gel 0.5%	2	
CROTAN - crotamiton lotion 10%	2	
dapsone gel 7.5% (Aczone)	1	
DESONIDE - desonide gel 0.05%	2	QL (120 grams/30 days)
DESOXIMETASONE - desoximetasone gel 0.05%	2	QL (120 grams/30 days)
desoximetasone cream 0.25%	1	QL (120 grams/30 days)
desoximetasone spray 0.25% (Topicort)	1	QL (100 mls/30 days)
diclofenac sodium (actinic keratoses) gel 3%	1	
diclofenac sodium soln 1.5%	1	QL (2 bottles/30 days)
doxepin hcl cream 5% (Prudoxin)	1	
DUPIXENT - dupilumab subcutaneous soln auto-injector 200 mg/1.14ml, 300 mg/2ml	2	SP
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml	2	SP
EBGLYSS - lebrikizumab-lbkz subcutaneous soln auto-inject 250 mg/2ml	2	LA, SP
EBGLYSS - lebrikizumab-lbkz solution prefilled syringe 250 mg/2ml	2	LA, SP
econazole nitrate cream 1%	1	
ERY - erythromycin pads 2%	2	
ERYTHROMYCIN - erythromycin gel 2%	1	
erythromycin soln 2%	1	
fluocinolone acetonide cream 0.025% (Synalar)	1	QL (120 grams/30 days)
fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)	1	QL (118.28 ml/30 days)
fluocinolone acetonide oint 0.025% (Synalar)	1	QL (120 grams/30 days)
fluocinonide soln 0.05%	1	QL (120 mls/30 days)
FLUOROURACIL - fluorouracil soln 2%	2	
fluorouracil cream 5%	1	
fluorouracil soln 5%	1	
fluticasone propionate cream 0.05%	1	QL (120 grams/30 days)
fluticasone propionate oint 0.005%	1	QL (120 grams/30 days)

Drug Name	Drug Tier	Requirements/Limits
gentamicin sulfate cream 0.1%	1	
gentamicin sulfate oint 0.1%	1	
HALCINONIDE - halcinonide soln 0.1%	2	QL (120 mls/30 days)
halobetasol propionate foam 0.05% (Lexette)	1	QL (200 grams/28 days)
HYDROCORTISONE - hydrocortisone soln 2.5%	2	QL (120 mls/30 days)
HYDROCORTISONE - hydrocortisone lotion 2%	2	QL (118.4 ml/30 days)
HYDROCORTISONE - hydrocortisone lotion 2.5%	2	QL (118 mls/30 days)
hydrocortisone butyrate lotion 0.1%	1	QL (118 mls/30 days)
hydrocortisone cream 1%, 2.5%	1	OTC, QL (454 grams/30 days)
hydrocortisone oint 1%	1	OTC, QL (453.6 grams/30 days)
hydrocortisone oint 2.5%	1	QL (454 grams/30 days)
imiquimod cream 3.75% (Zyclara)	1	
imiquimod cream 5%	1	
isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Absorica)	1	
ivermectin cream 1% (Soolantra)	1	
ketoconazole cream 2%	1	
ketoconazole foam 2%	1	
ketoconazole shampoo 2%	1	
lactic acid (ammonium lactate) cream 12%	1	OTC
lactic acid (ammonium lactate) lotion 12%	1	OTC
lidocaine hcl soln 4%	1	
lidocaine hcl urethral/mucosal gel prefilled syringe 2%	1	
LIDOCAINE HYDROCHLORIDE J - lidocaine hcl urethral/ mucosal gel 2%	2	
lidocaine oint 5%	1	
lidocaine patch 5% (Lidoderm)	1	
lidocaine-prilocaine cream 2.5-2.5%	1	
malathion lotion 0.5% (Ovide)	1	
METHOXSALEN - methoxsalen rapid cap 10 mg	2	
metronidazole cream 0.75% (Metrocream)	1	
metronidazole gel 0.75%	1	
metronidazole gel 1% (Metrogel)	1	
metronidazole lotion 0.75% (Metrolotion)	1	
mometasone furoate cream 0.1%	1	QL (135 grams/30 days)
mometasone furoate oint 0.1%	1	QL (135 grams/30 days)
mometasone furoate solution 0.1% (lotion)	1	QL (120 mls/30 days)
mupirocin calcium cream 2%	1	
mupirocin oint 2%	1	
naftifine hcl cream 2%	1	
naftifine hcl gel 2% (Naftin)	1	
NAFTIFINE HYDROCHLORIDE - naftifine hcl cream 1%	2	
nystatin cream 100000 unit/gm	1	

