MVP Health Care®
2026 Formulario Comprensivo de MVP DualAccess (HMO D-SNP)
(Lista de Drogas Cubiertas)

Lea: Este documento contiene información sobre los medicamentos que cubrimos en este plan. Este Formulario se actualizó el 1 de octubre de 2025. Para obtener información o preguntas más recientes, comuníquese con el Centro de Atención al Cliente de Medicare MVP.

Recursos adicionales para ayudar: Comuníquese con el Centro de Atención al Cliente de Medicare MVP al **1-866-954-1872** para obtener información adicional.
Los usuarios de TTY deben llamar al 711. El horario es de siete días a la semana, de 8 a.m. a 8 p.m., hora del este.
Del 1 de abril al 30 de septiembre, llame de lunes a viernes, de 8 a.m. a 8 p.m.

Visite **mvphealthcare.com/partdformulary** para obtener la lista de formularios más actualizada.

Formulary ID 26118, Version 8
Updated 10/2025
Y0051_0702_C

MVP® HEALTH CARE

Nota a los miembros existentes: Este formulario ha cambiado desde el año pasado. Examine este documento para asegurarse de que aún contiene lo medicamentos que usted toma.

Cuando esta lista de medicamentos (formulario) se refiere a "nosotros," "nos," o "nuestro," quiere decir MVP Health Care. Cuando se refiere a "plan" o "nuestro plan," quiere decir MVP DualAccess (HMO D-SNP)

Este documento incluye lista de medicamentos (formulario) para nuestro plan que está al día el 1 de octubre de 2025. Para obtener un formulario actualizado, póngase en contacto con nosotros. Nuestra información de contacto, junto con la fecha de la última vez que actualizamos el formulario, aparece en las cubiertas delantera y trasera.

Generalmente, debe utilizar farmacias de red para utilizar su beneficio de medicamentos de receta. Los beneficios, el formulario, la red de farmacias, y/o los copagos/el coseguro pueden cambiar el 1 de enero de 2027, y de vez en cuando durante el año.

¿Qué es el Formulario del MVP Health Care?

Un formulario es una lista de medicamentos cubiertos seleccionados por MVP Health Care consultando con un equipo de proveedores de atención médica, que representa las terapias de receta que se cree son parte necesaria de un programa de tratamiento de calidad. Generalmente, MVP cubrirá los medicamentos enumerados en nuestro formulario siempre que el medicamento sea necesario por motivos médicos, la receta se surta en una farmacia de la red de MVP y se sigan otras reglas del plan. Para obtener más información acerca de cómo surtir sus recetas, examine su Evidencia de Cobertura.

¿Puede cambiar el Formulario (lista de medicamentos)?

La mayoría de los cambios en la cobertura de los medicamentos ocurren el 1 de enero, pero MVP podría agregar o quitar medicamentos de la Lista de medicamentos durante el año, moverlos a diferentes niveles de costo compartido o agregar nuevas restricciones.

Cambios que pueden afectarlo este año
En los casos a continuación, usted se verá afectado por los cambios de cobertura durante el año.

Sustituciones inmediatas de ciertas nuevas versiones de medicamentos de marca y productos biológicos originales

Es posible que eliminemos inmediatamente un medicamento de nuestro formulario si lo estamos reemplazando con una nueva versión determinada de ese medicamento que aparecerá en el mismo nivel de costo compartido o en el más bajo y con las mismas o menos restricciones. Cuando agregamos una nueva versión de un medicamento a nuestro formulario, podemos decidir mantener el medicamento de marca o el producto biológico original en nuestro formulario, pero moverlo inmediatamente a un nivel diferente de costos compartidos o agregar nuevas restricciones.

Podemos hacer estos cambios inmediatos solo si estamos agregando una nueva versión genérica de un medicamento de marca, o si estamos agregando ciertas nuevas versiones biosimilares de un producto biológico original, que ya estaba en el formulario (por ejemplo, agregando un biosimilar intercambiable que puede ser sustituido por un producto biológico original por una farmacia sin una nueva receta).

Si actualmente está tomando el medicamento de marca o el producto biológico original, es posible que no le informemos con anticipación antes de realizar un cambio inmediato, pero más adelante le proporcionaremos información sobre los cambios específicos que hemos realizado.

Si hacemos un cambio de este tipo, usted o su médico pueden pedirnos que hagamos una excepción y que continuemos cubriéndole el medicamento que se está cambiando. Para obtener más información, consulte la sección a continuación titulada "¿Cómo solicito una excepción al Formulario MVP Medicare Parte D?

Algunos de estos tipos de medicamentos pueden ser nuevos para usted. Para obtener más información, consulte la sección a continuación titulada "¿Qué son los productos biológicos originales y cómo se relacionan con los biosimilares?"

Medicamentos retirados del mercado

Si la Administración de Alimentos y Medicamentos considera que un medicamento de nuestro Formulario es inseguro o el fabricante del medicamento lo retira del mercado, eliminaremos de inmediato dicho medicamento de nuestro Formulario y les notificaremos a los miembros que toman el medicamento en cuestión.

Otros cambios

Podemos hacer otros cambios que afectan a los miembros que actualmente toman un medicamento. Por ejemplo, podemos agregar un nuevo medicamento genérico para reemplazar un medicamento de marca que se encuentra actualmente en el Formulario; o agregar nuevas restricciones al medicamento de marca o cambiarlo a un nivel de costo compartido diferente, o ambos. O podemos agregar un nuevo medicamento genérico para reemplazar un medicamento de marca que actualmente se encuentre en el Formulario o agregar nuevas restricciones al medicamento de marca o moverlo a un nivel de costo compartido diferente. O bien, podemos hacer cambios en función de las nuevas

pautas clínicas. Si retiramos medicamentos de nuestro Formulario, o agregamos autorizaciones previas, restricciones de límite de cantidad o de tratamiento escalonado en un medicamento, o si pasamos un medicamento a un nivel superior de costo compartido, debemos notificarles a los miembros afectados por el cambio al menos 30 días antes de que entre en vigencia dicho cambio, o cuando el miembro solicite un resurtido del medicamento, momento en el cual el miembro recibirá un al menos el mes applicable suministro de medicamentos (hasta treinta días)

- Si realizamos estos otros cambios, usted o la persona autorizada a dar recetas pueden solicitarnos que hagamos una excepción y sigamos cubriendo el medicamento de marca para usted. En el aviso que le proporcionamos también se incluirá información sobre cómo solicitar una excepción, y usted también puede encontrar información en la sección a continuación titulada "¿Cómo puedo solicitar que se haga una excepción al Formulario de MVP Health Care?".

Cambios que no lo afectarán si actualmente toma el medicamento

En general, si usted toma un medicamento de nuestro Formulario para 2026 que estaba cubierto al comienzo del año, nosotros no discontinuaremos ni reduciremos la cobertura del medicamento durante el año de cobertura 2026, excepto como se describe anteriormente. Esto significa que, por el resto del año de cobertura, estos medicamentos continuarán disponibles al mismo costo compartido y sin nuevas restricciones para aquellos miembros que estén tomándolos.

No recibirá un aviso directo este año sobre cambios que no lo afectan. Sin embargo, dichos cambios lo afectarían a partir del 1 de enero del año siguiente, y es importante que verifique la Lista de medicamentos del nuevo año de beneficios por cualquier cambio en los medicamentos.

El formulario adjunto está al día 1 de octubre de 2025. Para obtener información actualizada acerca de los medicamentos cubiertos por MVP Health Care, póngase en contacto con nosotros. Nuestra información de contacto aparece en las cubiertas delantera y trasera.

En el caso de un cambio o cambios en el Formulario durante el año, los cambios también se publicarán en **mvphealthcare.com**. La versión actualizada del Formulario completo se publicará en el sitio web de MVP mensualmente según sea necesario. Para ver la lista de cambios, visite **mvphealthcare.com/partdformulary.**

O puede solicitar una fe de errata (una copia de los Cambios en el Formulario de 2026) llamando al Centro de Servicios a los Afiliados en los números de teléfono que aparecen en el reverso de su tarjeta de ID de miembro.

¿Cómo se utiliza el Formulario?

Hay dos maneras de encontrar su medicamento en el formulario:

Condición Médica

El formulario empieza en la página 1. Los medicamentos de este formulario están agrupados en categorías según el tipo de condición médica para el tratamiento de la cual se utilizan. Por ejemplo, los medicamentos que se utilizan para tratar una condición cardiaca se enumeran bajo la categoría, "Cardiovascular". Si sabe para qué se utiliza su medicamento, busque el nombre de la categoría en la lista que empieza en la página 1. Después, busque su medicamento bajo el nombre de la categoría.

Lista Alfabética

Si no está seguro de la categoría bajo la cual buscar, debe buscar su medicamento en el Índice que empieza en la página 81. El Índice da una lista alfabética de todos los medicamentos incluidos en este documento. Tanto los medicamentos de marca como los genéricos se enumeran en el Índice.

1. Mire en el Índice para encontrar su medicamento.
2. Al lado de su medicamento verá el número de la página donde puede encontrar información de cobertura.
3. Vaya a la página indicada en el Índice y busque el nombre de su medicamento en la primera columna de la lista.

¿Qué son medicamentos genéricos?

MVP cubre tanto medicamentos de marca como los medicamentos genéricos. Un medicamento genérico está aprobado por la Administración de Alimentos y Medicamentos (FDA) indicando que tiene el mismo ingrediente activo que el medicamento de marca. Generalmente, los medicamentos genéricos cuestan menos que los medicamentos de marca.

¿Qué son los productos biológicos originales y cómo se relacionan con los biosimilares?

En el formulario, cuando nos referimos a medicamentos, esto podría significar un medicamento o un producto biológico. Los productos biológicos son medicamentos más complejos que los medicamentos típicos. Dado que los productos biológicos son más complejos que los medicamentos típicos, en lugar de tener una forma genérica, tienen alternativas que se llaman biosimilares. Por lo general, los biosimilares funcionan tan bien como el producto biológico original y pueden costar menos. Existen alternativas biosimilares para algunos productos biológicos originales. Algunos biosimilares son biosimilares intercambiables y, dependiendo de las leyes estatales, pueden ser sustituidos por el producto biológico original en la farmacia sin necesidad de una nueva receta, al igual que los medicamentos genéricos pueden ser sustituidos por medicamentos de marca.

¿Hay restricciones en mi cobertura?

Es posible que algunos medicamentos cubiertos tengan requisitos adicionales o límites de cobertura. Estos requisitos y límites pueden incluir:

Autorización Previa

MVP requiere que usted o su médico obtenga autorización previa para ciertos medicamentos. Esto quiere decir que necesitará obtener la aprobación de MVP antes de surtir sus recetas. Si no obtiene aprobación, es posible que MVP no cubra el medicamento.

Límites de Cantidad

Para ciertos medicamentos, MVP limita la cantidad de medicamento que cubrirá MVP. Por ejemplo, MVP proporciona 30 tabletas cada 30 días por receta para JANUVIA. Esto puede ser además de un suministro estándar de un mes o tres meses.

Terapia en Pasos

En algunos casos, MVP requiere que pruebe primero ciertos medicamentos para tratar su condición médica antes de que cubramos otro medicamento para esa condición. Por ejemplo, si el Medicamento A y el Medicamento B tratan su condición médica, es posible que MVP no cubra el Medicamento B a menos que pruebe primero el Medicamento A. Si el Medicamento A no le va bien, MVP cubrirá entonces el Medicamento B.

Puede averiguar si su medicamento tiene requisitos o límites adicionales mirando en el formulario que empieza en la página 1. También puede obtener más información acerca de las restricciones aplicadas a medicamentos específicos cubiertos visitando nuestro sitio

Web. Hemos puesto en línea documentos que explican nuestras restricciones de autorización prévia y de terapia de paso.] También puede pedirnos que le enviemos una copia. Nuestra información de contacto, junto con la fecha de la última actualización del formulario, aparece en las cubiertas delantera y trasera.

Puede pedirle a MVP que haga una excepción a estas restricciones a límites, o pedirle una lista de otros medicamentos parecidos que puedan tratar su condición médica. Vea la sección, "¿Cómo se solicita una excepción al Formulario de MVP Health Care?" en la página E para ver información acerca de la manera de solicitar una excepción.

¿Qué pasa si mi medicamento no está en el Formulario?

Si su medicamento no está incluido en este formulario (lista de medicamentos cubiertos), lo primero que debe hacer es ponerse en contacto con Servicios de Miembros y preguntar si está cubierto su medicamento. Este documento incluye solo una lista parcial de los medicamentos cubiertos, por eso es posible que MVP cubra su medicamento. Para obtener más información, comuníquese con nosotros. Nuestra información de contacto, junto con la fecha de la última actualización del formulario, aparece en las cubiertas delantera y trasera.

Si averigua que MVP Health Care no cubre su medicamento, tiene dos opciones:

1. Puede pedirle el Centro de Servicios a los Afiliados de MVP una lista de medicamentos parecidos que estén cubiertos por MVP. Cuando reciba la lista, enséñesela a su médico y pídale que le recete un medicamento parecido que esté cubierto por MVP.
2. Le puede pedir a MVP que haga una excepción y cubra su medicamento. Vea la información que aparece a continuación para ver cómo solicitar una excepción.

¿Cómo se solicita una excepción al Formulario de MVP Health Care?

Le puede pedir a MVP Health Care que haga una excepción a nuestras reglas de cobertura. Hay varios tipos de excepciones que puede pedirnos que hagamos.

- Puede pedirnos que cubramos un medicamento aún si no está en nuestro formulario. Si se aprueba, este medicamento se cubrirá a un nivel predeterminado de costo compartido, y usted no podría pedirnos que proporcionemos el medicamento a un nivel más bajo de costo compartido.

- Puede pedirnos que cubramos un medicamento del formulario a un nivel más bajo de costo compartido. Si se aprueba, esto reduciría la cantidad que debe pagar usted por su medicamento. **NOTA:** Usted no puede solicitarnos la cobertura de un medicamento de Nivel 5 (Nivel de medicamentos especializados) a un nivel de costo compartido más bajo.
- Puede pedirnos que demos una exención para las restricciones o límites de cobertura de su medicamento. Por ejemplo, para ciertos medicamentos, MVP Health Care limita la cantidad de medicamento que cubrimos. Si su medicamento tiene un límite de cantidad, pude pedirnos que otorguemos una exención para el límite y que cubramos una cantidad agostor.

Generalmente, MVP solamente aprobará su solicitud de excepción si los medicamentos de alternativa incluidos en el formulario del plan, el medicamento de costo compartido más bajo, o las restricciones de utilización adicionales no serían tan efectivas en el tratamiento de su condición y/o harían que usted tuviera efectos médicos adversos.

Debe ponerse en contacto con nosotros para pedirnos una decisión de cobertura inicial para una excepción al formulario o de las restricciones de utilización. **Cuando solicite una excepción al formulario o de restricciones de utilización, debe presentar una declaración de su recetador o médico apoyando su solicitud.** Generalmente, tenemos que tomar una decisión dentro de las 72 horas siguientes a recibir la declaración de apoyo de su recetador. Puede solicitar una excepción acelerada (rápida) si usted o su médico cree que su salud podría verse severamente dañada si espera 72 horas para recibir una decisión. Si su solicitud de acelerar se concede, debemos darle una decisión no más de 24 horas después de recibir una declaración de apoyo de su médico u otro recetador.

¿Qué hago antes de poder hablar con mi médico acerca de cambiar mis medicamentos o solicitar una excepción?

Como miembro nuevo de o si continua en nuestro plan, puede que esté tomando medicamentos que no estén en nuestro formulario. O puede que esté tomando un medicamento que esté en el formulario pero su habilidad de obtenerlo sea limitada. Por ejemplo, puede que necesite autorización previa nuestra antes de poder surtir su receta. Debe hablar con su médico para decidir si debería cambiar a un medicamento apropiado que cubramos o solicitar una excepción al formulario para que cubramos el medicamento que toma. Mientras habla con su médico para determinar el rumbo correcto que seguir, puede que cubramos su medicamento en ciertos casos durante los primeros 90 días que sea miembro de nuestro plan.

Para cada uno de sus medicamentos que no esté en nuestro formulario o si su habilidad de obtener sus medicamentos es limitada, cubriremos un suministro temporal para un

suministro de un mes. Si su receta está indicada para menos días, permitiremos que realice resurtidos por un máximo de hasta 30 días del medicamento. Después del primer suministro para 30 días, no seguiremos pagando estos medicamentos, incluso si ha sido miembro del plan durante menos de 90 días.

Si es residente de un centro de atención a largo plazo y necesita un medicamento que no está en el Formulario o si su capacidad para conseguir los medicamentos es limitada, pero ya pasaron los primeros 90 días de membresía en nuestro plan, cubriremos un suministro de emergencia del medicamento para 31 días mientras solicita la excepción al formulario.

Los miembros que estén cambiando los niveles de cuidado pueden ser elegibles para un suministro de medicamentos de transición fuera de su período de transición de inscripción inicial de 90 días. Los cambios en el nivel de atención pueden incluir: ingresar o salir de un centro de cuidados a largo plazo, dar de alta del hospital al hogar y terminar la estancia en un centro de enfermería especializada y regresar a la cobertura del Formulario de la Parte D bajo su plan.

Para obtener más información

Para obtener información más detallada acerca de su cobertura de medicamentos de receta de MVP Health Care, examine su Evidencia de Cobertura y otros materiales del plan.

Si tiene preguntas acerca de MVP Health Care, póngase en contacto con nosotros. Nuestra información de contacto, junto con la fecha de la última actualización del Formulario, aparece en las cubiertas delantera y trasera.

Si tiene preguntas generales acerca de la cobertura de medicamentos de receta de Medicare, llame a Medicare al **1-800-MEDICARE** (**1-800-633-4227**) 24 horas al día / 7 días a la semana. Los usuarios de TTY deben llamar al 1-877-486-2048. O visite **medicare.gov**.

Formulario de MVP Health Care

El formulario que empieza en página 1 proporciona información de cobertura acerca de los medicamentos cubiertos por MVP Health Care. Si tiene dificultades para encontrar su medicamento en la lista, vaya al Índice que empieza en la página 81.

La primera columna de la tabla indica el nombre del medicamento. Los medicamentos de marca están en letras mayúsculas (por ejemplo, JANUVIA) y los medicamentos genéricos aparecen en cursiva minúscula (por ejemplo, *allopurinol*).

La información de la columna de Requisitos/Límites le dice si MVP tiene algún requisito especial para la cobertura de su medicamento.

Abreviaturas y definiciones de los términos del formulario

Puede encontrar una o más de las siguientes abreviaturas en el Formulario bajo la columna Requisitos/Límites junto a un nombre de medicamento.

No disponible mediante pedido por correo (NM)
No se permiten ciertos medicamentos a través del programa de farmacia de pedidos por correo. Estas recetas solo pueden abastecerse en una farmacia minorista.

Autorización previa (PA)
Por razones de seguridad y/o ahorro de costos, MVP Health Care requiere que usted o su médico obtengan autorización previa para ciertos medicamentos. Esto significa que

necesitará tener una aprobación de MVP antes de surtir sus recetas. Si no obtiene la aprobación primero, es posible que MVP no cubra el medicamento.

Límites de cantidad (QL)
Por razones de seguridad y/o ahorro de costos, MVP Health Care establece un límite en la cantidad del medicamento que cubrimos para ciertos medicamentos. Por ejemplo, MVP proporciona una cápsula al día para JANUVIA. Este límite puede aplicarse a un suministro estándar de un mes o de tres meses.

Terapia escalonada (ST)
Por razones de seguridad y/o ahorro de costos, en algunos casos MVP Health Care requiere que primero pruebe algunos medicamentos para tratar su afección médica antes de que cubramos otro medicamento para esta afección. Por ejemplo, si un medicamento A y un medicamento B tratan su afección médica, puede ser que MVP no cubra el medicamento B a menos que pruebe con el medicamento A primero. Si el medicamento A no funciona para usted, entonces MVP cubrirá el medicamento B.

Límites de suministro (DL)
Por razones de seguridad y/o ahorro de costos, ciertos medicamentos se limitan a un suministro de 30 días a través de una farmacia minorista y no están disponibles a través del programa de pedido por correo.

Acceso limitado (LA)
Algunos medicamentos solamente están disponibles a través de una Farmacia especializada designada debido a la distribución limitada del fabricante.

Cobertura de medicamentos de la Parte B frente a la cobertura de medicamentos de la Parte D (B/D)
Algunos medicamentos podrían cubrirse bajo el beneficio de la Parte B o Parte D, dependiendo de ciertos requisitos. Esto significa que usted o su médico deberán presentar una solicitud a MVP Health Care para que podamos determinar, basándonos en las pautas de Medicare, si su medicamento estará cubierto como Parte B o Parte D. Sus costos compartidos se basarán en esta determinación.

ANALGESICS 1

ANTI-INFECTIVES 3

ANTINEOPLASTIC AGENTS 11

CARDIOVASCULAR 23

CENTRAL NERVOUS SYSTEM 31

ENDOCRINE AND METABOLIC 46

GASTROINTESTINAL 58

GENITOURINARY 60

HEMATOLOGIC 61

IMMUNOLOGIC AGENTS 63

NUTRITIONAL/SUPPLEMENTS 68

OPHTHALMIC 70

OTIC 72

RESPIRATORY 72

TOPICAL 76

Index 81

MVP_CY26_6T_SNP eff 01/01/2026

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
GOUT		
allopurinol TABS 100mg, 300mg	1	
colchicine TABS .6mg	3	QL (120 tabs / 30 days)
colchicine w/ probenecid tab 0.5-500 mg	3	
probenecid TABS 500mg	3	
MISCELLANEOUS		
lidocaine hcl (local anesth.) SOLN .5%, 1%, 1.5%, 2%	3	B/D
NSAIDS		
celecoxib CAPS 50mg, 100mg, 200mg	3	QL (60 caps / 30 days)
celecoxib CAPS 400mg	3	QL (30 caps / 30 days)
diclofenac potassium TABS 50mg	2	QL (120 tabs / 30 days)
diclofenac sodium TB24 100mg	3	
diclofenac sodium TBEC 25mg, 50mg, 75mg	2	
diflunisal TABS 500mg	3	
etodolac CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	3	
flurbiprofen TABS 100mg	3	
ibu TABS 400mg, 600mg, 800mg	1	
ibuprofen SUSP 100mg/5ml	3	
ibuprofen TABS 400mg, 600mg, 800mg	1	
meloxicam TABS 7.5mg, 15mg	1	
nabumetone TABS 500mg, 750mg	2	
naproxen TABS 250mg, 375mg, 500mg	1	
naproxen TBEC 375mg	2	QL (120 tabs / 30 days)
naproxen sodium TABS 275mg, 550mg	3	
piroxicam CAPS 10mg, 20mg	3	
sulindac TABS 150mg, 200mg	2	
OPIOID ANALGESICS, LONG-ACTING		
buprenorphine PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	4	QL (4 patches / 28 days), PA
fentanyl PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	4	QL (10 patches / 30 days), PA
hydrocodone bitartrate T24A 20mg, 30mg, 40mg, 60mg, 80mg	4	QL (30 tabs / 30 days), PA
hydrocodone bitartrate T24A 100mg, 120mg	5	QL (30 tabs / 30 days), PA
methadone hcl SOLN 5mg/5ml, 10mg/5ml	3	QL (450 mL / 30 days), PA
methadone hcl TABS 5mg, 10mg	3	QL (90 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
methadone hydrochloride i CONC 10mg/ml	3	QL (90 mL / 30 days), PA
morphine sulfate TBCR 15mg, 30mg, 60mg, 100mg, 200mg	3	QL (90 tabs / 30 days), PA
OPIOID ANALGESICS, SHORT-ACTING		
acetaminophen w/ codeine soln 120-12 mg/5ml	3	QL (2700 mL / 30 days)
acetaminophen w/ codeine tab 300-15 mg	2	QL (400 tabs / 30 days)
acetaminophen w/ codeine tab 300-30 mg	2	QL (360 tabs / 30 days)
acetaminophen w/ codeine tab 300-60 mg	2	QL (180 tabs / 30 days)
butorphanol tartrate SOLN 1mg/ml, 2mg/ml	4	
endocet tab 2.5-325mg	3	QL (360 tabs / 30 days)
endocet tab 5-325mg	3	QL (360 tabs / 30 days)
endocet tab 7.5-325mg	3	QL (240 tabs / 30 days)
endocet tab 10-325mg	3	QL (180 tabs / 30 days)
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	4	QL (2700 mL / 30 days)
hydrocodone-acetaminophen tab 5-325 mg	3	QL (240 tabs / 30 days)
hydrocodone-acetaminophen tab 7.5-325 mg	3	QL (180 tabs / 30 days)
hydrocodone-acetaminophen tab 10-325 mg	3	QL (180 tabs / 30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	3	QL (150 tabs / 30 days)
hydromorphone hcl LIQD 1mg/ml	4	QL (600 mL / 30 days)
hydromorphone hcl TABS 2mg, 4mg, 8mg	3	QL (180 tabs / 30 days)
morphine sulfate SOLN 2mg/ml, 4mg/ml, 8mg/ml, 10mg/ml	4	B/D
morphine sulfate SOLN 10mg/5ml, 20mg/5ml	3	QL (900 mL / 30 days)
morphine sulfate SOLN 100mg/5ml	3	QL (180 mL / 30 days)
morphine sulfate TABS 15mg, 30mg	3	QL (180 tabs / 30 days)
oxycodone hcl CONC 100mg/5ml	4	QL (180 mL / 30 days)
oxycodone hcl SOLN 5mg/5ml	4	QL (900 mL / 30 days)
oxycodone hcl TABS 5mg, 10mg, 15mg, 20mg, 30mg	3	QL (180 tabs / 30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg	3	QL (360 tabs / 30 days)
oxycodone w/ acetaminophen tab 5-325 mg	3	QL (360 tabs / 30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg	3	QL (240 tabs / 30 days)
oxycodone w/ acetaminophen tab 10-325 mg	3	QL (180 tabs / 30 days)
tramadol hcl TABS 50mg	2	QL (240 tabs / 30 days)
tramadol-acetaminophen tab 37.5-325 mg	2	QL (240 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
ANTI-INFECTIVES		
ANTI-INFECTIVES - MISCELLANEOUS		
albendazole TABS 200mg	4	QL (672 tabs / year), PA
amikacin sulfate SOLN 1gm/4ml, 500mg/2ml	4	
ARIKAYCE SUSP 590mg/8.4ml	5	NM, PA
atovaquone SUSP 750mg/5ml	4	QL (300 mL / 30 days), PA
aztreonam SOLR 1gm, 2gm	4	
CAYSTON SOLR 75mg	5	NM, PA
clindamycin hcl CAPS 75mg, 150mg, 300mg	2	
clindamycin palmitate hydrochloride SOLR 75mg/5ml	4	
clindamycin phosphate SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml	3	
clindamycin phosphate in d5w iv soln 300 mg/50ml	4	
clindamycin phosphate in d5w iv soln 600 mg/50ml	4	
clindamycin phosphate in d5w iv soln 900 mg/50ml	4	
CLINDMYC/NAC INJ 300/50ML	4	
CLINDMYC/NAC INJ 600/50ML	4	
CLINDMYC/NAC INJ 900/50ML	4	
colistimethate sodium SOLR 150mg	4	
dapsone TABS 25mg, 100mg	3	
DAPTOMYCIN SOLR 350mg	5	
daptomycin SOLR 350mg, 500mg	5	
EMVERM CHEW 100mg	5	QL (12 tabs / year)
ertapenem sodium SOLR 1gm	3	
fosfomycin tromethamine PACK 3gm	4	
gentamicin in saline inj 0.8 mg/ml	3	
gentamicin in saline inj 1 mg/ml	3	
gentamicin in saline inj 1.2 mg/ml	3	
gentamicin in saline inj 1.6 mg/ml	3	
gentamicin in saline inj 2 mg/ml	3	
gentamicin sulfate SOLN 10mg/ml, 40mg/ml	3	
imipenem-cilastatin intravenous for soln 250 mg	4	
imipenem-cilastatin intravenous for soln 500 mg	4	
IMPAVIDO CAPS 50mg	5	PA
ivermectin TABS 3mg	3	QL (20 tabs / 90 days), PA

Drug Name	Drug Tier	Requirements/Limits
ivermectin TABS 6mg	3	QL (10 tabs / 90 days), PA
linezolid SOLN 600mg/300ml	4	
linezolid SUSR 100mg/5ml	5	QL (1800 mL / 30 days)
linezolid TABS 600mg	4	QL (60 tabs / 30 days)
LINEZOLID INJ 2MG/ML	4	
meropenem SOLR 1gm, 2gm, 500mg	4	
methenamine hippurate TABS 1gm	3	
metronidazole SOLN 500mg/100ml	3	
metronidazole TABS 250mg, 500mg	1	
neomycin sulfate TABS 500mg	2	
nitazoxanide TABS 500mg	5	QL (6 tabs / 30 days)
nitrofurantoin macrocrystal CAPS 50mg, 100mg	3	
nitrofurantoin monohyd macro CAPS 100mg	3	
pentamidine isethionate inh SOLR 300mg	4	B/D
pentamidine isethionate inj SOLR 300mg	4	
polymyxin b sulfate SOLR 500000unit	4	
praziquantel TABS 600mg	4	
pyrimethamine TABS 25mg	5	QL (90 tabs / 30 days), PA
streptomycin sulfate SOLR 1gm	5	
sulfadiazine TABS 500mg	5	
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml	4	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	3	
sulfamethoxazole-trimethoprim tab 400-80 mg	1	
sulfamethoxazole-trimethoprim tab 800-160 mg	1	
tinidazole TABS 250mg, 500mg	3	
TOBI PODHALER CAPS 28mg	5	NM, PA
tobramycin NEBU 300mg/5ml	5	NM, PA
tobramycin sulfate SOLN 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml	3	
trimethoprim TABS 100mg	3	
vancomycin hcl CAPS 125mg	4	QL (80 caps / 180 days)
vancomycin hcl CAPS 250mg	4	QL (160 caps / 180 days)
vancomycin hcl SOLR 1gm, 1.25gm, 1.5gm, 5gm, 10gm, 500mg, 750mg	4	
VANCOMYCIN INJ 1 GM	4	
VANCOMYCIN INJ 500MG	4	
VANCOMYCIN INJ 750MG	4	

