EmblemHealth®

EmblemHealth Large Group Generic Drug List

Drug List ID – LGEN

(To find your plan's drug list, 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.)

2027 Drug List (List of Covered Drugs)

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

This drug list was updated on **Jan. 1, 2027**. To reach pharmacy customer service, please call **877-793-6253** (TTY: **711**). Our hours are 8 a.m. to 6 p.m., Monday through Friday from, and 10 a.m. to 1 p.m., Saturday and Sunday. A representative will be happy to help.

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.

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2027 Drug List (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 drug list. It is up to date as of **Jan. 1, 2027**. 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 drug list?

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 drug list?

You can look for your drug using the index. This starts on page 52. 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 LARGE GROUP GENERIC DRUG LIST

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

Tier	Explanation
ACA	$0 cost share preventive drugs (there may be some limits on these drugs; see below).
Tier 1	Generic

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 generic drug.

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

Are there any limitations on my coverage?

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

List of abbreviations and what these terms mean to you

ACA: Affordable Care Act. Under this health care reform law, if you qualify, you can get your drug at no cost if it is right for your age and condition, and used properly.

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 group's renewal date.

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

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.

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. 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 Pharmacy Customer Service:

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.

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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 פראַוויידינג אינפאָרמאַציע אין צוטריטלעך פֿאָרמאַטירונגען זענען אויך בנימצא פריי. רופן **877-411-3625** (TTY: **711**) אָדער רעדן מיט דיין טרעגער.

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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 (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 er 12hr 1000-62.5 mg	1	
amoxicillin & k clavulanate tab 250-125 mg, 500-125 mg, 875-125 mg	1	
ampicillin cap 500 mg	1	
dicloxacillin sodium cap 250 mg, 500 mg	1	
penicillin v potassium tab 250 mg, 500 mg	1	
CEPHALOSPORINS		
cefadroxil cap 500 mg	1	
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	1	
cefdinir cap 300 mg	1	
cefdinir for susp 125 mg/5ml, 250 mg/5ml	1	
cefixime cap 400 mg	1	
cefixime for susp 200 mg/5ml	1	
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	
cefuroxime axetil tab 250 mg, 500 mg	1	
cephalexin cap 250 mg, 500 mg, 750 mg	1	
cephalexin for susp 125 mg/5ml, 250 mg/5ml	1	
MACROLIDES		
azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)	1	
azithromycin tab 250 mg (Zithromax z-pak)	1	
azithromycin tab 500 mg (Zithromax)	1	
azithromycin tab 600 mg	1	
clarithromycin tab er 24hr 500 mg	1	
clarithromycin tab 250 mg, 500 mg	1	
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	
fidaxomicin tab 200 mg (Dificid)	1	
TETRACYCLINES		

Drug Name	Drug Tier	Requirements/Limits
demeclocycline hcl tab 150 mg, 300 mg	1	
doxycycline hyclate cap 50 mg, 100 mg	1	
doxycycline hyclate tab 20 mg, 100 mg	1	
doxycycline monohydrate cap 50 mg, 100 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	
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	
levofloxacin oral soln 25 mg/ml	1	
levofloxacin tab 250 mg, 500 mg, 750 mg	1	
moxifloxacin hcl tab 400 mg (base equiv)	1	
AMINOGLYCOSIDES		
neomycin sulfate tab 500 mg	1	
tobramycin nebu soln 300 mg/5ml (Tobi)	1	SP
tobramycin nebu soln 300 mg/4ml (Bethkis)	1	SP
SULFONAMIDES		
sulfadiazine tab 500 mg	1	
ANTIMYCOBACTERIAL AGENTS		
ethambutol hcl tab 100 mg, 400 mg	1	
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	
rifapentine tab 150 mg (Priftin)	1	
ANTIFUNGALS		
fluconazole for susp 10 mg/ml	1	
fluconazole for susp 40 mg/ml (Diflucan)	1	
fluconazole tab 50 mg, 150 mg, 200 mg	1	
fluconazole tab 100 mg (Diflucan)	1	
flucytosine cap 250 mg, 500 mg (Ancobon)	1	
griseofulvin microsize susp 125 mg/5ml	1	
griseofulvin microsize tab 500 mg	1	
griseofulvin ultramicrosize tab 125 mg, 250 mg	1	
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	PA
posaconazole tab delayed release 100 mg (Noxafil)	1	PA
terbinafine hcl tab 250 mg	1	
voriconazole for susp 40 mg/ml (Vfend)	1	PA
voriconazole tab 50 mg (Vfend)	1	PA
voriconazole tab 200 mg	1	PA
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 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	1	ACA, LA, SP
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)
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 200-25 mg	1	ACA, 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)
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 (Truvada)	1	QL (30 tablets/30 days)
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (Truvada)	1	ACA, QL (30 tablets/30 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)
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)

Drug Name	Drug Tier	Requirements/Limits
maraviroc tab 150 mg (Selzentry)	1	QL (60 tablets/30 days)
maraviroc tab 300 mg (Selzentry)	1	QL (120 tablets/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)
rilpivirine hcl tab 25 mg (base equivalent) (Edurant)	1	QL (30 tablets/30 days)
ritonavir tab 100 mg (Norvir)	1	QL (360 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	
YEZTUGO - lenacapavir sodium tab 300 mg (prophylaxis)	1	ACA, SP
YEZTUGO - lenacapavir sodium subcut soln 463.5 mg/1.5ml (prophylaxis)	1	ACA, SP
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 tab 500 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 tab 3 mg (Stromectol)	1	
praziquantel tab 600 mg (Biltricide)	1	
ANTI-INFECTIVE AGENTS - MISC.		
atovaquone susp 750 mg/5ml (Mepron)	1	
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	
dapsone tab 25 mg, 100 mg	1	
fosfomycin tromethamine powd pack 3 gm (base equivalent)	1	
linezolid for susp 100 mg/5ml (Zyvox)	1	PA
linezolid tab 600 mg (Zyvox)	1	

Drug Name	Drug Tier	Requirements/Limits
methenamine hippurate tab 1 gm (Hiprex)	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	PA
pentamidine isethionate for nebulization soln 300 mg (Nebupent)	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 tab 100 mg (Trimethoprim)	1	
vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent) (Vancocin)	1	
vancomycin hcl for oral soln 25 mg/ml (base equivalent), 50 mg/ml (base equivalent) (Firvanq)	1	
BIOLOGICALS		
VACCINES		
ABRYSVO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	1	ACA
ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj	1	ACA
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	1	ACA
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	1	ACA
CAPVAXIVE - pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	1	ACA
COMIRNATY 2026-27 - covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	1	ACA
COMIRNATY/5-11Y/2026-27 - covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	1	ACA
ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	1	ACA
ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	1	ACA
FLUAD 2026-2027 - influenza vac type a&b surface ant adj susp pref syr 0.5 ml	1	ACA
FLUARIX 2026-2027 - influenza virus vaccine split pf susp pref syringe 0.5 ml	1	ACA
FLUBLOK 2026-2027 - influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	1	ACA
FLUCELVAX 2026-2027 - influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	1	ACA

Drug Name	Drug Tier	Requirements/Limits
FLULAVAL 2026-2027 - influenza virus vaccine split pf susp pref syringe 0.5 ml	1	ACA
FLUMIST NASAL VACCINE 202 - influenza virus vaccine live intranasal liquid	1	ACA
FLUZONE HIGH-DOSE 2026-20 - influenza virus vac split high-dose pf susp pref syr 0.5ml	1	ACA
FLUZONE 2026-2027 - influenza virus vaccine split pf susp pref syringe 0.5 ml	1	ACA
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac susp pref syr	1	ACA
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac im susp	1	ACA
HAVRIX - hepatitis a vaccine susp prefilled syr 720 el unit/0.5ml, 1440 el unit/ml	1	ACA
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	1	ACA
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg	1	ACA
IPOL INACTIVATED IPV - poliovirus vaccine, ipv inj susp	1	ACA
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	1	ACA
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	1	ACA
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	1	ACA
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln	1	ACA
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj	1	ACA
MNEXSPIKE COVID-19 VACCIN - covid-19 mrna vaccine-moderna im susp pref syr 10 mcg/0.2ml	1	ACA
MRESVIA - rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	1	ACA
NUVAXOVID COVID-19 VACCIN - covid-19 subunit vacc-novavax im susp pref syr 5 mcg/0.5ml	1	ACA
PEDVAXHIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	1	ACA
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	1	ACA
PENMENVY - meningococcal acwy (oligo conj)-mening b (rcmb) vacc for inj	1	ACA
PNEUMOVAX 23 - pneumococcal vaccine polyvalent soln pref syr 25 mcg/0.5ml	1	ACA
PREVNAR 20 - pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	1	ACA
PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp	1	ACA
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	1	ACA

Drug Name	Drug Tier	Requirements/Limits
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	1	ACA
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	1	ACA
ROTARIX - rotavirus vaccine, live oral susp	1	ACA
ROTATEQ - rotavirus vaccine, live oral pentavalent soln	1	ACA
SHINGRIX - zoster vac recomb adjuvanted im susp pref syr 50 mcg/0.5ml	1	ACA
SPIKEVAX COVID-19 VACCINE - covid-19 mrna vac 6mo-11yr-moderna im susp pfs 25 mcg/0.25ml	1	ACA
SPIKEVAX COVID-19 VACCINE - covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	1	ACA
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	1	ACA
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	1	ACA
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	1	ACA
VAQTA - hepatitis a vaccine susp prefilled syr 25 unit/0.5ml, 50 unit/ml	1	ACA
VARIVAX - varicella virus vac live for inj 1350 pfu/0.5ml	1	ACA
VAXNEUVANCE - pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	1	ACA
TOXOIDS		
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	1	ACA
ADACEL - tet-diph-acell pertuss ad pref syr 5-2-15.5 lf-mcg/0.5ml	1	ACA
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	1	ACA
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	1	ACA
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	1	ACA
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	1	ACA
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	1	ACA
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	1	ACA
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	1	ACA
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	1	ACA
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lf/0.5ml	1	ACA
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	1	ACA
PASSIVE IMMUNIZING AGENTS		
BEYFORTUS - nirsevimab-alip im soln prefilled syringe 50 mg/0.5ml, 100 mg/ml	1	ACA, SP
ENFLONSIA - clesrovimab-cfor im soln prefilled syringe 105 mg/0.7ml	1	ACA, SP
ANTINEOPLASTIC AGENTS		