Drug Name	Drug Tier	Requirements/Limits
nystatin oint 100000 unit/gm	1	
nystatin topical powder 100000 unit/gm	1	
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	1	
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	1	
penciclovir cream 1% (Denavir)	1	
permethrin cream 5% (Elimite)	1	
pimecrolimus cream 1% (Elidel)	1	
PODOFILOX - podofilox soln 0.5%	2	
podofilox gel 0.5% (Condylox)	1	
PR CREAM - dermatological products misc - kit	2	
PRUCLAIR - dermatological products misc - cream	2	
PRUDOXIN - doxepin hcl cream 5%	2	
PRURADIK - crotamiton lotion 10%	2	
SELARSDI - ustekinumab-aekn soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	2	SP
SELARSDI - ustekinumab-aekn subcutaneous soln 45 mg/0.5ml	2	SP
selenium sulfide lotion 2.5%	1	
silver sulfadiazine cream 1% (Silvadene)	1	
SKYRIZI - risankizumab-rzaa soln prefilled syringe 150 mg/ml	2	SP
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	2	SP
SOTYKTU - deucravacitinib tab 6 mg	2	SP
SPINOSAD - spinosad susp 0.9%	2	
STELARA - ustekinumab soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	2	SP
STELARA - ustekinumab inj 45 mg/0.5ml	2	SP
sulfacetamide sodium lotion 10% (acne) (Klaron)	1	
tacrolimus oint 0.03%, 0.1%	1	
TALTZ - ixekizumab subcutaneous soln auto-injector 80 mg/ml	2	LA, SP
TALTZ - ixekizumab subcutaneous soln prefilled syringe 20 mg/0.25ml, 40 mg/0.5ml, 80 mg/ml	2	LA, SP
tavaborole soln 5%	1	
tazarotene cream 0.05%, 0.1% (Tazorac)	1	
tazarotene gel 0.05%, 0.1% (Tazorac)	1	
TAZORAC - tazarotene cream 0.05%	2	
TAZORAC - tazarotene gel 0.05%, 0.1%	2	
TREMFYA - guselkumab soln pen-injector 100 mg/ml	2	SP
TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	2	SP
TREMFYA PEN - guselkumab soln auto-injector 100 mg/ml	2	SP
tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)	1	
tretinoin gel 0.01%, 0.025% (Retin-a)	1	
tretinoin gel 0.05% (Atralin)	1	
tretinoin microsphere gel 0.08% (Retin-a micro pump)	1	
triamcinolone acetonide cream 0.025%, 0.1%, 0.5%	1	QL (454 grams/30 days)