Drug Name	Drug Tier	Requirements/Limits
ANTIFUNGALS		
amphotericin b SOLR 50mg	4	B/D
amphotericin b liposome SUSR 50mg	5	B/D
caspofungin acetate SOLR 50mg, 70mg	4	
CRESEMBA CAPS 74.5mg, 186mg	5	PA
fluconazole SUSR 10mg/ml, 40mg/ml; TABS 50mg	3	
fluconazole TABS 100mg, 150mg, 200mg	2	
fluconazole in nacl 0.9% inj 200 mg/100ml	3	
fluconazole in nacl 0.9% inj 400 mg/200ml	3	
flucytosine CAPS 250mg, 500mg	5	PA
griseofulvin microsize SUSP 125mg/5ml; TABS 500mg	4	
griseofulvin ultramicrosize TABS 125mg, 250mg	4	
itraconazole CAPS 100mg	4	QL (120 caps / 30 days)
ketoconazole TABS 200mg	3	
micafungin sodium SOLR 50mg, 100mg	4	
nystatin TABS 500000unit	3	
posaconazole TBEC 100mg	5	QL (93 tabs / 30 days), PA
terbinafine hcl TABS 250mg	2	QL (30 tabs / 30 days), PA; PA applies after a 90 day supply in a calendar year
voriconazole SOLR 200mg	4	PA
voriconazole SUSR 40mg/ml	5	QL (600 mL / 28 days), PA
voriconazole TABS 50mg	4	QL (480 tabs / 30 days)
voriconazole TABS 200mg	4	QL (120 tabs / 30 days)
ANTIMALARIALS		
atovaquone-proguanil hcl tab 62.5-25 mg	4	
atovaquone-proguanil hcl tab 250-100 mg	4	
chloroquine phosphate TABS 250mg, 500mg	4	
COARTEM TAB 20-120MG	4	
mefloquine hcl TABS 250mg	3	
primaquine phosphate TABS 26.3mg	3	
PRIMAQUINE PHOSPHATE TABS 26.3mg	3	
quinine sulfate CAPS 324mg	4	PA
ANTIRETROVIRAL AGENTS		
abacavir sulfate SOLN 20mg/ml; TABS 300mg	4	NM
APTIVUS CAPS 250mg	5	NM
atazanavir sulfate CAPS 150mg, 200mg, 300mg	4	NM

Drug Name	Drug Tier	Requirements/Limits
darunavir TABS 600mg	4	QL (60 tabs / 30 days), NM
darunavir TABS 800mg	4	QL (30 tabs / 30 days), NM
EDURANT TABS 25mg	5	NM
EDURANT PED TBSO 2.5mg	5	NM
efavirenz TABS 600mg	4	NM
emtricitabine CAPS 200mg	4	NM
EMTRIVA SOLN 10mg/ml	4	NM
etravirine TABS 100mg, 200mg	5	NM
fosamprenavir calcium TABS 700mg	5	NM
INTELENCE TABS 25mg	4	NM
ISENTRESS CHEW 25mg	4	NM
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	5	NM
ISENTRESS HD TABS 600mg	5	NM
lamivudine SOLN 10mg/ml; TABS 150mg, 300mg	3	NM
maraviroc TABS 150mg, 300mg	5	NM
nevirapine SUSP 50mg/5ml; TB24 400mg	4	NM
nevirapine TABS 200mg	2	NM
NORVIR PACK 100mg	4	NM
PIFELTRO TABS 100mg	5	NM
PREZISTA SUSP 100mg/ml	5	QL (400 mL / 30 days), NM
PREZISTA TABS 75mg	4	QL (480 tabs / 30 days), NM
PREZISTA TABS 150mg	5	QL (240 tabs / 30 days), NM
REYATAZ PACK 50mg	5	NM
ritonavir TABS 100mg	3	NM
RUKOBIA TB12 600mg	5	NM
SELZENTRY SOLN 20mg/ml	5	NM
SUNLENCA TABS 300mg; TBPK 300mg	5	NM
tenofovir disoproxil fumarate TABS 300mg	4	NM
TIVICAY TABS 50mg	5	NM
TIVICAY PD TBSO 5mg	5	NM
TROGARZO SOLN 200mg/1.33ml	5	NM
TYBOST TABS 150mg	3	NM
VIRACEPT TABS 250mg, 625mg	5	NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	5	NM
zidovudine CAPS 100mg	4	NM
zidovudine SYRP 50mg/5ml; TABS 300mg	3	NM

Drug Name	Drug Tier	Requirements/Limits
ANTIRETROVIRAL COMBINATION AGENTS		
abacavir sulfate-lamivudine tab 600-300 mg	4	NM
BIKTARVY TAB 30-120-15 MG	5	NM
BIKTARVY TAB 50-200-25 MG	5	NM
CIMDUO TAB 300-300	5	NM
DELSTRIGO TAB	5	NM
DESCOVY TAB 120-15MG	5	NM
DESCOVY TAB 200/25MG	5	NM
DOVATO TAB 50-300MG	5	NM
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	4	NM
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	5	NM
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	5	NM
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	5	NM
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg	4	NM
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg	5	NM
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg	4	NM
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg	4	NM
EVOTAZ TAB 300-150	5	NM
GENVOYA TAB	5	NM
JULUCA TAB 50-25MG	5	NM
KALETRA SOL	4	NM
lamivudine-zidovudine tab 150-300 mg	4	NM
lopinavir-ritonavir tab 100-25 mg	4	NM
lopinavir-ritonavir tab 200-50 mg	4	NM
ODEFSEY TAB	5	NM
PREZCOBIX TAB 675/150	5	NM
PREZCOBIX TAB 800-150	5	NM
STRIBILD TAB	5	NM
SYMTUZA TAB	5	NM
TRIUMEQ PD TAB	4	NM
TRIUMEQ TAB	5	NM
ANTITUBERCULAR AGENTS		
cycloserine CAPS 250mg	5	
ethambutol hcl TABS 100mg, 400mg	3	
isoniazid SYRP 50mg/5ml	4	
isoniazid TABS 100mg, 300mg	1	
PRIFTIN TABS 150mg	4	

Drug Name	Drug Tier	Requirements/Limits
pyrazinamide TABS 500mg	4	
rifabutin CAPS 150mg	4	
rifampin CAPS 150mg, 300mg	3	
rifampin SOLR 600mg	4	
SIRTURO TABS 20mg, 100mg	5	NM, PA
ANTIVIRALS		
acyclovir CAPS 200mg; TABS 400mg, 800mg	2	
acyclovir SUSP 200mg/5ml	4	
acyclovir sodium SOLN 50mg/ml	4	B/D
adefovir dipivoxil TABS 10mg	4	NM
BARACLUDE SOLN .05mg/ml	5	NM, ST
entecavir TABS .5mg, 1mg	4	NM
EPCLUSA PAK 150-37.5	5	NM, PA
EPCLUSA PAK 200-50MG	5	NM, PA
EPCLUSA TAB 200-50MG	5	NM, PA
EPCLUSA TAB 400-100	5	NM, PA
famciclovir TABS 125mg, 250mg, 500mg	3	
ganciclovir sodium SOLR 500mg	4	B/D
lamivudine (hbv) TABS 100mg	3	NM
LIVTENCITY TABS 200mg	5	QL (336 tabs / 28 days), NM, PA
MAVYRET PAK 50-20MG	5	NM, PA
MAVYRET TAB 100-40MG	5	NM, PA
oseltamivir phosphate CAPS 30mg	3	QL (168 caps / year)
oseltamivir phosphate CAPS 45mg, 75mg	3	QL (84 caps / year)
oseltamivir phosphate SUSR 6mg/ml	3	QL (1080 mL / year)
PAXLOVID PAK	2	QL (22 tabs / 90 days)
PAXLOVID TAB 150-100	2	QL (40 tabs / 90 days)
PAXLOVID TAB 300-100	2	QL (60 tabs / 90 days)
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	5	NM, PA
PREVYMIS TABS 240mg, 480mg	5	QL (28 tabs / 28 days), PA
RELENZA DISKHALER AEPB 5mg/blister	3	QL (6 inhalers / year)
ribavirin (hepatitis c) CAPS 200mg; TABS 200mg	3	NM
rimantadine hydrochloride TABS 100mg	4	
valacyclovir hcl TABS 1gm, 500mg	3	
valganciclovir hcl SOLR 50mg/ml	5	
valganciclovir hcl TABS 450mg	3	
VOSEVI TAB	5	NM, PA
XOFLUZA TBPK 40mg, 80mg	4	QL (1 tab / 180 days)
CEPHALOSPORINS		
cefaclor CAPS 250mg, 500mg	3	
cefadroxil CAPS 500mg	2	

Drug Name	Drug Tier	Requirements/Limits
cefadroxil SUSR 250mg/5ml, 500mg/5ml	3	
CEFAZOLIN SOLR 2gm, 3gm	4	
CEFAZOLIN INJ 1GM/50ML	4	
cefazolin sodium SOLR 1gm, 2gm, 3gm, 10gm, 500mg	3	
CEFAZOLIN SOLN 2GM/100ML-4%	4	
CEFAZOLIN/DEX SOL 1GM/50ML-4%	4	
CEFAZOLIN/DEX SOL 2GM/50ML-3%	4	
CEFAZOLIN/DEX SOL 3GM/50ML-2%	4	
CEFAZOLIN/DEX SOL 3GM/150ML-4%	4	
cefdinir CAPS 300mg	2	
cefdinir SUSR 125mg/5ml, 250mg/5ml	3	
cefepime hcl SOLR 1gm, 2gm	4	
cefixime CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml	4	
cefotetan disodium SOLR 1gm, 2gm	4	
cefoxitin sodium SOLR 1gm, 2gm, 10gm	4	
cefpodoxime proxetil SUSR 50mg/5ml, 100mg/5ml	4	
cefpodoxime proxetil TABS 100mg, 200mg	3	
cefprozil SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	3	
ceftazidime SOLR 1gm, 2gm, 6gm	4	
ceftriaxone sodium SOLR 1gm, 2gm, 10gm, 250mg, 500mg	4	
cefuroxime axetil TABS 250mg, 500mg	2	
cefuroxime sodium SOLR 1.5gm, 750mg	3	
cephalexin CAPS 250mg, 500mg	1	
cephalexin SUSR 125mg/5ml, 250mg/5ml	3	
tazicef SOLR 1gm, 2gm, 6gm	4	
TEFLARO SOLR 400mg, 600mg	5	
ERYTHROMYCINS/MACROLIDES		
azithromycin SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml	3	
azithromycin TABS 250mg, 500mg, 600mg	1	
clarithromycin SUSR 125mg/5ml, 250mg/5ml; TB24 500mg	4	
clarithromycin TABS 250mg, 500mg	3	
DIFICID SUSR 40mg/ml; TABS 200mg	5	
e.e.s. 400 TABS 400mg	4	
ERYTHROCIN LACTOBIONATE SOLR 500mg	4	
erythromycin base CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	4	
erythromycin ethylsuccinate TABS 400mg	4	

Drug Name	Drug Tier	Requirements/Limits
erythromycin lactobionate SOLR 500mg	4	
fidaxomicin TABS 200mg	5	
FLUOROQUINOLONES		
ciprofloxacin 200 mg/100ml in d5w	3	
ciprofloxacin 400 mg/200ml in d5w	3	
ciprofloxacin hcl TABS 250mg, 500mg, 750mg	1	
levofloxacin SOLN 25mg/ml	4	
levofloxacin TABS 250mg, 500mg, 750mg	1	
levofloxacin in d5w iv soln 250 mg/50ml	3	
levofloxacin in d5w iv soln 500 mg/100ml	3	
levofloxacin in d5w iv soln 750 mg/150ml	3	
moxifloxacin hcl TABS 400mg	3	
moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj	4	
PENICILLINS		
amoxicillin CAPS 250mg, 500mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	1	
amoxicillin CHEW 125mg, 250mg	2	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	3	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	4	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	3	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	3	
amoxicillin & k clavulanate tab 250-125 mg	3	
amoxicillin & k clavulanate tab 500-125 mg	2	
amoxicillin & k clavulanate tab 875-125 mg	2	
ampicillin CAPS 500mg	2	
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm	4	
ampicillin & sulbactam sodium for inj 3 (2-1) gm	4	
ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm	4	
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm	4	
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm	4	
ampicillin sodium SOLR 1gm, 2gm, 10gm, 250mg, 500mg	4	
BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml	4	
dicloxacillin sodium CAPS 250mg, 500mg	3	

Drug Name	Drug Tier	Requirements/Limits
nafcillin sodium SOLR 1gm, 2gm	4	
nafcillin sodium SOLR 10gm	5	
oxacillin sodium SOLR 1gm, 2gm, 10gm	4	
penicillin g potassium SOLR 5000000unit, 20000000unit	4	
penicillin g sodium SOLR 5000000unit	4	
penicillin v potassium SOLR 125mg/5ml, 250mg/5ml	2	
penicillin v potassium TABS 250mg, 500mg	1	
pfizerpen SOLR 5000000unit, 20000000unit	4	
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)	4	
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)	4	
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)	4	
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)	4	
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)	4	
TETRACYCLINES		
doxy 100 SOLR 100mg	4	
doxycycline (monohydrate) CAPS 50mg, 100mg	2	
doxycycline (monohydrate) SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg	3	
doxycycline hyclate CAPS 50mg, 100mg; TABS 20mg, 100mg	3	
doxycycline hyclate SOLR 100mg	4	
minocycline hcl CAPS 50mg, 75mg, 100mg	3	
NUZYRA SOLR 100mg	5	NM
NUZYRA TABS 150mg	5	QL (30 tabs / 14 days), NM
tetracycline hcl CAPS 250mg, 500mg	4	
tigecycline SOLR 50mg	4	
ANTINEOPLASTIC AGENTS		
ALKYLATING AGENTS		
BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml	5	NM
BENDEKA SOLN 100mg/4ml	5	NM
carboplatin SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	3	
cisplatin SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml	3	

Drug Name	Drug Tier	Requirements/Limits
cyclophosphamide CAPS 25mg, 50mg	3	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	5	NM
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml	5	
cyclophosphamide SOLR 1gm, 500mg	4	
cyclophosphamide SOLR 2gm	5	
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	4	B/D
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	5	
FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	5	NM
GLEOSTINE CAPS 10mg, 40mg	4	NM
GLEOSTINE CAPS 100mg	5	NM
LEUKERAN TABS 2mg	5	PA
oxaliplatin SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml	4	
oxaliplatin SOLR 50mg, 100mg	5	
VIVIMUSTA SOLN 100mg/4ml	5	NM
ANTIMETABOLITES		
azacitidine SUSR 100mg	5	NM
cytarabine SOLN 20mg/ml	3	B/D
fluorouracil SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	3	B/D
gemcitabine hcl SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	4	
INQOVI TAB 35-100MG	5	QL (5 tabs / 28 days), NM, PA
LONSURF TAB 15-6.14	5	QL (100 tabs / 28 days), NM, PA
LONSURF TAB 20-8.19	5	QL (80 tabs / 28 days), NM, PA
mercaptopurine SUSP 2000mg/100ml	5	NM
mercaptopurine TABS 50mg	3	
methotrexate sodium SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	2	
ONUREG TABS 200mg, 300mg	5	QL (14 tabs / 28 days), NM, PA
pemetrexed disodium SOLR 100mg, 500mg, 750mg, 1000mg	5	
TABLOID TABS 40mg	5	PA
HORMONAL ANTINEOPLASTIC AGENTS		
abiraterone acetate TABS 250mg	5	QL (120 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
abiraterone acetate TABS 500mg	5	QL (60 tabs / 30 days), NM, PA
abirtega TABS 250mg	4	QL (120 tabs / 30 days), NM, PA
AKEEGA TAB 50/500MG	5	QL (60 tabs / 30 days), NM, PA
AKEEGA TAB 100/500	5	QL (60 tabs / 30 days), NM, PA
anastrozole TABS 1mg	2	
bicalutamide TABS 50mg	2	
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	4	NM, PA
ERLEADA TABS 60mg	5	QL (120 tabs / 30 days), NM, PA
ERLEADA TABS 240mg	5	QL (30 tabs / 30 days), NM, PA
EULEXIN CAPS 125mg	5	
exemestane TABS 25mg	4	
FIRMAGON SOLR 80mg	4	NM, PA
FIRMAGON SOLR 120mg/vial	5	NM, PA
fulvestrant SOSY 250mg/5ml	5	
letrozole TABS 2.5mg	2	
leuprolide acetate KIT 1mg/0.2ml	4	NM, PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg	5	NM
LUPRON DEPOT (3-MONTH) KIT 11.25mg	5	NM
LYSODREN TABS 500mg	5	NM
megestrol acetate TABS 20mg, 40mg	3	
nilutamide TABS 150mg	5	
NUBEQA TABS 300mg	5	QL (120 tabs / 30 days), NM, PA
ORGOVYX TABS 120mg	5	NM, PA
ORSERDU TABS 86mg	5	QL (90 tabs / 30 days), NM, PA
ORSERDU TABS 345mg	5	QL (30 tabs / 30 days), NM, PA
SOLTAMOX SOLN 10mg/5ml	5	
tamoxifen citrate TABS 10mg, 20mg	2	
toremifene citrate TABS 60mg	4	PA
XTANDI CAPS 40mg	5	QL (120 caps / 30 days), NM, PA
XTANDI TABS 40mg	5	QL (120 tabs / 30 days), NM, PA
XTANDI TABS 80mg	5	QL (60 tabs / 30 days), NM, PA
YONSA TABS 125mg	5	QL (120 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
IMMUNOMODULATORS		
lenalidomide CAPS 2.5mg, 5mg, 10mg, 15mg	5	QL (28 caps / 28 days), NM, PA
lenalidomide CAPS 20mg, 25mg	5	QL (21 caps / 28 days), NM, PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg	5	QL (21 caps / 28 days), NM, PA
THALOMID CAPS 50mg	5	QL (84 caps / 28 days), NM, PA
THALOMID CAPS 100mg	5	QL (112 caps / 28 days), NM, PA
MISCELLANEOUS		
BESREMI SOSY 500mcg/ml	5	QL (2 syringes / 28 days), NM, PA
bexarotene CAPS 75mg	5	QL (300 caps / 30 days), NM, PA
doxorubicin hcl SOLN 2mg/ml	4	B/D
doxorubicin hcl liposomal SUSP 2mg/ml	5	
hydroxyurea CAPS 500mg	2	
irinotecan hcl SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml	4	
IWILFIN TABS 192mg	5	QL (240 tabs / 30 days), NM, PA
leucovorin calcium SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	4	
leucovorin calcium TABS 5mg, 10mg, 15mg, 25mg	3	
MATULANE CAPS 50mg	5	NM
mesna TABS 400mg	5	
MODEYSO CAPS 125mg	5	QL (20 caps / 28 days), NM, PA
tretinoin (chemotherapy) CAPS 10mg	5	
WELIREG TABS 40mg	5	QL (90 tabs / 30 days), NM, PA
MITOTIC INHIBITORS		
docetaxel CONC 20mg/ml	4	
docetaxel CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	5	NM
etoposide SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	3	

Drug Name	Drug Tier	Requirements/Limits
paclitaxel CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	4	
paclitaxel inj 100mg	5	NM
vincristine sulfate SOLN 1mg/ml	2	B/D
vinorelbine tartrate SOLN 10mg/ml, 50mg/5ml	4	
MOLECULAR TARGET AGENTS		
ALECENSA CAPS 150mg	5	QL (240 caps / 30 days), NM, PA
ALUNBRIG TABS 30mg	5	QL (120 tabs / 30 days), NM, PA
ALUNBRIG TABS 90mg, 180mg	5	QL (30 tabs / 30 days), NM, PA
ALUNBRIG PAK	5	QL (30 tabs / 30 days), NM, PA
AUGTYRO CAPS 40mg	5	QL (240 caps / 30 days), NM, PA
AUGTYRO CAPS 160mg	5	QL (60 caps / 30 days), NM, PA
AVMAPKI PAK FAKZYNJA	5	QL (1 pack / 28 days), NM, PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg	5	QL (30 tabs / 30 days), NM, PA
BALVERSA TABS 3mg	5	QL (84 tabs / 28 days), NM, PA
BALVERSA TABS 4mg	5	QL (56 tabs / 28 days), NM, PA
BALVERSA TABS 5mg	5	QL (28 tabs / 28 days), NM, PA
BORTEZOMIB SOLR 1mg, 2.5mg	4	NM, PA
bortezomib SOLR 3.5mg	5	NM, PA
BOSULIF CAPS 50mg	5	QL (30 caps / 30 days), NM, PA
BOSULIF CAPS 100mg	5	QL (300 caps / 30 days), NM, PA
BOSULIF TABS 100mg	5	QL (180 tabs / 30 days), NM, PA
BOSULIF TABS 400mg, 500mg	5	QL (30 tabs / 30 days), NM, PA
BRAFTOVI CAPS 75mg	5	QL (180 caps / 30 days), NM, PA
BRUKINSA CAPS 80mg	5	QL (120 caps / 30 days), NM, PA
CABOMETYX TABS 20mg, 40mg, 60mg	5	QL (30 tabs / 30 days), NM, PA
CALQUENCE TABS 100mg	5	QL (60 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
CAPRELSA TABS 100mg	5	QL (60 tabs / 30 days), NM, PA
CAPRELSA TABS 300mg	5	QL (30 tabs / 30 days), NM, PA
COMETRIQ (60MG DOSE) KIT 20mg	5	QL (84 caps / 28 days), NM, PA
COMETRIQ KIT 100MG	5	QL (56 caps / 28 days), NM, PA
COMETRIQ KIT 140MG	5	QL (112 caps / 28 days), NM, PA
COPIKTRA CAPS 15mg, 25mg	5	QL (56 caps / 28 days), NM, PA
COTELLIC TABS 20mg	5	QL (63 tabs / 28 days), NM, PA
DANZITEN TABS 71mg, 95mg	5	QL (112 tabs / 28 days), NM, PA
dasatinib TABS 20mg	5	QL (90 tabs / 30 days), NM, PA
dasatinib TABS 50mg, 70mg, 80mg, 100mg, 140mg	5	QL (30 tabs / 30 days), NM, PA
DAURISMO TABS 25mg	5	QL (60 tabs / 30 days), NM, PA
DAURISMO TABS 100mg	5	QL (30 tabs / 30 days), NM, PA
ERIVEDGE CAPS 150mg	5	QL (30 caps / 30 days), NM, PA
erlotinib hcl TABS 25mg	5	QL (90 tabs / 30 days), NM, PA
erlotinib hcl TABS 100mg, 150mg	5	QL (30 tabs / 30 days), NM, PA
everolimus TABS 2.5mg, 5mg, 7.5mg, 10mg	5	QL (30 tabs / 30 days), NM, PA
everolimus TBSO 2mg, 5mg	5	QL (60 tabs / 30 days), NM, PA
everolimus TBSO 3mg	5	QL (90 tabs / 30 days), NM, PA
FOTIVDA CAPS .89mg, 1.34mg	5	QL (21 caps / 28 days), NM, PA
FRUZAQLA CAPS 1mg	5	QL (84 caps / 28 days), NM, PA
FRUZAQLA CAPS 5mg	5	QL (21 caps / 28 days), NM, PA
GAVRETO CAPS 100mg	5	QL (120 caps / 30 days), NM, PA
gefitinib TABS 250mg	5	QL (60 tabs / 30 days), NM, PA
GILOTRIF TABS 20mg, 30mg, 40mg	5	QL (30 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
GOMEKLI CAPS 1mg	5	QL (168 caps / 28 days), NM, PA
GOMEKLI CAPS 2mg	5	QL (84 caps / 28 days), NM, PA
GOMEKLI TBSO 1mg	5	QL (168 tabs / 28 days), NM, PA
HERCEP HYLEC SOL 60-10000	5	NM, PA
HERCEPTIN SOLR 150mg	5	NM, PA
HERNEXEOS TABS 60mg	5	QL (120 tabs / 30 days), NM, PA
HERZUMA SOLR 150mg, 420mg	5	NM, PA
IBRANCE CAPS 75mg, 100mg, 125mg	5	QL (21 caps / 28 days), NM, PA
IBRANCE TABS 75mg, 100mg, 125mg	5	QL (21 tabs / 28 days), NM, PA
IBTROZI CAPS 200mg	5	QL (90 caps / 30 days), NM, PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg	5	QL (30 tabs / 30 days), NM, PA
IDHIFA TABS 50mg, 100mg	5	QL (30 tabs / 30 days), NM, PA
imatinib mesylate TABS 100mg	4	QL (90 tabs / 30 days), NM, PA
imatinib mesylate TABS 400mg	5	QL (60 tabs / 30 days), NM, PA
IMBRUVICA CAPS 70mg	5	QL (30 caps / 30 days), NM, PA
IMBRUVICA CAPS 140mg	5	QL (120 caps / 30 days), NM, PA
IMBRUVICA SUSP 70mg/ml	5	QL (216 mL / 27 days), NM, PA
IMBRUVICA TABS 140mg, 280mg, 420mg	5	QL (30 tabs / 30 days), NM, PA
IMKELDI SOLN 80mg/ml	5	QL (280 mL / 28 days), NM, PA
INLYTA TABS 1mg	5	QL (180 tabs / 30 days), NM, PA
INLYTA TABS 5mg	5	QL (120 tabs / 30 days), NM, PA
INREBIC CAPS 100mg	5	QL (120 caps / 30 days), NM, PA
ITOVEBI TABS 3mg	5	QL (56 tabs / 28 days), NM, PA
ITOVEBI TABS 9mg	5	QL (28 tabs / 28 days), NM, PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	5	QL (60 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
JAYPIRCA TABS 50mg	5	QL (30 tabs / 30 days), NM, PA
JAYPIRCA TABS 100mg	5	QL (60 tabs / 30 days), NM, PA
KADCYLA SOLR 100mg, 160mg	5	NM
KANJINTI SOLR 150mg, 420mg	5	NM, PA
KEYTRUDA SOLN 100mg/4ml	5	NM, PA
KISQALI 200 DOSE TBPK 200mg	5	QL (21 tabs / 28 days), NM, PA
KISQALI 400 DOSE TBPK 200mg	5	QL (42 tabs / 28 days), NM, PA
KISQALI 400 PAK FEMARA	5	QL (70 tabs / 28 days), NM, PA
KISQALI 600 DOSE TBPK 200mg	5	QL (63 tabs / 28 days), NM, PA
KISQALI 600 PAK FEMARA	5	QL (91 tabs / 28 days), NM, PA
KOSELUGO CAPS 10mg	5	QL (240 caps / 30 days), NM, PA
KOSELUGO CAPS 25mg	5	QL (120 caps / 30 days), NM, PA
KRAZATI TABS 200mg	5	QL (180 tabs / 30 days), NM, PA
lapatinib ditosylate TABS 250mg	5	QL (180 tabs / 30 days), NM, PA
LAZCLUZE TABS 80mg	5	QL (60 tabs / 30 days), NM, PA
LAZCLUZE TABS 240mg	5	QL (30 tabs / 30 days), NM, PA
LENVIMA 4 MG DAILY DOSE CPPK 4mg	5	QL (30 caps / 30 days), NM, PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg	5	QL (60 caps / 30 days), NM, PA
LENVIMA 10 MG DAILY DOSE CPPK 10mg	5	QL (30 caps / 30 days), NM, PA
LENVIMA 12MG DAILY DOSE CPPK 4mg	5	QL (90 caps / 30 days), NM, PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg	5	QL (60 caps / 30 days), NM, PA
LENVIMA CAP 14 MG	5	QL (60 caps / 30 days), NM, PA
LENVIMA CAP 18 MG	5	QL (90 caps / 30 days), NM, PA
LENVIMA CAP 24 MG	5	QL (90 caps / 30 days), NM, PA
LORBRENA TABS 25mg	5	QL (90 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
LORBRENA TABS 100mg	5	QL (30 tabs / 30 days), NM, PA
LUMAKRAS TABS 120mg	5	QL (240 tabs / 30 days), NM, PA
LUMAKRAS TABS 240mg	5	QL (120 tabs / 30 days), NM, PA
LUMAKRAS TABS 320mg	5	QL (90 tabs / 30 days), NM, PA
LYNPARZA TABS 100mg, 150mg	5	QL (120 tabs / 30 days), NM, PA
LYTGOBI (12 MG DAILY DOSE) TBPK 4mg	5	QL (84 tabs / 28 days), NM, PA
LYTGOBI (16 MG DAILY DOSE) TBPK 4mg	5	QL (112 tabs / 28 days), NM, PA
LYTGOBI (20 MG DAILY DOSE) TBPK 4mg	5	QL (140 tabs / 28 days), NM, PA
MEKINIST SOLR .05mg/ml	5	QL (1260 mL / 30 days), NM, PA
MEKINIST TABS 2mg	5	QL (30 tabs / 30 days), NM, PA
MEKINIST TABS .5mg	5	QL (90 tabs / 30 days), NM, PA
MEKTOVI TABS 15mg	5	QL (180 tabs / 30 days), NM, PA
MONJUVI SOLR 200mg	5	NM, PA
NERLYNX TABS 40mg	5	QL (180 tabs / 30 days), NM, PA
nilotinib hcl CAPS 50mg	5	QL (120 caps / 30 days), NM, PA
nilotinib hcl CAPS 150mg, 200mg	5	QL (112 caps / 28 days), NM, PA
NINLARO CAPS 2.3mg, 3mg, 4mg	5	QL (3 caps / 28 days), NM, PA
ODOMZO CAPS 200mg	5	QL (30 caps / 30 days), NM, PA
OGIVRI SOLR 150mg, 420mg	5	NM, PA
OGSIVEO TABS 50mg	5	QL (180 tabs / 30 days), NM, PA
OGSIVEO TABS 100mg, 150mg	5	QL (56 tabs / 28 days), NM, PA
OJEMDA SUSR 25mg/ml	5	QL (96 mL / 28 days), NM, PA
OJEMDA TABS 100mg	5	QL (24 tabs / 28 days), NM, PA
OJJAARA TABS 100mg, 150mg, 200mg	5	QL (30 tabs / 30 days), NM, PA
ONTRUZANT SOLR 150mg, 420mg	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
pazopanib hcl TABS 200mg	5	QL (120 tabs / 30 days), NM, PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg	5	QL (28 tabs / 28 days), NM, PA
PHESGO SOL	5	NM, PA
PIQRAY 200MG DAILY DOSE TBPK 200mg	5	QL (28 tabs / 28 days), NM, PA
PIQRAY 250MG TAB DOSE	5	QL (56 tabs / 28 days), NM, PA
PIQRAY 300MG DAILY DOSE TBPK 150mg	5	QL (56 tabs / 28 days), NM, PA
QINLOCK TABS 50mg	5	QL (90 tabs / 30 days), NM, PA
RETEVMO TABS 40mg	5	QL (90 tabs / 30 days), NM, PA
RETEVMO TABS 80mg	5	QL (120 tabs / 30 days), NM, PA
RETEVMO TABS 120mg, 160mg	5	QL (60 tabs / 30 days), NM, PA
REVUFORJ TABS 25mg	5	QL (240 tabs / 30 days), NM, PA
REVUFORJ TABS 110mg	5	QL (120 tabs / 30 days), NM, PA
REVUFORJ TABS 160mg	5	QL (60 tabs / 30 days), NM, PA
REZLIDHIA CAPS 150mg	5	QL (60 caps / 30 days), NM, PA
ROMVIMZA CAPS 14mg, 20mg, 30mg	5	QL (8 caps / 28 days), NM, PA
ROZLYTREK CAPS 100mg	5	QL (180 caps / 30 days), NM, PA
ROZLYTREK CAPS 200mg	5	QL (90 caps / 30 days), NM, PA
ROZLYTREK PACK 50mg	5	QL (336 packets / 28 days), NM, PA
RUBRACA TABS 200mg, 250mg, 300mg	5	QL (120 tabs / 30 days), NM, PA
RYDAPT CAPS 25mg	5	QL (224 caps / 28 days), NM, PA
SCEMBLIX TABS 20mg	5	QL (60 tabs / 30 days), NM, PA
SCEMBLIX TABS 40mg	5	QL (300 tabs / 30 days), NM, PA
SCEMBLIX TABS 100mg	5	QL (120 tabs / 30 days), NM, PA
sorafenib tosylate TABS 200mg	5	QL (120 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
STIVARGA TABS 40mg	5	QL (84 tabs / 28 days), NM, PA
sunitinib malate CAPS 12.5mg, 25mg, 37.5mg, 50mg	5	QL (30 caps / 30 days), NM, PA
TABRECTA TABS 150mg, 200mg	5	QL (112 tabs / 28 days), NM, PA
TAFINLAR CAPS 50mg, 75mg	5	QL (120 caps / 30 days), NM, PA
TAFINLAR TBSO 10mg	5	QL (840 tabs / 28 days), NM, PA
TAGRISSO TABS 40mg, 80mg	5	QL (30 tabs / 30 days), NM, PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg	5	QL (30 caps / 30 days), NM, PA
TALZENNA CAPS .25mg	5	QL (90 caps / 30 days), NM, PA
TAZVERIK TABS 200mg	5	QL (240 tabs / 30 days), NM, PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	5	NM, PA
TECENTRIQ INJ HYBREZA	5	QL (1 vial / 21 days), NM, PA
TEPMETKO TABS 225mg	5	QL (60 tabs / 30 days), NM, PA
TIBSOVO TABS 250mg	5	QL (60 tabs / 30 days), NM, PA
torpenz TABS 2.5mg, 5mg, 7.5mg, 10mg	5	QL (30 tabs / 30 days), NM, PA
TRAZIMERA SOLR 150mg, 420mg	5	NM, PA
TRUQAP TABS 160mg, 200mg	5	QL (64 tabs / 28 days), NM, PA
TRUQAP TBPK 160mg, 200mg	5	QL (4 packs / 28 days), NM, PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	5	NM, PA
TUKYSA TABS 50mg, 150mg	5	QL (120 tabs / 30 days), NM, PA
TURALIO CAPS 125mg	5	QL (120 caps / 30 days), NM, PA
VANFLYTA TABS 17.7mg, 26.5mg	5	QL (56 tabs / 28 days), NM, PA
VENCLEXTA TABS 10mg	3	QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 50mg	5	QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 100mg	5	QL (180 tabs / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
VENCLEXTA TAB START PK	5	QL (42 tabs / 28 days), NM, PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	5	QL (56 tabs / 28 days), NM, PA
VITRAKVI CAPS 25mg	5	QL (180 caps / 30 days), NM, PA
VITRAKVI CAPS 100mg	5	QL (60 caps / 30 days), NM, PA
VITRAKVI SOLN 20mg/ml	5	QL (300 mL / 30 days), NM, PA
VIZIMPRO TABS 15mg, 30mg, 45mg	5	QL (30 tabs / 30 days), NM, PA
VONJO CAPS 100mg	5	QL (120 caps / 30 days), NM, PA
VORANIGO TABS 10mg	5	QL (60 tabs / 30 days), NM, PA
VORANIGO TABS 40mg	5	QL (30 tabs / 30 days), NM, PA
XALKORI CAPS 200mg, 250mg; CPSP 20mg, 50mg	5	QL (120 caps / 30 days), NM, PA
XALKORI CPSP 150mg	5	QL (180 caps / 30 days), NM, PA
XOSPATA TABS 40mg	5	QL (90 tabs / 30 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 10mg	5	QL (16 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 40mg	5	QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG TWICE WEEKLY) TBPK 40mg	5	QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG ONCE WEEKLY) TBPK 60mg	5	QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG TWICE WEEKLY) TBPK 20mg	5	QL (24 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 40mg	5	QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG TWICE WEEKLY) TBPK 20mg	5	QL (32 tabs / 28 days), NM, PA
XPOVIO PAK (100 MG ONCE WEEKLY) TBPK 50mg	5	QL (8 tabs / 28 days), NM, PA
ZEJULA TABS 100mg, 200mg, 300mg	5	QL (30 tabs / 30 days), NM, PA
ZELBORAF TABS 240mg	5	QL (240 tabs / 30 days), NM, PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	5	NM, PA
ZOLINZA CAPS 100mg	5	QL (120 caps / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
ZYDELIG TABS 100mg, 150mg	5	QL (60 tabs / 30 days), NM, PA
ZYKADIA TABS 150mg	5	QL (84 tabs / 28 days), NM, PA
CARDIOVASCULAR		
ACE INHIBITOR COMBINATIONS		
amlodipine besylate-benazepril hcl cap 2.5-10 mg	6	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap 5-10 mg	6	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap 5-20 mg	6	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap 5-40 mg	6	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap 10-20 mg	6	QL (30 caps / 30 days)
amlodipine besylate-benazepril hcl cap 10-40 mg	6	QL (30 caps / 30 days)
benazepril & hydrochlorothiazide tab 5-6.25mg	6	
benazepril & hydrochlorothiazide tab 10-12.5 mg	6	
benazepril & hydrochlorothiazide tab 20-12.5 mg	6	
benazepril & hydrochlorothiazide tab 20-25 mg	6	
captopril & hydrochlorothiazide tab 25-15 mg	6	
captopril & hydrochlorothiazide tab 25-25 mg	6	
captopril & hydrochlorothiazide tab 50-15 mg	6	
captopril & hydrochlorothiazide tab 50-25 mg	6	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	6	
enalapril maleate & hydrochlorothiazide tab 10-25 mg	6	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	6	
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg	6	
lisinopril & hydrochlorothiazide tab 10-12.5 mg	6	
lisinopril & hydrochlorothiazide tab 20-12.5 mg	6	
lisinopril & hydrochlorothiazide tab 20-25 mg	6	