Drug Name	Drug Tier	Requirements/Limits
ANTINEOPLASTICS		
abiraterone acetate tab 250 mg (Zytiga)	1	PA, QL (120 tablets/30 days), SP
abiraterone acetate tab 500 mg (Zytiga)	1	PA, QL (60 tablets/30 days), SP
anastrozole tab 1 mg (Arimidex)	1	ACA
bexarotene cap 75 mg (Targretin)	1	PA, SP
bicalutamide tab 50 mg (Casodex)	1	SP
bosutinib tab 100 mg (Bosulif)	1	PA, QL (90 tablets/30 days), SP
bosutinib tab 400 mg, 500 mg (Bosulif)	1	PA, QL (30 tablets/30 days), SP
capecitabine tab 150 mg, 500 mg (Xeloda)	1	PA, SP
cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)	1	SP
dasatinib tab 20 mg (Sprycel)	1	PA, QL (90 tablets/30 days), SP
dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel)	1	PA, QL (30 tablets/30 days), SP
erlotinib hcl tab 25 mg (base equivalent)	1	PA, QL (60 tablets/30 days), SP
erlotinib hcl tab 100 mg (base equivalent) (Tarceva)	1	PA, QL (30 tablets/30 days), SP
erlotinib hcl tab 150 mg (base equivalent)	1	PA, QL (30 tablets/30 days), SP
etoposide cap 50 mg (Vepesid)	1	SP
everolimus tab for oral susp 2 mg, 5 mg (Afinitor disperz)	1	PA, QL (60 tablets/30 days), SP
everolimus tab for oral susp 3 mg (Afinitor disperz)	1	PA, QL (90 tablets/30 days), SP
everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)	1	PA, QL (30 tablets/30 days), SP
exemestane tab 25 mg (Aromasin)	1	ACA
gefitinib tab 250 mg (Iressa)	1	PA, QL (30 tablets/30 days), SP
hydroxyurea cap 500 mg (Hydrea)	1	SP
imatinib mesylate tab 100 mg (base equivalent) (Gleevec)	1	PA, QL (90 tablets/30 days), SP
imatinib mesylate tab 400 mg (base equivalent) (Gleevec)	1	PA, QL (60 tablets/30 days), SP
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)	1	PA, QL (180 tablets/30 days), SP
letrozole tab 2.5 mg (Femara)	1	
leucovorin calcium tab 5 mg, 15 mg	1	FF, PA, QL (180 tablets/30 days)
leucovorin calcium tab 25 mg	1	FF, PA, QL (360 tablets/30 days)
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	1	SP
lomustine cap 10 mg, 40 mg, 100 mg (Gleostine)	1	SP
megestrol acetate susp 40 mg/ml	1	
megestrol acetate tab 20 mg, 40 mg	1	
mercaptopurine susp 2000 mg/100ml (20 mg/ml) (Purixan)	1	SP
mercaptopurine tab 50 mg	1	SP
mesna tab 400 mg (Mesnex)	1	
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	
nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent) (Tasigna)	1	PA, QL (120 capsules/30 days), SP

Drug Name	Drug Tier	Requirements/Limits
pazopanib hcl tab 200 mg (base equiv) (Votrient)	1	PA, QL (120 tablets/30 days), SP
pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg (Pomalyst)	1	PA, QL (21 capsules/28 days), SP
SOLTAMOX - tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	1	ACA
sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)	1	PA, QL (120 tablets/30 days), SP
sunitinib malate cap 12.5 mg (base equivalent) (Sutent)	1	PA, QL (90 capsules/30 days), SP
sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)	1	PA, QL (30 capsules/30 days), SP
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	1	ACA
temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg, 250 mg	1	PA, SP
toremifene citrate tab 60 mg (base equivalent) (Fareston)	1	SP
tretinoin cap 10 mg	1	PA, SP
ENDOCRINE AND METABOLIC DRUGS		
CORTICOSTEROIDS		
budesonide delayed release particles cap 3 mg	1	
dexamethasone elixir 0.5 mg/5ml	1	
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	1	
fludrocortisone acetate tab 0.1 mg	1	
hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)	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)	1	
prednisolone sod phosphate oral soln 5 mg/5ml (base equiv) (Pediapred)	1	
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	1	
prednisolone soln 15 mg/5ml	1	
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	
ANDROGEN-ANABOLIC		
danazol cap 50 mg, 100 mg, 200 mg	1	PA
methyltestosterone cap 10 mg	1	PA, QL (600 capsules/30 days)
testosterone cypionate im inj in oil 100 mg/ml	1	PA, QL (1 vial/28 days)
testosterone cypionate im inj in oil 200 mg/ml	1	PA, QL (10 mls/28 days)
testosterone td gel 25 mg/2.5gm (1%)	1	PA, QL (60 packets/30 days)
testosterone td gel 50 mg/5gm (1%) (Testim)	1	PA, QL (60 packets/30 days)
testosterone td gel 12.5 mg/act (1%)	1	PA, QL (4 bottles/30 days)
testosterone td gel 20.25 mg/act (1.62%) (Androgel pump)	1	PA, QL (2 bottles/30 days)
testosterone td soln 30 mg/act	1	PA, QL (2 bottles/30 days)

Drug Name	Drug Tier	Requirements/Limits
ESTROGENS		
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	
CONTRACEPTIVES		
ARANELLE - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	1	ACA
DEPO-PROVERA CONTRACEPTIV - medroxyprogesterone acetate im susp 150 mg/ml	1	ACA
DEPO-PROVERA CONTRACEPTIV - medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	1	ACA
DEPO-SUBQ PROVERA 104 - medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	1	ACA
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	ACA
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	ACA
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)	1	ACA
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	1	ACA
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	1	ACA
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	1	ACA
ELLA - ulipristal acetate tab 30 mg	1	ACA
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	1	ACA
KYLEENA - levonorgestrel releasing iud 17.5 mcg/day (19.5 mg total)	1	ACA, LA
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	1	ACA
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	1	ACA
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	1	ACA
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	1	ACA

Drug Name	Drug Tier	Requirements/Limits
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	1	ACA
levonorgestrel tab 1.5 mg	1	ACA
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1	ACA
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	1	ACA
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (Balcoltra)	1	ACA
LILETTA - levonorgestrel iud 20.1 mcg/day (initial) (52 mg total)	1	ACA, LA
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)	1	ACA
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)	1	ACA
MIRENA - levonorgestrel iud 21 mcg/day (initial) (52 mg total)	1	ACA, LA
MIUDELLA - copper iud	1	ACA
NEXPLANON - etonogestrel subdermal implant 68 mg	1	ACA, LA
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	1	ACA
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg	1	ACA
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg, 0.8 mg-25 mcg	1	ACA
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	1	ACA
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg	1	ACA
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg	1	ACA
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	1	ACA
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)	1	ACA
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	1	ACA
norethindrone tab 0.35 mg	1	ACA
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	1	ACA
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	ACA
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	ACA
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1	ACA
NUVARING - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	1	ACA
OPILL - norgestrel tab 0.075 mg	1	ACA
PARAGARD INTRAUTERINE COP - copper iud	1	ACA, LA
SKYLA - levonorgestrel releasing iud 14 mcg/day (13.5 mg total)	1	ACA, LA
VALTYA 1/50 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	1	ACA
VELIVET - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	1	ACA
PROGESTINS		

Drug Name	Drug Tier	Requirements/Limits
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)	1	
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	1	
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose	1	
BD GLUCOSE - glucose chew tab 5 gm	1	
CVS GLUCOSE - glucose chew tab 4 gm (rounded)	1	
dapagliflozin tab 5 mg, 10 mg (Farxiga)	1	QL (30 tablets/30 days)
dapagliflozin-metformin hcl tab er 24hr 5-500 mg, 10-500 mg, 10-1000 mg (Xigduo xr)	1	QL (30 tablets/30 days)
dapagliflozin-metformin hcl tab er 24hr 5-1000 mg (Xigduo xr)	1	QL (60 tablets/30 days)
diazoxide susp 50 mg/ml (Proglycem)	1	
glimepiride tab 1 mg, 2 mg, 4 mg	1	
GLIPIZIDE - glipizide tab 2.5 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 EMERGENCY KIT FO - glucagon hcl for inj 1 mg	1	
glucagon for inj 1 mg	1	
GLUCOSE - glucose oral liquid 15 gm/60ml	1	
GLUCOSE - glucose gel 15 gm/33gm	1	
glucose chew tab 2 gm (carb equiv), 4 gm (rounded)	1	
glucose gel 40%	1	
GLUCOSE LIQUID - glucose oral liquid 15 gm/59ml	1	
glucose-vitamin c chew tab 4-6 gm-mg	1	
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	1	QL (30 tablets/30 days)
GNP GLUCOSE - glucose chew tab 4 gm (rounded)	1	
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	1	
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	1	
GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml	1	
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml	1	
INSTA-GLUCOSE - glucose gel 77.4%	1	
JARDIANCE - empagliflozin tab 10 mg, 25 mg	1	QL (30 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
KROGER GLUCOSE - glucose chew tab 4 gm (rounded)	1	
LEADER GLUCOSE - glucose chew tab 4 gm (rounded)	1	
MEDICINE SHOPPE GLUCOSE - glucose chew tab 4 gm (rounded)	1	
metformin hcl tab er 24hr 500 mg, 750 mg	1	
metformin hcl tab 500 mg, 850 mg, 1000 mg	1	
mifepristone tab 300 mg (Korlym)	1	PA, QL (120 tablets/30 days), SP
MIGLITOL - miglitol tab 25 mg, 50 mg, 100 mg	1	
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	1	PA, QL (4 pens/28 days)
nateglinide tab 60 mg, 120 mg	1	
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 2 mg/dose (8 mg/3ml)	1	PA, QL (1 pen/28 days)
OZEMPIC - semaglutide soln pen-inj 1 mg/dose (4 mg/3ml)	1	PA, QL (3 pens/28 days)
OZEMPIC - semaglutide tab 1.5 mg	1	PA, QL (30 tablets/180 days)
OZEMPIC - semaglutide tab 4 mg, 9 mg	1	PA, QL (30 tablets/30 days)
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)	1	
pioglitazone hcl-metformin hcl tab 15-500 mg	1	
pioglitazone hcl-metformin hcl tab 15-850 mg (Actoplus met)	1	
PREFERRED PLUS GLUCOSE - glucose chew tab 4 gm (rounded)	1	
repaglinide tab 0.5 mg, 1 mg, 2 mg	1	
sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Januvia)	1	QL (30 tablets/30 days)
sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 100-1000 mg (Janumet xr)	1	QL (30 tablets/30 days)
sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg (Janumet xr)	1	QL (60 tablets/30 days)
sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg (Janumet)	1	QL (60 tablets/30 days)
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	1	QL (6 pens/30 days)
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	1	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg	1	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg	1	QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg	1	QL (60 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg, 25-5-1000 mg	1	QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg	1	QL (60 tablets/30 days)
TRUEPLUS GLUCOSE GEL - glucose gel 15 gm/32ml	1	

Drug Name	Drug Tier	Requirements/Limits
TRULICITY - dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml	1	PA, QL (4 pens/28 days)
TRULICITY - dulaglutide soln auto-injector 3 mg/0.5ml, 4.5 mg/0.5ml	1	PA, QL (2 pens/28 days)
WALGREENS GLUCOSE - glucose chew tab 4 gm (rounded)	1	
XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 2.5-1000 mg	1	QL (60 tablets/30 days)
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	1	QL (5 pens/30 days)
Rapid-Acting Insulins		
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	1	QL (10 vials/30 days)
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	1	QL (33 pens/30 days)
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	1	QL (100 mls/30 days)
HUMALOG - insulin lispro soln cartridge 100 unit/ml	1	QL (33 cartridges/30 days)
HUMALOG - insulin lispro inj soln 100 unit/ml	1	QL (100 mls/30 days)
HUMALOG JUNIOR KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	1	QL (33 pens/30 days)
HUMALOG KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	1	QL (33 pens/30 days)
LYUMJEV - insulin lispro-aabc inj 100 unit/ml	1	QL (10 vials/30 days)
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	1	QL (33 pens/30 days)
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-injector 200 unit/ml	1	QL (33 pens/30 days)
NOVOLOG - insulin aspart inj soln 100 unit/ml	1	QL (10 vials/30 days)
NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml	1	QL (33 pens/30 days)
NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml	1	QL (33 cartridges/30 days)
Short-Acting Insulins		
HUMULIN R - insulin regular (human) inj 100 unit/ml	1	QL (100 mls/30 days)
HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen-injector 500 unit/ml	1	QL (100 mls/30 days)
NOVOLIN R - insulin regular (human) inj 100 unit/ml	1	QL (100 mls/30 days)
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml	1	FF, QL (33 pens/30 days)
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml	1	FF, QL (100 mls/30 days)
Intermediate-Acting Insulins		
HUMALOG MIX 50/50 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	1	QL (33 pens/30 days)
HUMALOG MIX 75/25 - insulin lispro prot & lispro inj 100 unit/ml (75-25)	1	QL (10 vials/30 days)
HUMALOG MIX 75/25 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	1	QL (33 pens/30 days)
HUMULIN N - insulin nph (human) (isophane) inj 100 unit/ml	1	QL (10 vials/30 days)