Drug Name	Drug Tier	Requirements/Limits
triamcinolone acetonide lotion 0.025%, 0.1%	1	QL (120 mls/30 days)
triamcinolone acetonide oint 0.025%, 0.1%	1	QL (454 grams/30 days)
triamcinolone acetonide oint 0.05%	1	QL (430 grams/30 days)
triamcinolone acetonide oint 0.5%	1	QL (120 grams/30 days)
USTEKINUMAB-TTWE - ustekinumab-ttwe soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	2	SP
YESINTEK - ustekinumab-kfce soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	2	SP
YESINTEK - ustekinumab-kfce subcutaneous soln 45 mg/0.5ml	2	SP
MISCELLANEOUS PRODUCTS		
ANTIDOTES		
CHEMET - succimer cap 100 mg	2	
deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle)	1	SP
deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (Exjade)	1	SP
deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu)	1	SP
deferiprone tab 500 mg	1	SP
deferiprone tab 1000 mg (Ferriprox)	1	SP
deferoxamine mesylate for inj 500 mg (Desferal)	1	
deferoxamine mesylate for inj 2 gm	1	
flumazenil iv soln 0.5 mg/5ml (0.1 mg/ml), 1 mg/10ml (0.1 mg/ml)	1	
fomepizole inj 1 gm/ml (for iv infusion)	1	
NALMEFENE HYDROCHLORIDE - nalmefene hcl inj 1 mg/ml (base equiv)	2	
naloxone hcl inj 0.4 mg/ml, 4 mg/10ml	1	
naloxone hcl soln prefilled syringe 0.4 mg/ml, 2 mg/2ml	1	
NALOXONE HYDROCHLORIDE - naloxone hcl soln cartridge 0.4 mg/ml	2	
naltrexone hcl tab 50 mg	1	
NARCAN - naloxone hcl nasal spray 4 mg/0.1ml	2	OTC
SODIUM THIOSULFATE - sodium thiosulfate iv soln 250 mg/ml (25%)	2	
DIAGNOSTIC PRODUCTS		
adenosine iv soln 3 mg/ml (diagnostic)	1	
CANDIN - candida albicans skin test antigen	2	
cosyntropin for inj 0.25 mg (Cortrosyn)	1	
DIPYRIDAMOLE - dipyridamole iv soln 5 mg/ml	2	
FREESTYLE INSULINX BLOOD - glucose blood test strip	2	DE, OTC, QL (204 strips/30 days)
FREESTYLE LITE TEST STRIP - glucose blood test strip	2	DE, OTC, QL (204 strips/30 days)
FREESTYLE PRECISION NEO B - glucose blood test strip	2	DE, OTC, QL (204 strips/30 days)
FREESTYLE TEST STRIPS - glucose blood test strip	2	DE, OTC, QL (204 strips/30 days)
OPTIUMEZ TEST STRIPS - glucose blood test strip	2	DE, OTC, QL (204 strips/30 days)
PRECISION XTRA BLOOD GLUC - glucose blood test strip	2	DE, OTC, QL (204 strips/30 days)

Drug Name	Drug Tier	Requirements/Limits
MEDICAL DEVICES		
AIMSCO LUBRICATED - condoms latex lubricated	2	OTC
CAYA - diaphragm arc-spring	2	
CONDOMS - condoms - male	2	OTC
DEXCOM G6 RECEIVER - continuous glucose system receiver	2	DE
DEXCOM G6 SENSOR - continuous glucose system sensor	2	DE
DEXCOM G6 TRANSMITTER - continuous glucose system transmitter	2	DE
DEXCOM G7 RECEIVER - continuous glucose system receiver	2	DE
DEXCOM G7 SENSOR - continuous glucose system sensor	2	DE
DEXCOM G7 15 DAY SENSOR - continuous glucose system sensor	2	DE
DUREX EXTRA SENSITIVE THI - condoms latex lubricated	2	OTC
DUREX REALFEEL NON-LATEX - condoms non-latex lubricated	2	OTC
DUREX TROPICAL - condoms latex lubricated	2	OTC
FANTASY LUBRICATED - condoms latex lubricated	2	OTC
FANTASY LUBRICATED/SPERMI - condoms latex lubricated	2	OTC
FC2 FEMALE CONDOM - condoms - female	2	OTC
FEMCAP - cervical cap 22 mm, 26 mm, 30 mm	2	
FREESTYLE CONTROL SOLUTIO - blood glucose calibration - liquid	2	DE, OTC
FREESTYLE FREEDOM LITE - blood glucose monitoring kit w/ device	2	DE, OTC
FREESTYLE LANCETS - lancets	2	DE, OTC
FREESTYLE LIBRE 14 DAY/RE - continuous glucose system receiver	2	DE
FREESTYLE LIBRE 14 DAY/SE - continuous glucose system sensor	2	DE
FREESTYLE LIBRE 2 PLUS/SE - continuous glucose system sensor	2	DE
FREESTYLE LIBRE 2/READER/ - continuous glucose system receiver	2	DE
FREESTYLE LIBRE 2/SENSOR/ - continuous glucose system sensor	2	DE
FREESTYLE LIBRE 3 PLUS/SE - continuous glucose system sensor	2	DE
FREESTYLE LIBRE 3/READER/ - continuous glucose system receiver	2	DE
FREESTYLE LIBRE 3/SENSOR/ - continuous glucose system sensor	2	DE
FREESTYLE LITE BLOOD GLUC - blood glucose monitoring devices	2	DE, OTC
FREESTYLE LITE BLOOD GLUC - blood glucose monitoring kit w/ device	2	DE, OTC
FREESTYLE PRECISION NEO B - blood glucose monitoring kit w/ device	2	DE, OTC