Drug Name	Drug Tier	Requirements/Limits
ACE INHIBITORS		
benazepril hcl TABS 5mg, 10mg, 20mg, 40mg	6	
captopril TABS 12.5mg, 25mg, 50mg, 100mg	6	
enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg	6	
fosinopril sodium TABS 10mg, 20mg, 40mg	6	
lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	6	
moexipril hcl TABS 7.5mg, 15mg	6	
perindopril erbumine TABS 2mg, 4mg, 8mg	6	
quinapril hcl TABS 5mg, 10mg, 20mg, 40mg	6	
ramipril CAPS 1.25mg, 2.5mg, 5mg, 10mg	6	
trandolapril TABS 1mg, 2mg, 4mg	6	
ALDOSTERONE RECEPTOR ANTAGONISTS		
eplerenone TABS 25mg, 50mg	3	
KERENDIA TABS 10mg, 20mg, 40mg	3	QL (30 tabs / 30 days)
spironolactone TABS 25mg, 50mg, 100mg	1	
ALPHA BLOCKERS		
doxazosin mesylate TABS 1mg, 2mg, 4mg, 8mg	2	
prazosin hcl CAPS 1mg, 2mg, 5mg	3	
terazosin hcl CAPS 1mg, 2mg, 5mg, 10mg	1	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	6	QL (30 tabs / 30 days)
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	6	QL (30 tabs / 30 days)
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	6	QL (30 tabs / 30 days)
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	6	QL (30 tabs / 30 days)
amlodipine besylate-valsartan tab 5-160 mg	6	QL (30 tabs / 30 days)
amlodipine besylate-valsartan tab 5-320 mg	6	QL (30 tabs / 30 days)
amlodipine besylate-valsartan tab 10-160 mg	6	QL (30 tabs / 30 days)
amlodipine besylate-valsartan tab 10-320 mg	6	QL (30 tabs / 30 days)
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg	6	QL (60 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg	6	QL (30 tabs / 30 days)
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg	6	QL (30 tabs / 30 days)
ENTRESTO CAP 6-6MG	3	QL (240 caps / 30 days)
ENTRESTO CAP 15-16MG	3	QL (240 caps / 30 days)
irbesartan-hydrochlorothiazide tab 150-12.5 mg	6	QL (60 tabs / 30 days)
irbesartan-hydrochlorothiazide tab 300-12.5 mg	6	QL (30 tabs / 30 days)
losartan potassium & hydrochlorothiazide tab 50-12.5 mg	6	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg	6	
losartan potassium & hydrochlorothiazide tab 100-25 mg	6	
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg	6	QL (30 tabs / 30 days)
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg	6	QL (30 tabs / 30 days)
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg	6	QL (30 tabs / 30 days)
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg	6	QL (30 tabs / 30 days)
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg	6	QL (30 tabs / 30 days)
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg	6	QL (30 tabs / 30 days)
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg	6	QL (30 tabs / 30 days)
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg	6	QL (30 tabs / 30 days)
sacubitril-valsartan tab 24-26 mg	3	QL (60 tabs / 30 days)
sacubitril-valsartan tab 49-51 mg	3	QL (60 tabs / 30 days)
sacubitril-valsartan tab 97-103 mg	3	QL (60 tabs / 30 days)
telmisartan-amlodipine tab 40-5 mg	6	QL (30 tabs / 30 days)
telmisartan-amlodipine tab 40-10 mg	6	QL (30 tabs / 30 days)
telmisartan-amlodipine tab 80-5 mg	6	QL (30 tabs / 30 days)
telmisartan-amlodipine tab 80-10 mg	6	QL (30 tabs / 30 days)
telmisartan-hydrochlorothiazide tab 40-12.5 mg	6	QL (30 tabs / 30 days)
telmisartan-hydrochlorothiazide tab 80-12.5 mg	6	QL (60 tabs / 30 days)
telmisartan-hydrochlorothiazide tab 80-25 mg	6	QL (30 tabs / 30 days)
valsartan-hydrochlorothiazide tab 80-12.5 mg	6	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
valsartan-hydrochlorothiazide tab 160-12.5 mg	6	QL (30 tabs / 30 days)
valsartan-hydrochlorothiazide tab 160-25 mg	6	QL (30 tabs / 30 days)
valsartan-hydrochlorothiazide tab 320-12.5 mg	6	QL (30 tabs / 30 days)
valsartan-hydrochlorothiazide tab 320-25 mg	6	QL (30 tabs / 30 days)
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
candesartan cilexetil TABS 4mg, 8mg, 16mg	6	QL (60 tabs / 30 days)
candesartan cilexetil TABS 32mg	6	QL (30 tabs / 30 days)
irbesartan TABS 75mg, 150mg, 300mg	6	QL (30 tabs / 30 days)
losartan potassium TABS 25mg, 50mg, 100mg	6	
olmesartan medoxomil TABS 5mg	6	QL (60 tabs / 30 days)
olmesartan medoxomil TABS 20mg, 40mg	6	QL (30 tabs / 30 days)
telmisartan TABS 20mg, 40mg, 80mg	6	QL (30 tabs / 30 days)
valsartan TABS 40mg, 80mg, 160mg	6	QL (60 tabs / 30 days)
valsartan TABS 320mg	6	QL (30 tabs / 30 days)
ANTIARRHYTHMICS		
amiodarone hcl SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 400mg	4	
amiodarone hcl TABS 200mg	1	
disopyramide phosphate CAPS 100mg, 150mg	4	
dofetilide CAPS 125mcg, 250mcg, 500mcg	4	NM
flecainide acetate TABS 50mg, 100mg, 150mg	3	
MULTAQ TABS 400mg	4	QL (60 tabs / 30 days)
pacerone TABS 100mg, 400mg	4	
pacerone TABS 200mg	1	
propafenone hcl CP12 225mg, 325mg, 425mg	4	
propafenone hcl TABS 150mg, 225mg, 300mg	3	
quinidine sulfate TABS 200mg, 300mg	4	
sotalol hcl TABS 80mg, 120mg, 160mg, 240mg	2	
sotalol hcl (afib/afl) TABS 80mg, 120mg, 160mg	3	
ANTILIPEMICS, FIBRATES		
fenofibrate TABS 48mg, 54mg, 145mg, 160mg	2	
fenofibrate micronized CAPS 67mg, 134mg, 200mg	3	

Drug Name	Drug Tier	Requirements/Limits
gemfibrozil TABS 600mg	2	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
atorvastatin calcium TABS 10mg, 20mg, 40mg, 80mg	6	QL (30 tabs / 30 days)
lovastatin TABS 10mg, 20mg, 40mg	6	QL (60 tabs / 30 days)
pravastatin sodium TABS 10mg, 20mg, 40mg, 80mg	6	QL (30 tabs / 30 days)
rosuvastatin calcium TABS 5mg, 10mg, 20mg, 40mg	6	QL (30 tabs / 30 days)
simvastatin TABS 5mg, 10mg, 20mg, 40mg, 80mg	6	QL (30 tabs / 30 days)
ANTILIPEMICS, MISCELLANEOUS		
cholestyramine PACK 4gm; POWD 4gm/dose	3	
cholestyramine light PACK 4gm; POWD 4gm/dose	3	
colesevelam hcl PACK 3.75gm; TABS 625mg	4	
colestipol hcl GRAN 5gm; PACK 5gm	4	
colestipol hcl TABS 1gm	3	
ezetimibe TABS 10mg	2	QL (30 tabs / 30 days)
ezetimibe-simvastatin tab 10-10 mg	6	QL (30 tabs / 30 days)
ezetimibe-simvastatin tab 10-20 mg	6	QL (30 tabs / 30 days)
ezetimibe-simvastatin tab 10-40 mg	6	QL (30 tabs / 30 days)
ezetimibe-simvastatin tab 10-80 mg	6	QL (30 tabs / 30 days)
NEXLETOL TABS 180mg	3	QL (30 tabs / 30 days)
NEXLIZET TAB 180/10MG	3	QL (30 tabs / 30 days)
niacin (antihyperlipidemic) TBCR 500mg, 750mg, 1000mg	3	QL (60 tabs / 30 days)
omega-3-acid ethyl esters cap 1 gm	3	
prevalite PACK 4gm; POWD 4gm/dose	3	
REPATHA SOSY 140mg/ml	3	QL (6 syringes / 28 days), NM, PA
REPATHA SURECLICK SOAJ 140mg/ml	3	QL (6 autoinjectors / 28 days), NM, PA
VASCEPA CAPS .5gm, 1gm	3	
BETA-BLOCKER/DIURETIC COMBINATIONS		
atenolol & chlorthalidone tab 50-25 mg	2	
atenolol & chlorthalidone tab 100-25 mg	2	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	2	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	2	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	2	
metoprolol & hydrochlorothiazide tab 50-25 mg	3	

Drug Name	Drug Tier	Requirements/Limits
metoprolol & hydrochlorothiazide tab 100-25 mg	3	
metoprolol & hydrochlorothiazide tab 100-50 mg	3	
BETA-BLOCKERS		
acebutolol hcl CAPS 200mg, 400mg	3	
atenolol TABS 25mg, 50mg, 100mg	1	
betaxolol hcl TABS 10mg, 20mg	3	
bisoprolol fumarate TABS 5mg, 10mg	2	
carvedilol TABS 3.125mg, 6.25mg, 12.5mg, 25mg	1	
labetalol hcl TABS 100mg, 200mg, 300mg	2	
metoprolol succinate TB24 25mg, 50mg, 100mg, 200mg	1	
metoprolol tartrate SOLN 5mg/5ml	4	
metoprolol tartrate TABS 25mg, 50mg, 100mg	1	
nadolol TABS 20mg, 40mg, 80mg	3	
nebivolol hcl TABS 2.5mg, 5mg, 10mg	3	QL (30 tabs / 30 days)
nebivolol hcl TABS 20mg	3	QL (60 tabs / 30 days)
pindolol TABS 5mg, 10mg	3	
propranolol hcl CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml	3	
propranolol hcl TABS 10mg, 20mg, 40mg, 60mg, 80mg	2	
timolol maleate TABS 5mg, 10mg, 20mg	3	
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate TABS 2.5mg, 5mg, 10mg	1	
cartia xt CP24 120mg, 180mg, 240mg, 300mg	2	
dilt-xr CP24 120mg, 180mg, 240mg	2	
diltiazem hcl CP12 60mg, 90mg, 120mg	4	
diltiazem hcl SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml	3	
diltiazem hcl TABS 30mg, 60mg, 90mg, 120mg	2	
diltiazem hcl coated beads CP24 120mg, 180mg, 240mg, 300mg	2	
diltiazem hcl coated beads CP24 360mg	4	
diltiazem hcl extended release beads CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	2	
felodipine TB24 2.5mg, 5mg, 10mg	2	
isradipine CAPS 2.5mg, 5mg	4	
nicardipine hcl CAPS 20mg, 30mg	4	

Drug Name	Drug Tier	Requirements/Limits
nifedipine TB24 30mg, 60mg, 90mg	3	
nimodipine CAPS 30mg	4	
tiadylt er CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	2	
verapamil hcl CP24 100mg, 200mg, 300mg, 360mg; SOLN 2.5mg/ml	4	
verapamil hcl CP24 120mg, 180mg, 240mg	3	
verapamil hcl TABS 40mg, 80mg, 120mg	1	
verapamil hcl TBCR 120mg, 180mg, 240mg	2	
DIURETICS		
acetazolamide CP12 500mg; TABS 125mg, 250mg	3	
amiloride & hydrochlorothiazide tab 5-50 mg	2	
amiloride hcl TABS 5mg	2	
bumetanide SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	3	
chlorthalidone TABS 25mg, 50mg	2	
furosemide SOLN 10mg/ml, 40mg/5ml	2	
furosemide TABS 20mg, 40mg, 80mg	1	
furosemide inj SOLN 10mg/ml	3	
hydrochlorothiazide CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1	
indapamide TABS 1.25mg, 2.5mg	1	
methazolamide TABS 25mg, 50mg	4	
metolazone TABS 2.5mg, 5mg, 10mg	2	
spironolactone & hydrochlorothiazide tab 25-25 mg	2	
torsemide TABS 5mg, 10mg, 20mg, 100mg	2	
triamterene & hydrochlorothiazide cap 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 75-50 mg	1	
MISCELLANEOUS		
aliskiren fumarate TABS 150mg, 300mg	6	QL (30 tabs / 30 days)
clonidine PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr	3	
clonidine hcl TABS .1mg, .2mg, .3mg	1	
CORLANOR SOLN 5mg/5ml	4	QL (450 mL / 30 days)
digoxin SOLN .05mg/ml, .25mg/ml	4	
digoxin TABS 125mcg, 250mcg	2	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
droxidopa CAPS 100mg	4	QL (90 caps / 30 days), NM, PA
droxidopa CAPS 200mg, 300mg	5	QL (180 caps / 30 days), NM, PA
epinephrine (anaphylaxis) SOLN 1mg/ml	4	
guanfacine hcl TABS 1mg, 2mg	3	PA; PA applies if 65 years and older
hydralazine hcl SOLN 20mg/ml	4	
hydralazine hcl TABS 10mg, 25mg, 50mg, 100mg	1	
ivabradine hcl TABS 5mg, 7.5mg	4	QL (60 tabs / 30 days)
metyrosine CAPS 250mg	5	NM, PA
midodrine hcl TABS 2.5mg, 5mg	3	
midodrine hcl TABS 10mg	4	
minoxidil TABS 2.5mg, 10mg	2	
ranolazine TB12 500mg, 1000mg	4	
VERQUVO TABS 2.5mg, 5mg, 10mg	3	QL (30 tabs / 30 days), PA
NITRATES		
isosorbide dinitrate TABS 5mg, 10mg, 20mg, 30mg	3	
isosorbide mononitrate TB24 30mg, 60mg, 120mg	1	
NITRO-BID OINT 2%	3	
nitroglycerin PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	3	
nitroglycerin SOLN .4mg/spray	4	
nitroglycerin SUBL .3mg, .4mg, .6mg	2	
PULMONARY ARTERIAL HYPERTENSION		
ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg	5	QL (90 tabs / 30 days), NM, PA
alyq TABS 20mg	5	QL (60 tabs / 30 days), NM, PA
ambrisentan TABS 5mg, 10mg	5	QL (30 tabs / 30 days), NM, PA
bosentan TABS 62.5mg, 125mg	5	QL (60 tabs / 30 days), NM, PA
bosentan TBSO 32mg	5	QL (120 tabs / 30 days), NM, PA
OPSUMIT TABS 10mg	5	QL (30 tabs / 30 days), NM, PA
sildenafil citrate (pulmonary hypertension) TABS 20mg	3	QL (360 tabs / 30 days), NM, PA
tadalafil (pulmonary hypertension) TABS 20mg	4	QL (60 tabs / 30 days), NM, PA
treprostinil SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
UPTRAVI TABS 200mcg	5	QL (140 tabs / 28 days), NM, PA
UPTRAVI TABS 400mcg, 600mcg, 800mcg, 1000mcg, 1200mcg, 1400mcg, 1600mcg	5	QL (60 tabs / 30 days), NM, PA
UPTRAVI PACK TAB 200/800	5	QL (1 pack / 28 days), NM, PA
WINREVAIR KIT 45mg, 60mg	5	QL (2 vials / 21 days), NM, PA
WINREVAIR INJ 45MG	5	QL (2 vials / 21 days), NM, PA
WINREVAIR INJ 60MG	5	QL (2 vials / 21 days), NM, PA
YUTREPIA CAPS 26.5mcg, 53mcg, 79.5mcg	5	QL (140 caps / 28 days), NM, PA
YUTREPIA CAPS 106mcg	5	QL (224 caps / 28 days), NM, PA
CENTRAL NERVOUS SYSTEM		
ANTIANXIETY		
alprazolam TABS .25mg, .5mg, 1mg, 2mg	2	QL (150 tabs / 30 days)
buspirone hcl TABS 5mg, 10mg, 15mg	1	
buspirone hcl TABS 7.5mg, 30mg	3	
fluvoxamine maleate TABS 25mg, 50mg, 100mg	3	
lorazepam CONC 2mg/ml	3	QL (150 mL / 30 days)
lorazepam SOLN 4mg/ml, 20mg/10ml	2	
lorazepam TABS .5mg, 1mg, 2mg	2	QL (150 tabs / 30 days)
lorazepam intensol CONC 2mg/ml	3	QL (150 mL / 30 days)
ANTIDEMENTIA		
donepezil hydrochloride TABS 5mg; TBDP 5mg	2	QL (30 tabs / 30 days)
donepezil hydrochloride TABS 10mg; TBDP 10mg	2	
galantamine hydrobromide CP24 8mg, 16mg, 24mg	3	QL (30 caps / 30 days)
galantamine hydrobromide SOLN 4mg/ml	4	QL (200 mL / 30 days)
galantamine hydrobromide TABS 4mg, 8mg, 12mg	3	QL (60 tabs / 30 days)
memantine hcl CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml	4	PA; PA applies if 29 years and younger
memantine hcl TABS 5mg, 10mg	3	PA; PA applies if 29 years and younger
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack	4	PA; PA applies if 29 years and younger
memantine hcl-donepezil hcl cap er 24hr 14-10 mg	4	

Drug Name	Drug Tier	Requirements/Limits
memantine hcl-donepezil hcl cap er 24hr 21-10 mg	4	
memantine hcl-donepezil hcl cap er 24hr 28-10 mg	4	
NAMZARIC CAP 7-10MG	4	
rivastigmine PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	4	QL (30 patches / 30 days)
rivastigmine tartrate CAPS 1.5mg, 3mg, 4.5mg, 6mg	3	QL (60 caps / 30 days)
ANTIDEPRESSANTS		
amitriptyline hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	3	PA; PA applies if 65 years and older
amoxapine TABS 25mg, 50mg, 100mg, 150mg	3	PA; PA applies if 65 years and older
AUVELITY TAB 45-105MG	4	QL (60 tabs / 30 days), PA
bupropion hcl TABS 75mg, 100mg	2	
bupropion hcl TB12 100mg, 150mg, 200mg; TB24 150mg	2	QL (60 tabs / 30 days)
bupropion hcl TB24 300mg	2	QL (30 tabs / 30 days)
citalopram hydrobromide SOLN 10mg/5ml	3	
citalopram hydrobromide TABS 10mg, 20mg, 40mg	1	
clomipramine hcl CAPS 25mg, 50mg, 75mg	4	PA
desipramine hcl TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	4	PA; PA applies if 65 years and older
desvenlafaxine succinate TB24 25mg, 50mg, 100mg	3	QL (30 tabs / 30 days)
doxepin hcl CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml	3	PA; PA applies if 65 years and older
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg	4	QL (60 caps / 30 days), PA
duloxetine hcl CPEP 20mg, 30mg, 60mg	3	QL (60 caps / 30 days)
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	5	QL (30 patches / 30 days), PA
escitalopram oxalate SOLN 5mg/5ml	4	
escitalopram oxalate TABS 5mg, 10mg, 20mg	1	
FETZIMA CP24 20mg, 40mg	4	QL (60 caps / 30 days), PA
FETZIMA CP24 80mg, 120mg	4	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	4	QL (2 packs / year), PA
fluoxetine hcl CAPS 10mg, 20mg, 40mg	1	
fluoxetine hcl SOLN 20mg/5ml	3	

Drug Name	Drug Tier	Requirements/Limits
imipramine hcl TABS 10mg, 25mg, 50mg	2	PA; PA applies if 65 years and older
MARPLAN TABS 10mg	4	QL (180 tabs / 30 days)
mirtazapine TABS 7.5mg; TBDP 15mg, 30mg, 45mg	3	
mirtazapine TABS 15mg, 30mg, 45mg	2	
nefazodone hcl TABS 50mg, 100mg, 150mg, 200mg, 250mg	4	
nortriptyline hcl CAPS 10mg, 25mg, 50mg, 75mg	2	
nortriptyline hcl SOLN 10mg/5ml	4	
paroxetine hcl SUSP 10mg/5ml	4	QL (900 mL / 30 days), PA; PA applies if 65 years and older
paroxetine hcl TABS 10mg, 20mg, 30mg, 40mg	2	PA; PA applies if 65 years and older
phenelzine sulfate TABS 15mg	3	
protriptyline hcl TABS 5mg, 10mg	4	
RALDESY SOLN 10mg/ml	4	QL (1800 mL / 30 days), PA
sertraline hcl CONC 20mg/ml	3	
sertraline hcl TABS 25mg, 50mg, 100mg	1	
tranylcypromine sulfate TABS 10mg	4	
trazodone hcl TABS 50mg, 100mg, 150mg	1	
trimipramine maleate CAPS 25mg, 50mg	4	QL (120 caps / 30 days)
trimipramine maleate CAPS 100mg	4	QL (60 caps / 30 days)
TRINTELLIX TABS 5mg, 10mg, 20mg	4	QL (30 tabs / 30 days), PA
venlafaxine hcl CP24 37.5mg, 75mg, 150mg	2	
venlafaxine hcl TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	3	
vilazodone hcl TABS 10mg, 20mg, 40mg	4	QL (30 tabs / 30 days)
ZURZUVAE CAPS 20mg, 25mg	5	QL (28 caps / 14 days), NM, PA
ZURZUVAE CAPS 30mg	5	QL (14 caps / 14 days), NM, PA
ANTIPARKINSONIAN AGENTS		
amantadine hcl CAPS 100mg	3	QL (120 caps / 30 days)
amantadine hcl SOLN 50mg/5ml	3	
amantadine hcl TABS 100mg	4	
benztropine mesylate SOLN 1mg/ml	4	
benztropine mesylate TABS .5mg, 1mg, 2mg	2	PA; PA applies if 65 years and older
bromocriptine mesylate CAPS 5mg; TABS 2.5mg	4	

Drug Name	Drug Tier	Requirements/Limits
carb/levo orally disintegrating tab 10-100mg	3	
carb/levo orally disintegrating tab 25-100mg	3	
carb/levo orally disintegrating tab 25-250mg	3	
carbidopa & levodopa tab 10-100 mg	2	
carbidopa & levodopa tab 25-100 mg	2	
carbidopa & levodopa tab 25-250 mg	2	
carbidopa & levodopa tab er 25-100 mg	3	
carbidopa & levodopa tab er 50-200 mg	3	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	4	
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	4	
carbidopa-levodopa-entacapone tabs 25-100-200 mg	4	
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	4	
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	4	
carbidopa-levodopa-entacapone tabs 50-200-200 mg	4	
entacapone TABS 200mg	4	
INBRIJA CAPS 42mg	5	QL (300 caps / 30 days), NM, PA
pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg	2	
rasagiline mesylate TABS .5mg, 1mg	4	QL (30 tabs / 30 days)
ropinirole hydrochloride TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg	2	
selegiline hcl CAPS 5mg; TABS 5mg	3	
trihexyphenidyl hcl SOLN .4mg/ml	3	
trihexyphenidyl hcl TABS 2mg, 5mg	2	
ANTIPSYCHOTICS		
ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml	5	QL (1 syringe / 56 days)
ABILIFY MAINTENA PRSY 300mg, 400mg	5	QL (1 syringe / 28 days)
ABILIFY MAINTENA SRER 300mg, 400mg	5	QL (1 injection / 28 days)
aripiprazole SOLN 1mg/ml	4	QL (900 mL / 30 days)
aripiprazole TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg	4	QL (30 tabs / 30 days)
aripiprazole TBDP 10mg, 15mg	4	QL (60 tabs / 30 days), ST
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml	5	QL (1 syringe / 28 days)