Drug Name	Drug Tier	Requirements/Limits
HUMULIN N KWIKPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	1	QL (33 pens/30 days)
HUMULIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	1	QL (100 mls/30 days)
HUMULIN 70/30 KWIKPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	1	QL (33 pens/30 days)
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml	1	QL (10 vials/30 days)
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	1	QL (33 pens/30 days)
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	1	QL (100 mls/30 days)
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	1	QL (33 pens/30 days)
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	1	QL (10 vials/30 days)
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	1	QL (33 pens/30 days)
Basal Insulins		
INSULIN GLARGINE-YFGN - insulin glargine-yfgn soln pen-injector 100 unit/ml	1	QL (33 pens/30 days)
INSULIN GLARGINE-YFGN - insulin glargine-yfgn inj 100 unit/ml	1	QL (10 vials/30 days)
SEMGLEE - insulin glargine-yfgn soln pen-injector 100 unit/ml	1	QL (33 pens/30 days)
SEMGLEE - insulin glargine-yfgn inj 100 unit/ml	1	QL (10 vials/30 days)
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	1	QL (33 pens/30 days)
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	1	QL (66 pens/30 days)
TRESIBA - insulin degludec inj 100 unit/ml	1	QL (10 vials/30 days)
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	1	QL (33 pens/30 days)
THYROID AGENTS		
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 tab 5 mcg, 25 mcg, 50 mcg (Cytomel)	1	
methimazole tab 5 mg, 10 mg	1	
propylthiouracil tab 50 mg	1	
OXYTOCICS		
methylergonovine maleate tab 0.2 mg	1	
ENDOCRINE and METABOLIC AGENTS - MISC.		
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) inj 200 unit/ml (Miacalcin)	1	

Drug Name	Drug Tier	Requirements/Limits
calcitonin (salmon) nasal soln 200 unit/act	1	
calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol)	1	
carglumic acid soluble tab 200 mg (Carbaglu)	1	PA, SP
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)	1	PA, SP
clomiphene citrate tab 50 mg	1*	
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	
ganirelix acetate soln prefilled syringe 250 mcg/0.5ml (Ganirelix acetate)	1*	PA, QL (5 syringes/30 days), SP
glycerol phenylbutyrate liquid 1.1 gm/ml (Ravicti)	1	FF, PA, 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	1	LA, PA, QL (56 tablets/28 days), SP
JYNARQUE - tolvaptan tab 15 mg	1	LA, PA, QL (60 tablets/30 days), SP
JYNARQUE - tolvaptan tab 30 mg	1	LA, PA, QL (30 tablets/30 days), SP
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	1	
levocarnitine tab 330 mg (Carnitor)	1	
nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)	1	LA, 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
raloxifene hcl tab 60 mg (Evista)	1	ACA
risedronate sodium tab 30 mg	1	
risedronate sodium tab 35 mg, 150 mg (Actonel)	1	
sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)	1	LA, PA, SP
sapropterin dihydrochloride tab 100 mg (Kuvan)	1	LA, PA, SP
sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)	1	PA, SP
sodium phenylbutyrate tab 500 mg (Buphenyl)	1	PA, SP
teriparatide soln pen-inj 560 mcg/2.24ml (Forteo)	1	PA, QL (1 pen/28 days), SP
tolvaptan (hyponatremia) tab 15 mg (Samsca)	1	FF, QL (30 tablets/180 days), SP
tolvaptan (hyponatremia) tab 30 mg (Samsca)	1	FF, QL (60 tablets/180 days), SP
CARDIOVASCULAR AGENTS		
CARDIOTONICS		
digoxin oral soln 0.05 mg/ml (Digoxin)	1	PA
digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)	1	
ANTIANGINAL AGENTS		

Drug Name	Drug Tier	Requirements/Limits
isosorbide dinitrate tab 5 mg (Isordil titradose)	1	
isosorbide dinitrate tab 10 mg, 20 mg, 30 mg	1	
isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg	1	
isosorbide mononitrate tab 10 mg, 20 mg	1	
nitroglycerin oint 2%	1	
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	
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)	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 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 cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)	1	
propranolol hcl oral soln 20 mg/5ml	1	PA, QL (4800 mls/30 days)
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	1	
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	
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	1	
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	1	
diltiazem hcl cap er 12hr 60 mg, 120 mg	1	FF, PA
diltiazem hcl cap er 12hr 90 mg	1	
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 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	

Drug Name	Drug Tier	Requirements/Limits
diltiazem hcl tab er 24hr 120 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	
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 cap 30 mg	1	
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)	1	
verapamil hcl tab er 120 mg, 180 mg, 240 mg	1	
verapamil hcl tab 40 mg, 80 mg, 120 mg	1	
ANTIARRHYTHMICS		
amiodarone hcl tab 100 mg, 200 mg	1	
disopyramide phosphate cap 100 mg, 150 mg (Norpace)	1	
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	
mexiletine hcl cap 150 mg, 200 mg, 250 mg	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	
ANTIHYPERTENSIVES		
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	
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	FF, PA
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	1	
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg	1	

Drug Name	Drug Tier	Requirements/Limits
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	
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	PA, QL (1200 mls/30 days)
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)	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 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 tab 250 mg	1	
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg	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	
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 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	
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	

Drug Name	Drug Tier	Requirements/Limits
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	
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 tab 125 mg, 250 mg	1	
amiloride hcl tab 5 mg	1	
bumetanide tab 0.5 mg (Bumex)	1	
bumetanide tab 1 mg, 2 mg	1	
chlorthalidone tab 25 mg, 50 mg	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	
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 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		
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	
ANTIHYPERLIPIDEMICS		
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent) (Lipitor)	1	ACA
atorvastatin calcium tab 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)	1	
cholestyramine light powder 4 gm/dose (Questran light)	1	
cholestyramine powder 4 gm/dose (Questran)	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	

Drug Name	Drug Tier	Requirements/Limits
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)	1	
fenofibrate micronized cap 67 mg, 134 mg, 200 mg	1	
fenofibrate tab 48 mg, 145 mg (Tricor)	1	
fenofibrate tab 54 mg, 160 mg	1	
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	1	ACA
fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)	1	ACA
gemfibrozil tab 600 mg (Lopid)	1	
lovastatin tab 10 mg, 20 mg, 40 mg	1	ACA
niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic)	1	
pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo)	1	ACA
pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg	1	ACA
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor)	1	ACA
simvastatin tab 5 mg	1	ACA
simvastatin tab 10 mg, 20 mg, 40 mg (Zocor)	1	ACA
simvastatin tab 80 mg	1	
VASCEPA - icosapent ethyl cap 0.5 gm	1	FF, PA, QL (240 capsules/30 days)
VASCEPA - icosapent ethyl cap 1 gm	1	FF, PA, QL (120 capsules/30 days)
CARDIOVASCULAR AGENTS - MISC.		
ambrisentan tab 5 mg, 10 mg (Letairis)	1	LA, PA, QL (30 tablets/30 days), SP
bosentan tab for oral susp 32 mg (Tracleer)	1	PA, QL (120 tablets/30 days), SP
bosentan tab 62.5 mg, 125 mg (Tracleer)	1	PA, QL (60 tablets/30 days), SP
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	PA, QL (60 tablets/30 days)
macitentan tab 10 mg (Opsumit)	1	PA, QL (30 tablets/30 days), SP
riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg (Adempas)	1	PA, QL (90 tablets/30 days)
sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg (Entresto)	1	
sildenafil citrate for suspension 10 mg/ml	1	PA, QL (2 bottles/30 days), SP
sildenafil citrate tab 20 mg (Revatio)	1	PA, QL (90 tablets/30 days), SP
tadalafil tab 20 mg (pah) (Adcirca)	1	PA, QL (60 tablets/30 days), SP
ERECTILE DYSFUNCTION		
avanafil tab 50 mg, 100 mg, 200 mg (Stendra)	1*	QL (6 tablets/30 days)
sildenafil citrate tab 25 mg, 50 mg, 100 mg (Viagra)	1*	QL (6 tablets/30 days)
tadalafil tab 2.5 mg	1	QL (30 tablets/30 days)
tadalafil tab 5 mg (Cialis)	1	QL (30 tablets/30 days)
tadalafil tab 10 mg, 20 mg (Cialis)	1*	QL (6 tablets/30 days)
vardenafil hcl orally disintegrating tab 10 mg	1*	QL (6 tablets/30 days)
vardenafil hcl tab 2.5 mg, 5 mg, 10 mg, 20 mg	1*	QL (6 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
RESPIRATORY AGENTS		
ANTIHISTAMINES		
carbinoxamine maleate tab 4 mg	1	
cyproheptadine hcl syrup 2 mg/5ml	1	
cyproheptadine hcl tab 4 mg	1	
promethazine hcl oral soln 6.25 mg/5ml	1	
promethazine hcl suppos 12.5 mg, 25 mg	1	
promethazine hcl tab 12.5 mg, 25 mg, 50 mg	1	
NASAL AGENTS - SYSTEMIC and TOPICAL		
azelastine hcl nasal spray 0.1% (137 mcg/spray)	1	
fluticasone propionate nasal susp 50 mcg/act	1	
ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray)	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	
promethazine w/ codeine syrup 6.25-10 mg/5ml	1	
promethazine-dm syrup 6.25-15 mg/5ml	1	
ANTIASTHMATIC and BRONCHODILATOR AGENTS		
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	
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)	1	
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)
cromolyn sodium soln nebu 20 mg/2ml	1	
FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	1	QL (1 inhaler/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)
ipratropium bromide hfa inhal aerosol 17 mcg/act (Atrovent hfa)	1	QL (2 inhalers/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	

Drug Name	Drug Tier	Requirements/Limits
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 tab 10 mg (base equiv) (Singulair)	1	
roflumilast tab 250 mcg, 500 mcg (Daliresp)	1	
terbutaline sulfate tab 2.5 mg, 5 mg	1	
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	
zafirlukast tab 10 mg, 20 mg (Accolate)	1	
RESPIRATORY AGENTS - MISC.		
nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent) (Ofev)	1	PA, QL (60 capsules/30 days), SP
pirfenidone cap 267 mg (Esbriet)	1	PA, QL (180 capsules/30 days), SP
pirfenidone tab 267 mg (Esbriet)	1	PA, QL (180 tablets/30 days), SP
pirfenidone tab 801 mg (Esbriet)	1	PA, QL (90 tablets/30 days), SP
GASTROINTESTINAL AGENTS		
LAXATIVES		
bisacodyl tab delayed release 5 mg	1	ACA
GAVILYTE-C - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	1	ACA
lactulose solution 10 gm/15ml	1	
magnesium citrate soln	1	ACA
magnesium hydroxide susp 400 mg/5ml	1	ACA
MILK OF MAGNESIA CONCENTR - magnesium hydroxide susp concentrate 2400 mg/10ml	1	ACA
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)	1	ACA
peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm (Moviprep)	1	ACA
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	ACA
PEG-PREP - bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	1	ACA
polyethylene glycol 3350 oral powder 17 gm/scoop	1	ACA
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)	1	ACA
ANTIDIARRHEALS		
diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)	1	
ULCER DRUGS		
dicyclomine hcl cap 10 mg	1	
dicyclomine hcl oral soln 10 mg/5ml	1	
dicyclomine hcl tab 20 mg	1	