Drug Name	Drug Tier	Requirements/Limits
FREESTYLE UNISTICK II LAN - lancets	2	DE, OTC
INSULIN PEN NEEDLES - VARIOUS	2	DE, OTC
INSULIN SYRINGES - VARIOUS	2	DE, OTC
KAMELEON LUBRICATED - condoms latex lubricated	2	OTC
KIMONO COLORS - condoms latex lubricated	2	OTC
KIMONO LUBRICATED - condoms latex lubricated	2	OTC
KIMONO MAXX/LARGE FLARE - condoms latex lubricated	2	OTC
KIMONO MICRO THIN - condoms latex non-lubricated	2	OTC
KIMONO MICRO THIN PLUS SP - condoms latex lubricated	2	OTC
KIMONO PLUS SPERMICIDE LU - condoms latex lubricated	2	OTC
KIMONO PLUS SPERMICIDE/LU - condoms latex lubricated	2	OTC
KIMONO PS LUBRICATED - condoms latex lubricated	2	OTC
KIMONO PS PLUS SPERMICIDE - condoms latex lubricated	2	OTC
KIMONO SENSATION LUBRICAT - condoms latex lubricated	2	OTC
KIMONO SENSATION PLUS SPE - condoms latex lubricated	2	OTC
KIMONO SPECIAL - condoms latex lubricated	2	OTC
LIVE BETTER ADVANCED LANC - lancet devices	2	DE, OTC
MAXX LUBRICATED - condoms latex lubricated	2	OTC
MAXX PLUS SPERMICIDE LUBR - condoms latex lubricated	2	OTC
MEDISENSE GLUCOSE KETONE - blood glucose calibration - liquid	2	DE, OTC
MEDISENSE HIGH/MID/LOW CO - blood glucose calibration - liquid	2	DE, OTC
OMNIFLEX DIAPHRAGM - diaphragms	2	
OMNIPOD DASH INTRO KIT (G - insulin infusion disposable pump kit	2	DE
OMNIPOD DASH PODS (GEN 4) - insulin infusion disposable pump reservoir	2	DE
OMNIPOD 5 DEXCOM G7G6 INT - insulin infusion disposable pump kit	2	DE
OMNIPOD 5 DEXCOM G7G6 POD - insulin infusion disposable pump reservoir	2	DE
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump reservoir	2	DE
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump kit	2	DE
PRECISION GLUCOSE KETONE - blood glucose calibration - liquid	2	DE, OTC
PRECISION XTRA - blood glucose/ketone monitoring devices	2	DE, OTC
QC ADVANCED LANCING DEVIC - lancet devices	2	DE, OTC
REALITY LATEX CONDOMS/LUB - condoms latex lubricated	2	OTC
REALITY LATEX/ULTRA TEXTU - condoms latex lubricated	2	OTC
REALITY LATEX/ULTRA THIN - condoms latex lubricated	2	OTC
TROJAN BARESKIN - condoms latex lubricated	2	OTC
TROJAN ENZ - condoms latex non-lubricated	2	OTC
TROJAN MAGNUM - condoms latex lubricated	2	OTC