Drug Name	Drug Tier	Requirements/Limits
ARISTADA PRSY 1064mg/3.9ml	5	QL (1 syringe / 56 days)
ARISTADA INITIO PRSY 675mg/2.4ml	5	
asenapine maleate SUBL 2.5mg, 5mg, 10mg	4	QL (60 tabs / 30 days)
CAPLYTA CAPS 10.5mg, 21mg, 42mg	5	QL (30 caps / 30 days)
chlorpromazine hcl CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	4	
clozapine TABS 25mg, 50mg	3	
clozapine TABS 100mg	3	QL (270 tabs / 30 days)
clozapine TABS 200mg	3	QL (120 tabs / 30 days)
clozapine TBDP 12.5mg, 25mg	4	PA
clozapine TBDP 100mg	4	QL (270 tabs / 30 days), PA
clozapine TBDP 150mg	4	QL (180 tabs / 30 days), PA
clozapine TBDP 200mg	4	QL (120 tabs / 30 days), PA
COBENFY CAP 50-20MG	5	QL (60 caps / 30 days), PA
COBENFY CAP 100-20MG	5	QL (60 caps / 30 days), PA
COBENFY CAP 125-30MG	5	QL (60 caps / 30 days), PA
COBENFY STRT CAP PACK	5	QL (2 packs / year), PA
ERZOFRI SUSY 39mg/0.25ml	4	QL (1 syringe / 28 days)
ERZOFRI SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	5	QL (1 syringe / 28 days)
ERZOFRI SUSY 351mg/2.25ml	5	QL (2 syringes / year)
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	5	QL (60 tabs / 30 days), PA
FANAPT PAK PACK A	4	QL (2 packs / year), PA
FANAPT PAK PACK B	4	QL (2 packs / year), PA
FANAPT PAK PACK C	4	QL (2 packs / year), PA
fluphenazine decanoate SOLN 25mg/ml	4	
fluphenazine hcl CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	4	
haloperidol TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	3	
haloperidol decanoate SOLN 50mg/ml, 100mg/ml	3	
haloperidol lactate CONC 2mg/ml; SOLN 5mg/ml	3	
INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml	5	QL (1 injection / 180 days)
INVEGA SUSTENNA SUSY 39mg/0.25ml	4	QL (1 syringe / 28 days)

Drug Name	Drug Tier	Requirements/Limits
INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	5	QL (1 syringe / 28 days)
INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml	5	QL (1 syringe / 90 days)
loxapine succinate CAPS 5mg, 10mg, 25mg, 50mg	3	
lurasidone hcl TABS 20mg, 40mg, 60mg, 120mg	4	QL (30 tabs / 30 days)
lurasidone hcl TABS 80mg	4	QL (60 tabs / 30 days)
LYBALVI TAB 5-10MG	5	QL (30 tabs / 30 days)
LYBALVI TAB 10-10MG	5	QL (30 tabs / 30 days)
LYBALVI TAB 15-10MG	5	QL (30 tabs / 30 days)
LYBALVI TAB 20-10MG	5	QL (30 tabs / 30 days)
molindone hcl TABS 5mg, 10mg, 25mg	4	
NUPLAZID CAPS 34mg	5	QL (30 caps / 30 days), NM, PA
NUPLAZID TABS 10mg	5	QL (30 tabs / 30 days), NM, PA
olanzapine SOLR 10mg	4	QL (3 vials / 1 day)
olanzapine TABS 2.5mg, 5mg, 10mg	2	QL (60 tabs / 30 days)
olanzapine TABS 7.5mg, 15mg, 20mg	2	QL (30 tabs / 30 days)
olanzapine TBDP 5mg, 15mg, 20mg	4	QL (30 tabs / 30 days), ST
olanzapine TBDP 10mg	4	QL (60 tabs / 30 days), ST
OPIPZA FILM 2mg, 5mg	5	QL (30 films / 30 days), PA
OPIPZA FILM 10mg	5	QL (90 films / 30 days), PA
paliperidone TB24 1.5mg, 3mg, 9mg	4	QL (30 tabs / 30 days)
paliperidone TB24 6mg	4	QL (60 tabs / 30 days)
perphenazine TABS 2mg, 4mg, 8mg, 16mg	3	
pimozide TABS 1mg, 2mg	4	
quetiapine fumarate TABS 25mg	2	QL (180 tabs / 30 days)
quetiapine fumarate TABS 50mg, 100mg, 150mg, 200mg	2	QL (90 tabs / 30 days)
quetiapine fumarate TABS 300mg, 400mg	2	QL (60 tabs / 30 days)
quetiapine fumarate TB24 50mg, 300mg, 400mg	4	QL (60 tabs / 30 days), PA
quetiapine fumarate TB24 150mg, 200mg	4	QL (30 tabs / 30 days), PA
REXULTI TABS 3mg, 4mg	5	QL (30 tabs / 30 days)
REXULTI TABS .25mg, .5mg, 1mg, 2mg	5	QL (60 tabs / 30 days)
risperidone SOLN 1mg/ml	3	QL (240 mL / 30 days)

Drug Name	Drug Tier	Requirements/Limits
risperidone TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	2	
risperidone TBDP 1mg, 2mg, 3mg	4	QL (60 tabs / 30 days), ST
risperidone TBDP 4mg	4	QL (120 tabs / 30 days), ST
risperidone TBDP .25mg, .5mg	4	QL (90 tabs / 30 days), ST
risperidone microspheres SRER 12.5mg, 25mg	4	QL (2 injections / 28 days)
risperidone microspheres SRER 37.5mg, 50mg	5	QL (2 injections / 28 days)
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr	5	QL (30 patches / 30 days)
thioridazine hcl TABS 10mg, 25mg, 50mg, 100mg	3	
thiothixene CAPS 1mg, 2mg, 5mg, 10mg	4	
trifluoperazine hcl TABS 1mg, 2mg, 5mg, 10mg	3	
VERSACLOZ SUSP 50mg/ml	5	QL (600 mL / 30 days), PA
VRAYLAR CAPS 1.5mg	5	QL (60 caps / 30 days)
VRAYLAR CAPS 3mg, 4.5mg, 6mg	5	QL (30 caps / 30 days)
ziprasidone hcl CAPS 20mg, 40mg, 60mg, 80mg	4	QL (60 caps / 30 days)
ziprasidone mesylate SOLR 20mg	4	QL (6 injections / 3 days)
ZYPREXA RELPREVV SUSR 210mg	4	QL (2 vials / 28 days), NM, PA
ZYPREXA RELPREVV SUSR 300mg	5	QL (2 vials / 28 days), NM, PA
ZYPREXA RELPREVV SUSR 405mg	5	QL (1 vial / 28 days), NM, PA
ANTISEIZURE AGENTS		
APTIOM TABS 200mg, 400mg	5	QL (30 tabs / 30 days)
APTIOM TABS 600mg, 800mg	5	QL (60 tabs / 30 days)
BRIVIACT SOLN 10mg/ml	5	QL (600 mL / 30 days), PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg	5	QL (60 tabs / 30 days), PA
carbamazepine CHEW 100mg; TABS 200mg	3	
carbamazepine CHEW 200mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TB12 100mg, 200mg, 400mg	4	
clobazam SUSP 2.5mg/ml	4	QL (480 mL / 30 days)
clobazam TABS 10mg, 20mg	4	QL (60 tabs / 30 days)
clonazepam TABS 2mg	2	QL (300 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
clonazepam TABS .5mg, 1mg	2	QL (90 tabs / 30 days)
clonazepam TBDP 2mg	3	QL (300 tabs / 30 days)
clonazepam TBDP .125mg, .25mg, .5mg, 1mg	3	QL (90 tabs / 30 days)
clorazepate dipotassium TABS 3.75mg, 7.5mg, 15mg	4	QL (180 tabs / 30 days), PA; PA applies if 65 years and older
DIACOMIT CAPS 250mg	5	QL (360 caps / 30 days), NM, PA
DIACOMIT CAPS 500mg	5	QL (180 caps / 30 days), NM, PA
DIACOMIT PACK 250mg	5	QL (360 packets / 30 days), NM, PA
DIACOMIT PACK 500mg	5	QL (180 packets / 30 days), NM, PA
diazepam SOLN 5mg/5ml	3	QL (1200 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
diazepam TABS 2mg, 5mg, 10mg	2	QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
diazepam (anticonvulsant) GEL 2.5mg, 10mg, 20mg	4	
diazepam inj SOLN 5mg/ml	4	
diazepam intensol CONC 5mg/ml	3	QL (240 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
DILANTIN CAPS 30mg	4	
divalproex sodium CSDR 125mg	4	
divalproex sodium TB24 250mg, 500mg	3	
divalproex sodium TBEC 125mg, 250mg, 500mg	2	
EPIDIOLEX SOLN 100mg/ml	5	QL (600 mL / 30 days), NM
eslicarbazepine acetate TABS 200mg, 400mg	4	QL (30 tabs / 30 days)
eslicarbazepine acetate TABS 600mg, 800mg	4	QL (60 tabs / 30 days)
ethosuximide CAPS 250mg; SOLN 250mg/5ml	3	
felbamate SUSP 600mg/5ml; TABS 400mg, 600mg	4	

Drug Name	Drug Tier	Requirements/Limits
FINTEPLA SOLN 2.2mg/ml	5	QL (360 mL / 30 days), NM, PA
FYCOMPA SUSP .5mg/ml	5	QL (680 mL / 28 days), PA
FYCOMPA TABS 2mg	4	QL (60 tabs / 30 days), PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg	5	QL (30 tabs / 30 days), PA
gabapentin CAPS 100mg, 300mg, 400mg; TABS 600mg, 800mg	2	
gabapentin SOLN 250mg/5ml, 300mg/6ml	3	QL (2160 mL / 30 days)
lacosamide SOLN 200mg/20ml	4	
lacosamide TABS 50mg	4	QL (120 tabs / 30 days)
lacosamide TABS 100mg, 150mg, 200mg	4	QL (60 tabs / 30 days)
lacosamide oral SOLN 10mg/ml	4	QL (1200 mL / 30 days)
lamotrigine CHEW 5mg, 25mg	3	
lamotrigine TABS 25mg, 100mg, 150mg, 200mg	1	
lamotrigine TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	4	ST
levetiracetam SOLN 100mg/ml; TB24 500mg, 750mg	3	
levetiracetam SOLN 500mg/5ml	4	
levetiracetam TABS 250mg, 500mg, 750mg, 1000mg	2	
LEVETIRACETAM TB3D 250mg	4	QL (360 tabs / 30 days)
levetiracetam in sodium chloride iv soln 500 mg/100ml	4	
levetiracetam in sodium chloride iv soln 1000 mg/100ml	4	
levetiracetam in sodium chloride iv soln 1500 mg/100ml	4	
methsuximide CAPS 300mg	4	
NAYZILAM SOLN 5mg/0.1ml	4	QL (10 nasal units / 30 days)
oxcarbazepine SUSP 300mg/5ml	4	
oxcarbazepine TABS 150mg, 300mg, 600mg	3	
perampanel TABS 2mg	4	QL (60 tabs / 30 days), PA
perampanel TABS 4mg, 6mg, 8mg, 10mg, 12mg	4	QL (30 tabs / 30 days), PA
phenobarbital ELIX 20mg/5ml	4	QL (1500 mL / 30 days), PA; PA applies if 65 years and older
phenobarbital TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	3	QL (120 tabs / 30 days), PA; PA applies if 65 years and older

Drug Name	Drug Tier	Requirements/Limits
phenobarbital sodium SOLN 65mg/ml, 130mg/ml	4	PA; PA applies if 65 years and older
phenytek CAPS 200mg, 300mg	3	
phenytoin CHEW 50mg; SUSP 125mg/5ml	3	
phenytoin sodium SOLN 50mg/ml	4	
phenytoin sodium extended CAPS 100mg, 200mg, 300mg	3	
pregabalin CAPS 25mg, 50mg, 75mg, 100mg, 150mg	3	QL (120 caps / 30 days), PA; PA applies if 65 years and older
pregabalin CAPS 200mg	3	QL (90 caps / 30 days), PA; PA applies if 65 years and older
pregabalin CAPS 225mg, 300mg	3	QL (60 caps / 30 days), PA; PA applies if 65 years and older
pregabalin SOLN 20mg/ml	4	QL (900 mL / 30 days), PA; PA applies if 65 years and older
primidone TABS 50mg, 125mg, 250mg	2	
roweepra TABS 500mg	2	
rufinamide SUSP 40mg/ml	5	QL (2400 mL / 30 days), PA
rufinamide TABS 200mg	4	QL (480 tabs / 30 days), PA
rufinamide TABS 400mg	5	QL (240 tabs / 30 days), PA
SPRITAM TB3D 250mg	4	QL (360 tabs / 30 days)
SPRITAM TB3D 500mg	4	QL (180 tabs / 30 days)
SPRITAM TB3D 750mg	4	QL (120 tabs / 30 days)
SPRITAM TB3D 1000mg	4	QL (90 tabs / 30 days)
subvenite TABS 25mg, 100mg, 150mg, 200mg	1	
SYMPAZAN FILM 5mg, 10mg, 20mg	5	QL (60 films / 30 days), PA
tiagabine hcl TABS 2mg, 4mg, 12mg, 16mg	4	
topiramate CPSP 15mg, 25mg	3	
topiramate CPSP 50mg	4	
topiramate SOLN 25mg/ml	4	QL (480 mL / 30 days), PA
topiramate TABS 25mg, 50mg, 100mg, 200mg	2	
valproate sodium SOLN 100mg/ml	4	
valproate sodium SOLN 250mg/5ml	3	
valproic acid CAPS 250mg	2	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml	4	QL (10 blister packs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml	4	QL (10 blister packs / 30 days)
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml	4	QL (10 blister packs / 30 days)
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml	4	QL (10 blister packs / 30 days)
vigabatrin PACK 500mg	5	QL (180 packets / 30 days), NM, PA
vigabatrin TABS 500mg	5	QL (180 tabs / 30 days), NM, PA
vigadrone PACK 500mg	5	QL (180 packets / 30 days), NM, PA
vigadrone TABS 500mg	5	QL (180 tabs / 30 days), NM, PA
VIGAFYDE SOLN 100mg/ml	5	QL (900 mL / 30 days), NM, PA
vigpoder PACK 500mg	5	QL (180 packets / 30 days), NM, PA
XCOPRI TABS 25mg, 50mg, 100mg	5	QL (30 tabs / 30 days)
XCOPRI TABS 150mg, 200mg	5	QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	4	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	5	QL (28 tabs / 28 days)
XCOPRI PAK 100-150	5	QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	5	QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	5	QL (28 tabs / 28 days)
ZONISADE SUSP 100mg/5ml	5	QL (900 mL / 30 days), PA
zonisamide CAPS 25mg, 50mg, 100mg	2	
ZTALMY SUSP 50mg/ml	5	QL (1100 mL / 30 days), NM, PA
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
amphetamine-dextroamphetamine cap er 24hr 5 mg	4	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 10 mg	4	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 15 mg	4	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 20 mg	4	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 25 mg	4	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 30 mg	4	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine tab 5 mg	3	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 7.5 mg	3	QL (60 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
amphetamine-dextroamphetamine tab 10 mg	3	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 12.5 mg	3	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 15 mg	3	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 20 mg	3	QL (90 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 30 mg	3	QL (60 tabs / 30 days), PA
atomoxetine hcl CAPS 10mg, 18mg, 25mg	4	QL (120 caps / 30 days)
atomoxetine hcl CAPS 40mg	4	QL (60 caps / 30 days)
atomoxetine hcl CAPS 60mg, 80mg, 100mg	4	QL (30 caps / 30 days)
dexmethylphenidate hcl TABS 2.5mg, 5mg	3	QL (120 tabs / 30 days), PA
dexmethylphenidate hcl TABS 10mg	3	QL (60 tabs / 30 days), PA
guanfacine hcl (adhd) TB24 1mg, 2mg, 4mg	3	QL (30 tabs / 30 days), PA; PA applies if 65 years and older
guanfacine hcl (adhd) TB24 3mg	3	QL (60 tabs / 30 days), PA; PA applies if 65 years and older
methylphenidate hcl CHEW 2.5mg, 5mg, 10mg	4	QL (180 tabs / 30 days), PA
methylphenidate hcl SOLN 5mg/5ml	4	QL (1800 mL / 30 days), PA
methylphenidate hcl SOLN 10mg/5ml	4	QL (900 mL / 30 days), PA
methylphenidate hcl TABS 5mg, 10mg	3	QL (180 tabs / 30 days), PA
methylphenidate hcl TABS 20mg	3	QL (90 tabs / 30 days), PA
methylphenidate hcl TBCR 10mg, 20mg	4	QL (90 tabs / 30 days), PA
HYPNOTICS		
DAYVIGO TABS 5mg, 10mg	3	QL (30 tabs / 30 days)
doxepin hcl (sleep) TABS 3mg, 6mg	3	QL (30 tabs / 30 days)
eszopiclone TABS 1mg, 2mg, 3mg	4	QL (30 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
ramelteon TABS 8mg	3	QL (30 tabs / 30 days)
tasimelteon CAPS 20mg	5	QL (30 caps / 30 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
temazepam CAPS 7.5mg, 30mg	4	QL (30 caps / 30 days), PA; PA applies if 65 years and older
temazepam CAPS 15mg	4	QL (60 caps / 30 days), PA; PA applies if 65 years and older
zaleplon CAPS 5mg	3	QL (30 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
zaleplon CAPS 10mg	3	QL (60 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
zolpidem tartrate TABS 5mg, 10mg	2	QL (30 tabs / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
MIGRAINE		
AIMOVIG SOAJ 70mg/ml, 140mg/ml	3	QL (1 pen / 30 days), NM
dihydroergotamine mesylate SOLN 4mg/ml	5	QL (8 mL / 30 days), PA
EMGALITY SOAJ 120mg/ml	3	QL (2 pens / 30 days), NM
EMGALITY SOSY 100mg/ml	3	QL (3 syringes / 30 days), NM
EMGALITY SOSY 120mg/ml	3	QL (2 syringes / 30 days), NM
ergotamine w/ caffeine tab 1-100 mg	3	QL (40 tabs / 28 days), PA
naratriptan hcl TABS 1mg, 2.5mg	3	QL (12 tabs / 30 days)
NURTEC TBDP 75mg	3	QL (16 tabs / 30 days)
QULIPTA TABS 10mg, 30mg, 60mg	3	QL (30 tabs / 30 days)
rizatriptan benzoate TABS 5mg, 10mg; TBDP 5mg, 10mg	3	QL (18 tabs / 30 days)
sumatriptan SOLN 5mg/act	4	QL (24 units / 30 days)
sumatriptan SOLN 20mg/act	4	QL (12 units / 30 days)
sumatriptan succinate SOAJ 4mg/0.5ml; SOCT 4mg/0.5ml	4	QL (18 injections / 30 days)
sumatriptan succinate SOAJ 6mg/0.5ml; SOCT 6mg/0.5ml; SOLN 6mg/0.5ml	4	QL (12 injections / 30 days)
sumatriptan succinate TABS 25mg, 50mg, 100mg	2	QL (12 tabs / 30 days)
UBRELVY TABS 50mg, 100mg	3	QL (16 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
MISCELLANEOUS		
AUSTEDO TABS 6mg	5	QL (60 tabs / 30 days), NM, PA
AUSTEDO TABS 9mg, 12mg	5	QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 6mg	5	QL (90 tabs / 30 days), NM, PA
AUSTEDO XR TB24 12mg	5	QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 18mg, 30mg, 36mg, 42mg, 48mg	5	QL (30 tabs / 30 days), NM, PA
AUSTEDO XR TB24 24mg	5	QL (60 tabs / 30 days), NM, PA
AUSTEDO XR TAB TITR KIT	5	QL (2 packs / year), NM, PA
lithium SOLN 8meq/5ml	4	
lithium carbonate CAPS 150mg, 300mg, 600mg; TABS 300mg	1	
lithium carbonate TBCR 300mg, 450mg	2	
NUEDEXTA CAP 20-10MG	5	QL (60 caps / 30 days), PA
pyridostigmine bromide TABS 60mg	3	
riluzole TABS 50mg	4	
tetrabenazine TABS 12.5mg	4	QL (90 tabs / 30 days), NM, PA
tetrabenazine TABS 25mg	5	QL (120 tabs / 30 days), NM, PA
MULTIPLE SCLEROSIS AGENTS		
BAFIERTAM CPDR 95mg	5	QL (120 caps / 30 days), NM, PA
BETASERON KIT .3mg	5	QL (14 kits / 28 days), NM, PA
COPAXONE SOSY 20mg/ml	5	QL (30 syringes / 30 days), NM, PA
COPAXONE SOSY 40mg/ml	5	QL (12 syringes / 28 days), NM, PA
dalfampridine TB12 10mg	3	QL (60 tabs / 30 days), NM, PA
fingolimod hcl CAPS .5mg	5	QL (30 caps / 30 days), NM, PA
glatiramer acetate SOSY 20mg/ml	5	QL (30 syringes / 30 days), NM, PA
glatiramer acetate SOSY 40mg/ml	5	QL (12 syringes / 28 days), NM, PA
glatopa SOSY 20mg/ml	5	QL (30 syringes / 30 days), NM, PA
glatopa SOSY 40mg/ml	5	QL (12 syringes / 28 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
KESIMPTA SOAJ 20mg/0.4ml	5	QL (16 pens / 365 days), NM, PA
MUSCULOSKELETAL THERAPY AGENTS		
baclofen TABS 5mg	2	QL (90 tabs / 30 days)
baclofen TABS 10mg, 20mg	2	
carisoprodol TABS 350mg	3	QL (120 tabs / 30 days), PA; PA applies if 65 years and older
cyclobenzaprine hcl TABS 5mg, 10mg	3	QL (90 tabs / 30 days), PA; PA applies if 65 years and older
dantrolene sodium CAPS 25mg, 50mg, 100mg	4	
methocarbamol TABS 500mg	3	QL (360 tabs / 30 days), PA; PA applies if 65 years and older
methocarbamol TABS 750mg	3	QL (240 tabs / 30 days), PA; PA applies if 65 years and older
tizanidine hcl TABS 2mg, 4mg	2	
NARCOLEPSY/CATAPLEXY		
armodafinil TABS 50mg	4	QL (60 tabs / 30 days), PA
armodafinil TABS 150mg, 200mg, 250mg	4	QL (30 tabs / 30 days), PA
modafinil TABS 100mg	3	QL (30 tabs / 30 days), PA
modafinil TABS 200mg	3	QL (60 tabs / 30 days), PA
SODIUM OXYBATE SOLN 500mg/ml	5	QL (540 mL / 30 days), NM, PA
PSYCHOTHERAPEUTIC-MISC		
acamprosate calcium TBEC 333mg	4	
buprenorphine hcl SUBL 2mg	3	QL (180 tabs / 30 days)
buprenorphine hcl SUBL 8mg	3	QL (120 tabs / 30 days)
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	4	QL (180 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	4	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	4	QL (120 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	4	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	2	QL (180 tabs / 30 days)
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	2	QL (120 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
bupropion hcl (smoking deterrent) TB12 150mg	2	QL (60 tabs / 30 days)
disulfiram TABS 250mg, 500mg	3	
KLOXXADO LIQD 8mg/0.1ml	3	
naloxone hcl LIQD 4mg/0.1ml	3	
naloxone hcl SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml	2	
naltrexone hcl TABS 50mg	3	
NICOTROL NS SOLN 10mg/ml	4	
varenicline tartrate TABS .5mg, 1mg	4	QL (56 tabs / 28 days)
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	4	QL (2 packs / year)
VIVITROL SUSR 380mg	5	NM
ENDOCRINE AND METABOLIC		
ANDROGENS		
danazol CAPS 50mg, 100mg, 200mg	4	
depo-testosterone SOLN 100mg/ml, 200mg/ml	3	PA
testosterone GEL 1%, 25mg/2.5gm, 50mg/5gm	4	QL (300 gm / 30 days), PA
testosterone cypionate SOLN 100mg/ml, 200mg/ml	3	PA
testosterone enanthate SOLN 200mg/ml	3	PA
testosterone pump GEL 1.62%	4	QL (150 gm / 30 days), PA
ANTIDIABETICS		
acarbose TABS 25mg, 50mg, 100mg	2	
dapagliflozin propanediol TABS 5mg, 10mg	3	QL (30 tabs / 30 days)
FARXIGA TABS 5mg, 10mg	3	QL (30 tabs / 30 days)
glimepiride TABS 1mg, 2mg	6	QL (90 tabs / 30 days)
glimepiride TABS 4mg	6	QL (60 tabs / 30 days)
glipizide TABS 5mg	6	QL (240 tabs / 30 days)
glipizide TABS 10mg	6	QL (120 tabs / 30 days)
glipizide TB24 2.5mg, 5mg	6	QL (90 tabs / 30 days)
glipizide TB24 10mg	6	QL (60 tabs / 30 days)
glipizide-metformin hcl tab 2.5-250 mg	6	QL (240 tabs / 30 days)
glipizide-metformin hcl tab 2.5-500 mg	6	QL (120 tabs / 30 days)
glipizide-metformin hcl tab 5-500 mg	6	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	3	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	3	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	3	QL (60 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
JANUMET XR TAB 100-1000	3	QL (30 tabs / 30 days)
JANUVIA TABS 25mg, 50mg, 100mg	3	QL (30 tabs / 30 days)
JARDIANCE TABS 10mg, 25mg	3	QL (30 tabs / 30 days), ST
JENTADUETO TAB 2.5-500	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	3	QL (30 tabs / 30 days)
metformin hcl TABS 500mg	6	QL (150 tabs / 30 days)
metformin hcl TABS 850mg	6	QL (90 tabs / 30 days)
metformin hcl TABS 1000mg	6	QL (75 tabs / 30 days)
metformin hcl TB24 500mg	6	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
metformin hcl TB24 750mg	6	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml	3	QL (4 pens / 28 days), PA
nateglinide TABS 60mg, 120mg	6	QL (90 tabs / 30 days)
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml	3	QL (1 pen / 28 days), PA
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	3	QL (1 pen / 28 days), PA
OZEMPIC (2MG/DOSE) SOPN 8mg/3ml	3	QL (1 pen / 28 days), PA
pioglitazone hcl TABS 15mg, 30mg, 45mg	6	QL (30 tabs / 30 days)
pioglitazone hcl-metformin hcl tab 15-500 mg	6	QL (90 tabs / 30 days)
pioglitazone hcl-metformin hcl tab 15-850 mg	6	QL (90 tabs / 30 days)
repaglinide TABS 2mg	6	QL (240 tabs / 30 days)
repaglinide TABS .5mg, 1mg	6	QL (120 tabs / 30 days)
RYBELSUS TABS 3mg, 7mg, 14mg	3	QL (30 tabs / 30 days), PA
TRADJENTA TABS 5mg	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	3	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	3	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	3	QL (30 tabs / 30 days)
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	3	QL (4 pens / 28 days), PA
XIGDUO XR TAB 2.5-1000	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	3	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
XIGDUO XR TAB 10-1000	3	QL (30 tabs / 30 days)
ANTIDIABETICS, INSULINS		
ADMELOG SOLN 100unit/ml	3	B/D
ADMELOG SOLOSTAR SOPN 100unit/ml	3	
ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY	3	PA
CEQUR SIMPL KIT PATCH 2U (3-DAY)	4	QL (10 patches / 30 days), PA
CEQUR SIMPL KIT PATCH 2U (4-DAY)	4	QL (8 patches / 24 days), PA
CEQUR SIMPL MIS INSERTER	4	QL (2 inserters / year), PA
FIASP SOLN 100unit/ml	3	B/D
FIASP FLEXTOUCH SOPN 100unit/ml	3	
FIASP PENFILL SOCT 100unit/ml	3	
FIASP PUMPCART SOCT 100unit/ml	3	B/D
GAUZE PADS 2" X 2"	3	PA
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	5	B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	5	
INSULIN PEN NEEDLES: EMBECTA-BD	3	PA
INSULIN SAFETY NEEDLES: EMBECTA-BD	3	PA
INSULIN SYRINGES: EMBECTA-BD	3	PA
LANTUS SOLN 100unit/ml	3	
LANTUS SOLOSTAR SOPN 100unit/ml	3	
NOVOLIN INJ 70/30	3	(brand RELION not covered)
NOVOLIN INJ 70/30 FP	3	(brand RELION not covered)
NOVOLIN N SUSP 100unit/ml	3	(brand RELION not covered)
NOVOLIN N FLEXPEN SUPN 100unit/ml	3	(brand RELION not covered)
NOVOLIN R SOLN 100unit/ml	3	B/D; (brand RELION not covered)
NOVOLIN R FLEXPEN SOPN 100unit/ml	3	(brand RELION not covered)
NOVOLOG SOLN 100unit/ml	3	B/D
NOVOLOG FLEXPEN SOPN 100unit/ml	3	
NOVOLOG FLEXPEN RELION SOPN 100unit/ml	3	
NOVOLOG MIX INJ 70/30	3	(brand RELION not covered)
NOVOLOG MIX INJ FLEXPEN	3	(brand RELION not covered)
NOVOLOG PENFILL SOCT 100unit/ml	3	