Drug Name	Drug Tier	Requirements/Limits
esomeprazole magnesium cap delayed release 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)
famotidine for susp 40 mg/5ml	1	PA, QL (2400 mls/30 days)
famotidine tab 40 mg (Pepcid)	1	
glycopyrrolate oral soln 1 mg/5ml (Cuvposa)	1	PA, QL (1350 mls/30 days)
glycopyrrolate tab 1 mg, 2 mg	1	
lansoprazole cap delayed release 30 mg (Prevacid)	1	QL (60 capsules/30 days)
methscopolamine bromide tab 2.5 mg, 5 mg	1	
misoprostol tab 100 mcg, 200 mcg (Cytotec)	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)
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	
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 tab 1 mg	1	
ondansetron hcl oral soln 4 mg/5ml	1	
ondansetron hcl tab 4 mg, 8 mg	1	
ondansetron orally disintegrating tab 4 mg, 8 mg	1	
scopolamine td patch 72hr 1 mg/3days	1	
trimethobenzamide hcl cap 300 mg	1	
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	
cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)	1	
ferric citrate tab 1 gm (210 mg ferric iron) (Auryxia)	1	FF, QL (360 tablets/30 days)
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)
mesalamine cap er 24hr 0.375 gm (Apriso)	1	

Drug Name	Drug Tier	Requirements/Limits
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 soln 5 mg/5ml (10 mg/10ml) (base equiv)	1	
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)	1	
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)
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	1	
sulfasalazine tab 500 mg (Azulfidine)	1	
ursodiol cap 300 mg	1	
ursodiol tab 250 mg	1	
ursodiol tab 500 mg (Urso forte)	1	
GENITOURINARY AGENTS		
URINARY ANTISPASMODICS		
bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg	1	
mirabegron granules for oral extended release susp 8 mg/ml (Myrbetriq)	1	QL (300 mls/28 days)
mirabegron tab er 24 hr 25 mg, 50 mg (Myrbetriq)	1	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	1	ACA
estradiol vaginal cream 0.01% (Estrace)	1	QL (255 grams/365 days)
estradiol vaginal tab 10 mcg (Vagifem)	1	
metronidazole vaginal gel 0.75%	1	
OPTIONS GYNOL II VAGINAL - nonoxynol-9 gel 3%	1	ACA
PHEXX - lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	1	ACA
progesterone vaginal insert 100 mg (Endometrin)	1*	QL (84 suppositories/28 days)
terconazole vaginal cream 0.4%, 0.8%	1	

Drug Name	Drug Tier	Requirements/Limits
terconazole vaginal suppos 80 mg	1	
TODAY SPONGE - nonoxynol-9 vaginal sponge 1000 mg	1	ACA
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 foam 12.5%	1	ACA
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 gel 4%	1	ACA
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 film 28%	1	ACA
GENITOURINARY AGENTS - MISC.		
alfuzosin hcl tab er 24hr 10 mg (Uroxatral)	1	
dutasteride cap 0.5 mg (Avodart)	1	
finasteride tab 5 mg (Proscar)	1	
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	
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 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, 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 oral soln 1 mg/ml	1	
diazepam tab 2 mg, 5 mg, 10 mg (Valium)	1	
hydroxyzine hcl syrup 10 mg/5ml	1	
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg	1	
hydroxyzine pamoate cap 25 mg, 50 mg	1	
lorazepam conc 2 mg/ml	1	
lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)	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	
bupropion hcl tab er 12hr 100 mg (Wellbutrin sr)	1	QL (120 tablets/30 days)
bupropion hcl tab er 12hr 150 mg, 200 mg (Wellbutrin sr)	1	QL (60 tablets/30 days)
bupropion hcl tab er 24hr 150 mg (Wellbutrin xl)	1	QL (90 tablets/30 days)
bupropion hcl tab er 24hr 300 mg (Wellbutrin xl)	1	QL (30 tablets/30 days)
bupropion hcl tab 75 mg	1	QL (180 tablets/30 days)
bupropion hcl tab 100 mg	1	QL (120 tablets/30 days)
citalopram hydrobromide oral soln 10 mg/5ml	1	QL (600 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
citalopram hydrobromide tab 10 mg (base equiv) (Celexa)	1	QL (120 tablets/30 days)
citalopram hydrobromide tab 20 mg (base equiv) (Celexa)	1	QL (60 tablets/30 days)
citalopram hydrobromide tab 40 mg (base equiv) (Celexa)	1	QL (30 tablets/30 days)
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) (Pristiq)	1	QL (30 tablets/30 days)
desvenlafaxine succinate tab er 24hr 100 mg (base equiv) (Pristiq)	1	QL (120 tablets/30 days)
doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	1	
DOXEPIN HYDROCHLORIDE - doxepin hcl cap 150 mg	1	
duloxetine hcl enteric coated pellets cap 20 mg (base eq)	1	QL (180 capsules/30 days)
duloxetine hcl enteric coated pellets cap 30 mg (base eq)	1	QL (120 capsules/30 days)
duloxetine hcl enteric coated pellets cap 60 mg (base eq)	1	QL (60 capsules/30 days)
escitalopram oxalate soln 5 mg/5ml (base equiv)	1	QL (600 mls/30 days)
escitalopram oxalate tab 5 mg (base equiv) (Lexapro)	1	QL (120 tablets/30 days)
escitalopram oxalate tab 10 mg (base equiv) (Lexapro)	1	QL (60 tablets/30 days)
escitalopram oxalate tab 20 mg (base equiv) (Lexapro)	1	QL (30 tablets/30 days)
fluoxetine hcl cap 10 mg	1	QL (240 capsules/30 days)
fluoxetine hcl cap 20 mg (Prozac)	1	QL (120 capsules/30 days)
fluoxetine hcl cap 40 mg	1	QL (60 capsules/30 days)
fluoxetine hcl solution 20 mg/5ml	1	QL (600 mls/30 days)
fluoxetine hcl tab 10 mg	1	QL (240 tablets/30 days)
fluoxetine hcl tab 20 mg	1	QL (120 tablets/30 days)
fluvoxamine maleate tab 25 mg, 50 mg	1	QL (30 tablets/30 days)
fluvoxamine maleate tab 100 mg	1	QL (90 tablets/30 days)
imipramine hcl tab 10 mg, 25 mg, 50 mg	1	
mirtazapine orally disintegrating tab 15 mg (Remeron soltab)	1	QL (90 tablets/30 days)
mirtazapine orally disintegrating tab 30 mg, 45 mg (Remeron soltab)	1	QL (30 tablets/30 days)
mirtazapine tab 7.5 mg, 45 mg	1	QL (30 tablets/30 days)
mirtazapine tab 15 mg (Remeron)	1	QL (90 tablets/30 days)
mirtazapine tab 30 mg (Remeron)	1	QL (30 tablets/30 days)
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)	1	
nortriptyline hcl soln 10 mg/5ml	1	
paroxetine hcl tab 10 mg (Paxil)	1	QL (180 tablets/30 days)
paroxetine hcl tab 20 mg (Paxil)	1	QL (90 tablets/30 days)
paroxetine hcl tab 30 mg (Paxil)	1	QL (60 tablets/30 days)
paroxetine hcl tab 40 mg (Paxil)	1	QL (30 tablets/30 days)
protriptyline hcl tab 5 mg, 10 mg	1	
sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)	1	QL (300 mls/30 days)
sertraline hcl tab 25 mg (Zoloft)	1	QL (240 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
sertraline hcl tab 50 mg (Zoloft)	1	QL (120 tablets/30 days)
sertraline hcl tab 100 mg (Zoloft)	1	QL (60 tablets/30 days)
tranylcypromine sulfate tab 10 mg (Parnate)	1	
trazodone hcl tab 50 mg, 100 mg, 150 mg	1	
trimipramine maleate cap 25 mg, 50 mg, 100 mg	1	
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (Effexor xr)	1	QL (180 capsules/30 days)
venlafaxine hcl cap er 24hr 75 mg (base equivalent) (Effexor xr)	1	QL (90 capsules/30 days)
venlafaxine hcl cap er 24hr 150 mg (base equivalent) (Effexor xr)	1	QL (60 capsules/30 days)
venlafaxine hcl tab 25 mg (base equivalent)	1	QL (450 tablets/30 days)
venlafaxine hcl tab 37.5 mg (base equivalent)	1	QL (300 tablets/30 days)
venlafaxine hcl tab 50 mg (base equivalent)	1	QL (210 tablets/30 days)
venlafaxine hcl tab 75 mg (base equivalent), 100 mg (base equivalent)	1	QL (90 tablets/30 days)
vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)	1	QL (30 tablets/30 days)
ANTIPSYCHOTICS		
aripiprazole oral solution 1 mg/ml	1	QL (900 mls/30 days)
aripiprazole orally disintegrating tab 10 mg, 15 mg	1	QL (60 tablets/30 days)
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)	1	QL (30 tablets/30 days)
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)	1	QL (60 tablets/30 days)
chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	1	
clozapine orally disintegrating tab 12.5 mg, 100 mg	1	QL (90 tablets/30 days)
clozapine orally disintegrating tab 25 mg	1	QL (270 tablets/30 days)
clozapine orally disintegrating tab 150 mg	1	QL (180 tablets/30 days)
clozapine orally disintegrating tab 200 mg	1	QL (120 tablets/30 days)
clozapine tab 25 mg (Clozaril)	1	QL (90 tablets/30 days)
clozapine tab 50 mg	1	QL (90 tablets/30 days)
clozapine tab 100 mg (Clozaril)	1	QL (270 tablets/30 days)
clozapine tab 200 mg	1	QL (120 tablets/30 days)
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	1	
haloperidol lactate oral conc 2 mg/ml	1	
haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg	1	
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, 120 mg (Latuda)	1	QL (30 tablets/30 days)
lurasidone hcl tab 80 mg (Latuda)	1	QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg	1	QL (30 tablets/30 days)
olanzapine tab 2.5 mg, 5 mg, 20 mg (Zyprexa)	1	QL (30 tablets/30 days)
olanzapine tab 7.5 mg, 10 mg, 15 mg	1	QL (30 tablets/30 days)
paliperidone tab er 24hr 1.5 mg	1	QL (30 tablets/30 days)
paliperidone tab er 24hr 3 mg, 9 mg (Invega)	1	QL (30 tablets/30 days)
paliperidone tab er 24hr 6 mg (Invega)	1	QL (60 tablets/30 days)
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	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, 300 mg, 400 mg (Seroquel xr)	1	QL (60 tablets/30 days)
quetiapine fumarate tab er 24hr 150 mg, 200 mg (Seroquel xr)	1	QL (30 tablets/30 days)
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg (Seroquel)	1	QL (90 tablets/30 days)
quetiapine fumarate tab 300 mg, 400 mg (Seroquel)	1	QL (60 tablets/30 days)
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg	1	QL (60 tablets/30 days)
risperidone orally disintegrating tab 4 mg	1	QL (120 tablets/30 days)
risperidone soln 1 mg/ml (Risperdal)	1	QL (480 mls/30 days)
risperidone tab 0.25 mg	1	QL (60 tablets/30 days)
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg (Risperdal)	1	QL (60 tablets/30 days)
risperidone tab 4 mg (Risperdal)	1	QL (120 tablets/30 days)
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	QL (60 capsules/30 days)
HYPNOTICS		
estazolam tab 1 mg, 2 mg	1	
eszopiclone tab 1 mg (Lunesta)	1	QL (90 tablets/30 days)
eszopiclone tab 2 mg, 3 mg (Lunesta)	1	QL (30 tablets/30 days)
tasimelteon capsule 20 mg (Hetlioz)	1	PA, QL (30 capsules/30 days), SP
temazepam cap 15 mg, 30 mg (Restoril)	1	
zaleplon cap 5 mg	1	QL (60 tablets/30 days)
zaleplon cap 10 mg	1	QL (30 capsules/30 days)
zolpidem tartrate tab er 6.25 mg (Ambien cr)	1	QL (60 tablets/30 days)
zolpidem tartrate tab er 12.5 mg (Ambien cr)	1	QL (30 tablets/30 days)
zolpidem tartrate tab 5 mg (Ambien)	1	QL (60 tablets/30 days)
zolpidem tartrate tab 10 mg (Ambien)	1	QL (30 tablets/30 days)
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg (Adderall xr)	1	QL (60 capsules/30 days)
amphetamine-dextroamphetamine cap er 24hr 25 mg, 30 mg (Adderall xr)	1	QL (30 capsules/30 days)