Drug Name	Drug Tier	Requirements/Limits
TROJAN ULTRA RIBBED/LUBRI - condoms latex lubricated	2	OTC
TROJAN ULTRA THIN LUBRICA - condoms latex lubricated	2	OTC
TROJAN ULTRA THIN/SPERMIC - condoms latex lubricated	2	OTC
TROJAN-ENZ LUBRICATED - condoms latex lubricated	2	OTC
TROJAN-ENZ W/SPERMICIDAL - condoms latex lubricated	2	OTC
TRUE COVER - condoms latex lubricated	2	OTC
TRUSTEX COLOR CONDOMS + L - condoms latex lubricated	2	OTC
TRUSTEX LUBRICATED - condoms latex lubricated	2	OTC
TRUSTEX LUBRICATED EXTRA - condoms latex lubricated	2	OTC
TRUSTEX LUBRICATED/RIBBED - condoms latex lubricated	2	OTC
TRUSTEX LUBRICATED/SPERMI - condoms latex lubricated	2	OTC
TRUSTEX NATURAL CONDOMS + - condoms latex lubricated	2	OTC
TRUSTEX NON-LUBRICATED - condoms latex non-lubricated	2	OTC
TRUSTEX WITH NONOXYNOL-9/ - condoms latex lubricated	2	OTC
TRUSTEX/RIA LUBRICATED - condoms latex lubricated	2	OTC
TRUSTEX/RIA LUBRICATED SP - condoms latex lubricated	2	OTC
TRUSTEX/RIA LUBRICATED/SP - condoms latex lubricated	2	OTC
TRUSTEX/RIA NON-LUBRICATE - condoms latex non-lubricated	2	OTC
TWIIST REFILL KIT - insulin infusion disposable pump reservoir kit	2	DE
TWIIST REFILL KIT/INFUSIO - insulin infusion disposable pump reservoir/infus set kit	2	DE
TWIIST STARTER KIT - insulin infusion disposable pump kit	2	DE
WIDE-SEAL SILICONE DIAPHR - diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 85 mm, 90 mm, 95 mm	2	
ASSORTED CLASSES		
AZATHIOPRINE - azathioprine sodium for inj 100 mg	2	
azathioprine tab 50 mg (Imuran)	1	
azathioprine tab 75 mg, 100 mg	1	
CELLCEPT INTRAVENOUS - mycophenolate mofetil hcl for iv soln 500 mg (base equiv)	2	
cyclosporine cap 25 mg, 100 mg (Sandimmune)	1	
cyclosporine modified cap 25 mg, 100 mg (Neoral)	1	
cyclosporine modified cap 50 mg	1	
cyclosporine modified oral soln 100 mg/ml (Neoral)	1	
DELFLEX-LC/1.5% DEXTROSE - peritoneal dialysis solutions 344 mosm/l	2	
DELFLEX-LC/2.5% DEXTROSE - peritoneal dialysis solutions 394 mosm/l	2	
DELFLEX-LC/4.25% DEXTROSE - peritoneal dialysis solutions 483 mosm/l	2	
DELFLEX-SM/1.5% DEXTROSE - peritoneal dialysis solutions 347 mosm/l	2	
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)	1	
lactated ringer's for irrigation	1	

Drug Name	Drug Tier	Requirements/Limits
lenalidomide caps 2.5 mg (Revlimid)	1	SP
lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)	1	SP
mycophenolate mofetil cap 250 mg (Cellcept)	1	
mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)	1	
mycophenolate mofetil tab 500 mg (Cellcept)	1	
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)	1	
penicillamine cap 250 mg (Cuprimine)	1	SP
penicillamine tab 250 mg (Depen titratabs)	1	SP
REVLIMID - lenalidomide caps 2.5 mg	2	LA, SP
REVLIMID - lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg	2	LA, SP
RINGERS IRRIGATION - ringer's solution for irrigation	2	
SANDIMMUNE - cyclosporine iv soln 50 mg/ml	2	
sirolimus oral soln 1 mg/ml	1	
sirolimus tab 0.5 mg, 1 mg, 2 mg	1	
sodium polystyrene sulfonate powder	1	
sodium polystyrene sulfonate susp 15 gm/60ml	1	
SPS - sodium polystyrene sulfonate rectal susp 30 gm/120ml	2	
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)	1	
THALOMID - thalidomide cap 50 mg, 100 mg	2	LA, SP
trientine hcl cap 250 mg (Syprine)	1	SP
VIJOICE - alpelisib (pros) tab therapy pack 50 mg daily dose, 125 mg daily dose	2	SP
VIJOICE - alpelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	2	SP
water for irrigation, sterile irrigation soln	1	

INDEX

A

E

L

Y

Z

55 Water Street, New York, New York 10041-8190 | emblemhealth.com

usa-medicare-formulary-2026-emblemhealth 1/26