Drug Name	Drug Tier	Requirements/Limits
NOVOLOG RELION SOLN 100unit/ml	3	B/D
OMNIPOD 5 DX KIT INT G7G6	4	QL (1 kit / year), PA
OMNIPOD 5 DX MIS POD G7G6	4	QL (15 pods / 30 days), PA
OMNIPOD 5 L2 KIT INTRO G6	4	QL (1 kit / year), PA
OMNIPOD 5 L2 MIS PODS G6	4	QL (15 pods / 30 days), PA
OMNIPOD DASH KIT INTRO	4	QL (1 kit / year), PA
OMNIPOD DASH MIS PODS	4	QL (15 pods / 30 days), PA
SOLIQUA INJ 100/33	3	QL (5 pens / 25 days)
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	3	
TOUJEO SOLOSTAR SOPN 300unit/ml	3	
XULTOPHY INJ 100/3.6	3	QL (5 pens / 30 days)
CALCIUM REGULATORS		
alendronate sodium SOLN 70mg/75ml	4	ST
alendronate sodium TABS 10mg, 35mg, 70mg	6	
BONSITY SOPN 560mcg/2.24ml	5	QL (1 pen / 28 days), NM, PA
calcitonin (salmon) spray SOLN 200unit/act	3	B/D
ibandronate sodium TABS 150mg	2	B/D
PAMIDRONATE DISODIUM SOLN 6mg/ml	3	B/D
pamidronate disodium SOLN 30mg/10ml, 90mg/10ml	3	B/D
PROLIA SOSY 60mg/ml	4	QL (1 syringe / 180 days), NM
risedronate sodium TABS 5mg, 35mg, 150mg	3	
risedronate sodium TBEC 35mg	4	ST
TERIPARATIDE SOPN 560mcg/2.24ml	5	QL (1 pen / 28 days), NM, PA; (ALVOGEN product)
WYOST SOLN 120mg/1.7ml	5	NM, PA
zoledronic acid CONC 4mg/5ml	4	NM
zoledronic acid SOLN 5mg/100ml	4	B/D, NM
CHELATING AGENTS		
CHEMET CAPS 100mg	5	
deferasirox TABS 90mg	3	NM, PA
deferasirox TABS 180mg, 360mg; TBSO 125mg	4	NM, PA
deferasirox TBSO 250mg, 500mg	5	NM, PA
kionex SUSP 15gm/60ml	4	
LOKELMA PACK 5gm, 10gm	3	
penicillamine TABS 250mg	5	NM
sodium polystyrene sulfonate powder	3	

Drug Name	Drug Tier	Requirements/Limits
sps SUSP 15gm/60ml	4	
sps rectal SUSP 15gm/60ml	4	
trientine hcl CAPS 250mg	5	NM, PA
CONTRACEPTIVES		
afirmelle	2	
altavera	2	
alyacen 1/35	2	
alyacen 7/7/7	2	
amethyst	2	
apri	2	
aranelle	2	
ashlyna	2	
aubra eq	2	
aurovela 1/20	2	
aurovela 24 fe	2	
aurovela fe 1.5/30	2	
aurovela fe 1/20	2	
aviane	2	
ayuna	2	
azurette	2	
balziva	2	
blisovi 24 fe	2	
blisovi fe 1.5/30	2	
briellyn	2	
camila TABS .35mg	2	
camrese	2	
camrese lo	2	
chateal eq	2	
cryselle-28	2	
cyred eq	2	
dasetta 1/35	2	
dasetta 7/7/7	2	
daysee	2	
deblitane TABS .35mg	2	
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	3	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	2	
dolishale	2	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	2	
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	2	
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	

Drug Name	Drug Tier	Requirements/Limits
drospirenone-ethinyl estradiol tab 3-0.03 mg	2	
elinest	2	
eluryng	3	
emzahh TABS .35mg	2	
enilloring	3	
enskyce	2	
errin TABS .35mg	2	
estarylla	2	
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	3	
falmina	2	
feirza 1.5/30	2	
feirza 1/20	2	
finzala	2	
galbriela	2	
hailey 1.5/30	2	
hailey 24 fe	2	
haloette	3	
heather TABS .35mg	2	
iclevia	2	
incassia TABS .35mg	2	
introvale	2	
isibloom	2	
jaimiess	2	
jasmiel	2	
jolessa	2	
juleber	2	
junel 1.5/30	2	
junel 1/20	2	
junel fe 1.5/30	2	
junel fe 1/20	2	
junel fe 24	2	
kaitlib fe	2	
kariva	2	
kelnor 1/35	2	
kurvelo	2	
larin 1.5/30	2	
larin 1/20	2	
larin 24 fe	2	
larin fe 1.5/30	2	
larin fe 1/20	2	
lessina	2	
levonest	2	
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	2	

Drug Name	Drug Tier	Requirements/Limits
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	2	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	2	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2	
levora 0.15/30-28	2	
LILETTA IUD 20.1mcg/day	3	NM
loestrin 1.5/30-21	2	
loestrin 1/20-21	2	
loestrin fe 1.5/30	2	
loestrin fe 1/20	2	
lojaimiess	2	
loryna	2	
low-ogestrel	2	
lutera	2	
lyleq TABS .35mg	2	
lyza TABS .35mg	2	
marlissa	2	
medroxyprogesterone acetate (contraceptive) SUSP 150mg/ml; SUSY 150mg/ml	3	
meleya TABS .35mg	2	
mibelas 24 fe	2	
microgestin 1.5/30	2	
microgestin 1/20	2	
microgestin fe 1.5/30	2	
microgestin fe 1/20	2	
mili	2	
mono-linyah	2	
necon 0.5/35-28	2	
NEXPLANON IMPL 68mg	3	NM
nikki	2	
nora-be TABS .35mg	2	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	3	
norethindrone (contraceptive) TABS .35mg	2	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	2	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	

Drug Name	Drug Tier	Requirements/Limits
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	2	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	2	
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	2	
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	2	
norlyroc TABS .35mg	2	
nortrel 0.5/35 (28)	2	
nortrel 1/35 (21)	2	
nortrel 1/35 (28)	2	
nortrel 7/7/7	2	
nylia 1/35	2	
nylia 7/7/7	2	
ocella	2	
orquidea TABS .35mg	2	
philith	2	
pimtrea	2	
portia-28	2	
reclipsen	2	
rivelsa	2	
rosyrah	2	
setlakin	2	
sharobel TABS .35mg	2	
simliya	2	
simpesse	2	
sprintec 28	2	
sronyx	2	
syeda	2	
tarina 24 fe	2	
tarina fe 1/20 eq	2	
tilia fe	2	
tri-estarylla	2	
tri-legest fe	2	
tri-linyah	2	
tri-lo-estarylla	2	
tri-lo-marzia	2	
tri-lo-mili	2	
tri-lo-sprintec	2	
tri-mili	2	
tri-sprintec	2	
tri-vylibra	2	
tri-vylibra lo	2	
turqoz	2	
valtya 1/50	2	

Drug Name	Drug Tier	Requirements/Limits
velivet	2	
vestura	2	
vienva	2	
viorele	2	
vyfemla	2	
vylibra	2	
wera	2	
wymzya fe	2	
xarah fe	2	
xelria fe	2	
xulane	3	
zafemy	3	
zovia 1/35	2	
zumandimine	2	
ESTROGENS		
abigale	3	
abigale lo	3	
dotti PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
estradiol PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	3	
estradiol TABS .5mg, 1mg, 2mg	2	
estradiol & norethindrone acetate tab 0.5-0.1 mg	3	
estradiol & norethindrone acetate tab 1-0.5 mg	3	
estradiol vaginal CREA .1mg/gm	3	
estradiol vaginal TABS 10mcg	4	
estradiol valerate OIL 10mg/ml, 20mg/ml, 40mg/ml	4	
fyavolv tab 0.5mg-2.5mcg	3	
fyavolv tab 1mg-5mcg	3	
jinteli	3	
lyllana PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	3	
mimvey	3	
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	3	
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	3	
yuvafem TABS 10mcg	4	

Drug Name	Drug Tier	Requirements/Limits
GLUCOCORTICOIDS		
dexamethasone ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg	3	
DEXAMETHASONE INTENSOL CONC 1mg/ml	4	
dexamethasone sodium phosphate SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml	3	
fludrocortisone acetate TABS .1mg	2	
hydrocortisone TABS 5mg, 10mg, 20mg	3	
hydrocortisone sod succinate SOLR 100mg	4	
methylprednisolone TABS 4mg, 8mg, 16mg, 32mg	3	B/D
methylprednisolone TBPK 4mg	2	
methylprednisolone acetate SUSP 40mg/ml, 80mg/ml	3	B/D
methylprednisolone sod succ SOLR 40mg, 125mg, 500mg, 1000mg	3	B/D
prednisolone SOLN 15mg/5ml	2	B/D
prednisolone sodium phosphate SOLN 5mg/5ml, 25mg/5ml	4	B/D
prednisolone sodium phosphate SOLN 15mg/5ml	2	B/D
prednisone SOLN 5mg/5ml	4	B/D
prednisone TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	1	B/D
prednisone TBPK 5mg, 10mg	2	
PREDNISONE INTENSOL CONC 5mg/ml	4	B/D
SOLU-CORTEF SOLR 250mg, 500mg, 1000mg	4	
GLUCOSE ELEVATING AGENTS		
diazoxide SUSP 50mg/ml	5	
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml	3	
MISCELLANEOUS		
ALDURAZYME SOLN 2.9mg/5ml	5	NM, PA
betaine powder for oral solution	5	NM
cabergoline TABS .5mg	3	
carglumic acid TBSO 200mg	5	NM, PA
CERDELGA CAPS 84mg	5	NM, PA
CEREZYME SOLR 400unit	5	NM, PA
cinacalcet hcl TABS 30mg, 60mg	4	B/D, QL (60 tabs / 30 days), NM
cinacalcet hcl TABS 90mg	4	B/D, QL (120 tabs / 30 days), NM

Drug Name	Drug Tier	Requirements/Limits
CYSTAGON CAPS 50mg, 150mg	4	NM, PA
desmopressin acetate SOLN 4mcg/ml	5	
desmopressin acetate TABS .1mg, .2mg	3	
desmopressin acetate spray SOLN .01%	4	
desmopressin acetate spray refrigerated SOLN .01%	4	
FABRAZYME SOLR 5mg, 35mg	5	NM, PA
GENOTROPIN CART 5mg, 12mg	5	NM, PA
GENOTROPIN MINIQUICK PRSY .2mg	3	NM, PA
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	5	NM, PA
INCRELEX SOLN 40mg/4ml	5	NM, PA
javygtor PACK 100mg, 500mg; TABS 100mg	5	NM, PA
lanreotide acetate SOLN 120mg/0.5ml	5	NM, PA
levocarnitine (metabolic modifiers) SOLN 1gm/10ml; TABS 330mg	4	B/D
LUMIZYME SOLR 50mg	5	NM, PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg	5	NM
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg	5	NM
LUPRON DEPOT-PED (6-MONTH KIT 45mg	5	NM
mifepristone (hyperglycemia) TABS 300mg	5	NM, PA
NAGLAZYME SOLN 1mg/ml	5	NM, PA
nitisinone CAPS 2mg, 5mg, 10mg, 20mg	5	NM, PA
octreotide acetate SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	4	NM, PA
octreotide acetate SOLN 500mcg/ml, 1000mcg/ml; SOSY 500mcg/ml	5	NM, PA
raloxifene hcl TABS 60mg	3	
REVCOVI SOLN 2.4mg/1.5ml	5	NM, PA
REZDIFFRA TABS 60mg, 80mg, 100mg	5	QL (30 tabs / 30 days), NM, PA
sapropterin dihydrochloride PACK 100mg, 500mg; TABS 100mg	5	NM, PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	5	NM, PA
sodium phenylbutyrate POWD 3gm/tsp; TABS 500mg	5	NM, PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml	5	NM, PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
SYNAREL SOLN 2mg/ml	5	PA
tolvaptan TABS 15mg, 30mg	5	NM, PA; (generic of JYNARQUE)
tolvaptan TBPK 15mg	5	NM, PA
tolvaptan tab therapy pack 30 & 15 mg	5	NM, PA
tolvaptan tab therapy pack 45 & 15 mg	5	NM, PA
tolvaptan tab therapy pack 60 & 30 mg	5	NM, PA
tolvaptan tab therapy pack 90 & 30 mg	5	NM, PA
PROGESTINS		
gallifrey TABS 5mg	3	
medroxyprogesterone acetate TABS 2.5mg, 5mg, 10mg	1	
megestrol acetate SUSP 40mg/ml	3	
megestrol acetate (appetite) SUSP 625mg/5ml	4	PA
norethindrone acetate TABS 5mg	3	
progesterone CAPS 100mg, 200mg	3	
THYROID AGENTS		
levo-t TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
levothyroxine sodium TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
levoxyl TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
liothyronine sodium TABS 5mcg, 25mcg, 50mcg	3	
methimazole TABS 5mg, 10mg	1	
propylthiouracil TABS 50mg	3	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	4	
unithroid TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
VITAMIN D ANALOGS		
calcitriol CAPS .25mcg, .5mcg	2	B/D
calcitriol (oral) SOLN 1mcg/ml	4	B/D
paricalcitol CAPS 1mcg, 2mcg, 4mcg	4	B/D

Drug Name	Drug Tier	Requirements/Limits
GASTROINTESTINAL		
ANTIEMETICS		
aprepitant CAPS 40mg, 80mg, 125mg	4	B/D
aprepitant capsule therapy pack 80 & 125 mg	4	B/D
compro SUPP 25mg	4	
dronabinol CAPS 2.5mg, 5mg, 10mg	4	B/D, QL (60 caps / 30 days)
granisetron hcl SOLN 1mg/ml, 4mg/4ml	4	
granisetron hcl TABS 1mg	4	B/D
meclizine hcl TABS 12.5mg, 25mg	2	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
metoclopramide hcl SOLN 5mg/5ml, 5mg/ml	3	
metoclopramide hcl TABS 5mg, 10mg	1	
ondansetron TBDP 4mg, 8mg	3	B/D
ondansetron hcl SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	3	
ondansetron hcl SOLN 4mg/5ml	4	B/D
ondansetron hcl TABS 4mg, 8mg	3	B/D
prochlorperazine SUPP 25mg	4	
prochlorperazine edisylate SOLN 10mg/2ml	4	
prochlorperazine maleate TABS 5mg, 10mg	2	
promethazine hcl SOLN 6.25mg/5ml, 25mg/ml, 50mg/ml; TABS 12.5mg, 25mg, 50mg	3	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
scopolamine PT72 1mg/3days	4	QL (10 patches / 30 days)
ANTISPASMODICS		
dicyclomine hcl CAPS 10mg; TABS 20mg	3	PA; PA applies if 65 years and older
dicyclomine hcl SOLN 10mg/5ml	4	PA; PA applies if 65 years and older
glycopyrrolate TABS 1mg	3	QL (90 tabs / 30 days)
glycopyrrolate TABS 2mg	3	QL (120 tabs / 30 days)
H2-RECEPTOR ANTAGONISTS		
famotidine SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml	3	
famotidine SUSR 40mg/5ml	4	
famotidine TABS 20mg, 40mg	1	
famotidine in nacl 0.9% iv soln 20 mg/50ml	3	

Drug Name	Drug Tier	Requirements/Limits
nizatidine CAPS 150mg, 300mg	4	
INFLAMMATORY BOWEL DISEASE		
balsalazide disodium CAPS 750mg	3	
budesonide CPEP 3mg	4	QL (90 caps / 30 days)
budesonide TB24 9mg	5	QL (30 tabs / 30 days), PA
hydrocortisone (intrarectal) ENEM 100mg/60ml	4	
mesalamine CP24 .375gm	4	QL (120 caps / 30 days)
mesalamine CPDR 400mg	4	QL (180 caps / 30 days)
mesalamine ENEM 4gm	4	QL (1680 mL / 28 days)
mesalamine SUPP 1000mg	4	QL (30 suppositories / 30 days)
mesalamine TBEC 1.2gm	4	QL (120 tabs / 30 days)
mesalamine w/ cleanser KIT 4gm	4	QL (28 bottles / 28 days)
sulfasalazine TABS 500mg	2	
sulfasalazine TBEC 500mg	3	
LAXATIVES		
constulose SOLN 10gm/15ml	2	
enulose SOLN 10gm/15ml	2	
gavilyte-c	2	
gavilyte-g	2	
gavilyte-n/flavor pack	2	
generlac SOLN 10gm/15ml	2	
lactulose SOLN 10gm/15ml	2	
lactulose (encephalopathy) SOLN 10gm/15ml	2	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	2	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	2	
PLENVU SOL	4	
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	3	
MISCELLANEOUS		
alosetron hcl TABS 1mg	5	QL (60 tabs / 30 days), PA
alosetron hcl TABS .5mg	4	QL (60 tabs / 30 days), PA
CREON CAP 3000UNIT	3	
CREON CAP 6000UNIT	3	
CREON CAP 12000UNT	3	
CREON CAP 24000UNT	3	
CREON CAP 36000UNT	3	

Drug Name	Drug Tier	Requirements/Limits
cromolyn sodium (mastocytosis) CONC 100mg/5ml	4	
diphenoxylate w/ atropine tab 2.5-0.025 mg	4	
GATTEX KIT 5mg	5	NM, PA
LINZESS CAPS 72mcg, 145mcg, 290mcg	3	QL (30 caps / 30 days)
loperamide hcl CAPS 2mg	2	
misoprostol TABS 100mcg, 200mcg	3	
MOVANTIK TABS 12.5mg, 25mg	3	QL (30 tabs / 30 days)
RELISTOR SOLN 12mg/0.6ml	5	QL (28 vials / 28 days), PA
RELISTOR SOSY 8mg/0.4ml, 12mg/0.6ml	5	QL (28 syringes / 28 days), PA
sucralfate TABS 1gm	3	
ursodiol CAPS 300mg	4	
ursodiol TABS 250mg, 500mg	3	
VOQUEZNA PAK DUAL PAK	3	QL (2 kits / year), PA
VOQUEZNA PAK TRIP PK	3	QL (2 kits / year), PA
VOWST CAP	5	QL (12 caps / 30 days), NM, PA
XERMELO TABS 250mg	5	QL (84 tabs / 28 days), NM, PA
XIFAXAN TABS 550mg	5	PA
ZENPEP CAP 3000UNIT	4	
ZENPEP CAP 5000UNIT	4	
ZENPEP CAP 10000UNT	4	
ZENPEP CAP 15000UNT	4	
ZENPEP CAP 20000UNT	4	
ZENPEP CAP 25000UNT	4	
ZENPEP CAP 40000UNT	4	
ZENPEP CAP 60000UNT	4	
PROTON PUMP INHIBITORS		
esomeprazole magnesium CPDR 20mg, 40mg	3	QL (30 caps / 30 days), ST
lansoprazole CPDR 15mg, 30mg	3	QL (60 caps / 30 days)
omeprazole CPDR 10mg, 20mg, 40mg	1	
pantoprazole sodium SOLR 40mg	4	
pantoprazole sodium TBEC 20mg, 40mg	1	
rabeprazole sodium TBEC 20mg	3	QL (30 tabs / 30 days)
GENITOURINARY		
BENIGN PROSTATIC HYPERPLASIA		
alfuzosin hcl TB24 10mg	2	QL (30 tabs / 30 days)
dutasteride CAPS .5mg	3	QL (30 caps / 30 days)
dutasteride-tamsulosin hcl cap 0.5-0.4 mg	3	QL (30 caps / 30 days)
finasteride TABS 5mg	1	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
tadalafil TABS 5mg	3	QL (30 tabs / 30 days), PA
tamsulosin hcl CAPS .4mg	1	QL (60 caps / 30 days)
MISCELLANEOUS		
acetic acid SOLN .25%	2	
bethanechol chloride TABS 5mg, 10mg, 25mg, 50mg	3	
potassium citrate (alkalinizer) TBCR 15meq, 540mg, 1080mg	3	
URINARY ANTISPASMODICS		
fesoterodine fumarate TB24 4mg, 8mg	4	QL (30 tabs / 30 days)
GEMTESA TABS 75mg	3	QL (30 tabs / 30 days)
MYRBETRIQ SRER 8mg/ml	3	QL (300 mL / 28 days)
MYRBETRIQ TB24 25mg, 50mg	3	QL (30 tabs / 30 days)
oxybutynin chloride SOLN 5mg/5ml	3	QL (600 mL / 30 days)
oxybutynin chloride TABS 5mg	3	QL (120 tabs / 30 days)
oxybutynin chloride TB24 5mg	3	QL (30 tabs / 30 days)
oxybutynin chloride TB24 10mg, 15mg	3	QL (60 tabs / 30 days)
solifenacin succinate TABS 5mg, 10mg	4	QL (30 tabs / 30 days)
tolterodine tartrate CP24 2mg, 4mg	4	QL (30 caps / 30 days)
tolterodine tartrate TABS 1mg, 2mg	4	QL (60 tabs / 30 days)
trospium chloride TABS 20mg	3	QL (60 tabs / 30 days)
VAGINAL ANTI-INFECTIVES		
clindamycin phosphate vaginal CREA 2%	3	
metronidazole vaginal GEL .75%	3	
terconazole vaginal CREA .4%, .8%; SUPP 80mg	3	
HEMATOLOGIC		
ANTICOAGULANTS		
dabigatran etexilate mesylate CAPS 75mg, 150mg	3	QL (60 caps / 30 days)
dabigatran etexilate mesylate CAPS 110mg	3	QL (120 caps / 30 days)
ELIQUIS TABS 2.5mg	3	QL (60 tabs / 30 days)
ELIQUIS TABS 5mg	3	QL (74 tabs / 30 days)
ELIQUIS STARTER PACK TBPK 5mg	3	QL (74 tabs / 30 days)
enoxaparin sodium SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	4	
fondaparinux sodium SOLN 2.5mg/0.5ml	4	
fondaparinux sodium SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	5	
HEP SOD/NACL INJ 25000UNT	3	

Drug Name	Drug Tier	Requirements/Limits
heparin sodium (porcine) SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	3	B/D
jantoven TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
rivaroxaban SUSR 1mg/ml	3	QL (620 mL / 30 days)
rivaroxaban TABS 2.5mg	3	QL (60 tabs / 30 days)
warfarin sodium TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
XARELTO TABS 2.5mg	3	QL (60 tabs / 30 days)
XARELTO TABS 10mg, 15mg, 20mg	3	QL (30 tabs / 30 days)
XARELTO STAR TAB 15/20MG	3	QL (51 tabs / 30 days)
HEMATOPOIETIC GROWTH FACTORS		
FULPHILA SOSY 6mg/0.6ml	5	QL (2 syringes / 28 days), NM, PA
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	3	NM, PA
PROCRIT SOLN 20000unit/ml, 40000unit/ml	5	NM, PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	5	NM, PA
MISCELLANEOUS		
ALVAIZ TABS 9mg, 54mg	5	QL (60 tabs / 30 days), NM, PA
ALVAIZ TABS 18mg, 36mg	5	QL (90 tabs / 30 days), NM, PA
anagrelide hcl CAPS .5mg, 1mg	4	
BERINERT KIT 500unit	5	QL (24 boxes / 30 days), NM, PA
cilostazol TABS 50mg, 100mg	2	
DOPTELET TABS 20mg	5	NM, PA
HAEGARDA SOLR 2000unit	5	QL (30 vials / 30 days), NM, PA
HAEGARDA SOLR 3000unit	5	QL (20 vials / 30 days), NM, PA
icatibant acetate SOSY 30mg/3ml	5	QL (9 syringes / 30 days), NM, PA
l-glutamine (sickle cell) PACK 5gm	5	NM, PA
pentoxifylline TBCR 400mg	2	
sajazir SOSY 30mg/3ml	5	QL (9 syringes / 30 days), NM, PA
SIKLOS TABS 100mg	4	
SIKLOS TABS 1000mg	5	
TAVNEOS CAPS 10mg	5	QL (180 caps / 30 days), NM, PA
tranexamic acid SOLN 1000mg/10ml	4	
tranexamic acid TABS 650mg	3	

Drug Name	Drug Tier	Requirements/Limits
PLATELET AGGREGATION INHIBITORS		
aspirin-dipyridamole cap er 12hr 25-200 mg	4	
clopidogrel bisulfate TABS 75mg	1	
dipyridamole TABS 25mg, 50mg, 75mg	3	PA; PA applies if 65 years and older
prasugrel hcl TABS 5mg, 10mg	3	
ticagrelor TABS 60mg, 90mg	3	
IMMUNOLOGIC AGENTS		
AUTOIMMUNE AGENTS		
BIMZELX SOAJ 160mg/ml, 320mg/2ml	5	QL (2 pens / 28 days), NM, PA
BIMZELX SOSY 160mg/ml, 320mg/2ml	5	QL (2 syringes / 28 days), NM, PA
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml	5	QL (4 pens / 28 days), NM, PA
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml	5	QL (4 syringes / 28 days), NM, PA
ENBREL SOLN 25mg/0.5ml	5	QL (16 vials / 28 days), NM, PA
ENBREL SOSY 25mg/0.5ml	5	QL (16 syringes / 28 days), NM, PA
ENBREL SOSY 50mg/ml	5	QL (8 syringes / 28 days), NM, PA
ENBREL MINI SOCT 50mg/ml	5	QL (8 cartridges / 28 days), NM, PA
ENBREL SURECLICK SOAJ 50mg/ml	5	QL (8 pens / 28 days), NM, PA
HADLIMA SOSY 40mg/0.4ml, 40mg/0.8ml	5	QL (6 syringes / 28 days), NM, PA
HADLIMA PUSHTOUCH SOAJ 40mg/0.4ml, 40mg/0.8ml	5	QL (6 autoinjectors / 28 days), NM, PA
HUMIRA PSKT 10mg/0.1ml	5	QL (2 syringes / 28 days), NM, PA
HUMIRA PSKT 20mg/0.2ml	5	QL (4 syringes / 28 days), NM, PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	5	QL (6 syringes / 28 days), NM, PA
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml	5	QL (6 pens / 28 days), NM, PA
HUMIRA PEN AJKT 80mg/0.8ml	5	QL (4 pens / 28 days), NM, PA
HUMIRA PEN KIT PS/UV	5	QL (3 pens / 28 days), NM, PA
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml	5	QL (3 pens / 28 days), NM, PA
INFLIXIMAB SOLR 100mg	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
KINERET SOSY 100mg/0.67ml	5	QL (28 syringes / 28 days), NM, PA
PYZCHIVA SOAJ 45mg/0.5ml	3	QL (1 pen / 28 days), NM, PA
PYZCHIVA SOAJ 90mg/ml	5	QL (1 pen / 28 days), NM, PA
PYZCHIVA SOLN 45mg/0.5ml	3	QL (1 vial / 28 days), NM, PA
PYZCHIVA SOLN 130mg/26ml	5	NM, PA
PYZCHIVA SOSY 45mg/0.5ml	3	QL (1 syringe / 28 days), NM, PA
PYZCHIVA SOSY 90mg/ml	5	QL (1 syringe / 28 days), NM, PA
REMICADE SOLR 100mg	5	NM, PA
RENFLEXIS SOLR 100mg	5	NM, PA
RINVOQ TB24 15mg, 30mg	5	QL (30 tabs / 30 days), NM, PA
RINVOQ TB24 45mg	5	QL (168 tabs / year), NM, PA
RINVOQ LQ SOLN 1mg/ml	5	QL (360 mL / 30 days), NM, PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml	5	QL (1 cartridge / 56 days), NM, PA
SKYRIZI SOLN 600mg/10ml	5	NM, PA
SKYRIZI SOSY 150mg/ml	5	QL (6 syringes / 365 days), NM, PA
SKYRIZI PEN SOAJ 150mg/ml	5	QL (6 pens / 365 days), NM, PA
SOTYKTU TABS 6mg	5	QL (30 tabs / 30 days), NM, PA
STELARA SOLN 45mg/0.5ml	5	QL (1 vial / 28 days), NM, PA
STELARA SOLN 130mg/26ml	5	NM, PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	5	QL (1 syringe / 28 days), NM, PA
TREMFYA SOAJ 200mg/2ml	5	QL (2 pens / 28 days), NM, PA
TREMFYA SOLN 200mg/20ml	5	NM, PA
TREMFYA SOPN 100mg/ml	5	QL (1 pen / 28 days), NM, PA
TREMFYA SOSY 100mg/ml	5	QL (1 syringe / 28 days), NM, PA
TREMFYA SOSY 200mg/2ml	5	QL (2 syringes / 28 days), NM, PA
TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml	5	QL (2 pens / 28 days), NM, PA
TYENNE SOAJ 162mg/0.9ml	5	QL (4 pens / 28 days), NM, PA

Drug Name	Drug Tier	Requirements/Limits
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	5	NM, PA
TYENNE SOSY 162mg/0.9ml	5	QL (4 syringes / 28 days), NM, PA
USTEKINUMAB SOLN 45mg/0.5ml	5	QL (1 vial / 28 days), NM, PA
USTEKINUMAB SOLN 130mg/26ml	5	NM, PA
USTEKINUMAB SOSY 45mg/0.5ml, 90mg/ml	5	QL (1 syringe / 28 days), NM, PA
VELSIPITY TABS 2mg	5	QL (30 tabs / 30 days), NM, PA
XELJANZ SOLN 1mg/ml	5	QL (480 mL / 24 days), NM, PA
XELJANZ TABS 5mg, 10mg	5	QL (60 tabs / 30 days), NM, PA
XELJANZ XR TB24 11mg, 22mg	5	QL (30 tabs / 30 days), NM, PA
YESINTEK SOLN 45mg/0.5ml	3	QL (1 vial / 28 days), NM, PA
YESINTEK SOLN 130mg/26ml	3	NM, PA
YESINTEK SOSY 45mg/0.5ml	3	QL (1 syringe / 28 days), NM, PA
YESINTEK SOSY 90mg/ml	5	QL (1 syringe / 28 days), NM, PA
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)		
hydroxychloroquine sulfate TABS 200mg	3	
JYLAMVO SOLN 2mg/ml	4	B/D
leflunomide TABS 10mg, 20mg	3	QL (30 tabs / 30 days)
methotrexate sodium TABS 2.5mg	3	
XATMEP SOLN 2.5mg/ml	4	B/D
IMMUNOGLOBULINS		
ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	5	NM, PA
BIVIGAM SOLN 5gm/50ml, 10%	5	NM, PA
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	5	NM, PA
GAMASTAN INJ	4	NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	5	NM, PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	5	NM, PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	5	NM, PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	5	NM, PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	5	NM, PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	5	NM, PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	5	NM, PA
IMMUNOMODULATORS		
ACTIMMUNE SOLN 100mcg/0.5ml	5	NM, PA
ARCALYST SOLR 220mg	5	NM, PA
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CP24 5mg	5	B/D, NM
ASTAGRAF XL CP24 .5mg, 1mg	4	B/D, NM
azathioprine TABS 50mg	3	B/D
BENLYSTA SOAJ 200mg/ml	5	QL (8 pens / 28 days), NM, PA
BENLYSTA SOLR 120mg, 400mg	5	NM, PA
BENLYSTA SOSY 200mg/ml	5	QL (8 syringes / 28 days), NM, PA
cyclosporine CAPS 25mg, 100mg	4	B/D, NM
cyclosporine modified (for microemulsion) CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	4	B/D, NM
everolimus (immunosuppressant) TABS .5mg, .75mg, 1mg	5	B/D, NM
everolimus (immunosuppressant) TABS .25mg	4	B/D, NM
gengraf CAPS 25mg, 100mg	4	B/D, NM
mycophenolate mofetil CAPS 250mg; TABS 500mg	3	B/D, NM
mycophenolate mofetil SUSR 200mg/ml	5	B/D, NM
mycophenolate sodium TBEC 180mg, 360mg	4	B/D, NM
NULOJIX SOLR 250mg	5	B/D, NM
PROGRAF PACK .2mg, 1mg	4	B/D, NM
REZUROCK TABS 200mg	5	QL (30 tabs / 30 days), NM, PA
sirolimus SOLN 1mg/ml; TABS .5mg, 1mg, 2mg	4	B/D, NM
tacrolimus CAPS .5mg, 1mg, 5mg	4	B/D, NM
VACCINES		
ABRYSVO SOLR 120mcg/0.5ml	1	PA