Drug Name	Drug Tier	Requirements/Limits
amphetamine-dextroamphetamine tab 5 mg, 10 mg (Adderall)	1	QL (180 tablets/30 days)
amphetamine-dextroamphetamine tab 7.5 mg, 20 mg (Adderall)	1	QL (90 tablets/30 days)
amphetamine-dextroamphetamine tab 12.5 mg, 15 mg (Adderall)	1	QL (120 tablets/30 days)
amphetamine-dextroamphetamine tab 30 mg (Adderall)	1	QL (60 tablets/30 days)
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)	1	
atomoxetine hcl cap 10 mg (base equiv), 40 mg (base equiv)	1	QL (60 capsules/30 days)
atomoxetine hcl cap 18 mg (base equiv), 25 mg (base equiv)	1	QL (120 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 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 (Focalin xr)	1	QL (60 capsules/30 days)
dexmethylphenidate hcl cap er 24 hr 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)	1	QL (30 capsules/30 days)
dexmethylphenidate hcl tab 2.5 mg (Focalin)	1	QL (240 tablets/30 days)
dexmethylphenidate hcl tab 5 mg (Focalin)	1	QL (120 tablets/30 days)
dexmethylphenidate hcl tab 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 5 mg	1	QL (360 tablets/30 days)
dextroamphetamine sulfate tab 10 mg	1	QL (180 tablets/30 days)
guanfacine hcl tab er 24hr 1 mg (base equiv), 4 mg (base equiv) (Intuniv)	1	QL (30 tablets/30 days)
guanfacine hcl tab er 24hr 2 mg (base equiv) (Intuniv)	1	QL (90 tablets/30 days)
guanfacine hcl tab er 24hr 3 mg (base equiv) (Intuniv)	1	QL (60 tablets/30 days)
liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml) (Saxenda)	1*	PA, QL (15 mls/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)
methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd) (Metadate cd)	1	QL (60 capsules/30 days)
methylphenidate hcl cap er 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), 40 mg (la) (Ritalin la)	1	QL (30 capsules/30 days)
methylphenidate hcl cap er 24hr 20 mg (la) (Ritalin la)	1	QL (90 capsules/30 days)
methylphenidate hcl cap er 24hr 30 mg (la) (Ritalin la)	1	QL (60 capsules/30 days)
methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg	1	QL (180 tablets/30 days)
methylphenidate hcl soln 5 mg/5ml (Methylin)	1	QL (450 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
methylphenidate hcl soln 10 mg/5ml (Methylin)	1	QL (900 mls/30 days)
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg (Concerta)	1	QL (60 tablets/30 days)
methylphenidate hcl tab er osmotic release (osm) 54 mg (Concerta)	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 (Ritalin)	1	QL (360 tablets/30 days)
methylphenidate hcl tab 10 mg (Ritalin)	1	QL (180 tablets/30 days)
methylphenidate hcl tab 20 mg (Ritalin)	1	QL (90 tablets/30 days)
modafinil tab 100 mg, 200 mg (Provigil)	1	
phentermine hcl cap 15 mg, 30 mg, 37.5 mg	1*	PA, QL (30 capsules/30 days)
phentermine hcl tab 8 mg	1*	PA, QL (90 tablets/30 days)
phentermine hcl tab 37.5 mg (Adipex-p)	1*	PA, QL (30 tablets/30 days)
phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg (Qsymia)	1*	PA, QL (30 capsules/30 days)
PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.		
acamprosate calcium tab delayed release 333 mg	1	
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	1	ACA
CHANTIX - varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	1	ACA
CHANTIX CONTINUING MONTH - varenicline tartrate tab 1 mg (base equiv)	1	ACA
CHANTIX STARTING MONTH PA - varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	1	ACA
cladribine tab therapy pack 10 mg (4 tabs), 10 mg (8 tabs) (Mavenclad)	1	PA, QL (8 tablets/301 days), SP
cladribine tab therapy pack 10 mg (5 tabs) (Mavenclad)	1	PA, QL (10 tablets/301 days), SP
cladribine tab therapy pack 10 mg (6 tabs) (Mavenclad)	1	PA, QL (12 tablets/301 days), SP
cladribine tab therapy pack 10 mg (7 tabs) (Mavenclad)	1	PA, QL (14 tablets/301 days), SP
cladribine tab therapy pack 10 mg (9 tabs) (Mavenclad)	1	PA, QL (9 tablets/301 days), SP
cladribine tab therapy pack 10 mg (10 tabs) (Mavenclad)	1	PA, QL (20 tablets/301 days), SP
dalfampridine tab er 12hr 10 mg (Ampyra)	1	SP
dextromethorphan hbr-quinidine sulfate cap 20-10 mg (Nuedexta)	1	
dimethyl fumarate capsule delayed release 120 mg (Tecfidera)	1	QL (56 capsules/180 days), SP
dimethyl fumarate capsule delayed release 240 mg (Tecfidera)	1	QL (60 capsules/30 days), SP
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	1	QL (60 capsules/180 days), 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	QL (30 tablets/30 days), SP
gabapentin (once-daily) tab 300 mg, 450 mg, 750 mg (Gralise)	1	QL (30 tablets/30 days), ST
gabapentin (once-daily) tab 600 mg (Gralise)	1	QL (90 tablets/30 days), ST

Drug Name	Drug Tier	Requirements/Limits
gabapentin (once-daily) tab 900 mg (Gralise)	1	QL (60 tablets/30 days), ST
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg	1	
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	1	
glatiramer acetate soln prefilled syringe 20 mg/ml (Copaxone)	1	QL (30 syringes/30 days), SP
glatiramer acetate soln prefilled syringe 40 mg/ml (Copaxone)	1	QL (12 syringes/28 days), SP
lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra)	1	
memantine hcl oral solution 2 mg/ml	1	PA, QL (300 mls/30 days)
memantine hcl tab 5 mg, 10 mg	1	
nicotine polacrilex gum 2 mg, 4 mg	1	ACA
nicotine polacrilex lozenge 2 mg, 4 mg	1	ACA
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	1	ACA
NICOTINE TRANSDERMAL SYST - nicotine td patch 24 hr kit 21-14-7 mg/24hr	1	ACA
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)	1	ACA
pimozide tab 1 mg, 2 mg	1	
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	
sodium oxybate oral solution 500 mg/ml (Xyrem)	1	FF, LA, PA, QL (540 mls/30 days), SP
teriflunomide tab 7 mg, 14 mg (Aubagio)	1	QL (30 tablets/30 days), SP
tetrabenazine tab 12.5 mg (Xenazine)	1	PA, QL (240 tablets/30 days), SP
tetrabenazine tab 25 mg (Xenazine)	1	PA, QL (120 tablets/30 days), SP
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	1	ACA
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	1	ACA
ANALGESICS AND ANESTHETICS		
ANALGESICS - NON-NARCOTIC		
aspirin buffered (ca carb-mg carb-mg ox) tab 325 mg	1	ACA
aspirin chew tab 81 mg	1	ACA
aspirin tab delayed release 81 mg, 325 mg	1	ACA
aspirin tab 325 mg	1	ACA
butalbital-acetaminophen tab 50-325 mg	1	QL (180 tablets/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)
diflunisal tab 500 mg	1	
ECOTRIN REGULAR STRENGTH - aspirin tab delayed release 325 mg	1	ACA
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)
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)	1	QL (6 tablets/90 days)

Drug Name	Drug Tier	Requirements/Limits
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (Suboxone)	1	QL (120 films/30 days)
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)
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 nasal soln 10 mg/ml	1	QL (7.5 ml/30 days)
codeine sulfate tab 30 mg (Codeine sulfate)	1	QL (180 tablets/30 days)
fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr	1	PA, QL (15 patches/30 days)
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	1	QL (2700 mls/30 days)
hydrocodone-acetaminophen tab 10-325 mg, 7.5-325 mg	1	QL (180 tablets/30 days)
hydrocodone-acetaminophen tab 5-325 mg	1	QL (240 tablets/30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	1	QL (150 tablets/30 days)
hydromorphone hcl liqd 1 mg/ml (Dilaudid)	1	QL (1440 mls/30 days)
hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid)	1	QL (180 tablets/30 days)
methadone hcl conc 10 mg/ml (Methadose)	1	QL (90 mls/30 days)
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)
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	PA, QL (90 tablets/30 days)
morphine sulfate tab er 100 mg, 200 mg	1	PA, QL (90 tablets/30 days)
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)
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 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)
oxymorphone hcl tab 5 mg, 10 mg	1	QL (180 tablets/30 days)
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	1	PA, QL (30 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
tramadol hcl tab 50 mg	1	QL (240 tablets/30 days)
tramadol-acetaminophen tab 37.5-325 mg	1	QL (240 tablets/30 days)
ANALGESICS - ANTI-INFLAMMATORY		
celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex)	1	
diclofenac potassium tab 50 mg	1	
diclofenac sodium tab delayed release 25 mg, 50 mg, 75 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	
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	
ibuprofen tab 400 mg, 600 mg, 800 mg	1	
indomethacin cap er 75 mg	1	
indomethacin cap 25 mg, 50 mg	1	
ketorolac tromethamine tab 10 mg	1	QL (20 tablets/5 days)
leflunomide tab 10 mg, 20 mg (Arava)	1	
meloxicam tab 7.5 mg, 15 mg	1	
nabumetone tab 500 mg, 750 mg	1	
naproxen sodium tab 275 mg	1	
naproxen sodium tab 550 mg (Anaprox ds)	1	
naproxen tab 250 mg, 375 mg	1	
naproxen tab 500 mg (Naprosyn)	1	
oxaprozin tab 600 mg (Daypro)	1	
piroxicam cap 10 mg, 20 mg	1	
sulindac tab 150 mg, 200 mg	1	
tofacitinib citrate oral soln 1 mg/ml (base equivalent) (Xeljanz)	1	PA, QL (240 mls/30 days), SP
tofacitinib citrate tab er 24hr 11 mg (base equivalent) (Xeljanz xr)	1	PA, QL (30 tablets/30 days), SP
tofacitinib citrate tab er 24hr 22 mg (base equivalent) (Xeljanz xr)	1	PA, QL (120 tablets/365 days), SP
tofacitinib citrate tab 5 mg (base equivalent) (Xeljanz)	1	PA, QL (60 tablets/30 days), SP
tofacitinib citrate tab 10 mg (base equivalent) (Xeljanz)	1	PA, QL (240 tablets/365 days), SP
MIGRAINE PRODUCTS		
dihydroergotamine mesylate inj 1 mg/ml	1	
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)	1	QL (12 tablets/30 days)
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv)	1	QL (18 tablets/30 days)
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	1	QL (18 tablets/30 days)
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)	1	QL (18 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
rizatriptan benzoate tab 5 mg (base equivalent)	1	QL (18 tablets/30 days)
rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)	1	QL (18 tablets/30 days)
sumatriptan nasal spray 5 mg/act, 20 mg/act	1	QL (12 inhalers/30 days)
sumatriptan succinate inj 6 mg/0.5ml	1	QL (10 vials/30 days)
sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys)	1	QL (12 doses/30 days)
sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex)	1	QL (18 tablets/30 days)
zolmitriptan tab 2.5 mg, 5 mg	1	QL (12 tablets/30 days)
GOUT AGENTS		
allopurinol tab 100 mg, 300 mg	1	
colchicine tab 0.6 mg	1	
colchicine w/ probenecid tab 0.5-500 mg	1	
probenecid tab 500 mg	1	
NEUROMUSCULAR DRUGS		
ANTICONVULSANTS		
brivaracetam oral soln 10 mg/ml (Briviact)	1	
brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg (Briviact)	1	
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	
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 delivery system 2.5 mg, 10 mg, 20 mg	1	
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	
felbamate susp 600 mg/5ml	1	
felbamate tab 400 mg, 600 mg (Felbatol)	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	