Drug Name	Drug Tier	Requirements/Limits
ACTHIB INJ	1	
ADACEL INJ	1	
AREXVY SUSR 120mcg/0.5ml	1	PA
BCG VACCINE SOLR 50mg	1	
BEXSERO SUSY .5ml	1	
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
DENGVAXIA SUS	1	
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 SUSP .5ml; SUSY .5ml	1	
HAVRIX SUSY 720elu/0.5ml, 1440unit/ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D
HIBERIX SOLR 10mcg	1	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
IPOL INJ INACTIVE	1	
IXIARO INJ	1	
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	
M-M-R II INJ	1	
MENQUADFI SOLN .5ml	1	
MENVEO INJ	1	
MENVEO SOL	1	
MRESVIA SUSY 50mcg/0.5ml	1	PA
PEDIARIX INJ 0.5ML	1	
PEDVAX HIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENMENVY INJ	1	
PENTACEL INJ	1	
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml	1	QL (2 vials per lifetime)
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	
TRUMENBA SUSY .5ml	1	
TWINRIX INJ	1	

Drug Name	Drug Tier	Requirements/Limits
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	
VAQTA SUSP 25unit/0.5ml, 50unit/ml; SUSY 25unit/0.5ml, 50unit/ml	1	
VARIVAX SUSR 1350pfu/0.5ml	1	
VAXCHORA SUS	1	
VIMKUNYA SUSY 40mcg/0.8ml	1	
VIVOTIF CAP EC	1	
YF-VAX INJ	1	

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTES/MINERALS, INJECTABLE

D2.5W/NACL INJ 0.45%	4	
D10W/NACL INJ 0.2%	3	
dextrose 2.5% w/ sodium chloride 0.45%	3	
dextrose 5% in lactated ringers	3	
dextrose 5% w/ sodium chloride 0.2%	3	
dextrose 5% w/ sodium chloride 0.3%	3	
dextrose 5% w/ sodium chloride 0.9%	3	
dextrose 5% w/ sodium chloride 0.45%	3	
dextrose 5% w/ sodium chloride 0.225%	3	
dextrose 10% w/ sodium chloride 0.45%	3	
ISOLYTE-P INJ /D5W	4	
ISOLYTE-S INJ PH 7.4	4	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	3	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	3	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	3	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	3	
kcl 20 meq/l (0.15%) in nacl 0.9% inj	3	
kcl 20 meq/l (0.15%) in nacl 0.45% inj	3	
kcl 20 meq/l (0.149%) in nacl 0.45% inj	3	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj	3	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj	3	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj	3	
kcl 40 meq/l (0.3%) in nacl 0.9% inj	3	
KCL/D5W/NACL INJ 0.3/0.9%	4	
lactated ringer's solution	3	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	3	

Drug Name	Drug Tier	Requirements/Limits
magnesium sulfate SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%	3	
magnesium sulfate in dextrose 5% iv soln 1 gm/100ml	3	
multiple electrolytes ph 5.5	4	
POT CHL 20MEQ/L IN NACL 0.9% INJ	4	
POT CHL 20MEQ/L IN NACL 0.45% INJ	4	
POT CHL 40MEQ/L IN NACL 0.9% INJ	4	
potassium chloride SOLN 2meq/ml, 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	3	
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj	3	
sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%	3	
TPN ELECTROL INJ	4	B/D
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
klor-con PACK 20meq	4	
klor-con 8 TBCR 8meq	2	
klor-con 10 TBCR 10meq	2	
klor-con m10 TBCR 10meq	2	
klor-con m15 TBCR 15meq	2	
klor-con m20 TBCR 20meq	2	
M-NATAL PLUS TAB	3	
potassium chloride CPCR 8meq, 10meq; TBCR 8meq, 10meq, 20meq	2	
potassium chloride PACK 20meq; SOLN 10%, 20%	4	
potassium chloride microencapsulated crystals er TBCR 10meq, 15meq, 20meq	2	
PRENATAL TAB 27-1MG	3	
PRENATAL TAB PLUS	3	
sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln	2	
WESTAB PLUS TAB 27-1MG	3	
IV NUTRITION		
CLINIMIX INJ 4.25/D5W	4	B/D
CLINIMIX INJ 4.25/D10	4	B/D
CLINIMIX INJ 5%/D15W	4	B/D
CLINIMIX INJ 5%/D20W	4	B/D
CLINIMIX INJ 6/5	4	B/D
CLINIMIX INJ 8/10	4	B/D
CLINIMIX INJ 8/14	4	B/D
clinisol sf 15%	4	B/D

Drug Name	Drug Tier	Requirements/Limits
CLINOLIPID EMU 20%	4	B/D
dextrose SOLN 5%, 10%	3	
dextrose SOLN 50%, 70%	3	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	4	B/D
NUTRILIPID EMUL 20gm/100ml	4	B/D
plenamine	4	B/D
PREMASOL SOL 10%	5	B/D
PROSOL INJ 20%	4	B/D
TRAVASOL INJ 10%	4	B/D
TROPHAMINE INJ 10%	4	B/D
OPHTHALMIC		
ANTI-INFECTIVE/ANTI-INFLAMMATORY		
bacitracin-polymyxin-neomycin-hc ophth oint 1%	3	
neo-polycin hc ophth oint 1%	3	
neomycin-polymyxin-dexamethasone ophth oint 0.1%	2	
neomycin-polymyxin-dexamethasone ophth susp 0.1%	2	
neomycin-polymyxin-hc ophth susp	4	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	2	
TOBRADEX OIN 0.3-0.1%	3	
tobramycin-dexamethasone ophth susp 0.3-0.1%	3	
ZYLET SUS 0.5-0.3%	3	
ANTI-INFECTIVES		
bacitracin (ophthalmic) OINT 500unit/gm	3	
bacitracin-polymyxin b ophth oint	2	
BESIVANCE SUSP .6%	3	
CILOXAN OINT .3%	3	
ciprofloxacin hcl (ophth) SOLN .3%	2	
erythromycin (ophth) OINT 5mg/gm	2	
gatifloxacin (ophth) SOLN .5%	3	
gentamicin sulfate (ophth) SOLN .3%	2	
moxifloxacin hcl (ophth) SOLN .5%	3	QL (12 mL / 30 days)
NATACYN SUSP 5%	4	
neo-polycin 5(3.5)mg-400unt-10000unt op oin	3	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	3	
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	3	
ofloxacin (ophth) SOLN .3%	2	
polycin ophth oint	2	

Drug Name	Drug Tier	Requirements/Limits
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	1	
sulfacetamide sodium (ophth) OINT 10%; SOLN 10%	3	
tobramycin (ophth) SOLN .3%	1	
trifluridine SOLN 1%	4	
XDEMVY SOLN .25%	5	NM
ZIRGAN GEL .15%	4	
ANTI-INFLAMMATORIES		
dexamethasone sodium phosphate (ophth) SOLN .1%	3	
diclofenac sodium (ophth) SOLN .1%	2	
difluprednate EMUL .05%	4	
fluorometholone (ophth) SUSP .1%	3	
flurbiprofen sodium SOLN .03%	3	
ketorolac tromethamine (ophth) SOLN .4%	3	
ketorolac tromethamine (ophth) SOLN .5%	2	
LOTEMAX OINT .5%	3	
prednisolone acetate (ophth) SUSP 1%	3	
PREDNISOLONE SODIUM PHOSP SOLN 1%	3	
ANTIALLERGICS		
azelastine hcl (ophth) SOLN .05%	2	
cromolyn sodium (ophth) SOLN 4%	2	
ZERVIATE SOLN .24%	4	
ANTIGLAUCOMA		
betaxolol hcl (ophth) SOLN .5%	3	
brimonidine tartrate SOLN .2%	1	
brinzolamide SUSP 1%	4	ST
carteolol hcl (ophth) SOLN 1%	2	
COMBIGAN SOL 0.2/0.5%	3	
dorzolamide hcl SOLN 2%	2	
dorzolamide hcl-timolol maleate ophth soln 2-0.5%	2	
latanoprost SOLN .005%	1	
levobunolol hcl SOLN .5%	2	
LUMIGAN SOLN .01%	3	
pilocarpine hcl SOLN 1%, 2%, 4%	3	
RHOPRESSA SOLN .02%	4	
ROCKLATAN DRO	4	
SIMBRINZA SUS 1-0.2%	4	
timolol maleate (ophth) SOLG .25%, .5%	3	
timolol maleate (ophth) SOLN .25%, .5%	1	
VYZULTA SOLN .024%	4	

Drug Name	Drug Tier	Requirements/Limits
MISCELLANEOUS		
ATROPINE SULFATE SOLN 1%	3	
atropine sulfate (ophthalmic) SOLN 1%	3	
CYSTADROPS SOLN .37%	5	NM, PA
CYSTARAN SOLN .44%	5	NM, PA
EYSUVIS SUSP .25%	4	
MIEBO SOLN 1.338gm/ml	3	
proparacaine hcl SOLN .5%	3	
RESTASIS EMUL .05%	3	
RESTASIS MULTIDOSE EMUL .05%	3	
XIIDRA SOLN 5%	3	
OTIC		
OTIC AGENTS		
acetic acid (otic) SOLN 2%	3	
ciprofloxacin-dexamethasone otic susp 0.3-0.1%	4	
flac OIL .01%	3	
fluocinolone acetonide (otic) OIL .01%	3	
hydrocortisone w/ acetic acid otic soln 1-2%	4	
neomycin-polymyxin-hc otic soln 1%	3	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	3	
ofloxacin (otic) SOLN .3%	4	
RESPIRATORY		
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPT AER 62.5-25	3	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	3	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	3	QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	4	QL (2 inhalers / 30 days)
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	3	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG	3	QL (60 blisters / 30 days)
TRELEGY AER ELLIPTA 200-62.5-25 MCG	3	QL (60 blisters / 30 days)
ANTICHOLINERGICS		
ATROVENT HFA AERS 17mcg/act	4	QL (2 inhalers / 30 days)
INCRUSE ELLIPTA AEPB 62.5mcg/inh	3	QL (30 blisters / 30 days)
ipratropium bromide SOLN .02%	2	B/D

Drug Name	Drug Tier	Requirements/Limits
ipratropium bromide (nasal) SOLN .03%, .06%	3	
SPIRIVA RESPIMAT AERS 1.25mcg/act	4	QL (1 inhaler / 30 days)
ANTIHISTAMINES		
azelastine hcl SOLN .1%	2	
cetirizine hcl SOLN 5mg/5ml	2	QL (300 mL / 30 days)
cyproheptadine hcl SYRP 2mg/5ml; TABS 4mg	3	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
diphenhydramine hcl SOLN 50mg/ml	3	
hydroxyzine hcl SOLN 25mg/ml, 50mg/ml	4	PA; PA applies if 65 years and older
hydroxyzine hcl SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg	3	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
hydroxyzine pamoate CAPS 25mg, 50mg	3	PA; PA applies if 65 years and older after a 30 day supply in a calendar year
levocetirizine dihydrochloride SOLN 2.5mg/5ml	4	QL (300 mL / 30 days)
levocetirizine dihydrochloride TABS 5mg	2	QL (30 tabs / 30 days)
BETA AGONISTS		
albuterol sulfate AERS 108mcg/act	3	QL (2 inhalers / 30 days); (generic of Proair HFA)
albuterol sulfate AERS 108mcg/act	3	QL (2 inhalers / 30 days); (generic of Proventil HFA)
albuterol sulfate AERS 108mcg/act	3	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
albuterol sulfate NEBU .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	3	B/D
albuterol sulfate NEBU .083%	2	B/D
albuterol sulfate SYRP 2mg/5ml	3	
albuterol sulfate TABS 2mg, 4mg	4	
levalbuterol hcl NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	4	B/D
levalbuterol tartrate AERO 45mcg/act	3	QL (2 inhalers / 30 days), ST
SEREVENT DISKUS AEPB 50mcg/dose	3	QL (60 inhalations / 30 days)
terbutaline sulfate TABS 2.5mg, 5mg	4	
VENTOLIN HFA AERS 108mcg/act	3	QL (2 inhalers / 30 days)

Drug Name	Drug Tier	Requirements/Limits
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act	3	QL (6 inhalers / 30 days)
LEUKOTRIENE MODULATORS		
montelukast sodium CHEW 4mg, 5mg	2	
montelukast sodium PACK 4mg	4	
montelukast sodium TABS 10mg	1	
zafirlukast TABS 10mg, 20mg	3	
MISCELLANEOUS		
acetylcysteine SOLN 10%, 20%	4	B/D
ALYFTREK TAB 4-20-50	5	QL (84 tabs / 28 days), NM, PA
ALYFTREK TAB 10-50-125	5	QL (56 tabs / 28 days), NM, PA
ARALAST NP SOLR 500mg, 1000mg	5	NM, PA
cromolyn sodium NEBU 20mg/2ml	3	B/D
epinephrine (anaphylaxis) SOAJ .15mg/0.3ml, .3mg/0.3ml	3	(generic of EpiPen)
epinephrine (anaphylaxis) SOAJ .15mg/0.15ml, .3mg/0.3ml	3	(generic of Adrenaclick)
FASENRA SOSY 10mg/0.5ml, 30mg/ml	5	QL (1 syringe / 28 days), NM, PA
FASENRA PEN SOAJ 30mg/ml	5	QL (1 pen / 28 days), NM, PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg	5	QL (56 packets / 28 days), NM, PA
KALYDECO TABS 150mg	5	QL (60 tabs / 30 days), NM, PA
OFEV CAPS 100mg, 150mg	5	QL (60 caps / 30 days), NM, PA
ORKAMBI GRA 75-94MG	5	QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 100-125	5	QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 150-188	5	QL (56 packets / 28 days), NM, PA
ORKAMBI TAB 100-125	5	QL (112 tabs / 28 days), NM, PA
ORKAMBI TAB 200-125	5	QL (112 tabs / 28 days), NM, PA
pirfenidone CAPS 267mg	5	QL (270 caps / 30 days), NM, PA
pirfenidone TABS 267mg	5	QL (270 tabs / 30 days), NM, PA
pirfenidone TABS 534mg, 801mg	5	QL (90 tabs / 30 days), NM, PA
PROLASTIN-C SOLN 1000mg/20ml	5	NM, PA
PULMOZYME SOLN 2.5mg/2.5ml	5	NM, PA

Drug Name	Drug Tier	Requirements/Limits
roflumilast TABS 250mcg	4	QL (56 tabs / year)
roflumilast TABS 500mcg	4	QL (30 tabs / 30 days)
SYMDEKO TAB 50-75MG	5	QL (56 tabs / 28 days), NM, PA
SYMDEKO TAB 100-150	5	QL (56 tabs / 28 days), NM, PA
theophylline ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg	4	
theophylline TB24 400mg, 600mg	3	
TRIKAFTA PAK 59.5MG	5	QL (56 packs / 28 days), NM, PA
TRIKAFTA PAK 75MG	5	QL (56 packs / 28 days), NM, PA
TRIKAFTA TAB 50-25-37.5MG & 75MG	5	QL (84 tabs / 28 days), NM, PA
TRIKAFTA TAB 100-50-75MG & 150MG	5	QL (84 tabs / 28 days), NM, PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml	5	QL (4 pens / 28 days), NM, PA
XOLAIR SOAJ 150mg/ml	5	QL (8 pens / 28 days), NM, PA
XOLAIR SOLR 150mg	5	QL (8 vials / 28 days), NM, PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml	5	QL (4 syringes / 28 days), NM, PA
XOLAIR SOSY 150mg/ml	5	QL (8 syringes / 28 days), NM, PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	5	NM, PA
NASAL STEROIDS		
flunisolide (nasal) SOLN .025%	3	QL (3 bottles / 30 days)
fluticasone propionate (nasal) SUSP 50mcg/act	2	QL (1 bottle / 30 days)
XHANCE EXHU 93mcg/act	4	QL (32 mL / 30 days), PA
STEROID INHALANTS		
ALVESCO AERS 80mcg/act	4	QL (3 inhalers / 30 days)
ALVESCO AERS 160mcg/act	4	QL (2 inhalers / 30 days)
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	3	QL (30 inhalations / 30 days)
budesonide (inhalation) SUSP .25mg/2ml, .5mg/2ml	4	B/D
STEROID/BETA-AGONIST COMBINATIONS		
ADVAIR HFA AER 45/21	3	QL (1 inhaler / 30 days)

Drug Name	Drug Tier	Requirements/Limits
ADVAIR HFA AER 115/21	3	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	3	QL (1 inhaler / 30 days)
AIRSUPRA AER 90-80MCG	3	QL (3 inhalers / 30 days)
BREO ELLIPTA INH 50-25MCG	3	QL (60 blisters / 30 days)
BREO ELLIPTA INH 100-25	3	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	3	QL (60 blisters / 30 days)
breyna	3	QL (3 inhalers / 30 days)
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	3	QL (3 inhalers / 30 days)
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	3	QL (3 inhalers / 30 days)
DULERA AER 50-5MCG	4	QL (3 inhalers / 30 days)
DULERA AER 100-5MCG	4	QL (3 inhalers / 30 days)
DULERA AER 200-5MCG	4	QL (3 inhalers / 30 days)
fluticasone-salmeterol aer powder ba 100-50 mcg/act	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
fluticasone-salmeterol aer powder ba 250-50 mcg/act	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
fluticasone-salmeterol aer powder ba 500-50 mcg/act	3	QL (60 inhalations / 30 days); (generic PRASCO not covered)
wixela inhub	3	QL (60 inhalations / 30 days)

TOPICAL

DERMATOLOGY, ACNE

accutane CAPS 10mg, 20mg, 30mg, 40mg	4	PA
amnesteem CAPS 10mg, 20mg, 30mg, 40mg	4	PA
benzoyl peroxide-erythromycin gel 5-3%	4	QL (46.6 gm / 30 days)
claravis CAPS 10mg, 20mg, 30mg, 40mg	4	PA
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	3	QL (45 gm / 30 days)
clindamycin phosphate (topical) GEL 1%	3	QL (75 mL / 30 days), PA
clindamycin phosphate (topical) LOTN 1%; SOLN 1%	3	QL (60 mL / 30 days)
ery PADS 2%	3	QL (60 pledgets / 30 days)

Drug Name	Drug Tier	Requirements/Limits
erythromycin (acne aid) GEL 2%	3	QL (60 gm / 30 days)
erythromycin (acne aid) SOLN 2%	3	QL (60 mL / 30 days)
isotretinoin CAPS 10mg, 20mg, 30mg, 40mg	4	PA
neuac	3	QL (45 gm / 30 days)
sulfacetamide sodium (acne) LOTN 10%	4	QL (118 mL / 30 days)
tretinoin CREA .025%, .05%, .1%; GEL .01%, .025%	4	QL (45 gm / 30 days), PA
twice-daily clindamycin phosphate (topical) GEL 1%	3	QL (60 gm / 30 days)
zenatane CAPS 10mg, 20mg, 30mg, 40mg	4	PA
DERMATOLOGY, ANTIBIOTICS		
gentamicin sulfate (topical) CREA .1%; OINT .1%	3	QL (30 gm / 30 days)
mupirocin OINT 2%	2	QL (220 gm / 30 days)
silver sulfadiazine CREA 1%	2	
ssd CREA 1%	2	
SULFAMYLON CREA 85mg/gm	4	QL (453.6 gm / 30 days)
DERMATOLOGY, ANTIFUNGALS		
ciclopirox SHAM 1%	3	QL (120 mL / 30 days)
ciclopirox olamine CREA .77%	3	QL (90 gm / 30 days)
ciclopirox olamine SUSP .77%	3	QL (60 mL / 30 days)
clotrimazole (topical) CREA 1%	2	QL (45 gm / 30 days)
clotrimazole (topical) SOLN 1%	3	QL (60 mL / 30 days)
clotrimazole w/ betamethasone cream 1-0.05%	3	QL (45 gm / 30 days)
econazole nitrate CREA 1%	3	QL (85 gm / 30 days)
ketoconazole (topical) CREA 2%	3	QL (60 gm / 30 days)
ketoconazole (topical) SHAM 2%	2	QL (120 mL / 30 days)
klayesta POWD 100000unit/gm	3	QL (60 gm / 30 days)
nyamyc POWD 100000unit/gm	3	QL (60 gm / 30 days)
nystatin (topical) CREA 100000unit/gm; OINT 100000unit/gm	2	QL (30 gm / 30 days)
nystatin (topical) POWD 100000unit/gm	3	QL (60 gm / 30 days)
nystop POWD 100000unit/gm	3	QL (60 gm / 30 days)
selenium sulfide LOTN 2.5%	2	
DERMATOLOGY, ANTIPSORIATICS		
acitretin CAPS 10mg, 17.5mg, 25mg	4	
calcipotriene CREA .005%; OINT .005%	4	QL (120 gm / 30 days)
calcipotriene SOLN .005%	3	QL (120 mL / 30 days)
calcitrene OINT .005%	4	QL (120 gm / 30 days)
ENSTILAR AER	5	QL (120 gm / 30 days), PA
tazarotene CREA .05%, .1%	3	QL (60 gm / 30 days)
DERMATOLOGY, CORTICOSTEROIDS		
ala-cort CREA 1%	1	

Drug Name	Drug Tier	Requirements/Limits
alclometasone dipropionate CREA .05%; OINT .05%	3	QL (60 gm / 30 days)
betamethasone dipropionate (topical) CREA .05%	3	QL (120 gm / 30 days)
betamethasone dipropionate (topical) LOTN .05%	3	QL (120 mL / 30 days)
betamethasone dipropionate (topical) OINT .05%	4	QL (120 gm / 30 days)
betamethasone dipropionate augmented CREA .05%	2	QL (120 gm / 30 days)
betamethasone dipropionate augmented GEL .05%; OINT .05%	4	QL (120 gm / 30 days)
betamethasone dipropionate augmented LOTN .05%	4	QL (120 mL / 30 days)
betamethasone valerate CREA .1%; OINT .1%	3	QL (120 gm / 30 days)
betamethasone valerate LOTN .1%	3	QL (120 mL / 30 days)
clobetasol propionate CREA .05%; GEL .05%; OINT .05%	4	QL (120 gm / 30 days)
clobetasol propionate SHAM .05%	4	QL (236 mL / 30 days)
clobetasol propionate SOLN .05%	4	QL (100 mL / 30 days)
clobetasol propionate e CREA .05%	4	QL (120 gm / 30 days)
clodan SHAM .05%	4	QL (236 mL / 30 days)
fluocinolone acetonide CREA .01%	4	QL (60 gm / 30 days)
fluocinolone acetonide CREA .025%	4	QL (120 gm / 30 days)
fluocinolone acetonide OIL .01%	3	QL (118.28 mL / 30 days)
fluocinolone acetonide OINT .025%	3	QL (120 gm / 30 days)
fluocinolone acetonide SOLN .01%	4	QL (60 mL / 30 days)
fluocinonide CREA .05%, .1%	3	QL (120 gm / 30 days)
fluocinonide GEL .05%; OINT .05%	4	QL (60 gm / 30 days)
fluocinonide SOLN .05%	3	QL (60 mL / 30 days)
fluocinonide emulsified base CREA .05%	4	QL (120 gm / 30 days)
fluticasone propionate CREA .05%; OINT .005%	3	
halobetasol propionate CREA .05%; OINT .05%	4	QL (50 gm / 30 days)
hydrocortisone (topical) CREA 1%	1	
hydrocortisone (topical) CREA 2.5%; LOTN 2.5%; OINT 2.5%	2	
hydrocortisone (topical) OINT 1%	2	QL (30 gm / 30 days)
hydrocortisone valerate CREA .2%	3	QL (60 gm / 30 days)
mometasone furoate CREA .1%; OINT .1%; SOLN .1%	3	
triamcinolone acetonide (topical) CREA .025%, .1%, .5%	2	QL (454 gm / 30 days)

Drug Name	Drug Tier	Requirements/Limits
triamcinolone acetonide (topical) LOTN .025%, .1%	3	
triamcinolone acetonide (topical) OINT .025%, .1%, .5%	2	
triderm CREA .5%	2	QL (454 gm / 30 days)
DERMATOLOGY, LOCAL ANESTHETICS		
glydo PRSY 2%	3	QL (60 mL / 30 days), PA
lidocaine OINT 5%	4	QL (50 gm / 30 days), PA
lidocaine PTCH 5%	4	QL (3 patches / 1 day), PA
lidocaine hcl SOLN 4%	3	QL (50 mL / 30 days), PA
lidocaine-prilocaine cream 2.5-2.5%	2	B/D, QL (30 gm / 30 days)
lidocan PTCH 5%	4	QL (3 patches / 1 day), PA
tridacaine ii PTCH 5%	4	QL (3 patches / 1 day), PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
bexarotene (topical) GEL 1%	5	QL (60 gm / 30 days), NM, PA
diclofenac sodium (topical) SOLN 1.5%	3	QL (300 mL / 28 days)
EUCRISA OINT 2%	4	QL (120 gm / 30 days), PA
fluorouracil (topical) CREA 5%	4	QL (40 gm / 30 days)
fluorouracil (topical) SOLN 2%, 5%	3	QL (10 mL / 30 days)
hydrocortisone (rectal) CREA 1%, 2.5%	3	
imiquimod CREA 5%	3	QL (24 packets / 30 days)
lactic acid (ammonium lactate) CREA 12%; LOTN 12%	2	
metronidazole (topical) CREA .75%; GEL .75%	3	QL (45 gm / 30 days)
metronidazole (topical) LOTN .75%	4	QL (59 mL / 30 days)
nitroglycerin (intra-anal) OINT .4%	4	QL (30 gm / 30 days)
PANRETIN GEL .1%	5	QL (60 gm / 30 days), PA
pimecrolimus CREA 1%	4	QL (100 gm / 30 days), PA
podofilox SOLN .5%	3	QL (7 mL / 28 days)
procto-med hc CREA 2.5%	3	
proctocort CREA 1%	3	
proctosol hc CREA 2.5%	3	
proctozone-hc CREA 2.5%	3	
tacrolimus (topical) OINT .03%, .1%	4	QL (100 gm / 30 days)

Drug Name	Drug Tier	Requirements/Limits
VALCHLOR GEL .016%	5	QL (60 gm / 30 days), NM, PA
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
malathion LOTN .5%	4	QL (59 mL / 30 days)
permethrin CREA 5%	3	QL (60 gm / 30 days)
DERMATOLOGY, WOUND CARE AGENTS		
SANTYL OINT 250unit/gm	4	QL (180 gm / 30 days), PA
sodium chloride (gu irrigant) SOLN .9%	3	
water for irrigation, sterile irrigation soln	2	
MOUTH/THROAT/DENTAL AGENTS		
cevimeline hcl CAPS 30mg	4	
chlorhexidine gluconate (mouth-throat) SOLN .12%	1	
clotrimazole TROC 10mg	3	QL (150 lozenges / 30 days)
kourzeq PSTE .1%	3	
lidocaine hcl (mouth-throat) SOLN 2%	2	
nystatin (mouth-throat) SUSP 100000unit/ml	2	
periogard SOLN .12%	1	
pilocarpine hcl (oral) TABS 5mg, 7.5mg	3	
triamcinolone acetonide (mouth) PSTE .1%	3	

Index

A

abacavir sulfate 5
abacavir sulfate-lamivudine tab 600-300 mg 7
abigale 54
abigale lo 54
ABILIFY ASIMTUFII 34
ABILIFY MAINTENA 34
abiraterone acetate 12, 13
abirtega 13
ABRYSVO 66
acamprosate calcium 45
acarbose 46
accutane 76
acebutolol hcl 28
acetaminophen w/ codeine soln 120-12 mg/5ml 2
acetaminophen w/ codeine tab 300-15 mg 2
acetaminophen w/ codeine tab 300-30 mg 2
acetaminophen w/ codeine tab 300-60 mg 2
acetazolamide 29
acetic acid 61
acetic acid (otic) 72
acetylcysteine 74
acitretin 77
ACTHIB INJ 67
ACTIMMUNE 66
acyclovir 8
acyclovir sodium 8
ADACEL INJ 67
adefovir dipivoxil 8
ADEMPAS 30
ADMELOG 48
ADMELOG SOLOSTAR 48
ADVAIR HFA AER 115/21 76
ADVAIR HFA AER 230/21 76
ADVAIR HFA AER 45/21 75
afirmelle 50
AIMOVIG 43
AIRSUPRA AER 90-80MCG 76
AKEEGA TAB 100/500 13
AKEEGA TAB 50/500MG 13
ala-cort 77
albendazole 3
albuterol sulfate 73
alclometasone dipropionate 78
ALCOHOL SWABS: EMBECTA-BD/MHC/RUGBY 48
ALDURAZYME 55
ALECENSA 15
alendronate sodium 49
alfuzosin hcl 60
aliskiren fumarate 29
allopurinol 1
alosetron hcl 59
alprazolam 31
altavera 50
ALUNBRIG 15
ALUNBRIG PAK 15
ALVAIZ 62
ALVESCO 75
alyacen 1/35 50
alyacen 7/7/7 50
ALYFTREK TAB 10-50-125 74
ALYFTREK TAB 4-20-50 74
ALYGLO 65
alyq 30
amantadine hcl 33
ambrisentan 30
amethyst 50
amikacin sulfate 3
amiloride & hydrochlorothiazide tab 5-50 mg 29
amiloride hcl 29
amiodarone hcl 26
amitriptyline hcl 32
amlodipine besylate 28
amlodipine besylate-benazepril hcl cap 10-20 mg 23
amlodipine besylate-benazepril hcl cap 10-40 mg 23
amlodipine besylate-benazepril hcl cap 2.5-10 mg 23
amlodipine besylate-benazepril hcl cap 5-10 mg 23
amlodipine besylate-benazepril hcl cap 5-20 mg 23
amlodipine besylate-benazepril hcl cap 5-40 mg 23

amlodipine besylate-olmesartan medoxomil tab 10-20 mg 24
amlodipine besylate-olmesartan medoxomil tab 10-40 mg 24
amlodipine besylate-olmesartan medoxomil tab 5-20 mg 24
amlodipine besylate-olmesartan medoxomil tab 5-40 mg 24
amlodipine besylate-valsartan tab 10-160 mg 24
amlodipine besylate-valsartan tab 10-320 mg 24
amlodipine besylate-valsartan tab 5-160 mg 24
amlodipine besylate-valsartan tab 5-320 mg 24
amnesteem 76
amoxapine 32
amoxicillin 10
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml 10
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml 10
amoxicillin & k clavulanate for susp 400-57 mg/5ml 10
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml 10
amoxicillin & k clavulanate tab 250-125 mg 10
amoxicillin & k clavulanate tab 500-125 mg 10
amoxicillin & k clavulanate tab 875-125 mg 10
amphetamine-dextroamphetamine cap er 24hr 10 mg.....41
amphetamine-dextroamphetamine cap er 24hr 15 mg.....41
amphetamine-dextroamphetamine cap er 24hr 20 mg.....41
amphetamine-dextroamphetamine cap er 24hr 25 mg.....41
amphetamine-dextroamphetamine cap er 24hr 30 mg.....41
amphetamine-dextroamphetamine cap er 24hr 5 mg 41
amphetamine-dextroamphetamine tab 10 mg 42
amphetamine-dextroamphetamine tab 12.5 mg 42
amphetamine-dextroamphetamine tab 15 mg 42
amphetamine-dextroamphetamine tab 20 mg 42
amphetamine-dextroamphetamine tab 30 mg 42
amphetamine-dextroamphetamine tab 5 mg.....41
amphetamine-dextroamphetamine tab 7.5 mg 41
amphotericin b..... 5
amphotericin b liposome 5
ampicillin 10
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm.....10
ampicillin & sulbactam sodium for inj 3 (2-1) gm 10
ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm 10
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm 10
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm.....10
ampicillin sodium 10
anagrelide hcl 62
anastrozole 13
ANORO ELLIPT AER 62.5-25 72
aprepitant 58
aprepitant capsule therapy pack 80 & 125 mg 58
apri 50
APTIOM.....37
APTIVUS 5
ARALAST NP 74
aranelle 50
ARCALYST 66
AREXVY 67
ARIKAYCE 3
aripiprazole 34
ARISTADA 34, 35
ARISTADA INITIO.....35
armodafinil 45
ARNUITY ELLIPTA.....75
asenapine maleate 35
ashlyna 50

aspirin-dipyridamole cap er 12hr 25-200 mg 63
ASTAGRAF XL 66
atazanavir sulfate 5
atenolol 28
atenolol & chlorthalidone tab 100-25 mg 27
atenolol & chlorthalidone tab 50-25 mg 27
atomoxetine hcl 42
atorvastatin calcium 27
atovaquone 3
atovaquone-proguanil hcl tab 250-100 mg 5
atovaquone-proguanil hcl tab 62.5-25 mg 5
ATROPINE SULFATE 72
atropine sulfate (ophthalmic) 72
ATROVENT HFA 72
aubra eq 50
AUGTYRO 15
aurovela 1/20 50
aurovela 24 fe 50
aurovela fe 1.5/30 50
aurovela fe 1/20 50
AUSTEDO 44
AUSTEDO XR 44
AUSTEDO XR TAB TITR KIT 44
AUVELITY TAB 45-105MG 32
aviane 50
AVMAPKI PAK FAKZYNJA 15
ayuna 50
AYVAKIT 15
azacitidine 12
azathioprine 66
azelastine hcl 73
azelastine hcl (ophth) 71
azithromycin 9
aztreonam 3
azurette 50

B

bacitracin (ophthalmic) 70
bacitracin-polymyxin b ophth oint 70
bacitracin-polymyxin-neomycin-hc ophth oint 1% 70
baclofen 45
BAFIERTAM 44
balsalazide disodium 59
BALVERSA 15
balziva 50
BARACLUDE 8
BCG VACCINE 67
benazepril & hydrochlorothiazide tab 10-12.5 mg 23
benazepril & hydrochlorothiazide tab 20-12.5 mg 23
benazepril & hydrochlorothiazide tab 20-25 mg 23
benazepril & hydrochlorothiazide tab 5-6.25mg 23
benazepril hcl 24
BENDAMUSTINE HYDROCHLORID 11
BENDEKA 11
BENLYSTA 66
benzoyl peroxide-erythromycin gel 5-3% 76
benztropine mesylate 33
BERINERT 62
BESIVANCE 70
BESREMI 14
betaine powder for oral solution 55
betamethasone dipropionate (topical) 78
betamethasone dipropionate augmented 78
betamethasone valerate 78
BETASERON 44
betaxolol hcl 28
betaxolol hcl (ophth) 71
bethanechol chloride 61
BEVESPI AER 9-4.8MCG 72
bexarotene 14
bexarotene (topical) 79
BEXSERO 67
bicalutamide 13
BICILLIN L-A 10
BIKTARVY TAB 30-120-15 MG 7
BIKTARVY TAB 50-200-25 MG 7
BIMZELX 63
bisoprolol & hydrochlorothiazide tab 10-6.25 mg 27
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg 27

bisoprolol & hydrochlorothiazide tab 5-6.25 mg 27
bisoprolol fumarate 28
BIVIGAM 65
blisovi 24 fe.....50
blisovi fe 1.5/30 50
BONSITY 49
BOOSTRIX INJ 67
bortezomib 15
BORTEZOMIB.....15
bosentan 30
BOSULIF 15
BRAFTOVI 15
BREO ELLIPTA INH 100-25 76
BREO ELLIPTA INH 200-25 76
BREO ELLIPTA INH 50-25MCG.....76
breyna 76
BREZTRI AERO AER SPHERE 72
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK).....72
briellyn 50
brimonidine tartrate.....71
brinzolamide.....71
BRIVIACT 37
bromocriptine mesylate.....33
BRUKINSA.....15
budesonide.....59
budesonide (inhalation).....75
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act 76
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act 76
bumetanide 29
buprenorphine 1
buprenorphine hcl 45
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv) 45
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) 45
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) 45
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) 45
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv) 45
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv) 45
bupropion hcl.....32
bupropion hcl (smoking deterrent) ...46
buspirone hcl.....31
butorphanol tartrate 2

C

cabergoline 55
CABOMETYX 15
calcipotriene.....77
calcitonin (salmon) spray 49
calcitrene 77
calcitriol 57
calcitriol (oral) 57
CALQUENCE 15
camila.....50
camrese.....50
camrese lo 50
candesartan cilexetil 26
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg 24
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg 25
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg .25
CAPLYTA 35
CAPRELSA 16
captopril 24
captopril & hydrochlorothiazide tab 25-15 mg.....23
captopril & hydrochlorothiazide tab 25-25 mg.....23
captopril & hydrochlorothiazide tab 50-15 mg.....23
captopril & hydrochlorothiazide tab 50-25 mg.....23
carb/levo orally disintegrating tab 10-100mg 34
carb/levo orally disintegrating tab 25-100mg 34
carb/levo orally disintegrating tab 25-250mg 34
carbamazepine 37
*carbidopa & levodopa tab 10-100 mg*34
*carbidopa & levodopa tab 25-100 mg*34
*carbidopa & levodopa tab 25-250 mg*34

carbidopa & levodopa tab er 25-100 mg 34
carbidopa & levodopa tab er 50-200 mg 34
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg 34
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg 34
carbidopa-levodopa-entacapone tabs 25-100-200 mg 34
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg 34
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg 34
carbidopa-levodopa-entacapone tabs 50-200-200 mg 34
carboplatin 11
carglumic acid 55
carisoprodol 45
carteolol hcl (ophth) 71
cartia xt 28
carvedilol 28
caspofungin acetate 5
CAYSTON 3
cefaclor 8
cefadroxil 8, 9
CEFAZOLIN 9
CEFAZOLIN INJ 1GM/50ML 9
cefazolin sodium 9
CEFAZOLIN SOLN 2GM/100ML-4% 9
CEFAZOLIN/DEX SOL 1GM/50ML-4% . 9
CEFAZOLIN/DEX SOL 2GM/50ML-3% . 9
CEFAZOLIN/DEX SOL 3GM/150ML-4% 9
CEFAZOLIN/DEX SOL 3GM/50ML-2% . 9
cefdinir 9
cefepime hcl 9
cefixime 9
cefotetan disodium 9
cefoxitin sodium 9
cefpodoxime proxetil 9
cefprozil 9
ceftazidime 9
ceftriaxone sodium 9
cefuroxime axetil 9
cefuroxime sodium 9
celecoxib 1
cephalexin 9
CEQUR SIMPL KIT PATCH 2U (3-DAY) 48
CEQUR SIMPL KIT PATCH 2U (4-DAY) 48
CEQUR SIMPL MIS INSERTER 48
CERDELGA 55
CEREZYME 55
cetirizine hcl 73
cevimeline hcl 80
chateal eq 50
CHEMET 49
chlorhexidine gluconate (mouth-throat) 80
chloroquine phosphate 5
chlorpromazine hcl 35
chlorthalidone 29
cholestyramine 27
cholestyramine light 27
ciclopirox 77
ciclopirox olamine 77
cilostazol 62
CILOXAN 70
CIMDUO TAB 300-300 7
cinacalcet hcl 55
ciprofloxacin 200 mg/100ml in d5w ..10
ciprofloxacin 400 mg/200ml in d5w ..10
ciprofloxacin hcl 10
ciprofloxacin hcl (ophth) 70
ciprofloxacin-dexamethasone otic susp 0.3-0.1% 72
cisplatin 11
citalopram hydrobromide 32
claravis 76
clarithromycin 9
clindamycin hcl 3
clindamycin palmitate hydrochloride .. 3
clindamycin phosphate 3
clindamycin phosphate (topical) 76
clindamycin phosphate in d5w iv soln 300 mg/50ml 3
clindamycin phosphate in d5w iv soln 600 mg/50ml 3
clindamycin phosphate in d5w iv soln 900 mg/50ml 3
clindamycin phosphate vaginal 61
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5% 76

CLINDMYC/NAC INJ 300/50ML 3
CLINDMYC/NAC INJ 600/50ML 3
CLINDMYC/NAC INJ 900/50ML 3
CLINIMIX INJ 4.25/D10.....69
CLINIMIX INJ 4.25/D5W.....69
CLINIMIX INJ 5%/D15W 69
CLINIMIX INJ 5%/D20W 69
CLINIMIX INJ 6/5 69
CLINIMIX INJ 8/10 69
CLINIMIX INJ 8/14 69
clinisol sf 15% 69
CLINOLIPID EMU 20% 70
clobazam 37
clobetasol propionate.....78
clobetasol propionate e 78
clodan.....78
clomipramine hcl.....32
clonazepam 37, 38
clonidine 29
clonidine hcl 29
clopidogrel bisulfate.....63
clorazepate dipotassium.....38
clotrimazole.....80
clotrimazole (topical) 77
clotrimazole w/ betamethasone cream 1-0.05%.....77
clozapine.....35
COARTEM TAB 20-120MG..... 5
COBENFY CAP 100-20MG 35
COBENFY CAP 125-30MG 35
COBENFY CAP 50-20MG 35
COBENFY STRT CAP PACK 35
colchicine 1
colchicine w/ probenecid tab 0.5-500 mg 1
colesevelam hcl.....27
colestipol hcl.....27
colistimethate sodium 3
COMBIGAN SOL 0.2/0.5% 71
COMBIVENT AER 20-100 72
COMETRIQ (60MG DOSE) 16
COMETRIQ KIT 100MG.....16
COMETRIQ KIT 140MG.....16
compro 58
constulose.....59
COPAXONE.....44
COPIKTRA 16
CORLANOR.....29
COTELLIC.....16
CREON CAP 12000UNT.....59
CREON CAP 24000UNT.....59
CREON CAP 3000UNIT 59
CREON CAP 36000UNT.....59
CREON CAP 6000UNIT 59
CRESEMBA 5
cromolyn sodium.....74
cromolyn sodium (mastocytosis) 60
cromolyn sodium (ophth) 71
cryselle-28 50
cyclobenzaprine hcl 45
cyclophosphamide.....12
CYCLOPHOSPHAMIDE 12
CYCLOPHOSPHAMIDE MONOHYDR....12
cycloserine 7
cyclosporine 66
cyclosporine modified (for microemulsion) 66
cyproheptadine hcl 73
cyred eq 50
CYSTADROPS.....72
CYSTAGON.....56
CYSTARAN 72
cytarabine.....12

D

D10W/NACL INJ 0.2% 68
D2.5W/NACL INJ 0.45%.....68
dabigatran etexilate mesylate 61
dalfampridine 44
danazol.....46
dantrolene sodium 45
DANZITEN.....16
dapagliflozin propanediol.....46
dapsone..... 3
DAPTACEL INJ 67
daptomycin 3
DAPTOMYCIN..... 3
darunavir 6
dasatinib.....16
dasetta 1/35.....50
dasetta 7/7/7 50
DAURISMO.....16
daysee.....50
DAYVIGO 42
deblitane.....50

deferasirox 49
DELSTRIGO TAB..... 7
DENGVAXIA SUS 67
DEPO-SUBQ PROVERA 104 50
depo-testosterone 46
DESCOVY TAB 120-15MG 7
DESCOVY TAB 200/25MG 7
desipramine hcl.....32
desmopressin acetate 56
desmopressin acetate spray.....56
desmopressin acetate spray refrigerated 56
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) 50
desvenlafaxine succinate 32
dexamethasone.....55
DEXAMETHASONE INTENSOL.....55
dexamethasone sodium phosphate ...55
dexamethasone sodium phosphate (ophth) 71
dexmethylphenidate hcl 42
dextrose.....70
dextrose 10% w/ sodium chloride 0.45%.....68
dextrose 2.5% w/ sodium chloride 0.45%.....68
dextrose 5% in lactated ringers.....68
dextrose 5% w/ sodium chloride 0.2% 68
dextrose 5% w/ sodium chloride 0.225% 68
dextrose 5% w/ sodium chloride 0.3% 68
dextrose 5% w/ sodium chloride 0.45% 68
dextrose 5% w/ sodium chloride 0.9% 68
DIACOMIT 38
diazepam 38
diazepam (anticonvulsant) 38
diazepam inj.....38
diazepam intensol 38
diazoxide.....55
diclofenac potassium 1
diclofenac sodium..... 1
diclofenac sodium (ophth) 71
diclofenac sodium (topical) 79
dicloxacillin sodium 10
dicyclomine hcl 58
DIFICID 9
diflunisal 1
difluprednate 71
digoxin 29
dihydroergotamine mesylate.....43
DILANTIN.....38
diltiazem hcl 28
diltiazem hcl coated beads 28
diltiazem hcl extended release beads 28
dilt-xr 28
diphenhydramine hcl 73
diphenoxylate w/ atropine tab 2.5-0.025 mg 60
dipyridamole 63
disopyramide phosphate 26
disulfiram.....46
divalproex sodium 38
docetaxel 14
DOCETAXEL.....14
DOCIVYX.....14
dofetilide.....26
dolishale 50
donepezil hydrochloride 31
DOPTELET 62
dorzolamide hcl.....71
dorzolamide hcl-timolol maleate ophth soln 2-0.5%.....71
dotti 54
DOVATO TAB 50-300MG 7
doxazosin mesylate 24
doxepin hcl.....32
doxepin hcl (sleep) 42
doxorubicin hcl 14
doxorubicin hcl liposomal 14
doxy 100.....11
doxycycline (monohydrate) 11
doxycycline hyclate 11
DRIZALMA SPRINKLE.....32
dronabinol.....58
drospirenone-ethinyl estradiol tab 3-0.02 mg 50
drospirenone-ethinyl estradiol tab 3-0.03 mg 51
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg 50

drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg 50
droxidopa 30
DULERA AER 100-5MCG 76
DULERA AER 200-5MCG 76
DULERA AER 50-5MCG 76
duloxetine hcl 32
DUPIXENT 63
dutasteride 60
dutasteride-tamsulosin hcl cap 0.5-0.4 mg 60
E
e.e.s. 400 9
econazole nitrate 77
EDURANT 6
EDURANT PED 6
efavirenz 6
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg 7
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg 7
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg 7
ELIGARD 13
elinest 51
ELIQUIS 61
ELIQUIS STARTER PACK 61
eluryng 51
EMGALITY 43
EMSAM 32
emtricitabine 6
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg 7
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg 7
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg 7
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg 7
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg 7
EMTRIVA 6
EMVERM 3
emzahh 51
enalapril maleate 24
enalapril maleate & hydrochlorothiazide tab 10-25 mg 23
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg 23
ENBREL 63
ENBREL MINI 63
ENBREL SURECLICK 63
endocet tab 10-325mg 2
endocet tab 2.5-325mg 2
endocet tab 5-325mg 2
endocet tab 7.5-325mg 2
ENGERIX-B 67
enilloring 51
enoxaparin sodium 61
enskyce 51
ENSTILAR AER 77
entacapone 34
entecavir 8
ENTRESTO CAP 15-16MG 25
ENTRESTO CAP 6-6MG 25
enulose 59
EPCLUSA PAK 150-37.5 8
EPCLUSA PAK 200-50MG 8
EPCLUSA TAB 200-50MG 8
EPCLUSA TAB 400-100 8
EPIDIOLEX 38
epinephrine (anaphylaxis) 30, 74
eplerenone 24
ergotamine w/ caffeine tab 1-100 mg 43
ERIVEDGE 16
ERLEADA 13
erlotinib hcl 16
errin 51
ertapenem sodium 3
ery 76
ERYTHROCIN LACTOBIONATE 9
erythromycin (acne aid) 77
erythromycin (ophth) 70
erythromycin base 9
erythromycin ethylsuccinate 9
erythromycin lactobionate 10
ERZOFRI 35
escitalopram oxalate 32
eslicarbazepine acetate 38
esomeprazole magnesium 60
estarylla 51
estradiol 54

estradiol & norethindrone acetate tab 0.5-0.1 mg 54
estradiol & norethindrone acetate tab 1-0.5 mg 54
estradiol vaginal 54
estradiol valerate 54
eszopiclone 42
ethambutol hcl 7
ethosuximide 38
etodolac 1
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr 51
etoposide 14
etravirine 6
EUCRISA 79
EULEXIN 13
everolimus 16
everolimus (immunosuppressant) 66
EVOTAZ TAB 300-150 7
exemestane 13
EYSUVIS 72
ezetimibe 27
ezetimibe-simvastatin tab 10-10 mg 27
ezetimibe-simvastatin tab 10-20 mg 27
ezetimibe-simvastatin tab 10-40 mg 27
ezetimibe-simvastatin tab 10-80 mg 27

F

FABRAZYME 56
falmina 51
famciclovir 8
famotidine 58
famotidine in nacl 0.9% iv soln 20 mg/50ml 58
FANAPT 35
FANAPT PAK PACK A 35
FANAPT PAK PACK B 35
FANAPT PAK PACK C 35
FARXIGA 46
FASENRA 74
FASENRA PEN 74
feirza 1.5/30 51
feirza 1/20 51
felbamate 38
felodipine 28
fenofibrate 26
fenofibrate micronized 26
fentanyl 1
fesoterodine fumarate 61
FETZIMA 32
FETZIMA CAP TITRATIO 32
FIASP 48
FIASP FLEXTOUCH 48
FIASP PENFILL 48
FIASP PUMPCART 48
fidaxomicin 10
finasteride 60
fingolimod hcl 44
FINTEPLA 39
finzala 51
FIRMAGON 13
flac 72
FLEBOGAMMA DIF 65
flecainide acetate 26
fluconazole 5
fluconazole in nacl 0.9% inj 200 mg/100ml 5
fluconazole in nacl 0.9% inj 400 mg/200ml 5
flucytosine 5
fludrocortisone acetate 55
flunisolide (nasal) 75
fluocinolone acetonide 78
fluocinolone acetonide (otic) 72
fluocinonide 78
fluocinonide emulsified base 78
fluorometholone (ophth) 71
fluorouracil 12
fluorouracil (topical) 79
fluoxetine hcl 32
fluphenazine decanoate 35
fluphenazine hcl 35
flurbiprofen 1
flurbiprofen sodium 71
fluticasone propionate 78
fluticasone propionate (nasal) 75
fluticasone-salmeterol aer powder ba 100-50 mcg/act 76
fluticasone-salmeterol aer powder ba 250-50 mcg/act 76
fluticasone-salmeterol aer powder ba 500-50 mcg/act 76
fluvoxamine maleate 31
fondaparinux sodium 61
fosamprenavir calcium 6

fosfomycin tromethamine 3
fosinopril sodium 24
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg 23
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg 23
FOTIVDA 16
FRINDOVYX 12
FRUZAQLA.....16
FULPHILA 62
fulvestrant.....13
furosemide 29
furosemide inj.....29
fyavolv tab 0.5mg-2.5mcg.....54
fyavolv tab 1mg-5mcg 54
FYCOMPA 39
G
gabapentin 39
galantamine hydrobromide 31
galbriela.....51
gallifrey 57
GAMASTAN INJ 65
GAMMAGARD LIQUID.....65
GAMMAGARD S/D IGA LESS TH.....65
GAMMAKED 65
GAMMAPLEX 65
GAMUNEX-C 66
ganciclovir sodium..... 8
GARDASIL 9 67
gatifloxacin (ophth) 70
GATTEX 60
GAUZE PADS 2.....48
gavilyte-c 59
gavilyte-g.....59
gavilyte-n/flavor pack 59
GAVRETO 16
gefitinib 16
gemcitabine hcl.....12
gemfibrozil 27
GEMTESA 61
generlac.....59
gengraf.....66
GENOTROPIN.....56
GENOTROPIN MINIQUICK.....56
gentamicin in saline inj 0.8 mg/ml..... 3
gentamicin in saline inj 1 mg/ml 3
gentamicin in saline inj 1.2 mg/ml..... 3
gentamicin in saline inj 1.6 mg/ml..... 3
gentamicin in saline inj 2 mg/ml 3
gentamicin sulfate..... 3
gentamicin sulfate (ophth) 70
gentamicin sulfate (topical) 77
GENVOYA TAB 7
GILOTRIF 16
glatiramer acetate.....44
glatopa 44
GLEOSTINE 12
glimepiride 46
glipizide 46
glipizide-metformin hcl tab 2.5-250 mg 46
glipizide-metformin hcl tab 2.5-500 mg 46
*glipizide-metformin hcl tab 5-500 mg*46
glycopyrrolate.....58
glydo 79
GLYXAMBI TAB 10-5 MG 46
GLYXAMBI TAB 25-5 MG 46
GOMEKLI 17
granisetron hcl.....58
griseofulvin microsize 5
griseofulvin ultramicrosize..... 5
guanfacine hcl 30
guanfacine hcl (adhd) 42
H
HADLIMA 63
HADLIMA PUSHTOUCH.....63
HAEGARDA.....62
hailey 1.5/30 51
hailey 24 fe 51
halobetasol propionate.....78
haloette 51
haloperidol 35
haloperidol decanoate.....35
haloperidol lactate.....35
HAVRIX.....67
heather.....51
HEP SOD/NACL INJ 25000UNT.....61
heparin sodium (porcine) 62
HEPLISAV-B 67
HERCEP HYLEC SOL 60-10000 17
HERCEPTIN 17
HERNEXEOS 17
HERZUMA.....17

HIBERIX.....67
HUMIRA 63
HUMIRA PEN.....63
HUMIRA PEN KIT PS/UV 63
HUMIRA PEN-CD/UC/HS START.....63
HUMULIN R U-500 (CONCENTR 48
HUMULIN R U-500 KWIKPEN.....48
hydralazine hcl.....30
hydrochlorothiazide 29
hydrocodone bitartrate..... 1
hydrocodone-acetaminophen soln 7.5-325 mg/15ml..... 2
hydrocodone-acetaminophen tab 10-325 mg 2
hydrocodone-acetaminophen tab 5-325 mg 2
hydrocodone-acetaminophen tab 7.5-325 mg 2
hydrocodone-ibuprofen tab 7.5-200 mg 2
hydrocortisone.....55
hydrocortisone (intrarectal) 59
hydrocortisone (rectal).....79
hydrocortisone (topical) 78
hydrocortisone sod succinate 55
hydrocortisone valerate.....78
hydrocortisone w/ acetic acid otic soln 1-2% 72
hydromorphone hcl..... 2
hydroxychloroquine sulfate.....65
hydroxyurea 14
hydroxyzine hcl.....73
hydroxyzine pamoate.....73
I
ibandronate sodium 49
IBRANCE 17
IBTROZI.....17
ibu 1
ibuprofen 1
icatibant acetate 62
iclevia 51
ICLUSIG.....17
IDHIFA.....17
imatinib mesylate.....17
IMBRUVICA 17
imipenem-cilastatin intravenous for soln 250 mg..... 3
imipenem-cilastatin intravenous for soln 500 mg 3
imipramine hcl.....33
imiquimod.....79
IMKELDI 17
IMOVAX RABIES (H.D.C.V.) 67
IMPAVIDO 3
INBRIJA 34
incassia.....51
INCRELEX 56
INCRUSE ELLIPTA 72
indapamide 29
INFANRIX INJ 67
INFLIXIMAB.....63
INLYTA 17
INQOVI TAB 35-100MG.....12
INREBIC.....17
INSULIN PEN NEEDLES: EMBECTA-BD 48
INSULIN SAFETY NEEDLES: EMBECTA-BD.....48
INSULIN SYRINGES: EMBECTA-BD ...48
INTELENCE..... 6
INTRALIPID 70
introvale 51
INVEGA HAFYERA.....35
INVEGA SUSTENNA 35, 36
INVEGA TRINZA.....36
IPOL INJ INACTIVE.....67
ipratropium bromide.....72
ipratropium bromide (nasal) 73
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml.....72
irbesartan 26
irbesartan-hydrochlorothiazide tab 150-12.5 mg 25
irbesartan-hydrochlorothiazide tab 300-12.5 mg 25
irinotecan hcl.....14
ISENTRESS 6
ISENTRESS HD 6
isibloom 51
ISOLYTE-P INJ /D5W 68
ISOLYTE-S INJ PH 7.4.....68
isoniazid 7
isosorbide dinitrate.....30
isosorbide mononitrate 30

isotretinoin 77
isradipine 28
ITOVEBI 17
itraconazole 5
ivabradine hcl 30
ivermectin 3, 4
IWILFIN 14
IXIARO INJ 67
J
jaimiess 51
JAKAFI 17
jantoven 62
JANUMET TAB 50-1000 46
JANUMET TAB 50-500MG 46
JANUMET XR TAB 100-1000.....47
JANUMET XR TAB 50-1000 46
JANUMET XR TAB 50-500MG.....46
JANUVIA 47
JARDIANCE.....47
jasmiel.....51
javygtor 56
JAYPIRCA 18
JENTADUETO TAB 2.5-1000.....47
JENTADUETO TAB 2.5-500.....47
JENTADUETO TAB 2.5-850.....47
JENTADUETO TAB XR 2.5-1000MG ...47
JENTADUETO TAB XR 5-1000MG 47
jinteli 54
jolessa 51
juleber 51
JULUCA TAB 50-25MG..... 7
junel 1.5/30 51
junel 1/20 51
junel fe 1.5/30 51
junel fe 1/20.....51
junel fe 24.....51
JYLAMVO.....65
JYNNEOS.....67
K
KADCYLA.....18
kaitlib fe.....51
KALETRA SOL 7
KALYDECO.....74
KANJINTI 18
kariva 51
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj 68
kcl 20 meq/l (0.149%) in nacl 0.45% inj 68
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj 68
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj 68
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj 68
kcl 20 meq/l (0.15%) in nacl 0.45% inj 68
kcl 20 meq/l (0.15%) in nacl 0.9% inj 68
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj 68
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj 68
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj 68
kcl 40 meq/l (0.3%) in nacl 0.9% inj 68
KCL/D5W/NACL INJ 0.3/0.9%.....68
kelnor 1/35 51
KERENDIA.....24
KESIMPTA 45
ketoconazole 5
ketoconazole (topical).....77
ketorolac tromethamine (ophth) 71
KEYTRUDA 18
KINERET 64
KINRIX INJ.....67
kionex 49
KISQALI 200 DOSE 18
KISQALI 400 DOSE 18
KISQALI 400 PAK FEMARA.....18
KISQALI 600 DOSE 18
KISQALI 600 PAK FEMARA.....18
klayesta 77
klor-con 69
klor-con 10.....69
klor-con 8 69
klor-con m10 69
klor-con m15 69
klor-con m20 69
KLOXXADO.....46
KOSELUGO.....18
kourzeq 80
KRAZATI 18
kurvelo 51