Drug Name	Drug Tier	Requirements/Limits
lacosamide oral solution 10 mg/ml (Vimpat)	1	
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)	1	
lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	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 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 susp 0.5 mg/ml (Fycompa)	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 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)
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	1	
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg	1	PA, QL (30 capsules/30 days)
topiramate cap er 24hr sprinkle 200 mg	1	PA, QL (60 capsules/30 days)
topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)	1	
topiramate sprinkle cap 50 mg	1	
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)	1	
valproate sodium oral soln 250 mg/5ml (base equiv)	1	
valproic acid cap 250 mg	1	

Drug Name	Drug Tier	Requirements/Limits
vigabatrin powd pack 500 mg (Sabril)	1	LA, SP
vigabatrin tab 500 mg (Sabril)	1	LA, SP
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	
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)	1	SP
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 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	
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 oral soln 0.4 mg/ml	1	
trihexyphenidyl hcl tab 2 mg, 5 mg	1	
NEUROMUSCULAR AGENTS		
riluzole tab 50 mg	1	SP
MUSCULOSKELETAL THERAPY AGENTS		
baclofen tab 10 mg, 20 mg	1	
chlorzoxazone tab 500 mg	1	
cyclobenzaprine hcl tab 5 mg, 10 mg	1	
methocarbamol tab 500 mg, 750 mg	1	
orphenadrine citrate tab er 12hr 100 mg	1	
tizanidine hcl tab 2 mg (base equivalent)	1	
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)	1	
ANTIMYASTHENIC AGENTS		

Drug Name	Drug Tier	Requirements/Limits
pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)	1	
pyridostigmine bromide tab er 180 mg (Mestinon timespan)	1	
pyridostigmine bromide tab 60 mg (Mestinon)	1	
NUTRITIONAL PRODUCTS		
VITAMINS		
ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)	1	
phytonadione tab 5 mg	1	
MULTIVITAMINS		
b-complex w/ c & folic acid tab	1	ACA
b-complex w/ c & folic acid tab 0.8 mg	1	ACA
b-complex w/ c tab	1	ACA
b-complex w/ folic acid tab	1	ACA
b-complex w/biotin & folic acid cap	1	ACA
b-complex w/biotin & folic acid tab	1	ACA
B-COMPLEX/VITAMIN C/FOLIC - b-complex w/ c-biotin-vit e & folic acid tab 0.4 mg	1	ACA
CLASSIC PRENATAL - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	1	ACA
CVS PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-0.8 mg	1	ACA
CVS PRENATAL MULTI+DHA - prenatal mv & min w/fe fum-fa-dha cap 27-0.8-250 mg	1	ACA
CVS PRENATAL MULTIVITAMIN - prenatal mv & min w/fe fum-fa-dha cap 27-0.8-250 mg	1	ACA
DAILY VITE MULTIVITAMIN/I - multiple vitamins w/ iron tab	1	ACA
FLOTREX - pediatric multiple vitamins w/ fluoride chew tab 0.25 mg, 0.5 mg, 1 mg	1	ACA
FT PRENATAL/FOLIC ACID - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	1	ACA
GNP PRENATAL - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	1	ACA
GNP PRENATAL/FOLIC ACID - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	1	ACA
MINI MULTI VITAMINS/IRON - multiple vitamins w/ iron tab	1	ACA
MULTI VITAMIN WITH IRON - multiple vitamins w/ iron tab	1	ACA
MULTI-VITAMIN/FLUORIDE DR - pediatric multiple vitamin w/ fluoride susp 0.25 mg/ml	1	ACA
MULTI-VITAMIN/FLUORIDE DR - pediatric multiple vitamins w/ fluoride susp 0.5 mg/ml	1	ACA
MULTI-VITAMINS/IRON - multiple vitamins w/ iron tab	1	ACA
multiple vitamins w/ iron tab	1	ACA
MULTIPLE VITAMINS/IRON - multiple vitamins w/ iron tab	1	ACA
MULTIVITAMIN PLUS IRON AD - multiple vitamins w/ iron tab	1	ACA
MULTIVITAMIN/FLUORIDE - pediatric multiple vitamins w/ fluoride chew tab 0.25 mg, 0.5 mg, 1 mg	1	ACA
NAT-RUL DAILY-VITE + IRON - multiple vitamins w/ iron tab	1	ACA
ONE DAILY MULTIVITAMIN/IR - multiple vitamins w/ iron tab	1	ACA

Drug Name	Drug Tier	Requirements/Limits
ONE-DAILY MULTI-VITAMIN/I - multiple vitamins w/ iron tab	1	ACA
ONE-DAILY/IRON - multiple vitamins w/ iron tab	1	ACA
PRENATAL - prenatal multivitamins & minerals w/iron & fa tab 0.8 mg	1	ACA
PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-0.8 mg, 28-0.8 mg	1	ACA
PRENATAL AND IRON - prenatal multivitamins & minerals w/iron & fa tab 0.8 mg	1	ACA
PRENATAL COMPLETE - prenatal vit w/ fe fumarate-fa tab 14-0.4 mg	1	ACA
PRENATAL MULTI + DHA - prenatal mv & min w/fe fum-fa-dha cap 27-0.8-250 mg	1	ACA
PRENATAL MULTIVITAMIN - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	1	ACA
PRENATAL MULTIVITAMIN PLU - prenatal multivitamins & minerals w/iron & fa tab 0.8 mg	1	ACA
PRENATAL ONE DAILY - prenatal vit w/ fe fumarate-fa tab 27-0.8 mg	1	ACA
PRENATAL VITAMIN & MINERA - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	1	ACA
PRENATAL VITAMINS - prenatal vit w/ fe fumarate-fa tab 28-0.8 mg	1	ACA
QC DAILY MULTIVITAMINS/IR - multiple vitamins w/ iron tab	1	ACA
SOLUVITA - pediatric vitamins acd w/ fluoride soln 0.25 mg/ml	1	ACA
STRESS B COMPLEX/IRON - multiple vitamins w/ iron tab	1	ACA
STRESS FORMULA/IRON - multiple vitamins w/ iron tab	1	ACA
TAB-A-VITE MULTIVITAMIN/I - multiple vitamins w/ iron tab	1	ACA
TRI-VITE/FLUORIDE - pediatric vitamins acd w/ fluoride soln 0.25 mg/ml, 0.5 mg/ml	1	ACA
vitamins w/ lipotropics tab	1	ACA
MINERALS and ELECTROLYTES		
FLUORIDE - 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	ACA
potassium chloride cap er 8 meq, 10 meq	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	
SODIUM FLUORIDE - sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	1	ACA
SODIUM FLUORIDE - 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	ACA
SODIUM FLUORIDE - sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	1	ACA

Drug Name	Drug Tier	Requirements/Limits
HEMATOLOGICAL AGENTS		
HEMATOPOIETIC AGENTS		
carbonyl iron susp 15 mg/1.25ml (elemental iron)	1	ACA
cyanocobalamin inj 1000 mcg/ml	1	
eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq) (Promacta)	1	PA, QL (30 packets/30 days), SP
eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv) (Promacta)	1	PA, QL (30 tablets/30 days), SP
eltrombopag olamine tab 50 mg (base equiv), 75 mg (base equiv) (Promacta)	1	PA, QL (60 tablets/30 days), 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	ACA
folic acid cap 0.8 mg	1	ACA
folic acid tab 400 mcg, 800 mcg	1	ACA
folic acid tab 1 mg	1	
FOLITAB 500 - ferrous sulfate-vit c-folic acid tab er 105-500-0.8 mg	1	ACA
FOLTABS 800 - folic acid-vitamin b6-vitamin b12 tab 0.8-10-0.115 mg	1	ACA
glutamine (sickle cell) powd pack 5 gm (Endari)	1	PA, SP
IRON UP - polysaccharide iron complex liquid 15 mg/0.5ml (fe equiv)	1	ACA
miglustat cap 100 mg (Zavesca)	1	LA, PA, QL (90 capsules/30 days), SP
NOVAFERRUM PEDIATRIC DROP - polysaccharide iron complex liquid 15 mg/ml (fe equiv)	1	ACA
TRICON - fe fumarate w/ b12-vit c-fa-ifc cap 110-0.015-75-0.5-240 mg	1	ACA
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)
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	
enoxaparin sodium inj 300 mg/3ml (Lovenox)	1	
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)	1	
heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml	1	
heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml	1	
rivaroxaban for susp 1 mg/ml (Xarelto)	1	QL (620 mls/30 days)
rivaroxaban tab 2.5 mg (Xarelto)	1	QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	1	
HEMOSTATICS		
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.		
anagrelide hcl cap 0.5 mg (Agrylin)	1	
anagrelide hcl cap 1 mg	1	
aspirin-dipyridamole cap er 12hr 25-200 mg	1	
cilostazol tab 50 mg, 100 mg	1	
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	1	
dipyridamole tab 25 mg, 50 mg, 75 mg	1	
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)	1	LA, PA, QL (6 syringes/30 days), 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		
atropine sulfate ophth soln 1%	1	
azelastine hcl ophth soln 0.05%	1	
bimatoprost ophth soln 0.01% (Lumigan)	1	QL (2.5 mls/30 days)
brimonidine tartrate ophth soln 0.2%	1	
ciprofloxacin hcl ophth soln 0.3% (base equivalent)	1	
cyclopentolate hcl ophth soln 1% (Cyclogyl)	1	
diclofenac sodium ophth soln 0.1%	1	
dorzolamide hcl ophth soln 2%	1	
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)	1	
erythromycin ophth oint 5 mg/gm	1	
fluorometholone ophth susp 0.1% (Fml liquifilm)	1	
gatifloxacin ophth soln 0.5%	1	
gentamicin sulfate ophth soln 0.3%	1	
ketorolac tromethamine ophth soln 0.5% (Acular)	1	
latanoprost ophth soln 0.005% (Xalatan)	1	QL (2.5 mls/30 days)
loteprednol etabonate ophth gel 0.5% (Lotemax)	1	
loteprednol etabonate ophth susp 0.2% (Alrex)	1	
loteprednol etabonate ophth susp 0.5% (Lotemax)	1	
moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)	1	
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	1	