L

labetalol hcl 28
lacosamide 39
lacosamide oral 39
lactated ringer's solution 68
lactic acid (ammonium lactate) 79
lactulose 59
lactulose (encephalopathy) 59
lamivudine 6
lamivudine (hbv) 8
lamivudine-zidovudine tab 150-300 mg 7
lamotrigine 39
lanreotide acetate 56
lansoprazole 60
LANTUS 48
LANTUS SOLOSTAR 48
lapatinib ditosylate 18
larin 1.5/30 51
larin 1/20 51
larin 24 fe 51
larin fe 1.5/30 51
larin fe 1/20 51
latanoprost 71
LAZCLUZE 18
leflunomide 65
lenalidomide 14
LENVIMA 10 MG DAILY DOSE 18
LENVIMA 12MG DAILY DOSE 18
LENVIMA 20 MG DAILY DOSE 18
LENVIMA 4 MG DAILY DOSE 18
LENVIMA 8 MG DAILY DOSE 18
LENVIMA CAP 14 MG 18
LENVIMA CAP 18 MG 18
LENVIMA CAP 24 MG 18
lessina 51
letrozole 13
leucovorin calcium 14
LEUKERAN 12
leuprolide acetate 13
levalbuterol hcl 73
levalbuterol tartrate 73
levetiracetam 39
LEVETIRACETAM 39
levetiracetam in sodium chloride iv soln 1000 mg/100ml 39
levetiracetam in sodium chloride iv soln 1500 mg/100ml 39
levetiracetam in sodium chloride iv soln 500 mg/100ml 39
levobunolol hcl 71
levocarnitine (metabolic modifiers) 56
levocetirizine dihydrochloride 73
levofloxacin 10
levofloxacin in d5w iv soln 250 mg/50ml 10
levofloxacin in d5w iv soln 500 mg/100ml 10
levofloxacin in d5w iv soln 750 mg/150ml 10
levonest 51
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg 51
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg 52
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg 52
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg 52
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg 52
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) 52
levora 0.15/30-28 52
levo-t 57
levothyroxine sodium 57
levoxyl 57
l-glutamine (sickle cell) 62
lidocaine 79
lidocaine hcl 79
lidocaine hcl (local anesth.) 1
lidocaine hcl (mouth-throat) 80
lidocaine-prilocaine cream 2.5-2.5% 79
lidocan 79
LILETTA 52
linezolid 4
LINEZOLID INJ 2MG/ML 4
LINZESS 60
liothyronine sodium 57
lisinopril 24
lisinopril & hydrochlorothiazide tab 10-12.5 mg 23

lisinopril & hydrochlorothiazide tab 20-12.5 mg 23
lisinopril & hydrochlorothiazide tab 20-25 mg 23
lithium 44
lithium carbonate 44
LIVTENCITY 8
loestrin 1.5/30-21 52
loestrin 1/20-21 52
loestrin fe 1.5/30 52
loestrin fe 1/20 52
lojaimiess 52
LOKELMA 49
LONSURF TAB 15-6.14 12
LONSURF TAB 20-8.19 12
loperamide hcl 60
lopinavir-ritonavir tab 100-25 mg 7
lopinavir-ritonavir tab 200-50 mg 7
lorazepam 31
lorazepam intensol 31
LORBRENA 18, 19
loryna 52
losartan potassium 26
losartan potassium & hydrochlorothiazide tab 100-12.5 mg 25
losartan potassium & hydrochlorothiazide tab 100-25 mg 25
losartan potassium & hydrochlorothiazide tab 50-12.5 mg 25
LOTEMAX 71
lovastatin 27
low-ogestrel 52
loxapine succinate 36
LUMAKRAS 19
LUMIGAN 71
LUMIZYME 56
LUPRON DEPOT (1-MONTH) 13
LUPRON DEPOT (3-MONTH) 13
LUPRON DEPOT-PED (1-MONTH 56
LUPRON DEPOT-PED (3-MONTH 56
LUPRON DEPOT-PED (6-MONTH 56
lurasidone hcl 36
lutera 52
LYBALVI TAB 10-10MG 36
LYBALVI TAB 15-10MG 36
LYBALVI TAB 20-10MG 36
LYBALVI TAB 5-10MG 36
lyleq 52
lyllana 54
LYNPARZA 19
LYSODREN 13
LYTGOBI (12 MG DAILY DOSE) 19
LYTGOBI (16 MG DAILY DOSE) 19
LYTGOBI (20 MG DAILY DOSE) 19
lyza 52

M

magnesium sulfate 69
MAGNESIUM SULFATE 68
magnesium sulfate in dextrose 5% iv soln 1 gm/100ml 69
malathion 80
maraviroc 6
marlissa 52
MARPLAN 33
MATULANE 14
MAVYRET PAK 50-20MG 8
MAVYRET TAB 100-40MG 8
meclizine hcl 58
medroxyprogesterone acetate 57
medroxyprogesterone acetate (contraceptive) 52
mefloquine hcl 5
megestrol acetate 13, 57
megestrol acetate (appetite) 57
MEKINIST 19
MEKTOVI 19
meleya 52
meloxicam 1
memantine hcl 31
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack 31
memantine hcl-donepezil hcl cap er 24hr 14-10 mg 31
memantine hcl-donepezil hcl cap er 24hr 21-10 mg 32
memantine hcl-donepezil hcl cap er 24hr 28-10 mg 32
MENQUADFI 67
MENVEO INJ 67
MENVEO SOL 67
mercaptopurine 12
meropenem 4

mesalamine 59
mesalamine w/ cleanser 59
mesna 14
metformin hcl 47
methadone hcl 1
methadone hydrochloride i 2
methazolamide 29
methenamine hippurate 4
methimazole 57
methocarbamol 45
methotrexate sodium 12, 65
methsuximide 39
methylphenidate hcl 42
methylprednisolone 55
methylprednisolone acetate 55
methylprednisolone sod succ 55
metoclopramide hcl 58
metolazone 29
metoprolol & hydrochlorothiazide tab 100-25 mg 28
metoprolol & hydrochlorothiazide tab 100-50 mg 28
metoprolol & hydrochlorothiazide tab 50-25 mg 27
metoprolol succinate 28
metoprolol tartrate 28
metronidazole 4
metronidazole (topical) 79
metronidazole vaginal 61
metyrosine 30
mibelas 24 fe 52
micafungin sodium 5
microgestin 1.5/30 52
microgestin 1/20 52
microgestin fe 1.5/30 52
microgestin fe 1/20 52
midodrine hcl 30
MIEBO 72
mifepristone (hyperglycemia) 56
mili 52
mimvey 54
minocycline hcl 11
minoxidil 30
mirtazapine 33
misoprostol 60
M-M-R II INJ 67
M-NATAL PLUS TAB 69
modafinil 45
MODEYSO 14
moexipril hcl 24
molindone hcl 36
mometasone furoate 78
MONJUVI 19
mono-linyah 52
montelukast sodium 74
morphine sulfate 2
MOUNJARO 47
MOVANTIK 60
moxifloxacin hcl 10
moxifloxacin hcl (ophth) 70
moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj 10
MRESVIA 67
MULTAQ 26
multiple electrolytes ph 5.5 69
mupirocin 77
mycophenolate mofetil 66
mycophenolate sodium 66
MYRBETRIQ 61

N

nabumetone 1
nadolol 28
nafcillin sodium 11
NAGLAZYME 56
naloxone hcl 46
naltrexone hcl 46
NAMZARIC CAP 7-10MG 32
naproxen 1
naproxen sodium 1
naratriptan hcl 43
NATACYN 70
nateglinide 47
NAYZILAM 39
nebivolol hcl 28
necon 0.5/35-28 52
nefazodone hcl 33
neomycin sulfate 4
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin 70
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml ..70
neomycin-polymyxin-dexamethasone ophth oint 0.1% 70

neomycin-polymyxin-dexamethasone ophth susp 0.1% 70
neomycin-polymyxin-hc ophth susp ..70
neomycin-polymyxin-hc otic soln 1% 72
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%.....72
neo-polycin 5(3.5)mg-400unt-10000unt op oin 70
neo-polycin hc ophth oint 1% 70
NERLYNX.....19
neuac 77
nevirapine 6
NEXLETOL 27
NEXLIZET TAB 180/10MG.....27
NEXPLANON 52
niacin (antihyperlipidemic) 27
nicardipine hcl 28
NICOTROL NS 46
nifedipine 29
nikki 52
nilotinib hcl.....19
nilutamide 13
nimodipine 29
NINLARO.....19
nitazoxanide 4
nitisinone 56
NITRO-BID 30
nitrofurantoin macrocrystal..... 4
nitrofurantoin monohyd macro 4
nitroglycerin 30
nitroglycerin (intra-anal) 79
nizatidine 59
nora-be.....52
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr 52
norethindrone (contraceptive).....52
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg.....52
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg.....52
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) 53
norethindrone acetate.....57
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg.....54
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg 54
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg 53
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg 53
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg 53
norlyroc 53
nortrel 0.5/35 (28).....53
nortrel 1/35 (21).....53
nortrel 1/35 (28).....53
nortrel 7/7/7 53
nortriptyline hcl 33
NORVIR 6
NOVOLIN INJ 70/30.....48
NOVOLIN INJ 70/30 FP 48
NOVOLIN N 48
NOVOLIN N FLEXPEN 48
NOVOLIN R 48
NOVOLIN R FLEXPEN 48
NOVOLOG 48
NOVOLOG FLEXPEN 48
NOVOLOG FLEXPEN RELION 48
NOVOLOG MIX INJ 70/30 48
NOVOLOG MIX INJ FLEXPEN 48
NOVOLOG PENFILL.....48
NOVOLOG RELION.....49
NUBEQA.....13
NUEDEXTA CAP 20-10MG.....44
NULOJIX 66
NUPLAZID 36
NURTEC 43
NUTRILIPID 70
NUZYRA 11
nyamyc.....77
nylia 1/35 53
nylia 7/7/7 53
nystatin 5
nystatin (mouth-throat) 80
nystatin (topical).....77
nystop 77

O

ocella.....53
OCTAGAM 66
octreotide acetate 56
ODEFSEY TAB 7
ODOMZO.....19
OFEV 74

ofloxacin (ophth).....70
ofloxacin (otic).....72
OGIVRI 19
OGSIVEO 19
OJEMDA 19
OJJAARA 19
olanzapine.....36
olmesartan medoxomil.....26
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg 25
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg 25
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg .25
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg 25
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg 25
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg 25
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg 25
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg 25
omega-3-acid ethyl esters cap 1 gm .27
omeprazole 60
OMNIPOD 5 DX KIT INT G7G6.....49
OMNIPOD 5 DX MIS POD G7G6.....49
OMNIPOD 5 L2 KIT INTRO G6 49
OMNIPOD 5 L2 MIS PODS G6.....49
OMNIPOD DASH KIT INTRO 49
OMNIPOD DASH MIS PODS.....49
ondansetron 58
ondansetron hcl 58
ONTRUZANT 19
ONUREG 12
OPIPZA 36
OPSUMIT.....30
ORGOVYX.....13
ORKAMBI GRA 100-125 74
ORKAMBI GRA 150-188 74
ORKAMBI GRA 75-94MG 74
ORKAMBI TAB 100-125.....74
ORKAMBI TAB 200-125.....74
orquidea 53
ORSERDU.....13
oseltamivir phosphate..... 8
oxacillin sodium 11
oxaliplatin 12
oxcarbazepine 39
oxybutynin chloride 61
oxycodone hcl..... 2
oxycodone w/ acetaminophen tab 10-325 mg 2
oxycodone w/ acetaminophen tab 2.5-325 mg 2
oxycodone w/ acetaminophen tab 5-325 mg 2
oxycodone w/ acetaminophen tab 7.5-325 mg 2
OZEMPIC (0.25 OR 0.5MG/DOSE) 47
OZEMPIC (1MG/DOSE).....47
OZEMPIC (2MG/DOSE).....47

P

pacerone.....26
paclitaxel 15
paclitaxel inj 100mg 15
paliperidone 36
pamidronate disodium 49
PAMIDRONATE DISODIUM.....49
PANRETIN 79
pantoprazole sodium 60
PANZYGA 66
paricalcitol.....57
paroxetine hcl.....33
PAXLOVID PAK..... 8
PAXLOVID TAB 150-100..... 8
PAXLOVID TAB 300-100..... 8
pazopanib hcl 20
PEDIARIX INJ 0.5ML 67
PEDVAX HIB 67
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm.....59
peg 3350-kcl-sod bicarb-nacl for soln 420 gm 59
PEGASYS..... 8
PEMAZYRE.....20

pemetrexed disodium 12
PENBRAYA INJ 67
penicillamine 49
penicillin g potassium 11
penicillin g sodium 11
penicillin v potassium 11
PENMENVY INJ 67
PENTACEL INJ 67
pentamidine isethionate inh 4
pentamidine isethionate inj 4
pentoxifylline 62
perampanel 39
perindopril erbumine 24
periogard 80
permethrin 80
perphenazine 36
pfizerpen 11
phenelzine sulfate 33
phenobarbital 39
phenobarbital sodium 40
phenytek 40
phenytoin 40
phenytoin sodium 40
phenytoin sodium extended 40
PHESGO SOL 20
philith 53
PIFELTRO 6
pilocarpine hcl 71
pilocarpine hcl (oral) 80
pimecrolimus 79
pimozide 36
pimtrea 53
pindolol 28
pioglitazone hcl 47
pioglitazone hcl-metformin hcl tab 15-500 mg 47
pioglitazone hcl-metformin hcl tab 15-850 mg 47
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm) 11
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm) 11
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm) 11
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm) 11
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm) 11
PIQRAY 200MG DAILY DOSE 20
PIQRAY 250MG TAB DOSE 20
PIQRAY 300MG DAILY DOSE 20
pirfenidone 74
piroxicam 1
plenamine 70
PLENVU SOL 59
podofilox 79
polycin ophth oint 70
polymyxin b sulfate 4
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% 71
POMALYST 14
portia-28 53
posaconazole 5
POT CHL 20MEQ/L IN NACL 0.45% INJ 69
POT CHL 20MEQ/L IN NACL 0.9% INJ 69
POT CHL 40MEQ/L IN NACL 0.9% INJ 69
potassium chloride 69
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj 69
potassium chloride microencapsulated crystals er 69
potassium citrate (alkalinizer) 61
pramipexole dihydrochloride 34
prasugrel hcl 63
pravastatin sodium 27
praziquantel 4
prazosin hcl 24
prednisolone 55
prednisolone acetate (ophth) 71
PREDNISOLONE SODIUM PHOSP 71
prednisolone sodium phosphate 55
prednisone 55
PREDNISONE INTENSOL 55
pregabalin 40
PREMASOL SOL 10% 70
PRENATAL TAB 27-1MG 69
PRENATAL TAB PLUS 69
prevalite 27
PREVYMIS 8
PREZCOBIX TAB 675/150 7

PREZCOBIX TAB 800-150 7
PREZISTA..... 6
PRIFTIN 7
primaquine phosphate 5
PRIMAQUINE PHOSPHATE 5
primidone.....40
PRIORIX INJ 67
PRIVIGEN.....66
probenecid 1
prochlorperazine 58
prochlorperazine edisylate 58
prochlorperazine maleate 58
PROCRIT 62
proctocort 79
procto-med hc 79
proctosol hc.....79
proctozone-hc.....79
progesterone 57
PROGRAF 66
PROLASTIN-C 74
PROLIA 49
promethazine hcl.....58
propafenone hcl 26
proparacaine hcl.....72
propranolol hcl.....28
propylthiouracil 57
PROQUAD INJ 67
PROSOL INJ 20% 70
protriptyline hcl.....33
PULMOZYME 74
pyrazinamide 8
pyridostigmine bromide.....44
pyrimethamine..... 4
PYZCHIVA 64

Q

QINLOCK.....20
QUADRACEL INJ 0.5ML 67
quetiapine fumarate 36
quinapril hcl.....24
quinidine sulfate.....26
quinine sulfate 5
QULIPTA 43

R

RABAVERT INJ 67
rabeprazole sodium 60
RALDESY.....33
raloxifene hcl 56
ramelteon 42
ramipril.....24
ranolazine 30
rasagiline mesylate.....34
reclipsen 53
RECOMBIVAX HB.....67
RELENZA DISKHALER 8
RELISTOR 60
REMICADE.....64
RENFLEXIS.....64
repaglinide 47
REPATHA.....27
REPATHA SURECLICK 27
RESTASIS 72
RESTASIS MULTIDOSE.....72
RETEVMO 20
REVCOVI.....56
REVUFORJ.....20
REXULTI 36
REYATAZ..... 6
REZDIFFRA.....56
REZLIDHIA.....20
REZUROCK.....66
RHOPRESSA 71
ribavirin (hepatitis c) 8
rifabutin 8
rifampin 8
riluzole 44
rimantadine hydrochloride..... 8
RINVOQ 64
RINVOQ LQ 64
risedronate sodium.....49
risperidone 36, 37
risperidone microspheres 37
ritonavir..... 6
rivaroxaban 62
rivastigmine 32
rivastigmine tartrate.....32
rivelsa 53
rizatriptan benzoate 43
ROCKLATAN DRO 71
roflumilast.....75
ROMVIMZA.....20
ropinirole hydrochloride 34
rosuvastatin calcium.....27
rosyrah 53
ROTARIX SUS 67

ROTATEQ SOL.....67
roweepra.....40
ROZLYTREK.....20
RUBRACA.....20
rufinamide.....40
RUKOBIA..... 6
RYBELSUS.....47
RYDAPT.....20
S
sacubitril-valsartan tab 24-26 mg.....25
sacubitril-valsartan tab 49-51 mg.....25
sacubitril-valsartan tab 97-103 mg...25
sajazir.....62
SANTYL.....80
sapropterin dihydrochloride.....56
SCEMBLIX.....20
scopolamine.....58
SECUADO.....37
selegiline hcl.....34
selenium sulfide.....77
SELZENTRY..... 6
SEREVENT DISKUS.....73
sertraline hcl.....33
setlakin.....53
sharobel.....53
SHINGRIX.....67
SIGNIFOR.....56
SIKLOS.....62
sildenafil citrate (pulmonary hypertension).....30
silver sulfadiazine.....77
SIMBRINZA SUS 1-0.2%.....71
simliya.....53
simpesse.....53
simvastatin.....27
sirolimus.....66
SIRTURO..... 8
SKYRIZI.....64
SKYRIZI PEN.....64
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml.....59
sodium chloride.....69
sodium chloride (gu irrigant).....80
sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln.....69
SODIUM OXYBATE.....45
sodium phenylbutyrate.....56
sodium polystyrene sulfonate powder.....49
solifenacin succinate.....61
SOLIQUA INJ 100/33.....49
SOLTAMOX.....13
SOLU-CORTEF.....55
SOMATULINE DEPOT.....56
SOMAVERT.....56
sorafenib tosylate.....20
sotalol hcl.....26
sotalol hcl (afib/afl).....26
SOTYKTU.....64
SPIRIVA RESPIMAT.....73
spironolactone.....24
spironolactone & hydrochlorothiazide tab 25-25 mg.....29
sprintec 28.....53
SPRITAM.....40
sps.....50
sps rectal.....50
sronyx.....53
ssd.....77
STELARA.....64
STIVARGA.....21
streptomycin sulfate..... 4
STRIBILD TAB..... 7
subvenite.....40
sucralfate.....60
sulfacetamide sodium (acne).....77
sulfacetamide sodium (ophth).....71
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%.....70
sulfadiazine..... 4
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml..... 4
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml..... 4
sulfamethoxazole-trimethoprim tab 400-80 mg..... 4
sulfamethoxazole-trimethoprim tab 800-160 mg..... 4
SULFAMYLON.....77
sulfasalazine.....59
sulindac..... 1
sumatriptan.....43
sumatriptan succinate.....43
sunitinib malate.....21

SUNLENCA 6
syeda 53
SYMDEKO TAB 100-150 75
SYMDEKO TAB 50-75MG 75
SYMPAZAN 40
SYMTUZA TAB..... 7
SYNAREL.....57
SYNTHROID.....57
T
TABLOID 12
TABRECTA.....21
tacrolimus 66
tacrolimus (topical) 79
tadalafil.....61
tadalafil (pulmonary hypertension) ...30
TAFINLAR.....21
TAGRISSO.....21
TALZENNA.....21
tamoxifen citrate.....13
tamsulosin hcl.....61
tarina 24 fe 53
tarina fe 1/20 eq 53
tasimelteon 42
TAVNEOS 62
tazarotene.....77
tazicef..... 9
TAZVERIK 21
TECENTRIQ 21
TECENTRIQ INJ HYBREZA.....21
TEFLARO 9
telmisartan.....26
telmisartan-amlodipine tab 40-10 mg 25
telmisartan-amlodipine tab 40-5 mg .25
telmisartan-amlodipine tab 80-10 mg 25
telmisartan-amlodipine tab 80-5 mg .25
telmisartan-hydrochlorothiazide tab 40-12.5 mg 25
telmisartan-hydrochlorothiazide tab 80-12.5 mg 25
telmisartan-hydrochlorothiazide tab 80-25 mg.....25
temazepam 43
TENIVAC INJ 5-2LF.....67
tenofovir disoproxil fumarate 6
TEPMETKO.....21
terazosin hcl.....24
terbinafine hcl..... 5
terbutaline sulfate 73
terconazole vaginal 61
TERIPARATIDE.....49
testosterone 46
testosterone cypionate.....46
testosterone enanthate 46
testosterone pump 46
tetrabenazine 44
tetracycline hcl 11
THALOMID 14
theophylline 75
thioridazine hcl 37
thiothixene.....37
tiadylt er.....29
tiagabine hcl.....40
TIBSOVO.....21
ticagrelor 63
TICOVAC.....67
tigecycline.....11
tilia fe.....53
timolol maleate.....28
timolol maleate (ophth) 71
tinidazole 4
TIVICAY 6
TIVICAY PD 6
tizanidine hcl 45
TOBI PODHALER 4
TOBRADEX OIN 0.3-0.1% 70
tobramycin 4
tobramycin (ophth) 71
tobramycin sulfate 4
tobramycin-dexamethasone ophth susp 0.3-0.1% 70
tolterodine tartrate.....61
tolvaptan 57
tolvaptan tab therapy pack 30 & 15 mg 57
tolvaptan tab therapy pack 45 & 15 mg 57
tolvaptan tab therapy pack 60 & 30 mg 57
tolvaptan tab therapy pack 90 & 30 mg 57
topiramate 40
toremifene citrate 13

torpenz 21
torsemide 29
TOUJEO MAX SOLOSTAR 49
TOUJEO SOLOSTAR 49
TPN ELECTROL INJ 69
TRADJENTA 47
tramadol hcl 2
tramadol-acetaminophen tab 37.5-325 mg 2
trandolapril 24
tranexamic acid 62
tranylcypromine sulfate 33
TRAVASOL INJ 10% 70
TRAZIMERA 21
trazodone hcl 33
TRELEGY AER ELLIPTA 100-62.5-25 MCG 72
TRELEGY AER ELLIPTA 200-62.5-25 MCG 72
TREMFYA 64
TREMFYA INDUCTION PACK FO 64
treprostinil 30
tretinoin 77
tretinoin (chemotherapy) 14
triamcinolone acetonide (mouth) 80
triamcinolone acetonide (topical) 78, 79
triamterene & hydrochlorothiazide cap 37.5-25 mg 29
triamterene & hydrochlorothiazide tab 37.5-25 mg 29
triamterene & hydrochlorothiazide tab 75-50 mg 29
tridacaine ii 79
triderm 79
trientine hcl 50
tri-estarylla 53
trifluoperazine hcl 37
trifluridine 71
trihexyphenidyl hcl 34
TRIJARDY XR TAB ER 24HR 10-5-1000MG 47
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG 47
TRIJARDY XR TAB ER 24HR 25-5-1000MG 47
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG 47
TRIKAFTA PAK 59.5MG 75
TRIKAFTA PAK 75MG 75
TRIKAFTA TAB 100-50-75MG & 150MG 75
TRIKAFTA TAB 50-25-37.5MG & 75MG 75
tri-legest fe 53
tri-linyah 53
tri-lo-estarylla 53
tri-lo-marzia 53
tri-lo-mili 53
tri-lo-sprintec 53
trimethoprim 4
tri-mili 53
trimipramine maleate 33
TRINTELLIX 33
tri-sprintec 53
TRIUMEQ PD TAB 7
TRIUMEQ TAB 7
tri-vylibra 53
tri-vylibra lo 53
TROGARZO 6
TROPHAMINE INJ 10% 70
trospium chloride 61
TRULICITY 47
TRUMENBA 67
TRUQAP 21
TRUXIMA 21
TUKYSA 21
TURALIO 21
turqoz 53
twice-daily clindamycin phosphate (topical) 77
TWINRIX INJ 67
TYBOST 6
TYENNE 64, 65
TYPHIM VI 68

U

UBRELVY 43
unithroid 57
UPTRAVI 31
UPTRAVI PACK TAB 200/800 31
ursodiol 60
USTEKINUMAB 65

V

valacyclovir hcl 8
VALCHLOR 80

valganciclovir hcl 8
valproate sodium 40
valproic acid 40
valsartan 26
valsartan-hydrochlorothiazide tab 160-12.5 mg 26
valsartan-hydrochlorothiazide tab 160-25 mg 26
valsartan-hydrochlorothiazide tab 320-12.5 mg 26
valsartan-hydrochlorothiazide tab 320-25 mg 26
valsartan-hydrochlorothiazide tab 80-12.5 mg 25
VALTOCO 10 MG DOSE 41
VALTOCO 15 MG DOSE 41
VALTOCO 20 MG DOSE 41
VALTOCO 5 MG DOSE 40
valtya 1/50.....53
vancomycin hcl 4
VANCOMYCIN INJ 1 GM..... 4
VANCOMYCIN INJ 500MG 4
VANCOMYCIN INJ 750MG 4
VANFLYTA 21
VAQTA 68
varenicline tartrate 46
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack.....46
VARIVAX 68
VASCEPA.....27
VAXCHORA SUS 68
velivet 54
VELSIPITY 65
VENCLEXTA 21
VENCLEXTA TAB START PK 22
venlafaxine hcl.....33
VENTOLIN HFA.....73
VENTOLIN HFA (INSTITUTIONAL PACK) 74
verapamil hcl 29
VERQUVO.....30
VERSACLOZ.....37
VERZENIO 22
vestura 54
vienva 54
vigabatrin.....41
vigadrone 41
VIGAFYDE 41
vigpoder 41
vilazodone hcl.....33
VIMKUNYA 68
vincristine sulfate 15
vinorelbine tartrate.....15
viorele 54
VIRACEPT..... 6
VIREAD..... 6
VITRAKVI 22
VIVIMUSTA 12
VIVITROL 46
VIVOTIF CAP EC.....68
VIZIMPRO 22
VONJO 22
VOQUEZNA PAK DUAL PAK 60
VOQUEZNA PAK TRIP PK 60
VORANIGO 22
voriconazole 5
VOSEVI TAB 8
VOWST CAP.....60
VRAYLAR.....37
vyfemla 54
vylibra 54
VYZULTA.....71

W

warfarin sodium 62
water for irrigation, sterile irrigation soln 80
WELIREG 14
wera.....54
WESTAB PLUS TAB 27-1MG.....69
WINREVAIR 31
WINREVAIR INJ 45MG 31
WINREVAIR INJ 60MG 31
wixela inhub 76
wymzya fe.....54
WYOST 49

X

XALKORI 22
xarah fe 54
XARELTO.....62
XARELTO STAR TAB 15/20MG.....62
XATMEP 65
XCOPRI.....41
XCOPRI PAK 100-150 41
XCOPRI PAK 12.5-25 41

XCOPRI PAK 150-200MG (MAINTENANCE)....41
XCOPRI PAK 150-200MG (TITRATION) 41
XCOPRI PAK 50-100MG....41
XDEMVY....71
XELJANZ 65
XELJANZ XR 65
xelria fe 54
XERMELO 60
XHANCE....75
XIFAXAN 60
XIGDUO XR TAB 10-1000....48
XIGDUO XR TAB 10-500MG 47
XIGDUO XR TAB 2.5-1000....47
XIGDUO XR TAB 5-1000MG 47
XIGDUO XR TAB 5-500MG....47
XIIDRA 72
XOFLUZA.... 8
XOLAIR....75
XOSPATA 22
XPOVIO PAK (100 MG ONCE WEEKLY) 22
XPOVIO PAK (40 MG ONCE WEEKLY) 22
XPOVIO PAK (40 MG TWICE WEEKLY) 22
XPOVIO PAK (60 MG ONCE WEEKLY) 22
XPOVIO PAK (60 MG TWICE WEEKLY) 22
XPOVIO PAK (80 MG ONCE WEEKLY) 22
XPOVIO PAK (80 MG TWICE WEEKLY) 22
XTANDI....13
xulane 54
XULTOPHY INJ 100/3.6 49

Y

YESINTEK....65
YF-VAX INJ....68
YONSA....13
YUTREPIA....31
yuvafem 54

Z

zafemy 54
zafirlukast 74
zaleplon 43
ZARXIO....62
ZEGALOGUE 55
ZEJULA 22
ZELBORAF....22
ZEMAIRA....75
zenatane 77
ZENPEP CAP 10000UNT....60
ZENPEP CAP 15000UNT....60
ZENPEP CAP 20000UNT....60
ZENPEP CAP 25000UNT....60
ZENPEP CAP 3000UNIT 60
ZENPEP CAP 40000UNT....60
ZENPEP CAP 5000UNIT 60
ZENPEP CAP 60000UNT....60
ZERVIATE 71
zidovudine.... 6
ziprasidone hcl....37
ziprasidone mesylate 37
ZIRABEV 22
ZIRGAN 71
zoledronic acid....49
ZOLINZA....22
zolpidem tartrate 43
ZONISADE 41
zonisamide....41
zovia 1/35....54
ZTALMY 41
zumandimine....54
ZURZUVAE 33
ZYDELIG 23
ZYKADIA....23
ZYLET SUS 0.5-0.3%....70
ZYPREXA RELPREVV 37

Este formulario fue actualizado el 1 de octubre de 2025. Para obtener información más reciente o si tiene otras preguntas, póngase en contacto con el Centro de Servicios a los Afiliados de MVP.

Para miembros de MVP DualAccess (HMO D-SNP):

1-866-954-1872

Siete días a la semana, de 8 am a 8 pm hora del este
1 de abril al 30 de septiembre, lunes a viernes, de 8 am a 8 pm

TTY: 711

Visite **mvphealthcare.com/partdformulary** para ver la lista más actualizada de Formularios y obtener más información sobre la cobertura de medicamentos de la Parte D de Medicare.