Drug Name	Drug Tier	Requirements/Limits
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	1	
ofloxacin ophth soln 0.3% (Ocuflox)	1	
pilocarpine hcl ophth soln 1%, 2%, 4%	1	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	1	
prednisolone acetate ophth susp 1% (Pred forte)	1	
RESTASIS - cyclosporine (ophth) emulsion 0.05% (pf)	1	
timolol maleate ophth soln 0.25%, 0.5%	1	
tobramycin ophth soln 0.3%	1	
tobramycin-dexamethasone ophth susp 0.3-0.1%	1	
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	
fluocinolone acetonide (otic) oil 0.01% (Dermotic)	1	
hydrocortisone w/ acetic acid otic soln 1-2%	1	
neomycin-polymyxin-hc otic soln 1%	1	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	1	
ofloxacin otic soln 0.3%	1	
MOUTH/THROAT/DENTAL AGENTS		
cevimeline hcl cap 30 mg (Evoxac)	1	
chlorhexidine gluconate soln 0.12% (Peridex)	1	
CLINPRO 5000 - sodium fluoride paste 1.1%	1	ACA
clotrimazole troche 10 mg	1	
DENTA 5000 PLUS - sodium fluoride cream 1.1%	1	ACA
DENTA 5000 PLUS SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	1	ACA
DENTAGEL - sodium fluoride gel 1.1% (0.5% f)	1	ACA
EASYGEL - stannous fluoride gel 0.4%	1	ACA
FLUORIDEX DAILY DEFENSE - sodium fluoride paste 1.1%	1	ACA
FLUORIDEX DAILY RENEWAL - stannous fluoride conc 0.63%	1	ACA
FLUORIDEX ENHANCED WHITEN - sodium fluoride paste 1.1%	1	ACA
FLUORIDEX SENSITIVITY REL - sodium fluoride-potassium nitrate gel 1.1-5%	1	ACA
FLUORIMAX 5000 - sodium fluoride paste 1.1%	1	ACA
FLUORIMAX 5000 SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	1	ACA
JUST RIGHT 5000 - sodium fluoride paste 1.1%	1	ACA
lidocaine hcl viscous soln 2%	1	
nystatin susp 100000 unit/ml (Nystatin)	1	
pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)	1	
PREVIDENT FLUORIDE - sodium fluoride gel 1.1% (0.5% f)	1	ACA
PREVIDENT RINSE - sodium fluoride rinse 0.2%	1	ACA

Drug Name	Drug Tier	Requirements/Limits
PREVIDENT 5000 BOOSTER PL - sodium fluoride paste 1.1%	1	ACA
PREVIDENT 5000 DRY MOUTH - sodium fluoride gel 1.1% (0.5% f)	1	ACA
PREVIDENT 5000 ENAMEL PRO - sodium fluoride-potassium nitrate gel 1.1-5%	1	ACA
PREVIDENT 5000 KIDS - sodium fluoride paste 1.1%	1	ACA
PREVIDENT 5000 ORTHO DEFE - sodium fluoride paste 1.1%	1	ACA
PREVIDENT 5000 PLUS - sodium fluoride cream 1.1%	1	ACA
PREVIDENT 5000 SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	1	ACA
SF - sodium fluoride gel 1.1% (0.5% f)	1	ACA
SF 5000 PLUS - sodium fluoride cream 1.1%	1	ACA
SODIUM FLUORIDE - sodium fluoride rinse 0.2%	1	ACA
SODIUM FLUORIDE - sodium fluoride cream 1.1%	1	ACA
SODIUM FLUORIDE - sodium fluoride gel 1.1% (0.5% f)	1	ACA
SODIUM FLUORIDE 5000 PLUS - sodium fluoride cream 1.1%	1	ACA
SODIUM FLUORIDE 5000 PPM - sodium fluoride gel 1.1% (0.5% f)	1	ACA
SODIUM FLUORIDE 5000 PPM - sodium fluoride paste 1.1%	1	ACA
SODIUM FLUORIDE 5000 PPM - sodium fluoride-potassium nitrate gel 1.1-5%	1	ACA
SODIUM FLUORIDE/POTASSIUM - sodium fluoride-potassium nitrate gel 1.1-5%	1	ACA
triamcinolone acetonide dental paste 0.1%	1	
ANORECTAL AGENTS		
budesonide rectal foam 2 mg/act (Uceris)	1	
hydrocortisone enema 100 mg/60ml (Cortenema)	1	
hydrocortisone perianal cream 2.5% (Anusol-hc)	1	
nitroglycerin oint 0.4% (Rectiv)	1	
DERMATOLOGICALS		
acitretin cap 10 mg, 17.5 mg, 25 mg	1	
acyclovir oint 5% (Zovirax)	1	
adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo)	1	PA
ALCLOMETASONE DIPROPIONAT - alclometasone dipropionate cream 0.05%	1	FF, QL (120 grams/30 days)
azelaic acid gel 15%	1	
betamethasone dipropionate augmented cream 0.05%	1	QL (200 grams/28 days)
betamethasone dipropionate augmented lotion 0.05%	1	QL (210 mls/30 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 cream 0.1% (base equivalent)	1	QL (135 grams/30 days)
betamethasone valerate oint 0.1% (base equivalent)	1	QL (135 grams/30 days)

Drug Name	Drug Tier	Requirements/Limits
BRIMONIDINE TARTRATE - brimonidine tartrate gel 0.33% (base equivalent)	1	
calcipotriene cream 0.005%	1	
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 gel 1% (twice-daily)	1	
clindamycin phosphate lotion 1% (Cleocin-t)	1	
clindamycin phosphate soln 1%	1	
clindamycin phosphate swab 1%	1	
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 foam 0.05%	1	QL (200 grams/28 days)
clobetasol propionate gel 0.05%	1	QL (210 grams/28 days)
clobetasol propionate oint 0.05%	1	QL (210 grams/28 days)
clobetasol propionate soln 0.05%	1	QL (200 mls/28 days)
clotrimazole w/ betamethasone cream 1-0.05%	1	
desonide cream 0.05% (Desowen)	1	QL (120 grams/30 days)
desonide oint 0.05%	1	QL (120 grams/30 days)
desoximetasone cream 0.25%	1	QL (120 grams/30 days)
desoximetasone oint 0.25% (Topicort)	1	QL (120 grams/30 days)
diclofenac sodium (actinic keratoses) gel 3%	1	
diclofenac sodium soln 1.5%	1	QL (2 bottles/30 days)
econazole nitrate cream 1%	1	
erythromycin soln 2%	1	
fluocinolone acetonide cream 0.01%	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 oil 0.01% (scalp oil) (Derma-smoothe/fs sca)	1	QL (118.28 ml/30 days)
fluocinolone acetonide oint 0.025% (Synalar)	1	QL (120 grams/30 days)
fluocinolone acetonide soln 0.01%	1	QL (120 mls/30 days)
fluocinonide cream 0.05%	1	QL (120 grams/30 days)
fluocinonide cream 0.1% (Vanos)	1	QL (240 grams/28 days)
fluocinonide emulsified base cream 0.05%	1	QL (120 grams/30 days)
fluocinonide gel 0.05%	1	QL (120 grams/30 days)
fluocinonide oint 0.05%	1	QL (120 grams/30 days)
fluocinonide soln 0.05%	1	QL (120 mls/30 days)
fluorouracil cream 5%	1	
fluorouracil soln 5%	1	

Drug Name	Drug Tier	Requirements/Limits
fluticasone propionate cream 0.05%	1	QL (120 grams/30 days)
fluticasone propionate oint 0.005%	1	QL (120 grams/30 days)
gentamicin sulfate cream 0.1%	1	
gentamicin sulfate oint 0.1%	1	
halobetasol propionate cream 0.05%	1	QL (200 grams/28 days)
hydrocortisone cream 2.5%	1	QL (454 grams/30 days)
hydrocortisone oint 2.5%	1	QL (454 grams/30 days)
hydrocortisone valerate cream 0.2%	1	QL (120 grams/30 days)
imiquimod cream 5%	1	
isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica)	1	
ivermectin cream 1% (Soolantra)	1	
ketoconazole cream 2%	1	
ketoconazole shampoo 2%	1	
lidocaine hcl soln 4%	1	PA, QL (150 mls/30 days)
lidocaine oint 5%	1	PA, QL (100 grams/30 days)
lidocaine patch 5% (Lidoderm)	1	PA, QL (90 patches/30 days)
lidocaine-prilocaine cream 2.5-2.5%	1	ACA, QL (60 grams/30 days)
malathion lotion 0.5% (Ovide)	1	
metronidazole cream 0.75% (Metrocream)	1	
metronidazole gel 0.75%	1	
metronidazole gel 1% (Metrogel)	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 oint 2%	1	
nystatin cream 100000 unit/gm	1	
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	
permethrin cream 5% (Elimite)	1	
silver sulfadiazine cream 1% (Silvadene)	1	
sulfacetamide sodium lotion 10% (acne) (Klaron)	1	
tacrolimus oint 0.03%, 0.1%	1	
tazarotene cream 0.05% (Tazorac)	1	
tazarotene cream 0.1% (Tazorac)	1	PA
tazarotene gel 0.05%, 0.1% (Tazorac)	1	PA
tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)	1	PA
tretinoin gel 0.01% (Retin-a)	1	PA
triamcinolone acetonide cream 0.025%, 0.1%, 0.5%	1	QL (454 grams/30 days)
triamcinolone acetonide lotion 0.1%	1	QL (120 mls/30 days)
triamcinolone acetonide oint 0.025%, 0.1%	1	QL (454 grams/30 days)

Drug Name	Drug Tier	Requirements/Limits
triamcinolone acetonide oint 0.5%	1	QL (120 grams/30 days)
MISCELLANEOUS PRODUCTS		
ANTIDOTES		
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
naloxone hcl inj 0.4 mg/ml, 4 mg/10ml	1	
naloxone hcl nasal spray 4 mg/0.1ml (Narcan)	1	
naloxone hcl soln prefilled syringe 0.4 mg/ml, 2 mg/2ml	1	
naltrexone hcl tab 50 mg	1	
DIAGNOSTIC PRODUCTS		
CHEMSTRIP-K - acetone (urine) test strip	1	
CONTOUR BLOOD GLUCOSE TES - glucose blood test strip	1	QL (204 strips/30 days)
CONTOUR NEXT BLOOD GLUCOS - glucose blood test strip	1	QL (204 strips/30 days)
CONTOUR PLUS BLOOD GLUCOS - glucose blood test strip	1	QL (204 strips/30 days)
DIASTIX - glucose urine test-(glucose oxidase) strip	1	
DIASTIX REAGENT STRIPS - glucose urine test-(glucose oxidase) strip	1	
FORA GTEL BLOOD KETONE TE - ketone blood test strip	1	
FORA TEST N' GO ADVANCE/V - ketone blood test strip	1	
FREESTYLE INSULINX BLOOD - glucose blood test strip	1	QL (204 strips/30 days)
FREESTYLE LITE TEST STRIP - glucose blood test strip	1	QL (204 strips/30 days)
FREESTYLE PRECISION NEO B - glucose blood test strip	1	QL (204 strips/30 days)
FREESTYLE TEST STRIPS - glucose blood test strip	1	QL (204 strips/30 days)
GOJJI BLOOD KETONE TEST S - ketone blood test strip	1	
KETONE - acetone (urine) test strip	1	
KETONE TEST STRIPS - acetone (urine) test strip	1	
KETOSTIX - acetone (urine) test strip	1	
NOVA MAX PLUS KETONE TEST - ketone blood test strip	1	
OPTIUMEZ TEST STRIPS - glucose blood test strip	1	QL (204 strips/30 days)
PRECISION XTRA BLOOD GLUC - glucose blood test strip	1	QL (204 strips/30 days)
RELION KETONE TEST STRIPS - acetone (urine) test strip	1	
MEDICAL DEVICES		
ACCU-CHEK PLASTIC CARTRID - insulin infusion pump supplies - reservoir	1	
ACCU-CHEK SPIRIT CARTRIDG - insulin infusion pump supplies - reservoir	1	
ACCU-CHEK TENDER I INFUSI - insulin infusion pump supplies - infusion set	1	

Drug Name	Drug Tier	Requirements/Limits
ACCU-CHEK ULTRAFLEX INFUS - insulin infusion pump supplies - infusion set	1	
ACCU-CHEK ULTRAFLEX-1 INF - insulin infusion pump supplies - infusion set	1	
ADVOCATE ALCOHOL PREP PAD - alcohol swabs	1	
ALCOHOL PADS - alcohol swabs	1	
ALCOHOL PREP PAD - alcohol swabs	1	
ALCOHOL PREP PADS - alcohol swabs	1	
ALCOHOL PREPS - alcohol swabs	1	
ALCOHOL SWABS - alcohol swabs	1	
ALCOHOL SWABSTICKS - alcohol swabs	1	
AUM ALCOHOL PREP PADS - alcohol swabs	1	
BD SWABS SINGLE USE - alcohol swabs	1	
CARETOUCH ALCOHOL PREP PA - alcohol swabs	1	
CAYA - diaphragm arc-spring	1	ACA
COMFORT TOUCH ALCOHOL PRE - alcohol swabs	1	
CONDOMS MALE - VARIOUS	1	ACA
CONTOUR BLOOD GLUCOSE MON - blood glucose monitoring devices	1	
CONTOUR HIGH CONTROL - blood glucose calibration - liquid - high	1	
CONTOUR LOW CONTROL - blood glucose calibration - liquid - low	1	
CONTOUR NEXT BLOOD GLUCOS - blood glucose monitoring kit with device	1	
CONTOUR NEXT CONTROL LEVE - blood glucose calibration - liquid - normal, - low	1	
CONTOUR NEXT EZ BLOOD GLU - blood glucose monitoring kit with device	1	
CONTOUR NEXT GEN BLOOD GL - blood glucose monitoring kit with device	1	
CONTOUR NEXT LINK BLOOD G - blood glucose monitoring kit with device	1	
CONTOUR NEXT LINK WIRELES - blood glucose monitoring kit with device	1	
CONTOUR NEXT ONE BLOOD GL - blood glucose monitoring kit without device, with device	1	
CONTOUR NORMAL CONTROL - blood glucose calibration - liquid - normal	1	
CONTOUR PLUS BLUE BLOOD G - blood glucose monitoring kit with device	1	
CONTOUR PLUS CONTROL SOLU - blood glucose calibration - liquid	1	
CURITY ALCOHOL PREPS/MEDI - alcohol swabs	1	
CVS ALCOHOL PREP PADS - alcohol swabs	1	
CVS PREP PADS - alcohol swabs	1	

Drug Name	Drug Tier	Requirements/Limits
DEXCOM G6 RECEIVER - continuous glucose system receiver	1	FF, PA, QL (1 receiver/365 days)
DEXCOM G6 SENSOR - continuous glucose system sensor	1	FF, PA, QL (3 sensors/30 days)
DEXCOM G6 TRANSMITTER - continuous glucose system transmitter	1	FF, PA, QL (1 receiver/90 days)
DEXCOM G7 RECEIVER - continuous glucose system receiver	1	FF, PA, QL (1 receiver/365 days)
DEXCOM G7 SENSOR - continuous glucose system sensor	1	FF, PA, QL (3 sensors/30 days)
DEXCOM G7 15 DAY SENSOR - continuous glucose system sensor	1	FF, PA, QL (2 sensors/30 days)
DROPSAFE ALCOHOL PREP PAD - alcohol swabs	1	
EASY COMFORT ALCOHOL PADS - alcohol swabs	1	
EASY TOUCH ALCOHOL PREP P - alcohol swabs	1	
EQL ALCOHOL SWABS - alcohol swabs	1	
EXTENDED INFUSION SET 23" - insulin infusion pump supplies - infusion set	1	
EXTENDED INFUSION SET 32" - insulin infusion pump supplies - infusion set	1	
EXTENDED INFUSION SET 43" - insulin infusion pump supplies - infusion set	1	
EXTENDED RESERVOIR 3.0 ML - insulin infusion pump supplies - reservoir	1	
FC2 FEMALE CONDOM - condoms - female	1	ACA
FEMCAP - cervical cap 22 mm, 26 mm, 30 mm	1	ACA
FIFTY50 ALCOHOL PREP PADS - alcohol swabs	1	
FREESTYLE CONTROL SOLUTIO - blood glucose calibration - liquid	1	
FREESTYLE FREEDOM LITE - blood glucose monitoring kit with device	1	
FREESTYLE LITE BLOOD GLUC - blood glucose monitoring devices	1	
FREESTYLE LITE BLOOD GLUC - blood glucose monitoring kit with device	1	
FREESTYLE PRECISION NEO B - blood glucose monitoring kit with device	1	
GLOBAL ALCOHOL PREP EASE - alcohol swabs	1	
GLUCOPRO SYRINGE RESERVOI - insulin infusion pump supplies - reservoir	1	
GNP ALCOHOL SWABS - alcohol swabs	1	
GOODSENSE ALCOHOL SWABS - alcohol swabs	1	
H-E-B INCONTROL ALCOHOL P - alcohol swabs	1	
ILET INSULIN INFUSION KIT - insulin infusion pump supplies	1	FF, PA, QL (1 kit/30 days)
ILET INSULIN PUMP - insulin infusion pump - device	1	PA, QL (1 kits/720 days)
ILET STARTER KIT - CONTAC - insulin infusion pump supplies	1	FF, PA, QL (1 kit/720 days)
ILET STARTER KIT - INSET - insulin infusion pump supplies	1	FF, PA, QL (1 kit/720 days)
INSULIN PEN NEEDLES - VARIOUS	1	
INSULIN SYRINGES - VARIOUS	1	
LANCETS - VARIOUS	1	

Drug Name	Drug Tier	Requirements/Limits
MEDISENSE GLUCOSE KETONE - blood glucose calibration - liquid	1	
MEIJER ALCOHOL SWABS EXTR - alcohol swabs	1	
MINIMED MIO ADVANCE INFUS - insulin infusion pump supplies - infusion set	1	
MINIMED PUMP RESERVOIR 3M - insulin infusion pump supplies - reservoir	1	
MINIMED QUICK SET INFUSIO - insulin infusion pump supplies - infusion set	1	
MINIMED RESERVOIR 1.8ML - insulin infusion pump supplies - reservoir	1	
MINIMED RESERVOIR 3ML - insulin infusion pump supplies - reservoir	1	
MINIMED SILHOUETTE INFUSI - insulin infusion pump supplies - infusion set	1	
MISC NEEDLES and SYRINGES - VARIOUS	1	
OMNIFLEX DIAPHRAGM - diaphragms	1	ACA
OMNIPOD DASH INTRO KIT (G - insulin infusion disposable pump kit	1	PA, QL (1 kit/720 days)
OMNIPOD DASH PODS (GEN 4) - insulin infusion disposable pump reservoir	1	PA, QL (30 pods/30 days)
OMNIPOD POD PALS - insulin infusion disposable pump - accessories	1	
OMNIPOD 5 DEXCOM G7G6 INT - insulin infusion disposable pump kit	1	PA, QL (1 kit/720 days)
OMNIPOD 5 DEXCOM G7G6 POD - insulin infusion disposable pump reservoir	1	PA, QL (30 pods/30 days)
OMNIPOD 5 LIBRE INTRO KIT - insulin infusion disposable pump kit	1	PA, QL (1 kit/720 days)
OMNIPOD 5 LIBRE PODS - insulin infusion disposable pump reservoir	1	PA, QL (30 pods/30 days)
PARADIGM SILHOUETTE INFUS - insulin infusion pump supplies - infusion set	1	
PHARMACIST CHOICE ALCOHOL - alcohol swabs	1	
PRECISION GLUCOSE KETONE - blood glucose calibration - liquid	1	
PRO COMFORT ALCOHOL PADS - alcohol swabs	1	
PURE COMFORT ALCOHOL PREP - alcohol swabs	1	
QC ALCOHOL SWABS - alcohol swabs	1	
REALITY SWABS - alcohol swabs	1	
RELION ALCOHOL SWABS - alcohol swabs	1	
SAPS CARE ALCOHOL PREP PA - alcohol swabs	1	
SAPS HEALTH ALCOHOL PREP - alcohol swabs	1	
SAPS HEALTH CARE ALCOHOL - alcohol swabs	1	
SB ALCOHOL PREP PADS - alcohol swabs	1	
SILHOUETTE INFUSION SET 1 - insulin infusion pump supplies - infusion set	1	

Drug Name	Drug Tier	Requirements/Limits
SILHOUETTE INFUSION SET 2 - insulin infusion pump supplies - infusion set	1	
SILHOUETTE INFUSION SET 4 - insulin infusion pump supplies - infusion set	1	
SURE COMFORT ALCOHOL PREP - alcohol swabs	1	
SURE T INFUSION SET 18"/6 - insulin infusion pump supplies - infusion set	1	
SURE T INFUSION SET 23"/1 - insulin infusion pump supplies - infusion set	1	
SURE T INFUSION SET 23"/6 - insulin infusion pump supplies - infusion set	1	
SURE T INFUSION SET 23"/8 - insulin infusion pump supplies - infusion set	1	
SURE T INFUSION SET 32"/1 - insulin infusion pump supplies - infusion set	1	
SURE T INFUSION SET 32"/6 - insulin infusion pump supplies - infusion set	1	
SURE T INFUSION SET 32"/8 - insulin infusion pump supplies - infusion set	1	
TANDEM MOBI AUTOSOFT XC S - insulin infusion pump supplies - infusion set	1	
TANDEM MOBI AUTOSOFT XC 1 - insulin infusion pump supplies - infusion set	1	
TANDEM MOBI AUTOSOFT 30 S - insulin infusion pump supplies - infusion set	1	
TANDEM MOBI AUTOSOFT 30 1 - insulin infusion pump supplies - infusion set	1	
TANDEM MOBI TRUSTEEL SUPP - insulin infusion pump supplies - infusion set	1	
TANDEM T:SLIM ASFT XC PK1 - insulin infusion pump supplies - infusion set	1	
TANDEM T:SLIM ASFT 30 PK1 - insulin infusion pump supplies - infusion set	1	
TANDEM T:SLIM TRUSTL PK10 - insulin infusion pump supplies - infusion set	1	
TRUE COMFORT ALCOHOL PREP - alcohol swabs	1	
TRUE COMFORT PRO ALCOHOL - alcohol swabs	1	
TWIIST REFILL KIT - insulin infusion disposable pump reservoir kit	1	PA, QL (1 kit/30 days)
TWIIST REFILL KIT/INFUSIO - insulin infusion disposable pump reservoir/infus set kit	1	PA, QL (1 kit/30 days)
TWIIST STARTER KIT - insulin infusion disposable pump kit	1	PA, QL (1 kit/720 days)
ULTICARE ALCOHOL SWABS - alcohol swabs	1	
ULTILET ALCOHOL SWABS - alcohol swabs	1	
ULTRA-CARE ALCOHOL PREP P - alcohol swabs	1	
V-GO 20 - insulin infusion disposable pump kit 20 unit/24hr	1	PA, QL (30 systems/30 days)
V-GO 30 - insulin infusion disposable pump kit 30 unit/24hr	1	PA, QL (30 systems/30 days)

Drug Name	Drug Tier	Requirements/Limits
V-GO 40 - insulin infusion disposable pump kit 40 unit/24hr	1	PA, QL (30 systems/30 days)
WEBCOL ALCOHOL PREP LARGE - alcohol swabs	1	
WEBCOL ALCOHOL PREP MEDIU - alcohol swabs	1	
WIDE-SEAL SILICONE DIAPHR - diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 85 mm, 90 mm, 95 mm	1	ACA
ZEVRX STERILE ALCOHOL PRE - alcohol swabs	1	
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azathioprine tab 50 mg (Imuran)	1	
azathioprine tab 75 mg, 100 mg	1	
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	
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)	1	
lenalidomide caps 2.5 mg (Revlimid)	1	PA, QL (30 capsules/30 days), SP
lenalidomide cap 5 mg, 10 mg (Revlimid)	1	PA, QL (30 capsules/30 days), SP
lenalidomide cap 15 mg, 20 mg, 25 mg (Revlimid)	1	PA, QL (21 capsules/28 days), 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 tab 250 mg (Depen titratabs)	1	SP
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sirolimus tab 0.5 mg, 1 mg, 2 mg	1	
sodium polystyrene sulfonate powder	1	
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